



CENTER FOR MEDICARE

TO: All Part D Sponsors

FROM: Cynthia G. Tudor, Ph.D., Director, Medicare Drug Benefit and C & D Data Group

SUBJECT: Process to Request Changes to a Medication Therapy Management Program

DATE: March 2, 2012

All changes to a Part D sponsors' approved Medication Therapy Management (MTM) program for a given contract year must be submitted to CMS for review and approval prior to the implementation of the changes. The following instructions for submitting MTM program change requests updates the previous information provided on March 3, 2011 to all Part D sponsors.

Change Request Policy

1. Part D sponsors may make *positive* changes to the targeting criteria to make the eligibility more inclusive or to increase the number of beneficiaries eligible to receive Part D MTM services, including:
 - Decreasing the minimum number of multiple chronic diseases,
 - Expanding the list of specific chronic diseases that apply,
 - Decreasing the minimum number of multiple covered Part D drugs,
 - Expanding the list of specific covered Part D drugs, or types of drugs, that apply.

2. Part D sponsors may make program enhancements or maintenance changes including changes to:
 - Frequency of identification to increase or promote ease of beneficiary participation,
 - Expand the levels of intervention or services provided to targeted beneficiaries,
 - Methods of documenting and measuring outcomes,
 - The qualified provider of MTM services,
 - Any fee schedules established for pharmacists and other MTM providers if using outside personnel. The CMS will request that Part D sponsors disclose the newly established fees for outside personnel.

3. Part D sponsors may not make any negative changes to their MTM program, including changes that:
 - Promote discriminatory or exclusionary practices,
 - Decrease the number of enrollees eligible for MTM services,
 - Lower quality or robustness of MTM services.

Change Request Submission Process

The Health Plan Management System (HPMS) MTM Program Module supports the tracking and processing of the programs received from Part D sponsors. As part of the process, the module provides a system for sponsors to submit an MTM program description during the Annual Review period as well as change requests during four Update Windows. Part D Sponsors can enter, edit, and submit their program descriptions within HPMS at the contract level, as well as review reports related to the submission. A technical User's Manual is available in HPMS.

Sponsors may request changes to their CMS-approved program during any the following Update Cycle windows:

- September 1 - September 10, prior to the contract year,
- March 1 - March 10, within the contract year,
- June 1 - June 10, within the contract year, and,
- September 1 - September 10, within the contract year.

The MTM Program Module submission gates are automatically open during these Update Cycle windows. Sponsors should (1) directly edit the program description in the applicable data entry page(s) and (2) enter information in the Change Request Form Description field(s) to justify the changes to the applicable data entry page(s). In addition, sponsors must check the attestation, "I attest that the following change(s) do not impact approved MTM marketing materials or such marketing materials will be submitted and approved by CMS as necessary prior to implementation of the change." on the Verify Submission page.

Part D sponsors will receive an email correspondence regarding the approval of the MTM program. Depending upon the number of submitted requests, plans should expect a response within 30 days. The changes should be implemented within a reasonable time following approval. Sponsors may not adjust their bids based on requested changes to their CMS-approved MTM program.

We encourage sponsors to submit changes during the Update Cycle windows, but if you need to request changes outside of these periods, send an email to partd_mtm@cms.hhs.gov to request a contract exception to open the MTM program submission gate in HPMS. Include the contract ID(s) in the email request.

Questions regarding the MTM program Change Request process should be sent via email to partd_mtm@cms.hhs.gov. If you have any questions on accessing the HPMS MTMP module, please contact the HPMS Help Desk at 1-800-220-2028 or hpms@cms.hhs.gov.