Contract Year (CY) 2024 Plan Benefit Package (PBP) Questions & Answers

Q1: How will the new PBP access types be assigned by CMS?

A: The PBP data entry, PBP reports, and PBP view-only access types will be auto-assigned to all plan and bid consultant users that have access to the existing Bid Download/Upload access type. Moving forward, these three new PBP access types will be assigned to plan and bid consultant users upon set up in HPMS. Plans have the option to request the removal of any access type by contacting the HPMS User Access mailbox at hpms_access@cms.hhs.gov.

CMS has also created the PBP/BPT Final Submit access type, which allows designated plan and consultant users to "final submit" the PBP and Bid Pricing Tool (BPT) data for their assigned contract numbers. This new access type enables plans to establish a segregation of duties between the individuals completing the PBP data entry and the final submission of PBP and BPT data, if desired. CMS will issue guidance shortly on how to request the assignment of the new PBP/BPT Final Submit access type.

Q2: Can multiple users work on same plan within the PBP module?

A: Yes. Multiple users may work in parallel on the same plan in the PBP module.

Q3: Is there a way to continue entering benefit details once plan level cost share details are entered without having to come back to the main PBP screen?

A: No. The new workflow captures all of the plan level information and then passes that information to the benefit details section in order to maintain data integrity and validations.

Q4: Can the notes section be bypassed?

A: The notes section is only mandatory in certain situations (e.g., your benefit has both coinsurance and a copayment). It can be bypassed in all other instances. If a notes field is inadvertently opened, a space can be entered in the notes field to move to the next page of data entry.

Q5: How do I enter a $0 cost-sharing value in the PBP?

A: Select the "Yes" option and enter $0 or alternatively select "no" to copay and "no" to coinsurance to record $0 cost-sharing.

Q6: Can I add Medicare-covered and non-Medicare-covered services in the same group?

A: Yes. Medicare-covered and non-Medicare-covered services may be included in the same group.

Q7: Do the same questions appear in the Benefit Detail section for all plan types?

A: While the PBP questions are largely consistent across plan types, there are some variations (e.g., Part B-only plans have different fields than Part A/B plans). Some plan types also require additional data entry pages.

Q8: How do I enter a dental benefit where there is a dollar limit, but the procedures are unlimited?

A: Enter a max plan benefit coverage amount to identify the dollar limit for the procedure.

Q9: Can we copy all of our CY 2023 PBP data into our CY 2024 plans and then make updates where there are new questions or other changes for the upcoming contract year?

A: Yes. Plans can copy their CY 2023 data into their CY 2024 plans using the PBP module and then make additions or edits.

Q10: Is there a maximum number of plans for which we can perform a partial copy?

A: There is no limit at this time.

Q11: Can you please clarify the difference between a partial copy and a full copy?

A: A partial copy allows the user to select certain PBP sections to copy over to the destination plan. A full copy allows the user to copy all PBP sections to the destination plan.

Q12: In the Plan Characteristics section, can I copy the VBID or Rx flags from the previous contract year to the current contract year?

A: These flags are set in the Setup Plans functionality in the HPMS Bid Submission module, which then flows through to the Plan Characteristics section in the new PBP module. Please note that the Part D indicator cannot be changed between contract years.

Q13: Are there certain sections in the copy feature where the plan is limited to copying from year to year?

A: No. All PBP sections can be copied from CY 2023 to CY 2024.

Q14: What are cost share groups?

A: The cost share groups replace many of the grouping features that were present in Sections C and D of the old PBP software. The new PBP module provides the user with the ability to manage their different groups via dashboard functionality.

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Q15: Is there a limit on the number of cost share groups?

A: Yes. There is a limit of 25 for OON or POS groupings. The limit was 15 in CY 2023.

Q16: Can you close and save a page without the data entry on the page being complete (i.e., similar to the "exit without validation" in the old PBP software)?

A: No. You must save the page in order for the data to be retained. This allows the software to generate errors for incorrect data entry.

Q17: Can I undo changes made in the system or revert the changes to an older version?

A: No. There is no option to "undo" changes or revert to a prior version of the data entry in the module. Plans do have the ability to revert to an older version of the PBP by submitting a JSON file (containing the previous version) via the PBP API.

Q18: Will the PBP and BPT be submitted separately in CY 2024?

A: The PBP data will be submitted via the module or API, while the BPT data will be uploaded via a new function in the HPMS Bid Submission module. CMS is introducing a new PBP-BPT final submit functionality, which will allow designated users to "final submit" the full set of plan bid data to CMS. CMS will provide separate technical guidance on the new PBP-BPT final submit process.

Q19: How will the download and submission process work for BPT in 2024?

A: Plans will have the option of downloading pre-populated BPT and/or blank BPT files from the HPMS Bid Submission module. There will also be a new BPT upload functionality in the Bid Submission module. CMS will provide separate technical guidance on the new PBP-BPT final submit process.

Q20: When generating a report, will there be a "Select All" option in the contract number and plan ID fields?

A: While there will not be a "Select All" option, you will be able to select one or more contract numbers and/or plan IDs when generating reports.

Q21: Will the reports in Bid Reports remain the same for 2024 (e.g., service area reports)?

A: Yes. The bid reports will still be available in HPMS for CY 2024.

Q22: What does "Not used in redesign" mean in the mapping file?

A: This label indicates that the field has been either retired or combined with other fields in the new PBP.

Q23: What is the character limit for PBP note fields?

A: Note fields will have a limit of 2000 characters in the new PBP module.

Q24: Will the plan characteristics be carried over from the Setup Plans function in the Bid Submission module?

A: Yes. These data flow from the Setup Plans functionality in the HPMS Bid Submission module.

Q25: Is there a dummy PBP that is available for training internal plan users?

A: No. Plans may access the test PBP module in HPMS at this time.

Q26: How do I create a new plan for CY 2024 that does not exist in CY 2023?

A: You may create a new plan via the Setup Plans functionality in the HPMS Bid Submission module. The new plan structure will then be available for use in the PBP module or PBP API.

Q27: If a plan has a shared in-network and out-of-network MOOP, does it need to entered in the OON only field and the combined field?

A: If there is a shared MOOP, it should be entered into the combined field only.

Q28: Is there an MDB file that is available for download? If not, what other options will be available for downloading data?

A: No. The Access database has been retired for CY 2024. Plans will be able to download their PBP data via a JSON file. CMS has provided a mapping of the data between the MDB and the new JSON format.

Q29: Will plans be able to pull all HMO or all PPO reports into one sheet or workbook?

A: Yes. You will be able to download multiple contracts/plans into a single report or via HTML, Excel, or JSON.

Q30: Will the Part D Senior Savings Model question in the Plan Characteristics section be removed?

A: Yes. This question will be removed.

<u>PBP API</u>

Q1: Are we required to use the new PBP API?

No. Use of the PBP API is **<u>not required</u>**. As in past years, plans will be able to complete their PBP data entry via a user interface (now the PBP module in HPMS) and submit their data via the Bid Submission module in HPMS. **The ability to submit these data via an API is an option for plans, not a requirement.** Plans have the option to continue using the user interface or move to an API-based submission on a timeline that works for their organization.

Q2: How do we request API access in HPMS?

A: Send a request to the HPMS Consultant Access mailbox (HPMSConsultantAccess@cms.hhs.gov) with the following information: user's name, CMS user ID, organization name, and the appropriate requested HPMS API access type(s) from the list below:

API Responsible User: Allows a plan or consultant user to submit and edit HPMS API requests for their assigned contract numbers.

API Technical POC: Allows a plan or consultant user to download the initial key and request/download a replacement key (e.g., replace expiring key).

API Reports - Plan: Provides plan users with view and report access to the HPMS API requests associated with their assigned contract numbers.

API Reports - Consultant: Provides consultant users with view and report access to the HPMS API requests for which they are the responsible user and/or a technical POC

Q3: What are the available PBP API access scopes?

A: The scopes available for the PBP API are:

PBP Data Entry – Supports the submission of PBP data to HPMS.
PBP Data Download – Supports the export of PBP data from HPMS.

Q4: Is requesting an API key required to submit PBPs with the new PBP module?

A: An API key is only required if your organization has chosen to use the new PBP API. Plans can bypass the API process and complete their PBP data entry via a user interface (now the PBP module in HPMS) and submit their data via the HPMS Bid Submission module.

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Q5: Can multiple users have API access? Can users have more than one PBP API scope?

A: Yes. Multiple users can have API access. In fact, if your organization has chosen to use the new PBP API, CMS strongly recommends that more than one user obtain this access. Each API user may have access to one or both PBP API scopes.

Q6: Can one person request API access for multiple staff or must the request come from each individual?

A: An organization may send one request that includes API access requests for multiple users.

Q7: What should an organization do if their technical point-of-contact (POC) leaves the company?

A: Your organization will need to request technical POC access for another individual and then edit your existing API key to add them. You should do this before the current key expires, or you will need to request a new key.

Q8: Can the API submission and PBP Module User Interface (UI) process can be combined? That is, if a PBP is submitted through the API can the user later edit the plan through the UI?

A: Yes. These two submission processes can be used interchangeably.

Q9: How long does each API token stay active?

A: For security reasons, the API Token will expire after 60 minutes. You can request a new token using your API key in HPMS.

Q10: Can our API key/secret last longer than 3 months?

A: No. A 60 day maximum key lifetime is dictated by federal security requirements. Organizations are able to renew API keys at any point before expiration. As long as the key is kept active, you can continue to use the it. If the key expires, you will need to request a new key.

Q11: When submitting via the PBP API, can we submit one JSON file with multiple plan IDs?

A. No. When submitting a PBP via the API, a separate JSON file must be submitted for each unique contract-plan-segment combination.

Q12: When submitting via the PBP API, can we submit multiple JSON files at one time?

A: Yes. You can configure your API to send multiple JSON files at one time. Each call to the PBP data entry endpoint will accept one JSON file. However, you may loop through a set of JSON files during one session as long as you make your final API call within one hour of obtaining your session token. Alternatively, you may choose to obtain a token, submit one JSON file, and then repeat those steps for each contract-plan-segment to ensure your transactions do not timeout.

Q13: When downloading data via the PBP API, can multiple contracts and plan IDs be downloaded at once?

A: Yes. Multiple contracts and plan IDs may be downloaded in a single JSON file via the API.

Q14: If an invalid contract is included with the PBP API submission, will the entire API submission reject?

A: Yes. If an invalid contract is included, the entire submission will reject.

Q15: Will we receive an e-mail from CMS when our API Key is about to expire?

A: Yes. Users will receive a warning message about a week before the key expires.

Q16: Can users submit select sections of a PBP via the API?

A: No. You may only submit a complete PBP via the PBP API.

Q17: Where can I test the API?

A: API testing is being conducted in the HPMS production environment until February 24, 2023. Please refer to the January 4, 2023 HPMS memo entitled "Contract Year (CY) 2024 Plan Benefit Package (PBP) Application Programming Interface (API) Testing in HPMS" for more information.

Q18: What happens if we successfully submit a PBP via the API and need to update what we uploaded? Can we re-upload a modified version of the PBP?

A: Yes. You can submit as many times as needed until the bid submission deadline. This behavior is consistent with the current bid submission process.

Q19: Who should we contact if we have additional questions related to the API?

A: Please submit an email to hpmstechsupport@softrams.com for additional technical assistance.

Q20: Does the order of each node in the API have to be the exact same as the sample file?

A: No. The node order does not need to match the sample JSON file.