DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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CENTERS FOR MEDICARE & MEDICAID SERVICES

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TO: All Medicare Advantage, Prescription Drug Plan, 1876 Cost, and Demonstration Organizations

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SUBJECT: Information for the Second Contract Year (CY) 2025 Drug Pricing and Plan Benefit Previews

CMS appreciates the valuable feedback provided by organizations during the first CY 2025 Medicare Plan Finder (MPF) preview window. This memo provides a summary of known and resolved issues as well as some general reminders in preparation for the second MPF plan preview, which is scheduled for **Tuesday, September 3, 2024 at 6:00 a.m. ET through Friday, September 6, 2024 at 11:59 p.m. ET.**

Note: For issues that appear to be widespread in nature, organizations are **not** required to submit the preview comment for all instances across all plans. CMS recommends reporting the issue for a small subset of cases and then indicating as such in the plan preview comment field.

CY 2025 Plan Benefit Preview

Known Issues:

- For certain scenarios, MPF is incorrectly displaying $0 cost sharing in the catastrophic phase in the "Costs by Drug Tier" table. This issue will be addressed for the October 1, 2024 MPF production launch.

Resolved Issues:

- In-network dental benefits (16) will display when a combination of benefits is being offered.

- Hearing aids - over the counter (18c) will display for all plans that offer the benefit.

- The out-of-network display has been updated to show benefits for the following service categories:

  - Worldwide Emergency/Urgent Coverage (4c)
  - Chiropractic Services (7b)
  - Mental Health Specialty Services (7e)
  - Psychiatric Services (7h)
  - Outpatient Hospital Services (9a)
  - Outpatient Substance Abuse (9c)
  - Transportation Services (10b)
  - Diabetic Supplies and Services (11c)
  - All Other Defined Supplemental Benefits (14c)
  - Medicare Part B Rx Drugs (15)
  - Preventive Dental Services (16b)
  - Comprehensive Dental Services (16c)
  - Eye Exams Non-Medicare (17a)
  - Eyewear Non-Medicare (17b)
  - Hearing Exams Non-Medicare (18a)
  - Hearing Aids Non-Medicare (18b)

Reminders:

- Please refer to **Appendix A** for instructions on how to update certain MPF data fields in HPMS.

- Plans are encouraged to review the plan benefits preview data against the plan benefit reports in HPMS when completing the plan preview. **PLEASE NOTE:** The plan benefit data "as of date" reflects the date on which the benefits data was pulled. If you have made benefit updates after this date, they will **not** be reflected in the preview.

- The LIS cost share modifications that are seen on Medicare.gov based on the data entry navigation (i.e., a user indicating they have additional help) are not reflected as part of the benefits preview. Users must access the drug pricing preview to see this data.

- The Part D Insulin cost share modifications that are seen on Medicare.gov based on the data entry navigation (i.e., a user indicating they have additional help) are not reflected as part of the benefits preview. Users must access the drug pricing preview to see this data.

- Beginning with the second plan preview, the MPF plan card (Figure 1) will now reflect both Medicare and Medicaid benefits offered by D-SNPs.

  - If a benefit is offered by the plan and/or by the state, MPF will display the benefit as offered (green checkmark) on the plan card.
  - If a benefit is not offered by the plan nor by the state, MPF will display the benefit as NOT offered (red X) on the plan card.

  For CY 2025, MPF will not distinguish Medicaid benefits by D-SNP integration level. Rather, the plan card will use the lowest common denominator of Medicaid benefits across all integration levels for a given state.

PLAN BENEFITS

✔ Vision
✔ Dental
✔ Hearing
✘ Transportation
✔ Fitness benefits
✔ Worldwide emergency
✔ Telehealth

See more benefits ⌄

Figure 1: MPF Plan Card

Known Issues:

- None

Resolved Issues:

- Plans participating in the VBID model that meet the below criteria will now accurately display $0 Part D drug cost sharing in the drug pricing preview:

    o Buy down all Part D drugs,
    o For all phases of the Part D benefit, and
    o For all LIS levels

Reminders:

- Only the drugs submitted as part of a given plan's formulary file or excluded drug file will display pricing as part of the drug pricing preview.

- Footnotes for prior authorization, quantity limits, and step therapy information are not included in the plan preview, but will be displayed on MPF.

- The plan pricing preview shows the cost of the drug in each phase of the benefit. The preview does not consider the **threshold** for a given phase of the benefit. For example, if a drug costs $1,000, the preview will show $1,000 in the deductible phase, even though the deductible would be met before the beneficiary pays the full $1,000 cost.

- If a drug is not offered at a given location and frequency (e.g., a drug is not covered for 1-month mail order), the preview will display the full cash price of the drug.

For technical assistance during the second MPF plan preview, please contact the HPMS Help Desk at either hpms@cms.hhs.gov or 1-800-220-2028.

Appendix A

MPF Field	Where to Make Updates in HPMS
View Plan Website	Contract Management > Basic Contract Management > Enter Contract Number > Expand General Information > Org. Marketing Data > Organization Website Address
Address	Plan Bids > Bid Submission > CY 2025 > Edit Contact Data > Update the "Mailing Address" field for the "Customer Service Prospective Member" Contact
Member Phone Number	Plan Bids > Bid Submission > CY 2025 > Edit Contact Data > Update the "Local Phone Number" field for the "Customer Service Current Member" Contact
Non-Member Phone Number	Plan Bids > Bid Submission > CY 2025 > Edit Contact Data > Update the "Local Phone Number" field for the "Customer Service Prospective Member" Contact
Member Phone Number View Provider Directory (if available)	*If you enter the optional URL at the contract level:* Contract Management > Basic Contract Management > Enter Contract Number > Expand General Information > Org. Marketing Data > Update the "URL for this website" under the questions "Do you have a website that lists the physicians who are part of your network?" and "Do you have a website that lists the physicians who are currently accepting new patients?" *If you do not enter the optional URL at the contract level:* Contract Management > Basic Contract Management > Enter Contract Number > Expand General Information > Org. Marketing Data > Organization Website Address