



## **CENTER FOR MEDICARE**

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**DATE:** June 21, 2010

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

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

**SUBJECT:** Upcoming Complaints Tracking Module (CTM) Release

On June 25, 2010, the Centers for Medicare & Medicaid Services (CMS) will implement a new release of the Health Plan Management System (HPMS) Complaints Tracking Module (CTM). The release includes the following changes:

- Plan users will be able to upload supporting documentation to the complaint as well as download attachments from the complaint in the following file formats: .zip, .doc, .docx, .xls, .xlsx, .pdf, .txt, .tif, .gif, .png, .jpeg, and .csv. Plan users will only be able to view attachments uploaded by the contract to which the complaint is assigned. There will also be a free form text field to enter a description of the upload.
- CTM will provide plan users with a dashboard in order to view complaints quickly. The CTM dashboard will display counts for the categories below and provide a hyperlink to drill into more detail. The CTM dashboard will be unique to each contract to which the plan user is assigned. A “Download to Excel” option will also be available.
  - Pending Plan Requests – Complaints assigned to the plan user that have unanswered plan requests to date.
  - Answered Plan Requests – Complaints assigned to the plan user where CMS has responded in a given time frame (remains for 7 days).
  - Issue Level Changes – Complaints assigned to the plan user where the CMS caseworker has changed the Issue Level.
  - Complaints Closed by CMS – Complaints assigned to the plan user that have been closed by a CMS user in a given time frame (remains for 7 days).
  - Complaints Referred to the RPC – Complaints assigned to the plan that have been referred to the retroactive processing contractor (RPC) for action.
- The Search function has been enhanced to allow a user to select the **Back** button following submission of a complaint in order to return to the Search Results page being viewed prior to selecting the complaint.

- Two new indicators have been added to the Search Results page. The first indicator shows whether a complaint has a pending or answered plan request. The second indicator shows whether a complaint has been referred to the RPC.
- The Search page will also provide a **Clear** button to clear previously-entered criteria.
- The Resolution Summary will now be automatically populated with the last Casework Note entered when resolving a complaint. The ability to select additional Casework Notes for the Resolution Summary remains.
- The original author of a Casework Note will be retained in the following instances: a) when selecting a Note for population in the Resolution Summary; b) when reopening a complaint; or when an edit is made. Currently, when a user performs these actions, that user becomes the new author of the Note that had been entered by another caseworker.
- To streamline the Search function, we have removed the following options due to infrequency of use:
  - New Complaints to Caseworker
  - New Comments to Caseworker
  - Complaint Intake
  - Date of Incident
  - Contract Name
  - Has the Complaint been entered into PETS
  - CMS Issue Type
  - Organization
  - Phone
  - Email
  - Plan Member ID
- Resolution Date has been added as a search criterion in the Search Function.
- The CTM User's Manual will be updated to correspond to the new functionality.

For technical assistance with the HPMS CTM, please contact the HPMS Help Desk at either 1-800-220-2028 or [hpms@cms.hhs.gov](mailto:hpms@cms.hhs.gov).

For general questions about complaint handling and casework operating procedures, please contact your plan's casework lead.

Technical data questions related to your plan's CTM performance should be sent to [ctm@cms.hhs.gov](mailto:ctm@cms.hhs.gov).

Thank you for your continued work and support in complaints resolution.