DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Center for Beneficiary Choices 7500 Security Boulevard, Mail Stop C4-23-07 Baltimore, Maryland 21244-1850



PLAN OVERSIGHT & ACCOUNTABILITY GROUP

DATE: June 1, 2006

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

Demonstration Organizations

FROM: Cynthia E. Moreno

Director

SUBJECT: FINAL REMINDER - CY 2007 Bid Upload Requirements

The Health Plan Management System (HPMS) Contract Year (CY) 2007 Bid Upload functionality was made available on May 19, 2006. Organizations should be completing the upload requirements that accompany the physical upload of the bid submission. The upload functionality and upload requirements cited in this document can be found by logging into the HPMS and selecting Plan Bids > Bid Submission > Contract Year 2007 > Upload. As has occurred in past years, if any of the required upload components are not completed by the bid submission deadline which is midnight Pacific Daylight Time June 5, 2006, the bid submission will not be sent forward to the desk review process.

The following is a complete listing of the 2007 upload requirements:

- Service Area Verification (new for CY 2007)
- Plan Crosswalk
- Formulary Crosswalk
- Actuarial Certification
- Two-Year Lookback Spreadsheet
- Bid Submission

Note: Some steps may not be required for every organization/plan.

The sections below describe each upload requirement in greater detail. Please pay special attention to which organizations/plans are bound by each upload requirement.

Service Area Verification

The Service Area Verification step is an upload requirement for <u>all</u> organizations/plans that should have been completed by Tuesday, May 30, 2006. <u>Organizations that have non-concurred should be working with CMS (contacts provided on the following page) to correct the service area prior to submitting the Bid. Once your service area is corrected, you must return to the Service Area Verification and concur.</u>

For MA, Cost, Demo, and PACE organizations with service area issues, please contact Lettica Ramsey (lettica.ramsey@cms.hhs.gov or 410-786-5262) or Lisa Littleaxe (lisa.littleaxe@cms.hhs.gov or 410-786-1106).

For PDP organizations with service area issues, please contact Jennifer Shapiro (jennifer.shapiro@cms.hhs.gov or 410-786-7407).

For employer-only service area issues, please contact Marye Isaacs (marye.isaacs@cms.hhs.gov or 410-786-3276).

For technical questions, please contact the HPMS Help Desk at 1-800-220-2028 or HPMS@cms.hhs.gov or Kristin Finch at 410-786-2873 or Kristin.Finch@cms.hhs.gov.

Plan Crosswalk

The Plan Crosswalk step is an upload requirement for <u>Renewal Contracts</u> (i.e. contracts that existed in CY 2006).

The Plan Crosswalk function requires organizations to identify the relationships between their approved CY 2006 plans and proposed CY 2007 plans. CMS uses the plan crosswalk to identify whether plan rollovers are required for the upcoming contract year due to a plan reconfiguration as well as to identify beneficiary notification requirements.

Formulary Crosswalk

The Formulary Crosswalk step is an upload requirement for <u>all contracts that submitted a formulary</u> to HPMS.

The Formulary Crosswalk function requires organizations to map each Part D plan to a formulary. One formulary may be mapped to one or more plans. In order for this requirement to be considered complete, all plans offering Part D under the contract number that submitted the formulary must be associated with a formulary ID AND all formularies submitted by an organization must be assigned to a plan.

Actuarial Certification

The Actuarial Certification step is an upload requirement for <u>all contracts submitting an MA BPT</u>, Part D (Rx) BPT, or MSA BPT to HPMS.

Organizations are required to upload an initial Actuarial Certification to certify the BPT submission. For 2007, the Actuarial Certification upload functionality is now part of the Substantiation upload. One Actuarial Certification may be submitted for one or more contracts/plan/segments. Additionally, one Actuarial Certification may be submitted for the MA BPT and Part D (Rx) BPT for Medicare Advantage organizations offering Part D. Filenames should be in the following format: filename_date.ext. The Actuarial

Certification upload file may include the following formats: ZIP, TXT, DOC, XLS, JPG, GIF, and PDF.

Two-Year Lookback Spreadsheet

The Two-Year Lookback spreadsheet is an upload requirement for <u>certain MA Renewal Contracts</u>. Organizations will be able to determine whether the Two-Year Lookback spreadsheet upload is required for their organization by reviewing the Upload 2-Year Lookback status screen in the HPMS by going to Plan Bids > Bid Submission > Contract Year 2007 > Upload > 2-Year Lookback. If the contract number/name is listed in the grid, then a Two-Year Lookback spreadsheet is required.

Organizations are required to upload the completed Two-Year Lookback spreadsheet. This upload is at the contract level and is separate from the bid submission.

Bid Submission

The Bid Submission step is an upload requirement for <u>all</u> organizations/plans.

Organizations are required to upload the completed Bid Submission, which is comprised of the applicable BPT(s) and PBP for each plan being submitted. Organizations should ensure that all patches have been applied to the BPT and PBP prior to upload.

Throughout the bid submission process, organizations should review the status of the various components of the Bid Submission Upload to ensure completion. This can be viewed by going to HPMS and selecting Plan Bids > Bid Submission > Contract Year 2007 > Upload > Review Upload Status.

For questions about this process, please contact the HPMS Help Desk at either 1-800-220-2028 or https://example.com/hpms.gov or Kristin Finch at either 410-786-2873 or Kristin.Finch@cms.hhs.gov. Thank you.