Overview of DIR Reporting Requirements, P2P Reconciliation, and Reconciliation Exclusion Process

Part D Webinar

June 10, 2014

10:00 a.m. – 12:00 p.m.

Agenda

- Direct and Indirect Remuneration (DIR) Reporting Requirements
- Question & Answer (Q&A)
- Plan-to-Plan (P2P) Reconciliation Payment Reporting
- Question & Answer (Q&A)
- Reconciliation Exclusion Process
- Question & Answer (Q&A)
- Closing Remarks

Direct and Indirect Remuneration (DIR) Reporting Requirements

Purpose

- To provide a walkthrough of the DIR reporting requirements for contract year 2013, the DIR submission process in HPMS, discuss the DIR reports, and provide DIR helpful resources.

Objectives

- Identify DIR reporting requirements for Contract Year (CY) 2013
- List the DIR submission timeline
- Discuss the process of DIR submission
- Describe Detailed and Summary Reports
- Explain the importance of accurate DIR reports submission for payment
- Review DIR resources

DIR General Reporting Requirements

- Part D sponsors must submit DIR data:
  – At the plan level on the Summary DIR Report for Payment Reconciliation
  – In June following the coverage year
  – Associated with all Part D plans offered during the applicable coverage year
  – On all expected DIRs for the applicable coverage year

DIR General Reporting Requirements (Continued)

- CMS will exclude DIR data reported on the Summary DIR Report for Payment Reconciliation from allowable reinsurance and risk corridor costs.
  - Required by statute to calculate the reinsurance and risk corridor payments using "allowable reinsurance costs" and "allowable risk corridor costs," which must be "actually paid."
  - As defined at 42 CFR 423.308, "actually paid" costs must be actually incurred by the Part D sponsor and net of any applicable DIR.

2013 DIR Reporting Requirements

- Part D sponsors must prepare and submit:
  - DIR Submission Information
  - Summary DIR Report
    - DIR data at the contract plan benefit package (PBP) level
    - Multiple categories of DIR and non-DIR data
  - Detailed DIR Report
    - DIR data at the 11-digit National Drug Code (NDC) level
    - Two (2) categories: Rebates and All Other DIR

Resubmitting Summary DIR for Prior Coverage Years

- Necessary for instances when Part D sponsors receive unanticipated rebate amounts, settlement amounts, or other price concessions after submission deadlines that could result in changes to DIR data.
- Resubmission windows are limited to resubmission of Summary DIR Reports and does not include Detailed DIR.
- Specific resubmission windows for prior coverage years are announced in the Part D DIR Reporting Guidance, along with actions to be taken by the Part D sponsor.

Scenario for Resubmitting Summary DIR Reports for Prior Coverage Years

- Scenario:
  - Part D sponsor must report a change or error for contract years 2006, 2007, and 2008.
- Sponsor Action:
  - Part D Sponsor or CMS can initiate.
  - Submit reopening request to Acumen at PartDPaymentSupport@acumenllc.com
  - Resubmit updated Summary DIR Report using appropriate report template upon notification to resubmit.

2013 DIR Reporting Timeline

Submission Begins	Submission Ends
Sunday, June 1, 2014	Monday, June 30, 2014 at 11:59 p.m. PT

HPMS Homepage

DIR Reporting Module under the Plan Bids tab

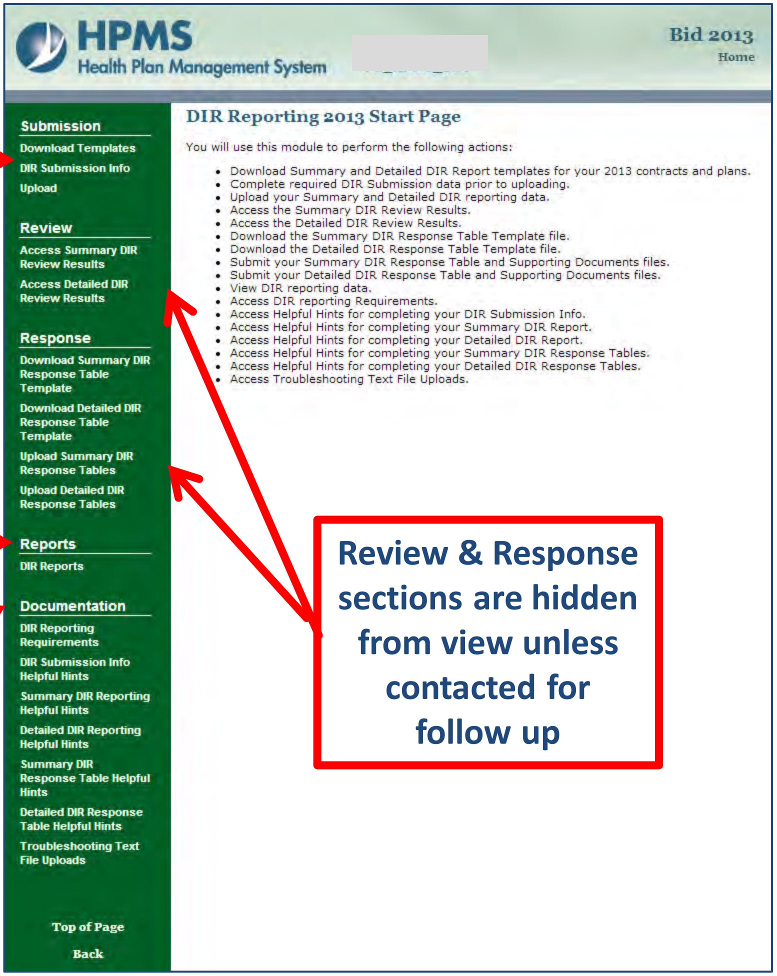
DIR Reporting Page

DIR Reporting Contract Year 2013

Submission section

Reports section

Documentation section

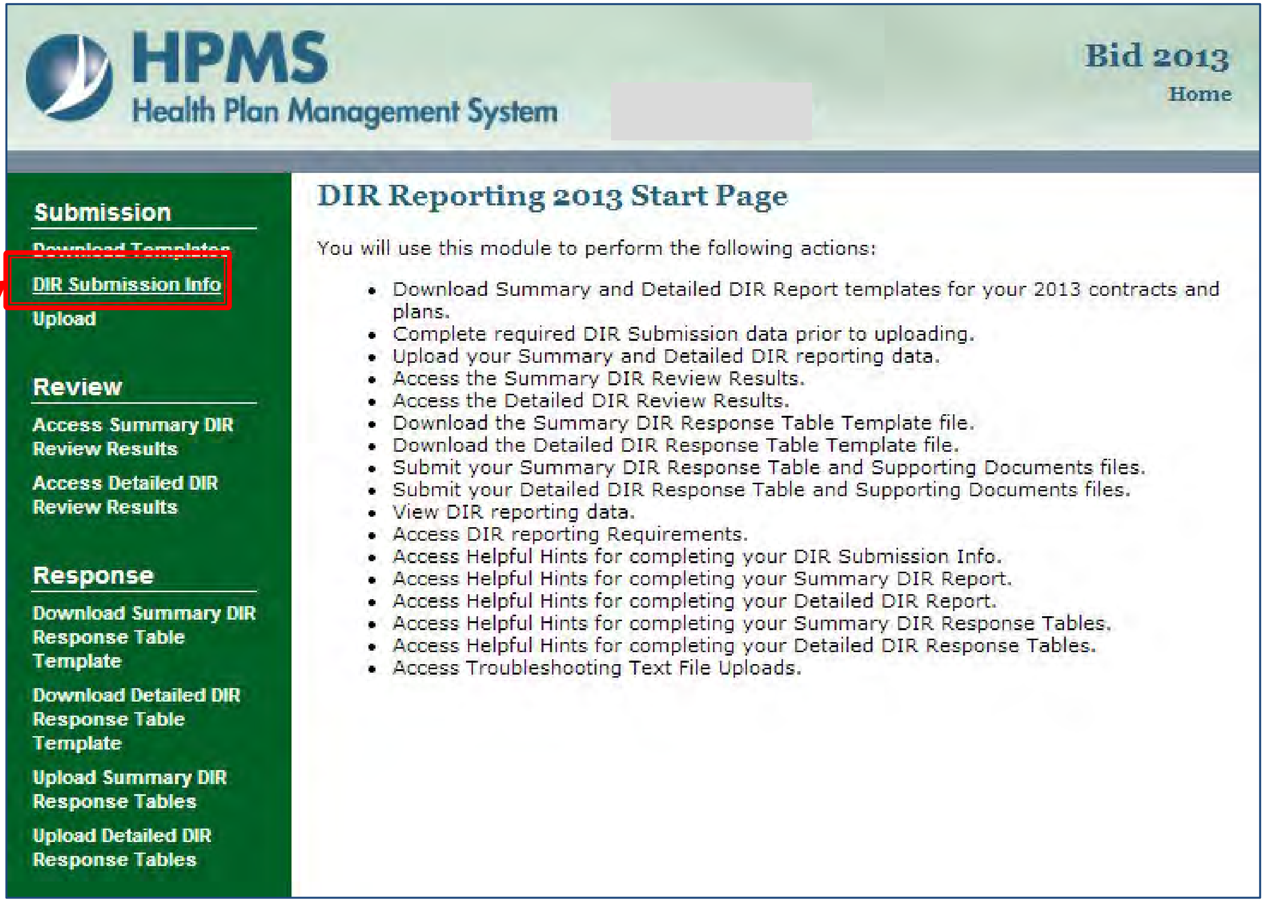


Review & Response sections are hidden from view unless contacted for follow up

DIR Submission Information

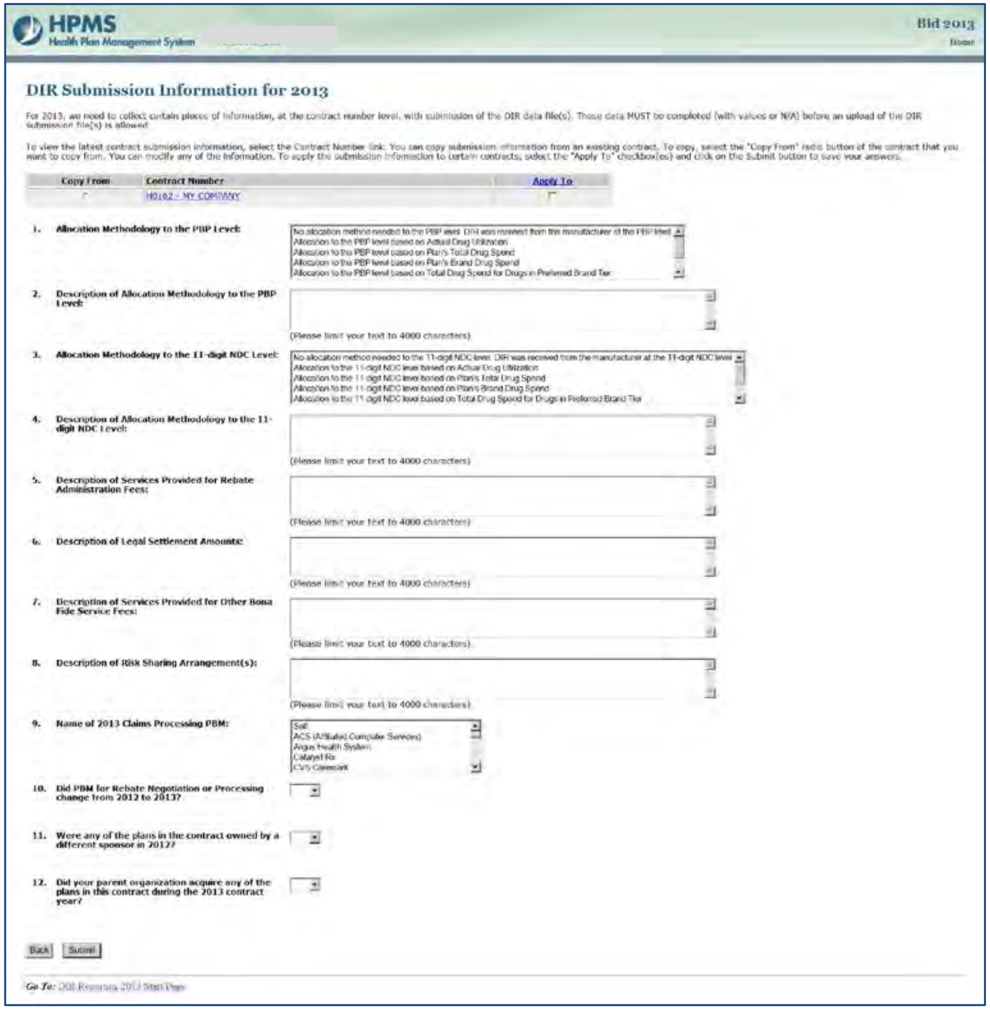
- Plan sponsor information in HPMS must be up-to-date.
- 2013 DIR Submission Information
  - Provide additional information at the contract level regarding DIR and prescription drug event (PDE) data
  - Must submit prior to uploading the Summary and Detailed DIR Reports
  - Must complete all data fields

DIR Submission Information (Continued)



Select to enter DIR Submission Information

DIR Submission Information (Continued)



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Bid 2013
Home

DIR Submission Information for 2013

For 2013, we need to collect certain pieces of information, at the contract number level, with submission of the DIR data file(s). These data MUST be completed (with values or N/A) before an upload of the DIR submission file(s) is allowed.

To view the latest contract submission information, select the Contract Number link. You can copy submission information from an existing contract. To copy, select the "Copy From" radio button of the contract that you want to copy from. You can modify any of the information. To apply the submission information to certain contracts, select the "Apply To" checkbox(es) and click on the Submit button to save your answers.

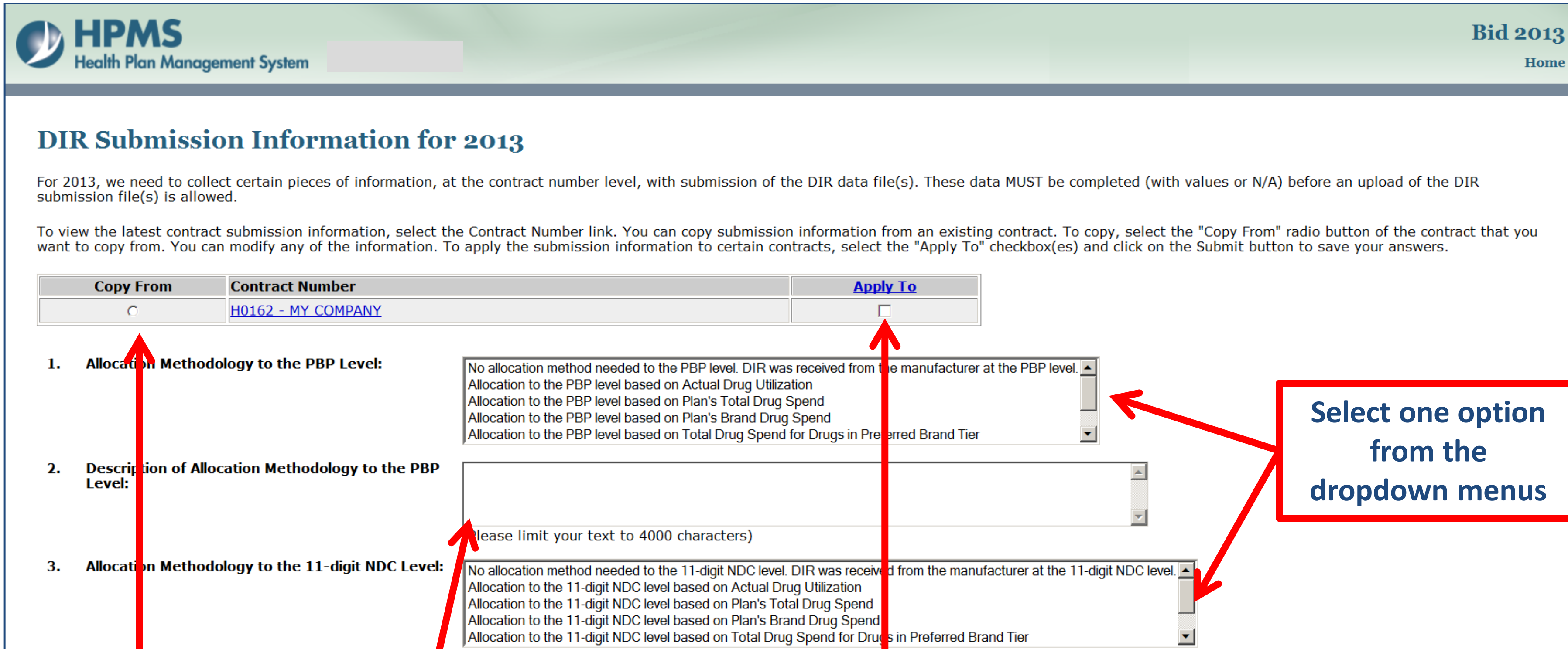
Copy From	Contract Number	Apply To
	H0162 - MY COMPANY	

1. **Allocation Methodology to the PBP Level:**
   - No allocation method needed to the PBP level. DIR was received from the manufacturer at the PBP level
   - Allocation to the PBP level based on Actual Drug Utilization
   - Allocation to the PBP level based on Plan's Total Drug Spend
   - Allocation to the PBP level based on Plan's Brand Drug Spend
   - Allocation to the PBP level based on Total Drug Spend for Drugs in Preferred Brand Tier
2. **Description of Allocation Methodology to the PBP Level:**
   (Please limit your text to 4000 characters)
3. **Allocation Methodology to the 11-digit NDC Level:**
   - No allocation method needed to the 11-digit NDC level. DIR was received from the manufacturer at the 11-digit NDC level
   - Allocation to the 11-digit NDC level based on Actual Drug Utilization
   - Allocation to the 11-digit NDC level based on Plan's Total Drug Spend
   - Allocation to the 11-digit NDC level based on Plan's Brand Drug Spend
   - Allocation to the 11-digit NDC level based on Total Drug Spend for Drugs in Preferred Brand Tier
4. **Description of Allocation Methodology to the 11-digit NDC Level:**
   (Please limit your text to 4000 characters)
5. **Description of Services Provided for Rebate Administration Fees:**
   (Please limit your text to 4000 characters)
6. **Description of Legal Settlement Amounts:**
   (Please limit your text to 4000 characters)
7. **Description of Services Provided for Other Bona Fide Service Fees:**
   (Please limit your text to 4000 characters)
8. **Description of Risk Sharing Arrangement(s):**
   (Please limit your text to 4000 characters)
9. **Name of 2013 Claims Processing PBM:**
   - Self
   - ACS (Affiliated Computer Services)
   - Argus Health System
   - Catalyst Rx
   - CVS Caremark
10. **Did PBM for Rebate Negotiation or Processing change from 2012 to 2013?**
11. **Were any of the plans in the contract owned by a different sponsor in 2012?**
12. **Did your parent organization acquire any of the plans in this contract during the 2013 contract year?**

Back | Submit

Go To: DIR Reporting 2013 Start Page

DIR Submission Information (Continued)



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DIR Submission Information for 2013

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Copy From	Contract Number	Apply To
○	H0162 - MY COMPANY	☐

1. **Allocation Methodology to the PBP Level:**
   - No allocation method needed to the PBP level. DIR was received from the manufacturer at the PBP level.
   - Allocation to the PBP level based on Actual Drug Utilization
   - Allocation to the PBP level based on Plan's Total Drug Spend
   - Allocation to the PBP level based on Plan's Brand Drug Spend
   - Allocation to the PBP level based on Total Drug Spend for Drugs in Preferred Brand Tier
2. **Description of Allocation Methodology to the PBP Level:**
   (Please limit your text to 4000 characters)
3. **Allocation Methodology to the 11-digit NDC Level:**
   - No allocation method needed to the 11-digit NDC level. DIR was received from the manufacturer at the 11-digit NDC level.
   - Allocation to the 11-digit NDC level based on Actual Drug Utilization
   - Allocation to the 11-digit NDC level based on Plan's Total Drug Spend
   - Allocation to the 11-digit NDC level based on Plan's Brand Drug Spend
   - Allocation to the 11-digit NDC level based on Total Drug Spend for Drugs in Preferred Brand Tier

Select one option from the dropdown menus

Must be checked if applying the previous information during a resubmission

Enter a description of all allocation methodologies used

Must be checked during initial submission or if applying the previous information during a resubmission

DIR Submission Information (Continued)

4. Description of Allocation Methodology to the 11-digit NDC Level:

(Please limit your text to 4000 characters)

5. Description of Services Provided for Rebate Administration Fees:

(Please limit your text to 4000 characters)

6. Description of Legal Settlement Amounts:

(Please limit your text to 4000 characters)

7. Description of Services Provided for Other Bona Fide Service Fees:

(Please limit your text to 4000 characters)

8. Description of Risk Sharing Arrangement(s):

(Please limit your text to 4000 characters)

Enter a description or N/A if not applicable

DIR Submission Information (Continued)

9. Name of 2013 Claims Processing PBM:

- Self
- ACS (Affiliated Computer Services)
- Argus Health System
- Catalyst Rx
- CVS Caremark

Enter the name of the PBM or entity that processed the claims. Enter "Self" if internal. If "Other" is selected, enter the name of the entity.

10. Did PBM for Rebate Negotiation or Processing change from 2012 to 2013?

11. Were any of the plans in the contract owned by a different sponsor in 2012?

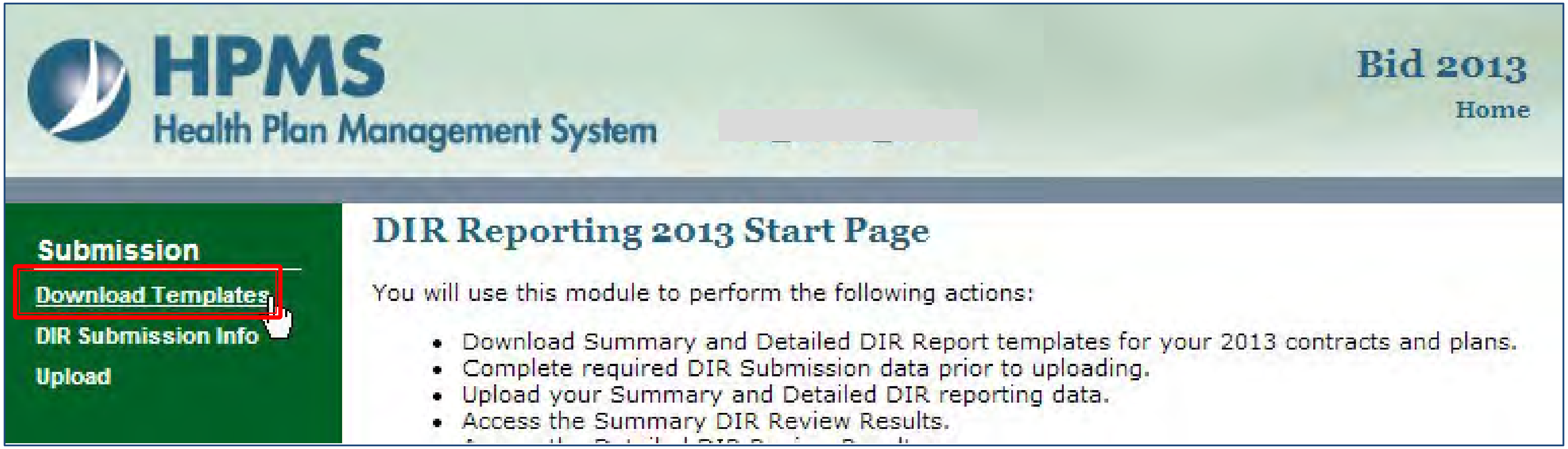
12. Did your parent organization acquire any of the plans in this contract during the 2013 contract year?

A Yes, No, or N/A response is required.
If Yes or No entered, a text box will appear requesting additional information.

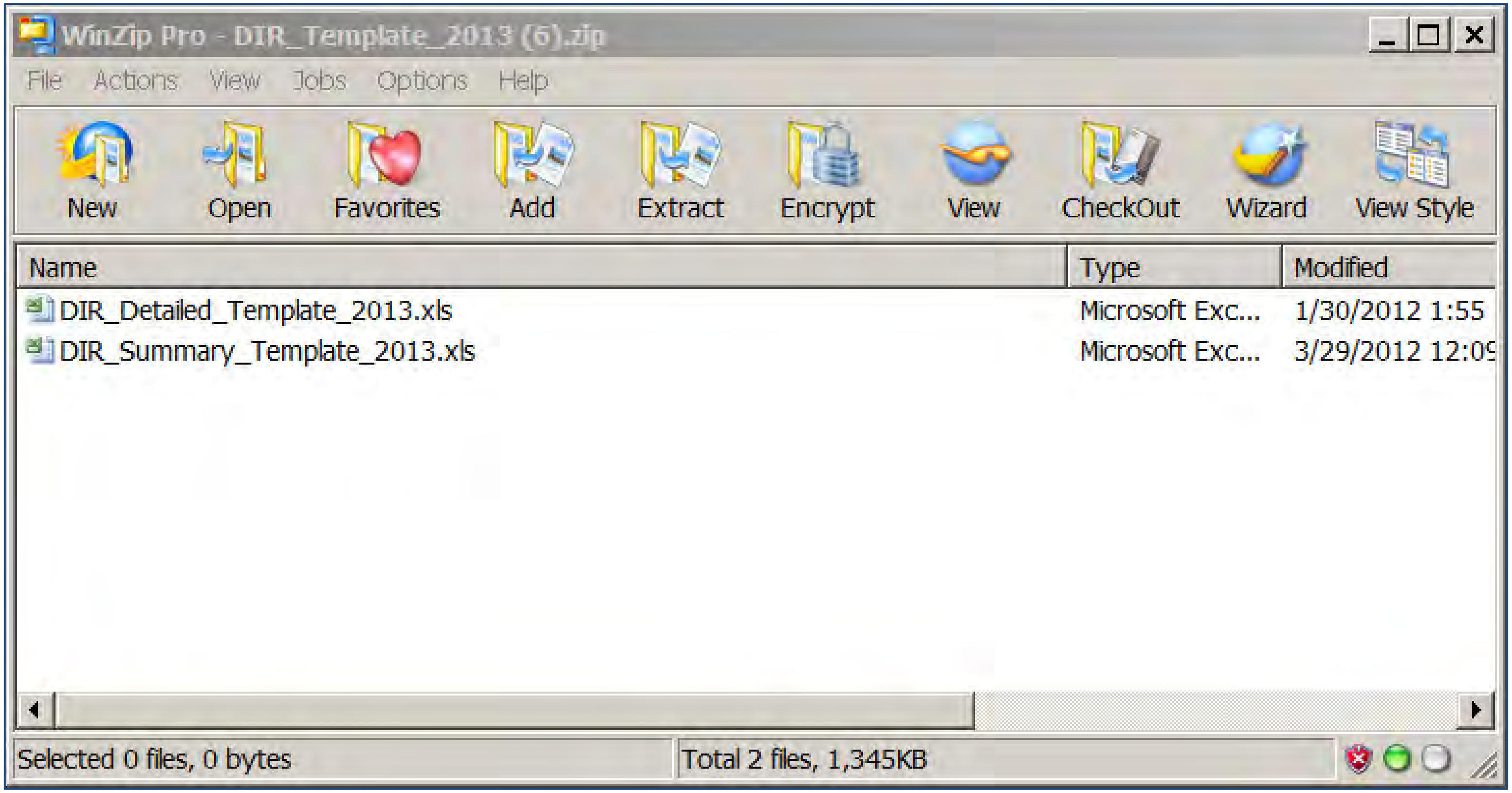
Back | Submit

Go To: DIR Reporting 2013 Start Page

Submission: Download Templates Link



Submission: DIR Templates



Summary DIR Template

Contract-Plan	DIR # 1 - PBM Retained Rebates	DIR # 2 - Rebates Expected But Not Yet Received	DIR # 3 - All Other Rebates	DIR # 4 - Rebate Administration Fees Reported as DIR	DIR # 5 - Price Concessions for Administrative Services	DIR # 6 - Legal Settlement Amounts	DIR # 7 - All Other Price Concessions from Manufacturers	DIR # 8 - Generic Dispensing Incentive Payments and Adjustments	DIR # 9 - Pharmacy Payment Adjustments
S####-001	+27500.25	+7000.00	+137500.65	+9000.00	+2000.00	+0.00	+0.00	-3500.50	-4500.00
S####-002	+0.00	+250.00	+12000.76	+1500.00	+1500.25	+5000.00	+1000.00	-500.00	-1551.00
S####-003	+0.00	+0.00	+0.00	+0.00	+0.00	+0.00	+0.00	+0.00	+0.00

Contract number and Plan ID is a nine (9) character format:
- **Five (5) character Contract number - One (1) letter and Four (4) digits**
- **Dash**
- **Three (3) digit Plan ID**

General Rules for numeric fields:
- **Accepted values are positive, negative, zero, or blank**
- **Allows 12 digits before decimal point and two (2) after**
- **Negative values require a minus (-) sign**
- **One (1) or more cells left blank in a row with some data, the system will consider those blanks to be zero**

Summary DIR Template (continued)

DIR # 10 - Risk Sharing Arrangement Payments and Adjustments	DIR # 11 - All Other DIR	Other DIR Text Description	Total DIR	Rebates at POS?	Rebate Administration Fees Reported as Bona Fide Service Fees	All Other Bona Fide Service Fees	PBM Incentive Payments	PBM Spread Amounts for Retail Pharmacies	PBM Spread Amounts for Mail Order Pharmacies	Additional Comments
+6000.00	+0.00		+181000.40	Y	+27150.06	+0.00	+0.00	+137500.65	+50000.00	DIR #10-Received $6000 from risk sharing arrangement with physicians for prescription drug costs.
-2250.77	+1500.00	1. DIR for PBM penalty: $1500.00	+18450.24		+0.00	+0.00	+1000.00	+12000.76	+0.00	DIR #6-Received $5000 net of legal fees in manufacturer legal settlement. DIR #10-Paid $2250.77 to physicians due to risk sharing arrangement for prescription drug costs. DIR #11- Received $1500 from PBM due to error in applying step therapy requirements.
			+0.00		+0.00	+0.00	+0.00	+0.00	+0.00	NO DIR due to very low membership, no claims with assoicated DIR.

- **4,000 character Limit**
- **Security reasons prohibit the use of certain symbols (; > <)**
- **Must be blank if DIR #11 is blank or zero**
- **Must NOT be blank if positive or negative value in DIR #11**

- **Populate with Y, N, or blank**

- **4,000 character limit**
- **Security reasons prohibit the use of certain symbols (; > <)**
- **Must not be blank if Total DIR is 0 or blank**

Detailed DIR Template

Contract-Plan	11-digit NDC	Rebate Dollars	All Other DIR (i.e. non-rebate DIR)	Comments
S1234-001	55555000101	30000.000	5000.000	
S1234-001	44444000102	11000.000	900.000	
S1234-001	33333000101	1725.000	725.000	
S1234-001	22222000101	0.000	0.000	Generic drug, no rebates received.
S1234-002	<Blank>	0.000	0.000	PBP was active with no enrollment.

- Populate with 11 digits, no dashes

- If the 11-digit NDC is blank, then the Rebate Dollars and All Other DIR must be zero

- 4,000 character limit
- Required when NDC field is blank, or when Rebate Dollars and All Other DIR are both zero for the row, or for any negative values

Note that there are three (3) digits after the decimal point on the dollar fields.

Saving Files

- After entering all Summary or Detailed DIR data into the template files, they must be saved.
- You **must** save the template files as **tab-delimited text files** (ANSI format)**.**
- The text file can be saved with a title of the user's choice.
- Before uploading, the text file **must** be saved into a zip file named with the following designated naming convention.
  - DIR_2013.zip for Summary DIR
  - DIR_NDC_2013.zip for Detailed DIR
- Do not use password protection or other encryption on either the text or zip file.

Additional details and instructions for naming files are available in the Helpful Hints documents.

Submission: Upload Link

Summary and Detailed DIR Upload Page

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Upload DIR Reporting Files

Contract Number	DIR Submission Info (Last Submitted Date)
H5819	04/28/2014 12:11 PM

Note: For 2013, we need to collect certain pieces of information, at the contract number level, with submission of the Summary and Detailed DIR data file(s). These DIR Submission Info data MUST be completed (with values or N/A) before an upload of the Summary or Detailed DIR Report is allowed.

- The initial deadline for DIR submissions is **11:59 PM PT on June 30, 2014**. Prior to the initial deadline, the DIR Submission Info only needs to be completed once.
- After the deadline any resubmissions are required to complete the DIR Submission Info for each upload and to provide an explanation for the resubmission. If a DIR Submission Info is already associated with an upload, the Upload confirmation number will be displayed in the "DIR Submission Info (Last Submitted Date)" column above.

To complete your DIR Submission Info, select the "DIR Reporting 2013 Start Page" link at the bottom of the page and select "DIR Submission Info".

Summary DIR: Enter the location of the zip file that you would like to upload. Please note that the zip file MUST be named **DIR_2013.zip** in order to upload. The zip file MUST contain exactly one tab-delimited text file. If you're not sure of the location, press the browse button to locate the file.

Choose File No file chosen

Detailed DIR: Enter the location of the zip file that you would like to upload. Please note that the zip file MUST be named **DIR_NDC_2013.zip** in order to upload. The zip file MUST contain exactly one tab-delimited text file. If you're not sure of the location, press the browse button to locate the file.

Choose File No file chosen

After selecting the file, complete the upload by selecting the "Upload Selected File(s)" button below. (Note: Upload/Unload status will be emailed to you at

Back Upload Selected File(s)

Go To: DIR Reporting 2013 Start Page

Upload and Unload Dates

- Upload Date
  - When the plan uploads DIR report on HPMS.
- Unload Date
  - When HPMS completes the high level editing of the uploaded report.
- The gap between upload and unload dates is the time taken for processing the high level edits of the submitted reports.

Unload Status Report

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Summary 2013 DIR Unload Status Report

To see the history of upload/unload status for a contract, select the Contract Number link.
If a contract has a Rejected unload status, select the a Rejected link to see the associated errors.
To see the content of the uploaded file, select the File Name link.

Parent Org ID	Parent Org Name	Contract Number	Contract Name	Upload Date	Upload Confirm #	Unload Status	Unload Date	File Name	Submitted By
376	XYZ, Inc.	H5819	TEST LOCAL PPO	04/28/2014 12:13:27 pm	181	Successful	04/28/2014 12:12:08 pm	DIR_2013.ZIP	

Back | Download to Excel

Go To: DIR Reporting 2013 Start Page | DIR Reports 2013

Upload Date and Timestamp

Unload Status: Successful or Failed

Unload Date and Timestamp

Unload Status Report: History

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Home

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Summary 2013 DIR Unload Status Report

History of Summary 2013 Unload Status Report for H5819

If a contract has a Rejected unload status, select the a Rejected link to see the associated errors.
To see the content of the uploaded file, select the File Name link.

Upload and Unload Date and Timestamps and Unload Status

Parent Org ID	Parent Org Name	Contract Number	Contract Name	Upload Date	Upload Confirm #	Unload Status	Unload Date	File Name	Submitted By
376	XYZ, Inc.	H5819	TEST LOCAL PPO	04/28/2014 12:13:27 pm	181	Successful	04/28/2014 12:12:08 pm	DIR_2013.ZIP	
376	XYZ, Inc.	H5819	TEST LOCAL PPO	04/25/2014 11:31:48 am	174	Failed	04/25/2014 11:31:47 am	DIR_2013.ZIP	
376	XYZ, Inc.	H5819	TEST LOCAL PPO	04/25/2014 11:18:48 am	173	Successful	04/25/2014 11:17:38 am	DIR_2013.ZIP	
376	XYZ, Inc.	H5819	TEST LOCAL PPO	04/25/2014 11:12:43 am	172	Failed	04/25/2014 11:11:32 am	DIR_2013.ZIP	
376	XYZ, Inc.	H5819	TEST LOCAL PPO	04/25/2014 11:07:36 am	171	Successful	04/25/2014 11:07:27 am	DIR_2013.ZIP	
376	XYZ, Inc.	H5819	TEST LOCAL PPO	04/25/2014 11:06:45 am	170	Successful	04/25/2014 11:05:23 am	DIR_2013.ZIP	
376	XYZ, Inc.	H5819	TEST LOCAL PPO	04/25/2014 11:03:57 am	169	Successful	04/25/2014 11:03:19 am	DIR_2013.ZIP	

Close

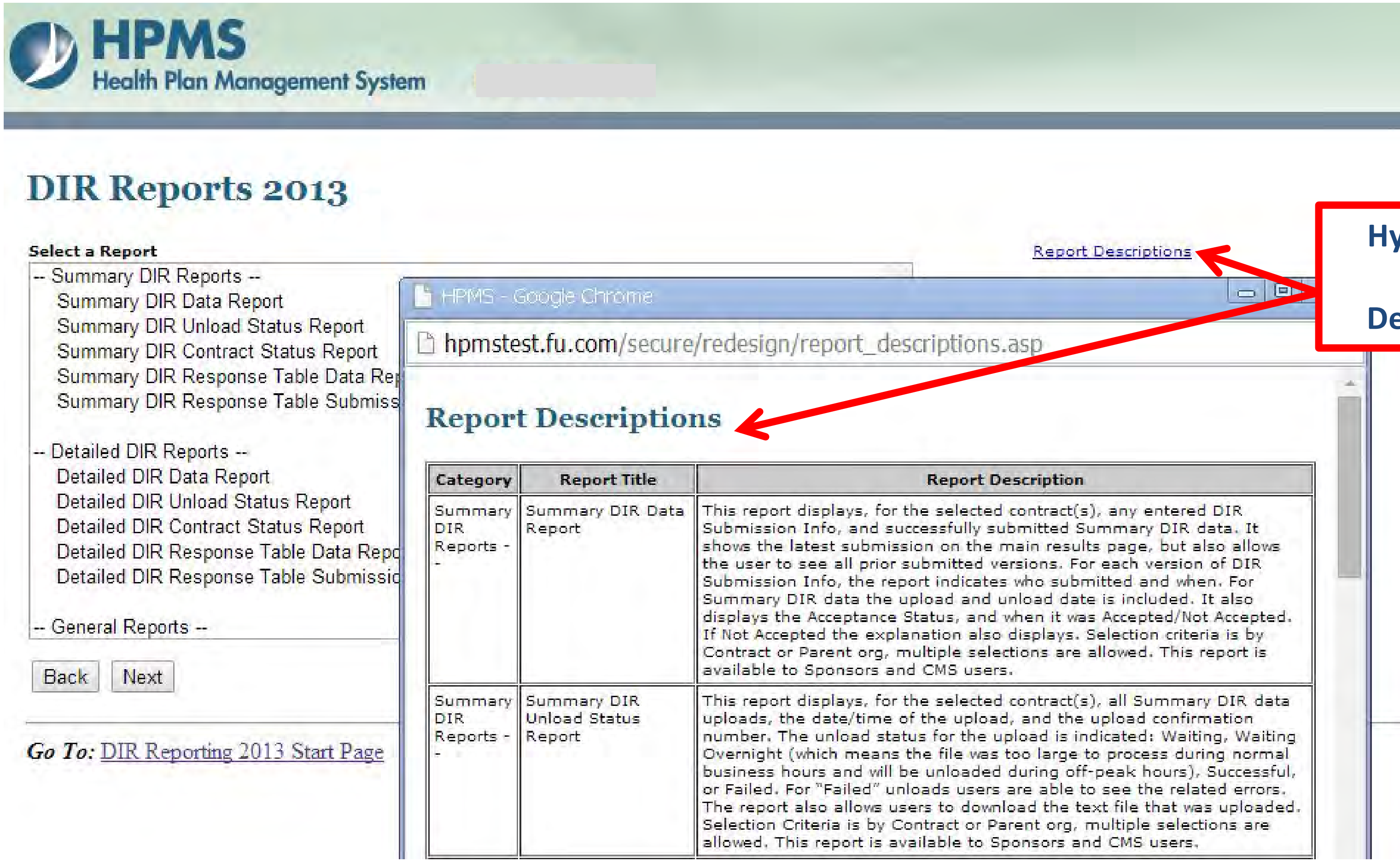
Summary DIR Reports

- Summary DIR Report includes:
  - Summary DIR Data Report
  - Summary DIR Unload Status Report
  - Summary DIR Contract Status Report
  - Summary DIR Response Table Data Report
  - Summary DIR Response Table Submission Report

Detailed DIR Reports

- Detailed DIR Report includes:
  - Detailed DIR Data Report
  - Detailed DIR Unload Status Report
  - Detailed DIR Contract Status Report
  - Detailed DIR Response Table Data Report
  - Detailed DIR Response Table Submission Report

Report Descriptions



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DIR Reports 2013

Select a Report

Report Descriptions

-- Summary DIR Reports --
Summary DIR Data Report
Summary DIR Unload Status Report
Summary DIR Contract Status Report
Summary DIR Response Table Data Rep
Summary DIR Response Table Submiss

-- Detailed DIR Reports --
Detailed DIR Data Report
Detailed DIR Unload Status Report
Detailed DIR Contract Status Report
Detailed DIR Response Table Data Repo
Detailed DIR Response Table Submissio

-- General Reports --

Back Next

Go To: DIR Reporting 2013 Start Page

HPMS - Google Chrome

hpmstest.fu.com/secure/redesign/report_descriptions.asp

Report Descriptions

Category	Report Title	Report Description
Summary DIR Reports - -	Summary DIR Data Report	This report displays, for the selected contract(s), any entered DIR Submission Info, and successfully submitted Summary DIR data. It shows the latest submission on the main results page, but also allows the user to see all prior submitted versions. For each version of DIR Submission Info, the report indicates who submitted and when. For Summary DIR data the upload and unload date is included. It also displays the Acceptance Status, and when it was Accepted/Not Accepted. If Not Accepted the explanation also displays. Selection criteria is by Contract or Parent org, multiple selections are allowed. This report is available to Sponsors and CMS users.
Summary DIR Reports - -	Summary DIR Unload Status Report	This report displays, for the selected contract(s), all Summary DIR data uploads, the date/time of the upload, and the upload confirmation number. The unload status for the upload is indicated: Waiting, Waiting Overnight (which means the file was too large to process during normal business hours and will be unloaded during off-peak hours), Successful, or Failed. For "Failed" unloads users are able to see the related errors. The report also allows users to download the text file that was uploaded. Selection Criteria is by Contract or Parent org, multiple selections are allowed. This report is available to Sponsors and CMS users.

Hyperlink to Report Descriptions

Summary 2013 DIR Data Report

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Bid 2013
Home

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Summary 2013 DIR Data Report

To see all versions of the DIR Data Report, please select the Contract Number link.
To see all versions of the DIR Submission Info Report, please select the DIR Submission Info link.
To view and/or download the uploaded Description of Allocation Methodology attachment, please select the filename link.

Contract: H5819 - TEST LOCAL PPO
Parent Organization: XYZ, Inc. (376)

Upload Date: 04/28/2014 12:13:27pm
Unload Date: 04/28/2014 12:12:08pm

Status: Waiting for Acceptance (04/28/2014 12:13:48pm)

DIR Submission Info

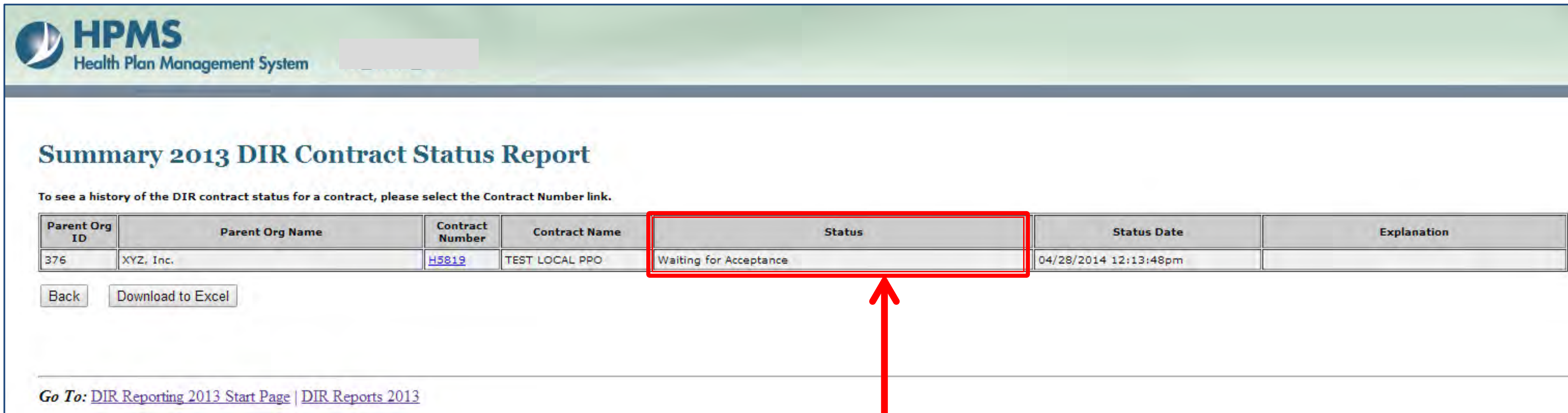
Allocation Methodology to the PBP Level:	Allocation to the PBP level based on Actual Drug Utilization
Description of Allocation Methodology to the PBP Level:	test data for CMS training
Allocation Methodology to the 11-digit NDC Level:	Allocation to the 11-digit NDC level based on Plan's Total Drug Spend
Description of Allocation Methodology to the 11-digit NDC Level:	test data for CMS training
Description of Services Provided for Rebate Administration Fees:	test data for CMS training
Description of Legal Settlement Amounts:	test data for CMS training
Description of Services Provided for Other Bona Fide Service Fees:	test data for CMS training
Description of Risk Sharing Arrangement(s):	test data for CMS training
Name of 2013 Claims Processing PBM:	Argus Health System
Did PBM for Rebate Negotiation or Processing change from 2012 to 2013?	Yes
Name of 2013 PBM for Rebate Negotiation or Processing:	Envision Rx Options
Plans in the contract owned by a different sponsor in 2012:	test data for CMS training
Plans acquired by parent organization during the 2013 contract year:	No
Reason for DIR Data Resubmission:	test data for CMS training
Submission Information:	- 4/28/2014 12:11:52 PM

Plan ID	DIR # 1 - PBM Retained Rebates	DIR # 2 - Rebates Expected But Not Yet Received	DIR # 3 - All Other Rebates	DIR # 4 - Rebate Administration Fees Reported as DIR	DIR # 5 - Price Concessions for Administrative Services	DIR # 6 - Legal Settlement Amounts	DIR # 7 - All Other Price Concessions from Manufacturers	DIR # 8 - Generic Dispensing Incentive Payments and Adjustments	DIR # 9 - Pharmacy Payment Adjustments	DIR # 10 - Risk Sharing Arrangement Payments and Adjustments	DIR # 11 - All Other DIR	Other DIR Text Description	Total DIR	Rebates at POS?	Rebate Administration Fees Reported as Bona Fide Service Fees	All Other Bona Fide Service Fees	PBM Incentive Payments	PBM Spread Amounts for Retail Pharmacies	PBM Spread Amounts for Mail Order Pharmacies	Additional Comments
001	+1200.87	+1240.98	+300.98	+299.43	+1240.98	+300.98	+299.43	+1240.98	+299.43	+299.43	+1240.98	test data	+7964.47	Y	+453.43	+1240.98	+765.98	+235.65	+765.98	test data
002	+306.57	+296.45	+100.34	+100.45	+296.45	+100.34	+100.45	+296.45	+100.45	+100.45	+296.45	test data	+2094.85	Y	+4346.50	+296.45	+674.88	+345.78	+674.88	test data
003	+1250.00	+1249.45	+500.00	+403.32	+1249.45	+500.00	+403.32	+1249.45	+403.32	+403.32	+1249.45	test data	+8861.08	Y	+12.00	+1249.45	+345.77	+26.87	+345.77	test data

Back | Download to Excel

Review Section

Contract Status Report: Waiting for Acceptance



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Summary 2013 DIR Contract Status Report

To see a history of the DIR contract status for a contract, please select the Contract Number link.

Parent Org ID	Parent Org Name	Contract Number	Contract Name	Status	Status Date	Explanation
376	XYZ, Inc.	H5819	TEST LOCAL PPO	Waiting for Acceptance	04/28/2014 12:13:48pm	

Back | Download to Excel

Go To: DIR Reporting 2013 Start Page | DIR Reports 2013

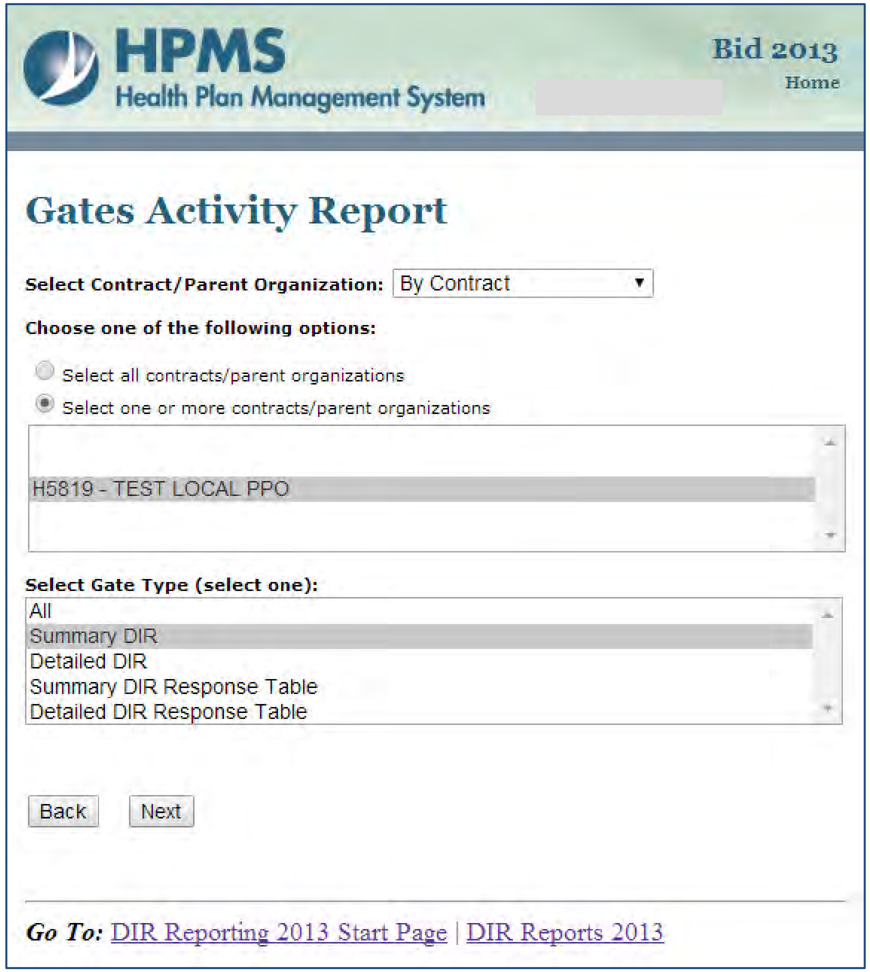
Statuses include: Resubmission Requested, Waiting for Acceptance, Accepted, or Not Accepted

Note that Acceptance status only means that the file has been included in Payment Reconciliation. It does not mean that CMS believes that the data is accurate in the submission.

General Reports

- General Report includes:
  - Gates Activity Report
  - Parent Org Contract-Plan Report

Gates Activity Report



Gates Activity Report: Summary DIR

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Bid 2013
Home

Gates Activity Report

Gate Type: Summary DIR

Report Date: 4/28/2014 9:05:55 PM ET

To see all the history of the Gates Activity Report for a contract, please select the Contract Number link.

Parent Org Name	Parent Org ID	Contract Number	Gate Type	Resubmission Request Date	Submission Deadline	Reason	Action By
XYZ, Inc.	376	H5819	Summary DIR	04/28/2014 09:01:52 pm	07/10/2014 05:00:00 pm	Sponsor requested changes to the DIR report in a reopening request	SUPERUSER 1

Back   Download to Excel

Go To: DIR Reporting 2013 Start Page | DIR Reports 2013

Gates Activity Report: Summary DIR History

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Bid 2013
Home

Gates Activity Report - History for H5819

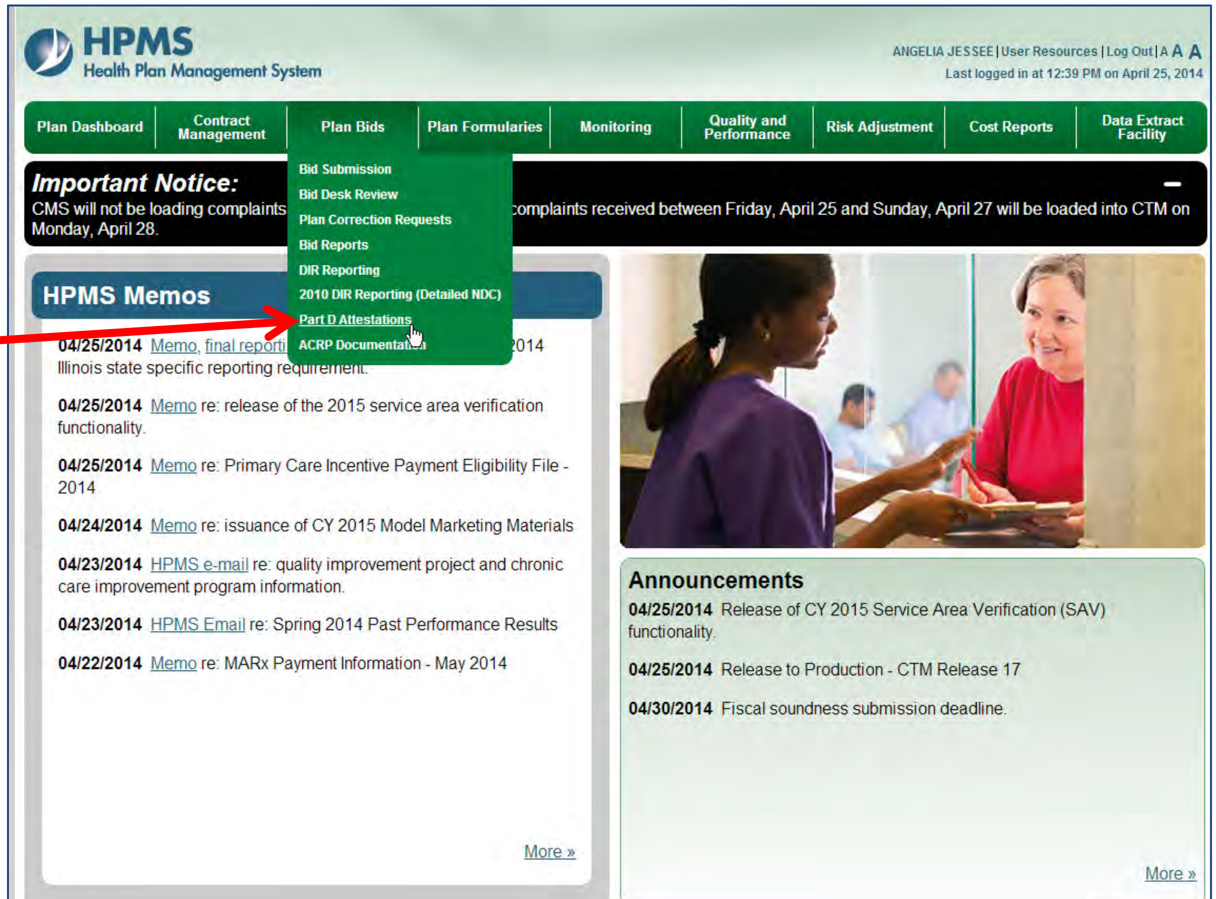
Gate Type: Summary DIR

Report Date: 4/28/2014 8:19:13 PM ET

Parent Org Name	Parent Org ID	Contract Number	Gate Type	Gate Action	Resubmission Request Date	Submission Deadline	Reason	Action By
XYZ, Inc.	376	H5819	Summary DIR	Opened	04/28/2014 05:25:32 pm	06/30/2014 12:00:00 am	.	SUPERUSER 1
XYZ, Inc.	376	H5819	Summary DIR	Opened	04/25/2014 08:35:41 am	08/06/2014 12:00:00 pm	Initial submission period opened by CMS.	SUPERUSER 1
XYZ, Inc.	376	H5819	Summary DIR	Opened	04/15/2014 01:26:58 pm	04/24/2014 02:00:00 am	Sponsor requested changes to the DIR report in a reopening request	SUPERUSER 1
XYZ, Inc.	376	H5819	Summary DIR	Closed	04/01/2014 03:33:53 pm	04/01/2014 03:33:53 pm	Sponsor needs to update report based upon audit findings	SUPERUSER 1

Part D Attestations

Part D Attestations



Part D Attestations 2013 Start Page

Submission section

Reports section

Documentation section

DIR Helpful Resources

- “Helpful Hints” documents within the DIR module on the Health Plan Management System (HPMS)
- HPMS Memo, titled “Draft Medicare Part D DIR Reporting Requirements for 2013” released on April 17, 2014
- HPMS Memo, titled “Final Medicare Part D DIR Reporting Requirements for 2013” released on May 28, 2014

Contacts for DIR Related Questions

- Technical assistance – trouble uploading the file or downloading the file, HPMS access issues –

  HPMS help desk 1-800-220-2028 or hpms@cms.hhs.gov.
- Guidance or policy questions – DIR_Reporting_Reqts@cms.hhs.gov.
- Questions regarding gate open/close, submission of Response tables, questions about the reviews and review letters contact Acumen at PartDPaymentSupport@acumenllc.com.

Knowledge Test #1

Please select your response to this question.

- The submission deadline for DIR reporting is ________.
  a) Sunday, June 2, 2014 at 11:59 p.m. ET
  b) Monday, June 30, 2014 at 11:59 p.m. PT
  c) Tuesday, July 1, 2014 at 11:59 p.m. ET
  d) Tuesday, June 24, 2014 at 11:59 p.m. PT

Knowledge Test #2

Please select your response to this question.

- There are ________ types of DIR data reports to submit.
  a) Two (2)
  b) Three (3)
  c) One (1)
  d) Zero (0)

Knowledge Test #3

Please select your response to this question.

- ________ is used for Part D Payment Reconciliation.
  a) Detailed DIR Report
  b) Summary DIR Report
  c) General Report

Question & Answer (Q&A)

Plan-to-Plan (P2P) Reconciliation Payment Reporting

Purpose

- To provide guidance on requirements to submit the record of P2P reconciliation payments.

Objectives

- Populate the P2P spreadsheet
- List the required fields in the Excel spreadsheet
- Discuss the method for submitting P2P attestations
- Define attestations requirements

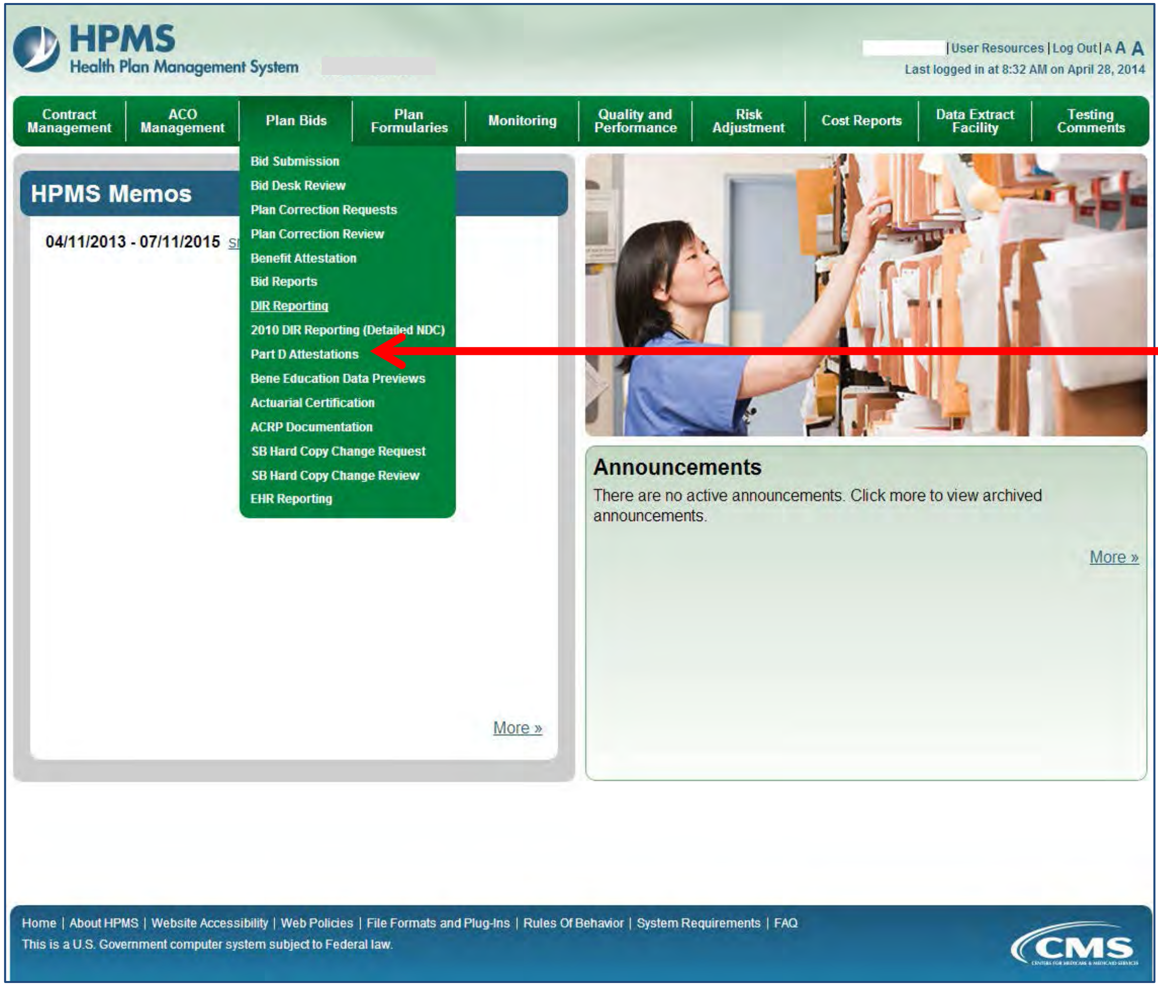
P2P Payment Reporting

- Must submit the Record of P2P Reconciliation Payments to reflect any P2P payments made for the contract year.
  - In the Excel spreadsheet
  - A separate report for each contract

P2P Payment Reporting (Continued)

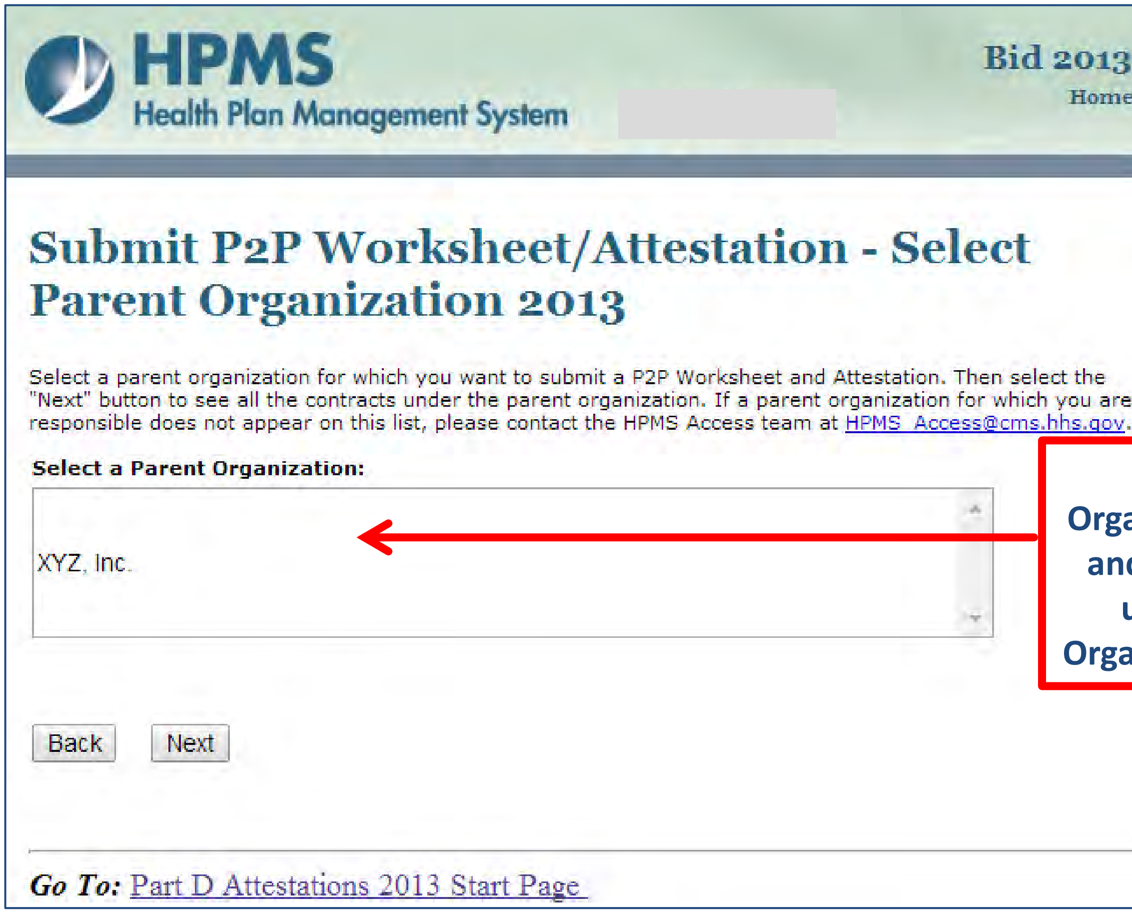
- Attestations
  - Only available to CEO, CFO, or COO
  - Must be submitted electronically through HPMS
  - One (1) attestation per parent organization per contract year
  - **May not be substituted or revised**
    - Must notify CMS if you become aware of an error or potential error in the PDE records submitted to CMS for contract year 2013 and work to rectify the error.
    - Can provide attachment to attestation describing the error, magnitude of the error, and timeline and expectations for resolving the error.

Part D Attestations



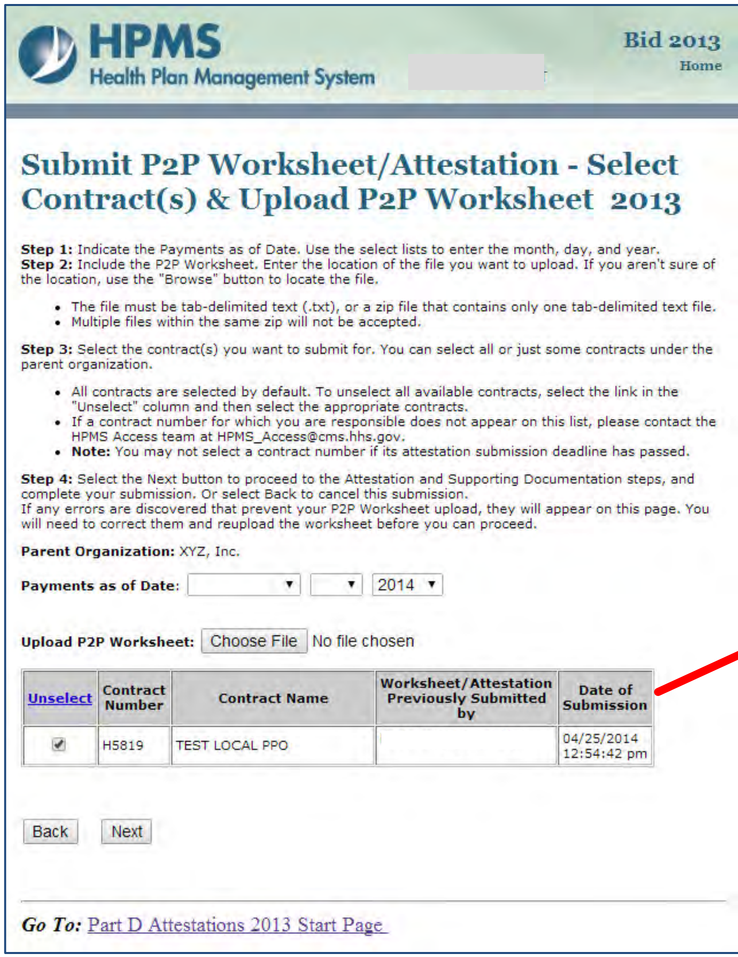
Part D Attestations under the Plan Bids tab

Submit P2P Worksheet/Attestation



Select a Parent Organization, click next, and a list of contracts under the Parent Organization will appear

Submit P2P Worksheet/Attestation (Continued)



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Bid 2013
Home

Submit P2P Worksheet/Attestation - Select Contract(s) & Upload P2P Worksheet 2013

Step 1: Indicate the Payments as of Date. Use the select lists to enter the month, day, and year.
Step 2: Include the P2P Worksheet. Enter the location of the file you want to upload. If you aren't sure of the location, use the "Browse" button to locate the file.

- The file must be tab-delimited text (.txt), or a zip file that contains only one tab-delimited text file.
- Multiple files within the same zip will not be accepted.

Step 3: Select the contract(s) you want to submit for. You can select all or just some contracts under the parent organization.

- All contracts are selected by default. To unselect all available contracts, select the link in the "Unselect" column and then select the appropriate contracts.
- If a contract number for which you are responsible does not appear on this list, please contact the HPMS Access team at HPMS_Access@cms.hhs.gov.
- **Note:** You may not select a contract number if its attestation submission deadline has passed.

Step 4: Select the Next button to proceed to the Attestation and Supporting Documentation steps, and complete your submission. Or select Back to cancel this submission.
If any errors are discovered that prevent your P2P Worksheet upload, they will appear on this page. You will need to correct them and reupload the worksheet before you can proceed.

Parent Organization: XYZ, Inc.

Payments as of Date: 2014

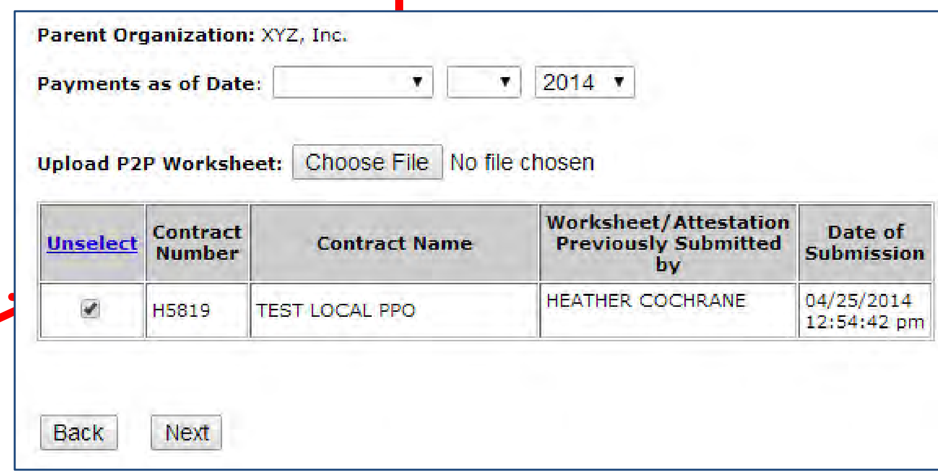
Upload P2P Worksheet: Choose File No file chosen

Unselect	Contract Number	Contract Name	Worksheet/Attestation Previously Submitted by	Date of Submission
✔	H5819	TEST LOCAL PPO		04/25/2014 12:54:42 pm

Back Next

Go To: Part D Attestations 2013 Start Page

Payment as of Date indicates the date that the Part D sponsor submitted the most recent P2P Payments for 2013 P2P payment activity. **This date cannot be a future date.**



Parent Organization: XYZ, Inc.

Payments as of Date: 2014

Upload P2P Worksheet: Choose File No file chosen

Unselect	Contract Number	Contract Name	Worksheet/Attestation Previously Submitted by	Date of Submission
✔	H5819	TEST LOCAL PPO	HEATHER COCHRANE	04/25/2014 12:54:42 pm

Back Next

Submit P2P Worksheet/Attestation (Continued)

P2P Worksheet/Attestation - Complete Attestation & Upload Supporting Doc 2013

Your P2P Worksheet upload **passed validation** for the contracts listed below. **In order to complete your P2P Worksheet/Attestation submission, you must enter your title and select the "Submit" button below.** Optionally, you may also attach supporting documentation.

Payments as of Date: February 19, 2014

Contract Number	Contract Name	Number of Rows for the Contract
H5819	TEST LOCAL PPO	1

NOTE: The Attachment is only for supporting documentation to the attestation, not the attestation itself. The file must be one of the following types of files, or a zip file that only contains the following types of files: .doc, .docx, .xls, .xlsx, .pdf, .gif, .jpg, and .txt.

Upload Supporting Documentation Attachment: Choose File No file chosen

After reviewing all information on this page, if it is correct please enter your Title below and select the "Submit" button to electronically sign and submit the attestation.

Pursuant to the contract(s) between the Centers for Medicare & Medicaid Services (CMS) and the Medicare Part D Organization(s) listed above, hereafter referred to as the Part D Organization, governing the operation of the contract numbers listed above, the Part D Organization hereby makes the following attestations concerning CMS payments to the Part D Organization:

The Part D Organization attests that in accordance with 1860D-24(a) of the Act, which requires Part D sponsors to perform coordination of benefits activities with other p ... uires Part D sponsors to comply with all administration processes established by CMS to ensure effective coordination between plans, it has made accurate and complete plan-to-plan ... based on best knowledge, information and belief, as directed by the P2P Payable Report and the P2P Receivable Report. In addition, the Part D Organization attests that based on best k ... n reconciliation payment data that is reported to CMS in the 2013 Record of Plan-to-Plan Reconciliation Payments with respect to the Part D plans offered under the above- ... er 31, 2013 is accurate, complete, and truthful.

Signature (e-sign)

Printed Name

CEO

Title

XYZ, Inc.

Organization Name

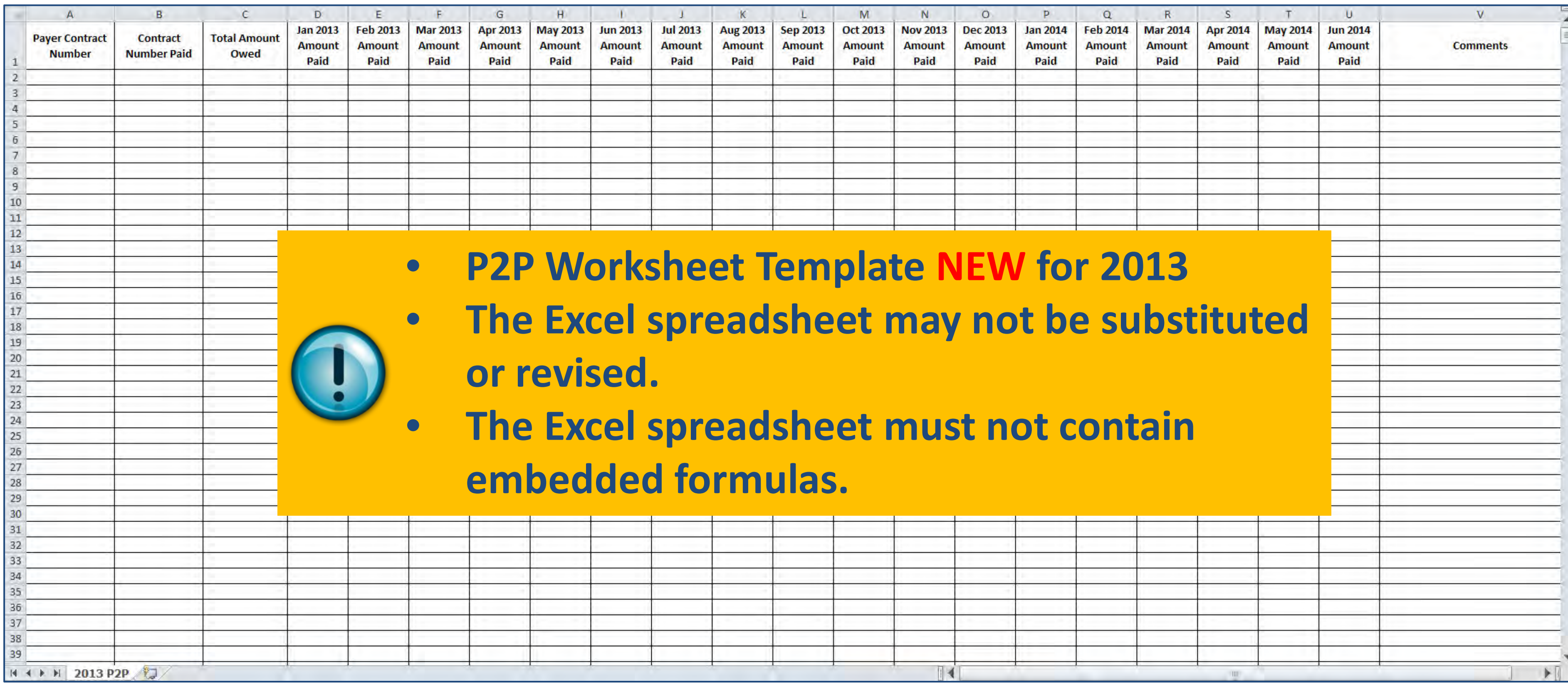
4/28/2014

Date

The Printed Name (of user), Organization name, and Date will auto-populate. The User should type in their Title.

Must be signed by CEO, CFO, or COO. Will pop-up when "submit" is chosen.

2013 P2P Worksheet Template



Payer Contract Number	Contract Number Paid	Total Amount Owed	Jan 2013 Amount Paid	Feb 2013 Amount Paid	Mar 2013 Amount Paid	Apr 2013 Amount Paid	May 2013 Amount Paid	Jun 2013 Amount Paid	Jul 2013 Amount Paid	Aug 2013 Amount Paid	Sep 2013 Amount Paid	Oct 2013 Amount Paid	Nov 2013 Amount Paid	Dec 2013 Amount Paid	Jan 2014 Amount Paid	Feb 2014 Amount Paid	Mar 2014 Amount Paid	Apr 2014 Amount Paid	May 2014 Amount Paid	Jun 2014 Amount Paid	Comments

- P2P Worksheet Template **NEW** for 2013
- The Excel spreadsheet may not be substituted or revised.
- The Excel spreadsheet must not contain embedded formulas.

P2P Worksheet Template (Continued)

Payer Contract Number	Contract Number Paid	Total Amount Owed

Enter CMS Contract Number of the contract the sponsor is certifying for the applicable contract year. Field cannot be blank

Indicate the CMS contract number that the Part D sponsor's contract paid

Indicate the sum of the total amount found on Report 41, the P2P Receivable Report (for negative amounts only), and the total amount found on Report 43, the P2P Payable Report (for positive amounts only), which is owed to the contract indicated in the "Contract Number Paid" column

P2P Worksheet Template (Continued)

- Total Amount Owed equals the sum of:
  - Report 41 – negative amount from Contract of Record trailer considered positive amount paid to other contract
  - Report 43 – positive amount from Submitting Contract Trailer

Example:

Report 41	-$50.00 (change to $50.00)
Report 43	$500.00

Total Amount Owed = $550.00

P2P Worksheet Template (Continued)

Jan 2013 Amount Paid	Feb 2013 Amount Paid	Mar 2013 Amount Paid	Apr 2013 Amount Paid	May 2013 Amount Paid	Jun 2013 Amount Paid	Jul 2013 Amount Paid	Aug 2013 Amount Paid	Sep 2013 Amount Paid	Oct 2013 Amount Paid	Nov 2013 Amount Paid	Dec 2013 Amount Paid

Report the total amount that was **actually paid** for each month to the contract indicated in the "Contract Number Paid" column for the applicable contract year through June 2014.

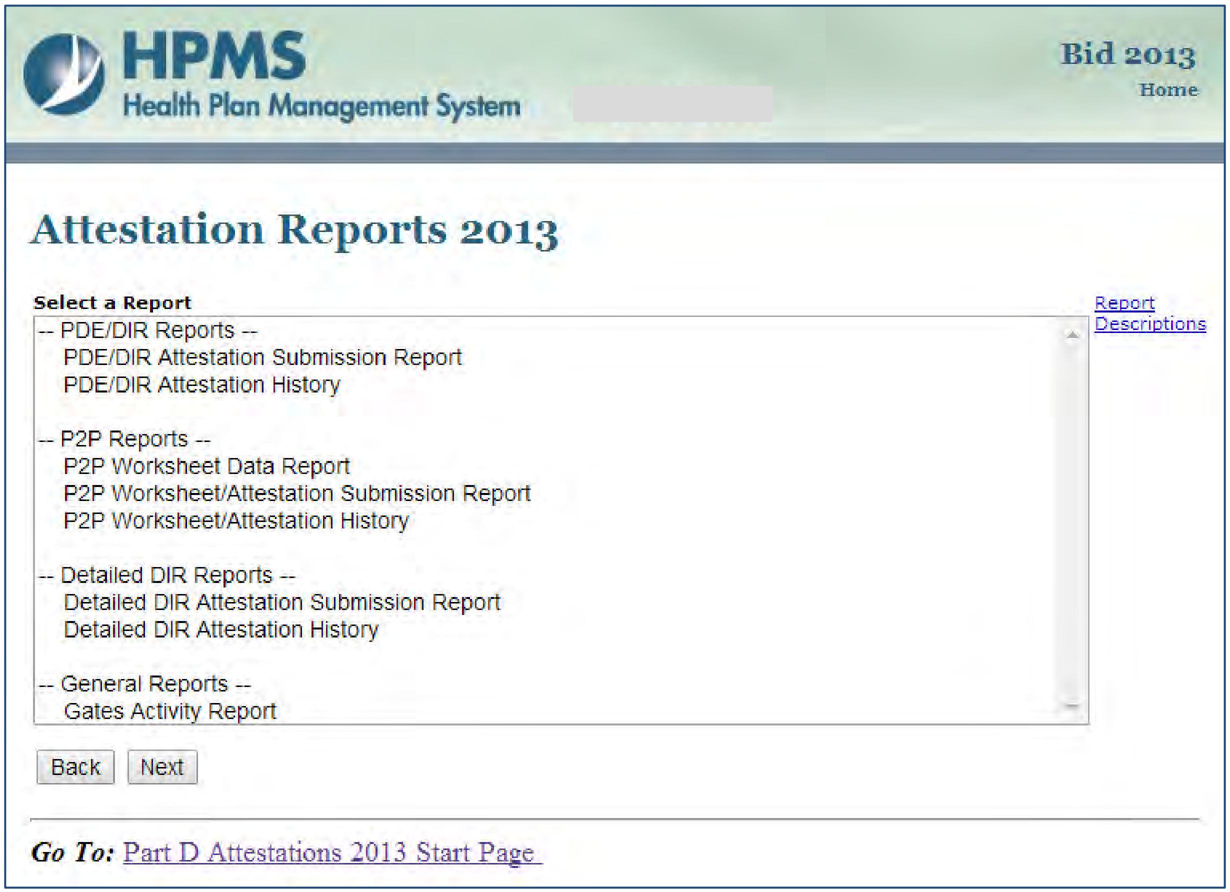
P2P Worksheet Template (Continued)

Jan 2014 Amount Paid	Feb 2014 Amount Paid	Mar 2014 Amount Paid	Apr 2014 Amount Paid	May 2014 Amount Paid	Jun 2014 Amount Paid	Comments

Report the total amount that was **actually paid** for each month to the contract indicated in the "Contract Number Paid" column for the applicable contract year through June 2014.

Document any comments or further information

Attestation Reports



P2P Worksheet Data Report

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Bid 2013
Home

P2P Worksheet Data Report 2013

Below is the current P2P Worksheet data uploaded for each selected contract/organization.
To see history of uploaded data for a Payer Contract Number, select the Payer Contract Number link.

Parent Org ID	Parent Org Name	Payer Contract Number	Contract Number Paid	Total Amount Owed	Jan 2013 Amount Paid	Feb 2013 Amount Paid	Mar 2013 Amount Paid	Apr 2013 Amount Paid	May 2013 Amount Paid	Jun 2013 Amount Paid	Jul 2013 Amount Paid	Aug 2013 Amount Paid	Sep 2013 Amount Paid	Oct 2013 Amount Paid	Nov 2013 Amount Paid	Dec 2013 Amount Paid	Jan 2014 Amount Paid	Feb 2014 Amount Paid	Mar 2014 Amount Paid	Apr 2014 Amount Paid	May 2014 Amount Paid	Jun 2014 Amount Paid	Comments	Payments as of Date	Attachments	Submission Information
376	XYZ, Inc.	H5819	H0162	$2,300.00	$300.00	$200.00	$100.00	$100.00	$200.00	$100.00	$100.00	$100.00	$200.00	$30.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$200.00	Still owe DIR	January 02, 2014		04/25/2014 12:54:42 pm HEATHER COCHRANE

Back | Download to Excel

Go To: Part D Attestations 2013 Start Page | Attestation Reports 2013

P2P Worksheet Data Report 2013

Below is the current P2P Worksheet data uploaded for each selected contract/organ
To see history of uploaded data for a Payer Contract Number, select the Payer Con

Parent Org ID	Parent Org Name	Payer Contract Number	Contract Number Paid	Total Amount Owed	Jan 2013 Amount Paid	Feb 2013 Amount Paid	Mar 2013 Amount Paid
376	XYZ, Inc.	H5819	H0162	$2,300.00	$300.00	$200.00	$100.00

Back | Download to Excel

P2P Worksheet/Attestation Submission Report

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Bid 2013
Home

P2P Worksheet/Attestation Submission Report 2013

To see a history of the P2P Worksheet/Attestation submissions for a contract, please select the Contract Number link.

Parent Org ID	Parent Org Name	Contract Number	Contract Name	Submitted by	Date of Submission	Worksheet	Attestation	Attachment
376	XYZ, Inc.	H5819	TEST LOCAL PPO		04/25/2014 12:54:42 pm	View Worksheet	View Attestation	

Back   Download to Excel

Go To: Part D Attestations 2013 Start Page | Attestation Reports 2013

P2P Worksheet/Attestation History

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Bid 2013
Home

P2P Worksheet/Attestation History 2013

Here is the list of all of the worksheet/attestation submissions for the parent organization. To view a report of the P2P worksheet submission, select the "Worksheet" link. To download an attestation submission, select the "Attestation" link.

Parent Organization: XYZ, Inc.

Date of Latest Submission	Worksheet	Attestation	Attachment	Contract Number
04/25/2014 12:54:42 pm	View Worksheet	View Attestation		H5819

Back

Go To: Part D Attestations 2013 Start Page | Attestation Reports 2013

Knowledge Test #4

Please select your response to this question.

- Part D sponsors must submit a separate P2P Reconciliation report for each contract.
  a) True
  b) False

Knowledge Test #5

Please select your response to this question.

- The ________ has access to the Attestation module in HPMS.
  a) CEO
  b) CFO
  c) COO
  d) All of the above

Question & Answer (Q&A)

Reconciliation Exclusion Process

Purpose

- To describe the reconciliation exclusion reports that Part D sponsors will receive as part of the annual Part D payment reconciliation and the Part D reopening processes.

Objectives

- Discuss the PDE exclusion process
- Identify the PDE categories included on the Reconciliation Exclusion Warning Reports
- Describe the Part D Payment Reconciliation Exclusion Reports

Reconciliation Exclusion Reports

- Two (2) NEW reports to support the reconciliation exclusion process:
  - Part D Potential Exclusion Warning Report
  - Part D Exclusion from Reconciliation Report

Part D Potential Exclusion Warning Report

- Released in January and April prior to Part D reconciliation for the year to be reconciled
- Released according to announcement by CMS of the warning report schedule when providing guidance on each reopening
- Provides plans with flat file reports containing potential exclusion PDEs
- Contains both Plan-to-Plan (P2P) and non-P2P data and is based on the *submitting* contract/PBP for both P2P and non-P2P records

Categories of Potentially Excluded PDEs

1. Beneficiaries retroactively disenrolled (no enrollment in any Part D plan on the date of service (DOS)), or DOS on the PDE is greater than 32 days after beneficiary date of death
2. Retroactive Low Income (LI) Status or change in LI Copay Levels for the DOS after the PDE was accepted
   – Beneficiaries awarded LI Status retroactively
3. Beneficiaries with a loss of LI eligibility after the PDE was accepted
4. PDE data with non-National Provider Identifiers (NPIs) in the Prescriber ID field

Part D Potential Exclusion Warning Report Resolution

- CMS expects that Part D sponsors will address the PDEs in the Part D Potential Exclusion Warning Report within 90 days of release of the report.
- PDEs not addressed by the Part D sponsor will continue to appear on the warning report until CMS runs the Part D Exclusion from Reconciliation Report.

Part D Exclusion from Reconciliation Report

- Provides plans with information on PDEs that are withheld from the reconciliation or reopening process
- Contains only the non-P2P data
- Released to plans at the same time the Part D Payment Reconciliation Reports are distributed

Report Layout and Data Elements

- Both the Part D Potential Exclusion Warning and Part D Exclusion from Reconciliation reports contain the following records:
  - PDE Exclusion Contract Header (PEXCH)
  - PDE Exclusion Plan Header (Contract/PBP Level) (PEXPH)
  - PDE Exclusion Benefit Year Header (PEXBH)
  - PDE Exclusion Plan Detail (PDE Level) (PEXDT)
  - PDE Exclusion Benefit Year Trailer (PEXBT)
  - PDE Exclusion Plan Trailer (Contract/PBP Level) (PEXPT)
  - PDE Exclusion Contract Trailer (PEXCT)

Helpful Resource

- HPMS memo titled, "Reconciliation PDE Exclusion Process," released on January 6, 2014
- HPMS memo titled, "Updates to the Reconciliation Prescription Drug Event (PDE) Exclusion Process," released on April 16, 2014

Knowledge Test #6

Please select your response to this question.

- Part D sponsors must address the PDEs in the Part D Potential Exclusion Warning Report within ________ of release of the report.
  a) 30 days
  b) 45 days
  c) 60 days
  d) 90 days

Knowledge Test #7

Please select your response to this question.

- ________ contains both Plan-to-Plan (P2P) and non-P2P data.
  a) Part D Potential Exclusion Warning Report
  b) Part D Exclusion from Reconciliation Report

Question & Answer (Q&A)

Feedback Request

- Following this Webinar, you will receive an email requesting your feedback regarding this session.
- Please take a moment to respond to the questions and provide comments.
- This information will assist CMS with meeting your submission needs and enhancing your Webinar participation experience.

YOUR FEEDBACK IS IMPORTANT!

Closing Remarks

- Thank you for attending today’s PDE Webinar!
- Please visit TARSC for information about future webinars.