

MTMP Screenshots

CY 2010 MTMP Submission Start Page

HPMS **Health Plan Management System**
Home

Submission
Enter/Edit
User Guide

Reports
MTMP Reports

Top of Page
Back

MTMP Submission Start Page

You will use this module to perform the following:

- Enter/Edit** - Submit the Medication Therapy Management Program (MTMP) Information.
- User Guide** - Access and View the User Guide for CY 2009.
- MTMP Reports** - Access and View the MTMP reports.

Go To: [Select Contract Year](#)

CY 2010 MTMP - Enter/Edit screen

HPMS **Health Plan Management System**
Home

MTMP - Enter/Edit

Select one or more contracts

— ALL CONTRACTS —

- X0001- CONTRACT EXAMPLE 1
- X0002- CONTRACT EXAMPLE 2
- X0003- CONTRACT EXAMPLE 3
- X0004- CONTRACT EXAMPLE 4
- X0005- CONTRACT EXAMPLE 5
- X0006- CONTRACT EXAMPLE 6
- X0007- CONTRACT EXAMPLE 7
- X0008- CONTRACT EXAMPLE 8
- X0009- CONTRACT EXAMPLE 9
- X0010- CONTRACT EXAMPLE 10
- X0011- CONTRACT EXAMPLE 11
- X0012- CONTRACT EXAMPLE 12
- X0013- CONTRACT EXAMPLE 13
- X0014- CONTRACT EXAMPLE 14

Go To: [MTMP Start Page](#) | [Select Contract Year](#)

CY 2010 MTMP - Enter/Edit - Multiple Chronic Diseases screen

HPMS	Health Plan Management System
	Home

MTMP - Enter/Edit

Multiple Chronic Diseases

Minimum number of chronic diseases:

Chronic disease(s) that apply: Any chronic disease applies
 Specific chronic diseases apply

[Go To: MTMP Start Page](#) | [Select Contract Year](#)

The minimum number of chronic conditions must be 2 or 3.

CY 2010 MTMP - Enter/Edit - Multiple Covered Part D Drugs screen

HPMS	Health Plan Management System
	Home

MTMP - Enter/Edit

Multiple Covered Part D Drugs

Minimum number of covered Part D drugs:

Type of Covered Part D Drugs that apply: Any Part D drug applies
 Chronic/maintenance drugs apply
 Disease-specific drugs apply related to chronic diseases
 Specific Part D drug classes apply

Incurred Cost for Covered Part D Drugs

Description of the analytical procedure used to determine if a beneficiary is **likely to incur** annual costs of at least \$4,000 for all covered Part D drugs:

eg 4r4tg

[Go To: MTMP Start Page](#) | [Select Contract Year](#)

The minimum number of Part D drugs covered must be at least 2 and no greater than 8.

CY 2010 MTMP – Enter/Edit Fees, Outcomes Measured, and Other Information

MTMP - Enter/Edit

Fees

Describe how fees will be established. If establishing fees for pharmacists or others, provide the amount of fee respective to MTMP management and the fee paid for the provider of the MTM.

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Outcomes Measured

Describe the methods of documenting and measuring outcomes of interventions.

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Additional Information

Provide other information related to your MTMP policies and procedures including coordination with care management plans established for a targeted beneficiary under a chronic care improvement program CCIP, if applicable.

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Additional Information (section 2)

If there is any additional information that was not included in the other sections, please include it here.

erg egre

Additional Information (section 3)

If there is any additional information that was not included in the other sections, please include it here.

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Go To: [MTMP Start Page](#) | [Select Contract Year](#)

MTMP CY 2010 – Verify Submission

Enter/Edit

Verify Submission

Please note that your data has not yet been submitted.

Contracts included with Submission	
Contract Number	Contract Name
X0001	CONTRACT EXAMPLE 1

Individuals that will be Notified of Submission			
Contract Number	Role	Name	Email
All	MTMP Submission	PLAN ORGANIZATION USER	test@test.com
X0001	Medicare Compliance Officer	Joe Jeter	test@test.com
X0001	Medication Therapy Management Contact	Joe Jeter	test@test.com

Multiple Chronic Diseases

Minimum number of chronic diseases: 10
 Chronic Diseases that apply: Any chronic disease applies

Multiple Covered Part D Drugs

Minimum number of covered Part D drugs: 12
 Type of covered Part D drugs that apply: Any Part D drug applies
 Incurred Cost for Part D Covered Drugs: eg 4r4tg

Identification

Description: fg rgrg

Enrollment/Disenrollment

Method of Enrollment: Opt-In
 Enrollment/Disenrollment Description: reg erger

Interventions

Recipient of Interventions: Beneficiary
 Intervention Description: dfg dgre

Resources

Outside Personnel
 Disease Management Vendor
 Physician
 Resource Description: erg rwrgrgergerg

Fees

Description: ergerger

Outcomes Measured

Description: gergeg

Additional Information

Description: erge ge

Additional Information (section 2)

Description: erg egre

Additional Information (section 3)

Description: egre rger

Go To: [MTMP Start Page](#) | [Select Contract Year](#)

MTMP CY 2010 – Submission Confirmation

MTMP - Enter/Edit

Submission Confirmation

Contracts included with this submission	
Contract Number	Contract Name
X0001	CONTRACT EXAMPLE 1

Thank you for submitting your MTMP Information. An email will be sent verifying your submission.

OK

Go To: [MTMP Start Page](#) | [Select Contract Year](#)