

**OMB
Response to Public Comment on 2012 Part D Applications**

	A	B	C	D
1	INFORMATION NOT RELEASABLE TO THE PUBLIC UNLESS AUTHORIZED BY LAW:			
2	<i>This information has not been publicly disclosed and may be privileged and confidential. It is for internal government use disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in full extent of the law</i>			
3	Comment Number	Entity Submitting Comments	Subject Matter	Summary of Comment
4	Substantive Comments			
5	Instructions			
6	1	CMS	Review standards	Reference to final rule: applicants must demonstrate that they meet all (not substantially all) Part D program requirements to qualify as a Part D sponsor.
7	Format of Bids			
8	2	CMS OGC	Bid Submissions	Reference to final rule: multiple bid submissions must reflect differences in benefit packages or plan costs that CMS determines represent substantial differences.
9	Pharmacy Access			
10	3	AHIP	Retail Pharmacy Access Review	Defines the methodology for the retail pharmacy review, which involves generating access percentages (rural, suburban, urban) for all applicants and eliminating the applicants from uploading their own geo reports.
11	HPMS Part D Contacts			
12	4	CMS OGC	Contacts	Add "Reconciliation Contact" per the 1/25/2010 HPMS memo

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3	Comment Number	Entity Submitting Comments	Subject Matter	Summary of Comment
13	Claims Processing			
14	5	CMS OGC	Discount in coverage gap	Add language to summary of Part D Sponsor Role and Responsibilities to include offering discounts for applicable brand name drugs at POS.
15	Reporting Requirements			
16	6	CMS OGC	Guidance	Language change to attestation to better align with new requirement for yearly independent audit.
17	Pharmacy Access Contracts			
18	7	CMS	I/T/U Addendum	Clarify that CMS requires use of NPI numbers and will not longer accept NCPDP numbers.
19	Appendices			
20	8	CMS OGC	Financial Solvency & Capital Adequacy Documentation	Clarify CMS' considerations for determining sufficient cash flow to meet financial obligations (what comprises the "current ratio").

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3	Accept/Deny Change
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20	Not applicable - the current ratio is a standard accounting term and does not need definition by CMS.

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Comment Number	Entity Submitting Comments	Subject Matter	Summary of Comment
Clarification Comments (comments not on substantive information within the application with commenters)			
1	Coventry	Attestations	Coventry requests further explanation of what CMS means by " dispensing techniques ".
2	Coventry	Attestations	Coventry requests clarification on purpose of the "meaningful bid" attestation, and proposes that this be removed.
3	Coventry	Attestations	Coventry requests that CMS provide the technical specifications for data validation accurately and timely.
4	United	Instructions/ Attestations	Requested clarification on the commitment applicants make when attesting "Yes" in case where the applicant cannot be in compliance with the element as of the date the application is submitted to CMS.
5	CMS OGC	Attestations	Clarify attestation regarding systems for processing COB file, notification to enrollees of other drug coverage in system, and request for concurrence.
6	TTAG	I/T/U Addendum	General technical edits adding citations to the Affordable Care Act
7	TTAG	I/T/U Addendum	Language provided by TTAG states that the Part D Sponsor is required to pay the Provider reasonable charges billed.

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Comment Number	Entity Submitting Comments	Subject Matter	Summary of Comment
Clarification Comments (comments not on substantive information within the application with commenters)			
8	CMS OGC	Throughout application	General technical edits, including adding citations to the Affordable Care Act, and new Part D regulations.
9	CMS	Throughout application	General technical edits and clarifications to ensure citations and references are accurate.
10	CMS	Contracting	Added clarifying language that each first tier and down stream contract must meet all the contract provisions when read on its own.

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LAW:
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Accept/Deny Change
cation; CMS will clarify directly
Not applicable - Attestation currently provides examples of dispensing techniques (e.g., weekly, daily, or automated dose dispensing)
Not applicable - Attestation is not new for 2011.
Not applicable - request for timely requirements will be shared with appropriate DCOP staff
Accept with comment - a qualifier shall be added to the sentence and will read, "By providing such attestation, an Applicant is committing that its organization complies with the relevant requirements as of the date your application is submitted to CMS, <u>unless a different date is stated by CMS.</u> "
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Defered to the Indian Health Service general counsel, who in turn deferred to the IHCIA implementation committee.
In conference call with CMS' Tribal Affairs staff and IHS general counsel, CMS emphasized the short time frame for providing CMS with a final recommendation for the I/T/U addendum language.

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