



August 29, 2012

CMS, Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development
Attention: Document Identifier CMS-10237, Room C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

Submitted electronically to <http://www.regulations.gov>

UCare CMS contract Numbers: H2456, H2459 and H4270

Dear Sir or Madam:

In response to the Comment Request regarding the Part C Medicare Advantage and 1876 Cost Plan Expansion Application (CMS-10237) (OCN 0938-0935), UCare submits the comments outlined in the following pages.

UCare is an independent, nonprofit health plan serving nearly 100,000 members of our Medicare Advantage plans in Minnesota and western Wisconsin. *UCare for Seniors*, our Medicare Advantage plan, earned 4.5 stars in the Medicare Star Ratings. In 2010, our members rated our plan as an 8.8 for Overall Rating of Health Plans. This 2011 Consumer Assessment of Healthcare Providers and Systems (CAHPS) score is higher than the national and Minnesota averages. In addition to our individual and employer group Medicare Advantage business, UCare is a leader in Minnesota with our integrated dual eligible Special Needs Plan (SNP). We have served this population for many years in our MSHO plan.

Thank you for the opportunity to submit comments.

Sincerely,

Michelle Larson

Michelle Larson
Federal Government Relations Specialist

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- For Attestation under section 3.10.A, item #15, please verify what is meant by “at least one of the past two Medicare Advantage application review cycles.” Is this the time period for the previous two calendar years when a plan may have received an automatic renewal? Or is this the previous two times that a plan has completed an application, either as a service area expansion or a new application regardless of the time between such applications?
- For section 3.28, tiering of medical benefits, we suggest adding a column for not applicable. If a plan does not tier benefits, would they answer the attestation (“equal access to the various tiers proposed”) as yes or no if no tiers are proposed? A not applicable option would be more accurate.
- For section 4.13, we suggest including instructions that this is optional if tiering of benefits is not offered.
- Appendix I SNP proposal, Section 6, D-SNP State Medicaid Agency(ies) Contract(s), questions 2 and 8 are duplicative.



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