

2015 (old version)	2016 (new version)	Type of Change	Reason for Change	Burden Change
Enrollment: 1 A: The total number of enrollment requests received in the specified time period.	Enrollment: 1 A: The total number of enrollment requests (i.e., requests initiated by the beneficiary or his/her authorized representative) received in the specified time period. Do not include auto/facilitated or passive enrollments, rollover transactions or other enrollments	Rev	Provided technical clarification.	No
Enrollment: 1 I: Of the total reported in A, the number of internet enrollment requests received via plan website (if Sponsor offers this mechanism).	Enrollment: 1 I: Of the total reported in A, the number of internet enrollment requests received via plan or affiliated third-party website (if Sponsor offers this mechanism).	Rev	Provide technical clarification.	No
Disenrollment: 2 A: The total number of voluntary disenrollment requests received in the specified time period.	Disenrollment: 2 A: The total number of voluntary disenrollment requests received in the specified time period. Do not include disenrollments resulting from an individual's enrollment in another plan.	Rev	Provide technical clarification.	No
N/A	Disenrollment: 2 D: The total number of involuntary disenrollments for failure to pay plan premium in the specified time period.	Add	Revise data collection necessary for monitoring purposes.	No
N/A	Disenrollment: 2 E: Of the total reported in D, the number of disenrolled individuals who submitted a timely request for reinstatement for Good Cause.	Add	Revise data collection necessary for monitoring purposes.	No
N/A	Disenrollment: 2 F: Of the total reported in E, the number of favorable Good Cause determinations.	Add	Revise data collection necessary for monitoring purposes.	No

Type of Change: Rev = Revision, Del = Deletion, Add = Addition, and Red = Redesignation.

N/A	Disenrollment: 2 G: Of the total reported in F, the number of individuals reinstated.	Add	Revise data collection necessary for monitoring purposes.	No
MTM: Q: Date(s) of CMR(s) with written summary in CMS standardized format. (If more than 1 CMR is received, up to 5 dates will be allowed.) Required if received annual CMR.	MTM: Q: Date(s) of CMR(s) with written summary in CMS standardized format. (If more than 1 CMR is received, up to 2 dates will be allowed.) Required if received annual CMR.	Rev	After analyzing the data it was concluded that only 2 dates are needed for monitoring purposes.	No
MTM: S: Qualified Provider who performed the initial CMR. (Physician; Registered Nurse; Licensed Practical Nurse; Nurse Practitioner; Physician's Assistant; Local Pharmacist; LTC Consultant Pharmacist; Plan Sponsor Pharmacist; Plan Benefit Manager (PBM))	MTM: S: Qualified Provider who performed the initial CMR. (Physician; Registered Nurse; Licensed Practical Nurse; Nurse Practitioner; Physician's Assistant; Local Pharmacist; LTC Consultant Pharmacist; Plan Sponsor Pharmacist; Plan Benefit Manager (PBM))	Rev	Provide technical clarification.	No
Prompt Payment by Part D Sponsors	Prompt Payment by Part D Sponsors	Del	The data collection is no longer necessary for monitoring purposes.	No
Long-Term Care (LTC) Utilization: C: The total number of beneficiaries in LTC facilities for whom Part D drugs have been provided under the Contract.	Long-Term Care (LTC) Utilization: C: The total number of beneficiaries in LTC facilities for whom Part D drugs have been provided under the CMS Contract.	Rev	Provide technical clarification.	No
Fraud, Waste and Abuse Compliance Program	Fraud, Waste and Abuse Compliance Program	Del	The data collection is no longer necessary for monitoring purposes.	No
Plan Oversight of Agents	Plan Oversight of Agents	Rev	Increased hours. Data collection needed to increase for monitoring purposes. No new data added.	Yes, because additional data is needed for monitoring purposes.

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Long-Term Care (LTC) Utilization	Long-Term Care (LTC) Utilization	Del	The data collection is no longer necessary for monitoring purposes.	Yes-Reduces Burden
Plan Oversight of Agents	Sponsor Oversight of Agents	Rev	Provide technical clarification.	No
Sponsor Oversight of Agents: 1 F: Agent/Broker State Licensed. For agents licensed in multiple states, complete a row for each state in which the agent is licensed.	Sponsor Oversight of Agents: 1 F: Agent/Broker State Licensed. For agents licensed in multiple states, complete a row for each state in which the agent is licensed if they also earned compensation in that state.	Rev	Provide technical clarification.	No
Sponsor Oversight of Agents: 1 H: Plan Assigned Agent/Broker Identification Number	Sponsor Oversight of Agents: 1 H: Sponsor Assigned Agent/Broker Identification Number	Rev	Provide technical clarification.	No
Sponsor Oversight of Agents: 1 I: Agent/Broker Current License Effective Date.	Sponsor Oversight of Agents: 1 I: Agent/Broker Current License Effective/Renewal Date (if applicable).	Rev	Provide technical clarification.	No
Sponsor Oversight of Agents: 1 J: Agent/Broker Appointment Date.	Sponsor Oversight of Agents: 1 J: Agent/Broker Appointment Date (if applicable). This date should be the most recent date the agent becomes affiliated with the sponsor.	Rev	Provide technical clarification.	No
Sponsor Oversight of Agents: 1 K: Agent/Broker Training Completion Date	Sponsor Oversight of Agents: 1 K: Agent/Broker Training Completion Date for the previous calendar year products. (Ex. If the current year is 2016 it would be CY2015 products, etc.)	Rev	Provide technical clarification.	No
Sponsor Oversight of Agents: 1 L: Agent/Broker Testing Completion Date	Sponsor Oversight of Agents: 1 L: Agent/Broker Testing Completion Date for the previous year products.. (Ex. If the current year is 2016 it would be CY2015 products, etc.)	Rev	Provide technical clarification.	No
Sponsor Oversight of Agents: 2 K: Plan Assigned Agent/Broker Identification Number.	Sponsor Oversight of Agents: 2 K: Sponsor Assigned Agent/Broker Identification Number.	Rev	Provide technical clarification.	No
Sponsor Oversight of Agents: 2 L: Enrollment Mechanism. (Plan/Plan Representative Online; CMS Online Enrollment Center; Plan Call Center; 1-800-MEDICARE; Paper Application; Auto-Assigned/Facilitated; Other).	Sponsor Oversight of Agents: 2 L: Enrollment Mechanism. (Sponsor/Sponsor Representative Online; CMS Online Enrollment Center; Sponsor Call Center; 1-800-MEDICARE; Paper Application; Auto-Assigned/Facilitated; Other).	Rev	Provide technical clarification.	No
General Change: Reporting Deadlines had specific dates.	General Change: Staggered deadlines and avoided specific dates.	Rev	Decrease system overload, decrease user response time.	No
Enrollment and Disenrollment Reporting Timeline: Data due to CMS/HPMS: August 31 and February 28	Enrollment and Disenrollment Reporting Timeline: Data due to CMS/HPMS: Last Monday of August and Last Monday of February	Rev	Decrease system overload, decrease user response time.	No

Retail, Home Infusion, and Long-Term Care Pharmacy Access Reporting Timeline (Section 1 only): Data due to CMS/HPMS: May 31	Retail, Home Infusion, and Long-Term Care Pharmacy Access Reporting Timeline (Section 1 only): Data due to CMS/HPMS: First Monday of May	Rev	Decrease system overload, decrease user response time.	No
Retail, Home Infusion, and Long-Term Care Pharmacy Access Reporting Timeline (Sections 2 & 3 only): Data due to CMS/HPMS: February 28	Retail, Home Infusion, and Long-Term Care Pharmacy Access Reporting Timeline (Sections 2 & 3 only): Data due to CMS/HPMS: First Monday of February	Rev	Decrease system overload, decrease user response time.	No
Medication Therapy Management Reporting Timeline: Data due to CMS/HPMS: February 28	Medication Therapy Management Reporting Timeline: Data due to CMS/HPMS: First Monday of February	Rev	Decrease system overload, decrease user response time.	No
Grievances Reporting Timeline: Data due to CMS/HPMS: February 28 (reporting for all quarters due on this date)	Grievances Reporting Timeline: Data due to CMS/HPMS: First Monday of February (reporting for all quarters due on this date)	Rev	Decrease system overload, decrease user response time.	No
Coverage Determinations and Redeterminations Reporting Timeline: Data due to CMS/HPMS: February 28 (reporting for all quarters due on this date)	Coverage Determinations and Redeterminations Reporting Timeline: Data due to CMS/HPMS: Last Monday of February (reporting for all quarters due on this date)	Rev	Decrease system overload, decrease user response time.	No
Employer/Union-Sponsored Group Health Plan Sponsors Reporting Timeline: Data due to CMS/HPMS: February 28	Employer/Union-Sponsored Group Health Plan Sponsors Reporting Timeline: Data due to CMS/HPMS: First Monday of February	Rev	Decrease system overload, decrease user response time.	No
Plan Oversight of Agents Reporting Timeline: Data due to CMS/HPMS: February 28	Sponsor Oversight of Agents Reporting Timeline: Data due to CMS/HPMS: First Monday of February	Rev	Decrease system overload, decrease user response time.	No

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<p>MTM-Element X: Topics discussed with the beneficiary during the CMR, including the medication or care issue to be resolved or behavior to be encouraged. (If more than 1 topic discussed, up to 5 topics will be allowed to be reported.) These are the descriptions of the topics listed on the beneficiary's written summary in CMS standardized format in the Medication Action Plan under 'What we talked about'. Required if received annual CMR.</p>	<p>MTM-Element X: Topics discussed with the beneficiary during the CMR, including the medication or care issue to be resolved or behavior to be encouraged. (If more than 1 topic discussed, up to 5 topics will be allowed to be reported.) These are the descriptions of the topics listed on the beneficiary's written summary in CMS standardized format in the Medication Action Plan under 'What we talked about'. Required if received annual CMR.</p>	Del	<p>The utility of these free-text data are limited. There is work in the industry to develop standardized fields for this information. We will suspend collection of this type of information until a more standardized set of data can be collected.</p>	No