

CY 2020 PBP/MTMP/Formulary List of Changes

CY 2020 PBP Changes

Landing Page

1. The PBP software landing page has been updated to reflect the CY 2020 year changes.

Source: Internal

PBP Screen/Category: Landing Page

Document: APPENDIX_C_PBP2020_Screenshots_SectionA_Upload_2018_12_12.pdf

Page(s): Page 9

Citation: 42 CFR 422.256

Reason why change is needed: To update the year reference throughout the software.

Impact to Burden: No impact

Section A

1. The PBP software has been updated to populate the referral questions for B1a, B1b, and B2 when standard bid is selected for Section B in Section A.

Source: Internal

PBP Screen/Category: Section A-5

Document: APPENDIX_C_PBP2020_Screenshots_SectionA_Upload_2018_12_12.pdf

Page(s): Page 5

Citation: 42 CFR 422.256

Reason why change is needed: To fix a problem with the CY2019 PBP population of standard bid for these categories.

Impact to Burden: Lessens impact

Section B

1. The PBP software will be updated to include new Supervised Exercise Therapy (SET) for Symptomatic Peripheral Artery Disease (PAD) SET for PAD Medicare and Non Medicare covered services in Section B3. The on screen note from the CY 2019 PBP Software will be removed.

Source: CMS Policy

PBP Screen/Category: Section B3 Cardiac and Pulmonary Rehabilitation Services

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 48-51

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Low impact

2. The PBP software will be updated to include a new Medicare-covered B7j: Additional Telehealth section. It will allow plan users to offer Additional Telehealth services for any Medicare-covered benefit. Although it is a Medicare-covered benefit, it will be optional for plans.

Source: CMS Policy

PBP Screen/Category: Section B7j Additional Telehealth

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 94-96

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Medium impact

3. The PBP software has been updated to include a new Medicare-covered B7k: Opioid Treatment Services section. It will be mandatory for plans.

Source: CMS Policy

PBP Screen/Category: Section B7k Opioid Treatment Services

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 97-98

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Medium impact

4. The PBP software has been updated to add to Rideshare Services to PBP category B10b Transportation for Plan-approved Location and Any Health-related Location

Source: CMS Policy

PBP Screen/Category: B10b Transportation Services

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 120

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: No impact

5. The PBP software has been updated to allow SNP plans to select B14b Annual Physical Exam as a supplemental benefit.

Source: CMS Policy

PBP Screen/Category: B14b Annual Physical Exam

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 187-189

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: No impact

6. The PBP software has been updated to change the name of Section B14c to "Other Defined Supplemental Benefits"

Source: CMS Policy

PBP Screen/Category: Section 14c Other Defined Supplemental Benefits

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 190-204

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: No impact

7. The PBP software has been updated to include new supplemental benefits in 14c. They are Therapeutic Massage, Adult Day Health Services, Home-Based Palliative Care, In-Home Support Services, and Support for Caregivers of Enrollees.

Source: CMS Policy

PBP Screen/Category: Section B19 VBI/UF/SSBCI

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 190-204

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Medium impact

8. The PBP software will be updated to make the "Other Medicare-covered preventive services" benefit optional in Section B14e. A new N/A option is available in response to the authorization question in this section. If the plan does not offer Other Medicare-covered preventive services, they can choose N/A.

Source: CMS Policy

PBP Screen/Category: Section B14e Other Medicare-covered Preventive Services

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 210

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Lowers impact

9. The PBP software will be updated to include a new Step Therapy Question for Part B plans offering a drug benefit in Section B15. The plan must then indicate if the benefit steps up in any of the following ways: Part B to Part B, Part B to Part D, Part D to Part B.

Source: CMS Policy

PBP Screen/Category: Section B15 Medicare Part B Rx Drugs

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 213

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Potential Low to no impact

10. The PBP software will be updated to include minimum and maximum coinsurance and copayment range fields for office visits in Section B16a.

Source: Internal

PBP Screen/Category: Section B16a Preventive Dental Base 3 and Base 4

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_2018_12_12.pdf

Page(s): Page 218 and Page 219

Citation: 42 CFR 422.256

Reason why change is needed: Based on discussion after CMS review of bids for CY2019.

Impact to Burden: Low impact

11. The PBP software will be updated to include new questions regarding disease states for UF plans. The questions are “Does the enrollee need to have all diseases selected to qualify? Y/N” and “Does the enrollee have to have a combination of diseases selected to qualify? Y/N” will be added for all packages in 19a and 19b.

Source: CMS Policy

PBP Screen/Category: Section 19a Reduced Cost Sharing for VBID/UF/SSBCI – Disease States: UF and Section 19b Additional Benefits for VBID/UF- Disease States: UF

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_VBID_UF_SSBCI_2018_12_12.pdf

Page(s): Page 5 and Page 63

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Low impact

12. The PBP software has been updated to include new VBID Interventions for selection in B19a and B19b. They are Social Determinants of Health-based Supplemental Benefits, Medicare Advantage Rewards and Incentives Programs, Wellness and Health Care Planning, Telehealth Networks, and Medical Device Coverage.

Source: CMS Policy

PBP Screen/Category: Section 19 VBID/MA Uniformity Flexibility/SSBCI

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_VBID_UF_SSBCI_2018_12_12.pdf

Page(s): Page 1

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Low impact

13. The PBP software has been updated expand Section B19 to include the option to select Special Supplemental Benefits for the Chronically Ill (SSBCI). All MA and SNP plans besides Cost plans

can offer SSBCI. Only one SSBCI package is allowed in 19a. Only one SSBCI package is allowed in 19b. SSBCI Packages do not select disease states.

Source: CMS Policy

PBP Screen/Category: Section B19 VBID/UF/SSBCI

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_VBID_UF_SSBCI_2018_12_12.pdf

Page(s): Pages 1, 3, and 61

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Low impact

14. The PBP software has been updated to include a new benefit for plans offering Special Supplemental Benefits for the Chronically Ill (SSBCI) in Section B19b. They will have the ability to select new 13i Non-Primarily Health Related Benefits for the Chronically Ill. That section includes Home-Delivered Meals (beyond limited basis), Transportation for Non-Medical Needs, Food and Produce, Pest Control, and three other categories to be defined by the plan.

Source: CMS Policy

PBP Screen/Category: Section 19b Additional Benefits for VBID/UF/SSBCI

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_VBID_UF_SSBCI_2018_12_12.pdf

Page(s): Pages 65 and 139-160

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Medium impact

15. The PBP software will be updated to remove restrictions on which Supplemental Benefits can be included in a 19b package for UF plans. All UF plans will now be able to offer 14c Health Education, 14c Medical Nutrition Therapy, and 14c Enhanced Disease Management. C-SNP plans will still be prevented from offering Enhanced Disease Management.

Source: CMS Policy

PBP Screen/Category: Section 19b Additional Benefits for VBID/UF

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_VBID_UF_SSBCI_2018_12_12.pdf

Page(s): Page 164

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Low impact

16. Section B19b of the PBP software will be updated to change the text of the question "Is there a maximum aggregate amount of reduced cost sharing?" to "Is there a maximum benefit amount?"

Source: CMS Policy

PBP Screen/Category: Section 19b Additional Benefits for VBID/UF – Base 3 (Retroactive Reimbursement)

Document: APPENDIX_C_PBP2020_Screenshots_SectionB_VBID_UF_SSBCI_2018_12_12.pdf

Page(s): Page 67

Citation: 42 CFR 422.256

Reason why change is needed: To clarify the question in the PBP

Impact to Burden: No impact

Section D

1. The PBP software has been updated to reflect the CY2020 year change in the Section D LPPO/RPPO deductible instructions.

Source: Internal

PBP Screen/Category: Section D: Plan Deductible

Document: APPENDIX_C_PBP2020_Screenshots_SectionD_2018_12_12.pdf

Page(s): Page 1

Citation: 42 CFR 422.256

Reason why change is needed: To update the year references throughout the software.

Impact to Burden: No impact

2. The PBP software has been updated to require all EGWP plans, except for MSA EGWP Plans, to enter responses to “Are you using any of your plan’s MA rebates to reduce the Part B Premium?” and “Indicate the Part B Premium reduction amount:” premium amounts in Section D since they do not submit a BPT with their bid.

Source: CMS Policy

PBP Screen/Category: Section D Plan Premium/Rebate Reduction

Document: APPENDIX_C_PBP2020_Screenshots_SectionD_2018_12_12.pdf

Page(s): Page 21

Citation: 42 CFR 422.256

Reason why change is needed: To address regulatory changes in CMS policy.

Impact to Burden: Low impact

Section Rx

1. The PBP software will be updated to include the following new question regarding indication based coverage: “Will your plan be limiting on-formulary coverage of drugs to certain indications (i.e., are you implementing indication-based formulary design)?”

Source: CMS Policy

PBP Screen/Category: Section Rx, Medicare Rx General Screen 2

Document: APPENDIX_C_PBP2020_Screenshots_SectionRx_2018_12_12.pdf

Page(s): Page 2

Citation: HPMS Memorandum "Indication-Based Formulary Design Beginning in Contract Year (CY) 2020", dated August 29, 2018

Reason why change is needed: To address new CMS Policy.

Impact to Burden: Low impact

2. The PBP software will be updated to include new guidance on entering Out-of-Network cost sharing in Section Rx.

Source: CMS Policy

PBP Screen/Category: Section Rx, Actuarially Equivalent Characteristics Screen and Alternative-Deductible Screen

Document: APPENDIX_C_PBP2020_Screenshots_SectionRx_2018_12_12.pdf

Page(s): Page 15 and 29

Citation: 42 CFR 422.256

Reason why change is needed: To clarify existing CMS policy.

Impact to Burden: No impact

CY 2020 MTMP Changes

1. There is a requirement to update the Verify Submission page to display the following message: "Your data will not be submitted until you click the "Submit" button at the bottom of the page"

Source: Internal

MTMP Screen/Category: CY 2020 MTMP - Enter/Edit Verify Submission Page

Document: Appendix_C_MTMP CY2020 Enhancements Mockups.pdf

Page(s): Page 1

Citation: Lessons learned

Reason why change is needed: To meet the business needs

Impact to Burden: No impact

CY 2020 Formulary Changes

1. CMS will be collecting a new Indication-Based Coverage Supplemental File. This file will be submitted only by plans that specify they are providing indication-based coverage on the formulary. The submission will include the affected RxCUIs and the applicable indication code(s). CMS will provide a reference file of indication-based coverage codes.

Source: Internal

Formulary Screen/Category: Indication-Based Coverage File Record Layout

Document: Appendix_C_Formulary_IndicationBasedCoverage_Record_Layout.pdf

Page(s): Page 1

Citation: 42 CFR 423.120

Reason why change is needed: In order to allow plans to implement the formulary design that was announced in the August 29, 2018 HPMS memorandum titled "Indication-Based Formulary Design Beginning in Contract Year (CY) 2020"

Impact to Burden: Low impact

2. CMS has updated the layout for the Opioid Strategy submission. Some questions were removed or clarified and additional questions or details were added to some sections to provide more clear instructions to Sponsors.

Source: Internal

Formulary Screen/Category: Opioid Strategy Layout

Document: Appendix_C_CY2020_Formulary_Opioid Strategy Layout

Pages(s): Page 1-3

Citation: 42 CFR 423.120

Reason why change is needed: The changes were made as a result of CMS' review of the CY2019 submissions.

Impact to Burden: No impact

3. CMS has updated the Excluded Drug file layout. The NDC field has been replaced with RxCUI.

Source: Internal

Formulary Screen/Category: Excluded Drugs File Record Layout

Document: Appendix_C_CY2020_EXC_Record_Layout

Pages(s): Page 1

Citation: 42 CFR 423.120

Reason why change is needed: The changes were made to reduce the burden for sponsors and streamline CMS' review of the files.

Impact to Burden: Lessens impact

4. CMS has updated the Prior Authorization File Layout. These two new fields have been added:

PA_Indication_Indicator: This field must be populated with one of the values below. This field is used to describe the indications for which the PA will be approved.

1 = All FDA-approved Indications. This value cannot be used if the drug that requires PA is subject to Indication-Based Coverage (IBC).

2 = Some FDA-approved Indications Only. This value is to be submitted for drugs that are subject to IBC.

3 = All Medically-accepted Indications. Drugs for which the PA will be approved for all Part D medically-accepted indications (FDA-approved and compendia-supported) should be submitted with a 3.

4 = All FDA-approved Indications, Some Medically-accepted Indications. If the PA will only be approved for specific off-label uses, a 4 should be submitted. The additional off-label uses should be submitted in the subsequent Off-Label Uses field.

Off-label_Uses:

- CHAR Required only if a 4 is entered for PA_Indication_Indicator
- Max length = 3000
- Enter the specific off-label uses for which the PA will be approved. This field must not contain any FDA-approved indications.

Source: Internal

Formulary Screen/Category: Prior Authorization File Layout

Document: Appendix_C_CY2020_PA_Record_Layout

Pages(s): Page 1-2

Citation: 42 CFR 423.120

Reason why change is needed: The changes were made to collect data for the new indication based coverage data.

Impact to Burden: Low Impact.

5. CMS has created a new PA/ST change request file layout.

Source: Internal

Formulary Screen/Category: PA/ST Criteria Change Request Record Layout

Document: Appendix_C_CY2020_PAST_Criteria_Change_Request_Record_Layout

Pages(s): Page 1-2

Citation: 42 CFR 423.120

Reason why change is needed: The change is being made to make the PA/ST update process more efficient for plans.

Impact to Burden: Lessens impact