2021 (old version)	2022 (new version)	Type of Change	Reason for Change	Burden Change
Enrollment K. Of the total reported in A, the number of enrollment requests received from an applicant through an agent broker.	Enrollment K. Of the total reported in A, the number of enrollment requests received from an applicant through an agent or broker.	Rev	Provide technical clarification.	No
Section V. Coverage Determinations Redeterminations, and Reopenings	Section V. Coverage Determinations Redeterminations (including At–Risk Redeterminations under a Drug Management Program), and Reopenings	Rev	Provide technical clarification.	No
CD/RD: Title 42, Part 423, Subpart M describes Part D sponsors' requirements for coverage determinations (including formulary and tier exceptions, and exceptions to established drug utilization management programs) and redeterminations, including timeframes for standard and expedited requests. Part B vs. Part D coverage determinations and redeterminations should be included in this reporting. Sponsors should report data based on the date the enrollee/enrollee's representative is notified in writing of the coverage determination or redetermination decision. A sponsor's complete decision includes making the determination, appropriately notifying the enrollee of the determination, and authorizing coverage or sending payment, where applicable.	programs) and redeterminations, including timeframes for standard and expedited requests are described in Title 42, Part 423, Subpart M. Sponsors will be responsible for reporting several data elements related to coverage	Rev	Provide technical clarification.	No

N/A	CD/RD: Sponsors must also report data relating to	Add	Provide technical clarification.	No
	redeterminations of at-risk determinations made under a			
	plan sponsor's drug management program pursuant to the			
	rules at 42 CFR §423.153(f), including the number of			
	requests and the disposition. At-risk redeterminations may			
	involve decisions about:			
	Being identified as an at-risk beneficiary for prescription			
	drug misuse or abuse;			
	Having a limitation, or the continuation of a limitation, on			
	access to coverage for frequently abused drugs (i.e., an			
	enrollee specific point-of-sale (POS) edit or the selection of			
	a prescriber and/or pharmacy for purposes of lock-in);			
	Sharing information for subsequent Part D plan			
	enrollments.			
	Sponsors should report data based on the date the			
	enrollee/enrollee's representative is notified in writing of the			
	at-risk redetermination decision.			