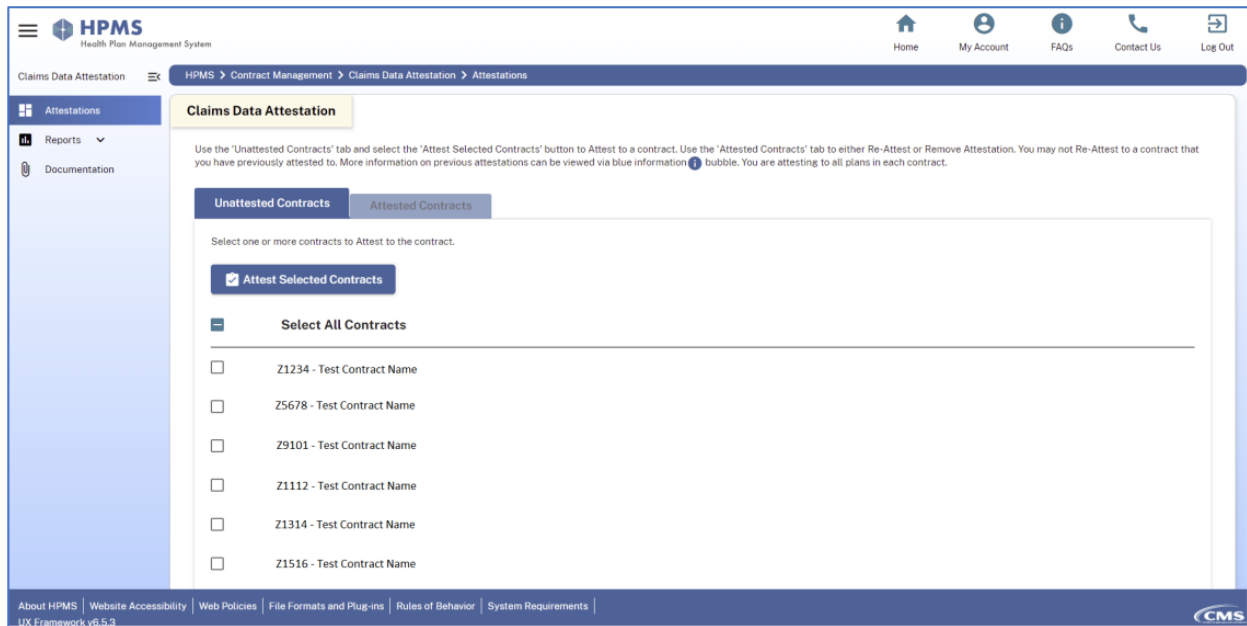


Medicare A & B Claims Data to Part D Plan Sponsors API (AB2D) API PRA Request Screenshots

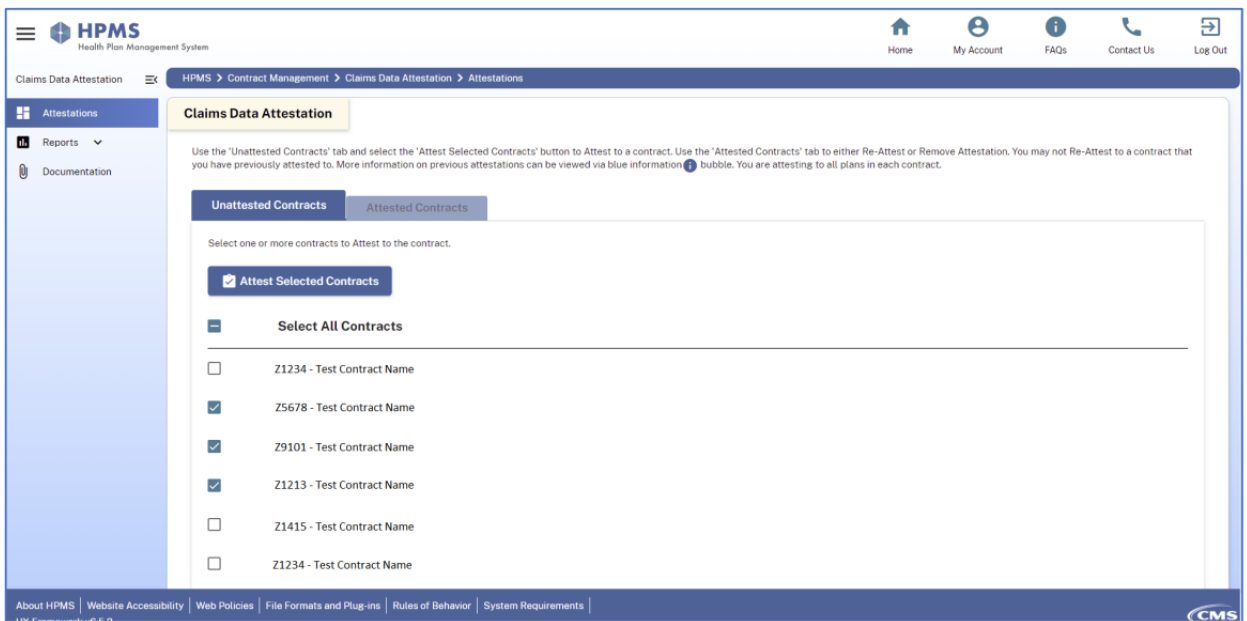
HPMS Claims Data Attestation Module

Part D Plan Attestation Home Page



HPMS Attestation Process: Part D Plan Request for Part A&B Claims Data via the AB2D API

1. Part D Plan Selects Unattested Contract



2. Part D Plan Reviews and Agrees to Use of Data

The screenshot shows a modal dialog box titled "Claims Data Attestation Confirmation" within the HPMS interface. The dialog contains the following text:

Claims Data Attestation Confirmation
For more information on how to receive claims data please visit [this link](#).

We would like to request access to standardized extracts of Medicare claims data for our active enrollees.

In making this request, we attest that we understand the following purposes and limitation on the use of the claims data as described in 42 CFR 423.153(g).

1. Purposes. A PDP sponsor must comply with all laws that may be applicable to data received under this provision, including state and federal privacy and security laws, and, furthermore subject to the limitations in 42 CFR 423.153(g)(4) may only use or disclose the data provided by CMS for the following purposes: To optimize therapeutic outcomes through improved medication use, as such phrase is used in paragraph 42 CFR 423.153(d)(1).

- (i) To improve care coordination so as to prevent adverse health outcomes, such as preventable emergency department visits and hospital readmissions.
- (ii) For activities falling under paragraph (1) of the definition of "health care operations" under 45 CFR 164.501.
- (iii) For activities falling under paragraph (2) of the definition of "health care operations" under 45 CFR 164.501.
- (iv) For "fraud and abuse detection or compliance activities" under 45 CFR 164.506(c)(4)(ii).
- (v) For disclosures that qualify as "required by law" disclosures at 45 CFR 164.103.

2. Limitations. A PDP sponsor must comply with the following requirements regarding the data provided by CMS in 42 CFR 423.153(g). The PDP sponsor will not use the data to inform coverage determinations under Part D:

- (i) The PDP sponsor will not use the data to conduct retroactive reviews of medically accepted indications determinations;
- (ii) The PDP sponsor will not use the data to facilitate enrollment changes to a different prescription drug plan or an MA-PD plan offered by the same parent organization;
- (iii) The PDP sponsor will not use the data to inform marketing of benefits.
- (iv) The PDP sponsor will contractually bind its contractors that have access to the Medicare claims data, and any other potential downstream data recipients, to the terms and conditions imposed on the PDP Sponsor under this paragraph (g).

We attest that we will comply with the requirements provided in in 42 CFR 423.153(g).

I hereby certify that I understand the attestation above. Cancel Confirm

Footer: About HPMS | Website Accessibility | Web Policies | File Formats and Plug-ins | Rules of Behavior | System Requirements | UX Framework v8.0.4

3. Part D Plan Receives Validation of Successful Attestation. Contract moved to the "Attested Contracts" tab

The screenshot shows the HPMS Claims Data Attestation page. A yellow notification bubble at the top center reads: "You have successfully attested for the selected contracts! Results have been updated below and you may also print your most recent action." The page title is "Claims Data Attestation".

Use the 'Unattested Contracts' tab and select the 'Attest Selected Contracts' button to Attest to a contract. Use the 'Attested Contracts' tab to either Re-Attest or Remove Attestation. You may not Re-Attest to a contract that you have previously attested to. More information on previous attestations can be viewed via blue information **i** bubble. You are attesting to all plans in each contract.

Unattested Contracts | **Attested Contracts**

Select one or more contracts to Attest to the contract.

Attest Selected Contracts

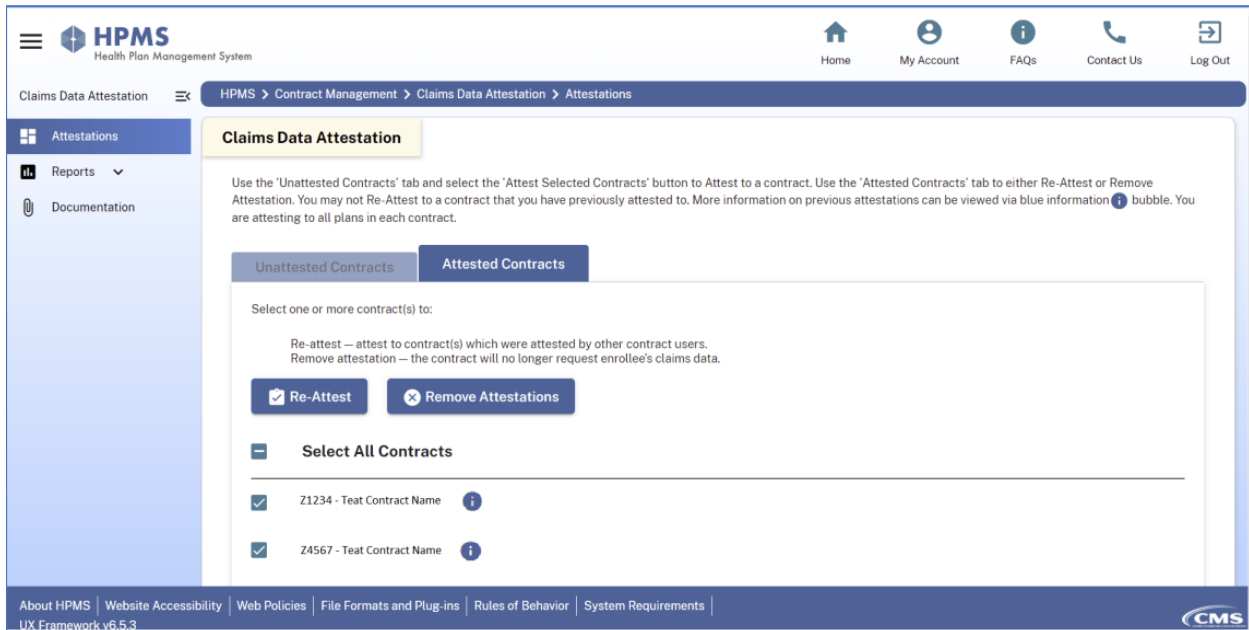
Select All Contracts

Z1234 - Test Contract Name

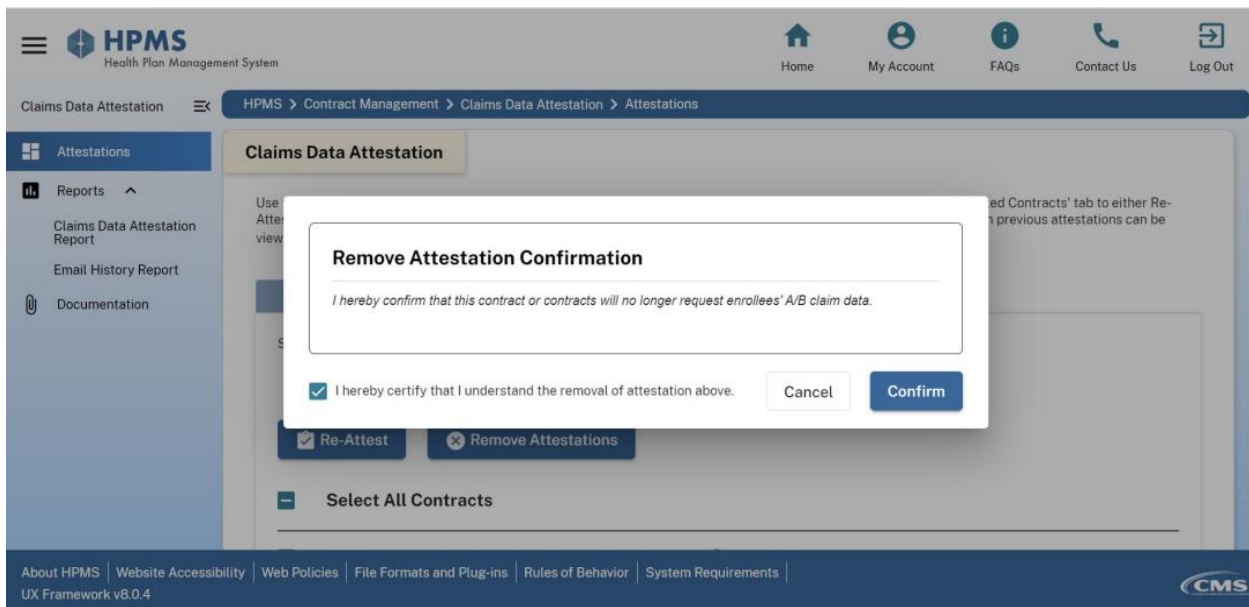
Footer: About HPMS | Website Accessibility | Web Policies | File Formats and Plug-ins | Rules of Behavior | System Requirements | UX Framework v6.5.3

HPMS Process to Un-Attest: Part D Plan removes request for Part A&B Claims Data via the AB2D API

1. Part D Plan Navigates to the "Attested Contracts" tab and Selects Contract



2. Part D Plan Reviews and Agrees to their Attestation Removal



3. Part D Plan Receives Validation of Successful Attestation removal. Contract moved to the "Unattested Contracts" tab

HPMS Health Plan Management System

Claims Data Attestation

HPMS > Contract Management > Claims Data Attestation > Attestations

Claims Data Attestation

Use the 'Unattested Contracts' tab and select the 'Attest Selected Contracts' button to Attest to a contract. Use the 'Attested Contracts' tab to either Re-Attest or Remove Attestation. You may not Re-Attest to a contract that you have previously attested to. More information on previous attestations can be viewed via blue information **i** bubble. You are attesting to all plans in each contract.

Unattested Contracts | **Attested Contracts**

Select one or more contract(s) to:

Re-attest – attest to contract(s) which were attested by other contract users.
Remove attestation – the contract will no longer request enrollee's claims data.

Re-Attest Remove Attestations

Select All Contracts

Z1234 - Test Contract Name **i**


Z5678 - Test Contract Name **i**

About HPMS | Website Accessibility | Web Policies | File Formats and Plug-ins | Rules of Behavior | System Requirements | IX Framework v6.5.3 | CMS

AB2D API On-boarding Forms PRA Request

Form #1: ADOS Form

Purpose: Attestor (CEO, CFO, CEO) uses form to designate a primary AB2D Point of Contact (referred to as the AB2D Data Operations Specialist or ADOS)



Helping Prescription Drug Sponsors Help Patients

Reason for Attestation

These next four questions ask about the reasoning behind your recent attestation and potential data use cases.

Electing Your ADOS

andrew.hamish@cms.hhs.gov (not shared) [Switch account](#)

* Required

PDP information

This section requires: 1) your contact information as the Sponsor of your PDP, 2) the contact information of technical AB2D Data Operations Specialist you are choosing to attest, and 3) any other point of contact we should have into communications.

Contract # *

id _____

Attestor's Organization *

id _____

Attestor's First Name *

id _____

Attestor's Last Name *

id _____

Attestor's Email Address *

id _____

ADOS First Name *

id _____

ADOS Last Name *

id _____

ADOS Email Address *

id _____

Other AB2D point of contact First Name>Last Name

Your answer _____

Other AB2D point of contact Email Address

Your answer _____

How did you hear about the AB2D API? Check all that apply *

- AB2D site
- CMS email
- Conference
- Digital media
- Search engine (e.g. Google, DuckDuckGo, etc.)
- Word of mouth - internal colleague
- Word of mouth - external colleague
- Other: _____

What are some ways you might use AB2D data in the future? All responses noted below are approved uses by CMS. Check all that apply *

- Identify fraud/abuse
- Clinical programming/interventions
- Data Program data integration and/or analysis
- Medication Therapy Management
- To obtain a 360 degree, holistic view of our beneficiaries
- Education and outreach
- I don't know yet
- Other: _____

Why did you choose to attest at this time? Why "now"? Check all that apply *

- To begin data access as soon as possible
- I recently heard about AB2D
- Our infrastructure is already aligned for this integration
- We currently have a great use case in mind
- Other: _____

Do you have plans in the next six months to begin integration? *

Yes

No

Maybe

Do you anticipate needing support to implement this API? Please let us know! We are here to help. *

Yes

No

Maybe

Other: _____

In an effort to improve our product and services, may our UX Researcher get in touch to discuss any of the following? Check all that apply *

- AB2D site usability
- Automating our credentialing process
- Product value
- No thank you
- Other: _____

Back Next
Clear form

Back
Submit
Clear form

Form #2 – Access Form

Purpose: Primary AB2D Point of Contact (referred to as the AB2D Data Operations Specialist or ADOS) uses form to provide CMS/AB2D with on-boarding pre-requisites prior to getting production API access.



AB2D Access Form

Thank you for being your organization's AB2D Data Operations Specialist (ADOS). As part of onboarding, please provide the below information and connect to the AB2D sandbox environment (instructions: <https://ab2d.cms.gov/accessing-claims-data.html>). Please reach out to ab2d@cms.gov if you have any questions.

andrew.hamish@cms.hhs.gov (not shared) [Switch account](#)

* Required

ADOS Organization *

Your answer _____

ADOS First Name *

Your answer _____

ADOS Last Name *

Your answer _____

ADOS Email Address *

Your answer _____

Attestor Name *

Your answer _____

Attestor Email *

Your answer _____

Connect to the sandbox and provide the Job ID # (all contracts) for "Parts A & B - bulk data claims export"

Your answer _____

Provide the dedicated, public, and static IP Addresses (3 max) where your organization will be downloading claims so that we can whitelist.

Your answer _____

Is your organization's production environment based in Windows or Mac/Linux? *

Mac/Linux

Windows

[Submit](#) [Clear form](#)