

CY 2025 PBP Data Entry System Screens

Rx VBID Setup Screen

Plan Level Cost Sharing - In Progress

Prior Authorization & Referral - In Progress

Visitor Travel - Completed

Cost Share Groups - In Progress

VBID, MA Uniformity, SSBCI - In Progress

^ Rx - In Progress

^ Rx Setup - In Progress

Rx Cost Share - In Progress

^ Rx Tiers - In Progress

Rx Notes - In Progress

^ Rx Insulin - In Progress

^ Rx VBID - In Progress

Rx VBID Part D Rewards & Incentives - Completed

Rx VBID Reduction in Cost Sharing - In Progress

Rx VBID

[Rx Characteristics](#)

Formulary Tier Model

Preferred Generic, Generic, Preferred Brand, Non-Preferred Drug, Specialty Tier

Are you offering Part D Benefits and/or Part D Rewards and Incentives under the VBID Model? ⓘ *

Yes No

Do you offer Part D Rewards and Incentives programs through the model? ⓘ *

Yes No

Does your VBID benefit include Part D reductions in cost? ⓘ *

Yes No

I attest that *

1. The benefits entered comply with CMS requirements for benefits offered in the MA-VBID Model;
2. The benefits entered are consistent with the benefit proposals and the actuarial or financial information provided to CMS when applying to participate in the MA-VBID Model, unless otherwise approved by CMS in writing; and
3. The benefit package, formulary or other features of this plan are not structured to discriminate against any Medicare beneficiary.

CY 2025 PBP Data Entry System Screens

Rx VBID Part D Rewards and Incentives Packages Setup

- Plan Characteristics - Completed
- Standard Bid - Completed
- Benefit Offerings - Completed
- Plan Level Cost Sharing - In Progress
- Prior Authorization & Referral - In Progress
- Visitor Travel - Completed
- Cost Share Groups - In Progress
- VBID, MA Uniformity, SSBCI - In Progress
- ^ Rx - In Progress
- Rx Setup - In Progress
- ^ Rx VBID - In Progress
- Rx VBID Part D Rewards & Incentives - In Progress
- Rx VBID Reduction in Cost Sharing - In Progress

Rx VBID Part D Rewards & Incentives

(Maximum of 3 packages)

Rx Characteristics

+ Add New Package

Package ID	Package Name	Part D Reward or Incentive amount	Type of Reward or Incentive	Frequency of Reward or Incentive Eligibility	Actions
1	Package 1	\$50.00	Gift Card, Other	Every three months	

Close

Save and Close

Save and Next

CY 2025 PBP Data Entry System Screens

Rx VBIID Rewards and Incentives – Add New Package – Page 1

Add New Package

Package Name
Package 1

Type of Part D Reward or Incentive

- Gift Card
- Item
- Other

Describe
Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat.
555/1000 characters

Part D Reward or Incentive amount
\$300

Frequency of Reward or Incentive Eligibility
6 Months

Cancel Save

Close Save and Close

CY 2025 PBP Data Entry System Screens

Rx VBID Rewards and Incentives – Add New Package – Page 2

Add New Package

Frequency of Reward or Incentive Eligibility
6 Months

Eligibility Criteria

- Disease State Management or Medication Therapy Management
- Vaccine Administration
- Other

Eligibility Criteria Notes
Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat.
555/1000 characters

Meeting an Adherence Goal?

Yes No

Describe
Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat.

Cancel Save

Close Save and Close Save ar

CY 2025 PBP Data Entry System Screens

Rx VBID Rewards and Incentives – Add New Package – Page 3

Add New Package

Eligibility Criteria Notes
Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat.
555/1000 characters

Meeting an Adherence Goal?
 Yes No

Describe
Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat.
555/1000 characters

Describe the Disease State Criteria
Lorem Ipsum

Maximum Annual Part D Rewards and Incentives Available
\$20

Cancel Save

Close Save and Close

CY 2025 PBP Data Entry System Screens

VBID DS Reduced Cost Sharing – Page 1

Plan Characteristics - Completed

Standard Bid - Completed

Benefit Offerings - Completed

Plan Level Cost Sharing - In Progress

Prior Authorization & Referral - In Progress

Visitor Travel - Completed

Cost Share Groups - In Progress

VBID, MA Uniformity, SSBCI - In Progress

Rx - In Progress

Rx Setup - Completed

Defined Standard - Locations and Location Supply - Completed

Rx Notes - Completed

DS Insulin Cost Share - Completed

Rx VBID - In Progress

Rx VBID Part D Defined Standard Rewards & Incentives - Not Started

VBID DS Reduced Cost Sharing - In Progress

VBID DS Reduced Cost Sharing

Select Target Methodology ⓘ

- Chronic Conditions ⓘ
- Socioeconomic Status ⓘ *
- Area Deprivation Index ⓘ

Disease State - Please choose one or more ⓘ *

Available

Chronic Obstructive Pulmonary Disease (COPD)
Congestive Heart Failure (CHF)
Patient with Past Stroke
Hypertension
Mood Disorders
Rheumatoid Arthritis
Dementia
Other CMS-Approved Disease State

Selected

Diabetes
Coronary Artery Disease

> >> < <<

Which phase of the benefit will have reduced cost sharing?

- Initial Coverage Phase ⓘ

Rx Characteristics

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<p>Plan Characteristics - Completed</p> <p>Standard Bid - Completed</p> <p>Benefit Offerings - Completed</p> <p>Plan Level Cost Sharing - In Progress</p> <p>Prior Authorization & Referral - In Progress</p> <p>Visitor Travel - Completed</p> <p>Cost Share Groups - In Progress</p> <p>VBID, MA Uniformity, SSBCI - In Progress</p> <p>Rx - In Progress</p> <p>Rx Setup - Completed</p> <p>Defined Standard - Locations and Location Supply - Completed</p> <p>Rx Notes - Completed</p> <p>DS Insulin Cost Share - Completed</p> <p>Rx VBID - In Progress</p> <p>Rx VBID Part D Defined Standard Rewards & Incentives - Not Started</p> <p>VBID DS Reduced Cost Sharing - In Progress</p>	<p>Which phase of the benefit will have reduced cost sharing?</p> <p><input checked="" type="checkbox"/> Initial Coverage Phase ⓘ</p> <hr/> <p>Is any of the cost-sharing reduction contingent upon participation in a wellness or care management program? ⓘ *</p> <p>Yes No</p> <hr/> <p>Are you modifying the deductible amount? ⓘ *</p> <p>Yes No</p> <hr/> <p>Is any of the cost-sharing reductions targeted to LIS eligible enrollees? ⓘ *</p> <p>Yes No</p> <p>Select LIS reduction level: ⓘ</p> <p><input type="checkbox"/> LIS Level 1</p> <p><input type="checkbox"/> LIS Level 2</p> <p><input type="checkbox"/> LIS Level 3</p> <p><input type="checkbox"/> LIS Level 4</p> <p>-or-</p> <p><input type="checkbox"/> Dual-Eligible Status (territories only)</p> <p>Estimated Enrollees to be Targeted and Engaged to Receive Model Benefits</p> <p>Expected Number of Enrollees to be Targeted: ⓘ</p> <p>Expected Number of Enrollees to be engaged and receive Model benefits: ⓘ</p>
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CY 2025 PBP Data Entry System Screens

VBID DS Reduced Cost Sharing – Page 3

Plan Characteristics - Completed	<input type="checkbox"/> LIS Level 4
Standard Bid - Completed	-or-
Benefit Offerings - Completed	<input type="checkbox"/> Dual-Eligible Status (territories only)
Plan Level Cost Sharing - In Progress	Estimated Enrollees to be Targeted and Engaged to Receive Model Benefits
Prior Authorization & Referral - In Progress	Expected Number of Enrollees to be Targeted <input type="text"/>
Visitor Travel - Completed	Expected Number of Enrollees to be engaged and receive Model benefits <input type="text"/>
Cost Share Groups - In Progress	Reduction of Beneficiary LIS Cost Sharing <input type="text"/>
VBID, MA Uniformity, SSBCI - In Progress	Reduced on select drugs <input type="text"/>
Rx - In Progress	
Rx Setup - Completed	
Defined Standard - Locations and Location Supply - Completed	
Rx Notes - Completed	
DS Insulin Cost Share - Completed	
Rx VBID - In Progress	
Rx VBID Part D Defined Standard Rewards & Incentives - Not Started	
VBID DS Reduced Cost Sharing - In Progress	

Standard Retail

1-Month Days Supply

1-Month Initial Coverage Phase Copayment

Standard Mail-Order

1-Month Days Supply

1-Month Initial Coverage Phase Copayment

Long-Term Care

1-Month Days Supply

1-Month Initial Coverage Phase Copayment

Out-of-Network

1-Month Days Supply

1-Month Initial Coverage Phase Copayment

A VBID Supplemental file that contains the drugs provided at reduced cost sharing for the disease state(s) or socioeconomic status listed must be uploaded through the Formulary Submission Module by Friday, June 9, 2023 at 11:59am Eastern Time. If beneficiary LIS cost sharing is waived for all Part D drugs across the tiers indicated on the VBID package tiers screens then submission of a VBID Supplemental File is not required.

CY 2025 PBP Data Entry System Screens

Rx VBID Reduction in Cost Sharing Packages Setup (AE, BA, and EA Benefit Types)

- ▼ Plan Level Cost Sharing - In Progress
- ▼ Prior Authorization & Referral - In Progress
- Visitor Travel - Completed
- ▼ Cost Share Groups - In Progress
- ▼ VBID, MA Uniformity, SSBCI - In Progress
- ^ Rx - In Progress
- ^ Rx Setup - In Progress
- Rx Cost Share - In Progress
- ▼ Rx Tiers - In Progress
- Rx Notes - In Progress
- ▼ Rx Insulin - In Progress
- ^ Rx VBID - In Progress
- Rx VBID Part D Rewards & Incentives - Completed
- Rx VBID Reduction in Cost Sharing - In Progress

Rx VBID Reduction in Cost Sharing

Rx Characteristics

+ Add New Package

(Maximum of 15 packages)

Package ID	Package Name	Status	Targeting Methodology	Disease State	Phases	Actions
1	Package #1	In Progress	Chronic Conditions	Chronic Obstructive Pulmonary Disease (COPD)	Initial Coverage Phase	✎ 🗑

Close
Save and Close
Save and Next

CY 2025 PBP Data Entry System Screens

Rx VBID Reduction in Cost Sharing Package – Add New Package – Page 1

^ Package #1 - In Progress

▼ Tier 3 - Preferred Brand - In Progress

Package Name ⓘ

Package #

10/50 characters

Select Target Methodology ⓘ *

Chronic Conditions ⓘ

Socioeconomic Status ⓘ

Area Deprivation Index ⓘ

Disease State - Please choose one or more ⓘ *

Available	Selected
<input type="text"/>	<input type="text"/>
Diabetes	Chronic Obstructive Pulmonary Disease (COPD)
Congestive Heart Failure (CHF)	
Patient with Past Stroke	
Hypertension	
Coronary Artery Disease	
Mood Disorders	
Rheumatoid Arthritis	
Dementia	

CY 2025 PBP Data Entry System Screens

Rx VBID Reduction in Cost Sharing Package – Add New Package – Page 2

^ Package #1 - In Progress

~ Tier 3 - Preferred Brand - In Progress

Rheumatoid Arthritis

Dementia

Which phase of the benefit will have reduced cost sharing? ⓘ *

Initial Coverage Phase ⓘ

Select the tier(s) that include reduced cost sharing (select all that apply) ⓘ *

Tier 1 - Preferred Generic ⓘ

Tier 2 - Generic ⓘ

Tier 3 - Preferred Brand ⓘ

Tier 4 - Non-Preferred Drug ⓘ

Tier 5 - Specialty Tier ⓘ

Is any of the cost-sharing reduction contingent upon participation in a wellness or care management program? ⓘ *

Yes No

Are you modifying the deductible amount? ⓘ *

Yes No

Is any of the cost-sharing reductions targeted to LIS eligible enrollees? ⓘ *

CY 2025 PBP Data Entry System Screens

Rx VBID Reduction in Cost Sharing Package – Add New Package – Page 3

Package #1 - In Progress

Tier 3 - Preferred Brand - In Progress

Is any of the cost-sharing reductions targeted to LIS eligible enrollees? ⓘ*

Yes No

Select LIS reduction level: ⓘ

LIS Level 1

LIS Level 2

LIS Level 3

LIS Level 4

-or-

Dual-Eligible Status (territories only)

Beneficiary LIS cost sharing waived for all Part D drugs across all benefit phases? ⓘ*

Yes No

Reduction of Beneficiary LIS Cost Sharing ⓘ

Estimated Enrollees to be Targeted and Engaged to Receive Model Benefits

Expected Number of Enrollees to be Targeted ⓘ

1000000

Expected Number of Enrollees to be engaged and receive Model benefits ⓘ

1000000

+ Add Notes

CY 2025 PBP Data Entry System Screens

Rx VBIID Reduction in Cost Sharing – Initial Coverage Phase Tier Screen – Page 1

test - In Progress

Tier 1 - Generic - In Progress

Initial Coverage Phase - In Progress

Tier 2 - Preferred Brand - Not Started

Tier 1 - Generic

Initial Coverage Phase

Cost-Share Structure *
Greater of Coinsurance and Copayment

Which covered drugs have reduced cost sharing?
Select coverage *
Partial Tier Coverage (Only some drugs on the tier)

Does this plan offer reduction in cost share for generic drugs, brand drugs, or both generic and brand drugs?
Select drugs *

Standard Retail Cost Sharing

Do you offer 1-month supply? *

Yes No

Select days for 1-month supply *
30

Coinsurance 1-month min supply *

Coinsurance 1-month max supply *

Copayment 1-month min supply *
\$

Copayment 1-month max supply *
\$

Do you offer 2-month supply? *

Yes No

Select days for 2-month supply *
60

Coinsurance 2-month min supply *

Coinsurance 2-month max supply *

Copayment 2-month min supply *
\$

Copayment 2-month max supply *
\$

CY 2025 PBP Data Entry System Screens

Rx VBIID Reduction in Cost Sharing – Initial Coverage Phase Tier Screen – Page 2

^ test - In Progress

^ Tier 1 - Generic - In Progress

Initial Coverage Phase - In Progress

^ Tier 2 - Preferred Brand - Not Started

Copayment 1-month min supply \$

Copayment 1-month max supply \$

Daily Copayment 1-month \$

Copayment 2-month min supply \$

Copayment 2-month max supply \$

Preferred Retail Cost Sharing

Do you offer 1-month supply? *

Yes No

Select days for 1-month supply 30

Coinsurance 1-month min supply

Coinsurance 1-month max supply

Copayment 1-month min supply \$

Copayment 1-month max supply \$

Daily Copayment 1-month \$

Do you offer 2-month supply? *

Yes No

Select days for 2-month supply 60

Coinsurance 2-month min supply

Coinsurance 2-month max supply

Copayment 2-month min supply \$

Copayment 2-month max supply \$

Standard Mail-Order Cost Sharing

Do you offer 1-month supply? *

Yes No

Close

CY 2025 PBP Data Entry System Screens

Rx VBIID Reduction in Cost Sharing – Initial Coverage Phase Tier Screen – Page 3

^ test - In Progress

^ Tier 1 - Generic - In Progress

Initial Coverage Phase - In Progress

Tier 2 - Preferred Brand - Not Started

Standard Mail-Order Cost Sharing

Do you offer 1-month supply? ⓘ *

Yes No

Select days for 1-month supply ⓘ

30

Coinurance 1-month min supply ⓘ

Coinurance 1-month max supply ⓘ

Copayment 1-month min supply ⓘ

\$

Copayment 1-month max supply ⓘ

\$

Daily Copayment 1-month ⓘ

\$

Preferred Mail-Order Cost Sharing

Do you offer 1-month supply? ⓘ *

Yes No

Select days for 1-month supply ⓘ

30

Coinurance 1-month min supply ⓘ

Coinurance 1-month max supply ⓘ

Copayment 1-month min supply ⓘ

\$

Copayment 1-month max supply ⓘ

\$

Daily Copayment 1-month ⓘ

\$

Long Term Care Cost Sharing

Do you offer 1-month supply? ⓘ *

CY 2025 PBP Data Entry System Screens

Rx VBID Reduction in Cost Sharing – Initial Coverage Phase Tier Screen – Page 4

test - In Progress

Tier 1 - Generic - In Progress

Initial Coverage Phase - In Progress

Tier 2 - Preferred Brand - Not Started

Long Term Care Cost Sharing

Do you offer 1-month supply? ⓘ *

Yes No

Select days for 1-month supply ⓘ

32

Coinurance 1-month min supply ⓘ

Coinurance 1-month max supply ⓘ

Copayment 1-month min supply ⓘ

\$

Copayment 1-month max supply ⓘ

\$

Daily Copayment 1-month ⓘ

\$

Out-of-Network Cost Sharing

Do you offer 1-month supply? ⓘ *

Yes No

Select days for 1-month supply ⓘ

30

Coinurance 1-month min supply ⓘ

Coinurance 1-month max supply ⓘ

Copayment 1-month min supply ⓘ

\$

Copayment 1-month max supply ⓘ

\$

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+ Add Notes