

Summary of HPMS Releases
For the week ending October 24, 2008

Title: Invitation to CMS' Prescription Drug Benefit Symposium

Date: 10/21/08

Summary: Medicare Prescription Drug Benefit Symposium - What is the Beneficiary Experience and What does new Prescription Drug Event (PDE) Data Show?

Date: October 30, 2008
Time: 8:45AM – 4:00PM (check-in will begin at 8AM)
Location: CMS Auditorium
7500 Security Blvd, Baltimore, MD 21244-1850

CMS is inviting Part D sponsors to attend the Medicare Prescription Drug Benefit Symposium. This symposium will explore beneficiary experience in the Part D program and CMS' initial analysis of the program using Prescription Data Event (PDE) data.

You can register online at www.cms.hhs.gov/apps/events/oucomingevents.asp
Prior online registration is required for entry into the Symposium.

Title: Chronic Care Special Needs Plans – Update on Eligibility Verification Procedures and Marketing Requirements

Date: 10/21/08

Summary: The purpose of this notice is to inform Chronic Care Special Needs Plans (C-SNPs) that, in addition to the current procedures for C-SNPs to verify the chronic care conditions of their prospective enrollees, CMS will consider an alternative proposal for conducting these critical verification efforts. We are also clarifying our marketing requirements for these plans.

Title: 2009 Resource and Cost-Sharing for Low-Income Subsidy (LIS)

Date: 10/22/08

Summary: Each year, CMS is required to update the resource limits for individuals who apply and qualify for the low-income subsidy. In the attached memorandum, CMS is providing the updated LIS resource limits for 2009 as well as the cost-sharing amounts for the low-income subsidies

Title: Updated Part D Sponsor Automated TrOOP Balance Transfer Operational Guidance

Date: 10/22/08

Summary: Since CMS' issuance of the CMS Part D sponsor automated TrOOP balance transfer (TBT) implementation guidance in March 2008, CMS has continued to participate in an industry-wide task group to discuss questions concerning the implementation and operation of the new automated TBT process. The task group asked us to update our March guidance to formalize in policy the clarifications we have made in the intervening months in response to the task group's questions. The revised guidance (v2) is attached and includes these policy clarifications; revisions are in red italics.

Title: Medicare Advantage Organizations (MAO)s Considering Furnishing Debit Cards Allowing Members to Access Supplemental Over-the-Counter (OTC) Benefits

Date: 10/23/08

Summary: This memorandum provides guidance on the issuance of debit cards to enrollees for the purpose of obtaining plan-covered over-the-counter (OTC) benefits.

Title: Special Notice on Compensation Structure Requirements

Date: 10/24/08

Summary: CMS is aware that there is significant concern about agent/broker commissions for benefit year 2009. As a result, we are rescinding our October 8, 2008 guidance document. We are working on ways to address the concern and expect to take regulatory action next week. We strongly suggest that you keep this in mind as you contemplate making any final arrangements regarding commission structures.