

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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CENTER FOR BENEFICIARY CHOICES

MEMORANDUM

DATE: April 26, 2006

Memorandum to: All Part D Plan Sponsors

From: Cynthia G. Tudor, Acting Director, Medicare Drug Benefit Group

Subject: New Information added to HPMS Call Center Performance Metrics

Thank you for your participation in the Medicare prescription drug benefit. Due in part to the comments and suggestions received by Part D sponsors, CMS has recently made several revisions to the HPMS module titled “Call Center Performance Metrics,” which was originally released on April 4, 2006. The changes were described in general in a previous memo and are described in detail in the technical notes available at the bottom of the report in HPMS.

In our continuing effort to raising the bar on the level of quality of service provided, we are adding new information to the Call Center Performance Metrics report, in addition to adding a fourth week of data. Please recall that Part D sponsors are required to meet standards attested to in their 2006 applications and specified in the HPMS call center memo (dated February 23, 2006), including having a call abandonment rate of 5% or less and having 80% of all calls answered within 30 seconds at the customer service call center and pharmacy help desk. Our new information includes indicators (“Met” or “Not Met”) for the following: whether 5% or less of the calls were abandoned; whether 80% of the calls had a hold time of 5 minutes or less; and whether the average hold time is 5 minutes or less. Our new information is designed to help Part D Sponsors determine if they are significantly non-compliant with the CMS required performance measures for call centers, which is that Part D sponsors are ultimately required to meet 80% of calls answered in 30 seconds or less and that sponsors have an abandonment rate of less than 5%.

Again, thank you for your participation in the Medicare prescription drug benefit. While we have had many successes, it is important that we continue to improve. Accordingly, CMS continues to seek your feedback on ways to improve the methodology for collecting and reporting these data. If you have any questions or comments about the data please contact Emerson Carvalho at emerson.carvalho@cms.hhs.gov.