

CY2025 VBID Application Spreadsheet Walkthrough

Thursday, February 22, 2024

Zack Kathol:

Hello, my name is Zack Kathol and I am here with Razi Corne, on behalf of the Value-Based Insurance Design or “VBID” Model. This video will provide a detailed walkthrough of the Calendar Year, CY, 2025 VBID Model Application Spreadsheet. New for Calendar Year 2025, the application is predominantly a single excel workbook. [00:00:20]

To complete the application, you must submit this completed Application Spreadsheet, the Net Savings Template, and the Financial Application online by 11:59 PM Pacific Time April 12, 2024. In this video we will go over how to navigate the Application Spreadsheet, functionality of the spreadsheet, and how to complete each tab in the workbook fully and correctly. This video does not cover the separately required Financial Application and Net Savings Template. For further guidance on the Financial Application and Net Savings Template please see the Financial Application FAQs available on the [VBID Model Website](#). [00:00:56]

After opening the workbook, the first step will be to enable macros. Enabling macros is crucial for the Excel workbook to function as intended. Each time you open the Application Spreadsheet, you must first enable macros before entering any data or making any drop-down selections within the workbook. In order to enable macros, please click on the “Enable Content” button on the top of the workbook. Once you have clicked on that button, you may see a pop-up message asking if you want to make this file a trusted document. Select "Yes" in response to this pop-up message. [00:01:30]

In the event that you do not see this pop-up message, due to modified default macro settings, please edit these settings. To edit these settings, please select “File” in the toolbar on the top left, and scroll down to “Options”. Selecting this will open a pop-up window, from here select “Trust Center” and click “Trust Center Settings”. In this window, select “Macro Settings”, and “Disable VBA macros with notification”. This will enable you to choose to allow macros to run on your computer with your permission. In the event that you are not able to modify these settings, you may need to work with your organization’s system administrators or IT support staff to enable macros for the purpose of completing this Application Spreadsheet. Note, after changing these settings, you may need to close and reopen the Excel file for the pop-up message to appear. [00:02:26]

Now that you have enabled macros, the first tab of the Application Spreadsheet is the Landing Page. This page serves as a reference for how to navigate the workbook. Please note that you can navigate back to this tab at any time by clicking the link in the top left corner of each tab in this workbook. The “Landing Page” offers detailed instructions for the application, and these instructions are intended to provide an overview and to help familiarize applicants with the different functions of the Application Spreadsheet. [00:02:59]

After reading through the instructions, and as you can see here, you will see a diagram with three colors: white, grey, and red. These colors will appear throughout the workbook to indicate which cells are required and where potential errors or incomplete cells may be present. White indicates cells in which data may be entered, grey indicates cells that should be left empty, and red

indicates that the current data input contains an error or is not yet complete. Cell colors may change as you progress through the workbook. If a cell turns to white from grey, this indicates a response is now required based on data entered elsewhere. If a white cell turns red from white, that indicates a row is incomplete or that newly entered data is causing an error. If a previously red cell turns white, this indicates that all errors have been resolved and/or the tab is now complete. [00:03:55]

Question 1 on the Landing Page asks you to select which Model Components your Parent Organization, or PO, intends to offer in CY 2025, either VBID Flexibilities which we will refer to as VBID Flex hereafter and Part D Rewards and Incentives or Part D RI, or VBID Flex only. This selection will populate additional tabs that must be answered based on the Components that you select. [00:04:25]

Please note that the VBID Flex sections of this application are required for all applicants because these tabs will also be used to collect data on how your organization plans to meet the Centers for Medicare & Medicaid Services' (CMS') new requirement of offering supplemental benefits to address health-related social needs, or HRSNs, in at least 2 priority areas. Once you have made your selection using the drop-down, you will notice that the tabs you are required to complete will appear and are now visible in the table of contents. [00:04:56]

Below the table of contents, you will see an application overview chart. This chart will walk you through the tabs of the Application Spreadsheet that you are required to complete. This chart will change based on your selection in question 1 above. Please read through this chart before continuing on the Application Spreadsheet. [00:05:16]

When you are filling out the workbook, please remember to save your work as you complete the tabs. The Application spreadsheet will not autosave your work and it will be important to not lose your progress. [00:05:26]

When filling out the workbook, it is highly recommended that you complete the tabs in the Application Spreadsheet in the order that they appear. If you decide to skip from tab to tab, you must be mindful that the "Flex_Summary" tab cannot be completed without first completing the other "Flex" tabs, or, for POs offering Part D RI, the "Part_D_RI_Summary" tab cannot be completed without first completing the other "Part_D_RI" tabs. Further, the "List_of_Participating_PBPs" tab must be completed prior to completing either of these "Summary" tabs. If you are ever unsure which tab to complete next, please refer back to the "Landing_Page" for guidance. [00:06:04]

I will now pass it to Razi to discuss the "PO_Information" tab. [00:06:08]

Razi Corne:

After completing the "Landing_Page", you will move on to tab 1: "PO_Information" tab. This tab is required for all POs. [00:06:16]

Please note that at the top of the page there is a red box labeled "PO information tab completion status". This box tracks whether all required fields within the tab have been completed, and the

cell color should change to white upon successful completion. Similar boxes can be seen on the “HEP” and “Eligibility” tabs. [00:06:36]

At a minimum, please fill out the “PO Information” and “Primary Contact Information” sections. Secondary and additional contact information are optional, but recommended. Please note, if you choose to provide an optional or secondary contact, all optional fields for that contact are required. To demonstrate, if we type in a new contact name that name will appear red until all the information below is filled out. When providing additional contact information, you can also designate these contacts for specific Model Components or plan functions. If this contact is designated for multiple Model components, you may select all that apply. [00:07:13]

To select multiple options in this cell and other cells throughout the workbook that allow this function, you will select one option from the drop-down followed by another. If you would like to unselect an option, you must delete the contents of the cell and begin selecting again. This is true for all multiple selection cells in the application. [00:07:34]

When you have completed the tab, the completion status box that you can see here at the top of the page will turn white, please move to tab 2 “List_of_Participating_PBPs”. You can either click the on the next tab by clicking the “List_of_Participating_PBPs” at the bottom of the page or click in the upper right corner the link labeled “Next Section”. As you can see by clicking this link, we are brought to the next tab of the workbook. [00:08:01]

This tab collects information on all of the Plan Benefit Packages (PBPs) you intend to include in your application. Please provide each PBP you intend to offer for Model consideration once in the table below. [00:08:13]

To complete this tab, start by filling out column C, "Contract" with 5 alphanumeric characters. Please note that column B is locked and cannot be completed. This column will autofill based on your responses to columns C, D, and E. Once you have provided a PBP number, complete columns F through L by selecting from the drop-down menus. Note that each Contract-PBP-Segment in column B will remain red until every column is filled out for that row. [00:08:45]

If you would like to copy and paste into this table, please ensure that your information fits the requirements for each cell before doing so. An error message will appear if you copy and paste information that does not align with the column or cell restrictions. This also applies for copy and pasting in all other tabs of this workbook. [00:09:03]

Please fill out Table 2.1 with all of the PBPs your organization intends to offer as part of the VBI Model. Use the colors as a guide for which cells are necessary to complete. All white cells in a row must be filled for a red cell to turn white and indicate completion. Once you have completed this table and all cells in column B are white, indicating that the table does not contain any errors, please move on to tab 3 “Eligibility”. [00:09:32]

Tab 3, “Eligibility”, contains attestations to ensure that your PO meets all eligibility requirements for participation in the VBI Model. For each statement select "Yes" if your PO meets this eligibility requirement or "No" if your PO does not or will not meet this eligibility

requirement. If you select “No”, a red message will appear next to the attestation stating that because you selected “No”, your application is not eligible for participation in the VBID Model. Once the eligibility tab completion status box turns white, you can move on to tab 4, Health Equity Plan, “HEP”. [00:10:11]

The next tab is for the Health Equity Plan, HEP. Be mindful that the questions on this tab are mostly select all that apply or short answer with strict character limits. Continue filling out each subsection of the tab in order, vertically, while paying close attention to which cells are white or grey, and reminder that this may change based on your answers. [00:10:33]

Start with subsection 4.1 "Identify Disparities" and in this subsection, please specify the disparities your PO aims to target using your Health Equity Plan. Fill out questions 1 through 3 to complete the section. [00:10:46]

For subsection 4.2 "Address disparities", please outline your plan to address disparities in access, outcomes, and/or enrollee experience of care related to the VBID Model. Begin by filling out at least one row of Table 4.2.1. Note that rows 12 and 13 are provided as examples for how to complete this section. When at least one row is complete, please answer questions 1 through 7 to complete this section. [00:11:16]

For subsection 4.3 “Engagement”, please provide details on how you will incorporate engagement into your HEP plan. Please fill out questions 1 through 6 for this section, but note that question 3 is optional. [00:11:31]

For subsection 4.4 "Advanced Care Planning", please outline your plan to address or identify disparities within advanced care planning. The required questions for this section will depend on your answer to question 1. If you answer "Yes" to question 1, please also then answer question 2, 3, 4, 5, and 6. If you answer "No" to question 1, please scroll down and answer questions 7 and 8. When you have finished answering all the required questions and the completion status box turns white, you may move on to the next tab. [00:12:06]

I will pass it over to Zack. [00:12:09]

Zack Kathol:

The next four tabs of the Application Spreadsheet are related to the VBID Flex component. As a reminder, completing at least the first three tabs on the VBID Flex component is required for all POs applying to the VBID Model. Each “Flex” section collects different information about the benefits that your organization will offer under VBID Flex. To start, the Flex_Benefits tab collects high-level information about the individual benefits that your organization intends to offer. Next, the “Flex_Target_Populations” tab collects high-level information on the target populations that you intend to target for Flex benefits. The “Flex_Summary” tab will be used to synthesize the information you previously provided to create PBP-level combinations of benefits and their relevant targeting methodologies. The “Flex_Part_D_Supplement” tab is required only for POs offering Part D Reduced Cost Sharing for select drugs on one or more formulary tiers. We will provide more detailed instructions regarding this tab later in the walkthrough. [00:13:15]

Starting with the first tab, 5.1 “Flex_Benefits” collects high-level information on the types of Flex benefits, for example, supplemental benefits, Part C reduced cost-sharing, and Part D reduced cost-sharing that your organization intends to offer. Each of these benefit types has its own table that must be completed. Please note that Table 5.1.1 is required for all POs applying to the VBID Model, but Tables 5.1.2 and 5.1.3 are optional depending on whether your organization intends to offer these types of benefits. Each of these tables is intended to be high-level and should only include each benefit that you intend to offer once. For example, if each of your organization’s 8 PBPs intended to offer a Meal Benefit through VBID, you would only complete one row in table 5.1.1, even if these PBPs were using different targeting methodologies or benefit amounts. POs will have the ability to make distinctions later within this Application Spreadsheet. [00:14:20]

Each benefit that you enter will generate its own benefit number for use later in the application. These benefit numbers will be created in the first column of each of the three tables which are columns B, N, and I, respectively. In each table, these columns will be locked and will auto populate once you begin completing the other columns in this table. Please also note that the benefits in the drop-downs correspond directly to the benefit descriptions used in the bid software and are intend to allow you to use the Application Spreadsheet as a resource during the bid submission process—if your organization is accepted to participate in the VBID Model. For example, the list of supplemental benefits in column D, as you can see, align with those described in the bid. [00:15:08]

As previously noted, this tab is broken into three separate tables. The first table is Table 5.1.1 Supplemental Benefits. This table is required for all POs and can be completed with either VBID or non-VBID benefits. To complete this table, start by selecting the program through which your organization will be offering supplemental benefits from the drop-down in column C “Mechanism to Offer the Supplemental Benefit”. Then use column D to select which supplemental benefit you intend to offer. If you select “Other” in column D, please provide more information in column E, otherwise you can leave column E blank. If the supplemental benefit you selected in column D, is part of a VBID benefit that is part of a combined allowance, please list the other benefits that are included in either column F “non-VBID” or column G “VBID”. Repeat this process for each supplemental benefit your organization intends to offer. [00:16:12]

Please note, you should only add non-VBID benefits such as Special Supplemental Benefits for the Chronically Ill (SSBCI), Uniform Flexibility (UF) or general Medicare Advantage benefits to Table 5.1.1 if you will not meet CMS’ new Health-related Social Needs (HRSN) requirement using VBID benefits alone. For more information regarding the qualifying benefits for the HRSN requirement please refer to the chart above Table 5.1.1. If you will need to use non-VBID benefits to meet this requirement, please enter a maximum of one non-VBID benefit per PBP for each HRSN requirement which you are using a non-VBID benefit to complete. If, for example, a PBP offers both a non-VBID meal benefit and a non-VBID produce benefit, only one of these benefits can be used to meet the HRSN requirement because they are both benefits in the food category. As a result, your PO should have a maximum of two non-VBID benefits per PBP that each satisfy a different HRSN requirement category. [00:17:15]

If your organization offers a flexible spending card benefit that can be spent on multiple supplemental benefit categories through the VBID Model, you will enter each supplemental benefit category in a separate row in table 5.1.1. [00:17:28]

Please also ensure that you complete the attestation found above Table 5.1.1. By selecting “Yes” to this attestation, you are guaranteeing that all PBPs offer supplemental benefits in at least two of the three HRSN priority areas for the VBID model. [00:17:45]

Table 5.1.2, Part C Reduced Cost Sharing, should be filled out if your organization intends to offer Part C reduced cost sharing. To fill out this table select a Part C service, item, or Part B drug from the drop-down menu of column J. When you make a selection, column I will auto populate with a Part C reduced cost sharing benefit number. To complete this row in the table you must next select a reduced cost sharing amount from the dropdown in column K. If you select “Other amount” in column K, please explain in column L. Continue this process for all Part C services, items, or Part B drugs you intend to offer Part C reduced cost sharing for. [00:18:38]

Table 5.1.3, Part D Reduced Cost Sharing, is only required for POs offering Part D reduced cost sharing. Before you fill out the table, you must first answer the attestation in question 1. Select “Yes” to this attestation, and then move on to the table below. Begin filling out the table with column O. Column N will auto populate once you make a selection in column O. To complete the table, please fill out column O through U for each row. When you have completed all tables with the benefits that you intend to offer and there are no red cells in any of the tables, you can move on to 5.2, Flex Target Populations. [00:19:20]

The “Flex_Target_Populations” tab consists of Table 5.2.1, where you will define the populations that you intend to target for the benefits that you provided on the “Flex_Benefits” tab. Begin filling out this table with column C “Targeting Methodology” and note that column B is locked. When you make a selection, column B will auto populate with the Target Population number and other columns will switch from grey to white based on your selection. Please fill out the entire table for each row or targeting methodology that you select. [00:20:05]

If you select ADI, Area Deprivation Index, as a targeting methodology, you will need to fill out Table 5.2.2, all the way to the right of Table 5.2.1, which consists of supplementary ADI questions. When you select ADI in column C, a pop up will remind you to complete the table starting in column U. When you have finished adding all of the targeting methodologies and there are no red cells indicating errors, you may move to the “Flex_Summary” tab. [00:20:34]

The “Flex_Summary” tab 5.3, is intended to connect the benefits you created on the “Flex_Benefits” tab with the Target populations that you created on the “Flex_Target_Populations” tab to define which contract-PBPs they will apply to. [00:20:50]

To begin filling out table 5.3.1, select a Contract-PBP-Segment from the dropdown in column B. This drop-down is populated with the PBPs that you listed on the “List_of_Participating_PBPs” tab. When you have selected your PBP, you will then select the benefit that this PBP is offering using the benefit numbers you defined in the “Flex_Benefits” tab. The benefit description will

auto populate in column D based on your selection. Next, select a targeting population in column E using the target population number you defined on the “Flex_Target_Populations” tab. Then proceed to answer the remaining columns as applicable based on the targeting methodology that you selected. Please be sure to complete all white cells in columns G through P. Repeat this process for each Flex benefit that you intend to offer under VBID, as well as for any supplemental benefits which you intend to use to meet the HRSN requirement. When you have finished adding your benefits and there are no red cells indicating errors, you can move on to Section 5.4 “VBID_Flex_Part_D_Supplement”. [00:22:01]

The Part D Supplement is required for all POs that selected offering Part D reduced cost sharing for select drugs on one or more formulary tiers to be included in the Part D Supplemental File on the “Flex_Benefits” tab. If your organization did not make this selection, you can move on to the next section of the application. [00:22:22]

To complete this table, begin by filling out column B with your CY 2024 formulary ID or 5-digit placeholder. Then fill out columns C through F and note that column F will be a drop-down of the Part D reduced cost sharing benefit numbers you created in the “Flex_Benefits” tab. Please fill out one row for each Prescription Concept Unique Identifier (RXCU) you intend to offer. When you have filled out all of the rows you intend to offer and there are no red cells indicating errors, please move on to the next section of the application. [00:22:54]

If you are offering Part D RI you will move on to the “Part_D_RI” tab. If you are offering VBID Flex only, you will move on to the “Enrollment_Targeting_Engagement” tab. If you are not offering Part D RI, you may skip ahead in the video to the Enrollment, Targeting, and Engagement section. [00:23:10]

I will now pass it to Razi to discuss Part D RI. [00:23:14]

Razi Corne:

The next three tabs are all related to the Part D RI component. Each collects different information about the rewards or incentives your organization will offer under this Component. The tabs are intended to be similar to the “Flex” tabs which you already completed. Similar to the “Flex_Benefits” tab, the “Part_D_RI” tab collects information on your proposed RI programs, while the “Part_D_RI_Target_Populations” tab collects information on the target populations that will be targeted for those rewards and incentives. Finally, the Part D RI Summary allows you to connect the RI programs to their corresponding target populations and PBPs. [00:23:54]

Tab 6.1 “Part_D_RI”, is intended to collect data on proposed RI programs and their corresponding reward activities. Begin by selecting a reward type from the drop-down in column C. Column B will then auto populate with a Part D RI Number. Then complete each of the white cells in that row. [00:24:14]

Of note, in this table, each row represents a reward activity or group of activities associated with the dispensation of a single reward amount or item. In other words, if a plan were to offer 10 dollars for completing of a Comprehensive Medication Review, CMR, and 20 dollars for

completion of a prescription fill following a CMR, they would submit two rows in the table. The first would list "Completion of a CMR or Medication Therapy Management (MTM) program" in column G, while the second would list "Completion of a CMR or MTM program | Medication Adherence and/or Medication Fills, may not be the sole basis for RI" in column G. [00:24:56]

In column I, please add the name of the RI Program that the reward activity falls under. Multiple rows in this table may have the same RI Program name in column I, as long as they are being offered using the same targeting methodology to the same set of contract-PBP-segments. [00:25:13]

Please note that if you select a gift card or restricted spend card you will need to attest that the card will not be redeemable for cash or able to be used for the purchase of tobacco, alcohol, firearms, or gambling. Once you have added all of the rewards you intend to offer and there are no red cells in the table, you may move on to Section 6.2 “Part_D_RI_Target_Populations”. [00:25:37]

For tab 6.2 “Part_D_RI_Target_Populations”, please complete table 6.2.1 and follow a similar method as the “Flex_Target_Populations” tab. Please note, that the “Part_D_RI_Target_Populations” tab differs from the “Flex_Target_Populations” tab as targeting requirements and options differ. Begin by selecting a target methodology in column C. Column B will then auto populate with a target population number. Then fill out any remaining white cells for that row. Note that if you selected “Other CMS approved disease state”, in column E, please use column G to explain. Once you have listed all of the target populations for the rewards and incentives and you have no red cells indicating errors, you may move on 6.3 “Part_D_RI_Summary” tab. [00:26:29]

For tab 6.3 “Part_D_RI_Summary” you will follow the same method as the “Flex_Summary” tab that you have already completed. In this tab you will complete Table 6.3.1 by connecting the rewards you entered in the “Part_D_RI” tab and the target populations you entered in the “Part_D_[RI]_Target_Populations” tab to each PBP that will offer Part D RI. [00:26:52]

Begin by selecting a Contract-PBP-[Segment] in column B, and then the corresponding RI for that PBP. The [reward] description will auto populate based on your selection in column C. The same process will occur as you select the corresponding target population and the target population description will auto populate in column F. Fill out the rest of the white cells in that row to complete the row. When you have added each unique Part D RI-PBP program you intend to offer and there are no red cells indicating error, you can move on to the next section. The next section will be the “Enrollment_Targeting_Engagement” tab. [00:27:30]

Tab 8 “Enrollment_Targeting_Engagement”, collects information about CY 2025 beneficiary projections. You will enter how many enrollees you expect to be enrolled in plans offering VBIID benefits, targeted for those benefits, and to actually receive those benefits. Fill out each row for the components you intend to offer in addition to the VBIID Model wide row. Please note that if you expect 100% engagement, you must provide an explanation in column F. Refer to the error

chart below to determine whether you are filling out each column correctly. If the error chart has no red cells, then this tab is complete. [00:28:09]

I will pass it over to Zack to discuss application submission. [00:28:12]

Zack Kathol:

When you have completed the Enrollment, Targeting, Engagement Section you should review all of the previous sections of this Application Spreadsheet to ensure accuracy and completeness. Look out for red cells that indicate errors. If everything is completed correctly, please save the workbook and upload the completed workbook to the submission link provided on the [VBID Model website](#). When you have completed and uploaded the Application Spreadsheet, the Net Savings Template, and the Financial Application in the Qualtrics form, please submit the form and you will receive a submission confirmation email that your application has been received. [00:28:49]

Thank you for following along with this walkthrough. If you have any questions, please reach out to the VBID Model Team at vbid@cms.hhs.gov and copy Acumen, LLC at MAVBIDhelpdesk@acumenllc.com. [00:29:05]