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To: Centers for Medicare and Medicaid Services
Submitted electronically via: regulations.gov

From: Shannon Schuster
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Date: April 27, 2020

Re: *Medicare Part D Reporting Requirements*

Attached are comments regarding the Medicare Part D Reporting Requirements.

Medicare Part D Reporting Requirements

Comments Submitted by
UnitedHealthcare
4/27/2020

UnitedHealthcare (UHC) appreciates this additional opportunity to provide input to the Centers for Medicare and Medicaid Services (CMS) regarding the Medicare Part D Reporting Requirements.

CMS is proposing to change the reporting date of data from “based on the date the coverage determination or redetermination decision is made” to “based on the date the enrollee/enrollee’s representative is notified in writing of the coverage determination or redetermination decision.” Per the guidance in the Parts C & D Enrollee Grievances, Organization/Coverage Determinations, and Appeals Guidance document, section 40.14, a plan is not required to send a written confirmation of a withdrawal. Since a plan may not send a written confirmation for all cases, it is unclear as to which date should be used for reporting withdrawals if the party was not “notified in writing” as stated in the proposed guidance. UHC strongly recommends that CMS keep the current reporting date based on “decision date” for all coverage determination and redetermination cases. In addition, using the “decision date” would align with CMS’s reporting criteria for audit universes.

40.14 – Withdrawal of a Request for an Initial Determination

The party that submits a request for an initial determination may withdraw the request in writing at any time before the decision is issued. A plan may also choose to accept verbal withdrawal requests. For verbal withdrawal requests, the plan should clearly document in their system the date and the reason why the party chose not to proceed with the initial determination procedures. The plan should, but is not required to, send a written confirmation of that withdrawal to the party within 3 calendar days of receipt of the withdrawal request, clearly indicating which request is being withdrawn (i.e. name of drug or type of service or item requested).

For these reasons, UHC strongly recommends continued reporting of all coverage determination and redetermination cases based on decision date.

If you have any questions on these comments, please feel free to contact me at 920-661-6217.

Respectfully,



Shannon Schuster
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UnitedHealthcare