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To: Centers for Medicare and Medicaid Services
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Subject: 2021 Part D Reporting Requirements (CMS-10185; OMB control number: 0938-0992)

Medical Mutual of Ohio (MMO) appreciates the opportunity to provide input to CMS regarding the 2021 Part D Reporting Requirements. Our comments and questions are outlined below.

Improving Drug Utilization Review Controls (page 13)

- 1) Element AA (new)
 - If a member received an opioid naïve reject for Oxycontin 15 and receives favorable CD, but switches to Fentanyl without filling Oxycontin, and receives a paid claim for the Fentanyl (Never received paid Oxycontin, no reject on Fentanyl.). Would this be counted as Elements AA & BB?
 - Would the same logic apply to a therapy change within the same HICL?
- 2) Element EE
 - Is it the expectation that the paid claim pursuant to a favorable coverage determination is directly related to the reject for that claim prior to CD?
 - A member attempts to fill Rx #1234567 for Oxycontin 10mg and it is rejected. Later, that member receives a favorable coverage determination for Oxycontin. The member then returns to the pharmacy and fills Rx #7654321 for Oxycodone ER 10mg (paid claim as it shares a HICL with the approved Oxycontin). Would this be considered element EE?

Thank you for your consideration.

Respectfully,
Bae Hunt
Manager, Medicare Compliance
Medical Mutual of Ohio