

TO: William N. Parham, III, Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs

FROM: OutcomesMTM, a Cardinal Health Company

SUBJECT: Comments regarding CMS-10185 Medicare Part D Reporting Requirements  
(OMB identification number: 0938-0992)

DATE: June 29, 2020

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We appreciate the opportunity to comment on the Medicare Part D Reporting Requirements and would like to offer points of consideration and recommendation on the proposed requirements.

### General

In response to the Final Rule published to the federal register on 6/2/2020 (RIN 0938-AT97), CMS has chosen to delay the applicable dates for multiple revisions to the Medication Therapy Management Program. The delayed revisions include 1) enrolling at-risk beneficiaries originating from drug management programs into the plan's MTM Program and 2) disseminating safe disposal information to beneficiaries. Due to the delayed revisions, we request clarity from the Office of Management and Budget (OMB) as to the intended effective date of the modifications to these data elements:

- Element K - Targeting criteria met. Required if met the specified targeting criteria per CMS – Part D requirements in § 423.153(d)(2). (Multiple chronic diseases/multiple Part D drugs/cost threshold, Drug management program at-risk beneficiary, Both).
- Element AA - Number of communications sent to beneficiary regarding safe disposal of medications. Required if met the specific targeting criteria per CMS – Part D requirements.

If the OMB intends to retain the original 1/1/2021 effective date, we would request that further guidance be shared as to how each of the below data elements be represented in Medicare Part D Reporting when the program revisions represented through this data will not be active. For example, if it is not required to disseminate safe disposal information to beneficiaries starting 1/1/2021, how should element AA be populated to meet the reporting requirements for CY2021?

### Section II. Medication Therapy Management Programs

On page 8, data element F is defined as, "Met the specified targeting criteria per CMS – Part D requirements. (Y (yes) or N (no))."

**Comments:** We request clarity on the designation that should be selected for this element when a beneficiary qualifies for MTM services as a part the Drug Management Program. Should this designation be reserved for only beneficiaries that meet the current MTM criteria selected by the plan sponsor (not including at-risk beneficiaries identified via a Drug Management Program)?

On page 8, data element K is defined as, "Targeting criteria met. Required if met the specified targeting criteria per CMS – Part D requirements in § 423.153(d)(2). (Multiple chronic diseases/multiple Part D drugs/cost threshold, Drug management program at-risk beneficiary, Both)."

**Comments:** We appreciate the modification CMS has inserted, however, unless CMS intends to leverage this added visibility, we would suggest that element K be updated to reflect the targeting criteria that is met first by the beneficiary reduce administration burden.



On page 9, data element AA is defined as, "Number of communications sent to beneficiary regarding safe disposal of medications. Required if met the specific targeting criteria per CMS – Part D requirements."

**Comments:** OutcomesMTM asks that CMS clarify whether the information must be shared via a document or if a verbal conversation between the beneficiary and an MTM provider would count as a communication provided to the beneficiary for the purposes of Part D MTMP Annual Reporting.

Sincerely,



Dani Markus, PharmD, MBA  
Vice President of Product and Quality  
OutcomesMTM

**OutcomesMTM, a Cardinal Health company**

Outcomes<sup>®</sup> Incorporated, doing business as OutcomesMTM, is the national leader in the design, delivery and administration of Medication Therapy Management (MTM) programs. Our team is committed to leveraging local relationships among pharmacists, patients and prescribers, along with innovative technology to help achieve optimal health outcomes. We administer more than 360 MTM programs for Medicare plan sponsors, Managed Medicaid organizations, commercial plans, pharmacy benefit managers and employer groups. MTM services in our programs are delivered and documented by our nationwide network of pharmacists and their support staff in retail pharmacies, physician clinics and long-term care organizations.

