



**BlueCross BlueShield
Association**

An Association of Independent
Blue Cross and Blue Shield Plans

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June 29, 2020

Centers for Medicare & Medicaid Services
Office of Strategic Operations and Regulatory Affairs,
Division of Regulations Development, Room C4-26-05,
Attention: Document Identifier/OMB Control Number 0938-0992
7500 Security Boulevard, Baltimore, Maryland 21244-1850

Submitted via www.reginfo.gov

RE: Medicare Part D Reporting Requirements

Dear CMS Desk Officer:

The Blue Cross Blue Shield Association (BCBSA) appreciates the opportunity to provide comments on the proposed Medicare Part D Reporting Requirements (CMS-10185), as outlined in the *Federal Register* notice dated May 29, 2020.

BCBSA is a national federation of 36 independent, community-based and locally operated Blue Cross and Blue Shield (BCBS) companies (Plans) that collectively provide healthcare coverage for one in three Americans. For more than 90 years, Blue Cross and Blue Shield companies have offered quality healthcare coverage in all markets across America – serving those who purchase coverage on their own as well as those who obtain coverage through an employer, Medicare and Medicaid. Today, BCBS Plans serve millions of Medicare beneficiaries in MA and Part D options.

BCBSA and Blue Plans are committed to program integrity in the Medicare Part C and Part D programs. Per our review we have the following specific recommendations, questions, and clarifications related to the reporting requirements for consideration.

Request for Flexibility in Opioid Program Requirements

We ask CMS to remove the reporting requirements for at-risk beneficiaries (ARBs) in the Medication Therapy Management Program (MTMP), and the provision of information on safe disposal of medications. The first part of the Medicare Advantage (MA) and Part D rule for 2021 did not contain finalized guidance on MTMPs, or information on the safe disposal of prescription drugs, and we expect to see the second part of the rule released later in 2021 applicable for 2022. Therefore, we request that CMS remove these data elements from the Plan Year 2021 Medicare Part D Reporting Requirements.

Finally, we are concerned that the MTMP may not be the program best suited to address the needs of ARBs. The addition of beneficiaries at-risk of opioid abuse to MTMPs has the potential

to increase costs and administrative burdens, and may not be the most effective and efficient way to achieve positive outcomes for beneficiaries.

Mandatory Drug Management Programs (DMPs) are an important and necessary tool to combat the opioid epidemic. As CMS takes steps to make these programs mandatory starting in 2022, we ask that the agency provide more clarity and guidance around the requirements for DMPs, particularly related to the specific criteria for identifying potentially at-risk beneficiaries.

BCBSA appreciates this opportunity to provide comments regarding the updates to Part D reporting requirements for oversight, monitoring, compliance and auditing activities necessary to ensure the quality provision of the Part D benefit. Should you have any questions or wish to discuss our comments further, please contact Sarah Rayel at 202-626-4823 or Sarah.Rayel@bcbsa.com.

Sincerely,

Sarah Rayel
Director, Medicare Policy