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Included in the list of Data Validation documents in CMS-10305, there appear to be contradictory requirements for DUR reporting. From the 2022 Medicare Part D Reporting Requirements document, under Section IV. Improving Drug Utilization Review, the data requirement is "All data elements must be uploaded to HPMS at the Contract level."

From CMS-10305, Appendix B - Data Validation Standards include references to both plan and contract level.

- 6.a.iii, 6.b.iii, and 6.c.iii – Rejected opioid claims are counted at the unique plan, ...
- 7.a.1. and 7.b.1. - Rejected claims are counted at the unique contract,...
- 8.a.1. and 8.b.1. - Rejected claims are counted at the unique contract,...

Please confirm all rejected claims are counted at the contract level.