CMS PBP and Formulary CY 2025 (CMS-R-262) - Kaiser Permanente comments for CMS (12.4.23)

#	CMS Comment Topic	PBP Section/Function	Comment for CMS
1	**PBP Module Data Entry**	Section Rx	After initial bid submission in June, desk review changes have to be implemented in various areas of the PBP but the tool isn't programmed to keep data static in areas that aren't changing. For example, in our plan's PBPs with Enhanced Alternative RX design, we needed to change one tier label during desk review. However, the only way to change one tier was to change the whole tier model, which then discarded all RX data, instead of just the one tier that's changing. Our plan wasn't changing any cost-sharing and just needed to change a single tier label, but instead had to re-enter all data and re-check it against what was filed in June because all the data was discarded. We'd like to suggest that different programming be added after initial bid submission in June that keeps the module from discarding downstream data that isn't going to change.
2	**HPMS: Bid and Benefit reports**	Data Reports	Historically, PBP data reports included Plan Setup information (i.e., service area and marketing data). The plan suggests that this information be included in the data reports again.
3	**HPMS: Bid and Benefit reports**	Data Reports	When generating a data report and downloading the file into excel or HTML, the plan requests the default file name to automatically include the contract year and the PBP number.
4	**HPMS: Bid and Benefit reports**	HPMS Bid Reports - Plan Comparison report	In the Plan Comparison HPMS Report, the benefit changes are reflected from year to year only if the benefit is offered again in the upcoming filing year. If the benefit was offered in the prior year and not offered in the upcoming year, the benefit does not display in the report. The plan suggests the Plan Comparison report be reprogrammed to include benefits not being offered in the prior year and/or upcoming year to show an accurate benefit comparison (show what changed) from year to year.
5	**HPMS: Bid and Benefit reports**	HPMS Bid Reports - PBP Benefit Report	In the HPMS Bid Reports module, the plan requests that the PBP Benefit Report be revised to include all categories in the PBP; that is, a single, combined PBP Benefit report that includes Part C benefits, OSB, Out-of-Network, Point of Service, Visitor/Travel Benefit, and Part D reports into one comprehensive report instead of generating individual reports for each section.

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6	**HPMS: BPT Upload**	Upload	In the BPT upload section in HPMS, the plan requests the BPT Upload Status column to include the latest upload date and time so that the user can view the upload status rather than clicking the information icon in the Upload BPT column. For example, once the user uploads the latest BPTs and is ready to submit via the PBP-Bid Submission screen, the time and date of the latest BPTs should match the current upload status in the BPT upload and PBP-Bid Submission screens.
7	**PBP Module Data Entry**	General	During rebate reallocation, the plan performed a final PBP-BPT resubmission, and then subsequently needed to upload supporting documentation in HPMS. However, the PBP module reset the PBP status to "In Progress" after supporting documentation was uploaded. To change the status back to "Completed," the user had to go into the "Visitor/Traveler" section and click Save/Next to change the status back to "Ready for Submission," and then perform a second final PBP-BPT final resubmission to ensure everything is aligned. The plan suggests that the system be preprogrammed to allow supporting documentation to be uploaded after a PBP-BPT final resubmission without resetting the PBP status to reduce extra work by the plan.
8	**PBP Module Data Entry**	Standard Bid - Prior Authorization & Referral	When a plan files an EGWP PBP with a standard bid for in-network service categories, the plan suggestions adding functionality to add a general notes field in the "Prior Authorization & Referral" section that would allow plans to add a general notes field so plans can indicate if there are exceptions to prior authorization or referral. For example, "1a: Prior authorization only applies to transplants. 7g: Prior authorization required for Medicare-covered Acupuncture..."
9	**PBP Module Data Entry**	Standard Bid	When a plan files an EGWP PBP with a standard bid for in-network service categories, the module asks the question, "Does this plan offer a standard bid for Visitor/Traveler Program V/T?" but V/T is a supplemental benefit not applicable to a standard bid. The plan suggests revising the language to remove a reference to a supplemental benefit not covered with a standard bid.

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10	**PBP Module Data Entry**	Benefit Details - 13 Other Supplemental Services	In" Benefit Details - 13 Other Supplemental Services," there is a PBP module limitation that only allows the addition of three freeform supplemental benefits (13d Other 1, 13e Other 2, and 13f Other 3). The plan requests that the section be reprogrammed to allow a plan to enter more than three "other" supplemental benefits in the module. Removing this limitation would allow plans the flexibility to enter new, additional supplemental benefits that don't fit into any other PBP module categories.
11	**PBP Module Data Entry**	Rx Section	In the PBP module, we suggest the Medicare-defined Part D amounts (e.g., for deductible and gap) be generated in the module and data report so downstream data consumers may pull and use that data accurately if needed.
12	**PBP Module Data Entry**	Benefit Details updates and VBID MA Uniformity section	When making changes in the "Benefit Details section", the "VBID, MA uniformity section" status always changes to "In Progress" even if no changes were made to the section. The user must go back into "VBID MA uniformity section" and navigate through each screen and do a "Save and Next" until the user reaches the last screen, then do a "Save and Close" in order for the status to change back to "Completed". The plan requests that the system allow changes in the Benefit Details section without impacting the VBID, MA Uniformity section.
13	**PBP Other: HPMS Module**	HPMS Module	During Bid Desk Review, the plan was asked to upload new BPTs for H9003 008. After uploading the BPTs, we went to do a final PBP-BPT final resubmission for 008, but the bid reviewer had overridden the data in PBP 008, which defaulted the PBP 008 status to "In Progress." After we ran a comparison of the new data report with initial bid submission data report and validated that the bid reviewer hadn't revised data, but perhaps instead had tried to view data and clicked "Save" or "Save and Next" instead of close, we had to go into the sections with "In Progress" status to click Save/Next to override the bid reviewer's data entry and change the status to "Ready for Submission" in order to do a BPT-PBP Final Submit. During Desk Review, is there a way to prevent PBP data from being changed when a desk reviewer or desk review contractor wants to view the PBP data in the module?
14	**PBP other: PBP User Guide and Bid Manual**	Documentation	The plan requests updated versions of the PBP User Guide and Bid User Manual throughout the PBP process so that users have the latest reference PBP module documentation when there are updates.