

June 27, 2024

Center for Medicare & Medicaid Services  
Office of Strategic Operations and Regulatory Affairs  
Division of Regulations Development  
Attention: CMS-10882  
Room C4-26-05  
7500 Security Boulevard  
Baltimore, MD 21244-1850

Submitted Electronically: <https://www.reginfo.gov/public/do/PRAMain>

***Re: The Medicare Advantage and Prescription Drug Programs: Part C and Part D Medicare Prescription Payment Plan Model Documents (CMS-10882)***

Dear Sir/Madam:

UnitedHealth Group (UHG) is pleased to respond to the Centers for Medicare and Medicaid Services' (CMS) request for comments regarding the *Medicare Advantage and Prescription Drug Programs: Part C and Part D Medicare Prescription Payment Plan Model Documents*.

UnitedHealth Group is a mission-driven organization dedicated to helping people live healthier lives and helping make the health system work better for everyone through two distinct platforms - UnitedHealthcare, our health benefits business, and Optum, our health services business. We work with employers, providers, and governments to serve people and share a vision of a value-based system of care that provides compassionate and equitable care. We are committed to a future where every person has access to high-quality, affordable health care and a modern, high-performing health system that reduces disparities, improves outcomes, and lessens the burden of disease.

***Model Material Flexibility***

For Exhibits 2 - 6, the draft instructions state that plans must include all model language "exactly as written," and only minor grammar, punctuation, and formatting changes are permitted. Final Part 1 and Draft Part 2 Medicare Prescription Payment Plan guidance referred to these documents as model materials rather than standardized materials. With respect to model materials, § 423.2267(c) states that Part D sponsors are "not required to use CMS model materials or content verbatim..."<sup>1</sup>

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<sup>1</sup> § 423.2267 Required materials and content.

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(c) **Model materials.** Model materials and content are those required materials and content created by CMS as an example of how to convey beneficiary information. When drafting required materials or content based on CMS models, Part D sponsors:

(1) Must accurately convey the vital information in the required material or content to the beneficiary, although the Part D sponsor is not required to use CMS model materials or content verbatim; and  
(2) Must follow CMS's specified order of content, when specified.

UHG requests that the instructions for the model documents be revised to indicate that plans are not required to use the model language exactly as written so long as the vital information is accurately conveyed to beneficiaries, consistent with § 423.2267(c). Similar to other CMS model documents, this flexibility allows plans to make additional changes based on the unique needs of our members or to provide greater clarity based on distinct plan design. Material customization also enables us to maintain a consistent voice, structure, and design in our communications, making it easier for members to understand our messaging.

UHG's additional suggestions focus on clarity and readability and are organized by model notice document. We have also attached copies of the models with our comments embedded.

***Exhibit 1 - Consider Managing Your Monthly Drug Costs with the Medicare Prescription Payment Plan***

- UHG recommends allowing plans to include language that clarifies the exclusion of Part B and supplemental drugs from the program. For example: "Medicare Part B drugs and supplemental drugs are not eligible to be included in the program."
- UHG recommends modifying the sentence "Your monthly bill is based on what you would have paid for any prescriptions you get, plus your previous month's balance...." to read "Your monthly bill is based on what you would have paid for any prescriptions you get, divided by the number of months left in the year."

***Exhibit 2 - Medicare Prescription Payment Plan Participation Request Form***

- UHG recommends allowing plans to include language that clarifies the exclusion of Part B and supplemental drugs from the program. For example: "Medicare Part B drugs and supplemental drugs are not eligible to be included in the program."
- UHG recommends removing the word "voluntary" in the sentence "The Medicare Prescription Payment Plan is a voluntary payment option that works with your current drug coverage..." We are concerned enrollees may think that payments are voluntary, and the sentence is clear without the word.
- UHG requests the flexibility to allow plans to include a QR code that links members to the online request form.
- UHG also requests that plans be allowed to include terms and conditions on the same page as the form to reduce paper usage. Alternatively, we request flexibility to refer consumers to a plan's website or call center for information on terms and conditions.

***Exhibit 3 – Part D Sponsor Notice to Acknowledge Acceptance of Election to the Medicare Prescription Payment Plan***

- UHG recommends modifying the sentence "Your monthly bill is based on what you would have paid for any prescriptions you get, plus your previous month's balance...." to read "Your monthly bill is based on what you would have paid for any prescriptions you get, divided by the number of months left in the year." We are concerned that references to a

previous month's balance may lead to confusion for members who do not have a remaining balance.

- UHG suggests adding language clarifying that enrollees cannot rejoin the program if they have a past-due balance.

***Exhibit 4 – Part D Sponsor Notice for Failure to Make Payments under the Medicare Prescription Payment Plan***

- UHG recommends modifying the sentence “Like any other debt, you’re required to pay the amount you owe, but you won’t pay any interest ...” to read “You're required to pay back any amounts you owe for your medications, but you won’t pay any interest...”

***Exhibit 5 - Part D Sponsor Notice for Failure to Make Payments under Medicare Prescription Payment Plan – Notification of Termination of Participation in the Medicare Prescription Payment Plan***

- Similar to the reference in Exhibit 4, UHG does not believe the comparison to other types of debt is necessary. We suggest modifying the sentence “Like any other debt, you’re still required to pay the amount you owe, \$[amount owed]...” to read “You're required to pay back the amount you owe for your medications, \$[amount owed].”

***Exhibit 6 - Part D Sponsor Notice of Voluntary Removal from the Medicare Prescription Payment Plan***

- To avoid duplication of the verbiage used in the preceding option 2, UHG recommends removing the bolded text “...and you’ll continue to be enrolled in [plan name] or your new Medicare plan for your drug coverage.”
- To prevent confusion for members who do not have a balance, UHG recommends adding the verbiage “If you have an outstanding balance....” to the beginning of the sentence stating: “You’ll continue to be billed monthly, or you can choose to pay the amount you owe all at once.”

We appreciate CMS’s consideration of our comments. Please feel free to contact me if you have any questions.

Sincerely,



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