

**Kaiser Permanente Comments on
Agency Information Collection Activities: Submission for OMB Review; Comment Request**

**Attention: Document Identifier/OMB Control Number: CMS-10882
(OMB control number: 0938-New)**

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Kaiser Permanente¹ appreciates the opportunity to provide comments on the Centers for Medicare & Medicaid Services' (CMS) intention to collect information from the public with respect to the Medicare Advantage and Prescription Drug Programs: Part C and Part D Medicare Prescription Payment Plan Model Documents published in the *Federal Register* (89 FR 46122) on May 28, 2024 (Form CMS-10882, OMB control number: 0938-New).

Kaiser Permanente offers the following recommendations and requests for clarification on the proposed data collection:

Exhibit 2 – Medicare Prescription Payment Plan Participation Request Form

- Kaiser Permanente strongly recommends that CMS provide Part D sponsors with the flexibility to include an optional field on the Medicare Prescription Payment Plan Participation Request form to collect an internal beneficiary identification number from current plan members (e.g., a medical record number). For plans with an internal beneficiary identification number, inclusion of this optional field on the form will streamline the election process and enhance plans' ability to review and approve requests in a timely manner. Internal beneficiary identification numbers allow plans to quickly verify member identity, reducing or eliminating the need to conduct additional research or even direct beneficiary outreach. Such efficiency in processing election requests is critical, particularly for requests that require a decision within 24 hours.
- If Part D plans are not provided the option to include a field for current member internal beneficiary identification numbers on the Medicare Prescription Payment Plan election form, plans will incur additional administrative expenses in excess of CMS' burden estimate for this data collection effort. Specifically, Kaiser Permanente estimates that processing election requests will require two additional minutes per record (or the equivalent of one full time employee). Furthermore, omission of this optional field from the election request form will create a risk of delays in processing requests with potential consequences for member experience.

¹ Kaiser Permanente comprises Kaiser Foundation Health Plan, Inc., one of the nation's largest not-for-profit health plans, and its health plan subsidiaries outside California and Hawaii; the not-for-profit Kaiser Foundation Hospitals, which operates 40 hospitals and over 600 other clinical facilities; and the Permanente Medical Groups, self-governed physician group practices that exclusively contract with Kaiser Foundation Health Plan and its health plan subsidiaries to meet the health needs of Kaiser Permanente's members.

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

- In response to comments received on the initial draft model form, CMS updated the initial paragraph of this model notice by adding language that states the Medicare Prescription Payment Plan option helps beneficiaries manage their out-of-pocket Part D costs by spreading them across the calendar year (January-December). We understand that CMS has advised, through its response to comments included in the final Part One guidance, that the agency will address in future guidance the issue of whether beneficiary participation in the Medicare Prescription Payment Plan will automatically renew or terminate after the plan year for which the beneficiary elects.
- While the updated language will provide beneficiaries with added clarity on the program's design and intent, we remain concerned that beneficiaries opting into the program may experience confusion regarding whether their election in the program will automatically renew or terminate at the end of the year. As this model notice does not indicate to the beneficiary what the duration of program election is, such confusion could lead to beneficiaries filing complaints with their Part D plan and/or Part D plans providing conflicting information to program participants or otherwise taking different approaches to addressing this issue. Therefore, Kaiser Permanente reiterates our recommendation that CMS: 1) provide clarity on whether beneficiary election into the Medicare Prescription Payment Plan will automatically renew or terminate at the conclusion of each plan year, and 2) add language to this model notice that clearly states to beneficiaries the duration of their program participation.

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Kaiser Permanente appreciates CMS' consideration of these comments. Please contact Greg Berger at gregory.b.berger@kp.org if we may provide additional information or answer any questions.