

			SilverScript Insurance Company (contract S5601) and Accendo Insurance Company (contract S5644)		
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	Document Title	Page Number	Section Title	Specific Text from Document that is being commented upon	Comment
1	General				We encourage CMS to allow PBMs, that provide similar services and reports to multiple Part D plans, to transfer such audit results across plans. To the extent a given Part D plan has a unique aspect to it; we fully support additional Part D plan specific testing and auditing. However, where the parameters and processes are identical, a single sampling across the plans the PBM serves that would satisfy the Data Validation requirements for all plans served by the PBM would greatly improve efficiencies for CMS, plans and PBMs. Upon completion of such an audit, the PBM or CMS could provide the plans with a “audit certification number” for entry into HPMS at a plan level if tracking such information via that repository is required
2	General				The OAI tool needs to be specific to that year’s reporting requirements. Please see the following comments regarding the discrepancies noted between the 2010 Data Validation Standards and the 2010 Reporting Requirements. The discrepancies that are noted appear to be requirements that were suspended, removed or changed from prior years reporting requirements and technical specifications and are no longer applicable for 2010.
3	General				Please confirm how long does the sponsor or PBM need to retain intermediary data sets (interim and final stage data sets) after the report is generated?
4	OAI	3, 7, 8,	3.3, 4.3.4, 5.0the Reporting Requirements Technical Specifications.....	This should read, "the Reporting Requirements and the Reporting Technical Specifications.....(they are two different documents and both should be referenced during the validation process.)

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5	DVR Standards	38	3.4 Coverage Determinations and Exceptions	Measure Specific Criteria section 7. f. Excludes coverage determinations/exceptions that were forwarded to the IRE because the organization failed to make a timely decision on a standard or expedited request.	This is not a requirement for the Coverage Determinations and Exceptions report for 2010, but was instead a requirement for the Appeals report in 2009. We recommend that CMS remove this from the their Data Validation requirements altogether, as it is no longer a requirement for any report during CY2010.
6	DVR Standards	36	3.4 Coverage Determinations and Exceptions Measure-Specific Criteria	Measure Specific Criteria section #5 d. Excludes pharmacy transactions for enhanced alternative drugs.	This Data Validation Standard measure is different from the approved and distributed 2010 Reporting Requirements and Technical Specifications. The 2010 Reporting Requirements and Technical Specifications do not state to exclude transactions for any type of drugs. We recommend that the Data Validation Standards match the published 2010 CMS Reporting Requirements and the 2010 Reporting Technical Specifications documents
7	DVR Standards	41	3.6 Long-Term Care Utilization Measure-Specific Criteria	Measure Specific Criteria section #4 b. Includes only retail pharmacies that are contracted as of the last day of the reporting period #5 b. Includes only retail pharmacies that are contracted as of the last day of the reporting period	The current 2010 Reporting Requirements and Technical specifications for these data elements specify to only include pharmacies that were active on the last day of the reporting period. Guidance received from CMS on 10/13/2010 stated that all the data elements for this report should be including any pharmacy that was active for one or more days in the reporting period. CMS indicated that they will be updating the 2010 Reporting Standards and Technical Specifications to indicate that all the data elements are include any pharmacy that was active for one or more days of the reporting period. We recommend that the Data Validation Standards match the 2010 CMS Reporting Requirements and the 2010 Reporting Technical Specifications documents once they have been updated.

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8	Supporting Statement	13	16	Publication/Tabulation Dates - Collection of the Part C and Part D Validation will commence around March 1, 2011.	The timeline provided indicated that 2010 validation reviews will begin between March and May of 2011. We recommend that this timeframe is moved to the May, through July timeframe because plan sponsors will be handling the First Quarter 2011 reporting during March, April and May, and such a shift would streamline the activity required through the plan year for plans.
9	Data Extraction and Sampling Instructions	4	3.2	In general, sampling will be conducted at the organization's contract level. In cases where organizations have multiple contracts that use the same data sources and processes for each contract, only one sample is required. This one sample must be randomly drawn from pooled data from all contracts so that it is representative of the systems and processes across the contracts.	<p>In regards to the statement that “one sample must be randomly drawn from pooled data from all contracts”.</p> <p>We believe that pooling multiple contracts from a single sponsor will cause a significant burden on the sponsor and on any PBM servicing multiple sponsors that have multiple contracts. The reporting is currently created by contract and the pooling the contracts together for a single sponsor will likely require significant database development if the current design for the reporting databases purposefully keeps the contract data separated.</p>