



#4

September 11, 2007

CMS 10317

Bonnie L. Harkless
The Centers for Medicare & Medicaid Services
Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development – C
Room C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

Dear Ms. Harkless:

I would like to thank the Centers for Medicare & Medicaid Services (CMS) for this opportunity to review and submit comments related to the draft 2009 MA and Part D applications.

We applaud CMS' decision to move to electronic submission of the MA applications for 2009. We believe this is a great step forward in simplifying the application process while creating a more streamlined, efficient approach for Medicare Advantage organizations.

We are concerned that the addition of numerous attestations, particularly in the draft 2009 Part D application, may be perceived as a shift in the oversight relationship between CMS and sponsors. Sponsors may view such additions as creating additional regulatory burden while signaling a move away from the longstanding partnership relationship to one that is more onerous. Sponsors already implement these requirements as outlined in regulations, manuals, statute, contracts and other guidance. Adding these attestations to the application may only serve to create hesitation as these organizations determine whether to contract with CMS.

Additional specific comments related to the 2009 MA application are in the attached matrix.

Again, thank you for the opportunity to provide input into the 2009 application process. We appreciate all of the work that CMS put into these documents. And we look forward to our continued partnership with CMS.

Sincerely,

A handwritten signature in black ink, appearing to read "Cheryl A. Powell".

Cheryl A. Powell
Director, Policy and Compliance

Enclosure

DATE: 9/11/07

Employer Group MA_PD

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Powell, Cheryl A.

From: Powell, Cheryl A.
Sent: Tuesday, September 11, 2007 11:49 AM
To: 'bonnie.harkless@cms.hhs.gov'
Cc: 'Leticia.Ramsey@cms.hhs.gov'
Subject: Please find attached our comments on the Draft 2009 application

Attachments: CVTY PartC-2009appcommentmatrix.xls

Thank you for the opportunity to submit comments. Please find in the email two general comments from Coventry with respect to the draft 2009 MA and Part D applications. Additional comments related to the 2009 MA application are in the attached matrix.

General Comments -

We applaud CMS' decision to move to electronic submission of the MA applications for 2009. We believe this is a great **step forward in simplifying the application process** while creating a more streamlined, efficient approach for Medicare Advantage organizations.

Also, with respect to the Part D application, we are concerned that the addition of numerous attestations, particularly in the Part D application, may be perceived as a shift in the oversight relationship between CMS and plans. Plans may view such additions as creating additional regulatory burden while signaling a move away from the longstanding partnership relationship to one that is more onerous. Plans already implement these requirements as outlined in regulations, manuals, statute, contracts and other guidance. Adding these attestations to the application may only serve to create hesitation as plans determine whether to contract with CMS.

Again, thank you for the opportunity to comment. We appreciate all of the work that CMS put into these documents.

Thanks,

Cheryl

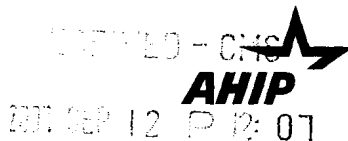


CVTY
-2009appcommentr

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Centers for Medicare & Medicaid Services
Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development – C
Attn: Bonnie L. Harkless
Room C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

Re: CMS-10137

Dear Ms. Harkless:

I am writing on behalf of America's Health Insurance Plans (AHIP) in response to the notice published under the Paperwork Reduction Act in the July 13, 2007 Federal Register (72 FR 38601) by the Centers for Medicare & Medicaid Services (CMS) concerning the following applications: "Application for Prescription Drug Plans (PDP); Application for Medicare Advantage Prescription Drug (MA-PD); Application for Cost Plans to Offer Qualified Prescription Drug Coverage; Application for Employer Group Waiver Plans to Offer Prescription Drug Coverage; Service Area Expansion Application for Prescription Drug Coverage". AHIP is the national trade association representing nearly 1,300 member companies providing health coverage to more than 200 million Americans. This proposed collection would affect AHIP's member organizations, many of which participate as plan sponsors under the Medicare Part D Prescription Drug Benefit (Part D) program.

We appreciated the summary documents provided by CMS to highlight the proposed changes in the applications and facilitate review. We have only two comments, and they appear below.

Comments

- **Follow-Up to CAHPS Survey.** Section 3.2.3A5 that appears in the applications for new Prescription Drug Plan (PDP) Sponsors, Medicare Advantage Prescription Drug Plan (MA-PD) Sponsors, and Cost Plan Sponsors offering Part D Benefits contains a new attestation that states: "Applicant agrees to comply with the appropriate follow-up related to the Consumer Assessment of Health

Providers and Systems Survey (CAHPS).” The “High-Level Summary of All Part D Application Revisions from 2008 Solicitation for the 2009 Solicitation” that CMS issued with the proposed applications notes in item six that the new attestation is “Based on 2008 Call Letter and Chapter 7 of the Prescription Drug Benefit Manual.” However, neither the 2008 Call Letter nor Chapter 7 contain guidance about the nature and scope of the required CAHPS survey follow-up activities. Section 40.2 of Chapter 7 of the Prescription Drug Benefit Manual states only that, “Specific responsibilities for plan follow-up based upon survey results from CAHPS, once developed, will be described here.” To permit sponsors to clearly understand the obligations referenced in the attestation, we recommend that its inclusion be deferred until the guidance referenced in the Manual is issued.

- **Application Process for a Cost Plan with a Part D Contract to Become an MA-PD Plan Sponsor.** We recommend that CMS provide a streamlined application process to address the circumstance in which a Cost Plan that also has a contract as a Part D plan sponsor decides to non-renew its Cost Plan contract and apply to become an MA-PD plan sponsor. Under such a process, where the information provided in the Cost Plan’s previously approved Part D application continues to be correct, we recommend that the organization be permitted to complete only the Medicare Advantage portion of the application and provide through an attestation confirmation that the information in the previous Part D application remains accurate. We also recommend that the organization be permitted to request continuation of some or all waivers approved for the existing Part D contract based upon an attestation that the circumstances supporting the waiver(s) still apply. We believe this approach would permit CMS to ensure that the organization continues to meet the qualifications for its Part D contract through a process that avoids duplicative work for both the organization and CMS.

AHIP appreciates the opportunity to comment. If you have questions or would like additional information about the issues we have raised, please contact me at (202) 778-3209 or cschaller@ahip.org.

Sincerely,



Candace Schaller
Senior Vice President, Federal Programs