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December 24, 2007

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

Dear Ms. Harkless:

I would like to thank the Centers for Medicare and Medicaid Services (CMS) for this opportunity to review and submit comments related to 2009 PBP and Formulary Submission package.

We are requesting that CMS consider the following suggestions and incorporate clarifications into the final 2009 PBP and Formulary Submission package. We ask that CMS improve the ability within the PBP to input a Part B premium reduction. Additionally we suggest that for PPO plans the PBP should allow for differentiation of out-of-network benefit limits across things such as routine eye exams, dental or eyewear. In the past, it has been impossible to separate in and out-of-network to allow for different amounts. The amounts for out-of-network had to be totaled and entered into a comments field. This then created a Summary of Benefits in which the different amounts were not delineated for each out-of-network item or service (but rather included one overall amount for all). A change to the PBP would streamline this activity for plans and allow for greater clarity.

Again, thank you for the opportunity to provide input.

Sincerely,

A handwritten signature in cursive script that reads 'Mary Ninos'.

Mary Ninos
Vice President Medicare
Compliance Officer