

Hello!

Thank you for the opportunity to provide feedback on the contract year 2019 Plan Benefit Package (PBP) Software and Formulary Submission. Here are our feedback we would like to share.

- **PBP Notes**- CMS is directing plans to put multiple benefits into one service category. We use paragraphs to separate the benefits. When the PBP reports are created, the formatting in the PBP software is not carried over. If there are two paragraphs for two different benefits in one PBP note section, the two paragraphs become one paragraph in the PBP report. When we use the PBP report during quality check, it is difficult to see that there are two different benefit PBP notes. It would make it easier to read if the format stays the same as entered into the PBP software.
- **PBP software to run compares**-We appreciate the compare report and Medicare Plan Finder on HPMS. We recommend to have these reports in the PBP software as well. It would be useful to run compares in the PBP software without having to upload the bids onto HPMS. This is especially crucial during the PBP review since we can only resubmit once when the gates are reopened. The compare report can be a useful tool to see the differences prior to resubmitting the bids.
- **PBP Reports**-We appreciate the ability to save the report into excel format and would like the ability to save in PDF format as well.
- **Rx Section in PBP software versus PBP Report**-When we use the PBP report for quality check, it is quite difficult to follow when we compare it with what we entered into the PBP software. Could there be an option to print the PBP report in the same order as the PBP data entry versus tier 1, tier 2, tier 3, tier 4, and tier 5?
- **Copy feature**-The copy feature did not work correctly for us at certain times. We would try to copy a category from one PBP to a few other PBPs. As we review the compare reports in HPMS, we would find that some PBP notes were not copied over.
- **EGWPs**-We appreciate the option of selecting standard bid for EGWPs. However, we recommend that standard bid options have the ability to make changes to the data field.
- **Skilled Nursing Facilities**-We were hoping to see a change with the enhancement to how the cost-sharing in this benefit category would display. Our SNF benefit is structured as "per day" vs. per benefit period or stay. As such, when reviewing the Medicare Plan Finder (MPF) summary, the cost-sharing is displayed as "for days 21 through 100" when it should state "<X> **per day** for days 21 through 100".
  - **Question:** Without the "per day" clarification, it is extremely misleading on the MPF. We strongly recommend CMS incorporate the "per day" language in this benefit category as part of the enhancement for transparency and accuracy.
- **Inpatient Health and Mental Health Services**-This benefit is currently displayed as "per stay" on the MPF and in the MPF summary report. For plans that charge a cost-sharing "per day", it is not being accurately reflected.
  - **Question:** We are concerned that by leaving it as is and not clarifying that the cost-sharing is applied "per day," it is misleading on the MPF. We strongly recommend CMS incorporate the "per day" language in this benefit category as part of the enhancement for transparency and accuracy.
- **Medicare Plan Finder**-The MPF was released late this year compared to previous years. We would appreciate it and it would be a tremendous help if it would be released earlier.
- **Filing a range** – We recommend that the benefits in each service category be split up to be more transparent for the beneficiaries. Instead of displaying a range on the MPF, the benefit and its cost-sharing from the service categories are listed. An example would be service category 9a-

Outpatient Hospital Services. Instead of a range of \$10-\$200, MPF would list \$10 for observation stays and \$200 for surgery in an outpatient setting.

- **INN and OON** - We recommend that the INN and OON for each service category be in the same section instead of split out in Section B versus C. This would make it more efficient when entering both INN and OON benefits for each service category.
- **PBP Review:**
  - We appreciate having one PBP reviewer for all contracts. This promotes consistency between benefits that were the same across contracts.
  - The spreadsheet used during the PBP review can be difficult to follow.
    - The reference category can be confusing. For example, 14c4. We were unsure what the 4 was referencing.
  - We recommend the PBP review to be built into the PBP software. The PBP reviewer can make comments or notes in the PBP software. We can download the comments and see which screen or benefit the comments are correlated to and make the necessary changes. This would ensure the correct benefit is being changed or updated.
  - We would appreciate it if there is coordination between the PBP and BPT reviewers when there are requests for us to resubmit the bid, so that the other reviewer is aware when a resubmission request is made and agrees that the timing and content of the request is appropriate.
  - To the extent possible, PBP review should allow for sufficient time to review and certify the bid before the deadline, should benefit changes required as part of PBP review necessitate a change to the bid.
  - If benefit changes are required and sufficient time is not given prior to the deadline, the deadline should be extended to the end of the next business day for quality assurance purposes.