

PUBLIC SUBMISSION

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Docket: CMS-2019-0148

Implementation of the Medicare Prescription Drug Plan (PDP) and Medicare Advantage (MA) Plan Disenrollment Reasons Survey (CMS-10316)

Comment On: CMS-2019-0148-0001

Agency Information Collection Activities; Proposals, Submissions, and Approvals

Document: CMS-2019-0148-DRAFT-0005

Comment on CMS-2019-0148-0001

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General Comment

Page 2 under the heading, "Our plan has two kinds of appeals- standard appeals and fast appeals" item number one which says, "1. If you ask for a standard appeal, our plan will send you a written decision within <30 calendar days or for a part B drug 7 calendar days> after we get your appeal. Our decision may take longer if you ask for more time or if we need more information from you. Our plan will send you a letter and tell you if we need more time and why." Our understanding is that this applies to all appeals except Part B drugs. See 422.590 (c) Standard Reconsideration which says, "Requests for Part B drug (1) If the MA organization makes a reconsidered determination that is completely favorable to the enrollee, the MA organization must issue the determination (and effectuate it in accordance with 422.618(a)(3)) as expeditiously as the enrollee's health condition requires, but no later than 7 calendar days from the date it receives the request for a standard reconsideration. This 7 calendar day period may not be extended under the provisions in paragraph (f) of this section." This is found in CMS-4180-F at <https://www.govinfo.gov/content/pkg/FR-2019-05-23/pdf/2019-10521.pdf>. This was also clarified in an August 5, 2019 HPMS memo with subject line: Model Notice Corrections and Updates