

Medicare Information for Pharmacists: March 17, 2008

CMS Releases the Final 2009 Call Letter...

CMS released the final 2009 Call Letter

<http://www.cms.hhs.gov/PrescriptionDrugCovContra/Downloads/CallLetter.pdf>

today, containing information on the Part C, cost-based, and Part D programs combined into one document. There are several topics of interest to pharmacists in this year's final call letter, including:

- **Strengthening Best Available Evidence Policy** - In 2009, we will be directing sponsors to accept BAE at point-of-sale and update their systems within 48-72 hours of their receipt of the documentation. In cases involving immediate need (i.e., when the beneficiary has less than 3 days of medication available), sponsors must have a process in place to permit the beneficiary to receive an emergency supply of medication. Sponsors must then update their systems within 48-72 hours to allow the pharmacy to re-submit claims at the corrected cost-sharing level.
- **Prior Authorization Criteria** - Part D sponsors will need to ensure that approved PA criteria are available on their Part D plans' formulary websites for display on November 15, 2008. Part D sponsors will be expected to display all of the PA criteria contained within the CMS approved HPMS-PA file without modification.
- **Medication Therapy Management** - CMS expects Part D sponsors to analyze and evaluate their MTM programs (MTMPs) and make changes to continuously improve their programs. CMS is continuing to monitor and evaluate MTMPs offered by Part D sponsors in an effort to identify and understand attributes of MTMPs that may be most effective for the Medicare Program. CMS is analyzing plan-reported data to identify best practices for appropriately targeting Medicare beneficiaries and maximizing participation. CMS requires Part D sponsors to submit expanded beneficiary level data that will enable us to perform more robust analyses of MTMPs in 2009. CMS will continue development of Part D Plan Ratings that incorporate quality measures, including MTM, to enhance the current performance metrics displayed on the Medicare Prescription Drug Plan Finder.
- **E-Prescribing** – CMS will begin monitoring the uptake of electronic prescribing in the Part D program by encouraging that Part D sponsors obtain the Prescription Origin Code via the NCPDP 5.1 optional field 419 DJ. We recognize that this field is currently not widely utilized in industry and, therefore, we do not intend to make this a requirement until plan year 2010. CMS also expects to add a new optional field to the PDE record in 2009 that will capture the Prescription Origin Code, and we strongly recommend that Part D sponsors work with their network pharmacies to voluntarily begin using the NCPDP 5.1 optional field 419 DJ in 2009.
- **All or Substantially All Drugs** - We have removed the exception that allowed Part D sponsors to apply prior authorization to a particular anti-retroviral. For 2009, Part D sponsors must list all or substantially all anti-retroviral drugs on their formulary and should not generally employ any utilization management tools for these drugs.
- **Gap Coverage** - As part of an enhanced alternative benefit design, Part D sponsors may include coverage of a subset of drugs throughout the coverage gap. CMS will review the breadth of drugs covered through the gap to ensure that the coverage is sufficient to be labeled as either gap coverage or limited gap coverage. We believe that it is important that beneficiaries do not confuse plans offering limited gap coverage with plans offering more robust supplemental coverage.

As always, there are many additional topics of interest to pharmacists in the call letter, including information on plan ratings; specialty tiers; preferred versus non-preferred pharmacies; limited access drugs; a Part D 2009 calendar; a clarification that CMS prohibits plans from limiting coverage to mail order only drugs in the coverage gap; CMS is re-stating a requirement that new payer sheets must be sent to all network pharmacies in advance of the PBM change and more.

Chris Worrall
Special Assistant
Centers for Medicare & Medicaid Services
Office of the Administrator
200 Independence Ave. SW
Washington, D.C. 20201
Chris.Worrall@cms.hhs.gov