CHAPTER 3: AN INTRODUCTION TO THE **PBP**

DATA ENTRY SCREEN

The **Data Entry** screen typically consists of the following components:

- **Title Bar** Displays the PBP function **Data Entry**, the Section and Category Number, the Contract Number, the Plan number, and the Segment number.
- Menu Bar Displays the list of functions that can be performed on the Data Entry window. Each of these functions may contain additional options that can be displayed by using the mouse or by using the function's shortcut key.
- Data Entry Toolbar Provides the various Data Entry functions. The functions available are Return to Management Screen, Return Without Validation, Previous Screen, Next Screen, Print Screen and Help.
- Navigation Bar Displays the screen labels and associated screen labels in a dropdown menu. Users can switch between screens by selecting the labels in the Navigation dropdown or by clicking on the <PREVIOUS SCREEN> and <NEXT SCREEN> toolbar buttons.
- **Data Entry Window** Contains variables that belong to the selected screen or sub screen. On this screen, data entry can be performed for each variable.

| 🖷 PBP 2007 Data Entry System - Section B-5, Contract H1111, Plan 00 | 1, Segment 1 |
|---|---|
| Ele Help Ele #SPartial Hosp-Base 1 | <u>×</u> |
| RIGHT CLICK HERE FOR DESCRIPTION OF BENEFIT | Is there an enrollee Coinsurance? |
| Enhanced Benefits are not applicable for this Service Category. | C Yes C No |
| Maximum Plan Benefit Coverage is not applicable for this Service Category. | Indicate Coinsurance percentage for Medicare Covered Benefits: |
| Is there a service-specific Maximum Enrollee Out-of-Pocket Cost? Yes No | Select the Coinsurance Coverage Basis for Medicare Covered Benefits: Published Fee Schedule Coverage Data Schedule |
| Indicate Maximum Enrollee Dut-of-Pocket Cost amount: | MA Organization Developed Fee Schedule MA Organization Developed Cost Structure Madicare Fee-for-Service Charge Structure Medicare Fee-for-Service Prospective Payment System Other, describe |
| Select Maximum Enrollee Out-of-Pocket Cost periodicity: C Every three years C Every two years C Every year C Every six months C Every three months | Is there an enrollee Deductible? |
| C Other, describe | Indicate Deductible Amount: |
| | |

BEGIN DATA ENTRY

Begin data entry by selecting a plan from **Step 2: Section A** on the **PBP 2007 Management Screen** and clicking on <Enter Data>. After Section A has been completed, data entry can then be performed for Sections B, C, D, and Medicare Rx Drugs. Data entry can be exited at any time by clicking on the FILE menu item and selecting the Return to Management Screen or Return Without Validation option or by clicking on the <RETURN TO MANAGEMENT SCREEN> or <RETURN WITHOUT VALIDATION> toolbar buttons.

To continue data entry, select the preferred label in the Navigation Bar dropdown to open that screen, or click on the <PREVIOUS TAB> and <NEXT TAB> toolbar buttons, or press the <PAGE UP> and <PAGE DOWN> keys.

NOTE: All sections of the PBP are not applicable for certain plan types:

- PDPs and MA-PDs: Section Rx is only available to plans offering Medicare Part D.
- PDPs (Part D Plans): PDP plan types complete only Section Rx.

RADIO BUTTONS (PICK ONE)

Is there a service-specific Maximum Enrollee Out-of-Pocket Cost?

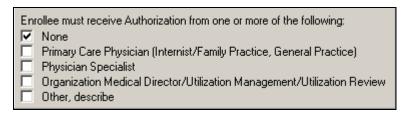
Ves

No

This variable type includes the options from which only one option can be chosen. Choose an item by selecting the radio button next to the desired item. To clear variables with radio buttons, right mouse click anywhere within the variable's frame and select the Clear Variable option.

If an option labeled as "Other, describe," "Sometimes, describe," or "Other, describe in Notes," is selected, any descriptions should be entered in the appropriate **Notes** (**Optional**) field. See the **Notes** (**Optional**) variable for a complete explanation.

CHECK BOXES (PICK ONE OR MORE)



This variable type includes options from which one or more items can be chosen. Choose the item(s) by marking the check box next to the desired item. Note that if the first item on the list is "*None*", it will clear all the other items.

If an option labeled as "Other, describe," "Sometimes, describe," or "Other, describe in Notes" is selected, any descriptions should be entered in the appropriate **Notes** (**Optional**) field. See the **Notes** (**Optional**) variable for a complete explanation.

TEXTBOXES



This variable type can only contain numbers.

MULTIPLE SELECT LIST BOXES

| Select all of the Sub-service Categories that describe the POS Benel | fit |
|--|-----|
| 1a: Inpatient Hospital Services Including Acute 1b: Inpatient Hospital Psychiatric Services 2: Skilled Nursing Facility (SNF) 3: Comprehensive Outpatient Rehabilitation Facility (CORF) 5: Partial Hospitalization 6: Home Health Services 7a: Primary Care Physician Services 7b: Chiropractic Services 7c: Occupational Therapy Services 7d: Physician Specialist Services 7e: Mental Health Specialty Services 7g: Other Health Care Professional Services 7g: Other Health Care Professional Services 7h: Psychiatric Services 7h: Physical Therapy and Speech-Language Pathology Services 8a: Outpatient Clinical/Diagnostic/Therapeutic Radiological Lab S 8b: Outpatient X-Rays 9a: Outpatient Hospital Services | |

This variable type includes options from which one or more items can be chosen from a list. To select more than one item when the items are listed consecutively, hold down the <SHIFT> key and select (highlight) the first desired item from the list and then select the last desired item from the list. This feature will highlight all the items between and including the first and last items selected from the list.

To select more than one item from the list when the items are not in consecutive order, hold down the <CTRL> (Control) key and select (highlight) the desired items from the list. The <SHIFT> and <CTRL> keys can also be used together when selecting items.

To de-select an item from the list, hold down the *CTRL>* key and click on the highlighted item.

PRINT SCREEN

Selecting the Print Screen option from the FILE menu item or clicking on the <PRINT SCREEN> toolbar button allows the user to print the current screen to the default printer. If the screen does not print properly (possibly due to the default printer settings) there is another process available.

There are several steps to follow when capturing a screen in data entry for printing. To copy a screen, press the $\langle ALT \rangle + \langle PRINT \ SCRN \rangle$ keyboard keys to capture only the active window. After opening a word processing package such as Word, or a graphics package such as Paint, paste the screen into the document by pressing the $\langle CTRL \rangle + \langle V \rangle$ keys. The screen can also be copied into a document by using the paste function available in the application being used.

EXIT A SECTION OR CATEGORY WITH OR WITHOUT VALIDATION

The user has two Exit options available when leaving data entry: Return Without Validation and Return to Management Screen.

When the user exits without validation, the system will not validate any of the rules that pertain to that section or category. This feature allows the user to exit data entry quickly. For instance, if data entry has not been completed for a service category, the user may not want to validate the rules when exiting. By clicking on the <RETURN WITHOUT VALIDATION> toolbar button or selecting the Return Without Validation option from the FILE menu item, the validation rules are bypassed and the user is taken directly to the **PBP 2007 Management Screen**.

NOTE: Any time a section or service category is exited using the **Return Without Validation** feature, that section or service category will be marked as *Incomplete*. To mark a section or service category as *Completed*, the user must use the Return to Management Screen option.

When the user exits data entry using the Return to Management Screen option, the system will check all of the rules for that section or category. All rules must be satisfied before a section or service category can be marked as *Completed*. One such rule is the mandatory rule. All mandatory variables must contain valid data values. If a mandatory variable is left blank (data not entered), the user will be warned that this variable is mandatory (e.g., ERROR: Response required). The section or service category will be marked as *Incomplete* on the **PBP 2007 Management Screen** until all mandatory variables have been completed.

In addition to errors, any validation warnings will be displayed. Since these warnings are not errors (and are merely for informational purposes), they do not have to be resolved before a section or service category will be marked as *Completed* on the **PBP 2007 Management Screen**

OPTIONAL SUPPLEMENTAL BENEFITS AND STEP-UPS

Section D enables the plan to create one or more Optional Supplemental Benefit packages with an associated premium and includes four data entry screens used to describe a plan's Optional Supplemental Benefits packages.

To add an Optional Supplemental Benefit package, click on the "Add" button beside the Navigation Bar dropdown menu from anywhere in Section D. In the "Specify Optional Supplemental Packages" screen that appears, the Benefits ID number will be automatically generated beginning with 001. Select the service category to be included in the Optional Supplemental Benefit package, and enter the description and the premium. Continue to click on the "Add" button until all desired Optional Supplemental Packages have been added.

| 🖣 PBP 2007 Data Entry System - Section D, Contract H1111, Plan 001, Segment 1 | | | | | |
|---|---|----------|-----|--------|--|
| <u>File</u> <u>H</u> elp Opt Sup Packages | | | | | |
| 🗲 📢 👝 🍝 🤌 ? 🕅 Section D | - Opt Sup Package - Chiro | _ | Add | Delete | |
| | mental Package and define the benefit structures in the Package. Sup Package screen to delete the Optional Supplemental Package. | | | | |
| Specify Optional Supplemental Benefits (if any): | Select the service categories included in this optional supplemental package: |] | | | |
| Optional Supplemental Benefits ID: | #1a Inpatient Hospital Acute #1b Inpatient Psych Hospital #2 Skilled Nursing Facility (SNF) #3 Comprehensive Outpatient Rehabilitation Facility (CORF) #44 Emergency Care | | | | |
| Optional Supplemental Package Description: | #4b Urgently Needed Care #5 Partial Hospitalization #6 Home Health Services #7a Primary Care Physician #7b Chiropractic Services* #7c Occupational Therapy | | | | |
| Indicate Optional Supplemental Premium Amount: | #7d Physician Specialist excl Psychiatric #7e Mental Health - Non-Physician #7f Podiatry Services* #7g Other Health Care Professional #7h Psychiatric #7i PT and SP Services | | | | |
| Service categories with an asterisk (*) in the list have additional step-up data entry screens. After highlighting the category, click on either the dropdown box or the right arrow button above to navigate to these screens. | #8a Outpatient Clin/Diag/Ther Rad Lab #8b Outpatient X-Rays #9a Outpatient Hospital #9b ASC Services #9c Outpatient Substance Abuse #9d Cardiac Rehabilitation Services | | | | |
| Service categories can be removed from the Optional Supplemental Package by deselecting them from the list. If service categories with an asterisk (*) are deselected, then the associated step-up data entry screens will also be removed. | #10a Ambulance #10b Transportation* #11a DME #11b Prosthetics/Medical Supplies #11c Diabetes Monitoring Supplies | | | | |
| | | | | | |

A special set of screens is provided for data entry of step-up benefits for nine selected subcategories: 7b-Chiropractic Services, 7f-Podiatry Services, 10b-Transportation, 16a-Preventive Dental, 16b-Comprehensive Dental, 17a-Eye Exams, 17b-Eye Wear, 18a-Hearing Exams, and 18b-Hearing Aids. These nine subcategories are indicated by an asterisk in the pick list on the Optional Supplemental Benefits screen. If a service category indicated by an asterisk is highlighted, the user can navigate to its step-up screens by clicking on the <Next Screen> toolbar button or by clicking on the screen label in the Navigation Bar dropdown.

To delete an Optional Supplemental Benefit Package, select the Package to be deleted and click on the "Delete" button beside the Navigation Bar dropdown menu. If a service category indicated by an asterisk is deselected with <CTRL-click>, the step-up screens will be deleted.

If a user selects any of the nine step-up benefits (indicated with an asterisk), the system will require that data be entered in the available step-up screens.

NOTE: If a plan's optional benefits package includes a step-up benefit for which there are no special step-up screens in Section D (not one of the nine indicated with an asterisk on

the pick list), these step-up benefits must be described in the corresponding Notes field of the service category in Section B.

Specify the step-up benefit by highlighting one subcategory at a time from the Category column; enter the package description and premium amount. The step-up data entry screens are similar to and should be completed in the same manner as the Section B screens.

As an alternative, data previously entered in Section B for the subcategory can be copied to the step-up benefit subcategory screens by selecting the "Step Up – Copy from Section B" menu item under Opt Sup Packages. To use the copy menu item, the user must be on a step-up screen. However, the step-up data entry will have an "Incomplete" status until the step-up modifications are entered in the step-up benefit subcategory screens.

RED/BLUE COLOR SCHEME

New For 2007:

Beginning in CY2007, given the need to comply with the 508 regulations within the PBP screens, users are now provided with the ability to choose whether or not to utilize the question variable colors (red and blue – variables used in the Summary of Benefits are red, while all other variables are blue).

By default, users get the all-black setup (i.e., the red/blue is OFF by default). Tool-tips are provided on all of the SB variables indicating they are used in the SB. This information is also included in the variable help.

There is an option to enable the red/blue colors by going to the Options, Preferences menu. The setting is saved in the PBP INI file, so it will be "remembered" the next time PBP is started. The question variables will be displayed on the PBP screens in either red or blue.

These SB sentences are produced for review by the plan prior to submission of the PLAN BID package to HPMS and will be displayed on *www.medicare.gov*.

MANDATORY/OPTIONAL FIELDS

All variables that are enabled (data entry can be performed) must be completed whether they are red or blue. The only exception is enabled variables that contain the word Optional in parentheses. These variables do not require data entry and can be left blank. However, there are several options that, if selected during data entry, require the user to add text to the **Notes (Optional**) variable. By Section these include:

Section A: No, describe, and Yes, describe Section B: Sometimes, describe, and Other, describe Section C: Other, describe Section D: Other, describe Section Rx: Other, describe

If any of these options are selected during data entry, the user must also enter text in the appropriate **Notes (Optional)** variable. Examples of variables that may contain these options include Select Periodicity, Select Coverage Basis, and Authorization.

Notes

| Notes (Optional): | |
|-------------------|-------------|
| | <u> </u> |
| | ¥ |
| | Import Text |

The variable type **Notes** (**Optional**) accepts up to 4,000 characters in any alphanumeric combination. The data can be entered directly into the text box or imported from a text file by using the <IMPORT TEXT> button.

At least one **Notes (Optional)** field is available for each section and service category; Section C contains multiple **Notes (Optional)** fields.

Entering Data in a Notes Field

Formatting Information in the Notes Field. Notes fields are limited to 4,000 characters. When entering information into the Notes field, an organization MUST format the Note with the following references: Section – Screen – Question – and then provide the information. This approach will allow quick review of the information by CMS auditors and regional office staff (marketing reviewers).

Importing Text. Importing text into a notes field in the PBP from a document such as Microsoft Word can be accomplished two ways. The user may select the text from another document, copy, and then paste the selected text into the PBP Notes field by pressing the $\langle CTRL \rangle$ and $\langle V \rangle$ keys simultaneously. Alternatively, the user may save the document to put into the PBP as a text file and then use the Import Text button in the PBP to import this text file into the PBP Notes field.

Transferring Text from a Word Processing Document. In some cases, a user may want to transfer the contents of a word processing document into a Notes field. There are two techniques for accomplishing this.

NOTE: The following instructions are applicable for Microsoft Word but the instructions for other word processing software should be similar.

Technique #1: The contents of the document can be copied and then pasted into the Notes field. To do this, highlight the contents of the document and then click on Copy from the Edit menu group. Then in the PBP software, make sure the cursor is in the Notes field. Now simultaneously press the <CTRL> and <V> keys on the keyboard.

Technique #2: Save the document as a text file. In order to do this, click on Save As...from the File menu group and select the "Text Only (*.txt)" file type. Name the document and click on the Save button. Then in the PBP software, click on the Import Text button on the Notes field. In the file selection window, navigate to and select the text file saved above and then click on the Open button.

After the contents of the document have been transferred to the PBP Notes field, verify the text in the Notes field. Pay special attention to making sure the entire contents were transferred and not truncated.

VIEWING REPORTS

Data Report

The Data Report displays the data that have been entered for a Section(s) or Service Category(ies).

STEP 1: ACCESS THE REPORTS FUNCTION

From the **PBP 2007 Management Screen**, access the **Reports** function from the ACTIONS menu and select **Data Report** from the **Reports** drop-down menu or click on the toolbar button.

| <mark>≓</mark> PBP 2007 Data Report File <u>H</u> elp | |
|---|--|
| E ? | |
| Step 1: Select a Contract | |
| H1111 - SUNRISE HEALTH MANAGEMENT SYST | EMS |
| Step 2: Select Plan(s) Plan ID Plan Name | Semant ID |
| 001 Sunrise Plan | Segment ID |
| 002 Sunrise Plus Plan | |
| | |
| Step 3: Select Section(s) | Step 4: Select Section B Categories (if applicable) |
| Section A Include Section A Notes Section B Include Section B Notes | 01: Inpatient Hospital Services 02: Skilled Nursing Facility (SNF) |
| Section C 🔽 🔽 Include Section C Notes | 03: Comprehensive Outpatient Rehabilitation Facility (CDRF) |
| Section D Include Section D Notes Medicare BX Include Medicare RX Notes | 05: Partial Hospitalization 06: Home Health Services |
| | |
| | Seject All |
| Step 5: Select Button to Produce Report | |
| Produce Report | |
| | |

STEP 2: SELECT A CONTRACT NUMBER

On the Data Report screen, select a Contract Number by clicking on it from the Select a Contract drop-down menu.

STEP 3: SELECT PLAN(S), SECTIONS AND SERVICE CATEGORIES

Select one or more plans (click to highlight) to include in the report. Select at least one Section to be included in the report (**NOTE:** If Section B is selected, one or more service category(s) must also be selected). Including Section Notes is optional.

NOTE: It is **not** advisable to select <u>all</u> of the plans, sections, or service categories at once because of the amount of time it takes to produce the reports.

STEP 4: PRODUCE REPORT

To produce a report, click on <Produce Report>. When producing a report, only the variables that contain data will be displayed.

PBP will generate the report and display it on the screen.

| BP Data R <u>V</u> iew | | | |
|---------------------------|--|-------------------------------|--|
| Print | 🛤 🗉 🞛 🛛 🗨 🔍 100 % 💽 🛛 🖈 👽 1/3 | 🕝 Back 🧿 Forward | |
| | PLAN BENEFIT PACKAGE (PBP) | DATA ENTRY SYSTEM DATA REPORT | |
| | DATA REPORT FOR Contract H1111, PLAN 001, SEGMENT 1 | | |
| | Module: | PBP | |
| | Requested By: | mco3 | |
| | PLAN SYSTEM INFORMATION | | |
| | Last entry Date: | 03/24/2006 | |
| | Data entry Time: | 00:02:00 | |
| | : PLAN STATUS | | |
| | Section A | A Completed | |
| | Section B1 | Completed | |
| | Section B2 | New | |
| | Section B3 | New | |
| | Section B4 | New | |
| | Section B5 | New | |
| | Section B6 | New | |
| | Section B7 | New | |
| | Section B8 | New | |
| | Section B9 | New | |
| | Section B10 | New | |
| | Section B11 | New | |
| | Section B12 | New | |
| | Section B13 | New | |
| | Section B14 | New | |
| | 0 ° D17 | 3.7 | |

While the Data Report is displayed, the user can **Print** or **Export** by clicking on the toolbar buttons. Selecting the Print option will send a copy of the report to the printer. Selecting the Export option will save a copy of the report in a format type of the user's choice from the list of available options.

Exit the report by clicking <X> in the upper right corner.

Summary of Benefits Report

The Summary of Benefits (SB) Report will produce the English sentences generated by the variables that are identified by the SB tooltip message, "This information is used to create the SB", on the data entry screens. These sentences are produced for review by the plan prior to submission of the PLAN BID package to HPMS and will be displayed on *www.medicare.gov*.

STEP 1: SELECT A CONTRACT NUMBER , PLAN AND SEGMENT

Select a Contract Number, Plan, and Segment from the **PBP 2007 Management Screen** before accessing the Reports function.

STEP 2: ACCESS THE REPORTS FUNCTION

Select **Summary of Benefits Report** from the **Reports** drop-down menu or click on the toolbar button to access the Summary of Benefits Category Selection screen.

| 2007 Summary of Benefits - Category Selection | × | |
|--|---|--|
| ? | | |
| Select SB Category(s): | | |
| 2 - Doctor and Hospital Choice 3 - Inpatient Hospital Care 4 - Inpatient Mental Health Care 5 - Skilled Nursing Facility 6 - Home Health Care | | |
| 6 - Home Health Lare 7 - Hospice 8 - Docto Office Visits 9 - Chiropractic Services 10 - Podiatry Services | | |
| 11 - Outpatient Mental Health Care 12 - Outpatient Substance Abuse Care 13 - Outpatient Services/Surgery 14 - Ambulance Services 15 - Emergency Care ▼ | | |
| Select All | | |
| 0K Cancel | | |

Select one or more categories from the list and click on <OK>. To produce a Summary of Benefits Report that includes all categories, click on <Select All> and click on <OK>.

STEP 3: VIEW INTRODUCTION TO SUMMARY OF BENEFITS

To view the Introduction to Summary of Benefits Report, select <Introduction> from the Summary of Benefits Category Selection screen.

| ose |
|-----|
| |

Click on <Introduction> on the Summary of Benefits Viewing Options screen.

| S PBP 2007 - 9 | Summary of Benefits | |
|----------------|--|----------|
| a | Zoom 100% | |
| | | _ |
| | | |
| | Inter Justice to the Commune of Deviceto for | |
| | Introduction to the Summary of Benefits for Sumrise Plan | |
| | January 1, 2007 - December 31, 2007 | |
| | SUNRISE HEALTH MANAGEMENT SYSTEMS | |
| | | |
| | | |
| | | |
| | | |
| | YOU HAVE CHOICES IN YOUR HEALTH CARE | |
| | As a Medicare beneficiary, you can choose from different Medicare options. One option is the Original (fee-for-service) | |
| | Medicare Plan. Another option is a Medicare health plan, like Sunrise Plan. You may have other options too. You make the choice. No matter what you decide, you are still in the Medicare Program. | |
| | You may be able to join or leave a plan only at certain times. Please call Sunrise Plan at the number listed at the end of this introduction or 1-800-MEDICARE (1-800-633-4227) for more information. TTY users should call 1-877-486-2048. | |
| | | |
| | HOW CAN I COMPARE MY OPTIONS? | |
| | You can compare Sunrise Plan and the Original Medicare Plan using this Summary of Benefits. The charts in this booklet list some important health benefits. For each benefit, you can see what our plan covers and what the Original Medicare Plan covers. | |
| | Fian covers. Our members receive all of the benefits that the Original Medicare Plan offers. We also offer more benefits, which may | |
| | change from year to year. | |
| | | |
| | WHERE IS SUNRISE PLAN AVAILABLE? | |
| Pages: 📕 🖣 | | • |

While the Introduction to the Summary of Benefits Report is displayed, the user can **Print** or **Export** by clicking on the toolbar buttons. Selecting the Print option will send a copy of the report to the printer. Selecting the Export option will save a copy of the report in a format type of the user's choice from the list of available options.

Exit the report by clicking <X> in the upper right corner.

STEP 4: VIEW SUMMARY OF BENEFITS REPORT

| Summary of Benefits Viewing Options | | | < |
|--------------------------------------|---------------------|-------|---|
| Summary of Benefits Viewing Options: | | | |
| Introduction | Summary of Benefits | Close | |

Click on <Summary of Benefits> to view the SB Report.

| | | UMMARY OF BENEFITS | | |
|--------------|---|--|--|--|
| | | ACT H1111, PLAN 001, SE | GMENT 1 | |
| | If you have any questions about this SYSTEMS. | s plan's benefits or costs, please contac | t SUNRISE HEALTH MANAGEMENT | |
| | Benefit Category | Original Medicare | Sunrise Plan | |
| | IMPORTANT INFORMATION | | | |
| | 1 - Premium and Other Important Information | <plan 2007<br="" actual="" must="" reflect="">Medicare Part B premium amount sentence as it appears in the HPMS Summary of Benefits report.></plan> | <plan 2007="" actual="" must="" plan<br="" reflect="">premium and Part D amount sentences as it appears in the HPMS Summary of Benefits report.> You pay a \$ 50 yearly deductible for all</plan> | |
| | | | plan services. There is a \$ 200 maximum out-of-pocket limit every year for Medicare-covered plan services. | |
| | | | There is a \$ 1500 maximum every year that your plan will cover for plan services. | |
| | 2 - Doctor and Hospital Choice | You may go to any doctor, specialist or hospital that accepts Medicare. | Your cost sharing will be reduced if you voluntarily pre-notify or voluntarily obtain prior authorization for services out-of-network. Contact plan for details. | |
| | (For more information, see Emergency - #15 and Urgently Needed Care - #16.) | | | |
| 'ages: 🖌 🖌 1 | | not to accept assignment, their costs ar | e often higher, which means you may pay more. facility. The benefit period ends when you have | |

While the Summary of Benefits Report is displayed, the user can **Print** or **Export** by clicking on the toolbar buttons. Selecting the Print option will send a copy of the report to the printer. Selecting the Export option will save a copy of the report in a format type of the user's choice from the list of available options.

Exit the report by clicking <X> in the upper right corner.

UPDATE PLAN INFORMATION IN HPMS

The **Update** function is a process by which contract and plan information are updated on the HPMS and downloaded to the client. Before starting this process, be sure that the connection to MDCN has been established.

NOTE: Users who do not have MDCN access on the PC where PBP is running should do the following to update their plan information:

- 1) Exit PBP;
- 2) On the Bid 2007 Start Page on HPMS, use the "Download Plan-Specific Information" function to download a plan update file to your PBP application directory; and
- 3) Run PBP and the software should automatically discover the plan update file and update the PBP plan information.

STEP 1: SET INTERNET EXPLORER AS DEFAULT BROWSER

Before beginning the **Update** function, a user must have the computer's default browser set to Internet Explorer. The instructions for setting Internet Explorer as the default browser are as follows:

- Run Internet Explorer
- Under the TOOLS menu item, select Internet Options
- On the Programs tab, make sure the following option is checked: Internet Explorer should check to see whether it is the default browser
- Close Internet Explorer
- Run Internet Explorer again
- When prompted whether to make Internet Explorer the default browser, select <YES>
- Close Internet Explorer

STEP 2: UPDATE PLAN INFORMATION IN HPMS

Start the update process by selecting the Update option from the ACTIONS menu item or by clicking on <UPDATE PLAN INFORMATION> in the toolbar on the **PBP 2007** Management Screen.

| PBP 2007 Plan Information Update | | |
|---|----|---|
| ? | | |
| Step 1: Update Plan Information | | |
| Click here to launch Internet browser and perform plan information update. | OR | Click here to cancel update and NOT launch Internet browser. |
| pdate | | Cancel |
| - Step 2: Download Completed | | |
| Once the download is completed, click here to complete the update. Your local databases will be updated to match the information specified on the Internet. | OR | Once the download is completed, click here to cancel update. Your local databases will NOT match the information specified on the Internet. |
| Up <u>d</u> ate | | Ca <u>n</u> cel |

The Plan Information Update screen consists of two steps, **Step 1: Update Plan Information** and **Step 2: Download Completed**. To update plan information, click on the Step 1: Update Plan Information <UPDATE> button. To cancel the update and return to the **PBP 2007 Management Screen**, click on the <CANCEL> button in Step 1.

Clicking on the <UPDATE> button will launch the browser and point it to the HPMS Web Site. After logging in and completing all changes, click on the <DOWNLOAD> button (on the HPMS Web Site). A zip file, UPDATPBP2007.ZIP, is created and contains a new PBPPLANS2007.MDB database. Save this file to the directory where the PBP software is located, and then exit the browser.

The PBP software will be disabled until after the browser has been closed.

STEP 3: UPDATE PLAN INFORMATION ON YOUR COMPUTER

After exiting the browser and returning to the **PBP 2007 Plan Information Update** screen, Step 1 of the update process will be completed (i.e., the updated information has been downloaded) and disabled. Step 2: Download Completed, will then be enabled. To continue the update process, click on the Step 2: Download Completed <UPDATE> button or <CANCEL> to exit.

| PBP 2006 Plan Information Update | | |
|---|----|---|
| ? | | |
| Step 1: Update Plan Information - | | |
| Click here to launch Internet browser and perform plan information update. | OR | Click here to cancel update and NOT launch Internet browser. |
| Update | | Cancel |
| Step 2: Download Completed | | |
| Once the download is completed, click here to complete the update. Your local databases will be updated to match the information specified on the Internet. Update | OR | Once the download is completed, click here to cancel update. Your local databases will NOT match the information specified on the Internet. |
| | | <u>3</u> |

Although the user has the capability to cancel the update process after Step 1 of the update process has been completed, it is **not** recommended. If the user does choose to cancel the update, it will result in the local information being inconsistent with the central information on HPMS. If this option is chosen, the user should contact their Plan Manager or the Help Desk.

VIEW/RESET OPEN PLANS

View open plans

From the **PBP 2007 Management Screen**, access the **System Status** function from the ACTIONS menu or click on the toolbar button. The System Status screen provides three

different selection options available from the drop-down menu: Incomplete Plans, Logged in Users, and Open Plans.

| PBP 2007 System Status | | <u> </u> |
|------------------------|---------------|----------|
| <u>File H</u> elp | | |
| <u><</u> ? | | |
| H1111 002 2 john | Select Option | |
| | Open Plans | • |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Reset | |
| | Neset | |

Clicking on the **Open Plans** option will display a list of plans that are currently open for data entry. This feature is especially useful when the PBP software is being used in a network environment. The Super User can easily view the plans that are currently open for data entry.

Reset open status

This feature allows a Super User to reset a plan's open status. When using PBP in a network environment, only one user can access a plan at a time. Users can see whether a plan is in use by an asterisk (*) in the **Open** field for each plan on the **PBP 2007 Management Screen**. A plan is considered open while data entry is being performed. The open status is normally reset (the * disappears from the **Open** field) when a plan is exited during data entry. The * is to show other users on the network what plans are currently being accessed.

| Step 2: 9 | Section A | | | | |
|-----------|------------------|-----------|---------------|------|-------------|
| Plan ID | Plan Name | Segment # | Assigned User | Open | Status |
| 001 | HMO MAPD Plan | 1 | john | × | A Completed |
| 002 | HMOPOS MAPD Plan | 1 | pbp | | A Completed |
| | | | | | |

The **Reset Open Status** function is especially useful when abnormal termination of PBP (e.g., power failure, system lockup) occurs. When PBP is restarted, a user cannot access any plans that were marked as open. A Super User must reset these plans before data entry can continue.

STEP 1: SELECT SYSTEM STATUS/OPEN PLAN(S) MENU OPTION

From the **PBP 2007 Management Screen**, select the System Status option from the ACTIONS menu or click on the <System Status> toolbar button.

On the System Status screen, click on the **Open Plans** option from the *Select Option* drop-down menu to display a list of open plans.

Do **not** assume that <u>all</u> open plans need to be reset. For instance, if a plan(s) was sent to a remote data entry person using the **Export** function, the exported plan(s) would appear on the list of open plans and an asterisk (*) would appear under the Open status on the PBP 2007 Management Screen.

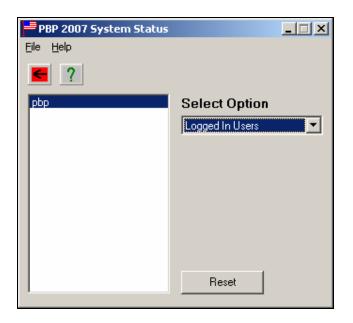
STEP 2: RESET OPEN PLANS

Select a plan from the list on the left that needs to be reset and click on <RESET>. This will clear the **Open** field and reset the currently selected plan. If there is more than one plan that needs to be reset, highlight the next plan and repeat the process until all of the desired plans have been reset.

VIEW/RESET LOGGED IN USERS FUNCTION

View logged in users

From the **PBP 2007 Management Screen**, access the **System Status** function from the ACTIONS menu. The System Status screen provides three different selection options available from the drop-down menu: *Incomplete Plans*, *Logged in Users*, and *Open Plans*.



Clicking on the **Logged In Users** option will display the name of the currently logged in user. If PBP is being used in a network environment, a list of all logged in users will be displayed.

Reset logged in users status

This feature allows a Super User to reset a user's logged in status. The **Reset Logged In Users Status** function is especially useful when abnormal termination of PBP (e.g., power failure, system lockup) occurs. When PBP is restarted, a data entry user will not be able to log back into the system. A Super User must reset these User IDs before data entry can continue.

STEP 1: SELECT SYSTEM STATUS/LOGGED IN USERS MENU OPTION

From the **PBP 2007 Management Screen**, select the System Status option from the ACTIONS menu or click on the <System Status> toolbar button.

The System Status screen provides three different selection options available from the drop-down menu: *Incomplete Plans*, *Logged in Users*, and *Open Plans*. Select the **Logged In Users** option.

STEP 2: RESET A USER'S LOGGED IN STATUS

Select a User ID that needs to be reset and click on <RESET>. This will reset the currently selected user. If there is more than one user that needs to be reset, highlight the next User ID and repeat the process until all of the desired users have been reset.

VIEW MY SYSTEM INFORMATION

PBP system file information is available from the Help Menu. To access, click on the HELP menu and select the **About** option.

| 15:03:53 : 00:46:25 |
|------------------------|
| |
| |
| |
| 00:46:25 |
| |
| рбр |
| |
| NT2007.00 |
| NT2007.00 |
| |
| |
| |

The **PBP 2007 About** screen displays various system file information (i.e., Version ID Number, Version Date, Application Path of where PBP is installed, etc.) along with OMB Clearance information.

VIEW THE HISTORY OF ACTIVITY FOR A PLAN

STEP 1: SELECT ACTIONS/SHOW HISTORY MENU OPTION

The **Show History** function provides the Super User with the capability to view, print, or clear the history associated with a given plan. On the **PBP 2007 Management Screen**, select a plan to view and select the **Show History** option from the ACTIONS menu, or click on the toolbar button.

STEP 2: VIEW THE PLAN HISTORY DISPLAY SCREEN

| [≢] PBP 2007 Plan History | | | × |
|---|-----------------------|---------------|----------|
| ? | | | |
| Contract : H1111 Plan ID: 001 Segment: 1 Mar 28, 2006 1:51 PM | | | <u> </u> |
| Section A mco3 performed data entry on Mar 24, 2006 2:17 PM | | | |
| Section B-01 pbp performed data entry on Mar 25, 2006 3:48 PM pbp performed data entry on Mar 25, 2006 2:14 PM mco3 performed data entry on Mar 24, 2006 2:29 PM | | | |
| Section B-02 pbp performed data entry on Mar 25, 2006 2:56 PM pbp performed data entry on Mar 25, 2006 2:14 PM | | | |
| Section B-03 pbp performed data entry on Mar 25, 2006 3:48 PM | | | |
| Section B-04 pbp performed data entry on Mar 25, 2006 3:49 PM | | | |
| Section B-05 pbp performed data entry on Mar 25, 2006 3:49 PM pbp performed data entry on Mar 24, 2006 3:15 PM pbp performed data entry on Mar 24, 2005 2:05 PM | | | • |
| | Clear <u>H</u> istory | <u>P</u> rint | Close |

The Contract Number, Plan ID, Segment ID, and Date/Time the report was created are displayed in the heading of the **PBP 2007 Plan History** screen for the plan selected on the **PBP 2007 Management Screen**. Each section of the plan's history is displayed separately: **Data Entry**, **Complete Copy**, **Partial Copy**, **Export(s)**, **Import(s)**, **SB Verification(s)**, and **Upload(s)**.

There are three options available on the **PBP Plan History** screen: <Clear History>, <Print>, and <Close>. The **Clear History** option will clear the history currently displayed on the Plan History screen. Only the Super User has the authority to clear the history displayed on the Plan History Screen.

The Print option will send a copy of the report to the printer.

Click on the <Close> option to return to the **PBP 2007 Management Screen**.

New For 2007:

Beginning with CY2007, given the need to comply with 508 regulations within the PBP screens, users are provided with the ability to choose whether or not to utilize the display of color on variables and screens. By default, the History events will display in all-black. There is an option to enable the display of critical History events in Red and other events in Blue by going to the Options, Preferences menu.

VIEW THE STATUS OF MY DATA ENTRY

From the **PBP 2007 Management Screen**, access the **System Status** function from the ACTIONS menu. The System Status screen provides three different selection options available from the drop-down menu: *Incomplete Plans*, *Logged in Users*, and *Open Plans*.

| PBP 2007 System Status | |
|--------------------------------------|------------------|
| <u>File H</u> elp | |
| E ? | |
| H1111 001 1: B1 | Select Option |
| H1111 001 1: B5 | Incomplete Plans |
| H1111 001 1: B6 H1111 001 1: B7 | |
| H1111 001 1: B8 | |
| H1111 001 1: B9 | |
| H1111 001 1: B11 | |
| H1111 001 1: B12 H1111 001 1: B13 | |
| H1111 001 1: B14 | |
| H1111 001 1: B15 H1111 001 1: B16 | |
| H1111 001 1: B17 H1111 001 1: B18 | |
| | |

Clicking on the **Incomplete Plans** option will display a list of all sections, by plan, that are incomplete.

COPY PLAN

The **Copy Plan** function gives the Super User the ability to copy the existing data from one plan to another using four different copy types: *Sections A, B, Partial B Copy, Partial C Copy, Section D Copy,* or *Section Rx Copy.*

To access the **Copy Plan** function, click on the ACTIONS menu item and select the Copy Plan option or click on the <COPY PLAN> toolbar button to display the **PBP 2007 Copy Plan** screen.

| ➡PBP 2007 Copy Plan |
|--|
| <u>Eile Help</u> |
| E ? |
| Step 1: Select Source Plan and Destination Plan(s) |
| H1111 001 001 A Completed H1111 002 002 A Completed H1111 002 002 A Completed |
| Step 2: Select Copy Type |
| Section A |
| Section B Select All |
| 11: DME, and Prosthetics, Medical & Diabetes Monitoring Supplies 12: Renal Dialysis 13: Blood, Acupuncture & Other 14: Preventive Services 15: Medicare Part B Drugs 16: Dental 17: Eye Exams/Eye Wear 18: Hearing Exams/Hearing Aids |
| Section C: Uut-Of-Network Denit Of Service Cost Share Reduction Visitor/Travel - U.S. Visitor/Travel - Eoreign |
| ☐ Section <u>B</u> x |
| Step 3: Click to Copy |
| <u>G</u> o Copy |
| |
| |
| |

To copy the data from one Plan to another Plan, in Step 1 the user can highlight the plans to copy from and to in the *Select Source Plan and Destination Plan(s)* section. Note that more than one plan can be selected for Copy To. Once the copy FROM and TO plans have been selected, Steps 2 and 3 will be enabled. There are five choices in Step 2, *Sections A, B, Partial B Copy, Partial C Copy, Section D,* and *Section Rx Copy*.

To copy Sections A, D or Rx only, select this option and click on <Go Copy>.

To copy Section B, **all** Service Categories, select the Section B option and click on the <Select All> button to highlight all of the Section B Service Categories and click on <Go Copy>.

To **only** copy one or more Service Categories in Section B from one plan to another plan (sections A, C, D, and Medicare Rx will not be included), in Step 2, select <Section B> copy type to enable the list of Service Categories from which to choose. To select more than one Service Category when the categories are listed consecutively, hold down the <SHIFT> key and select (highlight) the first desired item from the list and then select the

last desired item from the list. This feature will highlight all the items between and including the first and last items selected from the list. To select more than one Service Category from the list when the categories are not in consecutive order, hold down the <CTRL> (Control) key and select (highlight) the desired items from the list. The <SHIFT> and <CTRL> keys can also be used together when selecting categories.

After a selection(s) has been made, the **Copy** function in Step 3 will be enabled. Click on the <Go Copy> button to complete the copy process.

To **only** copy one or more applicable sub-sections of Section C (Out-of-Network, Point of Service, Cost Share Reduction, Visitor/Travel (U.S.), or Visitor/Travel (Foreign), select the desired sub-section option and click on <Go Copy>.

To copy only Section Medicare Rx, select the Section Rx Copy option and click on <Go Copy>.

NOTE: The data copied from one plan to another plan replaces all of the data previously entered in the designated section or service category of the target plan.

To exit the **PBP Copy Plan** screen, click on the arrow <RETURN TO MANAGEMENT SCREEN> toolbar button or select the Return to Management Screen option from the FILE menu item.

EXIT PBP

From the **PBP 2007 Management Screen**, the user may exit the PBP software by clicking on <EXIT> in the toolbar or by selecting the FILE menu item and clicking on the Exit option.