CHAPTER 5: PRE-UPLOAD REQUIREMENTS

GENERAL PRE-UPLOAD SUBMISSION REQUIREMENTS

For Contract Year (CY) 2007, the pre-upload submission requirements presented below apply to all Bid Submission transaction types.

Along with the CY 2007 Bid Submission, organizations must complete the following:

- Service Area Verification (New for CY 2007)
- Plan Crosswalk
- Formulary Crosswalk
- Actuarial Certification/Substantiation
- 2-Year Lookback Spreadsheet

NOTE: Not all of these are required for every organization/plan. The following sections provide further details on the upload requirements.

Before uploading the Bid submission to the Health Plan Management System (HPMS), organizations must verify that all of the following statements are true:

- The User ID that will be used to upload your data is the same User ID that was used to download the data (i.e., the plan). If you are uploading for another user in your organization, the User ID in the file that you upload must match the User ID used to download that plan from HPMS.
- All sections in the PBP have been marked as completed, and the PBP and SB information has been verified for each plan.
- The Bid Validation resident in the PBP (formerly in the Bid Validation Tool) has been marked as completed. The Bid Validation will ensure that the general information in the PBP and BPT are the same
- The appropriate BPT and/or PD spreadsheet(s) exists in the specified directory for all plans within all contracts for which you are responsible for uploading.
- The required naming convention of each BPT spreadsheet maps to the organization, plan, and, if applicable, segment, identifiers referenced in the given BPT.
- The plan or plan/segment service areas entered into each BPT matches the same service area as defined for the plan or plan/segment in HPMS.
- The correct version of the PBP and BPT software is being used.
- The general plan information in the PBP and BPT match the general plan information as defined in HPMS (e.g. Contract Number, Plan ID, Plan Type, Plan Indicators).
- A segmented plan cannot have only one segment, and it must have all counties in the plan assigned to a segment.

If you have already used the upload feature in CY 2007 PBP to create a compressed (zipped) file to upload, and you subsequently make changes to the data in either the CY PBP or BPT, you must re-run the upload feature to create a new compressed file and re-upload.

To ensure a successful upload, we strongly recommend that you <u>read</u> the additional Pre-Upload Requirements that are general to all Bid Submission transaction types, as well as those that are specific to each Bid Submission transaction type, prior to initiating the upload process.

SERVICE AREA VERIFICATION

For all contracts that are assigned to your User ID, you must verify the service area. The Service Area Verification requires <u>ALL</u> organizations to review their entire service area and applicable attributes (e.g. employer-only/pending/partial counties or regions) and provide concurrence or non-concurrence.

HPMS will list the counties/regions assigned to a contract, whether it is an employer-only county/region, if it is a pending county/region, if it is a partial county, the number of individual plans that contain that county/region, and the number of employer plans that contain that county/region. If the Partial County displays a "Yes', you can click on the "Yes" to see the list of zip codes for that Partial county. By clicking on the Number of Individual Plans or Number of Employer Plans, you can see the plan ID(s) that have been assigned that county/region.

As long as organizations concur <u>OR</u> non-concur, the service area verification requirement is considered complete. However, organizations that non-concur must provide an explanation as to what is incorrect in HPMS. This may include a service area that is not listed, a service area that is erroneously listed, or an incorrect employer-only indicator associated with a service area. If you Non-concur with any portion of the contract service area, the difference(s) must be resolved with CMS in order for the contract to be approved. Once resolution is met with CMS, you must re-verify the service area and ultimately concur.

Step 1: Log onto the HPMS.

Step 2: On the HPMS Home Page, select "**Plan Bids**" and then select "**Bid Submission**" from the fly out.

Step 3: On the Bid Submission Start Page, select "Contract Year 2007".

Step 4: On the Bid 2007 Start Page, select "Upload", then select "Service Area Verification".

Step 5: On the Service Area Verification Page, select a contract number for which you want to review and verify the service area.

Step 6: On the Review Service Area Page, you will see the Contract Number and Name, and the Organization Geographic Name. Review the contract service area listed for that contract.

Step 7: You must either "Concur" with your service area as listed or "Non-concur" and explain the discrepancy(ies). If you click on Non-Concur, you will be taken to the Confirm Service Area Page, where you must indicate the reason(s) for the concurrence, and provide a brief explanation of what is incorrect (i.e., missing counties/regions or an incorrect employer indicator). Once you have entered the details in the Comment box, click on the "Submit" button.

Step 8: Once you have completed your service area review for the selected contract, you can select another contract or return to the Bid Start page.

Contracts with a service area that spans more than one state have the ability to review their service area one state at a time or review the service area for All States. If you select All States, the service area may take a long time to load based upon the number of counties/states in your contract service area.

PLAN CROSSWALK

All returning organizations (i.e. organizations that existed in CY 2006) must complete a plan crosswalk. Organizations will use this crosswalk to identify the relationships between their CY 2006 plans and CY 2007 plans. Please note that you will be required to complete the crosswalk for all Contract Numbers for which you own plans. CMS uses the plan crosswalk to identify whether plan enrollees need to be moved to another plan for the upcoming contract year due to a plan reconfiguration and to identify the beneficiary notification requirements.

Once all of the bids under a contract are approved, the Plan Crosswalk cannot be changed. The last version of the plan crosswalk present in HPMS at the time of the bid approval will become the official crosswalk. If any validation edits fail, you will need to correct the crosswalk or select a different type of plan relationship.

For information regarding system enrollment activities, enrollment procedures, and beneficiary notification, refer to the CY 2007 Call Letter available at www.cms.hhs.gov.

MA and MA-PD Renewal Types and Relationships

The following chart describes the renewal types and the relationships between CY 2007 and CY 2006 plans for **Medicare Advantage and Medicare Advantage-Prescription Drug Plan Renewals**.

New Plan	
HPMS Plan Crosswalk	A new plan added for 2007 that is not linked to a 2006 plan.
Crosswalk Edits	The new 2007 plan must have a new plan ID number.

Renewal Plan	
HPMS Plan Crosswalk	A 2007 plan that links to a 2006 plan and retains all of its plan service area from 2006.
Crosswalk Edits	The 2007 plan must retain the same plan ID as the 2006 plan.
	The 2007 plan must retain the same service area as the 2006 plan.

Consolidated Renewal Plan	
HPMS Plan Crosswalk	Two or more 2006 plans that consolidate into one 2007 plan.
Crosswalk Edits	The resultant 2007 plan ID must be the same as one of the consolidating 2006 plan IDs.
	The service area of the resultant 2007 plan must have at least one county/region from each of the consolidating 2006 plan service areas.

Renewal Plan with an SAE	
HPMS Plan Crosswalk	A 2007 plan that links to a 2006 plan and retains all of its plan service area from 2006, but also adds one or more new counties. Note: This option is available to local MA plans only.
Crosswalk Edits	The 2007 plan must retain the same plan ID as the 2006 plan. The 2007 plan must contain the same service area as the 2006

plan and have at least one new county.	
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Renewal Plan with a SAR	
HPMS Plan Crosswalk	A 2007 plan that links to a 2006 plan and retains only a portion of its plan service area.
	Note: This option is available to local MA plans only.
Crosswalk Edits	The 2007 plan must retain the same plan ID as the 2006 plan.
	The 2007 plan must contain at least one county from the 2006 plan.
	The 2007 plan must not contain at least one county from the 2006 plan.

Renewal Plan Split Based on Provider Groups	
HPMS Plan Crosswalk	Two or more 2007 plans that are created from one 2006 plan with membership determined by provider choice.
Crosswalk Edits	One of the resultant 2007 plan IDs must be the same as the 2006 plan ID.
	The resultant 2007 plans must have the same service area.
	The resultant 2007 plans must each contain at least one county/region from the 2006 plan.

Terminated Plan	
HPMS Plan Crosswalk	A 2006 plan that is no longer offered in 2007.
Crosswalk Edits	There is no link to a 2007 plan in the crosswalk.

PDP Renewal Types and Relationships

The following chart describes the renewal types and the relationships between CY 2007 and CY 2006 plans for **PDP Sponsor Renewals**.

New Plan	
HPMS Plan Crosswalk	A new plan added for 2007 that is not linked to a 2006 plan.
Crosswalk Edits	The new 2007 plan must have a new plan ID number.

Renewal Plan	
HPMS Plan Crosswalk	A 2007 plan that links to a 2006 plan and retains all of its plan service area from 2006.
Crosswalk Edits	The 2007 plan must retain the same plan ID as the 2006 plan.
	The 2007 plan must retain the same service area as the 2006 plan.

Consolidated Renewal Plan	
HPMS Plan Crosswalk	Two or more 2006 plans that consolidate into one 2007 plan.
Crosswalk Edits	The resultant 2007 plan ID must be the same as one of the consolidating 2006 plan IDs. The 2007 plan must retain the same service area as the 2006 plans.

Renewal Plan with an SAE (applicable only to employer-only group waiver plans)	
HPMS Plan Crosswalk	A 2007 employer-only plan that links to a 2006 employer-only plan and retains all of its plan service area from 2006, but also adds one or more new regions.
Crosswalk Edits	The 2007 plan must retain the same plan ID as the 2006 plan. The 2007 plan must contain the same service area as the 2006 plan and have at least one new region.

Terminated Plan		
HPMS Plan Crosswalk	A 2006 plan that is no longer offered in 2007.	

Crosswalk Edits	There is no link to a 2007	plan in the crosswalk.

After reviewing the Plan Crosswalk Requirements associated with your CY 2007 plans, you are ready to complete the Plan Crosswalk.

Step 1: Log onto the HPMS.

Step 2: On the HPMS Home Page, select "**Plan Bids**" and then select "**Bid Submission**" from the fly out.

Step 3: On the Bid Submission Start Page, select "Contract Year 2007".

Step 4: On the Bid 2007 Start Page, select "Upload", then select "Plan Crosswalk".

This step is only required the first time the Plan Crosswalk is completed.

Step 5: On the Review Plan Crosswalk page, HPMS will display your CY 2007 plans (plan, segment, and Part D indicator) in the left column and your CY 2006 plans (plan, segment, and Part D indicator) in the right column. For each relationship, select the appropriate status, as available.

The statuses are as follows:

- 1. Renewal Plan
- 2. Renewal Plan with Service Area Reduction (SAR)
- 3. Renewal Plan with Service Area Expansion (SAE)
- 4. Consolidated Renewal Plan
- 5. Renewal Plan Split Based on Provider Groups
- 6. New Plan
- 7. Terminated Plan

Each status is further defined below:

<u> Renewal Plan – available for all plans</u>

A CY 2007 plan that retains its entire plan service area from CY 2006; the same plan ID must be used in CY 2007.

Example:

CY 2007	CY 2006	Status
Plan 001 – counties/regions A	Plan 001 – counties/regions A	Panawal Dlan
and B	and B	Kellewal Flall

<u>Renewal Plan with Service Area Reduction (SAR) – only available for local</u> <u>Medicare Advantage and Medicare Advantage-Prescription Drug Plan Renewals</u>

A CY 2007 plan that retains only part of its plan service area from CY 2006; the same plan ID must be used in CY 2007.

Example 1: Where county B is being reduced from the contract service area.

CY 2007	CY 2006	Status
Plan 001 - county A	Plan 001 - counties A and B	Renewal Plan with SAR

Example 2: Where county B is assigned to another plan.

CY 2007	CY 2006	Status
Plan 001 - county A	Plan 001 - counties A and B	Renewal Plan with SAR
Plan 002 - county B		New Plan

<u>Renewal Plan with Service Area Expansion (SAE) – only available for local</u> <u>Medicare Advantage, Medicare Advantage-Prescription Drug Plan, and PDP</u> <u>Sponsor employer-only Renewals</u>

A CY 2007 plan that retains all of its plan service area from CY 2006 as well as gains one or more new counties for CY 2007; the same plan ID must be used in CY 2007.

Example:

CY 2007	CY 2006	Status
Plan 001 - counties A, B and C	Plan 001 - counties A and B	Renewal Plan with SAE

<u>Consolidated Renewal Plan – available for all plans</u>

A CY 2007 plan that represents the consolidation of two or more CY 2006 plans; one of the CY 2006 plan IDs must be used for the CY 2007 consolidated renewal plan.

Example:

CY 2007	CY 2006	Status
Plan 001 - counties/regions A	Plan 001 - county/region	Consolidated Renewal Plan
and B	А	

Plan 002 – county/region B	Consolidated Renewal Plan
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<u>Renewal Plan Split Based on Provider Groups - only available for Medicare</u> <u>Advantage and Medicare Advantage-Prescription Drug Plan Renewals</u>

Two or more CY 2007 plans that are created from a CY 2006 plan to represent a particular provider group; one of the resulting CY 2007 plans must use the same plan ID as the original CY 2006 plan.

Example:

CY 2007	CY 2006	Status
Plan 001 - county/region A	Plan 001 – county/region A	Renewal Plan Split Based on Provider Groups
Plan 002 – county/region A	Plan 001 – county/region A	Renewal Plan Split Based on Provider Groups

<u>New Plan – available for all plans</u>

A CY 2007 plan that is a new plan offering.

Example:

CY 2007	CY 2006	Status
Plan 003 - county/region A		New Plan

<u>Terminated Plan – available for all plans</u>

A CY 2006 plan that is no longer being offered in CY 2007.

Example:

CY 2007	CY 2006	Status
	Plan 001 – county/region A	Terminated Plan

Step 6: If the crosswalk is correct, select the "Confirm" button at the bottom of the page.

If you need to make changes to the crosswalk, select the "Change" button at the bottom of the page. This will take you to the Complete Plan Crosswalk Page, where you will see your CY 2007 plans in the left column and your CY 2006 plans in the right column. For each CY 2007 plan, select one of the CY 2006 plans available. When you have completed your plan crosswalk changes, click on the "Next" button to return to the Review Plan Crosswalk Page.

Plans may NOT change their part D offering from year to year. An MA-PD plan cannot be considered a "continuation" of an MA-only plan, and vice-versa.

Step 7: Once you have assigned all of the appropriate statuses for your plan relationships, and entered comments, as required, select the "Confirm" button.

Pre-Bid Submission Approval Requirements

Your Bid Submission data will not be considered for CMS review until the following requirements have been met:

- All plans (Plan IDs) or plan/segments for a Contract Number have been received by the HPMS.
- The Service Area Verification is marked as Concur or Non-Concur with comments. Therefore, all counties or regions in your approved service area must be assigned to at least one plan or you report in HPMS that you are reducing the county or region from its contract service area or the presence of the county or region as part of their contract service area is a CMS data error.
- One initial Actuarial Certification has been submitted to HPMS for all of your applicable BPTs (i.e., MA, Part D, MSA).
- The Two-Year Lookback Spreadsheet has been uploaded for your contract as applicable.
- The Formulary Crosswalk and Plan Crosswalk have been completed for those applicable organizations/plans.

FORMULARY CROSSWALK

The Formulary Crosswalk is required for <u>all contracts that submitted a Formulary</u> to HPMS. In order for this requirement to be considered complete, all plans with Part D under the contract that submitted the formulary must be assigned a Formulary AND all Formularies submitted for an organization must be assigned to a plan. One Formulary may be mapped to one or more plans. Once a plan is approved, the Formulary Crosswalk for that plan cannot be changed.

After reviewing the Formulary Crosswalk Requirements associated with your CY 2007 plans, you are ready to complete the Formulary Crosswalk.

Step 1: Log onto the HPMS.

Step 2: On the HPMS Home Page, select "**Plan Bids**" and then select "**Bid Submission**" from the fly out.

Step 3: On the Bid Submission Start Page, select "Contract Year 2007".

Step 4: On the Bid 2007 Start Page, select "Upload", then select "Formulary Crosswalk".

Step 5: On the Edit Formulary Crosswalk Information page, highlight a contract number with which you want to crosswalk your Formulary, and click on the "Next" button.

Step 6: On the Enter Formulary Crosswalk Information page, for plan(s) that offer Medicare Part D, select a Formulary from the listbox, and click on the "Next" button.

Step 7: On the Confirm Formulary Crosswalk page, review the Formulary listed for each applicable plan, and click on the "Submit" button.

ACTUARIAL CERTIFICATION/SUBSTANTIATION

An initial Actuarial Certification is required for each plan that is submitting an MA BPT, Part D BPT, or MSA BPT. If an initial Actuarial Certification is not uploaded to HPMS by the Bid Submission deadline, then the Bid will not be considered for CMS review.

Please refer to Appendix A of the MA BPT Instructions, Part D BPT Instructions and/or MSA BPT Instructions for further Bid approval requirements concerning the Actuarial Certifications. These documents are available by going to HPMS and selecting Plan Bids > Bid Submission > CY 2007 > Documentation.

CMS/OACT requires that the Actuarial Certification be signed by the certifying actuary. CMS encourages organizations to upload the signed certification to HPMS. However, organizations are permitted to upload an unsigned certification and mail the signed hard copy to:

Rhoda Friedman Centers for Medicare & Medicaid Services Office of the Actuary, Mail Stop N3-26-00 7500 Security Boulevard Baltimore, MD 21244

If organizations choose to upload an unsigned version, they must indicate this by marking the "Unsigned" checkbox within the Actuarial Certification upload screen.

For CY 2007, the Actuarial Certification upload is part of the Substantiation upload. One Actuarial Certification may be submitted for one or more contracts/plan/segments. Additionally, one article of substantiation may be submitted for one or more contracts/plan/segments. When you upload substantiation and certification information, you must identify to which contract(s)-plan/segment(s) the substantiation and certification may not be associated with PDP plans). You may upload substantiation and certification information for any contract to which you have been given access; you do not need to have any plan ownership for a contract to upload substantiation and certification information.

The MA and the Part D BPT substantiation categories include:

- Cost Projections/Development of Manual Rate;
- Administration/Profit/Development or Allocation;
- Miscellaneous.

NOTE: MSA organizations should upload their MSA BPT certification/substantiation under the MA substantiation type.

Please refer to Appendix B of the MA BPT Instructions, Part D BPT Instructions and/or MSA BPT Instructions for details on which pieces of Substantiation the Office of the Actuary (OACT) is expecting as part of your Bid Submission. These documents are available by going to HPMS and selecting Plan Bids > Bid Submission > CY 2007 > Documentation.

Filenames should be in the following format: filename_date.ext. The filename size is limited to 50 characters. The certification and substantiation upload file must be in one of the following formats: ZIP, TXT, DOC, XLS, JPG, GIF, and PDF. If the substantiation file is not in one of these formats, the submission will be rejected. You can upload individual files or .zip files. You can also upload multiple files for each type of substantiation. You are encouraged to limit the size of the substantiation files for performance considerations.

After a plan/segment bid has been approved, HPMS will not accept any substantiations for that plan/segment.

After reviewing the Pre-Upload Substantiation Requirements associated with your CY 2007 plans, you are ready to begin uploading your substantiation(s).

Step 1: Log onto the HPMS.

Step 2: On the HPMS Home Page, select "**Plan Bids**" and then select "**Bid Submission**" from the fly out.

Step 3: On the Bid Submission Start Page, select "Contract Year 2007".

Step 4: On the Bid 2007 Start Page, select "Upload", then select "Substantiation".

Step 5: On the Upload Substantiation Page, select the BPT substantiation type for which you are uploading the substantiation (MA or Part D or Both).

Step 6: Select the contract(s)/plan segment(s) for which you want to upload the substantiation.

Step 7: Enter the name of the File that you would like to upload. If you are unsure of the file name and/or location, click on the "Browse" button to locate the file. You can only upload files with .zip, .txt, .doc, .xls, .jpg, .gif, and .pdf extensions. For the Actuarial Certification upload, if the upload file is unsigned, you must check the "Unsigned" checkbox below the file name data entry field.

Step 8: Click on the "Upload" button to send the file to HPMS.

Step 9: Wait until the file transfer is complete. Your browser will redirect back to the Upload Substantiation Page once the file is received. You will be given a confirmation message to let you know the upload is complete. At this point, you may upload another file or click on the "**Back**" button to complete other Upload steps.

2-YEAR LOOKBACK SPREADSHEET

The Two-Year Lookback spreadsheet is an upload requirement for <u>certain MA Renewal</u> <u>Contracts</u>. Organizations should confirm if the Two-Year Lookback spreadsheet upload is required for their organization by reviewing the Upload 2-Year Lookback status screen in the HPMS by going to Plan Bids > Bid Submission > Contract Year 2007 > Upload > 2-Year Lookback. If the contract number/name is listed in the grid, then a Two-Year Lookback spreadsheet is required.

This upload is at the Contract level and is separate from the Bid Submission. However, this upload needs to be completed before the Bids for this contract are considered for CMS review.

Once all plans under the contract have been approved, a 2-Year Lookback spreadsheet for that contract can no longer be uploaded.

After reviewing the 2-Year Lookback Spreadsheet Requirements associated with your CY 2007 plans, you are ready to begin uploading your 2-Year Lookback spreadsheet(s).

Step 1: Log onto the HPMS.

Step 2: On the HPMS Home Page, select "**Plan Bids**" and then select "**Bid Submission**" from the fly out.

Step 3: On the Bid Submission Start Page, select "Contract Year 2007".

Step 4: On the Bid 2007 Start Page, select "Upload", then select "2-Year Lookback".

Step 5: Enter the name of the File that you would like to upload. If you are unsure of the file name and/or location, click on the "Browse" button to locate the file. You can only upload files with .xls, and .zip extensions. The 2-Year Lookback spreadsheet should be named with the following convention (H####_2YRLB.XLS). If you have multiple 2-Year Lookback Spreadsheets that you wish to upload, you can upload a zipped file. However, all files within the zipped file must be named appropriately.

Step 6: Click on the "Upload" button to send the file to HPMS.

Step 7: Wait until the file transfer is complete. Your browser will automatically be redirected to the appropriate page once the file is received.

REVIEW UPLOAD STATUS

You should review the status of the various components of the Bid Submission Upload by following these steps:

Step 1: Log onto the HPMS.

Step 2: On the HPMS Home Page, select "**Plan Bids**" and then select "**Bid Submissions**" from the fly out.

Step 3: On the Bid Submission Start Page, select "Contract Year 2007".

Step 4: On the Bid 2007 Start Page, select "Upload", then select "Review Upload Status".

Step 5: On the Review Upload Status page, you will see a table containing the list of contract/plan/segment(s) for which you are responsible, and the status of each of the required Upload components: Service Area Verification, Plan Crosswalk; Formulary Crosswalk, Actuarial Certification (MA and Part D), 2-Year Lookback and Bid Submission. A green check () indicates the step has been completed for this contract/plan/segment. The Bid Submission column provides the status of your bid submission. If the Bid has been uploaded but not successfully processed, the note will say "Plan Uploaded, But Not Processed". If the Bid has been successfully processed, the note will say "Plan Successfully Uploaded".

processed, the note will say "Plan Upload Rejected". If a step is not applicable for a specific contract/plan/segment, then N/A will appear for that step.

PLAN CORRECTIONS

<u>Pre-Upload Requirements</u>

In addition to the General Pre-Upload Submission Requirements, you must verify that the following statements are true before you upload your CY 2007 Plan Correction Bid submission:

- The Contract Number/Plan ID has been previously approved by CMS as an initial application or a contract renewal.
- The Plan Correction request for the Contract Number/Plan ID has been approved by CMS.
- There are no outstanding Plan Correction transactions for the Contract Number/Plan ID combination (i.e., HPMS will only process one Plan Correction transaction per Contract Number/Plan ID combination at a time).
- There are no changes to the service areas associated with the approved Contract Number/Plan ID combination.

Pre-Bid Submission Approval Requirements

There are no additional requirements to be met before forwarding the Plan Correction submission for review and approval.