DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Office of Beneficiary Information Services
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OFFICE OF BENEFICIARY INFORMATION SERVICES

Date: May 6, 2008

To: All Medicare Part D Plans

From: Zabeen Chong
               Director, Website Project Management Group

Subject: 2009 Plan Year Pricing Data Requirements

The information on the following pages contain the updated 2009 CMS guidance and schedule for the submission of the pricing and pharmacy data for posting on the Medicare Prescription Drug Plan Finder on www.medicare.gov.

This information will also available in the Formulary Guidance section of www.cms.hhs.gov. (http://www.cms.hhs.gov/PrescriptionDrugCovContra/03_RxContracting_FormularyGuidance.asp).

Changes from the 2008 Plan Year Guidance include the following:
- There will be three required test pricing data submissions before the public release of the data. These data submissions are required for all existing plans as well as any plans that are new for the 2009 Plan Year. PACE, Demo, and Employer plans are exempt since their drug pricing data is not represented on www.medicare.gov. All test data submissions will be on Thursdays and Fridays so that they will not interfere with regular data submissions. The initial test data submission will be Thursday, July 17, 2008 12:01AM - Friday, July 18, 2008 11:59PM. Please refer to the Appendix A, 2009 Plan Year Pricing File Data Submission Calendar, for details.

- File Format: Each file should include the Contract Year (Format: YYYY) in the header. For Plan Year 2009 pricing files, a header record must include: Contract_ID, 2009, Record Count (num (9) with leading zeros) for the entire File (Format: XXXXXXXXX), and an 8-digit Date Created (Format: CCYYMMDD)
- Pharmacy Cost Files
  - Sponsors must use National Provider Identifiers (NPIs) to define the pharmacy network. In line with the Final Rule on HIPAA Administrative Simplification: Standard Unique Health Identifier for Health Care Providers (Federal Register 45 CFR Part 162) and subsequent CMS guidance, all electronic claims must include the NPI number. More information on CMS Guidance regarding NPIs can be found at: http://www.cms.hhs.gov/NationalProvIdentstand/.
  - A new field for Vaccine Administration Fee has been added. It is a required field for plans that have vaccines in their Part D Formulary.
- Pricing Files
  - Pricing for Excluded Drugs should continue to be submitted as part of the Pricing File.
- Reference Pricing Files
  - A new field to identify the Tier to which the reference pricing should apply has been added.
  - The "REFERENCE_TYPE" field has been removed.
- Formulary Files (Excluded Drugs Only)
  - This file will no longer be submitted as part of the Part D Pricing Data. The excluded drug file submitted through HPMS on June 9th will replace this file. Please refer to the CY 2009 Formulary Technical User Manual for details.

Common FAQs Related to the Submission of Pricing Data Files:

1. How do I get access to the Administrative Console?

   Plans that are new for the 2009 plan year will receive their unique log in ID and password before the data submission that begins on Monday, September 22, 2008. This information will be emailed to the Part D Price File Contacts listed in HPMS. Plans that are active for the 2008 plan year will continue to use the log in ID and password that was assigned for the 2008 plan year.

2. How will CMS distinguish between the 2008 and 2009 pricing data files?

During the overlap period where both 2008 and 2009 pricing data will be submitted, CMS will distinguish the different files based on the submission dates. 2008 pricing data will continue to be submitted on Mondays and Tuesdays and 2009 pricing data will be submitted on Thursdays and Fridays per the submission calendar. Please note that the submission day for 2009 will change to Mondays and Tuesdays effective with the data submission that begins on Monday, September 22, 2008.

3. What data needs to be submitted by plans with each of the test data submissions?

   Plans will need to submit complete data files. This includes complete Pricing Files and Pharmacy Cost Files and if applicable a Reference Pricing File. Reference Pricing files are only to be submitted by plans using reference pricing and indicated as such in the PBP.

4. Do employer (retiree), Demo, and PACE plans need to submit pricing data files?

   No.

5. How do I get in contact with the technical helpdesk?

   Plans can email plancompare@destinationrx.com or call (888) 203-8497 between the hours of 8:30AM and 6:30PM EST Monday through Friday. Correspondence received after 6:30PM EST will be returned the following business day. To expedite assistance, plans should provide the contract and plan IDs.

Questions about the information presented in this document should be directed to plancompare@destinationrx.com and CMS_MPDPF_Inquiries@cms.hhs.gov.

2009 Plan Year Data Requirements and Submission Guidelines for the Medicare Prescription Drug Plan Finder on www.medicare.gov

Revised Date: May 1, 2008

Objective:

The following pages contain guidance to Medicare prescription drug plans regarding additional data submission requirements for the Medicare Prescription Drug Plan Finder that is housed on www.medicare.gov. Both stand alone prescription drug plans (PDPs) and Medicare Advantage Prescription Drug (MA-PDs) plans will be required to submit these data to CMS and these data will be posted on www.medicare.gov. The purpose of the data is to enable people with Medicare to compare, learn, select and enroll in a plan that best meets their needs. The database structure provides the necessary drug pricing and pharmacy network information to accurately communicate plan information in a comparative format.

Questions regarding the data requirements outlined in this document should be directed to plancompare@destinationrx.com and CMS MPDPF_Inquiries@cms.hhs.gov.

Timeline for 2009 Plan Year Data Submissions:
The initial public release of the pricing data on www.medicare.gov is tentatively scheduled for October 9, 2008. These data submissions are required for all PDP and MAPD plans (with the exception of PACE, Demo, and Cost plans). The 2009 plan year test data submissions will be on Thursdays and Fridays. Pricing files that will be published on www.medicare.gov will resume on the regular Monday - Tuesday submission schedule, beginning September 22-23, 2008. ****Please note that active 2008 Plan Year PDPs and MAPDs must continue submitting their pricing and pharmacy network data on the previously released bi-weekly schedule in addition to the 2009 Plan Year data submissions described below.**

- July 17 and 18, 2008 – PDP/MAPD plans submit initial 2009 Plan Year pricing and pharmacy network data (full data set) electronically to CMS (1st set of test files, not used for public reporting)
- August 14-15, 2008 – PDP/MAPD plans submit corrected 2009 Plan Year pricing and pharmacy network data to CMS (2nd set of test files, not used for public reporting)
- **August 26-28, 2008 – Data Preview #1** of 2009 Plan Year Pricing Data for plans, based on data submitted August 14-15, 2008
- September 4-5, 2008 – Plans submit corrected 2009 Plan Year pricing and pharmacy network to CMS for final testing (3rd set of test files, not used for public reporting)

- September 8-9, 2008 **– Final <u>2008</u> Plan Year pricing and pharmacy network data submission. This data will be posted September 22, 2008 on www.medicare.gov.**
- **September 16-18, 2008 – Data Preview #2** of 2009 Plan Year Pricing Data for plans, based on data submitted September 4-5, 2008
- **September 22-23, 2008 – PDP and MAPD plans submit 2009 Plan Year pricing and pharmacy network data to CMS that will be published on <u>www.medicare.gov</u> **This data will be publicly released on <u>www.medicare.gov</u> on or about October 9, 2008**
- October 9, 2008 (tentative) – Launch of the 2009 Plan Year pricing and pharmacy network data in the Medicare Prescription Drug Plan Finder Tool on <u>www.medicare.gov</u>

Table of Contents for Sample Data File Layouts and Questions:

DATA VALIDATION

All plan submissions will be reviewed by CMS and the submission vendor for both formatting and content. In the case of validation or other submission errors, to prevent incorrect data display, pricing data from affected plans will be suppressed from display on the tool pending corrected data submission or plan election to utilize last successful data submission.

SUBMISSION INSTRUCTIONS

In order to provide the data specified, organizations will be given access to a Plan Compare Data Administration Console. This console will allow sponsors to submit data, certify non-submissions, view enrollment statistics, and verify submissions. CMS will not accept data submitted in any other format (e.g. CD, Floppy Disk, Email, etc.).

Username and Password (this username and password is assigned by DestinationRx and is separate from any username or password to access any other CMS system)
- Username and Password will be per Sponsor.
- Sponsor may submit files for all programs associated with Sponsor.
- Username and Password will initially be assigned to Sponsor by DestinationRx and given to the Part D Price File Contacts, Online Enrollment Center Contacts, and Medicare Coordinators listed in HPMS.

Connectivity
- Sponsor will be able to review their submission status at https://enrollmentcenter.medicare.gov/AdministrativeConsole/PlanFinder/login.aspx.
- **Any connectivity issues encountered during the data submission should be immediately sent to plancompare@destinationrx.com for resolution. Support is available from 8:30AM – 6:30PM EST Monday through Friday. Correspondence received after 6:30PM EST will be returned the next business day. Please get your submissions in early to ensure a timely response in case of error.**

Timelines
- Sponsors will be required to follow the timelines discussed above for all testing, verification, and data submissions.
- Regularly scheduled submissions will be made on a biweekly basis, following the submission calendar contained in this document.
- Updates or certification that no updates can be made only during the submission window on every other week beginning Monday 12:01AM PST and ending Tuesday 11:59PM PST and will be processed and displayed by 12:01 AM (PST) on the scheduled Monday.
- If multiple files are submitted, the LAST file received will be considered the final submission. If the first file was good, and the last file had an error, your submission for that submission window will be considered in error.

- Each time a file is submitted, please review its submission status at https://enrollmentcenter.medicare.gov/AdministrativeConsole/PlanFinder/login.aspx
- ***If the files are not received and not viewable at that URL within 30 minutes of the initial submission, the files were not received successfully, and you should contact the Plan Compare Help Desk for support.*** Upon each submission, the Sponsor will also receive several email confirmations (sent to the Part D Price File contacts) regarding the following:
  - File was received
  - File has been processed and results (i.e., whether there were errors and whether it passed validation, etc.)
- Each file submitted to the FTP server will be verified against the file format as listed in this document.
- All required files must be validated either during the submission window or during a previous submission. Should a Sponsor decide to use validated files from a previous submission, it must certify in the Administrative Console during the submission window that there are no updates to the file.
- Once all required files are accounted for, several data content checks will be performed on these files. The results will be available at https://enrollmentcenter.medicare.gov/AdministrativeConsole/PlanFinder/login.aspx.
- If the file validation and data content checks result in errors, you may resubmit your files within the same submission window.
- Any difficulties encountered during submission should be addressed as quickly as possible to plancompare@destinationrx.com within the submission window so that any necessary assistance can be provided in a timely manner. The Plan Compare Help Desk is available between the hours of 8:30AM – 6:30PM EST Monday through Friday. Correspondence received after 6:30PM EST will be returned the next business day.

Tracking, Logging and Monitoring
- All activity will be tracked, logged, and monitored, this includes but is not limited to:
  - Username used for connection
  - Date and Time of connection
  - Duration of connection
  - Number of files uploaded
  - File Processing Results (Validation and Error results)

File Formats

1. All submissions will be Fixed Length files. The filename should follow the standard: ContractIDXX.txt where ContractID is the sponsor's CMS defined contract_id and XX is the table name abbreviation code (defined below). **Example, for a sponsor with the Contract_id of H1001 submitting a pricing file, the file name would be H1001PF.txt.** Only one file per table should be submitted.

   A header record should be included that specifies the Contract_ID, Plan Year (Format: YYYY), Record Count (num (9) with leading zeros) for the entire File (Format: XXXXXXXXX), and an 8-digit Date Created (Format: CCYYMMDD) information. A footer record should be included that again specifies Contract_ID and EOF for End of File.

Sample Header Record
H0001200900000001020050715
      (WhereH0001 is the Contract_ID, 2009 is the Plan Year, 000000010 is the Record Count, and 20080922 is the date)

Sample Footer Record
H0001EOF

Table Abbreviation Codes:
- Pharmacy Cost   **PC**
- Pricing File   **PF**
- Reference Pricing   **RP**

Float(12) and Currency(12) Submission Guidelines:
- Do not include the decimal point
- The format follows this structure \$\$\$\$\$\$\$\$cccc where \$\$\$\$\$\$\$\$ are the numbers to the left of the decimal point (with leading zeros) and the cccc are the numbers to the right of the decimal point (with trailing zeros)
- Samples:
  - \$1.50 = 000000015000
  - 10% = 000000001000

PHARMACY COST

Light Green Fields Indicate Unique Record Identifiers

Field Name	Type(Size)	NULL	Field Description
CONTRACT_ID	Char(5)	NOT NULL	References Organization's Contract Number assigned by CMS
PLAN_ID	Char(3)	NOT NULL	References PLAN_ID that this pharmacy cost file serves assigned by CMS. Include Leading Zeroes.
SEGMENT_ID	Char(3)	NOT NULL	Plan Segment ID only for local MA-PD plans assigned by CMS (if applicable). Include Leading Zeroes. PDP plans and MA-PDs without Segment_IDs should enter 000.
PHARMACY_NUMBER	Char(12)	NOT NULL	12-digit Pharmacy Number • 10 digit National Provider Identifier (NPI) with leading one and zero, or *Plans may ONLY submit NPI numbers. National Council for Prescription Drug Program (NCPDP) numbers will not be recognized.*
PRICE_ID	Number(3)	NOT NULL	References the Price File Grouping Number to be used at this pharmacy.
BRAND_DISPENSING_FEE	Currency(12) (Format: $$$$$$$$cccc)	NOT NULL	In addition to the ingredient cost (product cost) at the point of sale.
GENERIC_DISPENSING_FEE	Currency(12) (Format: $$$$$$$$cccc)	NOT NULL	In addition to the ingredient cost (product cost) at the point of sale.
VACCINE_ADMINISTRATION_FEE	Currency(12) (Format: $$$$$$$$cccc)	NOT NULL	For vaccines only: In addition to the ingredient cost (product cost), the maximum fee associated with the administration of any covered vaccines at the pharmacies in this Price_ID.
PREFERRED_STATUS	Number(1)	DEFAULT 0, NOT NULL	Yes/No defines whether pharmacy is preferred, other network, or network. Acceptable values **0** or **1 (0=Other Network or Network Pharmacy; 1=Preferred Pharmacy)**
PHARMACY_RETAIL	NUMBER(1)	DEFAULT 1,	Yes/No defines whether pharmacy is to be displayed in

Field Name	Type(Size)	NULL	Field Description
		NOT NULL	retail (1 month supply) search Acceptable values **0** or **1 (0=Not Retail; 1=Retail)**
PHARMACY_MAIL	NUMBER(1)	DEFAULT 0, NOT NULL	Yes/No defines whether pharmacy is to be displayed in mail-order (3 month supply) search. Acceptable values **0** or **1 (0=Not Mail Order; 1=Mail Order)**
PHARMACY_SPECIALTY	NUMBER(1)	DEFAULT 0, NOT NULL	Yes/No defines whether pharmacy dispenses specialty drugs. Acceptable values **0** or **1 (0=Does not dispense Specialty Drugs; 1=Dispenses Specialty Drugs)**
PHARMACY_HI	NUMBER(1)	DEFAULT 0, NOT NULL	Yes/No defines whether pharmacy dispenses home infusion drugs. Acceptable values **0** or **1 (0=Does not dispense Home Infusion Drug; 1=Dispenses Home Infusion Drug)**
PHARMACY_LTC	NUMBER(1)	DEFAULT 0, NOT NULL	Yes/No defines whether pharmacy is considered a Long Term Care pharmacy. Acceptable values **0** or **1 (0=Not a Long Term Care Pharmacy; 1=Long Term Care Pharmacy)**

Notes

- If a plan's network has preferred network pharmacies, then there must also be non-Preferred (Other) network pharmacies, i.e., if a sponsor has indicated "1" (meaning a Preferred Network Pharmacy), the PC file must also have a "0" (meaning Other Network Pharmacy). If a plan's network does not have Preferred Pharmacies, then all pharmacies should be "0" (meaning Network Pharmacy). As defined in the regulation 42 CFR § 423.104, a *preferred pharmacy* means a network pharmacy that offers covered Part D drugs at negotiated prices to Part D enrollees at lower levels of cost sharing than apply at a non-preferred pharmacy under its pharmacy network contract with a Part D Sponsor.
- There should only be one record per network pharmacy per plan. If multiple records are entered, subsequent records are ignored.
- All PRICE_IDs listed in this file must exist in your Pricing File.
- PHARMACY_RETAIL and PHARMACY_MAIL are present to indicate whether a particular pharmacy offers drug sales at either a standard one-month (retail) supply or a three-month (mail order) supply. If both services are offered, enter 1 for both fields. Otherwise,

enter a 1 only for the applicable pharmacy type. **Please note, if a pharmacy offers retail 90 day supply, it is NOT considered a mail order pharmacy, and should have a 0 for PHARMACY_MAIL**

- The maximum cost of administering any covered vaccine under the respective Price ID should be entered. If a vaccine requires a series of administrations, include just the cost of 1 dose.

Submission Frequency: Organizations will be required to submit pricing on a bi-weekly basis. If no updates are required, Organizations will be required to certify via https://enrollmentcenter.medicare.gov/AdministrativeConsole/PlanFinder/login.aspx that there are no updates. In the case of no updates, the Sponsor's most recently format validated pricing data will be used.

PRICING FILE

Light Green Fields Indicate Unique Record Identifiers

Field Name	Type(Size)	NULL	Field Description
CONTRACT_ID	Char(5)	NOT NULL	References Organization's Contract Number assigned by CMS
PRICE_ID	Number(3)	NOT NULL	Price File Grouping Number
NDC	Char(11)	NOT NULL	The appropriate 11 Digit NDC from the approved formulary representing the drug/dosage combination
UNIT_COST	Currency(12) (Format: $$$$$$$$cccc)	NOT NULL	Unit cost for given NDC less dispensing fee for one-month retail supply. If N/A enter 000000000000
UNIT_COST_90	Currency(12) (Format: $$$$$$$$cccc)	NOT NULL	Unit cost for given NDC less dispensing fee for 3-month mail order supply. If N/A enter 000000000000

Submission Notes: For pricing display, the tool will display one cost for all NDCs of a given drug/dosage combination. Organizations will submit records as described above with unit costs for the specific NDCs listed in the Sponsor's approved formulary, inclusive of both Part D-covered and Part D-excluded drugs. For Part D-covered drugs, Sponsors may not submit pricing for an NDC other than those listed in the Formulary Reference File (FRF). Enhanced alternative plans covering Part D-excluded drugs should include the pricing for those drugs in this file. If no pricing is submitted for a specific NDC, the cost information on www.medicare.gov will be AWP minus 10% for brand drugs and AWP minus 30% for generic drugs plus a standard dispensing fee.

Notes:
- This file determines the base unit cost of an NDC in a given pricing regime.
- Price_ID is identified by the Organization, within the following parameters;
  - The lowest available PRICE_ID is 100
  - PRICE_IDs should be assigned sequentially
  - PRICE_IDs for Retail pharmacies should be between 100 and 199
  - PRICE_IDs for Mail Order pharmacies should be between 200 and 299
  - In the event that an organization has over 100 PRICE_IDs for a given type (retail or mail-order), additional PRICE_IDs should begin sequentially in the next group of 100s where retail pharmacies are in the 300, 500, 700, 900 series, and mail-order pharmacies are in the 400, 600, 800 series.
- There can be multiple pricing files per organization.
- The pricing file is applied to the plan through the Pharmacy Cost file.

- Every drug from the formulary should be covered under each PRICE_ID. Exceptions are:
  - Formulary drugs available only at specialty pharmacy may be limited to PRICE_IDs used by specialty pharmacies.
  - PRICE_IDs used only for specialty pharmacies should only contain records for drugs available at pharmacies using that PRICE_ID.
- Unit pricing can be provided for both a one-month retail supply and three-month mail-order supply. If only one type applies, enter 00000000000 in the non-applicable field. If both types apply, but are the same, enter the same value in both fields.
- Unit is defined as Package Unit of Measure and can be either "Each" or "ML". The following are examples of a unit:
  - Oral Drugs: Lipitor, 10 MG Tablet, Unit is "Each".
  - Non-Oral Drugs: Clarinex SYP, Unit is in "ML".
  - Vaccines: Attenuvax, Injection, Unit is "Each"; Adacel. SUSP, Unit is in "ML".
- Enhanced Alternative Plans: The NDC field for Part D-excluded drugs should be the plan-determined proxy NDC that is used in the excluded formulary file approved by CMS in HPMS.

Submission Frequency: Organizations will be required to submit pricing on a bi-weekly basis. If no updates are required, Organizations will be required to certify via https://enrollmentcenter.medicare.gov/AdministrativeConsole/PlanFinder/login.aspx **that there are no updates. In the case of no updates, the Sponsor's most recently format validated pricing data will be used.**

REFERENCE PRICING

Light Green Fields Indicate Unique Record Identifiers

Field Name	Type(Size)		Field Description
CONTRACT_ID	Char(5)	NOT NULL	References Organization's Contract Number assigned by CMS
PLAN_ID	Char(3)*	NOT NULL	References PLAN_ID that this pharmacy cost file serves assigned by CMS
SEGMENT_ID	Char(3)*	NOT NULL	Plan Segment ID only for local MA-PD plans assigned by CMS (If applicable)
TARGET_NDC	Char(11)	NOT NULL	11-digit NDC of the target drug, i.e., the drug that has reference pricing
REFERENCE_NDC	Char(11)	NOT NULL	11-digit NDC of the drug whose cost should be referenced
REFERENCE_AMOUNT	Float(12) (Format: $$$$$$$$cccc)	NOT NULL	12 character number including leading zeros Enter the percentage as a decimal value with four implied decimal places – e.g., 15% is entered as 00001500 and 100% is entered as 000000010000.
BASE_COPAY_TIER	Char(2)	NOT NULL	The reference pricing differential as indicated by the REFERENCE_AMOUNT will be added to the copay or co-insurance of this Tier. This must be the Tier of the TARGET_NDC or REFERENCE_NDC.

Notes

- **Plans which are approved to have reference pricing in their PBP are required to submit RP files. Conversely, plans that are not approved to have reference pricing are not permitted to submit RP files.**
- TARGET_NDC refers to the product subject to reference pricing and REFERENCE_NDC refers to the product that forms the reference.
- There should be one record per plan and NDC, where applicable.
- The reference pricing calculation increases the beneficiary's estimated copay or co-insurance amount by applying the entire OR a percentage of the difference in the cost between the Target and Reference drug.

EXAMPLES

Assume the following information for the examples below:

Drug name	BRAND_A	GENERIC	BRAND_B
NDC	11111111111	22222222222	33333333333
Unit price	$1.20	$0.75	$1.50
Quantity	30	30	30
Dispensing fee	$2.00	$2.50	$2.00
Monthly cost	$38.00	$25.00	$47.00
Tier	2	1	2
Cost share below the Initial Coverage Limit	25%	$3.00	25%

SITUATIONS THAT CAN BE HANDLED BY THE REFERENCE PRICING FILE

CASE 1. If the beneficiary chooses BRAND_A over GENERIC, he or she must pay the co-insurance for BRAND_A plus 75% of the difference between the Target and Reference drug per scrip. The Reference Pricing File should look like:

> H0001|000000001|20080922
> H0001|001|000|11111111111|22222222222|000000007500|02
> H0001EOF
> *[NOTE: Pipes are inserted only to provide visual clarity!]*

CASE 2. If the beneficiary chooses BRAND_A over GENERIC, he or she must pay the co-pay for GENERIC plus 100% of the difference between the Target and Reference drug per scrip. The Reference Pricing File should look like:

> H0001|000000001|20080922
> H0001|001|000|11111111111|22222222222|000000010000|01
> H0001EOF
> *[NOTE: Pipes are inserted only to provide visual clarity!]*

CASE 3. If the beneficiary chooses either BRAND_A or BRAND_B over GENERIC, he or she must pay the co-insurance for the brand plus 50% of the difference in the cost between the brand and generic drugs per scrip. The Reference Pricing File should look like:

```
H0001|000000002|20080922
H0001|001|000|11111111111|22222222222|000000005000|02
H0001|001|000|33333333333|22222222222|000000005000|02
H0001EOF
```
[NOTE: Pipes are inserted only to provide visual clarity!]

SITUATIONS THAT <u>CANNOT</u> BE HANDLED BY THE REFERENCE PRICING FILE

CASE 5. The allowed cost for the scrip, whether filled with BRAND_A, BRAND_B, or GENERIC, is determined by the lowest-priced NDC for GENERIC. In this case, the TARGET_NDC and REFERENCE_NDC point to the same product.

CASE 6. There is a surcharge if the scrip for GENERIC is filled from any manufacturer's bottle except Manufacturer X. Again, the TARGET_NDC and REFERENCE_NDC point to the same product.

CASE 7. BASE_COPAY_TIER entered does not correspond to either the Tier of the TARGET_NDC or REFERENCE_NDC.

REFERENCE PRICING FILE EDIT CHECKS

The following edit checks are applied to each file submitted to DestinationRx for the Plan Finder website. A potential error warning will be generated as the result of any of the conditions listed below.

1. Invalid NDC
     TARGET_NDC or REFERENCE_NDC is inactive or obsolete.

2. Anomalous REFERENCE_AMOUNT
     REFERENCE_AMOUNT=0 (no surcharge)
     REFERENCE_AMOUNT>1 (surcharge exceeds 100%)

3. REFERENCE_NDC or TARGET_NDC is not on formulary
     Drug product (name/form/strength) associated with REFERENCE_NDC or TARGET_NDC is not found in the relevant CMS-approved Formulary File submitted to HPMS.

4. Multiple references
     The product associated with TARGET_NDC is paired with more than one other product (associated with REFERENCE_NDCs).

```
H0001|000000002|20080922
H0001|001|000|11111111111|22222222222|2|000000005000|01
```

```
H0001|001|000|11111111111|33333333333|2|000000005000|01
H0001EOF
```
[NOTE: Pipes are inserted only to provide visual clarity!]

5. Auto-referencing
   TARGET_NDC and REFERENCE_NDC are associated with the same product (name/form/strength).

6. Looping reference pricing
   TARGET_NDC is associated with a product that is also associated with REFERENCE_NDC elsewhere in the Reference Pricing file (i.e., Product A is referenced to Product B, which in turn is referenced to Product C)

```
H0001|000000002|20080922
H0001|001|000|11111111111|22222222222|2|000000005000|01
H0001|001|000|22222222222|33333333333|2|000000005000|01
H0001EOF
```
[NOTE: Pipes are inserted only to provide visual clarity!]
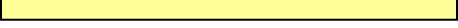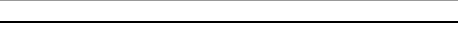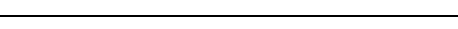
7. Reverse reference pricing
   TARGET_NDC is an equal or LOWER cost product than REFERENCE_NDC (in the Pricing File).

Submission Frequency: Organizations will be required to submit pricing on a bi-weekly basis. If no updates are required, Organizations will be required to certify via https://enrollmentcenter.medicare.gov/AdministrativeConsole/PlanFinder/login.aspx **that there are no updates. In the case of no updates, the Sponsor's most recently format validated pricing data will be used.**

2009 Plan Year Pricing Data Submission Calendar

Color Key

	Scheduled data posting data on the Medicare Prescription Drug Plan Finder
	Monthly Formulary Submission Windows
	Monthly Formulary Approval Date
	Scheduled 2008 Plan Year Data Submission Dates
	Final Data Submission for the 2008 Plan Year
	Scheduled 2009 Plan year Data Submission dates
	Scheduled 2009 Plan Year Plan Preview

May 2008

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1 2008 Formulary Submission Window	2 2008 Formulary Submission Window	3
4	5 2008 Formulary Submission Window Submit PY2008 Pricing Data 4/22 Pricing Data Posted on the Drug Plan Finder	6 Submit PY2008 Pricing Data	7	8	9	10
11	12	13	14	15	16	17
18	19 Submit PY2008 Pricing Data 5/6 Pricing Data Posted on the Drug Plan Finder	20 Submit PY2008 Pricing Data	21	22	23	24
25	26 Memorial Day	27 Approval Deadline for May Formulary Submission	28	29	30	31

June 2008

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2 2008 Formulary Submission Window Submit PY2008 Pricing Data 5/20 Pricing Data Posted on the Drug Plan Finder	3 2008 Formulary Submission Window Submit PY2008 Pricing Data	4 2008 Formulary Submission Window	5	6	7
8	9	10	11	12	13	14
15	16 Submit PY2008 Pricing Data 6/3 Pricing Data Posted on the Drug Plan Finder	17 Submit PY2008 Pricing Data	18	19	20	21
22	23	24 Approval Deadline for June Formulary Submission	25	26	27	28
29	30 Submit PY2008 Pricing Data 6/17 Pricing Data Posted on the Drug Plan Finder					

July 2008

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1 2008 Formulary Submission Window Submit Pricing Data	2 2008 Formulary Submission Window	3 2008 Formulary Submission Window	4 Independence Day	5
6	7	8	9	10	11	12
13	14 Submit Pricing Data 7/1 Pricing Data Posted on the Drug Plan Finder	15 Submit Pricing Data	16	17 __Initial__ 2009 Plan Year Test Data Submission – this data will not be publicly released	18 __Initial__ 2009 Plan Year Test Data Submission – this data will not be publicly released	19
20	21	22 Approval Deadline for July Formulary Submission	23	24	25	26
27	28 Submit Pricing Data 7/15 Pricing Data Posted on the Drug Plan Finder	29 Submit Pricing Data	30	31		

August 2008

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1 2008 Formulary Submission Window	2
3	4 2008 Formulary Submission Window	5 2008 Formulary Submission Window	6	7	8	9
10	11 Submit Pricing Data 7/29 Pricing Data Posted on the Drug Plan Finder	12 Submit Pricing Data	13	14 2nd 2009 Plan Year Test Data Submission – this data will not be publicly released	15 2nd 2009 Plan Year Test Data Submission – this data will not be publicly released	16
17	18	19	20	21	22	23
24	25 Submit Pricing Data 8/12 Pricing Data Posted on the Drug Plan Finder	26 Submit Pricing Data Plan Preview #1(using 2nd PY2009 test data submission) Approval Deadline for August Formulary Submission	27 Plan Preview #1 (using 2nd PY 2009 test data submission)	28 Plan Preview #1 (using 2nd PY2009 test data submission)	29	30
31						

September 2008

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1 Labor Day 2008 Formulary Submission Window Changes to the formulary submitted during this window will not be displayed on Plan Finder.	2 2008 Formulary Submission Window	3 2008 Formulary Submission Window	4 3rd 2009 Plan Year Test Data Submission – this data will not be publicly released	5 3rd 2009 Plan Year Test Data Submission – this data will not be publicly released	6
7	8 **Final** Plan Year 2008 Pricing Data Submission 8/26 Pricing Data Posted on the Drug Plan Finder	9 **Final** Plan Year 2008 Pricing Data Submission	10	11	12	13
14	15	16 Approval Deadline for September Formulary Submission Plan Preview #2 (using 3rd PY2009 test data submission)	17 Plan Preview #2 (using 3rd PY 2009 test data submission)	18 Plan Preview #2 (using 3rd PY2009 test data submission)	19	20
21	22 **Initial** Plan Year 2009 Data Submission to be released on or about 10/9 9/9 Pricing Data Posted on the Drug Plan Finder	23 **Initial** Plan Year 2009 Data Submission to be released on or about 10/9	24	25	26	27
28	29	30				

October 2008

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1 2008 Formulary Submission Window	2 2008 Formulary Submission Window	3 2008 Formulary Submission Window	4
			Changes to the formulary submitted during this window will not be displayed on Plan Finder.			
5	6	7	8	9 9/30 Pricing Data Posted on the Drug Plan Finder – First Display of 2009 Data	10	11
12	13 Columbus Day Submit PY2009 Pricing Data	14 Submit PY2009 Pricing Data	15	16	17	18
19	20	21 Approval Deadline for October Formulary Submission	22	23	24	25
26	27 Submit PY2009 Pricing Data 10/14 Pricing Data Posted on the Drug Plan Finder	28 Submit PY2009 Pricing Data	29	30	31	

November 2008

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1
2	3	4	5	6	7	8
9	10 Submit PY2009 Pricing Data 10/28 Pricing Data Posted on the Drug Plan Finder	11Veterans' Day Submit PY2009 Pricing Data	12	13	14	15
16	17	18	19	20	21	22
23	24 Submit PY2009 Pricing Data 11/11 Pricing Data Posted on the Drug Plan Finder	25 Submit PY2009 Pricing Data	26	27 Thanksgiving	28	29
30						

December 2008

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6
7	8 Submit PY2009 Pricing Data 11/25 Pricing Data Posted on the Drug Plan Finder	9 Submit PY2009 Pricing Data	10	11	12	13
14	15	16	17	18	19	20
21	22 Submit PY2009 Pricing Data 12/9 Pricing Data Posted on the Drug Plan Finder	23 Submit PY2009 Pricing Data	24	25 Christmas	26	27
28	29	30	31			

January 2009

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1 New Year's Day	2	3
4	5 Submit PY2009 Pricing Data 12/23 Pricing Data Posted on the Drug Plan Finder	6 Submit PY2009 Pricing Data	7	8	9	10
11	12	13	14	15	16	17
18	19 MLK Day Submit PY2009 Pricing Data 1/6 Pricing Data Posted on the Drug Plan Finder	20 Inauguration Day Submit PY2009 Pricing Data	21	22	23	24
25	26	27	28	29	30	31

February 2009

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2 2009 Formulary Submission Window Submit PY2009 Pricing Data 1/20 Pricing Data Posted on the Drug Plan Finder	3 2009 Formulary Submission Window Submit PY2009 Pricing Data	4 2009 Formulary Submission Window	5	6	7
8	9	10	11	12	13	14
15	16 President's Day Submit PY2009 Pricing Data 2/3 Pricing Data Posted on the Drug Plan Finder	17 Submit PY2009 Pricing Data	18	19	20	21
22	23	24 Approval Deadline for February Formulary Submission	25	26	27	28

March 2009

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2 2009 Formulary Submission Window Submit PY2009 Pricing Data 2/17 Pricing Data Posted on the Drug Plan Finder	3 2009 Formulary Submission Window Submit PY2009 Pricing Data	4 2009 Formulary Submission Window	5	6	7
8	9	10	11	12	13	14
15	16 Submit PY2009 Pricing Data 3/3 Pricing Data Posted on the Drug Plan Finder	17 Submit PY2009 Pricing Data	18	19	20	21
22	23	24 Approval Deadline for March Formulary Submission	25	26	27	28
29	30 Submit PY2009 Pricing Data 3/17 Pricing Data Posted on the Drug Plan Finder	31 Submit PY2009 Pricing Data				

April 2009

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1 2009 Formulary Submission Window	2 2009 Formulary Submission Window	3 2009 Formulary Submission Window	4
5	6	7	8	9	10	11
12	13 Submit PY2009 Pricing Data 3/31Pricing Data Posted on the Drug Plan Finder	14 Submit PY2009 Pricing Data	15	16	17	18
19	20	21 Approval Deadline for April Formulary Submission	22	23	24	25
26	27 Submit PY2009 Pricing Data 11/25 Pricing Data Posted on the Drug Plan Finder	28 Submit PY2009 Pricing Data	29	30		

May 2009

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1 2009 Formulary Submission Window	2
3	4 2009 Formulary Submission Window	5 2009 Formulary Submission Window	6	7	8	9
10	11 Submit PY2009 Pricing Data 4/28 Pricing Data Posted on the Drug Plan Finder	12 Submit PY2009 Pricing Data	13	14	15	16
17	18	19	20	21	22	23
24	25 Memorial Day Submit PY2009 Pricing Data 5/12 Pricing Data Posted on the Drug Plan Finder	26 Submit PY2009 Pricing Data	27	28	29	30
31						

June 2009

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1 2009 Formulary Submission Window	2 Approval Deadline for May Formulary Submission 2009 Formulary Submission Window	3 2009 Formulary Submission Window	4	5	6
7	8 Submit PY2009 Pricing Data 5/26 Pricing Data Posted on the Drug Plan Finder	9 Submit PY2009 Pricing Data	10	11	12	13
14	15	16	17	18	19	20
21	22 Submit PY2009 Pricing Data 6/9 Pricing Data Posted on the Drug Plan Finder	23 Submit PY2009 Pricing Data	24	25	26	27
28	29	30 Approval Deadline for June Formulary Submission				

July 2009

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1 2009 Formulary Submission Window	2 2009 Formulary Submission Window	3 2009 Formulary Submission Window	4 Independence Day
5	6 Submit PY2009 Pricing Data 6/23 Pricing Data Posted on the Drug Plan Finder	7 Submit PY2009 Pricing Data	8	9	10	11
12	13	14	15	16	17	18
19	20 Submit PY2009 Pricing Data 7/7 Pricing Data Posted on the Drug Plan Finder	21 Submit PY2009 Pricing Data	22	23	24	25
26	27	28 Approval Deadline for July Formulary Submission	29	30	31	

August 2009

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1
2	3 2009 Formulary Submission Window Submit PY2009 Pricing Data 7/21 Pricing Data Posted on the Drug Plan Finder	4 2009 Formulary Submission Window Submit PY2009 Pricing Data	5 2009 Formulary Submission Window	6	7	8
9	10	11	12	13	14	15
16	17 Submit PY2009 Pricing Data 8/4 Pricing Data Posted on the Drug Plan Finder	18 Submit PY2009 Pricing Data	19	20	21	22
23	24	25 Approval Deadline for August Formulary Submission	26	27	28	29
30	31 Submit PY2009 Pricing Data 8/18 Pricing Data Posted on the Drug Plan Finder					