

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Center for Drug and Health Plan Choice  
7500 Security Boulevard, Mail Stop C4-22-04  
Baltimore, Maryland 21244-1850



**CENTER FOR MEDICARE**

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**DATE:** October 21, 2011

**TO:** Current and Future Medicare Advantage Organizations and Part D Sponsors

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**SUBJECT:** Release of Notice of Intent to Apply for Contract Year 2013 Medicare Advantage (Part C) and Prescription Drug Benefit (Part D) Contracts, and Related CY 2013 Application Deadlines.

CMS is pleased to announce the release of the Contract Year (CY) 2013 Notice of Intent to Apply (NOIA) Web tool and key dates for the CY 2013 Medicare Advantage (Part C) and Prescription Drug Benefit (Part D) Application cycle. As described in detail below, the first required action by sponsors to participate in this process (the Notice of Intent to Apply) is rapidly approaching. The CY 2013 application cycle key dates are as follows:

<b>CY 2013 Application Activity</b>	<b>Date</b>
Notice of Intent to Apply (NOIA) deadline to insure HPMS access	November 11, 2011
CMS sends Notice of Intent to Apply confirmation e-mails to entities meeting the November 11 NOIA deadline	November 30, 2011
CMS User ID connectivity form submissions must be received by this date to ensure user access to HPMS by January 10, 2012	December 6, 2011
CY 2013 applications posted on CMS Website	January 10, 2012
Final day to submit Notice of Intent to Apply	February 7, 2012
CY 2013 applications submission deadline	February 21, 2012

## CY 2013 Notice of Intent to Apply Requirements

The applications for CY 2013 will be paperless. Each application will be completed through the CMS Health Plan Management System (HPMS). As a result of the fully electronic submission process and restrictions on access to HPMS, initial applicants must complete a Notice of Intent to Apply and the CMS User ID connectivity form as applicable. Submitting a NOIA does not bind that organization to submit an application for CY 2013. However, without a pending contract number and completed CMS User ID connectivity form, an organization will not be able to access the appropriate modules in HPMS to complete any of the required CY 2013 applications.

### Notice of Intent to Apply Submission Process

The CY 2013 NOIA should be completed by **5 p.m. Eastern Time on November 11, 2011**. CMS will continue to process NOIAs between November 11, 2011 and February 7, 2012. Please note that CMS cannot guarantee that applicants submitting a NOIA after November 11 will have access to the online application when released in January 2012; therefore, those entities may not have the full period of time to complete their applications.

CMS will send confirmation emails to organizations once the CY 2013 NOIAs are processed, but no later than **November 30, 2011** for those entities who submit a NOIA by November 11, 2011.

CMS will only accept NOIAs submitted electronically through its on-line Web tool. Organizations must use the following link to access and complete the NOIA Web tool:

<https://vovici.com/wsb.dll/s/11dc4g4cb3d>

A hardcopy of the Web tool form is attached to this memo as a reference for applying organizations. The attachment identifies the questions an organization must complete to correctly request a CY 2013 pending contract number for an initial application and/or ensure appropriate access to a service area expansion application for an existing organization. The assignment of contract numbers is done according to CMS rules. Organizations' requests for separate contract numbers will only be accommodated when an existing contract is not allowed to be expanded based on CMS policy.

### **Entities Must Submit a NOIA for CY 2013 if any of the following actions are planned:**

- Offering a new product type (requesting a new contract for CY 2013)
- Transitioning an existing non- or partial network PFFS to a full network PFFS (a new contract will be offered)
- Expanding the service area of an existing contract (SAE)
- Expanding only an employer-only service area
- Adding prescription drug benefits to an existing contract for the first time
- Adding EGWP market to an existing individual-only service area for the first time
- Adding individual market to an existing EGWP-only service area for the first time
- Adding, expanding the service area, or renewing a SNP

Note: NOIAs are non-binding

Every entity applying for CY 2013 will need to complete the first 5 questions of the Web tool. Depending on how an entity answers these questions, the Web tool will automatically direct the applicant to the appropriate questions.

An organization must complete a separate NOIA for each new initial product and/or service area expansion it is seeking to offer for the CY 2013 contract year. Please also note the following:

- P.O. Boxes will not be accepted as a valid address for application purposes. Processing will be delayed for all NOIAs that contain a P.O. Box for the mailing address of the legal entity while CMS attempts to collect the street address for the legal entity.
- Existing coordinated care plan sponsors seeking to add, expand, or renew a SNP must complete the Notice of Intent to Apply.
- All Employer/Union-Only Group Waiver Plan (Direct Contract or “Employer Series”) service area expansions will follow the same application timeline as the individual market applications.
- Current Private Fee-for-Service (PFFS) contractors with service areas transitioning to network-based coverage starting in CY 2013 must file a single Notice of Intent to Apply for those areas that are transitioning. The network-based PFFS areas will be assessed under a new contract number. Non-network PFFS plans (those plans that cover county(ies) not identified by CMS as being a county that must have network-based PFFS coverage) may continue to operate under their current contract numbers.

#### CMS User IDs

All initial applicants and existing Medicare contractors will need CMS User IDs and passwords to access HPMS. After submitted the NOIA is submitted, initial applicants will receive a confirmation email with the new contract ID and instructions for applying for a CMS User ID.

Completed CMS User ID forms should be returned to CMS no later than **December 6, 2011** to ensure timely processing. Be sure to identify where indicated all contract numbers which must be affiliated with the CMS User ID. Note that you will not be able to submit this form until CMS provides you with a pending contract number. Return the completed CMS User ID form to:

CMS  
7500 Security Blvd  
Mailstop C4-18-13  
Baltimore, MD 21244  
Attn: Lori Robinson

If you are an existing Medicare contractor/HPMS user and would like to connect a pending contract number to current CMS User IDs, include the following information in an email to [hpms\\_access@cms.hhs.gov](mailto:hpms_access@cms.hhs.gov):

1. User Name(s)
2. CMS User ID(s)
3. Current Contract Number(s)
4. Pending Contract Number(s)

### CY 2013 Applications

The CY 2013 Medicare Advantage, Part D Prescription Drug Benefit, and Employer/Union-Only Group Waiver Plan (Direct Contract or “Employer Series”) Initial and Service Area Expansion, and Special Needs Plan Applications will be posted on the CMS Webpage and in CMS’ Health Plan Management System (HPMS) by **January 10, 2012** and will be due no later than **11:59 P.M. Eastern Time on February 21, 2012**.

If you have questions about the CY 2013 Notice of Intent to Apply process, please contact Linda Anders at 410-786-0459 or [Linda.Anders@cms.hhs.gov](mailto:Linda.Anders@cms.hhs.gov)

If you have questions related to HPMS user access, please send an email to [hpms\\_access@cms.hhs.gov](mailto:hpms_access@cms.hhs.gov).

**ATTACHMENT A: Notice of Intent to Apply for CY 2013 Medicare Advantage (Part C)  
and Prescription Drug Benefit (Part D) Contracts**

**To ensure clear and timely communication with CMS, all entities applying to offer new or expanding CY 2013 products must notify CMS of their intent to apply to offer such a plan by completing this Notice of Intent to Apply (NOIA) form online at <https://vovici.com/wsb.dll/s/11dc4g4cb3d>.**

**1) Applicant Organization's Legal Entity Information.**

***NOTE: Organizations must provide street addresses for the location of the Legal Entity. PO Boxes are not acceptable and CMS will only process NOIAs with a street address.***

Legal Entity Name: \_\_\_\_\_  
Street Address 1: \_\_\_\_\_  
Street Address 2: \_\_\_\_\_  
City, State ZIP: \_\_\_\_\_

**2) Select Parent Organization\* from the pull down list provided in Web tool.**

\* CMS considers a parent organization to be the legal entity that owns a controlling interest in a contracting organization. More specifically, for Part C and D reporting purposes, the parent organization is the "ultimate" parent, or the top entity in a hierarchy (which may include other parent organizations) of subsidiary organizations which is not itself a subsidiary of any corporation.

**3) The legal entity identified above has 2012 contracts (with or without EGWPs or SNPs) with CMS as follows (check all that apply):**

- ☐ MA-PD HMO/HMOPOS
- ☐ MA-PD Local PPO (LPPO)
- ☐ MA-PD Regional PPO (RPPO)
- ☐ MA-PD PSO
- ☐ MA-PD PFFS (with Part D)
- ☐ Medicare Advantage Only - PFFS
- ☐ Medicare Advantage Only – MSA
- ☐ 1876 Cost Plan with Part D
- ☐ 1876 Cost Plan no Part D
- ☐ PDP
- ☐ Employer/Union Direct PFFS no Part D
- ☐ Employer/Union Direct PFFS with Part D
- ☐ Employer Direct MA-PD LPPO
- ☐ Employer Direct PDP
- ☐ Not Applicable - Legal Entity does not hold a 2012 Part C or Part D contract with CMS

**4) CY 2013 Application Contact Information.**

Salutation: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Street Address 1: \_\_\_\_\_  
Street Address 2: \_\_\_\_\_  
City, State ZIP: \_\_\_\_\_  
Legal Entity Name: \_\_\_\_\_  
Street Address 1: \_\_\_\_\_  
Street Address 2: \_\_\_\_\_  
City, State ZIP: \_\_\_\_\_

**5) Select the type of NEW Medicare contract application for which your organization will apply. Check ONLY one; organizations must submit separate Notices of Intent to Apply for each CY 2013 contract application type.**

**A legal entity will not be assigned a new contract ID for products for which it currently contracts with CMS. In those cases, CMS requests that the legal entity expand their existing contract to meet their business needs (select "Not Applicable" below). The exception to this is that non-network PFFS transitioning to full network will be assigned a new contract ID.**

- ☐ MA-PD HMO/HMOPOS
- ☐ MA-PD Local PPO
- ☐ MA-PD Regional PPO
- ☐ MA-PD PSO
- ☐ MA-PD PFFS (with Part D)
- ☐ Medicare Advantage Only – PFFS
- ☐ Medicare Advantage Only – MSA
- ☐ PDP
- ☐ Employer/Union Direct Contract PFFS no Part D
- ☐ Employer/Union Direct Contract PFFS with Part D
- ☐ Employer/Union Direct Contract MA-PD LPPO
- ☐ Employer/Union Direct Contract PDP
- ☐ Not Applicable - a NEW CY 2013 product contract is not being sought, rather organization will expand an existing contract

**6) [Complete only if you selected PFFS in both questions 3 & 5] Are you transitioning some or all of an existing non-network or partial network PFFS contract to a FULL network PFFS as a result of the MIPPA regulatory requirements?**

- ☐ Yes
- ☐ No

**7) [Complete only if answered “PFFS” in question 5 and “No” in question 6] Indicate the network structure your organization intends to offer under this contract.**

- ☐ Full Medical Network
- ☐ Partial Medical Network
- ☐ No Medical Network

**8) [Complete only if you answered PFFS or a CCP product in question 5] Is this applicant organized as a religious fraternal organization?**

- ☐ Yes
- ☐ No

**9) [Complete only if you answered “Not Applicable” in question 5 and are not being assigned a new contract ID for CY 2013] Select all activity planned for this CY 2013 application:**

**(Check all that apply)**

- ☐ Service Area Expansion - at the contract level
- ☐ Expanding an Employer-Only Service Area
- ☐ Adding or expanding a SNP to an existing CCP contract
- ☐ Adding Part D benefits for the first time to an existing contract
- ☐ Adding Employer Group Waiver (EGWP) for first time to an existing contract
- ☐ Adding individual market to an existing EGWP-only contract

**10) [Skip only if you answered Employer/Union Direct in questions 5 or 9] Indicate the market type your organization intends to offer under this contract in CY 2013.**

- ☐ Individual Market Only
- ☐ Individual Market & Employer/Union-Only Group Waiver
- ☐ Employer/Union-Only Group Waiver Plan

**11) [Complete only if you checked adding or expanding a SNP in question 9] What SNP application(s) will your organization submit for CY 2013?**

**(Check all that apply)**

- ☐ Initial SNP application
- ☐ Renewal SNP/No service area expansion -- an existing SNP applying for reapproval by NCQA
- ☐ Service Area Expansion of an existing SNP

**12) [Complete only if you answered “Not Applicable” in question 5 and are not being assigned a new contract ID for CY 2013] Provide the existing contract number for CY 2013 expansion application. The expansion application could be for any of the following reasons: Service Area Expansion, adding/expanding an EGWP, adding Part D, or adding/expanding a SNP.** \_\_\_\_\_

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**NOTE: Once you click "Submit 'Notice of Intent to Apply' Responses Now" you will not be able to return to this specific CY 2013 Notice of Intent to Apply.**

**If your organization has additional Notices of Intent to Apply (for new product types or service area expansions under existing contracts, including adding Part D drug benefits, SNPs, or employer group waiver plans), you must complete one Notice of Intent to Apply for each application.**

**If you need to submit notices for additional CY 2013 applications, after clicking the "Submit Notice of Intent to Apply" button, return to the NOIA online form by following the link in the memo announcing the NOIA, or copy and paste this link in your browser:**

**<https://vovici.com/wsb.dll/s/11dc4g4cb3d>**