DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

DATE: October 7, 2024

TO: All Medicare Advantage, Prescription Drug Plan, Cost, PACE, and Demonstration
                 Organizations Systems Staff

FROM: Jennifer R. Shapiro, Director, Medicare Plan Payment Group
                 Center for Medicare

                 Cathy Carter, Director, Enterprise Systems Solutions Group
                 Office of Information Technology

SUBJECT: Announcement of the MARx Software Release

This letter provides detailed information regarding the planned release of systems changes
scheduled for the Medicare Advantage and Prescription Drug system (MARx) in October and
December 2024. The updates described in this communication will be included in the October
2024 Plan Communications User Guide (PCUG). Yellow highlighting in this memo indicates
changes that will be updated in the PCUG with this software release.

This software release will include the following system changes consistent with the provisions of the
Inflation Reduction Act of 2022 (IRA) (P.L. 117-169), that are effective January 1, 2025 in the Part D
program:

1. **Medicare Prescription Payment Plan Data Collection in MARx (October)**
2. **Manufacturer Discount Program (MDP) Prospective Payment in MARx (December)**

Plans are encouraged to contact the MAPD Help Desk for any issues encountered during the
systems update process. Please direct any questions or concerns to the MAPD Help Desk at 1-800-
927-8069 or e-mail at mapdhelp@cms.hhs.gov.

1. **Implementation of Medicare Prescription Payment Plan Data Collection**
Beginning in CY 2025, Part D sponsors are required to provide all Part D enrollees with the
option to pay their out-of-pocket (OOP) prescription drug costs in monthly amounts over the
course of the plan year instead of paying OOP costs at the point of sale. As stated in the
February 29, 2024, HPMS Memo titled "Medicare Prescription Payment Plan: Final Part One
Guidance on Select Topics, Implementation of Section 1860D-2 of the Social Security Act for
2025, and Response to Relevant Comments" and described in the Information Collection

Request (ICR) package "MARx Medicare Prescription Payment Plan Beneficiary-Level Data Elements" (OMB control number 0938-1468), to effectively monitor the program, Part D plan sponsors will be responsible for reporting data elements related to their Medicare Prescription Payment Plan, both at the beneficiary-level and contract-Plan Benefit Package (PBP) levels beginning in Contract Year (CY) 2025. Specifically, Part D sponsors are required to submit beneficiary-level data elements into the MARx system via a MARx Batch Input Transaction Data File.

CMS uses the acronym MPPP in this technical guidance only for operational reporting purposes . Part D sponsors' external-facing materials should continue to use the name "Medicare Prescription Payment Plan," as stated in the final part one guidance.

Plan sponsors will be able to submit Medicare Prescription Payment Plan (MPPP) batch input transactions with MPPP election effective dates of 01/01/2025 and later beginning with the Annual Enrollment Period on 10/15/2024. There is no limit to how often or how many MPPP transactions plan sponsors can submit and we encourage daily submission of the MPPP data. The MPPP batch input transaction will have its own record format and require the use of a Transaction Code (TC) 95 (Figure 1). When processing MPPP batch input transactions, MARx will generate Transaction Reply Codes (TRCs) that are specific to the MPPP transactions (Figure 2). The Daily Transaction Reply Report (DTRR) layout will not change, but some existing field definitions will be updated for MPPP (Figure 3). Finally, a new MARx User Interface screen will be added to display beneficiary level MPPP information (Figure 4 and Figure 5).

Figure 1: MARx Batch Input Detail - MPPP Transaction (TC 95)

MARx Batch Input Detail – MPPP Transaction – TC 95					
Item	Field	Size	Position	Validation (Edits and TRCs for the transaction fields)	Is Item Required, Optional, or N/A
1.	Beneficiary Identifier	12	1 - 12	**Reject** the transaction with TRC007 if the following criteria is not met: 1. Format for MBI is an 11-position value. The 2nd, 5th, 8th, and 9th positions are alphas. 2. String must contain NO embedded spaces. **Reject** the transaction with TRC008 if the beneficiary identifier is not found.	Required

MARx Batch Input Detail – MPPP Transaction – TC 95					
Item	Field	Size	Position	Validation (Edits and TRCs for the transaction fields)	Is Item Required, Optional, or N/A
2.	Surname	12	13 - 24	**Reject** the transaction with TRC004 if the field is blank and the First Name field is also blank.	Required
3.	First Name	7	25 - 31	**Reject** transaction with TRC004 if the field is blank and the Surname field is also blank.	Required
4.	M. Initial	1	32	N/A	Optional
5.	Gender	1	33	If the value is not "1" = male or "2" = female, do not reject the transaction, set the value to unknown ("0").	Required
6.	Birth Date	8	34 - 41	**Format** (YYYYMMDD) Fail the transaction with TRC257 if the date is not formatted correctly or contains an invalid month or day and there is no beneficiary match. **Reject** the transaction with TRC006 if the date is non-blank and formatted correctly, but is less than 1870, or greater than current year and there is no beneficiary match. Note: The beneficiary is considered matched if three out of four personal characteristics match (and the input MBI was found on the database.) If the beneficiary is matched the invalid or incorrect birth date is ignored.	Required
7.	Filler	1	42	N/A	N/A
8.	PBP#	3	43 - 45	**Reject** transaction with TRC 107 if PBP is not valid for the contract.	Required
9.	Filler	1	46	N/A	N/A

MARx Batch Input Detail – MPPP Transaction – TC 95					
Item	Field	Size	Position	Validation (Edits and TRCs for the transaction fields)	Is Item Required, Optional, or N/A
10.	Contract #	5	47 - 51	**Fail** the transaction with TRC003 if the field is blank or the contract does not exist. **Reject** the transaction with TRC410 if not a Part D Plan	Required
11.	Filler	8	52 - 59	N/A	N/A
12.	Transaction Code	2	60 - 61	**Fail** the transaction with TRC001 if the value is not '95'	Required
13.	Filler	2	62 - 63	N/A	N/A
14.	Effective Date of Medicare Prescription Payment Plan	8	64 - 71	**Format** (YYYYMMDD) **Fail** the transaction with TRC258 if date is blank, not formatted correctly, or contains an invalid month or day **Reject** the transaction with TRC409 if the effective date is before 1/1/2025, termination date is before the effective date, effective date and termination date are different years, or the effective date is more than the current calendar month +3 months in the future. TRC416 if the date value will result in an overlapping MPPP record	Required – Provide the actual start date of the Medicare Prescription Payment Plan
15.	Filler	3	72 - 74	N/A	N/A
16.	Update/Delete Flag (Action Indicator)	1	75	**Reject** with TRC411 if the value provided is not valid. Valid Values: "U" = Update "D" = Delete	Required
17.	Filler	2	76 - 77	N/A	N/A

MARx Batch Input Detail – MPPP Transaction – TC 95					
Item	Field	Size	Position	Validation (Edits and TRCs for the transaction fields)	Is Item Required, Optional, or N/A
18.	Termination Reason Code	2	78 - 79	01 – Voluntary 02 – Involuntary 03 – Deceased 04 – End of MPPP Year **Reject** with TRC 412 if not 01-04	Required
19.	Termination Date of Medicare Prescription Payment Plan	8	80 - 87	**Format** (YYYYMMDD) **Fail** TRC413 if date is blank, not formatted correctly, or contains an invalid month or day. **Reject** TRC416 if the date value will result in an overlapping MPPP record	Required
20.	Filler	122	88 - 209	N/A	N/A
21.	Plan Assigned Transaction Tracking ID	15	210 - 224	Optional field; Do not validate	Optional
22.	Filler	76	225 - 300	N/A	N/A

NOTE: Spaces are substituted for all fields marked as "N/A"

Figure 2: MPPP Transaction Reply Codes (TRC)

Code	Type	Title	Short Definition	Definition
409	R	Invalid MPPP Start Date or Start Date Prior to 2025	INV MPPP STRT	An MPPP transaction (TC 95) was rejected because: • The effective date of the MPPP was before 1/1/2025 • The effective date is after the termination date • The effective date and termination date are in different calendar years • The effective date is more than the current calendar month +3 months in the future **Plan Action**: Submit a 95 transaction with the corrected dates.
410	R	Invalid MPPP Contract	INVLD MPPP CTRT	An MPPP transaction (TC 95) was rejected because the submitting contract is not a Part D Plan.

Code	Type	Title	Short Definition	Definition
				Plan Action: Correct the contract number and resubmit the MPPP transaction, if appropriate.
411	R	Invalid MPPP Action Type Indicator	INVLD MPPP IND	An MPPP transaction (TC 95) was rejected because the action indicator is blank or contains an invalid value. Valid values are U (Update) or D (Delete). **Plan Action**: Correct the action indicator and resubmit the transaction, if appropriate.
412	R	Invalid Termination Reason	INVLD TRMN RSN	An MPPP transaction (TC 95) was rejected because the termination reason code is blank or contains an invalid value. Valid values are: • 01 – Voluntary • 02 – Involuntary • 03 – Deceased • 04 – End of MPPP Year **Plan Action**: Correct the action indicator and resubmit the transaction, if appropriate.
413	F	Invalid MPPP Termination Date	INV MPPP DATE	An MPPP transaction (TC 95) failed because the Termination Date is blank or because the Termination Date is either not formatted as YYYYMMDD (e.g., "Aug 1940") or is formatted correctly but contains a nonexistent month or day (e.g., "19400199") The failed transaction record is not returned in the DTRR data file. It is returned on the Batch Completion Status Summary (BCSS) data file. **Plan Action**: Correct the date(s) and resubmit the transaction, as appropriate.
414	R	MPPP no Matching Record	MPPP NOT FND	An MPPP transaction (TC 95) was rejected because the transaction attempted to delete an existing MPPP record but there is no corresponding existing record. **Plan Action:** Correct the information provided and resubmit the transaction, if appropriate.

Code	Type	Title	Short Definition	Definition
415	R	MPPP Duplicate Transaction	MPPP DUP RQST	An MPPP transaction (TC 95) was rejected because the submitted transaction contained MPPP values that matched those already on record with CMS for the specified period. Plan Action : Correct the information provided and resubmit the transaction, if appropriate.
416	R	MPPP Overlap detected	MPPP OVRLP	An MPPP transaction (TC 95) was rejected because it caused an overlap with an existing MPPP record. An overlap is defined as two records for the same beneficiary, contract/PBP, and day(s). **Plan Action:** Correct the transaction and resubmit the transaction, as appropriate.
417	A	MPPP Accepted as Submitted	MPPP ACC	An MPPP transaction (TC 95) was successfully processed. **Plan Action:** None

Figure 3: Daily Transaction Reply Report (DTRR) Updates

Item	Field	Size	Position	Description
18	Effective Date	8	63 - 70	YYYYMMDD Format; Effective date is present for all TRCs unless listed below. Field content is TRC dependent for the following: • 071 & 072 – Effective date of the hospice period • 090 – Current Calendar Month • 091 – Previously reported incorrect death date • 121, 194, & 223 – PBP enrollment effective date • 245 – Beginning date of the period for which the Plan's payments are impacted by MSP, based on the MSP start date • 280 – Beginning date of the period for which the Plan's payments are impacted by MSP, based on the MSP end date

Item	Field	Size	Position	Description
				• 293 – Enrollment End Date; last day of the month
				• 305 – New ZIP Code Start Date
				• 345 – The effective date of the attempted enrollment.
				• 346 – End date of enrollment period.
				• 347 – Start date of reenrollment period.
				• 366 – The effective date of the change in Medicaid status
				• 368 – Beginning date of the period for which the Plan's payments are impacted by MSP, based on the MSP start date
				• 409 thru 417 - Effective date of Medicare Prescription Payment Plan
				• 701 – New enrollment period start date
				• 702 – Fill-in enrollment period start date
				• 703 – Start date of cancelled enrollment period
				• 704 – Start date of enrollment period cancelled for PBP correction
				• 705 – Start date of enrollment period for corrected PBP
				• 706 – Start date of enrollment period cancelled for segment correction
				• 707 – Start date of enrollment period for corrected segment
				• 708 – Enrollment period end date assigned to existing opened ended enrollment
				• 709 & 710 – New start date resulting from update
				• 711 & 712 – New end date resulting from update
				• 713 – "00000000" – End date removed; original end date is in field 24
24	Positions 85 – 96 are dependent upon the value of the TRANSACTION REPLY CODE. There are spaces for all codes except where indicated below.			
gg	MPPP Termination Reason Code	2	85 - 86	01 – Voluntary 02 – Involuntary 03 – Deceased 04 – End of MPPP Year

Item	Field	Size	Position	Description
				Present only when Transaction Type Code is 95
45	End Date	8	178 - 185	YYYYMMDD format End Date associated with the TRC when applicable: • TRCs that report a Premium Payment Option (PPO) value that is not open-ended • MSP TRCs 245, 280, and 368 - contains the MSP period end date, if available • If dialysis period is reported retroactively, TRC 135 will report dialysis end date in this field. • TRCs that report a MPPP Termination Date (TRC 409 thru 417)

Figure 4: Status Activity (M256) Screen

The Status Activity (M256) screen will be updated with a new section for MPPP. A plan user can click the 'View' link to launch the Status Detail: Medicare Prescription Payment Plan (M257) (Figure 5).

Figure 5: Status Detail: Medicare Prescription Payment Plan (M257) Screen

This screen will display all valid beneficiary MPPP records for Contracts the plan user has access to in MARx. The user can click the 'View Audit' link to see audited records.

Add/Update/Delete MPPP Records in MARx

Plan sponsors are required to add, update, or delete MPPP records in MARx via the TC 95 batch input transaction for all enrollees that opt-in to the MPPP. Below are the criteria for submitting the batch input transaction to MARx.

- Add New MPPP Record:

  To add a new MPPP record, the record must be submitted using Action Indicator 'U' in Field 16, and other required field values of the batch input transaction. A newly added MPPP record will be processed successfully as long as the MPPP Effective Date and Termination Date do not overlap with an existing MPPP record for the same MBI/Contract/PBP, and the Effective Date is not earlier than 01/01/2025 or later than the current calendar month +3 (CCM+3). Unless otherwise specified at the time of beneficiary election into a MPPP, the plan should submit a MPPP Termination Date of December 31st of the MPPP year, and the MPPP Termination Reason Code 04 (End of MPPP Year).

- Update Termination Date and/or Termination Reason Code for Existing MPPP Record:

  To update the Termination Date (Field 19) and/or Termination Reason Code (Field 18) for an existing MPPP record, the plan sponsor must submit a batch input transaction using Action Indicator 'U' in Field 16, and the updated Termination Date and/or Termination Reason Code. The following field values on the batch input transaction must match the existing MPPP record in MARx:

Item	Field
1	Beneficiary Identifier
2	Surname
3	First Name
5	Gender Code
6	Birth Date
8	PBP#
10	Contract #
14	Effective Date of Medicare Prescription Payment Plan

- Update Effective Date for existing MPPP Record
  To update the Effective Date for an existing MPPP record in MARx, the plan sponsor must first submit a batch input transaction to delete the existing MPPP record (follow instructions on Delete below), then submit a second transaction to add a new MPPP record containing the updated MPPP Effective Date (follow instructions on Add above).

- Delete Existing MPPP record
  To delete (audit off) an existing MPPP record, the plan sponsor must submit a batch input transaction using Action Indicator 'D' in Field 16, and the following field values on the batch input transaction must match the existing MPPP record in MARx:

Item	Field
1	Beneficiary Identifier
2	Surname
3	First Name
5	Gender Code
6	Birth Date
8	PBP#
10	Contract #
14	Effective Date of Medicare Prescription Payment Plan
18	Termination Reason Code
19	Termination Date of Medicare Prescription Payment Plan

- MPPP transactions will be rejected when any of the following conditions exist:
  - Missing data in any of the Batch Input Detail TC 95 required fields
  - Effective Date is earlier than 01/01/2025
  - Effective Date overlaps with an existing MPPP record in MARx
  - Effective Date is more than 3 months in the future from the date the transaction is submitted (Current Calendar Month +3, or CCM+3)
  - Termination Date is earlier than the Effective Date
  - Termination Date is later than December 31st of the MPPP Effective Date year

2. **Manufacturer Discount Program (MDP) Prospective Payment in MARx**

As stated in the November 17, 2023 HPMS Memo titled "Medicare Part D Manufacturer Discount Program Final Guidance," the Medicare Part D Manufacturer Discount Program (MDP) was enacted into law in section 11201 of the Inflation Reduction Act of 2022, Public L. 117-169 (IRA) and codified in sections 1860D-14C and 1860D-43 of the Social Security Act (the Act). Section 11201(f) of the IRA directs CMS to implement the MDP using program instruction or other forms of program guidance for 2025 and 2026.

Because the administrative requirements of the MDP largely mirror those for the Coverage Gap Discount Program (CGDP), CMS is implementing the program in a similar manner. Although

CGDP does not apply to PACE organizations or beneficiaries with Low Income Subsidy (LIS) status, the MDP prospective payment will be paid to PACE organizations and on behalf of LIS beneficiaries.

To ensure that Part D sponsors have the funds available to reimburse network pharmacies within the required timeframe, CMS will provide monthly prospective MDP payments to sponsors. As with the CGDP, CMS will calculate these prospective payments based on the projections in each plan's bid and current enrollment. CMS will continue to estimate the per member per month cost of the manufacturer discounts for each plan based on a percentage of the cost assumptions submitted with plan bids under 42 CFR § 423.265 and negotiated and approved under 42 CFR § 423.272, adjusted as necessary to account for applicable drug costs for applicable beneficiaries.

The prospective MDP payment will be included in the monthly beneficiary level payment calculated by MARx. The beneficiary level detail MDP payments will be reflected in Field 38 (Part D Manufacturer Discount Program Amount) on each Part D sponsor's Monthly Membership Detail Report (MMR) (Figure 6). The Monthly Membership Summary Report (MMSR) and Data File will be updated to include the total contract level MDP payment amount, and the MDP amount will be included in the Total Part D payment (Figure 7, Figure 8, and Figure 9). The beneficiary level MDP amount with be displayed in the MARx UI in the Payment/Adjustment Detail (M215) screen (Figure 10).

Part D sponsors will receive the prospective MDP payments on the first of each month with other Part D prospective payments. The first prospective MDP payment will be included in the January 2025 plan payment scheduled for receipt on January 02, 2025. The January 2025 MMR, MMR Summary, and Plan Payment Report (PPR), scheduled for receipt on December 19, 2024, will include MDP payment amounts.

CMS will make the prospective MDP payment available to Part D sponsors in order for sponsors to advance manufacturer discounts at the POS. When manufacturers pay their quarterly invoices, sponsors have a duplicate payment from two sources, the participating manufacturer and CMS, for the same expense. After receiving payment from the manufacturer, the Part D sponsor no longer needs the cash flow advance from the prospective MDP payment. Therefore, CMS will offset the next monthly prospective MDP payment, with the offset amount being equal to the total invoiced manufacturer discount amount in the previous quarter. The first MDP invoice offsets are expected to be included in June 2025 payment. The MDP invoice offset adjustment amount will be populated on Table Number 4 in the Plan Payment Report and in Field 7 of the Special Adjustment Record in the Plan Payment Report data file with Adjustment Type "MDP-Manufacturer Discount Program Invoice" (Figure 11).

Note regarding Employer Group Waiver Plans (EGWPs): EGWPs do not submit Part D bids; therefore, CMS will not have the information necessary to estimate the cost of applicable discounts for these plans and will not provide prospective Discount Program payments to EGWPs. However, participating manufacturers are required to pay discounts on behalf of applicable beneficiaries enrolled in an EGWP, and those discounts will be invoiced to the manufacturer for reimbursement to the EGWP through the standard invoicing process.

Sunsetting Coverage Gap Discount Program (CGDP)

As stated in the November 17, 2023 HPMS Memo titled *Medicare Part D Manufacturer Discount Program Final Guidance*, the IRA adds subsection (h) to section 1860D-14A of the Act, which sunsets the Coverage Gap Discount Program as of January 1, 2025. It also terminates all Coverage Gap Discount Program Agreements as of January 1, 2025, but stipulates that all responsibilities and duties under such agreements continue to apply with respect to applicable drugs under the Coverage Gap Discount Program dispensed prior to January 1, 2025. Prospective CGDP payments will cease with the January 2025 payment. MARx retroactive adjustments to 2024 CGDP will cease with the February 2025 payment. Until further notice, reports and data file layouts such as the MMR and PPR will not change based on the cessation of CGDP prospective payments and adjustments.

Figure 6: Monthly Membership Detail Data File

The MMR will be updated to include the beneficiary level MDP amount in Field 38 (Part D Manufacturer Discount Program Amount). There will be no change to the MMR record length because Field 38 was previously filler.

Item	Field	Length	Position	Description
38	Part D Manufacturer Discount Program Amount	8	163 - 170	Amount of the Manufacturer Discount Program Amount included in the Part D payment (-9999.99)

Figure 7: Monthly Membership Summary Data File

There will be no change to the layout of the Monthly Membership Summary Data File. However, it will be updated to include total MDP in Field 5 (Record Description).

Item	Field	Size	Position	Description
5	Record Description	10	22 - 31	This field is populated with a short description of the type of data reported in the record.

Figure 8: Monthly Membership Summary Data File Record Description Values (Field 5)

A new Record Description "MDP" has been added for Field 5 of the Monthly Membership Summary Data File.

Record Name	Description
TOTAL PAYM	Total Payment Amount – Reported for Pt C & Pt D
ESRD	End Stage Renal Disease – Reported for Pt C only
HOSPICE	Hospice – Reported for Pt C only (includes VBID Hospice Demonstration)
MCAID	Medicaid – Reported for Pt C only
OTHER	Reported for Pt C only
WA	Working Aged – Reported for Pt C only
OUTOFAREA	Out of Area – Reported for Pt C only
DIR SUBSDY	Direct Subsidy – Reported for Pt D only

LIS CSTSHR	Low Income Subsidy Cost Sharing – Reported for Pt D only
EST REINS	Reinsurance – Reported for Pt D only
PACE PREM	Pace Premium – Reported for Pt D only
PACE CSHR	Pace Cost Sharing – Reported for Pt D only
PTC PREM	Part C Premium – Reported for Pt C only
RBT AB CSR	Part A/B Cost Sharing Reduction Rebate – Reported for Pt C only
RBT AB MSB	Part A/B Mandatory Supplemental Benefits Rebate – Reported for Pt C only
RBT D PRRE	Part D Basic Premium Reduction Rebate – Reported for Pt C only
RBT D SUBE	Part D Supplemental Benefits Rebate – Reported for Pt C only
PTB PRM RE	Part B Premium Reduction – Reported for Pt C only
B PRM RE A	Part B Premium Reduction for Part A – Reported for Pt C only
B PRM RE D	Part B Premium Reduction for Part D – Reported for Pt C only
BSF MNTHLY	Benefit Stabilization Fund Monthly Contribution – Reported for Pt C only
AD MSP	Aged Disabled Medicare Secondary Payer Reduction –Reported for Pt C only
ESRD MSP	End Stage Renal Disease Medicare Secondary Payer – Reported for Pt C only
CGD	Coverage Gap Discount – Reported for Pt D only
MTM ADD-ON	Medication Therapy Management – Reported for Pt D only
LIPS	Low Income Premium Subsidy – Reported for Pt D only
MDP	Manufacturer Discount Program – Reported for Pt D only

Figure 9: Monthly Membership Summary Report

The total MDP payment amount, abbreviated as "MANU DISC PRO" will be added to the Monthly Membership Summary Report.

```
RUN DATE:yyyymmdd                      MONTHLY MEMBERSHIP SUMMARY REPORT (PAGE 1 OF 2)
PAYMENT MONTH:yyyymm                    PLAN: H9999 PBP(mmm) SEG(nnn) Name-of-Provider-Here
CURRENT PAYMENTS
PART A ---------- COUNTS ----- TOTAL MONEY    PART B -------- COUNTS ----- TOTAL MONEY   PART D ---------- COUNTS ----- TOTAL MONEY
HOSPICE         z,zzz,zz9 $$,$$$,$$$,$$9.99   HOSPICE         z,zzz,zz9 $$,$$$,$$$,$$9.99
ESRD            z,zzz,zz9 $$,$$$,$$$,$$9.99   ESRD            z,zzz,zz9 $$,$$$,$$$,$$9.99
WA              z,zzz,zz9 $$,$$$,$$$,$$9.99   WA              z,zzz,zz9 $$,$$$,$$$,$$9.99
INST            z,zzz,zz9 $$,$$$,$$$,$$9.99   INST            z,zzz,zz9 $$,$$$,$$$,$$9.99
NHC             z,zzz,zz9 $$,$$$,$$$,$$9.99   NHC             z,zzz,zz9 $$,$$$,$$$,$$9.99
MCAID           z,zzz,zz9 $$,$$$,$$$,$$9.99   MCAID           z,zzz,zz9 $$,$$$,$$$,$$9.99   DIR SUBSDY     z,zzz,zz9 $$$,$$$,$$$,$$9.99
PART C PREMIUM  z,zzz,zz9 $$,$$$,$$$,$$9.99   PART C PREMIUM  z,zzz,zz9 $$,$$$,$$$,$$9.99   LIS COST SHR   z,zzz,zz9 $$$,$$$,$$$,$$9.99
A/B COST SHR    z,zzz,zz9 $$,$$$,$$$,$$9.99   A/B COST SHR    z,zzz,zz9 $$,$$$,$$$,$$9.99   ESTIMATD REINS z,zzz,zz9 $$$,$$$,$$$,$$9.99
A/B MAN SUP BN  z,zzz,zz9 $$,$$$,$$$,$$9.99   A/B MAN SUP BN  z,zzz,zz9 $$,$$$,$$$,$$9.99   PACE PRM ADDON z,zzz,zz9 $$$,$$$,$$$,$$9.99
D BAS PRM REDU  z,zzz,zz9 $$,$$$,$$$,$$9.99   D BAS PRM REDU  z,zzz,zz9 $$,$$$,$$$,$$9.99   PACE CSR ADDON z,zzz,zz9 $$$,$$$,$$$,$$9.99
D SUPP BENFITS  z,zzz,zz9 $$,$$$,$$$,$$9.99   D SUPP BENFITS  z,zzz,zz9 $$,$$$,$$$,$$9.99   COV GAP DISC   z,zzz,zz9 $$$,$$$,$$$,$$9.99
B BAS PRM REDU  z,zzz,zz9 $$,$$$,$$$,$$9.99   B BAS PRM REDU  z,zzz,zz9 $$,$$$,$$$,$$9.99   MTM ADDON      z,zzz,zz9 $$$,$$$,$$$,$$9.99
A/D MSP REDU    z,zzz,zz9 $$,$$$,$$$,$$9.99   A/D MSP REDU    z,zzz,zz9 $$,$$$,$$$,$$9.99   LIPS           z,zzz,zz9 $$$,$$$,$$$,SS9.99
ESRD MSP REDU   z,zzz,zz9 $$,$$$,$$$,$$9.99   ESRD MSP REDU   z,zzz,zz9 $$,$$$,$$$,$$9.99   MANU DISC PRO  z,zzz,zz9 $$$,$$$,$$$,$$9.99
MEMBERS         z,zzz,zz9 $$,$$$,$$$,$$9.99   MEMBERS         z,zzz,zz9 $$,$$$,$$$,$$9.99   MEMBERS        z,zzz,zz9 $$$,$$$,$$$,$$9.99
MONTHS          z,zzz,zz9                     MONTHS          z,zzz,zz9                     MONTHS         z,zzz,zz9
AVERAGE                   $$,$$$,$$$,$$9.99   AVERAGE                   $$,$$$,$$$,$$9.99   AVERAGE                  $$$,$$$,$$$,$$9.99
OUT OF AREA     z,zzz,zz9


B PRM REDU - A            $$,$$$,$$$,$$9.99   B PRM REDU - A            $$,$$$,$$$,$$9.99
B PRM REDU - D            $$,$$$,$$$,$$9.99   B PRM REDU - D            $$,$$$,$$$,$$9.99
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Figure 10: MARx User Interface: Payment/Adjustment Detail (M215) Screen

The Part D Manufacturer Discount will be added to "Payment/Adjustment Detail (M215)" Screen under Part D Payments section, which is labeled as "PART D MANUFACTURER DISCOUNT."

MBI #:xxxxxxxxxx
BENEFICIARY ADDRESS
CITY NAME, ST ZIP CODE
BENEFICIARY NAME
ACTIVE
DOB: XX/XX/XXXX
Age: XX   Sex: XXXX
State: XX (XX)   County: XXXXXXXX (XXXX)

Payment/Adjustment Detail (M215)   Role: MCO REPRESENTATIVE   Date: 8/30/2024   [Close] [Print] [Help...]

Select a chevron (>>) to expand the row for additional details on payments and adjustments

Export to Excel

Payments/Adjustment Table - Contract# HXXXX

				Payment/Adjustments					
Payment Date	Description	Type	Adjustment Code	Part A	Part B	Part D	Total	Paid for Month	Paid Flag Cleanup ID
≫ 07/01/2024	TOTAL	PAYMENT		$239.66	$357.40	$538.28	$1,135.34		

Part C Payments

Description	Type	Adjustment Code	Part A	Part B	Total	Paid for Month	Paid Flag	Cleanup ID
VBID HOSPICE DEMO	PAYMENT	-		$0.00	$0.00	$0.00	07/01/2024	-
COST PMPM RATE	PAYMENT	-		$0.00	$0.00	$0.00	07/01/2024	-
PART C RISK ADJUSTED RATE (CALC CD 3)	PAYMENT COMPONENT	-		$387.31	$577.59	$964.90	07/01/2024	-
≫ RISK ADJUSTED PAYMENT AMOUNT	PAYMENT COMPONENT	-		$138.27	$206.20	$344.47	07/01/2024	Y
PART C PREMIUM	PAYMENT	-		$0.00	$0.00	$0.00	07/01/2024	Y
PART A/B COST SHARING REDUCTION	PAYMENT	-		$0.40	$0.60	$1.00	07/01/2024	Y
PART A/B MANDATORY SUPP BENEFITS	PAYMENT	-		$100.99	$150.60	$251.59	07/01/2024	Y
PART D SUPP BENEFITS	PAYMENT	-		$0.00	$0.00	$0.00	07/01/2024	Y
PART B PREMIUM REDUCTION	PAYMENT	-		$0.00	$0.00	$0.00	07/01/2024	-
PART D BASIC PREMIUM REDUCTION	PAYMENT	-		$0.00	$0.00	$0.00	07/01/2024	-
MSA MONTHLY DEPOSIT	PAYMENT COMPONENT	-		$0.00	$0.00	$0.00	07/01/2024	-
AGED/DISABLED MSP REDUCTION	PAYMENT	-		$0.00	$0.00	$0.00	07/01/2024	-
ESRD MSP REDUCTION	PAYMENT	-		$0.00	$0.00	$0.00	07/01/2024	-
TOTAL PT C PAYMENT	**PAYMENT**	-		$239.66	$357.40	$597.06	07/01/2024	Y

Part D Payments

Description	Type	Adjustment Code	Part D Total	Paid for Month	Paid Flag	Cleanup ID
POS DIRECT SUBSIDY (LINET PMPM RATE)	PAYMENT	-	$0.00	07/01/2024	-	
PART D RISK ADJUSTED RATE (DIRECT SUBSIDY)	PAYMENT COMPONENT	-	$68.00	07/01/2024	-	
PART D BASIC PREMIUM	PAYMENT COMPONENT	-	($38.42)	07/01/2024	-	
≫ PART D DIRECT SUBSIDY	PAYMENT	-	$1.84	07/01/2024	Y	
PART D LIP	PAYMENT	-	$38.40	07/01/2024	Y	
PART D COST SHARING	PAYMENT	-	$242.95	07/01/2024	Y	
PART D BASIC PREMIUM REDUCTION REBATE	PAYMENT	-	$0.00	07/01/2024	Y	
PART D REINSURANCE	PAYMENT	-	$255.09	07/01/2024	Y	
PART D COVERAGE GAP DISCOUNT	PAYMENT	-	$0.00	07/01/2024	-	
PART D MANUFACTCURER DISCOUNT	PAYMENT	-	$0.00	07/01/2024	-	
PACE PREMIUM ADD-ON	PAYMENT	-	$0.00	07/01/2024	-	
PACE COST SHARING ADD-ON	PAYMENT	-	$0.00	07/01/2024	-	
PTD MTM PMPM ADD-ON	PAYMENT	-	$0.00	07/01/2024	-	
TOTAL PT D PAYMENT	**PAYMENT**	-	$538.28	07/01/2024	Y	

Figure 11: Plan Payment Report (PPR)

There will be no change to the layout of the PPR. However, the MDP Quarterly Invoice Offset amount will be included in the Table Number 4 of the Plan Payment Report, and on the Special Adjustments Record in Field 7 of the Plan Payment Report data file.

PPR, Table Number 4:

```
                                    CMS MONTHLY PLAN PAYMENT REPORT
PLAN NUMBER    : XXXX
                                                                              PAGE:  4/5
PLAN NAME      : XXXX XXXXX XXXXXXXX
PAYMENT MONTH : 09/2024
RUN DATE       : 08/21/2024
REPORT SECTION: SPECIAL ADJUSTMENTS
TABLE NUMBER  : 4
DOC ID    DESCRIPTION                 SOURCE TYPE PAYMENT        PART A      PART B PART D/HITECH   NET PAYMENT
                                                  CATEGORY
2024-0061 Sequestration Adjustment
                                      DPO   SEQ CAPITATED  -207,954.55 -309,288.70   -16,590.98   -533,834.23
                                                  PREMIUM C       0.00       0.00                       0.00
                                                  PREMIUM D                              0.00          0.00
                                                  LIS                                    0.00          0.00
                                                  HTC                                    0.00          0.00
2024-0062 MONTHLY QUALITY WITHHOLD ADJUST
                                      DPO   MQW CAPITATED  -412,433.70 -614,599.83        0.00 -1,027,033.53
                                                  PREMIUM C       0.00       0.00                       0.00
                                                  PREMIUM D                              0.00          0.00
                                                  LIS                                    0.00          0.00
                                                  HTC                                    0.00          0.00
 TOTAL                                                    -620,388.25 -923,888.53   -16,590.98 -1,560,867.76
-------------
ADV = Advance Payment to Plan          CGD = Coverage Gap Discount Invoice
CMP = Civil Monetary Penalty           CST = Cost Plan Adjustment
EXT = External Payment From Plan       HTC = HiTech Incentive Payment
HTS = HiTech Sequestration             MLR = Medical Loss Ratio
MQW = MMP Quality Withhold             MTM = Medical Therapy Management Payment Adjustment
OTH = Other Non-specific Adjustment    OVP = Overpayment
PBK = Payback of Advance Payment to Plan  PRS = Annual Part D Reconciliation
PTD = Part D Risk Adjustment           QWP = Quality Withhold Repayment
RAC = Recovery Audit Contract Adjustment  RSK = Risk Adjustments
SEQ = Sequestration Adjustment         STL = Termination Settlement Adjustment
UFC = Year End COB User Fee Adjustment  UFN = Year End Education User Fee Adjustment
XFR = Inter Contract Fund Transfer     MDP = Manufacturer Discount Program Invoice

            ******************************************************************
            * CMS SENSITIVE INFORMATION - REQUIRES SPECIAL HANDLING *
            ******************************************************************
```

PPR data file, Field 7:

**PPR/IPPR Special Adjustments Record**
Item	**Field**	**Size**	**Position**	**Format**	**Description**
7	Adjustment Type	3	71 – 73	CHAR	The payment component the adjustment is for. CMP = Civil Monetary Penalty. CST = Cost Plan Adjustment. PRS = Annual Part D Reconciliation. RSK = Risk Adjustment. CGD = Coverage Gap Invoice. ==MDP = Manufacturer Discount Program Invoice==. OTH = Other – default non-specific group.