



November 12, 2021

CMS Medicare Medicaid Coordination Office (MMCO)

Sharon Donovan, Director, Program Alignment Group, MMCO

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CMS Medicaid Office

John Coster, Director, Division of Pharmacy at Center for Medicaid and CHIP Services (CMCS), CMS

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CMS Medicare Office

Amy Larrick Chavez-Valdez, Director, Medicare Drug Benefit and C & D Data Group

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Re: Qualified Medicare Beneficiary (QMB) Part B Coordination of Benefit Barriers and Recommendations

Dear Ms. Donovan, Mr. Coster and Ms. Larrick:

The National Council for Prescription Drug Programs (NCPDP) is a not-for-profit, American National Standards Institute (ANSI) accredited Standards Development Organization (SDO) consisting of more than 1,700 members who are interested in electronic standardization within the pharmacy services sector of the healthcare industry. NCPDP provides a forum wherein our diverse membership can develop solutions, including ANSI-accredited standards, and guidance for promoting information exchanges related to medications, supplies, and services within the healthcare system.

For over 40 years NCPDP has been committed to furthering the electronic exchange of information between healthcare stakeholders. The NCPDP Telecommunication Standard is the standard used for eligibility, claims processing, reporting, and other functions in the pharmacy services industry as named in HIPAA. The NCPDP SCRIPT Standard, Telecommunication Standard, and the Formulary and Benefit Standard are the standards in use in electronic prescribing as named in MMA.

NCPDP appreciates this opportunity to share the recently published NCPDP white paper titled "[Qualified Medicare Beneficiary Part B Coordination of Benefit Barriers and Recommendations.](#)" The purpose of the white paper is to provide electronic data solutions to current barriers for processing claims secondary to a Medicare Part B benefit for QMB program participants that align with QMB program requirements.

Coordination of Medicare Part B with Medicaid benefits for QMB program participants is currently a fragmented process, impacting over 11 million of the most fragile patient population. The collision of real-time and non-real-time data sharing, payer specific claims processing practices and the latency in data sharing creates a significant gap in point of care transparency. These current gaps may result in QMB program participant confusion, retrospective reconciliation processes and increased administrative costs

for all stakeholders. NCPDP recommends replacing inefficient manual steps that occur too late in the process today with electronic data sharing solutions between Medicare and Medicaid plans and implementing real-time claims processing with coordination of benefits. Real-time claims processing using the NCPDP Telecommunication Standard allows the designated payers to manage the benefit, versus current processes that depend on the provider and patient to estimate how and which benefits should apply.

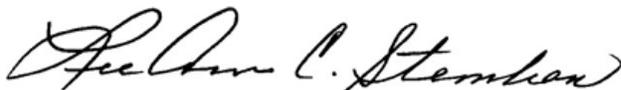
NCPDP believes the recommendations within the white paper align with CMS' efforts to streamline a wide variety of Medicare and Medicaid regulations, policies and operations and more effectively bring together the Medicare and Medicaid programs. Incorporating the NCPDP technical solutions into these CMS efforts should reduce administrative burdens, provide the tools and information needed by stakeholders and improve the beneficiary experience.

NCPDP appreciates the collaborative efforts made by the CMS Innovation Center to seek ideas on how care can be delivered and paid for in ways that will lower the total costs while improving the quality. We respectfully request the CMS MMCO, CMCS and CM-MDBG offices, to which QMB processes impact, consider these electronic solutions as the healthcare industry prioritizes system modernization for improved efficiencies and prepares for a new version of the NCPDP Telecommunication claim billing standard. NCPDP welcomes any request from CMS to coordinate a discussion to review the details of this white paper and address any questions.

For direct inquiries or questions related to this letter, please contact

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Sincerely,



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cc: State Medicaid Directors