



DEC 13 2019

Administrator
Washington, DC 20201

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Dear Ms. Wing-Heier:

Thank you for your letter on behalf of the National Association of Insurance Commissioners' Senior Issues Task Force regarding the new Medicare Plan Finder. We appreciate the opportunity to share additional information about the specific issues that you raised and to address some of the questions and concerns noted in your letter.

Over the last year, the Centers for Medicare & Medicaid Services (CMS) collaborated with Medicare beneficiary advocates, State Health Insurance Assistance Program (SHIP) counselors, and other assisters, and we used their feedback – especially where significant issues with usability were noted – to drive the decision-making for the new Plan Finder. Many of the improvements in the new Plan Finder directly address issues that these groups identified with the old Plan Finder. For example, CMS integrated information about Medicare coverage options, clarified the cost-savings benefits of Low-Income Subsidy programs, added functionality to use actual claims data to help build more accurate and personalized drug lists, streamlined the end-to-end flow for users, and ensured that mobile optimization allows for easy use on the device the user prefers – desktop, tablet, or smartphone.

We appreciate your comments regarding cost comparisons. By design and based on input from consumer tests, the cost comparisons at the start of the new Plan Finder for people who opt to answer a few questions to learn about their coverage options do not capture out-of-pocket costs. The goal of these questions and answers is simply to allow users to explore the differences between their coverage options at a high level. The subsequent review of Medicare Advantage, Part D, or Medicare supplemental insurance (Medigap) in Plan Finder provides users with detailed and personalized cost options. In consumer testing, we learned that too much detail up front, as was the case in the old Plan Finder, left users confused and often doubtful even after they selected and enrolled in coverage.

We also appreciate the importance of conveying the changes to available Medigap options starting in 2020. Within the Medigap Plan search and in our print publications on Medicare.gov, we address the updates to Medigap in several ways. Within the Medigap search, there is a toggle at the top of the screen to switch the plan options to account for the 2020 changes. There is also more explanation on the Medicare.gov pages under “Supplements & Other Insurance” from the

home page and within print publications like “Medicare & You” and “Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare” at [Medicare.gov/publications](https://www.medicare.gov/publications).

We redesigned the Medigap information displayed to improve usability and accessibility, including mobile optimization. However, CMS did not change the methodology for Medigap data submission or display. Beneficiaries and other stakeholders who identify issues in the Medigap data are encouraged to email the MPF@cms.hhs.gov email resource. CMS will review the identified issues and update the website as appropriate.

In terms of functionality, it is important to note that the new Plan Finder still allows all users to search health and drug plans without creating an account. To get the most personalized information and costs, SHIP counselors and others can help beneficiaries create and use a [MyMedicare.gov](https://www.mymedicare.gov) account to access additional features like creating and saving a personal drug list and accessing Low-Income Subsidy information. We have streamlined the process so that it only takes several minutes to create a [MyMedicare.gov](https://www.mymedicare.gov) account. Creating an account with a username and password is a common requirement for online transactions and personalized services and information, and conforms with website best practices. Data privacy and security is one of our biggest priorities. We are ensuring personalized information about our beneficiaries is safe and secure.

If someone has already created an account on [MyMedicare.gov](https://www.mymedicare.gov), they will use that same username and password to log into the new Plan Finder – there is no need to create another account. If they have an existing drug list from the old Plan Finder that is identifiable only with a drug ID and password, the beneficiary or their trusted counselor, agent, or broker could access that list through December 7, 2019. We recommended that they print a copy of that list and use it to create an updated list in the new Plan Finder, using their old list and the suggestions pulled from their Medicare claims information. Because the previous technology is proprietary, their old drug list cannot be transferred into the new Plan Finder.

As previously noted, one important feature of the new Plan Finder is the ability to generate someone’s individual list of prescriptions. Prescription information is now populated from personal Medicare claims history with accurate brand, dosage, and frequency information. There is a feature to edit, add, and remove prescription drugs. We have also built in pop-ups to notify users when there might be lower cost generics available.

We added the ability to sort by total drug and premium cost in the new Plan Finder for the start of Open Enrollment. Regarding the ability to compare mail order and retail drug costs, the new Plan Finder does allow direct comparison of mail order and retail pricing. We agree that providing an option to select that a person gets a drug once per year is important, and this is an enhancement we are planning to make to the Plan Finder in the future.

Regarding adding formulary information, most users reported finding formularies confusing during consumer testing. The total costs shown reflect all drug costs, including those that are not on the formulary and, thus, would be priced at retail cost. General formulary information is available for each plan on the Plan Details page. The table on this page allows users to view copay amounts for drugs in each tier during each coverage phase.

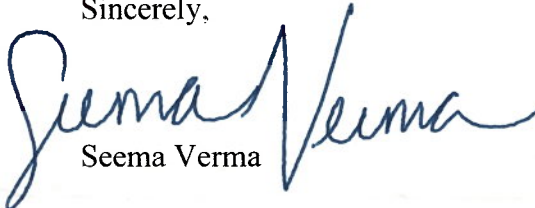
With regard to your suggestion that the Part D drug cost information section should include a monthly cost chart, a monthly list of costs is available for each pharmacy selection on the Plan Details page. CMS is exploring the addition of more data around monthly costs based on user feedback, while also working to ensure that we do not overwhelm or confuse users.

As always, we want to ensure that beneficiaries are confident in their decisions and happy with the coverage they choose. As is the case every year, our call center representatives and staff caseworkers can help beneficiaries throughout the year if they believe they made the wrong plan choice because of inaccurate or misleading information. This process is not new, but this year we are focusing even more on ensuring that it is a simple and painless experience for beneficiaries. Our staff is trained and ready to help any beneficiary who needs it. Beneficiaries can call 1-800 MEDICARE to explain their circumstances and get the assistance they need. It is not our expectation that they will have documentation or screenshots.

In addition to our call center representatives having the information they need to assist beneficiaries, we also are ensuring that Medicare advocates and partners have information they need through regular calls and listserv messages. Information about the Special Enrollment Period also is available on related pages on Medicare.gov, and we will promote it through our Medicare blog. There is no deadline for requesting a Special Enrollment Period if someone believes they made the wrong plan choice because of inaccurate or misleading information.

Again, thank you for your letter. We continue to value input from you and our partners throughout this process. You are a critical part of the customer service we offer to Medicare beneficiaries. We are committed to making ongoing improvements to the tools we provide to help people understand their Medicare options and make informed choices.

Sincerely,


Seema Verma