

MEDICARE DRUG & HEALTH PLAN CONTRACT ADMINISTRATION GROUP

- DATE: September 15, 2021
- TO: Medicare Advantage Organizations, Medicare Advantage Prescription Drug Organizations, Section 1876 Cost Plans, Prescription Drug Plan Sponsors, Employer/Union-Sponsored Group Health Plans, Medicare-Medicaid Plans
- FROM: Kathryn A. Coleman, Director
- SUBJECT: Contract Year 2022 Annual Notice of Change and Evidence of Coverage Submission Requirements and Yearly Assessment

The Centers for Medicare & Medicaid Services (CMS) requires Medicare Advantage (MA) plans and Part D sponsors to send accurate Annual Notice of Change (ANOC) and Evidence of Coverage (EOC) documents to all applicable beneficiaries on a timely basis. Specific requirements related to accuracy and timeliness can be found in 42 C.F.R. §§422.111(a), 422.111(d)(2), 422.2262, 423.128(a), 423.128(g)(2), and 423.2262.

Each year, CMS analyzes MA plan/Part D sponsor's ANOCs and EOCs to ensure these documents were provided timely and accurately to enrollees. CMS requires organizations to thoroughly review, identify, and notify CMS of any inaccuracies found in ANOC and/or EOC documents. MA plans/Part D sponsors must use CMS' standardized ANOC and EOC errata models to address inaccuracies and submit errata to CMS by the following dates:

Material	Errata Due By
ANOC (applicable to all renewing	October 15
PBPs) due by September 30	
EOC (applicable to all PBPs) due by	November 15
October 15	

The actual mail date (AMD) and the number of enrollees affected by the errata must be submitted in HPMS within 15 days of mailing each ANOC errata sheet. AMDs are not required for EOC errata sheets. MA plans/Part D sponsors must also update their corrected ANOCs and EOCs and submit using the replacement functionality in HPMS. The HPMS Users guide provides information on how to submit ANOCs, EOCs, replacements and errata.

CMS may take compliance or enforcement actions on late ANOCs and inaccurate ANOCs and EOCs for failure to properly submit documents and failure to correctly enter AMDs. MA plan/Part D sponsors failure to identify and notify CMS of inaccuracies by the dates above may result in additional compliance actions. In addition, CMS may conduct a retrospective review of

ANOCs and EOCs.

For technical questions, please contact the HPMS Help Desk, at hpms@cms.hhs.gov. For MMP-specific questions, please contact mmcocapsmodel@cms.hhs.gov and copy your contract management team (CMT). For all other questions, please email Lauren Dulay, at lauren.dulay@cms.hhs.gov, and Barbara Gullick, at barbara.gullick@cms.hhs.gov, and copy your Account Manager.