

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



**CENTER FOR MEDICARE**

---

TO: All Part D Plan Sponsors

FROM: Cynthia G. Tudor, Ph.D., Director, Medicare Drug Benefit and C & D Data Group

SUBJECT: Required Timeframe for Part D Coordination of Benefits

DATE: August 3, 2012

It has come to our attention that Part D sponsors may have timeframes in place for beneficiary submission of paper claims that are more restrictive than 36 months. The purpose of this memorandum is to remind sponsors that 42 CFR 423.466(b) requires sponsors to coordinate benefits with State pharmaceutical assistance programs, other payers, beneficiaries and others paying on the beneficiaries' behalf for a period not to exceed three years from the date on which the prescription for a covered Part D drug was filled. We implemented this requirement through rulemaking – see 75 FR 19678 (April 15, 2010).

In the preamble of our April 2010 final rule, we stated that adding this requirement would clarify timely filing responsibilities and deadlines for all beneficiaries and payers. We explained that, in addition to limiting the sponsors' financial liability, the specific time limit would strengthen the ability of other payers, including beneficiaries, to obtain payment for covered Part D drugs within that timeframe. We noted that other payers need time to seek reimbursement and sponsors need a clear limit in order to resolve claims for which they are responsible. We expressed our belief that a 3-year limit would permit CMS to address both needs.

We believe our intention to apply the required three-year timeframe to beneficiary claims is clear. Therefore, sponsors not complying with this requirement will be subject to compliance action by CMS.