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

MEDICARE PLAN PAYMENT GROUP

DATE: November 6, 2025

TO: Part D Sponsors and Pharmaceutical Manufacturers

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

SUBJECT: 2022 Benefit Year Closeout for the Coverage Gap Discount Program Invoicing Cycle

This memorandum is a reminder of the upcoming closeout of the benefit year (BY) 2022 Coverage Gap Discount Program (CGDP) invoicing cycle.[1] The cycle ends 37 months after the benefit year, with the final Quarter 17 (Q17) invoice. For BY 2022, the Prescription Drug Event (PDE) invoice reporting period end date for the Q17 invoice is January 31, 2026.[2]

Please ensure that all Upheld Manufacturer Disputes for BY 2022 are addressed before January 31, 2026, to ensure that the invoiced amounts are properly credited to the manufacturer or that inaccurate financial or non-financial data on the disputed PDE records have been corrected. The Upheld Disputes Tracking Reports contain the details of upheld disputes that have not yet been corrected by the sponsor.[3] The last Upheld Disputes Tracking Report was released to sponsors on September 24, 2025, through the PDE Analysis website.[4]

In addition, please ensure that all Withheld and Invoiced Outlier PDE records for BY 2022 are addressed before January 31, 2026. Withheld outliers are excluded from manufacturer invoices and remain pended from the invoice until the issue causing the PDE record to be withheld is resolved. Invoiced outliers are accepted PDE records that have previously been invoiced to

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[1] For additional details about the annual BY closeout process, please refer to the Health Plan Management System (HPMS) memorandum, *Annual Benefit Year Closeout for the Coverage Gap Discount Program Invoicing Cycle*, December 28, 2016 (available at https://www.cms.gov/research-statistics-data-and-systems/computer-data-and-systems/hpms/hpms-memos-archive-annual-items/syshpms-memo-archive-2016-qtr4) .

[2] *See* Medicare Part D Coverage Gap Discount Program (CGDP) and Manufacturer Discount Program (MDP) Calendar, available at https://tpadministrator.com/internet/tpaw3_files.nsf/F/TPACGDP_MDP_Calendar_2024-2028_12062024.pdf/$FILE/CGDP_MDP_Calendar_2024-2028_12062024.pdf

[3] *See* HPMS memorandum, *Prescription Drug Event (PDE) Analysis Website for CMS Data Quality Review Outliers, Withheld and Invoiced Outliers, and Reviews of Invoiced Data Disputed by Manufacturers*, January 17, 2025 (available at https://www.cms.gov/about-cms/information-systems/hpms/hpms-memos-archive-weekly/hpms-memos-wk-3-january-13-17).

[4] The PDE Analysis website is a secure web portal accessible only to authorized participants, with each sponsor utilizing a space on the portal that is separately secure from all other participants. Access instructions may be found in the Attachment to this memorandum.

manufacturers and have been subject to further analysis and validation because of changes in data after invoicing, including PDE record adjustments and resubmissions. Correction of invoiced outliers may result in invoiced amounts being credited back to manufacturers. The last Withheld and Invoiced Outlier Report[5] was released to sponsors on October 31, 2025, through the PDE Analysis website.

We remind sponsors that they have 90 days to make PDE adjustments or deletions in response to the postings on the PDE Analysis website to remain compliant with CMS requirements.[6]

Sponsors also have an obligation to submit accurate, complete, and truthful PDE data; therefore, after the January 31, 2026-PDE submission deadline for the BY 2022 Q17 invoice has passed, Part D sponsors should continue to submit any outstanding coverage gap discount PDE records and make corrections to any PDE records that require adjustment or deletion, including those for closed out benefit years. PDE records with reported coverage gap discount amounts submitted after the BY closeout will not be invoiced to manufacturers.

Please direct questions regarding the BY closeout for the CGDP invoicing cycle to the Third-Party Administrator at tpaoperations@tpadministrator.com or 1-877-534-2772, Option 1.

Please direct questions regarding the dispute and outlier process to Dobson DaVanzo & Associates LLC and Acumen LLC (DDA) at PDEAnalysis@acumenllc.com.

Thank you.

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[5] *See* HPMS memorandum, *Prescription Drug Event (PDE) Analysis Website for CMS Data Quality Review Outliers, Withheld and Invoiced Outliers, and Reviews of Invoiced Data Disputed by Manufacturers*, January 17, 2025 (available at https://www.cms.gov/about-cms/information-systems/hpms/hpms-memos-archive-weekly/hpms-memos-wk-3-january-13-17).

[6] *See* 42 C.F.R. § 423.325(a)(2), and HPMS memorandum, *Revision to Previous Guidance Titled "Timely Submission of Prescription Drug Event (PDE) Records and Resolution of Rejected PDEs,"* October 6, 2011 (available at https://www.cms.gov/httpseditcmsgovresearch-statistics-data-and-systemscomputer-data-and-systemshpmshpms-memos-archive/hpms-memo-qtr1-4).

ATTACHMENT: Instructions on User Authorization Process

DDA has created the PDE Reports and PDE Analysis web portals to facilitate the PDE Reports and PDE Analysis initiatives. These secure web portals are accessible only to authorized participants, with each sponsor utilizing a space on the portal that is separately secure from all other participants.

In accordance with Federal Information Security Management Act (FISMA) regulations, only the authorizing agent – in this case, the contract's Medicare Compliance Officer – is authorized to give access to the web portal for each contract. To streamline this process, DDA has developed the User Security Web Portal – a web tool that allows Medicare Compliance Officers to manage their users' permissions to DDA's web portals.

For your contract to gain access to the PDE Reports and PDE Analysis web portals, your Medicare Compliance Officer must complete the following steps:

1. Identify individuals who should have access to each web portal.

If your contract is continuing from 2024, previously authorized users will retain their access to the PDE Reports and PDE Analysis web portals. Your contract may choose to keep the same users, or your contract may modify users.

If your contract is new in 2025, your contract must authorize new users for both web portals. Your contract may choose to authorize representatives that are currently users on other Acumen web portals. However, your contract must complete the user authorization process again, specifically for the PDE Reports and PDE Analysis web portals.

Appropriate website users are staff who are either directly involved in the process of PDE data submission and resolution or who oversee a third-party submitter. If a third-party organization is involved in PDE submission, your contract may assign a member of this organization as a user. However, we recommend your contract include at least one internal user from your organization, as one goal of the web portals is to help your contract monitor and resolve third-party submission errors.

For security purposes, each contract is limited to five authorized users for each web portal.

2. Log onto the User Security Web Portal

(https://partd.programinfo.us/user_security)

The latest Medicare Compliance Officer on record in the Health Plan Management System (HPMS) for each contract has been granted access to the User Security web portal. Compliance Officers should have access to the User Security web portal through existing work with DDA. If your Medicare Compliance Officer does not have access to the User Security web portal or has never logged in, please contact DDA at PDE@acumenllc.com. If your Medicare Compliance Officer on record in HPMS is incorrect, please update HPMS directly.

3. Designate users and authorize access permissions via the User Security web portal.

Medicare Compliance Officers must complete the user authorization process by reviewing and/or updating current user access settings or authorizing access permissions for new users on the User

Security web portal.

To designate users and authorize access permissions, Medicare Compliance Officers must complete the following steps on the User Security web portal:

1. Add an existing and/or new user.
2. Select the Web Portal and contract(s) for each user.
3. Authorize access permissions for each user.

Following completion of the user authorization process, DDA will send authorized web portal users:

- A Welcome Email with the relevant Web Portal User Guide, Getting Started Guide, and Web Portal URL
- A Credential Email with a unique One-Time Password Link and login username

More information on adding users can be found under the Help Documents section of the User Security web portal. Note that all authorized users can log on, navigate the web portals, and receive email notifications regarding report releases.

To ensure timely access to the web portals, Medicare Compliance Officers must complete all steps of the user authorization process no later than two weeks from the date of this memorandum.

If you have any questions or require assistance with the user authorization process, please contact PDE@acumenllc.com or Acumen's website assistance line at (650) 558-8006.