

HPMS Quick Reference Guide: How To Submit Your Benefit Attestation

STEP 1 OF 4: ACCESS THE CY2010 BENEFIT ATTESTATION START PAGE

- On the HPMS Home Page, select Plan Bids on the Left Navigation Bar.
- On the fly out menu, select Benefit Attestation.
- On the Benefit Attestation Start page, select Contract Year 2010 on the Left Navigation bar.
- You will now be on the CY 2010 Benefit Attestation Start Page.

HPMS Health Plan Management System Home

CY 2010 Benefit Attestation

You will use this module to perform the following actions:

- Access benefit attestations

Go To: [Select Contract Year](#)

Benefit Attestation

Top of Page
Back

STEP 2 OF 4: SELECT THE TRANSACTION TYPE

- On the CY 2010 Benefit Attestation Start Page select Benefit Attestation on the left navigation bar.
- On the Transaction Type page, select the transaction type for which you are submitting your benefit attestation ("Initial" or "Renewal").
- Click on the Next button.

HPMS Health Plan Management System Home

CY 2010 Benefit Attestation

Select one of the following transaction types:

Initial

Back Next

Go To: [Benefit Attestation Start Page](#)

STEP 3 OF 4: SELECT A CONTRACT

- On the Select a Contract page, select the contract for which you are submitting your benefit attestation.
- Click on the Next button.

HPMS Health Plan Management System Home

CY 2010 Benefit Attestation

Select one of the following contracts:

Z0001 - TEST CONTRACT 1
Z0002 - TEST CONTRACT 2
Z0003 - TEST CONTRACT 3
Z0004 - TEST CONTRACT 4
Z0005 - TEST CONTRACT 5

Back Next

Go To: [Benefit Attestation Start Page](#)

How To Submit Your Plan Correction Request

STEP 4 OF 4: VERIFY, PRINT AND MAIL THE BENEFIT ATTESTATION

- On the Benefit Attestation page for your contract, review all information on the page for accuracy.
- Review the attestation statement.
- Click on the "Create PDF" link.
- Print and get signatures on the PDF document.
- Mail the document to CMS at the address provided at the bottom of the Benefit Attestation page.

HPMS Health Plan Management System
Home

CY 2010 Benefit Attestation

Please review the following information. If all of the information is correct, then select the "create PDF" below to generate a PDF version of the attestation that can be printed, signed, and mailed to CMS.

Note: If the CEO Senior Official for Contracting or CFO contract information is incorrect, please edit this information prior to printing by selecting the "Home" link at the top. On the HPMS homepage, select "Contract Management" > "Select Contract Number" > "Contract Information".

Medicare Advantage Attestation of Benefit Plan
TEST CONTRACT
20001
Date: 07/14/2009

I attest that I have examined the Plan Benefit Packages (PBPs) identified below and that the benefits identified in the PBPs are those that the above-stated organization will make available to eligible beneficiaries in the approved service area during program year 2010. I further attest that we have reviewed the bid pricing tools (BPTs) with the certifying actuary and have determined them to be consistent with the PBPs being attested to here.

I further attest that these benefits will be offered in accordance with all applicable Medicare program authorizing statutes and regulations and program guidance that CMS has issued to date and will issue during the remainder of 2009 and 2010, including but not limited to, the 2010 Call Letter, the 2010 Solicitations for New Contract Applicants, the Medicare Prescription Drug Benefit Manual, the Medicare Managed Care Manual, and the CMS memoranda issued through the Health Plan Management System (HPMS).

[create PDF](#)

Plan ID	Segment ID	Version	Plan Name	Plan Type	Transaction Type	MA Premium	Part D Premium	CMS Approval Date	Effective Date
001	0	6	TEST CONTRACT	MSA Demo	Initial	0.00	N/A	06/26/2009	01/01/2010

CEO: _____ **Date:** _____
John Test
President
123 Main Street
Suite 100
Anywhere, DC 22222
555 - 555 - 5555

CFO: _____ **Date:** _____
John Test
President
123 Main Street
Suite 100
Anywhere, DC 22222
555 - 555 - 5555

Medicare Advantage benefit attestations should be sent by overnight carrier to:
Centers for Medicare & Medicaid Services
ATTN: Marilyn Hunter/Medicare Advantage Benefit Attestation
Mal Stop C4-23-07
7500 Security Boulevard
Baltimore, MD 21244-1850

[Back](#)

[Go To: Benefit Attestation Start Page](#)

What If There Are Errors On The Attestation?

If the CEO or CFO information is wrong, correct it in HPMS before printing the document (HPMS Home Page > Contract Management > Select Contract Number > Contract Information).