

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
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**MEDICARE-MEDICAID COORDINATION OFFICE**

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DATE: November 7, 2017

TO: Medicare-Medicaid Plans

FROM: Lindsay P. Barnette  
Director, Models, Demonstrations, and Analysis Group

SUBJECT: Contract Year 2018 Medicare-Medicaid Plan Summary of Marketing Practices and Beneficiary Disclosure Requirements

The purpose of this memorandum is to provide Medicare-Medicaid Plans (MMPs) participating in capitated model demonstrations under the Financial Alignment Initiative a summary of similarities and differences in Contract Year (CY) 2018 marketing and beneficiary disclosure requirements.

The Medicare-Medicaid Coordination Office (MMCO) worked with states to clarify marketing and beneficiary disclosure activities within states as well as across states. The summary also indicates if an MMP activity is similarly applicable to non-MMP Medicare health plans. This resource for states and MMPs is based on CY 2018 Medicare Marketing Guidelines (MMG), State-specific Marketing Guidance, other guidance (e.g., Medicare Managed Care Manual, State-specific Enrollment Guidance), and three-way contracts.

While this document is intended as a helpful summary for MMPs, it is not a replacement for or addition to the guidance and three-way contracts referenced above. This summary should not be used for compliance or auditing purposes. We remind MMPs that the State-specific Marketing Guidance should be considered an addendum to the MMG and may contain guidance beyond the marketing guidance contained in the MMG.

Please contact the Medicare-Medicaid Coordination Office at [MMCOCapsModel@cms.hhs.gov](mailto:MMCOCapsModel@cms.hhs.gov) if you have any questions about the contents of this memorandum.