

70.6 Outbound Education and Verification Calls to All New Enrollees

(Rev.)

42 CFR 422.2272(b), 42 CFR 423.2272(b)

Effective for 2010 enrollments, all plan sponsors are required to conduct outbound education and verification calls for enrollments effectuated by agents and brokers – including both independent and employed agents and brokers – to ensure beneficiaries requesting enrollment understand the plan rules. It is important for the plan sponsor’s sales staff to obtain from the beneficiary the verification phone number and provide a description of the enrollment verification process to the beneficiary during the application process.

Outbound calls mean that calls are made to the beneficiary after the sale has occurred. Calls cannot be made at the point of sale. The plan sponsor must ensure that the verification calls made to beneficiaries are not made directly by sales agents and also that the sales agents are not with the beneficiaries at the time of the verification call. Plan sponsors may not use automated calling technologies to effectuate these outbound calls; our expectation is the calls will be interactive. The plan sponsor must conduct these calls for all new enrollments effectuated by agents and brokers (including both independent and employed agents and brokers). Categorical exclusions from this requirement include enrollments into employer or union sponsored plans, enrollments into PACE plans, auto-enrollments, facilitated enrollments, and reassignments effectuated by CMS, enrollments submitted by State Pharmaceutical Assistance Programs (SPAPs), and enrollments from one plan to another plan offered by the same MA organization or PDP sponsor, regardless of the role of agents and brokers. Please note that if a member with LIS makes an enrollment choice that supersedes or changes a CMS-generated enrollment, and that election is effectuated by an agent or broker, the outbound verification requirements apply. A model script has been developed for use by all plan sponsors for this purpose (refer to http://www.cms.hhs.gov/ManagedCareMarketing/09_MarketngModelsStandardDocumentsandEducationalMaterial.asp).

The plan sponsor may continue to use existing scripts provided that they convey the information included in this latest model script. New or revised scripts must be submitted to CMS through the normal process for approval.

We expect plan sponsors to make a minimum of three documented attempts to contact the applicant by telephone within fifteen (15) calendar days of receiving the enrollment request. If the plan sponsor is unable to successfully complete the verification on the first attempt, we expect the sponsor to send the applicant an enrollment verification letter. A model verification letter is available at http://www.cms.hhs.gov/ManagedCareMarketing/09_MarketngModelsStandardDocumentsandEducationalMaterial.asp.

Any verification letter that is sent is in addition to any other required enrollment notice, such as enrollment acknowledgement and confirmation letters. After the model enrollment verification letter has been sent, the plan sponsor is expected to make and document at least two additional attempts to successfully complete the verification. The minimum three attempts to conduct the verification by telephone and, if applicable, the mailing of the verification notice, are expected to

be completed no later than fifteen (15) calendar days of the plan sponsor's receipt of the enrollment request. Plan sponsors must document verification activities. We expect that both the script and the verification letter will inform beneficiaries that they must notify the plan sponsor of their intent to cancel the processing of their enrollment within seven (7) calendar days from the date of the letter or call or the last day of the month in which the enrollment request was received, whichever is later.