



CENTER FOR MEDICARE

DATE: October 10, 2012

TO: Medicare Compliance Officers, Medicare Advantage Organizations and Prescription Drug Plans

FROM: Danielle R. Moon, J.D., M.P.A, Director, Medicare Drug & Health Plan Contract Administration Group

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

SUBJECT: Reminder of Medicare Marketing Guidelines related to 2013 Plan Ratings

CMS will be releasing the 2013 Plan Ratings on October 12, 2012. Medicare Advantage Organizations (MAOs) and Prescription Drug Plans (sponsors) must adhere to the Medicare Marketing Guidelines (MMG) as they pertain to the proper use of these ratings. All documents and marketing materials related to Plan Ratings information must be in compliance with CMS' guidelines. MAOs and sponsors must use their star ratings in marketing materials in a manner that does not mislead beneficiaries into enrolling in plans based on inaccurate information. Failure to follow CMS' guidance may result in compliance action against the contract.

Plan Rating Marketing Reminders:

1. CMS' overall rating of a plan is a single star rating that summarizes a plan's performance across all quality and performance measures. Additional star ratings are calculated for plans' performance in individual measures, domains (categories of measures), and summaries of Part C and D measures. MAOs and sponsors must provide each contract's overall Plan Ratings information to beneficiaries through the standardized Plan Ratings information document. The Plan Ratings information document must be distributed with any enrollment form and/or Summary of Benefits. This document must also be available on plan websites.
2. The 2013 Medicare Plan Ratings Template (Attachment A) will be available in HPMS in conjunction with the release of the 2013 Plan Ratings on/around October 12, 2012.
3. If an MAO or sponsor wants to reference an individual measure it must include the overall Plan Rating as well. That is, MAOs and sponsors may not only use a summary, domain or individual measure level rating as it could incorrectly imply they received a higher overall Plan Rating.
4. MAOs' and sponsors' marketing may not reference or include poor performance status information as a means to circumvent enrollment and disenrollment election period rules.

5. MAOs and sponsors must ensure all statements related to Plan Ratings are accurate and based on CMS' data. CMS has found instances where incorrect information was marketed.
6. MAOs and sponsors must include the following disclaimer on all materials referencing Plan Ratings information: "Plan performance Star Ratings are assessed each year and may change from one year to the next."
7. Plan Ratings are issued in October of each year. MAOs and sponsors will be required to use updated 2013 Plan Ratings information within 15 days of the release of the updated information.

For complete guidance of marketing of Plan Ratings, MAOs and sponsors should refer to the Medicare Marketing Guidelines issued as Chapter 2 of the Prescription Drug Benefit Manual and Chapter 3 of the Medicare Managed Care Manual.

MAOs and Plan Sponsors with an Overall Five-Star Rating:

As listed in CMS Regulations at 42 C.F.R. §422.2264 (a)(4), §423.2264 (a)(3) and Section 30.12.1 of the MMG notes that MAOs and sponsors with an overall 5-star rating have the option to include CMS' gold star icon on marketing materials. The icon must be included in a way that is not misleading and makes it clear to the audience that the 5-star rating is for a specific contract(s), as applicable. For example, an MAO or sponsor that received a 5-star rating in customer service cannot promote itself as a "5-star plan," when it's overall Plan Rating is actually only 2 stars. Parent organizations with only one 5-star contract should not create materials in a way that implies that all of its contracts achieved this rating.

MAOs and sponsors with an overall 5-star rating may market their ability to enroll beneficiaries through the 5-star special enrollment period (SEP). If an MAO or sponsor with an overall 5-star rating is assessed a rating of less than 5 stars for the upcoming year, the MAO/sponsor must discontinue marketing for the purposes of accepting enrollments under the 5-star SEP by November 30 of the current year.

Thank you for your continued commitment to ensure the success of the Medicare Advantage and Prescription Drug programs. Please direct questions about marketing of Plan Ratings information to your Account Manager.

ATTACHMENT A – 2013 PLAN RATINGS MARKETING TEMPLATE

[ORGANIZATION’S MARKETING NAME, CONTRACT ID]

2013 Medicare Plan Ratings

The Medicare Program rates all health and prescription drug plans each year, based on a plan’s quality and performance. Medicare Plan Ratings help you know how good a job our plan is doing. You can use this Plan Rating to compare our plan’s performance to other plans. Examples of the areas covered by this rating include:

- How our members rate our plan’s services and care;
- How well our doctors detect illnesses and keep members healthy;
- How well our plan helps our members use recommended and safe prescription medications

For 2013, **[ORGANIZATION’S MARKETING NAME]** received the following overall Plan Rating from Medicare:

[OVERALL STAR RATING]

The number of stars shows how well our plan performs.

★★★★★	excellent
★★★★	above average
★★★	average
★★	below average
★	poor

**Some contracts do not have enough data to rate their performance.*

Learn more about our plan and how we are different from other plans at www.medicare.gov.

You may also contact us **[PLAN TO INSERT HOURS OF OPERATION]** at **[PROSPECTIVE MEMBER NUMBER]** (toll-free) or **[PROSPECTIVE MEMBER TTY/TDD OR RELAY NUMBER]** (TTY/TDD).

Current members please call **[CURRENT MEMBER NUMBER]** (toll-free) or **[CURRENT MEMBER TTY/TDD OR RELAY NUMBER]** (TTY/TDD).