

## CENTER FOR DRUG AND HEALTH PLAN CHOICE

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**Date:** January 21, 2009

**To:** All Medicare Advantage Organizations, Prescription Drug Plan Sponsors and Cost Plans

**From:** Louis Polise /s/  
Acting Director, Medicare Drug and Health Plan Contract Administration Group

**Subject:** Medicare Improvements for Patients and Providers Act (MIPPA) Marketing Implementation – **DUE BY JANUARY 30, 2009**

On September 15, 2008, the Centers for Medicare & Medicaid Services (CMS) released guidance to help the industry implement the new Medicare regulations, many of them designed to protect beneficiaries from unscrupulous marketing practices. It is our expectation that Medicare Advantage Organizations (MAOs), Medicare Prescription Drug Plan Sponsors (PDPs) and Cost Plans will have acted quickly to implement these regulations for the 2009 marketing and contract year. Accordingly, we are asking all MAOs, PDPs and Cost Plans to report to us on their compliance with the new marketing regulations following the instructions below. The completed tool must be returned **by January 30, 2009**.

**NOTE:** Employer/union group plans are not subject to many of the new marketing provisions. Therefore, employer/union direct contracts should NOT complete the tool because their entire contract is not subject to many of the new marketing provisions. However, contracts with 800 series plans should complete the tool as it applies to their individual market plans. In addition, PACE organizations are NOT required to complete the tool.

### How to Access the Tool

For your convenience, a hard copy of the MIPPA Marketing Implementation Tool is attached to this memo. However, we will accept electronic submissions only.

Simultaneously with the release of this memo, CMS is sending an e-mail to each Medicare Compliance Officer with the link to the Marketing Implementation Tool. To access the tool, follow these steps:

1. Click on the following link contained in the e-mail sent to the Compliance Officer:  
<https://vovici.com/wsb.dll/s/11dc4g398af>.
2. Enter your organization's Unique ID, which is your CMS contract number (e.g., Hxxxx, Sxxxx). Organizations with more than one contract may complete the tool once for each contract number. However, for contract types that are the same AND for which all responses are identical across these contracts, the organization may complete the tool

once, then specify the other contract number(s) that meet these criteria and to which the responses also apply. If the contract types are different and/or the responses are NOT identical across the contracts, you must complete the tool for each individual contract. This option is operationalized clearly in the last two questions of the tool.

3. For security reasons, you will then need to enter a password. This is your Medicare Compliance Officer's e-mail address.

If your organization's Medicare Compliance Officer did not receive the e-mail due to firewall constraints, or if it is more convenient for you, paste the following link into your web browser to access and complete the tool: <https://vovici.com/wsb.dll/s/11dc4g398af>.

#### How to Print your Responses Prior to Submission

CMS strongly recommends that you PRINT your responses PRIOR TO moving to each subsequent page of the tool following the prompts provided. Once you submit your responses on the last page of the tool, you will not be able to return to any questions to correct, update, or print your responses. However, if you re-enter and resubmit your complete set of responses, CMS will use the latest submission received on or before **January 30, 2009**, as your official submission.

#### Ongoing Monitoring of Marketing Activities

We want to remind organizations that CMS will continue to monitor the marketing activities of agents and brokers through increased surveillance activities. These will include secret shopping of marketing events and partnering with Departments of Insurance and State Health Insurance Programs so that they can assist in the detection and reporting of allegations of inappropriate plan, agent, or broker activity. Once we become aware of any allegations or violations, Regional Office Account Managers will contact the organizations. We expect all organizations to provide prompt and thorough responses to their respective Account Managers if contacted for this reason.

Thank you in advance for taking the time to complete the tool. CMS is pleased to continue working with the industry to provide effective health care and prescription drug coverage to Medicare beneficiaries. If you have any questions about the MIPPA Marketing Implementation Tool, please contact Joan Peterson at [Joan.Peterson@cms.hhs.gov](mailto:Joan.Peterson@cms.hhs.gov).

Attachment