



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: December 3, 2018

TO: Illinois Medicare-Medicaid Plans

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

SUBJECT: Illinois MMPs: Release of Final Contract Year 2019 State-specific Marketing Guidance

On August 3, 2018, and August 20, 2018, CMS issued preliminary marketing and communications guidance to Medicare-Medicaid Plans (MMPs) through two HPMS memoranda, "Contract Year 2019 Marketing and Beneficiary Communications Guidance for Medicare-Medicaid Plans" and "Revised Contract Year 2019 Marketing and Beneficiary Communications Guidance for Medicare-Medicaid Plans." These memoranda address the most critical issues related to submission of marketing materials for Contract Year (CY) 2019 and the Annual Election Period (AEP). Attached to this memorandum is the final CY 2019 State-specific Marketing Guidance for Medicare-Medicaid Plans (MMPs) operating in the Illinois capitated financial alignment model demonstration. The State-specific Marketing Guidance has been jointly updated by CMS and Illinois and will be applicable to all marketing for CY 2019 benefits.

The State-specific Marketing Guidance provides information only about those sections of the Medicare Communications and Marketing Guidelines (MCMG) that are not applicable or that are modified for MMPs in Illinois; therefore, this guidance document should be considered an addendum to the CY 2019 MCMG. MMPs should carefully review the CY 2019 MCMG (see <https://www.cms.gov/Medicare/Health-Plans/ManagedCareMarketing/FinalPartCMarketingGuidelines.html>), in conjunction with the State-specific Marketing Guidance, as the requirements of the MCMG that are not otherwise modified by this document apply to MMPs in Illinois.

The CY 2018 State-specific Marketing Guidance sections have been updated to align with the new MCMG sections and incorporate guidance previously provided in the August 3, 2018, and August 20, 2018, HPMS memoranda. In addition, the CY 2019 State-Specific Marketing Guidance includes requirements that modify certain new sections of the MCMG for MMPs in Illinois.

The following summarizes additional CY 2019 State-specific Marketing Guidance changes for MMPs in Illinois that were not included in the August HPMS memoranda:

- **Section 30.6 – Electronic Communication Policy and Section 40.2 – Marketing Through Unsolicited Contacts:** Clarifies that MMPs may initiate e-mail communications only with an enrollee of the health plan who is enrolled in a different product of the health plan (for example, an MLTSS or Medicare Advantage plan), or a current MMP enrollee of the health plan, or a future enrollee of the health plan who has been passively or voluntarily enrolled with a coverage effective date that has not occurred yet.

- **Section 50.1 – Educational Events:** Clarifies that MMPs can make available information about multiple plan products at the same physical table at educational events, as long as all information has previously been appropriately approved by CMS and the State. Also clarifies that while no one approves MMP events submitted in HPMS, Medicaid managed care events must be approved by the State.
- **Section 60.1 – Provider-Initiated Activities:** Clarifies that provider-initiated discussions that answer questions or discuss the merits of an MMP – including cost sharing and benefit information – may not occur in areas where care is delivered.
- **Section 60.2 – Plan-Initiated Provider Activities in the Healthcare Setting:** Clarifies that MMPs may not allow contracted providers to make available, distribute, or display marketing materials in areas where health care is being delivered. MMPs may not allow contracted providers to make marketing materials in common entryways or vestibules. However, making State-approved materials available in hospital or nursing home cafeterias, community rooms, recreational rooms, and conference rooms is allowed. Additionally, MMPs may not allow contracted providers to make enrollment forms available where health care is being delivered or outside of the areas where care is being delivered.
- **Section 60.3 – Contracted Provider Oversight Responsibilities:** We clarify that the guidance in section 60.3 of the MCMG applies to contracted providers of Medicare services. However, contracted providers of Medicaid-only services that have a preferred MMP must use the State's flyer and/or letter template (see <https://www.illinois.gov/hfs/SiteCollectionDocuments/PreferredProviderTemplates101917.pdf>), and such contracted providers' preferred MMP must receive approval from the state for each preferred MMP flyer and/or letter prior to posting and/or distribution by the contracted provider.
- **Section 60.4 – Plan/Part D Sponsor Activities in the Healthcare Setting:** Clarifies that MMPs may not conduct sales activities, including sales presentations, or distribute or collect enrollment forms in Illinois. Additionally, MMPS may not distribute marketing materials in common entryways or vestibules. However, making State-approved materials available in hospital or nursing home cafeterias, community rooms, recreational rooms, and conference rooms is allowed.

For any questions about the contents of this memorandum, please contact your Contract Management Team or the Medicare-Medicaid Coordination Office at MMCOCapsModel@cms.hhs.gov.