

Release of Updated CY2019 Medicare Communications and Marketing Guidelines

CMS is releasing an updated version of the contract year (CY) 2019 Medicare Communications and Marketing Guidelines (MCMG) on the Managed Care Marketing website (<https://www.cms.gov/Medicare/Health-Plans/ManagedCareMarketing/index.html>). CMS made changes to the guidelines based on questions and comments received from stakeholders.

Included in the update are conforming changes to sections 70.1 - *Plan/Part D Sponsor Required Websites*, 90.1 - *Material Identification*, and 90.4 - *Submission of Websites and Webpages for Review*, as outlined in the August 10 email blast titled, “*Updates to the Website Requirements in the Medicare Communications and Marketing Guidelines*.” In addition, we have also made updates to the following sections of the MCMG. All substantive changes are reflected in the MCMG via red text.

Section 40.4 – *Nominal Gifts*: Clarified that nominal gifts still have an aggregate cap of \$75 per year

Section 60.4 – *Plan/Part D Sponsor Activities in the Healthcare Setting*: Clarified that Plans/Part D sponsors may conduct sales activities in the waiting rooms of healthcare settings

Section 90.13 – *Static Templates*: Added the federal contracting statement/disclaimer back as a variable data field.

Section 100.2.1 – *Notification of Availability of Electronic Materials*

- Clarified that the Notice is meant for existing enrollees.
- Updated the requirement to allow the Notice to be mailed earlier.

Section 100.4 – *List of Required Materials*

- Clarified that the Notification of Availability of Electronic Materials is not applicable to the ANOC.
- Updated the HPMS codes for ANOC and EOC submission.
- Clarified that the Low Income Premium Subsidy document must be provided prior to enrollment instead of by September 30 with the enrollment kit.
- Specified that Low Income Subsidy Riders must be provided to all current enrollees.

Appendix 2 – *Disclaimers*

- Clarified that disclaimers are still not required on the following material types: ID cards, call scripts, banners and banner-like ads, envelopes, outdoor advertising, text messages, social media.
- Updated the Federal Contracting Disclaimer guidance to encourage plans to incorporate language about their contracts with state/Medicaid Programs when appropriate.
- Disclaimer 7 (Mailing Statements)
 - Clarified that Mailing Statements are intended for current member materials.

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- Clarified that if the plan name is on the envelope, it does not need to be mentioned in the disclaimer.
 - Clarified that downstream entities conducting mailings on behalf of a Plan/Part D sponsor must also comply with this requirement.
- Clarified that Disclaimer 10 (Out-of-Network/Non-Contracted Providers) does not apply to standalone PDPs.

Appendix 3 – *Pre-Enrollment Checklist*: Added flexibility for plans to make specified changes to the model.

Appendix 6 – *Employer/Union Group Health Plans*: Noted that the Pre-Enrollment Checklist is not applicable to EGWPs.

As mentioned in our July 20, 2018 HPMS release memo, CMS will provide training on the MCMG during the Medicare Advantage & Prescription Drug Plan Fall Conference & Webcast on Thursday, September 6, 2018. We strongly encourage Plans/Part D sponsors to participate in the conference.

If you have any questions, please email the marketing mailbox at marketing@cms.hhs.gov and “cc” your Account Manager. Please put “MCMG Question” in the subject line.

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