

Centers for Medicare & Medicaid Services (CMS) Marketing Guidelines Reminder

Providers can:

- Provide patients with plan-neutral answers to patients seeking advice on Part D Plan enrollment.
- Assist patients with an objective assessment of his/her Part D Plan needs and potential options to meet those needs.
- Use direct mail, email, phone, or advertisements to communicate continuing affiliation for Plans/Part D Sponsors. The communication must clearly state that the provider may also contract with other Plans/Part D Sponsors.
- Provide the names of plan sponsors with which the provider contracts and/or participates.
- Make available and/or distribute plan marketing materials and enrollment applications.
- Offer information and assistance to patients applying for Medicare's low-income subsidy.
- Use direct mail and/or email to announce a new plan affiliation—but only once and within 30 days of the affiliation. Additional communications about the new affiliation must include ALL plans with whom the provider is affiliated.
- Make available printed information provided by a contracted plan sponsor to patients, as long as there is no "ranking," "highlighting," or comparison of specific plans. If the provider accepts/displays these types of materials, they must do so for ALL plans with which they participate that have requested and provided such materials.
- Distribute CMS-approved Plan Finder information. The provider may also share information with patients from these resources:

CMS Website: www.cms.gov

Medicare Website: www.medicare.gov Medicare Phone: 1-800-MEDICARE

Providers cannot:

- Suggest that a particular plan is approved, endorsed, or authorized by Medicare.
- Seek or accept compensation for conducting enrollment or marketing activities.
- Provide plan comparisons that "rank" or "highlight" plan benefits, unless the materials were written or approved by CMS.
- Offer or provide appointment forms or collect or accept Medicare enrollment applications of any kind.
- Direct or steer patients to join a particular plan that is not in the patient's best interest or urge, persuade, or offer inducements to join a particular plan.