

CMS GUIDANCE ON MEDICARE MARKETING ACTIVITIES

Below is the CMS guidance on provider marketing activities as detailed in the Medicare Marketing Guidelines Provider-Based Activities.

Although providers may not be fully aware of all plan benefits and costs and may face conflicting incentives when acting as a Plan/Part D Sponsor representative, Plans/Part D Sponsors may not prohibit contracted providers from engaging in discussions about Medicare Advantage plan options with beneficiaries should a beneficiary seek advice. Mass Advantage providers must remain neutral when engaging in any discussions with patients about Medicare Advantage plan options.

Mass Advantage providers are not allowed to:

- Offer scope of appointment forms.
- Accept Medicare enrollment applications.
- Make phone calls or direct, urge or attempt to persuade beneficiaries to enroll in a specific plan based on financial or any other interests of the provider.
- Mail marketing materials on behalf of Plans/Part D Sponsors.
- Offer anything of value to induce enrollees to select them as their provider.
- Offer inducements to persuade beneficiaries to enroll in a particular plan or organization.
- Conduct health screening as a marketing activity.
- Accept compensation directly or indirectly from the plan for enrollment activities.
- Distribute materials/applications in an exam room.

Mass Advantage providers are allowed to:

- Provide the names of Plans/Part D Sponsors with which they contract and/or participate.
- Provide information and assistance in applying for the LIS.
- Make available and/or distribute plan marketing materials in common areas.
- Refer their patients to other sources of information, such as SHIPs, plan marketing representatives, their State Medicaid Office, local Social Security Office, CMS' website at <http://www.medicare.gov/> or 1-800-MEDICARE.
- Share information with patients from CMS' website, including the "Medicare and You" Handbook or "Medicare Options Compare" (from <http://www.medicare.gov/>), or other documents that were written by or previously approved by CMS.