

# Marketing Guidelines for the Provider Setting

rev. May 2011

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**PUP**   
Physicians United Plan™

# CMS Marketing Guidelines

## Introduction:

- CMS (Centers for Medicare & Medicaid Services) issued final 2012 Marketing Guidelines in May 2011
- Some provisions apply to marketing by providers
- Some provisions apply to marketing by plans in health care settings (e.g. provider offices)

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# Purpose

- Guide plans and providers in helping beneficiaries with plan selection
- Ensure that beneficiary chooses a plan that is in the best interest of the beneficiary
- Make sure that providers remain neutral
- Make sure that providers give complete and objective information

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# Definition of “Marketing”

- Steering, or attempting to steer a potential enrollee toward a plan or limited number of plans
- Promoting a plan or a number of plans
- Note: “Assisting in enrollment” and “education” are not marketing

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# Definition of “Provider”

All providers contracted with the plan and its sub-contractors, including but not limited to pharmacists, physicians, hospitals and long term care facilities

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# Health Plan Activities

## *Plans can:*

- Conduct sales presentations , distribute and accept enrollment applications in **common areas** (provided patients are not misled or pressured into participating in such activities)

“Common areas” include cafeterias, meeting/conference rooms, i.e., NOT areas where patients primarily intend to receive health care services or are waiting to receive health care services

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# Health Plan Activities *(cont'd)*

## *Plans can:*

- Schedule appointments with beneficiaries residing in long term care facilities such as nursing homes and assisted-living facilities ***only upon request by the beneficiary***

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# Health Plan Activities *(cont'd)*

## *Plans cannot:*

- Conduct marketing activities in health care settings except in common areas
- Distribute/accept enrollment applications in areas where patients primarily intend to receive or are waiting to receive health services, e.g., waiting/exam rooms, pharmacy counter areas

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# Provider Activities

## *Providers Can:*

- Give the names of all plans with which they participate
- Give information and help in applying for low income subsidy
- Help beneficiaries to objectively assess their needs and the plans that meet those needs
- Give objective information on specific plan formularies, based on the patient's needs

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# Provider Activities *(cont'd)*

## *Providers can:*

- Give objective information regarding specific plans, e.g., benefits, cost sharing
- Refer patients to SHIP, the State Medicaid office, local Social Security office, plan marketing representatives, CMS website, etc.
- Print information from CMS website for patients or have computer available for beneficiaries to access the CMS plan finder
- Display posters or other materials displaying their plan affiliations

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# Provider Activities *(cont'd)*

## *Providers can:*

- Make available/distribute CMS-approved plan comparison for all plans with which the provider participates. Cannot “rank order” or highlight specific plans; can include only objective information. Other plans must agree to being compared.
- Make available PDP applications, but NOT MA or MA-PD applications

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# Provider Activities *(cont'd)*

## *Providers cannot:*

- Offer sales/appointment forms
- Accept enrollment applications
- Make phone calls, direct, urge or try to persuade beneficiaries to enroll in a particular plan based on financial or any other interest of the provider
- Mail marketing materials on behalf of plans
- Health screen as a marketing activity

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# Provider Activities *(cont'd)*

## *Providers cannot:*

- Offer anything of value to persuade plan members to select them as their provider
- Offer inducements to persuade beneficiaries to enroll in a particular plan
- Accept compensation directly or indirectly from the plan for enrollment activities
- Distribute materials/applications in an exam room setting

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# Provider Affiliation Announcements

## *Providers can:*

- Announce new and repeat affiliations for specific plans through general advertising (radio, TV)
- Announce new affiliation **once** via direct mail, email or phone within 30 days of signing agreement

## *Note:*

- Additional announcements must include all other plans with which the provider contracts
- Announcements that describe plan benefits must be approved by CMS.

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# SNP Provider Affiliation Information

## *Providers can:*

- Feature SNPs in a mailing announcing an ongoing affiliation
- May include specific information about the SNP, e.g., special plan features, the population the SNP serves or specific SNP benefits.
- Must list all other SNPs with which the provider is affiliated

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# Plan Comparisons

## *Providers can:*

- Distribute CMS-approved plan comparisons *provided by a plan* comparing the benefits of different plans with which they contract
  - Materials may not rank or highlight specific plans, should include objective information only and must be agreed to by all the plans involved
- Distribute plan comparisons prepared by CMS or objective third parties (e.g., SHINE)

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# Provider websites

## *Provider websites can:*

- Include links to plan enrollment applications and/or provide downloadable applications for all plans with which they participate
- Include a link to the CMS Online Enrollment Center

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# Resources

- Section 70.12 of the 2012 CMS Medicare Marketing Guidelines, issued May 17, 2011 available at:

<http://www.cms.gov/ManagedCareMarketing/>

- Submit questions to [marketingpolicy@cms.hhs.gov](mailto:marketingpolicy@cms.hhs.gov)
- Ask your PUP provider relations representative

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