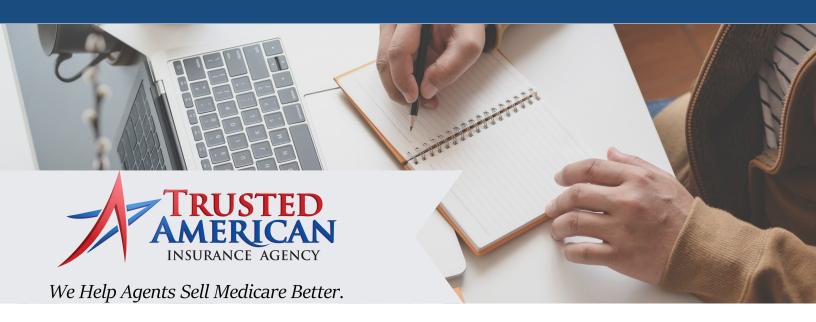


CMS Issues New Rule Changes Set to take effect on September 30, 2023





Discover Key Highlights of the Latest CMS Rules: Stay Tuned for Further Updates from CMS and Insurance Carriers as AEP Approaches



Materials For Marketing

- Marketing materials may not be used to promote benefits in regions where they are not eligible
- Marketing materials may not be used to advertise Comparisons between uninsured individuals and beneficiary savings
- Marketing materials used for MAPD and PDP's may not suggest savings to individuals when not specified
- Unless accompanied by documented data from the current or previous year, the use of superlatives in marketing is generally prohibited
- The marketing material must include a list of plans being represented.

Medicare Logos, Name, and Marks

- The CMS has recently made firm and improved regulations concerning the usage of the term Medicare and other brands marks owned by the federal government
- CMS is now mandating preauthorization for the use of specific logos and marks, including the image of the Medicare Card. Additional guidelines will be updated.
- It is crucial to ensure that a marketing design does not cause confusion for beneficiaries, making them believe they are interacting directly with Medicare. This includes various elements such as the use of red/white/blue colors, the Medicare logo, a picture of a Medicare ID Card, or the Department of Health & Human Services (HHS) logo.



SCOPE OF APPOINTMENT (SOA)

- Agents are required to obtain an SOA at least 48 hours before they can present and enroll a beneficiary into a plan.
- Some exceptions to the 48-hour rule include:
 - The 48-hour rule does not apply if a beneficiary is in the last four days of their valid enrollment period
 - · The beneficiary is an appointment made without prior arrangement
 - The beneficiary has prohibiting limitation such as available transportation
- SOAs remain valid for a period of 12 months starting from the date of the beneficiary's signature or their request for additional information.

EDUCATIONAL EVENTS

- Sales evens may NOT take place within a 12-hour timeframe immediately following an educational event in the same location. This includes events held in the same room/venue, building, or adjacent buildings.
- Agents are now prohibited from collecting SOAs or arranging future appointments with beneficiaries during educational events. However, agents have the option to obtain a Business Reply Card (Permission to Call Form) at an Educational Event.

PRE-ENROLLMENT CHECKLIST

- CMS will provide further instructions regarding a pre-enrollment checklist, which will include new discussion items that are mandatory.
- Agents are required to clarify the impact of a client's enrollment decision on their existing coverage when the client decides to enroll.



DISCLAIMER RULES

- The mandatory disclaimer now extends to all third-party marketing organizations (TPMOs), including those that offer either a single plan or all plans available in a specific area.
- Agents are obligated to include State Health Insurance Programs (SHIPs) in the list of available resources to assist beneficiaries.
- TPMOs are required to disclose the number of carriers and plans they represent in the mandatory disclaimer on all marketing materials.

Make Sure You Are Using The NEW Disclaimer:

"We do not offer every plan available in your area. Currently, we represent [insert number of organizations] organizations which offer [insert number of plans] products in your area. Please contact Medicare.gov, 1-800-Medicare, or your local State Health Insurance Program (SHIP) to get information on all of your options."

CLARIFICATION ON CALL RECORDINGS

- CMS is modifying the recording requirement for calls. Starting from September 30, 2023, only sales and enrollment calls will be necessary to record.
- CMS further specifies that virtual meetings including platforms like Zoom or FaceTime, are the same as phone calls. The audio from such virtual communications must be recorded.



CLARIFICATION ON DOOR KNOCKING

- CMS states that obtaining permission to make a phone call is not equivalent to obtaining permission to unexpectedly visit a beneficiary's home.
- According to CMS marketing rules and regulations, door-to-door marketing of MAPD and PDP products continues to be prohibited
- The collection of a Business Reply Card does not serve as a replacement for obtaining permission to approach a beneficiary's door without a scheduled appointment.

ATTENTION: CMS RULE CHANGES BECOME EFFECTIVE BEGINNING SEPTEMBER 30, 2023



We Help Agents Sell Medicare Better.

For further information and clarification please do not hesitate to reach out info@taia.us/ 844-998-7878