HPMS Email Blast August 10, 2018

Subject: Updates to the Website Requirements in the Medicare Communications and Marketing Guidelines

Message: The Centers for Medicare & Medicaid Services (CMS) is updating sections 70.1, 90.1, and 90.4 of the Medicare Communications and Marketing Guidelines (MCMG) based on comments received following the release of the MCMG on July 20, 2018. CMS will be releasing a revised version of the MCMG later this summer. In the meantime, we are issuing the following revisions due to the time sensitive nature of these changes and their more immediate impact on plan marketing. These updated policies are effective as of the date of this email. The changes are outlined below.

Section 70.1, Plan/Part D Sponsor Required Websites, is updated as follows:

CMS requires all Plans/Part D sponsors to have a website that includes the specific documents and content listed below outlined in sections 70.1.1 and 70.1.2. Plans/Part D sponsors may include other information, including both communications and approved marketing information on their website. Unless otherwise noted, webpages with or containing CMS required content and other communication content should not be submitted to HPMS. Webpages with or containing to marketing must be submitted to HPMS and reviewed or accepted prior to being publically available.

Section 90.1, Material Identification, is updated as follows:

CMS requires Plans/Part D Sponsors to use a standardized method of identification (material ID) for oversight and tracking of materials beneficiaries receive. This material ID is required on all materials except those noted as excluded below.

- The membership ID card;
- Envelopes, radio ads, outdoor advertisements, banner or banner-like ads, and social media comments and posts;
- Plan website pages containing CMS required content (Note: This only applies to the required
- Plan website. Other websites, including those created by contracted third-parties, must have a material ID);
- OMB-approved forms/documents, except when otherwise specified by CMS; and
- Agent-developed communication materials that are not marketing.

The material ID is made up of three parts:

- Plan's/Part D sponsor's contract or MCE number (i.e., "H" for MA or Section 1876 Cost Plans, "R" for Regional PPO plans (RPPOs), "S" for PDPs, or "Y" for Multi-Contract Entity (MCE) identifier) followed by an underscore;
- any series of alpha numeric characters (Plan/Part D sponsor discretion) followed by an underscore; and,
- an uppercase "C" for communication materials or an uppercase "M" for marketing materials (for example: H1234_abc123_C or H5678_efg456_M). The material ID for multi-plan marketing materials must begin with the word "MULTI-PLAN" instead of the organization's contract number.

Note: All website pages (including plan required and third-party) must have a Material ID, but the ID does not have to include "M" or "C".

Non-English and alternate format materials that are based on previously created materials may have the same material ID as the materials on which they are based. Refer to section 90.3 for additional information about the submission of non-English and alternate format materials.

Section 90.4, Submission of Websites and Webpages for Review, is updated as follows:

Websites containing any marketing content must be submitted to CMS via HPMS. Plans/Part D sponsors must use code 4006 for required websites and code 4037 for other websites, including those managed by contracted third parties. All websites are considered File & Use submissions.

Initial website submissions must be submitted as a Word document that contains the URL. Screenshots, test sites, etc. are not needed. The website may go live five days after the HPMS submission. Subsequent submissions (e.g., for website updates) must include the website's URL on a Word document and a summary of the changes. The updates may go live five days after the HPMS submission.

Note: Plans/Part D sponsors are not required to take down their website while making updates. However, the requested changes must not go live for five days following the submission of the changes.



Please direct any questions to <u>marketing@cms.hhs.gov</u>.