

## **Beneficiary Contact (42 CFR §§ 422.2264, 423.2264)**

### **§§ 422.2264(a)(2)(i), 423.2264(a)(2)(i) – Prohibition on the use of door to door solicitation**

- Agents/brokers who have a pre-scheduled appointment with a potential enrollee who is a “no-show” may leave information at that enrollee’s residence.

### **§§ 422.2264(a)(2)(iv), 423.2264(a)(2)(iv) - Telephone solicitation**

- Other types of electronic direct messaging, such as through social media analogous to text messaging are not permitted.
- Text messages regarding care and care coordination are permissible with prior current enrollee consent. An opt-out process must be included on each communication.

### **§§ 422.2264(b), 423.2264(b) - Contact for plan business**

- Plans may not market prior to October 1 (§§ 422.2263(a) and 423.2263(a)) under the pretext of plan business.
- CMS provides Medicare beneficiary data to plans for the purpose of enrolling, disenrolling, and providing care to members in their plan. The permitted uses of data provided by CMS are outlined in the data use agreement signed by plans.

### **§§ 422.2264(c), 423.2264(c) - Events with beneficiaries**

- As established under §§ 422.62(a)(2)(iii) and 423.38(b)(3), the annual coordinated election period for the following calendar year is October 15 through December 7. As such, enrollment applications may not be solicited or accepted for a January 1 effective date until October 15 of the preceding calendar year, unless the beneficiary has an SEP.

**Note:** Plans are reminded that other laws – such as the HIPAA privacy rules - may limit the use of information gathered from other sources or in connection with other products offered by the plan. Nothing in this guidance creates an exemption or exception to other applicable laws.