

## Appendix 3 – Employer/Union Group Health Plans

Sections 1857(i) and 1860D-22(b) of the Social Security Act; 42 CFR §§ 422.2276, 423.458, 423.2276

Plans offering employer group health plans including Employer Group Waiver Plans (EGWPs) are not required to submit communication and marketing materials specific only to those employer plans. However, as a condition of CMS providing particular waivers or modifications to employer group plans, CMS may request and review any materials in the event of beneficiary complaints or for any other reason it determines to ensure the information accurately and adequately informs Medicare beneficiaries about their rights and obligations under the plan.

CMS waivers to employer group plans are limited in scope to their stated parameters, and employer group plans (including EGWPs) must follow all rules in these guidelines unless CMS explicitly waives them. For specific guidance regarding these waivers, please refer to Chapter 9 of the [Medicare Managed Care Manual](#) and Chapter 12 of the [Medicare Prescription Drug Benefit Manual](#).

### Marketing Provisions Table – Employer/Union Group Plans

These requirements are applicable to the transaction between the agent/broker selling the plan to the employer/union. All activities conducted by the employer/union or its designees to sign up individual employees to the plan(s) selected by the employer/union are excluded from these provisions.

**Note: This table contains a partial list of exclusions.**

Applicable Provisions (Not Waived)	Not Applicable Provisions (Waived)
Nominal Gifts	Unsolicited Contacts
Sales/Marketing in Health Care Settings	Cross-selling
Sales/Marketing at Educational Events	Scope of Appointments
Co-branding	Provision of Meals
Appointment of Agents/Brokers	Agent/Broker Compensation
State Licensure Requirements	Agent/Broker Testing
Reporting of Terminated Agents/Brokers	CMS Prior Review of Marketing Materials
Agent/Broker Training Agents must be thoroughly familiar with the products they are selling, including the plan specific details and the Medicare rules that apply to the specific products. The organization/sponsor is responsible for ensuring that the agents selling for them have sufficient knowledge.	Pre-Enrollment Checklist