Websites (§§ 422.2265, 423.2265)

As required under §§ 422.111(h)(2), 422.2265, 423.128(d)(2), and 423.2265, all plans must have a website that includes specific documents and content. The following operational guidance should be used in conjunction with the regulatory requirements, with an emphasis on those requirements found under §§ 422.2265 and 423.2265.

Note: This guidance only pertains to plan required websites.

§§ 422.2265(a), 423.2265(a) - General website requirements

- Notification must be provided when beneficiary leaves the plan's Medicare information website, noting that the individual will go to non-Medicare information website or to a different website.
- Websites must comply with anti-discrimination provisions, such as Section 508 of the Rehabilitation Act, with regard to providing access to websites and other materials. See also 45 CFR § 92.104.

§§ 422.2265(b), 423.2265(b) – Required content

- CMS considers it a best practice to provide instructions on how to appoint a representative and a link to the downloadable version of the CMS Appointment of Representative Form (CMS Form-1696)
- To ensure that eligible beneficiaries are able to enroll without restriction, CMS also considers it a best practice for plans to provide enrollment instructions and forms
- When providing required content regarding how to file a grievance (§§ 422.562(a)(2) and 423.562(a)(2)), request an organization determination, and an appeal, plans should include the following:
 - Written procedures for filing;
 - A direct link on the grievance/coverage determination webpage to the <u>Medicare.gov complaint</u>, where an enrollee can enter a complaint in lieu of calling 1-800-MEDICARE;
 - Phone number(s) for receiving oral requests;
 - o Mailing address for written requests;
 - o Fax number (optional);
 - o Links, if applicable, to any forms created by the plan for appeals and grievances;
 - Information on how to obtain an aggregate number of grievances, appeals, and exceptions filed with the plan; and
 - Contact numbers for enrollees and/or physicians to use for process or status questions.

§§ 422.2265(c), 423.2265(c) - Required posted materials

- All required materials must be clearly labeled and easily found.
- Plans must include the last update date of the material, in close proximity to the material link (e.g. in file name, next to link, etc.) For example, a link that reads "Super MA Plan EOC, updated 11/23/2021."
- Updates (e.g., to correct an error) to materials must be posted as soon as possible.