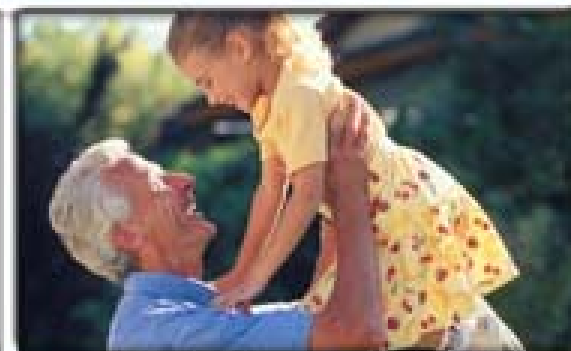




National Medicare TRAINING PROGRAM

Open Enrollment 2009

National Medicare Training Program
Audio-conference Training
October 28, 2008



Topics

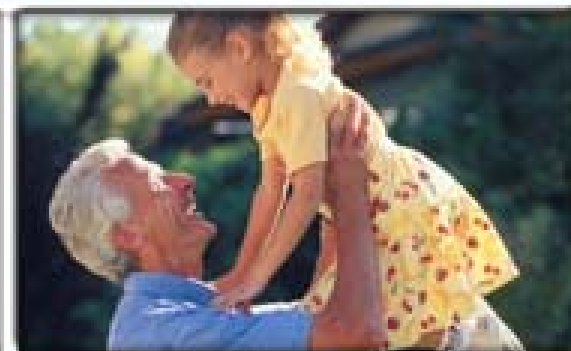
- Open enrollment 2009 focusing on those with LIS changes
- Overview of the upcoming open enrollment advertising campaign
- Update on marketing surveillance
- Updates to MA Plan marketing guidelines



National Medicare TRAINING PROGRAM

Helping People Eligible for Extra Help What You Need to Know about LIS

Tracy Baker,
Health Insurance Specialist
Division of Medicare Enrollment & Coordination
Medicare Enrollment and Appeals Group



Topics

- CMS strategies and objectives for 2009
- Overview of prescription drug coverage
- People with changes in 2009
 - Audiences
 - Target messages
 - Actions
- Resources

CMS Strategies

- Annual enrollment period begins November 15
- Year-round efforts to reach people with low-income
- Some will have changes for 2009
 - LIS eligibility
 - Plan enrollment
- CMS specific focus
 - Those potentially eligible for LIS
 - Those with LIS who face changes in 2009 premiums
- July 2008 document describes our plans

Looking at 2009

- Review and select plans during the annual enrollment period
- Fewer number facing changes in 2009
 - 1.6 million will be reassigned to a new plan

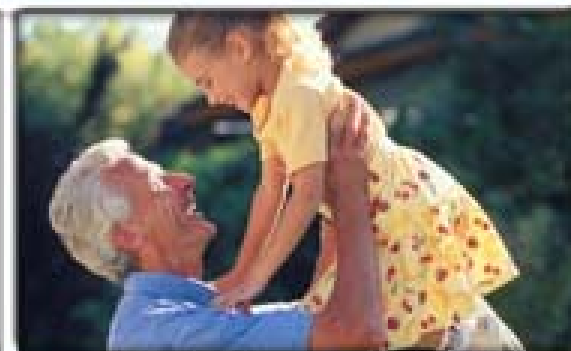
CMS Objectives

- Work with partners to help people
 - Understand coverage and options
 - Prepare for changes in 2009
 - Make confident and informed decisions



National Medicare **TRAINING PROGRAM**

Prescription Drug Coverage and Extra Help



Prescription Drug Coverage

- Coverage began January 1, 2006
- Available for all people with Medicare
- Provided through
 - Medicare Prescription Drug Plans
 - Medicare Advantage Plans and other Medicare plans

Prescription Drug Costs

- Costs vary by plan
- Most people without LIS will pay
 - Monthly premium
 - Deductible
 - \$275 in 2008
 - \$295 in 2009
 - Copayments or coinsurance
 - Very little after
 - \$4,050 out-of-pocket in 2008
 - \$4,350 out-of-pocket in 2009
- Extra help for people with limited income and resources

Extra Help

- Eligibility determined by SSA or state
- Some groups are automatically eligible
 - People with Medicare and
 - Medicaid
 - Supplemental Security Income only
 - (Qualified Medicare Beneficiaries (QMB-only), Specified Low-Income Medicare Beneficiaries (SLMB-only), Qualifying Individuals (QI))
 - Everyone else must apply

How to Apply for Extra Help

- Multiple ways to apply
 - Social Security
 - Paper application
 - www.socialsecurity.gov
 - 1-800-772-1213 (TTY 1-800-325-0778)
 - State Medical Assistance office
 - Local organization
- Beneficiaries or someone on their behalf can apply

Costs for Those With Extra Help

- Below Federal poverty level save over 95%
- People with lowest income and resources
 - Pay no premiums or deductibles
 - Have small or no copayments
- People with slightly higher income and resources
 - Have a reduced deductible
 - Pay a little more out of pocket

Continuing Eligibility for LIS

- CMS re-establishes eligibility each fall
- Extra help continued or changed
 - Based on continued eligibility
- Changes effective January 1
- Those automatically eligible for 2009
 - Continue to qualify through December 2009
- People no longer eligible
 - Automatic status will end December 31, 2008



National Medicare **TRAINING PROGRAM**

Those With LIS Changes



Those with LIS Changes

1. Loss of deemed status
2. Change in extra help copayment
3. Selected for review by SSA

1. No Longer Qualify for LIS

■ CMS letter in September **GREY PAPER**

- No longer automatically qualify for LIS
 - As of January 1, 2009
- Application for extra help

■ Action for Beneficiaries

- Apply for extra help
 - Social Security Administration
- Or
- State Medical Assistance (Medicaid) office

2. Change in Copayment

- CMS letter in early October **ORANGE PAPER**
 - Continue to qualify for extra help in 2009
 - Copayment levels change January 1, 2009
- Action for Beneficiaries
 - Keep the notice
 - No action if information is correct

Selected for Review by SSA

- Social Security letter in September
 - Form 1026
 - “Income and Resources Summary” sheet
- Action for Beneficiaries
 - Return enclosed form within 30 days or extra help may terminate

Reassigning to New PDP

- Each fall, CMS reassigns LIS beneficiaries with 100% premium subsidy to a new PDP
 - PDP is terminating

Or

- PDP premium increase
 - over regional LIS premium subsidy amount
 - Converting to enhanced benefit

How CMS Reassigns

- Attempt to find another plan
 - Same organization
 - No premium liability
 - Promotes continuity
- Reassigned randomly if none available
 - With plan below LIS

Plan Terminating

- CMS letter in late October **BLUE PAPER** version 1
 - Current plan is leaving Medicare Program
 - All beneficiaries regardless of LIS level will be moved
 - Reassigned to new plan effective January 1, 2009
 - Unless they join a new plan by December 31, 2008
- Action for Beneficiaries
 - Keep the notice
 - Compare new 2009 plan with others
 - Can choose to change plans

Premium Increase

- CMS letter in late October **BLUE PAPER** version 2
 - Current plan's premiums increasing above the LIS benchmark, or converting to enhanced
 - Reassigned to new plan effective January 1, 2009
 - Unless they join a new plan by December 31, 2008
- Action for Beneficiaries
 - Keep the notice
 - Compare new 2009 plan with others
 - Can choose to change plans

“Choosers”

- LIS with 100% premium subsidy
Chose plan in 2008 and earlier

And

- Plan’s premium increase over regional benchmark
- CMS will conduct outreach
 - Will not reassign

“Choosers”

■ CMS LIS letter in October **TAN LETTER**

- Premium above the regional benchmark in 2009
- Responsible for paying a portion unless they join a new plan

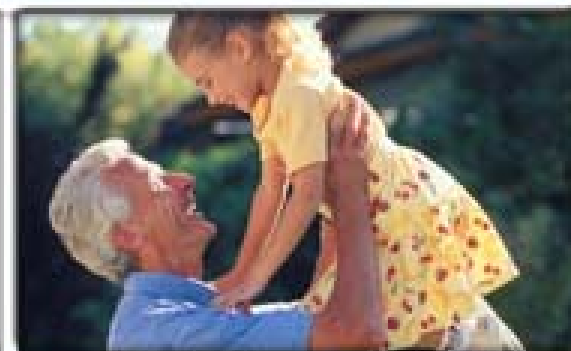
■ Action

- May want to look for a new plan
- Compare current plan with others
- Can choose to change plans
 - Early December is best time



National Medicare **TRAINING PROGRAM**

Resources to Help You



LIS Toolkit

- CMS Outreach Strategy
- Best practices from around the nation
- Maps to find those who need help
- Photo novellas
- Practical tools for counselors
- Other helpful resources

Enrollment Toolkit

- How to help
- Basic Part D education
- How current coverage works with Part D
- Choosing and joining a plan
- Extra help
- Additional resources

Enrollment Resources

■ Personalized web tools

- On www.medicare.gov
 - Medicare Prescription Drug Plan Finder
 - Medicare Options Compare

■ Partner support

- On www.cms.hhs.gov/Partnerships
- Mailings to people with Medicare
- Publications for partners
- Toolkits

Training Resources

- Training on personalized web tools
 - Designed for different purposes/audiences
- Drug Plan Finder Webinar
- Videos
- Online
 - www.cms.hhs.gov/NationalMedicareTrainingProgram
 - Includes links to materials mentioned here

Important Dates

September	SSA mails redetermination letters to certain LIS applicants
Week of September 15 th	GREY LETTER mailed to those losing deemed status
October 1	Plans begin marketing
October 2	Terminating plans notify members
October 12-14	Reassign takes place

Important Dates

Mid October	Drug Plan Finder with 2009 plan data available
Mid October	ORANGE LETTER to those deemed for LIS for next year, but copayment will change
By October 31	Annual Notice of Change sent
By October 31	<i>Medicare & You</i> handbook mailed

Important Dates

Late October	BLUE REASSIGNMENT LETTERS mailed
Late October	“Choosers” TAN LETTER mailed
November 15	Enrollment for 2009 begins
December 31	Enrollment period ends



National Medicare **TRAINING PROGRAM**

Open Enrollment Campaign Activities

Presented by:
Kelly DiNicolo
Director, Division of Campaign Management
Centers for Medicare & Medicaid Services



Open Enrollment Campaign Activities

■ Paid Media Overview By Market

- General
- African American
- Hispanic
- AAPI

■ Ad Copy By Market

- General
- African American
- Hispanic
- Chinese

General Market

Tactic	September					October				November					December				# Insertions/ Spots
	8/31	9/7	9/14	9/21	9/28	10/5	10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30	12/7	12/14	12/21	12/28	
Advertising																			
General Market																			
TV																			
Cable											173	174	176	174	174				871
Network News											16	18	18	18	19	8			97
Radio																			
Network Radio							75	75			75	75	75	75					450
State Net/Spot Radio																			
Print																			
Parade									1		1	1							3
USA Weekend									1		1	1							3
Senior Publications																			2
Type 1 & 2 Event Promo																			

African American Market

Tactic	September					October				November					December				# Insertions/ Spots
	8/31	9/7	9/14	9/21	9/28	10/5	10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30	12/7	12/14	12/21	12/28	
Advertising																			
African American																			
Radio																			
(Top 11 AA Markets)																			810
New York, NY							90	90	90		90	90	90	90	90	90			
Detroit, MI							90	90	90		90	90	90	90	90	90			
Los Angeles, CA							90	90	90		90	90	90	90	90	90			
Houston, TX							90	90	90		90	90	90	90	90	90			
Memphis, TN							90	90	90		90	90	90	90	90	90			
Dallas, TX							90	90	90		90	90	90	90	90	90			
St. Louis, MO							90	90	90		90	90	90	90	90	90			
Birmingham, AL							90	90	90		90	90	90	90	90	90			
Indianapolis, IN							90	90	90		90	90	90	90	90	90			
Jacksonville, FL							90	90	90		90	90	90	90	90	90			
Philadelphia, PA							90	90	90		90	90	90	90	90	90			
Print																			
New York, NY																			3 insertions/10mks
Detroit, MI							1				1			1					3
Los Angeles, CA							1				1			1					3
Houston, TX							1				1			1					3
Memphis, TN							1				1			1					3
Dallas, TX							1				1			1					3
St. Louis, MO							1				1			1					3
Birmingham, AL							1				1			1					3
Indianapolis, IN							1				1			1					3
Jacksonville, FL							1				1			1					3
Philadelphia, PA							1				1			1					3

Hispanic Market

Tactic	September					October				November					December				# Insertions/ Spots
	8/31	9/7	9/14	9/21	9/28	10/5	10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30	12/7	12/14	12/21	12/28	
Advertising																			
Hispanic																			
Radio																			
Local (Top 12 Hisp Markets)																			Total = 863
New York								44			44	44							132
Miami								14			14	14							42
Los Angeles								14			14	14							42
Houston								19			19	19							57
Chicago								22			22	22							66
Dallas								31			31	31							93
San Antonio								43			44	44							131
Phoenix								20			20	20							60
San Diego								20			20	20							60
Denver								12			12	12							36
El Paso								28			28	28							84
San Francisco								20			20	20							60
Print																			
Local (Top 6 Hisp Markets)																			2-3 insertions/6 mkts
New York								1			1	1							3
Florida								1			1	1							3
Texas								1			1	1							3
Arizona								1			1	1							3
California											1	1							2
Illinois											1	1							2

AAPI Market - Print

Tactic	September					October				November					December				# Insertions/ Spots
	8/31	9/7	9/14	9/21	9/28	10/5	10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30	12/7	12/14	12/21	12/28	
Advertising																			
AAPI																			
Print																			
Korean American																			
LA								4	3		4	2		4	2	2			21
New York								4	3		4	2		4	2	2			21
DC								2	1		2	1		2	1				9
San Francisco								3	2		2	1		2	1	1			12
Chicago								2	1		2	1		2	1				9
Seattle								3	2		2	1		2	1	1			12
Philadelphia								2	1		2	1		2	1				9
Atlanta								2	1		2	1		2	1				9
Hawaii								2	1		2	1		2	1				9
Dallas & Houston								3	2		2	1		2	1	1			12
Chinese American																			
New York								4	3		4	2		4	2	2			21
San Francisco								4	3		4	2		4	2	2			21
LA								4	3		4	2		4	2	2			21
Boston								2	1		2	1		2	1				9
Chicago								2	1		2	1		2	1				9
DC								2	1		2	1		2	1				9
Hawaii & Seattle								3	2		2	1		2	1	1			12
Philadelphia								2	1		2	1		2	1				9
Houston								3	2		2	1		2	1	1			12
Phoenix								1	1		1	1		1	1	1			7
Portland								1	1		1	1		1	1	1			7
Vietnamese American																			
LA								4	3		4	2		4	2	2			21
Northern CA								4	3		4	2		4	2	2			21
Houston								1	1		1	1		1	1	1			7
Dallas								2	2		2	2		2	2	1			13
DC								2	1		2	1		2	1				9
Seattle								2	2		2	2		2	2	1			13
San Diego								1	1		1	1		1	1	1			7
Boston								1	1		1	1		1	1				6
Philadelphia								1	1		1	1		1	1				6
Portland								1	1		1	1		1	1	1			7
AAPI Print Total: 370																			
Insertions																			

AAPI Market - Radio

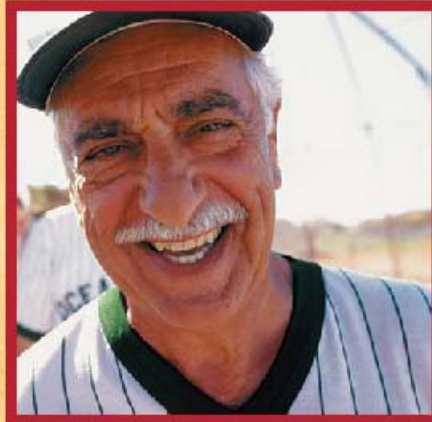
Tactic	September					October				November					December				# Insertions/ Spots
	8/31	9/7	9/14	9/21	9/28	10/5	10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30	12/7	12/14	12/21	12/28	
Advertising																			
Radio																			
Korean American																			
LA								36	24			36	24		36	24	12		192
New York								36	24			36	24		36	24	12		192
Chinese American																			
New York								36	24			36	24		36	24	12		192
LA								36	24			36	24		36	24	12		192
Vietnamese American																			
Southern CA								36	24			36	24		36	24	12		192
Northern CA								36	24			36	24		36	24	12		192
AAPI Radio Total Spots:																			
1,152																			

General Market Ad Copy

OFFICIAL MEDICARE ANNOUNCEMENT

2008 MEDICARE OPEN ENROLLMENT: NOV. 15 - DEC. 31

“Reviewing my current prescription drug plan really opened my eyes.”



“My drug plan’s monthly premium changed. So I compared other plans and found similar coverage at a better price.”

Plans Change. You Change. Take the time to see if your plan still works for you.

Three Ways to Review and Compare Plans - Get the help you need:

- **Call 1-800-MEDICARE (1-800-633-4227).** Call us anytime for help by a trained Medicare representative.
- **Visit www.medicare.gov.** Compare costs, coverage and more. Get an estimate of your out-of-pocket costs for the year.
- **See the listing of plans in your 2009 Medicare & You handbook** and information sent to you by your plan.

Review your plan and act early to avoid any inconvenience at the pharmacy counter in January.

*My Health.
My Medicare.*



www.medicare.gov
1-800-MEDICARE
(1-800-633 4227)
TTY 1-877-486-2048

African American Ad Copy

OFFICIAL MEDICARE ANNOUNCEMENT

SOME THINGS YOU'RE JUST STUCK WITH.
YOUR MEDICARE PRESCRIPTION DRUG PLAN
ISN'T ONE OF THEM!

FALL OPEN ENROLLMENT: NOVEMBER 15TH TO DECEMBER 31ST



1. Review
2. Compare
3. Make changes

Plans Change. You Change. Take the time to see if your plan still works for you:



- ✓ Review your 2009 coverage. Find out if your drug plan has changed costs or changed coverage.
- ✓ If needed, ask someone you trust to help you look over your Medicare plans, or call 1-800-MEDICARE.
- ✓ Go to www.medicare.gov. You may be able to find similar plans at a better price.

My Health,
My Medicare.



www.medicare.gov | 1-800-MEDICARE | 1-800-633-4227 | TTY 1-877-486-2048
ACT EARLY TO AVOID ANY INCONVENIENCE AT THE PHARMACY COUNTER IN JANUARY.

Hispanic Ad Copy

Anuncio Oficial de Medicare 2008

Periodo de Inscripción Abierta de Medicare
Del 15 de noviembre al 31 de diciembre de 2008



“Revisar nuestro plan de recetas
médicas nos ayudó a abrir los ojos.”

“Las cuotas mensuales de nuestros planes de recetas médicas cambiaron.
Por eso, comparamos nuestros planes con otros ofrecidos por Medicare y
encontramos otros con cobertura similar y aún más baratos.”

**Sus planes cambian. Su salud cambia. Asegúrese de que su plan de
recetas médicas aún esté cubriendo todas sus necesidades de salud.**

Hay cuatro maneras de obtener ayuda para revisar y comparar los planes disponibles:

- Llame a un consejero local experto e imparcial al <insert local number here>.
- Revise las listas de planes que aparecen en la guía *Medicare y Usted* y también la información que su seguro le envió;
- Llame gratis al 1-800-MEDICARE (1-800-633-4227). Los usuarios de teléfono de texto (TTY) deben llamar al 1-877-486-2048.
- Visite www.medicare.gov, en donde podrá comparar costos, cobertura y otros beneficios y obtener un estimado de los gastos directos de su bolsillo para el año siguiente.

Revise su plan y actúe rápido. Así evitará cualquier inconveniente con sus recetas médicas en enero.

1-800-633-MEDICARE (1-800-633-4227)
TTY 1-877-486-2048 • www.medicare.gov



*Mi Salud.
Mi Medicare.*

AAPI Ad Copy

聯邦醫療保險官方告示

2008 年度聯邦醫療保險公開加入時段：11月15日－12月31日

為您節省聯邦醫療保險處方藥計劃的費用。



什麼人：聯邦醫療保險者

什麼時候：從11月15日至12月31日。

什麼事：檢閱您的聯邦醫療保險處方藥計劃。
比較您現有的含保範圍和其它聯邦醫療保險的各項選擇。
為您下一年度聯邦醫療保險含保範圍作適當的改變。

為什麼：您下一年度的處方藥計劃月費可能會改變。
這裡有許多聯邦醫療保險處方藥計劃可供選擇。
這裡可能有其它的計劃有相似的含保範圍而付較佳的價錢。

怎麼做：這裡有四種方法來檢閱和比較現有的計劃：

- 查閱您的聯邦醫療保險與您手冊內所列的各項計劃。
- 請致電1-800-MEDICARE (1-800-633-4227), TTY 聽障者請致電 1-877-486-2048。
- 上網搜尋 www.medicare.gov。
- 如果您需要中文，全美亞太裔耆老中心可協助您。
請致電 1-800-582-4218。

及早行動，以避免1月份時在藥房櫃台上的任何不便。



我的健康。
我的聯邦醫療保險。



National Medicare **TRAINING PROGRAM**

2008 Annual Election Period Marketing Surveillance

Presented by:
Michael Kavouras
Acting Director, Division of Medicare Advantage Operations
Centers for Medicare & Medicaid Services



CMS' Commitment to Transparency and Beneficiary Protection

■ September 15, 2008 CMS Press Release

- “The regulations give insurers bright-line guidance on what types of marketing activities are acceptable and what types are not acceptable. Medicare beneficiaries can be assured that we will monitor marketing activities and move aggressively with enforcement measures or other actions if these rules are violated.”

- *CMS Acting Administrator Kerry Weems*

Medicare Improvements for Patients and Providers Act (MIPPA)

- Effective in July 2008, this law made a number of changes to the Medicare Advantage (MA) and Part D Programs (PDP).
- Specifically, the law enacted numerous provisions designed to protect Medicare beneficiaries from deceptive or high-pressure marketing tactics, which applies to:
 - private insurance companies;
 - agents and brokers; and
 - any contractors or downstream entities (i.e. field marketing organizations).

New Marketing Regulations

- Issued September 15, 2008
- The rule recodifies and modifies existing marketing regulations and finalizes six new marketing provisions which prohibit
 - Meals at promotional and sales events;
 - Unsolicited contact by plans and their agents (includes telemarketing);
 - Cross-selling of non-health care related products; and
 - Sales presentations and distribution of applications at educational efforts.

2008 AEP Marketing Surveillance Strategy

- The new MIPAA marketing regulatory provisions prevent agents and brokers from engaging in sales and marketing activities that may pressure beneficiaries to make plan choices for reasons other than those that best meet their health care needs.
- Comprehensive surveillance strategy established to detect, prevent, and respond to incidents of marketing violations.

2008 AEP Marketing Surveillance Strategy

Communication

Surveillance



Compliance and Enforcement

Communication: MA and PDP Organizations

- Communication issued via
 - Marketing Regulations;
 - Guidance Documents;
 - Press Releases; and
 - HPMS Memoranda.
- Shared goals to ensure organizations understand
 - Required compliance responsibilities in light of the new MIPPA marketing provisions; and
 - CMS' robust surveillance objectives.

Communication: State Partners

- Memorandum of understanding (MOU) with all 50 States outlining collaboration and information sharing.
- Communication strategy paper for Regional Office Department of Insurance (DOI) Liaisons and SHIPs.
- Open lines of communication for receipt of agent/broker complaints, as well as cooperation in taking action against non-compliant agents/brokers.
 - e.g. cooling off period enforced by State DOIs during investigations.

Communication: SHIPs

- Looking for opportunities to work directly with partners in the beneficiary advocacy community and organizations such as yours to ensure effective communication and facilitate information sharing in areas of mutual concern.

SHIP Communication Strategy

- Leverage existing CMS relationships with partners in the beneficiary advocacy community to:
 - Promote information sharing regarding allegations of agent / broker marketing violations;
 - Obtain advance notice of marketing events scheduled at facilities such as congregate living facilities and ICR/MR facilities so that CMS can designate a 'secret shopper' to observe the marketing event;
 - Acquire additional creative solutions for detecting and preventing agent and broker marketing abuses; and
 - Allow partners to directly communicate agent and broker related grievances or complaints to CMS for investigation.

Horizontal Surveillance Strategy

- Casts a strategically targeted net to capture information from
 - All MA and PDP Organizations; and
 - All States and territories.
- Utilizing disproportionate sampling for high-risk beneficiaries and high-risk geographic regions.

Horizontal Surveillance Activities

- Secret shopping of marketing events
- Secret shopping of call centers
- Clipping Service
- Data Analysis
 - Complaints Tracking Module
 - Rapid disenrollment
- Readiness Online Assessment Tool

Vertical Surveillance Strategy

- Contracted auditors and CMS staff conduct *targeted* surveillance activities.
- Fewer activities, but more in-depth analyses.
- Surveillance of high-risk MA and PDPs identified as outliers through horizontal surveillance activities.

Vertical Surveillance Activities

- Secret shopping of marketing events
- Outbound calling to Medicare beneficiaries
- Review of recorded enrollment calls

Compliance and Enforcement Strategy

- Ensures that the information collected through surveillance activities leads to timely and effective compliance and enforcement actions.
- Strong partnership and information sharing between various CMS components and contractors.
 - *Timely* escalation of serious deficiencies from surveillance activities for immediate follow-up.
 - May include additional surveillance or result in immediate compliance action.

Compliance and Enforcement Activities

- Surveillance data are aggregated and analyzed for outliers.
- Focused audits are conducted.
- CMS expects organizations to take immediate and proactive steps to ensure compliance with all new marketing provisions.
- Outliers and organizations demonstrating non-compliance are subject to any available compliance and enforcement actions.

Impact on Beneficiaries

- Protection from deceptive or high-pressure marketing tactics to make plan choices for reasons other than those that best meet their health care needs by entities offering Medicare private plans and their sales agents
- Enhanced ability to report allegations of abusive marketing tactics to oversight agencies for investigation.

Impact on Organizations

- Surveillance data strengthens the assessment of an organization's performance across operational areas.
- CMS uses objective performance results to assess compliance.
- Organizations found to be outliers are subject to direct compliance and enforcement actions, including but not limited to
 - Civil monetary penalties;
 - Limitations on provision of services; and
 - Corrective action plans.

If you are interested....

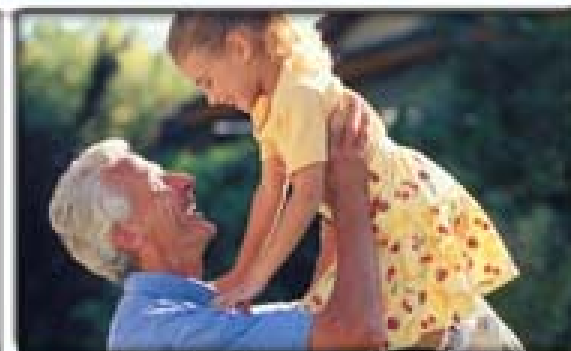
- If you are interested in partnering with CMS in this important initiative, or have any questions regarding this initiative, please send an email to PartnerSurveillance@cms.hhs.gov



National Medicare **TRAINING PROGRAM**

New Marketing Guidelines Update

Presented by:
Amy Larrick
Division of Policy, Analysis & Planning
Centers for Medicare & Medicaid Services



Marketing Provisions

- Includes new guidance and codification of existing guidance
- Current guidelines apply unless indicated otherwise in regulation or guidance
- Regulations and guidance posted at www.cms.hhs.gov/healthplansgeninfo
- Questions to regulationquestions@cms.hhs.gov

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