Program Memorandum Intermediaries/Carriers

Transmittal AB-01-173	Date: DECEMBER 5, 2001

CHANGE REQUEST 1964

SUBJECT: **Name Transition From Health Care Financing Administration (HCFA) to Centers for Medicare & Medicaid Services (CMS) – CMS Identity Mark Guidelines**

This Program Memorandum (PM) is a follow-up instruction to PM AB-01-133, Change Request 1870, which provided interim instructions regarding the name transition from HCFA to CMS. CMS now has an identity mark (also known as alpha representation and logo). This PM provides information and instructions on the use of the CMS identity mark.

This instruction addresses **only** non-standard systems changes. Due to the large number of estimated standard systems programming hours to make these changes, instructions for standard systems changes will come at a later date. **Therefore, do not attempt to make any changes that will necessitate changes to the standard systems at this time.**

Beginning with those documents and correspondence most visible to beneficiaries and providers; then continuing with all other documents and correspondence, you are to replace the HCFA name and/or identity mark with the CMS name and/or identity mark. **You may now make necessary changes to your Web sites.**

The attachment is a summary of the June 14, 2001, press release announcing the new name of the agency. You may use this summary as needed (e.g., on Web sites) at your discretion. The use of this attachment is **not** mandatory.

Authorized Users

The CMS mark is available for use by all contractors involved in CMS programs. The mark may not be used for promotion of private, for-profit entities.

Use of Identity Mark on Items for Sale or Distribution

Only CMS and its contractors may use the CMS name or mark on items they distribute, provided the items follow guidelines for National Gifts as stated below. Items with the CMS mark cannot be sold.

National Gifts Provision

Some entities may choose to offer gifts to the public. This practice is permitted as long as the gifts are of nominal value and are provided whether or not the individual is enrolled in a CMS program.

Nominal value is defined as an item worth $15 or less, based upon the retail purchase price of the item.

THE FOLLOWING PAGE BEGINS THE FORMAL GUIDELINES FOR THE CMS IDENTITY MARK USAGE.

CMS-Pub. 60AB

CMS IDENTITY MARK USAGE GUIDELINES

Positive Identity Mark

The CMS mark is composed of two elements that appear in an unchangeable fixed relationship:

1. The letters CMS and the words Centers for Medicare & Medicaid Services, and

2. The horizontal and vertical bars.

The elements are designed to be used as a unit. Always use reproducible art available on the CMS Web site. **Do not attempt to recreate the identity mark.**

Negative Identity Mark

The negative mark uses the same composition as the positive mark. The mark is reversed out in white. The negative mark must not be placed on a background that is tonally lighter than 100 percent of the color. Careful consideration should be given to choosing a background color that maintains sufficient contrast with the mark.

The negative mark is available on the CMS Web site. **Do not attempt to recreate the identity mark.**

Approved Colors

The 2-color identity mark is the preferred version. It uses PMS 110 (Gold) and PMS 287 (Blue).

The 1-color version using PMS 287 (Blue) can be used on documents where only one approved CMS color ink is used.

A second 1-color version using Black can be used on documents where neither of the approved CMS color inks are used.

The negative brand mark (white mark) can be used on documents where neither of the approved CMS color inks are used.

Four-color process (4/C process) versions are available for products that require 4/C-process production, such as billboard signage and digital printing. Since the color varies when printed on different stocks (paper), the colors have been customized for coated and uncoated stocks. **Automatic conversion from PMS spot color to 4/C-process is not acceptable.**

All positive marks are to be used against white backgrounds and colors that are tonally lighter than 20 percent of the color. When placing the identity mark on a photographic background, ensure that there is great contrast between the mark and the image.

All marks in approved colors are available on the CMS Web site. **Do not attempt to recreate the identity mark.**

Minimum Size

In order to maintain clear legibility of the CMS mark; never reproduce it at a size less than 1.5″ wide. This measurement is equal to the horizontal length of the entire mark. This measurement ensures that the Agency's name is legible.

1.5″

CMS
CENTERS for MEDICARE & MEDICAID SERVICES
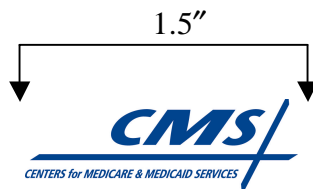
If the mark must be less than 1 ½" wide, the words "Centers for Medicare & Medicaid Services" should not appear. Versions of the logos without the words "Centers for Medicare & Medicaid Services" are available upon special request and with official approval from CMS Graphics. **Do not attempt to recreate the identity mark.**

If the mark is being used on the same page as the DHHS logo, the DHHS logo must be more prominent than the CMS mark, which it generally is due to its height.

Bleed-edge Indicator

The identity mark may not bleed off any edge of an item. The mark should sit at least 1/8″ inside any item's edges.

Clear Space Allocation

The clear space around the CMS mark prevents any nearby text, image or illustration from interfering with the impact of the mark. Any type of graphic elements must be at least "x" distance from the mark as shown by the illustration below. The measurement "x" can be defined as the height of the "M" (along the top) in the identity mark.

CMS
CENTERS for MEDICARE & MEDICAID SERVICES

Incorrect Use

In order to maintain the integrity of the mark, it is essential that the CMS identity mark be used correctly. Deviation from the guidelines can weaken the impact of the Agency's identity and program branding efforts.

- o   Do not alter the position of the identity mark elements.

- o   Do not alter or change the typeface.

- o   Do not rotate any of the identity mark elements.

o   Do not stretch, distort or otherwise alter the aspect ratio of the identity mark.

o   Do not position the identity mark too close to other items or images.

o   Do not alter the color of any of the identity mark elements.

o   Do not position the identity mark on a photographic background where there is insufficient contrast between the photographic image and the identity mark and typography.

o   Do not position the identity mark on colors that do not compliment the mark's colors.

The CMS identity mark files are available at http://cms.hhs.gov/images/cmsmark/.

Attachment

The *effective date* for this PM is December 5, 2001.

The *implementation date* for this PM is June 5, 2002.

These instructions should be implemented within your current operating budget.

This PM may be discarded December 31, 2002.

If you have any questions, contact Kathleen Jack, CMS Graphics at (410) 786-7214 or at Kjack@cms.hhs.gov or Whitney May, Center for Medicare Management at (410) 786-0490 or at Wmay@cms.hhs.gov.

Attachment
Summary of June 14, 2001 DHHS Press Release

On June 14, 2001, Secretary Tommy G. Thompson announced that the Health Care Financing Administration (HCFA) will be renamed to the Centers for Medicare & Medicaid Services (CMS).

As part of the renaming, CMS will be reorganized around three centers to clearly reflect what precisely it does and how it serves millions of Americans:

o   The Center for Beneficiary Choices will focus on the Medicare+Choice program and provide beneficiaries with information they need to make the best choice possible in choosing care.

o   The Center for Medicare Management will focus on the traditional fee-for-service Medicare program.

o   The Center for Medicaid and State Operations will focus on program administered by the states, including Medicaid, SCHIP and insurance regulation.

The new name certainly reflects a new attitude and a more apt description of what the agency does – administer Medicare and Medicaid. But perhaps the most important word in the new name is the last one: services.