

FIDA Marketing FAQ – October 16, 2014

Disclaimer: The [state marketing guidance](#) should be considered as an addendum to the [federal marketing guidance \(the Medicare Marketing Guidelines\)](#).

1. Q: How should Plans submit events for approval and will there be a specific format and timeframe for submission? In addition, should Plans submit events under educational events, or marketing/sales events?

A: Plan events can be classified as either educational events or marketing/sales events (informal or formal) and should be submitted per event in HPMS at least 7 days in advance of the event. If there is any change to the event, Plans are required to update the event information in HPMS at least 48 hours in advance. Marketing and educational events are required to be entered in HPMS for tracking and monitoring purposes (please refer to section 70.9.1 of the CY 2015 Medicare Marketing Guidelines). Please refer to the following sections of the federal marketing guidance for information regarding educational versus marketing/sales events:

- 70.8 – Prospective Enrollee Educational Events
- 70.8.1 – Enrollee-Only Educational Events
- 70.9 – Marketing/Sales Events and Appointments
- 70.9.1 – Notifying CMS of Scheduled Marketing Events

2. Q: If a potential Participant inquires about FIDA at an informal marketing event for our Medicare Plan and vice versa, can we educate them on the respective product?

A: Yes, you can educate potential Participants on the different products your Plan offers if they inquire about them.

3. Q: Can we serve refreshments and/or meals at marketing events? Can we serve meals at marketing events?

If the marketing event is a sales event, neither refreshments nor meals are permissible. If the marketing event is an educational event for existing FIDA participants, either refreshments or meals may be provided so long as they do not exceed the nominal gifts policy in section 70.1.1 of the CY 2015 Medicare Marketing Guidelines.

The final CY 2015 NY Marketing Guidance can be found at the following web address: <http://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/Downloads/FinalCY2015MarketingGuidanceNYFIDA.pdf>

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4. Q: Can Plans collect potential Participants' contact information since Plans are not involved in the enrollment process? For instance, if Plans have a brochure tear-off, can potential Participants leave their contact information on the form?

A: Consistent with section 70.6 of the CY 2015 Medicare Marketing Guidelines, during sales events, Plans may use a brochure tear-off to collect potential Participants' contact information but the tear-off must indicate their permission for a follow-up call.

5. Q: What level of education will FIDA Participants receive from MAXIMUS?

A: We are working with MAXIMUS on detailed scripts for Call Center Representatives and they will also have access to our networks so they can get information on participating providers. We will share these call scripts with Plans once they have been approved.

6. Q: Are Plans allowed to educate potential Participants on FIDA and warm transfer them to MAXIMUS for enrollment purposes? What if the Participant wants to leave FIDA and enroll in one of our other products? When we warm transfer them, can we enforce that information? Does MAXIMUS have a call script they would like Plans to use when transferring calls to them? Can we call potential Participants "Members" in our call center scripts?

A: Plans can educate Participants on what your products are within your organization but all enrollment information needs to be provided by MAXIMUS. Plans can warm transfer the Participant to MAXIMUS but please be sure to submit your call scripts to HPMS under marketing code 16743 Sales Scripts, for CMS and DOH approval before use. MAXIMUS has requested plan representatives provide their name, the name of the Plan and the reason for the call when transferring Participants.

7. Q: We are already getting calls in our call center from potential enrollees asking about FIDA, what should we do?

A: Give callers the phone number for NY Medicaid Choice, refer them to the NYSDOH website or provide them with the NYSDOH phone number. We are currently in the development stage of building our FIDA website. We will notify Plans when it is in production.

8. Q: Do providers need to hand out each Plan's brochure with whom they contract with? What if not every Plan they contract with has provided them with materials to distribute to their patients? Prior to 12/1/2014, can providers discuss FIDA with their patients?

A: As provided in section 70.11 of the CY 2015 Medicare Marketing Guidance, providers may distribute brochures for all of the Plans with which they contract. Providers are not expected to proactively contact all participating plans; rather, Plans must only ensure that a provider agrees to make available and/or distribute plan marketing materials and accept future requests from

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other plans with which the provider participates. As provided in section 1.167 of the Three-Way Contract, if not all Plans give providers brochures to distribute, providers must provide a list of the Plans they participate with. This list is not subject to marketing approval, however, any other plan marketing materials used by the provider must be submitted in HPMS by the Plan for review and approval. Prior to 12/1/2014, providers are permitted to discuss the FIDA program with their patients; however, they are not allowed to distribute any Plan-related materials.

9. Q: Disclaimers such as the multi-language insert, are taking up too much space on materials, making them more costly to produce. Do we have to include all disclaimers?

A: Plans are required to include the non-English language disclaimer on all marketing materials except the ID card (refer to section 50.4 of the CY 2015 New York Marketing Guidance for more information on this requirement). Separately, the Multi-Language insert must be included with the Summary of Benefits and Annual Notice of Change/Member Handbook (Evidence of Coverage) documents only (refer to section 30.5.1 of the CY 2015 Medicare Marketing Guidelines and the CY 2015 NY Marketing Guidance for more information).

10. Q: Can we still market to our current Members or do we have to wait for them to ask about FIDA before discussing it with them?

A: Once NYSDOH sends out the Region I FIDA Demonstration Announcement, after 12/1/2014, you can discuss FIDA and your FIDA plan with your current Members.

11. Q: Before the 12/1/2014 marketing start date, can we state in our monthly newsletter that we are trying to participate in the FIDA Demonstration?

A: No, any communications prior to 12/1/2014 will come from NYSDOH, providers and advocate groups.

12. Q: Do the Plans' websites have to be standalone or can there be a link on the homepage that redirects consumers to the FIDA page? Also, do all of the marketing documents need to be posted on the Plans' websites in the 6 most prevalent languages?

A: No, Plans do not have to have a standalone FIDA website. However, there must be a web address that allows FIDA Participants to directly access the FIDA webpage. Sections 100.2, 100.2.1, 100.2.2, 100.4, and 100.5 of the CY 2015 Medicare Marketing Guidelines (as modified by sections 100.2, 100.2.1, 100.2.2, and 100.5 of the CY 2015 NY Marketing Guidance) specify the required content of Plan websites. Section 30.5 of the CY 2015 NY Marketing Guidance specifies the documents that must be translated into the prevalent languages. Only the marketing documents posted to Plans' websites that are required to be available in the prevalent languages must also be posted in those languages.

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13. Q: Will CMS and NYSDOH be reviewing the translated materials and will review times remain the same as the English versions?

A: CMS and NYSDOH will review and approve the English versions of the documents. Plans are required to submit translated materials in HPMS as alternate format materials, which are not prospectively reviewed. Please refer to section 90.2.1 of the 2015 Medicare Marketing Guidelines and the HPMS marketing module user guide for more information.

14. Q: For Region I, can Participants access providers in Region II before the start date for Region II? Will Plans need to mail Participants an updated Provider and Pharmacy Directory?

A: Yes, to the extent that these providers have contracted with the Plan and are available. In addition, we would also like to clarify that according to section 2.15.6.1.5 of the FIDA Three-Way Contract, if there is a significant change to the provider network, Plans must send a special mailing of an updated Provider and Pharmacy Directory (see also section 60.4 of the CY 2015 Medicare Marketing Guidelines).

15. Q: When will the FIDA ID Card template be released? Can you please clarify what should be populated for the “Effective Date” and “Date Card Issued” on the Participant ID Card? Is it mandatory that the PCP field be populated?

A: This template was released through HPMS on 10/7/2014 and completed submissions are due in HPMS by COB 10/22/2014. For Voluntary enrollees, the “Effective Date” on the ID Card should be 1/1/2015. For Participants who enroll after the 20th of the month, the effective date of coverage will be the first of the following month. If an existing FIDA Participant has a change in membership, chooses a new PCP, etc. the “Effective Date” is the date the card is issued. When the PCP information is known, these fields should be populated.

16. Q: Does the Welcome Letter need to be sent to Participants annually?

A: No, the Welcome Letter must be sent only at the time of enrollment. For current members, an Annual Notice of Change must be received by September 30 each year, as provided in section 60.7 of the CY 2015 NY Marketing Guidance.

17. Q: What is the trigger for sending out Participant materials within the required timeframe?

A: As stated in sections 30.7 and 60.7 of the CY 2015 NY Marketing Guidance, the trigger is when Plans receive the Enrollment E-file from MAXIMUS.

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18. Q: When will the Ombudsman information be available to Plans? Will the Ombudsman hours match the other required hours of operation for the Demonstration?

A: NYSDOH is waiting on the Ombudsman Contract approval but will notify Plans once this information is available. Yes, the Ombudsman hours will be 8:00AM – 8:00PM.

19. Q: Regarding marketing enforcement, does NYSDOH have any specific metrics to identify unusual shifts or patterns?

A: NYSDOH currently does not have established metrics yet but we will be using current Plan enrollment numbers as a base. For example, if we see a very large increase in the number of Participants moving from one product to another, that would be considered an unusual shift and we will investigate further. In addition, consistent with the provisions in section 2.15.4.5 of the Three-Way Contract, CMS and NYSDOH may conduct additional types of review of the FIDA Plans' Marketing, Outreach, and Participant Communications activities.

20. Q: Are we able to distribute documents that remain in a conditional approval status?

A: Yes. As provided in section 90.3.1 of the CY 2015 Medicare Marketing Guidelines, after execution of the FIDA Three-Way Contract, a Plan's marketing materials will shift from "conditional approval" to "approval."

21. Q: Will there be an Integrated Denial Notice template?

A: Yes, there will be an Integrated Denial Notice template as well as other appeals notice templates. These notices will be sent out for comment prior to final distribution.

22. Q: Will there be a Medicaid appeals notice and a Medicare Part D appeals notice?

A: There will be integrated notices that will cover both Medicare and Medicaid services, with the exception of Medicare Part D. Part D appeals will continue to be noticed separately consistent with the requirements of Chapter 18 of the Prescription Drug Benefit Manual (refer to <http://cms.gov/Medicare/Appeals-and-Grievances/MedPrescriptDrugApplGriev/index.html>).

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