DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Center for Medicare 7500 Security Boulevard Baltimore, Maryland 21244-1850



MEDICARE DRUG & HEALTH PLAN CONTRACT ADMINISTRATION GROUP

DATE: May 30, 2014

TO: Medicare Advantage Organizations

Medicare Advantage-Prescription Drug Organizations

Section 1876 Cost Plans

Prescription Drug Plan Sponsors Employer/Union-Sponsored Group Health Plans

Medicare-Medicaid Plans

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SUBJECT: HPMS Marketing Module Updates

The Centers for Medicare and Medicaid Services (CMS) is pleased to announce updates to the HPMS Marketing Module, effective Friday, May 30, 2014, which support the material submission policies found in the Medicare Marketing Guidelines (MMG). This memorandum highlights certain technical changes to the module that affect material submission. Module users will also see changes to the page layout designed to streamline the submission process. For a complete list of updates please see the Marketing Module user guide, which is available within the Marketing Module and will also be updated on May 30.

Changes to Category and Material Type Dropdown Menus

To emphasize the material type, category titles and material descriptions will appear before the category/code numbers. For example, the Advertising category will be displayed as "Advertising (4000)." Categories and material descriptions will appear in alphabetical order. Medicare-Medicaid Plans will see a state prefix prior to the description. Previously, the category/code numbers were displayed before the description.

Model Materials and File & Use Materials

Plans will be required to explain why they either chose to modify/not use a model when one was available, or did not use File & Use for qualifying material. We are collecting this information to improve our models and understand Plan concerns that led them to select a 45-day review over File & Use.

Updates to Material Types/Codes and the Material Code Lookup

To simplify the submission process, we made the following changes:

- Removed Surveys/Assessment (code 6010) because these documents are not subject to review, as stated in section 20 of the MMG.
- Merged the following material types to streamline the submission process:

New Material Name	Previous Codes
Sales Scripts and Presentations	6013 Sales Scripts
(6013)	6014 Sales Presentations
Other Scripts (6017)	6003 End of Month Enrollment Scripts
	6004 SSA Plan Premium Payment Script
	6005 LIS Losing Deemed Status Script
	6007 Non-Renewal Script
	6008 Post-Enrollment Member Outreach Script

In addition, Plans can now download the Marketing Code Lookup information into an excel file. We strongly recommend that Plans regularly download the most recent version of the Material Code Lookup, as changes are made throughout the year.

Submission of Template Materials

We have made the following changes to the template submission process to reinforce our current policies:

- Changed the field from "Template Material" to "Standard Template" to make it clear that Plans should select Standard Template only when submitting documents that meet the definition in the MMG 90.8.1.
- Plans can only submit materials as Standard Templates if they have an accompanying final expedited review option, which they use to meet the requirement to submit populated versions of these templates.
- Added instructions to clarify how to submit populated templates for the following final expedited review options: Enrollment Form and Related Docs (1089), Enrollment/Disenrollment/Payment Notices (2088), General Formulary/Drug (5042), and Presentations/Scripts (6012). The instructions are available by clicking on the hyperlinked "Code Description" in the Material Code Lookup.
- Plans should not identify static templates (as defined in the MMG 90.8.2) as Standard Templates within HPMS since Plans are not required to submit populated versions of these templates.

Additionally, Plans should submit populated templates using the same Template Material ID as the corresponding Standard Template so that CMS can associate it with the Standard Template.

Errata Material Submission

To ensure proper review of errata material, Plans must submit errata material on the New Errata Material page. The option to submit errata materials on the New Material and New MCE Material pages is no longer available. This change does not apply to Medicare-Medicaid Plans, which should continue to submit errata material as they currently do.

We recommend the Marketing Module user guide as a primary resource for questions regarding the Module. If you have additional technical questions, please contact the HPMS Help Desk at hpms@cms.hhs.gov or 1-800-220-2028. If you have questions regarding material submission policy, please contact your Account Manager.