**Compliance Tips: Activities conducted by call center associates**

The Centers for Medicare & Medicaid (CMS) requires health plans to comply with The CMS Medicare Communications and Marketing Guidelines (MCMG) when it comes to communicating with our members and prospective members.

This information is designed to provide a guideline for navigating that fine line between what plan representatives can, and cannot discuss, as a non-licensed versus licensed call center representative, according to The Centers for Medicare & Medicaid (CMS). **We are asking you to help us in our compliance efforts by sharing the following guidelines with both your licensed, and non-licensed, call center representatives.**

Certain activities conducted by call center associates marketing Medicare Advantage-Prescription Drug plans (MA, MA-PD) and Medicare Prescription Drug plans (PDP)s, do not require the use of state-licensed marketing representatives, unless otherwise required by state law.

**Non-licensed representatives may:**

* **Provide factual plan information such as:**
	+ Benefit and cost sharing information, including out-of-network information
	+ Formulary information, including transition process
	+ Claims submission, processing, and payment information
	+ Grievance, organization/coverage determination (including exceptions) and appeals process information
	+ Information on extra help, including how the beneficiary can obtain extra help
	+ Current true out-of-pocket status (applicable for Part D)
	+ Information on how to obtain needed forms
* **Provide Service area information such as:**
	+ Pharmacy information, including whether a beneficiary’s pharmacy is in the Part D sponsor’s network
	+ Provider information, including whether a beneficiary’s physician is in the plan’s network
* **Fulfill a request for materials such as:**
	+ Request for pre-enrollment information
	+ Provide information on replacing an enrollee’s identification card and
* **Accept demographic information in order to complete an enrollment application at the request of the prospective member.**

**Licensed agents/brokers who also serve in a customer service role cannot act simultaneously as both a customer service representative and as a sales/marketing agent. These representatives must:**

* Make it clear to the prospective beneficiary when their role changes from that of a customer service role, to a marketing/sales role.
* Receive the beneficiaries consent; ideally confirmed with a yes/no question to act as their sales/marketing agent
* Clearly inform the beneficiary they are enrolling into the Plan (using the specific Plan name/type) if a sales call progresses to enrolment over the phone.

*The information above is based on marketing and communication rules for Medicare Advantage-Prescription Drug plans (MA, MA-PD), Medicare Prescription Drug plans (PDP)s as outlined in the CMS Medicare Communications and Marketing Guidelines (MCMG).*