

# **Medical Care Advisory Committee**

## **Beneficiary Engagement Subcommittee Health Plan Marketing Materials Consultation**

**Debra Farrington  
NC Medicaid**

**May 17, 2019**

# Marketing objectives

- **Build awareness by publicizing NC Medicaid Managed Care**
- **Educate potential members about health plan options so they can make an informed decision to enroll in a PHP**
- **Enhance, support and complement outreach activities and communication provided by enrollment broker, DSS and Department**

## Sources

PHP RFP V.B.4.a; V.B.4.b; V.B.4.I.; 42 C.F.R. § 438.104

# Ongoing communication with health plans

- Presented marketing materials review objectives during onboarding sessions
- Shared common submission issues during ongoing PHP/Member Operations call
- Answer PHP questions through formal Q&A submission process
- **1:1 conference call, with resulting Q&A shared with all PHPs in weekly Plan Administration message**

# Marketing materials review and approval guidelines

Health plans must submit marketing materials for review:

- 60 days before release date: Phase 1 marketing materials\*
  - 90 days for other materials or updates
  - Within 30 days: Update materials due to changes in ILOS or value-added services
  - Tobacco cessation; working with Quitline vendor, materials are still to be submitted for review and approval
- Marketing activities may start 8 weeks before Phase 1 open enrollment:
  - May continue throughout contract term

\*Contract amendment in response to Health Plans' request to develop and release materials for Phase 1 open enrollment

Sources: PHP RFP V.C.2.p.ii.b); V.C.2.q.iii.b); V.B.4.j.iii.b); V.B.4.j.v.c); V.B.4.j.v.b); V.C.7.g.iii.c); 42 C.F.R. § 438.104(b)(1)(v).

# Marketing material code

- Code is assigned to all materials
- Purpose
  - Track throughout submission, review and approval process
  - Identify source and intended regions
  - Detect outdated materials and messages
- Translated materials use the same code
- 90-day review of previously approved materials
  - No substantial modifications: No change
  - Substantial modifications: New marketing code

## Sources

PHP RFP III.69 and 70; V.B.4; 42 C.F.R. § 438.104(a) and 42 C.F.R. § 438.104(b)(1)(v).

# Federal requirements for MCAC participation

**42 C.F.R. 438.104(c)**

<https://www.law.cornell.edu/cfr/text/42/438.104>

**State agency review.** In reviewing the marketing materials submitted by the entity, the State must consult with the Medical Care Advisory Committee established under § 431.12 of this chapter or an advisory committee with similar membership.

**§ 1932(d)(2)(A)(i)(I) of the Social Security Act**

[https://www.ssa.gov/OP\\_Home/ssact/title19/1932.htm](https://www.ssa.gov/OP_Home/ssact/title19/1932.htm)

**(ii) Consultation in review of market materials.** In the process of reviewing and approving such materials, the State shall provide for consultation with a medical care advisory committee.

# MCAC consultation schedule

## Friday, April 26

### MCAC BENEFICIARY ENGAGEMENT SUBCOMMITTEE

- Marketing materials overview: purpose, contract requirements, review process
- Q&A
- Request feedback on materials

## Thursday, May 3

### SUBCOMMITTEE shares comments with Department

Debra.Farrington@dhhs.nc.gov  
Julia.Schoenberger@dhhs.nc.gov

## Friday, May 4

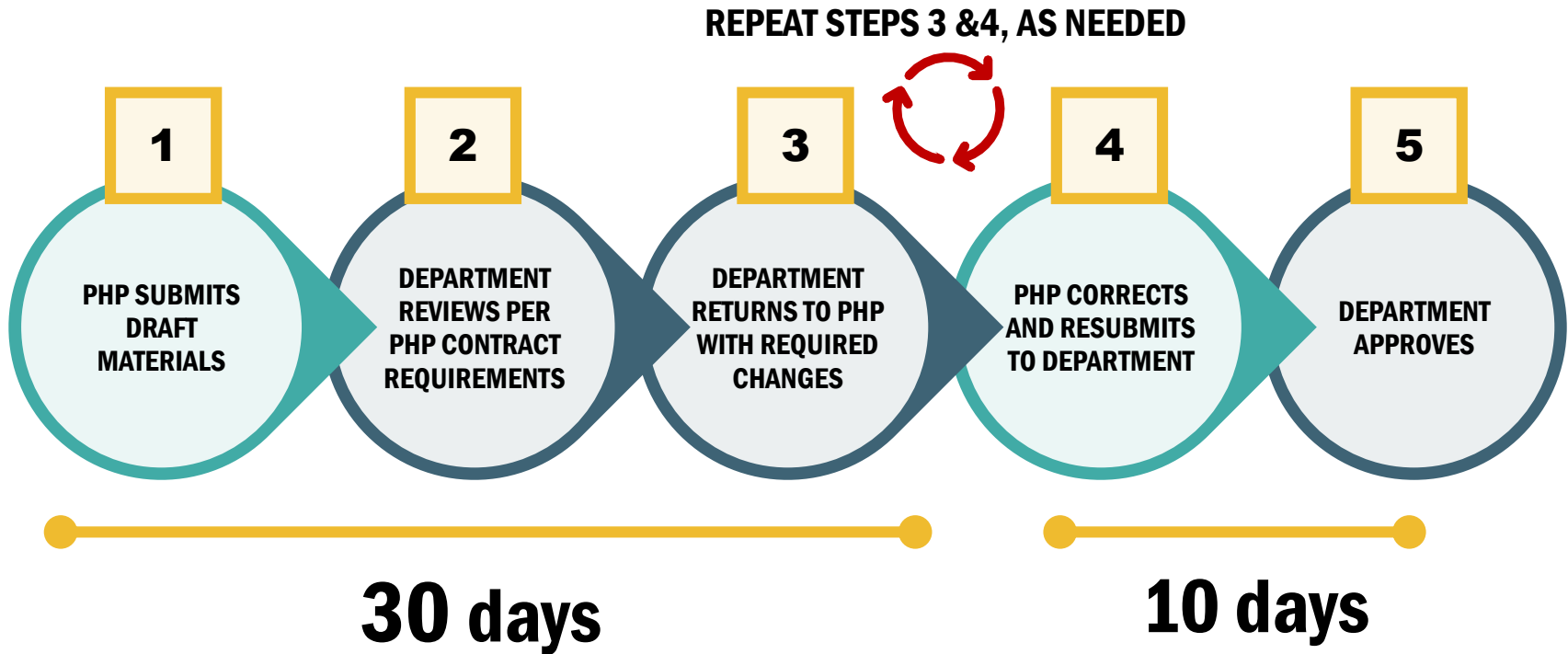
DEPARTMENT  
incorporates  
Subcommittee's comments  
in material reviews

## Friday, May 17

### FULL MCAC

- Marketing materials overview: purpose, contract requirements, review process
- Summary of MCAC Beneficiary Engagement Subcommittee feedback
- Q&A

# Marketing material submission & review process





# Marketing materials overview

- **Over 300 individual marketing items and campaigns received to-date, including:**
  - Brochures, flyers, posters
  - Booth displays, banners, easels
  - TV and radio spots
  - Website graphics and text
  - Decals, window signage
  - Images
  - Social media posts and images
- **MCAC Subcommittee members reviewed a representative sample of unapproved materials across the Health Plans**

# Department and Subcommittee review guidelines

## **Review for compliance with contract requirements, including:**

- Protection of members from coercive or misleading practices
- Clear wording; generally 6<sup>th</sup> grade reading level or below (mark as needed to simplify; do not edit)
- Images that do not represent Medicaid managed care populations or that are culturally insensitive
- Distribution to entire region served by the Health Plan; no discrimination of rural or underserved areas
- Potential for distribution in prohibited areas (such as exam rooms)
- No marketing of multiple lines of business (e.g., Medicare Advantage)
- Accessibility; e.g., Closed captioning of videos

## **All comments were welcome; however, it was not necessary for subcommittee to review:**

- Design, artwork, color scheme, unless directly affecting a cultural or other member need
- Temporary images that are specifically used to indicate placement (may have “FPO” on image)
- Taglines and branding that do not conflict with contract requirements
- Marketing codes (will be added when final)
- Schedule for release into the market (this has already been asked of all Health Plans)

# Key requirements

- **Written marketing materials**
  - Health care settings: Allowed only in common areas
  - Not allowed where patients primarily intend to receive health care services, such as emergency rooms, patient hospital rooms, exam rooms and pharmacy counter areas
- **Giveaways and nominal gifts**
  - Available to the public and distributed in-person only
  - Do not exceed \$10 in value per person
  - Not connected to enrollment
- **Value-added services must be approved by the Department**

## Sources

PHP RFP V.B.4.j.i.a); V.B.4.j.i.d); V.B.4.j.ii.m); V.B.4.j.ii.n); V.B.4.j.iv.a); V.B.4.j.iv.b); V.B.4.j.ii.f); 42 C.F.R. § 438.104(b)(1)(v).

# General topics of comments

- **Accessibility:** Ensure font size, captioning, etc., is reflected in final material
- **Reading level:** Use Flesch-Kincaid assessment tool to ensure readability
- **Infographics:** Must be simple, understandable
- **Incentives:** Need to review rewards programs to ensure contract compliance (e.g., \$10 nominal gift threshold)
- **Dual marketing:** Ensure there is no marketing of Medicaid and other lines of business (e.g., Medicare Advantage and Medicare Drug Plans)
- **Culturally and member appropriate:** Carefully review for potential interpretations in language, tag lines, imagery and placement of marketing materials
- **Choice counseling:** Watch for wording that crosses into Enrollment Broker responsibilities

## Sample review comments

“Splash page shows a retirement-age white male working out in a private gym. With duals carved out I don’t think that the pic is representational. Furthermore, Medicaid beneficiaries aren’t likely to belong to a private gym...”

“[Materials had] no mention of this being a Medicaid plan or a Medicaid *managed care* plan in their materials; I wouldn’t know what they are selling other than health care.”

“NC Medicaid must review and approve how [social media] ads are targeted to ensure that the demographic and geographic targeting criteria used (which can be very sophisticated and targeted) are not discriminatory (V.B.4.j.ii.f).”

## Next steps

- **MCAC input is reflected Department reviews marketing material submissions**
- **Health Plans will receive approval of materials with value-added services after those services are approved by the Department**
- **Health Plans will receive approval of materials at the same time to provide equal opportunity for marketing**

# Questions

**Medicaid transformation website:  
[ncdhhs.gov/Medicaid-transformation](https://ncdhhs.gov/Medicaid-transformation)**