

November 16, 2018

Ms. Seema Verma  
Administrator, Centers for Medicare & Medicaid Services  
U. S. Department of Health and Human Services  
200 Independence Avenue, SW  
Washington DC 20201

Dear Administrator Verma,

We are writing to express our concerns with the Centers for Medicare & Medicaid Services' (CMS) education and outreach materials for the current Medicare Annual Coordinated Election Period (ACEP), which together seem to promote Medicare Advantage (MA) over traditional Medicare.

Specifically, as part of its eMedicare initiative, in October 2018 CMS announced a suite of online tools aimed at assisting consumer decision-making, including a [Compare Coverage Options](#) quiz that poses 5 questions to individuals to help them compare MA with traditional Medicare.<sup>1</sup> We appreciate CMS' efforts to develop more consumer-friendly materials. However, we are concerned that this tool may inappropriately and prematurely encourage individuals to enroll in MA — by making overly-broad suggestions to do so when more nuance is required, and by failing to present individuals with the full array of Medicare coverage options.<sup>2</sup>

For example, the quiz does not account for essential information consumers need to make optimal coverage decisions, such as whether their providers are in an MA plan's network, and the future barriers to coverage they may face due to Medigap's guaranteed issue limitations. These considerations are paramount for many, yet they are not incorporated into the quiz or mentioned on the results page. The recommendations triggered by Question 2 — “Do you want extra coverage to help pay the 20% of your medical bills Original Medicare doesn't cover?” — are particularly concerning. If one answers “yes” to this question (in combination with, e.g., an affirmative response to Question 1 and/or 3 but not 4 or 5), the tool suggests joining an MA plan. There is no mention of any other supplemental coverage options, such as Medigap (either alone or with a Part D plan), which can cover the cost-sharing amounts referenced. Determining which coverage option is most appropriate for an individual — MA or traditional Medicare with a Medigap and Part D plan — is a highly-personalized, multi-factorial process. A general recommendation that MA is the best choice does not fairly recognize or fully contemplate this reality.

We are also concerned that CMS' current ACEP email campaign and other messaging to beneficiaries is improperly biased towards MA. Emails with subject lines such as “Could Medicare Advantage be right for you?” or “Get more benefits for your money” start the body of text with “Check Out Medicare Advantage.” These messages make no attempt to inform beneficiaries about their coverage options

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<sup>1</sup>CMS announces new streamlined experience for Medicare beneficiaries, October 1, 2018:

<https://www.cms.gov/newsroom/press-releases/cms-announces-new-streamlined-user-experience-medicare-beneficiaries-0>.

<sup>2</sup> For further discussion of these web tools, see, e.g., the Center for Medicare Advocacy's Weekly Alert (October 5, 2018) available at: <http://www.medicareadvocacy.org/medicare-enrollment-updates/>.

under traditional Medicare, potentially preventing them from making a fully-informed choice. Another email with the subject line “5 things you’ll want to do during Open Enrollment” similarly does not reference traditional Medicare, but instead prompts people to engage in a to-do list “So you can get the best health care plan that fits your needs and budget.” Similarly, official advertisements from the Department of Health and Human Services promote MA, without mention that enrolling in traditional Medicare is also an option during the ACEP.<sup>3</sup>

Although we are well into the 2018 ACEP, CMS can still act to achieve greater parity in its materials in the remaining weeks when many people make their enrollment decisions. Accordingly, we request that CMS act quickly to revise both its online web tools and the ACEP beneficiary outreach messages so they more equally and accurately reflect the availability of traditional Medicare coverage options.

As we and other beneficiary advocates have previously expressed, we share the agency’s desire to empower beneficiaries with the tools and resources they need to make optimal Medicare coverage choices.<sup>4</sup> We look forward to continuing to work together to ensure all CMS communications are balanced and objective regarding traditional Medicare and MA, during this Annual Enrollment Period and beyond.

Thank you for your attention to our concerns.

Sincerely,



Judith Stein  
Executive Director  
Center for Medicare Advocacy



Joe Baker  
President  
Medicare Rights Center

Cc:

Demetrios Kouzoukas, Principal Deputy Administrator & Director, Center for Medicare  
Amy Larrick, Director, Medicare Drug Benefit and C and D Data Group  
Jerry Mulcahy, Director, Medicare Enrollment and Appeals Group

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<sup>3</sup> See, e.g., HHS Video on YouTube: <https://www.youtube.com/watch?v=HwIvi2eF21Q>.

<sup>4</sup> Letter from Justice in Aging, Medicare Rights Center and Center for Medicare Advocacy to CMS Administrator Verma (October 1, 2018), available at: <http://www.medicareadvocacy.org/wp-content/uploads/2018/10/2019-Medicare-and-You-Handbook-Ltr-to-SV.pdf>.