



**MEDICARE ENROLLMENT & APPEALS GROUP**

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**DATE:** October 23, 2013

**TO:** Affected Part D Plan Sponsors and Medicare Advantage Organizations

**FROM:** Arrah Tabe-Bedward  
Director, Medicare Enrollment & Appeals Group

**SUBJECT:** CMS Mailing to Enrollees in Consistently Poor Performing Plans

CMS will further the goals of facilitating beneficiary enrollment into higher quality plans by issuing notices to individuals enrolled in plans with less than three stars for three consecutive years. The notice will alert beneficiaries to the sponsor or organization's low rating and encourage them to explore higher rated plan options during the annual election period (AEP). The notice also informs enrollees of an opportunity to contact CMS to request a special enrollment period (SEP) to move into a higher quality plan in 2014.

CMS anticipates that this notice will be mailed to current enrollees in late-October/early-November. A Spanish version of this notice will be sent to beneficiaries who have identified that as their language preference. Both notices are attached for your reference. In February, CMS will send a separate notice to individuals who enroll in consistently low performing plans during the AEP.

Organizations whose membership will receive this notice are not prohibited from developing their own outreach materials in response to the mailing. Outreach materials may focus on the efforts of the organization to improve its star ratings, but cannot dispute the assignment or validity of the low rating. In order to ensure that organization messaging is in compliance with our requirements, all outreach materials must be submitted for review and approval by CMS prior to distribution. If similar materials have been previously reviewed and approved by CMS, they must be resubmitted and approved before distribution. All materials will be reviewed as expeditiously as possible and may not be used until approval is received. Materials should not be input into HPMS, but rather sent directly to your Account Manager with a copy to Kristy Nishimoto at [kristy.nishimoto@cms.hhs.gov](mailto:kristy.nishimoto@cms.hhs.gov).

For questions regarding this notice, please contact Kristy Nishimoto at [kristy.nishimoto@cms.hhs.gov](mailto:kristy.nishimoto@cms.hhs.gov) and copy your CMS Account Manager.



<BENEFICIARY NAME>  
<ADDRESS>  
<CITY STATE ZIP>

HICN <1234>  
October 2013

## Important Information About Your Medicare Plan Options

Each year we give star ratings to Medicare health and drug plans. These ratings help you compare plans based on their quality and performance.

A plan can get ratings between 1 and 5 stars. (Some plans may be too new or not have enough information to be rated.)

★★★★★	“Excellent”	★★	“Below average”
★★★★	“Above average”	★	“Poor”
★★★	“Average”		

You are currently enrolled in <ORGANIZATION’S NAME>’S <PLAN NAME>.  
<ORGANIZATION NAME> has been rated “below average” or “poor” for at least the last three years. We encourage you to compare this plan to other options in your area and decide if it is still the right choice for you.

### What to Do Next

1. Review your health and prescription drug needs.
2. Visit [www.medicare.gov/find-a-plan](http://www.medicare.gov/find-a-plan) to find and compare plans in your area. You can even enter your information for a personalized search if you like. Once you see the list of plans, you can view the star ratings by selecting the plan name.

### If You Want to Change Plans

1. During the fall Open Enrollment Period (October 15 - December 7), you can change plans and have your new coverage start on January 1. To change plans, call the new plan directly, use [www.medicare.gov](http://www.medicare.gov) to enroll in the new plan, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
2. After January 1, if you have not yet changed plans, you have a one-time chance to choose and enroll in a plan that is not rated “below average” or “poor.” Call 1-800-MEDICARE to make a change. Your new coverage will start the first day of the month after you call.

### Get Help & More Information

To get help with your choices, call your State Health Insurance Assistance Program (SHIP) at <SHIP phone number> or call 1-800-MEDICARE. After comparing plans in your area, if you decide that the plan you have now is still the right choice, you do not have to do anything.

¿Necesita usted una copia de este aviso en Español? Llame al 1-800-MEDICARE (1-800-633-4227). Los usuarios de TTY deberán llamar al 1-877-486-2048.



<BENEFICIARY NAME>  
<ADDRESS>  
<CITY STATE ZIP>

HICN <1234>  
octubre 2012

## Información Importante Sobre Sus Opciones de Planes Medicare

Cada año se clasifican con estrellas los planes de salud y de medicamentos de Medicare. Estas clasificaciones le ayudan a comparar la calidad y servicio de los planes.

Un plan puede tener una calificación entre 1 y 5 estrellas. (Algunos planes pueden ser demasiado nuevos o no tienen información suficiente para ser clasificados.)

★★★★★ “Excelente”

★★ “Debajo promedio”

★★★★ “Encima promedio”

★ “Malo”

★★★ “Promedio”

Usted está inscrito en el <PLAN NAME> de <ORGANIZATION’S NAME>. <ORGANIZATION NAME> ha sido clasificada por un mínimo de tres años como “pobre” o “debajo promedio”. Le recomendamos que compare su plan con otras opciones en su área y decida si este plan sigue siendo su mejor opción.

### Qué Hacer Después

1. Revise sus necesidades de salud y medicamentos recetados.
2. Visite [www.medicare.gov/find-a-plan](http://www.medicare.gov/find-a-plan) para buscar y comparar los planes en su área. Puede hasta incluir su información para una búsqueda personalizada. Cuando vea la lista de planes, puede ver la clasificación de estrellas seleccionando el nombre del plan.

### Si Quiere Cambiar de Plan

3. Usted puede cambiar de plan durante el Período de Inscripción Abierta (15 de octubre al 7 de diciembre) y su cobertura nueva comenzará el 1 de enero. Para cambiar de planes, llame directamente al nuevo plan. También puede visitar [www.medicare.gov](http://www.medicare.gov) para inscribir en un plan nuevo o llamar al 1-800-MEDICARE (1-800-633-4227). Los usuarios de TTY deben llamar al 1-877-486-2048.
4. Después del 1 de enero, si no ha cambiado de planes todavía, usted tiene una sola oportunidad de elegir e inscribirse en un plan que no está clasificado “debajo promedio” o “malo.” Llame al 1-800-MEDICARE para hacer el cambio. Su cobertura comenzará el primer día del mes siguiente de haber llamado.

### Para Ayuda y Más Información

Para conseguir ayuda con sus opciones, llame al Programa Estatal de Asistencia con el Seguro Médico (SHIP en inglés) al <SHIP phone number> o llame al 1-800-MEDICARE. Después de comparar planes en su área, si decide que el plan que tiene ahora todavía es la mejor opción, no tiene que hacer nada.

**To get a copy of this notice in English, call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.**