Spark Communication Materials Guidelines

The purpose of this document is to provide guidelines on CMS regulations for materials that meet the definition of communication materials.

The guidelines are outlined below. This is not meant to be inclusive of all applicable TPMO laws and regulations; but are intended to help TPMO's meet compliance standards. The Spark Compliance Team is here to help you with any marketing and communication materials you use to promote your Medicare business.

If your material meets the definition of marketing materials, please follow the Marketing Materials Requirements guide on the Spark Help Center Compliance page.

CMS definition of marketing material to include any material **that mentions any benefit** will be considered marketing. (e.g. dental, vision, cost-savings, and/or hearing services) as well as any mention of star ratings and Carriers will meet the definition of marketing materials.

Communication materials are educational and informational in nature. They provide general information about Medicare and coverage options. This could be explaining the Parts of Medicare, or telling the prospect the services you offer.

The only disclaimer required on communication materials is that you or your agency *"have no affiliation with the U.S. Government or the federal Medicare program".*

Things to keep in mind when creating materials:

1. "Customized" or "personalized" should not be used when describing Medicare.
2. "Entitled" can only be used when discussing Original Medicare.
3. Avoid statements like "get the money they deserve" and "see what benefits are available to you."
4. Avoid tactics that are likely misleading and/or confusing to beneficiaries.
5. Avoid language that creates undue fear/anxiety, such as "beware of plans whose copays could bust your budget", etc.
6. Avoid words that may cause a false sense of urgency, such as "Act now, or you may lose your benefits!" etc.
7. Avoid words that may incite fear or mislead beneficiaries to respond for fear of losing benefits, plan, etc.
8. Avoid repetitive phrases, certain font/colors, and/or punctuation that may

communicate a false sense of urgency. For example, avoid using “URGENT!” on a material with font that is in all caps, oversized and red.

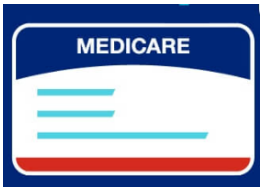
9. Materials that include a phone number should clearly indicate that calling the agent number will direct an individual to a licensed sales agent. Immediately prior to including the agency’s number or any number that will reach a sales agent, state that the number will dial a "licensed sales agent" or “licensed insurance agent”. Use this statement when listing a number that dials a licensed sales agent directly. “Calling this number will connect you to a licensed insurance agent.”

10. You cannot use the word “Senior” since the ad must be inclusive of people under the age of 65 who are on Medicare. Use “people with Medicare” or “Medicare beneficiaries” instead.

11. Use of the word “Free”.
    a. It is only permissible to use the term “free” with respect to plan benefits when describing mandatory, supplemental, and preventive benefits provided at a zero-dollar cost sharing for all members.
    b. Do not use the term “free” to describe a zero-dollar premium, reduction in premiums (including Part B buy-down), reduction in deductibles or cost-sharing, low-income subsidy (LIS), or cost sharing for individuals with dual eligibility. “No additional cost” may be an alternative when appropriate.
    c. Phrases such as, “Free Medicare Plan Comparison”, materials need to include “no obligation to enroll” in the same sentence or in close proximity to the FREE reference. If there are space issues, an asterisk may be used to reference language in a legible footnote.

12. Avoid use of American flag imagery, patriotic themed colors (red, white, and blue), symbols, logos or images that are made to resemble official government logos, and other terminology.

13. You cannot use an image of an actual Medicare Card on any material. It must be a generic card that looks similar to this.



PTC/BRC/Lead Generation Forms: With the new "one-to-one" consent rule going into effect 10/1/24, the disclaimer on any Lead Generation form/BRC/PTC needs to be updated. Spark is using the one below. Feel free to use this one as well. You'll have to specify the agency name on the form.

"By providing your name and contact information you are consenting to receive sales and marketing calls, text messages and/or emails from the licensed insurance agent listed on this form about Medicare Plans at the number provided, and you agree such calls and/or text messages may use an automated system for the selection or dialing of telephone numbers, automated voice calls, AI generative voice calls, pre recorded messages played when a connection is made, or pre recorded voicemail messages, even if you are on a government do-not-call registry. These calls are for marketing purposes and cellular charges may apply. This agreement is not a condition of enrollment and you can change your permission preferences at any time by contacting the agent listed on this form. "

Once the Spark Compliance team reviews your communication materials, and you have made any changes necessary, we can approve the material. Lead generation forms need to be submitted to a carrier for review prior to approval. Spark Compliance will file those with a carrier on your behalf.

Reach out to Compliance@SparkAdvisors.com with any questions.

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