

**Organization Name:** National Senior Citizens Law Center  
**Organization Contact Name:** Amber Cutler  
**Email Address:** [acutler@nslc.org](mailto:acutler@nslc.org)  
**Telephone Number:** (213) 674-2901

Section Number & Page Number	Description of Issue or Question	Suggested Revision/Comment
30.9 (pp. 7-8) & 60.7 (p. 15)	10 day mailing requirement	As we noted in our comments to the draft MMC enrollment guidance and in our comments to the draft marketing guidance for Massachusetts, beneficiaries need timely notices. A ten day deadline, particularly with late-in-the-month enrollments, can lead to beneficiary confusion and access problems. With current technology, plans should easily be able to meet shorter deadlines.
30.12 (p. 10)	Star ratings	We reiterate our request that as the demonstrations proceed, CMS create user-friendly ways that beneficiaries can review plan performance so beneficiaries can make informed choices among health plans.
70.1 - 70.3	Gifts and rewards	Under the Massachusetts marketing guidance, these sections were amended to prohibit MMPs from offering financial or other incentives. It is equally important that the California Marketing Guidance include these prohibitions. Even nominal gifts can affect decisions of very poor individuals. It is imperative that these individuals make choices based on their needs and not be subject to enticements that will affect their judgment.

70.12 (p. 16)	Nursing homes and psychiatric hospitals	<p>We continue to have serious concerns about any direct marketing by plans in nursing homes and psychiatric hospitals, even if such marketing occurs in common areas. Most individuals in these settings either have cognitive impairments or other conditions that impair their judgment. Where previously nursing facilities had little incentive to promote plans because nursing facility care was paid primarily by Medi-Cal, under Cal MediConnect nursing facilities may develop exclusive relationships with plans. This is especially likely under Cal MediConnect because plans are permitted to use incentive or bonus program activities and opt to direct beneficiaries to nursing facilities that perform better. A nursing facility is the individual's residence. As such, the individual is isolated and access to information outside of the facility is necessarily limited. Any promotional activity by the nursing facility will be unduly influential and will undermine an individual's ability to make an informed choice. We urge CMS to consider additional restrictions on marketing in these facilities.</p>

