



Policy: MA.2002
Title: **Marketing Activity Standards**
Department: Network Operations
Section: Member Outreach and Education

CEO Approval: /s/ Michael Hunn 11/22/2024

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Applicable to: ☐ Medi-Cal
☒ OneCare
☐ PACE
☐ Administrative

I. PURPOSE

This policy describes the guidelines for Marketing Activities conducted by CalOptima Health OneCare Community Partners.

II. POLICY

- A. CalOptima Health shall establish Marketing standards in accordance with the Title 42 Code of Federal Regulations (CFR) Part 417, 422, and 423 Subpart V, Centers for Medicare & Medicaid Services (CMS) Medicare Communications and Marketing Guidelines (MCMG), and Department of Health Care Services (DHCS) CalAIM Dual Eligible Special Needs Plans (D-SNP) Policy Guide.
- B. Communication activities and materials are distinguished from Marketing Activities and Materials based on both intent and content.
 - 1. Intent – The purpose of Marketing Activities and Materials is to draw a prospective or current enrollee’s attention to a plan or group of plans to influence a Member’s decision when selecting an enrolling in a plan or deciding to stay in a plan (retention-based Marketing).
 - 2. Content – Based on the exclusions in the definition of Marketing and Marketing Materials and the type of information that would be intended to draw attention to a plan or influence a Member’s enrollment decision, Marketing Activities and Materials include:
 - a. Information about benefits or benefit structure;
 - b. Information about premiums and cost sharing;
 - c. Comparisons to other Plan(s)/Part D sponsor(s);
 - d. Rankings and measurements in reference to other Plan(s)/Part D sponsor(s); and/or
 - e. Information about Star Ratings.
- C. For prospective Members, CalOptima Health shall not include enrollment applications for different lines of business or combine CalOptima Health information with other product line information; as such activities are considered cross-selling and potentially misleading, in violation of the rules.

- D. Marketing for an upcoming plan year may not occur prior to October 1. Plans/Part D sponsors are permitted to simultaneously market the current year with prospective year starting on October 1, provided Marketing Materials make it clear what plan year is being discussed. Current year materials may be provided upon request to prospective Members and enrollment applications may be processed.
- E. This policy shall govern Marketing Activity conducted on behalf of CalOptima Health by any CalOptima Health staff, Community Partners, Field Marketing Organizations (FMOs) or Broker Agency and their subcontracted independent agents, Health Networks, physician groups, and Providers.

III. PROCEDURE

- A. All Marketing Activities shall comply with the 42 CFR Part 417, 422, and 423 Subpart V, CMS MCMG, and DHCS CalAIM D-SNP Policy Guide Permissible Marketing Activities, as set forth in the Marketing guidelines include, but are not limited to, the following:
 - 1. Outbound phone calls to prospective Members;
 - 2. Individual sales appointments; and
 - 3. Community Sales Events and presentations.
- B. Outbound phone calls to prospective Member:
 - 1. Medicare-Medicaid Plan (MMP) outbound callers must be State-licensed Marketing agents. CalOptima Health shall ensure sales, marketing, and enrollment calls are recorded, reproducible and maintained for ten (10) years plus current year. Unlicensed agents shall not be allowed to contact or enroll prospective members.
 - 2. Community Partners shall only utilize telephone Talking Points approved by CMS when conducting outbound sales calls.
 - 3. Outbound Marketing calls:
 - a. Community Partners may conduct outbound Marketing calls to a dual-eligible person currently enrolled in CalOptima Health, including aging-in Medi-Cal Members into Medicare; return phone calls or messages from prospective Members, as these are not considered unsolicited contacts. Callers with questions about other Medicare program options should be warm transferred to 1-800-MEDICARE or to Health Insurance Counseling Advocacy Program (HICAP) for information assistance.
 - b. Community Partners shall not conduct any outbound Marketing calls to an individual who is not a current dual eligible Member with CalOptima Health without prior permission from the individual either via a completed business reply card (BRC), Member requesting a return call, or asking a customer service representative to have a Community Partner contact them, or an inbound telephone call initiated by the individual.
 - 4. Business reply card (BRC) calls: A Community Partner shall contact a prospective Member as soon as possible, but no later than seven (7) business days after receipt of a business reply card.

- C. Individual Sales/Marketing Appointments: Individual Marketing Appointments are scheduled with a prospective Member for the purpose of inviting that individual to enroll in OneCare (HMO D-SNP), a Medicare Medi-Cal plan.
1. Individual sales/Marketing Appointments shall be conducted only by pre-scheduled appointment for in-person enrollment or over the phone if Member-initiated request.
 2. Scope of Appointment (SOA) parameters (and documentation) are required for all one-on-one appointments, regardless of the venue (e.g., home or telephone). A scope of appointment must be documented for all Marketing Activities, in-person, telephonically, including walk-ins to Plan/Part D sponsor or agent offices. Agents shall complete the SOA at least forty-eight (48) hours prior to the personal enrollment appointment with the prospective Member, except in two situations:
 - a. The first exception is for Members who are approaching the end of a valid enrollment period. This could be the end of the Annual Election Period (AEP), the Medicare Advantage Open Enrollment Period (MA OEP), and Special Election (SEP) or the Initial Coverage Election Period (ICEP). For these Members, the forty-eight (48) hour rule will not apply if the SOA is completed during the last four (4) days of the election period.
 - b. The other exception shall be for walk-ins.
 3. Community Partners shall capture a prospective Member's signature on SOA hard copy form or via a telephonic recording.
 4. The scope of what may be sold at the individual sales presentation is reflected in a SOA form or via telephonic recording in CalOptima Health's telephone system. The Community Partner shall confirm the scope of a sales appointment in accordance with CalOptima Health Policy MA.2030: Personal/Individual Sales Appointments.
 - a. The scope of the appointment shall be completed in advance of the appointment in writing via a SOA form or in the form of a recorded phone call. CalOptima Health must document the scope of the agreement at least forty-eight (48) hours prior to the appointment.
 - i. If the Community Partner would like to discuss additional products during the appointment in which the Member indicated interest, but did not agree to discuss in advance, the Community Partner must document a second scope of appointment for the additional product type to continue the Marketing appointment.
 - b. A prospective Member may sign a Scope of Appointment Form:
 - i. At a Marketing and Sales Event as described in this Policy.
 - ii. For Walk-In appointments
 - iii. For In-Person Appointments
 5. A Community Partner shall utilize the CMS-approved sales presentation during an in-person individual sales appointments with a prospective Member.
 6. A Community Partner shall utilize the CMS-approved Sales and Enroll Telephonic Talking Points during telephonic sales appointments with a prospective Member.

7. A Community Partner may:
 - a. Distribute approved materials;
 - b. Provide educational information on Medicare and Medi-Cal; and
 - c. Conduct enrollment either electronically or through an enrollment form.
 8. A Community Partner shall not present on or attempt to sell any other product other than the product agreed upon by the prospective Member.
- D. Marketing/Sales Events: Marketing and Sales Events consist of a Community Partner providing OneCare information for the purpose of inviting membership. A formal presentation is one in which a Community Partner presents the approved presentation to an audience of any size. An informal presentation is one in which a Community Partner provides information to passersby, for example, occupation of a table at a street fair.
1. All sales and marketing event invitations hosted by CalOptima Health must include the following disclaimers:
 - a. “A Sales Person will be present with information and applications.”
 - b. “For accommodation or persons with special needs at sales meetings, call:
 - i. OneCare Customer Service: 1-877-412-2734 (TTY 711) Toll-free
 2. Marketing and Sales Events shall be:
 - a. Scheduled in advance;
 - b. Reported to the Regulatory Affairs & Compliance (RAC) Medicare Department within seven (7) calendar days prior to the event’s scheduled date.
 3. A Community Partner at a formal presentation shall:
 - a. Inform all attendees that they are attending a CalOptima Health sales presentation; and
 - b. Utilize the approved sales presentation, which shall, at a minimum:
 - i. Explain the eligibility requirements for joining OneCare; and
 - ii. Explain the process for disenrollment if the prospective Member loses his or her Medi-Cal eligibility.
 4. A Community Partner at any Marketing and sales event may:
 - a. Display sign-in sheets but must clearly be labeled as optional;
 - b. Contact information for potential enrollees provided for raffles or drawings for purposes other than may only be used for that purpose;
 - c. Distribute approved brochures and pre-enrollment Advertising materials;

- d. Distribute and collect enrollment applications;
 - e. Perform electronic enrollments;
 - f. Present benefit information via a scripted talk, electronic slides, handouts, or other medium approved by CMS or DHCS;
 - g. Accept a Scope of Appointment Form from an individual who requests an individual sales appointment as described in this Policy;
 - h. Provide educational content to the audience or passersby;
 - i. Provide a nominal gift, as defined in this Policy, to attendees with no obligations;
 - j. Provide refreshments and light snacks, ensuring that multiple items are not being “bundled” and provided as if a meal; and
 - k. Compare one (1) plan sponsor to another Plan/Part D sponsor, provided the Plan/Part D sponsor can support them (e.g., by studies or statistical data) and such comparisons are factually based and not misleading.
5. A Community Partner at any marketing and sales event shall not:
- a. May not require attendees to provide contact information as a prerequisite for attending an event;
 - b. Conduct Health Screenings at Marketing/Sales Events;
 - c. Provide or subsidize meals at Marketing/Sales Events, as defined in this Policy, to attendees;
 - d. Use absolute superlatives (e.g., “the best,” “highest ranked,” “rated number 1”) and/or qualified superlatives (e.g., “one of the best,” “among the highest rank”) unless they are substantiated with supporting data provided to CMS as part of the Marketing review process or they are used in logos/taglines; or
 - e. Use the term “free” to describe a zero-dollar premium; or in conjunction with any reduction in premiums, deductibles or cost share, including Part B premium buy-down, low-income subsidy, or dual eligibility.
- E. Health Fairs and Health Promotion Events: The purpose of a health fair or health promotion event is to promote health and provide health information. These events are typically comprised of various participant booths that are staffed by any CalOptima Health staff to answer questions and distribute OneCare materials. The expectation of an attendee of a health fair or health promotion event is to receive health related information.
- 1. Health Fairs and Health Promotion Events shall be scheduled in advanced and submitted to RAC prior to Advertising the event or seven (7) calendar days prior to the event’s scheduled date, whichever is earlier.
 - 2. CalOptima Health may distribute Advertisements for the event to Members, non-Members, or both.

3. The Community Partner shall have the knowledge to respond to OneCare-specific questions asked at the event.
 4. The Community Partner may:
 - a. Provide a nominal gift, as defined in this Policy, to attendees with no obligations; and
 - b. Display sign-in sheets but must clearly be labeled as optional;
 - c. May answer Member-initiated questions; and
 - d. May distribute business reply cards (BRCs) and contact information for beneficiaries to initiate contact.
 5. The Community Partner shall not:
 - a. Schedule a marketing and sales event following an educational event.
 - b. Provide a sales presentation at such an event;
 - c. Distribute and collecting SOA form;
 - d. Market OneCare or enroll prospective Members during an Educational Event like a health fair or conference; and
 - e. Include Marketing or sales activities or distribution of Marketing Material or accept enrollment forms.
- F. Educational Events: An Educational Event is one that is advertised to beneficiaries as “educational” or an event with the word “educational” in its title. The expectation of an attendee at an Educational Event is that the attendee will be exposed to new information other than information about OneCare.
1. The Community Partner may:
 - a. Have a banner with the plan name and logo displayed;
 - b. Meals may be provided at Educational Events, provided the event meets CMS’ strict definition of an Educational Event, and complies with the nominal gift requirement;
 - c. Provide a nominal gift, in accordance with this Policy, to attendees with no obligations; and
 - d. Distribute business reply cards (BRC) and contact information for beneficiaries to initiate contact.
 2. The Community Partner shall not:
 - a. Engage in any sales activities such as the distribution of Marketing Materials or the distribution or collection of OneCare applications;
 - b. Discuss premiums or benefits;
 - c. Distribute Marketing Materials; and

- d. Advertise an Educational Event and then have a Marketing/Sales Event immediately following the same general location (e.g., same hotel).
3. Member-only Educational Events
- a. CalOptima Health may hold Member-only Educational Events but may not conduct enrollment or sales activities during these events.
 - b. CalOptima Health may discuss plan-specific premiums and/or benefits and distribute plan-specific materials to enrollees.
4. Cancellation of a group/community sales presentations:
- a. If an event is cancelled less than forty-eight (48) hours before the scheduled event:
 - i. Community Partner shall notify the RAC-Medicare Department, as soon as possible.
 - ii. A Community Partner shall be present at the site of the cancelled sales event, at the time that the event was scheduled to occur, to inform attendees of the cancellation and distribute information about OneCare.
 - b. If an event is cancelled more than forty-eight (48) hours before the scheduled event:
 - i. Community Partner shall notify the RAC-Medicare Department; and
 - ii. CalOptima Health or event coordinator shall notify the public in the same manner as the event was advertised, for example if the event was advertised by flyer, then cancellation notice shall be by flyer; if the event was advertised by newspaper, then cancellation notice shall be by newspaper.
 - c. If an event is cancelled due to lack of attendance, the Community Partner shall:
 - i. Remain for at least fifteen (15) minutes after the scheduled start time for that event; and
 - ii. Tape a notice to the entrance of the event that states the event was cancelled due to lack of attendance.
- G. Other Prohibitions and Limitations to Marketing Activities: Prohibitions and limitations to Marketing Activities, as set forth in the 42 CFR Part 417, 422, and 423 Subpart V, and CMS MCMG and DHCS CalAIM D-SNP Policy Guide. include, but are not limited to, the following:
- 1. Brochure Distribution: CalOptima Health may distribute OneCare Marketing brochures to contracted providers, pharmacies, dentists, and other healthcare providers for the purpose of displaying and distributing these materials to a prospective Member.
 - 2. Healthcare Settings: A healthcare setting includes, but is not limited to, a doctor's office, hospital, Pharmacy, or a nursing facility. A Community Partner may conduct sales activities in a healthcare setting, but is limited to the common areas, for example a conference room or a cafeteria.

3. Nominal Gifts: CalOptima Health may offer gifts to a prospective Member as long as such gifts are of nominal value, not readily convertible to cash, and are provided whether or not the individual enrolls in OneCare. Nominal gifts shall be free of benefit information.
 - a. The nominal value, as set forth in the 42 CFR Part 417, 422, and 423 Subpart V, MCMG, and DHCS CalAIM D-SNP Policy Guide., is defined as an item worth fifteen dollars (\$15) or less, based on the actual retail purchase price. The nominal gift cannot exceed \$75 aggregate, per person, per year.
 - b. CalOptima Health may offer a prize of over fifteen dollars (\$15) to the general public as long as the prize is offered to the general public and not only to Medicare beneficiaries.
 4. CalOptima Health shall not conduct door-to-door solicitations, without a prior appointment.
- H. Disenrolled Member calls:
1. A Customer Service Representative may contact a disenrolled Member, to conduct surveys for quality improvement purposes.
 - a. Call their current enrollees to conduct normal business related to enrollment in the plan, including calls to enrollees who have been involuntarily disenrolled to resolve eligibility issues.
 2. The calls may not include sales or marketing information.
- I. Meals: CalOptima Health shall not provide meals at Sales Events.
1. CalOptima Health may provide a light snack and refreshments at any sales event. Light snacks may not be bundled to serve as a meal.
 2. CalOptima Health shall also not conduct any sales activities or distribute Marketing Materials at any event where meals are provided, even if CalOptima Health did not subsidize the meal.
- J. Utilization of agents and brokers: OneCare enrollment transactions are processed by CalOptima Health's licensed Community Partners and independent agents subcontracted with FMOs or Broker Agencies. The Community Partners and the independent agents shall possess California Department of Insurance (DOI) licensure, required to be renewed every two (2) years. As of January 1, 2023 CalOptima Health contracted with FMOs or Broker Agencies allowing their independent agents and brokers to market or sell OneCare.
- K. Marketing Ethics: A Community Partner and independent agents shall conduct all Marketing Activities in accordance with the CFR, CMS MCMG, and DHCS CalAIM D-DSNP Policy Guide. A Community Partner and independent agent shall have a clear understanding of prohibited Marketing behavior including, but not limited to:
1. Representing him or herself as anyone other than a CalOptima Health employee or independent agent;
 2. Misrepresenting OneCare, or any OneCare benefits; and
 3. Using aggressive tactics or any type of actual or perceived coercion with a prospective Member.

- L. CalOptima Health shall conduct training and oversight of its Community Partners and independent agents in accordance with CalOptima Health Policies MA.2012: Training and Oversight of CalOptima Health-Employed Community Partners and MA.2017- Training and Oversight of FMO/Broker Agencies

IV. ATTACHMENT(S)

- A. Enroll Script for Telephonic Enrollment _OneCare
- B. Sales Script for Telephonic Enrollment _OneCare
- C. Scope of Sales Appointment Confirmation Form _OneCare
- D. Outbound Outreach Script with Scope of Appointment _OneCare

V. REFERENCE(S)

- A. CalOptima Health Contract with the Centers for Medicare & Medicaid Services (CMS) for Medicare Advantage
- B. CalOptima Health Policy MA.2012: Training and Oversight of CalOptima Health-Employed Community Partners
- C. CalOptima Health Policy MA.2017: Training and Oversight of FMO/Broker Agencies
- D. CalOptima Health Policy MA.2030: Personal/Individual Sales Appointments
- E. Department of Health Care Services (DHCS) CalAIM Dual Eligible Special Needs Plans (D-SNP) Policy Guide (Issued July 2024)
- F. Medicare Managed Care Manual, Chapter 3, Medicare Communications and Marketing Guidelines (MCMG) (Issued February 9, 2022)
- G. Section 508 of the Rehabilitation Act
- H. Section 1557 of the Affordable Care Act of 2010— Nondiscrimination Communication Requirements and Grievance Procedures
- I. Title 42, Code of Federal Regulations (C.F.R.), Parts 422 Subpart V, 417, and 423

VI. REGULATORY AGENCY APPROVAL(S)

None to Date

VII. BOARD ACTION(S)

None to Date

VIII. REVISION HISTORY

Action	Date	Policy	Policy Title	Program(s)
Effective	08/01/2005	MA.2002	Marketing Activity Standards	OneCare
Revised	04/01/2010	MA.2002	Marketing Activity Standards	OneCare
Revised	08/01/2015	MA.2002	Marketing Activity Standards	OneCare OneCare Connect
Revised	09/01/2016	MA.2002	Marketing Activity Standards	OneCare OneCare Connect
Revised	10/01/2018	MA.2002	Marketing Activity Standards	OneCare OneCare Connect
Revised	12/01/2019	MA.2002	Marketing Activity Standards	OneCare OneCare Connect

Action	Date	Policy	Policy Title	Program(s)
Revised	12/01/2020	MA.2002	Marketing Activity Standards	OneCare OneCare Connect
Revised	10/01/2021	MA.2002	Marketing Activity Standards	OneCare OneCare Connect
Revised	12/31/2022	MA.2002	Marketing Activity Standards	OneCare
Revised	10/01/2023	MA.2002	Marketing Activity Standards	OneCare
Revised	11/01/2024	MA.2002	Marketing Activity Standards	OneCare

IX. GLOSSARY

Term	Definition
Advertising	Advertising materials are primarily intended to attract or appeal to a potential Plan/Part D Sponsor enrollee. Advertising materials contain less detail than other Marketing Materials, and may provide benefit information at a level to entice a potential enrollee to request additional information.
Advertisement	A read, written, visual, oral, watched, or heard bid for, or call to attention. Advertisements can be considered communication or Marketing based on the intent and content of the message.
Alternate Formats	Alternate formats mean a format used to convey information to individuals with visual, speech, physical, hearing and intellectual disabilities (for example, braille, large print, and audio).
Banner and Banner-Like Advertisements	Banner advertisements are typically used in television ads that is intended to be brief, and flashes limited information across a screen for the sole purpose of enticing a prospective enrollee to contact the Plan/Part D sponsor to enroll or obtain more information. A “banner-like” advertisement is usually in some media other than television (for example, outdoor and on the internet). Banner advertisements are intended to be brief and to entice someone to call the Plan/Part D sponsor or to alert someone that information is forthcoming.
Centers for Medicare & Medicaid Services (CMS)	The federal agency under the United States Department of Health and Human Services responsible for administering the Medicare and Medicaid programs.
Communication	For purposes of this policy, communications means activities and use of materials created or administered by the MA organization or any downstream entity to provide information to current and prospective enrollees.
Co-Branding	Co-branding is defined as a relationship between two or more separate legal entities, one of which is an organization that sponsors a Medicare plan. Co-branding means when the Plan/Part D Sponsor displays the name(s) or brand(s) of the co-branding entity or entities on its Marketing Materials to signify a business arrangement. Co-branding arrangements allow a Plan/Part D Sponsor and its co-branding partner(s) to promote enrollment in the plan. Co-branding relationships are entered into independent of the contract that the Plan/Part D sponsor has with CMS.
Community Partner	A CalOptima Health employee who is a liaison between CalOptima Health and the community and acts as an advocate for CalOptima Health Members. Such employee performs education, Marketing, and enrollment tasks for CalOptima Health programs and shall possess California Department of Insurance (DOI) licensure, required to be renewed every 2 years.
Department of Health Care Services (DHCS)	The single State Department responsible for administration of the Medi-Cal program, California Children’s Services (CCS), Genetically Handicapped Persons Program (GHPP), Child Health and Disabilities Prevention (CHDP), and other health related programs.
Direct Mail	Direct mail is information sent to an individual to attract his/her attention or interest and allow him/her to request additional information.

Term	Definition
Educational Event	Designed to inform Medicare beneficiaries about Medicare Advantage, Prescription Drug or other Medicare programs and do not include Marketing (i.e., the event sponsor does not steer, or attempt to steer, potential enrollees toward a specific plan or limited number of plans).
Enrollment Materials	Materials used to enroll or disenroll a Member from a plan, or materials used to convey information specific to enrollment and disenrollment issues such as enrollment and disenrollment notices.
Health Network	A Physician Hospital Consortium (PHC), physician group under a shared risk contract, or health care service plan, such as a Health Maintenance Organization (HMO) that contracts with CalOptima Health to provide Covered Services to Members assigned to that Health Network.
Marketing	Activities and use of materials that are conducted by CalOptima Health with the intent to draw a beneficiary's attention to CalOptima Health and to influence a beneficiary's decision- making process when selecting a plan for enrollment or deciding to stay enrolled in a plan (that is, retention-based marketing). Additionally, marketing contains information about the CalOptima Health's benefit structure, cost sharing, measuring or ranking standards.
Marketing Activity	Any product or activity intended to encourage retention of or an increase in Contracted membership or any occasion during which Marketing Materials are presented to Members or persons who may become Members through verbal exchanges or the distribution of Marketing Materials. Marketing Activities may include but are not limited to: health fairs, workshops on health promotion, after school programs, raffles, informational sessions hosted by Providers, community-based social gatherings, and posting of Marketing Materials on the internet.
Marketing Appointments	Marketing appointments are individual appointments designed to steer or, attempt to steer, potential enrollees toward a plan or limited number of plans. All individual appointments between an agent and a Member are considered Marketing/sales appointments regardless of the content discussed.
Marketing/Sales Event	Marketing/Sales Events are events designed to steer, or attempt to steer, enrollees or potential enrollees toward a plan or a limited set of plans. At Marketing/sales events, the Plan/Part D Sponsor may promote specific benefits/premiums and/or services offered by the plan. Plans/Part D Sponsors may conduct a formal event where a presentation is provided to Medicare beneficiaries or an informal event where Plans/Part D Sponsors are only distributing health plan brochures and pre-enrollment materials. Plans/Part D Sponsors may also accept enrollment forms and perform enrollment at Marketing/sales events.
Marketing Materials	Materials defined in the Centers for Medicare & Medicaid Services (CMS) marketing guidelines set forth in the Medicare Managed Care Manual as any informative materials targeted to Medicare beneficiaries that: <ol style="list-style-type: none"> 1. Promote the Plan/Part D Sponsor, or any Plan/Part D Sponsor offered by the MA organization; 2. Inform Medicare beneficiaries that they may enroll, or remain enrolled in, a Plan/Part D Sponsor offered by the MA organization; 3. Explain the benefits of enrollment in a Plan/Part D Sponsor, or rules that apply to enrollees; or

Term	Definition
	<p>4. Explain how Medicare services are covered under a Plan/Part D Sponsor, including conditions that apply to such coverage.</p> <p>Marketing materials include notification forms and letters used to enroll, disenroll, and communicate with a Member, any information or product that is designed to encourage retention of or an increase in Contracted Membership, and is produced in a variety of print, broadcast, and direct marketing media that include, but are not limited to: radio, television, billboards, newspapers, the internet, leaflets, informative materials (ex. Summary of Benefits, Approved Formulary), videos, advertisements, letters, posters, and items of nominal value.</p>
Member	A beneficiary enrolled in a CalOptima Health program.
Model Document	Model documents are materials for which CMS has provided model language which, when used without modification, qualifies for a 10-day review or for submission through the File & Use process.
Outdoor Advertising	Outdoor material intended to capture the attention of a passing audience (for example, billboards, signs attached to transportation vehicles). ODA may be communications or marketing material.
Post-Enrollment Marketing Materials	Post-enrollment Marketing material is a subset of Marketing Materials used by a Plan/Part D Sponsor to convey benefits or operational information to current enrollees.
Pre-Enrollment Marketing Materials	Pre-enrollment Marketing material is a subset of Marketing Materials used prior to enrollment. Pre-enrollment materials may contain plan rules and/or benefit information.
Sales and Marketing Vendor	A vendor contracted with CalOptima Health to provide sales and Marketing functions for OneCare and OneCare Connect.
Sales Person	An individual who markets and/or sells products for a single plan sponsor or numerous plan sponsors. It includes employees, brokers, agents, and all other individuals, entities, and downstream contractors that may be utilized to market and/or sell on behalf of a plan sponsor.
Talking Points	Talking Points are standardized text. Informational talking points are designed to respond to Member questions and requests and provide objective information about a plan or the Medicare program. Sales and enrollment talking points are intended to steer a Member towards a plan or limited number of plans, or to enroll a Member into a plan.
Template Materials	Template materials are any materials that include placeholder for variable data to be populated at a later time.