2026 MEDICARE COMPLIANCE MARKETING QUICK CHECK

Below is a checklist highlighting common compliance issues found in Medicare marketing and communication materials. Use this as a reference to help create CMS-compliant materials and avoid common errors. Please Note: This checklist is a reference only and does not cover all the rule and regulation nor replace CMS, carrier, or TPMO compliance requirements.

☐ Font Size

- To comply with CMS guidelines, all text included on materials **"must be printed with a font size equivalent to or larger than Times New Roman twelve (12)-point."** The height and width of the font must be equivalent or larger.
- For online materials, text must be coded for the web page to comply with the font equivalent.

☐ Agent Title

- CMS prohibits use of titles that may mislead individuals into thinking they work for, or on behalf of, Medicare or a government agency. This includes use of words such as Specialist, Advisor, Advocate, etc. CMS approved titles include the following:
  - **Licensed Sales Agent, Licensed Sales Representative, or Licensed Insurance Agent.**

☐ Agent Phone Number

- If the material includes a phone number for the agent or agency, **it must be clear that calling that number will direct the caller to a licensed agent.** Phone numbers should include the TTY number. If agents do not have their own, they can use TTY: 711. If the number directs the caller to a call center or agency, must include hours of operation.
- Agents can do this by:
  - Adding a CMS approved title under the Agent's Name
  - Adding the following disclaimer: "Calling the number above will direct you to a licensed sales agent."
  - Stating "Call <phone number> to speak with a licensed agent."

☐ Clearly References MA and/or PDP

- Materials used for **MA and/or PDP lead generation** must clearly indicate the type(s) of plans the agent represents and may discuss with them.
  For example, using phrases such as:
  - "Call me to discuss your Medicare Health Plan options including Medicare Supplement, Medicare Advantage, and Part D Prescription Drug Plans."

☐ Terminology

- Clear terms should be used when referencing Medicare health plans.
  - This includes: **Medicare health plans, Medicare Advantage Plans, Medicare Supplement Plans, Part D Prescription Drug Plans, Original Medicare, etc.**

☐ Use of the word "Senior" or "65+"

- CMS prohibits materials from using the word **"senior"** when referring to benefits, plans, or demographics. The same will apply to use of phrases such as **"65+"** or **"over 65"** as both, along with "seniors" exclude individuals who are under age 65 and on Medicare disability.

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2026 MEDICARE COMPLIANCE MARKETING QUICK CHECK CONT.

☐ Misleading Language

- CMS prohibits agents from using material that may **mislead, confuse, or provide materially inaccurate information** to current or potential enrollees. This includes misleading use of the word "Medicare" in materials, agency names, URLs, titles, etc.

☐ Absolute Statements

- Agents are not permitted to use absolute statements **(all, will)** or superlatives **(best, greatest, guaranteed)** when describing plans or benefits.

☐ SEP Qualifiers

- Material must include SEP qualifiers such as **"Turning 65, New to Medicare, Moving or Losing Coverage, Medicare and Medicaid beneficiaries, etc."** when being used outside of AEP.

☐ OEP Marketing

- **CMS prohibits marketing targeting the Open Enrollment Period** January 1 – March 31. Materials used outside of the AEP should clearly state individuals must have a valid SEP (see SEP Qualifier section above.)

☐ Benefits

- If the material includes references benefits such as **dental, vision, hearing, Part B giveback, etc.** it will need to be filed with CMS.
- Benefits cannot be described in a misleading way such as **"elimination of copays", "no extra cost", or "$0 plans"** without clarifying these benefits can only be obtained by enrolling into a Medicare Advantage plan.

☐ Carrier Names

- Materials containing carrier names or logos must be approved by **all** carriers included **prior to use.**

☐ TPMO Disclaimer

- The following TPMO disclaimer must be added to the following types of Communications starting October 1, 2023:
  - **Verbally in the first minute of a call**
  - **Websites and landing pages**
  - **Email communication**
  - **Online chats**

- **For TPMOs that do not sell all carriers in a service area:**
  - "We do not offer every plan available in your area. Currently we represent [number] organizations which offer [number] products in your area. Please contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program (SHIP) to get information on all of your options."

- **For TPMOs that do sell all carriers in a service area:**
  - "Currently we represent [number] organizations which offer [number] products in your area. You can always contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program (SHIP) for help with plan choices."

This checklist is not an exhaustive list. For the complete requirements and detailed guidance, scan the QR code with your Phone's camera to review the full 2026 Medicare Communications & Marketing Guidelines.

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