

Marketing and Member Education Guidelines

Tracking number requirements:

The subject line of the email should include the unique tracking number following the protocol described herein:

- **Plan Code:** The three (3) digit alphabetic acronym used for each health plan.
- **Sequence #:** The first two numbers of the sequence shall start with the fiscal year in which the material is submitted.
- **Type of Material:** MF (Member Facing), MI (Member Incentive), or AB (Additional Benefit).
- **Date of submission:** MM/DD/YYYY.
- **Language Type:** E (English) and/or S (Spanish).
- **Version Type:** Revision (V.2) or Final (F)

Initial Submission Example:

XXX	23	001	MF	07/01/2022	E/S
Health Plan	Fiscal Year	Sequence #	Type of Material	Date of Submission	Language Type

Revision Example:

XXX	23	001	MF	07/01/2022	E/S	V.2
Health Plan	Fiscal Year	Sequence #	Type of Material	Date of Submission	Language Type	Version Type

The body of the email shall include:

- Title of material
- Briefly describe what and how the material will be used;
- The timeframes for the use;
- The media platform to be used for distribution if approved;
- If the material is mandatory/required; and,
- Provide any additional pertinent information regarding your submission (i.e. providing tracking number(s) of related materials (videos, brochures, flyers, etc.), details about previously approved or denied materials/programs, etc.)

How to submit materials

- Each material must be submitted separately unless otherwise approved by the state agency.
- Submit the entire document with every submission (i.e. translation certificate if applicable).
- If a promotional item, include written proof of cost per unit with submission.

How to submit previously approved material as a new submission:

Remove the previous shortened tracking number and submission date prior to your new submission and follow the guidelines above. When replacing an existing material, please include the previously approved shortened tracking number in the body of the email of the submission.

Material Guidance:

- All call scripts (live agent or IVR) need to include a minimum of the following:
 - Greeting;
 - Purpose of Call;
 - Identity Verification: The health plan shall verify the identity of the MO HealthNet member or authorized parent/guardian prior to providing benefit information. Acceptable verification shall include at a minimum three (3) of the following: first and/or last name, date of birth, MO HealthNet (Medicaid) number, full or last four numbers of the social security number, or full address (street name, city, zip code). The methods utilized must be approved in advance by the state;
 - If script is ***asking*** members name over phone, include three (3) additional forms of identification. This method is used if member is unable to talk (child) and member's authorized representative is speaking on behalf of member.
 - If script is ***giving*** for members name over phone, include two (2) additional forms of identification. This method is used when you ask for member's full name in script and they confirm the name. Then follow up with 2 forms.
 - Closing; and
 - Voicemail messages shall not include benefit specific information. The MHD recommended responses for voicemails should include, but no limit to: "We want to confirm your appointment tomorrow." or "We have important information about your benefits."
 - Health plans may mention member incentive rewards in member facing materials and can be posted on a secure portal for viewing. Health plans may not mention the nominal amount of gifts or rewards in public facing marketing materials such as banners, public websites, or posters.
 - The health plan is not limited to a certain character count for text messages
 - Health Plans are required to submit certain materials for required/mandatory review. These materials are:

Mandatory/Required Approval for General and Specialty Plans:

- Additional Health Benefit Materials 2.8.9.b and 3.7.3
- Member Handbook – 2.13.16.d
- Member Notice Templates 2.15.6.b
 - Grievance and Appeal Notices
 - Provider Termination Notices