



MEMORANDUM

DATE: November 25, 2008

TO: Current and Applicant MA PFFS Plans That Allow Provider Balance Billing

FROM: Teresa DeCaro, RN, M.S.
Acting Director, Medicare Drug and Health Plan Contract Administration Group

SUBJECT: Required Inclusion of Balance Billing Notification in the 2009 Evidence of Coverage

The Centers for Medicare & Medicaid Services (CMS) has become aware that the standardized Evidence of Coverage (EOC) does not inform beneficiaries that Private Fee-for-Service (PFFS) plans permit balance billing.

PFFS plans that permit balance billing should describe what balance billing is in their 2009 EOC and what impact it may have on their members and their cost-sharing. The plan may include this information in the EOC or may send an erratum no later than December 31, 2008. The erratum may be mailed separately or may be included in another plan mailing, such as a newsletter. CMS approval is not required prior to sending the erratum to plan members.

If you have questions about the information contained in this memorandum or need additional information, please contact Amy Larrick at Amy.Larrick@cms.hhs.gov.