

**Congress of the United States**  
**House of Representatives**  
**Washington, D.C. 20515**

December 10, 2019

The Honorable Seema Verma  
Administrator  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard  
Baltimore, MD 21244

Dear Administrator Verma:

We are writing regarding recent reports that the updated Medicare Plan Finder that the Centers for Medicare & Medicaid Services (CMS) launched for beneficiary use during this Medicare Open Enrollment season is confusing, generating incorrect results, and inadvertently leading beneficiaries to select plans that may not best fit their needs through choosing plans with lower premiums but higher overall costs.

Medicare Plan Finder is an interactive website operated by CMS that serves as an important resource for Medicare beneficiaries to compare Medicare coverage options, most notably Part D prescription drug plans. Each year, millions of beneficiaries use Plan Finder, including during the Open Enrollment Period, which closed on December 7th, to review their coverage options and switch plans as needed based on year to year changes which may affect beneficiary out-of-pocket costs. When selecting among plan choices, beneficiaries must navigate through a number of factors to make informed decisions about out-of-pocket costs, covered services, and drug formulary options. In order to empower beneficiaries to make optimal coverage decisions based on their unique health needs, it is critical that Plan Finder convey relevant information in an easy-to-understand and approachable manner. Most importantly, this information must be correct.

The Government Accountability Office (GAO) issued a report earlier this year that found that usability problems with Plan Finder led to confusion and challenges for beneficiaries when comparing coverage options.<sup>1</sup> Given these findings, CMS's decision to overhaul Plan Finder ahead of this year's Open Enrollment Period, including modernizing the website and updating the tool's technology was especially timely. We appreciate CMS's efforts to update and improve this resource.

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<sup>1</sup>Government Accountability Office, *Medicare Plan Finder: Usability Problems and Incomplete Information Create Challenges for Beneficiaries Comparing Coverage Options*. (July. 2019) (GAO-19-627).

We are concerned, however, by reports from consumer advocates, volunteers, and other Medicare counselors that help beneficiaries compare and select plans. They have said that in some cases, Plan Finder is not providing beneficiaries with accurate and appropriate information necessary to choose a plan that covers needed prescription drugs or services. It is critical that Medicare beneficiaries have the most accurate and up-to-date information and that Medicare provides them with reliable information on their health care costs and coverage information relevant to their needs. Understanding cost-sharing obligations when selecting plans is especially critical for seniors who take prescription medications that often can have costly coinsurance, tiering, and co-payment requirements.

For this reason, we strongly urge you to immediately examine these concerns, and evaluate and correct, as necessary, errors with the Plan Finder tool identified by consumer advocates. We must ensure that the tool serves its intended function of providing beneficiaries with accurate information to aid in plan selection. Additionally, given that Medicare Open Enrollment has now closed, CMS must ensure that beneficiaries who may have relied on Plan Finder to make these decisions are held harmless. These beneficiaries should be included in a Special Enrollment Period so they can make changes to their plan selection despite the close of the Medicare Open Enrollment Period at this point.

In addition, we request a briefing for our staff on the new Plan Finder, as well as written responses to the following requests by December 31, 2019.

1. Provide data on the usage of the new Plan Finder during the Medicare Open Enrollment season from October 15, 2019 through December 7, 2019, including the number of total page views and website traffic statistics, as compared to the five preceding Medicare Open Enrollment periods.
2. Provide a detailed list of reported Plan Finder errors that have been reported to CMS through State Health Insurance Assistance Programs, stakeholders, 1-800-Medicare, or others since its public launch, as well as an indication of CMS' evaluation of the claim and whether any issue has been resolved by the date of this letter. Additionally, please provide the date for each correction.
3. Provide a detailed timeline for addressing any outstanding issues currently known to CMS.
4. Explain how CMS intends to make further improvements to the new Plan Finder, including any plans to engage stakeholders and incorporate their feedback.

5. Clarify under what circumstances a Special Enrollment Period is available to beneficiaries who believe they made the wrong plan choice because of inaccurate or misleading information, as referenced in a November 27, 2019 blog post.
6. How does CMS plan to operationalize and advertise the ability for beneficiaries to access a Special Enrollment Period, if appropriate?
7. Clarify what CMS means by its statement that the agency is “doubling down on ensuring [Plan Finder is] a simple and painless experience for beneficiaries.”<sup>2</sup>

Thank you for your prompt attention to this important issue, and we look forward to your response. Should you have any questions or would like to discuss this request further, please contact Jacquelyn Bolen with the Committee on Energy and Commerce majority staff at (202) 225-5056, Sarah Levin with the Committee on Ways and Means majority staff at (202) 225-3625, J.P. Paluskiewicz with the Committee on Energy and Commerce minority staff at (202) 225-3641 or Alyene Mlinar with the Committee on Ways and Means minority staff at (202) 225-4021.

Sincerely,



Frank Pallone, Jr.  
Chairman  
Committee on Energy and Commerce



Richard Neal  
Chairman  
Committee on Ways and Means



Greg Walden  
Ranking Member  
Committee on Energy and Commerce



Kevin Brady  
Ranking Member  
Committee on Ways and Means

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<sup>2</sup> The Centers for Medicare & Medicaid Services. *We're Heading into the Last Week of Medicare Open Enrollment, Don't Miss Out on Your Chance to Find Better Coverage* (Nov. 17, 2019) ([www.cms.gov/blog/were-heading-last-week-medicare-open-enrollment-dont-miss-out-your-chance-find-better-coverage](http://www.cms.gov/blog/were-heading-last-week-medicare-open-enrollment-dont-miss-out-your-chance-find-better-coverage)).