



## Final Medicare Rule Adopts Several of NAIFA's Core Recommendations

On Jan. 26, 2026, the National Association of Insurance and Financial Advisors (NAIFA) submitted a detailed comment letter on the proposed rule (CMS-4212-P). NAIFA applauded several CMS proposals for balancing beneficiary protections with regulatory efficiency and marketplace functionality, particularly around third-party marketing organizations (TPMOs), scope of appointment (SOA) rules, call recording retention, special enrollment periods (SEPs) for provider terminations, and restrictions on educational/marketing events. NAIFA also offered targeted enhancements based on agents' real-world experience with beneficiaries.

Key NAIFA Recommendations and Degree of Inclusion in the Final Rule:

1. TPMOs (Definition, Oversight, and Disclaimer Requirements)
  - **NAIFA Position:** Strongly supported CMS's proposal to clarify/modify the broad TPMO definition (§§ 422.2260 and 423.2260). Recommended creating differentiated categories (e.g., professional agents/small agencies, field marketing organizations/FMOs, high-volume call centers, lead generators) with scaled, risk-based requirements to improve oversight, transparency, and competition.
  - **Final Rule Outcome:** CMS finalized modifications to TPMO disclaimer requirements (e.g., timing and content changes, including removal of certain SHIP references) and related marketing rules. This aligns with NAIFA's call for clarification and burden reduction, though the final rule does not adopt the full categorical differentiation NAIFA requested. Partial inclusion—significant progress on oversight and disclaimers as advocated.
2. Scope of Appointment (SOA) Timing and Flexibility
  - **NAIFA Position:** Supported proposed clarifications to the 48-hour waiting period and related timing rules. Recommended additional modernizations: defining "in writing" to include electronic consent; making SOA validity consistent across plan years (full 12 months regardless of product-year specificity); allowing beneficiaries to extend validity until rescission; and requiring minimum form elements for accountability.
  - **Final Rule Outcome:** CMS eliminated the 48-hour SOA waiting period (allowing same-day appointments) and permitted SOA collection at educational events. SOA requirements remain in place overall. Strong inclusion of the core timing relief NAIFA supported.

### 3. Marketing/Sales Call Recording Retention

- **NAIFA Position:** Strongly applauded the proposal to shorten the 10-year retention period (viewed as overly burdensome). Recommended reducing it further to 3 years (aligning with complaint windows, audit cycles, and Medicare plan years) with a safe harbor for disposing of older recordings.
- **Final Rule Outcome:** CMS reduced the retention period to 6 years (with options for audio-only retention of 3 years plus transcripts in some cases). Partial inclusion—a meaningful reduction from 10 years that directly responds to NAIFA’s burden concerns, though not to the exact 3-year timeframe requested.

### 4. Marketing Events Following Educational Events

- **NAIFA Position:** Strongly supported removing the 12-hour restriction on holding marketing events at the same location after an educational event, citing improved beneficiary access (especially for those with mobility/transportation issues) without compromising protections.
- **Final Rule Outcome:** CMS removed the 12-hour delay requirement. Full inclusion—directly adopts NAIFA’s recommendation.

### 5. Special Enrollment Period (SEP) for Provider Terminations

- **NAIFA Position:** Strongly supported streamlining the SEP process (e.g., consolidating notifications into the termination notice). Recommended allowing proof of the provider termination letter as evidence of eligibility (in addition to beneficiary attestation) to balance access with fraud prevention.
- **Final Rule Outcome:** CMS finalized streamlining measures for SEPs related to provider terminations. The specific “proof of letter” evidentiary option was not highlighted as adopted. Partial inclusion—core streamlining aligns with NAIFA’s support.

NAIFA’s advocacy focused on practical, beneficiary-centered improvements drawn from agents’ daily experience and the expertise of its [Medicare Collective](#). CMS incorporated a substantial portion of these recommendations, and these changes are expected to enhance marketplace efficiency, reduce costs for agents and plans, and improve timely access to professional Medicare advice for beneficiaries. Areas where NAIFA sought further differentiation (e.g., TPMO categories) or additional flexibilities (e.g., electronic SOA, 3-year retention) saw partial movement, but the final rule reflects a clear responsiveness to stakeholder input in the marketing/enrollment space that NAIFA prioritized.

NAIFA described the proposed changes they supported as “thoughtful, fair, and balanced.” The finalized provisions continue in that direction. No major NAIFA recommendations appear to have been rejected outright; instead, CMS struck a balance that advances many of their goals.