

Advantage Plus Insurance Agency

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February 11, 2026

Via Electronic and Certified Submission

Centers for Medicare & Medicaid Services
Center for Medicare
Medicare Drug & Health Plan Contract Administration Group (HPAG)
7500 Security Boulevard
Baltimore, MD 21244

Re: Request for CMS Review and Standardized Safeguard — Agent of Record (AOR) Protection Following Beneficiary Reinstatement

Dear HPAG Leadership and Medicare Advantage Oversight Officials:

On behalf of Advantage Plus Insurance Agency, a national organization supporting licensed Medicare brokers across multiple states, we respectfully submit this formal request for CMS review, guidance, and oversight concerning short-term disenrollment and reinstatement patterns that result in the removal of the original Agent of Record (AOR).

Advantage Plus operates under strict compliance standards aligned with CMS regulations, including beneficiary best interest requirements, Scope of Appointment (SOA) protocols, and fair marketing practices pursuant to 42 CFR § 422.2260 and § 422.2274. Our agents enroll beneficiaries based solely on plan suitability and medical necessity—not compensation incentives.

Over recent months, we have identified recurring enrollment patterns involving:

- Beneficiaries disenrolled without full understanding or proper consent
- Complaint-based reinstatements processed through Medicare
- Short-term enrollment gaps, typically 30 days
- Removal of the original Agent of Record despite reinstatement into the same carrier
- Structured short-term enrollment changes that appear designed to bypass existing AOR limitations

Beneficiary Impact

- Disruption of continuity of care
- Cancellation or delay of prior authorizations
- Reset of deductibles and benefit structures
- Interrupted provider access
- Administrative instability during active treatment

Program Integrity Concerns

- Circumvention of AOR protection frameworks
- Incentivized short-term enrollment manipulation
- Undermining of compliant broker activity
- Inconsistent carrier handling of reinstatement cases

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CMS has consistently emphasized beneficiary protection and anti-manipulation safeguards under the Medicare Managed Care Manual (MMCM), Chapter 2 (Enrollment and Disenrollment), and marketing oversight provisions. The patterns described above may conflict with the intent of these regulatory safeguards.

Accordingly, we respectfully request CMS consideration of a standardized safeguard applicable across all Medicare Advantage organizations whereby:

- If a beneficiary is disenrolled and subsequently reinstated into the same contract number within a 30–60 day period, the original Agent of Record shall remain intact, regardless of whether reinstatement results from complaint resolution, administrative correction, or qualifying enrollment reversal.

This proposal does not seek indefinite AOR protection. Rather, it is intended to prevent short-term enrollment manipulation, preserve continuity of care, and ensure uniform administrative handling across Medicare Advantage organizations.

Advantage Plus stands ready to provide case documentation and enrollment examples upon request. We welcome further dialogue with CMS regarding potential rule clarification, sub-regulatory guidance, or oversight measures deemed appropriate.

We appreciate CMS's continued commitment to Medicare beneficiary protection and program oversight.

Respectfully submitted,

Advantage Plus Insurance Agency

Bobby Bakhshandeh
Chief Executive Officer
Licensed Medicare Agent