



## Agents must be fully contracted and certified per state law to support clients' Medicare needs

- Complete AHIP and current carrier certifications. Check your status by logging into <u>CareFreeAgency.com</u> or reaching out to carriers directly. Remember, you <u>must</u> re-certify to continue receiving commissions.
- Review plans in your market to add carriers with a strong value proposition. You can request additional carriers on CareFree's website or by calling us at (888) 549-4800. Attend carrier product trainings so you fully understand their products.



# Submit all events and event updates to carriers, including all virtual events, according to carriers' policies

- Report all formal and informal sales seminars and event cancellations and revisions to all carriers you wish to represent at each event.
- You **must** also check with carriers for their process for reporting and holding **educational events**.
- General event guidance can be found on CareFree's website.



#### Don't market 2021 products prior to October 1

- Do **not** schedule appointments for 2021 sales **prior** to October 1 it's considered marketing and a CMS violation. This includes in-person, over the phone, and online marketing appointments.
- Do not send postcards or other marketing materials for 2021 plans or sales to your book of business, or to anyone who's completed a 2021 Consent-to-Contact form for

this AEP until **after** October 1. This includes advertising 2021 marketing and sales events scheduled in early October.

• **Continue** to market and sell 2020 plans to age-ins or for special enrollment situations for October 1, November 1, December 1 effective dates.



## Marketing from October 1 to October 15

- You **can** present 2021 plans to beneficiaries starting October 1, but **can't** solicit, request, or accept applications until October 15.
- **Do not** turn in applications before October 15 that are signed by clients or you and dated **prior** to October 15. Collect applications after October 15 from beneficiaries you've met with, or call to remind them.



## Unsolicited direct contact / consent-to-contact / scope of appointment

- It's a CMS violation to market through unsolicited direct contact, referred to as "cold calling." This includes going door-to-door.
- A signed Consent-to-Contact form must be obtained before contacting beneficiaries by phone.
- Be sure to document SOAs prior to holding one-on-one appointments to discuss Medicare plans.
- SOA is **not** required when the one-on-one meeting is part of a reported formal or informal marketing/sales events.
- SOA documentation can be obtained by:
  - beneficiary-signed, hard copy;
  - o over the phone; or
  - electronically.
- Check with carriers for their SOA documentation process.
- Remember, all Consent-to-Contact and SOA forms must be maintained by either
  you or the carrier for at least 10 years according to CMS guidelines.



## Replace star rating sheets with 2021 information

 CMS generally releases new Star Ratings in mid-October and requires replacement within 21 days of being issued. Be sure to remove all 2020 Star Rating information from sales kits and replace with 2021 Star Rating information. Get the new Star Rating sheets from carriers.



## Ways to avoid receiving member complaints

## Prior to enrollment, be sure to:

- Explain thoroughly the plan type being sold and how care will be received, e.g., if a client switches from having Original Medicare with a PDP to an MAPD, they'll now use a physician network; copays could be different.
- Do a **comparison and benefit analysis** so your client knows the **differences between their old plan vs. the new plan**, i.e., benefits, physician network, copays, cost sharing.
- Always confirm client's physicians and specialists are in network and their medications are on the formulary.
- Be clear when explaining any included dental or vision benefits. Some plans may require a provider network; some may offer a reimbursement benefit (member pays out-of-pocket for services, then requests reimbursement), etc.

View this **simple video** on avoiding allegations from the CareFree website.



## Submitting applications in AEP

- As a rule, turn in completed applications on the day they are completed. Be sure to check with carriers on acceptable timelines and processes for getting applications to them.
- Follow each carrier's rules for application submission as found on carriers' broker portals.
- Paper applications can be **faxed** to carriers or CareFree. Check with carriers to see if a signed Scope of Appointment form must be attached to their paper applications.
- Consider using carrier electronic enrollment tools to reduce errors which can delay or deny applications. Go to carriers' broker portals for electronic enrollment instructions.
- CareFree's new CareCompare is our powerful multi-carrier compare, quote, and enrollment tool that enables CMS-compliant sales from anywhere with e-SOA, e-Kit, and e-Signature features. It also provides you with your own personalized, clientfacing website.
- You must first complete our <u>CareCompare training course</u> to gain access to the tool. Once training is complete, you'll be able to access it through your dashboard on our agent website.



#### **Customer service**

Keep new clients by staying in touch.

- Be sure to call your members and check:
  - they've received their plan information and ID Card
  - they've set an appointment with their PCP
  - they know how to take advantage of the extra benefits in their plan through mail-order pharmacies, over-the-counter supplies, transportation, etc.



## **Preparing for OEP**

- Be available to beneficiaries during the Medicare Open Enrollment Period (January 1 - March 31).
- During OEP, any beneficiary with any type of MA plan\* can make one change to any plan combination they'd like: a different MAPD, MA, or Original Medicare with a PDP (see table below).

Currently enrolled for 1/1/2021 in:	Can make this change from 1/1/2021 - 3/31/2021:
Original Medicare	CANNOT USE OEP
PDP Only	CANNOT USE OEP
Cost Plan	CANNOT USE OEP
MA Only*	<ul><li>Another MA Only</li><li>MAPD</li><li>Original Medicare with or without a PDP</li></ul>
MAPD*	<ul> <li>Another MAPD plan</li> <li>An MA-Only plan</li> <li>Original Medicare with or without a PDP</li> </ul>

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