



COMPLAINT ALERT

Compliant Sales Presentation

SEPTEMBER 27, 2012

AGENT NOTIFICATION

- Be Informed
- Educate Your Clients
- Protect Our Members

It is important to keep the following requirements in mind as you prepare to present Humana's Medicare Advantage (MA) and Prescription Drug Plans (PDP):

- Agents must be certified for the effective year to present material for that year (2013 material requires a 2013 certification)
- 2013 Plans cannot be marketed until **October 1, 2012**
- **AEP** enrollment applications can **NOT** be taken and turned in until **October 15th**
- Medicare Enrollment applications should be turned in the day they are signed and can be faxed or mailed - **FAX – (877) 889-9936**

[JOB AID: How to create a UPS label](#) (AP-316)

Compliant Sales Presentation

All sales presentations should be conducted in a compliant manner which includes:

- Giving a full sales presentation in its entirety using the CMS approved MA or PDP presentation supplied by Humana
- You can use the "flip-board", DVD or link below to conduct the presentation. See links at the bottom.
- During each sales appointment you must:
 - ✓ Have secured a Scope of Appointment (SOA) outlining the plans to be discussed **prior to the appointment** taking place. SOA should be obtained at least 48 hours in advance of the appointment. The SOA form should be submitted to Humana along with the corresponding enrollment application
 - ✓ Review and leave the Sales brochure with the prospect
 - ✓ Review and leave the Summary of Benefits along with the new CMS required Multi-Language insert with the prospect
 - ✓ Leave the Plan "Star" rating with the prospect
 - ✓ Formularies and Directories should be left with the beneficiary if requested. It is always best to check the on-line physician finder to ensure the most up to date Directory information. Members will receive a Directory in their "Welcome" kit.
 - ✓ At all PFFS appointments, you must determine which of the possible disclaimers applies and must either verbally read or state the applicable PFFS disclaimer. In addition, the PFFS leaflet must be given to each prospect.
- Prepare the client for the Outbound enrollment verification (OEV) call – The new OEV script requires that the person be able to confirm their specific plan premium, copays, etc. so be sure to use the part of the Sales Brochure to help with that!

PFFS Disclaimers

- For non-network PFFS plans: "A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your provider is not required to agree to accept the plan's terms and conditions of payment, and thus may choose not to treat you, with the exception of emergencies. If your provider does not agree to accept our terms and conditions of payment, they may choose not to provide health care services to you, except in emergencies. If this happens, you will need to find another provider that will accept our terms and conditions of payment. Providers can find the plan's terms and conditions of payment on our website at: <http://www.humana-medicare.com/medicare-advantage-plans/humana-gold-choice-terms-conditions.asp>

- For full network PFFS plans: “A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. We have network providers (that is, providers who have signed contracts with our plan) for all services covered under Original Medicare. These providers have already agreed to see members of our plan. If your provider is not one of our network providers, then the provider is not required to agree to accept the plan’s terms and conditions, of payment, they may choose not to provide health care services to you, except in emergencies. If this happens, you will need to find another provider that will accept our terms and conditions of payment. Providers can find the plan’s terms and conditions of payment on our website at: <http://www.humana-medicare.com/medicare-advantage-plans/humana-gold-choice-terms-conditions.asp>
- For partial network PFFS plans: “A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. We have network providers (that is, providers who have signed contracts with our plan) for durable medical equipment, home health providers, and some freestanding labs and hospitals. These providers have already agreed to see members of our plan. If your provider is not one of our network providers, then the provider is not required to agree to accept the plan’s terms and conditions, of payment, they may choose not to provide health care services to you, except in emergencies. If this happens, you will need to find another provider that will accept our terms and conditions of payment. Providers can find the plan’s terms and conditions of payment on our website at: <http://www.humana-medicare.com/medicare-advantage-plans/humana-gold-choice-terms-conditions.asp>

Additional Guidance – Appointments Between October 1st and December 7th

An agent may assist a prospect in completing a paper enrollment application beginning October 1st. The agent should place his/her name and agent ID (SAN) in the agent use box of the enrollment form. **Do not date the form if it is completed prior to October 15th.** If the prospect desires to sign the application at the time of the presentation, the prospect may do so using the date of the presentation.

- An agent must leave the entire application with the prospect/member (do not take an office copy) along with the envelope addressed to:
 Humana Medicare Enrollment
 2432 Fortune Drive
 Lexington, KY 40509
- The agent must also state that the application should be sent to Humana for receipt on or after October 15th. **An agent cannot encourage a member to send the application to Humana for receipt prior to October 15th.**
- If a prospect qualifies for a November or December effective date due to a SEP, ICEP or IEP and wishes to enroll in a 2012 Humana plan, the 2012 sales presentation, summary of benefits and 2012 application should be used.
- If a person qualifies for enrollment in a 2013 Humana plan via SEP, ICEP, IEP or AEP, the 2013 sales presentation, summary of benefits and 2013 application should be used. **All enrollment applications that are NOT coded as AEP or NON can be taken and turned in.**
 - ✓ AEP coded enrollment applications can be collected beginning October 15^h
 - ✓ NON coded enrollment application can be collected beginning December 8th
- Applications **should NOT be copied.** Each application has a unique “bar code”

Humana Sales Presentations (AP-104b)

If you have questions about the information contained in this communication, please contact the Agent Support Unit.

AGENT SUPPORT
 (800) 309-3163
agentsupport@humana.com
 Monday-Friday 8:00 – 9:00 EST
 Saturday 8:00 – 5:00 EST