



Telesales Guide

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Telesales and Compliance

Medicare Communication and Marketing Guidelines (MCMG):

https://www.cms.gov/Medicare/Health-Plans/ManagedCareMarketing/Downloads/CY2019-Medicare-Communications-and-Marketing-Guidelines_Updated-090518.pdf

Marketing Over the Phone (Page 9 of the MCMG):

40.3 – Marketing through Telephonic Contact

42 CFR §§ 422.2268, 423.2268

Plans/Part D sponsors and their agents/brokers may not make unsolicited telephone calls to prospective enrollees. However, they are permitted to contact their current enrollees to discuss plan business, but cannot market prior to October 1 under the pretense of plan business.

Plans/Part D sponsors, and their agents/brokers, may conduct the following specific telephonic activities:

- Call current enrollees, including those in non-Medicare products, to discuss plan business (examples of this include calls to enrollees aging into Medicare from commercial products offered by the same organization, calls to an organization's existing Medicaid/MMP plan enrollees to talk about its Medicare products, and calls to current MA enrollees to promote other Medicare plan types or to discuss plan benefits);
- Call beneficiaries who submit enrollment applications to conduct business related to enrollment;
- Call former enrollees after the disenrollment effective date to conduct disenrollment surveys for quality improvement purposes (disenrollment surveys conducted telephonically, email or conventional mail may not include sales or marketing information);
- Under limited circumstances with approval from the CMS Account Manager, call LIS-eligible enrollees that a plan is prospectively losing due to reassignment to encourage them to remain enrolled in their current plan;
- Call individuals who have given permission for a plan or sales agent to contact them (examples of permission include filling out a business reply card, emailing the Plan/Part D sponsor requesting a return call, or asking a customer service representative to have an agent contact them); and,
Note: Permission applies only to the entity from which the individual requested contact and for the duration and topic of that transaction.
- Return phone calls or messages from individuals or enrollees, as these are not considered unsolicited contacts.

Plans/Part D sponsors, and their agents/brokers, may not conduct telephonic activities that include, but are not limited to, the following:

- Unsolicited calls about other business as a means of generating leads for Medicare plans (e.g., bait and switch strategies);
- Calls based on referrals (if an individual would like to refer a friend or relative to an agent or Plan/Part D sponsor, the agent or Plan/Part D sponsor may provide contact information such as a business card that the individual could provide to a friend or relative);
- Calls to market plans or products to former enrollees who have disenrolled, or to current enrollees who are in the process of voluntarily disenrolling;
- Calls to beneficiaries who attended a sales event, unless the beneficiary gave express permission at the event for a follow-up call (there must be documentation of permission to be contacted); or,

Collecting a Scope: Page 54 of the MCMG:

| Scope of Appointment (Communications) | |
|---|--|
| <i>To Whom Required:</i> | Must be documented for all marketing activities, in-person, telephonically, including walk-ins to Plan/Part D sponsor or agent offices. |
| <i>Timing:</i> | Prior to the appointment. |
| <i>Method of Delivery:</i> | Beneficiary signed hard copy, telephonic recording, or electronically signed. |
| <i>HPMS Timing and Submission:</i> | Not applicable. |
| <i>Format Specification:</i> | No model required, must include required content. |
| <i>Guidance and Other Needed Information:</i> | <ul style="list-style-type: none"> • The following requirements must be on the scope of appointment form or on the recorded call: <ul style="list-style-type: none"> ○ Product types to be discussed ○ Date of appointment ○ Beneficiary and agent contact information ○ Statement stating, no obligation to enroll, current or future Medicare enrollment status will not be impacted, and automatic enrollment will not occur. • A new SOA is required if, during an appointment, the beneficiary requests information regarding a different plan type than previously agreed upon. |
| <i>Translation Required (5% Threshold):</i> | Yes. |

Submitting and Enrollment Form (Page 36 of the MCMG):

| Enrollment Form/Request (Communications) | |
|---|---|
| <i>To Whom Required:</i> | Upon request. All organizations/sponsors must have available a paper enrollment form in addition to any other acceptable enrollment mechanisms. |
| <i>Timing:</i> | Not applicable. |
| <i>Method of Delivery:</i> | Paper enrollment forms may be in hard copy or electronic format (e.g., PDF file) and must be provided via email, online portal for current members, and upon request (e.g., if beneficiary does not want to enroll telephonically or electronically). Any enrollment mechanism outlined in enrollment guidance is acceptable for an enrollment request. |
| <i>HPMS Timing and Submission:</i> | Submission required by statute. Code 1070 or 1072. |
| <i>Format Specification:</i> | Model provided, modification permitted. Must follow requirements for enrollment mechanisms and required data elements outlined in enrollment guidance. |
| <i>Guidance and Other Needed Information:</i> | Eligibility, Enrollment, and Disenrollment – Medicare Managed Care Manual-Chapters 2 and 17D, and Medicare Prescription Drug Manual-Chapter 3. |
| <i>Translation Required (5% Threshold):</i> | Yes. |

MCMG FAQ's:

<https://www.ncoa.org/wp-content/uploads/FAQ-Medicare-Marketing-and-Communications-Guidelines.pdf>

5. What are Medicare's rules for how and when Medicare Advantage and Part D plan representatives can call beneficiaries?

An agent or broker **can**:

- Call current plan enrollees

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- Call beneficiaries who submit enrollment applications to provide guidance related to enrollment
- Call former enrollees to discuss why they disenrolled
- Call individuals who have given permission for a plan agent or broker to contact them
- Return phone calls and messages from individuals or plan enrollees

An agent or broker **cannot**:

- Make unsolicited calls
- Call based on referrals
- Call to market a plan or product to an enrollee who is in the process of disenrolling or has already disenrolled
- Call an individual who attended a marketing event, unless the individual gave the plan agent or broker permission
- Call an individual to ask if they received mailed information

Submitting Paper Business Compliantly

- Fax Submission:
 - 1. Fill out the fax cover sheet that includes the HIPAA confidentiality statement
 - a. If you are looking to send to a specific carriers fax cover sheet please use our AEP toolkit to locate (login required):
<https://www.smsteam.net/services/sales-tools/ma-pdp-aep-toolkit/>
 - b. If you are submitting to the Senior Marketing Specialists Enrollment Department, please use our Fax cover sheet:
<https://www.smsteam.net/wp-content/uploads/page/SMS-Application-Agreement-and-Cover-Sheet-Selling-Season-2020-1.pdf>
 - 2. Verify the carrier fax number for submitting the application and send
 - 3. Confirm that the fax was received after 24 hours of submission
- Email Submission:
 - 1. Convert the application into a non-editable PDF
 - 2. Attach your application to the secure email
 - a. Many carriers have an email portal on their webpage that is required to submit applications compliantly
 - b. If you are sending the application to the Senior Marketing Specialists Enrollment department and do not have an encrypted email, please use this secure link to submit the application:
<https://ww2.identillect.com/sendemail?u=YXV0aDB8NWNlZDc2ZWJiZWV5ODQwZGZmOTViMTE1>
 - 3. Include the HIPAA confidentiality statement at the bottom of your email:
 - *"This email transmission contains confidential information intended for the parties identified above. If you have received this transmission in error, please immediately notify me by telephone and return the original message to me at the address listed above. Distribution, reproduction or any other use of this transmission by any party other than the intended recipient is strictly prohibited."*
 - 4. Verify that your email was received after 24 hours of sending.
 - a. Many carriers have an email confirmation once you have submitted
 - b. Senior Marketing Specialists will email you within 24 hours that your application was received.
 - Additional Compliance Tips and Resources:

- Medicare Communication and Marketing Guidelines:
<https://smsteam.net/wp-content/uploads/Medicare-Marketing-Guidelines-Release-Memo-8.6.2019.pdf>
- 2020 Scope of Appointments (SOAs) do not have to be submitted with applications, but must be kept for 10 years.
- Many carriers have compliant electronic applications and electronic SOAs.
- You still need a SOA even if you are meeting with a current client.
- A Scope of Appointment is needed for all MAPD and PDP appointments.

Enrollment Express

- Personal URL link found in profile
- "Send Quote" when in the plan comparison portion
- "Send Quick Quote" when you are not working in a profile.
- Video (3 min): <https://vimeo.com/362588778>
- Verbiage from the guide: <https://www.smsteam.net/wp-content/uploads/Plan-Compare-User-Guide-2020.pdf>
 - Quick Quotes are an effective way to deliver plan information and/or a link to an online enrollment form to a beneficiary via email. The email provides system-generated links that allow beneficiaries to access the consumer PlanCompare website and complete their own enrollments online. The links provided in the email containing your Agent ID, which ensures you get credit for any enrollments that result from the Quick Quote. You can send a Quick Quote using one of the following methods:
 - Send Quote– If a beneficiary has a profile in the system, you can send a Quick Quote while shopping for plans through the beneficiary's active profile. The Send Quote button appears on the following pages:
 - View and Compare Plans page
 - Plan Details view
 - Plan Comparison view
 - Alternatively, you can also use the Send Multi-Plan Quote button on the Plan Comparison view to email a plan comparison.
 - Send Quick Quote– If a beneficiary contacts you asking for a quote for a plan but does not want to provide any personal information, you can send a Quick Quote at any time by clicking the Send Quick Quote "Start Over" button at the top of any page.
- Additional Training and Guides to Enrollment Express: <https://www.smsteam.net/enrollment-express/>
- Additional Notes on Enrollment Express:
 - UnitedHealthcare's Health Assessment, Aetna's Value Based Enrollments, or Wellcare's Health Assessment bonus WILL NOT BE available through Enrollment Express enrollments. To take advantage of those bonus programs you must use the carriers enrollment site.

- User information is loaded to Enrollment Express weekly, and once loaded it can take up to 24 hours for that user data to reflect on the website.
- Carriers available are: Aetna, CIGNA, Humana, Mutual of Omaha, SilverScript, CVS, UnitedHealthCare, and WellCare
- Agent must be contracted, certified, and Ready to Sell with Senior Marketing and have requested access for that carrier on the User Agreement for it to show on Enrollment Express.
- If a carrier has a contest using their own e-app, you must use their e-app. Enrollment express will not track or count towards that contest or incentive.
- Cigna does not pay commissions on Part D, only on MAPD enrollments.
- Scope of Appointments (SOA's) are required to keep for 10 years. Many carriers do not require you to submit the SOAs, but Cigna MA does. When using Enrollment Express, it's important to download the SOA and submit it directly to Cigna.
- Wellcare is not allowing enrollments on outside enrollment platforms this year. Enrollment Express will only quote Wellcare plans for 2020.
- When enrolling a client non face-to-face, use the "send quote feature" to email the plan information and enrollment tools. Do not attempt to use screen share technology and complete the application from your own computer/tablet.

Carrier Online/Paper Enrollment Options

- UnitedHealthcare
 - Paper Application:
 - Submit via secure email:
 - Secured Email (Preferred): Request access to secure email by emailing your request to PHD@uhc.com. Do not send enrollment applications (you will receive an email enabling you to access the secured email). If you have received and opened a secure email from the PHD in the past and previously registered to use UnitedHealthcare's secured email services via <https://res.cisco.com>, you do not need to send an additional request for access.
 - Mail:
 - Standard Mail Delivery:
UnitedHealthcare Insurance Company
P.O. Box 105331
Atlanta, GA 30348
 - Fax:
 - A fax cover sheet with HIPAA confidentiality statement must be used on each fax submission (see Agent Guide for example).
 - Most paper enrollment applications may be faxed to **888-950-1170**. Do NOT fax enrollment applications for plans that require restricted processing to this number. Prior to faxing an enrollment application, check the current list of restricted plans to ensure that you use the correct fax number.
 - Enrollment applications for some plans must be processed in the United States (i.e. on-shore). Prior to faxing an enrollment application, check the current list of restricted plans to ensure that you use the correct fax number. When faxed, paper enrollment applications for the following plans must be sent to **1-888-950-1169**:

Restricted Plans (effective 9/9/2019)

| | |
|------------------------|-------------------------------|
| AZ: H0321-002 and -004 | NJ: H3113-005 |
| AZ: H5008-012 | TN: H0251-002, -004, and -005 |

Restricted Plans (effective 12/26/2019)

| | | |
|-------------------------------|---------------|-------------------------------------|
| AZ: H0321-002 and -004 | FL: R0759-003 | TN: H0251-002, -004, and -005 |
| AZ: H5008-012 | GA: H2228-004 | TX: H2228-041 |
| FL: H1045-012, -038, and -039 | GA: H5322-030 | TX: 4514-001 |
| FL: H1889-001 | GA: R2604-004 | TX: H4517-003, -004, -005, and -015 |
| FL: H5420-006 | NJ: H3113-005 | TX: H4590-020, -022, and -033 |

- LEAN e-app:
 - Paper SOA; not required to submit to UHC, keep on file for 10 years
 - Electronic SOA
 - PCP is required to complete application
 - 3 payment options: EFT, Direct Pay, or SSA
 - Available via IPad, and browser
 - Two signature options:
 - “Sign in Lean now”
 - mouse or touch screen
 - “Sign via email with Remote Signature”
 - Applicant email required to receive DocuSign email
 - Agent email is also required
 - There is an access code agreed upon by the agent and applicant and must be entered on the “signing with remote signature page.” The client will use this code once they receive the email and “review document”
 - Applicants have 24 hours to complete remote signature
 - Once completed, agent and applicant receive an email from DocuSign
- Aetna
 - Paper Application:
 - Fax/Mail:
 - Mailing address and fax number for each plan corresponds to the application number in the bottom-right corner of the enrollment form.
 - The first two letters indicate where the enrollment should be sent:

**First two letters of the application number**

| | | |
|-----------|--|---|
| MA | Applies to some Aetna Plans | Fax: 1-866-2342 or 1-888-665-6296 Email: medicareEnrollmentTransactions@Aetna.com Mail: Aetna Medicare PO Box 14088 Lexington, KY 40512 |
| NG | Applies to legacy Coventry plans moving to Aetna brand and expansion markets | Fax: 1-866-756-5514 Mail: PO Box 7405, London KY 40742 |
| JV | Applies to Alliant Health Aetna Medicare and innovation Health plans | |
| DS | Applies to all DSNPs except those in Georgia | |
| US | Applies to all DSNPs in Georgia | Fax: 1-844-984-0393 Mail: PO Box 7083, London KY 40742" |

- Electronic Enrollment - Ascend:
 - Must request access through producer world - can take 7-10 business days
 - Available on iPad/tablet, desktop application, or browser
 - Enrollment Options:
 - Face to face
 - Signature: click to sign, no touch screen/mouse needed, client just clicks "I am the person listed on this enrollment form or I am simply helping to complete this enrollment form"
 - Email quote/E-Kit :
 - Signature: click to sign, no touch screen/mouse needed, client just clicks "I am the person listed on this enrollment form or I am simply helping to complete this enrollment form"
 - Beneficiary ultimately enters data, and proof reads. Agents can verbally assist with how to complete the application, but approval and agreement fall on the shoulders of the beneficiary.
- SilverScript:
 - Electronic Application (Face to Face or Phone): Fill out the online scope from the portal by clicking on "Electronic SOA", Click on "Election Application", launch the e-app on the portal, fill out application on your computer, and have your client sign via email, submit. If a paper scope was collected, send Paper Scope of Appointment with the confirmation number at the top of the form to email: enrollmentverification@caremark.com or fax it to 1-866-552-6205.

- Email Link From Silverscript Portal (Client Fills Out By Themselves): Click on “Email Enrollment”. You can email a link to the client from the agent portal and the client can fill it out without the help from the agent. No scope is needed, but it is recommended. It is also recommended to keep an email trail saying you are sending the link to have proof that that client was connected to you in case of a glitch.
- Online (Face to Face): Fill out online by clicking “Enrollment” and then “Click Here” under Electronic Enrollment, once finished, print the online signature page, have your client sign it (wet signature), then fax it into 1-866-552-6205 or email through the portal using Silver Mail. No Fax Coversheet is required.
- Paper (Face to Face or Phone): Collect paper app from client, enter it in online by clicking the “Enrollment” tab on the Silverscript portal, write the confirmation number on the top, sign and date, then fax it into 1-866-552-6205 or email it through the portal using Silver Mail. No Fax Coversheet is required.
- Paper (Face to Face or Phone): Collect paper app from client, sign and date, and fax to SMS. SMS will enter the application into the portal, add the confirmation number to the app, fax the app to Silverscript, and email the agent that it is complete.
- WellCare
 - Faxed Paper Application:
 - Paper SOA (**No appt ID needed**), or AVL line.
 - Coordinated Care Plan (CCP): 877-780-3920
 - Prescription Drug Plan (PDP): 877-297-3625
 - Fax numbers:
 - MAPD: 866-473-9124
 - PDP: 866-388-1521
 - The last page of the fax must be the personalized application page which included a personalized barcode. The barcode is linked with each agent ID and certification status. This barcode is scanned as applications connect to WellCare systems. An auto generated email will be sent within five minutes of the completed fax transmission.
 - Each agent will receive their personalized application page via email. If it cannot be found, a copy may be requested by creating a support ticket in the Agent Connect portal.
 - Submit only **ONE** application per fax.
 - Uploaded Paper Application:
 - Paper SOA (**No appt ID needed**) or AVL line.

- Coordinated Care Plan (CCP): 877-780-3920
 - Prescription Drug Plan (PDP): 877-297-3625
- Paper application can be scanned into a PDF and uploaded through the Agent Connect portal:
 - Log in to agent connect
 - Select “create support ticket”
 - Select the reason, “New Enrollment Submission”
 - Attach the paper application to the ticket
 - Complete the subject line: New Enrollment Submission for “beneficiary name”
- Once submitted, expect confirmation (response to the support ticket in agent connect) within two business days.
- Mobile Enrollment Platform:
 - Mobile SOA (found in the app), paper SOA, or AVL:
 - Paper SOA: Photo capture and upload in the mobile app (**will need appt ID**)
 - Mobile SOA will provide **required** appt ID for mobile enrollment
 - Agent and beneficiary sign by going to attachments in top right-hand corner.
 - The “Scope of appointment form” under the attachment’s menu does NOT need to be used if submitting an electronic application. Only use the “Scope of appointment form” feature if taking a paper SOA from a beneficiary.
 - AVL line will provide **required** appt ID for mobile enrollment
 - Appointment ID **required**
 - Available on iPhone/iPad and Android devices
 - Search app store or play store for “Wellcare Enrollment Platform”
 - Login consists of NPN and individual (not corp) Agent ID (no username and password needed)
 - Agent and beneficiary signs by touch screen
 - The mobile enrollment app allows for online/offline mode for SOA and Enrollment.
- Electronic/Desktop Enrollment:
 - Mobile SOA, or AVL:
 - Coordinated Care Plan (CCP): 877-780-3920
 - Prescription Drug Plan (PDP): 877-297-3625
 - Wellcare.com – Online Enrollment Application:
 - <https://portal.wellcare.com/agentassistedapp>

- Agent assisted enrollment that requires internet connection
- Appointment ID required
- Windows Application – Offline Enrollment Application:
 - **Must** have windows 10
 - Agent assisted enrollment that does not require internet connection at point of sale but **does** require logging in while connected to Wi-Fi later to submit the application.
 - Downloading the application to your desktop:
 - Access Microsoft store by going to the start menu on your computer.
 - Search “WellCare Enrollment Platform”
 - Download software
 - Appointment ID **required**
- Personalized URL (PURL)
 - www.wellcarerep.com/agentID
 - PURL is a tool allowing beneficiaries to self-enroll into a WellCare plan within your book of business.
 - This is a non-agent assisted online application; therefore, a scope is only required if product specifics are discussed prior to enrollment.
 - Mobile SOA, AVL, or Paper
 - PURL is available 7-10 business days after certifications are complete
 - PURL can be marketed on business cards, flyers, websites, and social media pages.
 - Agents cannot compliantly complete the online application on behalf of the beneficiary or assist the beneficiary with completion of the application.
 - Beneficiaries will have access to comparison tools within PURL, providing an overview of each benefit available in their market.
 - No appt ID required as the beneficiary is enrolling themselves