




Telephonic Presentation Job Aid

Humana allows external agents to conduct telephonic presentations when a face-to-face presentation is not feasible or not desired by the beneficiary. This job aid describes the process for compliantly performing a telephonic presentation. This training material is intended to provide a general overview of agent conduct and compliance requirements. It does NOT attempt to cover all of the laws, regulations, rules, company policies, or other requirements applicable to you.

STEP	GUIDANCE
<p data-bbox="181 445 272 491">1 <input type="checkbox"/></p>  <p data-bbox="196 653 261 680"><i>Start</i></p>	<p data-bbox="420 438 1471 537">A beneficiary notifies you that they wish to hear about their Medicare Advantage and/or Prescription Drug plan options. The agent offers to handle the presentation in-person or telephonically. The beneficiary selects a telephonic presentation.</p> <p data-bbox="420 560 1479 659">If the person is not a member of the agent’s book of business and the agent wishes to reach out to the beneficiary, then the agent <u>must</u> have express permission to contact the person. Acceptable methods:</p> <ul data-bbox="469 682 1471 842" style="list-style-type: none"><li data-bbox="469 682 1289 716">• Approved Business Reply Card / Request for Future Contact Form<li data-bbox="469 726 1344 760">• Message left by prospect to call them back to obtain plan information<li data-bbox="469 770 1471 842">• Web response contact card initiated by the beneficiary/legal representative that specifies the agent may call regarding Medicare plans
<p data-bbox="181 907 272 953">2 <input type="checkbox"/></p>  <p data-bbox="264 1058 321 1085"><i>SOA</i></p>	<p data-bbox="420 900 1354 961">An SOA is required for a telephonic presentation. The agent schedules a phone appointment and obtains a Scope of Appointment. SOA methods:</p> <ul data-bbox="469 984 1438 1058" style="list-style-type: none"><li data-bbox="469 984 1438 1018">• Interactive Voice Response (Humana: 866-945-4471; CarePlus: 888-685-8606)<li data-bbox="469 1029 1000 1058">• Paper (mail in advance and receive back)
<p data-bbox="181 1150 272 1197">3 <input type="checkbox"/></p>  <p data-bbox="139 1350 321 1377"><i>Send material</i></p>	<p data-bbox="420 1144 1471 1243">With permission, the agent mails or emails all required sales material. If the beneficiary agrees, the agent may send the materials using the Digital Marketing Materials link. The agent may also email PDF versions of the documents, including but not limited to:</p> <ul data-bbox="469 1266 1455 1556" style="list-style-type: none"><li data-bbox="469 1266 1455 1419">• <input type="checkbox"/> Link to the Humana or CarePlus sales presentation video, if prospect has indicated they can access internet to view. Viewing the video is OPTIONAL for current Humana members.<li data-bbox="469 1430 1406 1463">• <input type="checkbox"/> Enrollment Book, which also includes required Privacy policy disclosures<li data-bbox="469 1474 743 1507">• <input type="checkbox"/> Plan STAR rating<li data-bbox="469 1518 1414 1556">• <input type="checkbox"/> Summary of Benefits, which also includes required Multi-Language insert <p data-bbox="420 1604 1511 1665">The agent keeps a record of materials mailed/emailed and date. If electronic, retains a copy of all email correspondence and appointment related material.</p>

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<p>4 <input type="checkbox"/></p>  <p><i>Make the call and give presentation</i></p>	<ul style="list-style-type: none"> • <input type="checkbox"/> Call the beneficiary at the scheduled time. • <input type="checkbox"/> Identify yourself and the purpose for your call. • <input type="checkbox"/> Ask the person to open the sales materials you sent. • <input type="checkbox"/> Give the presentation, following these guidelines: <ol style="list-style-type: none"> a. <input type="checkbox"/> Video – optional for current Humana members, ask if they’ve watched it and possibly summarize main points b. <input type="checkbox"/> Enrollment Book – give a guided tour of the information c. <input type="checkbox"/> Star rating – explain the plan’s overall star rating d. <input type="checkbox"/> Summary of Benefits – explain the booklet’s contents, including full disclosure of every plan benefit e. <input type="checkbox"/> Offer to look up medications f. <input type="checkbox"/> Select a primary care physician and look up other providers as requested • <input type="checkbox"/> Invite the person to enroll in the coverage • <input type="checkbox"/> Confirm the beneficiaries primary residence. Agents must hold a license in each state they are selling.
<p>5 <input type="checkbox"/></p>  <p><i>Complete an application</i></p>	<ul style="list-style-type: none"> • <input type="checkbox"/> If the person agrees to enroll, use one of the following enrollment methods after the telephonic presentation: <ol style="list-style-type: none"> a. <input type="checkbox"/> Invite the person to self-enroll through the ‘Enroll Now’ link in the Digital Materials (this action may <u>only</u> be completed by the beneficiary/legal representative) b. <input type="checkbox"/> FastApp (completed by agent and sent to beneficiary/legal representative for electronic signature) c. <input type="checkbox"/> Email a PDF of the enrollment application (express written permission to email required) d. <input type="checkbox"/> Mail a paper application form • <input type="checkbox"/> Facilitate completion of the enrollment form, as applicable • <input type="checkbox"/> If currently has Optional Supplemental Benefits and wants to keep, make sure to include on new application • <input type="checkbox"/> Always confirm you are properly licensed in the state the beneficiary resides.
<p>6 <input type="checkbox"/></p>  <p><i>Explain what happens next</i></p>	<ul style="list-style-type: none"> • <input type="checkbox"/> Explain what happens next by referring to the corresponding page of the Enrollment book and explain what will take place for the member • <input type="checkbox"/> Invite the person to complete the Caregiver PHI form (if applicable) and both of the Member Authorization Forms (Humana, Humana Pharmacy) • <input type="checkbox"/> Invite the person to recommend you to others by sharing your contact information and having them call you • <input type="checkbox"/> Congratulate for decision

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Update your records

- Submit the application, if applicable
- Document notes and outcome
- Schedule follow up actions