



ANNUAL ENROLLMENT PERIOD (AEP) **AGENT READINESS GUIDE**

The tips and strategy you need for a successful AEP!

AEP (the Medicare Annual Election Period) runs from October 15th through December 7th each year. This is your time to shine, connecting with clients and prospects to deliver guidance so they make their best coverage choice.

Use this resource as your guide to the steps you can take from June through AEP to ensure you're ready to make this a successful year.

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The Brokerage Resource
Insurance Marketing Organization

AN INTEGRITY  COMPANY

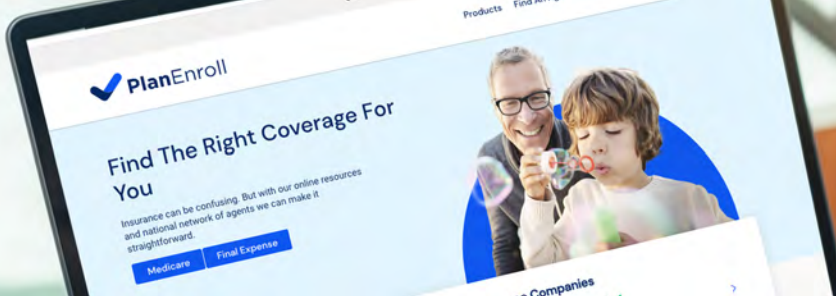


PLAN AHEAD

Create a list of ways you can reach clients and prospects to help you schedule your actions over the next 4 – 5 months.

Marketing Tactic	Actions to Take	Deadline

Be sure to have all of your marketing materials approved by compliance!



PlanEnroll

Using PlanEnroll, you can have your clients create an account with your agent link. Creating a PlanEnroll account with an agent link allows for your clients to connect directly to your MedicareCENTER account, making it easy to quote plans that fit their needs.

Get started with PlanEnroll

- o Become a PlanEnroll Network Agent by completing training at Trainings.PlanEnroll.com
- o Log in to MedicareCENTER to find your Personal Agent Website link and send to your clients
- o Have your client create a PlanEnroll profile using your Personal Agent Website and stay connected with your clients

Collect client information to enhance quoting ability

Collecting client information — and keeping it updated — is easy with your PlanEnroll Personal Agent Website and Profile Sync:

- o Send your clients your Personal Agent Website link
- o In the upper right-hand corner, have them click “Get Synced”
- o Clients will begin an easy six-step process that will prompt them for:
 - Personal and Contact Information
 - Preferred Pharmacy
 - Preferred Doctors
 - Current Prescriptions
 - Current Coverage
 - Scope of Appointment Completion
- o Once completed, this information will show up in the client record in your MedicareCENTER account
- o When you or your client updates their information, it is instantly synced, saving you both time and effort

SCHEDULING

Now that you have goals and ideas for marketing, you'll need to decide when everything — marketing and administration tasks — fits into your schedule.



JULY

Plan AEP marketing

- o **AEP Marketing cannot start until October 1st!**
- o Obtain marketing materials from carriers or your upline
- o Use your planning chart from earlier to decide what items need to be done by when
 - Direct mail printing deadlines
 - Social media calendar scheduled and more!

Plan events (if applicable)

- o Find locations early
- o Choose dates and reserve as soon as possible
- o Plan, create and get event-specific marketing approved
- o Report events to carriers

Prepare plan review letters

- o Clients often leave carriers because they feel like they're not supported
- o AEP is an important time to connect with your book of business
- o Even if your client doesn't plan to switch, reviewing their coverage and health situation can go a long way to building a better relationship with your client
- o Send your letter to your compliance team for review!

Pro Tip: Get familiar with all MedicareCENTER has to offer. With call recording, Scope of Appointments, quoting and more, you'll be able to compliantly and efficiently manage all your client needs. Make sure your contacts are all imported in MedicareCENTER before AEP!



AUGUST

Organize your book of business

- o Your workflow can be simpler if you have all of your contact information in one location, with notes and personal details that help you connect
- o Make sure you have at least a name, mailing address and email for every client and prospect
- o You might engage differently with prospects compared to existing clients — identify a group for each client

Attend any carrier rollout meetings

- o These rollout meetings are crucial so that you can understand upcoming plans
- o Many meetings are virtual — find out where and when so you can schedule your time
- o Watch for carrier emails, or contact your carrier reps

Pro Tip: Make sure your clients are linked to your Personal Agent Website so you can keep track of all the updated information they input. See page 3 of this guide for an overview!





SEPTEMBER

- Mail plan review letters to clients**
- Prepare your “talking notes” for your client plan review conversations**
 - o “How do you feel about your current plan?”
 - o “Any health issues we should consider when thinking about coverage?”
 - o “We want to ensure you are in the right plan for you for next year!”
 - o ... and so on. Create the conversation pieces that work best for you.
- Call clients who do not respond to your plan review letter**
- Schedule plan reviews for October 1st – October 14th**
 - o Let clients know they can bring a friend!
 - o Ask the client if they would like an in-person or virtual meeting
- Finish your AEP marketing**
 - o Verify your ads are designed and ready to publish
 - o Have all marketing materials approved by compliance

Pro Tip: Ask Integrity (AI) is your simple-to-use assistant that helps you plan client meetings, summarize client calls and understand your client’s history—and it’s available as part of MedicareCENTER.

**REMEMBER:
Before October 1:
Never Mail AEP Marketing!
Never Discuss 2025 Plan Specifics!**



OCTOBER 15 - DECEMBER 7

Schedule appointments for current book of business contacts

- o Make sure to let clients know they can bring a friend
- o Leave behind or mail several business cards after each appointment to encourage referrals

Follow up

- o Call clients within two weeks of their appointment
- o Check to make sure they are still satisfied with their plan
- o Remind them you are happy to help their friends and family





SALES

Make sure you are doing everything you can!

Agents develop habits over time that help them succeed. Whether you're a seasoned agent or getting a feel for the industry, there are always extra things you can do to ensure your growth.

Here are a few factors to think about as you prepare to talk with prospects and clients.



Value

- Cheapest does not equal value!
- Find out what your clients value



Network/Doctor

- This is the biggest reason people choose their plan
- Utilize Ask Integrity Specialist Recommendation feature
- Double-check that you have selected the correct doctor and network for the need



Prescription Drug Benefits

- Another big reason people choose a plan
- Take your time to verify that a plan meets your client's PDP needs
- Cheapest is not always the best



Carrier Reputation & Extra Benefits

- Sell plans from carriers who will be around in five years
- Carrier longevity and reputation matters

Virtual Enrollment

Most carriers now require agents to submit applications electronically. Use MedicareCENTER to compare, quote and enroll clients in one system with one sign-on! Plus, MedicareCENTER's call-recording feature helps keep you compliant. No more going to each carrier system to enroll electronically — MedicareCENTER does everything an agent needs, all in one place.





COMPLIANCE

Few things are more important to your future as a successful agent than compliance. Failing to comply could result in serious financial penalties and loss of your agent license. Luckily, there are great resources to help you with compliance.

Compliance Tools & Training

Ask your FMO or upline for resources on compliance. These may include:

- Educational event planning guides
- Guides for AEP and OEP communications
- Agent compliance guide
- Video trainings and webinars
- Social media guidance
- Pre-approved marketing materials
- Review service to approve your self-created materials

Make sure you're doing it right!

Here's where to find the official CMS Marketing Guidelines:

<https://www.cms.gov/medicare/health-drug-plans/managed-care-marketing/medicare-guidelines>

CONGRATULATIONS!

You're now in a great place to ensure your best AEP yet!
Don't hesitate to reach out to your upline

AGENT GOAL SETTING GUIDE



Goal setting for AEP and year round

As you decide how to approach AEP season, your first order of business is to take a moment to reflect on last year, then decide how you'd like things to go this year in comparison. We've put together a few questions to help you set your goals.

1. How was your last AEP?

Whether you have detailed metrics or just a sense of your sales during the last AEP, now's the time to bring that back into your awareness and make some choices. Questions to consider:

- What worked well for getting enrollments?
- Where did your best leads come from?
- Were your sales mostly new clients, existing clients, or a mix?
- Did you sell at a level that met your existing goals?
- Was there anything you would do differently if you could do it again?

AGENT GOAL SETTING GUIDE

2. What are your growth goals?

Take time to consider what you want from this AEP to grow your business. Even better, write them down; research has shown that you are 42% more likely to achieve your goals if they are written down. Here are ideas to get you started:

- Decide the general focus of your goals. Maybe you want to have more clients, recruit more agents or increase your income. Each of these goals takes a different focus.
- Get more specific with your steps. If you want to grow your clients:
 - Sketch out some goal numbers for new clients.
 - Make some time commitment calculations: How many appointments will you need to enroll your desired number of new clients? How long will each appointment take?
 - What are the additional steps you'll need to get the appointments and make the time?
- Alternatively, if you want to recruit more agents:
 - Decide how many new agents you'd like to recruit.
 - Plan your recruitment efforts: word-of-mouth, events, referrals and marketing materials.
 - Make sure your schedule allows for any planned recruitment time.

AEP READINESS:

THE IMPORTANCE OF EXPANDING YOUR PORTFOLIO



Expanding your product portfolio helps you head into the Medicare Annual Enrollment Period (AEP) with a broader choice of options for your clients' holistic needs. You'll be able to build stronger client relationships and offer guidance year round.

Ways to Expand Your Product Portfolio

Medicare Supplements

Medicare Supplement (Med Supp) plans help pay for out-of-pocket expenses that are not covered by Original Medicare, such as deductibles, co-insurance and hospital costs. Many clients appreciate having Med Supp plans to consider as they look for the coverage that offers greater peace of mind around health care costs, and a large choice of providers.

Tips for offering Medicare Supplement plans:

- Get to know the 10 kinds of Med Supp plans by letter and how they differ
- Understand how qualification works for Med Supp plans and when a client may or may not be subject to medical underwriting
- Use the CSG app to search for available plans in your state
- Make a list of carriers with plans you'd like to add, then work with your FMO for contracting

Medicare Part D (Prescription Drug Coverage)

Include Part D if you are selling Med Supp plans to your clients so you can be a one-stop shop for all their Medicare needs.

Tips for offering Medicare Part D coverage:

- Understand how Part D coverage works with Medicare Supplement and Original Medicare
- Find available Part D plans in your area with the CSG app
- Get plan materials and get contracted (if needed) for any new carrier you add
- Stay on top of changes that affect client costs and copays for common medications



Medicare Advantage

If you typically sell Med Supp and Part D, you might consider offering Medicare Advantage plans. They combine Medicare Part A and Part B into one plan with one simple premium. Medicare Advantage plans usually also include Prescription Drug coverage and other benefits.








Tips for offering Medicare Advantage plan

- Work with your FMO to find available plans in your area
- Carriers you already work with may offer Medicare Advantage plans — ask about availability
- Learn about networks, copays and other differences between Medicare Advantage plans and Original Medicare

Ancillary Products

No matter what you already offer to clients in your portfolio, it might help your retention — and increase sales — to add a few extra health-related products your clients could need.

Additional insurance products you may offer:

- | | |
|---|--|
|  Hospital indemnity |  Short-term care |
|  Cancer, heart attack and stroke |  Long-term care (LTC) |
|  Dental, vision and hearing |  Life / Final expense |
|  Critical illness | |

Plus, agents who work with an Integrity upline have access to additional resources that may offer training or guidance on these ancillary products.



With any product you are considering, understand the carrier and their overall strength in the market. The cheapest products may not be the best match for your portfolio or your clients' needs.

AEP is a chance to serve your existing clients while helping new clients find the holistic coverage they are seeking.

Senior Life & Health Needs Analysis

Agent Contact Information:

CLIENT CONTACT INFORMATION:

Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Birthdate _____

Notes _____

CLIENT SPOUSE CONTACT INFORMATION:

Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Birthdate _____

Notes _____

Do you have someone else who helps with Medical Decisions or has Power of Attorney (POA)?

Relationship _____

Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Notes _____

CURRENT HEALTH COVERAGE:

- Employer Plan (not retired)
- Employer Plan
- ACA
- Original Medicare A&B
- Medicare Supplement
- Tricare
- Medicare Advantage
- Medicare Advantage SNP

- VA
- Prescription Drugs
- Short-Term or Long-Term Disability
- Hospital Indemnity
- Cancer Heart Attack
- Stroke Critical Care
- Major Medical Dental Vision
- Hearing Accident

Carrier _____	Plan _____	Premium _____
Carrier _____	Plan _____	Premium _____
Carrier _____	Plan _____	Premium _____
Carrier _____	Plan _____	Premium _____
Carrier _____	Plan _____	Premium _____
Carrier _____	Plan _____	Premium _____

Notes _____

Please note: Eligibility for Medicare may depend on enrollment in other programs such as Medicaid, COBRA, Tricare, etc. Agents: Please note that eligibility for Medicare may depend on enrollment in other programs such as Medicaid, COBRA, Tricare, etc.

CURRENT LIFE COVERAGE:

Term Life

Whole Life

Universal Life

Variable Life

Final Expense

Carrier _____ Plan _____ Premium _____

Carrier _____ Plan _____ Premium _____

Carrier _____ Plan _____ Premium _____

Carrier _____ Plan _____ Premium _____

Carrier _____ Plan _____ Premium _____

Carrier _____ Plan _____ Premium _____

Notes _____

This worksheet is intended for use by licensed insurance agents only to help assess customer needs and aid the sales process. Do not distribute this information or use for any other purpose other than agreed to by a client. This information is protected under the federal Protected Health Information guidelines. For agent use only. Not for public distribution.

MEDICARE ELIGIBILITY:

Employer/Other Coverage End Date _____

Are you currently enrolled in Medicare or new to Medicare?

Part A Effective Date _____ Part B Effective Date _____

Medicare Supplement Open Enrollment Start Date _____

Medicare Supplement Open Enrollment End Date _____

Medicare Advantage Special Enrollment Start Date _____

Medicare Advantage Special Enrollment End Date _____

To avoid Medicare penalties, please note:

Part A late enrollment penalty

- Some people have to buy Part A because they don't qualify for premium-free Part A.
- If you have to buy Part A, and you don't buy it when you're first eligible for Medicare, your monthly premium may go up 10%.
- You'll have to pay the penalty for twice the number of years you didn't sign up.

Part B late enrollment penalty

- Generally, you won't have to pay a Part B penalty if you qualify for a Special Enrollment Period.
- You'll pay an extra 10% for each year you could have signed up for Part B but didn't.
- You may also pay a higher premium depending on your income.

Part D late enrollment penalty

- Generally, you won't have to pay a Part D penalty if:
 - You have creditable drug coverage (coverage that's similar in value to Part D), or you qualify for Extra Help
- You'll pay an extra 1 % for each month (that's 12% a year) if you:
 - Don't join a Medicare drug plan when you first get Medicare.
 - Go 63 days or more without creditable drug coverage).
- You may also pay a higher premium depending on your income.
- After you join a Medicare drug plan, the plan will tell you if you have to pay a penalty and what your premium will be.

If you do not sell for all MA organizations or PDP sponsors in the service area, you must use the following TPMO Disclaimer:

“We do not offer every plan available in your area. Currently, we represent [insert number of organizations] organizations which offer [insert number of plans] products in your area. Please contact Medicare.gov, 1-800-MEDICARE or your local State Health Insurance Program to get information on all of your options.”

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MEDICARE ELIGIBILITY:

Why are you looking to change your coverage? Initial Medicare Enrollment

Moving Financial Annual Review Other _____

Notes _____

Do you need additional coverage (Medicare Advantage or a Medicare Supplement)?

Some of the items and services Original Medicare doesn't cover include:

- Long-term care (also called custodial care)
- Most dental care
- Eye exams (for prescription glasses)
- Dentures
- Cosmetic surgery
- Massage therapy
- Routine physical exams
- Hearing aids and exams for fitting them
- Concierge care (also called concierge medicine, retainer-based medicine, boutique medicine, platinum practice or direct care)
- Covered items or services you get from an opt-out doctor or other provider (except in the case of an emergency or urgent need)

Agent note: Please direct clients to this website to learn more: <https://www.medicare.gov/coverage>

ADDITIONAL MEDICARE COVERAGE:

Please keep in mind that Medicare Supplements are different than Medicare Advantage plans. Key differences include, but are not limited to:

- What is Covered/Plan Options
- Carrier Availability
- When you can enroll/change plans/disenroll
- Network of providers
- Monthly Premiums
- Co-Pays, Co-Insurance, Deductibles and Max Out of Pocket
- Plan Packaging “All-in-One” vs. Separate Plans
- Physician Referrals
- Prescription Coverage
- Plan “Extras” like gym memberships

Please indicate the following areas of importance to your plan:

Areas Needing Coverage _____

Network Availability _____

Monthly Premium Budget _____

Max Out of Pocket Budget _____

Needing Referrals _____

Prescription Coverage _____

Plan Extras _____

Plan Packaging _____

Other (Please Note) _____

Desired Additional Coverage:

Medicare Supplement

Dental/Vision/Hearing

or Medicare Advantage

Other

PDP

LIFE INSURANCE NEEDS ANALYSIS:

Expenses	
<i>Immediate</i>	
Funeral/Burial Estate Taxes, Probate	
<i>Short Term</i>	
Utilities	+
Rent Mortgage	
Food	
Insurance	
Transportation	
Other	
<i>Long Term</i>	
Medical Debt Outstanding	+
Credit Debt Outstanding	
Student Debt Outstanding	
Other Debt Outstanding	
Child Funding (Car, Education, etc)	
Other	
<i>Unexpected</i>	
Emergency Fund (six months total combined income)	+
Inflation	
Total Expenses	-
Assets	
Cash	
Investments	
Retirement Plans	
Annuities	
Social Security Survivor	
Other	
Total Assets	-
Insurance Needs (Expenses Less Assets)	Total:

This worksheet is intended for use by licensed insurance agents only to help assess customer needs and aid the sales process. Do not distribute this information or use for any other purpose other than agreed to by a client. This information is protected under the federal Protected Health Information guidelines. For agent use only. Not for public distribution.

SUMMARY OF RECOMMENDED COVERAGE

Primary Health:

Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____

Ancillary Health:

Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____

Life:

Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____
Carrier _____ Plan _____ Premium _____

Notes _____

WHERE CAN YOU GET MORE INFORMATION?

For more information regarding Medicare, you can:

- Contact your local State Health Insurance Assistance Program (SHIP) to get free personalized help making decisions about your health coverage. To get the number for your local SHIP, call 1-800-MEDICARE.

Get information from Medicare:

- Contact 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- Visit the Medicare web site at Medicare.gov.
- Look at the most recent “Medicare & You” handbook. If you don’t have the most recent Handbook, you can download it on Medicare.gov or request a copy by calling 1-800-MEDICARE.

Call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778. You can also visit SocialSecurity.gov.

Contact your employer or union benefits manager.

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Information regarding health coverage and Medicare reference information provided by Centers for Medicare & Medicaid Services such as the CMS “Fact Sheet”, Medicare.gov and the yearly Medicare & You Guidebook.

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SALES APPOINTMENT CHECKLIST



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This is a tool for Producer reference only and is not approved for public distribution or for use as a presentation script. Do not submit with enrollment applications. All sales and marketing presentations must always include all of the following steps.

****All Virtual Sales Must Be Recorded, and recordings must be retained for 10 years. Limited plan offering disclosure must be stated at the beginning of all sales calls and share the call is being recorded.****

****The following disclosure must always be shared in all written correspondence and for all virtual sales.****

Introduction

- Confirm receipt of completed Scope of Appointment prior to start of appointment... Signature Required 48 hours in advance. There are a few exceptions.
- Include the TPMO disclaimer in electronic correspondence, read it in the first minute of a sales call, and share it during virtual sales meetings.
- Your name, company you represent and contact information (business card)
- Inquire about legal/authorized representatives

Disclosure information

- | | |
|---|--|
| <ul style="list-style-type: none"><input type="checkbox"/> Plans are offered under contracts with CMS which are renewed annually<input type="checkbox"/> Plan benefits are subject to change annually<input type="checkbox"/> Presenter is a state licensed insurance agent and may receive compensations as a result of enrollment | <ul style="list-style-type: none"><input type="checkbox"/> Presenter is not endorsed by or affiliated with Medicare, the Social Security Administration or any branch of the federal or state government<input type="checkbox"/> Plan will pay for covered health care services while you are enrolled (not Medicare) |
|---|--|

Eligibility Requirements

- MA/MAPD Plans - Medicare Parts A and B
- Must continue to pay Medicare Part B monthly premium
- Must maintain residency within plan service area (at least 6 months per year)

When selling D-SNP

- Explain dual eligibility requirements
- Explain additional health care management requirements, governed by federal regulation for D-SNP members
- Explain that changes in state Medicaid eligibility requirements may affect enrollment and/or cost sharing coverage
- Members should use their MAPD Plan ID Card and Medicaid ID cards to obtain health care and Rx

When selling C-SNP

- Explain chronic condition(s) eligibility requirements
- Explain additional health care management requirements, governed by federal regulation for C-SNP members
- Health care provider contact information must be provided at time of enrollment for eligibility verification purposes
- Provider or staff must verify qualified medical condition(s)

AEP REFLECTION

What Did You Do Well?

AEP is a busy and stressful time of year for many.

You made it through. So take some time and reflect on what you've done well, and take note of what you've learned so you can apply it next year.

- How many enrollments did you complete this year?
- What worked well for getting enrollments? Did you switch up your presentation or use new technology to help you? Be specific about it and really think about why you had success.
- Where did your best leads come from? How much did they cost?
- Were your marketing efforts successful? What campaign got the most positive response? Why?
- Did your clients give you any referrals? Why?
- Did anything unexpected happen? How did you overcome and adapt to the situation?

AEP REFLECTION

How Can You Improve?

Even if you had a fantastic AEP there is always room for improvement.

Below are some common areas of improvement everyone should consider.

- Leads can be positive for some and negative for others. Did you receive enough leads this year? Where did you expect to get leads from? Why didn't it work? What can you do next year to improve your lead production?
- How did you manage your time this AEP? What did you spend the most time doing? What can you do to streamline this process?
- Did you have enough products to offer clients? Would offering additional products help you close the sale? What options could you add to your portfolio to better serve your clients
