

# Review Scope of Appointment requirements for Aetna Medicare plans

Please note: If you'd like to submit the Scope of Appointment form to us by fax, please use fax number 1-866-441-2341. We've corrected the fax number in the message below.

# When is a Scope of Appointment form required?

Before you meet with a beneficiary one-on-one or for a personal appointment (i.e., not in a formal group setting such as an advertised meeting), you must discuss and agree to the scope of the appointment with the beneficiary. In addition, you must complete a <a href="Scope of Appointment form">Scope of Appointment form</a> (SOA).

Remember, you need to complete the SOA at least 48 hours, when practicable, before your meeting or appointment with the beneficiary to discuss MA and PDP products. If the form is not signed by the beneficiary until the time of appointment, an explanation must be provided in the "Plan Use Only" field as to why the SOA was not documented prior to the meeting.



During the meeting, if the beneficiary wants to discuss a product line not included on the original SOA, please complete another SOA for that product line.

If the beneficiary later chooses to enroll, you must submit the SOA to Aetna along with the application. (Note: If enrolling online through Aetna's Producer Online Enrollment Tool (POET), you must also submit a copy of the signed online enrollment authorization form.)

## How to submit the SOA to Aetna

If the beneficiary chooses to enroll, you must submit the SOA to Aetna along with the application. Just follow the instructions below. (Exception: If WEST captures an SOA for a personal/individual appointment, the producer does not need to obtain another SOA prior to the appointment or submit the SOA to Aetna with the application.)

#### When using paper applications:

- 1. Obtain a paper SOA.
- 2. Write the HICN in the "Plan Use Only" field of the SOA before submitting the enrollment and SOA to Aetna. Note: Beneficiaries may not fill in the HICN on their own.

When using the iPad mobile enrollment app or Aetna's Producer Online Enrollment Tool (POET):

- 1. Obtain a paper SOA.
- 2. Write the HICN in the "Plan Use Only" field of the SOA before submitting the SOA to Aetna. Note: Beneficiaries may not fill in the HICN on their own.
- Send the SOA directly to Aetna. (If using POET, you must also send the signed online enrollment authorization form.) Fax to 1-866-441-2341 or email to <u>MedicareEnrollmentTransactions@aetna.com</u>.

 Note: Email is the preferred method. Just make sure you scan and save the SOA in an approved format: .doc, .docx, .jpg, .pdf or .tif. One applicant – and one attachment – per email. Emails cannot contain embedded images, graphics or logos.

## **SOA** quick reference chart

Dos	Don'ts
DO capture an SOA before meeting with a beneficiary one-on-one to discuss MA/PDP products.	You DON'T need an SOA to speak to beneficiaries in a formal group setting such as at an advertised meeting.
DO capture the SOA at least 48 hours before meeting with the beneficiary, when practicable.	DON'T complete the SOA immediately before discussing MA/PDP products with a beneficiary.
DO submit the SOA to Aetna with the application, if the beneficiary decides to enroll.	DON'T forget, you must submit the SOA to Aetna if the beneficiary chooses to enroll. (Exception: If WEST captures an SOA for a personal/individual appointment, the producer does not need to obtain another SOA prior to the appointment or submit the SOA to Aetna.)

#### **SOA resources on Producer World**

Individual Medicare Broker Training Presentation (pages 217, 220, 225)

SOA form

Compliance 101 training

Marketing dos & don'ts

Producer Handbook ("Winning with Integrity" section, pages 39-40)

## **Questions?**

Thank you for your commitment to serving our Medicare members and helping them stay healthy. If you have any questions, please contact your Aetna Medicare representative or the Aetna Medicare Broker Support Unit at <a href="mailto:BrokerService-MedicareTeam@aetna.com">BrokerService-MedicareTeam@aetna.com</a> or call 888-247-1050.

If you are affiliated with a General Agent (GA) or Field Marketing Organization (FMO) and are interested in selling Aetna Medicare products, please contact them directly.

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## Help/Contact us:

If you have any questions please  $\underline{\text{Contact Us}}$ .

To opt out of emails from Aetna Individual Medicare, please click here.

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