



Compliance Training

Revised: 7.01.2016 by Agent Oversight



Agenda

- The Aetna Way
- Marketing Definitions
- Marketing/Sales Event vs. Educational Event
- Marketing/Sales Event Checklist
- Permission-to-Contact & Scope of Appointment (SOA) Forms
- CMS Prohibited Marketing Behaviors
- CMS Appropriate/Permitted Marketing Behaviors
- How to Avoid Common CMS Complaints
- Common TrendSource Secret Shop Findings
- Producer Monitoring
- Aetna Producer Responsibilities
- Producer Contact Information
- Medicare Compliance Resources
- DOs & DON'Ts in Simple Form
- Q&A

The Aetna Way



Marketing Definitions

Marketing/Sales Event

Marketing/Sales Event is an event designed to steer, or attempt to steer, potential enrollees toward a plan or limited set of plans. Representatives of the plan may discuss plan specific information and distribute and accept enrollment forms at a marketing/sales event.

There are two main types of Marketing/Sales events: *formal* and *informal*. Both types must be reported to CMS prior to being held, and do not require a signed SOA in order for a beneficiary to attend.

Formal Marketing/Sales Event is typically structured in an audience/presenter style layout with a sales person formally providing specific plan or product information via a formal presentation on Medicare products being offered.



Informal Marketing/Sales Event is conducted with a less structured presentation or in a less formal environment, and typically utilizes a table, kiosk or a recreational vehicle (RV) that is manned by an agent who can discuss the merits of the plan's products *when approached by a beneficiary*.

Marketing Definitions

One-on-One/Individual Sales Appointment

One-on-one marketing meetings typically take place in a Medicare beneficiary's home. They can also take place in other venues (i.e., coffee shop, over the phone, library). CMS considers any one-on-one appointment with Medicare beneficiaries a marketing/sales event (*whether in person or telephonic*). One-on-one meetings are not submitted to CMS; SOA documentation must be in writing with a signed CMS-approved SOA form or as an Aetna telephonic agreement.

SOAs must be completed *prior* to all one-on-one meetings (in person or by phone) when MA/MAPD and/or Part D products will be discussed; 48-hours in advance *when practicable*. Agent may only discuss what prospect agreed to on the SOA. A second SOA must be obtained *if prospect requests* other products not agreed upon for the initial meeting.

ALSO CALLED . . . Home Visit/ Conference Call/ Walk-in

Marketing in the Health Care Setting

Marketing activities such as sales presentations, distribution of marketing materials and plan applications are permitted in health care setting *common areas* (includes hospital or nursing home cafeterias, community or recreational rooms, conference rooms and areas outside of pharmacy counters).

Marketing activities are prohibited in any areas *where patients receive health services* (includes waiting rooms, exam rooms, hospital patient rooms, dialysis centers, and pharmacy counter areas).

Only upon request by the beneficiary are you permitted to schedule appointments with beneficiaries residing in long-term care facilities (including nursing homes, assisted living facilities, board and care homes, etc.)

ALSO CALLED . . . Provider Marketing

Marketing Definitions

Educational Event

An **Educational Event** is an event designed to inform Medicare beneficiaries about Medicare Advantage, Prescription Drug or other Medicare programs and does not include marketing, (i.e., agent or plan does not steer, or attempt to steer, potential enrollees toward a specific plan or limited number of plans).

An educational event may be hosted by us or an outside entity and can only be held in a public venue. These events cannot be held in-home or in one-on-one settings.

Educational event may not include any sales activities such as the distribution of marketing materials or the distribution or collection of plan applications. An Educational event must be explicitly advertised as “educational,” *otherwise, it will be considered by CMS as a sales/marketing event.*

ALSO CALLED . . . Expo, Fair, Festival (coupled with “health,” “wellness” or “senior”)



Marketing Definitions

Enrollee/Member-only Educational Event

- You may hold an **Enrollee/Member-only Educational Event**, but these events may not include any enrollment or sales activities (enrollment forms are not permitted at the event).
- Marketing of these events must target existing enrollees/members only (i.e., direct mail fliers) and not the mass marketplace (i.e., radio or newspaper ad).
- You may discuss plan-specific premiums and/or benefits and distribute plan-specific material to enrollees/members. In this context only, this discussion of benefits is not considered a sales activity.
- **Enrollee/Member-only Educational Events** must be advertised as educational; otherwise, they will be considered by CMS as marketing/sales events.
- If your **Enrollee/Member-only Event** will have enrollment forms available, the event is to be reported as a member marketing/sales event.



Marketing Definitions

Health Fair

Health and Wellness presentations may take place at multiple locations throughout the service area including community centers and churches in the neighborhoods where Aetna/Coventry Medicare members live and work. Aetna/Coventry may participate in health fairs and health promotional events as either a sole sponsor or co-sponsor of an event hosted by multiple organizations.

Agents/plans are not permitted to conduct **health screenings**, **genetic testing**, or other like activities that give the impression of "*cherry picking*."

The intent of Health Fairs may be educational or marketing in nature. The event must comply with either the educational or marketing requirements based on the type of event the health fair is listed as: educational or marketing/sales.

ALSO CALLED . . . Senior Expo, Flu Shot Event

*At an Educational event, an agent may not have his business card in plain view, but may have it in his/her pocket. If a member *requests* contact information, the agent may then hand the member a business card. *The member or a referred beneficiary must contact the agent at a later time. The agent cannot contact a referred person.*



Marketing/Sales Event vs. Educational Event

Marketing/Sales Event

- May discuss plan specific information like cost-sharing, benefits and premiums
- Must use Aetna/Coventry's CMS-approved Sales Presentation; read *Notes* comments within presentation document as part of the script; and use Aetna/Coventry's CMS-approved MA/MAPD or PDP sales presentation video (when applicable) along with the corresponding sales presentation
- Scheduled formal/informal marketing/sales events must be reported to CMS
- All one-on-one appointments (*in person or over the phone*) must be documented on a CMS-approved paper SOA form or as an Aetna telephonic SOA agreement *prior* to the meeting taking place to discuss MA/MAPD and/or Part D products
- CMS does not require attendees to sign SOAs to attend formal /informal Medicare marketing/sales events; therefore, do not request or obtain one
- All advertisement of marketing/sales events, such as fliers or newspaper ads must be submitted to Aetna/Coventry for CMS review and approval *prior* to use

Educational Event

- Must not include any sales activities, or distribution of marketing materials, plan information or distribution and/or collection of plan applications. Must be explicitly advertised as "educational," otherwise the event will be considered a sales/marketing event by CMS and must be reported as such
- *Reporting educational events is not a CMS requirement*; therefore, Aetna/Coventry does not report them to CMS
- *Educational events must be reported to Aetna's health plans*; Aetna/Coventry must be aware of any educational event held in their names and service areas
- Must be held in a public venue; cannot be held in-home or in one-on-one settings

Marketing/Sales Events vs. Educational Events (MAY NOT)

Marketing/Sales Events **May Not** . . .

- Conduct health screenings, genetic testing or other like activities that give the impression of “cherry picking”
- Compare one sponsor to another by name
- Provide meals
- Require beneficiaries to provide any contact information as a prerequisite for attending an event
- Sign-in sheets must clearly state across the top in large letters, “*Completion of any contact information is optional.*”
- Ask for referrals
- Use prohibited statements as listed in the *CMS Medicare Marketing Guidelines*
- Market or advertise Medicare plans for the up-coming plan year *prior* to October 1
- Solicit or accept enrollment applications for a January 1 effective date *prior* to the start of AEP (currently October 15) *unless* beneficiary is entitled to another enrollment period
- Offer nominal gifts in the form of cash or other monetary rebates, even if their worth is \$15 or less

Educational Events **May Not** . . .

- Distribute or collect applications or other sales materials, or demonstrate any bias towards one plan type over another
- Distribute plan-specific premium information and/or benefits
- Distribute or display: Permission-to-Contact forms, Scope of Appointment forms or sign-up sheets
- Attach business cards or plan/agent contact information to materials
- Schedule personal sales appointments or obtain permission for an outbound call
- Solicit for individual appointments under the premise that the appointment is for educational purposes
- Advertise an educational event and hold a marketing/sales event immediately following in the same location (i.e., same hotel)
- Hold in-home or in one-on-one settings

Marketing/Sales Events Checklist

- Aetna requires you to arrive 45 minutes prior to the event's start time as reported to CMS
- Upon arrival, check-in with venue so they know you are onsite; have Verification Form signed at that time
- If you find an event will not start on time or is moved or canceled, you must immediately notify the plan or your upline, so we can update CMS
- You must present using the current Aetna/ Coventry CMS filed and approved MAPD or PDP Sales Presentation, whichever is applicable
- Read *Notes* or *Talking Point* comments within the presentation document as part of the script
- Use the CMS-approved MAPD or Part D Sales Presentation Video, when applicable, along with the corresponding Sales Presentation
- When possible, display presentation on laptop, iPad, projector, or distribute copies
- Presenter must be the person submitted to CMS; if there is a change, notify plan or upline as soon as possible, so we can update CMS
- Every person at the event is to be given a complete sales/enrollment kit; do not just hand out *Benefits at a Glance*
- Announce all products or plans to be reviewed during the presentation at the beginning of the presentation (i.e., HMO, PPO, PDP, etc.)
- Do not use any absolute (i.e., "the best") or qualified (i.e., "one of the best") statements without citing the source. It is your responsibility to ensure the source is factual and correct. Example: "Aetna has the lowest OOP max in San Antonio"; you must add "per the CMS plan finder." Correct verbiage: "*Aetna has the lowest OOP max in San Antonio (source being CMS plan finder).*"
- Only distribute CMS-approved materials
- When providing an Enrollment Form, attendees must receive: 1) Star/Plan Rating Sheet, 2) Summary of Benefits, and 3) Multi-Language Insert
- You must cover Part D and include: co-share, coverage gap, how drugs are covered (tiers), how to look up a drug (plan formulary), prescription assistance and how to qualify (LIS)
- If a sign-in sheet is available, it must contain this statement in large letters across the top, "*Completion of any contact information is optional*"; use a sign-in sheet form from *Aetna's Producer World*

Permission-to-Contact Form

- **Permission-to-Contact Form** is required to be completed *prior* to conducting an outbound call to a Medicare prospect.
- If a prospect calls in to RSVP for a meeting, a Permission-to-Contact form is not required for that meeting, but would be required for a representative to place a follow-up call to a meeting attendee.
- Requests for identification numbers, bank or credit card information are prohibited.
- Refer to Sections 70.4 thru 70.6 of the final *CMS Medicare Marketing Guidelines* (MMG) for a complete description of unsolicited electronic, marketing and telephonic contact regulations, or go to the *Compliance* heading in *Producer World* and locate "*Contact with Medicare Beneficiaries*" document. It recaps the CMS regulations pertaining to Outbound Calls, Unsolicited Electronic Communications, Marketing through Unsolicited Contact and Telephone Contact.

The screenshot shows a web browser window displaying the Aetna Medicare Permission-to-Contact form. The URL in the address bar is https://qa3www.aetna.com/producer/Medicare/documents/mktg_and_enrollment_materials/18.31.313.1%2018%2019%2020PermissionToContact%20ENG%20COR. The form is titled "Please contact me about Aetna Medicare plans." and includes fields for First Name, Last Name, Address, City, State, Zip, Phone, and E-mail. Below these fields, there is a section for "Currently Medicare eligible" with radio buttons for "Yes" and "No". If "No", there is a field for "If no, when will you be eligible". The form also includes a section for "Interested in plan information" with radio buttons for "Aetna Medicare Prescription Drug Plans", "Aetna Medicare Supplement Plans", "Aetna Medicare Advantage Plans with Prescription Drug Coverage", and "Aetna Individual Dental Plans". At the bottom, there is a signature line and a date field. A disclaimer at the bottom states: "I understand that the person who will be discussing plan options with me may be compensated based on my enrollment in a plan. A Medicare Advantage organization with a Medicare contract. A Medicare approved Part D sponsor. Plans are offered by Aetna Life Insurance Company and its affiliates (Aetna). Plans contain exclusions and limitations."

Scope of Appointment (SOA) Form

- Except in limited situations defined by CMS, the SOA is to be completed by the prospect 48 hours *prior* (when practical) to conducting one-on-one appointments to discuss MA/MAPD and/or Part D products.
- If 48 hours is not feasible, beneficiary must sign or record SOA at the beginning of the appointment; you must document reason on SOA in designated space on the form. (This includes a “walk-in,” or unexpected guest at a pre-scheduled one-on-one meeting.)
- SOA must clearly list the products agreed upon for discussion during the individual marketing appointment. You may not market any health care product beyond the scope the beneficiary agreed to before the meeting.
- CMS-approved SOA form and telephonic instructions are available on *Aetna’s Producer World*.
- If during appointment *beneficiary requests* to discuss other products not originally documented on SOA, a second SOA must be completed for the additional product(s). The marketing appointment may then continue. *This includes any non-health care related products the beneficiary wants to discuss.*
- If a prospect calls to RSVP for a meeting, SOA is not required for that meeting, but would be required for a subsequent appointment.
- SOA documentation must be in writing on a CMS-approved SOA form or as an Aetna telephonic agreement by the beneficiary.
- You must attach a copy of signed SOA to any paper application received from a one-on-one meeting (in person or by phone) *before* submitting the application to Aetna or Coventry. *Hold paper SOAs for ALL electronic enrollments through Ascend until requested.*
- You cannot agree to SOAs on behalf of a beneficiary; you can confirm appointments.
- SOA forms are not required for attendees to attend formal /informal events; therefore, do not obtain one as CMS views it as pressuring for personal contact information.

CMS Prohibited Marketing Behaviors

- **May not** use words, symbols, or state you or products are recommended/endorsed by CMS, Medicare, or Department of Health and Human Services (DHHS)
- **May not** solicit door-to-door or approach people in common areas, such as parking lots, hallways or sidewalks
- **May not** market through unsolicited contact (referred to as *cold calling*), including emailing, direct messaging, texting, calling, or leaving voicemails without beneficiary's *prior permission*
- **May not** conduct sales activities in healthcare settings (waiting rooms, exam rooms, dialysis centers, pharmacy counters), except in *common healthcare areas*
- **May not** use providers to collect enrollment forms or inducement to join plans
- **May not** offer gifts as a condition of enrollment or offer gifts of more than \$15 based on fair market value of item(s)
- **May not** offer cash, gift cards, lottery tickets or anything that can be exchanged for monetary amounts
- **May not** call a referred beneficiary
- **May not** use aggressive/scare marketing behaviors
- **May not** provide meals during any marketing/sales event (formal, informal, or one-on-one meeting)
- **May not** discuss products during a one-on-one appointment not agreed upon by a beneficiary and documented on a SOA *prior* to meeting
- **May not** require an attendee to provide any contact information in order to attend a formal or informal marketing/sales event, this includes obtaining a SOA
- **May not** contact people with Medicare under the guise of selling a non-MA/MAPD/PDP product and allow the conversation to turn MA/MAPD/PDP
- **May not** conduct marketing or sales activities at an educational event (i.e., discussing plan benefits, distributing/collecting plan applications)
- **May not** market non-health related products (i.e., annuities and life insurance) during MA/MAPD/PDP events (referred to as *cross-selling*)
- **May not** target people from higher income areas or state/implies plans are only available to seniors rather than to all Medicare beneficiaries (referred to as *cherry-picking*)
- **May not** discriminate based on race, color, national origin, sex, age or disability
- **May not** hold unreported formal or informal marketing/sales events

CMS Appropriate/Permitted Marketing Behaviors

- May state you represent a plan that has a Medicare contract
- May leave information at a beneficiary's house *if you had a scheduled appointment* and the beneficiary was not at home
- May call or email beneficiaries who have given *prior* permission; permission applies only to the plan or agent/broker the person that requested contact from, for the duration of that transaction, and for the scope of products
- May respond to a question or statement initiated by a beneficiary, but may not address subjects beyond the scope of the question/statement
- May call your members to promote other Medicare plan types (includes plans that are also Medigap insurers, they may market their MA/MAPD/PDP plans)
- May offer gifts to *all* attendees at an event at a nominal value of \$15 or less
- May complete SOA at a formal or informal marketing/sales event for a future appointment
- May discuss plan specifics during an informal event only *after* beneficiary approaches you
- May contact beneficiaries who attended a sales event only when a completed Permission-to-Contact form is obtained for a call; must obtain a completed SOA (either paper or telephonic) from a client giving permission to a one-on-one meeting *prior* to a visit
- May initiate a phone call to confirm a one-on-one appointment; SOA may be changed with correct documentation
- May conduct formal or informal sales activities in *common areas* of healthcare settings (cafeterias, community or recreational rooms, conference rooms); one-on-one appointments must have a completed SOA *prior* to the meeting
- May provide refreshments and light snacks at formal or informal marketing/sales events
- May schedule appointments w/people who live in long term care facilities only upon their request
- May leave business cards behind for clients to give to friends or family; "referred" person must contact the agent/broker directly
- May discuss other products if requested by a client during a one-on-one meeting not included on the original SOA, only after a second SOA is documented for additional product(s)

How to Avoid Common CMS Complaints

Confirm enrollee's providers are participating

- *Use online* search tools available to you and confirm enrollee's doctors (primary care and specialists) are participating in the plan's network. Providers may participate in one plan type and not another in the same area.
- *Be sure* to list the requested PCP on the application along with the provider ID number.
- *Only advise* if the provider/facility is or is not currently an in-network provider/facility.
- *Do not* comment that a provider/facility may participate with the plan in the future.

Explain enrollee is not joining a Supplement plan

- *Be clear* that a MA/MAPD plan replaces Original Medicare as the primary insurer. If an enrollee has a Supplement plan, it will not pay with a MA/MAPD plan. A Supplement plan can only be used with Original Medicare.
- *Remember:* Enrollment in a MA/MAPD plan will not automatically disenroll an enrollee from a Supplement plan.

Verify enrollee's medication coverage

- *Use* formulary/Drug Lookup tool available to you or reference www.medicare.gov to verify enrollee's medication coverage.
- *Discuss* tier level and any restrictions (i.e., prior authorization, quantity limit, step therapy).
- *Explain* when using a Medicare Advantage plan with the prescription drug benefit, members must use our pharmacy network that consists of pharmacies and mail-order options for getting their medications.
- *Mention* that some network pharmacies offer preferred cost-sharing (members pay less when using a preferred pharmacy).
- *State* that typically, mail-order drugs arrive within 9 to 12 days.



Common TrendSource Secret Shopper Findings

- *No Shows* - this includes any event starting later than the start time reported to CMS. If you find an event will not start at the reported start time (no matter the reason), or won't take place at all, you must immediately notify your plan or upline.
- *Not distributing CMS mandatory documents with an application.* When an application is distributed, you must also give: 1) Plan/Star rating sheet; 2) Summary of Benefits, and 3) Multi-language insert
- *Not obtaining a signed SOA prior to one-on-one appointments.*
- *Using sign-in sheets that do not clearly indicate providing contact information is optional.* Use a sign-in sheet from Aetna's *Producer World*. You cannot verbally request any type of personal contact information, nor ask repeatedly for attendees to sign-in. CMS considers this pressuring for personal information.
- *Not explaining Star/Plan Rating Sheet or showing where to locate it in the Enrollment Kit.*
- Not stating a member's *true out-of-pocket costs* are carried with them even if they switch plans in the middle of the year.
- Not mentioning *different options for paying plan premium* (even if it's \$0 premium).
- Not stating enrollees *must use network physicians and pharmacies*, when applicable, *unless* there is an emergency, otherwise there may be higher copays or no plan payment.
- Not providing information on available *member website tools*.
- Not stating a plan's *limits or restrictions on prescription drugs*, i.e., quantity limits, prior authorization, or step therapy.

Producer Monitoring

- We are required by CMS to conduct secret shops and ride-alongs with our agents throughout the year.
- Assist us with this process and allow us to go out on appointments with you. This will help all of us remain compliant with CMS, and will let you know how you are doing in the field from a compliance perspective.
- Please ask us if you would like a sample ride-along form.



Aetna Producer Responsibilities

It's the Producer's Responsibility to . . .

- Review and abide by all MA, MAPD, PDP and 1876 Cost Plan guidance as detailed in the *CMS Medicare Marketing Guidelines* and subsequent HPMS memos, etc.
- Follow CMS requirements for marketing materials and related activities, ensuring you only use marketing materials provided by Aetna or Coventry, which have already been CMS approved
- Ensure every application is received by Aetna/Coventry **within two calendar days** of completing it with the beneficiary
- Abide by the terms of your *Aetna General Agent Agreement* or *Aetna Producer Agreement*
- Read and abide by: 1) *Aetna's Code of Conduct*, 2) *Medicare Compliance Program Policies & Procedures*, and 3) *Aetna Medicare Marketing Code of Conduct*



Producer Contact Information

Who can I contact if I need assistance?

- Medicare Broker Services Department

Phone: 1-866-714-9301

Fax: 1-724-741-7285

Email: brokersupport@aetna.com

- Medicare Sales Executive/
Broker Manager



Medicare Compliance Resources

- Aetna's Producer World

www.aetna.com/producer

- Coventry's Broker Portal

broker.cvty.com

- CMS

www.cms.gov

- Medicare

www.medicare.gov



DOs & DON'Ts in Simple Form – Download from Aetna's Producer World

SELECT LANDSCAPE FORMAT BEFORE PRINTING

CY2015 CMS Medicare Marketing Guidelines (MMG) DOs & DON'Ts Agent Summary

Based on MMG released by CMS on 6/17/2014 – CMS updates the MMG annually

CMS holds us responsible for the actions of all agents representing Aetna or Coventry. You must follow CMS regulations and guidelines in your daily Medicare activities. It's important that you know these regulations and guidelines, and that you understand how they govern your business and conduct. The guidelines apply to Medicare age-ins and existing beneficiaries. You are responsible for knowing the rules and complying with them.

This document highlights specific regulations related to agent oversight as outlined in the complete CMS MMG. We created it as a portable list for you to reference when selling Medicare products. It is not all-inclusive. We recommend you refer to it often to remain compliant. Potential consequences of engaging in inappropriate or prohibited marketing activities include disciplinary actions, termination, and forfeiture of compensation.

To view the full CMS Medicare Marketing Guidelines, go to <http://www.cms.gov/Medicare/Health-Plans/ManagedCareMarketing/FinalPartCMarketingGuidelines.html>.

DO	DON'T
Educational Events – MMG Section: 70.8	
Designed to inform Medicare beneficiaries about Medicare Advantage, Prescription Drug or other Medicare programs and <u>DO NOT</u> include marketing (do not steer, or attempt to steer potential enrollees toward a specific plan or limited number of plans). <u>DO NOT</u> include sales activities, distribution of marketing materials, or distribution or collection of plan applications. <u>DO NOT</u> demonstrate any bias toward one plan type over another.	
<ul style="list-style-type: none"> Events <u>MUST</u> be advertised as "educational," otherwise, CMS views them as marketing/sales events and <u>MUST</u> be reported to CMS. <u>DO NOT</u> extend to in-home or in one-on-one settings; held only in public venues. <u>Enrollee/Member-only Educational Events</u>: when enrollee/member-only educational events are held, <u>DO NOT</u> conduct enrollment or sales activities (enrollment forms are not permitted). You <u>MAY</u> discuss plan-specific premiums and/or benefits and distribute plan-specific materials to enrollees. Events <u>MUST</u> be advertised as educational. In this context only (i.e., events for existing enrollees/members only), discussion of benefits is not considered a sales activity. Any marketing of these events must be done in a way that reasonably targets only existing enrollees (i.e., direct mail flyers), and not the mass marketplace (i.e., radio or newspaper ad). <u>Health Fairs/Senior Expos</u>: are considered educational only when they are advertised as educational, and <u>DO NOT</u> include any sales activities such as the distribution of marketing materials or distribution or collection of plan applications. Otherwise, CMS views them as marketing/sales events and <u>MUST</u> be reported to CMS. 	
<p><u>DO</u> provide objective information about the Medicare Program, Medicare Advantage Plans and/or Prescription Drug Plans; materials available must be free of plan-specific information (premiums, copayments, or contact information).</p> <p><u>DO</u> present a business card to a beneficiary <i>if the beneficiary requests</i> to enroll or requests information on how to contact you or the plan. Card must be free of plan marketing/benefit information.</p> <p><u>MAY</u> provide promotional items, including those with plan name, logo and toll-free customer service number and/or website; <u>MUST</u> be free of benefit information and consistent with the CMS definition of nominal gift requirement under MMG, Section 70.1.1.</p> <p><u>MAY</u> provide meals; <u>MUST</u> meet CMS definition of an educational event and comply with CMS nominal gift requirement. MMG, Section 70.3</p> <p><u>DO</u> display banner with plan name and/or logo.</p> <p><u>DO</u> respond to questions asked. Responses to questions will not render events as marketing/sales, provided the scope of your response does not go beyond the question asked.</p>	<p><u>DO NOT</u> accept or have available enrollment forms. This includes collecting enrollment forms or helping beneficiaries complete an enrollment form and placing it in an envelope for beneficiary to mail later.</p> <p><u>DO NOT</u> attach business cards or plan/agent contact information to educational materials, <i>unless requested by the beneficiary</i>.</p> <p><u>DO NOT</u> schedule individual sales appointments or get permission for an outbound call to a beneficiary.</p> <p><u>DO NOT</u> distribute, display or have any contact information available, including business reply cards, Scope of Appointment forms, Permission-to-Contact forms, enrollment forms or sign-up sheets.</p> <p><u>DO NOT</u> advertise an educational event and then have a marketing event immediately following in the same general location (ex: same hotel).</p> <p><u>DO NOT</u> collect names, addresses, email addresses or phone numbers of potential enrollees.</p> <p><u>DO NOT</u> solicit beneficiaries for individual appointments under the premise the appointment is for educational purposes.</p> <p><u>DO NOT</u> report educational events to Aetna/Coventry. Reporting educational events is not a CMS requirement; therefore, we do not report them to CMS.</p>

Q&A



Thank you