

Medicare matters



Medicare
Compare
USA®

7.2023 Q3

Hi Agents!

Can you believe the third quarter is already here? You know what this means... AEP is right around the corner! We are committed to helping you breeze through AHIP and certifications! Check our website for up-to-date information on AHIP **discount links** and opportunities, also, check your emails for important training dates!

MCUSA has been nationally recognized for Retention! Because of YOU! We are recognized for keeping business on the books and keeping agents onboard! MedicareCompareUSA plays an important role in helping support our Agents in their efforts. Below are some highlighted benefits we offer you!



- **Marketing:** We feature an inhouse Graphic Arts Department, Printshop, and Mail Fulfillment Center. Agents reap the benefits from direct mail lead costs that are far below the industry average. Our special low price of \$450 for a 1,000-piece mailing offers agents unmatched opportunity.
- **Lead sources:** MedicareCompareUSA utilizes all available digital and traditional campaign formats, including in-person seminars and Provider Helplines.
- **Co-Op:** We partner with our agents to make you successful! Money can be used to grow your BOB.
- **Enrollment Platforms:** Our high tech, industry-leading enrollment platforms are designed to quote and enroll beneficiaries into the plan that is right for them. Easily compare MAPD plans as well as Med Supps and Ancillary benefits to fill in the gaps!
- **Provider Channel:** We are the pioneer and market leader of provider-branded Medicare Helplines promoted to millions of senior patients during AEP and throughout the year (T65).

One of my roles in this organization is training! We offer AHIP study sessions to help you succeed! (If you couldn't make it last week, email me for links to recorded sessions.) Remember to watch for emails from us (check your spam folder too) about upcoming training opportunities. I would also like to take this time to remind you certifications are here!!! This means that time is ticking to pick up any new carriers you want for 2024!!!

I hope this summer provides rest and opportunity to refresh! Cheers to another successful year and thank you for being a part of MedicareCompareUSA!

Taryn Mott

Director, Provider Referral Operations and Training, MedicareCompareUSA



We will fund AHIP for agents

**YES! Even YOU,
our existing agents!**

**Here's how it works.
We will reimburse
100% of your 2024
AHIP fee once you:**

- Have or move 3 or more major carrier Medicare Advantage contracts using MedicareCompareUSA as your upline (*must complete contracting by July 22, 2023*).
- Submit at least one verified Medicare Advantage application before December 31, 2023.

Whether you are new to the Medicare industry or a seasoned Medicare agent, we have the tools and support to help you succeed and build a significant book of business with our agent programs. Join a winning team today and get the support you need to grow your career.

This program is exclusively for agents who have or move 3 or more major carrier Medicare Advantage contracts to MedicareCompareUSA in 2023 and submit at least one application with these Medicare Advantage plans or other Medicare insurers already uplined to MedicareCompareUSA. Business must be submitted before December 31, 2023 to be eligible. When completing AHIP, start by using a carrier link on the MedicareCompareUSA broker portal to receive an instant \$50 discount. MCUSA reimburses the remaining \$125 max once the agent has submitted 1 application and notified the MedicareCompareUSA National Sales Manager. Receipt required.

SeniorHealth@MedicareCompareUSA.com | www.MedicareBrokerUSA.com | Agent Support Line 855-735-6392



Spotlight

Brian Anderson

Licensed Insurance Agent

MedicareCompareUSA - Springfield, Missouri



I feel that as an agent I have been so blessed to do what I do. I worked for Walmart for over 24 years before this and switching to an insurance agent has been like night and day. I love what I do in helping people, but I have also used my experience with Walmart to help me with insurance. When I first worked at Walmart, there were people who had been there from its early days when there was just a handful of stores. A few of them had the mentality of, 'I been here so long that I don't have to grow or change,' but I always said that no matter how long I worked there I was always going to stay humble and strive to improve. That's my motto now even though I have been an agent for several years—I want to continue to improve and grow every day.

The story of how I landed in the Medicare insurance industry is funny. I was working at Joann Fabrics and was recruited by a not-so-good Limited Liability Insurance company. I worked for them for only three months (went through my savings), and then switched to a good agency and began selling Health Insurance. But then my FMO sent out a flyer about how our Mercy Hospital was working with MedicareCompareUSA which upset him, but I was like, 'Wow that's really smart,' so I called them up and I have been with MedicareCompareUSA ever since. Talk about growing! I went from being a Southwest Missouri agent to being an agent that has clients in like ten states.

When I have difficult Medicare questions where do I look? I was always told by family when I was young, "Why so many questions, are you writing a book?" I find that you can never ask enough questions, but this business is a relationship business. Early on I had a very smart man who taught me the ropes, and I also become friendly with the broker reps of the different carriers. So, when I have questions I either ask other agents or I ask the broker managers.

What do I do for fun? Keep my wife happy!!! Because 'Happy Wife Happy Life.' My faith in God is number one with me, and I am also very family oriented. We are a blended family; we had 4 daughters (one who passed), 14 grandkids, and three great grandkids. We are also raising our granddaughter from our daughter that passed away. We have an RV, and we love to go camping and spend time with our family.



DevotedHealth is an agent-friendly health plan available in the following states: AL, AZ, CO, FL, HI, IL, NC, OH, OR, PA, SC, TN, and TX, and will soon be available nation-wide.

DevotedHealth offers:

- Broker Loyalty Program, designed to reward agents for their hard work
- Marketing Portal with assets available to help sell, including co-branded postcards and swag
- Variety of plan offerings including: HMO, PPO, C-SNP, D-SNP, and MA
- Competitive dental allowance
- Broker learning center, training resources you need for success

To add DevotedHealth to your portfolio, call your National Sales Manager at 855-735-6392



Did you know?

You can Receive Cash Bonuses every time you refer an agent to MedicareCompareUSA!

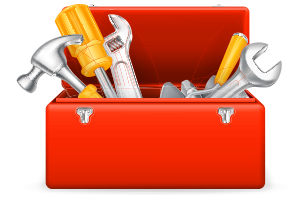


- 1-10 agents / \$10 per app
- 11-20 agents / \$20 per app
- 21-30 agents / \$30 per app
- 31-40 agents / \$40 per app
- 40+ agents / \$50 per app

- One Time Payout paid for a 12 month period based off agent Active Date.
- Agent must have 2+ Medicare Supplement and 3+ Medicare Advantage Contracts with MedicareCompareUSA. PDP ineligible for referral bonus. Contracts must be active to receive bonuses.
- Bonus rules are subject to change and follow CMS approved guidelines.

Reach out to your Sales Manager or call 855-735-6392 to get the referral process started!

Your toolbox is important



To be successful in Medicare, you need a mix of competitive products to meet consumer needs. We help you identify and contract products for your service area and marketing strategy. When combined with our quoting platforms, selling is a piece of cake. You are always positioned to offer the best products to fit a clients' needs. The following summarizes product options.

Medicare Advantage (MA)

With the median income of Medicare beneficiaries at approximately \$24,000/year, MA is a great choice for many consumers who desire Part A, Part B, and often Part D Prescription Drug coverage in one convenient plan with relatively low monthly premiums. Products vary in benefit offering and cost sharing and typically include additional supplemental benefits not offered by Original Medicare but beneficiaries find attractive. We partner with a broad array of the industry's leading national and regional carriers.

Medicare Supplement (Medigap)

A Medicare Supplement provides coverage that is secondary to Medicare; meaning Medicare pays first and the Supplement pays second. Individuals enrolled in Original Medicare (Part A and Part B), purchase a Medicare Supplement for a fixed premium to cover the approximate 20% of healthcare expenses not covered by Medicare. We offer a broad product selection of insurers and a complimentary quoting platform enables you to identify competitive carriers, easing the enrollment process and helping you retain a growing book of business.

Prescription Drug Plans (PDP)

These plans add drug coverage to beneficiaries who are covered by Original Medicare. Medicare Part A and/or Part B enrollment is required.

Ancillary Products

MA and Medigap are not a total coverage solution because Medicare doesn't cover many out-of-pocket expenses and benefits. Ancillary products such as dental, vision and hearing or hospital indemnity plans can help Medicare beneficiaries pay for non-covered Medicare costs.

Indemnity Plans

Hospital Indemnity plans are a great cross-selling opportunity while giving your clients peace of mind as to how they can pay hospital bills.

Use the facts (to the right) when talking to Medicare Advantage clients about pairing a hospital indemnity plan to help cover hospital out-of-pocket costs. Indemnity plans also limit financial exposure for Medicare Supplement clients who choose a high deductible G plan. Hospital Indemnity plans provide low-cost wrap around cash benefits for out-of-pocket costs due to hospitalization, skilled nursing stays, and other substantial co-pays clients face.

Did you know?

18.7 million hospital stays annually are an average length of 5 days, costing about \$14,500 per stay for people between the ages of 45 and 84.

Can you afford to be hospitalized?

A hospital stay can be traumatic — to your health, your wallet, and your family. Even if you have additional medical insurance, you will most likely have costs that are not covered.

A Hospital Indemnity insurance plan can provide you with supplemental cash benefits to use as needed.

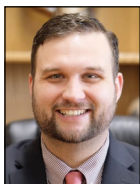


Agent Support



We're here for you!

We are a company uniquely positioned to keep agents abreast of trends in Medicare, changes affecting hospital and payer relationships, and competitive product opportunities. We invite you to set your annual sales goals with us so we can help you meet your objectives, easily service your clients, expand with new products or target prospects, and maintain a competitive portfolio. Call or email us to explore how we simplify your efforts to make 2023 your best year yet.



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Get to know Alex!

In his role as National Sales Director for MedicareCompareUSA, Alex Sieler holds direct responsibility for agency growth and recruiting activities. Based in Omaha, Nebraska, Alex and his team are focused on recruiting new agents and agencies to serve the needs of Medicare beneficiaries associated with our growing number of healthcare clients nationwide.



Alex has a highly successful background in agency and broker development in the Medicare and ancillary product space including Life and Annuities. He is particularly adept in helping agents and agencies tailor an insurance package for all types of clients and maximize every prospect opportunity. He blends this experience with the needs of our clients while bridging carrier relationships and overseeing back-office support to aid in day-to-day operations. Throughout his career, which includes leadership positions at other FMOs, Alex has helped thousands of agents and agencies in the Medicare space grow their book of business while serving the business and strategic needs of both carriers and providers.

When he's not wrangling agents, he's chasing after his three children and doting on his wife of twelve years.

NEED
HELP?

Submit a Ticket

Toll-Free **855-735-6392** or **402-238-1768**
MedicareBrokerUSA.com/Support
AgentSupport@MedicareCompareUSA.com
Monday-Friday 8am-5pm CT

Are your Carrier Contracts ready to go?

You might already know our Carrier Contract Specialist, Polly Perez. She is of course swamped this time of year making sure our agents' game pieces are lined up for AEP, so we are re-purposing this article from a couple years ago with tips and tricks on carrier contracting to help smooth the road ahead for many of you.



Polly Perez
Contracting Specialist

If an agent is contracting with a Medicare Advantage (MA) plan for the first time, do you have any tips or recommendations?

The hardest part of securing your first MA plan is doing the certification but before you can certify, you'll have to successfully complete AHIP. Once AHIP is out of the way, you can contract and certify with a carrier to sell their MA products. AHIP and MA recertifications are required annually.



Is contracting with a MA carrier different than contracting with a Medicare Supplement (Medigap) insurer?

Absolutely! The biggest difference is that Medigap insurers do not require agents to annually certify which makes it easier to represent Medigap plans.

When is the best time to contract new plans/products or move contracts under MedicareCompareUSA?

To ensure an agent is ready to self by October 1, we suggest agents submit changes or new insurer contracts by July 15. This time of year there's definitely a sense of urgency to complete contracts and certifications. We've been notified of carriers already in a contracting backlog and they set varying blackout periods to move or complete contracts. Major carriers like United Healthcare, Humana, Aetna, will not contract agents between October 1st and the end of the year. Contracts can be submitted during the blackout, but upline changes won't take effect until the start of the following year. Give yourself plenty of time to get released and complete all the necessary paperwork and links to contract and certify prior to October 1.

If you are contracted under a different upline and want to move your contract(s) under MedicareCompareUSA, take note because many FMOs won't grant a release beyond August 1. We encourage you to request your release with the existing FMO by mid-July. If you have any questions, contact your National Sales Manager to review information required to move contracts or to confirm blackout periods by carrier.

What is the typical process for contracting with a MA or Medigap plan?

Our National Sales Managers work closely with you to keep your agent profile current with contact and contracting information including licensure, insurance, NPN, and contracted plans. As you request new carriers, they notify me to provide you a direct link to contract from the carrier portal. I then monitor to ensure the new contract is submitted within a couple of business days. Once you are contracted,

Carrier Contracts (cont'd)

you will receive a login in to the carrier portal to take your certification. You cannot sell until you complete the required certification. I monitor the carrier site to verify your certification is complete and send the appropriate National Sales Manager an email acknowledging you are approved and ready to sell.

At any point in the process, if a step is not completed, I reach out to you to offer assistance. I think it's important to talk through all obstacles that agents may experience during contracting. I'm available by cell at 253-290-2327 and I can set up a Zoom meeting to help resolve issues or explain the process. Contracts vary by carriers and it can be confusing. Some carriers require a two-step process, so I am here to make sure no one gets stuck.

If moving a MA plan, what do you consider to be the absolute drop dead date before it's too late to write during AEP?

Absolutely no later than July because a release is required from the existing upline. Additionally, once the contract is submitted to a carrier we have little control of turnaround time. Some MA plans take a little bit longer this time of year to complete contracting, so it's always best to get the release and the contracting paperwork done as fast as possible so that you're done before that deadline of October 1.

Do you have advice for ensuring the contracting process goes smoothly from the agent's perspective?

The biggest challenge I find is that agents may not understand the specific steps to complete contracting and certification because it happens so infrequently. Oftentimes, contracting links are sent out but depending on the agents email system, the email might route to an agent's spam or junk folder. If you are expecting a link from me it's important you check these areas of your email and if you cannot find the communication, contact me promptly so I can investigate or we connect through Zoom to locate the link.

I work closely with the National Sales Managers to make sure our systems are up to date and that we have accurate email and contact information on every agent. The biggest obstacle in contracting is making sure links are getting to the agents and they are completed timely. I find it important that we communicate what to expect from the very beginning, confirm email address in case it has changed, and make myself readily available to ease the process.

MedicareCompareUSA's private Facebook Agent Group is for YOU, the agent.

We provide updated information and encourage discussions about Medicare insurance sales for agents.

Be a part of a strong agent community!



Follow us!

For up-to-date news, carrier communications, and Medicare information:

JOIN AGENT GROUP



LIKE AGENT PAGE



FOLLOW US





Taryn's *corner*

Dear Taryn,

Have you heard about any CMS updates for AEP? (2024)

Nancy

Dear Nancy,

CMS will require that agents, brokers, or web-brokers document the receipt of consent from the consumer or the consumer's authorized representative prior to providing assistance. This requirement will help with enforcement and help resolve disputes between enrolling entities and consumers, or between multiple enrolling entities. We are also finalizing the requirement that this documentation be retained by the agent, broker, or web-broker for a minimum of 10 years and be produced upon request in response to monitoring, audit, and enforcement activities. From cms.gov.

Taryn

Dear Taryn,

If a client changes plans in the middle of the year, does the TrOOP follow them?

David

Dear David,

Yes! Mid-year changes do not change TrOOP or whatever stage they are in with their MAPD or PDP. It follows them.

Taryn

Dear Taryn,

Two questions: 1) Can somebody under 65 and on disability enroll into a supplement plan? 2) If someone under 65 does enroll into a med-supp, does it automatically continue?

Jim F.

Dear Jim,

1) Yes they can. 2 problems! The premium is expensive, and the coverage is less. What I mean is this! Federal law does not require states to sell Medicare Supplement (Medigap) insurance plans for the disabled under 65. But in many states, insurance companies must sell Medigap plans to disabled beneficiaries under 65. These states do not have to offer the full range of plans. Therefore, you may be limited to certain Medigap plan options. In Texas, insurance companies are only required by law to offer Medigap Plan A to people under 65 — which is the least comprehensive set of benefits available.

2) Yes, it does. If I were the agent and somebody is on Social Security, I would suggest looking into MAPD for ease of premium and richer benefits. Medigap plans are not required to offer a full array of benefits to those under 65. This can lead to less protection and a large out-of-pocket due to high premiums.

Taryn

Have your own questions?

Fill out our feedback form:

[MedicareCompareUSA.com/Newsletter-Feedback](https://www.MedicareCompareUSA.com/Newsletter-Feedback)



**Remember, the 2024 AHIP
opened on June 21st**



Follow us

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[Linkedin.com/Showcase/MedicareCompareUSA-for-Producers](https://www.linkedin.com/showcase/MedicareCompareUSA-for-Producers)



Have Questions? We're here for you!

If you need assistance with **new contracts, lead generation, commissions, compliance, or have general questions** please create an **Agent Support Ticket**.

The Agent Support Ticket system allows you to:

- Easily track the status of your inquiry
- Organize all related information and replies into one location for current and future reference
- Ensures prompt responses and relevant solutions to your questions

Please feel free to direct any future support issues to us via:

Website form: [MedicareBrokerUSA.com/Support](https://www.MedicareBrokerUSA.com/Support)

or Email: AgentSupport@MedicareCompareUSA.com

