

## ABCs of AEP: Beneficiary Contact, Appointment and Events FAQ



### Compliantly collecting contact information at events and beyond

Staying compliant in your communication with clients and prospects is vital! The Centers for Medicare & Medicaid Services (CMS) has created marketing rules that apply to all agents who sell Medicare Advantage and Medicare Part D plans.

This FAQ is just an overview of some questions related to events and beneficiary contacts. Make sure to consult your compliance officer and the current Medicare Advantage Communication Requirements published in Title 42 of the Code of Federal Regulations.

**NOTE:** It's your responsibility to follow CMS guidelines. Penalties for noncompliance can include hefty fines and the loss of your license.

### Educational vs. Sales Events

#### What is an educational event and how is it different from a sales event?

- Educational events give consumers a broad picture of their options for Medicare coverage and how to get started in their research. Educational events must be clearly advertised as such.
- Sales events may include specific details about locally available plans, carriers and enrollment options. Sales (also called marketing) events must be submitted to carriers and filed with CMS. They also have their own set of guidelines to follow to make sure you stay compliant.

#### What information can be collected at educational events?

- Agents and brokers may no longer offer SOAs, collect SOAs or set up personal marketing appointments at educational events.
- Agents and brokers may STILL offer and collect Business Reply Cards or beneficiary contact information, although this cannot be a requirement for attending.

#### Can sales events be held after educational events?

- No. Sales events must be separated from educational events by at least 12 hours when held in the same location. "Same location" means the same building or adjacent buildings.
- Two agents cannot coordinate holding different types of events in the same location in a 12-hour window.

**NOTE:** For more information on educational events, download our How to Host a Successful Medicare Educational Event.



## Beneficiary Contact

### How long is a Business Reply Card (BRC) or a request for more information valid?

- BRCs and other requests for information are valid for 12 months from the date signed or requested.

### Can we collect BRCs at educational events?

- Yes, BRCs may be collected at educational events, but cannot be required.

### If we have a BRC, what kind of contact can be made?

- You may not contact the beneficiary by showing up at their home.
- You may send informational content via email or call to make contact (if phone consent was given). Beneficiaries must be able to easily opt out of additional contact at any time.



## Personal Appointments

### How can I set up a meeting with a beneficiary?

- After obtaining a Scope of Appointment agreement, you can meet with the beneficiary after a minimum of 48 hours has passed.
- The meeting must be limited to the products indicated in the SOA document. If additional products are asked about, another SOA must be completed and another 48-hour waiting period must occur.
- Scope of Appointments must be retained for a period of 10 years.

### What is the Pre-Enrollment Checklist (PECL) and is it mandatory?

- The Medicare Pre-Enrollment Checklist (PECL) is a standardized document that can help enrollees understand plan benefits and rules.

Each aspect of the PECL must be discussed before enrollment. However, individual carriers may require that the PECL be read in its entirety — check provider documentation.

### Is there more I need to explain to the beneficiary before we start enrollment in a plan?

- Yes. You must discuss a list of questions and topics regarding the beneficiary's needs before starting enrollment. CMS requires this list to be addressed:
  - » Primary care providers and specialists (to find out if their providers are in-network)
  - » Prescription drug coverage and costs (to find out if their prescriptions are covered)
  - » Costs of health care services
  - » Premiums
  - » Benefits
  - » Specific health care needs