

Selling MA Plans

**A Guide for Agents Who Want
to Learn How to Become Certified and
Sell Medicare Advantage Plans**



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... MA plans are projected to control 51% of the Medicare market by 2030.

Introduction

In 1997, President Bill Clinton signed Medicare+Choice into law, establishing what would later be known as Medicare Advantage (MA). Having spotted Original Medicare a 32-year head start with beneficiaries, MA now has all the market momentum. From 2010 to 2020, the number of people with MA plans rose from 11 million to 26 million* — an increase of nearly 234%! True, Original Medicare enrollments are still the majority in 2021 (36.1 million vs. 27.2 million**), but MA plans are projected to control 51% of the Medicare market by 2030.*** As more and more beneficiaries like what they find in today's MA plans — featuring expanded benefits and attractive premiums — it only makes sense for agents to present MA options to their clients.

What are MA plans?

The Center for Medicare and Medicaid Services (CMS) describes MA as an “all-in-one alternative to Original Medicare,” bundling Medicare Part A, Part B, and usually Part D in a single plan. “Some plans may have lower out-of-pocket costs than Original Medicare,” CMS says, and “some plans offer extra benefits that Original Medicare doesn't cover, like vision, hearing, or dental.”

Members with a Medicare Supplement or a MA plan:

- Available to those who are Medicare-eligible with Parts A and B
- Have monthly premiums (except those MA plans that provide \$0 premium coverage)
- May have deductibles or co-pays
- Require the enrollee to pay Medicare's Part B premium (some MA plans offer a monthly Part B giveback)

Only MA Plans:

- Provide an alternative to coverage by Original Medicare
- Are not standardized, but must offer the same or better benefits as Medicare Part A and Part B
- May include prescription drug coverage
- Allow enrollment only during four designated enrollment periods
 - **Initial Enrollment Period:** the 7 month period that begins three months before the month the individual turns 65, includes the month of their birthday and the three months after their birthday.
 - **Annual Enrollment Period:** Oct. 15 through Dec. 7
 - **Open Enrollment Period:** Jan. 1 through Mar. 31 — certain limitations apply
 - **Special Enrollment Period:** allows a beneficiary to enroll outside of a designated enrollment period if certain eligibility criteria is met.

Why are MA plans becoming so popular?

- **MA premium rates have been steadily declining.** Medicare Advantage premium rates decreased by an average of 6% from 2018 – 2019. That continued a multi-year trend; MA premium rates have dropped each year since 2015.****
- **For many Medicare beneficiaries, MA plans offer a higher healthcare value.** At an industry meeting in July, CMS Administrator Seema Verma went out of her way to praise MA plans, declaring them the most successful element of Medicare. “What works in the Medicare program is Medicare Advantage – because plans are competing on the basis of cost and quality, driving towards value and increasing choices for beneficiaries,” Verma said.
- **Seniors are already comfortable with MA-type products and services.** People approaching or at age 65 have long experience with the HMO and PPO plans hosted by their employers. Furthermore, this demographic is becoming more internet savvy.
- **Increased number of MA Plans being offered.** Medicare Advantage has added many new plans in recent years, a trend which shows no signs of abating.
- **More MA plans are adding non-traditional benefits.** In an April rule, CMS expanded the supplemental benefits that may be provided in MA plans. Now, plans can offer a host of non-traditional benefits, such as at-home grocery delivery, non-emergency medical transportation to doctor appointments, or home modifications like the installation of air conditioning for beneficiaries with asthma, and home renovations for the fall-prone individuals.

All the signs are positive for the MA market:

- Beneficiaries are enjoying better care and seeing better results (MA is truly managed care).
- By adding MA products to their toolkits, agents can become true “solutions experts,” further cement client relationships, and significantly grow their businesses by addressing client needs on a more holistic basis.

MA premiums have been dropping, and plans are adding more benefits.

Beneficiaries are enjoying better care and seeing better results.

In the past 5 years, plans have greatly expanded their networks and service areas, while they continue to grow rapidly.

Why is it that some retiree-focused agents hesitate to sell MA Plans?

Some brokers and agents have perceived issues with MA plan features. Even more have resisted due to the perceived hassle of obtaining the certification they need to sell MA plans. Let's analyze each of these concerns.

Perceived issues with MA plans, in many cases, turn out to be “non-issues”

- **Network size and coverage:** In the past, some HMO networks were limited in size and geographic area; some clients were concerned that their doctors and specialists would be excluded from the plan's network. Today, this is a “non-issue.” In the past 5 years, plans have greatly expanded their networks and service areas (and they continue to grow rapidly). Today's networks will likely include your client's doctor and specialists. Plans have also expanded the geographic reach of their doctor networks and many now allow their PPO members to use any doctor in their PPO networks across the nation.
- **Referrals:** In the past, some clients were concerned that they would need a referral from their PCP to see a specialist. This is another “non-issue.” PPO plans have never had this requirement, and many of today's HMO plans are going to “open access” and are dropping their referral requirements altogether.

The path to becoming an MA agent is straightforward.

Here are the simple steps for you, the agent, to follow:

- **Start your certification process now.** You can certify to sell all available 2023 plans now. For most carriers, certifications for 2024 plans open in the summer. October 15th is when you can start selling 2024 plans for a January 1, 2024 effective date. Realistically, agents need to have their contracting and certification for MA plans completed several weeks in advance of AEP – ideally by mid-September. As always, AEP runs from October 15 through December 7.
- **Reach out to a Marketing Director at an organization who will help you identify which carriers are competitive in your market.** Your Marketing Director will work with you to determine what your portfolio of carriers and products should look like. Not every carrier is available in every market; in your market, there may be only one or two major carriers available – or there may be many more.
- **Next, have your Marketing Director send you the information that you will need to obtain a contract.** Once they have determined which carriers are a good fit for your market, your Marketing Director will send you an email that contains a link to AgentXcelerator® where you can register and complete your contracting. Once registered, you will access the producer-contracting section to begin the contracting process. The first contract is slightly more time-intensive than subsequent ones, as the contracting process requests several pieces of information (such as addresses, banking information, voided checks, etc.) that, once entered, become part of your profile and can be used in all subsequent carrier contracts. You will complete each of the contracts electronically, digitally sign them and submit for processing.

- **Allow 7 – 10 business days to process your contract.** (The timeframe may vary, depending on the carrier.) During this time, the carrier conducts background checks and ensures all their criteria are satisfied before appointing you. The carrier then assigns you an agent number and provides instructions on how you can log into the carrier's site.
- **After you are set up with an individual carrier, shift your focus to the preparation and training you'll need to become certified.** Most major carriers require you to take a Medicare 101 and FWA courses administered by America's Health Insurance Plans (AHIP). But before you begin the AHIP testing, spend time re-familiarizing yourself with Medicare overall, as well as with the specifics of MA plans. You can find a direct link to this additional Medicare Basics at this training at AgentXcelerator.com, which offers Medicare Basics training and is offered free to agents contracted with YourMedicare. This site will take you through the ABCD's of Medicare, the differences between Med Supp and MA, PDP features, and processes for appeals, grievances, and penalties; it has all the information you need to obtain a basic understanding of Medicare.
- **Sign up for the AHIP test.** You can access the test on YourMedicareResources.com. When you use this link you will receive a \$50 discount on the AHIP test. The test has five modules on topics including ethics, compliance and fraud and abuse. Each module ends with a quiz. After completing the five modules, you will take a 50-question test. All totaled, it takes approximately 5 - 6 hours to complete the modules and the test. You'll need a 90% score to pass, and you'll need to pass in no more than three attempts.
- **Once you've completed and passed the AHIP tests, go to the site of the individual carrier to take their specific training.** You'll need to complete both AHIP and the individual carrier-specific certification before you'll be ready to sell their MA Plans. Many major carriers require you to complete AHIP first and submit their completion certificate before you can take the certification tests on their sites – these involve carrier-specific content such as plan information, carrier marketing rules, and instructions on how to submit business and how to market (such as the use of company logos).
- * **Now, it's time to compare plans and submit business.** Once you've contracted with a carrier and passed your tests to become certified, it all becomes real - and it's time to get out there and sell. You could go the old "pen and paper" route, but more likely you'll want an all-in-one platform where you can run quotes, compare plans and actually enroll clients without having to go to all the major carriers' sites. This includes tools such as those available on the YourFMO Enrollment Center on AgentXcelerator.com, including:
 - **Quoting:** allows you to compare all MA plans available in the area.
 - **Enrollment:** provides the ability to electronically enroll clients in a MA plan you are contracted and certified to sell using a digital signature either in-person or via email. In addition, the YourFMO Enrollment Center provides agents with another option: send your clients a link with a personal URL (PURL). With the PURL feature, clients can review plan options and pricing, select the best fit, and can electronically apply at their convenience. The link is tied back to your agent number so the enrollment will automatically be credited to you, the agent.

Once you've contracted with a carrier and passed your tests to become certified, it's time to get out there and sell.

Increasingly, clients and prospects are going to want to work with agents who provide complete Medicare solutions...

Even with all the technology at your disposal, be sure to download PDF copies of all your key documents, including applications and Scope of Appointments. In fact, CMS requires you to retain these documents for at least 10 years.

AEP will be here before you know it!

As a reminder, Oct. 15 is the first day of AEP. Two weeks before that – Oct. 1 – is the first day that agents are allowed to begin contacting and speaking with clients about 2023 MA plan features. **However, remember** that plan applications cannot be signed or dated until Oct. 15.

Given the annual crunch that carriers face as AEP approaches, **we strongly advise agents who want to join the MA market in 2023 complete contracting and certification by the middle of September.** Doing so will help clear the way for you to begin making sales in October.

Is MA worth the effort? Absolutely!

All the trends- the regulatory changes being advocated by HHS and CMS leadership, the demographics, the positive health outcomes for beneficiaries- point toward continued growth and popularity for Medicare Advantage plans. Increasingly, clients and prospects are going to want to work with agents who provide **complete** Medicare solutions, and that means being equipped to offer access to MA plans. Top agents are finding that it is well worth the extra effort to jump into this large and rapidly growing market.

YourFMO Resources

Visit YourMedicareResources.com to explore the extensive free resources available from YourMedicare to help you promote, grow and streamline your Medicare sales process.

Sources:

Freed, M., Biniek, J. F., Damico, A., & Neuman, T. (2022, August 22). Medicare Advantage in 2022: Enrollment Update and Key Trends. KFF.org. Retrieved July 6, 2023, from <https://www.kff.org/medicare/issue-brief/medicare-advantage-in-2022-enrollment-update-and-key-trends/>

Centers for Medicare & Medicaid Services Data (2021, July 1). CMS Fast Facts. Data. CMS.gov. Retrieved July 6, 2023, from <https://data.cms.gov/fact-sheet/cms-fast-facts>

1

Centers for Medicare & Medicaid Services (2018, September 28). Medicare Advantage premiums continue to decline while plan choices and benefits increase in 2019. Cms.gov. Retrieved July 6, 2023, from <https://www.cms.gov/newsroom/press-releases/medicare-advantage-premiums-continue-decline-while-plan-choices-and-benefits-increase-2019>

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