MASS ADVANTAGE

PLAN TO LOVE YOUR PLAN

Agenda

- 1) Certification Requirements
- 2) Medicare Basics & Plan Information
- 3) Enrollment & Disenrollment
- 4) Working with Mass Advantage
- 5) Love Our Brokers



SECTION 1: CERTIFICATION REQUIREMENTS



Becoming a Mass Advantage Broker

Agents must:

- Be licensed in the state of Massachusetts
- Carry an Errors and Omissions (E&O) policy
- Complete the most recent version of AHIP Medicare + Fraud, Waste, and Abuse Training
- Complete the Mass Advantage Training & Product Certification
 - Exam must be completed with a minimum score of 85%



SECTION 2: MEDICARE BASICS AND PLAN INFORMATION



What is Mass Advantage?

We are:

- A Medicare Advantage Plan created through a joint venture led by UMass Memorial Health Ventures
- Proudly local, exclusive to Medicare eligible residents of Worcester County
- Designed with extensive input from UMass Memorial Health providers for optimal care experience
 - Creating a partnership between the 2 organizations to simplify healthcare for providers and members by reducing administrative burden
- Offering access to the world class resources of UMass Memorial Health (UMMH)
 - Focused on continuous quality improvement through innovation & collaboration



What is Medicare Advantage?

What is **Medicare Advantage?**

- Also known as Medicare Part C
- Includes hospital, medical and may include prescription drug coverage in one plan
- Most plans included supplemental benefits (dental, fitness, hearing, vision etc.)
- Members issued single ID card for all services



Beneficiaries are eligible for Medicare Advantage if they...



Have Original Medicare insurance parts A & B and continue to pay their Part B premium



Permanently live within the Medicare Advantage plan's service area

Mass Advantage is available to residents of Worcester County

Network

- Mass Advantage is a Medicare Advantage plan created by local people for local people. It's a
 plan that provides access to the largest health care system in Central Massachusetts –
 UMass Memorial Health.
- Access to more than 1,700 providers in the region
- Local Hospitals:
 - UMass Memorial Medical Center (Worcester)
 - UMass Memorial Health HealthAlliance – Clinton Hospital (Fitchburg, Clinton & Leominster)
 - UMass Memorial Health Marlborough Hospital (Marlborough)

- UMass Memorial Health Harrington Hospital (Southbridge)
- Milford Hospital
- Athol Hospital
- Heywood Hospital



Provider Requirements

- All beneficiaries enrolled in one of our HMO options will need to select an in-network Primary Care Provider (PCP) who will coordinate all care
- If a PCP is not selected, one will be chosen for the member
- Referrals are needed for all specialty care on HMO plan options
- Agents are responsible for determining network status of all providers prior to enrollment
- PCPs can be updated simply by calling customer service:
 - HMO: 844-918-0114
 - PPO: 844-915-0234



UMass Memorial URGENT CARE CENTERS

X



348 Greenwood Street 500 Lincoln Street

FITCHBURG 380 John Fitch Highway

LEOMINSTER 510 N. Main Street

MARLBOROUGH 757 Boston Post Road

NORTHBOROUGH 333 Southwest Cutoff

OXFORD

78 Sutton Avenue

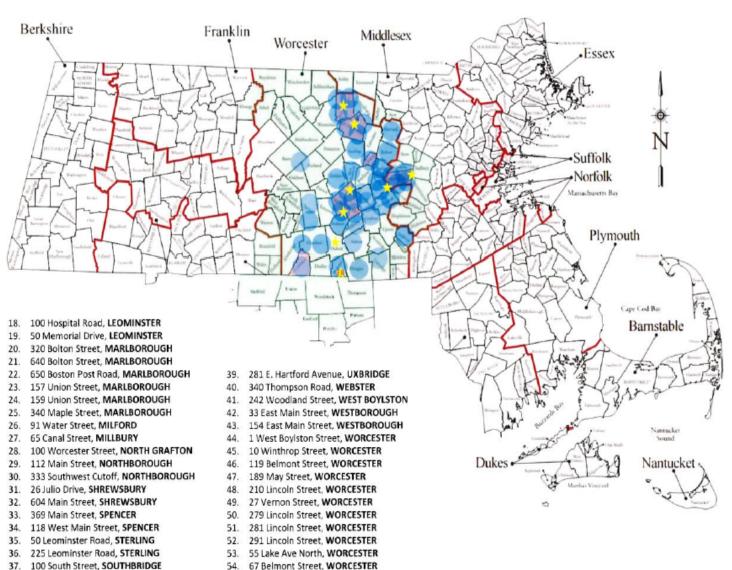
WEBSTER (E.R. Open 24/7) 340 Thompson Road

UMass Memorial PHYSICIAN LOCATIONS

- 1. 103 Millbury Street, AUBURN
- 2. 151 Worcester Road, BARRE
- 44 Central Street, BERLIN
- 563 Main Street, BOLTON
- 5. 201 Highland Street, CLINTON
- 10 North Main Street, CHARLTON
- 20 Southbridge Road, CHARLTON
- 8. 15 West Street, DOUGLAS
- 9. 47 Ashby State Road, FITCHBURG
- 10. 275 Nichols Road, FITCHBURG
- 11. 326 Nichols Road, FITCHBURG
- 12. 155 Franklin Road, FITCHBURG
- 13. 76 Summer Street, FITCHBURG
- 14. 198 Ayer Road, HARVARD
- 15. 52 Boyden Road, HOLDEN
- 16. 80 Erdman Way, LEOMINSTER
- 17. 60 Hospital Road, LEOMINSTER



38. 188 Worcester-Providence Tpke, SUTTON



55. 85 Prescott Street, WORCESTER

Plans and Benefits

HMO

MASS ADVANTAGE BASIC



\$0 monthly plan premium Most affordable plan



Obtain care from providers within our UMass Memorial network

MASS ADVANTAGE PLUS



\$100 monthly plan premium Generally lower out of pocket costs



Obtain care from providers within our UMass Memorial network

PPO

MASS ADVANTAGE PREMIERE



\$0 monthly plan premium Competitive in and out of network cost sharing



In addition to our providers within UMass Memorial Health network, **the flexibility to use providers nationwide**



Part C Highlights

	\$0 Basic HMO	\$100 Plus HMO	\$0 Premiere PPO (INN)
MOOP	\$6,500 (\$7,550)	\$3,450	\$6,550 (\$7,550)
PCP Copay	\$0 (\$5)	\$0 (\$10)	\$0
Inpatient Hospital	\$370/Day 1-5 (\$335/Day 1-6)	\$150/Day 1-5 (\$200/Day 1-5)	\$350/Day 1-5 (\$335/Day 1-6)
Labs / Diagnostic Tests	\$0 - Labs (\$5) \$20 - Diagnostic Tests (\$30)	\$0 - Labs \$0 - Diagnostic Tests (\$5)	<pre>\$0 - Labs (\$5) \$20 - Diagnostic Tests</pre>
Urgent Care	\$10 (\$45)	\$0 (\$15)	\$40
X-ray	\$0 - X-ray (\$15) \$250 - CT/PET/MRI	\$0 - X-ray (\$15) \$225 - CT/PET/MRI (\$250)	\$0 - X-ray (\$15) \$150 - CT/PET/MRI (\$200)
Physical Therapy	\$10	\$0 (\$10)	\$30 (\$10)
Speech Therapy	\$10 (\$40)	\$0 (\$35)	\$30 (\$40)
Occupational Therapy	\$20 (\$40)	\$0 (\$20)	\$30 (\$40)
Diabetic Supplies	0% Monitoring supplies (20%) \$0 Self-Management Training	0% Monitoring supplies (20%) \$0 Self-Management Training	0% Monitoring supplies (20%) \$0 Self-Management Training

<u>Key:</u>

Denotes benefit improved YoY; Denotes benefit degraded YoY; Denotes benefit range is not directly comparable YoY; Denotes no change YoY. () denotes PY'22 benefit amount

Part D Highlights

	\$0 Basic HMO	\$100 Plus HMO	\$0 Premiere PPO	Significant YoY deductible improvement
Part D deductible	\$195 (\$250)	\$0 (\$225)	\$250 (\$320)	across all 3 plans
Tier 1 (30/90 day)	\$0 / \$0 (\$0 / \$0)	\$0 / \$0 (\$0 / \$0)	\$2 / \$4 (\$2 / \$6)	
Tier 2 (30/90 day)	\$4 / \$8 (\$4 / \$12)	\$4 / \$8 (\$4 / \$12)	\$6 / \$12 (\$6 / \$18)	Reduced T1-T4
Tier 3 (30/90 day)	\$47 / \$94 (\$47 / \$141)	\$47 / \$94 (\$47 / \$141)	\$42 / \$84 (\$42 / \$126)	90-day copay for al plans
Tier 4 (30/90 day)	\$100 / \$200 (\$100 / \$300)	\$100 / \$200 (\$100 / \$300)	\$95 / \$190 (\$95 / \$285)	
Tier 5 (30/90 day)	30% (28%)	33% (29%)	29% (27%)	
Insulin Pricing ²	\$35; 1-month supply	\$35; 1-month supply	No reduction; Tier 3	
Gap Coverage ³	Added for Tier 1 & Tier 2	Added for Tier 1 & Tier 2	Added for Tier 1 & Tier 2	

(1) () denotes PY'22 benefit amount

(2) 1-month supply of Part D select insulin drugs during the deductible, initial coverage and coverage gap or "donut hole" stages of a member's benefit. Non-select insulin products included in tier 3.

(3) While in the Gap, members will continue to pay the applicable tier copay assigned to Tier 1 & 2 drugs, unless the cost of the drug is less than the copay. Similar to the initial coverage phase the member is responsible for the cost of the drug or the assigned copay, whichever is less.

Part D Highlights: Gap Coverage, Vaccines, and Formulary

Gap Coverage (NEW):

- Medicare drug plans have a coverage gap (also called the "donut hole") as part of their benefit. The coverage gap begins after members and their drug plan have spent a certain amount for covered drugs. For 2023, that amount is \$4,660 on covered drugs ("ICL").
- Mass Advantage is offering additional coverage once members enter the coverage gap for Tier 1 and 2 medications. Once in the coverage gap, members will continue to pay the copay amount instead of the standard 25% of medical costs.

Vaccine Coverage (NEW):

Improved vaccine coverage at \$0 copay (details and talking points in process)



Part D Highlights: Gap Coverage, Vaccines, and Formulary

Formulary & Coverage (Existing, strong current benefit):

- Members can ask that certain medications not on Mass Advantage's Part D formulary be covered; if members meet the rules for coverage by Medicare, they will be covered with a Tier 4 copay which likely represents a discounted rate
- Some medications are on Mass Advantage's Part D drug formulary but the negotiated discounted rates with a member's network pharmacies may be less than the tier copay. In this scenario, members will not have to pay the full copayment for these medications and will only pay the lower, discounted rate.



Part D Highlights: Senior Savings Model

- Part D Senior Savings Model is included in both HMO plans and is tailored to address the unique needs of a diabetic population
- Specifically, the goal of the Senior Savings Model is to have more predictable copays and lower out-of-pocket costs for members taking insulin
 - Senior Savings Model is designed to offer insulin at an affordable cost where a onemonth supply of insulins costs no more than a \$35 copay in the deductible, initial coverage, and coverage gap phases
 - Although Senior Savings Model provides more stable and predictable copays for insulins, it does not change cost sharing in the catastrophic phase

Important Note: The model is not applied to all insulins – We have selected specific manufacturers up front to include that can be found in the EOC

*Above information about the Part D Senior Savings Model is based on our submitted bid. Mass Advantage is aware that due to new regulations passed in August (Inflation Reduction Act), this could change.



Love My Service

Member Navigators

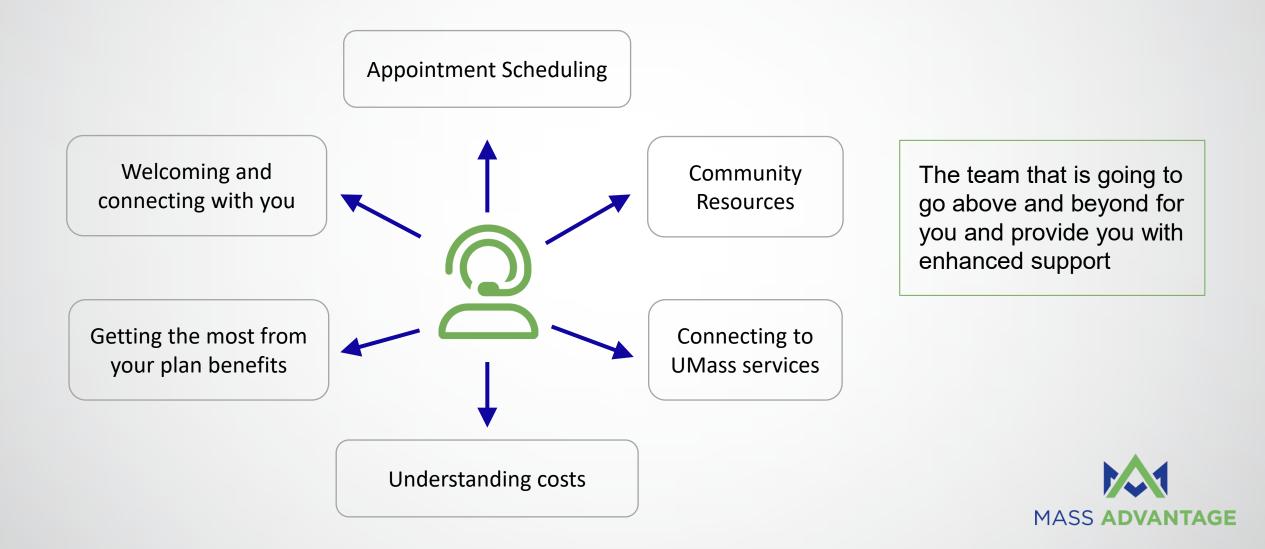
- Team to support, navigate and advocate for Mass Advantage members
- Member Navigators can book most UMass Memorial Health primary care and specialty appointments so that the member can be in the office within 10 days or less from the day they call

Hospital at Home

- If your client needs hospitalization, they may be able to receive hospital-level care in their home through this innovative program from UMass Memorial Health
- Exceptional care, close to home
 - UMass Memorial Health is the clinical partner of the University of Massachusetts Medical School, with access to the latest technology, research and clinical trials



Love My Service



Dental & Vision Services

	Mass Advantage Basic	Mass Advantage Plus	Mass Advantage Premiere
	(HMO)	(HMO)	(PPO)
Dental Services	 2 preventive dental exams and cleanings per year Comprehensive services covered with 50% coinsurance Combined maximum benefit level for comprehensive of \$1,000 	 2 preventive dental exams and cleanings per year Comprehensive services covered with 20% coinsurance Maximum benefit level for comprehensive of \$1,500 	 2 preventive dental exams and cleanings per year Comprehensive Preventative services covered with 20% coinsurance Combined maximum benefit level for comprehensive of \$2,000
Vision Services	 Routine eye exam – \$0 Up to a total of \$200	 Routine eye exam – \$0 Up to a total of \$200	 Routine eye exam – \$0/\$65 Up to a total of \$200
	annually for eyeglasses,	annually for eyeglasses,	annually for eyeglasses,
	frames, lenses or contact	frames, lenses or contact	frames, lenses or contact
	lenses	lenses	lenses

Hearing Services



- Annual hearing test with no out-of-pocket cost
- Hearing aids available from all major brands
- Concierge-level service by dedicated Member Experience Advisors

Mass Advantage Basic (HMO)		Mass Advantage Plus (HMO)		Mass Advantage Premiere (PPO)	
• Basic: \$675	Preferred: \$1,275 Advanced: \$1,575 Premium: \$1,975	Fitting/Evaluation \$0Entry: \$500Basic: \$675Prime: \$975	 Preferred: \$1,275 Advanced: \$1,575 Premium: \$1,975 	Fitting/Evaluation \$0Entry: \$500Basic: \$675Prime: \$975	 Preferred: \$1,275 Advanced: \$1,575 Premium: \$1,975
• Basic: \$675 • A	Preferred: \$1,275 Advanced: \$1,575 Premium: \$1,975	Fitting/Evaluation \$0Entry: \$500Basic: \$675Prime: \$975	 Preferred: \$1,275 Advanced: \$1,575 Premium: \$1,975 	Fitting/Evaluation \$0Entry: \$500Basic: \$675Prime: \$975	 Preferred: \$1,275 Advanced: \$1,575 Premium: \$1,975

Hearing Aids



Program services include:

- Annual hearing test with no out-of-pocket cost
- Access to a nationwide network of 8,000+ providers
- Hearing aids available from all major brands
- Low pricing and a 60-day, 100% moneyback guarantee
- Concierge-level service by dedicated Member Experience Advisors

- Three follow-up visits
- 3-year repair warranty
- 3 years of batteries included
- One-time replacement coverage for lost, stolen or damaged hearing aids



Hearing Aids



Digital Hearing Test

Hearing assessment technology that allows members convenient and accurate testing through their computer, tablet, or smartphone.

Our digital hearing test allows for greater flexibility so members can take a hearing test whenever, and wherever they're located.



Over-the-Counter (OTC)

Your clients can order from hundreds of useful items that can be mailed directly to their homes

• First Aid products

• Pain relievers & fever reducers

• Skin & sun care

• Vitamins & minerals

• So much more!

Ordering is quick and easy - online, over the phone, or by mailing in the order form provided

Mass Advantage Basic	Mass Advantage Plus	Mass Advantage Premiere
(HMO)	(HMO)	(PPO)
\$50 per quarter	\$100 per quarter	\$50 per quarter



Over-the-Counter (OTC)

- Administered by Convey Health Solutions, Inc.
- Members will be able to submit an order once per quarter
 - Benefit amounts will rollover from quarter to quarter but will not roll over to new plan year
 - Orders are applied to the quarter in which the products are received
- Products are sent via FedEx, free of charge, and should be delivered 5-7 business days after ordering
- Online portal is available at: <u>www.massadvantageotc.com</u>
- OTC materials will be sent out late December/early January, including an OTC catalog, order form, and instructions on how to order online





SnowBird Network Overview

- Mass Advantage has engaged MultiPlan to make available all active MultiPlan-contracted providers with Medicare Advantage access included in the states of Arizona and Florida
- This includes access to a total of ~26.9K practitioners and ~85 facilities
- MultiPlan fees cover credentialing and recredentialing, provider data maintenance, and provider training
- Covered Counties by State:
 - Arizona: Apache, Cochise, Coconino, Gila, Graham, Greenlee, La Paz, Maricopa, Mohave, Navajo, Pima, Pinal, Santa Cruz, Yavapai, Yuma
 - Florida: Alachua, Baker, Bay, Bradford, Brevard, Broward, Calhoun, Charlotte, Citrus, Clay, Collier, Columbia, DeSoto, Dixie, Duval, Escambia, Flagler, Franklin, Gadsden, Gilchrist, Gulf, Hamilton, Hardee, Hendry, Hernando, Highlands, Hillsborough, Holmes, Indian River, Jackson, Lake, Lee, Leon, Levy, Liberty, Madison, Manatee, Marion, Martin, Miami-Dade, Monroe, Nassau, Okaloosa, Okeechobee, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, Putnam, Santa Rosa, Sarasota, Seminole, St. Johns, St. Lucie, Sumter, Suwannee, Taylor, Union, Volusia, Wakulla, Walton, Washington



SnowBird Network Overview

- Mass Advantage has engaged MultiPlan to make available all active MultiPlancontracted providers with Medicare Advantage access included in the states of Arizona and Florida
- This includes access to a total of ~26.9K practitioners and ~85 facilities
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SnowBird Network Overview

Covered Counties by State:

A	Arizona				Florida			
Apache	Pima	Alachua	Collier	Gulf	Lake	Monroe	Putnam	Volusia
Cochise	Pinal	Baker	Columbia	Hamilton	Lee	Nassau	Santa Rosa	Wakulla
Coconino	Santa Cruz	Bay	DeSoto	Hardee	Leon	Okaloosa	Sarasota	Walton
Gila	Yavapai	Bradford	Dixie	Hendry	Levy	Okeechobee	Seminole	Washington
Graham	Yuma	Brevard	Duval	Hernando	Liberty	Orange	St. Johns	
Greenlee		Broward	Escambia	Highlands	Madison	Osceola	St. Lucie	
La Paz		Calhoun	Flagler	Hillsborough	Manatee	Palm Beach	Sumter	
Maricopa		Charlotte	Franklin	Holmes	Marion	Pasco	Suwannee	
Mohave		Citrus	Gadsden	Indian River	Martin	Pinellas	Taylor	
Navajo		Clay	Gilchrist	Jackson	Miami-Dade	Polk	Union	



6

In-home Care/ Meals / Nutritional / Dietary Counseling

- Transportation (e.g., CVS, gym, park)
- Social (e.g., coffee, board games)
- Nutritional / Dietary (e.g., counseling via flex card)
- Assistance (e.g., meal prep, cleaning)



nations benefits

Flex card can be used to off-set vision copays in addition to:



- Fitness (gyms, wearables, etc.)
- Weight management (select vendors)
- Nutritional / dietary (via ESWA)
- Parking (HMO plans only) Benefit for Chronically III



	\$0 Basic HMO	\$100 Plus HMO	\$0 Premiere PPO
Dental	✓	\checkmark	\checkmark
Vision	\checkmark	\checkmark	\checkmark
Hearing	\checkmark	✓	\checkmark
Flex Card	\checkmark	\checkmark	\checkmark
Parking* (\$50 via flex card²)	~	\checkmark	×
Post-discharge Meals	\checkmark	\checkmark	×
Transportation	\checkmark	\checkmark	\checkmark
In-home Care	\checkmark	\checkmark	×
PERS	\checkmark	\checkmark	\checkmark

(1) Limited to select gyms and products. (2) SSBCI required; broad range of SSBCI's included in bid. *The parking benefit mentioned above is part of a special supplemental program for the chronically ill. Not all members will qualify.

Flex Card Coverage:

- Fitness (gyms, wearables, online memberships)¹
- Weight management
- Nutritional / Dietary (via ESWA)
- Vision (in addition to dedicated benefit)

Flex Card Allowance:

- \$0 Basic HMO: \$350 (inc. parking²)
- \$100 Plus HMO: \$550 (inc. parking²)
- \$0 Premiere PPO: \$150 (no parking)



roundtrip Roundtrip manages the full booking process for members and across various vehicle types: Call Health Plan – Member call health plan call center to book (Medical Appointment Transportation) a ride for them Call Roundtrip – Members can call Roundtrip Navigation Center to book a ride for them Self Book – Members can register to book through Roundtrip Portal online or on mobile

Proactive Engagement - Members can text reminders about their transportation benefit for upcoming appointments





In-home:

- Automatic fall detection
- Waterproof for 24/7
 protection
- Weights less than $\frac{1}{2}$ oz.
- Range up to 500 ft.

On the go:

- Automatic fall detection
- Works anywhere in the US
- Customer voice prompts
- Bluetooth enabled



Personal Emergency Response System

Elevated Care Experience

DIFFERENTIATION THROUGH UMMH AFFILIATION



We're committed to getting members into a PCP or specialist within 10 days of contacting our Love My Service team



We'll cover non-emergency transportation, in addition to covered parking (via flex card)*



UMMH providers have a direct line to our CEO, Chief Medical Officer, and Provider Relations team, which all receive rapid, personalized responses



All diabetic members will have access to the UMass Diabetes Center of Excellence (among other similar capabilities for other populations)



Access to in-home care through UMass Hospital at Home, and potential future in-home care via UMass Mobile Integrated Health



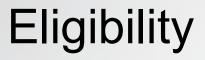
We continue to identify new ways to reduce administrative burden (including reduction of prior auths) for providers and care teams

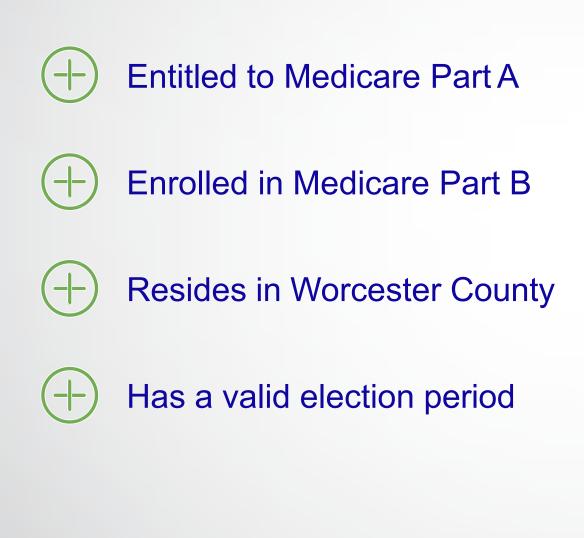


Integration of care mgmt. (including pop health, risk adj., quality management) with UMass Memorial Health (e.g., Office of Clinical Integration) allows us to simplify & streamline for providers

SECTION 3: ENROLLMENT & DISENROLLMENT









Enrolling in Mass Advantage



7 Month Initial Coverage Election Period (ICEP)

For individuals new to Medicare



Annual Enrollment Period (AEP)

October 15 – December 7



Medicare Advantage Open Enrollment Period (OEP)

January 1 – March 31



Special Election Periods (SEP)



How to Enroll



Easy to use, Ascend:

- Enrollments completed through the portal will automatically be tied to you, ensuring appropriate attribution
 - Value Based Enrollment HRA
- You will have the ability to send personalized URLs to your clients with your information built right in



How to Enroll



New for 2023 (For Contracted FMO's)

Leading Industry Medicare Shopping & Enrollment tool

Capabilities:

- Plan Comparison for contracted carriers
- Shop by Doc See plans in network by Doctor
- Smart plan scoring quickly find the right plan for each customer
- Pharmacy and pricing data

- Enrollment option
- Fully electronic Scope of appointment
- E-signatures via text and email available
- Real time reporting



Value-Based Enrollment (VBE)

ASCEND

- After completing an application utilizing our online tool you will have the ability to offer the VBE
- You will be prompted to facilitate the completion of a health risk assessment with your client allowing them to begin participating with Mass Advantage right away
- If your clients are interested, but cannot complete right away – a call back option is available
- You will receive an additional \$70 when completed at the time of enrollment and \$30 for any call back completions

SUNFIRE

- You will have 2 options to complete the HRA, dependent on method of enrollment:
 - If enrolling on Mass Advantage.com, you will be prompted to complete the HRA at the end of the application process
 - If enrolling via paper or Sunfire, you will have the ability to either complete the HRA or schedule a follow up for our LMS team to outreach post enrollment



What your client can expect after enrollment



Enrollment Confirmation Letter



Welcome Kit



Additional information about supplemental benefits



Member ID Card



Billing Information



Welcome Call



Voluntary Disenrollment

- Members may request disenrollment from a plan only during a valid election period. They may disenroll by:
 - Enrolling in another plan
 - Giving or faxing a signed written notice to the MA organization
 - Calling 1-800-MEDICARE
- If member verbally requests disenrollment from the plan, the MA organization must instruct the member to make the request in one of the ways described above



Involuntary Disenrollment

The plan must disenroll a member from a plan in the following cases:

- A change in residence that makes the individual ineligible to remain enrolled in the plan
- The member loses entitlement to Part A or Part B
- The member passes away
- The plan contract is terminated, or the MA organization reduces its service area to exclude the member
- The member fails to pay their Part D-IRMAA to the government and CMS notifies to plan to terminate
- The member is not lawfully present in the United States



SECTION 4: WORKING WITH MASS ADVANTAGE



What to Expect

- Fair market value commission payments paid within 2 weeks of effective date
- Access to a dedicated support team we're here to help!
- Elite broker program
- Referral program \$100 per referral
- Additional income opportunity with Value Based Enrollment HRA
- New technologies to support you and your members



Elite Broker Program

- Thank you for your support and contributions to Mass Advantage. The Broker Elite Program has been created to reward top-performing Brokers.
- The higher the sales the higher the level and more rewards.





Elite Broker Program



- Dedicated Broker Support Team
- Broker Email Newsletter
- 50% AHIP Reimbursement
- \$50 Gas Reimbursement
- \$50 CE Credit Reimbursement



- Dedicated Broker Support Team
- Broker Email Newsletter
- Full AHIP Reimbursement
- \$100 Gas Reimbursement
- \$150 CE Credit Reimbursement
- \$200 in Marketing Dollars 25-35 Sales
- \$350 in Marketing Dollars 36-50 Sales



- Dedicated Broker Support Team
- Broker Email Newsletters
- Full AHIP Reimbursement
- 200 Gas Reimbursement
- \$250 CE Credit Reimbursement
- \$500 in Marketing Dollars 51-100 Sales
- \$1,000 in Marketing Dollars
 101 + Sales



CMS Sales & Marketing Regulations

All Mass Advantage agents are expected to comply with all Medicare sales and marketing regulations, including but not limited to:

- Use of Mass Advantage approved marketing materials agents are not permitted to develop or produce materials on behalf of the plan
- All sales and promotional activities including the use of gifts, rewards and incentives
- Telephonic outreach activities agents cannot make unsolicited phone calls to prospective enrollees
- Educational and Marketing/Sales events

A full list of regulations can be found in the Medicare Marketing guidelines at https://www.cms.gov/Medicare/Health- Plans/ManagedCareMarketing/FinalPartCMarketingGuidelines



Agent Oversight & Monitoring

Mass Advantage has a dedicated oversight program to monitor the activities of all contracted agents:

- Rapid disenrollment rates
- Cancellation rates
- Agent driven CTMs and grievances
- Secret shopper program
- Call Quality

Corrective actions may include:

- Retraining
- Suspension
- Withholding/recoupment of commissions
- Termination



New 2023 CMS regulations- Agent Call Recording

All calls will need to be recorded on a secure drive and stored for 10 years

- This includes leads, scheduling appointments, collecting SOAs, presenting plans, collecting drug and providers lists, phone enrollments
- Disclaimer will need to be read at the start of all calls within the first MINUTE

DISCLAIMER: We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800-MEDICARE to get information on all of your options.

*Note unless you offer every plan in the service area, this disclaimer must be issued.



Helpful Definitions

- An enrollee is an eligible individual who has elected a Medicare Advantage, Prescription Drug, or cost plan or health care prepayment plan (HCPP)
- An inquiry is any verbal or written request for information to a plan or its delegated entities that does not express dissatisfaction or invoke a plan's grievance, coverage or appeals process
- An appeal is the review of adverse initial determinations made by the health plan that the enrollee believes they are entitled to receive
- A grievance is an expression of dissatisfaction with any aspect of the operations, activities or behavior of a plan or its delegated entities



Appeals & Grievances – Processing Times

Part C	Standard	Expedited
Organization Determination	14 Calendar Days	72 Hours
Appeal	Pre-service – 30 Days Payment – 60 Days	Pre-service – 72 Hours Payment: N/A
Grievance	30 Days	24 Hours

Part D	Standard	Expedited
Coverage Determination	72 Hours	24 Hours
Appeal	7 Days	72 Hours
Grievance	30 Days	24 Hours



Compliance Contacts

- Call: 774-701-1604
- Email: MassAdvcomply@massadvantage.com
- Contact: Maggie Perritt
- Medicare Compliance Officer
 <u>Maggie.Perritt@massadvantage.com</u>



Maggie Perritt Medicare Compliance Officer



SECTION 5: LOVE OUR BROKERS



Making it easy for you...

As a Mass Advantage agent, you'll gain access to our inclusive agent commission platform

One-stop shop for:

- Accurate and on-time payment of commissions
- Evolve Dashboard, Online statements
- Real-time book of business reports
- And much more...



Agent Compensation

• Commissions will be paid to qualified agents based on the following schedule:

Year 1		
First Year Commissions	Paid in a lump sum for new enrollments	
Renewal Commissions	Renewal commission, paid in a lump sum	
Years 2 – Lifetime		
Renewal Commissions	Renewal commission, paid monthly	

- Commission statements will be accessible via our Evolve platform
- Agents will only be eligible to receive commissions if all contracting and credentialing requirements have been met



Love My Broker

- Brokers First You are our Sales team
- Support and Service Mass Advantage will provide a partner to support your needs
- Competitive Compensation Overrides, Value Based Enrollment, Elite Broker Program, Referral Program
- **Commitment** Mass Advantage is committed to the Medicare marketplace
- Long-Term Partnership Our goal is to work to build together for years to come
- Future Innovation Your input is valuable, you are the voice of the market and we will listen



Broker Support Team



Troy Hebert 508-868-0498 <u>Troy.Hebert@MassAdvantage.com</u> Sales Operations Representative II



Brandi LaPlant 508-450-6837 Brandi.LaPlant@MassAdvantage.com Director Sales Operations



Margaret Mood 774-502-6348 <u>Margaret.Mood@MassAdvantage.com</u> VP Sales & Marketing Broker Support Center: 774-701-1411

Email Inquiries: Brokers@MassAdvantage.com



THANK YOU

