



Humana's Election Period Playbook

An agent's guide to
Medicare Advantage and
Prescription Drug Plan election periods

Humana[®]

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Introduction

Understanding election periods helps you build your book of business year-round. Consider this playbook your ultimate guide. We'll cover the basics and not-so-basics, including compliance, so you can be confident you're selecting the right election code for each application. Let's get to it!

Be sure to check out these enhanced features:



- [Election-periods quiz](#)
- [Calendar view of election periods](#)
- [Election-periods decision tree](#)
- [Election-code glossary](#)



SECTION 1

An overview of election periods

In this section, we'll help you see the bird's-eye view of election periods over the course of the year. Our quiz helps you pinpoint gaps in your education, while our decision tree helps you figure out which election code is right for the situation.

Election-period basics

Here's your quick-reference chart on election periods. Be sure to take a deeper dive later in the guide for all the ins and outs of each election period.

ELECTION PERIOD	WHO IT'S FOR	WHAT IT IS	WHAT THEY CAN DO	WHEN IT'S AVAILABLE
INITIAL ENROLLMENT PERIOD (IEP) OR INITIAL COVERAGE ENROLLMENT PERIOD (ICEP)	Newly eligible Medicare beneficiaries	Their first opportunity to join a Medicare health plan	IEP: Enroll in a Medicare Advantage plan with prescription drug coverage (MAPD) or a prescription drug plan (PDP) ICEP: Enroll in a Medicare Advantage-only plan (MA-only)	7 months <ul style="list-style-type: none"> • 3 months before eligibility month • Month of eligibility • 3 months after eligibility month
ANNUAL ELECTION PERIOD OR ANNUAL ENROLLMENT PERIOD (AEP)	All Medicare beneficiaries	Their annual chance to change plans	Join, switch or drop an MA, MAPD or PDP	October 15–December 7
MA OEP	MA/MAPD enrollees	Their annual chance to change MA/MAPD plans if dissatisfied	Switch or drop MA/MAPD plans If dropping to Original Medicare from MAPD, can join a PDP	January 1–March 31
SEPS	Medicare beneficiaries who have certain events occur in their life Note: Dual-eligible beneficiaries may qualify for a quarterly SEP	Their chance to make a change to their plan when special circumstances occur	Depends on SEP	Varies by SEP

10,000

Americans turn 65 each day, and all baby boomers will be aged 65 or older by 2030.¹

Calendar view of election periods

Get a snapshot of Medicare Advantage election periods throughout the year. Depending on the beneficiary’s situation, they may have other election periods available to them.

	Q1			Q2	
	Jan	Feb	Mar	Apr	May
MA OEP	January 1–March 31				
QUARTERLY SEP FOR DUAL-ELIGIBLE INDIVIDUALS	January 1–March 31			April 1–June 30	
5-STAR SEP	December 8–November 30				
AEP					
IEP, ICEP OR SEP	Throughout the year based on IEP or SEP				

Test your knowledge

Take our quiz to see what you do and don't know about Medicare election periods before diving into our playbook. If you don't know an answer, don't worry—we created this playbook to help you get up to speed. Check your answers on page 11 and use our scorecard to see how well you know your stuff.

1. What can a beneficiary do during MA OEP? Select all that apply.

- ☒ **A** Switch from one MA/MAPD plan to another
- ☒ **B** Drop from MA/MAPD to Original Medicare with or without PDP
- ☒ **C** Switch from Original Medicare to MA/MAPD
- ☒ **D** Join a PDP if they are on Original Medicare
- ☒ **E** Switch from one PDP to another if they're on Original Medicare

2. When can agents begin talking about the upcoming year's plans and benefits prior to AEP?

- ☒ **A** August 1
- ☒ **B** September 1
- ☒ **C** September 15
- ☒ **D** October 1
- ☒ **E** October 15

3. True or false: Dual-eligible individuals can use the SEP for dual-eligible individuals and other LIS-eligible individuals (MDE code) during the fourth quarter (October–December)?

A True

B False

4. True or false: You can use the IEP code for delayed Part B enrollment?

A True

B False

5. Which beneficiaries are entitled to a second Initial Election?

A Those turning 65

B Those turning 65 who already have Medicare due to disability

C Those who are retiring late

D Those who delayed their Part B enrollment

6. Which election code should you use for someone dropping from an employer-sponsored MA plan?

A ICEP

B IEP

C LEC

D OTH

7. Which SEP codes are available only to someone who is LIS eligible? Select all that apply.

- ☒ **A** LEC
- ☒ **B** MDE
- ☒ **C** NLS
- ☒ **D** MCD

8. True or false: You can market MA OEP to beneficiaries as a chance to change plans?

- ☒ **A** True
- ☐ **B** False

9. True or false: MA/MAPD enrollees have a trial period to test out their plan?

- ☒ **A** True
- ☐ **B** False

10. Which election code is for beneficiaries who have had a change in residence?

- ☒ **A** MDE
- ☐ **B** MCE
- ☐ **C** MOV
- ☐ **D** NON



Check your answers

Use our answer key and scoring system to see how well you know election periods. Be sure to spend time reviewing information in more depth for answers you may have missed.

Answer key

Scoring system

NUMBERS CORRECT	SCORE	YOUR NEXT STEPS
10	100%	Congrats on a perfect score! You really know your election periods. Use this guide as a quick reference when you need a refresh.
9	90%	You know your stuff. All you need is a little brush-up. Refer to this guide a few times throughout the year.
8	80%	A solid performance. Take some time to study this guide to boost your comprehension a few times a year.
7	70%	You're doing OK, but there's room for improvement. Use this guide to get up to speed. You might make a note to reread it once a quarter.
6	60%	Kick your knowledge up a notch with this guide so you can improve your score. Read a few times and then keep it on hand for quick reference throughout the year.
5 or less	50% or less	Don't worry. We know election periods can be tricky. That's why we created this guide. We recommend going through it multiple times to help keep the information top of mind.



SECTION 2

Initial Medicare enrollment

Beginnings have a way of setting the tone. Help beneficiaries start their Medicare experience off right by helping them select the right initial election code for their situation.

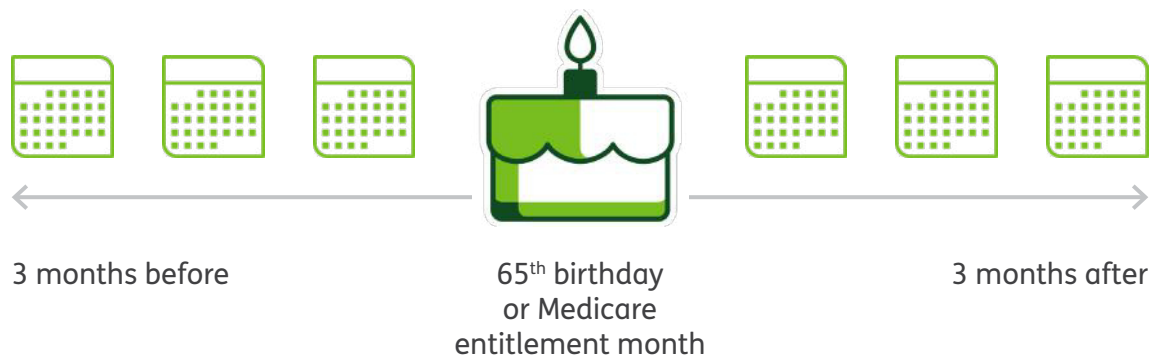
The ABCs of IEP and ICEP

Let's break down the commonalities and differences between Initial Enrollment Period (IEP) and Initial Coverage Election Period (ICEP).

Commonalities

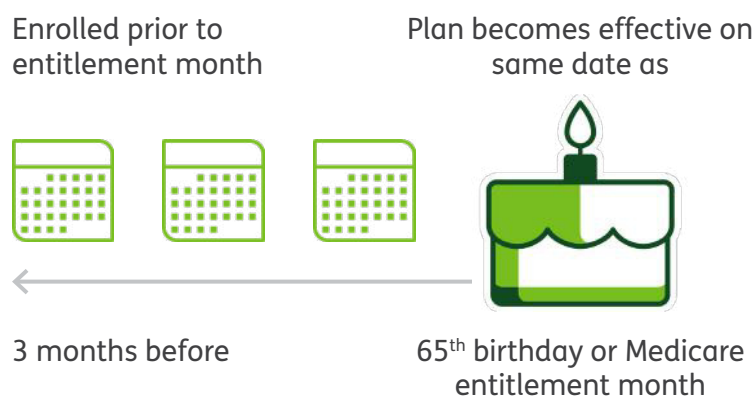
When they occur

Once during 7-month window that starts 3 months before the entitlement month and ends 3 months after the entitlement month. This graphic makes it simple to visualize.



When the plan becomes effective

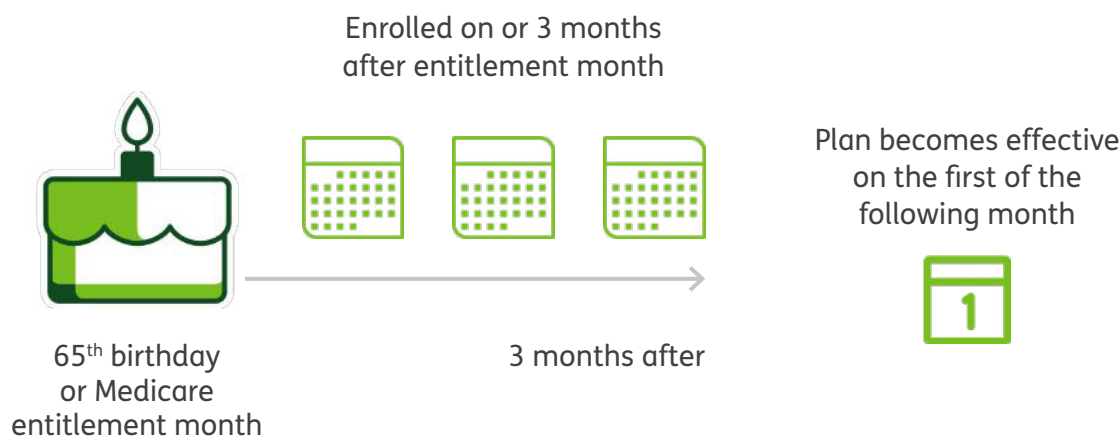
If enrollment is during the 3 months before the Medicare effective date, the plan effective date will be the same effective date as Medicare.



Don't forget

1. An individual can be entitled to Medicare under the age of 65.
2. If an individual turns 65 on the first day of their birth month, Medicare entitlement begins the 1st day of the previous month.

Otherwise, the plan effective date will be the first of the month following plan enrollment.



Second Initial Election

Beneficiaries with Medicare due to disability (before age 65) will have a second Initial Election (7-month period) when they turn 65 to change/enroll in a plan. A beneficiary is not required to use the first Initial Election in order to use the second election at age 65.

Differences

Use it for this type of coverage

IEP	ICEP
Part D (prescription drug) coverage: <ul style="list-style-type: none">MAPDPDP	Medical coverage: <ul style="list-style-type: none">MA-only

Notes:

- When an individual enrolls in an MAPD plan, they have used both their IEP and ICEP elections.
- If person had Medicare before age 65, did not have creditable prescription coverage and was subject to the Part D late enrollment penalty then uses the second IEP at their 65th birthday to enroll in Part D (PDP or MAPD), the penalty will no longer apply as long as they keep Part D or creditable prescription coverage.

Do not use it for this type of plan

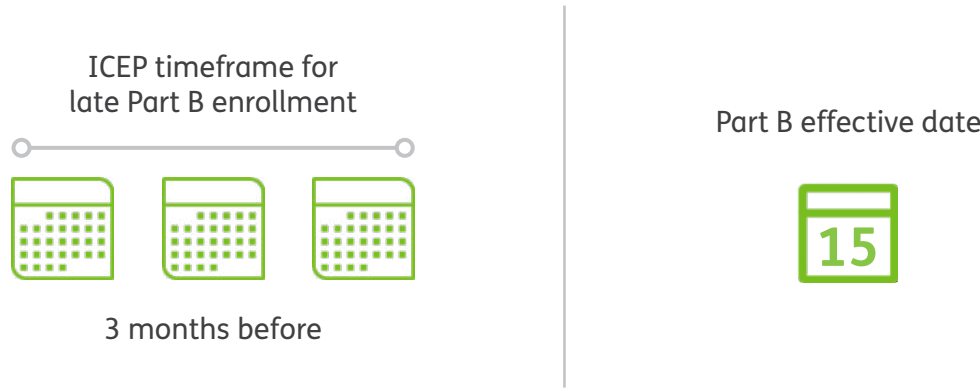
IEP	ICEP
<ul style="list-style-type: none">MA-only	<ul style="list-style-type: none">PDP

When it happens

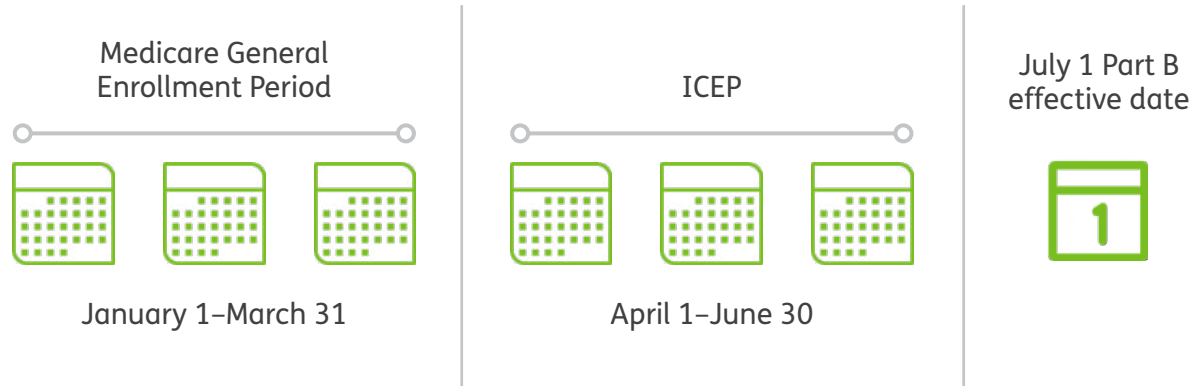
IEP	ICEP
When gaining Medicare Part A and B at the same time for MAPD or PDP	When gaining Medicare Parts A and B at the same time Delayed Part B while already has Part A

Late Part B enrollment for ICEP

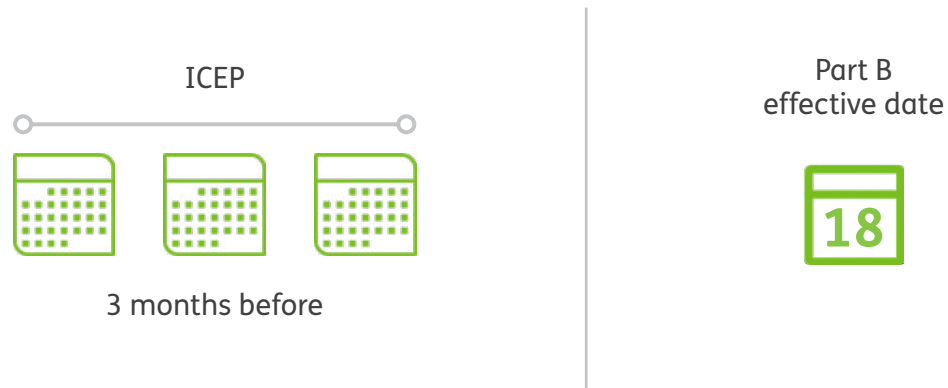
If a person has Medicare Part A and opted out of Medicare Part B when first eligible and then later enrolled in Part B, the ICEP would occur during the 3 months prior to the effective date for Part B.



If the beneficiary is adding Part B during the Medicare General Enrollment Period January 1–March 31 for a July 1 effective date, the ICEP would be available April 1–June 30 for a July 1 effective date.



If the beneficiary is adding Part B due to losing creditable coverage, the ICEP would be the 3 months prior to the Part B effective date.



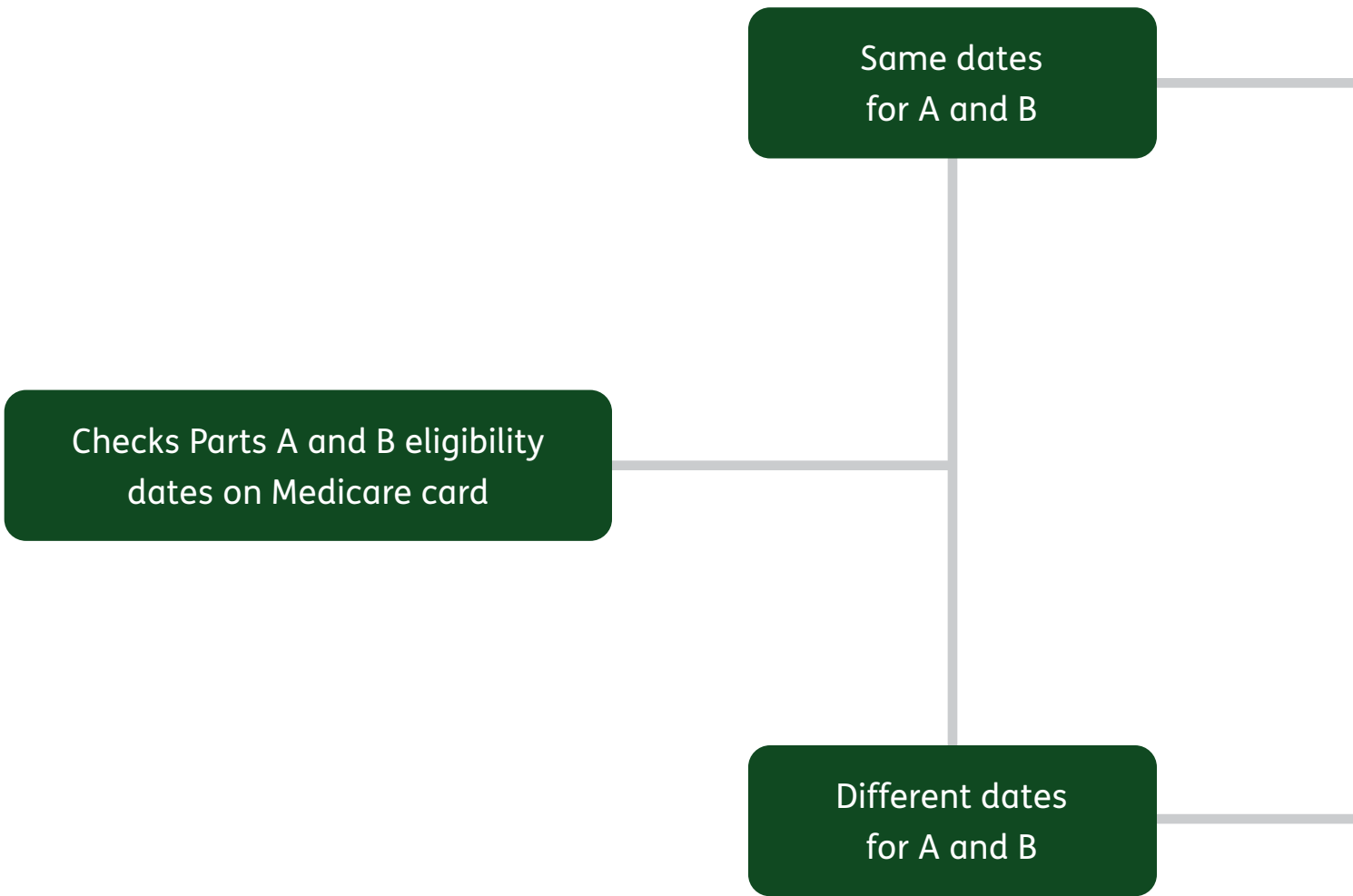
Which code to use on the application

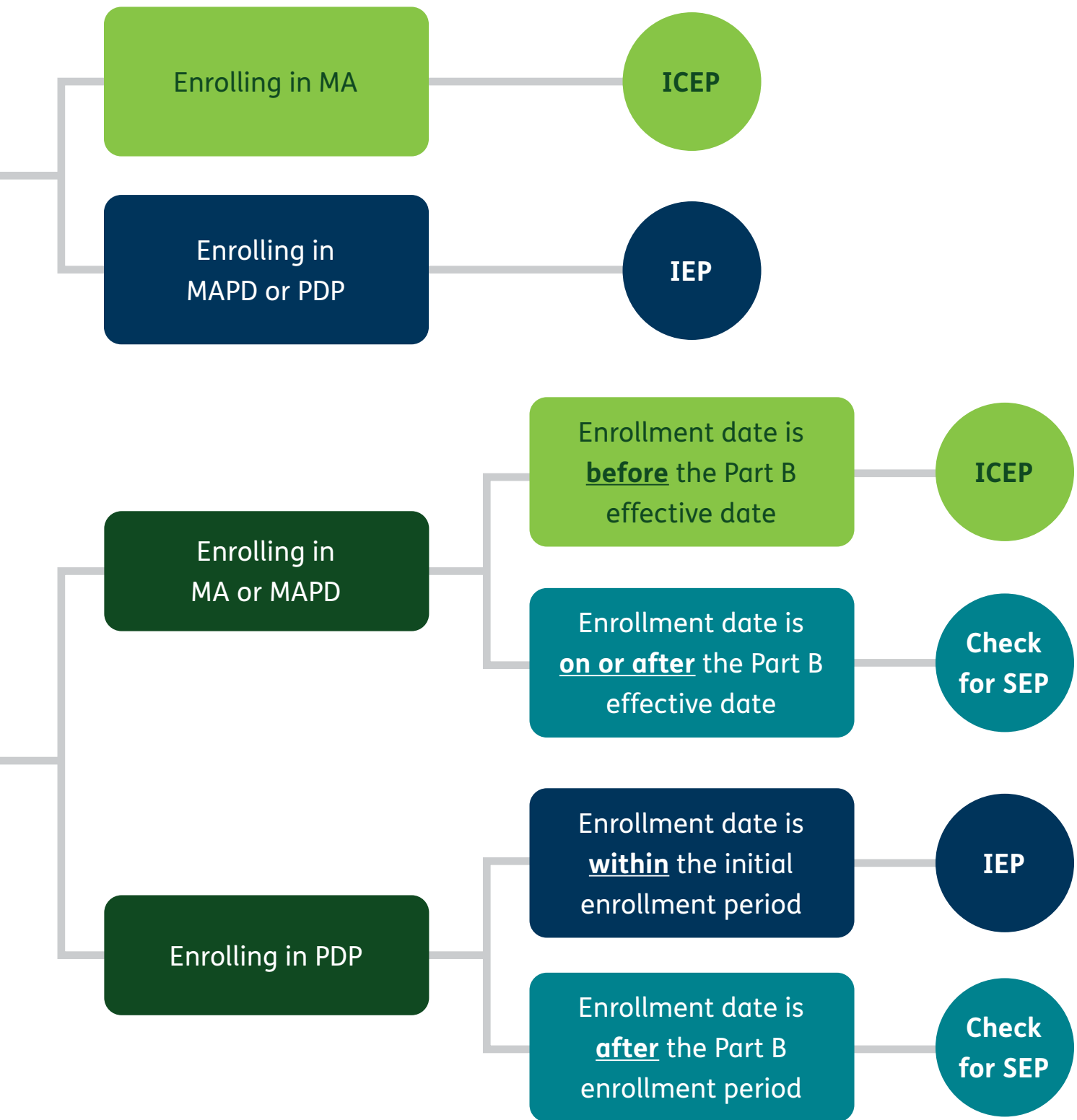
	IEP	ICEP
If A and B dates are the same	IEP (for MAPD or PDP)	ICEP (for MA-only)
If A and B dates are different		ICEP (for MA-only or MAPD) If outside the IEP window, use an SEP instead (if eligible for one)



How to choose between IEP or ICEP

Check out this IEP and ICEP decision tree to help you determine which eligibility period would work for your client.







SECTION 3

MA OEP

The new year starts with a new plan for those Medicare beneficiaries who enrolled during AEP. Those first few months are a critical time for members to try out their plan and ensure it's the right one for them. Here are the guardrails you need to know about MA OEP.

“Kindness and courtesy are at the root of a positive customer service experience.”

—Shep Hyken,
customer service and customer experience expert

MA OEP 101

Get the details on MA OEP in this handy chart.

Who CAN use MA OEP?	Individuals enrolled in an MA or MAPD plan
Who CANNOT use MA OEP?	<ol style="list-style-type: none"> 1. People enrolled in Original Medicare only 2. PDP enrollees 3. Medicare Supplement enrollees 4. Those enrolled in Medicare Savings Accounts or other Medicare health plan types such as cost plans or PACE
When does MA OEP occur?	January 1–March 31
What can MA/MAPD enrollees do during MA OEP?	<ol style="list-style-type: none"> 1. Switch from one MA/MAPD plan to another 2. Go back to Original Medicare with or without a stand-alone PDP
What can't enrollees do during MA OEP?	<ol style="list-style-type: none"> 1. Switch from Original Medicare to an MA/MAPD plan 2. Join a PDP if they're in Original Medicare 3. Switch from one PDP to another if they're in Original Medicare
Why might enrollees want to switch plans during OEP?	MA/MAPD enrollees may have different reasons for changing plans during OEP. Beneficiaries may have buyer's remorse or want to see if they can find a plan that's a better fit for their needs or wants.
How should agents respond to members who want to switch MA/MAPD plans or drop to Original Medicare with a stand-alone PDP?	If a member expresses dissatisfaction with their plan, this is a great time to understand their needs and help them find a plan that fits their criteria.

Plan dissatisfaction warning signs²

Inflation concerns continue to worry Medicare consumers, and according to Deft Research, 95% of beneficiaries indicated some level of concern. Medicare enrollees may be focused on limiting costs like copays and premiums and looking for plans with Part B givebacks.

Deft also found that MA members who use more health care now and seek more coverage are more likely to switch. Beneficiaries may not remember what is and isn't covered with their plan or may have misunderstood their benefits.

- 1 Help beneficiaries find the right plan for their healthcare needs and budget at enrollment.
- 2 Proactively educate members throughout the year about their plan. Explain their coverage in clear, plain language that makes it easy to understand. Leverage the summary of benefits for specific details.
- 3 Confirm the member's understanding of your explanation. Ask them to repeat back what they heard in their own words. This gives you a chance to validate their comprehension and correct them if they misunderstood.

Doing these steps may help position you as a reliable and trustworthy resource members can turn to year-round.



The rate of rapid disenrollment, where enrollees switch plans after a few months, can range from 5–30%.³

Marketing guardrails during MA OEP

Use this chart to understand the dos and don'ts during OEP

DURING MA OEP, AGENTS MAY	DURING MA OEP, AGENTS MAY NOT
<ul style="list-style-type: none">• Market to Age-Ins who have not yet made an enrollment decision.• Market 5-star continuous enrollment SEP (if applicable).• Market to dual-eligible (Medicare and Medicaid eligible) and LIS/ Extra Help beneficiaries who may make changes once per calendar quarter during the first nine months of the year.• Send marketing materials when a beneficiary makes a proactive request.• At the beneficiary's request, have one-on-one meetings with the beneficiary.• At the beneficiary's request, provide information on OEP.• Include general educational information on their website (partner agents only) about OEP as long as it is in the context of providing information about other enrollment periods.	<ul style="list-style-type: none">• Send unsolicited materials referencing OEP or advertising the ability to switch plans.• Call or contact former enrollees who selected a new plan during AEP.• Target beneficiaries who are in the OEP due to making a choice during AEP.• Engage in or promote agent activities to target the OEP as an opportunity to make further sales.



MA OEP compliance

Find out what you need to do to adhere to the Center for Medicare & Medicaid Services' (CMS) compliance policies and maintain your good standing.

Outside MA OEP

Scroll through the slideshow to get answers to frequently asked questions on marketing and communications outside of MA OEP.



FAQs on Marketing Outside MA OEP

During MA OEP

Scroll through the slideshow below to find out what you can say and do during OEP with current and prospective clients.



MA OEP agent/provider activities

Providers should always consult with their own legal and compliance teams regarding any events to ensure compliance with all applicable guidelines, including CMS and Office of Inspector General (OIG) guidelines.

Can Humana sales agents participate in provider-practice events during MA OEP?

Yes, agents are permitted to participate in a sales/marketing or educational capacity in provider offices and events, as long as they are not advertising or asking/approaching individuals about MA OEP and all CMS and Humana event guidelines are followed. Agents should advise the provider practice that the provider should also not discuss the MA OEP at the event. Agents can respond to questions regarding an SEP or, if someone requests, about the MA OEP. In addition, agents should not specifically target those who have already made a plan election during AEP. Agents must use approved materials when conducting any educational or sales/marketing events. Events may be virtual or in-person (following all CDC, Humana, state and local guidelines).

MA OEP enrollment guidance

Scroll through the slideshow to get answers to FAQs on enrollment during MA OEP.



A final word on MA OEP

Remember to start the year out right. Providing proactive, ongoing customer service year-round with periodic check-ins throughout the year helps members get the most out of their plan benefits. Listening to their needs helps foster retention and could lead to referrals.





SECTION 4

SEPs

Understanding SEPs can help you grow and sustain your book of business throughout the year. You'll be able to help beneficiaries when certain life events happen so they can be confident they have the right plan for them.

Most common SEPs

Scroll through the slideshows to learn about the most common SEPs. Be sure to listen for cues that alert you of when someone may qualify for an SEP.

SEP Employer/Union Group Health Plan (EGHP)

Only half of IEP age-in beneficiaries are retired or expect to retire by their 65th birthday.⁴ Here are a few scenarios you might watch for:

1. A beneficiary who retires late and needs a new plan once they leave their employer coverage.
2. A beneficiary who was previously retired but is re-entering the workforce.
3. A beneficiary who wants to keep working past 65 and is changing jobs.

SEP EGHP

Get the basics

SEP for dual-eligible individuals and other LIS-eligible individuals

There are 12.3 million dual-eligible beneficiaries as of 2022.⁵ In 2022, 12.8 million Part D enrollees (26% of all Part D enrollees) received premium and cost-sharing assistance through LIS/Extra Help.⁶ Keep this SEP in mind when serving beneficiaries with low incomes.

This SEP can both help you grow your book of business and put your existing DSNP or LIS book of business at risk because other agents could use it to switch beneficiaries to a different plan or carrier. That's why it's important to stay top of mind with DSNP members throughout the year and provide them with exceptional customer service so they come to you first.

SEP for dual-eligible individuals and other LIS-eligible individuals

Essential know-how

SEP for individuals who gain, lose or have a change in their dual- or LIS-eligible status

Since dual and LIS eligibility are determined by income levels, a beneficiary's status may change if their financial circumstances change. This SEP gives them an opportunity to get the right plan for their needs.

SEP for individuals who gain, lose or have a change in their dual- or LIS-eligible status

Get up to speed

SEP for changes in residence

According to the U.S. Census Bureau, more than 3 million adults aged 65 or older move every year with the oldest population—those age 85 and older—moving the most.⁷ As people age, they may need to move in with caregivers or transition to a facility for care.

SEP for changes in residence

Discover the details

SEP for individuals who lose special needs status

Special needs plans (SNPs) are available to dual-eligible beneficiaries, those with certain severe or disabling chronic conditions and those who live in institutions such as a long-term care or in-patient psychiatric facility.

SEP for individuals who lose special needs status

[Learn more](#)

SEP for government entity-declared disaster or other emergency

Recovering from a disaster or emergency can take a toll. This SEP ensures that beneficiaries affected by these circumstances and who missed another valid election period can still make a plan election.

SEP for government- entity-declared disaster or other emergency

Keep reading

Remember this

This SEP should never be used as a marketing tool to promote MA or PDP sales. Agents should not be actively marketing this SEP, but rather, be aware that it is available in case they are approached by someone who believes they have missed an election period due to the disaster or other emergency.

SEP for contract non-renewal or service-area reduction

Sometimes Medicare plans or contracts do not get their contracts with CMS renewed or they reduce their service area. This SEP ensures those beneficiaries can select a new plan.

SEP for contract non-renewal or service-area reduction

Get the specifics

Other SEPs to know

These SEPs may be less common, but they're still important to know. Scroll through the slideshows to learn more about each SEP.

SEP to enroll into plan with 5 stars

In 2023, the average Medicare beneficiary has access to 43 MA/MAPD plans.⁸ As such, finding the right plan can take time and effort. Medicare Star Ratings use objective measurements from CMS an impartial party, to rate MA/MAPD and PDP plans up to 5 stars.⁹



WHY STAR RATINGS MATTER

With 5-star plans, you can feel confident offering beneficiaries plans that have earned a top-quality rating from CMS. They can rest easy knowing they're in the highest-rated Medicare plan available based on objective measurements along with real people's experiences. Remember, you must still conduct a full and thorough NEADS analysis with each beneficiary to ensure they select the plan that best fits their needs.

MORE STARS MAY MEAN MORE FUTURE BENEFITS

Higher star ratings may mean more benefits for you and members. Plans rated at 4 stars and above, as well as plans without ratings (due to low enrollment or being new), earn a quality bonus payment from CMS. Humana can use those bonus payments to reinvest in plans in future years for extra perks, including reduced cost sharing and/or increased benefits. That may be a plus for both you and beneficiaries, they get top-rated plans and you have quality plans to sell that stand out in a crowded marketplace.

HUMANA'S 2023 5-STAR PLANS

For 2023, Humana has our highest number of 5-star contracts in company history, with plans in Kentucky, Louisiana and Tennessee rated 5 stars from CMS. Check out our 2023 5-star plans on [Ignite](#).



Don't forget

Agents may not market the 5-star SEP outside of areas where a 5-star plan is available for the current plan year.

5-STAR SEP SLIDESHOW



5-Star SEP

Your compliance how-to

SEP FOR INDIVIDUALS TO DISENROLL FROM PART D TO ENROLL IN OR MAINTAIN OTHER CREDITABLE COVERAGE

Wondering what counts as other creditable coverage? Here's what Medicare.gov says: "Creditable prescription drug coverage" is coverage that meets Medicare's minimum standards since it is expected to pay, on average, at least as much as Medicare's standard prescription drug coverage. Creditable prescription drug coverage includes, but is not limited to: some employer-based prescription drug coverage, including the Federal Employees Health Benefits Program; qualified State Pharmaceutical Assistance Programs (SPAPs); military-related coverage (e.g., VA, TRICARE); and certain Medicare supplemental (Medigap) policies."

**SEP for individuals
who disenroll from Part D
to enroll in or maintain other
creditable coverage**

[Learn more](#)

SEP FOR CMS AND STATE-INITIATED ENROLLMENTS

If CMS or a state action places a Medicare beneficiary into a PDP, they can chose their own plan.

SEP for CMS and state-initiated enrollments

Learn about it

SEP FOR PROVIDING INDIVIDUALS WHO REQUESTED MATERIALS IN ACCESSIBLE FORMATS EQUAL TIME TO MAKE ENROLLMENT DECISIONS

Individuals who need accessible formats may need additional time to receive those materials to make their election. This SEP ensures they are not disadvantaged by any additional time necessary to fulfill their request, including an election period deadline.

**SEP for providing individuals
who requested materials in
accessible formats equal time
to make enrollment decisions**

Discover more

Keep in mind

This is not a free-standing SEP. This SEP is available to an individual who was adversely affected by having requested, but not received, required notices or information in an accessible format within the same timeframe that the MA organization or CMS provided the same information to individuals who did not request an accessible format.

SEP FOR INDIVIDUALS ENROLLED IN A PLAN PLACED IN RECEIVERSHIP

A third party could be appointed by a state or regulatory authority to make business decisions on behalf of the plan. This SEP is for those members currently enrolled in those plans.

SEP for individuals enrolled in a plan placed in receivership

[Read more](#)

Prohibited SEPs for agents

Certain SEPs may only be used by CMS at CMS's discretion if the circumstances meet their requirements and are prohibited for agent use. These SEPs may help protect Medicare beneficiaries from significant changes, wrongdoing and/or errors by a plan or agent.

Don't try to use these SEPs

Only 1-800-Medicare representatives may use the following SEPs. Licensed Medicare sales agents may not use these SEPs.

- SEP for individuals not adequately informed about creditable prescription drug coverage
- SEP for significant change in provider network
- SEP for contract violation
- SEP for marketing misrepresentation (beneficiary was enrolled in a plan based on misleading or incorrect information or was enrolled into a plan without their knowledge or consent)
- SEP for individuals affected by an item directly related to their plan's sanction





SECTION 5

Election-period decision tree

It's important to choose the right election code so that a beneficiary's application will be processed quickly and accurately. This decision tree can help make deciding between election periods simple.

CMS regulations dictate election period choice when 2 or more election periods overlap. This is the hierarchy:

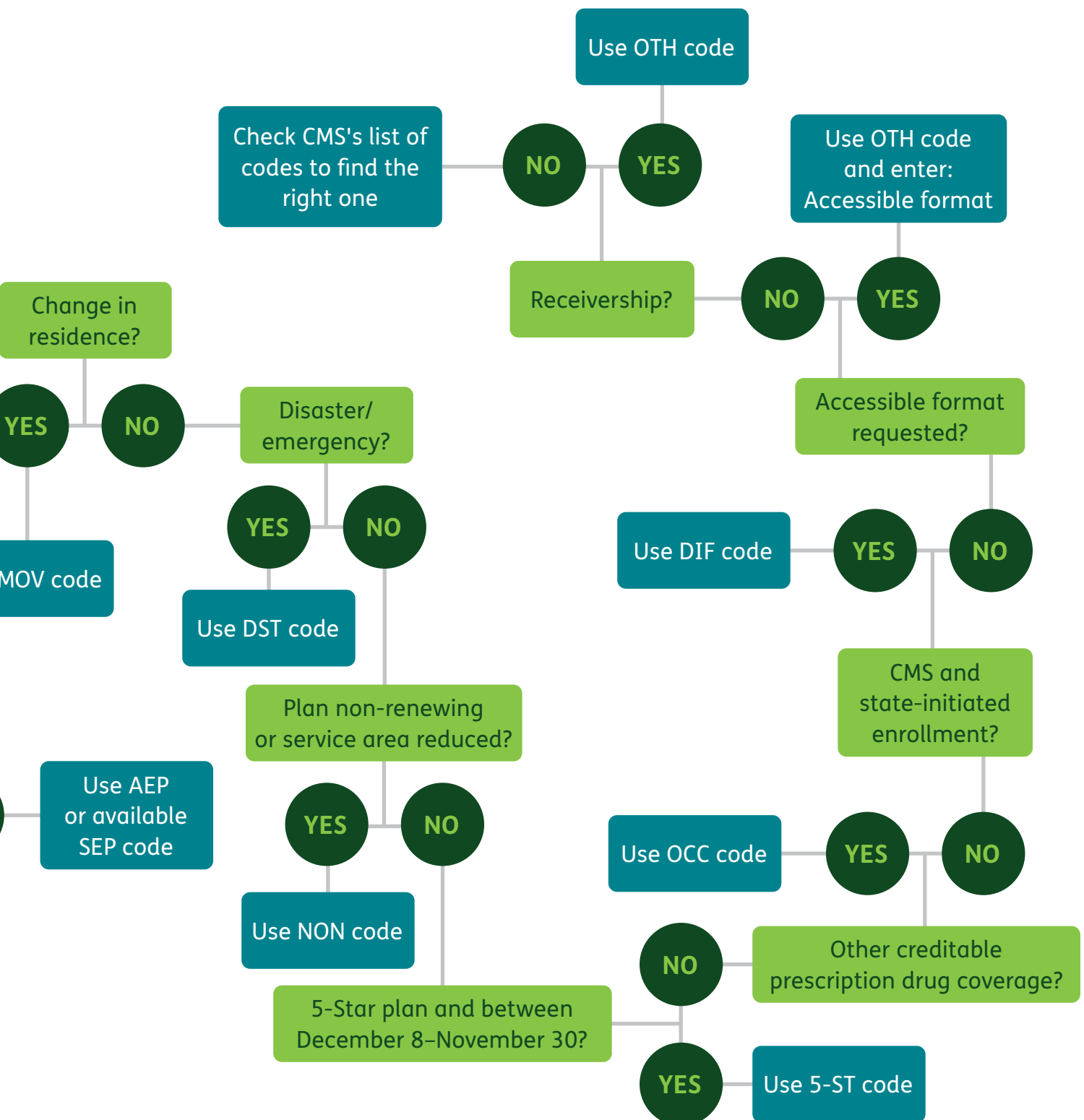
1. IEP/ICEP
2. MA OEP
3. SEP
4. AEP
5. Open Enrollment Institutional (when moving into, residing in or moving out of an institution for MA/MAPD)

CMS regulations also specify that the election that is the most advantageous or beneficial for the beneficiary should be chosen.

Choose the right code

The decision tree is meant to be a guide. Agents must confirm beneficiaries meet the requirements of the election code chosen. Other election codes besides the ones listed here may be available.







SECTION 6

Glossary of election codes

Use this glossary as a quick-reference tool for election codes. Be sure to confirm beneficiaries meet the requirements of the election period you select.

Glossary

ELECTION CODE	ELECTION PERIOD
IEP	Initial Election period for Part D coverage (MAPD or PDP)
ICEP	Initial Coverage Election Period for medical coverage (MA/ MAPD)
AEP	Annual Election Period or Annual Enrollment Period
MA-OEP	MA Open Enrollment Period
LEC	SEP for Employer/Union Group Health Plan (EGHP)
MDE	SEP for dual-eligible individuals and other LIS-eligible individuals
MCD (Medicaid) NLS (LIS/Extra Help)	SEP for individuals who gain, lose or have a change in their dual or LIS-eligible status
SNP	SEP for individuals who lose special needs status
DST	SEP for government entity-declared disaster or other emergency
NON	SEP for contract non-renewal or service area reduction
5-ST	SEP to enroll into plan with 5 stars
OCC	SEP for individuals who disenroll from Part D to enroll in other creditable coverage
DIF	SEP for CMS and state-initiated enrollments
OTH and enter: Accessible format	SEP for providing individuals who requested materials in accessible formats equal time to make enrollment decisions
OTH	SEP for individuals enrolled in a plan placed in receivership



SECTION 7

Additional resources

Humana is here for agents with a wide array of educational and enrollment resources you can use throughout your agent journey. Explore these additional resources to help you serve beneficiaries before and after they enroll in a plan.

For more information on election periods, you can also refer to the Medicare Plan Enrollment/Election Periods Job Aid on Humana MarketPoint University, accessible via **Vantage**. Simply search for “Enrollment Options” to find the job aid.

Humana agent tools

Level up your knowledge with content about Humana sales tools.



Your Essential Guide to Lead Generation with Humana: An Agent's Guide to Marketing

Learn how to use traditional and digital marketing to drive your sales success.



The Intersection of Tech and Health: Humana's Guide to Agent Tools

Learn when and why to use Humana's agent technology tools in this playbook.



Maximize Your Social Media Presence: An Agent's Best Practices Guide

Learn how to build a social media presence.



Humana Reach Rewards power your purpose

Don't forget: You can earn Reach Rewards* points for the things you do every day. Here are some of the many ways to earn points:

- Sales activities for new or plan-to-plan enrollments
- MRC order placement or download
- Digital Marketing Material sends

Sign up or login to your dashboard at HumanaReachRewards.com.

**Reach Rewards points and rewards are subject to modification or discontinuation by Humana at any time.*

Driving sales



Discover winning strategies to help you close more sales year-round.

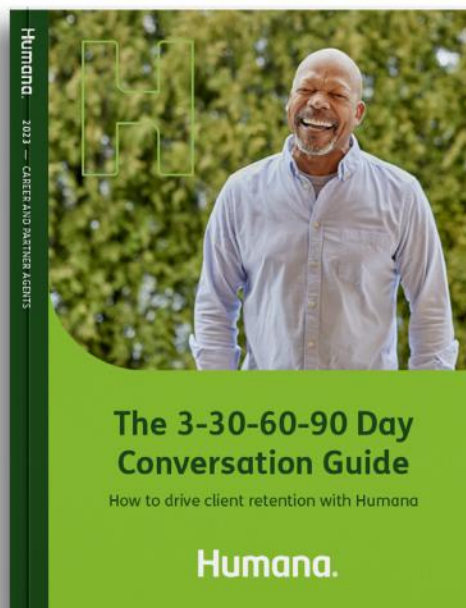
[Go-to Strategies to Help Boost Medicare Sales: A Guide for Agents](#)

Selling is problem-solving. Get audience insights, essential agent tactics, best practices and more.

“
**Approach each customer with the idea
of helping him or her solve a problem
or achieve a goal, not selling a product
or service.**

”
- Anonymous

Retention



Make retention your number 1 sales strategy.

The 3-30-60-90-Day Conversation Guide: How to Drive Client Retention with Humana

The close of a sale is just the beginning of a relationship. Help members start their plan with the onboarding and support they need.

Agent support

Get the personalized support you need from our support teams. Use this chart to decide who can help you with what.

WHO	AGENTS THEY WORK WITH	WHAT THEY HELP YOU WITH	WHERE YOU CAN FIND THEM
Broker Relationship Managers	Partner	Growing and sustaining your book of business	IgniteWithHumana.com/Support
Broker Relationship Executives	Partner		
Sales Managers	Career and partner	Sales and product support	
DSNP Community Engagement Executives	Agents who sell DSNP	DSNP-specific efforts	
Veterans Community Engagement Executives	Agents who serve veteran beneficiaries	Veteran-specific efforts	
Bilingual Broker Relationship Managers and Executives	Career and partner agents who prefer Spanish	Support in Spanish and/or English	IgniteWithHumana.com/Es/Support
Agent Support Unit in English or Spanish	Career and partner agents	Enrollment questions and technical support	800-309-3136 (ext. 5 for Spanish) AgentSupport@Humana.com

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