





# Insurance & Technology

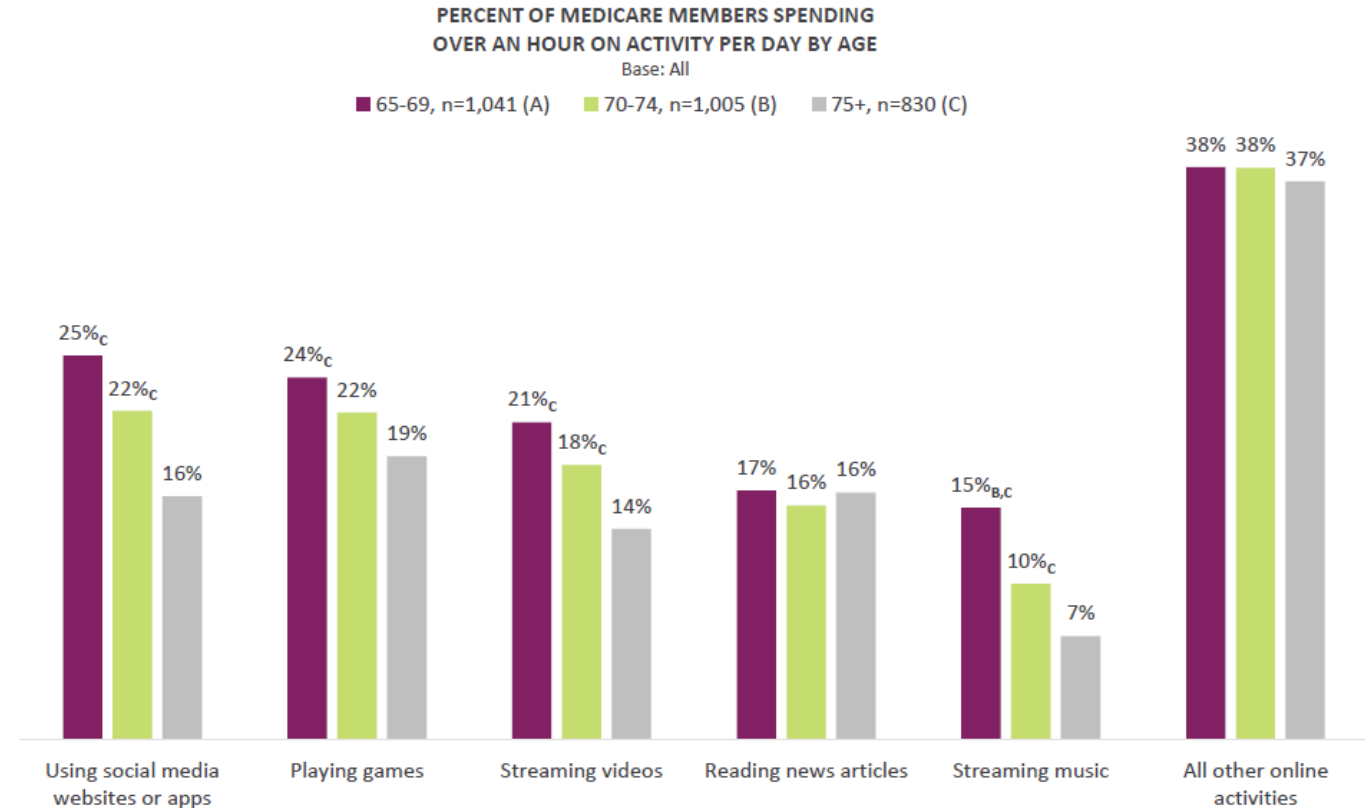
Presented by Tim Shook  
Vice President



# The New Senior Consumer

- Spending more time online
  - Higher online users tend to be younger, higher income, and more educated.
  - More than one-fifth of seniors indicate spending at least an hour on social media each day
  - which makes a strong case for further developing the channel for Medicare marketing.
  - Just over four in five seniors browse news articles online, with over half spending at least 15 minutes doing so every day.
- 
- 

Younger Medicare members are more likely to spend an hour or more per day on social media, playing games, and streaming music or videos.

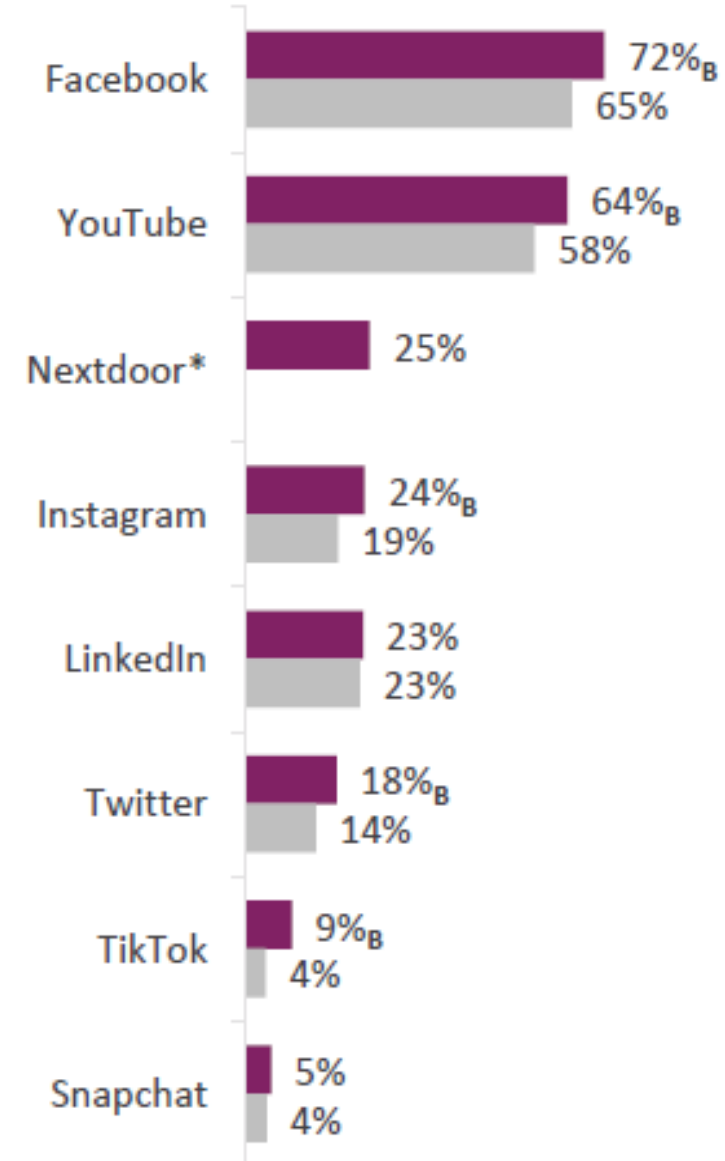


# The Changing Senior Consumer

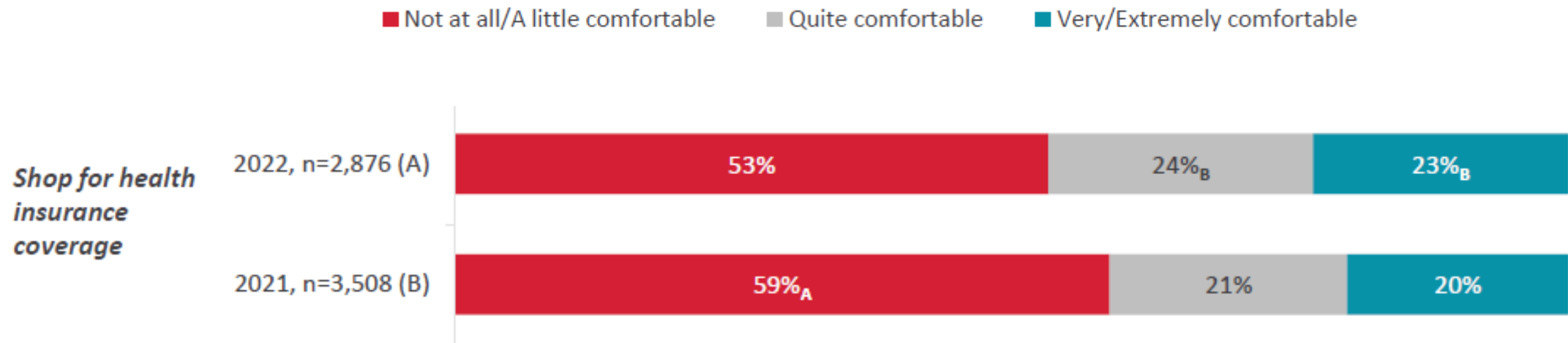
## PERCENT USE SOCIAL MEDIA PLATFORM BY YEAR

Base: All

■ 2022, n=2,876 (A) ■ 2021, n=3,508 (B)



# Medicare members' comfort with managing their health and healthcare online has edged upward since 2021.

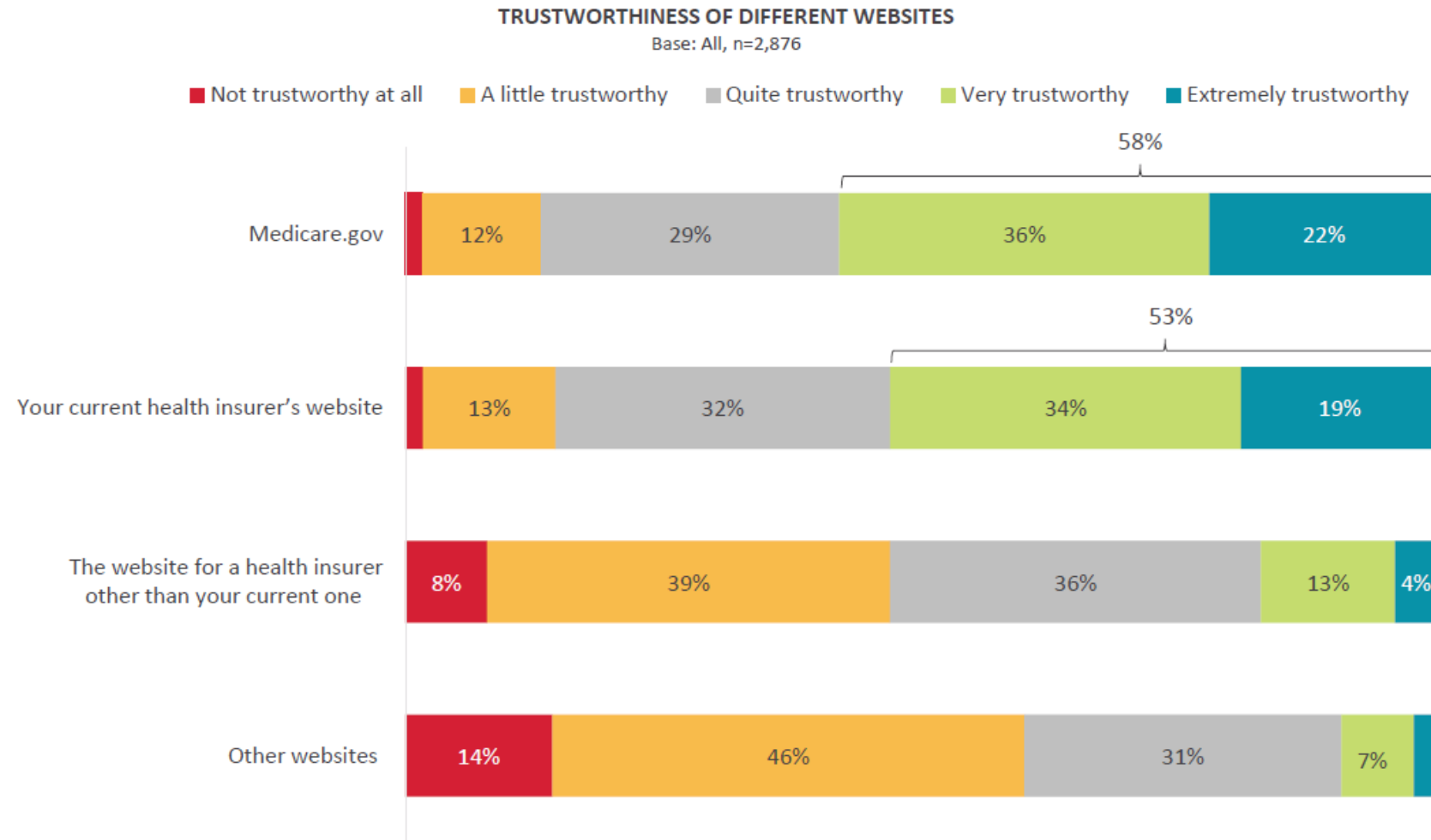




Where are consumers looking  
to shop for insurance?

# More than half of seniors trust Medicare.gov and their own health insurer's website for information related to Medicare plans.

However, trust in private insurer websites does not extend to insurers other than their own.



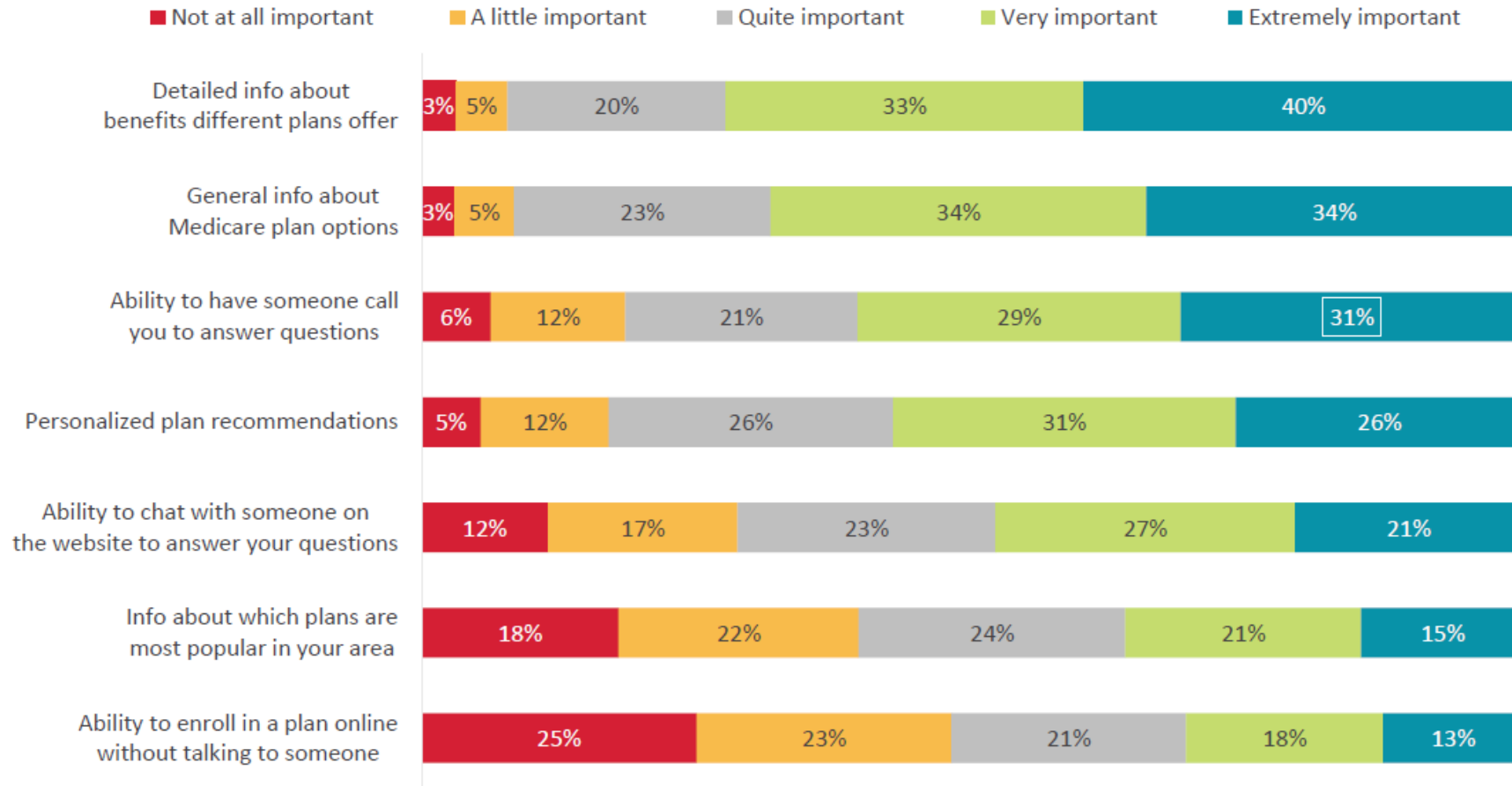
Thinking about information related to Medicare plans, how trustworthy of a source do you think each of the following kinds of websites are?

## The ability to have a plan representative call back seniors is nearly as important as ensuring carrier websites have specific plan and program information.

This signals to carriers that even the best designed website lacks utility if lost seniors cannot navigate back to personal touch.

### IMPORTANT FEATURES OF A WEBSITE FOR ONLINE HEALTH INSURANCE SHOPPING

Base: All, n=2,876



When shopping for health insurance online, how important is it for a website to offer each of the following features?

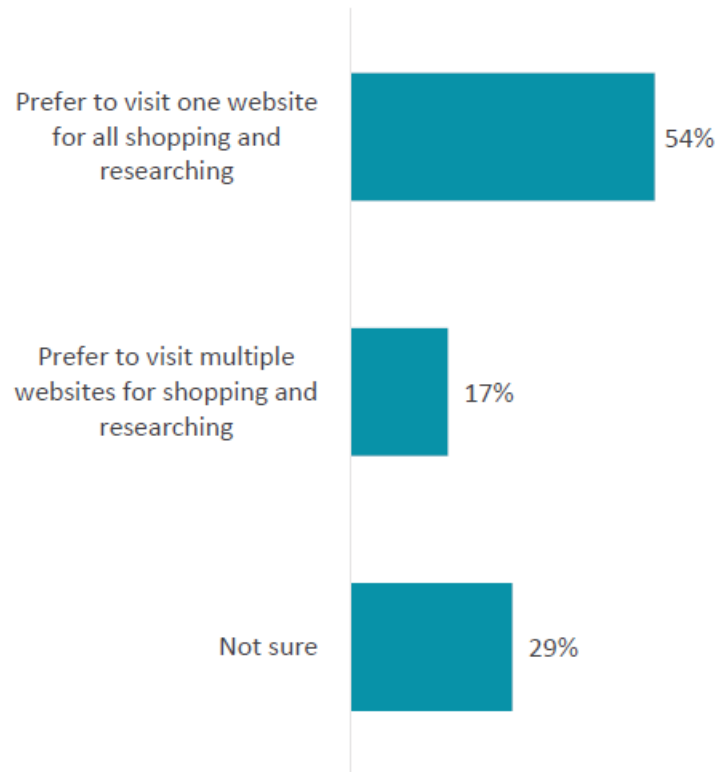


# In a nod to the aggregators, seniors prefer using only one website for their Medicare plan shopping and researching.

Unsurprisingly, seniors who are more active online tend to heavily favor shopping and researching for Medicare plans online.

## PREFERENCE FOR VISITING ONE OR MULTIPLE WEBSITES WHEN SHOPPING ONLINE

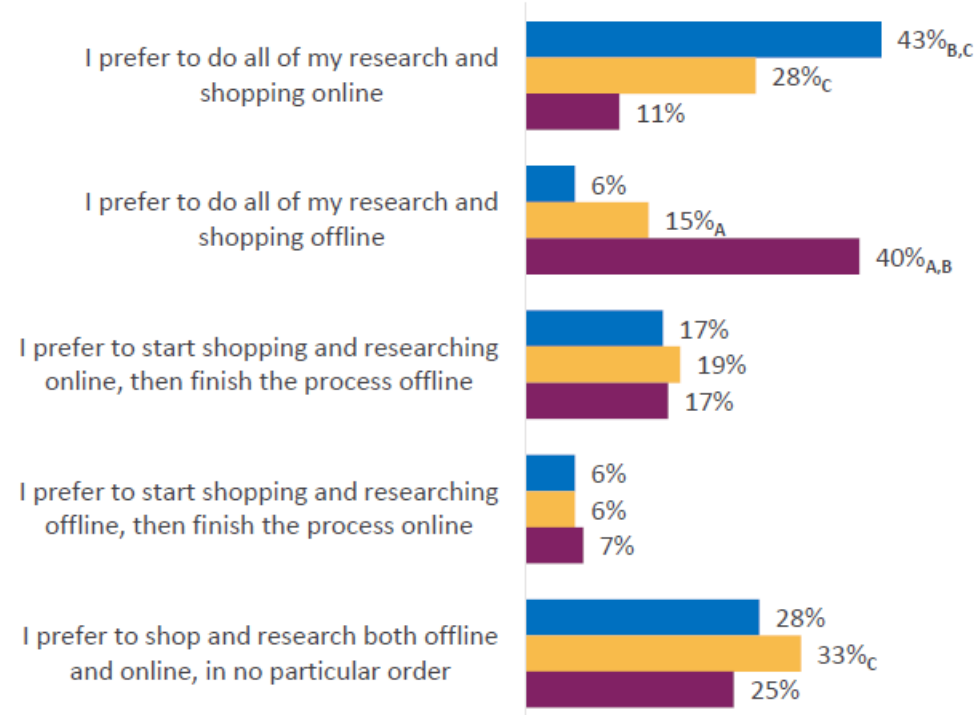
Base: All, n=2,876



## PREFERENCE OF ONLINE OR OFFLINE SHOPPING BY ONLINE USE INDEX

Base: All

- Higher Online Use, n=418 (A)
- Medium Online Use, n=2,043 (B)
- Lower Online Use, n=415 (C)



Letters indicate significant difference from corresponding group,  $p < .05$

Thinking about shopping for Medicare plans online, would you prefer to visit one or multiple websites for all of your shopping and researching?  
When it comes to shopping for health insurance, which of the following statements best describes you?



# Using an Electronic Scope of Appointment

# Scope of Appointment

- Outlines what an agent will present to a Medicare Beneficiary.
- All sales appointments require Scope of Appointment
- Required to have signed prior to any Medicare Enrollment.
- Suggestion is to have client check all the boxes to discuss.
- Must be saved for 10 years even for no-show appointments, cancelled or rescheduled appointments.

# Ways to Collect Scope of Appointment's



## **Paper**

Complete in face-to-face meeting

Mail to client to mail back

or

Client to complete when face to face



## **Carrier Site**

Use carrier online tool to collect electronically



## **Independent Online Tools**

MedicareCenter

# Scope of Appointment

A Scope of Appointment is required for all sales appointments. Submit the SOA once you have received it from the beneficiary.

## SOAs

✔ Completed 01/29/2021

Confirmation

#73B9TBKLYW

- Ancillary Products
- Medicare Advantage Plans Part C and Cost Plans
- Medicare Supplement Medigap Products
- Stand alone Medicare Prescription Drug Plans Part D

📄

View

 Print consumer form |  Upload

### Email address

tim.shook@cornerstonesen

Email SOA

### Phone number

(513) 629-9505

Text SOA

### Scope of Appointment sent



Email sent to  
tim.shook@cornerstoneseniormarketing.com on  
08/08/2022

[View Test Shook 's profile >](#)

Create a task to follow up with the beneficiary

\* **Due date**

08/10/2022



\* **Create a task**

Follow up on Scope of Appointment

Add task

Close



## Hi Test,

I am looking forward to meeting with you...

Please fill out the Scope of Appointment online form. Be sure to select the Medicare health plan options that you are interested in discussing during our visit. It's important that you complete the form prior to our visit since it is required by the Centers for Medicare and Medicaid Services.

**Complete "Scope of Appointment" form**



**TIMOTHY SHOOK**

[TIM.SHOOK@CORNERSTONESENIORMARKETING.COM](mailto:TIM.SHOOK@CORNERSTONESENIORMARKETING.COM)

## Scope of Sales Appointment Confirmation Form

The Centers for Medicare and Medicaid Services requires agents to document the scope of a marketing appointment prior to any face-to-face sales meeting to ensure understanding of what will be discussed between the agent and the Medicare beneficiary (or their authorized representative). All information provided on this form is confidential and should be completed by each person with Medicare or his/her authorized representative.

Fields marked with an asterisk (\*) are required.

Please check one or ALL the product(s) below that you want the agent to discuss. \*

- ☐ Stand-alone Medicare Prescription Drug Plans (Part D)
- ☐ Medicare Advantage Plans (Part C) and Cost Plans
- ☐ Medicare Supplement (Medigap) Products
- ☐ Ancillary Products

[View](#) complete Medicare product descriptions.

### Beneficiary or Authorized Representative Information

**By signing this form, you agree to a meeting with a sales agent to discuss the types of products you initialed above.** Please note, the person who will discuss the products is either employed or contracted by a Medicare plan. They do not work directly for the Federal government. This individual may also be paid based on your enrollment in a plan.

Signing this form does NOT obligate you to enroll in a plan, affect your current enrollment, or enroll you in a Medicare plan.

Beneficiary's First Name*	<input type="text" value="Test"/>
Beneficiary's Last Name*	<input type="text" value="Shook"/>
*Address (Line 1)	<input type="text"/>
Address (Line 2)	<input type="text"/>
*City	<input type="text" value="Columbus"/>
*State	<input type="text" value="Select"/>
*Zip Code	<input type="text" value="43229"/>
Phone Number	<input type="text" value="5136079505"/>

Are you the authorized representative acting on behalf of the beneficiary?



## Scope of Appointment



**Thank you, your scope of appointment has been submitted. Please close your browser.**

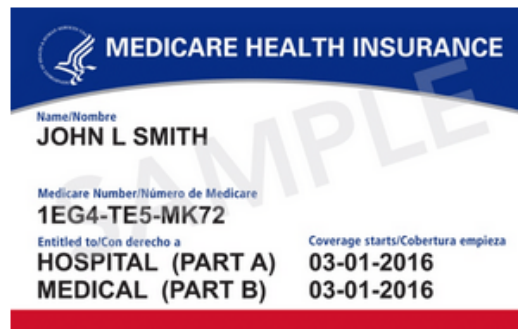
Your broker will get in touch with you soon.

### We'll discuss:

- Stand alone Medicare Prescription Drug Plans Part D
- Medicare Advantage Plans Part C and Cost Plans
- Medicare Supplement Medigap Products
- Ancillary Products

### Make sure you have the following for our meeting:

- Medicare card
- All medications
- List of all your current physicians along with their phone numbers and addresses



Sample Medicare card you will need for the meeting with your broker.

CMS Pending Approval



**MedicareAPP**

A non-government site sponsored by Integrity Marketing Group



## Test Shook completed the SOA

Products to discuss:

Stand alone Medicare Prescription Drug Plans Part D

Medicare Advantage Plans Part C and Cost Plans

Medicare Supplement Medigap Products

Ancillary Products

**Log in to view SOA**

# Scope of Appointment

A Scope of Appointment is required for all sales appointments. Submit the SOA once you have received it from the beneficiary.

## SOAs

✓ Completed by Test Shook on  
08/08/2022

- Ancillary Products
- Medicare Advantage Plans Part C and Cost Plans
- Medicare Supplement Medigap Products
- Stand alone Medicare Prescription Drug Plans Part D

**Complete form**

 [Print consumer form](#) |  [Upload](#)

### Email address

tim.shook@cornerstonesen

**Email SOA**

### Phone number

(513) 607-9505

**Text SOA**

## Scope of Sales Appointment Form (To Be Completed by Agent)

Scope of Appointment form needs to be completed and submitted for all scheduled appointments (even for no-shows, cancelled appointments, or those that do not result in a sale).

**Agent First Name\***

TIMOTHY

**Agent Last Name\***

SHOOK

**Agent Phone**

*Please enter your 10 digit phone number with no hyphen or spaces (e.g., 2125551212).*

**Initial Method of Contact\***

Client Referral- Called in.

If the SOA form was signed by the beneficiary at time of appointment, provide explanation why SOA was not documented prior to the meeting.

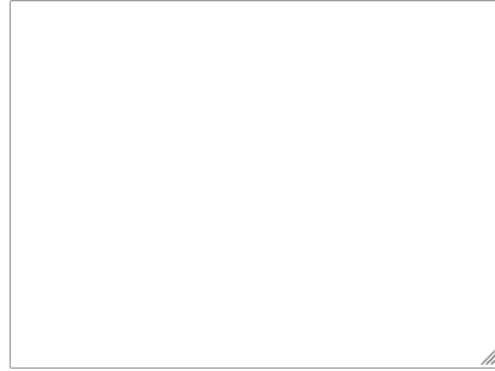
**Plan(s) represented during this meeting:\***

**Date Appointment Completed\***


**Initial Method of Contact\***

Client Referral- Called in.

If the SOA form was signed by the beneficiary at time of appointment, provide explanation why SOA was not documented prior to the meeting.



**Plan(s) represented during this meeting:\***



**Date Appointment Completed\***

08/08/2022

- ☒ By checking this box, I confirm the information represented here is true and accurate. I authorize my signature on the Scope of Appointment form using this information.



clear

Submit broker form

# Scope of Appointment

A Scope of Appointment is required for all sales appointments. Submit the SOA once you have received it from the beneficiary.

## SOAs

---

✓ Completed 01/29/2021

Confirmation  
#73B9TBKLYW

- Ancillary Products
- Medicare Advantage Plans Part C and Cost Plans
- Medicare Supplement Medigap Products
- Stand alone Medicare Prescription Drug Plans Part D

 [View](#)

---

 [Print consumer form](#) |  [Upload](#)

### Email address

tim.shook@cornerstonesen

Email SOA

### Phone number

(513) 629-9505

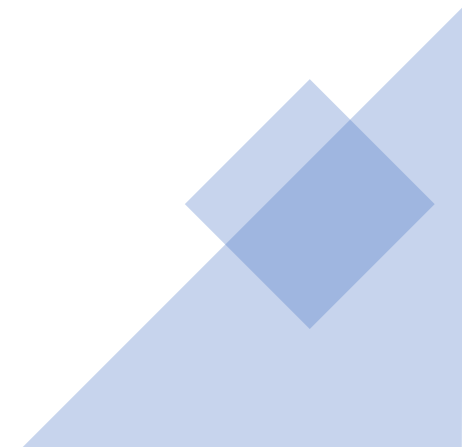
Text SOA




# Prescription Comparison's




# Electronic ways to Compare Prescriptions

- Medicare.Gov
  - Carrier Sites
  - MedicareCenter
- 





## Benefits of using online prescription comparison

- Helps determine costs of prescriptions
  - Compares each of the carrier formularies
  - Determines costs of the prescriptions in each phase
  - Determines the total out of pocket expenses including the premium for the year
- 

# Comparison of Prescription Drug Systems

	Carrier	Medicare.Gov	MedicareCenter.com
Can agent save Prescriptions for next year?	Yes	Yes. Member must set up user-name and password	Yes
Can you see multiple carriers?	No	Yes	Yes
Can you enroll online?	Yes	Yes	Yes
Can agent get credit for sale?	Yes	No	Yes



https://www.medicare.gov



**Get Started with Medicare**



## Log in or create an account

Access your information anytime, anywhere

**Log in/Create Account**



## Find health & drug plans

Find & compare plans in your area

**Find Plans Now**



## Find care providers

Compare hospitals, nursing homes, & more

**Find Providers Near Me**



## Talk to someone

Contact Medicare & other helpful resources

**Get Help**

### Step 1

## Medicare basics

Start here. Learn the parts of Medicare, how it works, and what it costs.

Parts of Medicare

General Costs

How Medicare Works

Working Past 65

### Step 2

## Sign up

First, you'll sign up for Parts A and B. Find out when and how to sign up, and when coverage starts.

When to Sign Up

How to Sign Up

When Coverage Starts

Ready to Sign Up

### Step 3

## Get more coverage

Then, review your options for more coverage, when and how to get it, and browse plans.

Coverage Options

Joining a Plan

Buying a Medigap Policy

Find Plans

### Step 4

## Using Medicare

When you're ready, find out how to get services and ways we can help you.

Your Medicare Card

How to Get Services

5 Tips for Using Medicare

Helpful Tools

See how Medicare is responding to Coronavirus

Learn more

## Log in

No account? Get a more personalized experience — [create an account now.](#)

USERNAME

[Forgot username?](#)

PASSWORD

  Show

[Forgot password?](#)

Allow www.medicare.gov to access your location?

[Learn more](#)

☐ Remember this decision

Allow

Block

# Find & compare nursing homes, hospitals & other providers near you.

[Learn more about the types of providers listed here](#)

MY LOCATION \*

Street, ZIP code, city, or state

PROVIDER TYPE \*

Select one



KEYWORDS (optional)

Search

What's New?



# Contact Medicare

Need help beyond what's on Medicare.gov?

You can talk or live chat with a real person, 24 hours a day, 7 days week (except some federal holidays.)



**1-800-MEDICARE** ([1-800-633-4227](tel:1-800-633-4227))

TTY users can call [1-877-486-2048](tel:1-877-486-2048)



Start a Live Chat



## Find Medicare health & drug plans


 Use your account

### Save time by logging in

- Get a summary of your current coverage
- Use your saved drugs & pharmacies to compare plan costs

Log In

Don't have an account? [Create one.](#)

 Continue without logging in

ZIP CODE

PLAN TYPE

Select a plan type



Next, you can add your  
cost information. [Need help?](#)

Start

- ☐ Medicare Advantage Plan
- ☐ Drug plan (Part D)
- ☐ Drug plan (Part D) + Medigap policy
- ☐ Medigap policy only
- ☐ I want to learn more about Medicare options before I see plans

Apply

[Looking for PACE plans?](#)





# Help with your costs

Do you get help with your costs from one of these programs?

- ☐ Medicaid
- ☐ Supplemental Security Income
- ☐ Medicare Savings Program
- ☐ Extra Help from Social Security
- ☐ I'm not sure
- ☒ I don't get help from any of these programs

---

Next



# Tell us your search preferences

Do you want to see your drug costs when you compare plans?

☒ Yes

**Great!**

To see drug costs, get ready to enter the name, dosage, quantity, and frequency for each drug you take regularly.

☐ No

---

Next

# Add prescription drug

BEGIN TYPING TO FIND & SELECT YOUR DRUG.

Cardizem

Add Drug

[Clear search](#)

[Browse drugs A-Z](#)

[Can't find your drug?](#)

Done Adding Drugs

See Plans Without Drug Costs

# A generic is available ✕

**Cardizem** has a lower cost generic version called **diltiazem hydrochloride**.

Would you like to add **diltiazem hydrochloride** to your list instead?

Add Generic

Add brand instead

# Tell us about this drug

## Diltiazem hydrochloride

DOSAGE

240mg capsule extended release 24 hour



QUANTITY

30

FREQUENCY

Every month



Add to My Drug List

Cancel

# Confirm your drug list

**Diltiazem hydrochloride  
240mg capsule  
extended release 24  
hour**

generic

[Remove drug](#)

**Quantity**

30


**Frequency**

Every month

[Edit drug](#)

Add Another Drug

Done Adding Drugs



[◀ Back to drug selection](#)

## Choose up to 5 pharmacies

Drug costs vary based on the pharmacy you use. Choosing pharmacies lets us show you your estimated drug costs, helping you pick the lowest cost plan. You don't have to choose the pharmacies you currently use.

ENTER YOUR COMPLETE ADDRESS OR ZIP CODE

43065

NAME OF PHARMACY (OPTIONAL)

Find Pharmacy



# Aetna Medicare Value Plan (PPO)

Aetna Medicare | Plan ID: H5521-089-0

Star rating: ★★★★★☆

## MONTHLY PREMIUM

**\$0.00** Includes: Health & drug coverage  
Doesn't include: \$170.10 Standard Part B premium

## YEARLY DRUG & PREMIUM COST

**\$14.40** Retail pharmacy: Estimated total drug + premium cost  
Doesn't include: Health costs

## OTHER COSTS

**\$1,500 annual deductible** Health deductible  
**\$0.00** Drug deductible

## PLAN BENEFITS

- ✓ Vision
- ✓ Dental
- ✓ Hearing
- ✗ Transportation
- ✓ Fitness benefits
- ✓ Worldwide emergency
- ✓ Telehealth

[See more benefits](#) ▼

## COPAYS/COINSURANCE

Primary doctor: **\$5 copay per visit**  
Specialist: **\$45 copay per visit**

## DRUGS





You're joining:

## Aetna Medicare Value Plan (PPO)

Plan ID: H5521-089-0

---

### Be ready to provide:

- Your Medicare Number and effective dates
- Information about your other health coverage (if any), including policy and group numbers
- Dates that any changes take effect, like if you're moving to a long-term care facility



All information you'll provide here is strictly confidential, secure, and will only be used to enroll you in your chosen plan.

Cancel

Join Plan

# Start your application

## You're joining: Aetna Medicare Value Plan (PPO)

**Plan ID:** H5521-089-0

**Plan Includes:** Health & drug coverage

You can only join a Medicare Advantage Plan or Drug Plan (Part D) at certain times, called enrollment periods. Most people join plans when they first get Medicare and each fall during Open Enrollment (October 15–December 7). There are other times you can join a plan based on your situation. Your coverage starts based on which enrollment period you use.

Note: You can join a Cost Plan without drug coverage anytime the plan's accepting new members. If you want to join a Cost Plan with drug coverage, you can only join during an enrollment period.

[Show common enrollment periods and when your coverage in the plan would start.](#) ▼

## Confirm your enrollment period

You can join a plan only if your situation matches one of these statements. The plan will contact you to confirm if you're eligible to join and to tell you if your request is approved.

**Note:** By checking a box, you certify that to the best of your knowledge, you're eligible for that enrollment period.

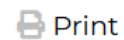


# Consumer Experience



# MedicareAPP

A non-government site sponsored by Integrity Marketing Group



Print



Contact us

TIMOTHY SHOOK ▾



Dashboard



Plans

TIMOTHY SHOOK ✕

Reports

Agent training materials

Account overview

Logout

## Account overview

### My shopping link

Send your personalized link to the client to get them started with shopping for plans. Don't worry, you will get credit if the consumer enrolls in any of these plans.

Copy link

### My picture

This image will be used in your automated email signatures and may also be displayed on the consumer shopping link in future development.

Please upload a .png, or .jpg, less than 5 MB.



 Upload

# Get covered

Finding a Medicare plan that is right for  
you is easy

**\*ZIP code**

[View plans](#)





67 plans available in [43065](#) 

for Delaware county, OH

**Medicare Advantage  
Prescription Drug  
Plans**  
44 plans


Medicare Advantage  
Plans  
6 plans

Prescription Drug  
Plans  
12 plans

Medicare  
Supplement Plans  
5 plans

Medicare Advantage Prescription Drug Plans combine the benefits of a Medicare Advantage Plan and a Prescription Drug Plan. Your coverage would include hospital and medical expenses (Part A and Part B), and prescription drug coverage (Part D).

Dual-eligible Special Needs Plans are for people who receive both Medicare and Medicaid (dual eligible). Premium depends on your level of Extra Help. You must continue to pay your Medicare Part B premium, unless it is covered through your State Medicaid Program. If you receive Medicaid cost-sharing assistance, you may pay nothing for medical deductibles, copayments, and coinsurance.



[Clear all](#)

### Additional savings

☐ [Insulin savings](#)

### Carriers

☐ AETNA MEDICARE

☐ Anthem Blue Cross and Blue Shield

☐ Humana

☐ Medical Mutual of Ohio

☐ MediGold

☐ Molina Medicare Choice Care (HMO)

☐ Wellcare By Allwell

### Plan subtypes

☐ HMO

☐ HMOPOS

☐ LPPO

☐ PFFS

☐ PPO

☐ PDDO



★★★★☆ [Medicare Star Rating](#)

Medical Deductible  
**\$0**

Maximum Annual Out Of Pocket  
**\$5,500**

Monthly plan premium  
**\$0.00**

[Plan details](#)

[Add to cart](#)



### Molina Medicare Choice Care (HMO)

☐ [Add to compare](#)

Plan too new to be measured

[Medicare Star Rating](#)

Medical Deductible  
**\$0**

Maximum Annual Out Of Pocket  
**\$7,550**

Monthly plan premium  
**\$0.00**

[Plan details](#)

[Add to cart](#)



### Wellcare No Premium (HMO)

☐ [Add to compare](#)

★★★★☆ [Medicare Star Rating](#)

Medical Deductible  
**\$0**

Maximum Annual Out Of Pocket  
**\$7,550**

Monthly plan premium  
**\$0.00**



## Preferences



Enter preferences to estimate your annual cost.



**Get Started**



**Health**



**Providers**



**Prescriptions**



**Pharmacy**

**Add preferences**

**Plan details**

**Add to cart**



### MediGold Essential Care (HMO)

★★★★☆ [Medicare Star Rating](#)

☐ Add to compare

Medical Deductible  
**\$0**

Maximum Annual Out Of Pocket  
**\$4,500**

Monthly plan premium  
**\$0.00**

Add-on coverage

**Plan details**

**Add to cart**



### Wellcare No Premium Medicare (HMO)

★★★★☆ [Medicare Star Rating](#)

☐ Add to compare

Medical Deductible  
**\$0**

Maximum Annual Out Of Pocket  
**\$3,450**

Monthly plan premium  
**\$0.00**

**Plan details**

**Add to cart**





# Get Started

## ● Get Started

- ☐ Health
- ☐ Providers
- ☐ Prescriptions
- ☐ Pharmacy
- ☐ Other Preferences

[Go to plans >](#)

### \*ZIP code

43065

County  
Delaware, OH [Edit](#)

These optional questions help us estimate your potential costs.

### What coverage type are you interested in? (Optional)



Medical only



Prescription  
drug



Medical and  
prescription  
drug



I don't know

# Providers

Add your providers to see which plans cover your doctor, specialist, urgent care or hospital. Choose the exact location for your provider and if you see your provider at multiple locations, add all the locations at which you see them. Network status can vary for a provider based on the location.

☒ Get Started

☒ Health

☒ Providers

☐ Prescriptions

☐ Pharmacy

☐ Other Preferences


[Go to plans >](#)

\*ZIP code

43065

Provider name

Search doctor or facility

 Search

☒ Doctors and other professionals

☒ Facilities (hospitals, clinics and urgent care)

1

**Dr. Charles W  
Mason**

*Family Medicine*  
8530 Northbluff Ln  
Powell, OH 43065

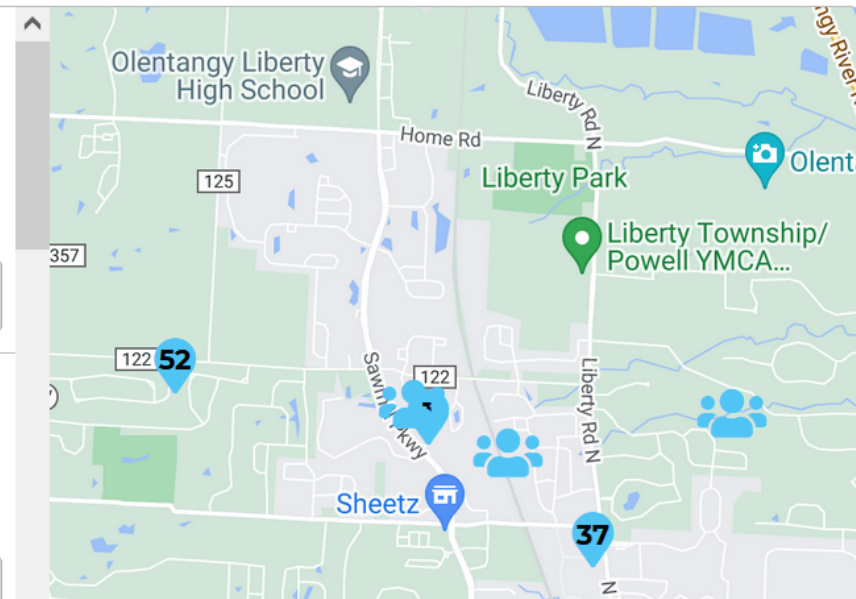
Add provider

2

**Caitlin Rose Grady**

*Nurse Practitioner*  
70 Clairedan Dr  
Powell, OH 43065

Add provider





## Prescriptions

Add your prescriptions to see how each plan provides coverage.



Start adding drugs

OR

### Connect to MyMedicare.gov

The easy and secure way to download all current prescriptions.

MyMedicare.gov

✓ Get Started

✓ Health

✓ Providers

● Prescriptions

○ Pharmacy

○ Other Preferences

[Go to plans >](#)

**You are leaving site**



Are you sure you want to continue to log into MyMedicare.gov?

Connecture, Inc. is a trusted entity of Integrity Marketing Group. By allowing Connecture, Inc. access to your drug list, you will be able to download your drugs to our site and be able to find a plan that covers them that much quicker.

Review Connecture's [privacy policy](#) and [terms and conditions](#) relating to the download of the prescriptions.

**Cancel**

**Continue**

See how Medicare is responding to Coronavirus

Learn more

## Log in

No account? Get a more personalized experience – [create an account now.](#)

USERNAME

[Forgot username?](#)

PASSWORD

 Show

[Forgot password?](#)

Log in

# Pharmacy

Drug costs vary based on the pharmacy you use. Select multiple pharmacies to compare estimated drug costs for all available plans.

✓ Get Started

✓ Health

✓ Providers

✓ Prescriptions

● Pharmacy

○ Other Preferences

[Go to plans >](#)

\*ZIP code

43065

Pharmacy name

Pharmacy name

[Search](#)

1

**CVS Pharmacy  
#05457**

3488 Seldom Seen Rd  
Powell, OH 43065

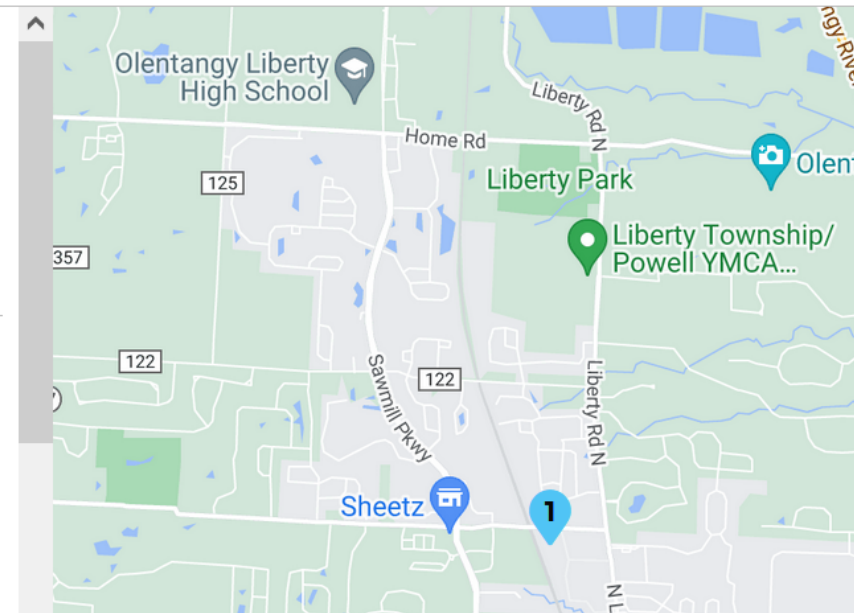
[Add pharmacy](#)

2

**Giant Eagle  
Pharmacy #6527**

4000 West Powell Road  
Powell, OH 43065

[Add pharmacy](#)





## Other Preferences

Page 1 of 2

✓ Get Started

✓ Health

✓ Providers

✓ Prescriptions

✓ Pharmacy

● **Other Preferences**

[Go to plans >](#)

Plans in your area cover these chronic conditions. Select any that may apply:

☐ Cardiovascular disorders

☐ Chronic heart failure

☐ Diabetes

[< Previous](#)

[Skip >](#)

[Continue](#)

# Other Preferences

Page 2 of 2

✓ Get Started

✓ Health

✓ Providers

✓ Prescriptions

✓ Pharmacy

● **Other Preferences**

Select all of the benefits that are important to you (Optional, click "Continue" without answering to Skip):

☐ Hearing

☐ Vision

☐ Dental

☐ None of these / do not wish to answer

[Go to plans >](#)

[< Previous](#)

[Continue](#)





### Anthem MediBlue Extra (HMO)

☐ Add to compare

★★★★☆ [Medicare Star Rating](#)

Medical Deductible  
**\$0**

Maximum Annual Out Of Pocket  
**\$7,550**

Monthly plan premium  
**\$22.00**

Add-on coverage 



[Plan details](#)

[Add to cart](#)

#### Providers

No provider data for  
this carrier

[Total est. cost](#)

**\$257**

Effective Sep 2022



### HumanaChoice H5216-285 (PPO)

☐ Add to compare

★★★★☆ [Medicare Star Rating](#)

Medical Deductible  
**\$0**

Maximum Annual Out Of Pocket  
**\$5,300**

Monthly plan premium  
**\$0.00**

Add-on coverage 

[Plan details](#)

[Add to cart](#)

## Benefits



### Medical Coverage

Medical Deductible	<b>\$0.00</b>
In-Network Maximum Out Of Pocket	<b>\$7,550.00</b>
Doctor Office Visits	<b>In-Network: \$0.00 copay</b>
Specialist Office Visit	<b>In-Network: \$40.00 copay</b>
Inpatient Hospital Care	<b>In-Network: Days 1-7: \$310.00 per day, per admission / Days 8-90: \$0.00 per day, per admission</b>
Skilled Nursing Facility (SNF)	<b>In-Network: SNF Days 1 - 20: \$0.00 per day / Days 21 - 100: \$188.00 per day</b>
Home Health Care	<b>In-Network: \$0.00 copay</b>

## Pharmacy Coverage <sup>?</sup>

Prescription Deductible	<b>\$480.00</b>
Pharmacy Deductible Drug Tier Exclusions	<b>\$0 Deductible on Tier(s) 1, 6; \$480 Deductible on Tier(s) 2, 3, 4, 5</b>
Initial Coverage Limit	<b>\$4,430.00</b>

### **One Month Supply (Retail) Preferred Pharmacy**

Preferred Generic	<b>\$0.00</b>
Generic	<b>\$7.00</b>
Preferred Brand	<b>\$47.00</b>
Non-Preferred Drug	<b>\$95.00</b>
Specialty Tier	<b>25%</b>

## Preferences



### Provider

[Add/edit providers list](#)

Search Provider

[Provider directory](#)



### Prescriptions

[Add/edit prescription list](#)

Search Prescriptions

[Prescription directory](#)



### Pharmacy

[Add/edit pharmacy](#)

Search Pharmacy

[Pharmacy directory](#)



### Other Preferences

[Add/edit other preferences](#)

## Optional add-on coverage<sub>(available in cart)</sub>



Dental	<div>Preventive Dental Package</div> <div><b>\$14.00</b></div> <div><a href="#">View details</a> ▼</div>
Dental and Vision package	<div>Enhanced Dental and Vision Package</div> <div><b>\$42.00</b></div> <div><a href="#">View details</a> ▼</div>
	<div>Dental and Vision Package</div> <div><b>\$27.00</b></div> <div><a href="#">View details</a> ▼</div>

Plan: H3655-041-000

Limitations, copayments, and restrictions may apply. See above or contact the plan for more details.

\*Enrollee must continue to pay the Medicare Part B premium.

You may be able to get Extra Help to pay for your prescription drug premiums and costs. To see if you qualify for extra help, call:

- 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. 24 hours a day, 7 days a week.
- The Social Security Office at 1-800-772-1213. TTY users should call 1-800-325-0778. Monday through Friday, 7 a.m. to 7 p.m.
- Your State Medicaid Office.

Costs	
Plan Premium	<b>\$22.00 monthly</b>
Est. drug cost Based on 0 drugs <a href="#">Add/edit</a>	<b>\$0 partial year</b>
Health cost Estimated medical costs based on age 65-69 and Generally healthy. <a href="#">Add/edit</a>	<b>\$169 partial year</b>

**Anthem MediBlue Extra (HMO)**

★★★★☆ [Medicare Star Rating](#)

Monthly plan premium  
**\$22.00**

**Add to cart**

# My cart

## Medicare Advantage Prescription Drug Plan



Anthem MediBlue Extra (HMO)

Monthly plan premium

[View details](#) | [Change plan](#) | [Remove plan](#)

**\$22.00**

### Optional add-on coverage

#### Dental

Preventive Dental Package	<a href="#">View details</a> ▼	\$14.00	<button>Add</button>
---------------------------	--------------------------------	---------	----------------------

#### Dental and Vision package

Dental and Vision Package	<a href="#">View details</a> ▼	\$27.00	<button>Add</button>
Enhanced Dental and Vision Package	<a href="#">View details</a> ▼	\$42.00	<button>Add</button>

**Total monthly plan premium \$22.00**

## Enrollment information



You will now be redirected to the carrier's form to complete your enrollment in Anthem MediBlue Extra (HMO). Click "Continue" to be redirected.

Close

Continue



1

Contact Info

2

Benefit Info

## Contact Information

Use the form below to apply to the plan. You'll be able to review your information and make changes before you submit your complete application.

Please contact the plan directly if you need information in another language or format (Braille).

Fields marked with an asterisk (\*) are required

## Personal Information

Please enter your personal information in the spaces provided.

First Name\*

Middle Initial

TIMOTHY SHOOK  
(614) 763-2259  
TIM.SHOOK@CORNERSTONESENIORMARKETING.COM

When you call, give the agent your personal code so they can pick up where you left off.

**JJYQM5C78A**

×

4

Review & Submit

Shopping cart

them

Medicare Advantage  
Prescription Drug  
Plan

Anthem MediBlue Extra  
(HMO)

**\$22.00**

**Total monthly plan  
premium**

**\$22.00**

[Anthem MediBlue Extra  
\(HMO\)](#)

[Anthem MediBlue Extra  
\(HMO\)](#)

# Filling in the Gaps for your client!

Easy to use technology  
to show client how to  
reduce or eliminate out  
of pocket expenses

Retain clients by adding  
additional policies

Quote, Enroll for  
Dental, Final Expense  
and Hospital Indemnity

**MED  
APP**

Easily quote & enroll the largest selection  
of MA/PDP plans.

[MedicareAPP](#)**MED  
LINK**

Efficiently track, quote, & enroll key  
MA/PDP plans.

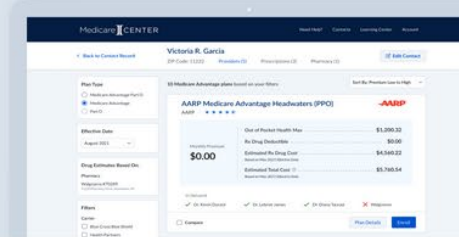
[MedicareLINK](#)**CSG  
APP**

Quote, compare, and research plans by  
location, carrier, features, or product

[CSG APP](#)

## A New Way to Enroll Clients

Quote and enroll directly from the CRM with the new, updated  
MedicareCENTER.

[View Contacts](#)

The screenshot displays the MedicareCENTER CRM interface for a client named Victoria R. Garcia. The interface includes a sidebar with navigation options like 'Back to Contact Record', 'Plan Type', 'Effective Date', and 'Drug Estimates Based On:'. The main content area shows a list of 'AARP Medicare Advantage Headwaters (PPO)' plans. A summary table on the right provides key financial details:

Plan	Out of Pocket Health Max	No Drug Deductible	Estimated Rx Drug Cost	Estimated Total Cost
AARP Medicare Advantage Headwaters (PPO)	\$1,000.00	\$0.00	\$4,540.00	\$5,540.00

At the bottom, there are checkboxes for 'Enroll', 'Enroll Now', and 'Enroll Later', along with a 'Plan Details' button.

Welcome back, Tim!

Support

My Account

Tools



Medicare Supplement

Run Quote



E-Applications

View Active



Medicare Advantage / PDP

Run Quote



Medicare Advantage v2

Run Quote



Final Expense Life

Run Quote



Hospital Indemnity

Run Quote



Dental / Vision

Run Quote



Market Pulse

Search Files



Market Edge

Run Search



Document Locker

View Files



eSOA Document Signing

View List



Client Manager

View Clients

[← Quote Results](#)[+ Fill the Gaps](#)[Print / Save](#)

## Plan Details

Medicare Advantage (with Drug Coverage)

[FRANKLIN, OH](#) [Plan Year 2022](#)[Humana Gold Plus H6622-013 \(HMO\)](#)**Health + Drug Coverage****Humana** H6622-013-000

Star Rating: ★★★★★

Monthly Premium: **\$0.00 /mo**Health Maximum Out-Of-Pocket: **\$4,500 In-network /yr**

Overview

[Benefits & Costs](#)[Rx Drug Coverage & Costs](#)[Carrier Resources](#)

### Overview

Plan:	<b>Humana Gold Plus H6622-013 (HMO)</b>	Annual Health Deductible:	\$0
Contract ID:	H6622-013-000	Annual Drug Deductible:	\$0 <i>Applies to 1, 2, 3, 4, 5</i>
Star Rating:	★★★★★	Initial Coverage Limit:	\$4,430.00
Type:	HMO	Out-of-Pocket Limit (Drug):	\$7,050.00
Part-B Reduction:	No	Max Out-of-Pocket (Health):	\$4,500 In-network
County:	FRANKLIN	Primary Physician Copay:	\$0 copay
Premium:	\$0	Specialist Copay:	\$35 copay per visit



← Quote Results

📄 Fill the Gaps

🖨️ Print / Save

## Plan Details

Medicare Advantage (with Drug Coverage)



FRANKLIN, OH Plan Year 2022

Humana Gold Plus H6622-013 (HMO)

Health + Drug Coverage

Monthly Premium: **\$0.00 /mo**

**Humana** H6622-013-000

Star Rating: ★★★★★☆

Health Maximum Out-Of-Pocket: **\$4,500 In-network** /yr

Overview

Benefits & Costs

Rx Drug Coverage & Costs

Carrier Resources

## Benefits & Costs

MEDICARE ADVANTAGE

**Humana Gold Plus H6622-013 (HMO)**

Humana

**\$0.00**

HOSPITAL INDEMNITY

**Protection Series - Flex Daily**

Continental Life Insurance Company of Brentwood, Tennessee (Aetna)

**\$31.35**

## Highlighted Benefits

### Inpatient Hospital

\$375 per day for days 1 through 5, \$0 per day for days 6 through 90, \$0 per day for days 91 and beyond

Hospital Confinement Benefits:

\$380 / 5 Day (+ \$31.35)



365 Day Lifetime Max



MEDICARE ADVANTAGE

**Humana Gold Plus H6622-013 (HMO)**

Humana

**\$0.00**

\$0-350 copay per visit

**Skilled Nursing Facility**

\$0 per day for days 1 through 20, \$184 per day for days 21 through 100

**Rehabilitation Services**

\$10-40 copay for Occupational Therapy Visit. \$10-40 copay for Physical Therapy And Speech And Language Therapy Visit

HOSPITAL INDEMNITY

**Protection Series - Flex Daily**

Continental Life Insurance Company of Brentwood, Tennessee (Aetna)

**\$31.35**

Outpatient Surgical Benefits:

- Select Option - ▾

1 Procedure Yearly Max

Skilled Nursing Facility Benefits 1:

- Select Option - ▾

Days 1-20

Skilled Nursing Facility Benefits 2:

- Select Option - ▾

Days 21-100

Skilled Nursing Facility Benefits 3:

- Select Option - ▾

Days 1-100

Outpatient Rehabilitation Benefits:

- Select Option - ▾

Physical Therapy



# Market Research Tools



MED  
APP

Easily quote & enroll the largest selection of MA/PDP plans.

[MedicareAPP](#)

MED  
LINK

Efficiently track, quote, & enroll key MA/PDP plans.

[MedicareLINK](#)

CSG  
APP

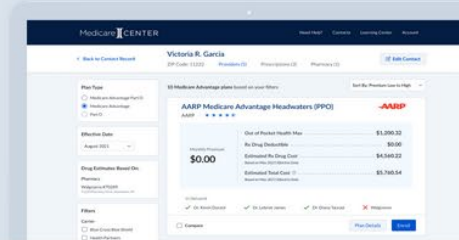
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[CSG APP](#)

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Run Quote



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Medicare Advantage / PDP

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Final Expense Life

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eSOA Document Signing

View List



Client Manager

View Clients

Compare Quotes

Universal Compare Quotes

EXPORT

ADJUST VIEW

Expand Quotes

Apply Discounts

Annual Rate

Market Analytics

Select Plans

Underwriting Filters

APP. HEALTH QUESTIONS

Add Condition(s)

FILTER QUOTES

Containing HH Discounts

Without Policy Fee

Include Filters

OPTIONS

Options

Navigation

Client/Label:	Zip	COLUMBUS, OH	Age	Gender	Tobacco	Plan	Effective Date	Sort By	
Test Shook	43229	Franklin	65	Male	Non-tobacco	G	2022-10-01	Price	Get Quote

\$115.77 /mo		Erie Family Life Insurance Company							
HH Discount 5.0%		Parent: Erie Ins Grp AM Best Rating: A (Outlook Stable) Rate Type: Attained age				Plan: G S&P Rating: n/a Rating Class: n/a		Years in Market: 4 Effective Date: 03/01/2022	
Quote Options									

\$116.33 /mo		Ace Property And Casualty Insurance Company							
HH Discount 7.0%		Parent: Chubb Limited AM Best Rating: A++ (Outlook Stable) Rate Type: Attained age				Plan: G S&P Rating: n/a Rating Class: n/a		Years in Market: n/a Effective Date: 09/12/2022	
Policy Fee \$25.00									
Quote Options									

\$116.58 /mo		Elips Life Insurance Company – Lumico Medigap Solutions							
HH Discount 7.0%		Parent: Swiss Re Grp AM Best Rating: A (Outlook Stable) Rate Type: Attained age				Plan: G S&P Rating: n/a Rating Class: n/a		Years in Market: 1 Effective Date: 08/01/2022	
Policy Fee \$25.00									
Quote Options									

\$119.67 /mo

## Mutual Of Omaha Insurance Company



HH Discount

7.0%

Parent: **Mutual Of Omaha Grp**

AM Best Rating: **A+** (Outlook Stable)

Rate Type: **Attained age**

Plan: **G**

S&P Rating: **A+**

Rating Class: **n/a**

Years in Market: **56**

Effective Date: **09/01/2021**

### Age Increases

Age	Monthly Amount	Increase
66	\$ <b>119.67</b> /mo	0.0%
67	\$ <b>119.67</b> /mo	0.0%
68	\$ <b>122.79</b> /mo	2.6%
69	\$ <b>125.89</b> /mo	2.5%
<b>Average</b>		<b>1.3%</b>

### Increase History

Date	Amount
09/01/2021	2.0%
<b>Average</b>	<b>2.0%</b>

### Market Data

	National	State
Lives	312,366	23,778
Premium	\$737,077,127	\$27,283,290
Loss Ratio	75.80%	76.88%
Market %	2.18%	1.94%



Year 2021



Quote Options ▾

Apply Now!

Add To Cart

6

Welcome back, Tim!

Support

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Medicare Supplement

Run Quote



E-Applications

View Active



Medicare Advantage / PDP

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Medicare Advantage v2

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Final Expense Life

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Hospital Indemnity

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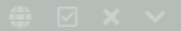


Client Manager

View Clients

\$0.00 /mo

**Aetna Medicare** — Aetna Medicare Value Plan (PPO)



Max Out of Pocket

\$5,500

Plan: **Aetna Medicare Value Plan (PPO)**

ID: **H5521-089-000**

Star Rating: ★★☆☆☆

Drug Deductible: **\$ 0.00**

County: **Franklin**

Drug Benefit: **n/a**

Part B Reduction: **No**

Gap Coverage: **Yes**

Plan Type: **LOCAL PPO**

### County Penetration

Year	Month	County	Eligible	Enrolled	Penetration
2022	July	FRANKLIN	190,904	103,157	54.04%
2022	June	FRANKLIN	190,524	102,721	53.91%
2022	May	FRANKLIN	190,083	102,406	53.87%

### Company Enrollment

Year	Month	County	Enrolled	Penetration
2022	July	FRANKLIN	22,692	11.89%
2022	June	FRANKLIN	22,655	11.89%
2022	May	FRANKLIN	22,649	11.92%

Quote Options ▾

15



New Call recording  
requirements

# Background

- CMS updated their Medicare marketing rules that apply to MA plans, PDP plans and MAPD plans.
- Redefined Third-Party-Marketing-Organizations – TPMO definition
- Require Sales Calls with Beneficiaries to be recorded in their entirety
- Require TPMO's conducting lead generating activities inform the beneficiary that their information will be provided to a licensed agent for future contact or being transferred to a licensed agent.
- All sales calls with beneficiaries and TPMO's must be recorded and retained for 10 years



# What's Coming to meet these new requirements!

1

Medicare Center will have call recording capability.

2

Medicare Center will have storage capability.

3

Stay tuned for upcoming multiple training sessions on how to use this new technology.

MED  
APP

Easily quote & enroll the largest selection of MA/PDP plans.

[MedicareAPP](#)

MED  
LINK

Efficiently track, quote, & enroll key MA/PDP plans.

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CSG  
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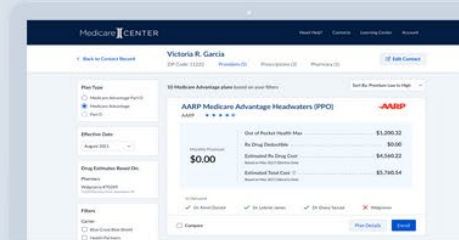
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Thank You!