



The 3-30-60-90 Day Conversation Guide

How to Communicate Effectively and Efficiently to Drive Client
Retention with Humana

Humana®

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Welcome to *The 3-30-60-90 Day Conversation Guide*

The 3-30-60-90 Day Conversation Guide helps you retool your communications approach to optimize your time, improve client relationships and enhance your reputation. Learn how to create more efficient client communications by simultaneously leveraging multiple communications channels. Deliver the information members need and want while cementing your role as a trusted advocate and resource. Let's get started.

Retention as a sales strategy

It's typically easier to retain the clients you already have than find new ones. Plus, existing clients can be your number one resource for referrals. Most Americans say that a word-of-mouth recommendation from a friend or family member makes them more likely to purchase a product or service.¹ The possibilities for referrals multiply as you convert more prospects.

Want a deeper dive into client retention? Listen to this [podcast](#) or read this [article](#).

A more human way to healthcare

Taking good care of your clients helps Humana make healthcare more human. You build relationships and find solutions to your clients' needs. You show your clients you care not just about their plan renewal but also about them and their well-being. You show them they matter as people first, clients second.

Wondering more about human care?

Watch this [video](#) announcing Humana's human care platform.



Read all about it.

[How We Care](#)

[Let's Talk about Human Care](#)

[Human Care by the Numbers Infographic](#)

[Five Difficult Scenarios. Five Human Care Solutions.](#)

[How Emotional Intelligence Could Make Your Job Easier](#)

¹<https://experiencematters.blog/category/roi-of-customer-experience/>

Client retention compliance

Say the right things every time you communicate.

Relationships are built on trust, so you have to make sure your client interactions online and offline are compliant. Keep [CMS regulations](#) top of mind.

No cross-selling permitted per CMS regulations!

Agents are prohibited from marketing non-healthcare related products during any MA or Part D sales activity per CMS. Any such activity is considered cross-selling and is prohibited.

If the member asks about “non-healthcare related” products during one of these interactions, you must advise that you may not discuss non-healthcare products during this interaction per CMS. You can ask them to call you back or schedule a separate appointment.

Medicare Advantage Open Enrollment CMS Restrictions (January 1–March 31)

IMPORTANT—Agents are prohibited from marketing the ability to make plan changes during the Medicare Advantage Open Enrollment Period (MA OEP). If the member indicates dissatisfaction with the plan they’ve selected AND it’s within the MA OEP of January 1–March 31, you may discuss all applicable election periods with the beneficiary, such as MA OEP or other SEPs, if the member qualifies for an SEP. The beneficiary must initiate the conversation and indicate dissatisfaction with their current plan. This applies to MA plans only, because members with stand-alone PDP plans are not eligible to drop or switch during MA OEP.

Examples of the beneficiary initiating include, but are not limited to:

“I really don’t like this PPO plan I selected. Can I pick another plan?”

“Do I have to keep this plan until next October or do I have a chance to change before then?”

“Can you tell me what other plans you have in my area?”

Client communication for a digital-first world

What communication can do for you

Effective client communication helps you realize your business goals.

- ✓ Add value
- ✓ Earn more referrals
- ✓ Empower clients
- ✓ Reduce reactivity
- ✓ Optimize time, energy and resources
- ✓ Build your reputation
- ✓ Increase engagement, loyalty and retention

Best practices

Effective and successful communications should be:

- ✓ Timely
- ✓ Transparent
- ✓ Understandable
- ✓ Relevant
- ✓ Credible
- ✓ Empathetic

Don't forget to capture this information in your CRM:

- ✓ Phone number (specify landline or mobile)
- ✓ Mailing address
- ✓ Email address
- ✓ Preferred communication method
- ✓ Preferred language

Communicate compliantly when it matters to clients in a way that they can understand.

[That includes their preferred language](#) and their preferred communication method. Be sure to ask for their email address. An email is just as important as a mailing address. It's another way you can send important information that's timely and relevant.

You will want to be as proactive as possible and use pre-approved materials from the Marketing Resource Center.

Real-world example

Situation	What to do	MRC materials to use	What channels to use
Annual Notice of Change	Set up a virtual event/conference call to review plan changes with members.	<ul style="list-style-type: none">• Annual Notice of Change virtual event invitation• ANOC Reorientation• Switch and Save• I Can Help	<ul style="list-style-type: none">• Email• Direct mail• Virtual event/conference call• One-on-one calls as needed

Develop a communications plan

In order to develop a communications plan, you have to ask these three questions:

1. Who do I want to reach?
2. What do I want to tell them?
3. How will I reach them?

Based on the answers to these questions, you can then develop a plan of action to start communicating with your clients. The best way to approach communications is through a multi-channel approach so that key messages get in front of members several times.

BONUS TIP

Use a Customer Relationship Management (CRM) tool such as My Humana Business Center. Get trained on My Humana Business Center [here](#).

When capturing information about members, be sure to do the following:

1. Track a client's preferred communication method(s) so you can keep them updated and informed in ways that best fit their needs.
2. Confirm their preferred language and send communications in their language of choice.

Communications channels

Communications channels can be split into two main categories, traditional and digital, as shown below.

Traditional	Digital
<ul style="list-style-type: none">•Phone (one-on-one or conference call)•Direct mail•Face-to-face meetings/events²	<ul style="list-style-type: none">•Email•Social media³•Virtual meetings/events•Website (Partner Agents only)

²When safe to do so per Centers for Disease & Prevention Control, Humana, state and local guidelines.

³Only for Agents who have completed the mandatory [Social Media Training](#) and adhere to Humana [social media policies](#) and the Centers for Medicare & Medicaid Services' [Medicare Communications & Marketing Guidelines](#).

When to use traditional communications channels

	Phone	Direct Mail	Face-to-Face Meetings/Events
Best for	<ul style="list-style-type: none"> • Developing relationships • Complicated conversations • Discussing private/personal information 	<ul style="list-style-type: none"> • Mass communication • Sending documents and other important communication 	<ul style="list-style-type: none"> • Developing relationships • Complicated conversations • Discussing general Medicare information (group event) • Discussing private/personal information (one-on-one meeting only)
Pros	<ul style="list-style-type: none"> • Familiar • Easy to use • Can do remotely 	<ul style="list-style-type: none"> • Reliable 	<ul style="list-style-type: none"> • See nonverbal communication and cues
Cons	<ul style="list-style-type: none"> • No visual cues 	<ul style="list-style-type: none"> • Expense 	<ul style="list-style-type: none"> • Transportation
Special considerations	<ul style="list-style-type: none"> • Speak slowly • Repeat back what you hear • Confirm comprehension • Read this article for more tips 	<ul style="list-style-type: none"> • Be targeted with what you send 	<ul style="list-style-type: none"> • Health and safety • For group event: <ul style="list-style-type: none"> - Planning - Public speaking • Do not discuss private or personal information in a group setting • Get in-person event best practices and tips at Humana MarketPoint University

Learn about Humana's pre-approved traditional marketing assets in the [Marketing Resource Center](#).

When to use digital communications channels

	Email	Social Media ⁴	Virtual Meetings/Events
Best for	<ul style="list-style-type: none"> • Responding to requests for documents and/or links • Communicating to a group 	<ul style="list-style-type: none"> • Deepening connections • Attracting new prospects • Creating dialogue 	<ul style="list-style-type: none"> • Simulating face-to-face meeting • Developing relationships • Complicated conversations • Discussing general Medicare information (group event) • Discussing private/personal information (one-on-one meeting only) • Can screen share
Pros	<ul style="list-style-type: none"> • Effective • Efficient • Can be one-on-one or used for mass communications 	<ul style="list-style-type: none"> • Fun • Engaging • Social • Cost-effective 	<ul style="list-style-type: none"> • Works for both one-on-one and group meetings • Efficient • Effective
Cons	<ul style="list-style-type: none"> • Recipient must have email 	<ul style="list-style-type: none"> • Must consistently post in order to be effective 	<ul style="list-style-type: none"> • Technology barriers for participants: <ul style="list-style-type: none"> - Learning platform - Reliable Internet - Email address
Special considerations	<ul style="list-style-type: none"> • 81% of 60–69 year-olds own a smartphone and most use their phones to send and receive email and other messages⁵ 	<ul style="list-style-type: none"> • Take a deep dive into setting up your Facebook page and best practices with this playbook 	<ul style="list-style-type: none"> • Learn about video conference platform options here (Partner Agents only) • Discover how to video conference like a pro here • For Career Agents, WebEx is the only approved video conferencing platform

⁴Only for Agents who have completed the mandatory [Social Media Training](#) and adhere to Humana [social media policies](#) and the Centers for Medicare & Medicaid Services' [Medicare Communications & Marketing Guidelines](#).

⁵https://www.aarp.org/content/dam/aarp/research/surveys_statistics/technology/2019/2020-tech-trends-survey.doi.10.26419-2Fres.00329.001.pdf

Crafting and executing a communications plan

As stated earlier, to develop a communications plan, you have to ask who you're trying to reach, what you're trying to tell and how you're trying to reach them. The next step is developing a strategic plan so that you can target your communications, maximize your efforts and streamline your outreach.

From reactive to proactive

Based on Humana research, Agents field a high number of calls post-enrollment from clients, sometimes as many as 20–50 calls per week.⁶ Let's compare reactive versus proactive communication side by side.

Reactive	Proactive
In response to (after)	✓ Preventative (before)
Passive	✓ Active
Often disjointed or siloed	✓ Cohesive
Tends to be one-sided	✓ More of a dialogue
Inefficient	✓ Efficient
Ineffective	✓ Effective
Lack of purpose	✓ Purposeful
Lack of control	✓ Increased control

You want to be as proactive as possible and minimize how reactive you have to be when it comes to communications. Of course, you will encounter unforeseeable circumstances. When those situations arise, try to take a step back and figure out what you can do to become more proactive.

⁶Humana Field Agent Journey Research Findings - Medicare, MarketBridge, April 9, 2020

Find the common denominator

Your time is limited, so it's imperative that you use it wisely. You'll want to find ways to communicate with the most clients in the least amount of time. Start with the topics that relate to the majority of clients and use one-to-many communications channels. Here are some thought starters.

Use MRC materials to share information with members about:

- ☐ Member orientation
- ☐ Plan benefits
- ☐ Humana programs



*Only for Agents who have completed the mandatory [Social Media Training](#) and adhere to Humana [social media policies](#) and the Centers for Medicare & Medicaid Services' [Medicare Communications & Marketing Guidelines](#).

⁷When safe to do so per CDC, Humana, state and local guidelines.

Developing a multi-channel approach

The “Rule of Seven” is a well-known advertising formula that says consumers need to hear a message seven times before they will take action. It stands to reason that the more familiar someone is with something, the more likely they will be to take action. It’s important to note, however, that overexposing people to messages can have a negative effect where they tune out the message entirely. So, what do you as an Agent do to communicate with your clients? Determine which channel would be most effective



based on the content and audience, and use that channel to communicate the message. For example, if a member is comfortable using email and has expressed a preference for it, you could send them a flyer about the HFC benefit that is on their plan. On the other hand, a member who is not as comfortable with technology may prefer a phone call from you to explain how this benefit works.

Real-world example

Situation	What to say	When to say it	What channels to use
Healthy Foods Card member orientation	Explain how the Card works: <ul style="list-style-type: none">• Activation• Usage• Participating stores• Approved foods	Soon after enrollment or right after they have received their Card	Use pre-approved content from the MRC to communicate through: <ul style="list-style-type: none">• Email or• Direct mail or• Social media* Meet with members through: <ul style="list-style-type: none">• Virtual event/ conference call• One-on-one calls as needed

*Only for Agents who have completed the mandatory [Social Media Training](#) and adhere to Humana [social media policies](#) and the Centers for Medicare & Medicaid Services' [Medicare Communications & Marketing Guidelines](#).

Multilingual communications

Communicating in a member's preferred language is an essential part of delivering understandable, relevant, transparent and empathetic communications. Be sure to confirm each member's language preference or suggest they do so on their own through their MyHumana account. When members receive communications in their preferred language, everyone wins. Members have the information they need. You spend less time on troubleshooting and customer service concerns. Humana can make better decisions about staffing, marketing and translation services.

Here's how a Career or DMS Agent can capture and set a member's language preference:

1. Ask what their preferred language is at the time of enrollment.
2. You can set a member's preferred language by accessing Hi and selecting the preferred language.
 - a. Agents can gain access to this functionality by going to:
 - i. Go/RFA
 - ii. Choose Humana Self-Service (HSS) Business Functions for the request form
 - iii. When prompted for a business function, enter 2107
 - iv. Check the box for Prod (production access)
 - v. Add to cart
 - vi. Check out

Partner or External Call Center Agents should encourage members to use MyHumana or call Humana Customer Care to change their language preference. For help with translation services, members should call Humana Customer Care. Details for both methods follow.

Here's how a member can change their language preference on their own:

1. Sign in to their MyHumana account
 - a. Go to My Profile and select Communication Preferences
 - b. Choose the types of communications and the language of those communications
2. Call Humana Customer Care at 1-800-457-4708 (TTY: 711), daily 8 a.m.–8 p.m., Eastern Time

Here's how a member can request a language preference change or translation services through Humana:

1. Call Humana Customer Care at 1-800-457-4708 (TTY: 711), daily 8 a.m.–8 p.m., Eastern time
 - a. Mandarin-speaking members, please call 1-800-558-9927 (TTY: 711) between 8 a.m.–8 p.m. Monday–Friday
 - b. Korean-speaking members, please call 1-800-433-4736 (TTY: 711) between 8 a.m.–8 p.m. Monday–Friday

Humana's post-enrollment tools

Humana understands that online tools can help you do your job more effectively and efficiently. That's why we've developed a suite of post-enrollment tools to help you better serve your clients from day one.

Marketing Resource Center (MRC)

Who: Career and Partner Agents who want to look and act like a professional marketer.

What: Your one-stop shop for all your marketing needs, complete with pre-approved, customizable and ready-to-use Humana-branded and agnostic marketing materials on a variety of topics, plans, benefits and campaigns. Simply upload your Book of Business (step-by-step upload instructions provided as part of the ordering process) and let Humana do the heavy lifting (so to speak) for you!

Traditional					Digital
Flyers	Postcards	Posters	Presentations	Free-standing inserts	HTML email templates
Ads	Brochures	Banners	Radio	Lockboxes	Social media* posts

When: Use whenever you need to communicate to members.

Where: Accessible via Vantage.

Why: Medicare marketing could be a full-time job. Humana's MRC makes it easy for you to do more with less time, energy and budget with beautifully-designed, compliant marketing materials you can put to use in a few clicks.

“Agents who use the MRC generate two times more sales than Agents who don't.”⁸

^{*}Only for Agents who have completed the mandatory [Social Media Training](#) and adhere to Humana [social media policies](#) and the Centers for Medicare & Medicaid Services' [Medicare Communications & Marketing Guidelines](#).

⁸Average Humana MA and CarePlus applications for Agents who were active and certified (as of June 3, 2019) and downloaded Medicare content from the MRC (Sept. 2018-May 2019) vs. average Humana MA and CarePlus applications for Agents who were active and certified and did not download Medicare content from the MRC.



Where do you want to go today?



Want to know about digital marketing?



ONE PAGERS
Read Time: 9 min
10 Ways to Video Conference Like a ...
New to video conferencing? Use this checklist for your next video-



PLAYBOOKS
Maximize Your Social Media Presence...
Learn how to build a Facebook presence.




ARTICLES
Read Time: 10 min
New to Digital Marketing and Virtua...
Understand the virtual sales

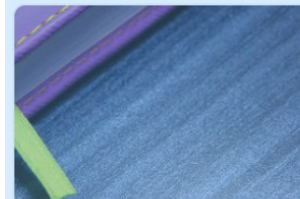
Want to know more about marketing in general?



ARTICLES
Read Time: 11 min
Five Can't-Miss Marketing Resource ...



HOW-TO VIDEOS
Watch Time: 2 minutes
Member Care Assessment Demo

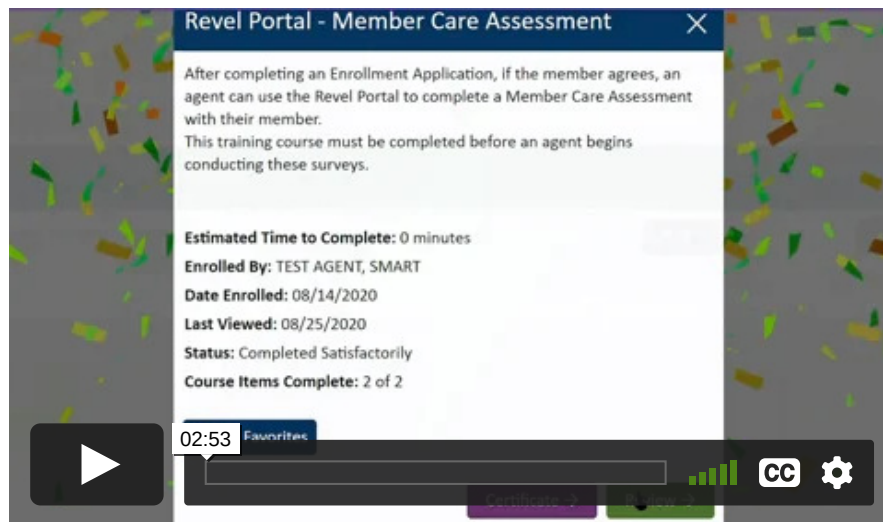


PLAYBOOKS
Bold Goal Whole Health Toolkit
Addressing the health needs of

Additional resources:

- [Humana's 2021 Sales Materials Catalogue and Strategy Guide](#)
- [Five Can't-Miss MRC Updates](#)
- [MRC Training Guide](#)
- [Humana MRC one-pager](#)
- [Humana Medicare Marketing 101](#)

Member Care Assessment



Who: Licensed, certified, contracted and Member Care Assessment-trained Agents give the survey to participating Humana members.

What: An optional, post-enrollment survey that helps Humana and Agents pinpoint members' needs and address social determinants of health like housing, transportation, food security, financial wellness, pharmacy access and social connection.

When: Complete it at point of sale or within five days of enrollment to earn a cash incentive (up to \$50) per completed survey. All compensation, including this incentive, is subject to the terms and conditions of the Agent's contract with Humana.

Where: Accessible via Vantage or the Revel platform.

Why: The Assessment helps Agents and Humana serve members' needs more quickly, as well as provide increased support and additional resources to help them live better, healthier, happier lives.

BONUS TIP

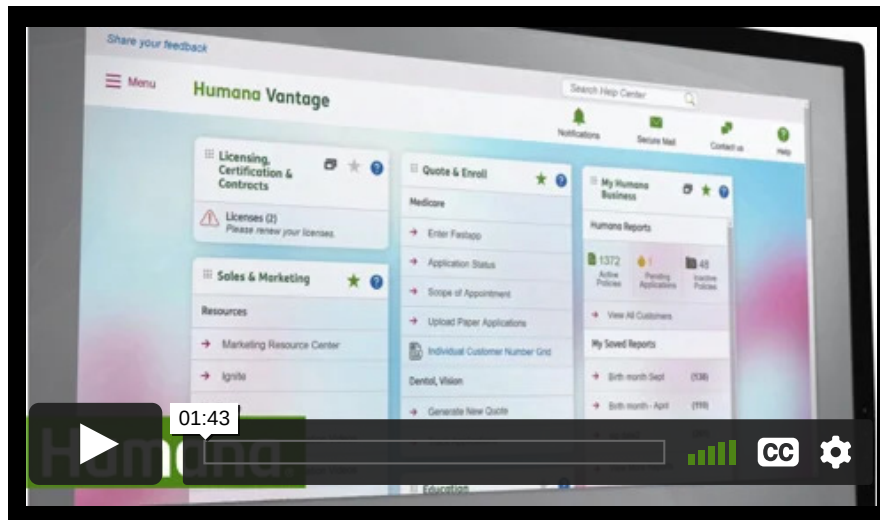
Use the [Bold Goal Whole Health Toolkit](#) to help members at risk for these social determinants of health:

- ✓ Food insecurity
- ✓ Transportation
- ✓ Housing
- ✓ Loneliness/social isolation

Get trained to perform the Member Care Assessment [here](#).

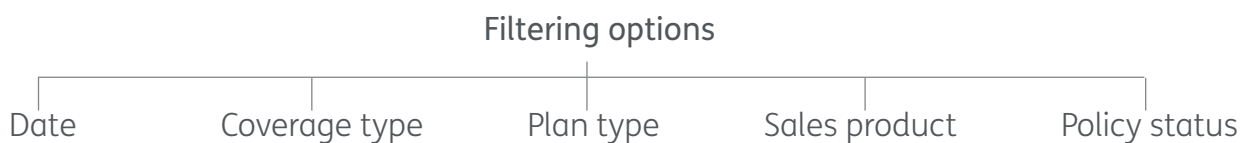
Compliance reminder: The survey is completely optional. Members' responses will not affect their premium or benefits in any way and they can stop the survey at any time. Do not pressure members into completing the survey if they do not feel comfortable doing so, as this is prohibited. Find more information on the Member Care Assessment in this [guide](#).

My Humana Business Center



Who: Agents who want real-time access—at any time—to their Humana Book of Business.

What: 24/7 access to your Humana Book of Business to view enrollment statuses and pull actionable reports.



Report options:

- ✓ Active policies
- ✓ Inactive policies
- ✓ In progress
- ✓ Recently deceased members
- ✓ Pended applications

When: Any time you need visibility into your Humana Book of Business during and after enrollment.

Where: Accessible via Vantage.

Why: Enhanced transparency, robust filtering and customizable reports help you to better engage with your clients.

BONUS TIP

Upload your exported reports to the **MRC** to send communications directly to your Book of Business.

Service Inquiries

The screenshot shows the 'View Inquiries' interface. On the left is a 'Filter Results' panel with a search bar, a 'Filters' section, and a 'Status' filter. The 'Status' filter has options: 'Select All', 'In Progress' (checked), 'Pending – Action Required' (checked), 'Cancelled', and 'Closed'. An 'Apply' button is at the bottom of the filter panel. On the right is a table of inquiries with columns: 'Case ID', 'Member Name', 'Inquiry Type', and 'Status'. A green button 'Create new inquiry' is at the top right of the table area.

Case ID	Member Name	Inquiry Type	Status
100017403211	Yvonne Stout	Enrollment Agent Action Requir...	Closed
100017402644	Robert Stout	Enrollment Agent Action Requir...	Closed
100017297382	Kathy McKi...	Enrollment Agent Action Requir...	Closed
100017256816	Suzanne Da...	Enrollment Agent Action Requir...	Closed
100017179455	STEVE SH...	Enrollment Agent Action Requir...	Closed
100017031148	Freida Glover	Enrollment Agent Action Requir...	Closed
100016320879	CHARLOTT...	Application Error Agent Action R...	Closed
100016157260	rebecca sor...	Enrollment Agent Action Requir...	Closed

Who: Agents who want to streamline customer service.

What: The Service Inquiries tool enables Agents to easily report customer service inquiries to Humana 24/7 and provides transparency into the status of the inquiry.

When: Use it whenever a concern with a member arises and you need Humana's help.

Some examples include:

- ✓ Claims
- ✓ Benefits
- ✓ Billing
- ✓ Provider changes
- ✓ Application errors
- ✓ Demographics changes
- ✓ Fulfillment (ID cards, ANOC, Welcome Kit, etc.)
- ✓ General

Where: Access it via Vantage or through the Consumer Profile in My Humana Business Center.

Why: The Service Inquiries tool helps Agents provide better, more streamlined customer service to existing and in-process members in a few clicks. Agents receive follow-up emails from Humana on the status of the inquiry as well as any further action needed by the Agent.

A new two-step 3-30-60-90 day approach

As discussed in the “[Client communication for a digital-first world](#)” section, you can optimize your communications to reach more members without making more phone calls. This year, we’re advocating for a new approach to help you be more strategic and proactive in your client outreach.



OLD WAY—Separate calls to individual members, often repeating the majority of the same information

NEW WAY



Step 1—Virtual events/conference calls with multiple members to share general, commonly needed information supplemented by email, direct mail and social media* posts



Step 2—One-on-one calls for private, personal information only

Knowing what to share in a one-to-many situation vs. one-to-one situation

Use this chart to know what type of information to share in which type of client situation.

	One-to-Many Communications	One-to-One Communications
Channel	<ul style="list-style-type: none">•Presentation (virtual or in-person)•Group conference/video call•Member event (virtual or in-person)•Group email•Bulk direct mail•Social media*	<ul style="list-style-type: none">•Individual phone/video call•Private email•Private direct mail (birthday card, handwritten note, personal letter, etc.)
What to share	General information that applies to members of a specific plan.	Specific information of a personal/private nature that applies to that individual

*Only for Agents who have completed the mandatory [Social Media Training](#) and adhere to Humana [social media policies](#) and the Centers for Medicare & Medicaid Services’ [Medicare Communications & Marketing Guidelines](#).

Two-step approach

Set the stage for a good working relationship. Establish yourself as an Agent who can be trusted, who knows their stuff, who puts their clients front and center. This two-step approach will help you maximize your outreach efforts, so you can connect with more members in less time while improving your value proposition and driving retention, loyalty and satisfaction.

Step 1: Host a virtual member event/conference call supplemented by additional outreach through direct mail, email and social media.*

Step 2: Follow up with one-on-one calls after the virtual event for items such as completing the [Member Care Assessment](#) if it was not done at the point of sale.

[Learn how to use multiple communications channels](#) to promote your event and continue the conversation with members after it.

	Old Way	New Way
Number of members to contact	50	50
Contact method	Phone	Virtual event, email, direct mail, social media,* phone
Time breakdown	45 minutes/call	6 hours—event prep/outreach 1 hour—event 3 hours—post-event outreach 10 minutes/client call
Total time required	37.5 hours	18.5 hours
Number of contacts/member	1	5+

Information for members with Author by Humana

[Download this guide](#) to learn more about engagement and retention for members in South Carolina with Author by Humana as part of their plans.

*Only for Agents who have completed the mandatory [Social Media Training](#) and adhere to Humana [social media policies](#) and the Centers for Medicare & Medicaid Services' [Medicare Communications & Marketing Guidelines](#).

Day 3

Day 3 is important for setting the tone for the rest of the member's experience. You can set things off right, right from the start.

Step 1: Virtual member event/conference call

What to review

Here's what you should discuss during your Day 3 virtual event/conference. Day 3 is the third day after the effective date of their plan.



1. Confirm members received their new member information and review what they should have gotten via mail or email depending on their communications preference:

✓ Enrollment Letters

After Humana receives a member's application, we send a Verification of Enrollment Letter to confirm the plan the member chose. This is sent by mail or email depending on the communication preference the member chose during enrollment. Once CMS approves the member's enrollment, Humana sends the member a Confirmation of Enrollment Letter (via mail or email) that gives them a high-level overview of how their plan works and when the plan will go into effect. There may be additional letters based on the member's plan (such as a Special Needs Plan) or if they are Low-Income Subsidy (LIS) eligible. Members can log in to their MyHumana account to view their new member documents and can update their communications preferences at any time.

✓ Welcome Kit and Policy (for Medicare Supplement members only)

After a member's application has been received and processed/accepted, Humana sends a Welcome Kit within 10 days that includes: Welcome Letter, Policy, Extra Services Brochure and a copy of the completed application. If the member was enrolled over the phone or online, they will receive all of the above plus: Outline of Coverage, Choosing a Medigap Policy Booklet and HIPPA Privacy Notice. If a member requested electronic communications, their Welcome Kit will be available through their MyHumana account.

Day 3 *continued*

✓ ID card and/or Benefits-at-a-Glance document

Members should receive a Humana ID card within seven to 10 days of enrollment. Encourage members to call our automated voice system to let us know they received their card. Once the member verifies their ID and ZIP code, the system will share some information on how they can get started with their plan.

A Benefits-at-a-Glance document (for non-Med Supp members only) will be included with the ID card. It provides an overview of key benefits and costs.

✓ Where and how to access plan documents

Members can access their plan documents in their secure MyHumana account under Coverage and then Documents and Forms. The first time they activate their account, they will be asked to set their communication preferences (mail or email). They will then be taken through some tasks they can complete once their plan starts. Once their plan is effective, they can access more MyHumana tools, including Find a Doctor, RxMentor, claims status and more.

✓ Payment coupon book

For members not using an ACH deduction or a recurring credit card payment, a coupon book is mailed with four business days of a processed enrollment after the application is approved.

✓ Well-Being Guide⁹

Onboarding can be confusing for some new members. But Humana wants to make it easier and simpler. That's why we're rethinking our 2021 Well-Being Guide. We're adding personalized messaging to meet members where they are on their journey and help them understand all their plan has to offer. Instead of a single booklet, we'll be sending out smaller guides 20, 40 and 80 days after their enrollment. This will be a great tool to supplement your 3-30-60-90 day check-ins while helping members understand and maximize their plan benefits.

If anyone is missing their information, have them contact you separately. Then use the Service Inquiries tool to report the missing documentation using the Fulfillment selection.

⁹Not available for Medicare Supplement plan policyholders.

2. Review what makes Humana different and Humana's more human way to healthcare.

✓ More than “just” an insurance company

Humana aims to lead healthcare innovations and community wellness. In addition to insurance, Humana provides primary care, home health care and pharmacy services. It supports grassroots, community health through its Bold Goal initiative. It gives back through the Humana Foundation and efforts like waiving COVID-19 testing costs for Medicare Advantage members. Humana has served Veterans and members of the military for over 20 years.



✓ The Humana value proposition

For 2021, 92% of Humana Medicare Advantage members are in 4-star plans and above. Humana's Value-Based Care Report details 29.2 percent fewer hospital admissions and 10.3 percent fewer emergency visits, compared to Original Medicare.¹⁰

✓ A more human way to healthcare

Humana makes healthcare more human by making it more personal, more caring and simpler. Humana understands that healthcare isn't a one-size-fits-all formula. Humana doesn't just say we care. We show members. By sending members washable masks so they can still visit the doctor. By getting access to more food for the members struggling to get the nutrition they need.

3. Help them understand what insurance is and how it works.

✓ What health insurance is and how it works

Health insurance is a type of insurance coverage that pays for some or all of your medical and surgical expenses in exchange for a monthly premium. Insurance aims to transfer financial risk from you to the insurance company. Because most people won't get sick or injured at the same time, the insurance company can manage the risk.

¹⁰https://digital.humana.com/VBCReport/VBC_Report_2020_digital.pdf

Day 3 *continued*

✓ Define common terms.

- **Premium:** the amount members pay to the insurance carrier every month
- **Copay:** a fixed amount members pay for a covered service such as visiting their primary care provider or getting an x-ray
- **Deductible:** the amount members pay for covered services before their insurance begins to pay
- **Coinsurance:** the percentage of costs for a covered service members pay after you've met the deductible
- **Maximum out-of-pocket costs:** the most members have to pay for covered services in a given year
- **Preferred cost-sharing:** a term that refers to lower out-of-pocket costs (often reduced copays) for prescription drugs when members use a designated subset of in-network pharmacies
- **In-network:** The group of doctors and providers who accept insurance (typically the insurer negotiates for better rates with in-network providers)
- **Late enrollment penalty (LEP):** Medicare may charge late enrollment penalties for those who did not sign up for Medicare when first eligible. Learn more about late penalties for [Part A](#), [Part B](#) and [Part D](#) and how to help your clients avoid them.

✓ Help members understand how everything works together.

- The member pays the monthly premium.
- Use in-network providers¹¹ and seek out pharmacies with preferred cost-sharing.
- When seeking care or filling a prescription, members either pay a copay or the full cost as outlined in the policy.
- Once the total costs reach the deductible, Humana starts to pay more of the cost.
- Coinsurance starts after the member has met the deductible and is the difference the member pays after the insurance has paid.

- Once the member has paid an amount equivalent to the maximum out-of-pocket costs between copays, the deductible and coinsurance, Humana pays all remaining in-network, covered medical bills until the end of the plan year or the member switches insurance, whichever comes first.

4. Help members maximize their Humana plan.

✓ Encourage them to activate their MyHumana account.

The MyHumana platform puts members' health in their hands. As a secure, online account, MyHumana gives members access to their plan information anytime, anywhere on their computer, phone or tablet. They can use MyHumana to:

- View and print member ID Card
- Check claims status
- Compare local Rx costs
- [Find an in-network pharmacy](#)
- Use [Find a Doctor](#) with [Care Highlight](#)
- Use [MyHumana Savings Center](#)¹²

¹¹Networks vary by plan. Medicare Supplement plans do not have a provider network.

¹²Discounts vary by plan and region.

Day 3 *continued*

- ✓ Remind them of the importance of a primary care provider and to set up an in-person or [virtual appointment](#).

A primary care provider (PCP) is your member's medical "home base" and is who your members will visit for the majority of their health needs, from regular check-ups to preventative screenings. At Humana, we believe this relationship is key to promoting positive health outcomes. Medicare Supplement members can check their Welcome Kit for a list of preventative services covered by Medicare. Members with Go365 benefits can earn points for annual wellness visits and preventative screenings. As a reminder, Dual-Eligible Special Needs Plan (DSNP) members must provide their Humana ID number and their Medicaid ID number to the provider staff at their appointment to avoid unexpected claims.

- ✓ Encourage members to use telehealth as an alternative to visiting the doctor in person for minor illnesses or behavioral health.

Remind them that telehealth visits can be done over the phone or through a video platform. Virtual visits are a great option when a client's normal provider is unavailable and are often less expensive than a visit to urgent care or the emergency room, though they should not be used for a life-threatening injury, illness or major trauma, in which case the client should call 911 or go to the emergency room. The Centers for Medicare and Medicaid Services now recognize a broader range of health services for telehealth to make it easier and more accessible for Medicare beneficiaries.¹³ Remind DSNP members to share both their Humana ID and their Medicare ID for telehealth visits.

¹³<https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>



If they don't have a PCP or are interested in switching PCPs, they can use the [Find a Doctor](#) tool with [Care Highlight](#) to find in-network providers based on their selection criteria. The Care Highlight program uses objective criteria to help identify doctors in certain states and for certain specialties with quality and cost-efficiency metrics.



Learn more about Humana's Find a Doctor tool [here](#).

Day 3 *continued*

- ✓ Let them know they should take advantage of their **annual wellness visit** and covered preventative screenings, shots and other services.¹⁴

Preventative care can help providers intervene before a chronic disease occurs, treat it in its early stages or stop or slow the progression of the disease.¹⁵ This is important for healthcare consumers, insurers and providers because chronic diseases are the leading causes of healthcare costs in the United States.¹⁶ Remind DSNP members to share both their Humana ID and their Medicare ID for telehealth visits.

- ✓ Discuss Optional Supplemental Benefits (OSBs) and stand-alone plans like Dental and Vision.¹⁷

Oral and eye health play a role in overall health.^{18,19} Dental and vision insurance help members access the care they need to maintain their mouth and eye health all year long. Encourage members to be proactive with preventative dental and vision care.

- ✓ Remind them to **confirm their prescriptions** are included on their plan's formulary.

If any medications are not on their plan's formulary, let them know they can talk to their doctor about switching to a similar medication that is on the formulary. Switching to a generic brand versus a name brand can also help reduce out-of-pocket costs. Encourage them to use **MyHumana** with the integrated **Find a Pharmacy** tool to compare prescription prices and search for pharmacies with preferred cost-sharing included in their plan (such as **Humana Pharmacy**) that may help them save on copays.

¹⁴Medicare Supplement policy holders can check their Medicare & You booklet for preventive services covered by Medicare.

¹⁵https://www.cdc.gov/pcd/issues/2019/18_0625.htm

¹⁶<https://www.cdc.gov/chronicdisease/about/costs/index.htm>

¹⁷Dental and vision benefits vary by plan and area.

¹⁸<https://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Oral-Health>

¹⁹<https://www.cdc.gov/visionhealth/living/index.html>

If a member has Humana Pharmacy as a preferred cost-sharing pharmacy on their plan and wants to get started with Humana Pharmacy they may:

1. Call 1-855-310-5799
2. Visit HPStartNew.com
3. Text HPAPP to 39938 to download the Humana Pharmacy app

Prescription drug tools from Humana:

- **SmartSummary Rx:** transparent medication tracking on a monthly basis through MyHumana.
- **RxMentor:** a digital organizer within MyHumana for everything from prescriptions and OTCs to vitamins and supplements.
- **Maximize Your Benefit Rx:** real-time information for real-time savings. Humana notifies members when they've filled a more expensive prescription when a less expensive option is available. Humana may reach out by letter, phone, text or email.

Additional prescription drug resources:

- Low-Income Subsidy or Extra Help
- State and senior programs
- Pharmaceutical assistance programs

²⁰<https://www.mmitnetwork.com/patient-choice-awards-2020/>

²¹<https://press.humana.com/news/news-details/2020/Humana-Ranks-1-for-Customer-Satisfaction-for-Mail-Order-in-J.D.-Power-Pharmacy-Study-for-Third-Year-in-a-Row/default.aspx#gsc.tab=0> For J.D. Power 2020 award information, visit [jdpower.com/awards](https://www.jdpower.com/awards).

Day 3 *continued*

Day 3 communication assets

Leverage MRC resources before and after your Day 3 virtual event/conference call to put your [multi-channel communications plan](#) into play. Search for these terms:

- MyHumana
- Orientation
- Pharmacy
- Wellness Visit

Step 2: Individual client calls

What to review

Your Day 3 calls to individual members should be used to discuss private, personal information. Examples include, but are not limited to:

- Preferred language
- Prescription drugs
- [Member Care Assessment](#)
- [Social determinants of health assessment](#)
- Customer service inquiries
- Payment information

Customer service inquiries

Use the Service Inquiries tool on Vantage or in the My Humana Business Center to help members with any questions or concerns.



Day 30

A month goes by pretty quickly, but it can also set the stage for the rest of the year. The 30-day mark is where you can dive deeper into helping members understand their plan benefits and coverage. Be sure to walk them through some simple things they can do to make the most of their plan.



Step 1: Virtual event/conference call

What to review

Here's what you should discuss during your Day 30 virtual member event/conference.

1. Confirm their enrollment materials arrived in their preferred language:

- ✓ **Member ID card.** If not, they can use [MyHumana](#) to view and print a card online or call Humana Customer Care at 1-800-457-4708 (TTY: 711), daily 8 a.m.–8 p.m. to order a new one.
- ✓ **Well-Being Guide** (non-Medicare Supplement members only).

2. Confirm they:

- ✓ Received a welcome call from Humana.
- ✓ Selected an in-network primary care provider. If not or they want to switch, tell them they can find a doctor that meets their needs using [Humana's Find a Doctor with Care Highlight tool](#).
- ✓ Present both their Humana ID and their Medicaid ID when receiving health services (DSNP members only).
- ✓ Know if their plan requires them to see their primary care provider before seeking care from a specialist.
- ✓ Checked to see that their prescriptions are on their plan's formulary and that they know how to compare prescription prices.
- ✓ Set up their MyHumana account.

3. Review member benefits that promote their health and wellness.

- ✓ **SilverSneakers²²**—SilverSneakers is a health and fitness program that provides gym access and fitness classes for adults 65 and older and is included in most Medicare Advantage plans²³ at no extra cost. SilverSneakers now offers a mobile app, hundreds of on-demand videos and dozens of live virtual classes. With the app, users can participate in four- to 12-week exercises programs, track and schedule activities, connect with others, and work out on the go. To learn more about SilverSneakers, members can visit silversneakers.com or call 1-888-423-4632.

Learn more about Humana's other digital member tools [here](#).



²²SilverSneakers benefits vary by plan and region.

²³Not available on all Humana Medicare Advantage plans or in a single benefits package.

Day 30 *continued*

- ✓ **Go365²⁴**—Go365 is Humana’s wellness program included on many Humana plans that rewards Medicare Advantage members for completing eligible health activities such as preventative screenings, social and health education activities, SilverSneakers/fitness activities, and community programs. See the chart below for eligible activities and points. Go365 now has more virtual options. Every eligible action earns rewards that can then be redeemed for more than \$300 in gift cards through the Go365 Mall to use online or in-store at national retailers such as Target, Amazon, Walmart, Shell, Lowes, Kroger, CVS, Walgreens and more.

Members have two ways to participate:

1. Online through their [MyHumana](#) account or
2. Through paper-based forms, which they can request from Humana Customer Care.

Watch [this on-demand webinar](#) to learn more about Humana’s digital member tools. Help members get started with this [flyer](#).

- ✓ **OTC allowance²⁵**—The OTC allowance on some Humana plans makes healthier easier—and more affordable. With their OTC allowance, members can get the essential health and wellness products they need like medicine, supplements, supplies and accessories every month or quarter. Members can shop for a variety of products from bath safety and first aid to digestive health and personal care.
- ✓ **Healthy Foods Cards (only on participating Dual-Eligible Special Needs plans)²⁶**—Available on most Dual-Eligible Special Needs Plans, the Healthy Foods Card stretches members’ grocery budgets \$25, \$50 or \$75 further each month so they can get the nutrition they need to live healthier lives. Members can shop for a variety of foods from bread and fresh produce to meats and cheeses at a variety of national grocers and retailers. Make sure to ask your clients if they have the Healthy Foods Card benefit included in their plan and how much their monthly allowance is.
- ✓ **Humana Pharmacy is a preferred cost-sharing mail-order pharmacy on many Humana plans**—Inform members who have this as part of their plan that Humana Pharmacy is available for preferred cost sharing and low copays on mail-order prescriptions with free

²⁴Go365 benefits vary by plan and region.

²⁵OTC benefits vary by plan and region. OTC benefits are not included in Humana’s Medicare Supplement plans.

²⁶Only available on participating Dual-Eligible Special Needs plans. Participating retailers vary by market. Allowance varies by plan and region.

standard shipping. Humana's digital tools are also available to refill prescriptions and check the status. An integrated OTC store allows members to use their OTC allowance on over-the-counter health and wellness products from heating pads to diabetes accessories and more. Humana Speciality Pharmacy offers one-on-one consultations with pharmacy staff and was created for treating chronic or complex conditions:

- **Patient assistance** helps those having trouble paying for their medications apply for programs.
- **Clinical programs** pair nurses with a member's doctor to provide resources and support to manage their condition and side effects while adhering to medications.
- **Home infusion therapy** enables members to receive treatment in their home with the supervision of a skilled nurse who works with their doctor.

Humana Pharmacy Number: 1-855-310-5799

Members can choose to utilize any of the pharmacies that are available in their network. Humana Pharmacy is a provider and should be treated as such. Agents must not steer to or market a particular provider. Agents can discuss all pharmacies with preferred cost sharing or mail order available in the member's network, including Humana Pharmacy.

If members request more information about Humana Pharmacy, you can discuss the following information:

- ✓ **Safety:** Uses automated prescription dispensing with added accuracy and safety to limit unnecessary human handling.
- ✓ **Medication accuracy:** All new prescriptions are checked by two different pharmacists to ensure accuracy and prevent complications with the member's current medications.
- ✓ **Ease and convenience:**
 - Prescriptions can be easily managed on the Humana Pharmacy app or website.
 - Members have access to over 5,000 pharmacists to answer their questions over the phone.
- ✓ **Credibility:** According to J.D. Power, Humana Pharmacy is ranked highest in customer satisfaction amongst mail-order pharmacies for three years in a row. In 2020, Humana Pharmacy earned the highest score in all four study factors:²⁷
 - Prescription Ordering and Filling Process
 - Prescription Delivery
 - Cost Competitiveness and Customer Service Experience

²⁷Humana Pharmacy's received the highest score among mail-order pharmacies in the J.D. Power 2018-2020 U.S. Pharmacy Studies of customers' satisfaction with their pharmacy. Visit [jdpower.com/awards](https://www.jdpower.com/awards).

Day 30 *continued*

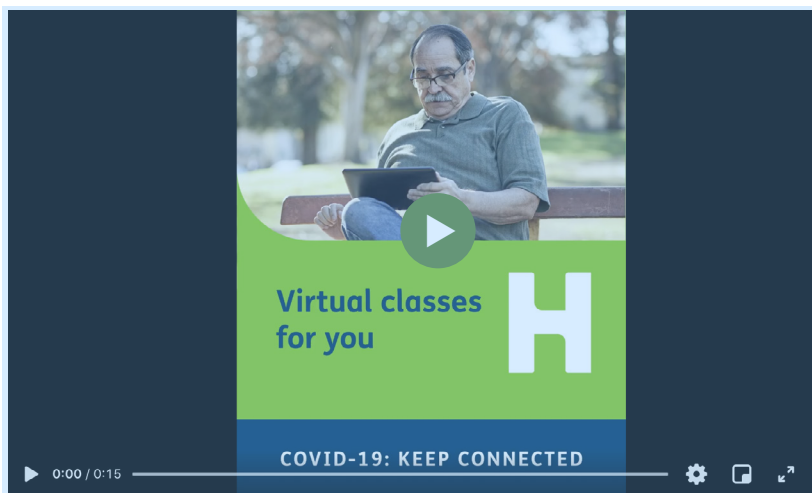
If members are interested in using Humana Pharmacy, they can text HPAPP to 39938 to download the Humana Pharmacy app or visit HPStartNew.com. They can sign in with their MyHumana user ID and password. Click “Add a New Prescription” and choose the prescription they want to fill.

✓ Humana Neighborhood Center services

Humana’s Neighborhood Centers help members focus on achieving their best health with personalized experiences and programs to fit their unique needs. Services are provided at no cost. Members can participate in person if an on-site Humana Neighborhood Center is available in their area or they can get involved through virtual classes and events by registering [here](#). Many classes are open to anyone, not just Humana members. All participants need to register is a valid email address. Participants can register in advance or at the start of a class. Classes cover a variety of health and wellness topics, including chronic conditions, nutrition, emotional health, trivia and more. View the monthly activities calendar [here](#). SilverSneakers classes are offered in person and virtually to improve physical health. Members with Go365 benefits can earn rewards through in-person and/or virtual Neighborhood Center classes.

One-on-one appointments are available with health educators to provide customized education for improving mental, physical and emotional health. At many locations, members can speak directly with a Humana customer service specialist who can answer questions related to their plan benefits, billing, finding an in-network provider and more.

Members can find their nearest location and its opening status at Humana.com/Humana-Neighborhood-Centers or virtual classes [here](#).



Sorry

Because of its privacy settings, this video cannot be played here.

Watch on Vimeo

✓ Transportation²⁸

Getting to the doctor—and back home again—shouldn't be a hassle. That's why Humana offers transportation benefits on many HMO plans to give members an easier, simpler and more personalized experience. It's all part of how we're addressing the needs of the whole person and making healthcare more human.

Members can call the Humana Customer Care number on the back of their Humana member ID card. Customer Care will then guide the member to the appropriate transportation provider who will then schedule the trip. Members should have their Humana ID number, the name and address of the medical provider, appointment day and time, and pick-up time and location ready.

✓ Caregiver resources

Let members know that if they have a caregiver or are one themselves, Humana offers support and resources. Learn more about Humana's caregiver resources and support [here](#)

²⁸Transportation benefits vary by plan and region.

Day 30 *continued*

✓ Automatic payment

If members are not already signed up for automatic payments, remind them of the benefits. With automated payments, members can set it and forget it for a hassle-free way to ensure their coverage does not lapse due to a delayed or forgotten payment. Payments can be made securely and directly from a bank account, Social Security, Railroad Retirement Board or a debit or credit card. If members prefer digital payment options, they can pay through their MyHumana account or by using Humana's [Express Pay](#). Medicare Supplement members can save two dollars on their plan premium per month when they sign up for automatic payments.

Day 30 communication assets

Use MRC resources before and after your Day 30 virtual event/conference call to put your [multi-channel communications plan](#) in action. Search for these terms in the MRC:

- SilverSneakers
- Healthy Foods Card
- Transportation
- Go365
- Caregiver
- Humana Neighborhood Centers
- OTC allowance
- Automatic payment

Step 2: individual client calls

What to review

Individual Day 30 calls are an optimal time to assess members for social determinants of health using Humana's [Bold Goal Whole Health Toolkit](#) and connect members to any needed resources.

Ask if your member has a caregiver. If they do, this is also the time to ask them if they would like a Protected Health Information consent form to share their personal information, like claims and account details, with their caregiver. This consent form is part of Humana's online enrollment tools in the post-enrollment form options. Paper consent forms can be downloaded [here](#).

Need additional assistance supporting members? Contact your [local support team](#) or submit a [Service Inquiry](#) via [Vantage](#).

Day 60

Members should be feeling more comfortable with their plans a couple months after enrollment. That means it's a good time to explain the advanced additional benefits that make a Humana plan unique.



Step 1: Virtual event/conference call

What to review

Here's what you should discuss during your Day 60 member virtual event/conference.

1. Confirm that members:

- ✓ **Selected an in-network primary care provider.** If not or they want to switch, tell them they can find a doctor that meets their needs using Humana's Find a Doctor with Care Highlight tool.
- ✓ **Made an appointment** either in person or through telehealth for their annual wellness exam and preventative screenings, shots, etc.
- ✓ Present both their Humana ID and their Medicaid ID when receiving health services (DSNP members only).
- ✓ **Checked to see that their prescriptions** are on their plan's formulary and that they know how to compare prescription prices.
- ✓ Set up their MyHumana account
- ✓ Have set up these benefit accounts if they're a part of their plan:
 - Go365 (or called the Humana Customer Care number on the back of their ID to receive paper-based forms)
 - SilverSneakers
 - Healthy Foods Card
- ✓ **Have taken advantage of Humana Neighborhood Centers** services and classes.
- ✓ **Know how to use their transportation benefits if available on their plan.**

Day 60 *continued*

2. Tell them about additional Humana resources and discounts for Value-Added Items and Services:

✓ Humana Behavioral Health

Humana Behavioral Health takes a holistic, mind-body approach to healthcare to address the whole person, encouraging faster recovery and improving clinical outcomes. Members can schedule virtual visits. Help is available 24/7 and member confidentiality is protected according to federal and state requirements. Members can refer to their Summary of Benefits to see if this program is a part of their plan.

Some common issues the Behavioral Health benefits program addresses include:

- Anxiety
- Depression
- Bipolar disorder
- Alcohol and drug abuse

Humana Behavioral Health services include:

- Providing access to a participating network that includes individual providers, hospitals, and mental health and substance abuse programs.
- Coordinating treatment and services, including hospitalization.
- Acting as advocates who monitor your progress with members' treating physicians and providers to help coordinate care.
- Providing assistance with questions or concerns involving behavioral health.

[Learn more.](#)

✓ Discounts for Value-Added Items and Services

Members can review their plan details/extra services brochure for contact information and/or to sign in to their MyHumana account to review what is included in their specific plan.

Medicare Advantage discounts on Value-Added Items and Services may include:²⁹

- Jenny Craig discounts
- LifeLine medical alert
- Discounted meals
- [Complementary alternative medicine and weight management](#)

²⁹Medicare Advantage benefits vary by plan and market.

Medicare Supplement Value-Added Items and Services may include:³⁰

- WellDine
- Jenny Craig
- SilverSneakers³¹
- Humana At Home
- Prescription, vision, hearing discounts
- USA Senior Care Network Premium Savings Program
- LifeLine medical alert
- Shared decision making

Day 60 communication assets

These MRC resources can help you engage members before and after your Day 60 virtual event/conference call through a [multi-channel communications approach](#). Search for these terms in the MRC:

- Humana Behavioral Health
- Jenny Craig
- LifeLine medical alert

Step 2: Individual client calls

What to review

Continue assessing members for social determinants of health such as food insecurity, loneliness and social isolation, transportation insecurity, and housing insecurity using the [Bold Goal Whole Health Toolkit](#) on individual Day 60 calls, as a member's social health situation can change at any time. If you recommended any resources on the Day 30 call, follow up to see if the resources have helped or if they need additional support.



³⁰Medicare Supplement benefits vary by plan and market.

³¹SilverSneakers benefits vary by plan and market.

Day 90

Member retention is a year-round investment. The more value you add to your relationships, the more it helps your credibility—and your clients will more likely talk about you to their friends and family! Retention is a cycle: when members are more engaged with their plan, they're usually happier with it. And the happier they are, the more likely you are to keep them as clients. You've already done the hard work of getting members engaged with Humana as well as their health and wellness. Now it's time to start asking for referrals.

Step 1: Virtual member event/conference call

What to review

Here's what you should cover during your Day 90 virtual event/conference call:

1. Confirm that members:

- ✓ Selected an in-network primary care provider. If not or they want to switch, tell them they can find a doctor that meets their needs using [Humana's Find a Doctor with Care Highlight tool](#).
- ✓ Made an appointment either in person or through telehealth for their annual wellness exam and preventative screenings, shots, etc.
- ✓ Checked to see that their prescriptions are on their plan's formulary and that they know how to get the best prescription prices.
- ✓ Set up their MyHumana account
- ✓ Have set up these benefit accounts if they're a part of their plan:
 - Go365 (or called Humana Customer Care to receive paper-based forms)
 - SilverSneakers
 - Healthy Foods Card³²
- ✓ Have taken advantage of Humana Neighborhood Centers services and classes.
- ✓ If included on their plan, know how to use their transportation benefits.³³
- ✓ If included on their plan, understand how to use Humana Behavioral Health benefits.³⁴
- ✓ Are aware of the various discounts they may have access to with their plan.

³²Available on select DSNPs only. Benefits vary by plan and area.

³³Transportation benefits vary by plan and area.

³⁴Humana Behavioral Health benefits are not available on Medicare Supplement plans.

2. See if they know of anyone who could use your help.

✓ Special Enrollment Periods (SEPs)

Remind clients of life events that could impact their coverage, such as:

- A change in residence
- Losing current coverage
- Having a chance to get other coverage
- A plan changes its contract with Medicare

Learn more about SEPs [here](#). Ask clients to contact you privately if they believe they have an SEP.

✓ Ask for referrals

Ask clients to share your name and contact information with people they know who may be interested in your services. Ensure that all non-solicitation rules are followed.

Day 90 communication assets

MRC resources like the ones below can help you improve client engagement and earn referrals. [Use a multi-channel communications strategy](#) before and after your Day 90 virtual event/conference:

1. SEP
2. Referrals
3. Additional product review (OSBs and/or stand-alone plans)

Step 2: Individual client calls

What to review

Members' social health needs can change from month to month. Continue assessing for social determinants of health—food insecurity, loneliness and social isolation, transportation insecurity, and housing insecurity—using the [Bold Goal Whole Health Toolkit](#) on individual Day 90 calls. Now is also a good time to review SEPs, referrals, and/or additional products such as OSBs or stand-alone plans with clients one-on-one.

Day 91 and beyond

By now, your client should be prepared to have a great experience with a Humana plan. Here are some simple things you can do to keep the relationship growing.

Ways to stay top-of-mind with clients.

1. Send thank you cards for participating in events and giving referrals. The MRC now offers thank you cards you can order in bulk!

2. Send cards for special occasions, such as:

- Birthdays
- Holidays
- Plan anniversary
- Marriage anniversary
- Client moved to a new home


BONUS TIP

Keep an eye out for possible Special Enrollment Period opportunities like a new home!


3. Keep clients engaged with regular communications that promote health and wellness as well as Humana programs and benefits leveraging assets from the MRC. Proactively and regularly communicate via these channels:

- Email
- Social media*
- Direct mail


Enhance your retention strategy with these resources.



ARTICLES
Read Time: 7 min
How Emotional Intelligence Could Ma...
Learn why you should and how you can improve your emotional intelligence in this quick read.



PODCASTS
Listen Time: 22 min
Make Retention Your #1 Sales Strate...
Learn some of the best retention strategies and how you can prevent rapid disenrollment.



ARTICLES
Read Time: 8 min
Five Retention Tactics to Use All Y...
Learn how to retain clients with these five strategies in this eight-minute read.

*Only for Agents who have completed the mandatory [Social Media Training](#) and adhere to Humana [social media policies](#) and the Centers for Medicare & Medicaid Services' [Medicare Communications & Marketing Guidelines](#).

October and November

Starting October 1, reach out to members with MA, PDP, OSB, dental and vision plans to discuss plan changes and enhancements for the upcoming plan year. [Use a multi-channel communications strategy.](#)

The key to retaining clients is never losing touch in the first place.

You're supporting members, so we're supporting you.

We're with our Agents, 365 days a year.

We hope you've found this document helpful. We're here to support you in any way we can. Thank you for your dedication and commitment to helping Medicare beneficiaries improve their health and quality of life. Please don't hesitate to contact us through any of the following resources:

- Find more resources, training, events and more at [IgniteWithHumana.com](https://www.humana.com/ignite), Humana's website for robust, informative Agent enrichment.
- Connect with your [local support team](#).
- Contact the Agent Support Unit by email at agentsupport@humana.com or phone at 1-800-309-3163, Monday–Friday, 8 a.m.–9 p.m., EST

Chinese: At Humana, we have provided a dedicated telephone service center for Mandarin speakers. Members can call to make inquiries. Monday–Friday, 8:00 a.m.–8:00 p.m., please call 800-558-9927 (TTY: 711) to contact us.

普通話客戶電話服務中心



在 Humana 惠安納，我們為講普通話的人提供了專門的電話服務中心，會員可致電諮詢。

週一至週五，上午 8 點至晚上 8 點，
請致電 800-558-9927 (聽障專線：711) 與我們聯繫。

Korean: At Humana, we also have a dedicated customer service center for our Korean-speaking customers. Reach us at 800-433-4736 (TTY: 711) Monday–Friday, 8:00 a.m.–8:00 p.m.

한국어 고객 서비스 센터



Humana는 한국어를 사용하는 가입자를 위한 전용 고객 서비스 센터를 운영하고 있습니다.

800-433-4736 (TTY:711)로 월요일~금요일 오전 8시 – 오후 8시 사이에 문의하시기 바랍니다.