



**go big.**  
**grow blue.**

2021 MEDICARE SALES EXPO



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## Welcome to Florida Blue Medicare

Thank you for choosing to contract with and represent Florida Blue Medicare products.

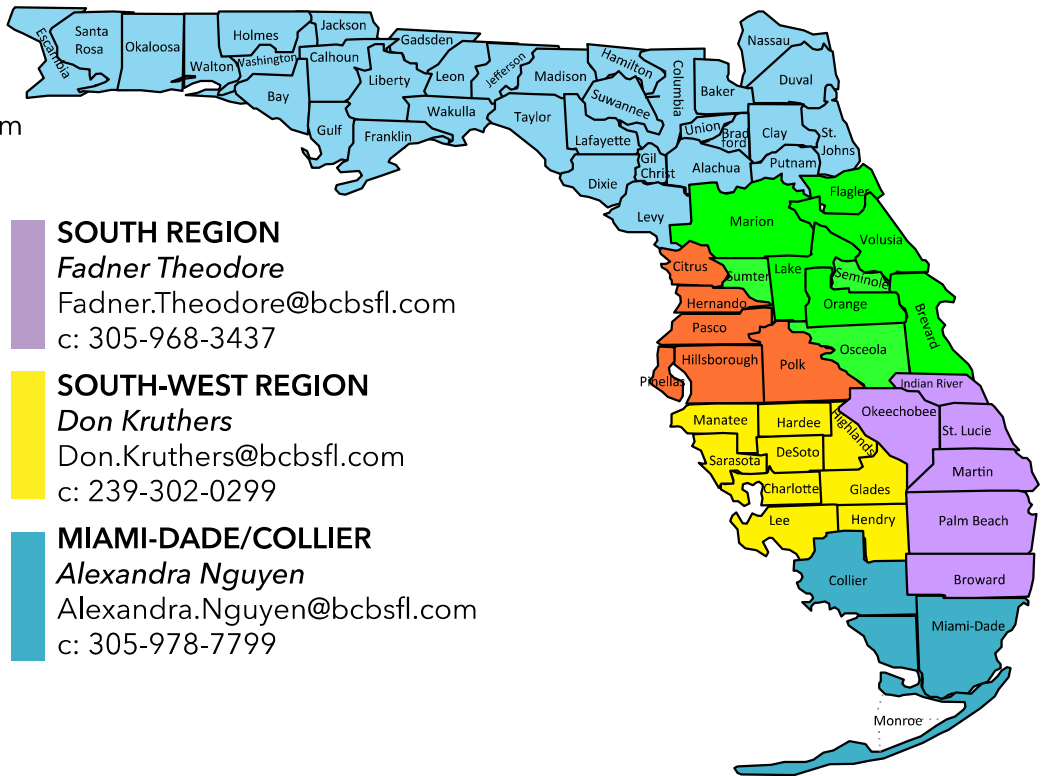
We understand the valuable role that you play in helping Florida’s seniors understand the Medicare options available to them and to help them understand which of those options best suits their individual needs.

You have joined Florida Blue Medicare at an exciting time. This is a time of growth and new opportunities with an established and trusted brand recognized by nearly every Medicare beneficiary in Florida. You are in a unique position to offer Florida Blue’s market leading Medicare Advantage products and their excellent provider networks and relationships to your Medicare eligible prospects and clients.

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## Who is Florida Blue Medicare

Florida Blue has been serving Floridians since 1965. With a rapidly expanding membership base of ~155K current members and \$1.8 billion in annual revenue, Florida Blue Medicare is an integral part of the GuideWell family.

Florida Blue Medicare currently offers 45 different plans across all counties in Florida. Plans include, but are not limited to, 5 legacy HMO’s, 10 high performing network HMO’s, 6 D-SNP, 11 LPPO’s, and more.

Florida Blue’s mission is simple: To help people and communities achieve better health. A key component of bettering our communities is helping get our products out into the market.

We are glad to have you as part of the Florida Blue Medicare team!

## Using this Guide

*Please note that if guidance provided in the document conflicts with the content of your agreement with Florida Blue, the terms of the agreement will supersede this document.*

This guide is an easy-reference tool providing high level guidance for Florida Blue Medicare, Inc. (“FBMI”) Agents and Brokers designed to help you easily navigate to the section of the guide to address your concern making it as easy and productive as possible for you to do business with us.

You can access additional information for Florida Blue agents on the AccessBlue / Sales Connect platform located at [www.floridablue.com/agents](http://www.floridablue.com/agents).

## Key Terminology

**Agency of One:** a contracting arrangement where a single agent representing FBMI can solicit, market and enroll Medicare beneficiaries and have compensation paid to their business which must be licensed and have its own tax ID number.

**Agent of Record (AOR):** the agent, broker, or producer in Good Standing that is to and compensated for an individual FBMI Medicare beneficiary. Every FBMI enrolled Medicare beneficiary must have an AOR attached or assigned.

**Agent of Record Change:** an FBMI administrative procedure by which an AOR is changed or requested by an enrolled FBMI Medicare beneficiary or assigned by FBMI in the absence of an AOR in Good Standing.

**Agent Point:** system that houses all agent onboarding data and records

**Allegation and / or Complaint:** a claim or assertion that an agent and / or upline agency with a relationship has done something wrong, improper, illegal - usually without proof and often will lead to further inquiries often with formal written responses and specified timelines.

**Book of Business (BOB):** Total of all Medicare beneficiaries submitted by an RTS entity that is issued by FBMI and remains in force at time of inquiry

**Carrier Certification:** current year active and valid product certification from FBMI - required to attain RTS status.

**Centers for Medicare and Medicaid (CMS):** the federal agency within the US Department of Health and Human Services that administers and oversees Medicare Programs

**Chargeback or Claw back:** a financial administrative procedure whereby FBMI recovers compensation paid to an agent, broker, producer or upline agency that was not earned in accordance with applicable regulations, guidelines and / or prevailing practices.

**Complaint Tracking Module (CTM):** System used by CMS to track and document beneficiary complaints filed with CMS.

**Compensation:** includes monetary and non-monetary remuneration relating to the sale and / or renewal of a Medicare beneficiary with FBMI, including but not limited to commissions, bonuses, gifts, prizes, awards, referrals, and finder fees.

**Connection Point:** third party site agents and / or contracted uplines may order a wide variety of marketing and communication collateral.

**Dual Eligible Special Needs Plan (DSNP):** a Medicare Advantage plan specifically designed for Medicare beneficiaries entitled to both Medicare and Medicaid

**Errors and Omissions Insurance:** a type of professional liability insurance designed to protect FBMI and the agent from claims arising during the marketing and enrollment of a Medicare beneficiary in FBMI Medicare Advantage Plans which must be current, active and valid policy at \$1M per claim and \$1M aggregate for agent and \$1M and \$2M aggregate for agencies.

**Florida Blue Medicare, Inc ("FBMI"):** Refers to Florida Blue and its subsidiaries and affiliates that provide Medicare and Medicare-related products limited to the product authority identified in your agreement.

**Good Standing:** an agent in "Good Standing" possesses all the components below which allows them to market and enroll Medicare beneficiaries to Florida Blue Medicare and continue to be paid selling and servicing the members they enroll:

**Contract:** active agent agreement with FBMI

**License:** current and active Florida state Health Insurance license

**Active Appointment:** current, active and valid state appointment with FBMI

**CMS Certification:** Current year or applicable for current year CMS certification (currently AHIP.)

**Hierarchy Changes:** realignment from one FMO or agency to a different FMO or agency; you may request a hierarchy change according to the hierarchy change request rules.

**Informal Sales Event:** less structured than a formal sale event typically conducted at a table or a kiosk with a smaller audience to provide or to offer a specific plan benefits.

**Initial Sale - Initial Commission:** refers to beneficiaries enrolling in an individual Medicare plan who were not enrolled in a "Like Plan" in the month immediately preceding the effective date of their new plan. (Define like plan and unlike plan as described by CMS).

## Key Terminology

**Logo, Branding and Co-branding:** the logo, trademark, brand, moniker or likeness thereof for Florida Blue and its affiliates used in media irrespective of form.

**Medicare Advantage and Medicare Advantage with Prescription Drug Plan:** Medicare approved Part C plans that include medical benefits only or that include medical and pharmacy benefits in a single plan.

**Medicare Marketing Guidelines:** CMS guidance for Medicare Advantage Plans and other Medicare plans

**National Produce Number:** a single unique identifying number issued by the National Insurance Producer Registry to identify agents, agencies, and other licensed entities nationally.

**Ready to Sell (RTS):** When an upline agency, principal, agent, or similar independent contracted entity has successfully completed, satisfied, and maintains all applicable state, CMS, and FBMI requirements to be able to market, solicit, and enroll Medicare beneficiaries into FBMI plans of insurance and who has received formal confirmation of their RTS status from FBMI that all requirements are complete and satisfied in their entirety.

**Rapid Disenrollment:** When an FBMI Medicare enrollee makes any plan change within the first three (3) months of enrolling in a plan.

**Sales Events:** Sales and marketing events are defined by CMS and must strictly adhere to CMS Marketing Guidelines. These events are designed to steer, or attempt to steer, potential enrollees toward a plan or set of benefits. Sales and marketing representatives may discuss specific plan benefits and collect enrollment forms.

**Formal Sales Event:** typically structured in an audience and presenter format providing or offering specific plan information.

**Scope of Appointment (SOA):** a required documented agreement between a Medicare beneficiary and a Medicare agent, broker, or similar entity listing and limiting the products to be discussed with the beneficiary obtained prior to meeting with the beneficiary

**Tele-agent or Tele-broker:** FBMI RTS agents and or brokers performing marketing and / or enrollment of Medicare beneficiaries over the phone who are compliant with the terms of their agreement, and with state and CMS Marketing and regulatory laws, rules, and guidelines.

**Upline Agency:** A contracted firm, agency, or organization with downline agents.



# Ready to Sell

Contracted

Onboarded

FBM Approved

Commission Payment Set-up

# Ready to Sell

Prior to marketing, promoting, or selling FBMI individual MA, MAPD, and DSNP products, you must complete several requirements to become "Ready to Sell" or "RTS" and must receive an RTS status notification email from FBMI.

## Agent "Ready to Sell" Requirements:

- Contracted:** Agents must be contracted with Florida Blue Medicare, Inc. – please note that receiving notice that your contract is complete **does not** mean that you have attained "Ready to Sell" status or that you are eligible to begin marketing and sales activities on behalf of Florida Blue Medicare, Inc.
- Onboarded:** Once contracted, agents new to Florida Blue Medicare must first complete the on-boarding process
  - Agent must possess a current and valid license from the Florida Department of Financial Services to sell Health Insurance in the state of Florida prior to initiating the contracting and on-boarding process with FBMI.
  - Agent will receive an email containing an "Appointment Request Form" from FBMI.
    - This email was initiated on your behalf by your Upline Agency and connects you to their hierarchy.
      - his request is non-transferable and is unique to the agent receiving it. It cannot and should not be shared with other agents.
  - Complete the Appointment Request Form and upload the requested documents as indicated on the Appointment Request Form.

**From:** Channel Partner Management Team ([donotreply@bcbsfl.com](mailto:donotreply@bcbsfl.com))  
**Sent:** (Date)  
**To:** (Agent's email address)  
**Cc:** agency email address and the CGA appointments mailbox (Only CGAs & MAAs)  
**Subject:** Agent Appointment confirmation (Agent's first name and last name)

Dear (first name) (last name):

Congratulations! Your requested appointment(s) have been completed effective (Start date). Your Agent of Record number is \_\_\_\_ - \_\_\_\_\_. (comma separated, if there are multiple AORs, with a period at the end - include/exclude this sentence based on scenarios matrix)

Welcome nonresident!

All information provided must match the information from the Office of Insurance Regulation (OIR) database. Once started, you must finish the Application within 45 days. The electronic application will not store partial information. Please fully complete the application. For additional information please contact Agent Service Center: 1-800-267-3156

Agent Appointment

Overview Details Questionnaire Signature Authorization

User Information

First Name\* Last Name\* MI Suffix  
Enter First Name Enter Last Name MI  
First Name is required Last Name is required

Date of Birth\* Social Security Number (SSN)\* Gender\*  
MM/DD/YYYY XXX-XX-XXXX Select Gender

Contact Information

Work Phone\* Home Phone\* Fax Number  
(XXX)-XXX-XXXX (XXX)-XXX-XXXX (XXX)-XXX-XXXX

Email Address\*  
Enter Email Address

Type\* Street Address 1\* Street Address 2  
Home Enter Street Enter Street

City\* State\* Zip Code\* County\*  
Enter City XXXXX-XXXX

Are you currently a resident of the State of Florida?\*

Yes  No

Are you currently licensed to sell health insurance products in the State of Florida?\*

Yes  No

Do you have active Florida Blue appointments?\*

Yes  No

Next

[Internet Privacy Statement](#) | [Terms of Use](#) | [Nondiscrimination and Accessibility Notice](#)

Health insurance is offered by Blue Cross and Blue Shield of Florida, Inc., DBA Florida Blue. HMO coverage is offered by Health Options Inc., DBA Florida Blue HMO. Dental, Life, and Disability are offered by Florida Combined Life Insurance Company, Inc. DBA Florida Combined Life. These companies are independent Licensees of the Blue Cross and Blue Shield Association.

Language assistance available: Español, Korean, Ayisisen, Taijng Yih, Portuguese, 中文, Francais, Tagalog, pcccaai, Italiano, Deutsche, 한국어, Polska, Gujarati, ไทย, 日本語

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3. **FBM Approved:** FBMI will begin to process your Appointment Request which requires that you:
  - a. Be successfully licensed and appointed at the state
  - b. Successfully pass a background check
  - c. Submit a complete and accurate Appointment Request Form
  - d. Submit complete, current, and valid documents to accompany your Appointment Request
  - e. Address any identified defects or deficiencies in your submission as directed by FBMI
  - f. Have received notification that your contract is complete
4. **Commission Payment Set-up:** Once your agreement and appointment are processed, you will receive an email from Florida Blue Medicare that contains an electronic form to be completed for the purpose of direct deposit. If this form is not completed, paper commission checks will be issued until a direct deposit form is completed. Please allow approximately two weeks for Florida Blue Medicare to process direct deposit requests.<sup>1</sup>

The agent's contract and RTS status is available to their upline agency, their Broker Manager, and the Agent Service Center. The agent will also receive an email stating their status from Florida Blue Medicare.

## Contract Termination and Suspension

Violations of company policy, state, or federal rules or regulations may result in various corrective actions including and up to suspension or termination of the agent's agreement depending upon the seriousness of the violation. The agent agreement may be terminated by either party by providing appropriate notice in accordance with the terms of the agreement. This is a "not for cause" termination and the agent remains eligible for commission payments if all other conditions for payment are met. Egregious violations may result in a "termination for cause" which are reported to both the state and CMS at which point the agent is ineligible to receive future commission payments.

Agents may not terminate their current agent agreement for the purpose of changing hierarchies. See Release Rules and Hierarchy Change form to understand who is eligible to change hierarchies and how that process is performed.

## Certification and Training Requirements

Florida Blue Medicare accepts CMS certification from AHIP.

Please see the custom link to transfer your AHIP to Florida Blue:

<https://www.ahipmedicaretraining.com/clients/floridablue>

## How does this work?

Florida Blue Medicare has now partnered with AHIP for our external sales partners to accept the AHIP certification, in lieu of our internal GuideWell learning core certification, beginning with 2022 product plan year. Once we have the AHIP completion scores aligned under us, IT has built daily automation on our side to then push the remaining required product trainings for the agents to then complete and be deemed 'ready to sell' for Florida Blue Medicare.

**Option 1-**A sales agent that has not already completed their 2022 Medicare certification with AHIP will utilize our custom link to register, pay, and complete their certification. The cost for this is **\$125** and payment is expected by the agent or agency. We will not be reimbursing this cost to the agent/agency this year.

**Option 2-** A sales agent that has already completed and passed their 2022 AHIP Medicare certification can log in via our provided custom link which will allow their completion scores to transmit to us. Using this option will not require a fee from the agent as this step would have been met when they first certified.

Once AHIP is submitted to Florida Blue, agents will access Florida Blue Medicare's product certification via the agent portal which is mentioned in a following section of this guide. See the FMO Agent Contracting Guide for the Agent Point registration process.

Once agents have registered on Agent Point, the Medicare training can be accessed there.

<sup>1</sup> Slated for August/September 2021 release



## Errors and Omissions Insurance (E&O)

FBM agents, as a condition of contracting, are required to carry Errors and Omission Insurance throughout the duration of their contract. This insurance policy protects agents from errors and omissions when facilitating member needs.

Agents are asked to provide policy numbers, amounts, and effective dates of their E&O contracts. The minimum specified levels required for each agent's policy are \$1M per claim and \$1M in aggregate claims for agents and \$1M per claim and \$2M in aggregate for agencies.



# Tools and Resources

Agent Point

Agent Service Center (ASC)

CustomPoint

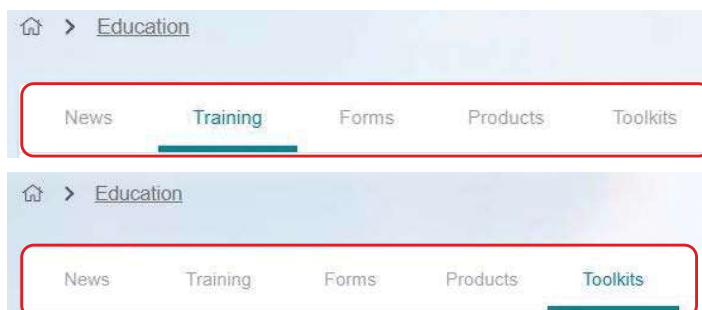
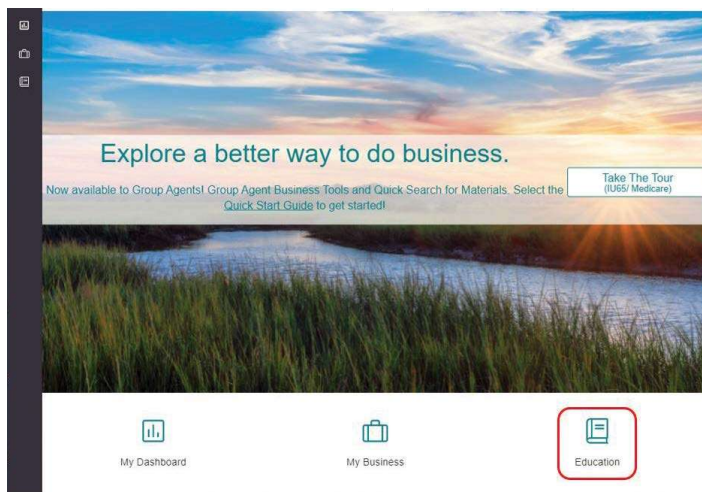
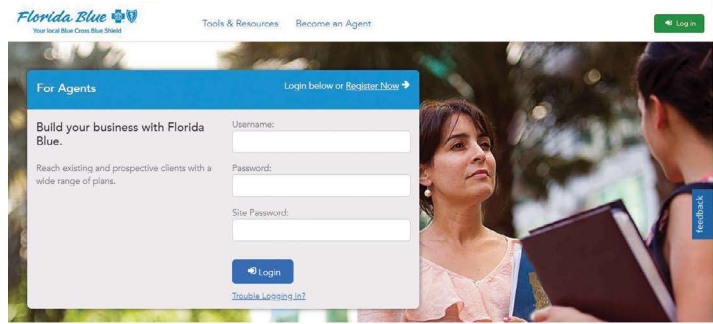
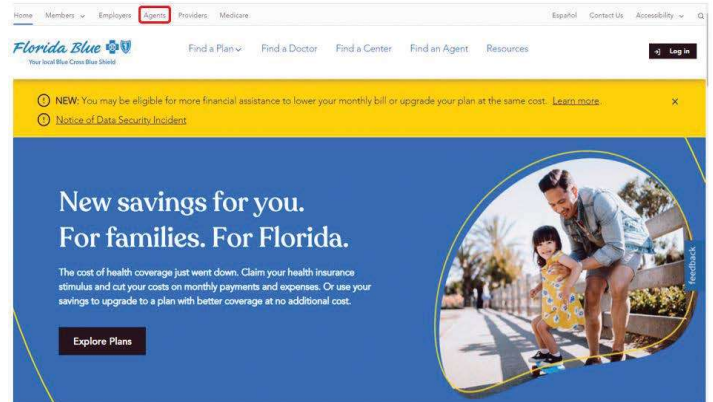
# What tools and resources are available to me?

## AgentPoint

### AgentPoint

#### How to Access AgentPoint Sales Tools

1. Access [www.floridablue.com](http://www.floridablue.com) with a Web Browser
  - a. **Note:** The recommended browser for all required activities is Google Chrome
2. Click on Agents at the top of the page
3. Access the Agent Log-in from the Landing Page
  - a. If you are a new user and do not have credentials, please refer to your FMO Agent Welcome Letter for detailed registration instructions.



#### AgentPoint allows agents to access:

1. Medicare quoting and enrollment tool (linking to SalesConnect directly)
2. Education page – Designed to give agents quick access to reference materials. Several key features include:
  - a. The ability to search for information based on NEWS, TRAINING, FORMS, PRODUCTS and TOOLKITS
  - b. Access to Required Certification Trainings
  - c. Book of Business for reference
  - d. Information on Commission statements and administration
  - e. Information on how to update agent demographics, email, phone number
  - f. Toolkits applicable to Medicare Advantage products and processes
  - g. Access
    - i. Access the education page from the AgentPoint Portal Landing Page

3. Member Insights on:
  - a. Member demographics
  - b. PCPs
  - c. Summary of benefits and coverage
  - d. Ability to print temp ID cards, request replacement cards
  - e. View current and past plans (if applicable) to support member retention
4. Additional Business Tools and Widgets:

Agency Owners and any Administrator delegated as Tier 3 will have access to the same tools as agents, with additional capabilities:

1. Reporting (the ability to save and export via custom and standard reports)
2. Manage agents
  - a. Onboarding
  - b. Removal and BOB realignment
  - c. Agents CMS certification to remain compliant
3. Submit inquiries/disputes using the Channel Management Request tool
4. PCI Attestation

### Current-State Widgets



### Future-State Widgets Enhancements



### Business Tools

The screenshot shows the 'Business Tools' interface with five tool cards:

- Quote:** Links out to SalesConnect to create a quote or manage contract for U65, FHCP, and Medicare.
- Member Insights:** This tool allows you to search for a member or outreach opportunities. By selecting a specific member, you are routed to the Member Insights summary page to view member's demographics, update their PCP, view plan details, payment history, and rewards summary.
- ID Card Services:** Ability to download temp ID cards and order a replacement ID card for members.
- Provider Search:** Search for an in-network provider for your member by linking out to FloridaBlue.com
- Channel Management Requests:** Internal agents can submit an inquiry directly to Sales Compensation regarding their book of business alignment and compensation. Agents can also view the status of previously submitted inquiries and final resolution.

## Agent Service Center (ASC)

**Agent Service Center (ASC)** – The ASC is a dedicated team of Sales Relationship Specialists who provide comprehensive sales support. They serve as a valuable resource to agents but should only be accessed after first seeking assistance from a Broker Manager. The ASC can be reached at **1-800-267-3156**. The Agent Service center does not handle D-SNP inquiries. For questions regarding D-SNP eligibility, the agent should connect the D-SNP team at **1-833-828-5454**.

Operational Hours (Eastern Time)  
*AEP Peak Hour specifics will be communicated via Agent Sales Bulletin:*

### Non-Peak

Monday-Thursday 8:30am – 5pm  
 Friday 10am – 5pm

### Peak

Monday-Thursday 8:30am – 6pm  
 Friday 10am – 5pm

While an agent's first point of contact should be their respective Broker Manager, common issues that can be resolved through the ASC are the following:

1. Agent Portal (AgentPoint External)
  - a. Navigational support

- b. Technical Support - To include Registration and Log-in issues (after appointment completion)
- 2. Medicare Certification/Training Support
  - a. Uploading AHIP certificate
  - b. Navigational and technical support related to Medicare Certification
- 3. Product and Benefits
  - a. All Medicare Advantage
- 4. Enrollment Support
  - a. Application/enrollment status
  - b. ID Card
- 5. Post-Enrollment Support
  - a. Claims Billing

**Requesting Marketing Materials** - The following chart outlines where to order marketing materials:

<b>Custom Docs (On <a href="#">Custom Point</a>) - Agent Marketing Material Personalization Tool</b>	<b>ePowerhouse</b>	<b>Florida Blue's <a href="#">AgentPoint</a> – Medicare Agent Toolkit</b>
Flyers	Sales Brochures	Digital copies of required member materials
Direct Mail	Enrollment Guide	Sales presentations
Post Cards	Benefit at a Glance	Sales Videos
Print Ads	PPO Visitor Traveler program (PPO only)	Job Aids
Digital	Summary of Benefits	
Emails	Applications (Enrollment Forms)	
Billboards	PHI authorization	
Social Media Posts	Scopes of Sales	
Posters	Star Ratings	
Provider materials	Enrollment Checklist	
Radio scripts	Consent to contact Card	
	Medicare Supplement Documents	
	Outline of coverage	

*Please contact your Florida Blue Medicare Broker Sales Manager for detailed instructions on how to access and order from these sites.*



# Marketing and Sales Activity

FAQs

Use of Logo and Colors

Social Media Guidelines

## How Do I Conduct Marketing and Sales Activities FAQ

**Q:** How do brokers inform FBM of sales events? How far in advance should brokers give notice to FBM? This is important as FBM is required to report formal sales events to CMS.

**A:** Brokers must inform FBM at least one month in advance of holding sales events. This allows for a minimum of time needed for promotion of events. With the providers it also allows sufficient time to plan both from the providers' side as well as FBM CGA agents.

**Q:** What information is key for brokers to understand marketing and sales activities such as lead generation, mailer (BRC), event RSVP's, formal sales event sign in, consent to contact, scopes of appointment, etc.

**A:** FBM has a mailer that can be customized to have the leads go back to the agent/agency/broker etc. There are CMS rules against having a sign in sheet at any event. If you use a sign-in sheet it must be made known that the sign-in is "Optional." All pieces used to advertise an event where agents, brokers, etc. are asking for an RSVP, can include a request for prospect's phone numbers.

FBM formal and informal sales events, including table-top events, must be registered in Event Connect. Any lead you get from an event should be documented on a FBM consent to contact card, or an Medicare approved equivalent.

**Q:** What types of provider-based activities does FBM participate in that an agent should know about?

**A:** Agents may coordinate with Florida Blue Medicare Broker Managers to understand which provider-based activities may be available to them.

Individual agents should only engage with providers on FBM's behalf only if they have explicit permission from their Broker Managers.

**Q:** What do brokers need to know on rules governing the use of marketing materials, FBM's logo, and co-branding?

**A:** The following guidelines are required when applying the Florida Blue logo and agency name/logo to agency communications:

1. The agent' or agency's name or logo must:
  - Appear prior to the Florida Blue name and logo
  - Be equal in size (1:1 ratio) to the Florida Blue logo
  - Not include the words "Blue," "Cross" or "Shield", those initials, or their phonetic equivalents in the agency name, phone number, email address or web address.
2. Agent disclaimer <Agent Name/Agency Name> is an authorized, independent <agent/agency> for Florida Blue and Florida Blue Medicare.
3. You must agree to advertise only in traditional publications. Non-traditional publications must be reviewed by FBMI Legal.
4. The Florida Blue brand may only be promoted in Florida.
5. Florida Blue logo guidelines for correct logo presentation must be followed:
  - Always use the artwork provided by Florida Blue.
  - Do not re-create, distort, or resize the logo in any way (do not make taller/shorter or longer/smaller).
  - Do not retype any part of the logo, including the legal descriptor or tagline.
  - The one-line versions of the Florida Blue logo are preferred over the two-line versions.
6. The following disclaimers must appear on all pieces:
  - Florida Blue is a trade name of Blue Cross and Blue Shield of Florida Inc., an Independent Licensee of the Blue Cross and Blue Shield Association.
  - [Agency Name] is an Independent Broker of Florida Blue

# BRANDING GUIDELINES:

## Clear space:

The amount of clear space is in direct proportion to the size of the Florida Blue symbols and must not be altered. Clear space should be equal to the height of the Blue Cross symbol.

## Logo colors:

Using the Florida Blue logo in Corporate Blue is always preferred. Keep the signature and symbols the same color at all times. Do not mix colors

100% Pantone Process Blue	100% Black	100% White
C:100 M:13 Y:1 K:3 R:0 G:145 B:204 Web: #0091CC	K:100 R:0 G:0 B:0 Web: #000000	C:0 M:0 y:0 K:0 R:255 G:255 B:255 Web: #FFFFFF

## Florida Blue logo with tagline:

The Florida Blue logo must include the tagline below it. The following disclaimers must be included at the end of the piece: Florida Blue is a trade name of Blue Cross and Blue Shield of Florida Inc., an Independent Licensee of the Blue Cross and Blue Shield Association. [Agent Name] is an Independent Broker of Florida Blue.

## Florida Blue logo with legal descriptor:

The Florida Blue agency logo must the legal descriptor below it. The following disclaimer must be included at the end of the piece: Florida Blue is a trade name of Blue Cross and Blue Shield of Florida Inc. [Agent Name] is an Independent Broker of Florida Blue.

## Florida Blue logo without tagline or legal descriptor:

You can drop the legal descriptor and tagline on signs, business cards and promotional items

## Florida Blue logo with Medicare:

The Florida Blue logo must include the tagline below it. Use the Medicare version of the Florida Blue logo when promoting Medicare products. The following disclaimers must be included at the end of the piece: *Florida Blue and Florida Blue Medicare are Independent Licensees of the Blue Cross and Blue Shield Association. Florida Blue is a trade name of Blue Cross and Blue Shield of Florida Inc. [Agent Name] is an Independent Broker of Florida Blue and Florida Blue Medicare.*

## Examples of Florida Blue Medicare logo usage below:

### Horizontal with tagline:



### Horizontal with tagline reversed:



## IMPORTANT – Referring to our product and company:

Any reference to Florida Blue **MUST** appear as **Florida Blue Medicare**.

- **Florida Blue Medicare** is the **only allowable** way to refer to our products and company.
- Other than as specified in the disclosure language you are not allowed to use any iteration similar to:
  1. BCBS FL
  2. Florida Blue Cross
  3. Florida Blue
  4. Etc.

Contact your FMO for the approved logos and guidelines.



## SOCIAL MEDIA GUIDELINES:

Social media includes web- and mobile-based technologies used to turn communication into interactive dialogue among organizations, communities, and individuals. The intention of most social sites is to instantly connect with a far-reaching audience through content creation and interactive information exchange among organizations, communities, and individuals. Social media use must follow the same guidelines as websites, as well as the core principles listed below.

1. **Protect information:** Do not share confidential company information or identifiable client information such as personal health information, which is a violation of HIPAA. Additionally, be aware of the privacy settings on personal accounts.
2. **Be transparent and responsible in posts:** Do not claim or imply to speak on Florida Blue's behalf. If you identify yourself as an agent working with Florida Blue on an Internet posting, refer to the work done by Florida Blue or link to a Florida Blue website and include this disclaimer:  
*The views expressed on this post are mine and do not necessarily reflect views of Florida Blue.*  
If you become aware of inappropriate content related to Florida Blue and shared via social media, inform your Area Manager.

3. **Identify yourself:** We encourage you to connect with our social sites. Do not include the corporate name or a variation in your personal social account or claim a URL likely to be a company web address. Web addresses with "Florida Blue" or variations (i.e., "FL Blue") may only be used by the company.
4. **Be professional:** Use good judgment and be accurate and honest. Errors, omissions, and unprofessional language/behavior reflect poorly on your agency and Florida Blue and may result in liability for the agent/agency and/or the company. Be respectful and professional to customers, business partners, competitors, and members. Posted content could go viral at any time. Integrity and respect are core values and should govern all interactions.
5. **Have fun and connect:** Social media is used to communicate and build connections, whether you are doing it for Florida Blue or yourself. We encourage you to connect with Florida Blue and participate in conversations on these sites:
  - Facebook
  - Blog
  - Twitter
  - YouTube
  - LinkedIn
  - Pinterest
  - Facebook.com/floridablueenespanol



# The Enrollment Process

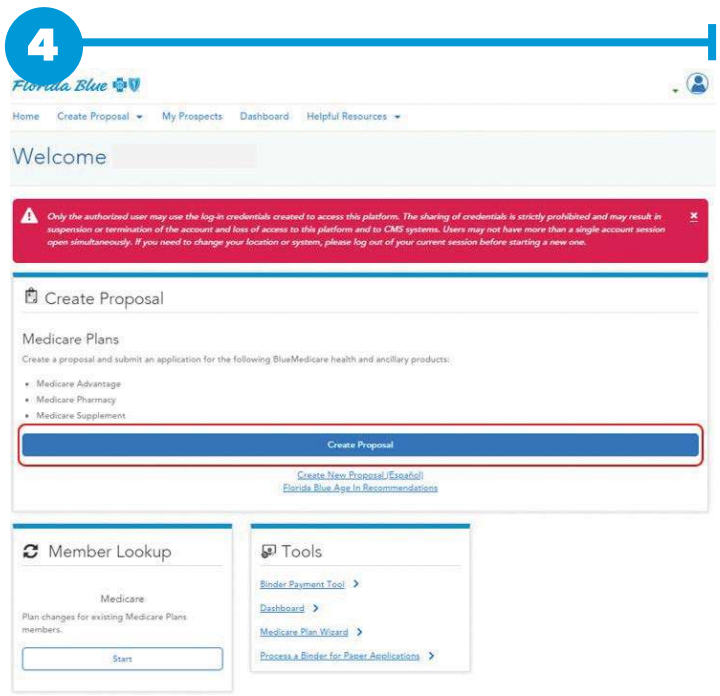
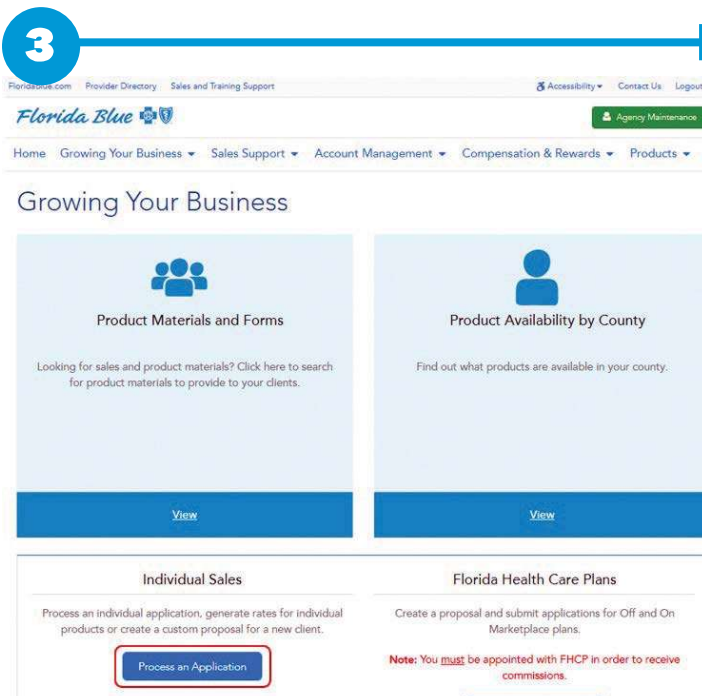
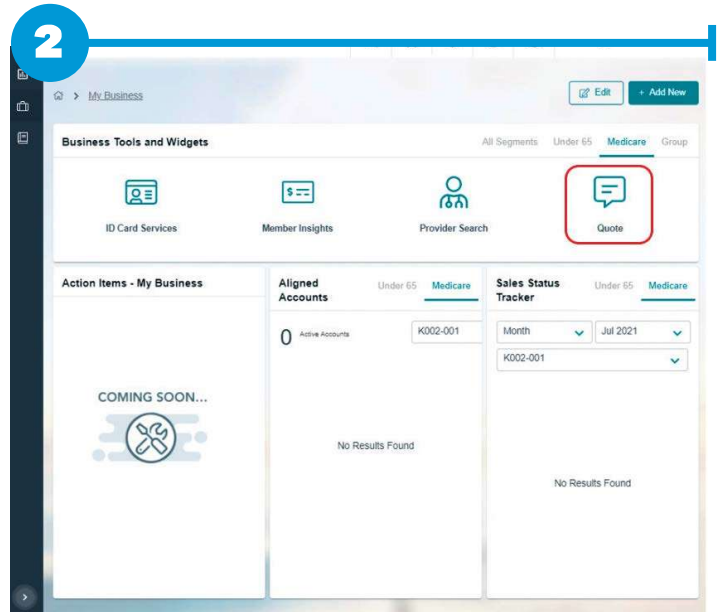
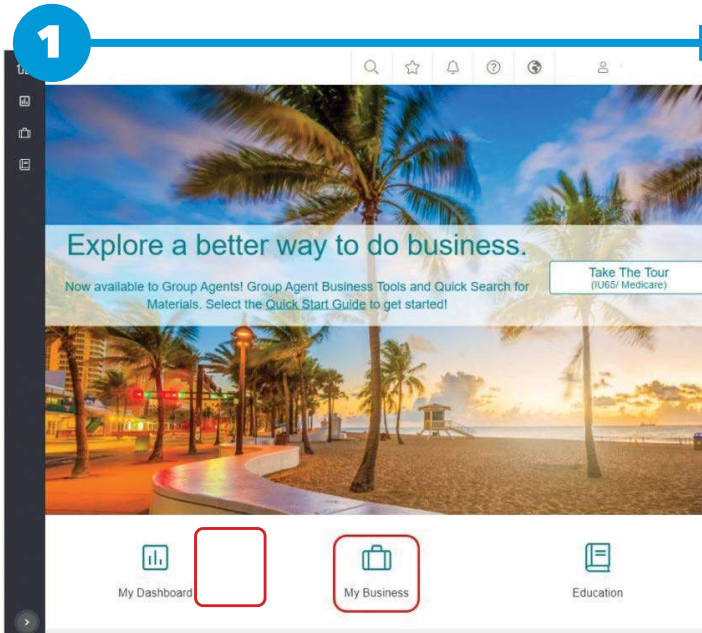
| Submitting Enrollment

# The Enrollment Process

## SalesConnect

Enrollment for MA, MAPD, and DSNP plans are all typically done via SalesConnect, though paper applications are accepted as well. Agents can access a Medicare Application to complete through [Agent Point](#). The path to access the application is My Business > Quote > Growing your Business

> View > Medicare Eligible Health Products > Medicare Agent Toolkit > Medicare Supplemental Materials, Forms of Medicare Advantage Materials/Form. This cadence is illustrated with the series of screenshots that follow.



# 5

## Create New Proposal

[Change](#)

### Applicant Contact Information

\* All fields are required unless otherwise stated

First Name:

Last Name:

Daytime Phone Number:  Optional

Evening Phone Number:  Optional

Applicant Email Address:  Optional

Hospital (Part A) Effective Date:  Optional

Are you a currently enrolled Florida Blue Medicare Supplement Member?  Yes  No

IMPORTANT: Please make sure to provide your Part A effective date. This is the only way we can determine your eligibility for certain plans. By not providing this information you may see plans that you are not eligible to enroll in. If you complete an application for a plan you are not eligible for it will not be accepted and you will need to shop for a new plan.

### Applicant(s) Details

Tobacco User: Refers to any usage of tobacco (e.g. cigarettes, cigars, pipes, snuff, or chewing tobacco) in the past 12 months.

Relationship	First Name	Gender	Date of Birth	Zip Code	County	Used Tobacco in the Past?
Applicant	<input type="text"/>	<input type="radio"/> Male <input type="radio"/> Female	<input type="text"/>	<input type="text"/>	Select	Select

[Medicare Plan Wizard](#)

[Cancel](#)

[Continue](#)

# 6a

## Review Proposal

[View details](#)

The following products and plans have been added to your proposal based on your saved favorites and recommendations. You may add, remove, or change plans here before saving your proposal.

[Medicare Plan Wizard](#)

Have a member aging in from an U65 plan? Click on the button to the right to bring up a searchable tool enabling you to locate the member, see their top recommended plans, PCPs in network, Estimated Drug costs, Covered drugs and more! Please use this tool to personalize our member's sales journey, and provide you essential information to guide them into a Medicare plan.

[Florida Blue Age In Recommendations](#)

### Select Plans

[Actions](#)

Medicare Advantage
  Pharmacy
  Medicare Supplement

Total Premium

**\$0.00**

(Proposal Amount)

[Apply Now](#)

[Cancel](#)

# 6b

## Medicare Advantage Plan

[Actions](#)

Select Plan Year: 2021 Plans

Plan Name	Monthly Premium	Actions
<input type="radio"/> <a href="#">Florida Blue Medicare BlueMedicare Complete (HMO D-SNP)</a>	\$0.00	<a href="#">Remove</a>
<input type="radio"/> <a href="#">Florida Blue Medicare BlueMedicare Classic (HMO)</a>	\$0.00	<a href="#">Remove</a>
<input type="radio"/> <a href="#">Florida Blue Medicare BlueMedicare Value (PPO)</a>	\$0.00	<a href="#">Remove</a>
<input type="radio"/> <a href="#">None</a>		

Want To Finish Later?

[Save Changes](#)

REQUIRED Downloads

- [FloridaBlue Scope of Appointment Form \(PDF\)](#)
- [FHCP Scope of Appointment Form \(PDF\)](#)
- [Generate Scope of Appointment](#)

# 7

Florida Blue MEDICARE

Home Create Proposal My Prospects Dashboard Helpful Resources

## Select 2021 Medicare Advantage Plans

Search By Plan Name

Favorite Plans	Select	Plan Name	Monthly Premium	Actions
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<a href="#">Florida Blue Medicare BlueMedicare Value (PPO)</a>	\$0.00	<a href="#">Details</a>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<a href="#">Florida Blue Medicare BlueMedicare Classic (HMO)</a>	\$0.00	<a href="#">Details</a>
<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Florida Blue Medicare BlueMedicare Premier (HMO)</a>	\$0.00	<a href="#">Details</a>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<a href="#">Florida Blue Medicare BlueMedicare Complete (HMO D-SNP)</a>	\$0.00	<a href="#">Details</a>
<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Florida Blue Medicare BlueMedicare Choice (Regional PPO)</a>	\$47.90	<a href="#">Details</a>
<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Florida Blue Medicare BlueMedicare Select (PPO)</a>	\$146.80	<a href="#">Details</a>

[Compare Plans](#)

[Cancel](#)

[Update Proposal](#)

# 8

## Review Proposal

[View details](#)

The following products and plans have been added to your proposal based on your saved favorites and recommendations. You may add, remove, or change plans here before saving your proposal.

[Medicare Plan Wizard](#)

Have a member aging in from an U65 plan? Click on the button to the right to bring up a searchable tool enabling you to locate the member, see their top recommended plans, PCPs in network, Estimated Drug costs, Covered drugs and more! Please use this tool to personalize our member's sales journey, and provide you essential information to guide them into a Medicare plan.

[Florida Blue Age In Recommendations](#)

### Select Plans

[Actions](#)

Medicare Advantage
  Pharmacy
  Medicare Supplement

Total Premium

**\$0.00**

(Proposal Amount)

[Apply Now](#)

[Cancel](#)

### Medicare Advantage Plan

[Actions](#)

Select Plan Year: 2021 Plans

Plan Name	Monthly Premium	Actions
<input type="radio"/> <a href="#">Florida Blue Medicare BlueMedicare Complete (HMO D-SNP)</a>	\$0.00	<a href="#">Remove</a>

Want To Finish Later?

[Save Changes](#)

REQUIRED Downloads

- [FloridaBlue Scope of Appointment Form \(PDF\)](#)
- [FHCP Scope of Appointment Form \(PDF\)](#)
- [Generate Scope of Appointment](#)

Submitting Medicare Advantage Applications to Florida Blue can be done through the following ways:

## **1 SalesConnect**

Agents can access a Medicare Application to complete through Agent Point. The path to access the application is **My Business > Quote > Growing your Business**

## **2 Fax**

Faxing an application should only be submitted in case the Broker Agent is having technologic difficulties at time of enrollment, in this scenario, the Application must be Fax to **Florida Blue Billing and Enrollment department Fax Number: 904-997-5715**

## **3 Mail**

Send your completed and signed form to:  
**Florida Blue Medicare  
P.O. Box 45296  
Jacksonville, FL 32232-5296**