

COMPLIANCE BULLETIN

DON'T DO THIS – IT'S JUST THAT SIMPLE

CB0008-14
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Each carrier has their own unique way of identifying Medicare Advantage and/or Part D Marketing Allegations and Marketing Misrepresentations. Carriers are bound by HPMS, CMS, OIG, state and federal guidelines. Bottom line is this...if you cross the line, the carrier will term your contract.

Here are the top five reasons agent contracts have been termed within the past six months:

1. Fraudulent signature.
2. Backdating and/or falsifying a Scope of Appointment form.
3. Not using the carrier-specific/CMS approved presentation material during an appointment (it's a part of the carrier's code of ethics).
4. Not being carrier-certified for a specific line of business and writing an enrollment application.
5. Multiple marketing, sales and/or event complaints - willfully not improving or abiding by CMS/carrier guidelines.