

Medicare Marketing Code of Conduct

Agents/brokers and Coventry Health Care (CHC) sales representatives may not engage in activities which have the potential to mislead, confuse or misrepresent CHC Medicare products. When selling CHC Medicare products, you must be a licensed agent and comply with all applicable Medicare laws, Centers for Medicare & Medicaid Services (CMS) regulations/policies, Marketing Guidelines, and all Federal health care laws, including the Anti-Kickback Statute. All applicable State laws and appointment laws also apply to your participation with CHC.

As an agent under contract with CHC or as a CHC-employed sales representative, you must agree to comply with the following:

- Will adhere to the Marketing requirements issued by CHC, including CHC's *Producer Manual*.
- Will only use CMS and Coventry-approved marketing/presentation materials, sales scripts and inbound/outbound call scripts.
- May **not** deviate from marketing guidance as set forth by CMS or as defined by the health Plan, nor make any statement, claim, or promise that conflicts with, materially alters, or erroneously expands upon the information contained in CMS-approved materials.
- Will submit to CHC Medicare Marketing a final produced copy of all marketing materials used.
- May **not** claim recommendation or endorsement by CMS, or that CMS recommends that Medicare beneficiaries enroll in the Plan.
- May **not market** any Coventry Medicare Plan designated for **Annual Election Period** defined by CMS **until October 1st**.
- May not accept applications from potential Coventry Medicare Plan enrollees for **Annual Election Period until November 15th of any year**.
- Must report all **sales events/seminars** to Coventry on a monthly basis **prior** to events being held for CMS reporting purposes. Any cancellations or revisions must be immediately reported to Coventry. *Special processes must be followed for seminar cancellations per CMS guidance.*
- May **not** conduct any form of marketing activity in any type of nursing home, institutional settings, group homes or subsidized housing units **without prior approval from CHC**.
- May **not** distribute marketing materials, or distribute/collect Plan applications at **educational events** (i.e., health informational fairs, conference expositions, state or community-sponsored events).
- Must inform potential member of all MA or PDP products which will be discussed **prior** to a personal or individual visit. Must outline the **Scope of Appointment (SoA) prior** to an appointment, and the beneficiary must agree to the SoA. The SoA **must be documented in writing or recorded**, if agreed to verbally.
- May **not** discuss additional lines of business at an appointment (i.e., Long Term Care). If requested by the beneficiary to **discuss another MA or PDP product type** during an appointment, a new SoA form must be completed before proceeding to discussing the requested coverage.
- May **not** market non-health care related products (*cross-selling*), i.e., annuities, life insurance, etc., during any MA or Part D sale/presentation.
- If **another line of business is requested** (i.e., Long Term Care) to be discussed during a MA or PDP appointment, may leave product information, excluding enrollment application, and a follow-up appointment is required. May **NOT** reschedule a follow-up appointment to discuss other lines of business until at least 48 hours after the initial appointment (*cooling-off period*).
- May **not** conduct door-to-door solicitation or any other sales contact of Medicare beneficiaries without a beneficiary's expressed invitation (*cold calling*). All unsolicited contacts with potential enrollees are prohibited.
- May **not** use providers, provider groups, or pharmacies to distribute printed information comparing

benefits of different health plans, unless the materials have the concurrence of all Medicare Advantage Organizations (MAOs) involved **and** the materials have received prior approval from CMS.

- May **not** accept enrollee applications in provider offices or other places where health care is delivered. Sales presentations may be conducted and enrollment applications may be distributed and collected only in *common areas* of a health care setting, away from where care is delivered.
- May **not** perform telephone enrollment activities without special contractual approval from CHC.
- Must comply and abide by Federal/State calling hours and with the National/State Do-Not-Call Registry and applicable telemarketing “Do Not Call” regulations, and honor “*do not call again*” requests.
- May **not** call beneficiaries to confirm receipt of mailed information, or contact former members who have disenrolled, or current members that are in the process of voluntarily disenrolling.
- May **not** make outbound telemarketing without prior contact from the beneficiary, unless the beneficiary initiates the call; or expressed permission during a sales event for a follow-up call or visit; or gave permission to be contacted by filling out a business reply card (BRC).
- May **not** take an enrollment during an outbound call.
- May **not** send emails to a Medicare beneficiary, unless the beneficiary agrees and gives their expressed consent to receive emails related to CHC’s health benefits plans, products, services, and/or educational information at the time beneficiary is providing their email address. The consent must be documented.
- May **not** ask for personal information (i.e., Medicare number, bank account or credit card numbers) during sales presentations.
- May offer gifts to potential enrollees as long as they are of nominal value, cannot be converted readily to cash, offered to all eligible beneficiaries, and provided whether or not individual enrolls in the Plan. Nominal value is currently \$15 or less and is based upon retail purchase price of the item/s, regardless of actual cost.
- May **not** provide meals, or have meals subsidized at any sales event or meeting.
- May **not** offer gifts or payment as an inducement to enroll in a Coventry Medicare product.
- Must disclose to potential enrollees that Agent is paid a commission upon enrollment.
- May **not** churn beneficiaries between Medicare Plans.
- May **not** include payments outside of the compensation set forth in the written Broker Agreement.
- May **not** engage in any discriminatory marketing practice, such as attempting to enroll Medicare beneficiaries from higher income areas without a similar effort in lower-income areas, or focusing only on aged Medicare-eligible population and not disabled beneficiaries (*cherry picking*).
- May **not** intimidate, nor use high pressure tactics during a sales meeting/call - if a prospect says they are not interested, end the visit/conversation immediately.

As an agent/broker under contract with CHC, or as a CHC-employed sales representative, I acknowledge that I have read this Code of Conduct and understand the requirements and prohibitions set forth above. I also agree to comply with these, all other applicable Medicare statutes, regulations and guidelines, as well as CHC’s guidelines and requirements.