



# 2024 New Mexico Producer Selling Guide



# Introduction

Thank you for being a valued **Blue Cross** and Blue Shield of New Mexico producer.

To help you provide the best possible service to your clients, we've created a full range of resources to help grow and retain your business. These materials are designed to engage and motivate clients to choose a Blue Cross and Blue Shield of New Mexico plan that fits their health budget and needs.

Throughout this guide, you'll find materials that highlight the immense value that you offer Medicare eligibles, as their trusted advisor. These pre-approved prospecting tools include letters, flyers, print ads, presentations, emails, and educational videos and many allow for co-branding and personalization by producer agencies and individual producers.

We've also included a few tips that can help you determine how to leverage these materials to boost your efforts — and have your biggest sales year yet!

All of the materials included in this guide can be accessed for all certified agents on the producer supply portal at:

https://www.yourcmsupplyportal.com/login.asp

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# Product Overview



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# MAPD Product Sizzle Sheet

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For MAPD product details, visit the producer supply portal.

#### MAPD sizzle sheet



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**New Mexico Counties** 

Bernalillo County - Albuqu Bernalillo County - Albuquerqu Catron County - Reserve Chaves County - Rosvell Global County - Grants Colfax County - Raton Curry County - Fort De Baca County - Fort Sumner Doña Ana County - Las Cruces Eddy County - Carishad Eddy County - Carlsbad Grant County - Silver City Guadalupe County - Santa Rosa Harding County - Mosquero Hidalgo County - Lordsburg Lea County - Lovington Lincoln County - Carrizozo Los Alamos County - Los Alamos Luna County - Deming McKinley County - Gallup Mickiniey County - Gallup Mora County - Mora Otero County - Alamogordo Quay County - Tucumcari Rio Arriba County - Tierra Ama Roosevelt County - Portales Sandoval County - Bernalillo San Juan County - Aztec San Miguel County - Las Vegas Santa Fe County - Santa Fe Sierra County - Truth or Const Socorro County - Socorro Taos County - Taos Torrance County - Estancia Union County - Clayton Valencia County - Los Lunas

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## **PDP** Product Sizzle Sheet

02

For PDP product details, visit the producer supply portal.

#### PDP sizzle sheet

2024			MedicareRx 0	Cross Choice (PDP)™ 5-020	MedicareRx	Cross Value (PDP)™ 5-003	PDP Products
lue Cross and lue Shield of	Plan Premium		\$25	9.50	\$90	0.80	Blue Cross MedicareRx Choice (PDP) <sup>SM</sup>
lew Mexico			Preferred Retail Pharmacy	Non-Preferred Retail Pharmacy	Preferred Retail Pharmacy	Non-Preferred Retail Pharmacy	Blue Cross MedicareRx Value (PDP) <sup>sm</sup>
DP		Tier 1	\$0	\$15	\$1	\$10	
izzle Sheet		Tier 2	\$3	\$20	\$8	\$20	
LEIC SHEEL	Cost Share	Tier 3	\$46	\$47	\$45	\$47	
		Tier 4	50%	50%	31%	3196	
		Tier 5	25% (60 and 90	day Not Covered)	25% (60 and 90	day Not Covered)	
	Annual Prescript	ion Deductible	\$545 (T	lers 3-5)	\$545 (	Tier 3-5)	
oduct Benefits	Formulary		LCE Custom		Enhanced HC		
oduct benefits	Gap Coverage		Defined Standard		Full Coverage on Tier 1		
ed copayments and coinsurances omprehensive drug list	Preferred Pharm	acies	Albertsons	, Walgreens		y, Smith's, Walgreens, I independents	
rivenience of nationwide coverage thousands of pharmacies and all-order choices	Mail Order		3x (Tiers 1-4), (Tier 5 - 30 day (Covered); 60/90 Not Covered)		3x (Tiers 1-4), (Tier 5 - 30 day (Covered); 60/90 Not Covered)		
ve on copays when a preferred armacy is used	Blue Cross and Blue Shield Cross and Blue Shield Asso	of New Mexico, a Divisi clation	on of Health Care Service Co	/sales activities. Prod rporation, a Mutual Legal Re REBUTION. For Agent trainin 23 Subject to change post C	serve Company, an Independ	dent Ucensee of the Blue	BlueCross BlueShield



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## **MED SUPP** Product Sizzle Sheet

For Med Supp product details, visit the producer supply portal. Med Supp sizzle sheet



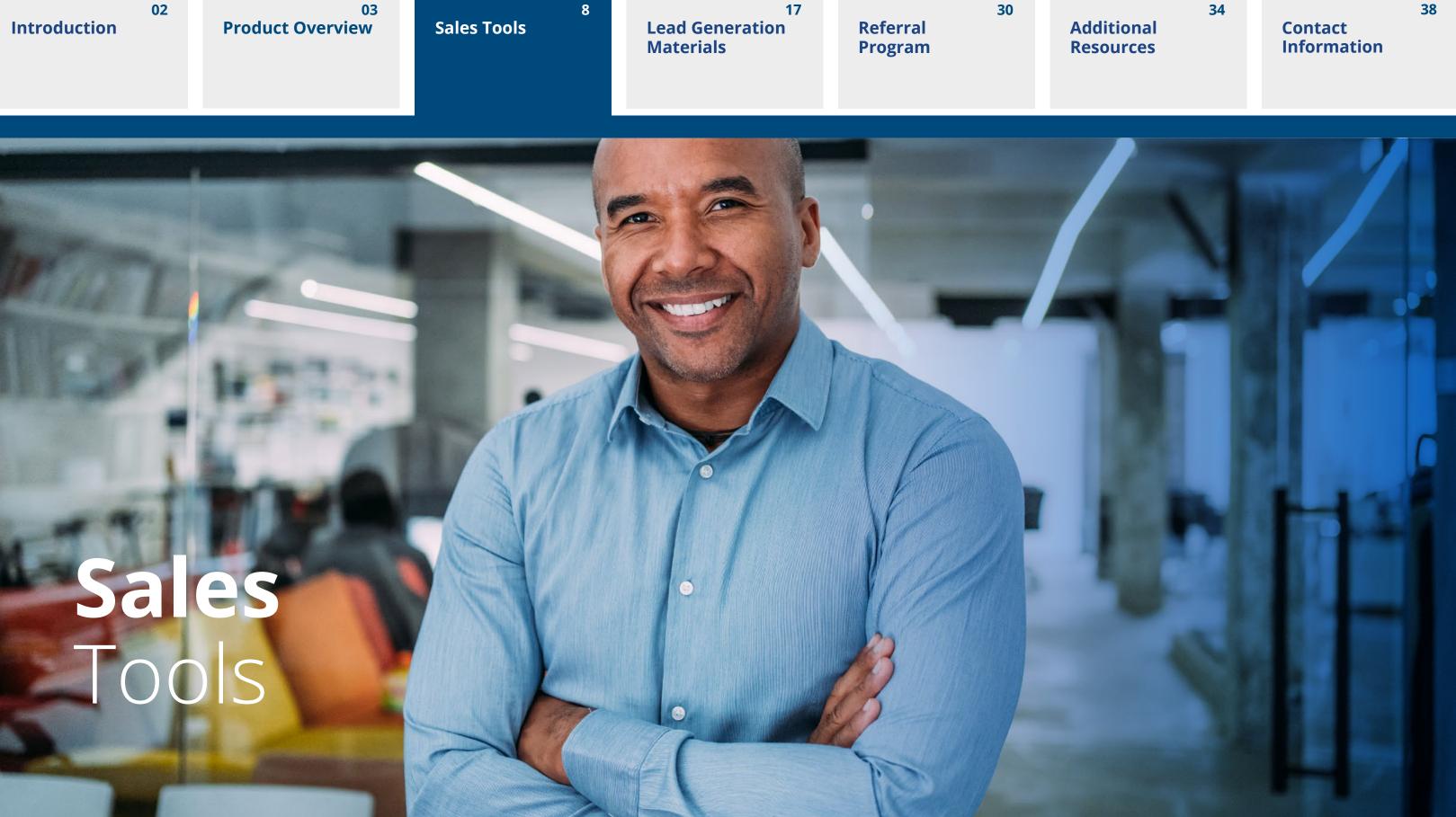
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	Basic Plan Option	Comprehensive Plan Option	Innovative Plan Option	Budget-C	
Effective 04/01/2023	Plan A	Plan G	Plan G Plus	High Deductible Plan G*	Plan N
Basic Benefits	$\checkmark$	√	√	√	√ copay applies**
Skilled Nursing Coinsurance		√	$\checkmark$	√	$\checkmark$
Part A Deductible		√	√	√	√
Part B Excess		√	√	√	
Foreign Travel Emergency Care		√	√	√	√
24/7 Nurseline	$\checkmark$	√	$\checkmark$	√	$\checkmark$
SilverSneakers® Fitness Program			√		
Dental			$\checkmark$		
Hearing	√	√	√	√	~
/ision			$\checkmark$		
*Plan N requires a copayment of up to \$20 for of slue Cross*, Blue Shield* and the Cross and Shield wellness program owned and operated by Tivity H n the USA and/or other countries. Hedicare Supplement Insurance Plan Notice:	ffice visits and a copayment of up to d Symbols are registered service ma lealth, Inc., an independent compar	the plan begins to pay. Once the plan deductible is \$50 for ER. rks of the Blue Cross and Blue Shield Association, a y. Tivity Health and SilverSneakers <sup>®</sup> are registered to ew Mexico, a Division of Health Care Service Corpor	n association of independent Blue Cr rademarks or trademarks of Tivity H ration, a Mutual Legal Reserve Compa	oss and Blue Shield Plans. Sih ealth, Inc., and/or its subsidiar	verSneakers® is a ries and/or affiliates of the Blue Cross







BlueCross BlueShield of New Mexico

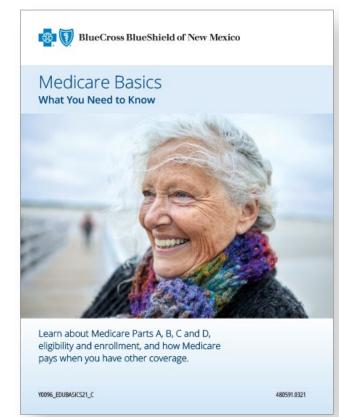
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## **AEP** Marketing Materials

To view these guides, visit the producer supply portal.

#### **Medicare Basics**



#### Age-In Ease into Medicare



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# MAPD Marketing Materials

To view the MAPD Plan Comparison Charts for all markets, visit the producer supply portal.

#### MAPD Plan Comparison Charts

In-Network         Dut-of-Network         In-Network         Out-of-Network         In-Network         Out-of-Network         In-Network         Out-of-Network         Not-Network         Out-of-Network         Stot copy			Choice Pren	licare Advantage nier (PPO)™ 6-012	Blue Cross Med Dental Pren H166		Health Cho H166	licare Advantage bice (PPO) <sup>sM</sup> 66-014	Saver Plu H166	ficare Advantage us (PPO)™ 56-015	
Primary Care Provider Volts         S0 copay         \$30 copa						\$0		\$0			
Specialet Veits         \$25 copay         \$75 copay         \$45 copay         \$75 copay         \$850         \$8000         \$8,950											
Maintum Dut-of-Poolet         93.000         97.950         97.950         97.13.00         94.900         98.950         96.000         98.950           Inpatient Hospital Copay         \$2.65/day for days 1-6         \$5.00/day         \$3.70/day for days 1-6         \$5.00/day         \$5.90/day         \$5.90	Primary (	Care Provider Visits	\$0 copay	\$30 copay	\$0 copay	\$30 copay	\$0 copay		\$0 copay	\$30 copay	
Impatient Hospital Copy         \$265/day for days 1-6         \$500/day         \$370/day for days 1-6         \$500/san for day         \$500/day <t< td=""><td></td><td></td><td>and the second se</td><td></td><td>and the second se</td><td>and the second se</td><td></td><td></td><td></td><td>and the second se</td><td></td></t<>			and the second se		and the second se	and the second se				and the second se	
Preferred Retail Pharmacy Copuys       \$098/847/5100/23%       \$15/820/847/5100/25%       \$1000/25%       \$1000/25%       \$1000/25%       \$1000/25%       \$1000/25%       \$1000/25%       \$1000/25%       \$1000/25%       \$1000/											
Prescription Drug Deductible         50         \$545 (Tilers 3-5)         \$545 (Tilers 3-5)         \$545 (Tilers 3-5)           Predered Pharmacy Network         Albertsons, Waigreens		contract and and			and the second	and the second design of the second se		and the second state of th	and the second se	and the second se	
Preferred ParmarQV Network         Abertsons, Walgreens         Abe											
Buttine Preventive         \$00 copay, 2 exams, 2 cleanings, 1 X-ray         \$00 copay, 1 exam/year         \$00 copay, 2 exams, 2 cleanings, 1 X-ray         \$00 copay, 1 exam/year							\$545 (T	iers 3-5)	\$545 (1	iers 3-5)	
Dental         Comprehensive         \$2,000 annually         \$5,000 annually         \$1,000 annually         \$1,000 annually         \$1,000 annually         \$1,000 annually         \$1,000 annually         \$1,000 annually         \$40 allowance         \$0 copig; 1 exam/year         \$40 allowance         \$1,000 annually         \$40 allowance         \$100 annual         \$40 allowance         \$40 allowance         \$100 annual allowance         \$40 allowance         \$40 allowance         \$40 allowance         \$100 annual allowance         \$40 copig; 1 exam/year         Not Covered <th< td=""><td>Preferred</td><td>a second s</td><td colspan="2"></td><td></td><td></td><td></td><td colspan="2"></td><td>and the second se</td><td></td></th<>	Preferred	a second s								and the second se	
Comprehensive         51,000 annually         54,000 annually         55,000 annually         55,000 annually         55,000 annually         55,000 annua	Dental	Routine Preventive									
Vision         fardware/Contacts         \$100 annual allowance         \$100 annual allowance         \$100 annual allowance         \$100 annual allowance           Hearing Exam         \$0 copay: 1 exam/year         Not Covered	bernor	and the second se	\$2,000		\$5,000 a		\$1,000		\$1,000		
National Allowance         \$100 annual allowance <t< td=""><td></td><td></td><td>\$0 copay; 1 exam/year</td><td>\$40 allowance</td><td>\$0 copay; 1 exam/year</td><td>\$40 allowance</td><td>\$0 copay; 1 exam/year</td><td>\$40 allowance</td><td>\$0 copay; 1 exam/year</td><td>\$40 allowance</td><td></td></t<>			\$0 copay; 1 exam/year	\$40 allowance	\$0 copay; 1 exam/year	\$40 allowance	\$0 copay; 1 exam/year	\$40 allowance	\$0 copay; 1 exam/year	\$40 allowance	
Hearing Adds         \$699 or \$999 copay         Not Covered         \$600 por \$500 parterly allowance         Not Covered         \$600 parterly allowance         Not Covered         Not Covered         \$600 parterly allowance         Not Covered         Not Covered         \$600 parterly allowance         Not Covered         Not Covered         \$600 parterly allowance         Not Included         Not Included         Not Included         Not Included         Not Included         Not Applicable         Part Marene State         Part Marene State         Part Marene State         Part Marene State	Vision		\$100 annual allowance		\$100 annual allowance		\$100 annu	al allowance	\$100 annu	al allowance	
Image: Image: Program     Stage: Stage	Hatrina	Hearing Exam	\$0 copay; 1 exam/year	Not Covered	\$0 copay; 1 exam/year	Not Covered	\$0 copay; 1 exam/year	Not Covered	\$0 copay; 1 exam/year	Not Covered	
SilverSneakers* Fitness Program Included Include Included Included Included Included	nearin 8	Hearing Aids	\$699 or \$999 copay	Not Covered	\$699 or \$999 copay	Not Covered	\$699 or \$999 copay	Not Covered	\$699 or \$999 copay	Not Covered	
Rewards Program <sup>3</sup> Earn up to \$100 in Gift Cards           Transportation         Not Included         Not App         Not Included         Not App         Balke Restorative         Not Included         Not App         Select 11         Select	Over-the-	Counter?	\$100 quarterly allowance	Not Covered	\$50 quarterly allowance	Not Covered	\$50 quarterly allowance	Not Covered	Not in	cluded	
Transportation     Not Included     Not Included     Not Included     Not Included       Telehabit Services     \$0 copay, virtual visits     Not Covered     \$0 copay, virtual visits     Not Included       Telehabit Services     \$0 copay, virtual visits     Not Covered     \$0 copay, virtual visits     Not Included       Buy Down     Not Applicable     Not Applicable     Not Applicable     Not Applicable       Annual Allowance     \$1,000     Basic Restorative     Not Included     Not Applicable       Major Restorative     Not Included     Not Applicable     Not Applicable       Vision     Major Restorative     \$0% coinsurance     \$0% coinsurance       Vision     Hardware/Contacts     Not Included     Not Included	SilverSne	akers <sup>®</sup> Fitness Program	Included		Included		Included		Included		
Telehealth Services \$0 opag virtual visits Not Covered \$0 opag virtual visits Not Cove	Rewards	Program <sup>3</sup>	Earn up to \$100 in Gift Cards		Earn up to \$10	0 in Gift Cards	Earn up to \$100 in Gif		Earn up to \$100 in Gift Cards		
lear lear in Seriodes Seriodes 19 000 gay, Yittian Vision 19 000 gay, Yitt	Transpor	tation	Not In	cluded	Not In	duded	Not In	cluded	Not in	cluded	
Buy Down Not Applicable Device Student Not Applicable Not Applica	Telehealt	th Services	\$0 copay; virtual visits	Not Covered	\$0 copay; virtual visits	Not Coused	\$0 conservation lukelite	Not Coused	\$0 conservational valette	Not Counted	
Optional Supplemental Benefits Plan*         Basic Silver         Basic Silver         Basic Silver         Bit Cross Blue Cross Blue Shield of New Mexico           Routine Preventive         Not Included         Blue Cross Blue Shield of New Mexico         Blue Cross Blue Shield of New Mexico           Dental Comprehensive Comprehensive Comprehensive Syston         Not Included         Not App         Blue Cross Blue Shield of New Mexico           Vision         Not Included         Not Included         Not App           Vision         Soft coinsurance         Soft coinsurance           Vision         Not Included         In-Net	Flexible	Spend Card <sup>e</sup>	Not In	cluded	Not In						
Annual Allowance         \$1,000           Routine Preventive         Not Included           Back Restorative Comprehensive Comprehensive         Not Included           Vision         Not Included           Hardware/Contacts Allowerse         Not Included	_	the second s	Not Ap	plicable	Not Ap						
Routine Preventive         Not Included           Basic Restorative Comprehensive Comprehensive         Not Included         Not App           Vision         Solid collisurance Hardware/contacts         Solid collisurance	Optional	and the second design of the	and the second se			Blu Blu	eCross BlueShield o	f New Mexico			
Dental Comprehensive			\$1,1	000							
Dental Comprehensive Comprehensive Comprehensive         Not Included         Not App         Select ( Major Restorative Hardware/Contacts         Select ( Major Restorative Comprehensive         Sold colorsurance         Film         Select ( Major Restorative Hardware/Contacts         Sold colorsurance         Film         Select ( Hardware/Contacts         Sold colorsurance         Film         Select ( Hardware/Contacts         Sold colorsurance         Film         Select ( Hardware/Contacts         Sold colorsurance         Sold colorsurance         Select ( Hardware/Contacts         Sold colorsurance         Sold colorsurance         Select ( Hardware/Contacts         Sold colorsurance         Select ( Hardware/Contacts         Select ( Hardware/Contacts         Sold colorsurance         Select ( Hardware/Contacts         S		Routine Preventive	Not In	cluded	1						
Najor Relocative 20% coinsurance 50% coinsurance 91% coinsuran	Dental	Comprehensive	Not In	cluded	Not Ap;						Select (HMO) <sup>SM</sup>
Vsion Allowsho			20% coinsurance	50% coinsurance							H3251-002
Vision Allouiseco Not included						Plan Premium					\$0
Allowance Primary Care Provider Visits \$0 cc	Vision	Allowance	Not In	cluded		Driman Cara Dra	idea Meite				In-Network \$0 copay

		Blue Cross Medicare Advantage Select (HMO)™ H3251-002
Plan Pr	emium	\$0
		In-Network
Primary	Care Provider Visits	\$0 copay
Specialis	t Visits	\$17 copay
Maximur	n Out-of-Pocket	\$3,900
Inpatien	Hospital Copay	\$265/day for days 1-6
Preferre	d Retail Pharmacy Copays	\$0/\$8/\$47/\$100/33%
Prescript	ion Drug Deductible	\$0
Preferre	d Pharmacy Network	Albertsons, Safeway, Smith's, Walgreens, Walmart and independents
Dental <sup>1</sup>	Routine Preventive	\$0 copay; 2 exams, 2 cleanings, 1 X-ray
Dental	Comprehensive	\$2,000 annually
	Routine Eye Exam	\$0 copay; 1 exam/year
Vision	Hardware/Contacts Allowance	\$100 annual allowance
Hearing	Hearing Exam	\$0 copay; 1 exam/year
Hearing	Hearing Aids	\$699 or \$999 copay
Over-the	Counter <sup>2</sup>	\$130 quarterly allowance
SilverSn	eakers® Fitness Program	Included
Rewards	Program <sup>3</sup>	Earn up to \$100 in Gift Cards
Transpo	rtation	12 one-way trips
Teleheal	th Services	\$0 copay; virtual visits
<b>Flexible</b>	Spend Card <sup>4</sup>	\$1,000 annual allowance; Dental/Vision/Hearing
Buy Dov	n	Not Applicable
Optional	Supplemental Benefits Plan <sup>5</sup>	
	Annual Allowance	
	Routine Preventive	
Dental	Basic Restorative Comprehensive	Not Applicable
_	Major Restorative Comprehensive	
Vision	Hardware/Contacts Allowance	



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## New Mexico - statewide ew Mexico - limited counties

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	New Mexico (HMO)
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# MAPD and PDP Marketing Materials

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To view the Plan Options Guides, visit the producer supply portal.

#### Plan Options Guides



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MAPD HMO MAPD PPO Flex (PPO) PDP DSNP



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MAPD and **PDP** Marketing Materials

To view the DigiKit, visit the producer supply portal.

MAPD/PDP DigiKit



Blue Cross Medicare Advantage<sup>SM</sup> Blue Cross MedicareRx (PDP)<sup>SM</sup>



- -Enrollment Forms
- -Summary of Benefits
- -Formularies
- -Pharmacy Directories

#### You can also find these Important Forms and Disclosures in the DigiKit:

- -Star Ratings
- -Provider Finders



#### Contact Information

### Please refer to the DigiKit for direct links to:

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-Scope of Appointment Form -Non-Discrimination Disclosures

-Flex Plan Provider Notification Letter -Optional Supplemental Benefits Enrollment Forms





## MAPD and **PDP** Marketing Materials

To view the MAPD and PDP sales presentations, visit the producer supply portal.

MAPD Sales Presentation



Medicare Prescription Drug Plan Overview

Y0096\_PDPEXTSALESPRES24\_M



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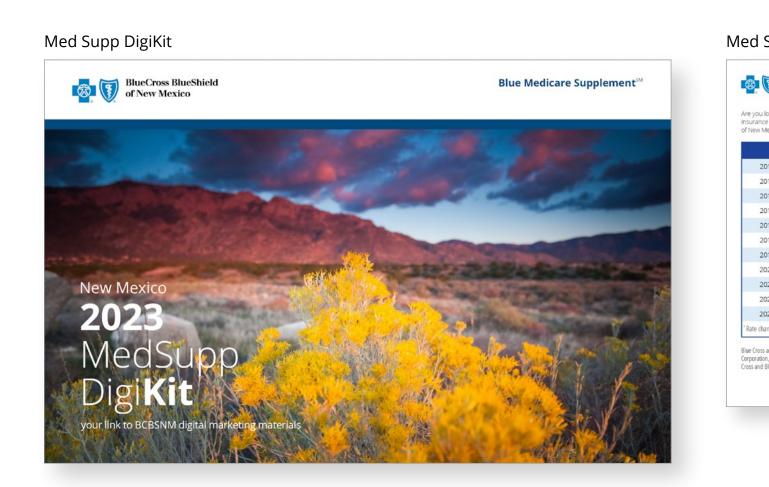




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# **Med Supp** Marketing Materials

To view these Med Supp materials, visit the producer supply portal.



#### Contact Information

#### Med Supp Yearly Rate Change flyer

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e plan covera	able rates for your Medicare Supplement ge? Over the years, Blue Cross and Blue Shield red premiums without gimmicks like teaser rates,
Medicar	e Supplement Rate History*
013	1.5% Rate Increase
014	1% Rate Increase
015	2.6% Rate Decrease
016	3.3% Rate Increase
017	7.6% Rate Increase
018	4.7% Rate Increase
019	3.4% Rate Increase
020	4.3% Rate Increase
021	Rate Hold
022	9.5% Rate Increase
023	3% Rate Increase
ange averages a	cross all plans.

476262.1122





# **Med Supp** Marketing Materials

To view the Med Supp sales and education presentations, visit the producer supply portal.

Med Supp Sales Presentation



Med Supp Education Presentation

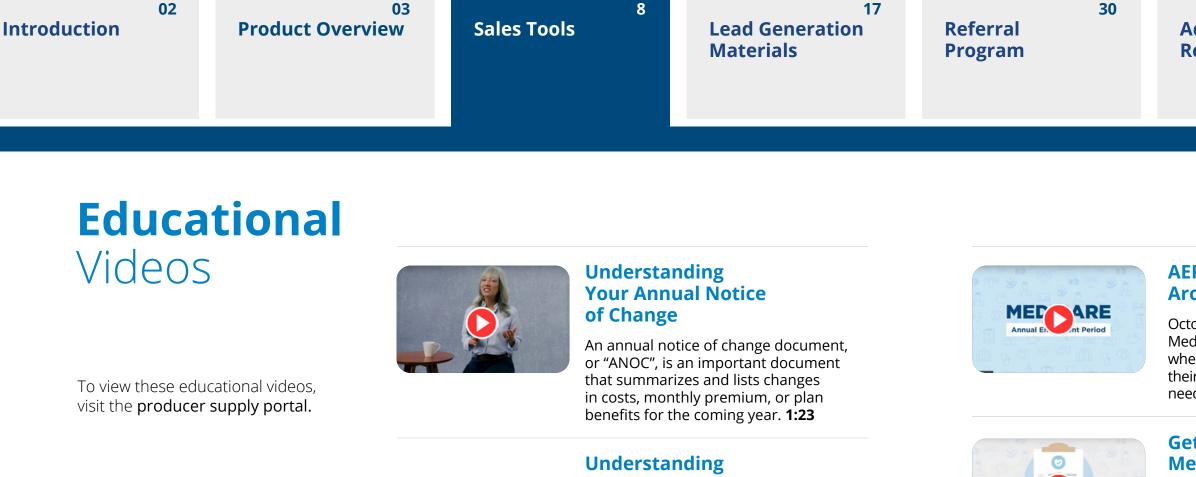




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## Your Evidence of Coverage

In this video, we'll discuss what an Explanation of Coverage is (sometimes also known as an "EOC") and why it's important. We'll also talk about when you will receive an Explanation of Coverage, and how to read it. 1:44

#### **Making Sense** of MACRA

In this video, we'll discuss the Medicare Access and CHIP Reauthorization Act, or "MACRA", a new law that made changes to Medicare Supplement Insurance plans. The law will only affect persons newly eligible for Medicare after December 31, 2019. 1:52

# **NEW TO MEDICARE**

MEDICARE

There are certain times you can sign up for Original Medicare. Since it covers most but not all health care costs, look into a Medicare Supplement Insurance plan or a Medicare Advantage plan to help cover your share of costs. 2:56

#### Contact Information

#### **AEP Is Around the Corner**

October 15 through December 7 is the Medicare Annual Enrollment Period, when members can determine whether their plan will continue to meet their needs the following year. 2:07

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#### **Get the Most from Your Medicare Advantage Plan**

The video spotlights Blue Cross and Blue Shield Medicare Advantage Plans and inspires members to use its many benefits and services, including help to set up medical appointments and to find specialists, prescription drug coverage, zero-dollar preventive services, a large network of physicians and more. **0:53** 

#### New to Medicare?



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# Lead Generation Materials

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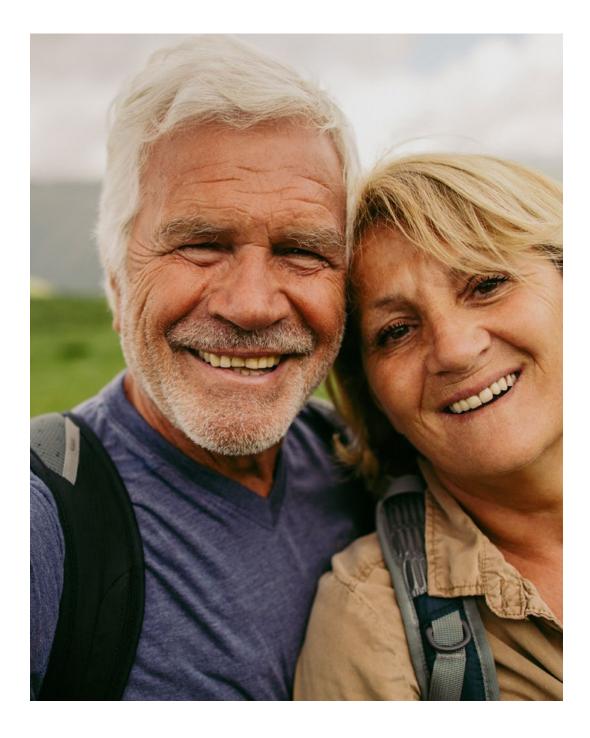
1 Lead Generation Materials

Referral Program

# Overview

These lead generation materials emphasize the value you offer as a local agent to Medicare beneficiaries in your community, who are looking to make insurance decisions.

Use these pieces to attract and encourage existing and new clients to choose a Blue Cross and Blue Shield of New Mexico plan that meets their needs.



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# **Overview**

### **Direct Mail Best Practices**

#### How to Use Direct Mail

- 1. Determine your mailing list
- 2. Download art from Producer supply portal
- 3. Personalize mailers with your contact information/organization's information
- 4. Add trackable phone numbers and/or website information
- 5. Provide printer or post office postage costs, or ensure your postal permit will cover mailing costs

Although **direct mail is considered to be more effective than** other mass media options, the most successful direct mail programs only deliver response rates of between 0.75 percent and 1.5 percent, so it's important to do everything to maximize your success.



### Tracking

- important stages.

### **Helpful Tips**

- your mailing list.

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• During AEP, mailboxes are full, and you don't want your mailing to get lost. Plan to be in front of your prospects at least every other week. Also consider adding to your marketing plan additional media exposure and events, so your piece is more likely to be recognized in the mailbox and read.

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• Most consumers research plans first, then shop, then decide. You'll want to be present and available at every one of these

 Create targeted, proven mailing lists. Data shows that consumers aged 65-75 are more likely to switch Medicare plans than older peers, so be sure that segment is included in

• Use segmented lists. If you're trying to target low-income consumers, they will likely respond better to low-price messages, while higher-income prospects may respond better to value-added benefits or expansive network messages.



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Over	view	Flyers/Print Media	Best Practio	Ces	Sales Pres	sentations	Be

#### When placing an ad in a publication, it's important to know if it will reach your target audience. Before purchasing ad space, here are a few things to consider:

- Demographics ask the publication to supply demographics on their audience to aid your decision-making
- Community sections many communities have local publications that could be a great outlet to deliver your message to consumers in your area
- Senior publications targeted at reaching a large portion of your specific audience
- Planned marketing campaign if you know you will run your ad in a publication multiple times, ask the rep for information on frequency discounts
- Consider print for Medicare segment radio and billboard typically do not drive consumers to call immediately, the only exception being Spanish radio ads, which are only effective for Spanish-speaking agents

### Sales Presentations Best Practices

At a sales event, marketing activities and lead generation can take place, including discussing plan-specific information and collecting enrollment applications.

#### **Helpful Tip**

Be sure to choose the correct sales presentation based on what plan you're selling and personalize it with your appropriate contact information.





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## Lead Generation Materials for **MAPD**

To view these materials, visit the producer supply portal.

#### **Enhanced Dental Postcard**



#### MAPD Seminar Postcard





#### Flex Spending Card Postcard



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Lead		AEP Display Ads	;		AEP Socia	ial Ad
Gener	ation					

#### To view these materials, visit the producer supply portal.

Materials

for **MAPD** 





AEP FSI





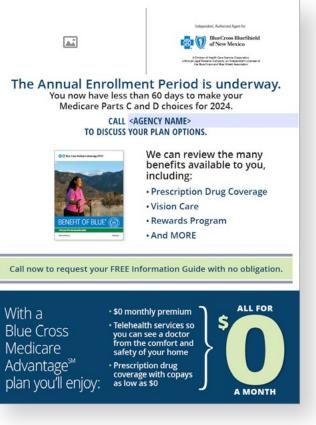
With a Blue Cross Medicare

#### MAPD Lead Card

We can help you t	find a Blue Cross Medicare Ad	vantage	s plan that works	s for you.
information about	get extra benefits and savings at a Blue Cross Medicare Advanta age Dual Care Plus Preferred (P	ge Dual	Care (HMO SNP) <sup>sw</sup>	
Do you have Medic	are Part A and Part B?	□ Yes	□ No	
Do you have Medic	aid (State Medical Assistance)?	□ Yes	□ No	
	data, by Health Care Service Corpor	ation (HCS	C), including any hea	tain government alth care provider
functions performed	l by HCSC or HCSC Affiliates that hok Last	ation (HCS d CMS Med Name	C), including any hea licare contracts.	alth care provider
functions performed	by HCSC or HCSC Affiliates that hok	ation (HCS d CMS Med Name	C), including any hea licare contracts.	alth care provider
functions performed First Name Address City/State/Zipcode _	I by HCSC or HCSC Affiliates that hok	ation (HCS d CMS Med Name	C), including any hea licare contracts.	alth care provider
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functions performed First Name Address City/State/Zipcode _ Phone Number {	I by HCSC or HCSC Affiliates that hok	ation (HCS d CMS Med Name	C), including any hea licare contracts.	lith care provider
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Lead Generation Materials for **Newly** Eligible

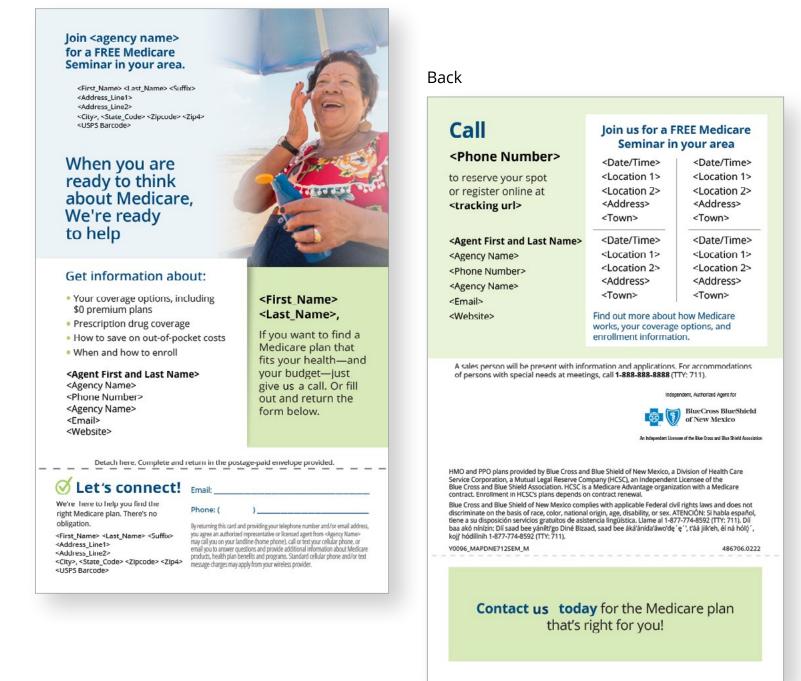
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(7 months from 65)

To view these materials, visit the producer supply portal.

Age-In DM 7-12M (Seminar/No Seminar)

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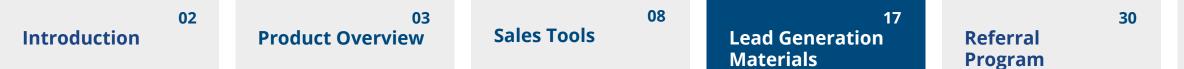
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#### Contact Information

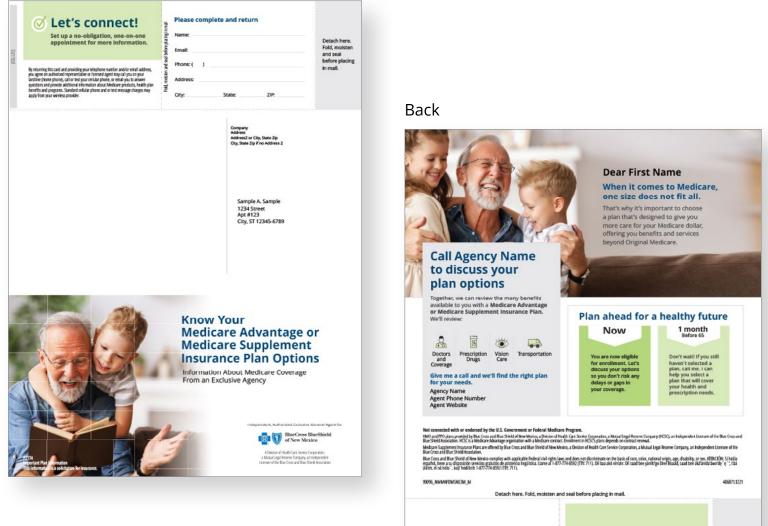




Lead Generation Materials for Newly Eligible (3 months from 65)

To view these materials, visit the producer supply portal.

#### Age-In DM 3M (Seminar/No Seminar)



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Detach here. Fold, moisten and seal before placing in mail.





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(1 month from 65)

To view these materials, visit the **producer supply portal.** 

Age-In DM 1M (Seminar/No Seminar)

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It's t to choose y Medicare A or Medicare	our	Back	
Insurance I Sam 1234 Apti	Plan Ne A. Sample Street 1123 ST 12345-6789	Call Agency Name to discuss your Medicare Advantage or Medicare Supplement Insurance Plan options. Now's the time to make sure you have the coverage you need and avoid government penalities. I'm authorized to help you select the Medicare Advantage or	Now's the time to plan for a healthy future 1 month to go Before 65
Don't wait Get the answers you need on a Medicare Advantage or Medicare Supplement Insurance Plan	Dear First Name You still have time to enroll in a plan that's right for your unique	Agent First and Last Name Agent Vame Agent First and Last Name Agenty Name Phone Number Email Website	Insurance Plan, call me. I can help you select a plan that will cover your needs. We'll discuss: Doctors and Coverage Prescription Drugs Vision Care
from one of our agents.  Detach here. Return in the postage-pa           Image: Constant of the postage	health and budget needs. See the other side to learn more.	Enrollment in HCSC's plans depends on contract renewal. Medicare Supplement insurance Plans are offered by Blue Cross and Reserve Company, an Independent Licensee of the Blue Cross and B	Metrica, 20 Division of Health Care Service Corporation, a Multual Legal Reserve Compar Association. HCSC is a Medicare Advantage organization with a Medicare contract. 18 Blue Shield of New Mexico, a Division of Health Care Service Corporation, a Mutual L Iue Shield Association, gyour enrollment for Medicare Part B, your acceptance is moled in Medicare Part B, your acceptance is guaranteed within sum montris of your PA der age 65, you will also have a six month open enrollment period when you reach age 4 and B, and agoly within six montor for Luring age 65, your acceptance is guaranteed
City ST 12345-6789 (home phone), call (	and proxiding your telephone number and/or email address, you representative or knosed agent may call you on your landthe r test your cellular phone, or email you to answer questions and formation about Medicare products, health plan benefit is and ebular phone and or test message charges may apply from your		<b>ct me today</b> f you qualify!

Available by phone 1-000-000-0000 (TTY 711)

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Lead Generation Materials for Newly Eligible

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To view these materials, visit the producer supply portal.

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With so many plan choices, it's nice to have someone to guide you. There are many benefits that come with Medicare. But sometimes reviewing all the plan options can feel overwhelming. Agency Name ic here to help you make sense of your Medicare options and can even help you find and enroll in the right Medicare plan for you.

Join us for a free, no-obligation Medicare seminar. You'll learn about the different parts of Medicare, the many advantages and benefits of Medicare, how to choose and enroll in the right Medicare plan, and more

Ill walk you through the enrollment process and ma sure you're ready to take advantage of all the benefits that Medicare has to offer from day one. eats are limited so reserve your spot today! For more information, call

Date/Time Location Address Town Date/Time Location Address Town

Date/Time Location Address Town

sizes and does not discriminate on the basis of race, color, national ins grazultus de ackiencia lingüística, Llame al 1.877-774.8992 (TP: 711 1.588 (More, el ná India', Jaco Podellinin 1.607-774.48282 (TP: 711)

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(HCSC), an independent Licensee of the Blue Oros: and B Emgliment in HCSC's plans depends on contract renewal. Blue Gross and Blue Shield of New Mexico o origin, age, disability, or sex. ATENCION: 51 Of base and reining: bit and here visibilities by

1-000-000-0000 (TTY: 711)



your Medicare options. Sign up for a free in-person or virtual seminar. There's no obligation to enroll in a plan when you attand. It's simply a great way to get to know your options and meet others like yourself who will soon be eligible to enroll in Medicane. Seats are limited, so please reserve your spot today. Independent Authorized Amerit fe BlueCross BlueShiek of New Mexico



Age-In Existing Member FSI

SAVE MORE.

GET MORE.

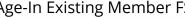
Call 1-000-000-0000 (TTY:711) today.

Important Plan Information 10096\_WAPDEXEMENTFSI\_M

Agency Name is here to help you get more from your Medicare benefits. We'll walk through the Medicare plans, answer questions, and help you make the best choices for you.

As a Dire Cross and Dire Shield of New Mexico member, you know firsthand the advantage of having a trusted health care partner. In addition to getting the benefits you need to stay healthy you can count on knowledgeable advice. That's especially thue now as you prepare to move to Medicare and take advantage of all the benefits and savings it provides.

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#### Additional **Resources**

#### Contact Information

#### Age-In Print Ad (Seminar/No Seminar)

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#### Join <agency name> for a FREE Medicare Seminar Learn more about: Your coverage options, including \$0 premium plans



HMO and PPO plans provided by Blue Cross and Blue Shield of New Mexico, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association, HCSC is a Medicare Awartage organization with a Medicare contract. Brootment in HCSCs plans depends on contract remeval. Blue Cross and Blue Shield of New Mexico complise with applicable Federal ckil rights laws and dees not discriminate on the basis of nace, color, national origin, age, disbibly, or sex. ATBNOON Shibits expanded, there as at disposition services granutes de estismical ingrises. Laime al 47:877-4784592 (TC):11) DL basis do inform Of Sanda beg withing Drie Blazad, saad beg Mikifinidatiwolige (fida jikleh, 6'n htdig, koji hodilnih 1-677-7745592 (TC): 711). Y0096 PRODMAPRINTADSEM M 486094.0622



**BlueCross BlueShield** of New Mexico

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## Lead Generation Materials for **DSNP**

To view these materials, visit the producer supply portal.

DSNP HMO Flyer		DSNP HMO Postcard
DSNP HMO Flyer DSNP H	<section-header><section-header><image/><image/><image/><image/><section-header><section-header><section-header><section-header></section-header></section-header></section-header></section-header></section-header></section-header>	DSNP HMO Postcard
If so, you may qualify: www.www.www.www.www.www.www.www.www.ww	Aedicare Advantage organisation with a Medicare contract and a miract renewal.	<section-header><section-header><section-header><section-header><section-header><section-header><text><text><text></text></text></text></section-header></section-header></section-header></section-header></section-header></section-header>



Independent, Authorized Apen

#### Contact Information

#### DSNP Lead Card

We can help you	find a Blue Cross Medicare Ad	vantage	s plan that works for you.	
information about	get extra benefits and savings at a Blue Cross Medicare Advanta age Dual Care Plus Preferred (P	age Dual	Care (HMO SNP) <sup>sw</sup> or Blue Cross	
	are Part A and Part B? aid (State Medical Assistance)?	□ Yes □ Yes	□ No □ No	
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# **Special Enrollment** Period

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Your client may be able to join, switch or drop a Medicare Advantage Plan and Medicare Prescription Drug Plan during a Special Enrollment Period. Below is a list of some, but not all, of the reasons you may need to change during a Special Enrollment Period:

- Entering or leaving a qualified institution, such as a nursing home
- Qualifying for low-income subsidy assistance (Extra Help)
- Enrolling in Medicaid
- Involuntarily losing creditable prescription
   drug coverage
- $\boldsymbol{\cdot}$  Leaving or losing your employer's health plan

To view these materials, visit the **producer supply portal.** 



SEP Social Ad





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## Get the Most From the **Producer** Supply **Portal**

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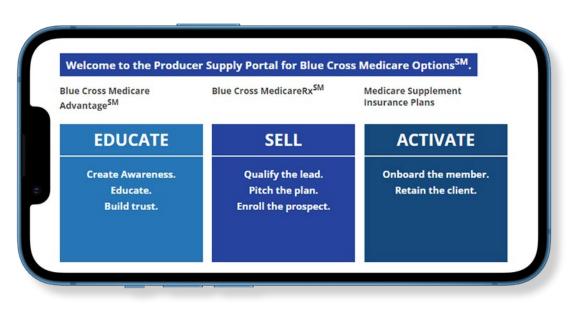
To access the producer supply portal, visit: https://www. yourcmsupplyportal.com/ login.asp.

The Producer Supply Portal for Blue Cross Medicare Options<sup>™</sup> is designed to make your sales efforts convenient and compliant. Certified producers can access materials for:

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- Blue Cross Medicare Advantage<sup>™</sup> Plans
- Blue Cross MedicareRx (PDP)<sup>SM</sup> Plans
- Blue Medicare Supplement Insurance Plans

Your sales and education tools are organized by task. Here's how it looks:



to you.

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#### Instructions

- 1. Select Product Categories from the top navigation ribbon 2. Choose a Product and Language category 3. Roll over the task you want to view 4. Select and view the item you want to order

Contact Information

**EDUCATE** includes all the materials available to educate your prospects whether they are becoming eligible for Medicare, switching plans, or new

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- **SELL** collects all your sales promotion and enrollment tools in one place, by product. Grow your business with these approved marketing materials.
- **ACTIVATE** provides items your newly minted members may need to get started with their plan. Welcome them and stay connected.



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# **Referral** Program

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# **Referral** Program

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#### Producer Referrals Flyer

#### 💿 🚺 Blue Cross Medicare Options"

Medicare Options Referral Program



ed with the Rius Cross and Rius Shield Complete the Medicare Options Producer Referral Submit a referral log within 10 business days

Seling, in

Bas Coss M of the Bas D control to a

s eligible to enroll during.





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Medicare Options Referral Log

🛯 🕡 Blue Cross	Medicare Options		
fedicare Option	5	am	
First Name:	Middle Initial:	Last Name:	
BCBS Assigned ID Numbe	r Email Address		
fodey's Date			
2. Prospect Inform	ation		
First Name	Last Name	DOB	Zip Code

First Name	Last Name	DOB

IMPORTAN

To receive prospect. Fill out the a husbanc Fill out the form using the prospect's legal name the goes by Jim, but their application says James, we want Blue Cross Medicare Options is offered by Blue Cross and Blue Shield of New Mexico, a Di Care Service Comparation a Multial Lengt Beserve Company, as Inferendent Licensee

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		A Producer Medicare Options Referred Program Producer Participation Agreement that be completely a licensed producer who is control of the separated with BCBS. In order to participate in this program a producer must be separated and subject to be terms of the agreement. For a member to be qualified they must be "New to But", the referrant membership reforman had month premame in met. No compensation is even to a referral of the reforman had month premame in the No compensation is even to a referral of the member terminates priori to the required SO-day inflations. Referral payments mode for a referred member will be 100% earned with no charge backs occurring. MOTT: it is the Producer's separately is ensure the accurse of each monthly comparation statement or member terminates for a settered member will be 100% earned with no charge backs occurring. Motter it is the Producer's separately is ensure the accurse of each monthly comparation statement or the Social approach activity is ensure that accursely of each monthly comparation statement or the Botter and Producer's separately is ensure that accursely of each monthly comparation statement or the Social of Buts Died of Botter, But Orea and the Social of the Social of the Social But Orea and Buts Died of Botter, But Orea and the Botter of the Neutron But Orea and the Social of the Social of Each orea and the Social of the Socia	26 #2	(MAPD) plans or stard-alone Presentation Drug Plans (PDP). Referral produces are strictly orpholished from soliting, maktering, providing literature or discussing with prospective clients any permittime, maktering, providing literature of discussing with prospective clients any permittime, maktering, providing literature of Maclical Services (DMS) and BCBs. As a referral producer, you should provide the client with: • Your name or your agency's BCBs assigned 1D number • You or your agency's BCBs assigned 1D number • The declicated anrollment phone number When you are approved your may download personalized Referral Program referral cards from Blau-Access for Producers <sup>2</sup> . Solice the Maclicare Options Referral Program referral cards from Blau-Access for Producers <sup>2</sup> . Solice the Maclicare Options Referral Program or to the referral log, fee abdoule, brochure, and referral cards. Producers may not develop their own version of the Referral Program referral cards. Producers may provide clients with their existing busines acreds in client to the order or provide the producer number, provide clients with their existing busines acreds in clients the would be producer's many provide clients with their existing to a same and persons for effort and the producer for any provide clients with their existing to a same and persons for sector same and persoducer's approvide clients with their existing to a same and persons for sech referred client who accessfully identifies you or your agency at the referring agency, termains encolided in a septiciabil. Compensation is subject to additional forms and coditions of this Referral Program Period solutions and clients when the infining agency terms and coditions of this Referral Program Period solutions and assigned BCBS producer number.	d08.0719



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<b>Refer</b> Progra		Medicare Refe Call for Medicare Option* Referral Program Call for Medicare information today! 855-745-6928 TTY/TD 711 See Durines hours on back When calling, be sure to provide the following: Producer Name Producer Name Producer Name Producer Name Producer Name Producer Name Producer Medicare Option* Referral Program Call for Medicare Information today! 855-745-6928 TTY/TDD 711 See Lasiness hours on back When calling, be sure to provide the following:	Train Cards     The Coss Medicare Options'     Referral Program     Call for Medicare     Information today1     856-745-6928     TTY/IDD 711     See business hours on back.     When calling, be sure to     provide the following:     Referral Program     Call for Medicare     Information today1     856-745-6928     TTY/IDD 711     See business hours on a back.     When calling, be sure to     provide the following:	Blue Cross Medicare Options*     Referral Program     Call for Medicare     Information today1     855-745-6928     TTY//DD 711     See business hours on back     When calling, be sure to     provide the following:     Producer ID#     Abistion of Hauth Care Service     Consolidate Options*     Referral Program     Call for Medicare     Information today1     855-745-6928     TTY/DD 711     See business hours on back     When calling, be sure to     provide the following:	Blue Cross Medicare Options"     Referral Program     Call for Medicare     information today1     855-745-6928     TTY/TDD 711     See business hours on back     When calling, be sure to     provide the following:     Producer ID#     Abvian of Health Care Brivie     Consolidate Options"     Referral Program     Call for Medicare     Information today1     855-745-6928     TTY/DD 711     See business hours on back     When calling, be sure to     provide the following:	Blue Gress Medicare Options"     Referral Program     Call for Medicare     See builties hours on back     When calling, be sure to     provide the following:     Producer Name     Producer Name     Producer IDB     Abvision of Health Care Sirvice     Comparison, a Mana Legit Internet     Blue Cross Medicare Options"     Referral Program     Call for Medicare     Information today1     855-345-6928     TTY/TDD 711     See business hours on back     When calling, be sure to     provide the following:		

Producer Name

A Division of Heath Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

Producer ID#

Producer Name

Producer ID#

A Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association Producer Name

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A Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensore of th Blue Cross and Blue Shield Association

Producer Name

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A Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

Producer ID#



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### Important Plan Information

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#### Please see the links below for providers, formularies and plan documents https://www.bcbsnm.com/medicare/tools-resources/forms-documents

#### Additional portal items

- 0% cost sharing limited to diabetic testing supplies (meters, strips and lancets) obtained through the pharmacy for a LifeScan branded product (OneTouch Verio Flex, OneTouch Verio, OneTouch Ultra Mini and OneTouch Ultra 2)
- Scope of Appointment (available on the supply portal)
- World Wide Travel Claims: www.bcbsglobalcore.com
- Brand Guidance

#### Transportation (if available)

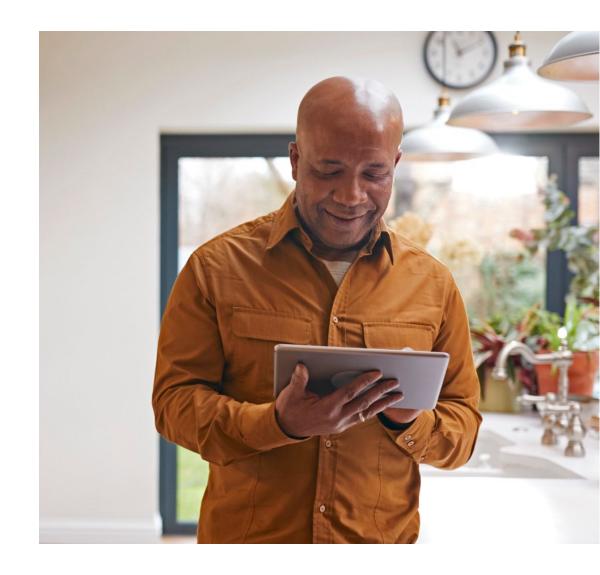
Blue Medicare Ride Assistance is the available transportation vendor. Please call the reservation line below:

844-452-9379 BCBS Medicare Reservations

Issues with the reservation, has there been a delay, etc.

Please call Ride Assist line below:

844-452-9380 IL BCBS Medicare Ride Assist



#### Additional Resources

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BlueCross BlueShield of New Mexico

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### Referral Program

# Additional Resources

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## Times to Enroll

#### **Enrollment Periods**

Annual Enrollment Period (AEP): October 15 — December 7

08

- Initial Enrollment Period (IEP): seven (7) months (your birthday month plus three months prior and after)
- Initial Coverage Election Period (ICEP). IEP AND ICEP USUALLY COINCIDE
- General Enrollment Period Picking Up Part B: (January 1 March 31, effective July 1). Penalty may apply
- Open Enrollment Period annually through March 31. Beneficiaries can make one change to a MAPD or PDP (and back to original Medicare).
- Medicare Supplement enrollment occurs year round

#### **Special Enrollment Periods**

- Change in circumstances
- Moving
- Group or other creditable coverage changes
- Your current plan exits (AEP, and December 8 last day of February)
- Those on LIS and Medicaid now can only change plans every 3 months for the first 9 months of the year

#### **Medicare Supplement Plan Year**

The plan year is the 12-month period during which your Medicare Supplement policy is effective. It is determined by the coverage start and end dates. For example, a Medicare Supplement policy that starts and (renews) on July 1 will continue for the 12-month period through June 30 of the following year.

## Next Steps

#### Next steps to the enrollment

- Prepare for Welcome Kit and Welcome Call
- SilverSneakers www.silversneakers.com
- Tru Hearing <u>www.truhearing.com</u>
- Transportation (see calling directions on page 35)
- Vision Coverage (always choose Select!)

#### Late Enrollment Penalty

Enrollment Penalty.

The cost of the LEP depends on how long the beneficiary went without creditable prescription drug coverage.

The LEP is calculated by multiplying 1% of the "national base beneficiary premium" times the number of full, uncovered months the beneficiary was eligible but didn't join a PDP and went without other creditable prescription drug coverage.

The final amount is rounded to the nearest \$0.10 and added to the beneficiary's monthly premium.

The national base beneficiary premium may increase each year, so the penalty amount may also increase each year.

The LEP will not apply if the beneficiary has Creditable Coverage.



#### Contact Information

Dental Coverage (always choose DPPO!) www.dnoa.com

https://member.eyemedvisioncare.com/bcbsnmind/en

Rewards and Incentive Program <a href="https://www.bcbsnm.healthmine.com">https://www.bcbsnm.healthmine.com</a>

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If a beneficiary enrolls in a stand-alone PDP more than 63 consecutive days after his or her IEP, the beneficiary may be subject to a Late



Materials Program	Ac Re

# Additional Resources

### Billing and Payment Information

- Electronic Funds Transfer (EFT)
- Paper Bill (sent 15 days prior to the due date)
- Social Security Administration (SSA) Deduction
- Railroad Retirement Board Deduction
- The member selects a payment method at the time of enrollment
- Members who do not select a billing option on their enrollment form will automatically receive a paper billing statement
- Important note: if they receive a bill directly, they should pay it; setting up social security deduction or EFT may take at least one payment cycle
- Agents do not collect premiums
- Those on a zero-premium plan will only receive a bill if they are paying a late penalty premium

#### **Blue Cross Medicare Advantage**

P.O. Box 258222 Oklahoma City, OK 73126

#### **Overnight Payments**

Blue Cross Medicare Advantage (PPO) 3232 West Reno Lockbox #258822 Oklahoma City, OK 73107

#### Blue Cross Medicare Rx (PDP) PO Box 268845

Oklahoma City, OK 73126-8845

#### Mail International Claims to:

**BCBS World Wide Center** PO Box # 261630 Miami, FL 33126

#### or: <u>bcbsglobalcore.com</u>

#### Membership Rewards www.BlueRewardsNM.com

### Resources

#### Medicare https://www.medicare.gov/

Extra Help and Medicare Guidance https://www.medicare.gov/manage-your-health



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#### Contact Information



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# **Contact** Information

### Contracting and Agent Support

Regarding	Contact
Medicare Advantage Help Desk	(888) 723-7423
Medicare Advantage Enrollment Fax Line	(855) 895-4747
PDP / MAPD / Part D Help Desk Policy, application and POR related inquiries	(888) 723-7423
PDP / Part D Enrollment Fax Line	(855) 297-4245
Medicare Supplement Help Desk	(877) 587-6638
Medicare Supplement Enrollment Fax Line	(855) 867-6714

#### Regarding

Commissions and Contracting / Producer Administration Phone

Producer Administration Fax

Commissions and Contracting / Producer Service Center Email Commission and certification related inquiries

AHIP or HCSC Certification Inquir

Blue Access For Producers Help (IT Help Desk) Issues with the ComplianceWire website related inquiries

Supply Line Supply and Supply Portal related inquiries

Producer Hotline / Supply Portal Product Questions

Supply Website Ordering PDP/MAPD supplies

AHIP (external number) Inquiries concerning AHIP's website or training

#### Contact Information

	Contact
	(855) 782-4272
	(918) 549-3039
	producer_service_center@bcbsok.com
iries	bmrxcertification@hcsc.net or via BAP
) Desk	(888) 706-0583
d	(888) 655-1357 bcbssupport@summitdm.com
S	cmsalessupport@bcbstx.com
	www.yourcmsupplyportal.com
	(866) 234-6909

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<b>Contact</b> Information			Contra and Ag	acting gent Support					
		alion	Blue Access For Producers (BAP)						
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Blue Access for Producers (BAP):

www.bcbsnm.com/producer

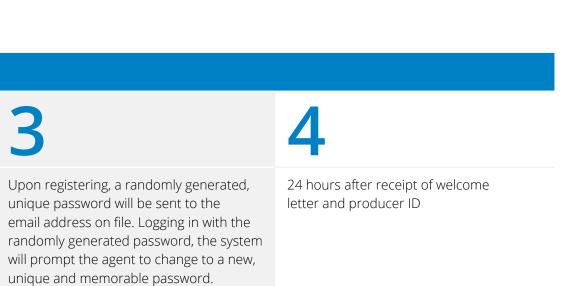
It is essential when enrolling a beneficiary online, that you log into BAP using your PRODUCER NUMBER, and not your agency number. If not, your agent of record status and commissions are put at risk. If submitting a paper application, the same rule applies.

unique and memorable password.

Your 9-digit HCSC-provided producer ID.

#### Additional Resources





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