



2023 Benefit & Organization Training

About Ultimate Health Plans

Section 1



Service Area

Counties Include:

- Citrus
- Hernando
- Hillsborough
- Indian River
- Lake
- Manatee
- Marion
- Orange
- Osceola
- Pasco
- Pinellas
- Polk
- Sarasota
- Seminole
- St. Lucie
- Sumter

NEW

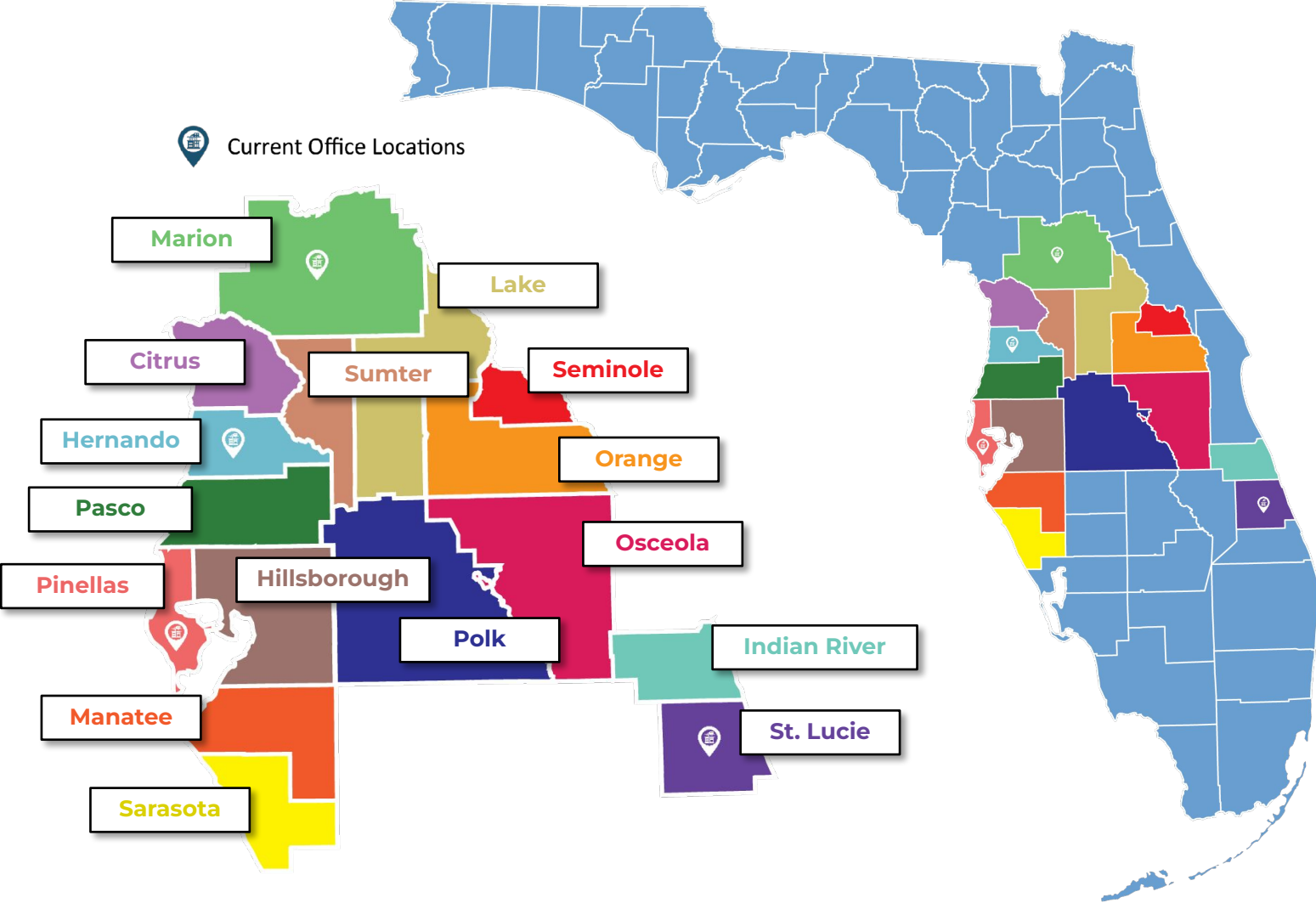
NEW

NEW

NEW

NEW

NEW



Community Outreach Offices



Hernando

2713 Forest Road
Spring Hill, FL 34606



Marion

17820 SE 109th Avenue, STE 103
Summerfield, FL 34491



Pinellas

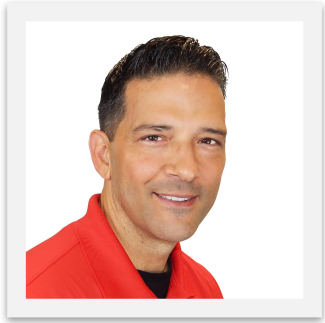
4058 Tampa Road, STE 7
Oldsmar, FL 34677



St. Lucie

600 N US HWY 1, STE A
Fort Pierce, FL 34950

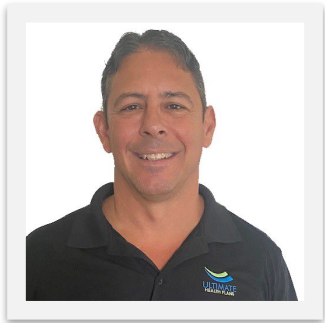
Sales Management Team



Frank Corsones

Email: fcorsones@ulthp.com

- Citrus County
- Hernando County
- Pasco County



Patrick Tate

Email: ptate@ulthp.com

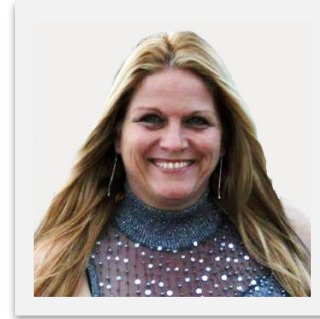
- Hillsborough County
- Pinellas County
- Polk County



Samantha Hall

Email: shall@ulthp.com

- Lake County
- Marion County
- Sumter County



Melissa Price

Email: mprice@ulthp.com

- Indian River County
- St. Lucie County



To Be Announced

- Orange County
- Osceola County
- Seminole County



To Be Announced

- Manatee County
- Sarasota County

Broker Management



Lexi Olson

Broker Manager

Phone: (352) 835-7151

Ext. 6066

Email: lolson@ulthp.com

Agent Information

Section 2



Agent Resources



877-322-4029

Agent Support



agentadmin@ulthp.com

Agent Support



352-515-5969

Application Fax Line



Chooseultimate.com

Ultimate Health Plans
Website



Agent Portal

<https://enroll.myultimatehp.com/agportal#/login>



Appointment Requirements

Annual Agent Application

- Code of Ethics
- Organization HIPAA Training
- AHIP Certificate
- W-9
- Direct Deposit (Optional)

Benefits & Organization Training

Benefits & Organization Exam

- Must score 85% or higher
- Attempts to pass are limited
- Plan materials & self taken notes may be used.



Grievances & CTMs

Ultimate documents disposition of agents as follows:

1. No Action
2. Coach/Retrain
3. Verbal Warning
4. Written Warning
5. Suspension of up to 90 days
6. Termination

CMS holds the Plan Sponsor responsible for agent complaints.

Broker Agent Compensation

\$601 New to Medicare

- Not prorated

\$301 Renewal Years

- Prorated

\$25.08 Lifetime Renewals

Per Month

- As allowed by CMS
- Payments begin in January of the 2nd enrollment year
- Paid if the member remains enrolled in the plan with no lapse in coverage

Commissions & Renewals are paid monthly **by the 28th of each month.**

**Applications are not paid until accepted by CMS. Applications submitted within the last 7 days of the month may not be approved until the following month.

Broker Agent Incentives

\$50

D-SNP Incentive

Agent's can earn \$50 for submitting a new Advantage Plus By Ultimate member's **Health Risk Assessment (HRA) WITH** the enrollment application.

\$50

C-SNP Incentive

Agent's can earn \$50 for assisting a new Advantage Care By Ultimate member with getting their Qualification Verification Form completed by the members provider and submitted to UHP.

Applications must be submitted from October 1, 2022 to December 31, 2022 to qualify for these incentives.

2023 Benefit Presentation Video



Agents must use the Ultimate Health Plans Benefit Presentation during enrollment appointments.

Video can be downloaded from your Ultimate Health Plans Agent Portal

Compliance and Reporting FWA

Compliance is Everyone's Responsibility!

You play a vital role in protecting the integrity of the company and the various government programs with which we participate.

Immediately report suspected non-compliance or FWA to a supervisor, manager, or another management member within your specific reporting structure. You may do so confidentially or anonymously without fear of retaliation or retribution.

If you are uncomfortable about raising concerns directly to a supervisor or if a concern has already been raised and not addressed, employees should report their concerns to one of the following:

Next level of management in the reporting structure:

Compliance Officer
Compliance Hotline
Human Resources

Reporting Mechanisms



Compliance Officer

Isis Pinilla

ipinilla@ulthp.com

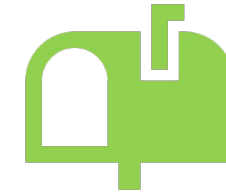
(352) 515-5932



Compliance Hotline

(855) 730-7925 (Toll Free)
compliancehotline@ulthp.com

Available 24 hours a day,
7 days a week, 365.
Reports may be made anonymously.



Direct Mail

c/o Compliance Officer
Ultimate Health Plans

P.O. Box 3459
Spring Hill, FL 34611

Plan Benefits

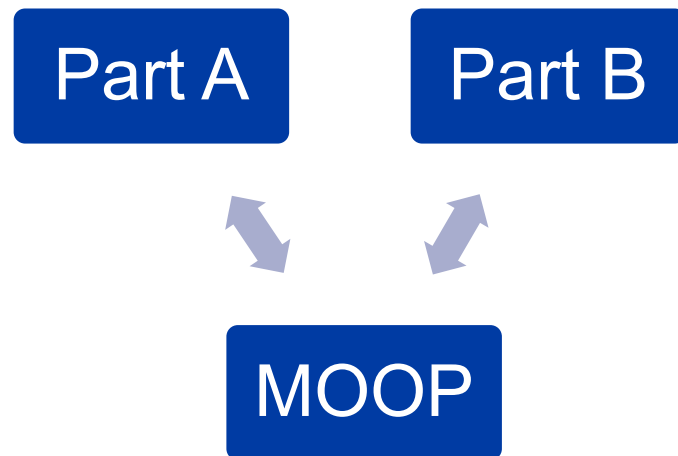
Section 3





Maximum Out-of-Pocket (MOOP)

All our plans have a MOOP limit

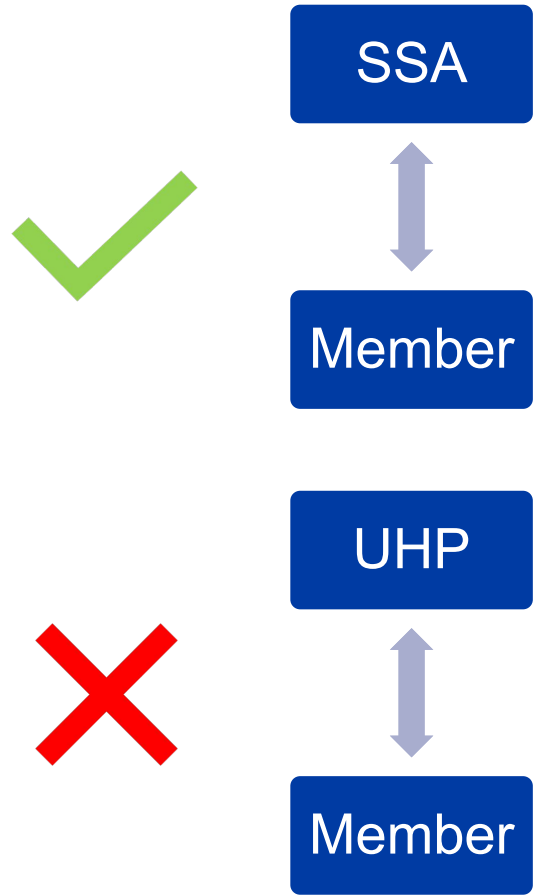
**Out-of-Pocket
Expenses**



**Co-pays that do NOT
go towards the MOOP:**

-  Routine hearing and vision
-  Preventive and comprehensive dental services
-  Part D prescription drugs
-  Emergency services encountered outside of the United States and its territories

Part B Reduction Process



Typically takes up to 90 days after the effective date but could take up to 6 months in rare circumstances to begin receiving the reduction.

If the Medicare beneficiary does NOT have Social Security, the member MUST pay the Part B premium as directed by Medicare, then the member will receive the appropriate Part B reduction amount from the government by check or credit toward owed Part B premiums.

Premier By Ultimate



**High
Part B
Reduction**



**High
OTC
Benefit**

Premier By Ultimate Plans are available in ALL our counties!

Premier Plus By Ultimate



**Low to
No
Copays**



**Low
MOOP**

Premier Plus By Ultimate Plans are available in some counties, including Hernando, Pasco, Citrus, Indian River, and St. Lucie.

Advantage Care By Ultimate (C-SNP)

DM Diabetic

CHF Chronic Heart Failure

CVD Cardiovascular Disease

COPD Chronic Obstructive Pulmonary Disease



High Part B Reduction



High OTC Benefit



Low MOOP



Chronic Care Rx covered through the gap

Chronic Special Needs Plans are available in ALL our counties!

Advantage Plus By Ultimate (D-SNP)



\$125

Monthly
OTC Benefit



\$500

Annual
Eyewear Benefit



\$500

Annual
Flex Card



\$100

Monthly
Food Card

Full & Partial Dual Special Needs Plans are available in ALL
our counties!

Formulary Tiers

- 1 Generic
- 2 Preferred Name Brand
- 3 Non-Preferred Name Brand
- 4 Specialty
- 5 Chronic Care Medication (C-SNP Only)

Part D Benefits

First Dollar Coverage: No monthly premium or deductible for our members.

Initial Coverage Phase:

- **Initial Coverage Limit (ICL) in 2023 \$4,660.**
- While in the Initial Coverage Phase, members pay the co-pay or co-insurance for formulary drugs as determined by the tier level.
- Total cost of the Part D drug paid by both the member and the plan sponsor contribute toward the member's ICL of \$4,660.

Coverage Gap Phase:

- Once someone reaches their ICL they fall into the "Donut Hole".
- While in the coverage gap in 2023 beneficiaries pay 25% of the cost on name brand drugs and 25% of the cost of generics. Part D enrollees will receive a 75% Donut Hole discount on the total cost of their brand name drugs purchased while in the Donut Hole. The discount includes , a 70% discount paid by the manufacturer and a 5% discount paid by the plan. The 70% paid by the manufacturer combined with the 25% paid by the member (95%) count towards the catastrophic phase set at \$7,400. Also, the 25% cost of generic medications paid by the member counts towards the catastrophic coverage limit.

Catastrophic Coverage Phase:

- Once in Catastrophic Coverage, members pay the greater of 5% or \$4.15 for generics, 5% or \$10.35 for all other drugs.
- Co-payment amounts for Excluded Drugs do NOT contribute toward the ICL or Coverage Gap.

Additional Plan Benefits



Mail Order – OptumRx

- 90-day supply for the cost of 60-day supply.
- Discount applies for any drug labeled “MO”
 - Tier-2, 3, 5



Transportation

Included in all our plans



SilverSneakers Program

A no cost fitness benefit with access to 16,000+ fitness locations nationwide



Vaccines

- \$0 co-pay for pneumonia and flu vaccines.
- Shingles vaccines covered at a Tier-3 co-pay.

UHP Health-Related Smart Phone



No Contract or Out-of-Pocket Cost for the Service

- \$35 per month directly from your Over-the-Counter benefit.
- Cancel at anytime
- If the phone is lost, broken, or stolen, the member is entitled to one replacement every six months with no charge.
- Additional replacements within the six-month time-frame have a \$75 deductible.

Pre-Loaded with web and mobile apps, including:

- Ultimate Health Plans Member Portal
- SilverSneakers®
- Digital Hearing Experience - Online hearing test with results
- LabCorp - Schedule appointments and view results
- Built-in Thermometer

Communicate directly with your Ultimate Health Plans providers from the safety and comfort of your home



Plan Material

Section 4



Visit our website for the following plan materials:

- Agent Portal Access
- Drug List Search
- Enrollment Application
 - **Electronic and Printable Versions**
- Evidence of Coverage and Annual Notice of Changes
- Formulary
- Member Portal Access
- Provider and Pharmacy Directory
- Provider Search
- Star Rating



www.chooseultimate.com

Scope of Appointment (SOA)

50.3 – Personal/Individual Marketing Appointments

42 CFR §§ 422.2268(b)(3-5),(11), 423.2268(b)(3-5) and (11)

Scope of Appointment (SOA) parameters (and documentation) are required for all one-on-one appointments, regardless of venue (e.g., home, telephone). During these appointments, discussions may only concern previously agreed upon plan products documented in the SOA, and may only market health-related products, and not, for example, annuities or life insurance.

- Individuals may not solicit/accept enrollment applications for a January 1 effective date until October 15 of the preceding calendar year, unless the beneficiary is entitled under another enrollment period.

Per Ultimate Health Plans policy, no other lines of business can be discussed during an Ultimate Health Plans enrollment appointment or sales/marketing event.

NEW!

Electronic Application Using Sunfire



Login

- **Login here:** <https://www.sunfirematrix.com/app/agent/ult>
- **Username:** Your email address used for your Agent Portal.
- **Password:** X# + [NPN] + first 3 letters of last name in lower case
 - No spaces and no “+” signs.
 - “X” is capitalized.
 - For example, John Smith, who has an NPN 12345678 would have the following password: X#12345678smi
 - **After logging in, you can change your password on your “Agent Profile” of your account.**



Personal URL

Your Personal URL can be found on your “Agent Profile” of your account.

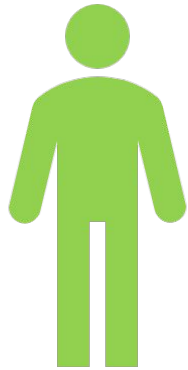
Assisted & Unassisted

Use your account to assist with enrollments.
Your Personal URL can be used for unassisted enrollments.

If you have technical difficulties during an appointment, please use a paper application.

Enrolling a New Member

Leave with Member



- Star Rating Form
- Summary of Benefits with Enrollment Checklist
- Copy of Application
 - Paper Application Only
- Application Confirmation Number
 - Electronic Application Only



Turn In

- Enrollment Application
- Scope of Appointment
- Attestation of Eligibility
 - Required for all enrollments EXCEPT AEP
- Pre-Qualification Form
 - Required for all C-SNP enrollments
- Health Risk Assessment Form

Application Accuracy Is Important! All fields must be completed and legible upon submission to the plan. Ensure the PCP's full name and ID number is correct. PCP ID numbers can be found in the Provider Directory or by calling Agent Support at 877-322-4029.



ULTIMATE
HEALTH PLANS

Good health is where you live.

Thank you!