Sales Policy Job Aid

Permission to Contact and Lead Generation

Permission to Contact Overview

The rules for permission to contact (PTC) in this document apply only to UnitedHealthcare Medicare plans, people interested in or eligible for these plans, and agents who promote them. The term 'agent' also includes 'agency' or 'solicitor' unless stated otherwise.

UnitedHealthcare exclusively owns leads obtained by UnitedHealthcare and its members' information or “Book of Business”. Agents are given access at UnitedHealthcare's discretion. This information is confidential and must not be shared or copied without permission. UnitedHealthcare owned information must only be used to conduct business for UnitedHealthcare and not for any other purpose.

Agents with an active Party ID (PID) can see the members in their active UnitedHealthcare book of business in Jarvis. Solicitors cannot.

Permission to contact (PTC) is when a consumer or plan member agrees to let an agent reach out to them about Medicare plans. PTC has rules about:

- **Who** can be contacted and who can reply,
- **What** information can be shared,
- **How** the contact can be made, and
- **When** the permission starts and ends.

Consumers can give permission to an agent to contact them by:

- Filling out and sending a business reply card (either paper or electronic), or
- Calling, texting, or emailing the plan or a plan representative.

Contacting a consumer without valid or expired PTC is “unsolicited contact”. Except through postal mail, email, or mass market ads, unsolicited contact is prohibited and can lead to corrective or disciplinary action.

Permission to contact must be documented and saved for 10 years.

When permission to contact (PTC) expires and is not renewed, stop contacting the consumer and update your records. After PTC expires without renewal, only contact the consumer through postal mail or email. It is best to ask for renewed permission during your last contact with the consumer.

Do not contact any member who is leaving their Medicare plan to renew permission to contact (PTC) or to discuss a complaint related to you. Also, you cannot market next year's plans before October 1 of the current year, even if you have PTC.

More guidance on permission to contact (PTC) for I-SNP and IE-SNP plans is given in certifications for those plans, which are only for specifically invited agents. This information is also in the Agent Guide on Jarvis.

Who Can Grant Permission to Contact

- Only the person who wants to be contacted or their legal representative can give PTC. You cannot accept PTC from anyone else, even if they live together or are married.
- If someone wants to refer their friend or relative to you, they can give your contact information (like a business card) to that person.

Who can Receive Permission to Contact

Permission to contact can only be received by individuals or entities stated in the PTC mechanism and where applicable, those individuals or entities that the consumer specifically permits to receive their contact information. This means, that the consumer must be informed:

- That their information will be shared with a licensed sales agent (or other appropriate agent title).
- The name of the entity obtaining their information.
- When applicable, they may select which individuals or entities will receive their contact information and a mechanism for the consumer to do so must be explicitly provided.

What Information can be Shared or "Product Scope"

Permission to contact consumers about Medicare plans is limited to:

- **Specific plan types** (like Medicare supplement or Medicare Advantage) chosen by the consumer.
- **Medicare plans** mentioned in the permission to contact statement on a compliant business reply card (BRC) or electronic BRC (online BRC) if the consumer does not specify a plan type.

How Contact may be Made or "Method of Contact"

A consumer's consent must explicitly indicate the methods by which the consumer permits contact. This includes telephonic, voice message, auto-dialed calls/messaging, text messaging, and electronic.

Other than postal mail or email, if you do not have the consumer's express consent you must not initiate contact with the consumer. Note: if the information provided is not correct, do not attempt to correct the information (such as looking up online) and contact the consumer using the corrected information.

Applicable State and Federal Laws
Agents must follow all state and federal laws for their contact methods.

For phone calls:

- Follow telemarketing rules and CMS requirements.
- Comply with the National Do-Not-Call Registry.
- Adhere to the Telephonic Consumer Protection Act (TCPA).
- Respect federal and state calling hours.
- Record all sales calls with consumers.

- Use the TPMO statement as required by CMS.

For emails and other electronic contacts:

- Follow UnitedHealthcare policy and state/federal rules.
- Comply with federal CAN-SPAM requirements.
- Use the TPMO statement as required by CMS.

More guidance on developing content for materials can be found in the Agent Guide and Job Aids on Jarvis.

When Permission to Contact Ends

Permission to Contact (PTC) expiration depends on the type of PTC given:

- Explicit PTC: clear documentation of the consumer giving permission to contact.
- Implied PTC: Based on the consumer initiating contact or having an ongoing business relationship with the agent.
- Delegated PTC: Given to an agent by UnitedHealthcare or the agent's upline, not directly from the consumer.

Explicit Permission to Contact (PTC)
The timeframe for explicit PTC starts on the consumer signature date or the date of their initial request for information.

Explicit PTC ends at the earliest of these times:

- When the consumer or delegating entity withdraws or ends it,
- After 90 days for Medicare Supplement insurance or consumers on the federal Do-Not-Call Registry,
- After 12 months for Medicare Advantage and Part D Plans.

May be granted by the consumer:

- Filling out a compliant Business Reply Card (BRC) or an online electronic Business Reply Card (eBRC).
- Agreeing to future contact verbally during a phone call with an agent, which the agent must document.

Implied Permission to Contact

Implied permission to contact (PTC) exists in three main circumstances.

1. Consumer Initiated Contact:

- If a consumer contacts an agent by phone, text, or email, the agent can respond but only by using the same method unless the consumer specifies otherwise.
- If a consumer approaches an agent at their office, an informal event, or a formal event, the agent can interact without documented permission.

This PTC ends with that specific interaction. For future interactions, the consumer must initiate contact again or the agent must have explicit permission.

2. Agents of Record (AORs):

- AORs can contact members in their active book of business to discuss existing plan details and benefits, and other Medicare plans.

This PTC ends when the agent is no longer the AOR, the member requests it, or the member initiates disenrollment.

Check members' status in your book-of-business on Jarvis before contacting them. If the member is no longer listed do not contact the member through prohibited unsolicited contact. The PHD can confirm if a member is no longer in your book of business and whether a plan change is eligible for the Agent of Record Retention program.

Important Tip

Members can work with any agent, not just their Agent of Record (AOR).

We encourage you to stay in touch with the members you enrolled. You can find various relationship materials in the UHC Agent Toolkit.

Solicitors do not own a book of business; it is owned by their immediate upline.

- Solicitors can contact UnitedHealthcare members to discuss existing plan details and benefits if the member is assigned to them and the solicitor is still under the same hierarchy.

PTC granted to a solicitor ends when the consumer is no longer active in the policy in which the solicitor enrolled them, the solicitor changes hierarchy, the upline reassigns the member, or the consumer requests it.

3. Agents of Record for Other Products:

- AORs for other products (e.g., life, home, or auto) can contact consumers in their active book of business for those products to inform them of their ability to enroll them in a Medicare plan. Note: You must provide proof of the active business relationship if required.

This PTC ends when the consumer disenrolls from the product or requests it.

Delegated Permission to Contact

Delegated Permission is granted by UnitedHealthcare or an agent's upline. It shares the same expiration date as the agent's implied or explicit permission to contact. However, there is one key difference: For explicit permission to contact, the expiration date is calculated from the date UnitedHealthcare or the agent's upline receives the permission—not from the date the delegated agent receives it. Receiving agents must ensure they do not use leads for which permission to contact has expired.

Delegated Permission to Contact

A UnitedHealthcare member's contact information may be provided (delegated) by UnitedHealthcare, an External Distribution Channel, or eAlliance to an agent that is not the agent of record (AOR) for specific business purposes.

The information provided must only be used to conduct business on behalf of UnitedHealthcare. Any other use is not permitted.

If the member becomes part of your book or business, refer to the previous section about implicit permission to contact. (See also UnitedHealthcare AOR Retention Program in the UnitedHealthcare Agent Guide.)

UnitedHealthcare Delegated Permission to Contact

UnitedHealthcare delegates permission to contact (PTC) to an agent for its current members or consumers in these categories:

- *Commercial members* aging-in to Medicare to discuss UnitedHealthcare Medicare products, benefits, or general plan information.
- *MA plan, PDP, or Medicare Supplement plan members* to discuss other UnitedHealthcare Medicare products, benefits, or general plan information.
- *Medicaid/MMP members* to discuss UnitedHealthcare Medicare, benefits, or general plan information.
- Consumers who submitted an enrollment application to conduct business related to the enrollment.

External Distribution Channel (EDC)/eAlliance Delegated Permission to Contact

An EDC agency or eAlliance may provide a UnitedHealthcare member's contact information (i.e. name and phone number) to an agent in its downline. The agent may only use the UnitedHealthcare member's PHI/ePHI/PII to the extent necessary to conduct business on behalf of UnitedHealthcare. Any other use is prohibited. For example, if a UnitedHealthcare member was enrolled by a solicitor under an eAlliance, the eAlliance is permitted to delegate PTC to another solicitor in its downline for the purpose of conducting marketing/sales activities on behalf of UnitedHealthcare.

If an agent (not a solicitor) who is the agent of record is released from the up-line's hierarchy or has submitted to UnitedHealthcare a notice of intent to move hierarchy, that agent's up-line is prohibited from contacting a downline agent's UnitedHealthcare members to retain the agent's UnitedHealthcare book of business. Such contact includes but is not limited to telephone, email, text message, voice message, and postal mail. This provision does not apply to solicitors.

Unsolicited Contact

Unsolicited direct contact with consumers other than by postal mail, email or mass market advertisements is strictly prohibited.

Prohibited unsolicited contact includes:

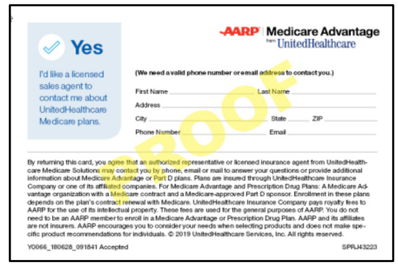
- *Using phone calls*, automated dialing, voice messages, texts, or electronic methods like proximity/push marketing, smartphone apps, or social media features (or similar) without permission to contact (PTC) for these methods.
- *Approaching* a consumer uninvited in a common area (e.g. parking lots, hallways, lobbies, sidewalks).
- *Actively approaching or calling* consumers over at informal events, including asking questions like "Are you interested in saving money?" or "Are you or your family member on Medicare?" is not allowed. Agents can only exchange pleasantries or greetings with passersby.
- *Soliciting consumers while involved in other activities,* like volunteering or participating in social, fraternal, or service organizations, is not allowed.
- *Uninvited visits* to consumer or member residences ("door knocking"), including rooms at assisted living facilities or nursing homes, are not allowed. Always have an agreed appointment with a proper scope of appointment (SOA) before visiting. Permission to contact (PTC) requests must not ask for door-to-door solicitation permission. Having an address does not give such permission.
- *Leaving unrequested materials* on a consumer's property, including their personal room or mailbox at assisted living or nursing homes, is not allowed. Materials can only be left if the consumer is not home for a pre-arranged appointment (e.g. "no show").
- Using "*bait and switch*" tactics by starting a conversation about non-Medicare products and then switching to talk about Medicare plans.
- Using the pretext of *"following up"* with consumers who attended an event or received mailed materials without documented permission to contact (PTC) by means other than postal mail or email.
- Contacting a *Voluntarily disenrolled or disenrolling member* to persuade them to stay enrolled, or to participate in a survey. Additionally, do not ask a disenrolling member for PTC for future marketing.
- *Using MIRA* to obtain contact information for consumers or members for which you are not the agent of record (AOR) unless PTC has been delegated by UnitedHealthcare and for UnitedHealthcare business.
- *Using UnitedHealthcare provided leads* to market any non-UnitedHealthcare product.
- *Using a third party* such as a provider, provider staff, or building manager for any of the above actions.

Except for asking for an email address to access an online event or appointment, you must not require consumers to give contact information to attend an event or receive information verbally or in person.

Forms for Medicare Lead Generation

Forms used to collect consumer contact information for Medicare lead generation are also called Business Reply Cards (BRC) or eBRCs if on a website. These forms must:

- State the name of the entity requesting the information.
- Include a Permission to Contact Statement
- 1:1 Consent option if the contact information will be shared with other TPMOs


Yes

I'd like a licensed sales agent to contact me about UnitedHealthcare Medicare plans.

AARP | Medicare Advantage from UnitedHealthcare

(We need a valid phone number or email address to contact you.)

First Name ______ Last Name ______
Address ______
City ______ State ______ ZIP ______
Phone Number ______ Email ______

PROOF

By returning this card, you agree that an authorized representative or licensed insurance agent from UnitedHealthcare Medicare Solutions may contact you by phone, email or mail to answer your questions or provide additional information about Medicare Advantage or Part D plans. Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies. For Medicare Advantage and Prescription Drug Plans: A Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in these plans depends on the plan's contract renewal with Medicare. UnitedHealthcare Insurance Company pays royalty fees to AARP for the use of its intellectual property. These fees are used for the general purposes of AARP. You do not need to be an AARP member to enroll in a Medicare Advantage or Prescription Drug Plan. AARP and its affiliates are not insurers. AARP encourages you to consider your needs when selecting products and does not make specific product recommendations for individuals. © 2019 UnitedHealthcare Services, Inc. All rights reserved.

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UnitedHealthcare provides pre-approved branded and non-branded BRCs and lead generation materials on the UnitedHealthcare Agent Toolkit.

Agents can create their own BRC/eBRCs without UnitedHealthcare branding or content defined as "marketing" by CMS, without needing pre-approval. For more details on "marketing" vs. "communication" content, see the Agent Guide on Jarvis.

Permission to Contact Statement
A permission to contact (PTC) statement lets consumers know that by giving their contact information, they agree to be contacted by an agent to discuss Medicare plans.

Required elements for a compliant PTC statement:

- Consumer agrees to be contacted.
- Contact will be from a licensed sales agent.
- Discussion will be about Medicare insurance plans (Medicare Advantage, Prescription Drug Plans, Medicare Supplement Insurance).
- Contact method matches what the consumer provided (e.g., phone or email).
- Forms for Medicare Supplement Insurance leads must state, "This is a solicitation for insurance."

This is an example of how a compliant PTC statement might be written:
"By submitting the information above, you are agreeing to be contacted by a licensed salesagent by email or phone call to discuss information about Medicare iInsurance plans. This is a solicitation for insurance."

Additional disclosures may be necessary under federal TCPA guidelines for texting, recorded messages, etc. For assistance in meeting these requirements, UnitedHealthcare recommends consulting your legal counsel.

Consumer Options Provided on a BRC/eBRC

- **Fields for Consumer Information:** Ensure they align with the permission to contact statement.
- **Individual Requesting Contact:** Only one form per person is allowed. Do not include spaces for a spouse or another person's information.
- **Product Selection:** If allowed to choose Medicare plan types (like Medicare Supplement or Medicare

Advantage), only contact the consumer about the products selected.

- **Date of Birth/Tobacco Use/Gender fields:** Date of birth, tobacco use, and gender fields can be used but must be marked as optional. They must be labeled as only for determining eligibility for Medicare Supplements and are not required for Medicare Advantage and Part D plans. Online forms must allow these fields to be left blank or skipped.

- **Consumer Consent to share information**: Effective October 1, 2024: If leads will be shared with another TPMO, there must be a clear and conspicuous listing of each entity receiving the data and the Medicare beneficiary must be able to consent or reject to the sharing of their data with each. Downline agents or agencies that are not W-2 employees must be listed if they will receive leads from the BRC/eBRC.

Reminders about some of the important information you should review in the Agent Guide and other resources on Jarvis in developing forms for consumer contact:

- *Agent Titles:* Use as required in the UnitedHealthcare Agent Guide.

- *Brand Elements:* Guidance about using UnitedHealthcare or affiliate (e.g. AARP) names or assets.

- *Marketing Content:* Submit to UnitedHealthcare using the processes outlined in the Agent Guide and UnitedHealthcare's *Third Party Marketing Organization Medicare Advantage and Prescription Drug Plan Marketing Material Guidelines* for multi-carrier materials.

- *Non-Misleading Content:* about your role as an agent, intent, and the products offered.

- *Avoid discrimination:* Based on age or other demographics.

The following are not BRCs and must not be used for obtaining PTC:

- Sign in sheets, as they do not provide HIPAA compliant protection for consumer information.

- Scope of Appointment (SOA) forms are **not** the same as and are not interchangeable with BRCs/eBRCs. SOAs cannot be combined with BRCs. See the Scope of Appointment job aid for further details on SOAs and their use.

Permission to Contact Record Requirements

All permission to contact you receive, whether verbal, written or electronic, must be documented, retained for ten (10) years, and made available to UnitedHealthcare upon request.

UnitedHealthcare uses a system called "MIRA" to track leads. If you use MIRA, you must only use it for UnitedHealthcare business and only for the leads assigned to you.

If you have access to MIRA, any leads you receive from UnitedHealthcare must be documented and updated in MIRA. If you do not have access to MIRA, you are responsible for documenting and retaining your PTC documentation for the required ten (10) years. Outside MIRA, UnitedHealthcare does not provide a PTC tracking template for agent use.

Keep records that are retrievable by name or other identifier, and capture the following elements:

- Consumer name (or authorized legal representative name),
- Any products specifically requested,
- Preferred contact method expressed by the consumer,
- Date received by you or if purchased from a third party, the date the third party received the PTC,
- End date if the consumer wishes to end the PTC before standard expiration time periods,
- Explicit statement or verbiage indicating the consumer's consent to be contacted.
- If received from another entity, the consumer's consent to provide you with their contact information.
- For online forms also capture:
    - Website's static or dynamic URL (Advertisement, form and consent language as seen by the individual providing permission)
    - IP address of the individual providing permission

Examples of PTC documentation methods:

- Retaining paper lead cards or BRCs in files. (These should be stamped with a receipt date.)
- Documenting PTC in a consumer file
- Documenting PTC in a spreadsheet or database
- For online forms, documented evidence that either:
    - Captures the real-time consumer completion of an electronic lead form/eBRC (e.g., a documentation solution such as Jornaya or TrustedForm); or
    - Provides evidence that the consumer completed the electronic lead generation mechanism. Acceptable documentation includes a lead system generated report or screenshot(s) from an internal lead system.

If evidence of PTC is requested, depending on the method by which you document PTC, you must provide scans of the paper documentation, copies of electronic files, system generated reports or screenshots. An email summarizing or attesting that PTC was obtained is not sufficient.

Any PTC stored electronically must be secured and encrypted. Any suspected or known privacy incidents must be immediately reported to UnitedHealthcare. UnitedHealthcare employees are only permitted to store PHI/PII on a company server, not their work computer or any other device. Review UnitedHealthcare's policy on security and privacy incident reporting requirements in the Agent Guides found on Jarvis.

Lead Generation

A lead is a consumer or plan member who has demonstrated an interest in a UnitedHealthcare product "Actionable Leads" are leads that have been obtained in a compliant manner (including PTC) and not expired. UnitedHealthcare documents and manages the leads it generates in the MIRA system. For any lead you obtain, including leads provided by your up-line, you are responsible for ensuring it meets all federal and state regulations and UnitedHealthcare business rules, prior to using that lead to market any UnitedHealthcare Medicare product. Leads may be generated through any of the following:

- Direct mail campaigns
- Mass marketing advertisements
- Posting flyers in public or common areas as permitted by the location
- Marketing/sales events
- Educational events
- eBRCs provided on Websites or social media platforms

Providers and Lead Generation

Providers are permitted to share information with their patients about the plans in which they participate However, they are not permitted to market plans on behalf of plans or plan agents. This prohibition includes:

- Accepting or gathering scope of appointment forms, enrollment applications or lead cards (BRCs) to convey to the plan or its representatives.
- Managing lead card stations (e.g., emptying, monitoring, conveying contents to plan representatives).
- Making phone calls or directing, urging, or attempting to persuade their patients to enroll in a specific plan based on financial or any other interests of the provider.
- Mailing CMS-defined marketing materials on behalf of Plans/Part D sponsors.

Lead Collection Stations

Lead boxes and/or collection stations must comply with all CMS regulations and UnitedHealthcare rules, policies, and procedures related to obtaining PTC, contacting consumers, marketing materials usage, and marketing/sales activities. You must:

- Obtain permission from the venue before placement.
- Secure the lead box to prevent consumer contact information from unauthorized access. The collection box must be locked and either integrated into or attached to a fixture to prevent unauthorized removal.
- Only use lead cards and marketing materials meeting CMS and UnitedHealthcare policy requirements.
- Keep consumer information private.
- Only use consumer information for the purpose that has been described to the consumer.

- Empty the lead box or collection station weekly at minimum.For UnitedHealthcare branded lead boxes, only use UnitedHealthcare approved materials.

  Immediately report to UnitedHealthcare any suspected or known breach or theft of the lead box, collection station, and/or individual lead cards.

Lead Referral Programs

UnitedHealthcare does not sponsor a lead referral program.

Agent Initiated Programs
If you choose to use a third-party lead generating service, you are responsible for ensuring the leads are obtained compliantly, within compensation limits, do not violate any applicable fraud and abuse laws, including the federal anti-kickback statute, and are compliant with all applicable state and federal regulations. If documented PTC for a consumer on a lead list is not provided, only postal mail or email can be used to market UnitedHealthcare Medicare products to the consumer. Validate any claims by entities to be contracted with UnitedHealthcare.

UnitedHealthcare does not approve or endorse any third-party lead generation company or service. You are responsible for ensuring any PTC or any contact information provided or received complies with any applicable state laws that govern these activities. Consult with legal counsel in your state as needed.

Each entity from which you purchase leads, lead generating material or engage to market or perform enrollment activities on your behalf must be reported by completing and submitting the TPMO Subcontracted Relationship Submitting Form accessible in Jarvis. You must complete a new form to report when a subcontracted relationship ends.

Compensation in Exchange for Leads

- **Members/consumers and providers:** Sending thank you cards or notes is a compliant relationship building activity, but you must not offer any item of value (e.g., gift card, flowers) either up front to solicit or afterwards as a “thank you” in exchange for a referral, from a provider, member or consumer.

- **Other parties:** You must comply with CMS regulations related to compensation limits, commission splitting, and/or payments to non-licensed/appointed agents. UnitedHealthcare recommends agents consult with their own local legal counsel to determine the compliance of any compensation arrangements they make with referrers.

Other Resources for Information

UnitedHealthcare **Agent Guide**: Provides guidance on CMS regulations and UnitedHealthcare rules, policies, and procedures. It is available on **Jarvis**.

Sales Policy Job Aids (available on Jarvis)

- Agent Created and UnitedHealthcare Toolkit Materials Guidelines Job Aid
- Scope of Appointment Job Aid
- Agent Website and Social Media Guidelines Job Aid

Compliance Questions: Submit policy compliance-related questions to compliance_questions@uhc.com.

Jarvis: www.uhcjarvis.com.

Producer Help Desk (PHD): Call 1-888-381-8581 (Español presione la opcion 2) for assistance accessing or using the Jarvis website or the UnitedHealthcare Toolkit.