

LeClair

2025 AEP Prep Playbook

An Agent's Guide for a Successful AEP

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Contents

1. Why This AEP Will Be Different
2. What to Expect This Fall
3. How To Prepare For AEP Starting Today
4. Pre-AEP Checklist
5. Timeline of Events

Why This AEP Will Be Different

Insurance agents have experienced a wild ride over the past few years. In 2021, we faced our first AEP in the midst of a worldwide pandemic. In 2023, we scrambled to implement call recording & storage, and this year, we expect to experience a significant amount of shopping & switching requiring a shift in our strategy.

The flow of AEP prep has been consistent for over a decade. If you're a seasoned Medicare agent, your calendar is similarly timed each year with hosting seminars, conducting annual reviews, generating leads, and helping your current book of business shop. However, there are many factors impacting the 2025 AEP which will lead to major disruption, if you're not prepared.

Inflation Reduction Act

Plan Year 2025 is the first year of the [Inflation Reduction Act's \(IRA\)](#) major Part D redesign changes, including a new out-of-pocket cap on beneficiary spending, new manufacturer discounts to Medicare, and increased financial liabilities for health plans.

On August 16, 2022, President Biden signed the Inflation Reduction Act into law following its passage by both the House of Representatives and the Senate. The IRA was deemed a landmark legislation and one of the biggest federal environmental policies won in decades. Not only did the IRA focus on expanding renewable energy, addressing air pollution, access to clean water supplies, it also touched on social injustices to vulnerable populations. Thus, the aim of financial relief for Medicare beneficiaries was introduced and focused on improving Medicare in a number of ways. Some of those include lowering drug costs, expanding benefits, and stabilizing prescription drug premiums.

Specifically, the Inflation Reduction Act

- Ensures Medicare beneficiaries pay no more than \$35 for a month's supply of each covered insulin product under Medicare prescription drug coverage.
- Lowers Medicare Part D prescription drug costs and redesigns the prescription drug program (e.g., people enrolled in Medicare prescription drug coverage who have very high drug costs will no longer have to pay cost-sharing for their prescription drugs in the catastrophic phase of the program, and caps annual out-of-pocket prescription drug costs at \$2,000 in 2025.)
- Made adult vaccines, recommended by the ACIP, available at no cost for people with Medicare prescription drug coverage starting January 1, 2023, and later in 2023 for people with Medicaid coverage.
- Allows Medicare to negotiate directly with participating drug companies to improve access to innovative treatments for people with Medicare and low costs for the Medicare program.
- Requires drug companies that raise their drug prices faster than the rate of inflation to pay Medicare a rebate and reduces coinsurance for these drugs for people with Medicare under certain circumstances.
- Provides more assistance in affording Medicare prescription drug premiums and out-of-pocket drug costs by expanding the low income subsidy program (LIS or "Extra Help") under Medicare Part D to 150% of the FPL (Federal Poverty Level).
- Extends increased financial help to purchase affordable, comprehensive health insurance plans through Healthcare.gov and the state-based Marketplaces; also impacting Medicare households with spouses under the age of 65.

According to a [CMS.gov Fact Sheet](#), the IRA is accomplishing projected savings for nearly 19 million seniors of an average of \$400 per year when the \$2,000 cap on out-of-pocket prescription drug costs goes into effect this AEP.

Carrier Head Winds

Last year, we saw price increases due to higher claims and higher utilization of benefits post-COVID. Carriers continue to see thin margins and provider groups are creating more challenging network contracts. Additionally, the 20% cumulative inflation over the last 3-years has significantly impacted carrier costs.

You've likely seen articles like, "[Aetna hit with \\$900M in surprise MA costs](#)" or "[GoHealth logged a \\$32.7 million net loss in Q1](#)" and "[Humana plans to leave some Medicare Advantage markets in 2025.](#)" With operating costs and segment expenses continuing to grow in the double digits, insurance companies are seeing the need for a multi-year strategy to build profitability into plans.

Many carriers are anticipating membership declines in 2025, largely because of plan exits and their plan to cut back on supplemental benefits to account for lower rates. Carriers are also facing lower reimbursement rates from CMS with higher medical costs in 2025. CSG Actuarial has shared several carrier Q1 reports over the last few weeks: "[Humana Reports Medicare Supplements and Medicare Advantage Results for 1st Quarter 2024](#)", "[Cigna Reports Medicare Supplement and Medicare Advantage Results for 1st Quarter 2024](#)", and "[Elevance Health Announce 1st Quarter Results.](#)"

In terms of network challenges, since 2023, carriers have steadily seen hospitals and health systems dropping some or all Medicare Advantage plans. In January of 2024, Becker's Payer Issues reported UnitedHealthcare's MA plans went out-of-network with Little Rock, Arkansas-based Baptist Health and Greenville, South Carolina-based Prisma Health. Health systems have cited excessive prior authorization denial rates and slow payments from insurers as a reason for dropping MA plans.

According to [CSG Actuarial's "Trends That Are Shifting the Medicare Advantage Market"](#) article, MA enrollment continues to grow, but not as rapidly as it has in recent years. A new report from health care advisory firm Chartis - in collaboration with HealthScape Advisors - found that the MA market grew by 1.7 million beneficiaries in 2023, a 5.4% increase. That was significantly lower than the previous year's record growth of 2.7 million (a 9.4% increase). Enrollment in 26 states is now 50% or more in Medicare Advantage, and under-penetrated states again saw the greatest growth rates. Another notable data point, especially for home health providers, is that special needs plan (SNP) enrollment grew nearly 22%. With SNP enrollment surging by nearly 1.2 million members, these plans have emerged as a cornerstone of the MA landscape.



Meanwhile, quality concerns remain, as MA plans grapple with declining star ratings. Approximately one-quarter of beneficiaries are now enrolled in plans with less than four stars. At the same time, five-star plan enrollment declined significantly. In 2022 and 2023, 27% and 22% of all membership was in a five star plan, respectively. In 2024, only 7% of membership is in a five-star plan.

This likely has you asking the question, "[Is Medicare Advantage losing its luster?](#)" UnitedHealth and Humana controlled nearly half of the Medicare Advantage market in 2023, according to KFF. Aetna had another

11%, and all Blue Cross Blue Shield plans combined had 14%. Warnings of rising costs and squeezed margins from the largest insurers have made headlines and sent stock prices down, the largest organizations are best poised to weather the storm. Medicare Advantage will continue to grow due to the increased prescription drug plan costs, while members may see a decrease in the number of supplemental benefits. And because of the change in supplemental benefits, you may see many of your current MA members converting to Medicare Supplement insurance plans.

Ultimately, this year will bring a record number of shoppers to the market, and it's important to prepare yourself this year and the next few years for a multi-year disruption.

What to Expect This Fall

With the changes coming to prescription drug costs, increased maximum out-of-pocket, and reduced supplemental benefits, you can expect a record number of shoppers and switchers this AEP.

Healthy, low utilizers of Medicare Supplement insurance plans will see value in a Medicare Advantage plan. High utilizers will benefit from staying with a Medicare Supplement plan, and even make the move to a lower plan (Plan N or HOG).

Over time, this will lead to higher premiums on Medicare Supplement.

This AEP will be like no other! While AEP is usually a time we are rushing to serve our new prospects before Thanksgiving and saving our book of business's annual reviews for the later part of AEP; you can expect to see an influx of calls from your current clients to begin the shopping and/or switching health plans.

If you do not scale your business starting today, your potential to lose significant membership is incredibly high due to the expected disruption.



How to Prepare Starting Today

There are many ways you can prepare for this whirlwind of an AEP. In anticipation of a high number of shoppers and switchers, being prepared is key to your success this AEP.

Hiring Administrative Staff

Hiring administrative staff is an ideal way to help with updating client data to ensure your plan comparison is thorough and seamless.

Additionally, leveraging your admin staff to run retention campaigns is another benefit of adding these individuals to your team. Whether they're making outbound calls to your current book of business or sending reminders to your clients to login to your personal agent website and update prescription, provider, pharmacy information, or scheduling your appointments for you - your administrative team members can become a crucial piece of your AEP prep strategy.

Consider the time you will save with an existing member if all the pre-work is done. An average appointment time would run 20-30 minutes.

Administrative staff can also help recover 'lost leads' or work with current leads to continue capturing/extending permission to contact (PTC) during AEP. This becomes incredibly important for compliant outreach to prospects or former clients.

Downline Agents/LOAs

Hiring downline agents/licensed-only agents (LOAs) is a great way to ensure you can reach your book of business this AEP. If you're unfamiliar with the LOA model, a licensed-only agent is generally a downline agent who simply writes business on behalf of the agency. Any of the new business they write, is 'owned' by the agency. This is a great way to prevent any clients falling off of the books, if the writing agent parts ways with your organization.

The key point to remember is that the LOA addition is to fully serve more members in a short-window of time. While administrative staff



can help prep and schedule your appointments, they cannot run your appointments. If you choose to hire LOAs, you can ensure you're running multiple appointments at one time and helping your prospective and current clients shop and enroll in a best-fit-plan this AEP.

Virtual, Face-to-Face, and Hybrid Meetings

If COVID taught us anything, it taught us about how we can optimize our opportunities when leveraging technology. Consider this: if you're seeing your prospects and clients in a face-to-face setting, you can get to 300 - 400 people during AEP. If you're in a hybrid model (both in-person and virtual options), you can plan on touching between 500 - 600 people this AEP. If you are fully conducting your meetings in a virtual setting, you could anticipate touching 1000 prospects and clients this AEP.

Transitioning your business into a full virtual model this AEP, may not be realistic. Afterall, when it comes to prospects and new clients, it's important to make the face-to-face connection to build rapport and establish your connection. A hybrid model likely makes sense for most Medicare agents. In addition to having your team pre-schedule appointments, register for a passive scheduling tool like Calendly or Microsoft Bookings. Allow your clients to book a meeting and choose whether they want in-person or virtual.

Lead Generation

Lead generation should always be top-of-mind for agents throughout the year. Planning your lead generation strategy today is imperative! If you're an agent still growing your book of business, you want to ensure that you're positioned to grab market share in AEP. The sooner you're able to get in front of prospects, the more you will be able to enroll in AEP.

Grassroots marketing is a great way to generate leads in your community. If you're currently not partnering with providers, pharmacies, dentists, estate planners, or P&C agents in your area - you could be missing out on a lucrative referral stream! [Click here to learn more about grassroots marketing initiatives and how you can create your strategy.](#)

Whether you're a new agent, or an agent looking to grow their business, our lead platform (Integrity Leads) gives you access to exclusive, TCPA compliant leads generated via direct mail, social media, and national TV ads. Some of the lead types you can consider include:

- Real-time inbound call campaigns
- Real-time data leads
- Direct mail custom campaigns
- Social media custom campaigns

Additionally, we have Medicare Advantage leads, T-65 leads, General Medicare leads, and our exclusive PlanEnroll leads! If you're interested in learning more about our exclusive leads and would like to gain access, please reach out to your Agent Pipeline marketer to discuss next steps to setting up your campaign or browsing our lead marketplace.

Have questions about LeadCENTER? Give us a call at 800-962-4693 to learn more about lead costs and average conversion rates.

Leveraging PlanEnroll Agent Website

Your personal agent website (PAW) gives you the ability to streamline data management. It's a convenient way to update your client's relevant information you need to help them find the best-fit-plan. Sending out communications

to your clients so that they understand how to use your personal agent website (PAW) is a great way to leverage this resource. Here are a few examples of reminders you'll want to send to your current clients:

- Remind your clients to create their accounts if they have not already done so. They will need an email address to set up their account.
- Share instructions on how to update their information if they have an account. They can add/remove any new providers, prescriptions, or pharmacy details to their profile.

And because of Profile Linking, you'll see any changes they've made to their account in your Integrity Clients CRM. Simply click their profile in your CRM and review the activity log to confirm they've updated their information.



Pre-AEP Checklist

- Create job posting for administrative team members; begin promoting the job & conduct interviews
- Create job posting for Downline Agents/LOA agents; begin promoting the job & conduct interviews
- Create your training program for your administrative team member - remember to train on FWA, Compliance, HIPAA training, your technology, Medicare 101, and your business processes.
- Create your agent training program - AHIP (FWA, Compliance, Medicare 101), MedicareCENTER, your technology, your business processes.
- Ensure your new Downline Agents/LOA agent contracts are submitted as LOA and create an annual certification checklist for each
- Create a list of annual certifications for you to complete and don't forget to include your AHIP training
- Create a QR code for your personal agent website (PAW) and communicate to your existing clients about using your agent website to manage their important information
- Create a calendar of seminar/events and share the information with carrier reps to see if they can provide branded swag
- Set up real-time campaigns inside of LeadCENTER for your LOAs in areas you want to focus in this AEP
- Create a calendar of outreach for your book of business to prioritize the pre-appointment setting process

Timeline of Events



Training New Hires
Complete AHIP
Complete Certifications



Schedule Appointments
Host Seminars/Events
Finalize Marketing Strategy
Focus on Lead Generation

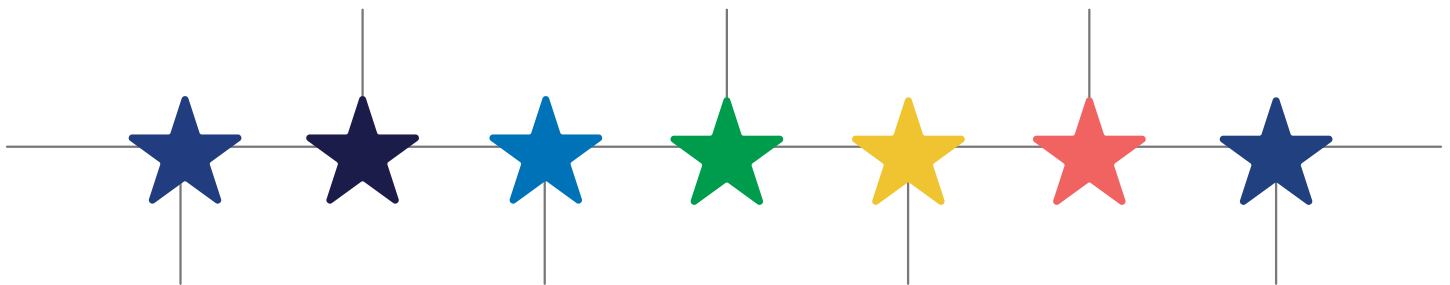


Go Time!

June

August

October



May

July

September

November -
December



Create job descriptions
Post jobs
Conduct interviews
Hire



Thorough Benefits Review
Highlight SARs
Highlight Major Changes
Identify Clients Impacted



Schedule Appointments
Focus on Lead Generation
Host Seminars/Events



Conduct PostMortem
Thank You Cards
Follow Up Framework

Don't miss out on additional tips & tricks to help you prepare for AEP!

Register for VIP Access to Expedition AEP and gain proposed plan previews, updated certification instructions, marketing checklists, and more.