

MARKETING STRATEGY

2023 Agent Marketing
Best Practices Guide

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Marketing Best Practices

Social Media

Set Up a Facebook page for your business

First, ensure you are familiar with and understand all of the CMS guidelines. Second, each carrier's social media policy and complete training (if required). This will help you learn how to set up your Facebook business page, mandatory rules of the road and basic functionality.

Build your social network

Invite friends from your personal page to "Like" your business page and gain visibility. Note that only one unsolicited invitation attempt should be made per person in your network.

Quality over quantity

Focus on building your online network through slow, natural growth to help drive engagement and build relationships authentically. When you dedicate time, energy and effort, consumers will notice. Remember that social media marketing is a marathon, not a sprint.

- You can encourage clients who enroll to "Like" your business page during a sales appointment.
- Give your Facebook URL to prospects and members in accordance with CMS unsolicited contact guidelines.
- Repost content and articles from reputable resources like www.medicare.gov, www.ssa.gov, www.cms.gov, etc. that allow their information to be reposted. Information that is posted should be factual, not misleading or disparaging, and must not imply that you are affiliated with the referenced source.

Marketing Best Practices

Email & Direct mail outreach

92% of adults age 50 and older use a laptop or desktop computer. 70% use a smartphone, and 89% of those to send and receive email or texts.

Today's midlife and older Americans are empowered by and engaged with technology. Your marketing efforts should align with this tech-savvy side of your consumers!

You can leverage email to consistently engage your target audiences through fresh and relevant content. We suggest sending emails to clients who have provided consent to receive emails in your book of business every month as a supplement to other outreach you'll be doing.

Direct mail can be an effective means of driving response because it allows you to target specific people at scale throughout your community. According to the Data & Marketing Association (formerly the Direct Marketing Association), the average direct mail response rate of a prospect list is 5% (as of 2018).

How to execute a successful direct mail program

Who

Who should I try to reach?

We suggest using a targeted and proven mailing list of Medicare-eligible individuals, which will support the best response rates.

What

What should I say to them?

Segment your messaging based on your audience. For example, lower-income prospects may respond better to affordable-cost messaging while higher income prospects may be more drawn to value-added benefits or expansive network messages.

When

When should I reach out?

Plan to be in front of your prospects every other week. If you also develop a presence through other media exposure and events, your piece may be more likely to be recognized in the mailbox and read.

Purchasing Print Media

Print is one of the recommended media outlets for marketing to Medicare eligibles. We want to help you make the most of your print ad placements. To help you achieve maximum impact, we've outlined a few considerations to keep in mind when you are purchasing ad placements.

Always gather information on the publication you're using.

It is important to ensure the publication reaches your specific target audiences. Learn about the publication's reach and reader demographics to confirm they are aligned with your goals.



Consider advertising in community sections of local and/or targeted publications.

Many communities have local publications that are great outlets for delivering your message to consumers in your market, potentially at a lower cost than larger regional publications. Additionally, if available, we recommend choosing publications that reach a large portion of Medicare-eligible population and your specific audience. Keep in mind that marketing efforts should target all those eligible for Medicare, not just those who are eligible due to age.

Plan your marketing campaign in advance.

If you think you might run your ad in a publication multiple times, ask the sales rep for information on frequency discounts, which can save you money across multiple ad insertions.

Community-Based Marketing

What is it? Community-based marketing is about developing strategic community relations and targeted activities where your prospects live, socialize and shop. Why is it important? These relationships and activities are designed to increase exposure and opportunities for agents to build a lead pipeline. They also help you establish visibility, credibility and trust within the community you serve.

Successful community-based marketing strategy

Your personal brand

The foundation of any strong grassroots marketing strategy is ensuring you build your reputation as a trusted resource.

Be known for the right things

- Be rock-solid in knowing the details of the plans, enrollment procedures and verification processes for the products you're selling.
- Return phone calls and emails promptly. Be on time to appointments and meetings.
- Be empathetic and respectful about challenges consumers face. Practice active listening skills and guide clients toward solutions that meet their needs. Be an expert about your market
- Know your customer.
- Understand the competition.
- Understand and follow compliance requirements.

Building relationships

Building relationships with those who also work with the Medicare-eligible population or in the healthcare services industries is the gateway to opening up community-based opportunities. It's important that you don't forget to stay in contact with:

Medical and Medicare-related communities

- Doctors' offices and staff
- Pharmacies
- Local community and/or senior centers
- Long-term care or assisted living communities

Local organizations

- Religious communities
- Social clubs
- Military service organizations
- Professional groups
- Community-sponsored events

NOTE: In these healthcare settings, you must follow CMS marketing guidelines.



Virtual Educational Events

Tips for conducting the event

- Practice first: Be sure to practice executing a virtual event with yourself, fellow agents or sales leaders before you are eye-to-eye with consumers.
- Being comfortable with the technology platform will help allow you to focus on what's most important—the content and your customers.
- Prepare your prospects: Many consumers will be new to the experience, so be sure to tell them what they can do and what they can expect, such as:
 - Before the event, ensure they are comfortable with the technology, and if not, send them some information in advance. If they still run into trouble, encourage them to ask a tech-savvy family member or friend to join them for the event.
 - If the line has not already been muted, ask attendees to mute their line to ensure everyone is able to hear clearly and without disruption.
 - To ensure a seamless presentation for all participants, ask attendees to hold questions until the end or to use the chat function.
- Report your educational event early: All virtual events must be reported at least 10 days in advance and prior to advertising the event.

To report your virtual educational event, provide the following details:

- Event type: virtual
- Meeting URL
- Meeting number (access code)

Virtual educational event rules

These do's and don'ts offer quick, easy guidance for agents planning online events.

Do



- All virtual events must be reported at least 10 days in advance and prior to advertising the event. You must provide your SMSE with the following details:
 - Meeting URL (for example, Zoom link)
 - Call-in number
 - Meeting number (access code)
 - When creating the meeting invite, use the subject line “Medicare 101” or “Medicare Educational Event.”
- Use only preapproved marketing materials.
- Explicitly advertise the event as educational.
- If you need to cancel an event, make sure to notify attendees as soon as possible.
- When receiving RSVPs, ask if they would be willing to provide you with an email address to send the calendar invite to them. Per CMS guidelines, agents cannot require contact information as a prerequisite to attend an event. If the consumer does not want to provide their email address, offer to have them write down the meeting information (Zoom phone number and access code) and mail the approved educational materials in advance.

Do – continued

- Inform callers at the onset that this call is on a group platform and, as such, they should not share personal health information (PHI) that they do not wish to be made public among other attendees.
- Respond to questions asked in the virtual meeting.
- Provide your phone number and/or email address for attendees to contact you at a later time if they choose.
- Mute all participants as a best practice to keep the background noise to a minimum.

Don't

- When creating the meeting invite, don't draft your own meeting details in the description field.
- Only the meeting link should be present.
- Require prospects to provide additional information beyond their name to register or join a virtual event.

This do's and don'ts list is not a comprehensive list of marketing requirements. The agent is responsible for ensuring compliance with all Humana policies and procedures, and CMS requirements at all times.

Key Audiences

Who are these individuals?	Benefits they might be interested in
Original Medicare members <ul style="list-style-type: none">• Consumers who currently are enrolled in government-provided Part A (hospital) and Part B (medical) Medicare insurance• Very responsive to agent recommendations	<ul style="list-style-type: none">• Alternatives to their Original Medicare coverage• Prescription drug coverage and costs• Out-of-pocket costs• Dental coverage
Members changing plans Medicare Advantage members <ul style="list-style-type: none">• Consumers who are currently enrolled in a Medicare Advantage plan (MA or MAPD)	<ul style="list-style-type: none">• Provider access• Monthly premiums• Supplemental over-the-counter (OTC) benefits (e.g., OTC allowance)• Drug costs and coverage
Members new to Medicare Age-in prospects (65+) <ul style="list-style-type: none">• Consumers aging into Medicare• Heavily targeted by all carriers & agents, so likely feeling fatigued or overwhelmed• More tech savvy than you think—more than 90% of age-ins shop online and use email and search engines	<ul style="list-style-type: none">• Affordability of medical and drug coverage• Out-of-pocket costs• Extra coverage (vision, dental, hearing)• \$0 premium monthly plan option• Being securely covered for their healthcare needs• Keeping their doctors

Who are these individuals?

Benefits they might be interested in

New to Medicare

First-time purchasers (late retirees 66+)

- Typically between ages 66 and 72
- Facing a significant life change (e.g., late retirement, losing coverage at work, etc.)
- Resolving their need for health insurance and avoiding late-enrollment penalties
- Monthly premium costs
- Prescription drug coverage and costs

Dual eligible

- Low-income consumers who are eligible for both Medicare and Medicaid
- Typically use more inpatient, emergency room, home health, and skilled nursing facilities than traditional members
- Can generally switch plans once per quarter for the first nine months of the year, not just during the Medicare Advantage and prescription drug plan AEP
- Simple, personalized and frequent communication, either by phone or in person
- Prompt, complete and courteous customer service
- Learning about your state's plan coverage

Veterans

- Likely already covered by Veterans Affairs (VA) benefits, TRICARE, or CHAMPVA
- Services received outside the VA health system from Medicare-certified providers
- Covering inpatient hospitalizations
- Out-of-pocket risks
- Prescription drug coverage

† VETERANS ARE A TARGET AUDIENCE BUT SHOULD NOT BE TARGETED FOR PLAN ELIGIBILITY; MEDICARE ADVANTAGE PLANS ARE NOT RECOMMENDED FOR THOSE WITH TRICARE OR CHAMPVA