

Marks: 1 - *CORRECT ANSWERS* -

Mr. Murphy is an agent. A neighbor invited him to discuss the Medicare Advantage (MA) and Part D plans he sells at the regular Tuesday brunch the neighbors have for senior citizens. What should Mr. Murphy tell his neighbor about the kinds of food that can be provided to potential enrollees who attend the sales presentation? - *CORRECT ANSWERS* -

Choose one answer. - *CORRECT ANSWERS* -

- *CORRECT ANSWERS* -a. The neighbors may not provide a meal, but light snacks would be permitted.

- *CORRECT ANSWERS* -b. Any type of meal or food is allowed, as long as it is available to the general public and not just to those who are eligible to enroll in the plans.

- *CORRECT ANSWERS* -c. The neighbors may not provide anything to either eat or drink during the sales presentation.

- *CORRECT ANSWERS* -d. Any meal is allowed, as long as it is valued at less than \$15.

Question47 - *CORRECT ANSWERS* -

Marks: 1 - *CORRECT ANSWERS* -

BestCare health plan. Which of the following best describes the responsibilities of Ms. Lopez?

- a. Ms. Lopez is considered a marketing representative of BestCare but is exempt from the marketing rules regarding approved call scripts because she works directly for MarketCo.
- b. Ms. Lopez is considered a marketing representative of BestCare and thus is obligated to comply with CMS marketing requirements, including those regarding using only approved call scripts.
- c. Ms. Lopez no longer needs to be concerned about state licensure since she is marketing an MA product subject to federal rules.
- d. Ms. Lopez needs to maintain state licensure, but because she is working for a third-party marketing organization she is exempt from CMS training requirements that apply to BestCare captive agents.

Mr. Edwards, a marketing representative of the ACME Insurance Company, scheduled a marketing event and expects about 40 people to attend. He has hired a magician at a cost of \$200 to entertain attendees. Can he do this in a way that complies with guidance from the Medicare agency? - **CORRECT ANSWERS** a. He can do this because the estimated number of attendees is based on the venue size and response rate and the value of the gift does not exceed \$15.

Mrs. Ramos is considering a Medicare Advantage PPO and has questions about which providers she can go to for her health care. What should you tell her? - **CORRECT ANSWERS** b. Mrs. Ramos can obtain care from any provider who participates in Original Medicare, but generally will have a

- *CORRECT ANSWERS* -a. In general, he must select a single Part D premium payment mechanism that will be used throughout the year.

- *CORRECT ANSWERS* -b. As long as he fills out the paperwork to begin withholding from his Social Security check at least 63 days before such withholding should begin, he can change his method of Part D premium payment and withholding will begin the month after his savings account is exhausted.

- *CORRECT ANSWERS* -c. During 2017, many people experienced significant problems with deductions from their Social Security check for their Part D premium. As a result, this method of payment is no longer an option for Part D premium payments

- *CORRECT ANSWERS* -d. In general, to pay his Part D premium, he only can have automatic withdrawals made from a checking account, so he will need to transfer the funds prior to beginning such withdrawals.

Question10 - *CORRECT ANSWERS* -

Marks: 1 - *CORRECT ANSWERS* -

Since 2004 Ms. Eisenberg has had a Medigap plan that provides some drug coverage. She has recently received a letter from her Medigap carrier informing her that her drug coverage is not "creditable." She wants to know what this means. What should you tell her? - *CORRECT ANSWERS* -

Choose one answer. - *CORRECT ANSWERS* -

- *CORRECT ANSWERS* -d. You are not required to submit communication and marketing materials specific only to those employer plans to CMS at the time of use, but CMS may request and review copies if employee complaints occur.

Question34 - *CORRECT ANSWERS* -

Marks: 1 - *CORRECT ANSWERS* -

Agent Harriet Walker has recently begun marketing Medicare Advantage and related products aimed at meeting the needs of senior citizens. Client Mildred Jones has expressed interest in a Medicare Advantage plan. It is now the beginning of September. If you were in Agent Walker's position, what would you do? - *CORRECT ANSWERS*

Choose one answer. - *CORRECT ANSWERS*

- *CORRECT ANSWERS* -a. Tell the client that she cannot speak to her until after open enrollment begins on January 1st of the following year.

- *CORRECT ANSWERS* -b. Inquire whether the client qualifies for a special enrollment period, and if not, solicit an enrollment application once the annual open enrollment election period begins on October 15th.

- *CORRECT ANSWERS* -c. Solicit and complete the enrollment application in September and wait until the open enrollment date to submit it so that the client does not purchase a plan through another agent.

Mr. Rainey is experiencing paranoid delusions and his physician feels that he should be hospitalized. What should you tell Mr. Rainey (or his representative) about the length of an inpatient psychiatric hospital stay that Medicare will cover? - *CORRECT ANSWERS* -

Choose one answer. - *CORRECT ANSWERS* -

- *CORRECT ANSWERS* -a. Inpatient psychiatric services are not covered under Original Medicare.

- *CORRECT ANSWERS* -b. Medicare inpatient psychiatric coverage is limited to the same number of days covered for typical inpatient stays

- *CORRECT ANSWERS* -c. Medicare will cover a total of 190 days of inpatient psychiatric care during Mr. Rainey's entire lifetime.

- *CORRECT ANSWERS* -d. Medicare will cover, at its allowable amount, as many stays as are needed throughout Mr. Rainey's life, as long as no single stay exceeds 190 days.

Question39 - *CORRECT ANSWERS* -

Marks: 1 - *CORRECT ANSWERS* -

Ms. Gibson recently lost her employer group health and drug coverage and now she wants to enroll in a PPO that does not include drug coverage. What should you tell her about obtaining drug coverage? - *CORRECT ANSWERS* -

- *CORRECT ANSWERS* -a. Medicare Advantage plans are required to create a benefits package that results in roughly equivalent costs and may exclude coverage for some items and services that are covered under Part A and/or Part B of Original Medicare.

- *CORRECT ANSWERS* -b. Though their cost-sharing may differ from Original Medicare's, Medicare Advantage plans are required to cover all services covered by original Medicare.

- *CORRECT ANSWERS* -c. Medicare Advantage plans are required to cover services mandated under health care reform and applicable state law, which may differ from the Original Medicare package of benefits.

- *CORRECT ANSWERS* -d. Medicare Advantage plans differ from Original Medicare in that they are required to cover any service ordered by a physician.

Question41 - *CORRECT ANSWERS* -

Marks: 1 - *CORRECT ANSWERS* -

Ms. Brooks has an aggressive cancer and would like to know if Medicare will cover hospice services in case she needs them. What should you tell her? - *CORRECT ANSWERS* -

Choose one answer. - *CORRECT ANSWERS* -

III. Plans must provide a link to the Medicare.gov website where an enrollee can enter a complaint. - *CORRECT ANSWERS* -

IV. Enrollees have a right to file complaints (sometimes called grievances) about the quality of their care. - *CORRECT ANSWERS* -

Choose one answer. - *CORRECT ANSWERS* -

- *CORRECT ANSWERS* - a. II and IV only

- *CORRECT ANSWERS* - b. I, III, and IV only

- *CORRECT ANSWERS* - c. I and III only

- *CORRECT ANSWERS* - d. I and II only

Question43 - *CORRECT ANSWERS* -

Marks: 1 - *CORRECT ANSWERS* -

Eleanor takes several high-cost prescription drugs. She would like to enroll in a standalone Part D prescription drug plan that is available in her area. In what type of Medicare Health Plan can she enroll if she also wishes to enroll in the standalone Part D plan? - *CORRECT ANSWERS* -