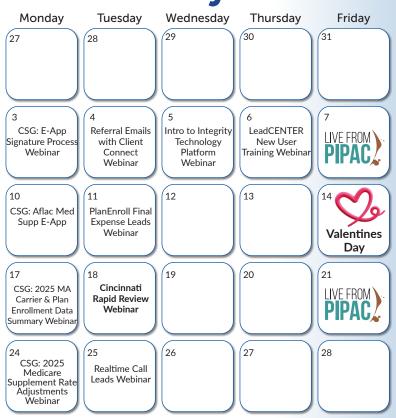
February 2025



### **PIPAC News/Events**

#### **Small Group**

3/1/2025 Effective Dates:

Wellmark and United Healthcare (UHC) new group, renewal and plan change paperwork is due to PIPAC by February 14th. All completed paperwork must be submitted by 3:00 pm to ensure processing.

Please visit www.pipac.com for the complete deadline schedule and other company deadlines.

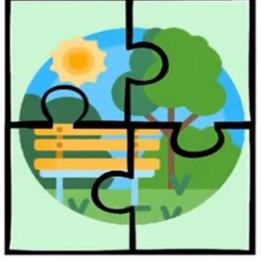
## 2/7/2025 9:00 am PIPAC 2/21/2025 9:00 am

Get the latest news from our PIPAC experts on carrier and industry updates, product highlights, what's hot, system updates and upcoming classes!

**Contact Kaitlyn at** *kaitlyn@pipac.com* **to sign up for these webinars!** 

## Puzzled on what to do Post AEP?







Ask Integrity™



MedicareCENTER and LifeCENTER – first piece to get started with the Integrity Suite of Solutions! Import your clients into ONE place to securely protect your client data for easy client management, quotes, and enrollments.

LeadCENTER – a single source for compliant and real-time lead generation.

PlanEnroll – helps consumers connect with Medicare and Final Expense information and agent guidance allowing them to make informed choices!

Ask Integrity - Integrity's Al-powered solution to help agents build and enhance client relationships

Contact Kenny with any questions, help importing your clients, or scheduling a 1:1 consultation regarding the Integrity Suite of Solutions at kenny@pipac.com or 319-268-7104

## **Your Guide to Client Follow-Ups**

## When Should You Follow Up? What Should You Talk About?

To build strong client relationships, we recommend a 3-30-60-90-day strategy of follow-up conversations after client enrollment. Each one serves a purpose, and together they add up to a better experience for your client while also creating opportunities for you to grow your business.

#### **Scheduling Follow-Up Meetings**

Immediately after you've enrolled your client, let them know you are scheduling four in-person or virtual meetings with them to make sure everything is going well and to cover some important topics. Set up these meetings with specific dates and times for 3, 30, 60, and 90 days after their enrollment, and send the information to your client so they can put it on their calendar.

#### **Conducting the Follow-Up Meetings**

Follow-Up Day	Goals for This Conversation	Topics to Discuss
3	Reestablish communication and thank them for their enrollment. Set a framework for what they can expect from their carrier and from you as their agent.	<ul> <li>Remind them of the plan they enrolled in</li> <li>Let them know their enrollment materials will arrive from the carrier</li> <li>Extend an invitation for them to reach out if they have questions</li> </ul>
30	Your client may not have utilized their plan yet, so they may not have any specific questions. Bring any carrier materials that might be helpful to the client.	<ul> <li>How to pay premiums</li> <li>Benefits of the plan they might not know</li> <li>Resources for caregivers (if applicable)</li> <li>Questions they might have about plan materials they've received</li> <li>Reminder to book annual wellness exam</li> </ul>
60	Build from the last meeting. By now, clients may have feedback on their experience with the plan. If they like the plan, continue the topics from the 30- day meeting. If they are unhappy, you may be able to take steps to address any changes that they need.	<ul> <li>Refresh of topics from last meeting</li> <li>Preventive care options, such as flu shots, cancer screening, etc.</li> <li>Plan satisfaction so far</li> <li>Special programs for seniors in their area they might want to explore</li> </ul>
90	Clients will likely have used their plan by now and will have feedback on how it is working for them. If they are having issues, the agent can take immediate action to try to fix the problem. If the client specifically asks about other plan options and it is within the OEP window, the agent can discuss other plans.	<ul> <li>Refresh of topics from 30-day and 60-day meetings</li> <li>Special enrollment periods, if applicable and compliant</li> <li>Referrals</li> <li>Let client know they can reach out with questions any time</li> </ul>

**FOLLOW US** 







PIPAC.COM 800.765.1710

# **Group Department SPOTLIGHT**



**ARIN** started in the Group Department in December of last year. She loves to spend time with family and camping. Arin's fun fact is that she used to work at Disney

World's Animal Kingdom. The best trip she has been on is visiting the Georgia Aquarium with her son. They enjoyed the whale sharks swimming above them. If she could visit any place in the world it would be the African Safari.

> 4.2.1 Going the Extra Mile

Nominate PIPAC employees for a GEM!

Criteria For Nominating:

A GEM can be something random, unexpected or over the top! A GEM can be Positively Outrageous Service that is out of proportion to the circumstance!

A GEM can be coming up with a solution that solves a problem! A GEM can be someone portraying an example of the "Yes I/We Can" attitude!

A GEM can be tied to one of Integrity's 5 Core Values:

Integrity, Family, Service, Respect, or Partnership

Scan the QR or email Jennifer at jwahl@pipac.com to submit a GEM!







## **International Travel Insurance**

No matter the client, there's a GeoBlue plan for everyone: singletrip takers, frequent travelers and even expatriates!

## Voyager

Single-trip health and accident insurance for international travel, available to those 84 or younger.

- **Guaranteed Issue**
- Choice Plan includes coverage for preexisting but primary U.S. health plan required
- Essential Plan no coverage for preexisting
- Purchased at least 1 day prior to departure

### **Trekker**

Multi-trip health and accident insurance for international travelers, available to those 84 years or younger

- Guaranteed Issue
- Primary U.S. health plan required
- Unlimited trips throughout the year (70 day max per trip)
- One-time yearly premium
- Purchased at least 1 day prior to departure

Contact Jenny today to get appointed to sell GeoBlue at jenny@pipac.com

Contact Abbey at abbey@pipac.com or Jen at jennifer@pipac.com with any questions or for additional information



Individual Health 800.765.1710



individualdept@pipac.com

## **Newly Passed Legislation Modifies ACA Reporting Requirements**

On Dec. 23, 2024, President Joe Biden signed two bills into law that will streamline the Affordable Care Act's (ACA) reporting requirements under Internal Revenue Code Sections 6055 or 6056. Under these reporting rules, certain employers and health coverage providers (reporting entities) must provide information to the IRS about the health plan coverage they offer (or do not offer) to their employees. They must also provide related statements to individuals regarding their health plan coverage.

#### **Individual Statements Only Required Upon Request**

Under existing rules, reporting entities must provide annual statements to each individual who is provided minimum essential coverage (under Section 6055) and each full-time employee of an applicable large employer (under Section 6056). These statements are provided using Forms 1095-B and 1095-C; however, the IRS currently allows Forms 1095-B to be provided to individuals upon request if certain requirements are satisfied.

The Paperwork Burden Reduction Act essentially codifies this alternative manner of furnishing Forms 1095-B and extends this flexibility to furnishing Forms 1095-C. Accordingly, reporting entities are no longer required to send Forms 1095-B and 1095-C to covered individuals unless a form is requested. Reporting entities must give individuals timely notice of this option in accordance with any requirements set by the IRS. Requests must be fulfilled by Jan. 31 of the year following the calendar year to which the return relates or 30 days after the date of the request, whichever is later.

#### **Electronic Consent for Individual Statements**

The IRS currently allows reporting entities to offer Forms 1095-B and 1095-C to individuals electronically. The Employer Reporting Improvement Act codifies this flexibility and provides that statements can be provided electronically to individuals if they have affirmatively consented "at any prior time" (unless they have revoked such consent in writing).

#### **Substituting Birth Dates for TINs**

The new legislation codifies the ability under Section 6055 to substitute a covered individual's birth date in lieu of their taxpayer identification number (TIN). The legislation does not address whether reporting entities are still required to make reasonable efforts to obtain the TIN before doing so.

#### Other ACA Pay-or-Play Provisions

Applicable large employers, or ALEs (generally those with 50 or more full-time employees), are subject to IRS penalties if they do not offer affordable minimum essential coverage under the ACA's employer shared responsibility ("pay-or- play") rules. The new legislation increases the time ALEs have to respond to IRS penalty assessment warning letters from 30 days to 90 days. The legislation also imposes a six-year time limit on when the IRS can try to collect assessments.

#### **Effective Dates**

The changes apply for upcoming reporting that is due in early 2025. The specific effective dates are as follows:

- Statements Upon Request: These changes apply to statements with respect to returns for calendar years after 2023.
- Electronic Consent, Birth Dates: The changes related to electronic statements and substituting birth dates for TINs apply to returns and statements due after Dec. 31, 2024.
- Other ACA Provisions: The extended ALE response time will apply to assessments proposed in taxable years beginning after Dec. 23, 2024. The six-year time limit will apply with respect to returns due after Dec. 31, 2024.
- State Reporting Requirements: These changes apply to federal reporting requirements. Employers should continue to comply with applicable state requirements and monitor for changes.







AN INTEGRITY COMPANY

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# MONTHLY UPDAT

pipac.com 800.765.1710 Iowa & South Dakota



# **Get Final Expense** coverage in 10 minutes!

With Transamerica Final Expense Express Solution, your clients can apply for peace of mind with protection that is designed to be hassle free and fit their budget.

With added funeral concierge service provided by Everest, at no additional premium cost, your clients can receive guidance today to help them prepare for tomorrow and help alleviate the future burdens of funeral planning, so their loved ones can focus on what really matters.

Final expense insurance is designed to help cover these expenses now to make things easier on their loved ones later.

Transamerica FE Express Solution requires no medical exam, offers budget-friendly coverage and premium, and can be purchased in as few as 10 minutes from Integrity LIFECenter.

Transamerica FE Express Solution is designed to be a smart, quick, and easy way to get coverage for your clients and give them the peace of mind that their final expense needs have been taken care of.





# **TOOLS AND RESOURCES EXPERT**

Who is our tools and resources expert?

Kenny Bruington is the Agency Tech Coordinator at PIPAC. This role includes a diverse range of responsibilities, centered around facilitating effective on-boarding of independent agents to the available online platforms and tools for health and life sales.

#### Tools & Resources he works with:

- Integrity Suite of Solutions:
  - MedicareCENTER
- CSG App
- LifeCENTER
- Plan Enroll
- LeadCENTER

Have questions or want to learn more on how Kenny can help you? Contact him today!



**3**19.268.7104



kenny@pipac.com



The basic motivation behind the purchase of life insurance is that you love someone and want to protect them financially. That's why Life Happens created and coordinates Insure Your Love month each February, the month of love.

To receive social media content, flyer's, and email templates please reach out to Mackenzie Jepsen at mackenzie@pipac.com or 319-268-7133

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