

The Centers for Medicare and Medicaid Services requires agents to document the scope of a marketing appointment prior to any face-to-face sales meeting to ensure understanding of what will be discussed between the agent and the Medicare beneficiary (or their authorized representative). All information provided on this form is confidential and should be completed by each person with Medicare or his/her authorized representative.

Please initial below beside the type of product you want the agent to discuss.

_____ **Horizons Medicare Advantage Plan** _____ **Select Institutional Special Needs Plan**
 _____ **Tribute Dual Eligible (Medicare and Medicaid) Plan**

By signing this form, you agree to a meeting with a sales agent to discuss the types of products you initiated above. Please note, the person who will discuss the products is employed or contracted by a Medicare plan. They do not work directly for the Federal government. This individual may also be paid based on your enrollment in a plan. Signing this form does NOT obligate you to enroll in a plan, affect your current or future enrollment status, or automatically enroll you in the plan(s) discussed.

Beneficiary or Authorized Representative Signature and Signature Date:

 Signature Signature Date:

If you are the authorized representative, please sign above and print below:

 Name Relationship

 Agent Name Agent Phone

 Beneficiary Name Beneficiary Phone (Optional)

 Beneficiary Address (Optional)

 Initial Method of Contact (Indicate here if beneficiary was a walk-in)

 Agent's Signature

 Plan the Agent Represented During this Meeting Date Appointment Completed:

Plan Use Only:
 Agent, if the form was signed by the beneficiary at time of appointment provide explanation why SOA was not documented 48 hours prior to appointment: _____

Scope of Appointment documentation is subject to CMS record retention requirements.

Medicare Advantage Plans (Part C) and Cost Plans

Medicare Advantage - Prescription Drug Plan (MAPD) - A Medicare Advantage Plan that provides Medicare health and drug benefits to Medicare Beneficiaries.

Medicare Institutional Special Needs Plan (I-SNP) - A Medicare Advantage Plan that is available to anyone with Medicare who meets the Skilled Nursing Facility (SNF) level of care and resides in a nursing home.

Medicare Dual Special Needs Plan (D-SNP) - A Medicare Advantage Plan that is available to anyone who has both Medical Assistance from the State and Medicare.

Superior Select's Horizons Health Plan is a HMO-POS plan with a Medicare contract. Enrollment in Superior Select's Horizons Health Plan HMO-POS depends on contract renewal.

Superior Select's Select Health Plan is a HMO-POS SNP plan with a Medicare contract. Enrollment in Superior Select's Select Health Plan HMO-POS SNP depends on contract renewal.

Superior Select's Tribute Health Plan is a HMO-POS SNP plan with a Medicare contract and a contract with the Arkansas Department of Human Services Medicaid program. Enrollment in Superior Select's Tribute Health Plan HMO-POS SNP depends on contract renewal.