

Fact-Finding Script

Current Coverage = Group, Retiree, Individual, Cobra

1.20.A – FACT-FINDING – CURRENT COVERAGE KNOCKOUT

Are you currently working or planning on retiring?

{Yes}: Can you keep your current coverage?

{No}: [Fact Finding – Current Coverage]

{Yes}: Do you have any dependents on that insurance?

{No}: [Fact Finding – Current Coverage]

{Yes}: Does the person have access to any other health insurance coverage?

{Yes}: [Fact Finding – Current Coverage]

{If No}: Unless that individual is able to find other health insurance. I recommend that if you haven't already, to delay your Part B benefits until they do. In the meantime, with your [CURRENT COVERAGE] coverage you probably have some high out of pocket costs if you were to end up in the hospital.

1.25.A – FACT-FINDING – CURRENT COVERAGE

[FIRST NAME], I have a few questions for you about your current [CURRENT COVERAGE TYPE].

Who is your current carrier?

Is that an HMO or PPO?

Roughly, how much is your premium?

What's your deductible?

What is your max out of pocket?

How many times do you visit the doctor annually?

Do you have any specialists?

How many medications are you currently prescribed?

How satisfied are you with your current plan?

- Very Unsatisfied
- Unsatisfied
- Satisfied
- Very Satisfied

Do you currently have any of the following coverages?

- Accident
- Disability
- Dental
- Vision
- Hearing
- Hospital Indemnity
- Cancer, Heart Attack & Stroke (CHAS)
- Life Insurance
- Long Term Care

Once Fact Finding questions are complete, return to Fact-Finding – Verify Demographics.

Current Coverage = Medicare Supplement

[FIRST NAME], I have a few questions for you about your current [CURRENT COVERAGE TYPE].

Who is your current carrier?

What letter plan do you have?

Roughly, how much is your premium?

{If Unsure}: Would you mind grabbing your card for me?

{If Yes}: Please read off the name of the carrier listed on the card for me.

What letter plan do you have?

How much are you currently paying?

{If No}: Ok, no problem. I'll just need to ask you a few questions to get a better idea of what you currently have.

Do you have copays when you go to the doctor?

What about when you go to a specialist or are hospitalized?

Do you have a separate prescription plan?

Do you have a monthly premium?

How much are you currently paying?

How satisfied are you with your current plan?

- Very Unsatisfied
- Unsatisfied
- Satisfied
- Very Satisfied

Do you currently have any of the following coverages?

- Dental
- Vision
- Hearing

- Hospital Indemnity
- Cancer, Heart Attack & Stroke (CHAS)

Once Fact Finding questions are complete, return to Fact-Finding – Verify Demographics.

Current Coverage = Medicare Advantage

{If OE or AEP = Yes – Enrollment Period = Yes} **(Proceed to Fact-Finding – Current Coverage)**

{If OE or AEP = No}

Do you have Extra Help or are you currently on Medicaid?

{If Yes or No}: Ok. I'll just need to verify your subsidy status to ensure we're offering all the plans in your area. Do I have your permission to verify your information in Medicare's system?

{If Yes}: **(Log into MARx and verify client's coverage)**

{If No}: Without verifying that information, I can only proceed based on what you're telling me and I can't guarantee that you will be approved for a special enrollment period and Medicare will verify this information before approving any changes. Are you sure you do not want me to check today?

{If Yes}: Ok. Have you made any changes to your plan in this current quarter?

{If Yes}: **(Continue to probe for additional SEPs)**

{If No}: **(Proceed to Fact-Finding – Current Coverage)**

{If No}: **(Log into MARx and verify client's coverage)**

SEP: What can I do: When:		
Eligible for both Medicare and Medicaid:	Join, Switch, or Drop your Medicare Advantage Plan or Drug Plan.	One time during each of these periods: <ul style="list-style-type: none"> • January–March • April–June July–September

Qualify for Extra Help:	Join, switch, or drop Medicare prescription drug coverage.	<p>If your client has Medicaid or receives Extra Help, you can make changes one time during each of these periods:</p> <ul style="list-style-type: none"> • January – March • April – June July – September
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IMPORTANT!!! (Do not assume they have Medicaid because they have LIS. You Must verify)

*****NOTE TO AGENT*****

Probe for SEP based on the following.

SEP: What can I do: When:		
Recently moved outside of your service area:	Client can change to a new Medicare Advantage plan, drug plan or return to Original Medicare and purchase a Medigap and Drug Plan.	Once client tells the plan of their move, they have the month they told there plan plus two more months.
Recently moved inside of your service area:	Switch to a new Medicare Advantage Plan or Drug Plan.	Once client tells the plan of their move, they have the month they told there plan plus two more months.
Moved back to the U.S after living outside of the country:	Join a Medicare Advantage Plan or Drug Plan.	Once Client moves back they have two full months to join a plan.
Moved into, currently live in or just moved out of an Institution:	Join, Switch or Drop a Medicare Advantage plan and/or drug plan and can return to Original Medicare.	Client's chance to join, switch, or drop coverage lasts as long as they live in the institution and for 2 full months after the month you leave the institution.
Released from Jail:	Join a Medicare Advantage Plan or Drug Plan.	Clients chance to join lasts for 2 full months after the month they are released from jail.

I'm no longer eligible for Medicaid:	Join or Switch a Medicare Advantage plan or Drug plan and can return to Original Medicare.	Clients chance to change lasts for 3 full months from either the date they are no longer eligible or notified, whichever is later
Left Employer or Union Coverage:	Join a Medicare Advantage Plan or Drug Plan.	Client can join a plan two full months after their coverage ended.
Involuntarily loss of coverage:	Join a Medicare Advantage Plan or Medigap Plan and Drug Plan.	Clients chance to join lasts 2 full months after the month they loss their creditable coverage.
5-Star	Join a Medicare Advantage or Drug Plan that has a 5 Star Rating.	Client can change to a 5 Star Plan once between December 8 th -November 30 th .
Recently Diagnosed with a Chronic Condition:	Join a Medicare Chronic Care Special Needs Plan (SNP).	<ul style="list-style-type: none"> • Can join anytime, but can only use this SEP once.
No Longer have a Chronic Condition and currently enrolled in a SNP Plan:	Switch from a Special Needs Plan (SNP) to a Medicare Advantage Plan or Medicare Prescription Drug Plan.	<ul style="list-style-type: none"> • Can choose a new plan starting the time they lose their special needs

		status and up to three months after the SNP's grace period.
Trail Right:	Switch back to the Plan Type and Company they were previously on, with no health questions.	Within the first year the client was on the Medicare Advantage Plan. Can only use this once.
Medicare Plan was Sanctioned:	Switch from your Medicare Advantage Plan or Medicare Prescription Drug Plan to another plan.	Determined by Medicare on a case-by-case basis.
Tricare/VA	Join a MA only Plan	Once a year

{If Enrollment Period = Yes} (Proceed to Fact-Finding – Current Coverage)

{If Enrollment Period = No} Unfortunately, since you do not meet any of the requirements that we just went through, you're not eligible to switch from your Medicare Advantage plan at this time. I'm updating my notes to give you a callback once we get closer to the Annual Enrollment Period, which runs from October 15th through December 7th. At that point, we'll be able to make that switch for you. In the meantime, with your Medicare Advantage plan you probably have some high out of pocket costs if you were ever to end up in the hospital.

Fact Finding - Current Coverage

[FIRST NAME], I have a few questions for you about your current [CURRENT COVERAGE TYPE].

Who is your current carrier?

Is that an HMO or PPO?

Roughly, how much is your premium?

What's your deductible?

What is your max out of pocket?

How many times do you visit the doctor annually?

Do you have any specialists?

How many medications are you currently prescribed?

How satisfied are you with your current plan?

- Very Unsatisfied
- Unsatisfied
- Satisfied

- Very Satisfied

Do you currently have any of the following coverages?

- Dental
- Vision
- Hearing
- Hospital Indemnity
- Cancer, Heart Attack & Stroke (CHAS)

*****NOTE TO AGENT*****

Make notes of additional coverages and be sure to include comprehensive coverages in a new plan that you enroll them into.

Once Fact Finding questions are complete, return to Fact-Finding – Verify Demographics.

Current Coverage = Original Medicare

Do you have Extra Help or are you currently on Medicaid?

{If Yes or No}: Ok. I'll just need to verify your subsidy status to ensure we're offering all the plans in your area. Do I have your permission to verify your information in Medicare's system?

{If Yes}: (Log into MARx and verify client's coverage)

{If No}: Without verifying that information, I can only proceed based on what you're telling me and I can't guarantee that you will be approved for a special enrollment period and Medicare will verify this information before approving any changes. Are you sure you do not want me to check today?

{If No}: (Log into MARx and verify client's coverage)

Once Fact Finding questions are complete, return to Fact-Finding – Verify Demographics.

Current Coverage = Medicaid

Ok. I'll just need to verify your subsidy status to ensure we're offering all the plans in your area. Do I have your permission to verify your information in Medicare's system?

{If Yes}: (Log into MARx and verify client's coverage)

{If No}: Without verifying that information, I can only proceed based on what you're telling me and I can't guarantee that you will be approved for a special enrollment period and Medicare will verify this information before approving any changes. Are you sure you do not want me to check today?

{If Yes}: Ok. Have you made any changes to your plan in this current quarter?

{If Yes}: (Continue to probe for additional SEPs)

{If No}: (Proceed to Fact-Finding – Verify Demographics)

{If No}: (Log into MARx and verify client's coverage)

SEP: What can I do: When:		
Eligible for both Medicare and Medicaid:	Join, Switch, or Drop your Medicare Advantage Plan or Drug Plan.	One time during each of these periods: <ul style="list-style-type: none">• January–March• April–JuneJuly–September
Qualify for Extra Help:	Join, switch, or drop Medicare prescription drug coverage.	If your client has Medicaid or receives Extra Help, you can make changes one time during each of these periods: <ul style="list-style-type: none">• January – March• April – JuneJuly – September

IMPORTANT!!! (Do not assume they have Medicaid because they have LIS. You Must verify)

*****NOTE TO AGENT*****

Probe for SEP based on the following.

SEP: What can I do: When:

Recently moved outside of your service area:	Client can change to a new Medicare Advantage plan, drug plan or return to Original Medicare and purchase a Medigap and Drug Plan.	Once client tells the plan of their move, they have the month they told there plan plus two more months.
Recently moved inside of your service area:	Switch to a new Medicare Advantage Plan or Drug Plan.	Once client tells the plan of their move, they have the month they told there plan plus two more months.
Moved back to the U.S after living outside of the country:	Join a Medicare Advantage Plan or Drug Plan.	Once Client moves back they have two full months to join a plan.
Moved into, currently live in or just moved out of an Institution:	Join, Switch or Drop a Medicare Advantage plan and/or drug plan and can return to Original Medicare.	Client's chance to join, switch, or drop coverage lasts as long as they live in the institution and for 2 full months after the month you leave the institution.
Released from Jail:	Join a Medicare Advantage Plan or Drug Plan.	Clients chance to join lasts for 2 full months after the month they are released from jail.
I'm no longer eligible for Medicaid:	Join or Switch a Medicare Advantage plan or Drug plan and can return to Original Medicare.	Clients chance to change lasts for 3 full months from either the date they are no longer eligible or notified, whichever is later
Left Employer or Union Coverage:	Join a Medicare Advantage Plan or Drug Plan.	Client can join a plan two full months after their coverage ended.
Involuntarily loss of coverage:	Join a Medicare Advantage Plan or Medigap Plan and Drug Plan.	Clients chance to join lasts 2 full months after the month they loss their creditable coverage.
5-Star	Join a Medicare Advantage or Drug Plan that has a 5 Star Rating.	Client can change to a 5 Star Plan once between December 8 th -November

		30 th .
Recently Diagnosed with a Chronic Condition:	Join a Medicare Chronic Care Special Needs Plan (SNP).	• Can join anytime, but can only use this SEP once.
No Longer have a Chronic Condition and currently enrolled in a SNP Plan:	Switch from a Special Needs Plan (SNP) to a Medicare Advantage Plan or Medicare Prescription Drug Plan.	• Can choose a new plan starting the time they lose their special needs status and up to three months after the SNP's grace period.
Trail Right:	Switch back to the Plan Type and Company they were previously on, with no health questions.	Within the first year the client was on the Medicare Advantage Plan. Can only use this once.

Medicare Plan was Sanctioned:	Switch from your Medicare Advantage Plan or Medicare Prescription Drug Plan to another plan.	Determined by Medicare on a case-by-case basis.
Tricare/VA	Join a MA only Plan	Once a year

{If Enrollment Period = Yes} **(Proceed to Fact-Finding – Verify Demographics)**

{If Enrollment Period = No} Unfortunately, since you do not meet any of the requirements that we just went through, you're not eligible to switch from your Medicare Advantage plan at this time. I'm updating my notes to give you a callback once we get closer to the Annual Enrollment Period, which runs from October 15th through December 7th. At that point, we'll be able to make that switch for you. In the meantime, with your Medicare Advantage plan you probably have some high out of pocket costs if you were ever to end up in the hospital.

Current Coverage = Tricare or VA

First off, since you have [Tricare or VA] coverage, I'd like to thank you for your service and commitment to our country. You deserve the best of care and I hope you are receiving it through the VA. I work closely with many veterans and help review how their [Tricare or VA] benefits work hand in hand with their civilian benefits.

[FIRST NAME], I have a few questions for you about your current [CURRENT COVERAGE TYPE].

Are you currently paying anything for your coverage?

What's your deductible?

What is your max out of pocket?

How many times do you visit the doctor annually?

Do you have any specialists?

How many medications are you currently prescribed?

How satisfied are you with your current plan?

- Very Unsatisfied
- Unsatisfied
- Satisfied
- Very Satisfied

Do you currently have any of the following coverages?

- Dental
- Vision
- Hearing
- Hospital Indemnity
- Cancer, Heart Attack & Stroke (CHAS)

How far is your local VA?

Have you ever had a difficult time scheduling an appointment?

Would having the flexibility to use a civilian provider be important to you if you were diagnosed with a critical illness?

Once Fact Finding questions are complete, return to Fact-Finding – Verify Demographics.