

Live Transfer call script

We have 3 minutes to make sure it is a good lead. If we go over 3 minutes we are charged for the lead.

Hello _____, it is nice to meet you. My name is _____ and I am a certified Medicare health plan agent with Saving Options and Solutions. My agent number is (NPN#) and I am licensed in the state of _____ (or say multiple states if you have multiple states) to explain plans to people and help them enrol if they are interested. Basically, I am here for you. I will explain how Medicare works, what it will cover and what it won't cover, and I will let you know about all the benefits you are entitled to. I will answer all your questions, and I will give you my phone number so that if you ever have any questions, you can just call me directly. Together, we will find a plan that meets your needs and is affordable. My expertise is making Medicare easy to understand. How does that sound?

preliminary close: Right now, is the Annual Election Period. It is the time of year where you can make any change you want. If we find a plan that covers your doctors and Medications and has the benefits you want are you ready to sign up today for a plan?

(Warm up the call).... Give them some information about you, how long you have been helping people, weather etc. Just connect.... Such as: I have continued helping folks with Medicare for _____ years, I never charge a fee and in fact the insurance plan of your choosing will actually pay me a fee to help you with your important decision and all year round. This gives you peace of mind knowing you may contact me or my office at any time or just yearly for your Medicare review. This will help you enjoy your retirement without added worry... How does that sound?

Understanding Medicare can be challenging for most everyone, so gathering all, or as much information before the final decision is probably the most important thing you can do in regard to choosing the right plan. This is where I help.

So I can better know your current situation and what direction to go:

What zip code and county do you live in?

What do you currently have for a Medicare plans?

How much do you pay per month?

Do you currently have Medicare Part A? What about Part B? What dates are they effective?

I have your Year of birth of _____ and your Month of Birth _____. Is that correct?

Thank you for this information

There are two types of plans you can sign up for when you get on Medicare. It is either a Medicare Supplement Plan called a Medigap plan or an advantage plan.

If you want to find out about Medicare advantage plans and Prescription drug plans then I need to do a scope of appointment. Every agent that helps folks with Advantage plans and prescription Part D plans has to have this Scope of Appointment signed. Do you want to talk about Medicare advantage plans and prescription part D plans?

Yes: send the scope to their email or text or both. Once they sign and you get the confirmation then continue to talk about all the plans.

Use Medicare Center to look up plans in that zip code. Check doctors and prescriptions. It is better to use the Companies doctor look ups to make sure it is

more up to date.

If new to Medicare:

Eventually, most folks go on Medicare and then they need to choose a plan to go along with it. Original Medicare, which has been around since the 1960's, does not cover everything, so you get to choose if you want to add to your Original Medicare a Medicare Supplement plan and a stand alone Part D prescription plan or a Medicare Advantage plan, which comes with Part prescription coverage built in.

Let me give you an overview. Do you have a pen and paper to jot a few things down on? I can wait for you to get one.

Here is what I suggest you write down.



Medicare Part A. Hospital Insurance. Premium is zero if you or your spouse worked 40 quarters during your lifetime.

Medicare Part B: Medical Insurance. The standard premium is \$148.50/month. This could be higher if you make more than 88k a year as a single or 176k a year as a couple.

Medicare Part C: Medicare Advantage plans. These are plans designed by the government but offered only by insurance companies. They combine hospital, medical, drug coverage, and offer additional benefits like dental and vision and gym memberships. You may have seen these advertised on TV. Have you seen the Joe Namath commercials. Those are agents like me helping you with Medicare plans

Medicare Part D. Prescription Drug plans. If you get a Medicare Advantage plan, this would already be included in your plan. If you don't get a Medicare Advantage plan, but choose to go with a Medicare Supplement plan, then you would also need to purchase a Prescription Drug plan. Premiums for these plans vary, but the average is about \$30/month.

So, once you are on both Part A & B, you have to choose between adding a Medicare Advantage plan OR a Medicare Supplement plan. Let me share with you how these are different.

Draw a line all the way across your paper from left to right. Then, draw a line down the middle of your paper so it looks like a capital T. On one side will be the Medicare Advantage information. Write MA on one side. On the other side will be the Medicare Supplement information. Write MS on the other side.

We will go through Medicare Advantage plans first.

On the MA side write **premium equals zero**. Most Medicare Advantage plans have no premium, and it depends upon the county you live in and which plan you choose.

Deductibles are next. On the MA side, write **deductible equals zero**. With most Medicare Advantage plans, there is no medical deductible.

Co-pays and coinsurance. On the MA side write **co-pays equals yes**. With Medicare Advantage plans, you have co-pays or coinsurance for most services, like doctor office visits and hospital stays.

Network. On the MA side write **network equals yes**. With Medicare Advantage plans you need to use doctors and hospitals that are in network. Most people who have ever had a group plan at work are familiar with this because those plans work the same way.

Extras. On the MA side write **extras equals yes**. Many Medicare Advantage companies offer extra benefits that you can't get when you have a Medicare Supplement. These benefits vary by company, but some of them are dental, vision, hearing and gym memberships.

Now let's talk about Medicare Supplement plans. With Medicare Supplement plans, there is a premium. I will tell you what the cost is now. You need to know that the cost varies by company, and the plan you choose, and if you use tobacco, and your zip code. Some companies offer a discount if you have someone living with you as well. Do you have anyone living with you? A typical plan based on those factors for you would be \$ ____/month, plus the cost of a drug plan. Does that sound reasonable for you? *(If no, just continue to explain only MAPD plans)*

Deductibles are next. On the MS side put **deductible equals \$203**. With Medicare Supplements, the deductible is \$203 for this year.

Co-pays and coinsurance. On the MS side write **no co-pays**. With Medicare Supplements, you have no co-pays or coinsurance if you go with Plan G, which is the most common plan these days.

Network. On the MS side write **network equals no**. With Medicare Supplements, there is no network. You can go to any doctor that accepts Medicare and have coverage.

Extras. On the MS side write **extras equals no**.

Prescription Drug Plan. On the MS side write **average premium equals \$30/month**. Drug coverage is not included in Medicare Supplement plans, so you have to buy them a separate stand alone part D plan. If you do not take a Part D prescription plan they hit you with a 1% penalty every month you do not have

one. You are not assessed the penalty until you take out a plan D plan later on. The penalty ends up being about \$4 dollars a year. The penalty would be added to any premium you have for the plan you have.

Here's another way to think about it. On the MA side, write **pay as you go**. Most of these plans have no premium. You just pay each time you use it. On the Med Supp side write **pre-pay**. With Medicare Supplement plans, you pay your premium each month, and after your deductible of \$203 is met, all your medically necessary expenses are paid by your plan.

So, based on this overview, which plan do you think will fit your situation better? Medicare Advantage or Medicare Supplement?

(If Medicare Advantage) Most people tell me that since they take their medications every day, that is one of the most important things in their plan. I would like to show you a plan that will cover your medications, and at the same time give you the additional benefits you are entitled to. In order to do that, I will need to make sure your current list of medications are covered by the plan. Is that okay with you?

Great. I can help you.

If open enrollment Medicare Supplement, do the enrollment.

If not open enrollment, then ask the health questions from the carrier you quoted to determine if they can health qualify. If so, then do the enrolment.

SOFT CLOSE: If you want this plan it will start January 1st.

They will say yes or no or need to think about it.

DO BETTER INSURANCE AGENT HUB

Medicare Client Organizer

Setting the Standard, Raising the Bar

Client Information

Client Name: _____
Date of Birth: _____
Phone: _____
Email: _____
Address: _____
Preferred Contact Method: _____
Emergency Contact: _____

Medicare Status

Medicare Part A Start Date: _____
Medicare Part B Start Date: _____
Current Plan Type: _____
Prescription Drugs (Part D): _____
Medigap / Supplement Plan: _____
Special Needs / DSNP: _____

Health & Medications

Primary Physician: _____
Specialist Doctors: _____
Current Medications: _____

Allergies: _____

Health Conditions: _____

Mobility / Accessibility Needs: _____

APPOINTMENT LOG

Date	Type (Phone / In-person / Virtual)	Notes / Client Questions	Follow-up Needed?

PLAN REVIEW & RECOMMENDATIONS

Plan Type	Carrier	Premium	Coverage Highlights	Notes / Recommendations

SOA & COMPLIANCE TRACKER

Date Completed	Scope of Appointment Type	Client Signature	Notes

Notes & Reminders

Use this section for **personalized notes, birthdays, preferences, or reminders**:

DO BETTER INSURANCE AGENT HUB

MEDICARE COMPLIANCE CHECKLIST

Setting the Standard, Raising the Bar

1. Before Contacting a Client

- Obtain Permission to Contact (PTC)
- No cold calling or door knocking
- No texting without written consent
- Complete Scope of Appointment (SOA) before discussing plans

2. Scope of Appointment (SOA)

- Must be completed **before plan discussion**
- Signed by the beneficiary
- Lists the exact products to discuss
- Keep on file for **10 years**
- Do not discuss plans outside the SOA

3. During Calls or Meetings

- Read all required disclaimers
- Stay within the SOA scope
- Be factual, unbiased, and professional
- Confirm doctors, prescriptions, pharmacies
- Present multiple plan options when appropriate
- Do not promise savings or guaranteed approvals
- Avoid using “free” unless \$0 with no conditions
- Never disparage other carriers or agents

4. Recording Requirements

- Record all marketing and enrollment calls
- Store recordings securely for **10 years**
- Do not delete or modify recordings
- Inform the client that the call is being recorded

5. Marketing Rules

- No gifts over **\$15 value**
- Do not claim affiliation with Medicare/CMS
- Avoid using Medicare logos

- Door-to-door solicitation is prohibited
- Educational events cannot include plan enrollment
- Marketing events can discuss plans but must comply with CMS rules

6. Enrollment Compliance

- Submit applications with client present
- Verify client consent and understanding
- Explain premiums, out-of-pocket costs, drug coverage, and network rules
- Keep documentation of all enrollments
- Follow correct election periods (AEP, OEP, SEP)

7. After Enrollment

- Provide contact information
- Explain coverage start date
- Explain mailings and ID cards
- Securely store PHI/PII
- Follow up only with client permission

8. Annual Requirements

- Complete AHIP or carrier training annually

- Complete carrier certification updates
- Review CMS rule updates
- Update marketing materials for compliance

9. What You Cannot Do

- Cold call or cold text
- Mislead or give false promises
- Claim special access to benefits
- Pressure clients to enroll
- Submit applications without client consent
- Discuss plans outside the SOA

Bottom Line

Medicare compliance is simple:

- **Get permission**
- **Document everything**
- **Stay within rules**
- **Put the client first**

When in doubt, **pause and ask**. Compliance protects your clients and your license.

DO BETTER INSURANCE AGENT HUB

MEDICARE NEW AGENT TIPS

Setting the Standard, Raising the Bar

Top Tips for New Medicare Agents

1. Know the Rules

- Complete **AHIP and carrier training** before contacting clients.
- Always use a **Scope of Appointment (SOA)** before discussing plans.
- Follow all CMS marketing, enrollment, and record-keeping rules.

2. Focus on Education, Not Selling

- Explain **benefits, costs, and networks** clearly.
- Help clients **compare plans without pressure**.
- Be a **trusted advisor**, not just a salesperson.

3. Build Relationships

- Seniors want someone **reliable and patient**.

- Follow up regularly, especially before **Annual Enrollment Period (AEP)**.
- Listen more than you talk — discover their **real needs**.

4. Organize Your Leads

- Use a **CRM** to track contacts, SOAs, and follow-ups.
- Keep detailed notes on each client's **doctors, medications, and preferences**.
- Prioritize leads based on **eligibility dates and urgency**.

5. Master the Products

- Know **Medicare Advantage (Part C), Prescription Drug Plans (Part D), and Medigap**.
- Understand **differences, limitations, and benefits**.
- Be prepared to explain **drug coverage, premiums, and network rules**.

6. Prepare Scripts & Talking Points

- Create **friendly, compliant scripts** for calls and meetings.
- Practice **introductions, discovery questions, and plan presentations**.
- Keep scripts **short, clear, and focused on helping the client**.

7. Focus on Annual Enrollment

- AEP is the most productive time for Medicare agents.

- Help clients **review plans and update prescriptions**.
- Make follow-ups a **consistent habit**.

8. Be Patient and Persistent

- Building a client base takes time.
- Don't get discouraged by refusals or no-shows.
- Focus on **small wins and long-term relationships**.

9. Leverage Technology

- Use **quote tools, online comparisons, and e-signature platforms**.
- Keep digital copies of SOAs, applications, and compliance forms.
- Stay **organized and efficient** to serve more clients.

10. Always Put the Client First

- Your reputation is your most important asset.
- Focus on **helping people, not just selling plans**.
- Ethical agents build **trust and referrals for years to come**.

Pro Tip: Keep a notebook of client questions and examples — it becomes your **personal training guide** as you gain experience.

Extras to Help New Medicare Agents

DO BETTER INSURANCE AGENT HUB –

Boost Your Success

1. Lead Resources

- **Pre-generated Medicare leads** from carriers or lead vendors
- **Local referrals** from networking events, community centers, or senior clubs
- **Social media lead campaigns** targeting people turning 65

2. Tools & Technology

- **CRM software** to track clients, SOAs, and follow-ups
- **Quote and comparison tools** to present multiple plans quickly
- **E-signature platforms** for remote enrollments
- **HIPAA-secure document storage**

3. Marketing Materials

- Pre-approved **flyers, brochures, and email templates**
- Compliant **social media graphics**
- Client **education handouts** explaining Medicare basics
- “Medicare 101” presentation slides for community events

4. Training & Education

- AHIP **certification training**
- Carrier-specific product and compliance courses
- **Role-playing scripts** for calls and appointments
- **Webinars and online courses** on sales techniques

5. Compliance Resources

- Medicare **Scope of Appointment (SOA) templates**
- CMS marketing and enrollment **guidelines summary**
- Record-keeping templates for calls, enrollments, and applications

6. Scripts & Conversation Guides

- **Phone call scripts** for new leads
- **In-person appointment scripts**

- **Objection handling scripts** for common questions
- “Medicare 101” simple explanations to use with clients

7. Networking & Mentorship

- Connect with **experienced agents or mentors**
- Join **agent communities** on Facebook, LinkedIn, or WhatsApp
- Attend **carrier and association events**

8. Daily & Weekly Habits

- Start the day with **lead follow-ups**
- Schedule **appointments consistently**
- Set weekly goals for **calls, appointments, and enrollments**
- Review **compliance and training updates** regularly

9. Client Relationship Building

- Send **birthday or holiday cards**
- Offer **annual plan reviews**
- Keep notes on **doctor changes, medications, and preferences**

- Be the **go-to Medicare advisor** in your community

10. Extra Tips

- Keep a **cheat sheet of common drug and plan questions**
- Have a **FAQ sheet for quick client answers**
- Practice **clear, jargon-free explanations**
- Track **sales metrics** to identify strengths and areas to improve

