

GENERAL PHONE SCRIPT

General Voicemail for All Lead Types:

This is (your name). Just making a quick courtesy call regarding your health plan. Please call me back at (your number), again, it's (your name) at (your number).

OPENING LINES - BY LEAD TYPE:

General Lead:

Hi, this is (your name). Just a quick courtesy call. Are you on a health insurance plan that you're happy with, or could you use help finding something affordable?

If they respond with interest, reply with:

Okay, well just so you know who I am, I'm a licensed broker with Compass Health. I have access to every type of health insurance available, so regardless of the budget or medical history, I'll make this easy, and help you find the right plan... I just have a few quick questions to see what you qualify for... *(proceed to "QUESTIONS FOR ALL LEAD TYPES" below...)*

Alternate for Business Lead:

Hi, this is (your name). Just a quick courtesy call. Are you aware of the new self-employed health insurance programs?

If they respond yes, or no (doesn't matter), reply with:

Okay, as a self-employed person who has to provide their own insurance, you now have access to VERY comprehensive Group health plans for yourself and your family, and even employees if you have them, at incredibly affordable rates. I just have a few quick questions to see what you'd qualify for... *(proceed with questions below...)*

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QUESTIONS FOR ALL LEAD TYPES (after either opening line above):

1. Do you have insurance currently?
(if so, ask: Are you happy with it? - if not, ask: How long have you been without?)
Keep nudging till they start talking. Listen for the pain, and/or challenges they've had in the past.
2. So that I can run some quotes for you, what's your home zip code?
3. Are you the only one who needs insurance, or do you have a spouse or kids that need it as well?
4. Nosy question - how old are you? *(also get ages/DOB's for spouse and/or kids if they are to be included)*
5. If I'm able to find you the right plan, how soon do you need it to begin?

6. Do you (or family members to be insured) have any health conditions that we need to make sure are covered well?
7. What prescriptions have you filled at a pharmacy in the past 12 months?
(ask this about family members as well, if they're to be included - note all prescriptions and the health conditions they are for)
8. In the past 5 years have you (or family members to be included) had anything major happen, such as a hospitalization or surgery, or maybe a new diagnosis?
9. Any tobacco use in the past year?
10. Okay, I have numerous options in every price range, but I do want to make sure the cost doesn't create a burden for you financially... Have you thought about what would be comfortable for you on a monthly basis? That way we can focus on the options that are affordable to you..?

If they don't give you an actual number after you ask that question, then ask again, this way:

Again, I have options in literally about every price range, so is there a number that we need to be under, for this to make sense for you financially?

If you're new at this, or not 100% sure which plan to sell, we recommend a 2-call close. Pause here, for a 2-call close...

IF 2-CALL CLOSE: Okay, (customer name), I'm going to take a few minutes and run some quotes to see which options are most affordable in your area. I don't want to keep you on hold while I do this, so is it okay if I call you back a little later today, or would tomorrow morning be better?

Then call your Leader/Mentor and ask for guidance on what to sell, and how to best present it.

Once you're well versed and comfortable deciding which plan is best for your customer, present in the manner listed below, based on plan type (ie: Copay PPO vs. MM / HSA vs. FB plans)

Presentation outlines by plan type on next page...

Note: *If offering LifeX, specifically, you'll need to first let them know that it is an application for employment, vs. just a health plan. Here's how to say that:*

FOR LIFEX PLANS ONLY: Because you're healthy, you qualify for a program, where you can become an extremely part-time employee of a research company, and in return gain access to their Group Health plan. It offers incredible health, dental & vision coverage, affordably.... Your "job" as this extremely part-time employee, is to complete at least 1 survey per year. The surveys only take maybe 10 minutes to complete, and you get paid \$10 every time you complete one. You can do more than one, but you have to do at least one per year to remain an active employee. Does that make sense?

(pause and let that soak in, then...)

This is actually for a really good cause. The reason they do this, is they're a research organization, who's mission is to be able to predict 40 health conditions, prior to symptom. They do that with statistical data, some of which, they'll be pulling from the surveys you complete. So it's for a good cause, and you get excellent, affordable coverage in exchange.

Let me talk to you about the Medical coverage...

Copay-Style Plans:

1. *Premium (let them know the cost up front and they will listen better)*
2. *Explain any applicable deductible amount, and that it applies first, before copays. Thereafter, nearly every service on the plan is simply a copay w/ 100% coverage after.*
3. *Preventive - ACA MEC recommendations 100% covered (no copay)*
4. *Give co-pay examples for Doc Visits, Lab, Radiology, Surgery & Hospitalizations*
5. *Explain OON coverage (if the plan is PPO)*
6. *Describe any riders (such as critical illness or accident supplements that will help cover their OOP, dental/vision, etc)*
7. *Premium (again) Silence..... (let them speak first!!!)*

Traditional MM / HSA Plans:

1. *Premium (let them know the cost up front and they will listen better)*
2. *Deductible/Coinsurance/M.O.O.P.*
3. *Preventive - ACA MEC recommendations 100% covered (no copay)*
4. *If the plan has Copays for any service (ie: doc visits, etc), describe here*
5. *If there are any “negatives” or “limitations” in the plan, such as a pre-ex exclusion, etc., discuss how it will apply to them here*
6. *Describe any riders (such as critical illness or accident supplements that will help cover their OOP, dental/vision, etc)*
7. *Premium (again) Silence... (let them speak first!!!)*

Fixed-Benefit Indemnity Plans:

1. *Premium (let them know the cost up front and they will listen better)*
2. *General plan structure:*

This is a Scheduled Benefit style plan, which pays your providers directly, for each service they provide. The way it works is really simple.

The plan has no deductible whatsoever.

Basically, whenever you go to an in-network provider, whether that be a doctor, the lab, or the hospital, the plan simply does two things...

First, by staying in network, the bill will be *significantly* discounted. On average they shave about a third off the bill first.

Second, the plan will then pay a fixed amount directly to the provider. The amount paid depends on what you went in for.

3. *For example...*

Give Doctor visit example (use network discounts of approx. 30%, and explain how a “typical” doctor visit will be covered)

Give Hospital example (include daily amount paid, plus add'l services such as MRI's, CT scans and/or surgeries that might be included in the hospitalization, making it clear the plan pays for each service)

4. *Explain how any pre-existing conditions will be affected by the plan's pre-existing condition exclusion (ie: typically on most Fixed Benefit plans there's a 1-year pre-ex exclusion)*
5. *Premium (again) Silence..... (let them speak first!!!)*

(next page...)

After you've described the coverage, per the outline above, be silent and give them a chance to respond. Answer any questions they have, then assume the sale by saying the following...

The next step is to get you qualified. This takes just a few minutes...

1. What's your legal name, as it appears on your ID?
2. Is this the best phone number where you can be reached?

(Etc., etc. Proceed with the questions necessary to fill out the application, and complete the application process...)

After the Sale:

Save a benefit as an "Oh, by the way..." thing that you let them know about after the sale. For example: "Oh by the way, your plan includes a benefit called Telemedicine (or OurLiveDoc, or whatever it's called on the plan), where you can establish care with a Primary Care Tele-med doctor that you see virtually for free, unlimited! You also have 24/7 Urgent Care via telemed, for free as well! They can diagnose and fill prescriptions for you entirely over the phone. Not subject to any deductibles, copays, or any out of pocket whatsoever."

The Telemedicine is just an example, but let there be one small benefit, any small benefit, that you wait to tell them about after you sold the plan. This technique helps to eliminate any potential "buyer's remorse" later.

Last but not least, send them a hand-written "thank you" card in the mail (actual snail-mail), on the same day after you make the sale, so they get it the next day. This also helps to eliminate remorse, and solidifies you as their "tangible" agent. Include a few of your business cards in the envelope also, for referrals.

An example of what to say in the card: "Thank you for allowing me to help with your health insurance! Please reach out anytime you have questions, or know of anyone else who can use my help. 😊"

YOU DID IT!!! GREAT JOB!!!!