# GENERAL PHONE SCRIPT

## **OPENING LINES - BY LEAD TYPE:**

#### General Voicemail for All Lead Types:

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

#### General Lead:

Hi, this is <u>(your name)</u>. 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 your budget or medical history, I'll make this easy, and help you find the right plan... I just have a few questions to see what you qualify for... (proceed to "QUESTIONS FOR ALL LEAD TYPES" below...)

#### Alternate for Business Lead:

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

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

Okay, because you're self-employed I'm able to offer VERY comprehensive Group insurance to you individually, plus your family or employees if you have them, at more reasonable rates. It takes just a quick minute to see what you qualify for... (proceed with questions below...)

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

- 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. How old are you, or what's your date of birth? (also get ages/DOB's for spouse and/or kids if they are to be included)
- 5. How soon would you want coverage to start if we find the right plan for you?

- 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 taken in the past year?

  (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 diagnosis, hospitalization or surgery?
- 9. Any tobacco use in the past year?
- 10. Okay, I have numerous options in every price range, but I want to make sure the cost of your insurance 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 narrow down to 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 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. <u>Pause here, for a 2-call close</u>. Let your customer know you are going to take a little time to run some quotes, and schedule a time to call them back. Then, call your leader/mentor and discuss what to do next.

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: Annual Max or MVP plan, vs. Major Medical, vs. Fixed Benefit)

Presentation outlines by plan type on next page...

Note: <u>If selling LifeX</u>, specifically, you'll need to first let them know that it is an application for employment, vs. just a health plan. I recommend the following:

FOR LIFEX PLANS ONLY: Because you're healthy, you qualify for a new program, where you can become an extreeemely part-time employee of a company called LifeX, and in return gain access to their Group Health plan, that offers incredible coverage, affordably.... Your "job" as an extremely part-time employee, is to complete about 3 or 4 surveys each year, which will take you all of about 10 minutes to complete, and you get paid \$10 every time you complete one.

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

This is actually for a really good cause. The reason LifeX does 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, by using statistical data, some of which, they will be pulling from the surveys you complete.

So like I said, it's for a good cause, and you get really good, affordable coverage in exchange.

### Annual Max or MVP Plans:

- **1. Premium** (let them know the cost up front and they will listen better)
- 2. Explain any applicable deductible (if there is one) and that it applies first, before copays. Thereafter, nearly every service on the plan is simply a copay.
- 3. Preventive ACA MEC recommendations 100% covered (no copay)
- 4. Give co-pay examples for Doc Visits, Lab, Radiology, Surgery & Hospitalizations
- 5. Pre-existing conditions ARE covered
- 6. Premium (again) Silence...... (<u>let them</u> speak first!!!)

#### Major Medical Plans:

- 1. **Premium** (let them know the cost up front and they will listen better)
- 2. Preventive ACA MEC recommendations 100% covered (no copay)
- 3. If the plan has Copays for any service (ie: doc visits, etc), describe here
- 4. Deductible/Coinsurance/M.O.O.P.
- 5. Describe any "Deductible Insurance" riders (such as critical illness or accident protection) if included
- 6. <u>If</u> they will be subject to a pre-ex exclusion, discuss how it will apply to them
- 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 innetwork 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. The discounts typically average about 20-to-40%, that they shave off the bill first.

**Second**, the plan will pay a fixed amount directly to the provider. The amount paid depends on what you had done.

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...... (<u>let them</u> speak first!!!)

After you've described the coverage, per the outline above, <u>be silent</u> 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 <u>after</u> the sale. For example: "Oh by the way, your plan includes a benefit called Telemedicine (if included, use appropriate name for that benefit on the plan you sold), where you can establish care with a specific network of Tele-med doctors, and you are able to see them, as needed for free! 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, on the same day after you make the sale (so they get it the next day). Again, this helps to eliminate remorse, and solidifies you as their "tangible" agent. Include 3 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. ©"