WARNER Pacific

BROKER CHECKLIST:
PHONE SALES PRESENTATION AND ENROLLMENTS

Compliant Medicare Sales Phone Presentations & Enrollments

Our Broker Checklist is your quick, go-to guide for phone presentations and enrollments — outlining the essential dos and don'ts to help you sell Medicare confidently and stay compliant every step of the way.

Call Recording Requirements

- ☐ **Confirm the call is being recorded.**
- ☐ **State:** *"This call may be recorded for quality and training purposes."*
- ☐ **Secure verbal agreement to recording.**
- ☐ **Within the first 60 seconds of the call, you must state the following disclaimer:**
  - If you don't represent all plans, say: "We do not offer every plan available in your area. Currently, we represent (insert the number of carriers) which offer (insert the number of plans) products in your area. Please contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program (SHIP) to get information on all your options.
  - If you do represent all plans, say: "Currently, we represent (insert number of carriers) carriers which offer (insert number of plans) products in your area. You can always contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program (SHIP) for help with plan choices."

Pre-Presentation Essentials

- ☐ **Permission to Contact:** Inbound call or documented permission for outbound.
- ☐ **Agent Introduction:** Provide first/last name, title (Licensed Insurance Agent) and agency name. Do not imply you're from Medicare.
- ☐ **TPMO Disclaimer:** Required within the first minute:
  - *"I'm a licensed sales agent. I may offer plans from multiple insurance companies."*
- ☐ **Privacy Statement:**
  - *"You're not required to share health information unless it's used to determine eligibility."*
- ☐ **Scope of Appointment:*** Must be on file 48+ hours in advance unless valid exception (e.g., inbound call or last 4 days of valid election).
- ☐ **Caller Identity:** Confirm the caller is the decision-maker or obtain POA documentation.
- ☐ **Eligibility Confirmation:** Verify Medicare A & B and determine valid enrollment period.

*Minimum contract requirements needed.

Arizona License #800000049, California License #0764260, Colorado License #351162, Florida License #L003488, Illinois License #0136272, Iowa License #0138031 and #1001001757, Minnesota License #20195635, New York License #0116113, Ohio License #2209, Oklahoma License #0100151962, Texas License #1641424

Needs Assessment Checklist

Must be completed before presenting a plan:

- ☐ Providers and Specialists
- ☐ Prescriptions
- ☐ Preferred hospital or pharmacy
- ☐ Dental/Vision/Hearing needs
- ☐ Chronic conditions/special needs
- ☐ Other health coverage (VA, TriCare, Employer, etc.)
- ☐ Any benefits the caller values (OTC, transportation, gym, etc.)

Network & Rx Verifications

- ☐ **Provider Network:** Confirm doctors and facilities are in-network. If not, explain process and implications.
- ☐ **Pharmacy Network:** Confirm preferred pharmacy is in-network. If not, explain cost implications.
- ☐ **Prescription Review:** Offer to look up Rx, confirm copay tiers, prior authorization, quantity limits, etc.

Plan Presentation — Must Include

- ☐ **Plan Name and Type**
- ☐ **Benefits Breakdown (read from Summary of Benefits):**
  - Dental, Vision, Hearing
  - Transportation
  - OTC
  - Preventive Services
- ☐ **Costs Breakdown** (Premiums, Copays, MOOP, Rx tiers)
- ☐ **PECL Elements (Pre-Enrollment Cheklist):** Required elements covered

Confirm Caller Understanding

- ☐ **Recap:** Plan type, costs, doctor/pharmacy, and Rx.
- ☐ **Ask:**
  - *"Do you understand how this plan works and are you comfortable moving forward?"*

Enrollment Requirements

- ☐ **Inbound Call:** Enrollment must be consumer-initiated.
- ☐ **Call Direction:** Clearly state you're transitioning from presentation to enrollment.
- ☐ **Intent to Enroll Statement:** Must be captured word-for-word.
- ☐ **Script Usage:** Follow carrier-approved enrollment script verbatim.
- ☐ **Tracking Number/Confirmation:** Provide tracking ID or confirmation of submission.

Customer Experience & Compliance

- ☑ Stay professional, upbeat, and courteous
- ☑ Avoid high-pressure sales tactics
- ☑ Respond knowledgeably and with empathy
- ☑ Ensure clear, logical presentation of benefits
- ☑ Never use scare tactics, false urgency, or offensive language

Key Audit Red Flags

- ☒ No Scope of Appointment*
- ☒ Medicare eligibility not confirmed
- ☒ Needs assessment skipped
- ☒ Incorrect or missing benefit/cost disclosure
- ☒ Incomplete or non-compliant enrollment script
- ☒ Misrepresentation of plan/provider/Rx info

Ready for infinite sales possibilities?

Contact your Sales Consultant today at (800) 801-2300 or medicareproducts@warnerpacific.com.

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