



Enrollment To-Do List

Before the Meeting

- Make sure that you have the appropriate Permission to Contact form and Scope of Appointment signed 48 hours before the appointment (unless it is an approved exclusion).
- If appointment is being conducted over the phone, the sales and enrollment call must be recorded and kept on file for 10 years.
- Read the updated TPMO Disclaimer within the first 60 seconds of the call if completing the sales and enrollment over the phone or video call.
- State that you do not work for Medicare or the federal government. Make it clear that you are an independent sales agent specializing in Medicare insurance plans and are compensated for any sale that may occur.
- Thoroughly go over the plan eligibility criteria
 - Must live in the service area to enroll.
 - Must have Medicare A & B
 - Explain that they will not lose the Medicare coverage by enrolling into a Medicare Advantage plan.
- Explain the enrollment and disenrollment periods and confirm their election period (if outside of the AEP).

During the Meeting

- Conduct a needs assessment.
 - Find out what they like about their current coverage.
 - What specific benefits are important to them?
 - Are they looking for Extra Benefits (dental, vision, hearing)?
 - Do they travel a lot?
 - Do they prefer a specific type of plan (PPO, HMO, etc)?



- Thoroughly explain the difference between a Medicare Advantage and a Medicare Supplement plan. Make sure the client understands the in-network and out-of-network use requirements and limitations.
- If applicable, explain how the member may have to obtain specialist referrals and prior authorizations.
- Thoroughly describe out-of-pocket costs, and review how maximum out-of-pocket cost is calculated.
- Ask questions that can assist you in determining their eligibility for Medicaid, Special Needs Plans or LIS Extra Help. If applicable, assist the beneficiary for signing up for additional benefits.
- Thoroughly review the provider directory and the prescription drug formulary. Go over any prescription copays, tiers and make sure the client understands plan tiers and coverage gap and catastrophic coverage phase.
- Go over the CMS Star Ratings on the plans.
- Remind them of the right to file an appeal or grievance with the plan carrier.
- Explain any late enrollment penalties.
- Remind prospect about the member ID card at the proposed effective date.
- Explain how their current coverage will be impacted by their enrollment into the new plan.

After the Meeting

- Confirm that client does not have any additional questions or concerns.
- Highlight the customer service information for the plan & explain that they will get a post enrollment call from the carrier to confirm they understand the plan that they are enrolling into.
- Leave your business card or contact information.
- Follow up to ensure they have received their plan materials and knows how to use their new benefits.