



Setting the Appointment

Introduce and clearly state purpose of call:

e.g. "Mrs. Jones, this is _____ with UnitedHealthcare. You recently talked to our customer service agent about lowering your drug costs. I want to be sure I have correct and current information."

Confirm Basic Information:

- ____ Date of birth
- ____ Address
- ____ Plans to move in the next 12 months
- ____ Medicare A/B

e.g. "Thank you for confirming. May I ask you a few additional questions to see if I can help you today?"

Identify Decision Maker(s): e.g. "When it comes to making decisions about your health care plans is there someone who assists or advises you?"

- ____ Consumer only
- ____ Third-party help
- ____ If third-party, determine friend or family, where located and when available to attend meeting.

Current Health Plan:

- ____ Type of health plan e.g. VA, Group plan, former employer, spousal plan
- ____ Likes
- ____ Concerns
- ____ Changes in next 30, 60, 90 days
- ____ Extra help from the state or federal government
- ____ Looking at other insurance providers
- ____ Time frame for making a decision

Preparing For Appointment:

Logistics: e.g. "Based on the information you shared with me, I suggest we meet in person to discuss options that may meet your needs. I have an opening on Tuesday at 9am or Thursday at 4pm, which works better for you?"

- ____ Time of appointment
- ____ Length of appointment
- ____ Meeting place
- ____ Parking
- ____ How to identify you
- ____ Do you want me to call you the day of the appointment or on the way there?

e.g. "To best assist you during our 60-90 minute appointment, please have available your..."

- ____ Medicare card
- ____ List of doctors, PCP and specialists
- ____ Prescriptions currently taking
- ____ Award letter or documents related to extra help

During the Appointment

Scope of Appointment (SOA):

- ____ SOA completed

Selling You:

- ____ Professional appearance
- ____ On time
- ____ Knowledgeable of plan(s)
- ____ Brief introduction to establish credibility
- ____ Effective listening and note taking
- ____ Open body language

Ask Open Ended Questions to Uncover Needs:

- ____ "What has changed since we last spoke?"
- ____ "What type of plans are you considering?"
- ____ "What are your long term coverage goals?"
- ____ "What are your most important goals?"
- ____ "What will it mean to have these in your plan?"
- ____ "What did you like about the other plans?"
- ____ "How do you want to communicate with me?"
- ____ "What does a stable provider mean to you?"

Optional if plan offers Passport or fitness program

- ____ "How important is exercise to you?"
- ____ "How often do you travel away from this area?"

Agree on Needs: e.g. "Let me take a moment to review what I heard is important to you in selecting a plan."

- ____ Need 1
- ____ Need 2
- ____ Need 3

Check In: e.g. "Is there anything you would add or change on the list?"

Features and Benefits: A Consumer needs to understand all of the features and benefits of a plan.

- ____ Present three or more benefits and features.

Plan Presentation: Use the Clarity workbook and video if possible to clearly state and explain plan details. Ask consumer to check off covered items.

- ____ Describe the differences between a Medicare Advantage plan and a Medicare supplement must continue to pay their Part B premium
- ____ Member ID must be used when obtaining plan covered services
- ____ How other coverage might be affected
- ____ For HMO plans, in-network providers must be used except in emergencies
- ____ For HMO-POS and PPO plans, using in-network providers usually cost less than out-of-network
- ____ Enrollment election periods
- ____ Enrollment eligibility requirements



During the Appointment cont.

Medicare Advantage Plan Presentation: Clearly state and explain these drug coverage items.

- ☐ Low Income Subsidy (i.e. Extra Help)
- ☐ Late enrollment penalty: explain creditable coverage attestation process
- ☐ Formulary, drug tiers, quantity limits, step therapy, prior authorization, where to find additional information
- ☐ Coverage stages including: deductible, initial coverage, coverage gap, and catastrophic coverage
- ☐ Pharmacy network, preferred pharmacies, and cost sharing impacts

Plan Enrollment Guide: (cover in detail)

- ☐ Summary of Benefits or Benefit Highlights including cost sharing
- ☐ Provider network, including limitations, referral requirements, in-network and out-of-network cost sharing, network benefits for routine care and emergency care

Star Rating:

- ☐ State out loud the current Star Rating for the plan you are presenting. Use the new rating once published in October
- ☐ Indicate the Enrollment Guide page where located
- ☐ Direct consumers to Medicare.gov for additional Star Rating information

Support Materials on Jarvis: (UnitedHealthcare Toolkit)

- ☐ Evidence of Coverage
- ☐ Clarity Workbook
- ☐ Enrollment Guide: Plan Recap and What to Expect Next
- ☐ Clarity Sales Meeting Video

Best Practices:

- ☐ Avoid acronyms or technical terms
- ☐ Speak slowly as the information may be new
- ☐ Rephrase information by offering an alternate explanation
- ☐ Ask what questions do they have.

Positive Company Statement Presented: e.g.
"It may be important for you to know UnitedHealthcare has been in the Medicare and Retirement space for over 40 years which provides stability for our members."

☐ Yes

☐ No

Compliance Must Nots

Note: For a complete list, please refer to certifications, your Agent Guide and compliance documents available on Jarvis.

- ☐ Use absolute and superlative (including qualified) statements and/or disparage a plan, competitor, or federal or state program, such as "UnitedHealthcare is the largest Medicare Advantage plans" or "the state Medicaid program is a disaster."
- ☐ State you represent Medicare or any government agency
- ☐ State plans are endorsed, sponsored, or recommended by Medicare, CMS, or the federal government
- ☐ Use high-pressure/scare tactics or intimidating behavior
- ☐ Describe the plan as "free" if it has \$0 premium or use the term "free" in reference to a filed benefit
- ☐ State there are no claim forms, paperwork, or similar
- ☐ Present non-health related products, such as final expense or life insurance

After the Sale

Remember to thank the member.

- ☐ Sign, date, and submit completed enrollment application with 24 hours of receipt
- ☐ All Protected Health Information/Personally Identifiable Information (PHI/PII) is secure
- ☐ Share your business cards for referrals
- ☐ Contact information magnet
- ☐ Your next step(s)
- ☐ UnitedHealthcare next step(s)
- ☐ Encourage to take annual wellness visit after plan effective date

Questions

Contact your UnitedHealthcare sales leader or submit questions to
compliance_questions@uhc.com

Additional Training

Check with your UnitedHealthcare Agent Manager or see the National Training Calendar on Jarvis.