

**QUALITY ASSURANCE** 

checklist

FOR CALL RECORDED ENROLLMENT

AN INTEGRITY COMPANY 614-763-2255 | www.cornerstoneseniormarketing.com

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Medicare	<b>Advantage</b>	$\Delta$ (MA) $\Delta$	gent (	Checklist
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Introduction	Medicale Advantage (MA) Agent (
<ul> <li>State first name, last name, and "Licensed Insur</li> <li>Disclose call recording (if applicable)</li> <li>TPMO disclaimer (must be stated within first mi</li> <li>SOA must be completed as applicable</li> </ul>	_
Baseline Benefits	
Plan premium Part B premium reduction (if applicable) Medical deductible Maximum out-of-pocket (MOOP) Inpatient hospital copay/coinsurance Outpatient hospital care PCP copay/coinsurance Specialist copay/coinsurance Preventive care Emergency room Urgently needed services	
Prescriptions	
<ul> <li>Offer Rx lookup</li> <li>Prescription deductible &amp; medication tiers</li> <li>Formulary coverage (if meds provided)</li> <li>Copay/coinsurance for selected pharmacy (if m</li> <li>Clinical edits (QL, ST, PA, etc.) if applicable</li> <li>Explanation of drug coverage stages (if included</li> </ul>	
Providers	
<ul> <li>Offer provider lookup</li> <li>PCP network status</li> <li>Facility network status (including pharmacy)</li> <li>Confirm location</li> <li>Referral requirement (if applicable)</li> </ul>	
Miscellaneous	
Star Ratings disclosed Pre-Enrollment checklist reviewed	
	for the self-rest for PDO

Note: Agents must review both in-network and out-of-network costs for PPO plans