Pre-Qualification Script for Live Transfer Medicare Leads

Below is the transcript used by lead providers to pre-qualify potential Medicare customers before transferring them to a licensed agent.

Greeting & Compliance Statement:

"Hi, this is [Agent Name] with [Lead Provider Company]. This call is being recorded and monitored for quality assurance. I'm not a licensed agent, but I will connect you with one if you qualify. Is that okay?"

[Wait for permission to continue]

- 1. 1. I have your name as [Name], is that correct?
- 2. May I also confirm the state you reside in? Have you lived there for the last 30 days? (Make note if they have recently moved.)
- 3. 2. I am calling on your request. Did you initiate the request for Medicare information?
- 4. 3. Do you make your own healthcare decisions?
- 5. 4. I have your birthdate and zip code on file. May I confirm both with you now?
- 6. 5. Can you confirm that you are not receiving health insurance from an employer or through military coverage such as TRICARE or VA benefits?
- 7. 6. Do you currently have both Medicare Part A and Part B?
- 8. 7. Have you made any Medicare plan changes in the last 30 days? If so, what changes were made?
- 9. 8. Do you agree to speak with one of our licensed agents? By doing so, you consent to receive communications via auto-dial, live calls, text messages, and email, even if your number is on the federal or national do-not-call list.