

Instructions	Scoring: Enter the appropriate number of points in the Column marked "Score" and total the results. If the question does not apply, enter NA and do not deduct those points from the agent's score. If the agent misses an item or provides inaccurate information, enter "0" so that no points are awarded. A passing score is 85% or greater.
	Disciplinary Actions: If the agent does not receive a passing score, the FMO Compliance team should document the appropriate disciplinary action (e.g., training), the name or title of the person who completed the disciplinary action, and the date it was completed. Email the documentation along with this call review form to hpagentmonitoring@bswhealth.org

Name of Agent	
Name of FMO	
Call Recording ID	
Date of Call	
Name of Caller	
Date of Review	
Name of Reviewer	
Overall Score	

CATEGORY	QUESTIONS	ANSWER	POINTS	SCORE	REVIEWER'S NOTES
Disclaimer (Required for Call Centers)	If the call was received by an agent in a Call Center, did the agent say the appropriate disclaimer? (a) "We do not offer every plan available in your area. Currently we represent [insert number of organizations] organizations which offer [insert number of plans] products in your area. Please contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program to get information on all of your options." (b) If the TPMO sells for all MA organizations in the service area the disclaimer consists of the statement: "Currently we represent [insert number of organizations] organizations 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 for help with plan choices."	Yes or NA	3		
	Was the disclaimer given within the first 60 seconds of the sales call?	Yes or NA	4		
General	Was the call inbound?	Yes	3		
	Was the agent professional and courteous?	Yes	3		
	Did the agent say the call was being recorded and ask permission to continue to record the call? (If the caller says "No", the agent should explain CMS requirement and end the call.)	Yes	3		
Scope of Appointment (SOA) Must have all "yes" for SOA to be compliant.	Did the agent indicate the product types that would be discussed? (MAPD or MA)	Yes	3		
	Did the agent say the date on the call recording?	Yes	3		
	Did the agent capture the beneficiary contact information?	Yes	3		
	Did the agent provide their contact information?	Yes	3		
	Did the agent make the following statement or a similar statement? "No obligation to enroll, current or future Medicare enrollment status will not be impacted, and automatic enrollment will not occur?"	Yes	3		
Script	Did the agent follow HIPAA guidelines?	Yes	3		
	Did the agent use the applicable pre-enrollment checklist to determine SEP eligibility? (must state the election period being used on the enrollment)	Yes	3		
	Did the agent specify the full name and type of plan?	Yes	3		
	Did the agent discuss the plan premium?	Yes	3		
	Did the agent discuss medical benefits and copayments/ coinsurance? (Basics-PCP, Specialist, ER & Urgent including worldwide, Inpatient, OutPatient, Lab/Diagnostic)	Yes	3		
	Did the agent discuss medical benefits and copayments/ coinsurance for the caller's specific needs (e.g., physical or mental health therapy, DME, etc.)?	Yes	3		
	Did the agent verify the caller's providers are in network?	Yes	3		
	Did the agent confirm the caller's pharmacy/pharmacies is in network and is it preferred or standard? (For MA only, enter "NA")	Yes or NA	3		
	Did the agent discuss prescription deductibles? (For MA only, enter "NA")	Yes or NA	3		
	Did the agent discuss copayment/coinsurance for each drug tier? Preferred and /or Standard, must give both if unknown. (For MA plan only, enter "NA")	Yes or NA	3		
	Did the agent discuss catastrophic prescription drug coverage or Total Out-of-Pocket? (For MA only, enter "NA")	Yes or NA	3		
	Did the agent verify the caller's medications are covered on the formulary? (For MA only, enter "NA")	Yes or NA	3		
	Did the agent make any absolute statements about the plan? (Examples: "This is the best plan" or "This plan has the largest formulary")	No	3		
Enrollment	Was the information given about the plan complete and accurate?	Yes	6		
	Did the caller request to enroll?	Yes	3		
	Did the agent clearly state the caller was enrolling in the Plan?	Yes	3		
	Did the agent explain the effect of the beneficiary's enrollment choice on the potential enrollee's current coverage?	Yes	3		
	Did the agent use the appropriate CMS-approved script?	Yes	3		
	Did the agent inform the caller they will receive a notice acknowledging receipt of enrollment?	Yes	3		
	Did the agent provide the Customer Service toll free number?	Yes	3		
	Did the agent provide the Customer Service hours of operation?	Yes	3		
	Did the agent provide the caller with a confirmation number?	Yes	3		
		TOTAL SCORE	100	0	