

**BCBSNE Greeting:** You have reached Blue Cross and Blue Shield of Nebraska's Scope of Appointment line. In accordance with CMS guidelines, you and your agent will need to record your verbal consent to the appointment. At the tone, your agent will state their name, agent writing number, phone number, and review the verbal scope of appointment with you. For the agent to continue to review Blue Cross and Blue Shield of Nebraska's products you will need to provide verbal approval. Please state your name and the phrase *I agree* after the agent finishes reading the scope of appointment to give your approval.

**Agent Script:** My name is (first last) with (agency) and my writing number is (XXXXXX-XXXXX) and I can be reached at (000-000-0000). On the phone with me today is (customer first last) and for compliance purposes I need to verify that you would like me to discuss Medicare products, which may include Medicare supplemental plans, Medicare Advantage plans and Part D, prescription drug coverage.

I also need to acknowledge that by discussing Blue Cross and Blue Shield of Nebraska plan options, you are not obligated to enroll in any plan, and you will not be automatically enrolled in any plan based on our discussion. Your current or future Medicare enrollment status will not be impacted by speaking to me about the Blue Cross and Blue Shield Plan of Nebraska plan options.

(customer first and last name), do you agree?