ACA Health Coverage

A practical briefing, intake guide and calling script.

ACA Marketplace coverage is individual or family health insurance purchased through an applicable Marketplace. The work is to understand the household's coverage needs and connect it with an authorized enrollment professional, not to promise a subsidy or switch a plan without informed permission.

Essential benefits

Marketplace plans include categories such as outpatient and emergency care, hospitalization, maternity, mental health, prescriptions, rehabilitation, preventive care, labs and pediatric care.

Plan comparison

Bronze, Silver, Gold and Platinum describe cost-sharing levels, not a quality ranking. Compare networks, drug lists, deductibles and out-of-pocket exposure alongside premiums.

Financial assistance

Premium tax credits and cost-sharing reductions depend on current eligibility rules and household circumstances. The enrollment professional verifies the actual result.

Costs and estimates

A current estimate requires location, ages, household members, tobacco use where allowed, selected plan and assistance eligibility. Illustration only: if a quoted gross premium were $600 and an approved credit were $400, the net premium would be $200. Those numbers are arithmetic examples, not 2026 offers or subsidy promises. Deductibles and other costs are separate.

Age and decision-making authority

Coverage can include adults and children; there is no universal 18-64 product eligibility rule. An adult applicant or authorized representative should handle the conversation. Medicare, employer coverage and other circumstances need professional review.

Intake & qualification

Potential fit for review

- Voluntary interest in individual or family health coverage
- Supported location and a legitimate enrollment review
- Accurate household information and authorized assistance

Stop, disqualify or refer

- No permission or attempts to enroll or switch plans without informed approval
- Instructions to invent income or a qualifying event
- Promises of free coverage or cash benefits before verification

Information to collect

- State/ZIP, household size, ages and coverage needs
- Expected household income and current coverage, without unnecessary sensitive identifiers
- Desired start date and possible enrollment event
- Provider and prescription preferences through the enrollment professional
- Documented authority and consent before application assistance or plan changes

Training material, not legal, medical, financial or insurance advice. The campaign owner must obtain current professional compliance approval before use, including calling permissions, suppression, state rules, licensing, disclosures and recipient identity. Never call after an opt-out. Never invent consent, source history, prices, health facts or eligibility. Do not collect payment credentials, Social Security or Medicare numbers in initial screening.

Frontier calling script

OUTBOUND ONLY TO LAWFULLY CONTACTABLE RECORDS after campaign approval and suppression checks.

01 Greetings & introduction

• Hello, my name is [Agent first name], and I am with Leads Cell. This is a marketing call about aca health coverage. Is now a convenient time for a brief conversation?

02 Reason for the call

• I can ask a few brief questions about your interest in aca health coverage and, if you wish, connect you with a licensed insurance agent. I cannot confirm eligibility, prices or outcomes.

03 Permission to continue

• Would you like to continue? You can decline or ask us not to contact you. Wait for an affirmative response; if declined, stop. This question does not cure an unlawful initial call.

04 Eligibility / needs questions

• Are you looking for coverage for yourself or your household?

• What state and ZIP do you live in?

• How many people need coverage?

• Do you currently have employer, Marketplace, Medicare or other coverage?

• When would you like coverage to start, and has anything recently changed?

• May an authorized professional explain options and verify whether assistance applies?

Transfer & verifier

05 Permission & disclosure before transfer

• With your permission, I can connect you now to [actual receiving person or organization], a licensed insurance agent, about aca health coverage. May I share the answers you just provided for that conversation? There is no obligation to purchase or engage a service. Wait for a clear response and record it through the approved process.

• Identify the real recipient before transfer. Use the approved campaign-specific disclosures, recording notice and applicable consent process. Do not claim that a spoken yes overrides a Do Not Call request.

06 Warm handoff

• To receiving team: I have [Prospect first name] in [state], interested in aca health coverage. With permission, here is the relevant summary: [accurate answers]. Are you available to take the conversation?

• To prospect: [Receiving person] is now on the line. They will explain their role and review the details directly. Thank you for your time. Do not tell the prospect to falsely say they initiated the call.

07 Verifier follow-through

• Thank you for staying on the line. I am [Verifier first name] with Leads Cell. You have been connected to discuss [confirmed topic]. Is that correct?

• Confirm the minimum facts, the actual receiving destination and permission. Do not repeat unnecessary sensitive questions or turn verification into pressure. Stop or return for clarification if answers differ.

If a direct transfer is approved instead of a warm transfer, identify the actual destination, obtain permission, explain any hold and confirm that the receiving team is available. Never instruct the prospect to misrepresent how the call began.

Rebuttals & references

Not interested

Understood. Thank you for your time. End the pitch; do not cycle through rebuttals after a refusal.

Do not call me

Understood. I will record your request not to receive further marketing calls from us. End the call and promptly update the suppression process.

I am busy

Of course. Would you prefer to end here, or choose a specific time for a permitted follow-up? Do not schedule without agreement.

How did you get my number?

State the actual documented source and permission accurately. If you cannot verify it, do not invent an explanation; stop and escalate the record.

I already have help or coverage

That may already meet your needs. There is no need to change it for this call. Would you like to end here? Do not interfere with existing legal representation.

What will this cost?

The receiving professional must explain the actual quote or fee agreement. I cannot promise a rate, saving, payout or approval.

I will not share personal details

That is fine. Do not provide account numbers, passwords or sensitive records on this screening call. You may verify the receiving professional and use their approved secure process.

Is this a government program?

Leads Cell is a private business, not a government agency. Explain the actual service without suggesting government endorsement.

Reference reading

Premium factors

Covered benefit categories

Calling safeguards