

ACA Consumer Consent Call Script

- As a licensed health insurance agent and to be compliant with CMS regulations I am required to obtain consent from you, the consumer, to work on your behalf. I cannot provide tax or legal advice within my capacity as an agent.
- Should you agree to consent you will be giving me, the agent, permission to:
 - Search for your application using approved classic Enhanced Direct Enrollment/Direct Enrollment websites in the marketplace.
 - Assist with completing eligibility applications.
 - Assist with plan selection and enrollment.
 - Assist with ongoing account maintenance.
- Part of this consent includes the ability to obtain some **personally identifiable information (P.I.I.)** needed to enroll in a marketplace plan. This information includes but is not limited to name, date of birth, phone number, age, social security number, Tax information, income etc.. I, the agent, will only ask for the minimum amount of P.I.I. necessary for me to carry out my functions and responsibilities. This information is used by CMS to match information listed on the application to see if you qualify for subsidies in the marketplace that can help in paying your monthly premium amount.
- This personally identifiable information is protected by both CMS and I, which is a government entity.
- You can revoke this consent at any time with me present and as an agent, I am required by law to protect any information that I obtained before the cancellation of consent.
- **If you choose not to disclose this Personally Identifiable information, I will not be able to help you in choosing or enrolling in Marketplace plans.**
- If you understand all the information that I have previously stated to you, do you consent to allow me to work as an agent on your behalf to choose and enroll in a marketplace plan?