

Ancillary Ambassadors Cancer Presentation Training Script



01

WARM-UP

FAMILY, OCCUPATION, RECREATION AND MESSAGE (FORM)

Once everyone is seated and comfortable begin the **F.O.R.M.** process. **F.O.R.M.** Is an organized way to dialogue with prospects and create conversation. **FORM** helps you guide the conversation while learning more about the prospects and their need for our products. **FORM** is your road map.

FOR EXAMPLE:

- **How long have you lived here in the area? (FAMILY)**
- **How long have you been married? (FAMILY)**
- **Tell me about your children. (FAMILY)**
- **Do you work off the farm? (OCCUPATION)**
- **What about you Ethel- do you work outside the home? (OCCUPATION)**
- **What do you folks do for fun? (RECREATION)**



These are simple and not the only questions you may ask to learn about someone. Be cautious not to interrogate. You are simply guiding the conversation with questions. The objective is to get them talking about themselves and their life as it relates to family occupation and recreation. Learning more about people will help you relate to them and vice versa.

Remember many of your referrals will come from the people your prospects are related to, work with, or spend recreational time with!

You should spend a little time telling the prospects about yourself. Briefly tell your story. This allows them to connect with you as a person instead of just another salesperson. You might want to tell them where you're from, how you got into the business, and why you are proud to represent the company and its products. If there are common interests, share that as well!

In my opinion the warm-up is one of the most important and overlooked sales steps in the entire process. Don't be afraid to spend some time on the warm-up.

02

UNCOVER THE NEED

THE MESSAGE

After F.O.R. you will transition to the Message.

Part 1 of The Message

Help to recall a personal experience.

“Tell me, Steven and Ethel, who in your family has had personal experience with cancer, heart disease, or a stroke?”

Always remember to be respectful and pay attention to their body language as they begin to talk about the personal or family experiences. It is always OK to ask if they mind talking about it.

Have them share about the experience by asking the following questions:

- **“How long ago was that cancer or heart diagnosis”**
- **“What type of cancer was that”**
- **“How long did the cancer go on”**
- **“What type of treatments did that person take”**
- **“Where was this person treated”**
- **“Who went with them for treatments”**

These are examples of exploratory questions you will ask to help them remember what it was like when a family member went through that critical illness. These questions are intended to raise awareness of their need for our products.

Sometimes you may run into a situation where they don't have family history of cancer or heart problems. At that point ask if they know of any neighbors that have gone through cancer or anyone in their community, friends, coworkers, church, neighbors, etc.

02

UNCOVER THE NEED

PART 2 OF THE MESSAGE

This is the transition to the sales presentation booklet provided by Ancillary Ambassadors. This part of the message is designed to help the prospect identify with the statistics and the cost of the disease(s).

The verbiage used to transition to your sales presentation kit is:

“Sounds like you folks are very familiar with cancer. What Cigna has done is put together a policy called Cancer Treatment, and it's simply my job just to share this information with you!”

At this point open your sales presentation booklet place it in front of the customers where they can clearly see, and begin going through the statistics.



03

GIVE AN EFFECTIVE PRESENTATION

At this point you are going to explain the fact sheets located in the Sales Presentation

- Speak clearly with confidence and enthusiasm

Open your sales kit so the prospects can clearly see and follow along with you.

(Read each page of the sales presentation kit)

As you know cancer is often in the news, and cancer is affecting more people every day.

According to the American Cancer Society...

Men have nearly
a one in two
lifetime risk of
getting cancer

An estimated
795,000
people have a
stroke each
year

More than 1.6
million Americans are
expected to be
diagnosed with cancer
this year

Women have more
than a one in three
lifetime risk

92.1 Million
Americans have
cardiovascular
disease

The good news is, thanks to early detection and advanced treatments, more people are surviving cancer.

The five year relative survival rate for those diagnosed with cancer is 68%

TWO BASIC COST PAGE

Fighting cancer can be very costly. There are two basic costs associated with cancer:

The first cost is your medical expenses, which are costs typically covered by your standard medical insurance or your Medicare, such as your doctor bills and your hospital bills.

The second cost are the non-medical costs. These are the unavoidable expenses caused by cancer or heart attacks and strokes that may come directly out of your pocket.

Now, Jim and Ethel, if you don't remember anything else, please remember this:

According to the American Cancer Society nearly 60% of the total cost of cancer is non-medical in nature- those are the out of pocket costs!

**Here are a few of the out of pocket costs we are talking about:
(Turn to the next page of Fact sheets) Puzzle Page**

- **Insurance shortfalls, deductibles, copayments, and benefit limitations**
- **Special expenses, such as transportation in hotels when you are traveling out of town for treatments, special diets, and family care**
- **Living expenses, house payments, car payments, utilities, and groceries to name a few more**

Throughout this page of the fact sheets take some time to elaborate on each out of pocket expense. Once you have elaborated on each individual out of pocket expense it's time to turn to the last page of the fact sheets!

(Turn page to last page of Fact sheet) *Ways to Pay Page*
Continue reading

There can be several ways to pay for these out of pocket expenses, which include: drawing on life savings, selling assets, or you can do what a lot of the folks around this area have done, and transfer the risk to Cigna with this program called Cancer Treatment.

04

TRANSITION TO BROCHURE

This part of the presentation is important. The verbiage used to explain the front of the brochure needs to be memorized verbatim and is very important for two main reasons:

- The verbiage used will explain to the prospect the difference between their current health coverage vs a supplemental policy.
- Also, the verbiage explains that this policy pays cash directly to them and not to the doctors and hospitals.

(Hold Cancer Treatment brochure up and recite verbiage)

Many of the folks who take a closer look at the coverage do start with the policy because of how it works and what it has to offer. The benefits in this brochure are simply used as a gauge or a guide as to what you will receive when cancer, a heart attack, or a stroke are diagnosed.

Now I'm sure you are like many of the folks in the area we do business with. You probably have a major medical policy or a Medicare policy, in which most people have a good policy.

As you know your major medical insurance is designed to pay anywhere from 80 to 100% of the hospital and doctor bills and they send that money directly to the doctors and directly to the hospitals.

Why Cancer Treatment is so popular, and why so many folks are taking advantage of this policy, is because Cancer Treatment sends cash directly to your home above and beyond any other major medical insurance you have, including Medicare.

Remember, according to the American Cancer Society, 60% of the total cost of cancer is non medical in nature and may come directly out of your pocket. And that is why so many folks want and need this cash directly to their home when cancer or heart problems occur!

04 (CONT.)

(Explain benefits in brochure)

First thing that will happen upon diagnosis of cancer or any heart attack heart disease or a stroke is you will receive one of the lump sums listed in the top of this brochure ranging from 5,000 all the way up to 100,000 whatever you feel is the best fit for your family.

Also there are a few other benefits from when you start receiving treatments.

Hospital Benefits:

\$700 a day when confined in the hospital, \$300 for outpatient diagnostic tests, \$175 per day for inpatient drug and medicine, \$350.00 per day for an attending physician, \$175 per day for private nurse, now here are some

Surgical benefits:

\$275 for second and third surgical opinions, physician's office benefit \$525 per day, anesthesia for the physician's office benefits \$131 per day, outpatient facility benefit \$1400 per day, anesthesia for outpatient facility benefit \$350.00 per day, inpatient hospital confinement \$3500 per day, anesthesia for inpatient hospital benefit \$875 per day,

Treatment benefits:

Blood and plasma \$500 per day, reconstructive breast surgery \$1400, surgical implants \$700, non-surgical prosthetic device \$300, skin cancer benefit is \$150 per day.

Transplant benefits:

Bone marrow transplant \$7000, stem cell transplant \$3500.

Chemotherapy and Radiation Benefits:

Immunotherapy \$700 per month, injected chemotherapy 700 dollars per week, Non-Hormonal oral chemotherapy \$700 per month, Hormonal oral chemotherapy \$700 per month, anti nausea drugs \$175 per week, radiation \$1400 per week, experimental treatment for cancer \$175 per day.

04 (CONT.)

(Explain benefits in brochure)

Travel benefits:

Ambulance benefit \$250 for ground and \$1000 for air ambulance. Transportation and lodging benefit \$0.50 per mile and \$100 per day for lodging.

Waiver of Premium:

In the event you are diagnosed with cancer or a heart problem, Cigna automatically waives your premium payment until you are fully recovered.

Continuation of Care Benefits:

Rehabilitative therapy benefit \$100 per day, extended care facility benefit \$100 per day, Hospice care benefit \$150 per day.

Family Care Benefits:

Child tutorial services \$100 per day counseling benefit \$100 per day child cancer diagnosis benefit \$10,000, child care benefit \$50 per day pet boarding or pet daycare benefit \$40 per day.

Explain Return of Premium

After you have completed explaining the benefits in the brochure now is the proper time to explain the return of premium benefit. Below is the verbiage use to properly explain the return of premium.

“Jed and Ethel You've seen that the policy can pay thousands and thousands of dollars when someone has cancer or heart problem., but let me show you what folks really like about our policy!”

“What would you say if I told you that when you pass away providing you never used your policy we return all of the premiums you have paid for this policy back to your spouse or family less any claims paid” Cigna is proud to provide a return of premium benefit as part of your policy!

05

THE CLOSING SEQUENCE

THE CLOSING SEQUENCE

This is the part of the presentation where you will ask their age using the verbiage below to look up rates and explain the levels of coverage. Then, ask for the sale!

“Jed and Ethel, if you don't mind me asking, how many birthday candles are you each gonna put in your cake this year?”

Once you have their age, flip the brochure over and write down three lump sum diagnosis amounts. These are the levels of coverage that they will be able to choose from. We feel it is more effective and simple to offer three levels of coverage.

Transition to explaining levels of coverage:

“What I explained to you is the 700 level policy. We do have other levels of coverage available. We also have the 400 level policy, which is just above half of the benefits I've explained earlier. and we also have our 200 level policy which is half of the of the 400 level .”

Transition to explaining Company Credibility:

This part of the presentation is very important for the simple fact that the prospect needs to have trust in the company that they will be purchasing the policy from.

(Recite the verbiage listed below)

“Now I'm sure you have already heard of Cigna health insurance. The company is over 225 years old. They currently have over 22 million customers. They are #13 on the Fortune 500. They are a very strong stable company with excellent customer service based right out of the United States.”

05

THE CLOSING SEQUENCE

Transition to looking up the rates and asking for the sale:
(Recite the verbiage below)

“Folks please allow me to look up some pricing to see what it'll take to get you involved with this policy. How do you normally do this type of business monthly or annually?”

At this point you are going to use the rate sheet to look up their rates and write them on the back of the brochure then you will transition into closing the sale! Proceed to the “Standard Close”

TRANSITION TO THE STANDARD CLOSE:

Now most families I sit with are going to go with the 700 Level or the 400 Level for two basic reasons.

The first reason is very simple, when cancer or heart attack or strokes occur you will want all the benefit that this policy can provide!

The Second reason is, according to the American Cancer society over 60 percent of the cost of cancer is Non-Medical in nature and potentially comes out of your own check-book.

That's why so many families want and need this additional income and let's not forget with the return of premium feature as long as you don't use the policy all of the premiums get sent back to your family.

So Jed and Ethel of the levels I've read and explained to you which one will best fit your families need today

At this point keep your head down and look at the levels of coverage and wait for a response. They will either pick a level of coverage. At that point proceed to fill the application out, or you will get an objection.

If you get additional objections from the prospects proceed to follow the order of closes!!!

05

THE CLOSING SEQUENCE

CLOSING THE SALE

For many salespeople closing the sales is the most difficult part of the sales presentation. That is probably because they believe closing is somehow separate from the presentation itself. That is not the case, you are constantly closing throughout the sales presentation. So asking for the sale is a natural next step when you ask them which level of policy works best for them. At that point the prospect will often choose a level of coverage! Awesome!!!!

However, we all know that isn't always the case sometimes the prospect doesn't say yes when that happens many salespeople will take a hit to their confidence thinking the prospect is rejecting them and rejecting to buying.

We suggest you think about it this way in many instances prospects welcomed you into their home with the intention of being polite and listening to you but the truth of the matter is that they had no intention of buying anything but then because of your enthusiasm and clear and conscience and compelling sales presentation that helps them become aware of the need they begin to experience a shift in their thinking.

They planned to say no but now they believe they need to say yes because you have created the need to have this product

So instead of saying “no” like they plan to, they hesitate, delay, stall or procrastinate. you aren't getting an objection you are getting a hesitation.

05 (CONT.)

CLOSING THE SALE

The difference between a good salesperson and a great salesperson is the great salesperson understands this human tendency and provides the necessary information to move the prospect to a decision.

This is where our common sense closes come in!

You will discover that objections, stalls, or hesitations can be put into four general categories:

1. No Rush
2. No Need
3. No Confidence
4. No Money

It sounds like this:

- “We want to think about it”
- “We're insurance poor”
- “I don't know if we can afford that”
- “We have good insurance”
- “I don't think we need it”

Note: These closes are not “Hard Closes”. These closes are simply submitting common sense to the customer to provide reasons to buy. At no point do we want the prospect to feel pressured!!

The first close is built into your sales presentation. (Standard Close). When you have quoted the rates you move immediately to the standard close.

As you are responding to the objections that you will be hearing, it is extremely important to start each close by saying that you understand how they FEEL. Others have FELT that way... what the others FOUND was.....

This is known as the FEEL, FELT, FOUND Method.

We suggest these four best practice steps to close properly:

1. Acknowledge the objection.
2. Answer the objection quickly and sincerely.
3. Follow the order of closes
4. Keep quiet, wait for an OK or objection and proceed

This closing process has been proven successful for those who choose to fully embrace it. Our experience demonstrates that prospects will make a decision “yes” or “no” after three or four effective closes. Our common sense closes address the sense of urgency, the need, and trust. we suggest you learn and use the following closes in order. They put the prospect in the best position to make a decision by addressing the real reason they seem unwilling to decide now.

STANDARD CLOSE

Now most families that are getting involved with this policy are going to go with the 700 Level for two reasons.

The first reason is very simple, when cancer or Heart problems occurs you will want all the benefits that this policy can provide to help with all of the out-of-pocket expenses!

The Second reason is, remember with the return of premium benefits, Cigna will return all of the premiums paid into this policy back to your spouse or family member upon your passing minus any claims paid!

Folks would much rather have this coverage and never need it than to need it and not have it.

So the thing for you to do is like many of the other families have done in this area and that's go ahead and pick the level of coverage that best fits your family's needs of the three levels provided there which one is going to best fit your need this evening.

At this point keep your head down and look at the levels of coverage and wait for a response. They will either pick a level of coverage. At that point proceed to fill the application out, or you will get an objection. If you continue to get objections follow the order of closes below.

INTEREST ON YOUR MONEY CLOSE

Folks, I understand how you feel. Others I have talked to felt the same way. What they have found is what this really costs them is the interest on their money. For example, let's use that \$40,000 lump sum level which costs you 100 dollars per month. If you took that money down to your bank, what would they give you for an interest rate on that \$100 per month? I'm guessing 1/4 percent or a 1/2 percent.

A lot of folks feel for that little bit of interest they are losing by having their money in the savings account. They would much rather have their money in this policy because the benefits you would receive off of this policy when cancer, a heart attack, or stroke occur will far exceed any interest accrued by having your money in the savings account.

INTEREST ON YOUR MONEY CLOSE (CONT.)

Folks would much rather have this coverage and never need it than to need it and not have it. And that's why the thing for you folks to do is like so many other families have done in this area and that's go ahead and pick the level of coverage that you feel best fits your family's needs, of these levels I've offered you which one will best fit your need tonight.

Once again put your head down and look at the levels of coverage and wait for a “YES” or another objection! If the prospect gives you another hesitation, objection, or stall proceed to the next close in the order listed.

NOTICE: how the final sentences are directly from the standard close. **Now what you folks should do is like other families have done and that is to choose the covers that best fits your needs**” that is ALWAYS the case with our closes. you are closing with the idea that they will choose what works best for them. Successful closing is based on communicating common-sense closes that focus on the prospect **buying benefits**. You may still get a stall for the decision to buy. If you do, use the “**two things to consider close**”

TWO THINGS TO CONSIDER CLOSE

Well as I mentioned before I can understand how you feel and a lot of the folks around the area felt the same way. But here's what they have come to find. There are two things to consider when looking at purchasing a policy like this.

The first thing to consider is do you need the policy. Now if we had a crystal ball and we knew that cancer or heart problems we're going to strike your family in the next six months, a year, or five years I'm sure you could agree that this additional money coming to your household would be useful.

The second thing to consider is can you afford it. Folks I'm not saying that you couldn't write me a check for any one of these policies or for that matter all three policies combined, and it probably would not affect your standard of living but when cancer or Heart problems happen it could certainly affect anyone's standard of living wouldn't you agree. Now the thing for you folks to do like I mentioned earlier is pick the level of coverage you feel best fits your needs.

Would you like to pay monthly or annually??

Once again put your head down and look at the levels of coverage and wait for a “YES” or another objection!

If the prospect gives you another hesitation, objection, or stall proceed to the next close in the order listed.

TWO TIMES TO THINK ABOUT IT CLOSE

Well folks, I understand how you feel. I'm sure you want think about it because you want make the best decision, right? However, there are really only two times when a person thinks about this. The first is when the information is fresh in front of you and you can make the best business decision.

The second time is when cancer, heart attack, heart disease, or a stroke occurs, and then you're not eligible. And that's why many folks have gone ahead and picked the level of coverage they feel best fits their needs while they're still eligible.

Which level would be best to start with?

Once again put your head down and look at the levels of coverage and wait for a “YES” or another objection!

Closing the sale is an art form. It takes practice, and requires confidence and consistency!!!

GAINING REFERRALS

The Warm Down: Important for Gaining Referrals

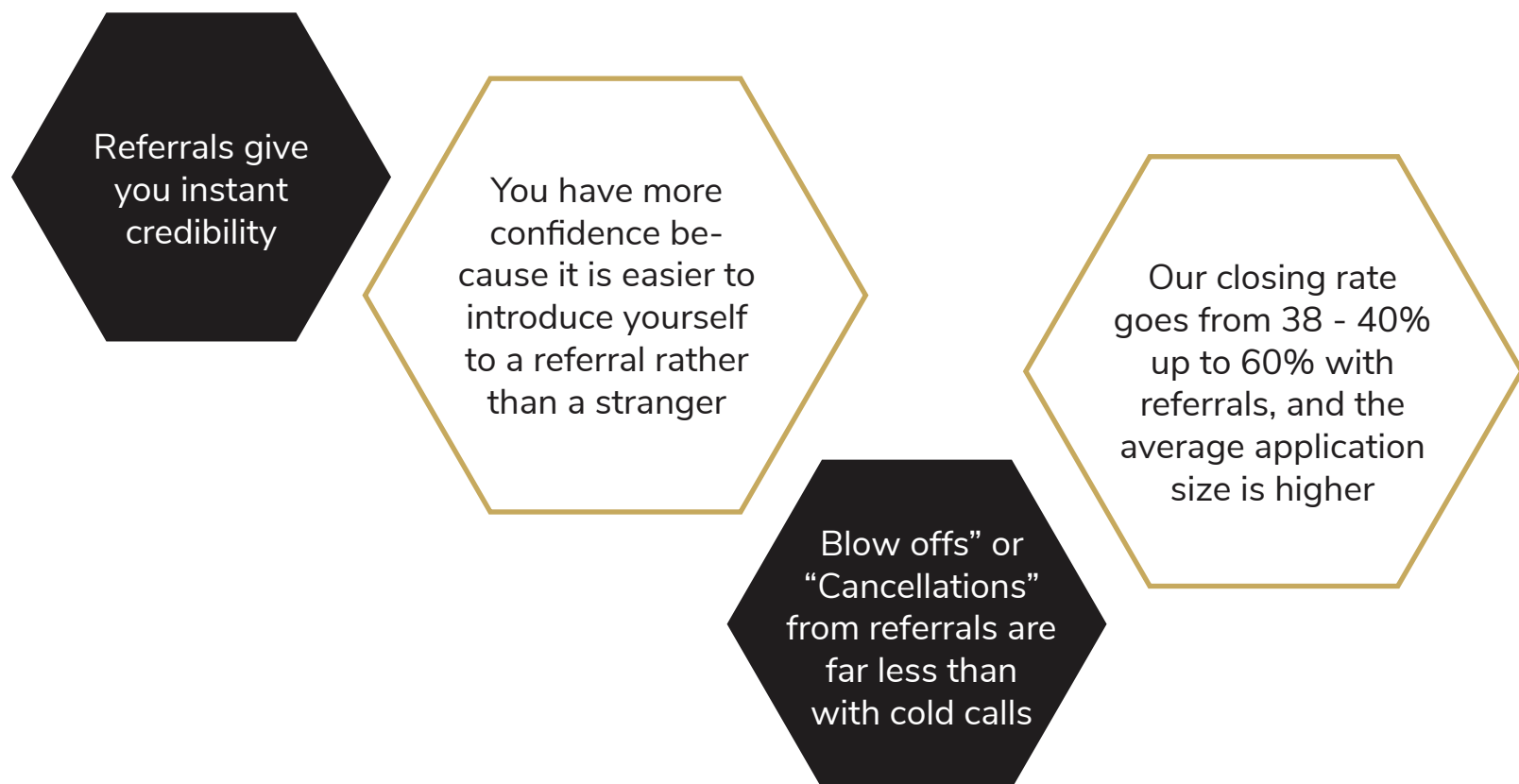
People buy from people they like, and they refer people they like. After you have received a signed application and other required paperwork, you will begin the Warm-Down. Lean back in your chair and visit with your new customers for a few minutes. Chat about their hobbies, stories about their kids, their anticipated travel, anything other than the sale that you just made. This will build relationships and then you will experience fewer cancellations!

Referrals are the lifeblood of your business! You should attempt to get referrals in every home or on every phone call. Referrals lead to more referrals.

GAINING REFERRALS

Becoming proficient at getting referrals is the most efficient and least painful way to build sales. Who really wants to make cold calls? Referrals are warmer and result in more opportunity to present our products.

There are several reasons why to gain referrals:



When asking for referrals, think back during the presentation and recall any friends, neighbors, or coworkers they mentioned. Also, during the "creating the need" process, they may have shared families that have had gone through cancer and heart problems.

These are all great prospects to get a referral to go see!

REFERRAL VERBIAGE:

Jed and Ethel, I was wondering if you guys could do me one last favor. Most of the folks that do take advantage of our cancer and heart insurance, may know a few other folks around the area that could benefit from taking a look at this policy.

Now whether that family takes advantage of the policy or not, we can leave that decision up to that family once I get a chance to show them.

But because I'm in the area for such a short time I can get them the information right away!

Now start by "Priming the Pump"

Ask questions to draw names out of the customer!

For Example:

"Jed, you have a neighbor right across the road in the white house with the barn. What are their names? And to the right of that neighbor there is a green house with a white garage. What are their names?"

"Jed, you mentioned your fishing buddy Bill had been going through cancer treatments in the last year. What was Bill's last name?"

"Ethel, you mentioned earlier that you had three brothers and three sisters. Could you give me their names by chance?"

"Jed, you also mentioned that you work at the local tire shop. Who are some of the co-workers I may be able to get this information out to?"

Once you have a list of referrals from the customer go back and qualify each one of the names. Married? Approximate Age? Work? Best time to catch them at home?

CONTACTING A REFERRAL



ICE BREAKER

Approaching a referral verbiage

Hello! You must be Frank. Hope I haven't caught you at a bad time. I am (agents name). I am with (Agency name). I was visiting with your friends Jed and Ethel Smith last night and I made them a promise I would drop off some information to you! The good news is you only have to put up with me for 10 or 15 minutes. Would right now be OK or would it be better to come back later?

Now the response you may get from the prospect is: "What's this information about?"

Your response to that is:

I'm glad you asked. It's a program called Cancer Treatment. Now you may or may not have heard of this program. Jed and Ethel are involved in this program! And as I mentioned earlier, I made a promise to Jed and Ethel that I would get you this information. And, you will only have to put up with me for about 10 to 15 minutes. Would now be a good time to go through that with you or would you prefer me to stop back in the evening?

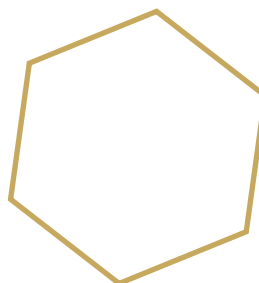
Now the response you may get from the prospect:

Is this insurance??

Your response:

Well Frank, it is insurance. However, it is nothing like your health insurance or your Medicare that you currently have. In fact, it's better than that, and I think that's why Jed and Ethel sent me over here! Like I said earlier, the information only takes about 10-15 minutes. Do you have a place we could sit down?

Once the prospect has agreed to listen to your presentation, revert back to the Sales Presentation and start with F.O.R.M Process.



COMPOUNDING FACTORS

Baseline Average

- 8 weekly presentations x 38% closing ratio = 3 weekly sales
- \$1450 average application x 48 weeks = \$208,800 Annual Premium

First Year Commissions at 50%

- \$104,400!!!

What happens if you increase your activity?

Increase your presentations

- 10 weekly presentations x 38 closing ratio = 4 weekly sales
- \$1450 average application x 48 weeks = \$278,400 Annual Premium

First Year Commissions at 50%

- \$139,200!!!

RENEWAL INCOME

1st year renewal income

1st year Annualized Premium - \$208,800

- 8% renewal commission x \$208,800 premium = \$16,704

2nd Year Product Commissions = \$104,400

- Add 1st year Renewal Income - \$16,704
- 2nd year total income w/ renewals = \$121,104

3rd Year Product Commissions = \$104,400

- Add 1st and 2nd year renewal income = \$33,408
- 3rd year total income w/ renewals = \$137,808

4th Year Product Commissions = \$104,400

- Add years 1-3 renewal income = \$50,112
- 4th year total income w/ renewals = \$154,512

5th Year Product Commissions = \$104,400

- Add years 1-4 renewal income = \$66,816
- 5th year total income w /renewals = \$171,216

After 5 years of showing this product to 8 people a week, your total income is \$171,216, of which \$66,816 is renewal income.

And, you are VESTED FOR LIFE from Day 1!

