Medicare Marketing Playbook

Free outreach, reusable scripts and social copy | September 16, 2026

Build a steady source of requested conversations through useful education and local relationships. These activities need no ad purchase; printing, travel and your time may still cost money. Results are not guaranteed.

Start here

1. Choose one channel for this week: Facebook education, local organization outreach, or an educational event. Start with the channel you can maintain.

2. Add your actual name, company and verified business phone to the caption. Confirm your license and appointment for the state where a person lives before discussing products.

3. Use the complete caption with its graphic. Keep disclosures legible. Get agency/carrier review where required before publishing customized insurance content.

4. Invite people to contact you themselves. A like, group membership, referral name, attendance or a facility's permission does not authorize an unsolicited sales call, text or direct message.

5. Record a requested conversation and its permission evidence in the approved CRM. Keep health details, Medicare numbers and beneficiary lists out of public comments and this portal.

Your first four weeks

Week 1 · Set up

Verify your contact details and licensed states. Choose two channels. Personalize three posts. Identify ten public organization contacts and request one education conversation.

Week 2 · Be useful

Publish three educational posts. Contact up to five organization business contacts within their policies. Practice the director script. Follow up only on permissioned requests.

Week 3 · Teach

Arrange or deliver one approved educational session if a host is available. Share the participant guide. Publish three posts and one short educational video.

Week 4 · Improve

Publish the remaining three posts. Review which sources generated requested conversations. Keep the two best activities. Schedule the next education topic with a willing host.

Each Friday record aggregate counts: posts published; organization conversations; educational sessions; inbound requests; valid permission records; appointments completed; applications; and actual expenses. Do not put personal lead details in a shared marketing tracker. Aim for a consistent routine, not a promised number of enrollments.

Facebook and community groups

1. Use your professional Page and one or two local groups that allow business education. Read each group's rules; ask an administrator about an educational post before posting if permission is required.

2. Publish three useful posts per week. Rotate a basic explanation, a preparation checklist and an invitation to ask a general question. Pair posts 1, 4 and 8 with the matching graphics.

3. Respond to public questions with general education. If someone wants personal help, invite them to call your business number or use the agency's approved request form. Do not ask for their medication list in a comment.

4. Do not scrape members, cold message commenters, buy lists or treat reactions as consent. If someone explicitly asks you to message them, respond within that request and obtain any additional permission needed before calling or texting.

5. Save the approved post version and URL. At week's end, count requested conversations and appointments; likes alone are not leads.

Local organizations and facility directors

1. Make a list of ten organizations in your licensed service area using their public websites: community centers, libraries, senior communities, faith organizations and caregiver groups. Use publicly listed business contacts, not resident directories.

2. Call the activity or program director to offer an optional Medicare education session. Use the director script below. Ask about topic needs, accessibility, room availability and their outside-presenter policy.

3. Send the generic director overview only after confirming the right contact. Describe the session accurately as educational. Do not offer per-enrollment payments or claim a partnership or endorsement that does not exist.

4. Confirm the date, public invitation wording, interpreter/large-print needs and equipment in writing. Follow carrier event reporting and review requirements. Use a common room the facility approves, away from treatment areas.

5. Let interested people initiate a separate request for help. The host should not disclose resident or patient lists, diagnoses or insurance information. Do not request income or Medicaid profiles to select an audience.

A simple education event

1. Start with a 30–45 minute session plus general questions. Use the community slides, participant handout and director overview. Replace presenter fields before use.

2. Our recommended agency format keeps plan quotes, applications, SOA collection and appointment booking outside the educational session. This is a stricter operating choice, not a claim that current CMS rules prohibit every voluntary contact card or SOA at every educational event.

3. Open with the educational purpose, optional participation and privacy reminder. Explain Original Medicare, Part C, Medigap and Part D without recommending a specific plan. Answer personal scenarios privately at a later beneficiary-requested appointment.

4. Offer a business card and official resources. Do not make a sign-in, gift, contact details or enrollment a condition of attendance. No meals or giveaways are needed for this free-marketing plan.

5. Afterward, thank the organizer at their business contact, record attendance totals without beneficiary details, and ask which general topic would help next time. Attendance is not a follow-up permission list.

Referrals without buying leads

1. At the end of a good service conversation, offer a business card or public educational post the person may share. Ask them to let their friend decide whether to contact you.

2. Use: 'If someone you know has a Medicare question, you're welcome to share my business contact. Please let them reach out when they're ready; you don't need to give me their phone number.'

3. Do not call a referred person merely because a friend supplied their number. Do not pay for Medicare referrals or create a referral reward program without a separate compliance review.

4. Track the source only after a person contacts you or provides valid permission. Thank a referrer without confirming a beneficiary's coverage, health or enrollment information.

Google visibility and reviews

1. If your business qualifies, claim or maintain an accurate Google Business Profile. Check eligibility before creating an individual practitioner profile; do not create duplicate profiles or use a false office address.

2. Keep your business name, phone, service area, website and hours accurate. Use a real professional photo. Add educational updates and a clear path to your approved contact page.

3. Ask clients neutrally for an honest review of service. Do not offer gifts, screen for only happy clients, write their review or ask them to disclose medical or enrollment details.

4. In a public reply, thank the reviewer without confirming they are a client or discussing their coverage. Use profile performance and source counts to learn which information helps people find you.

Short educational videos and email

1. Record a 30–60 second video explaining one term using the post copy. Use clear audio, captions and large text. Avoid beneficiary stories, screenshots of records and invented savings examples.

2. Share the public video on your permitted channels with your real identity and the complete disclosure. Do not imply affiliation with Medicare or display government or carrier marks without permission.

3. For email, use the agency's approved permission-based list and unsubscribe process. A facility's resident directory, purchased file or scraped group is not your newsletter list.

4. Answer requested questions promptly and honor opt-outs across the CRM. Keep automated campaigns off until contact permissions, disclosures and applicable communication rules have been checked.

12 Facebook posts to personalize

Replace [Agent name], [Company name] and [Phone] before posting. Use your real licensed identity. Keep the entire disclosure with the post. These are educational drafts; obtain applicable review for the actual context and channel.

1 · A friendly introduction

Matching graphic: Medicare_Questions.png

Hello, neighbors! I'm [Agent name], a licensed insurance agent with [Company name]. I share plain-language Medicare education so people know what questions to ask before making a coverage decision.

Have a general Medicare question? You're welcome to call me at [Phone]. Please keep personal health and insurance information out of public comments.

Educational information. Not affiliated with or endorsed by Medicare or any government agency.

2 · The four parts

Medicare's letters can be confusing. A and B make up Original Medicare. Part C, also called Medicare Advantage, is another way to receive Medicare benefits through a private plan. Part D helps cover prescription drugs.

Start with the basics, then look at your own doctors, medicines and budget. Official explanations are available at Medicare.gov.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

3 · Two different coverage choices

Medicare Supplement insurance, also called Medigap, and Medicare Advantage are different types of coverage. Medigap works with Original Medicare. Medicare Advantage is another way to receive Medicare benefits.

Neither choice fits everyone. Ask how provider access, prescription coverage, premiums and other costs would work together for you.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

4 · Prepare for a coverage conversation

Matching graphic: Prepare_Your_Questions.png

A little preparation can make a Medicare conversation easier. Keep your doctor and specialist names, medicine names and preferred pharmacy handy for a private appointment. Write down what matters most to you and questions about total yearly costs.

Please don't post your Medicare number or medication list online. Use a secure, approved channel for personal details.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

5 · Look beyond the premium

A monthly premium is only one part of the cost picture. Before making a Medicare coverage choice, ask about deductibles, copays, prescriptions, provider access and possible yearly expenses.

A useful question is: ‘What could this cost in a year when I need more care?’ Keep the answer alongside the benefits you value.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

6 · Dental questions worth asking

Planning dental work? Ask whether the exact service is covered, whether your dentist participates, and whether waiting periods, payment limits or other conditions apply.

Original Medicare generally does not cover routine dental services, with some medical-related exceptions. Dental coverage can vary, so a benefit headline is not the full answer.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

7 · Help a family member prepare

Helping someone understand Medicare? Ask which questions they want answered and whether they would like you involved. Keep their choices and privacy at the center of the conversation.

A family relationship alone does not give someone authority to enroll another person. An agent should verify any needed authorization before acting.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

8 · Questions before a change

Matching graphic: Before_A_Change.png

Before changing Medicare coverage, ask: Can I keep the providers I use? How are my medicines covered? What could I pay? How would a change affect my current benefits?

Check enrollment rights and effective dates before ending existing coverage. An extra benefit should not be the only reason for a decision.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

9 · A resource you can bookmark

Medicare.gov offers explanations of coverage, plan comparison tools and official help. Your state SHIP program also provides free, impartial Medicare counseling; find it at shiphelp.org.

It helps to compare reliable sources and write down questions before making a decision.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

10 · Check before sharing information

Protect your Medicare information. If someone unexpectedly asks for your Medicare number or pressures you to act, pause and verify who you are speaking with using an official contact number.

For Medicare questions, visit Medicare.gov or call 1-800-MEDICARE. Never post insurance cards or personal health details in a public comment.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

11 · Invite a community topic

Which Medicare topic would be useful for a community education session: understanding the letters, preparing for a coverage conversation, or knowing which questions to ask?

General topic suggestions are welcome. Please leave personal health, income and insurance information out of the comments.

[Agent name] | [Company name] | [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

12 · Share a useful contact

Know someone who has a Medicare question? You're welcome to share this post or my business contact and let them decide whether to reach out. You do not need to send me their personal information.

I'm [Agent name] with [Company name]. My business number is [Phone].

Educational information. Not affiliated with or endorsed by Medicare or any government agency.

Ad copy and event invitations

Education invitation

Use only after a host confirms the event. Replace every bracketed field. Review any venue and carrier requirements before posting.

Medicare, explained in plain language. Join an educational conversation about the basics and questions to ask before choosing coverage. No plan sales or enrollment during the session.
[Date] · [Time and time zone] · [Location]
Presenter: [Agent name], [Company name] · [Phone]
Attendance is optional. No personal or insurance information is required to attend. Not affiliated with or endorsed by Medicare or any government agency.

Preparation checklist

Pair with Prepare Your Questions. This copy has no specific plan or benefit claim. Paid placement still needs a separate platform and carrier review.

A better Medicare conversation starts with good questions. Think about providers, prescriptions, total costs and what matters to you. Save our educational checklist for your next private coverage conversation.
[Agent name] · [Company name] · [Phone]
Educational information. Not affiliated with or endorsed by Medicare or any government agency.

Community program offer

For public organization outreach. Do not claim the facility endorses the agency. Never imply residency creates special benefits or enrollment eligibility.

Looking for a Medicare education topic for your community group? A plain-language session can help people understand the basics and prepare useful questions.
Program directors may contact [Agent name], [Company name], at [Phone] to discuss an optional educational session. No plan sales or enrollment during the program.
Not affiliated with or endorsed by Medicare or any government agency.

Facility and nursing-home scripts

Nursing-home or community director call

Hello, my name is [Agent name]. I'm a licensed insurance agent with [Company name]. May I speak with the person who coordinates resident and family education?

I offer a plain-language Medicare education session covering the basics, common coverage questions and official resources. It is optional, and we would not compare specific plans, take applications or collect private resident information during the session.

Would that type of program be useful for your residents or families? [Pause.] Which topics, languages or accessibility needs should we consider? [Pause.]

If you're interested, I can send a short overview for your review. What is the best business email and who should review outside-presenter requests? There is no need to share resident names, phone numbers or medical information.

Director email

Subject: Optional Medicare education for residents and families

Hello [Director name],

I'm [Agent name], a licensed insurance agent with [Company name]. I'm reaching out about an optional Medicare education session for your residents and families.

The program explains basic coverage choices, questions to ask about costs and access, and official resources. It is educational: no specific plan recommendations or enrollment during the session. Attendees do not need to provide contact information or insurance cards.

We can discuss a 30–45 minute session plus general questions, an accessible common room, large-print materials and language needs. Please let me know your outside-presenter process and whether you would like the program overview. I do not need any resident or patient lists.

Thank you,
[Agent name]
[Company name]
[Phone]

Not affiliated with or endorsed by Medicare or any government agency.

Director voicemail

Hello [Director name], this is [Agent name], a licensed insurance agent with [Company name]. I'm calling about an optional Medicare education program for residents and families. It would be general education, with no plan enrollment during the session. If you coordinate these programs, my business number is [Phone]. Again, [Agent name] at [Phone]. Thank you.

Open the education session

Thank you for joining us. I'm [Agent name], a licensed insurance agent with [Company name]. Today is an educational session about Medicare basics and questions you can ask. We will not recommend specific plans or enroll anyone today.

You are welcome to listen without sharing your name, contact information or insurance card. Please keep personal health and financial details private. General questions are welcome. We are not affiliated with or endorsed by Medicare, the government or this host organization.

What general Medicare topic would you like to understand better? [Pause. Do not ask for diagnoses, current insurer, income or Medicaid status.]

When a resident asks for personal help

I'm happy to explain the general issue. The answer for you could depend on your current coverage and needs, so let's keep those details private. Medicare.gov or your state SHIP can help. You may also use my business contact to request a separate conversation if you choose.

You do not need to make any decision today. [If the person later requests help, document that request and follow the required permission and Scope of Appointment process before discussing products.]

Begin a requested nursing-home appointment

Hello [Name], I'm [Agent name] with [Company name]. You requested a conversation about [requested topic]. Is this still a good time, and is there someone you would like involved? [Pause.]

Before we discuss plan options, I'll confirm your request, the topics you want to discuss, any required disclosures and Scope of Appointment, and any representative authority. You can decide not to continue at any time.

With your permission, we'll review the providers you need, your prescriptions and pharmacy, current coverage, costs and priorities. Living here does not by itself mean you qualify for a particular plan or enrollment period. We will verify those rules and the facility's participation before considering a change.

[Use the carrier-approved sales and enrollment process from this point. Do not enter a resident's room without their prior invitation and facility permission. Do not infer incapacity or authority from age, diagnosis or a family member's presence.]

Close the education session

Thank you for your questions. Keep the handout and use the official resources whenever you need them. There is no obligation to change coverage or contact an agent. If you would like a separate conversation, you may choose to use the business contact provided.

Before any change, check your providers, prescriptions, total costs and enrollment rights. Thank you to our host for providing space for education.

Public social reply

Thanks for the question. I can share general information here, but please don't post your Medicare number or health details. If you would like a personal conversation, you may call my business number, [Phone], or use the approved contact link on my profile. Medicare.gov and your state SHIP are also available.

Tools and the shared materials library

Google Business Profile

Eligible businesses can claim or add a profile at no charge. Keep accurate contact details and use public educational updates. Confirm practitioner and address eligibility before creating a profile.

https://support.google.com/business/answer/2911778?hl=en

Facebook and Meta Business Suite

Use your existing professional Page to publish the supplied captions and track responses. Where scheduling is available in your account, arrange three organic posts per week. A paid boost is optional and outside this free plan.

https://business.facebook.com/

Canva

Use your current account to customize approved designs. Keep masters separate from agent copies. Export social images and print PDFs; check whether an asset or export requires payment before using it. Do not upload beneficiary information.

https://www.canva.com/

Medicare.gov

Use official coverage explanations and Plan Compare to verify information. Link to official resources; do not imply your agency is part of Medicare.

https://www.medicare.gov/

SHIP locator

Find free, impartial Medicare counseling for a resident's state. This is a beneficiary resource, not a prospect list or agency endorsement.

https://www.shiphelp.org/

Your existing CRM

Use the approved private contact record for permission evidence, requested topics, appointments and opt-outs. Existing software or phone charges may apply. Do not use Discord as a beneficiary database.

https://app.gohighlevel.com/

Keep materials current

Use the agent portal's Marketing tab as the current index of materials. Bookmark the Marketing link and download the current edition there. Keep contracts and personal lead data out of the marketing materials.

In Canva, organize masters into Medicare education, Social posts, Facility outreach, and Retired. Agents should duplicate a master before editing their own contact details. Give edit access only where needed; keep retired benefit or year-specific designs out of the active set.

An owner should review each design and record its title, source, permitted use, state/plan/year if applicable, approval date and current file link. Generic education belongs in the shared kit; plan-specific ads require their own approval and expiration controls.

To add a Canva design manually: open the master, create an agent copy, personalize it, obtain needed review, export the image or PDF, and give the approved export and source link to the portal administrator. A shared link is not automatic synchronization; new exports must replace or version the published asset.

This edition contains new generic social materials and adaptations of the saved Victoria presentation and handouts. Existing Canva designs have not yet been imported into this collection.

Before you publish or contact someone

These are generic educational drafts, not CMS-approved or carrier-approved advertisements. Do not add specific plan benefits, premiums, savings, carrier logos or testimonials without the required review and substantiation.

Use the applicable current TPMO disclosure and verified local organization/plan counts wherever required. The short educational disclaimer here does not replace a mandatory TPMO disclaimer. Do not copy another agent's counts or use placeholders in a public ad.

Confirm permission before an outbound call, text or direct message, and follow channel-specific and state rules. Attendance, a referral name and a social reaction are not permission. Honor opt-outs promptly.

For facilities, obtain host permission and a beneficiary's request for a private appointment. Keep marketing away from treatment areas; do not solicit residents door to door. Do not obtain patient lists or use staff as enrollment recruiters.

Check each person's actual enrollment eligibility, service area, carrier appointment, providers and medications. A nursing-home address does not automatically establish I-SNP eligibility, a special enrollment period or coverage of residential costs.

Use the approved recording, consent, Scope of Appointment and record-retention workflow for individual sales conversations. Keep medical details and lead records in approved systems.

Before publishing, confirm the actual presenter, phone, event date, location and language; remove placeholders; include needed disclosures; proofread the mobile image; verify any QR code or link; record approval and version.

Official references

Rules checked September 16, 2026. Recheck operative rules, state requirements and carrier procedures before use. Existing agency and carrier processes continue to apply.

CMS beneficiary contact and educational events: https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-V/section-422.2264

CMS healthcare settings: https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-V/section-422.2266

CMS agent and TPMO obligations: https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-V/section-422.2274

HHS marketing and health information: https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/marketing/index.html

Medicare coverage choices: https://www.medicare.gov/basics/get-started-with-medicare/get-more-coverage/your-coverage-options

Medicare dental coverage: https://www.medicare.gov/coverage/dental-services

Medicare long-term care: https://www.medicare.gov/coverage/long-term-care

Medigap purchase rights: https://www.medicare.gov/health-drug-plans/medigap/ready-to-buy