



FAQ & Objection-Handling Guide

Selling **Quick Issue Critical Illness** Insurance during ACA Enrollment

How to Use This Guide

Clients will have questions or hesitation, that's normal. Use these responses to acknowledge the concern, keep things simple, and move the conversation forward. Keep it conversational and tied to the ACA health plan you just reviewed.

Simple way to think about it:

Your health plan covers the treatment. This helps protect your finances if you're diagnosed with a serious illness.

A graphic consisting of the words "TURN IT UP" in a bold, white, sans-serif font. The text is positioned inside a semi-circular arrangement of white lines of varying lengths, resembling a volume knob or a sound wave. The background is a solid dark red with a pattern of concentric, curved white lines radiating from the bottom left towards the top right.

**TURN
IT UP**

Common Client Responses & How to Handle Them

1. I'll think about it.

What it usually means: The client doesn't feel urgency or hasn't seen enough value yet

How to respond

- *That makes sense. The main thing to consider is that a serious diagnosis can bring costs your health plan doesn't fully cover, things like lost income, travel for treatment, or help at home.*
- *A major illness can require time off work for treatment and follow-up care, resulting in lost income while regular bills and mortgage payments stack up.*
- *Those costs can show up fast, on top of whatever your health plan already leaves you responsible for. That's why it's worth looking at.*

2. Doesn't my medical plan already cover these illnesses?

What it usually means: They don't understand the difference between treatment coverage and their own costs

How to respond

- *Your health plan does cover the treatment, but you're still responsible for your deductible, out-of-pocket costs, and anything your plan doesn't pick up, like lost income if you're out of work.*
- *What makes this different is that it pays you cash directly. You can use it for anything you need - mortgage, recovery care, childcare and everyday expenses.*
- *It's money to help you keep your household running, so you're not trying to cover everything yourself while you're also dealing with a diagnosis.*

3. I can't afford anything extra right now.

What it usually means: Budget sensitivity or sticker shock

How to respond

- *I understand. A lot of people feel that way when they're looking at their monthly premium.-*
- *What they usually look at next is the other side of it. A sudden health event can come with high medical costs, plus time off work for recovery, everyday bills and other expenses. Critical illness insurance gives you money you can use however you need to keep your life on track.*
- *It's more affordable than you might think – for many people, the monthly cost can be less than a meal out with your family and could make a huge difference if you face a serious illness.*

4. Is this really necessary?

What it usually means: They're weighing value vs. cost

How to respond

- *It depends on your situation. Most people don't have the savings on hand to cover deductibles and copays in their health plan, as well as managing time away from work while everyday bills continue.*
- *Costs can add up quickly. Some people prefer a way to handle those costs, so a serious illness doesn't turn into a bigger financial hit.*
- *It really comes down to how you want to handle that risk.*

5. I already have other coverage

What it usually means: They may have something, but aren't sure how it works

How to respond

- *That's a great start – let's look at how your coverages can work together. Most medical coverage still leaves you with deductibles, copays and out-of-pocket costs if something happens.*
- *A lot of people already have some coverage. What makes this coverage different is that it pays you cash directly while you're going through treatment and recovery. No networks, deductibles or restrictions.*
- *Most people add this so they have another layer of protection to rely on while going through treatment. That's usually what they take a second look at.*

6. I just want to focus on my health plan today.

What it usually means: They feel rushed or want to simplify the conversation

How to respond

- *Totally understand. We'll keep this quick.*
- *Your health plan is a great start. But you're still responsible for the deductible and out-of-pocket expenses. How would you manage costs like travel, childcare and everyday bills if a serious illness kept you from working?*
- *That's why critical illness insurance is so important – it gives you money directly, so you can cover whatever is most important to you.*
- *It's easy to get. It's a fast application with no medical exams required. You can think of it as an extension of your health plan.*
- *It only takes a few minutes to walk through.*

7. This feels like a lot to decide all at once.

What it usually means: They're overwhelmed during enrollment

How to respond

- *I get that. There are a lot of decisions coming at you.*
- *Most people keep it simple. They pick a benefit amount that can cover their deductible, with enough left over to keep bills on track during recovery.*
- *It's easy to add – it's a fast application with no medical exams required. And since it pays cash directly to you, it gives you flexibility to pay for whatever costs you need while you recover.*
- *It doesn't have to be a big decision, just something simple to help protect your finances and give you peace of mind if a serious illness happens.*

8. How often does something like this really happen?

What it usually means: They're questioning likelihood

How to respond

- *Major medical events can happen to anyone – you probably know someone who was diagnosed with cancer, or who had a heart attack or stroke.*
- *Serious illnesses can happen unexpectedly. Treatment and follow-up care can bring out-of-pocket costs, and time away from work can affect household income.*
- *It's why people choose this coverage, to be prepared if the unexpected happens. That's what most people are looking for.*

9. How does this actually pay out?

What it usually means: They don't understand how or when they'd receive money

How to respond

- *It's straightforward. If you're diagnosed with a covered condition, you file a claim and receive a lump-sum cash benefit, up to \$50,000. It can even pay again if you're diagnosed with a second condition.*
- *You can use that money however you need, whether that's medical bills or everyday expenses.*

10. What kinds of serious illnesses or conditions does this actually cover?

What it usually means: They're unsure of the scope of coverage.

How to respond

- *It's strong protection that pays a cash benefit for four of the most common serious illnesses and conditions: cancer, heart attack, stroke and advanced Alzheimer's Disease.*
- *The money is paid directly to you, and you can use it for whatever you need – health expenses, travel, bills while you're not working, or anything else.*

11. When would I actually use this?

What it usually means: They're struggling to picture a real-life situation where this applies

How to respond

- *Hopefully you'll never need it. But if you do, it will be there for you if you're ever faced with a serious illness or condition.*
- *It's for big health events that have an immediate financial impact – cancer, heart attack and stroke can result in serious financial disruption. And the cost goes beyond medical expenses – travel for treatment, regular expenses while you can't work, or even home modifications or lifestyle changes.*
- *Critical illness insurance is there to help you deal with all these costs. And because it's paid directly to you, you're in charge of where that money goes.*

12. Who can I include in this policy?

What it usually means: They're thinking about family needs and value

How to respond

- *Each policy only insures one individual. If you and your spouse or partner wants coverage, you would each complete your own application.*
- *But it's a great idea to consider coverage for your spouse as well – any serious illness diagnosis can have an impact on your family.*
- *If you aren't able to stay on top of finances should your spouse receive a diagnosis, I would encourage them to fill out an application as well.*

13. How easy is it to get approved?

What it usually means: They're worried about underwriting, delays or being declined

How to respond

- *It's very easy. It's a fast application with just 5 health questions and no medical exams required, and most people receive a decision immediately.*
- *It's designed to be simple to add during enrollment, which is why a lot of people choose to include it at the same time as their health plan.*

14. How much does this cost?

What it usually means: They're evaluating affordability but may hesitate to ask directly

How to respond

- *You can adjust the benefit amount to fit your budget – most people find amounts from \$5k to \$50k work well for them.*
- *Some people choose an amount that can cover initial medical costs, plus many of the other expenses that come with serious illnesses: travel for treatment, time off work, or whatever else you need.*
- *For many people, the monthly cost can be less than a meal out with your family.*
- *The goal is to have something that fits comfortably so you're protected without stretching your budget.*

15. I'm not a U.S. citizen – can I even get this?

What it usually means: They assume eligibility for foreign residents is limited or complicated

How to respond

- *Yes – this product has a built-in application for foreign residents. Let's make sure you're eligible, then we can apply quickly and easily online.*

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