

# Agent User Guide

## *Electronic Enrollment System for CareSource MA-PD and D-SNP plans*

Update: October 2019

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# **Agent User Guide**

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## **Introduction**

Welcome

This user guide will introduce you to powerful tools used to guide beneficiaries through shopping, comparing, and enrolling in CareSource MA-PD and D-SNP plans.

This guide includes sections making it easy to quickly access information relevant to your need as well as a frequently asked questions section to answer common questions heard from beneficiaries.

## **How do I use this tool?**

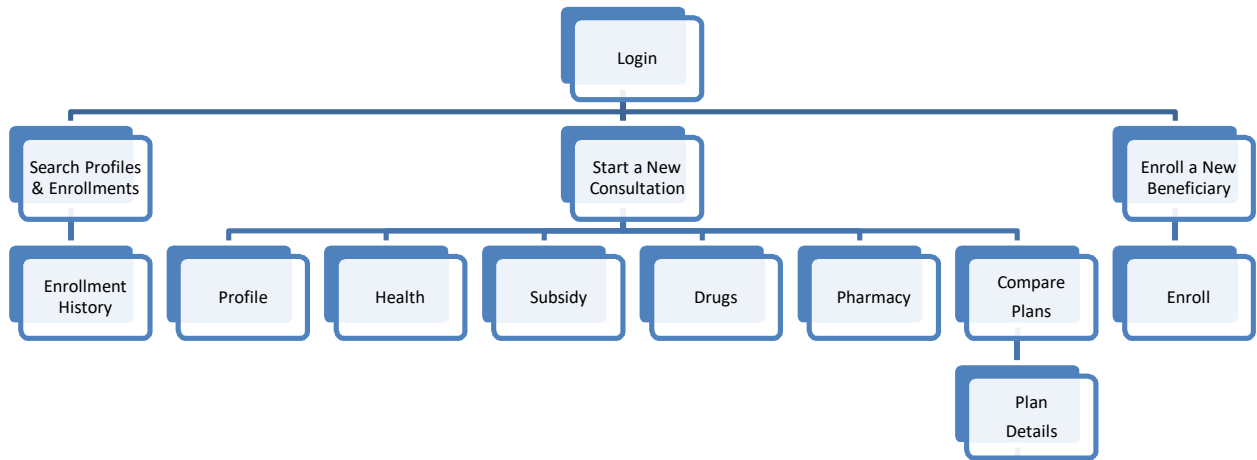
You'll find this intuitive and simple once you have a basic understanding of its functionality. The tool allows enrolling beneficiaries in CareSource's MA-PD and D-SNP plans.

This information is not all inclusive of the portals content and capabilities. It does include information to assist their health, prescriptions, pharmacy, and the amount of coverage they seek.

Using this tool, you will be able to enter all of the beneficiary's information, compare plans, and enroll.

## Site Flow

The following flow diagram shows the pages you can reach within the Professional PlanCompare experience.



## Getting Started

You have been granted access to the electronic enrollment system for CareSource's MA-PD and D-SNP plans.

Using this system to enroll new members will help ensure you are credited accurately for the enrollees that should be attributed to you.

## Login

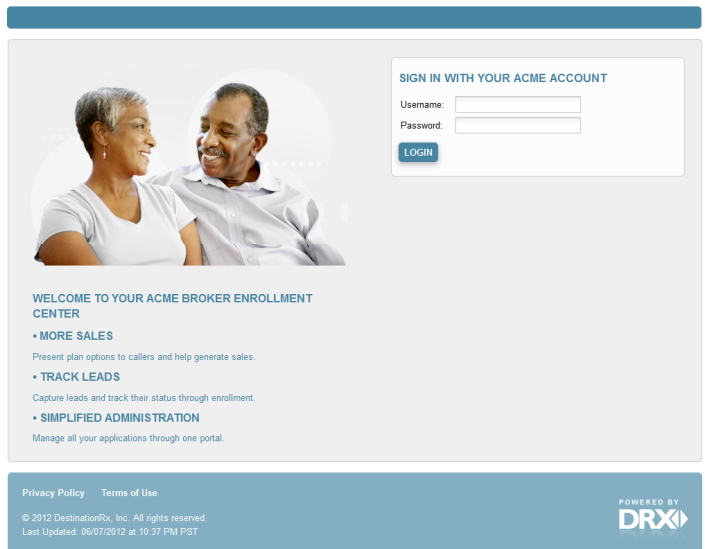
To log in, please access the link and use the information below, substituting your own first name for FirstName and your own last name for LastName

Enter the URL provided by your administrator

Username: FirstName.LastName

Password: FirstName123!

You will be asked to choose a new password after your first login.



## General Layout

Each page has the same general layout including consistent buttons and links to offer you access to important functions and tools at any time.

## Start Over Buttons

The three buttons on top act as *Start Over* buttons for the specified action. You may use these buttons at any time to start a new process. Clicking any of these three buttons will erase your session history. Any unsaved information will be lost.



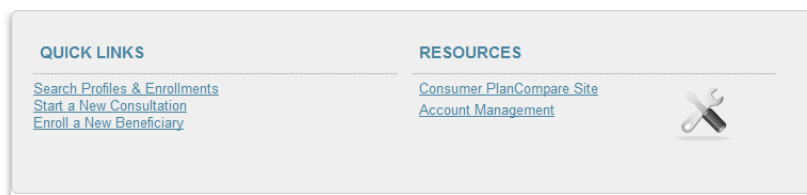
- **Search Profiles & Enrollments** – Use this if the beneficiary has shopped or started an enrollment earlier. This will access previously saved information for a beneficiary. You will only be able to access this information if the beneficiary has a profile or enrollment. This page appears as the default upon logging in.
- **Start a New Consultation** – Use this if the beneficiary has not created a profile or started an enrollment for the current plan year. If the beneficiary is interested in shopping for a new plan, use this feature to gather the necessary information to provide accurate estimates based on their location, age, health, drugs, and pharmacy.
- **Enroll a New Beneficiary** – If the beneficiary already knows which plan they would like to enroll in, use this feature to quickly access the plan based on their location and start an enrollment.

## Resources and Administration

On the bottom of each page you will see *Quick Links* and *Resources*. Under *Quick Links*, you will find the same three links as the buttons on the top of each page: *Search Profiles & Enrollments*, *Start a New Consultation*, and *Enroll a New Beneficiary*. These links will start over and clear your current session. Any unsaved information will be lost.

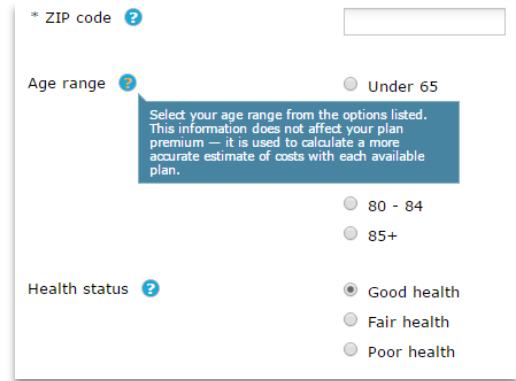
Under *Resources*, you will find a link to the consumer version of PlanCompare if available. This is useful if you receive a call from a beneficiary who has questions about the site they are viewing. Links may vary as your company may have added additional resources including, but not limited to:

- Training documentation
- Eligibility Guides
- Subsidy Information
- Formulary lookup tool
- Physician lookup tool
- Plan Formularies
- Recent formulary updates
- Carrier CRM tool



## Tooltips

Throughout the site, you will see question mark icons known as Tooltips. Hovering your mouse over them will offer more information about the question or data you are viewing. If a beneficiary ever has a question you cannot answer, try checking the Tooltips for more information.



The screenshot shows a portion of a web form. At the top, there is a field for "ZIP code" with a question mark icon. Below it, the "Age range" section has three radio button options: "Under 65", "80 - 84", and "85+". A blue tooltip box is overlaid on the "Age range" section, containing the text: "Select your age range from the options listed. This information does not affect your plan premium — it is used to calculate a more accurate estimate of costs with each available plan." Below the age range options, the "Health status" section has three radio button options: "Good health", "Fair health", and "Poor health".

Hovering over the Tooltip provides information on how to determine the beneficiary's health level on the *Health* page.

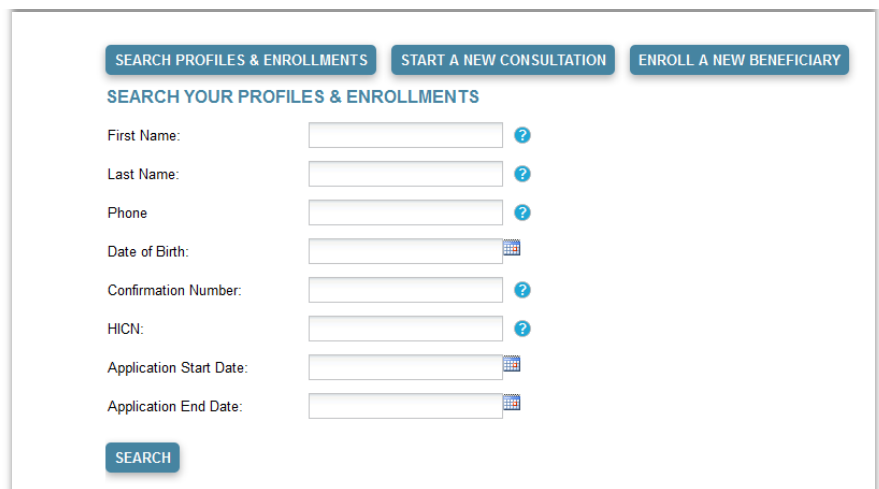
## Start Page

Upon successful login you will arrive at the *Start Page*. By default the start page shows *Search Profiles & Enrollments*. On the *Start Page* you will first have access to search profiles and enrollments, start a new consultation, and enroll the beneficiary now.

## Search Profiles & Enrollments

You should use this first if the beneficiary has shopped or started an enrollment earlier during the current plan year. Use this to search for previously saved information for a beneficiary. You will only be able to access this information if the beneficiary has a profile or enrollment. This page appears as the default upon logging in.

To search for previous profiles and enrollments, enter the beneficiary's information. You need to enter information in at least one field, however, entering more information will assist you in narrowing your search.



The screenshot shows the "SEARCH PROFILES & ENROLLMENTS" page. At the top, there are three buttons: "SEARCH PROFILES & ENROLLMENTS", "START A NEW CONSULTATION", and "ENROLL A NEW BENEFICIARY". Below the buttons, the heading "SEARCH YOUR PROFILES & ENROLLMENTS" is displayed. The form contains several input fields, each with a question mark icon: "First Name:", "Last Name:", "Phone", "Date of Birth:" (with a calendar icon), "Confirmation Number:", "HICN:", "Application Start Date:" (with a calendar icon), and "Application End Date:" (with a calendar icon). A "SEARCH" button is located at the bottom left of the form.



Once you click **Search**, a table will appear with your results. This table contains the name and address of the applicant, the date their profile was created, their phone and email address if provided, and the status (*Registrant* if they have not yet applied, *Applicant* if they have completed an application). Click the name to access the Member Profile page where you can edit contact information and the consultation. Click **Enroll History** to access beneficiary's enrollment information including date, plan, confirmation number, and application status.



SEARCH

ALL PROFILES

1 result found

Name and Address	Date	Phone/E-mail	Status	
<a href="#">John Smith</a> FL_34953	9/14/2012	772-204-5555	Registrant	<a href="#">Enroll History</a>

## Start a New Consultation

Click the **Start a New Consultation** button if the beneficiary is not sure which plan they would like to enroll in. This feature is used to assist beneficiaries with shopping, comparing, and enrolling in plans.

## Tabs

Tabs appear on the top of each page during a consultation. You may skip ahead or jump back to any tab during the consultation.



If you have entered or changed any information on a page, be sure to click **Continue** before clicking on a tab. You must click **Continue** to save information entered.

**Note:** You must enter the beneficiary's ZIP code and click Continue on the Health page before you can click on Plan List to view available plans.

## Profile

This is the first step of a consultation. By creating a profile, the beneficiary's information will be accessible later via the *Search Profiles & Enrollments* feature. The only required fields are first name, last name, date of birth, and ZIP code. All fields can be edited later. Click **Continue** to save the member profile and advance to the next step.

For Call Center sites, creating a profile will populate scripting on later pages with the caller's name and ZIP code.

**CREATE A NEW PROFILE**

\* Denotes a required field.

Beneficiary Information

\* First Name

\* Last Name

\* Date of Birth   
Required Format:mm/dd/yyyy

\* ZIP code

Phone  (  )  -

Email Address

Address (Line 1)

Address (Line 2)

City

State

Is the sales contact different from the beneficiary?  Yes  No

**SEND ACCESS TO CONSUMER SITE**

< PREVIOUS CONTINUE >

**Note:** A red asterisk (\*) appears next to any question that is required to advance.

## Create External Account

If your company has a consumer version of the site, you can send a link to the beneficiary upon request. Click the **Create External Account** button to access. You will receive an authorization code that must be given to the beneficiary in order to allow them to access their saved information. This authorization code serves to protect any PHI that has been saved during the shopping experience.

## Health

The *Health* page is where you inquire the beneficiary's ZIP code, age range, and health.

Further information about questions can always be found by hovering your mouse over question mark icons, known as Tooltips, throughout the site.

Age and Health questions will not affect plan premium or eligibility for Medicare Advantage plans. This information is used to calculate estimated out-of-pocket medical expenses.


**Note:** Questions may vary by site.


Click **Continue** to save the answers and advance to the next page.

### HEALTH INFORMATION


An estimate of total annual costs is a powerful way to recommend a plan. Age and health information helps personalize the cost estimates.

\* Denotes a required field.

\* ZIP code 

Age range 

- Under 65
- 65 - 69
- 70 - 74
- 75 - 79
- 80 - 84
- 85+

Health status 

- Good health
- Fair health
- Poor health

[< PROFILE](#) [CONTINUE >](#)

## Drugs

On the *Drugs* page, enter each of the beneficiary's anticipated prescriptions for the plan year. This information is useful when shopping for plans with drug coverage. If the beneficiary is not interested in plans with drug coverage or they are not sure which drugs they take, you can click a different tab to advance to the next step.

The screenshot shows a web interface for adding drugs. On the left, a form titled 'ADD OMEPRAZOLE' is displayed. It includes a heading 'ADD OMEPRAZOLE', a sub-heading 'Select dosage and enter the amount used per month below.', and three radio button options for dosage: 'omeprazole CAP 10MG', 'omeprazole CAP 20MG' (which is selected), and 'omeprazole CAP 40MG'. Below the dosage options is a 'Quantity' field with the value '30' and a 'per month' label, followed by a 'change frequency' link. At the bottom of the form are a 'Cancel (do not add drug)' link and an 'ADD DRUG' button. On the right, a 'DRUG LIST' section shows a notification: 'Zocor TAB 20MG has been added to Drug List.' Below this, the drug 'Zocor TAB 20MG' is listed with a 'Switch to generic for likely savings' link, the quantity '30 per month', and 'change' and 'remove' links. At the bottom of the interface, there is a '< SUBSIDY' link on the left and a 'DRUG LIST IS COMPLETE >' button on the right.

To add a drug, enter the first few letters into the search field to search for a drug. If you are unsure of the spelling, you can use the alphabetical listing below the search field by clicking on the *alphabetical list* link and choose the letter the drug starts with.

Entering a brand name drug may provide results for both the brand name drug and its corresponding generic form. This makes searching for generics easier.

Once you find the drug, click the **Select** button. This will prompt dosage and quantity information. Common dosages are already entered as default. Confirm the information and click **Add Drug**. The drug will now appear to the right in **Drug List**. You can still change the dosage by clicking **Change** or remove the drug by clicking **Remove**. After entering brand name drugs to **Drug List**, you may still be prompted to switch to the generic form. Clicking on the switch link above the drug will replace the brand name drug with its generic form (see example above). This can be an easy way for beneficiaries to save money. Once finished entering drugs, click **Drug List is Complete** to save this information and advance to the next page. You may return to this page later to enter or change drugs later if necessary.

## Subsidy (if applicable)

The *Subsidy* page is where a beneficiary can indicate whether they qualify for Low Income Subsidy. If the beneficiary knows they are not eligible choose "I am not eligible for special assistance" and click **Continue** or just click the next tab on top of the page. Entering the beneficiary's subsidy level will adjust subsidized drug pricing and drug premiums.

### MEDICARE EXTRA HELP

Estimated costs can be reduced to account for Medicare's Low Income Subsidy to help pay prescription drug costs.

\* Denotes a required field.

\* What extra help level(s) do you currently qualify for? ?

- Not eligible
- Receiving Medicaid as well as Medicare
- Medicare Savings Program (MSP)
- Full Extra Help, not Medicaid
- Partial Extra Help
- Uncertain

< HEALTH CONTINUE >

## Pharmacy (if applicable)

The *Pharmacy* page is where you can enter the pharmacy where the beneficiary fills their prescriptions. This is used to estimate more accurate drug pricing for plans with drug coverage.

You can skip this by clicking the **Skip** button on the bottom right if the beneficiary specifies they are not interested in plans with drug coverage or the beneficiary orders their drugs by mail order. If so, mail order pricing can be generated on the *Estimated Costs* pages via *Plan Details* after a plan is chosen.

**ADD PHARMACY**

Select your pharmacy for the most accurate drug pricing. The search is based on proximity to the ZIP code you entered earlier. To perform a new search you can adjust the map or enter a new location in the search box. If you would like a pharmacy that supports e-prescribing, look for the e icon. You can skip this step if you do not want to select a pharmacy right now.

Please enter an address or 5 digit ZIP code.

Enter Your ZIP code or street address **FIND PHARMACIES**

< DRUGS **SKIP** **CONTINUE** >

If you entered a ZIP code on the *Basic Information* page, then a list of pharmacies will generate for that area. If you have not entered a location, enter a ZIP code or address.

Once a search is performed, you may change the location by clicking the **Change Location** link on the top right. Moving the map will repopulate the search.

The pharmacies will be listed by proximity to the location you entered. Click the check box on the right of the pharmacy used by the beneficiary. You will receive a confirmation message that you selected the pharmacy. Click the **X** on the top right. Uncheck the box or pick another the pharmacy to change your selection. Click **Continue** to advance to the next page.

### ADD PHARMACY

Select your pharmacy for the most accurate drug pricing. The search is based on proximity to the ZIP code you entered earlier. To perform a new search you can adjust the map or enter a new location in the search box. If you would like a pharmacy that supports e-prescribing, look for the e icon. You can skip this step if you do not want to select a pharmacy right now.

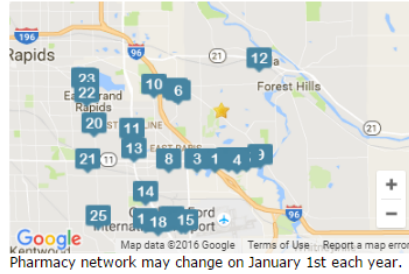
Please enter an address or 5 digit ZIP code.

49546

**FIND PHARMACIES**

Tag	Pharmacy	Select
1 e	Meijer Pharmacy 5531 28th St SE Grand Rapids, MI Distance: <b>1.08 Mile(s)</b>	<input type="checkbox"/>
2	Wal-Mart Pharmacy 5859 28th Street Grand Rapids, MI Distance: <b>1.20 Mile(s)</b>	<input type="checkbox"/>
3 e	Target Pharmacy 5120 28th St SE Grand Rapids, MI Distance: <b>1.22 Mile(s)</b>	<input type="checkbox"/>
4 e	Trucare LTC Pharmacy 6140 28th St SE Ste 105 Grand Rapids, MI Distance: <b>1.38 Mile(s)</b>	<input type="checkbox"/>
5 e	D & W Pharmacy 1573 6425 28th Street SE Grand Rapids, MI Distance: <b>1.55 Mile(s)</b>	<input type="checkbox"/>
6 e	Family Fare - Forest Hills Pharmacy 4668 Cascade Rd SE Grand Rapids, MI Distance: <b>1.62 Mile(s)</b>	<input type="checkbox"/>
7	Walgreens 4550 Cascade Rd SE Grand Rapids, MI Distance: <b>1.75 Mile(s)</b>	<input type="checkbox"/>
8	Sams Pharmacy 10-6319 4326 28th Street SE Kentwood, MI Distance: <b>1.82 Mile(s)</b>	<input type="checkbox"/>
9	Walgreens 6790 Cascade Rd SE Grand Rapids, MI Distance: <b>1.83 Mile(s)</b>	<input type="checkbox"/>
10	Keystone Pharmacy 4021 Cascade Rd SE Grand Rapids, MI Distance: <b>2.37 Mile(s)</b>	<input type="checkbox"/>

1 2 ... 3 [Next](#) [Last](#)



★ **Central Point**

To change the search location, you can adjust the map. Pharmacy results and distances are based on proximity to the central point on the map denoted by a gold star.

< DRUGS

**SKIP**

**CONTINUE >**

## Plan List

The *Plan List* page lists all plans available to the beneficiary in their area. Plans will be listed in order by Total Estimated Costs starting with the lowest. You can sort plans using the drop down menu on the top right. The information for each plan includes:

- Plan Name
- Monthly Price- This is the plan Premium.
- Total Estimated Costs- This is the total out-of-pocket costs expected.
- Plan Rating- Only appears when available.
- Carrier Name (when applicable)

The screenshot displays the 'VIEW AND COMPARE PLANS' section of the application. It features a header with the title 'VIEW AND COMPARE PLANS' and a sub-header stating, 'Below are the plans available in your area. To help you find the best value, your estimated total annual costs are shown based on the information you provided.' Below this, there is a navigation bar with tabs for 'Medicare Advantage Prescription Drug Plans', 'Prescription Drug Plans', 'Medicare Advantage Plans', and 'Medicare Supplement'. A 'COMPARISON UP TO 3 PLANS' button and a 'Sort By' dropdown menu are also present. The main content area shows two plan cards. The first card, 'TEST - MAPD PLAN TWO', has a monthly price of \$26.50 and total estimated costs of \$871. The second card, 'TEST - MAPD PLAN ONE', has a monthly price of \$23.00 and total estimated costs of \$1,025. Both cards show 'Plan Rating' as 'Not available'. Each card includes 'ENROLL IN THIS PLAN' and 'VIEW PLAN DETAILS' buttons.

Plan types are separated by tabs. Plan types available may vary by carrier and by area. Tab names may vary by site, however, the default plan types are:

- Medicare Advantage Prescription Drug Plans
- Medicare Advantage Plans

If a tab is greyed out, there are no plans of that type available to the beneficiary. Choose the tab for the Plan Type for which the beneficiary is interested.

From this page you can view more details for a plan, compare plans to each other, and enroll in a plan.



## Comparing Plans

To compare multiple plans, click the check box where it says "Check to Compare". The Plan will change colors once selected. Choose 2-3 plans total and click **Compare Now** or the **Compare up to 3 plans** button on top.

Plan Name	Monthly Price	Total estimated costs	Plan Rating
TEST - MAPD PLAN TWO	\$26.50	\$871	Not available
TEST - MAPD PLAN THREE	\$55.00	\$1,592	Not available
AETNA MEDICARE SELECT PLAN (HMO)	\$0.00	\$0.00	Not available

NOTE: 'Total estimated costs' feature is not available on this system

## Plan Comparison

PLAN COMPARISON			
	Acme TEST - MAPD PLAN ONE	Acme TEST - MAPD PLAN TWO	Acme TEST - MAPD PLAN THREE
	<a href="#">DETAILS</a> <a href="#">ENROLL</a>	<a href="#">DETAILS</a> <a href="#">ENROLL</a>	<a href="#">DETAILS</a> <a href="#">ENROLL</a>
	<a href="#">Remove from comparison</a>	<a href="#">Remove from comparison</a>	<a href="#">Remove from comparison</a>
Costs			
Premium ?	\$23.00 per month	\$26.50 per month	\$55.00 per month
Estimated medical costs based on age 75 - 79 and Good health ?	\$749.00 per year	\$553.00 per year	\$932.00 per year
Estimated drug costs based on 2 drugs in My Drug List ?	\$1,007.00 per year	\$737.00 per year	\$787.00 per year
Total estimated costs ?	\$2,031.22 per year	\$1,608.32 per year	\$2,379.11 per year
Coverage Overview			
Medicare Star Rating ?	N/A	N/A	N/A
Is My Physician in the Network?	<a href="#">Physician Directory</a>	<a href="#">Physician Directory</a>	<a href="#">Physician Directory</a>
Is My Pharmacy in the Network?	<a href="#">Pharmacy Directory</a>	<a href="#">Pharmacy Directory</a>	<a href="#">Pharmacy Directory</a>
Are My Drugs Covered? ?	2 of 2 drugs are covered	2 of 2 drugs are covered	2 of 2 drugs are covered
Benefits - Amounts You Pay			
Medical Deductible ?	\$100.00	\$0.00	\$0.00
Medical Out of Pocket Maximum ?	\$3,000.00	\$10,000.00	\$3,000.00
Doctor Office Visit ?	\$20 copay for each primary care doctor visit for Medicare-covered benefits.	\$10 copay for each primary care doctor visit for Medicare-covered benefits.	\$25 copay for each primary care doctor visit for Medicare-covered benefits.
Specialist Office Visit ?	\$40 copay for each specialist visit for Medicare-covered benefits.	\$25 copay for each specialist visit for Medicare-covered benefits.	\$50 copay for each specialist visit for Medicare-covered benefits.
Hospital Inpatient Stay ?	No limit to the number of days covered by the plan each benefit period. / \$500 copay for each Medicare-covered hospital stay / \$0 copay for additional hospital days / \$1,500 out-of-pocket limit every year.	No limit to the number of days covered by the plan each benefit period. / For Medicare-covered hospital stays: / Days 1 - 5: \$115 copay per day / Days 6 - 90: \$0 copay per day / \$0 copay for additional hospital days	No limit to the number of days covered by the plan each benefit period. / For Medicare-covered hospital stays: / Days 1 - 7: \$300 copay per day / Days 8 - 90: \$0 copay per day / \$0 copay for additional hospital days
Prescription Deductible ?	\$300.00	\$250.00	\$250.00
Prescription Initial Coverage Limit ?	\$2,930.00	\$2,930.00	\$2,930.00
Generic Drug Copays as low as ?	\$30.00	\$4.00	\$4.00
	<a href="#">DETAILS</a> <a href="#">ENROLL</a>	<a href="#">DETAILS</a> <a href="#">ENROLL</a>	<a href="#">DETAILS</a> <a href="#">ENROLL</a>
	<a href="#">Remove from comparison</a>	<a href="#">Remove from comparison</a>	<a href="#">Remove from comparison</a>

The *Plan Comparison* page is where you can compare multiple plans side-by-side for 2-3 plans. Plans are compared by three categories: Costs, Coverage Overview, and Benefits. You can use this page to answer many of the beneficiary's questions about the benefits of one plan over the other.

When comparing, the beneficiary may rule out a plan. If so, you can remove the plan from the comparison by clicking the *Remove from Comparison* link next to the red x atop each plan.

Depending on the plan type, Physician and Pharmacy Directories may be made available in the Coverage Overview Section.

If there is a question you receive about a plan that cannot be answered on this page, click the **Details** button on the top and bottom of each plan to access further details.

**NOTE:** 'Total estimated costs' feature is not available on this system

## Plan Details

TEST - MAPD PLAN TWO DETAILS
< BACK TO PLAN LIST

Acme
ENROLL

Costs	
Premium <span style="float: right;">?</span>	\$318.00 per year
Estimated medical costs based on age 75 - 79 and Good health <a href="#">change</a> <span style="float: right;">?</span>	\$553.14 per year
Estimated drug costs based on 2 drugs in My Drug List <a href="#">change</a> <span style="float: right;">?</span>	\$737.18 per year <span style="float: right; background-color: #555; color: white; padding: 2px 5px; border-radius: 3px;">SEE ESTIMATE BY MONTH</span>
Total Estimated Costs <span style="float: right;">?</span>	\$1,608 per year <span style="float: right; background-color: #555; color: white; padding: 2px 5px; border-radius: 3px;">SEE ESTIMATE BY MONTH</span>
Coverage Overview	
Medicare Star Rating	N/A
Is My Physician in the Network?	<a href="#">Physician Directory</a>
Is My Pharmacy in the Network?	<a href="#">Pharmacy Directory</a>
Plan covers these drugs from <a href="#">My Drug List</a> <span style="float: right;">?</span>	Lipitor TAB 10MG simvastatin TAB 20MG
Plan does not cover these drugs from <a href="#">My Drug List</a> <span style="float: right;">?</span>	
Benefits-Amounts You Pay	
<span style="float: left;">Acme</span> <span style="float: right;">ENROLL</span>	

< BACK TO PLAN LIST
TEST - MAPD PLAN TWO

Plan: H9999-002-000

The *Plan Details* page has more information about a specific plan based on the beneficiary's answered questions. This page can be accessed via the *Plan List* and *Plan Compare* pages. The *Plan Details* page lists the same information found on the *Plan Compare* page with further detail as well as Plan Documents.

Note: To view Plan Documents, you will need Adobe Acrobat Reader on your system. If you need to download it, a link appears at the bottom of the Plan Documents section.

If the beneficiary is interested in further details on drug pricing for plans with Drug Coverage, click the **See Estimate by Month** button next to the drug count of the Costs section. This will only appear for plans with drug coverage.

If the beneficiary is interested in further detail on their total estimated out-of-pocket expenses, click the **See Estimate by Month** in the Total Estimated Costs row of the Costs section.

## Enroll a New Beneficiary

If the beneficiary already knows which plan they would like to enroll in from the start, click the **Enroll a New Beneficiary** button. All you need to enter is the beneficiary's ZIP code and choose the desired plan from the list.

## Enrollment

You can start an enrollment from any page with a specific plan. Clicking **Enroll** or **Enroll in this Plan** will redirect you to the enrollment form. Once in the enrollment form, answer each of the required questions. If any required questions are left unanswered or formatted incorrectly, you will be notified of the error and instructed how to fix it. Continue through the enrollment until you receive the enrollment confirmation.

If for any reason you need to exit the enrollment, be sure to use the *Save and Exit* link on the bottom left. This will save all information entered to return to the enrollment at any time.

## Frequently Asked Questions by Beneficiaries

Many brokers and agents are often asked the same questions. Below you will find some frequently asked questions asked by beneficiaries and how to answer them using the new tool.

### Which plans am I eligible for?

Beneficiaries often ask this question up front. They may be less interested in each plan's details but just want to make a choice based on the plan premium alone. To answer this question, click **Enroll a New Beneficiary**.

Now enter the beneficiary's ZIP code and click **Submit**. This will provide available plans in the area. Use the tabs on top to switch between plan types.

**Note:** If the beneficiary is interested in shopping based on their health, prescriptions, or pharmacy, click the **Start a New Consultation** on top at any time.

### Which plan covers all of my drugs?

Once you have entered all of the drugs taken by the beneficiary, you can compare up to 3 of the available plans with drug coverage or click on *Plan Details* for the plan.

The *Compare Plans* page will show how many of the drugs are covered under the Coverage Overview Section.

Coverage Overview			
Medicare Star Rating ?	N/A	N/A	N/A
Is My Physician in the Network?	<a href="#">Physician Directory</a>	<a href="#">Physician Directory</a>	<a href="#">Physician Directory</a>
Is My Pharmacy in the Network?	<a href="#">Pharmacy Directory</a>	<a href="#">Pharmacy Directory</a>	<a href="#">Pharmacy Directory</a>
Are My Drugs Covered? ?	2 of 2 drugs are covered	2 of 2 drugs are covered	2 of 2 drugs are covered
Benefits - Amounts You Pay			
Medical Deductible ?	\$100.00	\$0.00	\$0.00

The *Plan Details* page will list which drugs are covered and which are not.

### Is a certain drug covered by this plan?

If a beneficiary wants to know if one specific drug is covered by a plan, start a new consultation. Be sure to add the drug on the *Drugs* page. Once you arrive at the *Plan List* page, click on **Plan Details**. The drug will be listed under Coverage Overview as either covered or not covered. For more information, click on the **See Estimate by Month** button for estimated drug costs by month.

## How are drug co-pays different across plans?

From the *Plan List* page, use the compare side-by-side function to quickly identify co-pay differences for tiers across up to 3 plans at a time.

## How will costs change if I switch from one drug to another ?

Quickly make changes to a drug list by clicking on the *Medicine* tab. This will return you to the *Medicine* page where you can remove one drug and add another. You will need to return to the *Plan List* page and click on the **View Plan Details** button to view the plan's drug costs.

## Physician Selection



Welcome, Scott Wolf | [My Account](#) | [Sign Out](#)

[View Dashboard](#) [Search Profiles](#) [Start Consultation](#) [Start New Enrollment](#)

### CareSource Advantage

Monthly Premium:\$40.00  
Plan: H6396-001-000

[Calculator](#) [Add Notes/Task to an active profile](#)



### OTHER INFORMATION

Q-38 **Please tell me the name of your selected Primary Care Physician.**

(Capture, continue to Q-39.)

Note: If PCP is not provided agent continues to Q-39

Q-39 **Would you prefer we send information to you in an accessible format. You can select Spanish and/or Large Print.**

No: (Capture, continue to Step 12: Paying Your Premium Payment)

Yes: Agent selects format provided by caller and provides additional details:

**"Please contact CareSource at <1-844-607-2827> if you need information in another format or language. Our office hours are 8 a.m. to 8 p.m. Monday through Friday, and October 1 through March 31 we are open the same hours 7 days a week. TTY users should call <1-800-760-0760 or 711>."**

(After providing additional details agent Continues to Step 12: Paying Your Premium Payment.)

### Physician Selection (Optional)

Please provide the name of a Primary Care Physician (PCP),  [Find A Doctor](#)  
clinic, or health center:

### Important Information

[CareSource Advantage Summary of Benefits](#)  
[CareSource Advantage Pre-Enrollment Checklist](#)

### Other Enrollment Methods

#### CareSource Advantage

230 N. Main Street  
Dayton, OH 45402

**Phone:**  
8446072827

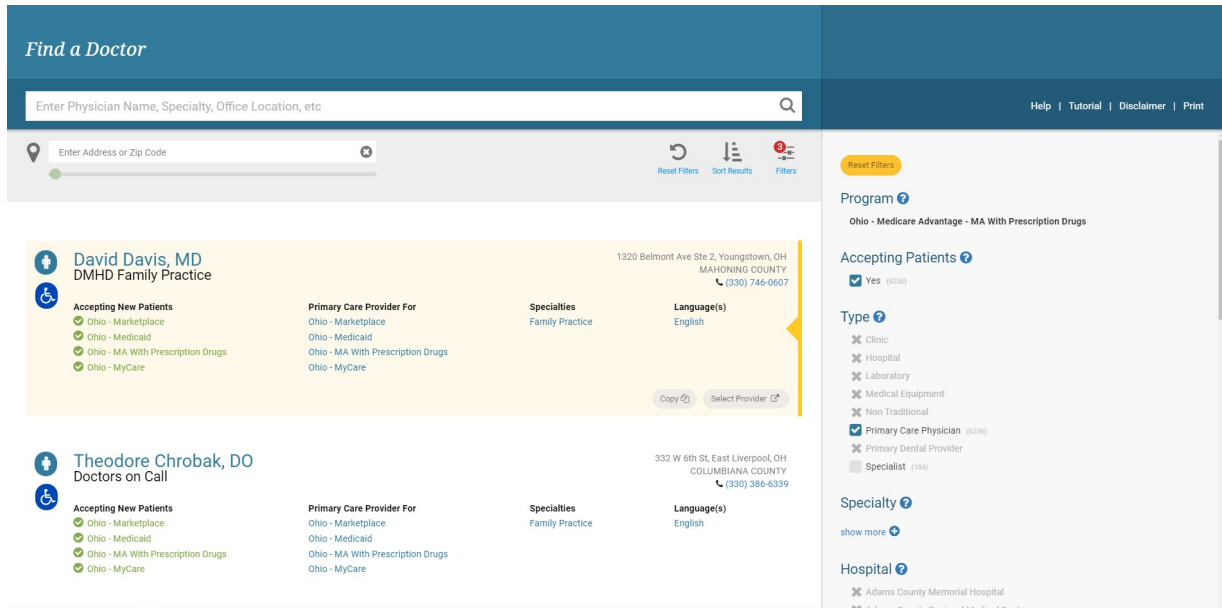
**Hours:**  
Medicare Advantage Member Services is open 8 a.m. to 8 p.m. Monday through Friday, and from Oct 1 - Mar 31 we are open the same hours 7 days a week.

**Online:**  
Medicare beneficiaries may enroll in CareSource Advantage through the CMS Medicare Online Enrollment Center located at [www.medicare.gov](http://www.medicare.gov).

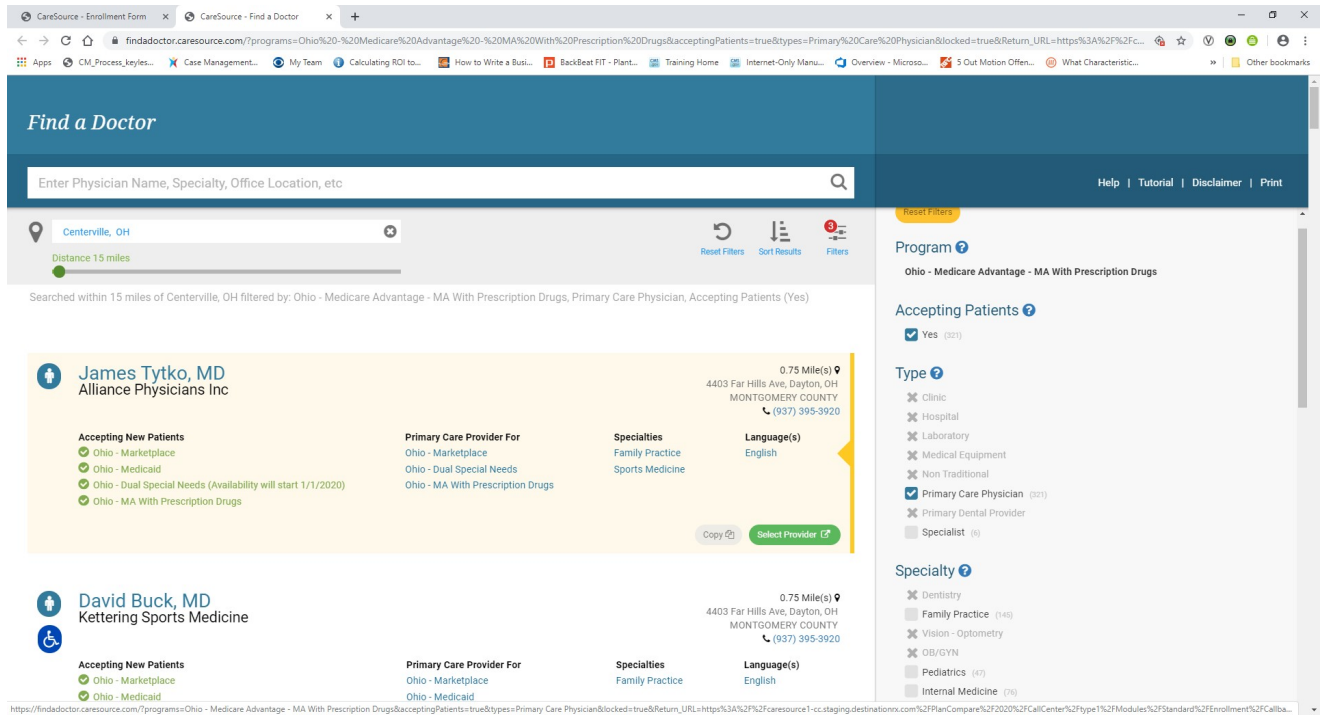
1. Select the "Find A Doctor" link highlighted in Red.

**NOTE-** In the event the PROVIDER you are SEARCHING is not found in the FIND-A-DOC application; please follow the instructions on page 26

**\*PLEASE DO NOT TYPE A PHYSICIAN INTO THE RESPONSE FIELD**



2. System displays the screen above.
3. Enter a zip code in the search field highlighted in the *Enter Address or Zip Code* to find Physicians in the area.
4. If the prospective beneficiary would like to search by physician name, specialty, office location, etc. simply enter information into the search field highlighted *Enter Physician Name, Specialty, Office Location, etc.*



5. Select the "Select Provider" button in green when the proper physician is identified.

## OTHER INFORMATION

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Q-38 Please tell me the name of your selected Primary Care Physician.

(Capture, continue to Q-39.)

Note: If PCP is not provided agent continues to Q-39

Q-39 Would you prefer we send information to you in an accessible format. You can select Spanish and/or Large Print.

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(After providing additional details agent Continues to Step 12: Paying Your Premium Payment.)

---

### Physician Selection (Optional)

Please provide the name of a Primary Care Physician (PCP),  clinic, or health center:

[Find A Doctor](#)

6. The physician name will populate in the Physician Selection response field.
7. Complete the application.



**NOTE: In the event the PROVIDER you are SEARCHING is not found in the FIND-A-DOC application**

- a. The channel should leave the PCP space blank, complete and submit the enrollment application.
- b. AFTER submitting the enrollment application, the sales channel must proceed with the following procedure:

For MA-PD enrollment applications – email the chosen PCP information to the Enrollment Dept. via **Enrollment\_Medicare\_OH@caresource.com** - MA, including this information:

1. **Enrollee:**
  - a. MBI
  - b. enrollee first name
  - c. enrollee last name
2. **PCP:**
  - a. PCP first name
  - b. PCP last name (please make sure the PCP spelling is correct)

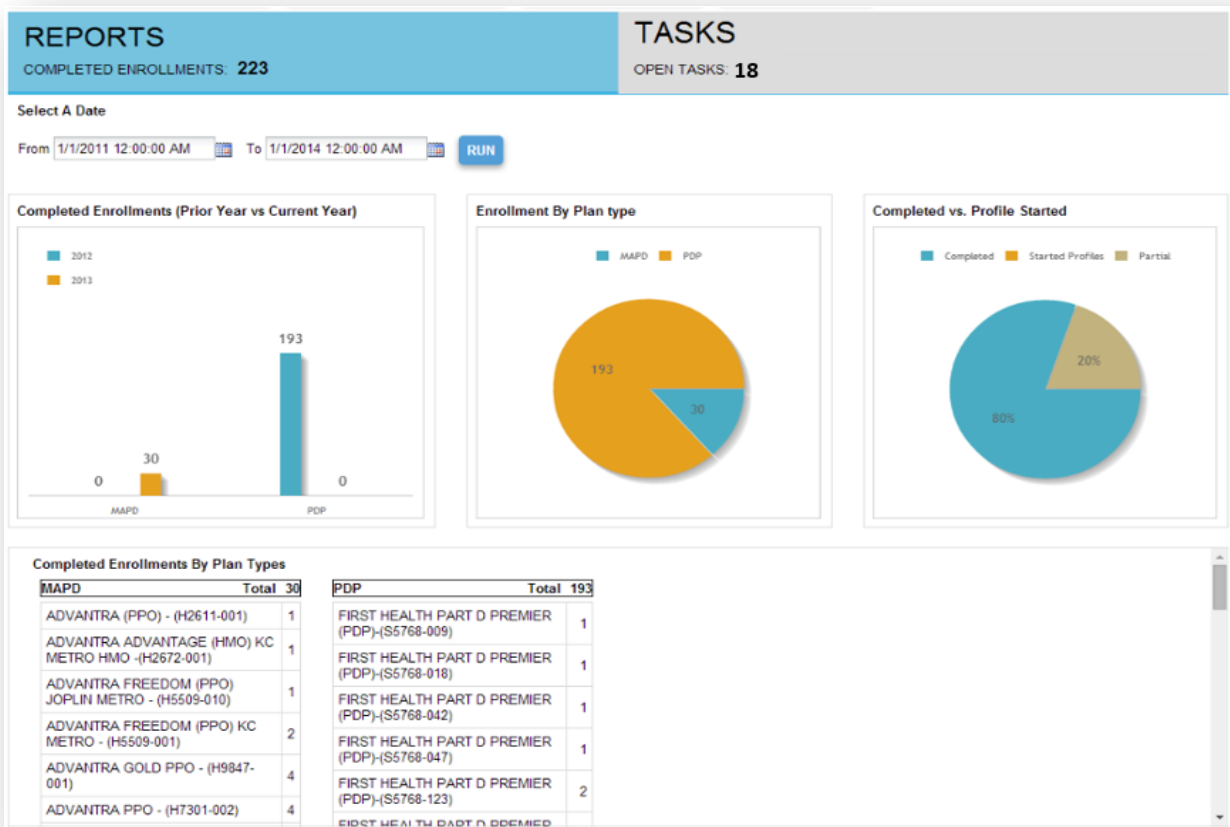
For D-SNP enrollment applications – email the chosen PCP Information to the Enrollment Dept. via **DSNPEnrollment@caresource.com**, including this information:

1. **Enrollee:**
  - a. MBI
  - b. enrollee first name
  - c. enrollee last name
2. **PCP:**
  - a. PCP first name and
  - b. PCP last name (please make sure the PCP spelling is correct).

## Features Available

### Dashboard

Agents using the system have access a powerful page for reporting and task management, the Dashboard. This page is a convenient place to start a day with updates to enrollment figures credited to the agent and provide a list of items requiring attention by the agent. The page is divided to two tabs, Reports and Tasks.



## Reports

The Reports tab displays a count of completed enrollments as of the latest data sync run nightly. More information about enrollments can be found in the charts and tables on the section.

### Custom Reports

Agents can create custom reports based on date parameters manually entered or selected using the calendar pop-up on the page. All figures on the Reports tab will be affected by the date parameters. By default, reports will reflect from start of AEP to the current date.

Select A Date

From 1/1/2011 12:00:00 AM To 1/1/2014 12:00:00 AM RUN

### Charts and Tables

Each chart and table displays information relevant to the agent for the date parameters entered. Information is current as of nightly updates.

### Tasks

The tasks tab displays all open tasks the agent has scheduled. Agent administrators will see all tasks for each agent they manage.

After completing a task, agents can check the Check If Completed box to remove the item from the incomplete tasks list.

Both complete and incomplete tasks can be found on the profile page for the consumer along with any notes the agent has recorded for that profile.

### Filters and Sorting

Tasks show incomplete tasks organized by due date by default. Agents can change the filter and sort order of tasks. Tasks can be filtered to show all tasks, completed tasks, and incomplete tasks only. Tasks can be sorted by clicking the header link of each column.

## Enrollment Status and Opportunities

The Enrollment Status and Opportunities table can be accessed from the Resource Center links on the bottom of the site. Here, agents can find information on each profile they have created. Profiles are separated by enrollment status (e.g., completed enrollment and partial enrollment), and further broken down by Plan Type. Each profile count will link to a page with access to every profile and enrollment that belongs to that group. This gives agents an easy method to call up information on

	MA	MAPD	PDP	MED SUP
Completed Enrollments	53	1,168	342	76
Partial Enrollments	78	1,374	197	38

completed enrollments and a quick method to follow up on any profiles that have not yet resulted in a complete enrollment.

## Export

Agents can export their profiles list to manage opportunities offline.

## Scope of Appointment

### SOA Submission Policy:

**Submission Venues for enrollment applications and for Scope of Appointments (SOAs): Scope of Appointment is no longer included in the Connecture app. This means that CareSource's External Sales Distribution Channels (FMO/Brokers) must order the document in PrintSource.**

### Submission venues for enrollment applications and for Scope of Appointments (SOAs):

#### A. Submission process via Fax:

Please make sure that you are correctly dialing this Fax number - **937-487-0917**.

When applications or SOAs are faxed to this number, they will be received in this email address:

[Enrollment\\_Medicare\\_OH@caresource.com](mailto:Enrollment_Medicare_OH@caresource.com)

#### B. Submission process via email:

1. When submitting DSNP SOA or application, email to this address:

[DSNPEnrollment@caresource.com](mailto:DSNPEnrollment@caresource.com)

2. Submitting MA SOA or application, email to this address:

[Enrollment\\_Medicare\\_OH@caresource.com](mailto:Enrollment_Medicare_OH@caresource.com)


#### C. A picture or scan of the SOA form is acceptable.

- a. Please note that there must be a process built in your files, whereby the 10-year + the current year retention requirements (11 years), are still met.
- b. The forms must be easily retrieved in the event of an audit.

## Calculator

Agents can use a quick calculator found in the header section of each page.

The calculator can be used to determine the consumer's age, price differences, and percentages to help guide the consumer through the shopping experience.

Calculator 

The calculator can be operated with either a mouse or keyboard.

## Notes and Tasks

While working with the consumer, agents may want a quick method to track information about the consumer or schedule meetings and tasks related to the consumers shopping experience.

Notes and tasks can be created at any point while the agent is available with a profile. The Add Notes/Tasks icon on the upper right corner of every page during the shopping experience will trigger the modal to create notes and tasks.

### Notes

Notes are a great way to track information about the consumer. By selecting the Notes option on top of the modal, the agent can type any note they would like to keep. Agents can enter any note up to 450 characters.

The screenshot shows a modal window titled "Add Notes or Tasks". It has a close button in the top right corner. Inside the modal, there are two radio buttons: "Notes" (which is selected) and "Tasks". Below these is a large, empty text input field. Underneath the input field, it says "Follow-up on: 08/05/2016". There are five radio buttons for follow-up periods: "Next Day", "2 Days", "3 Days", "5 Days", and "Custom". To the right of these radio buttons is a calendar icon. A calendar widget is overlaid on the right side of the modal, showing "Aug 2016" with a grid of dates from 1 to 31. A "SAVE" button is located at the bottom right of the modal.

Examples of possible notes an agent might like to make include:

- Preferred nickname
- primary interest in a plan such as lower premium or concerns with 'doughnut hole'
- current plan name, premium, and costs
- unanswered questions requiring research
- name of spouse, grandchildren, and pets

Notes will appear on the Profile page for that consumer. A note for one consumer will not appear on any other profile page.

### Automatic Note Tracking

Some notes will be automatically generated for the agent. For example, changes made to the consumer's profile such as the consumer's address will automatically create a note documenting the old address and new address.

### Tasks

Tasks help agents track work they need to follow up on to help a consumer with their shopping experience.

To create a task, an agent should select Tasks on the Add Notes or Tasks modal. When creating a task, the agent can enter information up to 450 characters. Selecting a follow-up will determine where the task appears on the agent's task list on the Dashboard and Profile pages.

Agents can select a default due date such as "next day" or "5 days" or set a custom date.

Examples of possible tasks an agent might like to make include:

- check for a completed SOA from the consumer
- mail marketing materials to the consumer's address
- meeting date and location scheduled with the consumer

Tasks pertaining to a specific profile will appear on the Profile page. All tasks will appear on the Tasks section of the Dashboard.

## Authorized Representative

Agents are able to add an Authorized Representative to a profile for the consumer. If the agent is dealing directly with an Authorized Representative, the agent should answer "Yes" to the question "Are you an authorized representative?" The agent can then add information about the representative. The authorized representative will carry forward to the enrollment.

Are you an authorized representative?  Yes  No

Authorized Representative

\* First Name

\* Last Name

\* Relationship to Beneficiary

Email Address

\* Phone Number (  )  -

\* Address Line 1

Address Line 2

\* City

\* State

\* Zip Code