KelseyPortal Applications Guide

Last modified August 30, 2022

Table of Contents

📍 What's on my Applications Page?

There are several different tabs on the top navigation bar that you can choose from. Click on the drop-down menu and select [**Applications**].

Step 1:   On the left navigation, you will be able to create an electronic Scope of Appointment, view your recent applications and submit new applications.

*****Please note, you are only able to get to this tab if you are certified to sell for the current year*****

How to do an E-Scope of Appointment

Step 1: From the left navigation, click on the E-SOA tab. Click on the [**Add new Scope of Appointment**] button to start a new electronic SOA

Step 2a: In the Signature Details section:
- **Plans Discussing** – select ALL the plans that were discussed with the prospect
- **Signatory** – select Beneficiary if the prospect will sign, or select Authorized Rep if it's someone acting on their behalf
- **Agent** – select your name
- **Date of Appointment** – when did this SOA occur?
- **Place of Contact** – optional to fill out

Step 2b: In the Beneficiary Details section, fill out every field. If an authorized rep is there to sign/speak on behalf of the beneficiary, then you will also need to fill out the Authorized Representative Details section.

Step 2c:

Choose how the prospect wants to sign then click [**Save**]

- **On-Screen** – the easiest method as both you & the prospect can sign using a computer & mouse or if you have a touch screen tablet, sign with your finger
- **E-signature** – the prospect will be sent a DocuSign email to sign

Step 3:

After saving the E-SOA, you will be taken back to the main E-SOA page where you should see your most recently completed E-SOA in your list

How to Start an Application (Application Data)

Step 1: From the left navigation, click on Add Application and select the appropriate effective year. You will see the **Instructions** page, click [**Next**] to advance to the Application Data page.

Step 2a: In the **Scope of Appointment** section, to upload a signed paper copy of the SOA:
1) select the option for Upload Signed SOA
2) click into the blank **Scope of Appointment Document** box
3) another window will pop up for you to find & select the scanned SOA from your computer, click "Open"
4) the selected SOA now shows up in blue where the blank box was previously. Click the [**Upload**] button then scroll down to your repository bin at the bottom of the page, where you will see your uploaded SOA

Scope of Appointment

Use this section to Upload or attach a Scope of Appointment (SOA) associated with this Application.

Acceptable file formats:.jpg,.pdf,.doc,.jpeg,.png,.docx . File Size is limited to 8 MB

○ Upload Signed SOA   ○ E-SOA (Esign completed by Agent and Member)

Scope of Appointment Document   Clark Kent - Signed S...   Upload

Open

← → ∨ ↑ 📁 > k24583 on KS540S... > Documents   ∨ ↻   🔍 Search Documents

Organize ▼   New folder

- 💻 k24583 on KS5
- 🗁 3D Objects
- 🖥 Desktop
- 📄 Documents
- ⬇ Downloads
- 🖴 PUBLIC (P:)

Name	Date modified	Type
📄 Clark Kent - Signed SOA	6/27/2022 1:35 PM	Adobe Acrobat D...

File name: Clark Kent - Signed SOA   All files

Open   Cancel

Agent Type

This is an optional step.

Documents uploaded for this application

Show 10 entries   Search:

Document Type	Document Name	Uploaded BY	Create Time	Download Document
SOAP	Clark Kent - Signed SOA_08212022_011746352.pdf		08/21/2022 01:17:46 PM	Download

Showing 1 to 1 of 1 entries   Previous 1 Next

Step 2b: To use an E-SOA:
1) select the option for E-SOA if completed by Agent and Member before starting this application
2) click on the drop-down box and find the name of the prospect you did the E-SOA for

Scope of Appointment

Use this section to Upload or attach a Scope of Appointment (SOA) associated with this Application.

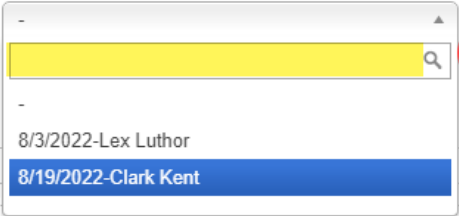Acceptable file formats:.jpg,.pdf,.doc,.jpeg,.png,.docx . File Size is limited to 8 MB

○ Upload Signed SOA   ● E-SOA (Esign completed by Agent and Member)

E-SOA: ①

-	▲
	🔍 ②
-	
8/3/2022-Lex Luthor	
8/19/2022-Clark Kent	

Telephonic SOA (Ref Nbr)

Application Info

In the **Application Info** section, complete all fields:
- Source of Enrollment – this will always be Beneficiary Election
- Application Channel – how did this prospect come to you?
- Application Signature Date – this is the date the prospect SIGNED the application
- Application Receipt Date – this is the date that you RECEIVED the application

The Application Receipt Date <u>can never be before</u> the Application Signature Date. An agent can't receive an app before the prospect signs. If your application is greater than 7 days from the Application Receipt Date, it will not be accepted as this app is considered late and must be resold

Step 3a:

- Date Applicant Desires to Enroll – what's the effective date? Must be the first of a future month and no more than 3 months from the current date per CMS guidelines
- Broker/Agent – select your name
- Brokerage/Agency – select your agency
- If you selected E-SOA in the beginning, click on the [**Next**] button to move to the next page. If you have a paper app, continue to step 3b.

Application Info

Enrollment Source

Source of Enrollment	Application Channel
Beneficiary Election ▼	Mailout/Flyer ▼

Beneficiary Application

Application Signature Date	Application Receipt Date	Date Applicant Desires to Enroll with KelseyCare Advantage
08/18/2022 📅	08/19/2022 📅	10/01/2022 📅

Sales Information

| Broker / Agent	Brokerage / Agency	Agent Type
Name,Agent ▼	Testing LLC ▼	Independent

Document Upload (optional) – this is only needed if you completed a paper app. You will need to upload a copy of that paper app. In some cases, it may be the same document as your SOA, so you will upload that document again

Step 3b:
1) under Document Type select Paper Application
2) click [**Choose a File**] to prompt a new window to open
3) find the scanned paper app, select it, then click [**Open**]
4) the selected paper app now shows up in blue under Document Location. Click the [**Upload**] button

Click [**Next**] to continue
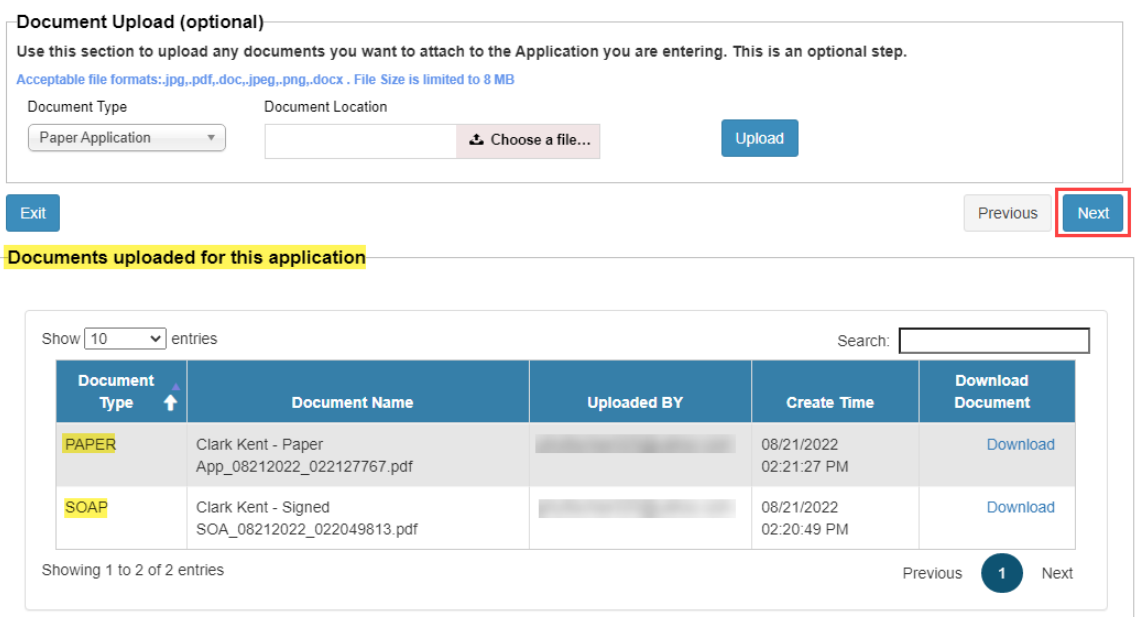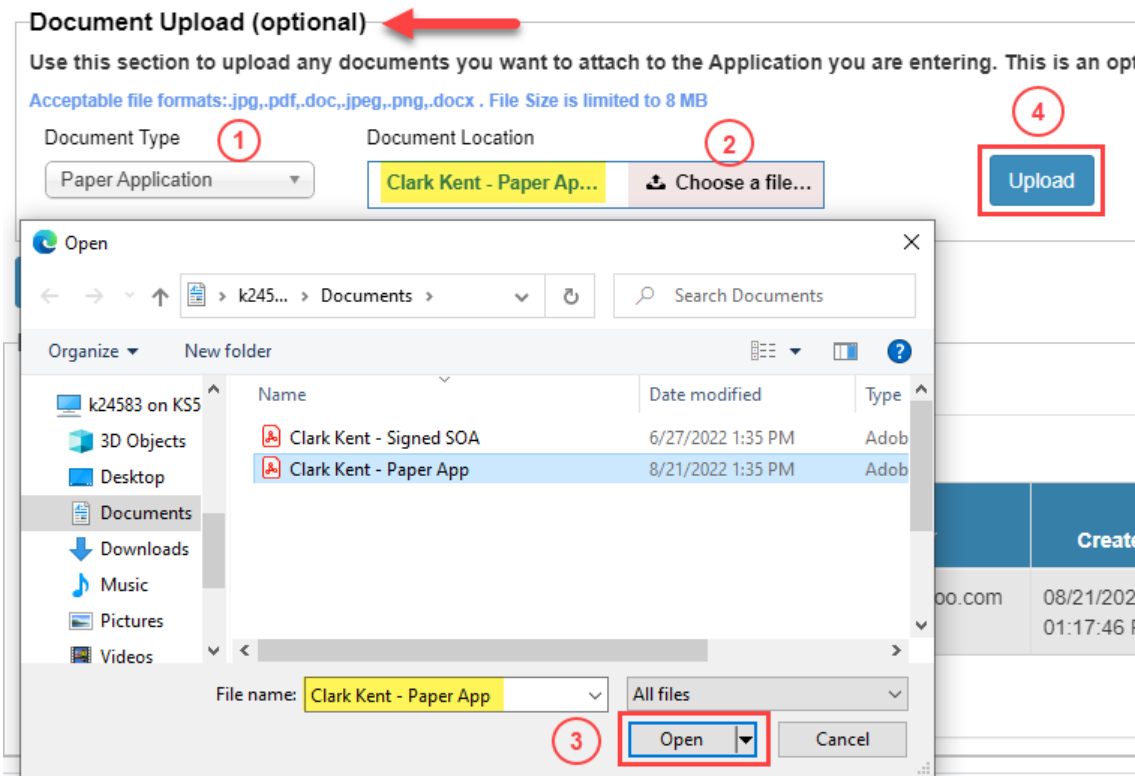
📝 Beneficiary Demographics

Complete the following fields on the Information from **Medicare Card & Beneficiary Details** section:

- MBI – enter the MBI # without dashes. example: 1A2B3C4D5E
- Birth Date – enter their birthdate
- Gender – birth gender

Step 1:

Always click the [**Check Eligibility**] button! This will verify that you have the correct MBI number, but it also AUTOMATICALLY fills in the rest of the fields:

- Part A and B Effective Dates
- First, Middle and Last Name

Beneficiary Demographics

Information from Medicare Card

MBI(Avoid using '-')	Part A (Hospital) Effective Date	Part B (Medical) Effective Date
1A2B3C4D5E	12/01/2012 📅	07/01/2022 📅

Beneficiary Details

Title	Last Name	First Name	Middle Name
Select ▼	KENT	CLARK	M

Birth Date	Gender
02/08/1964 📅	MALE ▼

Eligibilty
Verified   [Check Eligibility]   ☐ Skip Eligibility Check

Step 2:

Next fill in their Contact Information. You will need to have at least 1 telephone # (home, cell or both). Emergency Contact is optional, but if you have it, please fill it in. Click the [**Next**] button to continue

Contact Information

Home Telephone Number	Cellular Telephone Number
(713) 555-1234	(713) 555-1234

Emergency Contact

Name	Phone Number	Relationship to Member
LOIS LANE	(281) 555-9876	SPOUSE ▼

[Exit]   [Previous] [Next]

Beneficiary Address

Step 1:

Input the prospect's Permanent Address then click the [**Verify**] button. A pop up window will appear; click on the [**Use this address**] button. This will automatically verify the address and make any corrections if needed. The only time you should use the Skip Address Verification checkbox, is if the prospect is in a new home/apartment/complex that is not recognized on google maps

Do NOT use a PO BOX as the Permanent Address as it's not accepted by CMS

Beneficiary Address
Permanent Address

Street Line 1	Street Line 2	City
11511 SHADOW CREEK		PEARLAND

State	Zip	Zip 4
TX		

Verify   ☐ Skip Address Verification?

Address Verification

Address 1 : 11511 SHADOW CREEK PKWY

Address 2 :

City : PEARLAND

City Abbrv. :

State : TX

Zip : 77584

Zip 4 7298

Use this address   **Cancel**

Step 2:

If the prospect's mailing address is the same as their permanent address, check the box that says "Is Mailing Address Same as Permanent Address?". If they are different, enter their mailing address and click the [Verify] button as you did in the previous step. Click the [**Next**] button to continue

Mailing Address

☑ Is Mailing Address Same as Permanent Address?

Street Line 1	Street Line 2	City
11511 SHADOW CREEK F		PEARLAND

State	Zip	Zip 4
TX	77584	7298

Verify   ☐ Skip Address Verification?

Exit   **Previous**   **Next**

Benefit Choices

Step 1: Does the member want to opt in for **Electronic Communication**? If yes, check the box "Yes, I would like to receive my new Enrolment Kit......" Please let the member know they can call into Member Services to change their preference

Benefit Choices

Electronic Communication

Please check the "Yes" box below if you would like to receive your Enrollment Kit & Annual Notice of Change/Evidence of Coverage electronically and provide your email address below:

☑ Yes, I would like to receive my new member Enrollment Kit - EOC, Comprehensive Drug Formulary, Provider/Pharmacy Directory, and Dental Directory.

I understand I can change my mind at any time and go back to receiving hard copy mailings by contacting Imperial Health Plan at 1-800-838-8271, (TTY/TDD:711), Monday through Sunday, 8:00 am to 8:00 pm except holidays during October 1 through February 14 and Monday through Friday 8:00 am to 5:00 pm February 15 through September 30 except holidays.

My email address is

CLARK@THEPLANETNEV

Step 2: From the drop-down list, select which **Benefit Package** the prospect wants to enroll in

Benefit Package

Select Plan Benefit Package Beneficiary wants to enroll in

Select	▲
	🔍

Select

KelseyCare Advantage Silver (HMO)

KelseyCare Advantage Gold (HMO)

KelseyCare Advantage Silver Freedom (HMO-POS)

KelseyCare Advantage Gold Freedom (HMO-POS)

KelseyCare Advantage Platinum (HMO)

If the prospect wants to purchase an optional supplement dental benefit, you may select Yes or No here.

Step 3: Dental can only be added to:
- Gold (HMO)
- Silver Community (HMO-POS)
- Gold Community (HMO-POS)

Dental Benefit Choice

Do you want to purchase an optional supplemental benefit (Dental Rider)? $32.80 per month (Available only with the Gold (HMO), Silver Community (HMO-POS), Gold Community (HMO-POS)

Select	▲
	🔍

Select

Yes

No

In the Primary Care Physician (PCP) Choices section:

Step 4a:
- a PCP is required if the prospect is seeing a Kelsey Provider, Kelsey Community Provider or IP related physician
- if the prospect's primary PCP is a CIGNA doctor, that doctor will not be in the system so leave this section blank

Click the [**Search & Select PCP**] button to find the prospect's PCP. A new window will appear where you may search by first name, city, zip & number of miles within the zip code. Click the [**Search**] button on the right to view the results, then [**Select**] to pick the PCP.

Step 4b:
If you are unable to locate their PCP, check the box that says, "**Include closed panel PCPs**" and click the [**Search**] button again. If the Provider is found after checking the box, it means that the Provider is not accepting new patients, but we can assign the Provider to your prospect IF THEY HAVE AN EXISTING RELATIONSHIP with that Provider. If the prospect has no previous relationship with the Provider, during the verification process, the prospect will be reassigned to another PCP.

Step 5:
Under **Premium Payment Method**, all KelseyCare Advantage plans are NO PREMIUM APPLICABLE unless they have selected the Gold Community Plan, or Dental under the Gold & Silver Community plans, in which case they may select any of the other 3 options. Click the [**Next**] button to continue

Beneficiary Status Questionnaire

Step 1: This page is OPTIONAL. On question 4 if the prospect selects "Other", please type the language they prefer. When ready, click the [**Next**] button to continue

Beneficiary Status Questionnaire

1. Does your spouse work ○ Yes ○ No

2. Do you work? ○ Yes ○ No

3. Will you have other prescription drug coverage (like VA, TRICARE) in addition to KelseyCare Advantage? ○ Yes ○ No

4. Select one if you want us to send you information in a language other than English: ○ Spanish ◉ Other ○ N/A
   Please Explain:
   FRENCH

5. Please indicate if you would prefer future information in an accessible format: ○ Braille ◉ Large Print ○ N/A

Exit   Previous   Next

Attestation Questionnaire

This is where you will identify the election period(s) for your prospect. You may select more than one election period if the prospect qualifies for it. Please note that some options will require you to enter a date once you check the box.

Step 1a:

If you select any of the first 18 options, you do **NOT** select an option under Election Type in the next section. The SEP Reason Group Code & SEP Reason Code fields will remain blank. Click the [**Next**] button to continue.

If you selection option 18 (FEMA) you will need to provide an explanation of which specific disaster this prospect qualifies for. You may upload this as a separate word document on step 2 of this process, then jump back to this page after uploading

If there is an election type that does not fit any of the 18 scenarios from the questionnaire, scroll down to the very bottom of the page and select a drop down in the **Election Type** section.

Step 1b:

Please do not use **SEPR (5-star)** unless it is the only option since this can only be used once per year, per member. If you need additional guidance, refer to the *Election Period Information* cheat sheet located under the Configuration Tab > Plan Materials > go to the last page.

Authorized Representative/POA

Step 1:
If your prospect has an authorized representative or Power of Attorney that they want listed, you will need to complete the Authorized Representative/POA section

Authorized Representative/POA

Enter Authorized Representative/POA Information, if applicable:

Name	Address	Phone Number	Relationship to Enrollee
JONATHAN KENT	6547 FARM HILLS LANE	2815556471	SON

Step 2a:
Confirm how the prospect is applying for KelseyCare Advantage:

Agent Assisted Online – you completed this application through the KelseyPortal with the prospect. An electronic signature box will appear for the prospect to sign. You must check the acknowledgement box to continue. Click the [**Submit Application**] button to complete

Application Method

Application Method of Enrollment

Agent Assisted - Online ▼

Signature

I, the [applicant, requestor, etc.] for this [type of form], warrant the truthfulness of the information provided in this application.

If you are signing on a laptop, Please click on left mouse click and then sign.

Please use left mouse click and then sign.

Electronic Signature

Click Here to Clear Signature

☑ I understand that checking this box constitutes a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.

Exit   Previous   **Submit Application**

Step 2b:
Paper Application (with signature) – you uploaded the paper app during the first phase of this process. The prospect will <u>not</u> need to sign again. Application Method is Paper Application, select "Signature on Paper Form" under Signature Options and click the [**Submit Application**] button to complete

Application Method

Application Method of Enrollment

Paper Application ▼

Signature Options

◉ Signature on Paper Form / Verbal Signature   ○ Send via E-Signature

Exit   Previous   **Submit Application**

Step 2c:

Secure Email Application – you completed the application through the KelseyPortal but the prospect wants to do a DocuSign signature. After selecting Secure email application, click the option for **Send via E-Signature** then type in their name & email address to send a DocuSign email. Click [**Submit & Send for DocuSign Signature**]

The email will be sent immediately. After the prospect signs, it takes roughly 10 minutes for that update to reflect in the KelseyPortal

Application Method

Application Method of Enrollment

Secure email application ▾

Signature Options

○ Signature on Paper Form / Verbal Signature   ◉ Send via E-Signature

Full Name of Signer

CLARK KENT

E-Mail Address of Signer

CLARK@THEPLANETNEV

Exit   Previous   Submit & Send for Docusign Signature

Step 3:

Upon clicking the [**Submit Application**] button, a pop up window will appear reminding you that you have one last chance to review & make revisions to the application. When ready, click the [**OK**] button to complete the application submission

kelseyportal.kelseycareadvantage.com says

Please review the Application you have just entered.
If you need to review this application, click 'Cancel'.
Once you press 'OK' you will not able to revise or change any portion of the application.
You may check the status of this application on the left navigation, under 'View Application'.

OK   Cancel

Finalize and Finish

Step 1: You should this this success message when you submit the application

Finalize

Thank You!! The application has been submitted successfully.

Step 2: To view the status of your submitted applications, go to the left navigation > **View Application**.
Status of applications:
- Incomplete – an application that's still in progress and not submitted yet
- Completed – you submitted the application, but the enrollment team has not review it yet
- Sent to DocuSign – waiting for DocuSign signature before updating status to Completed
- Sent To Enrollment – the enrollment team has submitted the application to CMS

🗨️ Frequently Asked Questions

Q: What if my prospect's birth date is incorrect?
A: Most members are aware if their birth date is incorrect, but you will still use the birth date that social security has until the member gets it corrected. Otherwise, the application will fail.

Q: Why don't I see the Benefit Package that my prospect wants to enroll in?
A: The permanent address dictates which plans are available to them based on their location (county & zip code). If you do not see the plan the prospect wants to enroll in and have confirmed that their address is correct, it means the prospect is not in the service area for that plan. They will need to select another plan.

Q: My prospect signed via DocuSign, why isn't the application status updating?
A: There is about a 10-minute delay when the prospect signs the DocuSign until the application status updates.

Q: What if I can't find my prospect's PCP?
A: Increase the max miles within the search and try to search by a partial name instead of the full name. If that does not work, check the box that says, "Include closed panel PCPs" and search again. If the provider is found with this method, please remind the prospect that they must have a prior existing relationship with the doctor for them to have this provider assigned as their primary PCP. If the prospect's primary PCP is not a Kelsey provider, you may leave it blank but are highly encouraged to search for the closest PCP to them.

Q: What to do if the address verification can't find the permanent address?
A: Ask the prospect if this is a new home or new community and see if you can find it on Google Maps. If it's on Google Maps, please double check the spelling of the address and try verifying again. If the address is not available on Google Maps, check the box to "Skip Address Verification".

Q: I only completed half of the application before I was logged out. Did my application save?
A: Yes as long as you completed steps 1 – 3 on the application, it saves your progress. On the left navigation pane, click View Application and your most recent application will be at the top of the list. The status will show INCOMPLETE. Click the [**Edit**] button to continue filling out the application.

Q: I'm not sure which enrollment period my prospect qualifies for?
A: Use the Election Period Information cheat sheet under the Plan Materials section for assistance. If you are still unsure, you may select multiple election periods you think the prospect would qualify for. Our enrollment team will do their best to select the most appropriate period for the prospect, during their review. *Ultimately it is your responsibility to choose the correct election period*.