

WellFirst Health's Ascend User Manual

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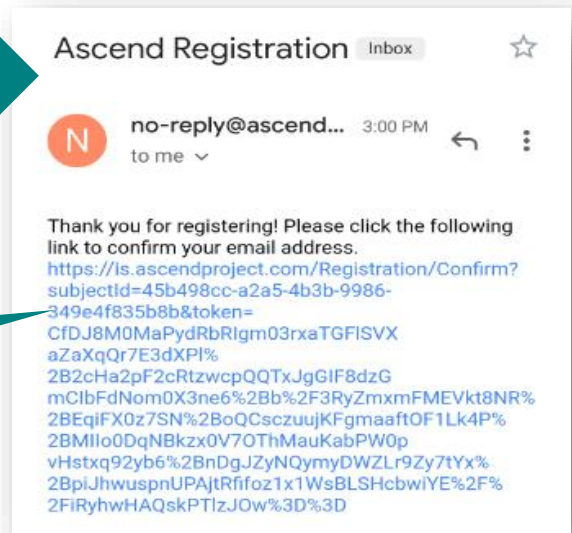
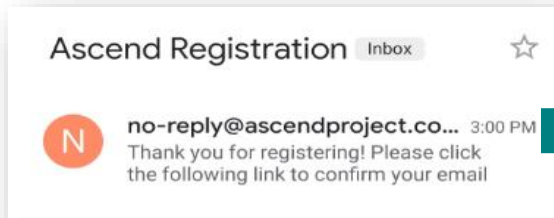
What is Ascend?

A secure, encrypted, real-time cloud-enabled data platform that brings together all necessary tools for field sales agents to have meaningful engagements with prospective members. It is also a modular system with many functions designed to assist field sales teams with:

- Electronic Scope of Appointment
- Electronic application completion and submission
- Audio recording capabilities
- Replacement for paper sales support and marketing documents

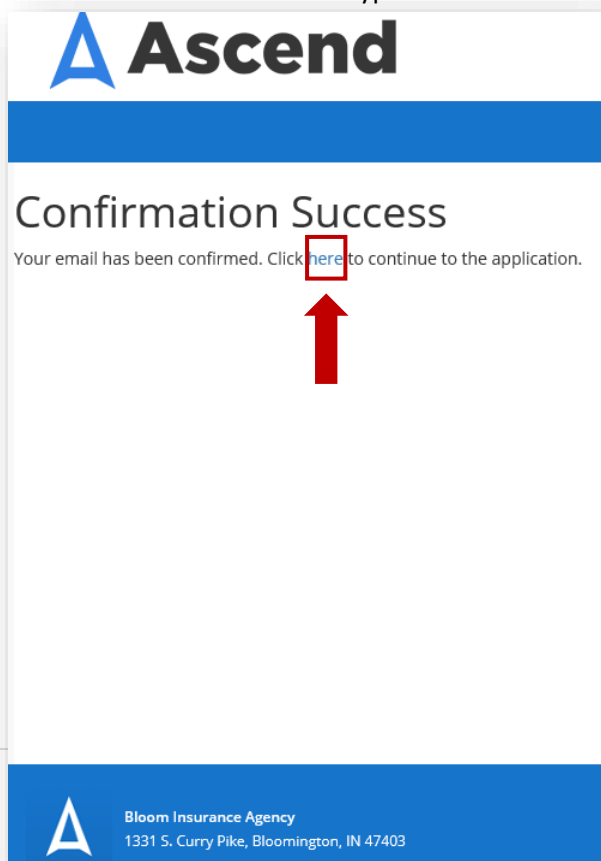
Getting Started- New Ascend Users

1. You will get an email from “**Ascend Registration**” letting you know that your account is ready
2. Open the email and click on the link

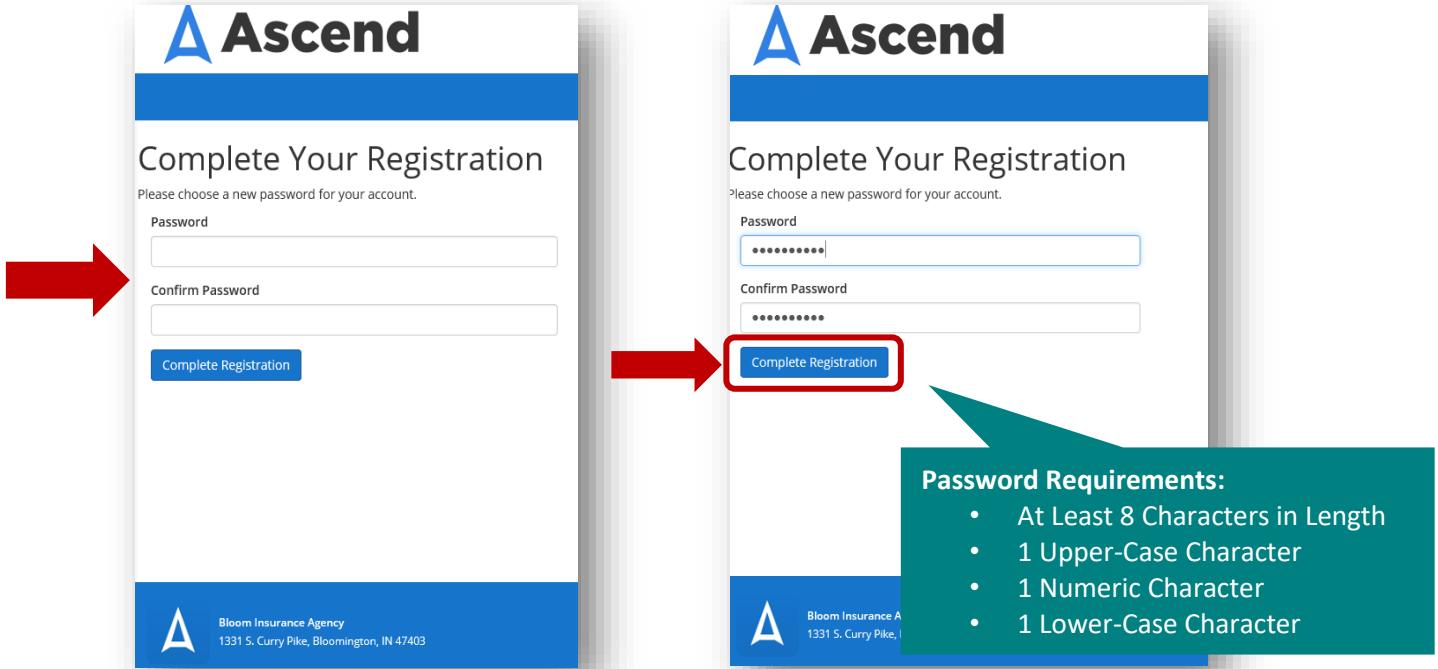


Click on the Link

3. Confirming your Account:
 - a. Click on the “**here**” hyperlink from Ascend Email

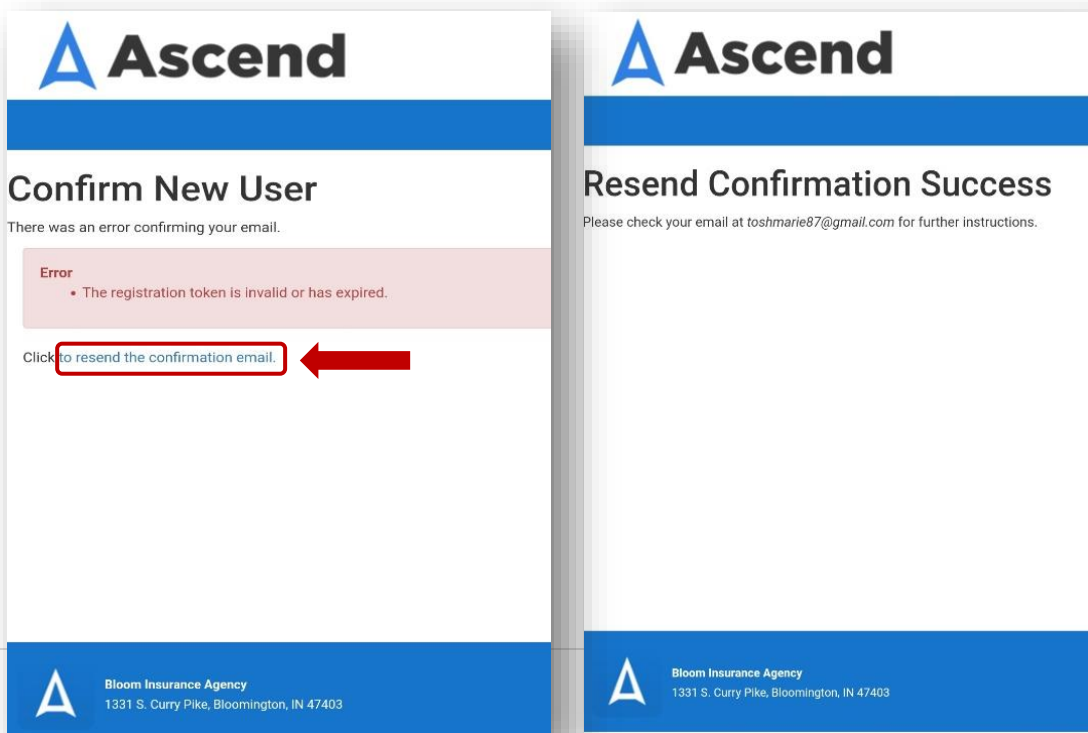


4. Next, choose your new password
 - a. Password Requirements:
 - Characters in Length
 - 1 Upper-Case Character
 - 1 Numeric Character
 - 1 Lower-Case Character
5. After you have entered your password twice, click on the **“Complete Registration”** Button



Registration Token is Expired

6. If you get an error message that your registration token is expired, click on the **“to resend the confirmation email”** hyperlink
7. Next, go back to your email to get your new confirmation link

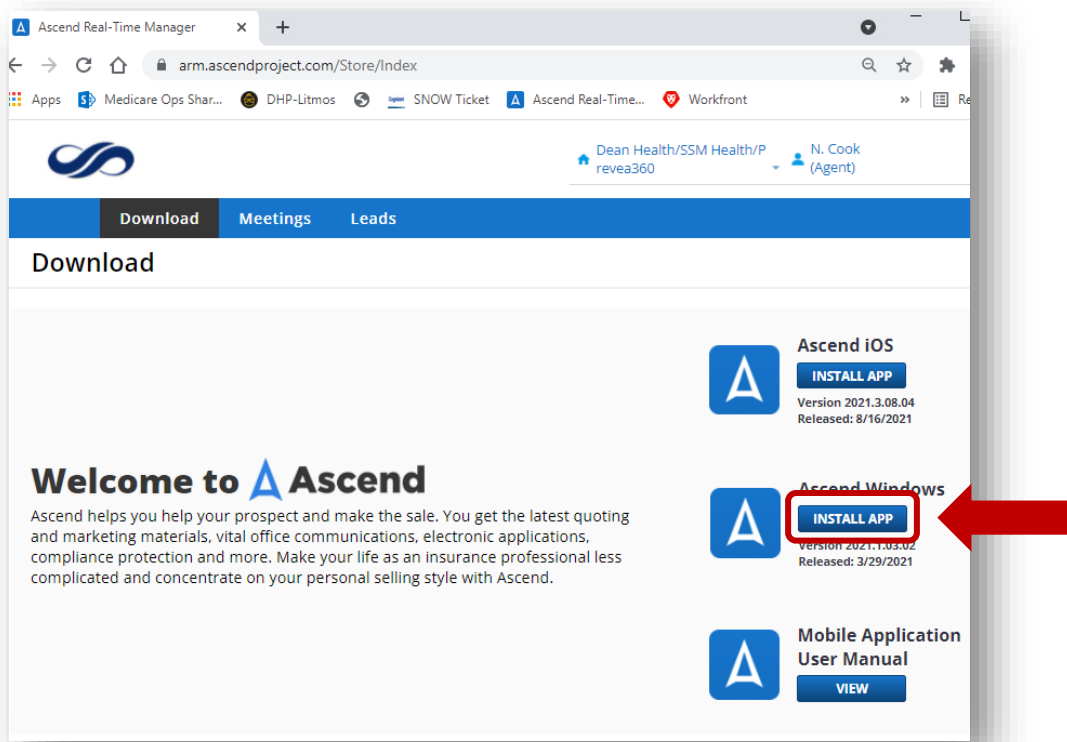


Ascend Mobile Application

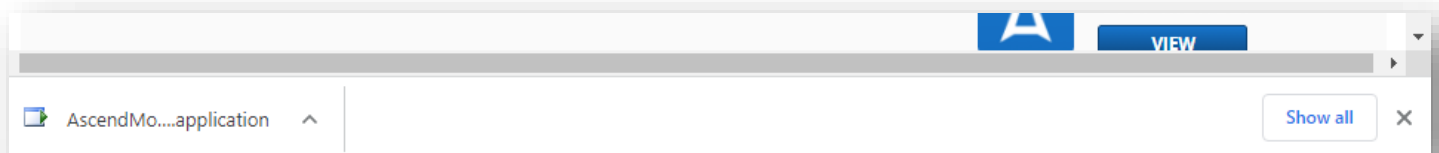
The **Ascend Mobile Application (AMA)** is the sales and enrollment platform that can be housed on your iOS, Android, Windows device. There is where you can send a electronic scope of appointment, conduct and record your sales meetings, and take a telephonic recorded application. You can also manage your Book of Business and track your lead/prospect information. Lastly, where you can submit your electronic enrollments.

Downloading AMA (Ascend Mobile Application)

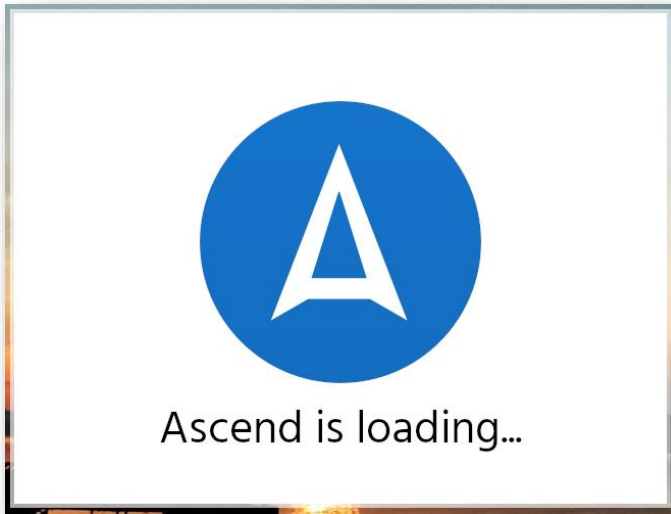
8. Go to <https://arm.ascendproject.com>
 - a. **Note:** Screenshots shown will be for using/downloading to your Windows Desktop, but screens will be the similar if downloading to iOS or Android device
9. Click on the “**Install App**” button



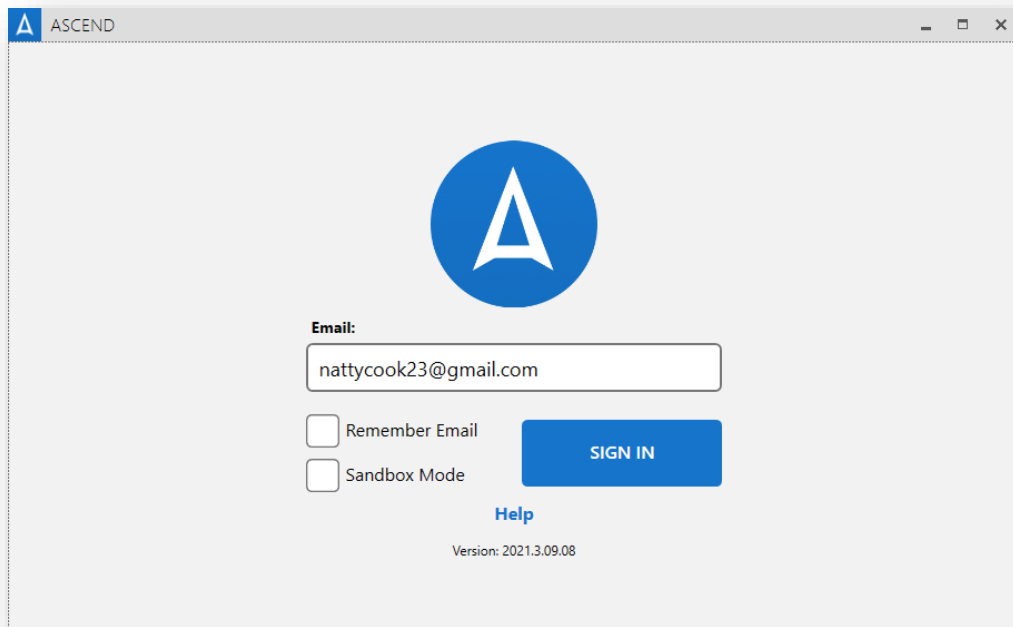
10. You may have to click on the application downloaded at the bottom of your screen:



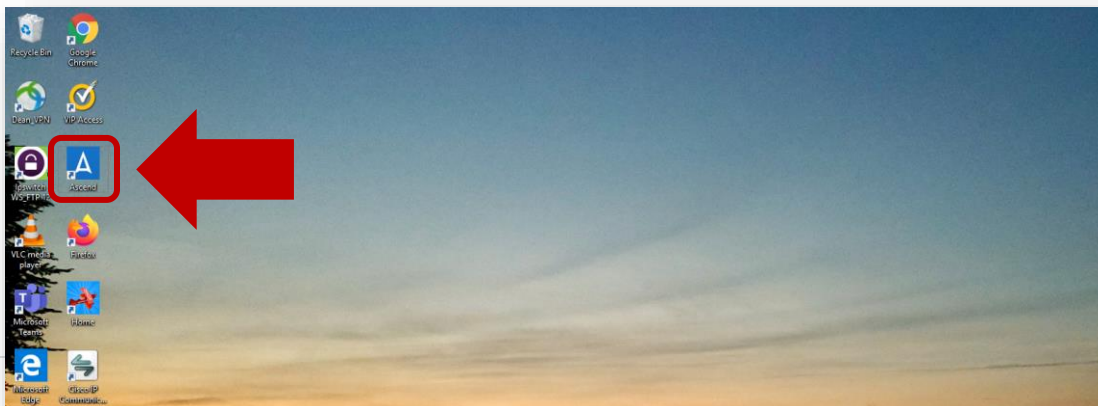
11. You will get a “loading” message



12. It will bring you to the login screen. **Note:** Your credentials are the same for all systems of Ascend

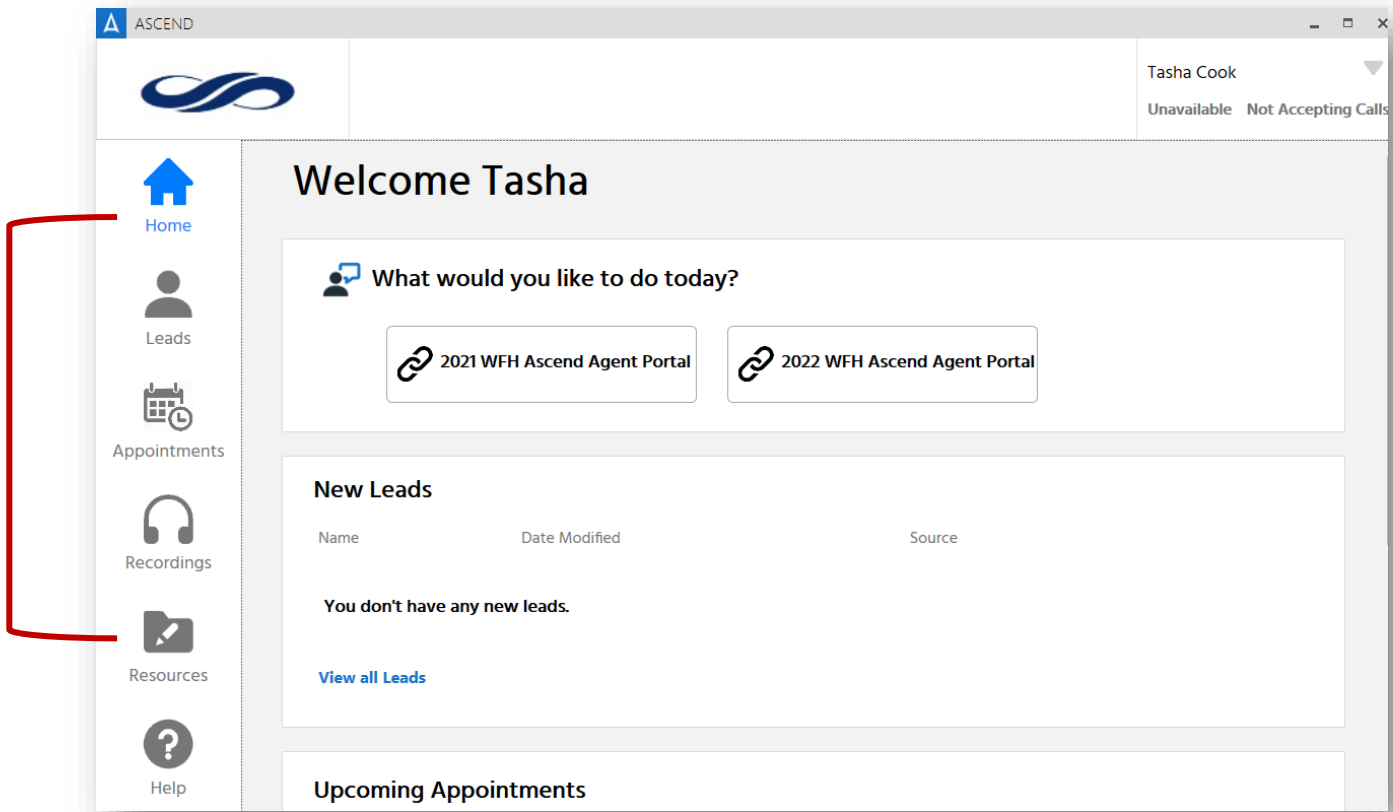


13. Ascend should also download to your desktop



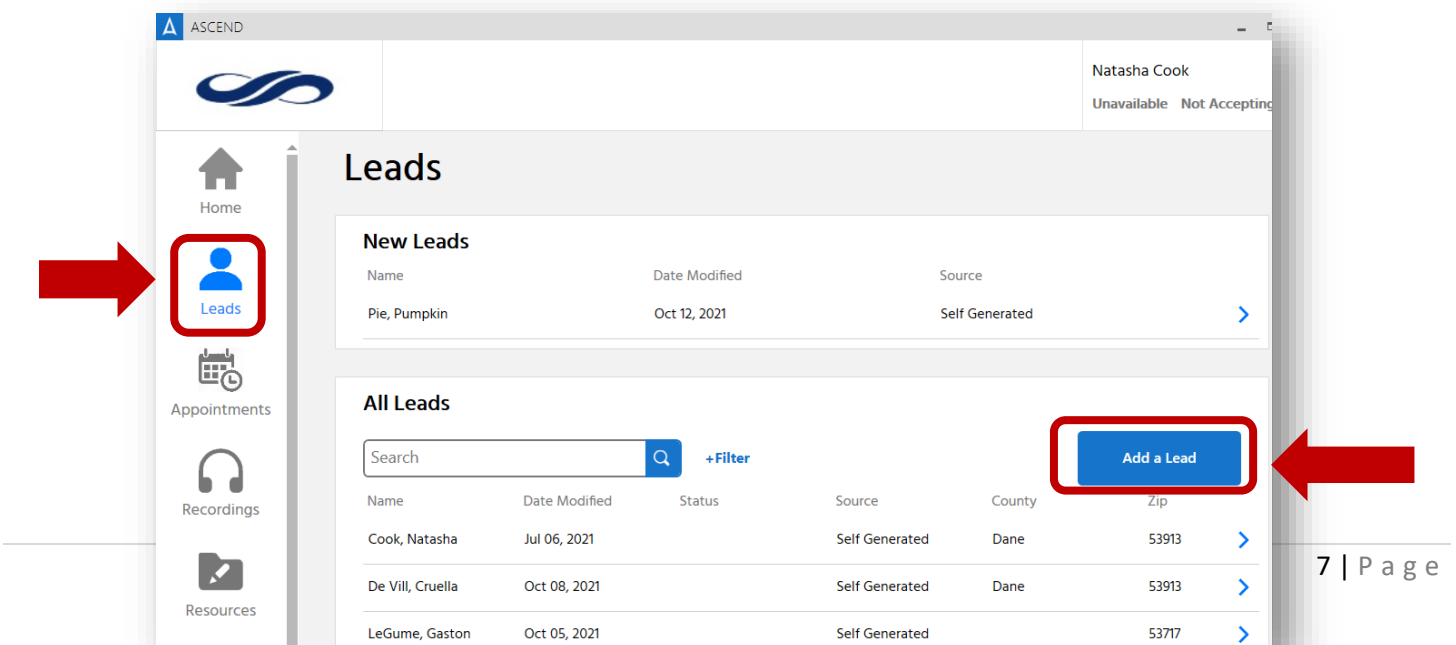
Navigating AMA

14. When you first login it will take to the **“Welcome Page”**
15. From the **“Welcome Page”** you can quickly access everything you need like view your leads, you meeting recordings and resources
 - a.



Creating a Lead

16. Click on the **“Leads”** Button
17. Then, click the **“Add a Lead”** button



18. From here you will want to add as much information you have into the lead
 - a. Everything you enter on the lead will transfer to the electronic application (If they decide to enroll)

The screenshot shows the 'Add Lead' form in the ASCEND software. The form is titled 'Add Lead Scan Drivers License'. It contains the following fields and values:

- Name: Autumn
- Leaves: (empty)
- Birthday: November 20, 1956
- Gender: Female
- Phone: 6083938670
- Email: nattycook23@gmail.com
- Permission to Contact: Contact Permissions
- Lead Source: Self Generated

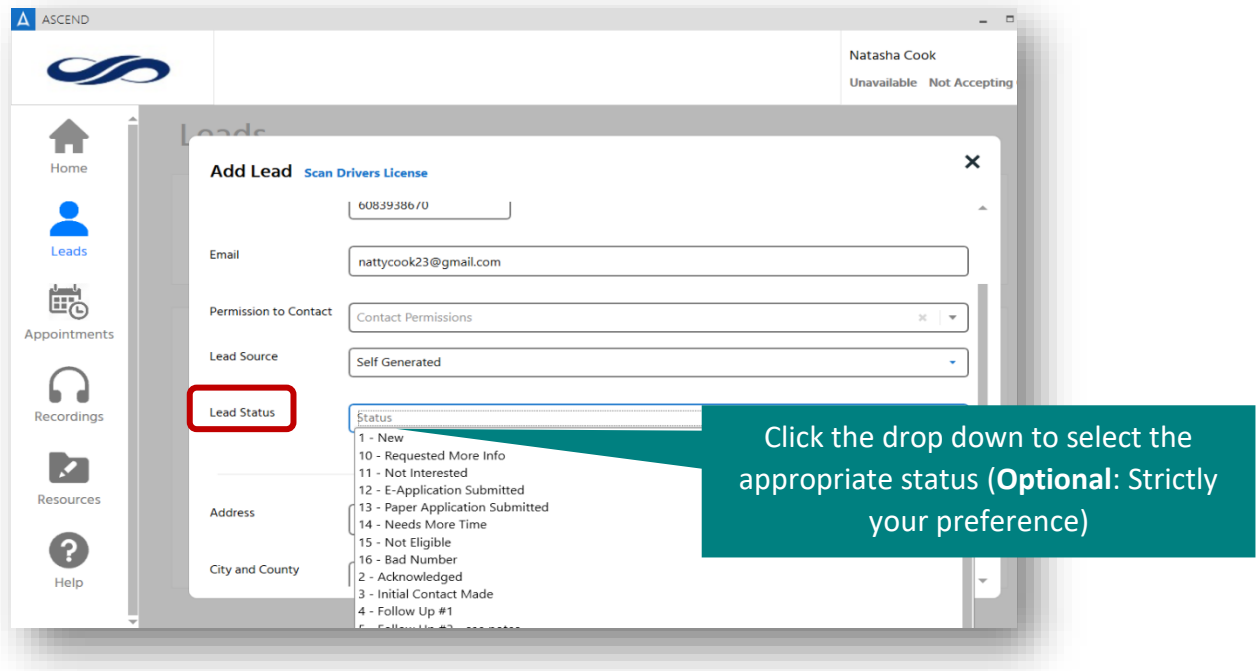
A red box highlights a scrollbar on the right side of the form, indicating that there is more information that can be added.

There's a scroll bar to scroll to add more information

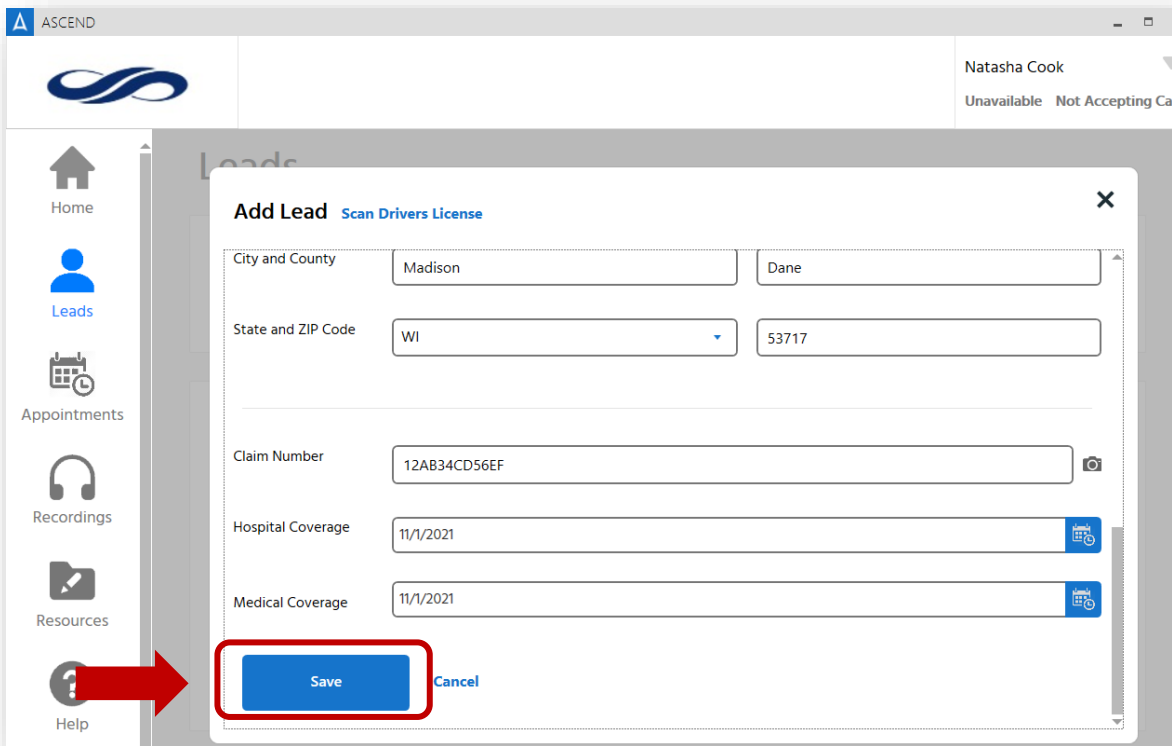
19. You can also click on the "Scan Drivers License" to auto-populate your clients information
 - a. **Note:** I would verify that the information on their ID is still update to date
 - b. Only works on iOS & Android Devices



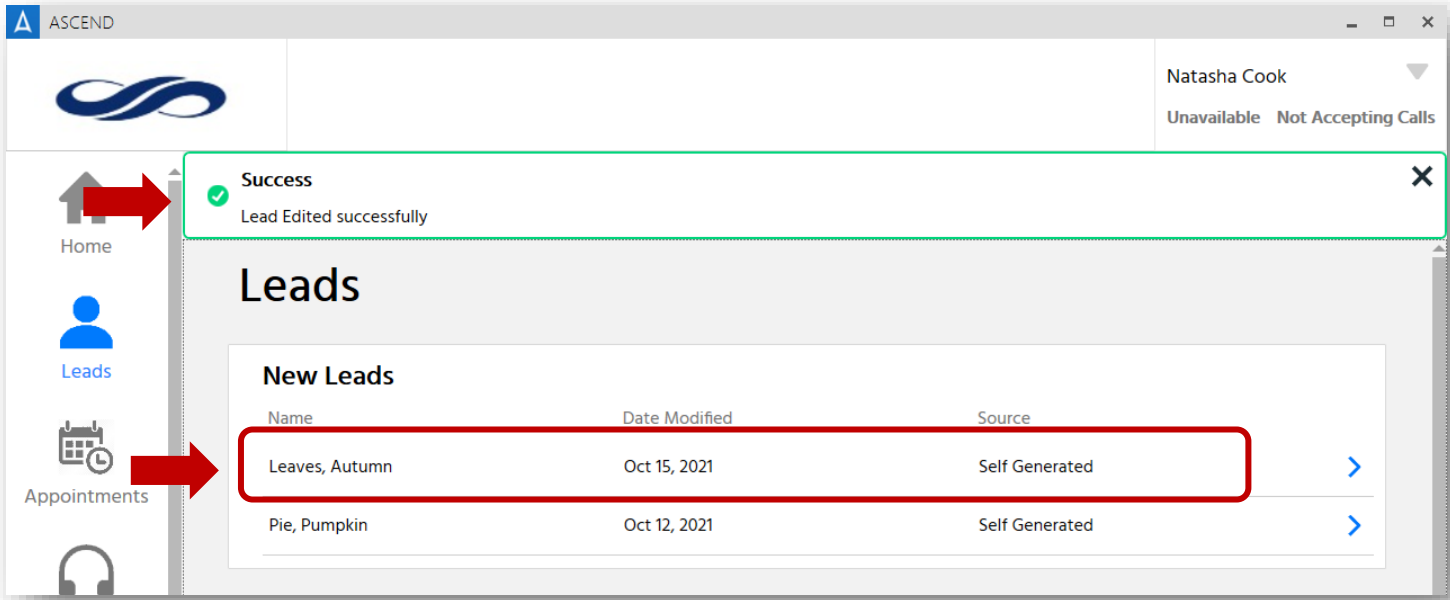
20. You can also select different Lead Statuses, so you know where you are with that Lead



21. Once you have all your information added, click on the "Save" button

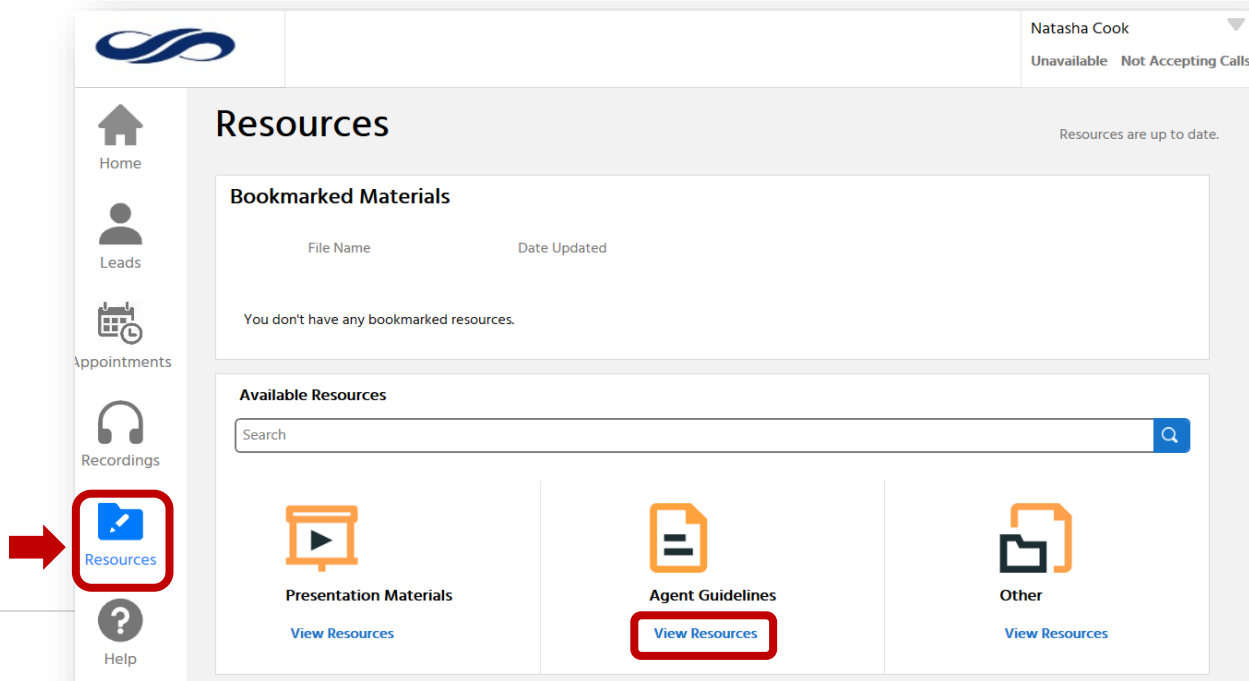


22. You will get a notification that your lead was saved successfully and You will noticed that your lead will pop up under the “New Leads” section

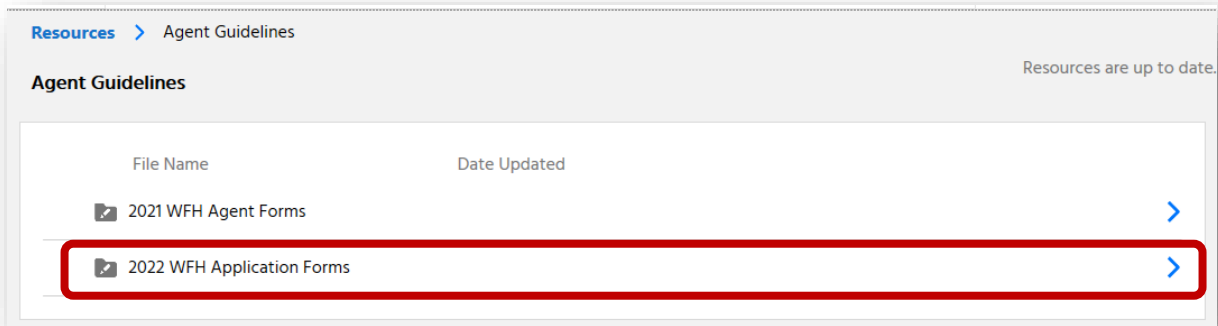


Resources

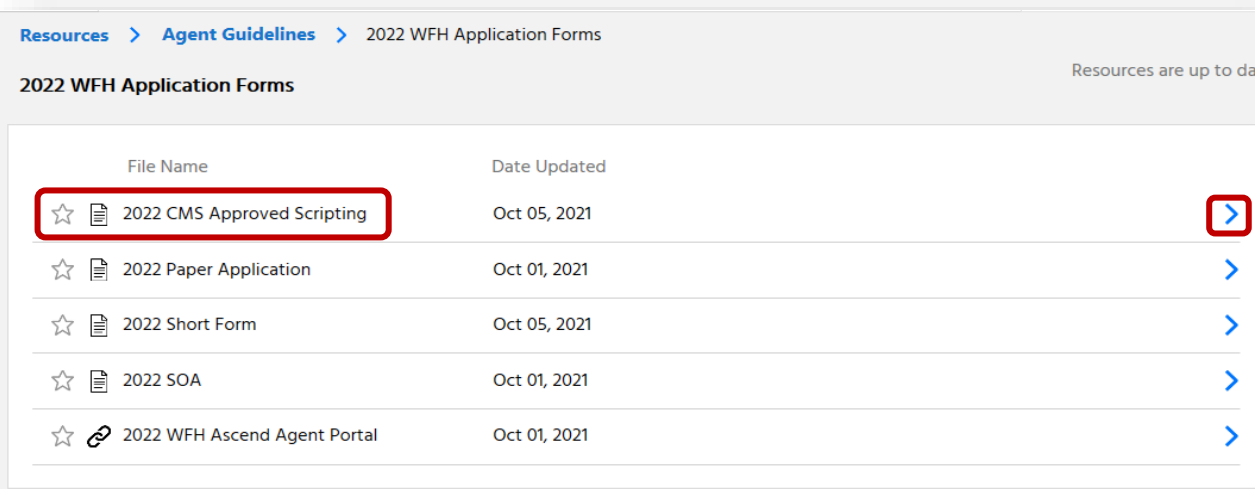
23. We have additional resources that are available in one spot so you don't have to dig around on our website or thumb through emails
24. Click on the “Resources” button from your Welcome/Home page
- There are 3 different Folders:
 - Presentation Materials:** Additional Benefit Link, ANOC & EOC's Links, Enrollment Guide/Summary of Benefits
 - Agent Guidelines:** Telephonic Scripting, Paper Application, Short Form, and SOA
 - Other:** Dental Information, Additional Benefit Flyers, Provider Directories, Formularies
25. Click on the “View Resources” link under each folder for which folder you want to view



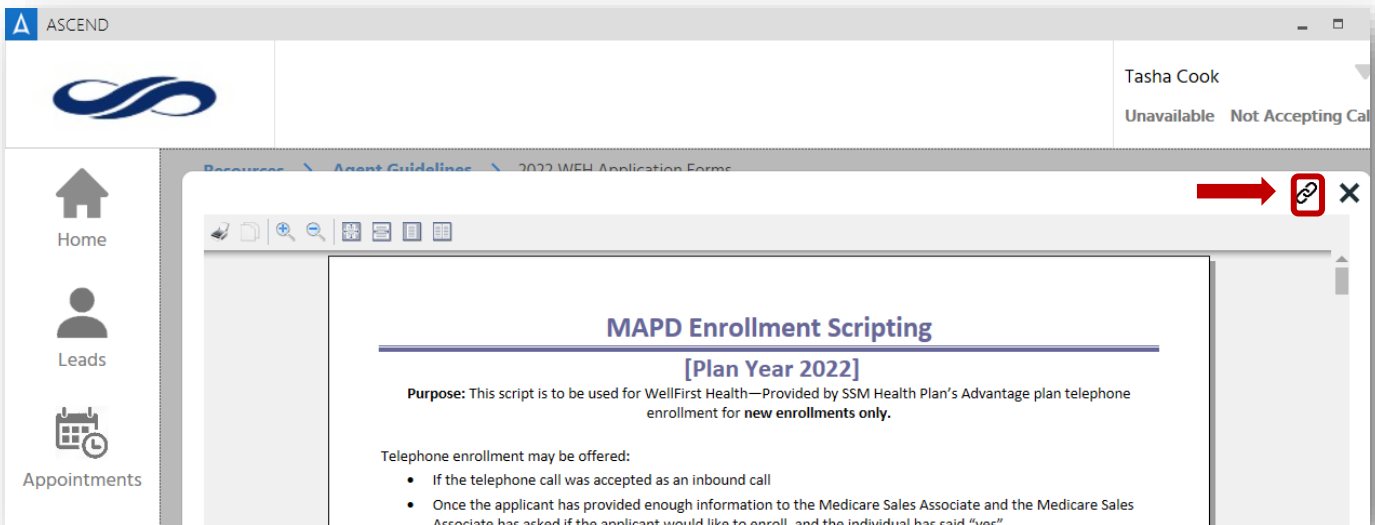
26. Click on the subfolder you want to view



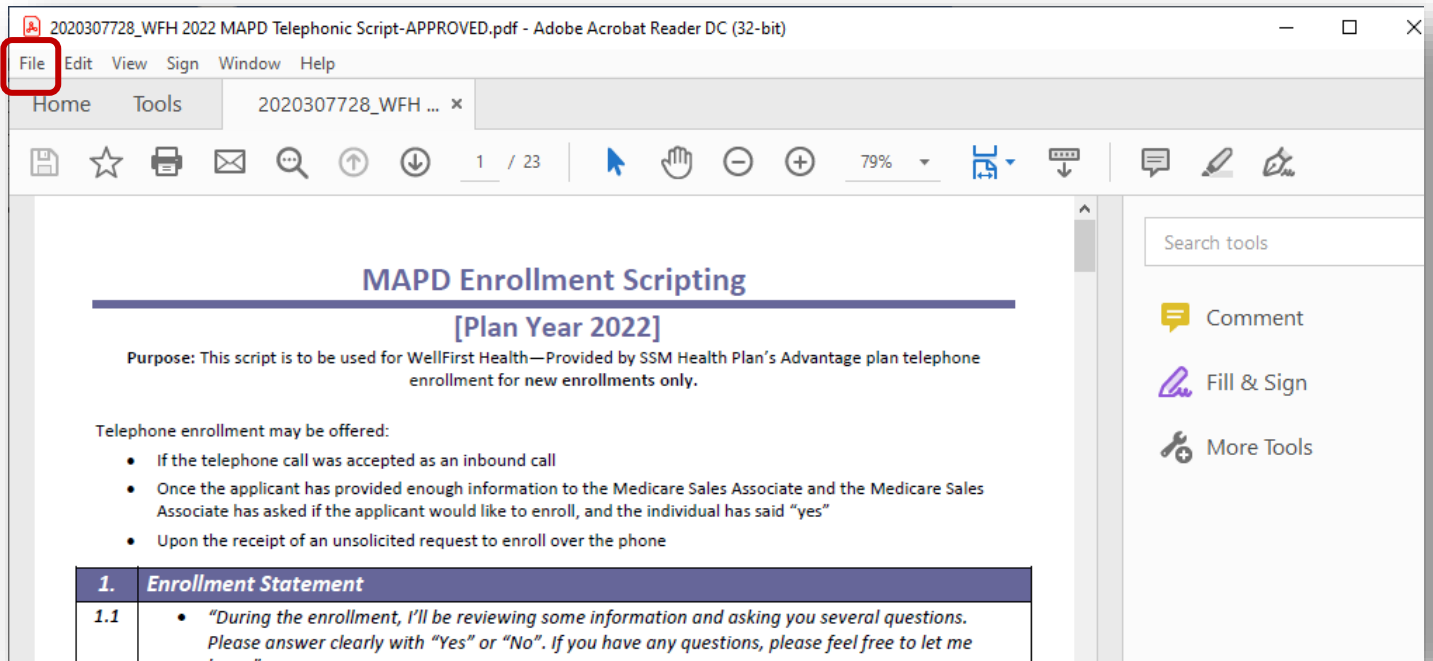
27. Click on the document you want to view by either clicking on the name of the document or the “>” arrow



28. Click on the “link” icon to open the document externally



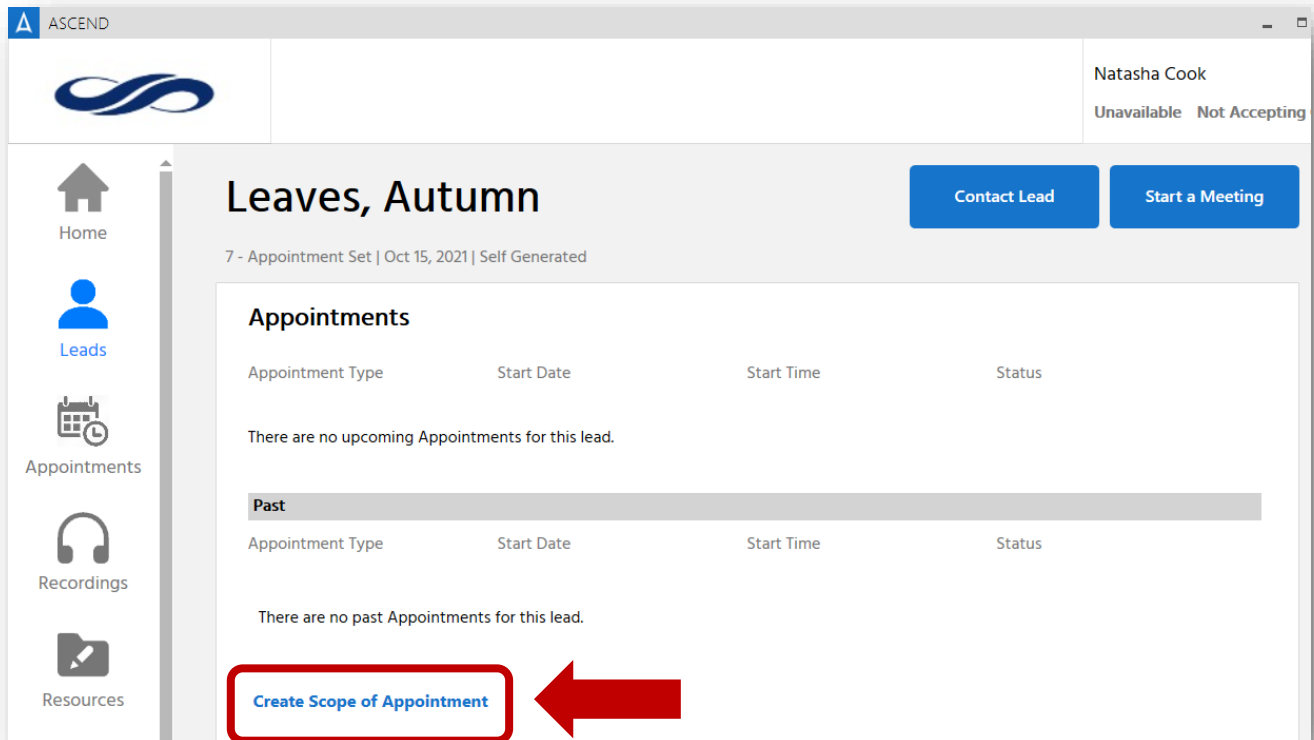
29. Next will bring up the PDF for you to save in your documents:



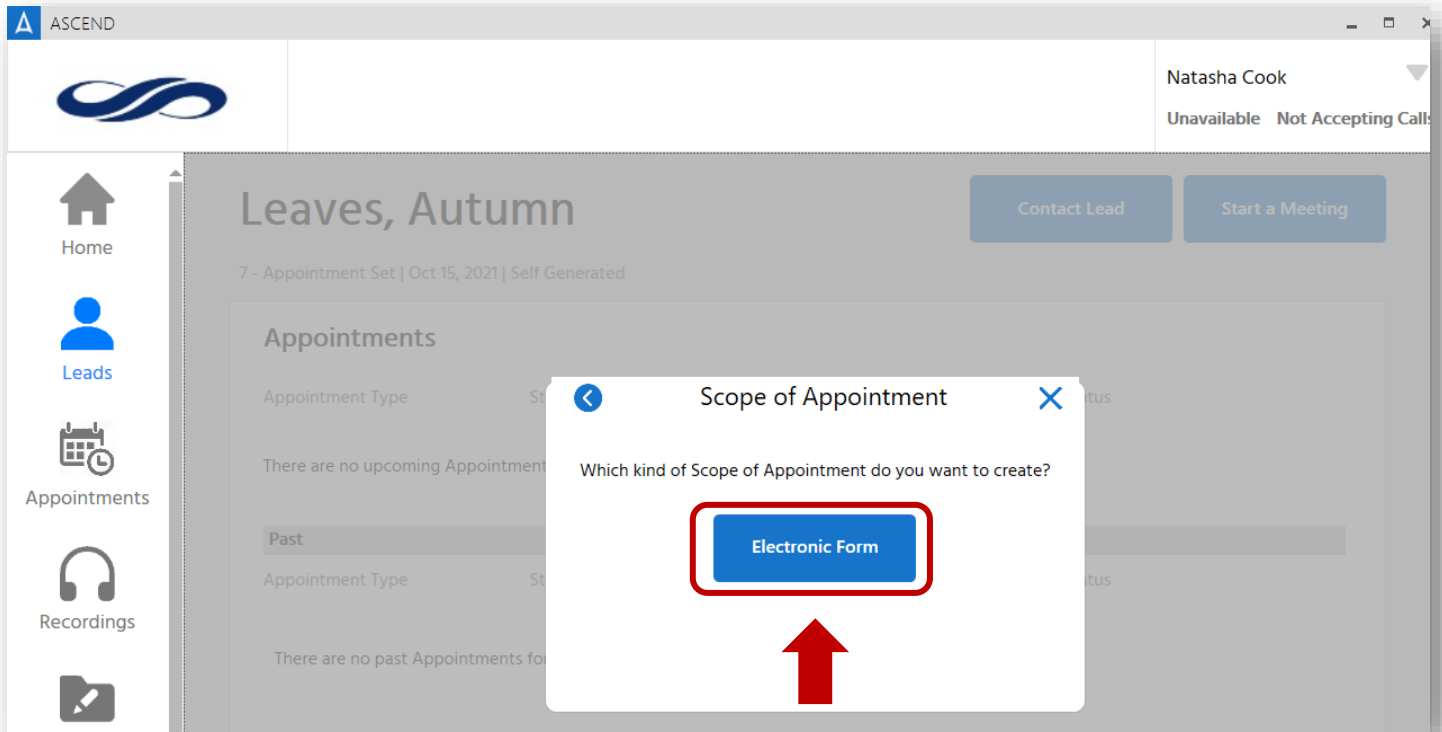
Sending an Electronic Scope of Appointment (eSOA)

30. Click on the lead you want to send an eSOA to

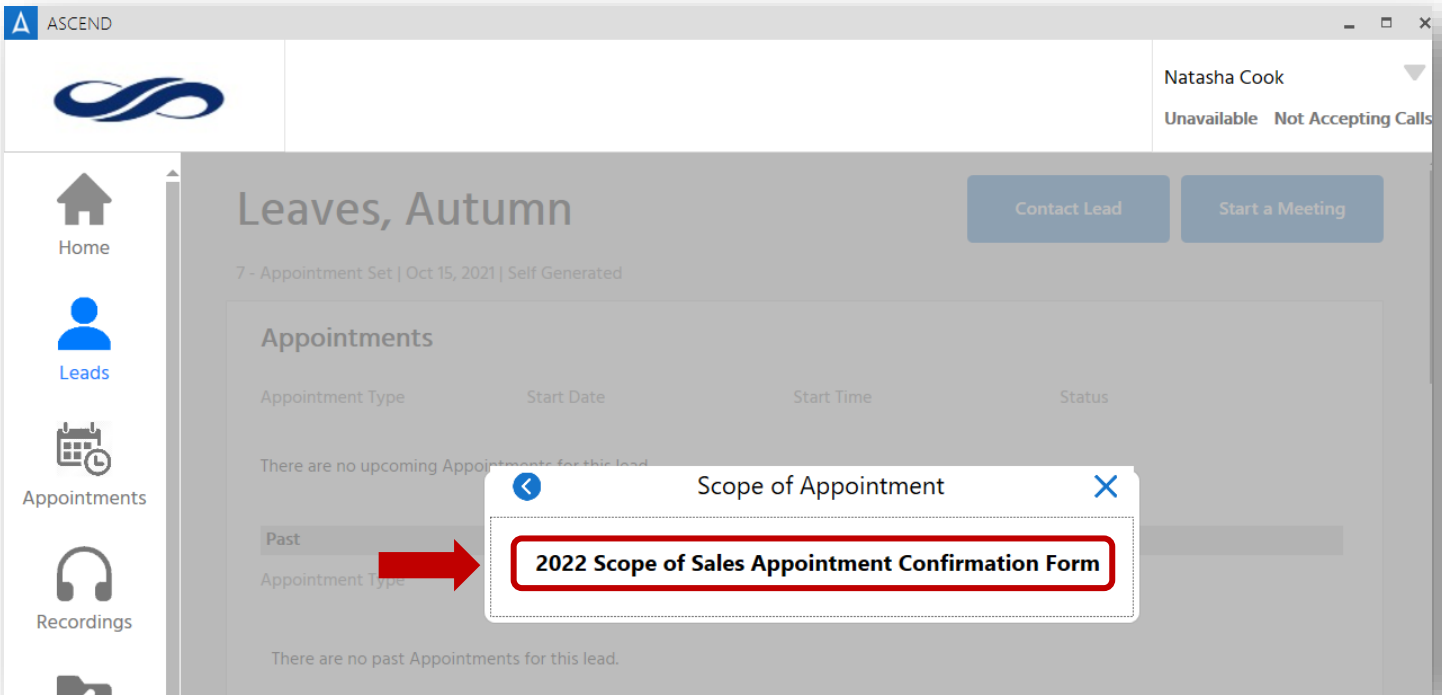
31. Once you are in your lead, click on the “Create Scope of Appointment” hyperlink



32. Click on the “Electronic Form” Button



33. Click on “2022 Scope of Sales Appointment Confirmation Form”



34. Next, click all the products that you want to discuss with your client
- Note:** You may have to “zoom” down the screen to your liking

The screenshot shows the 'Scope of Appointment' form. At the top, there is a zoom slider set to approximately 50%. Below the zoom slider, there is a scroll bar on the right side of the form. A red box highlights the zoom slider, and another red box highlights the scroll bar. A teal callout box with a white arrow pointing to the scroll bar contains the text: "You'll have to use the scroll bar to add/view the rest of the SOA".

Scope of Appointment

Zoom ◀ ● ▶

Please initial below in the box beside the plan type that you want the agent to discuss with you.

- Medicare Health Maintenance Organization (HMO) plan
A Medicare Advantage Plan that must cover all Part A and Part B health care and covers Part D prescription drug coverage. In most HMOs, you can only go to doctors, specialists or hospitals in the Plan's network except in an emergency.
- Medicare HMO Point-of-Service (HMO-POS) Plans
A Medicare Advantage Plan that provides all Original Medicare Part A and Part B health coverage and covers Part D prescription drug coverage. HMO-POS plans may allow you to get some services out of network for a higher copayment or coinsurance.
- Medicare Advantage Only (Part C)
A Medicare Advantage Plan that must cover all Part A and Part B health care. In most HMOs, you can only go to doctors, specialists or hospitals in the Plan's network except in an emergency. This plan does not include part D prescription drug coverage.

Please read and sign below.

By signing this you are agreeing to a sales meeting with a sales agent to discuss the specific types of

35. Next, you will “sign” the beneficiaries name and select the date
- Yes this is weird, but will make sense later (*I promise*)

The screenshot shows the 'Scope of Appointment' form with the signature and date fields highlighted. The 'Beneficiary Signature*' field contains the text 'Autumn Leaves' and the 'Date*' field contains '10/15/2021'. Below these fields, there are several input fields for personal information.

Scope of Appointment

Zoom ◀ ● ▶

products you initialed above. The person that will be discussing Plan options with you is not employed by the Federal government but is employed or contracted by a Medicare Health Plan or Prescription Drug Plan, and they may be compensated based on your enrollment in a Plan.

Signing this does NOT affect your current enrollment, nor will it enroll you in a Medicare Advantage Plan, Prescription Drug Plan, or other Medicare Plan

Beneficiary Signature* Autumn Leaves Date* 10/15/2021

If you are the authorized representative, you must sign above and provide the following information:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Home Phone Number	<input type="text"/>	Address	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>
ZipCode	<input type="text"/>	County	<input type="text"/>
Relationship to Enrollee	<input type="text"/>		

OFFICE USE ONLY
(to be completed by Agent, please print)

36. Next, sign your name and date of the appointment and reason of taking the SOA

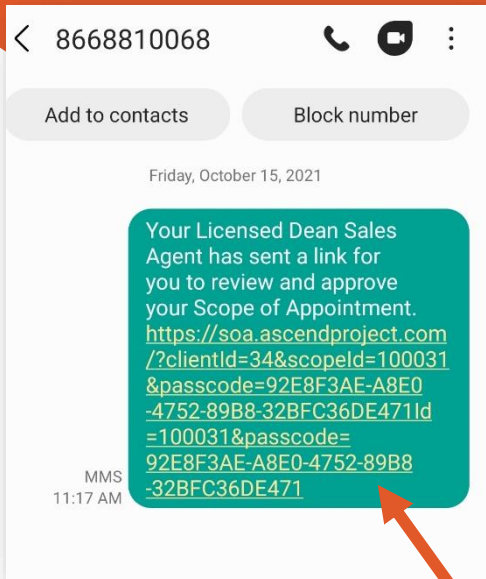
The screenshot shows a mobile application interface for a "Scope of Appointment" form. At the top, there is a zoom slider and a close button (X). The form contains several input fields for beneficiary information: Beneficiary First Name* (Autumn), Beneficiary Last Name* (Leaves), Beneficiary phone* (6083938670), Beneficiary Address (1277 Deming way), Beneficiary City (Madison), Beneficiary State (Wisconsin), Beneficiary ZipCode (53717), and Beneficiary County (Dane). Below these are fields for Agent Signature* (Natasha Cook) and Date of Appointment* (10/15/2021). A section titled "REASON SOA WAS NOT COMPLETED PRIOR TO APPOINTMENT (please check all that apply)" contains four checkboxes: Unplanned attendee, Walk-in (checked), New SOA required, and Other. There is also a text input field for "If Other, Please Explain:". The Agent Signature and Date of Appointment fields, along with the "Walk-in" checkbox, are highlighted with red boxes.

37. Scroll down to the bottom and click on the "Submit" button

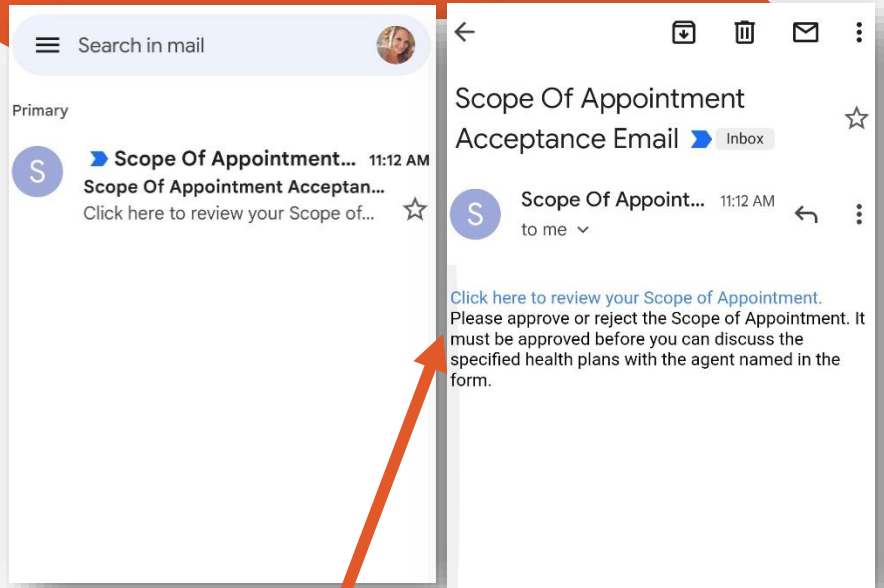
This screenshot shows the bottom portion of the "Scope of Appointment" form. The "REASON SOA WAS NOT COMPLETED PRIOR TO APPOINTMENT" section is visible, with the "Walk-in" checkbox checked. Below this are checkboxes for "Send Email on Submit" and "Send Text on Submit", both of which are checked. At the bottom, there are three buttons: "Cancel", "Submit", and a "Submit" button highlighted with a red box and a red arrow pointing to it from the left. The "Submit" button is a blue rectangle with white text.

38. Your client will get the below notifications:

Emailed eSOA Notification



Emailed eSOA Notifications



Your Client will click the hyperlinks in their email or text

39. Your client will click on the hyperlinks and the content will look as follows:

Do you approve of this Scope of Appointment?

Scope of Appointment Confirmation Form

The Centers for Medicare and Medicaid Services requires agents to document the scope of a marketing appointment prior to any face-to-face sales meeting to ensure understanding of what will be discussed between the agent and the Medicare beneficiary (or their authorized representative). All information provided on this form is confidential and should be completed by each person with Medicare or his/her authorized representative. To be completed by person with Medicare or Authorized Representative.

Please initial below in the box beside the plan type that you want the agent to discuss with you.

- Medicare Health Maintenance Organization (HMO) plan A Medicare Advantage Plan that must cover all Part A and Part B health care and covers Part D prescription drug coverage. In most HMOs, you can only go to doctors, specialists or hospitals in the Plan's network except in an emergency.

- Medicare HMO Point-of-Service (HMO-POS) Plans A Medicare Advantage Plan that provides all Original Medicare Part A and Part B health coverage and covers Part D prescription drug coverage. HMO-POS plans may allow you to get some services out of network for a higher copayment or coinsurance.
- Medicare Advantage Only (Part C) A Medicare Advantage Plan that must cover all Part A and Part B health care. In most HMOs, you can only go to doctors, specialists or hospitals in the Plan's network except in an emergency. This plan does not include part D prescription drug coverage.

Please read and sign below.

By signing this you are agreeing to a sales meeting with a sales agent to discuss the specific types of products you initialed above. The person that will be discussing Plan options with you is not employed by the Federal government but is employed or contracted by a Medicare Health Plan or Prescription Drug Plan, and they may be compensated based on your enrollment in a Plan.

Signing this does NOT affect your current enrollment, nor will it enroll you in a Medicare Advantage Plan, Prescription Drug Plan, or other Medicare Plan.

Beneficiary Signature	Date
Autumn Leaves	10/15/2021

If you are the authorized representative, you must sign above and provide the following information:

First Name	Last Name
Home Phone Number	Address
City	State
ZipCode	County
Relationship to Enrollee	

OFFICE USE ONLY (to be completed by Agent, please print)

Agent First Name	Agent Last Name
Natasha	Cook
Agent phone	Agent ID#
6083938670	17489910

- 40. If the SOA looks good to your client they can scroll to the bottom of the SOA and click the “Yes” button
- 41. They will get a notification that the SOA was approved

Agent First Name	Agent Last Name
Natasha	Cook
Agent phone	Agent ID#
6083938670	17489910
Beneficiary First Name	Beneficiary Last Name
Autumn	Leaves
Beneficiary phone	Beneficiary Address
6083938670	1277 Deming way
Beneficiary City	Beneficiary State
Madison	Wisconsin
Beneficiary ZipCode	Beneficiary County
53717	Dane
Agent Signature	Date of Appointment
Natasha Cook	10/15/2021

REASON SOA WAS NOT COMPLETED PRIOR TO APPOINTMENT (please check all that apply)

Unplanned attendee

Walk-in

New SOA required

Other

If Other, Please Explain:

Autumn	Leaves
Beneficiary phone	Beneficiary Address
6083938670	1277 Deming way
Beneficiary City	Beneficiary State
Madison	Wisconsin
Beneficiary ZipCode	Beneficiary County
53717	Dane
Agent Signature	Date of Appointment
Natasha Cook	10/15/2021

REASON SOA WAS NOT COMPLETED PRIOR TO APPOINTMENT (please check all that apply)

Unplanned attendee

Walk-in

New SOA required

Other

If Other, Please Explain:

- 42. If they decline the SOA, they will get the below notification and a new SOA will need to be sent to them

Autumn	Leaves
Beneficiary phone	Beneficiary Address
6083938670	1277 Deming way
Beneficiary City	Beneficiary State
Madison	Wisconsin
Beneficiary ZipCode	Beneficiary County
53717	Dane
Agent Signature	Date of Appointment
N C	10/15/2021

REASON SOA WAS NOT COMPLETED PRIOR TO APPOINTMENT (please check all that apply)

Unplanned attendee

Walk-in

New SOA required

Other

If Other, Please Explain:

43. If you go back into your lead, you will see if the SOA has been accepted or declined

The screenshot shows the ASCEND software interface. At the top left is the ASCEND logo. On the right, the user's name 'Natasha Cook' and status 'Unavailable Not Accepting' are visible. A sidebar on the left contains navigation icons for Home, Leads, Appointments, Recordings, and Resources. The main content area is titled 'Leaves, Autumn' and includes buttons for 'Contact Lead' and 'Start a Meeting'. Below this, it says '7 - Appointment Set | Oct 15, 2021 | Self Generated'. A table titled 'Appointments' has columns for Appointment Type, Start Date, Start Time, and Status. Two rows are highlighted with a red box: one for 'Accepted' and one for 'Declined' status, both for 'Scope of Appointment' on 'Oct 15, 2021' at '12:00 AM'. Below the table is a section for 'Past' appointments, which is currently empty.

Appointment Type	Start Date	Start Time	Status
Scope of Appointment	Oct 15, 2021	12:00 AM	Accepted
Scope of Appointment	Oct 15, 2021	12:00 AM	Declined

44. Once the SOA has been approved you can start a meeting with that lead!

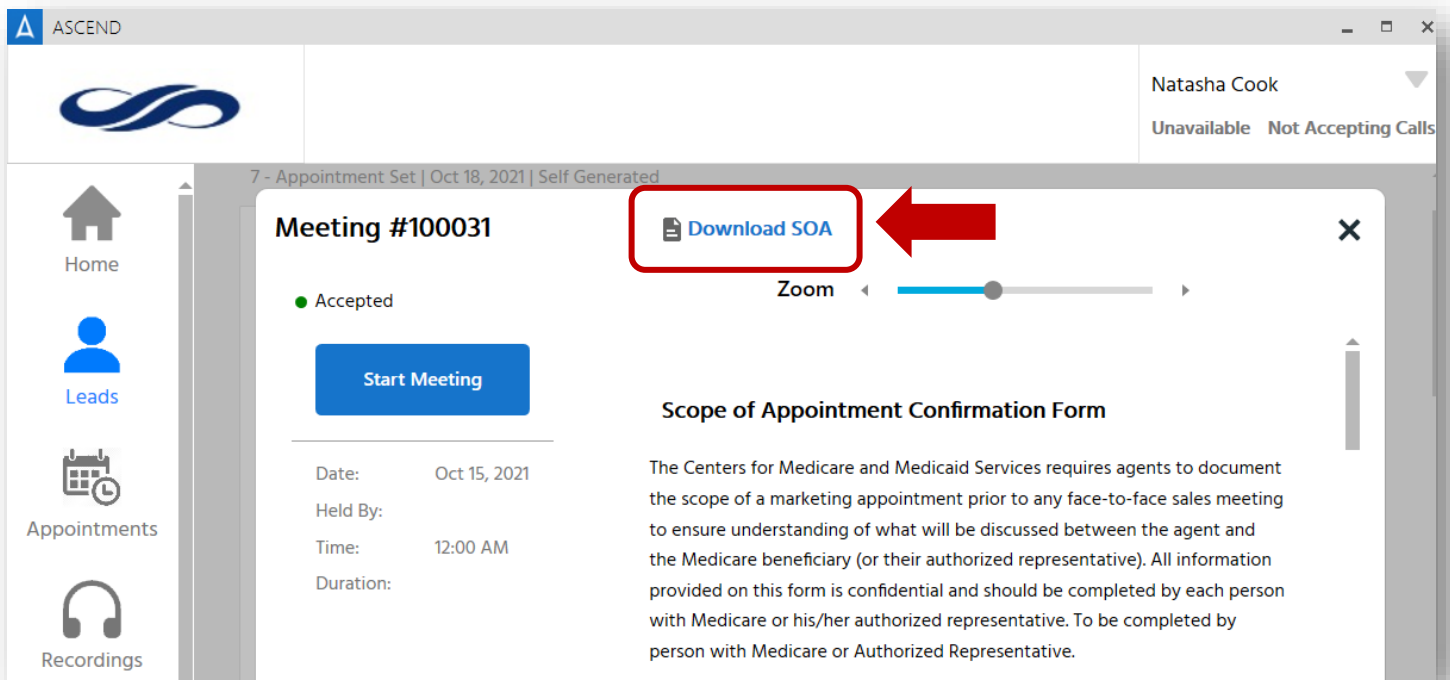
How to access eSOA's

45. Go into your lead that you sent the eSOA to

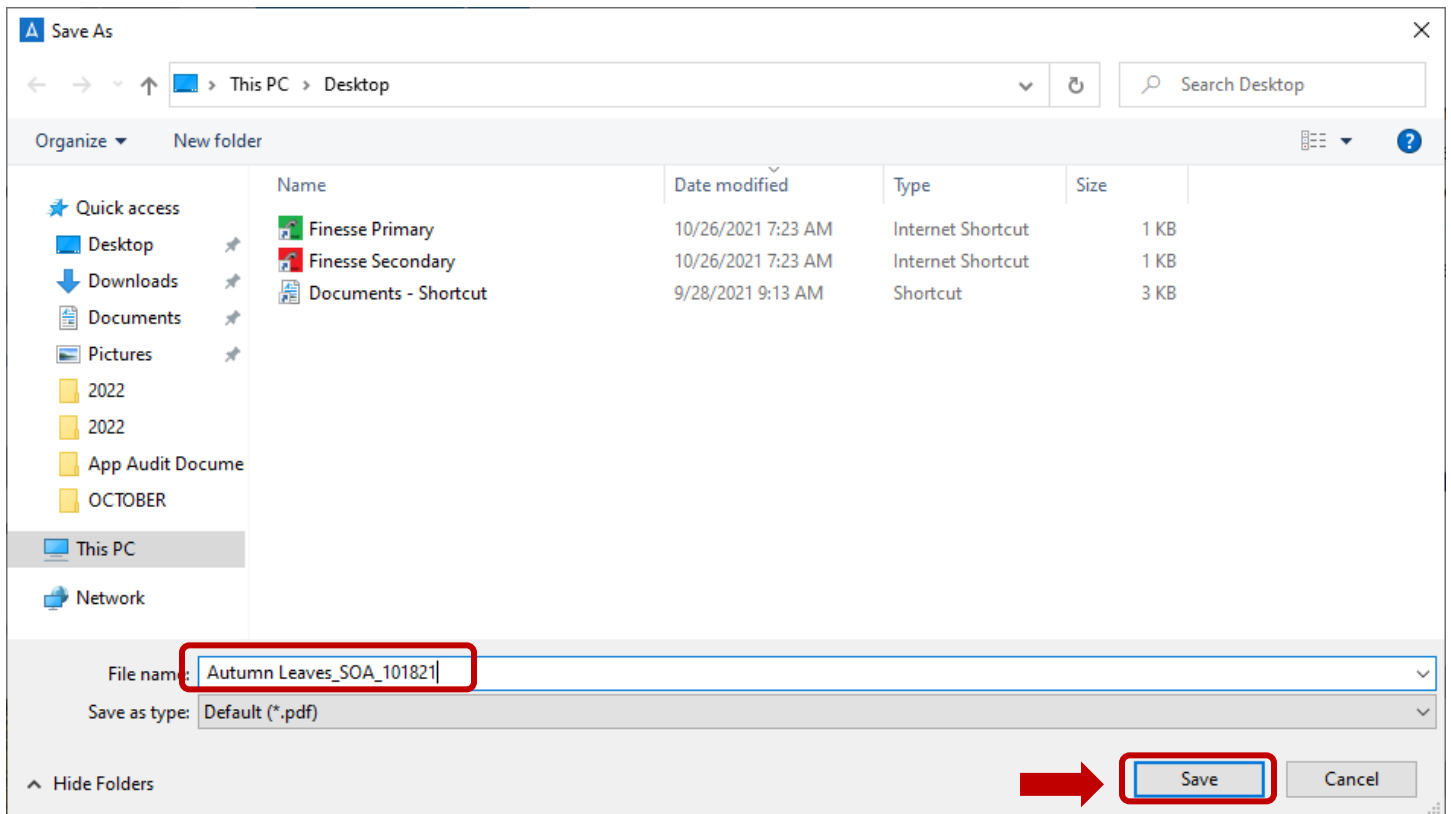
46. Under "Appointments", click on the approved Scope of Appointment

This screenshot is similar to the previous one but shows a different lead's appointment status. The title is '7 - Appointment Set | Oct 18, 2021 | Self Generated'. The 'Appointments' table is currently empty with the message 'There are no upcoming Appointments for this lead.' Below it, the 'Past' section contains two rows, with the 'Accepted' row highlighted by a red box. A 'Create Scope of Appointment' link is visible at the bottom of the table.

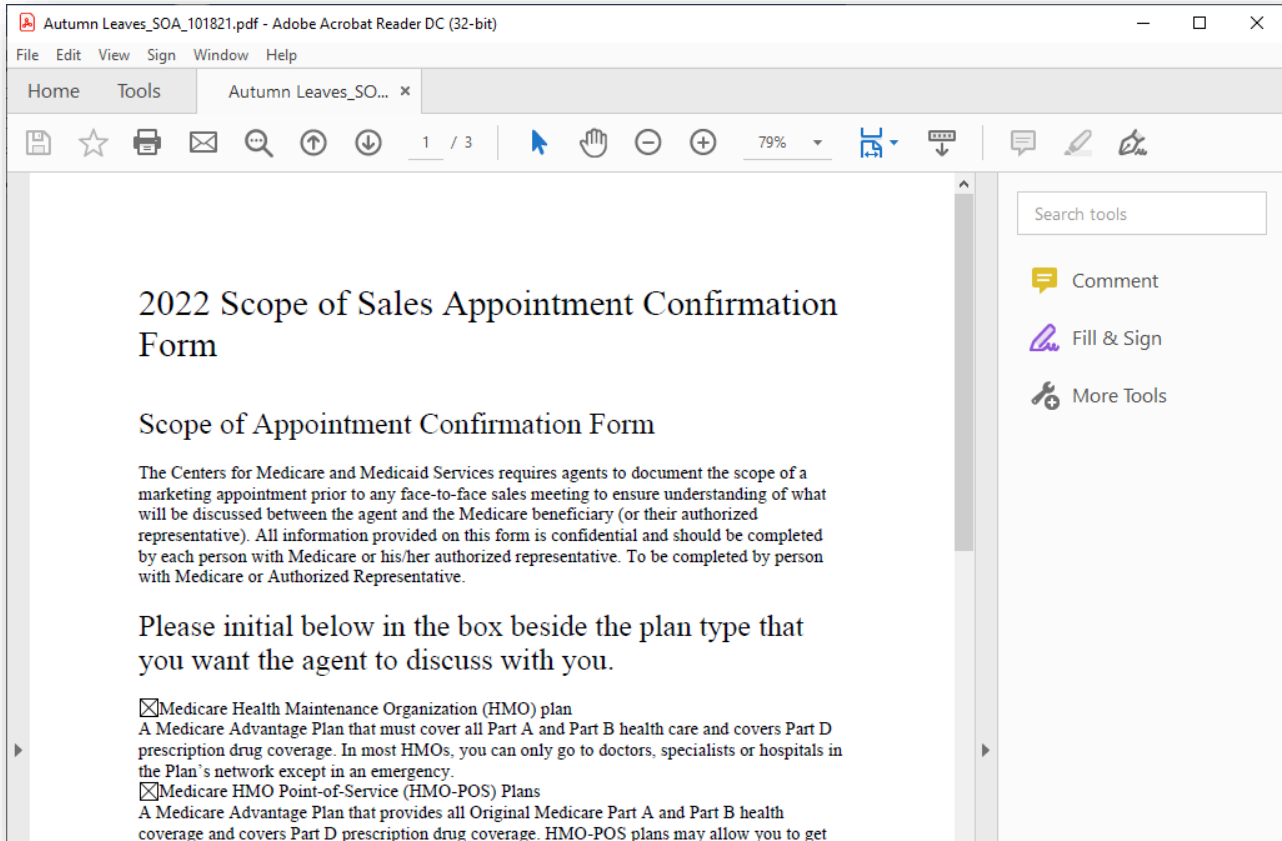
Appointment Type	Start Date	Start Time	Status
Scope of Appointment	Oct 15, 2021	12:00 AM	Accepted
Scope of Appointment	Oct 15, 2021	12:00 AM	Declined



48. Your documents folder will pop up and you can chose the location and the file name of the SOA and click on the "Save" button

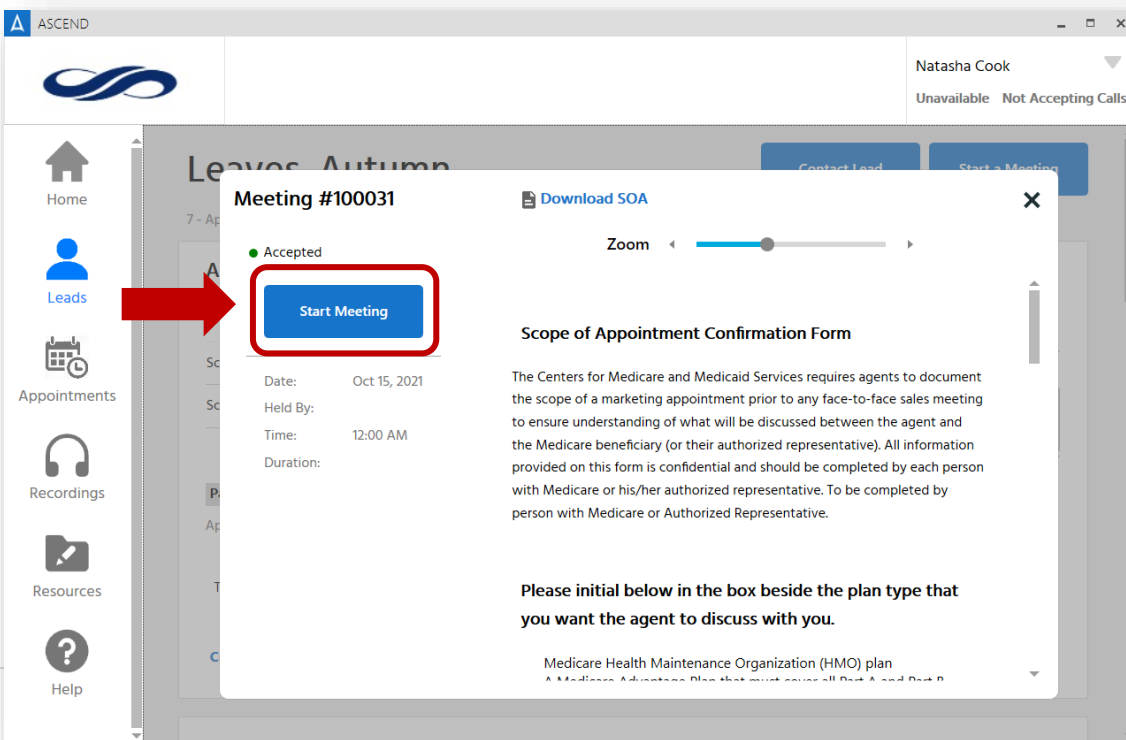


49. The document will be saved as a PDF. Dean Health Plan Administrators have access to view all eSOA's so you don't have to worry about sending the eSOA to us

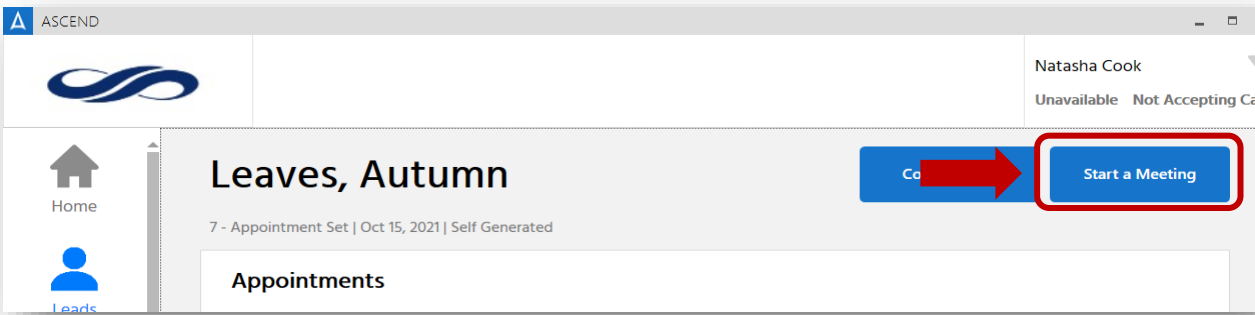


Starting a Meeting

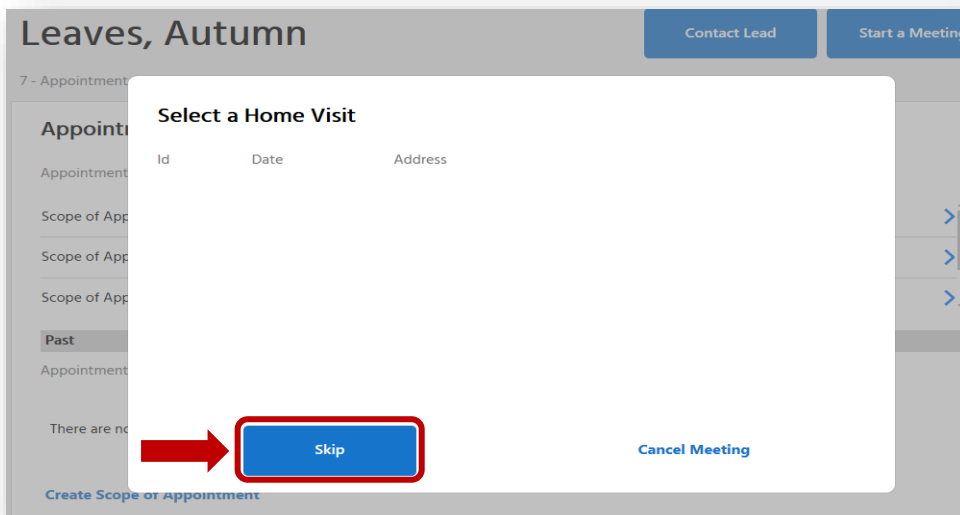
50. Starting from step 37, click on the “Start Meeting” button



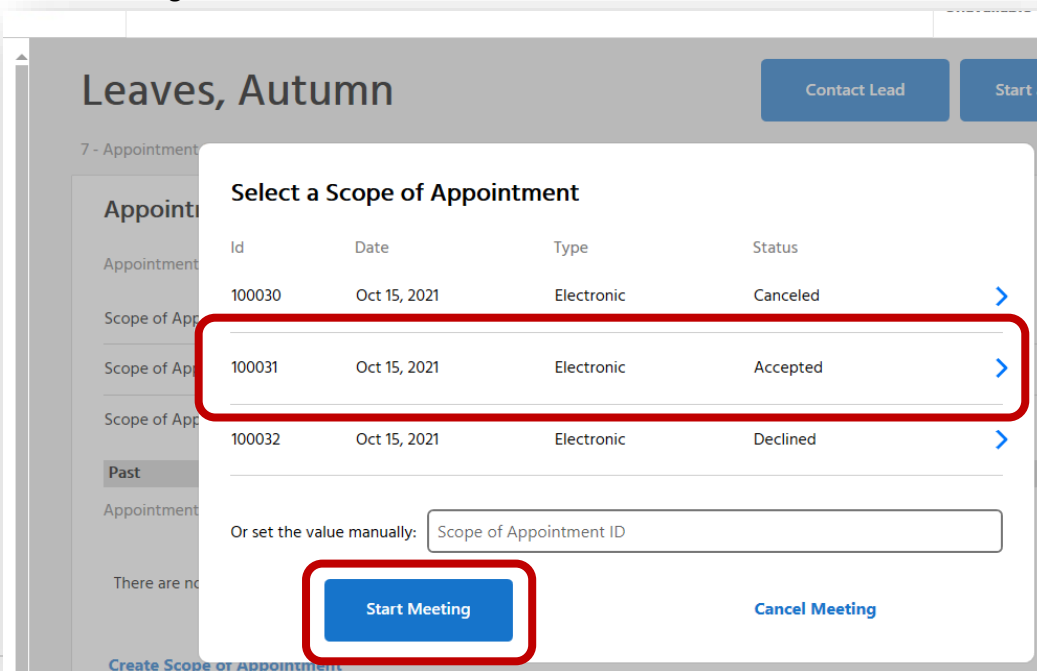
51. If you have already obtained an SOA and want to start a meeting directly from the lead, click on the lead that you have your meeting set with and click on the **“Start Meeting”** button as well



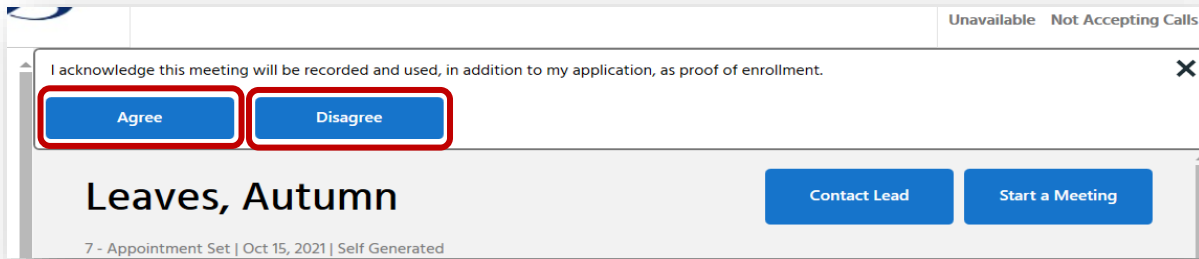
52. Skip the **“Select a Home Visit”** section – we don’t use this feature



53. Next, select the approved eSOA, if you used this feature for your client; other click the **“Start Meeting”** button without selecting an SOA

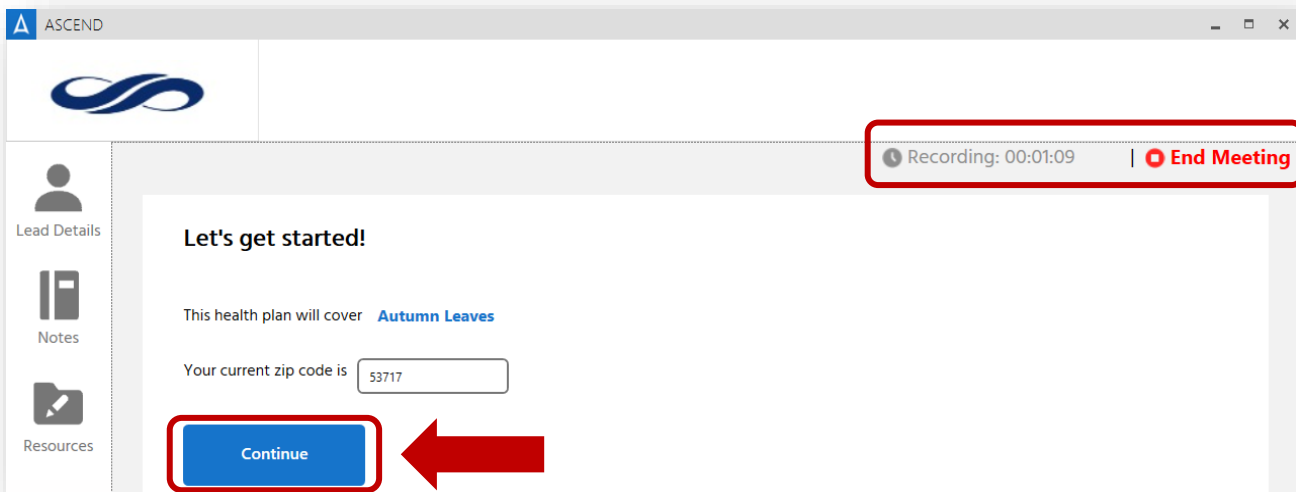


54. The next pop up will be the **Recording Disclaimer**, here you would click on **“Agree”** or **“Disagree”**
- a. This is not a requirement; however, its recommended to cover yourself should your Client file a complaint or grievance
 - i. Click **Agree**: If you want your meeting recorded simply ask your client: *“Is it ok if our appointment today is recorded?”*
 1. Most of the time they will say yes
 2. You might get someone who declines having the appointment recorded
 - i. Click **Disagree**: If you don’t want your appointment recorded or your client states that they don’t want the appointment recorded



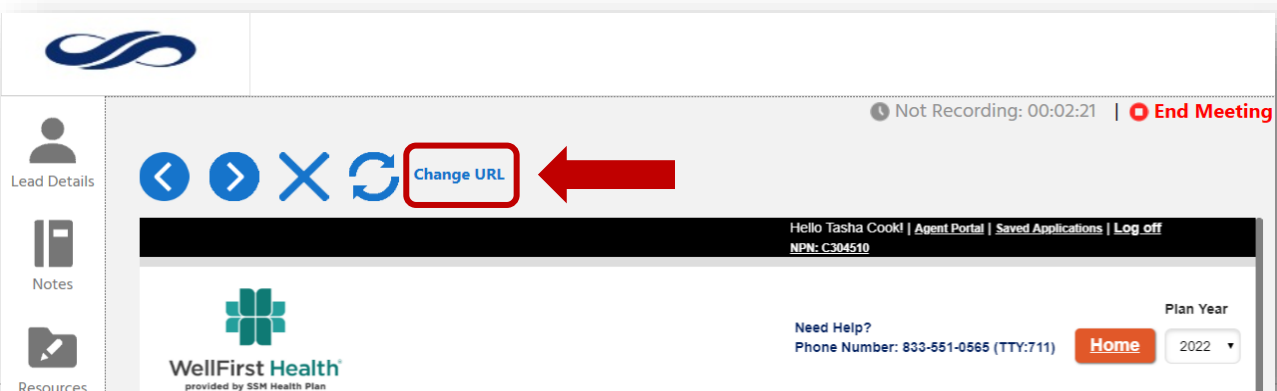
55. You will see that the meeting has started in the upper right-hand corner

56. Next, make sure the right zip code populated and click on the **“Continue”** button

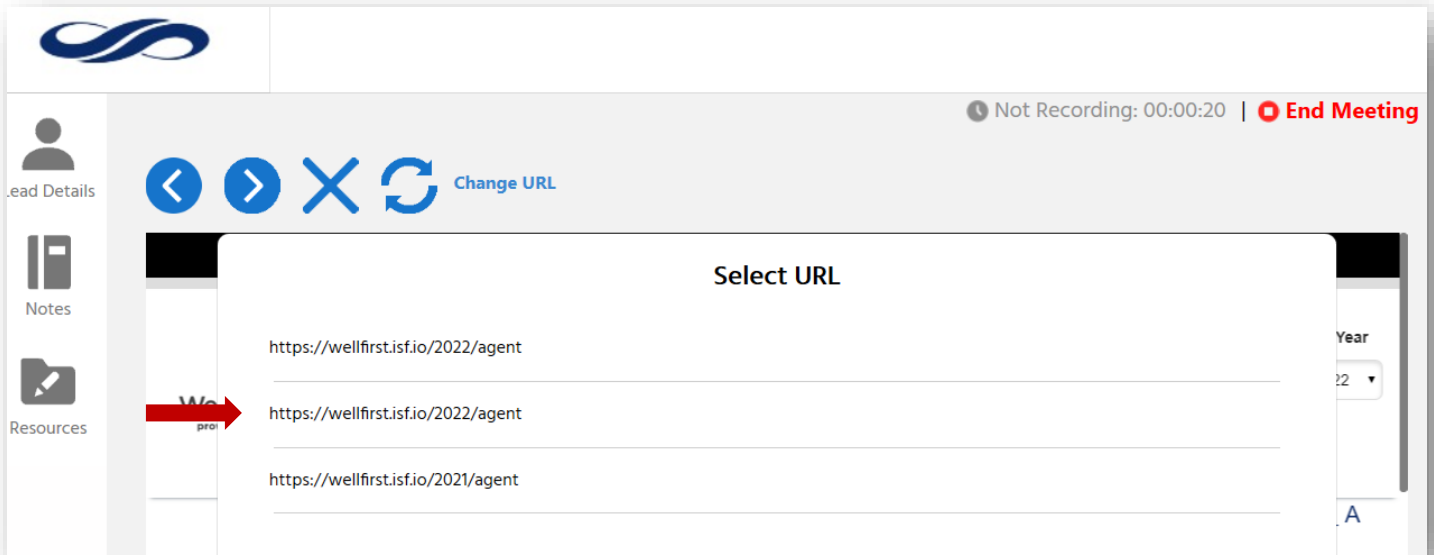


Switching Plan Years

57. Depending on what years you are certified to sell, you may need to change between plan years depending on what plan year your client needs coverage for
58. If you have someone who needs a different plan year, click on **“Change URL”** and click the appropriate year
- a. The most current plan year will be the default



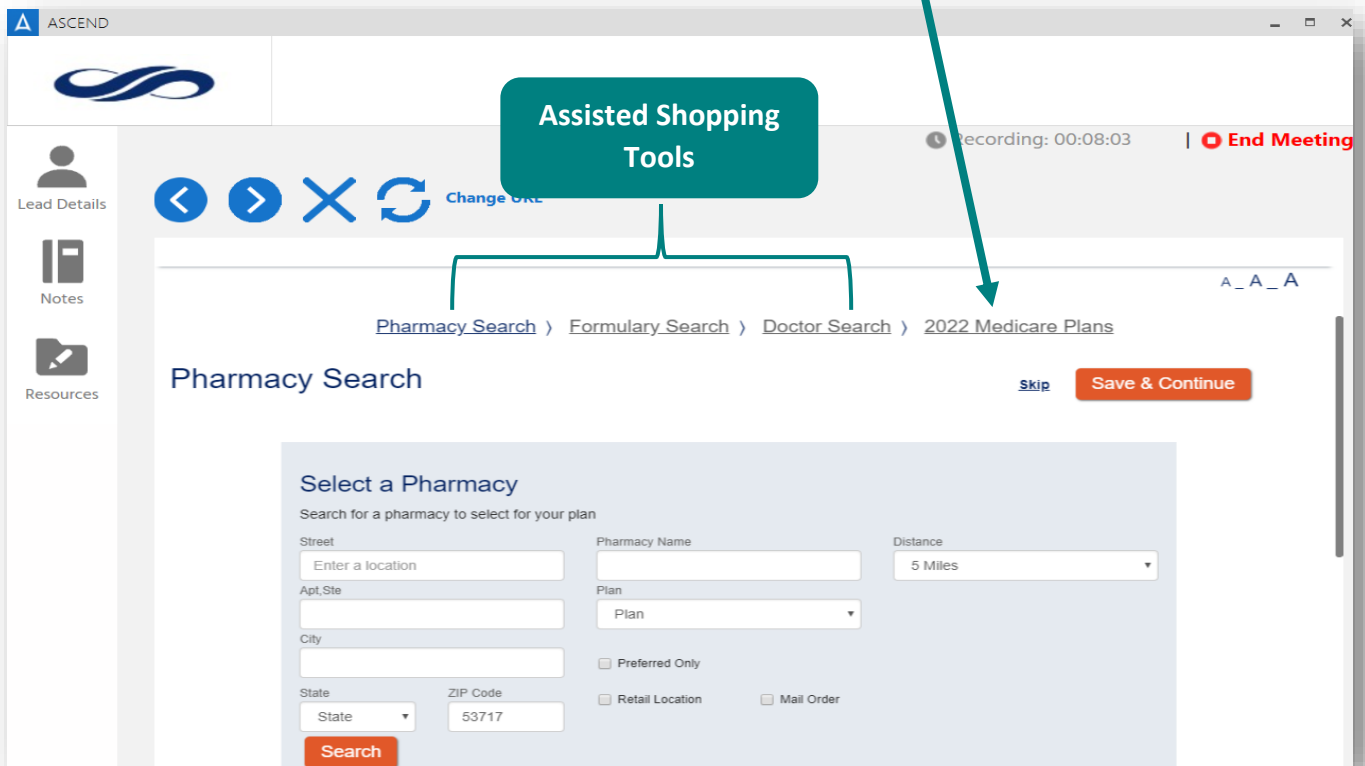
- 59. From the drop down click on the appropriate year
 - a. Please note that you will only see the years that you are certified to sell for



- 60. You will then see the plans and details available for that year

Assisted Shopping Tools

- 61. If you wish to use the assisted shopping tools (i.e. Pharmacy Search, Formulary Search (Rx Look-up), and Doctor Search features) you can enter your clients information
- 62. If you want to skip the Assisted Shopping Tools, click on “**2022 Medicare Plans**” to go right to the plans to compare/enroll



Pharmacy Search

63. You can search our pharmacy directory right from the application

a. You can change the mile range, show only preferred pharmacies, retail locations, or mail order

64. After you have your search parameters entered, click on the “Search” button

The screenshot shows a web interface for a Pharmacy Search. At the top, there are navigation links: [Pharmacy Search](#) > [Formulary Search](#) > [Doctor Search](#) > [2022 Medicare Plans](#). Below these is the title "Pharmacy Search" and two buttons: "Skip" and "Save & Continue". The main section is titled "Select a Pharmacy" and contains a search form. The form has several input fields: "Street" (with placeholder "Enter a location"), "Apt, Ste", "City", "State" (a dropdown menu), "ZIP Code" (with value "63141"), "Pharmacy Name", "Plan" (a dropdown menu), and "Distance" (a dropdown menu with value "5 Miles"). There are also three checkboxes: "Preferred Only", "Retail Location", and "Mail Order". A red arrow points to a red-bordered "Search" button at the bottom of the form.

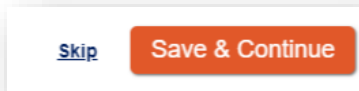
65. From the list, all preferred pharmacies will be indicated with a star icon

66. Click the pharmacy you want to check your clients drugs against

The screenshot displays search results for pharmacies in Saint Louis, MO 63141. The results are listed in a table with columns for pharmacy name, address, and distance. A red arrow points to the "WALGREENS" entry, which is highlighted in blue and has a star icon next to its name. A callout box with a star icon and the text "Preferred Pharmacy Indicator" points to this star. To the right of the list is a map view showing the location of the pharmacies. The map includes labels for "Barnes-Jewish West County Hospital" and "Saint Louis Priory School". A red arrow points to a red pin on the map, which is circled in red.

Pharmacy Name	Address	Distance
CVS PHARMACY #18010	12756 Olive Blvd Saint Louis, MO 63141	1.22 miles
MEDSTAFFPC	12633 Olive Blvd Saint Louis, MO 63141	1.23 miles
MERCY PHARMACY SERVICES LLC	12595 Olive Blvd Creve Coeur, MO 63141	1.27 miles
DIERBERGS HERITAGE PLACE PHARMACY	12595 Olive Blvd Saint Louis, MO 63141	1.27 miles
WALGREENS	12661 Olive Blvd Creve Coeur, MO 63141	1.28 miles
ST LUKE'S ADVANCED CARE PHARMACY	232 S Woods Mill Rd Chesterfield, MO 63017	1.54 miles

67. Click the **“Save and Continue”** button from either the bottom or top of the page

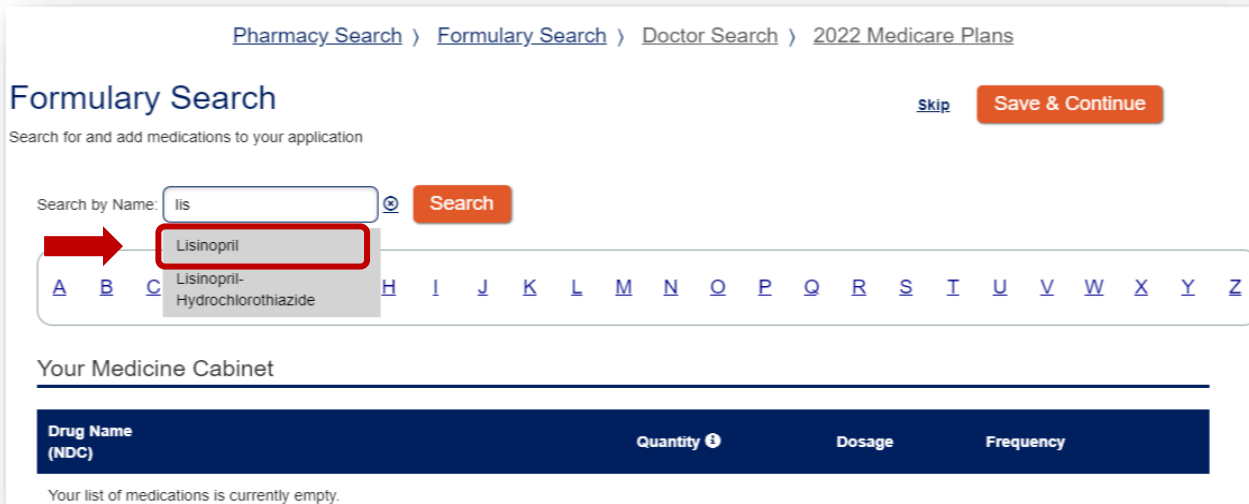


Formulary Search

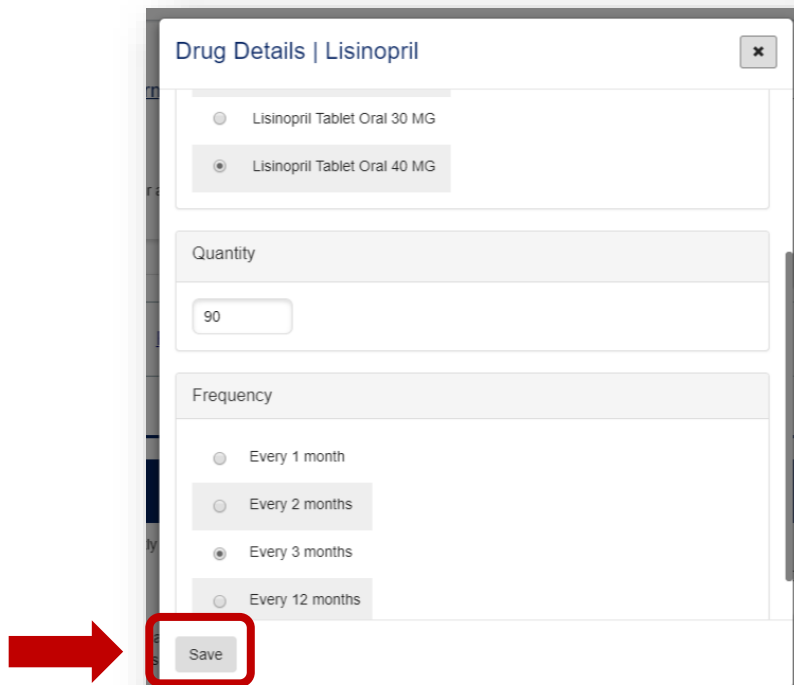
68. The formulary search, allows you to enter your clients medications to see how they price out on our plans

69. In the search field, start adding your clients drugs by typing in the search box

70. Click on the drug in question



71. Next, choose the appropriate dosage, quantity, and frequency and click the **“Save”** button



72. Continue to keep adding drugs until they are all showing in their “**Medicine Cabinet**”

Your Medicine Cabinet			
Drug Name (NDC)	Quantity	Dosage	Frequency
Lisinopril 00143127001	90	Lisinopril Tablet Oral 40 MG	Every 90 days Edit Remove
Timolol Maleate Ocusol 24208049605	1 X Plas Cont of 60 Solution	Timolol Maleate Ocusol Solution Ophthalmic 0.5 %	Every 90 days Edit Remove

73. Again, click the “**Save and Continue**” button from either the bottom or top of the page

Doctor Search

74. Again, within the application you can search providers

75. If you click the “**Advanced Search**” search button you can search PCP and Specialists

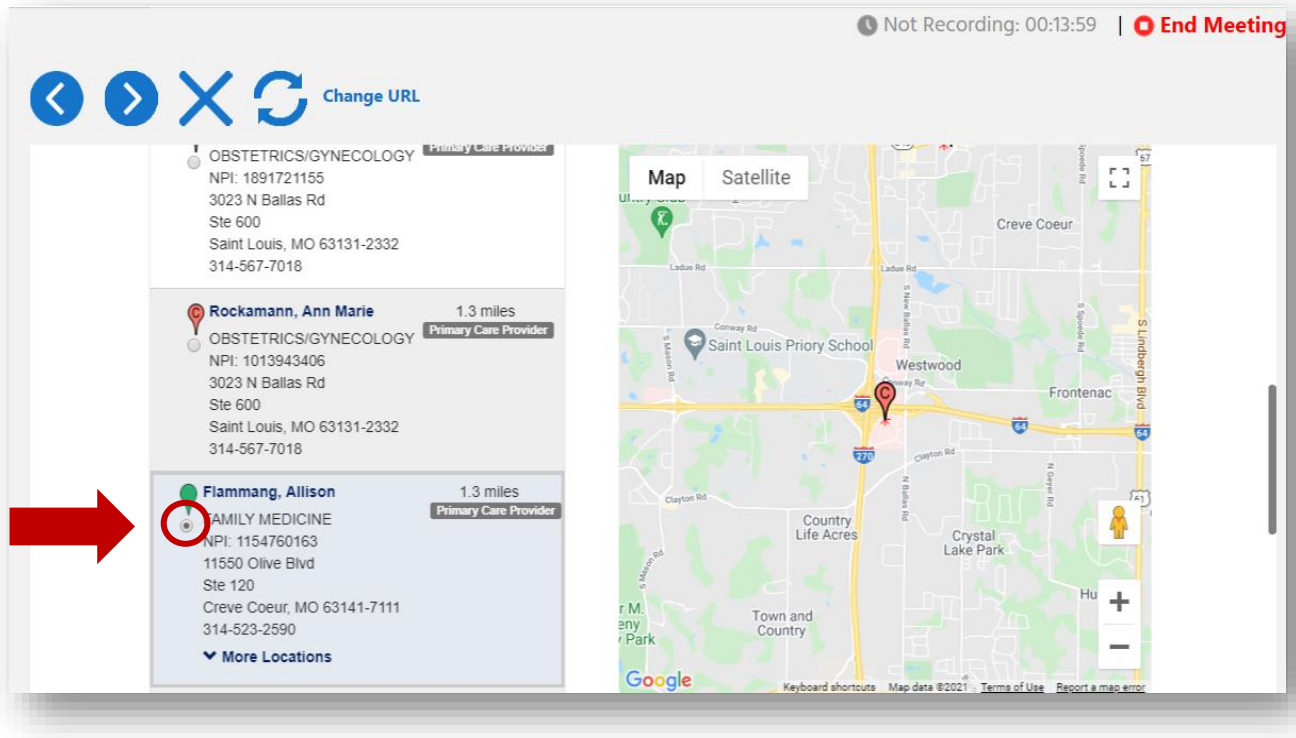
76. If you want to look up only PCP’s choose “**Yes**” under the PCP section

a. If you add a PCP provider it will transfer over to the application

77. If you are looking up Specialists, choose “**No**” under the PCP section and start typing in the specialty and click enter after you have typed in the specialty or you click on the “**Search**” button after your criteria has been added

The screenshot shows a form titled "Doctor's Details" with several sections: "Gender" (dropdown), "New Patients" (dropdown), "Services & Coverage" (Primary Care Provider, In/Out of Network, Plan Name dropdowns), "Specialty" (text input), and "Location" (Street, Apt, Ste, City, State dropdown). A red box highlights the "Primary Care Provider" dropdown menu, which is currently set to "Yes". Another red box highlights the "Search" button at the bottom right of the form, with a red arrow pointing to it from the right.

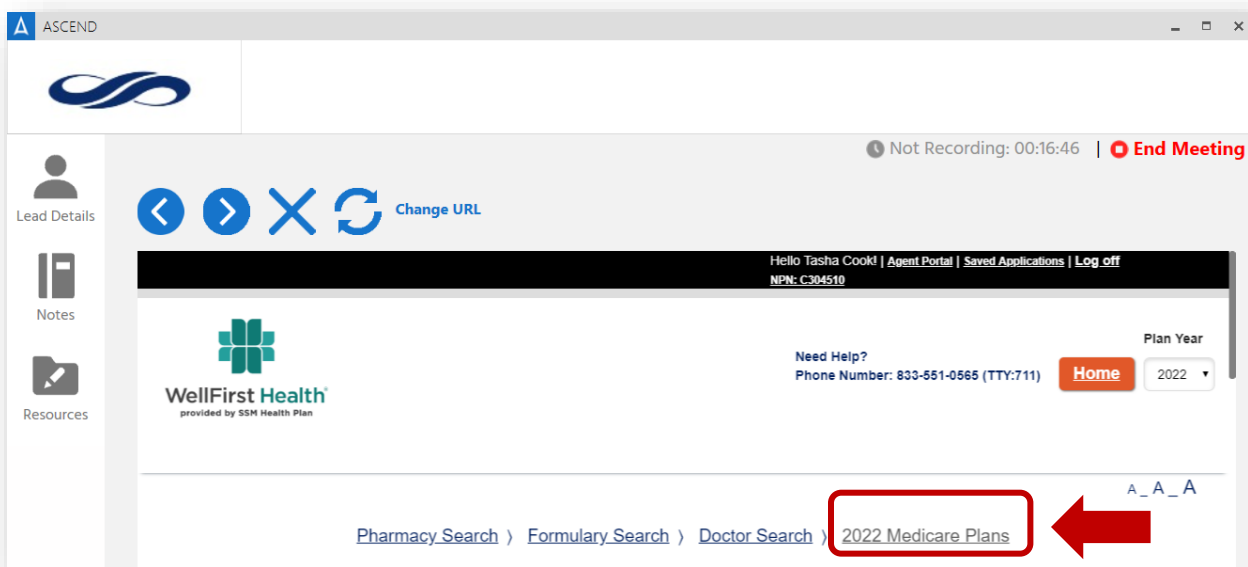
78. For PCP add, click on the radio button next to the PCP that the customer uses. Again, this will transfer over to the application



79. Again, click the "Save and Continue" button from either the bottom or top of the page

Quoting & Enrolling

80. If not using the Assisted Shopping tools click on the "2022 Medicare Plans" tab



Compare Plans

81. You can click on the radio button next to each plan that your client is interested in to do a side-by-side comparison and then click on the “Compare” button at the top of the screen

Select for Comparison

Compare

ZIP Code: 63141 Update

Here is a detailed list of plans available in your area. Check the box next to the plans you wish to compare and then click on the Compare button. This will allow you to compare additional plan details side-by-side.

Medicare Advantage

Selected

SSM Health Plan Integrity (HMO-POS)

Senior Savings Plan

Rating Unavailable
✓ Allison FLAMMANG
[Provider Lookup](#)

\$0.00 per month

[Apply Now](#)

SSM Integrity (HMO-POS)	Annual Premium	Max Enrollee Out-of-Pocket	In-Network Copay	Includes
	\$0.00	\$2,500 In-Network \$5,000 In-Network and Out-of-Network Combined		

[View Details](#)

Selected

SSM Health Plan Harmony (HMO-POS MA-Only)

Rating Unavailable
✓ Allison FLAMMANG
[Provider Lookup](#)

\$0.00 per month

[Apply Now](#)

SSM Harmony (HMO-POS MA-Only)	Annual Premium	Max Enrollee Out-of-Pocket	In-Network Copay	Includes
	\$0.00	\$2,500 In-Network \$5,000 In-Network and Out-of-Network		

View Details/Comparison

82. Click on the “View Details” link underneath the plan you are looking for details for

Select for Comparison

SSM Health Plan Integrity (HMO-POS)

Rating Unavailable
✓ Allison FLAMMANG
[Provider Lookup](#)

Senior Savings Plan

Comparing Plans

[Back to Quotes](#)

[View Details](#)

Plan Specifics

	SSM Integrity (HMO-POS)	SSM Harmony (HMO-POS MA-Only)
	Apply Now	Apply Now
Plan Name	SSM Health Plan Integrity (HMO-POS)	SSM Health Plan Harmony (HMO-POS MA-Only)
Monthly Plan Premium	\$0.00	\$0.00

83. In this section you can see the cost estimator of the drugs added as well under the “Individual Drug Cost(s)” section

Individual Drug Cost(s)			
Drug Refill Costs - Retail			
Pharmacy used for pricing: SSM HEALTH PRESCRIPTION CENTER 752 N High Point Rd Madison, WI 53717			
Lisinopril - 90 Days Supply	Retail	\$13.50	\$13.50
	Deductible	\$0.00	\$0.00
	Initial	\$0.00	\$0.00
	Gap	\$3.38	\$3.38
	Catastrophic	\$3.95	\$3.95
Sertraline HCl - 90 Days Supply	Retail	\$15.30	\$15.30
	Deductible	\$0.00	\$0.00
	Initial	\$0.00	\$0.00
	Gap	\$3.83	\$3.83
	Catastrophic	\$3.95	\$3.95

84. Once your client is ready to enroll, click on the “Apply Now” button

Select for Comparison

Rating Unavailable
 ✓ Allison FLAMMANG
[Provider Lookup](#)

SSM Health Plan Integrity (HMO-POS)

Senior Savings Plan

SSM Integrity
(HMO-POS)

Annual Premium	\$0.00
Max Enrollee	
Out-of-Pocket	\$2,500 In-Network \$5,000 In-Network and Out-of-Network
In-Network Copay	Primary Care: \$0 Specialist Services: \$35
Includes	Rx: Yes Part B Premium Reduction: \$35 In-Home Support: Yes Out-of-Network Coverage: Yes

\$0.00 per month

Apply Now

Comparing Plans

Back to Quotes

Plan Name	SSM Integrity (HMO-POS)	SSM Harmony (HMO-POS MA-Only)
Monthly Plan Premium	\$0.00	\$0.00

SSM Integrity (HMO-POS)

Apply Now

SSM Harmony (HMO-POS MA-Only)

Apply Now

Personal Information

85. **AMA Users:** Your lead information should have carried to the application, verify that the content transferred over correctly
86. **Ascend Broker Portal Users:** Fill out your client demographics
87. You can either click the **“Next”** button or click on the tabs at the top to move on to the next page
 - a. There will be a red **“X”** if a tab is missed or required information is not filled out

The image shows a screenshot of a web application's 'Personal Information' form. At the top, there is a navigation bar with tabs for 'Personal Information', 'Address', 'Primary Care Provider', 'Insurance Information', 'Election Period', 'Payment', and 'Important Questions'. The 'Election Period' tab is currently selected. Below the navigation bar, the form is titled 'Personal Information' and contains several input fields: 'Prefix' (dropdown), 'First Name *' (text input with 'Autumn'), 'Middle Initial' (text input), 'Last Name *' (text input with 'Leaves'), 'Sex *' (radio buttons for 'Male' and 'Female', with 'Female' selected), 'Birthdate *' (text input with '11/20/1956'), 'Phone *' (text input with '6083938670'), and 'Alternate Phone' (text input with '6083938670'). A red box highlights the 'First Name', 'Middle Initial', 'Last Name', 'Sex', 'Birthdate', 'Phone', and 'Alternate Phone' fields. At the bottom left of the form, there is a red arrow pointing to a 'Next' button. A legend at the bottom left indicates that '*' denotes 'Required Information'.

Address:

88. **AMA Users:** Verify the address transferred over correctly
89. **Ascend Broker Portal Users:** Fill out your clients address

Personal Information	Address	Primary Care Provider	Insurance Information	Election Period	Payment	Important Questions	Submit
Permanent Residence Address (P. O. Box is not allowed):							
Address 1 *	12312 Olive Boulevard						
Address 2							
City *	St. Louis						
State *	Missouri						
Zip *	63141						
County	Saint Louis						
<input type="checkbox"/>	Mailing Address (Only if different than Permanent Residence Address)						

You may add a mailing address should they have a different address than where they reside

Primary Care Provider

90. If you used the assisted shopping tools and selected a PCP, the PCP should transfer over to the application
91. If you didn't use the assisted shopping tools, you can enter in your client's PCP
 - a. **Note:** Only MD's and DO's will be printed on the members ID Card. They can still see PA's, NP's etc., they just wont populate on their ID cards
92. If someone doesn't have a PCP and you want to look-up plan providers you can click on "**Provider Lookup**" to look up providers on our website

Provider Lookup	
Primary Care Provider ID (PCP ID)	1154760163
Provider First Name	Allison
Provider Last Name	FLAMMANG

93. Next, click on “Yes” or “No” radio button if your client is current patient of that PCP

94. Enter the location of where you client sees that provider

Primary Care Provider ID (PCP ID) 1154760163

Provider First Name Allison

Provider Last Name FLAMMANG

Current Patient Yes No

Office Address

Address 1 11550 Olive Blvd #120

Address 2

City St. Louis

State Missouri

Zip 63141

County

Back Next

Insurance Information

95. **AMA Users:** Verify the MBI and Medicare Effective Dates transferred over correctly

96. **Ascend Broker Portal Users:** Fill out your clients MBI and Medicare Effective Dates

- Note:** Be sure that you are re-reading the MBI back to your client to make sure you have entered it correctly
- If the MBI is not entered correctly, the application will pend for invalid MBI and we will send an “RFI” letter requesting a valid Medicare Number

Personal Information Address Primary Care Provider Insurance Information Election Period Payment Important Questions Submit

Medicare Insurance Information

Using the information on your Medicare card, please complete the information below.

You must have Medicare Part A and Part B to join a Medicare Advantage Plan

Medicare Number * 12AB34CD56EF

Hospital Part A Effective Date * 11/01/2021

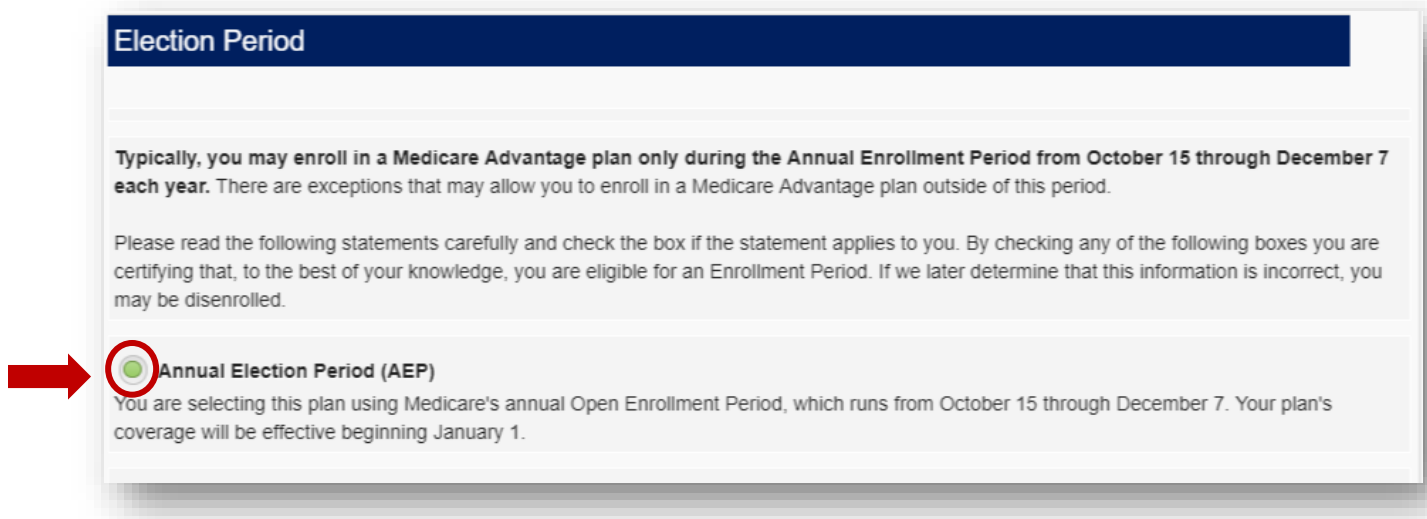
Medical Part B Effective Date * 11/01/2021

* Required Information

Back Next

Election Period

97. Click the radio button next to appropriate election period they are using to enroll
- As of 01/01 there will be a MA-OEP Button



Election Period

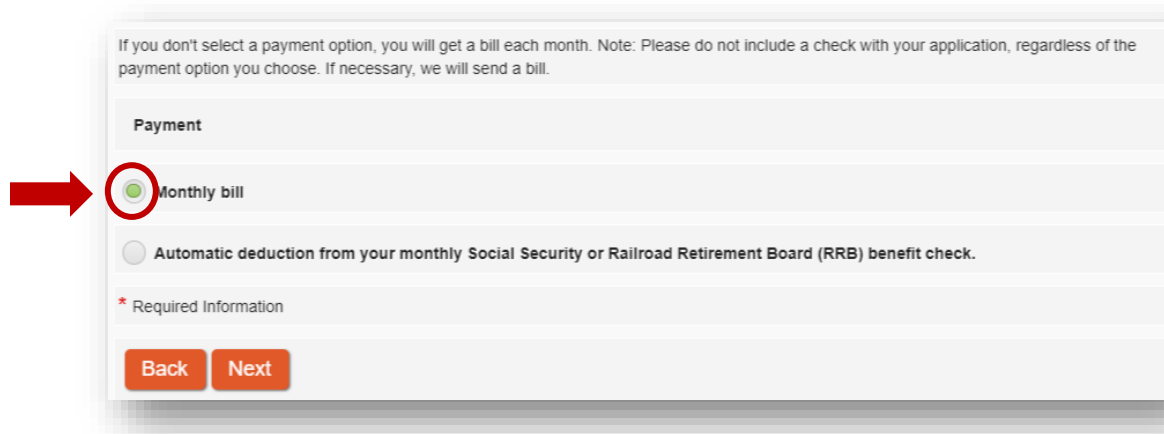
Typically, you may enroll in a Medicare Advantage plan only during the Annual Enrollment Period from October 15 through December 7 each year. There are exceptions that may allow you to enroll in a Medicare Advantage plan outside of this period.

Please read the following statements carefully and check the box if the statement applies to you. By checking any of the following boxes you are certifying that, to the best of your knowledge, you are eligible for an Enrollment Period. If we later determine that this information is incorrect, you may be disenrolled.

Annual Election Period (AEP)
You are selecting this plan using Medicare's annual Open Enrollment Period, which runs from October 15 through December 7. Your plan's coverage will be effective beginning January 1.

Payment

98. Click the appropriate ratio button for the payment option that your client would like to do
- They can either choose direct bill or SSA or RRB Deduction
 - Direct Bill:** We bill on the 10th of each month for the next month. We would bill January's invoice on December 10th
 - SSA or Railroad Deduction:** Let your client know that they may get billed until Social Security/Railroad Retirement Board approves their deduction
 - Unfortunately, we are unable to take ACH account information via the Ascend Mobile App or the Agent Portal
 - Your client can choose the ACH option on their first invoice or they can fill out the ACH form and mail it in or you can fax the form to 608-252-0801
 - We pull on the 23rd of each month unless the 23rd lands on a weekend or holiday then we pull the next business day
 - We would pull January's premium on December 24th



If you don't select a payment option, you will get a bill each month. Note: Please do not include a check with your application, regardless of the payment option you choose. If necessary, we will send a bill.

Payment

Monthly bill

Automatic deduction from your monthly Social Security or Railroad Retirement Board (RRB) benefit check.

* Required Information

Back **Next**

Important Questions

99. Go through the list of important questions

100. If you answer “Yes” to any of the questions, fill out the additional information that is being requested

Personal Information Address Primary Care Provider Insurance Information Election Period Payment **Important Questions** Submit

Please read and answer these important questions:

1. Will you have other prescription drug coverage in addition to WellFirst Health? *

Yes No

Some individuals may have other drug coverage, including other private insurance, TRICARE, Federal Employee Health Benefits coverage, VA benefits or State pharmaceutical assistance programs.

Please list your other coverage and your identification (ID) number(s) for this coverage

Name *

ID# *

Group#

2. Are you a resident in a long-term care facility, such as a nursing home? *

Yes No

3. Are you enrolled in your State Medicaid program? *

Yes No

4. Do you work? *

Yes No

Submit

101. Have your client read the disclaimers themselves or read out loud to your client

102. Have your client click the ***“I am the person listed on this enrollment form or I am simply helping to complete this enrollment form.”***- This is their “electronic signature”

Please select the statement below that best describes your relationship to the person with Medicare listed on this enrollment form.

I am the person listed on this enrollment form or I am simply helping to complete this enrollment form.

- a. If the person is enrolling the POA, fill out the ***“I am the person authorized to act on behalf of the individual listed on this enrollment form under the laws of the State where the individual resides”***

I am the person authorized to act on behalf of the individual listed on this enrollment form under the laws of the State where the individual resides.

First Name *

Last Name *

Relationship to Enrollee *

Phone *

Address 1 *

Address 2

City *

State *

Zip *

County

You will be able to review the application before submission on the next page.

103. Next, Click on the “Next” button


Please select the statement below that best describes your relationship to the person with Medicare listed on this enrollment form.

I am the person listed on this enrollment form or I am simply helping to complete this enrollment form.

I am the person authorized to act on behalf of the individual listed on this enrollment form under the laws of the State where the individual resides.

You will be able to review the application before submission on the next page.

* Required Information



Application Summary

104. This section allows you review the application to make sure everything was entered correctly

105. If you need to correct anything, you can click on the “**Edit**” button

Application Summary

SSM Health Plan Integrity (HMO-POS) **\$0.00** premium

[Apply Now](#)

Please review the application details below to verify accuracy. If updates are needed, use the **Edit** button to make changes. To submit your application, simply click the **Apply Now** button. If your web browser is closed prior to clicking **Apply Now**, the application will not be submitted.

▼ **Personal Information** [Edit](#)

First Name: *Pumpkin*
Last Name: *Patch*
Sex: *Female*
Birthdate: *03/23/1956*
Phone: *6083938670*
Alternate Phone: *6083938670*

▼ **Address** [Edit](#)

Address 1: *12312 Olive Boulevard*
City: *St. Louis*
State: *MO*
Zip: *63141*
County: *Saint Louis*

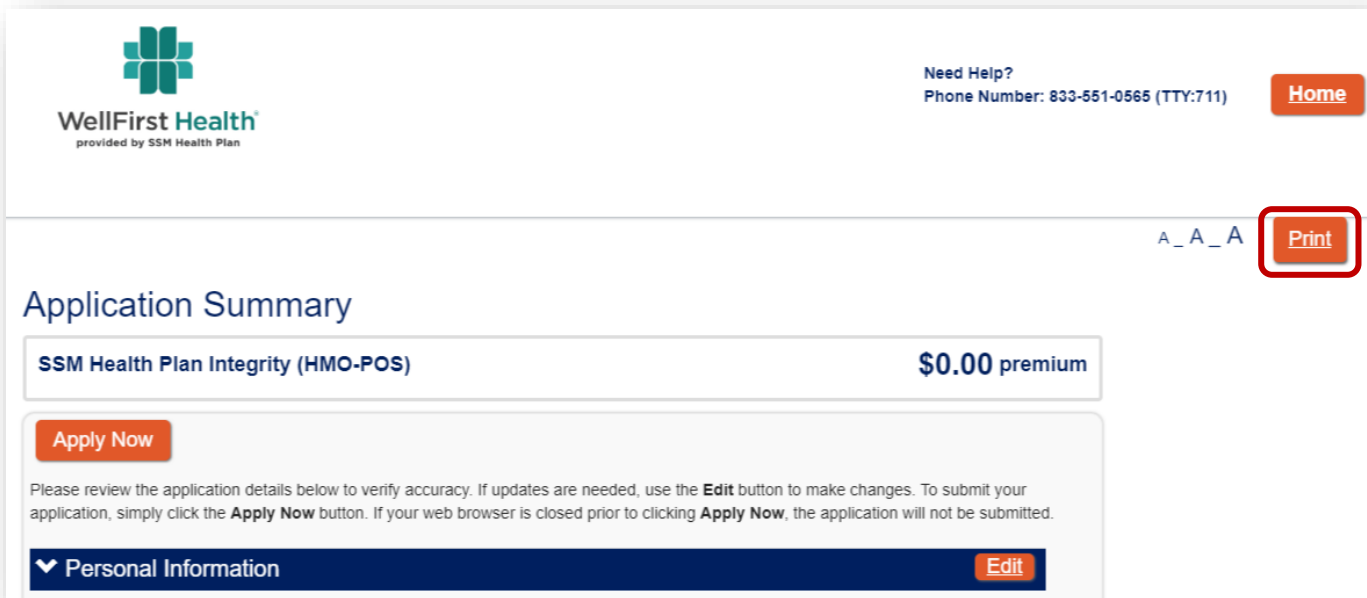
▼ **Primary Care Provider** [Edit](#)

Primary Care Provider ID (PCP ID): *1154760163*
Provider First Name: *Allison*
Provider Last Name: *FLAMMANG*
Current Patient: *Yes*
Address 1: *11550 Olive Blvd #120*
City: *St. Louis*
State: *MO*
Zip: *63141*

106. It will jump you back to that section to edit and then you can go back to the “**Submit**” tab to review your work again

Saving PDF of the Application

107. Click on the “Print” button



WellFirst Health
provided by SSM Health Plan

Need Help?
Phone Number: 833-551-0565 (TTY:711)

Home

A_A_A **Print**

Application Summary

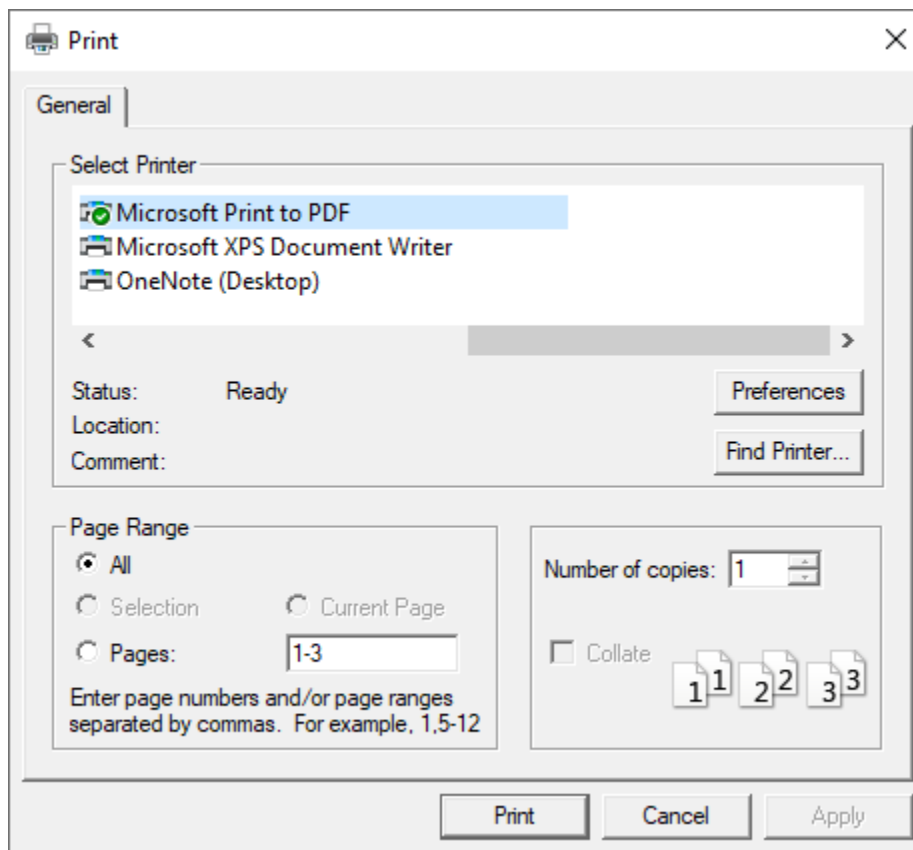
SSM Health Plan Integrity (HMO-POS) **\$0.00 premium**

Apply Now

Please review the application details below to verify accuracy. If updates are needed, use the **Edit** button to make changes. To submit your application, simply click the **Apply Now** button. If your web browser is closed prior to clicking **Apply Now**, the application will not be submitted.

Personal Information **Edit**

108. You can either print it as a PDF and save it to your documents or print off actual paper copy



Print

General

Select Printer

- Microsoft Print to PDF
- Microsoft XPS Document Writer
- OneNote (Desktop)

Status: Ready Preferences

Location: Find Printer...

Comment:

Page Range

All

Selection Current Page

Pages: 1-3

Enter page numbers and/or page ranges separated by commas. For example, 1,5-12

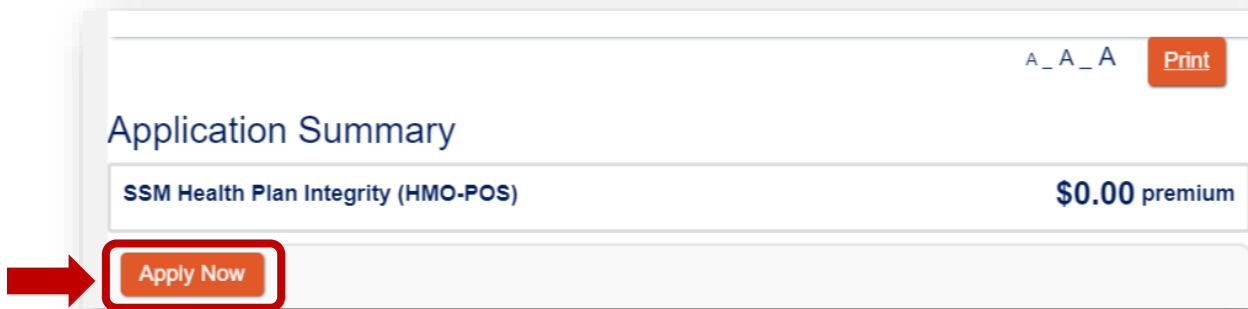
Number of copies: 1

Collate

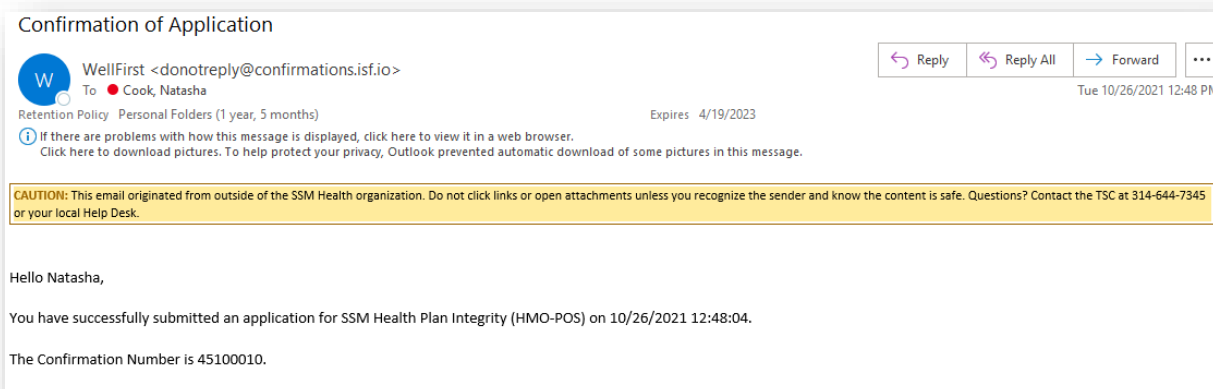
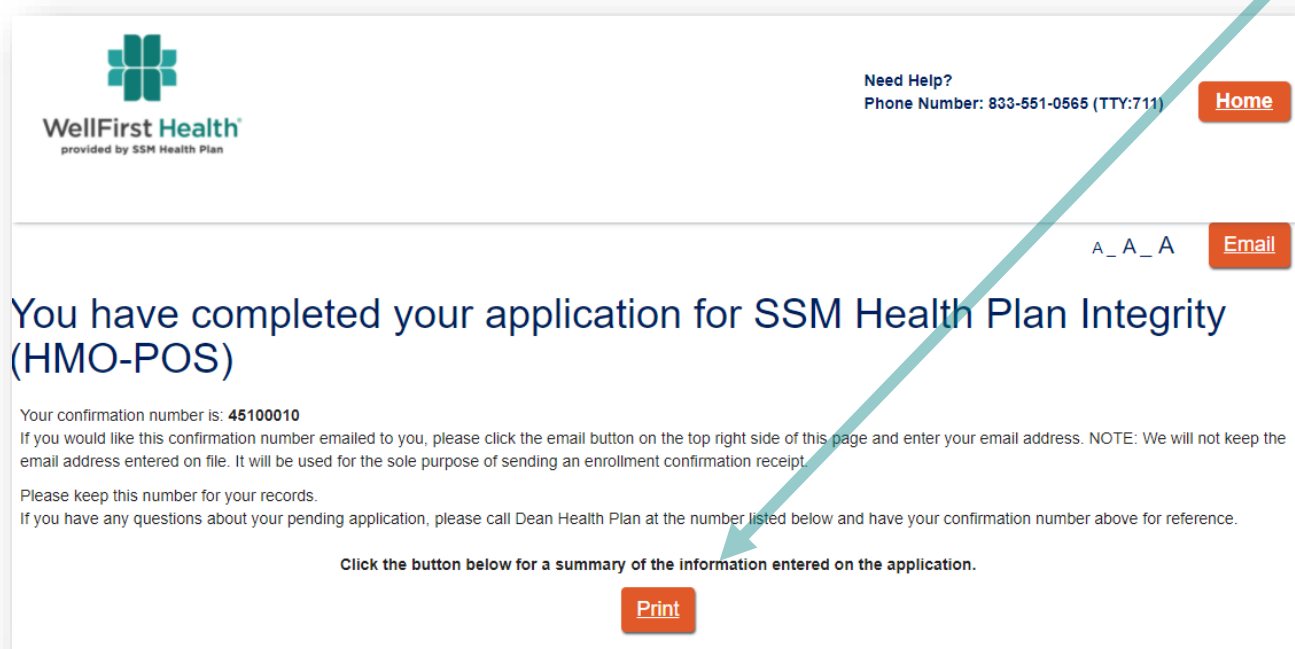
1 1 2 2 3 3

Print Cancel Apply

109. When everything is entered in accurately, click on the “Apply Now” button

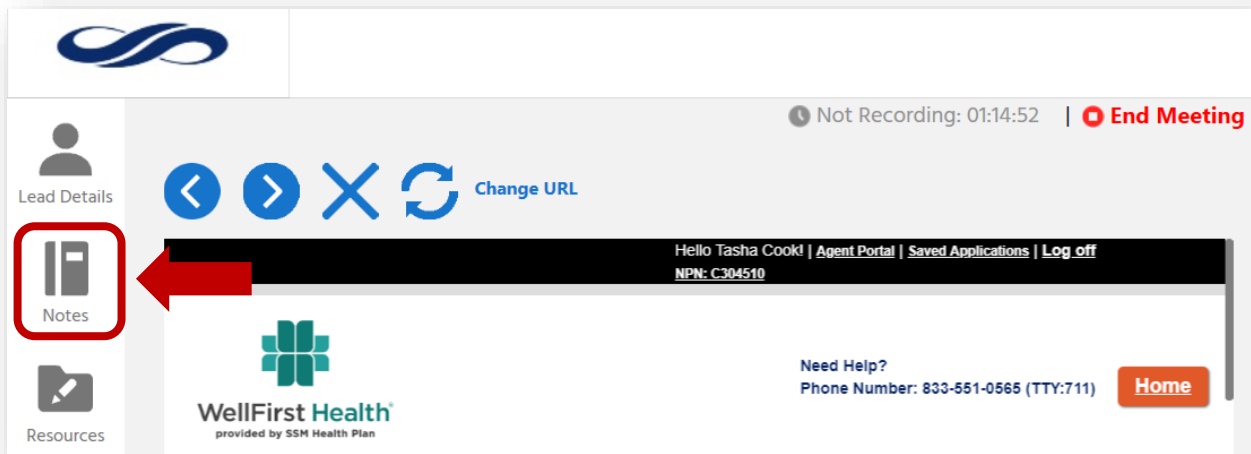


110. After you submit the application you will get confirmation number and your client will get a confirmation email notification as well. If you forgot to save the application from the Application Summary page, you can **print** it from this page as well

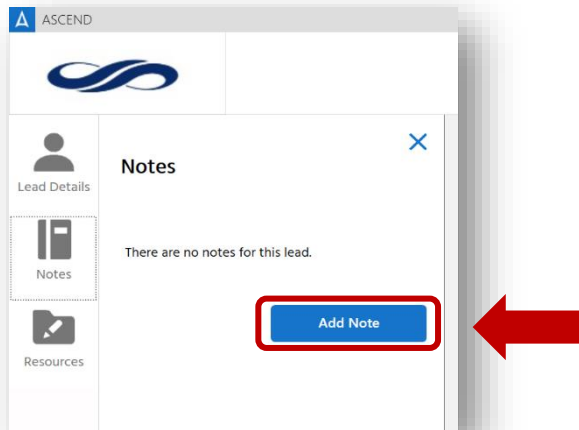


Adding Notes to your Meeting or Lead

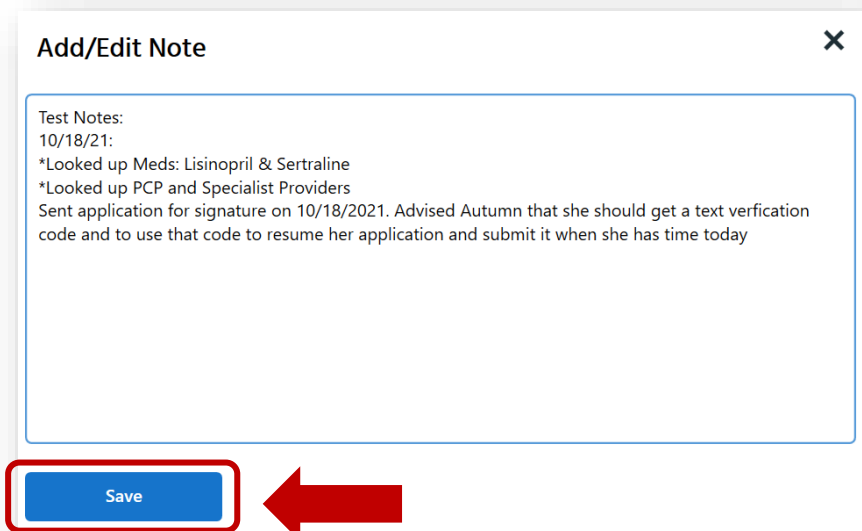
111. If you would like to add notes from your meeting, click on the “Notes” button on the left hand side before ending the meeting



112. Next, click on the “Add Note” button



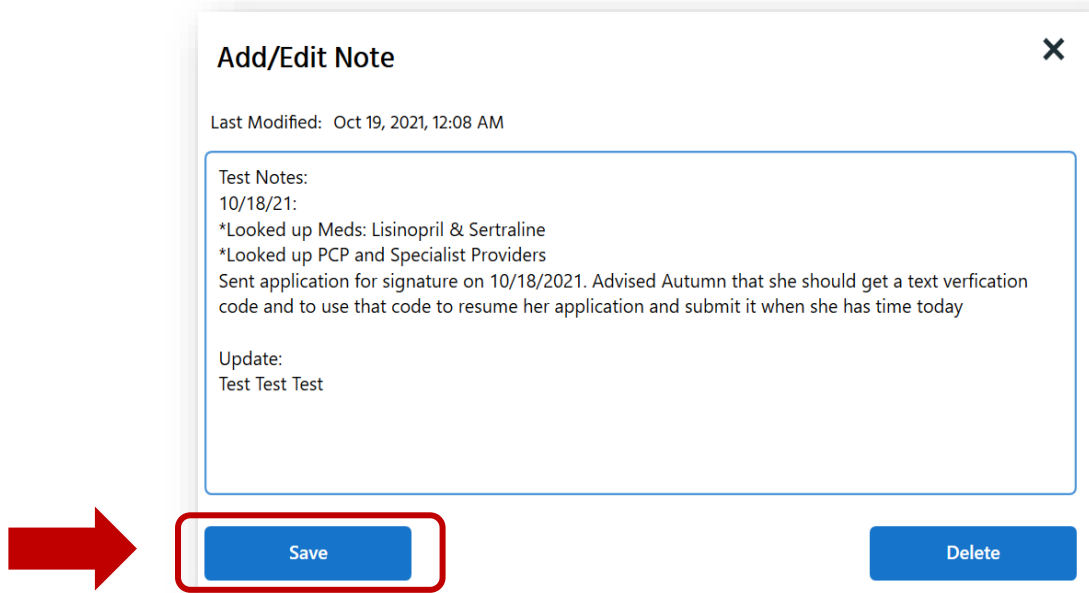
113. Add the notes you want for your meeting and then click the “Save” button



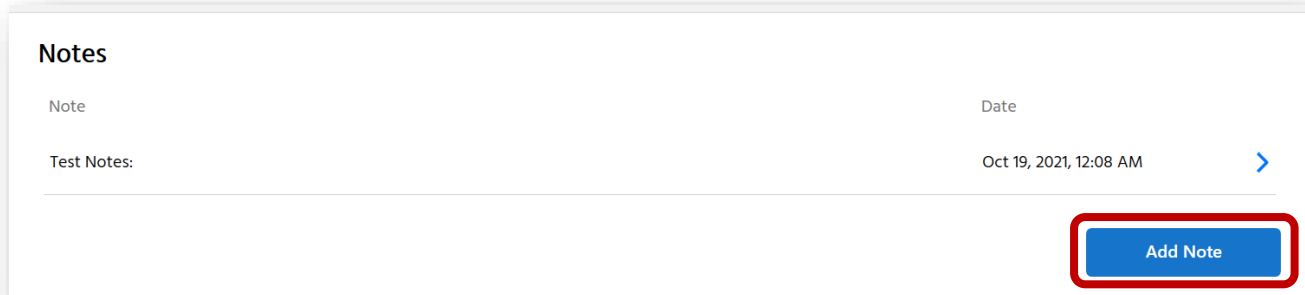
114. If you go back into your Lead, scroll down to the “Notes” Section you will see the notes you entered. If you click on the “>” button you can edit your notes.



115. Make edits to your notes and then click on the “Save” button

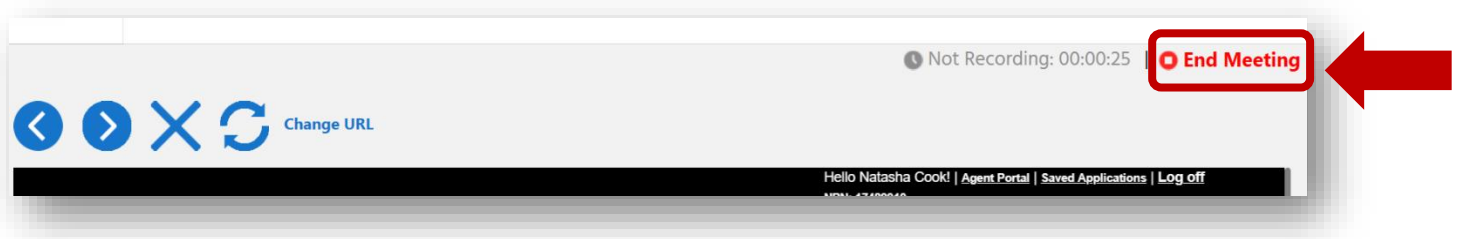


116. You can also add additional notes by clicking on “Add Note” and click “Save” like seen in previous steps

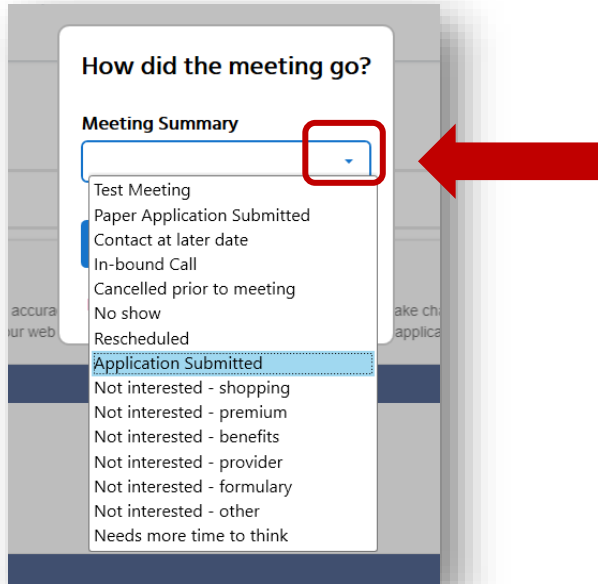


Dispositioning the Meeting

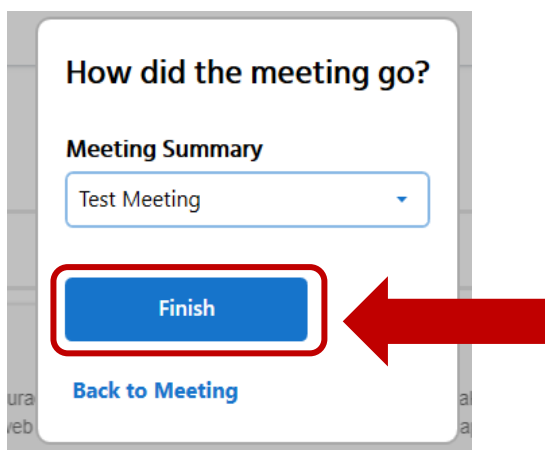
117. Once the meeting is completed, click on the “End Meeting” Button



118. Click on the drop down arrow and choose the most appropriate disposition for the meeting



119. After you have you chosen your disposition, click on the “Finish” button



Send for Signature


This feature will allow you to send a partial application to your client for them to resume and submit applications on your behalf. This feature is great to use to during COVID-19 if you have already discussed products over the phone and they just need to sign the application

120. Click on the “Send for Signature” button



The screenshot shows a web application interface with a top navigation bar containing a back arrow, a forward arrow, a close 'X' icon, a refresh icon, and a 'Change URL' link. Below the navigation bar, there is a form with the following fields: 'Zip' (value: 53913), 'County' (value: Sauk), and a checkbox for 'Mailing Address (Only if different than Permanent Residence Address)'. Below these fields, there is a section for '* Required Information' with 'Back' and 'Next' buttons. At the bottom of the form, there are two buttons: 'Save' and 'Send for Signature'. The 'Send for Signature' button is highlighted with a red box, and a red arrow points to it from the right.

121. Make sure all the required fields are filled out. You can also add a custom message (this is optional). Once you have all the information filled out, click on the “Send” button



The screenshot shows a dialog box titled 'Send Partial Application for Signature'. The form contains the following fields: 'Beneficiary First Name' (value: Pumpkin), 'Beneficiary Last Name' (value: Pie), 'Email' (value: nattycook23@gmail.com), and 'Beneficiary Phone' (value: 6083938670). Below these fields, there are three checkboxes: 'Text verification code' (checked), 'Email verification code' (checked), and 'Add a custom message' (checked). Below the checkboxes, there is a text area with the message 'Please review and submit when you are able. Thanks!'. At the bottom of the dialog, there is a 'Send' button. The 'Send' button is highlighted with a red box, and a red arrow points to it from the right. Below the text area, there is a red error message: 'Please fill the required fields'.

122. Your client will get a text notification and email with the below verification code

Send Partial Application for Signature

Beneficiary First Name *

Beneficiary Last Name *

Email *

Beneficiary Phone *

Text verification code

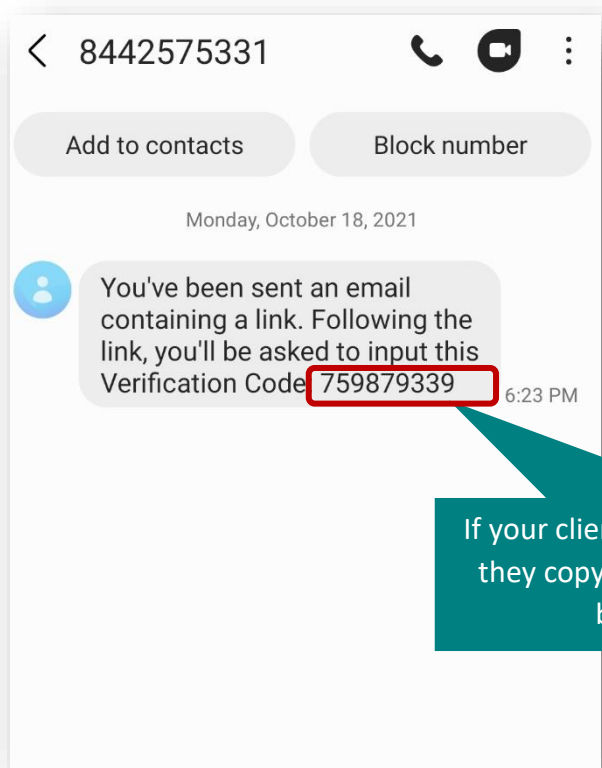
Email verification code

Add a custom message

Please review and submit when you are able. Thanks!

Email sent. The verification code is 759879339. The code was sent to the beneficiary's phone.

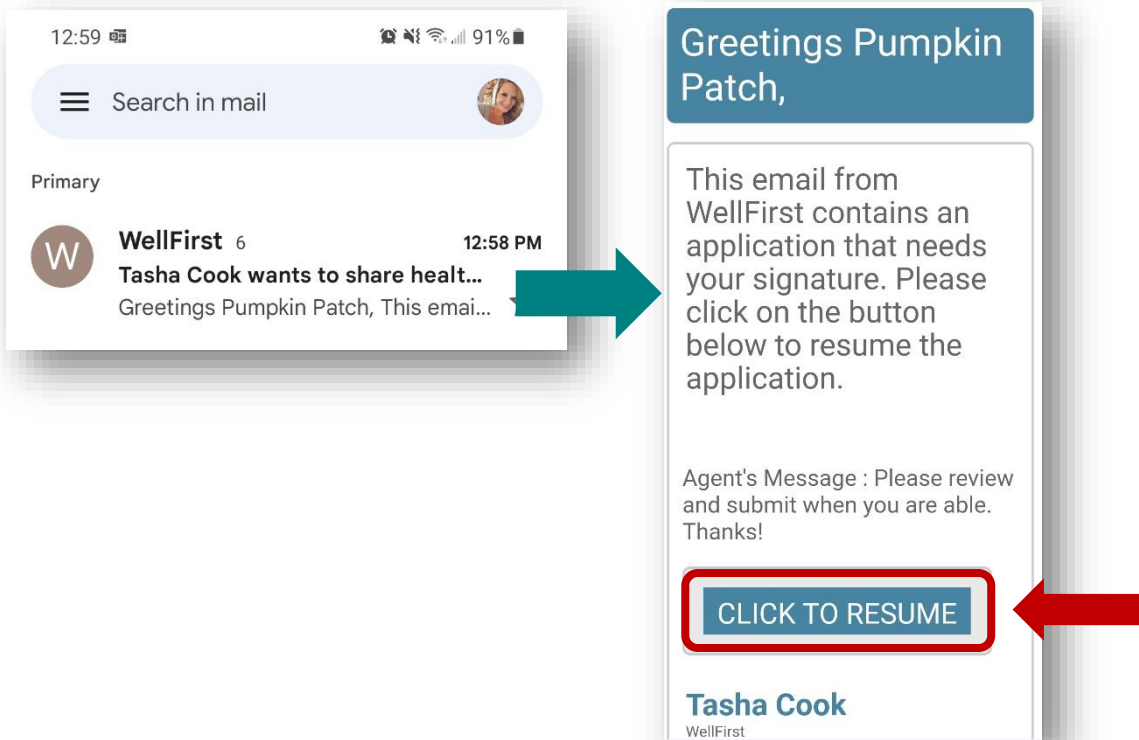
123. Below is what the text message looks like



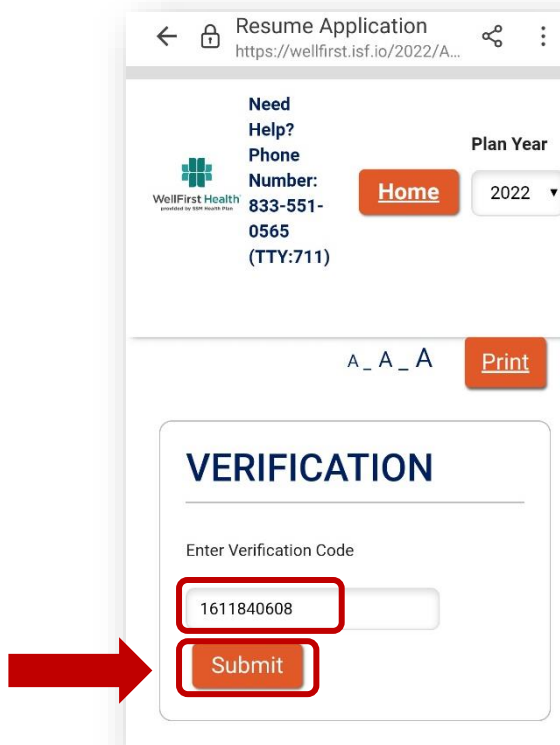
If your client is using a Smart Device, it's easy if they copy the verification code from the text before going to their email

124. Your client will then want to go to their email and click on the enrollment email

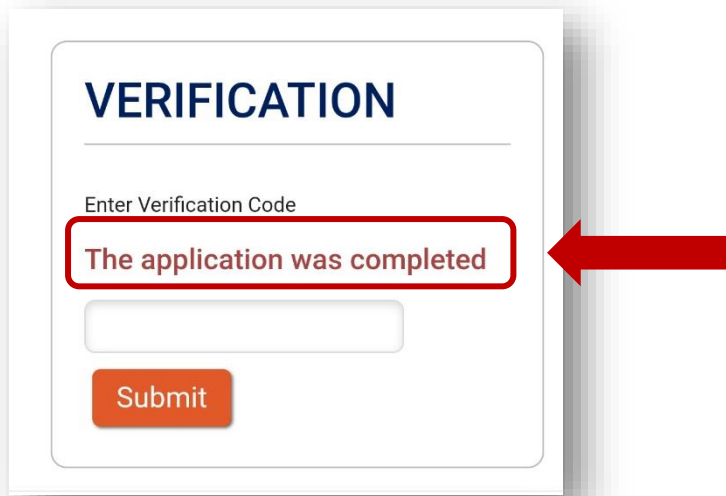
125. They will then click on the “CLICK TO RESUME” button



126. Your client will then enter the verification code from their text into the Verification Code Field and then click on the “Submit” button



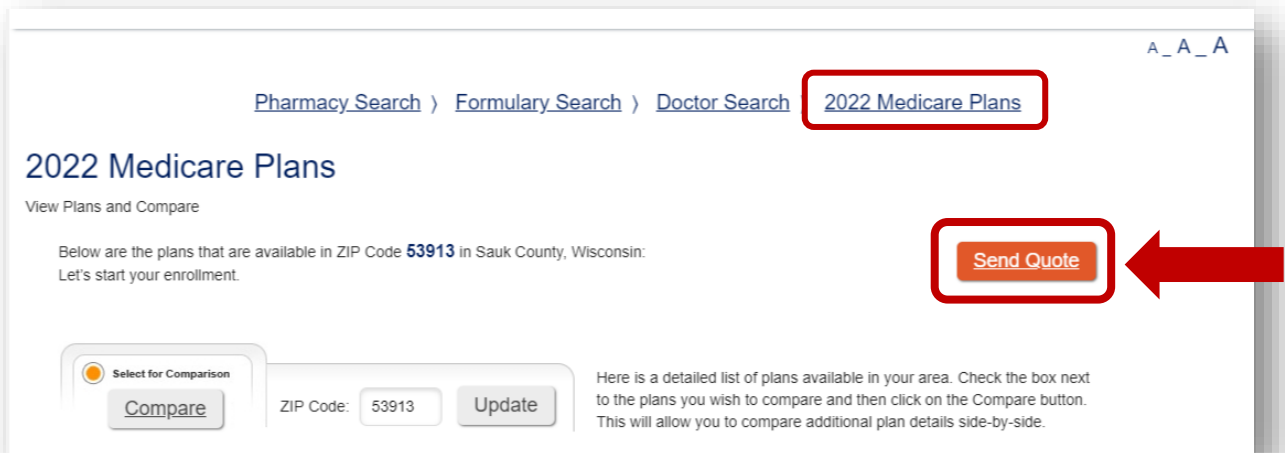
127. If your client has submitted the application and tries to enter the verification code again, they will get this error message:



Send a Quote

Send a quote is another feature that is great to use during COVID-19 as well, if you have someone who is nervous to meeting in-person or god forbid you have been close contact and have to quarantine but still want to serve your clients.

128. **AMA or Ascend Broker Portal Agents:** Click on the “2022 Medicare Plans” tab and click on “Send Quote” button



129. Fill out your clients information and the plans you want your client to review. Once all the information is filled out, click on the "Save" button

Send Quote ✕

Beneficiary First Name *

Beneficiary Last Name *

Email Addresses (maximum of two)*

Beneficiary Phone*

Enter up to two emails, separated with a semi-colon (;)

Application Only - Select 1 Plan

Text Verification Code - Select 1+ Plans

Email Verification Code - Select 1+ Plans

Email Agent

^ WellFirst Medicare Advantage 2 selected

Select All [Clear All](#)

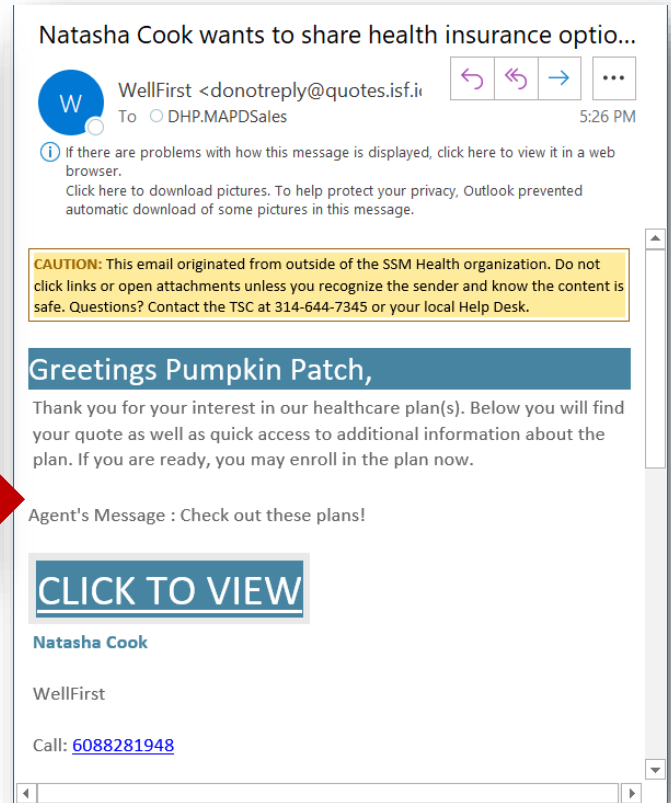
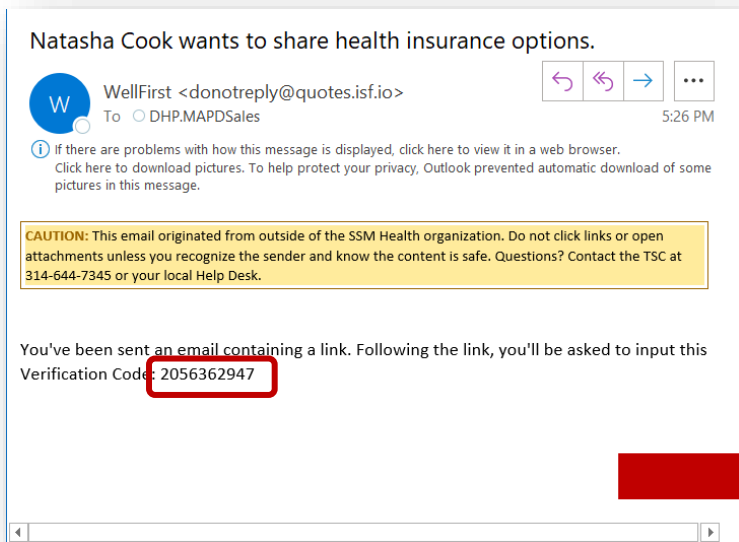
SSM Health Plan Integrity (HMO-POS) - H8019

SSM Health Plan Harmony (HMO-POS MA-Only) - H8019

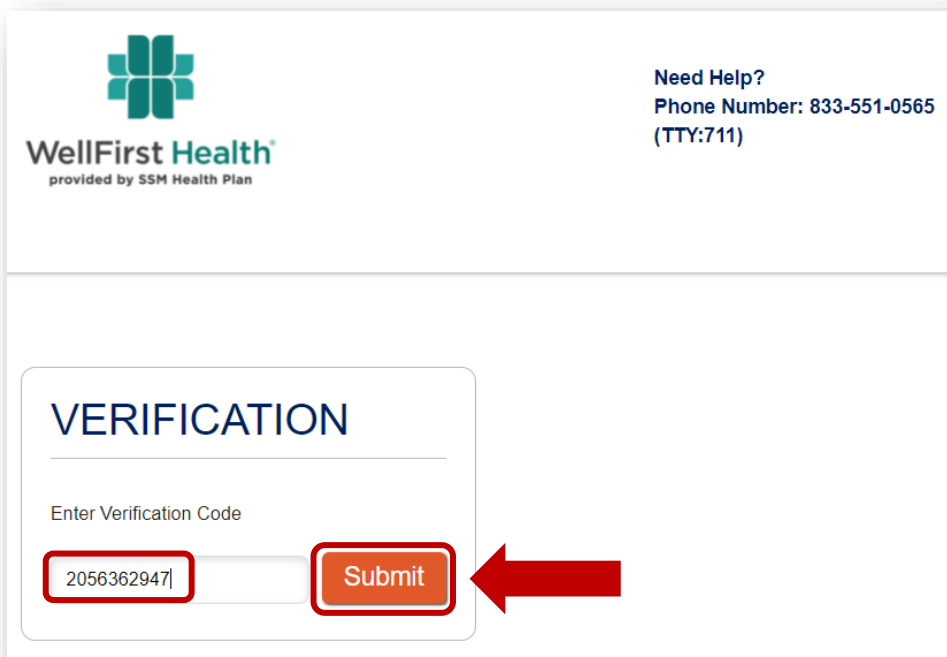
Add a custom message

Email sent. The verification code is 2056362947. The code was sent to the beneficiary's phone.

130. Similar to the Send for Signature feature, your client will get a verification code that they will enter into the quote



Your client will click on the “CLICK TO VIEW” button and then enter their verification code from their email or from their text. Once that is entered they will want to click on the “Submit” button



131. Your client will only see the plans that you have sent to them and if they decide to enroll, the application will be credited to you

This site was accessed using a link from an email. All enrollments made will be credited to Tasha Cook

WellFirst Health
provided by SSM Health Plan

Need Help?
Phone Number: 833-551-0565 (TTY:711) [Home](#) 2022

A_A_A [Print](#)

[Pharmacy Search](#) > [Formulary Search](#) > [Doctor Search](#) > [2022 Medicare Plans](#)

2022 Medicare Plans

View Plans and Compare

Below are the plans that are available in ZIP Code 63301 in Saint Charles County, Missouri.
Let's start your enrollment.

[Select for Comparison](#) [Compare](#) ZIP Code: 63301 [Update](#)

Here is a detailed list of plans available in your area. Check the box next to the plans you wish to compare and then click on the Compare button. This will allow you to compare additional plan details side-by-side.

Medicare Advantage

<input type="checkbox"/> Select for Comparison	SSM Health Plan Integrity (HMO-POS) Senior Savings Plan	Annual Premium \$0.00	Max Enrollee Out-of-Pocket \$2,500 In-Network \$5,000 In-Network and Out-of-Network Combined	In-Network Copay Primary Care: \$0 Specialist Services: \$35 Emergency Care: \$120	Includes Rx: Yes Part B Premium Reduction: \$35 In-Home Support: Yes Out-of-Network Coverage: Yes Comprehensive Dental: Yes OTC: Yes	Rating Unavailable Provider Lookup \$0.00 per month Apply Now
<input type="checkbox"/> Select for Comparison	SSM Health Plan Harmony (HMO-POS MA-Only)	Annual Premium \$0.00	Max Enrollee Out-of-Pocket \$2,500 In-Network \$5,000 In-Network and Out-of-Network Combined	In-Network Copay Primary Care: \$0 Specialist Services: \$35 Emergency Care: \$120	Includes Rx: No Part B Premium Reduction: \$50 In-Home Support: Yes Out-of-Network Coverage: Yes Comprehensive Dental: Yes OTC: Yes	Rating Unavailable Provider Lookup \$0.00 per month Apply Now

Will only show plans that were select and sent to the client

Saved Applications

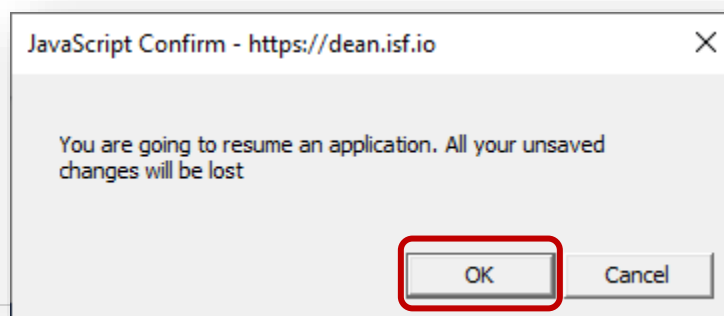
132. At any point you can save an application and come back to it later. All “Saved” and “Send for Signature” applications will be located in your “**Saved Applications**” side of the Agent Portal
133. Until your client has submitted the application, the application will sit in your saved applications
 - a. Saved applications will be saved for 7 days. If you or your client doesn’t submit the application within the 7 days, the application will no longer be saved and you will have to do another application
134. From the Ascend Broker Portal, at the top right hand corner click on the “**Saved Applications**” link



135. From here you will see all your saved and sent for signature applications



136. You can edit your application by clicking “**Edit**” and this will allow you to resume the application. You will get the below error message if you have any other work or a current application open that’s is not saved. Click on “**OK**” if you would like to continue



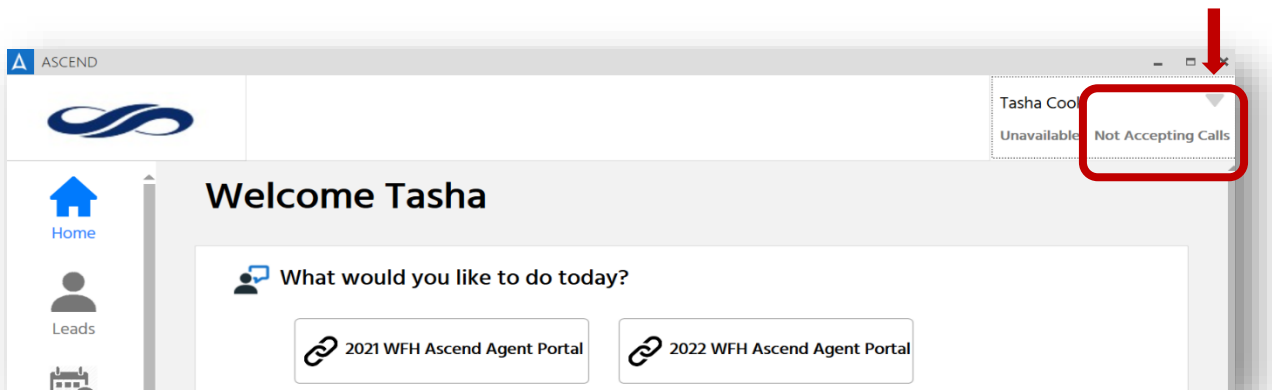
RATE (Remote Agent Telephonic Enrollment)

Remote Agent Telephonic Enrollment (RATE) is a powerful enrollment tool within the Ascend Mobile Application (AMA) that enables you to enroll your clients by phone.

General Background on RATE:

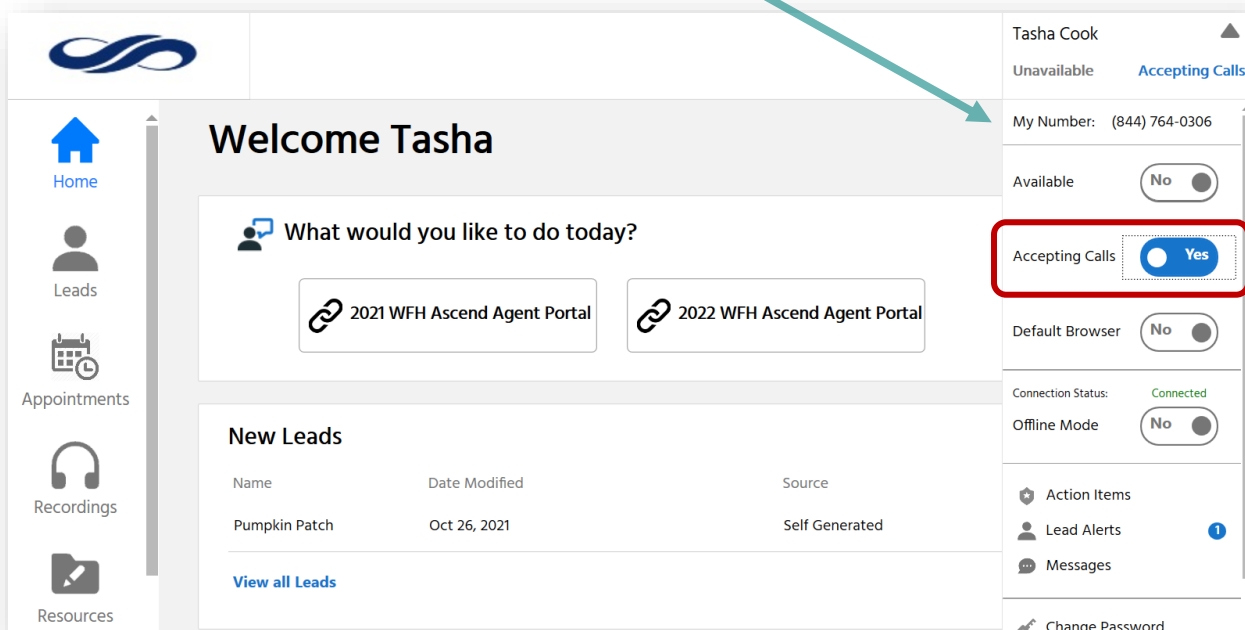
- To be compliant with CMS, these enrollments **must occur through AMA**
- Each agent will be given a unique RATE phone number to share with their prospects
- The phone call can only be answered through AMA
- You must be logged into AMA to receive a RATE call
- You need to know when a prospect will be calling so you will be prepared to receive the call
- You cannot receive a RATE call if you are in a meeting already

137. From the Welcome/Home Page, click on the down arrow above **“Not Accepting Calls”** next to your name

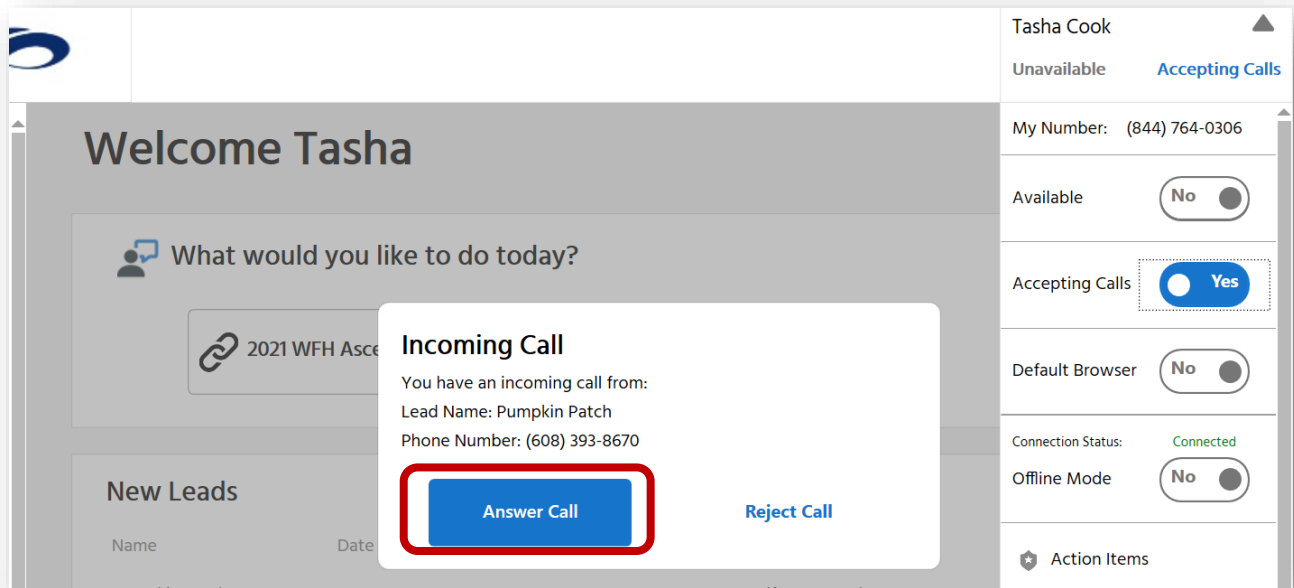


138. Toggle from **“Accepting Calls”** from **“No”** to **“Yes”**

- a. **Note:** If you don't have a RATE phone number or get an error message reach out to WFH.MAPDSales@ssmhealth.com to have your role status updated



139. When a prospect calls your RATE line, your device will ring like a phone and you will tap or click to answer the call

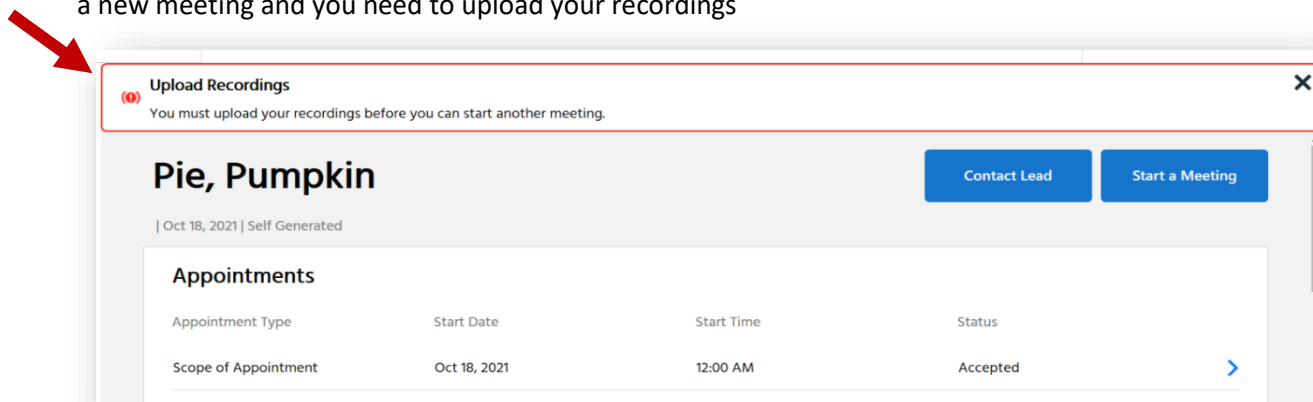


140. Other information on RATE

- a. Your prospect will hear you through your device and you can complete the enrollment as normal in AMA
 - i. Use the CMS approve scripting available in the “**Resources**” Folder
 1. See steps under the “[Resources](#)” Section on how to access the CMS approved scripting
 - ii. If you have a desktop, make sure that you have microphone to capture your recording
- b. You can receive a RATE call at any time of the day
- c. What if you get disconnected from the prospect?
 - i. RATE calls must be completed on an inbound call. They must call you back on the RATE number to complete the enrollment

Recordings

141. You will have to upload your meetings regularly and you may get the below error message when you try to start a new meeting and you need to upload your recordings



142. Go to the “**Recordings**” Button from the Welcome/Home Page, from here you will see your recordings that you need to upload. You can chose to upload one at time or click the “**Upload all Recordings**” button

Recordings

Upload All Recordings

Lead	Creation Date	
Autumn Leaves	Oct 18, 2021	Upload
Autumn Leaves	Oct 18, 2021	Upload
Autumn Leaves	Oct 18, 2021	Upload

143. To make sure that you don't have any error or timeout session issues, its best to sign out after each session by clicking on the "Sign Out" button from your drop down on the top right hand corner under your name

Welcome Natasha

Natasha Cook
Unavailable Not Accepting Calls

My Number: (844) 942-3065

Available No

Accepting Calls No

Default Browser No

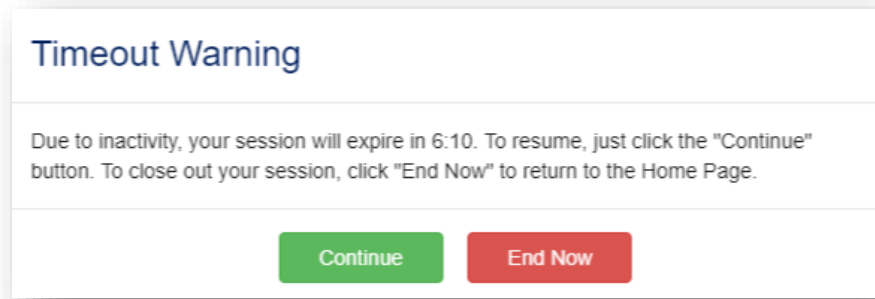
Connection Status: Connected

Offline Mode No

Sign Out

Timeout Session Warning

144. Here is an example of what the timeout session notification error message looks like



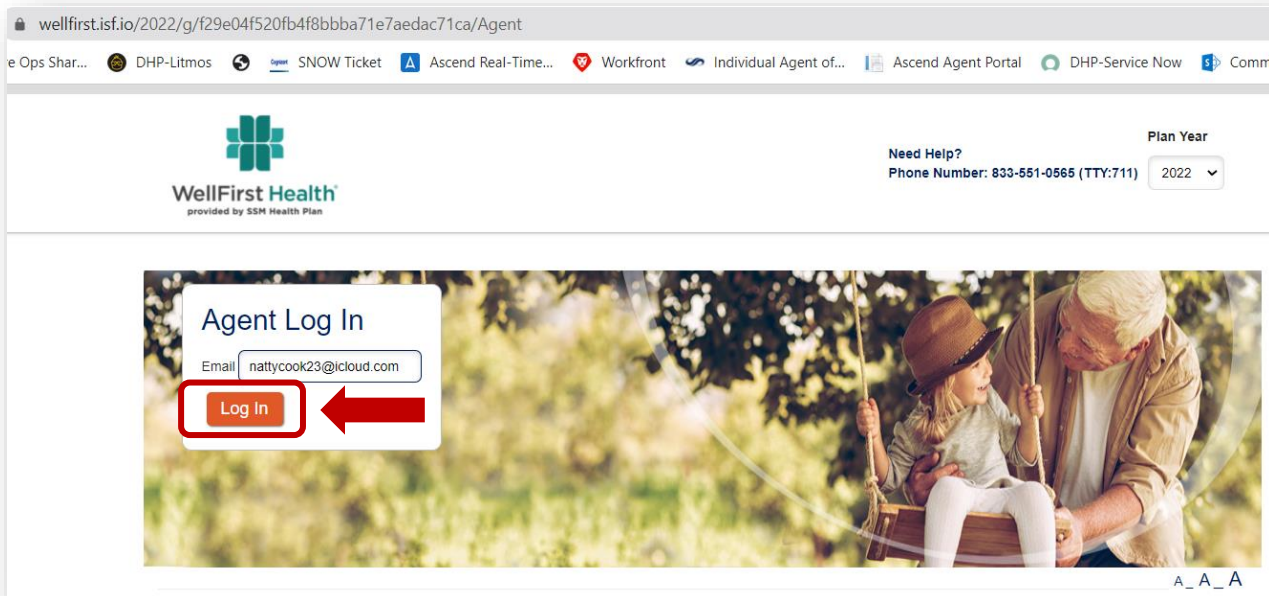
AQE: Ascend Agent Portal

The Ascend Agent Portal allows you to quote and submit apps, but you can't track your leads, send an eSOA, record meetings, or take a telephonic application. It's more of a slimmed down version of AMA. You can still send quotes and send electronic applications for completion and submission. You can also check application status and commission status for applications submitted through any of the Ascend enrollment mechanisms (AMA or Ascend Agent Portal)

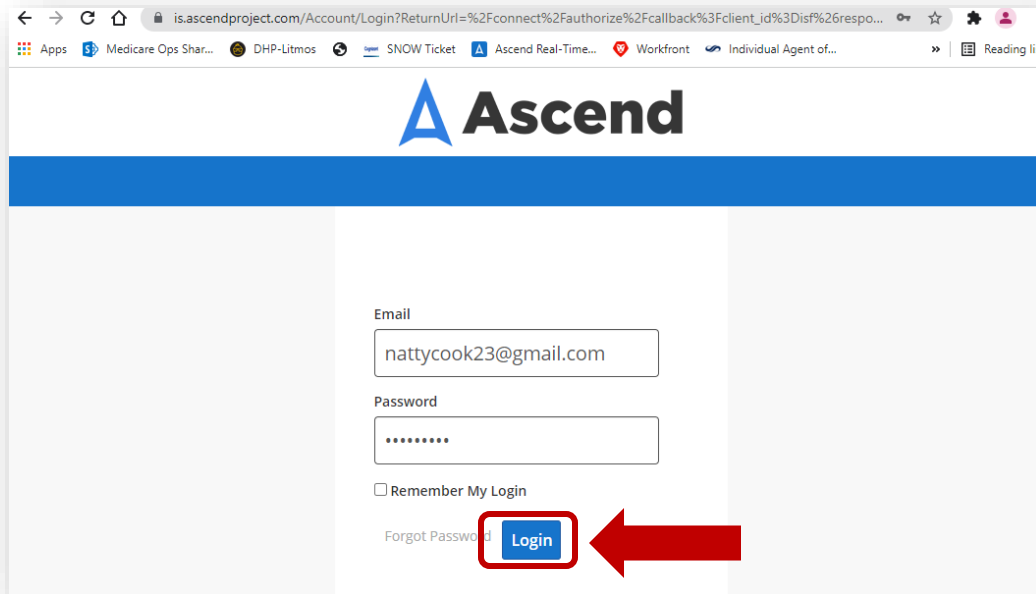
Logging into Ascend Agent Portal

145. URL link is <https://wellfirst.isf.io/2022/agent>

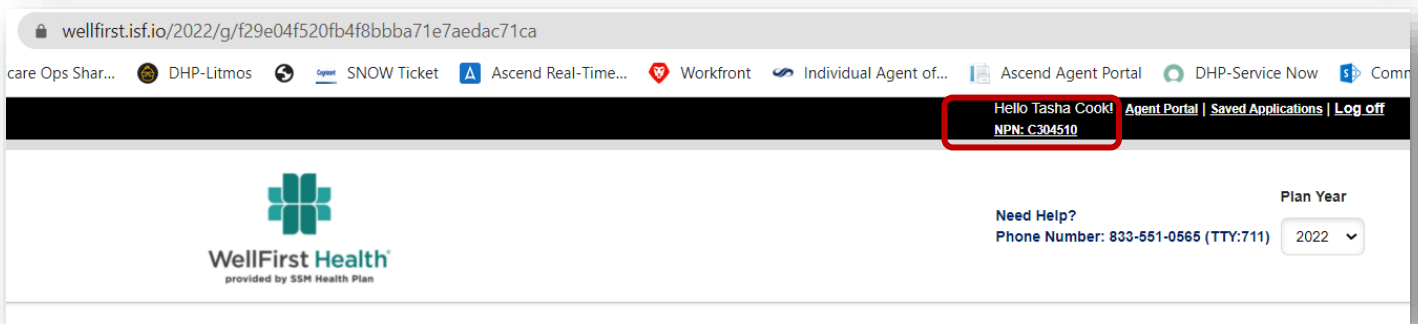
146. Enter your email and click the "Log In" button



147. The site will “revert” you to Ascend, enter your Ascend credentials and click the “Login” button
- Your username and password will be the same for all Ascend Features



148. Make sure when you login it says “Hello [Your Name]!” in the top right hand corner
- You will notice that your “NPN” will show up as a “C” number, that is your internal Medicare Advantage writing number with us
 - Its best to clear your cookies and cache before logging in



AQE: Quoting & Enrolling

149. The site will start you at the Explore Plans/Quoting Page- See the “[Quoting and Enrolling](#)” Section for more information
- The “**Guide Me**” button will take you to the Assisted Shopping Tools- See the “[Assisted Shopping Tools](#)” for more information
 - The “**Compare Plans**” Button will take you right to the 2022 plans

wellfirst.isf.io/2022/g/f29e04f520fb4f8bbba71e7aedac71ca

are Ops Shar... DHP-Litmos SNOW Ticket Ascend Real-Time... Workfront Individual Agent of... Ascend Agent Portal DHP-Service Now Comm

Hello Tasha Cook! [Agent Portal](#) | [Saved Applications](#) | [Log off](#)
NPN: C304510

WellFirst Health
provided by SSM Health Plan

Need Help?
Phone Number: 833-551-0565 (TTY:711)

Plan Year
2022

Explore Plans

Enter your ZIP code below to find WellFirst Health Medicare plans and review rates.

ZIP Code
63301

Guide Me Compare Plans

Takes you right to the **2022 Plan Offerings**

Takes you through the **Assisted Shopping Tools**

A_A_A

View Enrollments, Application Status, & Commission Status

150. From the Ascend Agent Portal, click on the “Agent Portal” link

wellfirst.isf.io/2022/g/f29e04f520fb4f8bbba71e7aedac71ca

care Ops Shar... DHP-Litmos SNOW Ticket Ascend Real-Time... Workfront Individual Agent of... Ascend Agent Portal DHP-Service Now Comm

Hello Tasha Cook! **Agent Portal** | [Saved Applications](#) | [Log off](#)
NPN: C304510

WellFirst Health
provided by SSM Health Plan

Need Help?
Phone Number: 833-551-0565 (TTY:711)

Plan Year
2022

151. From here you can see any applications that you have submitted through any of the Ascend Mechanisms

a. **Application Status:**

- i. **Pending:** Received and Submitted to CMS
- ii. **Enrolled:** Application approved by CMS
- iii. **Not Enrolled:** Application was rejected by CMS. Member is not enrolled
- iv. **Disenroll:** Application associated with a Member who has since disenrolled voluntarily
- v. **Cancelled:** Application associated with a prospective member who has since withdrawn the application
- vi. **Duplicate:** Application associated with a prospective member that has been identified as a duplicate for the same effective date

b. **Commission Status:** (I don't get paid on commission for that's why my portal doesn't show a status)

- i. **Blank:** Default
- ii. **Paid:** The commission has been pai
- iii. **Recouped:** The commission has been recouped
- iv. **AOR Change:** Application has been superseded by a new application from a different agent

Tracking

Enrollments							Quick Quotes	
Name	Address	Plan	Plan Year	Date	Premium	Confirmation #	Status	Commission Status
Test Tester	1277 Deming Way, Madison, Dane, WI, 53717	Dean Advantage Essential (HMO)	2022	10/18/2021	\$0.00	653	Pending	
Wicked Stepmother	475 Chippewa Mall Drive, Chippewa Falls, WI, 54729	Prevea360 Medicare Advantage Harmony (HMO-POS MA-Only)	2022	09/29/2021	\$0.00	650	Pending	
Evil Queen	3730 Gateway Drive, Eau Claire, WI, 54701	Prevea360 Medicare Advantage Essential (HMO-POS)	2022	09/29/2021	\$0.00	649	Pending	
Cruella Deville	1277 Deming Way, Madison, Dane, WI, 53717	Dean Advantage Harmony (HMO-POS MA-Only)	2022	09/29/2021	\$0.00	648	Pending	

ARM (Ascend Realtime Manager)

Background of (ARM)

This is where you can download the AMA application on your iOS device or your PC. Update or change your password for AMA & Agent Portal. You can also you can easily manage all your prospect information (book of business or leads)

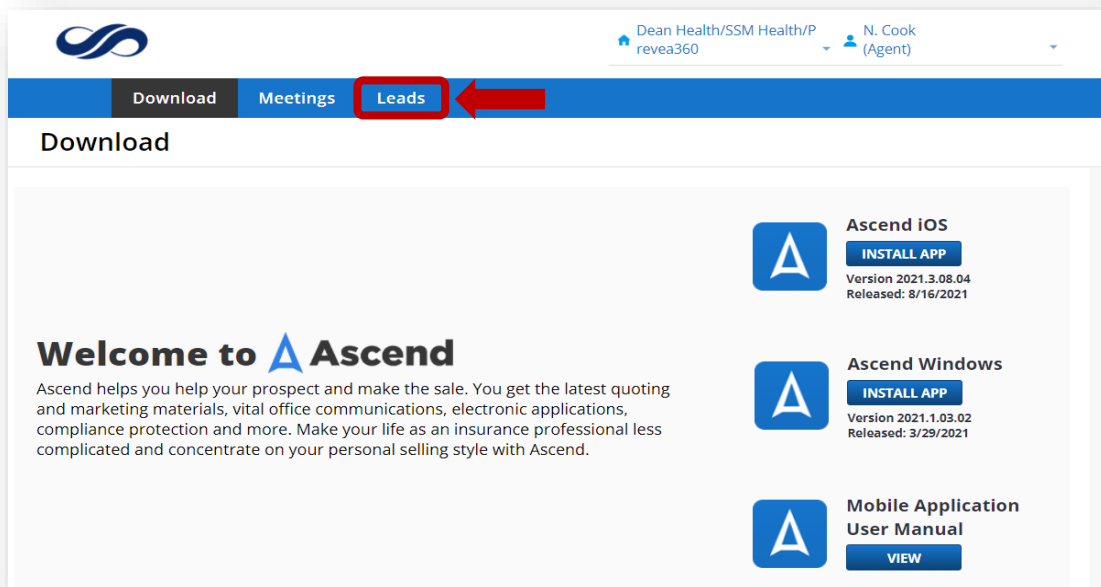
Functions of ARM

- Add Lead information
- Edit Lead information
- Delete/Recover Lead information
- Review Prospect sales cycle and process
- This allows you to track your sales!

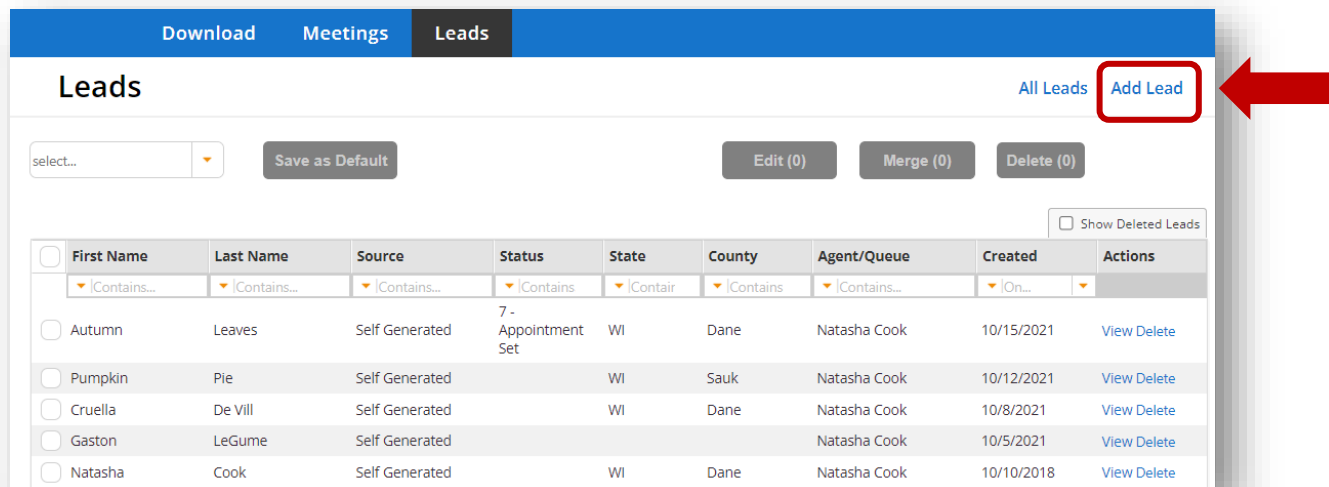
Managing/Adding Leads via ARM

152. If you want to add your leads or manage your leads from a data entry stand point you can use ARM for this function. Go to <https://arm.ascendproject.com>

153. Click on the “Leads” button



154. Click on the “Add Lead” link



155. Fill out all the lead information that you want to add. **Make sure to add your Agent Name to the Lead** and click on the “Save” button

- a. **Note:** If you don’t add your name to the lead, it wont show under your list of leads
 - i. Reach out WFH.MAPDSales@ssmhealth.com so the WFH Sales Staff can add you to the lead or you will have to re-enter the lead to show under you leads
 - ii. These are your leads, no other agent will have access to you leads

Lead Information

Please note:
Fields followed by (*) are required.

First Name: * Pumpkin **Last Name:** * Patch

Address

Address: 12312 Olive Blvd
City: St Louis **County:** St. Louis County
State: Missouri **ZipCode:** 63141

Miscellaneous Info

Phone Number: * 608-393-8670 **Email:** nattycook23@gmail.com
Gender: female **Date of Birth:**
Lead Source: - Select Source - **External ID:**
Lead Status: - Select Status - **Assigned Agent/Queue:** * Tasha Cook (nattycook23@icloud.com)

Permission to Contact: Contact Via Email Contact Via Phone Contact Via Mail Do Not Contact

Alternate Phone Numbers

Phone Type:	Phone Number:	Is Active
Primary		<input checked="" type="checkbox"/>

[Add additional phone number](#)

Medicare Information

Claim Number: 12AS56HJ23CV **Part A Effective Date:** 10/01/2021 **Part B Effective Date:** 10/01/2021

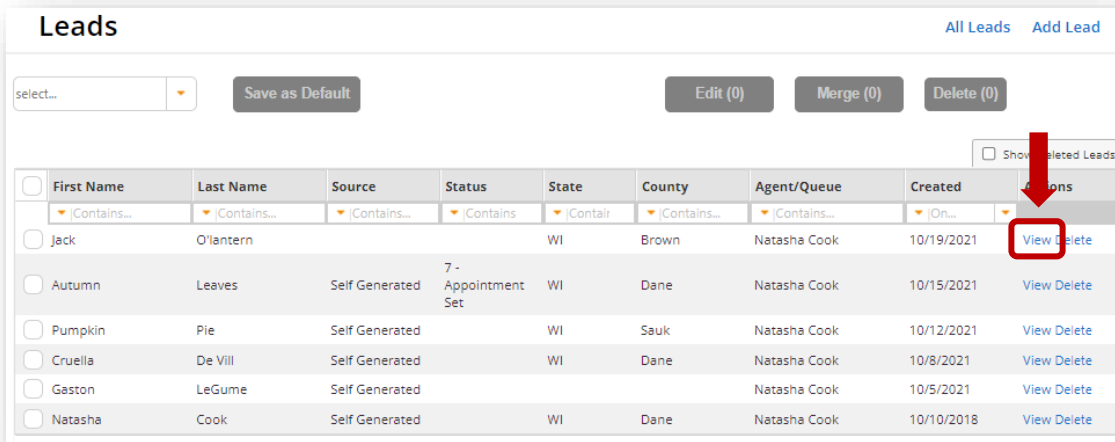
156. You will get a notification that the lead was added successfully

Leads [All Leads](#) [Add Lead](#)

Lead was added successfully.

Editing Leads via ARM

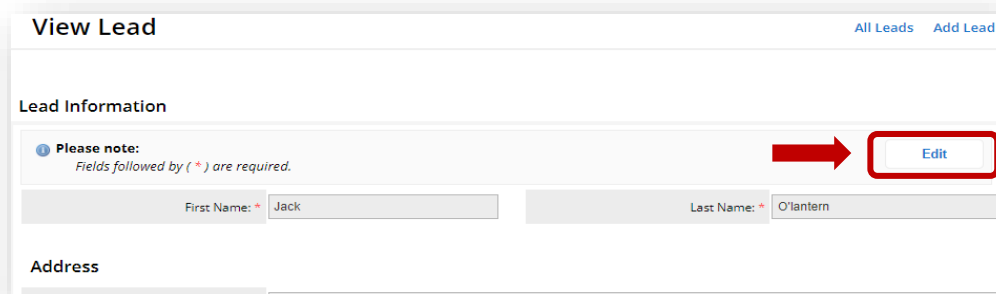
157. Go back to your Leads and click on the “View” button on the Lead you want to edit



The screenshot shows a table titled "Leads" with columns: First Name, Last Name, Source, Status, State, County, Agent/Queue, Created, and Actions. A red box highlights the "View" button in the Actions column for the first lead, Jack O'lantern. A red arrow points to this button.

	First Name	Last Name	Source	Status	State	County	Agent/Queue	Created	Actions
<input type="checkbox"/>	Jack	O'lantern			WI	Brown	Natasha Cook	10/19/2021	View Delete
<input type="checkbox"/>	Autumn	Leaves	Self Generated	7 - Appointment Set	WI	Dane	Natasha Cook	10/15/2021	View Delete
<input type="checkbox"/>	Pumpkin	Pie	Self Generated		WI	Sauk	Natasha Cook	10/12/2021	View Delete
<input type="checkbox"/>	Cruella	De Vill	Self Generated		WI	Dane	Natasha Cook	10/8/2021	View Delete
<input type="checkbox"/>	Gaston	LeGume	Self Generated				Natasha Cook	10/5/2021	View Delete
<input type="checkbox"/>	Natasha	Cook	Self Generated		WI	Dane	Natasha Cook	10/10/2018	View Delete

158. Click on the “Edit” button



The screenshot shows the "View Lead" form. The "Lead Information" section contains a "Please note" message and a red box around the "Edit" button. The "Address" section is partially visible.

Lead Information

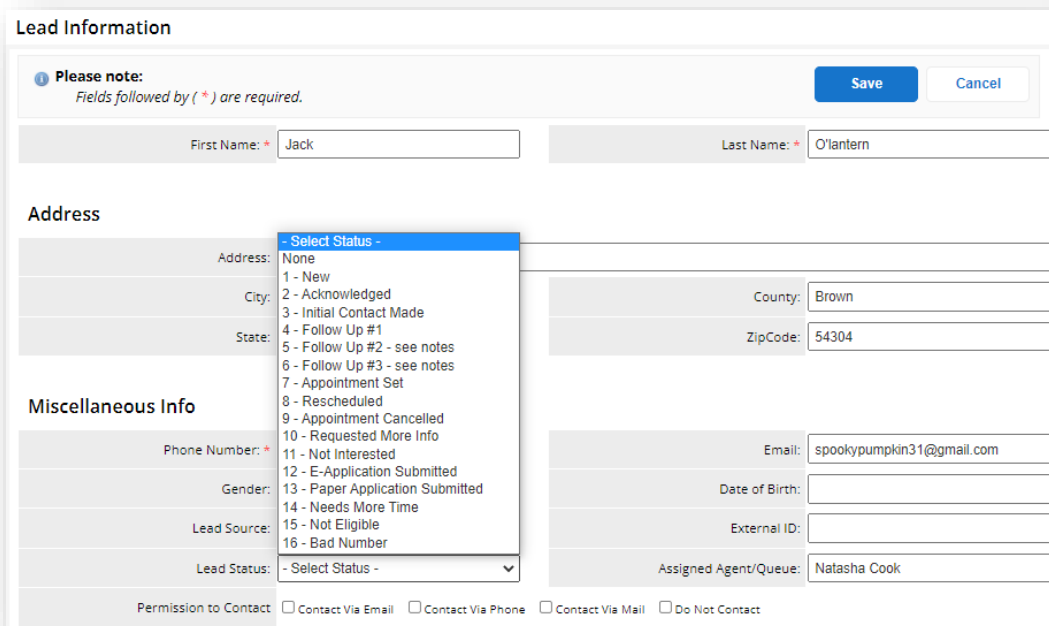
Please note:
Fields followed by (*) are required.

Edit

First Name: * Jack Last Name: * O'lantern

Address

159. From here you edit demographics, lead statuses, etc. Once you have made your changes click on the “Save” button to save your changes



The screenshot shows the "Lead Information" form with a dropdown menu open for the "Lead Status" field. The "Save" button is highlighted in blue.

Lead Information

Please note:
Fields followed by (*) are required.

Save **Cancel**

First Name: * Jack Last Name: * O'lantern

Address

Address:

City:

State:

County: Brown

ZipCode: 54304

Miscellaneous Info

Phone Number: *

Gender:

Lead Source:

Lead Status: - Select Status -

Assigned Agent/Queue: Natasha Cook

Permission to Contact: Contact Via Email Contact Via Phone Contact Via Mail Do Not Contact

- Select Status -
- None
- 1 - New
- 2 - Acknowledged
- 3 - Initial Contact Made
- 4 - Follow Up #1
- 5 - Follow Up #2 - see notes
- 6 - Follow Up #3 - see notes
- 7 - Appointment Set
- 8 - Rescheduled
- 9 - Appointment Cancelled
- 10 - Requested More Info
- 11 - Not Interested
- 12 - E-Application Submitted
- 13 - Paper Application Submitted
- 14 - Needs More Time
- 15 - Not Eligible
- 16 - Bad Number

Adding Notes via ARM

160. Go back to edit your lead, scroll down to the Notes area and click on “Add Note”

Alternate Phone Numbers

Phone Type:	Phone Number:	Is Active
Primary		<input checked="" type="checkbox"/>

[Add additional phone number](#)

Medicare Information

Claim Number:	HA89DF23NM89	Part A Effective Date:	10/01/2021	Part B Effective Date:	10/01/2021
---------------	--------------	------------------------	------------	------------------------	------------

Notes Show Deleted Notes

Date Modified	Created By	Text
10/19/2021 11:20 PM	Natasha Cook	Lead was assigned to Natasha Cook.

1 - 1 of 1 records

Prev 1 Next

161. Add your notes and click on the “Done” button

Note

Text

10/19: Test Test Test

Done Cancel

162. You will see your note in the notes section

Notes Show Deleted Notes

Date Modified	Created By	Text
10/20/2021 12:03 AM	Natasha Cook	10/19: Test Test Test
10/19/2021 11:20 PM	Natasha Cook	Lead was assigned to Natasha Cook.

1 - 2 of 2 records

Prev 1 Next

163. Once you have made all your necessary edits, scroll up to the top of the lead and click on the “Save” Button

Edit Lead All Leads Add Lead

Lead Information

Please note:
Fields followed by (*) are required.

First Name: * Jack Last Name: * O'lantern

Address

Address: 2710 Executive Dr
City: Green Bay County: Brown
State: Wisconsin ZipCode: 54304

Deleting Leads

164. Go into Leads and click on the “Delete” button next to the lead that you want to delete

Leads All Leads Add Lead

select... Save as Default Edit (0) Merge (0) Delete (0)

Show Deleted Leads

<input type="checkbox"/>	First Name	Last Name	Source	Status	State	County	Agent/Queue	Created	Actions
<input type="checkbox"/>	Jack	O'lantern			WI	Brown	Natasha Cook	10/19/2021	View Delete
<input type="checkbox"/>	Autumn	Leaves	Self Generated	7 - Appointment Set	WI	Dane	Natasha Cook	10/15/2021	View Delete
<input type="checkbox"/>	Pumpkin	Pie	Self Generated		WI	Sauk	Natasha Cook	10/12/2021	View Delete
<input type="checkbox"/>	Cruella	De Vill	Self Generated		WI	Dane	Natasha Cook	10/8/2021	View Delete
<input type="checkbox"/>	Gaston	LeGume	Self Generated				Natasha Cook	10/5/2021	View Delete
<input type="checkbox"/>	Natasha	Cook	Self Generated		WI	Dane	Natasha Cook	10/10/2018	View Delete

1 - 6 of 6 records

165. You will get a notification if you are sure you want to delete, if you are sure click on the “OK” button

arm.ascendproject.com says
Are you sure you want to delete Natasha Cook

OK Cancel

166. You will get a notification that the lead was successfully deleted

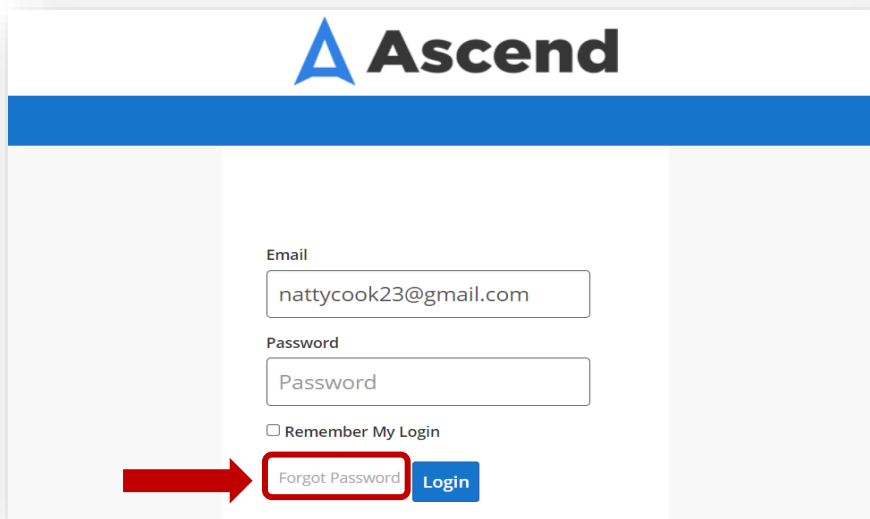
Leads All Leads Add Lead

Lead was successfully deleted.

Password Resets

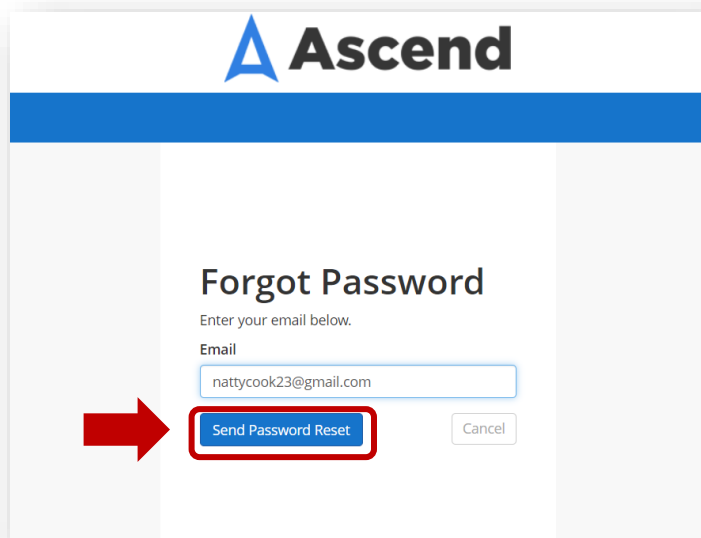
167. If you are unable reset your password from AMA or Ascend, you may need to reset your password from ARM

168. Go to <https://arm.ascendproject.com> and click on “Forgot Password”



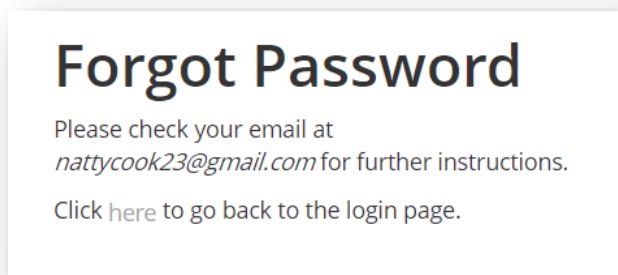
The screenshot shows the Ascend login page. At the top is the Ascend logo. Below it is a blue horizontal bar. The main content area contains a login form with the following elements: an 'Email' field with the text 'nattycook23@gmail.com', a 'Password' field with the text 'Password', a checkbox labeled 'Remember My Login', and two buttons: 'Forgot Password' and 'Login'. A red arrow points to the 'Forgot Password' button, which is also enclosed in a red rectangular box.

169. Type your email address and click on the “Send Password Reset” button



The screenshot shows the Ascend 'Forgot Password' page. At the top is the Ascend logo. Below it is a blue horizontal bar. The main content area contains the heading 'Forgot Password', the instruction 'Enter your email below.', an 'Email' field with the text 'nattycook23@gmail.com', and two buttons: 'Send Password Reset' and 'Cancel'. A red arrow points to the 'Send Password Reset' button, which is also enclosed in a red rectangular box.

170. You will get the next message to go back to your email



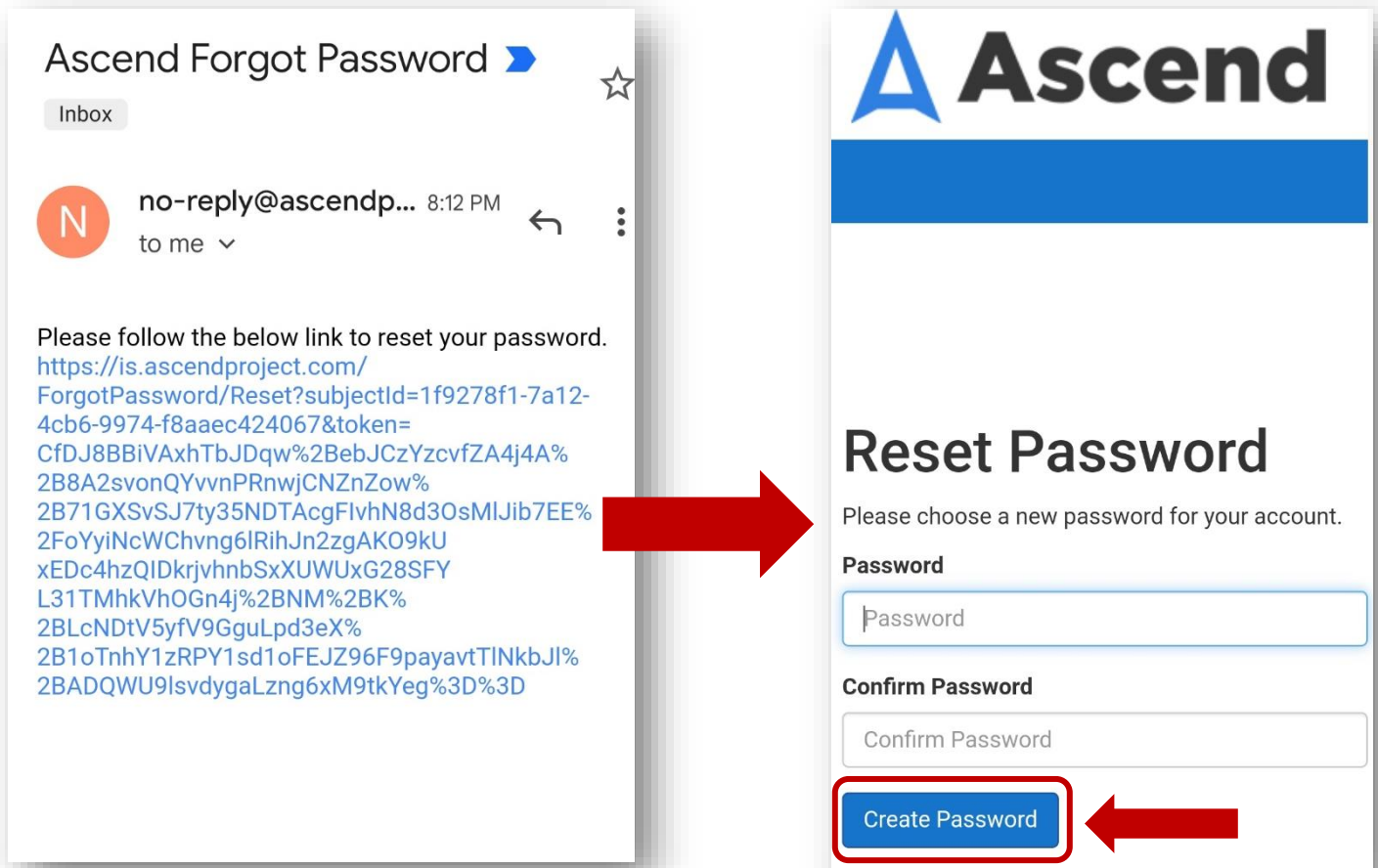
The screenshot shows an email message with the following content:

Forgot Password

Please check your email at *nattycook23@gmail.com* for further instructions.

Click [here](#) to go back to the login page.

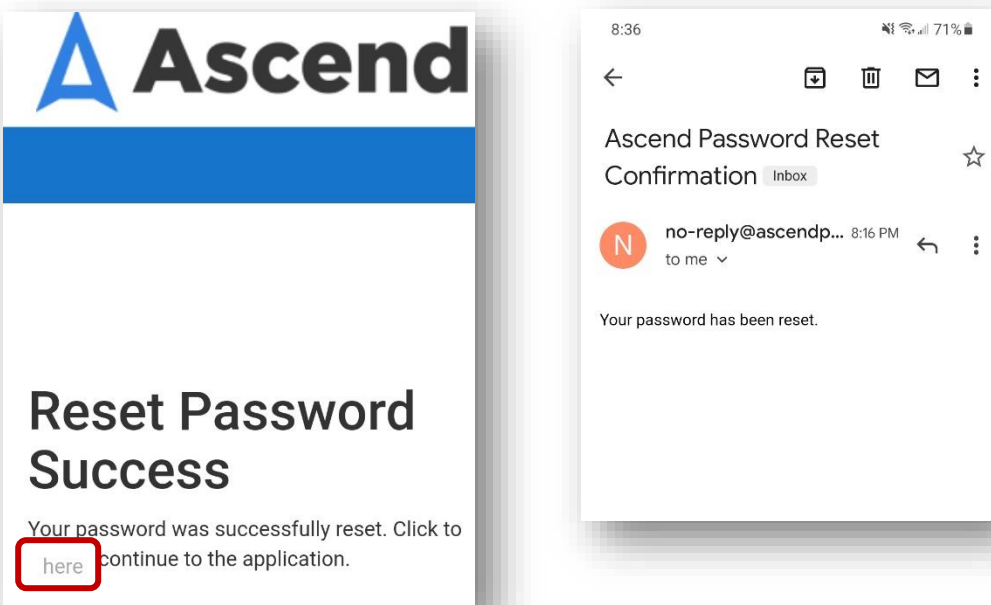
171. Click on the link in your email to reset your password and once you have entered your new password, click on the “Create Password” button



The image shows two side-by-side screenshots. The left screenshot is an email titled "Ascend Forgot Password" from "no-reply@ascendp...". The email body contains a long URL for password reset. A red arrow points from this URL to the right screenshot. The right screenshot is a web form titled "Reset Password" with the Ascend logo at the top. It asks the user to "Please choose a new password for your account." and has two input fields: "Password" and "Confirm Password". A blue "Create Password" button is at the bottom, highlighted with a red box and a red arrow pointing to it from the left.

172. Next, click on the “Here” link to go back and login with your new password. You will also get a email notifying you that your password has been reset.

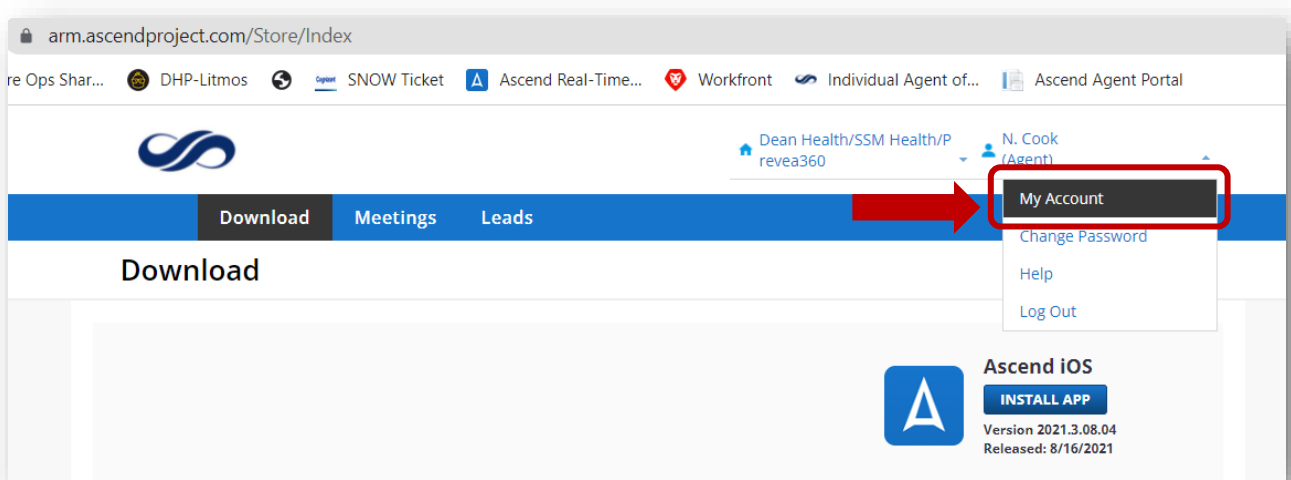
- a. If your new password doesn’t work right away, it could be timing of the reset so wait until you get the notification email



The image shows two side-by-side screenshots. The left screenshot is a web page titled "Reset Password Success" with the Ascend logo at the top. It says "Your password was successfully reset. Click to here continue to the application." The word "here" is enclosed in a red box. The right screenshot is an email titled "Ascend Password Reset Confirmation" from "no-reply@ascendp...". The email body says "Your password has been reset."

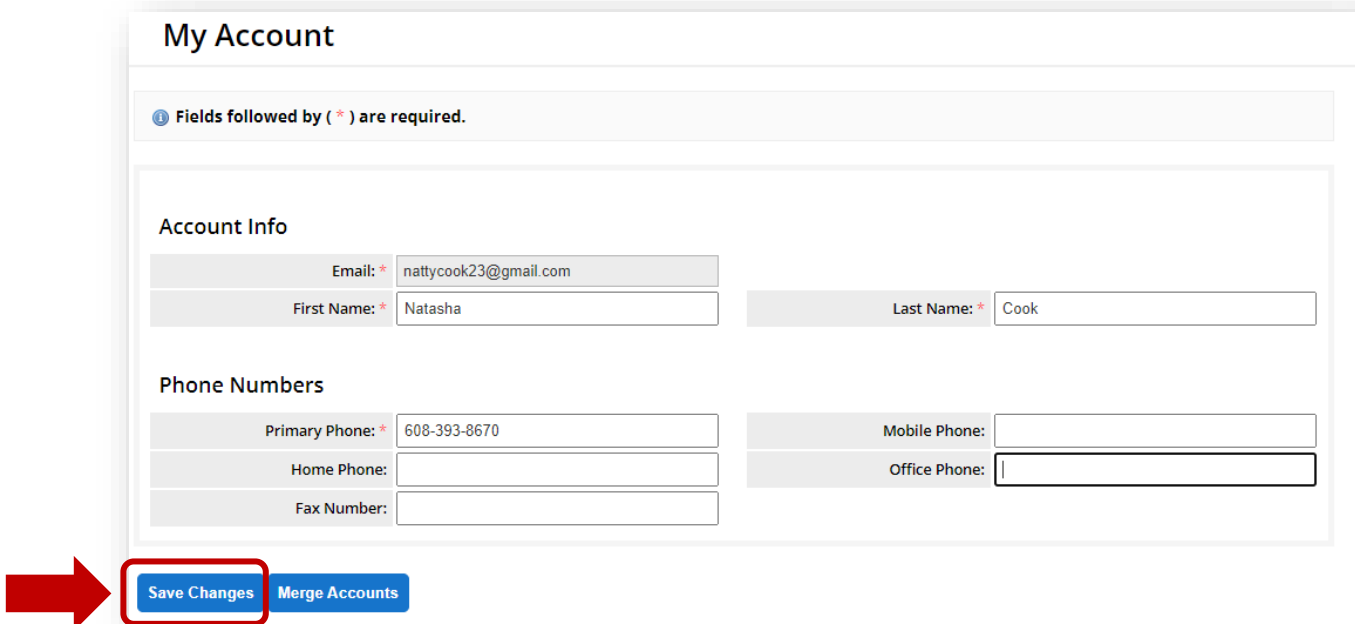
Updating Your Demographics

173. If you want to make any changes to your name, address, phone etc. you can do so by click on **“My Account”**



174. Make your necessary changes and click on the **“Save Changes”** button

- a. It's a good idea to make sure that you notify WFH of any changes as well to make sure our records are up to date

A screenshot of the 'My Account' form. The form title is 'My Account'. Below the title is a note: 'Fields followed by (*) are required.' The form is divided into two sections: 'Account Info' and 'Phone Numbers'. In the 'Account Info' section, there are three input fields: 'Email: *' with the value 'nattycook23@gmail.com', 'First Name: *' with the value 'Natasha', and 'Last Name: *' with the value 'Cook'. In the 'Phone Numbers' section, there are four input fields: 'Primary Phone: *' with the value '608-393-8670', 'Home Phone:', 'Fax Number:', 'Mobile Phone:', and 'Office Phone:'. At the bottom of the form, there are two buttons: 'Save Changes' and 'Merge Accounts'. A red arrow points to the 'Save Changes' button, which is also highlighted with a red box.

Definitions:

Ascend:

Ascend is a secure, encrypted real-time, cloud-enabled data platform that brings all necessary tools for field agent sales and member engagement interaction into one platform

ARM:

Ascend Real-Time Manager or ARM is the central hub for the Ascend platform. This web-based software gives leadership and administrators full control over all aspects of their field sales team's activity and offers transparency into that activity with reporting. Ascend also assists the sales teams with online quoting, enrollment, and lead management tools while safeguarding agents from complaints of misinformation and compliance questioning by securely recording the details of each meeting.

Ascend Agent Portal:

Allows you to quote and enroll clients and see any applications that have been submitted via the Ascend products

Power of Attorney (POA):

Authorized person to act on behalf of the individual under the state laws in Illinois and Missouri