SmartEnroll

User Guide

The Agent Online Enrollment Tool for

AARP Medicare Supplement Insurance Plans

AARP® | Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

UnitedHealthcare® Medicare Solutions

Confidential property of UnitedHealth Group. For Agent use only. Not intended for use as marketing material for the general public. Do not distribute, reproduce, edit or delete any portion without the express permission of UnitedHealth Group.

Learning Objectives

UnitedHealthcare® Medicare Solutions

- Describe the benefits of SmartEnroll, the agent online enrollment tool for AARP® Medicare Supplement Insurance Plans, insured by UnitedHealthcare Insurance Company
- Identify the technical requirements for online enrollment
- Complete an online enrollment application using either a signature pad or touch device
- Use the AARP membership portal to verify or renew AARP membership or sign-up a new member
- Identify resources you can go to for help

SmartEnroll

AARP® | Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Getting Started with SmartEnroll

Benefits

UnitedHealthcare Medicare Solutions

UnitedHealthcare is pleased to introduce SmartEnroll, an online enrollment application for AARP Medicare Supplement Insurance Plans.

SmartEnroll will:

- ✓ Speed up processing time,
- ✓ Prevent errors,
- ✓ And enroll consumers more quickly!

SmartEnroll

AARP | Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

What Can SmartEnroll Do for You?

UnitedHealthcare Medicare Solutions

SmartEnroll

SmartEnroll also allows you to:

- Fill out state-specific enrollment applications
  - "Smart" enrollment application populates sections of the paper application based on information provided
- Obtain a premium rate quote quickly
- Join, renew or verify AARP membership for the consumer
- Fill out ancillary forms, such as the Replacement Notice, if required
- Sign up the consumer for:
  - Electronic Funds Transfer (EFT) for initial premium payment and subsequent monthly payments can be set up as recurring EFT payments, or
  - EFT for initial premium payment and ongoing coupon payments via check.
- Save a draft and resume filling out an AARP Medicare Supplement enrollment application (up to 90 days)
- View submitted AARP Medicare Supplement enrollment applications (up to 90 days)

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Signature Capture

UnitedHealthcare Medicare Solutions

- SmartEnroll requires signatures to be captured from you and the consumer.

- If you wish to submit an online enrollment application for a consumer, signatures must be captured via a:

  ✓**Signature pad** or,

  ✓**Touch screen device** (i.e. tablet)

SmartEnroll

AARP Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Technical Requirements for Tablets

UnitedHealthcare Medicare Solutions

SmartEnroll is compatible with most **portable tablets and touch screen devices**. It supports a variety of operating systems and browsers.

It has been tested on the following:

- Apple® iPad Air 2
- Samsung Galaxy Tab S 10.5
- Amazon Kindle Fire HDX
- Google Nexus 9

If your tablet is not listed above, please test your device. Enter SmartEnroll by starting a new applications, navigate to the “What You Need” screen, select “Touch Device" and follow the instructions on the screen.

Note: SmartEnroll is a web-based tool. Simply use the browser of your choice. No Apps to download!

SmartEnroll

AARP® Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Technical Requirements for Signature Pads

UnitedHealthcare Medicare Solutions

Signature Pads

- You have the option to purchase signature pads from the Insight e-store or any website/store that offers supported signature pads. (A list of supported signature pads can be found within the technical specifications PDF on the portal.)

- **Important!** For the signature pad to work within SmartEnroll, you need a one-time installation software downloaded to your computer.
    - For Internet Explorer 11, Firefox 24 (or newer), Chrome 34 (or newer) http://www.topazsystems.com/Software/sigweb.exe
    - For Internet Explorer 8: http://www.topazsystems.com/Software/sigplus_su.exe

SmartEnroll

AARP® Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Technical requirements for Signature Pads (cont'd)

UnitedHealthcare Medicare Solutions

Operating System (OS)

- Windows 7 and 8 (running Java version 6 or higher)

Internet Browser Compatibility

- Internet Explorer versions 8 and 11
- Firefox 24 (or newer)
- Chrome 34 (or newer)

If your computer's configuration is not listed above, please test your setup. Enter SmartEnroll by starting a new application, navigate to the "What You Need" screen, select "Signature Pad" and opt to test your signature pad.

SmartEnroll

AARP® Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Additional Items

UnitedHealthcare Medicare Solutions

Printer

- We strongly recommend that agents provide applicants with a printed copy of the completed application and associated forms after the application has been submitted.

Fax

- If you have additional documents (such as Legal or Guaranteed Issue documents) that are needed to process the online enrollment application, please fax in the required documents to the following fax number: **248-524-5747**. This fax number must only be used to provide additional documentation for applications submitted via SmartEnroll.
- A fax coversheet is provided on the submission confirmation page for your convenience.
- Please be sure to include the consumer's name, address and AARP membership number on the fax coversheet.
- Once you receive a fax receipt confirmation, please return original documents to the consumer or destroy copies in a secured manner.

SmartEnroll

AARP | Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Additional Items (cont'd)

UnitedHealthcare Medicare Solutions

Adobe Acrobat Reader

- At the end of the enrollment process, you and the consumer must review all forms (application, EFT form, ancillary forms) in Adobe Acrobat PDF prior to submission.
- Adobe Acrobat Reader is available for free download at http://get.adobe.com/reader

E-mail addresses

- The consumer is asked to provide consent to allow UnitedHealthcare to send important account information and product offers via email.
- If the consumer prefers not to consent (or does not have an email address), then you must submit a paper enrollment application and exclude the consumer's email address from the paper enrollment application.

SmartEnroll

AARP® Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Security

UnitedHealthcare Medicare Solutions

Full-disk Encryption Solution

- As Business Associates of UnitedHealthcare, agents are required to encrypt all desktops and laptops.
- For more information, click on the following:
  - Privacy and Security: Protecting Member Information and Incident Reporting
  - Privacy and Security: Encryption Changes

☑ Security and Privacy Check

All UnitedHealth Group employees, contracted workers and business associates (including agents) have a responsibility to protect consumer and member Protected Health Information (PHI).

To protect PHI, agents are prohibited from:

- Storing documents electronically on their desktop/laptop and scanner.
- Placing consumer/member information on a jump drive (or similar portable storage device).

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Before Getting Started

UnitedHealthcare® Medicare Solutions

Items to note before starting an online enrollment application:

- ✓ You must provide the consumer with the full AARP Medicare Supplement **enrollment kit.** The kit must include the "*Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare.*"
- ✓ Using the enrollment kit, **review** the available plans in your state/area and **quote** applicable rate(s) prior to starting a new online enrollment application.
- ✓ SmartEnroll will display the state-specific enrollment application and associated forms (Replacement Notice, Electronic Funds Transfer Form, and state-specific forms for FL, IL, KY and OH). You must **review** each question and statement with the consumer – either by sharing your computer screen with them, or asking them to read along in the enrollment kit.
- ✓ Before you enter SmartEnroll, **confirm** that the consumer understands and is willing to sign the forms electronically via signature pad or touch device.

SmartEnroll

AARP® | Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Before Getting Started – cont'd

UnitedHealthcare® Medicare Solutions

- ✓ If the consumer is not an AARP member, **AARP membership** must be purchased either by credit card within SmartEnroll OR by calling 1-866-331-1964, Monday-Friday 7 a.m. – 11 p.m., Saturday, 9 a.m. – 5 p.m. ET.
- ✓ When using SmartEnroll, the initial premium payment is required through **Electronic Funds Transfer** (EFT).
  - o Subsequent monthly payments can be set up as recurring EFT payments or ongoing coupon payments via check.
  - o Remind the consumer to have their bank information available for your appointment so they can read it to you when it comes to the EFT section of SmartEnroll.

SmartEnroll

AARP® Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Completing an Online Enrollment Application

Access to SmartEnroll

UnitedHealthcare Medicare Solutions

To access SmartEnroll, you must be:

- Contracted with UnitedHealthcare
- Certified and authorized to offer AARP Medicare Supplement Plans for the current or future year
- Licensed and appointed in the states where the SmartEnroll is available.
  - Available in all states

SmartEnroll

AARP | Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Getting into SmartEnroll

UnitedHealthcare Medicare Solutions

- Log into the Agent Portal
- Select the “Online Enrollment” tab
- Select “AARP Medicare Supplement Online Enrollment”
- Select “Start a new AARP Medicare Supplement Online Enrollment Application” to launch SmartEnroll **OR**
- Select “Resume a saved or view a submitted AARP Medicare Supplement online enrollment application” to resume a saved or view a submitted enrollment application

Important: Please allow pop-ups for the Distribution Portal URL or remove pop-up blockers.

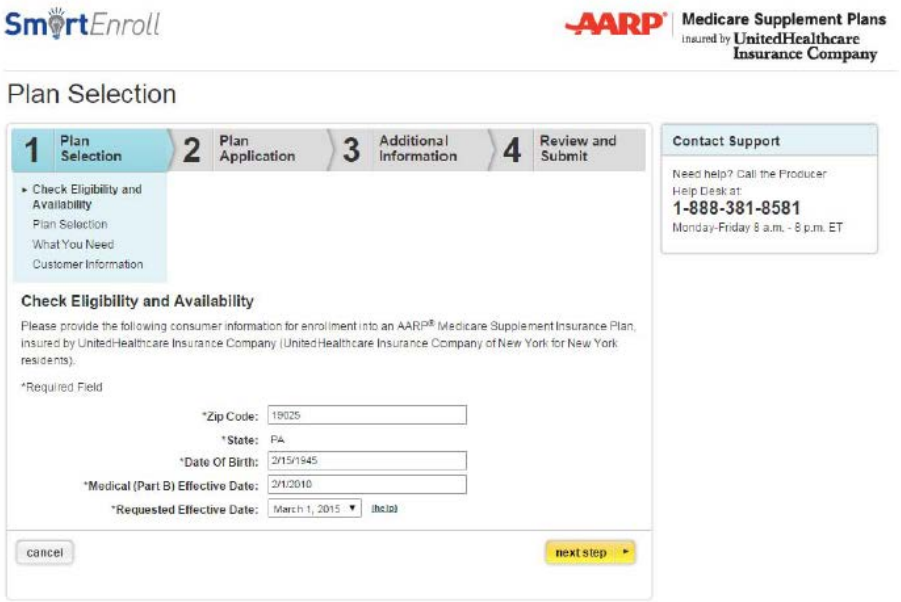
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Plan Selection

UnitedHealthcare Medicare Solutions

Check Eligibility and Availability

- Enter the consumer's permanent resident ZIP code.
- The "State" field will be pre-populated based on the ZIP code.
- Enter the consumer's date of birth and the Medicare Part B effective date (including future effective date, if applicable).
- Select the consumer's requested effective date. Effective dates can be entered up to three months into the future. The consumer must be age 65 or older at the time of the requested effective date to use SmartEnroll



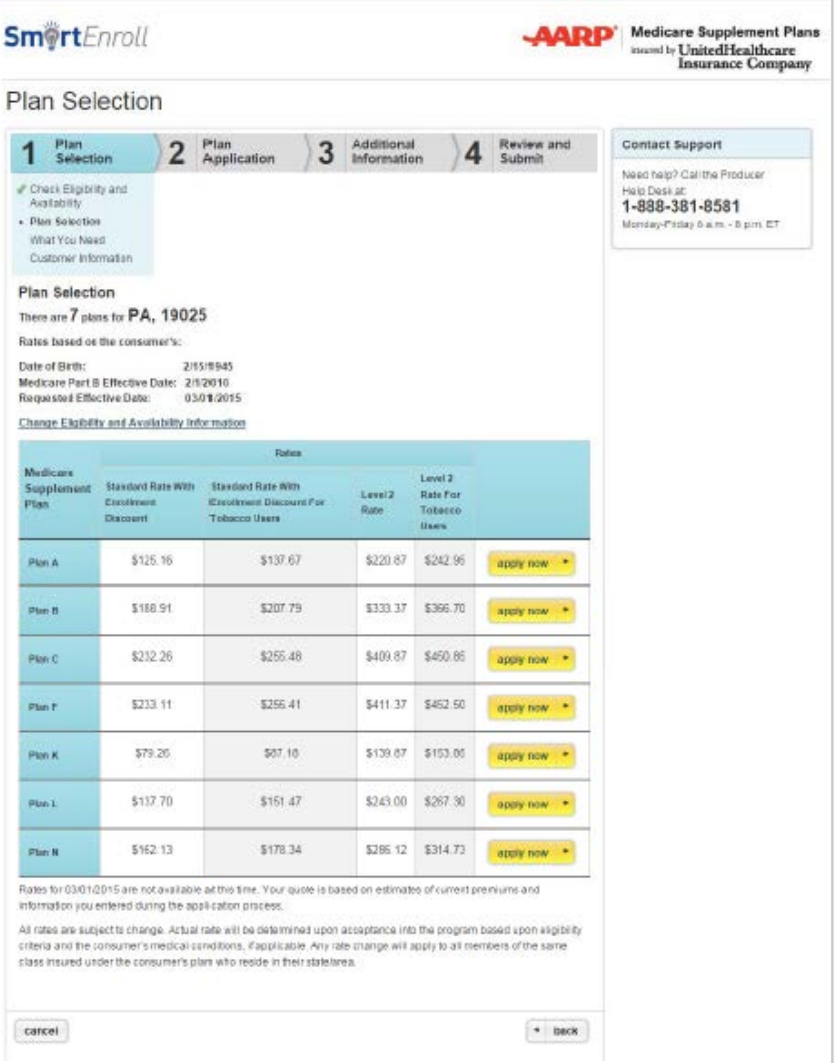
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Plan Selection

UnitedHealthcare® Medicare Solutions

Plan Selection

- Based on the information provided on previous screen, the available plans and estimated monthly premium rates for each plan will be displayed. A single estimated amount is provided after all the application questions have been answered.
- Premium rates in SmartEnroll do not include discounts for multi-insured, electronic funds transfer, and annual payer. Relevant discounts will be applied after the application is processed.
- If the consumer is eligible, potential premium rates will include the Enrollment Discount.
- Based on discussions with the consumer, please select the plan that best fits the consumer's needs.



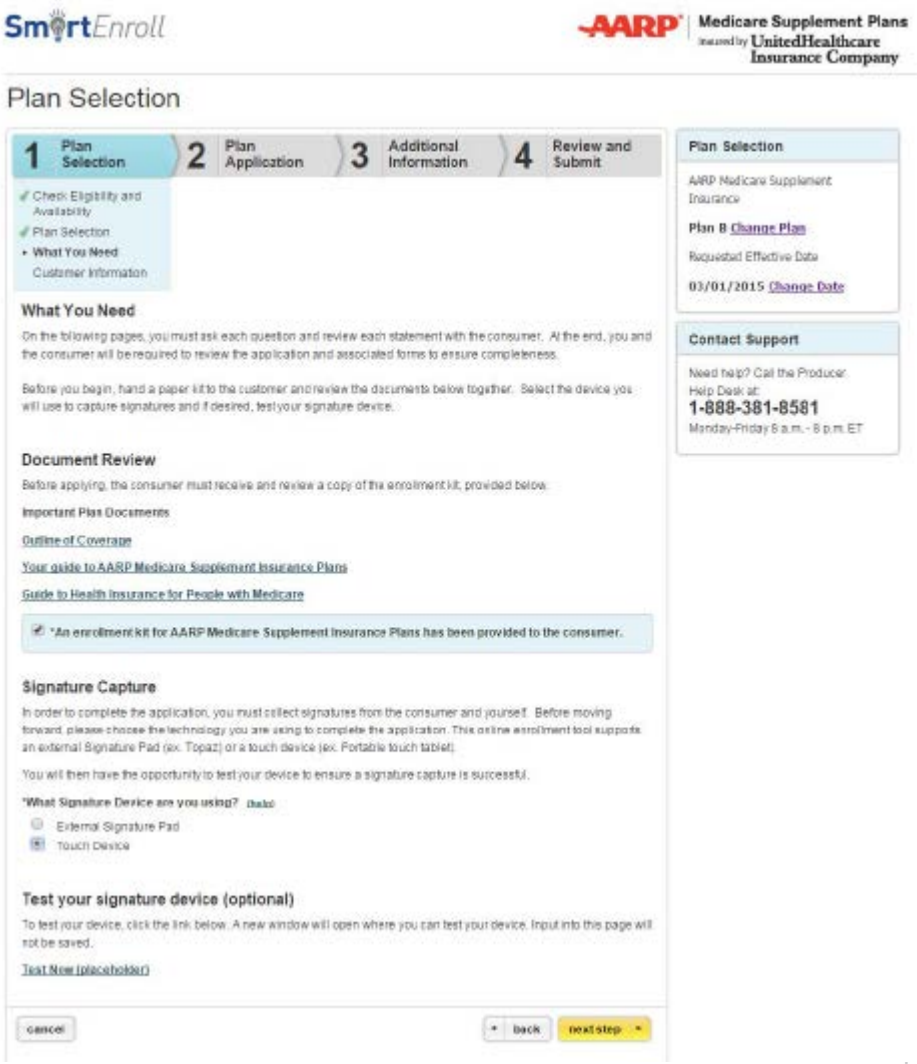
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Plan Application

UnitedHealthcare® Medicare Solutions

What You Need and Document Review

- Before you start to answer the application questions, you must provide the consumer with a copy of the AARP Medicare Supplement enrollment kit and attest to doing so.
- Indicate the type of device to be used when capturing the electronic signature- either via signature pad or touch device.
- You will also be given an opportunity to test your signature capture device. This is optional.



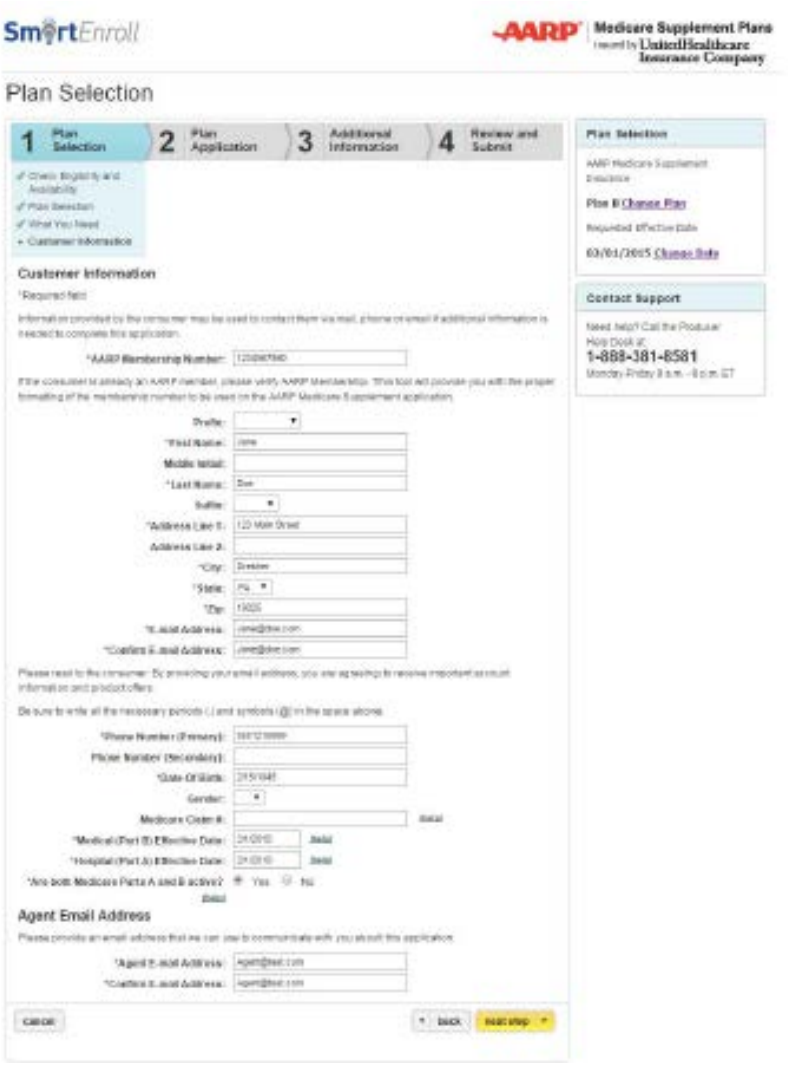
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Plan Selection

UnitedHealthcare®
Medicare Solutions

Consumer Information

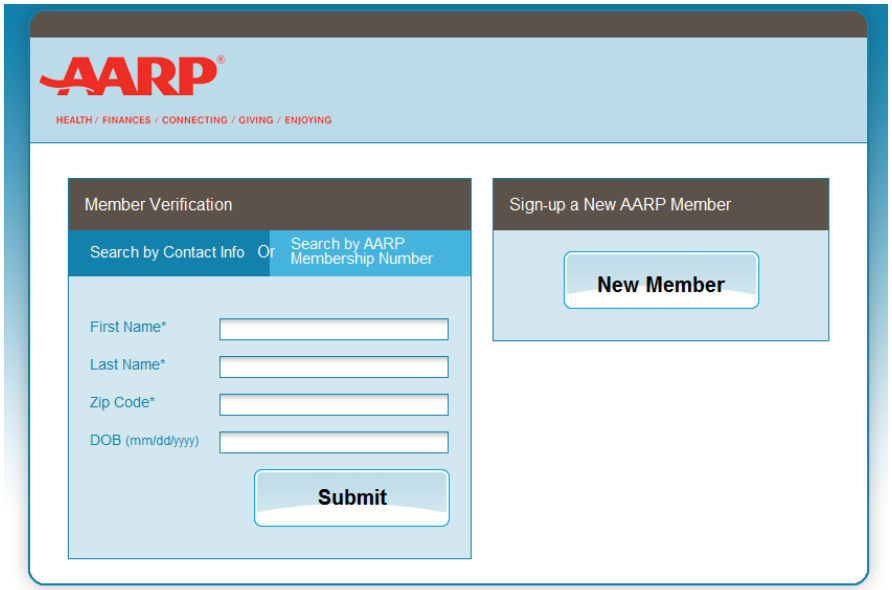
- AARP membership is required to enroll in an AARP Medicare Supplement Plan. Please click on the link next to the corresponding field to apply, renew and verify the consumer's AARP membership.
- Please fill out the consumer and agent information on this page. Any information that was entered on the previous page will pre-populate on this and future screens. If you need to make a change, you will be prompted to return to the original page where you initially entered the information.
- Information provided may be used to contact the consumer via mail, phone or email if additional information is needed to complete this enrollment application.



Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

AARP Membership Portal

If you select to join, renew or verify AARP membership, a new window will appear.



Member Verification

- If the consumer is already an AARP member or resides in the same household as an AARP member, you can verify the member number or look the member up by contact information of it is not known.
- Member search is based on exact member information. Please make sure the entered information is accurate.

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

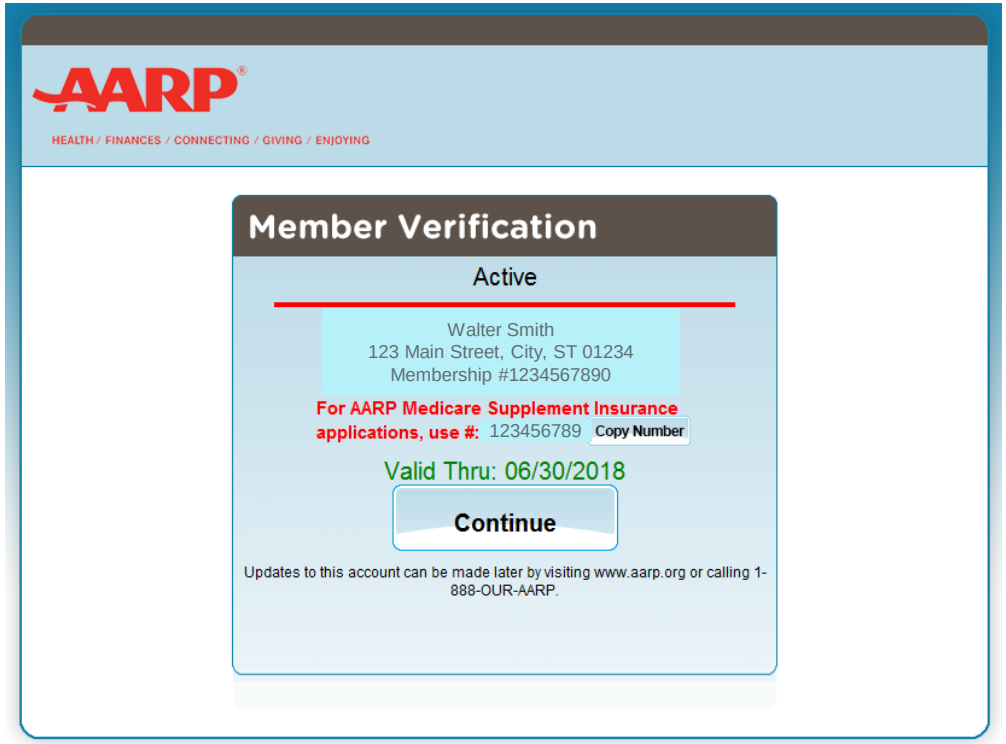
AARP Membership Portal

UnitedHealthcare Medicare Solutions

Search Results

- When an AARP membership number is found, clicking the 'Copy Number' button will copy the number into memory, which can be pasted into the product application screen.

- If the membership expires within six months, the consumer has the option to renew. A credit card must be used to renew.



Close the AARP membership window to return back to SmartEnroll.

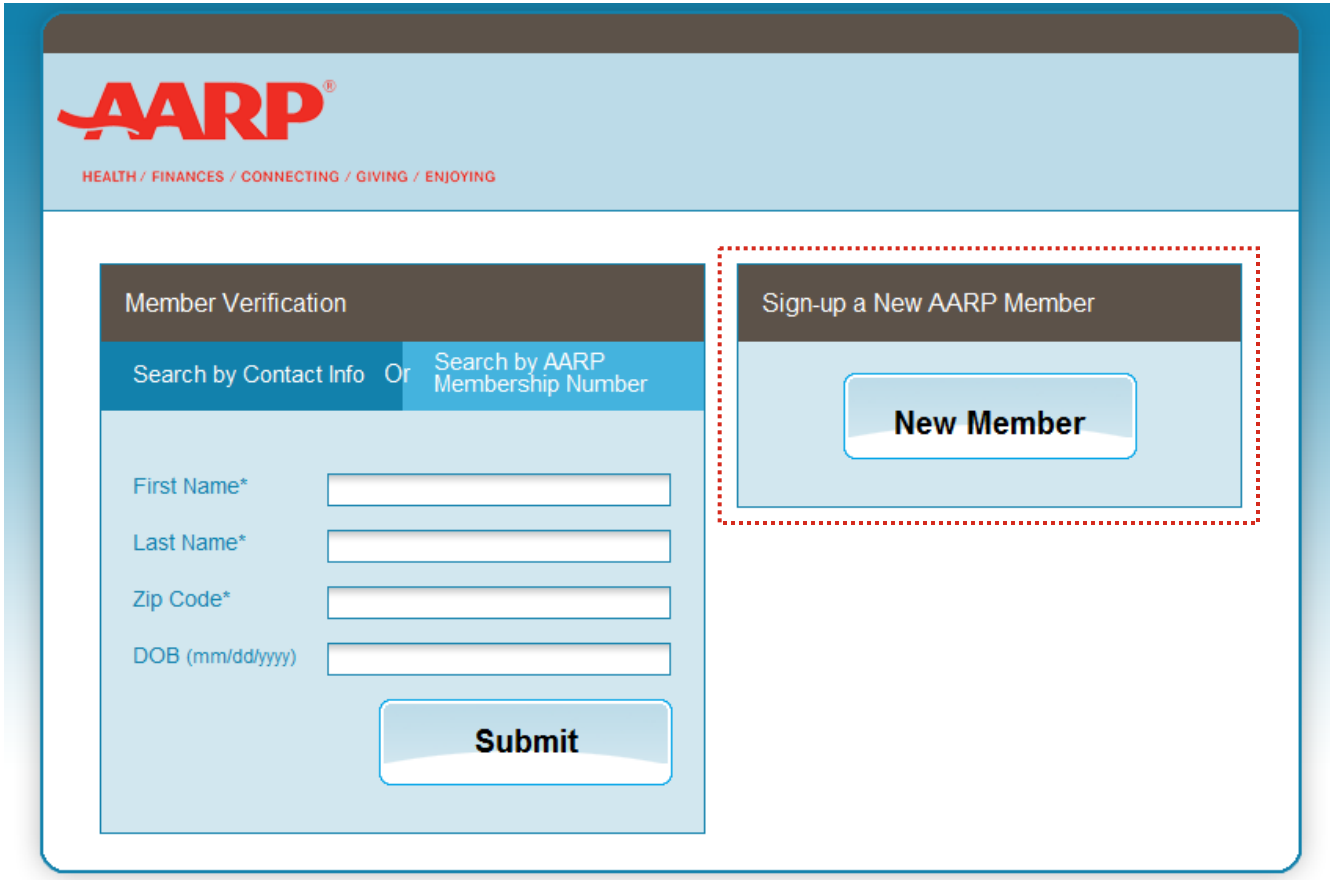
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

AARP Membership Portal

UnitedHealthcare Medicare Solutions

New Member

- Click on “New Member” to sign-up a consumer for AARP Membership.



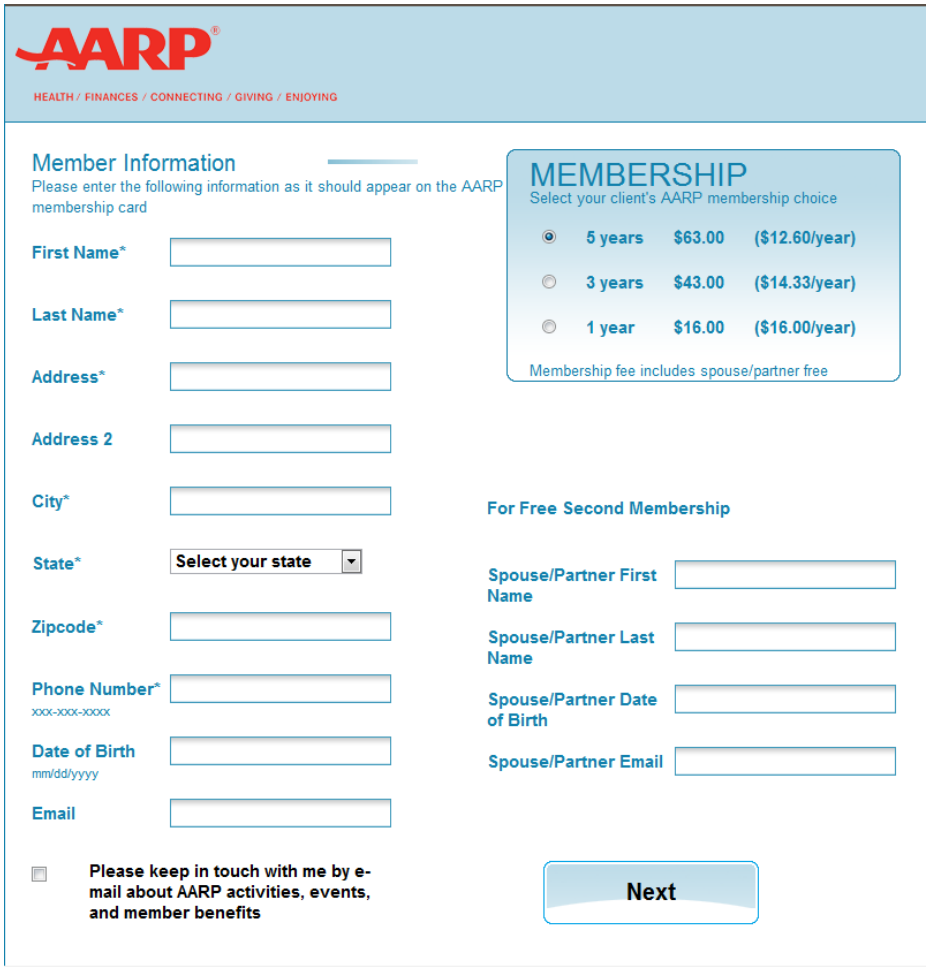
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

AARP Membership Portal

UnitedHealthcare Medicare Solutions

New Member

- Please complete the fields for new AARP membership.
- Please make sure the address is correct. The system verifies the address against a national database
- Note: 5-year membership is pre-selected



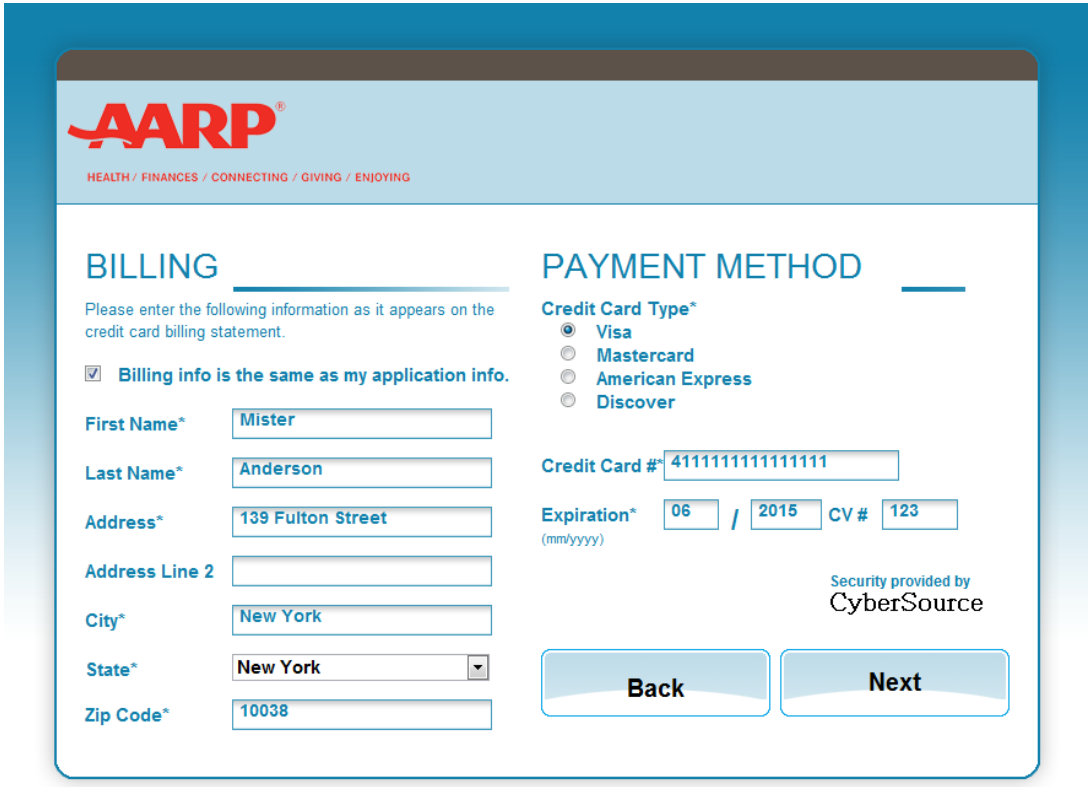
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

AARP Membership Portal

UnitedHealthcare Medicare Solutions

AARP Membership Billing Information

- Please enter the consumer's credit card information
  - Note: Agents cannot purchase an AARP membership for the consumer.



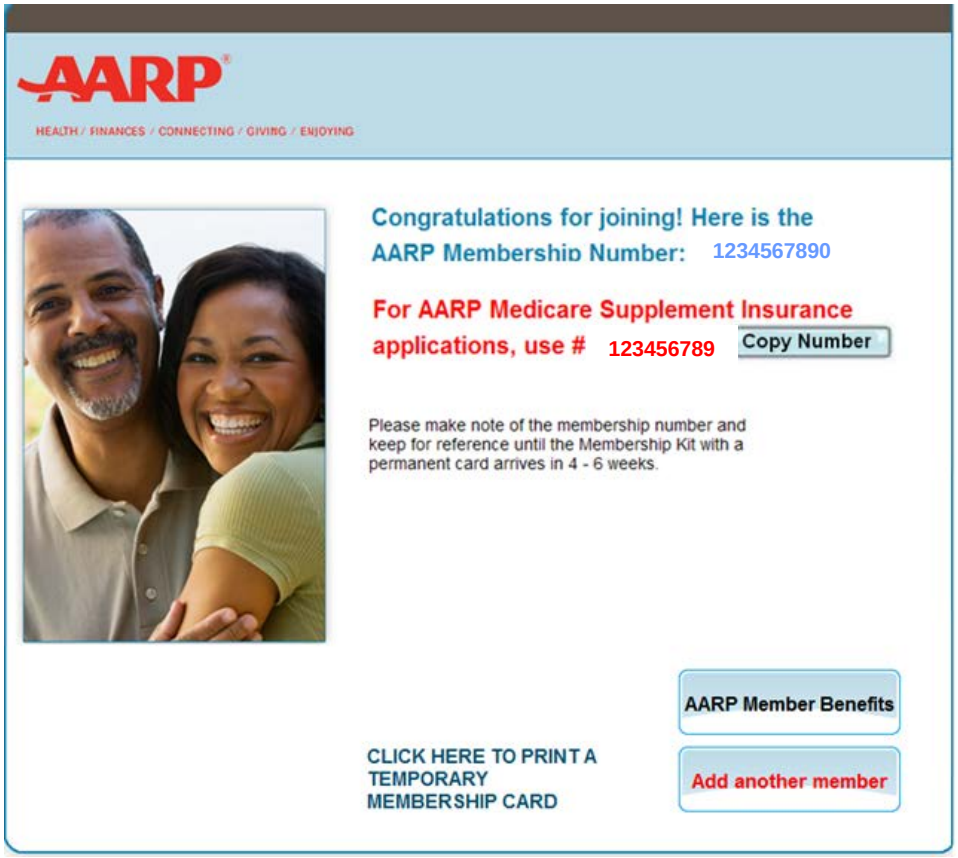
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

AARP Membership Portal

UnitedHealthcare® Medicare Solutions

Confirmation Screen

- The first number displayed is the 10-digit AARP Membership number that should be shared with the AARP member (and will display on the temporary AARP Membership card).
- **The second number is a reformatted number required for AARP Medicare Supplement application processing.**
- Click the ‘Copy Number’ button to copy the number into memory, which can be pasted into the product application screen.



Close the AARP membership window to return back to SmartEnroll.

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Plan Application

UnitedHealthcare Medicare Solutions

Print and Save for Later

Starting from this page forward, you have the option to “Save For Later” and “Print Application.”

Print

- You can print an application with the data you have entered thus far and submit the application via mail, if you or the consumer desires.
- **Note:** The Electronic Funds Transfer (EFT) form for one-time payment in this online enrollment PDF should not be submitted via mail. Please use the EFT forms in the paper enrollment kit when submitting an enrollment application via mail.

SmartEnroll

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Plan Application

UnitedHealthcare Medicare Solutions

Save for Later

- The “Save for Later” functionality allows you to save an incomplete online enrollment application for up to 90 days.
- If you choose the “Save for Later” option, signatures will be cleared.
- When resuming an enrollment application, you must review the entire enrollment application again. Please ask all questions and reconfirm all prior answers, as the consumer’s status or medical conditions may have changed.
- Signatures must be recaptured via signature pad or touch device.

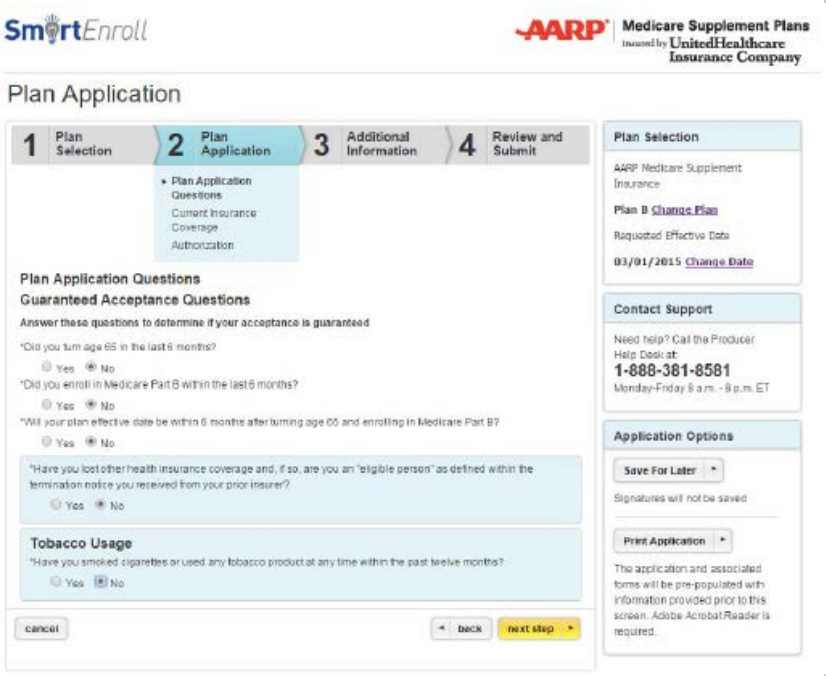
SmartEnroll

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Plan Application

Guaranteed Acceptance

- Please answer all questions on this page. The responses to some of the Guaranteed Acceptance questions have been pre-populated based on the consumer's date of birth, Medicare Part B Effective Date and Requested Effective Date that you entered earlier. Please provide responses to all other required questions.
- As you enter the consumer's answers to questions, SmartEnroll displays only the subsequent questions required for the consumer.



Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

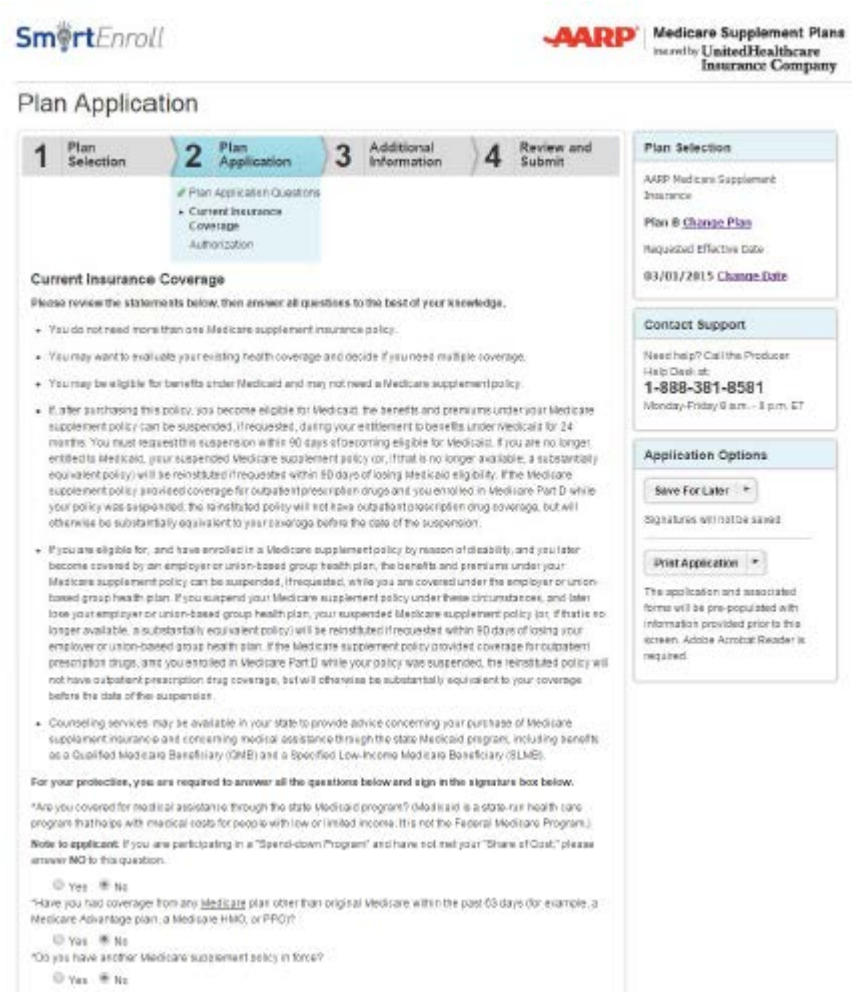
Plan Application

UnitedHealthcare® Medicare Solutions

Current Insurance

- Review the statements and questions regarding past and current insurance coverage with the consumer. The consumer must answer all questions to the best of his/her knowledge.

- Additional questions may display, depending on how the consumer answers each question.



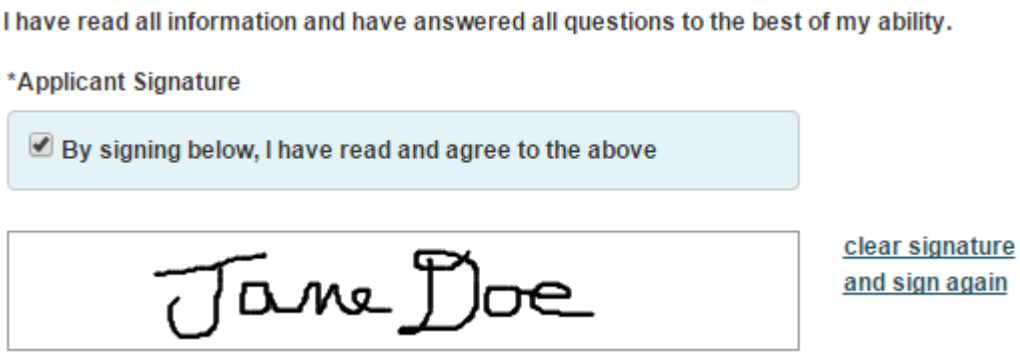
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Plan Application

UnitedHealthcare Medicare Solutions

Consumer Signature

- The consumer must sign the application using a signature pad or touch device.
- Please have the consumer consent to the statements above by checking the box to activate the signature area below and then sign within the signature box. Their signature will appear on the screen.
- To clear and re-sign, the consumer will need to click the “clear signature and sign again” link next to the signature box.



Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

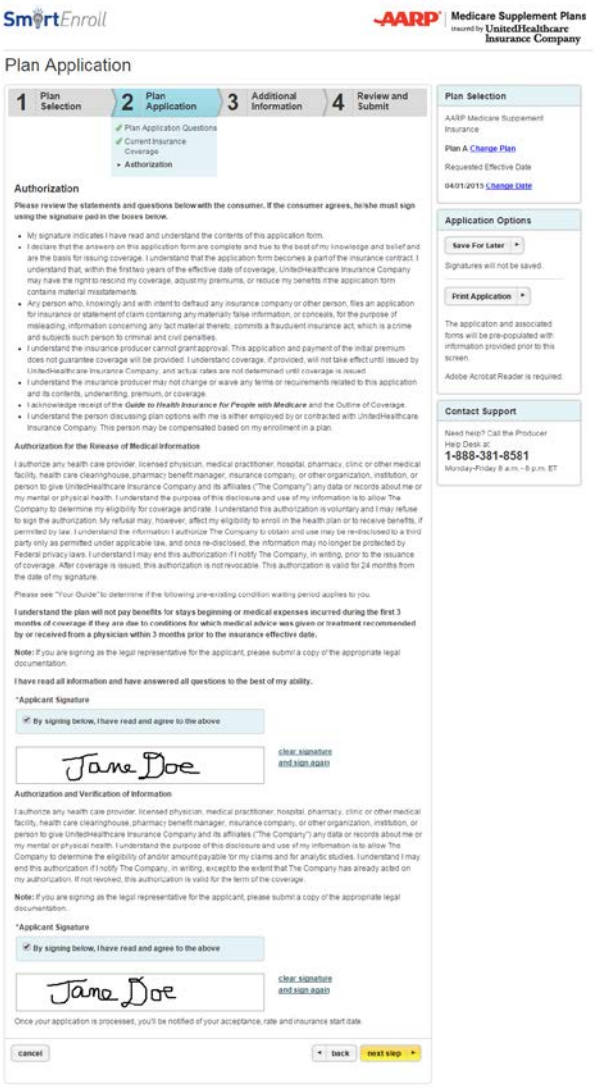
Review and Submit

UnitedHealthcare Medicare Solutions

Review and Sign

- The consumer must be able to read all of the statements on this page and agree.

- If the consumer agrees, he/she needs to sign, using the signature pad or touch device in the boxes indicated.



Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

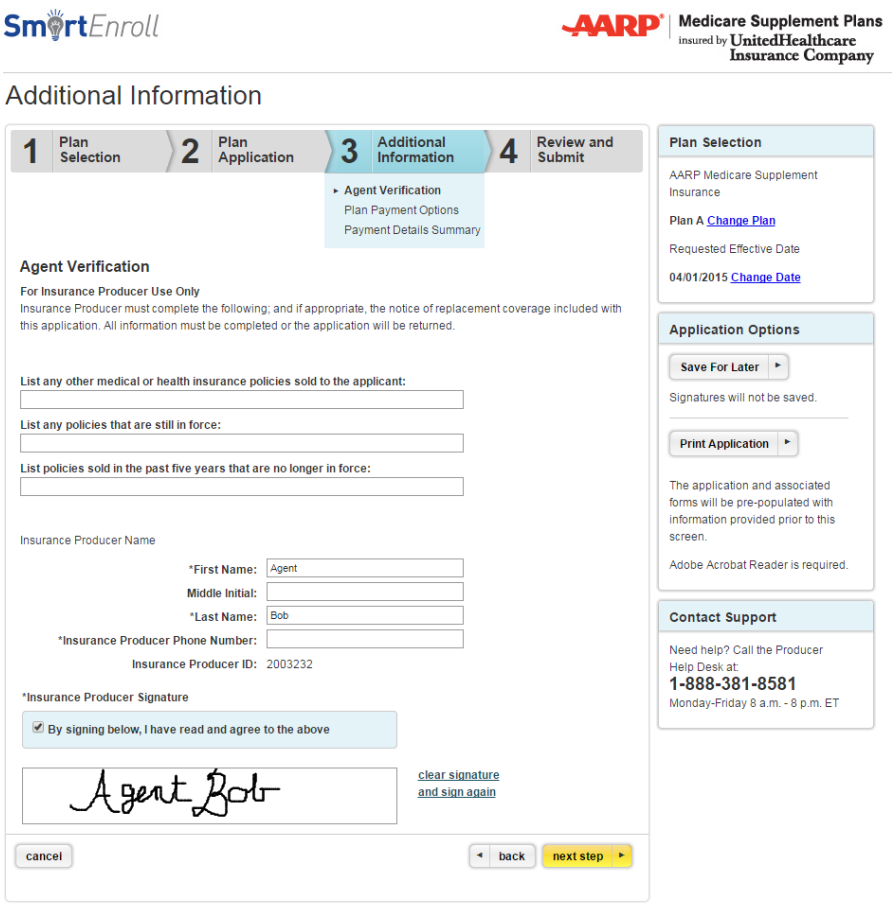
Review and Submit

UnitedHealthcare Medicare Solutions

Agent Verification

- As an agent, you must complete the information on this page. Leave blank if the questions do not apply.

- Sign your name, using the signature pad or touch device, to confirm you have read and agree with the information on this page.



Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Review and Submit

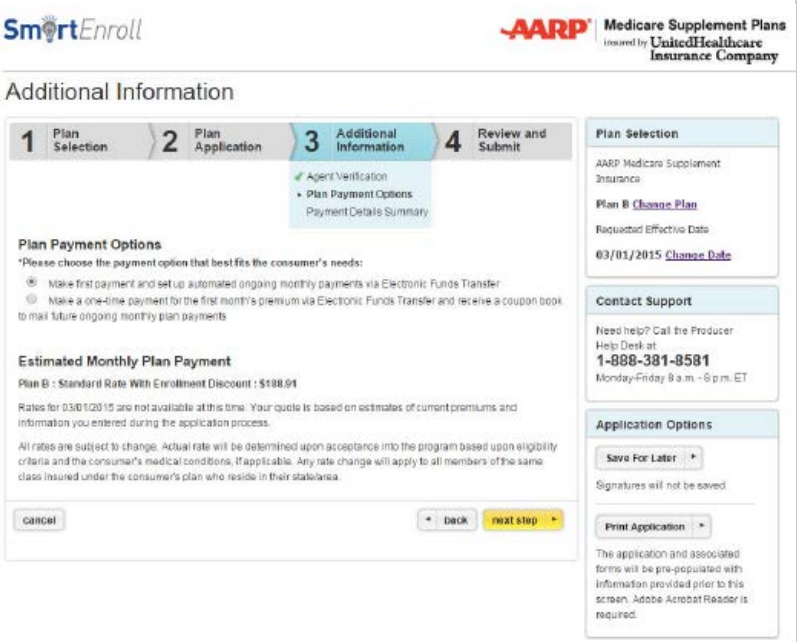
UnitedHealthcare Medicare Solutions

Plan Payment Options

- Choose the payment option that best fits the consumer's needs. The consumer can choose either a one-time Electronic Funds Transfer (EFT) and ongoing monthly coupon booklet payments OR a recurring EFT premium payment.

- An estimated monthly plan rate is calculated and provided. This rate is based on the answers provided.

- **Note:** Please inform the consumer that the rate is subject to change upon additional review of the application.

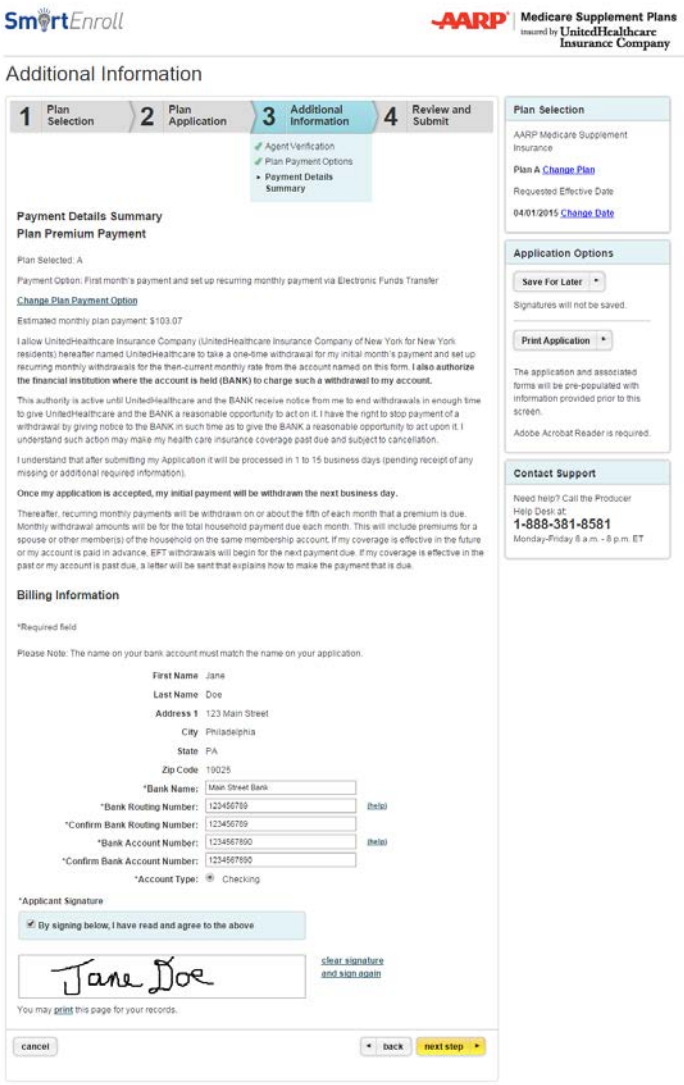


Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Review and Submit

Payment Details Summary

- Depending on which option was selected on the previous page, you will be presented with the appropriate EFT form.
- The name on the bank account must match the name on the enrollment application. Therefore, the consumer (bank account holder) must read all of the statements, agree and sign by using the signature pad or touch device.
- All required banking information fields must be completed.



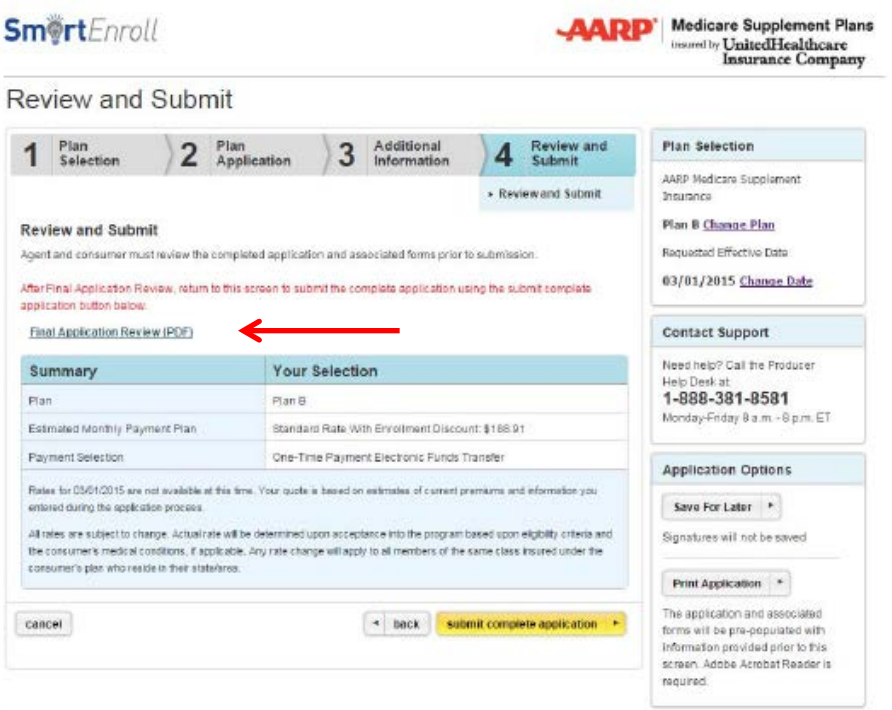
Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Review and Submit

UnitedHealthcare Medicare Solutions

Final Application Review

- Before submitting the application, you are required to have the consumer review all information on the application and associated forms in Acrobat PDF.
- If any changes need to be made, close the PDF and use the back button in SmartEnroll to go back to the page where you need to make a correction.
- If no changes are needed, we strongly encourage that you provide a printed copy of the enrollment application and associated forms to the applicant.



Note: For privacy and security purposes, agents are prohibited from saving the application PDF to their computers, jump drives and other portable storage devices. Agents can access the application via SmartEnroll under "Submitted Applications".

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

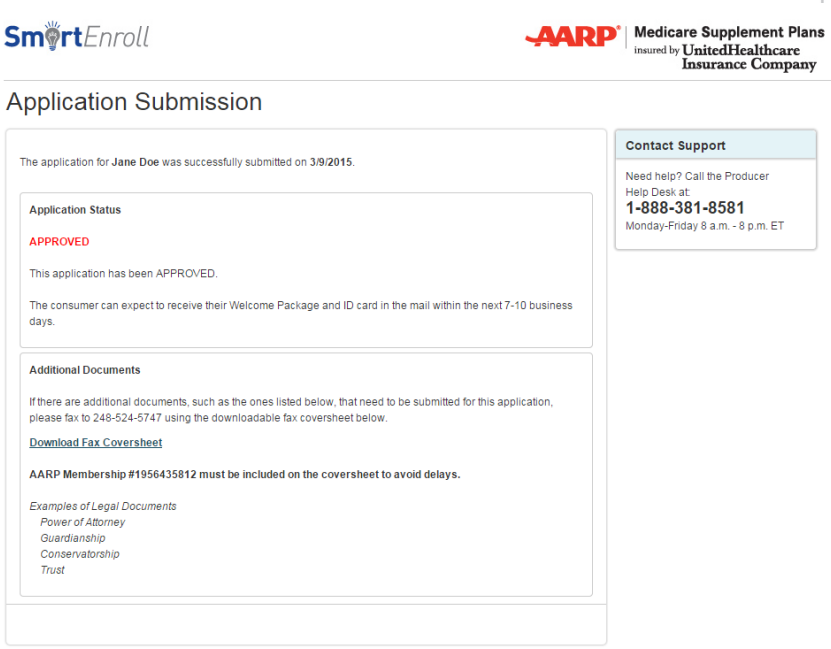
Application Submission

UnitedHealthcare Medicare Solutions

Submission Confirmation

- Upon submitting the application, you will be presented with a confirmation screen, which will include an immediate application status! In some cases, applications could be accepted within seconds.
- For some enrollment applications, (i.e. missing documentation for a Guaranteed Issue scenario), it could take approximately 14 business days to process, following the receipt of any additional documentation or information that may be required.
- You will also be given the opportunity to view and/or print the submitted application.

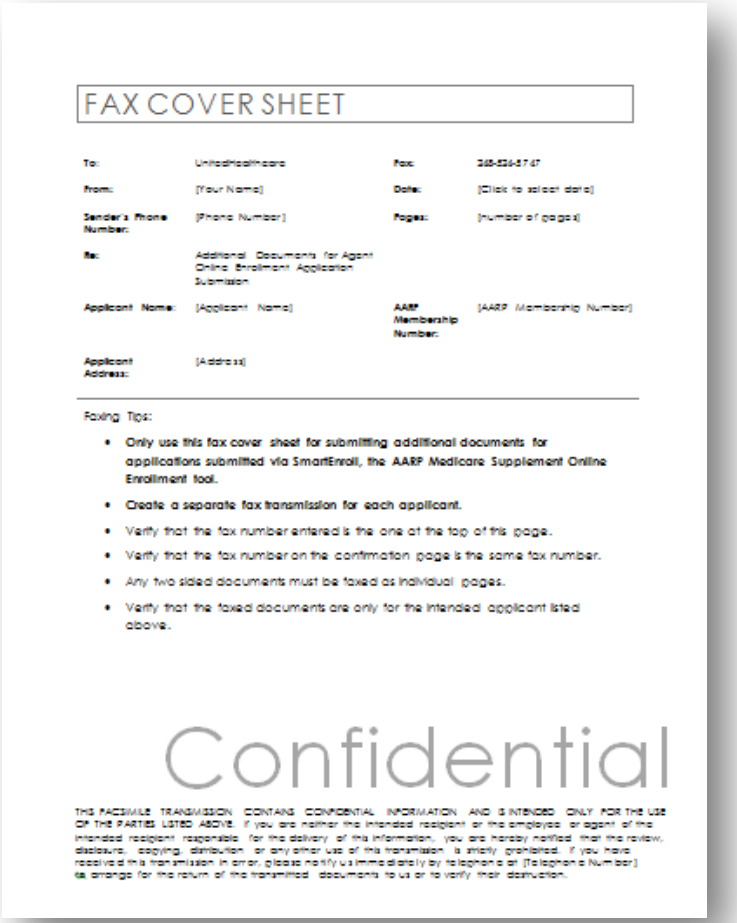
Confirmation emails will be sent to you and the consumer within 10 minutes after the application is submitted.



Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Application Submission

- If you have additional documents (such as Legal or Guaranteed Issue documents) that are needed to process the online enrollment application, please fax in the required documents to the following fax number: **248-524-5747**.
  - This fax number must only be used to provide additional documentation for applications submitted via SmartEnroll.
- A fax coversheet is provided on the submission confirmation page for your convenience.
- Please be sure to include the consumer's name, address and AARP membership number on the fax coversheet.
- Once you receive a fax receipt confirmation, please return original documents to the consumer or destroy copies in a secured manner.



FAX COVER SHEET

To:	UnitedHealthcare	Fax:	248-524-5747
From:	[Your Name]	Date:	[Click to select date]
Sender's Phone Number:	[Phone Number]	Pages:	[number of pages]
Re:	Additional Documents for Agent Online Enrollment Application Submission		
Applicant Name:	[Applicant Name]	AARP Membership Number:	[AARP Membership Number]
Applicant Address:	[Address]		

Faxing Tips:

- Only use this fax cover sheet for submitting additional documents for applications submitted via SmartEnroll, the AARP Medicare Supplement Online Enrollment tool.
- Create a separate fax transmission for each applicant.
- Verify that the fax number entered is the one at the top of this page.
- Verify that the fax number on the confirmation page is the same fax number.
- Any two sided documents must be faxed as individual pages.
- Verify that the faxed documents are only for the intended applicant listed above.

Confidential

THIS FACSIMILE TRANSMISSION CONTAINS CONFIDENTIAL INFORMATION AND IS INTENDED ONLY FOR THE USE OF THE PARTIES LISTED ABOVE. If you are neither the intended recipient or the employee or agent of the intended recipient responsible for the delivery of this information, you are hereby notified that the review, disclosure, copying, distribution or any other use of this transmission is strictly prohibited. If you have received this transmission in error, please notify us immediately by telephone at [Telephone Number] to arrange for the return of the transmitted documents to us or to verify their destruction.

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Applications

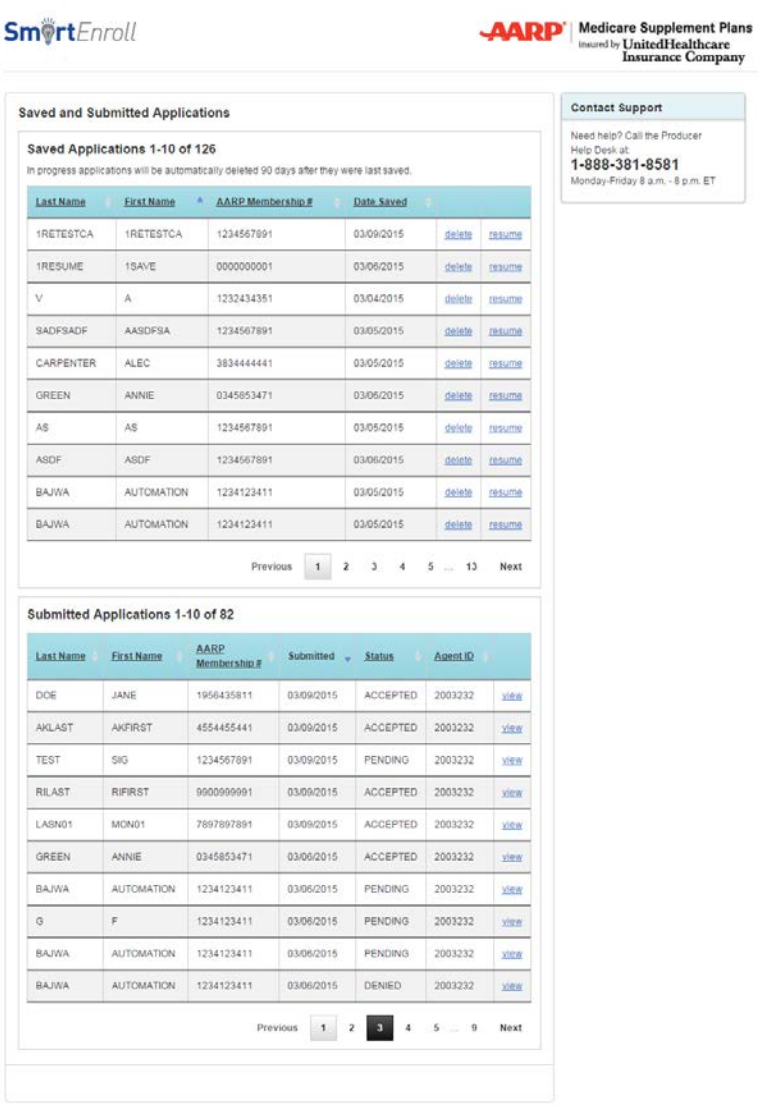
UnitedHealthcare® Medicare Solutions

Saved Application

- In-progress enrollment applications will be automatically deleted 90 days after they were last saved.
- When resuming an enrollment application, you must ask all questions and reconfirm all prior answers, as the consumer's status or medical conditions may have changed. Signatures must be recaptured via signature pad or touch device.

Submitted Application

- Submitted enrollment applications and associated forms will be available for viewing and printing for up to 90 days.



Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

Support Help

UnitedHealthcare Medicare Solutions

For additional support with questions related to SmartEnroll, please contact the Producer Help Desk (PHD):

Email phd@uhc.com

Please include your full name, writing number, contact information and a brief description of your issue

Call 888-381-8581

Hours of Operation – Monday through Friday

8 am to 8 pm EST

Please be prepared to enter your agent ID.

SmartEnroll

AARP® Medicare Supplement Plans insured by UnitedHealthcare Insurance Company

Proprietary Information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.