AI-SACM Call Center Training Guide

TELADOC™

Contents

AI-SACM Call Center Training

What Is Teladoc?

Teladoc was founded in 2002 and is the nation's first and largest telehealth provider. Teladoc physicians are U.S. board-certified and licensed in the state that a consult takes place in. The physicians can resolve many medical issues, 24/7/365, via phone or online video consults from anywhere is the USA.

The Teladoc process is designed to be very clean and easy to use. To obtain a consult members simply need to register, do their medical history and schedule! Teladoc has a 96% satisfaction rate and we resolve 90% of member issues with an average 16 minute call back time.

Teladoc is used for many **non-emergency** situations and is not a drug warehouse. Many of our members use us when:

- They are traveling
- Their doctor is out of town/not working
- They have limited access to an urgent care/ER for minor issues
- It is a weekend/holiday
- They need a second opinion, etc…

Many of our members use us for conditions such as:

- Pink eye
- UTI (Urinary Tract Infection)
- Cold and Flu symptoms
- Respiratory infections
- Seasonal Allergies
- And more!

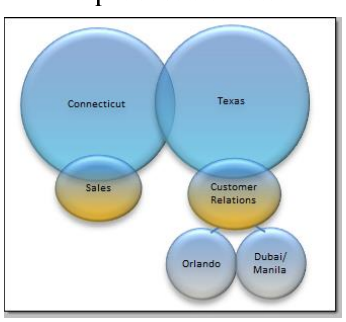
In case of emergency….

1. Prompt the member to call 911.
2. If the member insists on a consult, book the consult but document the situation in the call notes for the doctor.
3. Escalate the member to Teladoc so they can track the situation and report to Quality Assurance.

DO NOT discuss the situation with other reps or personnel.

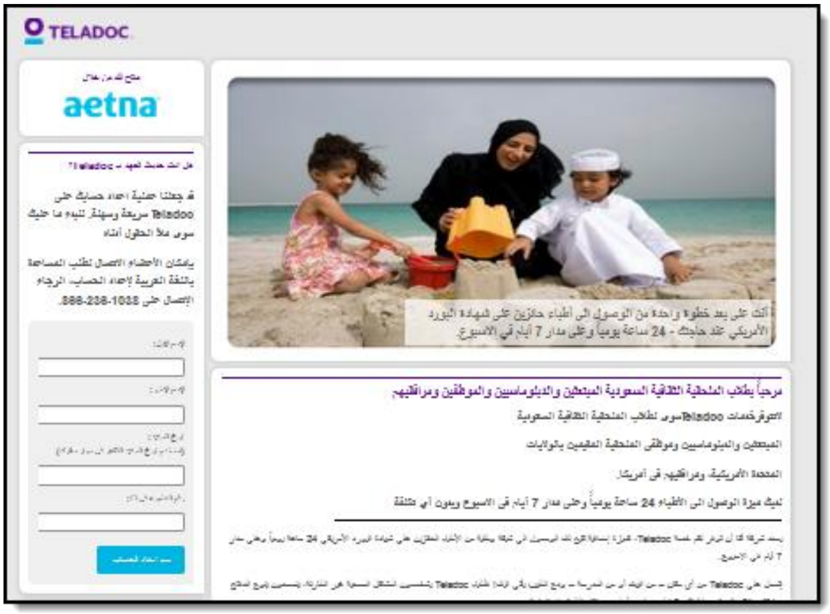
How Is Teladoc Structured

Teladoc has two corporate offices (Greenwich, Connecticut and Dallas, Texas). The Connecticut office houses the sales and IT department and Dallas houses the Customer Relations and clinical department. A general overview along with how you fit in is provided below.



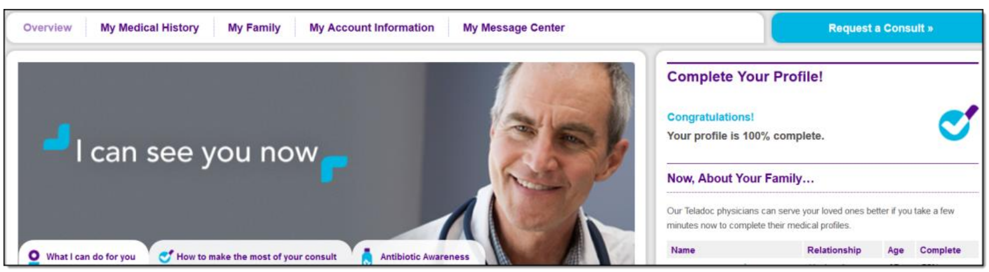
The Member Site

When members go to www.Teladoc.com/SACM they are presented with the below.



Returning members use هل أنت عضو مسجل؟ (Are you a registered user?) to login. Members needing to register use هل انت حديث العهد بـ Teladoc؟ (Are You New To Teladoc?)

Once the member is logged in, the home page appears as below.



If the member has completed part of their Medical History, their profile percentage complete will display on the right hand side. The blue text under "Informed Doctors=Better Care" are actually hyperlinks that will take the member to the areas that need to be finished to make their profile 100%. Family members will show on the right hand side as well (note: if the member is a minor, the primary can click on the minors name to update their medical history. Adults must log into their own account to update). Any doctor messages will display under "My Message Center" and the consultation history will display as well. Members will have tabs for managing their medical history, family, account information, etc...

Summary

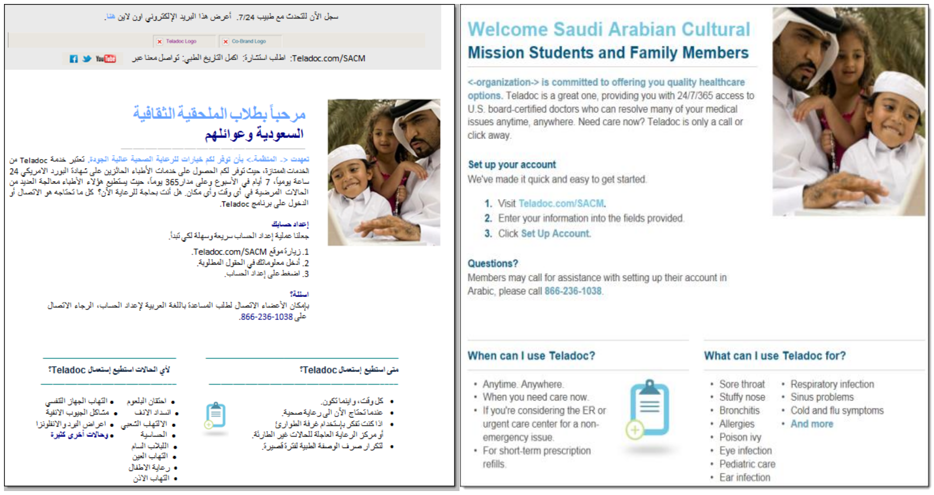
The Teladoc call center application is robust and provides a wealth of data and abilities. It is important to note that if a function can not be conducted in the call center application, one must contact the supervisor/lead. If the latter fails, reach out to the on call support for assistance. If the on call support can not be reached or if advised to do so, submit an escalation with details regarding what happened along with all of the required member information (detailed further below).

Call Center Impact

Teladoc will be asking you to use a custom URL to handle the day-to-day activities related to our members. The Firefox search browser can only be used for member transactions. No other browser (Ex: Internet Explorer, Safari, etc…) can be used.

SACM members are considered to be Aetna RTE. RTE stands for Real Time Eligibility. With RTE, when the member calls in to register or schedule a consult, their eligibility is directly verified against the Aetna database. This is how we are able to determine if a member can be registered or have a consult.

AI-SACM members will be made aware of Teladoc via a custom welcome Email.



Pending members are individuals who must be registered. Active members have been registered but do not necessarily have a Medical History Disclosure (MHD) associated with their profile. Therefore, when providing member assistance it is important to verify that their account is complete and up to date prior to scheduling.

Call Center URL: https://callcenter.sacm.teladoc.com/signin

Note: The "Backspace" button on the keyboard or the "back" on the search browser should **NOT** be used to return to the previous page. This function does not retain any new data.

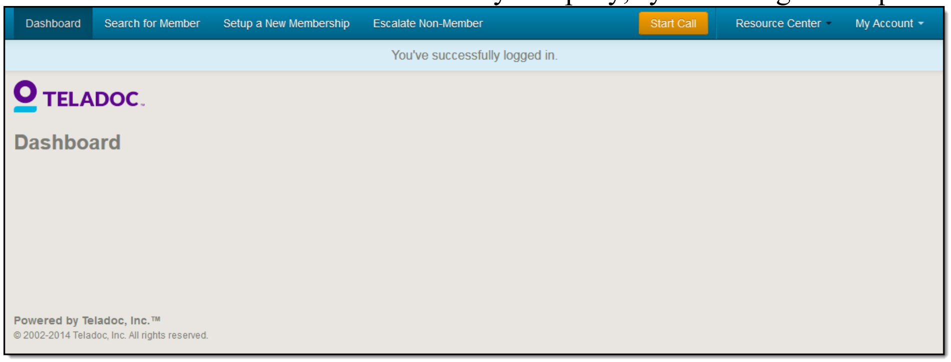
There is currently the ability to have an authorized consenter. The authorized consenter must be added by the **primary** member. Do not add adult dependents on the profile as authorized consenters (they are considered to be that automatically). Add individuals who have their own primary account or do not have Teladoc access. Authorized consenters can only speak on behalf of the child. They can not update information!

Call Center Home Page

When going to the call center URL, the login credentials must be entered. These credentials (username/password) must be obtained from the supervisor.

- Note: passwords must be reset when first logging in.

Once signed into the call center, the below is what the home page looks like. The resource center is available to answer many company, system and general questions.

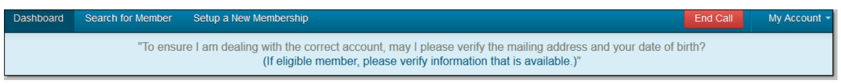


Note: With each call, "Start Call" and "End Call" must be used.

Note: For first time logins, the password will need to be reset. For security purposes, passwords must be reset after 90 days.

Scripting

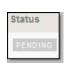
Teladoc will always provide scripting for interacting with members. For new agents, it is recommended that the blue scripting at the top and left side of the page (during registration) are used till a familiarity with the system is obtained. Once one is familiar with the system, some deviation is allowed.



Note: One must **NEVER** alter or skip the terms and conditions or disclaimers. These **MUST** be read to the member.

Member Status

There are various types of "status" to represent what is going on with a members account.

- Pending:  these are adult dependent members who have been added by the primary account holder. Due to HIPAA regulations, they must complete registration and obtain their own login information.
- Active:  these members are registered. It is important to note that they may or may not have completed their Medical History and may/may not have had a consult.
- Cancelled:  The member is no longer able to utilize the service. An escalation must be submitted if the member has any concerns.
- Suspended:  The member is in a state that does not allow Teladoc consults to take place. If the member has concerns regarding their account status, submit an escalation.
- Declined: The member was either 1) verbally abusive with a Teladoc agent/physician or 2) he/she has used Teladoc in excess so that it appears that Teladoc has replaced their PCP (primary care physician).

Performing A Member Search

Here are a few techniques for performing accurate member searches:

1) First search for the members whole name as provided

*Hint: do not include spaces after typing out each part of the members name

- If step one does not work, then try the other steps below!

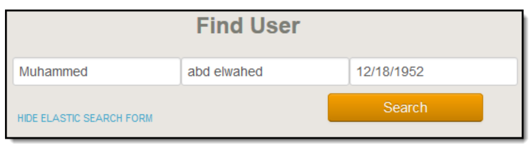
- Make sure to switch between elastic and admin search!

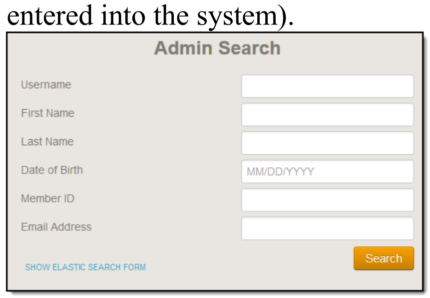
2) Search for parts of the members name—this especially works if the member has an unusual first/last name (Ex: last name only or first name only)
3) Search for name alternatives (ex: Mohammed Vs Muhammad)
4) Search for the member using last name and their DOB or first name and DOB
5) Search for the members Aetna ID number
6) Search by the members username if the member has their card available
7) Reverse the members first and last name in case it was not entered correctly into the system (Ex: Hakim Diab Vs Diab Hakim)
8) Search for the first name, first middle name initial plus the entire last name (Ex: Hakim K Diab)

Remember! When accessing the account, there **must** be 4 points of verification!

1. Full name
2. Date of Birth
3. Address
4. Verification Prompt

For each item the member can't verify, add on another layer of security! Ex: DOB is wrong, ask for email on file!

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1</td><td>At the top of the home page, select "Start Call" or "Search for Member."
• By selecting one of the two above, the "End Call" button will appear.</td></tr>
<tr><td>2</td><td>There are two search options available:
1. The first search feature is the elastic search. This search allows for entry of a suffix in the first/last name search. It also allows for entry of multiple names.


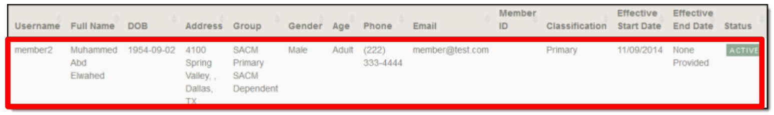
2. If the first search does not work, select "Hide Elastic Search Form" to display the "Admin Search." This will allow for searching by username, first/last name, DOB, email address and member ID (this is where the members Aetna ID can be entered into the system).


• It is important to know that the above searches are not "fuzzy" searches. This means that partial words can not be entered to locate an individual.
• Note: there is the ability to switch between the elastic and admin search.</td></tr>
<tr><td>3</td><td>With elastic search, the most relevant result to the search will appear at the top of the page. If the member needed does not appear, apply more criteria to the search.</td></tr>
</table>

Each column (username, full name, DOB, Address, etc…) can be sorted by using the light gray up and down arrows.

To assure that the caller is being tied to the correct account, one **must** verify the full name, DOB and address of the caller before opening a profile.

Once the caller and the account are verified, click *anywhere* in the member row (highlighted red box below).



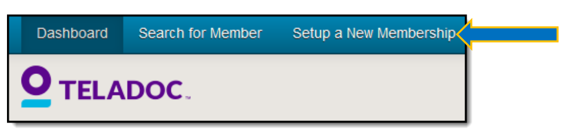
Once clicked on, the member home screen will appear. Here, the verification prompt **must** be verified (4th piece of account verification) and appropriate actions can be performed (Ex: registration, resetting password, scheduling a consult, etc…).

- It is important to note that due to security/HIPAA purposes account information of an adult can only be given to the adult themselves! It can not be given to another adult.
  - If an adult calls in stating that their adult dependent is unable to take care of or speak on behalf of them self, information can not be disclosed unless there is a Medical Power Of Attorney (POA) document on file. There will be **no** exceptions to this.
- If a member calls in stating that they have a medical POA (Power of Attorney) instruct the member to fax the document over to the Teladoc corporate office in Dallas for review. Once confirmed, the individual will be added and be able to speak on behalf of the member.

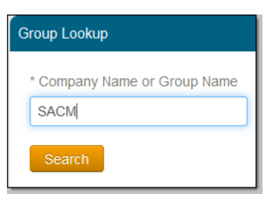
Setup A New Membership

On the call center home page, there is an option called "Setup A New Membership." This feature allows for registration of a primary member. This feature should only be used if one has performed a member search and is not able to locate the member.

Step	Action
1	Select "Setup A New Membership" from the call center home page.

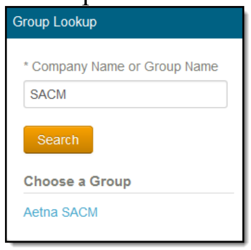


From there, on the left had side of the page, there is the Group Lookup—a section for entering the company name. Enter SACM and select "Search" to find the company.

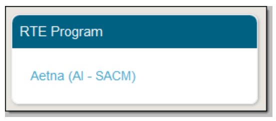


- This search is a smart search where if partial words are entered (Ex: SAC) the search still functions.

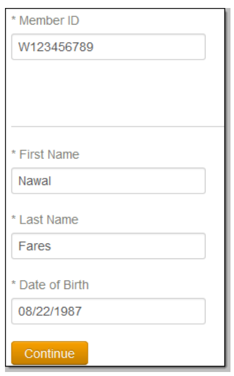
<table>
<tr>
<td></td>
<td>
Once the search is conducted; select the correct company under "Choose a Group"



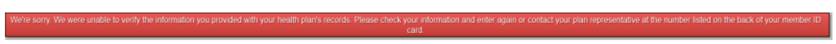
One can also use the RTE Program search. Simply select Aetna (AI-SACM) to open up the section for adding primary members.



- Make sure to read the scripting.
</td>
</tr>
<tr>
<td>2</td>
<td>
Enter the required information (Aetna ID, name, DOB) and select "Continue."



</td>
</tr>
<tr>
<td>3</td>
<td>
If the member is eligible for Teladoc, the registration screen will appear. If the member is not eligible, a notification will display. If this notification displays, verify the Aetna ID and try to register again.



- **Note**: The ID must start with a capital letter (Ex: **W**123456789). Also, do not enter any spaces before or after the ID.
- If registration still fails, check and see if the member is in ASD/MEA but not in Teladoc. If that is the case, offer to escalate.

It is important to read the blue scripting on the top and left hand side of the page. The scripting is dynamic and will adjust to the sections that you are on.

Enter the required information (username, temporary password, verification prompt, etc…).

- A secondary phone number is required. If the member does not have one, re-enter the primary phone.
- If the primary language is anything other than English or Spanish, select "Other"
</td>
</tr>
</table>

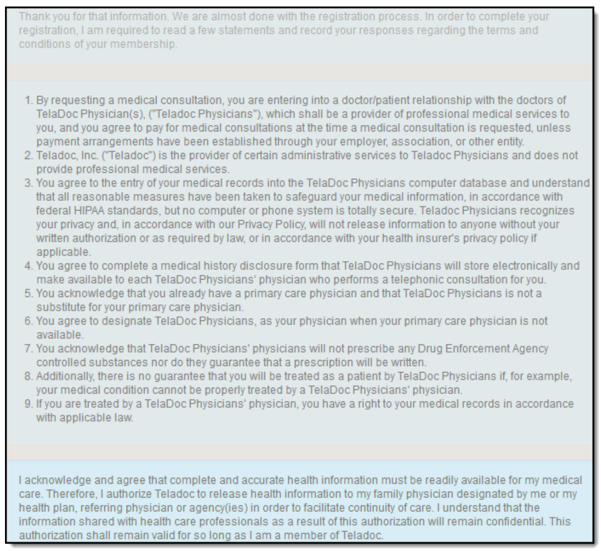
<table>
<tr><td></td><td>

- A new cell will appear for the entry of the other language Ex: Arabic

- If the member has no email address enter “no@email.com”

</td></tr>
<tr><td>4</td><td>

Read all of the terms and conditions in blue at the bottom of the page. If the member does not agree or is confused/worried, try to calm any concerns that the member might have. If the member still does not agree, offer to escalate them for additional clarification (do not finish registering). If the member does not agree and declines any further contact, the registration must **not** be continued (select End Call)!



Thank you for that information. We are almost done with the registration process. In order to complete your registration, I am required to read a few statements and record your responses regarding the terms and conditions of your membership.

1. By requesting a medical consultation, you are entering into a doctor/patient relationship with the doctors of TelaDoc Physician(s), ("Teladoc Physicians"), which shall be a provider of professional medical services to you, and you agree to pay for medical consultations at the time a medical consultation is requested, unless payment arrangements have been established through your employer, association, or other entity.
2. Teladoc, Inc. ("Teladoc") is the provider of certain administrative services to Teladoc Physicians and does not provide professional medical services.
3. You agree to the entry of your medical records into the TelaDoc Physicians computer database and understand that all reasonable measures have been taken to safeguard your medical information, in accordance with federal HIPAA standards, but no computer or phone system is totally secure. Teladoc Physicians recognizes your privacy and, in accordance with our Privacy Policy, will not release information to anyone without your written authorization or as required by law, or in accordance with your health insurer's privacy policy if applicable.
4. You agree to complete a medical history disclosure form that TelaDoc Physicians will store electronically and make available to each TelaDoc Physicians' physician who performs a telephonic consultation for you.
5. You acknowledge that you already have a primary care physician and that TelaDoc Physicians is not a substitute for your primary care physician.
6. You agree to designate TelaDoc Physicians, as your physician when your primary care physician is not available.
7. You acknowledge that TelaDoc Physicians' physicians will not prescribe any Drug Enforcement Agency controlled substances nor do they guarantee that a prescription will be written.
8. Additionally, there is no guarantee that you will be treated as a patient by TelaDoc Physicians if, for example, your medical condition cannot be properly treated by a TelaDoc Physicians' physician.
9. If you are treated by a TelaDoc Physicians' physician, you have a right to your medical records in accordance with applicable law.

I acknowledge and agree that complete and accurate health information must be readily available for my medical care. Therefore, I authorize Teladoc to release health information to my family physician designated by me or my health plan, referring physician or agency(ies) in order to facilitate continuity of care. I understand that the information shared with health care professionals as a result of this authorization will remain confidential. This authorization shall remain valid for so long as I am a member of Teladoc.

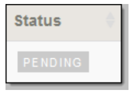
</td></tr>
<tr><td>5</td><td>Once registration is completed and the member accepts the terms and conditions, a redirect to the member home page will be done and the member will show as active. Any additional account functions can then be performed (Ex: complete MHD).</td></tr>
<tr><td colspan="2">

NOTE: It is important to note that if the member does not pass RTE, the system will prompt for the establishment of an Aetna 2013 (temporary) account. Do **not** create an Aetna 2013 account! Try RTE one more time to ensure that the member does not pass. If registration still fails, check and see if the member is in ASD/MEA but not in Teladoc. If that is the case, offer to escalate.

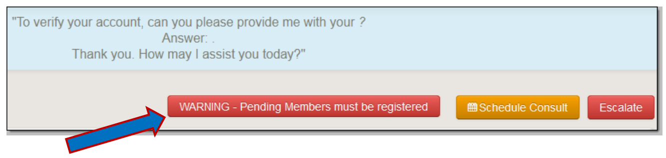
</td></tr>
</table>

Registering A Pending Member

Step	Action
1	Any time a member shows as being “Pending” they must be registered. When performing a member search, if the member needs to complete the

<table>
<tr><td></td><td>registration process, their search result will have a gray pending box under the status column.


The member will also show as being pending when their profile is opened.

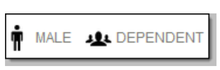
</td></tr>
<tr><td>2</td><td>To begin registering a member, click the large red “WARNING-Pending Members must be registered” box at the top of the page; just below the scripting.


Just like the new member registration, this registration is one page. Make sure to read the light blue scripting on the left had side of the page. Just as before, the scripting is dynamic as it moves and adjusts according to the section that you are on.
A secondary phone number is required. If the member does not have one, re-enter the primary phone.</td></tr>
<tr><td>3</td><td>Enter all required fields (Ex: username, password, verification prompt, etc…) and read the terms and conditions at the bottom of the page.
If they do not agree after explanation, cancel the registration.
Once completed, there will be a redirect to the member home page and any additional member functions can be performed (Ex: complete MHD, reset password). The member will appear as active.</td></tr>
</table>

The Member Home Page

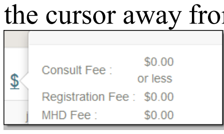
The member home page contains the member’s name, date of birth, address, phone number, email address, dependents, etc…

If the member is a primary, the word “Primary” will display next to the gender along with a single face icon at the top of the page. If the member is a dependent, the word “Dependent” will be displayed next to the gender with a multiple people icon at the top of the page.



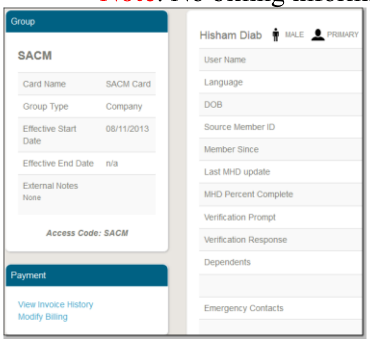
- If a member wishes to be cancelled, submit an escalation.

Next to the member’s status (active, pending or cancelled) there is a blue dollar sign. This dollar sign (when hovered over) will display a box with the consult, registration and MHD fees (fees for SACM members are $0). To make the box disappear, simply move the cursor away from the dollar sign.

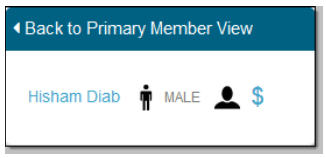


On the left hand side of the member home page is the group information (company name, start date, external notes, etc…) and the payment section (invoices and billing-will not be used!).

- **Note**: No billing information is required for SACM members.

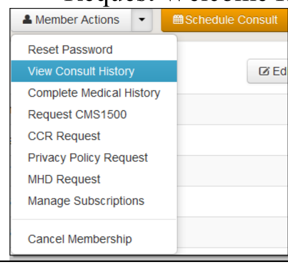


- When on a dependents account—on the left hand side there will be a link to return to the primary (the primary members name can also be selected to return to the primary profile).



Modifying The Member Home Page

Step	Action
1	To modify a section with data already entered, when on the member home page select "Edit." • If the item can not be edited, either a or a will appear or the cell will be grayed out to prevent modifying the information. • When editing the general member information (DOB, username, etc…) there must be a verification prompt entered for the changes to apply (even for minors). **Note:** If a members DOB is not correct, refer the member to the SACM Portal as the change comes from them (this also applies for any cell that is grayed out).
2	Once the information has been updated, select "Save" to apply the updates to the section or select "Cancel" to void the changes.
3	To remove a specific item (Ex: doctor, pharmacy, etc…), select "Delete"
4	Select "Add" to enter new information where there is nothing entered.  **Note:** Dependents can only be added by the primary member.
5	Select "Member Actions" to: • Reset the password • View consult history • Complete a MHD • Request a CMS-1500 (this will not be used) • CCR Request (this will not be used) • Request a privacy policy • Request a MHD

	• Manage subscriptions • Cancel a membership (this will not be used) • Authorized excuse notes • Request Welcome Kit (this will not be used) 

Member Actions Details

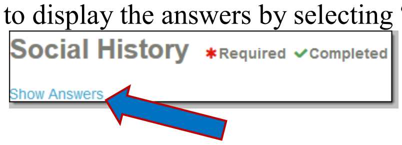
Each member action option allows for a specific action to be done.

- Reset Password: allows for resetting of the member login password. The password must be a minimum of 8 characters long and begin with a letter and have at least one number. Once the member logs into their account, they will reset it to something more specific to them. We suggest resetting to the members first initial, last initial, 1-6. Example: Fahad Mohammed= fm123456
- View Consult History: allows for viewing of the members consults. Here, one can see if a consult was cancelled, missed or completed. Aside from that, the date, contact number, state, pharmacy and language of a consult can be viewed. One can also perform certain member actions from here. One can request a CMS-1500 (this will not be used), mark the consult with a problem (prescription problem) or submit a request for a doctor’s note (if available).
- Complete Medical History: allows for entering or updating a MHD
- Request CMS 1500 (this will not be used): a CMS-1500 is an insurance claim form. It provides more detailed information in comparison with an invoice.
- Authorized excuse notes: If a physician has authorized a doctor’s note for the member, then this option will display. If no note is authorized, it will not display and an escalation is needed.
- CCR Request (this will not be used): the Continuity of Care Record is the member’s basic health information along with any medications/allergies. If the member wishes to have a CCR sent, submit an escalation with details regarding who/how it is to be sent. Make sure to provide the fax or mailing address. No emails! Typical turnaround is 24/48 business hours.
- Privacy Policy Request: this document outlines the privacy practices of Teladoc.
- MHD Request: this is for requesting that a MHD (Medical History Disclosure Form) be mailed/emailed/faxed to the member.
- Manage Subscriptions: this is how members can opt in/out of promotional offers.
- Cancel Membership: (this will not be used). Submit an escalation if a member wishes to cancel or remove a dependent.
- Request Welcome Kit: (this will not be used).

Completing/ Updating A Medical History Disclosure (MHD)

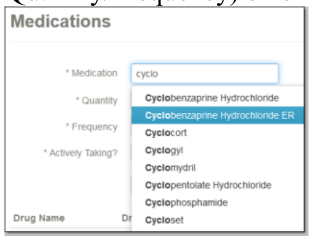
Step	Action
1	To update a MHD, under the “Member Actions” select “Complete Medical History.” If the member has not accepted the T&C (Terms and Conditions), they will be displayed and must be read to the member. • If the member does not accept the T&C select “Do Not

<table>
<tr><td></td><td>Agree.” A redirect to the home page will be made. If the member agrees, the medical history form will be displayed.
If the member does not agree, do not complete the medical history!
There is a different version of the T&C for minors.
The required portions (identified by a red asterisk) are at the top of the page.


Note: There is a different version of the medical history for children 7 and under. It includes questions regarding immunizations and pediatric problems.</td></tr>
<tr><td>2</td><td>Select “Edit” to update a particular section and “Save Changes” to save.</td></tr>
<tr><td>3</td><td>Once a section is completed, it will collapse. There will be a green check indicating the section has been completed. The section can be expanded to display the answers by selecting “Show Answers.”

</td></tr>
<tr><td>4</td><td>For the height, if the inches are not known, enter the height in feet/inches. Ex: 5ft.5in=5.5
If the member provides metric units, enter height or weight as metric. Ex: 175centimeters or 35kilograms.</td></tr>
<tr><td>5</td><td>To add a non-listed allergy, select “Food/Other” then “Other” from the allergy section. From there, a new box will appear where you can enter the non-listed allergy, reaction and if it is a current allergy.

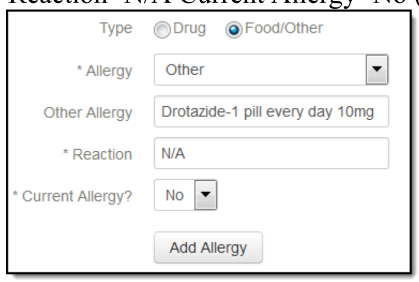

Note: One must select “Add Allergy” to have the allergies added to the list (this allows for additional allergies can be added). Once all allergies are added (or removed if there was an entry error), the allergies must be saved by selecting “Save Changes.” If this is not done, the new allergies will not be saved to the profile. This also applies when adding medications.
If no allergy or medication is added, the system will default to “None Added” All that needs to be done is select “Save Changes” and click “Continue” when the pop up box appears.</td></tr>
<tr><td>6</td><td>When entering medications—as one types, there will be a drop down list to select a medication. The more letters that are entered, the more accurate the drop down results are. The medication status indicates if it is an active or inactive medication. If a section is not known (Ex:</td></tr>
</table>

<table>
<tr><td></td><td>
Quantity/Frequency) enter “unknown” and continue.



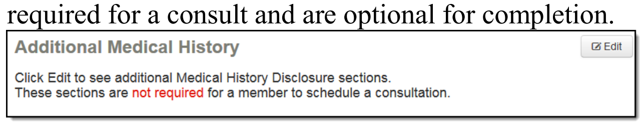
Note: Just like with the allergies, the “Add Medication” button must be selected after each entry and the save button must be used or the medications will not be applied to the member’s profile.

Note: If a medication is not listed in the drop down, enter it as a non-listed allergy via the process listed on step 5. Enter the medication as: medication name- frequency & quantity Reaction=N/A Current Allergy=No (example below).



</td></tr>
<tr><td>7</td><td>
The MHD must have the **required** portions completed to be able to schedule a consult.

- If the consult can not be scheduled due to incomplete MHD, check to make sure that all required portions have been properly entered. If there is no check indicating that a section is complete, then complete the section and schedule.
- At the end of the MHD, there is an “Additional Medical History” section. This section has the remainder of the questions on the member site (Ex: lab tests). These are not required for a consult and are optional for completion.



When entering a MHD, if needing to return to the member home page, select the “Back To Member View” or the members name at the left of the page.

- Do NOT use backspace!
</td></tr>
</table>

Scheduling A Consult

Members have three ways to be able to schedule a consult:

1. Members can log into their account and schedule
2. Members can call in to schedule
3. Members can schedule via the mobile app

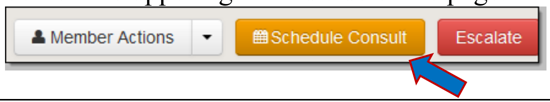
To be able to schedule a consult, members must:

1. Be registered/active and
2. Have at a minimum, the required portions of their medical history completed.

Without the above, a consult can not be scheduled.

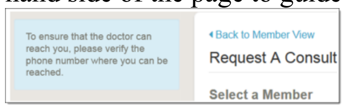
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1</td><td>

When under the members account, select the gold “Schedule Consult” box on the upper right hand side of the page.



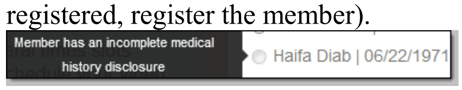
</td></tr>
<tr><td>2</td><td>

The consult process is all on one page. Blue scripting appears on the left hand side of the page to guide the consult scheduling process.

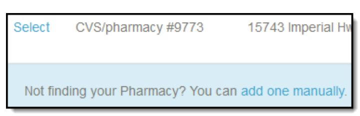


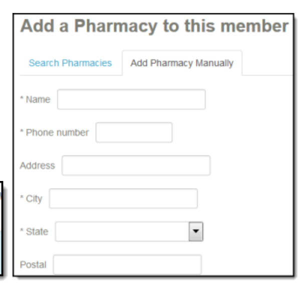
Select for who the consult is for, the jurisdiction (state they are in), type of consult (general medical, dermatology, behavioral health), consult method (phone, video), etc… Note that the scripting on the left adjusts to the section that you are on.

- If a member is not eligible for a consult, a hover will appear with the reason why they are not eligible (incomplete MHD, already scheduled, needs to be registered, etc…). If the member is not able to schedule a consult due to an incomplete MHD, select “Back to Member View” and offer to update their MHD/let them go online to update (if the hover is states the member needs to be registered, register the member).

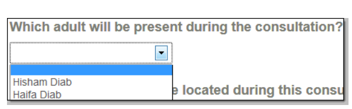


- If the hover indicates that the member’s eligibility can not be verified, Check the source member ID (located under the date of birth on the member home page) and see if the Aetna ID listed is the most up to date ID. If it is not, update it for the member. This should allow the scheduling to continue.
- If a pharmacy search is conducted and the pharmacy can not be located, a manual entry must be done (located at the end of the search). The pharmacy name, phone number, city and state are required fields. The pharmacy will be saved to the profile.

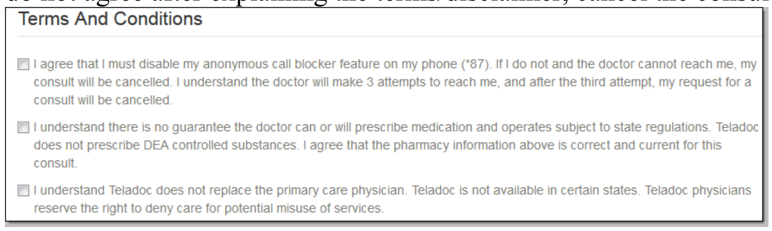




Note: For minor consults, the adult dependent that will be on the phone at the time of the consult is a required entry. Simply select the adult from the drop down list. If the adult is not listed, refer the adult back to the primary account holder to be added.

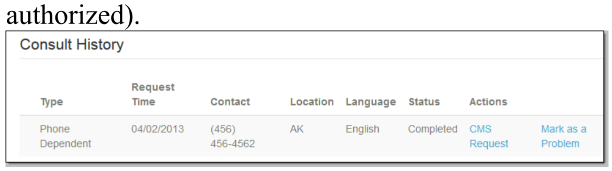
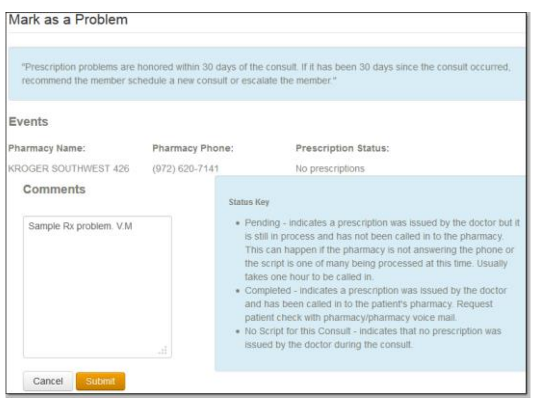


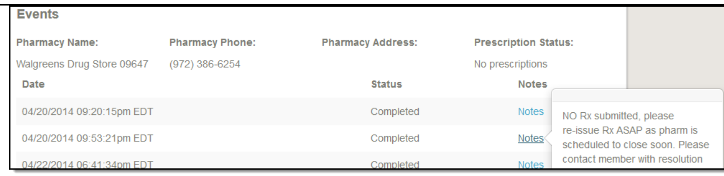
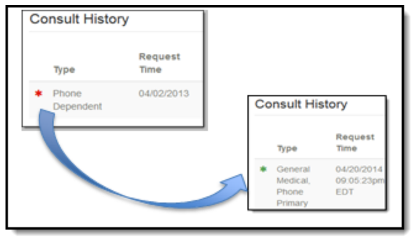
</td></tr>
</table>

	Note: Video consults are not allowed in all states. If it is not permitted, it will not display.
3	Read the terms and conditions along with the consult disclaimer to the member and check each box if they agree. Then click "Continue." If they do not agree after explaining the terms/disclaimer, cancel the consult. 
4	Read the confirmation script to the member and offer to give them their consult confirmation number.

Submitting A Prescription Problem

Note! If the consult has been completed within an hour, advise the member to have the pharmacy check their voicemail first before submitting a Rx problem. If it has been over an hour and the pharmacy still does not have the prescription, submit the issue and advise the member to wait an hour before checking with their pharmacy. This gives enough time for resolving and processing with the pharmacy.

Step	Action
1	When on the members home page, under Member Actions select "View Consult History"
2	The members consult(s) will appear along with the option to Mark as a problem, CMS Request (will not be used) or request excuse note (if authorized). 
3	Select "Mark as a problem"
4	A new section will open. Here, the pharmacy information is displayed along with a box for entering notes regarding what the issue is. The status key on the right hand side will indicate what has happened to the prescription. Even if a prescription shows as not being called in, a problem can still be submitted! Do not disclose the prescription status!  • Previous notes can be viewed by hovering over the blue "Notes" and seeing the text that was entered.

	
5	Once all notes have been entered, select “Submit” **Note**: make sure to include your initials at the end of the prescription problem!
6	Once the complaint is submitted, a red asterisk will appear next to the consult type. When the issue is resolved, the asterisk will turn green. 

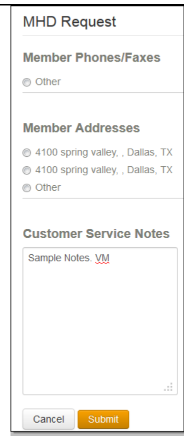
Member Requests and Submitting Escalations

Remember that setting expectations is important! Do not make promises to the member (Ex: you **will** get a prescription)!

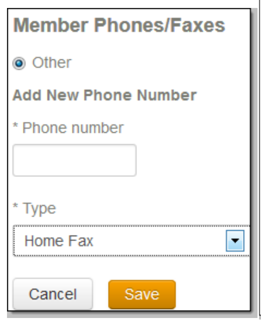
Escalations are to be submitted for situations where the member can not be assisted after seeking assistance from supervisors and leads. Escalations should follow the following guidelines:

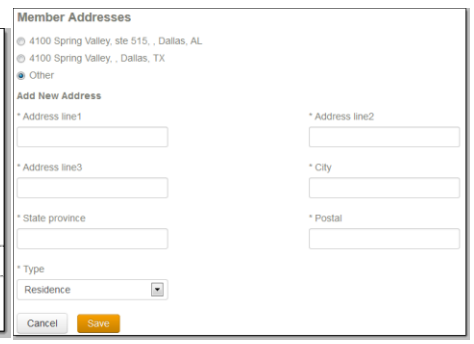
1. Make sure the escalation is actually necessary.
2. Provide detail: Explain why assistance could not be provided. If it was a system issue, explain what happened.
3. Make sure to verify proper spelling of the member’s name (first/last). Verify that the DOB is correct.
4. Verify that the phone number is entered properly.
5. Include the members Aetna ID.
6. Make sure the escalation is for the correct person.

Step	Action
1	On the member home page, locate the function that needs to be performed under “Member Actions” (Ex: Privacy Policy Request, MHD Request and Escalate).
2	Once that function is selected, if it is an item that needs to be sent, ask the member how they would like to receive the document (Fax, mail, etc…). Enter any appropriate notes in the field provided.

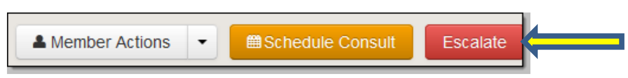
<table>
<tr>
<td></td>
<td>


If “other” is selected, the page will expand and provide fields for entering the information. Select “Save” to have the new information applied to the ticket.
Note: Submit must still be selected to have the ticket request sent.

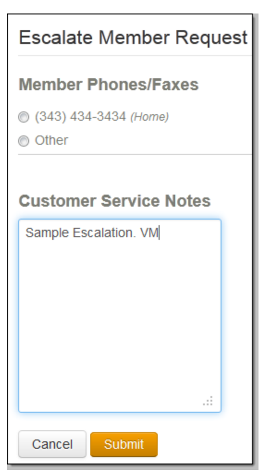




</td>
</tr>
<tr>
<td>3</td>
<td>
To create an Escalation, on the member home page, select the red “Escalate” button next to “Schedule Consult.”

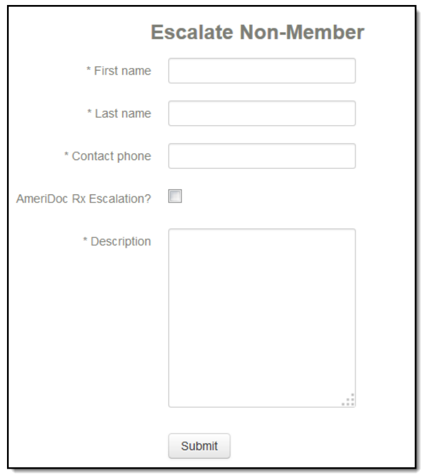


The page will change and give fields to enter the members contact information and escalation notes.



Examples of escalations:
Doctor Complaint
Registration problems
Website Issue

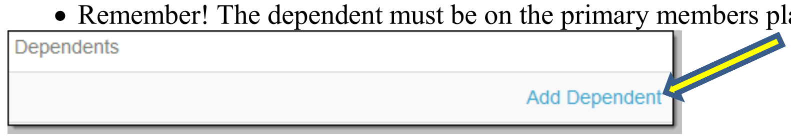
At the end of the notes, make sure that your initials are included.
</td>
</tr>
</table>

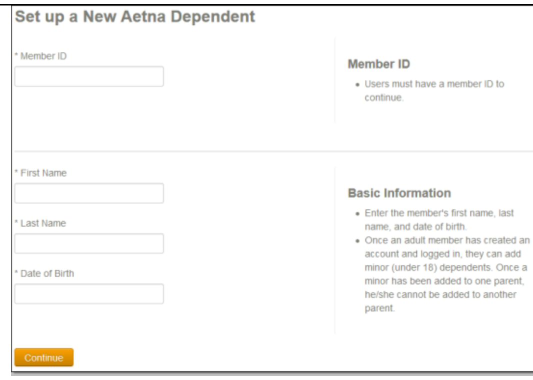
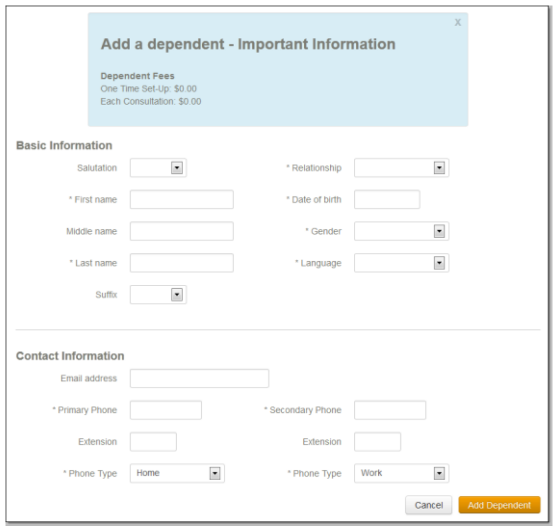
4	Once all information is collected, select submit.
5	If you can not locate the member in the system and you need Tier II to research the issue, click on “End Call” and then click on “Escalate Non-Member” at the top of the page. Here, you will enter the callers information (first/last name, phone number) and any notes that pertain to the issue. Once all notes have been entered (remember to include your initials), click on “Submit.”  • **NEVER** click on the AmeriDoc Rx Escalation box!

Modifying Billing

This function will not be used.

Adding A Dependent

Step	Action
1	Under the primary member home page there is an option to “Add Dependents.” • Remember! The dependent must be on the primary members plan!  Once “Add Dependent” is selected, fields will expand to allow for entry of the dependent information (a box with dependent billing information will also display-this can be ignored). Enter the dependents Aetna ID, name and DOB.

	
2	If a dependent can be added (passes RTE), the page will adjust. Enter all appropriate information (name, DOB, relationship, etc…).  • Remember! * means the field is required! • **Note**: If the dependent is an adult they will need to be registered after being added due to the fact that they will show as Pending. If the adult dependent is with the primary, ask to speak with the dependent to register them. Do not register or do the MHD of the adult dependent if they are not present. If the adult dependent is not present, they must call in or go online to complete their registration/MHD. No login information can be given to anybody aside from that adult dependent. • If the dependent does not pass RTE, try adding twice. If the dependent still fails RTE, check and see if the member is in ASD/MEA but not in Teladoc. If that is the case, offer to escalate. • Minors will become Active automatically after being added. Remember, the active status alone does not allow a consult to be scheduled. The MHD must be completed. Offer to update the MHD of the minor.
3	Select "Add Dependent" once all of the information has been entered.

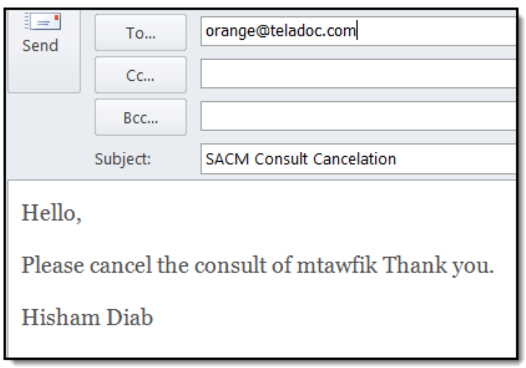
<table>
<tr><td>4</td><td>Once the dependent is added, under the primary members profile the dependents name will show as a blue quick link to their profile (remember, pending means that the adult needs to be registered).

If a dependent shows as grey instead of blue, they must be registered.
It is important to verify that the primary members address was carried over to the dependents profile.</td></tr>
<tr><td colspan="2">It is important to remember that adult member information can not be disclosed to another adult unless there is a Medical Power Of Attorney document on file! Minor dependent information can only be disclosed to the primary account holder.</td></tr>
</table>

Canceling Consults

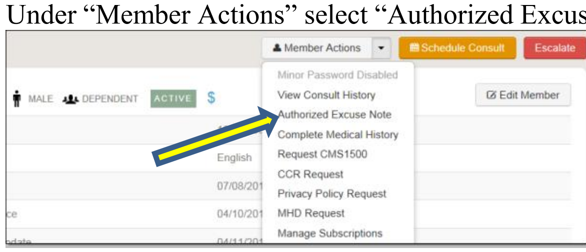
If a member needs to cancel their consult, please email orange@teladoc.com The following information must be submitted:

- Members username (do not include the members name)
- In the subject line, include the words "SACM Consult Cancelation"

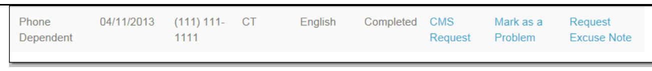
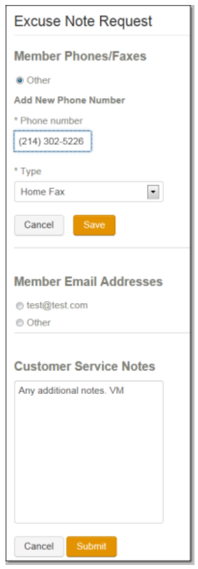


Requesting A Doctors Note

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1</td><td>Locate the member in the application. After verification, select the member.</td></tr>
<tr><td>2</td><td>Under "Member Actions" select "Authorized Excuse Note"



Note: If no note is authorized, the request option will not be displayed and the request must be escalated.</td></tr>
<tr><td>3</td><td>The consult history page will be displayed (this is the same page where a prescription problem is submitted). If the physician has authorized a note to be sent to the member, the option of "Request Excuse Note" will be displayed.</td></tr>
</table>

	 • **Note:** If no note is authorized, the request option will not be displayed and the request must be escalated. • **Note:** Doctor's notes are made Monday-Friday 8am-4pm Central
4	Once "Request Excuse Note" is selected, ask the member how they would like to receive the note (fax/email), enter or select the appropriate method, enter any notes (Ex: member needs a note for 2 days not 1) and click on "Submit" to process the request.  • **Remember**: If "Other" is selected as an option, after entering the new fax/email, "Save" must be selected before submitting the request. • If the member wants the note mailed, select a phone number and in the notes type in "Member wants note mailed." Include the mailing address of the member. • IMPORTANT: Notes are at the discretion of the doctor and are not guaranteed. Do NOT guarantee a note to the member. Once "Submit" is selected, a redirect to the member home page will occur and a green confirmation bar will appear (very similar to that of the consult confirmation).