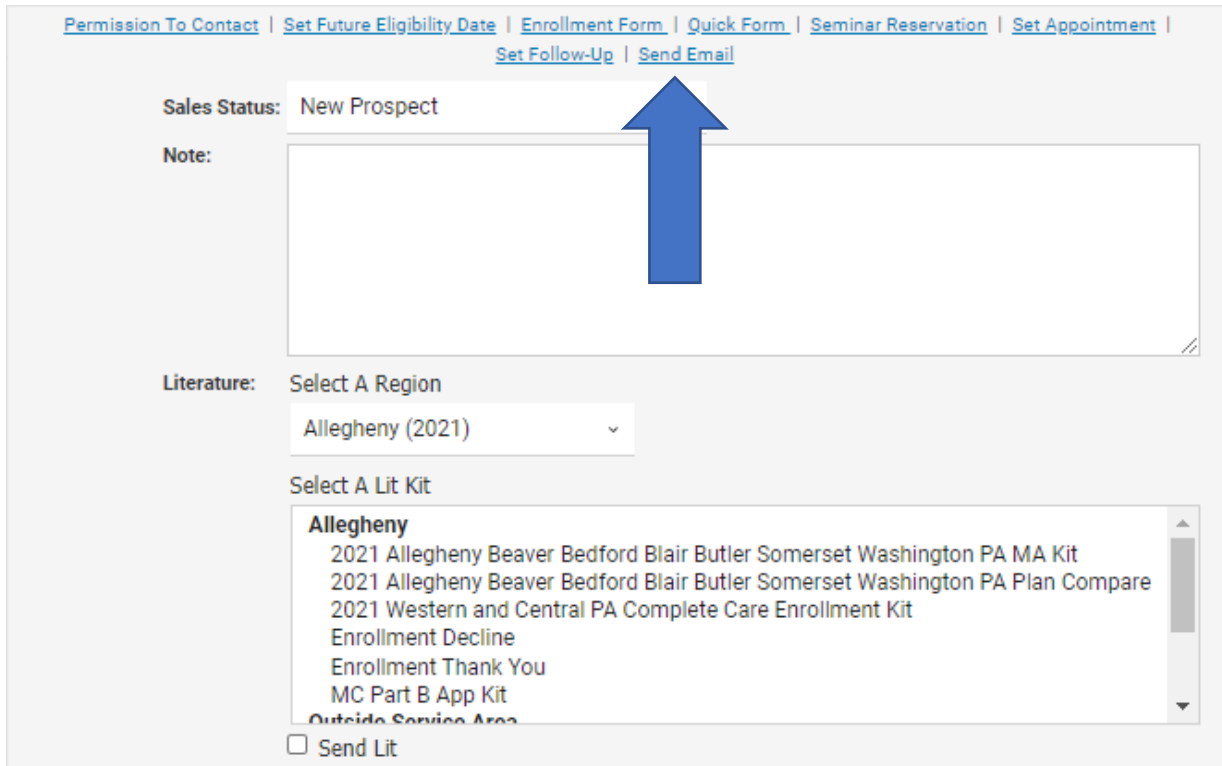


1. Open your client's lead record in Cavulus. Make sure that your client's lead record is assigned to you. To send a Scope of Appointment (SOA), click **Send Email** link:



Permission To Contact | [Set Future Eligibility Date](#) | [Enrollment Form](#) | [Quick Form](#) | [Seminar Reservation](#) | [Set Appointment](#) | [Set Follow-Up](#) | [Send Email](#)

Sales Status: New Prospect

Note:

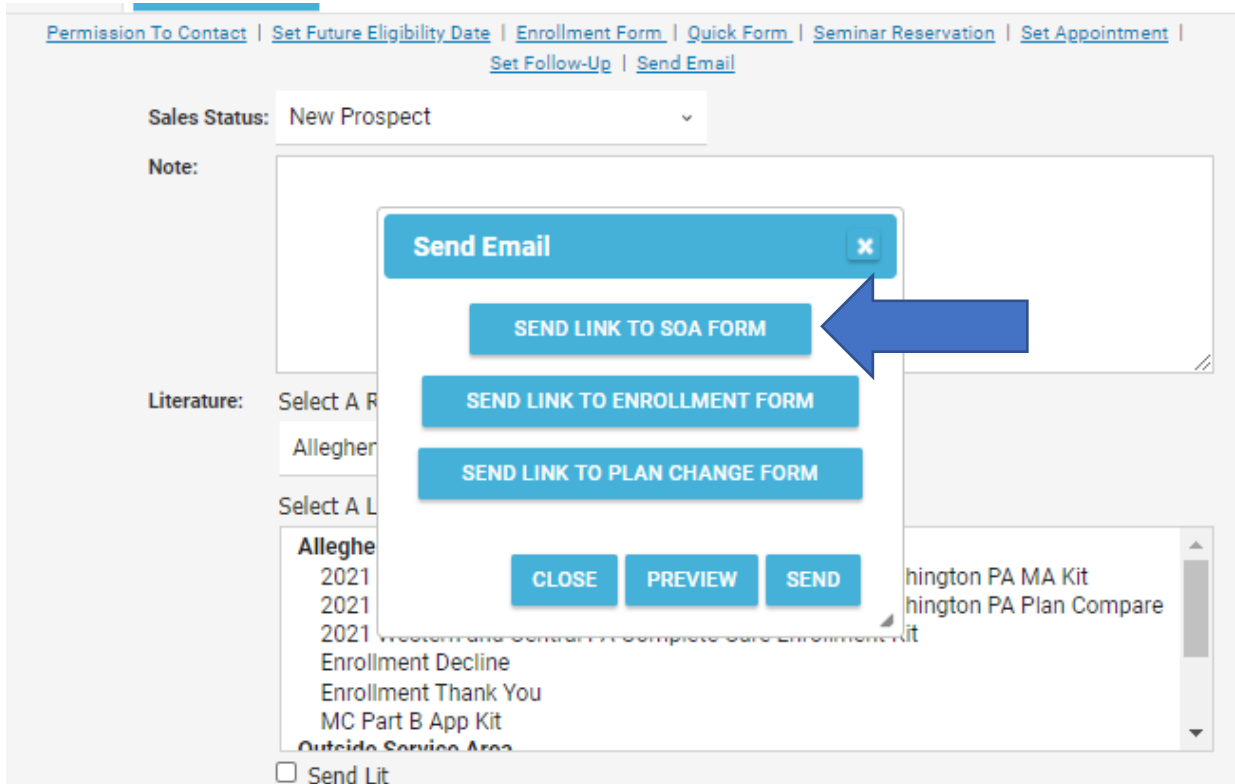
Literature: Select A Region  
Allegheny (2021)

Select A Lit Kit

- Allegheny
- 2021 Allegheny Beaver Bedford Blair Butler Somerset Washington PA MA Kit
- 2021 Allegheny Beaver Bedford Blair Butler Somerset Washington PA Plan Compare
- 2021 Western and Central PA Complete Care Enrollment Kit
- Enrollment Decline
- Enrollment Thank You
- MC Part B App Kit
- Outside Service Area

☐ Send Lit

2. Click **Send Link to SOA Form**:



Permission To Contact | [Set Future Eligibility Date](#) | [Enrollment Form](#) | [Quick Form](#) | [Seminar Reservation](#) | [Set Appointment](#) | [Set Follow-Up](#) | [Send Email](#)

Sales Status: New Prospect

Note:

Literature: Select A Region  
Allegheny

Select A Lit Kit

- Allegheny
- 2021 Allegheny Beaver Bedford Blair Butler Somerset Washington PA MA Kit
- 2021 Allegheny Beaver Bedford Blair Butler Somerset Washington PA Plan Compare
- 2021 Western and Central PA Complete Care Enrollment Kit
- Enrollment Decline
- Enrollment Thank You
- MC Part B App Kit
- Outside Service Area

☐ Send Lit

**Send Email** [X]

SEND LINK TO SOA FORM

SEND LINK TO ENROLLMENT FORM

SEND LINK TO PLAN CHANGE FORM

CLOSE PREVIEW SEND

3. On this page, you will enter your contact info. If the lead already has an email address provided, it will be pre-populated. If not, you can add an email address and check **Update Email Address on Lead**, which will save the email address into the lead. From here, you will add the meeting date, time, and type. Once you've entered the information, you will want to hit **Preview** to view the email that will be sent to the beneficiary.

[Permission To Contact](#) | [Set Future Eligibility Date](#) | [Enrollment Form](#) | [Quick Form](#) | [Seminar Reservation](#) | [Set Appointment](#) | [Set Follow-Up](#) | [Send Email](#)

Sales Status: New Prospect

Send Link To SOA Form

Agent Full Name: Michael Kirkwood

Agent Phone Number: 412-454-8549

Agent Email Address: kirkwoodme@upmc.edu

To Email Address: TYLERCA@UPMC.EDU

☐ Update Email Address on Lead?

Meeting Date: 10/15/2020

Meeting Time: 10:30 AM

Meeting Type: In-person

In-person  
Phone  
Virtual

CLOSEPREVIEWSEND

SAVE

REQUIRES ATTENTION

#### 4. Preview for In-person meeting:

Preview Email

Thank you for setting up your appointment with me!

Once again, my name is Michael Kirkwood, and I'm an authorized UPMC *for Life* agent. I'm excited to speak with you about your Medicare coverage options and to answer any questions you may have. My goal is to help you find a plan that best fits your health care needs.

Here are your confirmed appointment details.

Date: Thursday 10/15/2020

Time: 10:30 AM

At our scheduled appointment time, I will meet at the agreed upon location. Here are a few things to have handy for our appointment: a list of your medications, a list of your current doctors, a list of any medical care you have scheduled, and your red, white, and blue Medicare card.

As we discussed, the Centers for Medicare & Medicaid Services (CMS) requires that you complete a Scope of Appointment form before our meeting. This form helps to ensure you understand that we will be meeting to discuss Medicare Advantage plans. To complete the form, please click the "Scope of Appointment Form" button below.

The following must be completed on the Scope of Appointment form:

- Type your initials in the box at the left to confirm that you will be discussing Medicare Advantage plans with me.
- If you are the beneficiary, electronically sign the form by typing your first and last name into the digital signature field. Remember to also fill in the date field.
- If you are the beneficiary's authorized representative, electronically sign the form by typing your first and last name into the digital signature field. Then type your relationship to the beneficiary in the authorized representative section. Remember to also fill in the date field.
- Complete the remaining fields, including Agent name, Michael Kirkwood and Agent phone number (412) 454-8549, and your contact information.
- Once all fields are completed, make sure to click **Submit** for your Scope of Appointment form to be processed.

Click for SOA Form

If this appointment time no longer works for you or you have any questions, call me at **(412) 454-8549** to schedule a better time to talk. **I look forward to speaking with you soon!**

CANCEL

SEND

0 entries

Search:

## 5. Preview for Phone meeting:

Preview Email

Thank you for setting up your appointment with me!

Once again, my name is Michael Kirkwood, and I'm an authorized UPMC *for Life* agent. I'm excited to speak with you about your Medicare coverage options and to answer any questions you may have. My goal is to help you find a plan that best fits your health care needs.

**Here are your confirmed appointment details.**

**Date: Thursday 10/15/2020**  
**Time: 10:30 AM**

At our scheduled appointment time, I will give you a call at the phone number you have given me. Here are a few things to have handy for our appointment: a list of your medications, a list of your current doctors, a list of any medical care you have scheduled, and your red, white, and blue Medicare card.

As we discussed, the Centers for Medicare & Medicaid Services (CMS) requires that you complete a Scope of Appointment form before our meeting. This form helps to ensure you understand that we will be meeting to discuss Medicare Advantage plans. To complete the form, please click the "Scope of Appointment Form" button below.

**The following must be completed on the Scope of Appointment form:**

- Type your initials in the box at the left to confirm that you will be discussing Medicare Advantage plans with me.
- If you are the beneficiary, electronically sign the form by typing your first and last name into the digital signature field. Remember to also fill in the date field.
- If you are the beneficiary's authorized representative, electronically sign the form by typing your first and last name into the digital signature field. Then type your relationship to the beneficiary in the authorized representative section. Remember to also fill in the date field.
- Complete the remaining fields, including Agent name, Michael Kirkwood and Agent phone number (412) 454-8549, and your contact information.
- Once all fields are completed, make sure to click **Submit** for your Scope of Appointment form to be processed.

Click for SOA Form

If this appointment time no longer works for you or you have any questions, call me at **(412) 454-8549** to schedule a better time to talk. **I look forward to speaking with you soon!**

CANCEL

SEND

entries

Search:

6. When sending out for a Virtual meeting, three additional fields will need to be populated:
- Meeting Platform
  - Meeting Link
  - Meeting Password

[Permission To Contact](#) | [Set Future Eligibility Date](#) | [Enrollment Form](#) | [Quick Form](#) | [Seminar Reservation](#) | [Set Appointment](#) | [Set Follow-Up](#) | [Send Email](#)

Sales Status: New Prospect

### Send Link To SOA Form

Agent Full Name: Michael Kirkwood

Agent Phone Number: 412-454-8549

Agent Email Address: kirkwoodme@upmc.edu

To Email Address: TYLERCA@UPMC.EDU

☐ Update Email Address on Lead?

Meeting Date: 10/15/2020

Meeting Time: 10:30 AM

Meeting Type: Virtual

Virtual Meeting Platform: Webex

Virtual Meeting Link: https://www.webex.com/meetings

Virtual Meeting Password: UPMCUPMC

CLOSE PREVIEW SEND

## 7. Preview for Virtual Meeting:

Preview Email

Thank you for setting up your appointment with me!

Once again, my name is Michael Kirkwood, and I'm an authorized UPMC *for Life* agent. I'm excited to speak with you about your Medicare coverage options and to answer any questions you may have. My goal is to help you find a plan that best fits your health care needs.

Here are your confirmed appointment details.

**Date:** Thursday 10/15/2020  
**Time:** 10:30 AM  
**Meeting Link:** <https://www.webex.com/meetings>  
**Password:** UPMCUPMC

At our scheduled appointment time, I will give you a call using **Webex**. If you have not used Webex before, please make sure to complete any program downloads or setups prior to our meeting. If you need help setting anything up, please feel free to reach out to me.

As we discussed, the Centers for Medicare & Medicaid Services (CMS) requires that you complete a Scope of Appointment form before our meeting. This form helps to ensure you understand that we will be meeting to discuss Medicare Advantage plans. To complete the form, please click the "Scope of Appointment Form" button below.

The following must be completed on the Scope of Appointment form:

- Type your initials in the box at the left to confirm that you will be discussing Medicare Advantage plans with me.
- If you are the beneficiary, electronically sign the form by typing your first and last name into the digital signature field. Remember to also fill in the date field.
- If you are the beneficiary's authorized representative, electronically sign the form by typing your first and last name into the digital signature field. Then type your relationship to the beneficiary in the authorized representative section. Remember to also fill in the date field.
- Complete the remaining fields, including Agent name, Michael Kirkwood and Agent phone number (412) 454-8549, and your contact information.
- Once all fields are completed, make sure to click **Submit** for your Scope of Appointment form to be processed.

Click for SOA Form

CANCEL

SEND

0 entries

Search:

8. After sending the eSOA, you can view the **Communication History** tab showing when the eSOA was sent out to the beneficiary.

General Notes

Communication History

PTC History

Campaign Responses

Show 10 entries

Search:

History

| Type                 | Created by                       | Created Date   | Campaign           | Communication Details | Notes  | Actions                |
|----------------------|----------------------------------|----------------|--------------------|-----------------------|--|------------------------|
| OutboundEmailMessage | <a href="#">Michael Kirkwood</a> | Wed, 9/30/2020 | No Linked Campaign |                       | Link to SOA Form form Agent Michael Kirkwood | <a href="#">Delete</a> |

Showing 1 to 1 of 1 entries

Previous

1

Next

9. Once the beneficiary completes the eSOA, it will be sent right back into your lead, and be viewable under the **Appointment History** tab.

General Notes

Communication History

PTC History

Appointment History

Campaign Responses

Show 10 entries

Search:

Appointment History

| Created At         | Created By                        | Appointment Date/Time | SOA Capture Date/Time | Confirmation Number# | View Form                 |
|--------------------|-----------------------------------|-----------------------|-----------------------|----------------------|---------------------------|
| 09/30/2020 9:43 AM | <a href="#">Automation Import</a> | 10/15/2020 12:00 AM   | 09/30/2020 12:00 AM   | cvbuw1dd             | <a href="#">View Form</a> |

Showing 1 to 1 of 1 entries

Previous

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