



## Part D Prescription Application Instructions

These are the steps to completing the online scope of appointment and prescription drug plan. There will be three emails, the system uses the name Cambria Smith as the from field in most cases.



### **1st Email** Scope of Appointment Email

A document stating that you allowed me to discuss your prescriptions and plans with you- **\*\*Must be signed within the same business day sent.\*\***

1. Will ask for your DOB and Zip code to enter doc.
2. 3 checked boxes at the top of page, uncheck all except the one that says "stand alone Drug plan"
3. Scroll to and click where it says "Beneficiary or Authorized Representative Signature"
4. Type in your name, Click Submit



### **2nd Email** Medicare PART D Important Documents

These are important documents to share plan information as well as Medicare basics with you. There is no action needed on this email- save these files to read at your leisure.

1. Includes Summary of Benefits
2. Medicare and You Booklet
3. Star Ratings for Respective Plan



## 3rd Email

### Medicare PART D Important Documents

Click on link Enroll Online 2021 (your drug plan name)

Enter DOB and Zip code to open

Review Personal Information Section

Next

Review Medicare Information (fix any mistakes)

**\*\*\*Fill in Requested Effective Date\*\*\***

#### **Special Enrollment period Section**

**\*\*IF you are just now turning 65 and in IEP (Initial Enrollment Period)-**

check the 1st box that says "I AM NEW TO MEDICARE"

(all other questions leave blank)

**\*\*\*IF you are over 65 and in your SEP (Special Enrollment Period)-**

check the box that states " I am leaving (or left) coverage from my employer" THEN

Enter date Coverage is ending. Leave all other questions blank.

Will you receive other prescription drug coverage in addition to this plan? \_ NO

Are you a resident in a long term care facility? Yes or No

Click NEXT

PAYMENT INFORMATION\_ Your Choice

Review and Submit

**\*\*MAKE SURE YOU RECEIVE A NOTICE STATING THAT YOUR APPLICATION HAS BEEN SUBMITTED\*\* OR THANK YOU FOR YOUR SUBMISSION\***

Confirmation Received Date: \_\_\_\_\_



For assistance with an application or questions on an application, please call us at: **1-800-936-1405**