

Tips for Reviewing Your Individual Client's Application



Elect Application Tips for Agents

We want to help you ensure that your client's application is processed as quickly as possible. Here are a few tips to consider when reviewing your client's application prior to submitting it to PacificSource for underwriting.

1 Complete All Sections

Check the application to be sure all sections of the application are clearly legible and answered completely.

Section 1 – Plan Selection

2 Select Plan and Deductible

Please be sure your client has selected a plan and deductible. If nothing is marked, we will underwrite the application for our most comprehensive plan design, the Elect Premiere 1,000.

3 Effective Date

Please write in a future effective date of the 1st or the 15th. If nothing is entered in this area, we will select the next available effective date.

4 Employer-Paid Premium

PacificSource does not accept payment from employers for Individual policies.

Section 2 – Applicant Information

5 Complete Applicant Information

Enter complete name, height, weight, social security number, and date of birth for all applicants.

6 Unregistered Domestic Partners

We now allow unregistered domestic partners (same gender or opposite gender, to apply together). A separate, completed Affidavit of Domestic Partnership is required.

Section 4 – Oregon Standard Health Statement

7 Clearly Mark All Questions

All questions in this section must be clearly marked "yes" or "no." If your client has a condition that is not listed, mark question 53a "yes."

8 Provide Health History Details

For all "yes" responses, check to be sure the client has provided health history details (this is required):

- Patient name and applicable question number.
- Dates of treatment, including the first and last time seen for each condition, or the date the client or family member is scheduled to be seen next.
- Description and treatment for each condition. If any medications are taken as treatment, please also provide the name and dosage of all medications under question 54.
- Final result (indicate "ongoing" or "resolved").
- Complete name, address, and phone number of attending physicians or hospitals.

Section 6 – Conditional Authorization

9 Signature

Review to be sure all necessary signatures and dates are complete. Note, if a spouse or dependent over the age of 18 is also applying for coverage, they must sign and date the application, too. If an Affidavit for Domestic Partnership is included, it must be notarized.

Continued on reverse



Section 7 – Producer Authorization

10 Complete Producer Information

Sign, date and write in your producer number.

Payment

11 Payment

Payment is not required at the time of application. However, if the client would like to pay premiums through electronic transfer (EFT) please be sure they have attached a voided check and a completed EFT authorization form. The client will be required to send in the first month's premium with their completed acceptance offer. EFT will start the following month.

How to Reduce Follow-Up Questions

The best way to avoid follow-up questions during the application process is to be sure your client provides specific answers for any condition they've marked "yes." Vague answers would be anything that would not be considered a diagnosis. For example, "back pain" is vague. "Herniated disc" or "lumbar strain" are more specific. The table below provides a list of common conditions and the information we require.

Condition or Answer	What We Might Ask
Abnormal Pap Smear	If the Abnormal Pap smears box is marked "yes," we will need to know date of the abnormal pap smear, dates for follow-up paps and results, and if your client has returned to a yearly examination schedule.
Antibiotics	If antibiotics have been prescribed to treat a condition, we will need to know the name of the medication and why it was prescribed. In the case of sinusitis, we may also need to know how many episodes occurred in the last year.
Asthma	We will need to know the name of the inhaler and how often it is used.
Birth Control	We will need to know the reason why birth control is being used.
Bone Fractures	If the applicant had a fracture, we will need to know where the fracture occurred (what part of the body). If surgery was performed, we will also need to know if hardware was placed, and if it has since been removed.
Breasts (lumps or masses)	We will need to know the diagnosis given (i.e. fibrocystic, fibroadenoma). If a biopsy was performed, we will need the biopsy results/impression.
Breast Implants	We will need to know the implant type (saline or silicone).
Cesarean or Miscarriage	If the <i>Prior Cesarean or miscarriage</i> box is marked "yes," we will need to know which condition (cesarean or miscarriage) and the date of the occurrence (month/year).
Colon/rectum/intestine/bowel	If a colonoscopy was performed, we will need to know if there were any abnormalities. If polyps were removed, we will need the diagnosis (i.e. hyperplastic, adenoma) and the number of polyps removed.
Concussion	If an applicant had a concussion, we will need to know if they were hospitalized and the results of any tests, biopsies, MRIs, or lab/x-ray.
Depo Prevera Shot	We will need to know the reason the client is receiving Depo Prevera shot(s).
Headaches/migraines	We will need to know how often headaches or migraines are experienced and how often medication is being used. If migraines, we will need to know if they have been treated in an emergency room or required hospital care.
Hepatitis	We will need to know the hepatitis type.
Hernia	We will need to know the hernia type.
Herpes	We will need to know the frequency of treatment.
High Cholesterol/Blood Pressure	We will need the reading and date (month/year) it occurred, including Total Cholesterol.
Hysterectomy	If within the last five years, we will need the reason for the hysterectomy.
Knee/shoulder/hip/other joints	We will need to know the diagnosis given. If hip/knee has been replaced, we will need to know if it was a unilateral or bilateral replacement.
Osteoporosis/Osteopenia	We will need to know the T-scores.
Pregnancy	If recent pregnancy, we will need to know if the six-week postpartum exam has been completed and if the applicant has been released.
Psoriasis	We need to know how much of the body is affected by psoriasis and whether there is any joint involvement.
Scoliosis	We will need to know the degree of curvature.
Tobacco (quit)	We will need to know the date when the client quit tobacco use.