Pending Case Management Tracking

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Introduction

The **Pending Case Management** (PCM) module is used to create and update the pre-inforce policies that are in the Underwriting stage. The user can track statuses, dates, basic policy and premium information, advisor information, important contacts, policy relationships, underwriting information, underwriting requirement activity, delivery requirements, and delivery policy information.

The **Pending Case Management** module consists of the following sub-modules:

- PCM (Pending Case Management)
- Follow-Up
- Team
- Doctor
- Medical Facility
- Service Provider

Pending Case Management Sub-Module

The **PCM sub-module** consists of the following basic sections:

- Summary
- Detail
- Underwriting
- Delivery
- Rider/Reinsurance
- Activity/Mail

Accessing the Pending Case Management Module

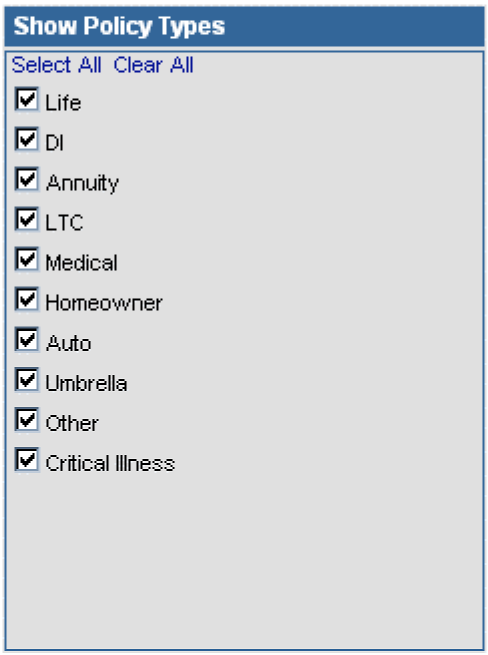
PCM can be accessed through any of the following methods:

- In the **Quick Add/Search** section, select **PCM** from the drop-down list and then click the **Go** button
- Select **Pending Case Management** from the main menu
- From the **Contact** module, click the **PCM** button
- From the **Policy Module**, click the **PCM** button
- From the **Carrier Module**, under the **Ind. Policy** tab (pending cases are highlighted in pink)
- From the **Product Module**, under the **Individual Policy** tab (pending cases are highlighted in pink)

Module Setup

To set up user rights to **Pending Case Management Tracking**, continue as follows:

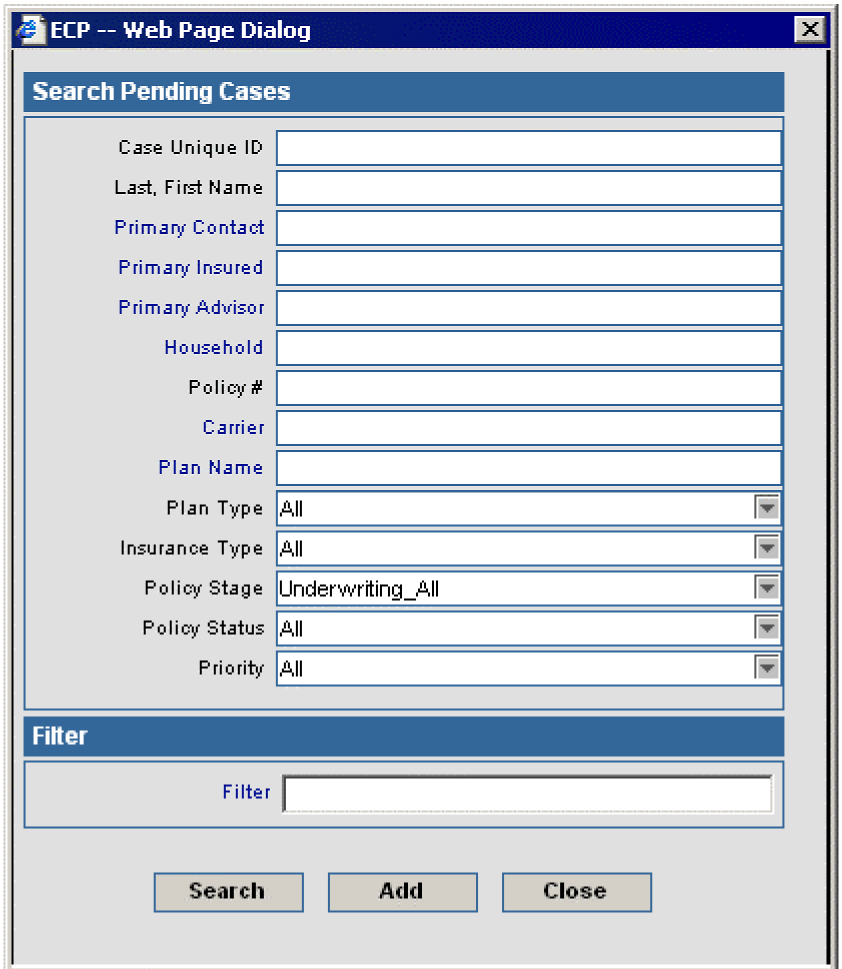
1. From the main menu, click **User Setup** to open an expanded list and then select **User Preferences** to navigate to this option.
2. From the **User Preferences** section, click the **Policy/Investment** tab.
3. In the **Show Policy Types** section, click the **Select All** hypertext to show all policy types. Clearing these checkboxes prevents the user from viewing the respective policy type(s).



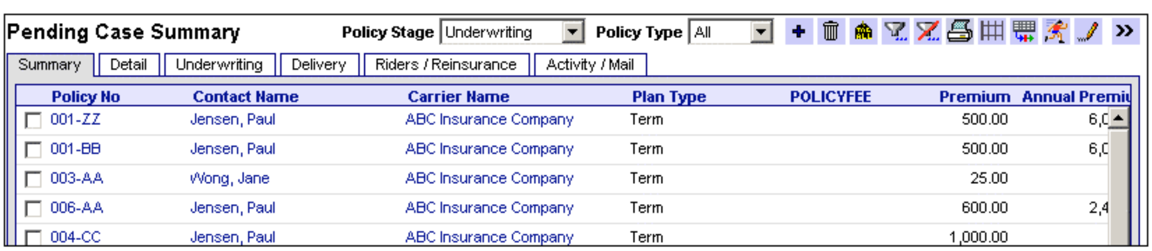
4. If any changes are made, click the **Save** button to save the new settings.

PCM Search Window

To search pending cases, select **PCM** from the menu and choose **PCM Search** in the expanded menu to open the **Search Pending Cases** dialog box.



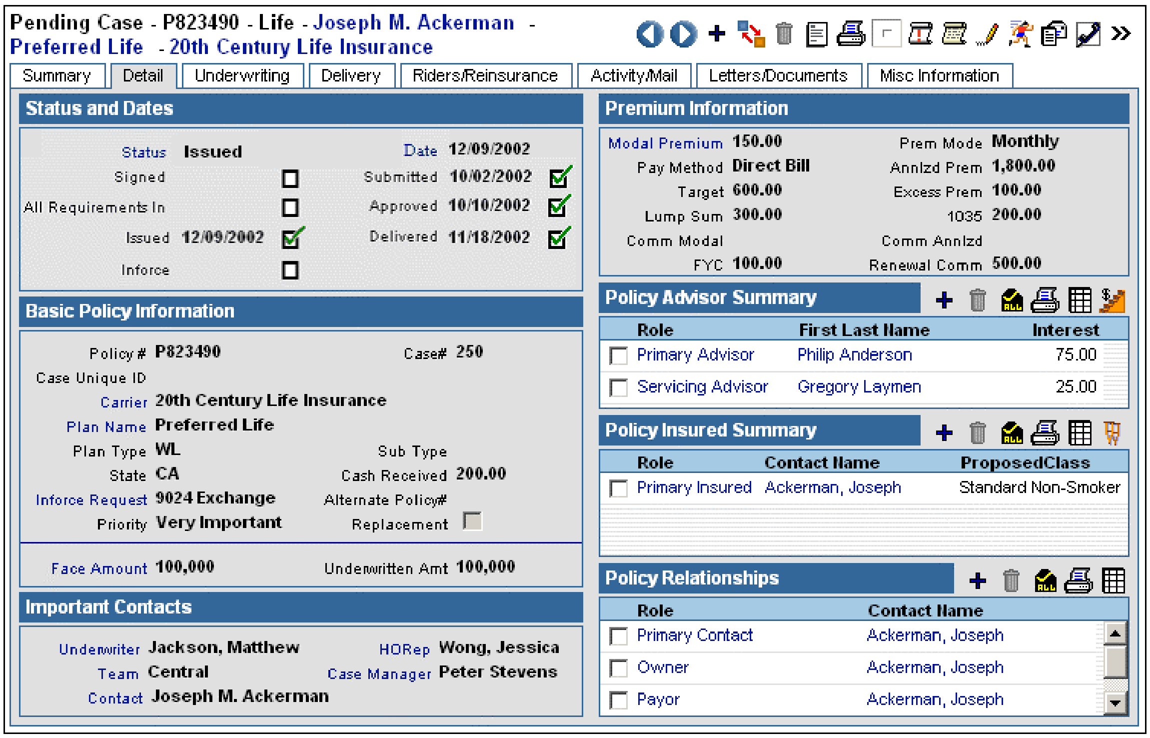
- To display a summary spreadsheet for all cases in the Underwriting stage, click the **Search** button without entering any search criteria.
- To display a summary spreadsheet based on specific criteria, enter a specific policy number, plan type, insurance type, etc.



Detail Tab

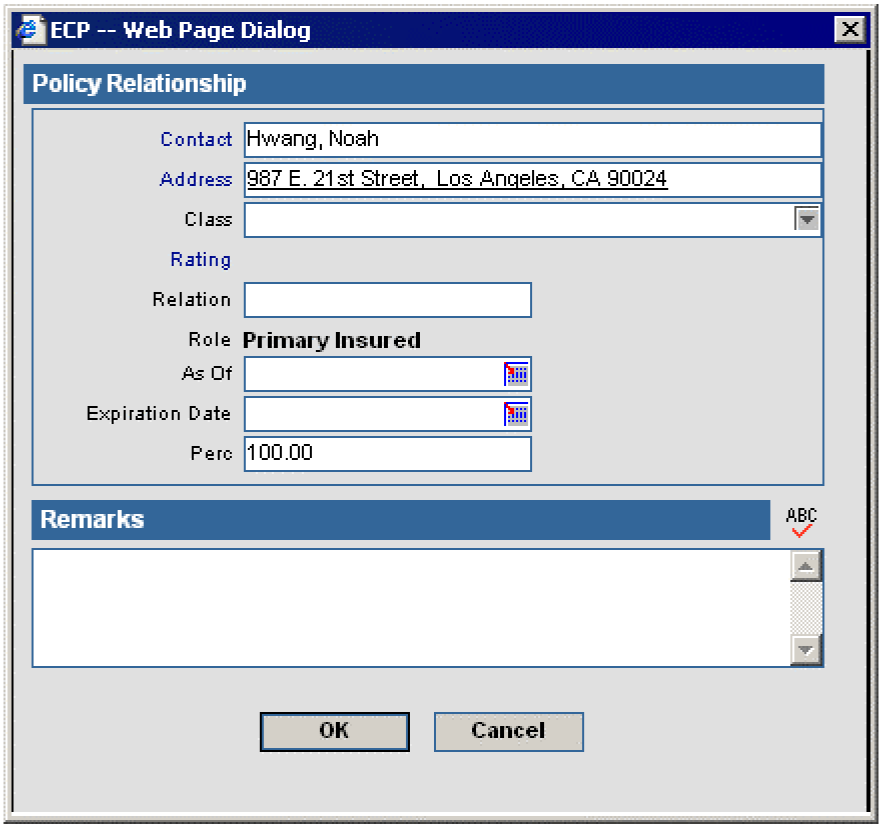
To access the **Detail** tab, select a pending case. To select a case, click the checkbox next to the appropriate case.

Policy specific information such as Policy#, Carrier, Plan Name, Plan Type, Premium, and Mode are entered on this window along with Advisor Information, Important Contacts (Underwriter, HORep, Team, Agency Rep), and Policy Relationships.



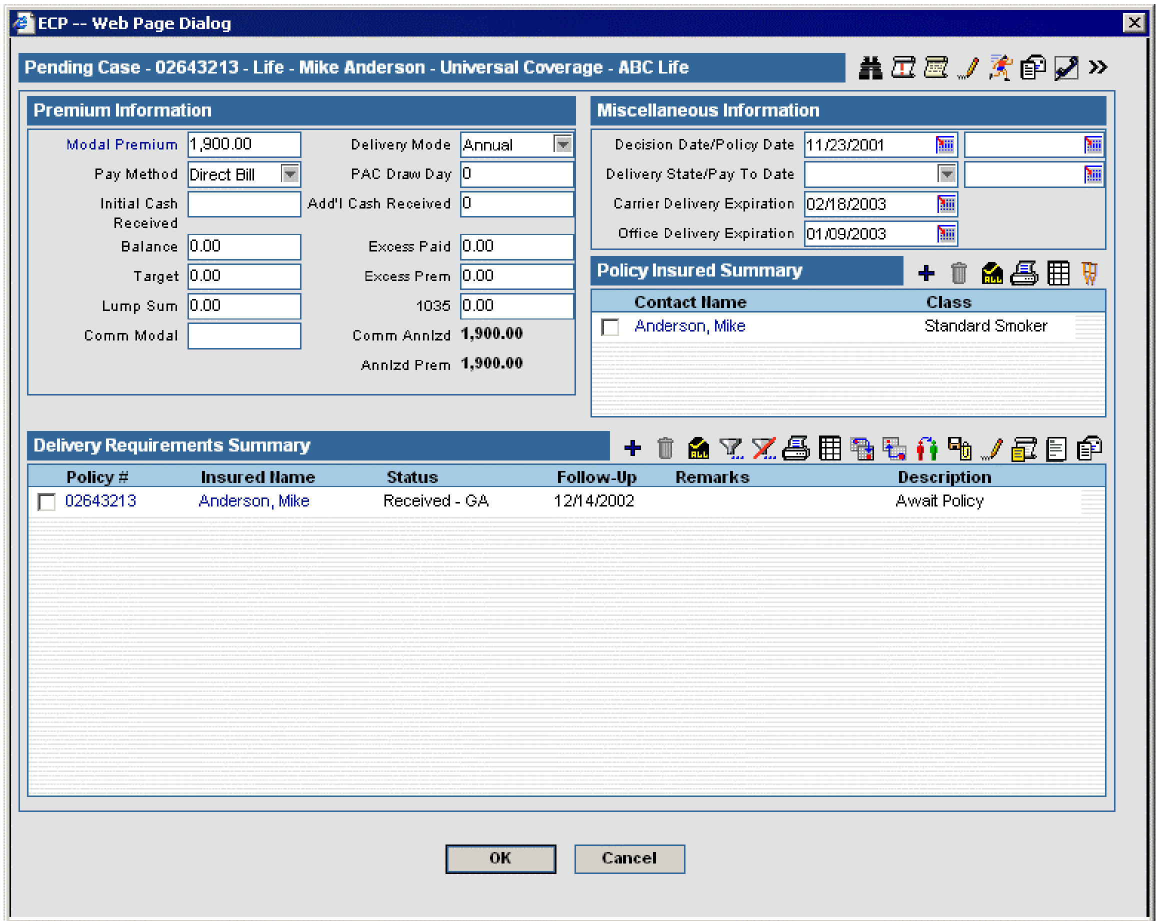
Approved

When the pending case status is changed to **Approved**, the **Policy Relationship** dialog box opens. Any changes between applied for and approved Primary Insured information is entered here.



Delivered

When the pending case status is changed to **Delivered**, the Pending Case dialog box opens. Any changes between applied for and Delivered policy information, such as insured class and Pay Method, is entered here. The information carries over to the **Delivery** tab.

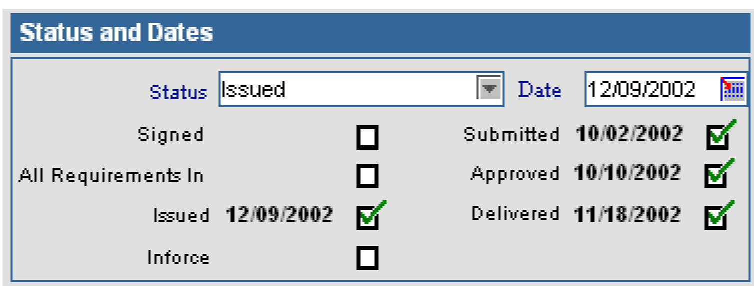


Status and Dates Section

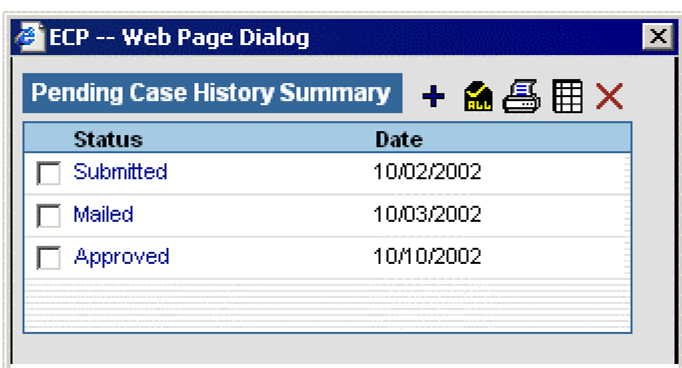
The **Status and Dates** section is used to track the current status, status date and status history.

When a new case is added to the PCM module, the Status defaults to the status stated in the PCM initial workflow (Example: Submitted). For more information, see the **PCM Setup** document. The Status and Date fields reflect the current status and its associated date. The rest of the section displays key statuses that offer the associated dates in read-only mode. Selecting a status checkbox will update the case status and date as well as populate the read-only date field next to the status with the current date. If the checkbox is already selected with a previous date when clicked, the date will refresh with the current date. However, if the checkbox is already selected with today's date and then selected, the user has the option to delete the date from the read-only display and from the history. Please note that only today's date can be deleted in this manner.

While in Edit mode, the user can change the contents of the Status and Date fields. The Status field lists all available statuses for selection. When a selection is first made in the Status field, the associated date checkbox becomes selected and the respective date is noted or updated. When the Status is selected, the Date field is also populated with today's date. This date can be changed before saving. The case must be saved before the logic connected with the Status field will take effect.



To see a history of the status and the dates associated with those statuses, click on the Status hyperlink to open the **Pending Case History Summary** window.

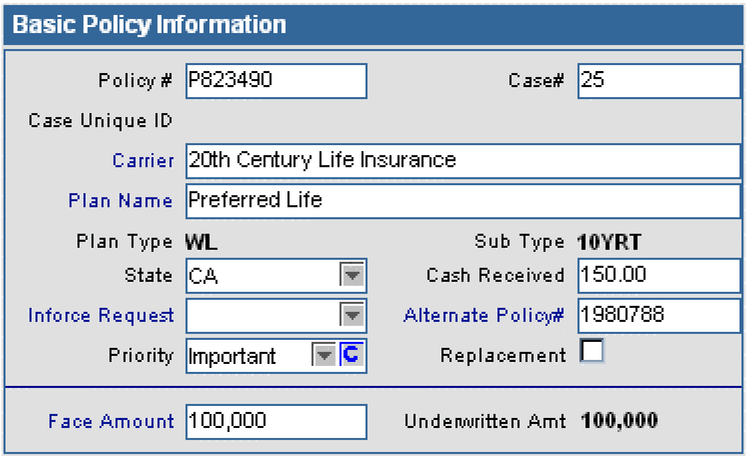


Additional statuses along with their associated dates can be added in the **Pending Case History Summary** window. Doing so will not modify the current status, but it will add them to the history.

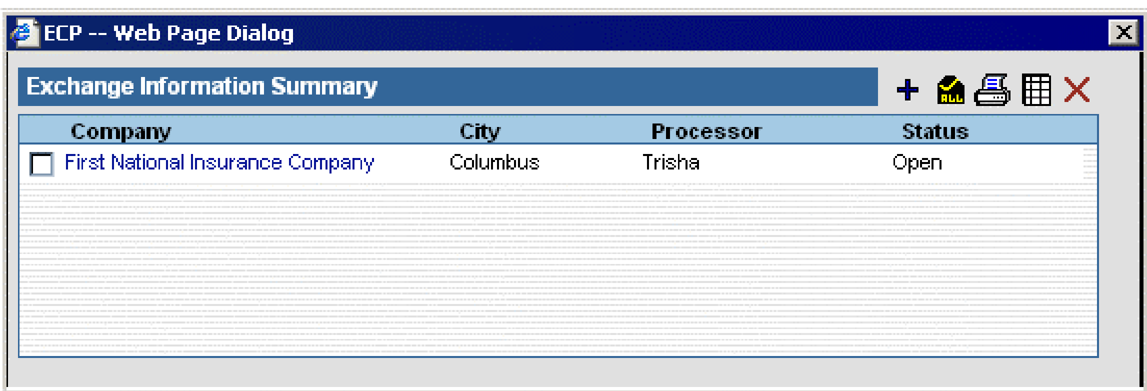
Basic Policy Information Section

Under the **Basic Policy Information** section, the same basic information for all types of insurance is tracked. **Cash Received** is the amount of money received with the application, prior to approval. Cash Received is directly connected with **Initial Cash Received** under the **Delivery** tab. If the value in the Cash Received field (**Detail** tab) is changed, the Initial Cash Received field (**Delivery** tab) is automatically updated and vice versa.

An alternate case can be linked to the current case through the **Alternate Policy #** field. This is a copy of an original case with some modifications.

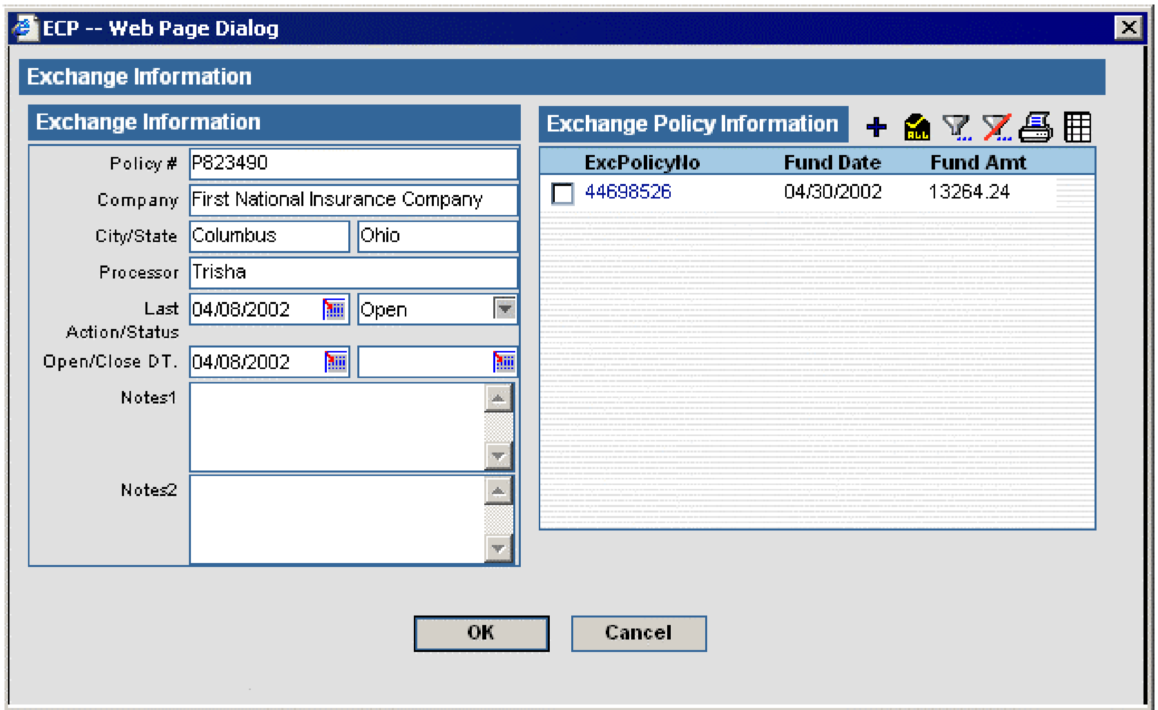


To view or modify exchange information, click on the blue **Inforce Request** hyperlink to open the **Exchange Information Summary** spreadsheet.

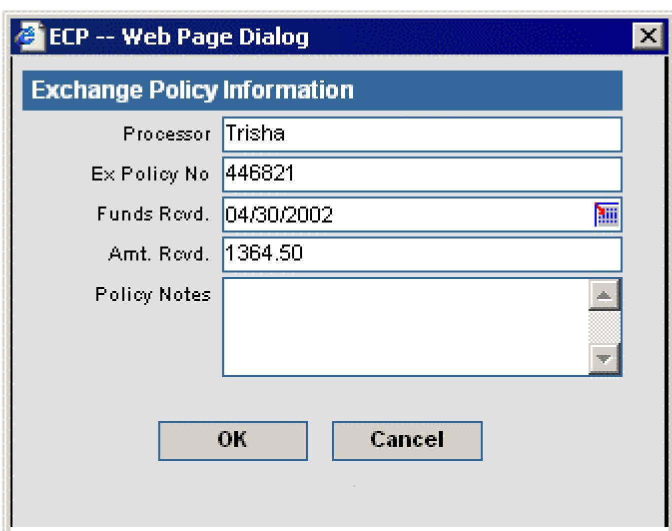


To add an entry to this window, click the **Add** button to open the **Exchange Information** dialog box.

Information on the origin, status and date of an exchange can be found under the **Exchange Information** section.

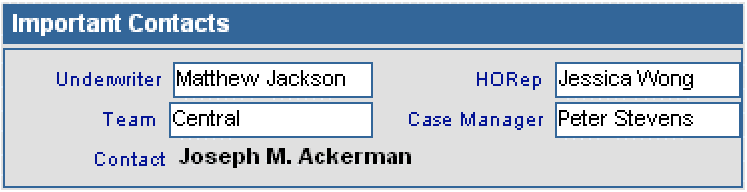


To note the amount of the fund along with when it was received, click the **Add** button to enter additional information. The **Processor** field automatically populates the Processor's name from the previous window. The **Amt. Rcvd** (Amount Received) field must be populated in order to save this information.



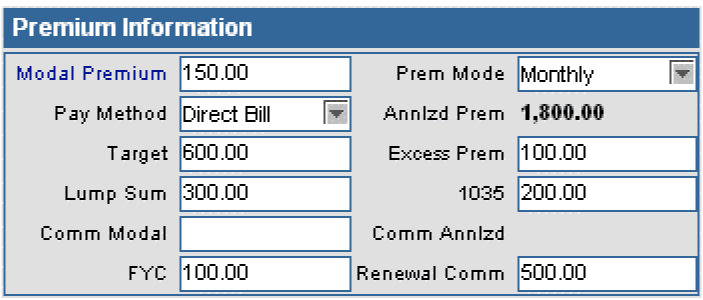
Important Contact Section

The important Contact section displays the Underwriter, Home Office Representative, Team, Case Manager, and Primary Contact.



Premium Information Section

The **Premium Information** section stores the proposed premium information. **Annlzd Prem** is the **Modal Premium** multiplied by the number of payments the specified **Prem Mode** (Premium Mode) makes in a year. If the Prem Mode or Modal Premium is changed, the Annualized Premium will re-calculate. Excess is the difference between target and annual. The PCM module automatically populates this field. **Comm Modal** is equal to **Base Commissionable Premium** in the **Premium Breakdown** dialog box.



To view or modify premium breakdown information, click the **Modal Premium** hyperlink to open the **Premium Breakdown** dialog box. These fields are populated using the settings in the **Product Fee Information** and **Product Fee Commissionable** sections in the Product module and the **Modal Premium** and **Premium Mode** fields in the PCM module.

On initial entry of a pending case -- enter the **Premium**, **Premium Mode**, and **Payment Method**. When the information is saved, the following actions occur:

- The **Policy Fee** and the **Non-Commissionable Fee** are calculated from the **Product Fee Information** and **Product Fee Commissionable** sections of the Product Module and the **Premium Mode** and **Payment Method** of the policy.
- The **Base Commissionable Premium** is calculated as the **Premium** minus the **Policy Fee, Non Commissionable Fee,** and the **Flat Extra Premium.**
- The **Comm Annlzd** field is calculated as **Base Commissionable Premium** times the number of payments in a year.

When modifying the case, the following rules are used:

If the **Premium** field is modified:

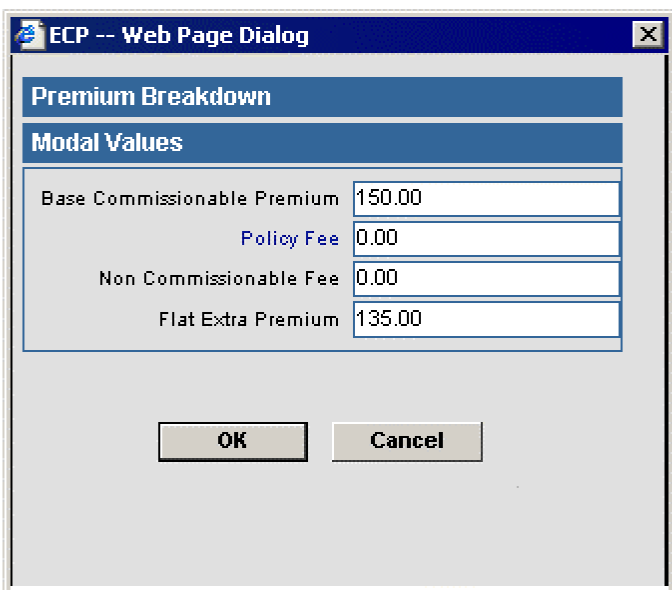
- The **Base Commissionable Premium** is recalculated to equal the **Premium** minus the **Policy Fee**, **Non Commissionable Fee**, and **Flat Extra Premium**.
- **Comm Annlzd** is recalculated.

If the **Prem Mode** (Premium Mode) or **Pay Method** (Payment Method) fields are modified:

- The **Policy Fee** and **Non Commissionable Fee** are recalculated using the modal factor of the new mode/method. If there is not a modal factor listed for that mode/method combination, the **Policy Fee** and **Non Commissionable Fee** values will equal 0.
- **Base Commissionable Premium** is recalculated (**Premium** minus the **Policy Fee**, **Non Commissionable Fee**, and **Flat Extra Premium**).
- **Comm Annlzd** (Commissionable Annualized) is recalculated.

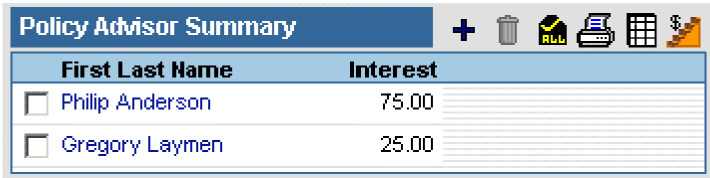
If the **Face Amount** is modified:

- The **Policy Fee** and **Non Commissionable Fee** are recalculated using the modal factor of the new mode/method. If there is not a modal factor listed for that mode/method combination, the **Policy Fee** and **Non Commissionable Fee** values will equal 0.
- **Base Commissionable Premium** is recalculated (**Premium** minus the **Policy Fee**, **Non Commissionable Fee**, and **Flat Extra Premium**).
- **Comm Annlzd** (Commissionable Annualized) is recalculated.
- If the **Base Commissionable Premium** is modified:
    - **Modal Premium** will be recalculated as follows: **Base Commissionable Premium** plus **Policy Fee**, **Non-Commissionable Fee**, and **Flat Extra**.
    - **Annlzd Prem** (Annualized Premium) will be recalculated as follows: **Modal Premium** times the number of payments per year.
    - **Comm Annlzd** (Commissionable Annualized) will be recalculated.

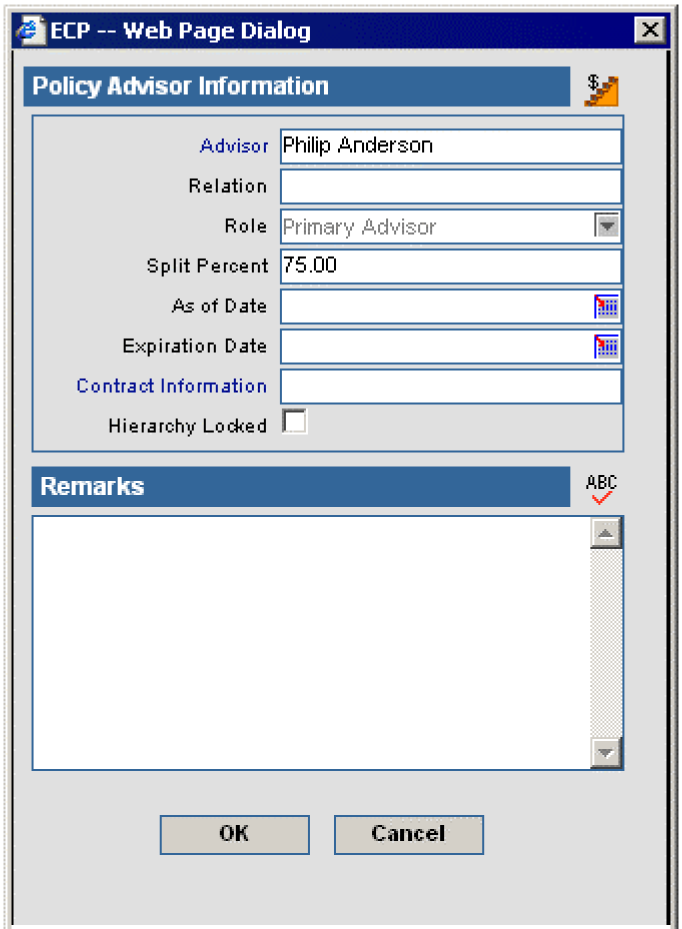


Policy Advisor Summary Section

The Policy Advisor Summary lists the Advisor information for the pending case.

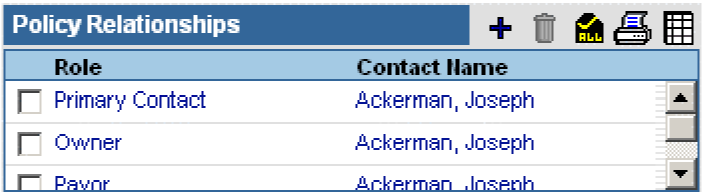


To add an Advisor, click the **Add** button to open the **Policy Advisor** dialog box.

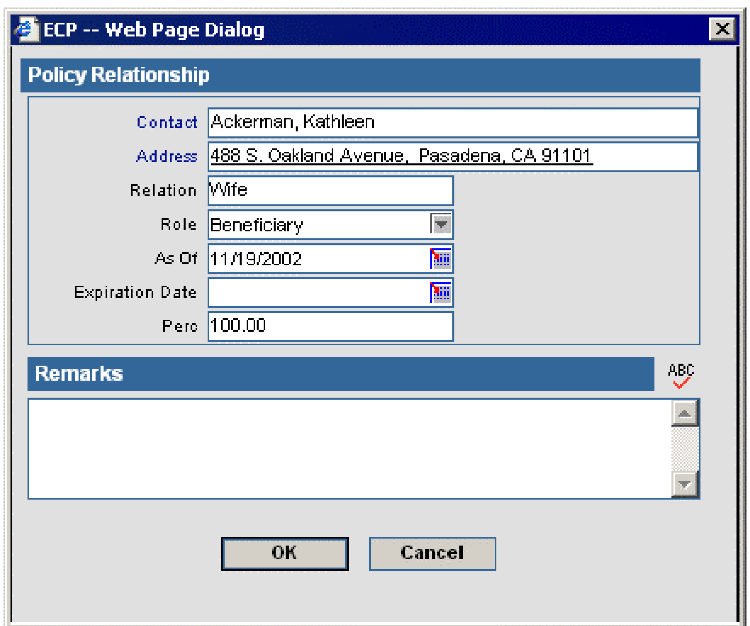


Policy Relationships Section

The **Policy Relationships** section can be used to define the Owner, Payor, Beneficiary, Annuitant, Loss Payee, Collateral Assignee, and/or Absolute Assignee for the policy.

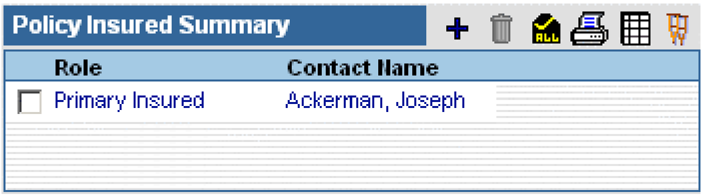


To add a policy relationship, click the **Add** button to open the **Policy Relationship** window. The **Contact** field refers to the person with whom the case has a relationship. **Relation** refers to the relationship the contact has with the primary insured of the policy. **Role** refers to the contact's relationship to the case. **As Of** is when the contact became associated with the case and **Expiration Date** is when the contact is no longer connected with the case. **Perc** is the amount the contact is related to the case. For example, the **Perc** of a beneficiary determines the percent of the benefit the associated contact will receive.

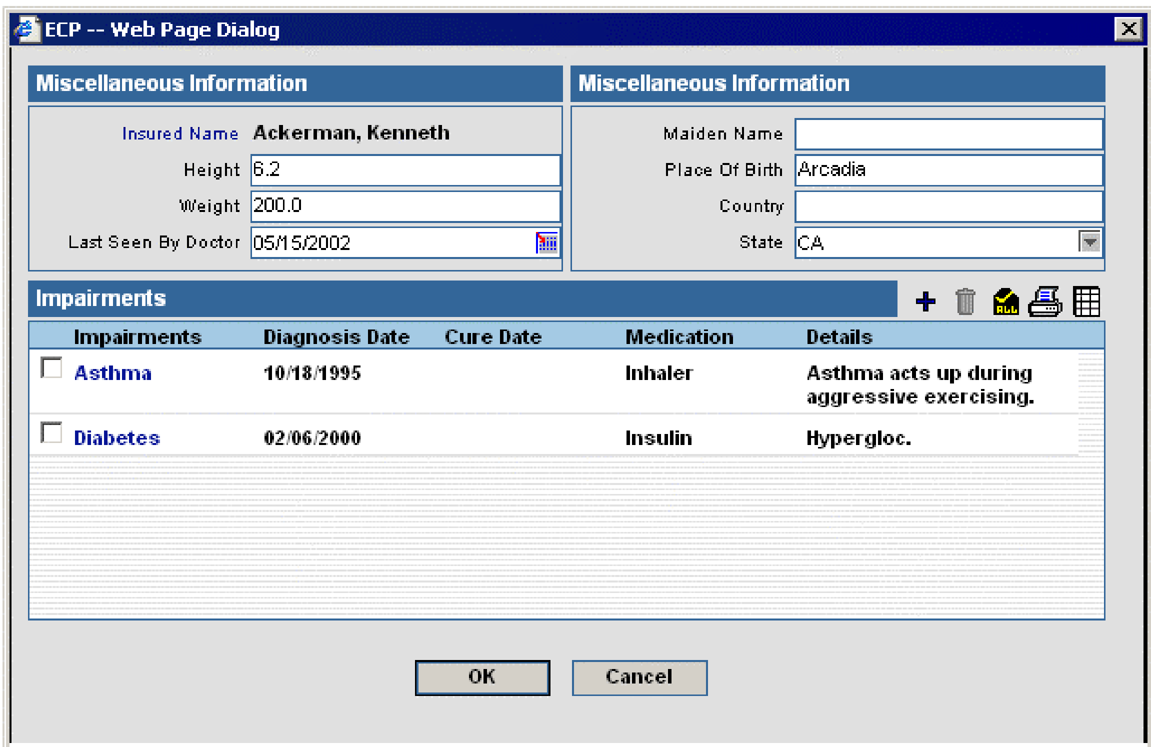


Policy Insured Summary

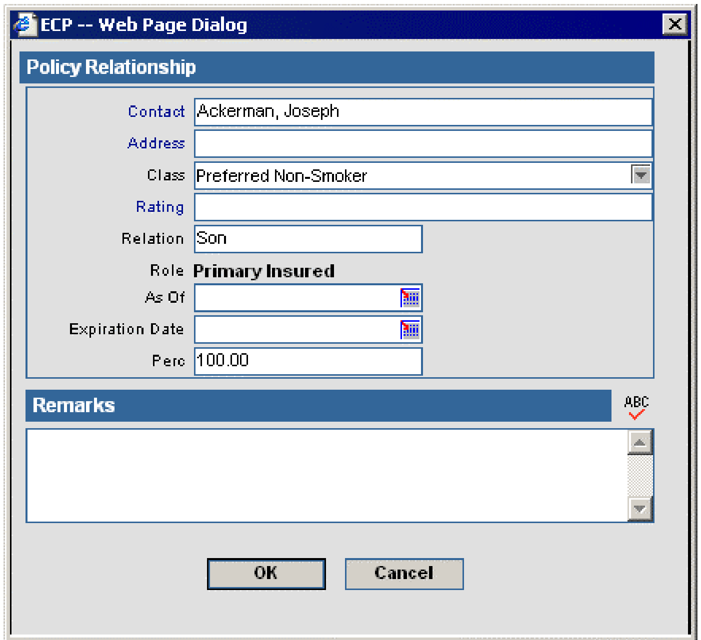
The Policy Insured Summary lists the Primary Insured and the other insured contacts for that policy.



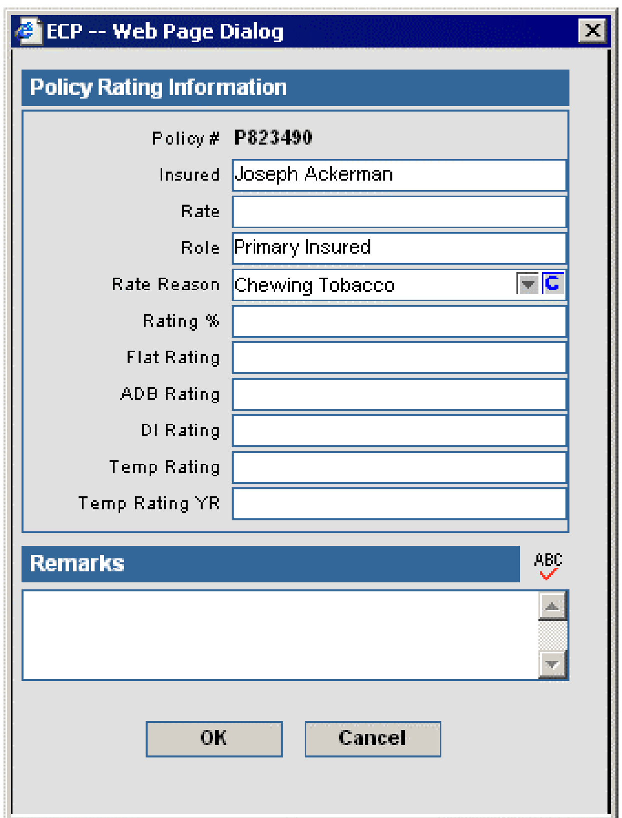
Select an insured contact and click the **Impairments** button to open the Impairments dialog box. Impairment information will carry over for all policies and pending cases for the contact.



To add an insured contact, click the **Add** button in the **Policy Insured Summary** to open the **Policy Relationship** window.



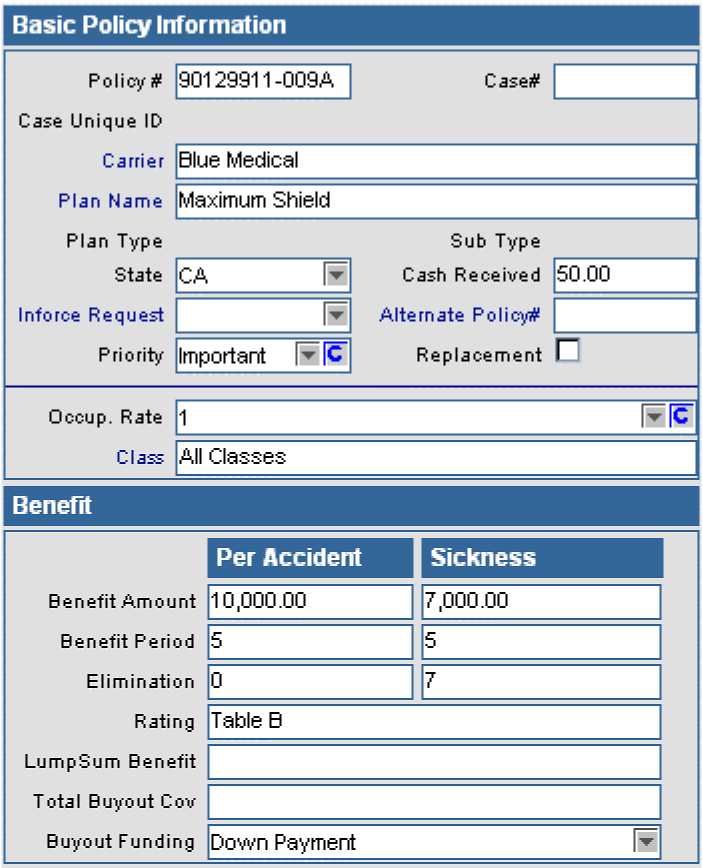
To view, add, modify, or delete policy ratings for a particular insured contact, click the **Rating** hyperlink in the **Policy Relationship** window to open the **Policy Rating Information** window.



Basic Policy Information Section based upon Product Types

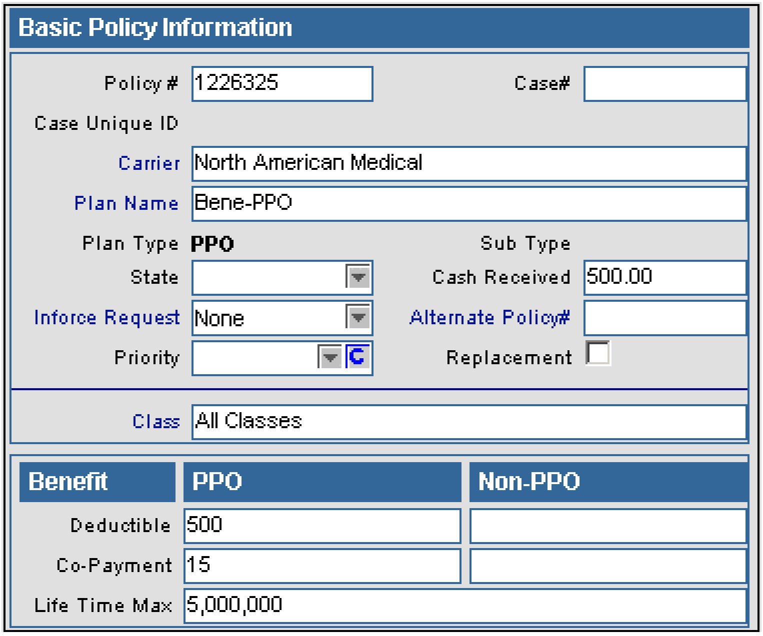
Disability (DI)

Class is a product-specific field and is directly linked to the **Product** module. The user can choose an option from a list of previously set risk classes. **Benefit Amount** is the most money the client can receive per accident/illness. **Benefit Period** is how long the benefit will pay out. **Elimination** is the number of days that the client has to be injured or ill before the benefit will pay out. **Rating** refers to an additional rating on a class.



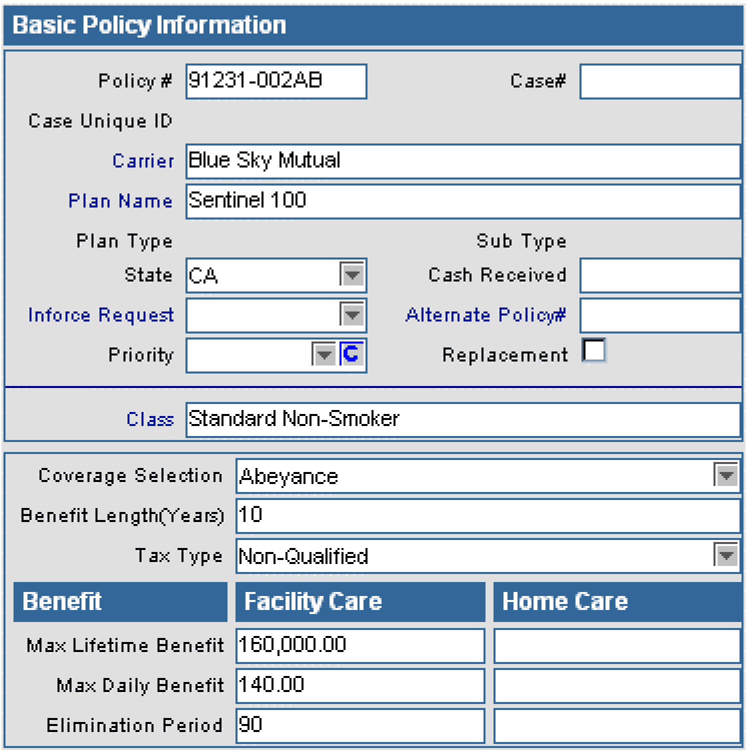
Medical

PPO and Non-PPO information can be tracked using this insurance type. **Deductible** is the amount the client has to pay before the insurance will begin covering costs. **Co-Payment** is the amount of out-of-pocket money the client will pay per doctor visit. **Life Time Max** is the maximum amount the client will have to pay in a lifetime.



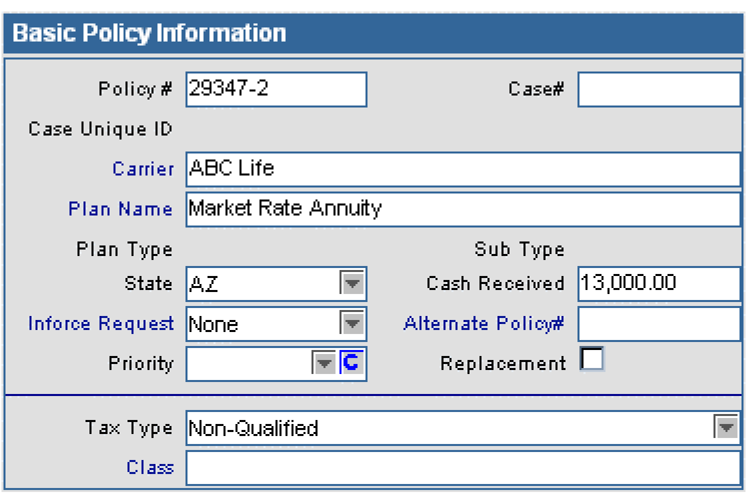
LTC (Long Term Care)

Coverage Selection specifies the type of coverage carried by the client. **Benefit Length** is the amount of time the benefit will pay out. If the **Tax Type** is qualified, the policy is not taxed and if the Tax Type is non-qualified, then the policy is taxed. **Max Lifetime Benefit** is the maximum amount the policy will pay to the client in a lifetime. **Max Daily Benefit** is the maximum amount the policy will pay to the client in a day. **Elimination Period** is the number of days the client has to be injured or ill before the policy will pay out.

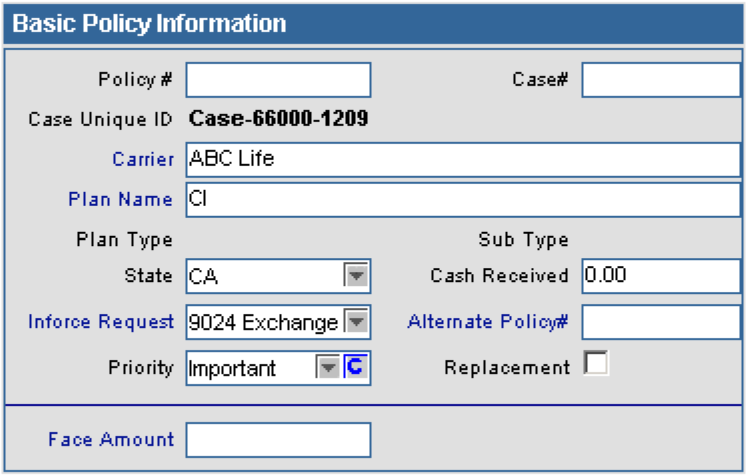


Annuity

If the **Tax Type** is qualified, the policy is not taxed and if the Tax Type is non-qualified then the policy is taxed.

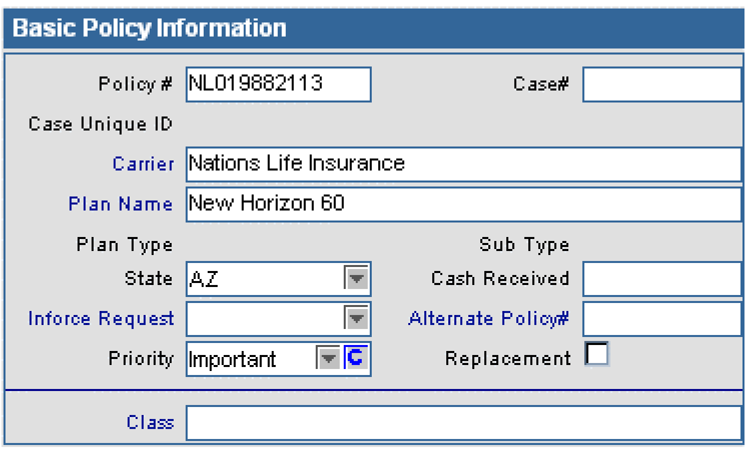


Critical Illness



Other

Other can be used to track any other type of insurance not previously listed.

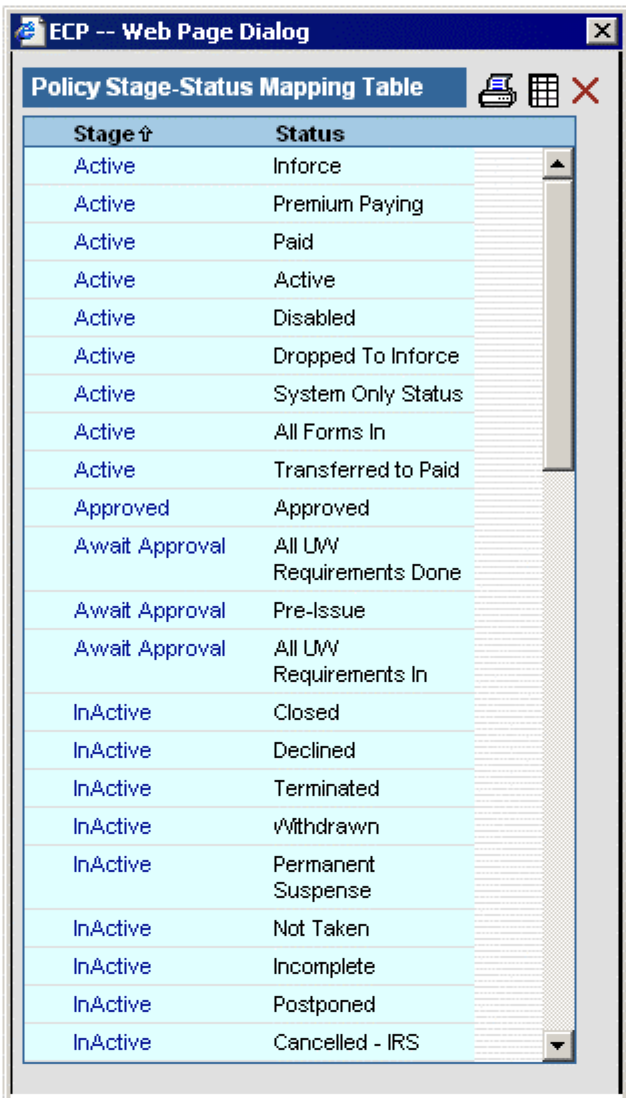


Policy Stage Status Relationship Button

To view the relationships between stages and statuses, click the **Policy Stage Status Relationship** button to open the **Policy Stage/Status Mapping Table** window.

The policy stages are: **Proposed**, **Await Approval**, **Approved**, **Underwriting, Issued, Active** and **Inactive**. The **Active** stage is linked to statuses that are used to process Inforce policies (see **Policy** documentation). The **InActive** stage is linked to statuses that are used for expired or rejected policies. The **Proposed** stage is linked to statuses that are used to process a case pre-underwriting, like a trial case. The **Underwriting** stage is linked to statuses that are used to process a pending case. **Await Approval** and **Approved** are two additional Underwriting stages.

The Status-Stage relationships can be modified from the Configuration Office.

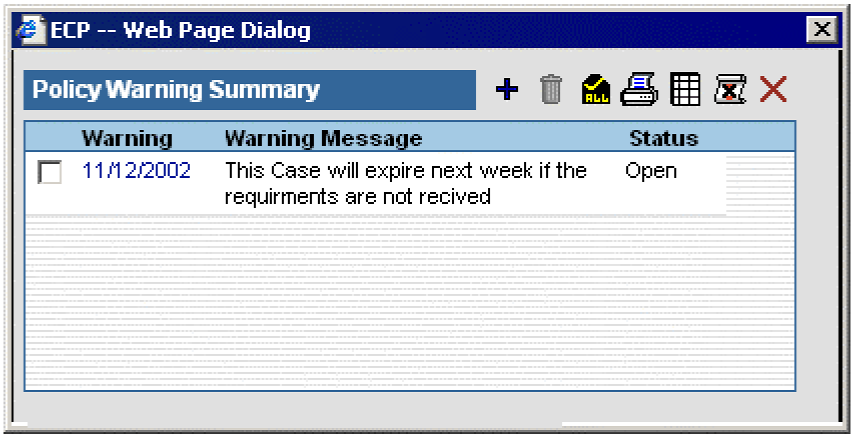

ECP -- Web Page Dialog

Policy Stage-Status Mapping Table

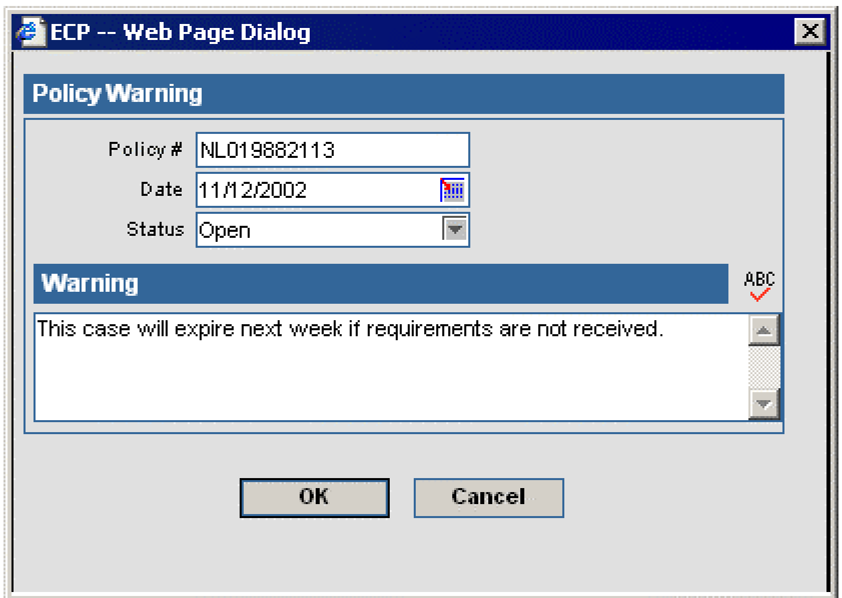
Stage	Status
Active	Inforce
Active	Premium Paying
Active	Paid
Active	Active
Active	Disabled
Active	Dropped To Inforce
Active	System Only Status
Active	All Forms In
Active	Transferred to Paid
Approved	Approved
Await Approval	All UW Requirements Done
Await Approval	Pre-Issue
Await Approval	All UW Requirements In
InActive	Closed
InActive	Declined
InActive	Terminated
InActive	Withdrawn
InActive	Permanent Suspense
InActive	Not Taken
InActive	Incomplete
InActive	Postponed
InActive	Cancelled - IRS

Policy Warnings Button

To view, add, modify, or delete policy warnings, click the **Policy Warnings** button to open the **Policy Warning Summary** spreadsheet.



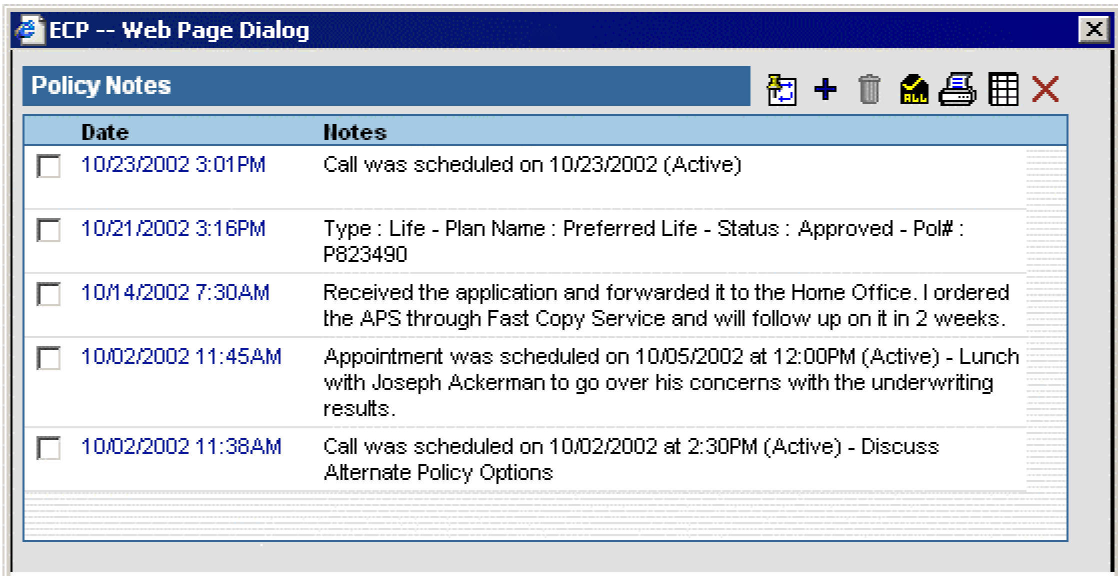
To enter a new warning, click the **Add** button to open the **Policy Warning** dialog box.



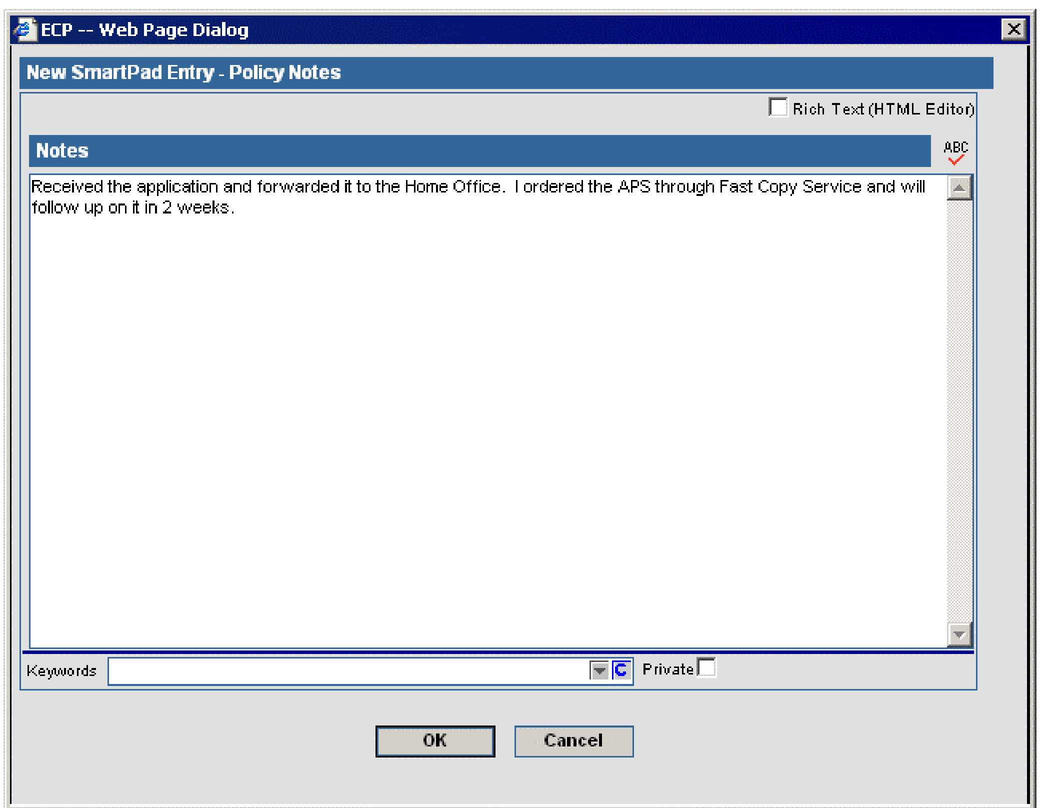
To change the warning status to Closed, select the warning in the Warning Summary and click the **Close Warning** button. When a case has a warning with an Open status, the **Policy Warnings** button will blink as a reminder that something important needs to be addressed on this case.

Policy Notes Button

To add or view notes on the policy, click the **Policy Notes** button to open the **Policy Notes** spreadsheet.



To add a new policy note, click the **Add** button to open the **Policy Notes Detail** dialog box.



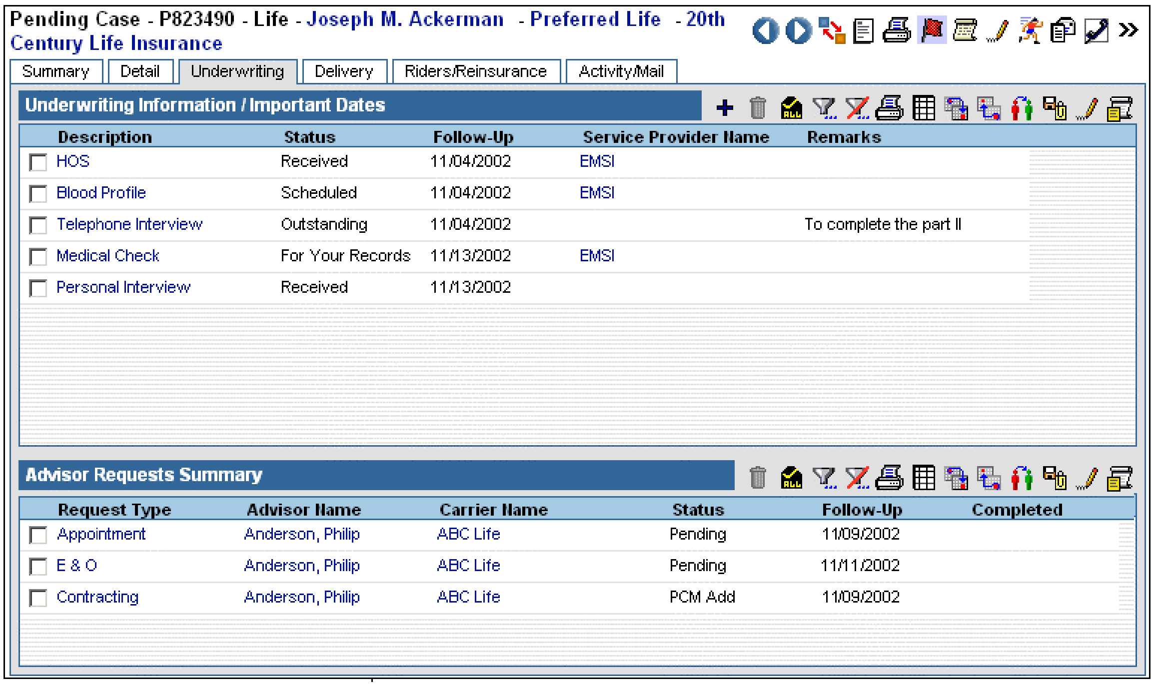
Policy Notes can also be viewed from the **Policy** module.

Policy Summary Button

Click the **Policy Summary** button to go to the current case's record in the policy module. Click on the **PCM** button while in the Policy Module to return to PCM.

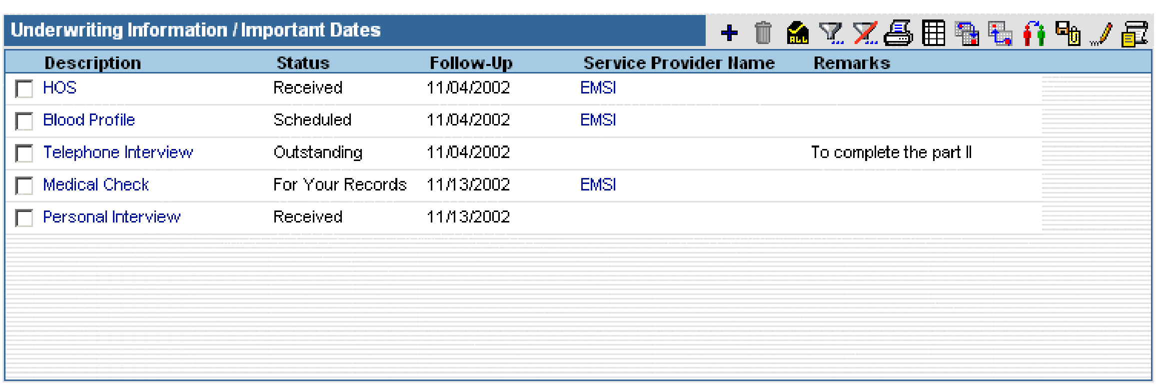
Underwriting Tab

Underwriting Information and the Advisor Requirement Summary are located on the **Underwriting** tab.

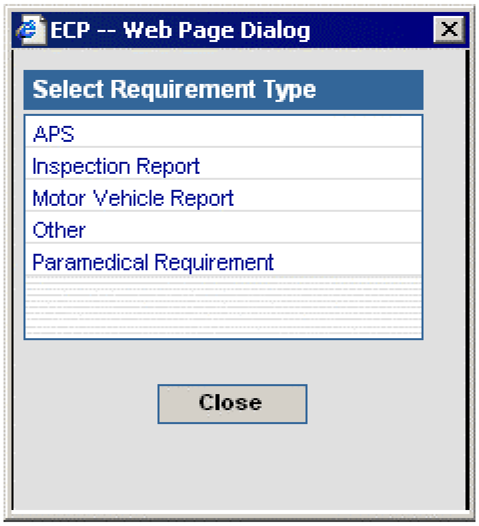


Underwriting Information / Important Dates

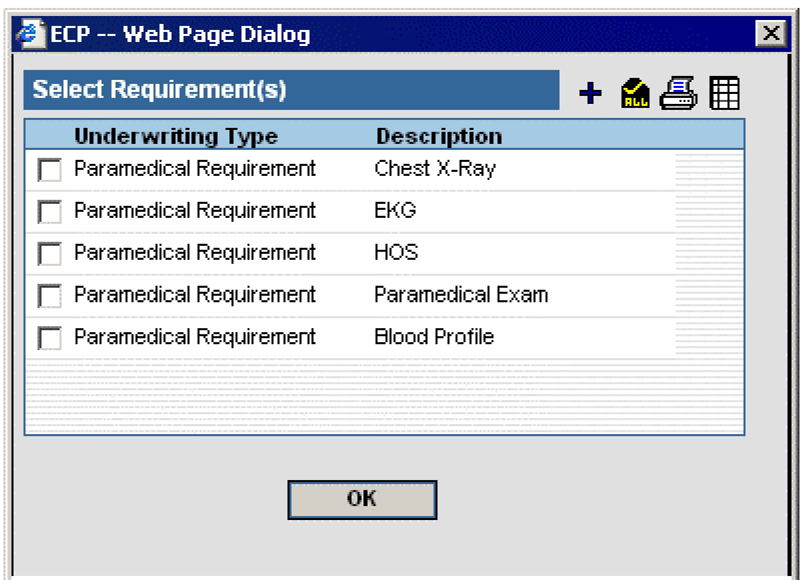
Underwriting requirements are automatically populated by PCM based on underwriting guidelines created in the Product module. For further information, see the **Product Module** document.



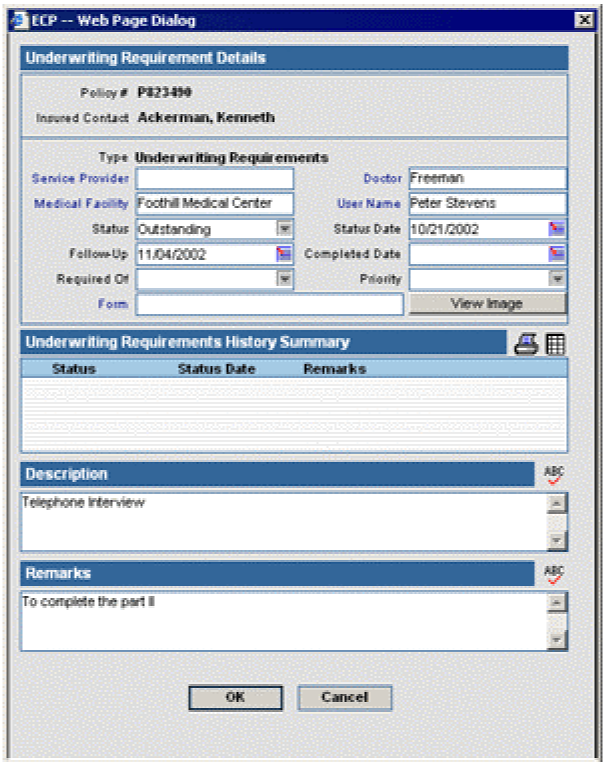
To designate an additional underwriting requirement, click the **Add** button to open the **Select Requirement Type** dialog box.



Select a requirement type to open the **Select Requirement(s)** spreadsheet. This spreadsheet will list only the requirements related to the selected requirement type. The listed requirements are created in **PCM Setup/Configuration.**

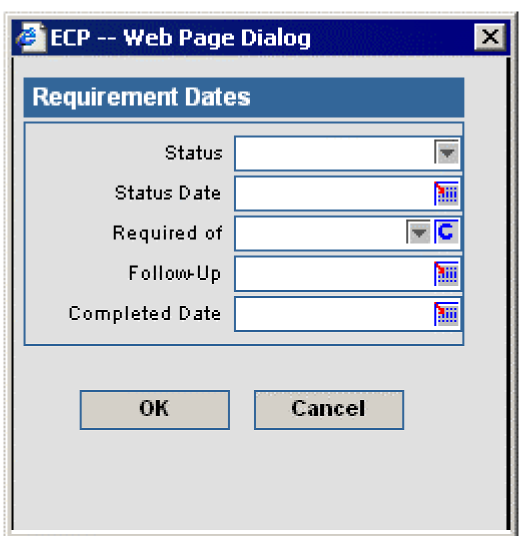


Select a requirement and click the **OK** button to display the **Underwriting Requirement Detail** window. **Medical Facility** is the facility that handles the requirement. For example, if the policy requires a blood sample and Foothill Medical Center is performing the blood test, that facility will be listed in the Medical Facility field. This window also opens when a requirement is modified. When the **Completed Date** is entered, the **Follow-Up Date** is automatically deleted. The user can enter a new Follow-Up date if necessary.



Change Date Button

Select a requirement and click the **Change Date** button to open the **Requirement Dates** dialog box. Here the requirement's **Status**, **Status Date**, **Required Of**, **Follow-Up** date, and **Completed Date** can be updated.

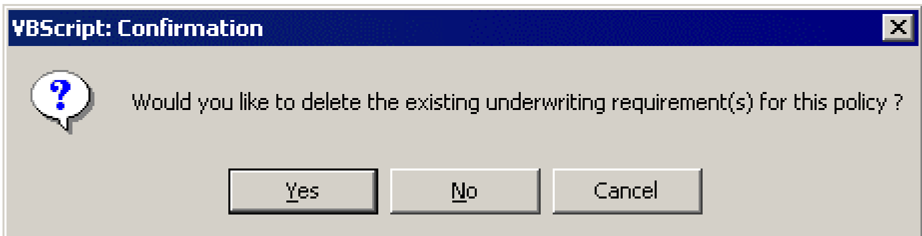


Reset Follow-Up Date Button

Select a record and click the **Reset Follow-Up Date** button to renew the Follow-Up date based upon the current date. The calculation used is entered in the **Carrier** module.

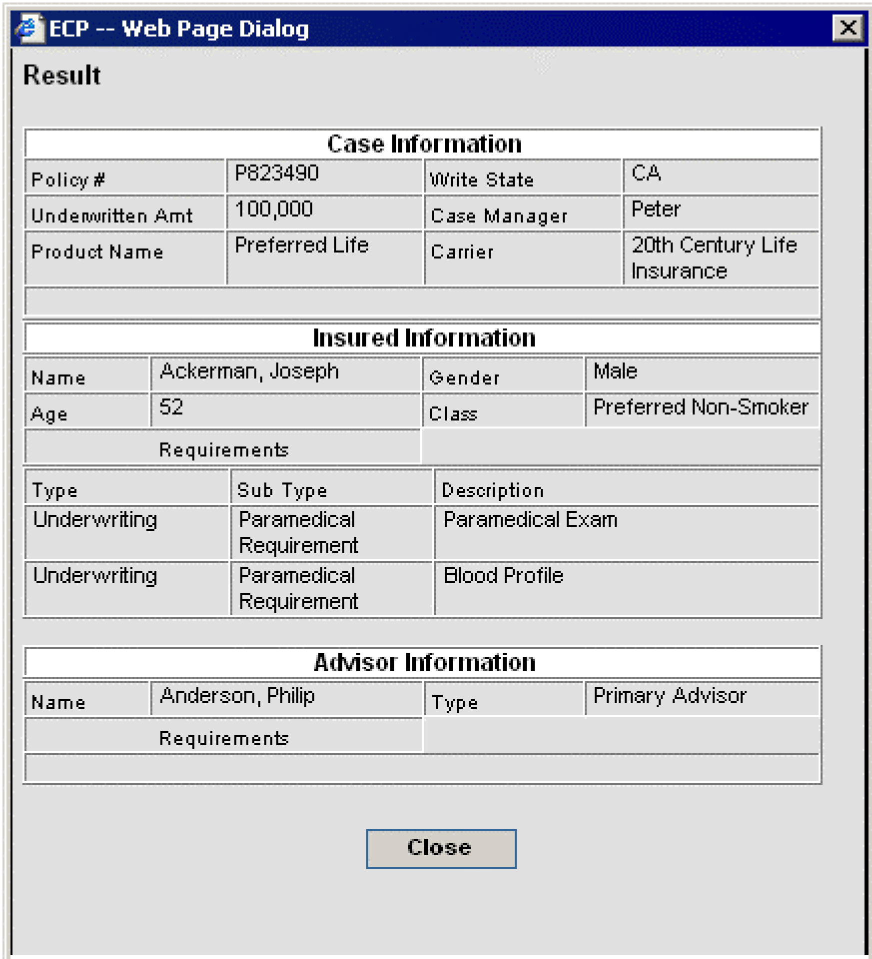
Recreate Underwriting Requirement Button

To recreate the underwriting requirements from a product's guidelines, click the **More Features** button and then select **Recreate Underwriting Requirement** from the drop-down list. A prompt will confirm deletion of the existing underwriting requirements.



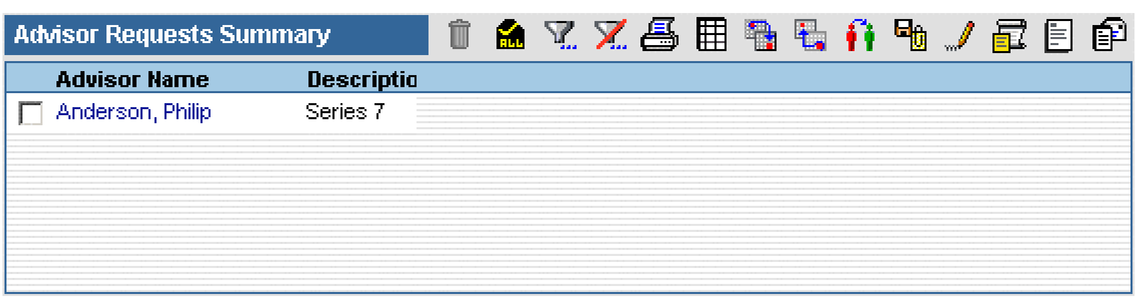
To just append any new underwriting requirements, click the **No** button to reject the deletion. To remove the current requirements (except for the Await Approval and Replacement requirements created by PCM Workflows) for a pending case and replace them with all applicable requirements (defined in the product module) click the **Yes** button.

A **Recreate Underwriting Requirements** window opens to confirm a successful update.



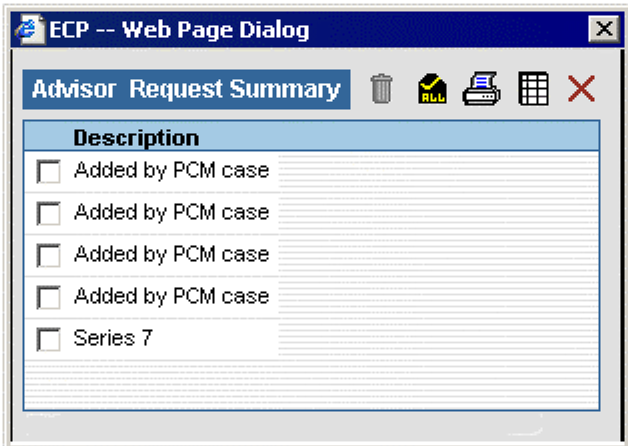
Advisor Requests Summary

The **Advisor Requests Summary** lists the requirements to be completed by the Advisor for that particular case other than licenses, contracts, and appointments (e.g., obtaining a Series 6). These are automatically populated when the pending case is added. The requirements are entered in the Product module and the requirements that the Advisor has already fulfilled are entered in the Advisor module.



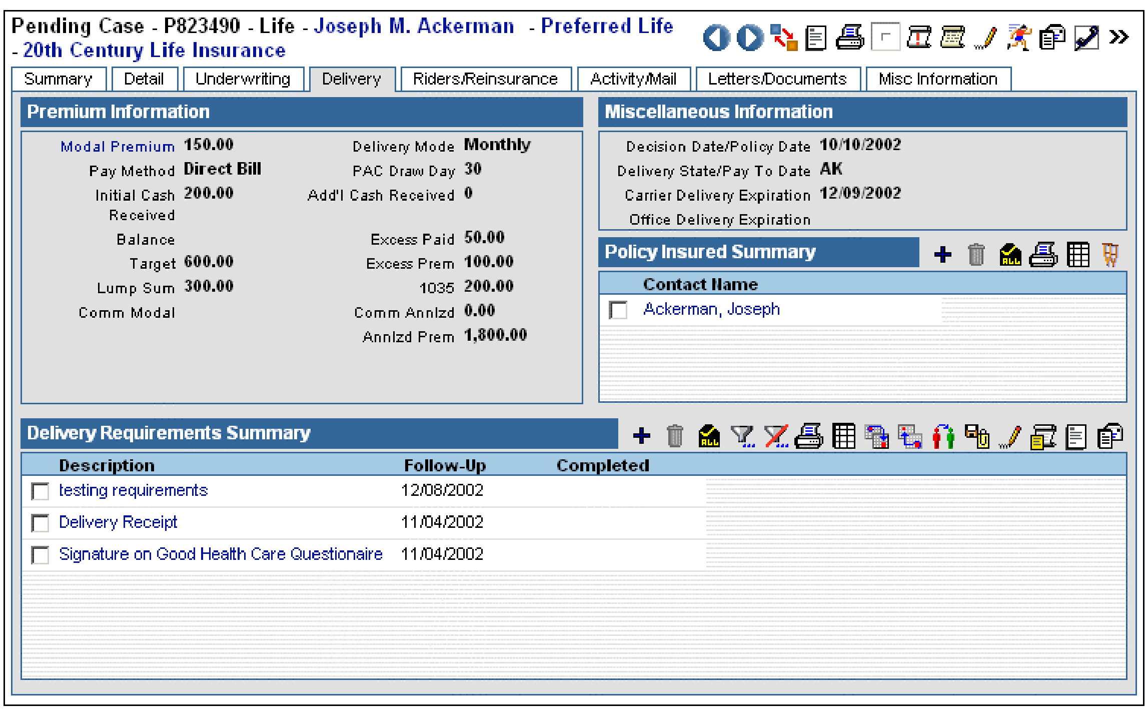
Advisor Request Button

To view the Advisor Request summary, select the **More Features** button and choose **Advisor Request** in the expanded menu. The **Advisor Request Summary** lists all of the requirements to be completed by the Advisor for that particular case including licenses, contracts, and appointments. These are automatically populated when the pending case is added.



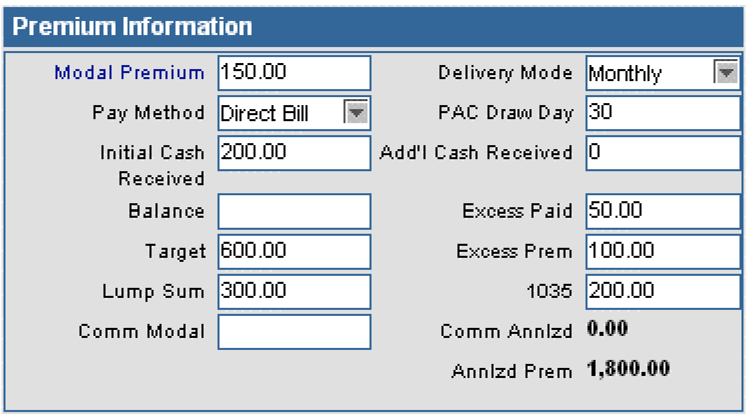
Delivery Tab

The **Delivery** tab has four sections: **Premium Information**, **Miscellaneous Information**, **Policy Insured Summary**, and **Delivery Requirements**.



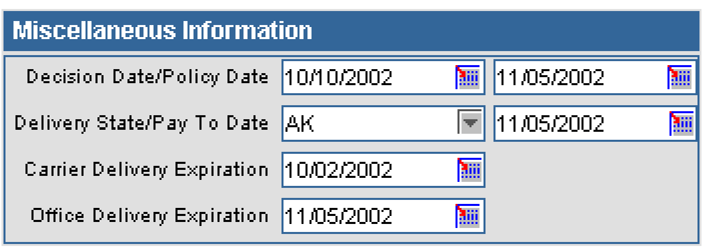
Premium Information Section

Under the **Premium Information** section, **Payment** represents the client's method of payment. The default options are **Bank Draft**, **Credit Card**, **Direct Bill**, **EFT (Electric Fund Transfer)**, **Gov Allotment (Government Allotment)**, **List Bill**, and **PAC**. **Additional Cash Received** is the money paid after the **Initial Cash Received**. For example, if the client paid $150 on application and then paid a further $100 after the case was issued, the Initial Cash Received is $150 and the Additional Cash Received is $100. PCM automatically calculates Balance and Excess Paid using the values in the Premium, Initial Cash Received, and Additional Cash Received fields. **Balance** is equal to how much the client still needs to pay to meet the first premium payment. **Excess Paid** is equal to how much the client has paid minus the first premium payment.



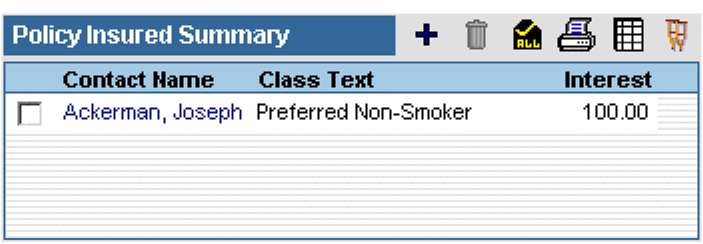
Miscellaneous Information Section

Important dates and the delivery state are located under the **Miscellaneous Information** section.



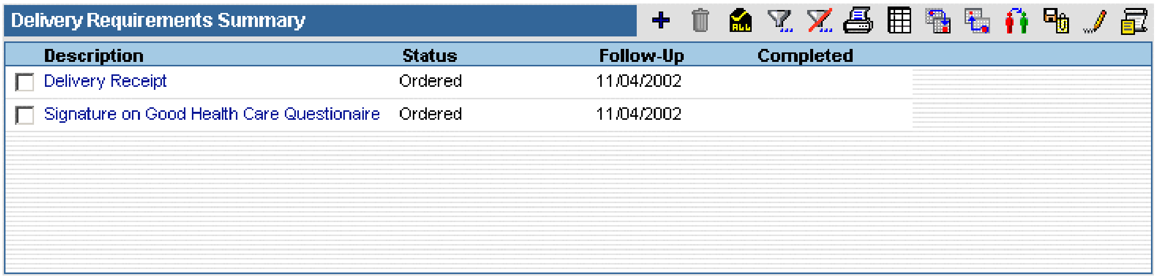
Policy Insured Summary

The Policy Insured Summary contains delivery information on insured contacts for the case.

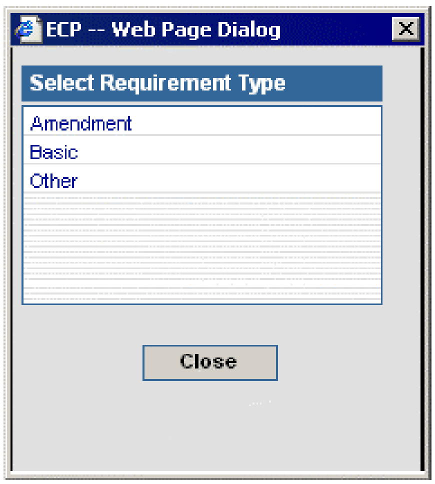


Delivery Requirements Summary

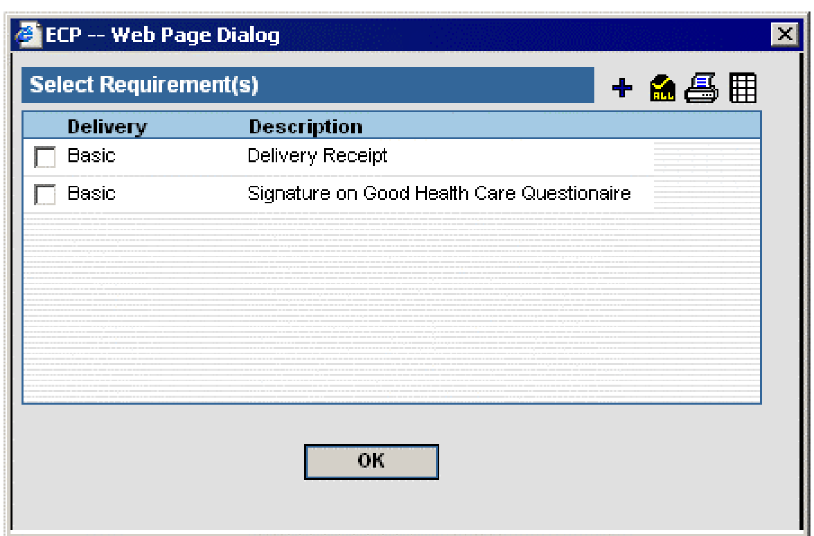
Any requirements to be fulfilled before a case goes inforce are tracked in the **Delivery Requirements Summary**. Delivery requirements are automatically populated by PCM based on age and face bandings.



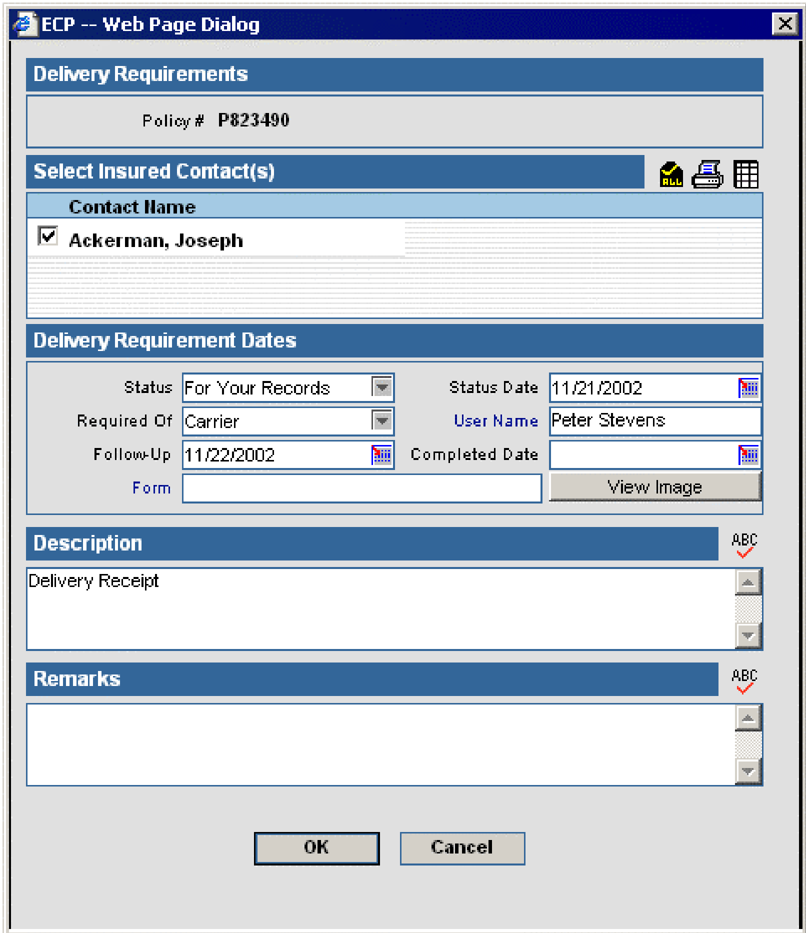
To designate an additional underwriting requirement, click the **Add** button to open the **Select Requirement Type** dialog box.



Select a requirement type to open the **Select Requirement(s)** spreadsheet. This spreadsheet will list only the requirements related to the selected requirement type. The listed requirements are created in the **PCM Setup/Configuration.**

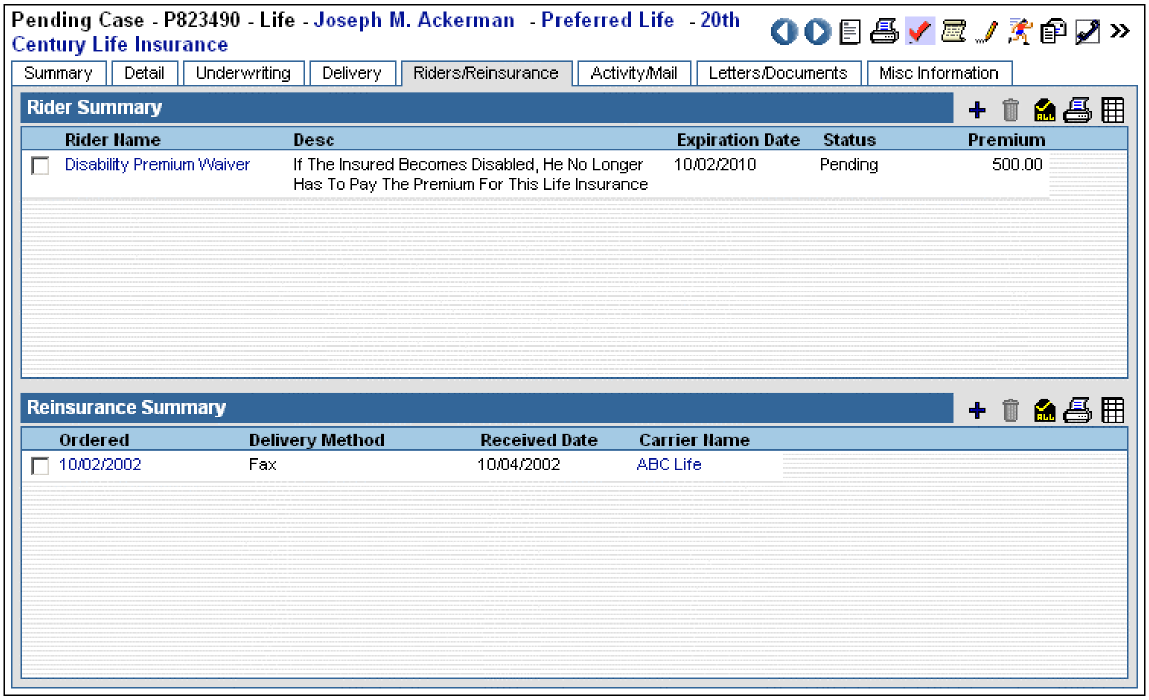


Select a requirement and click the **OK** button to open the **Delivery Requirement Detail** dialog box.



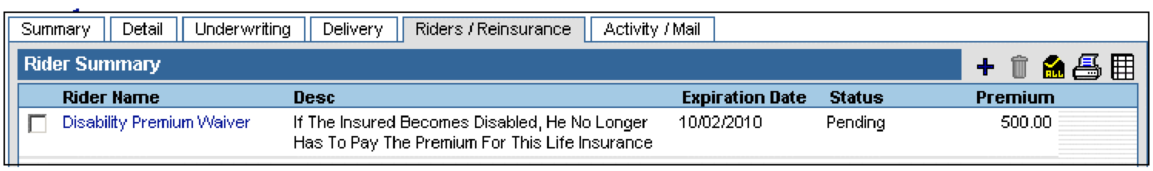
Riders / Reinsurance Tab

The **Rider/Reinsurance** tab has two summaries, the **Rider Summary** and the **Reinsurance Summary**.

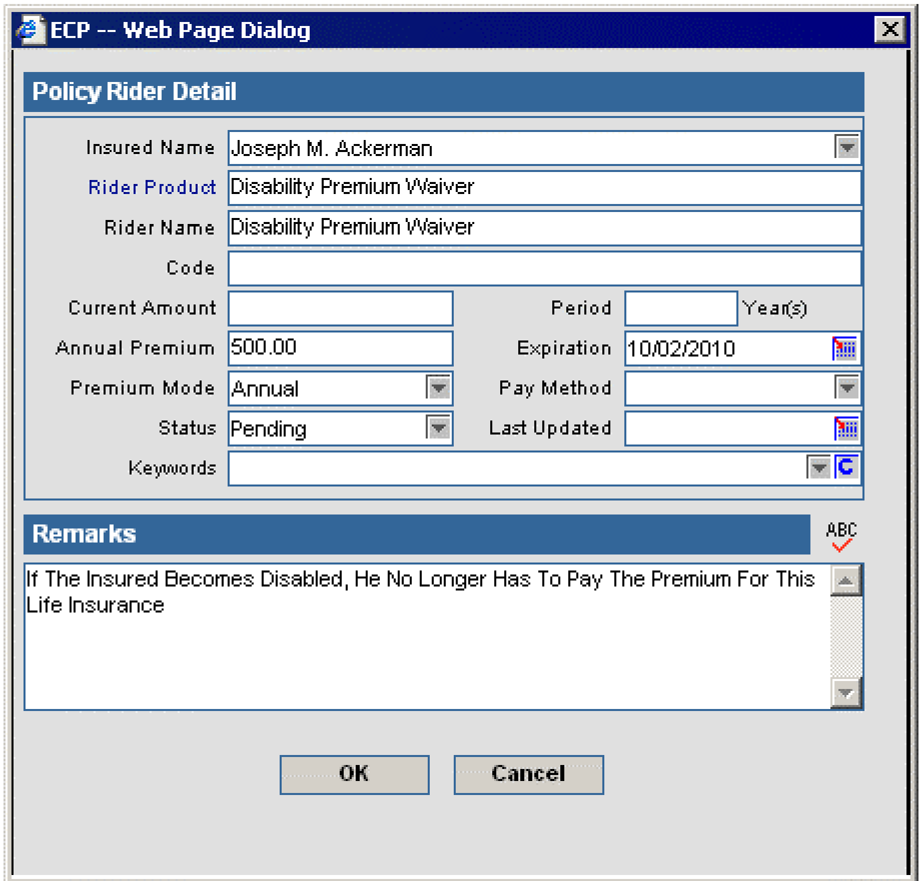


Rider Summary

The **Rider Summary** contains case-related rider information.



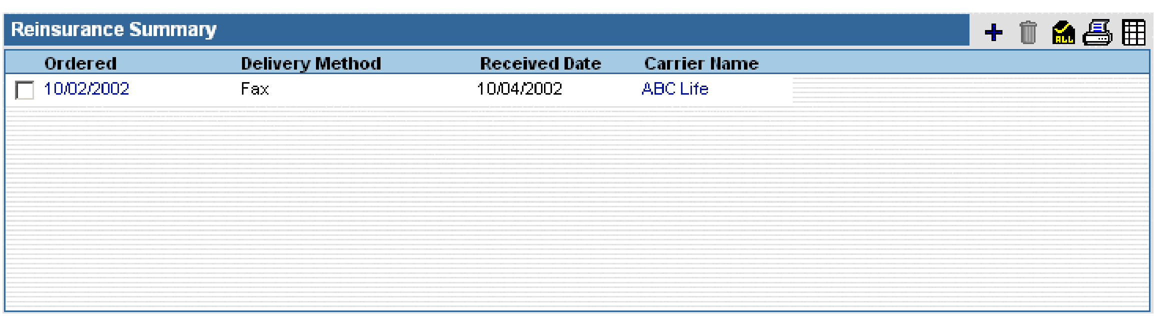
To add a rider to a case, click the **Add** button to open the **Policy Rider Detail** dialog box. All contacts with an Insured role in the **Interested Parties** section will display in the drop-down menu under **Insured Name**.



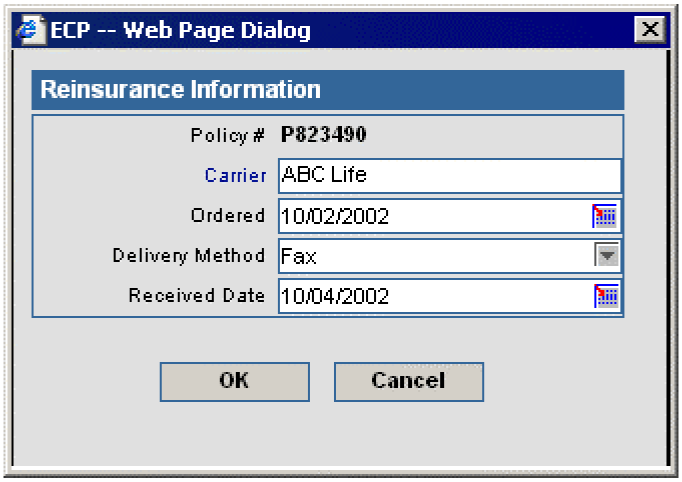
To view the list of Rider Products, click on the Rider Product hyperlink.

Reinsurance Summary

Reinsurance is a form of insurance that insurance companies buy for their own protection, "a sharing of insurance." The reinsured reduces its possible maximum loss on either an individual risk or a large number of risks by giving a portion of its liability to another insurance company.

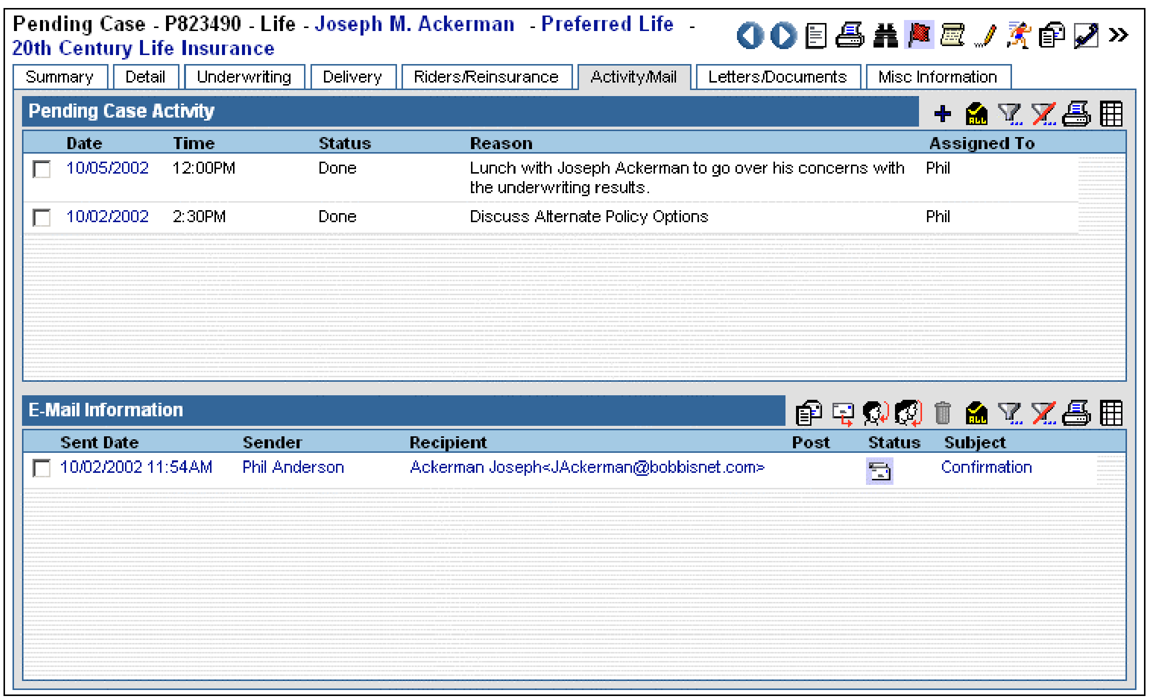


To add reinsurance information, click the **Add** button.



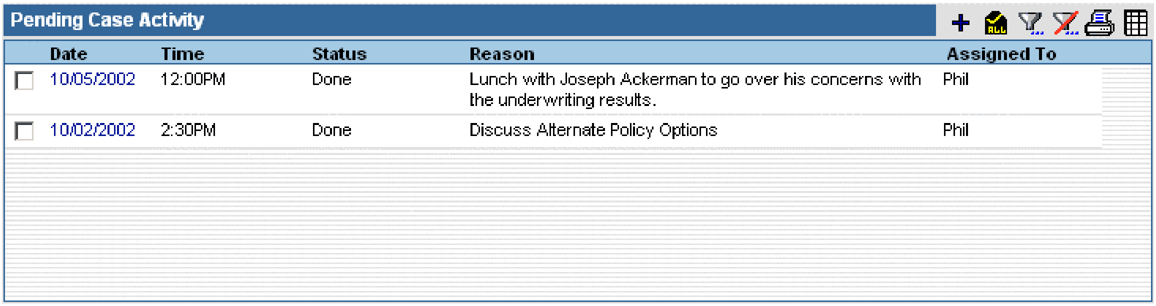
Activity/Mail Tab

The **Activity/Mail** tab tracks case-related activities and e-mail sent.

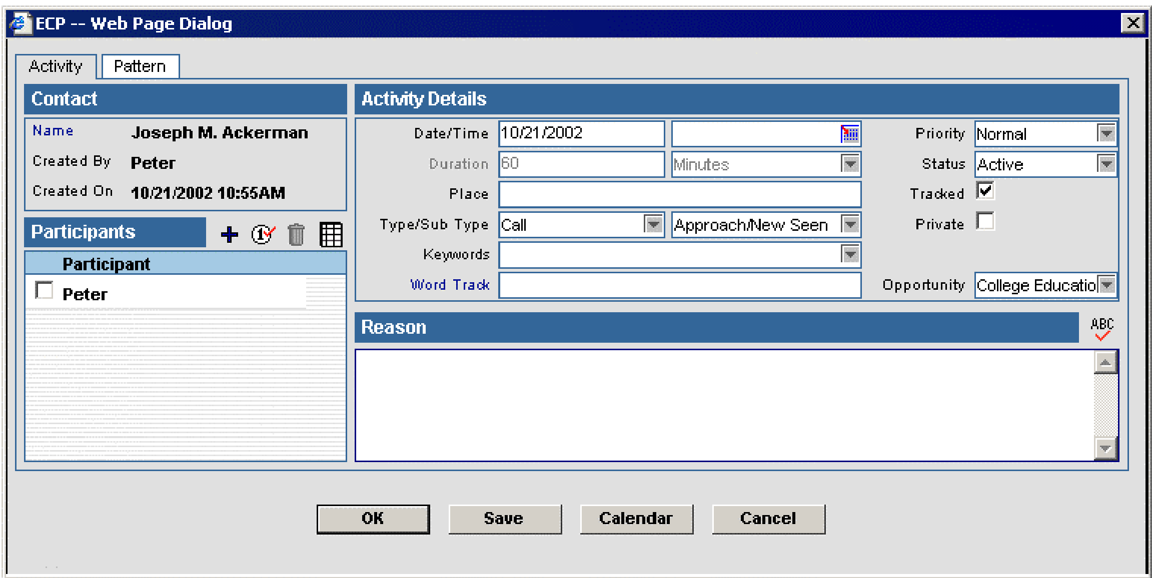


Activity Summary

The **Pending Case** Activity summary tracks the case-related activities.

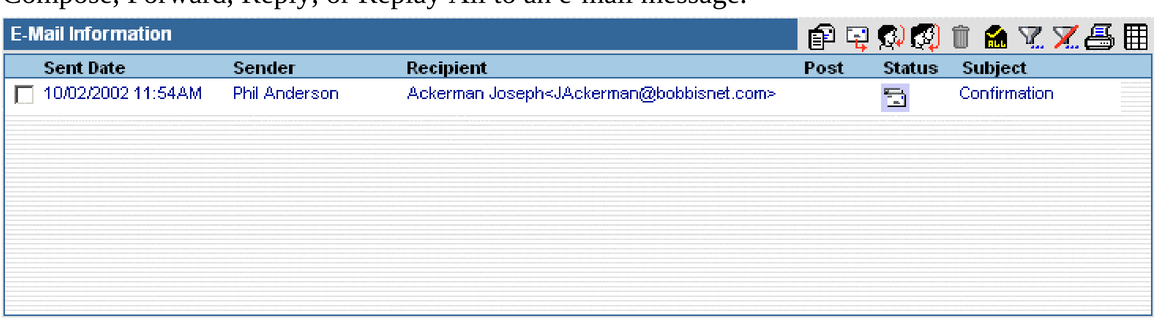


To add an activity for a case, click the **Add** button to open the **New Activity** dialog box.



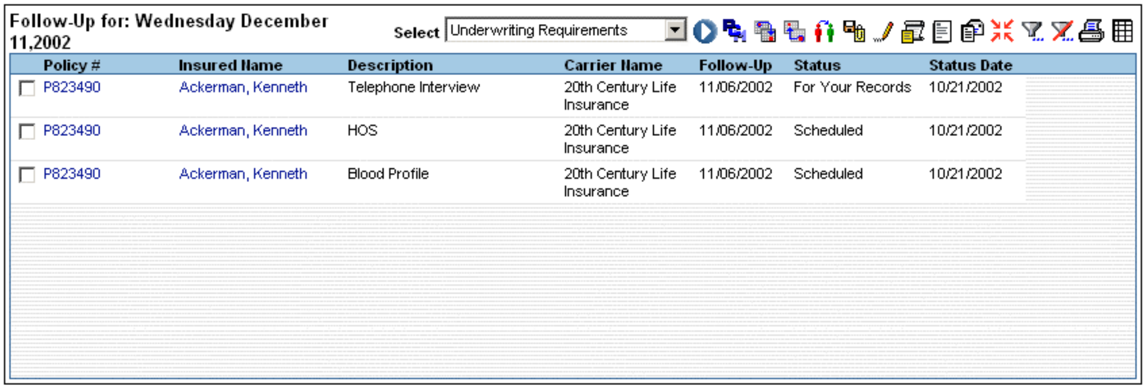
E-mail Information Summary

The E-mail Information summary tracks case-related activities and e-mail messages. The user can Compose, Forward, Reply, or Replay All to an e-mail message.



Follow-Up Sub-Menu

To view the global Follow-Up spreadsheet, select **PCM** from the menu and choose **Follow-Up** in the expanded menu. All PCM Requirements with a Follow-Up date equal to the current date are viewed here. Use the **Select** drop-down list to choose from Underwriting Requirements, Delivery Requirements, Case-Related Advisor Requests (not including license, contract, appointment, and E&O), and Case-Related Activities.



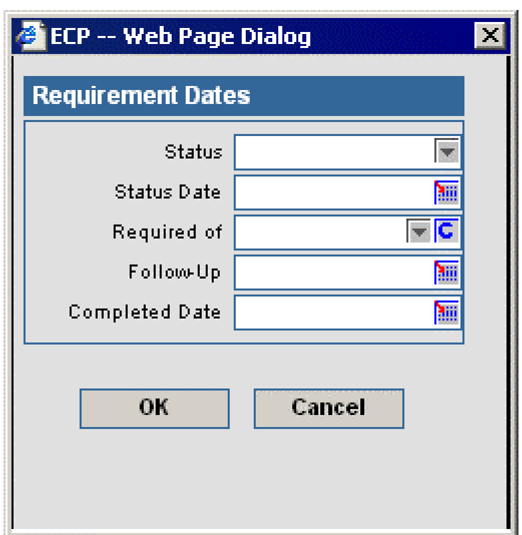
PCM Button

Select a requirement and click the **PCM** button to jump to the pending case for which the requirement belongs.

Change Date Button

Select a requirement and click the **Change Date** button to open the **Requirement Dates** dialog box. The requirement's **Status**, **Status Date**, **Required Of**, **Follow-Up** date, and **Completed Date** can be updated here.

Note: If the **Completed Date** field has a value entered in this dialog box and the **Follow-Up** field does not have a value entered, then the Follow-Up date for the requirement will be deleted.



Reset Follow-Up Date Button

Select a record and click the **Reset Follow-Up Date** button to renew the Follow-Up date based upon the current date. The calculation used is entered in the **Carrier** module.

Change User Button

To assign the Primary Contact for the requirement to another SmartOffice user, select the requirement and click the **Change User** button.

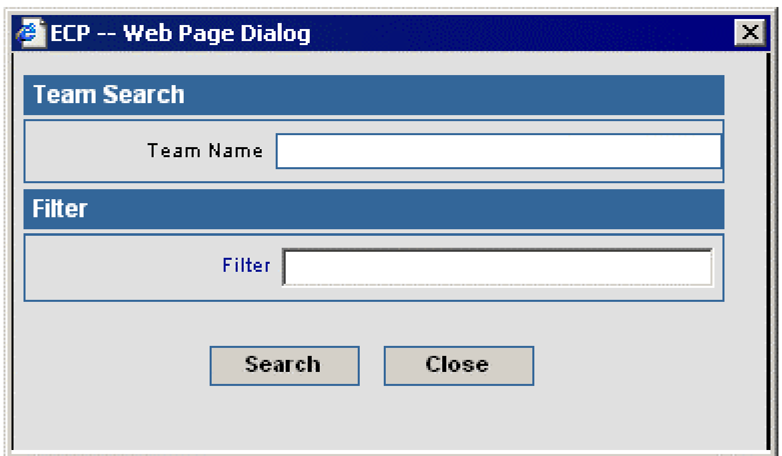
Compose E-mail Button

Select a requirement and click the **Compose E-mail** button to send an e-mail message to a related contact.

Teams

Team Search

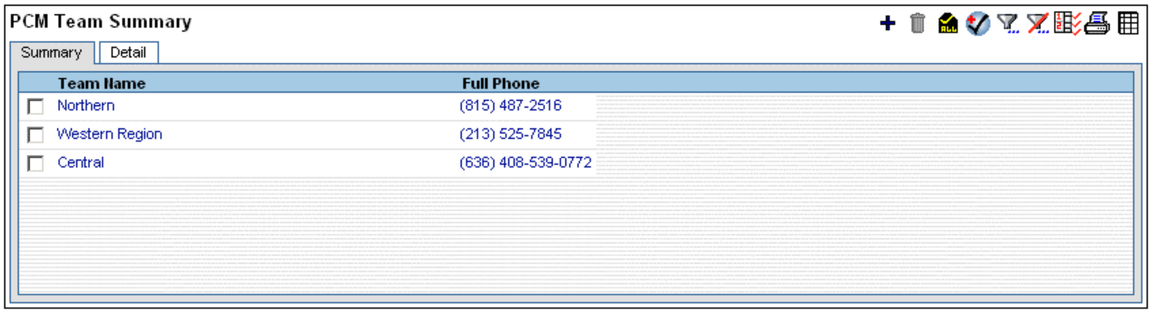
To conduct a team search, select **PCM** from the menu and choose **Team** in the expanded menu to open the **Team Search** window.



- To display a summary spreadsheet for all teams, click the **Search** button without entering any search criteria.
- To display a summary spreadsheet based on specific criteria, enter a filter name.

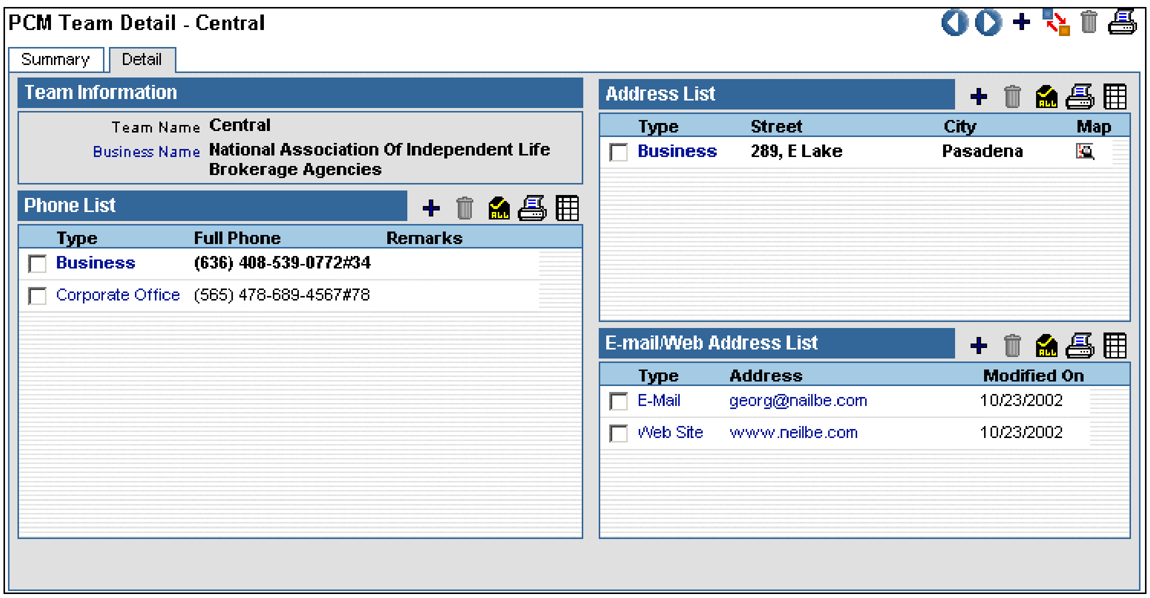
Team Summary

The **Summary** tab displays a list of all the teams.



Team Detail

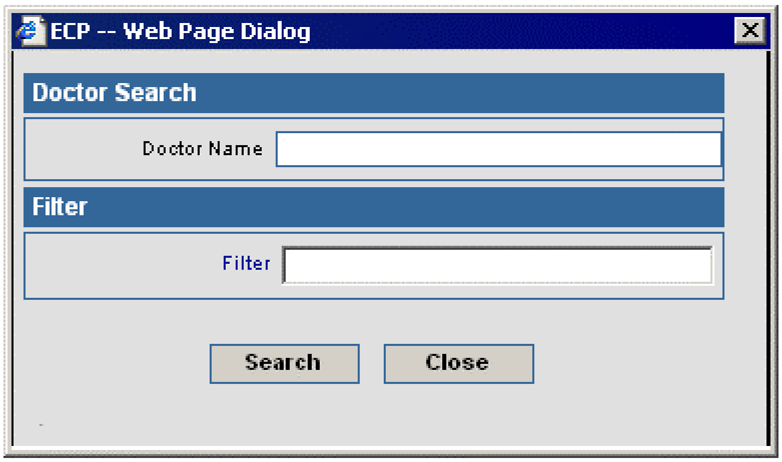
The **Detail** tab contains basic team information such as name, a linked business, and multiple phone numbers, addresses, e-mail addresses, and Web addresses.



Doctors

Doctor Search

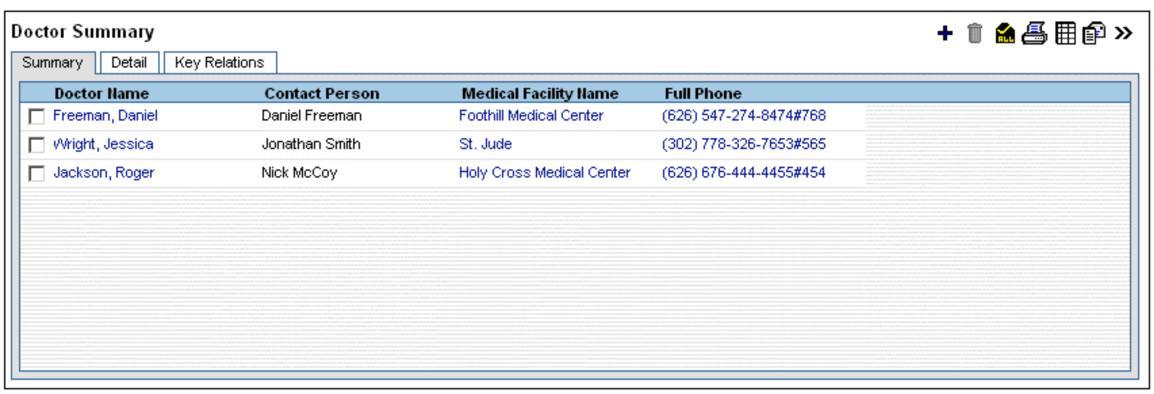
To search doctors, select **PCM** from the menu and choose **Doctor** in the expanded menu to open the **Doctor Search** window.



- To display a summary spreadsheet for all doctors, click the **Search** button without entering any search criteria.
- To display a summary spreadsheet based on specific criteria, enter a filter name.

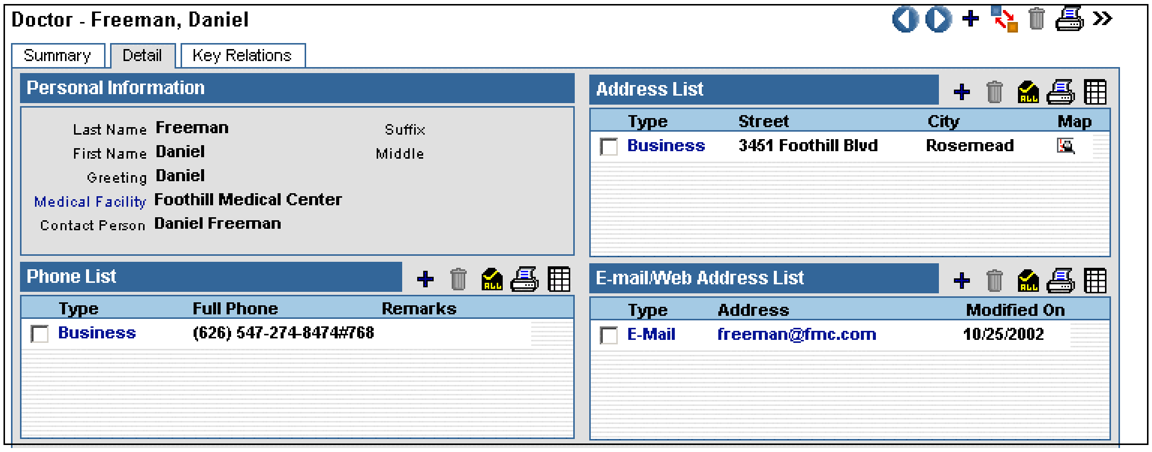
Doctor Summary

The **Summary** tab displays a list of all the doctors.



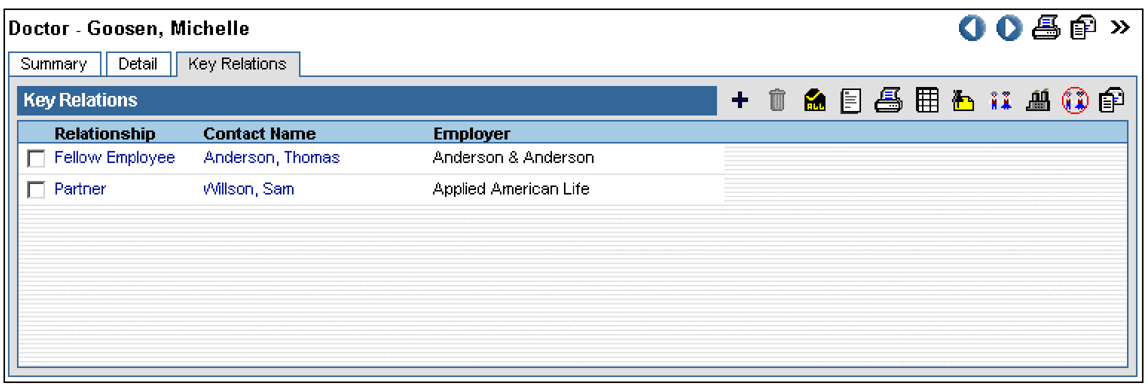
Doctor Detail

The **Detail** tab contains basic team information such as name, a linked business, and multiple phone numbers, addresses, e-mail addresses, and Web addresses.



Doctor Key Relations

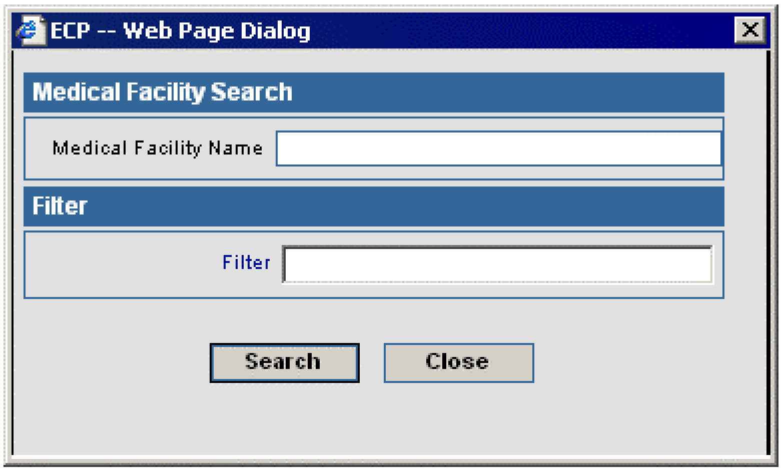
The **Key Relations** tab tracks any record of relations the doctor has with other contacts.



Medical Facilities

Medical Facility Search

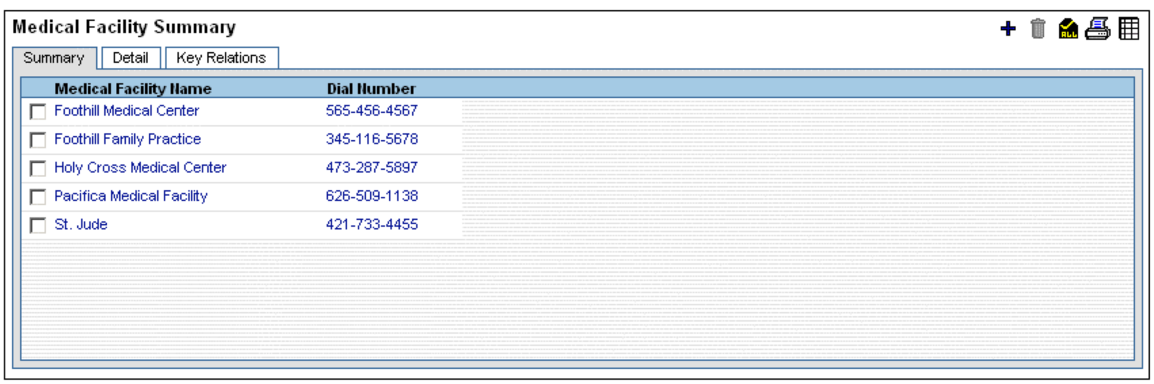
To search medical facilities, select **PCM** from the menu and choose **Medical Facility** in the expanded menu to open the **Medical Facility Search** window.



- To display a summary spreadsheet for all medical facilities, click the **Search** button without entering any search criteria.
- To display a summary spreadsheet based on specific criteria, enter a filter name.

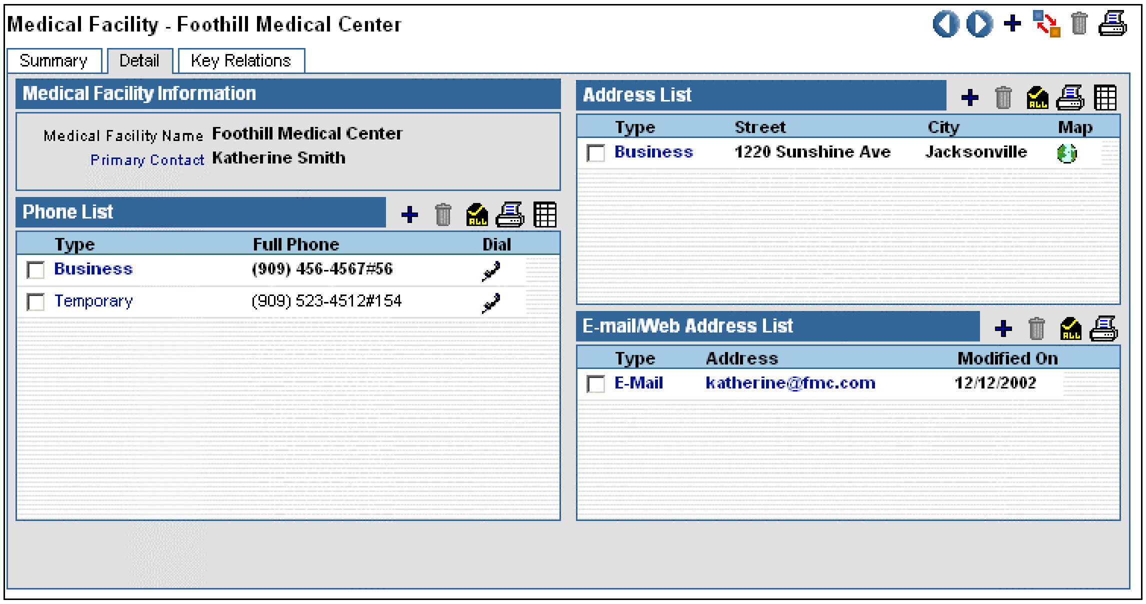
Medical Summary

The **Summary** tab displays a list of all the medical facilities.



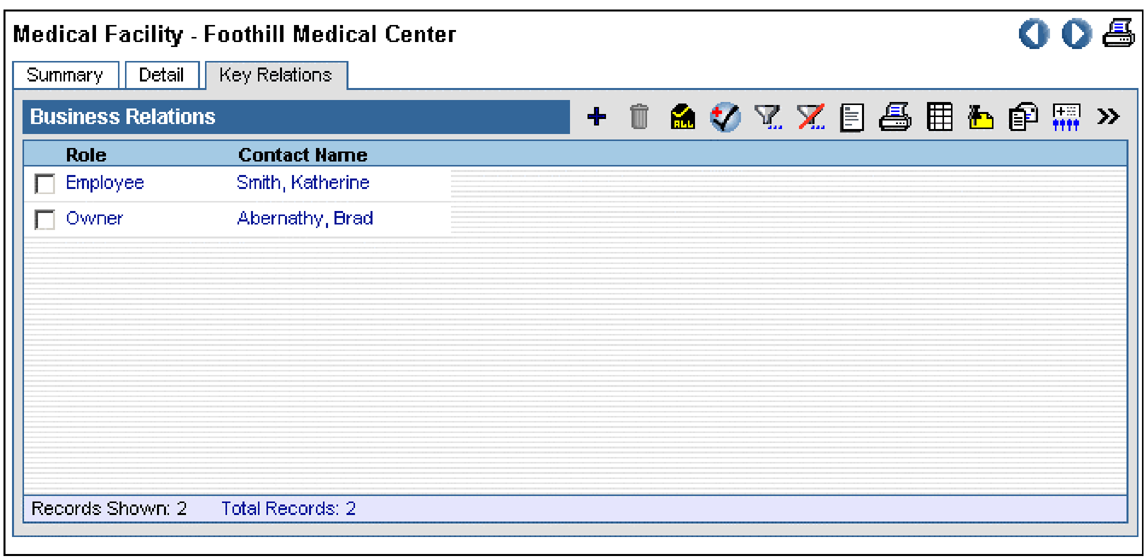
Medical Facility Detail

The **Detail** tab contains basic medical facility information such as name, a primary contact, and multiple phone numbers, addresses, e-mail addresses, and Web addresses.



Medical Facility Key Relations

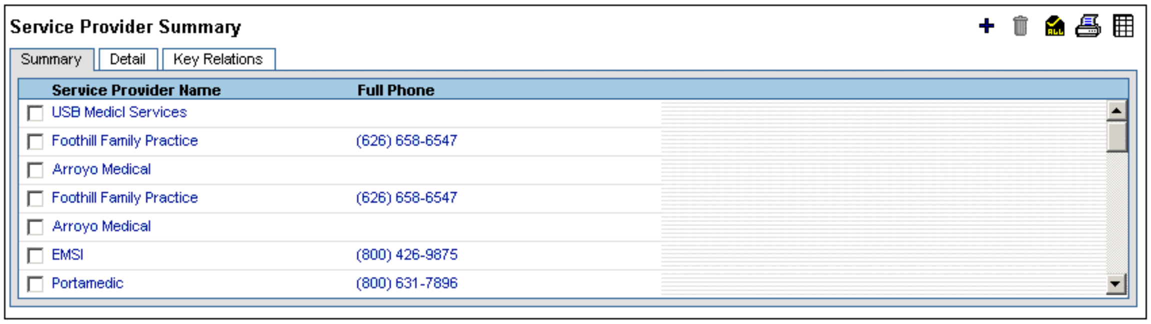
The **Key Relations** tab tracks any record of relations the medical facility has with other contacts.



Service Providers

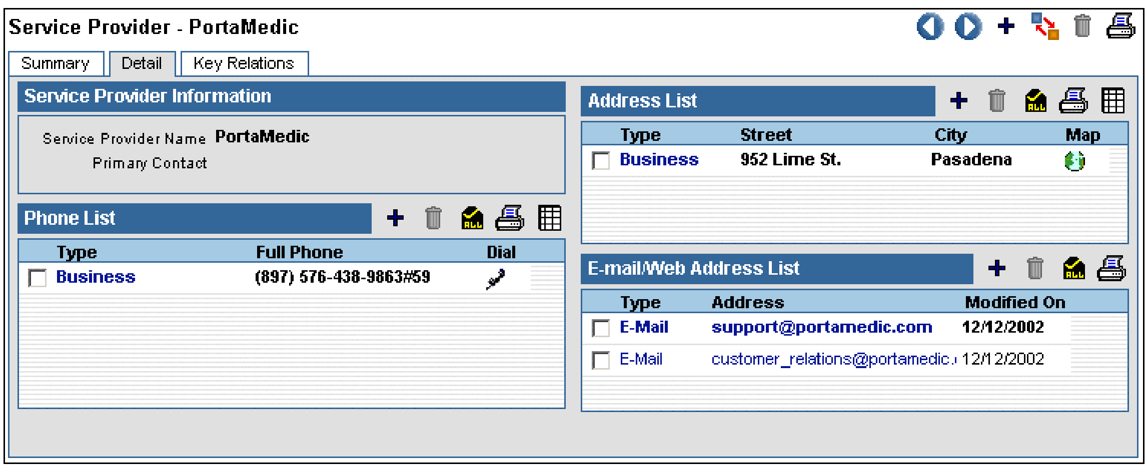
Service Provider Summary

The Service Provider **Summary** tab displays a list of all the service providers.



Service Provider Detail

The **Detail** tab contains basic service provider information such as name, a primary contact, and multiple phone numbers, addresses, e-mail addresses, and Web addresses.



Service Provider Key Relations

The **Key Relations** tab tracks any record of relations the medical facility has with other contacts.