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Medicare Advantage (MAPD) (cont)

Quick Entry: producer.essencehealthcare.com

Medicare Advantage (MAPD) (cont)

After Call-In Mail:

1. Application
2. Checklist
3. Scope of Appointment



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Contact Information

Producer Support: (877) 259-8657

Contact Information (cont)

Outside Sales Manager: Jenifer Dickson **Cell** (314) 598-5585



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Contact Information (cont)

Office (314) 770-3402

Contact Information (cont)

Email: jdickson@lumeris.com



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Quick Links

Provider Search: www.essencehealthcare.com/find-a-doctor/

Quick Links (cont)

Dental Provider Search: govservices.dentaquest.com



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Electronic Applications

Login: producer.essencehealthcare.com

Electronic Applications (cont)

[Click on Start New Application](#)



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Humana



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Medicare Advantage (MAPD)

Fax: (877) 889-9936

Medicare Advantage (MAPD) (cont)

Mail **Humana Medicare Enrollment**



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Medicare Advantage (MAPD) (cont)

P.O. Box 14309

Medicare Advantage (MAPD) (cont)

Lexington, KY 40512-4309



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Medicare Advantage (MAPD) (cont)

- Vantage-Upload Paper Application:**
1. Scan and Save App and SOA on your Desktop.
 2. Login to Vantage and Select "Upload Paper Applications."
 3. Enter Client Name and Application Id (Found at the bottom of app).
 4. Upload the paper application digital file and submit.
 5. An email will be sent to you Humana secure mailbox for confirmation.

Prescription Drug Plan (PDP)

Fax: (877) 889-9936



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Prescription Drug Plan (PDP) (cont)

Mail

Humana Medicare Enrollment

Prescription Drug Plan (PDP) (cont)

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Prescription Drug Plan (PDP) (cont)

Lexington, KY 40512-4309

Prescription Drug Plan (PDP) (cont)

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2. Login to Vantage and Select "Upload Paper Applications."
3. Enter Client Name and Application Id (Found at the bottom of app).
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Medicare Supplement (MSUP)

Fax:

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 2. Login to Vantage and Select "Upload Paper Applications."
 3. Enter Client Name and Application Id (Found at the bottom of app).
 4. Upload the paper application digital file and submit.
 5. An email will be sent to you Humana secure mailbox for confirmation

Contact Information

Agent Support: (800) 309-3163



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Contact Information (cont)

Customer Support:

(855) 691-9987

Contact Information (cont)

John Kelly Sr. Market Manager:

Cell: (217) 720-3000



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Contact Information (cont)

Office: (314) 296-7529

Contact Information (cont)

Email jkelly2@humana.com



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Electronic Applications

Enrollment Hub: www.enrollmenthub.humana.com

Electronic Applications (cont)

Fast App: **Login:** www.humana.com



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Electronic Applications (cont)

[Click on Fast App](#)



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Lasso



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Medicare MSA

Fax Emrick:

(217) 833-2046

Medicare MSA (cont)

Mail:

Lasso Healthcare MSA



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Medicare MSA (cont)

Attention: Enrollment

Medicare MSA (cont)

P.O. Box 60690



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Medicare MSA (cont)

Harrisburg, PA 17106-0690

Medicare MSA (cont)

Broker Support:

(877) 293-2792



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Medicare MSA (cont)

Customer Service:

(866) 766-2583

Medicare MSA (cont)

Electronic Application:

www.lassohealthcare.com/



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Lumico

Medicare Supplement (MSUP)

Fax Emrick:

(217) 833-2046



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Medicare Supplement (MSUP) (cont)

Mail:

Lumico Life Insurance

Medicare Supplement (MSUP) (cont)

P.O. Box 10874



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Medicare Supplement (MSUP) (cont)

Clearwater, FL 33757-8874

Medicare Supplement (MSUP) (cont)

Broker Services:

(855) 774-4491



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Electronic [www.service.iasadmin.com/gateway/login.aspx?](http://www.service.iasadmin.com/gateway/login.aspx?pp=pFDD&pn=YZ&y1tv0=n)
Applicati- [pp=pFDD&pn=YZ&y1tv0=n](http://www.service.iasadmin.com/gateway/login.aspx?pp=pFDD&pn=YZ&y1tv0=n)
on:

Mutual of Omaha



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Fax Emrick:

(217) 833-2046

Medicare Supplement (MSUP) (cont)

Mail:

United of Omaha Life Ins. Co.



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Medicare Supplement (MSUP) (cont)

PO Box 3608

Medicare Supplement (MSUP) (cont)

Omaha, NE 68103-3608



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Medicare Supplement (MSUP) (cont)

Disenrollment Fax letter to:

(402) 997-1906

Medicare Supplement (MSUP) (cont)

Broker Support:

(800) 995-9324



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Medicare Supplement (MSUP) (cont)

Electronic Application: <http://accounts.mutualofomaha.com>

Prescription Drug Plan (PDP)

Fax Emrick: (217) 833-2046 (217) 833-2046



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Prescription Drug Plan (PDP) (cont)

Mail:

Mutual of Omaha Rx

Prescription Drug Plan (PDP) (cont)

Broker Support:

P.O. Box 3625



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Prescription Drug Plan (PDP) (cont)

Scranton, PA 18505

Prescription Drug Plan (PDP) (cont)

(877) 775-1360



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Prescription Drug Plan (PDP) (cont)

SilverScript

ON THE APPLICATION PAGE 13 Under Broker Information you must Fill in the Carrier # Mutual Plus Carrier # 8485 Mutual Value Carrier # 8481



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Prescription Drug Plan (PDP)

REQUIRED: ALL PAPER www.silverscriptagentportal.com
Applications must be
ENTERED online at:

Prescription Drug Plan (PDP) (cont)

Original Application must be either Faxed to: (866) 552-6205



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Prescription Drug Plan (PDP) (cont)

OR Emailed Encrypted

enrollmentverification@caremark.com

Prescription Drug Plan (PDP) (cont)

Mail: AFTER entering online:

ATTN: Agent Processing



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Prescription Drug Plan (PDP) (cont)

PO Box 30002

Prescription Drug Plan (PDP) (cont)

Pittsburgh, PA 15222-0330



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Prescription Drug Plan (PDP) (cont)

Broker Support:

(888) 277-4174

Prescription Drug Plan (PDP) (cont)

Customer Service:

(866) 235-5660



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Supplies: www.silverscriptagentportal.com

Prescription Drug Plan (PDP) (cont)

Electronic Applications: www.silverscriptagentportal.com



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Renaissance

Medicare Supplement (MSUP)

Fax Emrick:

(217) 833-2046



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Medicare Supplement (MSUP) (cont)

Mail: **Renaissance Life & Health Ins.**
Health Administrative Office

Medicare Supplement (MSUP) (cont)

PO BOX 27248



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Medicare Supplement (MSUP) (cont)

Salt Lake City, UT 84127-0248

Medicare Supplement (MSUP) (cont)

Broker Support:

(309) 323-8400



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Medicare Supplement (MSUP) (cont)

Underwriting: (800) 322-0160 ext 2823 or 2642

Medicare Supplement (MSUP) (cont)

Customer Service: (844) 202-4150 option 1



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Medicare Supplement (MSUP) (cont)

Supplies:

<https://ren.admin-portal.org>.

Medicare Supplement (MSUP) (cont)

Electronic Applications:

<https://ren.admin-portal.org>.



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TransAmerica

Medicare Supplement (MSUP)

Fax: (866) 834-0437 (use Fax Cover Sheet provided)



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Medicare Supplement (MSUP) (cont)

Mail:

4333 Edgewood Road NE

Medicare Supplement (MSUP) (cont)

Cedar Rapids, IA 52499



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Electronic Application: <https://www.taagentnetinfo.com/>

WellCare



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Prescription Drug Plan (PDP)

Fax: (866) 388-1521

Prescription Drug Plan (PDP) (cont)

Paper Application Submitted via Fax:

1. Fax App. with barcode linked with Agent ID
2. Barcode must be submitted as the FINAL page
3. Barcode will be scanned/connected to Agent



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Prescription Drug Plan (PDP) (cont)

AVL

(877) 297-3628

Prescription Drug Plan (PDP) (cont)

Broker Support:

(866) 822-1339



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Prescription Drug Plan (PDP) (cont)

Broker Support RFI: (877) 677-5609

Prescription Drug Plan (PDP) (cont)

Customer Service: (888) 550-5252 (Wellness Rx, Classic Rx Saver)



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Prescription Drug Plan (PDP) (cont)

Customer Service: (833) 207-4241 (Rx Select, Value Plus and Value Script)

Prescription Drug Plan (PDP) (cont)

Supplies:



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Prescription Drug Plan (PDP) (cont)

Electronic Application:

www.wellcarerep.com/agentID



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