

Script 5: Quoting & Data Collector

What Quoting does:

The primary function of the **Quoting** module is to facilitate the selling of Small and Mid-Market Group Business in groups with 2 to 150 employees. Quoting is available 24/7 via the Internet and is designed to guide users through the steps required to prepare a quote for all available products through to final rate proposals. To increase the potential cross selling opportunities, all cases are quoted with Life and Dental products included.

The Quoting module also maintains a history of quotes so that a user can search and review the contents of any quote; the census is retained for each account as well. When a user generates additional quotes for an account, the Quoting module gives the user the option of using all or part of the previously-entered census, or of entering a new census.

Internal users may print, fax, or e-mail the finished quote to the broker, while **External users**, or brokers, can only print the quote.

The process results in a standardized, polished bid printed and ready for delivery to the prospective account.

How Quoting works:

Quoting enables each specified user to complete the tasks within their area of assigned responsibility. Internally, that may involve Marketing, Underwriting, or Case Adjusters. External users may include brokers and General Agents generating quotes and enrolling clients.

Using **Texas Blue Cross Blue Shield** as an example, the Quoting module can generate three quote types:

- **Small Group (2-50)**
- **Mid-Market (51-150)**, and
- **Prelims**, or medically underwritten quotes. If the broker has chosen the medically underwritten quote, Underwriting would enter the process at this stage.

In **Small Group 2-50**, there are two types of quotes available: **Small Group Regulated** or **Protected**, and **Small Group Unregulated** or **Unprotected**. For **Small Group Regulated**, each state has laws governing Small Group employers, requiring that insurance must be sold to these groups. Insuring companies may elect to decline selling coverage to **Small Group Unregulated** parties.

For **Middle Markets**, the **Quoting module** collects the case information and comes out with a customized quote, ready for delivery to the proposed account. The **Request for Proposal** for Mid-Markets is approximately nine pages long and includes questions such

as “Will your company have any large claims coming up this year?” The rates will, of course, vary depending on how the questions are answered by the employer.

To increase the likelihood of closed deals, Business Acquisition users can generate accurate, medically underwritten quotes that feature consistent ratings. These **Medical Preliminary Requests, or Prelims**, can be utilized by both brokers and internal HCSC personnel.. They are employed when a user is aware of existing medical conditions and wants to request a prelim proposal from Underwriting with a medical load. Prelims can be generated before or after the small group quote.

The **Medical Prelim Reconsideration** is utilized once a preliminary request has been made and if a change is needed, for example, to the census or effective date. The user can locate the prelim request through the Medical Preliminary Request search function and initiate a **Reconsideration**.

The same census information used in **Quoting** is brought over to the **Enrollment** application. Collection of this information is done through a program called Document Control/Management. Data typically collected in the Quoting census are **Age, Gender** and **Zip Code** – three factors that are key in determining rates.

In the **Enrollment** module, census data entered becomes even more specific in the **Employer & Employee Level Applications**, where a large volume of information is collected.

After the Broker tasks are completed, hitting the “Release” button triggers the Underwriting Phase, which releases the case to internal HCSC <Blue Cross Plan> users. From Quoting, the process flows to Receive New Group, where Enrollment Workflow is initiated.

Data Collector

What Data Collector does:

The Data Collector component allows internal and external users to take information from a quote, supplement the information and then reconcile it with employer and employee applications.

How Data Collector works:

All information entered into Quoting (account, address, billing address, etc.) is brought over to Data Collector, which can save time and reduce the amount of potential rework users may have to do.

In Data Collector, users can:

- Change any elections they made in Quoting
- Choose the plan for enrolling the prospect in, and
- Supplement medical data – an action available to both internal and external users

They can also:

- Enter Dependent data, and
- Reconcile the data with employer and employee applications

Plan choices and elections that may be selected include:

- HMO
- PPO
- Life and Dental – the option to decline these offerings resides in Data Collector
- Beneficiary information, and
- Dual Coverage for Husband or Wife

Once the broker releases the quote, it is sent to the Small Business Service Center where the quote is reviewed to ensure that it's the right one. The quote ultimately flows to Medical Underwriting, which sends the rated quote back to the broker to present to the prospect. Subsequently, the enrollment data becomes accessible to Rating and is later transferred to our membership systems, BlueStar and FDL (Fort Dearborn Life).