



**Knowledge Is Power (KIP)
HBP Member Support Knowledge Base
September 17, 2021**

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1.0. KIP UPDATES

1.1. 9/17/2021 UPDATES

Category	Article	Update
Basics	Call Flow	<ul style="list-style-type: none">Added bullet to Step 9 to assist in explaining Health Savings discounts.

1.2. 7/16/2021 UPDATES

Category	Article	Update
Phone Order Processing	Basic Order	<ul style="list-style-type: none"> Added bullet regarding tax on shipping charges for orders under \$35 to step 8 of checkout.

2.0. HEALTHY BENEFITS PLUS MEMBER SUPPORT

2.1. HEALTHY BENEFITS PLUS PROGRAMS

OVERVIEW

Details on Solutran's multi-benefit program, Healthy Benefits Plus (HBP).

KEY INFORMATION

- Healthy Benefits Plus, Solutran's customized multi-benefit program, provides a single seamless experience to members for programs such as:
 - Over-the-Counter (OTC) Benefits
 - Nutrition Benefits
 - Healthy Savings
 - Rewards
 - Eligibility for the programs is depended on the member's health plan.
-



OTC Benefits

- OTC benefits provide members with credits to spend on hundreds of approved OTC products, including brand name and generic, in categories such as allergy, sinus, pain relief, vitamins and more.
 - Unused OTC credits expire on the last day of each quarter or December 31 depending on the member's plan.
 - Members will receive a catalog to view eligible OTC products.
 - Depending on the member's plan, members can use their credits:
 - Online through the portal
 - By mail
 - Calling HBP Member Support
 - Select members will have the option to shop in-store at Walmart and other participating retailers
-



Nutrition Benefits

- Nutrition benefits, or healthy food benefits, provide members with credits to purchase approved healthy foods such as:
 - Fresh Fruit & Vegetables
 - Dairy Products
 - Meat & Seafood
 - and many others
 - Although credits can be used on thousands of items, there are items that will not qualify for the benefit.
 - Credits are issued monthly, and credits not used by the last day of the month will expire.
 - Members will not receive a catalog with a list of approved items to choose from.
 - Credits can be used in-store at Walmart and other participating retailers.
 - Select members will also have access to fully prepared, refrigerated meal through meal delivery services:
 - Mom's Meals
 - Deliver Lean
-



Healthy Savings

- Healthy Savings is a healthy food discount that provides savings on various healthy foods each week.
- Discounts are updated every Sunday.
- Discounts provide members savings on hundreds of qualified brands for such items like lean meats, wholegrain breads, cereal and more.
- Members can access the full list of weekly discounts on their web portal or by calling the IVR to hear the Top 10 offers.
- Discounts can be used in-store at Walmart and other participating retailers.
- Some plans also provide members with a weekly fresh produce discount.



Rewards

- Members who complete different activities throughout the year such as annual wellness visits, cancer screenings or post-partum checkups, will earn an S3 or VISA reward to use for different products and services.
- Select plans will reward its members simply for living a healthy lifestyle.
- Activities and reward amounts are decided on by the health plan.
- Members receive a letter, with a rewards card, stating they have earned a reward.
- S3 rewards can be used anywhere within the S3 network and online at Walmart.com.
- VISA rewards can be used anywhere VISA is accepted and for specific services such as utilities, dental visits, gym members and gasoline.

Disposition: General Program Information>Program Overview

2.2. RESOURCES

HOURS OF OPERATIONS

UHC:

8:00am – 8:00pm Local time

January – December: 7 days a week

All Other Clients:

8:00am – 8:00pm Local time

October – March: 7 days a week

April – September: Monday - Friday

SOLUTRAN CORPORATE OFFICE

Minneapolis, Minnesota, USA

CONTACTS

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- CRM
- IVR

Training and Quality callcentertraining@solutran.com

- Training content and quality assurance questions
- Knowledge is Power (KIP)
- U Learn

Disposition: Other>Other

3.0. BASICS

3.1. CRM

OVERVIEW

Details about what information can be found in the various screens of CRM.

KEY INFORMATION

CRM Pop-Up

Displays as separate screen upon entering a member’s account which provides details about the member’s plan.

- If the pop-up is accidentally closed, click on one of the navigation tabs in CRM to re-open the pop-up.
- Includes all benefits the member is enrolled in.

Client	UnitedHealthcare (UHC)		
Program Name	Health & Wellness Product Card		
Translation Services	Phone Number: 866-998-0338 Account Number: 31002 PIN: 3283		
* Please refer to Available Balance to verify member has these benefits*			
Benefit Type	OTC	Healthy Savings *	Nutrition *
Card Name	OTC & Healthy Food Benefit	OTC & Healthy Food Benefit	OTC & Healthy Food Benefit
Card Activation	Yes	Yes	Yes
Benefit/Reward Frequency	Quarterly Jan, Apr, Jul, Oct	Weekly	Monthly
Benefit/Reward Expiration	Yearly	Varies	Monthly
Eligible Items	OTC	Approved discounts	Healthy Foods See Details for additional information Mom's Meals 1-877-347-3438
Catalog	Yes	No	No
In-Store Shopping	Yes	Yes	Yes
Phone Orders	Yes	No	No
Mail Orders	Yes	No	No
Online Orders	Yes	No	No
Delivery Fee	No	No	NA
Web Portal	Refer to welcome kit or HBP card	Refer to welcome kit or HBP card	Refer to welcome kit or HBP card
Mobile App	Yes	Yes	Yes
What to look for in the Mail	"Your benefit material will come in a large 9"x12" envelope with a clear window in the upper left corner where you'll see the UnitedHealthCare logo and right below that you'll see text "Important Information regarding your over-the-counter benefit with UnitedHealthcare".		
Options while waiting for Card	"If you'd like to utilize your benefit before the card arrives, I can provide you with your card number and security code. You can use that information to gain access to your benefit through the mobile app or website."		

Navigation Tabs

Tabs appearing on the left side of the CRM screen used to navigate...

- Available Balance

- Balance information for all programs.
- Benefit Tiles
 - Products: Shortcut to Products/Catalog tab.
 - Details: Displays eligible products for Health Food Credits.
 - Stores: Shortcut to Store Locator tab.
 - Benefits: Provides additional details about the member's benefit plan.
- Healthy Savings Offers: Includes top 10 Healthy Savings offers currently available.
- **Cardholder Information**
 - Member demographic information.
 - Name
 - Address
 - Email
 - Phone
 - Member ID
 - See [Edit Member Demographics](#).
- **Account Activity**
 - Provides visibility to any account related activities such as updates to the member's status or any changes that may have been made to the member's account (update to preferred phone or email, for example).
- **Program Information**
 - Effective start and end dates of the member's program.
 - Health plan provider phone number.
 - Website.
 - Tier 2 phone number.
- **Card Activity**
 - Card related activity such as:
 - Activations
 - Replacement requests
 - Registration online
- **Communications**
 - Web portal details
 - Ability to reset a password (see [Reset Password](#))
 - Visibility to web portal activity and changes
 - Visibility to PDF catalog replacement requests
- **Contact History**
 - Visibility to previous interactions members had with a CSR or the IVR.
 - Visibility to notes and call details from previous calls.
- **Request Support**
 - See [Request Support Ticket](#)

- **Transaction Activity**
 - History of member's transactions
 - Includes order numbers for online orders

- **Online Orders**
 - Shows a list of phone orders the member has completed
 - Provides member's card number and security code
 - Ability to log an order number and preferred email address used in a phone order

- **Products/Catalog**
 - Ability to request catalog replacements. See [Catalog Replacement](#).
 - View a PDF of the member's catalog
 - Search for eligible items
 - See [Basic Order](#)

- **Store Locator**
 - Locate participating retailers in the member's area
 - See [Store Locator](#)

- **Benefit History**
 - History of benefit deposit and expiration dates
 - History of dollar amount redeemed per benefit period

- **Order Activity Log**
 - History of all mail and online order submitted
 - Access to mail/online order details

3.2. CALL FLOW – UPDATED!

OVERVIEW

Call flow to use as a guide when taking inbound calls.

PROCESS

1. Greet the caller.
 - “Thank you for calling Healthy Benefits Plus Member Support! This is <<your name>>. Who do I have the pleasure of speaking with today?”*
 - “Thank you for calling Healthy Benefits Plus Member Support! This is <<your name>>. May I have your name please?”*
 - Caller must be greeted within 5 seconds of the call connecting.
 - Greeting must include: Healthy Benefits Plus Member Support, your name, and a request for the caller’s name.

2. Search for the member in CRM.
 - See [Member Search](#).

3. Verify the member’s account.
 - See [Verification](#).

4. Request a preferred phone number (when applicable).
 - “May I have your preferred phone number in case we need to contact you?”*
 - See [Preferred Phone Number](#).

5. Understand the caller’s needs.
 - “How may I assist you today Mr./Ms. <<member last name>>?”*
 - “Hi Mr./Ms.<<member last name>>. How can I help you?”*
 - “May I ask you a few clarifying questions?”*
 - “I understand you would like to....”*
 - “Are you in need of a new card?”*

6. Demonstrate willingness to assist.
 - “I would be happy to help you with that.”*
 - “I would be happy to check on that for you.”*
 - “I can place an order for you today.”*
 - “Here is what I can do for you.”*
 - “I’m happy to explain in further detail.”*

7. Resolve the member’s reason for calling.
 - Follow the appropriate process to resolve the member’s reason for calling.
 - Acknowledge and empathize where appropriate.
 - “I understand how frustrating that can be.”*
 - “Thank you, it is great you alerted us about this.”*
 - “I would like to wish you happy birthday!”*

8. Ask the member if there is anything else you can assist them with.
 - “Is there anything else I may help you with today?”*
 - “Have we covered everything you wanted to discuss today?”*

9. Provide a recap of the member’s benefits including the current available balance, when they expire, and the next benefit deposit date/amount.
 - “Before I end the call, I would like to remind you of your current benefits...”*
 - **For OTC and Nutrition:** *“You have <<current balance>> available on your <<benefit type>> that will expire at the end of the <<month, quarter, or year>>. You get <<amount>> each <<month, quarter>>. Your next deposit will be on <<deposit date>>.”*
 - **If \$0.00 balance:** *“Your remaining balance is \$0.00. You get <<amount>> each <<month or quarter>> which expires at the end of the <<month, quarter, or year>>. next deposit will be on <<deposit date>>.”*
 - **For Healthy Savings:** *“You can also save on select items with your Healthy Savings discounts.”*
 - **If member asks what Healthy Savings discounts are:**
 - “Healthy Savings discounts work like virtual coupons for name brand healthy food products. The discounts are very easy to use and do not need to be pre-selected or clipped. Simply scan the barcode on the back of your Healthy Benefits Plus card at checkout and the discount will automatically be deducted from your total. The full list of discounts can be found on our web portal or mobile app. You can also get the top ten discounts by calling our automated phone system or one of our Healthy Benefits Plus Member Support representatives. Discounts are updated weekly. Would you like to hear the current top ten discounts you have available?”*
 - **For Rewards:** *“You have <<current balance>> in rewards available which expires on <<expiration date>>.”*

10. Demonstrate appreciation to the caller.
 - “Thank you for calling.”*
 - “Thanks for calling and have a great day!”*
 - “Thank you for calling Healthy Benefits Plus Member Support!”*
 - “Thank you for calling. Please hold for a one-question survey.”*

11. Complete call wrap up.
 - See [Call Wrap Up](#).

3.3. MEMBER SEARCH

OVERVIEW

Process to search for a member's account in CRM.

PROCESS

1. Type the members **First Name** and **Last Name** in the corresponding fields of the **Cardholder Search** screen.
"May I have your first and last name please?"
2. Type the members ZIP Code in the corresponding field.
"May I have your zip code please?"
3. Click **Search**. Search results will appear in the **Results** box at the bottom of the screen.
 - Use the arrows at the bottom of the screen to view additional pages.
 - Ask the member for their address to identify the correct account if there are multiple results for the same name.
 - If you are unable to locate the member, click the clear button and search with one of the following:
 - **Card Number:** 17-digit number from the member's S3 card
 - **Email:** Member's email address
 - **Online Order Number:** Order number from a previously placed order
 - **Case / Household / Member Number:** Member ID from the member's health plan card
 - Transfer the member to a Tier 2 Specialist if you are unable to locate them in CRM. See [Transfers](#).
4. Click on the member's name. The system will advance to the **Call Security Verification** screen.

3.4. VERIFICATION

OVERVIEW

Process to verify a member's account information.

KEY INFORMATION

- Each account must be verified prior to providing any information to the caller.
- Quick reference verification chart:

Client	Member, Health Plan Representative, or Authorized Representative on File	Authorized Representative Not on File
UnitedHealthcare (UHC) Blue Cross Blue Shield of Kansas City (BCBS-KC)	<ul style="list-style-type: none"> • Member's First and Last Name • Member's Date of Birth • Zip Code 	<ul style="list-style-type: none"> • Member's First and Last Name • Member's Date of Birth • Zip Code
Priority Health	<ul style="list-style-type: none"> • Member's First and Last Name • Member's Date of Birth • Zip Code 	Verify 3 out of the 5 <ul style="list-style-type: none"> • Member's First and Last Name • Address and Zip Code • Date of Birth • Card Number • Member ID Number
Kaiser	<ul style="list-style-type: none"> • Member's First and Last Name • Zip Code <p>NOTE: There will not be a field to enter the member's Date of Birth</p>	<ol style="list-style-type: none"> 1. Ask if cardholder is available to give verbal consent. 2. If cardholder not available, transfer to health plan to confirm caller is an authorized representative.
All Other Clients	<ul style="list-style-type: none"> • Member's First and Last Name • Member's Date of Birth • Zip Code 	<ol style="list-style-type: none"> 1. Ask if cardholder is available to give verbal consent. 2. If cardholder not available, transfer to health plan to confirm caller is authorized representative.

PROCESS

1. Determine if you are speaking with the member or an authorized representative.
 - Member: Continue to the **Member Verification** section.
 - Authorized Representative: Are they listed in the verification screen as an authorized representative?
 - Yes: Continue to **Member Verification** section.
 - No: Continue to the **Authorized Representative** section.

Member/Health Plan Representative Verification

1. Ask for the member's date of birth (DOB).
"For verification purposes, may I have your date of birth please?"

- If Kaiser member, skip to Step 3.
2. Enter the date of birth in the **DOB** field in mm/dd/yyyy format.
 3. Ask for member's zip code.
"May I also have your zip code please?"
 - If the zip code was already obtained when searching for the member, there is no need to ask a second time.
 4. Select **Verified** from the drop-down box next to the **Zip** field.
 5. Click **Submit**. The system will advance to the **Preferred Phone Number** screen or the member's **Available Balance** screen.
 - DOB or ZIP did not match: Conference with the health plan provider to research. See [Transfers](#).

Authorized Representative

1. Ask for the caller's name.
"May I have your name please?"
 - The caller's name must be documented in the Call Wrap Up notes when speaking to someone other than the member.
2. Confirm that the name matches the authorized representative field in CRM.
 - Yes: Continue to **Member Verification**. Authorized representatives listed in CRM can be treated as if you are speaking with the member.
 - No: Continue to Step 3.
3. Verify caller per Authorized Representative procedure below.
 - UnitedHealthcare (UHC): Continue to Member Verification.
 - Priority Health: Have caller verify 3 out of the 5 member details below.
 - Name
 - Address
 - Date of birth
 - Card number
 - Member ID number
 - All other clients: Ask if cardholder is available to give verbal consent.
"May I speak with <<member name>> to get consent to continue?"
 - If Yes: Have cardholder verify and provide consent to continue speaking with authorized representative.
 - If No: Conference with the health plan provider to confirm the caller is an authorized representative. See [Transfers](#).

Disposition: Other> Authorized Representative (Only if speaking to AR)

3.5. PREFERRED PHONE NUMBER

OVERVIEW

Process to update a member's preferred phone number in CRM.

KEY INFORMATION

- Only a member's preferred phone number and email address can be updated in CRM. All other changes must be handled by the member's health plan provider.

PROCESS

Preferred phone number screen pop.

1. Ask the member for their preferred phone number.
"What phone number do you prefer if we need to reach you?"
 - **Member supplies Phone number:** Enter the phone number in the **Preferred Phone** field without any dashes.
 - **Member Does not provide phone number:** Leave **Preferred Phone** field blank.
2. Click the appropriate response.
 - **Obtained phone number:** Click **Submit**.
 - **Did not obtain phone number:** Click **Skip**.

Member requests to update their preferred phone number.

1. Click **Cardholder Information**. The system will advance to the **Member Demographics** page.
2. Click **Edit**. The **Preferred Phone** field will turn white.
3. Enter the phone number in the **Preferred Phone** field.
4. Click **Save Changes**. The field will turn gray.

Disposition: Cardholder Information>Email Address/Preferred Phone Number Update (only if member is requesting)

3.6. CALL WRAP UP

OVERVIEW

Process to close a call with a member and document the purpose of the call.

KEY INFORMATION

- CRM will not allow you to exit the members account until call wrap up is complete.
- When completing a request support ticket, there is no need to copy all comments from the ticket into the call wrap up notes. Provide the reason for the call and include “submitted request support ticket” as part of the resolution.

PROCESS

1. Click **Call Wrap Up** in the upper-right hand corner of CRM. The system will advance to the **Call Wrap Up** screen.
2. Click the arrow to the left of Benefit Type to expand the list.
3. Choose the benefits that were discussed during the call by selecting the checkbox next to the applicable benefit type(s).
 - Must make at least one selection.
 - Select all that apply based on what was discussed throughout the call.

Example1: Member requests card activation.

Benefit Type: Select all benefits the member has since card activation impacts all benefits.

Example 2: Member asks for eligible Healthy Foods list and OTC balance.

Benefit Type: OTC and Nutrition

Example 3: Member needs Health Insurance Provider member ID card replaced.

Benefit Type: Select N/A since the question is not related to Healthy Benefits Plus.

Disposition	Sub-Category	Definition
Benefit Type	OTC	Call regarding the OTC benefit.
	Nutrition	Call regarding the Nutrition (Healthy Foods) benefit.
	Healthy Savings	Call regarding the Healthy Savings discounts.
	Rewards	Call regarding the Rewards program.
	N/A	Call is not pertaining to Healthy Benefits Plus. Must include reason in the comments.

4. Click the arrow to the left of the appropriate disposition to expand the list and select the checkbox next to the applicable sub-category for the call.
- Must make at least one selection.
 - Select the primary reason(s) for the call (main call driver).
 - Always include Transfer/Conference and/or Authorized Representative if applicable.

Disposition	Sub-Category	Definition
General Program Information	Program Overview	General program information. Use when member asks multiple questions about how the program works. (Ex: ways to shop, store locations and eligible products.)
	Benefit Balance Inquiry	General balance information. Includes expired benefit disputes.
	Store Locations	Location of participating retailers.
	Eligible Products	Product eligibility.
Cardholder Information	Email Address/Preferred Phone Number Update	Update to member's preferred phone number or email address.
	Demographic Update with Health Plan	Update to cardholder information other than preferred phone number or email address.
Order Inquiries	Place Order	Request to place an order. (do not select if mixed tender).
	Mixed Tender Order	Mixed tender order.
	Order Status	Status of an order. Includes ghost order.
	Backlog an Order	Hold an order for the next benefit period.
Card Inquiries	Card Status	Checking status of card replacement request or active status.
	Card Activation	Activate card.
	Card Replacement	Replace card.
Catalog Inquiries	Request Catalog	Request a catalog.
	Catalog Status	Request for update on catalog request.

Category	Reason	Definition
Transfer/Conference	To Tier 2	Transferred/conferenced to Tier 2.
	From Tier 1	Tier 2 received transfer/conference from Tier 1.
	To Health Plan	Transferred/conferenced to health plan.
	From Health Plan	Received transfer from health plan.
	To Walmart	Transfer/conference to health plan.
	Supervisor	Transfer/conference with Supervisor.
	Language Line	Transfer/conference to Language Line
Portal/Mobile App Support	Password Assistance	Assistance with web portal/mobile app password.
	Registration Assistance	Assistance with registering on web portal/mobile app.
	General Support	General assistance with web portal/mobile app.
Other	Call Disconnected	Caller did not answer, stopped responding, or disconnected the call.
	Authorized Representative	Authorized representative calling on behalf of the member including a health plan representative without the member.
	Store Support	Assistance with using benefits in-store.
	Outbound Campaign	Making call for outbound campaign.
	Other	Subject not reflected in reasons list. Must include reason in the comments.

5. Document the call with a concise note in the **Comments** field.

- Note must include:
 - **Resolution(s):** Actions taken to resolve member inquiries.
 - **Caller's name:** if someone other than the member.
 - **First name of representative:** if completing or receiving a conference/transfer call.
- Acceptable abbreviations (do not use other abbreviations)
 - MBR = Member
 - AR = Authorized Representative
 - HBP = Healthy Benefits Plus
 - HS = Healthy Savings
 - BAL = Balance
 - TL = Team Lead
 - RST = Request Support Ticket
 - CNF = Conference
 - TFR = Transfer

Examples

Scenario 1: Member William Hartley called to activate his card. After verifying the members information, the agent activated the card. William has Health Savings, OTC and Nutrition.

Dispositions: **Benefit Type:** OTC, Nutrition, and Healthy Savings
 Card Inquiries: Card Activation
Comments: Activated card.

Scenario 2: Member's wife, Mary Patton, called in to place an OTC order for her husband, John Patton. After verifying the information, the agent placed the order. Mary then asked what stores her husband's card could be used for purchasing Healthy Food items. The agent supplied all store locations in the area.

Dispositions: **Benefit Type:** OTC and Nutrition
 Order Inquiries: Place Order
 Other: Authorized Rep
Comments: AR Mary called. Placed order and provided store locations.

Scenario 3: UHC Rep, Thomas, called to transfer Vivian Watts for a card replacement and to ask what items could be purchased with her healthy food card. The agent verified the member's account and had the UHC rep transfer the call. The agent completed the card replacement and told Vivian what categories of food she could use her healthy food benefits for. Vivian has Healthy Food.

Dispositions: **Benefit Type:** Nutrition
 General Program Information: Eligible Products
 Card Inquiries: Card Replacement
 Transfer/Conference: From Health Plan
Comments: UHC Rep (Thomas)TFR MBR. Replaced card and supplied eligible food categories.

Scenario 4: Julian Rivera called because his card was not working to purchase OTC items in store. Upon investigating his account, the agent identified that the household status was Inactive-Expired. The agent conferenced with UHC Rep, Wanda. Wanda shared that the account should be active, and the member is eligible for the benefits. The agent ended the conference and let Julian know he would forward the information to a specialist who would contact him within 3-5 business days.

Dispositions: **Benefit Type:** OTC
 Transfer/Conference: To Health Plan
 Other: Store Support
Comments: Determined account is inactive-expired. CNF with UHC rep, Wanda, and Confirmed the account should be active. Submitted RST.

Scenario 5: Gladys Hopkins Called to have her UHC Member ID card replaced. The agent transferred Gladys to Cindy at UHC.

Disposition: **Benefit Type:** N/A
 Transfer/Conference: To Health Plan
Comments: Requested a new Member ID card from Health Plan Provider. Transferred to Cindy at UHC.

Scenario 6: Wanda Jenkins called to check on her prescription at her pharmacy. The agent informs Wanda that she will need to reach out to her pharmacy directly.

Disposition: **Benefit Type:** N/A

Other: Other

Comments: Status of prescription at pharmacy. Informed to contact pharmacy.

Scenario 7: Patrick Miller called because he suspects someone used his card to make OTC purchases without his consent. Upon researching his account, the agent locates the purchases and verifies with the member that they were not made on his behalf. The agent submits a request support ticket.

Disposition: **Benefit Type:** OTC

Other: Other

Comments: Suspects someone is using his OTC credits to make purchases without his consent.
Verified the last two purchases on his account were not authorized by him. Submitted RST.

6. Click **Submit**. The system will return to the **Cardholder Search** screen.

3.7. TRANSFERS

OVERVIEW

Process to transfer or conference a member with another party.

KEY INFORMATION

- **Warm Transfer:** Connect with the transfer point representative. Stay on the line with the member to introduce them to the new representative and supply necessary information before completing the transfer.
 - All transfers should be warm transfers. Never cold transfer a member.
- **Conference:** Connect with the transfer point representative. Ask questions and get necessary information to assist the member. Disconnect from the transfer point representative before continuing with the member.

PROCESS

1. Determine the type of conference/transfer and offer to complete for the member.

Transfer Location	Phone Number	Script
Health Plan Provider	<p>Warm Transfer Phone in the Program Information tab of CRM.</p> <p>If no phone number is listed in CRM, ask the member to provide you the phone number from the back of their health plan member ID card.</p>	<p><i>"In order to resolve this for you I will need to <<conference or transfer>> you to the appropriate department. Please hold while I connect you."</i></p>
Tier 2 Specialist	<p>Tier 2 Specialist in the Program Information tab of CRM.</p>	<p><i>"In order to resolve this for you I will need to <<conference or transfer>> you to a specialist. Please hold while I connect you."</i></p>
Walmart Customer Service	<p>1-(833)-235-2106</p> <p>Do not give the above phone number to members. If a member asks for Walmart's Customer Service phone number, give them 1-(800)-925-6278.</p>	<p><i>"In order to resolve this for you I will need to <<conference or transfer>> you to Walmart Customer Service. Please hold while I connect you."</i></p>
Mom's Meals	<p>Eligible Items field in CRM pop up.</p>	<p><i>"In order to resolve this for you I will need to transfer you to Mom's Meals. Please hold while I connect you."</i></p>

2. Collaborate with the representative prior to bringing the member on the line.
 - Ask for the representative's name to document in call wrap up. See [Call Wrap Up](#).
 - Check in with member if hold time reaches two minutes.

"Do you mind holding while I check back with the member?"

3. Bring member on the line when applicable.
“Thank you for holding.”
4. Complete transfer/conference.
 - **Transfer:** Provide closing information and complete transfer.
 - **Conference:** Close the call with the representative and return to handling the member’s call.

3.8. TTY CALLS

OVERVIEW

Information on Teletype (TTY) calls and how they are handled.

KEY INFORMATION

- TTY is for individuals who are deaf, hard of hearing, Deafblind, or have disabilities and wish to communicate with a hearing person who uses a standard telephone.
- TTY relay calls are generally made using a text telephone, also known as TTY, which is a communication device equipped with a keyboard for typing messages and a screen for reading messages.
- TTY callers contact a relay service to reach a communication assistant who processes their call. Once connected, the caller types messages to the communication assistant, who relays the conversation by reading it aloud to the call recipient. The communication assistant then listens to the recipient's reply and types it to the caller.
- TTY calls should be treated as if you are speaking directly to the member.

3.9. CALLER NOT RESPONDING/HOLD REQUEST

OVERVIEW

Process to follow when a caller is not responding or requests to place you on hold.

PROCESS

No answer after greeting

1. *"Thank you for calling Healthy Benefits Plus Member Support. My name is _____, who do I have the pleasure of speaking with today?"*
2. Wait 5 seconds.
3. Repeat opening script.
4. Wait 5 seconds.
5. *"Caller if you can hear me, I am not able to hear you and will release the call due to no response. Please call us back at your convenience from 8AM to 8PM local time 7 days a week. Thank you for calling Healthy Benefits Plus Member Support. Have a wonderful day!"*

Caller stops responding

1. *"Caller Can you hear me?"*
2. Wait 5 seconds.
3. *"Caller can you hear me?"*
4. Wait 5 seconds.
5. *"Caller if you can hear me, I am not able to hear you and will release the call due to no response. Please call us back at your convenience from 8AM to 8PM local time 7 days a week. Thank you for calling Healthy Benefits Plus Member Support. Have a wonderful day!"*

Caller requests a hold

1. *"I would be happy to hold the line for up to two minutes. If you do need longer than two minutes, we ask you to please call us back at your convenience."*
2. Wait for up to two minutes.
3. *"Caller can you hear me?"*
4. Wait 5 seconds.
5. *"Caller can you hear me?"*
6. Wait 5 seconds.

7. *“Caller if you can hear me, I am not able to hear you and will release the call due to no response. Please call us back at your convenience from 8AM to 8PM local time 7 days a week. Thank you for calling Healthy Benefits Plus Member Support. Have a wonderful day!”*

Disposition: Other>Call Disconnection

3.10. DIFFICULT CALLER

OVERVIEW

Process to handle a caller who is using harassing and/or abusive language.

KEY INFORMATION

- The following harassing/abusive language will not be tolerated, and warrants warning and disconnect per the below procedure.
 - Continual cursing/verbal abuse towards the representative.
 - Must occur at least twice prior to warning and disconnect.
 - Does not include a member cursing in normal conversation which is not pointed at the representative.

PROCESS

1. Attempt to diffuse the situation by remaining calm and using empathy/can do language.
 - *"I can understand how frustrating this must be. What I can do for you is...."*
 - *"I apologize for the inconvenience. I will take care of this by doing...."*
2. If member continues to use harassing/abusive language, warn the member they may need to call back when they are able to discuss the situation.
 - *"I'm sorry <<member's name>>, I really want to help you with your concern, but I may not be able to if you continue <<demonstrated behavior>>. I ask that you refrain from << demonstrated behavior >> or I will need to ask you to call back when you are able to discuss the situation."*
3. Inform the member the call will be released.
 - *"<<member's name>> due to continued <<demonstrated behavior>> I will release the call and ask that you call us back when you are able to discuss the situation. Thank you for calling Healthy Benefits Plus Member Support and have a good day."*
4. Include the following in the call wrap up note with the reason for the member's call.
 - Member was <<demonstrated behavior>>. Followed warning and disconnect procedure. Disconnected call.
 - Do not document specific profanity.
5. Share the member's information and reason for disconnecting with a supervisor.
 - Member's first and last name
 - Member's zip code
 - Member's card number
 - Reason for call disconnection.
 - Do not document specific profanity.

4.0. CARD INQUIRIES

4.1. CARD ACTIVATION

OVERVIEW

Process to activate a member's Healthy Benefits Plus card.

KEY INFORMATION

- Members with only the Healthy Savings program will receive pre-activated cards.
- Members with benefits other than Healthy Savings (including healthy savings paired with another benefit) must activate the card prior to using any of the benefits associated with the card using one of the options below.
 - IVR
 - Web Portal
 - Mobile App
 - Healthy Benefits Plus Member Support (see Process section below)
- Cards may be activated early if member would like to place an order prior to receiving the card. Inform the member of the risk in early activation. *"I would be happy to activate your card so you can place an order today. I do want to let you know; anyone would be able to use the card in its active state. Would you still like me to activate it?"*
- If the member's card is activated and the member is still experiencing issues using the card, check the member's household status. See [Card/Account Status](#).

PROCESS

1. Check the **Card Status** and **Card Mailed** fields in the account header.
 - **Active:** *"I see your card is active and ready to use. You have <<amount>> available which will expire on <<expiration date>> and you will receive your next benefit of <<amount>> on <<deposit date>>. May I help you with anything else today?"*
 - **Not Active with mailed date:** *"Have you received your new card?"*
 - **Yes:** Proceed to step 2.
 - **No:** *"We mailed out your new card on <<mailed date>>. It may take up to two weeks to arrive from the date it was mailed. Upon receiving your new card, you may activate it on our web portal, mobile app, or by calling us at <<phone number>>. Is there anything else I may help you with today?"*
 - **Not Active with Request Pending:** *"We are processing your new card and will be sending it out soon. Please allow 2-4 weeks from the date it was requested to receive your card in the mail. Upon receiving your new card, you can activate it on our web portal, mobile app, or by calling us at <<phone number>>. Is there anything else I may help you with?"*
2. Verify the last four digits of the card to ensure it matches what is in CRM.
"May I have the last four digits of your card number please?"
 - Does the number match?
 - **Yes:** Continue to Step 3.
 - **No:** *"I'm seeing a different number on file. Did you receive another card?"*
 - **Yes:** Continue to Step 3.

- **No:** Offer to replace the member's card if unable to locate the correct card. See [Card Replacement](#).
3. Click **Activate** next to the **Card Mailed** field in the account header. The **Activate Card** pop up will display.
 4. Click **Yes, Activate**. The pop up will display a confirmation indicating the card was successfully activated.
 5. Click **OK**. The system will return to the main screen with the **Card Status** now displaying as **Active**.
 6. Inform the member the card is now active. If benefit effective start date is:
 - **Prior to the date the member is calling:** *"I have activated your card. You have <<amount>> available which will expire on <<date>> and you will receive your next benefit of <<amount>> on <<date>>. Would you like to place an order?"*
 - **On or after the date the member is calling:** *"I have activated your card. Please note you will be unable to use your benefits until the benefit start date. Your first benefits will be available on <<start date>> in the amount of <<amount>> which will expire on <<date>>. May I assist you with any further information?"*

Disposition: Card Inquiries>Card Activation

4.2. CARD STATUS

OVERVIEW

Process to determine if a member's account/card is active and able to be used.

KEY INFORMATION

- If the household and card status are active and the member is still experiencing issues using the card, see [Card Replacement](#).

PROCESS

1. View the **Household Status** in the account header.
 - **Active:** Proceed to Step 2.
 - **Inactive-Expired:** See [Inactive-Expired](#).
2. View the **Card Status** and **Card Mailed** fields in the account header.
 - **Active with date:** *"I see your card is active and ready to use. You have <<amount>> available which will expire on <<date>> and you will receive your next benefit of <<amount>> on <<date>>. May I help you with anything else today?"*
 - **Not Activated with date:** The card has been mailed and the member should receive it within 2 weeks from the date it was mailed.
 - If the member has received the card or wishes to place an order prior to receiving the card, see [Card Activation](#).
 - If the member has not received their card and it has been 4 weeks since requesting the replacement card, offer to replace the card again. See [Card Replacement](#).
 - **Not Activated with Request Pending:** *"We are processing your new card and will be sending it out soon. Please allow 2-4 weeks from the date it was requested to receive your card in the mail. Upon receiving your new card, you can activate it on our web portal, mobile app, or by calling us at <<phone number>>. Is there anything else I may help you with?"*

Disposition: Card Inquiries>Card Status

4.3. CARD REPLACEMENT

OVERVIEW

Process to replace a member's card.

KEY INFORMATION

- If the member is experiencing issues using the card check the member's status. See [Card/Account Status](#).
- The member's previous card will automatically be deactivated upon requesting a new card.
- If a member does not recall receiving their welcome packet, use the **What to look for in the mail** section of the CRM Pop-Up to describe what the materials look like.
- Card replacement will be unavailable for specific clients toward the end of each plan year. Communication will be sent out with details on how to handle during that time.

PROCESS

1. Determine why the card needs replaced by asking probing questions.
"May I ask the reason you need your card replaced?"
 - **Did not scan in store:** See [Card Will Not Scan](#).
 - **Store did not accept card:** See [Cashier Would Not Accept Card](#).
 - **Lost, stolen, damaged, print issues, scratches, tears, or cracks in the bar code:** Proceed to Step 2.
 - **Card is visibly okay, but not working:** Check the member's status prior to replacing the card. See [Card/Account Status](#). If both the household and card status are active and the member is still having issues using the card, continue to Step 2.
2. Inform the member the previous card will be deactivated.
"Submitting a card replacement will automatically deactivate your previous card. You will be unable to use your account until you receive and activate your new card. Would you like me to continue with your replacement?"
 - Offer to place an order for OTC members prior to completing the replacement.
3. Click **Replace Card** to the right of the **Card Mailed** field in the account header. The system will display a pop up.
4. Select the appropriate option from the list.
 - Ask the member why the card needs replaced if not already understood.

Scenario	Replacement Option	Description
Member requests card only. Previous card was not received or has been lost, misplaced, or stolen.	Request a replacement card	Replaces the member's card and deactivates previous card number. Always offer to place an order prior to replacing the card. The card will need to be activated prior to use.
Member requests card and/or catalog. Previous card is in member's possession or has been destroyed.	Request a catalog (duplicate card provided no activation required)	Replaces the member's catalog and sends a duplicate card. The card will not need to be activated prior to use and will be the same card number as they currently have.

Member requests card and catalog. Previous card was not received or has been lost, misplaced, or stolen.	Request a replacement card and catalog	Replaces the member's catalog and card and deactivates previous card number. Always offer to place an order prior to replacing the card. The card will need to be activated prior to use.
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5. Select where the member would like the catalog to be sent.
 "Would you like this mailed to <<address on file>>?"
 - **Yes:** select radial button for **Permanent address on file**.
 - **No:** "May I have the address you would like your catalog mailed to?" Select the appropriate radial button and enter the address in the required fields. Verify back the address for accuracy.
 - **Alternate address:** use when the member has an address change that has not updated to CRM or if the member has a secondary address they frequently use. Alternate addresses will be saved in the replacement screen for future use.
 - **One time address:** use when the member would like their materials mailed to a one-time temporary address. One-time addresses will not be saved in the system.
 - **Note:** The **Address Two** field only needs to be filled out if the member has a unit #, building #, or apartment #.
6. Click **Replace**. The system will return to the main screen with the **Card Mailed** field displaying **Request Pending**.
7. Inform the member the request has been submitted.

Replacement Option	Timing	Suggested Script
Request a replacement card	1-3 weeks	<i>"Your request for a new card has been submitted. You should receive your it within 1-3 weeks. Your new card will need to be activated prior to using your benefits. Is there anything else I may assist you with today?"</i>
Request a catalog (duplicate card provided; no activation required)	2-4 weeks	<i>"Your request for a catalog to be mailed to you is complete. You should receive your new catalog within 2-4 weeks. You can shop on the web portal, mobile app, or by calling Healthy Benefits Plus Member Support. May I look up any products for you so we can place an order today?"</i>
Request a replacement card and catalog	2-4 weeks	<i>"Your request for a new card and catalog has been submitted. You should receive them within 2-4 weeks. Your new card will need to be activated prior to using your benefits. Is there anything else I may assist you with today?"</i>

Disposition: Card Inquiries>Replacement

4.4. CARD RELATED FAQs

OVERVIEW

Frequently asked questions (FAQs) and troubleshooting steps to resolve concerns with the member's card.

PROCESS

- **Where do I find my card number?**
 - **S3:** *"Your card number will be located on the front or back of your card, your welcome letter, the web portal, or the mobile app."*
 - **VISA:** *"Your card number is located on the front of your card, welcome letter, and in the mobile app."*

- **Can you provide me my card number?**
 - **S3:** Only provide a card number to a fully verified member or authorized representative.
"I would be happy to give you the card number. Are you ready to write it down?"
 - Click **Show** next to the card number in the **Cardholder Information** box from the **Online Orders** tab in CRM.
 - **VISA:** We only have access to the last four digits of VISA card numbers.
 - *"I can verify the last four digits of the card number or, if the card has been misplaced, I can request a replacement card for you. I'm sorry I do not have access to your full VISA card number."*

- **Where do I find my PIN/security code?**
 - **S3:** *"Your PIN/security code is the 4-digit code located on the front or back of your card."*
 - **VISA:** *"Your security code is the 3-digit number on the back of your card labeled CVV."*

- **Can you give me my PIN/security code?**
 - **S3:** Only give out a PIN/security code to a fully verified member or authorized representative.
 - Click **Show** next to the security code in the **Cardholder Information** box from the **Online Orders** tab in CRM.
 - *"I would be happy to give you the PIN/security code. Are you ready to write it down?"*
 - **VISA:** We do not have access to the PIN/security code for VISA cards.
 - *"It is the 3-digit code on the back of your card labeled CVV I'm very sorry, I do not have access to your security code."*
 - Unable to read due to poor vision: *"Is there someone who could help you read the code from the back of the card?"*
 - Unable to read due to wear on the card: *"I would be happy to request a card replacement for you."*
See [Card Replacement](#).

- **How do I activate my card?**
 - *"You can activate your card on the web portal, mobile app, or I would be happy to activate your card for you today."* See [Card Activation](#).

- **How do I use my card/benefits?**

- *"I would be happy to walk you through how to use your card."* Follow the [Health Benefits Plus Programs](#) article for details about each benefit.
- **Why will it not let me register my card on the web portal/mobile app?**
 - *"I apologize you are having issues registering your card. I will look into this to get it resolved for you."* See [How to Register](#).
- **Why is my card not working?**
 - *"I'm sorry you are having trouble using your card. I will look into this to get it resolved for you."*
 - Check household and card status. See [Card/Account Status](#).
 - If card is damaged, replace the card. See [Card Replacement](#).
 - Check if the store is a participating retailer. See [Store Locator](#).
- **What do I do if my card is lost, stolen, or damaged?**
 - *"I am so sorry to hear your card has been <<lost, stolen, or damaged>>. I would be happy to get a card replacement for you."* See [Card Replacement](#).
- **What if I did not receive my card?**
 - *"I am sorry you have not yet received your card. I will look into this to get it resolved for you."* See [Card Replacement](#).

5.0. PHONE ORDER PROCESSING

5.1. BASIC ORDER

OVERVIEW

Process to place a basic order over the phone with an OTC member.

KEY INFORMATION

- All members will be charged taxes on their order, which will be covered by the benefit balance.
- Orders under \$35 will display a \$5.99 shipping fee. However, members will never be charged shipping. The shipping fee will be waived after entering card information at checkout.
- Orders shipping to Alaska or Hawaii will require an additional shipping surcharge. This amount will not be covered by the member's benefits and a mixed tender order will need to be completed to cover the surcharge amount.
- Do not transfer members to Walmart for placing orders.
- **UnitedHealthcare members only:** always encourage UHC members to place a minimum order of \$35 when their balance allows. See the **UHC Members Only: Minimum Order** section in this article.
- Orders should only be placed (including calls that were disconnected) if the following information has been confirmed.
 - All items have been added to cart.
 - All shipping information (shipping address, email address, and phone number).
 - Order total with tax.

PROCESS

Searching for items

1. Provide the member with the available balance listed in the **OTC** tile on the **Available Balance** screen.
2. Click **Products/Catalog** tab.
3. Ask the caller for the first item ID.
"May I have your first item number please?"
4. Type the item ID in the **Catalog ID** field.
 - Items can be located using the following fields if item ID is not available:
 - **Brand:** Product's brand name
 - **Product:** Product name or key words
 - **Department:** Filter by department category
 - Uncheck the **Catalog Item** box to search for items outside of the member's catalog.
5. Press **Enter**. The system will populate search results by relevance at the bottom of the screen.

6. Locate the item the member wishes to order.
 - Use the arrows at the bottom of the screen to view additional pages.

Adding items

1. Click on the item. The system will display the **Product Details** pop-up.
2. Check availability under the item picture.
 - If **Buy Online** button is present: Continue to Step 4.
 - If **Buy Online** is not present: See [Not Available for Purchase](#).
3. Click **Buy Online**. The item will open in a separate tab on Walmart.com.
 - If Walmart.com displays **You're using the new beta website.** under the Walmart logo at the top left corner of the page, follow [Opting out of Walmart Beta Website](#) prior to continuing the order.
4. Click the menu button (icon with 3 horizontal lines) in the upper left-hand corner of the screen. A menu will display.
5. Click **Your Location**. A field will appear below Your Location.
6. Enter or copy and paste the zip code where the order will be shipped into the field.
 - The zip code is important to accurately reflect the product prices and taxes.
7. Click **Update Location**. The menu will disappear and return to the item screen.
 - This affects the cost of tax, as members will be charged tax based on their zip code.
8. Click the shopping cart icon in the upper right-hand corner of the screen. The website will advance to the shopping cart.
9. Ensure the cart is empty.
 - Click **Remove** for any items that remain in the cart.
10. Click the back arrow to return to the item screen.
11. Verify the item has a delivery option available in the box under the **Add to cart** button.
 - **Yes:** Continue to Step 12.
 - **No:** See [Not Available for Purchase](#).
12. Verify the item is Sold & Shipped by Walmart.com in the section below **More delivery & pickup options**.
 - **Yes:** Continue to Step 13.
 - **No:** See the **Not Sold /Shipped from Walmart** section in [Not Available for Purchase](#).
13. Confirm the item name, price, and desired quantity with the caller.
14. Click **Add to Cart**.

15. Repeat the **Searching for Items** and **Adding Items** steps for all remaining items.
“May I have your next item number please?”
16. Move to the **Checkout** section of this article when the member is done ordering items.

Checkout

1. Confirm order subtotal with the member.
 - Tax will not be added to the order until after delivery information is completed.
 - Orders under \$35 will display a shipping fee of \$5.99. However, this cost will be deducted from the order after entering payment information.
 - Orders shipping to Alaska or Hawaii will require an additional shipping surcharge.
 - This amount will not be covered by the member’s benefits and a mixed tender order will need to be completed to cover the surcharge amount.
 - **Member asks why there is a surcharge:** “Walmart applies a surcharge for shipping locations outside the continental United States.”
2. Click **Check Out**.
3. Click **Continue Without Account**.
 - Never check out with a Walmart.com account.
4. Select the delivery option for all items.
 - Phone orders cannot be placed for pick-up.
5. Click **Continue**.
6. Ask the member to confirm the delivery information.
 - If information is the same as in CRM, copy and paste into Walmart.com.
 - *“Will we be shipping this order in your name?”*
 - **If someone other than the member:** *“Will we be shipping this order to <<member’s name>>?”*
 - Enter name in **First Name** and **Last Name** fields.
 - *“May I have the phone number to contact in case of delivery questions?”*
 - Enter number in the **Phone number (in case of delivery questions)** field.
 - Use 555-555-5551 if the member does not wish to provide a phone number.
 - *“What email address would you like order notifications sent to?”*
 - Enter email in the **Email address for order notifications** field.
 - Use otcorders@solutran.com if the member does not wish to provide an email address.
 - *“What address would you like the order shipped to?”*
 - Enter the street number and name in the **Street address** field.
 - Enter apartment or suite number in the **Apt, suite, etc. (optional)** field if applicable.
 - Enter city in the **City** field.
 - Click **State** dropdown menu and select the state.
 - Enter zip code in the **ZIP code** field.
7. Uncheck the **Email me about hot items, great savings, and more** box below the delivery details.

8. Click **Continue**. The website will advance to the **Enter payment method** screen.
 - The cost of tax will be calculated and added to the order if applicable. Check the order total at the top of the page to view the order total plus tax.
 - **If member asks what the tax rate or taxable items are:** *“Sales tax is charged according to your state and local tax rates and regulations. For specific sales tax information, I would suggest you contact your state or local government.”*
 - **If member asks why shipping is taxed:** *“Tax is calculated on the order total. Your health plan will cover the cost of shipping fees for orders under \$35, but the tax on the shipping fee will be added to the total.”*
 - If shipping to a PO Box and **Using <<zip code>> changes your delivery and pickup options. Please select a new option to continue.** appears:
“Due to Postal Service, and State regulations, some items are not able to be shipped to a PO Box and must have a physical address to be delivered. I can add a physical address to your order so you can still receive your items.”
 - **Yes:** Change shipping address to physical address and continue to Step 9.
 - **No:** *“I can remove <<item(s)>> from your order and ship the remaining items to you PO Box.”*
 - **Yes:** Remove item(s) that no longer have **Delivery** as an option and continue to Step 9.
 - **No:** Continue to next bullet.
 - **Insists on shipping to PO Box:** *“I can connect you with Walmart Customer Service if you would like more specific information. Would you like me to transfer you now?”*
9. Click **Gift Card**.
10. Copy the member’s 17-digit S3 card number from the **Online Orders** tab in CRM and paste it into the Gift card number field.
 - The member does not need to have the card in hand.
11. Copy the member’s 4-digit security code from the **Online Orders** tab in CRM and paste it into the PIN/Security Code (4 digits) field.
12. Click **Apply Gift Card**. The **Applied to order** box will appear with the amount applied to the card and the value remaining on the card.
 - **If the order total is covered by the Healthy Benefits Plus Card:** The amount applied to the card will match the order total. A confirmation box will to the right will display **Good news! Your order total is covered.** Continue to Step 12.
 - **If the order total is not covered by the Healthy Benefits Plus Card:** you will see there is a remaining balance due. See [Insufficient Funds](#).
13. Click **Review your order** and confirm the order details, including total cost.
14. Click **Place Order**.
15. Provide the caller with the estimated delivery dates and possibility of arriving in multiple packages.
 - **Single item order:** *“Your estimated delivery date is <<date>> and it will arrive in <<number>> package(s).”*
 - **Multiple item order:** *“You estimated delivery date(s) is/are <<date(s)> and it may arrive in multiple packages.”*

16. Provide the caller with their order number.
"Would you like to take note of your order number for tracking purposes?"
17. Enter the order number in the **Order Number** field in the Online Order tab of CRM.
18. Enter the preferred email address (if applicable) in the **Preferred Email** field in the **Online Orders** tab of CRM.
 - **Used same email address as listed in CRM:** field will be pre-populated.
 - **Used different email address:** clear the field and enter the email address used.
 - **Used otcorders@solutran.com:** Leave field blank.
19. Click **Log Online Order**. The order information will appear in the **Previous online orders through CRM** box.

Minimum Order (UnitedHealthcare Members Only)

1. Encourage members to place at least a \$35 order when the order is under \$35 and the member's balance is over \$35.
"I see you have additional credits available. Your plan requests a minimum order of \$35 for home delivery. Are there other products I can help you order today?"
 - **IMPORTANT:** If the member does not meet the minimum requirement, complete order as usual. Only share the information one-time during the interaction.
 - If member says:
 - **There are no other products I need at this time.**
"I would be happy to complete your order today. For future, we recommend you utilize your credits in one order to ensure you meet the \$35 minimum requirement."
 - **Am I going to be charged shipping if I don't place a \$35 minimum order?**
"Shipping charges will be covered by your plan, but you are encouraged to meet the \$35 minimum order when utilizing your credits."
 - **Do my credits have to be used in one order?**
"We recommend you utilize your credits in one order to ensure you meet the \$35 minimum requirement. I can help you place an order today for your items."
 - **There was no minimum order amount in 2020. Why is there a minimum now?**
"We are encouraging members to meet the \$35 minimum to minimize shipping cost which will help your plan to continue providing great benefits to all of their members."
 - **I didn't know this was a requirement. Where does it mention this?**
"The information is included in your 2021 Welcome Kit and on the last page of your 2021 Health & Wellness Products catalog."

Disposition: Order Inquiries>Place Order

5.2. NOT AVAILABLE FOR PURCHASE

OVERVIEW

Process to troubleshoot OTC orders where items are not available to be purchased.

KEY INFORMATION

- Product availability is subject to change, and there are instances in which some eligible items may not be available for purchase when placing a phone order.
- Eligible items are items within the member's OTC catalog, or from CRM's Product/Catalog search.
- Items must be Sold & Shipped by Walmart.com and available for delivery to place them on an order.
- Occasionally an item may not be displaying correctly in CRM and should be reported for correction. See [Report Product Issue](#).

PROCESS

Item Not Found in CRM

1. Inform the member the item is not available for purchase.
"I apologize, but this item is not showing as one of our eligible products. Would you like me to search for similar items you could purchase instead?"
 - If Yes: Search for additional items in the Products/Catalog tab in CRM. See [Product/Catalog Search](#).
 - If No: *"I'm so sorry. Do you have another item you would like to order?"*

No Buy Online Option

1. Inform the member the item is not available for purchase.
"I'm sorry, this item is not currently available."
 - Continue to Substitute and Alternative Items section of this article.

Not Sold/Shipped from Walmart

1. Check if Walmart is listed as another seller in the **other seller's** section on the Walmart website.
 - **If Yes:** Continue to Step 3.
 - **If No:** Refer to the **Substitutes and Alternate Items** section of this article.
2. Click the **Walmart.com** link. The website will advance to a page with the item being sold from Walmart.com.
3. Confirm item name, price, and desired quantity with the caller.
4. Click **Buy from this seller**.
5. Continue to place the order.

Not Available for Delivery

1. Inform the member the item is not available for purchase.
"I'm sorry, this item is not currently available."

- Phone orders can only be placed for items that have delivery options. Items only available for pick-up should be considered as out of stock.
- Continue to Substitute and Alternative Items section of this article.

Substitute and Alternate Items

1. Check to see if substitute or alternative items are available in CRM....
 - **If Yes:** *"I apologize, but this item is not available to purchase. There are some similar items such as <<item(s)>>. Would you like to purchase one of these instead?"*
 - **If Yes:** Add item to the order and proceed with call.
 - **If No:** *"I'm so sorry. Do you have another item you would like to order?"*
 - **If No:** *"I apologize, but this item is not available to purchase. Would you like me to search for similar items you could purchase instead?"*
 - **If Yes:** Search for additional items in the Products/Catalog tab in CRM. See [Product/Catalog Search](#).
 - **If No:** *"I'm so sorry. Do you have another item you would like to order?"*

Approved Product Not Covered

1. Research/ask probing questions to understand the situation.
 - Is the product in our catalog?
 - Does the product align to approved food categories?
 - Is the member's household and card status active?
 - Is the member using the most recent card?
 - **If unable to resolve:** Continue to Step 2.
2. Submit a Request Support Ticket.
 - Click **Request Support**.
 - Click **Add New Ticket**.
 - Complete the following fields
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member's preferred email address if applicable
 - **Phone:** Member's preferred phone number if applicable
 - **Issue Type:** Product
 - **Reason:** Approved Product Not Covered
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field and add the necessary details.

Product Name:

Store Name:

Store Location:

Store Zip Code:

Additional Details:

3. Inform the member the request is submitted.
"I have forwarded your concern to a specialist who will get back to you within 3-5 business days."

5.3. INSUFFICIENT BENEFITS

OVERVIEW

Process to complete a phone order when the member's remaining balance is not enough to cover the order.

PROCESS

1. Offer to adjust the order to get the total within the member's available balance.
"Are there items you would like me to remove to get your total within your remaining balance?"
"Would you like me to see if we can replace some of your items with similar items at a lower cost?"
 - **If Yes:** Adjust the order and continue.
 - **If No:** Continue to Step 2.
2. Offer to place a mixed tender order.
 - **If not trained on mixed tender process:** *"If you would like to cover the remaining balance with your credit or debit card, I can transfer you to a specialist who can complete your order for you. Would you like me to transfer you now?"* See [Transfers](#).
 - **If trained on mixed tender process:** *"Would you like to use a credit or debit card to cover your remaining balance."* See [Mixed Tender](#).

Disposition: Order Inquiries>Place Order

5.4. MIXED TENDER

OVERVIEW

Process to complete a phone order when a member is using their benefits with a credit/debit card.

KEY INFORMATION

- A mixed tender transaction is when a member does not have enough funds on their benefit card to cover the full order total and choose to use a secondary method of payment (i.e., credit/debit card) to complete their phone order.
- Only place a mixed tender order if you have been trained and instructed to do so. All others must transfer to Tier 2. See [Transfers](#).

PROCESS

1. Add all items to the shopping cart ensuring all are OTC approved items.
2. Follow the normal checkout process up until the **Enter payment method** screen. See [Basic Order](#).
3. Click **Gift Card**.
4. Copy the member's 17-digit S3 card number from the **Online Orders** tab in CRM and paste it into the Gift card number field.
 - The member does not need to have the card in hand.
5. Copy the member's 4-digit security code from the **Online Orders** tab in CRM and paste it into the PIN/Security Code (4 digits) field.
6. Click **Apply Gift Card**. Walmart.com will show that there is a remaining balance due.
7. Click **Credit Card**.
8. Ask the caller for all required information.
 - first name on the card
 - last name
 - card number
 - expiration date
 - CVV
 - phone number associated with the card.
 - Is billing address the same as delivery address?
 - **Yes:** leave checkbox checked.
 - **No:** Uncheck checkbox and add billing address.
9. Review the order with the member.
10. Click **Place Order**.
11. Provide the caller with the estimated delivery dates and estimated number of packages it will be shipped in.
"Your estimated delivery date is <<date>> and it will arrive in <<number>> package(s)."

12. Provide the caller with their order number.
“Would you like to take note of your order number for tracking purposes?”
13. Enter the order number in the **Order Number** field in the Online Order tab of CRM.
14. Enter the preferred email address (if applicable) in the **Preferred Email** field in the **Online Orders** tab of CRM.
 - **Used same email address as listed in CRM:** field will be pre-populated.
 - **Used different email address:** clear the field and enter the email address used.
 - **Used otcorders@solutran.com:** Leave field blank.
15. Click **Log Online Order**. The order information will appear in the **Previous online orders through CRM** box.
 - **Note:** Remember to note that this was a mixed tender order in the Wrap Up comments.

Disposition: Order Inquiries>Mixed Tender Order

5.5. WELLCARE INSTALLATION SERVICES

OVERVIEW

Process to add installation services to Assistive Devices (AD) purchased for WellCare members.

KEY INFORMATION

- Follow the normal ordering process to place orders for AD items for WellCare members. See [Basic Order](#).
- Installation services are added to the member's cart directly on Walmart.com and are not listed in CRM. See process below.
- It will appear the member is being charged the installation fee during checkout on Walmart.com.
 - **Member's balance is enough to cover the eligible item:** the funds are covered by the plan and will not be deducted from the member's balance.
- Do not share the remaining balance provided at the end of the checkout process on Walmart.com as it will appear higher than the member's actual balance.
- The member's phone number must be entered at checkout and an email address must be requested as the installation service will reach out directly to the member to schedule the installation.
- Installation services not completed within 30 days after ordering will automatically be cancelled and will be made available for use on future installation services.

PROCESS

1. Add the qualifying AD item to the member's order per normal process.
2. Ask the member if they would like to add the installation service.
 - **Yes:** Continue to Step 3.
 - **No:** Continue with normal order process.
3. Copy the appropriate installation item ID from the chart below (also available in the details button in CRM).

Product Name	Installation Item ID
Air Conditioner Installation Service (In-Window) by Handy	798947794
Bedside Commode Assembly	335176590
Threshold Ramp Installation	705637204
Toilet Seat Elevator Installation	971759520
Shower Seating Assembly by Handy	157421268
Overbed Table Assembly by Handy	251218357
Bed Safety Rail Installation by Handy	365872607
Grab Bar Installation by Handy	571933711
Handheld Showerhead Installation by Handy	834731445
Toilet Safety Frame Installation by Handy	624507849

4. Paste the installation item ID into the Walmart.com search bar.
5. Press **Enter**.
6. Click **Add to cart**.
7. Continue with normal order process.

Example of Checkout Process

The member has an available balance of \$50 to purchase eligible AD items.

Assistive Devices Allowance i


Available Now

\$50.00

Future Benefit Date: 04/01/2021
Future Benefit Amount: \$50.00
Benefit Deposit Schedule: 04/01/2021
Last Deposit Date: 12/24/2020
Last Deposit Amount: \$50.00
Last Transaction Date: N/A
Last Transaction Amount: N/A
Account Status: A-Active
Benefit Amount: You get \$50 credits each quarter that will expire at the end of the year

Products
Stores

The member purchases an eligible AD item for \$39.53 and the installation service, which has a separate cost of \$59.00.



♥ Toilet Seat Elevator Installation

★★★★★

- Professional installation of toilet seat elevator or riser
- Customer must provide their own toilet

\$59.00

Add to cart

The order total at checkout will display the cost of the eligible item + the installation service.

After entering the AD card information, the order total summary will show the cost of the eligible item + the cost of the installation service as being deducted from the AD card, as opposed to deducting the \$59.00 installation fee from the order total.

Subtotal (2 items)	\$98.53
Delivery	Free
Tax	\$0.00
Total	\$98.53
AD Benefit Card	-\$98.53
See item details +	

The tiles indicate the amount of benefit applied to the order which will be greater than the actual benefit amount the member has.

For example, instead of showing the amount applied as \$39.53, Walmart.com will show \$98.53 (the price of the product + the installation price) was applied to the card.

In actuality, the member’s remaining balance will be \$10.05, but the remaining value displayed on Walmart.com will appear much higher, as it is taking into consideration extra credits used for installation services. **Do not relay the benefit information displayed on Walmart.com to the member.** Always utilize CRM to inform the member of the remaining balance.

3 Enter payment method

Applied to order

AD Benefit Card ending in 1879

Amount applied **\$98.53**

Value remaining \$170.47

[View balance details](#) [Delete](#)

Good news! Your order total is covered.

5.6. OPTING OUT OF WALMART BETA WEBSITE

OVERVIEW

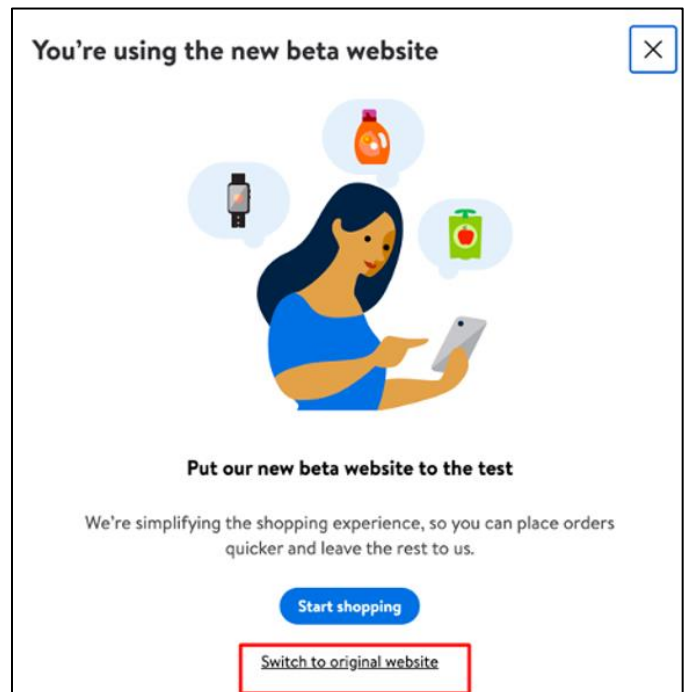
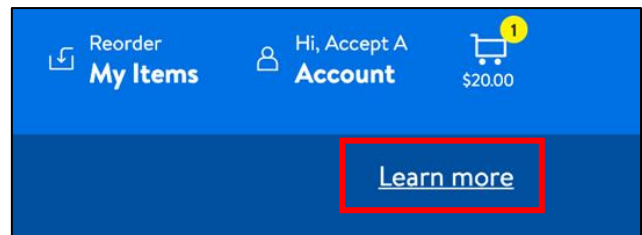
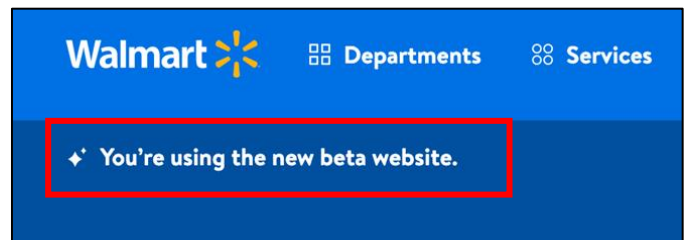
Process to opt out of using the Walmart beta website.

KEY INFORMATION

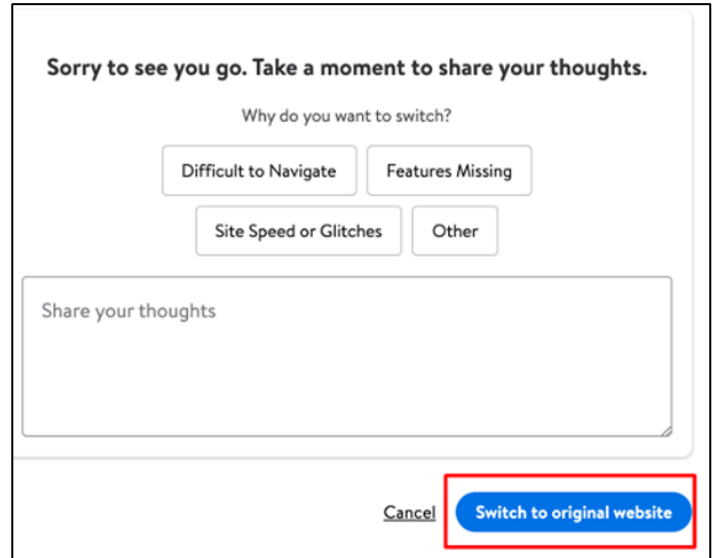
- Walmart is beta testing a new website with a small number of customers. Members and agents who access the website for Healthy Benefits Plus programs will not be able to access the new website until a later release date.
- Any individual who does receive the new website will need to opt out to continue to utilize Healthy Benefits Plus

PROCESS

1. Look for the message **You're using the new beta website** in the upper left-hand corner under the Walmart logo.
 - Message is present: Continue to Step 2.
 - Message is not present: Continue as normal.
2. Click **Learn More** in the upper right-hand corner.
3. Click **Switch to the original website**.



4. Select **Other** for the reason to switch back.
5. Enter **HBP** in the comments field.
6. Click **Switch to original website**. The screen will navigate to the original website.
 - NOTE: Items may need to be added again to the original website if they were entered on the beta website.



Sorry to see you go. Take a moment to share your thoughts.

Why do you want to switch?

Difficult to Navigate Features Missing

Site Speed or Glitches Other

Share your thoughts

Cancel **Switch to original website**

FAQs

- Why can't I process my order?
 - Confirm if the member is using the new Walmart Beta Website.

*"Do you see a message in the upper left corner under the Walmart logo that says, **You're using the new beta website?**"*

 - **If yes:** Instruct the member to opt out of the beta website. Utilize the instructions to assist the member. *"Walmart is testing a new website. Currently, Healthy Benefits Plus orders cannot be processed on the new website until a later date. I apologize for the inconvenience, but I will be able to tell you how to return to the original website so you can process your order."*
 - **If no:** Follow process as normal.
- Why was I included in the test?
 - *"The test is conducted by Walmart. Walmart randomly rolls out tests to users. I would be happy to transfer you to Walmart Customer Service if you have additional questions."*
- Will I have to do this every time I go to the Walmart website?
 - *"If the message appears under the Walmart logo stating you are using the beta website, you will need to switch to the original website if placing a Healthy Benefits Plus order."*
- How long is the test going to last?
 - *"That's a great question. I would be happy to transfer you to Walmart Customer Service to assist."*

Disposition: Other>Other (only if member calls for this reason)

6.0. ORDER INQUIRIES

6.1. ORDER STATUS

OVERVIEW

Process to check the status of a member's order including when it will arrive, what items are on the order, and what address the order was shipped to.

PROCESS

Locate Order in CRM

1. Ask probing questions to determine the order the member is calling about.
 - "Do you have the order number?"
 - "When did you place the order?"
 - "Did you place the order over the phone, through the mail, or on the web portal?"
2. Locate the order in CRM.
 - If member is not able to provide the order number:
 - Click **Transaction Activity**.
 - Locate a line displaying **Purchase** in the **Type** column with the date it was purchased in the **Date/Time** column.
 - Note the number in the **Order Number** column.

Track an Order

1. Open the Walmart website in a separate browser tab.
 - www.walmart.com
2. Click the menu button (3 horizontal lines) in the upper left-hand corner of the Walmart website. A menu will appear on the left-hand side of the screen.
3. Click **Track Orders**. The website will advance to the **Track your order** screen.
4. Type in the members email address associated with the order in the **Email address (required)** field.
 - If the member does not have an email address on file or on the mail order form use:
 - Phone order: otcorders@solutran.com.
 - Mail order: otcmail@solutran.com
5. Type in the 13-digit order number in the **Order number (13 digits required)** field.
6. Click **View order status**. The website will advance to the **Order Details** Screen.
 - The **Order Details** screen will include order date, order number, products, delivery status, order total, payment method and shipping address.
 - If the order is not found and the information was correct, contact Walmart Customer Service. See [Transfers](#).
7. Provide the requested information to the member.

Disposition: Order Inquiries>Order Status

6.2. GHOST ORDER

OVERVIEW

Process to identify and handle a ghost order.

KEY INFORMATION

- A Ghost Order occurs when an order is placed and an order number is available, but it is unable to be tracked on Walmart.com and a Walmart representative has no record of the order number.

PROCESS

1. Track the order on Walmart.com. See [Order Status](#).
 - **If the order is found:** Continue to assist the member as usual.
 - **If the order is not found:** Continue to Step 2.
2. Conference with Walmart Customer Service. See [Transfers](#).
 - Provide the Walmart representative with the order details including order number, date order was placed, order total and the member's shipping information.
 - **If Walmart can track the order:** Return to the member and continue to assist as usual.
 - **If Walmart has no record of the order:** Proceed to Step 3.
3. Submit a Request Support Ticket.
 - Click **Request Support**
 - Click **Add New Ticket**
 - Complete the following fields
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member's preferred email address if applicable
 - **Phone:** Member's preferred phone number if applicable
 - **Issue Type:** Orders/Purchases
 - **Reason:** Ghost Order
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below and into the Comments field.

Walmart has confirmed ghost order.
Walmart Representative's First Name:
Order Number:
Date of Transaction:
Total Order Amount:
Additional Details:

4. Inform the member the request is submitted.
"I have forwarded your request to a specialist who will get back to you within 3 to 5 business days."

Disposition: Order Inquiries>Order Status

6.3. CANCEL ITEMS/ORDERS

OVERVIEW

Process to cancel an item or order.

PROCESS

1. Ask probing questions.
 - “What is the order number?”
 - If member is not able to provide the order number:
 - Click **Transaction Activity**.
 - Locate a line displaying **Purchase** in the **Type** column with the date it was purchased in the **Date/Time** column.
 - Note the number in the **Order Number** column.
 - “What items would you like to cancel?”
2. Open the Walmart website in a separate browser tab.
 - www.walmart.com
3. Click the menu button (3 horizontal lines) in the upper left-hand corner of the Walmart website. A menu will appear on the left side of the screen.
4. Click **Track Orders**. The website will advance to the **Track your order** screen.
5. Type in the members email address associated with the order in the **Email address (required)** field.
 - If the member does not have an email address on file use otcorders@solutran.com.
6. Type in the 13-digit order number in the **Order number (13 digits required)** field.
7. Click **View order status**. The website will advance to the **Order Details** Screen.
 - If order is not found: Conference with Walmart Customer Service to inquire about the order. See [Transfers](#).
8. Click **Cancel** next to each item the member wishes to cancel from the order.
 - If unable to cancel items: Conference with Walmart Customer Service to request cancel. See [Transfers](#).
9. Provide a recap to the member.
 - **Canceled entire order:** *“We have successfully canceled your order. The amount of the order will be refunded back to your account within 5 business days.”*
 - **Cancel item(s):** *“We have successfully canceled <<item(s)>> from your order. The estimated delivery of the remaining item(s) is <<date>>. The amount of the cancelled items will be refunded to your account within 5 business days.”*

Disposition: Order Inquiries>Order Status

6.4. RETURNS

OVERVIEW

Process to assist a member with a return.

KEY INFORMATION

- Returns are subject to the Walmart return policy.
- Members may decide to return item if:
 - Damaged/defective
 - Not satisfied with the product
 - Wrong item received
 - No longer want the item

PROCESS

1. Ask probing questions.
 - “What is the order number associated with the item(s)?”
 - If member is not able to provide the order number:
 - Click **Transaction Activity**.
 - Look for a line displaying **Purchase** in the **Type** column with the date it was purchased in the **Date/Time** column.
 - Note the number in the **Order Number** column.
 - “When did you receive the item(s)?”
 - Locate the order on Walmart.com if confirmation of delivery date is needed. See [Order Status](#).
 - “What item(s) are you returning?”
 - Locate the order on Walmart.com if confirmation of items is needed. See [Order Status](#).
2. Warm transfer to Walmart Customer Service. See [Transfers](#).

6.5. REFUNDS/VOIDS

OVERVIEW

Process to check the status of a refund or voided transaction.

KEY INFORMATION

- Refunds
 - Refunds typically take 3-5 days to be credited back to a members account.
 - Refunded benefits are available for 30 days or when the member's benefits expire, whichever is greater.
 - Occasionally you may see a refund for a penny or two in the **Transaction Activity** tab. This is typically due to a sales tax adjustment and is not for a return of product. Only share the information if the member specifically asks about that return.

- Voids
 - Voids are typically immediately available on the member's account.
 - Voided benefits are available for 14 days or when the member's benefits expire, whichever is greater.

PROCESS

Locating Refunds in CRM

1. Click **Transaction Activity**.

2. Look for a line displaying **Return** in the **Type** column.
 - If no refund found: Go to **Refund Not Found** section of this article.

3. Provide the information to the member.
 - **Refunded less than 30 days from benefit expiration:** *"I see a refund in the amount of <<amount>> was returned to your account on <<date>>. This amount will be available for the next 30 days and expire on <<date>>."*
 - **Refunded more than 30 days from benefit expiration:** *"I see a refund in the amount of <<amount>> was returned to your account on <<date>>. This amount will expire at your regular benefit expiration of <<date>>."*

Refund Not Found

1. Ask the member when the item(s) were canceled or returned.
 - **If within last 5 business days:** *"It may take up to 5 business days for a refund to be credited back to your account. Please contact us back on <<date>> to check the status again or you can check your available balance on the web portal or mobile app to see when the credit is processed."*
 - **If longer than 5 business days:** Continue to Step 2.

2. Ask the member to hold while you speak with Walmart Customer Service.
"I apologize, I am not seeing a refund on your account. Please hold the line while I contact Walmart Customer Service. This may take several minutes."
 - See [Transfers](#) to connect with Walmart Customer Service.

3. Explain the situation to the Walmart representative, supply the necessary information, and ask if they have a record of the refund.

- **Walmart found/confirmed the refund:** Take note of the information provided by the Walmart representative, return to the caller, and share findings.
- **Walmart did not find the refund but is able to assist member:** Bring the member on the line, introduce the Walmart representative, close the call, and complete the transfer.
- **Request for refund submitted 5 or more days ago but refund still not issued:** Continue to Step 4.
- **Request for refund submitted less than 5 days ago:** *"It may take up to 5 business days for the refund to be reflected on your account."* Do not submit a request support ticket.

4. Submit a Request Support Ticket.

- Click **Request Support**.
- Click **Add New Ticket**.
- Complete the following fields
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member's preferred email address if applicable
 - **Phone:** Member's preferred phone number if applicable
 - **Issue Type:** Orders/Purchases
 - **Reason:** Refunds>Returns
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field and add the necessary details.

Refund not processed.

Order Number:

Date of Transaction:

Total Refund Amount:

Date Refund was Requested:

Additional Details:

5. Inform the member the request is submitted.

"I have forwarded your request to a specialist who will get back to you within 3 to 5 business days."

Locating Voids in CRM

1. Click **Transaction Activity**.
2. Look for a line displaying **Void** in the **Type** column.
 - If no void found: Go to **Void Not Found** section of this article.
3. Provide the information to the member.
 - **Refunded less than 14 days from benefit expiration:** *"I see a voided transaction in the amount of <<amount>> was returned to your account on <<date>>. This amount will be available for the next 14 days and expire on <<date>>."*
 - **Refunded more than 14 days from benefit expiration:** *"I see a voided transaction in the amount of <<amount>> was returned to your account on <<date>>. This amount will expire at your regular benefit expiration of <<date>>."*

Void Not Found

6. Ask the member when the attempted transaction took place.
 - Take note of the date.

7. Ask the member to hold while you speak with Walmart Customer Service.

“I apologize, I am not seeing the voided transaction on your account. Please hold the line while I contact Walmart Customer Service. This may take a several minutes.”

 - See [Transfers](#) to connect with Walmart Customer Service.

8. Explain the situation to the Walmart representative, supply the necessary information, and ask if they have a record of the voided transaction.
 - **Walmart found/confirmed the void:** Take note of the information provided by the Walmart representative, return to the caller, share findings.
 - **Walmart did not find the void but is able to assist:** Bring the member on the line, introduce the Walmart representative, and complete the transfer.
 - **If void request is 5 or more days ago but still not issued:** Submit [Transaction Dispute](#) request support ticket.

Disposition: Order Inquiries>Order Status

6.6. LOST OR STOLEN PACKAGES

OVERVIEW

Process to assist a member with a return.

PROCESS

1. Ask probing questions.
 - “What is the order number?”
 - If member is not able to provide the order number:
 - Click Transaction Activity.
 - Look for a line displaying **Purchase** in the **Type** column with the date it was purchased in the **Date/Time** column.
 - Note the number in the **Order Number** column.
 - “Did you place the order over the phone, online, or through the mail?”
 - “What item(s) is/are missing?”
2. Check the status of the order on Walmart.com. See [Order Status](#).
3. Provide the information to the member.
 - **If order not yet delivered:** “I was able to successfully track your order. The estimated delivery date is <<date>> for <<list items>>. Your order may come in multiple packages.”
 - **If order has been delivered:** “I was able to successfully track your order. The <<list item(s)>> should have been delivered on <<delivery date>>. Please hold while I conference with a Walmart Customer Service representative for further assistance.” Continue to Step 4.
 - **If unable to locate order:** “I apologize, I am not able to track the order myself. Please hold while I connect with a Walmart Customer Service representative for further assistance.” Continue to Step 4.
4. Conference with Walmart Customer Service to further research the order. See [Transfers](#).
 - If Walmart is unable to locate the order, but the transaction is in CRM: forward the information to a supervisor.

Disposition: Order Inquiries>Order Status

6.7. CLOSE AN ORDER

OVERVIEW

Process to close a mail or online order in CRM.

KEY INFORMATION

- Reasons a mail/online order needs to be closed:
 - Member requested an order to be cancelled or closed.
 - Order was placed over the phone.

PROCESS

1. Click **Order Activity Log** in CRM.
2. Click **View Order** next to the order in question. The system will advance to the mail/online order screen.
3. Click **Order**.
4. Click **Close Order**. A list of reasons will appear.
5. Click the appropriate reason.
 - **Cancelled Order**: the member requested to cancel their pending mail/online order.
 - **Order completed by phone**: the order was completed over the phone with a CSR instead.
6. Click **Save**.

Disposition: Order Inquiries>Order Status

6.8. PENDING MAIL/ONLINE ORDERS

OVERVIEW

Process to assist members with pending mail or online orders.

KEY INFORMATION

- Pending orders will be displayed on the **Available Balance** tab, and order details are located in the **Order Activity Log**.
- Pending orders may include orders that have not been worked yet or were unable to be completed due to business rules in place for processing these orders.

PROCESS

1. Offer to assist the member with placing the pending order over the phone.
"I see you have an outstanding (mail/online) order that has not been processed yet. Would you like me to process it for you now while I have you on the phone? By placing the order with you on the line, I can make sure that is it fulfilled and can provide you with your order confirmation number."
 - Outstanding mail and online orders will automatically be displayed on the **Available Balance** tab.
 - **If the member would like to place the order over the phone:** Continue to Step 2
 - **If member no longer wants the order:** Close the order. See [Close an Order](#).
2. Click **Order Activity Log**.
3. Click the **View Order** button on the pending order. The system will display the order screen.
4. Obtain and make note of the order and product details from the order form on the right side of the screen.
 - Confirm the items, quantities, and prices with the member.
5. Click the back button to return to the member's profile. A **Confirm Exit** pop up will display asking "Are you sure you want to exit this order session without saving?"
6. Click **Yes**.
7. Process the order as a phone order. See [Basic Order](#).
8. Close the mail or online order. See [Close an Order](#).

Disposition: Order Inquiries>Order Status

6.9. BACKLOG AN ORDER

OVERVIEW

Process to backlog a mail order to be processed in the next benefit period instead of the current one.

KEY INFORMATION

- Backlogging a mail order is used when:
 - A member sent in a mail order too early, and it was intended to be completed in the next benefit period instead of the current one.
 - A member has a pending mail order on file but does not have sufficient benefits to cover the cost of the entire order total.
 - These members typically receive callbacks to discuss the order details, but some members may end up calling back to inquire further.
 - If the member prefers to place the order now and pay the difference with a credit /debit card, see [Mixed Tender](#).

PROCESS

1. Click **Order Activity Log**.
2. Click **View Order** on the pending order to be taken to the order screen.
3. Click the **Order** tab.
4. Select **Unable to Complete**.
5. Select **Spoke with member, order intended for next quarter**.
6. Check the **Submit for Next Quarter** box next to the **Save** button.
7. Click **Save**.
8. Offer to place an order over the phone for any additional items to use the remainder of the member's current benefits.

Disposition: Order Inquiries>Backlog an Order

7.0. PRODUCT/CATALOG INQUIRIES

7.1. PRODUCT/CATALOG SEARCH

OVERVIEW

Process to search for and identify eligible items.

KEY INFORMATION

- Only eligible items can be purchased with the member's Healthy Benefits Plus card.
- Eligible items are determined by the member's health plan, and can be found in:
 - The member's catalog (benefit program specific) or welcome letter
 - The member's web portal/mobile app
 - CRM (see below)
 - Program Details Pop-Up: pop-up window that appears upon entering a member's account. **Eligible Items** line will indicate categories of items available on the member's plan. Example: A member with OTC benefits will say "OTC" versus someone with Nutrition benefits will reference food items (all foods or healthy foods).

PROCESS

Categories covered by Nutrition benefit

- Click **Details** on the Nutrition benefit tile from the **Available Balance** screen in CRM. The **Details** pop-up will display.
- Read the list of eligible items to the member.
 - This pop-up will provide a generic list of what types of items can and cannot be purchased with the Nutrition benefit.

OTC Products/Catalog Search

1. Click **Products/Catalog** in CRM.
 - The **Products** button on the OTC benefit tile in the **Available Balance** screen can be used as a shortcut to the **Products/Catalog** tab.
2. Search for the product using the following options:
 - **Catalog ID:** Search by catalog item ID numbers.
 - **Brand:** Search by brand name (For example, "Equate")
 - **Product:** Search by product name or key words.
 - **Department:** Filter by department category.
3. Uncheck the **Catalog Item** box below the search fields to search for items outside of the member's catalog.
4. Click **Search**. Search results will appear at the bottom of the screen.

PDF Catalog Search

1. Click **Products/Catalog** in CRM.

2. Click **View Catalog**. A separate tab will open with a PDF version of the member's catalog.
 - **To search for a specific item:** press **ctrl + f** on your keyboard. This is a keyboard shortcut that will allow you to search by key words within the PDF.
 - **To locate a specific page:** Scroll through the document.

Disposition: General Program Information>Eligible Products

7.2. CATALOG REPLACEMENT

OVERVIEW

Process to send a replacement catalog to a member.

KEY INFORMATION

- Catalog replacements will include new mail order forms with pre-paid envelopes when a member's plan allows ordering OTC products through the mail. Order forms will be pre-populated with the members card number, barcode, name, and address.
 - Mail order forms can also be printed on the Web Portal and Mobile App. See [Web Portal/Mobile App FAQs](#).
- If a member does not recall receiving their welcome packet, use the **What to look for in the mail** section of the CRM Pop-Up to describe what the materials look like.
- If a member is close to their benefit expiration date, depending on their plan, inform them they can:
 - View eligible products on the mobile app and/or web portal.
 - Place an order with you over the phone.

PROCESS

1. Click **Products/Catalog** in the left-hand menu of CRM. The system will advance to a page with a box labeled **Catalog**.
2. Determine if a request has been done within the last 4 weeks by checking the **Last catalog request** field. Was a request submitted in the last 4 weeks?
 - **Yes:** Determine if the catalog was sent via email or mail. This can be determined on the **Communications** tab in CRM.
 - **Email:** *"I see we emailed a digital copy of the catalog to <<email address>>. If you did not receive this catalog, it may have been placed in your Junk or Spam folder by mistake."* Continue to Step 3 if member has checked their Junk/Spam folders and still do not have the catalog.
 - **Mail:** *"I see we requested a new catalog be sent to you on <<date>>. It may take up to 4 weeks to receive. If you have not received the new catalog by <<date>>, please call us back and we will send a new copy to you."*
 - **No:** Continue to Step 3.
3. Determine if the member would like a digital version of the catalog emailed to them or a physical copy mailed to their home.

"Would you like the catalog emailed to you, which you would receive within 15 minutes, or mailed to your home, which may take up to 2-4 weeks to arrive?"

 - **Email:** Continue to **Email Catalog** section.
 - **Mail:** Continue to **Mail Catalog** section.

Email Catalog

1. Click **Email Catalog**. The **Email Catalog** pop up will appear.
2. Verify email address.

- **If email is on file:** *"I have your email address as <<email address>>. Is this the email address you would like the catalog sent to?"*
 - **No:** *"May I have the email address you would like the catalog sent to?"* Enter the email address and verify it back to the member. Continue to Step 3.
 - **Yes:** Continue to Step 3.
 - **If email is not on file:** *"May I have the email address you would like the catalog sent to?"* Enter the email address and verify it back to the member. Continue to Step 3.
 - Click **Cancel** to return to the Catalog screen if the member no longer wants to send the catalog via email.
3. Click **Send**. A confirmation will appear.
 4. Click **OK**. The system will return to the Catalog screen.
 5. Inform the member the request is complete.
"Your request for a catalog to be emailed to you is complete. You should receive your catalog within 15 minutes. You may also shop for items on our web portal, mobile app, or by calling us at <<phone number>>. May I look up any products for you so we can place an order today?"

Mail Catalog

1. Click **Request Catalog**. The **Card/Catalog Replacement Options** pop up box will appear.
2. Select the appropriate option from the list.
 - Ask the member why the card needs replaced if not already understood.

Scenario	Replacement Option	Description
Member requests card only. Previous card was not received or has been lost, misplaced, or stolen.	Request a replacement card	Replaces the member's card and deactivates previous card number. Always offer to place an order prior to replacing the card. The card will need to be activated prior to use.
Member requests card and/or catalog. Previous card is in member's possession or has been destroyed.	Request a catalog (duplicate card provided no activation required)	Replaces the member's catalog and sends a duplicate card. The card will not need to be activated prior to use and will be the same card number as they currently have.
Member requests card and catalog. Previous card was not received or has been lost, misplaced, or stolen.	Request a replacement card and catalog	Replaces the member's catalog and card and deactivates previous card number. Always offer to place an order prior to replacing the card. The card will need to be activated prior to use.

3. Select where the member would like the catalog to be sent.
"Would you like this mailed to <<address on file>>?"
 - **Yes:** select radial button for **Permanent address on file**.
 - **No:** *"May I have the address you would like your catalog mailed to?"* Select the appropriate radial button and enter the address in the required fields. Verify back the address for accuracy.

- **Alternate address:** use when the member has an address change that has not updated to CRM or if the member has a secondary address they frequently use. Alternate addresses will be saved in the replacement screen for future use.
 - **One time address:** use when the member would like their materials mailed to a one-time temporary address. One-time addresses will not be saved in the system.
 - **Note:** The **Address Two** field only needs to be filled out if the member has a unit #, building #, or apartment #.
4. Click **Replace**. A confirmation will appear.
 5. Click **OK**. The system will return to the Catalog screen.
 6. Inform the member the request has been submitted.

Replacement Option	Timing	Suggested Script
Request a replacement card	1-3 weeks	<i>"Your request for a new card has been submitted. You should receive your it within 1-3 weeks. Your new card will need to be activated prior to using your benefits. Is there anything else I may assist you with today?"</i>
Request a catalog (duplicate card provided; no activation required)	2-4 weeks	<i>"Your request for a catalog to be mailed to you is complete. You should receive your new catalog within 2-4 weeks. You can shop on the web portal, mobile app, or by calling Healthy Benefits Plus Member Support. May I look up any products for you so we can place an order today?"</i>
Request a replacement card and catalog	2-4 weeks	<i>"Your request for a new card and catalog has been submitted. You should receive them within 2-4 weeks. Your new card will need to be activated prior to using your benefits. Is there anything else I may assist you with today?"</i>

Request Catalog in Another Language

1. Check the **Preferred Language** listed in the **Cardholder Information** tab in CRM.
 - **Language is the same as what member is requesting:** Submit catalog request as normal.
 - **Language is different than what member is requesting:** Continue to Step 2.
2. Determine if requested language is available.
 - English or Spanish: Continue to Step 3.
 - Mandarin (UHC Only): Continue to step 3.
 - Any other language: *"I'm very sorry we do not have a catalog available in <<language>>. I can help you find eligible products. Are there specific items you are looking for?"*
3. Submit a Request Support Ticket.
 - Click **Request Support**.
 - Click **Add New Ticket**.
 - Complete the following fields

- **Preferred Contact Method:** No Contact Needed
- **Issue Type:** Member Account
- **Reason:** Catalog Request Alternate Language
- **Level:** Level 1
- **Comments:** Copy and paste the template below into the comments field and add the necessary details.

Member's current preferred language:

Member's requested language:

4. Inform the member the request is submitted.
"I have submitted your request. You should receive your new catalog in 2-4 weeks."

Disposition: Catalog Inquiries>Catalog Request

7.3. CATALOG FAQs

OVERVIEW

Frequently asked questions (FAQs) to resolve concerns with the member's catalog.

KEY INFORMATION

- Not all Healthy Benefits Plus programs provide catalogs.

PROCESS

General Inquiries

- **How long does it take to receive a catalog in the mail?**
 - *"You will receive your catalog in the mail within 2-4 weeks."*
 - See [Catalog Replacement](#) for instructions on how to request a catalog replacement.
- **How long does it take to receive a catalog by email?**
 - *"It should only take about 10-15 minutes to receive your PDF catalog via email. If you do not receive it, try checking your spam/junk mail folders to see if it may have gone there by mistake."*
 - See [Catalog Replacement](#) for instructions on how to email a PDF version of the catalog.
- **Where can I find other eligible items that are not listed in my catalog?**
 - *"You can also find eligible items that may not be listed in your catalog by logging into your web portal, or by calling us here at Healthy Benefits Plus Member Support. We'd be happy to help you search for any additional items."*
 - See [Product/Catalog Search](#).

Price/Item Change

- Why is the price different than what I see in the catalog?
 - *"I'm sorry, pricing and item availability are subject to change throughout the year. However, prices are always subject to change. I'd be happy to help you search for an alternate product that costs less."*
 - See [Not Available for Purchase](#) to locate alternate/substitute items.

Catalog Frequency

- Will I get a new catalog each month/quarter?
 - *"Your health plan will provide you with a catalog at the start of your program that will be good for the entire year."*

7.4. REPORT PRODUCT ISSUE

OVERVIEW

Process to report when a product is not available to purchase.

PROCESS

1. Acknowledge the member's feelings/situation.
 - **Substitute or Alternative items available:** "I'm sorry. The <<item>> is not available to purchase. It looks like we do have the <<item>> available. Would you like me to add it to your order instead?" See [Not Available for Purchase](#).
 - **Substitute or Alternative items not available:** "I'm sorry the <<item is not available to purchase. I would be happy to search for something similar." See [Not Available for Purchase](#).
2. Click **Report Product Issue** from the item's **Product Details** page. The **Report Product Issue** pop up will appear with the **Product** and **Retailer** pre-populated.
3. Select the appropriate option from the **Status** drop down menu.

Status	Definition
Third Party Seller	Walmart.com is not listed as a seller of the item.
Not Available for Shipping	Delivery is not available for the item on Walmart.com.
Out of Stock	Item is out of stock in CRM or Walmart.com
Can't Find Item	Unable to locate item on Walmart.com.
Not Covered	Item is not covered by program.
Other	Any other reason the item is not able to be purchased.

4. Select **Walmart.com** from the Retailer drop down menu.
5. Enter the reason for reporting a product issue in the **Comments** field when applicable.
 - You must enter a reason if using status of Other.
6. Click **Submit**. The system will return to the **Product Details** page.

Disposition: Other>Other

8.0. ACCOUNT INQUIRIES

8.1. BALANCE INQUIRY

OVERVIEW

Process to provide balance information.

KEY INFORMATION

- The pop-up window that appears upon entering an account in CRM contains program details such as deposit and expiration frequency. This information is also listed in further detail in the **Available Balance** screen.
- Benefit tiles may include a **Benefits** shortcut button that will open a new pop-up window with additional benefit information such as effective start and end dates, benefit amounts, frequency, and expiration.

PROCESS

1. Click **Available Balance**. The system will advance to the **Available Balance** screen.
2. Locate the benefit tile the caller is requesting the balance for.
3. Provide the appropriate information.
 - **OTC and Nutrition:** *"For your <<benefit type>> you have an available balance of <<amount>> which will expire on <<date>>. Your next benefit of <<amount>> will be deposited on <<date>>"*
 - **Rewards:** *"For your rewards you have an available balance of <<amount>> which will expire on <<date>>."*
 - **Healthy Savings:** *"I can give you the top ten offers that are currently available. You are also able to view all available offers on the web portal or mobile app."*
 - Click the **Healthy Savings Offers** to view the top ten offers.

Disposition: General Program Information>Benefit Balance Inquiry

8.2. EXPIRED BENEFIT DISPUTES

OVERVIEW

Process to determine if an expired benefit dispute is warranted and how to respond.

KEY INFORMATION

- Extension of expired benefits is based on the member's health insurance provider. The following are the only situations an expired benefit dispute may be filed for a member.

Humana UnitedHealthcare (UHC)	All Other Clients
<ul style="list-style-type: none"> • Member's credit for a refund was not reflected on the account. • Member submitted a mail or online order at the end of the quarter, and the order was not processed until the new quarter. This resulted in the order being placed with their new quarter benefits instead of the previous quarter benefits. 	<ul style="list-style-type: none"> • Member's credit for a refund was not reflected on the account. • Member submitted a mail or online order at the end of the quarter, and the order was not processed until the new quarter. This resulted in the order being placed with their new quarter benefits instead of the previous quarter benefits. • Member was in the hospital, medical or family emergencies.

PROCESS

Non-Qualifying Benefit Extension Request

1. Inform the member we are unable to request a benefit extension.
 - **Member has an available balance:** *"I'm sorry to hear your previous benefits have expired. Your health insurance provider is not authorizing us to issue a benefit extension at this time. The good news is you currently have an available balance of <<amount>> that won't expire until <<expiration date>>."*
 - **Member does not have an available balance:** *"I'm sorry to hear your previous benefits have expired. Your health insurance provider is not authorizing us to issue a benefit extension at this time. The good news is you will receive your next benefit distribution of <<amount>> on <<deposit date>>. They won't expire until <<expiration date>>."*

Qualifying Benefit Extension Request

1. Inform the member a request will be submitted.

"I will submit a ticket to have your request researched. Do you have a preferred email address?"

 - **Member has an email address:**

"Great, thank you for providing that information. Let me get that ticket submitted for you, and someone will be sending you an email once your request has been researched."
 - **Member does not have an email address:**

“We can have someone reach out to you by phone. What is your preferred phone number?” (Member provides preferred phone number) “Great, thank you for providing that information. Let me get that ticket submitted for you, and someone will call you once your request has been researched.”

2. Submit a Request Support Ticket.

- Click **Request Support**.
- Click **Add New Ticket**.
- Complete the following fields:
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member’s preferred email address if applicable
 - **Phone:** Member’s preferred phone number if applicable
 - **Issue Type:** Member Account
 - **Reason:** Expired Benefit Dispute
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field and add the necessary details.

Reason:

Additional Details:

3. Inform the member the request is submitted.

“I have forwarded your request to a specialist who will research your concern and get back to you within 3 to 5 business days.”

- **IMPORTANT:** Submitting a ticket **does not** guarantee the member will receive an extension. Do not promise the member the request will be granted.

Member Insists Benefits be Extended

1. Offer to transfer the member to their health insurance provider.

“If you have additional questions about this, you are asked to contact your health insurance provider. I would be happy to transfer you to them now.”

Health Care Insurance Rep Asks for Benefits to be Extended

1. Inform the representative we are unable to complete the request.

- **UHC:** *“The benefits associated with your current plan have an expiration timeframe which has been filed and approved in accordance with Medicare regulations. To stay compliant, we are not able to extend benefits beyond the filed benefit frequency.”*
- **Non-UHC:** *“We have been directed by <<health plan provider>> leadership to not extend benefits at this time. Please contact your internal team to discuss further.”*

Disposition: General Program Information>Benefit Balance Inquiry

8.3. INACTIVE-EXPIRED

OVERVIEW

Process to handle an inactive-expired account.

KEY INFORMATION

- An Inactive-Expired account is when an account has a Household Status of Inactive-Expired.
- Accounts may change to this status if the member has changed health plan providers, or if they are no longer part of the program.

PROCESS

1. Research the system to see if member has an active account.
 - **Member has a second active account:** Proceed to assist as usual.
 - **Member does not have a second active account:** Proceed to Step 2.
2. Ask Probing Questions.
 - “Have you recently changed health plans?”
 - “Do you have your health plan member ID card?”
 - **Has card and changed plan:** Continue to Step 3.
 - **Has card and did not change plan:** Continue to Step 3.
 - **Does not have card and changed plan:** *“I apologize for the inconvenience. Please contact your health plan provider directly by calling the Customer Service number on the back of your health plan member ID card.”* Close call and complete call wrap up.
 - **Does not have card and did not change plan:** *“I do have a phone number for the expired account. I can conference with them for assistance. If they are not able to assist, you will need to call the phone number on the back of your health plan member ID card.”* Continue to Step 4.
3. Offer to transfer to the member’s health plan provider.
“I can connect with your health plan provider to see what benefits you are enrolled in. May I have the phone number from the back of your member ID card?”
4. Conference with health plan provider. See [Transfer](#)
 - Ask the health plan provider representative probing questions:
 - *“Is the member active in your system?”*
 - **Member is not active:** Release the call to the health plan representative for further assistance.
 - *“Is Solutran the member’s benefit provider?”*
 - **Solutran is not the benefit provider:** Release the call to the health plan representative for further assistance.
 - *“What is the effective start date of the plan?”*
 - **If the health plan can confirm all of the above but the member is still Inactive-Expired in CRM:** Continue to Step 5.
5. Submit a Request Support Ticket.
 - Click **Request Support**.
 - Click **Add New Ticket**.

- Complete the following fields
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member's preferred email address if applicable
 - **Phone:** Member's preferred phone number if applicable
 - **Issue Type:** Member Account
 - **Reason:** Inactive-Expired Account
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field and add the necessary details.

Member does not have an active account in CRM. Health plan provider confirmed active status and Solutran is the benefit provider.

Health Insurance Member ID:

Effective Start Date of Plan:

Additional Details:

6. Inform the member the request is submitted.
"I have forwarded your request to a specialist who will get back to you within 3 to 5 business days."

Disposition: Card Inquiries>Card Status

8.4. EDIT MEMBER DEMOGRAPHICS

OVERVIEW

Process to update a member's demographic information.

KEY INFORMATION

- It is only possible to update a member's email address and preferred phone number in CRM. For any other changes, the member must be transferred to the health insurance provider.
 - It takes 7-10 business days for address changes to reflect in the member's CRM account.
- The **Cardholder Information** screen stores member demographic information such as:
 - First and Last Name
 - Address
 - Program Member ID
 - Date of Birth
 - Gender
 - Username/Login (the member's email address)
 - Phone
 - Preferred Phone
 - Preferred Language
 - Authorized Representative (if available)

PROCESS

1. Click **Cardholder Information**. The system will advance to the **Member Demographics** screen.
2. Click Edit in the lower right-hand corner of the **Member Demographics** box.
3. Update the member's email address in the **Username/Login** field.
 - If the member does not have an email address on file: Do not add an email address. Encourage the member to register their card online. See [How to Register](#).
 - Updating or adding a Preferred Phone – See [Preferred Phone Number](#)
4. Click **Save Changes**.

Address Change Not Reflecting in CRM

1. Contact health plan provider. See [Transfers](#).
 - Verify if/when the address was updated in their system.
 - **Less than 10 business days:** Explain to member and continue
 - **Over 10 business days:** Continue to Step 2.
 - **Not updated:** Close the call with the member and complete transfer to health plan representative.
2. Submit a Request Support Ticket.
 - Click **Request Support**.
 - Click **Add New Ticket**.
 - Complete the following fields
 - **Preferred Contact Method:** No Contact Needed

- **Issue Type:** Member Account
- **Reason:** Address change not reflecting in CRM – verified with insurance
- **Level:** Level 1
- **Comments:** Copy and paste the template below into the comments field and add the necessary details.

New Address:

Date Insurance Provider Updated Address:

3. Inform the member the request is submitted.

“I have forwarded your request to update your address. This should be resolved within 3 to 5 business days.”

Disposition: Cardholder Information>Email Address/Preferred Phone Number Update
Cardholder Information>Demographic Update with Health Plan

8.5. RESET PASSWORD

OVERVIEW

Process to reset a member's web portal/mobile app password.

KEY INFORMATION

- See [Forgot Password](#) if the member would like to reset the password themselves.

PROCESS

1. Click **Communications**. The system will advance to a screen with **Member Details** at the top.
2. Verify the email address located in the **Login** field.
"I have your email address as <<email address>>. Is that correct?"
"Would you please verify the email address associated with the account?"
 - If the email address is incorrect or needs to be updated, see [Edit Member Demographics](#).
3. Click **Forgot Password** next to the **Password field**. A pop-up screen will appear.
4. Click The appropriate option:
 - **Forgot Password Email:** Sends a password to the member's email address.
 - Click **Forgot Password**.
 - Click **Yes, send email**.
 - "A temporary password has been sent to your email address. Use your username and the temporary password to log into your account. The password is case-sensitive, so I recommend copying and pasting the temporary password instead of manually typing it. After logging in, you will be prompted to create a new password of your choosing. Would you like to stay on the line until you get your password reset?"
 - Yes: Stay on the line and assist the member as needed.
 - No: Close the call.
 - **Manual Reset:** Change and provide the member with a temporary password.
 - Click **Manual Reset**.
 - Enter a new temporary password.
 - Inform the member of the temporary password.
 - Click **Reset Password**.
 - "Your new temporary password is <<password>>. Use your username and this password to log into your account. After logging in, you will be prompted to create a new password of your choosing. Would you like to stay on the line until you get your password reset?"
 - Yes: Stay on the line and assist the member as needed.
 - No: Close the call.

Password Reset Unsuccessful

1. Inform the member a request will be submitted.
"I will submit a ticket for a specialist to assist you. Do you have a preferred email address?"
 - **Member has an email address:**
"Great, thank you for providing that information. Let me get that ticket submitted for you, and someone will be sending you an email once your request has been researched."
 - **Member does not have an email address:**

“We can have someone reach out to you by phone. What is your preferred phone number?” (Member provides preferred phone number) “Great, thank you for providing that information. Let me get that ticket submitted for you, and someone will call you once your request has been researched.”

2. Submit a Request Support Ticket.

- Click **Request Support**.
- Click **Add New Ticket**.
- Complete the following fields
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member’s preferred email address if applicable
 - **Phone:** Member’s preferred phone number if applicable
 - **Issue Type:** App/Website Support
 - **Reason:** Password reset unsuccessful
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field.

Manual password reset unsuccessful. Additional help needed.

3. Inform the member the request is submitted.

“I have forwarded your request to a specialist who will get back to you within 3 to 5 business days.”

Disposition: Portal/Mobile App Support>Password Assistance

8.6. EDIT PUSH NOTIFICATIONS AND EMAIL SETTINGS

OVERVIEW

Process to update a member's email and push notification settings.

KEY INFORMATION

- See [Push Notifications and Email Settings](#) to walk a member through updating push notifications and email settings on the website or mobile app.

PROCESS

1. Click **Communications**. The system will advance to a screen with **Member Details** at the top.
2. Locate the Notifications box under Member Details.
3. Determine what the member would like to update.
 - **Push Notifications:** Notifications sent to the member's mobile phone via text messaging.
 - **Transactions:** Notifies the cardholder how much is saved at the store after each visit.
 - **New Offer Available:** Notifies the cardholder when new benefits are added to the account.
 - **Offer Expiring:** Notifies the cardholder when offers/benefits are about to expire.
 - **Email Settings:** Notifications sent to the member's email address.
 - **Offer Expiring:** Email to cardholder when offers/benefits are about to expire.
 - **News:** Email newsletter to the cardholder (every month or so) regarding special offers, extra savings, and new retailers and brands.
 - **New Offer Available:** Email to the cardholder when new benefits are added to their account.
4. Update the notification settings requested by the cardholder:
 - Click the checkbox to the right of the notification to change the setting.
 - **If check box is blank:** Member will not receive notifications
 - **If check box is blue with a white check:** Member will receive notifications.

Disposition: Portal/Mobile App Support>General Support

8.7. STORE LOCATOR

OVERVIEW

Process to locate participating retailers for a member.

KEY INFORMATION

- Check the member's program details pop-up to confirm if they can shop in-store.
- Store Locator may be accessed in two ways.
 - The **Stores** button in the appropriate benefit tile on the **Available Balance** screen.
 - The **Store Locator** tab

PROCESS

1. Click **Store Locator**. The system will advance to the **Store Locator** screen.
 - The **Stores** button in the appropriate benefit tile on the **Available Balance** screen also accesses the **Store Locator** screen.
2. Check the **Zip Code** field to be sure it is set to the member's location.
3. Select applicable filters as necessary.
 - **Benefit Type**: Allows searching by the type of benefit such as OTC or food.
 - **Store**: Allows searching for a specific store name.
4. Click **Search**. The map will update to reflect results for the search criteria.
 - Red pins on the map below the search fields will indicate participating retailers.
5. Click a pin. Store details will pop up in a white box.
 - Repeat for each store as necessary.
 - Click the + and – buttons on the lower right-hand corner of the map to zoom in and out.
6. Provide the member with store details: store name, street name, and city.
 - Example: "There is a Walmart on 5th street in Plymouth."

Disposition: General Program Information>Store Locations

8.8. SUSPECTED FRAUD

OVERVIEW

Process to identify and report suspected fraud.

KEY INFORMATION

- Suspected Fraud is any suspected fraudulent activity on a member's account that needs further investigation.
 - Example: A member was charged for an order they did not place.

PROCESS

1. Research the order and ask probing questions.
 - Research:
 - Locate the order in the **Transaction Activity** tab of CRM.
 - If the order was placed via phone, read through previous comments in the Contact History.
 - Check the Order Activity Log to determine if this was a mail or online order.
 - Ask probing questions:
 - *"Do you have your Healthy Benefits Plus card in your possession?"*
 - *"Did you lose your card?"*
 - *"Was your card stolen?"*
 - *"Have you ever received your card?"*
 - *"Have you shared the card number with another person/family member?"*
 - *"Is it possible a friend or family member placed the order on your behalf?"*
 - *"How did you discover the suspected fraudulent activity on your account?"*
 - *"Did you receive an email notification showing the order was sent to a different name/address?"*
 - **If able to confirm the origin of the order:** Continue to assist the member as usual.
 - **If unable to confirm origin of the order:** Does member have possession of card?
 - **Yes:** *"Would you like me to send a replacement card with a new card number? This will deactivate your current card number."*
 - **Yes:** Replace card (see [Card Replacement](#)) then continue to Step 2.
 - **No:** Continue to Step 2
 - **No:** *"I will send you a card replacement with a new card number. This will deactivate your current card number."*
 - Replace card (see [Card Replacement](#)) then continue to Step 2.
2. Submit a Request Support Ticket.
 - Click **Request Support**.
 - Click **Add New Ticket**.
 - Complete the following fields
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member's preferred email address if applicable
 - **Phone:** Member's preferred phone number if applicable
 - **Issue Type:** Orders/Purchases
 - **Reason:** Suspected Fraud – Needs Investigation
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field and add the necessary details.

Possible Fraud.
Order Number:
Date of Transaction:
Total Order Amount:
Additional Details:

3. Inform the member the request is submitted.
"I have forwarded your request to a specialist who will get back to you within 3 to 5 business days."

Disposition: Other>Other

8.9. MULTIPLE ACTIVE ACCOUNTS

OVERVIEW

Process to report when a member has multiple active accounts listed in CRM.

PROCESS

1. Search for the member by first and last name and zip code to confirm two active accounts are listed.
 - Yes: Continue to Step 2.
 - No: Continue to assist the member as usual.
2. Submit a Request Support Ticket.
 - Click **Request Support**.
 - Click **Add New Ticket**.
 - Complete the following fields
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member's preferred email address if applicable
 - **Phone:** Member's preferred phone number if applicable
 - **Issue Type:** Member Account
 - **Reason:** Multiple Active Accounts
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field and add the necessary details.

The member has two active accounts in CRM.

Active Card Number 1:

Active Card Number 2:

3. Inform the member the request is submitted.
"I have forwarded your request to a specialist who will get back to you within 3 to 5 business days."

Disposition: Other>Other

8.10. GENERAL MEMBER FEEDBACK

OVERVIEW

Process to document any general feedback from a member.

KEY INFORMATION

- Examples of general feedback:
 - Member is requesting a product to be added as an eligible product.
 - Member is requesting a store to be added as an eligible store.
 - Member is giving feedback about the program in general.
 - Member is giving constructive feedback.
 - Member is giving feedback regarding the app.
- If a member has feedback (positive or negative) regarding a CSR they spoke with, share the feedback with a supervisor. The supervisor will forward to the Solutran team via email. Do not complete a request support ticket.

PROCESS

1. Submit a Request Support Ticket.
 - Click **Request Support**
 - Click **Add New Ticket**
 - Complete the following fields
 - **Preferred Contact Method:** No Contact Needed
 - **Issue Type:** General Feedback – No Contact Needed
 - **Reason:** Select the appropriate reason.
 - Add Eligible Product
 - Add Eligible Store
 - Delivery Feedback
 - Tax Feedback
 - Price Discrepancy
 - Web Portal/Mobile App Feedback
 - General Program Feedback
 - **Level:** Level 1
 - **Comments:** Use the appropriate template below

Add Eligible Product

Request to add an eligible product.

Product Name:

Add Eligible Store

Request to add eligible store.

Store Name:

Store Address:

Delivery Feedback

Feedback regarding delivery of product(s).

Delivery Service:

Details of Feedback:

Tax Feedback

Feedback regarding taxes.

Details of feedback:

Price Discrepancy

Price discrepancy.

Product Name:

Product ID:

Catalog Price:

Website/Store Price:

Website/Store Name:

Web Portal/Mobile App

Web Portal/Mobile App feedback.

Apple or Android:

Web Portal or Mobile App:

Details of Feedback:

General Program Feedback

General Program Feedback.

Details of Feedback:

2. The member will not be contacted. If the member asks who will contact them:

"I can assure you I have documented the information and it will be shared with the appropriate teams."

- If the member insists on someone calling them back, transfer the call to a supervisor for assistance.

9.0. IN-STORE SUPPORT

9.1. CARD WILL NOT SCAN

OVERVIEW

Process to troubleshoot when a member's card will not scan in-store.

KEY INFORMATION

- Always check a member's CRM profile to verify benefits are available and can be used to shop in-store.
- Members should hand the card to the cashier to be scanned at checkout.

PROCESS

1. Research account and ask probing questions.
 - Make sure the member can shop in-store with their benefit.
 - Is the store a participating retailer?
"Where were you trying to shop?"
 - Use the [Store Locator](#) to verify the store is a participating retailer.
 - Confirm the member is using the correct card.
"Can you confirm the last 4-digits of your card number?"
 - Is the member's household status is active?
 - If the account is inactive-expired, see [Inactive-Expired](#).
 - *"How were you using the card at checkout?"* (Scanned, manually keyed in, etc.)
 - *"If scanning the card did not work, try manually keying in the card number."* See [OTC and Nutrition Card Store Processing](#).
 - Were the items approved products?
"What products were you trying to purchase?"
2. Offer to place an order over the phone (if their plan allows phone orders). See [Basic Order](#), or provide the member with other options for shopping based on their plan.
3. Submit a Request Support Ticket, regardless of if the issue was resolved.
 - Click **Request Support**.
 - Click **Add New Ticket**.
 - Complete the following fields
 - **Preferred Contact Method:** No Contact Needed
 - **Issue Type:** In-Store Support
 - **Reason:** Card didn't scan
 - Fill in the **Store**, **Store Location**, and **Store Zip** fields.
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field and add the necessary details.

Member is active and is using most recent HBP card.

Description of Issue:

4. The member will not be contacted. If the member asks who will contact them:
"I can assure you I have documented the information and it will be shared with the appropriate teams to provide additional training to the store."
 - If the member insists on someone calling them back, transfer the call to a supervisor for assistance.

Disposition: Other>Store Support

9.2. CASHIER WOULD NOT ACCEPT CARD

OVERVIEW

Process to troubleshoot when a member's card will not scan in-store.

KEY INFORMATION

- Always check a member's CRM profile to verify benefits are available and can be used to shop in-store.
- Members should hand the card to the cashier to be scanned at checkout.

PROCESS

1. Research account and ask probing questions.
 - Make sure the member can shop in-store with their benefit
 - Is the store a participating retailer?
"Where were you trying to shop?"
 - Use the [Store Locator](#) to verify the store is a participating retailer.
 - Confirm the member is using the correct card.
"Can you confirm the last 4-digits of your card number?"
 - Is the member's household status active?
 - If the account is inactive-expired, see [Inactive-Expired](#).
 - Were the items approved products?
"What products were you trying to purchase?"
 - *"Did the cashier try using the card and it didn't work?"* (Was the card scanned, manually keyed in, etc.)
 - *"If scanning the card did not work, try manually keying in the card number."* See [OTC and Nutrition Card Store Processing](#).
 - *"Did the cashier say they would not take the card?"*
2. Offer to place an order over the phone (if their plan allows phone orders). See [Basic Order](#). Or, provide the member with other options for shopping based on their plan.
3. Submit a Request Support Ticket, regardless of whether or not the issue was resolved.
 - Click **Request Support**.
 - Click **Add New Ticket**.
 - Complete the following fields
 - **Preferred Contact Method:** No Contact Needed
 - **Issue Type:** In-Store Support
 - **Reason:** Store/Cashier Wouldn't Accept Card
 - Fill in the **Store**, **Store Location**, and **Store Zip** fields.
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field and add the necessary details.

Description of Issue:

4. The member will not be contacted. If the member asks who will contact them:

"I can assure you I have documented the information and it will be shared with the appropriate teams to provide additional training to the store."

- If the member insists on someone calling them back, transfer the call to a supervisor for assistance.

Disposition: Other>Store Support

9.3. OTC AND NUTRITION CARD STORE PROCESSING

Overview

Chart explaining how to use a Healthy Benefits Plus card at checkout when purchasing in store.

Key Information

- When telling a member how to shop in store, inform them to hand the card to the cashier to scan the barcode.
- Use the chart below to guide a caller through the checkout process when the cashier/member continue to have difficulty scanning the card at checkout.

Retailer	Scan as Tender	Tender Type	Scan Anytime During Transaction	Enter Card Manually
Albertsons			X	X
County Market			X	X
CVS	X	Gift/Money Card		X
HyVee			X	X
Kroger			X	X
Walgreens	X	Debit/Credit Card		
Walmart	X	Debit/Credit Card		X
All Other Retailers			X	X

- **Scan as Tender:** Card is used as a specific tender type (form of payment accepted by retailers) when checking out. All items in the order are scanned by the cashier.
- **Tender Type:** The tender type the store's register uses the card as when checking out at the register.
 - **CVS:** Cashier selects Gift/Money Card then scans card.
 - **Walgreens:** Cashier enters payment then scans card.
 - **Walmart:** Cashier selects Credit/Debit then scans card.
- **Scan Anytime During Transaction:** Card can be scanned at any time during the transaction. Cashier scans the card's barcode during the transaction. Cashier totals the transaction. Benefit is deducted automatically from the transaction.
- **Enter Card Manually:** The card's 17-digit number can be manually entered when checking out. Member must have the card or mobile app with the card number in hand.

Disposition: Other>Store Support

9.4. TRANSACTION DISPUTES

OVERVIEW

Process to handle a member's disputing a transaction.

PROCESS

1. Research:
 - Determine which transaction is in question.
 - Ask the member for a description of what happened.
 - For example, *"Did you scan the card in-store and it said the transaction was voided?"*
 - Check Transaction Activity to verify the member was charged.

2. If the card was charged, submit a Request Support Ticket.
 - Click **Request Support**.
 - Click **Add New Ticket**.
 - Complete the following fields
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member's preferred email address if applicable
 - **Phone:** Member's preferred phone number if applicable
 - **Issue Type:** In-Store Support
 - **Reason:** Transaction Dispute
 - Fill in the **Store**, **Store Location**, and **Store Zip** fields.
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field and add the necessary details.

Date of Transaction:
Transaction ID:
Total Order Amount:
Description of Issue:

4. Inform the member the request is submitted.
"I have forwarded your request to a specialist who will get back to you within 3 to 5 business days."

Disposition: Other>Other

10.0. WEB/MOBILE APP SUPPORT

10.1. DOWNLOAD MOBILE APP

OVERVIEW

Process for a member to download the Healthy Benefits Plus mobile app on the App Store (Apple devices) or Google Play (Android devices).

PROCESS

App Store (Apple devices)

1. Open the App Store on the desired mobile device.
2. Click the **Search** icon in the bottom right-hand corner of the screen. The system will advance to the **Search** screen.
3. Type Healthy Benefits Plus in the search bar.
4. Click **Search**. The system will advance to a screen displaying search results.
5. Click **Get** to the left of the Healthy Benefits Plus app.
6. Wait for app to download.
7. Click **Open** to go to the app once it is fully downloaded or close the App Store and locate the Healthy Benefits Plus icon on your device to open the app.

Google Play (Android devices)

1. Open the Google Play Store on the desired device.
2. Type Healthy Benefits Plus in the search bar at the top of the screen.
3. Click **Healthy Benefits Plus** in the results below the search bar.
4. Click **Install**.
5. Wait for app to install.
6. Click **Open** to go to the app once it is fully installed or close the Google Play Store and locate the Healthy Benefits Plus icon on your device to open the app.

Disposition: Portal/Mobile App Support>General Support

10.2. HOW TO REGISTER

OVERVIEW

Process for how to register a member on the mobile app or web portal.

KEY INFORMATION

- Members only need to register their card once to create an account. This can be done on either the mobile app or the web portal. Once registered on one platform, the member needs only to log in with the same credentials on the other platform.
- Two members cannot share the same email address on the Healthy Benefits Plus web portal or mobile app. This includes members who live in the same household.
- If the member is trying to use the same email address they used on a previous account, remove the email from the old account and have the member complete registration again.

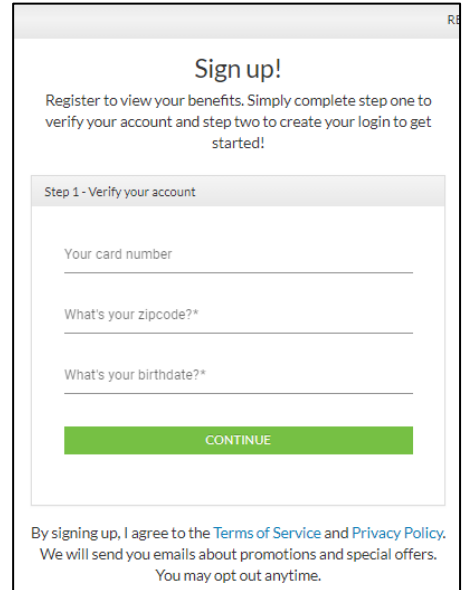
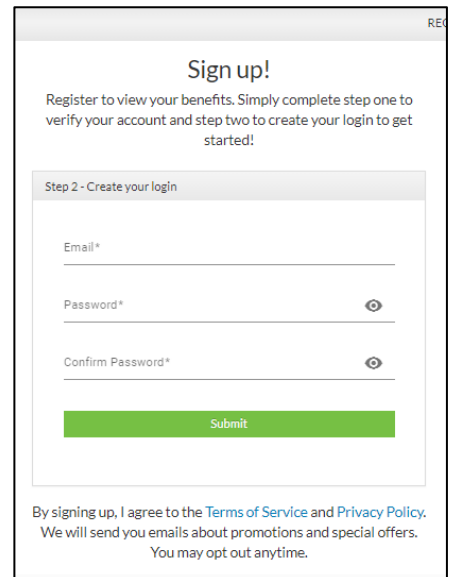
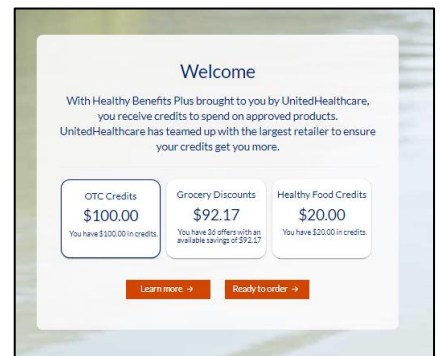
PROCESS

WEB PORTAL

1. Enter the web address <https://healthybenefitsplus.com> in the URL bar.
2. Click **Register** in the upper right-hand corner of the webpage. The website will advance to the **Sign Up!** Screen.
 - Members can also click on **Get Started** on the left-hand side of the screen to access the same page.

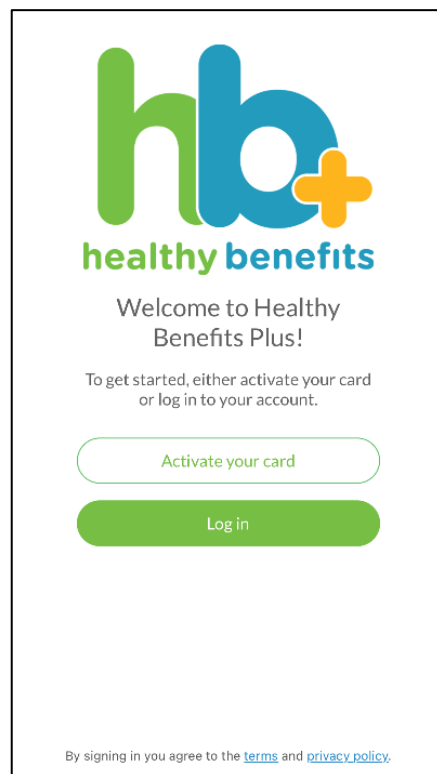


3. Enter the 17-digit number located on the back of the S3 card in the **Your card number** field.
4. Enter zip code used to initially set up their account in the **What's your zipcode?** Field.
 - This is typically the member's home address zip code.
5. Enter the date of birth in the **What's your birthdate?** Field in MM/DD/YYYY format.
6. Click **Continue**. The website will advance to the next Sign Up! Screen requesting an email and password.
 - If the member has previously registered the card, they will receive the message: **An account already exists for this card. Please log in with your username and password.**
7. Enter a valid email address in the **Email** field.
 - Two members cannot share the same email address on the Healthy Benefits Plus web portal, including members who live in the same household.
 - Member does not have an email address: *"You can always sign up for a free email account at gmail.com, yahoo.com, or another free email provider of your choice."*
 - If member has used the email on an inactive account: Remove the email address from the inactive account and have the member try registering their new account again. See [Cardholder Information](#).
8. Enter the same password in the **Password** and **Confirm Password** fields.
 - Passwords must contain.
 - 8-24 characters
 - At least one uppercase letter
 - At least one lowercase letter
 - At least one number
9. Click **Submit**. The website will advance to the Welcome screen. The member is registered and ready to use the web portal.

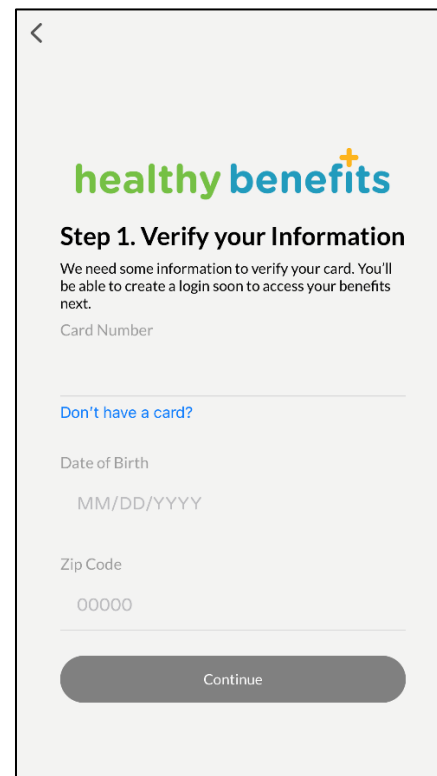




MOBILE APP

1. Open the Healthy Benefits Plus app on the desired device. The app will open in a separate window.
2. Click **Activate your card**. The app will advance to the **Step 1. Verify your Information** screen.



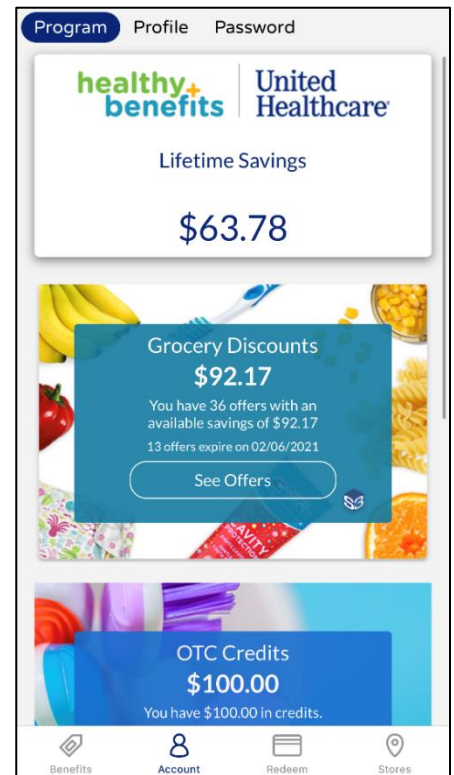
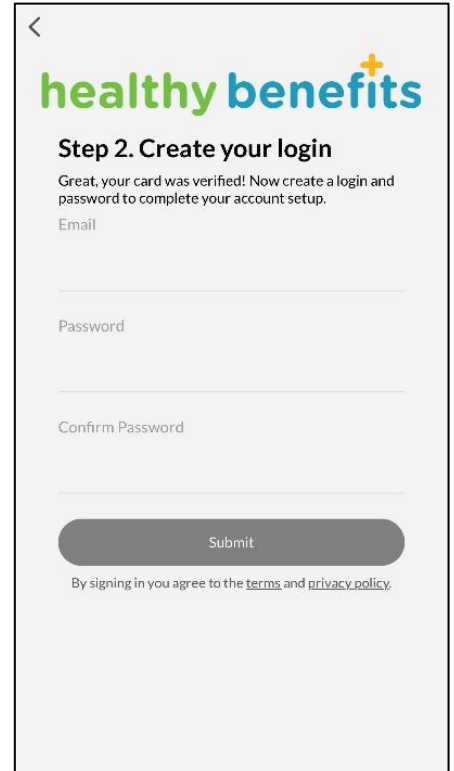
3. Enter the 17-digit card number located on the back of the S3 card in the **Card Number** field.
4. Enter the date of birth in the **Date of Birth** Field in MM/DD/YYYY format.
5. Enter zip code used to initially set up their account in the **Zip Code** Field.
 - This is typically the member’s home address zip code.
6. Click **Continue**. The app will advance to the **Step 2. Create your login** screen.



7. Enter a valid email address in the **Email** field.
 - Two members cannot share the same email address on the Healthy Benefits Plus mobile app, including members who live in the same household.
 - Member does not have an email address: *“You can always sign up for a free email account at gmail.com, yahoo.com, or another free email provider of your choice.”*

8. Enter the same password in the **Password** and **Confirm Password** fields.
 - Passwords must contain.
 - 8-24 characters
 - At least one uppercase letter
 - At least one lowercase letter
 - At least one number

9. Click **Submit**. The app will advance to the **Program** page. The member is registered and ready to use the mobile app.



Unable to Register

1. Inform the member a request will be submitted.

"I will submit a ticket to have your request researched. Do you have a preferred email address?"

- **Member has an email address:**

"Great, thank you for providing that information. Let me get that ticket submitted for you, and someone will be sending you an email once your request has been researched."

- **Member does not have an email address:**

"We can have someone reach out to you by phone. What is your preferred phone number?" (Member provides preferred phone number) *"Great, thank you for providing that information. Let me get that ticket submitted for you, and someone will call you once your request has been researched."*

2. Submit a Request Support Ticket.

- Click **Request Support**.
- Click **Add New Ticket**.
- Complete the following fields
 - **Preferred Contact Method:** Select Phone or Email
 - **Email:** Member's preferred email address if applicable
 - **Phone:** Member's preferred phone number if applicable
 - **Issue Type:** App/Website
 - **Reason:** Unable to Register
 - **Level:** Level 1
 - **Comments:** Copy and paste the template below into the comments field.

Member's card is unable to be registered. Additional help needed.

3. Inform the member the request is submitted.

"I have forwarded your request to a specialist who will get back to you within 3 to 5 business days."

Disposition: Portal/Mobile App Support>Registration Assistance

10.3. LOGIN

OVERVIEW

Process for a member to log into the mobile app or web portal.

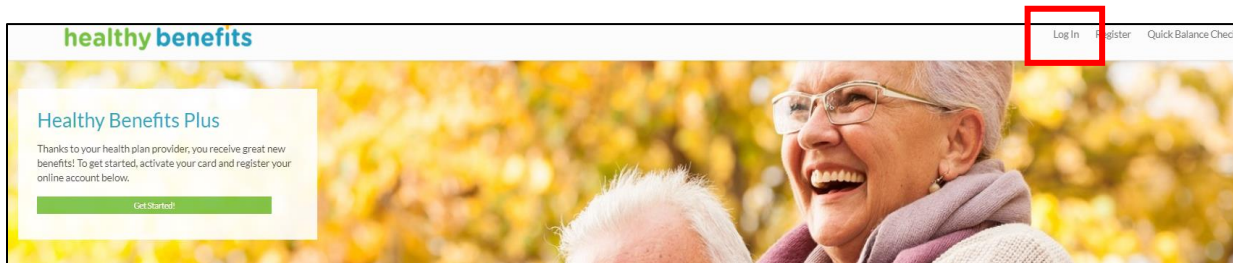
KEY INFORMATION

- Members must first register an account prior to logging in on the web portal or mobile app. See [How to Register](#).

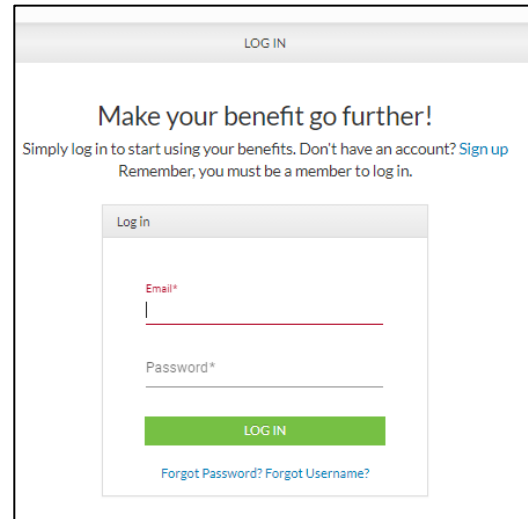
PROCESS

WEB PORTAL

- Open the Healthy Benefits Plus web portal.
- Click **Log In** in the upper right-hand corner of the webpage. The website will advance to the **Log In** Screen.

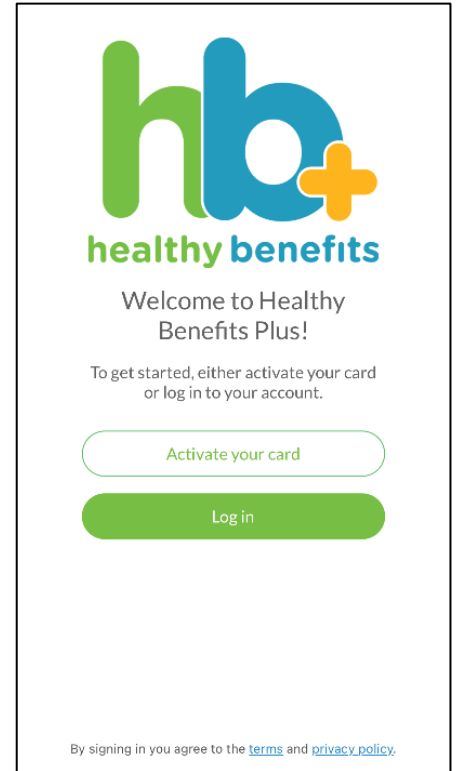


- Enter the email address associated with the account in the **Email** field.
- Enter the password for the account in the **Password** field.
- Click **LOG IN**. The website will advance to the member’s account.



MOBILE APP

1. Open the Healthy Benefits Plus mobile app.
2. Click **Log In**. The app will advance to the **Log In** screen.



3. Enter the email address associated with the account in the **Email** field.
4. Enter the password for the account in the **Password** field.
5. Click **LOG IN**. The app will advance to the **Program** page.



Disposition: Portal/Mobile App Support>General Support

10.4. FORGOT PASSWORD

OVERVIEW

Process for a member to change their password.

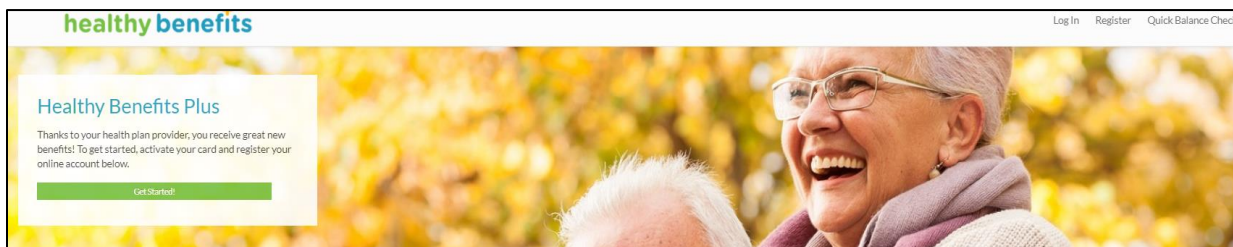
KEY INFORMATION

- Inform the member to check Junk and Spam folders if they do not receive the temporary password email. If an email is still not received, it is likely the email was not associated with the account.
- If member is not able to or does not wish to reset the password see [Reset Password](#).

PROCESS

WEB PORTAL

1. Open the Healthy Benefits Plus web portal.
2. Click **Login** in the top right-hand corner of the screen. The website will advance to the LOG IN screen.



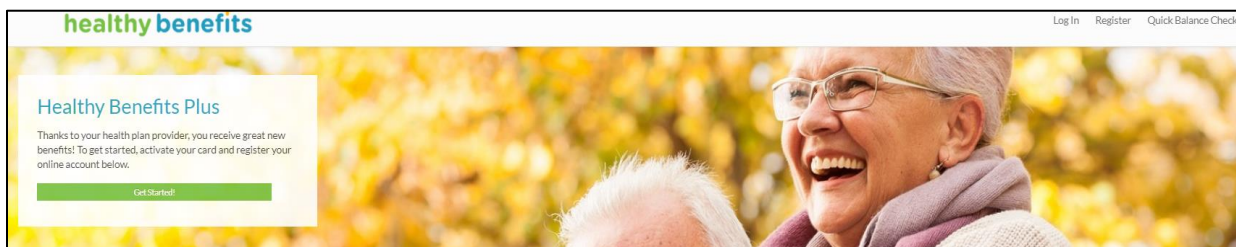
3. Click **Forgot Password?** at the bottom of the screen. The website will advance to a screen requesting the member's email address.

A screenshot of the 'LOG IN' screen. At the top, it says 'LOG IN'. Below that is the heading 'Make your benefit go further!' and the text 'Simply log in to start using your benefits. Don't have an account? [Sign up](#) Remember, you must be a member to log in.' There is a 'Log in' form with two input fields: 'Email*' and 'Password*'. Below the fields is a green button labeled 'LOG IN'. At the bottom of the form, there are links for 'Forgot Password?' and 'Forgot Username?'.

4. Enter the email address associated with the account in the **Please enter your email** field.
5. Click **Submit**. An email will be sent to the member’s email account including a temporary password.

A screenshot of a web form. At the top, there is a red error message that says "Please enter your email*". Below the message is a text input field. At the bottom of the form, there are two buttons: a green "SUBMIT" button and a blue "Cancel" button.

6. Open the email.
 - If email not received:
 - Email is from support @healthybenefits plus.com.
 - Check Junk and Spam folders if they do not receive the temporary password email.
 - Add support@healthybenefitsplus.com to contact list.
 - If an email is still not received, it is likely the email was not associated with the account.
7. Click the link in the email. The Healthy Benefits Plus page will open in a new window.
8. Click **Log In**.

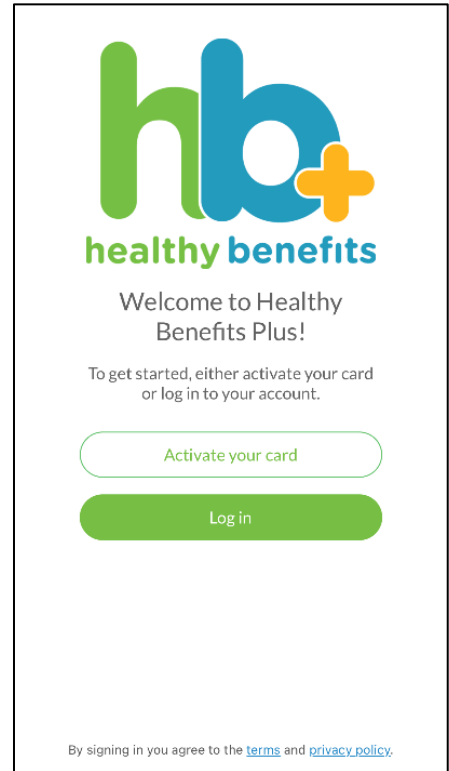


9. Enter the email address associated with the account in the **Email** field.
10. Copy and paste the temporary password from the email to the **Password** field.
11. Follow the screen prompts to enter a new password.

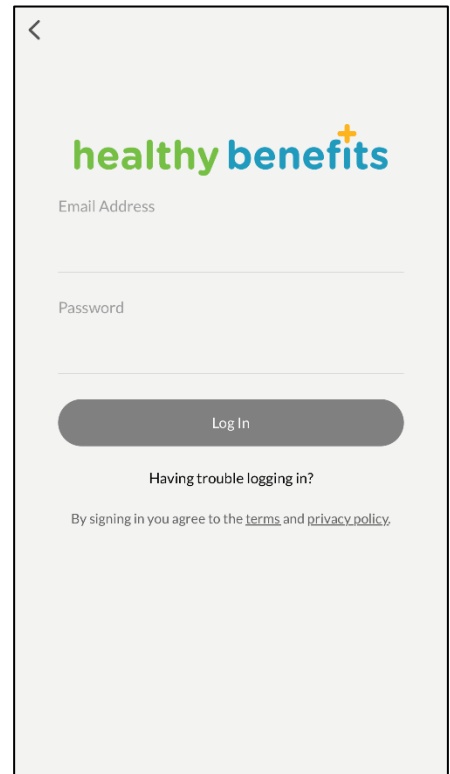
A screenshot of the "LOG IN" page. At the top, it says "LOG IN". Below that is the heading "Make your benefit go further!" followed by the text "Simply log in to start using your benefits. Don't have an account? [Sign up](#) Remember, you must be a member to log in." The main form area is titled "Log in" and contains two input fields: "Email*" and "Password*". Below the fields is a green "LOG IN" button. At the bottom of the form, there are two links: "Forgot Password?" and "Forgot Username?".

MOBILE APP

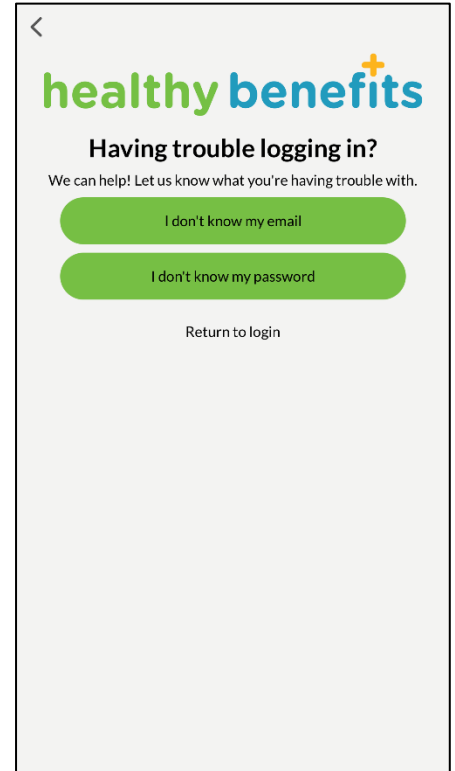
1. Open the Healthy Benefits Plus mobile app.
2. Click **Log in**. The app will advance to the login screen.



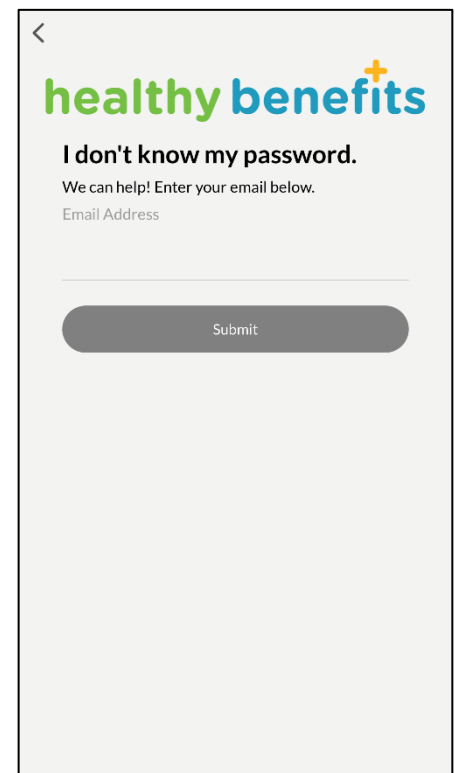
3. Click **Having trouble logging in?** The app will advance to the **Having trouble logging in?** screen.



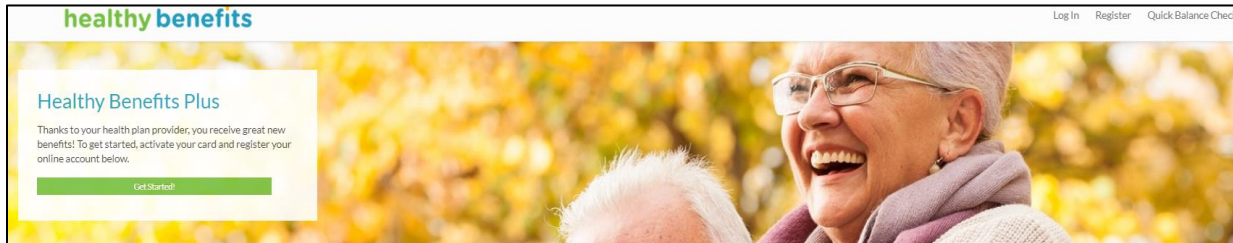
4. Click **I don't know my password**. The App will advance to the **I don't know my password** screen.



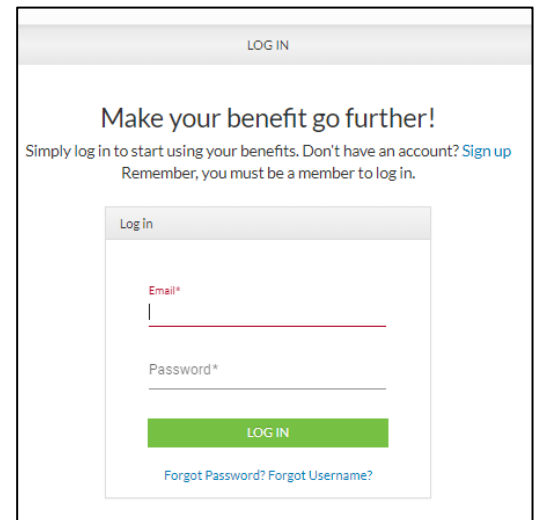
5. Enter the email address associated with the account in the **Email Address** field.
6. Click **Submit**. An email will be sent to the member's email account including a temporary password.



7. Open the email.
8. Click the link in the email. The Healthy Benefits Plus page will open in a new window.
9. Click **Log In**.



10. Enter the email address associated with the account in the **Email** field.
11. Copy and paste the temporary password from the email to the **Password** field.
12. Follow the screen prompts to enter a new password.
13. Open the Healthy Benefits Plus app and login with the new password.



Disposition: Portal/Mobile App Support>Password Assistance

10.5. CHANGE PASSWORD

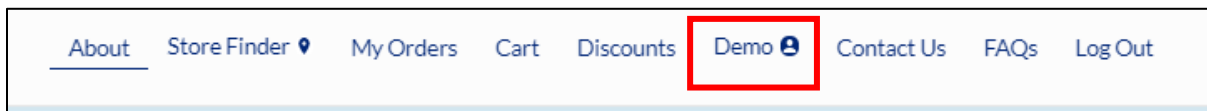
OVERVIEW

Process for a member to change web portal/mobile app password.

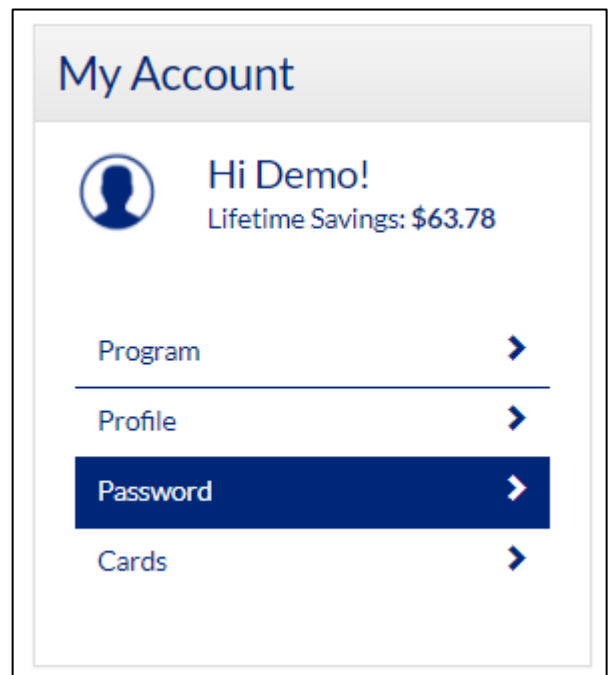
PROCESS

WEB PORTAL

1. Open the Healthy Benefits Plus web portal.
2. Login.
3. Click the member's name at the top of the screen. The website will advance to the **My Account** page.



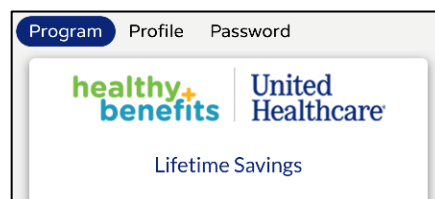
4. Click on **Password**. The website will advance to the **My Password** screen.



5. Enter the current password in the **Old Password** field.
6. Enter the same new password in the **New Password** and **Confirm New Password** fields.
 - Passwords must contain.
 - 8-24 characters
 - At least one uppercase letter
 - At least one lowercase letter
 - At least one number
7. Click **Submit**.

MOBILE APP

1. Open the Healthy Benefits Plus mobile app.
2. Login.
3. Click Password at the top of the screen. The app will advance to the **Password** screen.



4. Enter the current password in the **Current Password** field.
5. Enter the same new password in the **New Password** and **Confirm Password** fields.
 - Passwords must contain.
 - 8-24 characters
 - At least one uppercase letter
 - At least one lowercase letter
 - At least one number
6. Click **Change Password**.

Disposition: Portal/Mobile App Support>Password Assistance

10.6. CHANGE DEMOGRAPHIC INFORMATION

OVERVIEW

Process for a member to change their demographic information.

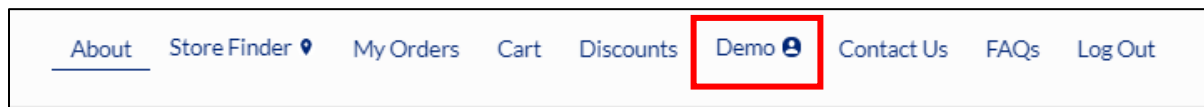
KEY INFORMATION

- Members can change the following demographic information on the web portal or mobile app.
 - First Name
 - Last Name
 - Gender
 - Date of Birth
 - Email
 - Additional Email
 - Household Size
 - Zip Code
- Gender, secondary email address, and household size are optional fields the member does not need to provide.

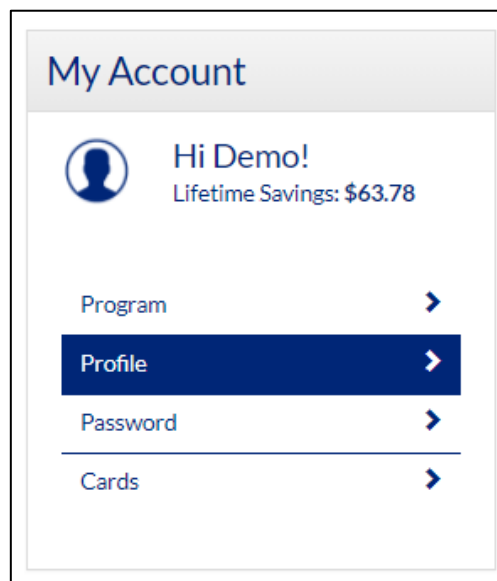
PROCESS

WEB PORTAL

1. Open the Healthy Benefits Plus web portal.
2. Login.
3. Click the member's name at the top of the screen. The website will advance to the **My Account** page.



4. Click on **Profile**. The website will advance to the **My Profile** screen.



5. Enter any changes in the appropriate fields.
6. Click **Save** at the bottom of the screen.

MY PROFILE

First Name: Demo

Last Name: User

Email*: uhc-multi@solutran.com

Additional Email: _____

Gender: Prefer not to say

Date of Birth: 1/1/1900

Household Size: _____

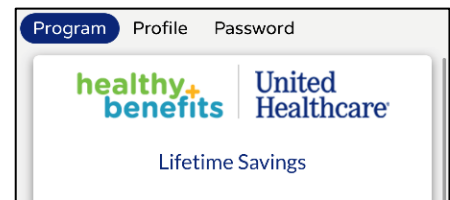
Zip Code*: 55441

* Indicates required field

SAVE

MOBILE APP

1. Open the Healthy Benefits Plus mobile app.
2. Login.
3. Click **Profile** at the top of the screen. The app will advance to the **Profile** screen.



4. Enter any changes in the appropriate fields.
 - Scroll down to view the additional fields.
5. Click **Update Profile** at the bottom of the screen.

Program Profile Password

First Name: Demo

Last Name: User

Email: uhc-multi@solutran.com

Secondary Email (Optional): _____

Zipcode: 55441

Date of Birth: 01/01/1900

Household Size (Optional): _____

Program Profile Password

Secondary Email (Optional): _____

Zipcode: 55441

Date of Birth: 01/01/1900

Household Size (Optional): _____

Gender: Prefer not to say

Update Profile

Log Out

Healthy Benefits, Version: 1.0.36, Build: 840

Disposition: Portal/Mobile App Support>General Support

10.7. PLACE AN ORDER

OVERVIEW

Process for how a member can place an order on the web portal or mobile app.

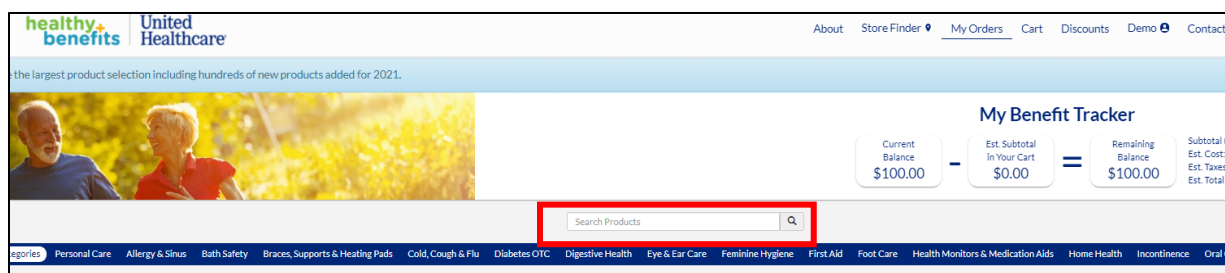
PROCESS

WEB PORTAL

1. Enter the web address in the URL bar and log in.
2. Click **My Orders** in the upper right-hand corner of the webpage.



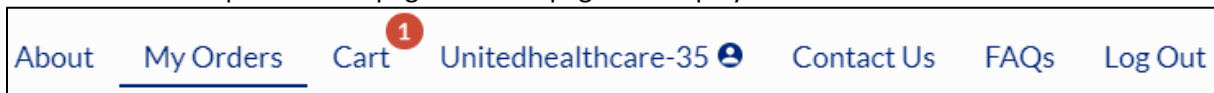
3. Enter the item ID or the name of the item to be purchased in the **Search Products** box.
 - If only browsing for items, scroll down the page to see eligible products.
4. Click the magnifying glass next to the search products box. The item will appear on the screen.



5. Click **Add to Cart**.
6. Repeat steps 3-5 until all products are added.




7. Click **Cart** at the top of the webpage. The webpage will display a list of all the items selected.



8. Click **Check Out**. The webpage will display the delivery address.

[← Browse More Products](#)

Your Cart: 1 item(s)



Equate Allergy Relief Cetirizine Tablets, 10 mg, 2 Pack (90 each)
Item #: 2686227645

1 ▼

[Remove](#) | [Save for later](#)

\$26.98 plus tax

Subtotal (1 items)	\$26.98
Est. Taxes:	\$2.03
<small>Based on (55441)</small>	
Delivery:	Free

Est. Order Total:	\$29.01
Current Benefit Balance:	\$327.73
Balance After Transaction:	\$298.72

[Check Out](#)

If selected items are out of stock, item

9. Review to ensure the information is accurate.

10. Click **Place Order**. The webpage will display a confirmation page with the **Order Summary** and **My Benefit Tracker**.

- The **My Benefit Tracker** section will give a breakdown of the starting balance, total of order, and new balance.

[← Back to Cart](#)

Your Delivery Address

UnitedHealthcare-35 Open
13305 12th Ave N
Minneapolis, MN 55441
uhc-ops@solutran.com
(736) 540 0080

[Update My Information](#)
Click above if you'd like to use a different delivery address, email address or phone number.

Subtotal (1 items)	\$26.98
Est. Taxes:	\$2.48
<small>Based on (55441)</small>	
Delivery:	Free

Est. Order Total:	\$29.46
Current Benefit Balance:	\$327.73
Balance After Transaction:	\$298.72

[Place Order](#)

[Cancel Order](#)

If selected items are out of stock, item

[Print this page for your records](#)

Thanks for placing an order with us! We've partnered with Walmart to process and ship your order. You will get an order confirmation email with your Walmart order number within 24 hours. You can print this page for your records. You can also access your order receipt by clicking on the order details in your transaction history.

Order Summary:

Item ID	Description	Qty
2686227645	Equate Allergy Relief Cetirizine Tablets, 10 mg, 2 Pack (90 each)	1

The items listed above may ship separately. If items are out of stock, item substitutions may automatically be sent to you.

Delivery Address: UNITEDHEALTHCARE-35 OPEN, 13305 12TH AVE N , MINNEAPOLIS, MN 55441

My Benefit Tracker

Previous Balance \$327.73	-	Estimated Total \$29.46	=	Remaining Balance \$298.27	Subtotal (1 Items) Est. Delivery: \$0.00 Est. Taxes: \$2.48 Est. Total: \$29.46
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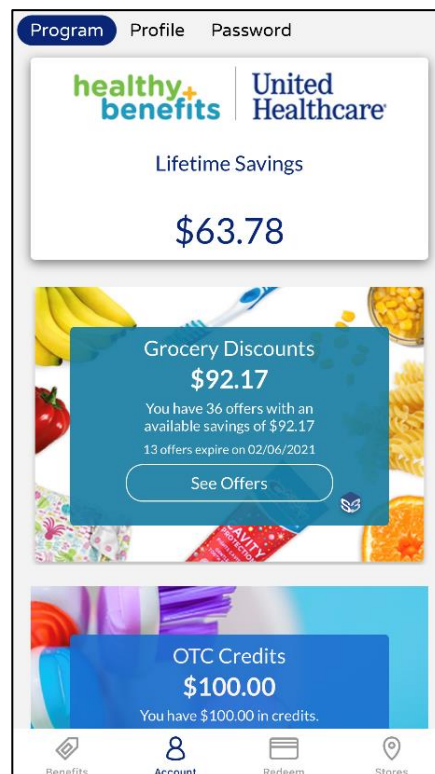
\$298.27 is your remaining balance as of 2/22/2021

Sold and Shipped by Walmart

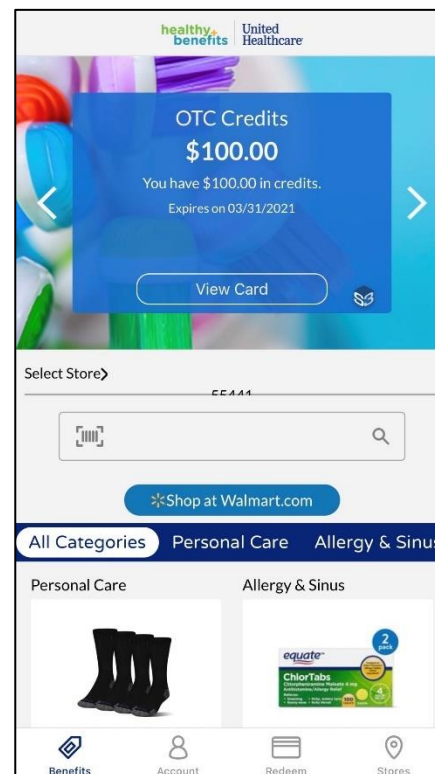
[Back to browsing products](#)

MOBILE APP

1. Open the Healthy Benefits Plus app on the desired mobile device and log in.
2. Click the **Benefits** icon in the bottom left-hand corner of the screen.



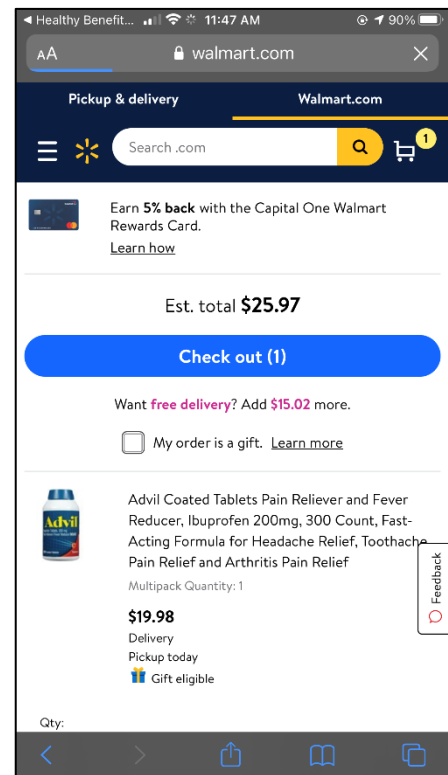
3. Click the white arrow on the right-hand side of the screen until it displays **OTC Credits**.
 - If already displaying OTC Credits continue to Step 4.
4. Enter the item ID or the name of the item to be purchased in the search field with a barcode.
5. Click the magnifying glass in the search box. Results will appear below the search field.
6. Click on the item to be purchased. A screen will display with options to continue.



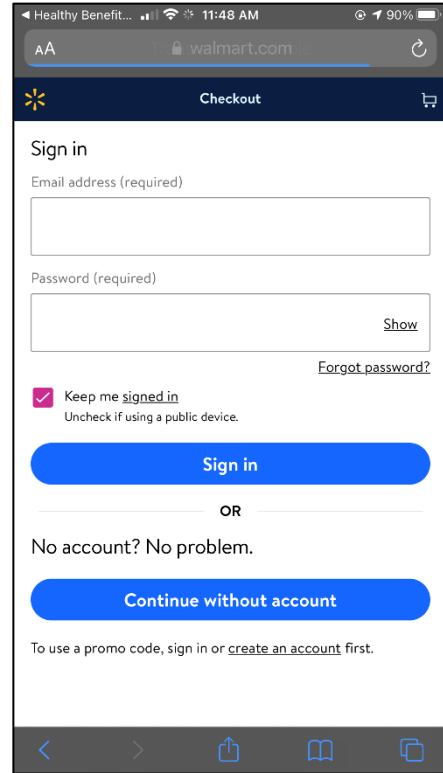
7. Click **Buy at Walmart.com**. The Walmart.com website will open with the item displayed.



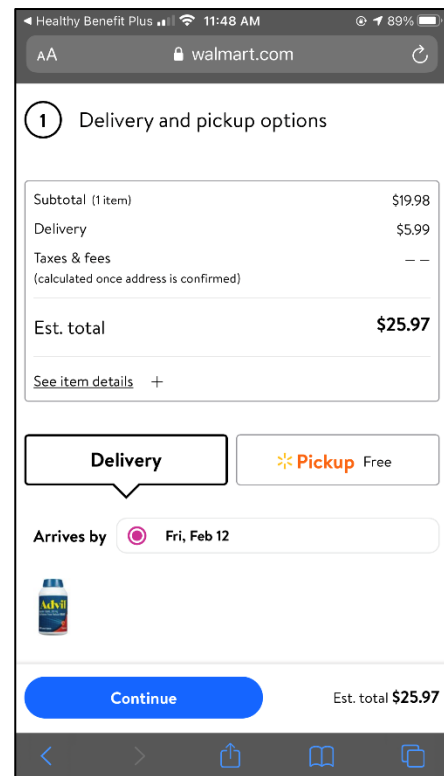
8. Adjust quantity of the item to the desired amount.
9. Click **Add to Cart**.
10. Return to Healthy Benefits Plus app and repeat steps 4-9 until all items are added to the Walmart.com cart.
11. Click **Checkout**.



12. Choose **Sign In** or **Continue without account**.
 - If member signs in: Continue to Step 17.
 - If member does not sign in: Continue to Step 13.



13. Review items to ensure all are marked for delivery.
14. Click **Continue**.



15. Enter delivery information including **First Name, Last Name, Phone Number, Email Address, Street Address, ZIP Code, and State.**

16. Click **Continue.**

17. Select **Gift card** as payment method.

18. Enter the 17-digit Healthy Benefits Plus card number in the **Gift card number** field.

19. Enter **PIN/Security Code.**

20. Click **Apply gift card.**

21. Click on **Review Your Order.**

22. Review the details for accuracy.

- **Note:** Throughout the checkout process, the member will see a \$5.99 delivery fee. Please ensure the member that they will never be charged this fee. The delivery fee will be waived by their Health Plan as soon as the S3 Card has been entered as a payment method.

23. Click **Submit.**

Disposition: Portal/Mobile App Support>General Support

10.8. WEB PORTAL/MOBILE APP FAQs – COMING SOON!

11.0. ESCALATIONS

11.1. GRIEVANCES

OVERVIEW

Process to identify and escalate a grievance.

KEY INFORMATION

- A grievance is any escalated complaint or dissatisfaction related to the benefit or program deduced through:
 - A direct ask to file a grievance.
 - Key words or phrases. Listen for the following:
 - “I am not happy.”
 - “I am frustrated.”
 - “I am upset.”
 - “I’m embarrassed.”
- Grievance is a formal process in which the health plan provider will follow up with the cardholder.
- Examples of what a grievance may sound like:
 - “I’m unhappy with this benefits program. It’s very frustrating and has never been a real benefit for me!”
 - “I’m so upset! I have called several times, and no one has been able to resolve this!”
 - “I was embarrassed when my card didn’t work at the store.”
 - “I want to file a grievance.”

PROCESS

1. Attempt to resolve the issue per normal procedures.
2. Identify if filing a grievance is necessary per the key information above.
 - **No:** Continue to assist as usual.
 - **Yes:** Continue to step 2.
3. Offer to transfer the member to the health plan provider to file a formal grievance.
“I apologize for the inconvenience. I can transfer you to the correct department if you would like to file a formal grievance.”
4. Warm transfer the member to the health plan provider. See [Transfers](#).
 - Inform the health plan representative of the following before bringing the member on the line:
 - The member has a grievance
 - What resolutions were attempted
 - What the nature of the grievance is

Disposition: Other>Other

11.2. REQUEST SUPPORT TICKET

OVERVIEW

Information to determine when to complete a request support ticket and how to close a request support ticket during an inbound call.

KEY INFORMATION

- If a member calls in regarding a previously submitted Request Support Ticket and the issue can be resolved, the Request Support Ticket should be closed. See process below.
- Ask probing questions and research the issue to determine if a ticket is necessary prior to creating the ticket.
- Include all pertinent information in the ticket to ensure efficient and accurate handling.
- Forward issues needing escalation not identified on the chart below to leadership to be sent to Solutran operations team.
- Request support tickets take 3-5 business days to resolve. A member will receive a response within the same time frame when applicable.
- Use the chart below to determine the issue type/reason and click the appropriate link under process to be directed to the full procedure.

Issue Type	Reason	Process
Orders/Purchases	Ghost Order	Ghost Order
	Refunds/Returns	Refunds
	Suspected Fraud – Needs Investigation	Suspected Fraud
In-Store Support	Card didn't scan	Card Will Not Scan
	Store/Cashier wouldn't accept card	Cashier Will Not Accept Card
	Transaction disputes	Transaction Disputes
Product	Approved Product Not Covered	Not Available for Purchase
Member Account	Inactive-Expired Account	Inactive-Expired
	Expired Benefit Dispute	Expired Benefit
	Catalog request alternate language	Catalog Replacement
	Address change not reflecting in CRM – verified with insurance	Edit Member Demographics
	Multiple Active Accounts	Multiple Active Accounts
App/Website	Password reset unsuccessful	Reset Password
	Unable to Register	How to Register
QA – Quality Assurance Only	QA – Quality Assurance Only	DO NOT USE

General Feedback – No Contact Needed	Add Eligible Product	General Member Feedback
	Add Eligible Store	General Member Feedback
	Delivery Feedback	General Member Feedback
	Tax Feedback	General Member Feedback
	Price Discrepancy	General Member Feedback
	Web Portal/Mobile App Feedback	General Member Feedback
	General Program Feedback	General Member Feedback

PROCESS

Closing a Request Support Ticket During an Inbound Call

1. Click the **Request Support** tab.
2. Click the line of the **Open** or **In Progress** ticket.
3. Complete the following documentation in the **Comments** box.
 - Click the checkbox next to **Callback Notes**.
 - Complete comments with the following:
 - **Reason(s)**: RST follow-up.
 - **Resolution(s)**: Actions taken to resolve member inquiries.
 - **Name of the person you spoke with**: if someone other than the member.
 - **First name of representative**: if completing a conference/transfer call.
 - **Callback status**: Voicemail left, bad number, spoke with member, etc.
 - Acceptable abbreviations (do not use other abbreviations)
 - MBR = Member
 - AR = Authorized Representative
 - HBP = Healthy Benefits Plus
 - HS = Healthy Savings
 - BAL = Balance
 - TL = Team Lead
 - RST = Request Support Ticket
 - CNF = Conference
 - TFR = Transfer
4. Update the **Status** of the ticket to **Closed**.
5. Click **Submit**.
6. Add the following to the call wrap up note.

Reason: RST

Resolution: Closed RST

12.0. MAIL ORDER PROCESSING

12.1. MAIL ORDER QUEUE – COMING SOON!

12.2. MAIL ORDER FORM

OVERVIEW

Where order forms are located and what they contain.

KEY INFORMATION

- Members will receive a catalog with mail order forms and pre-paid envelopes when a member's plan allows ordering OTC products through the mail.
- Mail order forms can be printed from the web portal or mobile app.
- Mail order forms are pre-populated with the following:
 - Member's card number
 - Barcode
 - Name
 - Address
- The following fields must be manually written in by the member.
 - **Phone Number** (required)
 - **Email Address**
 - **Today's Date**
 - **Shipping Address** (if different from the billing address)
 - **Item ID**
 - **Description**
 - **Price**
 - **Quantity**
 - **Total Price**

12.3. MAIL ORDER BUSINESS RULES

OVERVIEW

Business rules for processing mail orders.

KEY INFORMATION

- Business Rules

Threshold	Action
One or more item(s) are out of stock/removed	Continue to place the order. Document the member's email address or phone number. If they do not have an email or phone number, place as much of the order as you can and complete the order.
Price difference is a \$10 or greater increase for an individual item or the order total	Do not complete the order. A callback will be completed later to confirm the items the member would like to order.
All items on the order form are out of stock	Do not complete the order. A callback will be completed later to confirm the items the member would like to order.
Insufficient benefits available to place any of the items on the order form (including sales tax)	Do not complete the order. A callback will be completed later to confirm the items the member would like to order.
Invalid/Illegible Address	Do not complete the order. A callback will be completed later to confirm the shipping information.

12.4. PLACING A MAIL ORDER – COMING SOON!

12.5. MAIL ORDER DOCUMENTATION – COMING SOON!

13.0. ONLINE ORDER PROCESSING – COMING SOON!

13.1. ONLINE ORDER QUEUE – COMING SOON!

13.2. ONLINE ORDER BUSINESS RULES – COMING SOON!

13.3. PLACING AN ONLINE ORDER – COMING SOON!

13.4. ONLINE ORDER DOCUMENTATION – COMING SOON!

13.5. ONLINE ORDER TROUBLESHOOTING – COMING SOON!

13.6. OTC SHOPPER EXTENSION – COMING SOON!

14.0. MAIL AND ONLINE ORDER EXCEPTION QUEUE – COMING SOON!

14.1. EXCEPTION QUEUE – COMING SOON!

14.2. REJECTED BY SYSTEM – COMING SOON!

14.3. FLAGGED BY SYSTEM – COMING SOON!

14.4. UNABLE TO COMPLETE – COMING SOON!

14.5. PROCESSING EXCEPTION – COMING SOON!

15.0. CALLBACK QUEUE

15.1. FILTERING THE CALLBACK QUEUE

OVERVIEW

Process on how to filter the callback queue for request support tickets.

KEY INFORMATION

- The callback queue consists of new and pending request support tickets that require callbacks.
- Filter options in the Callback Queue include:
 - **Ticket Id:** ticket id of the request support ticket you are looking for.
 - **Issue Types:** Type of ticket submitted. Orders/Purchases, In Store Support, Product, Member Account, App/Website, Partial Order Callback, General Feedback – No Contact Needed, or QA – Quality Assurance Only.
 - **Issue Reasons:** Reason of ticket. Ghost Order, Refunds/Returns, Suspected Fraud Needs Investigation, Card Didn't Scan, Store/Cashier wouldn't accept card, Transaction Disputes, Approved product not covered, Inactive-Expired Account, Expired Benefit Dispute, Catalog request alternate language, Address change not reflecting in CRM – verified with insurance, Multiple Active Accounts, Password Reset Unsuccessful, Unable to Register, Partial Mail Order, General Feedback – No Contact Needed, or QA – Quality Assurance Only.
 - **Status Types:** Open or In Progress
 - **Open:** the request support ticket is still open and needs to be worked.
 - **In Progress:** the request support ticket is currently being worked.
 - **Programs:** Client the member is enrolled with (UnitedHealthcare, Priority Health, LA Care, etc.)
 - **Issue Levels:** Level 1 or Level 2
 - **Escalated:** Was the issue escalated; Yes or No
 - **Cardholder Name:** Name of the cardholder.
 - **Received Date:** Date the ticket was received.
 - **Language Codes:** English, Spanish, or Other
 - **Contact Method Types:** No Contact Needed or Phone
 - **Location:** Onshore call center, Offshore call center, Super Company
 - **Client Type:** Always select S3

PROCESS

1. Click the **Callback Queue** link at the top of CRM. A box with filtering options and results will display.
2. Click **Language Codes** drop down and select appropriate option.
3. Click **Search**.
4. Click the **Received Date** column header to sort from oldest to newest.

15.2. WORKING A CASE IN THE CALLBACK QUEUE

OVERVIEW

Process to work a request support ticket in the callback queue.

KEY INFORMATION

- Callbacks can be made starting at 10am CST and no later than 7pm CST.

PROCESS

1. Click the line of the ticket to be worked. The member's profile will open directly to Request Support Ticket.
2. Click the **Comments History** tab.
3. Review the previous comment(s) to determine the reason for the ticket.
4. Complete any research needed prior to calling the member.
5. Call the member.

Call answered:

- Provide opening.
"Hi. My name is (first name). I'm calling from Healthy Benefits Plus Member Support on behalf of your (client name) health plan. May I speak with (member's first and last name)?"
- Once the member is on the line:
 - Repeat opening if necessary.
 - Clearly state the initial reason or purpose for the call.
 - Provide call recording notification.
 - Verify the member's account. See Verification.
Example 1: "I'm calling to follow up on <<state general reason>>. Before we begin, I want to let you know that this call may be recorded for quality and training purposes. May I verify..."
Example 2: "I'm calling to discuss the order you recently placed. Before we begin, I want to let you know that this call may be recorded for quality and training purposes. May I verify..."
Example 3: "I'm calling to discuss your previous inquiry. Before we begin, I want to let you know that this call may be recorded for quality and training purposes. May I verify..."
- Continue to Step 6.

Call not answered:

- **Voicemail:**
 - **Request Support Ticket:** Leave the following message and continue to Step 9.
"Hello, this message is for [member's first and last name]. My name is [agent name] and I'm calling from Healthy Benefits Plus Member Support on behalf of your health plan. I'm calling regarding to your previous inquiry. Please call us back at 833-862-8271."
 - **Partial Mail Order:** Leave the following message and continue to Step 9.
"Hello, this message is for [member's first and last name]. My name is [agent name] and I'm calling from Healthy Benefits Plus Member Support on behalf of your health plan. I'm calling regarding the order you had placed. Please call us back at 833-862-8271."
- **No Voicemail:** Continue to Step 9.

6. Resolve the issue for the member, answer any additional questions/concerns, and close the call.
7. Return to the Request Support Ticket.
8. Click the **Contact** tab.
9. Complete the following documentation in the **Comments** box.
 - Click the checkbox next to **Callback Attempt**.
 - Complete comments with the following:
 - **Callback Attempt:** CB1 (first attempt) or CB2 (second attempt)
 - **Reason(s):** Why the member was called.
 - **Resolution(s):** Actions taken to resolve member inquiries.
 - **Name of the person you spoke with:** if someone other than the member.
 - **First name of representative:** if completing a conference/transfer call.
 - **Callback status:** Voicemail left, bad number, spoke with member, etc.
 - Acceptable abbreviations (do not use other abbreviations)
 - MBR = Member
 - AR = Authorized Representative
 - HBP = Healthy Benefits Plus
 - HS = Healthy Savings
 - BAL = Balance
 - TL = Team Lead
 - RST = Request Support Ticket
 - CNF = Conference
 - TFR = Transfer
10. Update the **Status** of the ticket if necessary.
 - **In Progress:** Case is unresolved after first attempt.
 - **Closed:** Case was resolved or two callback attempts have been made.
11. Click **Submit and Close**. The screen will return to the callback queue.
 - Access the next case to work or exit the program if complete.