

Course Navigation Overview

Click Here to Skip Course
Navigation Overview

Skip



Available Views

There are three slide views available:

- Navigation Panel View
- Standard Slide View
- Full Slide View

This is the Navigation Panel View.

Forward/Backward Controller

- This is the forward/backward controller.
- Use the Left and Right arrow buttons to move back and forth between pages.
- Up and Down arrow keys on the keyboard may also be used to navigate between pages.



Attachments Button



- Certain slides also contain attachments.
- Click on the Attachments button to view attachments.
- After viewing, close the document and resulting blank browser window to return to the course.

Navigation Panel

The Navigation Panel may also be used to navigate through the course. It has 4 tabs:

1. Outline Tab

- Lists the course slide titles. You can navigate through the slides by clicking on the slide titles.
- Clicking on a slide with a triangle will reveal the detailed slides in the section.
- Slide titles will turn blue once the slide have been viewed.

2. Thumbnails Tab

- Displays a small picture of each slide.
- Click on the slide picture to navigate to it.

3. Notes Tab

- Another way to view notes.

4. Search Tab

- Used to search for keywords in slide text/notes.
- Only slides containing the keywords are returned.



Slide View Toggle

- The slide view toggle will switch between slide views.
- During the course toggle to the view that best suits your needs.
- The next slide displays the standard slide view.



Standard Slide View Toggle

- This is the standard slide view.
- In this view, the slide shifts to the center of the screen.
- The Navigation Panel disappears.
- All other navigation buttons are available.

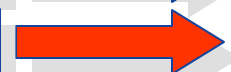
Full Size View

- This is the full size slide view.
- This is the default view for the course.
- Use Up and Down arrow keys to navigate back and forth through the slides.
- Attachment and Exit buttons are not available in this view.
- On slides with attachments, the standard view becomes the default. This is done to allow access to the Attachments button.

Pause/Play Button – Move forward one slide at a time.



Slide View Toggle – Toggles between 3 different screen views.



Navigation Overview Complete

- The Course Navigation Overview is now complete.
- Use the Down arrow key on the keyboard to continue the course.

SME Development

Plan Sponsor Domain Overview



Disclaimer

This course provides an overview of the Plan Sponsor Domain.

The information in this course is not intended to be used as or replace system documentation.

Objectives

- At the end of this course, participants will be able to:
 - ✓ Describe the Plan Sponsor Domain and the business that it supports at a high level
 - ✓ Describe the current Plan Sponsor Domain architecture at a high level
 - ✓ List major Plan Sponsor Domain projects

Business Overview

- Plan sponsors are the employers who contract with Aetna to provide insurance benefits to their employees and their employees' dependents.
- The Plan Sponsor domain is responsible for the case installation process for both the HMO and the PPO business.
- Through the Plan Sponsor domain, Aetna maintains a centralized book of record for all plan sponsor data. As a business process, case installation is the first step in the product lifecycle after a plan sponsor contracts with Aetna to provide insurance business to its employees.

Case Installation

- During case installation, Aetna staff use the systems supporting case installation to do the following four high-level processes:
 1. Set up the plan sponsor's account structure which determines how members will be enrolled, how claims will be accounted for, how customers will be billed and how the case will be rated when the customer renews the contract.
 2. Set up the plans of benefits which translate the purchased products into the specific benefits that are going to be offered to the employees of that particular plan sponsor.
 3. Enroll members in the plan benefits.
 4. Produce plan sponsor and member products such as Contracts, Certificate of Coverage and ID cards.

Case Installation Process

- Case Installation Detail Process: From the plan sponsor's perspective, accounts are the major structural components of a case.
 - ✓ The account structure enables the plan sponsor to group various types of employees into different classes and categories for different purposes.
 - ✓ Accounts are the major structural components of a case and the account structure enables the plan sponsor to group various types of employees into different classes or categories for different purposes.

Case Installation Process

- Case Installation Detail Process: From the plan sponsor's perspective, accounts are the major structural components of a case (cont'd).
 - ✓ For example, a plan sponsor might put all of its salaried employees into one account and all of its hourly employees into another account to provide different benefits for the two types of employees or to understand how claim experience differs between the two groups of employees.

Case Installation Process

- Next Step: Plans of Benefits Set Up:
 - ✓ Plans of benefits are the major structural component of a case. A member is enrolled in a plan containing the benefits to which a member is entitled.
 - For example, is the member entitled to life, AD&D, medical, dental, pharmacy, or a combination of those?
 - For example, the deductible of coinsurance amounts for the medical, dental or pharmacy benefit that's part of that plan.

Case Installation Process

- Next Step: Plans of Benefits Set Up (cont'd):
 - ✓ Once the plan coordination consultants (PCCs) or Implementation Consultants (ICs) who are responsible for the above aspects of case installation have completed setting up the plan sponsor's accounts and plans of benefits into PE/RS, the case is ready to be turned over to the enrollment consultants to start enrolling the members and the benefit consultants to start assembling the plan sponsor products.

Case Installation Process

- The enrollments consultants enroll all the members and their dependents in the appropriate plan.
- Once enrolled the consultant triggers the member fulfillment process, which produces ID cards, HIPAA certificates and other products, that are distributed to new members, either employees or dependents when the case is set up.

Case Installation Process

- The final step in the case installation process is drafting. Drafting produces the contracts, certificates of coverage and other products that are distributed to both plan sponsors and members.
- Once these four steps are complete, case installation is complete. Bills can be produced, claims can be paid and plan sponsors and members can be serviced.

- Enterprise Business Architecture Framework is a set of integrated data and business rules which are surrounded by a set of market-specific and enterprise-specific processes.
- The goal of our Enterprise Business Architecture Framework is to allow a shared set of consistent data across the Enterprise.

- This data enables all of our different business processes whether they're market or enterprise specific.
- Plan Sponsor services is part of the enterprise shared services process set and all the other Plan Sponsor processes are directly or indirectly affected by plan sponsor services.

- System Interaction: Aetna is sold quotes from the quoting and rating domain in both an automated and manual fashion, which is used to feed the case installation process.
- Contract drafting follows the Plan Sponsor business process and that happens after the case is installed to generate the various documents that are needed by plan sponsors and members for our products.

Plan Sponsor Applications

- Plan Sponsor Application (PSA): The automated case installation utility that takes in sold quote information and installs it either for regional groups or the PE/RS traditional platform applications.
- Policy Entry and Reporting System (PE/RS): The traditional platform manual case install tool. It's primary function is to generate the information that populates the plan sponsor book of record. It contains both plan sponsor and plan of benefit information for our plan sponsors.

Plan Sponsor Applications

- HMO groups: The manual case installation utility for the HMO groups platform.
- Plan Sponsor Information Layer (PSIL): The datastore that combines the information from both the PE/RS and the HMO groups platform into a consolidated view of a plan sponsor.

Plan Sponsor Applications

- Web CCI: A read-only inquiry application for the plan sponsor book of record that allows business users from across a variety of business processes to directly access the configured plan of benefit information.
- ePublishing: This application follows the case installation business processes and its goal is to generate a variety of document output for both our plan sponsors and members.

Plan Sponsor Databases

- There are two central databases for the Plan Sponsor domain:
 1. Plan Sponsor Book of Record (PSBoR): Houses both the plan sponsor information and the plan of benefit information. This is the strategic repository for plan sponsor information on a go-forward basis.
 2. APM: The older legacy database that is populated through replication technique from PSBoR to allow legacy applications to function until they have the time to convert over and start accessing the plan sponsor book of record directly.

Plan Sponsor Databases

- Plan Sponsor is an integral part of the overall business process. From the business architecture it impacts multiple market-specific enterprise-specific business processes.
- Plan Sponsor is the tool for installing cases, both automated and manual fashion, into the enterprise and allowing access to that data for a variety of downstream consumers.

- Policy Entry and Reporting System (PE/RS): An online application and a whole suite of products including PE/RS Online, OLR (Online Register), Web BTM (Benefit Table Maintenance), Web BTQ (Benefit Table Query), Web CCI (Customer Coverage Inquiry System), PSBoR (Plan Sponsor Book of Record) and ATM (Aetna Assist Policy Master database).

- PE/RS is the single source for manual case installation and the system source for Aetna's plan sponsor data. Plan sponsor data includes plan and benefit detail information, which is used across the enterprise and supports traditional business and HMO products.
- PE/RS is an online batch and real-time update system. It's a mainframe application made up of 80 CICS screens that allow the user (the PCC), to enter and maintain policy data.

- Screens have built-in field editing, field defaulting and screen float dialog. In addition, there are background edits that perform additional case-level cross-editing. Approximately 1,000+ cases are updated per day with increases during open enrollment. Coverage cards are generated as well as reports.

- PE/RS is used by:
 - ✓ Plan Coordinator Consultants (PCC) for case setup
 - ✓ Underwriters for case review
 - ✓ Claim processors to view coverage information
 - ✓ Help desk for user support
 - ✓ Plan data support team for benefit maintenance
 - ✓ Prototype case setup
 - ✓ Technical support team for troubleshooting
- PE/RS Online updates the Plan Sponsor Book of Record through an on-demand release ODR process which is a real-time update.
- PE/RS also supports complex history which allows audit trails.

- The unique application that feeds data in PE/RS is Plan Sponsor Application (PSA). There are many systems that receive PE/RS data either through interface push files, which is in a batch mode, pull interfaces, point to point or services.
- PSBoR extract services allow real-time access for downstream applications. Some of the downstream applications of PE/RS include Easy Link, Plan Sponsor Info Layer and the Book of Record, AAS (Aetna Administrative System), FISC (the financial information system for customers), data migratory in publishing and RxSY (pharmacy).
- Benefit information is maintained through Web BTM (Benefit Table Maintenance facility) and displayed in Web BTQ (Benefit Table Query system).

- The Plan Sponsor Application (PSA) is the single source for case installation. PSA supports HMO and traditional business. PSA is used to set up plan sponsor and product information in our legacy systems, such as PE/RS and HMO.
- The users of PSA are Plan Coordination Consultants (PCC). They use the PSA application for case installation. They also use it to generate reports for metrics and to make sure the case will successfully install.

- Other users of PSA are the technical support team and the help desk to help the users with troubleshooting or any other issues that they encounter.
- PSA is a browser-based application consisting of about ten web pages that are used for case installation of new business plan sponsors. New business revisions and renewal quotes for certain HMO and traditional products in certain markets are installed using the PSA application.

- The data comes to PSA from two quoting systems:
 - ✓ Aetna Quoting Center (AQC)
 - ✓ Quoting and Renewal System (QRS) - for small groups
- Once the quote information comes into PSA, a call is made to the Plan Sponsor Information Layer (PSIL) to obtain the PS Unique, the Plan Sponsor Unique Identifier for the plan sponsor quote.
- A call is also made to the product crosswalk service to obtain benefit provision library translation for the TPID (Taurus Product Indicator) it received from QRS or AQC.

- The benefit provision line value information is needed to complete the product information in PE/RS.
- Once the online entry is complete, a trigger kicks off an interface between PSA and PE/RS Online, which kicks off services to send both plan sponsor information, plan information and product information to the PE/RS Online screens.

- Once this information is received, the PSA user starts reviewing the ten web pages and either add some information or submits the quote.
- As the user navigates through the PSA screens, there is a PSA internal default logic that adds more information for the HMO groups and PE/RS. Once the online entry is completed, PSA internal logic determines where to feed the information.

- On the traditional side, once the user has reviewed their data in OLR, they release that information to the PE/RS database. A nightly batch job runs and that information is interfaced to AAS. Once that information is captured both in PE/RS and AAS, the Plan Sponsor Information Layer (PSIL) runs its daily cycle.
- The extract information is captured from PE/RS and AAS. PSIL sends a trigger and message to PSA which then indicates the case has successfully been installed both in PE/RS and AAS. PSA then starts screen painting the billing and ID cards screens of AAS.

- Now the case has been successfully installed in the traditional platform and the user gets a message in PSA that the case has been installed.
- On the HMO side of the house the information is sent directly to HMO groups and on a real-time basis so there's no waiting time. PSA also processes renewals and revisions for the HMO and traditional side.

- Web Benefit Table Query System (BTQ) is used to locate specific traditional benefit provision line value information from the benefit tables.
- Web BTQ, which replaced the existing BTQ application, has been greatly enhanced and is on the web which allows easier and quicker access.
- BTM maintains the benefit tables and is the application that BTQ accesses to display the information. BTM identifies benefits, provisions, line numbers, the text associated with each line value and greatly reduces administrative paperwork through a new request line value online form.

- Web BTQ is used by business users and the PCC to view benefit details during case setup. It is used by customer services and it is used by technical support.
- Web BTQ identifies benefits, provisions and line numbers and the text associated with each line value. It greatly reduces administrative paperwork through a new request line value online form.

- The Plan Sponsor Information Layer contains data in a DB2 format from PSBoR (Aug 2011 Release) and HMO groups. It runs an extract every morning to obtain data and put it together in one database.

- Web CCI is used by:
 - ✓ All Aetna employees have inquiry access to Web CCI with an average of 6,700 users that use the application on a daily basis.
 - ✓ Plan Coordinator Consultants (PCC) use the application for case installation.
 - ✓ Claim Processors view coverage detail.
 - ✓ Underwriters use it for quote and case review.
 - ✓ Help desk to support the users of the application.
 - ✓ Plan Sponsor Data Support Team for data maintenance.
 - ✓ The Technical Support Team to help troubleshoot problems or issues.

- Web CCI is meant to be a mirror into PSBoR. Web CCI provides users with near real-time plan sponsor structure, plan and benefit information within the application.
- Users can sort data within the application and filter information.
- Users can view current information and history. There is also a data export facility which the users take advantage of on a daily basis to download into an Excel export.

- The ePublishing system automates the creation of plan sponsor documents and allows the benefit consultant to customize and change the documents based on the plan sponsor requirements.
- When the document has been completed, the system allows the benefit consultant to issue that document. The benefit consultant can mail hard copies to the plan sponsor or they can issue a PDF.

- A benefit consultant is responsible for the development of all the plan documents such as a certificate, a policy or summary of coverage for our customers.
- ePublishing begins with the assembly process. In the beginning of the assembly process, the benefit consultant will identify the customer, the plan of benefits and what type of document they wish to create.

- Once they have done that, the ePublishing system uses built-in business logic to translate against the provision and line values in PE/RS, which allows the correct wording and segments to be pulled into a document.
- Once the document is created, there are times when the benefit consultant will need to edit the document due to unique requirements of the plan sponsor.

- Using a program called Customizer, the drafter can make changes to the document. Once the document is complete the Issue function is used to allow the document to be sent to plan sponsors. This allows the drafter/benefit consultant to decide how many copies and to who to send the document.
- The document can be issued as a hard copy or as a PDF. During the assembly process the benefit consultant has three options to create a document.

- They can create a new document using some productivity enhancements built into the system.
- A benefit consultant can create several of the same type of documents and the ePublishing system also allows the drafter, a benefit consultant, to copy an existing document.

- Another productivity enhancement in ePublishing is the ability to copy documents from one customer to another.
- Many times customers will buy the same type of plan so rather than the benefit consultant starting from the very beginning assembling a new document, they can copy a document and make very few changes to the document.

- The Search Feature allows the benefit consultant to locate documents. There is a new search feature that is called the Plan Benefit Locator, which is a single source that allows non-drafting people, such as complaints, patient management, and legal and field office personnel, the ability to find documents that were created in ePublishing and documents that were not created in ePublishing.
- Those documents that are not created in ePublishing are called SPDs (Summary Plan Descriptions) and are created by the plan sponsor.

- The documents are stored in public folders that act as one location for the field and all the non-draftee users.
- The last menu function of the ePublishing system is for the ePublishing technical team and allows them to create the words and the system code that pulls those words into documents.

- The ePublishing system allows for the automation of plan sponsor documents. It also allows for the issue of those documents and maintains, in a single source, the documents for benefit consultants use.
- The benefit consultant is responsible for the creation and maintenance of plan sponsor documents. And those documents consist of certificates, policy and summary of coverages.

HMO Groups

- HMO Groups: A data entry system where HMO employer information is captured online and stored in a database that is shared by the renewal system.
- The renewal system is a batch processing system that uses the group's data to renew plan sponsor's contracts each year.
- The users HMO Groups:
 - ✓ The plan coordination consultants who are responsible for plan setup for a new group or plan changes for renewals.

- The HMO Group system is primarily for the HMO side of the house. The information about each HMO Group is captured and drives various functions downstream such as billing and ID card creation. The various benefits are available to the employees and during the renewal process.
- These attributes can be updated based on the employer's selections.

HMO Groups

- HMO Groups is the Plan Sponsor Book of Record for the HMO business for Aetna.
- It provides automatic case installation for PSA and is a purely hands-off process which is fully automated.
- During renewal, monthly files are created for each plan sponsor that is coming up for renewal and the files flow back through the process and renew their business automatically.

HMO Groups

- HMO Groups provides on-demand service for AQC to support the renewal process for a business that has been quoted from AQC.
- This is a standalone application, mainframe-based, CICS online screens.

LEGAL & REGULATORY REQUIREMENTS



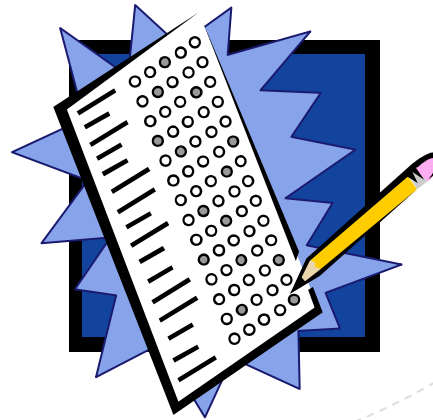
Please click
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access HIPAA
information.

AetNet

- **HIPAA Compliance:**
 - ✓ Congress passed the Health Insurance Portability and Accountability Act (HIPAA) in 1996.
 - ✓ The Privacy Rule restricts the use and disclosure of member health information by health plans, health care clearinghouses, providers who transmit member health information electronically, and their respective Business Associates.

- Compliance with SOX
- Privacy Data:
 - ✓ Contains employee personnel and/or member-identifiable eligibility claim data used to administer HMO and traditional platform health products, dental products, LTC, FSA, HRA, HSA*, RRA, Disability products.
 - ✓ This includes all products subject to the federal HIPAA Privacy Rule and may be used to access or store SSN.

COURSE EVALUATION



Course Evaluation

Please complete a course evaluation to let us know your opinion of the training.


[Click here to access Course Evaluation](#)



Additional Information

- For a copy of the course slides, please see attachment: Plan Sponsor Domain Overview Course Materials

You have completed the Plan Sponsor Domain Overview course.

Use the  button to exit the course then please wait for the Learning Center completion record to generate before exiting the Learning Center.

