

eContracting Agent

For Siron – Producer Express

What This Guide Provides:

The information in this document provides current instructions for Agents to follow when completing Cigna's eContracting process in Siron-Producer Express (Contracting link should be received via email from the Agent's Topline Agency). For detailed onboarding guidelines and additional information please review the [Rules of Engagement](#) located on [Producers' University](#).



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Key Changes for Summer 2021 Release:

- **Website and Social Media Information** – Agents and Agencies will be asked to enter their social media on the application pages.
 - Website
 - Facebook
 - LinkedIn
 - Other
- **Just In Time (JIT) Appointments** – Cigna has transitioned to a JIT appointment process. Cigna Medicare will only appoint in advance for pre-appointment states where Cigna actively sells Medicare business, as required by state regulations. For JIT states, where state law permits, appointment(s) will be requested **after** the **first sale** in the state it is received by Cigna Medicare.
 - **Note:** The Agent must be contracted, certified, and licensed in the state prior to selling, regardless of the appointment process used.

Downline Agent Packet

E-vite

Note: Packets use multi-factor authentication, so you will be required to log in with a temporary password as well as create your own password to ensure your packet remains secure.

- You will receive an email from producerexpress@sircon.com with a link to access your onboarding packet.
 - Note: Add the email to your contacts to prevent emails from going to SPAM.
 - Save the email as you can use this same link if you need to pause before completing your packet and go back in later.
- The link will open Producer Express to allow you to retrieve your temporary password.



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- Click "Get My Password".

Welcome to Producer Express

Need a password?

Welcome to Producer Express, the fastest way to get contracted with Cigna-HealthSpring. Producer Express guides you every step of the way as it fills out the contracting forms for you.

To begin, you will need a temporary password to gain secure access to your contracting packet.

Already have a password?

If you already have a password, enter it into the box below and click on "Continue."

If you've lost your password, [click here](#) to have a temporary one sent to you.

Password

- The screen will refresh to display a password entry field.
- You will receive another email from producerexpress@sircon.com with your temporary password.
 - Enter this password in the field mentioned above and click "Continue".

Enter Password

Thank you. A password has been sent to your email address. You should receive it in a few minutes.

Once you have your password, enter it into the box below and click on "Continue."

If you've lost your password, [click here](#) to have a temporary one sent to you.

Password



- You will now be asked to create your own password and confirm. Then click “Change Password”.
 - If you need to pause before completing the packet and come back later, you can use the new password to log in under the “Already have a password?” option.

Change Password

Thank you for logging in! In order to proceed, please choose a new password for your account and enter it below.

Password must be at least 6 characters long.
 Password must contain at least one numeric character.
 Password must contain at least one lower case letter.
 Password must contain at least one upper case letter.

New Password

Confirm New Password

Interview Questions

- A Getting Started message will provide instructions for navigation.
- You must then review the User Agreement terms and conditions, check the box for “I Agree” and click “Continue” to move forward.
- Validate your name and information already showing are correct.
- Enter your SSN, Birth Date, Phone, email, NPN, and Residential Address information

Interview Questions

Agent Information

First Name

Middle Name

Last Name

SSN

Birth Date (MM-DD-YYYY)

Mobile Phone

Business Phone

E-mail

National Producer #

Residential Address

Line One

Line Two

City

State

Postal Code

County

- Select the check box or enter Business Address as applicable, then click “Continue”.
 - **All fields marked with an asterisk (*) must be completed.**

Business Address

To copy residential address, check this box (after completing residential address)

*** Line One** **Line Two**

123 Street

*** City** *** State** *** Postal Code** **County**

City Alabama 12345

Commission Mailing Address

To copy business address, check this box (after completing business address)

Line One **Line Two**

123 Street

City **State** **Postal Code** **County**

City Alabama 12345

- Enter your website and social media information as applicable. For fields that are not applicable, please enter “None”. Click “Continue”.

Website

Website URL

test@test.com

Social Media Accounts

Facebook URL

none

LinkedIn URL

example@examples.com

Other URL

none


- The next screen will indicate all pre-appointment states requested by your recruiter.
 - **Please Note:** Cigna Medicare now follows a JIT appointment process as explained in the [Key Changes for Summer 2021 Release](#) section.
 - If you believe the pre-appointments requested are incorrect, you can reach out to your recruiter to request additional pre-appointments.

Your Qualified Recruiter requested appointment(s) in the following pre-appointment state(s).^{*} Appointment requires a valid state license; if a valid state license cannot be confirmed, an appointment will not be processed. If you see no states listed below, your Qualified Recruiter did not request any appointments in the pre-appointment states above. Please contact your Qualified Recruiter at [redacted] or email [redacted] if the information below is incorrect, you would like to request additional appointment(s) for a pre-appointment state listed above, or you have any questions; however, you may proceed in completing your onboarding invitation in the meantime.

^{*}For any states where Cigna actively sells Medicare business not listed above, as permitted by state regulations, Cigna will order appointments after the first sale as long as a valid license is held in that state.

- The following screen is the background check questionnaire.
 - Answer all questions and click “Continue”.
- For Level 5 (Direct Pay) Agents ONLY, select whether you want to use Electronic Fund Transfer (EFT, Direct Deposit).
 - **Note:** The EFT enrollment process is **not** electronic. **If you select Yes**, a copy of the EFT form will be provided with your printable packet materials at the end of the packet process. **You will need to print the form, complete all fields, and submit along with a voided check via the instructions on the form.**

Direct Deposit of Commission

 Do you want to use Electronic Fund Transfer (Direct Deposit)?

Yes No

Summary

- A summary of the information you entered will be shared.
 - Please verify the information you have entered is correct.
 - If anything is incorrect, you can use the “Back” button on the lower left corner to return to a previous page.

Summary

Please take a moment to review the information on this screen for accuracy. It will appear on forms and attestations to be signed. If you were not required to provide this information, the field will be blank.

Agent Information

First Name: First Name
Middle Name:
Last Name: Last Name

Review and Sign Documents

- To complete the packet process, you must review and electronically sign all documents.
 - You’ll be provided with instructions for signing.
 - Click “Continue” to begin signing.
- You must select “I agree to use electronic records and signature” on the upper left corner of the screen to proceed with signatures.
- Then click “Continue”.

Sign Documents

Please Review & Act on These Documents



Vertafore 11788 UAT
Vertafore 11788 UAT

D

Please read the Electronic Records and Signature Disclosure.

I agree to use electronic records and signatures.

CONTINUE

OTHER

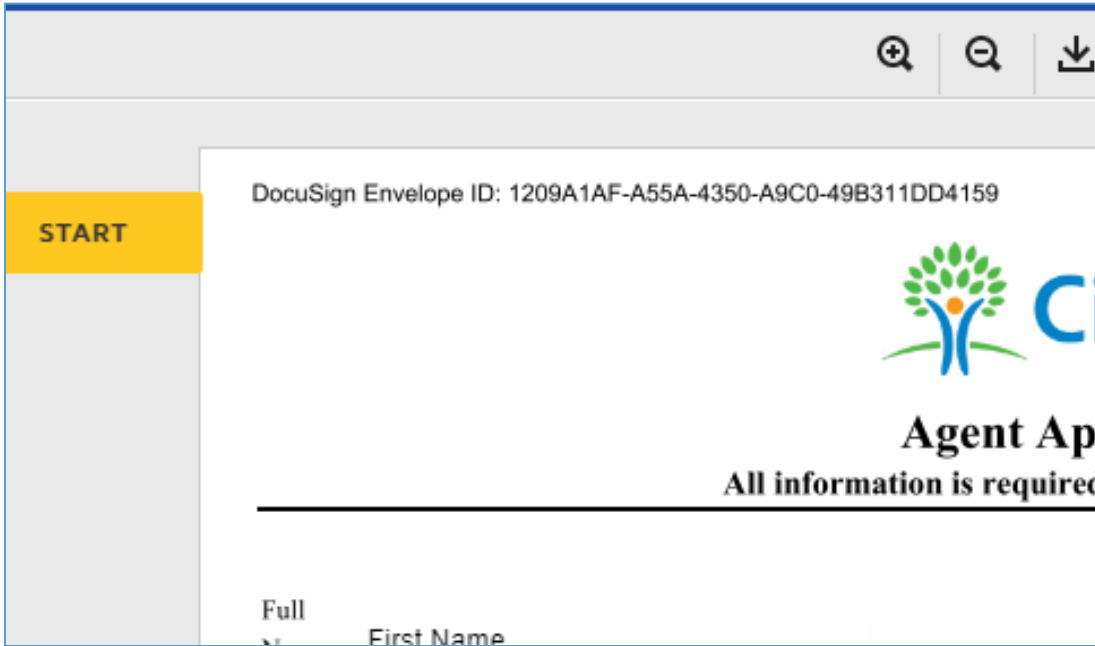
Full Name

First Name

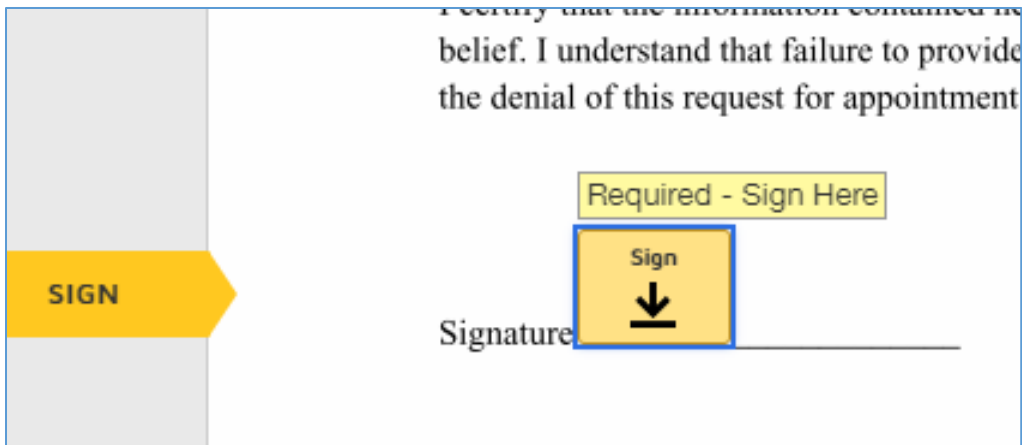
Middle

Last Name

- Next, click “Start” to begin signing.



- On the first required signature line, click “Sign” to create your signature.



- Your name and initials will auto-fill based on the information entered in the Interview Questions sections of the packet.
 - You can adjust the style as desired.
 - Then click “Adopt and Sign”.

Adopt Your Signature ✕

Confirm your name, initials, and signature.

* Required

Full Name*

Initials*

SELECT STYLE **UPLOAD**

PREVIEW [Change Style](#)

DocuSigned by:

First Name Last Name

A1C423DDAED0419...

DS

FNLN

By selecting Adopt and Sign, I agree that the signature and initials will be the electronic representation of my signature and initials for all purposes when I (or my agent) use them on documents, including legally binding contracts - just the same as a pen-and-paper signature or initial.

ADOPT AND SIGN

CANCEL

- The program will take you to each line requiring your signature. Click “Sign” on each line to append your signature.
- Once all signatures are complete, click “Finish” to submit your compiled onboarding packet directly to Cigna’s Medicare Sales Contracting Department for processing.

Maximize Save & E

FINISH

OTHER ACTIONS ▾

the Topline Sales
Subordinate Agent)
xpressly agrees to




















Print packet

- After submission, you will have the option to print any/all packet documents.

Print Packet

ords. You will need the Adobe Acrobat Reader to do so. If you are unable to view the forms [click here](#) to download the latest version of Ac

Name	Action
Cigna-HealthSpring Individual Agent Application Form	
Questionnaire Form	
Authorization to Conduct a Background Investigation Form	
FCRA Form	
NY ART 23-A Form	
W-9 Form	
EFT Form	
Exhibit 1: Cigna-HealthSpring Affiliate List	
Exhibit 2: Cigna-HealthSpring Rules of Engagement	
Exhibit 3: HIPAA Business Associate Addendum	
Exhibit 4: HIPAA Regulatory Addendum	
Exhibit 5: Subordinate Agent Agreement	
Exhibit 8: MAPD Compensation Schedule and Rules of Engagement	
CA Privacy Law	
Summary PDF	
Certificate of Completion	

KEY:  = View/Print Document

[Exit](#)

- **For Level 5 (Direct Pay) Agents ONLY:** As a reminder, you **must** print the EFT form and follow the instructions on the form to submit for processing.
- Click “Exit” once you’ve printed any documents you wish to keep for your files.

Confirmation Emails

- You will receive an email from producerexpress@sircon.com confirming your packet has been received by our Contracting Department and is being processed.

Dear First Name Last Name,

Thank you for submitting your electronic paperwork to Cigna-HealthSpring's producer onboarding system. We are processing your request now.

Once we confirm your credentials, we will submit requested appointments to the respective states. You will be notified once the producer appointment and set up processes are complete.

If you would like to make a change to the submitted information or need further assistance, please contact HealthSpring Agent Assistance Line (HAAL) at 1-866-442-7516 or email contracting.mailbox@healthspring.com.



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- Note: Upon receipt of your packet, a background check will be initiated.
 - The average turn-around for background checks is 1-2 days but can take up to 2 weeks.
 - Delays could be due to:
 - Holidays
 - Natural disasters
 - Miscellaneous court delays
 - Counties where manual lookup by the court is required
 - Increase in onboards for producers with criminal backgrounds
 - No middle initial provided on application
 - Incorrect SSN provided
 - After passing the background check, any pre-appointments requested will be processed.
- Once the packet has been fully processed, you will receive an email confirming your packet has been processed and which appointments were added. It will include:
 - Instructions for registering to certify.
 - **Please Note:** Allow 3-5 days for your information to feed to [Producers' University](#) in order to register.
 - If you attempt to register earlier, you will receive an error message indicating your information has not been loaded to the system.

Dear First Name Last Name,

This letter is to confirm that Cigna Medicare has processed and submitted appointments to the state Departments of Insurance (DOI) as requested by Topline Agency, the topline agency in your hierarchy. The states for which those appointments were submitted are listed below. Unless we notify you otherwise, you may assume that these appointments have been accepted and finalized by the DOIs involved.

AL

ALL required courses/training, including the National Medicare Training, MUST be successfully completed in order to become ACTIVE with Cigna Medicare. The steps necessary to access and complete your Cigna Medicare certification are listed below:

What's next?

In 5 days from the date of this letter, you will be able to begin certification by following the instructions outlined below.

1. Access the certification website at: <https://www.cignahealthspringproducers.com/>
2. If you are a first time user, click **Register**.

