



Book of Business 2026 User Guide



Introduction

Book of Business is your gateway to more strategic growth. It is conveniently located in Jarvis and gives you instant access to UnitedHealthcare Medicare member information, helping unlock the full potential of your business. From member data listings to in-depth reports across agency hierarchy levels, this tool helps you boost retention, optimize marketing strategies support you in meeting your sales goals.

This user guide walks you through the benefits of the Book of Business tool, giving you enhanced visibility into member statuses, plan enrollment, and important details. Select a topic below to navigate directly to that section or scroll through the guide at your own pace.

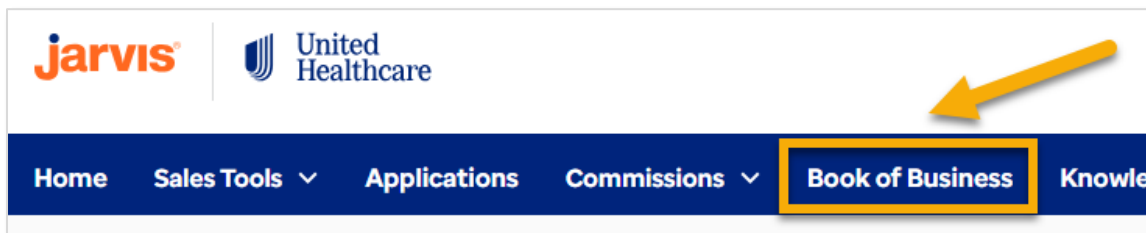
- Access and Specifics** _____ 2
- Homepage** _____ 3
- Filters and Member Status Details** _____ 4
- Downloading Reports** _____ 8
- The Member Profile** _____ 9
- Quick Links** _____ 12
- Ordering a Member ID Card** _____ 12
- Changing the PCP** _____ 14
- Submitting a Member Escalation Form** _____ 15
- Member Escalation Status** _____ 18
- Starting a New MA Application** _____ 19
- Additional Resources** _____ 20



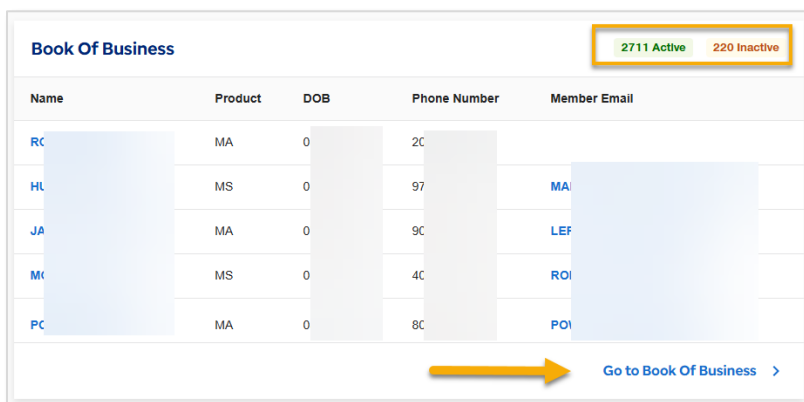


Accessing the Book of Business

To access the Book of Business, simply log into Jarvis and look for **Book of Business** in the navigation Bar. Once clicked, you will be in your Book of Business.



You can also access the Book of Business from the Jarvis Homepage where you will have a quick view of your active and inactive members, plus a link to take you directly to the Book of Business Homepage.



Book of Business Specifics

- The Book of Business provides status updates for SSBCI and C-SNP verification, alerts for a Service Area Reduction (SAR), Medicare Supplement payment information and Medicare Supplement plan activation.
- The Book of Business is not available to solicitors.
- The view in Jarvis will only show 500 members. To see all of you members you must download a report.
- Book of Business Reports are confidential and proprietary information of UnitedHealth Group. Do not distribute or reproduce any portion without the express permission of UnitedHealth Group.
- Only active members will show in the Book of Business. This means members will not show until their plan is effective.





Book of Business Homepage

When the Book of Business is selected in Jarvis, you will be taken to a Homepage that offers many selections to find the members you are looking for. Below are the specific ways you can navigate the Book of Business. Reference the letters for the corresponding information.

The screenshot shows the Book of Business homepage interface. Callout A points to the 'Sort by', 'Columns', and 'Download Results' buttons. Callout B points to a message: 'Displayed results have a max limit of 500. To view all results, downloading book of business is recommended.' Callout C points to the 'Filters' button, which shows 2 active filters: 'Plan Status: Active' and 'Member Status: Service Area Reduction'.

- A. Three options that will allow you to sort your view, add columns that can be viewed, and download your entire Book.
- B. Seven columns across the dark blue line. These are the default columns and cannot be unselected.
- C. A filters option that will allow you to select what you want to view in the Book of Business.

In each column, you will be able to view information on your active members.

The screenshot shows the Book of Business homepage with a table of member data. The table has the following columns: Member Name, Product, Plan Name, Plan Status, Plan Code, Effective, and Member Status. The table contains three rows of data, each with a 'Learn More' link in the Member Status column.

Member Name	Product	Plan Name	Plan Status	Plan Code	Effective	Member Status
[Redacted]	MA	AARP Medicare Advantage from UHC W-0011	Active	H5253-011-000	01/01/2026	C-SNP: Provider stated that member does not have a qualifying chronic condition Learn More
[Redacted]	MA	AARP Medicare Advantage from UHC W-0011	Active	H5253-011-000	01/01/2026	SSBCI: Condition verification is in progress for access to SSBCI benefits Learn More
[Redacted]	MA	UHC Dual Complete W-51	Active	H3794-006-000	01/01/2026	Current Plan is Service Area Reduction for upcoming plan year. Note: This can not be shared with members until Learn More



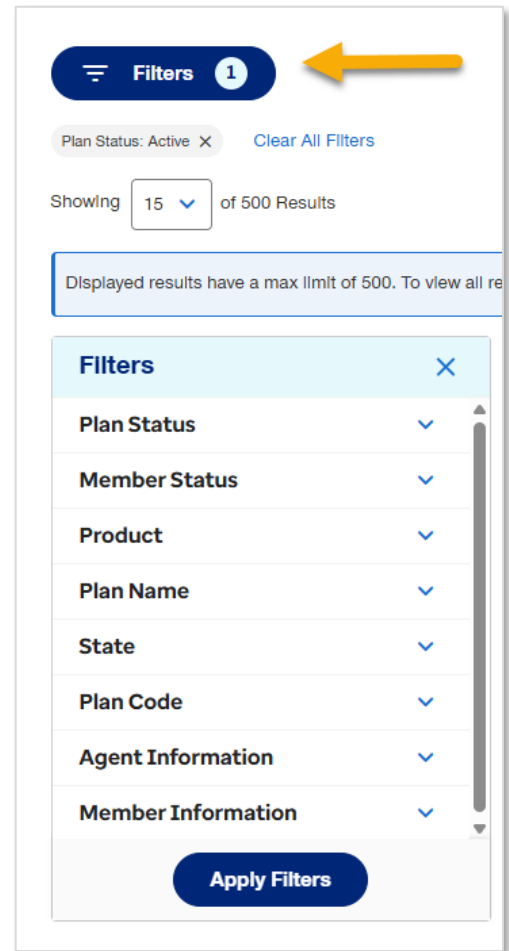


Filters

When creating a report, you can filter down to specifics you are searching for. Below are the available filters within the Book of Business.

- **Plan Status:** Allows you to filter to Active and Inactive members
- **Member Status:** Allows you to filter to specific C-SNP verification, SSBCI verification and SAR information
- **Product:** Allows you to filter to MA, PDP, MS, DVH and IFP
- **Plan Name:** Allows you to filter to plans available in your zip code
- **State:** Allows you to filter to a specific state
- **Plan Code:** Allows you to filter to a specific plan code
- **Agent Information:** Allows you to filter to PID, WID or name
- **Member Information:** Allows you to filter to a specific member by MBI, member ID, Last name or First name. *NOTE: You can search by typing Last name, First name, or just enter the first name or last name*

★ The filters option will search the entire book, not just the 500 members that display.



Member Status Filter

Using the Member Status filter can help you quickly identify which members may need extra support so you can act with confidence and foster trust. When you know a member’s status upfront, you’re better equipped to guide the conversation, provide accurate support, and reinforce your role as a trusted resource.

By applying this filter, you gain greater visibility into members who have SSBCI and C-SNP verification, alerts for a SAR, Medicare Supplement payment information and Medicare Supplement plan activation.





Member Status Filter, cont.

Follow the below steps to filter down to a specific member status.

C-SNP Verification

You will have two choices to filter to C-SNP verification. Members who have been verified for the chronic condition, and members who have verification still pending. Select the filter option for either **C-SNP – Verified** or **C-SNP - Pending Verification** and click **Apply Filters**.

Under the member status column, you will see either a green, yellow or red circle indicating the following:

<p>● C-SNP: Chronic condition is verified and member is eligible for the plan Learn More</p>
<p>● C-SNP: Chronic condition verification is in process Learn More</p>
<p>● C-SNP: Chronic condition has not been verified yet and member is at risk of losing plan coverage Learn More</p>

Filters ✕

Plan Status ▼

Member Status ▲

- C-SNP - Verified
- C-SNP - Pending Verification
- SSBCI - Verified
- SSBCI - Pending Verification
- SSBCI - Not Eligible
- Service Area Reduction

Product ▼

Apply Filters

SSBCI Verification

You will have three choices to filter to SSBCI verification. Members who have been verified, members who have verification still pending, members whose verification is incomplete and members who are not eligible. Select the filter option for either **SSBCI – Verified**, **SSBCI - Pending Verification**, or **SSBCI – Not Eligible** and click **Apply Filters**.

Under the member status column, you will see either a green, yellow or red circle indicating the following:

<p>● SSBCI: Condition verified for access to specific SSBCI benefits Learn More</p>
<p>● SSBCI: Condition verification is in progress for access to SSBCI benefits Learn More</p>
<p>● SSBCI: Member does not meet the eligibility criteria for access to SSBCI benefits Learn More</p>

Filters ✕

Plan Status ▼

Member Status ▲

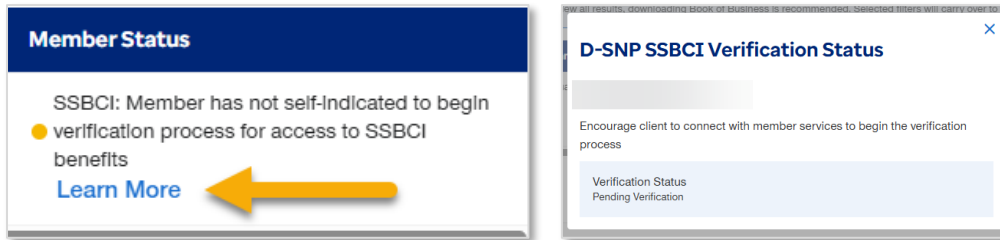
- C-SNP - Verified
- C-SNP - Pending Verification
- SSBCI - Verified
- SSBCI - Pending Verification
- SSBCI - Not Eligible
- SSBCI - Verification Incomplete
- Service Area Reduction
- Med Supp - Premium Due
- Med Supp - Premium Paid
- Med Supp - Plan Not Active





Member Status Filter, cont.

Click on the **Learn More** in the status to see additional details in reference to what is indicated.



C-SNP Possible Member Status Details

For members, whose chronic condition was verified:

Chronic condition is verified and member is eligible for the plan. *No further action is needed and member will remain in their plan*

For members, whose chronic condition is not yet verified:

Chronic condition verification is in process. *We are currently reaching out to the provider to validate the member's chronic condition*

For members, whose chronic condition has not been verified and are at risk of losing the plan:

Chronic conditions has not been verified yet and member is a risk of losing plan coverage. *Encourage the client to connect with provider about the verification or, help them find a new plan.*

SSBCI Possible Member Status Details

For members who have not self-indicated:

Member has not self-indicated to begin verification process for access to SSBCI benefits. *Encourage client to connect with member services to begin the verification process. Once this is in, if at that time the member does self-identify, the status would change to one of the current messages depending on if we were quickly able to confirm status or if it is pending verification from the provider.*

For members who have self-indicated, but verification is pending:

Condition verification is in progress for access to SSBCI benefits. *Condition verification is in progress. Note: Member may need to take action; refer to the SSBCI Quick Reference Guide on Jarvis.*

For members, whose condition was verified:

Condition verified for access to specific SSBCI benefits. *Condition verified for access to specific SSBCI benefits.*

For members, whose condition was not verified:

Member does not meet the eligibility criteria for access to SSBCI benefits. *The verification period has passed and verification was not completed. Member will retain OTC benefits, but lose access to additional SSBCI benefits.*



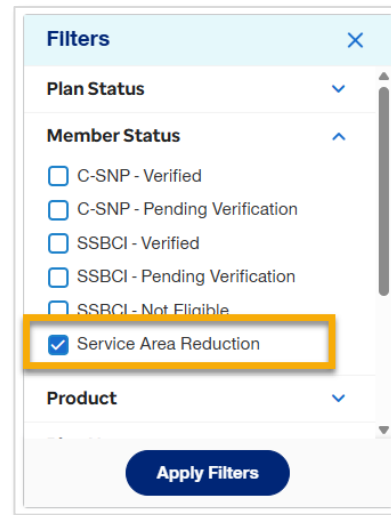


Member Status Filter, cont.

SAR Information

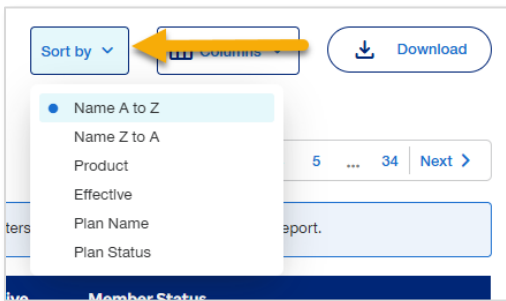
Select the **Service Area Reduction** filter to see if your members are impacted by a SAR and click **Apply Filters**.

Once selected, you will see a notification stating **Service Area Reduction**. When you click on the **Learn More**, you will see the member status message stating **Current Plan is a Service Area Reduction. Help client enroll in a new plan after 10/1.**



Using the Sort by feature

Select the down arrow next to **Sort by** to open the sorting menu. This will allow you to sort by Name A to Z, Name Z to A, Product, Effective, Plan Name, or Plan Status. This is convenient when you have a large Book of Business and just want to view specific information.

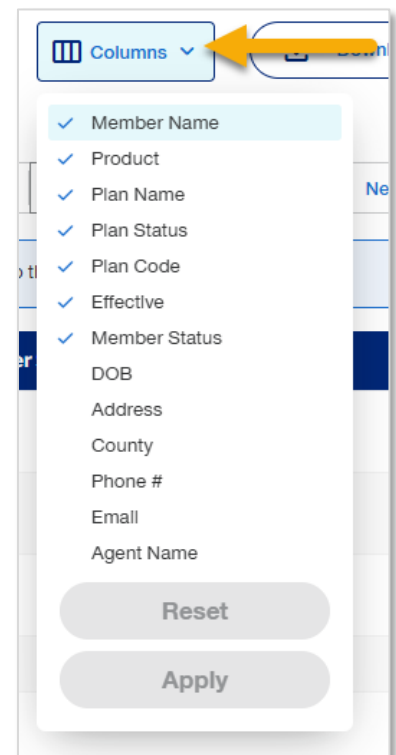


Selecting Columns

Select the down arrow next to **Columns** to change which columns you want to view. Columns include Member Name, Product, Plan Name, Plan Status, Plan Code, Effective, Member Status, DOB, Address, County, Phone #, Email and Agent Name. **The items that are already selected are the default view and cannot be unselected.**

Select the column you want to add and click **Apply**. Columns selected will be saved and used on every download until unselected.

If you want to return to the default view, click **Reset**.





Downloading Reports

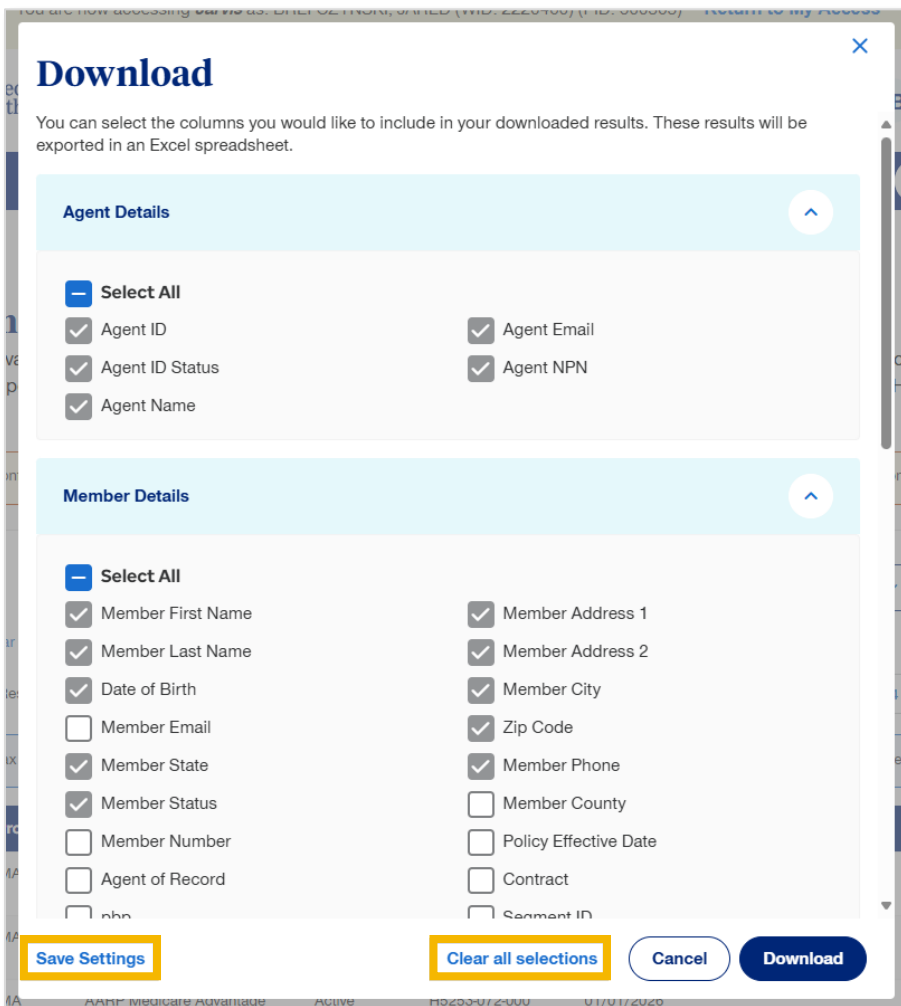
You can download your selected filtered options onto a report. The report is an excel spreadsheet listing the Book of Business data that you will select. NOTE: The filters will transfer over to the download feature.

Click on the **Download Results** button to start the process.



You will be taken to a screen allowing you to select the columns you would like to include in your downloaded results. **Items marked in grey cannot be unselected.**

You can save any selections you make by clicking **Save Settings** and they will remain until you either uncheck them or click **Clear all selections**.





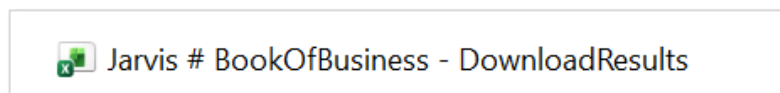
Downloading Reports, cont.

Once you have your columns selected, simply click **Download**.



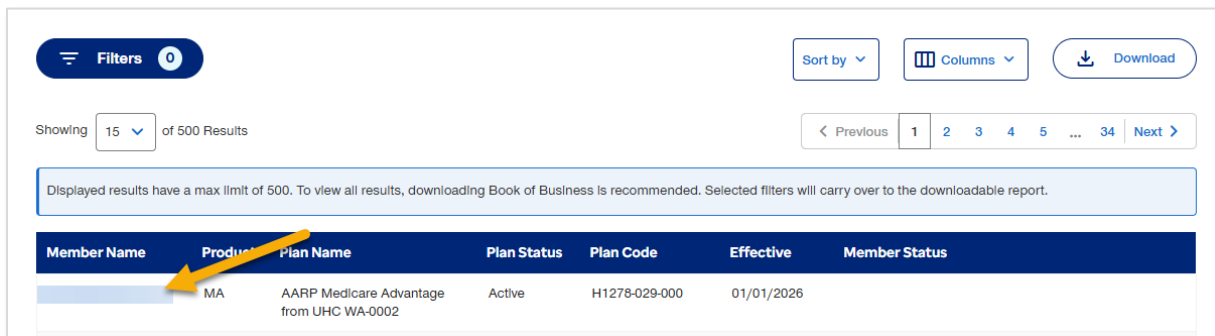
You will be taken back into your Book of Business, and the download results can be found on your device (generally in a downloads folder).

The excel spreadsheet will have a naming convention of **Jarvis BookOfBusiness – DownloadResults**

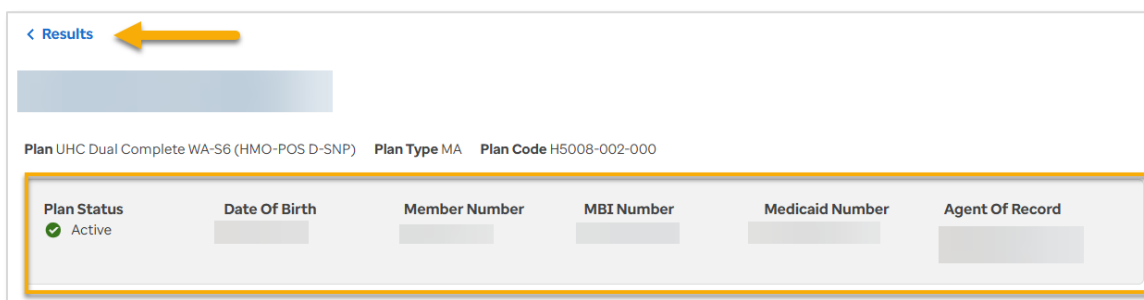


The Member Profile

In the Book of Business, your members will be listed in a blue font. Click on the member's name to access their profile.



At the top of the member profile, you will see the member's name, plan they are currently enrolled in, the type of plan and plan code. You will be able to view their active status, DOB, member number, MBI, Medicaid number and who the agent is on record (AOR). If you want to go back to your original search, you can select **Results**.





The Member Profile, cont.

In the middle of the member profile, you will see the member details plus additional tabs. The **Member Information** tab is where the system will default. On this page you can view the contact information for the member. You can see their premium and payment history information as well.

On the left side, you will have additional links to complete tasks you may need to perform to help the member, such as ordering a new Member ID card or changing their Primary Care Provider (PCP).

Member Information ← **Commission Details**

Quick Links

- [Member ID Card](#)
- [Change Provider](#)
- [Submit Member Escalation Form](#)
- [Member Escalation Status](#)
- [Start New MA Application](#)

Contact Information

Primary Phone Number: Email:

Permanent Address: Mailing Address: Authorized Representative:

Premium Status

Premium Amount: \$ 51.80

Payment Method: SSA Pay

Past Due Amount: \$ 51.80

At the bottom, you will be able to view who the PCP is and network affiliations, you can change the PCP with the member's consent and view C-SNP and SSBCI verification status for the member and the SAR information.

NOTE: For SSBCI verification status, if the member has not self-indicated, you will not see a status on the member profile.

Current Primary Care Provider

Provider Name	Practice	Network Affiliation/Medical Group	Plan Effective Date	PCP Effective Date
Ⓢ LAMBDA, CHARANJIT K.			2025-01-01	2025-01-01

D-SNP SSBCI Verification Status

✓ Verified

Effective Date of Coverage: 03/01/2026





The Member Profile, cont.

The **Application Details** tab will provide application status information including the plan type, plan code, Rx Info, when the application was received and the signature date.

Member Information	Application Details	Commission Details
Application Status:		
✓ ACTIVE		
Status	ACTIVE	
Plan	UHC Dual Complete WA-S6 (HMO-POS D-SNP)	
Plan Type	MA	
Plan Code	H5008-002-000	
State	WA	
Rx Info	Rx Bin: [REDACTED] Rx Gro: [REDACTED] Rx PCN: [REDACTED]	
Received Date	05/10/2019	
Signature Date	05/10/2019	

The **Commission Details** tab will provide you with information in reference to that member.

Member Information	Application Details	Commission Details
Commission Status		
✓ PAID		
Commission Details		
Signature Date	05/10/19	
Agent Name	[REDACTED]	
Agent ID	[REDACTED]	
Organization Name	[REDACTED]	
Source	GPS	





Quick Links - Member Profile

The **Quick Links** are found on the left side of the member profile page. These links provide tasks you can perform on behalf of the member.

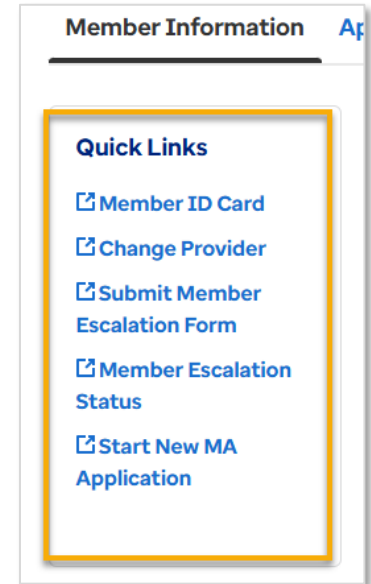
Member ID Card: Order a new member ID card for the member.

Change Provider: Change the provider for the member with the member's approval.

Submit Member Escalation Form: Escalate an issue on behalf of the member.

Member Escalation Status: View the status of any escalations you have submitted for that member.

Start New MA Application: Start a Medicare Advantage application for the member.



Ordering a Member ID Card

Assist your members with the capability to order a Member ID Card on their behalf saving members a call to customer service. Simply click on **Member ID Card** in the Quick Links.

You will be able to view the front and back of the Member ID card. On the right side of the screen, you will see a **Submit Order** which will start the process to order the Member ID card.

Current ID Card

Front

Back

Note: This is not a substitute for this member's ID card, but can provide information to help them use their health insurance. To request a new card be mailed, please use the section to the right of your screen. For help with other member related questions, please contact member services at the number on the back of the card shown above.

Replace Current ID Card

Shipping Address

The materials will be sent to the mailing or permanent address on file. If you have questions or would like an item sent to a different address, please contact Member Services.

Primary Care Provider Information

Most plans do not print the Primary Care Provider (PCP) on the card. For certain plans that require the PCP to be listed on the card, a replacement will be automatically issued when an enrolled member's primary care information is updated.

SUBMIT ORDER

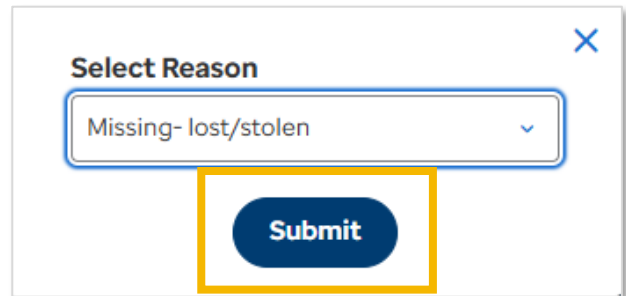
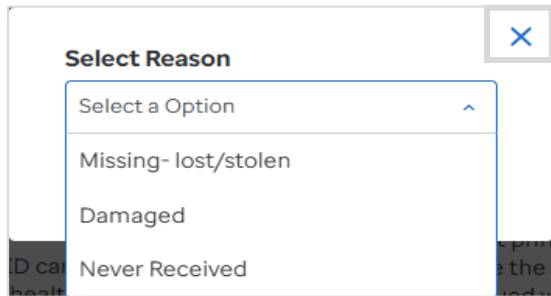
[Back to Member Profile Page](#)



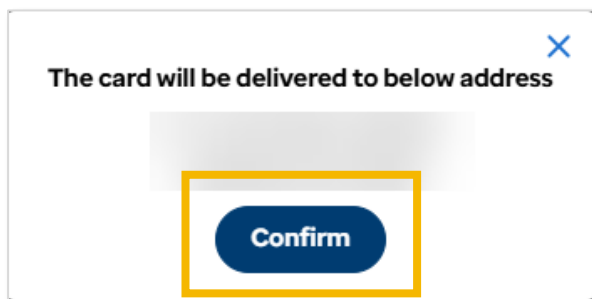


Ordering a Member ID Card, cont.

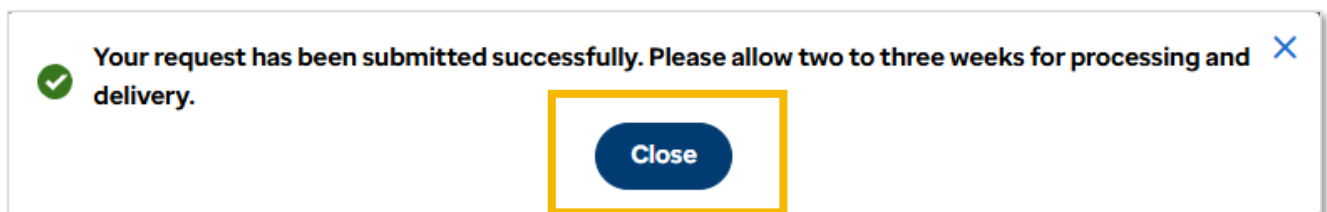
A window will open where you can click the arrow next to **Select an Option** to open a menu. Click your selection from the menu items for why the member needs a new card. Click **Submit**.



You will see a screen with the address listed that is on file. If the address is correct, click **Confirm**. If the address is not correct, the member will need to contact customer service to change their address and order the Member ID card.



Click **Close**. The new card will be sent to the member at the address you approved. You should allow two to three weeks for processing and delivery.





Changing the Primary Care Provider (PCP)

Help your members switch their PCP, saving time from calling customer service.

Click on **Change Provider** in the Quick Links to navigate down the page to the **Current Primary Care Provider**. In the box labeled **Select Plan**, click the down arrow to open the Plan status options.

Current Primary Care Provider				
Provider Name	Practice	Network Affiliation/Medical Group	Plan Effective Date	PCP Effective Date
Ⓢ LAMBA, CHARANJIT K.			2025-01-01	2025-01-01

-Select Plan- v

Change Provider

D-SNP SSBCI Verification Status

✔ Verified

Effective Date of Coverage: 03/01/2026

You will be able to select either the Current Plan or Future Plan. Once you have selected the plan status, click **Change Provider**.

-Select Plan- ^

-Select Plan- ✔

Current Plan

Future Plan

Current Plan v

Change Provider

A window will open reminding you that you must have the member's consent to change their Primary Care Provider (PCP). Once you have the member's consent. Click **Ok**.

You must obtain applicable member consent prior to changing a member's Primary Care Provider (PCP)

Ok





Changing the Primary Care Provider (PCP), cont.

You will be redirected to the Provider Search to select the PCP. Note: the search perimeters are pulled from what address the member has on the member profile.

NOTE: When updating a PCP, it will take 24 hours for the new PCP information to appear under the future PCP section. PCP changes made by mid-month become effective the 1st of the following month. PCP changes cannot be made more than one month in advance (e.g., a PCP change effective 1/1/2026 cannot be submitted in November).

Submitting a Member Escalation Form

When you or the member have not been able to resolve an issue through member services, you can submit an escalation for dedicated teams to work in the issue.

Begin by clicking **Submit Member Escalation Form** on the left side of the member profile page under the Quik Links.





Submitting a Member Escalation Form, cont.

On the next screen you will see three statements. Read each carefully.

The question under the three statements will ask you if you have reached out to Member Services.

Select **Yes**, if you or the member has reached out to Member Services.

Select **No** if you or the member has not reached out to Member Services.

[< Back To Member Profile](#)

Member Escalation Form

1. This form is for member escalation issues only. **Prior to escalating**, you or your member must have attempted to call Member Services to attempt the resolution, but the issue was not resolved.

2. This form is not approved for member use, it must be filled out on behalf of the member.

3. Complete all fields to ensure timely processing of the request. Missing Information will delay escalation of the issue.

***Required fields below.**

Have you reached out to Member Service?

Yes

No

If you select **No**, the following warning will appear, and you will be instructed to have the member contact the Member Service phone number on the back of their Member ID card.

No

Please have the member contact the Member Service phone number on the back of their Member ID card to attempt to resolve the request. If the attempt results in an unsatisfactory outcome, please submit a Member Escalation request at that time.

If their attempt results in an unsatisfactory outcome, then you may submit a Member Escalation request.

If you answered yes to the question, the Member Escalation form will appear.

Your information and the member's information are prepopulated, if not you may enter the missing information.





Submitting a Member Escalation Form, cont.

Fill in as much detailed information as possible. All blocks with a red asterisk are required.

You can upload files that pertain to the escalation by dragging them to the grey box or selecting **Open File Browser**.

Once all information has been entered, click **Submit**.

NOTE: The submit button will remain greyed out until all required boxes have been filled out.

Have you reached out to Member Service?

Yes
 No

Date of Initial Attempt to Resolve request via Customer Service: *

Agent Information:

Agent Name: * Agent WID or PID: *

Agent Phone: Agent Email:

Preferred Contact Method: Preferred Time to contact the agent:

Member Escalation Inquiry:

Member Name: * Member ID or MBI: *

Member Date of Birth: * Member Plan: *

Member Phone Number: Member Street Address:

City: State: Zip:

Preferred Time to Contact the Member: Provider Name (Optional):

Member Email (Optional): Provider Type(Optional):

Date of Service (if applicable for claims, providers services,etc. Enter mm/dd/yyyy format ONLY):

Email of Person Submitting Request Form:

Escalation Description - Please include any information important to this request and description of the issue: *

File Upload:

Drag your file(s) here
or

[Open File Browser](#)

Max. file size: 5MB





Member Escalation Status

You can track pending and escalated member issues after you have submitted a Member Escalation Form.

By selecting the **Member Escalation Status** link on the member’s profile, you can view the status of any escalations you have submitted for that member. This helps reduce the need to contact PHD for service request updates.

The screenshot shows the 'Member Information' tab selected. Under 'Quick Links', the 'Member Escalation Status' link is highlighted with a yellow box. Other links include Member ID Card, Change Provider, Submit Member Escalation Form, Start New MA Application, Contact Information, Premium Status, and Commission Details.

The **Member Escalation Status** page will show the following:

- **SR ID:** The service request (SR) identifier
- **SR Status:** The status of the request
- **Date/Time:** The date and time the request was submitted
- **Issue Reason:** Additional details of request/category
- **Notes:** Updates regarding the request

The screenshot shows the 'Member Escalation Status' page with a breadcrumb trail: Home > Book of Business > Member Escalation Status. A link for '< Back To Member Profile' is visible. The main heading is 'Member Escalation Status'. Below it is a table with the following data:

SR ID	SR Status	Date/Time	Issue Reason	Notes
SR-19173113	Pending-Held	03/16/2026 09:03:11	Benefits	Received - Awaiting Assignment: We received your request. Next Step: No agent action needed.





Start New MA Application feature

If a member wants to enroll into a Medicare Advantage (MA) plan, you can quickly access JarvisEnroll by using the **Start New MA Application** link built into the Member Profile page under the Quick Links. This will give you an advantage to have the members information prefill on the application saving you and the member time.

Click **Start New MA Application**.

Member Information **Application Details** **Commission Details**

Quick Links

- Member ID Card
- Change Provider
- Submit Member Escalation Form
- Member Escalation Status
- Start New MA Application**

Contact Information

Primary Phone Number : Email :

Permanent Address : Mailing Address : Authorized Representative :

JarvisEnroll will open with the option to start the Medicare Advantage application process.

1 2 3 4 5 6 7
New Application Medicare Info Applicant Product/Plan Questionnaire Payment Signature

New Application

Check eligibility for this member

Signature Type * Language

Select... English

Authorized Representative

Is there an Authorized Representative enrolling this beneficiary ? * ⓘ

Yes No

Close Continue →





Additional Resources to explore

Explore the Jarvis Book of Business How-To Videos

Path: Learning Lab > Content Library > 2026 National Webinar Recordings and Videos

2026 National Webinar Recordings and Videos

Explore our collection of national webinar recordings and vi

Matched on: **Name, Description**

Check out the Medicare Supplement Ease of Business

Path: Learning Lab > Content Library > Medicare Supplement

Medicare Supplement

Check out this course for all of your Medicare Supplement ne

Matched on: **Name, Description, Module Name, Module Description**

Access the Book of Business QRG

Path: Jarvis > Knowledge Center > Reference Guides > Sales Tools Guides

Sales Tool Guides

Take advantage of UnitedHealthcare tools and resou
about our tools and how to use them.

Agent Technology Quick Re
Explore quick reference guides de

- Book of Business** [🔗](#)
- Medicare Product Portal [🔗](#)
- Application Status [🔗](#)

