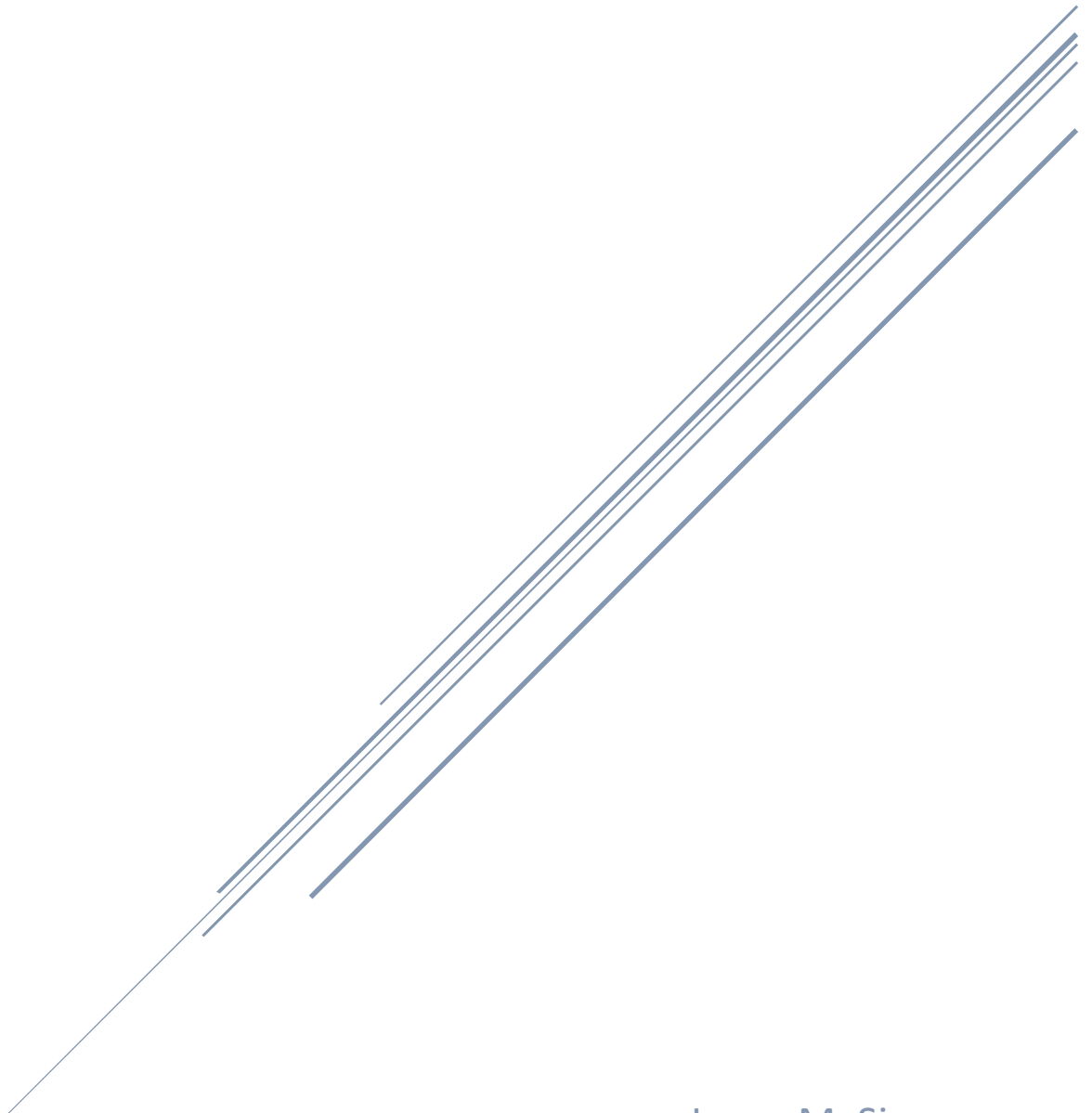


# THE R.O.P.E PROJECT

Remote Operating Plan Enrollments

Rejection Outreach Program Experience (Reach Out, Prevent Errors!)

Reduction of Paper Enrollments



Jason M. Simpson

South Carolina Public Employee Benefit Authority

March 19, 2021



**Problem Statement:**

The Public Employment Benefit Authority (PEBA) exists to “Serve those who serve South Carolina”, but currently our rejection process is paper-driven and cumbersome. A rejected transaction, or one that must be placed into a pending queue, is both problematic for PEBA staff, the employers, and ultimately can cause inconveniences and/or hardships for our subscribers. If a rejection is not resolved within sixty days, the transaction is voided, and the subscriber must wait until the next open enrollment period or special eligibility situation for allowed coverage changes. PEBA has a Contact Center that Benefit Administrators (BA) can utilize, but many times there is misinformation and misunderstandings that occur – either internally at PEBA or at the group level. Many times, a rejection can be avoided or quickly cleared by a processor who is able to work with and receive proper information / documentation from the BA by email and route electronically to their file. Through the R.O.P.E project we hope to reduce frustrations for all involved, ultimately helping expedite a subscriber’s enrollment as well as fulfilling PEBA’s agency wide goal of paper reduction.

**Background Information:**

“Serving those who serve South Carolina” is the foundation for all that we do at PEBA. As an organization, PEBA provides the essential and best benefits possible for subscribers through the management of plans we administer and offer. Through providing educational and informative publications along with manuals for both subscribers and benefits administrators, it is our goal to maintain a high level of credibility for those we serve. The central focus of this proposal is designed to help reduce and prevent rejections and decrease paper usage. Rejections are created due to incorrect/missing information or invalid coverage change requests submitted by the subscriber/benefits administrator. Transactions that cannot be processed or rejected must

be placed into a pending queue. Once a rejection has occurred, it initiates a sequence of work that often can be prevented.

Pending transaction, or a rejection submitted by a processor often leads to inconveniences and delays for the subscribers, resulting in their inability to pick up their prescription medication or delaying a doctor's visit. Not only does the delay cause potential frustration for the subscriber but it can also have a significant impact on the BA working with the individual. It also affects PEBA and group billing issues that can result in large amounts of retroactive premiums due from the subscriber or group to PEBA. This can also lead to frequent calls from the BA or subscriber to PEBA's Customer Contact Center in hopes of reviewing or clarifying why a document has been rejected or is pending, which may help resolve the issue or may cause an adverse reaction, while coverage elections and benefits remain inactive until it can be resolved. If a rejection is unable to be explained to or understood by a BA, they are left to try to correct the error on their own which may cause yet another rejection, thus starting the process all over again. A pending transaction can lead to them wondering why coverage has not been updated.

When a rejection is created by a processor, the processor can notate on the rejection; why the document is unacceptable or state specific information that is missing (see example below).

**The NOE could not be processed due to:**  
**01 Other**  
**Will need the**  
**marriage license or page one of the federal tax return in order to add spouse to coverage.**

*Figure 1 Rejection Provided by Processor*

After the processor submits the rejection, a letter is printed out (every night), and the next business day it is scanned into our Imaging system and then mailed out to the group. It is then received by the group and counted on to be routed to the appropriate office/ benefits administrator, corrected and then mailed back requiring extra work by the BA and action by

subscriber, to sign new / corrected forms all while the subscriber is still potentially without active coverage. Once received by PEBA, the letter and corrected documents are scanned into our Imaging and Workflow system and then returned to the original processor to review. In many cases, this multi-step process results in a corrected NOE resulting in the subscribers gain of coverage and activation of benefit elections. However, if the BA has failed to properly correct the NOE, made an additional error or failed to provide the required documentation this will lead to another rejection. This process can take up to a week or longer to correct even a simple mistake. \* <sup>1</sup>

With PEBA's initiative to be solutions oriented paired with the drive to increase the credibility we have amongst those we serve, the implementation of this project is vital. Through decreasing the errors and rejections, the R.O.P.E project will act as a catalyst for success in the processing department and expediting subscriber's coverage elections. The R.O.P.E project will pave the way for a better understanding of our day to day processes, completing transactions and communicating effectively with benefits administrators which will lead to a reduction in rejections and thusly improving the lives of our subscribers and BA's. Another beneficial outcome to the implementation of the project should be the dramatic decrease in PEBA's paper usage, and any % (percentage) we are able to cut our rejections down will reduce time that staff spends on preparing and sending out the rejections as well as the paper and postage cost that cycles through the mailroom. There have been steps taken to start the elimination of the printed rejection letters that go out daily. Instead of printing and sending the letters out daily, there will be a rejection report that the BA's will be able to access in EBS. This report will provide them with the member's information and then the reason the transactions was rejected. In conjunction

---

<sup>1</sup> Refer to Workflow Process, #6

with this report and the efforts made with the manual, PEBA should be able to reduce the paper usage drastically. Once completed, the “Remote Operating Procedures for Enrollment” or “Desktop Procedures Manual” for the Insurance Processors, will provide the department with guidelines to process common transactions and it will help answers many frequently asked questions. It will also include a “how to” guide that will help processors define when to reach out to a BA to help clear or prevent a rejection, the “Rejection Outreach Program Experience”.

With the focus set on the subscribers and the BA’s we work with, the creation of the R.O.P.E manual, should help minimize any human errors while processing, increase confidence and knowledge of current and new staff, increase communication between the processors and the BA’s they work with resulting in an overall reduction in rejections. The impacts this manual will create should also decrease paper usage, encourage the use of PEBA’s subscriber/BA’s online enrollment website (EBS for employers/BA’s, and MyBenefits for subscribers) and align with PEBA’s goal to “Serve those who serve South Carolina.”

#### **Data Collection:**

The focus of the data collection will be structured mainly on comparing incoming paper transaction requests vs outgoing rejections as well as transaction requests that must be routed to the Pending workflow queue. We will also compare the quantity of completed paper (Unix) transactions to EBS (online) transactions (UNIX Vs EBS transactions, Figure #3 and #5). EBS or the Electronic Benefits System, and MyBenefits are the online enrollment website that BA’s and subscribers can use in substitution for mailing paper documents in, and paper documents that must be mailed out. EBS systems requires no paper usage, increases the rate of speed that subscribers gain the access to their coverage and reduces the amount of time spent by the processors to “complete the transaction.” The importance of establishing a base line with the

current rejection system will be imperative to recognizing the importance of implementing the measures that can be defined in a manual.

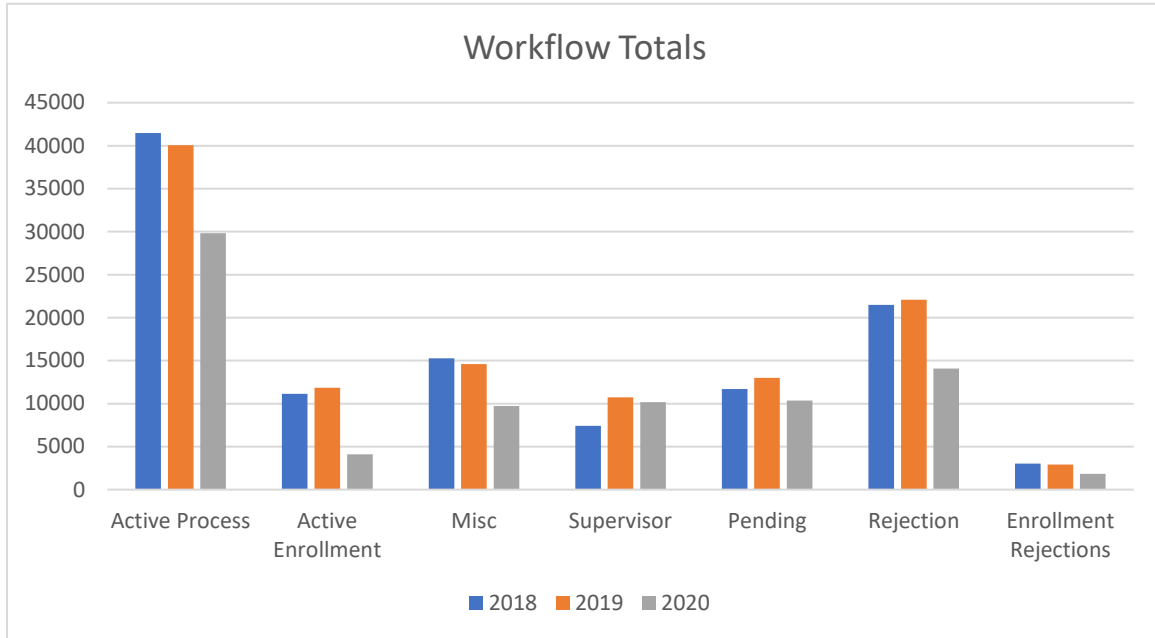


Figure 2 Workflow Transaction Totals 2018-2020 (#6, in appendix)

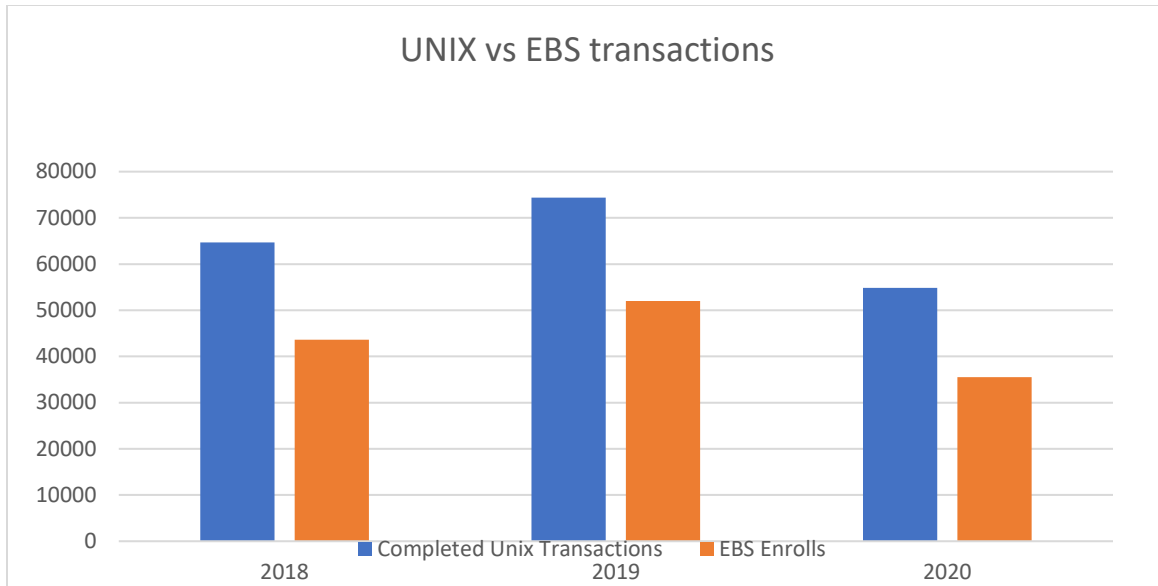


Figure 3 UNIX vs EBS Transactions (#7, in appendix)

In addition to observing the transactions vs rejection and pending totals, another highly effective data collection method would include a questionnaire survey be sent to a small group of randomly selected benefit administrators. This would help gauge their current satisfaction with the current processing and rejection procedures and it will also assist the development team in understanding other potential areas of improvement the manual could provide. By selecting a group of ten benefit administrators to send a short questionnaire to while the manual is being developed and again, six months and one year after the manual’s implementation, this will provide great feedback to the management staff and development team.

**Data Analysis:**

After reviewing the data, there is an apparent opportunity to decrease rejections and improve the customer service experience for both BA’s and subscribers. With the impacts that rejections have on the subscribers, benefits administrators and the high paper output along with staff resources (time), we can concur that additional efforts for improvement should be

introduced. Whether the transactions are rejected due to large mistakes/errors or by small, easily resolved errors, once a rejection has been created the inconvenience to the subscriber and paper usage begins. If we were able to cut down the rejections, it would have a multi-level benefit for all involved.

*Processing Department:* If rejection rates decreased due to minor rejections being corrected through email communication between the processors and the BAs, the processors would be able to focus on valid rejections verses the rejections that have easily remedied errors (such as missing pay periods on a NOE or an incomplete birthdate listed on a change NOE.) The processors would be able to more effectively monitor and manage their rejection and pending queues and resolve outstanding issues easier if the numbers weren't skewed due to minuscule errors as it is now. Additionally there can be items in the pending or rejection queue that have already been resolved.

*Subscribers and Benefit Administrators:* After reviewing the data from surveyed BA's, it is confirmed that the groups would benefit significantly if the processors were to reach out to them in order to gather required information and prevent the simple (or easily fixed) rejections. Through the rejection reason provided, the benefit administrators sometimes require additional help and further explanation in order to understand why a document was rejected. It is understood from the questionnaire data that if the processors were able to reach out to the BA's in order to correct the simple rejections such as missing pay periods/salaries or to seek clarifications on administrative or demographic information, this alone would vastly decrease the unnecessary rejections they receive weekly. The implementation of the R.O.P.E Manual for Processors that includes them to offering assistance through the "Rejection Outreach Program Experience" (Reach Out, Prevent Errors!) we would be able to better assist in the reduction of

simple rejections which in turn would benefit the administrators we work with as well as the subscribers they serve.

*Paper reduction:* Each rejection requires paper, time spent processing and sending the documents to the corresponding groups. With a high number of rejections yields a high volume of paper usage which will be decreased using the EBS Rejection Reports and the future elimination of printed paper rejections. However, in the meantime, while PEBA still prints the rejection letters, if the processors can use the manual and the Rejection Outreach Program Experience to communicate with the Benefits Administrators before rejecting a document, the paper usage, postage cost and time spent should decrease substantially.

### **Implementation of Proposed Idea**

To create the Remote Operating Plan Enrollment (R.O.P.E) or desktop procedure manual, management will request and gather input from the processing team as it begins to construct the manual and reach out protocol guide. The development team comprised of management and enrollment staff will adhere to a specific template as they build the manual. (Manual Template, Figure #4) The development team will reference their day to day tasks, the processes that they use, the data collected from the questionnaires provided by the group of BA's while they work on the manual. The manual will remain a work in progress in order to keep up with plan and procedural changes experienced throughout the year(s). The function of this manual will be to provide current and future staff a step by step guide on how to properly process enrollment/ changes requested by the subscribers. The development team will also include a "Reach out protocol" section to help PEBA Processors know when they should reach out to a BA in order to prevent an unnecessary rejection. (Question and Answer for Rejections, Figure #7)

Potential obstacles for creating the manual will be the complexity of information that needs to be collected and properly documented. There are also different peak seasons throughout the year which create the need for very thorough explanations on “how to” process information specific to the time of the year. Although the complexity of the manual is an obstacle, if the development team can work on the manual over the course of a year, they will be able to work through each of the various “seasons” which will vastly improve the quality and quantity of the information provided.

With a timeline of a year, the development team should be able to work on their regular day to day tasks while also focusing a few hours a week to work on the manual. Once the team has completed sections of information, it will need to be reviewed by the management team before it is sent to upper management and PEBA’s legal department where the manual can be assembled.

If the manual is stored on the intranet/ online, there will not be a need for a paper publication which will not financially impact PEBA at all. It would also be beneficial to store the manual online so it may be accessed if/when the staff is working remotely. By increasing the accessibility of the manual, it should quickly become a frequently used resource.

There are several potential resources for the construction of the manual. The first, will be forms that are already established by PEBA and being used by benefits administrators currently. By using the forms already in use, the development team will have the building blocks needed to create a complex “how to” guide specific for each form.

*For example: The manual will include the Address Change form. This section within the manual will adhere to the template which includes, an explanation of the form and what it is used for as well as a step by step guide on how to process the information on the form*

*when completed by the BA. (Address Change Form excerpt from ROPE Manual, Figure #5).*

The second great resource the development team will have is the enrollment staff and the benefit administrators they work with. The staff will be able to provide their procedure input and FAQ's. Also, with the information provided by the group of administrators surveyed, the development team can focus on solutions to their most frequently rejected errors. The manual will provide documented solutions to the common problems experienced by processors and administrators alike, which in turn should help decrease the rejections.

There are both internal and external stakeholders that would benefit from the creation and implementation of the manual/ reach out protocol guide. The internal organization stakeholders are the benefit administrators PEBA works with daily and each of the entities we are associated with. Although they are not directly participating in the production of the manual and the improvement within the processing department, they are highly impacted by any changes made by PEBA. Management staff will be able to maintain an open line of communication to understand how the implementation of the manual has hopefully improved their job and their subscriber's experience. Additionally, the processors at PEBA, are another example of internal stakeholders. They are fundamentally tied to the production and creation of the manual and will benefit most by it. With the success of the manual/ reach out protocol, they will see vast improvements to their daily work lives. For the processors, the manual will increase the ease at which they work, as they will be able to easily reference a guide to help them process information and effectively communicate with a BA when necessary.

We also have the external stakeholders, otherwise known as the subscribers, we serve. These are our most valued stakeholders. The subscribers do not concern themselves with the day to day procedures of PEBA/ processors or with their BA's. They simply trust that their

information, coverage changes and enrollments are handled with the utmost care and efficiency. With nearly half a million stakeholders, statewide, they are truly PEBA's biggest asset. With delayed enrollment having the highest impact on the subscribers, it is our focus to create an effective manual that will reduce any future inconveniences within their lives.

Integration of the manual should be effortless. The purpose of the manual and the information it will provide us is designed by and for the staff at PEBA. It should quickly become the number one referenced guide for the processing department. With the ability to access it remotely to help answer or clarify a topic, help a processor walk through a coverage change step by step, the manual should be utilized as often as possible. Not only will this manual provide answers to FAQ's, but it will also be an integral part of new staff training and their success. It should be referenced when there is an initial question on "how to" correctly process a document or if the processor thinks they can prevent a rejection through referencing the "Reach out Protocol" within the manual.

#### **Evaluation Method:**

Once the Remote Operating Plan Enrollments (R.O.P.E Project) Manual is completed and in use by the PEBA processing team, we will be able to review the number of rejections from year(s) prior and compare this information to the number of current/ongoing rejections as a percentage of processed transactions. With daily and annual reports, we should be able to track the decline in rejections, cost and recognize general department improvement and confidence. We will also be able to evaluate the effectiveness of the manual through the percentage of paper reduction and efforts by those in the PEBA mailroom.

Overall, to evaluate the effectiveness of the manual, we will be able to pull the processing reports and continue to compare the numbers from years prior to post- R.O.P.E project. It would

be pertinent to continue to work with the group of benefit administrators as we did prior to the implementation of the manual/reach out protocol guide with our staff. It will be important to follow up with the BA's every six months for at least a year to gauge the effectiveness of the manual. The questionnaire with the short series of questions that will help us gauge their satisfaction with the rejection process and the communication between themselves and the PEBA staff just as we did before we began working on this project.

*Questions to send to the benefits administrators include:*

1. What are the commonly received rejection reasons?
2. Do the processors reach out before rejecting, if it is a problem that can be easily solved?
3. Do you think it would be beneficial if the processors reached out before rejecting a transaction for a simple mistake?
4. What are the general issues you commonly run into that cause rejections?
5. What are a few things that would make the rejection process easier?
6. Are there any topics that cause rejections that need further explanation?

Reviewing the weekly and annual reports along with the continued communications with the select BA's we should be able to properly evaluate the effectiveness of the manual.

### **Summary and Recommendations:**

In summary, through reaching out to benefit administrators as well as working with the staff at PEBA, it is apparent that it would be highly beneficial to create and maintain a Remote Operating Plan for Enrollment/ Desktop manual. The initial construction of the manual will take a great deal of effort however the effects will compound over time and create a highly beneficial outcome that will improve the relationship between PEBA, the subscribers and administrators we

work with. It will also reduce rejections thusly decreasing costs, minimizing any subscriber coverage delays and improving the rapport between PEBA and their covered entities.

My recommendation would be that the manual that is created is reviewed yearly or as changes occur, for example, our mid-year COVID Flex Spending Account changes. The manual should be reviewed just like the other PEBA printed manuals (Benefit Administrators Manual and the Insurance Benefits Guide). The processes and procedures within the manual should be reviewed by at least three staff members comprised of at least one manager and two other enrollment processors to confirm the accuracy of information. It would be my recommendation that the staff who use the manual daily, to make notes within the manual as they see fit. This manual will be a great resource for those who utilize it and it is my hope that it will benefit the enrollment department at PEBA for years to come.

## Glossary:

**Advance Key / Suspense transactions:** Transactions that have been entered with a future billing cycle date or a transaction that has been entered in EBS / MyBenefits but is not yet completed. When an account is in this status the account is locked from entering additional transactions until the existing transaction is completed and/or applied.

**Annual open enrollment-** the period during October each year where eligible subscribers may change their coverage. Some changes are allowed every year (ie. Health and Vision), where Dental changes are offered every other year. Other changes such as Life Insurance and/or Supplemental Long-Term Disability may be offered by the Vendor as a guaranteed issue.

**BA (Benefit Administrator)-** The individual at the group level (typically the HR office) who the subscribers work with to begin making their coverage/enrollment changes.

**EBS (Employee Benefit Services)** is a secure website that gives Benefit Admins ability to manage subscriber's enrollment and changes by providing instant, online access to insurance benefits information, reporting data and billing reports.

**Intranet-** PEBA specific, internet home page for employees. Forms, policies, and other organizational specific documents are stored here. **NOE-** Notice of Election, form. Used by subscriber to enroll in, change or edit their information.

**MISC-** (Miscellaneous) transactions such as address, dependent social security number updated and other transactions that do not change the subscriber's premium totals.

**MyBenefits-** a secure website that allows subscribers to access their own enrollment information in PEBA insurance benefits' enrollment database. Through MyBenefits, they can view their enrollment information and make some enrollment changes to their coverage, as well as approve changes initiated through EBS.

**Processors-** PEBA staff members of the Enrollment team who understand the rules and guidelines for every new hire enrollment/change or modification made to a subscribers file. They actively administer all changes made on the subscriber's behalf.

**Special Eligibility Situation (SES)-** special eligibility situation is an event that allows you, as an eligible employee, retiree, survivor or COBRA subscriber, to enroll in or drop coverage for yourself or eligible family members outside of an open enrollment period.

**Subscriber-** State/City/School district/ PEBA covered individual (who is eligible for PEBA benefits)

**Supervisor-** transactions that require further research or need administrative approval to process. Certain transactions are categorized under this folder and the team supervisor reviews the received documents.

### Types of transactions/ Workflow Queues:

Active Enrollment- Transactions that are received for our annual Open Enrollment period.

Active Process- Includes new hires and changes due to Special Eligibility Situations, as well as Terminations.

EBS Enroll- Transactions requiring PEBA approval that are initiated and completed in EBS and/or MyBenefits. Required documentation can be electronically uploading or mailed to PEBA.

MISC (Miscellaneous)- Transactions that do not alter a subscriber's coverage. MISC transactions may include address changes, dependent social security number updates or Medicare number updates.

SUP (Supervisor)- Transactions that require further review or research that is to be completed by a supervisor.

## Appendix

**Name of Form:** (Name of the Form being explained)

See form example in appendix

**Policy or policies that pertain to this form:**

Reference specific policy or rules that require the use of this form to make changes within the Peba system.

**Explanation of the \_\_\_\_\_ Form:**

This will provide a brief explanation of the form and what types of changes the form may provide and any additional information the processor may need to better understand the document(s).

**Requirements to Successfully Process:**

Will detail what documents and information will be needed for the processor to complete the transaction. May include insight into why a rejection may be necessary.

**Processing this form:**

This will provide a numbered, step by step guide on how to process the specific form.

**Notes/Tips:**

Helpful tips associated with the specific form or processing procedure will be provided here.

**Additional Notes:** This will be a space provided to help encourage processors to notate any key information they find beneficial. This section will be included in each of the form sections.

*Figure 4 ROPE Manual Template*

**Name of Form: Address/Name Change**

See form example on page \_\_\_\_.

**Policy or Policies that pertain to this form:**

Form commonly used to update member's demographic information.

The information stored in UNIX for the member is sent to PEBA plan vendors every night. If there is an address change to be processed, it is important that it is processed properly to ensure benefit statements and cards are sent to the correct address.

**Explanation of Address Change Form:**

Members use this form to provide any demographic change information. They can update/change any of the information provided on the form including their name, address, phone number or email address.

The box in the top corner of the form is designed to help the mail room staff.

**Requirements to Successfully Process:**

A live signature from the member is required to update any information provided on the form. See other allowed signature types in appendix, font signature needs to be rejected.

If the member is changing their name, they will need to provide one of the following: social security card with their new name, a marriage license, divorce decree, driver's license or passport.

**To Process in UNIX: Address changes are found in the MISC Queue folder**

1. A1/ Enter NOE Screen
2. Screen scrape member's' information (Double click in IAFolder). Enter action: C1/ ID DATA Screen.
3. Check for member's signature/ all necessary documentation if applicable.
4. Enter all information found on address change form. If information is already updated in UNIX an error message will pop up stating "must key something to initiate C1" Use F3 button to exit out of screen and notate on the form that information is already on file.
5. Annotate document in workflow with initials/ approval
6. "Complete" in workflow to Purge

**Notes/Tips:**

- If New Name doesn't appear in UNIX when processing:  
This happens when the Mail Room is not sure or did not enter the new name in

*Figure 5 Address Change Form, ROPE Manual Example*

| <b>Transactions IN:</b> | <b>2018</b> | <b>2019</b> | <b>2020</b> |
|-------------------------|-------------|-------------|-------------|
| Active Process          | 41454       | 40073       | 29807       |
| Active Enrollment       | 11152       | 11838       | 4108        |
| Misc                    | 15263       | 14594       | 9709        |
| Supervisor              | 7411        | 10737       | 10163       |
| Pending                 | 11692       | 13014       | 10361       |
| Rejection               | 21499       | 22070       | 14086       |
| Enrollment Rejections   | 3009        | 2920        | 1827        |

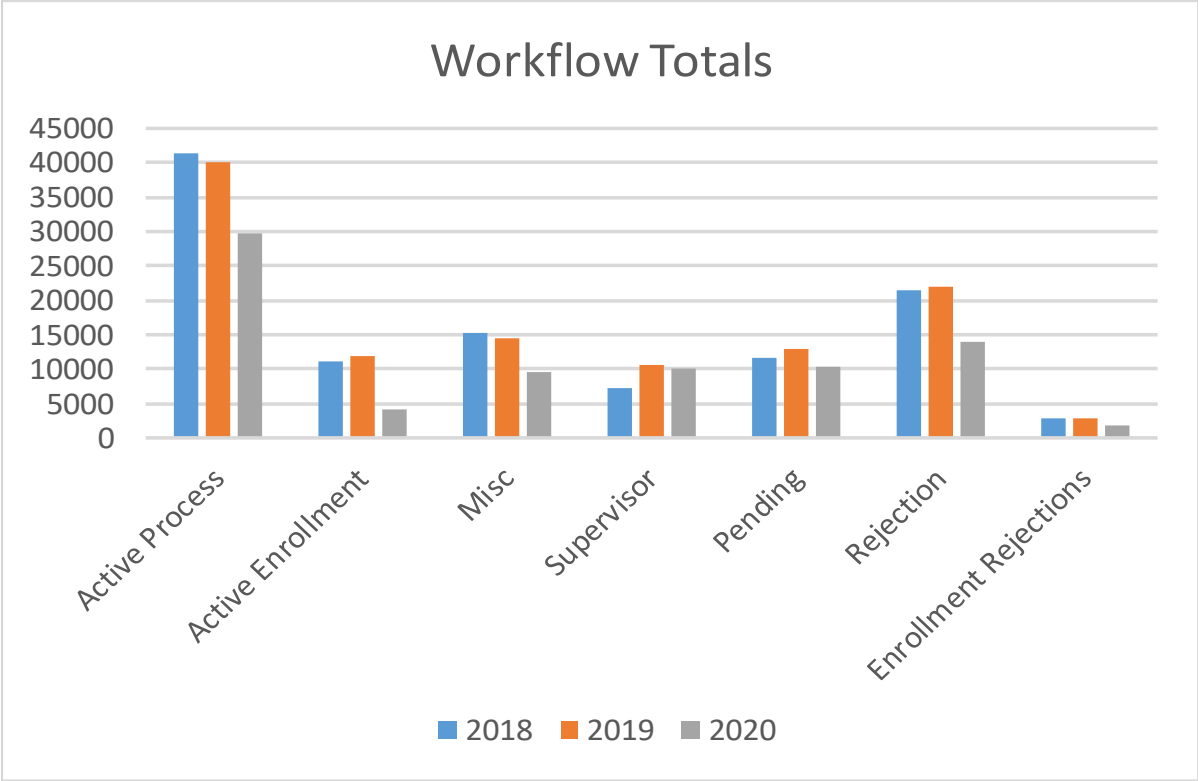


Figure 6 Workflow Totals 2018-2020

|  | 2018  | 2019  | 2020  |
|--|-------|-------|-------|
| <b>Completed Unix Transactions (1)</b> | 64653 | 74340 | 54837 |
| <b>EBS Enrolls (2)</b>                 | 43590 | 51984 | 35550 |

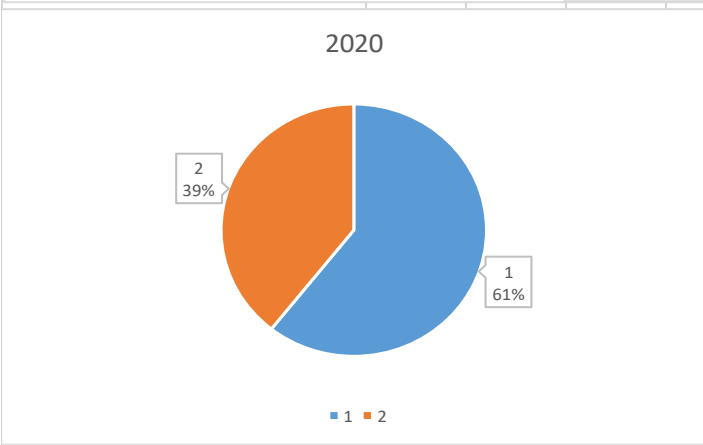
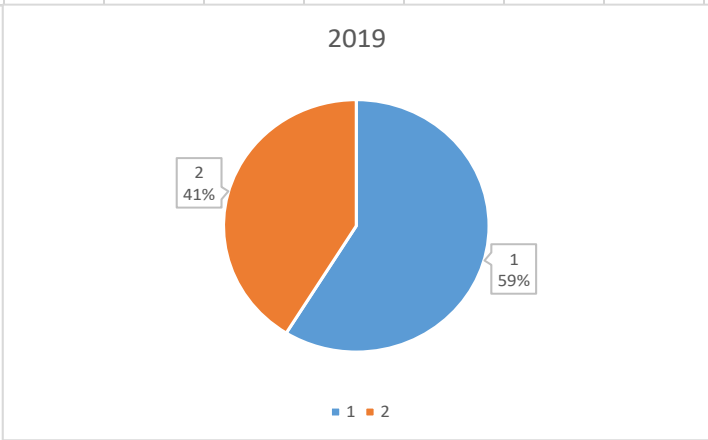
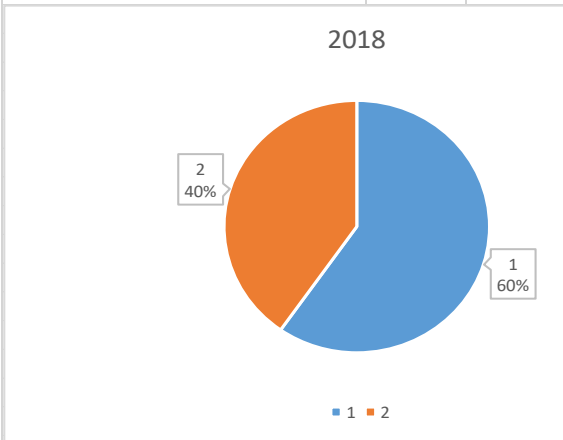
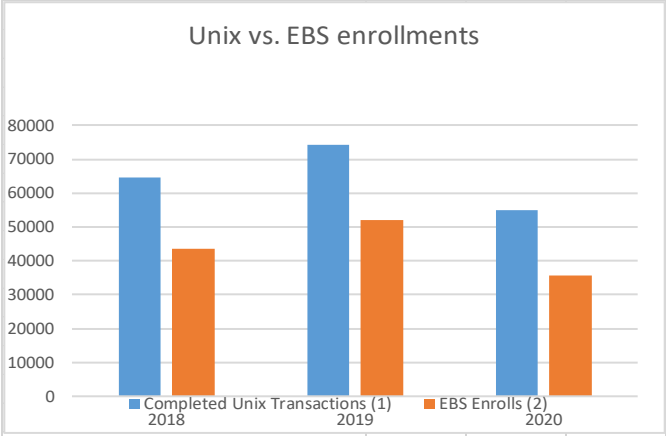


Figure 7 UNIX vs EBS Transactions 2018-2020

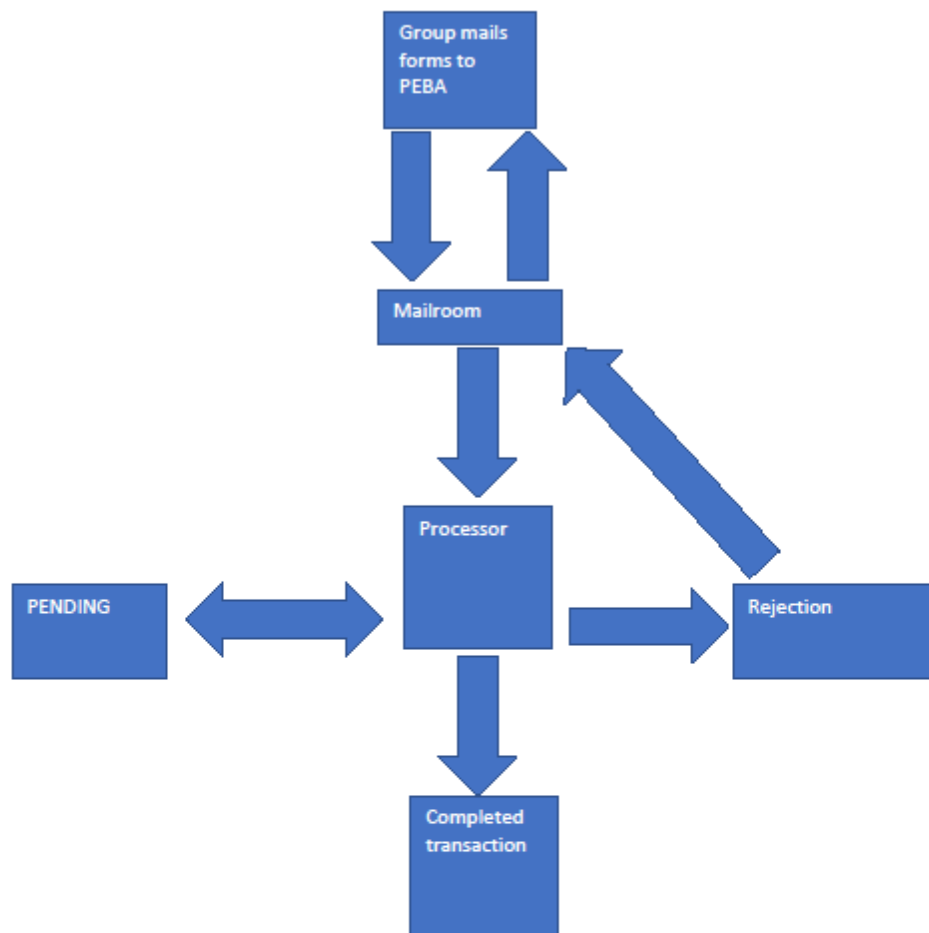


Figure 8 Workflow Process

## Reach Out Protocol/ Q & A for rejections k

### Understanding when to reach out to a Benefits Administrator vs rejecting the transaction

Q. If there is missing Administrative information should I contact the benefits administrator?

A. Yes. The BA can provide information such as Hire date, Effective date, Annual Salary, Pay Periods.

Q. If I don't understand action that is being requested on NOE should I contact?

A. Yes. If you are not quite sure what the BA is trying to convey please contact for clarification.

Q. What will we accept in the Beneficiaries area on NOE's?

A. If it is hard to read the DOB in the beneficiaries' section, but the DOB is listed for that same person in the dependent's section.

If a letter is darker than the rest, but it is legible.

If dependent is listed as 'child' or 'spouse', look for LFBC or documentation that shows sex.

If beneficiary is missing or is not designated for Basic or Optional Life coverage it defaults to the Estate of subscriber per the Plan.

If there you need clarification on a birthdate or spelling of a name, contacting the BA would be acceptable.

Q. Should I contact if a new hire is a dependent on another Active file?

A. Yes. If a dependent is on another PEBA file, contact that BA to drop due to gain of state benefits. Annotate the new hire NOE and place in pending. Follow-up in a few days to see if the dependent has been dropped and can now be keyed.

The processor can also rejection the transaction if it is a peak processing time.

Q. How should I handle new hires that are on Cobra, Retiree coverage, or dependents on these files?

A. If it's subscriber we are BA for (group 100000 or 200000), confirm premiums up to date with Accounting, term coverage and key ANOE. If Local Sub or non-SCEIS group, contact BA for proper termination form.

Q. Should I contact if a Subscriber is transferring to another state entity?

A. Yes. Contact the losing BA and advise them to please transfer the subscriber to the new group since we have received new hire (TT) paperwork on the former employee. Annotate the new hire NOE that you have reached out to losing BA and place in pending. Follow-up in a few days to see if the termination has been received.

Q. Should I be looking for dependent documents before I reject?

A. Yes. It just takes a minute to scan audit file or check history to see if dependents have ever been covered and go to that file and check for LFBC or Marriage license.

Processor can reach out to the BA if they would like to, it is not required since documentation should be submitted.

Q. Should we contact the BA for missing SSN or DOB?

A. Yes. BA's most of the time have that information in their files.

Q. If the NOE has been rejected more than once should I contact?

A. Yes. The BA may not fully understand how to clear the rejection to get the subscriber the benefits they need. Sometimes talking to the BA will help them understand exactly what they are trying to accomplish.

Q. Should I be looking at the suspense file if transaction is in advance key?

A. Yes. Sometimes the BA may start a transaction in EBS, and then send in a paper NOE. Call the BA and ask them to either complete or delete the transaction in EBS so we can take care of the subscriber. Please do not automatically send to pending.

*Figure 9 Reach out Protocol/ Q & A for rejections*