

PlanCompare ONE

Professional User's Guide



PLAN YEAR 2021

ConnectureDRX Documentation

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About Connecture

ConnectureDRX offers the most widely adopted Digital Medicare shopping, quoting and enrollment solution, providing millions of consumers every year with a simple digital experience for finding their best fit plans. With gold standard drug pricing, ConnectureDRX arms consumers with reliable and time-tested out-of-pocket cost estimates to support better decision-making. ConnectureDRX's multi-channel automation saves consumers, carriers, brokers, and call centers time navigating Medicare complexities, improving member satisfaction and retention.

ConnectureDRX has been delivering compliant solutions for 20 years. Supporting 9 of the 10 top U.S. health insurance carriers, more than 50 national and regional FMOs, and with 4,600 plus plans on our platform, ConnectureDRX processed 800,000 Medicare and Medicare Supplement enrollment applications in the past year. Our regular consumer market surveys from more than 16,000 respondents affords unique insights on consumer shopping and enrollment behavior, driving innovation in research and development.

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Introduction

PlanCompare ONE for Professionals is the decision support solution that empowers Brokers and Call Center Agents (referred to collectively throughout this guide as 'Agents') to make personalized Medicare plan recommendations in which Medicare beneficiaries can electronically enroll. Agents can use PlanCompare ONE for Professionals to match beneficiaries with available plans based on individual preferences and provide them with estimated out-of-pocket costs.

After a beneficiary chooses a plan, PlanCompare ONE for Professionals can be used to assist the beneficiary with enrollment. Beneficiaries can also self-enroll based on a quote or application that has been sent to them by an agent or an agent's personalized shopping link.

IMPORTANT: While this user guide explains how to use all the features of PlanCompare ONE for Professionals, each customer's rules, regulations, and site configurations may vary. Customers may use the portions of this guide that apply to their specific set-up to supplement their training materials and guides.

PlanCompare ONE for Professionals provides the following benefits in an omni-channel experience:

- A streamlined shopping workflow for viewing, comparing, and quoting plan options to beneficiaries
- Beneficiary profiles that securely save personal information and keep track of enrollment progress
- A consultation workflow that guides Agents through the process of collecting relevant information for creating personalized recommendations
- Electronic Scope of Appointment to capture required SOA documentation from a beneficiary electronically or to upload files, streamlining the process for agents
- Ability to add customer / carrier specific call center scripts to ensure call center agents are meeting CMS guidelines
- Drug and pharmacy finding tools that allow agents to assist beneficiaries with specific drug and pharmacy coverage questions independent of the shopping and quoting workflow
- Load profile data by manual input, preload file (see Member Eligibility) or through Salesforce integration (see additional documentation)

Altogether these tools enable Agents to recommend the plan that provides the greatest benefit to the beneficiary.

About this Guide

This guide describes the features available in PlanCompare ONE for Professionals.

This guide explains the standard workflows available based on the default configuration of the product. Depending on the configurations your site administrator has chosen for your specific site, the actual features you see may vary from what is depicted in this guide.

Audience

This user guide is intended primarily for licensed customers of PlanCompare ONE for Professionals to supplement your training and educational materials for administrators and agents to understand how to use the features of the product.

Login Page

On the login page, agents can log in to the PlanCompare ONE for Professionals site or reset a forgotten password.

Note: if the company uses Single Sign-On, agents will bypass this page.

HealthCARE co

Welcome

Log in and get started

1 Username

Password

Log in

2 [Forgot username](#) [Forgot password](#) 3

No account? Contact your manager to get access.

Welcome to Product Demo

One shopping | One Location | One administration

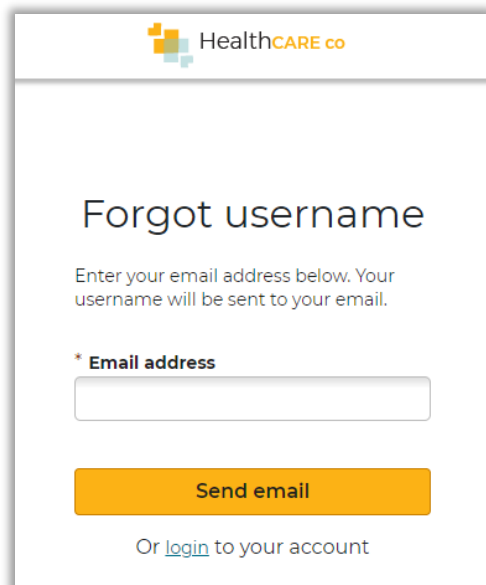
- Medicare shopping and enrollment tools
- Present plan options and accurately calculate drug costs
- Capture leads and track their status through enrollment
- Manage all your applications through one portal

#	TASK	DETAILS
1	Log in	To enter PlanCompare ONE for Professionals, enter Username and Password, and click <i>Login</i> .
2	Forgot username	If agents forget their username, they can reset it by selecting <i>Forgot username</i> . This functionality requires that agents have an email on file in the agent record. This link opens the Reset Username page.
3	Forgot password	If agents forget their password, they can reset it by selecting <i>Forgot password</i> . This functionality requires that agents have an email on file in agent record. This link opens the Reset Password page.

Forgot Username

Below are the steps for the Forgot Username process.

Step 1 – Enter Username



The screenshot shows a web form titled "Forgot username" from HealthCARE.co. The form instructs the user to "Enter your email address below. Your username will be sent to your email." It features a text input field labeled "* Email address" and a yellow "Send email" button. Below the button is a link that says "Or [login](#) to your account".

Step 2 – Check email

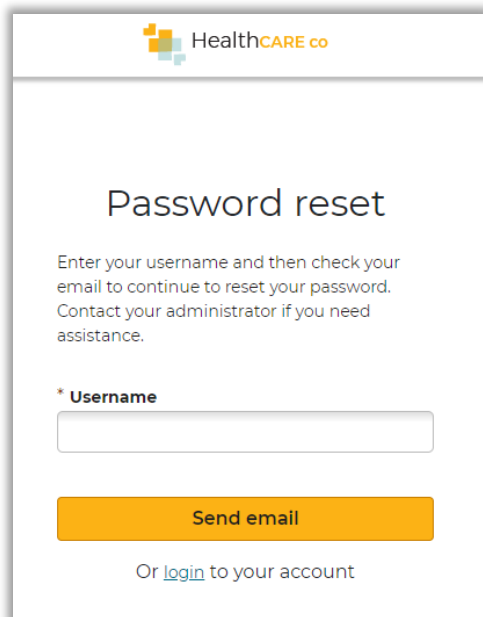
<need screenshot>

#	TASK	DETAILS
Step 1	Send a username recovery email	Enter the Username for the account and select <i>Send email</i> . The system sends an email to the email account associated with the Username. NOTE: If an email address does not exist on the professional user's account information, this process should not be used. Contact your site administrator.
Step 2	Forgot Username email	The user's Username is contained in the email. The user may then attempt to login to the site again.

Forgot Password

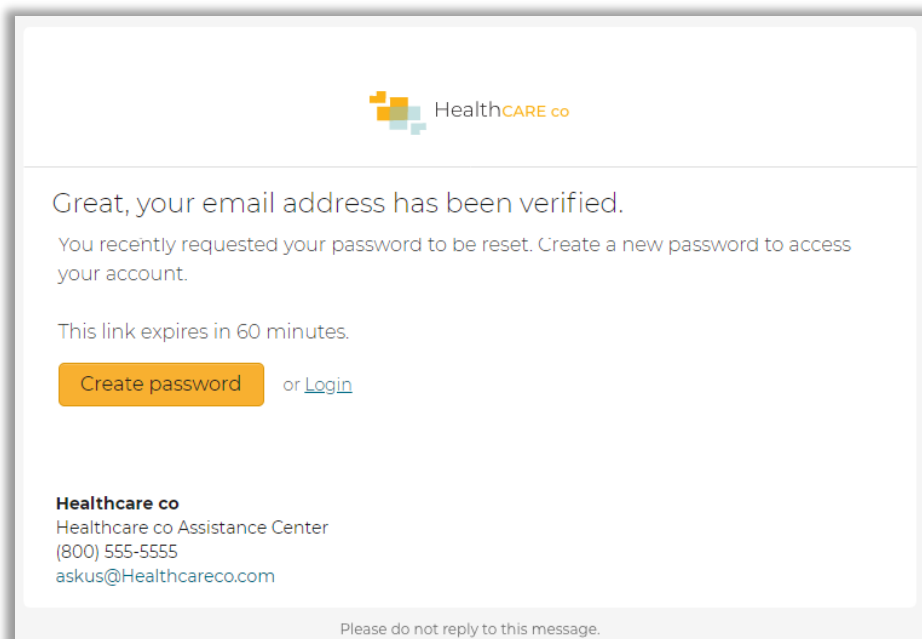
Below are the steps for the Forgot Password process.

Step 1 – Enter Username



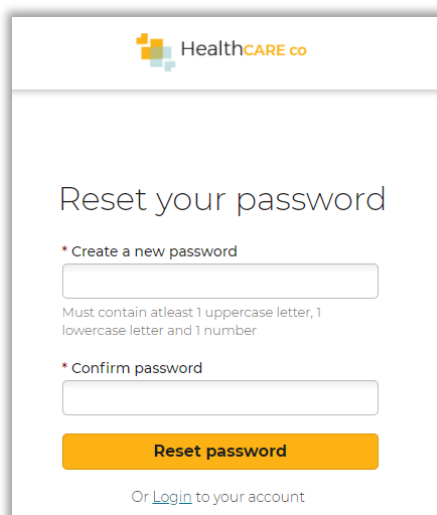
The screenshot shows a web form for password reset. At the top is the HealthCARE co logo. The title is "Password reset". Below the title is a paragraph: "Enter your username and then check your email to continue to reset your password. Contact your administrator if you need assistance." There is a label "* Username" followed by a text input field. Below the input field is an orange button labeled "Send email". At the bottom, there is a link: "Or [login](#) to your account".

Step 2 – Check email



The screenshot shows an email verification message from HealthCARE co. The header includes the HealthCARE co logo. The main text says: "Great, your email address has been verified. You recently requested your password to be reset. Create a new password to access your account." Below this, it says: "This link expires in 60 minutes." There is an orange button labeled "Create password" followed by the text "or [Login](#)". At the bottom, there is contact information for Healthcare co: "Healthcare co", "Healthcare co Assistance Center", "(800) 555-5555", and "askus@Healthcareco.com". A footer note says: "Please do not reply to this message."

Step 3 – Reset password



HealthCARE co

Reset your password

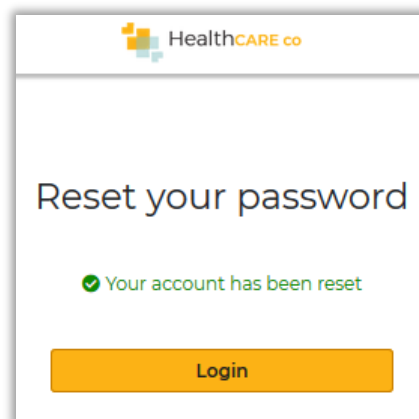
* Create a new password

Must contain at least 1 uppercase letter, 1 lowercase letter and 1 number

* Confirm password

Reset password

Or [Login](#) to your account



HealthCARE co

Reset your password

✓ Your account has been reset

Login

#	TASK	DETAILS
Step 1	Send a password recovery email	Enter the Username for the account and select <i>Send email</i> . The system sends an email to the email account associated with the Username. NOTE: If an email address does not exist on the professional user's account information, this process should not be used. Contact your site administrator.
Step 2	Reset Password email	Open the Reset Password email and select the <i>Create password</i> button. This link will navigate the agent to PlanCompare ONE for Professionals to reset their password.
Step 3	Enter a new password	Enter the new password. It is recommended that passwords contain letters and at least one number. Password may not contain any of the following characters: & < > ' " % + Confirm new password by entering it again. The password entered in both fields must match. Click <i>Reset password</i> button. User will be notified if the password reset was successful. The new password is effective immediately. Select the <i>Login</i> button to log in with the new password.

User Interface and Navigation

PlanCompare ONE for Professionals provides a clean, intuitive layout that allows agents to quickly and easily access the pages and functions needed to perform tasks.

Global Header

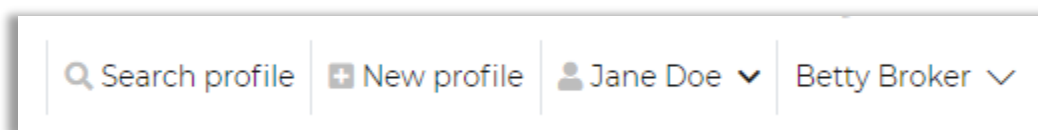
Using the Global Header links, agents can *Search* for a profile or create a *New profile* from any page in the system and browse available plans.

- **Plans** (if enabled on the site) – Click this button to access the plan list page and search for plans available in a ZIP code if the beneficiary does not want to provide first and last name. This supports anonymous browsing of plans.
 - **NOTE:** If an enrollment is made from this path, the **information is not saved** to a profile and is **not retrievable**. Agents should always start the enrollment from a Profile to be able to save and retrieve information.
- **Search Profile** – Click this button to access the Search beneficiaries page, where agents can search for an existing beneficiary profile in the system. If a beneficiary profile exists, this is how agents can access the beneficiary's saved information, including any enrollments in progress.
- **New Profile** – Click this button to begin a new consultation for a beneficiary who does not have a profile. If the beneficiary is interested in shopping for a new plan, agents can calculate a personalized view of available plans and estimated out of pocket costs for each plan. They can compare plans, send a quote, and assist the beneficiary in completing enrollment.

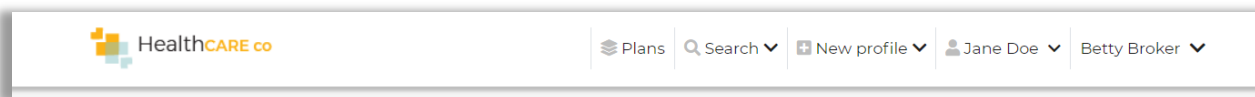
Agents will see "- - -" if there is no active Profile they are currently working with or they will see the beneficiary's name if they are working with a specific Profile.



Global header with no active profile



Global header with active profile displaying beneficiary's name



Global header with Plans (browse anonymously) enabled

IMPORTANT: If users are already working with a beneficiary profile or are in the middle of another process when they click *Search profile* or *New profile*, any unsaved information is lost.

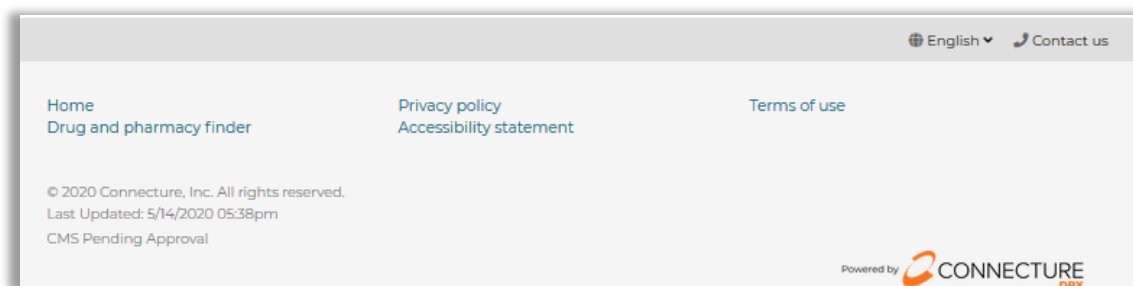
Agents can click on their name in the top right corner to access the Account Overview (covered in Agent Account Overview) and to log out.

If site language translation is turned on, the agent will see the dropdown for language selection in the global header. For PY2021, PlanCompare ONE for Professionals' Enrollment can be translated into Spanish. Translating the shopping experience is not currently supported.

Agent sees the global Contact Us link in the header to access the customer's contact information.

Global Footer

On the bottom of each page, the footer contains links that allow agents to view additional information and access additional pages. Links can be either internal or external. If external, the links will open in a new tab or window based on the user's browser settings.



Footer

These links vary by site but may include the following:

- Home
- Drug and pharmacy finder
- Privacy policy
- Accessibility statement
- Terms of use

Sub-header in Footer

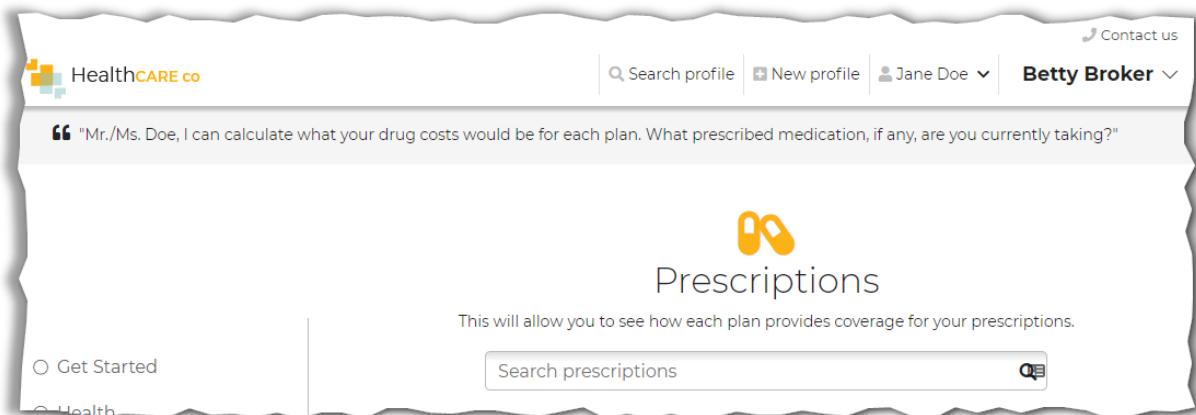
This is the bar in the footer section which can contain links to switch languages or view contact information. The sub-header may include the following:

- Print
- Language
- Contact us

Call Center Scripts and Agent Instructional Information

Site administrators may add scripts or instructional text to appear on various pages throughout the system. These scripts contain prompts to guide call center agents or brokers through the process of working with a beneficiary on a specific page. Scripts can contain dynamic information about the profile the agent is working with.

For example, here is a script at the top of the prescriptions page that shows the dynamic beneficiary's last name (Doe) in the screenshot below:



Beneficiary Profile

Salesforce Integration with Connecture Connect

If your organization uses Salesforce, please reach out to the Customer Success Team to learn about Connecture Connect, a managed package available in Salesforce. Connecture Connect syncs profile and enrollment information between Salesforce and Connecture sites to reduce duplicate entry and streamline information for agents in PlanCompare ONE for Professionals.

There is a separate configuration and user guide for installing and setting up Connecture Connect in Salesforce. Please reference that for detailed information.

Search Profile

The Search beneficiaries page allows agents to search for an existing beneficiary's profile and view saved profile information, quoting history, and enrollments in progress or completed.

The Search beneficiaries page appears when agents first log in to PlanCompare ONE for Professionals. Agents can also access this page by clicking the *Search profile* link in the global header at the top of any page in the site.

The screenshot shows the 'Search beneficiaries' form. It features several input fields for searching by personal information, application dates, or agent username. A red circle with the number 1 points to the 'First name' field. A red circle with the number 2 points to the 'Application start date' field. A red circle with the number 3 points to the 'Personal code' field. A red circle with the number 4 points to the 'Search profiles' button. The form also includes an 'OR' separator and a text instruction about using a personal code.

Search beneficiaries

First name **1**

Last name

Date of birth

Phone number

Email address

Confirmation number

MBI

2 Application start date

Application end date

Agent username

OR

Enter a beneficiary's personal code they mentioned when they contacted you so you can pick up where they left off. We will take you to view plans with their information they already entered.

Personal code **3**

4 Search profiles

Search beneficiaries

Search results
An applicant has completed the SOA and/or enrollment. A registrant has not completed the SOA or enrollment.

Sort
 last updated ▼

[Kelly Wallace](#)
 1234 main st Atlanta, GA 53130

kwallace@gmail.com
 (555) 555-5555

● Registrant

Bob Williams
 bwilliams

updated 12/03/2019

[Kelly McIntire](#)
 1234 main st Atlanta, GA 53130

Jmcintire@gmail.com
 (555) 555-5555

● Applicant

Nathan White
 Nathan.White

updated 12/01/2019

or [search again](#)

Search beneficiaries

There are no results for the profile you searched, but you may create a new profile with that information.

Create a new profile

or [search again](#)

#	TASK	DETAILS
1	Enter search criteria for a profile	<p>To search for a specific beneficiary profile, enter the beneficiary's information in the search parameters. Agents need to enter information in at least one field; however, entering more information will assist in narrowing the search.</p> <p>NOTE: If searching by first name and/or last name, enter at least two characters.</p>
2	Enter search criteria for applications	<p>To narrow search results to include only the beneficiaries who started enrollment applications within a specific date range, enter start and end dates in the application search fields.</p> <p>NOTE: Confirmation number can be used for SOA or Enrollment Confirmation numbers.</p>
3	Search by personal code	<p>Agents can assist anonymous beneficiaries, who do not have an account, by searching with a personal code. This code is provided by the beneficiary and is unique to the beneficiary's current session.</p> <p>When agents search with a personal code, they are navigated to Plan list page. All information from the beneficiary's current session is loaded for the agent. This helps the agent quickly assist the beneficiary without creating a profile and adding all details on the professional sites.</p> <p>Other search parameters like name, email etc. are ignored searching with a personal code.</p>

#	TASK	DETAILS
4	View search results	<p>To find the beneficiary profiles that match the search parameters entered, click <i>Search</i>. The search results table displays the results:</p> <p>Profiles in Registrant status indicate a beneficiary who has not started an enrollment application.</p> <p>Profiles in Applicant status indicate a beneficiary who has either started or completed an enrollment application.</p>
5	Access a beneficiary's profile	<p>To access a beneficiary's profile, click the name of the beneficiary and the Edit Profile page opens.</p>
6	No profile found; create a profile.	<p>If no search results are found, agents can create a new profile and the search criteria that was entered will be automatically pre-filled into the New Profile.</p>

New/Edit Profile

The Profile page allows agents to create a new profile to begin working with a new beneficiary. Agents can access profile information in the future by searching for the profile. Click *New profile* in the Global Header to access the page to create a new profile. Enter the required information and click *Save*.

NOTE: Profiles can also be created using the Member Eligibility file or SAML SSO. Contact your Customer Success team with any questions.

Profile

Personal information

*ZIP code 12

* First name * Last name Date of birth

Email address Phone number

Home address

Address 1 Address 2

City State

Sales information

CRM ID

Is the sales contact different from the beneficiary?

Yes No

Additional information

[Custom 1] [Custom 2] [Custom 3]

[Custom 4] [Custom 5]

Save

Notes

You have no notes for this profile

[Add note](#)

Tasks

You have no tasks for this profile

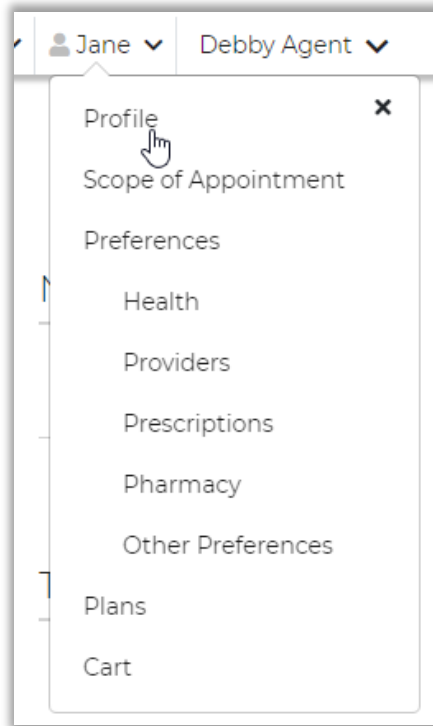
[Add task](#)

[Previous](#) [Add preferences](#) [Continue to SOA](#) [Continue to plans](#)

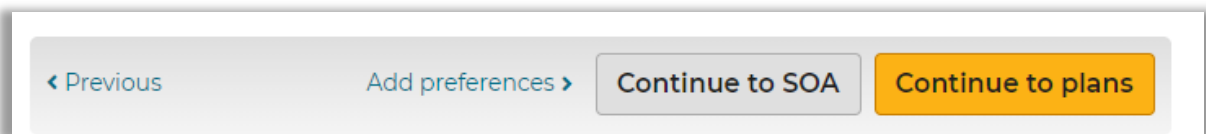
#	TASK	DETAILS
1	Enter or edit beneficiary information	Agents can use the information fields to enter or edit the beneficiary's personal information. Required fields are marked with an asterisk *. Any information added here can be edited in the future. Click <i>Save</i> after entering information.
2	Work with the beneficiary	<p>After creating a new profile or accessing an existing profile, agents can edit the beneficiary's information, shop for plans, add preferences information, send a Scope of Appointment or Quick Quote, or start enrollment.</p> <p>To proceed to the next step, click <i>Continue to plans</i>, <i>Continue to SOA</i>, or <i>Add Preferences</i> below the profile form.</p>

Dropdown Menu and Action Bar

While agents are working with a beneficiary profile, a menu is available in the header at the top of each page. Each menu option represents a page agent can navigate to. These pages allow agents to see or update information.



Agents can use the buttons at the bottom of pages to progress through the site in the recommended order. Navigate to any step and these actions will save information or prompt agents to save anything unsaved on the page.



Notes and Tasks

While agents are working with a beneficiary profile, they may need to quickly record miscellaneous information or add tasks to remind themselves to do something. In PlanCompare ONE for Professionals users, two quick tools appear on the profile page:

The screenshot shows the 'Profile' page. On the left, under 'Personal information', there are input fields for:

- *ZIP code: 90210 (with 'Los Angeles, CA' displayed next to it)
- *First name: Jane
- *Last name: Doe
- Date of birth: MM/DD/YYYY
- Email address: test@connecture.com
- Phone number: (empty field)

 On the right, there are two sections:

- Notes:** A section with the text 'You have no notes for this profile' and a '+ Add note' button. A red arrow points to this section.
- Tasks:** A section with the text 'You have no tasks for this profile' and a '+ Add task' button. A red arrow points to this section.

Agents can quickly create notes and tasks for the active profile on the Profile page.

NOTES

Notes allow agents to track miscellaneous information about the beneficiary. Some actions agents perform in the system generate notes automatically. For example, when agents send an electronic scope of appointment form, the email and date are added as a note.

Additionally, agents can manually add notes to keep track of information you gather as they work with a beneficiary.

System generated notes include:

- Sending an electronic Scope of Appointment
- Enrollment Application sent to beneficiary via email and/or text message
- Blue Button integration with MyMedicare.gov initiated and/or completed

The screenshot shows a 'Notes' section with a generated note:

- SOA sent to test@connecture.com on 06/05/2020
- Betty Broker
- Created 06/05/2020

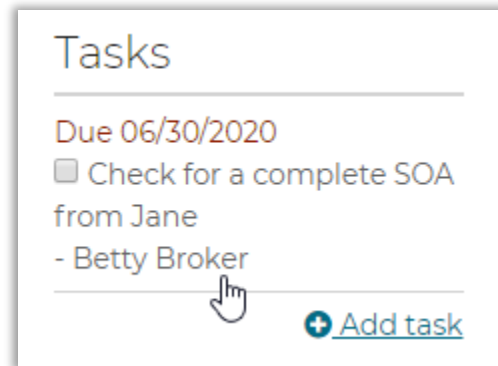
 At the bottom right of the note is a '+ Add note' button.

TASKS

Tasks allow agents to set reminders to perform actions to assist the beneficiary. You can select a custom due date. The due date determines where the task appears on the task list. Once a task has been checked as completed, it cannot be unchecked again at this time.

For example, agents may want to add tasks for the following types of items:

- Check for a completed SOA from the beneficiary
- Email materials to the beneficiary
- Upload/view SOA's from your desktop
- Document a scheduled meeting date and location with a beneficiary



Scope of Appointment (SOA)

PlanCompare ONE for Professionals provides a Scope of Appointment page that allows agents to obtain and manage SOA information for an appointment in the system. This includes an electronic SOA form that agents can email and/or text to the beneficiary, as well as an agent portion of the form that agents can complete and submit in the system after the appointment.

While working with a beneficiary profile, agents can access this page by clicking the beneficiary name in the Global Header and selecting the *SOA* menu option or clicking *Continue to SOA* from the beneficiary's Profile page.

View Before Sending Beneficiary SOA Form

#	TASK	DETAILS
1	Scope of Appointment Section	This section will show all activity of SOAs sent to the beneficiary and list all SOA's that have been collected for a beneficiary. Users will be able to download a pdf copy of a completed SOA (both consumer and agent section completed).
2	Print Form and Upload Documents	Agents can print a blank SOA pdf form for the beneficiary to fill out. They may upload completed hard copy SOAs from files on their desktop. Users may view an uploaded SOA or other document by clicking the document name to download it in the original file type. Accepted file types include pdf, jpg, gif or png that are less than 5 MB each.
3	Email Electronic SOA Form	Start the process by emailing the SOA form to the beneficiary. If the beneficiary's email was previously populated in the profile, it will prepopulate by default. Emailing the SOA is the quickest method to obtain the SOA information as it allows agents to complete and submit the Agent portion of the form online as well.
4	Text SOA Form	Agents can also send the SOA form, the same link they send as an email, by text message.

View After Agent Sends SOA Email to Beneficiary

After agents click *Email SOA* or *Text SOA* to send the form to the beneficiary, they will see a notification in the SOAs activity list that it was sent. A note is also automatically added to the Profile Notes section (see Notes and Tasks).

Scope of Appointment

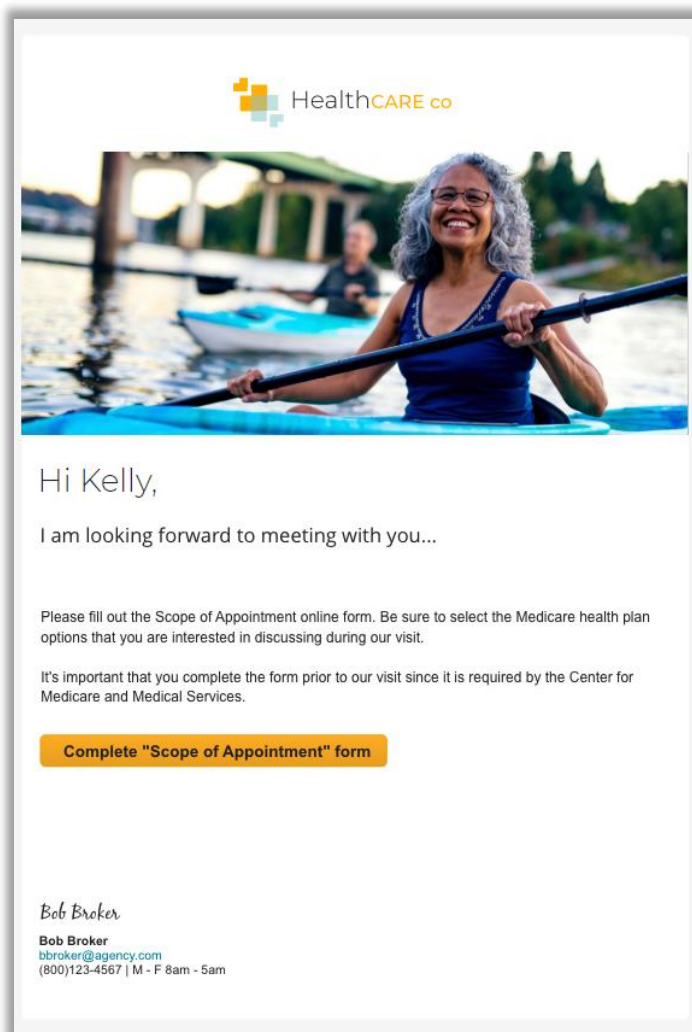
A Scope of Appointment is required for all sales appointments. Submit the SOA once you have received it from the beneficiary.

SOAs

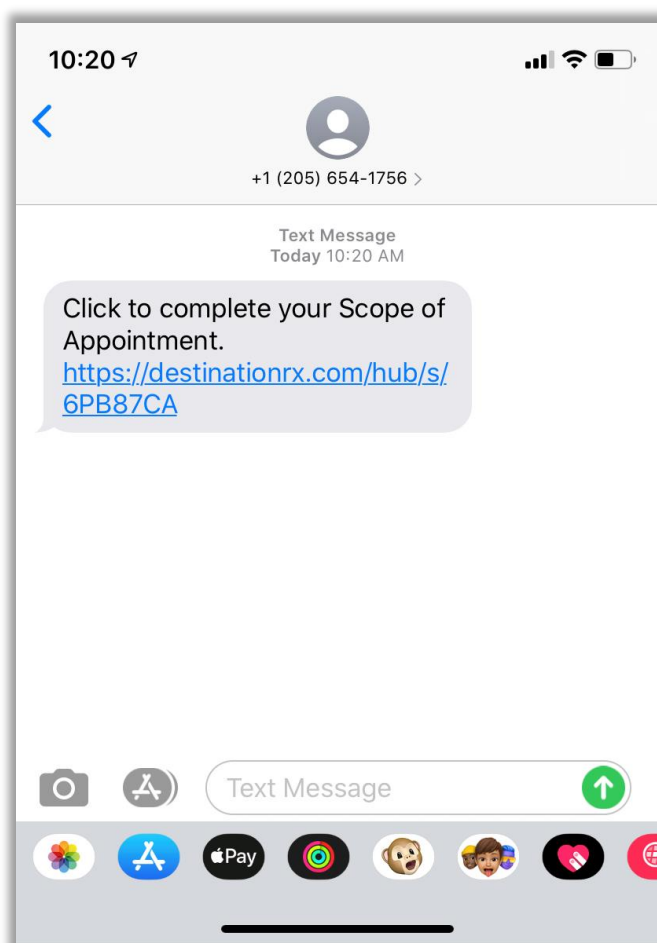
✓ Text sent to (555) 123-1234 on 07/30/2020

✓ Email sent to test@connecture.com on 07/30/2020

Sample Email Beneficiary Receives to Complete SOA Form




Sample Text Beneficiary Receives to Complete SOA Form



Sample Beneficiary SOA Form

This is a sample of the form the Beneficiary will see when they click the link in the email or the text message to complete the form. They see the agent information in the header, their options to choose from for the appointment to discuss and can submit the form.

 HealthCARE co

Broker
Bob Williams ▾

Scope of Appointment

The Centers for Medicare and Medicaid Services requires agents to document the scope of a marketing appointment prior to any face-to-face sales meeting to ensure understanding of what will be discussed between the agent and the Medicare beneficiary (or their authorized representative). All information provided on this form is confidential and should be completed by each person with Medicare or his/her authorized representative.

* indicates required fields

*** Check any product(s) below that you want the agent to discuss**

- ☐ Stand-alone Medicare Prescription Drug Plans (Part D)
- ☐ Medicare Advantage Plans (Part C) and Cost Plans
- ☐ Medicare Supplement (Medigap) Products
- ☐ Ancillary products

[View complete Medicare product descriptions.](#)

Beneficiary or Authorized Representative Information

By signing this form, you agree to a meeting with a sales agent to discuss the types of products you initialed above. Please note, the person who will discuss the products is either employed or contracted by a Medicare plan. They do not work directly for the Federal government. This individual may also be paid based on your enrollment in a plan.

Signing this form does NOT obligate you to enroll in a plan, affect your current enrollment, or enroll you in a Medicare plan.

*** Beneficiary's first name** *** Beneficiary's last name**

Address **Apt/unit** **City** **State** **ZIP code**

Phone number

Are you the authorized representative acting on behalf of the beneficiary?

Yes

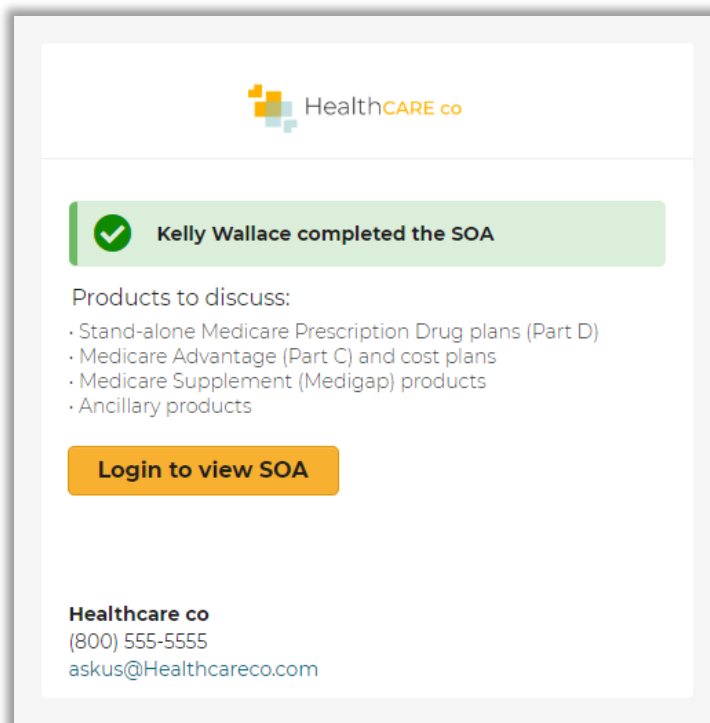
No

☐ *** By checking this box, I have read and understand the contents of the Scope of Appointment form, and that I confirm that the information I have provided is accurate.**
If submitted by an authorized individual (as described above), this submission certifies that 1) this person is authorized under State law to complete the Scope of Appointment form, and 2) documentation of this authority is available upon request by Medicare.

Submit form

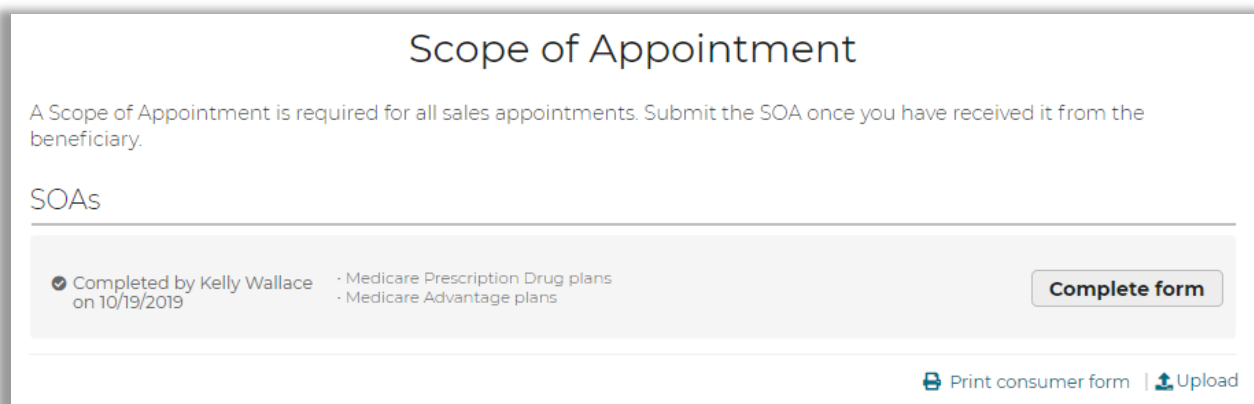
Agent Email Notification – Beneficiary Completed SOA

Once the beneficiary completes and submits the SOA form, the agent who sent the SOA form will receive a notification email (if the agent has an email on file) that the beneficiary has completed their portion.



View After Receiving Beneficiary SOA Form

The agent will log in and navigate to the beneficiary's Scope of Appointment page. Here they see the completed form information and the option to Complete form. To open the form, click *Complete form*.



Agent Complete SOA Form

This is a sample of the Agent portion of the SOA form agents will see when you click on *Complete form*. After the meeting or consultation, agents can return to this page to complete the Agent portion of the SOA form. This form allows agents to enter information about the plans that they presented to the beneficiary during the meeting. Fill out the required information and click *Submit broker form*.

SOAs

Completed by Kelly Wallace on 10/19/2019

Medicare Prescription Drug plans
Medicare Advantage plans

Close form

Print consumer form | Upload

Complete broker form

* Broker first name

Bob

* Broker last name

Williams

* Initial method of contact

If the SOA form was signed by the beneficiary at time of appointment, provide explanation why SOA was not documented prior to the meeting.

* Plans represented during this meeting

☒ Medicare Prescription Drug plans

☒ Medicare Advantage plans

☐ Medicare Supplement plans


☐ Ancillary products

* Date appointment completed

☐ * I confirm the information represented here is true and accurate.

Submit broker form

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 CONNECTURE
DRX

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View After Submitting Agent SOA Form

Scope of Appointment

A Scope of Appointment is required for all sales appointments. Submit the SOA once you have received it from the beneficiary.

SOAs

- Completed 03/01/2019
 - Medicare Prescription Drug plans
 - Medicare Advantage plans
 - Medicare Supplement plans
 - Ancillary products[View](#)
- Uploaded 10/03/2019
 - Uploaded_SOA.pdf[View](#)

[Print consumer form](#) | [Upload](#)

* Indicates required fields

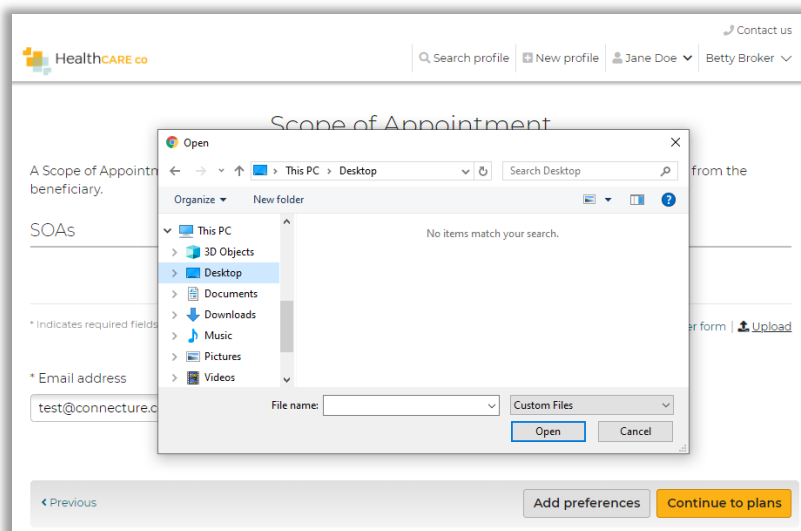
* **Email address**

kwallace@gmail.com [Email SOA](#)

#	TASK	DETAILS
1	View the plan types requested by the beneficiary	If agents use the email method to send the SOA form, after the beneficiary completes the form, this page is automatically updated with the requested plan types that the beneficiary entered. Agents can return to this page to review the plan types that the beneficiary wants to discuss.
2	View a list of submitted SOA forms	Agents can return to this page to view a list of submitted or uploaded SOA forms. Each SOA displays the plan types that the beneficiary expressed interest in. If agents need to view the submitted SOA, they can download by clicking <i>View</i> .

Agent Upload SOA Completed Outside of the System

Agents can click the *Upload* link on the SOA page and upload a document for an SOA completed outside of the system. Accepted file types include: .pdf, .jpg, .gif or .png that are less than 5 MB each.

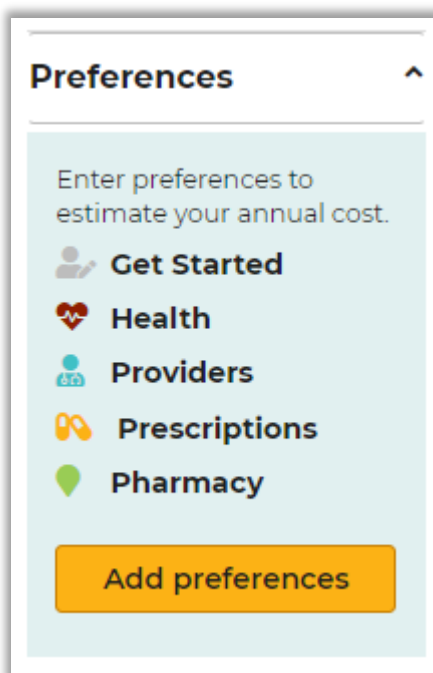


Add Preferences / Guided Help

In PlanCompare ONE for Professionals, agents can enter preferences information specific to the beneficiary to help select their best fit plan. Entering information in the guided help workflow will help generate accurate total estimated costs per plan for the beneficiary.

Agents can access the guided help workflow from:

1. The beneficiary dropdown menu in the global header and clicking *Preferences*
2. Any beneficiary profile page by clicking *Go to preferences* in the action bar at the bottom of the page.
3. The Plan List page for the beneficiary by clicking *Add preferences* button in the left sidebar above the filters.



Get Started

On the Get Started page, agents can provide the beneficiary's zip code, select the interested coverage type and subsidy. This allows agents to indicate whether the beneficiary receives a Low-Income Subsidy. The Low-Income Subsidy, also known as "Extra Help," is available for eligible beneficiaries whose income and resources are limited. This subsidy aids with prescription drug plan costs, including the premium, deductible, and copayments. Qualifying for this subsidy impacts plan pricing. Providing the beneficiary's subsidy information allows the system to adjust premiums, drug deductible and drug copays in the plan cost estimates.

While working with a beneficiary profile, agents can access this page by selecting the *Preferences* in the dropdown menu or clicking *Go to preferences* in the Profile page action bar.

Get Started

1 ***ZIP code**

These optional questions help us estimate your potential costs.

2 **What coverage type are you interested in? (Optional)**

+ Medical only Prescription drug + Medical and prescription drug I don't know

3 **Do you receive extra help paying for prescription drugs? (Optional)**

I receive help from Medicaid

I get supplemental security income

I belong to a Medicare Savings Program (MSP)

I applied and got full help through social security

I applied for and got partial help through social security

No, I am not eligible for special assistance

I don't know

4

< Previous Skip > **Continue**

#	TASK	DETAILS
1	Provide location information	Enter the beneficiary's zip code to determine available plans. This will prepopulate from the beneficiary's profile and updates made to the zip code here will save to the profile.
2	Select interested coverage type	Select which coverage type the beneficiary is interested in and what they are shopping for. The choice made here will control which plan type tab you land on when reaching the available plan list page. Agents will still be able to select other tabs to see other plan types on the available plan list page. The choice also impacts the dynamic workflow; for example, if the beneficiary is only interested in Prescription drug, then the workflow will skip the Health page. Agents can still choose to navigate to the Health page using the left bar navigation.
3	Select subsidy eligibility	Select an option to indicate the level of assistance the beneficiary qualifies for.
4	Continue to the next step	Information is automatically saved as soon as it is entered on the page. Click <i>Continue</i> to navigate to the next part of the preferences workflow or navigate using the menu on the left side of the page. Agents can also click <i>Previous</i> to go to the previous page they were on, <i>Skip</i> to skip this page (information is saved) or <i>Go to plans</i> to go directly to the plan list.

Health Information

Entering information about the beneficiary's location, age range, and health provides a list of available plans and calculate estimated out-of-pocket medical expenses. The age and health information agents provide does not affect the plan premium or the beneficiary's eligibility for Medicare plans.

The Health Information page allows agents to provide age range and health information for a beneficiary. While working with a beneficiary profile, agents can access this page by selecting the *Health* option in the dropdown menu or clicking *Go to preferences* in the Profile page action bar.

#	TASK	DETAILS
1	Provide health information	Answer the questions on this page to provide information about the beneficiary's age range and health.
2	Continue to the next step	Information is automatically saved as soon as it is entered on the page. Click <i>Continue</i> to navigate to the next part of the preferences workflow or navigate using the menu on the left side of the page. Agents can also click <i>Previous</i> to go to the previous page they were on, <i>Skip</i> to skip this page (information is saved) or <i>Go to plans</i> to go directly to the plan list.

Providers

The Providers page allows agents to enter the beneficiary's providers. If the beneficiary is not interested in medical plans or does not want to add their providers at this time, agents can select a different page or skip to the next step. It is recommended that the beneficiary add providers information, as this allows agents and the beneficiary to understand if their providers are in network for plans when they are shopping and if their selected Primary Care Provider is eligible for their medical plan.

While working with a beneficiary profile, agents can access this page by selecting the *Providers* option in the dropdown menu or clicking *Go to preferences* in the Profile page action bar.

Providers

Add your providers to see which plans cover your doctor, specialist, urgent care or hospital.

Get Started

- Health
- Providers**
- Prescriptions
- Pharmacy
- Other Preferences

Go to plans >

***ZIP code** 90210 **Provider name** Search doctor or facility **Search**

☒ Doctors and other professionals ☒ Facilities (hospitals, clinics and urgent care)

1 Dr. Amelia Rose Lugo
Psychologist
1690 Coldwater Canyon Dr
Beverly Hills, CA 90210
Provider added

2 Miss Tamara Levy
Student in an Organized Health Care Education/Training Program
1690 Coldwater Canyon Dr
Beverly Hills, CA 90210
Add provider

3 Howard Steven Shapiro
Specialist

Viewing 1 - 10 of 25 1 2 3 >

5 Your providers

Dr. Edgardo Antonio Falcon Jr. Dentist	9201 W Sunset Blvd Ste 610 West Hollywood, CA 90069	★ Primary care provider (PCP)	×
Platinum Surgical Center Clinic/Center	465 N Roxbury Dr Ste 1017 Beverly Hills, CA 90210		×
Dr. Amelia Rose Lugo Psychologist	1690 Coldwater Canyon Dr Beverly Hills, CA 90210	Set as primary care provider	×

7

< Previous Skip > **Continue**

#	TASK	DETAILS
1	Select provider search area	If agents entered a ZIP code earlier while creating a profile, a list of providers for that area appears. If agents have not entered a location or if agents want to search for a provider in a different area, enter a ZIP code or address. Zoom in or out on the map and click to drag the map area. <i>Search this area</i> will appear as agents drag map.
2	Search provider by name	Provide a name and click search to view providers matching the name closest to the selected zip. It is also possible to search on specialty using this field.
3	Filter results	Agents can filter the providers returned by either individual doctors and other professionals or by facilities (hospitals, clinics and urgent care). Both types are shown automatically when results are returned. Uncheck the box to remove the type from the results.
4	Select a provider	The providers are listed in proximity order to the location entered. To select the beneficiary's provider, click the "Add provider" button in the list or by clicking on a pin on the map and selecting the button there. If multiple providers share the same location, the pin shows a group icon. Click the icon to open a list of providers at that location. The selected provider icon changes color and now says "Provider added" to indicate it is selected.
5	Selected providers list	The selected provider details display below the map. Providers can be removed by clicking the X.
6	Primary care provider (PCP)	Agents can select the beneficiary's Primary care provider (PCP) from any of the individual (not facility) providers added to the providers list. There can only be one PCP selected.
7	Continue to the next step	Information is automatically saved as soon as it is entered on the page. Click <i>Continue</i> to navigate to the next part of the preferences workflow or navigate using the menu on the left side of the page. Agents can also click <i>Previous</i> to go to the previous page they were on, <i>Skip</i> to skip this page (information is saved) or <i>Go to plans</i> to go directly to the plan list.

Prescriptions

The Prescriptions page allows agents to enter the beneficiary's prescription drugs. If the beneficiary is not interested in plans with drug coverage or does not want to provide their prescription drugs at this time, agents can select a different page or skip to the next step. It is recommended that the beneficiary provide prescription drug information, as this allows agents and the beneficiary to understand if and how their drugs are covered by each plan and to provide a better out of pocket cost estimate.

While working with a beneficiary profile, agents can access this page by selecting the *Prescriptions* option in the dropdown menu or clicking *Go to preferences* in the Profile page action bar.

Prescriptions

Add your prescriptions to see how each plan provides coverage.

1 Search prescriptions

Tylenol/Codeine #3

Select your dosage and enter the amount you use below. The most common dosage and quantity is prefilled.

2 Select dose and form Enter quantity and frequency

Tylenol/Codeine #3 TAB #3 120 per month

Would you like to use a Generic (acetaminophen/codeine) for Tylenol/Codeine #3

According to the FDA, this generic drug has the same quality, strength, safety and active ingredient as the brand name drug.

Yes No 3

Cancel Add

Your prescriptions

4 Lipitor TAB 10MG Edit x

30 tablets per month Brand

5

Previous Skip Continue

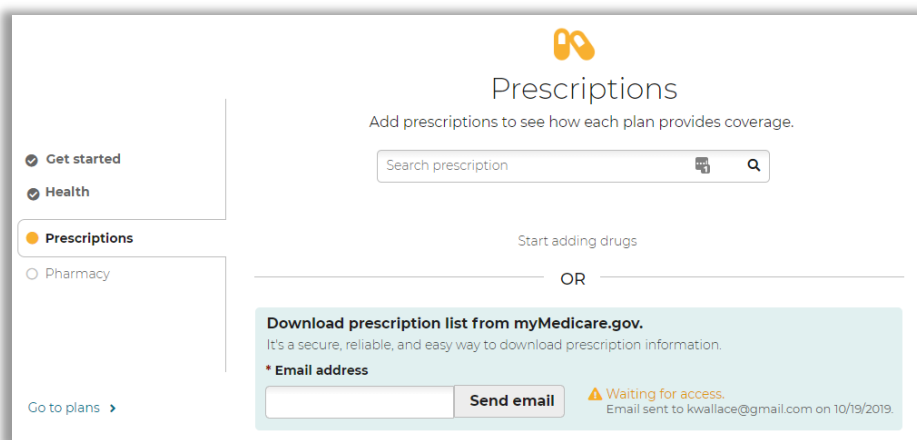
#	TASK	DETAILS
1	Find a drug	To find a drug, enter the first few letters in the search field. Use the drop-down search results list to select the drug.
2	Add a drug	<p>After finding and selecting a drug, additional fields appear, where agents can enter dosage, form, frequency, and quantity information. The most common values will be selected by default.</p> <p>When finished, click <i>Add</i>. The drug is added to the Medicine Cabinet and saved to the Profile.</p>
3	Choose Direct Generic	Switch to the direct generic form of the drug by clicking the button provided.
4	Manage the Drug List	<p>To edit the drugs that are on the Medicine Cabinet, agents can change the following:</p> <ul style="list-style-type: none"> - Change the drug dosage by clicking Edit - Remove the drug by clicking the X.
5	Continue to the next step	Information is automatically saved as soon as it is entered on the page. Click <i>Continue</i> to navigate to the next part of the preferences workflow or navigate using the menu on the left side of the page. Agents can also click <i>Previous</i> to go to the previous page they were on, <i>Skip</i> to skip this page (information is saved) or <i>Go to plans</i> to go directly to the plan list.

Medicare Blue Button

Beneficiaries can connect their PlanCompare ONE profile with their MyMedicare.gov account to import their claims data and pre-populate drug information into their list of drugs. Agents should ask beneficiaries if they would like to connect with their MyMedicare.gov account to import their claims and drug information or if they would like to manually enter the drugs. If beneficiaries choose the importing from Medicare.gov option, Agents can initiate this process by sending an email to the beneficiary from the Prescriptions page.

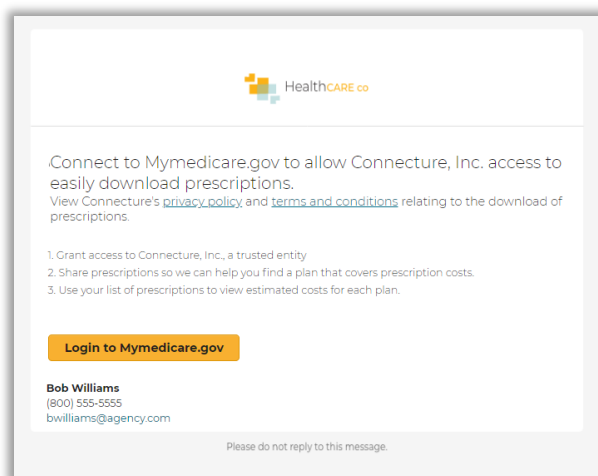
Agent Send Beneficiary Email to Connect

Agents can send an email to the beneficiary to connect their PlanCompare ONE profile with CMS claims data to import their prescription information instead of having to manually enter. Agents can still manually enter drugs in addition to the imported claims data. Enter the email address (this will pre-populate if available) and click *Send email*. Agent will then see the status "Waiting for access" until beneficiary grants access.



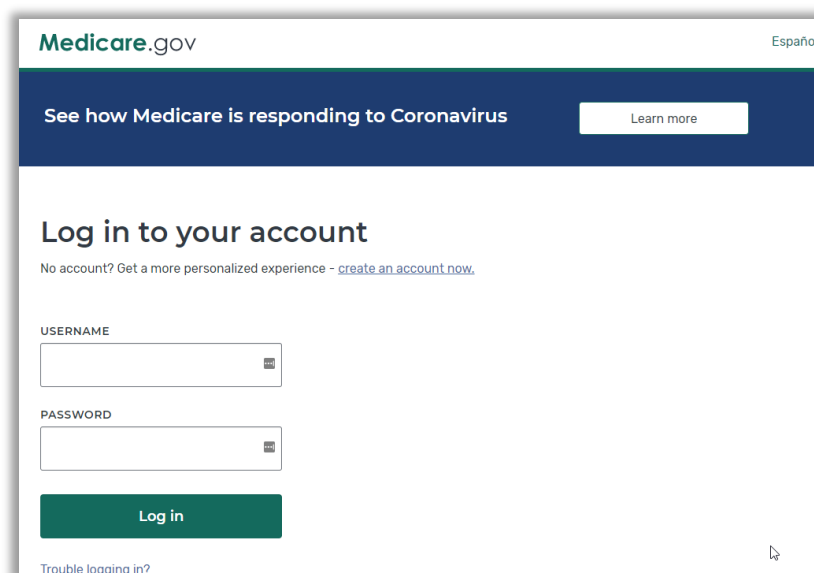
Sample Email Beneficiary Receives to Connect Blue Button

Beneficiaries click the link in the email to start the process. The link brings them to MyMedicare.gov where they create an account or login.



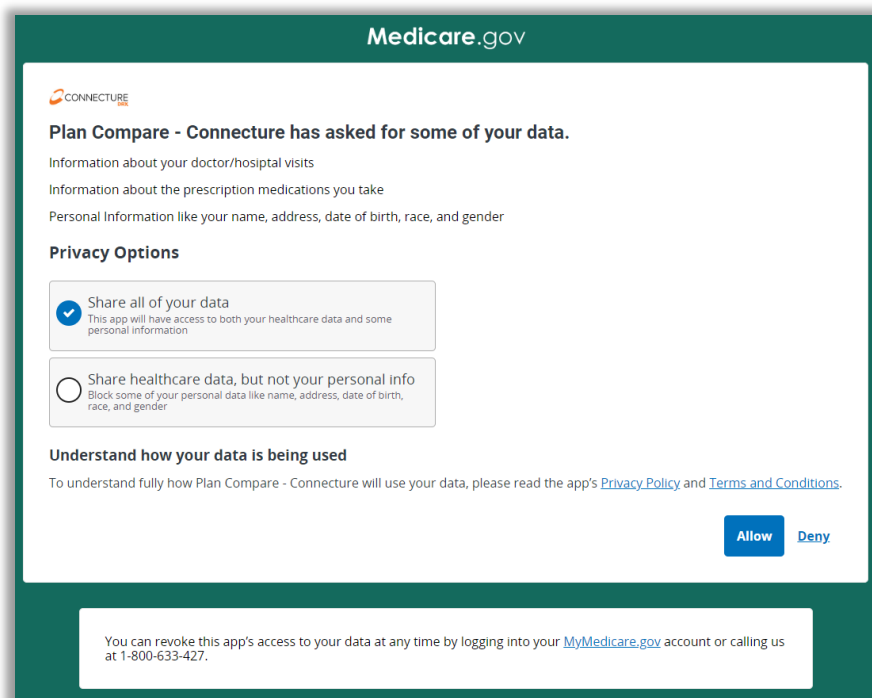
Sample Login and Grant Access Pages Beneficiary sees on CMS MyMedicare.gov

Beneficiary must create an account or login on MyMedicare.gov.



The screenshot shows the Medicare.gov login interface. At the top, there's a header with the Medicare.gov logo and a language selector for "Español". Below the header is a dark blue banner with the text "See how Medicare is responding to Coronavirus" and a "Learn more" button. The main content area is white and titled "Log in to your account". Below the title, it says "No account? Get a more personalized experience - [create an account now.](#)". There are two input fields: "USERNAME" and "PASSWORD", each with a small icon to the right. Below these fields is a green "Log in" button. At the bottom left, there's a link for "Trouble logging in?".

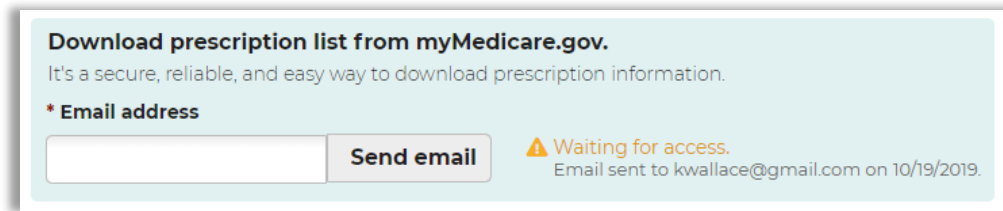
After logging in, beneficiary must Allow access. This is a sample page and may not reflect exactly what the beneficiary will see once they log in to MyMedicare.gov. They will see an Allow or Deny option and must select Allow to complete the process. They can choose between either privacy option and click *Allow* in order to proceed. Selecting the second option, "Share healthcare data, but not your personal info" and clicking *Allow* will still allow them to import their prescriptions.



The screenshot shows the Medicare.gov data access consent page. The header is green with the Medicare.gov logo. Below the header is a white box with the Connecture logo and the title "Plan Compare - Connecture has asked for some of your data.". The box lists the types of data requested: "Information about your doctor/hospital visits", "Information about the prescription medications you take", and "Personal Information like your name, address, date of birth, race, and gender". Below this is a section titled "Privacy Options" with two radio button options: "Share all of your data" (selected) and "Share healthcare data, but not your personal info". Below the options is a section titled "Understand how your data is being used" with a link to the app's "Privacy Policy" and "Terms and Conditions.". At the bottom right of the white box are "Allow" and "Deny" buttons. Below the white box is a green footer with a white box containing text about revoking access.

Agent Statuses


The agent will see a status update on the Prescriptions page so they can tell what the beneficiary has done with the email link:



Download prescription list from myMedicare.gov.
It's a secure, reliable, and easy way to download prescription information.

* Email address

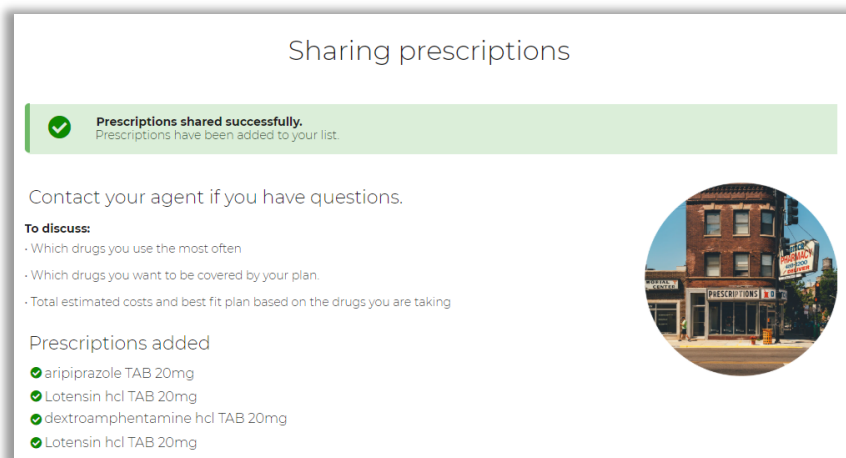
Send email

 **Waiting for access.**
Email sent to kwallace@gmail.com on 10/19/2019.

- Waiting for access
 - Waiting for the beneficiary to click *Allow* or *Deny* on the CMS page. If a lot of time has passed, Agent should follow up with beneficiary to see if they received the email or not. They can resend the email if the beneficiary asks for it.
- Issue loading prescriptions. Please try again.
 - If beneficiary has an issue connecting, the agent will see this status. Agent should resend the email and encourage beneficiary to try again.
- Beneficiary denied access
 - If beneficiary clicked *Deny* on the CMS access page, the agent will see this status. If the beneficiary clicked *Deny* in error, and asks the agent to resend the email, they may do so.
- Prescriptions shared successfully
 - If beneficiary clicked *Allow* on the CMS access page, the agent will see this status and see the list of prescriptions updated.

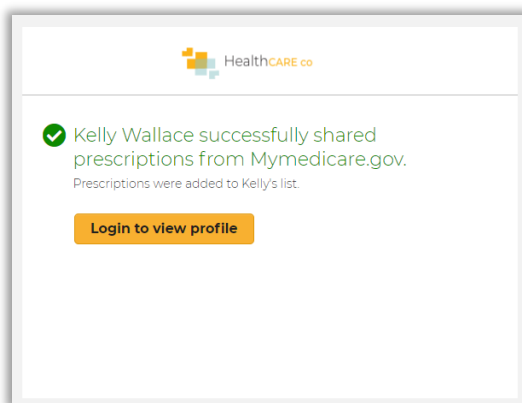
Sample Prescriptions Shared Successfully Page

After sharing prescriptions claims data successfully, the beneficiary sees a confirmation page with the drugs added to their medicine cabinet.



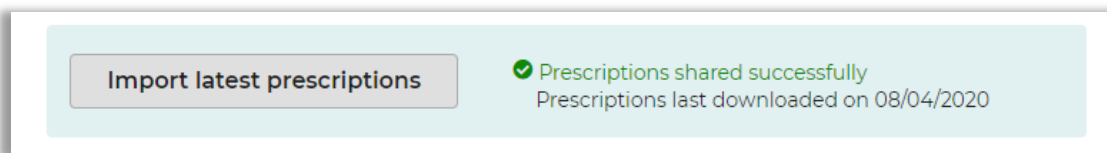
Email to Agent: Prescriptions Shared Successfully

After the beneficiary shares prescriptions claims data successfully, agents will receive an email (if there is an email on file for the account). Agents can log in and view the beneficiary's Prescription page and see all prescriptions added to their medicine cabinet.



Import Latest Prescriptions

After beneficiary successfully shares their prescriptions claims data, the agent can Import latest prescriptions by clicking the *Import Latest Prescriptions* button on Prescriptions page.



Pharmacy

The Pharmacy page allows agents to enter the pharmacy where the beneficiary fills prescriptions, so the system can provide more accurate drug pricing. Entering a pharmacy is optional, and agents can skip this page.

While working with a beneficiary profile, agents can access this page by selecting the *Pharmacy* option in the dropdown menu or clicking *Go to preferences* in the Profile page action bar. Agents can also select more than one pharmacy for a beneficiary. Refer to the [Multiple pharmacies](#) section for more details.

#	TASK	DETAILS
1	Select pharmacy area	If agents entered a ZIP code earlier while creating a profile, a list of pharmacies for that area appears. If agents have not entered a location or if agents want to search for a pharmacy in a different area, enter a ZIP code or address. Zoom in or out on the map and click to drag the map area.

#	TASK	DETAILS
2	Select a pharmacy	<p>The pharmacies are listed in proximity order to the location entered.</p> <p>To select the beneficiary's pharmacy, click the "Add Pharmacy" button in the list or by clicking on a pin on the map and selecting the button there.</p> <p>The selected pharmacy icon changes color and now says "Pharmacy added" to indicate it is selected. The select pharmacy details display above the map. It can be removed by clicking the X. <i>Search this area</i> will appear as agents drag map.</p>
3	Selected pharmacy	The selected pharmacy displays at the top of the page. The list also shows "Pharmacy added" for the selected pharmacy.
4	e-prescribing	Any pharmacies with the e-prescribing icon support e-prescribing.
5	Search pharmacy by name	Provide a pharmacy name and click search to view pharmacies matching the name closest to the selected zip
6	Continue to the next step	Information is automatically saved as soon as it is entered on the page. Click <i>Continue</i> to navigate to the next part of the preferences workflow or navigate using the menu on the left side of the page. Agents can also click <i>Previous</i> to go to the previous page they were on, <i>Skip</i> to skip this page (information is saved) or <i>Go to plans</i> to go directly to the plan list.

Other Preferences

Other Preferences page allows agents to answer questions about plan benefits that the beneficiary finds important and wants coverage for in a plan. Answering these is optional and agents can skip this page. It is recommended that the beneficiary add other preferences information, as this allows agents and the beneficiary to sort plans by the preference score and find the plans that best match their preferences while shopping.

While working with a beneficiary profile, agents can access this page by selecting the *Other Preferences* option in the dropdown menu or clicking *Go to preferences* in the Profile page action bar.


#	TASK	DETAILS
1	Answer questions	Agents can answer the questions they see on the page about preferences for the beneficiary. Only questions for benefits pertaining to the beneficiary's coverage area will display.
2	Page information	Agents will see how many pages of questions are available and on which page they are currently.
3	Continue to the next step	Information is automatically saved as soon as it is entered on the page. Click <i>Continue</i> to navigate to the next part of the preferences workflow or navigate using the menu on the left side of the page. Agents can also click <i>Previous</i> to go to the previous page they were on, <i>Skip</i> to skip this page (information is saved) or <i>Go to plans</i> to go directly to the plan list.

Multiple Pharmacies

This feature allows agents to select more than one pharmacy for a beneficiary. This feature will assist agents/brokers finding a pharmacy that will cover beneficiary's prescription list for a selected plan at the lowest possible cost.

Guided Help Pharmacy page

When this feature is enabled on the site, agents can add more than one (up to 3) pharmacies at a time. All pharmacies added are listed below the map. The first pharmacy added is defaulted to the Primary pharmacy and costs are initially based off this pharmacy. Agents have the option to change the primary pharmacy. Agents can also filter pharmacies displayed on the map using the filter dropdown.



Pharmacy

Drug costs vary based on the pharmacy you use. Select multiple pharmacies to compare estimated drug costs for all available plans.

*ZIP code

90010

Pharmacy name

Pharmacy name

Q Search

Filters ▼

★ **CVS Pharmacy**

#09660

3751 Wilshire Boulevard
Los Angeles, CA 90010

Pharmacy added

2 **Ralphs Pharmacy**

670 S Western Ave
Los Angeles, CA 90005

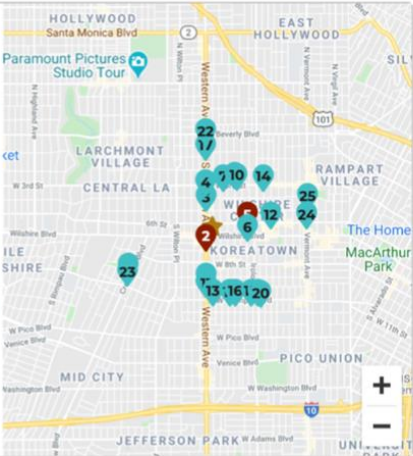
Pharmacy added

3 **Hyundai Drugs**

461 S Western Ave
Los Angeles, CA 90020

Add pharmacy

4 **Hanmi Pharmacy,**



Viewing 1 - 10 of 25 1 2 3 >

Your pharmacies

CVS Pharmacy #09660	3751 Wilshire Boulevard Los Angeles, CA 90010	★ Primary pharmacy	x
Ralphs Pharmacy	670 S Western Ave Los Angeles, CA 90005	Set as primary pharmacy	x
Kingsley Pharmacy	3663 W 6th St Ste 102 Los Angeles, CA 90020	Set as primary pharmacy	x

#	TASK	DETAILS
1	Add multiple pharmacies	All pharmacies added are displayed below the pharmacy map
2	Primary pharmacy	First pharmacy added is set as the Primary pharmacy. Plan rates will initially be based off the primary pharmacy. Agents can change primary pharmacy by clicking the 'set as primary' link for any of the other added pharmacies. At a time only one pharmacy can be set as 'Primary' for a member profile.
3	Filters	Agents can use the filters to filter pharmacies displayed on the map or list. Filters are data driven and are only shown if there is a pharmacy available for that filter on the map. Filter selections do not carry across tabs.

Plan List Page

All pharmacies added on the Guided help pharmacy page are displayed on the Plan list page for MAPD and PDP plan types. Agents can toggle between each pharmacy to see the updated drug and total cost for each plan displayed. List of added pharmacies is also displayed under the preferences section with a flag for the primary pharmacy.

The screenshot displays the Plan List Page interface. On the left, there's a sidebar with 'Costs are based on' (CVS Pharmacy #09660 selected), a list of pharmacies (CVS Pharmacy #09660, Ralphs Pharmacy, Hanmi Pharmacy, Inc., Mail order), and filters for Carriers (ACME, MEDICARE, flexicare). The main area shows a plan card for 'flexicare MAPD plan 6 2021'. The card includes a 'Not available' status, a 'Star rating' link, and a 'Add to compare' checkbox. Key financial details are listed: Medical Deductible (\$0), Maximum Annual Out Of Pocket (\$4,900), and Monthly premium (\$20.00). Action buttons for 'Plan details', 'Add to cart', and 'Add to quote' are present. At the bottom, it shows 'Prescriptions 3 of 3 covered', 'Pharmacy CVS Pharmacy #09660 Standard In-network', and a 'Total est. cost' of \$1,678.

Plan Details Page

Similar to the plan list page, all pharmacies added on the Guided help pharmacy page are displayed on the Details page for MAPD and PDP plan types. Agents can toggle between each pharmacy to see the updated drug and total cost for that plan. Network coverage for each pharmacy is also displayed under the Preferences section on Details page. The prescription tier applicable based on the selected pharmacy is also highlighted.

flexcare MAPD plan 1

Plan details Prescriptions Total costs

Additional Information Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

Costs

Premium	\$145.00 monthly
Est. drug cost Based on 3 drugs Add/edit	\$111 annually
Health cost Estimated medical costs based on age 75-79 and Generally healthy. Add/edit	\$1,348 annually
Total est. cost Based on premium, health and drug costs.	\$3,053 annually

Benefits

flexcare MAPD plan 1

★★★★☆ [Star rating](#)

Monthly premium
\$145.00

[Add to cart](#)

[Send quote](#)

Costs are based on

- CVS Pharmacy #09660 (Standard In-network)
- Ralphs Pharmacy (Standard In-network)
- Hanmi Pharmacy, Inc. (Out of network)
- Mail order

Compare Plans

Agents have the ability to toggle between selected pharmacies when comparing plans to see updated drug and total cost for the plans being compared. Network coverage for each pharmacy is also displayed under the Preferences section on Compare page.

[Previous](#)

Compare Plans

☒ Show plan differences
 [Send quote](#)

Costs are based on

- CVS Pharmacy #09660
- Ralphs Pharmacy
- Hanmi Pharmacy, Inc.
- Mail order

flexcare MAPD plan 3	flexcare MAPD plan 2	flexcare MAPD plan 1
★★★★☆ Star rating ⚠️ Low performing plan	★★★★☆ Star rating	★★★★☆ Star rating
Monthly premium \$33.00	Monthly premium \$73.00	Monthly premium \$145.00
Plan details Add to cart	Plan details Add to cart	Plan details Add to cart

Quoting

When sending a quote, agent can see a list of pharmacies added on the Guided Help Pharmacy page. Agent can select the pharmacy that best meets the beneficiary's needs and send a quote with costs based on the selected pharmacy. The selected pharmacy is saved as the Primary pharmacy on the beneficiary's profile. On the quote summary page, beneficiary will see the selected pharmacies, with a flag for the primary pharmacy, under the Preferences section.

Send quote

✕

* Email address

umathur@connecture.com

Additional message

This will show when the user logs back into the site.

Please review this quote at your earliest convenience.
Let me know if you have any questions.

Plan(s) included

Select all

flexcare MAPD plan 6 2021

☐ 2021 Summary of Benefits

☐ 2021 Application Form

Pharmacy

View costs based on one or multiple pharmacies.

☒ CVS Pharmacy #09660

☐ Ralphs Pharmacy

☐ Hanmi Pharmacy, Inc.

Cancel

Send quote

Hi Tom,

Please review this quote at your earliest convenience. Let me know if you have any questions.

Review your information

Name

Tom Reynolds

ZIP code

90630 Orange, CA [Edit](#)

Email address

umathur@connecture.com

Add your preferences (Optional)

Health

Edit

Generally healthy

75-79

Providers

Add

Prescriptions

Edit

Crestor

Glumetza

simvastatin

Pharmacy

Edit

CVS Pharmacy #09660 (primary)

Ralphs Pharmacy

Hanmi Pharmacy, Inc.

Shopping

Plan List

The Plan List page allows agents to view all the plans that are available in the beneficiary's service area. The available plans, plan pricing, and estimated costs are impacted by several factors including the beneficiary's location, subsidy eligibility, prescription drugs, and pharmacy selected. Plan cost estimates are more accurate with more information entered for the beneficiary.

While working with a beneficiary profile, agents can access this page by:

- Selecting the Plans option from the header beneficiary drop down menu
- Clicking *Continue to plans* from the Profile page
- Clicking *Continue* from the Add Pharmacy page
- If enabled, clicking *Plans* in the global header to browse anonymously

89 plans available in **90210** [Add non-licensed plans](#)

1 Medicare Advantage Prescription Drug Plans (6 plans)

Medicare Advantage Plans (9 plans) | Prescription Drug Plans (13 plans) | Medicare Supplement Plans (61 plans)

Medicare Advantage Prescription Drug Plans bundle the benefits of a Medicare Advantage Plan and a Prescription Drug Plan. Benefits include medical expenses and prescriptions.

2 Costs are based on: CVS Pharmacy #02801 (Mail order)

3 Sort: Preference Score (High to Low)

4 Add to compare

5 Plan details

6 Add to quote

7 Add to cart

8 Filters: Clear all

9 Preferences

10 Providers: No carrier plan data available

11 Add all Special Needs Plans (SNP)

flexicare MAPD plan 6 2021 (Not available, [Star rating](#))

Medical Deductible	Maximum Annual Out Of Pocket	Monthly premium
\$0	\$4,900	\$20.00

Pharmacy: CVS Pharmacy #02801 (Standard In-network)

Total est. cost: \$1,127 (Effective Apr 2021)

flexicare MAPD plan 3 (Star rating, [Low performing plan](#))

Medical Deductible	Maximum Annual Out Of Pocket	Monthly premium
\$0	\$3,400	\$33.00

#	TASK	DETAILS
1	Select a plan type	<p>A tab appears for each available plan type. The available plan types vary based on the plans included in the customer's website and the plans that agents are licensed to sell. If a tab is unavailable, it is because no plans of that type are available in this website and in the beneficiary's area. The following default tabs may appear:</p> <ul style="list-style-type: none"> • Medicare Advantage Prescription Drug Plans • Prescription Drug Plans • Medicare Advantage Plans • Medicare Supplement Plans – see "Medicare Supplement Additional Information Window" on the next page <p>To view the plans available for a plan type, select a tab.</p>
2	Review plans	<p>Review the available plans. Plans appear in order based on Total Estimated Costs, with the least expensive plan listed first.</p> <p>For each plan, agents can view plan details and enroll in a plan (if their permissions allow).</p>
3	Sort plans	<p>Agents can use this drop-down menu to sort plans according to the following:</p> <ul style="list-style-type: none"> • Preference Score • Plan Premium • Total Estimated Costs • Medicare Star Rating • Plan Name • Estimated Drug Cost
4	Compare plans	<p>Agents can compare up to 3 plans side by side. Check the <i>Add to compare</i> box next to the plans to compare. Click <i>Compare now</i>. The plan comparison page will open.</p> <p>Note: in a mobile device, users can only compare 2 plans side by side.</p>
5	View plan details	To view additional plan information, click <i>Plan Details</i> . See <i>Plan Details</i> section for more information.
6	Send a quote	To send the beneficiary a quote for a plan, click <i>Add to quote</i> . See Quoting section in this document for more information.
7	Enroll in a plan	To select a plan and begin enrollment, click <i>Add to Cart</i> or <i>Enroll</i> . Agents can send beneficiaries applications by email, see Enroll a Beneficiary section in this document for more information.
8	Filter plans	Agents can use the filters to filter plans accordingly to carrier and plan subtype. Filters are data driven and are only shown if there is a plan available for that filter on the plan tab. Filter selections do not carry across tabs.
9	Preferences	Agents can see the preferences information entered for the Profile and easily navigate back to each page to edit or add information.
10	Covered preferences	Agents can see for each plan if the providers, prescriptions and pharmacy are covered, as well as estimated drug cost, total est. annual cost and health cost (depending on plan type).

#	TASK	DETAILS
11	Add/Hide Special Needs Plans (SNP)	Click <i>Add all Special Needs Plans (SNP)</i> to display all special needs plans within the plan list. This link will change to <i>Hide all Special Needs Plans (SNP)</i> when plans are shown on the page. Filtering on these plans will become available after clicking the link to add plans.

Plans Link (Browse Anonymously)

It is strongly recommended to create a profile whenever working with a beneficiary so that information is saved, and the profile can be retrieved later. However, if a beneficiary does not want to give their name for a profile to be created, if this feature is enabled on the site then agents can search available plans before creating a profile.

The screenshot displays the HealthCARE.co interface. At the top, a navigation bar includes the logo, a 'Plans' link (marked with a red circle 1), a search bar, a 'New profile' button, and a user profile dropdown for 'Betty Broker'. Below the navigation bar, a quote from a contact is visible. The main content area shows '0 plans available in' with a location pin icon. A modal dialog titled 'Enter ZIP code' is open in the center, containing the text 'Please enter your ZIP code to see plans.' and a label '*ZIP code' (marked with a red circle 2). The dialog has a text input field, a 'Cancel' button, and a 'Shop for plans' button (marked with a red circle 3). In the background, two plan categories are visible: 'Medicare Advantage Prescription Drug Plans' and 'Medicare Supplement Plans', both showing '0 plans'.

Send quote

Send quote to drxtest1 drxtest1

How would the beneficiary like to receive the quote information?

☒ Email *** Email address**
 drxtest1@connecture.com

☒ Text *** Phone number**
 (414) 555-1212

Additional message
 This will show when the user logs back into the site.

Please review this quote at your earliest convenience.
 Let me know if you have any questions.

Plan(s) included
 flexicare MAPD plan 5
 flexicare MAPD plan 6 2021

Cancel Send quote

#	TASK	DETAILS
1	Click Plans Link in Header	Agents can click the <i>Plans</i> Link from the header of any page to browse available plans for a coverage area. This will clear information and start a new session (see the three dashes indicating no profile is currently active).
2	Enter ZIP Code	Beneficiary must provide their ZIP Code to see plans available for the service area.
3	Shop for plans	Clicking <i>Shop for plans</i> will load the Plan List page as explained above in this document. Agents can enter preferences information and see all details about a plan.
4	Send quote	To send a Quote from this page, a Profile must be created so Agents are able to retrieve the information later. Enter the required fields and click Send quote. See Send Quote from Plan List section for more information on sending a Quote.

Plan Details

The Plan Details view allows agents to view the details for a specific plan. Agents can access this view from the Plan List page or from the Compare Plans view by clicking the *Plan Details* button.

2020 FlexCare Connections Advantage (HMO)

1 Plan Details
 2 Prescriptions
 3 Total costs

Additional Information	Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.	
Costs		
Premium	\$28.80 monthly	
Est. drug cost Based on 3 drugs Add/edit	\$10,056 annually	
Health Costs Estimated medical costs based on age 65-69 and Generally healthy. Add/edit	\$0 annually	
Total est. annual cost Based on premium, health and drug costs.	\$10,402 annually	
Benefits		
Medical Coverage [?]		
Medical Deductible	\$0.00	
In-Network Maximum Out Of Pocket	\$0.00	
Doctor Office Visits	\$5 copayment PCP's Office	
Specialist Office Visit	\$45 copayment Specialist's Office	

2020 FlexCare Connections Advantage (HMO)
 ★★☆☆☆ [Star rating](#)
 Monthly premium
\$28.80
5 [Add to cart](#)
4 [Send quote](#)

Plan Documents 6

2021 Summary of Benefits	2021 Summary of Benefits
2021 Application Form	2021 Application Form

Preferences

Provider
7
[Add/edit providers list](#)

Search Provider	Provider directory 8
Platinum Surgical Center <i>Clinic/Center</i> 465 N Roxbury Dr Ste 1017 Beverly Hills, CA 90210	Out of network
Dr. Edgardo Antonio Falcon Jr. (PCP) <i>Dentist</i> 9201 W Sunset Blvd Ste 610 West Hollywood, CA 90069	In-network

Prescriptions
9
[Add/edit prescription list](#)

Search Prescriptions	Prescription directory 10
acetaminophen/codeine TAB 300-15MG 120 tablets per month	Covered
Crestor TAB 10MG 30 tablets per month	Not covered

Pharmacy
11
[Add/edit pharmacy](#)

Search Pharmacy	Pharmacy directory 12
CVS Pharmacy #02801 (primary)	In-network pharmacy with preferred pricing
Mail order	Covered

Other Preferences
13
[Add/edit other preferences](#)

Hearing	Yes 14
Dental	Yes

Optional add-on coverage (available in cart)

Dental	Optional Supplemental Dental HMO plan \$11.60	View details
--------	---	------------------------------

#	TASK	DETAILS
1	Review plan details	The Plan Details view allows you to view plan details, including costs, coverage, and any relevant plan documents.
2	View monthly drug estimates	If the beneficiary is interested in further details on drug pricing for plans with Drug Coverage, click <i>Prescriptions</i> . This option is available only for plans with drug coverage.
3	View monthly total costs	If the beneficiary is interested in viewing total estimated out-of-pocket expenses, click <i>Total Costs</i> .
4	Send a quote	To send a quote for this plan, click <i>Send Quote</i> . A window opens, where you can provide the beneficiary's email address.
5	Enroll in the plan	To enroll in the plan, click <i>Add to cart</i>
6	Plan documents	All documents associated with the selected plan are listed in this section. Click on the link to open that document in a new window.
7	Edit the provider list	This view includes information on which providers are in network or out of network for the plan. To edit providers, click the <i>Add/edit providers</i> link.
8	Provider directory	The provider directory link will be enabled if Provider search is available on the site or if an external URL is included in the plan data to perform a search for providers for the plan.
9	Edit the drug list	The Plan Details view includes information on which of the beneficiary's drugs are covered by the plan, and which drugs are not covered. If you need to edit the drugs selected for the beneficiary, click the <i>Add/edit prescriptions</i> link.
10	Prescription directory	This link will open the Prescriptions tab where a search may be performed for covered prescriptions specific to the plan.
11	Edit selected Pharmacy	The plan details view includes information on pharmacy coverage. If you need to edit the selected Pharmacy, click the <i>Add/edit pharmacy</i> link.
12	Pharmacy directory	This link will open the Pharmacy tab where a search may be performed for covered pharmacies specific to the plan.
13	Edit other preferences	The plan details view includes information about other preferences that are included in the plan. To edit the preferences selected, click the <i>Add/edit other preferences</i> link.
14	Other Preferences	Details about which plan benefit selected in Other Preferences is included in the plan.

Prescriptions tab

The Prescriptions tab allows agents to review estimated drug costs and restrictions for a plan. Agents can access this page from the Plan Details view by clicking Prescriptions at the top of the screen.

2020 FlexCare Connections Advantage (HMO)

Plan Details Prescriptions Total costs

Costs based on your selected pharmacy CVS Pharmacy #09660 [Edit](#) | [Switch to Mail order costs](#)

2020 FlexCare Connections Advantage (HMO)
★☆☆☆ Star rating
Monthly premium **\$28.80**
[Add to cart](#)
[Send quote](#)

1 [Add/edit prescription list](#)

3 Covered prescriptions

Preferred Generic

simvastatin TAB 20MG +
30 tablets per month Generic

	Retail Cost ⓘ	Before Gap ⓘ	During Gap ⓘ	After Gap ⓘ
Retail cost (1 month supply)	\$9.98	\$8.00	\$2.50	\$3.60
Restrictions	PA No QL 90 / 30 days ST No			

6

Non-covered prescriptions

Lipitor TAB 10MG ¹⁵
30 tablets per month Brand

	Retail Cost ⓘ	Before Gap ⓘ	During Gap ⓘ	After Gap ⓘ
Retail cost (1 month supply)	\$407.90	\$407.90	\$407.90	\$407.90
Restrictions	PA No QL No ST No			

4

Footnotes: The footnote for each drug will appear after the drug name

¹⁵ Any amount you spend for a non-formulary drug is not counted towards the deductible, initial coverage limit or out of pocket costs UNLESS the plan approves a formulary exception. If an exception is approved, the non-formulary drug will be covered. The drug cost displayed is only an estimate and actual cost may vary. Please contact the plan for more information.

A This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

+ This drug can be ordered through a mail order pharmacy.

#	TASK	DETAILS
1	Change the selected drugs	If necessary, agents can make changes to the drugs selected by clicking <i>Add/edit prescription list</i> .

#	TASK	DETAILS
2	Switch between retail and mail order pricing	Drug retail pricing appears by default. If the beneficiary orders drugs through the mail, agents can view mail order pricing by clicking the <i>Switch to Mail Order Costs</i> .
3	Review the selected drugs	This page details the prescriptions drugs that were entered for the beneficiary on the Prescriptions page. This includes drug pricing by phase and any restrictions.
4	Footnotes	A footnote number is displayed next to each drug name for which the footnote is applicable with a detailed description at the bottom of the page. Footnotes dependent on the plan's formulary and pharmacy type are displayed at the bottom of the page.
5	Enroll in the plan	To enroll in the plan, click <i>Add to cart</i> .
6	Review estimated drug costs and restrictions	Review drug costs by phase and restrictions for the selected plan. These amounts are calculated based on the plan's coverage.

Total Costs tab

The Total Estimated Costs page allows agents to review the beneficiary's estimated out-of-pocket costs for a plan. Agents can access this page from the Plan Details view by clicking *Total Costs* at the top of the screen.

flexicare MAPD plan 1

Plan details | Prescriptions | Total costs

Costs based on retail pharmacy [Add pharmacy](#) | [Switch to Mail order costs](#)

Based on information you've provided, these are the estimated monthly costs.

Total estimated cost \$8,758

[Add/edit prescription list](#)

Effective date: February 2021

January: \$0

February: \$963.23

Premium	+	Drug cost	+	Health cost	=	Monthly est. cost
\$145.00		\$732.45		\$85.78		\$963.23

Drug	Phase	Drug cost
Crestor TAB 10MG *	Deductible	\$142.80
Vyvanse CAP 70MG *	Deductible, Copay	\$182.20
Lipitor TAB 10MG ¹⁵	Copay	\$407.45

March: \$778.23

April: \$778.23

May: \$778.23

June: \$778.23

July: \$831.89

August: \$770.09

September: \$770.09

October: \$770.09

November: \$770.09

December: \$770.09

Footnotes: The footnote for each drug will appear after the drug name

¹⁵ Any amount you spend for a non-formulary drug is not counted towards the deductible, initial coverage limit or out of pocket costs UNLESS the plan approves a [formulary exception](#). If an exception is approved, the non-formulary drug will be covered. The drug cost displayed is only an estimate and actual cost may vary. Please contact the plan for more information.

* This drug can be ordered through a mail order pharmacy.

#	TASK	DETAILS
1	Review your total estimated costs by month	The table on this page allows agents to answer any of the beneficiary's questions about how total estimated costs are calculated for this plan. Each month can be expanded to see the Premium, Drug cost per prescription and health cost expected.
2	Switch between retail and mail order pricing	Drug retail pricing appears by default. If the beneficiary orders drugs through the mail, agents can view mail order pricing by clicking the <i>Switch to Mail Order Costs</i> .
3	Select effective date	Change the default effective date of coverage to see updated estimated costs.
4	Footnotes	A footnote number is displayed next to each drug name for which the footnote is applicable with a detailed description at the bottom of the page. Footnotes dependent on the plan's formulary and pharmacy type are displayed at the bottom of the page.

#	TASK	DETAILS
5	Enroll in the plan	To enroll in the plan, click <i>Add to cart</i> .

Compare Plans

Agents can compare up to 3 plans side by side on the Compare Plans page.

The screenshot shows the 'Compare Plans' interface. At the top, a red circle with the number '1' points to the 'Compare Plans' title. Below the title, there are three plan cards. A red circle with the number '2' points to a 'Show plan differences' checkbox. A red circle with the number '4' points to a 'Send quote' button. A red circle with the number '3' points to the 'Plan Details' button under the first plan. A red circle with the number '5' points to the 'Add to cart' button under the first plan. The plans are: 'flexcare MAPD plan 2' (monthly premium \$73.00), 'flexcare MAPD plan 1' (monthly premium \$145.00), and '2020 FlexCare Connections Advantage (HMO)' (monthly premium \$28.80). Below the plan cards is an 'Additional information' section with placeholder text. At the bottom is a 'Costs' table.

Costs			
Est. drug cost Based on 2 drugs Add/edit	\$821 annually	\$821 annually	\$5,183 annually
Health cost Estimated medical costs based on age 65-69 and Generally healthy. Add/edit	\$1,029 annually	\$1,029 annually	\$11,434 annually

Preferences

Provider

[Add/edit providers list](#)

Search Provider	Provider directory	Provider directory	Provider directory
Platinum Surgical Center <i>Clinic/Center</i> 465 N Roxbury Dr Ste 1017 Beverly Hills, CA 90210	✖ Out of network	No provider data for this carrier	No provider data for this carrier
Dr. Edgardo Antonio Falcon Jr. (PCP) <i>Dentist</i> 9201 W Sunset Blvd Ste 610 West Hollywood, CA 90069	✔ In-network	No provider data for this carrier	No provider data for this carrier

Prescriptions

Search Prescriptions	Prescription directory	Prescription directory	Prescription directory
acetaminophen/codeine TAB 300-15MG 120 tablets per month	✔ Covered	✔ Covered	✔ Covered
Crestor TAB 10MG 30 tablets per month	✖ Not covered	✔ Covered	✔ Covered

Pharmacy

Search Pharmacy	Pharmacy directory	Pharmacy directory	Pharmacy directory
CVS Pharmacy #02801 (primary)	✔ In-network pharmacy with preferred pricing	✔ In-network pharmacy with standard pricing	✔ In-network pharmacy with standard pricing
Mail order	✔ Covered	✔ Covered	✔ Covered

Other Preferences

Hearing	✔ Yes	✔ Yes	✔ Yes
Dental	✔ Yes	✔ Yes	✔ Yes

Optional add-on coverage (available in cart)

Dental	\$11.60 View details	\$15.00 View details	\$15.00 View details
	\$40.50 View details		

#	TASK	DETAILS
1	Compare plans	The Compare Plans view displays common benefits that agents can compare at a high level across plans. Use the information on this page to compare plans in terms of Costs, Coverage Overview, and Benefits. Use this page to answer many of the beneficiary's questions about the benefits of one plan versus another.
2	Plan Highlights	Highlights rows when at least one of the plans being compared has a different benefit value.
3	View plan details	If the beneficiary has a question that is not covered on the high-level details provided by the Plan Comparison view, the Plan Details button allows agents to see additional details for a plan.
4	Send a quote	To begin the Quick Quote process for all plans on this page, click <i>Send Quote</i> .
5	Enroll in a plan	While agents are on the Compare Plans view, the beneficiary may decide which plan to enroll in. If the company allows online enrollments, agents can begin enrollment by clicking <i>Add to cart</i> and using the company's guidelines to complete the online enrollment form.

Riders

Riders, also referred to as Add-on coverage, are additional benefits that may be purchased with the selected plan, if offered. The plan cards provide a visual reference to indicate if riders are available for a plan. The benefit details of what a rider covers may be found in plan details, plan compare, and the shopping cart. Riders may only be selected for purchase in the shopping cart.

Plan Card

flexcare MAPD plan 7
☐ Add to compare

Not available [Star rating](#)




Medical Deductible
\$0

Maximum Annual Out Of Pocket
\$3,400

Monthly premium
\$37.00





Plan Details

Add to cart

Add-on coverage
 



Add to quote

Plan Details

Optional add-on coverage(available in cart)		
 Combined Ancillary Rider	ACME Combined: \$25.00	View details ▼
 Dental Rider	Dental Standard: \$15.00 Hide details ▲	
<ul style="list-style-type: none"> • Deductible: \$10 • Major Services: 50% coinsurance for fillings, root canals, simple extractions, crown and crown repairs • Out-of-Network: No In State Non-Par, only out of state non-par coverage • Basic Services: 50% • Annual Maximum Benefit: 1000 		
 Hearing	ACME Hearing: \$5.00	View details ▼
 Vision	ACME Vision: \$10.00	View details ▼

Shopping Cart

Optional add-on coverage

Dental
Dental information here

Dental Standard

[Hide details](#) ▲ **+\$15.00** ×

- Deductible: \$10
- Major Services: 50% coinsurance for fillings, root canals, simple extractions, crown and crown repairs
- Out-of-Network: No In State Non-Par, only out of state non-par coverage
- Basic Services: 50%
- Annual Maximum Benefit: 1000

Hearing
Hearing information here

ACME Hearing [View details](#) ▼ **\$5.00** Add

Vision
Vision information here

ACME Vision [View details](#) ▼ **\$10.00** Add

Dental, Vision, and Hearing package
Dental/Vision/Hearing information here

ACME Combined [View details](#) ▼ **\$25.00** Replace

Total monthly premium \$25.00

#	TASK	DETAILS
1	Rider names	Rider names within each category.
2	View/Hide details	These links will appear if details exist for the rider.
3	Add/Replace buttons	Add the selected rider to the cart. Only one rider for a given type may be added to the cart. For example, if a dental rider is selected and a combined rider also offers dental coverage, the button on the combined rider will have the text <i>Replace</i> . If <i>Replace</i> is selected, the dental rider previously selected will be deselected automatically.

Cart

The shopping cart page displays the plan the beneficiary is intending to enroll in as well as the ability to add on riders for additional coverage.

Cart

Medicare Advantage Prescription Drug Plan
 flexcare MAPD plan 6 2021
 ⚠️ MS. KATHY NGUYEN is ineligible to be a primary care provider for this plan.
[View details](#) | [Change plan](#) | [Remove plan](#)

Monthly premium **\$20.00**

Optional add-on coverage

Dental
 Flexcare Dental [View details](#) \$15.00 [Add](#)

Hearing
 Flexcare Hearing [View details](#) \$5.00 [Add](#)

Vision
 Flexcare Vision [View details](#) \$10.00 [Add](#)

Dental, Vision, and Hearing package
 Flexcare Combined [View details](#) \$25.00 [Add](#)

* How will you be completing this form?
[Send to beneficiary to sign and submit](#)
[Complete and submit form myself](#)

* Are you an existing member?
 If so, you will be able to complete a shorter form.
[Yes](#) [No](#)

Total monthly premium \$20.00

[Previous](#) [Continue to apply](#)

#	TASK	DETAILS
1	View details/Change plan/Remove plan	View details – view benefits for this plan Change plan – takes user back to plan list page Remove plan – removes plan from the cart; takes user back to plan list page
2	Not a valid PCP message	This message appears when Provider Search is enabled on the site and the PCP selected by the user is not a valid PCP for the plan.

#	TASK	DETAILS
3	How will you be completing this form?	<p>Send to beneficiary to sign and submit – Allows user to complete the enrollment up to the sign and submit page where the user will be able to forward the application to the beneficiary.</p> <p>Complete and submit form myself – Allows user to complete the enrollment form on behalf of the beneficiary.</p>
4	Are you an existing member?	Selecting Yes will allow the user to complete a shorter enrollment form.
5	Continue to apply button	After completing required fields in the cart, user will be taken to the first page of the enrollment form.

Send a Quote

Quotes are an effective way to deliver plan information and ability to enroll to a beneficiary electronically by sending the quote in an email. The email provides system-generated links that allow beneficiaries to access the consumer PlanCompare ONE website and complete their own enrollments online. The links provided in the email contain the Agent ID, which ensures agents get credit for any enrollments that result from the Quote.

Agents can send a quote for up to 3 plans at a time (plans must be the same plan type).

- If a beneficiary has a profile in the system, agents can send a Quote while shopping for plans through the beneficiary's active profile.
- Add plans to quote - Agents can select up to 3 plans that they want to be included in the quote from the Plans page. A multi-plan quote can include plans of the same plan type i.e. agents cannot send a MA and PDP plan in the same quote
- Send quote – Agents can send a quote to a beneficiary by clicking the *Send Quote* button from the following pages:
 - Plan List
 - Plan Details
 - Compare plans
- Clicking on *Send quote* opens a modal that displays:
 - Beneficiary's name
 - Email of the beneficiary
 - Text of the beneficiary
 - Custom message
 - Plans included in quote
 - Documents to be sent with quote. Because this feature sends the links to be included with the quote to the beneficiary, it is only available for single plan

quotes as to not confuse the beneficiary regarding which documents go with which plans. When the beneficiary comes to the site to look at plans, they can see all available documents online.

- Agents will see a confirmation message when the quote is sent and see the quote history on the beneficiary's profile.

Send Quote from Plan List

9 plans available in [90010](#)

Medicare Advantage Prescription Drug Plans
3 plans

Medicare Advantage Plans
3 plans

Prescription Drug Plans
3 plans

Medicare Supplement Plans
0 plans

Medicare Advantage Prescription Drug Plans bundle the benefits of a Medicare Advantage Plan and a Prescription Drug Plan. Benefits include medical expenses and prescriptions.

2

2020 FlexCare Value Balance (HMO-CSNP)

\$0.00

3

2020 FlexCare Heart Health (HMO SNP)

\$20.00

4

Quote up to 3 plans

Send quote

Sort: Total Estimated Annual Cost

Preferences
Enter preferences to estimate your annual cost.
Get Started
Health
Prescriptions
Pharmacy

2020 FlexCare Value Balance (HMO-CSNP)

Not available [Star rating](#)

Medical Deductible
\$0

Maximum Annual Out Of Pocket
\$3,400

Monthly premium
\$0.00

Add-on coverage

Plan Details

Add to quote

Send Quote from Plan Details

[Previous](#)

2020 FlexCare Value Balance (HMO-CSNP)

Plan Details
Prescriptions
Total costs

Additional Information

2020 FlexCare Value Balance (HMO-CSNP)

Not available [Star rating](#)

Monthly premium
\$0.00

Add to cart

Send quote

Costs	
Premium	\$0.00 monthly
Est. drug cost Based on 0 drugs Add/edit	\$0 annually
Health Costs Estimated medical costs based on age 65-69 and Generally healthy. Add/edit	\$0 annually
Total est. annual cost Based on premium, health and drug costs.	\$0 annually

Send Quote from Compare Plans

The 'Compare Plans' interface displays three plan cards side-by-side. Each card has a title, a status, a star rating, a monthly premium, and buttons for 'Plan Details' and 'Add to cart'. A red circle with the number 4 highlights the 'Send quote' button on the left side of the interface.

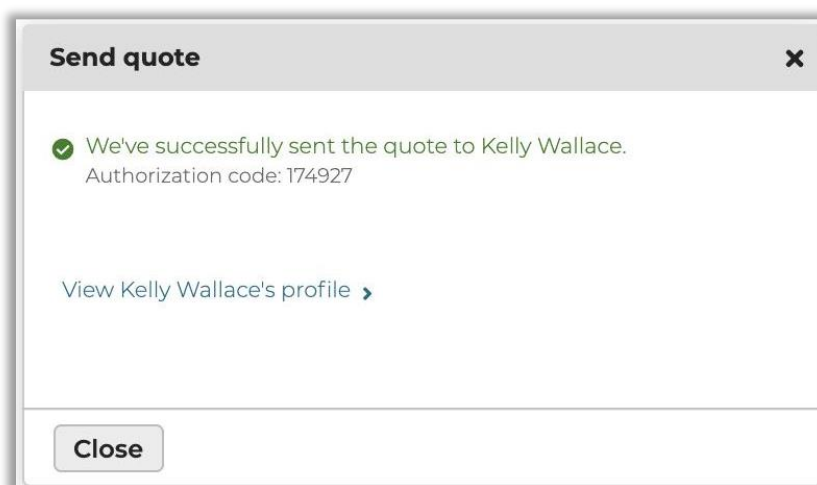
Plan Name	Status	Star Rating	Monthly Premium
2020 FlexCare Value Balance (HMO-CSNP)	Not available	Star rating	\$0.00
2020 FlexCare Heart Health (HMO SNP)	Not available	Star rating	\$20.00
2020 FlexCare Connections Advantage (HMO)	Low performing plan	Star rating	\$28.80

Send Quote Window

The 'Send quote' window is a modal dialog box with a close button (X) in the top right corner. It contains the following elements:

- 5** *Email address: A text input field containing 'drxtest1@connecture.com'.
- 6** *Phone number: A text input field containing '(414) 555-1212'.
- 7** Additional message: A text area containing the message 'Please review this quote at your earliest convenience. Let me know if you have any questions.'
- 8** Plan(s) included: A list showing 'flexcare MAPD plan 5' and 'flexcare MAPD plan 6 2021'.
- 9** Send quote: A yellow button at the bottom right.
- Cancel: A gray button at the bottom left.

Quote Sent Confirmation

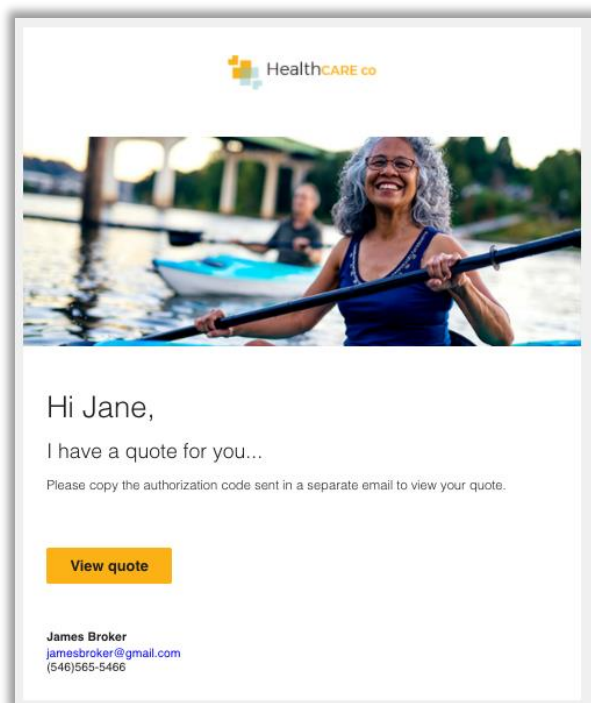


#	TASK	DETAILS
1	Add plans to quote	Select up to 3 plans to add to the quote from the plan list page
2	See plans included in quote	Agents can see the plans selected for the quote, up to 3 plans of the same plan type per quote.
3	Remove a plan from quote	Agents can remove a plan from the quote before sending by clicking the X next to the plan.
4	Send Quote button on Plan list, details and compare pages	Click <i>Send quote</i> to open the quote modal.
5	Email address	Enter the email address for the beneficiary receiving the quote. The email address on the profile will pre-fill if there is one available.
6	Phone number	When selecting text, enter the phone number for the beneficiary receiving the quote. The phone number on the profile will pre-fill if there is one available.
7	Customize your message	Agents can customize the message, which the beneficiaries will see when they authenticate into the site to view the quote.
8	Plan documents	For individual plan quotes, choose which plan documents to include in the quote.
9	Send quote	Click <i>Send quote</i> to send to the beneficiary. After sending, agents see a confirmation with the authorization code the beneficiary also receives in the email which is needed to access the quote.

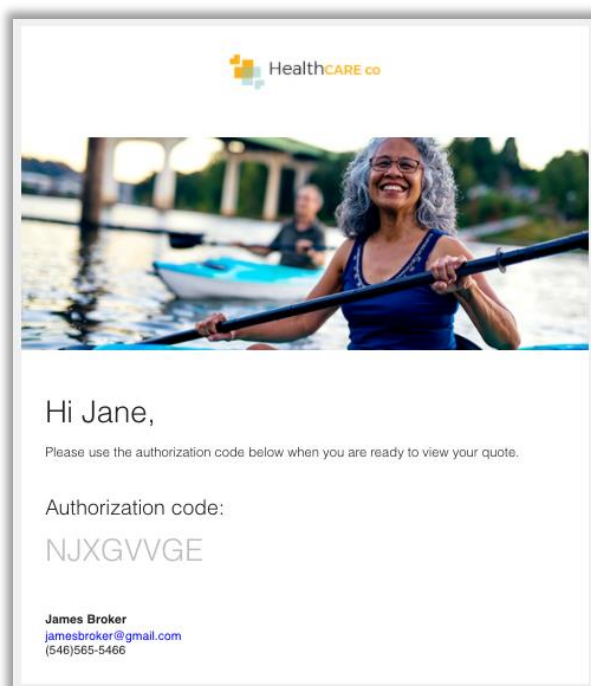
Sample Beneficiary Quote Emails

When a quote is sent successfully, the beneficiary receives two emails that can be used to access the quote: one with the link to view the quote and a separate email with the access code email. These are separate for security reasons because PHI/PII is involved.

The first email has a link to view the quote, along with any links that were selected when sending the quote:



The second email contains a unique system generated authorization code which will be used to authenticate the beneficiary to view the quote:



Beneficiary Quote Authorization

The beneficiary will click on the *View quote* link from the first email to land on the authorization page. Here they can see the broker information in the global header.

HealthCARE co HealthCARE co

Contact us

Broker
James Broker

Hi Jane,

I have more info regarding the plans we discussed based on your needs, budget and health considerations. Take a look and let me know if you have any questions.

* Authorization code

1 The authorization code was sent to your email.

☐ I agree to using my personal information to provide recommendations of related products. [View details](#)

2

3 [View quote](#)

Meet with James Broker

Call James to make an appointment: 5465655466
jamesbroker@gmail.com

#	TASK	DETAILS
1	Authorization code	Beneficiary enters the unique authorization code sent to them with the quote emails.
2	Disclaimer	Beneficiary must check and agree to disclaimer if displayed. Click <i>View details</i> for more information on the disclaimers.
3	View quote	Beneficiary clicks on <i>View quote</i> button to authenticate and view plans sent in quote.

Beneficiary Quote Summary

Upon successful authentication, the beneficiary lands on the quote summary page.

HealthCARE co


HealthCARE co

Broker
James Broker

Cart

Jane Doe

Contact us



Hi Jane,

Please review this quote at your earliest convenience. Let me know if you have any questions.

Review your information

Name
Jane Doe

ZIP code test
90010 Los Angeles, CA [Edit](#)

Email address
jane.doe@gmail.com

Add your preferences (Optional)

Extra help
[Add](#)

Health

- Generally healthy
- 65-69

Prescriptions
[Add](#)

Pharmacy
[Add](#)

[Edit](#)

Pick a plan

2020 FlexCare Value Balance (HMO-CSNP)

☆☆☆☆☆ [Star rating](#)

Medical Deductible

\$0

Maximum Annual Out Of Pocket

\$3,400

Pharmacy Deductible

\$0

Initial Coverage Limit

\$3,820

Monthly premium

\$0.00

Add-on coverage

[P](#) [B](#) [D](#)

Plan Details

Add to cart

Total est. annual cost

\$3,400.00

Shop all available plans

Shop all coverage types

Medicare Advantage

Medicare Advantage plans replace your Part A and Part B Medicare coverage. Your benefits would include medical expenses, but not prescriptions.


[Shop Medicare Advantage Plans >](#)

Medicare Advantage Prescription Drug

Medicare Advantage and Drug plans bundle the benefits of a Medicare Advantage plan with a Prescription Drug plan. Your coverage would include medical expenses and prescriptions. test

[Shop Medicare Advantage Prescription Drug Plans >](#)

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#	TASK	DETAILS
1	Personalized welcome message	Personalized message agent sent to the beneficiary when sending the quote.
2	Review your information	Authenticated beneficiaries can see their personal information including name, zip, and email.
3	Add your preferences	Beneficiary can view/add/edit their preferences like health status, prescription drugs, and pharmacy.
4	Pick a plan	Plans sent in quote are listed here. Beneficiary can view plan benefits, plan details, or add plan to cart and enroll.
5	Shop all available plans	Clicking <i>Shop all available plans</i> navigates beneficiary to the plan list page where they can view and shop for all available plans in their service area.
6	Shop all coverage types	Beneficiary can navigate to plan list page of a particular plan type for additional shopping.

Quote History

Quotes sent to the member are added to the quote history section in the beneficiary profile.

Quote history

Quote sent 04/19/2021 9:28 am PST to kkaszuba@connecture.com, (414) 555-1212 1

Plan type MEDIGAP
 Requested effective date: 05/01/2021 3
 Authorization code: FLOOLFME

Please review this quote at your earliest convenience. Let me know if you have any questions.
 Edward Enrollerbroker
 ProductTest1240

Quote sent 04/19/2021 9:25 am PST to kkaszuba@connecture.com, (414) 555-1212 2

Plan type MAPD 2
 Authorization code: DGKDCDNS

Please review this quote at your earliest convenience. Let me know if you have any questions. 4
 Edward Enrollerbroker 5
 ProductTest1240

#	TASK	DETAILS
1	Quote sent	Displays the date the quote was sent as well as the email or phone number the quote was sent to. Quote sent date in PST.
2	Quote details	Displays plan type being quoted. If Med Supp plan was quoted, requested effective date will also be displayed here.
3	Authorization Code	Unique system generated authorization code for that quote
4	Custom message	Customized message included with the quote
5	Agent Details	Username and name of agent who sent the quote

Show Plans Agents Have Permission to Sell

Overview

This feature allows agents to view all plans available in a beneficiary's service area as if they were on the Medicare.gov site without having to leave the site. This feature will assist agents/brokers in guiding beneficiaries to best plan based on their situation.

Plan List Page

When this feature is enabled on the site, the *Add non-licensed plans* link will appear at the top of the Plan List page. The user may click to return all plans contained in the Public Use File (PUF). After the plans are displayed, a filter will appear for users to filter out the PUF plans and only plans the user is licensed to sell will appear in the plan list.

The PUF plans are available in the list to view plan details or compare against other plans. PUF plans are not available to be added to the cart and users may not enroll in them. Users may also not add these plans to a quote.

Aetna Medicare Select Plan (HMO)
H0523-002
Not available [Star rating](#)

Medical Deductible
\$0

Maximum Annual Out Of Pocket
\$2,000

Monthly premium
\$0.00

Plan details

Add to cart

Add to quote

Prescriptions
1 of 1 covered

Pharmacy
1 of 1 covered

Est. drug cost
\$180

Total est. annual cost
\$1,280

Anthem MediBlue Diabetes Care (HMO C-SNP)
★★★★☆ [Star rating](#)

Medical Deductible
\$0

Maximum Annual Out Of Pocket
\$900

Monthly premium
\$0.00

Plan details

Not licensed to sell/quote

Prescriptions
1 of 1 covered

Pharmacy
1 of 1 covered

Est. drug cost
\$0

Total est. annual cost
\$18

#	TASK	DETAILS
1	Add non-licensed plans link	This area indicates to the user that they are not licensed to sell or quote this plan. These plans are available for the Compare feature.
2	Licensing Filter	Due to the high volume of plans that could be returned, users have the option to filter out non-permissioned/PUF plans by clicking the checkmark in this filter. This will only return plans the agent has permission to sell.
3	Not licensed to sell/quote	Users may view plan details or compare PUF plans with licensed plans. However, PUF plans will not be able to be added to the shopping cart and will be unavailable for enrollment.

Plan Details

When benefits are available for PUF plans, they will be displayed on the Plan Details page.
Note: When the user has entered a pharmacy in Guided Help, the pharmacy will not display on PUF plans. This applies to both retail and mail order costs.

Plan details

Prescriptions

Total costs

Costs based on retail pharmacy

[Edit](#) | [Switch to Mail order costs](#)

Plan details


Prescriptions

Total costs

Costs based on mail order pharmacy

[Switch to retail costs](#)

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Compare Plans

As stated above, plans an agent has permission to sell, as well as non-permissioned/PUF plans, are available for a side-by-side comparison. Only plans that an agent is licensed to sell will be allowed to be added to the cart/enroll or added to a quote.

Costs			
Premium	\$0 monthly	\$17 monthly	\$0 monthly

After clicking the *Send quote* button, note the plan in which the agent is not licensed to sell is not included in the quote.

Cross Sell – Medicare Supplement and Prescription Drug Plans

Overview

The Cross Sell feature allows customers to sell both Medicare Supplement and Prescription Drug plans together. The shopping cart must be enabled on the site to use this feature.

When this feature is enabled, the site will present a modal whenever the user adds either a Medicare Supplement or PDP plan to the cart. Users will then be able to enroll in these plans (based on enrollment rules for the plans).

When this feature is disabled, only one plan will be allowed in the cart at the time and there will be no cross promotion of these specific plan types.

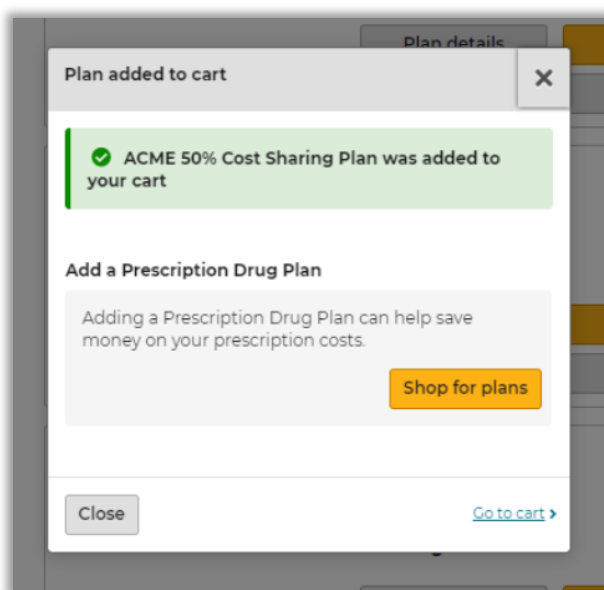
Note: Cross sell is not available during the window shopping period. Users will still be able to enroll in Medicare Supplement plans, but not PDP during this time.

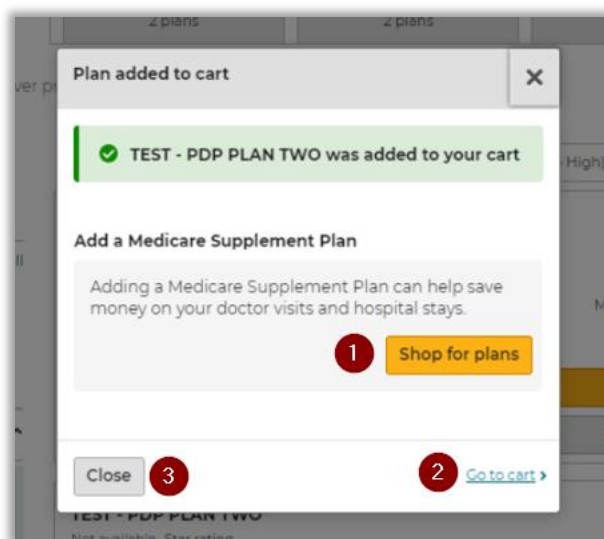
Plan List

When a PDP plan is added to the cart, but a Medicare Supplement plan has not, a modal will be presented to the user promoting Medicare Supplement plans. A modal will also be presented when the user has added a Medicare Supplement plan to the cart, but not a PDP plan, promoting a PDP plan.

When one of these plan types reside in the cart, the modal will not be presented to the user for that plan type.

Clicking the *Shop for plans* button will take the user to the plan tab that is being promoted.





#	TASK	DETAILS
1	Shop for plans	Clicking this button will navigate the user to the plan type tab being promoted in the modal.
2	Go to cart	This link will navigate the user to the shopping cart with the plan that was just added on the plan list page.
3	Close	Clicking this button will close the modal and keep the user on the plan list page/tab for the plan that was added to the cart.

Cart

When a PDP plan is in the cart, but not a Medicare Supplement plan (and vice versa), a message will appear at the top of the cart promoting the plan that is not in the cart. This is the same message that was displayed in the modal on the plan list page. When both plan types are in the cart, users will not see the promotion messaging in the cart.

Clicking the *Shop for plans* button will take the user back to the plan list page and present the plans for that plan type being promoted.

If the user tries to replace the plan(s) in the cart with either a MA or MAPD plan, the Medicare Supplement and PDP plans will be removed from the cart and replaced by either the MA or MAPD plan.

Promote Medicare Supplement plan –

Cart

Add a Medicare Supplement Plan

Adding a Medicare Supplement Plan can help save money on your doctor visits and hospital stays.

Shop for plans

Prescription Drug Plan

FlexCare PDP Plan 2

Monthly premium
\$51.50

[View details](#) | [Change plan](#) | [Remove plan](#)

Optional add-on coverage

Dental

Flexicare Dental

[View details](#)

\$15.00

Add

Hearing

Flexicare Hearing

[View details](#)

\$5.00

Add

Vision

Flexicare Vision

[View details](#)

\$10.00

Add

Dental, Vision, and Hearing package

Flexicare Combined

[View details](#)

\$25.00

Add

Promote Prescription Drug plan –

Cart

Add a Prescription Drug Plan

Adding a Prescription Drug Plan can help save money on your prescription costs.

1 Shop for plans

Medicare Supplement Plan

ACME 50% Cost Sharing Plan
Requested start date: May 1, 2021

Monthly premium
\$50.00

[View details](#) | [Change plan](#) | [Remove plan](#)

Optional add-on coverage

50% Part A Deductible

\$10.00

Add

Additional Home Health Care

\$2.00

Add

Co-Play Rider

-\$5.00

Add

Foreign Travel Emergency

\$1.00

Add

Part A Deductible

\$20.00

Add

Part B Copayment or Coinsurance

\$3.00

Add

Part B Deductible

\$5.00

Add

Part B Excess Charges

\$4.00

Add

#	TASK	DETAILS
1	Shop for plans	Clicking this button will navigate the user to the Plan List page, plan type tab being promoted in the modal.

Both plan types reside in the cart –

When both a Medicare Supplement and Prescription Drug Plan reside in the cart, the promotion message at the top of the cart will not display.

Cart

Prescription Drug Plan

TEST - PDP PLAN ONE

Monthly premium: **\$11.01**

[View details](#) | [Change plan](#) | [Remove plan](#)

*** How will you be completing this form?**

[Send to beneficiary to sign and submit](#)

[Complete and submit form myself](#)

*** Are you an existing member?**
If so, you will be able to complete a shorter form.

[Yes](#) [No](#)

Medicare Supplement Plan

ACME 50% Cost Sharing Plan

Requested start date: May 1, 2021

Monthly premium: **\$50.00**

[View details](#) | [Change plan](#) | [Remove plan](#)

Enrollment

The Cross Sell feature is designed to drive users to enroll in plans where internal/hosted forms exist first. For example, if the PDP plan is internal enrollment and the Medicare Supplement plan is message only or external enrollment, users will be presented with the PDP internal form to enroll in first. Note: Both plans will be contained in the mini-cart located on the right side of the enrollment form. However, the plan the user is currently enrolling in will be listed first.

There is an exception to this rule. There is a configuration where users will be driven to external enrollment first. This configuration is disabled by default and must be enabled on the site to drive users to external site enrollment first.

Enrollment Confirmation

After enrolling in the first plan, the user will be informed that there is still a plan in the cart. Upon clicking *Continue applying for coverage* button, the site will determine if the remaining plan is hosted, message only or external enrollment.

- If hosted, the user will be directed to the first page of the enrollment form for the plan in the cart.
- If message only, the user will be presented a modal message on the enrollment confirmation page informing them how to enroll in the plan. The plan will remain in the cart until it is removed by the user.
- If external enrollment, the user will be launched to the external site. The plan will be removed from the cart upon launching the user to the external site.

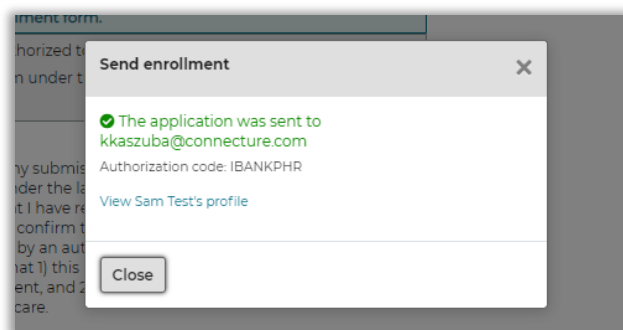
#	TASK	DETAILS
1	Continue applying for coverage	This button will appear when there is another plan in the cart. Clicking this button will follow the rules outlined above.

Send to Beneficiary

The Send to Beneficiary feature is available in the cart with the Cross Sell feature. If the agent opts to send one plan to beneficiary and complete and submit the other plan, the enrollment for the plan the agent selected to complete themselves will be presented first.

When the agent selects send to beneficiary for both plans and the agent sends the enrollment to the beneficiary for the first plan, the *Send enrollment* modal will appear informing them there is another plan in the cart.

After clicking *Continue applying*, the user will be navigated to the first page of the next enrollment that is in the cart. Once the second plan is sent to the beneficiary, the *Send enrollment* modal will appear as it normally does. Both plans will continue to appear in Enrollment history as partial enrollments.



#	TASK	DETAILS
1	Continue applying	This button will appear when there is another plan in the cart. Clicking this button will follow the rules outlined in the Enrollment Confirmation section above.
2	Close	Clicking this button will close the modal and keep the user on the Submit page of the enrollment form.

Enroll a Beneficiary

Agent Complete Enrollment Application for Beneficiary

PlanCompare ONE for Professional's electronic enrollment form guides the agent through the process of submitting the enrollment application. From the plan list page, an agent can add a plan to the cart. Agents can also start an enrollment from any page within a specific plan by clicking *Add to cart*. This directs the agent to the cart and *Continue to apply* from the cart takes the agent to the enrollment form.


Note: If the cart is disabled on a site, all buttons that would normally read as *Add to cart* will read as *Enroll*. Clicking this button will take the agent to the first page of the enrollment form instead of the cart. If cart is disabled, Send Beneficiary Application to Enroll feature (described below) is **not** available.

Send Beneficiary Application to Enroll (Email or Text)

If the beneficiary has chosen a plan to enroll in, the agent can send an application for a specific plan to the beneficiary by email and/or by text message.

Note: If a plan is not available for consumer direct enrollment, agents will see a banner at the top of the cart indicating a plan is available for Professional enrollment only.

Cart

 Professional enrollment only.
Plan not available to send to beneficiary to complete enrollment.

Medicare Advantage Prescription Drug Plan

TEST - MAPD PLAN THREE

Monthly premium
\$42.00

[View details](#) | [Change plan](#) | [Remove plan](#)

Total monthly premium **\$42.00**

Agents can add a plan to the Cart and choose in the Cart if they are completing the enrollment by sending to the beneficiary or submitting the enrollment themselves. This question displays underneath the plan information and above the action bar with *Continue to apply*.

Cart

Medicare Advantage Prescription Drug Plan

flexcare MAPD plan 2 Monthly premium **\$73.00**

[View details](#) | [Change plan](#) | [Remove plan](#)

Optional add-on coverage

Dental
Dental information here

Flexcare Dental	View details ▼	\$15.00	Add
-----------------	--------------------------------	----------------	---------------------

Hearing
Hearing information here

Flexcare Hearing	View details ▼	\$5.00	Add
------------------	--------------------------------	---------------	---------------------

Vision
Vision information here

Flexcare Vision	View details ▼	\$10.00	Add
-----------------	--------------------------------	----------------	---------------------

Dental, Vision, and Hearing package
Dental/Vision/Hearing information here

Flexcare Combined	View details ▼	\$25.00	Add
-------------------	--------------------------------	----------------	---------------------

Total monthly premium \$73.00

*** How will you be completing this form?**

[Send to beneficiary to sign and submit](#)

[Complete and submit form myself](#)

[< Previous](#)
[Continue to apply](#)

If Agent selects “*Complete and submit form myself*,” then on the last page of the enrollment form, they will see a *Submit* button. They will not see an option to send to the beneficiary. If they change their mind and DO want to send to beneficiary, they must return to the plan list page, add the plan to the cart again and choose the option to “*Send to beneficiary to sign and submit*.”

Note: When changing from agent submission to beneficiary completing form, some information may be lost and will need to be re-entered.

If Agent selects “*Send to beneficiary to sign and submit*,” they will fill out all required information for the beneficiary and find the *Send to beneficiary* button at the bottom of the last page of the enrollment form.

[< Previous](#)
1
Send to beneficiary

Send enrollment ✕

How would the beneficiary like to receive the application to finish enrolling?

☒ Email * Email address test@connecture.com 2

☒ Text * Phone number (262) 123-1234

Plan included 3 Select all

flexcare MAPD plan 6 2021

☐ 2021 Summary of Benefits

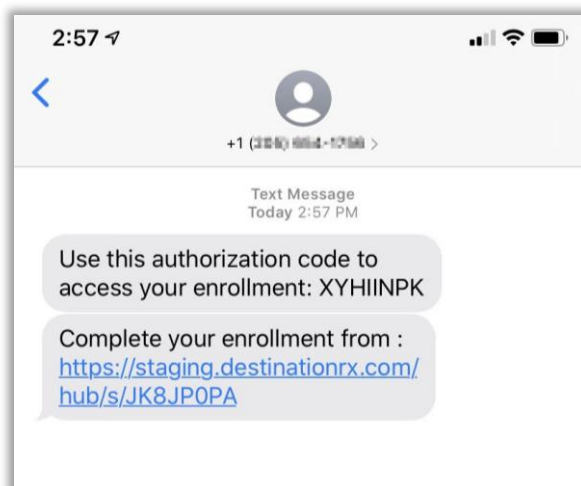
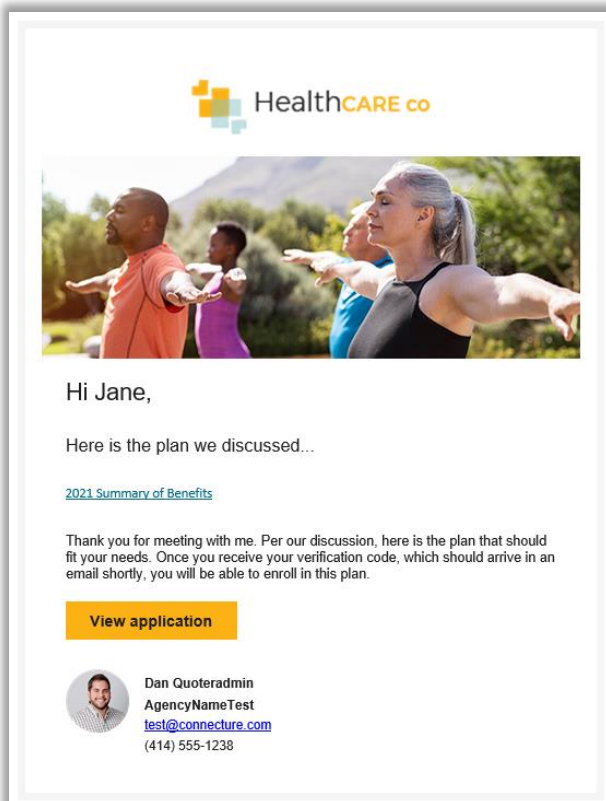
☐ 2021 Application Form

Cancel
4
Send application

#	TASK	DETAILS
1	Send to beneficiary	<p>From the last page in the enrollment form, click <i>Send to beneficiary</i> to choose to send the application by text and/or email.</p> <p>NOTE: If agent changes their mind and wants to submit themselves, they need to add the plan to Cart again and choose the option in Cart to submit instead of send to beneficiary. This will start a new enrollment and information entered in the previous form may be lost.</p>
2	Enter phone and/or email	<p>Type in the phone number and/or email to send the application to the beneficiary. If there is an existing number or email, it will prepopulate.</p> <p>Confirm the number is a mobile phone and not a landline number.</p>
3	Choose plan documents	<p>When sending the application by email, agents can choose to include plan documents with the link to the enrollment application. Plan documents are not sent by text message. Plan documents are included in the email as a link.</p>
4	Send application	<p>Click <i>Send application</i> to send the application to the beneficiary. The beneficiary will receive two texts and/or two emails, one with the link and one with the authorization code.</p>

Sample Beneficiary Application Email and Text

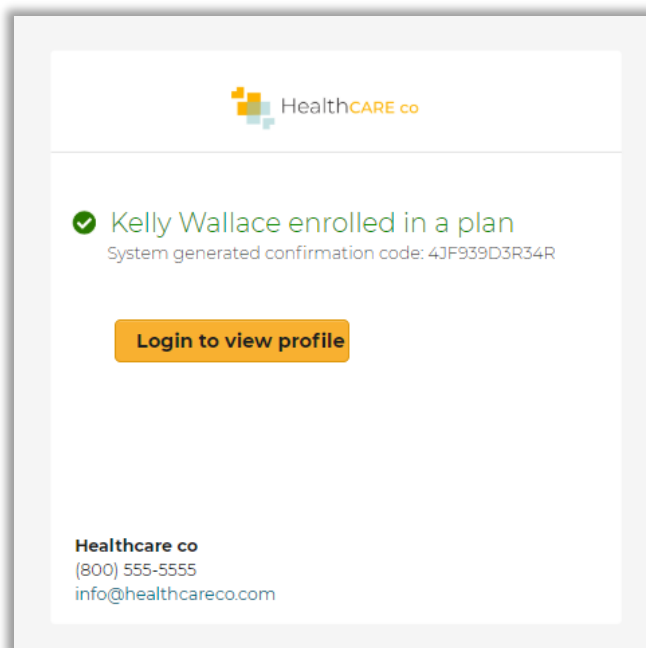
This is the email and text message the beneficiary will see when they receive a link to an enrollment application. They will also receive an email with an authorization code to securely authenticate and access the application (see Quoting for example of authorization code email).



Beneficiary will open the enrollment application from the link and land on the last page of the enrollment form. They can review their information, make any necessary changes, and then sign and submit the application.

Agent Email Notification of Beneficiary Enrollment

When a beneficiary completes an enrollment, if the agent has an email on file then they will receive a notification email. They can log in to view more information related to the profile and enrollment.



Enrollment History

The Profile page allows agents to view a beneficiary's enrollment history. Agents can access this page by searching for a profile, opening the profile, and then scrolling down to the Enrollment history.

For each beneficiary, agents will see three types of enrollment information:

1. Current year in process enrollments at the top of the list. These are applications that have been started but not completed for the beneficiary for the current plan year.
2. Current year completed enrollments below the in-process enrollments. These are completed enrollment applications for the current plan year and may include information about riders, documents uploaded during enrollment and the ability to view the PDF of the application.
3. Past enrollment information is at the bottom. This includes plan name and other information if available to be displayed.

Enrollment history

Healthcare co choice 5000
last updated 03/06/2020 9:10am PST

Continue enrollment

Total monthly premium \$17.00

Healthcare co choice value plus 5000
Submitted 11/04/2019 4:53pm PST ¹ Confirmation #123010243sdg [View application](#) ²
Requested effective date 01/01/2020

Proof of citizenship.jpg
 Loss of coverage.pdf
 End state renal disease.pdf

+ Dental 5000 + Vision 2000 rider

Total monthly premium \$3.10

Healthcare co choice value plus 5000
Submitted 12/04/2018 3:26 pm PST Confirmation #123010243sdg

Total monthly premium \$20.60

#	TASK	DETAILS
1	View enrollment information	The enrollment history information for this applicant includes the date and time of the application submission, the plan selected for enrollment, and the confirmation number. Agents will also see rider information, documents uploaded during enrollment and the total monthly premium.
2	View the enrollment form	To view a PDF version of the completed enrollment form, click <i>View application</i> .

Medicare Supplement

If offered, the Medicare Supplement plan tab will appear on the Plan List page. When selected, agents will be required to answer a series of rate factor questions for the beneficiary prior to viewing plans and rates.

Rate Factor Questions

Rate factor questions vary by carrier. Rate factor questions displayed are dependent on the plan selected and its service area. All questions in the sample image provided may not display for all plans, only the applicable questions for the plan selected will display. All questions displayed are required.

35 plans available in [90210](#)

Medicare Advantage Prescription Drug Plans
6 plans

Medicare Advantage Plans
8 plans

Prescription Drug Plans
5 plans

Medicare Supplement Plans
16 plans

Medicare Supplement plan premiums and eligibility may vary. Please provide the following additional information to calculate your plan premiums and determine if you are eligible for enrollment in the plan.

Medicare Supplement Information

* Date of birth

* Effective date

* Gender

* Height

 ft in

* Weight

 lbs

* Payment method

* Will you be signing up a spouse?

* Hospital (Part A) effective date

* Medical (Part B) effective date

* Do any of these apply to you?

If so, you likely qualify for Guaranteed Issue, which is a policy available to any eligible applicant without regard to health status. Click on the categories below to reveal and select a statement.

I am new to Medicare

You turned age 65 and enrolled in Medicare Part B in the last 6 months. OR You will turn age 65 and enroll in Medicare Part B within the next 6 months, on or before the effective date you selected above.

I am moving

I am losing coverage

I changed my mind

None of these

* Tobacco use?

[< Previous](#)
[Continue to plans](#)

#	TASK	DETAILS
1	Rate factor questions	Answer all questions presented regarding the beneficiary.
2	Guarantee issue reasons	Select a reason from this area. Clicking on the category to reveal reasons associated with the category. Select the most appropriate reason for guarantee issue.

#	TASK	DETAILS
3	Condition tobacco question by state	<p>Based on the state for the ZIP code entered and if Guarantee Issue applies, the tobacco question will appear below the GI questions. The state must be included in the configuration. States currently included are: AR CA HI IL IA KY LA MD MI MO NH NJ NC ND OH PA SC TN UT VA WI</p> <p>PY2021 – Tobacco question will appear in normal position after gender question. PY2022 - Tobacco question will be conditioned by state.</p>

Plan List

After all rate factor questions have been answered and agent clicked the *Continue to plans* button, available plans and premiums will be presented. Select *Edit your answers* in the banner above the plans to go back to the rate factor questions.

73 plans available in [90210](#)


Medicare Advantage Prescription Drug Plans
11 plans

Medicare Advantage Plans
4 plans

Prescription Drug Plans
6 plans





Medicare Supplement Plans
52 plans

Medicare Supplement Plans cover gaps in Medicare Part A and B. You may choose to also enroll in a Prescription Drug Plan.

 [Edit your answers](#)

Sort:
Plan Premium (Low to High)

Preferences

Enter preferences to estimate your annual cost.
 **Get Started**
 **Health**
 **Prescriptions**
 **Pharmacy**
[Add preferences](#)

Filters
Clear all

Plan subtypes
☐ Plan A
☐ Plan B
☐ Plan C
☐ Plan D
☐ Plan E
☐ Plan F

ACME Plan A

Add-on coverage

Plan Type
Plan A

Monthly premium
\$52.90

☐ Add to compare

Plan Details

Add to cart

ACME Plan A Select

Plan Type
Plan A

Monthly premium
\$57.90

☐ Add to compare

Plan Details

Add to cart

ACME Plan B

Plan Type
Plan B


Monthly premium
\$67.90

☐ Add to compare

Plan Details

Add to cart

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 **CONNECTURE**
DRX

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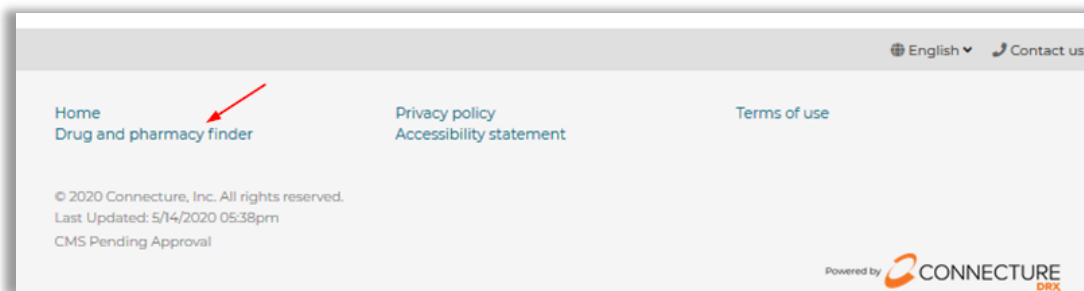
There may be an occasion when, based on the answers provided to the rate factor questions, no plans are available. When this occurs, a message will appear where plans are normally located. Again, select *Edit your answers* to return to the rate factor questions.

The screenshot displays the HealthCARE.co PlanCompare ONE Professional interface. At the top, the header includes the HealthCARE.co logo, a search bar, and user profile information for Donna Smith. The main content area shows "14 plans available in 90010" with a link to view plans. Below this, four filter categories are listed: Medicare Advantage Prescription Drug Plans (7 plans), Medicare Advantage Plans (5 plans), Prescription Drug Plans (2 plans), and Medicare Supplement Plans (0 plans). A message states: "Medicare Supplement Plans cover gaps in Medicare Part A and B. You may choose to also enroll in a Prescription Drug Plan." A yellow banner with a warning icon and the text "Edit your answers" is prominently displayed. To the right, a "Sort:" dropdown menu is set to "Plan Premium (Low to High)". On the left, a "Preferences" sidebar allows users to enter preferences to estimate their annual cost, with options to "Get Started", "Health", "Prescriptions", and "Pharmacy", each with an "Edit" link, and an "Add preferences" button. Below the preferences, a "Filters" section states: "There are no filters for your available plans." A message in the center reads: "Based on the answers you provided, no Medicare Supplemental plans are available. Click here to review your answers."

Drug, Pharmacy and Provider Search

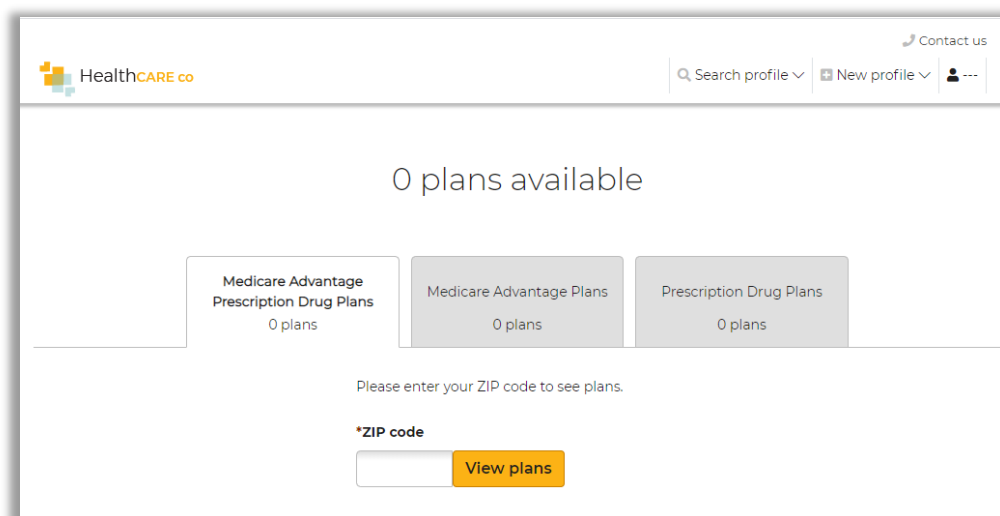
The Drug, Pharmacy and Provider Search feature allows agents to bypass the shopping process and search for covered drugs, pharmacies, and providers for a specific plan.

This feature may be accessed by clicking this link in the footer:

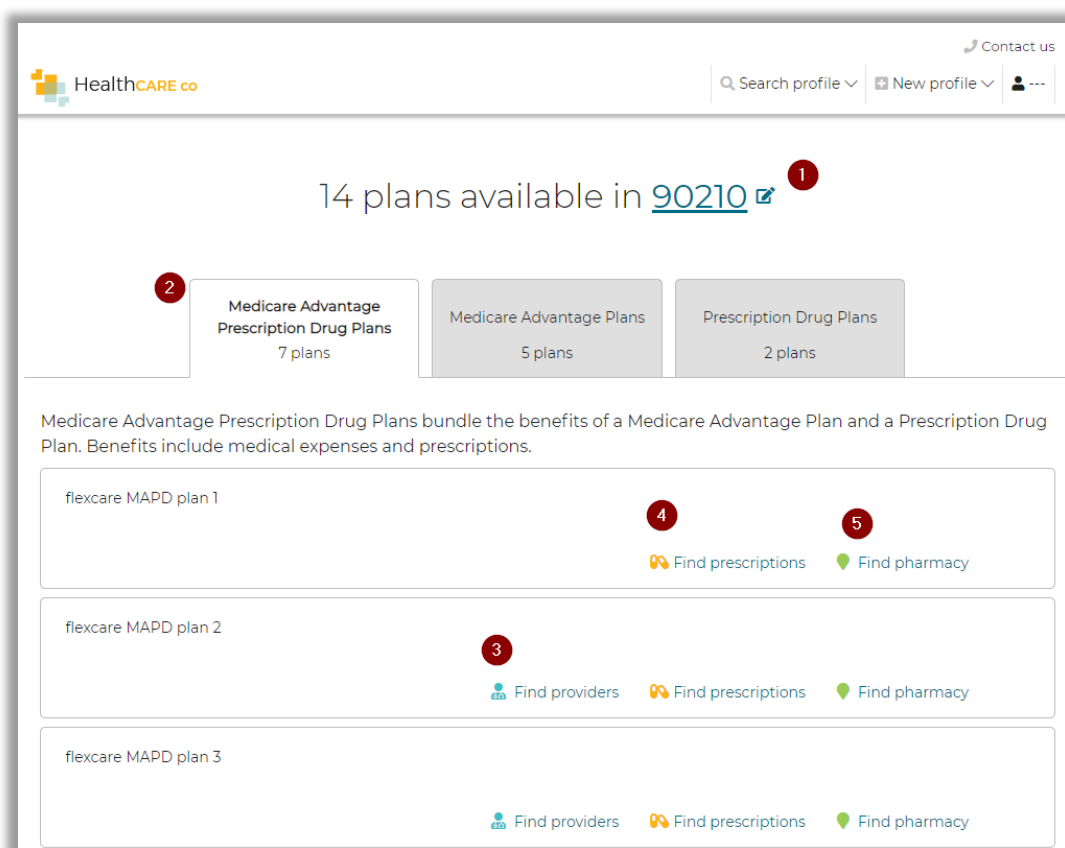


Plan List

Agents will land on the available plans page and need to enter a ZIP code:



After a ZIP code has been entered, available plans will appear.



#	TASK	DETAILS
1	Edit ZIP code	Edit/update the ZIP code to reveal plans available.
2	Plan tabs	Plan tabs will display for all available plan types. NOTE: Medicare Supplement plans are not available to search for this feature.
3	Find providers	This link will open the Providers tab where a search mayb be performed for in network providers. If there is no provider feature for the site and an external URL is included in the plan data, a new page will open to perform a search for providers for the plan.
4	Find prescriptions	This link will open the Prescriptions tab where a search may be performed for covered prescriptions specific to the plan.
5	Find pharmacy	This link will open the Pharmacy tab where a search may be performed for covered pharmacies specific to the plan.
	Find dentists	This link will be enabled if an external URL is included in the plan data to perform a search for dentists for the plan.

Find Providers

Select a plan and click *Find Providers* for that plan in the ZIP code. Update the ZIP code or search for provider by name. Use the filters to filter on individuals or facilities.

The screenshot shows the 'Find Providers' interface. At the top, there are three tabs: 'Providers' (selected), 'Prescriptions', and 'Pharmacy'. Below the tabs, a message states: 'The map below shows providers in-network with this plan. If you do not see a provider you're looking for, please check the carrier provider directory to determine if they are in network.' Below this message are two input fields: 'ZIP code' (containing '90210') and 'Provider name' (with a placeholder 'Search doctor or facility'). To the right of these fields is a 'Search' button. Below the input fields are two checkboxes: 'Doctors and other professionals' (checked) and 'Facilities (hospitals, clinics and urgent care)' (checked). Below the filters is a list of providers, each with a green location pin icon and a numbered callout (1-5). The providers listed are: 1. Naeem Etemadi, Dentist, 3030 Harbor Blvd Ste G1, Costa Mesa, CA 92626; 2. Dr. Jerome N. Peterson, Dentist, 2500 Alton Pkwy Ste 202, Irvine, CA 92606; 3. Dr. Jerome N. Peterson, Dentist, 3620 S Bristol St Ste 302, Santa Ana, CA 92704; 4. Dr. Vanila Choudhry, Dentist, 14415 Culver Dr, Irvine, CA 92604; 5. Dr. Vanila Choudhry, Dentist. To the right of the list is a map of the Orange County area with green location pins corresponding to the providers. At the bottom left, it says 'Viewing 1 - 10 of 32'. At the bottom center, there are pagination buttons: '1', '2', '3', '4', and '5' (selected). At the bottom right, there is a zoom control with a '+' and '-' button.

#	TASK	DETAILS
1	Change ZIP code	Enter a different ZIP code to review in-network providers in that area.
2	Provider name search	Search for specific providers by name
3	Filter results	Filter by individual or facilities to find specific providers
4	Zoom in/Zoom out	Use the + or – to zoom in and out of the map.
5	Pagination	If there are more than 10 providers, click on page numbers to advance the list to the next or previous page.

Find Prescriptions

Select a plan and click *Find Prescriptions* for that plan. Search for the drug by name. Upon typing the name, a list of drugs will appear. Select either the drug name from the drop down or click the search icon.

Medicare plans

flexcare MAPD plan 1

Prescriptions Pharmacy

Add your prescription to see how this plan provides coverage. Formularies may change on January 1

Search:

- Creon
- Cresemba
- Crestor**
- Clobetasol Propionate E (cream)
- doxepin hydrochloride (cream)
- Increlex
- Locoid Lipocream

Frequently asked questions

What are the differences between plans?

- Deductible Phase**
Until you meet your deductible, you will begin to pay for your plan.

deductible is met the plan will begin to pay for your plan.

NOTE: Agents may only search for one drug at a time. Drugs may not to be added to the beneficiary's medicine cabinet in this process. This can be done on the main site. See the Prescriptions section in this document above.

1 Medicare plans

flexcare MAPD plan 1

Prescriptions Pharmacy

Add your prescription to see how this plan provides coverage. Formularies may change on January 1

Search prescriptions

Crestor

Select your dosage and enter the amount you use below. The most common dosage and quantity is prefilled.

Select dose and form 2

- Crestor TAB 5MG
- Crestor TAB 10MG**
- Crestor TAB 20MG
- Crestor TAB 40MG

Enter quantity and frequency 3

30 per month

4 Would you like to use a Generic (rosuvastatin calcium) for Crestor

According to the FDA, this generic drug has the same quality, strength, safety and active ingredient as the brand name drug.

Yes No

Cancel

5 See if this drug is covered

#	TASK	DETAILS
1	Medicare plans	Click this to navigate back to the plan list.
2	Select dose and form	Select the dosage and the form of the drug.
3	Enter quantity and frequency	Enter the quantity and select the frequency of the drug.
4	Generic vs Brand selection	Select Yes for the direct generic form of the drug or No for the brand form.
5	See if this drug is covered	After making the selections above, click this button to see if the drug is covered and reveal pricing specific to the plan.

Drug Coverage Results

After clicking the *See if this drug is covered* button, the drug will appear in the appropriate tier along with costs associated with the tier. Footnotes associated with the drug will appear below the table.

NOTE: Drug pricing will appear if it is enabled for the feature.

Direct Generic Example

← Medicare plans

flexicare MAPD plan 1

Prescriptions Pharmacy

Add your prescription to see how this plan provides coverage. Formularies may change on January 1

1 Search prescriptions

✓ Covered prescriptions

Preferred Generic
None of your prescriptions are in this tier.

Generic
None of your prescriptions are in this tier.

Preferred Brand
None of your prescriptions are in this tier.

Non-Preferred Brand
None of your prescriptions are in this tier.

Specialty Tier
None of your prescriptions are in this tier.

✖ Non-covered prescriptions

rosuvastatin calcium TAB 10MG¹⁵
30 tablets per month Generic

Retail cost (1 month supply)	Retail Cost ⓘ \$243.97	Before Cap ⓘ \$243.97	During Cap ⓘ \$243.97	After Cap ⓘ \$243.97
Restrictions	PA No	QL No	ST No	

Cancel 2 Edit drug

Brand Example

← Medicare plans

flexcare MAPD plan 1

Prescriptions Pharmacy

Add your prescription to see how this plan provides coverage. Formularies may change on January 1

1 Search prescriptions

✓ Covered prescriptions

Preferred Generic
None of your prescriptions are in this tier.

Generic
None of your prescriptions are in this tier.

Preferred Brand

Crestor TAB 10MG		Brand			
30 tablets per month					
Retail cost (1 month supply)	Retail Cost [?]	Before Gap [?]	During Gap [?]	After Gap [?]	
	\$142.80	\$45.00	\$35.70	\$8.95	
Restrictions	PA No	QL No	ST No		3

Non-Preferred Brand
None of your prescriptions are in this tier.

Specialty Tier
None of your prescriptions are in this tier.

✕ Non-covered prescriptions

Cancel 2 Edit drug

Restrictions

Crestor TAB 10MG
30 tablets per month

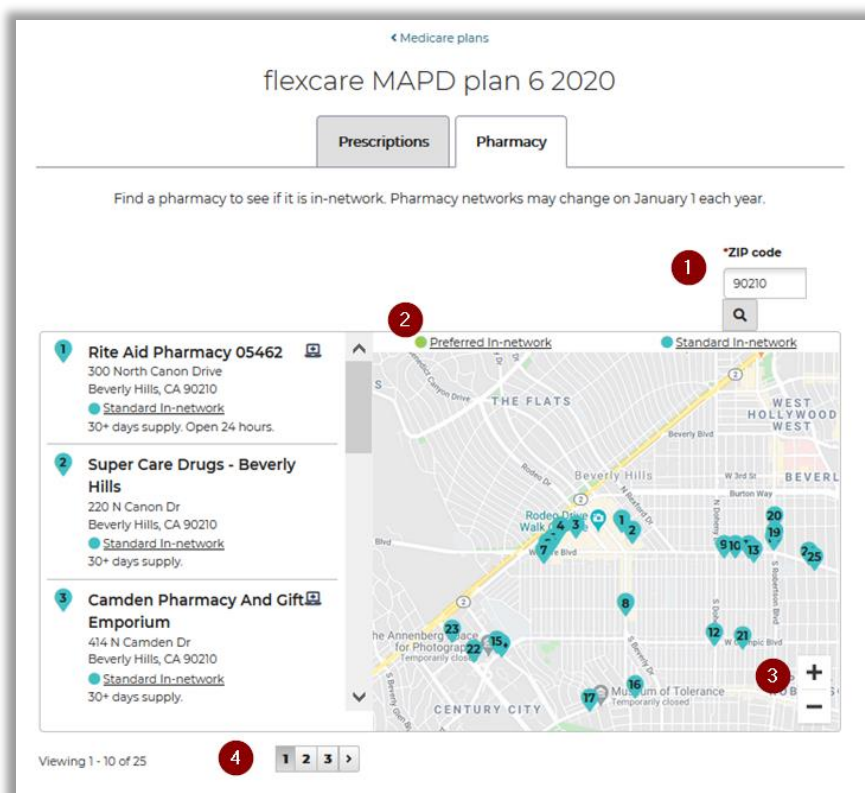
Retail cost (1 month supply)		Gap [?] 0
Restrictions	3 PA No QL No ST No	

Quantity Limits
Some plans restrict the amount of a drug that will be covered for a single copay or within a predefined period of time.

#	TASK	DETAILS
1	Search prescriptions	Enter another drug name here to search for a different drug.
2	Edit drug	Return to the results page for this drug to edit dosage, quantity, frequency, or switch between brand and generic.
3	Restrictions	Hover over each restriction designation to reveal a description of each restriction.

Find Pharmacy

Click the Pharmacy tab to review in-network pharmacies within the ZIP code.



#	TASK	DETAILS
1	Change ZIP code	Enter a different ZIP code to review in-network pharmacies in that area.
2	Preferred in-network Standard in-network	Pins are color coded to indicate if the pharmacy is designated as Preferred in-network or Standard in-network. Click on the pins on the map to view the name of the pharmacy and the address. Pins correspond to the list on the left side of the map.
3	Zoom in/Zoom out	Use the + or – to zoom in and out of the map.
4	Pagination	Click on page numbers to advance the list to the next or previous page.

Agent Account Overview

The Account Overview page allows agents to view and manage their information in the system, as well as access their personalized shopping link. This page can be accessed by clicking the agent's name in the top right navigation bar and selecting *Account Overview* from the menu.

HealthCARE.co

Contact us

Search profile New profile Betty Broker

Account overview

My shopping link

Send your personalized link to the client to get them started with shopping for plans. Don't worry, you will get credit if the consumer enrolls in any of these plans.

Copy link

Personal information

* First name: Betty

* Last name: Broker

Email address: test@connecture.com

Phone number: (414)-555-1236

Address:

City:

State:

ZIP code:

Account information

* Username: ProductTest1236

Password:

NPN: NPNTTest

* Role: Enroller

May create/view all prospect profiles on all site accounts and enroll

Active selling permissions

Carrier	State	Plan type	Agent Producer ID	Effective start date	Effective end date

Save

Account overview

My shopping link

Send your personalized link to the client to get them started with shopping for plans. Don't worry, you will get credit if the consumer enrolls in any of these plans.

Copy link

My picture

This image will be used on the consumer shopping site and email signatures.

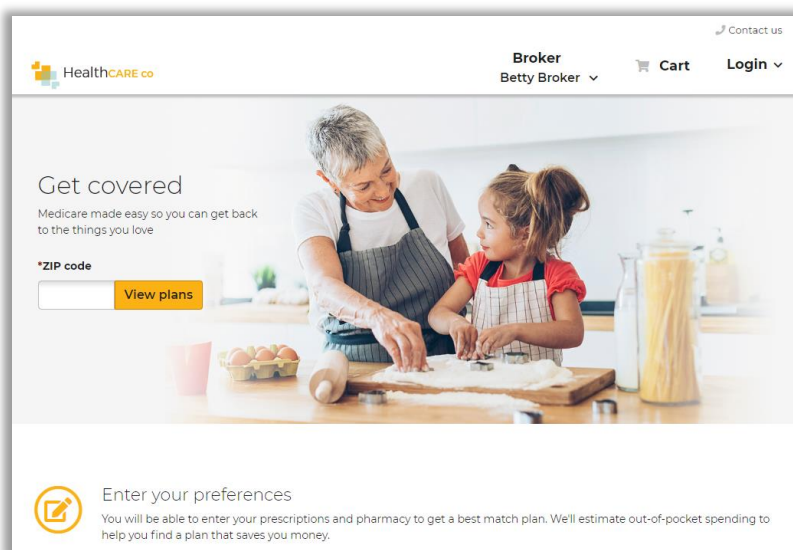
Please upload a .gif, .png, or .jpg, less than 5 MB.

Upload

#	TASK	DETAILS
1	View and edit account information	Account information displays on this page. Site administrator determines the fields agents may edit. After editing, click the <i>Save</i> button at the bottom of the page to save changes. If agents need to change any other personal information in this section, contact your site administrator.
2	Access Shopping Link (Personalized URL)	Agent information is included in this link, so agents receive credit for any enrollments completed by the beneficiary who use this link. To provide this link to a beneficiary, copy the URL by clicking the <i>Copy link</i> button. Then, agents can paste this URL into, for example, an email.
3	Agent Selling Permissions	Customers have the option to display an agent's selling permissions assigned to them. When available, this will be located at the bottom of the page. It will display each carrier, state, and plan type the agent has permission to sell along with agent ID and start and end effective dates.
4	Agent Picture	If the agent picture feature is turned on for the site, agents can upload a .gif .png .jpg that is less than 5 MB. This picture will be included in communications to beneficiaries like the email signature and on the authorization code page to view a quote or enrollment application.

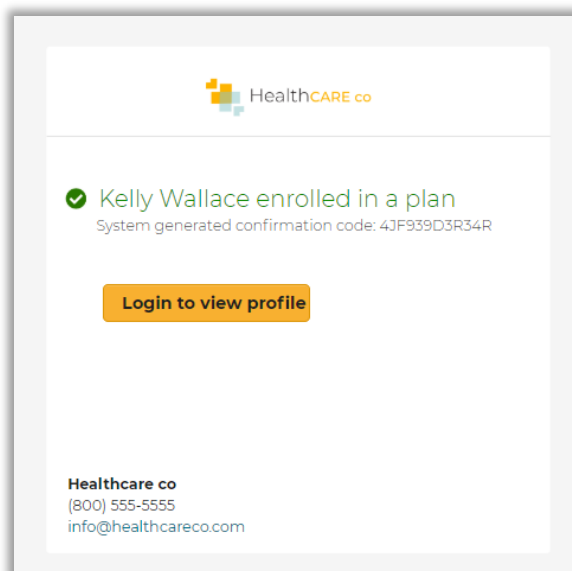
Shopping Link (Personalized URL)

Agents can copy their personalized shopping link and share with a beneficiary. When the beneficiary opens the site from the link, they will see the agent's information in the header of every page (see image). Beneficiaries will be able to shop for only the plans the agent is licensed to sell. If a beneficiary creates an account, agents will be able to search for the profile and see any updates made by the beneficiary, such as prescriptions added to the Medicine Cabinet. Agents will receive credit for all enrollments completed on their personal links.



If the agent sent their Shopping Link to a beneficiary and the beneficiary enrolled in a plan, the agent will receive an email notifying them of the enrollment. To receive this notification, the

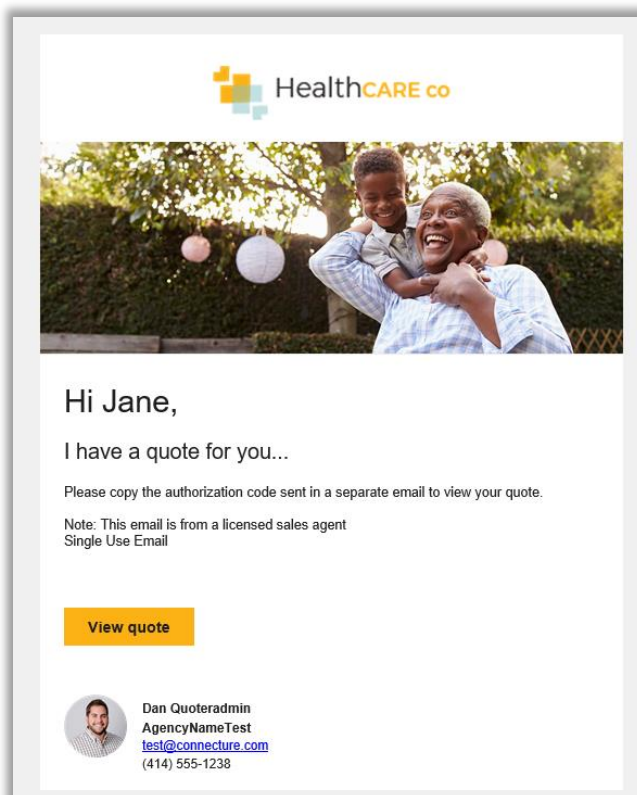
email must be turned on for the site and the agent must have a valid email address in their account.



Agent Picture

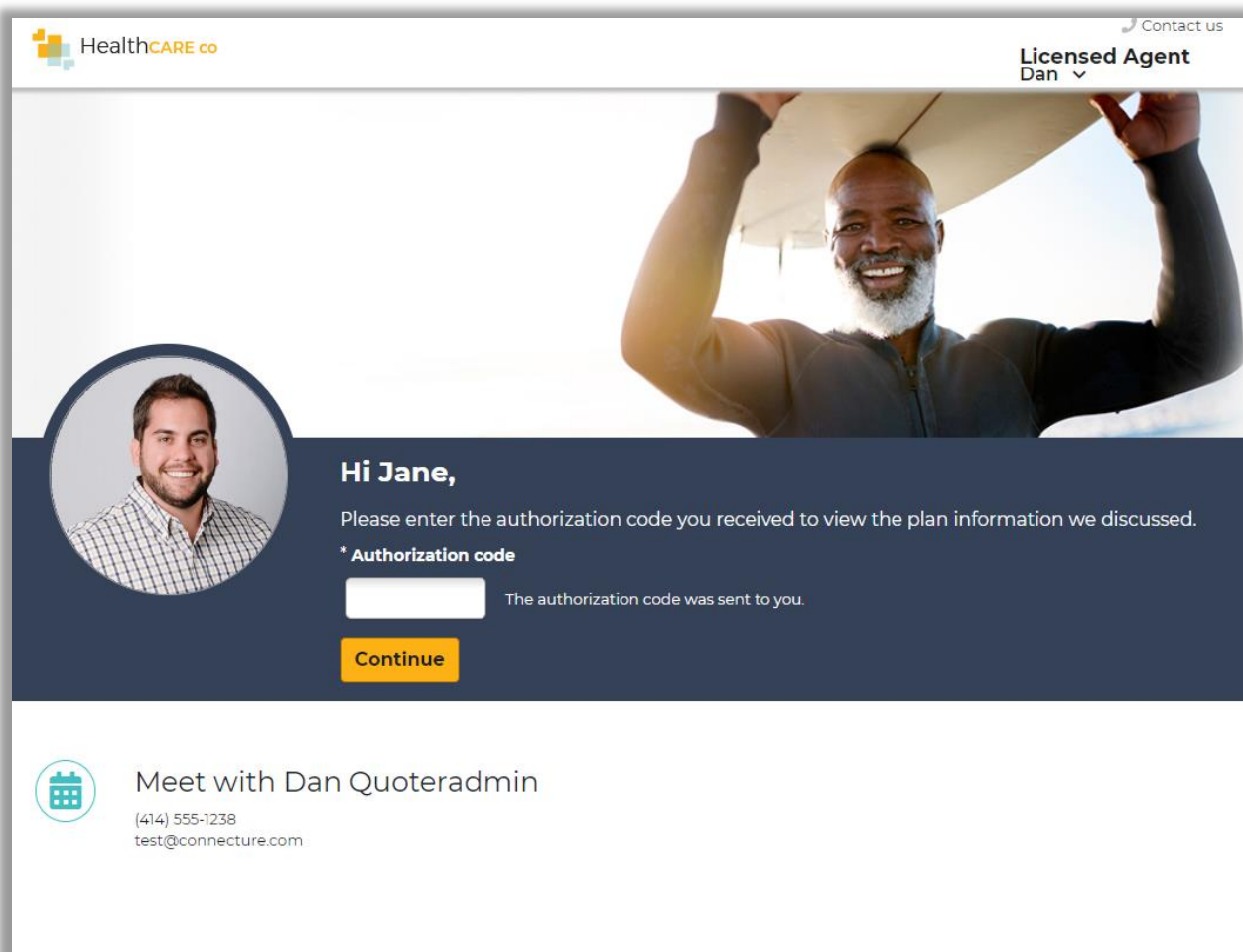
Agents can add a picture on their account overview page. This picture will be included in their email signature and other communications to the beneficiary.

When an email including the email signature is sent, it will include the picture:



PlanCompare ONE Professional

When the beneficiary clicks the link in the email to open a quote or enrollment application, they will see the agent picture on the page where they enter the authorization code:



The screenshot displays the PlanCompare ONE Professional web interface. At the top left is the HealthCARE co logo. At the top right, it says "Contact us" and "Licensed Agent Dan" with a dropdown arrow. The main header features a large image of a smiling man with a beard holding a surfboard. Below this, on the left, is a circular profile picture of a man with a beard. To the right of the profile picture, the text reads "Hi Jane," followed by "Please enter the authorization code you received to view the plan information we discussed." Below this is a label "* Authorization code" and a text input field. To the right of the input field is the text "The authorization code was sent to you." Below the input field is a yellow "Continue" button. At the bottom left, there is a calendar icon and the text "Meet with Dan Quoteradmin", "(414) 555-1238", and "test@connecture.com".

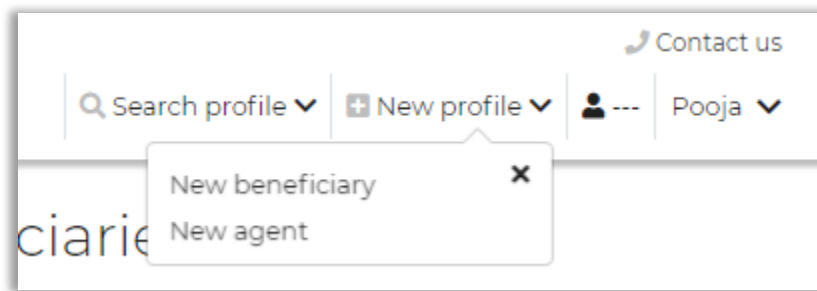
Admin User Functionality

PlanCompare ONE for Professionals users with administrative permissions have access to additional functionality. Additional functionality includes:

- Create new agents
- Search agents
- Edit agent accounts
- See all profiles within the system
- Search beneficiary profiles based on agent assignment

Create Agents

Admin users can create new agents. The *New profile* link in the global header opens a dropdown that allows admin users to select which profile type they want to create:



- *New beneficiary* navigates to new beneficiary profile page. See New Profile section above in this document for more details
- *New agent* navigates to the create agent account page

Create account allows agents to create new agent profiles by providing personal and account information for the new agent.

NOTE: Agent selling permissions need to be loaded with the ASP/ALP file and cannot be created or edited from the Account Overview page for an agent.

1

New agent account

Personal information

* First name

Last name

* Email address

Phone number

Address

City

State

ZIP code

2

Account information

* Username

* Password

NPN

Agency ID

Agency name

* Agent ID

* Expiration date

* Site access

* Account status

* Role

Revoke access

This user has access to the site.

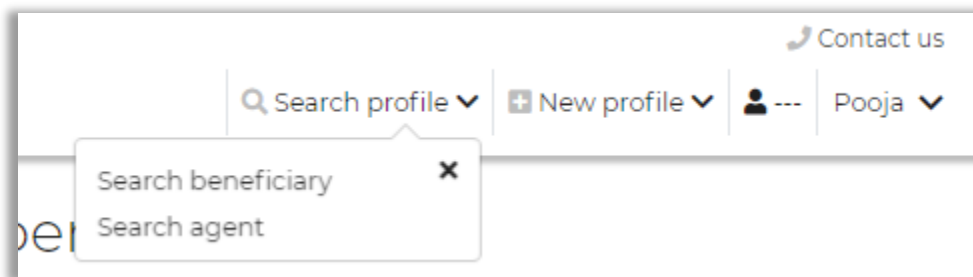
3

Save

#	TASK	DETAILS
1	Personal Information	Enter the agent's personal information. The required fields are marked with an asterisk (*).
2	Account information	Enter the agent's account information. The required fields are marked with an asterisk (*).
3	Save	Saves profile if all validations are met and navigates to Account Overview page of the newly created agent where admin user can edit the agent's profile

Search Agents

Admin users can search for agent profiles. The *Search profile* link in the global header opens a dropdown that allows admin users to select which profile type they want to search:



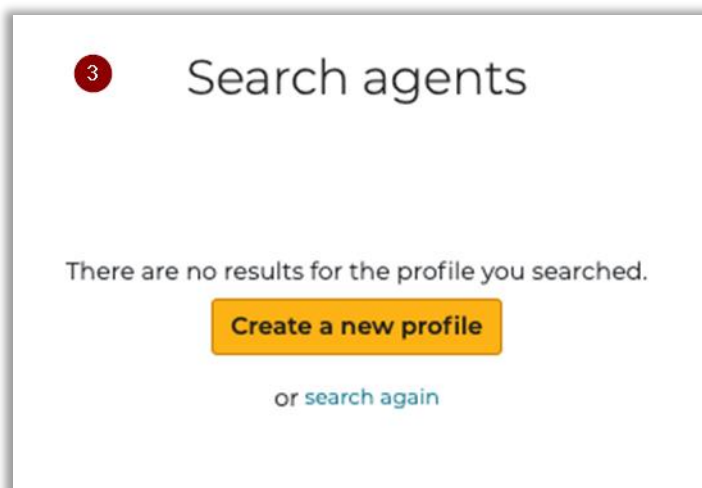
- *Search beneficiary* navigates to search beneficiaries page. See Beneficiary Profile - Search Profile section in this document for more details
- *Search agent* navigates to Admin user to the search agent page. Admin user can fill in the search criteria and click on Search profiles to view search results

A screenshot of the 'Search agents' form. The title 'Search agents' is at the top. Below it is a red circle with the number '1'. The form has six input fields: 'First name', 'Last name', 'Username', 'Agency name', 'Account status', and 'NPN'. The 'Account status' field has two buttons: 'Active' and 'Inactive'. A 'Search profiles' button is at the bottom right.

First name	Last name	Username
<input type="text"/>	<input type="text"/>	<input type="text"/>
Agency name	Account status	NPN
<input type="text"/>	<input type="button" value="Active"/> <input type="button" value="Inactive"/>	<input type="text"/>

A screenshot of the 'Search agents' results table. The title 'Search agents' is at the top. Below it is a red circle with the number '2'. The table has three columns: 'Agent Name', 'Status', and 'Site access'. There are three rows of results.

Search results		
James Agent Jamesagent1	● Active	Site access
James Bond JamesBond2	● Active	Site access
James Bond JamesBond1	● Inactive	Site access



#	TASK	DETAILS
1	Enter search criteria	To search for a specific profile, enter the agent's information in the search parameters. Admin user needs to enter information in at least one field with minimum 2 characters. However, entering more information will assist in narrowing the search. To find the agent profiles that match the search parameters entered, click <i>Search Profiles</i> .
2	View search results	Agent search results are displayed in alphabetical order of agent last name. Clicking on agent name navigates admin user to the account overview page of that agent. Search results display: Agent first and last name Username Active/Inactive status Indicator if agent has access to that site or not.
3	No search results	If the search criteria do not match any agent information, no results message and option to <i>search again</i> is displayed

Account Overview for Admin Users

Admin users can edit their own and other agent's account information. Admin users can view and edit additional fields that non-admin users do not have access to.

Account overview

My shopping link

Send your personalized link to the client to get them started with shopping for plans. Don't worry, you will get credit if the consumer enrolls in any of these plans.

[Copy link](#)

Personal information 1

* First name	Last name	* Email address	Phone number
<input type="text" value="James"/>	<input type="text" value="Broker"/>	<input type="text" value="-"/>	<input type="text" value="(546)-565-5466"/>
Address	City	State	ZIP code
<input type="text" value="Text1"/>	<input type="text"/>	<input type="text" value="v"/>	<input type="text"/>

Account information

* Username	Password	NPN	Agency ID
<input type="text"/>	<input type="text" value="....."/> <small>Include at least 1 capital letter, 8 characters and 1 number</small>	<input type="text"/>	<input type="text"/>
Agency name	* Agent ID	* Expiration date	* Site access
<input type="text"/>	<input type="text" value="123456"/>	<input type="text" value="12/31/9999"/>	<div style="border: 1px solid #ccc; padding: 5px; text-align: center;">Revoke access</div> <small>This user has access to the site.</small>
* Account status	* Role		
<div style="display: inline-block; border: 1px solid #ccc; padding: 2px 5px; margin-right: 5px;">Active</div> <div style="display: inline-block; border: 1px solid #ccc; padding: 2px 5px;">Inactive</div>	<div style="border: 1px solid #ccc; padding: 2px 5px; display: inline-block;">Enroller_Admin v</div> <small>May create/view all prospect profiles on all agent and agency site accounts and enroll</small>		

#	TASK	DETAILS
1	Personal Information	Admin users can edit all fields in this section.
2	Account information	Admin users can access view additional fields like Agency Name, Agency ID, Agent ID, Account Status, Site access and Expiration date

Roles and Permissions

The table below describes the user roles and associated permissions available on PlanCompare ONE for Professionals. These are general access permissions. Individual agent permissions to sell plans in a multi carrier setting are defined elsewhere.

ROLE	PERMISSION
Quoter	May create and view all prospect profiles.
Quoter_Broker	May create and view own profiles.
Quoter_Admin	May create/view profiles on all agent and agency accounts.
Enroller	May create/view all prospect profiles on all accounts and enroll.
Enroller_Broker	May create/view own prospect profiles and enroll.
Enroller_Admin	May create/view all prospect profiles on all agent and agency accounts and enroll.