

A Smarter Sales Software Solution

What is



Lead Management

Import & upload Leads populating info on lead like name, address, etc. Assign Leads to users in your sub-group.



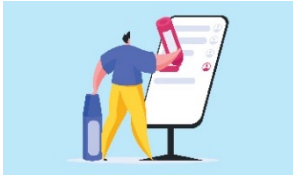
Customer Management

Pin, add flags, notes & documents to customer as well as record number of phone calls to customers.



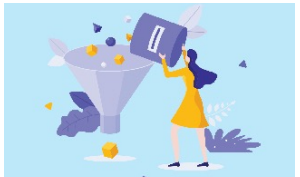
User Management

Admin areas to set up user sub-agents and logins as well as authorize and select products available to user.



Work Flow Focus

Pin and flag customers. Utilize the Jump feature as well as add contact reminders to customers.



Data Filtering

Query customer data to narrow any list of customers or enrollments. Filtering is also available for reports.



Reports

Admins have Access to Lead, Volume and Persistency Reporting for all agency sub-producers.



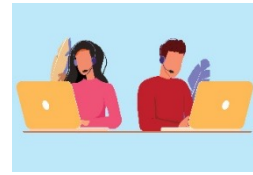
Data Export

Export Commission Data to your Agency Commission Pay System. You can also export customer lists.



Mail & Email Templates

Conduct Mail or Email Campaigns (like re-enrollments for ACA) or send personal letters direct from InsureSync.



Auto-Dial Functionality

Tie in your digital phone dialing function to call directly from the imported lead in InsureSync saving the agent time.



Customization

Add agency company logos and customization to have a more personalized agency experience.



NO FEE – Your fees are WAIVED!

Although Infinite Spark, LLC charges a very affordable monthly Agency and User fees – Healthy America Agents fees are WAIVED!



ACA Enrollment

Seamless ACA Enrollment process. Complete a certified ACA enrollment from eligibility to finished application on the platform.

Introduction to insuresync

- **Create Your InsureSync Account**
- **Get Started - Create a Customer Account**
- **FFM Eligibility Application**
- **Adding UBA, HAA or Benefit Boost Ancillary Plans**
- **InsureSync Tools**
- **Need Help?**



Creating Your InsureSync Account



Create Your InsureSync Account

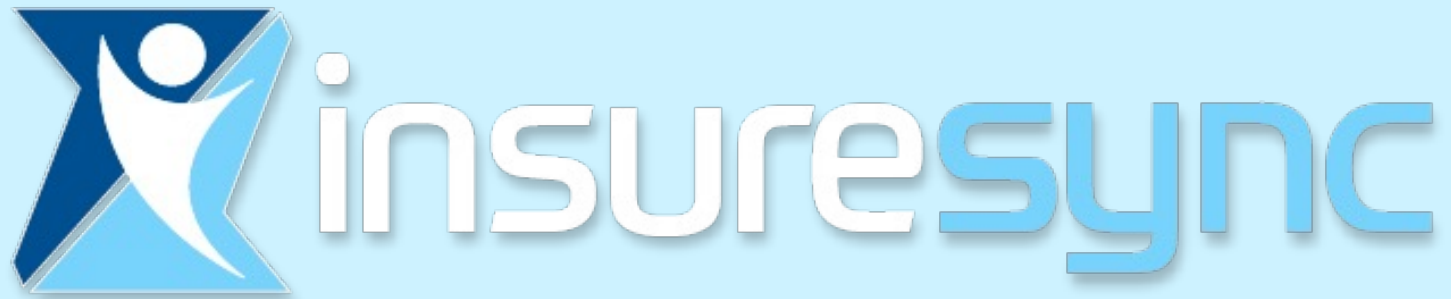
Contact: Rachelle Graham
Business Development

rachelle.graham@healthyamerica.biz
1-800-964-8331 Ext 202



1. Your account will be created on your behalf
2. You will receive an email to set up your password
3. Log in and GET STARTED!

IT REALLY IS THAT SIMPLE!

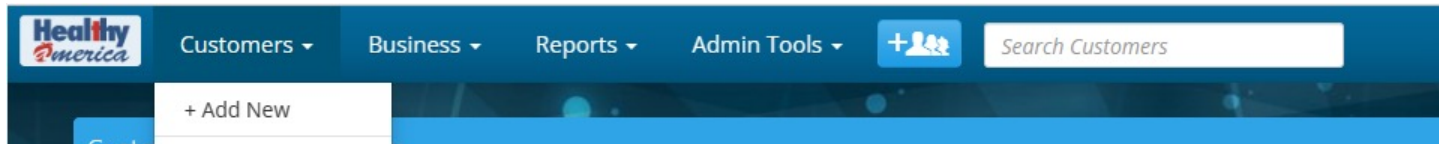


Creating a Customer Account



Get Started - Create a Customer Account

- Log in to your InsureSync account: <https://hapi.insuresync.net/>
- Customers (Drop down tab) Select “+ Add New”



- Or

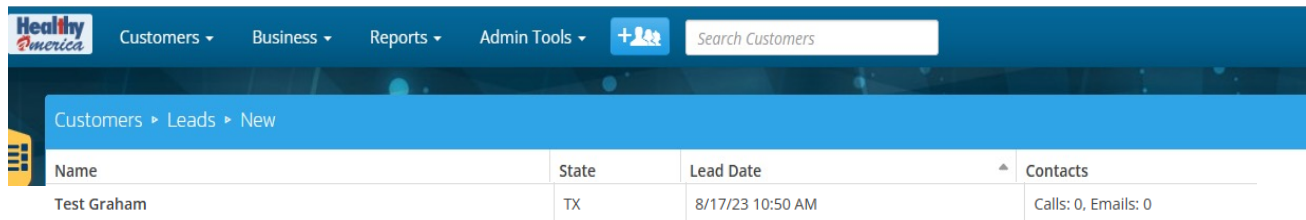


- Complete fields & save
- If your Customer is interested in a Marketplace plan, go to:
www.healthcare.gov/see-plans/#/
Review plan options and select plan based on your customer's needs.
(Hint: Copy the plan name before continuing)

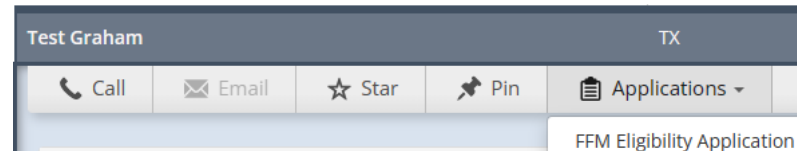


Adding Plans

- Return to InsureSync
- Go to your customer account

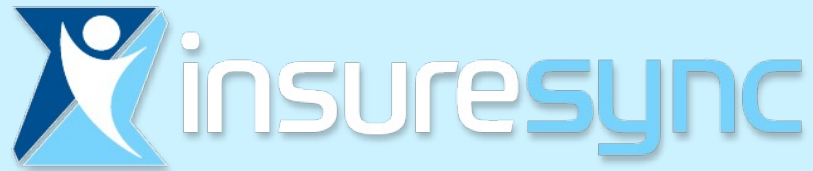


- The 'Applications', then 'FFM Eligibility Application' will take you directly to the Healthcare.gov enrollment portal






- On the Healthcare.gov website you will search for application, using the data previously obtained while creating your customer account on InsureSync database
 - If no match is found, go to: create a new application
- Upon completion of the application, simply return to InsureSync by selecting "Return to Enrollment Partner's Website"

RETURN TO
ENROLLMENT
PARTNER'S WEBSITE



Adding Plans


- You are now back to your customer account on InsureSync
- Select  -  tab at the top of the page
- Select  on the new window
 - Select to add the plan selected from the healthcare.gov website



Don't forget the UBA or HAA GAP plans!

The ACA applications submission is now complete!

BUT WAIT! There is MORE!

Click  to bring up the plan window
and select the UBA or HAA drop down tab



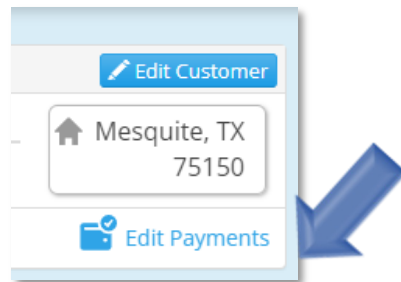
Adding the desired Gap plans **are just a click away!**

All your client's plan information is in one convenient location!



Set Up Financial Information

This tool allows you to enter or edit the client's payment information



Payments ▶ Brandon Fry --- ONLY Make Changes Approved By Brandon

Saved Payments

	Name	
	Acct # ****	
Pmt ID 1080		added 2/4/22

+ New Payment Method

Payments ▶ Brandon Fry --- ONLY Make Changes Approved By Brandon

Saved Payments

	Name	
	Acct # *****	
Pmt ID 1080		added 2/4/22

New Payment

Payment Type

☒ Bank EFT/ACH ☐ Credit Card

Bank Account Information

Account Type ☒ Checking ☐ Savings

Routing Number [?] Bank Name

e.g., Bank of America

Account Number Account Holder Name

Enter or select

Secure Payment Note [?]

Optional. 100 characters max

Billing Address

Select Existing or Add New

☒ Residence Address
☐ Add New

Cancel/Close

✓ Save



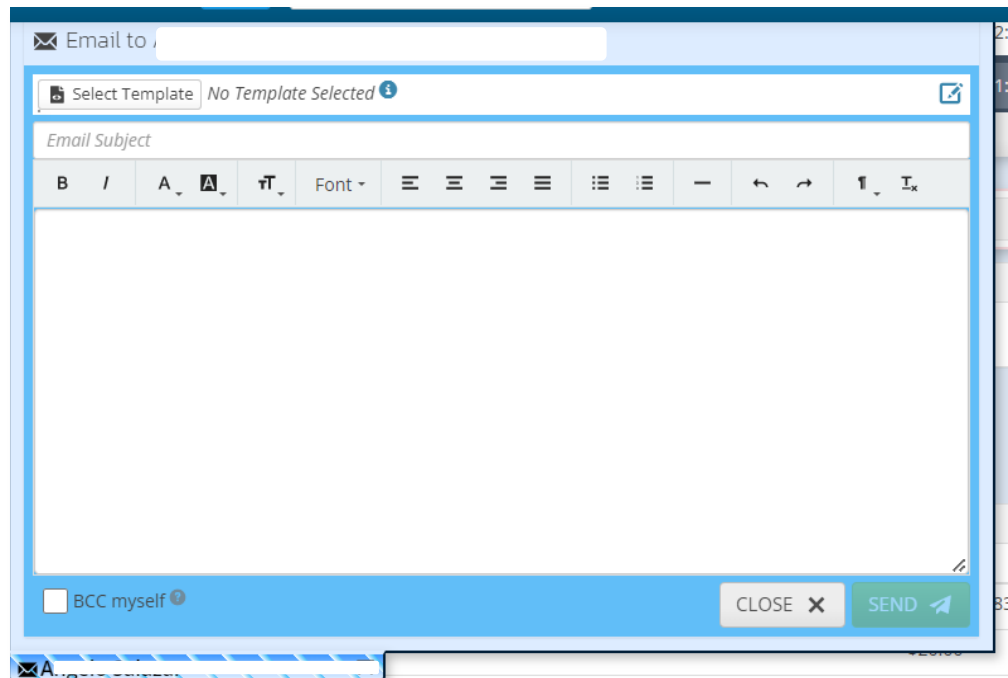
Tools for your Success

Tools - Email Option

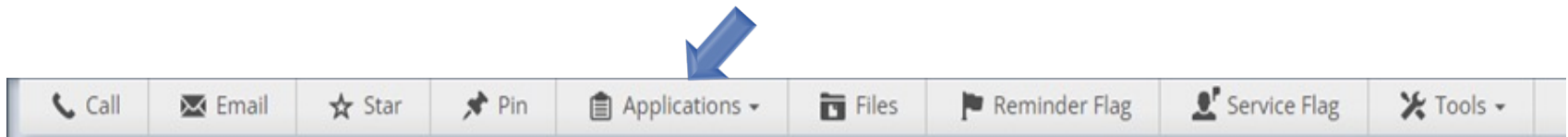


Email Option

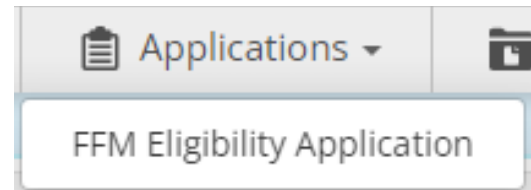
One click to send email
to your client

A screenshot of the "Email Option" dialog box. It has a light blue header with "Email to:" followed by a text input field. Below the header is a "Select Template" button and the text "No Template Selected" with an information icon. The main body of the dialog is a large text area for the "Email Subject". Above the text area is a rich text editor toolbar with icons for bold (B), italic (I), text color (A with a color box), background color (A with a color box), font size (T with a size box), font family (Font), bulleted list, numbered list, decrease indent, increase indent, link, unlink, and insert link. At the bottom of the dialog, there is a checkbox labeled "BCC myself" and two buttons: "CLOSE" and "SEND".

Tools - Applications



- Applications
 - FFM Eligibility Application



Direct link to Healthcare.gov enrollment portal



Tools - Files



Files

A great tool to keep all your client's important documents in one secure place!
Simply save and upload to the client's file!

Health Insurance Marketplace April 24, 2023

Application ID # **4870703166**
Application date: April 24, 2023

Primary contact: [REDACTED]
[REDACTED]
Conroe, TX 77384-6023

2023 Marketplace Eligibility Notice
Remember to update your application during the year with any changes.

Results

Premium tax credit available for this household: \$349/month	Estimated 2023 income used to determine eligibility for financial help: \$26,000.04/year	Brandon McCoy
Applied for coverage.		●
Eligible to enroll in a 2023 Marketplace plan. Enroll by June 29, 2023 .		●
Eligible to buy a Catastrophic plan, if available.		●
Eligible to use the premium tax credit to pay for a Marketplace plan. Can use up to \$349/month for this household.		●
Eligible for cost-sharing reductions: Will pay less for copayments, coinsurance, and deductibles when you're enrolled in a Silver plan.		●
Likely not eligible for Medicaid or CHIP because you don't meet the criteria in your state.		●

ACTION: Next steps

Choose your plan. Your Marketplace coverage start date is for a household with a loss of health coverage. See Eligibility Guide, page 4 .	●
Choose a Silver plan to get cost-sharing reductions. Choosing Silver instead of Bronze may save you thousands of dollars if you use a lot of services.	●
Learn more about how you could qualify for Medicaid. See Eligibility Guide, page 7 .	●

Summary of Benefits and Coverage: What this Plan Covers and What You Pay for Covered Services
BlueCross BlueShield of Texas : Blue Advantage Silver HMO™ 705

Coverage Period: 01/01/2023 – 12/31/2023
Coverage for: Individual/Family | Plan Type: HMO

The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, visit www.bcbstx.com/bb/ind/bb-sh6a72bavibp-b-2023.pdf or by calling 1-888-697-0683. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms, see the Glossary. You can view the Glossary at www.healthcare.gov/sbc-glossary/ or call 1-855-756-4448 to request a copy.		
Important Questions	Answers	Why This Matters:
What is the overall deductible?	\$0	See the Common Medical Events chart below for your costs for services this plan covers.
Are there services covered before you meet your deductible?	Yes.	This plan covers some items and services even if you haven't yet met the deductible amount. But a copayment or coinsurance may apply. For example, this plan covers certain preventive services without cost-sharing and before you meet your deductible. See a list of covered preventive services at www.healthcare.gov/coverage/preventive-care-benefits/ .
Are there other deductibles for specific services?	No.	You don't have to meet deductibles for specific services.
What is the out-of-pocket limit for this plan?	\$1,700 Individual/\$3,400 Family	The out-of-pocket limit is the most you could pay in a year for covered services. If you have other family members in this plan, they have to meet their own out-of-pocket limits until the overall family out-of-pocket limit has been met.
What is not included in the out-of-pocket limit?	Premiums, balance-billing charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Will you pay less if you use a network provider?	Yes. See www.bcbstx.com/go/bahmo or call 1-888-697-0683 for a list of Participating providers.	This plan uses a provider network. You will pay less if you use a provider in the plan's network. You will pay the most if you use an out-of-network provider, and you might receive a bill from a provider for the difference between the provider's charge and what your plan pays (balance billing). Be aware, your network provider might use an out-of-network provider for some services (such as lab work). Check with your provider before you get services.
Do you need a referral to see a specialist?	Yes.	This plan will pay some or all of the costs to see a specialist for covered services but only if you have a referral before you see the specialist.

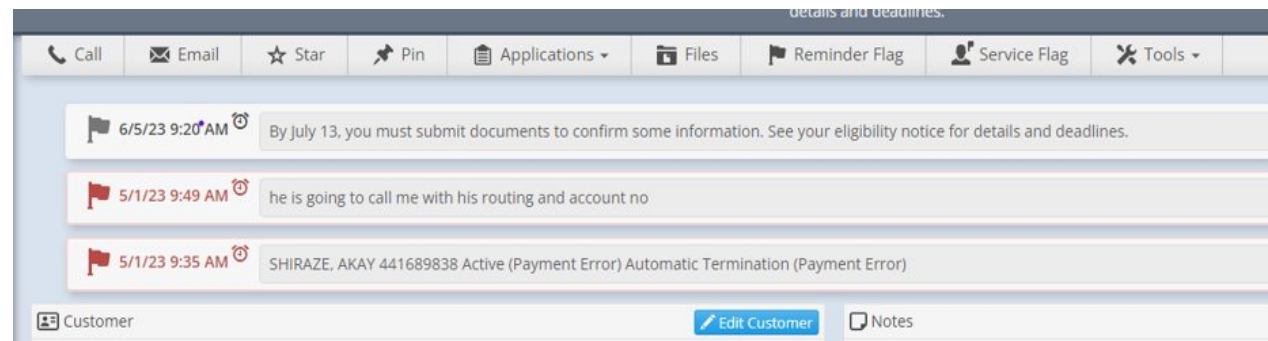


Tools – Reminder Flag

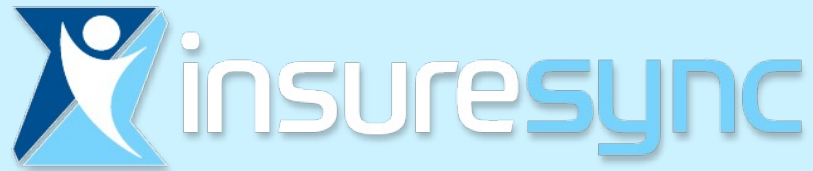


Reminder Flag

Setting follow up reminders is a great way to stay organized and not let those vital requirements slip through the cracks!

A dialog box titled "Create Reminder Flag" with a close button (X). It contains fields for "Due Date" (05/02/2023) and "Due Time" (07:56 AM). Below these is a "Notes" text area. At the bottom, there is a checkbox labeled "Alert when due" which is checked, and a "Save" button.

Note: Completed flags will automatically roll to history



Tools – Plans and Products



Plans & Products




This feature will show you all of your client's selected multiple plans and products (Maj Med, Gap, Dental, Vision ,etc.)


Plans & Products			
ID	Type	Carrier/Co	Name
107656	MM (FFM)	CHC	Community Premier Gold 021 No Deductible for PCP Specialists Generics Free 247 Telehealth
107655	GAP (UBA)	UBA	Gap Term
107654	GAP (UBA)	UBA	Gap 10000
107653	BOOST (UBA)	UBA	Walmart Health Virtual Visits
107652	MEMBERSHIP (UBA)	UBA	UBA Membership

Tools - Changing Application Status

- Go to: Plans & Products tool
- Click on Change Status
- Select appropriate status
- Don't forget to set a Reminder Flag!

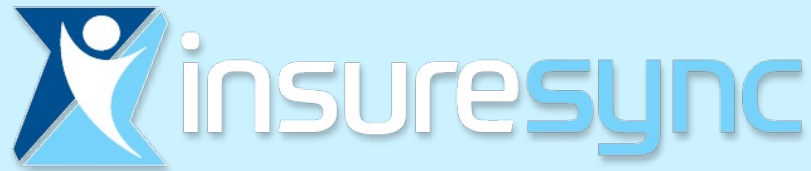
 Plans & Products

Change Status ▾

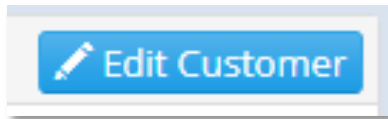
 Reminder Flag

Change Status ▾

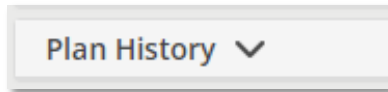
Submitted
Awaiting Carrier
Pending
Awaiting Active
Active
NSF
Cancelled
Cancelled-Closed
Declined
Expired
Incomplete



Even More Helpful Tools



To make changes or edit customer information such as: name, address, DOB, email, dependent information etc.



With this important tool, can see changes to the status of the account



Need Help?

Rachelle Graham
Business Development

rachelle.graham@healthyamerica.biz
1-800-964-8331 Ext 202

