

NEXT STEP



IN PROGRESS.....

You have your Agent Code and Unique Enrollment Link...

Now What?

It is time to enter your **First App**. Get step-by-step instructions here!

STEP 1

Replace YOURCODE with your assigned agent code in the link below to access your unique link that is assigned to you.

Go to your unique link at: <https://enroll.benboost.com/YOURCODE>

At the bottom of the page, you will also find an Agent Login link.

- Register and Create your Agent Login
- Once registered or if you use your unique link, you should see your name now in the Help & Support Agent Section of the application.

STEP 2

Select the Blue Continue Button on the first page of the app.

Fill Out Who's Enrolling Section

- Residence State
- Family Members
- All Applicable Ages

STEP 3

Choose your Products

Scroll through All Plan Options

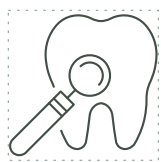
OR

Select **Filter Products** to narrow down your search based on plan types.



Filter Products

Filter Down the Categories Even Further to Narrow Plan Choices:



DENTAL

Plans that include Dental Discounts:

- SML Dental Discounts
- Benefit Boost 1.0
- Benefit Boost 2.0
- Benefit Boost 3.0
- Benefit Boost 4.0



DOCTOR VISITS

Plans that include Doctor Visits:

- Virtual Doctor Visits Only:
- Lyric Health Virtual Visits
 - Lyric Health VPC
 - Benefit Boost 1.0
 - Benefit Boost 2.0

In-Office, Urgent Care, & Virtual Visits:

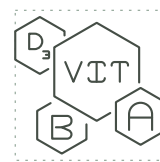
- HC2U DPC Prime
- HC2U DPC Plus
- HC2U DPC Value
- Benefit Boost 3.0
- Benefit Boost 4.0



PRESCRIPTION DRUGS

Plans that include Prescription Discounts:

- Paramount RX
- Lyric Health VPC
- Benefit Boost 1.0
- Benefit Boost 2.0
- Benefit Boost 3.0
- Benefit Boost 4.0



VITAMINS

Plans that include Multi-Vitamins:

- BB Vitamins
- Benefit Boost 1.0
- Benefit Boost 2.0
- Benefit Boost 3.0
- Benefit Boost 4.0

Important Note:

There are four bundled Benefit Boost packages:

- Benefit Boost 1.0 (with Lyric Health Virtual Visits)
- Benefit Boost 2.0 (with Lyric Health VPC)
- Benefit Boost 3.0 (with HC2U DPC Value)
- Benefit Boost 4.0 (with HC2U DPC Plus)

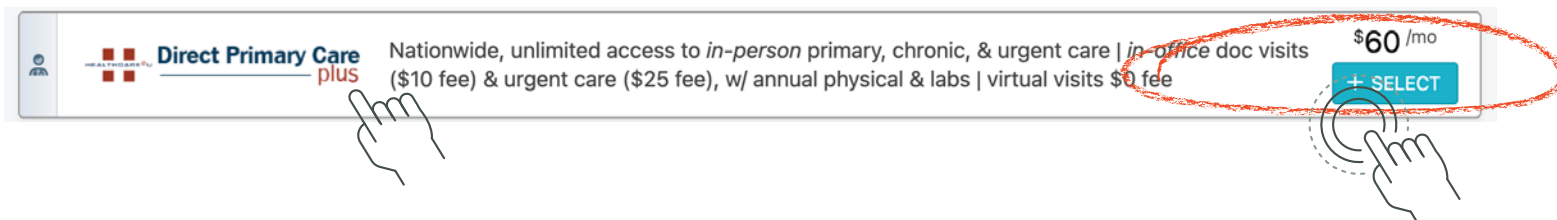
All Benefit Boost bundled packages also include SML Dental Discounts, Prescription Discounts, Vitamins, LifeLock discounts and Family Source.

Once the new Agent Portal is set up, you will be able to flag your favorite plans and pin them at the top. You will also be able to hide plans to limit the amount of plans show on your enrollment link.

STEP 4

Select Plan Card to View Details

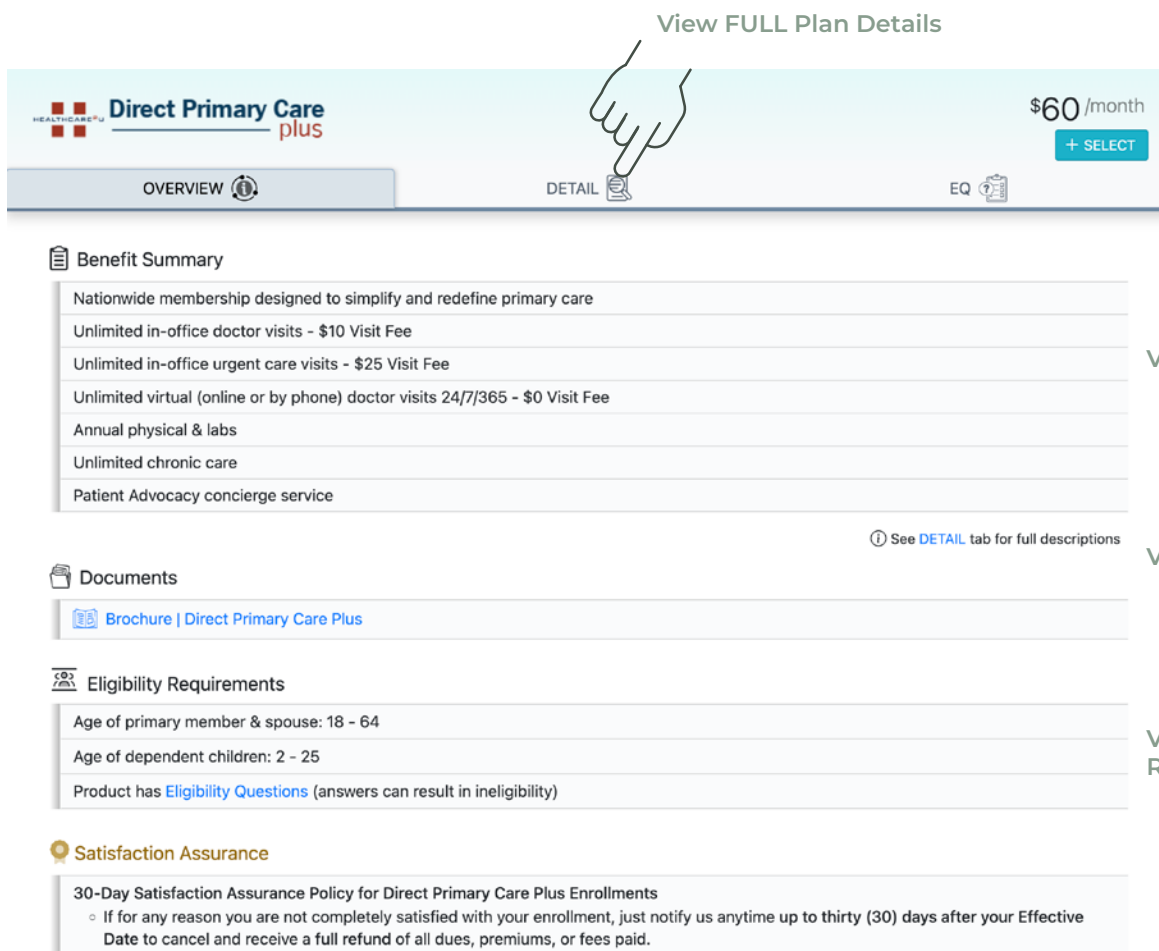
Click anywhere on the card and it will open up and show you the details and brochure / flyer.



Direct Primary Care plus Nationwide, unlimited access to *in-person* primary, chronic, & urgent care | *in-office* doc visits (\$10 fee) & urgent care (\$25 fee), w/ annual physical & labs | virtual visits \$0 fee **\$60 /mo** [+ SELECT](#)

To Choose a Plan
Click Select Button

View FULL Plan Details



Direct Primary Care plus \$60 /month [+ SELECT](#)

OVERVIEW [DETAIL](#) [EQ](#)

Benefit Summary

Nationwide membership designed to simplify and redefine primary care
Unlimited in-office doctor visits - \$10 Visit Fee
Unlimited in-office urgent care visits - \$25 Visit Fee
Unlimited virtual (online or by phone) doctor visits 24/7/365 - \$0 Visit Fee
Annual physical & labs
Unlimited chronic care
Patient Advocacy concierge service

[See DETAIL tab for full descriptions](#)

Documents

[Brochure | Direct Primary Care Plus](#)

Eligibility Requirements

Age of primary member & spouse: 18 - 64
Age of dependent children: 2 - 25
Product has Eligibility Questions (answers can result in ineligibility)

Satisfaction Assurance

30-Day Satisfaction Assurance Policy for Direct Primary Care Plus Enrollments

- If for any reason you are not completely satisfied with your enrollment, just notify us anytime up to thirty (30) days after your Effective Date to cancel and receive a full refund of all dues, premiums, or fees paid.

View Brief Plan Details

View Brochure

View Eligibility Requirements

Note: EQ Tab shows any applicable and required Eligibility Questions.

STEP 5

Select Plans to Enroll & Complete App

**Direct Primary Care**
plus

Nationwide, unlimited access to *in-person* primary, chronic, & urgent care | *in-office* doc visits (\$10 fee) & urgent care (\$25 fee), w/ annual physical & labs | virtual visits \$0 fee

✓ **SELECTED**

\$60 /mo
 REMOVE

\$60.00/month

ENROLL

HOUSEHOLD DETAILS

Family Members

Primary

First Name	MI	Last Name	Sex	Date of Birth
First		Last		mm/dd/yyyy

Contact Information

Phone Number	Alt. Phone	Email Address
(555) 555-1212	Optional	Email

Residence Address

Physical address (not P.O. Box). Please specify a separate mailing address if you use a P.O. Box.

Street	City	State	Zip Code
		TX	

☒ This is also my Mailing Address

Enter Household Details and hit Continue.

Important Note:

The Continue Button will be unselectable until every required field is completed in this section.

>  1 Person in TX

\$60.00/month

ENROLL

ADDITIONAL INFORMATION

EFFECTIVE DATE

Your benefits will be active and available for use beginning on your Effective Date.

Requested Effective Date

DIRECT PRIMARY CARE QUESTIONS

This section pertains to your enrollment in Direct Primary Care Plus.

1. Is any person to be enrolled currently covered by Medicaid, Medicare, or Tricare?

☐ Yes ☐ No

Choose an Effective Date:
1st or 15th of the month

Answer Any Required Eligibility Questions

Important Note:

*Some plans only allow for 1st Effective dates. If that is the case, it will **ONLY** show you the available effective dates based on the selected plans.*

Also, we have an effective date schedule that shows the effective date options available when you submit the business. Click the button below to view the schedule and make sure you don't miss a desired effective date.

Required Eligibility Question:

Depending on the plan choice, an Eligibility question could show here. If you are enrolling a member in Healthcare2U Direct Primary Care Plan or BB 3.0 or BB 4.0, **this question must be answered No in order to enroll.**

**CLICK HERE TO
VIEW EFFECTIVE
DATE SCHEDULE**

STEP 6

Enter Member Payment Information

Person in TX \$60.00/month

PAYMENT INFORMATION

PAYER RELATION

Who is paying for this enrollment?

☒ Myself ☐ Someone Else

PAYMENT METHOD

☒ ACH ☐ Credit

Bank Account Information

Account Type

☒ Checking ☐ Savings

Account Holder Name Account Number

Routing Number

BILLING ADDRESS

Select from Addresses

Street City State Zip Code

Fort Worth TX

E-SIGN LINK DELIVERY

Next, we'll send a link for you to review & e-sign your finalized application.

How would you like to receive your e-sign link?

☐ Email ☐ Text/SMS

Enrolling In **Direct Primary Care plus** \$60.00

Nationwide, unlimited access to in-person primary, chronic, & urgent care | in-office doc visits (\$10 fee) & urgent care (\$25 fee), w/ annual physical & labs | virtual visits \$0 fee

Total Monthly \$60.00

Your Agent

No Agent Specify Agent

Previous CONTINUE

Review Plans Here and Plan Cost Totals.

This will be the monthly cost to the potential member.

Make Sure You See Your Name and Info Here.

Important Note:

*If you don't see your name here, the app will not be entered under you. If you don't see your name here, click **SPECIFY AGENT** and enter your information.*

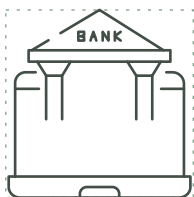
*If you are logged in or using your unique link, it should have your information here. Just **double check** here before you hit continue.*

Choose an E-Sign Delivery Method

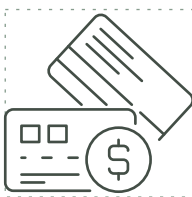
Email or Text/SMS

This is where your client will receive the link to verify, accept and e-sign the app.

Choose Member's PAYMENT OPTION



BANK DRAFT (EFT)



CREDIT CARD

Initial Draft will occur on Friday

New Business Week is:

Thursday - Wednesday at midnight

Important Note:

For all business entered and e-signed by member between Thursday-Wednesday at midnight, the member will be drafted that Friday for the initial draft.

Recurring Drafts:

1st Effective Dates: Members will be drafted on **5th of the Month***

15th Effective Dates: Members will be drafted on the **15th of the Month***

NOW YOUR PART IS DONE!

**or the first available next business date if the 5th or 15th occur on a holiday or weekend.*

Agent Use Only - Not for Consumer Use

STEP 8

Member Gets Email or Text for E-Sign Link

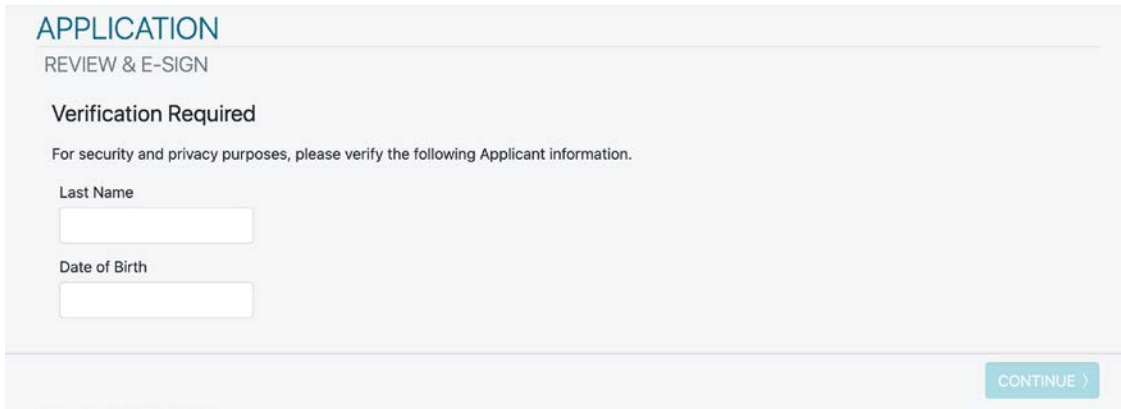
Instruct your Member to go to their email or text messages (depending on how you sent the link when completing the last step, Step 7).

Your enrollment application is not complete, and will not be processed, until you e-sign the application.

[Click here to E-Sign your Enrollment Application](#)

Once the member click's on the link in their email or text message, they will:

- Enter their last name (It will have to be **exactly** as you spelled it when entering the app)
- Enter their date of birth



APPLICATION

REVIEW & E-SIGN

Verification Required

For security and privacy purposes, please verify the following Applicant information.

Last Name

Date of Birth

CONTINUE >

- The member will then review the application for accuracy.
- They can edit any errors.
- The member agrees to any disclaimers.
- The member then e-signs the enrollment app.

Once the member completes the step, the application will be complete and then will go into our New Business processing week and will be drafted for the initial payment. Statements will be posted on Tuesdays / Wednesdays of the following week that show what applications and/or compensation is being processed for the week. The monthly statements will show all renewals and the active members who have paid their monthly membership dues for the month as well as any cancellations or chargebacks.

VIEW **STATEMENTS** FOR BOTH WEEKLY NEW BUSINESS & MONTHLY RENEWALS HERE:

<https://eagentcenter.com>

Company ID: healthyamerica

User ID: Your Agent Code

Password: last 6 digits or social or tax id (for initial log in only) then your created password

YOUR FIRST APP IS COMPLETE!