



Enrollment Express Agent Agreement

2021 Plan Year

Multi-Carrier Version

Enrollment Express/Senior Marketing Specialists Product Assumptions

Enrollment Express provides users with estimates and general information based upon assumptions, rules and estimates derived from a variety of sources. It is important that our users (both agent/broker users and client users) understand such assumptions and how they may relate to your business. Please discuss any questions or concerns you may have with these assumptions, rules, or decisions with the Accounts Team at Senior Marketing Specialists. This list is intended to highlight the significant assumptions but is not meant to be an exhaustive list. The Customer is responsible for ensuring all assumptions, rules and estimates meet your business, compliance, and overall requirements/needs.

Compliance

Senior Marketing Specialists makes every effort to provide products that meet various rules and regulations. However, it is the sole responsibility of the program user to determine compliance with all applicable rules, regulations and guidelines that may apply.

Browser Support

Enrollment Express is proud to maintain full support to the vast majority of users. Based on the data available during the development time period, we offer full functional and aesthetic support for the following browsers:

- Internet Explorer^A 11 / Microsoft Edge
- Chrome*
- Firefox*

Additionally, we ensure that all major functionality works with Safari* on MAC, though we do not guarantee optimal aesthetics.

Other browsers such as Opera, older versions of Firefox, Chrome, & Safari, as well as versions of IE other than what is listed above are not supported. In addition to not being supported, we strongly caution against the use of IE9 & IE10 due lack of Microsoft security updates and technical support (for more information see <https://www.microsoft.com/en-us/windowsforbusiness/end-of-ie-support>).

^A User must have compatibility mode turned off.

* No version number indicated as the most recent version of the software employs an auto-update feature; thus, the assumption is majority of users will always be on the current/most recent browser version.

CMS Compliance

- Agent is responsible for full compliance with all CMS rules and regulations.
- Senior Marketing Specialists assumes no responsibility for any failure of agent to comply with CMS rules and regulations, or for any inaccuracy in the ratings of Carrier plan(s).

Plan Data Collection

- Senior Marketing Specialists assumes that the plan data we receive is complete and accurate.
- Data collection process assumes that we receive updated files only as necessary, (i.e. we use the most recently validated data until new data arrives).
- Senior Marketing Specialists assumes that the star ratings data we receive is complete and accurate.
- If applicable, Senior Marketing Specialists assumes that the provider data we receive from the third party is complete and accurate.

Drug and Pharmacy Pricing

- Estimated plan cost calculation assumes that a plan does NOT have partial tiers (i.e. when a subset of drugs in a tier have different copay rules than the standard rules for that tier).
- When price files are not received from plan sponsor or a specific drug is not included on a plan sponsor's price file, the system uses a price derivative from Wholesale Acquisition Cost ("WAC"), as provided by the leading drug data content providers. Current rules for Brand/Generic are as follows:

AWP -2%/-2%

WAC +20%/+20%

The choice between AWP vs WAC for the base unit cost is based on the following:

- Site uses WAC unless one of the following is true:
 - o There is no WAC Price (i.e. Medispan WAC Unit Price is null)
 - o The Adjusted WAC Price is > 130% or < 70% of the Adjusted AWP price
- For API implementations only, when pharmacy selection is **enabled** and the user selects more than one pharmacy, the cost calculation utilizes and displays the pricing for the lowest cost selected pharmacy based on the drugs selected by the user.
- When pharmacy selection is **disabled** or the user does not select a specific pharmacy, the cost calculation utilizes, and displays, drug pricing for that plan at the, *preferred or in network when available*, pharmacy closest to the center of the zip code entered by the user. Since a plan's pharmacy network can change with each price (PC file) submission and pharmacies can go inactive



at any time, the random pharmacy used could change on a bi-weekly basis along with the pricing update. *(Possible Implications: If a plan does not change drug pricing and a user does not select a pharmacy, it is possible that a user could see different pricing on the web site with the same drug list because a different pharmacy was selected to calculate pricing.)*

- Only drugs on the CMS Formulary Reference File ("FRF) and excluded drugs can be added to the medicine cabinet.
- Base drug pricing is determined by evaluating a unit cost * metric quantity + pharmacy dispensing fee.

Plan Listings

- The default view for listing of plans is based on lowest Total Estimated Annual Cost or Out Of Pocket Cost (OOPC). OOPC = Estimated annual drug and medical cost share (including amounts applied against deductible when applicable) + premium.

Eligibility

- When someone selects "Under 65" Enrollment Express assumes the user is eligible for Medicare regardless of their age.

Medical Costs

- The True Out Of Pocket Estimate (TROOPe) medical cost calculation is based on a compilation of the key benefit components of each benefit plan as presented in the Health Plan Management System (HPMS) benefit data.
- The actuarial data supporting the model comes from a third-party analysis of a Medicare sample set greater than 36 million member months of data, trended to current plan year using trend data.
- Chronic conditions are collapsed down to three to match the three self-reported Health Status user input options. Good = no chronic conditions; Fair = one chronic condition; Poor = two or more chronic conditions.
- The required user inputs for estimating medical costs are Age Range and Health Status. Sites are typically set up with defaults of age range of 65-69 and Good health.
- Supplemental benefits (not ancillary riders) such as additional vision, dental, foreign travel or other services are not factored into the out-of-pocket calculation.

Broker Permissioning and Usage

- Brokers must sign and agree to the Enrollment Express Agent Agreement prior to being authorized to use the program.
- Broker authorization to use Enrollment Express and add carriers or products (based on contracting, certifications and ready-to-sell status) are updated on a weekly basis.
- If Broker does not submit at least one application on Enrollment Express every 6 months, then their account will be moved from 'Enroller' status to 'Quoter' status.

Carrier Data and Acknowledgement of Terms

Please provide the following information for each carrier you wish to use Enrollment Express for:

AGENT NAME: _____

Carrier Name	Products (MA/PDP/MAPD/SNP)	**State(s) Requesting Access For

**** If no state is listed, then brokers resident state will be used. Do not list every state you hold a license in. Only list the states you know you will be using Enrollment Express to enroll clients in. Additional states can be added at a later time.**

I understand and agree to the following Enrollment Express information:

- Enrollment Express does not submit Scope of Appointments (SOA) to carriers. Many carriers do not require you submit the SOAs to them, but CMS requires them to be kept by agents for 10 years. However, Cigna MA requires the SOA to be submitted, so when using Enrollment Express, it is important to download the SOA and submit it directly to Cigna.
- If a carrier has a contest using their own e-app, you must use their e-app. Enrollment express will not track or count towards that contest or incentive.
- Aetna’s Value Based Enrollments, UnitedHealthcare’s Health Assessment, Wellcare’s Value Based Enrollment, Humana’s Member Care Assessment and Anthem’s Health Risk Assessment bonus’ WILL NOT BE available through Enrollment Express enrollments. To take advantage of those bonus programs you must use the carrier’s enrollment site.
- User information is loaded to Enrollment Express weekly, and once loaded it can take up to 24 hours for that user data to reflect on the website.
- Carriers available to enroll clients are Aetna, CIGNA (MA Only), Humana, Mutual of Omaha, SilverScript, and UnitedHealthcare.
- Agent must be contracted, certified, and Ready to Sell with Senior Marketing Specialists and have requested access for that carrier on the User Agreement for it to show on Enrollment Express.
- Prior to setup, any Broker must be contracted with Senior Marketing Specialists with at least one of the following carriers: Aetna, CIGNA (MA Only), Humana or UnitedHealthcare, otherwise they will only have access to quoting.
- When enrolling a client non face-to-face, use the “send quote feature” to email or text the plan information and enrollment tools. Do not attempt to use screen share technology and complete the application from your own computer/tablet.



- Do NOT use Enrollment Express to enroll Wellcare clients. If you use send a Wellcare application to a client through Enrollment Express for Wellcare and they enroll outside of the allowed time frame you will NOT be counted as the Agent of Record. Please only use Wellcare to quote apps to avoid this issue.
- Non-commissionable plans will not allow you to enroll clients on Enrollment Express, however they will show up under the Quoting Tool. The following are non-commissionable plans (visit <https://www.smsteam.net/enrollment-express-3/> for a full list of plans):
 - Select Anthem plans
 - Select Humana plans
 - Select UnitedHealthcare plans
 - Select Wellcare plans
 - Aetna: Plan # H3931-097
 - Cigna: All PDP plans
 - Clear Spring Health: All plans
 - Express Scripts PDP: All plans

Broker Statement of Understanding and Agreements

I understand that for each carrier I wish to use the Enrollment Express Application Platform for that I need to be portfolio certified for ALL products offered by that carrier in each state (for UnitedHealthcare this includes DSNP/SNP certification).

I understand that agent data is updated in Enrollment Express once a week, so depending on the date of submission of this form it could take up to a week to be given access to those carriers through the platform. I further understand that to add an additional carrier or state I must first verify my appointment, then submit my request to admin@smsteam.net.

I acknowledge that I will only have access to the carriers requested above and I certify that I am contracted, appointed and ready to sell with those carriers through Senior Marketing Specialists.

I acknowledge that I have read the above Enrollment Express Agent Agreement and agree to all terms and conditions set forth above.

Agent/User/Broker Printed Name: _____

Email Address: _____ Phone Number: _____

Agent/User/Broker Signature: _____ Date: _____

FOR USE DURING PLAN YEAR 2021 MEDICARE ADVANTAGE AND PRESCRIPTION DRUG PLANS THROUGH ENROLLMENT EXPRESS. A PROGRAM BROUGHT TO YOU BY SENIOR MARKETING SPECIALISTS AND DEVELOPED BY CONNECTURE. UPDATED OCTOBER 22, 2020.