

Telemark Technology Tip

Send a Plan Comparison Quote via **Start Consultation**

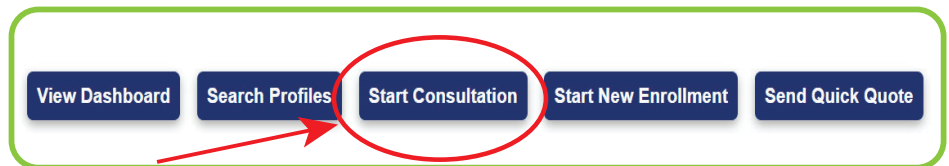


Send quotes easily with the Plan Comparison tool on Enrollment Central.

Use the Plan Comparison tool on the Enrollment Central platform to deliver multiple MA, MAPD, and PDP quotes to beneficiaries via email. Like the Quick Quote feature, system-generated links in your email allow beneficiaries to access multiple quotes on the consumer website and complete their own enrollments online.

Links sent to beneficiaries include your AgentID. These links allow you to receive credit for any enrollments that come from **Plan Comparison**.

1. Click **START CONSULTATION from the Broker website.**



Create a New Profile

* Denotes a required field...

Beneficiary Information

* First Name

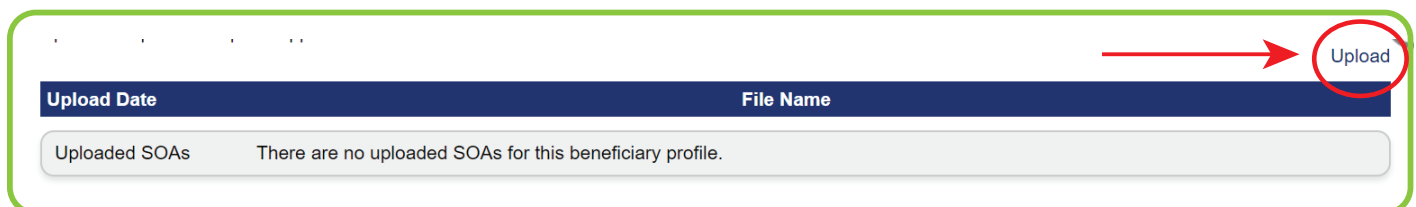
* Last Name

* Date of Birth
Required Format:mm/dd/yyyy

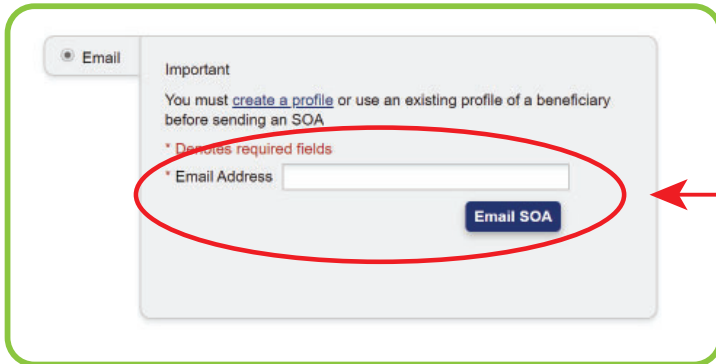
* ZIP code

2. Enter the beneficiary's profile information.
First Name, Last Name, Date of Birth and Zip Code are required.

3a. Upload the beneficiary's completed Scope of Appointment using the **UPLOAD button.** This step is optional. Enrollment Central does not send Scope of Appointments to the carrier with an enrollment.



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Email

Important

You must [create a profile](#) or use an existing profile of a beneficiary before sending an SOA

* Denotes required fields

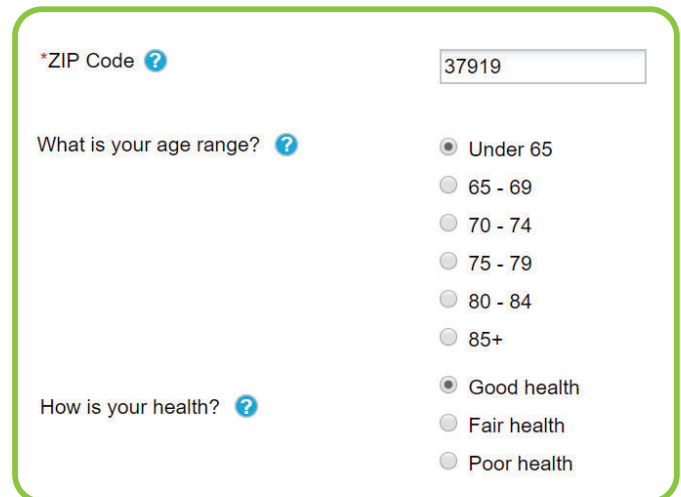
* Email Address


Email SOA


3b . If you do not have access to a Scope of Appointment, send the beneficiary a generic Scope of Appointment by entering the beneficiary's email address and click **EMAIL SOA**. Ask the consumer to complete and email the signed SOA to you prior to the appointment.

You **MUST** send the completed SOA to the carrier upon enrollment.

5. Enter the beneficiary's health information and ZIP Code. If you have questions about age range and health status, click the question marks for more information.



*ZIP Code 

What is your age range? 

Under 65


65 - 69

70 - 74

75 - 79

80 - 84

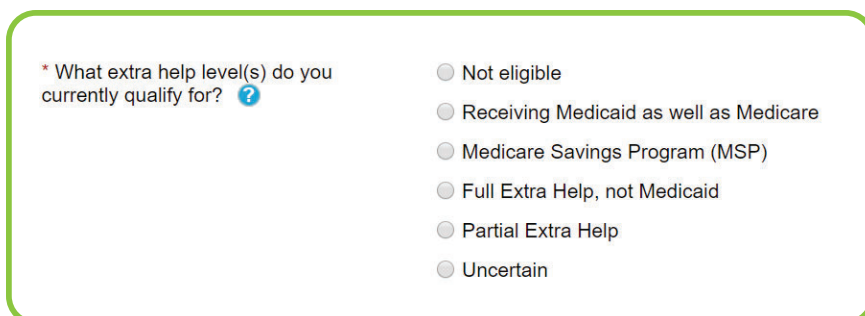
85+


How is your health? 

Good health

Fair health

Poor health



* What extra help level(s) do you currently qualify for? 

Not eligible

Receiving Medicaid as well as Medicare

Medicare Savings Program (MSP)

Full Extra Help, not Medicaid

Partial Extra Help

Uncertain

6. Identify the beneficiary's extra help level(s).

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Add Drugs

For an estimate of how much drugs will cost with each plan, please provide prescriptions.

- 1 Type the first few letters of a drug name, then
- 2 Select the drug from the list that appears.

Type Drug Name **Find Drug**

7. Add the beneficiary's prescription drugs by using the **FIND DRUG** function. The beneficiary's prescription drugs will be saved in their profile.

8. Find the beneficiary's pharmacy by entering the beneficiary's zip code and selecting their preferred pharmacy.

Please enter an address or 5 digit ZIP code.
37919 **Find Pharmacies**

Tag Pharmacy Select

- 1 Peninsula Outpatient Pharmacy - Knox
1451 Dowell Springs Blvd Knoxville, TN
Distance: **0.28 Mile(s)**

Medicare Advantage Prescription Drug Plans 21 plans

Prescription Drug Plans 18 plans

Medicare Advantage Plans 4 plans

Medicare Supplement See available plans

Compare up to 3 plans Total Estimated Costs ▼

| Plan | Premium (Monthly Price) | Total Est. Cost | Medicare Star Rating |
|---|-------------------------|-----------------|----------------------|
| Amerigroup Amerivantage Dual Coordination (HMO D-SNP) | \$0.00 | \$398 | ★★★★☆ |
| Cigna Cigna-HealthSpring Primary (HMO) | \$23.70 | \$488 | ★★★★★ |
| BlueCare Plus (HMO SNP) | \$0.00 | \$530 | ★★★★☆ |

9. Select three MAPD, MA or PDP plans to compare. You can compare Medigap plans, but cannot send a Medigap quote using the platform. Once you choose three plans to compare, click **COMPARE UP TO 3 PLANS**.

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Plan Comparison

Here are plan highlights for the plans you

This information is not a complete descrip
premium and/or co-payments/co-insuranc

Send Multi-Plan Quote

10. Review the selected plans and click **SEND MULTI-PLAN QUOTE.**

11. Enter the beneficiary's First Name, Last Name, Phone Number and Email Address. If you wish, tailor the message to the beneficiary. Be sure to follow CMS Guidelines. Once the information is complete, click **SEND QUICK QUOTE.**

Quick Quote

* First Name

* Last Name

* Phone -

How would you like to send this information?
 Email

* Email Address

Send Quick Quote CODE: XEm1NJ9

This Authorization Code will be sent to the beneficiary under a separate email.

This message below will appear on the beneficiary's quote. Please remember all compliance guidelines when updating this message.

Message
Thank you for taking the time to meet with me today. Here are plans that I think will meet your needs below.

Once the beneficiary receives the quote and enrolls themselves, you will receive credit for the sale and be paid accordingly.