

PRIVATE EXCHANGE TIP SHEET

Quoting ✓

SELECT INSURANCE TYPE

- HEALTH
- DENTAL
- VISION
- TEMPORARY INSURANCE
- MEDIGAP

Select insurance type(s) Some will be pre-selected, add or remove as desired.

Gender: DATE OF BIRTH:

Last Name: PHONE:

Complete all primary applicant information.

DATE OF BIRTH: Tobacco: ZIP:

PHONE: EMAIL:

SUBSIDY ELIGIBLE PLANS

Select insurance type. Subsidy will provide health and dental options. If subsidy and non-subsidy products are selected, you may quote together but must enroll separately.

HOUSEHOLD INCOME: HOUSEHOLD SIZE:

If subsidy is selected, you will be asked for your total household income and household size for the plan year.

DO YOU HAVE A QUALIFYING LIFE EVENT? QUALIFYING EVENT:

Outside of the annual open enrollment period, you must have a qualifying life event to purchase health insurance.

DATE OF QUALIFYING EVENT:

You must provide a date on which your qualifying life event occurred.

EFFECTIVE DATE:

Select effective date. This may be prepopulated based on deadlines.

Plan Selection ✓

1 Total Individuals

Add all dependents to be covered.

Review and select plans by individual product type.

Sort Plan By:

CLASS: PREMIUM \$1K - \$40K

Insurance Company:

Plan Type:

Metal level:

Use available sorting and filtering tools to narrow options.

Compare feature to select multiple plans for side-by-side comparison.

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HOUSEHOLD SIZE: 1 HOUSEHOLD INCOME: 30000

Your Total Savings: \$570

If you selected to see subsidy plans, your household income and size, along with your estimated subsidy will appear on the quote results page.

\$157.59 YOUR MONTHLY PREMIUM ORIGINAL MONTHLY PREMIUM \$414.59

DEDUCTIBLE: Individual: \$6,450 Family: \$12,900

OUT OF POCKET: Individual: \$6,450 Family: \$12,900

Subsidy plans will show original premium and cost to you after estimated subsidy.

1 Items in cart

Move to Dental plan >>

Plan selections for each product will move to the cart. Click cart to checkout.

Enrollment ✓

Review plan selections and enrollee information for accuracy. Agree to Terms & Conditions and select enroll.

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Applicant Information

Initial Payment: Ongoing Payment:

Start application process. Save as you go. If you exit the process before completing, you will receive an email with instruction to resume the application.

Applicant Information Coverage History Additional Information

Built in navigation will guide you through the application.

SUMMARY OF SELECTED PLANS

TOTAL: \$516.75

Initial Payment: Ongoing Payment:

Select initial and ongoing payment methods.

THANK YOU FOR YOUR ENROLLMENT

Receipt will appear at the end of the process.

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Print, download or email receipt to keep for your records.