

# HEALTHSHERPA ACCOUNT CREATION GUIDE

Visit: <a href="www.healthsherpa.com/agents/new\_user">www.healthsherpa.com/agents/new\_user</a>

Your email will also serve as your username







We'll need some basic information so we can get your account created.





Select the account type that applies to you.

You can always change this later in Settings.

### Please select the scenario that

### applies to you

○ Create a solo agent account

Create a new agency account
 Choose this if you're the agency owner or admin.

Join an existing agency A join code is required.

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Continue



### 

### 🛑 Agency

Enter the JOIN code you received in order to join an Agency with a HealthSherpa account.

If you don't have it handy, you can always do this later under your account settings.

• Any agency you join will be able to **view & export** your Clients and Leads.

• If the agency you join is downline from other agencies, those other agencies will be able to **view and export** your Clients and Leads.



### <u>E444</u> join code is specific to YourFMO







### Refer clients for \$200

Want to get paid faster? Refer enrollments from any carriers you choose-we pay \$50 per referral during SEP and up to **\$200 during OEP!** 

### How it works:

- · Select any carriers you'd like to refer
- · If you enroll with those carriers, we become AOR
- Payment delivered within 30–60 days subject to terms and conditions

### View referral program details





### To enable referrals, please review and accept these terms.

proceeding. Any arbitration will be settled under the Federal Arbitration Act and administered by the American Arbitration Association under its Consumer Arbitration Rules. Notwithstanding the foregoing, nothing in this Agreement will be deemed to waive, preclude, or otherwise limit the right of either Party to: (a) pursue an enforcement action through the applicable federal, state, or local governmental agency if that right of action is available; (b) seek injunctive relief in a court of law in aid of arbitration; or (c) file suit in a court of law to address an intellectual property infringement claim.

- f. <u>Entire Agreement</u>. This Agreement constitutes the entire understanding and agreement between the Parties with respect to the subject matter hereof and supersedes all previous arrangements, understandings, representations, or agreements between the Parties whether written or oral.
- g. Expenses. Each Party agrees it shall be responsible for its own expenses incurred in connection with this Agreement, including attorneys' fees.
- h. <u>Severability</u>. If any provision of this Agreement or any portion of any provision of this Agreement is determined to be null and void or unenforceable by any court or tribunal having jurisdiction, then such provision or portion of the provision shall be considered separate and apart from the remainder of this Agreement and this Agreement shall otherwise remain in full force and effect.
- i. <u>Force Majeure</u>. Neither Party will be liable to the other Party for any delays or failure to perform its obligations hereunder due to acts of God, action by any governmental or quasi-governmental agency, fire, flood, earthquake, strike, outside network difficulties (including, but not limited to, communication line failure) or other acts beyond the reasonable control of, and without any fault of such Party.
- j. <u>Counterparts</u>. This Agreement may be executed in two or more counterparts, each of which shall constitute an original and both of which together shall be deemed to be one and the same instrument.
- k. <u>Notices</u>. Except as otherwise provided herein, all notices, requests, approvals, consents, demands or other communications required or permitted to be given under this Agreement shall be in writing and sent by email, facsimile, or overnight courier to the last known address of the Parties. Notice shall be deemed provided as of the date such written notice is sent.

I have read and accept the Agreement.



×



FFM Username is same username as CMS.gov



This information is needed in order to verify compliance and to make sure the carrier sees you on enrollments from the exchange.

Your FFM Username is the same login name you use when logging into portal.cms.gov.

Not FFM certified? Try our refer-only account

FFM Username (Forgot username?)

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NPN (Forgot npn?)

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**O YOURFMO** Your one-stop-shop for growth

### We need to perform a NIPR check

CMS requires us to verify your licensure in the State in which your client is selecting a QHP. In order to do this, we seek Producer Database reports through NIPR.

### This will tell us:

- Which states you're licensed in.
- · Whether any regulatory actions against your license have been reported.

I authorize HealthSherpa to procure reports related to my NPN through NIPR now and in the future.

Submit authorization



Jc Moreno	Jc Moreno NPN: 17834502 Enable EDE Click here					Start applicat	ion Search Marketplace	Quote On-Ex 🔹 🧿 🀯
	•	👏 Welcome to HealthSherpa! The easier, faste	er alternative to Hea	lthcare.gov — designed	specifically for agents &	brokers.		×
1 Home	Introducing our new agent homepage! See notifications, metrics, and more						Q	Search clients
② Clients	All clients At risk AOR Documents due EDE	E access revoked						
⊘ <sup>*</sup> Leads	Take us for a spin!							1 Import
⊥ Exports	Click their name to see their Client Details page.	Plan	Premium	Effective	Created	Documents	Payment	Actions
II Insights	Jane (Example clienț)	HealthNet Silver HMO 2020	<b>\$</b> 138	07/01/2021	06/29/2021	Processing	<ol> <li>Action needed</li> </ol>	View
③ Bonuses		This is an example clier	nt — your clients will	appear here after you've su	ubmitted or imported an a	pplication		Y)
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	Read the Getting Started Guide			What's your We're an offic	relationship to Healthca ial Healthcare.gov partne	<b>re.gov?</b> er, with full integration. Updat	tes made here will sync to Heal	thcare.gov, and updates
€	Set up your client-facing enrollment site			made there w	ill appear here.		- 167 I	



### Integrate your FFM account

### FFM Account Integration () Unlinked

Your account will need to be linked in order to enable EDE. By clicking "Integrate my FFM account," a new window will open, directing you to CMS IDM to verify your login credentials. Once you are finished, you can return to this tab and complete the rest of the EDE enablement process.

	Back			Continue	
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Forgot Password Unlock Account









Congratulations! You successfully integrated your FFM account!	
Jc Moreno Dashboard	
Integr	ate your FFM account
You	In FFM account was successfully integrated with your HealthSherpa account! You may now
cor	itinue with EDE enablement
	Back



### Verify your identity

CMS requires every agent verify their identity in order to use the Enhanced Direct Enrollment (EDE) pathway. Learn more

First name	Middle	Last name	Suffix
JC		Moreno	Selec
Date of birth	Social security numbe	er	
03/27/1980	XXX-XX-XXXX		
Contact inform	nation		
Contact inform	nation	Apt. / Ste. (Optio	nal)
Contact inform	nation	Apt. / Ste. (Optio	nal)
Contact inform Street address City	nation State	Apt. / Ste. (Optio	zip code
Contact inform Street address City	State Select	Apt. / Ste. (Optio	Zip code
Contact inform Street address City Phone number	State Select	Apt. / Ste. (Optio	Zip code



# Based on the information you just provided, we've pulled together some questions that only you'll be able to answer. Learn more Back Continue





### HealthSherpa Account Creation, Complete