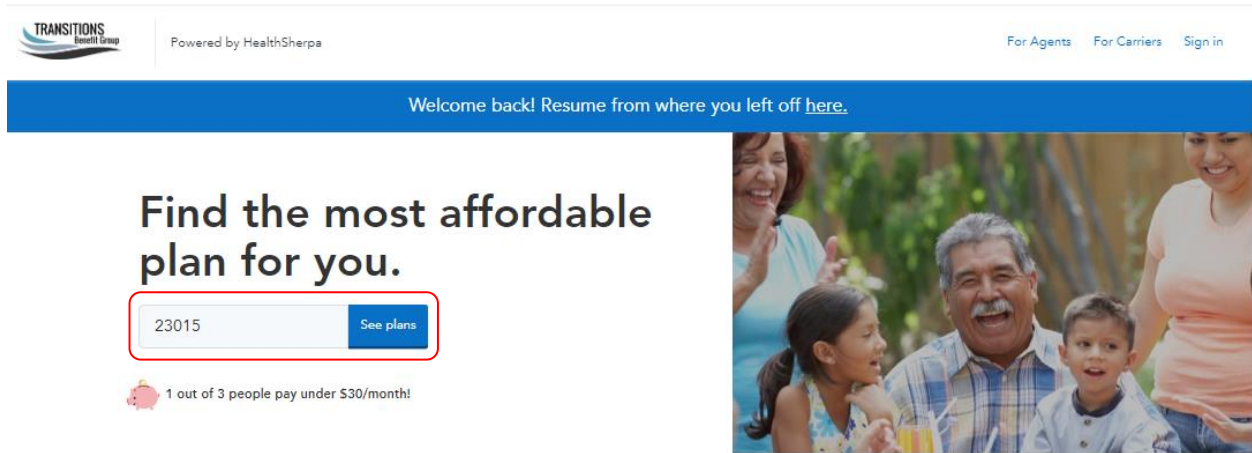


# Health Sherpa Instructions

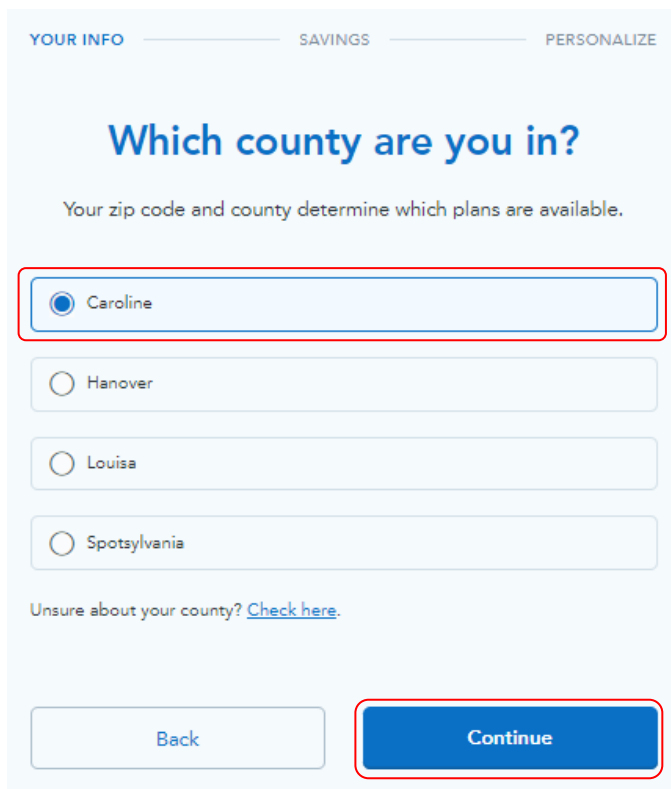
## [Health Sherpa](#)

Enter your **zip code**, then click **“See plans”**:



The screenshot shows the top navigation bar with the Transitions Health Group logo, "Powered by HealthSherpa", and links for "For Agents", "For Carriers", and "Sign in". A blue banner below the navigation bar says "Welcome back! Resume from where you left off [here](#)." The main content area features the headline "Find the most affordable plan for you." Below this is a search box containing the zip code "23015" and a blue "See plans" button. A small graphic below the search box indicates "1 out of 3 people pay under \$30/month!". To the right of the search box is a photograph of a smiling family consisting of a woman, a man, and two children.

Select the appropriate county, then click **“Continue”**:




The screenshot shows a form titled "Which county are you in?" with the subtext "Your zip code and county determine which plans are available." The form has three tabs: "YOUR INFO", "SAVINGS", and "PERSONALIZE". Below the title are four radio button options: "Caroline", "Hanover", "Louisa", and "Spotsylvania". The "Caroline" option is selected and highlighted with a red box. Below the options is a link: "Unsure about your county? [Check here](#)." At the bottom of the form are two buttons: "Back" and "Continue". The "Continue" button is highlighted with a red box.

Fill in the appropriate information for everyone to be included in the plan:

Age, Gender, and check any of the boxes that apply. Once completed click **“Continue.”**

YOUR INFO — SAVINGS — PERSONALIZE



## Who needs health coverage?

You can apply for yourself or anyone who lives with you.

You ×

Age ⓘ Sex ⓘ

61 Male **Female**

Select any that apply

Tobacco user ⓘ

Pregnant ⓘ

Eligible for coverage through a job, Medicaid, CHIP, or Medicare ⓘ


Add my spouse

Add a dependent

Back **Continue**

If there are others in your household but they are **NOT** going to be on the plan, then add them in the appropriate box. Indicate if they are under age 19 or not. Add your estimated household income **BEFORE** taxes, then click **“Continue.”**

YOUR INFO — SAVINGS — PERSONALIZE



## Your household information

How many people are in your tax household? ⓘ


2 - +

Are any household members who aren't applying for coverage under age 19?

Yes  No

Estimate your 2024 household income (before taxes) ⓘ


\$ 38700

 Include the estimated income of anyone you file taxes with or claim on your taxes. If you'd like to know what types of income to include or need help estimating, use our [income calculator](#).

Back Continue

The next screen is informative only and you can click “Continue.”

YOUR INFO — SAVINGS — PERSONALIZE




## You may qualify for 2 kinds of savings!

You may save this much on your premium:

# \$780/month

✔ This means you'll see plans as low as \$0 per month

This is an initial estimate. You'll see your exact savings when you apply.



### You may also qualify for a Cost Sharing Reduction!

This means Silver plans will be an especially good value.

- ✔ Cheaper doctor visits
- ✔ Cheaper hospital visits
- ✔ Cheaper prescriptions
- ✔ Lower deductibles
- ✔ Lower out-of-pocket max

Back **Continue**

Typically, on this next page you will select the:

“Lost or losing health coverage,” then click “Continue” (Based on date of: 25 June 2024)

## It's currently Special Enrollment

During Special Enrollment, you need a Qualifying Life Event to enroll

Select your Qualifying Life Event

Lost or losing health coverage i

**Important:** to be eligible to enroll right now, you must have either:

- Lost health coverage in the last 60 days (since **4/26/2024**) or be losing it in the next 60 days (before **8/24/2024**).
- Or, lost Medicaid or CHIP coverage between 03/31/2023 and 10/30/2024.

Change in household size i

Change in primary place of living i

Change in eligibility i

Enrollment / plan error i

Offered an individual coverage HRA or QSEHRA i

Other situations i

None of the above

Back

Continue

Select the amount of health care coverage. The default is “Medium” and I generally leave it there, click “Continue.”

YOUR INFO — SAVINGS — PERSONALIZE

## How much healthcare do you think your family will use in 2024?

A guess is fine—this will not affect your prices and will not limit how much you can use.

I expect to use a **Low** amount of healthcare services:

1 <a href="#">doctor visit</a>	1 <a href="#">lab or test</a>
1 <a href="#">specialist visit</a>	0 <a href="#">hospital visit</a>
8 <a href="#">prescription drugs</a>	0 <a href="#">emergency room visit</a>

I expect to use a **Medium** amount of healthcare services:

2 <a href="#">doctor visits</a>	2 <a href="#">labs or tests</a>
3 <a href="#">specialist visits</a>	1 <a href="#">hospital visit</a>
34 <a href="#">prescription drugs</a>	0 <a href="#">emergency room visit</a>

I expect to use a **High** amount of healthcare services:

3 <a href="#">doctor visits</a>	9 <a href="#">labs or tests</a>
9 <a href="#">specialist visits</a>	3 <a href="#">hospital visits</a>
62 <a href="#">prescription drugs</a>	1 <a href="#">emergency room visit</a>


**Why do we ask for this?**

This will help us select your **Recommended Plan**

[Back](#) [Continue](#)

On this page you would add any doctors, specialists, or hospitals that you want to try and have included in your plan. Click **“Add”** after provider that you would like to include, then click **“Continue.”** Or if you have none, click **“Skip this step →.”**

YOUR INFO SAVINGS PERSONALIZE



## Do you have any preferred doctors, pharmacies, or hospitals?

You'll be able to see which plans they accept. ⓘ

Clear

<b>Aracoma Smith, LCSW</b> Social Worker (Clinical) 3715 Latimers Knoll Ct Ste 103, Fredericksburg, VA	<b>Add</b>
<b>Oronde Smith, MD</b> Emergency Medicine 4600 Spotsylvania Pkwy, Fredericksburg, VA	<b>Add</b>
<b>Stacle Smith, ARNP</b> Nurse Practitioner 12100 Kain Rd, Glen Allen, VA	<b>Add</b>
<b>Marjorie Smith, PMHNP</b> Clinical Nurse Specialist (Psych/Mental Health) 3932 Springfield Rd, Glen Allen, VA	<b>Add</b>
<b>Wendy Smith, LCSW</b> Social Worker (Clinical)	<b>Add</b>

**Back** **Skip this step →**

**Continue**

Add your prescription drugs on this page, be sure to select the correct medication, dosage, and type (i.e., tablet vs. capsule, etc.) Click **“Add.”** Once added if you have multiple people on the plan you will need to indicate who the medication belongs to... once you have completed entering your medication click **“Continue.”** If you don't have any medications choose **“Skip this step →.”**



## Do you take any prescription drugs?

You'll be able to see which plans cover your drugs, and how much they'll charge you. [i](#)

Clear

Amlodipine / Atorvastatin Oral Tablet Generic / Oral Tablet	<input type="button" value="Add"/>
Atorvastatin / Ezetimibe Oral Tablet Generic / Oral Tablet	<input type="button" value="Add"/>
Atorvallq: Atorvastatin Oral Suspension Branded / Oral Suspension	<input type="button" value="Add"/>
Lipitor: Atorvastatin Oral Tablet Branded / Oral Tablet	<input type="button" value="Add"/>

### Amlodipine / Atorvastatin Oral Tablet

Generic / Oral Tablet

Supply duration

12 Months ▾

Applicant

Primary (Female, 61) ▾

Dosage


Amlodipine 10 Mg / Atorvastatin 40 Mg Oral Tablet ▾



**DO NOT** add any personal information until or unless you are ready to enroll in a plan!!!

Click **“See your plans.”**

YOUR INFO — SAVINGS — PERSONALIZE



## Now's a good time to save your progress!

Enter your email and we'll save your progress for you.

[See your plans](#)

[Skip for now](#)

When you reach this page, you will select the far-right button at the top of the page to be able to view "All plans."

23015, Caroline County 1 2 \$38,700 Edit Share Print

Most affordable Lowest premium **All plans**

## We found the most affordable plan for you!

Out of all [69 plans](#), we estimate this plan will be the least expensive for your coverage needs. [See why](#)

**Most affordable plan**

**Anthem HealthKeepers**  
Offered by HealthKeepers, Inc.

Anthem HealthKeepers Silver DED 350 Tiered PCP S05 - HMO  
SILVER + CSR ★★★★★

Monthly premium	Deductible (Health + Rx)	Your estimated all-in	\$1,656
<b>\$45.18</b> <del>was \$825.18</del>	<b>\$350</b>	Out-of-pocket max	\$3,075
		Doctor visits	\$5
		Generic drugs	\$10 per script


Aracoma Smith, LCSW Takes this plan

[Amlodipine 10 Mg / Atorvastatin 40 Mg Oral Tablet](#) \$10 per script copay

[View plan details](#) [Enroll in this plan](#)

We've estimated affordability based on your expected use of healthcare this year:

Your expected use	Sticker price	What insurance pays	What you pay
Set to Medium	On average		
2 Doctor visits	\$244	\$234	\$10
3 Specialist visits	\$661	\$267	\$394
2 Labs or tests	\$2,240	\$1,680	\$560
12 Prescriptions	\$2,105	\$1,985	\$120
1 Hospital Visits	\$120	\$90	\$30
0 Emergency Room Visits	—	—	—
12 Monthly premiums			\$542
		<b>Total estimate</b>	<b>\$1,656 per year</b> \$138/month on average This is the <b>lowest</b> estimate of all 69 plans



From this page you can use the various filters on the left-hand side to narrow your search parameters to view only the plans that meet your requirements. Check the **“Compare”** buttons in the lower left-hand corner of the individual plans to view them side-by-side. Then click the **“Compare # plans”** in the lower right-hand corner of the page to view.

The screenshot displays a health insurance comparison interface. On the left, a sidebar contains various filters:
 

- Estimated savings:** \$780/mo
- Cost sharing reduction:** CSR
- Monthly premium max:** Slider set at \$313 (original \$673.89)
- Max total deductible:** Slider set at \$8200
- Providers:** Aracoma Smith, Lcsw (selected)
- Prescriptions:** Amlodipine / Atorvastatin Oral Tablet (selected)
- Usage estimate:** Medium (selected)
- Carriers:** UnitedHealthcare (selected)
- Metal levels:** Expanded Bronze (selected)
- Networks:** HMO (selected)

The main area shows 69 plans, sorted by Lowest Premium. Three plan cards are visible:
 

- United Healthcare UHC Bronze Copay Focus - HMO:** Monthly premium \$0.00, Health deductible \$0. Includes a 'Compare' button.
- Oscar Bronze Simple HSA - EPO:** Monthly premium \$0.00, Deductible \$5,000. Includes a 'Compare' button.
- Anthem HealthKeepers Bronze DED \$500 - HMO:** Monthly premium \$0.00, Deductible \$5,500. Includes a 'Compare' button and an 'Enroll now' button.

At the bottom, a summary bar shows three selected plans: Bronze Simple HSA (\$0 per month), UHC Bronze Cop... (\$0 per month), and Anthem HealthKe... (\$0 per month). A 'Compare 3 plans' button is highlighted in red.

Convenient comparison showing premium, deductible, primary care physician, specialists, generic drugs, etc. along with resources that will allow you to dig deeper into the “Plan details” and the “Summary of Benefits”

Oscar Insurance Company Bronze Simple HSA <a href="#">Enroll</a>	UnitedHealthcare UHC Bronze Copay Focus <a href="#">Enroll</a> Lowest premium	HealthKeepers, Inc. Anthem HealthKeepers Bronze DED 5500 <a href="#">Enroll</a>
--	--	--

Summary

Monthly Premium	\$0.00 <small>was \$214.06</small>	\$0.00 <small>was \$223.83</small>	\$0.00 <small>was \$437.43</small>
Deductible	\$5,000 per person	\$0 per person	\$5,500 per person
Max OOP	\$7,450 per person	\$9,450 per person	\$9,450 per person
Estimated All-in	\$5,611	\$3,465	\$5,187
Overall Rating	Not Rated	★★★★☆	★★★★☆
Network	EPO	HMO	HMO
Primary Care	\$40 after deductible	\$60	\$30
Specialist	\$80 after deductible	\$150	35% after deductible
Generic Drugs	\$3 after deductible	\$25	35% after deductible
Laboratory Outpatient and Professional Services	\$10 after deductible	\$20	35% after deductible
Emergency Room	50% after deductible	\$2000	50% after deductible
Urgent Care Centers or Facilities	\$100 after deductible	\$100	\$60
Hospital Stay	50% after deductible	\$3000 per day	35% after deductible
Providers who take this plan	Aracoma Smith	Aracoma Smith	Aracoma Smith
Prescriptions	Amlodipine 10 Mg / Atorvastatin 40... <small>● Covered (see formulary)</small>	Amlodipine 10 Mg / Atorvastatin 40... <small>● Prescription not covered</small>	Amlodipine 10 Mg / Atorvastatin 40... <small>● 35% after deductible</small>
Resources	<a href="#">Plan details</a> <a href="#">Summary of Benefits</a>	<a href="#">Plan details</a> <a href="#">Summary of Benefits</a> <a href="#">Prescription Directory</a> <a href="#">Brochure</a>	<a href="#">Plan details</a> <a href="#">Summary of Benefits</a> <a href="#">Prescription Directory</a>

Once you've decided on which plan you would like to go with you can either **"Enroll"** directly from this page or use the **"< Back"** link in the top left-hand corner of the page to go back to the **"plan view"**, you can also enroll there...

If you get stuck somewhere in the enrollment process, you can call the 800 number:

**(833) 502-1529**