

Active Consent

August 9, 2023



The team



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Director, Agency Sales

HealthSherpa

She/Her



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Group Product Manager

HealthSherpa

He/Him

Agenda

HealthSherpa Overview

CMS Consent Requirements

Active Consent on HealthSherpa

Q&A

Feedback

Who we are

HealthSherpa is the leading platform for ACA Marketplace enrollments. **HealthSherpa for Agents** provides agents and brokers with **free shopping, enrollment, and marketing tools** to easily grow, scale, and optimize their ACA Marketplace business.

15m

People enrolled
On-ex since 2014

45k

Unique
agents/brokers

45%

of 2023 active ACA
enrollment volume

>85m

Shopping
sessions

HealthSherpa and CMS



CMS Active Consent Requirements



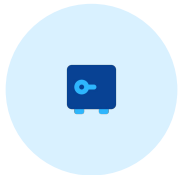
Documenting Consent

Agents, brokers, and web-brokers are responsible for documenting consumer consent including:

- Producing documentation
- Providing a process to rescind consent
- Including the scope, purpose, and duration



CMS Active Consent Requirements



Reviewing Information Accuracy

Agents, brokers, and web-brokers are responsible for reviewing application accuracy with their clients including:

- Document review and accuracy
- Include specific information
- Maintain documentation for 10 years+

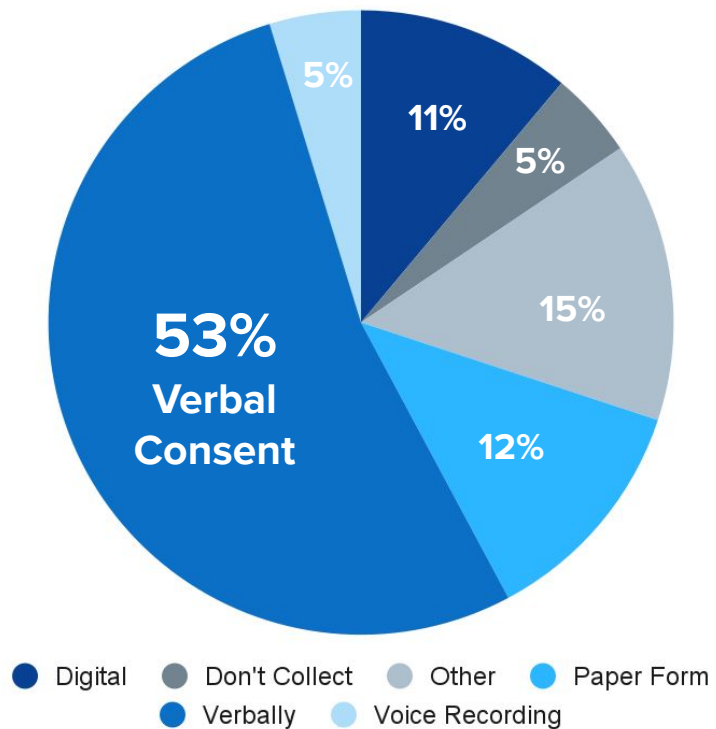


HealthSherpa 2023 Consent Survey

We surveyed **1201 agents**, evenly split between individuals and agencies about their consent practices

Key Insights:

- Both groups need a consent solution
- Agents without a compliant way to capture consent are most interested
- Consumer accessibility is a top priority: technology access, language barriers, and topic complexity

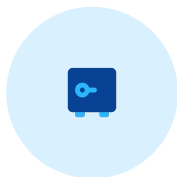


Active Consent Capabilities



Capture

Capture consent



Store

Reliably store consent



Report

Access consent reports & status



Direct to Consumer Consent

Consent agreements embedded within the application flow allow consumers to grant agents consent from their custom marketing page

Privacy statement

Here at HealthSherpa, we work with the Marketplace to help you get health coverage.

[Learn more about the Marketplace](#)

Privacy and the use of your information

Important Marketplace Emails: If the Marketplace has your email address, they'll automatically send you important information, updates, and reminders about Marketplace enrollment. You can opt out of these communications at any time. To do this, click on the "unsubscribe" link in the footer of any Marketplace email.

Privacy and the use of your information: The Marketplace will keep your information private as required by law. Your answers on this form will only be used to determine eligibility for health coverage or help paying for coverage. The Marketplace will check your answers using the information in their databases and the databases of other federal agencies. If the information doesn't match, the Marketplace may ask you to send them proof. The Marketplace won't ask any questions about your medical history. Household members who don't want coverage won't be asked questions about

To continue, you must agree and check each of the following statements:

- I agree to have my information used and retrieved from data sources for this application. I have consent for all people I'll list on the application for their information to be retrieved and used from data sources.
- I understand that I'm required to provide true answers and that I may be asked to provide additional information, including proof of my eligibility for a Special Enrollment Period if I qualify. If I don't, I may face penalties, including the risk of losing my eligibility for coverage.

Agent Consent Upload

Prompts within the agent workflow highlight consent requirements and allow agents to store and keep track of consent records they've capture outside of HealthSherpa

HealthSherpa stores required documents for the minimum of 10 years

Eligibility summary

Name	Covered by this plan	Next step
✓ Jane Fetterman	Yes	Enroll
✓ Fernando Garcia	Yes	Enroll

Consent

[Download consent form](#)

You are required to collect written or verbal consent from your client before completing an enrollment. You can maintain this proof of consent in your own records or in your HealthSherpa dashboard.

How would you like to maintain proof of consent?

Upload my consent files to HealthSherpa

Accepted file types include text, audio, or image files (jpeg, png, pdf, txt, or mp3). Files must be smaller than 1 MB.

 Upload file

I already have proof of consent in my own records

Upload consent files later

Enroll in this plan

Not ready to enroll?

[Edit application](#)

[Change plans](#)

Consent on Agent Dashboard

Consent records are easily accessed and available for export from the Agent Dashboard

Consent status in the agent's client list indicates whether documentation is complete

Contact

Email: jesposito@gmail.com

Phone: (442) 323-2312

Address: 2631 NW 99th, Coral Springs, FL, 33065

Status

Status: Applying

Last update: 1/4/2021

Agent of Record: Other

Plans 2023

Renew

Health plan Silver HMO 1250

Ambetter from Magnolia Health

BRONZE

\$175.45

Premium
Was \$1,000

\$1,250

Deductible

\$5,250

Out-of-pocket max.

[View full plan details](#) →

Status

Enrolled

Members

Jane Esposito, Danny Esposito

FFM ID

872490

FFM Subscriber ID

32322323214

Effective

1/1/2021

Documents

[Summary of Benefits](#)

Carrier phone

(916) 456-7778

Payment phone

(916) 456-7778

[Pay premium](#)

[Change plan](#)

[Cancel plan](#)

Consent records

Method	Collection date	Consent status	Plan year	Download files	Action
Agent upload	01/03/2023	Collected	2023	Consent_01/02...	-

Marketplace notices

Date	Notice	Plan year	Details
12/10/2020	Important! Followup Documentation Insufficient	2021	View

HealthSherpa Consent Form

Coming soon!

Consumer consent forms integrated into the user flow so agents can easily collect and document consent as part of the enrollment process

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1/1/2021

Summary of Benefits

56-7778

456-7778

Plan

Cancel plan

Consent records

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Q&A

Thank You



HealthSherpa