

# HUMANA

## DENTAL / VISION ON-LINE APPLICATION

**To complete the online application...**

1. [www.humana.com](http://www.humana.com)
2. Sign in using your username and password
3. Select the Vantage Tab Below

For Your  
Retail  
Business

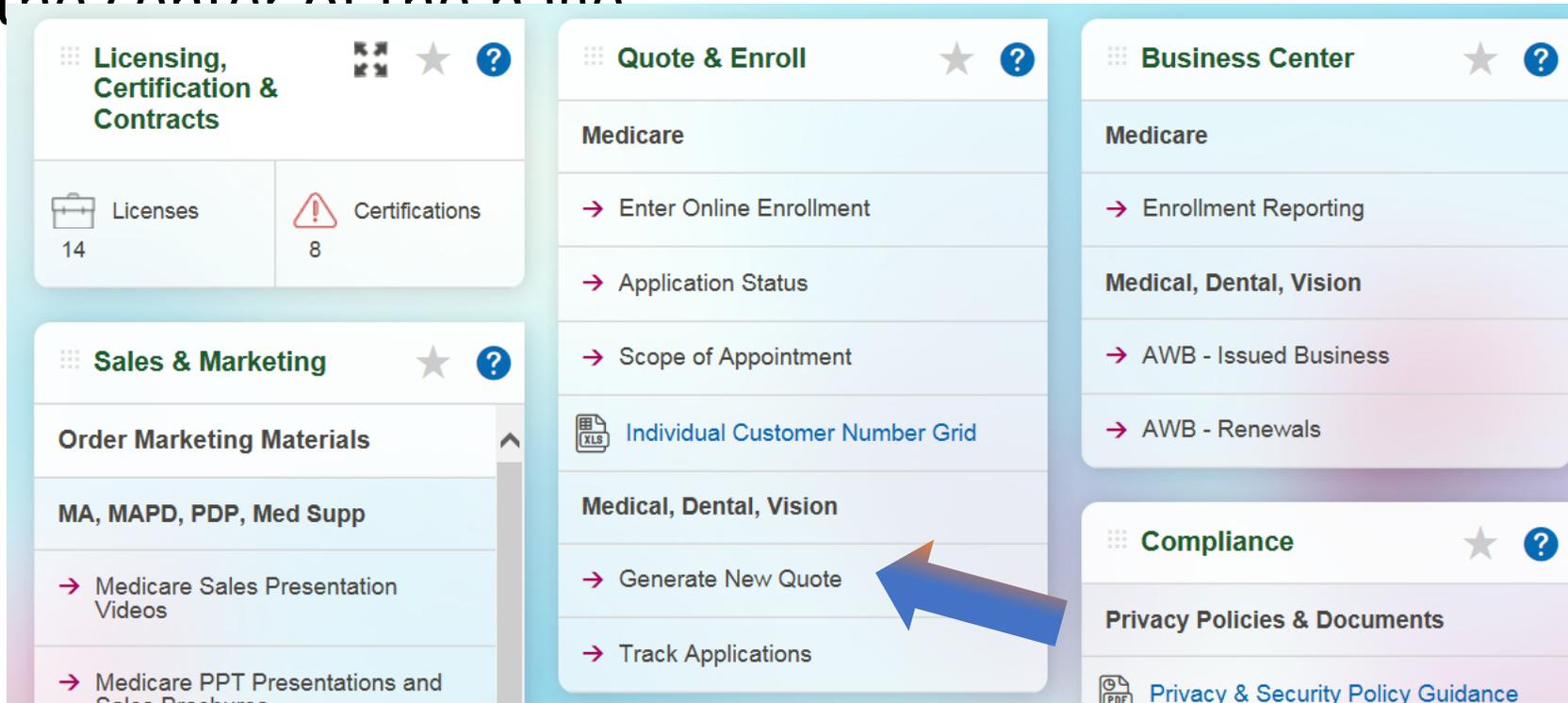
 [Vantage](#)

For Your  
Commercial  
Business

 [Agent Portal](#) 

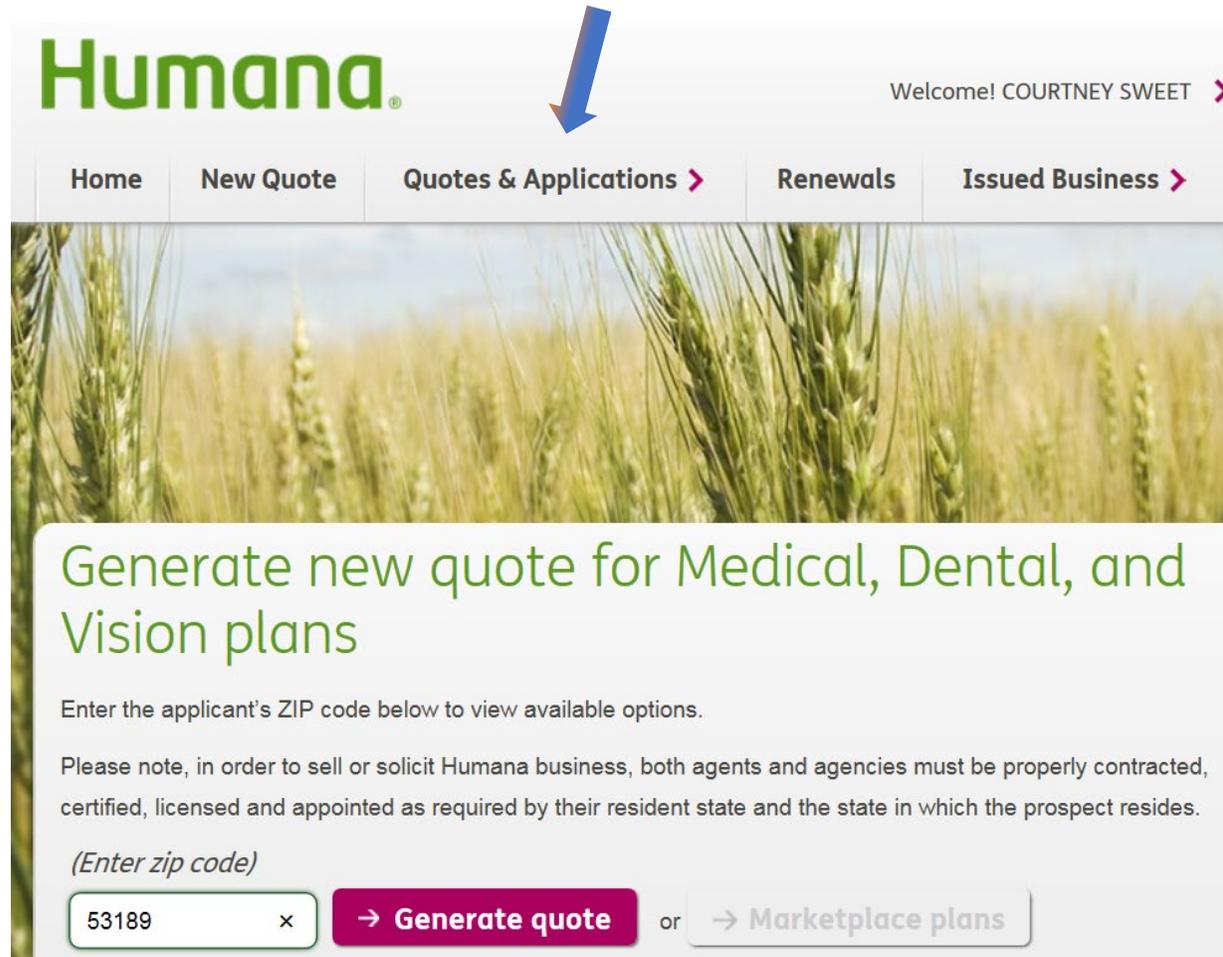
# Humana Vantage

- Select “Generate New Quote” Link under the Medical, Dental, Vision tab in the center of the page



# Running a Quote

- **Automatically opens a new tab for the Humana Agent Workbench.**
- **Simply Enter the zip code and select the Generate quote tab at the bottom of the screen.**



The screenshot displays the Humana Agent Workbench interface. At the top left is the Humana logo. To the right, a user greeting reads "Welcome! COURTNEY SWEET" with a right-pointing chevron. Below this is a navigation menu with five items: "Home", "New Quote", "Quotes & Applications" (which is highlighted with a right-pointing chevron), "Renewals", and "Issued Business" (with a right-pointing chevron). A blue arrow points down to the "Quotes & Applications" tab. The main content area features a background image of a field of wheat. Overlaid on this is a white box with the heading "Generate new quote for Medical, Dental, and Vision plans" in green. Below the heading, it says "Enter the applicant's ZIP code below to view available options." and includes a disclaimer: "Please note, in order to sell or solicit Humana business, both agents and agencies must be properly contracted, certified, licensed and appointed as required by their resident state and the state in which the prospect resides." There is a text input field containing "53189" with a clear button (x) to its right. To the right of the input field is a red button labeled "→ Generate quote" and a grey button labeled "→ Marketplace plans".

# Client Demographics

## Enter applicant information

Writing Agent ID: 1438070

Writing Agent name: COURTNEY SWEET

[Assign agent](#)

\* Zip code

53189

Covered individuals	Gender	Date of birth	
Primary applicant	<input type="radio"/> Male <input type="radio"/> Female	<input type="text" value="MM/DD/YYYY"/>	
My spouse	<input type="radio"/> Male <input type="radio"/> Female	<input type="text" value="MM/DD/YYYY"/>	<a href="#">Remove</a>

[+ add a dependent](#)

I have a veteran in my immediate family

[→ Next step: Select a plan](#)

# Selecting A Plan

Dental Vision

## Let's look at some Vision Plans

**1 plan available**  
If purchasing both vision and dental plans together (excluding Dental Savings Plus plan), you'll pay only one enrollment fee.

[➔ Search Vision Providers](#)

---

### Humana Vision

**PPO**

**Enrollment Fee:** \$35.00  
**Effective date:** 01/01/2017

**Routine Exam:**  
You pay \$15. Once every 12 months

**Contact Lens Exam:**  
\$150 allowance

Premium	\$14.49
Administrative Fee	\$1.00
Association Fee	\$0.00
<b>Monthly payment</b>	<b>\$15.49</b>

[Select Plan](#)

# Review and Apply

## Select a plan

**Review & Apply**

[Compare plans](#) | [Clear selected](#)

**Filters**

Filter by price  
Select ▼

Filter by plan type  
Select ▼

[Clear all](#)

Dental **Vision**

### Compare dental plan options

There are 3 plan(s) available. You may select up to 4 plans to compare at a time  
If purchasing both vision and dental plans together (excluding Dental Savings Plus plan), you'll pay only one enrollment fee.

[Search Dental Providers](#)

<b>Dental Preventive Plus</b>	Premium	\$25.99
<b>PPO</b>	Administrative Fee	\$1.00
<b>Deductible:</b> \$50 Individual/\$150 Family;	Association Fee	\$0.00
<b>Enrollment Fee:</b> \$35.00	<b>Monthly payment</b>	<b>\$26.99</b>
<b>Office Visit Copay:</b> Does not apply		
<b>Effective Date:</b> 01/01/2017		

Taskbar: Outlook, Skype, Excel, PowerPoint

# Review and apply

 [Save](#)  [Print](#)  [Email quote](#)

This quote is only an estimate. Humana will determine the final rate and effective date after we receive and accept your completed application.

## Quote Number:

xi6adlvz

**Gender/Age:**  
F/62

**County:**  
WAUKESHA

**ZIP code:**  
53189

	<p><b>Option A</b></p> <p>\$42.48 Monthly \$77.48 Initial</p> <p><a href="#">→ Apply now</a></p> <p><a href="#">Remove item</a></p>
<p><a href="#">+ Payment Details</a></p>	
<p><a href="#">+ Dental Plan(s)</a></p>	
<p><a href="#">+ Vision Plan(s)</a></p>	

[→ Return to Select a Plan](#)

# Saving the Quote

**Save quote**

To save the quote(s), complete the fields below with your client's information and click "Submit".

\* Required

\* First name  \* Last name

Email address

Confirm email address  x

**Submit** [Cancel](#)

Close x

Review quote

This quote is only an estimate.

Quote Number: xi6adlvz

Gender/Age: F/62

\$77.48 Initial

[Apply now](#)

[Email quote](#)

ed application.

n-quotes/mvc/QtAgentReviewAndApply/SaveCart\_Post

# Start of Online Application

## What to expect

Applying for health insurance coverage with Humana is easy. Just click on the Start button and we'll guide you through each step of the process. This usually takes no more than 10 - 20 minutes. All applications are subject to approval.

### Apply for Health Insurance in just four easy steps



**ApplicationDetails**



**Review**



**Payment**



**E-Signature**

### Agreements

You have chosen to continue the application process for your client by using Agent Workbench's Agent Online Application. The plans are not offered through the exchange (also known as the Health Insurance Marketplace) and are therefore not eligible for ACA premium tax credits (subsidy) or cost-sharing reductions.

Before you begin the application, make sure you've reviewed the Summary of Benefits brochure, Privacy Notice and Quote Disclaimer.

Please note, in order to sell or solicit Humana business, both agents and agencies must be properly contracted, licensed, and appointed as required by their resident state and the state in which the prospect resides.

Please affirm that you have:

- Reviewed the Summary of Benefits brochure with your client.
- Reviewed the Privacy Notice with your client.
- Reviewed the Subsidy/Tax Credit Eligibility Information and informed the customer that he or she will be responsible for paying the entire premium amount.
- Read the quote disclaimer available on the Review and Apply page to your client.
- Read all of the application questions to your client as they are presented.
- Agreed that the review and signature of the application and additional documents will be completed by the applicant(s).

 [View Benefits](#)

By clicking on Start Application, you agree to the above statements.

# Application

## Application for primary applicant

We would like some additional information to complete your application. Please include your information in the boxes below.

* First name	* Last name	* Birth date	Age
<input type="text" value="Test"/>	<input type="text" value="Test"/>	<input type="text" value="03/25/1954"/>	62 year(s)
* Gender	* Social security number		
<input type="text" value="Female"/>	<input type="text"/>		
* Residential Address			
<input type="text"/>			
Street Address 2			
<input type="text"/>			
* City	* State	* Zip code	* County
<input type="text" value="WAUKESHA"/>	<input type="text" value="Wisconsin"/>	<input type="text" value="53189"/>	<input type="text" value="WAUKESHA"/>
* Email address	* Confirm email address		
<input type="text" value="csweet@humana.com"/>	<input type="text" value="csweet@humana.com"/>		
* Primary phone #	<input type="text"/>		

### 2 Plan(s) Added

**Dental Preventive Plus**  
Effective Date 01/01/2017  
Premium \$26.99

**Humana Vision**  
Effective Date 01/01/2017  
Premium \$15.49

**Total \$42.48**

 [Dental Preventive Plus](#)

 [Humana Vision](#)

# Finishing the Application

ApplicationDetails     Review     **Payment**     Signature     Thank You

Select  
Automatic Check Draft  
MasterCard  
Visa

Enter Billing Information

\* Is the person who will make the payments listed on the application?     Yes     No

\* First name    \* Last name

\* Address

Address 2

\* Zip code    \* State    \* City    \* County

# Addressing Concern #2 – Not worth the Time

- 1. It's easy to offer SADV.
- 2. Submit application electronically or by paper application.
- 3. Since it takes 30 minutes or less to submit a Dental/Vision application, you're earning over \$70/hour selling these plans to your clients!
  - *"There is a lot to gain by offering ancillary coverage!"*





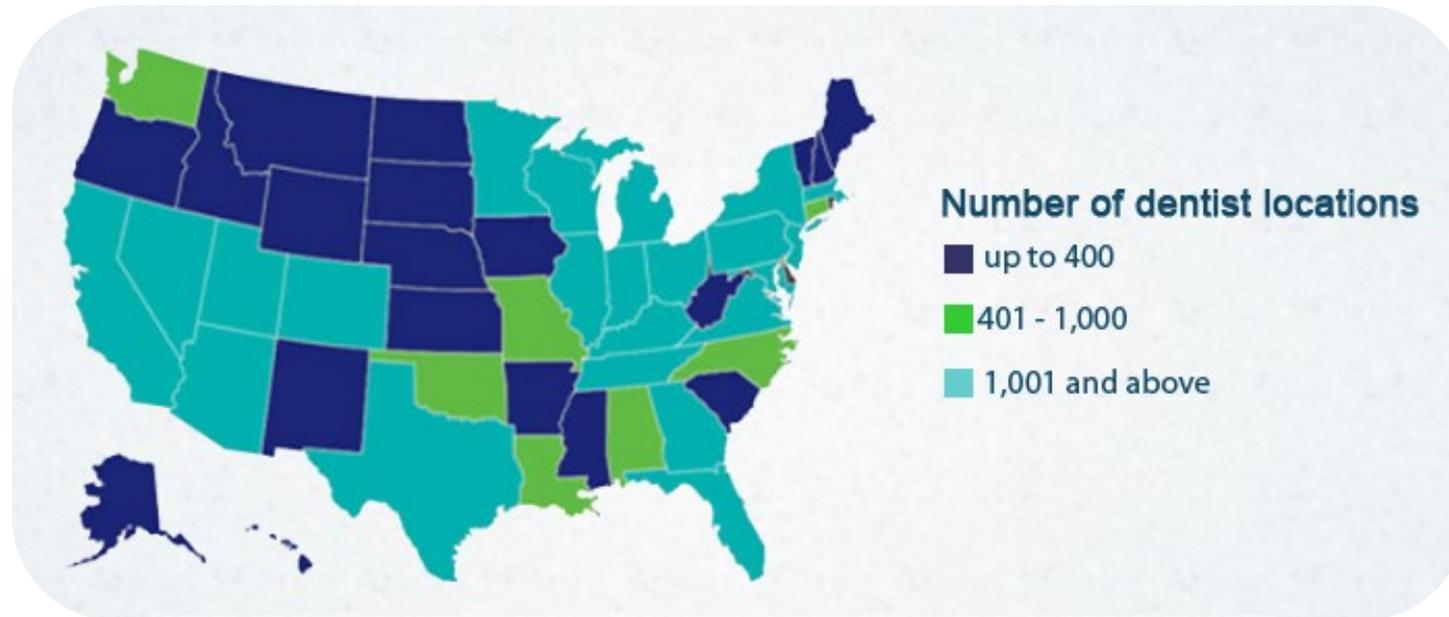
# Find a Dentist



**Humana**



Humana PPO Plans (Preventive Plus, & Loyalty Plus) all use the same network! The **Humana PPO / Traditional Preferred Network**



Members can save more by choosing one of the **more than 225,000 dentist locations** in the HumanaOne Dental network.

# Provider Search: www.humanaonenetwork.com

\*Your Zip Code

Radius  
5 miles

\*Plan  
All Dental

Provider's  
Last Name

Accepting New  
Patients

Facility #

Facility Name

Specialist  
-----

**Find Providers**

- 1. Enter Zip Code
- 2. Select Mile Radius
- 3. Select Plan
- 4. Narrow leave open for broad search
- 5. Accepting New Patient box

\*Plan

All Dental
VISION
C550
CARE
TDP
CS350
C550TC
TDPTC
PREVENTIVE +
VCP
VFP
PPLUST
HI215
LOYALTY +
SIMPLE
DSAVE +
SRDBAS
SRDPRE
HumVision

# Provider Search

<p>*Your Zip Code <input type="text" value="53189"/></p> <p>Radius <input type="text" value="25 miles"/> ▼</p> <p>*Plan <input type="text" value="All Dental"/> ▼</p> <p>Provider's Last Name <input type="text"/></p> <p><input checked="" type="checkbox"/> Accepting New Patients</p> <p>Facility # <input type="text"/></p> <p>Facility Name <input type="text"/></p> <p>Specialist <input type="text" value="-----"/> ▼</p> <p><a href="#">Find Providers</a></p> <p><a href="#">Print Results</a> </p>	<h2>Provider Results</h2> <p>1-10 of 547 <a href="#">view all 547 results »</a> <span style="float: right;">sort by: <a href="#">Distance</a>   <a href="#">Last Name [A-Z]</a></span></p> <hr/> <table border="0" style="width: 100%;"><tr><td style="width: 5%; vertical-align: top;">1</td><td style="width: 40%; vertical-align: top;"><p><b>DDS Mark J Kneepkens</b> 601 N Grand Ave Waukesha , WI 53186 (262) 542-6170</p></td><td style="width: 40%; vertical-align: top;"><p><b>DSAVE+,LOYALTY +,PREVENTIVE +,SIMPLE,SRDBAS,SRDPRE</b> Accepting New Patients? <b>Yes</b> Facility Name:Kneepkens, DDS, Mark J Facility #:452738, Provider #:177460 Minimum Age:0</p></td><td style="width: 15%; vertical-align: top; text-align: right;"><p>Distance: 0 mi. <a href="#">See Map</a></p></td></tr><tr><td colspan="4"><hr/></td></tr><tr><td style="vertical-align: top;">2</td><td style="vertical-align: top;"><p><b>DDS Mark J Kneepkens</b> 601 N Grand Ave Waukesha , WI 53186 (262) 542-6170</p></td><td style="vertical-align: top;"><p><b>DSAVE+,LOYALTY +,PREVENTIVE +,SIMPLE,SRDBAS,SRDPRE</b> Accepting New Patients? <b>Yes</b> Facility Name:Drs Denture Systems Facility #:452739, Provider #:177460 Minimum Age:0</p></td><td style="vertical-align: top; text-align: right;"><p>Distance: 0 mi. <a href="#">See Map</a></p></td></tr><tr><td colspan="4"><hr/></td></tr><tr><td style="vertical-align: top;">3</td><td style="vertical-align: top;"><p><b>DDS Linda J Terlecke</b> 601 N Grand Ave Waukesha , WI 53186 (262) 542-6170</p></td><td style="vertical-align: top;"><p><b>DSAVE+,LOYALTY +,PREVENTIVE +,SIMPLE,SRDBAS,SRDPRE</b> Accepting New Patients? <b>Yes</b> Facility Name:Drs Denture Systems Facility #:452739, Provider #:188740 Minimum Age:0</p></td><td style="vertical-align: top; text-align: right;"><p>Distance: 0 mi. <a href="#">See Map</a></p></td></tr></table>	1	<p><b>DDS Mark J Kneepkens</b> 601 N Grand Ave Waukesha , WI 53186 (262) 542-6170</p>	<p><b>DSAVE+,LOYALTY +,PREVENTIVE +,SIMPLE,SRDBAS,SRDPRE</b> Accepting New Patients? <b>Yes</b> Facility Name:Kneepkens, DDS, Mark J Facility #:452738, Provider #:177460 Minimum Age:0</p>	<p>Distance: 0 mi. <a href="#">See Map</a></p>	<hr/>				2	<p><b>DDS Mark J Kneepkens</b> 601 N Grand Ave Waukesha , WI 53186 (262) 542-6170</p>	<p><b>DSAVE+,LOYALTY +,PREVENTIVE +,SIMPLE,SRDBAS,SRDPRE</b> Accepting New Patients? <b>Yes</b> Facility Name:Drs Denture Systems Facility #:452739, Provider #:177460 Minimum Age:0</p>	<p>Distance: 0 mi. <a href="#">See Map</a></p>	<hr/>				3	<p><b>DDS Linda J Terlecke</b> 601 N Grand Ave Waukesha , WI 53186 (262) 542-6170</p>	<p><b>DSAVE+,LOYALTY +,PREVENTIVE +,SIMPLE,SRDBAS,SRDPRE</b> Accepting New Patients? <b>Yes</b> Facility Name:Drs Denture Systems Facility #:452739, Provider #:188740 Minimum Age:0</p>	<p>Distance: 0 mi. <a href="#">See Map</a></p>
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# Commissions



**Humana**



# HumanaOne Commissions

Plan	Commission, Expressed as a Percent of Paid Premium or Monthly Plan Fee	One-Time Enrollment Fee Commission
<b>Humana Vision</b>		
<ul style="list-style-type: none"> <li>-Humana Vision</li> <li>-Vision Care</li> <li>-Vision Focus</li> </ul>	<p><b>All Years</b> 10%</p>	\$35 in all states
<b>Humana Dental</b>		
Dental Loyalty Plus	<p><b>All Years</b> 10%</p>	\$35 in all states
Dental Preventive Plus	<p><b>All Years</b> 10%</p>	\$35 in all states

# HumanaOne Commissions

## MA/Dental Cross-Selling Commission Example

Year 1	Year 2	Year 3
AEP 10 MA Sales = \$3,320	AEP 10 MA Sales = \$3,320	AEP 10 MA Sales = \$3,320
ROY 10 MA Sales = \$3,320	ROY 10 MA Sales = \$3,320	ROY 10 MA Sales = \$3,320
10 SA Dental Sales = \$350	10 SA Dental Sales = \$350	10 SA Dental Sales = \$350
	20 MA Renewals = \$4,420	40 MA Renewals = \$8,840
	10 SA Dental Renewals = \$360	20 SA Dental Renewals = \$720
<b>First Year Commissions \$6,990</b>	<b>Second Year Commissions \$11,770</b>	<b>Third Year Commissions \$16,550</b>
<b>Total 3 Year Commissions: \$35,310</b>		

# Addressing Concern #3 – Don't make enough

- 1. Ease of application - \$70 an hour
- 2. Cross Selling for Compensation growth
- 3. Increased Retention with multiple business lines
- 4. Bonus Opportunities increase value



- *“You have a lot to gain by enrolling in coverage!”*



# Ordering Materials



# Order Materials

The screenshot displays a software interface with four main navigation panels:

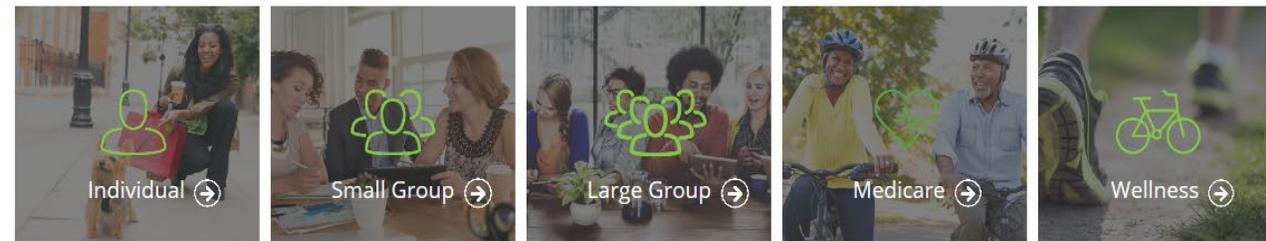
- Licensing, Certification & Contracts**: Contains 'Licenses' (14) and 'Certifications' (8).
- Sales & Marketing**: Contains 'Order Marketing Materials', 'MA, MAPD, PDP, Med Supp', 'Medical, Dental, Vision', and 'Sales and Marketing References & Guides'. A yellow arrow points to 'Sales Materials' under the 'Medical, Dental, Vision' section.
- Quote & Enroll**: Contains 'Medicare', 'Medical, Dental, Vision', and 'Education' sections with various sub-options like 'Enter Online Enrollment', 'Application Status', 'Scope of Appointment', 'Individual Customer Number Grid', 'Generate New Quote', and 'Track Applications'.
- Education**: Contains 'MarketPoint Learning Portal' and 'MarketPoint University'.

# Order Materials

**Humana.** Marketing Resource Center



Browse by clicking on a product below or the Marketing Programs Directory drop-down menu above.



# Order Materials

Home Menu Good afternoon, COURTNEY Shopping Cart Mail item search

Medical 	Dental 
<a href="#">Agent Prospecting Materials &gt;&gt;</a>	<a href="#">Agent Prospecting Materials &gt;&gt;</a>
<a href="#">Plan Materials &gt;&gt;</a>	<a href="#">Plan Materials &gt;&gt;</a>
<a href="#">Member Materials &gt;&gt;</a>	<a href="#">Member Materials &gt;&gt;</a>
<a href="#">Other &gt;&gt;</a>	<a href="#">Other &gt;&gt;</a>

Vision 	Veterans 
<a href="#">Agent Prospecting Materials &gt;&gt;</a>	<a href="#">Agent Prospecting Materials &gt;&gt;</a>
<a href="#">Plan Materials &gt;&gt;</a>	<a href="#">Plan Materials &gt;&gt;</a>
<a href="#">Member Materials &gt;&gt;</a>	<a href="#">Member Materials &gt;&gt;</a>
<a href="#">Other &gt;&gt;</a>	<a href="#">Other &gt;&gt;</a>

**NARROW YOUR RESULTS**

**Audience**

- Agent/Broker (7)
- Employer (6)
- Member (6)
- Provider (3)

**Delivery Channel**

- Download (7)
- Download with link (6)
- Print Order (1)

**Document Type**

- Benefit summary (7)

**Language**

- English (6)
- Spanish (1)

**Line of Business**

- Individual (7)

**Product Type**

- Dental (6)

Sort By: Document Type 



Benefit Summary-  
Humana Vision 



HumanaOne Dental  
Prepaid HI215 Plan- ... 



HumanaOne Dental Non  
Associate Preven... 



HumanaOne Dental Non  
Associate Loyalt... 



2018 Smart Choice Dental  
Benefit Summ... 



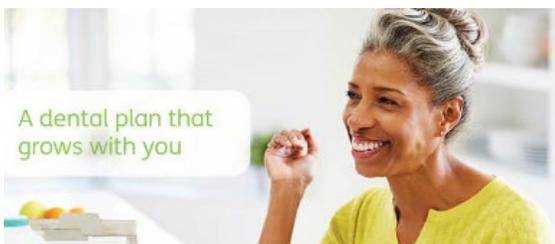
Vets Preventive Plus Plan  
Non-Associa... 



HumanaOne Dental  
Savings Plus Benefit... 

Display Per Page: 50 

## Flyer GCHH7EGHH



### Why the Humana Dental Loyalty Plus plan could be right for you

With the Loyalty Plus plan, you will be rewarded with increasing benefits from years one to three, with no waiting period for services. That means you can start using your plan right away.

Get coverage for preventive care and other services such as fillings, root canals, dentures or crowns.

The **Loyalty Plus** plan is a great choice for these reasons:

#### Coverage now that increases:

- No copays, and routine cleanings and exams are covered at 100 percent

The plan pays a maximum benefit of:

- \$1,000 in year one
- \$1,250 in year two
- \$1,500 in year three and thereafter

#### Lasting coverage with freedom:

A one-time deductible for as long as you stay on the plan, up to \$150 per person or \$450 per family.

#### Coverage that moves with you:

- You have the freedom to choose the dentist you prefer
- If you travel or move, the plan goes with you

**DID YOU KNOW?** Good oral health means more than just an attractive smile, it is important to brush and floss properly and see a dentist for regular checkups.

#### Preventive services —

Includes routine exams and cleanings

Plan covers	100%, no deductible
Average cost	\$146
Average cost with Loyalty Plus	\$0
Savings	\$146

#### Enrolling is easy.

Contact your Humana agent today

[[AgentName]]  
[[AgentPhone]]  
[[AgentEmail]]  
[[AgentWebsite]]

continued -

## Why the Humana Dental Loyalty Plus plan could be right for you

With the Loyalty Plus plan, you will be rewarded with increasing benefits from years one to three, with no waiting period for services. That means you can start using your plan right away.

Get coverage for preventive care and other services such as fillings, root canals, dentures or crowns.

The **Loyalty Plus** plan is a great choice for these reasons:

#### Coverage now that increases:

- No copays, and routine cleanings and exams are covered at 100 percent

The plan pays a maximum benefit of:

- \$1,000 in year one
- \$1,250 in year two
- \$1,500 in year three and thereafter

#### Lasting coverage with freedom:

A one-time deductible for as long as you stay on the plan, up to \$150 per person or \$450 per family.

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Average cost	\$146
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#### Enrolling is easy.

Contact your Humana agent today

[[AgentName]]  
[[AgentPhone]]  
[[AgentEmail]]  
[[AgentWebsite]]

continued -

# Addressing Concern #4 – Never Sold Product Before

- **What We Learned Today**

1. Product Information
2. Quotes and Applications
3. Finding Providers
4. Compensation
5. Materials and Marketing

- **YOU ARE NOW READY TO SELL!!!!!!**



# Framing the Dental/Vision Sale Conversation

- 1. Transition to Dental/Vision: *“I’m glad you’re happy with your current coverage. I also want you to know that I am appointed to sell Dental and Vision plans with Humana. They have some great options and competitive prices. How do you currently pay for your Dental and Vision care?”*
- 2. Needs Analysis/Probing Questions
- 3. Identify which Dental Plan to Offer
- 4. Present the Benefits
- 5. Provide the quote and **Ask for the Sale!**
- 6. Submit Application