

# JET Insure Broker Portal Training Guide 10: Demographic Changes IFP

1. To find a policy for an individual or a group, click “Policies”
2. If you’re searching for a specific person, type their information in, here. Otherwise, press Search to populate all of your members’ policies.

**Account**

- Contacts
- My Quotes
- Individual Applications
- Small Group Applications
- Policies ←
- Renewals
- IFP Marketplace Renewals

Home ▶ Search

▶ Policy Search

Product: All

Issuer Subscriber ID:

Exchange Subscriber ID:

Policy Name:

DCN Number:

Effective Date From:  MM/DD/YYYY

Effective Date To:  MM/DD/YYYY

First Name:

Last Name:

Agent:

Date of Birth:  MM/DD/YYYY

Group Type: All

Platform: All

Email Address:

Plan Type: All

Status: All

Issuer Subscriber ID	Exchange Subscriber ID	Policy Name	Product	Agent	Effective Date	Expiration Date	Status	Group
Search Results								

3. Select the Policy you want to view by clicking “View/Edit”

<a href="#">View/Edit</a>	Member ID	Exchange Sub ID	Member Name	Individual Health Policies	Agent/ Agency	1/1/2020 12:00:00 AM	12/31/2020 12:00:00 AM	Active
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4. Scroll to the bottom of the policy screen and click “View Details” Then click on the member’s name that is underlined under “Member Name.”

**Member Portal**

- Policy Summary
- Enrollment History
- Member Invoices
- Transaction History
- Member Payments
- Payment Options
- Notifications
- View Plan Details
- View Plan SBC
- View Plan SOB
- Documents
- ID Card Request
- Communication Preferences

**Enrollment Summary - Subscriber Name**

Member ID	Effective Date	Monthly Plan Cost	APTC	Member Responsibility	Paid Through Date
ID #	1/01/2020	\$973.74	\$837.00	\$136.74	4/30/2020

Agent: \_\_\_\_\_ Plan: \_\_\_\_\_

Broker name: \_\_\_\_\_ Envision - Silver 3300 CSR

You have entered the grace period due to an unpaid premium. Please pay the amount due as soon as possible. If the payment is not made by 07/31/2020, your policy will be terminated as of 05/31/2020.

Download Temporary ID Card Outstanding Balance: \$136.74

Member Name	Type	Member ID	Gender	Date of Birth	Age	SSN	Effective Date	Termination Date	Monthly Plan Cost	Status
<u>Member</u>	Demographic and plan information									

**Coverage Information**

Plan Name	Plan Type	Effective Date	Expiration Date	Line of Business	Monthly Plan Cost	APTC	Member Responsibility
Envision - Silver 3300 CSR	EPO	01/01/2020	12/31/2020	Exchange	\$973.74	\$837.00	\$136.74

- Click on the member's name will take you to a screen where you are able to edit demographics for an off exchange member.

Member Portal

### Subscriber Name

Member ID	Effective Date	Monthly Plan Cost	APTC	Member Responsibility	Paid Through Date
ID number	01/01/2020	\$973.74	\$837.00	\$136.74	4/30/2020

Agent: \_\_\_\_\_ Plan: \_\_\_\_\_

Broker name: \_\_\_\_\_ Envision - Silver 3300 CSR

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### Demographics

First Name \*

M.I.

Last Name \*

Suffix

Gender \*

Date of Birth \*

Place of Birth

Relationship \*

SSN \*

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### Address Information

Address Type	Street Address	Apt/Suite #	State	City	County	Zip code	Same as Physical
<input checked="" type="radio"/> Physical	Address		WI	Address			
<input checked="" type="radio"/> Mailing	Address		WI	Address			<input checked="" type="checkbox"/>

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### Contact Information

Preferred Phone \*

Alternative Phone

Demographics Email ?

Do you use tobacco? \*  Yes  No

Will you or any family members covered by this policy have other health insurance coverage when this policy becomes effective? \*  Yes  No

Is this applicant legally disabled? \*  Yes  No

Select a reason for the change.

### Coverage Information

Plan Name	Plan Type	Effective Date
Envision - Silver 3300 CSR	EPO	01/01/2020

### Change Reason

Reason \*

Event Date \*

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- Click Submit when changes are finalized.