

From Your Broker's Dashboard: Click on Enrollments to open your Enrollments page.

		Le	earn More Accessibility
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Dashboard	Clients	Quotes	Enrollments

#### You will see a list of your clients that have Enrollments appear:

		Learn More	Accessibility 🌐 I	Language: English 🗸 Sea	arch	Q
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	Dashboard Clien	ts Quotes Enrollm	ents			
		1				
Enrollments		•			ownload List	1
Filter By: Client Effective Start D	ate Category Enrollment Status					1
1 Enrollment(s) Found Show: 10	Ý					
Client	Effective Start Date 💠	Monthly Premium	Category \$	Enrollment Status	Actions	
Vanilla Orange Subscriber Name: Vanilla Orange	November 1, 2024	\$0.00	Health	Submitted	•••	

To Download List of Enrollments:

1. Click the **Download List** button at the top of the page to open the **Download Enrollment List** dialog box.

Download Enrollment List	
Enrollment list is available for download for one plan year at a time.	
Plan Year 2024 ~ $\checkmark$	
Download Cancel	

- 2. Select the plan year on the **Download Enrollment List** dialog box.
- 3. Click on **Download**.



### To Download List of Enrollments: (continued...)

4. The enrollment information for the selected year is downloaded into a spreadsheet. **The filename will be named in the format of:** *PYYYY Enrollment for Brokers\_Name.xlsx* 

	А		В		С		D		E		F		G		
1	Account Reference ID	(	Client Name	Er	nail Address	Ph	ne Number Assigned Agency/Broker Subscriber Name Enrollment II						Enrollment ID		
2	RefID_10004370	Vanilla	a Orange	<u>VanillaOr</u> om	ange2@mailinat	or.c (505) 532	-3533	KimelaTe	est Broker	Vanilla	Orange	RefID_1729620143077			
	н		1		J		К		L		М		N		
1	Insurer Assigned Policy ID		Member Name - Relationship with Subscriber	<b>,</b>	Category	Plan	Carrier	Pla	an Name	¥	Monthly Pres	nium	Available Premium Tax Credit		
2	-	Van	illa Orange - SELF	He	alth	United Healthc Mexico	Icare of New UHC Value Turquoise 2 with EXTRA SAVINGS, HMO/Silver \$0.00					\$2622			
	0		Р		C	2	R S T					U			
1	Claimed Prem Tax Credit	nium t	New Mexico P Assistance A	remium pplied	Native A Premium A	merican Assistance	Total Savings Applied APTC Premium Assistance Subr				Submitted On				
2	Ş4	460.33	3	\$0. <b>0</b> 0	)	\$0.00		\$460.33	Used	N	ot Used	(	Oct 22, 2024 <sup>다</sup>		
	V		W		Х	Y		Field		410.0	Davie		ala al		
1	Coverage Start I	Date	Coverage End Da	ate	Enrollment Status	Plan Year	Filename: 2024 Enrollment for Brokers_Name.xls						eport _Name.xlsx		
2	Nov 01, 2024		Dec 31, 2024	Subr	nitted	202	24								

### Viewing Details Online to see Carrier and Plan Information:

You can also see this information online by using the **Actions** next to the client you want and selecting **View Details:** 

Filter By:   Client   Effective Start Date   Category   Enrollment Status     1 Enrollment(s) Found   Show: 10 ∨   ✓     Client   Effective Start Date \$   Monthly Premium   Category \$   Enrollment Status   Action     Vanilla Orange   November 1, 2024   \$0.00   Health   Submitted   ●     Subscriber Name: Vanilla Orange   November 1, 2024   \$0.00   Health   Submitted   ●	Enrollments				Download List	t
1 Enrollment(s) Found   Show: 10 ~     Client   Effective Start Date \$   Monthly Premium   Category \$   Enrollment Status   Action     Vanilla Orange   November 1, 2024   \$0.00   Health   Submitted   •     Subscriber Name: Vanilla Orange   O   APTC: Used   Intelligible   •	Filter By: Client Effective Start Date	Category Enrollment Status				
Vanilla Orange November 1, 2024 \$0.00 Health Submitted   Subscriber Name: Vanilla Orange Image: Vanilla Orange Image: Vanilla Orange	1 Enrollment(s) Found Show: 10 v Client	Effective Start Date \$	Monthly Premium	Category \$	Enrollment Status Actions	
<u>View Details</u> Act on Behalf of	Vanilla Orange Subscriber Name: Vanilla Orange	November 1, 2024	\$0.00 🔮 APTC: Used	Health	Submitted	



# How to Generate a Broker's Consumer List of Enrollments & See the Carrier and Plan Information

## Viewing Details Online to see Carrier and Plan Information: (continued...)

Enrollment Details of Vanilla Orange for 2024									
Enrollment ID:		Head Of Household Na	ame:		Submitted On:	Eff	ective Date:		
ReflD_1729620143077	7	Vanilla Orange			Oct 22, 2024	No	ov 01, 2024		
Plan selected for Van	nilla Orange		K						
Monthly Premium	Carrier	Health Plan Name		Health F Policy ID	Plan Assigned D	Annual Deductibles	Est. Out-of-Pock Costs	et	
\$0.00 Turquoise Plan	UnitedHealthcare er Hen Visico	UHC Value Turquoise 2 with SAVINGS HMO/Silver	EXTRA	-		\$0.00 / Person \$0.00 / Family	\$800.00 / Pers \$1,600.00 / Family	on	
The monthly payment a costs. Available Premium Tax ( Claimed Premium Tax C New Mexico Premium A Total Savings Applied <b>(</b>	amounts that you Credit: iredit ① : issistance Applied ) :	see here include the premiur	m tax credit an	d New Me	exico Premium Ass	istance, which lo	wer your premium \$2,622.00 \$460.33 \$0.00 \$460.33		
beWellnm Member ID	Member Name	Relationship with Subscriber	Health Plan A	ssigned	Coverage Period From	Coverage Pe To	eriod Enrollment Status		
70000019571	Vanilla Orange	SELF	-		Nov 01, 2024	Dec 31, 20	024 Submitted		