

Welcome to CareCompass

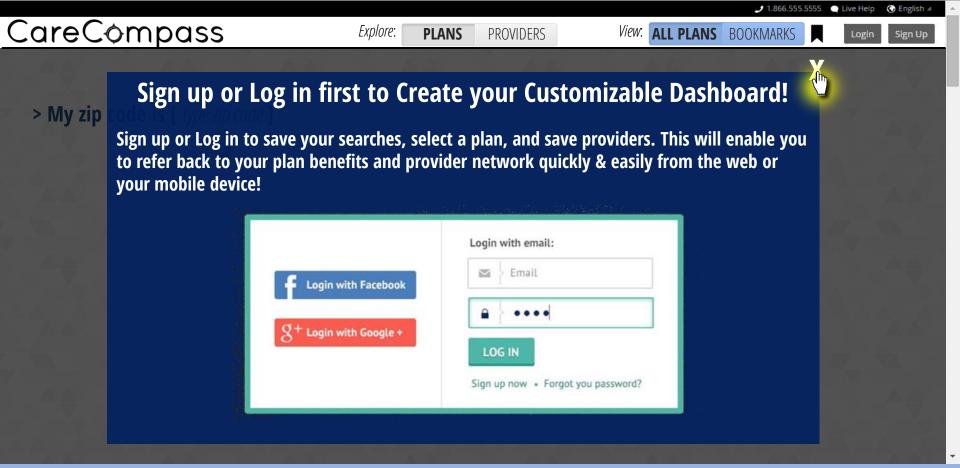
Explore Plans In My Area

Marketplace Glossary & FAQ Find Local Help For My Plan Search

Overview of Features

An education section offers definitions of terms & answers to frequently asked questions. A cursor hover feature is also present over terms (i.e. Premium, Deductible, etc.) in every application screen for quick consumer reference in the user's current page view.

Customers can contact support personnel via phone or in-application messaging for help in navigating the application. We support English & Spanish, the first & second national languages. A consumer can also click on *Find Local Help* for a list of community navigators in their area.



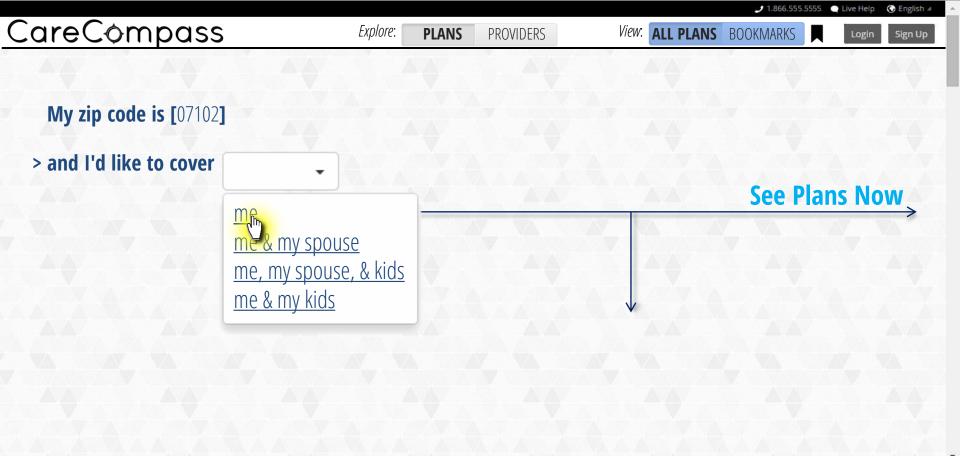
We support optional sign-up & login through our application along with social media avenues to provide consumers with an easy account creation and login process, after which they will have the ability to save plans, providers, and searches on a personal dashboard and share their preferences with their social network. Returning users may also login in order to refer back to their plan's benefits, visualize their selected plan's provider network, and rate plans and/or providers.



> My zip code is [type zip code]

Overview of Features

The customer starts their search by entering a zip code, which is the only required step before seeing offered plans in the *Plan View*. A zip code is required to identify the state from which plans will display and narrows the radius of search results as well as the proximity of providers displayed within each plan.



After providing a zip code, the user will be given the option to see plans directly or continue answering questions to better determine pricing & eligibility for a government subsidy. The consumer may skip all other steps except entering zip code if he/she wishes to view plans immediately.

Explore:

My zip code is [07102]

and I'd like to cover [me].

I'm [27] years old.

My family makes \$[25,000] per year.

There is [1] person in my tax household.

> Please only show me plans with [Doctor or Facility's name] in-network*



*type in a provider or facility's name to view only plans with your search criteria in network. This can be changed on the filter of the plan page, and may also be skipped to go directly to plans.

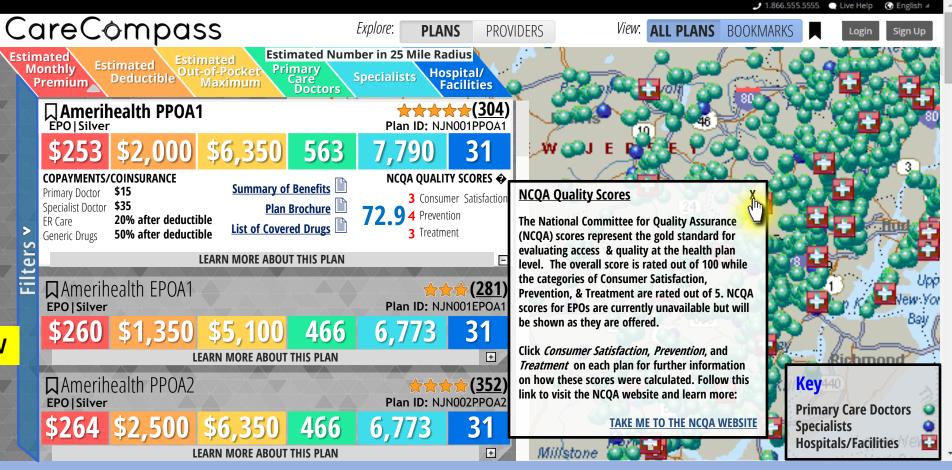
Overview of Features

As staying with an existing physician or within a familiar hospital system is a key component of plan choice for many consumers, we offer a feature which allows plans to be pre-filtered based on whether a provider or facility is in-network.

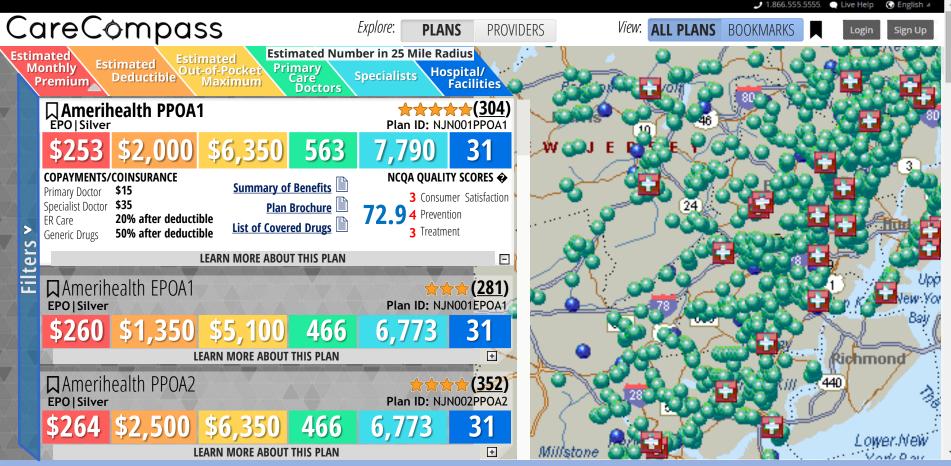
This filtering feature is accessible prior to viewing plans and again within the pop-out filter bar in the *Plan View*, and can be removed or changed at any time.



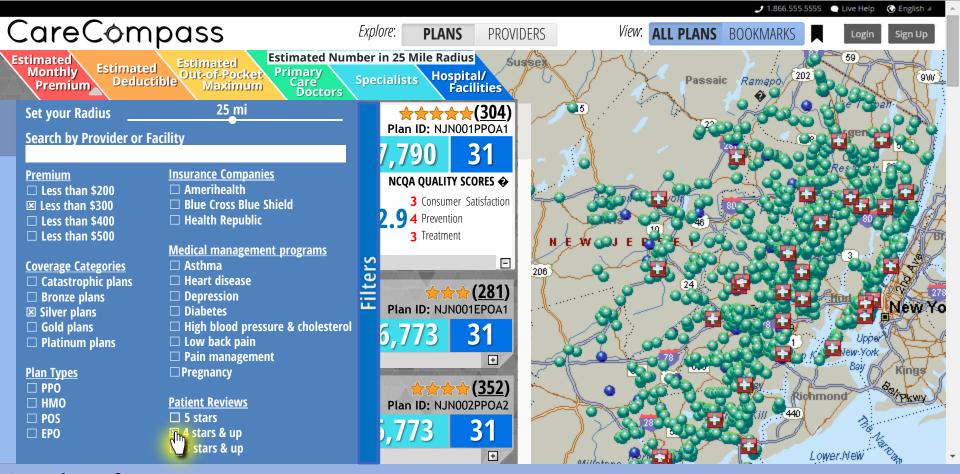
The income level and dependents information asked prior to the *Plan View* screen determines if a consumer is eligible for a federal subsidy. If a consumer does qualify for a cost-sharing subsidy (household income under 250% of the Federal Poverty Limit), a pop-up screen will display on the resulting *Plan View* indicating the consumer's eligibility and explaining that this subsidy can only be applied to Silver plans. If they select "Yes, show me Silver, subsidy-eligible plans first", Silver Plans will automatically display at the top of his/her search in the *Plan View* screen.



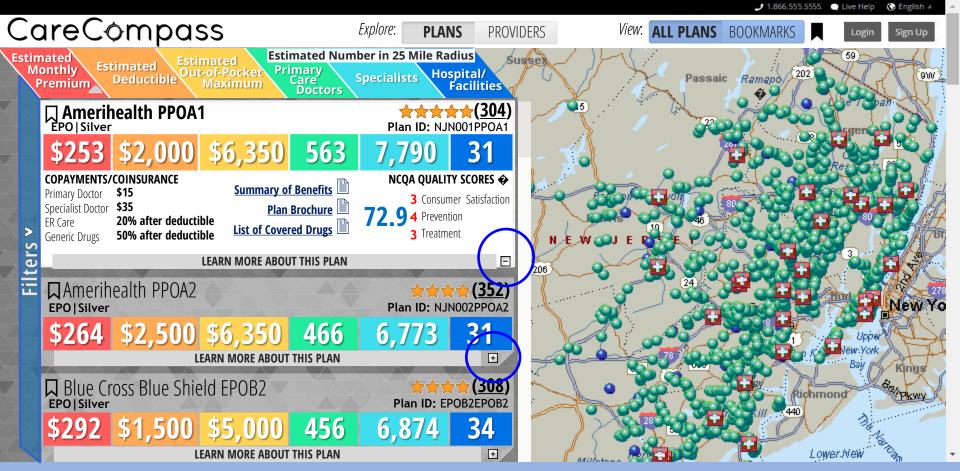
As many consumers are unfamiliar with the National Committee for Quality Assurance (NCQA), first-time users will see a pop-up explaining NCQA scores in their first interface with their *Plan View.* NCQA scores are the industry standard for evaluating access & quality standards amongst health. In our application, the overall quality score is depicted as a large blue number with preventive, treatment, and consumer satisfaction scores as small red numbers, all of which are displayed in the expanded view to avoid overwhelming the user with excessive numbers in the collapsed view. Once this pop-up is closed, it will not display again for the users at return visits (accomplished via dropping cookies on the user's computer) unless they click on the tool tip question mark icon.



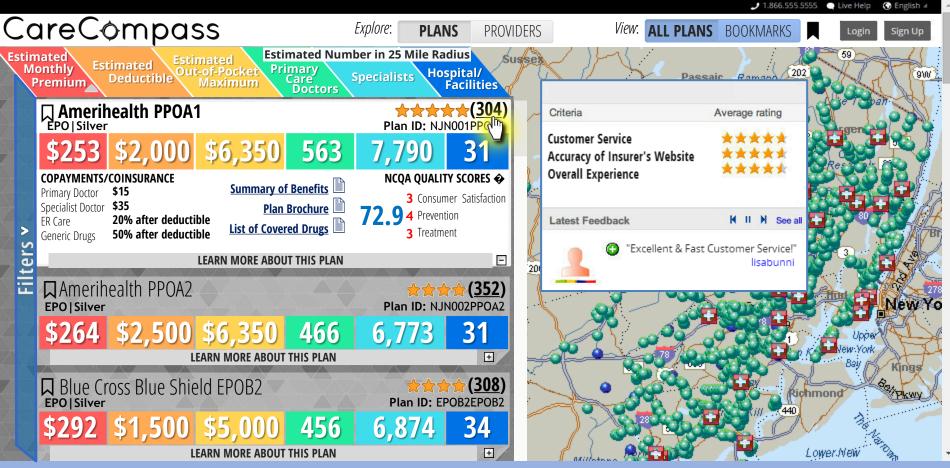
The *Plan View* screen allows consumers to compare plans by benefit design, cost, quality, and the estimated number of providers and facilities in network within a given search radius. When a consumer selects a plan, the providers and facilities within that network and in the chosen radius will display on the small map on the right hand side, allowing the consumer to quickly visualize the plan's provider network. We provided a count of only providers and facilities within a given radius of their zip code in order to provide consumers with the most useful scope of the compared provider networks relative to the customer's location as it is the area of a provider network most likely to be used by the specific consumer. In the future, Urgent Care and ER counts may also be depicted.



The radius from which provider and facility counts are generated is set at 25 miles by default, but can be adjusted by the consumer in the filter bar. For customers with highly specialized health care needs who may prefer to travel further for care, the radius can be extended in the *Plan View* filter and full network composition can be viewed in the *Provider View*. The filter bar further allows consumers to pare down their searches based on a variety of criteria, including pricing, coverage categories, plan types, medical management programs, patient reviews, and more.

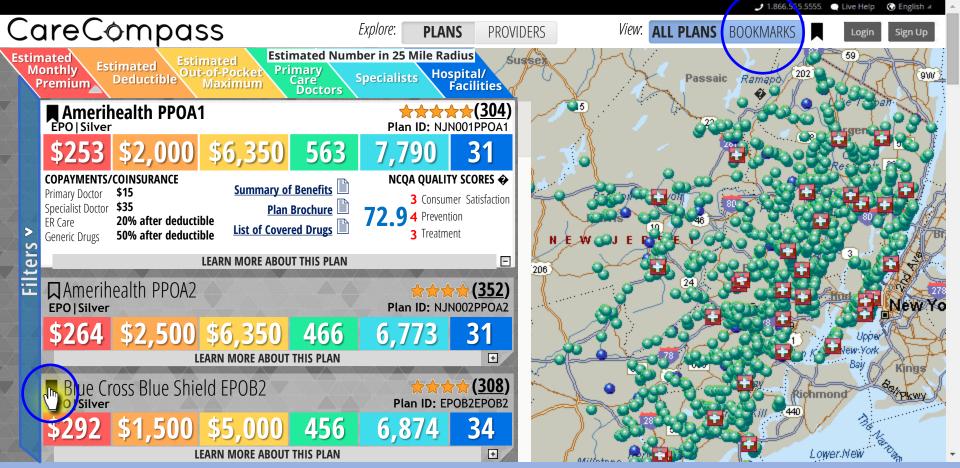


Plans can be collapsed to allow consumers to view up to 4 plans at one time or expanded to see greater detail about a plan of interest. We have designed our application so that 2 plans will always fit in one screen view for ease in comparison while still being able to evaluate many features of each plan's benefit design. Content in the collapsed view provides the most essential benefits metrics on pricing (premium, deductible, and maximum out-of-pocket) and information related to provider networks in their geographic region. This Information (premium, deductible, maximum out-of-pocket) is essential for a base-level reference when comparing the plan's provider network composition.

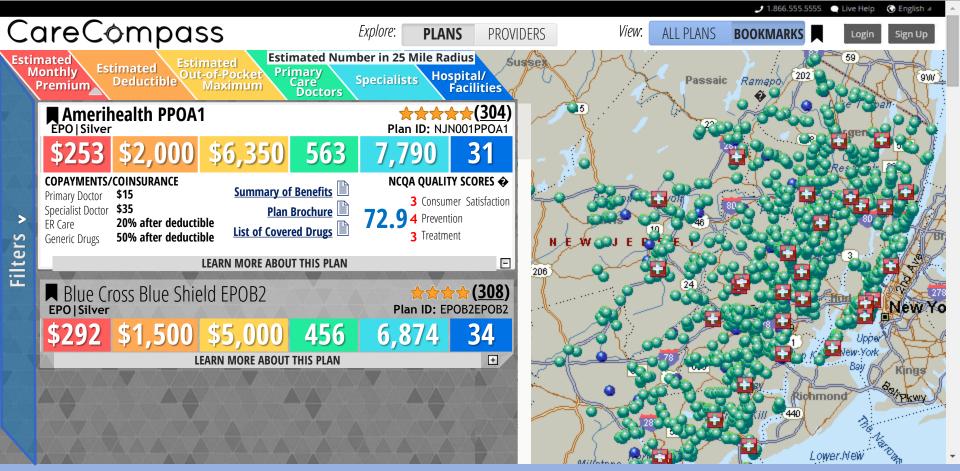


A crowd-sourced consumer feedback tool on the plan level offers a more experience-centric score to use in differentiating plans. It evaluates plans on a five-star scale on Customer Service, Accuracy of Insurer's Website and Information, and Overall Experience and averages these 3 ratings to create the star score visible on each plan card. A feedback box is also available to view specific health experiences that may not be adequately captured in a star score. The sample size of reviews is indicated to help consumers evaluate the accuracy of the star ratings listed. Consumer feedback data will be aggregated through follow-up emails, inquiries at login, and plan dashboard ratings by registered

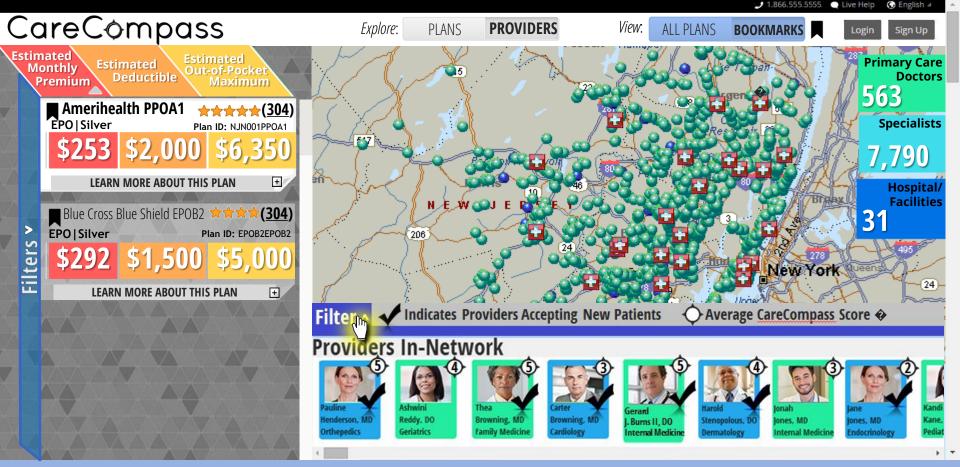
users. This registration requirement serves to ensure ratings and feedback are more reliable and accurate.



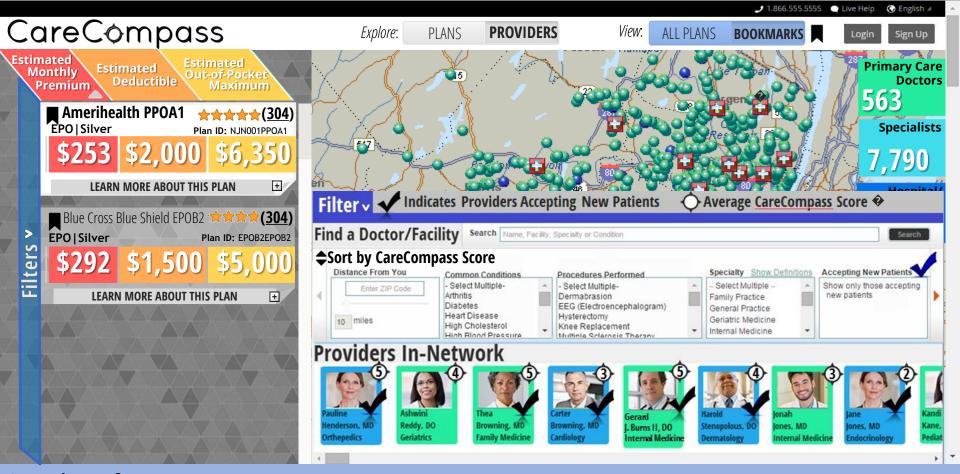
More advanced features offered in this tool include the ability to bookmark favorite plans and select the bookmark toggle button along the top header in order to view exclusively those plans previously marked by the consumer. This feature was added to help consumers progressively pare down plans and further review only those that fit their needs.



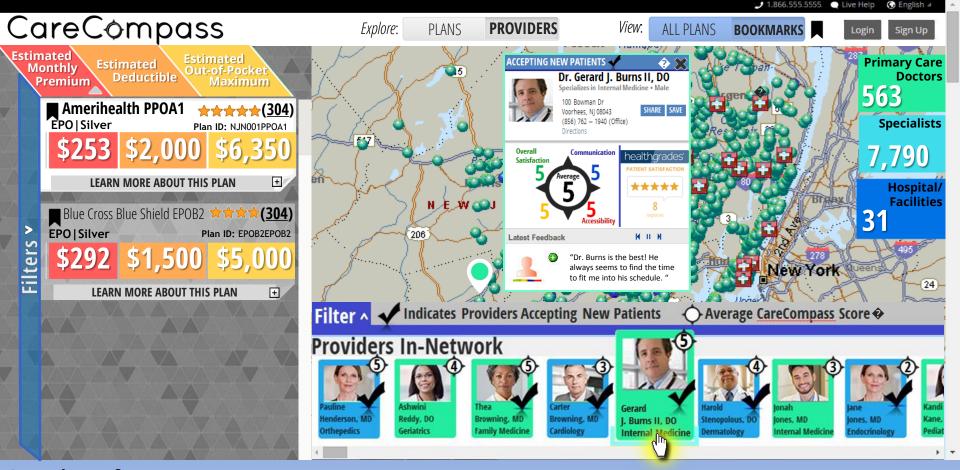
This *Bookmark* feature is operational in both the *Plan* and *Provider* views, enabling consumers to adjust their bookmarks based on both benefit and provider level data. Unless a consumer unbookmarks them, plans bookmarked in the *Plan View* will remain bookmarked in the *Provider View*, and vice versa.



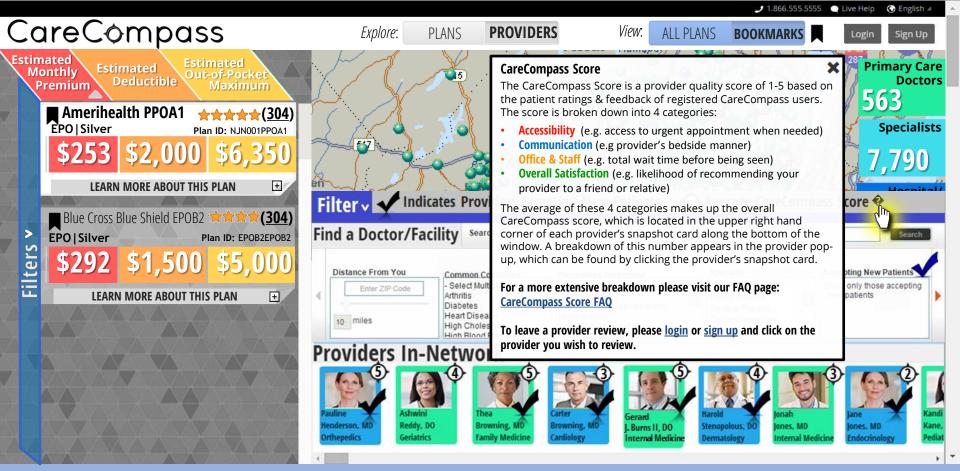
After selecting a plan, all providers in-network will be displayed on the large interactive map on the main screen, color-coded accordingly, as well as in a scrollable snapshot view of providers along the bottom of the page. Crowd-sourced CareCompass quality scores are displayed on each snapshot card, as well as a check mark indicator of whether the physician is currently accepting new patients or not.



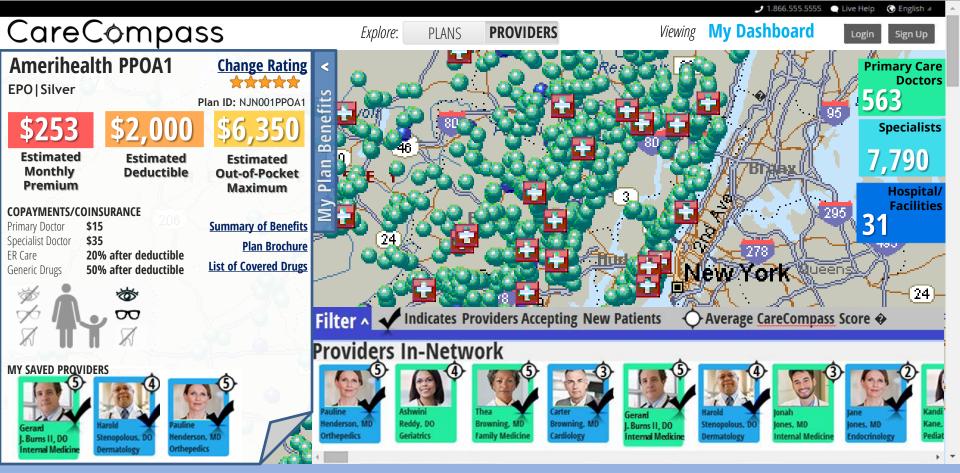
A filter will allow consumers to further examine network providers by specific conditions, procedures, and specialties. They are also able to change the distance requirement by changing the zip code. Conditions and procedures will select specialists that are most commonly associated with a particular condition or procedure. This feature allows consumers to quickly view the most important specialists they need according to their personal needs without having to research further.



On the interactive map, a green circle represents Primary Care providers, a light blue circle represents Specialists, and a dark blue hospital icon represents Hospitals and Facilities. The size of circles represent the size of a given provider group (Primary Care or Specialists). Clicking on a provider's scrollable snapshot card will display that provider's location on the map, along with basic contact details, a Healthgrades provider rating, and a Care Compass quality provider rating. The crowd sourced Care Compass quality data will eventually be the only displayed quality measure once the number of reviews is large enough.



This Care Compass quality score will incorporate the categories of Accessibility, Provider Communication,
Overall Satisfaction, and Clinical Quality, and will be aggregated from the feedback of returning CareCompass
users.



After consumers choose a plan, they will be invited to register as a CareCompass User (if they haven't already) and will then be able to quickly reference their chosen network 's benefit design, full network of providers, and saved providers, both in web and mobile format. With an account a consumer may also provide feedback and rate a plan and providers after returning to the application.