

Launch My Group

Quick reference guide

Launch My Group™ is an automated process done completely online.



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If this is your first time or you have not used Launch My Group in a while, and would like a refresher, the Launch My Group team can do a one-on-one session.

You can request a session by emailing **launchmygroup@humana.com**. Please give at least 24 hours' notice to schedule your one-on-one session.

For your one-on-one session, have your:

- ☒ **Sold case**
- ☒ **Member elections**
- ☒ **Group plan elections**
- ☒ **ACH information (if electing)**

For all other questions, call **855-330-5920**, Monday – Friday from 9 a.m. – 6 p.m., Eastern time. Launch My Group Specialists are standing by to assist you.

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Before you begin using Launch My Group

Confirm that your quote has been:

- 1 Updated with the enrolled census
- 2 Updated with sold plans

This will allow you to:

- ☒ Receive the final sold case documents for signature without delays
- ☒ Ensure that the group is receiving accurate rates prior to signing the Employer Group Application



Not sure how to do a quote update?

Contact your Humana Sales Representative or email easyrate@humana.com.



Benefit proposal requested for:

Humana Dental
Kaukauna, WI 54130

Sales Office:

Please contact your local sales office

Smart Test Agent

1100 Employers Blvd
Green Bay, WI 543440001

Sales Agent

Smart Test Agent
333-333-3331



Dental Summary												
Proposal for:		Get Your C.R. Quota		Quota #:		41507406-002		Agent/Agency:		Smart Test Agent		
State/County:		CA - Los Angeles		Effective:		4/1/2023						
SIC:		1399 - Miscellaneous General Merchandise										
Location type:		Single Site		Prepared: 2/2/2023								
Ref #	Dental plan	Quota % (est)	Quota % (act)	Payto % (est)	Subtable range	Revol amount	Status	Association	Employee revenue (est)	Employee revenue (act)	Spent (est)	Spent (act)
1	CA TRP (002) -	100.0000	100.0000	See the Summary	2/4/2023 - 3/31/2023		act		\$75,112	\$166,000	\$263,871	\$263,874



Benefit proposal requested for:

Humana Dental
Kaukauna, WI 54130

Sales Office:

Please contact your local sales office

Smart Test Agency

1100 Employers Blvd
Green Bay, WI 543440001

Agency

Smart Test Agent
333-333-3331

1 Identify your quote.

Before you log in to the Agent Portal, the first thing you should do is determine who the quote was produced for—an agent or the agency.

- **For an agent:**

If the quote was produced for an agent, use the agent username and password. You can determine who the quote was produced for on the quote. You will need to use the agent's password (not the agency password).

- **For the agency:**

If the quote was produced for the agency, use the agency username and password. If you don't know the agency password, speak to an administrator in your agency.




If you need help, call **855-330-5920**.



If you need help, call a Launch My Group Specialist, Monday – Friday, at **855-330-5920** from 9:00 a.m. – 6:00 p.m., Eastern time, or email **launchmygroup@humana.com**. Launch My Group Specialists are standing by to assist you.

Sign In

Sign in with your username and get access to key coverage information as well as useful member tools and resources.

Username 

jsmith@|

Password

2 Log in to Humana.com.

Start by logging in with the correct username and password.



If you are still having issues logging in, contact the Humana Web Team at **888-666-5733**, and they can help with login issues (forgotten passwords, etc.).

Please select your portal

For Your Retail Business

Vantage

For Your Commercial Business

Agent Portal

3 Go to the Agent Portal.

Once you have logged in, select the link that says “Agent Portal.”



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Quote, Enroll & Manage

Quote and enroll customers, create utilization reports and update enrollment. (2-100 subscribers)

[Request a Quote](#)

[View Current Businesses](#)

[Enroll Using Launch My Group](#)

[Visit Page →](#)

Pay & Bonuses

Learn about Leaders Club, Producer Partnership Plan, and update commission information.

[View Commissions Reports](#)

[Set up Direct Deposit](#)

[Leader's Club Qualification](#)

[Visit Page →](#)

4 Go to the enrollment section.

In the Agent Portal, under “Quote, Enroll & Manage,” select “Enroll Using Launch My Group.”



If you need help, call **855-330-5920**.

Quotes

[View Favorites](#) [Group Search](#) [Create a New Folder](#)

Enroll With LMG Filters ☒ View All Quotes ☐ View LMG-eligible Quotes

Group Name	Version	Status	Effective
TEST QUOTE	002	Quoted	6/1/2021
TEST QUOTE	002	Quoted	5/1/2021

Group search

To search for a group, select one of the criteria options listed below:

Quote criteria

Quote number

Group criteria

Group name

Status

Effective month

Effective year

Test provided

Branch name

5 Search for your quote.

Click on “Group Search” to find your quote. You can do this in one of two ways.

Option #1

Find quote via provided list

If your quote doesn’t auto-populate, be sure your search filter is set to “View All Quotes.”

Option #2

Search by quote number

Enter the 9-digit number found on your quote.



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Quotes

[View Favorites](#) [Default view](#) [Create a New Folder](#)

Enroll with LMG Filters: ☒ View All Quotes ☐ View LMG-eligible Quotes

Group Name	Version	Status	Effective Date	Version Create Date	Case Size	Multi-Loc	Move To Folder	View Quote	Edit	Notepad	Enroll with LMG
Planet Express	002	Quoted	6/1/2021	3/18/2021	5	N					Enroll
NecNET	001	Quote Incomplete	5/1/2021	3/11/2021	51	N					N/A
Sandler-Krupp Heavy Industries	005	Group Accepted	6/1/2021	3/18/2021	5	N					View LMG

6 Determine the status of your quote.

If the “Enroll” link does not appear for your quote, there are several common reasons.

As an example, row 2 is a group in incomplete status. The quote could be in underwriting review or may need to be updated.



If the quote you’re looking for isn’t in Account Manager, call Launch My Group at **855-330-5920**.

7 Click enroll.

When you click enroll, you will come to the welcome page. Follow the instructions found on the welcome page.

- Once the tabs have been completed (indicated by green checkmarks), you are ready to provide your member enrollment.
- There are three ways to enter member enrollment. You can find instructions for entering your member enrollment **here**.

Launch My Group™

Group Name: **MARCH TEST CASE** Quote Number: **663650801 - 002** Requested Effective Date: **05/01/2023**

Welcome!

Thank you for partnering with Humana and enrolling using Launch My Group. Below are some things to remember before you begin:

- If you need guidance, you can use the **Agent Guide** to find helpful tips on Humana’s business rules and a screen-by-screen walkthrough.
- Our Technical Support team is available between 8AM and 4:30PM CT at 1-855-330-5920 or LaunchMyGroup@humana.com. This



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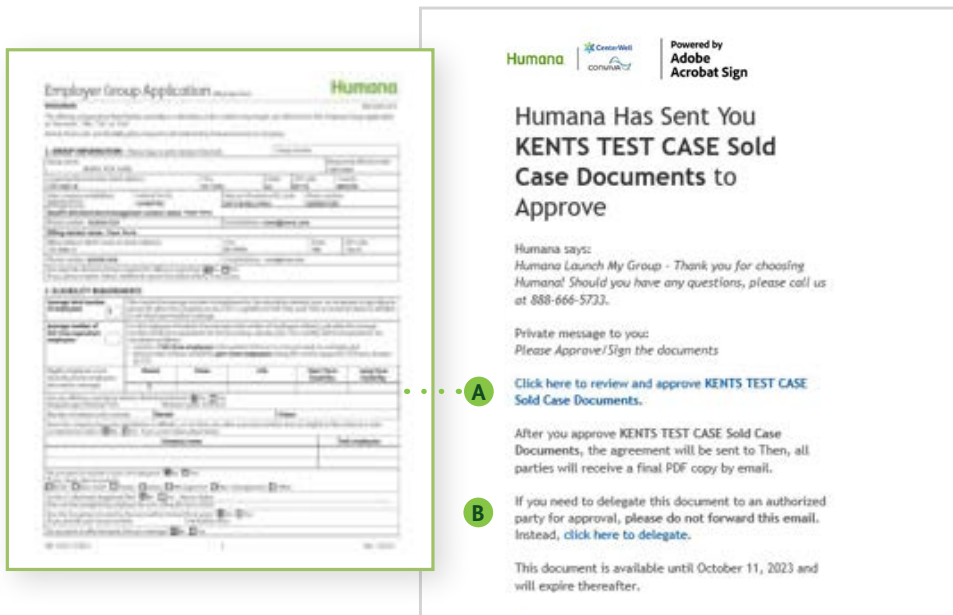
Launch My Group

Adobe Sign instructions



1 Receive an email.

The agent will receive an email prompting them to review and approve their paperwork. Only when it is approved will the paperwork move on to the employer. Both approvals are necessary to process the paperwork.



2 Open the email.

- A** Link A leads to the paperwork.
- B** If someone other than the email recipient needs to sign, use **link B** for the delegate option. You'll be asked to enter the email address and a brief message when you delegate. **Forwarding the email will not allow the next person to complete the signature process.**



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Humana | Powered by Adobe Acrobat Sign

KENT'S TEST CASE Solid Case Documents

Read Agreement
Delegate approval to another
Decline to approve
Clear document data
View history
Download PDF
Legal Notices

Employer Group Application

Group number: 123456789

Requested effective date: 01/01/2023

State: NY City: New York ZIP code: 10001

Phone number: 212-555-1234

Commission split: 10% Yes ☒ No ☐ (Required 100%)

General Agency (complete only if agency involved in sale)

General agency information pertains to: ☐ Agency of Record ☒ Selling Agent

Name (print or type): John Doe Tax ID/Good Security Number/Humana Agent Number: 123456789

As the Agent, I acknowledge that I am responsible to meet with the Group submitting the Employer Group Application in order to fully and accurately represent the terms and conditions of the plans and services of the offering or insurance policy at one of its subsidiaries. These provisions are available to me and the Group in the Regulatory Pre-Enrollment Disclosure Guide or other plan literature. Additionally, I acknowledge that I am responsible for providing the Group a copy of their completed and signed Employer Group Application. I certify I Real I have made the disclosures required by NY Statute §32.11.

Signature: Click here to sign

Email: john.doe@humana.com

3 Review the paperwork.

If you find any errors, go to “**Options**” in the top left corner of the email, select “**Decline to approve**” and include the reason and the correct information, if necessary, in the comments.

Humana will receive a notification that the documents have been canceled, make the updates and resend updated paperwork through the Adobe Acrobat Sign electronic process again, starting it over.



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Employer Group Application (all group word)

WISCONSIN

The offering(s) completed listed below, individually or collectively, as the content may require, are referred to in this Employer Group Application as "Humana", "We", "Us", or "Our".

Dental, Vision, Life, and Disability plans issued or administered by Humana Insurance Company.

I. GROUP INFORMATION - Please type or print clearly in black ink.

Group name: **WEN'S TEST CASE** Group number: **99999999**

Corporate/Other business street address: **123 main st** City: **OMAHA** State: **NE** ZIP code: **68111** County: **Nebraska**

Date company established: **01/01/2000** Federal Tax ID: **123456789** Nature of business/Service: **SALES-SHOPPING** Phone number: **800-555-1234**

Benefit Administrator/Management contact name: **Nape Nape** Email address: **nape@nape.com**

Billing contact name: **Nape Nape** Email address: **nape@nape.com**

Billing address (if not same as street address): **123 main st** City: **OMAHA** State: **NE** ZIP code: **68111**

Phone number: **800-555-1234** Email address: **nape@nape.com**

Commission split: ☒ No ☐ Yes (specify 100%) Commission split: ☒ No ☐ Yes (specify 100%)

General Agency (complete only if agency involved in sale)

General agency information pertains to: ☒ Agency of Record ☐ Selling Agent

Name (print or type): **John Doe** Tax ID/Good Security Number/Humana Agent Number: **123456789**

As the Agent, I acknowledge that I am responsible to meet with the Group submitting the Employer Group Application in order to fully and accurately represent the terms and conditions of the plan(s) and services of the offering or insurance policy, or one of its subsidiaries. These provisions are available to me and the Group in the Regulatory Pre-Enrollment Disclosure Guide or other plan literature. Additionally, I acknowledge that I am responsible for providing the Group a copy of their completed and signed Employer Group Application. I certify I Read I have made the risk disclosure required by WI Statute 635.11.

Writing Agent signature: **Signature** [Click here to sign](#)

Email: **john.doe@humana.com**

Type your signature here

4 Sign the paperwork.

If the paperwork is approved, scroll to **"Click here to sign"** and select.

Type your signature in the screen that appears.

Then select **"Click to approve."** This finalizes the signature and moves the paperwork to the next step.



If you need help, call **855-330-5920**.



IMPORTANT!

After the agent approves the paperwork, the same email will be sent to the employer, who must follow the same process. Both the agent and the employer must approve the paperwork to keep the process moving.



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