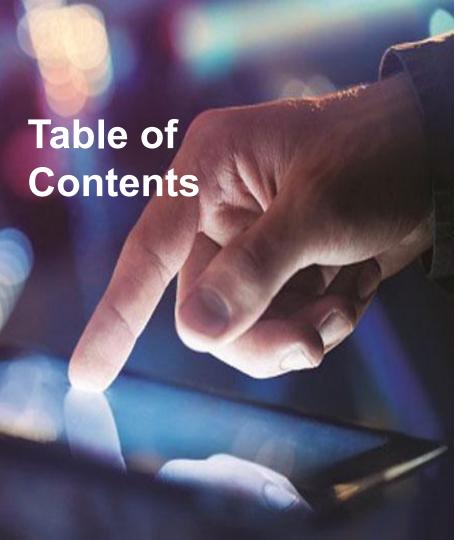




CM&F Partner Portal Tipsheets



- 1. Portal Intro
- 2. <u>Getting Started: Portal Registration</u>
- 3. Getting Around:
 - a. My Policies and Renewals
 - b. My Applications
 - c. <u>Creating New Applications</u>
 - d. Adding Users to Your Account
- 4. New Feature: Broker Referral Link
- 5. New Feature: Sign your client up for the portal
- 6. New Feature: Certificate Creation

CM&F Group, Inc. Partner Portal

- Broker / Producer
- Nurse Registry / Agency
- Practice Administrator

The portal is designed to give our Partners:

- Access to their Clients, Employees, or Independent Contractors Policy documents
- The option of online Renewal
- The ability to make policy changes or cancellations (functionality to be added at a later date)





Portal Registration

CM&F Group, Inc. Partner Portal

All CM&F Partners should have received an email which asks them to click on a link, type in their username (provided via email), and set up a new password.

If you did not receive this email OR if the email you received signed you up to the incorrect portal:

Please reach out to <u>info@cmfgroup.com</u> with your Brokerage/Agency/Registry/Practice name, the name of an Administrator Contact (chosen by you), and an email address. If you signed up for an incorrect portal you should let us know in this email. We will forward a new registration link within 24 hours.

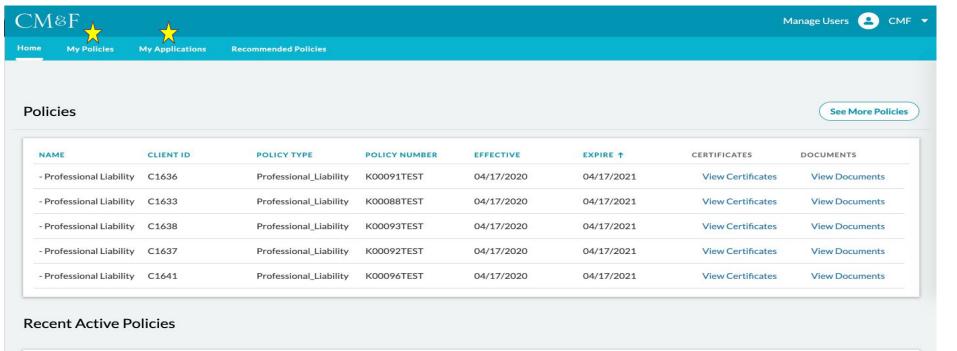
The Administrator Contact will solely be used to set up additional portal access to other Producers or Employees associated with your Company. The actual Policyholders (Insureds) will get access to their own portals, so they should not be given access here.

We have the ability to offer a personalized Link that you can send to new applicants, so that they can apply for coverage on their own. You can email us and request the "Broker Referral Link." As long as the applicant uses that Link to bind coverage they will be coded to your Brokerage/Agency/Registry/Practice.





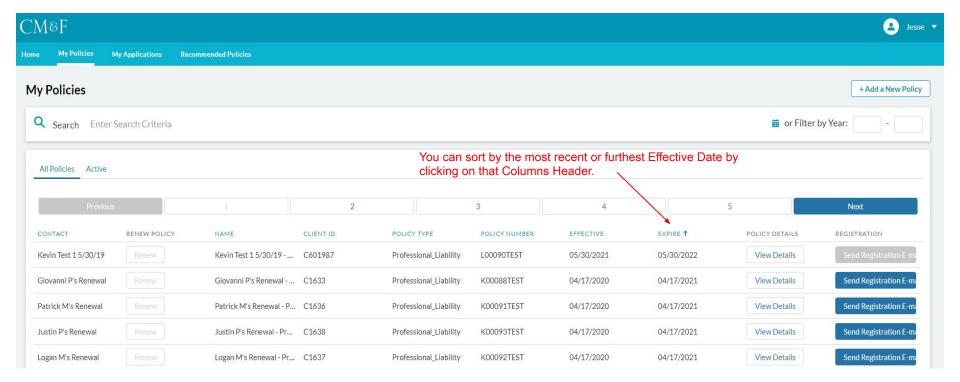
Navigating the Portal - Home and My Policies Screens



NAME	CLIENT ID	POLICY TYPE	POLICY NUMBER	EFFECTIVE	EXPIRE ↑	CERTIFICATES	DOCUMENTS
- Accident Individual	C1641	Accident	IOAL03810000023	04/22/2019	04/22/2020	View Certificates	View Documents

The Home Screen is an overview of the Portal where you can see Recent Policies or Active Applications.

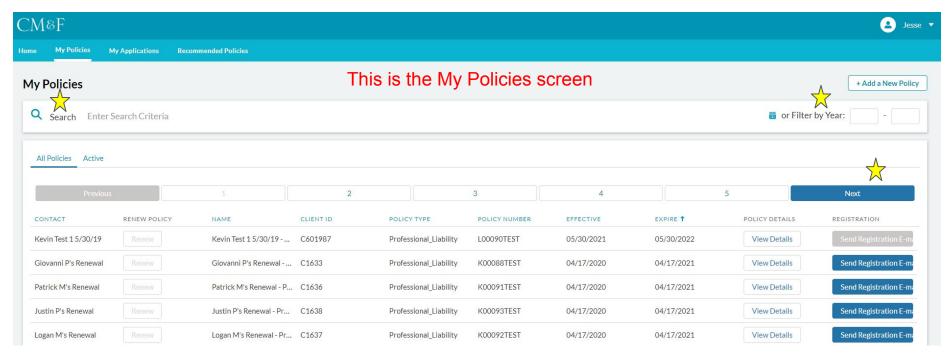
You can click the My Policies button at the top to view ALL policies and My Applications to view ALL Applications.



You can view All Policies or toggle to see only Active Policies.

If the Renew button is active you can use it to renew that Insured's Policy. This button will be available 95 days prior to the Policy Expiration Date.

You can view Policy Details or send your client a Registration Email, so they can create their own Insured/Client Portal account.



Use the Search bar to find a specific Insured quickly. Please Note: the search is currently case sensitive, so you will have to be careful when typing in the Insured name or policy number.

You can also Filter by Year at the top right.

Finally, you can move between pages (if you have multiple policies) by clicking the numbered columns or Next.

Home My Policies

My Applications

Recommended Policies

MY POLICIES > POLICY K00150TEST

ı	Name	ClientId	Policy Type	Policy Number	Effective	Expire
	Renewalreactive 423 - Professional Liability	C2265	Professional_Liability	K00150TEST	2019-04-23	2020-04-23

Request a Policy Change

Certificates of Insurance

Policy Documents

Renewal Invoices

Payments

Request a Policy Change

To make changes to your policy details submit an e-mail to us. **Submit Email Request**

If you selected View Details for a Client on the previous page - you will be taken to this screen where you can submit an Email Request for that Client, such as a Policy Change, view issued Certificates of Insurance or Policy Documents, etc.

Wyatt ▼

Home

My Policies My Applications

Recommended Policies

MY POLICIES > POLICY K00150TEST

Policy Type Policy Number Name ClientId Effective Expire Renewalreactive 423 - Professional Liability C2265 Professional_Liability K00150TEST 2019-04-23 2020-04-23

Request a Policy Change

Certificates of Insurance

Policy Documents

Renewal Invoices

Payments

TITLE

Policy Documents

Policy issuance document

Policy Issuance

DOCUMENT TYPE

ACTION

View Document

Click the links to download any policy documentation

TITLE

Forms and Endorsements

Workplace Liability Insuring Agreement - Occurrence

ACTION

View Document

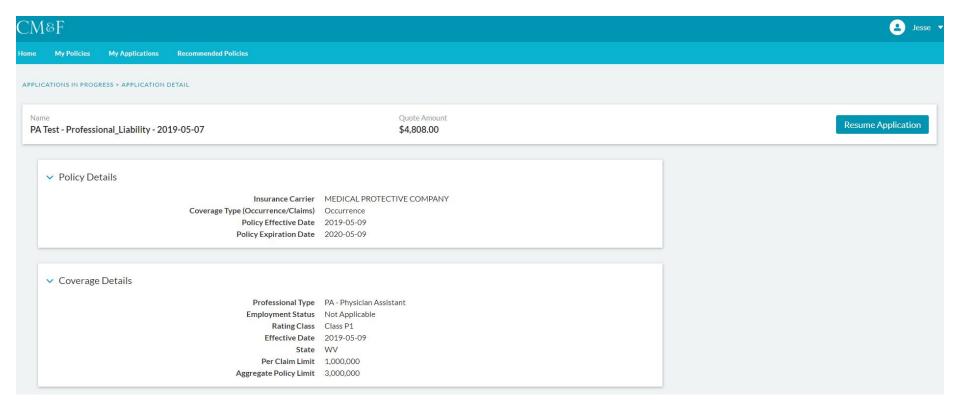




Navigating the Portal - My Applications Screen

My Applications **Recommended Policies**

Search Enter	Search Criteria		Resume an in-progress application					
Applications In I	Progress							
CONTACT	CLIENT ID	APPLICATION TYPE	QUOTE AMOUNT	DETAILS	RESUME			
test test	C575	Professional Liability	\$804.00	View Details	Resume Application			
test test	C580	Professional Liability	\$804.00	View Details	Resume Application			
test test	C574	Professional Liability	\$804.00	View Details	Closed Application			
test test	C573	Professional Liability	\$102.00	View Details	Resume Application			
				View Details	Resume Application			
				View Details	Resume Application			
Niki Sandhu2	C553	Professional Liability	\$102.00	View Details	Closed Application			
test test	C548	Professional Liability	\$75.00	View Details	Resume Application			
Admin's Contact	C543	Professional Liability	\$75.00	View Details	Resume Application			



Selecting the View Details button on the previous screen will bring you here. You can quickly review the Policy or Coverage Details for the open Application here.





Starting a New Application

Recommended Policies

Recommended Policies

Open the "Recommended Policies" tab to start an application for a new or an existing client

Start an application for a

New Client

Existing Client

My Policies

My Applications

Recommended Policies

Recommended Policies

Use New Client and input all Client information.

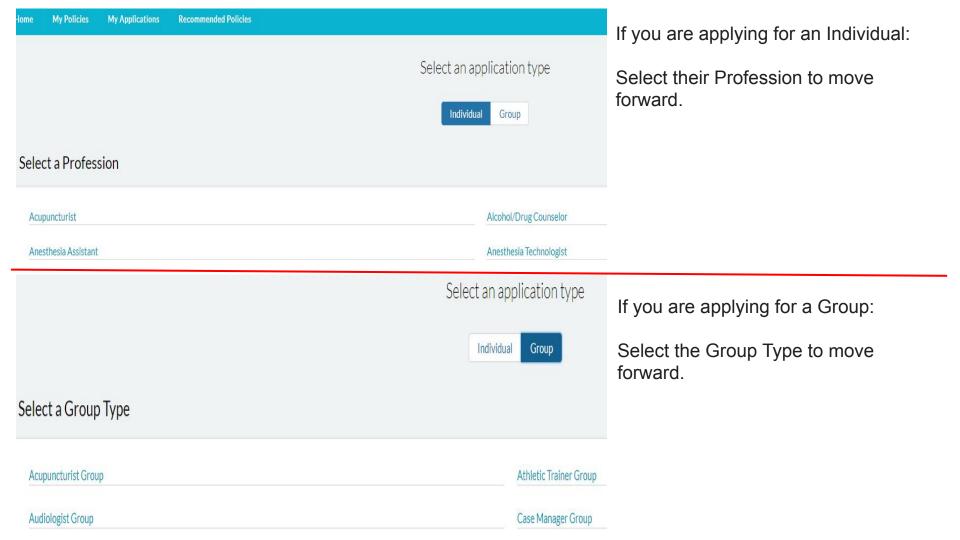
If this is for an Individual applicant - you will put their name, contact information, and address here.

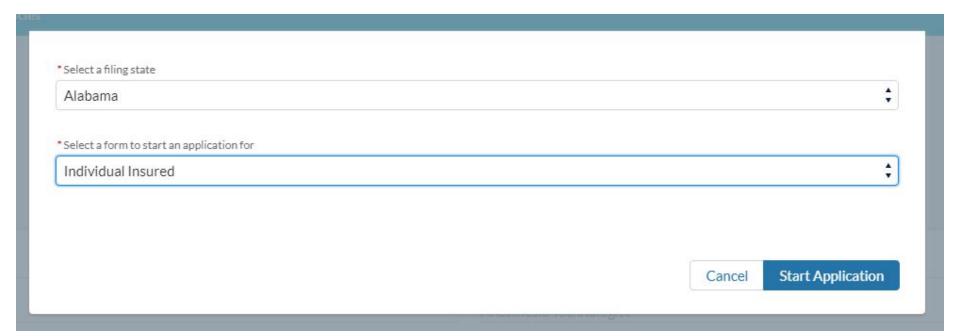
If this is for a Group applicant - you will fill this out using a point of Contact for that group with the groups mailing address.

New Client	Existing Client
Client I	nformation
*First Name	*Street Address
Wyatt	
*Last Name	* State
	New York
Title	*City
Mr.	NYC
Phone	* Zip Code
	10016
Email	
	Application

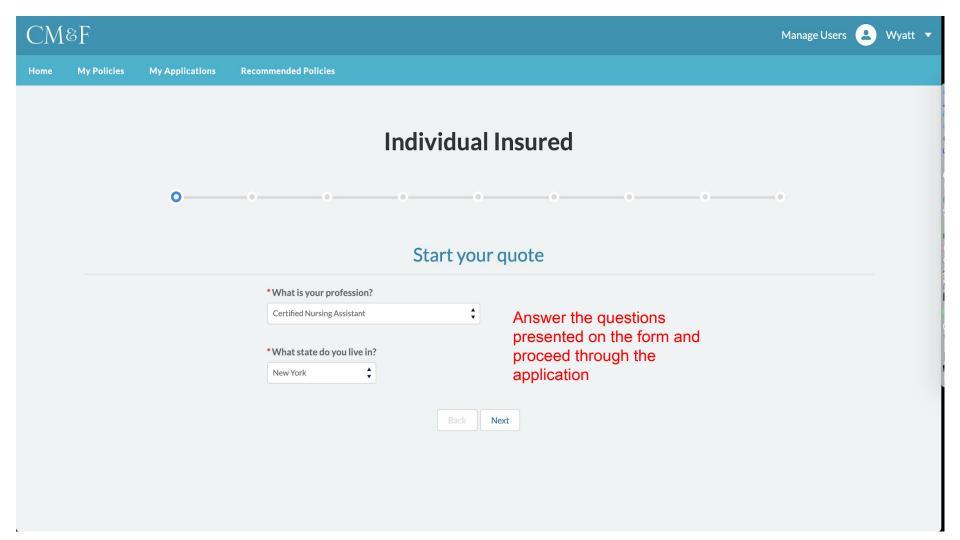
Important Note:

If you do not want the client to receive email notifications or if you want to be the main contact for the client you will have to put YOUR email address here. All of the other information should be the clients.





You will now select the State that the Individual or Group is located in, select Individual or Group Insured, and then you will click Start Application.



Home

My Policies My Applications **Recommended Policies**

Individual Insured

Professional Liability: \$1,000,000 / \$6,000,000 **Annual Premium** \$89.00 • Taxes and Fees: \$0.00 • Premium: \$89.00

> Professional Per Claim Limit: 1,000,000 Professional Aggregate Limit: 6,000,000

> > **Apply**

Details

Scroll to see quote options (different Limits of Liability that we offer). If you do not see the Limits that you require you can email info@cmfgroup.com and we will check to see if they are available in your State.

View further details of the

quote

State: Per Claim Limit:	N \$1,000,00
Aggregate Limit:	\$6,000,00
Coverage Breakd	lown
Insurance Carrier:	Allied Individual - RR
Coverage Type:	Occurrence
Policy Effective Date:	2019-04-2
Policy Expiration Date:	2020-04-2
Per Claim Deductible:	No deductible
Additional Covera	ages
Assault Upon You Per Claim Limit:	\$25,00
Assault Upon You Aggregate Limit:	\$25,00
First Aid Per Claim Limit:	\$15,00
First Aid Aggregate Limit:	\$15,00
Medical Payments Per Claim Limit:	\$25,00
Medical Payments Aggregate Limit:	\$100,00
Deposition Fees Aggregate Limit:	\$10,00
Deposition Fees Per Claim Limit:	\$10,00
Administrative Hearing Expense Per Claim Limit:	\$25,00
Administrative Hearing Expense Aggregate Limit:	\$100,00
Sexual Misconduct Expense Per Claim Limit:	\$25,00
Sexual Misconduct Expense Aggregate Limit:	\$25,00
Loss of Earnings Per Claim Limit:	\$2,50
Loss of Earnings Aggregate Limit:	\$35,00
HIPAA Proceeding Expense Per Claim Limit:	\$25,00
HIPAA Proceeding Expense Aggregate Limit:	Apply for the quote with the \$25,00
	Limits of Liability that you

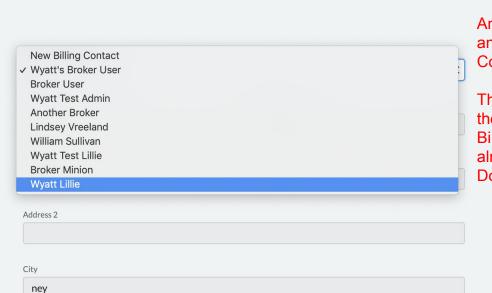
Home

My Policies

My Applications

Recommended Policies

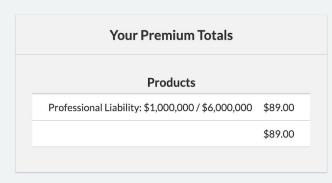
Individual Insured

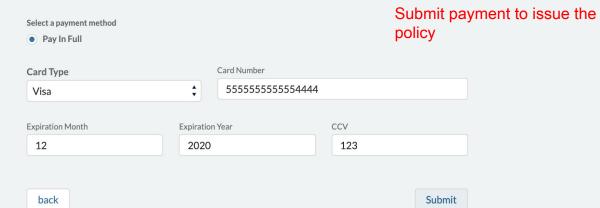


Answer additional questions and select the correct Billing Contact.

The Billing Contact will be the Card Holder. Input a new Billing Contact if they are not already listed in the Drop Down Menu.

Professional Per Claim Limit: 1,000,000 Professional Aggregate Limit: 6,000,000





Home

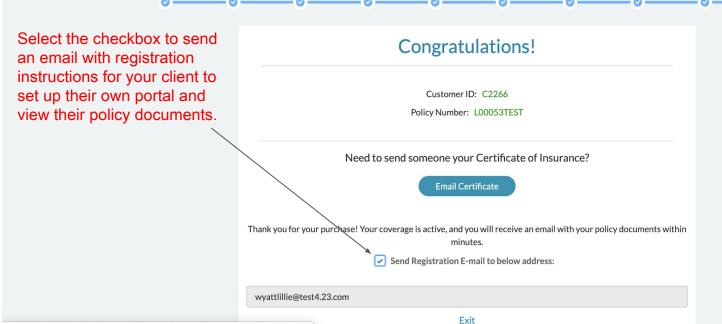


My Policies

My Applications

Recommended Policies

Individual Insured







Adding additional Users to your Portal

My Applications

Recommended Policies

Click Manage Users to set up additional users in your portal

My Policies

Q Search Enter Search Criteria

iii or Filter by Year:

+ Add a New Policy

Active All Policies								
CONTACT	NAME	CLIENT ID	POLICY TYPE	POLICY NUMBER	EFFECTIVE	EXPIRE ↑	POLICY DETAILS	RENEW POLICY
Renewalreactive 4	Renewalreactive 4	C2265	Professional_Liabil	K00150TEST	04/23/2019	04/23/2020	View Details	Renew
Lindsey Test 17	Lindsey Test 17 - P	C1600	Professional_Liabil	K00076TEST	04/17/2019	04/17/2020	View Details	Renew
activerewalbroker	activerewalbroker	C1599	Accident	IOAL0381000001	04/17/2019	04/17/2020	View Details	Renew
Lindsey Test 12	Lindsey Test 12 - P	C1223	Professional_Liabil	N00003TEST	04/16/2019	04/16/2020	View Details	Renew
Lindsey Test 13	Lindsey Test 13 - P	C1580	Professional_Liabil	K00072TEST	04/16/2019	04/16/2020	View Details	Renew
activerewalbroker	activerewalbroker	C1599	Professional_Liabil	K00074TEST	04/16/2019	04/16/2020	View Details	Renew
test test	test test - Professi	C1602	Professional_Liabil	K00078TEST	04/16/2019	04/16/2020	View Details	Renew



My Policies **Recommended Policies**

MANAGE YOUR USERS HERE

Related Contacts (6+)				
ONTACT NAME	ACCOUNT NAME	TITLE	EMAIL	
roker Admin	Test Broker Firm			
Vyatt Test Admin	Test Broker Firm		wyattlillie=ibm.com@example.com	
nother Broker	Test Broker Firm		funkytown@test.com	
Vyatt's Broker User	Test Broker Firm			
Vyatt Test Lillie	Test Broker Firm		wyattlillie@gmail.com	
roker Minion	Test Broker Firm		brokerminion@test.com	

Open Activities (0)

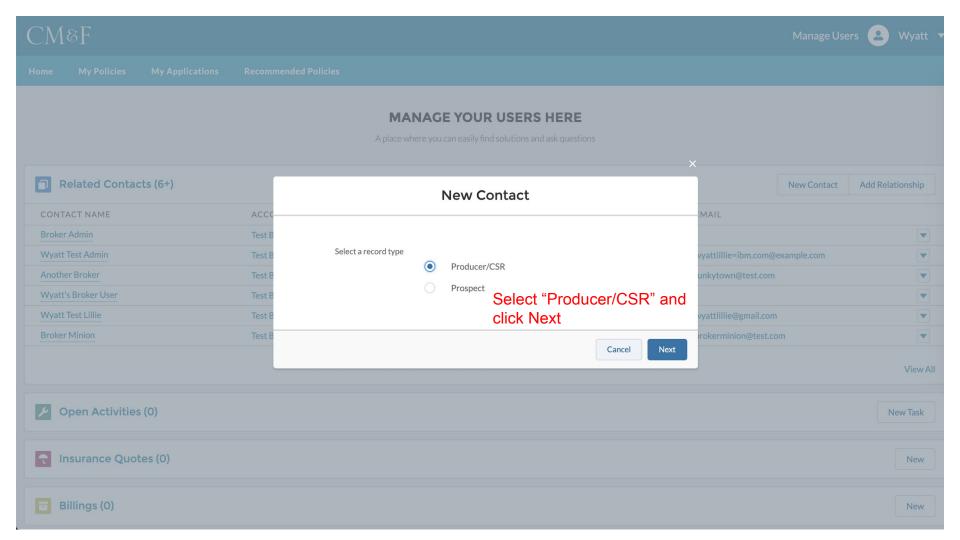
New Task

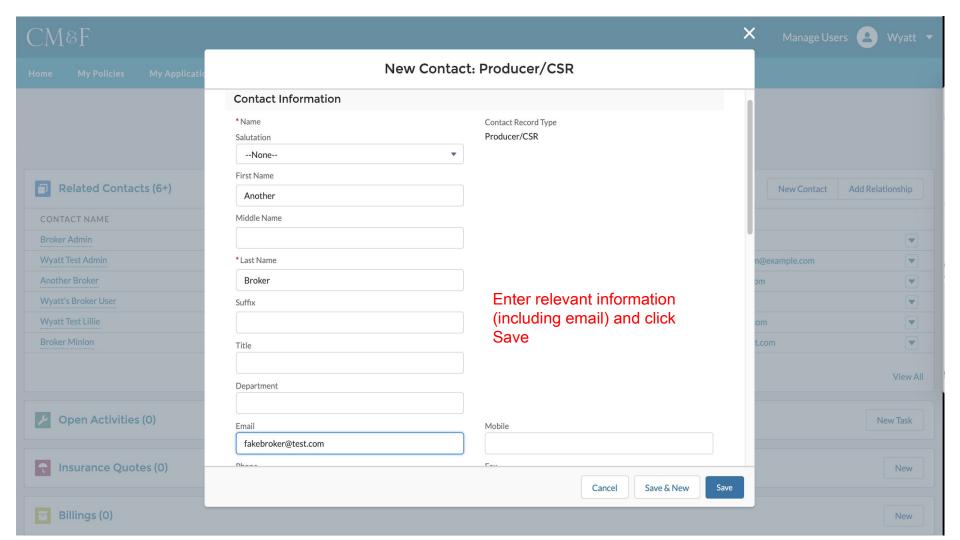


New

Billings (0)

New





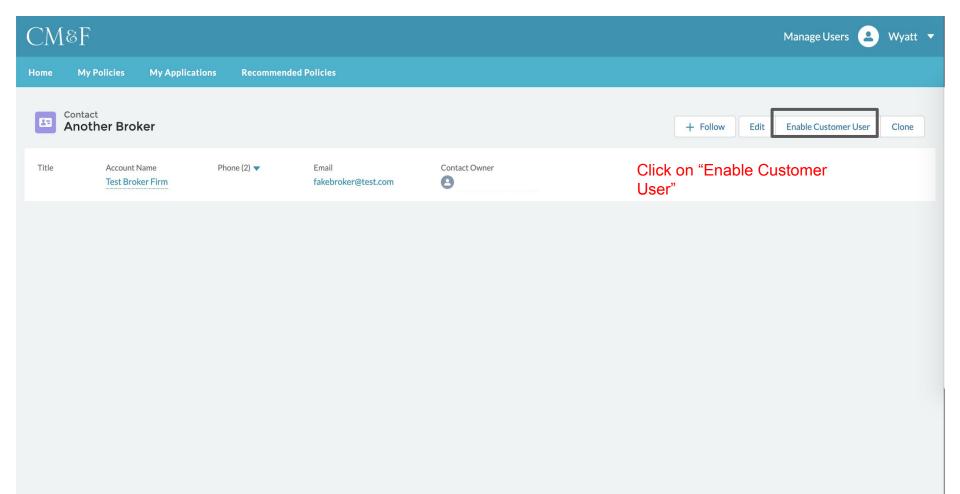


My Policies

My Applications

Recommended Policies

	ints > Test Broker Firm ated Contacts										New Contact	Add Relationsh	nip
11 iter	ns • Sorted by Last Name • Upda	ated a few	seconds ago									\$ ▼	G
	CONTACT NAME	~	ACCOUNT NAME	,	/ TITLE	~	EMAIL	~	PHONE	~	ROLES	~	
1	Broker Admin		Test Broker Firm									•	
2	Wyatt Test Admin		Test Broker Firm				wyattlillie=ibm.com	@example.com				•	
3	Another Broker		Test Broker Firm				funkytown@test.co	m					
4	Another Broker		Test Broker Firm	Click	on the User's N	lame	fakebroker@test.co	m				V	
5	Wyatt's Broker User		Test Broker Firm									•	
6	Wyatt Test Lillie		Test Broker Firm				wyattlillie@gmail.co	om				•	
7	Broker Minion		Test Broker Firm				brokerminion@test.	com				•	
8	Cal Sullivan		Test Broker Firm				csullivan@cmfgroup	o.com				•	
9	William Sullivan		Test Broker Firm				wsullivan@test.com					•	
10	Broker User		Test Broker Firm									V	





Wvatt

ome My Polici

My Application

Recommended Policie

User Information				= Required Information
Time Zone (G Locale Er Language Er Alias abr	tebroker@test.com EMT-04:00) Eastern Daylight nglish (United States) nglish rok tebroker	Click "Save" and your user will receive an email with instructions on how to register	Email Encoding Role User License Profile Active Generate new password and notify user immediately	General US & Western Europe (ISO-8859-1, ISO-LATIN-1) Test Broker Firm Customer User ICustomer Community Plus Login Broker User i
Contact Information				
First	Another		Email	fakebroker@test.com
Middle I			Phone	
Last	Diokei		Extension	
	Suffix		Fax	
	Title		Mobile	
Address Information				
Address illioillation				
	Street			



New Feature: Broker Referral Link



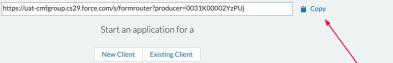
My Applications

Recommended Policies

New Quote

Access your Broker Referral Link from the **Recommended Policies** Page

Please Copy and Paste this Application Link into your email correspondence with your client in order for them to Apply for coverage independently while you get credit for the referral:



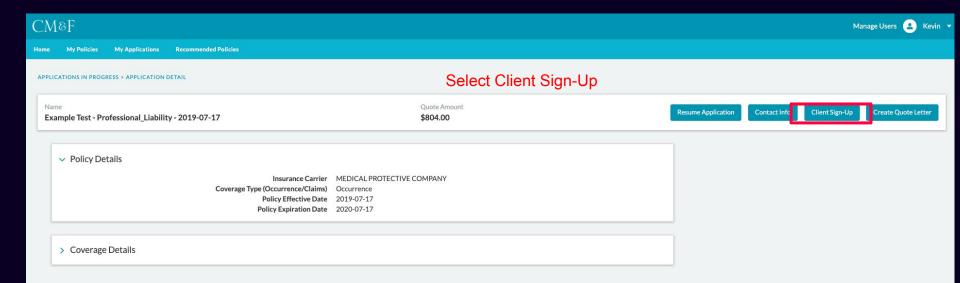
Copy and Paste the link to send to your client

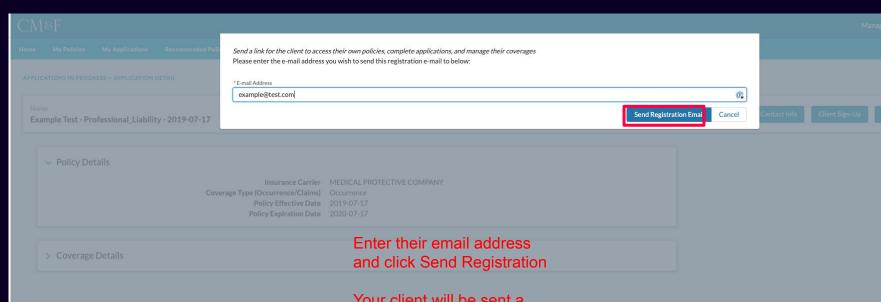
Note: This link will only work for clients. Brokers that are logged into the portal will get an error message if they try to follow this link



New Feature: Sign your client up for the portal to manage their own policies and resume applications





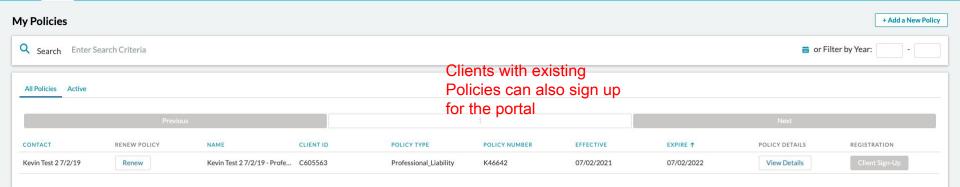


Your client will be sent a link to sign up for the portal. They can resume any applications you have started for them from the "My Applications" Page





My Policies My Applications Recommended Policies









My Policies

My Applications

MY POLICIES > POLICY K46642

Name ClientId Policy Type Policy Number Effective Expire **Edit Contact** Kevin Test 27/2/19 - Professional Liability C605563 Professional_Liability K46642 2021-07-02 2022-07-02

Request a Policy Change

Certificates of Insurance

Policy Documents

Renewal Invoices

Payments

Request a Policy Change

To make changes to your policy details submit an e-mail to us. **Submit Email Request**

If they have already registered - the button to sign them up will be grayed out





New Feature: Certificate Creation





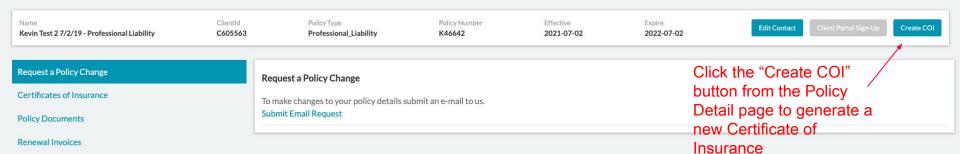
Payments



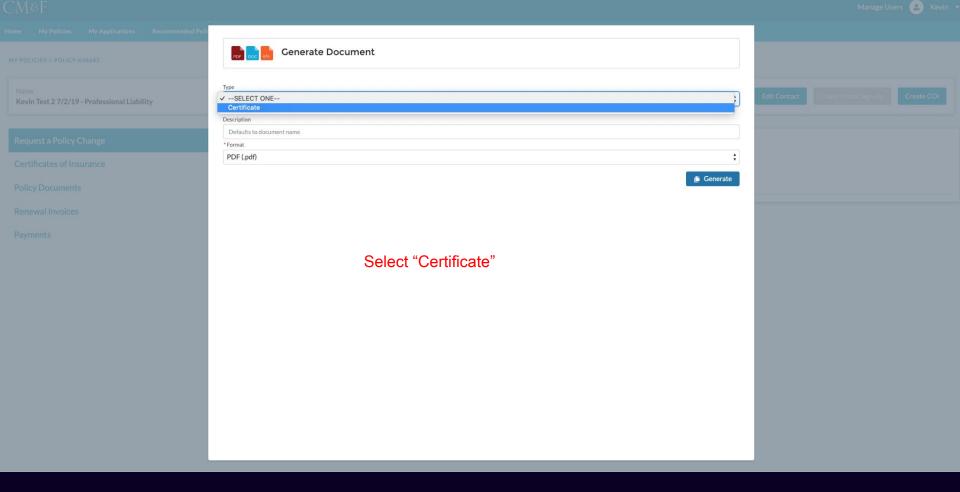
My Policies

My Applications

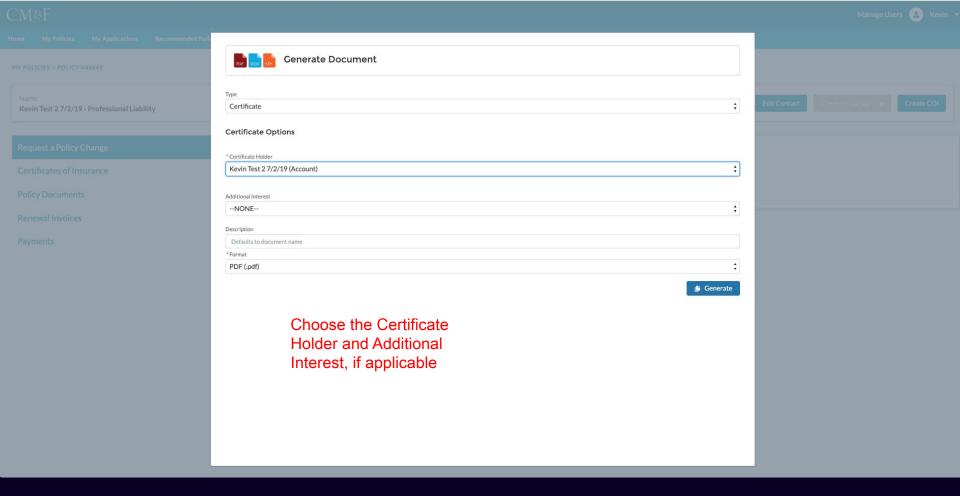
MY POLICIES > POLICY K46642

















	Type Certificate	
est 2 7/2/19 - Professional Liability	Certificate Options	
ist 2 // 2/17 - Professional Liability	* Certificate Holder	Choose the option to "Add
	Add a Certificate Holder	a Certificate Holder from
		the drop down to add a
	Create New Certificate Holder	different Certificate
		Holder's information
	Full Name	Tiolder 5 information
	Example Certificate holder	
	1000	
	Address 1 Address Example	City
	Address 2	State
	Add 655 Z	NY
	ZIP/Postal Code	
	10000	
	Additional Interest	
	NONE	
	Posterior	
	Description Defaults to document name	
	*Format	
	PDF (.pdf)	

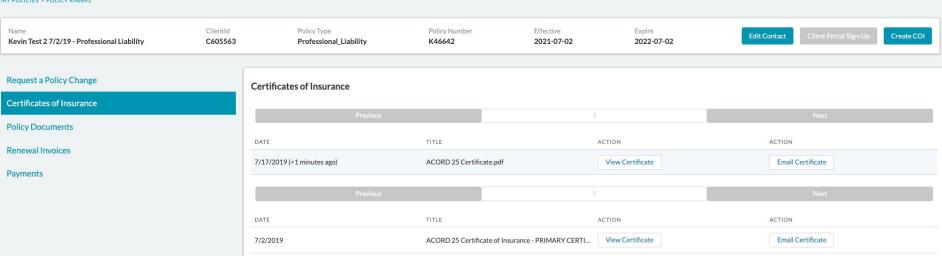




My Applications

Recommended Policies

MY POLICIES > POLICY K46642



The new certificate will show in the "Certificates of Insurance" tab on the left

