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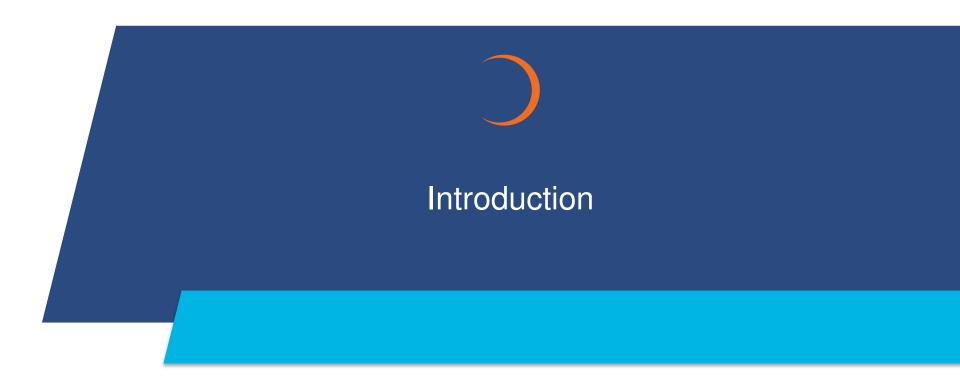
Making Better Connections: System Integrations with HR, Benefits, Payroll and More

Thomas Leishman and Lisa Reese



Agenda Introduction **PlanSource Integrations Completed Integrations** Integrations In Progress Strategy and Roadmap Integrate With PlanSource Q&A







What is an API?

Introduction





What are the Benefits of an Integration?

Introduction



Enhanced user experience



Standardized practices



Improved automation capabilities



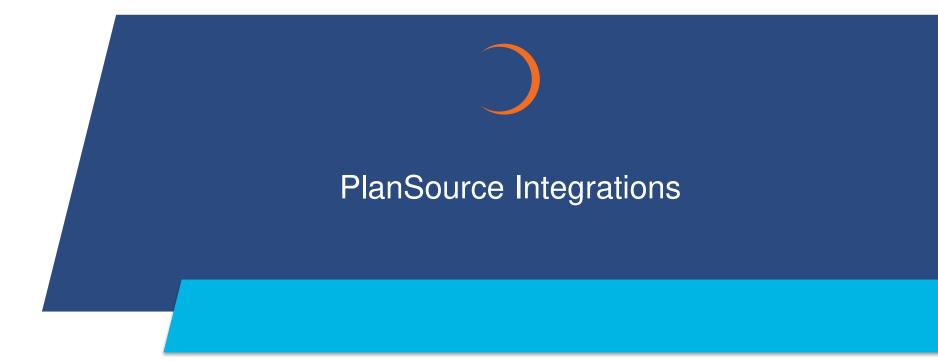
Bidirectional referral opportunities



Increased product offerings



Seamless data exchange





Integration Types

PlanSource Integrations

Employee Self Service	Evidence of Insurability	Subscriber	Dependent	Кеу
Payroll	Single Sign-on	SAML	Coverages	Coming Soon Available Now
Beneficiaries	OAuth	Advanced Payroll Deductions	OpenID	

Integration Catalog

PlanSource Integrations





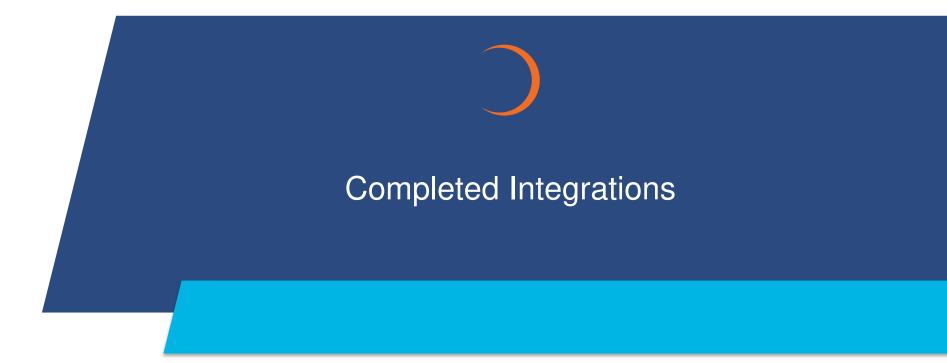
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Colonial L Making benefits count.



What type of integration are you most interested in?

- A. Single Sign-on (SSO)
- B. Demographic
- C. Payroll
- D. Coverages
- E. Evidence of Insurability (EOI)
- F. Other





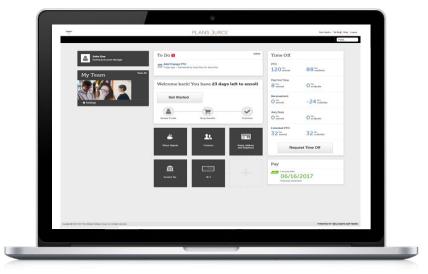
Ultimate Software

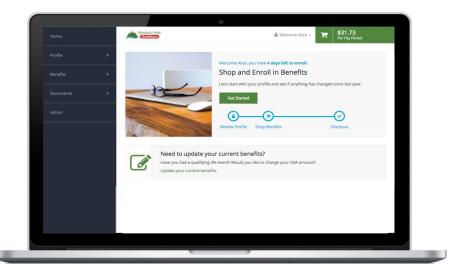
Completed Integrations

Employee demographic data

Payroll deductions

Near real-time integration



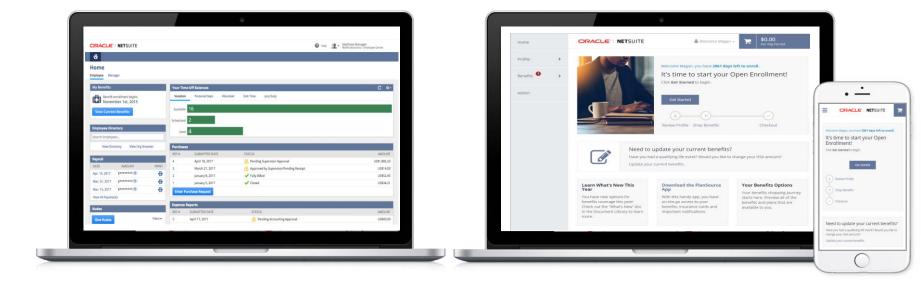


Completed Integrations

Employee demographic data

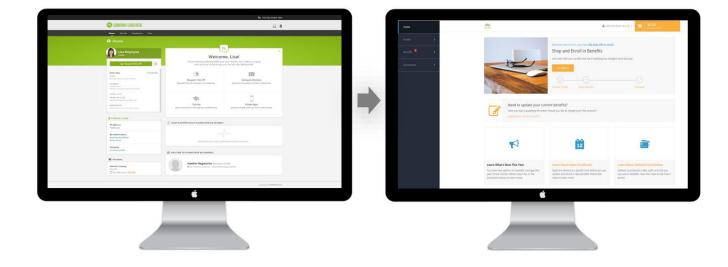
Payroll deductions

Near real-time integration



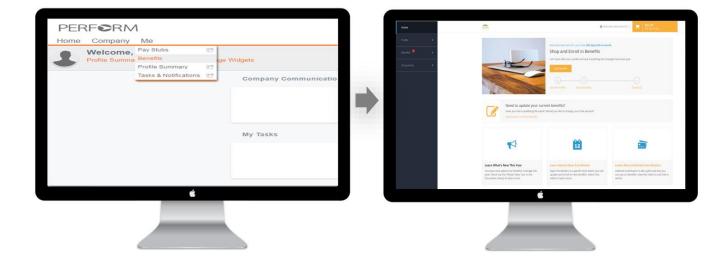
Completed Integrations

Employee demographic data	Synced 4 times daily	Employee single sign-on



Completed Integrations

Employee demographic data	Payroll deductions	Employee single sign-on



MetLife Statement of Health

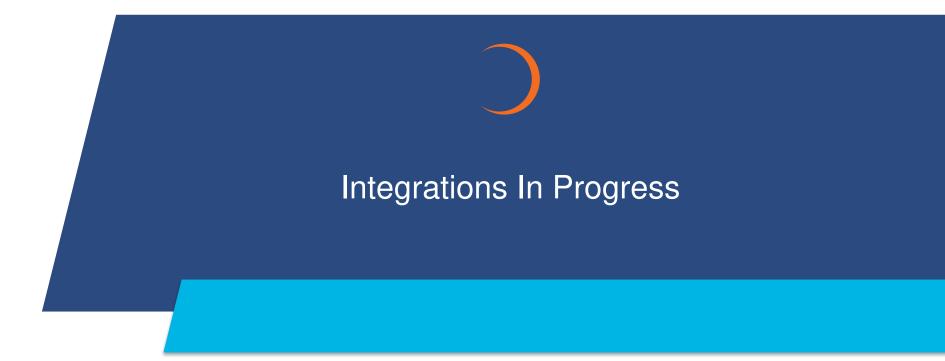
Completed Integrations

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uires a statement of Health. view your Statement of Health document	s please click on Mu	Documents link.	Read our FAQs	
iee more •	, the same on my			
You need to complete your Statement of	Health			
Sk4 Test				
Basic Life		Complete Online Now		
Coverage that doesn't require proof of good health:	\$1,000.00			
Coverage that requires proof of good health:	\$99,000.00			
Total coverage requested:	\$100,000.00			
Your dependent needs to complete the s	tatement of Health			
First Last				
FIRST LOST				
Dependent Life		Please provide your dependent's email address so		
Coverage that doesn't require proof of	\$15,000.00	we can email your dependent a link to the online Statement		
good health: Coverage that requires proof of good	\$5,000.00	of Health.		
health: 🕖 Total coverage requested:	\$20,000.00	Provide Email Address		
		Prefer to print the Statement of Health and have your dependent return it to us?		
		Download form		

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Let's see it in action

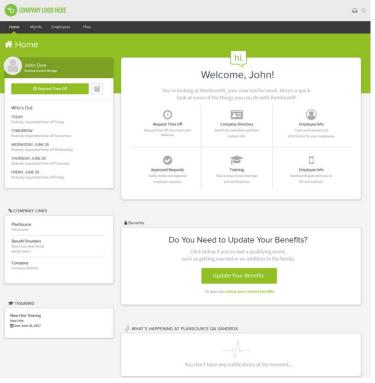




Enrollment Widget

Integrations In Progress

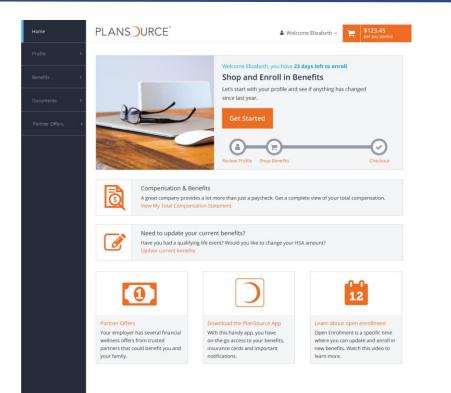
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Online Total Compensation Statements

Integrations In Progress

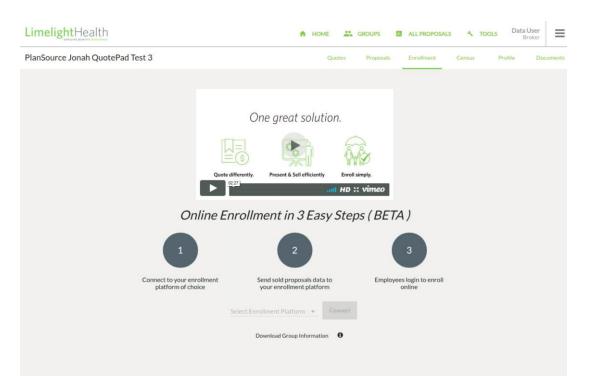


*	Total Compensation Statem	nents	
>	Statements will be available below to summarize	e your total compensation & benefits for each cale	ndar year.
nts ∨ cuments	6	ō	6
ompensation Documents	2017	2016	2015
ms	Total Compensation Statement	Total Compensation Statement	Total Compensation Statement
	Available January 2018	View 2016 Statement	View 2015 Statement

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Limelight Health

Integrations In Progress



Integrating with PlanSource

Integrate With PlanSource



Enhanced user experience



Standardized practices



Improved automation capabilities



Bidirectional referral opportunities

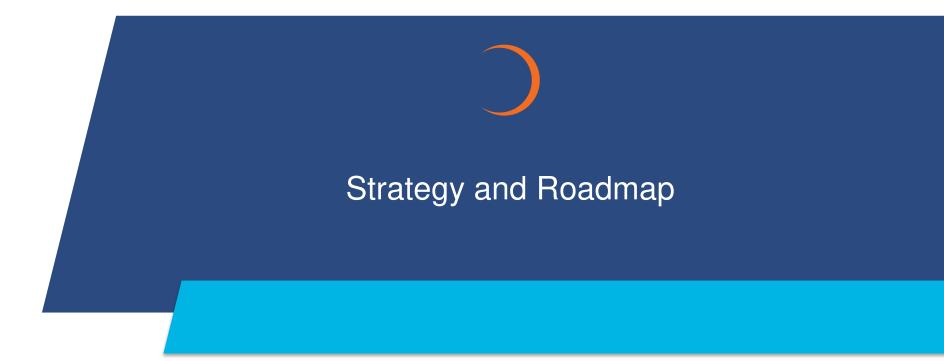


Increased product offerings



Seamless data exchange







Integration Strategy

Strategy and Roadmap



"If you can't fly then run, if you can't run then walk, if you can't walk then crawl, but whatever you do you have to keep moving forward." -- *Martin Luther King, Jr.*

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PlanSource Developer Portal

Strategy and Roadmap

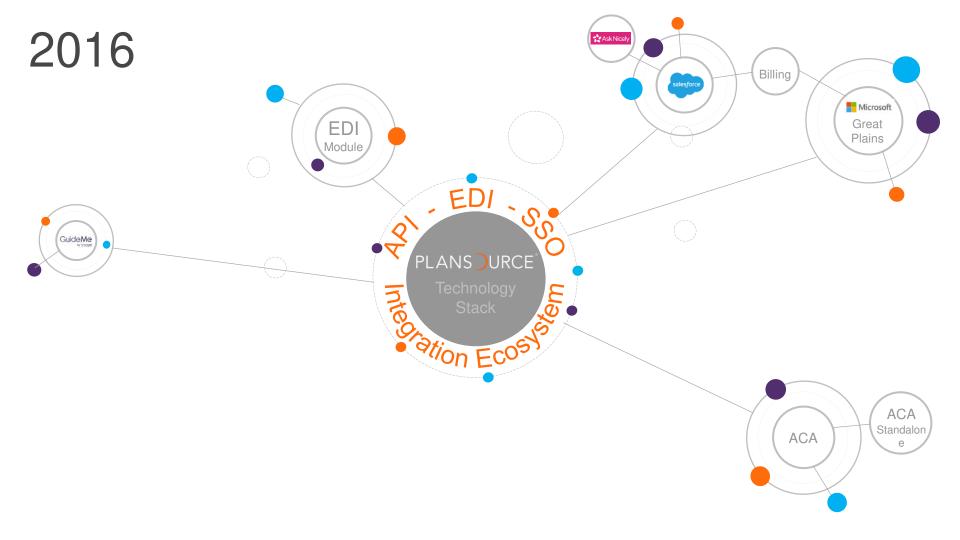
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ull /subscriber/{subscriber_id}/de	response = http:request(request) puts response.read_body	
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/subscriber/{subscriber_id}/de	Retrieve the Subscriber resources.	
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/subscriber/{subscriber_id}/be	cUBL Node Ruby JavaScript Python	@ Try It
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/subscribers/terminate	<pre>url = URI("http://example.com/") http = NutrinfTP.new(url.host, url.port) request = NutrinfTP::Get.new(url)</pre>	
/subscriber/{subscriber_id}/be	request - while (() suff. New(url) response = http:request(request) puts response read_body	
Dependent		

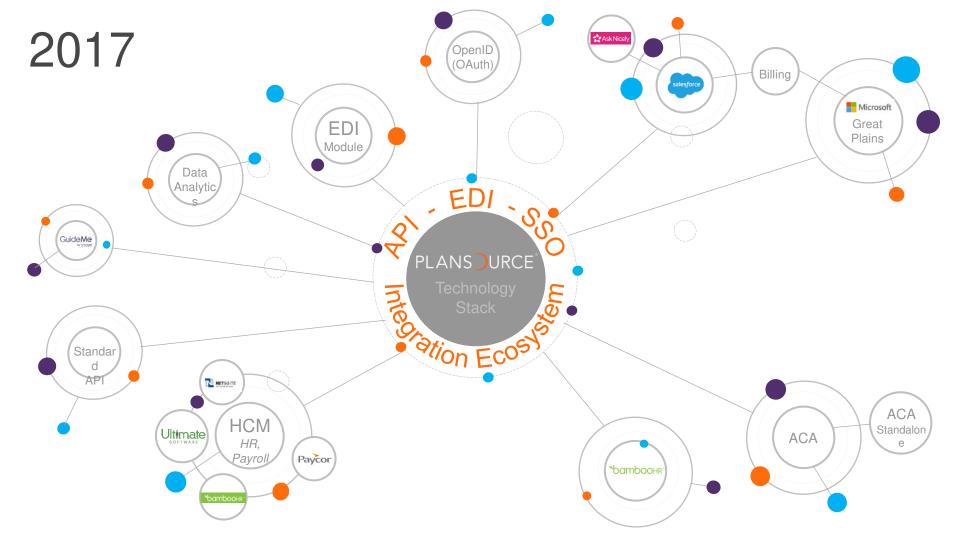
Use cases

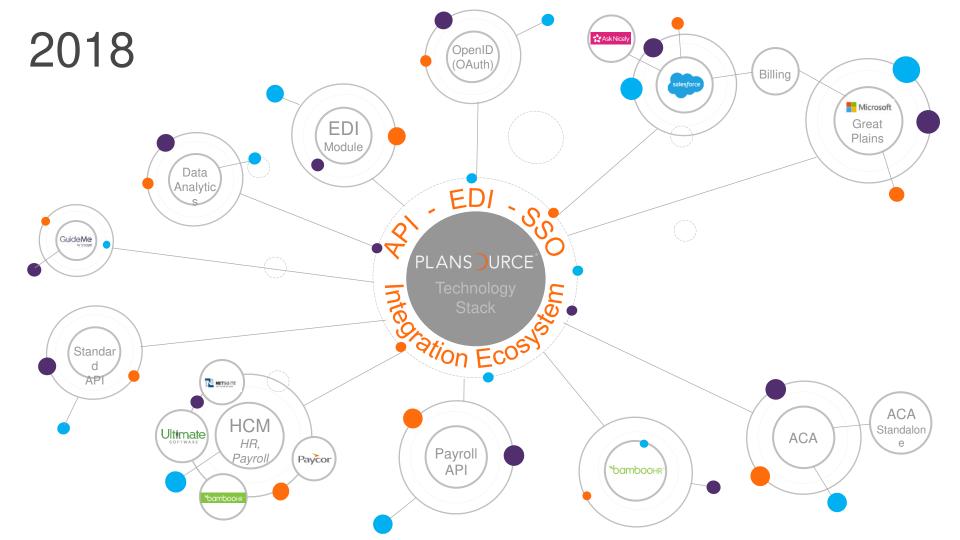
Endpoints

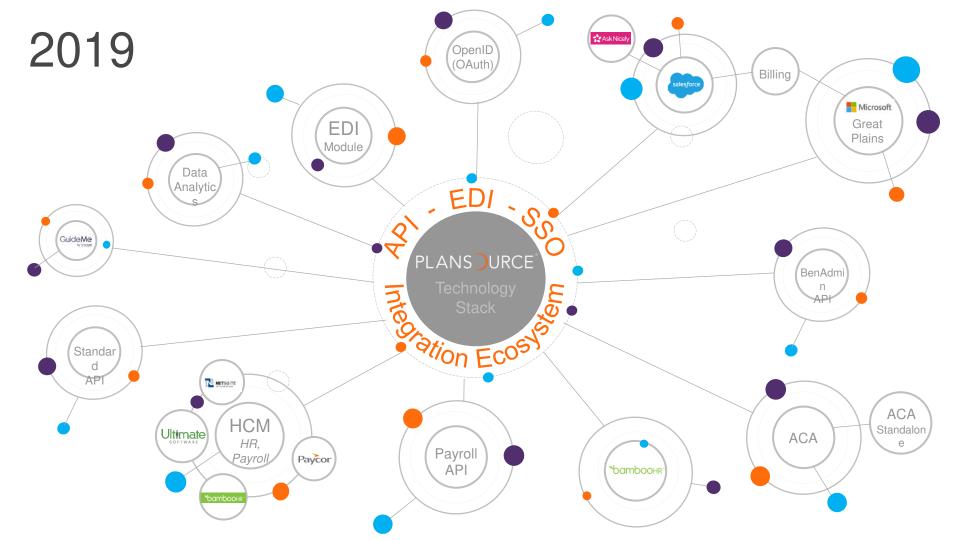
Announcements

Versioning









Integrate With PlanSource



Requesting an Integration

Integrate With PlanSource

Contact Information

Integration Type

Integration Features

Why Integrate?

Integration Experience

Supporting Information

	REQUESTOR CONT	ACT INFOR	MATION
ampany			
Name (Company Name)			
Address (Street Address)			Building/Sube [Optional]
City (City)	State [State]	20 [2]p]	Country (Country)
usiness Contact			
Name (Name)	Phone [Phone]		Email [Email]
echnical Contact			
Name (Name)	Phone (Phone)		Email [Email]
	INTEGRA	TION TYPE	
Which of PlanSource's in	tegrations are you interest	ed in? (Check al	that apply]
Employee Self Service	e (available now)	Single Sign	-On (available now)
Employee Sell Service Demographic Data (8			-On (available now) Iayroll (Beta Spring 2017)
	Beta Spring 2017)	Standard F	
Demographic Data (8	laita Spring 2017) ali 20117)	Standard F	ayroll (Beta Spring 2017)
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How Partners Get Included

Integrate With PlanSource



MetLife Statement of Health

Completed Integrations

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need a Statement of Health for one or m	ore of these reason	s Testing:	Need Help?	
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Your plan requires it the don't receive your Statement of H	lealth you will not	receive the amount of coverage that	Statement of Health Question?	
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view your Statement of Health document:	s please click on My	Documents link.		
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You need to complete your Statement of	Health.			
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SK4 TEST				
Basic Life		Complete Online Now		
Coverage that doesn't require proof of good health:	\$1,000.00			
Coverage that requires proof of good health:	\$99,000.00			
Total coverage requested:	\$100,000.00			
Your dependent needs to complete the 5	tatement of Health.			
First Last				
Dependent Life		Please provide your dependent's email address so		
Coverage that doesn't require proof of	\$15,000.00	we can email your dependent a link to the online Statement		
good health: Coverage that requires proof of good	\$5,000.00	of Health.		
health: 😗		Provide Email Address		
Total coverage requested:	\$20,000.00	Prefer to print the Statement		
		of Health and have your dependent return it to us?		
		Download form		

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Let's see it in action

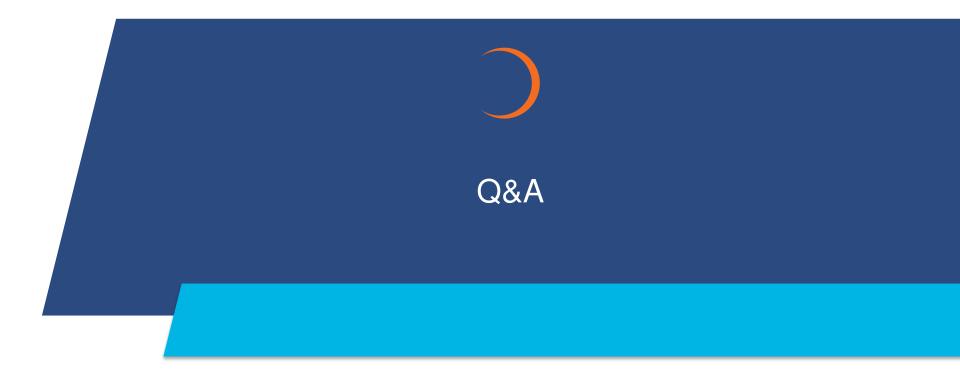
PlanSource Integrated Solution

Strategy and Roadmap

Endorsement from PlanSource

- Badging to display on partner website
- Callout out on PlanSource website









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www.plansource.com

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