EMPLOYER PORTAL TRAINING GUIDE

WYOMING

An independent licensee of the Blue Cross and Blue Shield Association

Contents

Section 1: Login Process

Purpose: This section provides an overview of the login process, from completing the authorization form to the final step of verifying contact information. If you have issues, please contact your local BCBSWY Agent.

Step 1: Plan Administrator Access

BCBSWY will assign access to Plan Administrators as requested by the Client via the Employer Site Authorization Form. This form can be found below or on the Employer Site under Resources>Forms.

Fully Insured:

BCBSWY.com/YourWyoBlueAuthFI

Self Funded:

BCBSWY.com/YourWyoBlueAuthSF

Important: A unique user email address is required to guarantee individual user access. Shared emails may result in unauthorized access.

Note: Please return the completed form to your agent at www.bcbswy.com/insurance.

Blue Cross Blue Shield of Wyoming

Employer Site Authorization Form

WYOMING

Fully Insured

COMPLETE THIS FORM ONLINE AT BCBSWY.com/YourWyoBlueAuthFI
AND RETURN IT TO YOUR LOCAL BCBSWY AGENT AT www.bcbswy.com/insurance.
Questions should be directed to your BCBSWY agent at www.bcbswy.com/insurance.

This form can be used to request access for multiple users.
*Indicates a required field.

CLIENT INFORMATION			
Client ID Number:			
*Client Legal Name:			
Doing Business As: (if different from legal name)			
*Street Address:			
*City:		*State:	*Zip:
*Authorized Signer Name:		*Authorized Signer Phone:	
*Authorized Signer Email:		*Authorized Signer Title:	
*BCBSWY Agent Name:		Account Executive:	
Do You Submit Enrollment to BCBSWY Electronically through a third party?			Yes No

AGREEMENT (Please read carefully before signing)

The individuals noted below have been designated by the Client to receive the Participant's Protected Health Information relating to payment under health care operations of, or other matters pertaining to the Benefit Plan in the ordinary course of business. These identified individuals will have access to the Participant's Protected Health Information only to perform the plan administrative functions the Client provides to the Benefit Plan. Such individuals will be subject to disciplinary action for any use or disclosure of the Participant's Protected Health Information in breach or in violation of, or noncompliance with, the privacy provisions of the Benefit Plan. The Client shall promptly report any such breach, violation, or noncompliance to Blue Cross Blue Shield of Wyoming (BCBSWY); will cooperate with BCBSWY to correct the breach, violation and noncompliance to impose appropriate disciplinary action on each employee or other workforce person causing the breach, violation or noncompliance; and will mitigate any harmful effect of the breach, violation, or noncompliance on any Participant whose privacy may have been compromised.

The Client will notify BCBSWY, in advance, of any change in the name or title of the employees authorized to receive Participant's Protected Health Information.

SIGNATURE			
*Electronic Signature: (Authorized Signer)		*Date: (01/02/2004)	

Each user will receive an email from onlineservices@bcbswy.com with instructions to access their account. Please verify this email address is not marked as spam and does not get sent to junk mail by your email provider. A unique user email address is required to guarantee unique user access. Shared emails may result in unauthorized access.

1. INDIVIDUAL USER INFORMATION			
*User Access:	Select	*Role:	Select
*First Name:		*Last Name:	
*Company Name:		*Job Title:	
*Address:			
*City:	*State:		*Zip Code:
*Phone:		*Unique Email:	
MEMBER ENROLLMENT ACCESS (If you submit enrollment to BCBSWY electronically through a third-party, please select view only access).			
*Access Type:			
Access to All Groups:			
If No, Access These Group #s Only:			
BILLING ACCESS			
Access to Billing Invoices:	Yes No		

2. INDIVIDUAL USER INFORMATION			
User Access:	Select	Role:	Select
First Name:		Last Name:	
Company Name:		Job Title:	
Address:			
City:	State:		Zip Code:
Phone:		Unique Email:	
MEMBER ENROLLMENT ACCESS (If you submit enrollment to BCBSWY electronically through a third-party, please select view only access).			
Access Type:			
Access to All Groups:			
If No, Access These Group #s Only:			
BILLING ACCESS			
Access to Billing Invoices:	Yes No		

Access includes the following:

Access	Description
Member Enrollment	• Access to Member Enrollment is giving the user authorization to personal employee and family information like dates of birth and social security numbers. • Access can be given for all member enrollment or limited to specific group numbers. • Access includes enrollment actions for employees and families like add, cancel, edit, and search.
Billing	• View past and present premium bills and reports • Set payment preferences • Submit payments
Claims (Self-Funded Only)	Access to Claims gives the user authorization to personal employee and family health information like health conditions, medical services, health care providers, and service charges.

Step 2: Login Credentials

BCBSWY will send an email from onlineservices@bcbswy.com with login instructions to your unique email address provided on the authorization form. Please verify our email address is not marked as spam and is not sent to junk mail by your email provider. To finalize the login process, please click on the link in the email.

Note: The link provided in the email can only be used once to set up your account.

From: ONLINESERVICES@BCBSWY.com [mailto:ONLINESERVICES@BCBSWY.com]
Sent: Friday, August 31, 2018 3:55 PM
To: Test Wyoming
Subject: Plan Administrator Login Credentials

Dear Plan Administrator:

Thank you for requesting access to the BCBSWY Employer Portal. Below you will find the login ID and a link to begin the login process. Please click the link and proceed to the next step.

LOGIN ID: PA######A
LINK: https://www.yourwyoblue.com/rbsmbl/x-services/user/authorization?key=SkUn%2F4ChOj9Yr20tch9sawnGuOX1inChH6aQzQLRNTLKn3SUGetQmZUfTKixybK8oM6caIwswFG53Dpiw8OwJw%3D%3D&id=11034348

If you have any questions about the BCBSWY Employer Portal, navigation on the site, or a specific action you are trying to make, please contact your BCBSWY Agent or 1-800-442-2376 for assistance. Please do not reply to this email.

Sincerely,

Blue Cross Blue Shield of Wyoming

Step 3: Create Password/Security Q&A

Answer the security questions that relate to you and your company. Read and accept the terms and conditions. Create a password that does not include your name. It must include 12 or more characters, an uppercase letter, a lowercase letter, a number, and a special character except <,>,+.

Note: Answers to these questions must match what was provided on the Employer Site Authorization Form in step 1.

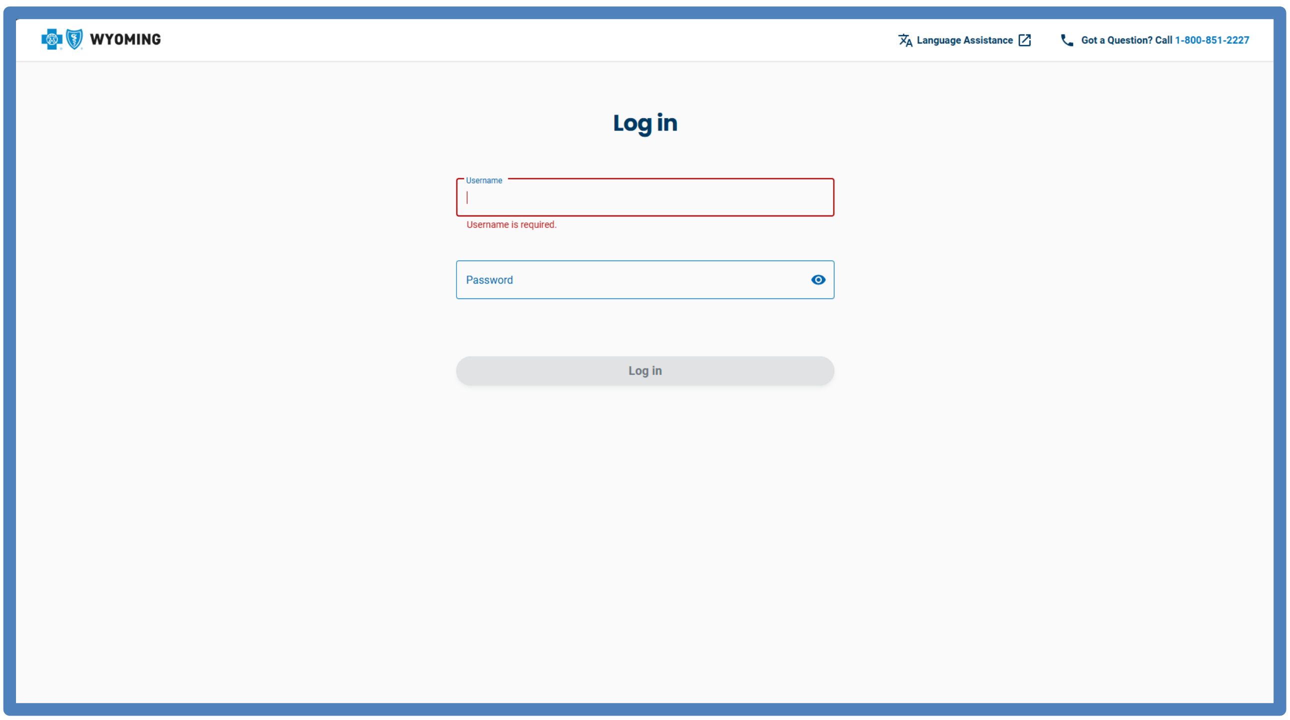
Note: To view terms and conditions, click on the “View Document” link.

Step 4: Verify & Agree

Verify your name and contact information. If this information is correct, click the agree and continue button, and you will be logged in to the site.

Note: For future access to the Employer Site, go to Employer.YourWyoBlue.com. Enter your username (PA######A) from the login credential email (see step 2) and the password you created in step 3.

Note: It would be best to use Chrome or Microsoft Edge.

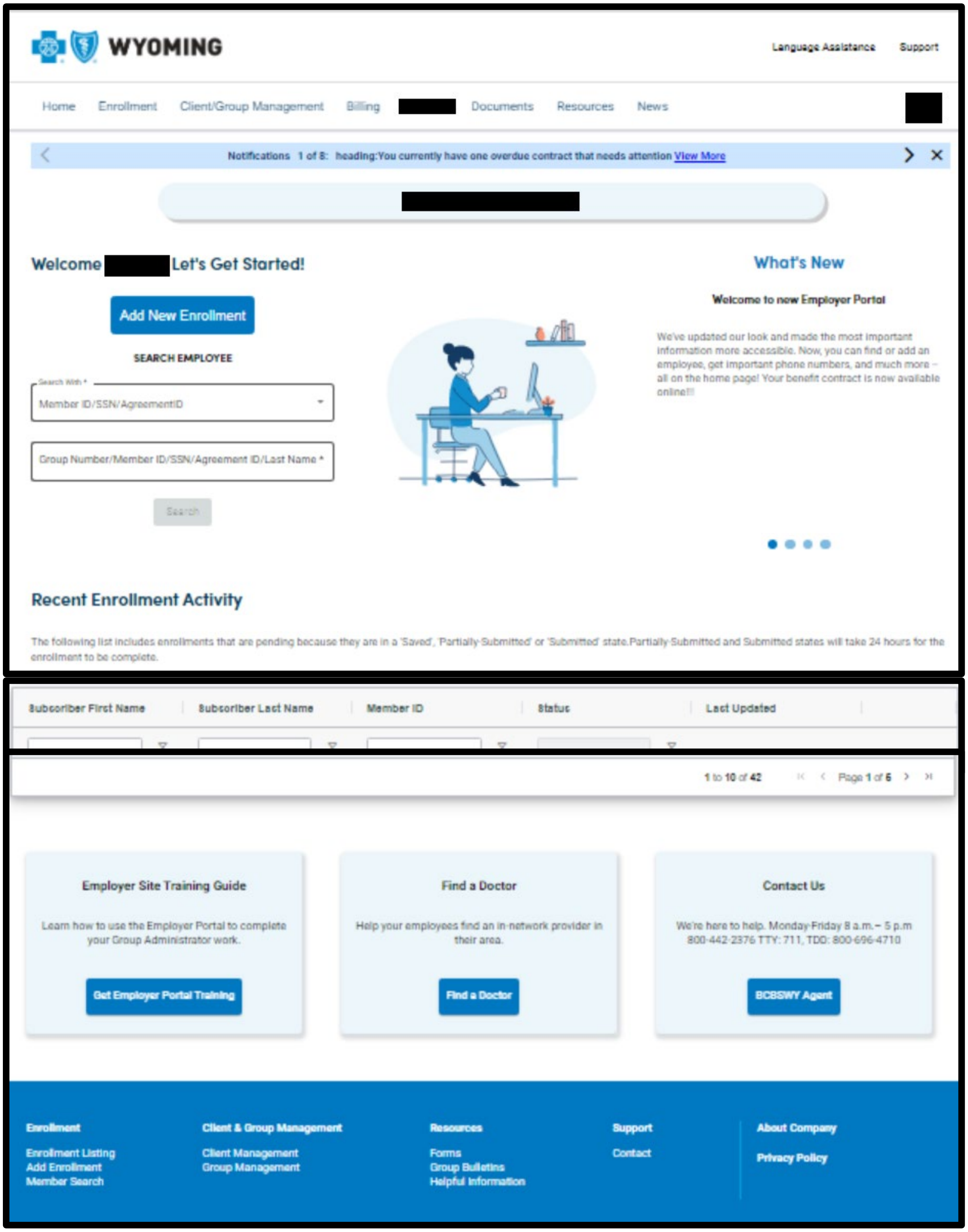


Section 2: Getting Started – Home Page

Purpose: This section provides an overview of the site and how to navigate through each feature. Find an employee or dependent, have quick access to what you need, find contact information, and much more – all from the home page.

Access the Employer Site Home Page:

When logging in to the site for the first time, you will be prompted to change your password. If you have forgotten your password, contact your local BCBSWY Agent.

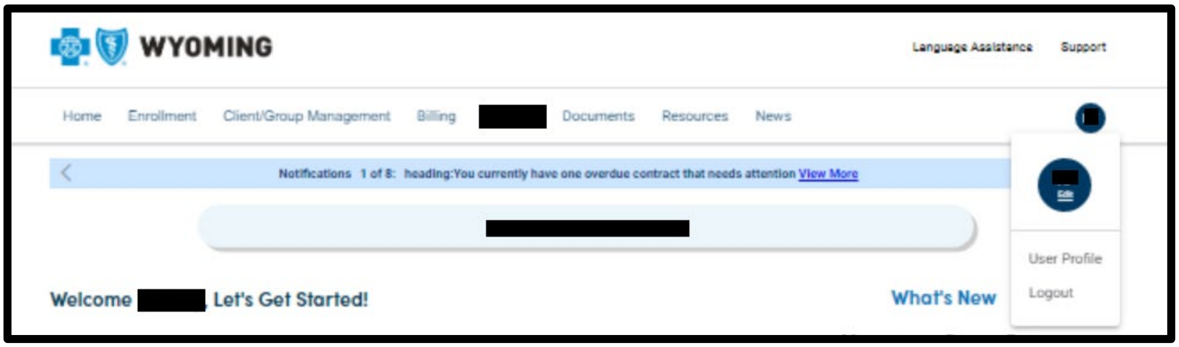


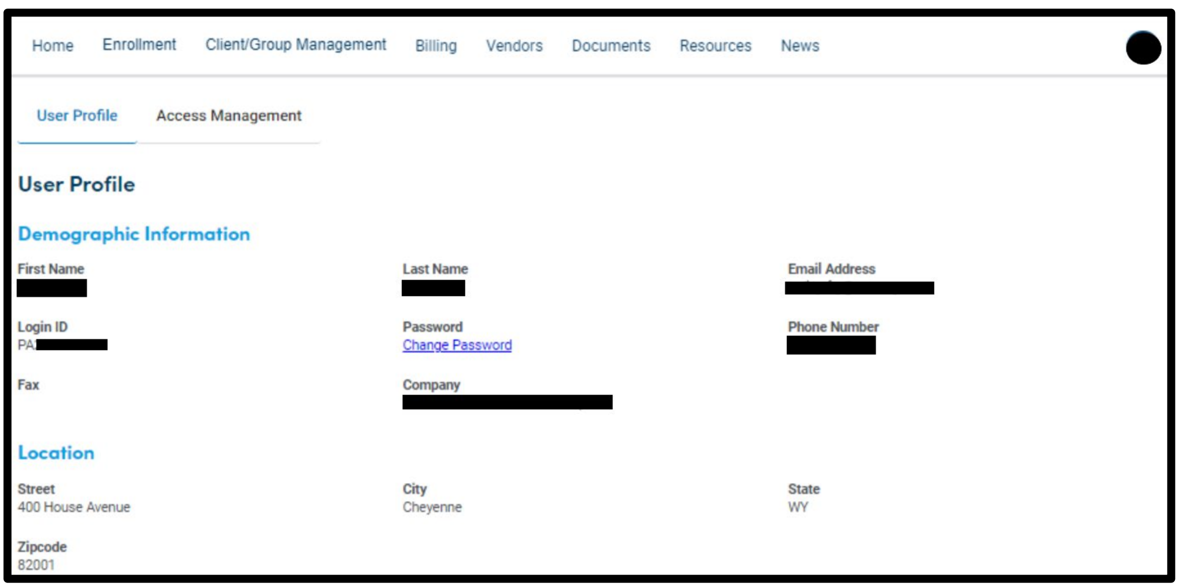
Header:

You can access the items in the header from any page.

The header includes the following:

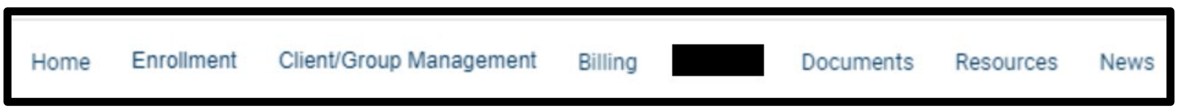
Control	Functionality
User Profile link	View your demographics and access information for the overall site and each group. For example, you may modify employee data for some groups but only view employee data for other groups. This page includes the Change Your Password link if it's applicable. **Note**: Contact your local BCBSWY Agent if the information needs to be changed.
Logout link	Log out of the Employer site.





Navigational Tabs:

You can find the Navigational Tabs at the top of every web page. You can navigate to different sections of the site by clicking these tabs.

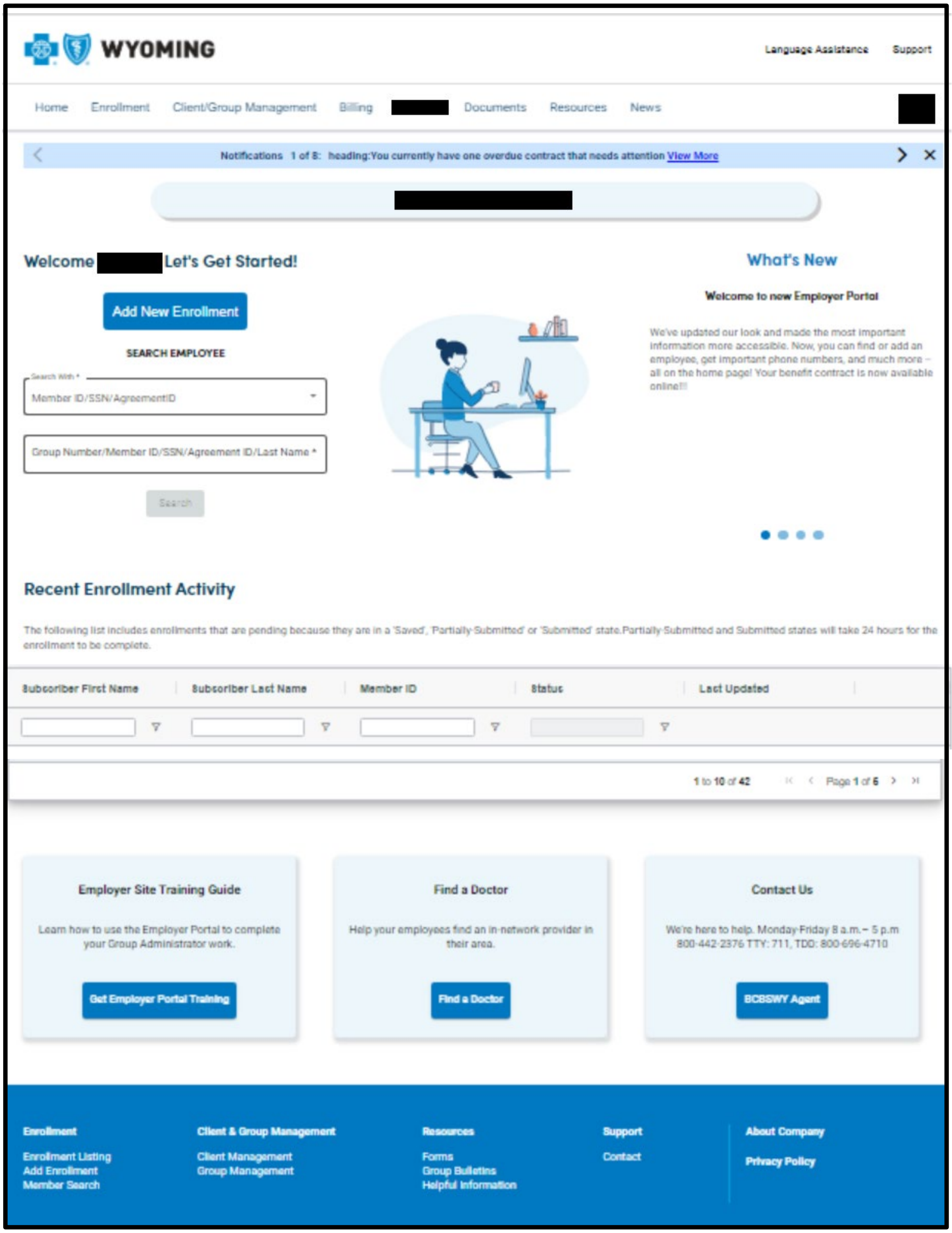


The table below describes each tab. The tabs provide access to crucial information used to complete the enrollment process and various other functions on the site.

Tab	Functionality
Home	Navigate to the home page.
Enrollment	Enroll a new employee or update an existing employee, cancel coverage, or monitor enrollment activities.
Client/Group Management	Find client and group information.
Billing	If applicable, you will be able to access the e-Bill overview and e-Bill system: view reports and priormonth's bills.
Documents	Access the groups benefit booklets, summary of benefits and coverage, and group contact information.
Resources	Find employer resources, forms, and administration guides, and view group bulletins and helpful information. Users can select a list of submenus and view the required information. The list includes - Find Forms, Benefit Documents, Applications, Group Bulletins, and Helpful Information.
News	View group updates. User can view the latest news displayed on this page.

Home Page Body:

The **Home Page Body** includes shortcuts to standard functionality, highlights information that may interest you, and displays essential contact information.



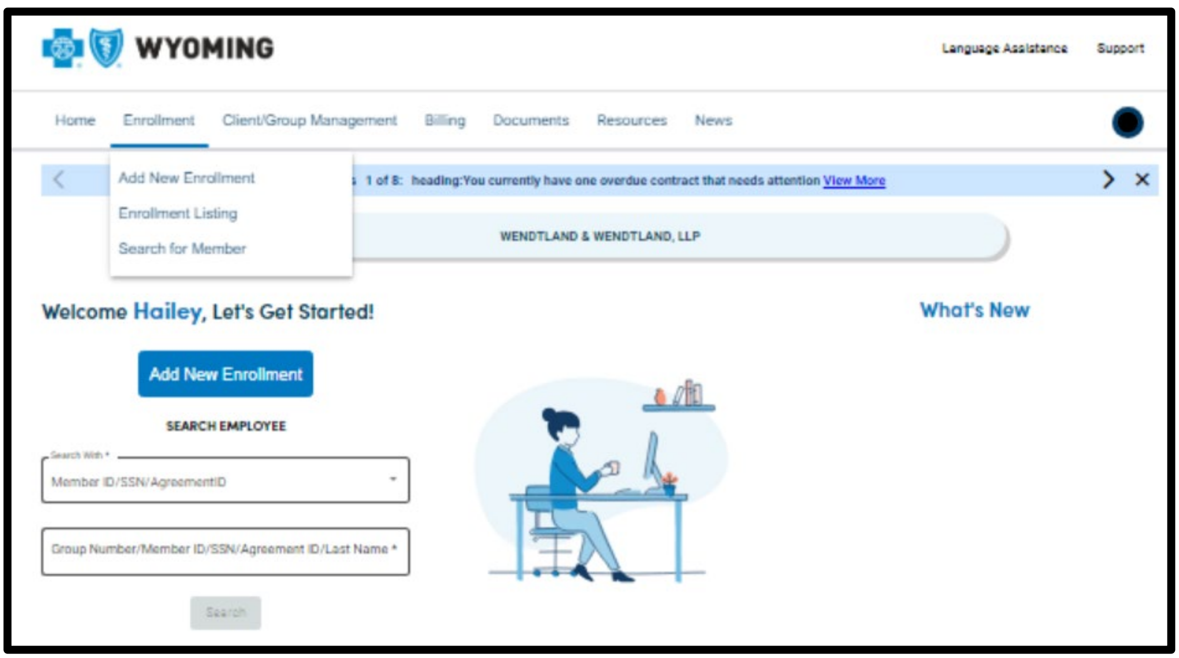
The Home Page Body includes the following:

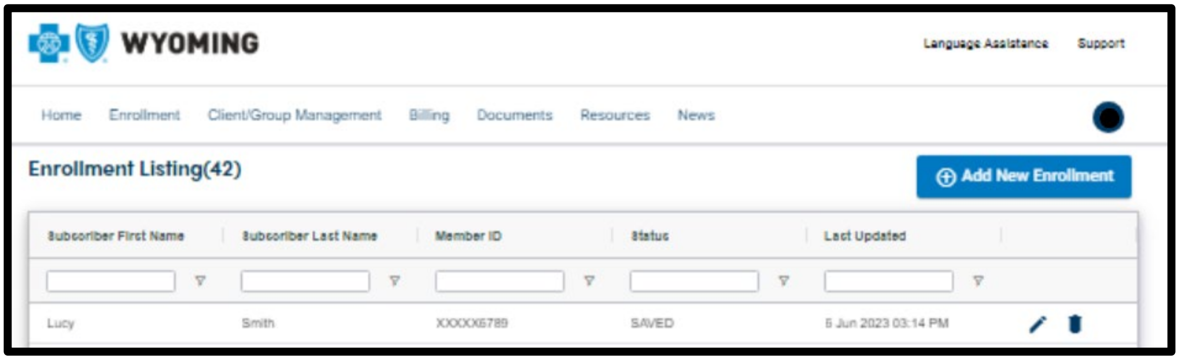
Feature	Functionality
Notifications	The blue banner under the header navigation lists notification and action items.
What's New	Read the latest news and updates related to the site or products.
Add New Employee	Begin a new employee enrollment.
Search Employee	Look up an employee by Member ID, SSN, and Assignment ID.
Recent Enrollment Activity	Review enrollments based on the subscribers first and last name, member ID, status, and the last updated date.
Employer Site Training Guide	Reference material on how to use the employer portal and conduct enrollments.
Find A Doctor	Help employees discover providers in their network.
Contact Us	Information on the member service phone number and link to connect with a BCBSWY agent.

Section 3: Enrollments

Purpose: This section provides an overview of the Enrollment Tab and uses enrollment functionality.

You can access the **Enrollment landing page** by selecting the Enrollment tab on the home page.





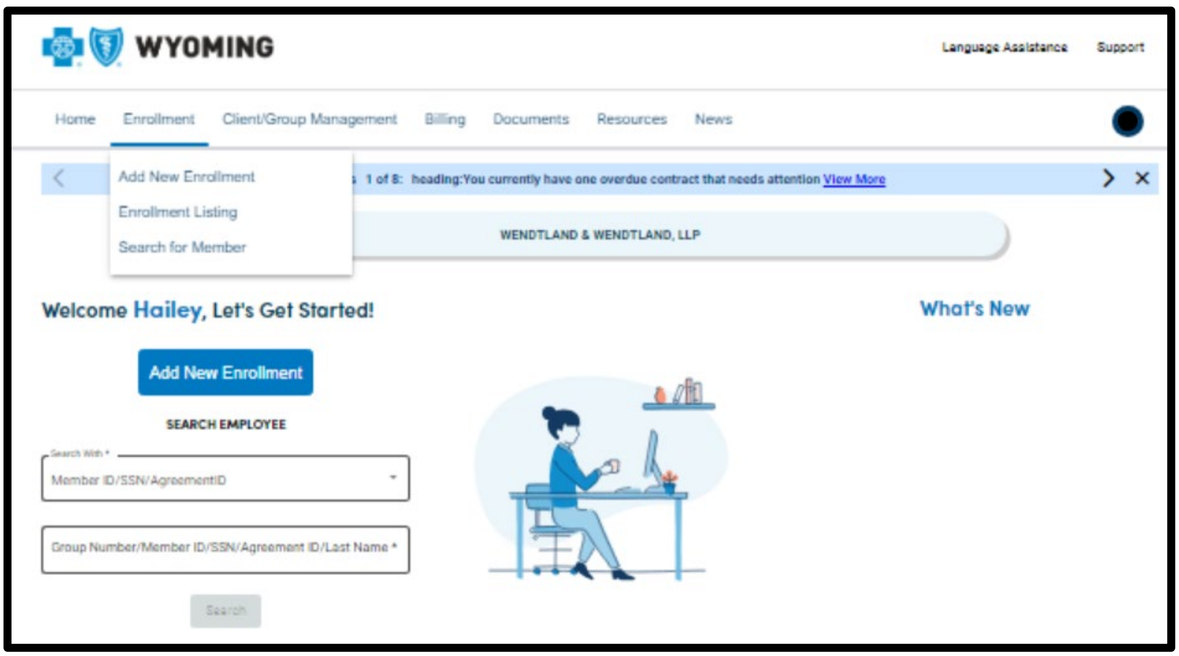
Add Employee:

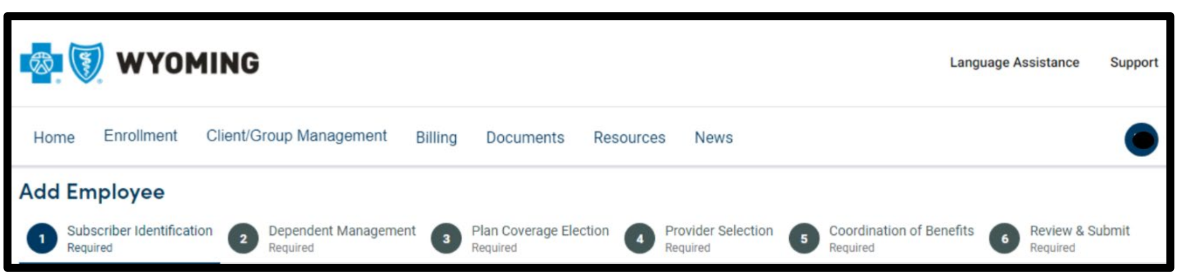
Click the Add Employee button to add a new subscriber and dependent(s) to the membership database. Enrollments are usually processed within one business day.

Important: Before you add an employee, search for them by the last name to ensure that the employee has not already been entered.

Note: Fields marked with an asterisk (*) are required fields. If any of these fields are not completed or incorrect, a notification will display in red text.

Note: Utilize the calendar function to input dates to avoid any date entry issues.





When a user starts the Add New Enrollment flow, identify if the member is a new subscriber or a dependent on an existing policy.

If Member is a New Subscriber:

1. In Add New Enrollment flow when select the New Subscriber, they should be able to see 6 tabs for entering information.
    - Subscriber Identification
    - Dependent management
    - Plan Coverage Election
    - Provider Selection
    - Coordination of Benefits
    - Review & Submit
2. User must fill in the details on each tab in the sequential order for moving to next step/tab.
3. The 5th section Coordination of Benefits will load more fields based on drop down value selected for Other Insurance, Medicare.
4. User can navigate back to any completed tab at any time by using the back button.
5. The Title of tab will turn green and change as Completed once all information is entered and saved.

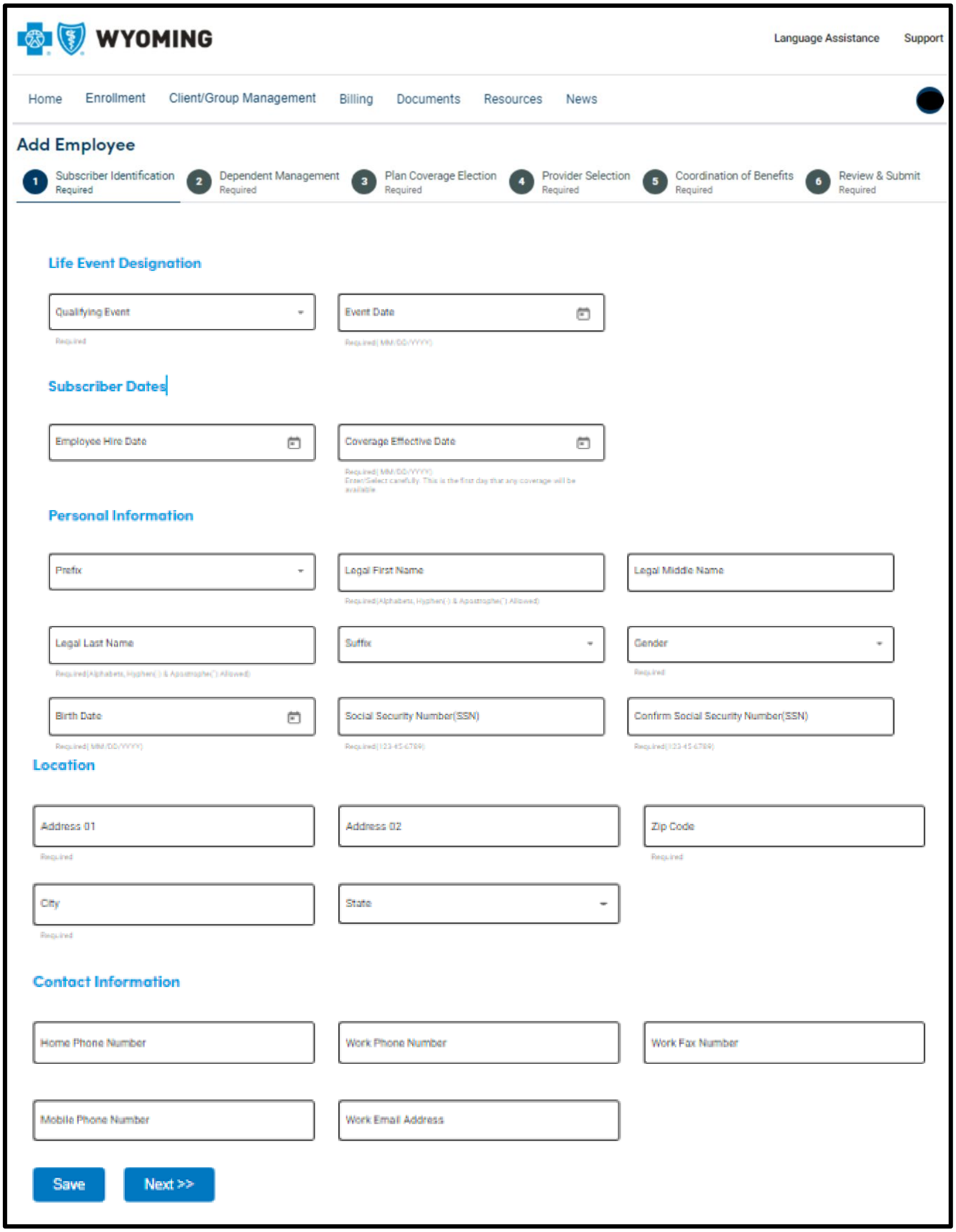
Step 1: Subscriber & Dependents:

Make sure that you carefully enter the Coverage Effective Date as this is the first date whencoverage will be available to the subscriber and their dependents.

Subscriber:

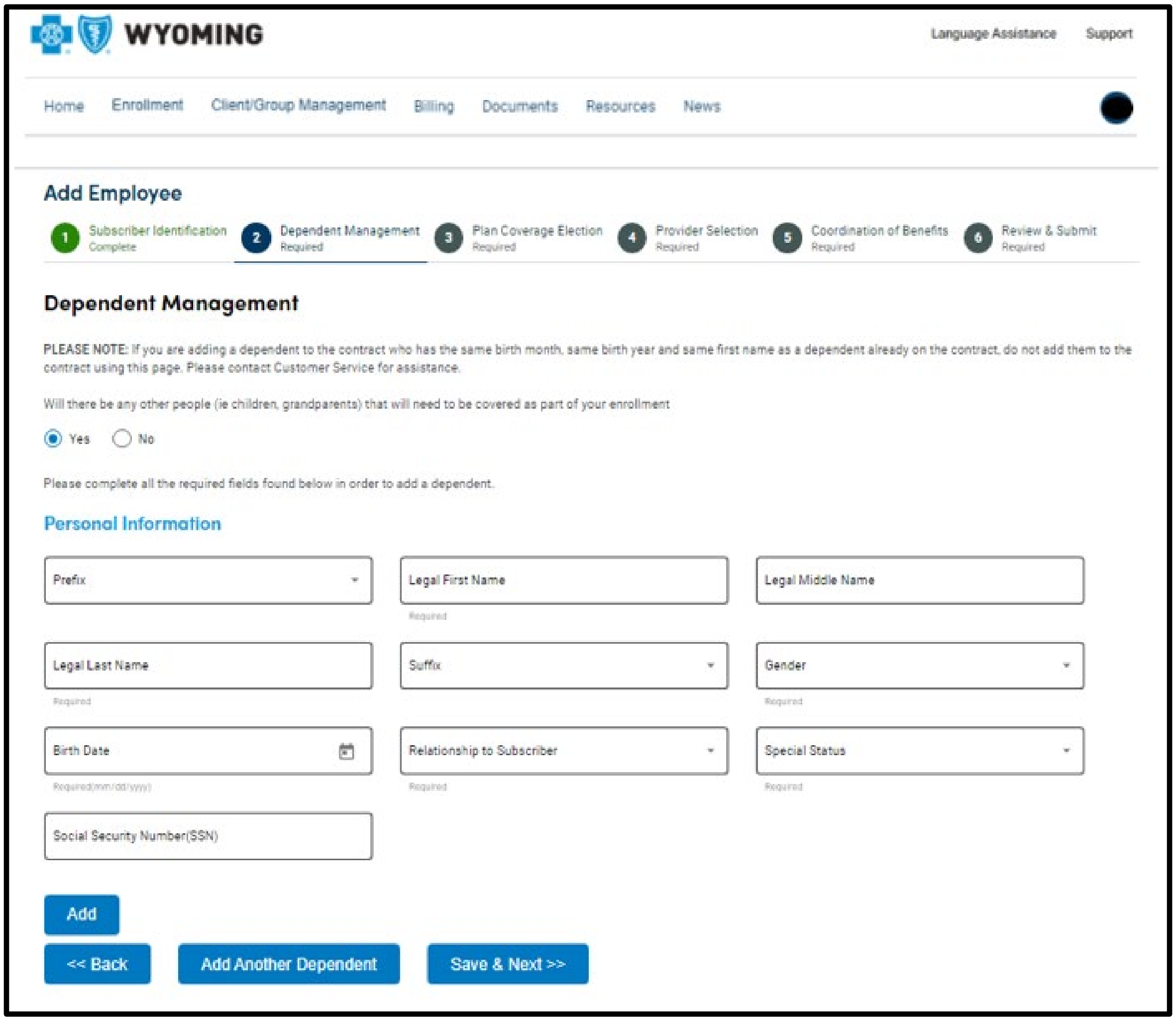
Note: Some examples may feature mid-month dates. However, we do not use mid-month enrollment dates.
Note: You can add newborns prior to knowing their social security number.
Note: To add a dependent who has the same birth month, year, or first name as an existing dependent on the same contract, DO NOT add them here.

1. Qualifying Event field will display as a dropdown and Event Date as Calendar. User can select as applicable from dropdown list.
2. Enter **Subscriber Dates** (Employer Hire Date and Coverage Effective Date) and make sure that you carefully enter Coverage Effective Date. This is the first date when coverage will be available to the subscriber.
3. Enter subscriber **Personal information**, such as Prefix, Legal First Name, Legal Middle Name, Legal Last Name, Gender, Birth date, and SSN.
4. Enter **Location** details (Address details- Address, Zip code, City and State)
5. Enter **Contact Information** (Home Phone Number, Work Phone Number, Mobile Number, Email details).
6. Enter **Additional Insurance Information** (The Other Insurance, Medicare Eligible and Employee covered by Cobra If applicable) and questions are defaulted to Unknown.
7. Click Save to save the enrollment in Enrollments in Process and Click Next button to go to the next step.


WYOMING
Language Assistance
Support
Home
Enrollment
Client/Group Management
Billing
Documents
Resources
News
Add Employee
1 Subscriber Identification Required
2 Dependent Management Required
3 Plan Coverage Election Required
4 Provider Selection Required
5 Coordination of Benefits Required
6 Review & Submit Required
Life Event Designation
Qualifying Event
Required
Event Date
Subscriber Dates
Employee Hire Date
Coverage Effective Date
Personal Information
Prefix
Legal First Name
Legal Middle Name
Legal Last Name
Suffix
Gender
Required
Birth Date
Required(MM/DD/YYYY)
Social Security Number(SSN)
Confirm Social Security Number(SSN)
Location
Address 01
Required
Address 02
Zip Code
Required
City
Required
State
Contact Information
Home Phone Number
Work Phone Number
Work Fax Number
Mobile Phone Number
Work Email Address
Save
Next >>

Dependent:

1. Select **Yes** under Dependent Management where Dependents needs to be covered as part of Enrollment.
2. Enter Dependent **Personal information**, such as Prefix, Legal First Name, Legal Middle Name, Legal Last Name, Suffix, Gender, Birth date, Relationship to Subscriber, Special Status and SSN.
3. Click the **Save** button to save the enrollment in Enrollments in Process.
4. **Currently Added dependents** section will show up once a dependent is added, and data displayed in rows one below the other. User can edit or delete the current added dependents in this grid.
5. Click **Add Another Dependent** button if you want to add dependents. You will need to add multiple dependents by clicking Add multiple times.
6. Click Next Button & Continue to go to the next step or click Save for Later to save the enrollment in Enrollment in Process.



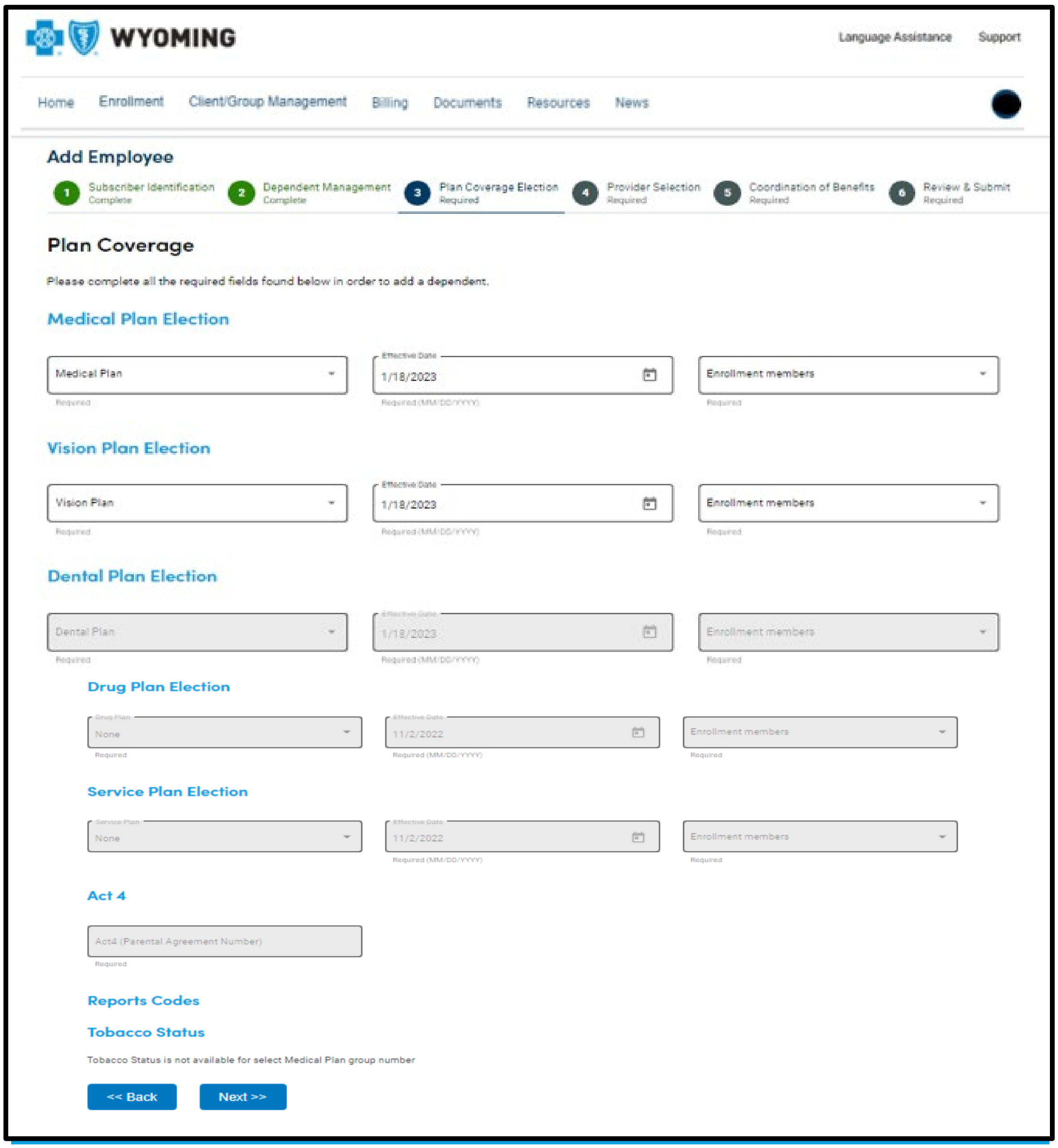
Plan Coverage Election:

This step enables you to select the coverage under each Line of Business (LOB). A separate section displays each LOB.

1. On each plan coverage section, select the available plans (Medical Plan Election, Dental Plan Election, Vision Plan Election, Drug Plan Election and Service Plan Election) whichever is applicable for the Subscriber and Dependents from the dropdown list. If there are no Plans available for the LOB, it will be greyed out.
2. Enter Effective Date and select Enrollment Members (Subscriber & Dependents) applicable for respective Plans (Medical Plan Election, Dental Plan Election, Vision Plan Election, Drug Plan Election and Service Plan Election).

Important! If an individual's checkbox is not checked, he/she will not receive coverage.

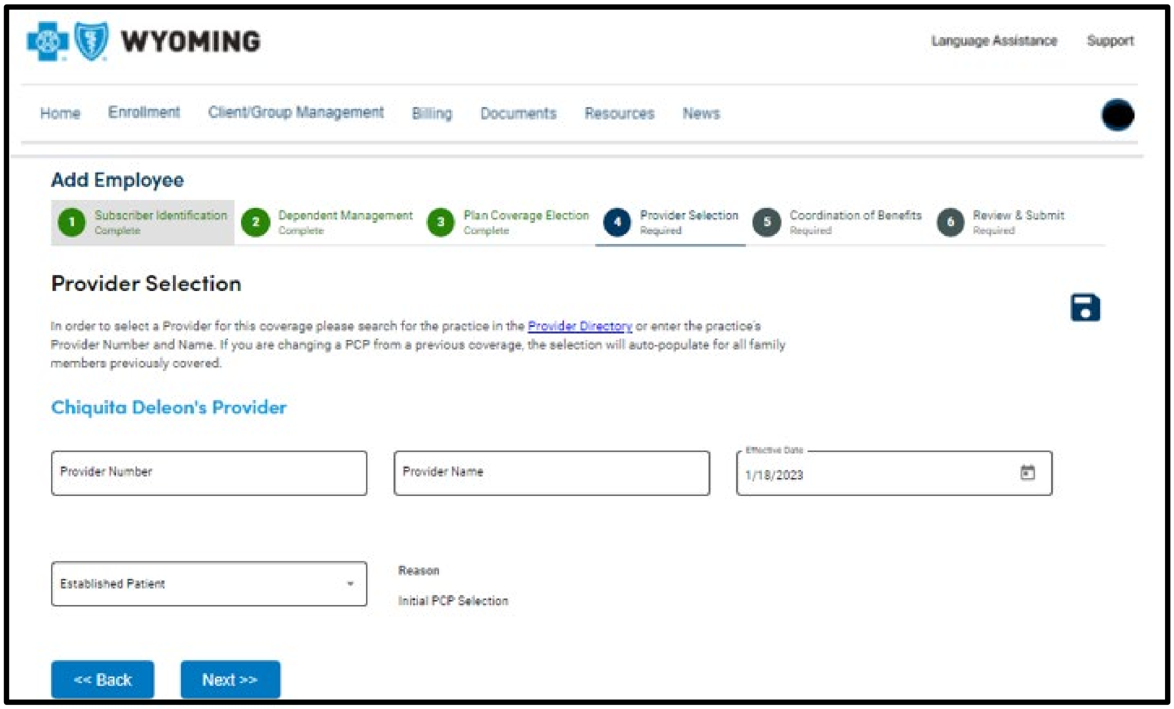
3. If applicable, Act4, Report Codes and Tobacco Status section will display once you select coverage. If there is other information needed, additional sections will display as well. Complete the information.
4. Click the Next button to go to the next step in Enrollments in Process.



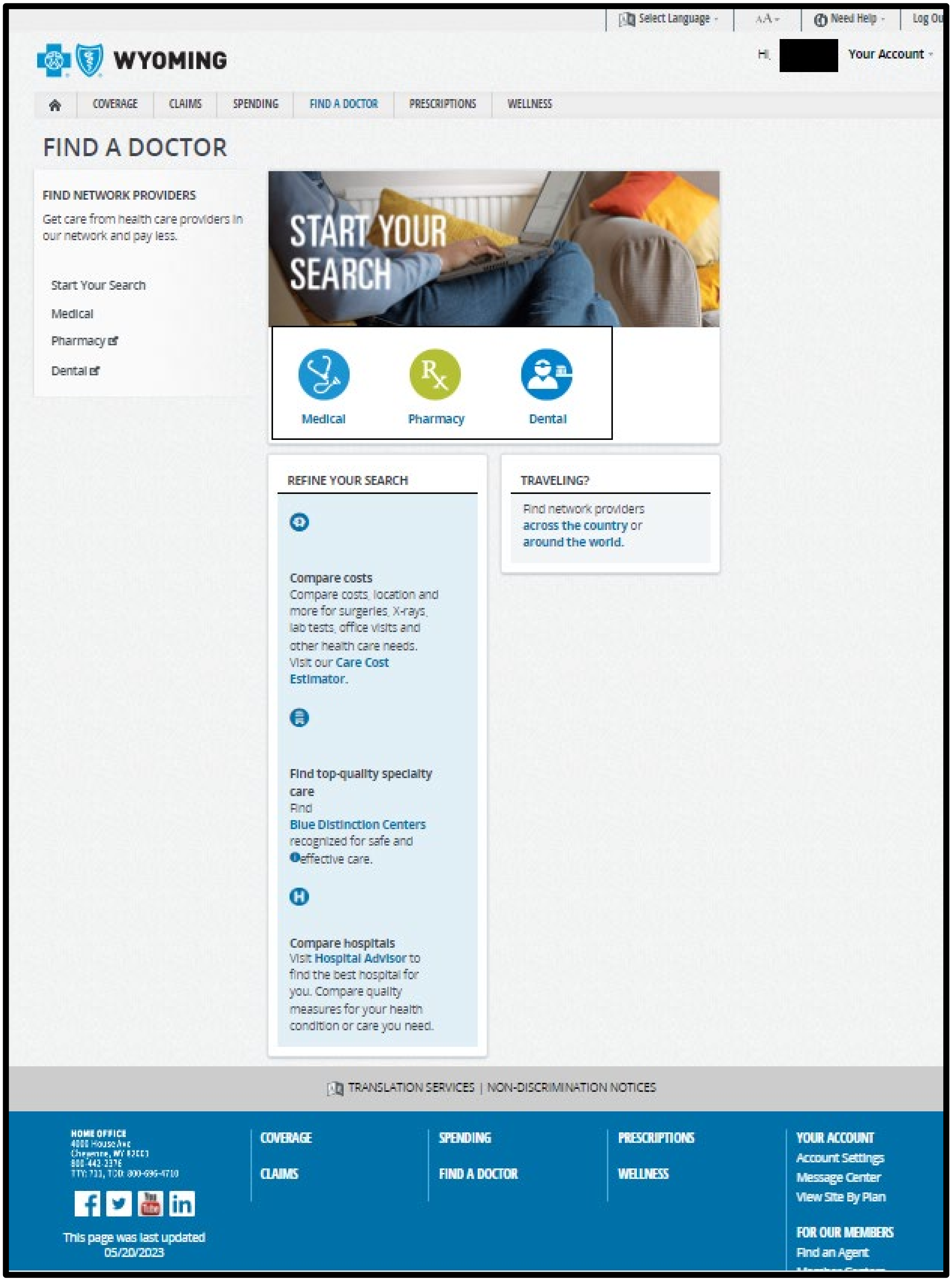
Provider Selection:

This step is applicable based on selection of the Plan coverage.

1. Select Provider Directory link to get the Provider details. Provider search tool will have group number and primary care physician pre-populated in search field.
2. Enter Provider Number, Provider Name, Effective date and select Established Patient from drop down list.
3. If you are changing a PCP from previous coverage, the selection will auto-populate for all family members previously covered.
4. Click the Next button to go to the next step in Enrollments in Process.

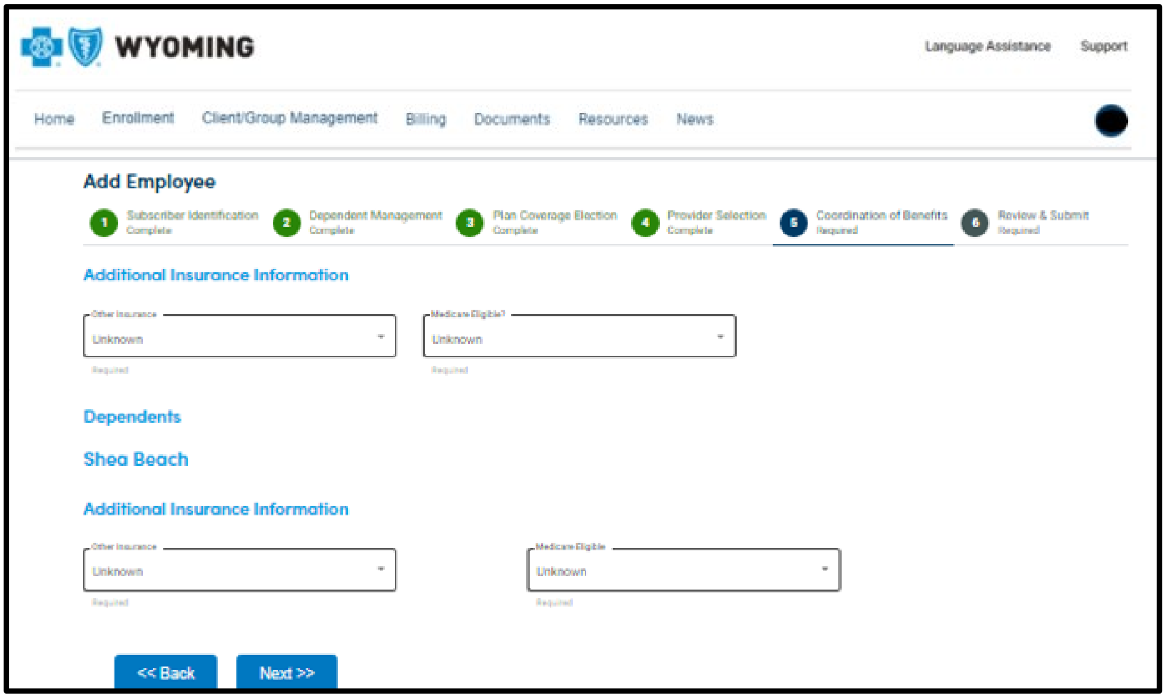


Provider Directory:



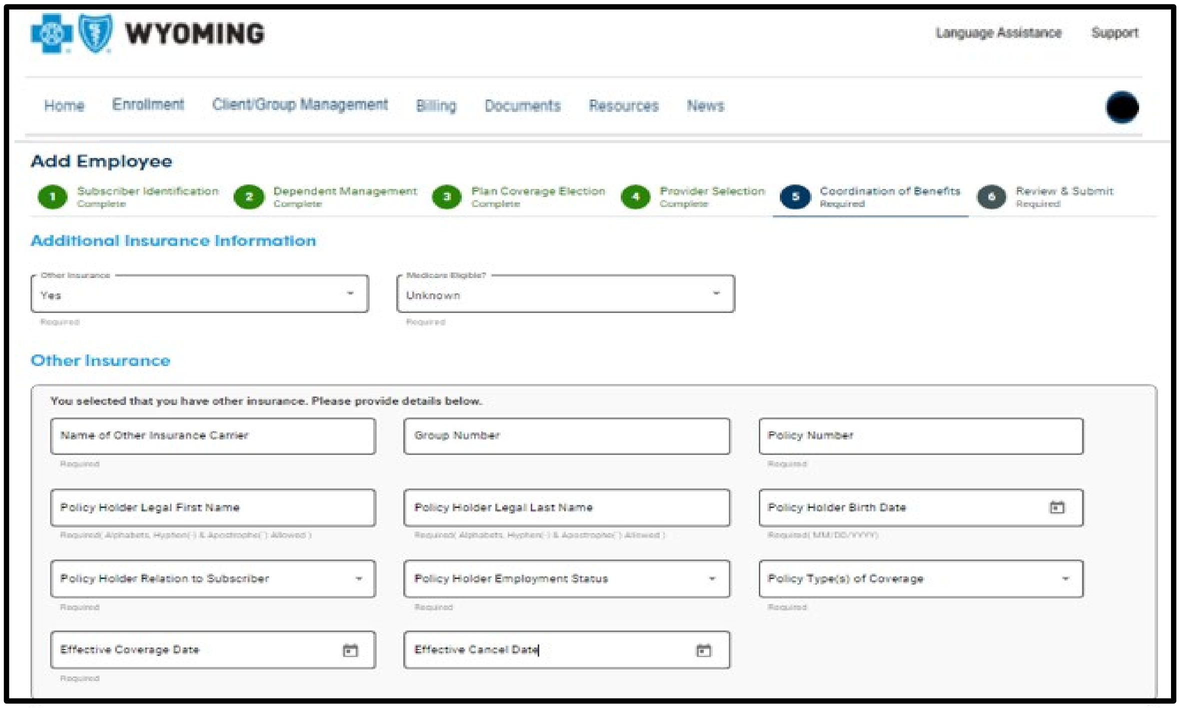
Coordination of Benefits:

This step is applicable based on selection of the Plan coverage. If the user has Additional Insurance Information, select Other Insurance and Medicare Eligibility under this tab.



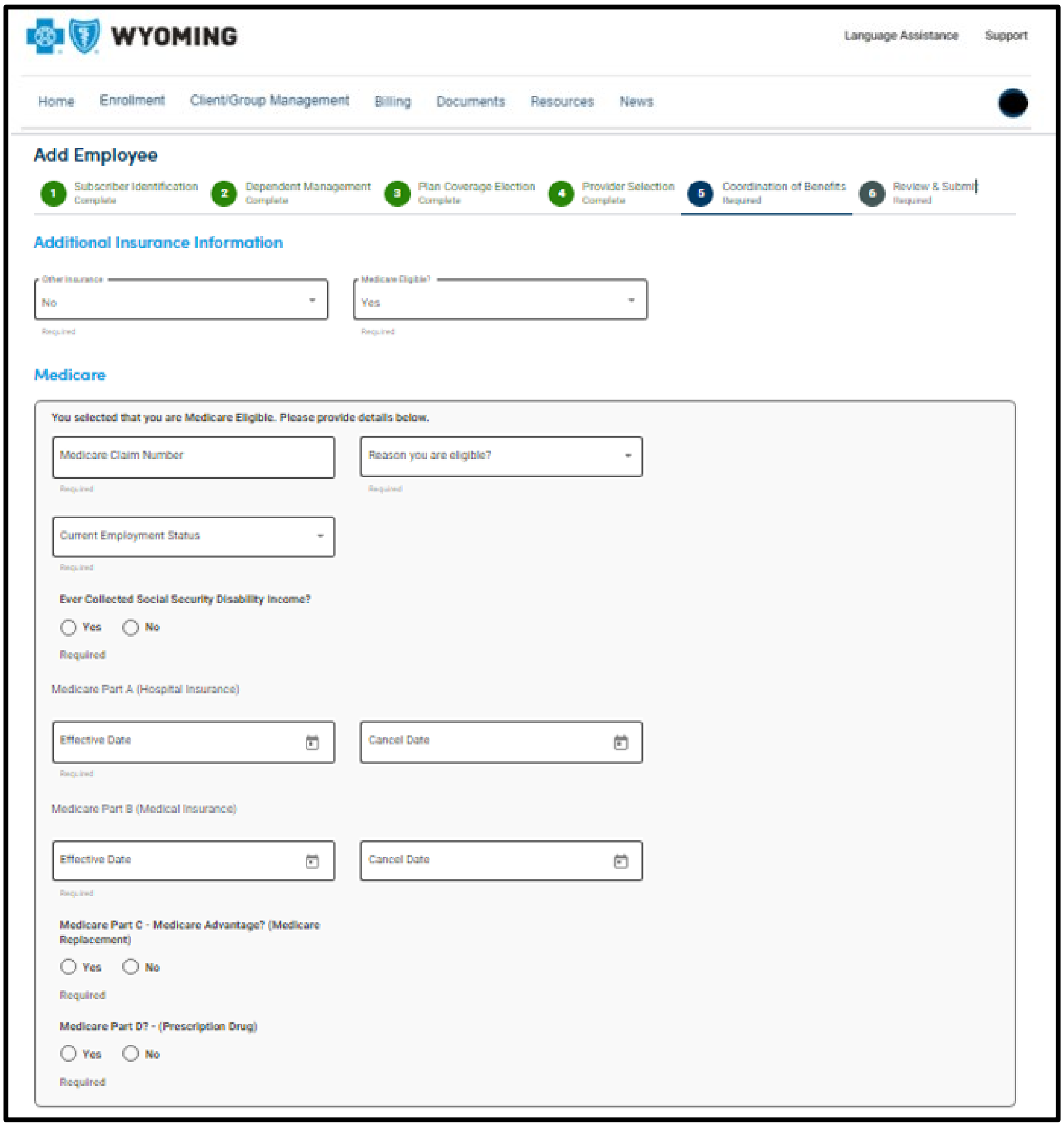
Other Insurance:

1. If User select Other Insurance as Yes from dropdown list, system will populate the Other Insurance tab for the flow.
2. Update required entry fields (Name of Insurance Carrier, Group Number, Policy Number, Policy Holder Legal First Name, Policy Holder Legal Last Name, Effective Coverage Date, Effective Cancel Date, Policy Number, Policy Holder Relation to Subscriber, Policy Holder Birth Date, Policy Holder Employment Status, Policy Holder Type(s) of coverage.)
3. Subscriber card should display first followed by any dependents, if applicable.
4. Click the Next button to go to the next step in Enrollments in Process.



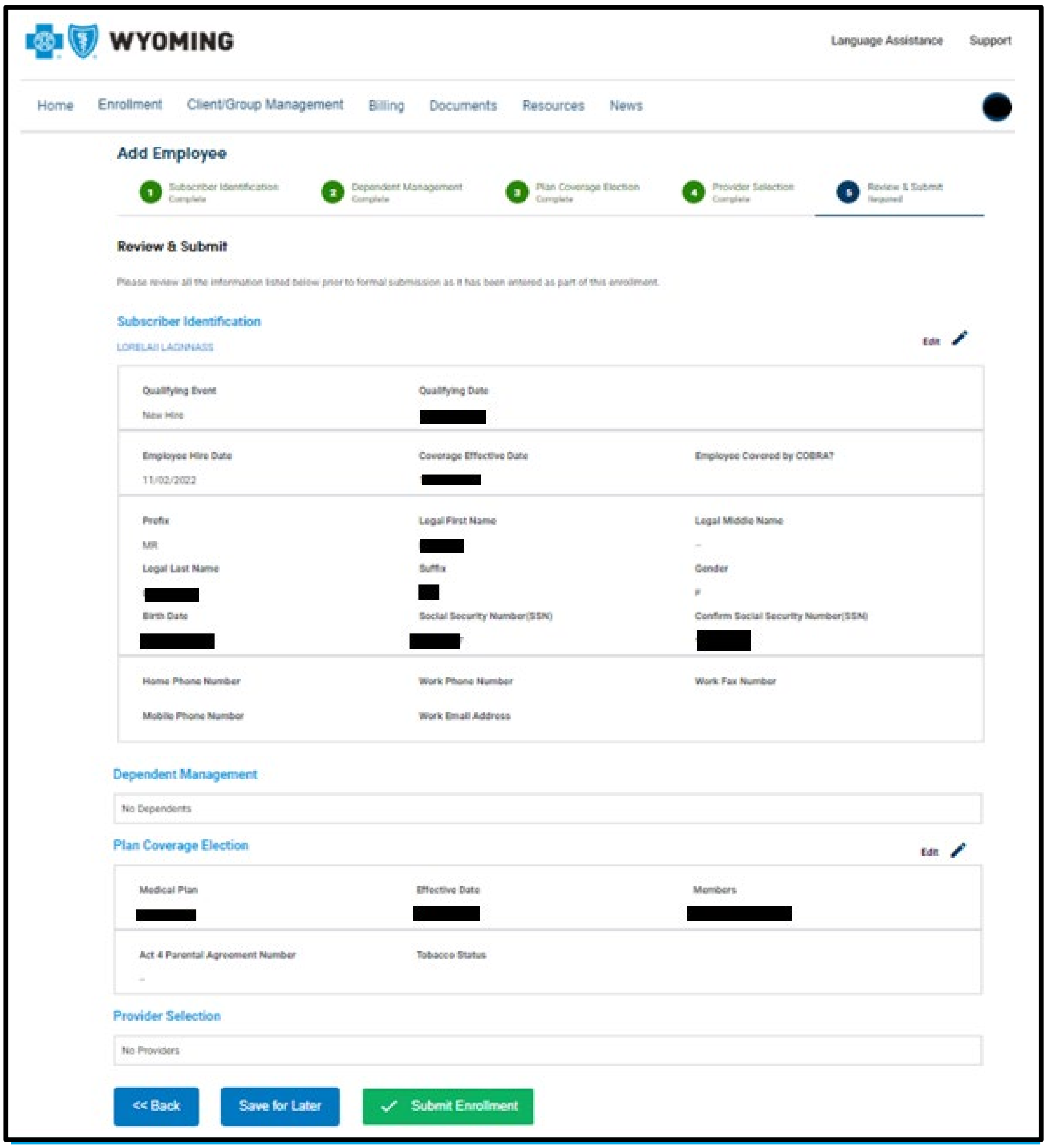
Medicare:

1. If the User selects Medicare Eligible as Yes from dropdown list, the system will populate the Medicare tab for the flow.
2. Subscriber card should display first followed by any dependents, if applicable.
3. User will update Medicare entry fields (Medicare Claim Number, Why Eligible?, Ever Collected Social Security Disability Income? , Medicare Part A (Hospital Insurance) – Effective Date and Cancel Date, Medicare Part B (Medical Insurance) – Effective Date and Cancel Date, Medicare Part C – Medicare Advantage? (Medicare Replacement), Medicare Part D? (Prescription Drug).
4. Click the Next button to go to the next step in Enrollments in Process.



Review & Submit:

1. The Review & Submit page captures the selections that were made throughout the enrollment process and allows for one final review of the data entered.
2. If you need to edit anything on the page, you can click the Edit links on the top right side of each section.
3. Click the Next button & Continue in each section to return to the Review & Submit page to finish the enrollment.
4. Finalize the enrollment by clicking **Submit Enrollment**.
5. Once the enrollment has been successfully completed, a success message will then be displayed as **" Your Employee was Added Successfully."**



Enrollments Listing:

The **Enrollments Listing page** allows you to review the status for incomplete and processing enrollment transactions.

User selects **Enrollment Listing** from on **Enrollment** tab. Records can be viewed, modified, or deleted, depending upon their status.

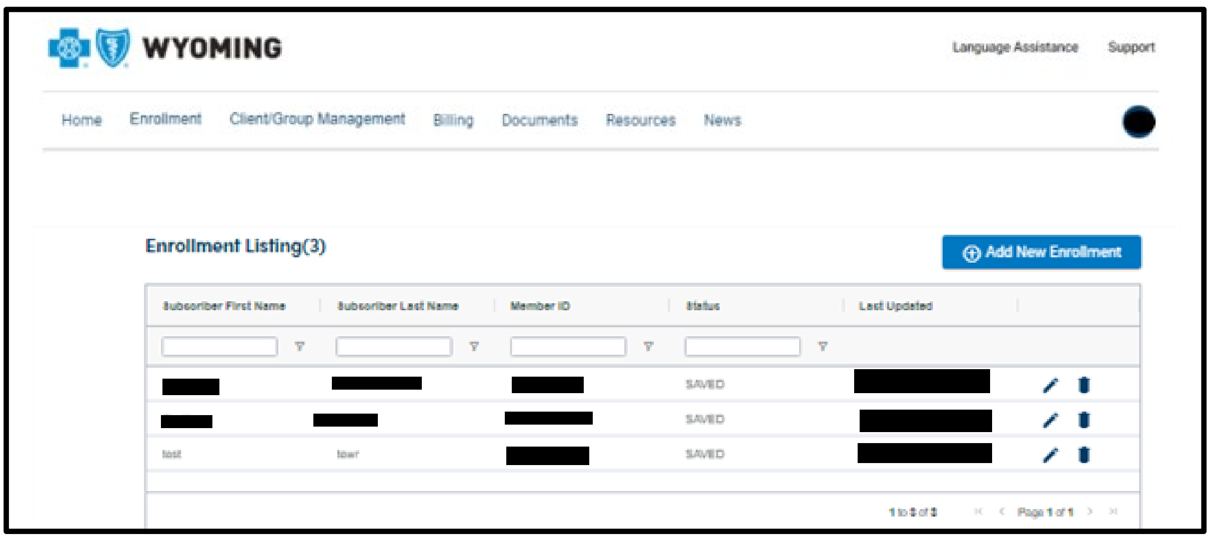
Enrollments in process: If there are more than 25 enrollments in process, users can view additional enrollments by clicking the right arrow (>) button at bottom of grid.

Saved status:

1. Records in the Saved status (not sent for processing yet) can be modified by clicking on the Edit icon for the respective row in the grid.
2. Clicking on the Edit icon, the system will display the enrollment form and you can select Edit Employee Record.
3. Saved enrollments can be deleted by clicking the delete (trashcan) icon. A warning message for deleting the transaction will appear and user would need to select yes to proceed and that action will delete the transaction.

Submitted or Partially Submitted status:

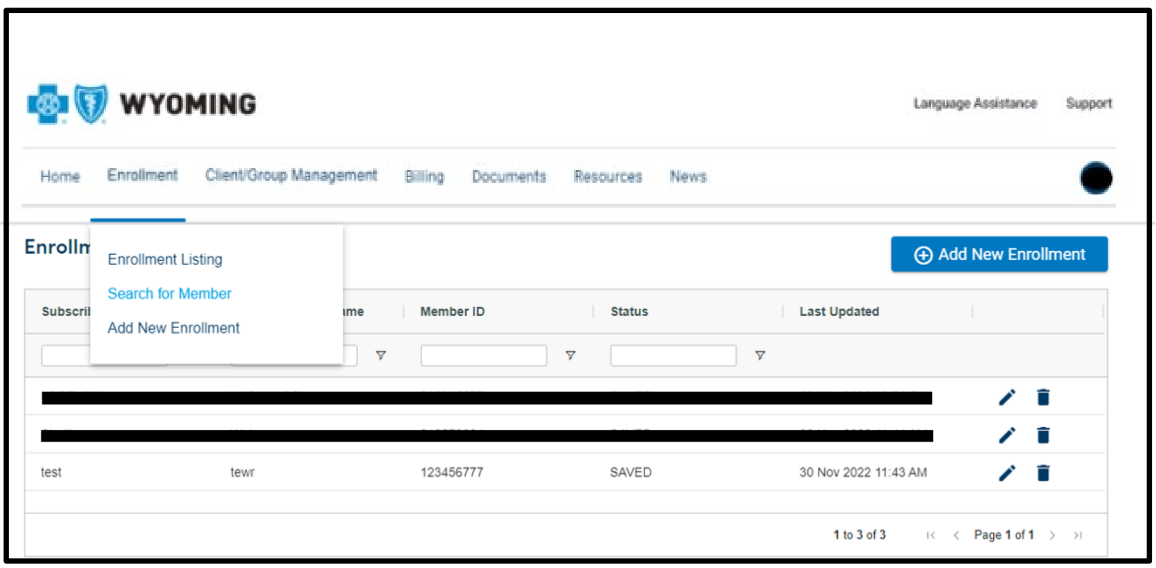
The subscriber record has been sent for processing but has not yet been finalized by enrollment.



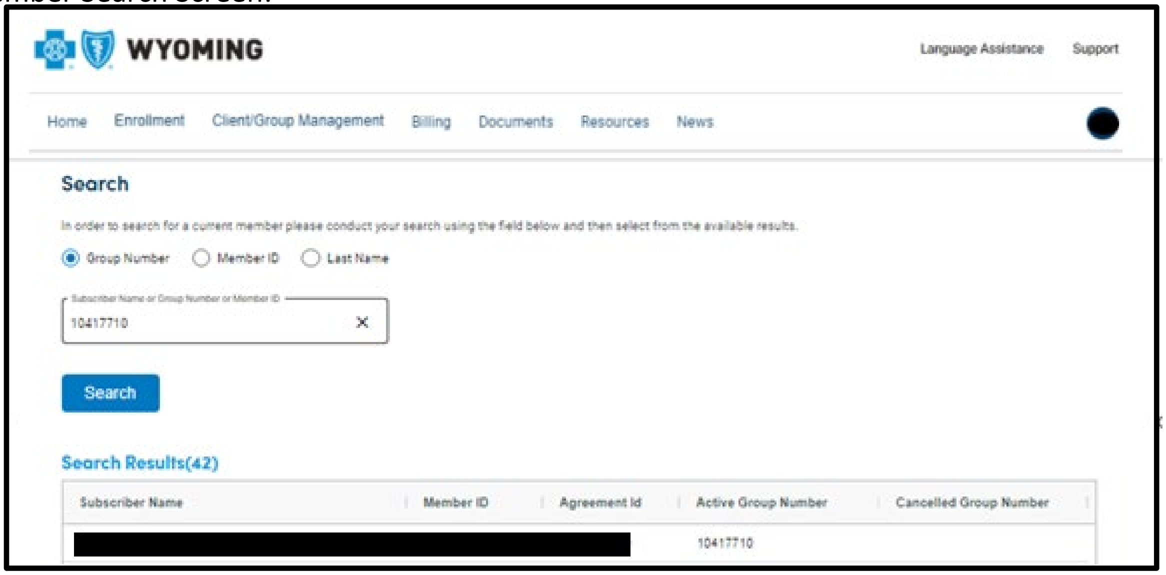
Search For Member:

1. Employee **Search for Member** functionality allows you to find enrollment data by entering any of the following of an employee's:
    - Group Number
    - Member ID (UMI) or SSN
    - Last Name
2. System will load the search results for the employee (even if it's one/single employee record) in the grid format.
3. User selects the employee record to view and clicks on Subscriber Name hyperlink from the grid, and system loads directly to the tabs based on selected task/action on the home page Edit Employee Record.
    a. Change PCP
    b. Add Dependent
    c. Manage Spending Accounts (if applicable)
    d. Review Claims (if applicable)
    e. Manage ID Cards
    f. Cancel Coverage (only for active employees)
    g. Reinstate (only for cancelled employees)

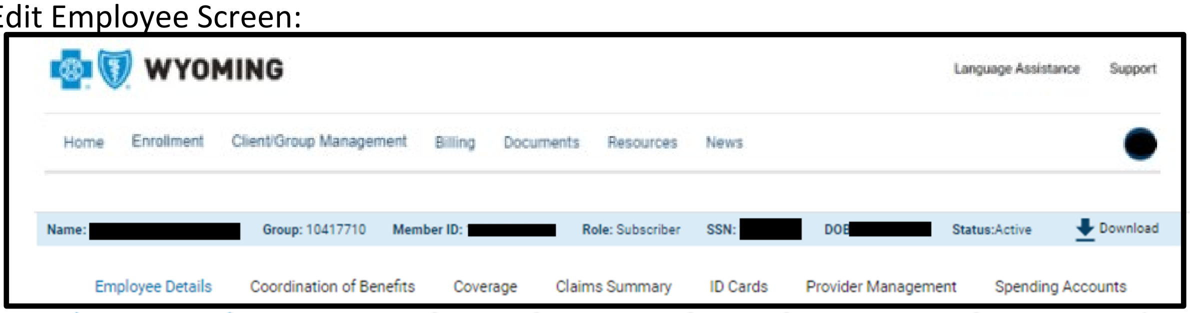
Important! You will only be able to Search for Member that are in the groups you are entitled to view.



Member Search Screen:



Edit Employee Screen:



View Subscriber Summary:

User can view the subscriber's summary by clicking on the Subscriber Name link from grid after the Search for a member search results display.
A download option is available to download the Subscriber Summary.

The following actions are also available from the View Subscriber Summary page:

- Edit Employee Record
- Change PCP
- View and Order ID cards
- Manage Spending Account Elections (if applicable)
- Claims (if applicable)
- ID Cards
- Cancel Coverage (only for active employees)
- Reinstate (only for cancelled employees)

Edit Employee Flow:

This functionality allows you to edit the employee record. You can make multiple changes on the same page and save once.

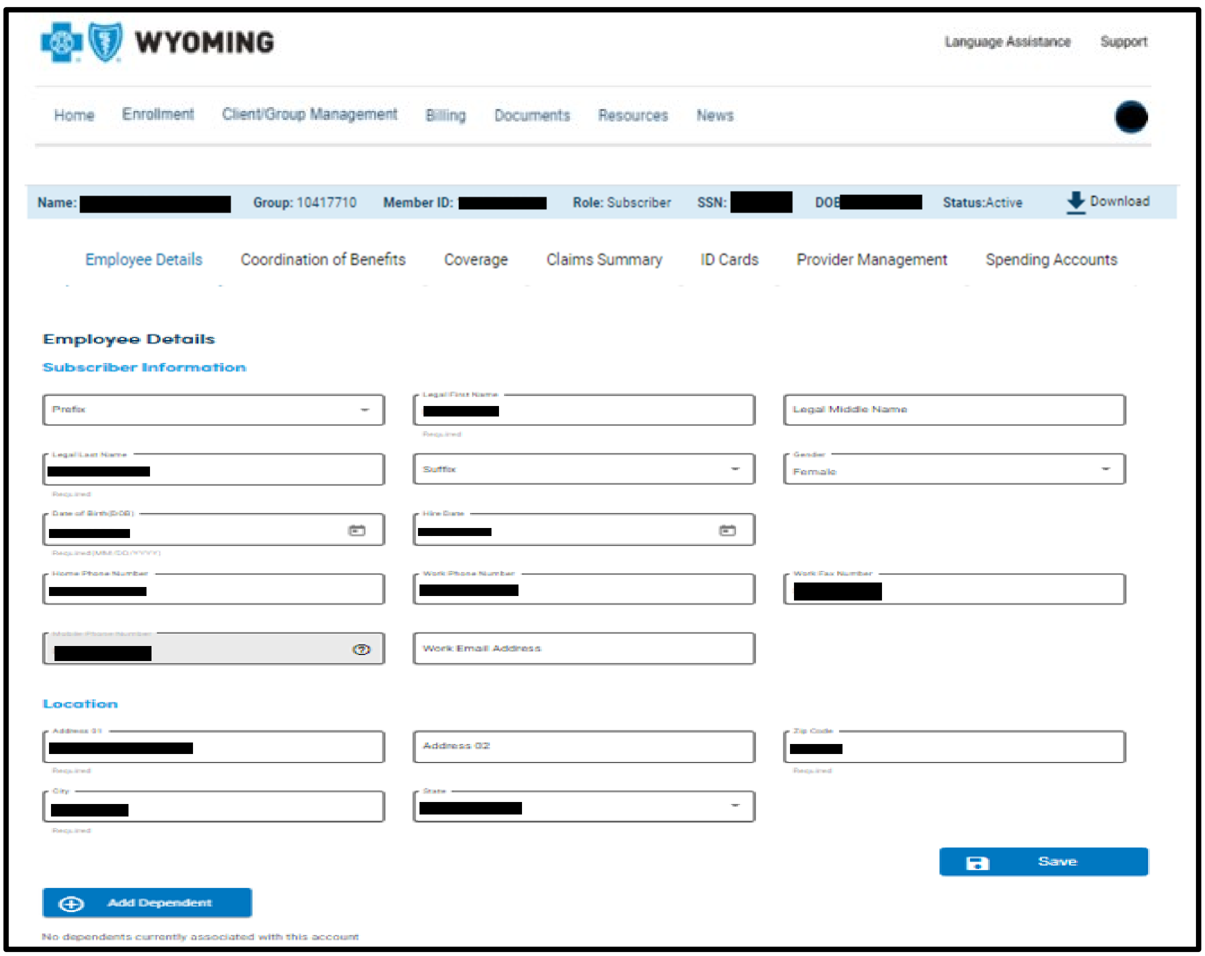
Use this option if user wish to:

- View demographic information for the Subscriber or Dependents.
- Update or add Other Insurance information.
- Update or add Medicare information.
- Add New Dependent and Assign coverage to new or existing dependents.
- Change existing coverage.

Edit Demographic Information:

1. Search for a Member by Group Number/ Member ID/ Last Name.
2. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
3. *System loads the Edit Employee page in **Employee details** section.*
4. Edit the demographic information if applicable.
5. Click the Save button.
6. If changes are successful, a success message displayed as **"Employee Information Updated Successfully"**.

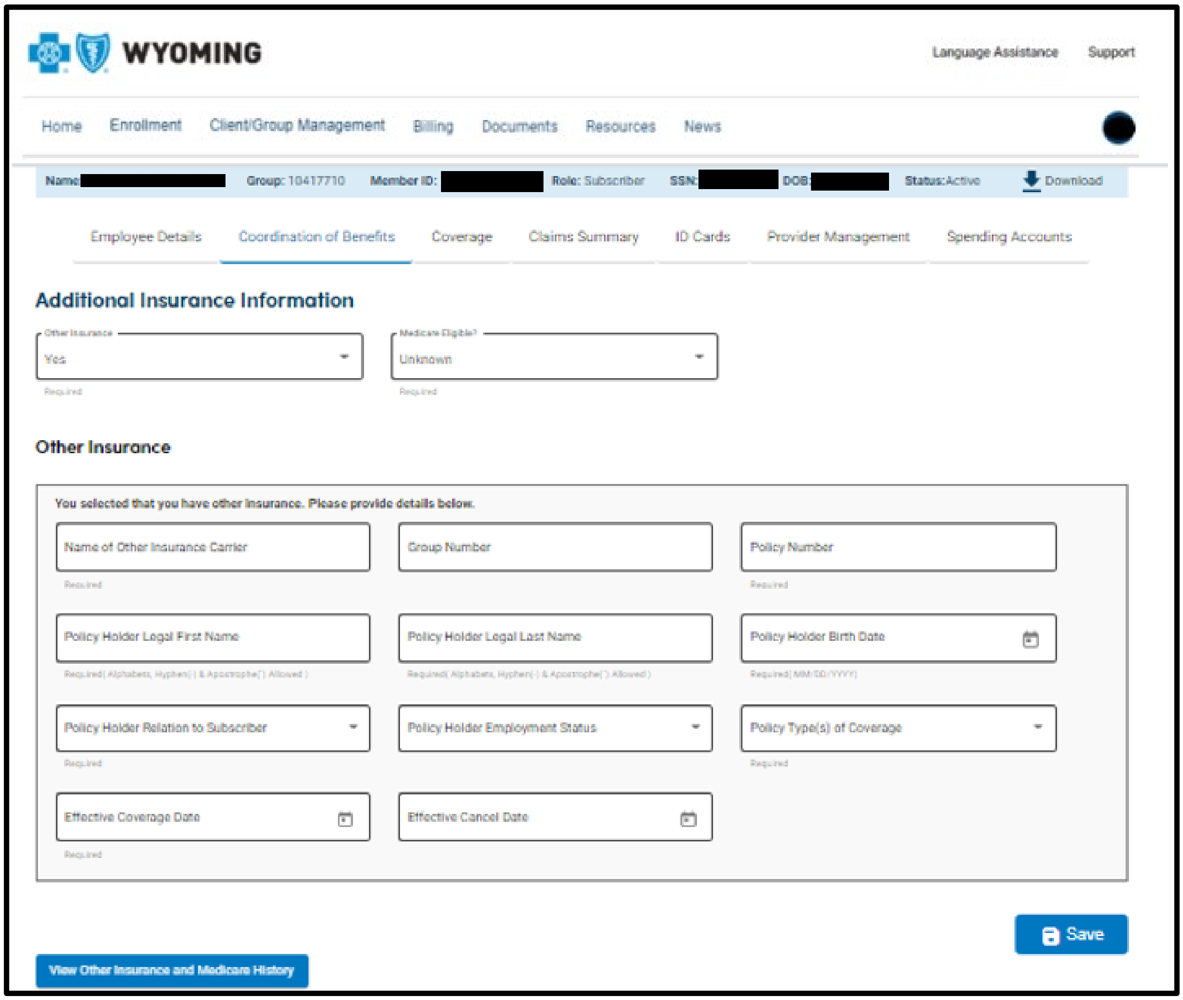
Edit Flow: Employee Details:



Add or Edit Other Insurance

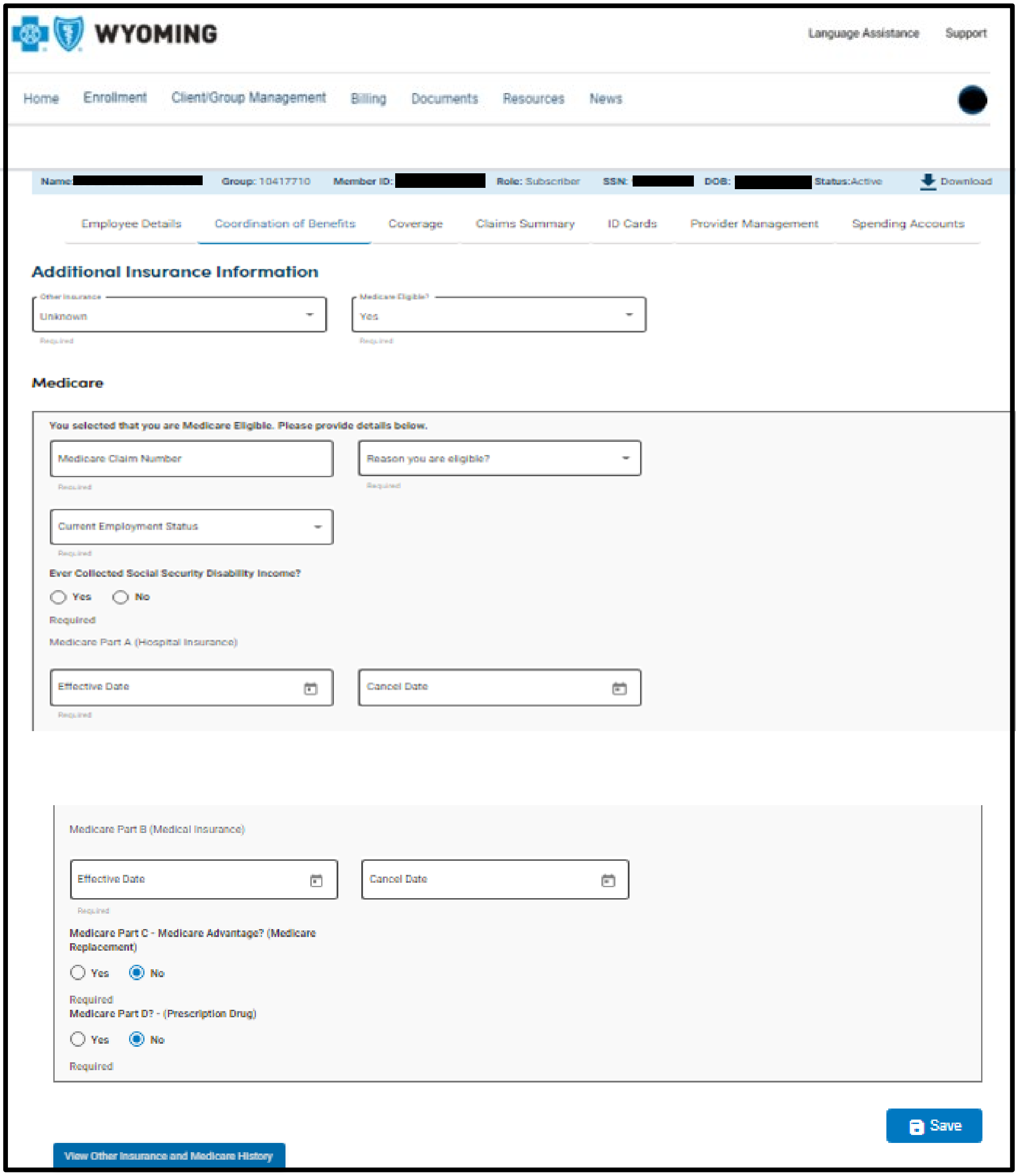
1. Search for a Member by Group Number/ Member ID/ Last Name.
2. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
3. *System loads the Edit Employee page in **Employee details** section.*
4. Click on Coordination of Benefits tab, system displays Additional Insurance information page.
5. Select Other Insurance as Yes for Subscriber followed by Dependent (If applicable) from dropdown list, system will populate the Other Insurance tab for the flow.
6. Enter the Other Insurance and ensure update all required fields (Name of Other Insurance Carrier, Group Number, Policy Number, Policy Holder Legal First Name, Policy Holder Legal Last Name, Effective Coverage Date, Effective Cancel Date, Policy Number, Policy Holder Relation to Subscriber, Policy Holder Birth Date, Policy Holder Employment Status, Policy Holder Type(s) of coverage.) are completed.
7. Click the Save button.
8. If changes are successful, a success message is displayed as **"Employee Information Updated Successfully"**.

Edit Flow: Coordination of Benefits – Other Insurance:



Add or Edit Medicare Information:

1. Search for a Member by Group Number/ Member ID/ Last Name.
2. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
3. *System loads the Edit Employee page in **Employee details** section.*
4. Click on Coordination of Benefits tab, system displays Additional Insurance information page.
5. Select Medicare Eligible as Yes for Subscriber followed by Dependent (If applicable) from dropdown list, system will populate the Medicare tab for the flow.
6. Enter the Medicare Eligible information and ensure update all the required fields (Medicare Claim Number, Reason you are Eligible? Current Employment status, Ever Collected Social Security Disability Income?, Medicare Part A (Hospital Insurance) – Effective Date and Cancel Date, Medicare Part B (Medical Insurance) – Effective Date and Cancel Date, Medicare Part C – Medicare Advantage? (Medicare Replacement), Medicare Part D? (Prescription Drug) are completed.
7. Click the Save button.
8. If changes are successful, a success message displayed as **"Employee Information Updated Successfully"**.
9. User can also view Other Insurance and Medicare History Information if applicable at the bottom of the page by clicking on **Other Insurance and Medicare History** button.
10. System displays Other Insurance and Medicare History Information if applicable.

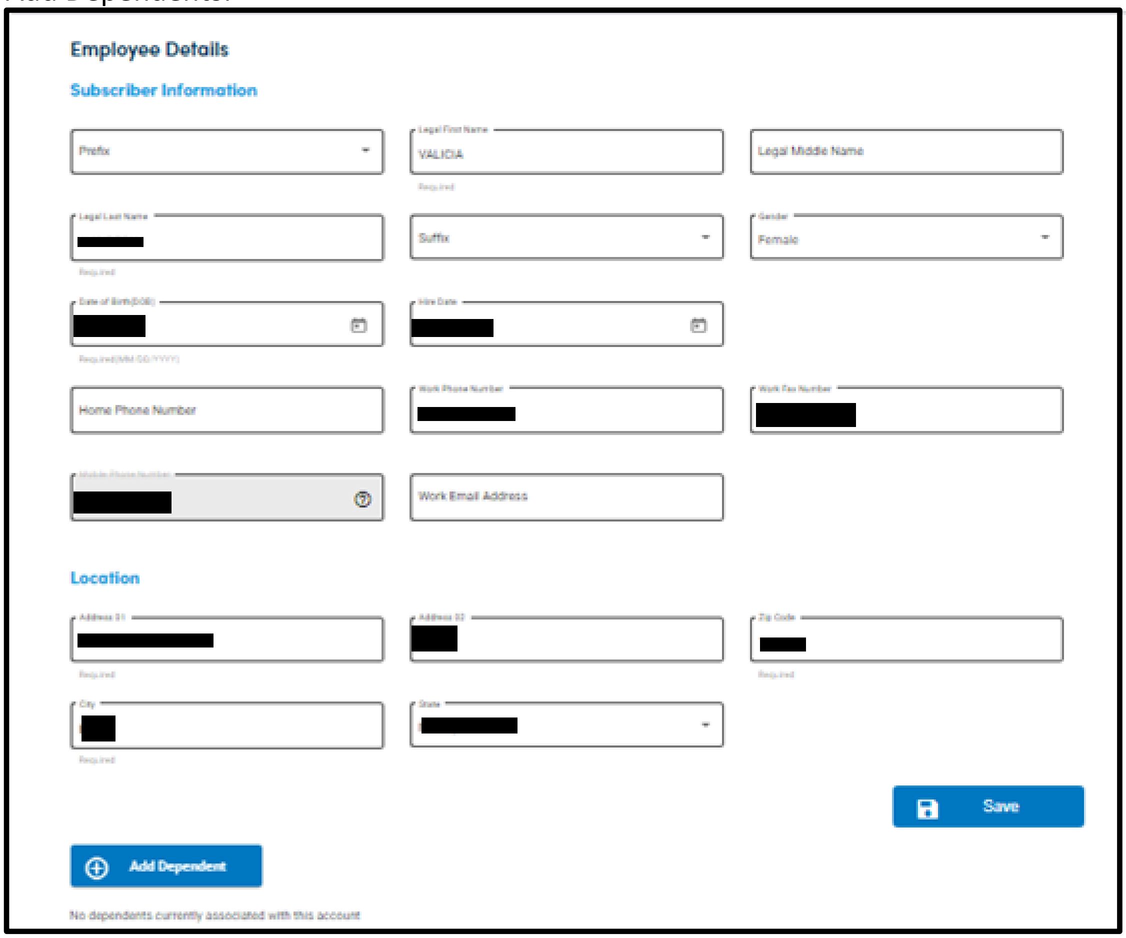

WYOMING
Language Assistance
Support
Home
Enrollment
Client/Group Management
Billing
Documents
Resources
News
Name: [redacted]
Group: 10417710
Member ID: [redacted]
Role: Subscriber
SSN: [redacted]
DOB: [redacted]
Status: Active
Download
Employee Details
Coordination of Benefits
Coverage
Claims Summary
ID Cards
Provider Management
Spending Accounts
Additional Insurance Information
Other Insurance
Unknown
Medicare Eligible?
Yes
Medicare
You selected that you are Medicare Eligible. Please provide details below.
Medicare Claim Number
Reason you are eligible?
Current Employment Status
Ever Collected Social Security Disability Income?
Yes
No
Required
Medicare Part A (Hospital Insurance)
Effective Date
Cancel Date
Medicare Part B (Medical Insurance)
Effective Date
Cancel Date
Medicare Part C - Medicare Advantage? (Medicare Replacement)
Yes
No
Required
Medicare Part D? - (Prescription Drug)
Yes
No
Required
Save
View Other Insurance and Medicare History

Add New Dependents and Assign Plan Coverage to New or Existing Dependents:

Add New Dependent(s)*:*

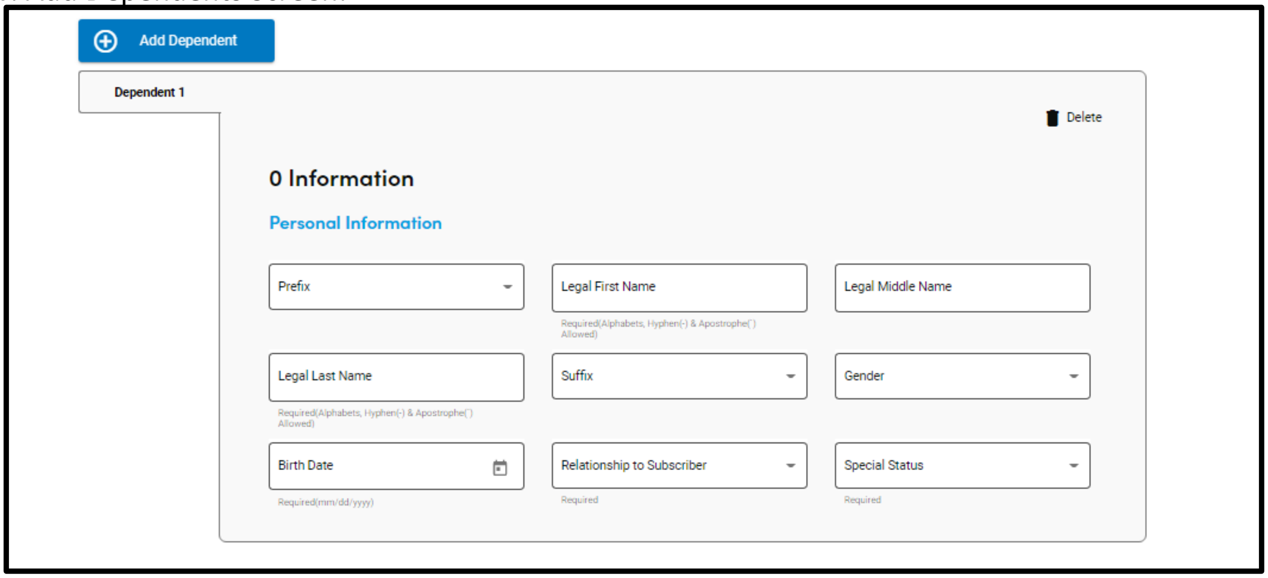
1. *If no dependents are added to the subscriber, then the system will show "***No dependents currently associated with this account***" in Employee Details Section.*

Edit Flow: Add Dependents:



1. Click Add dependent button *to add new members under the subscriber information.*
2. Search for a Member by Group Number/ Member ID/ Last Name.
3. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
4. *System loads the Edit Employee page in* ***Employee details*** *section.*
5. Click **Add dependent** button, *system loads Dependent Management tab.*
6. Enter all required fields for the dependents (Prefix, Legal First Name, Legal Middle Name, Legal Last Name, Suffix, Gender, Birth date, Relationship to Subscriber, Special Status).
7. Click Save button to save the Dependent information.
8. If changes are successful, a success message displayed as "**Employee Information Updated Successfully"**.

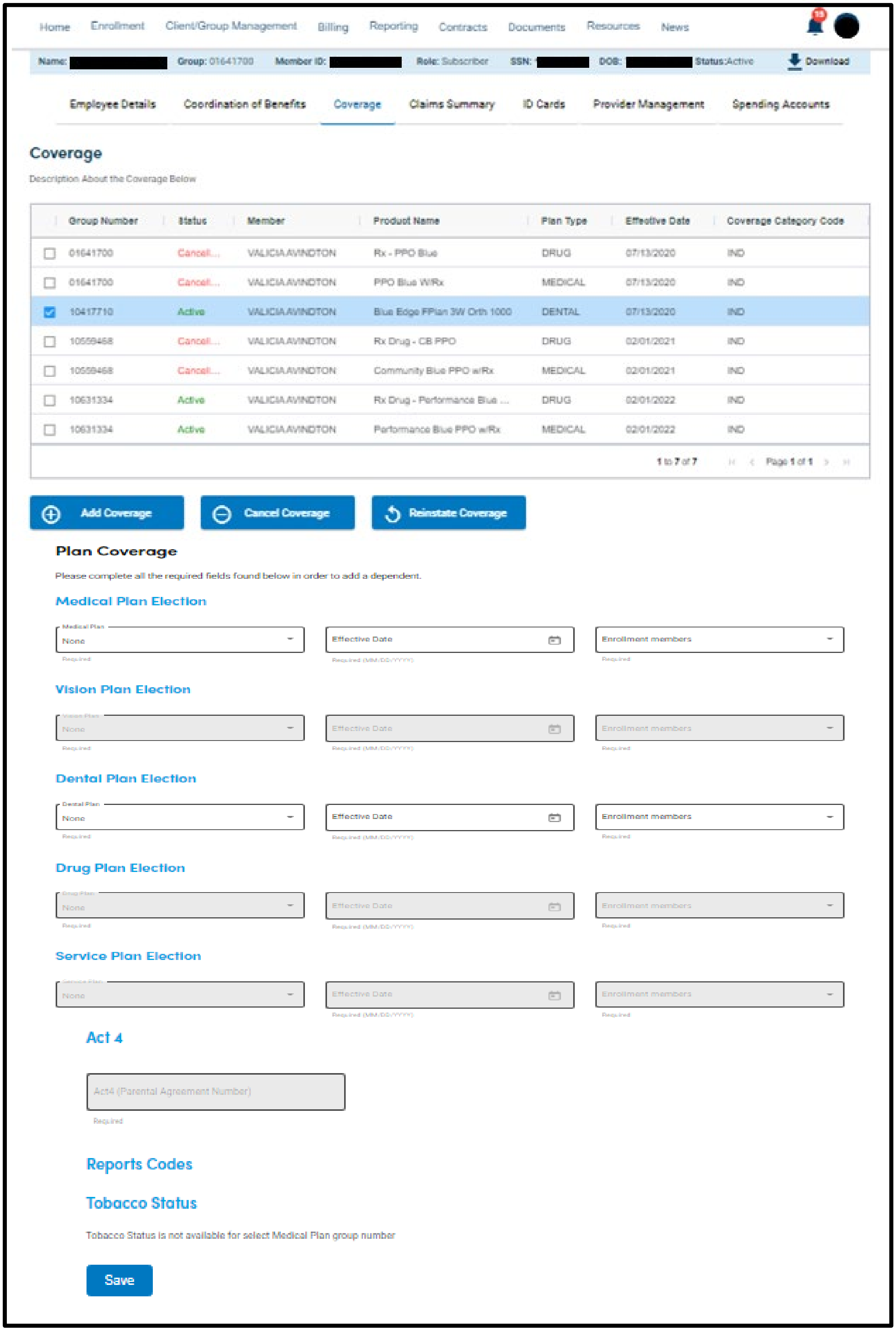
Edit Flow: Add Dependents Screen:



Assign Plan Coverage to New or Existing Dependents:

1. In the Coverage section, on each plan coverage, select the available plans (Medical Plan Election, Dental Plan Election, Vision Plan Election, Drug Plan Election and Service Plan Election) whichever is applicable for the Dependent(s) from dropdown list. If there are no Plans available for the LOB, it will be greyed out.
2. Enter Effective Date and select Enrollment Members (Dependents) applicable for respective Plans (Medical Plan Election, Dental Plan Election, Vision Plan Election, Drug Plan Election and Service Plan Election).
   Important! If an individual's checkbox is not checked, he/she will not receive coverage.
3. If applicable, Act4, Report Codes and Tobacco Status section will display once you select coverage. If there is other information needed, additional sections will display as well. Complete the information.
4. If an existing dependent doesn't have coverage, you can select the checkbox next to their name to assign coverage now.
5. Click the Save button.
6. If changes are successful, a success message displayed as "**Employee Information Updated Successfully**".

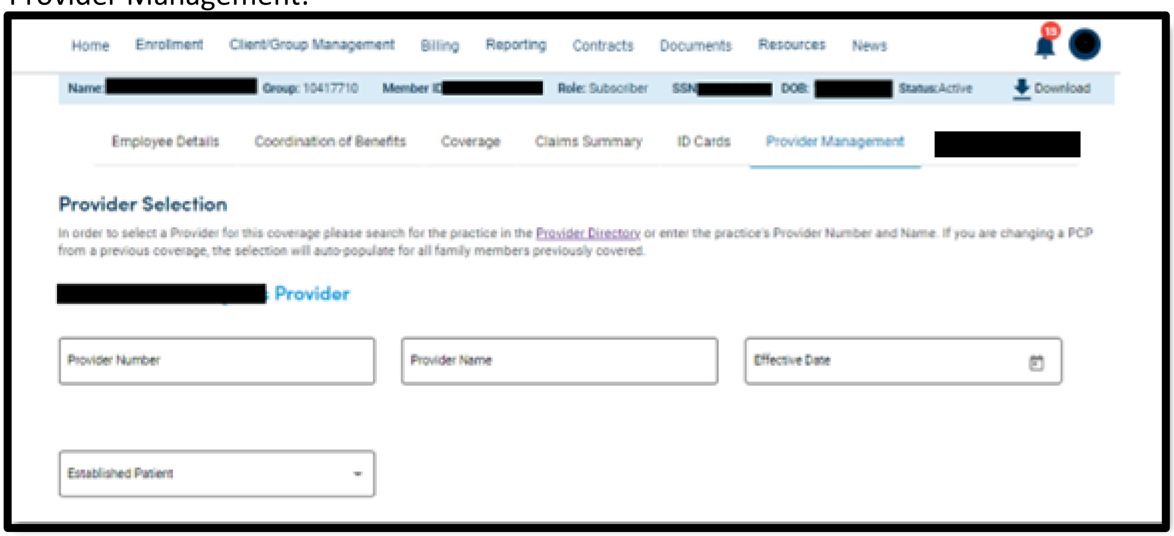
Edit Flow: Add Coverage:



Assign Provider to New or Existing Dependents:

1. Based on Plan coverage election, this step is applicable. I*f a new dependent is added during the edit workflow, provider selection will be displayed for the newly added member in* the Provider Management tab.
2. Enter *Provider Name, Provider Number, Select Established Patient (drop down) and Effective date (pre-populated based on coverage effective date).*
3. Click the Save button.
4. If changes are successful, a success message displayed as "**Employee Information Updated Successfully"**.
5. Based on Plan coverage election, this step is applicable. If an existing dependent doesn't have Provider, select the provider selection to assign Provider in Provider Management tab.
6. Enter *Provider Name, Provider Number, Select Established Patient (drop down) and Effective date (pre-populated based on coverage effective date).*
7. Click the Save button.
8. If changes are successful, a success message displayed as "**Employee Information Updated Successfully"**.
9. If you are changing a PCP from a previous coverage, the selection will auto-populate for all family members previously covered.
10. Validate *Provider Name, Provider Number, Select Established Patient (drop down) and Effective date (pre-populated based on coverage effective date).*
11. Click the Save button.
12. If changes are successful, a success message displayed as "**Employee Information Updated Successfully"**.

Edit Flow: Provider Management:



Edit Coverage:

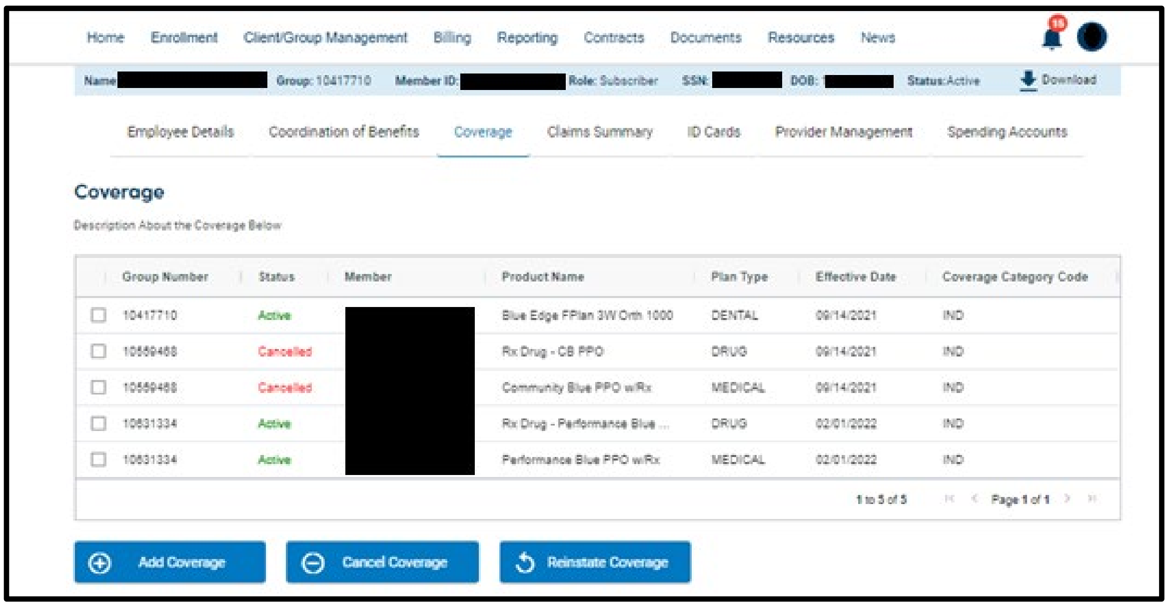
1. Coverage details are displayed *in grid format with Group Number, Status of coverage, Member Name, The product Name, Plan Type, Effective date, and Coverage Category Code.*
2. *Coverage details are also displayed as single row per Lob/per subscriber.*
3. *Coverage details of subscriber LOBs will be displayed followed by dependents in the alphabetical order.*

Important! If you don’t have modify access permissions for a group, checkboxes will not be displayed. You must contact BCBSWY to have your permissions changed.

*Coverage Tab will have **Three** buttons*

a) *Add Coverage*
b) *Cancel Coverage*
c) *Reinstate Coverage*

Edit Flow: Coverage:



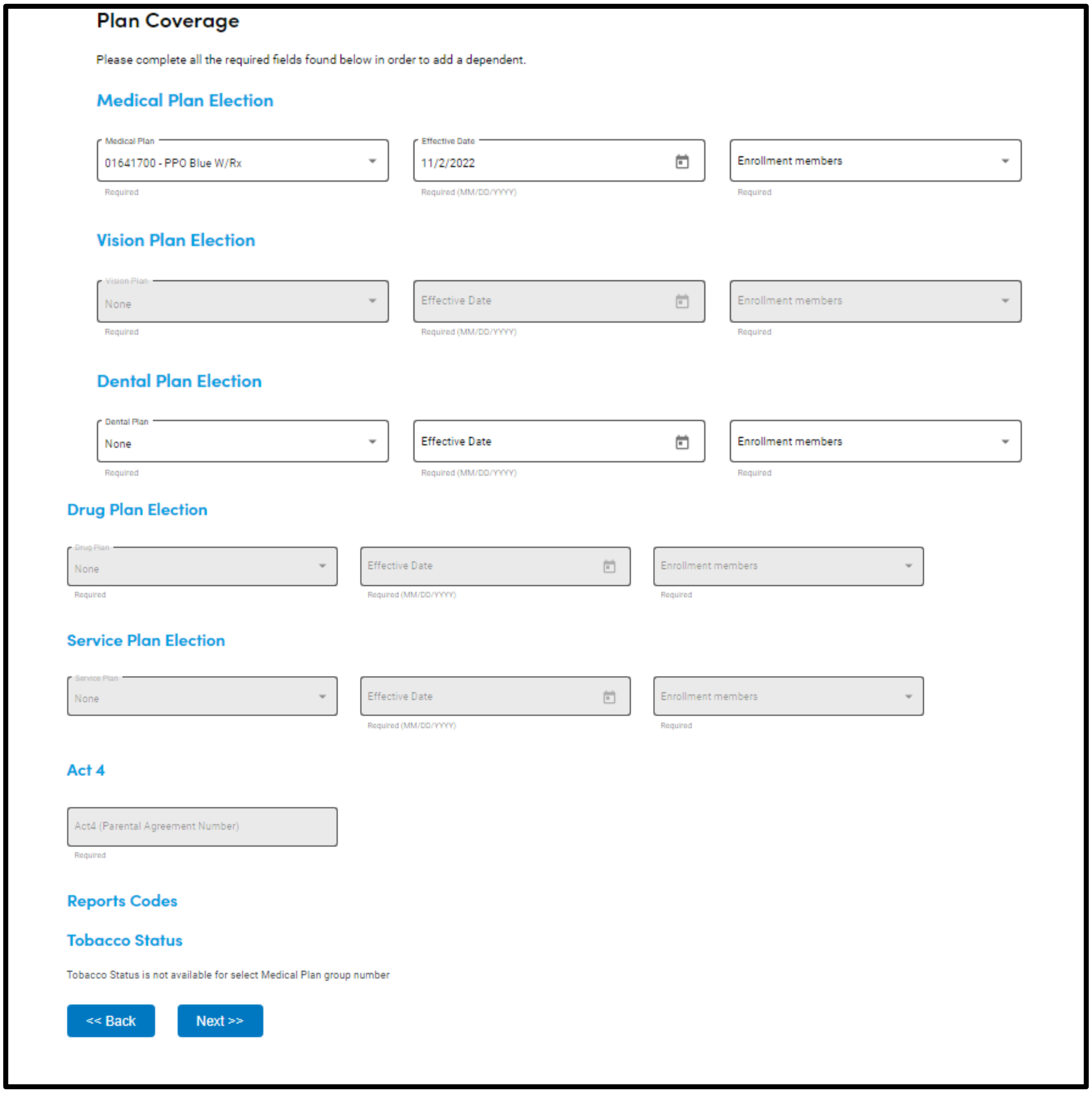
Add Coverage:

1. Search for a Member by Group Number/ Member ID/ Last Name.
2. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
3. System loads the Edit Employee page in Employee details section.
4. Click on Coverage tab, system loads the Coverage page.
5. Click on **Add Coverage Button,** system will redirect to Coverage Selection Tab of Add New Enrollment Flow.
6. On each plan coverage section, select the available plans (Medical Plan Election, Dental Plan Election, Vision Plan Election, Drug Plan Election and Service Plan Election) whichever is applicable for the Subscriber and Dependents from dropdown list. If there are no Plans available for the LOB, it will be greyed out.
7. Enter Effective Date and select Enrollment Members (Subscriber & Dependents) applicable for respective Plans (Medical Plan Election, Dental Plan Election, Vision Plan Election, Drug Plan Election and Service Plan Election).

Important! If an individual’s checkbox is not checked, he/she will not receive coverage.

8. If applicable, Act4, Report Codes and Tobacco Status section will display once you select coverage. If there is other information needed, additional sections will display as well. Complete the information.
9. Click the Save button.
10. If changes are successful, a success message displayed as “**Employee Information Updated Successfully**”.

Edit Flow: Add Coverage:



Plan Coverage

Please complete all the required fields found below in order to add a dependent.

Medical Plan Election

Medical Plan	Effective Date	
01641700 - PPO Blue W/Rx	11/2/2022	Enrollment members
Required	Required (MM/DD/YYYY)	Required

Vision Plan Election

Vision Plan		
None	Effective Date	Enrollment members
Required	Required (MM/DD/YYYY)	Required

Dental Plan Election

Dental Plan		
None	Effective Date	Enrollment members
Required	Required (MM/DD/YYYY)	Required

Drug Plan Election

Drug Plan		
None	Effective Date	Enrollment members
Required	Required (MM/DD/YYYY)	Required

Service Plan Election

Service Plan		
None	Effective Date	Enrollment members
	Required (MM/DD/YYYY)	Required

Act 4

Act4 (Parental Agreement Number)

Required

Reports Codes

Tobacco Status

Tobacco Status is not available for select Medical Plan group number

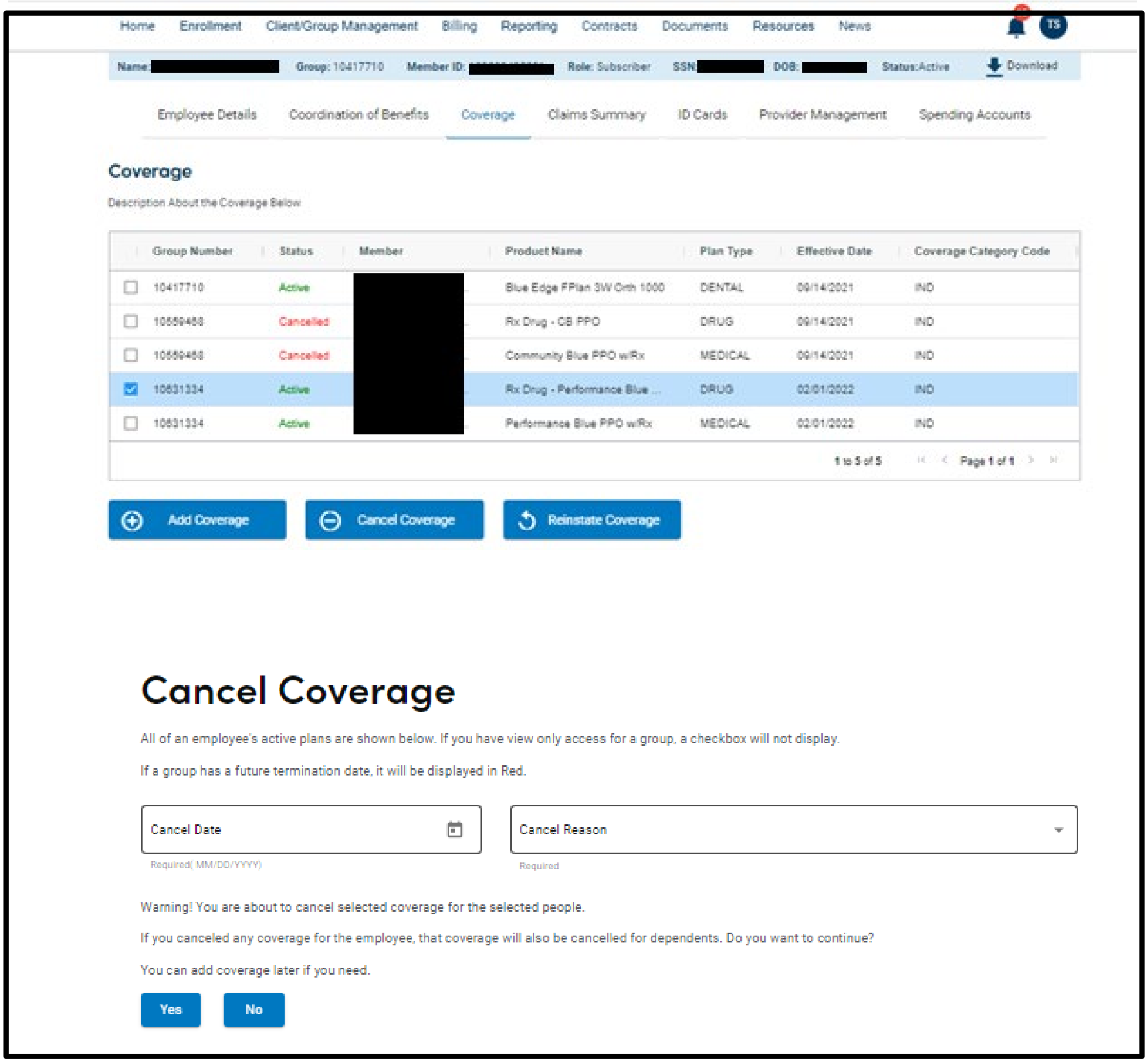
<< Back   Next >>

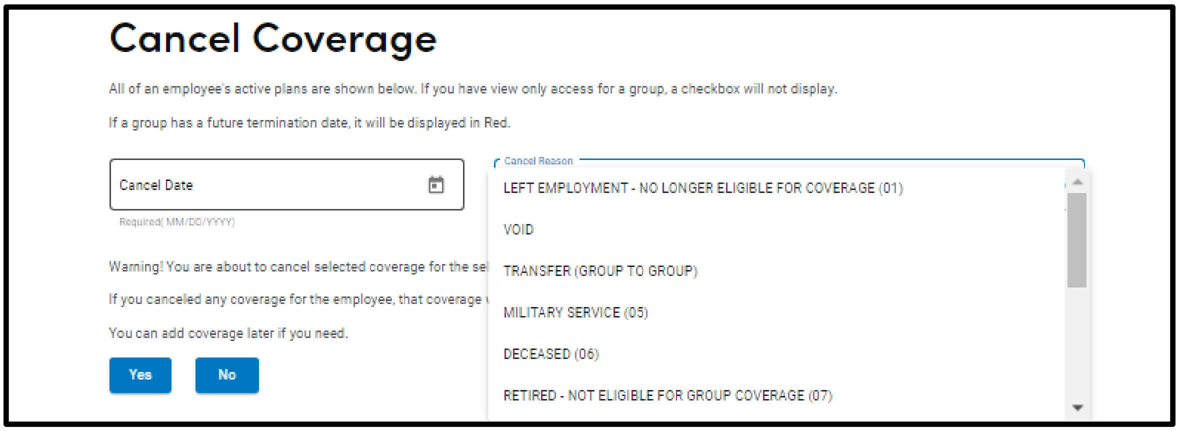
Cancel Coverage:

System displays the Cancel Coverage button only if user has modified access for the group.

1. Search for a Member by Group Number/ Member ID/ Last Name.
2. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
3. System loads the Edit Employee page in Employee details section.
4. Click on Coverage tab, system loads the Coverage page.
5. Selects the row of Employee record (Subscriber / Dependent) in the grid.
6. Click on Cancel coverage button.
7. System displays Cancel Coverage section.
8. Select Cancel date.
9. Select coverage to be cancelled with cancel reason from dropdown list.
10. Click Yes on the warning message to proceed with cancel.
11. System displays confirmation message.

Edit Flow: Cancel Coverage:





Cancelling Spending account:

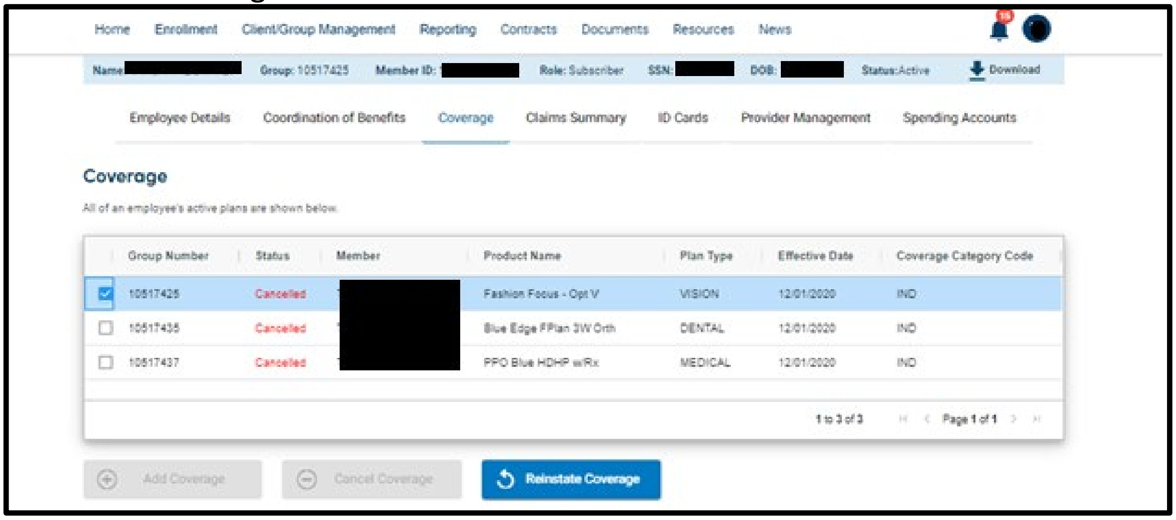
Selecting the Cancel Spending Account button navigates to the Spending Account Elections page.

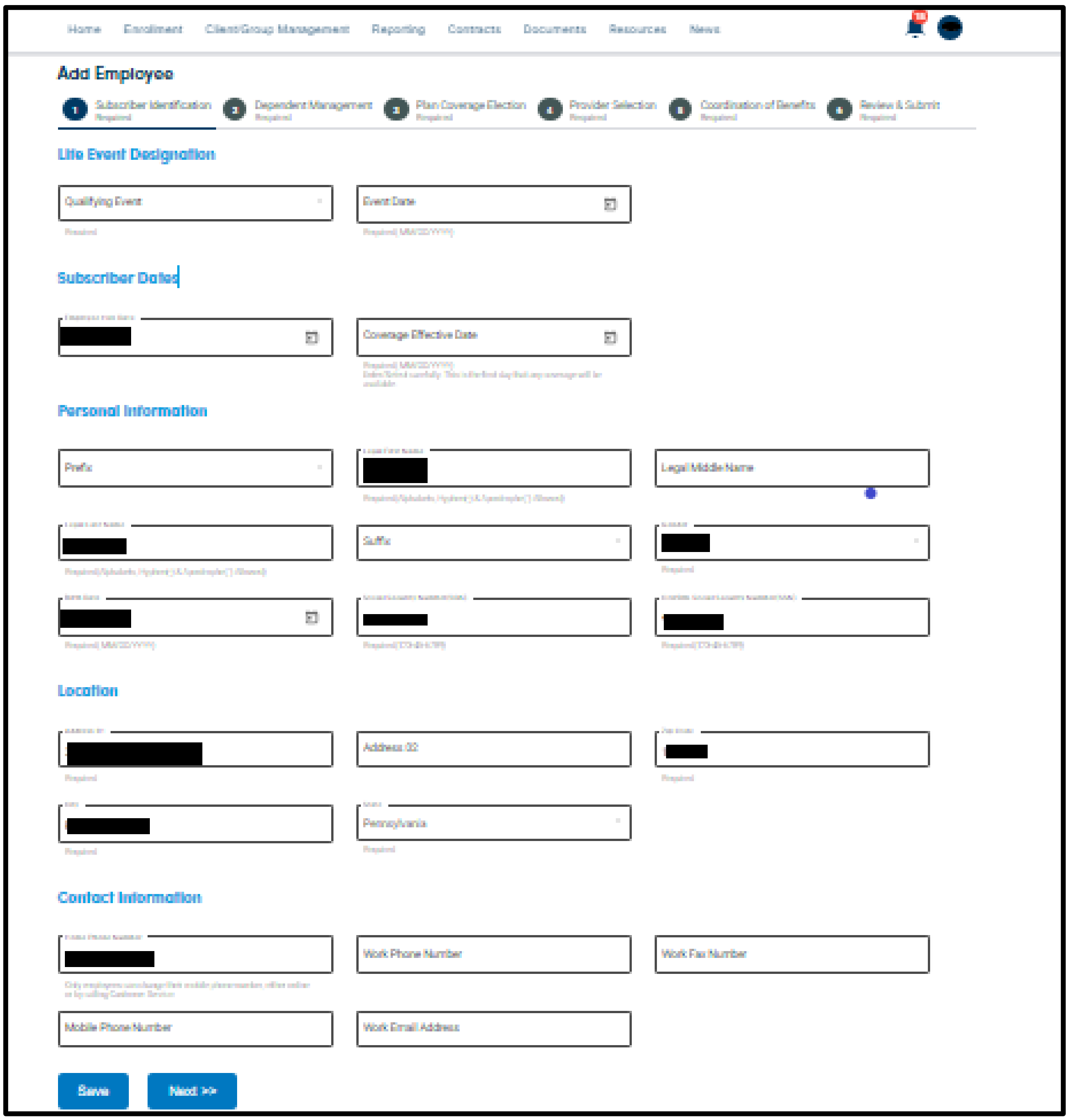
1) System display Cancel Spending Account option for spending account groups.
2) Users select Spending Account and click on Cancel coverage.
3) The system displays the Manage Spending Account Elections page with any spending account options that need to be cancelled.

Reinstate Coverage*:*

1. Search for a Member by Group Number/ Member ID/ Last Name.
2. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
3. System loads the Edit Employee page in Employee details section.
4. Click on Coverage tab, system loads the Coverage page.
5. Selects the row of Cancelled Employee record (Subscriber / Dependent).
6. Click on Reinstate Coverage button.
7. System displays the Reinstate Coverage section.
8. Select Coverage effective date and click Continue.
9. System will be redirected to add new enrollment workflow with employee information pre-populated. At this time, information can be edited or added to reflect the current request.
10. Follow the Add Employee process to complete and reinstate the enrollment.

Edit Flow: Reinstate Coverage:





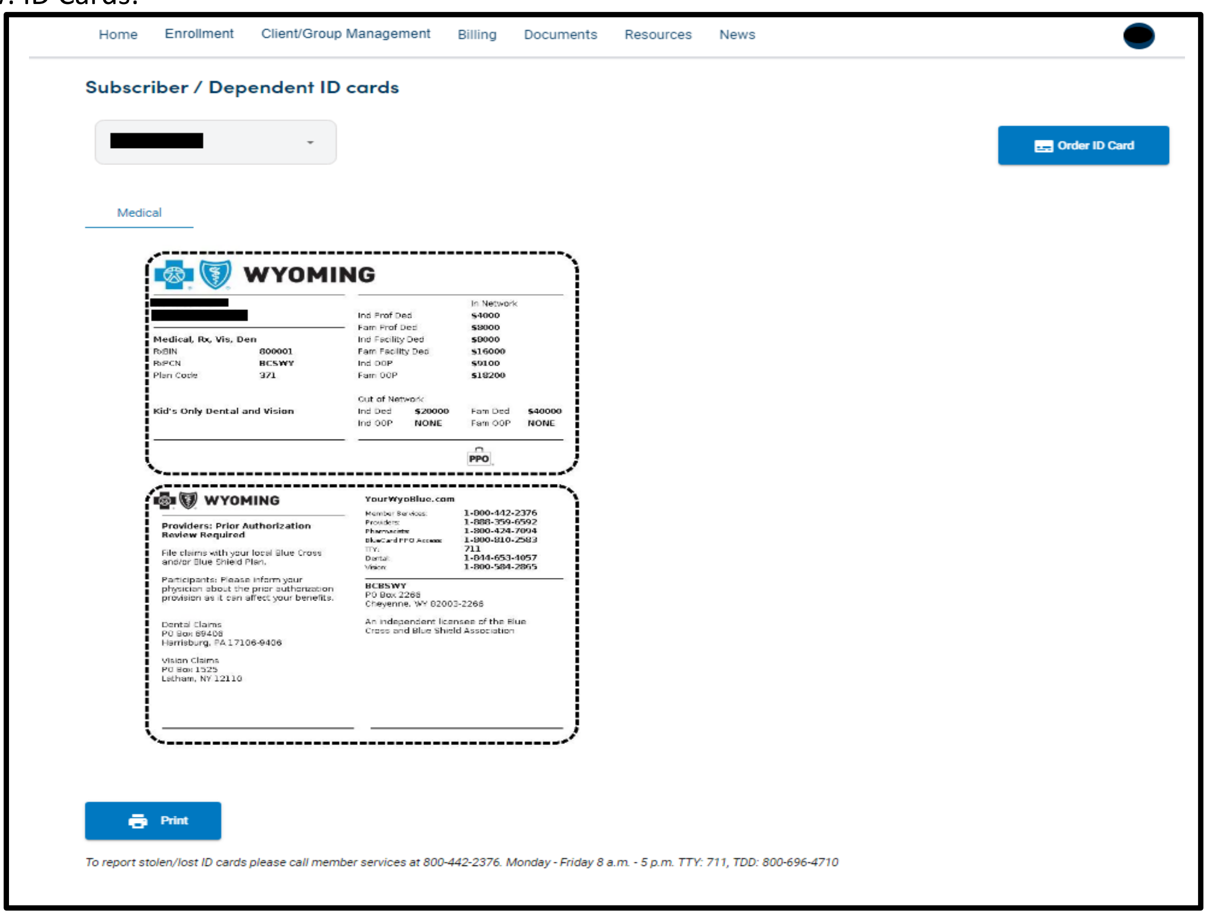
ID Cards:

User can view, order, and print ID cards for employee and dependents. Virtual ID cards are available on the first day of coverage. User can also request replacement ID cards on behalf of your employees.

An ID card can be mailed to the employee address on file or another address without replacing the address on file.

1. Search for a Member by Group Number/ Member ID/ Last Name.
2. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
3. System loads the Edit Employee page in Employee details section.
4. Click on ID Cards tab, system loads the Subscriber/Dependent ID Cards page.
5. Member ID card is displayed.
6. Select Member (Subscriber/Dependent Name) from dropdown list.
7. Select applicable plans (Medical/Dental/Vision).
8. All the Employee (Subscriber & Dependents) Virtual ID cards including front and back loads *is displayed.*
9. Click Order button to Order the ID card for a Subscriber/Dependent.
10. Order ID cards Popup Page displayed.
11. Select the member (Subscriber/Dependent Name) and plan type(s) for the card you would like to order using dropdown and click on checkbox.
12. Verify mailing address.
13. Click on Submit Order Button for Ordering the ID cards.
14. A Successful Message Pop up as “Thanks, your Order Placed Successfully”.
15. Print the ID card button by clicking the Print button on bottom right side.
16. Click on Report *button on bottom left side to get the Customer support information.*

Edit Flow: ID Cards:

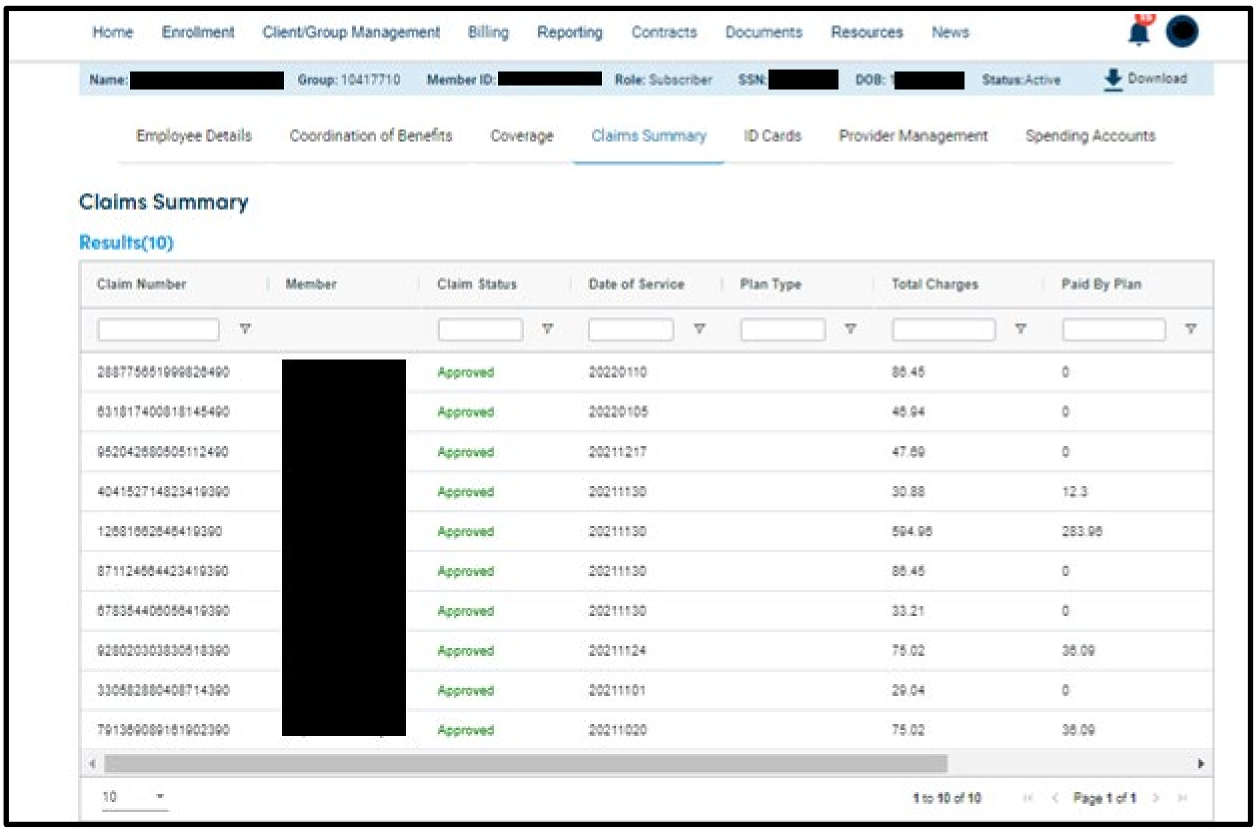


View Claims Summary:

Claims Summary page is viewed after the user accepts the agreement to view claims.

1. Search for a Member by Group Number/ Member ID/ Last Name.
2. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
3. System loads the Edit Employee page in Employee details section.
4. Click on Claims Summary tab, system displays the Claims Summary page.
5. *Select the Employee/Subscriber record to view claims and click on edit.*
6. The Claims Agreement page displays.
7. Click the Agree & Continue button to view claims for the selected employee and their dependents.
8. The *View Claims Summary* Page displays.

Edit Flow: View Claims Summary:

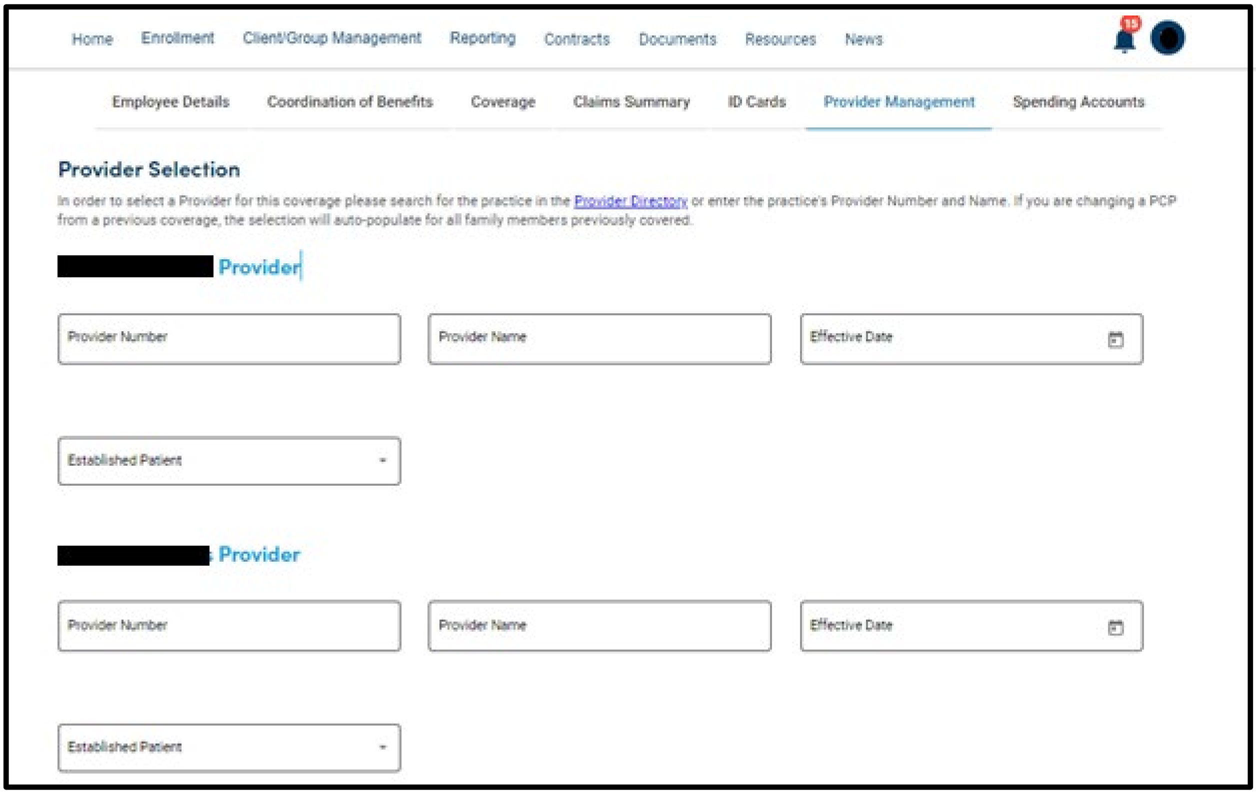


Change Primary Care Physician (PCP):

User can change the PCP for employee and dependents. This option is not applicable for a cancelled employee.

1. Search for a Member by Group Number/ Member ID/ Last Name.
2. Select Edit Employee Record and click on Subscriber Name hyperlink from the grid.
3. System loads the Edit Employee page in Employee details section.
4. Click on Provider management Tab.
5. Enter a new Provider Number and Provider Name or click Search Provider Directory to search for a provider.
6. Select a Reason and the Effective Date will be populated based on the reason selected.
7. Click the Save to submit the changes.
8. If changes are successful, a success message displayed as "**The PCP was successfully updated".**

Edit Flow: Change PCP:



Section 4: Client/Group Management Tab

Purpose: This section provides an overview of the Client/Group tabs and how to view and understand the Client and Group details and contacts.
Use the Client/Group Management Tab to access the Client Management and Group Management sub menu to get Client and group level information.

Note: It is NOT possible to edit information in the Client/Groups section. Contact your Client Manager if this information requires an update.

Client Management:

Client Management is used to view Client Level information. *Client Management page has below sections*

- Client General Information
- Report Codes (if applicable)
- Client Contacts

View Client Level Information:

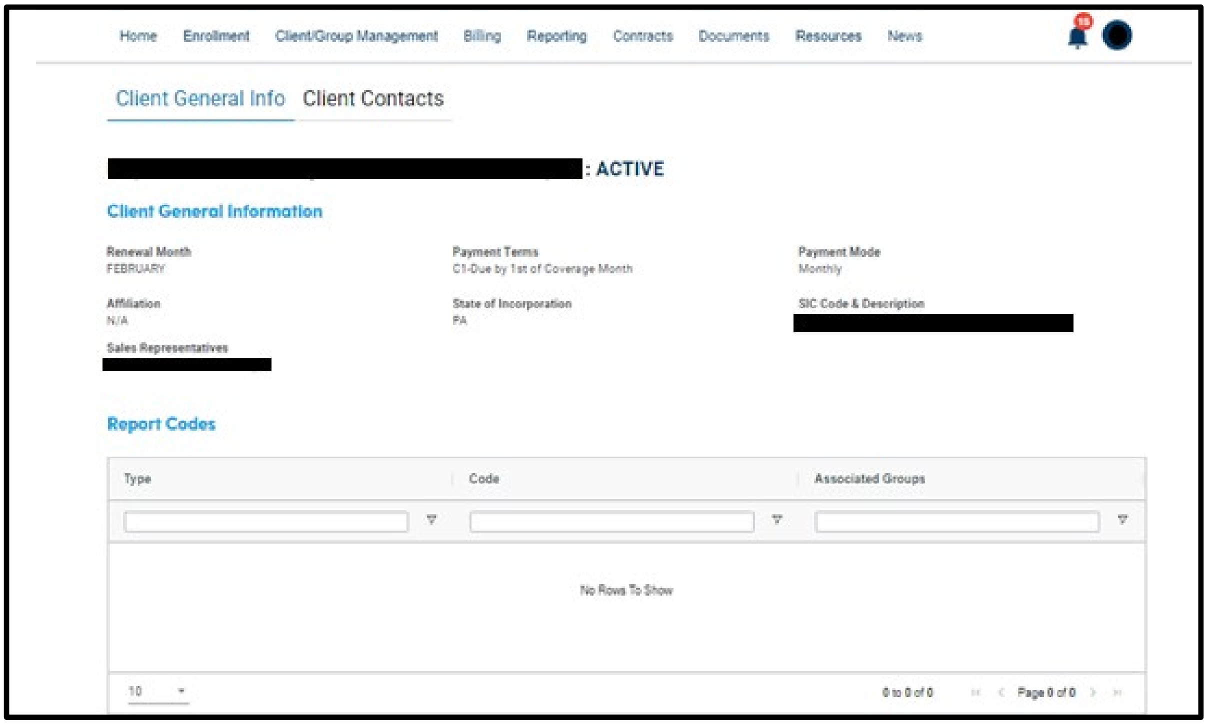
1. Select Client/Group Management tab on Homepage Header menu.
2. Click on Client Management sub menu.
3. System displays Client General Information page.
4. View Client General information with below details.

Term	**Definition**
Renewal Month	Your company's renewal month.
State of Incorporation	The state in which your company is incorporated.
Affiliation	The companies having a common interest above and beyond the purchase of health care.
Payment Mode	The frequency of payments.
Payment Terms	The due date for payments.
Sales Representatives	The names and titles of the sales representatives assigned to your company.
SIC Code & Description	The Standard Industrial Classification (SIC) code assigned to your company. & The type of business.
Report Code	Displays active report codes that are associated with the groups listed. Report codes are only shown if they are applicable to your Client setup.

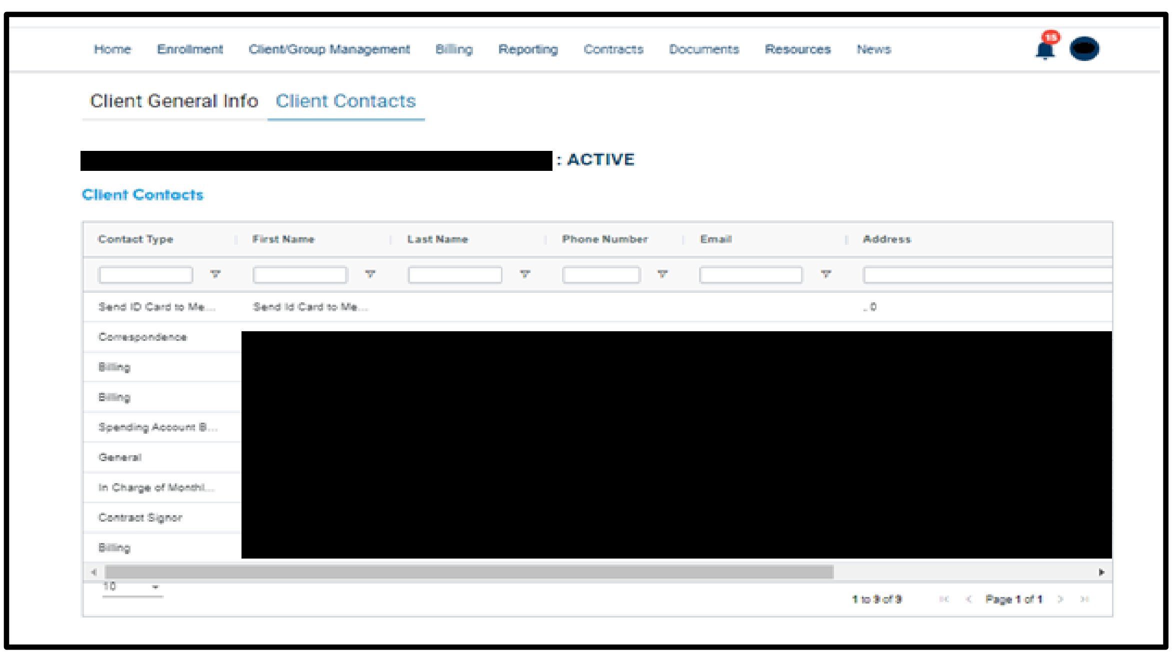
View Client Contacts:

5. Click Contacts from the top navigation to view client contacts.
6. The Client Contacts page displays contact information about the company's different contact types in grid format. Examples of contact types may include Billing, ID Cards, Monthly Reports, Correspondence, and Contract Signor.
7. The Report code page displays the report code type and code for associated groups. Report Codes are only shown if they are applicable to the Client’s setup.

Client Management: Client General Info:



Client Management: Client Contacts:



Group Management:

Group Management is used to view Group Level information. The Group General Information displays the basic information about the Group such as anniversary month, sales representatives, payment terms, SIC code and Group Contacts.

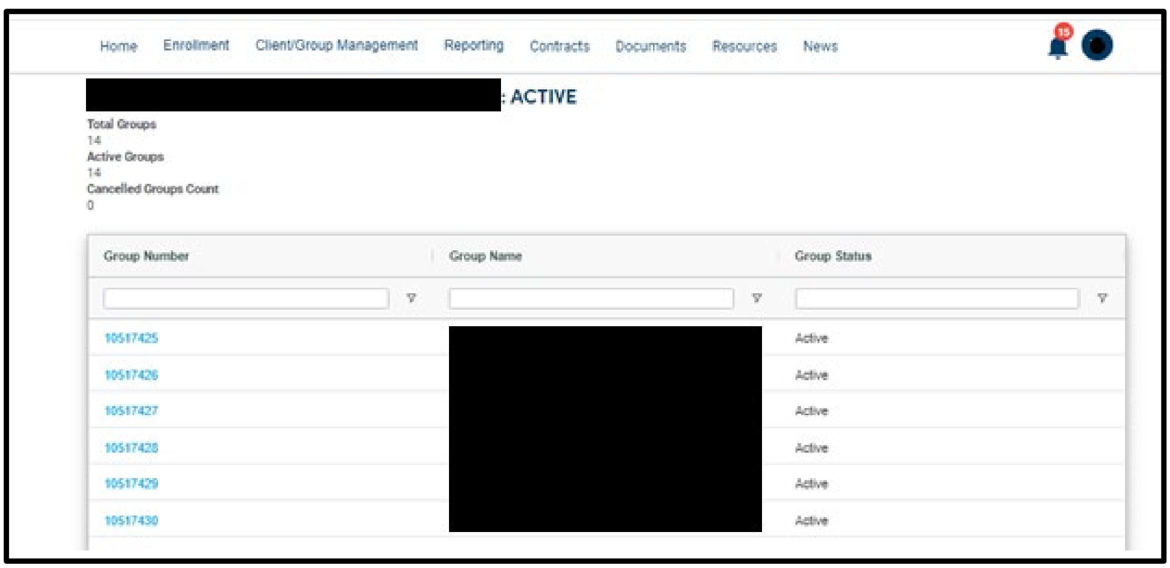
Group Management page has below sections:

I. Group General Information
II. Group Contacts

View Group Level Information:

1. Select Client/Group Management tab on Homepage Header menu.
2. Click on Group Management sub menu.
3. System displays Group Listing page in Grid format contains Group number, Group Name, Status (Active/Cancelled/Future), Renewal Month, Payment Mode, Payment Terms.
4. Group Listing page also displays Count of Total Groups, Active and Cancelled Groups.
5. Click on Group Number from grid to View individual group information.
6. System displays Group General information page with below details.
7. Group Number Individual page has below sections:
   a) Group General Information
   b) Eligibility
   c) Products
   d) Report Codes (If Applicable)

Group Management:

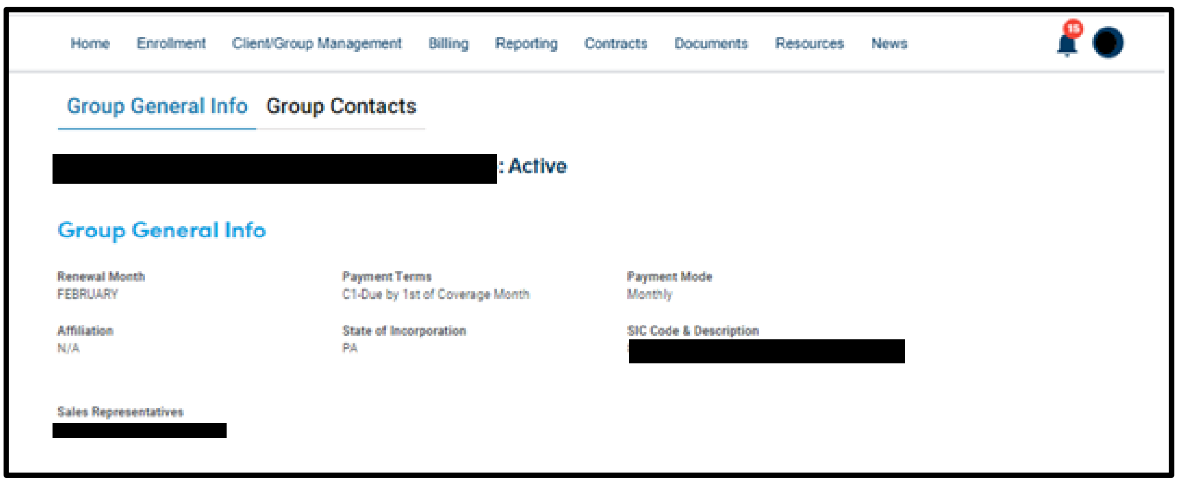


Group General Information:

System displays **Group General Information** section with the following information,

Term	Definition
Renewal Month	Your company's renewal month.
State of Incorporation	The state in which your company is incorporated.
Affiliation	The companies having a common interest above and beyond the purchase of health care.
Payment Mode	The frequency of payments.
Payment Terms	The due date for payments.
Sales Representatives	The names and titles of the sales representatives assigned to your company.
SIC Code & Description	The Standard Industrial Classification (SIC) code assigned to account. & The type of business.
Report Code	Displays active report codes that are associated with the groups listed. Report codes are only shown if they are applicable to your client setup.

Group Management: Group General Information:



Eligibility:

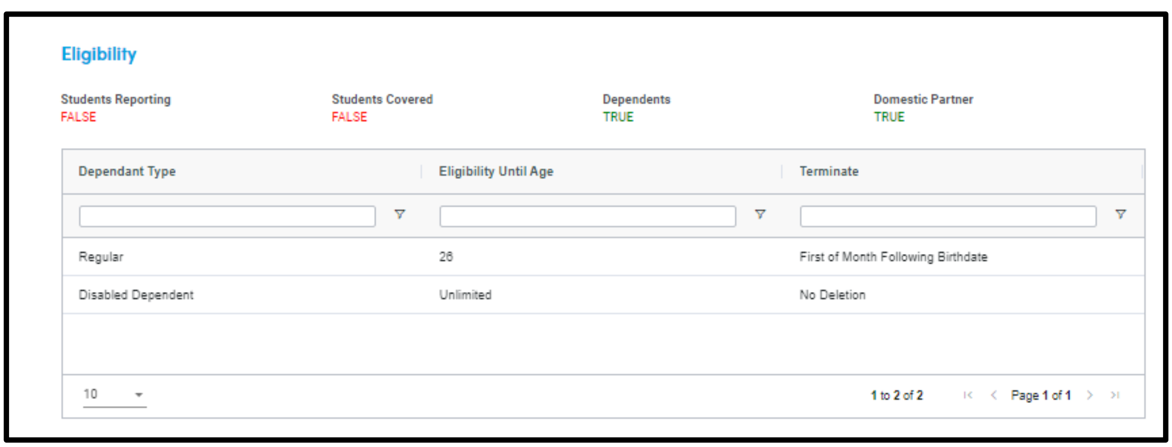
The Group Eligibility displays information about covered dependents, students, and domestic partners under Group General Information.

- System displays the Group Eligibility when the group number is clicked – Listed with Yes/No Options.
- The Group Eligibility section displays the following information under Group General Information grid.

Term	Definition
Dependents, Students, & Domestic Partners Covered	Display a green checkmark to the left of the item, they are eligible for (Yes) Display a red cross mark to the left of the item, they are not eligible for (No)
Students Reporting	This explains, as to whether a rule exists for student dependents to report their school status to maintain eligibility under a contract holder's coverage for contract Display a green checkmark to the left of the item, they are eligible for (Yes) Display a red cross mark to the left of the item, they are not eligible for (No)
Dependent Type	Regular, Disabled, or Student
Eligible To Age	The age at which coverage is discontinued for a dependent
Terminate	The rules for when a dependent's coverage terminates

- If the dependent type is yes, system displays each dependent type in grid format in rows contains Dependent Type, Eligible to Age, terminate.

Group Management: Eligibility:



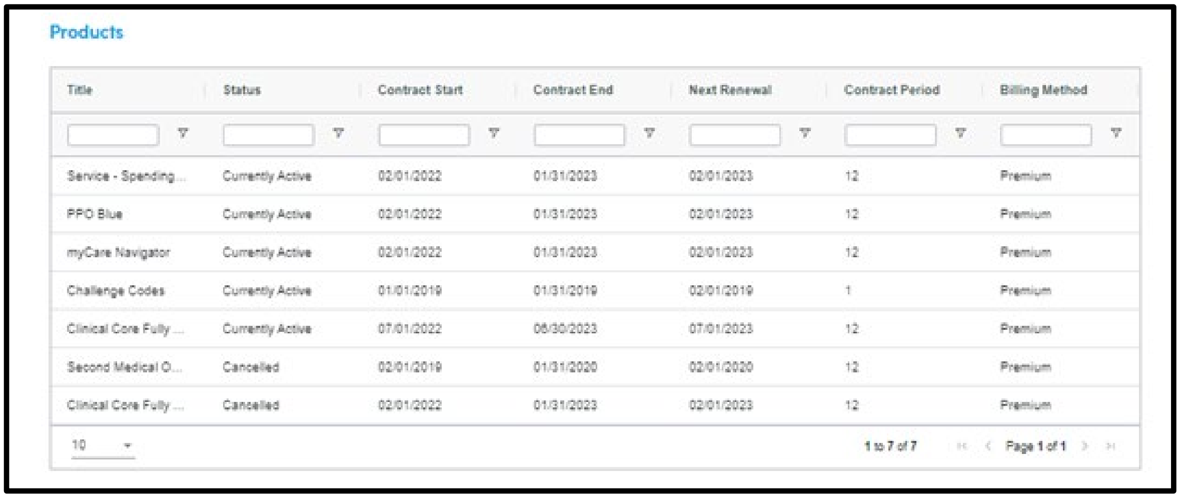
Group Products:

The Group Products page displays product information and status under Group General Information.

- System displays the Group Products when the group number is clicked under Group General Information.
- System displays both Active and Cancelled Products.
- System displays the following information under Group Products,

Product Name and Status	Eligible products for the group and indicates whether the product is currently active or effective on a future date
Contract Information	This includes the start date, end date of the contract as a date range single Column, contract Period, Renewal Month and Billing method.

Group Management: Products:



Products

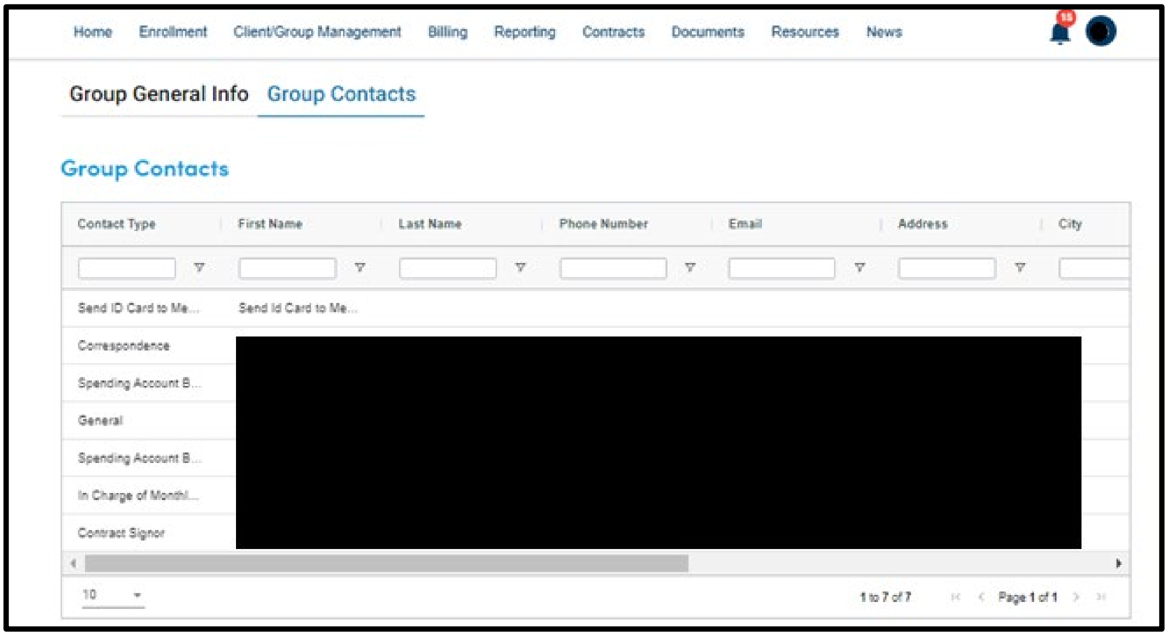
Title	Status	Contract Start	Contract End	Next Renewal	Contract Period	Billing Method
Service - Spending ...	Currently Active	02/01/2022	01/31/2023	02/01/2023	12	Premium
PPO Blue	Currently Active	02/01/2022	01/31/2023	02/01/2023	12	Premium
myCare Navigator	Currently Active	02/01/2022	01/31/2023	02/01/2023	12	Premium
Challenge Codes	Currently Active	01/01/2019	01/31/2019	02/01/2019	1	Premium
Clinical Core Fully ...	Currently Active	07/01/2022	06/30/2023	07/01/2023	12	Premium
Second Medical O...	Cancelled	02/01/2019	01/31/2020	02/01/2020	12	Premium
Clinical Core Fully ...	Cancelled	02/01/2022	01/31/2023	02/01/2023	12	Premium

10 1 to 7 of 7 Page 1 of 1

Group Contacts:

1. Select Group Contacts from the top navigation to view Group contacts.
2. The Group Contacts page displays contact information such as names, addresses, phone numbers, fax numbers, e-mail addresses, etc.
3. The Contact Type field describes when the contact is to be used. For example, the group may have Billing contacts, ID Card contacts, Report contacts, etc.

Group Management: Group Contacts:



Section 5: Billing

This section provides a high-level understanding of the information from the e-Bill system. If you have the entitlement access, the Billing tab enables you to view group invoices online.

1. Select the Billing tab from the Home page.
2. The e-Bill Welcome page displays.
3. In e-Bill, you can view reports and the prior months' bills.
4. This tab provides a Single Sign-on link to the e-Bill application where the plan admins can view the invoices and make payments for the bills received.

The following Sections are available in Billing page:

a) Current Balance
b) Recurring Payments
c) Payment Methods
d) Provide information on Recent invoices.

Current Balance: This section will display any pending dollar amount of the Invoice for the Billing accounts associated to the plan admin/client (total amount will be displayed).

1. Select **Click here to Pay Invoice** button, a pop up **Please Note** message appears.
2. Click on Continue to vendor site, system redirect to new e-Bill page.

Recurring Payments: The Recurring payment set-up is done in the e-Bill application.

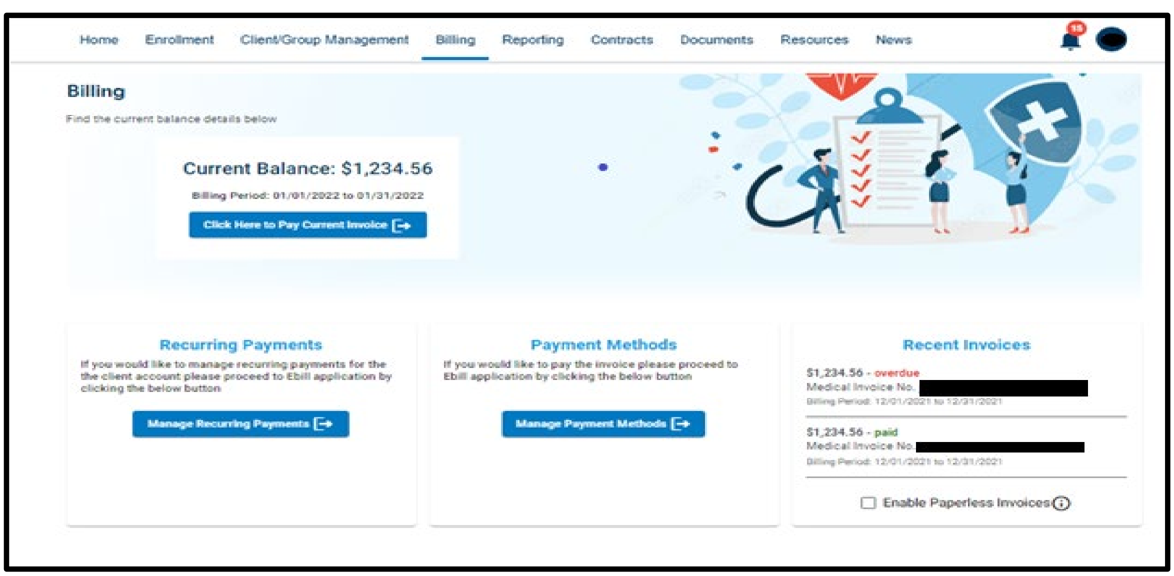
1. Select **Manage Recurring Payments** button, a pop up **Please Note** message appears.
2. Click on Continue to vendor site, system redirect to new e-Bill page.

Payment methods: The user can set-up the payment method on e-Bill for the invoices either through Online or EFT transfer.

1. Select **Manage Payment method** button, a pop up **Please Note** message appears.
2. Click on Continue to vendor site, system redirect to new e-Bill page.

Recent invoices: This section will provide the last 3 invoice status, invoice amount and paid status along with invoice Number and Billing period. A small check box to enable paperless invoice option for the employer is available.

Billing:



Section 6: Documents

This section provides the list of Documents available for the Client as per their group and LOB.
Documents has below sections,

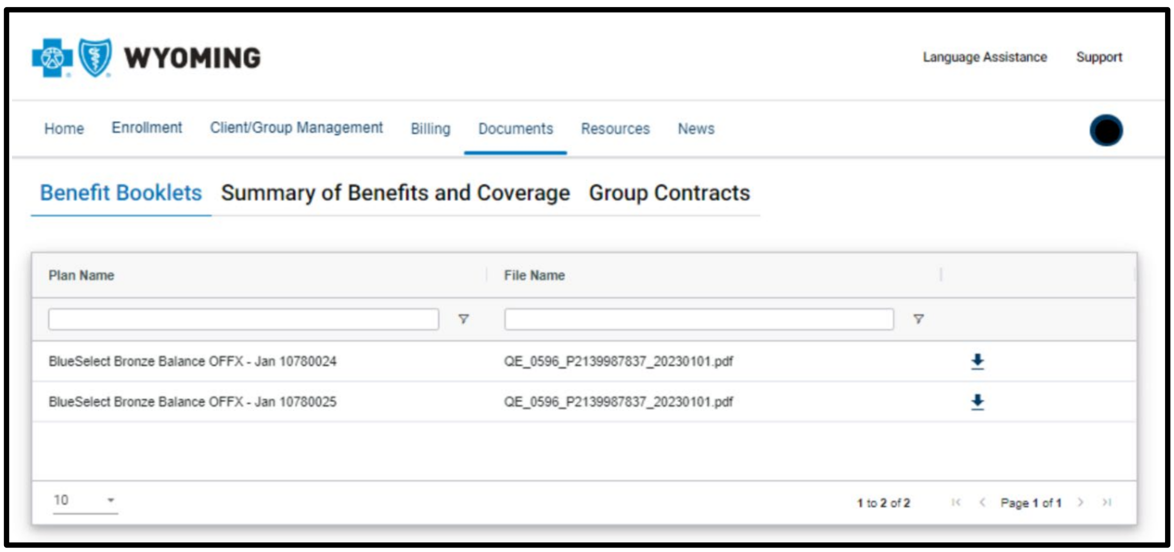
1. Benefit Documents
2. Summary of Benefits and Coverage (SBC)
3. Group Contracts

Benefit Documents

System displays the benefit documents available for the Client as per their group and LOB. The benefit document is available from the Benefits system from ICIS benefit system.

1. Select the Documents tab from the Home page.
2. System displays Benefit documents page.
3. All the Benefit documents are available in hyperlinks.
4. Inserts/Addendums documents is present in hyperlink.
5. Click on each Benefit Document hyperlink, benefit document related to the plan will open in PDF.
6. Each Document is a small downloadable/Printable PDF booklet which comes along with the plan name.
7. A download button is available to download the document.

Documents: Benefit Documents:



Summary of Benefits and Coverage:

System displays the SBC documents available for the Client as per their group and LOB.

1. Select the Documents tab from the Home page.
2. System displays Benefit Documents page.
3. Click on Summary of Benefits and Coverage section.
4. System displays Summary of Benefits and Coverage page.
5. All the SBC Documents are available in Hyperlinks.
6. Click on each SBC Document hyperlink, document will open in PDF.
7. Each Document is a small downloadable/Printable PDF booklet which comes along with the plan name.
8. A download button is available to download the document.

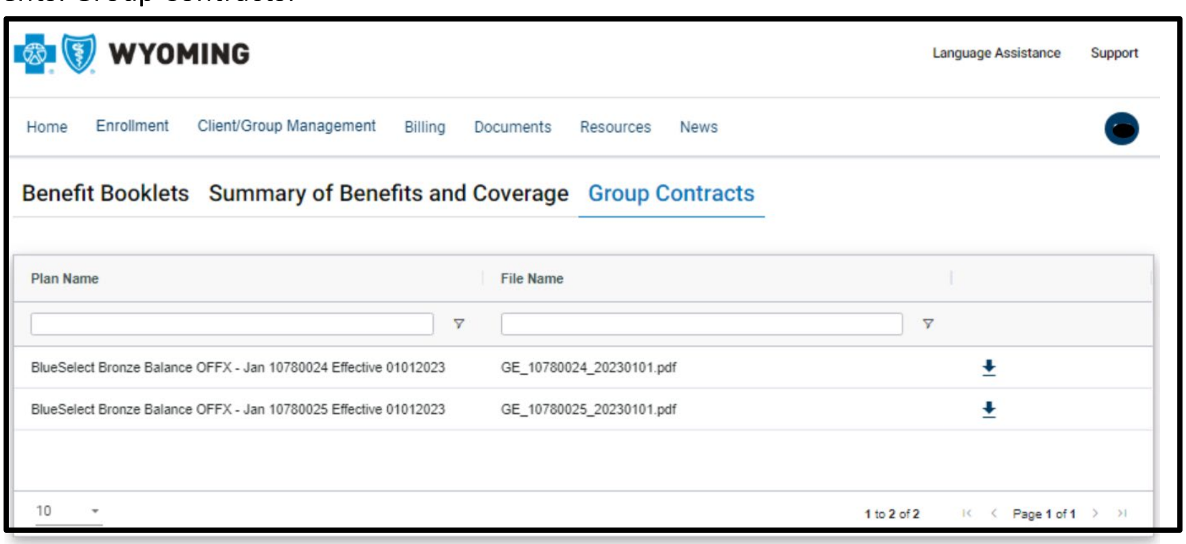
Documents: SBC-Summary of Benefits and Coverage:

Group Contracts:

System displays the Group Contracts documents available for the Client as per their group and LOB. User should be able to view Group Contracts for the group only if they have view or modify access for the group.

1. Select the Documents tab from the Home page.
2. System displays Benefit Documents page.
3. Click on Group Contracts section.
4. System displays Group Contracts Terms and Conditions page.
5. Click checkbox of Terms and conditions page, system displays the Group Contracts.
6. All the Group Contracts documents are available in Hyperlinks.
7. Rider documents is also available in Hyperlinks.
8. Click on each Group Contract document hyperlink, document will open in PDF.
9. Each Document is a small downloadable/Printable PDF booklet which comes along with the plan name and group number.
10. A download button is available to download the document.

Documents: Group Contracts:



Section 7: Resources

This section provides an overview of the Resources user can access. *If users have entitlement, can view, and utilize all the features of resources tab.*
User can access the below list from Resources tab.

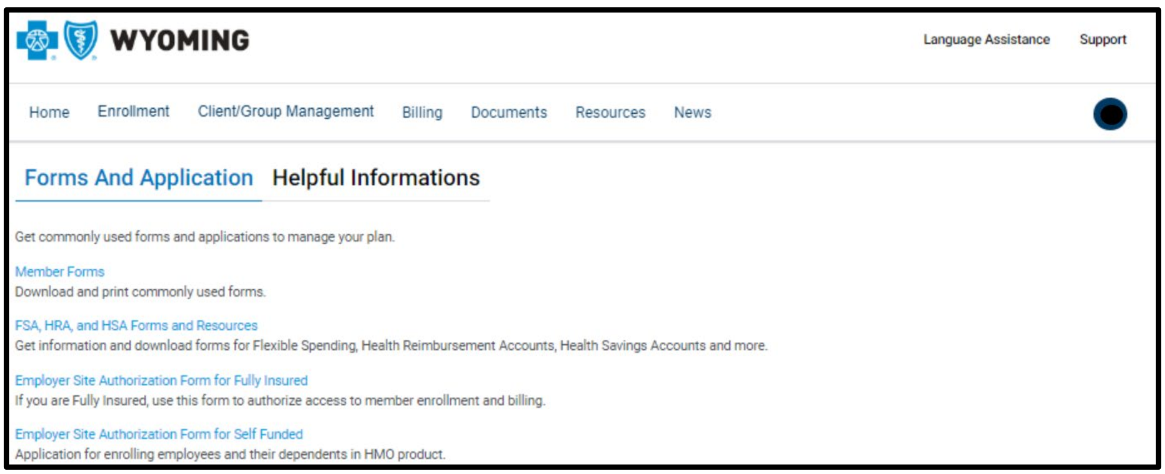
a) Forms and Applications
b) Group Bulletins
c) Helpful Information

Forms and Applications:

Forms and Applications page is displayed with hyperlinks to all forms related to Health plans. This feature is common for all Plan partners. User can access this page if the client is currently active and has been cancelled in ICIS within last 6 months.

1. Select the Resources tab from the Home page.
2. Click on Forms and Applications section.
3. System displays Forms and Applications Page.
4. *Click on different forms available for plan and enrollment related services.*
5. *Click on Form and Applications hyperlink, the document will open in PDF format.*
6. All the forms are downloadable PDF formats and can be printed.

Resources: Forms and Applications:



Helpful Information:

Helpful Information provides answers to common benefit plan questions.

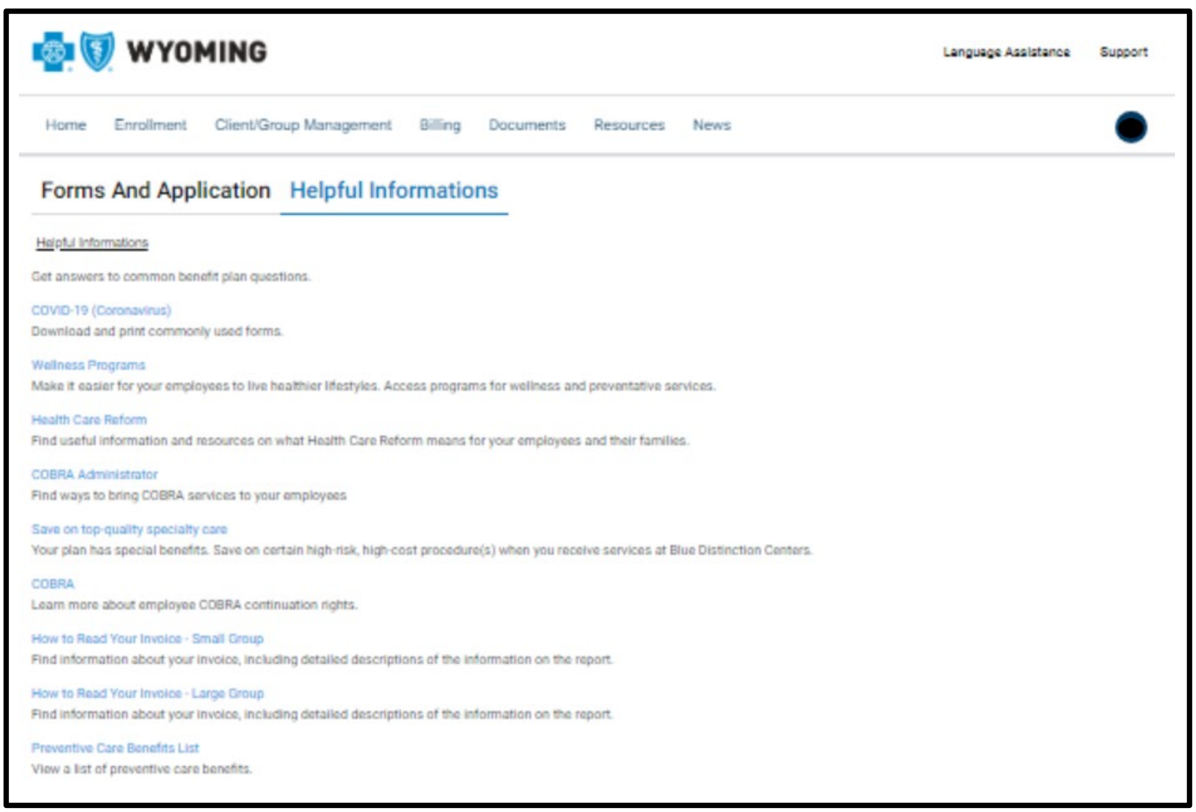
1. Select the Resources tab from the Home page.
2. Click on Helpful Information section.
3. System displays Helpful Information Page.
4. Click on Helpful Information hyperlink, more information links that is available is displayed.

Helpful Information can access the below Hyperlinks,

a) Benefit Coordination
b) Brochures and Information
c) Employee Help and Information
d) Enrollment Information

a) Benefit Coordination: Most group health care programs contain a coordination of benefits (COB) provision. This provision is used when the employee, the employee's spouse or their covered dependents are eligible for payment under more than one health program. The object of coordination of benefits is to assure that your employees' covered expenses will be paid, while preventing duplicate benefit payments.
b) Brochures and Information: Distribute the information found in these links via your company's intranet site or company bulletin boards to help your employees understand their benefits.
c) Employee Help and Information: Get answers to common benefit questions your employees ask you.
d) Enrollment Information: This section will explain the various aspects of administering your benefit plan's enrollment.

Resources: Helpful Information:



Section 8: News

News is view only feature available on employer portal for publishing important news articles for plan admins.

1. Select News tab from the Home page.
2. System displays the News page.
3. The news articles title Hyperlink is displayed in the grid format.
4. Filter options are available to select and read the articles.
5. Click on News article title hyper link.
6. System displays selected news article web page.
7. The attachments, if any for the article available will be shown.
8. User can select Published Year on top right side of the page using dropdown option.

The News grid has the below fields:

- News article Title – Name of the News Headline
- Publish Date – Date with timestamp
- Author – The name of Author who published the article
- Category – To which category the article belongs to like General, Enrollment, Healthcare Etc

Featured articles

1. Featured articles are present below the news grid.
2. These articles are provided with special designed column/section to seek attention or provide attention to a particular topic that the client or plan partner wants to convey the plan admins.
3. These articles could be related to any hot issues that has caught attention of the US public.
4. Click on Learn more, system displays the news article web page.

News: