Community Health Options Employer Portal User Guide

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Section 1: Overview

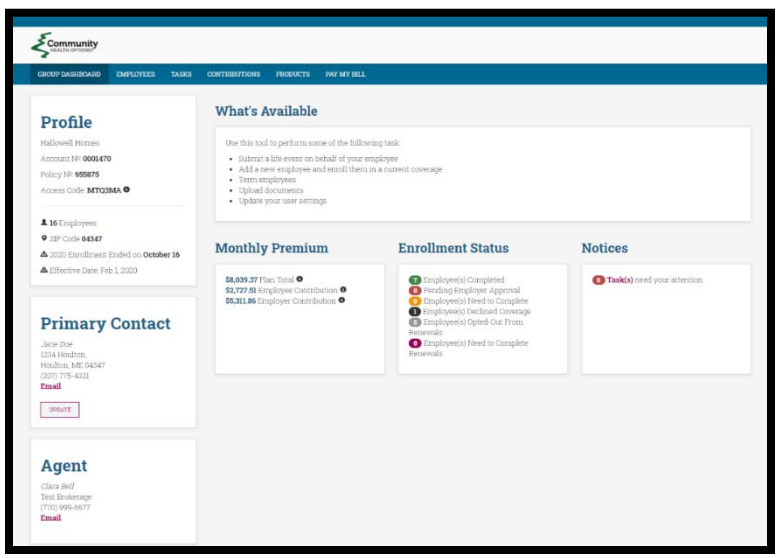
With an intuitive and easy to use interface, your Health Options Employer Portal puts control of your company's Health Plan in your hands. It allows you to manage your Employee enrollments, company contacts and addresses, and view and pay your bills.

A: Group Dashboard

When you log in to the Employer Portal, you land at the **Group Dashboard**, which provides a high-level overview of your Health Plan status.

1: Profile

The **Profile** provides you with important Policy information.



Group Name appears under the **Profile** heading, and is the company name, or Policy Holder.

Account No. identifies the system-generated ID Number that is associated with your Group within the Portal environment, including your Broker's Portal and the Carrier Portal used by Health Options.

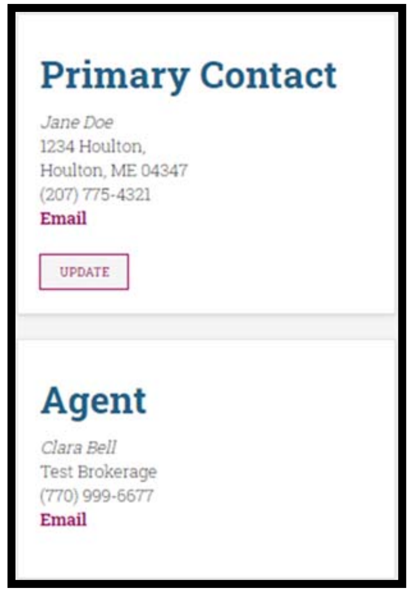
Policy No. is the Group ID Number assigned to your Policy by Community Health Options, and is the Policy Number, or Group ID, that is displayed on Members' ID Cards.

Access Code is used when Employees are creating an account in the Employee Enrollment Portal, or when Group Administrators create an account in the Employer Portal. When using a link to set up an account, this code will automatically generate in the Group Verification Code field.

Other Information in the **Profile** section includes the total number of Employees, both enrolled and waived, the zip code of your organization's primary address, the information regarding the Employee Open Enrollment period, and your group's Effective Date of coverage.

2: Primary Contact

The **Primary Contact** section gives you the name of the primary contact and primary address for your organization, as well as the contact's phone number and email address. The **Update** button should only be used if an update is needed to that contact's information. If a new primary contact is needed, the change can be made within **My Account**, or by contacting your Agent or Community Health Options.

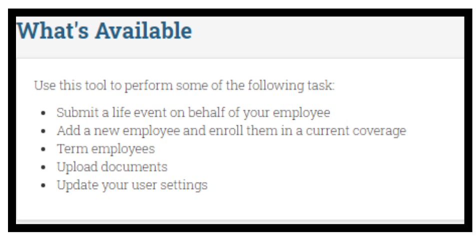


3: Agent

The **Agent** section provides you with the name of your Agent and Agency, and your Agent's contact information. Clicking the **Email** button open a send email window to send an email to your Agent.

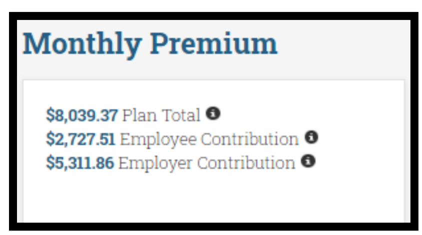
4: Information

In the center of the **Dashboard**, just under the navigation links, is important information that lets you know the current status of your Policy, or what functionality you currently have available. The information will change depending upon where you are in your Open Enrollment period, when Open Enrollment has ended, and when you are approaching your renewal.



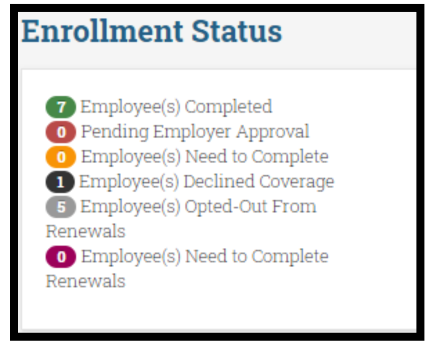
5: Monthly Premium

The **Monthly Premium** box shows you the total Premium of your currently active enrollments. It also breaks down the Employee contributions, which is the Employee share of the Premium, and the Employer Contribution, which is the amount of Premium your organization covers based on the Employer Contributions you have set up.



6: Enrollment Status

The **Enrollment Status** box provides an important overview of your overall Group enrollment.



Employee(s) Completed indicates how many Employees have completed their enrollments and approved for active coverage.

Pending Employer Approval shows how many enrollments have been submitted, but require HR Approval, which can be done under the **Tasks** tab.

Employee(s) Need to Complete shows how many Employees need to complete their enrollments.

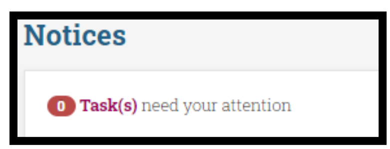
Employee(s) Declined Coverage shows how many employees have waived enrollment in your Plan.

Employee(s) Opted-Out From Renewals will only display if you have reached your first renewal period, and identifies how many employees were enrolled in coverage during the last enrollment period, but waived at renewal.

Employee(s) Need to Complete Renewals will only display if you have reached your first renewal period and shows how many employees were enrolled in coverage during the last enrollment period, but have not yet completed enrollment for the renewal.

7: Notices

The **Notices** section gives you information that requires your attention. This will typically include a link to **Tasks** that need to be completed after an employee has completed his or her enrollment.



B: Navigation

The Health Options Employer Portal allows you to easily navigate to the functionality that you need.

1: Top Navigation Menu

Several links appear at the top of the screen, just under the Community Health Options logo.

Group Dashboard brings you to the landing page, which gives you an overview of your Health Plan status.

Employees takes you right where you need to go in order to manage your employees and enrollments.

Tasks is where you need to go to give HR Approval to employee enrollments.

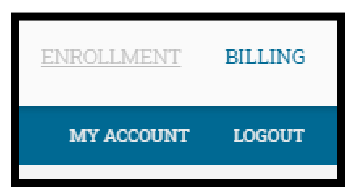
Contributions allows you to view and edit the contribution amounts for employees, and set up new employee contribution classes.

Products lets you view the plans you have selected for employees to enroll in, and view the coverage details.

Pay My Bill opens a new window into the Employer Billing and Payment Portal.

2: Top-Right Navigation Options

On the top right of your screen, you have a few additional navigation links.



Enrollment is grayed out when you are in the Employer Portal, since this is the system that you are currently logged into. If you are in the Employer Billing and Payment Portal, the Enrollment link will be available.

Billing opens a new window to the Employer Billing and Payment Portal. If you are in the Employer Billing and Payment Portal, this link will be unavailable.

My Account goes to the account page where you can manage your login settings, upload documents, and update group contacts and addresses.

Logout signs you out of the system.

C: Legal Notices

At the bottom of your screen, you will find some legal notices.

1: Privacy Policy

Links you to the Community Health Options privacy policy where you can view both the Notice of Privacy Practices and Web Privacy Statement.

2: Refund Policy

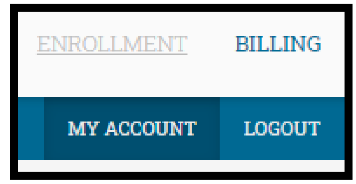
Takes you to the Health Options refund policy statement.

3: Non-discrimination Notice

Links you to the long-form version of Community Health Options Non-discrimination Notice, which is also provided to you on all mailings consisting of more than one page.

Section 2: Your Account

In the top right of the screen, you have a link to **My Account**, which allows you to manage your account and your organization's contact information.

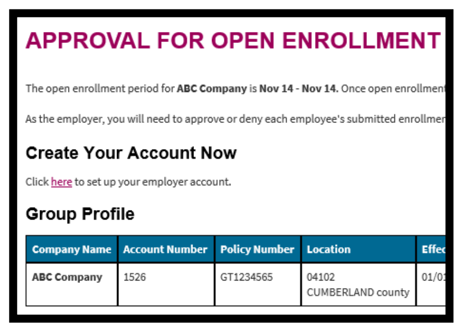


A: Setting up Your Account

Whether your company is new to Health Options, or you are new to the Health Options Employer Portal, setting up your account is simple.

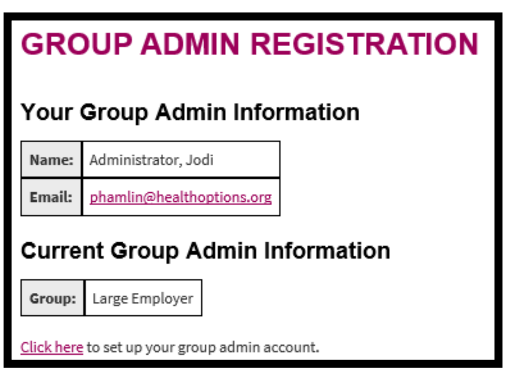
1: Registration Email

Typically, you will set up your account by clicking on a link in an email that has been sent to you.



If your organization is new to Health Options and you are the primary contact, you will receive an email stating that your company has been approved for Open Enrollment. Within this email, is a line that says, **Click here to login to your account**. By clicking the link on the word **here**, you'll be directed to the login page where you just need to enter your last name and email address. The Group Verification Code will populate automatically. After you submit, you will need to choose a Username, Password, and set up your security questions.

If your organization is already established with Health Options and you are new to the role as Group Administrator on the Health Options Employer Portal, you can request to receive an email to register. On the Register as Group Administrator email, there is a line that says, **Click here to set up your group admin account**. By clicking the link, you'll be directed to the login page where you just need to enter your last name and email address. The Group Verification Code will populate automatically. After you submit, you will need to choose a Username, Password, and set up your security questions.

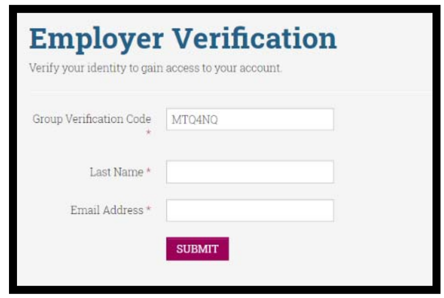


2: Registration Link

An alternative to using the link in the email, you may go directly to the url below to begin the account set up process.

https://enroll.healthoptions.org/ehpportal/eapp/employer/verify?code

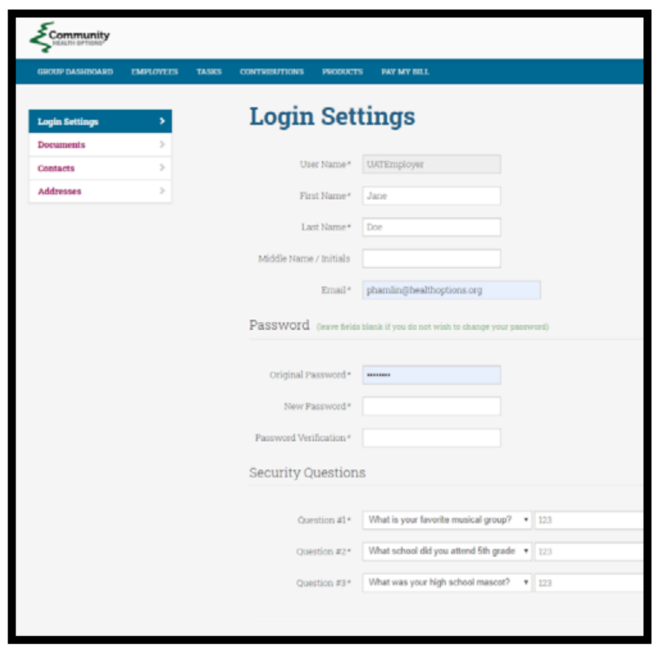
Setting up the account using the link is the same as clicking on the url in an email, except that you need to enter the Group Verification Code. You can get the Group Verification Code from Community Health Options, your Agent, or anyone else who has access to the Employer Portal within your organization. The Group Verification Code is the Access Code indicated on the Group Dashboard.



B: My Account

Accessing **My Account** in the Employer Portal allows you to change your password and security questions, and manage your organization's contacts and addresses. Navigate to these different features using the navigation menu that now appears on the top left of the screen.

1: Login Settings



You can update your basic information, password and security questions.

User Name is your username to login.

First Name is your first name.

Last Name is your last name.

Middle Name / Initial is your middle name or initial.

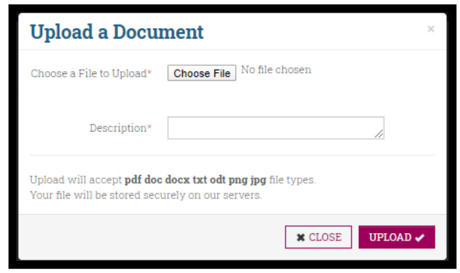
Email is your email.

Original Password is your current password.

New Password and *Password Verification* should be the same and are used to change your password.

Security Questions should be utilized, since these are needed to help you to access the system if you forget your password.

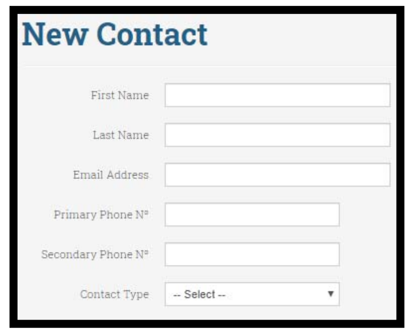
2: Documents



You can upload documents here by using the Upload Document button. When you click on Upload Document, a new window opens for you to choose the file and enter a Description. Click Upload will save the document on the Documents page.

3: Contacts

You can update your contact information, change the primary contact for your organization, or add additional contacts.



Add Contact can be used whenever you need to add a new contact for your organization. You will need to enter the contact's First and Last Name, Email Address, Primary Phone Number, and Contact Type. The types of contacts that can be added here are Secondary, Consultant, Billing, and Human Resources.

View allows you to view and update your contact information. Clicking on the downward facing arrow next to View, also opens up a drop-down menu with an option to Change Primary Contact. This option should be used if the Primary Contact of the organization has changed.

4: Addresses

You can update your primary address, or add additional addresses.

Add Address can be used whenever you need to add a new address for your organization. You will need to enter the Address, City, State, Zip Code, and Address Type. The types of addresses that can be added here are Secondary, Mail Only, and Billing.

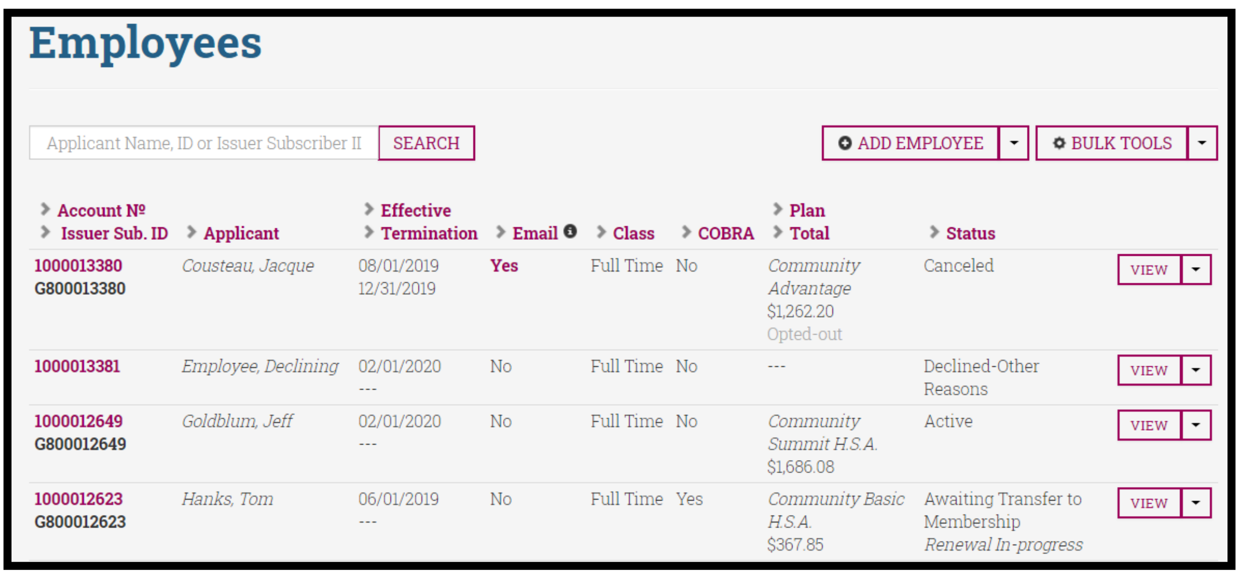
View allows you to view and update your address.

Section 3: Managing Employees

Managing your employee enrollments is easy with the Health Options Employer Portal. By clicking on the **Employees** link in the top navigation menu, you'll be able to view and manage employees easily.

A: The Employee Roster

Accessing the **Employees** page will allow you to view all your employees at a glance. You can see the most important information about their coverage selections without leaving this page.



1: Account No & Issuer Sub. ID

Each row of employee data begins with two ID numbers. The first is the **Account No.**, which identifies the employee policy within the system. Below that is the Issuer Sub. ID, or Issuer Subscriber ID, which is the employee's Health Options Member ID Number.

2: Applicant

The **Applicant** column indicates the name of the Employee.

3: Effective & Termination

On the top is the Employee's Effective Date of coverage for the current coverage period. For Cancelled or Terminated Employees, it will show the **Effective Date** of their last coverage period. Below that is the date that coverage is, or will be, terminated. If there is no **Termination Date** of coverage, none will be displayed.

4: Email

Indicates Yes or No, depending on if an email address has been provided for the Employee. If an email address has been provided, hovering over Yes will display the email address.

5: Class

Indicates the **Contribution Class** for the Employee. This dictates what the Employer Portal displays for Employee and Employer Contributions for that Employee, and for the Group as a whole. You can access and edit Contribution Class details via the **Contributions** tab.

6: COBRA

Indicates Yes if an Employee is enrolled through COBRA, or No if they are not enrolled through COBRA.

7: Plan & Total

On the top is the name of the Plan the Employee is enrolled in. Below that is the Premium cost of the Plan.

8: Status & Renewals

On the top is **Status**, which displays the enrollment status of the Employee, and below is the Renewal status.

Statuses:

Active indicates an Employee is actively enrolled.

Approved shows that an Employee is enrolled, but status has not been yet been updated to Active.

Archived is used when an Employee is no longer active; anyone covered and then canceled for Termination of Employment is automatically archived.

Awaiting Transfer to Membership is displayed when enrollment has been approved and will be sent to our membership system overnight.

Canceled shows if an Employee had coverage, but coverage was canceled.

Declined – Getting Coverage from Spouse indicates that coverage was declined due to the Employee having coverage through a spouse's plan.

Declined – Not Interested in Coverage indicates that coverage was declined, and the Employee chooses not to have health insurance.

Declined – Other Group Coverage indicates that coverage was declined due to the Employee having coverage through another policy.

Declined – Other Reasons indicates that coverage was declined for a reason not otherwise specified.

HR Approved displays when enrollment has been approved under **Tasks** by Employer or Agent.

HR New shows when an employee was recently added, and coverage has not been accepted or declined.

HR Rejected displays when an employee's enrollment has been rejected by the employer or agent.

Saved indicates that an enrollment was started, but not completed.

Sent to Membership indicates that an enrollment has been sent to the membership eligibility system.

Submitted shows when an enrollment has been submitted but not yet approved under **Tasks**.

Renewal Statuses:

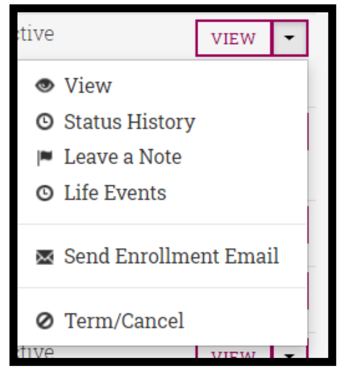
Due for Renewal: Employee is due for renewal, but renewal has not been started

Renewal Complete: Renewal enrollment has been completed

Renewal In-progress: Renewal has been started, but not completed

Renewal Opt-out: Employee was covered during the prior benefit period, but has opted out of renewal

9: View & Drop-Down Options



To the right of each Employee's status, is a **View** button, which takes you to the **Employee Profile**. Next to **View** is a downward facing triangle that opens a drop-down menu with additional options.

Drop-Down Options:

View: Takes you into the **Employee Record**.

Status History: Opens the Employee's **Status History**, which keeps a record of all major status changes.

Leave a Note: Leaves a note that displays in the **Status History**.

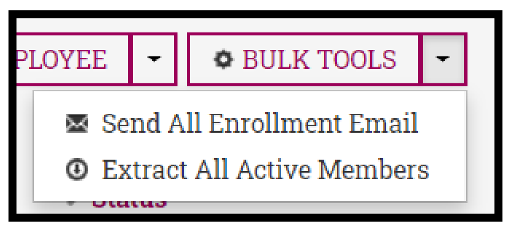
Life Events: Jumps to the **Life Events** tab within the Employee Record.

Archive: Archives the Employee, which removes him/her from the active roster.

B: Bulk Tools

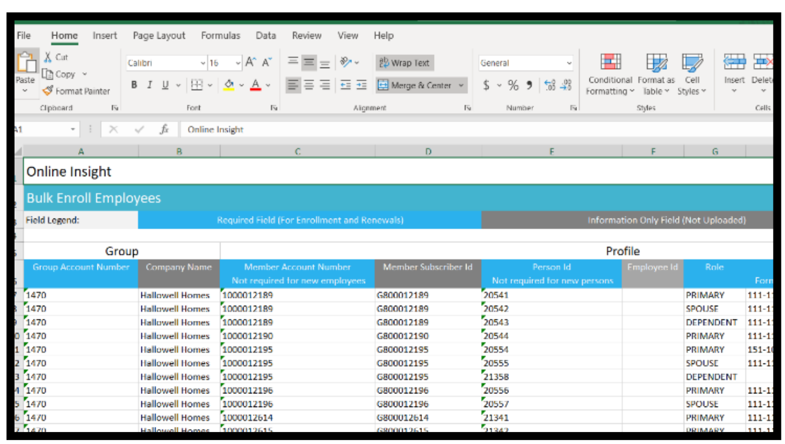
Bulk Tools gives you the ability to send all employees an enrollment email, and to produce a report of all Employees and Dependents with their enrollment details. Clicking on Bulk Tools will open a menu with your bulk options.

1: Send All Enrollment Email



Clicking on Send All Enrollment Email will send an email to all employees that have an email in the system. This is the Open Enrollment email and should only be used during your Employees' Open Enrollment period. See Section 3. D. 3 for more information on Employee enrollment emails.

2: Extract All Active Members



The Extract All Active Members features allows you to download an excel file that lists all Employees and their Dependents with their enrollment details. The Active Members report includes the following data:

Group Account Number: This is a system-generated ID number for your Group account that is only used within the system.

Company Name: Company Name is the name of your organization.

Member Account Number: This is a system-generated ID number for each Employee that is only used within the system.

Member Subscriber ID: This is the Employee's Issuer Subscriber ID Number that is used by Community Health Options to identify each Subscriber and his/her Dependents for claims and benefit administration.

Person ID: Person ID is a unique identifier generated by the system that is used as a specific identification for each person and is only used within the system.

Employee ID: Employee ID is the Employee ID Number that you may enter when adding an Employee.

Role: This is the Employee's Role within the family.

Primary: This the Employee.

Spouse: The Employee's Spouse or Domestic Partner.

Dependent: The Employee's Dependents.

SSN: The Employee's Social Security Number. It must be in the format 111-11-1111.

Last Name: The Last Name of the individual.

First Name: The First Name of the individual.

Middle Initial: The Middle Initial of the individual.

Gender: The Gender of the individual.

Date of Birth: The Date of Birth of the individual.

Smoker: The tobacco use status of the individual. Y indicates smoker, N indicates non-smoker.

Phone: The Primary Phone Number of the individual. This field is typically only shown for the Employee.

Phone #2: The Secondary Phone Number of the individual. This field is typically only shown for the Employee.

Email: The Email address of the individual. This field is typically only shown for the Employee.

Address Line 1: The Primary Address Line 1 of the individual. This field is typically only shown for the Employee.

Address Line 2: The Primary Address Line 1 of the individual. This field is typically only shown for the Employee.

City: The City of the individual. This field is typically only shown for the Employee.

State: The State of the individual. This field is typically only shown for the Employee.

Zip Code: The Zip Code of the individual. This field is typically only shown for the Employee.

County: The County of the individual. This field is typically only shown for the Employee.

Hire Date: The Hire Date of the Employee. This field is blank for Spouses and Dependents.

Employee Class: The Employee Class of the Employee. This field is blank for Spouses and Dependents.

Salary: The Salary of the Employee, as entered when the Employee was added to the Group. This field is blank for Spouses and Dependents.

Job Title: The Job Title of the Employee, as entered when the Employee was added to the Group. This field is blank for Spouses and Dependents.

Coverage Type: Coverage Type indicates the coverage tier code.

EMP indicates Employee Only coverage.

ECH indicates Employee and Child, or Children, coverage.

ESP indicates Employee and Spouse coverage.

FAM indicates coverage for the Employee, Spouse, and Child, or Children.

Status: Displays the current Enrollment Status of the Employee.

Active indicates an Employee is actively enrolled.

Approved shows that an Employee is enrolled, but status has not been automatically updated to **Active**.

Archived is shown when the Employee has been archived and is no longer an active Employee.

Awaiting Transfer to Membership is when enrollment has been approved and will be sent to our membership system overnight.

Canceled indicates the Employee was enrolled, but has been canceled.

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HR Approved is when enrollment has been approved under **Tasks** by Employer or Agent.

HR New shows when an employee was recently added, and coverage has not been accepted or declined.

HR Rejected shows when an employee's enrollment has been rejected by employer or agent.

Saved indicates that an enrollment was started, but not completed.

Sent to Membership indicates that an enrollment has been sent to membership system.

Submitted is when an enrollment has been submitted but not yet approved under **Tasks**.

Renewal Status: Shows the current renewal status of the Employee.

Due for Renewal shows that an employee is due for renewal, but renewal has not been started.

Renewal Complete indicates renewal enrollment has been completed.

Renewal In-progress shows that renewal has been started, but not completed.

Renewal Opt-out indicates an employee was covered during the prior benefit period, but has opted out.

Enroll Person: Indicates **Y** if the person is enrolled, or **N** if not.

Effective Date: Shows the Effective Date of the person.

Premium: Displays the Premium of the Employee's Policy. This field is blank for Spouses and Dependents.

Medical Plan QHP ID: This is the QHP (Qualified Health Plan) ID for the benefit plan the individual is enrolled in. This displays only for the Employee, and only for those enrolled.

Medical Plan Name: This is the name of the Plan Name of the benefit plan the individual is enrolled in. This displays only for the Employee, and only for those enrolled.

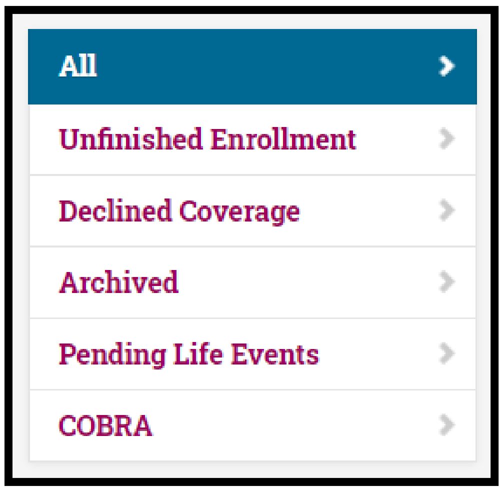
C: Filters & Search

These are tools that help you locate and sort specific Employees.

1: Filters

Located on the left side of the screen next to the **Employee Roster** are filters to help you review your Employees.

All: This filter shows all Employees.



Unfinished Enrollment: Shows only Employees with who have not completed enrollment or declined.

Declined Coverage: Filters to show only Employees who declined coverage.

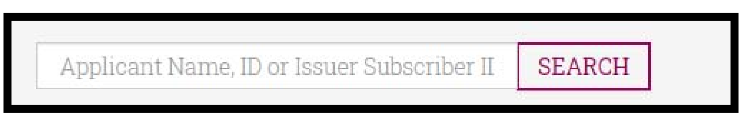
Archived: Will only show Employees who have been archived.

Pending Life Events: Filters to show only Employees who have pending **Life Events**.

COBRA: Shows only Employees enrolled in COBRA.

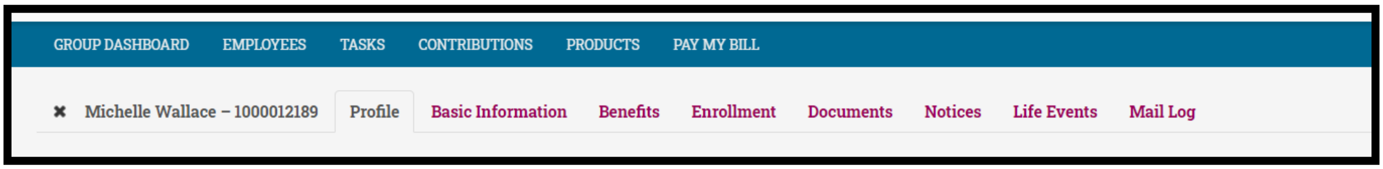
2: Search Bar

Above the **Employee Roster** is a search bar to help you locate specific Employees. You can search by **Name** or **ID Number**. The more specific the data you enter is, the more refined the results will be.



D: The Employee Record

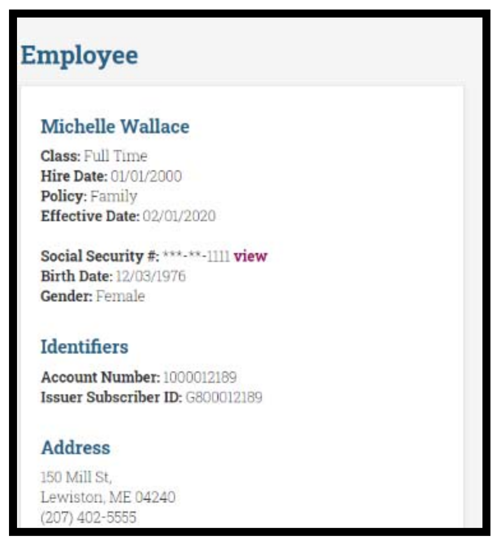
When you enter the **Employee Record**, you will have access to several tabs with information about the Employee and functionality to manage enrollments and preferences (detailed later in this section).



1: Profile

The Employee Profile provides an overview of the Employee's information and enrollment, and provides quick links to update employee information and enrollments. It is broken down into three sections: **Employee**, **Coverage**, and **Available Actions**.

Employee: Gives a quick look at the Employee's basic policy information and personal data.



Employee Name is the name of the Employee.

Class shows the Contribution Class the Employee is enrolled in.

Hire Date is the Hire Date entered when the Employee was added to the Group.

Policy is the Coverage Type (EMP, ECH, ESP, or FAM).

Effective Date is the Effective Date of coverage for the Employee.

Social Security Number shows the Employee's Social Security Number.

Birth Date is the Employee's Date of Birth.

Gender shows the Employee's Gender.

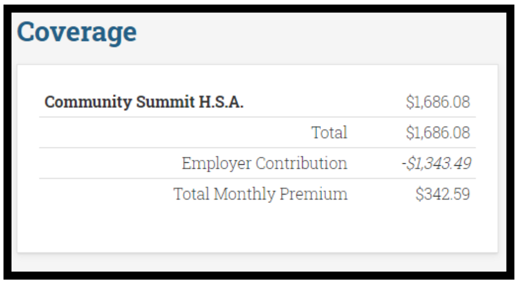
Account Number is the system-generated account number for the Employee. This number is not used outside of the Portal.

Subscriber ID is a system-generated ID number that is used to identify the Employee and Dependents. It is not the number used for claims payment.

Issuer Subscriber ID is the ID number assigned by Health Options' eligibility system and is the number used for claims.

Address shows the Employee's address.

Coverage: Provides information about the Employee's coverage.



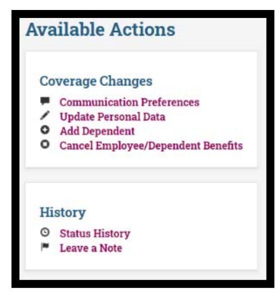
Plan Name is displayed at the top left of the **Coverage** box.

Total Premium is displayed to the right of the **Plan Name** and on the line beneath it.

Employer Contribution is shown beneath the **Total Premium**. This is the amount the Employer contributes towards the total **Premium** based on the amounts entered on the **Contributions** page.

Total Monthly Premium is the amount of the Employee contribution based on the amounts entered on the **Contributions** page.

Available Actions: Includes several actions that can be taken to manage the Employee's personal data, coverage, and preferences.



Coverage Changes are tools used to manage your Employee's benefits and data. These tools are described in *Section 3. G*.

History provides two options, **Status History**, which shows all past activity for the Member, and **Leave a Note**, which enters a note in the **Status History**.

2: Basic Information

Provides a detailed view of the Employee's personal data, as well as that of any Dependents.

Personal Info: The Personal info box displays the personal information of the Employee or family member.

Name is the name of the Employee, Spouse, or Dependent.

Social Security # is the Social Security Number (SSN) of the Employee, Spouse, or Dependent.

Gender is the Gender of the Employee, Spouse, or Dependent.

Birth Date is the Date of Birth of the Employee, Spouse, or Dependent.

Effective Date is the Effective Date of coverage of the Employee, Spouse, or Dependent.

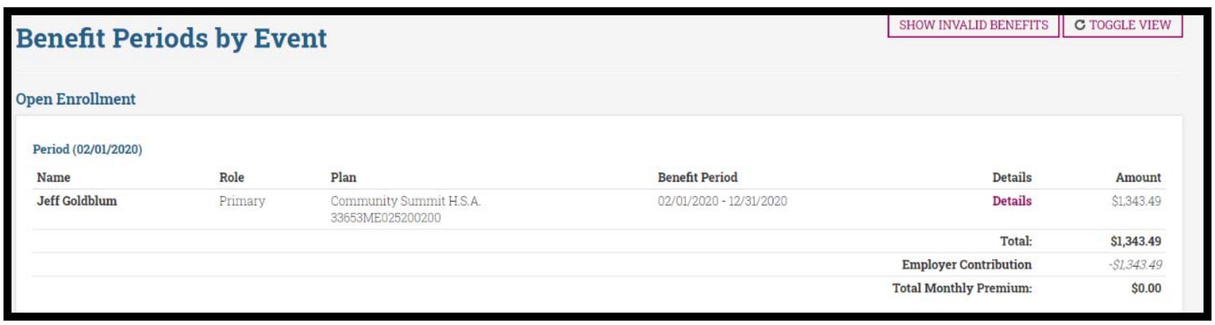
3: Benefits

The **Benefits** tab provides an historic overview of the Employee's coverage.

Show Invalid Benefits: This option will display benefit lines that may exist in the system but have been corrected or invalidated.

Toggle View: Clicking **Toggle View** will toggle between displaying **Benefit Periods by Event** and **Benefit Periods by Member**.

Benefit Periods by Event: This will display benefits by coverage period, which is broken down by specific events, such as **Open Enrollment**, **Add Coverage**, or **Cancel Coverage**. Within each **Benefit Period** box is information on the enrollment for that period.



Event Description is at the top of each Benefit Period box and describes the event, such as **Open Enrollment**.

Period shows the coverage period for this enrollment.

Name displays the names of all covered individuals for the specified benefit period.

Role shows the role of each covered individual.

Plan displays the Plan Name and Plan ID for this benefit period.

Benefit Period also shows the coverage period.

Details has a link to open a tooltip box that includes a significant amount of information regarding the enrollment.

Amount shows the Premium for the specified Benefit Period. This will be broken down by each covered individual for that period.

Total: The total Premium for the family.

Employer Contribution: The amount the Employer contributes to the Premium.

Total Monthly Premium: The total monthly Employee contribution.

Benefit Periods by Member: This will display benefits for each **Member** for all **Benefit Periods** for which they have been enrolled. Within each **Member** box is information on the enrollment for all covered periods.

Member Name and Role is at the top of each **Member** box.

Plan shows the **Plan Name** and **Plan ID** for each **Benefit Period** displayed.

Life Event displays any **Life Event** that triggered a **Benefit Period**.

Details has a link to open a tooltip box that includes a significant amount of information regarding the enrollment.

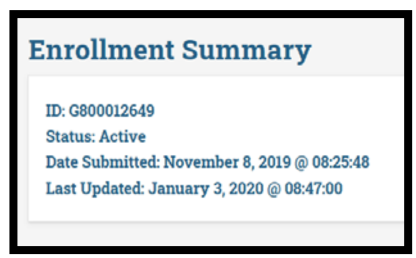
Amount shows the **Premium** for the specified **Benefit Period** for that **Member**.

Contrib. shows the **Employer Contribution** amount for that **Benefit Period**.

4: Enrollment

The **Enrollment** tab provides a summary that includes information about the most recent enrollment. There are two sections: **Enrollment Summary** and **Form Sections**.

Enrollment Summary: Provides a detail of the most recent enrollment submission.



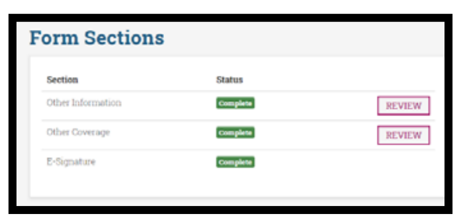
ID shows the **Subscriber ID**. This a system identifier, but not the number used for claims submission.

Status shows the **Status** of the Employee enrollment.

Date Submitted shows the date and time of the most recent enrollment submission.

Last Updated shows the date and time of the last update to the Employee information or enrollment.

Form Sections: This details the status of the stages of the Employee enrollment application.



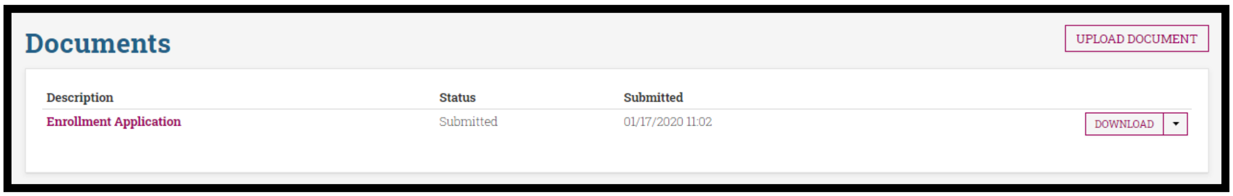
Section identifies the application section.

Status shows the completion status of the application section.

Review is a link to view that application section.

5: Documents

The Documents tab shows any documents that have been uploaded for the Employee.



Upload Document: You can upload a document to the Employee record by clicking on **Upload Document**. You can choose a file, enter a description, and click **Submit**.

Documents: The **Documents** section shows what documents have been uploaded. If no documents were uploaded, it will display No Documents Found.

Description shows the description of the document that was entered when it was uploaded.

Status shows the **Status** of the document. In some cases, documents require approval, such as those used to verify a **Qualifying Life Event**, and the **Status** will show if it is approved or denied.

Submitted displays the date and time the document was submitted.

Download will download the document for review.

Delete is available by clicking on the downward facing arrow next to **Download**, and will allow you to delete the document.

6: Notices

The Notices tab will not show any information, since that functionality is not currently turned on.

7: Life Events

The **Life Events** tab outlines any major policy changes.

Life Events

Event №	Create Date	Event Date	Effective Date	Event (& notes)	Action	Status	
0006038	Jan 3, 2020	Dec 19, 2019	Dec 19, 2019	Birth, legal adoption, court order (02)	Retro Add Coverage	HR Approved	VIEW
0005980	Nov 8, 2019	Nov 8, 2019	Feb 1, 2020	Employment or benefit eligibility status change *Auto-completed by Add Renewal Coverage.*	Add Coverage	Completed	VIEW

Event No: This is the system-generated identifier for the **Life Event**. Clicking on the **Event Number** will take you to the **Life Event Details** page.

Create Date: The date the **Life Event** was entered into the system.

Event Date: The date of the **Qualifying Life Event**.

Effective Date: The **Effective Date** of coverage for the new **Benefit Period**.

Event (& notes): The **Qualifying Life Event** selected when the **Life Event** was entered into the system. See *Section 3. G. 3* for more information on **Life Events**.

Action: The action taken for the **Qualifying Life Event**.

Add Coverage indicates coverage was added for the Employee, or a Spouse, or Dependent.

Add COBRA Coverage indicates that the Employee has been enrolled in COBRA.

Address Change shows that a change was made to the address of the Employee, Spouse, or Dependent.

Cancel Coverage shows that the Employee, a Spouse, or Dependent was canceled.

Communication Change indicates a change was made to communication preferences.

Plan Change indicates that a **Plan Change** was processed by the Community Health Options.

Reinstatement shows if the Employee or a Dependent was reinstated.

Retro Add Coverage indicates that coverage was added for the preceding **Benefit Period**.

Retro Cancel Coverage indicates that a cancelation was processed for the preceding **Benefit Period**.

SSN Change shows that an update was made to the Social Security Number for the Employee or a Dependent.

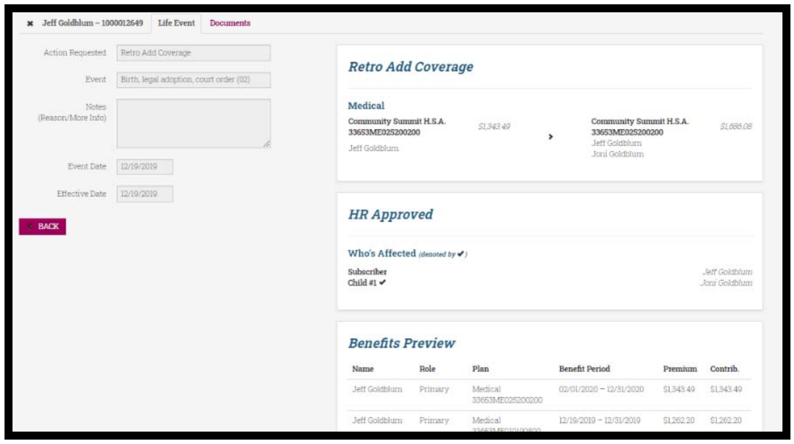
Status: The Status of the enrollment after the Life Event was processed.

Active indicates an Employee is actively enrolled.

Approved shows that an Employee is enrolled, but status has not yet been updated to Active.

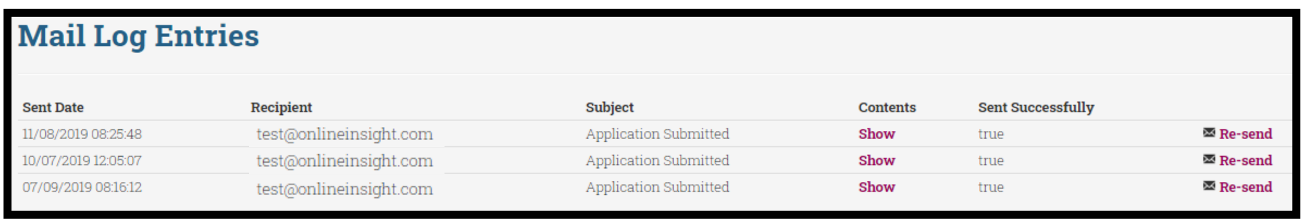
Canceled indicates the Employee was enrolled, but has been canceled.

View: Takes you to the **Life Event Details** page, which gives you all the information from the Life Event overview, and the same information that may be found on the **Benefit Periods** page. It also identifies who was affected by the change.



8: Mail Log

The **Mail Log** includes any system-generated emails that have been sent to the Employee and the status of each email. Each live gives you information about the email that was sent.



Mail Log Entries

Sent Date	Recipient	Subject	Contents	Sent Successfully	
11/08/2019 08:25:48	test@onlineinsight.com	Application Submitted	Show	true	Re-send
10/07/2019 12:05:07	test@onlineinsight.com	Application Submitted	Show	true	Re-send
07/09/2019 08:16:12	test@onlineinsight.com	Application Submitted	Show	true	Re-send

Sent Date: The date and time that the email was sent.

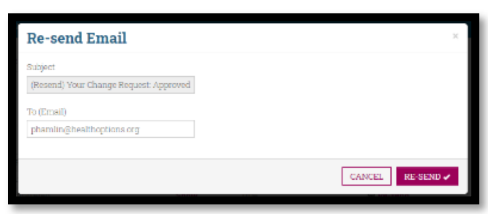
Recipient: The email address that the email was sent to.

Subject: The Subject line of the email.

Contents: Clicking on Show will open a new window showing the body of the email that was sent.

Sent Successfully: True indicates that the email was sent successfully. False indicates a failure.

Re-send: Clicking on Re-send will resend the email. You will be able to edit the email to send to.

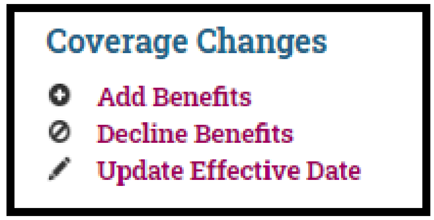


E: Initial Enrollment

When your Employer Group first enrolls with Health Options, all Employees should already be entered in the system and in **HR New** status. You will need to select or decline benefits for all Employees unless emails are sent, then you only need to approve the enrollments.

1: Enrolling in Coverage

To enroll the new Employee in coverage, you need to follow these steps:



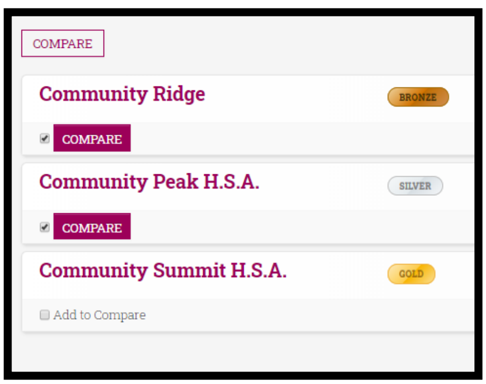
1. Click on **View** to access the **Employee Profile**.

2. If needed, you can change the **Effective Date** by clicking on **Update Effective Date** and entering the correct **Effective Date** in the new window that opens.

3. Click on **Add Benefits** to begin the enrollment. The **Basic Information** page will open.

4. Review all information and click **Edit** to update any information, if needed.

5. Click **Next**.



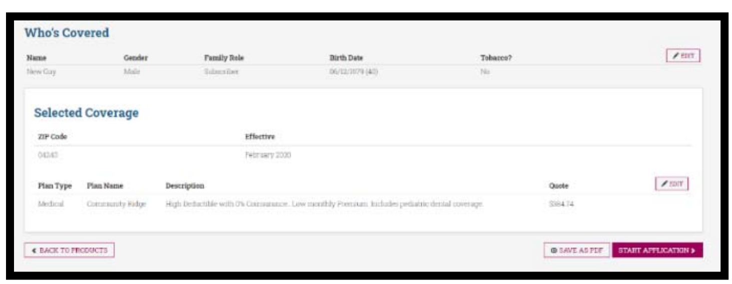
6. You can compare two or more Plans by clicking the **Add to Compare** option beneath the Plan names, and then click **Compare**.

7. Select the Plan that the Employee chooses to enroll in by clicking **Select** to the right of the appropriate plan.

8. Once you select a plan, click **Continue**.

9. Verify who is covered and coverage details. If needed, click **Edit** to make changes.

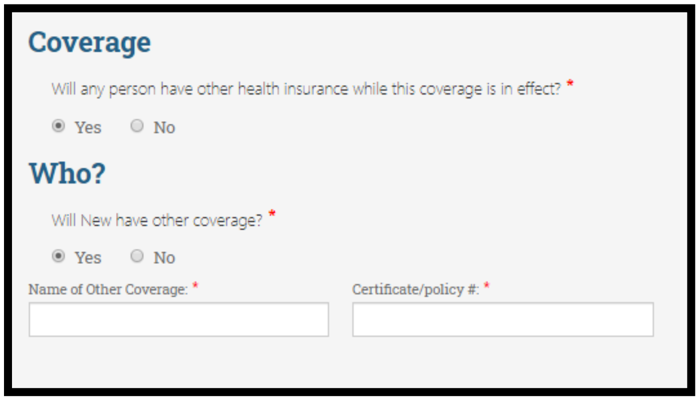
10. Click **Start Application**. You can also click **Save as PDF** to save a pdf copy of the coverage option.



11. Verify the Employee and Dependent information is correct and click on **Complete This Section**. You can also click **Save for Later** to save the enrollment at this point and continue later.

12. Answer the **Other Coverage** questions.

Will any person have other health insurance while this coverage is in effect? Select Yes if the Employee, Spouse, or any Dependent will have other coverage in effect.



Will (name) have other coverage? You will be asked this question for the Employee and each Dependent. If you select Yes, you will have two additional questions to answer.

Name of Other Coverage: Enter the name of the type of coverage (such as Medicare, or Tricare), or the name of the other insurer.

Certificate/policy #: Enter the certificate or policy number of the other coverage, which is typically also known as the Member ID number.

13. Click on **Complete this Section**.

14. Click **Finalize and Sign**.

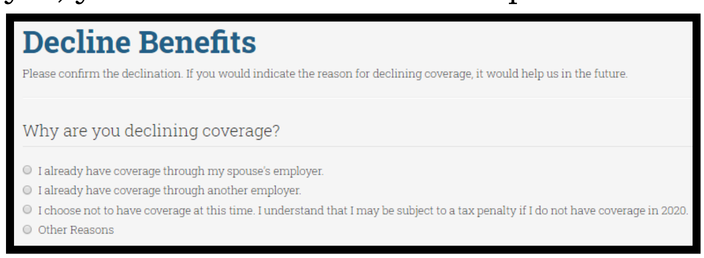
15. Enter the Employee's Name to e-sign the application and click **Submit Application**.

16. This completes the enrollment and the Employee will be in **Submitted** status and will require **HR Approval** (*Section 3. E. 4*).

2: Declining Coverage

To decline coverage for the new Employee, you need to follow these steps:

1. Click on **View** to access the **Employee Profile**.
2. Click on **Decline Benefits**.
3. Select the reason for Declining Benefits.



I already have coverage through my spouse's employer. Selected if the Employee is coverage through his or her Spouse's employer-sponsored plan.

I already have coverage through another employer. Selected if the Employee has coverage through another employer-sponsored plan.

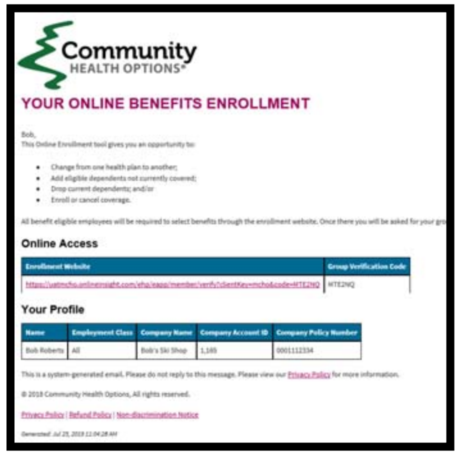
I choose not to have coverage at this time. I understand that I may be subject to a tax penalty if I do not have coverage in 2020: Selected if the Employee will not have any coverage in effect.

Other Reasons: Selected if the Employee is covered under a plan that is not an employer-sponsored plan, or must decline for another reason not specified.

4. Click **Submit**.

3: If Employee Emails are Sent

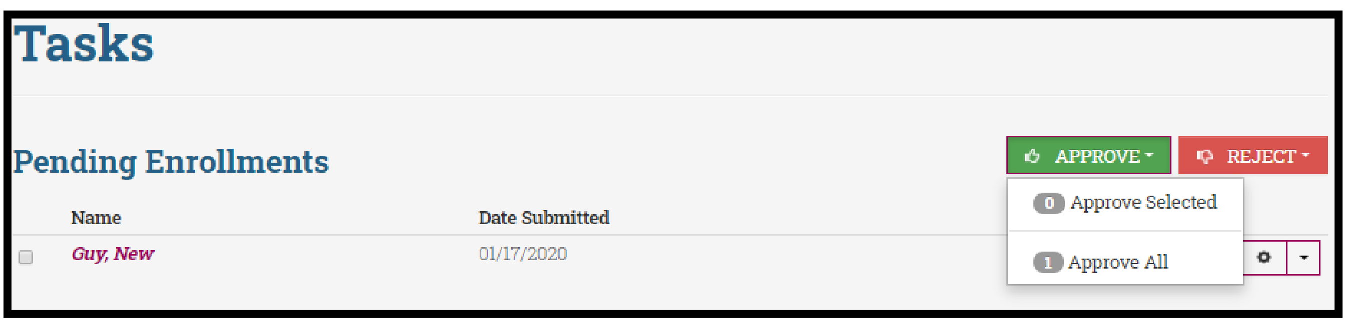
The Portal can send emails to Employees for them to make their own selection. If this option was selected when the Group Application was completed, then Employees will receive an email that will direct them to log into the Employee Enrollment Portal to make their selection or decline coverage. Once a selection has been made, the **Employee Roster** will show either **Submitted** or **Declined**. If an enrollment is **Submitted**, it will require **HR Approval**, outlined in *Section 3. E. 4*.



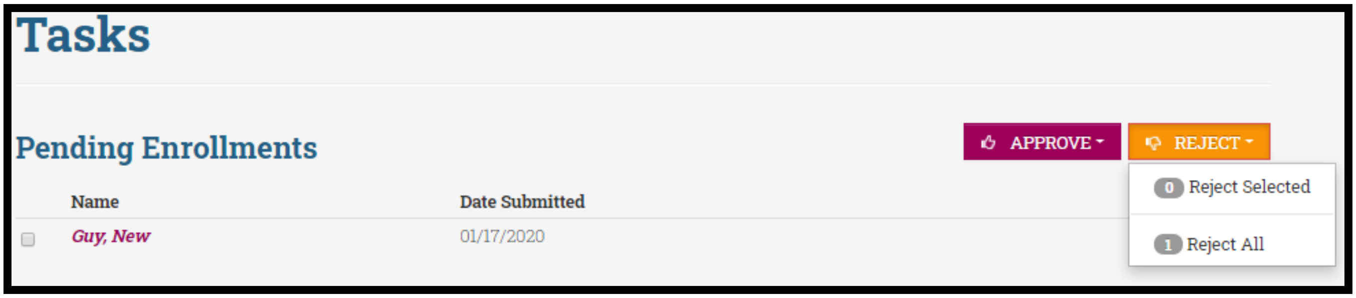
4: HR Approval (Tasks)

Once an enrollment is **Submitted**, it will require your approval under the **Tasks** tab. Once on the **Tasks** tab, you will see all enrollments pending approval and you have two options, **Approve** or **Reject**.

Approve: You can select a single Employee from the list by clicking the box to the left of his or her name, and then click **Approve**. You also have the option of clicking the downward facing arrow next to the **Approve** button, and then selecting **Approve All**. Once you select **Approve** or **Approve All**, you may need to provide a reason for the enrollment in a pop-up window. You can also approve using the drop-down menu to the right of the Employee listing.



Reject: You can select a single Employee from the list by clicking the box to the left of his or her name, and then click **Reject**. You also have the option of clicking the downward facing arrow next to the **Reject** button, and then selecting **Reject All**. Once you select **Reject** or **Reject All**, you may need to provide a reason for rejecting the enrollment in a pop-up window. You can also reject using the drop-down menu to the right of the Employee listing.



F: New Employees

After the initial enrollment or renewal is complete, you should enter all new Employees on the **Employee Roster** as they are hired so you can manage their benefits.

1: Adding a New Employee

After the initial enrollment, you can add a new Employee at any time. Employees should be added as they are hired, and then coverage selected or declined prior to their Effective Date. To enroll a new Employee, follow these steps:

1. Click on **Add Employee.** A new window will open to enter the Employee's basic information.

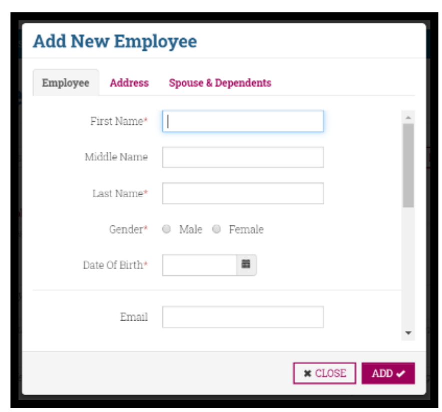
2. Enter the Employee information on the Employee tab.

   First Name: Enter the Employee's first name. This is a required field.

   Middle Name: Enter the Employee's middle name, or middle initial.

   Last Name: Enter the Employee's last name. This is a required field.

   Gender: Enter the Employee's gender. This is a required field.



Date of Birth: Enter the Employee's date of birth. A calendar will open where you can select the date. This is a required field.

Email: Enter the Employee's email. Although not a required field, it is strongly recommended to include an email, since email is needed if you will be using the Employee Enrollment Emails during renewal. Health Options may also use an Employee's email for important communications and our regular Member Newsletter.

Social Security Number: Enter the Employee's Social Security Number. This is a required field.

Job Title: Enter the Employee's job title.

Employee ID: Enter your company's Employee ID Number for the Employee.

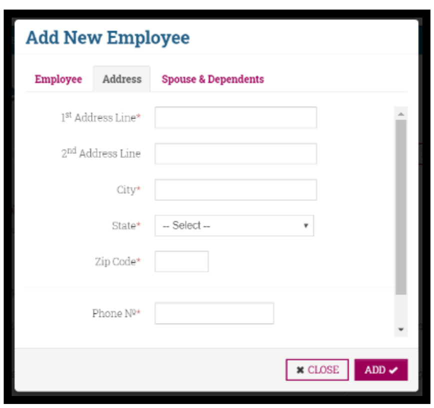
Salary: Enter the Employee's salary. Although showing as a required field, you may enter a 0 or 1.

Employee Class: Enter the Employee's Contribution Class.

Hire Date: Enter the Employee's hire date. A calendar will open where you can select the date. This is a required field.

Coverage Effective Date: Enter the Employee's Effective Date of coverage.

3. Enter the Employee's Address information.



1st Address Line: Enter the first line of the Employee's address. This is a required field.

2nd Address Line: Enter the second line of the Employee's address.

City: Enter the Employee's city. This is a required field.

State: Enter the Employee's state. This is a required field.

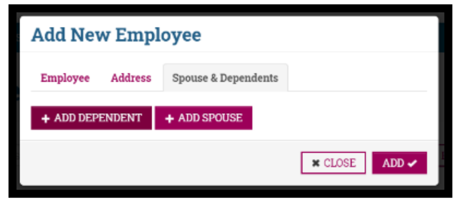
Zip Code: Enter the Employee's zip code. This is a required field.

Phone №: Enter the Employee's phone number. This is a required field.

Alt Phone №: Enter an alternate phone number for the Employee.

4. Enter the Employee's Spouse and Dependent information. Click on either Add Spouse or Add Dependent. Although the information added here is limited, you will be required to provide additional information upon enrollment.

M/F: Use the radial buttons to select the gender of the Spouse or Dependent. This is a required field.

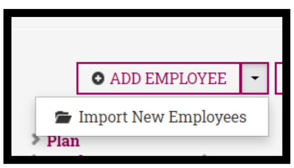


Date of Birth: Enter the Date of Birth of the Spouse or Dependent. A calendar will open where you can select the date. This is a required field.

5. Click **Add**. You are returned to the **Employees** page and the Employee is in HR New status. Follow the process outlined in *Section 3. F. 3* to Enroll, or *Section 3. F. 4* to Decline.

2: Import New Employees

If you have multiple Employees to enter, you may want to use the census upload. To do this, follow these steps:

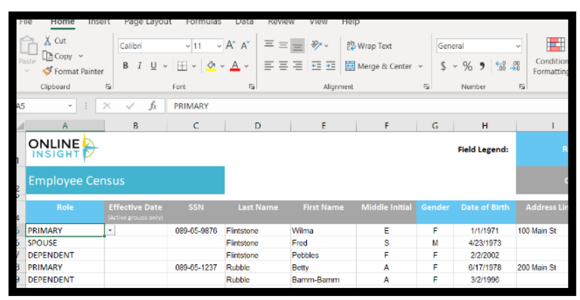


1. Click on the downward facing arrow next to **Add Employees**.

2. Select **Import New Employees**.

3. Click on the word **sample** to download a sample census file. The file has several lines of sample data.

4. Open the file and save it to your computer.



5. Complete all the information on the census. Overwrite the sample data, but you keep the same format for the data in each column. Some data is listed as required or optional, but this is a guide for quoting purposes only. All data must be included to enroll the Employee.

Role: Select **Primary** for the Employee, **Spouse** for a Spouse or Domestic Partner, or **Dependent** for a Dependent.

Effective Date: Enter the Effective Date of Coverage for the Employee.

SSN: Enter the Social Security Number for each person listed on the census. It must be in the format of 111-11-1111.

Last Name: Enter the Last Name of each person listed on the census.

First Name: Enter the First Name of each person listed on the census.

Middle Initial: Enter the Middle Initial of each person listed on the census.

Gender: Enter the Gender of each person listed on the census.

Date of Birth: Enter the Date of Birth of each person listed on the census. It must be in the format of MM/DD/YYYY.

Address Line 1: Enter the first line of the address for the Employee. This line does not need to be completed for Spouses or Dependents.

Address Line 2: Enter the 2nd address line for the Employee. This line does not need to be completed for Spouses or Dependents, or if there is only one line for the address.

City: Enter the City of the Employee's address.

State: Enter the State of the Employee's address.

Zip: Enter the Zip Code of the Employee's address.

Phone: Enter the primary Phone Number for the Employee.

Phone #2: Enter a secondary Phone Number for the Employee.

Email: Enter the Employee's Email address.

Hire Date: Enter the Hire Dated of the Employee. It must be in the format of MM/DD/YYYY.

Employee Class: Enter the Contribution Class for the Employee.

Salary: Enter the Employee's salary. You may use a 0 or 1 for this information.

Job Title: Enter the Employee's job title.

Smoker: Enter the Tobacco Use status of the Employee. If the Employee uses tobacco, enter Y, or N if not.

Subscriber Waived: Enter Y if the Subscriber is Declining coverage, or N if the Subscriber will be taking coverage.

COBRA Member: Enter Y if the Member is enrolled in COBRA, or N if the Members is not a COBRA Member.

COBRA Qualifying Event Code: Enter the COBRA Qualifying Event Code. A Note box is shown that details the Event codes for use.

Employee ID: Enter the company's Employee ID Number for that Employee.

6. Save the completed file.

7. Go back to the Employer Portal to **Import New Employees**. Click on **Choose File**.

8. Select the file you just saved, then click **Import**.

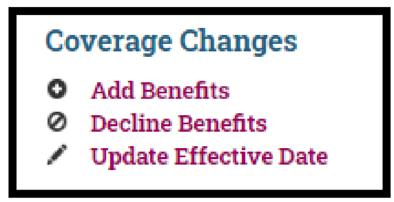
9. If there are any errors with loading the file, the system will tell you the column and row number that needs to be corrected. If this occurs, make corrections, to the file, then follow steps 6 through 8 again.

10. If the file loads correctly, you will have new Employees added to the Employees page and in HR New status. Follow the process outlined in *Section 3. F. 3* to Enroll, or *Section 3. F. 4* to Decline.

3: Enrolling in Coverage

To enroll the new Employee in coverage, you need to follow these steps:

1. Click on **View** to access the **Employee Profile**.

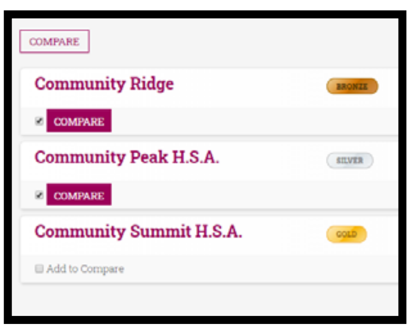


1. If needed, you can change the **Effective Date** by clicking on **Update Effective Date** and entering the correct **Effective Date** in the new window that opens.

2. Click on **Add Benefits** to begin the enrollment. The **Basic Information** page will open.

3. Review all information and click **Edit** to update any information, if needed.

4. Click **Next**.



5. You can compare two or more Plans by clicking the **Add to Compare** option beneath the Plan names, and then click **Compare**.

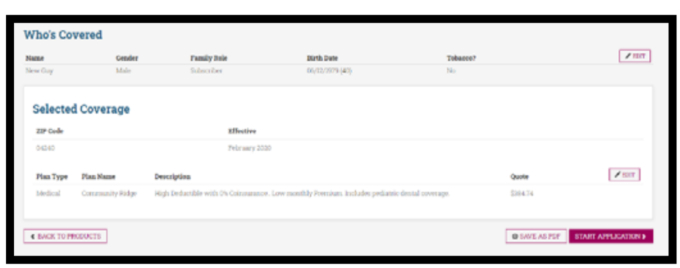
6. Select the Plan that the Employee chooses to enroll in by clicking **Select** to the right of the appropriate plan.

7. Once you select a plan, click **Continue**.

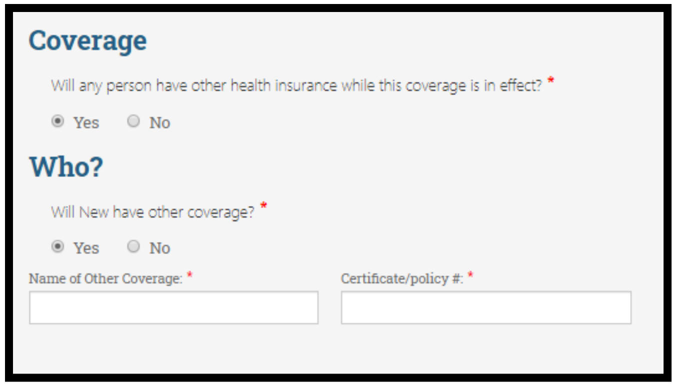
8. Verify who is covered and coverage details. If needed, click **Edit** to make changes.

9. Click **Start Application**. You can also click **Save as PDF** to save a pdf copy of the coverage option.

10. Verify the Employee and Dependent information is correct and click on **Complete This Section**. You can also click **Save for Later** to save the enrollment at this point and continue later.



11. Answer the **Other Coverage** questions.



Will any person have other health insurance while this coverage is in effect? Select Yes if the Employee, Spouse, or any Dependent will has other coverage in effect.

Will (name) have other coverage? You will be asked this question for the Employee and each Dependent. If you select Yes, you will have two additional questions to answer.

Name of Other Coverage: Enter the name of the type of coverage (such as Medicare, or Tricare), or the name of the other insurer.

Certificate/policy #: Enter the certificate or policy number of the other coverage, which is typically also known as the Member ID number.

12. Click on **Complete this Section**.

13. Click **Finalize and Sign**.

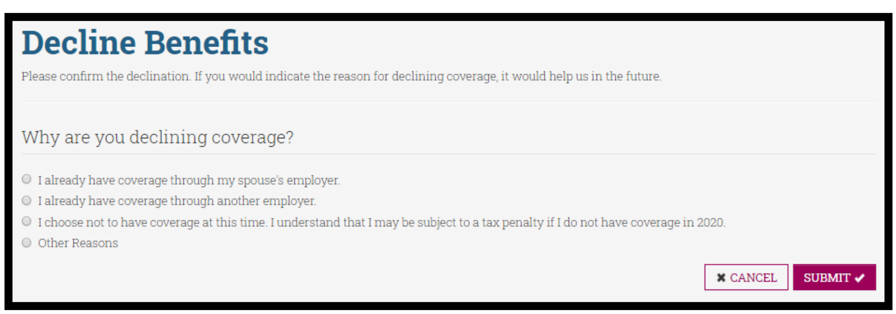
14. Enter the Employee's Name to e-sign the application and click **Submit Application**.

15. This completes the enrollment and the Employee will be in **Submitted** status and will require **HR Approval** (*Section 3. E. 4*).

4: Declining Coverage

To decline coverage for the new Employee, you need to follow these steps:

1. Click on **View** to access the **Employee Profile**.
2. Click on **Decline Benefits**.
3. Select the reason for Declining Benefits:



I already have coverage through my spouse's employer: Selected if the Employee is coverage through his or her Spouse's employer-sponsored plan.

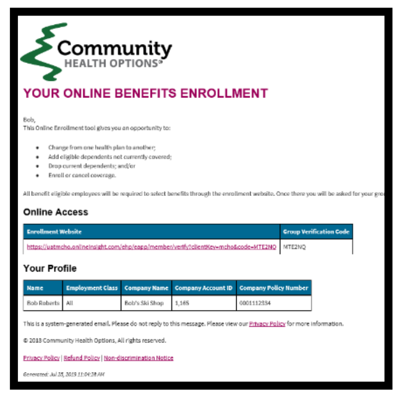
I already have coverage through another employer: Selected if the Employee has coverage through another employer-sponsored plan.

I choose not to have coverage at this time: I understand that I may be subject to a tax penalty if I do not have coverage in 2020: Selected if the Employee will not have any coverage in effect.

Other Reasons: Selected if the Employee is covered under a plan that is not an employer-sponsored plan, or must decline for another reason not specified.

4. Click **Submit**.

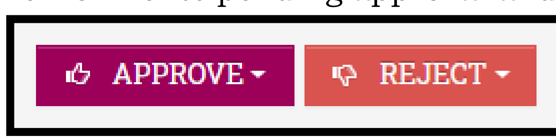
5: If Employee Emails are Sent



The Portal can send emails to Employees for them to make their own selection. If this option was selected when the Group Application was completed, then Employees will receive an email that will direct them to log into the Employee Enrollment Portal to make their selection or decline coverage. Once a selection has been made, the **Employee Roster** will show either **Submitted** or **Declined**. If an enrollment is **Submitted**, it will require **HR Approval**, outlined in *Section 3. E. 4*.

6: HR Approval (Tasks)

Once an enrollment is **Submitted**, it will require your approval under the **Tasks** tab. Once on the **Tasks** tab, you will see all enrollments pending approval and you have two options, **Approve** or **Reject**.

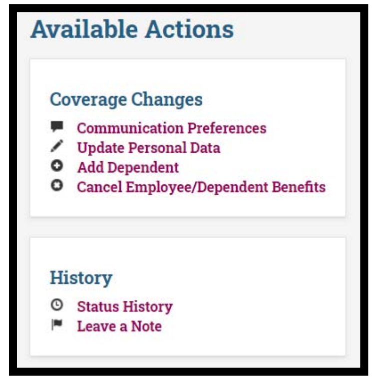


Approve: You can select a single Employee from the list by clicking the box to the left of his or her name, and then click **Approve**. You also have the option of clicking the downward facing arrow next to the **Approve** button, and then selecting **Approve All**. Once you select **Approve** or **Approve All**, you may need to provide a reason for the enrollment in a pop-up window. You can also approve using the drop-down menu to the right of the Employee listing.

Reject: You can select a single Employee from the list by clicking the box to the left of his or her name, and then click **Reject**. You also have the option of clicking the downward facing arrow next to the **Reject** button, and then selecting **Reject All**. Once you select **Reject** or **Reject All**, you may need to provide a reason for rejecting the enrollment in a pop-up window. You can also reject using the drop-down menu to the right of the Employee listing.

G: Managing Life Events

Throughout the Plan Year, you may make certain changes to an Employee's enrollment or preferences. All these changes may be initiated from within the **Employee Profile**. You'll find the following selections under **Available Actions**.

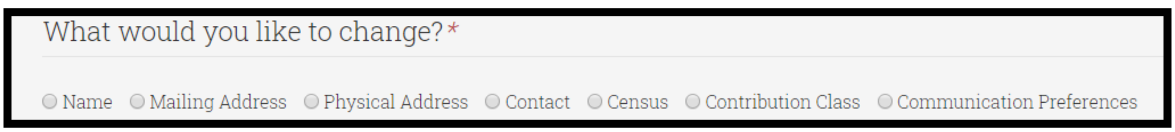


1: Communication Preferences

This allows you to make updates to the Employee's preferences for communication. Currently, a selection may be made within the **Employer Portal**, but we are unable to accommodate preferences within our fulfillment process.

2: Update Person Data

Update Personal Data allows you to make changes to the Employee's data that does not affect his or her enrollment.



Name: Used to make updates to the Employee's name or the Employee's Spouse or Dependent's names.

Mailing Address: Used to make updates to the Employee's mailing address or the Employee's Spouse or Dependent's mailing addresses.

Physical Address: Used to make updates to the Employee's physical address.

Contact: Used to update the Employee's phone number or email.

Census: Used to update the Employee's date of birth or gender; you must enter an **Effective Date**, but this should always be the current **Effective Date** of the Member updated.

Contribution Class: Used to update the contribution classification of the Employee, which will update displayed contribution amounts to those that have been set for the new class.

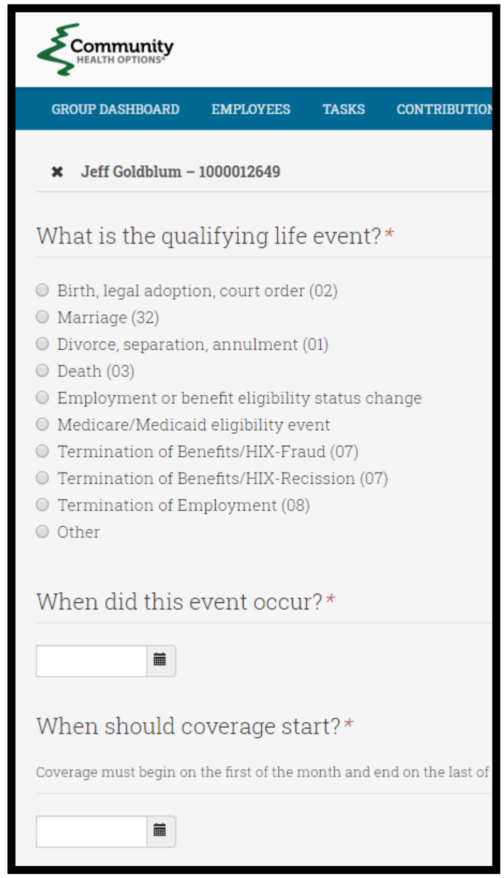
Communication Preferences: Used make updates to the Employee's preferences for communication. Currently, a selection may be made within the Employer Portal, but we are unable to accommodate preferences within our fulfillment process.

2: Add Dependent

Add Dependent is used to process a **Life Event** to add a Spouse or Dependent to the Employee's policy. Follow these steps to add a Spouse or Dependent:

1) Select **Add Dependent**.

2) Choose the appropriate Qualifying Life Event from the list. There must be one of these events that allows the Employee to add the Spouse/Dependent to his or her coverage.



Birth, legal adoption, court order is used when an Employee has a newborn child, finalized an adoption, or is required to cover a child due to a court order. A copy of the birth certificate, adoption certificate, or court documents should be attached in **Documents**.

Marriage should be used when an Employee is eligible to add his or her Spouse and Dependents due to marriage. A copy of the marriage certificate should be attached in **Documents**.

Divorce, separation, annulment is used if an Employee has finalized a divorce, separated from his or her Spouse or Domestic Partner, or annulled a marriage, and is adding any Dependents as a result. A copy of the court documents to support the **Qualifying Life Event** should be attached in **Documents**.

Death is used when an Employee is adding coverage for a Spouse or Dependents due to death. A copy of the Death Certificate should be attached in **Documents**.

Employment or benefit eligibility status change should be utilized when an Employee has a change in employment status, which may include a transition from part time to full time, or temporary to permanent employee. A statement from that person's supervisor or Human Resources should be attached in **Documents**.

Medicare/Medicaid eligibility event is used when an Employee's Spouse or Dependent has lost coverage under Medicaid or Medicare. A copy of the letter stating coverage has been lost should be attached in **Documents**.

Termination of Benefits/HIX-fraud is used if an Employee is adding coverage for a Spouse or Dependent due to loss of other benefits, or a loss of Marketplace coverage due to fraud. A document showing the loss of benefits should be attached in **Documents**.

Termination of Benefits/HIX-Rescission is used if an Employee is adding coverage for a Spouse or Dependent due to loss of other benefits, or a loss of Marketplace coverage due to a rescission of coverage for a reason other than fraud. A document showing the loss of benefits should be attached in **Documents**.

Termination of Employment is used if an Employee is adding coverage for a Spouse or Dependent due to loss of coverage due to a termination of employment. A statement from that person's supervisor or Human Resources should be attached in **Documents**.

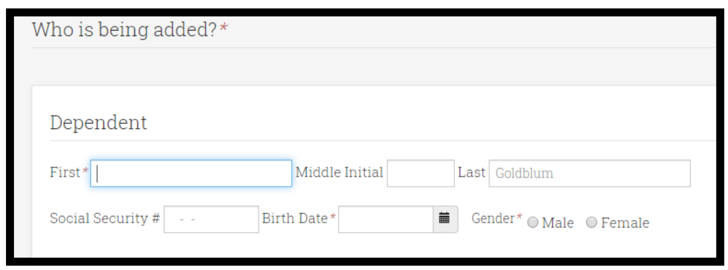
Other should be used only with the consent of Health Options for a reason not covered within the other **Life Events**.

3) Enter the date that the event occurred

4) Enter the date that coverage should start for the Spouse or Dependent. Coverage must begin on the first of the month except for birth, adoption, or death.

5) Click on **Add New Dependent** or **Add New Spouse** to add the desired person.

6) Enter the new Member data. **Name**, **Date of Birth**, and **Gender** are required, and although the social security number is not required, it is highly recommended to enter for tax reporting and filing purposes.



7) Click **Continue**.

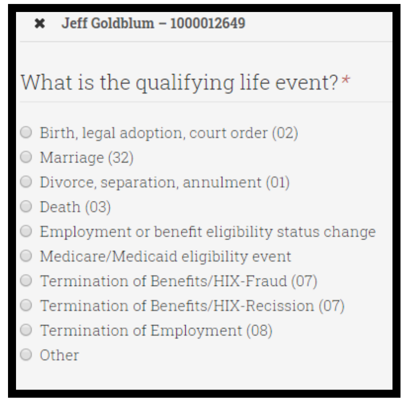
8) Click **Submit** to complete the **Add Coverage Life Event**.

3: Cancel Employee/Dependent Benefits

Cancel Employee / Dependent Benefits is used to process a **Life Event** to cancel coverage for the Employee's policy, or for a Spouse or Dependent currently covered under the policy. Follow these steps to add a Spouse or Dependent:

1) Select **Cancel Employee/Dependent Benefits**.

2) Choose the appropriate **Qualifying Life Event** from the list. There must be one of these events that allows the Employee to add the Spouse/Dependent to his or her coverage.



Birth, legal adoption, court order is used when coverage is being cancelled due to birth of a newborn child, adoption, or a court order. A copy of the birth certificate, adoption certificate, or court documents should be attached in **Documents**.

Marriage should be used when an Employee is cancelling his or her own coverage, or that of a Spouse or Dependents due to marriage. A copy of the marriage certificate should be attached in **Documents**.

Divorce, separation, annulment is used when coverage is being cancelled due to divorce, separation from a Spouse or Domestic Partner, or annulment of a marriage. A copy of the court documents to support the **Qualifying Life Event** should be attached in **Documents**.

Death is used when coverage needs to be cancelled due to death. A copy of the Death Certificate should be attached in **Documents**, although at times Health Options may be notified of the death by a hospital or other medical organization.

Employment or benefit eligibility status change should be utilized when an Employee has a change in employment status, which may include a transition from full time to part time, or a leave of absence for which you are not required to maintain coverage. A statement from that person's supervisor or Human Resources should be attached in **Documents**.

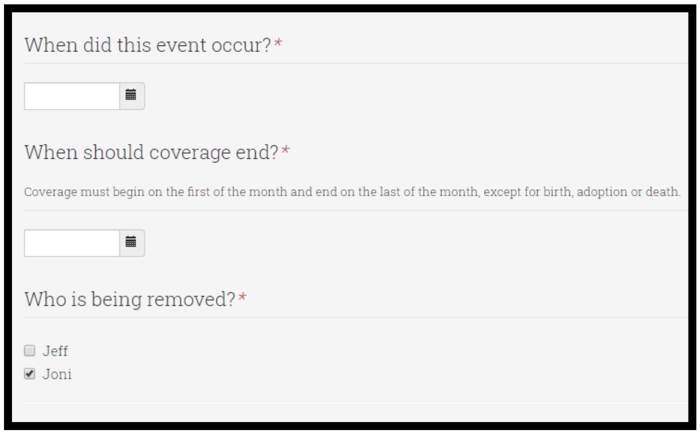
Medicare/Medicaid eligibility event is used when an Employee, or his or her Spouse or Dependent has gained coverage under Medicaid or Medicare. A copy of the letter stating the effective date of coverage should be attached in **Documents**.

Termination of Benefits/HIX-fraud is used if an Employee, Spouse, or Dependent is losing benefits due to fraud. A document showing the loss of benefits should be attached in **Documents**.

Termination of Benefits/HIX-Rescission is used if an Employee, Spouse, or Dependents is losing benefits due to a rescission of coverage for a reason other than fraud. A document showing the loss of benefits should be attached in **Documents**.

Termination of Employment is used if an Employee's coverage has been terminated. A statement from that person's supervisor or Human Resources should be attached in **Documents**.

Other should be used only with the consent of Health Options for a reason not covered within the other **Life Events**.



3) Enter the date that the event occurred.

4) Enter the date that coverage should start for the Spouse or Dependent. Coverage must begin on the first of the month except for birth, adoption, or death.

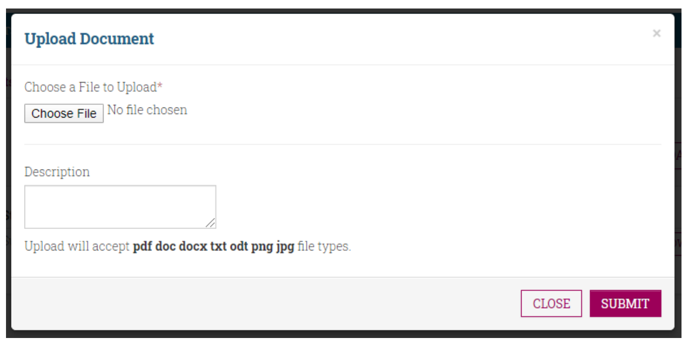
5) Select the person to cancel.

6) Click **Continue**.

7) Click **Submit** to complete the **Cancel Coverage Life Event**.

4: Health Options Approval

Most Life Events require approval from Health Options. They will be reviewed to ensure that the Qualifying Life Event matches the Life Event change that was made, and that the request was made within the allowed time frame.



Upload Supporting Documentation: Documents can be uploaded in the **Documents** tab within the **Employee Record**. Click on **Upload Document**, choose the file you wish to upload, enter the description, and click **Submit**.

H: Renewals

When it is time to renew your health plan, your Agent will handle the renewal of your Group, but Employees may be renewed either by your Agent or by you. There is also an option to send enrollment emails for Employees to make their own selections that you will just need to approve.

1: General Open Enrollment Guidelines

It is important that you follow these basic guidelines when your Group is going into Open Enrollment for Renewal.

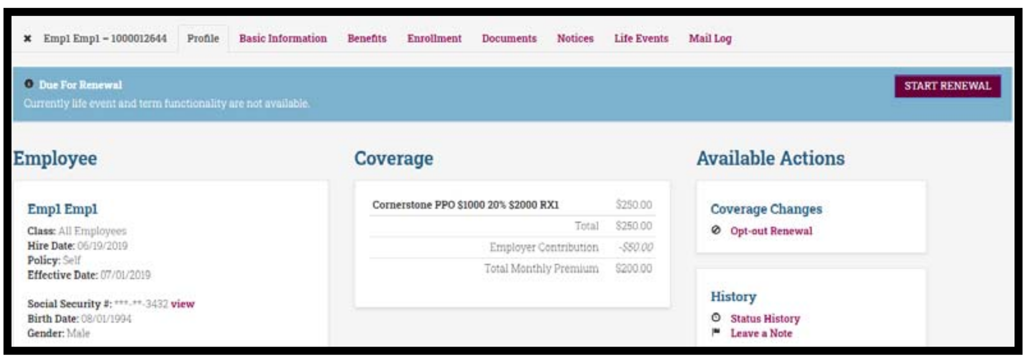
A. Process all pending **Life Events** ahead of the start of **Open Enrollment**. Any pending Life Events will prevent Open Enrollment form starting on schedule, so be sure to give enough time for them to process prior to the date Open Enrollment is scheduled to begin.

B. Any **Cancellations** for the end of the prior coverage period (ie. 12/31 when the new coverage begins 1/1) should be held off until Open Enrollment and processed as a **Renewal Opt-out** instead of a typical **Termination**.

C. **Communication** or **Demographic Changes**, or adding or removing Dependents, should be processed during the Employee Renewal and not prior to the Renewal. These are all handled similarly to Life Events and may cause a delay in the start of Open Enrollment if processed too close to the Open Enrollment start date.

2: Renewing Coverage

To renew Employee coverage, you will need to go into Employees page and follow these steps:

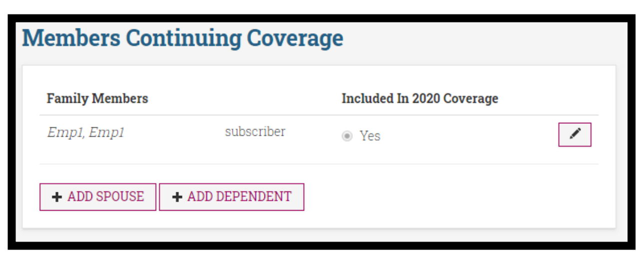


1. Click on **View** to access the **Employee Profile**.

2. Click on the **Start Renewal** button that appears above the **Available Actions**. This will take you to the **Basic Information** page.

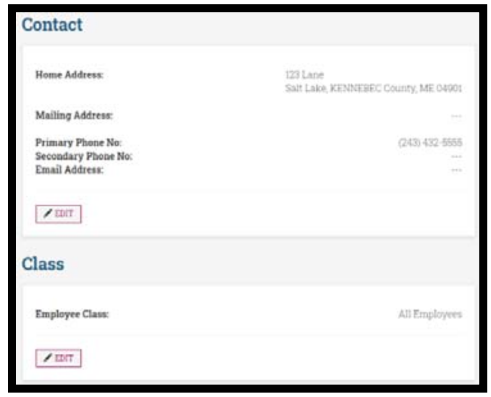
3. Here you can make several changes to the Employee's coverage and information.

Members Continuing Coverage: This section outlines those who should be included in the **Coverage Renewal**. All Family Members in the system are listed, and a radial button to select Yes or No will be pre-selected based on the current coverage selection. Clicking



on the pencil icon opens a new window that allows you to edit the personal details of the Employee or Dependent, including **Name**, **Birth Date**, **Social Security Number**, and **Gender**. If a Spouse or Dependent has a different mailing address than the Employee, you can edit it here. Click **OK** to save the changes. Selecting **Add Spouse** or **Add Dependent** opens a new window that allows you enter all necessary information for adding a spouse or dependent to Renewal Coverage.

Contact: Displays the current contact information for the Employee. Clicking **Edit** opens a new window to update the Employee's contact information.



Class: Shows the Employee's current Contribution Class, or Division. Clicking **Edit** allows you to update the Contribution Class for the new Coverage Period.

4. Click **Next**.

5. Select the Plan the Employee has chosen for Renewal Coverage by clicking **Select**. You can also view a Plan Comparison by clicking the box next to where it says **Add to Compare** and clicking on **Compare**. You can also select the Plan in the **Comparison** page.

6. Click **Continue**.

7. Review Coverage details on the **Proposal Review** page. You may click **Edit** to update Coverage details or the Selected Plan if needed. Clicking **Save as PDF** will save a .pdf copy of the **Coverage Details**.

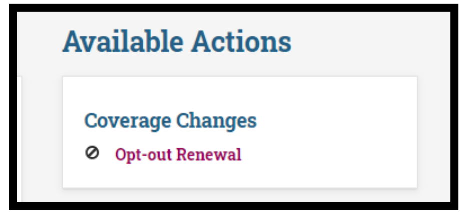
8. Click **Confirm Enrollment**.

9. Renewal Enrollment is complete, and you may click on the **x** next to the Employee's name to return to the **Employees** page.

3: Opt-out of Renewal

If the Employee is currently enrolled, but wishes to Decline Coverage at Renewal, you need to follow these steps:

1. Click on **View** to access the **Employee Profile**.
2. Click on **Opt-out Renewal**.
3. Select the reason for Declining Benefits.
4. Click **Submit**.



4: If Employee Emails are Sent

The Portal can send emails to Employees for them to make their own selection. If this option was selected when the Group Application was completed, then Employees will receive an email that will direct them to log into the Employee Enrollment Portal to make their selection or decline coverage. Once a selection has been made, the **Employee Roster** will show either **Submitted** or **Declined**.

5: HR Approval (Tasks)

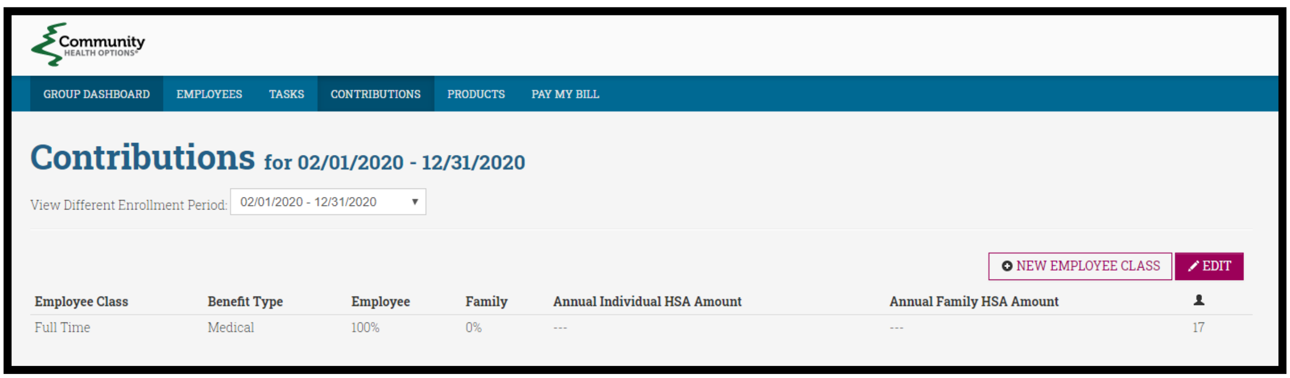
Once an enrollment is **Submitted**, it will require your approval under the **Tasks** tab. Once on the **Tasks** tab, you will see all enrollments pending approval and you have two options, **Approve** or **Reject**. Review *Section 3. E. 4* for details on approving or rejecting enrollments.

Section 4: Contributions & Products

The Health Options Employer Portal gives you the tools to quickly and easily access information about your Employer Sponsored Health Plan. Two tabs on the navigation bar are there to help you understand and manage your Plan.

A: Contributions

The **Contributions** tab allows you to manage your Contribution Classes, or Divisions, and to make updates to the display of amounts that you contribute to Employee coverage.



1: View Different Enrollment Period

Near the top of the page this section gives you the ability to view your current Coverage Period, or past Coverage Periods. The default is the current period. Use the drop down to select an earlier Coverage Period.

2: Contribution Class Details

The middle of the screen outlines the details of the Contribution Class.

Employee Class: This is the title of the class.

Benefit Type: This is the benefit type for the class.

Employee: If you have Member-Level Contributions, this is the amount that you, as the Employer, contributes to the Employee's portion of the Premium. If you have Tier-based Contributions, this is the amount that you contribute to the Premium for an Employee with Employee Only Coverage. Note that changing this does not actually affect your contributions, only the display of amounts you contribute within the Portal.

Family: If you have Member-Level Contributions, this is the amount that you, as the Employer, contributes to the Spouse or Dependent's portion of the Premium. If you have Tier-based Contributions, this is the amount that you contribute to the Premium for an Employee with Employee and Spouse, Employee and Child(ren), or Family Coverage. Note that changing this does not actually affect your contributions, only the display of amounts you contribute within the Portal.

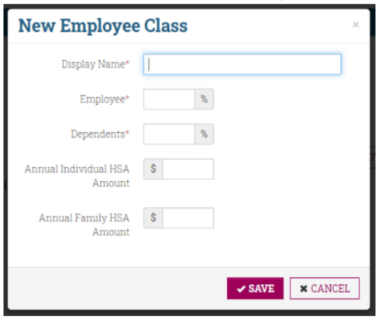
Annual Individual HSA Amount: This is the amount that you contribute to a Health Savings Account annually to the Employee.

Annual Family HSA Amount: This is the amount that you contribute to a Health Savings Account annually to the Employee's Spouse and Dependents.

Person Icon: The number under the icon shows how many Employees are in that Contribution Class.

3: New Contribution Class

If you click on the **New Contribution Class** button, a new window opens for you to enter the details of a new class, or division.



Display Name: This is the title of the class.

Employee: If you have Member-Level Contributions, this is the amount that you, as the Employer, contributes to the Employee's portion of the Premium. If you have Tier-based Contributions, this is the amount that you contribute to the Premium for an Employee with Employee Only Coverage. Note that this does not actually affect your contributions, only the display of amounts you contribute within the Portal.

Dependents: If you have Member-Level Contributions, this is the amount that you, as the Employer, contributes to the Spouse or Dependent's portion of the Premium. If you have Tier-based Contributions, this is the amount that you contribute to the Premium for an Employee with Employee and Spouse, Employee and Child(ren), or Family Coverage. Note that this does not actually affect your contributions, only the display of amounts you contribute within the Portal.

Annual Individual HSA Amount: This is the amount that you contribute to a Health Savings Account annually to the Employee.

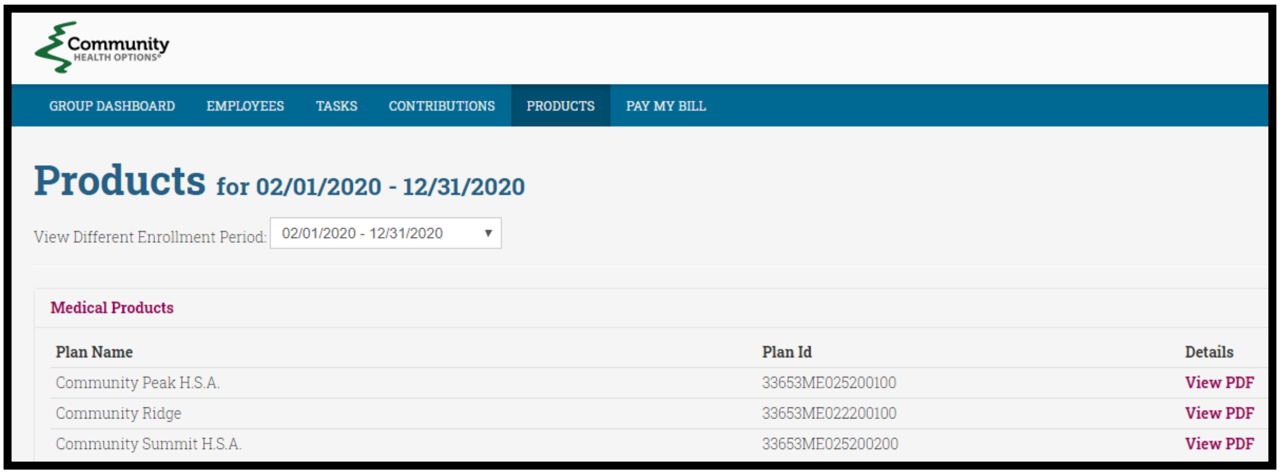
Annual Family HSA Amount: This is the amount that you contribute to a Health Savings Account annually to the Employee's Spouse and Dependents.

4: Edit Contribution Class

Clicking on **Edit Contribution Class** allows you to change the amounts entered for any Class. Note that changing these amounts does not actually affect your contributions, only the display of amounts you contribute within the Portal.

B: Products

The Products tab allows you to view your Plan benefits for the current, or previous, Coverage Periods.



1: View Different Enrollment Period

Near the top of the page this section gives you the ability to view your current Plan benefits, or benefits from past Coverage Periods. The default is the current period. Use the drop down to select an earlier Coverage Period.

2: Medical Products

The middle of the screen outlines the details of the Contribution Class.

Plan Name: This is the name of the Plan.

Plan ID: This is the Plan ID Number used to process claims according to the Plan benefits.

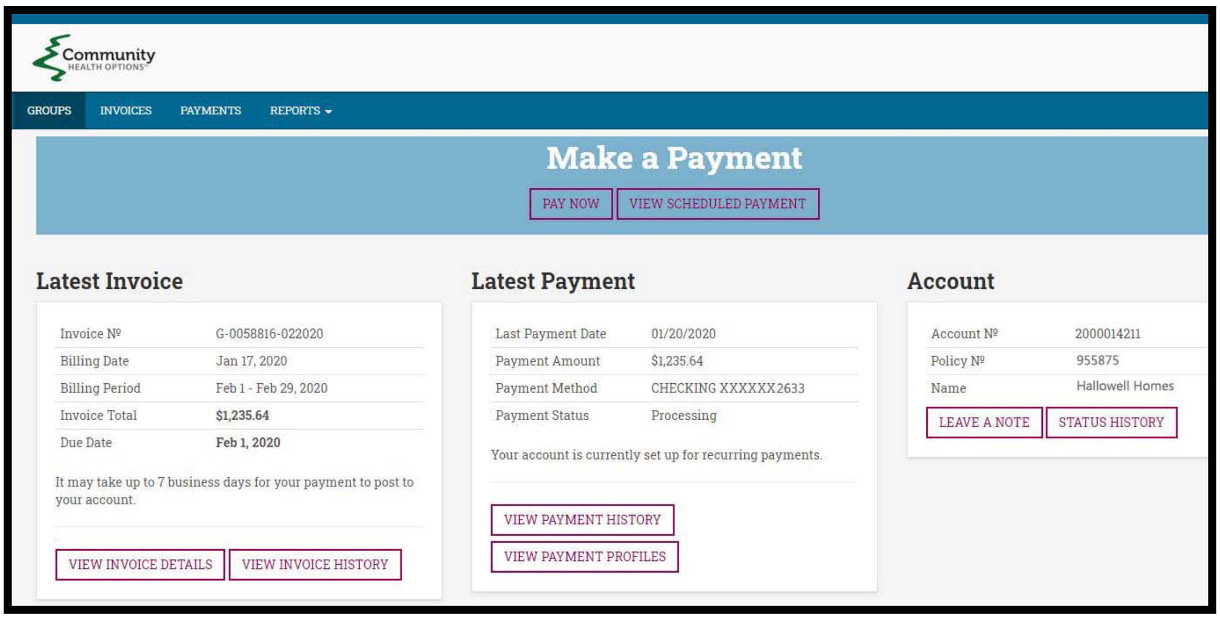
Details: Under Details you will see a link to **View PDF**. By clicking on **View PDF** you will open a new window that shows the complete Plan details.

Section 5: Pay My Bill / Billing

One of the key features of the Health Options Employer Portal is the Billing and Payment Feature. The Billing section allows you to view and pay your invoices, view past invoices and payment history, and schedule payments and automatic payments. You access the Billing and Payment Portal by clicking on **Pay My Bill** on the navigation menu, or the **Billing** link near the top right corner of the screen. Clicking on either link will open a new window to the Billing and Payment Portal.

A: Dashboard

When you launch the Billing and Payment Portal, you will land on the **Dashboard**.



1: Navigation

The Navigation bar at the top of the screen will allow you to jump between the three main sections of the Billing and Payment Portal.

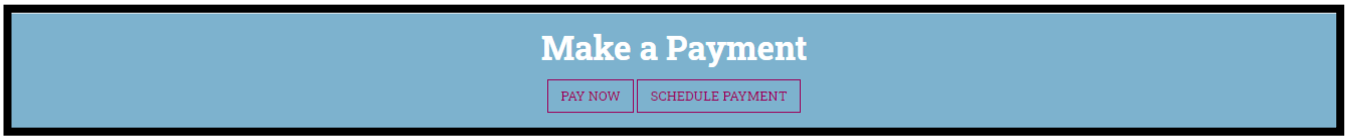
Dashboard: This is the landing page when you first enter the Billing and Payment Portal. Clicking on **Dashboard** when on another page will bring you back to the **Dashboard**.

Invoices: Clicking on **Invoices** takes you to the **Invoices** section, which allows you to view your current and past invoices and view invoice details.

Payments: Clicking on **Payments** opens a drop-down menu that is detailed in *Section 5. C*.

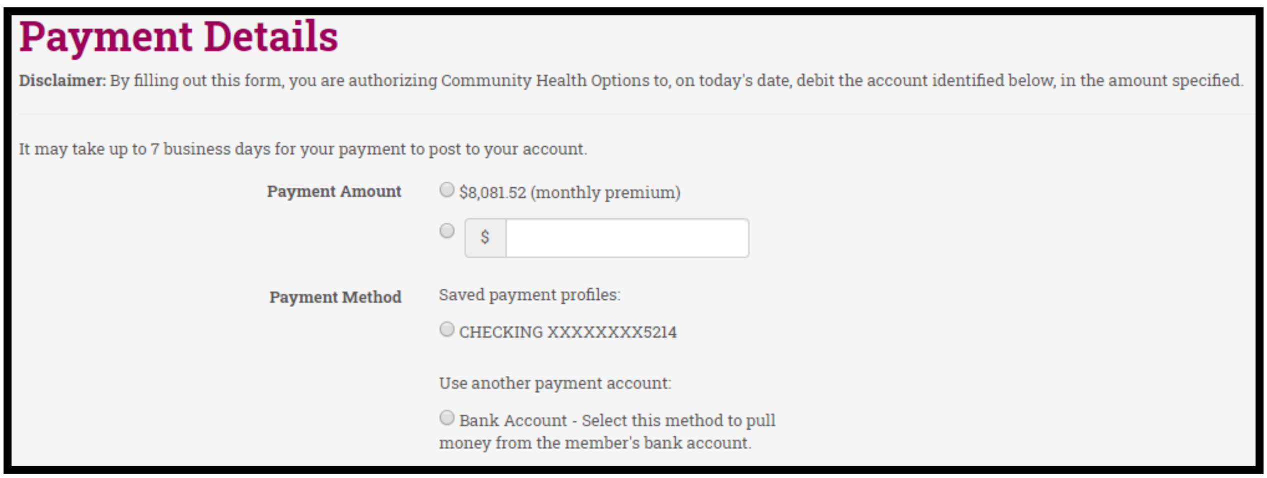
2: Make a Payment

Across the middle of the screen are the payment options.



Pay Now: Clicking on **Pay Now** brings you to the **Payment Details** screen where you can enter the details of your One-time payment. Follow these steps to make a One-time payment now.

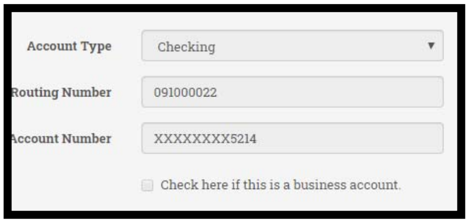
1) Click on **Pay Now**. You will be taken to the **Payment Details** screen.



2) Enter the payment amount. You have two options, the last invoice total, or enter the amount you wish to pay.

3) Select the payment method. You will have the option to select a saved payment profile if you have made a payment previously and saved the payment details. You can also select Bank Account as a payment method to process your payment with an Electronic Funds Transfer (EFT). Click **Next** to go to the **Payment Method** screen.

4) If you use a saved payment profile, the payment details are already filled in. If you selected Bank Account as a payment method, you would need to enter the payment details.



Account Type: Select between Checking or Savings.

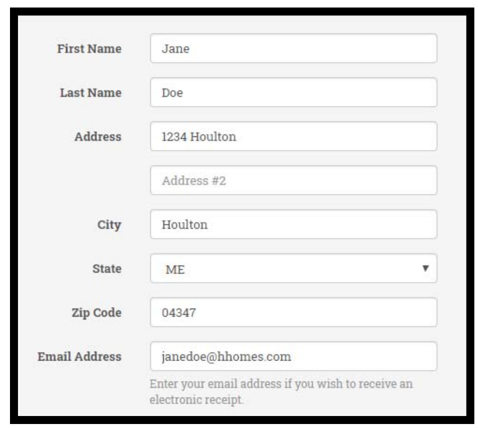
Routing Number: This is the nine-digit bank routing number that can be found on your check.

Account Number: This is your checking or savings account number with your financial institution.

5) If the account is a business account, select the box that states, **Check here if this is a business account**. Click **Next** to go to the Billing Address screen to confirm or edit the billing address information.

6) If you are entering the payment details for the first time and not using a saved payment profile, you will have the option to check a box to save the payment account for future use, and enter a nickname for the account.

7) Confirm the billing address information.

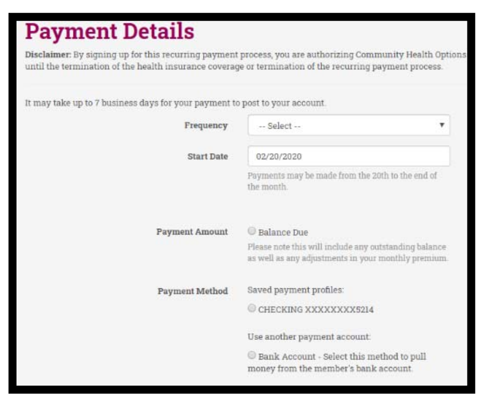


First Name and Last Name: Enter the name of the Group Contact who is making the payment.

Address, City, State, Zip Code: Enter the address of the organization exactly as it appears on bank statements.

Email Address: Enter the email address of the organization's contact who should be receiving payment confirmation. Click **Next** to go to the **Review Payment** screen.

8) Review the details of the payment. If you need to change anything, click **Previous**. Click **Submit** to process the payment.



Schedule Payment: Clicking on **Schedule Payment** takes you to the **Payment Details** screen where you can enter details of a payment for a future date. Follow these steps to schedule a one-time payment or set up a recurring payment.

1) Enter the frequency of the payment.

Monthly: Use to set up a recurring payment.

One-Time: Use to make a one-time payment.

2) For Start Date enter the date you want the recurring payments to start, or the date you want the one-time payment to process.

3) Select the payment method. You will have the option to select a saved payment profile if you have made a payment previously and saved the payment details. You can also select Bank Account as a payment method to process your payment with an Electronic Funds Transfer (EFT). Click **Next** to go to the Payment Method screen.

4) If you use a saved payment profile, the payment details are already filled in. If you selected Bank Account as a payment method, you would need to enter the payment details.

Account Type: Select between Checking or Savings.

Routing Number: This is the nine-digit bank routing number that can be found on your check.

Account Number: This is your checking or savings account number with your financial institution.

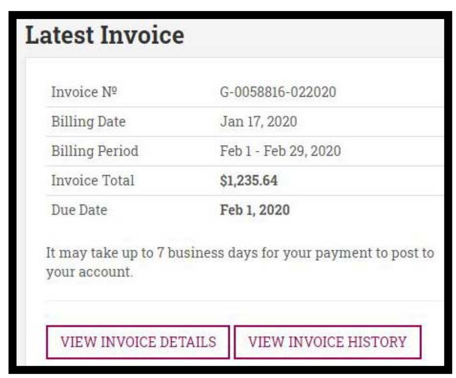
5) If the account is a business account, select the box that states, **Check here if this is a business account**. Click **Next** to go to the **Billing Address** screen to confirm or edit the billing address information.

6) If you are entering the payment details for the first time and not using a saved payment profile, you will have the option to check a box to save the payment account for future use, and enter a nickname for the account.

7) Review the details of the scheduled payment. If you need to change anything, click **Previous**. Click **Submit** to process the payment.

3: Latest Invoice

Beneath the **Make a Payment** banner, to the left of the screen is the **Latest Invoice** section. The **Latest Invoice** box gives you a quick review of the most recent invoice.



Invoice No: This is the invoice number of the most recent invoice, also located on the top right corner of the invoice.

Billing Date: This is the date that the most recent invoice was generated.

Billing Period: This is the coverage period that the most recent invoice is billing for.

Invoice Total: The total amount due from the most recent invoice. This amount includes both the amount billed on the most recent invoice as well as any past due amount. Payments not completed before the Billing Date will not be reflected in this amount.

Due Date: This is the due date of the most recent invoice.

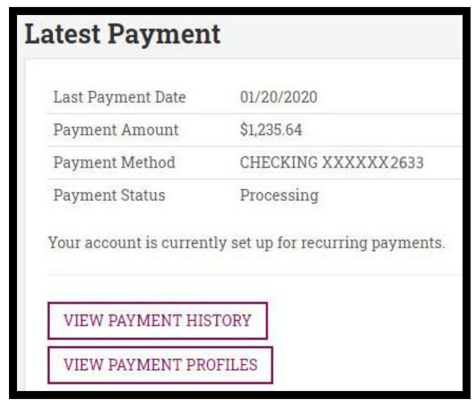
There are two buttons beneath the information box that take you to other invoice features within the Portal.

View Invoice Details: Takes you directly to the **Invoice Details** screen for the most recent invoice.

View Invoice History: Takes you to the **Invoice History** screen.

4: Latest Payment

The middle box beneath the **Make a Payment** bar is the **Latest Payment** information. This box summarizes your most recent payment.



Last Payment Date: The date of the most recent payment.

Payment Amount: The amount of the most recent payment.

Payment Method: Shows if the most recent payment was a checking or savings account, and shows the last 4 digits of the account number.

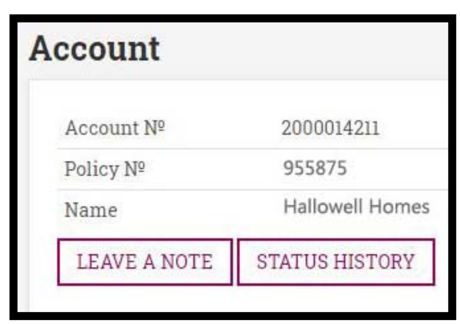
Payment Status: Shows the status of the most recent payment. The statuses are **Processing**, which indicates the payment is processing, **Completed**, indicating the payment has completed processing, and **Failed**, which indicates the payment was not able to be completed.

View Payment History: Takes you to the **Payment History** screen.

View Payment Profiles: Takes you the **Payment Profiles** screen.

5: Account

The right box beneath the **Make a Payment** bar is the **Account** information. This box summarizes the details about your account.



Account No: This is your group's system account number.

Policy No: This your group's **Policy Number**, which also shows as the Group ID on your Employees' ID Cards.

Name: This is the name of your **Employer Group**.

B: Invoices

When you click on the **Invoices** link, you will open the **Invoices** page.

1: Invoice History

The main page of the **Invoice** tab is the **Invoice History**. This page provides you the following information:

Invoice

Invoice Nº	Billing Period	Total	Status	Tags	PDF	Extracted Reports	
0000074993	Feb 1, 2020 - Feb 29, 2020	$1,455.73	OPEN	---	DOWNLOAD PDF	--	VIEW
0000073354	Jan 1, 2020 - Jan 31, 2020	$1,455.73	OPEN	---	DOWNLOAD PDF	--	VIEW

Invoice No: This the system-assigned number of the invoice. It is different than the invoice number located on the invoice and in the **Latest Invoice** section on the **Dashboard**. Clicking on this number will open the **Invoice Details**.

Billing Period: The coverage period that the invoice is billing for.

Total: The amount from the Total Due on the invoice.

Status: Currently, the **Status** column always reads Open.

Tags: Currently, the **Tags** column is always blank.

PDF: By clicking where it says **Download PDF**, you can open a pdf copy of the invoice.

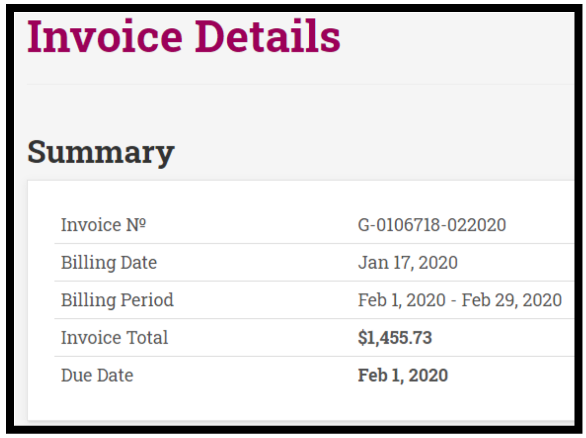
Extracted Reports: Currently, the **Extracted Reports** column is always blank.

View: Clicking on **View** will open the **Invoice Details**.

2: Invoice Details

The **Invoice Details** section provides details about the invoice.

Invoice No: This is the invoice number of the most recent invoice, also located on the top right corner of the invoice.



Billing Date: This is the date that the most recent invoice was generated.

Billing Period: This is the coverage period that the most recent invoice is billing for.

Invoice Total: The total amount due from the most recent invoice. This amount includes both the amount billed on the most recent invoice as well as any past due amount. Payments not completed before the **Billing Date** will not be reflected in this amount.

Due Date: This is the due date of the most recent invoice.

There are three buttons to the right of the information box that take you to other invoice features within the Portal.

Download PDF: By clicking where it says **Download PDF**, you can open a pdf copy of the invoice.

Make a Payment: Takes you to the **Payment Details** to make a one-time payment. View Section 5. A. 2 for instructions on making a one-time payment.

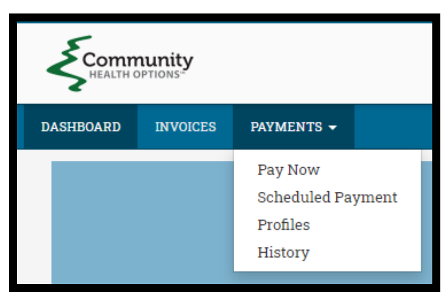
Payment History: Takes you to the **Payment History** screen. View Section 5. C. 4 for details on this screen.

C: Payments

When you click on **Payments** in the navigation menu, you will be able to select from options in a drop-down menu.

1: Pay Now

Takes you to the **Payment Details** to make a one-time payment. View *Section 5. A. 2* for instructions on making a one-time payment.

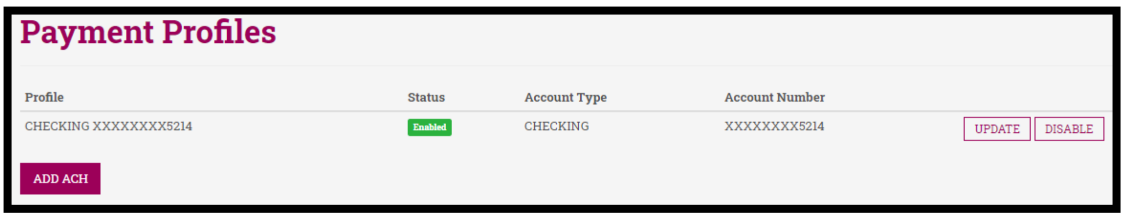


2: Scheduled Payments

Takes you to the **Payment Details** to schedule a payment or set up recurring payments. View *Section 5. A. 2* for instructions on making scheduling a payment or setting up a recurring payment.

3: Profiles

Takes you to the **Payment Profiles** page. If you saved payment details previously, it will be displayed here. If not, you can create a new **Payment Profile** by clicking on **Add ACH**.



Profile: This is the nickname created when entering the **Payment Details**. If you did not enter a nickname, it will be displayed as the **Account Type** (Checking or Savings), followed by the **Account Number** (A series of X's followed by the last 4 digits of the account number).

Status: Identifies the status of the account, Enabled or Disabled.

Account Type: Identifies the **Account Type**, Checking or Savings.

Account Number: Displays several X's followed by the **Account Number**.

Merchant ID: The federal **Merchant ID** of the Community Health Options payment processing system.

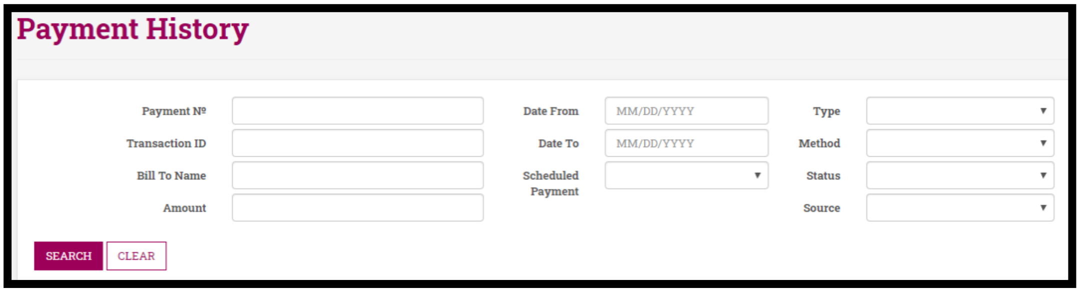
There are two buttons to the right of the payment profile information.

Update: Allows you to view the details of the **Payment Method**, and edit the **Account Type** or **Nickname**.

Disable: Disables the **Payment Profile** so it cannot be used.

4: History

Takes you to the **Payment History** page. It provides a search tool to locate specific payments, and a listing of all past payments beneath the search tool.



Search Tool: The search tool allows you to search for a specific payment by searching specific data points. You can use one search field, or multiple.

Payment No: Allows a search using the Payment Number that is generated when the payment is submitted.

Transaction ID: Search using the **Transaction ID** that is generated once a payment is submitted.

Bill to Name: Search payments based on the **Bill to Name**. This is typically the name of your organization.

Amount: Search for payments based on the amount of the payment.

Date From: To be used along with the **Date To** field, this allows a search for payments within a specific time frame.

Date To: To be used along with the **Date From** field, this allows a search for payments within a specific time frame.

Scheduled Payment: This field allows you to search for payments based on the scheduled type:

Blank: Leaving this field blank will search among all payments.

None: Search for a one-time payment that was made, but not scheduled ahead of time.

All: Search for all scheduled payments.

Monthly: Search for all scheduled monthly recurring payments.

One-Time: Search for any scheduled One-time payments.

Type: Allows you to search for specific types of payments.

Blank: Searches among all payments.

Bounce: Searches only for payments related to bounced checks.

Chargeback: Searches only for chargebacks, which is a reversal of a charged payment.

Charge: Searches only for charge payments, which include those made with debit cards and checks.

Refund: Searches only for refunds.

Write-Off: Searches only for write-offs.

Premium Reduction: Searches only for Premium reductions; although a search option, there are no Premium reductions.

Rebates: Searches only for rebates; although a search option, there are no rebates.

Method: Allows you to search for specific payment methods.

Blank: Searches among all payments.

Card: Searches only for card payments.

Cash: Searches only for cash application; cash application is an administrative financial process done only in rare circumstances.

Check: Searches only for check payments.

E-Box: Searches only for E-Box payments. Although a search option, Health Options does not currently take E-Box payments.

Status: Allows you to search for payments by the payment status.

Blank: Searches among all payments.

Pending: Searches only for pending payments.

Processing: Searches only for payments that are still processing.

Completed: Searches only for completed payments.

Failed: Searches only for failed payments.

Source: Allows you to search for payments by the payment source.

Blank: Searches among all payment sources.

OI: Searches only among payments processed with the Employer Portal.

IVR: Searches among automated phone payments; although this is a search option, Health Options does not accept phone payments for Employer groups on our automated phone system.

Keyed: Searches only for payments keyed by Health Options.

Forte: Searches only for payments processed from Health Options' payment processing vendor.

Lockbox: Searches only for payments processed from Health Options' lockbox; these are check payments.

Payment Data: The **Payment Data** shows you all prior payments.

Payment №	Date	Amount	Type	Transaction ID	Method	Status	Bill To Name	Source	
0000168473	Dec 24, 2019	$1,455.73	Charge	714316	Check	Completed	--	EXTERNAL	VIEW
0000166872	Nov 21, 2019	$1,455.73	Charge	698957	Check	Completed	--	EXTERNAL	VIEW

Payment No: Shows the system generated **Payment Number**. Clicking on this will open the **Payment Details** screen.

Date: Shows the date the payment was made. For check payments, this is the date the check was processed. For ACH payments, this is the date the payment was started.

Amount: The amount of the payment.

Type: Shows the type of payment.

Transaction ID: This is the system generated Transaction ID.

Method: Shows the method of payment (check, ACH, etc).

Status: Displays the current status of the payment.

Bill to Name: The Bill to Name of the payment.

Source: The source of the payment.