Highmark Employer Portal Guide

TRAINING GUIDE TABLE OF CONTENTS

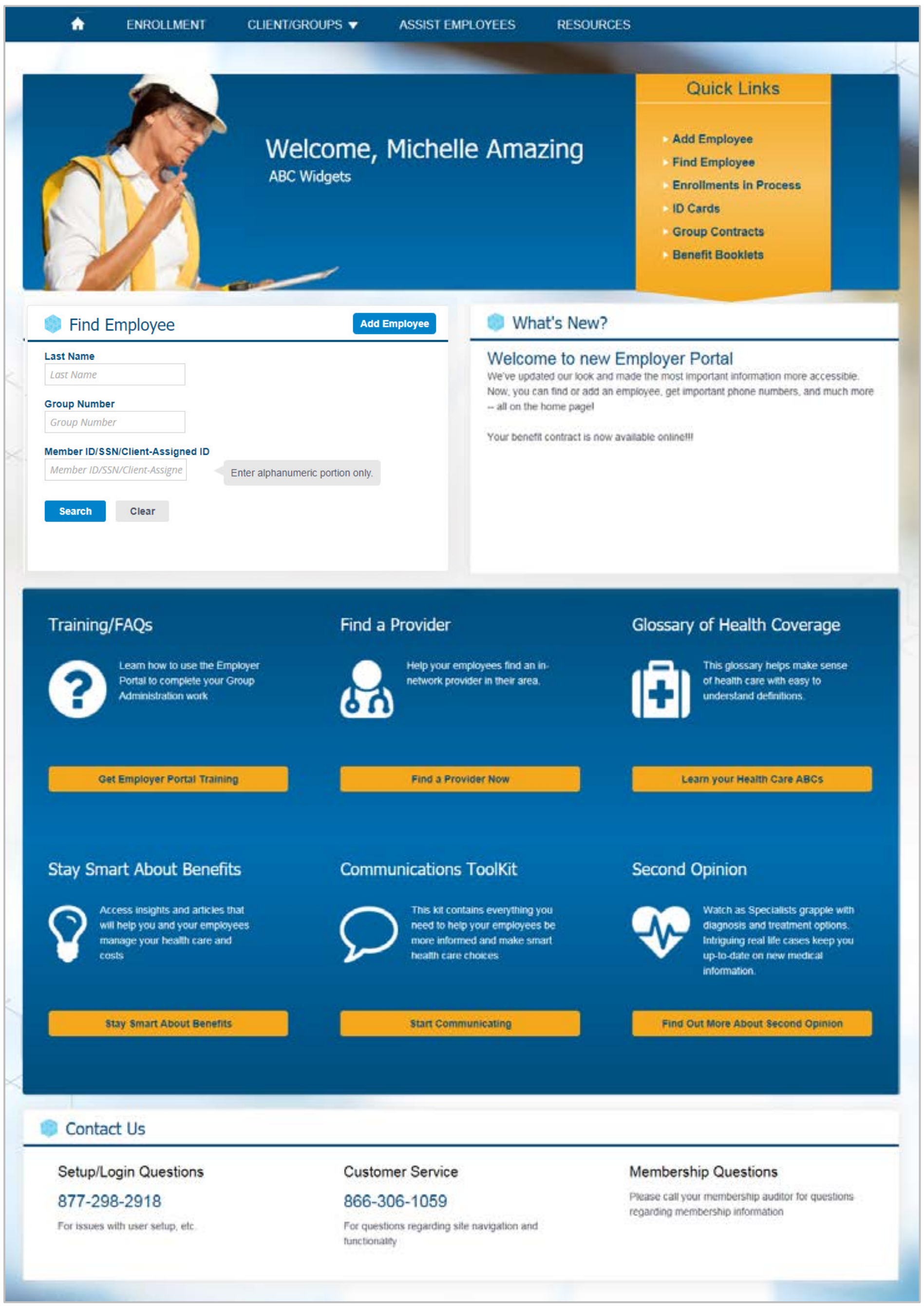
Section 1: Getting Started – Home Page

This section provides:

- An overview of the portal
- How to navigate through the secure mail feature
- Your profile

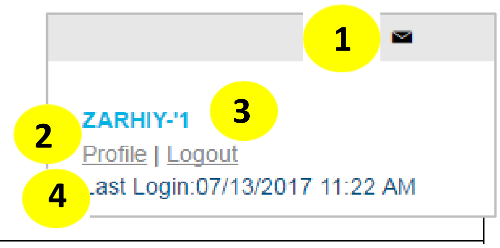
Access the Employer Portal Home Page

At this time you should have already received your log in information from Highmark. When logging in to the portal for the first time, you will be prompted to change your password. If you have forgotten your password, call Customer Service.



Header

The items in the header can be accessed from any page.

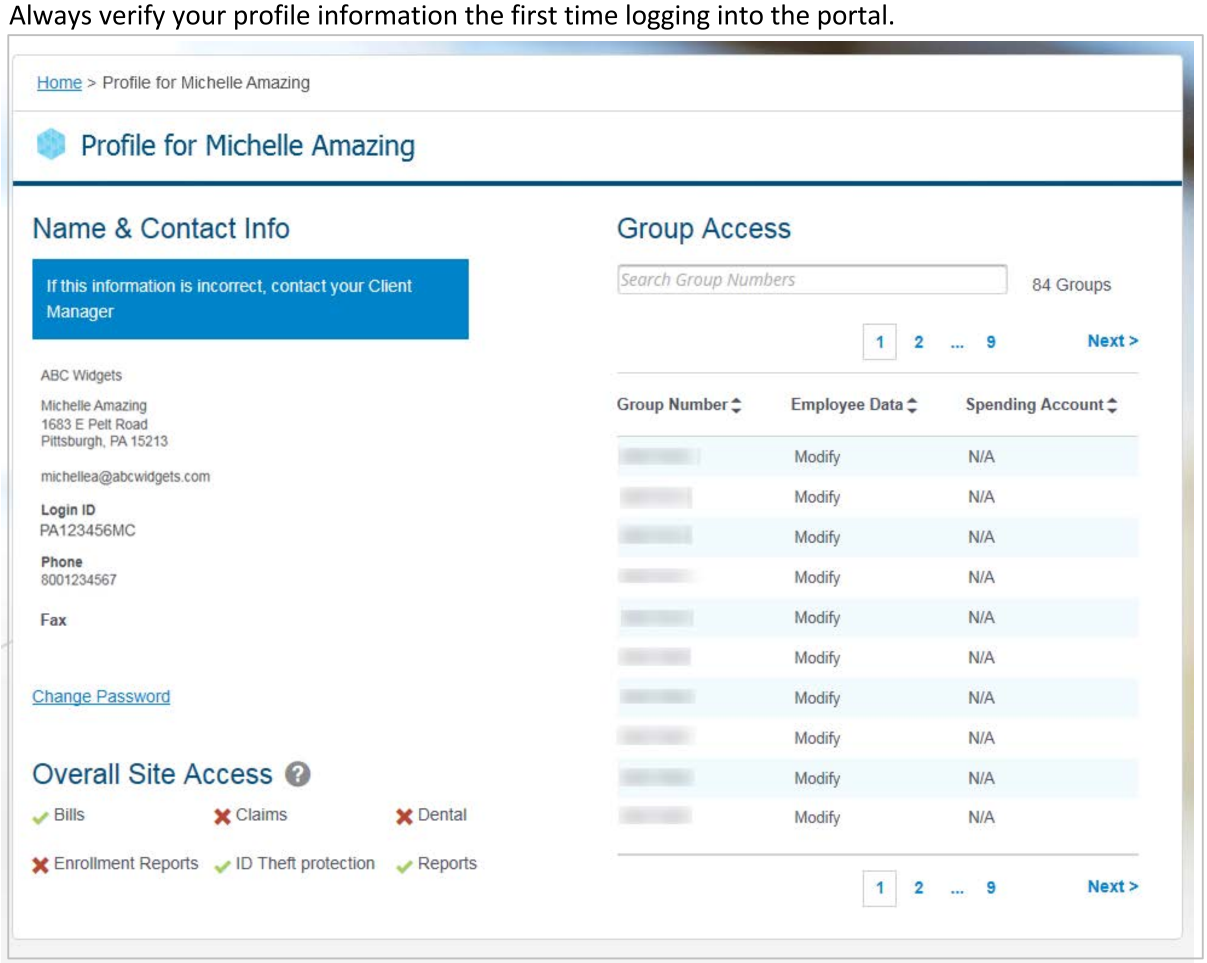


The header includes the following:

Control	Functionality
1. Secure Mail icon	Access your secure mail by clicking the envelope icon.
2. Profile link	View your demographics and entitlement information for the overall site and for each group. For example, you may be able to modify employee data for some groups, but only view employee data for other groups. This page includes the Change Your Password link if it's applicable. **Note**: Contact your Client Manager/Broker if the information needs to be. Their contact information can be found in the Clients/Groups tab.
3. Logout link	Log out of the portal.
4. Last Login	View the date and time when you last logged in.

Profile

Always verify your profile information the first time logging into the portal.



Navigational Tabs

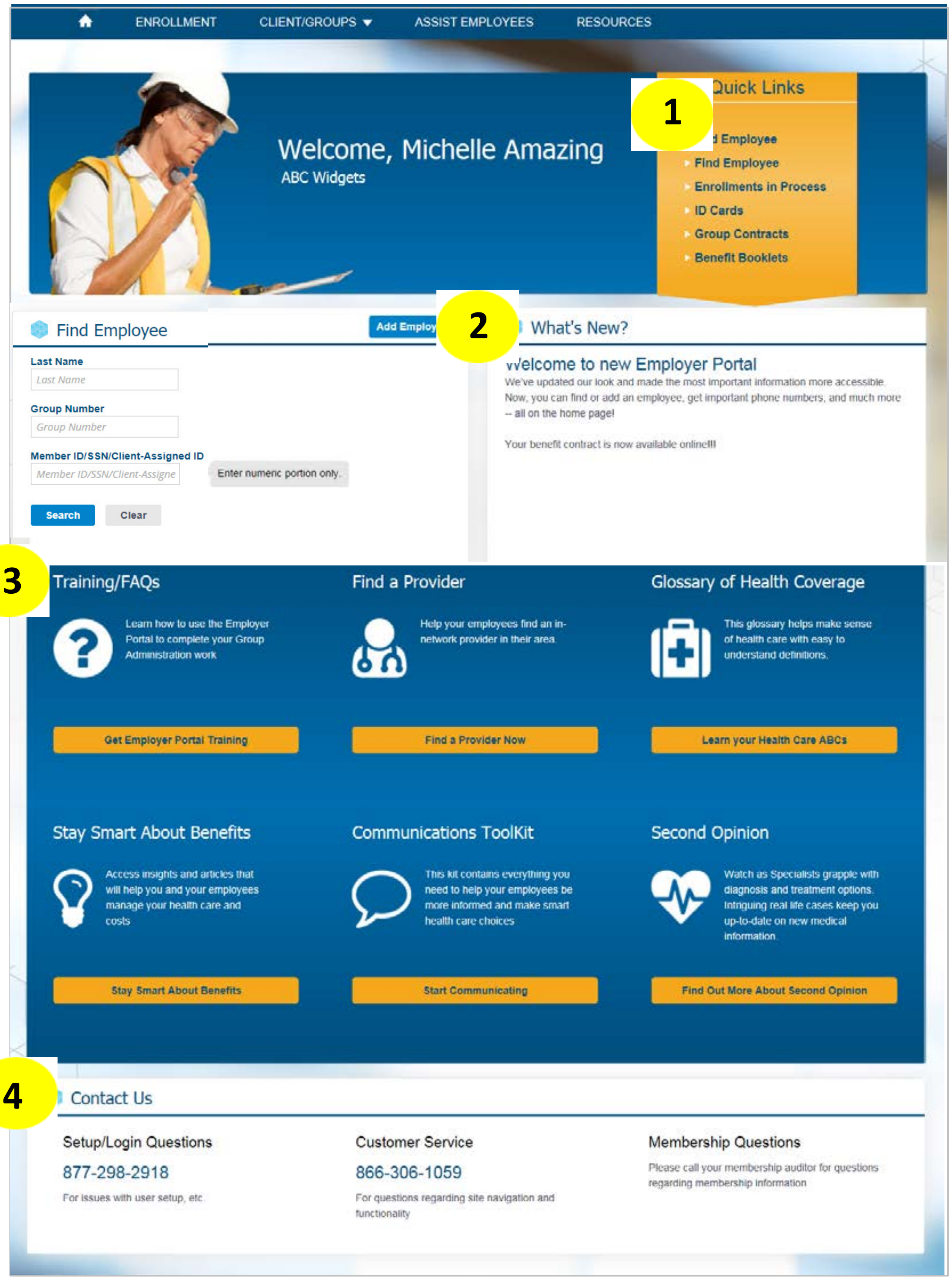
The **Navigational Tabs** can be found at the top of every web page. You can navigate to different sections of the portal by clicking these tabs.

The table below provides a description for each tab. The tabs provide access to key information used to complete the enrollment process and a variety of other functions in the portal. Not all users may have access to all tabs. If your access needs modified, contact your client manager.

Tab	Functionality
Enrollment	Enroll a new employee or make updates to an existing employee, cancel coverage, or monitor enrollment activities.
Client/Groups	Get client and group information.
Assist Employees	Request ID cards, view benefit booklets, or look up Plan or provider information. **If you are entitled to this feature**, you will be able to access Spending Accounts.
Billing	**If you are entitled to this feature**, you will be able to access the e-Bill system.
Reports	**If you are entitled to this feature**, you will be able to generate and view reports for your company. You can view enrollment reports, reports @ hand, and Health Analytics.
Resources	Find forms and applications, get updates on site status, and receive group bulletins.

Home Page

The **Home Page** includes shortcuts to common functionality, highlights information that may be of interest to you, and displays important contact information.



The Home Page includes the following:

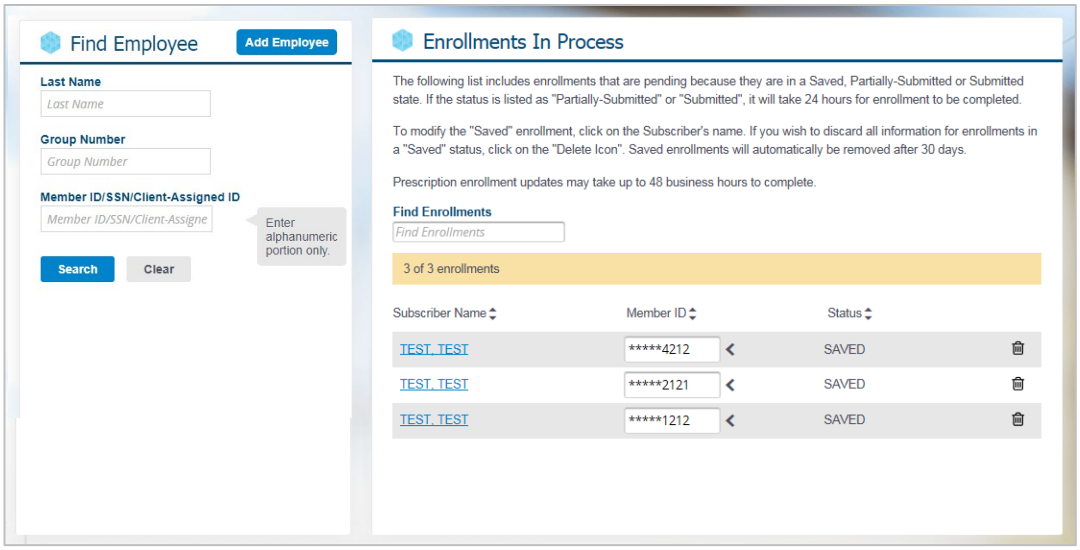
Feature	Functionality
1. Quick Links	Access the most common portal functions by clicking the links in the Quick Links ribbon.
2. What's New	Read the latest news and updates related to the portal or products.
3. E-Spots	Review content that can help you manage your employee groups. The e-spots may change as new information becomes available.
4. Contact Us	Locate important phone numbers, including Customer Service, Membership, and Technical Assistance.

Section 2: Enrollments

This section provides:

- An overview of the Enrollment Tab
- How you can use the enrollment functionality.

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



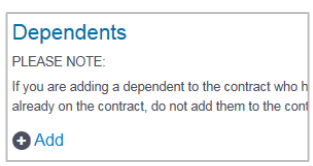
Add Employee

Click the Add Employee button to add a new subscriber and dependent(s) to the membership database.

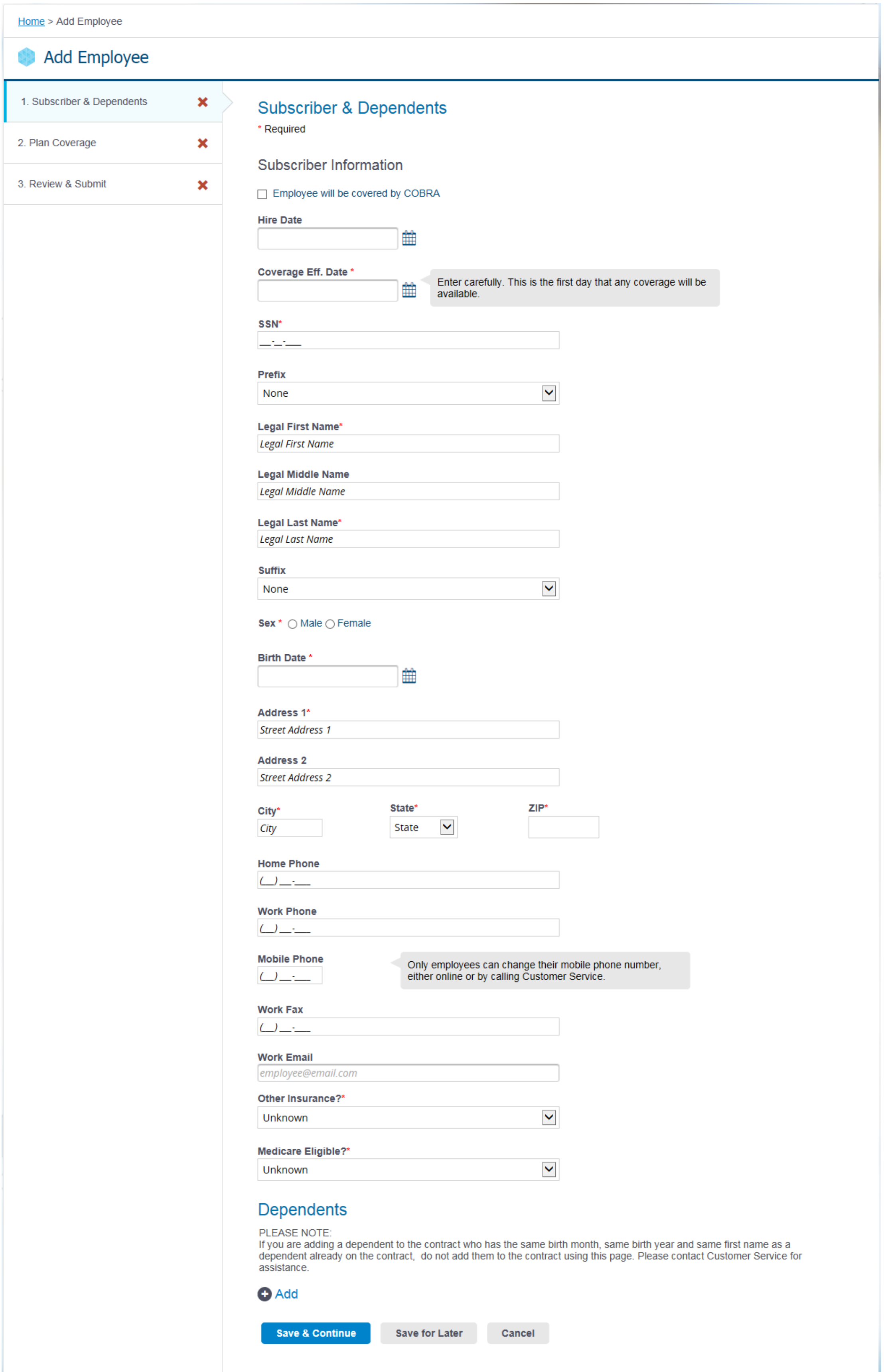
Note: Fields marked with an asterisk (*) are required fields. If any of these fields are not completed or incorrect, a notification will display in red text.

Step 1: Subscriber & Dependents

1. Make sure that you carefully enter the Coverage Effective Date as this is the first date when coverage will be available to the subscriber and their dependents.
2. Enter subscriber information, such as SSN, First Name, and Last Name.
3. Click Add if you want to add dependents. You will need to add multiple dependents by clicking Add multiple times.



4. Enter the dependents' data.
5. The Other Insurance and Medicare questions are defaulted to Unknown.
6. Click Save & Continue to go to the next step or click Save for Later to save the enrollment in Enrollments in Process.
   a. If you answered Yes to the Other Insurance question for the subscriber or dependent, an additional step will be displayed in the left navigation.
   b. If you answered Yes to the Medicare question for the subscriber or dependent, additional information will be requested in the left navigation.
   c. If you selected Full Time – MNLOA for a dependent's Special Status, additional information will be requested in the left navigation.


Home > Add Employee

Add Employee

1. Subscriber & Dependents
2. Plan Coverage
3. Review & Submit

Subscriber & Dependents

* Required

Subscriber Information

Employee will be covered by COBRA

Hire Date

Coverage Eff. Date *

Enter carefully. This is the first day that any coverage will be available.

SSN*

Prefix
None

Legal First Name*
Legal First Name

Legal Middle Name
Legal Middle Name

Legal Last Name*
Legal Last Name

Suffix
None

Sex * Male Female

Birth Date *

Address 1*
Street Address 1

Address 2
Street Address 2

City*
City

State*
State

ZIP*

Home Phone

Work Phone

Mobile Phone

Only employees can change their mobile phone number, either online or by calling Customer Service.

Work Fax

Work Email
employee@email.com

Other Insurance?*
Unknown

Medicare Eligible?*
Unknown

Dependents

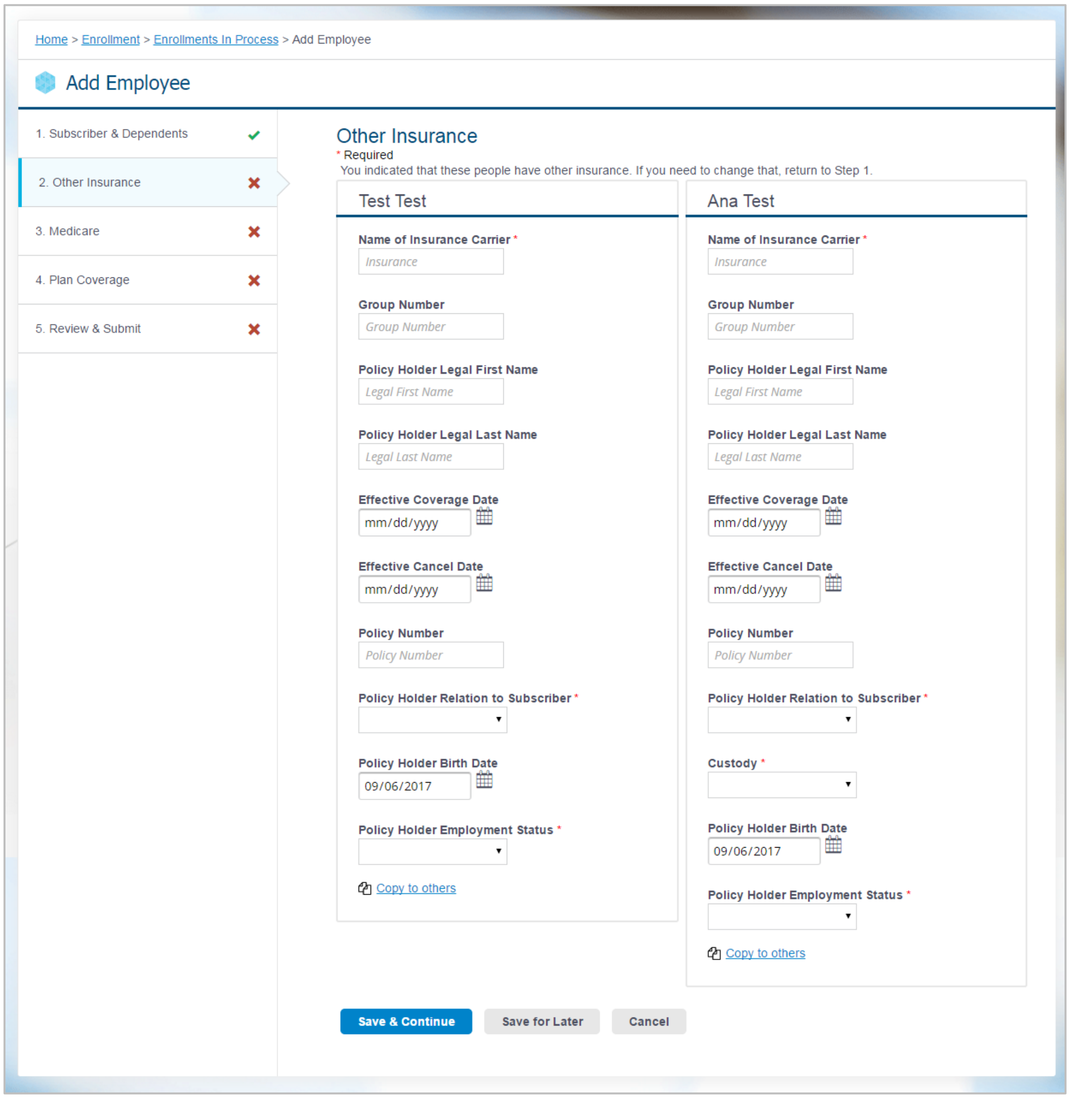
PLEASE NOTE:
If you are adding a dependent to the contract who has the same birth month, same birth year and same first name as a dependent already on the contract, do not add them to the contract using this page. Please contact Customer Service for assistance.

Add

Save & Continue
Save for Later
Cancel

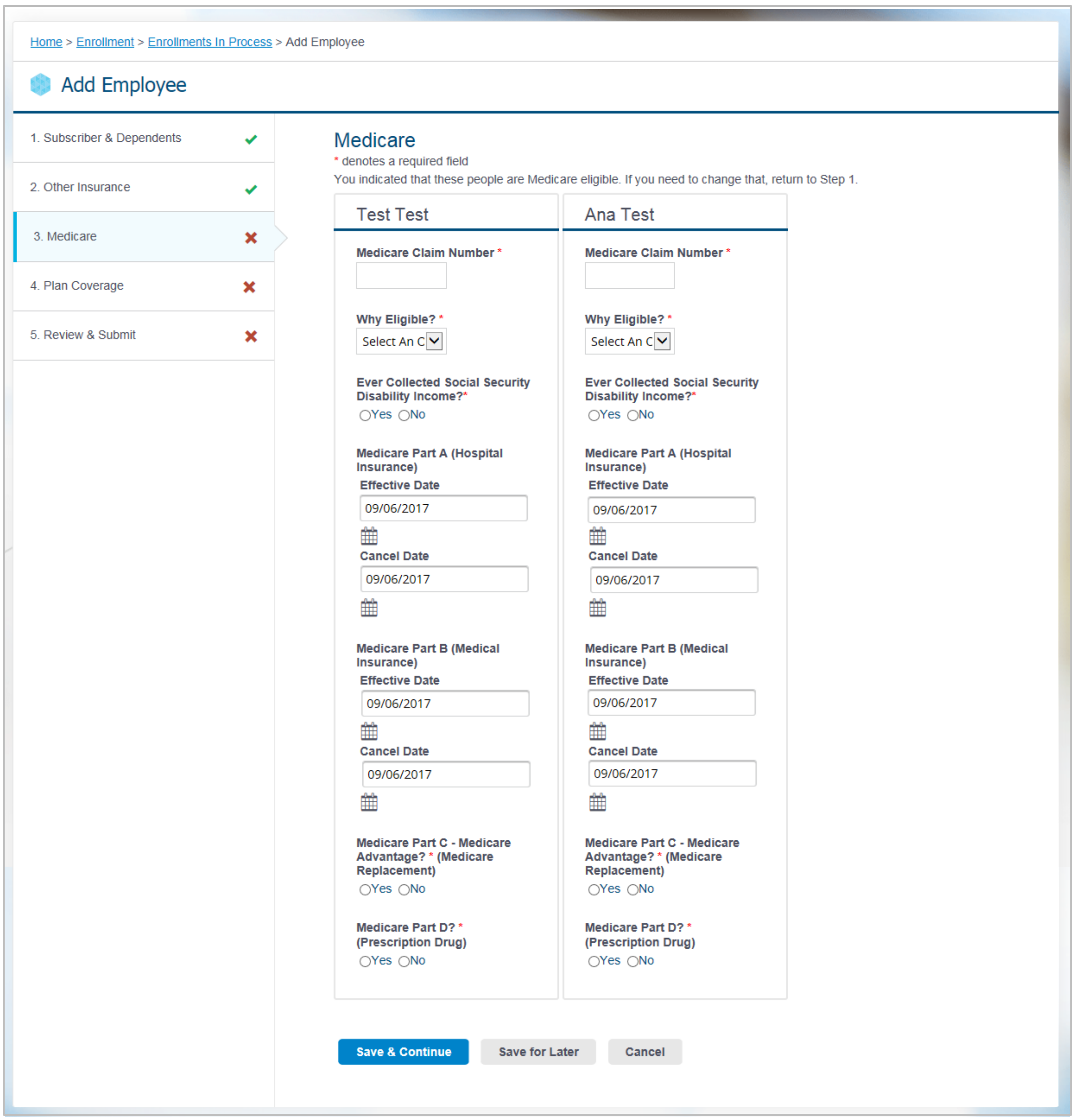
Step 2: Other Insurance

1. If the Other Insurance question is marked as Yes, this page will display and you can enter the other insurance information for the subscriber or dependent. One card displays for each person who is marked as having other insurance.
2. Enter other insurance information.
3. If there is more than one person and the other insurance information is the same, **complete one card, then click Copy to Others**. You can choose who you want to copy the information to.
4. Click Save & Continue to go to the next step or click Save for Later to save the enrollment in Enrollments in Process.



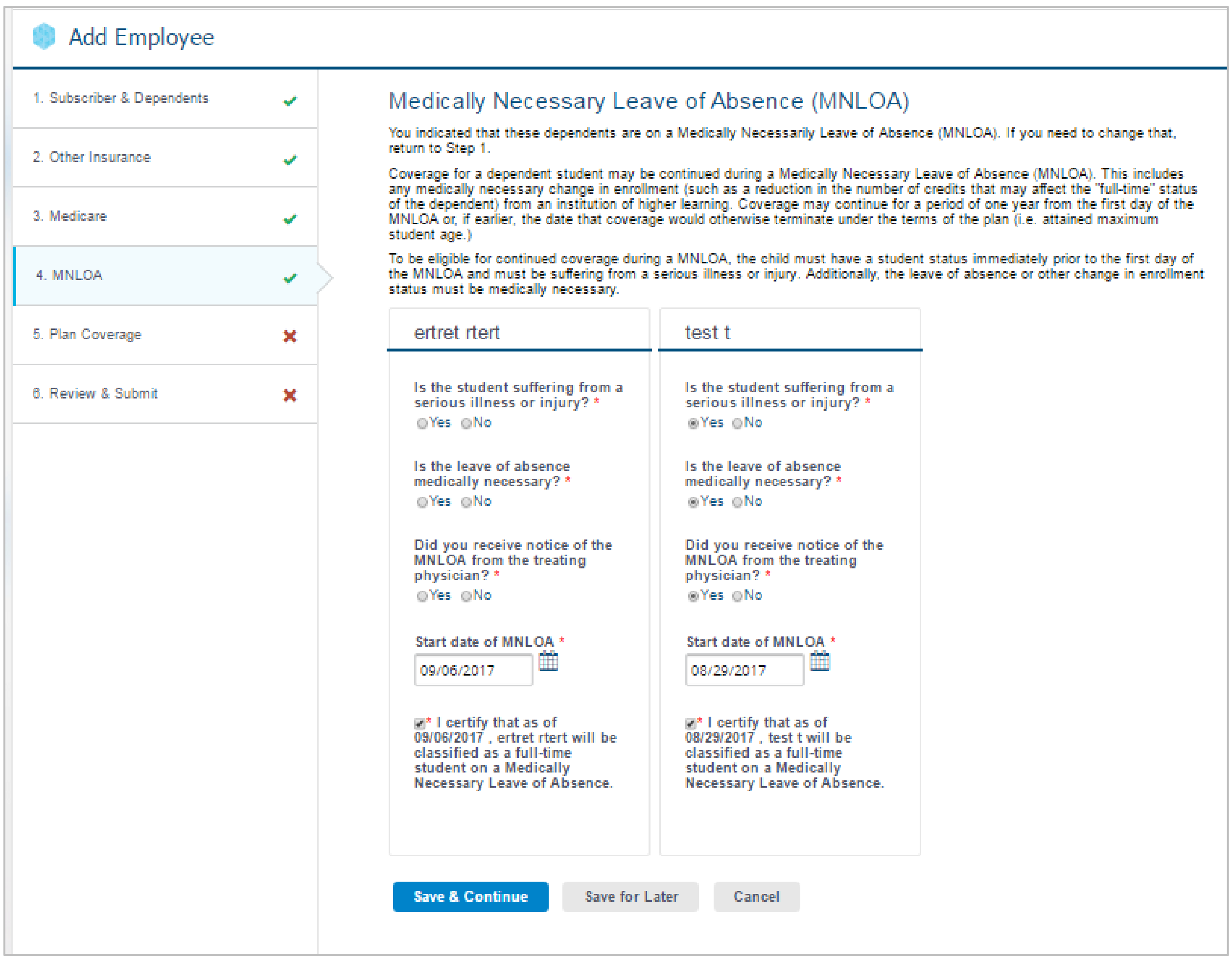
Step 3: Medicare

1. If the Medicare question is marked as Yes, this page will display and you can enter the Medicare information for the subscriber or dependent. One card displays for each person who is marked as having Medicare.
2. Enter Medicare information.
3. Click Save & Continue to go to the next step or click Save for Later to save the enrollment in Enrollments in Process.



Step 4: MNLOA (Medically Necessary Leave of Absence)

1. If the Special Status for a dependent is marked as Full Time - MNLOA, this page will display and you can enter the MNLOA information. One card displays for each dependent marked as Full Time - MNLOA.
2. Answer the MNLOA questions and enter the MNLOA date for the dependent. To attain the special status, all three questions must be answered Yes.
3. Click Save & Continue to go to the next step or click Save for Later to save the enrollment in Enrollments in Process.



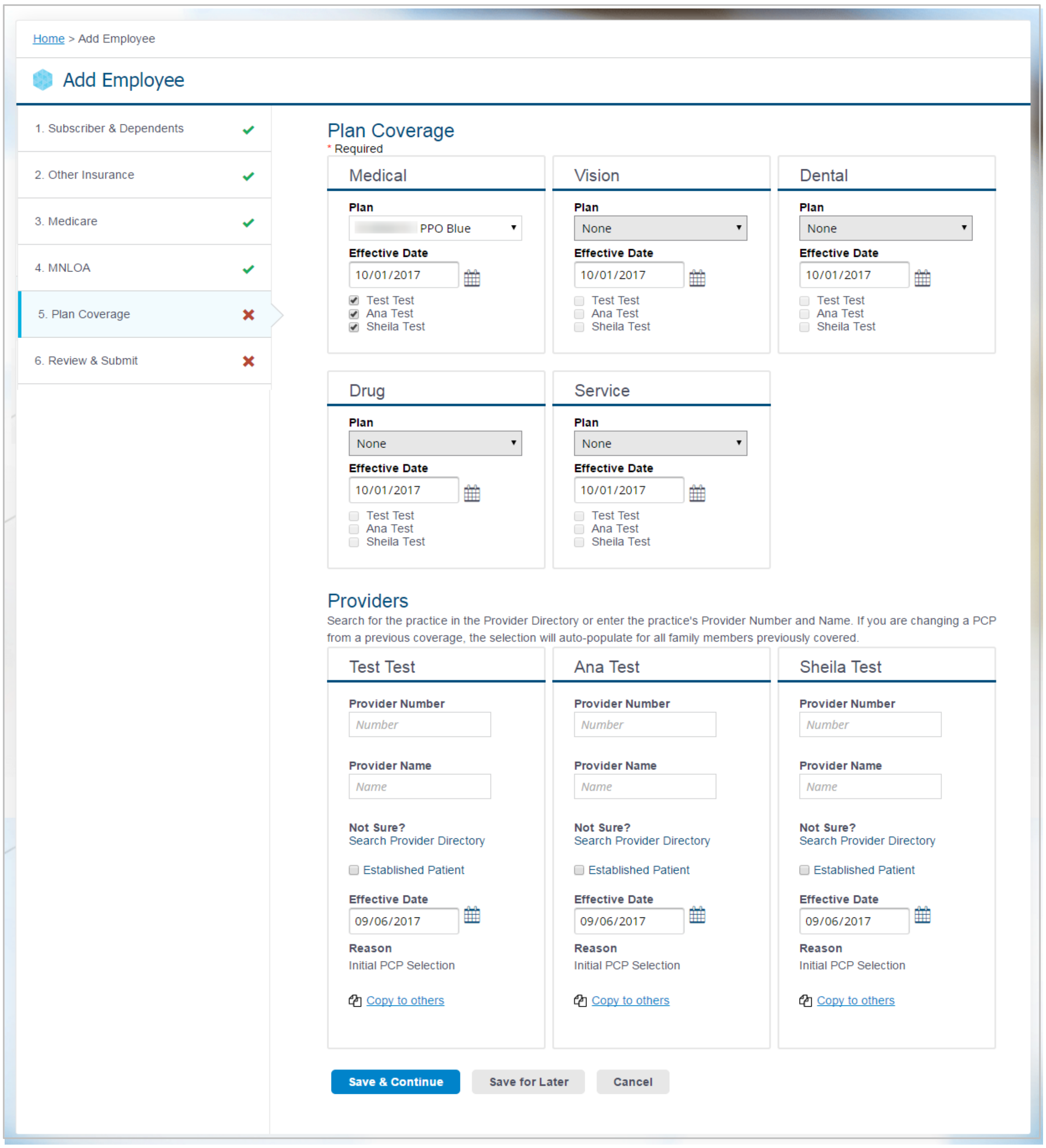
Step 5: Plan Coverage

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

1. On each plan coverage card, select an available Plan and then click the checkbox for each person who is supposed to receive the coverage. If there are no Plans available for the LOB, it will be greyed out.

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

2. If applicable, a Report Codes section and/or Providers section will display once you select coverage. If there is other information needed, additional sections will display as well. Complete the information.
3. Click Save & Continue to go to the next step or click Save for Later to save the enrollment in Enrollments in Process.



Step 6: Review & Submit

The Review & Submit page captures the selections that were made throughout the enrollment process and allows for one final review of the data entered.

If you need to edit anything on the page, you can click the links on the left navigation. Click Save & Continue in each sections to return to the Review & Submit page to finish the enrollment. Finalize the enrollment by clicking submit.

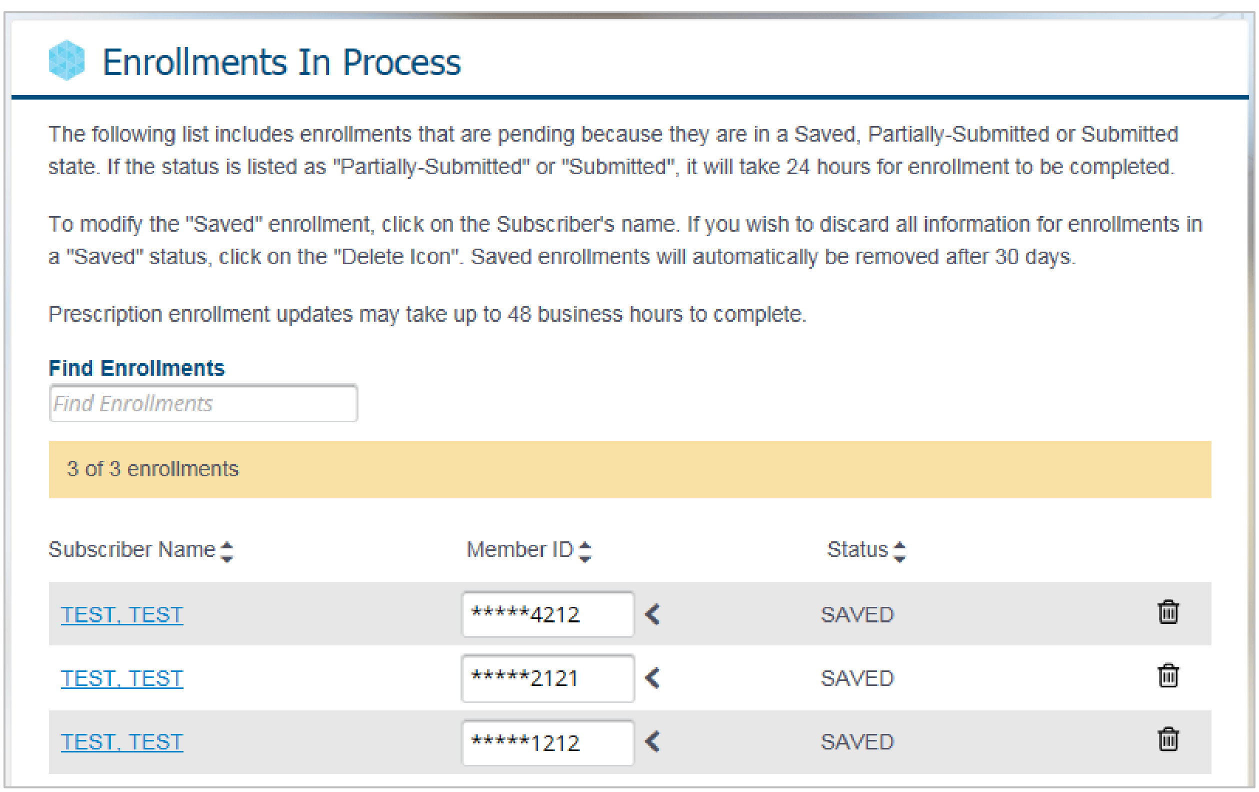
Once the enrollment has been successfully completed, a success message will then be displayed.

Enrollments in Process

The **Enrollments in Process page** allows you to review the status for incomplete and processing enrollments. Records can be viewed, modified, or deleted, depending upon their status.

5 enrollments in process display on the Enrollments page. If there are more than 5 enrollments in process, you can view them by clicking the View All button.

- Saved status - Records in the Saved status (not sent for processing yet) can be modified by clicking on the Subscriber Name link. Clicking on the Subscriber Name will display the enrollment form and you can select Edit Employee Record from the Actions drop-down. Saved enrollments can be deleted by clicking the delete (trashcan) icon.
- Submitted or Partially Submitted status - The subscriber record has been sent for processing, but has not yet been finalized by membership.

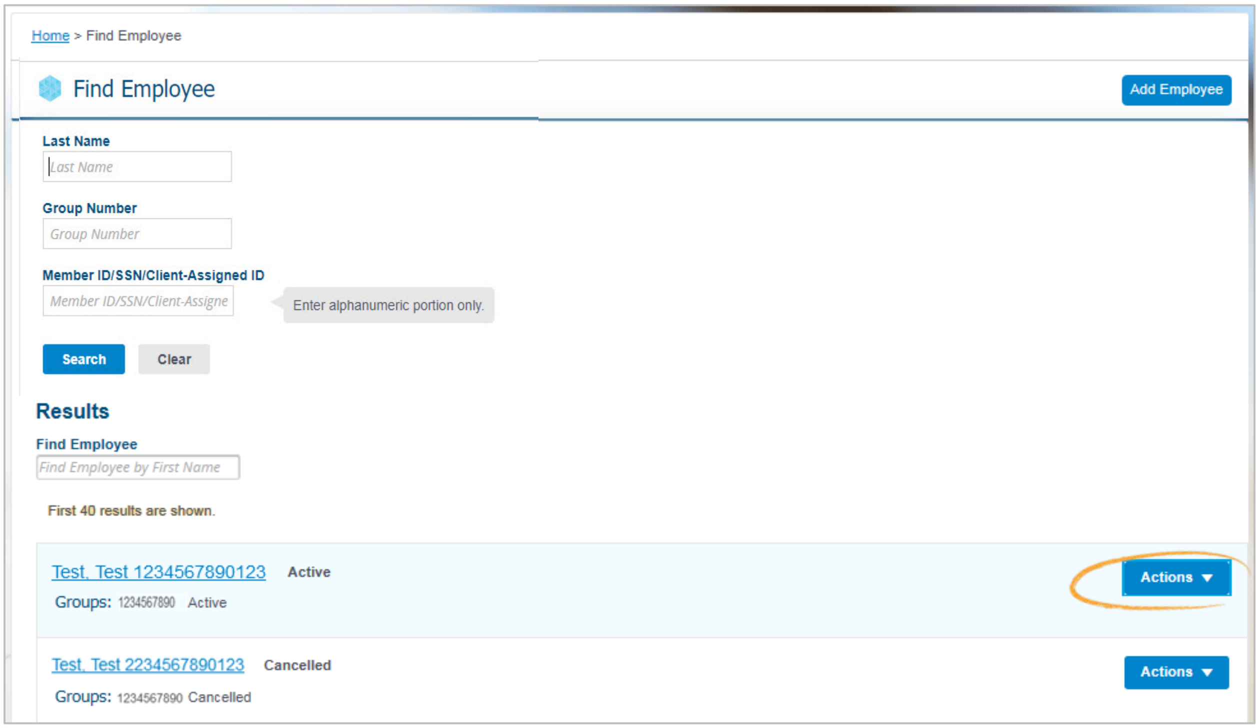


Find Employee

The **Find Employee** functionality allows you to find enrollment data by entering any of the following of an employee's:

- Last Name
- Group Number
- Member ID or SSN

Important! To see full search results you may need to scroll down.



After the search results display, the following actions are available from the **Actions** drop-down:

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

You can also view the Subscriber Summary by clicking the name link on the search results.

Important! You will only be able to find employees that are in the groups you are entitled to view.

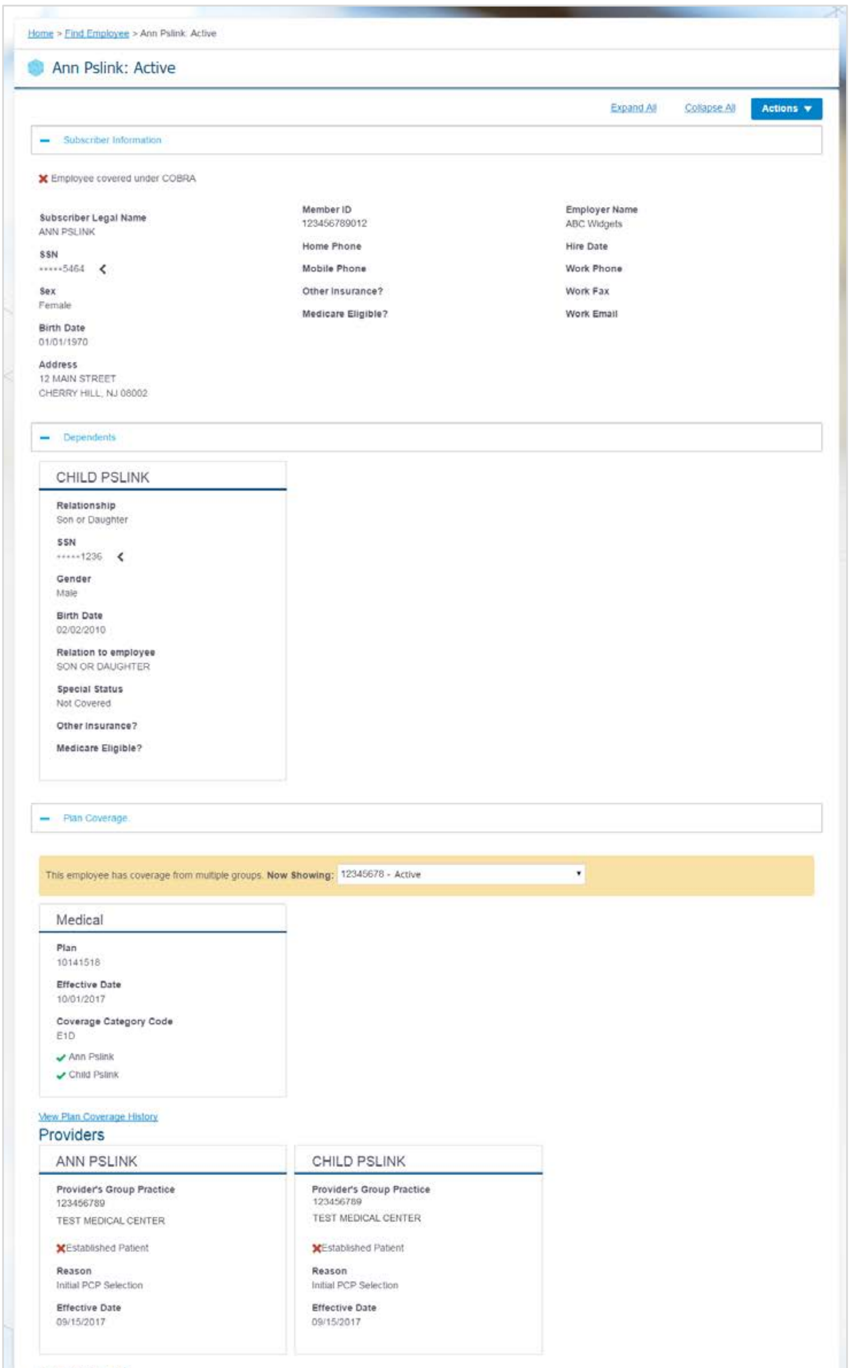
View Subscriber Summary

You can view the subscriber's summary by clicking on the Subscriber Name link after the Find Employee search results display.

Important! If the employee has coverage from multiple groups, use the Now Showing drop-down to switch back and forth between the groups.

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

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



Edit Employee Record

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

Use this option if you wish to:

- Edit demographics for the employee or dependents
- Update or add other insurance information
- Update or add Medicare information
- Add dependents and assign coverage to new or existing dependents
- Change existing coverage

Important! Do not use the Edit Employee functionality if you wish to cancel coverage for the employee or dependent. If you need to Cancel Coverage; find an employee and select Cancel Coverage from the Actions drop-down.

Edit Demographics

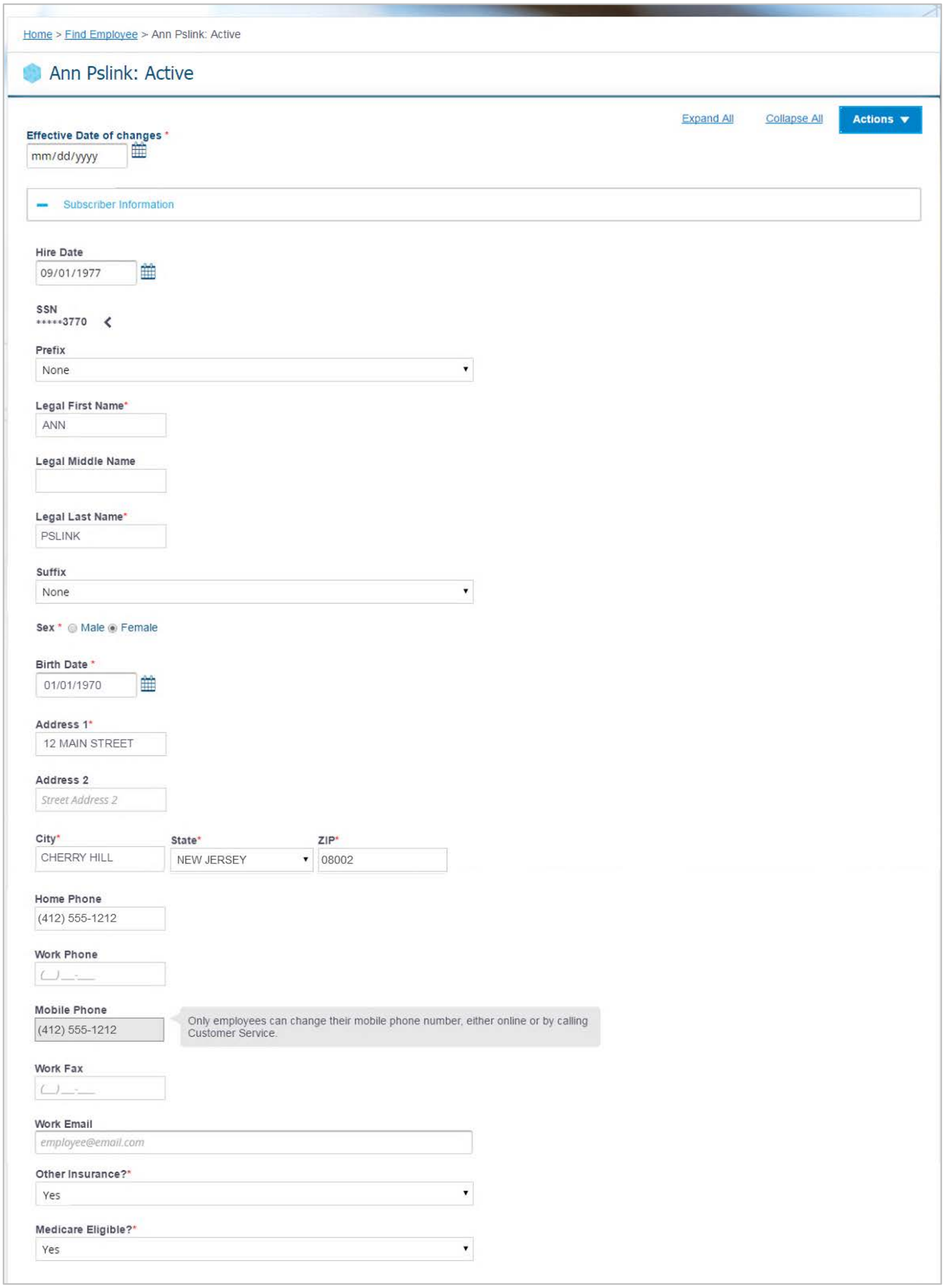
1. Find the employee.
2. Select Edit Employee Record from the Actions drop-down.
3. Enter the Effective Date of Changes.

Important! There are effective date range limits. If you receive an error in entering your effective date, please contact your Highmark team.

4. Edit the demographics.

Important! If you would like a record of this change , use the print page function from your browser before you submit the changes.

5. Click the Save button.
6. If changes are successful, a success message displays.



Home > Find Employee > Ann Pslink: Active

Ann Pslink: Active

Expand All Collapse All Actions

Effective Date of changes *

mm/dd/yyyy

Subscriber Information

Hire Date

09/01/1977

SSN

*****3770

Prefix

None

Legal First Name*

ANN

Legal Middle Name

Legal Last Name*

PSLINK

Suffix

None

Sex * Male Female

Birth Date *

01/01/1970

Address 1*

12 MAIN STREET

Address 2

Street Address 2

City* State* ZIP*

CHERRY HILL NEW JERSEY 08002

Home Phone

(412) 555-1212

Work Phone

(__) ___-____

Mobile Phone

(412) 555-1212

Only employees can change their mobile phone number, either online or by calling Customer Service.

Work Fax

(__) ___-____

Work Email

employee@email.com

Other Insurance?*

Yes

Medicare Eligible?*

Yes

Add or Edit Other Insurance or Medicare

1. Find the employee.
2. Select Edit Employee Record from the Actions button.
3. Enter the Effective Date of Changes.

Important! There are effective date range limits. If you receive an error in entering your effective date, please contact your Highmark team.

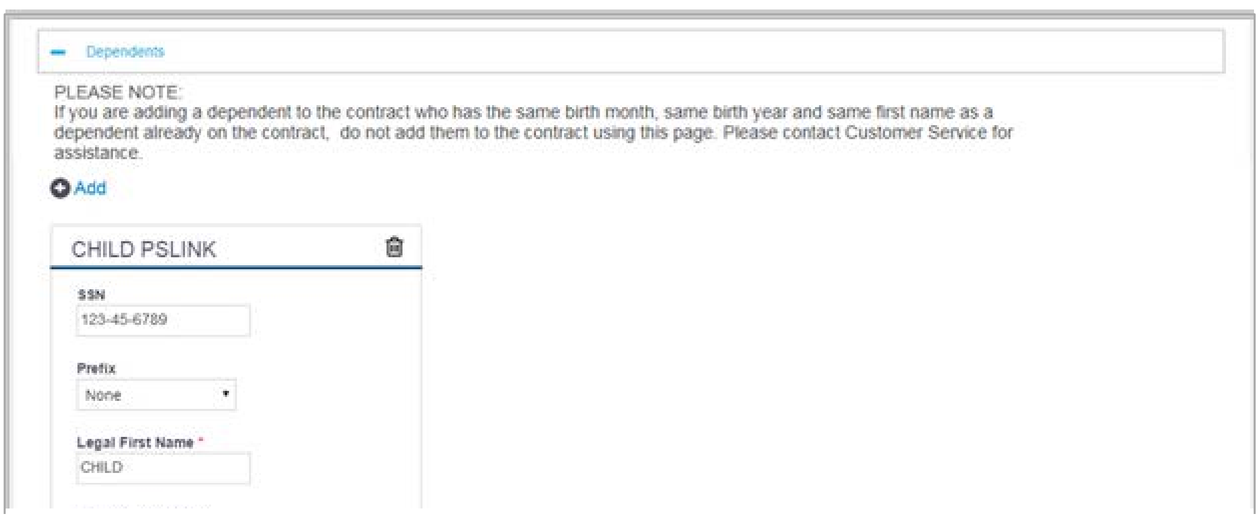
4. If you are adding: In the Subscriber and Dependents sections, select Yes to Other Insurance and/or Medicare questions. You can delete using the recyle bin at this step.

   If you are editing: Update the Other Insurance and/or Medicare information in their respective sections and ensure that all required fields are completed.

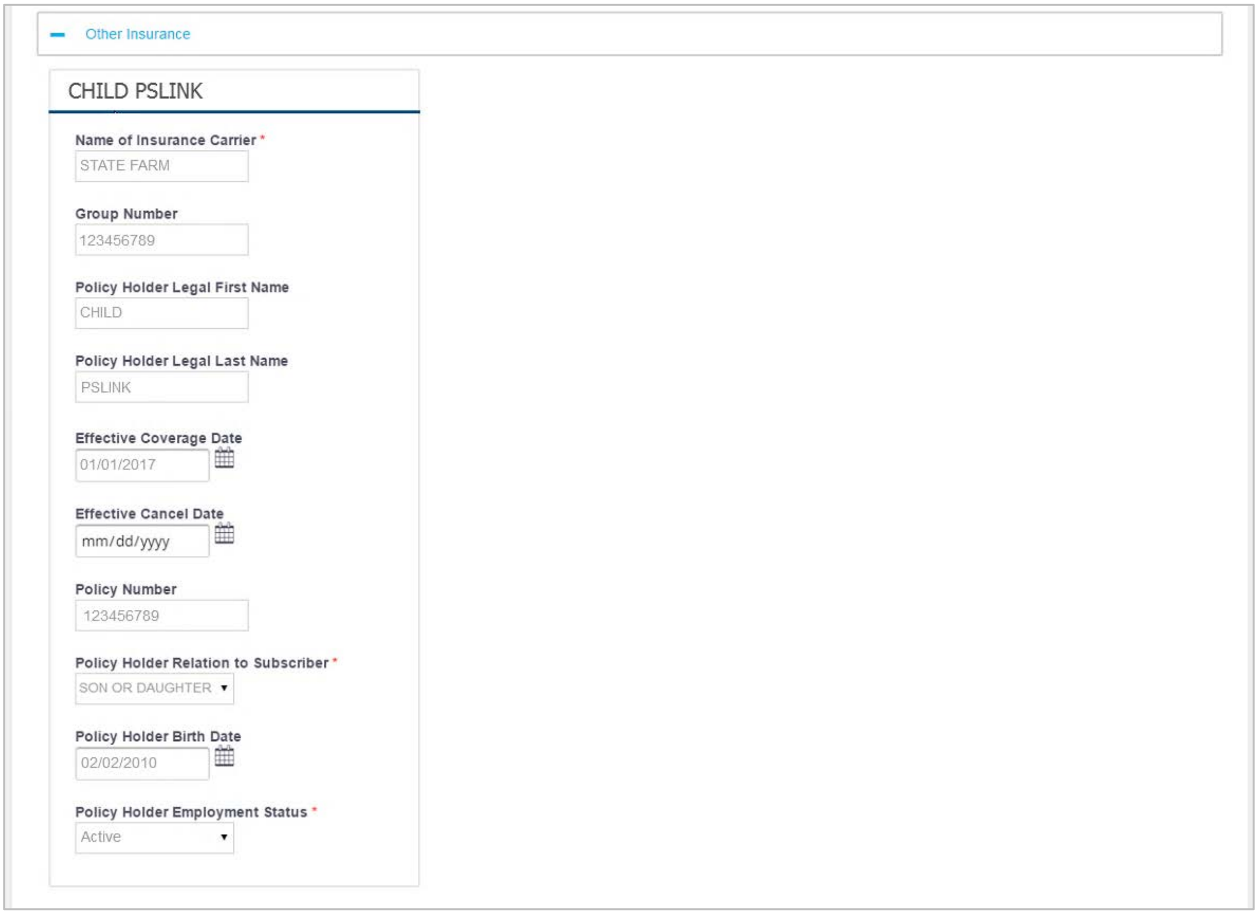
5. The Other insurance and Medicare sections display below.
6. Cards display for each selected participant.
7. Enter the Other Insurance and/or Medicare information and ensure that all required fields are completed.

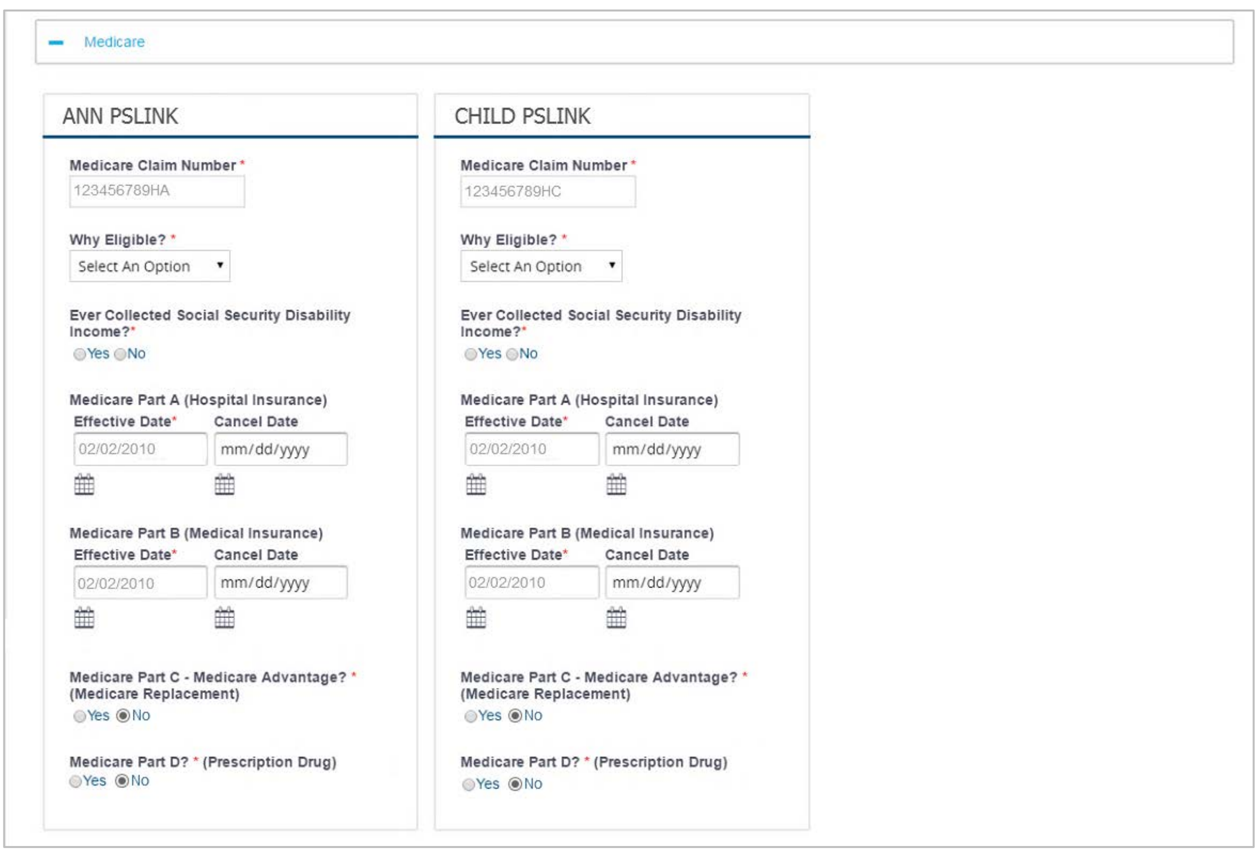
Important! If you would like a record of this change , use the print page function from your browser before you submit the changes.

8. Click the Save button.
9. If changes are successful, a success message displays.



Editing exsiting other Insurance and/or Medicare information.





Add Dependents and Assign Plan Coverage to New or Existing Dependents

1. Find the employee.
2. Select Edit Employee Record from the Actions button.
3. Enter the Effective Date of Changes.

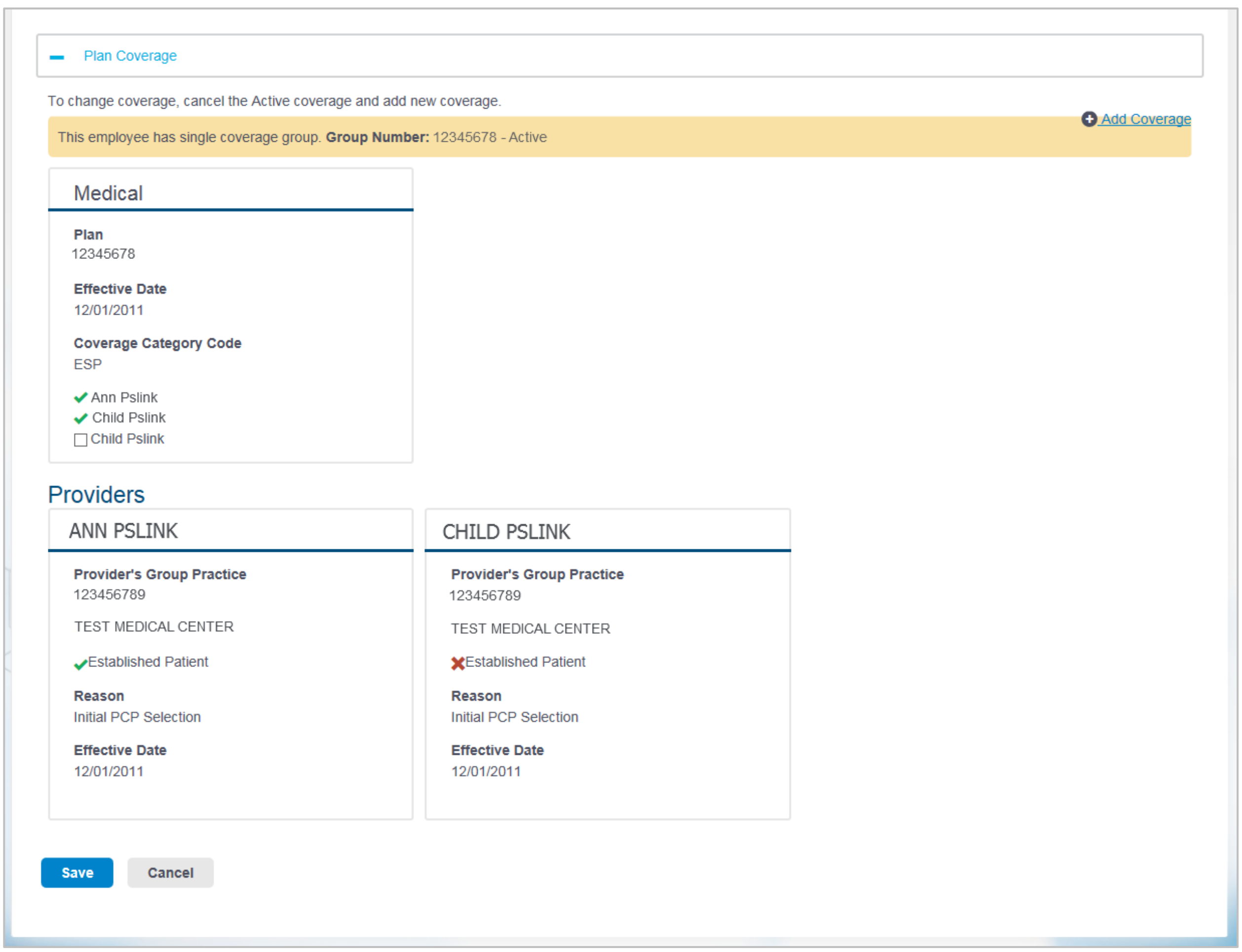
Important! There are effective date range limits. If you receive an error in entering your effective date, please contact your Highmark team.

4. In the Dependents section, click Add to add new dependents.
5. Enter all required fields for the dependents.
6. In the Plan Coverage section, an empty checkbox displays for the dependent for each line of business.
7. Select the checkbox to assign coverage for the dependent.
8. If an existing dependent doesn't have coverage, you can select the checkbox next to their name to assign coverage now.

Important! If you would like a record of this change , use the print page function from your browser before you submit the changes.

9. Click the Save button.
10. If changes are successful, a success message displays.

Important! At this point, if the employee has coverage from multiple groups, use the Now Showing drop-down. Select the empty checkbox in all active LOBs to select each line of business to be edited for each dependent.



Change Existing Plans

1. Find the employee.
2. Select Edit Employee Record from the Actions button.
3. Enter the Effective Date of Changes.
4. Click the delete (trashcan) icon in the top right corner of the LOB card.

   Important! The icon displays for active Lines of Business (based on groups) only.
   If the employee has coverage from multiple groups, use the *Now Showing drop-down* to toggle between them.

5. Enter the Cancel Date and Cancel Reason.
6. Click the OK button.
7. The Add Coverage page displays.

   Important! The Add Coverage page automatically displays when you delete an LOB for the first time in the editing session to ensure that new coverage is added. If you delete another LOB during the same editing session, you will not be redirected to the Add Coverage page. You can add coverage by clicking the Add Coverage icon or link.

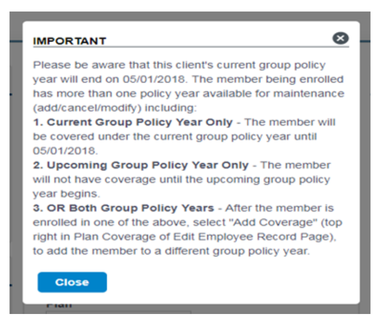
8. Select new coverage.
9. Click the OK button.
10. The Edit page displays, any new LOBs will be 'marked as add,' and any deleted LOBs will be 'marked as canceled.' Adding and deleting LOBs won't actually occur until you save.
11. Verify the changes.
12. Click the Save button.
13. If changes are successful, a success message displays.

Small Group - Future Coverage Edits

You could encounter additional notifications to make edits to an employee's record when that employee is enrolled in BOTH an active group number AND a future group number. This affects our Small Group Customers Only.

1. Find the employee.
2. Select Edit (or cancel) Employee Record from the Actions button.
3. If the notification appears, you must make the edits in both the active and future coverage. The pop-up usually appears when you are close to a renewing period and have changed group numbers.

   ***This reminder is critical in ensuring that our records reflect changes being made are captured both for current administration and future administration purposes.**



4. Edit (or cancel) employee record for both the group numbers listed.
5. Follow the steps to edit or cancel employee record.

Print Employee Record

To print an employee record, click the name of the person in the results of "Find" and print from your internet browser.

Cancel Coverage

The **Cancel Coverage** function allows you to cancel an employee contract or specific coverage for a subscriber and/or dependents. This requires confirmation before a cancellation is submitted.

Important! It is important to note that you do NOT use this feature when performing Group to Group transfers from one group to another. Instead, select Actions > Edit Employee Record, delete LOBs, and add coverage.

All the active coverage will be shown on this page for the subscriber and dependents. If the subscriber is selected to cancel coverage, the dependents will automatically be selected to be cancelled.

1. Select the coverage to cancel.
    - You can use the Select/Deselect All links to select a Plan to be cancelled for everyone or to select all of an individual's coverage to be cancelled.
    - You can click the Cancel All link to select all the active coverage for the subscriber and dependents.

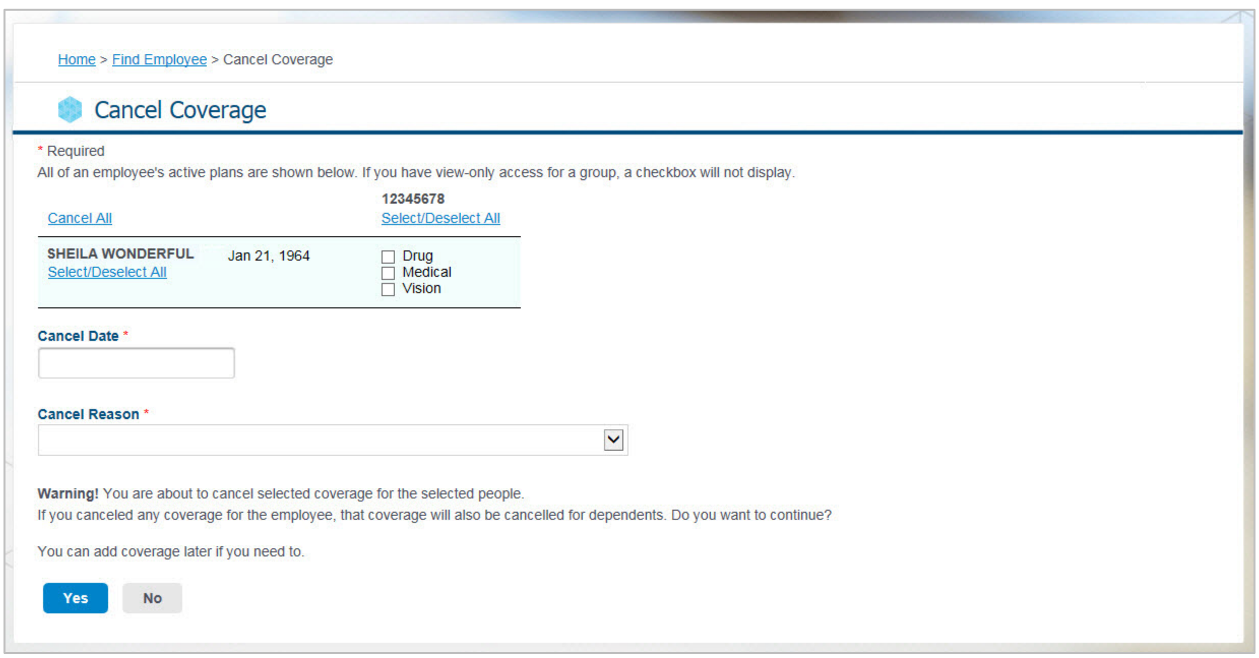
    Important! If you don't have modify access permissions for a group, checkboxes will not be displayed. You must contact Highmark to have your permissions changed.

2. Enter the Cancel Date and Cancel Reason.

    Important! The Cancel Date is the 1st day the employee no longer has coverage. Termination date must be within contract terms. For example, many contracts must be terminated on the 1st of the month after employment termination.

3. Once all the required information is entered, click the Yes button.

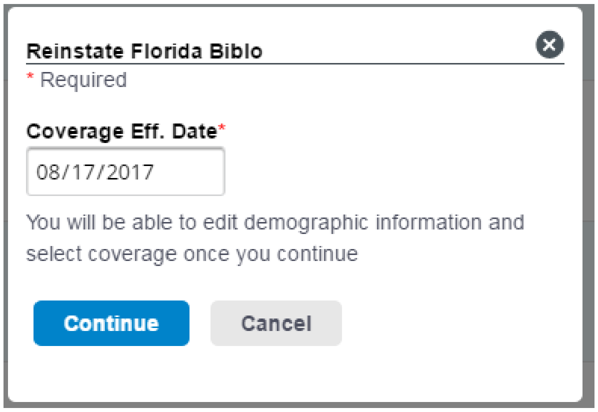
    A success message will display once the cancellation has been successfully completed.



Reinstate Employee

You can reinstate a cancelled employee by selecting the Reinstate option from the Actions Dropdown.

1. Enter the Coverage Effective Date. This is the date from which the coverage will be effective for the employee.

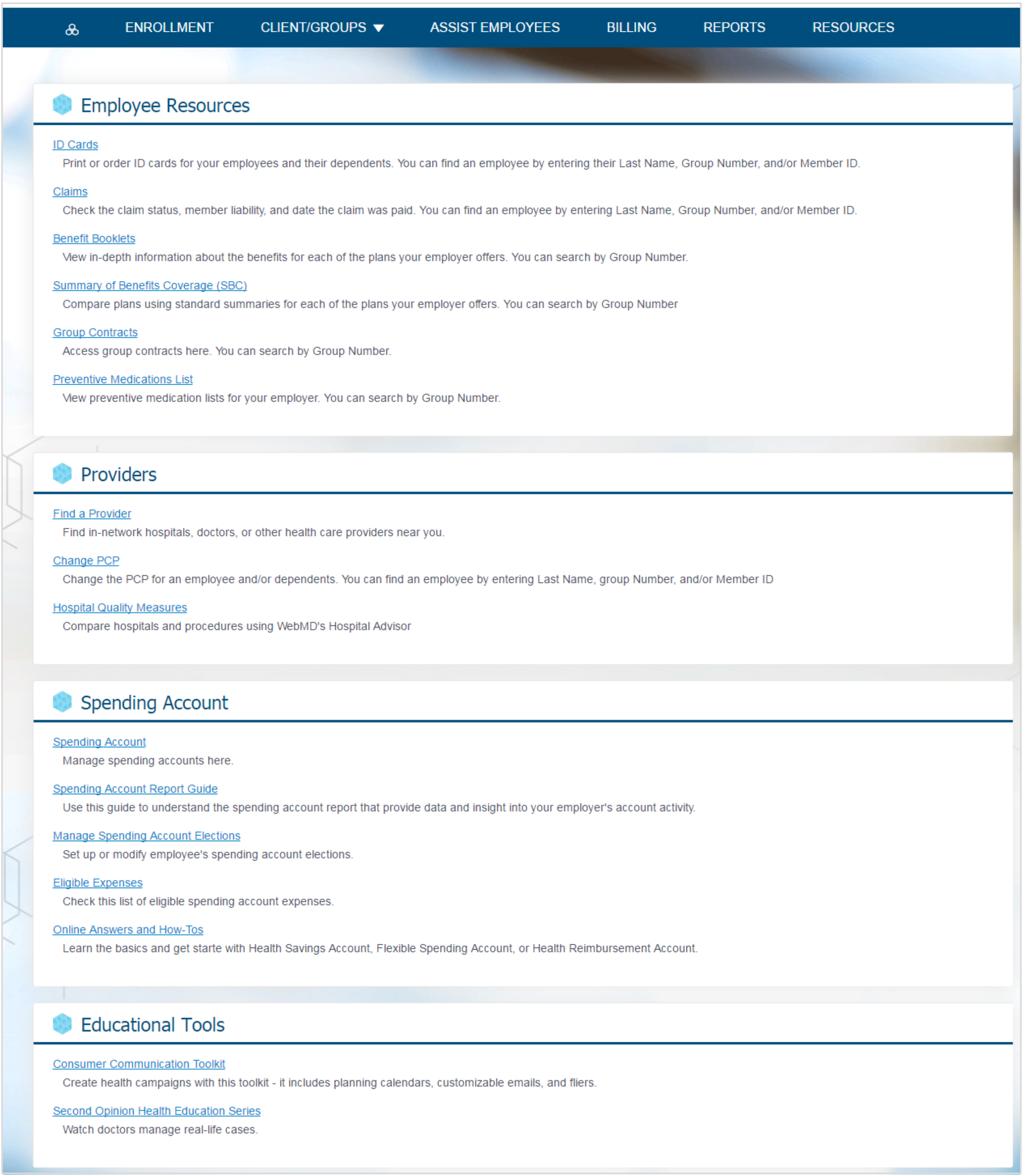


2. Click Continue.
3. The Add Employee page displays, with employee information pre-populated. At this time, information can be edited or added to reflect the current request. You can follow the Add Employee process to complete and reinstate the enrollment.

Section 3: Assist Employees

This section describes how you can assist your employees by:

- Printing ID cards
- Accessing Plan information, including SBCs
- Finding a provider
- Managing Spedning Accounts
- And more



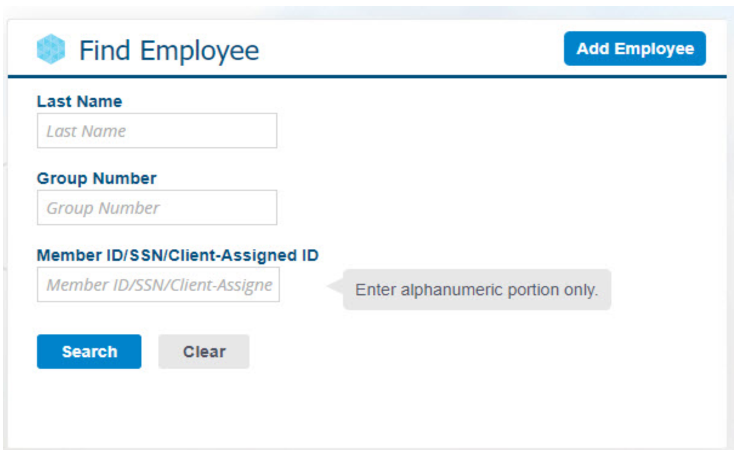
ID Cards

You can view and print ID cards for employee and dependents. Virtual ID cards are available at the first day of coverage. You can also request replacement ID cards on behalf of your employees. An ID card can be mailed to the employee address on file or another address without replacing the address on file.

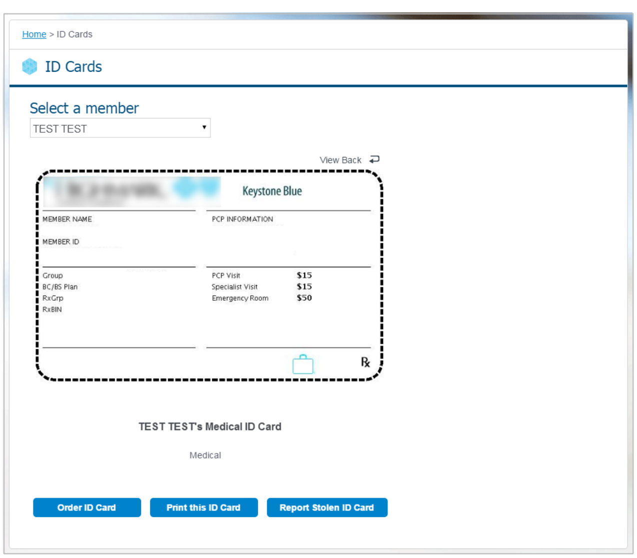
The ID card function is available from the Assist Employee tab, as well as the Home page, and Find Employee page.

From the **Assist Employees** tab:

1. Click the ID Card link.
2. The Find Employee page displays.



3. Enter the employee's Last Name, Group Number, or Member ID.
4. Click the Search button.
5. Results display based on the entered values and you can filter the results by entering the First Name.
6. Select ID Cards from the Actions dropdown. You will not see the ID cards option for a cancelled employee.
7. The ID Card page displays.

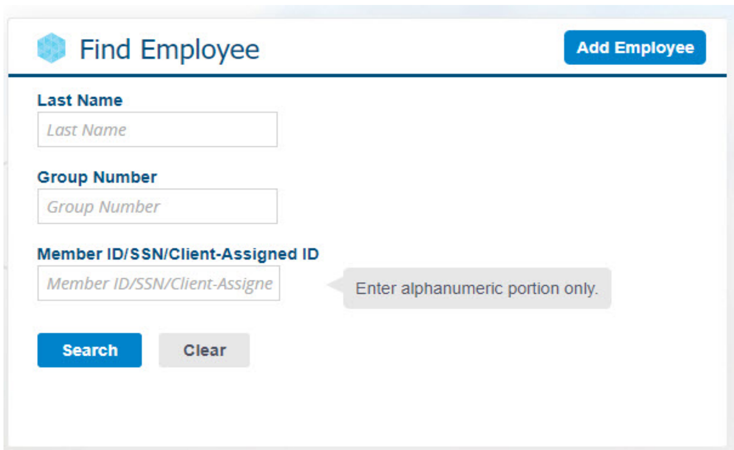


8. You can click the Order ID Card button to request a copy of ID cards. You will be prompted to verify your mailing address (address can be edited).
9. You can also print the ID card by clicking the Print this ID Card button.

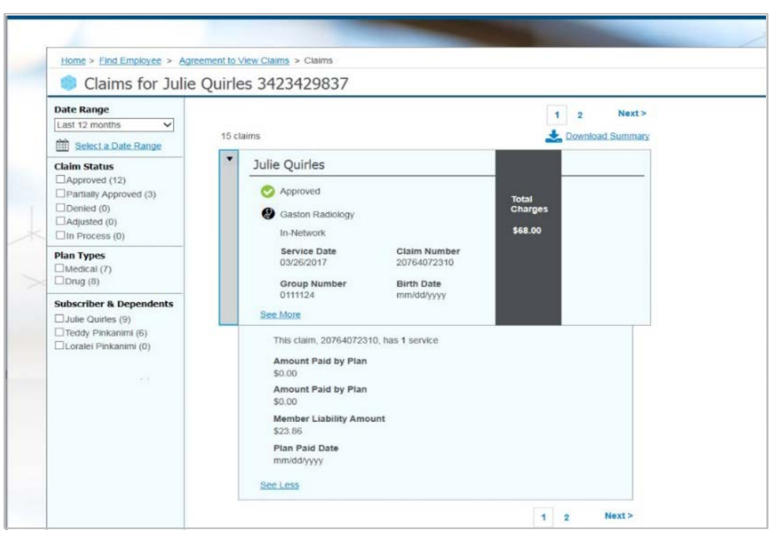
Claims (ASO only)

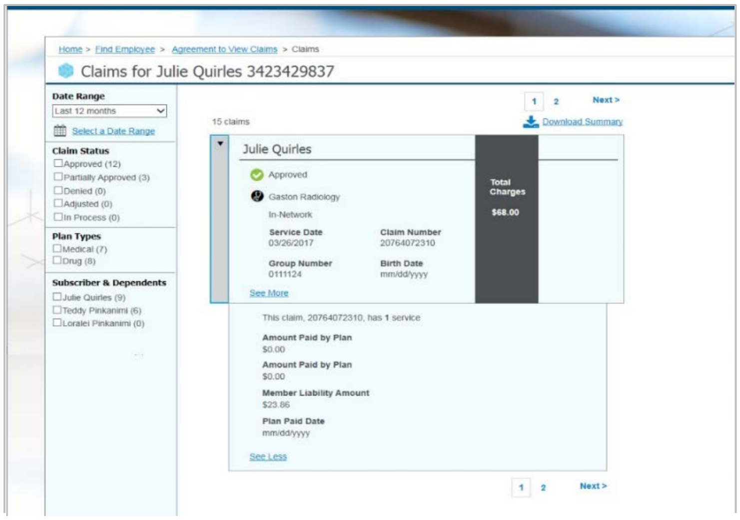
If you have the access (entitlement), you can view Medical, Drug, or Dental claims for your employees. From the **Assist Employees** tab:

1. Click the Claims link.
2. The Find Employee page displays.



3. Enter the employee's Last Name, Group Number, or Member ID.
4. Click the Search button.
5. Results display based on the entered values and you can filter the results by entering the First Name.
6. Select Claims from the Actions drop-down.
7. The Claims Agreement page displays.
8. Click the Agree & Continue button to view claims for the selected employee and their dependents.
9. The Claims Page displays.





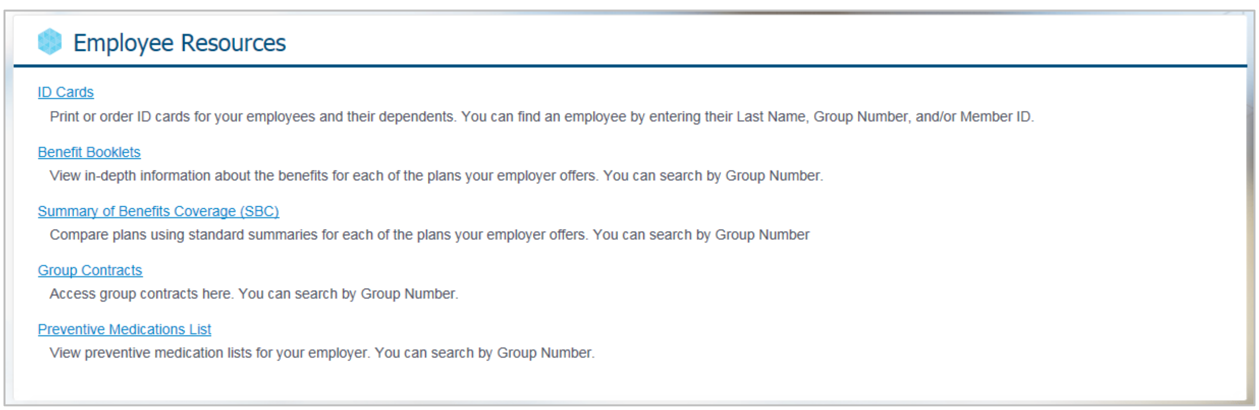
10. You can filter the claims by date range, claim status, Plan types and name. Or you can download a summary of the claims in Excel.

Benefit Booklets

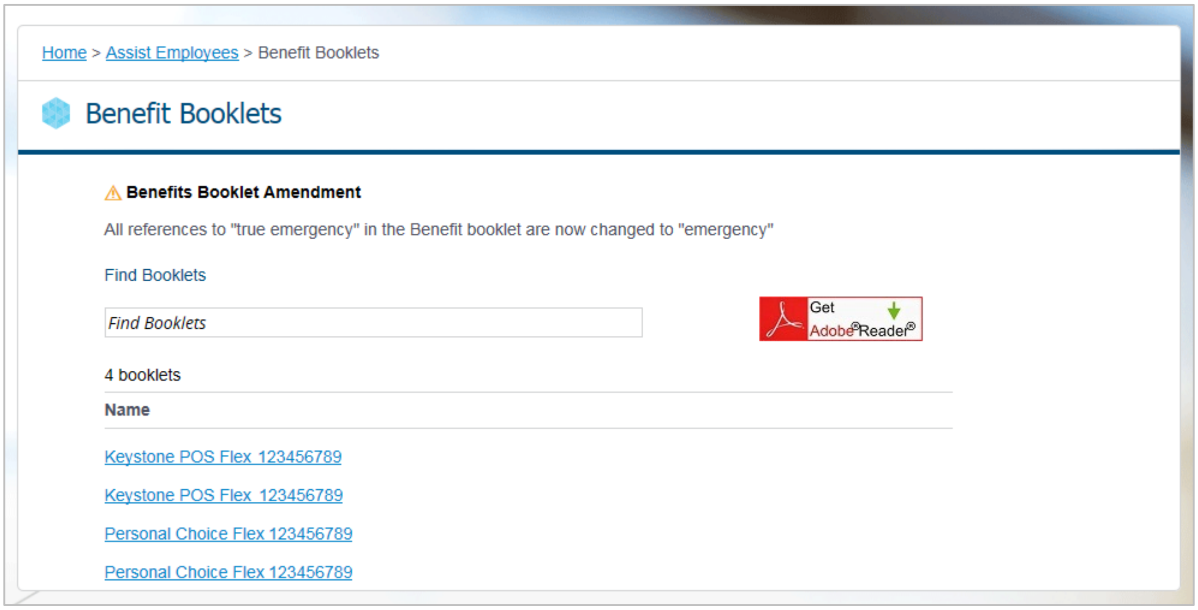
Benefit Booklets for all Plans are available for viewing from the Assist Employees tab. If your Benefit Booklet does not display, contact your Client Manager or Client Service Manager. Contact information can be found under the Client/Groups tab.

From the **Assist Employees** Tab:

1. Click the Benefit Booklets link.



2. The Benefit Booklets page displays.



3. Click the applicable Plan Name and Group Number link.
4. The Benefit Booklet opens in a separate browser window as a PDF file and can be printed or saved as a file to your computer.

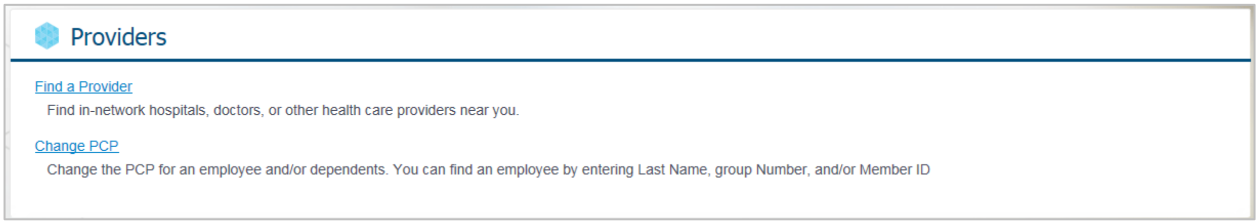
Important! If it's a long list, you can search for a booklet by entering the Plan Name or Group Number in the Find Booklets filter. Summary of Benefits, Group Contracts, and Preventive Medication Lists can be accessed in a similar way.

Find a Provider

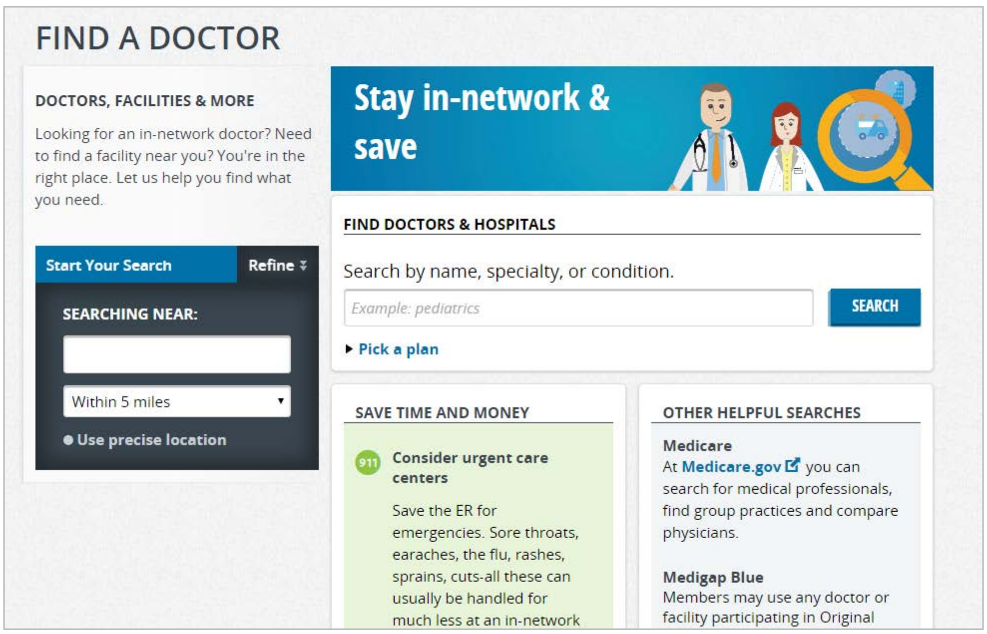
The **Find a Provider** link on the Assist Employees tab provides access to information on doctors and hospitals. The search function in the Provider Directory lets you use specific criteria such as coverage area, Plan, and type of provider to locate providers for your employees.

From the **Assist Employees** tab:

1. Click the Find a Provider link.



2. The Provider Directory page displays.



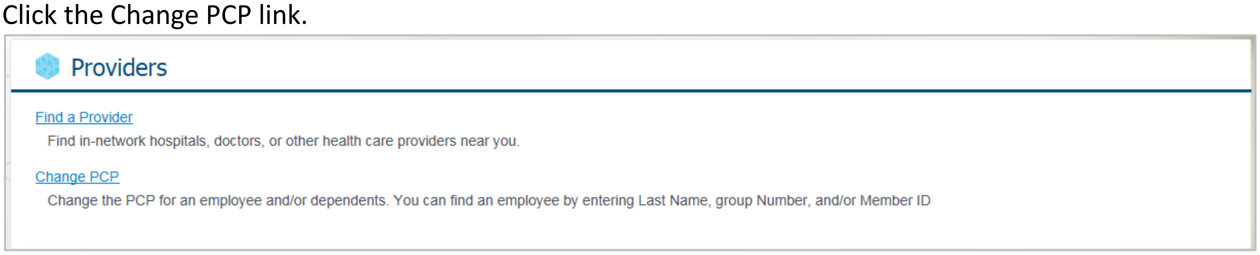
3. Enter the search criteria to locate a Doctor or Medical Professional, a Hospital or Facility, or Medical Supplies and Services. You can also search the doctors by location and Plan.
4. Click the Search button.
   The Search Results display according to your search criteria.

Change Primary Care Physician (PCP)

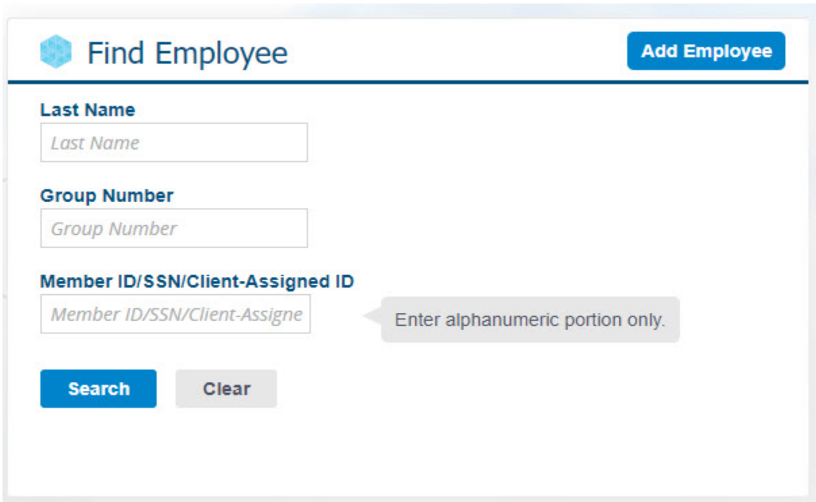
You can change the PCP for your employee and dependents.

From the **Assist Employees** tab:

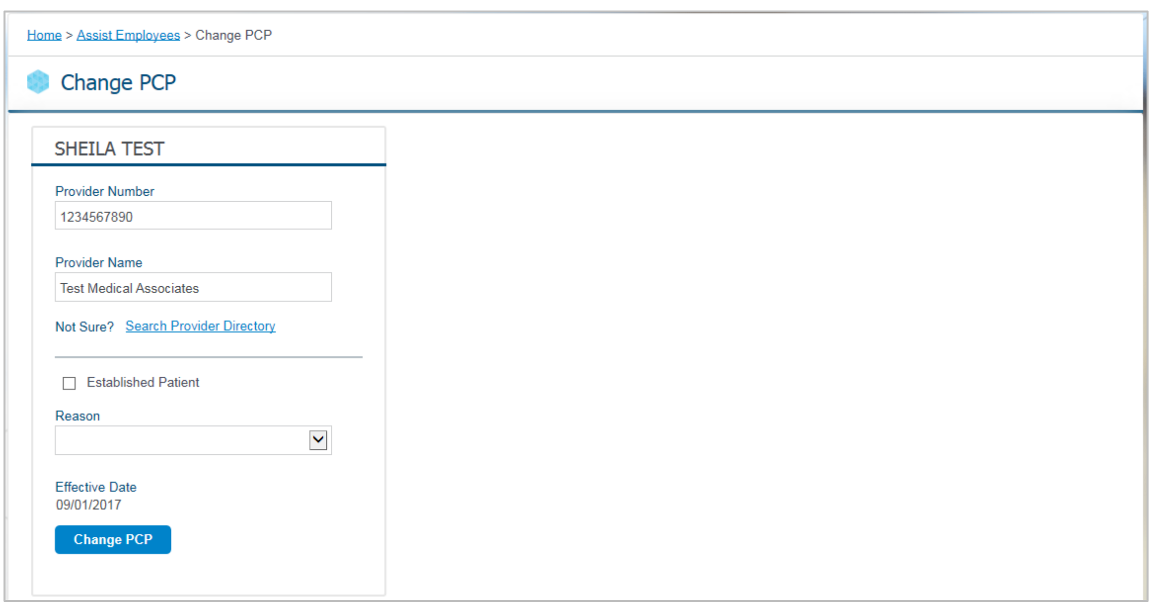
1. Click the Change PCP link.



2. The Find Employee page displays.



3. Enter the employee's Last Name, Group Number and/or Member ID.
4. Click the Search button.
5. Results display based on the entered values and you can filter the results by entering the First Name.
6. Select Change PCP from the Actions drop-down. You will be prompted to select the group you wish to change. You will not see this option for a cancelled employee.
7. The Change PCP page displays.



8. Enter a new Provider Number and Name or click Search Provider Directory to search for a provider.
9. Select a Reason and the Effective Date will be populated based on the reason selected.
10. Click the Change PCP button to submit the changes.

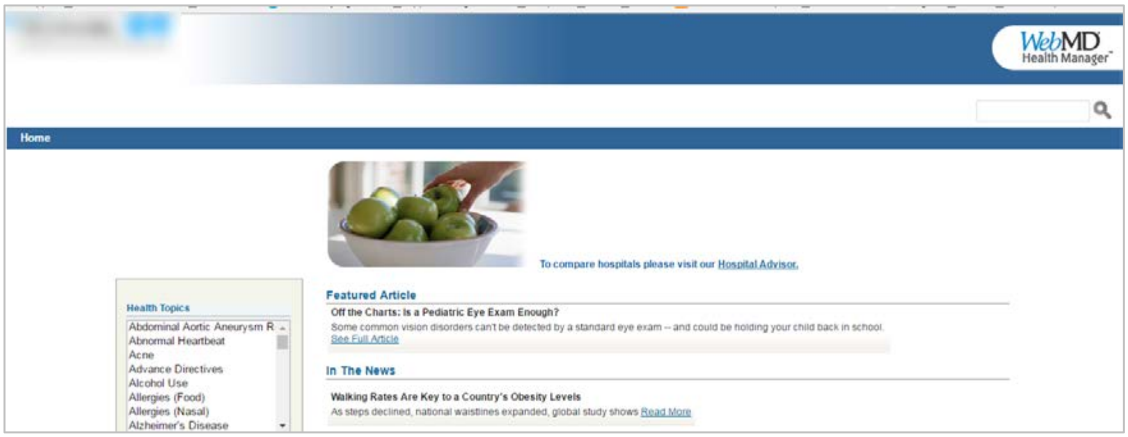
Hospital Quality Measures

The Hospital Quality Measures page helps employees navigate the health care system with tools to:

- Find and compare hospitals and physicians
- Read about various health topics
- Navigate WebMD's hospital advisor

From the **Assist Employees** tab:

1. Click the Hospital Quality Measures link.
2. The page opens in a separate browser window.



Section 4: Client/Groups Tab

Purpose: This section provides an overview of the Client/Groups tabs and how to view and understand the Client and Group details and contacts.

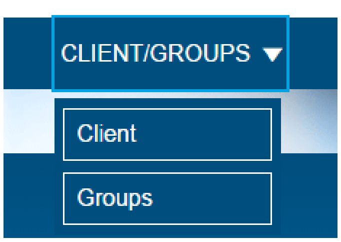
Use the Client/Groups Tab to access the Client and Group level information:

- General Information
- Contacts
- Groups
- Report Codes (if applicable)
- Identity Theft Protection (if applicable)

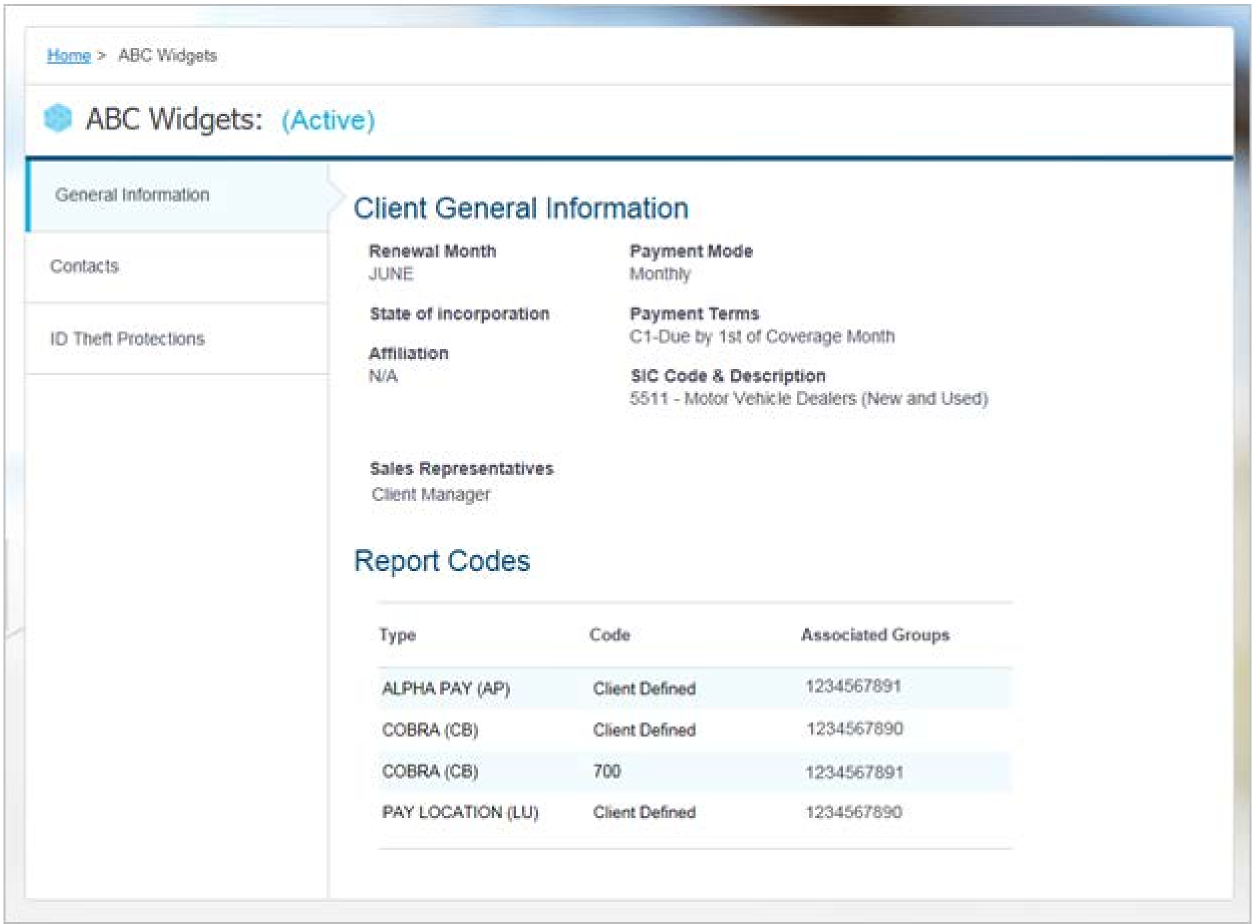
Note: It is NOT possible to edit information in the Client/Groups section. Contact your Client Manager if this information requires an update.

View Client Level Information

1. Select Client from the Client/Groups Tab.



2. The Client information page displays.

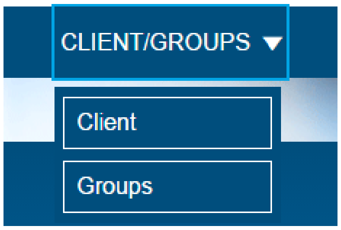


Term	Definition
Renewal Month	Your company's renewal month.
State of Incorporation	The state in which your company is incorporated.
Affiliation	The companies having a common interest above and beyond the purchase of health care.
Payment Mode	The frequency of payments.
Payment Terms	The due date for payments.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

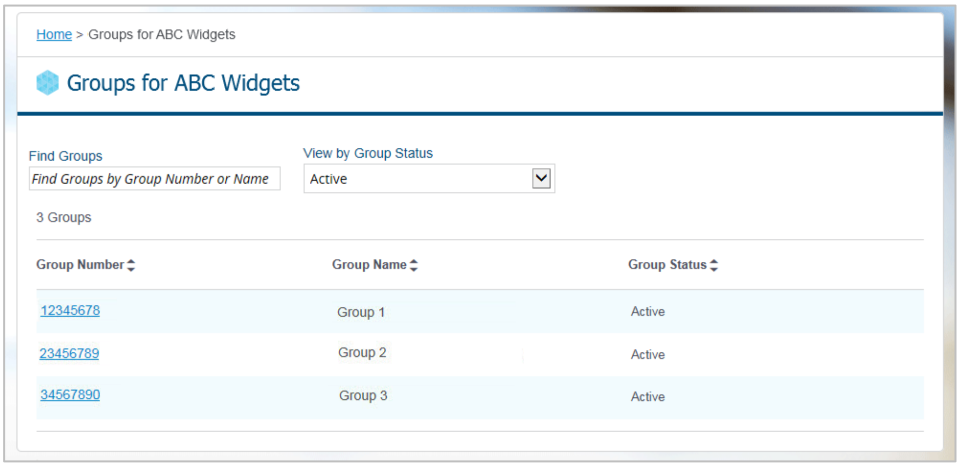
3. Click Contacts from the left navigation to view client contacts.
   The Client Contacts page displays contact information about the company's different contact types. Examples of contact types may include Billing, ID Cards, Monthly Reports, Correspondence, and Contract Signor.
4. If you have the entitlement, you can view the ID Theft Protection page by clicking ID Theft Protection from the left navigation.
   You can opt in and opt out from the ID theft protection services for the groups. New clients have 30 days from their coverage effective date to opt in for the present calendar year. All clients will be provided with an opportunity during Q4 to opt in for the following calendar year.

View Group Level Information

1. Select Groups from the Client/Groups Tab.

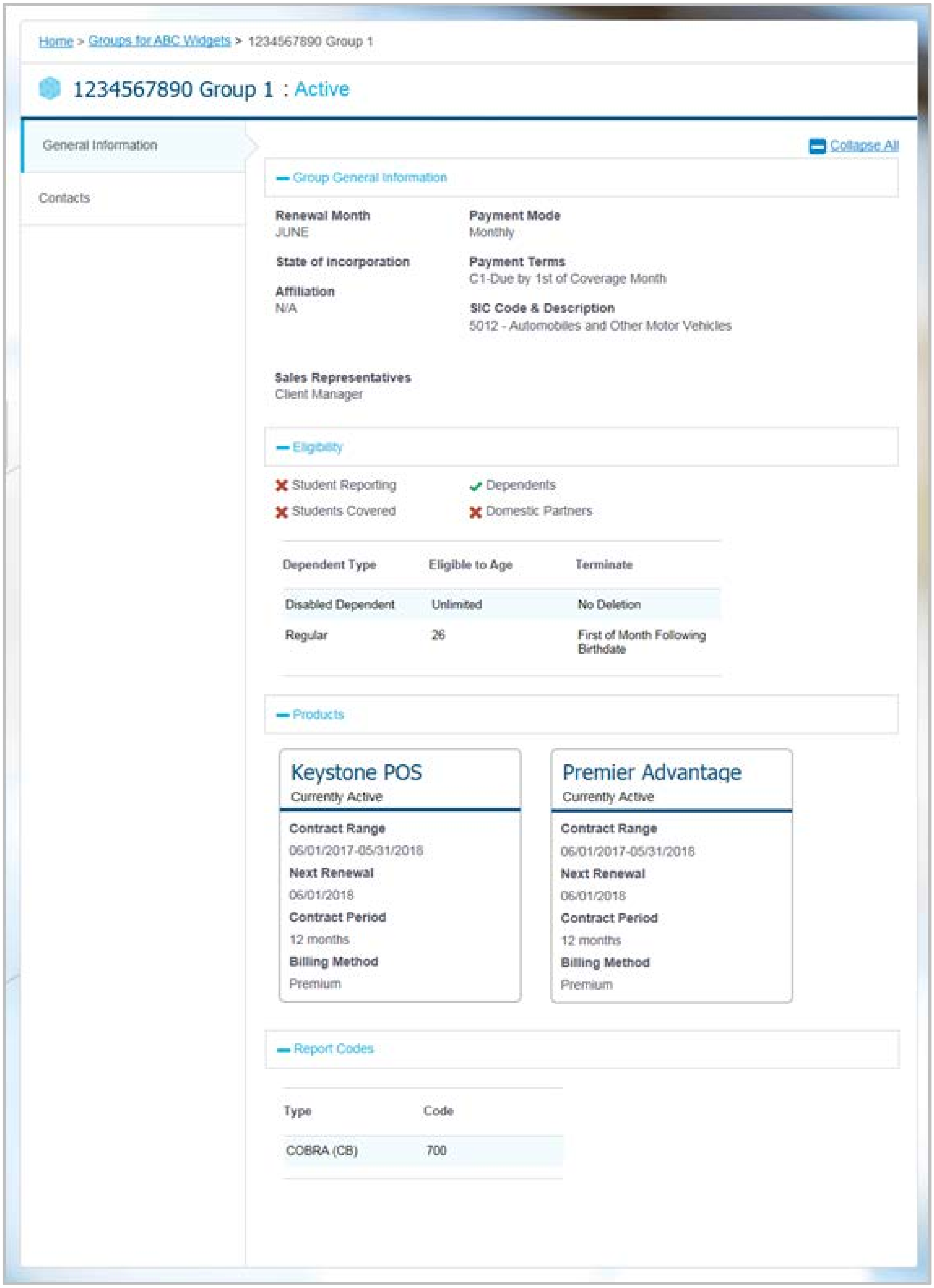


2. The Groups List page displays.



Note: If the list is long, you can enter a Group Number or Name in the Find Groups filter.

3. Click the Group Number link to view the Group Details page.


Home > Groups for ABC Widgets > 1234567890 Group 1
1234567890 Group 1 : Active
General Information
Contacts
Collapse All
Group General Information
Renewal Month
JUNE
Payment Mode
Monthly
State of incorporation
Payment Terms
C1-Due by 1st of Coverage Month
Affiliation
N/A
SIC Code & Description
5012 - Automobiles and Other Motor Vehicles
Sales Representatives
Client Manager
Eligibility
Student Reporting
Dependents
Students Covered
Domestic Partners
Dependent Type
Eligible to Age
Terminate
Disabled Dependent
Unlimited
No Deletion
Regular
26
First of Month Following Birthdate
Products
Keystone POS
Currently Active
Contract Range
06/01/2017-05/31/2018
Next Renewal
06/01/2018
Contract Period
12 months
Billing Method
Premium
Premier Advantage
Currently Active
Contract Range
06/01/2017-05/31/2018
Next Renewal
06/01/2018
Contract Period
12 months
Billing Method
Premium
Report Codes
Type
Code
COBRA (CB)
700

4. You can view:
   a. **General Information**
      The page title and **Group General Information** section display the following information:

Term	Definition
Group Name	The name of the group.
Group Status	The status of the group, i.e., whether the grou s active or cancelled.
Renewal Month	Your company's renewal month.
State of Incorporation	The state in which your company is incorporated.
Affiliation	The companies having a common interest above and beyond the purchase of health care.
Sales Representatives	The names and titles of the sales representatives assigned to your company.
Payment Mode	The frequency of payments.
Payment Terms	The due date for payments.
SIC Code	The Standard Industrial Classification (SIC) code assigned to your company.
SIC Industry Description	The type of business.

   b. **Eligibility**
      The **Group Eligibility** section displays the following information:

Term	Definition
Dependents, Students, & Domestic Partners Covered	Yes (check) or No (x) answer, as to whether they are covered or not.
Students Reporting	Yes (check) or No (x) answer, as to whether a rule exists for student dependents to report their school status to maintain eligibility under a contract holder's coverage for contract.
Dependent Type	Regular, Disabled, or Student.
Eligible To Age	The age at which coverage is discontinued for a dependent.
Terminate	The rules for when a dependent's coverage terminates.

c. **Product**

The **Group Products section** displays product information and status.

Term	**Definition**
Product Status	Indicates whether the product is currently active or effective on a future date.
Billing Method	The type of billing used by the purchaser to pay for benefits bought under the contract.

d. **Report Codes**

The **Group Report Code** section displays active report codes that are associated with the selected group. Report codes are only shown if they are applicable to your company's setup.

5. Select Contacts from the left navigation to view group contacts.

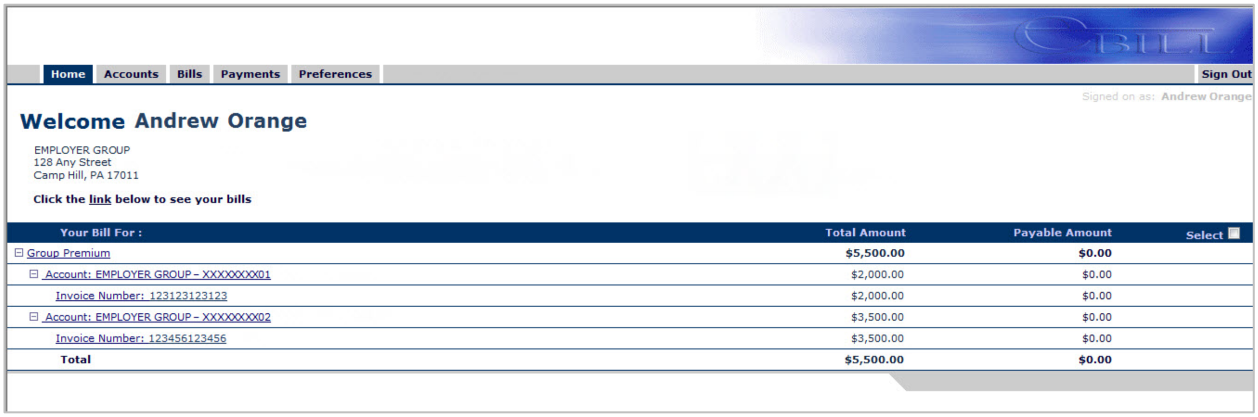
The Group Contacts page displays contact information such as, names, addresses, phone numbers, fax numbers, e-mail addresses, etc. The Contact Type field describes when the contact is to be used. For example, the group may have Billing contacts, ID Card contacts, Report contacts, etc.

Section 5: Billing

Purpose: This section provides a high level understanding of the information you can access from the e-Bill system.

If you have the entitlement, the Billing tab enables you to view group invoices online. The Billing tab links to e-Bill.

1. Click the Billing tab from the Home page.
2. The e-Bill Welcome page displays.



In e-Bill, you can view reports and the prior months' bills. Email notices alert you when a new bill is available. The following tabs are available:

- Home
- Accounts
- Bills
- Payments
- Preferences

The Home tab provides an overview of the current invoice(s) for the group account(s).

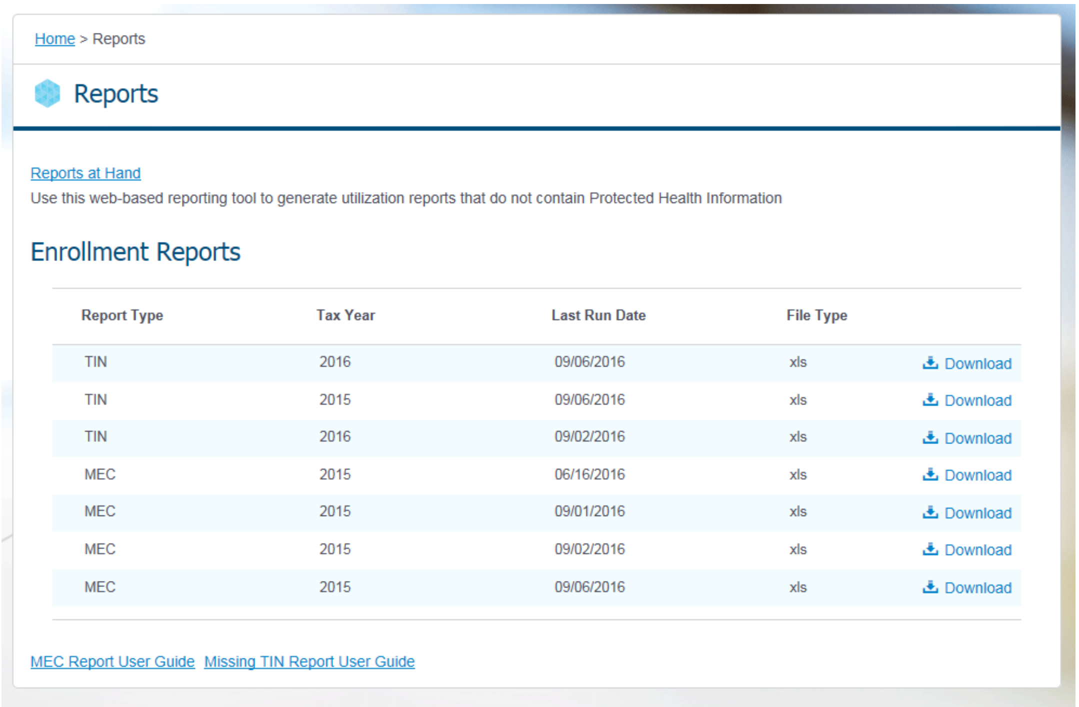
Note: If there is no current invoice to be paid, the amount due is $0.

Section 6: Reports

Purpose: This section provides an overview of the reports you can access.

If you have the entitlement, the Reports tab enables you to view and generate reports for your company.

You can view Enrollment Reports and link to reports @ hand.



Home > Reports

Reports

Reports at Hand

Use this web-based reporting tool to generate utilization reports that do not contain Protected Health Information

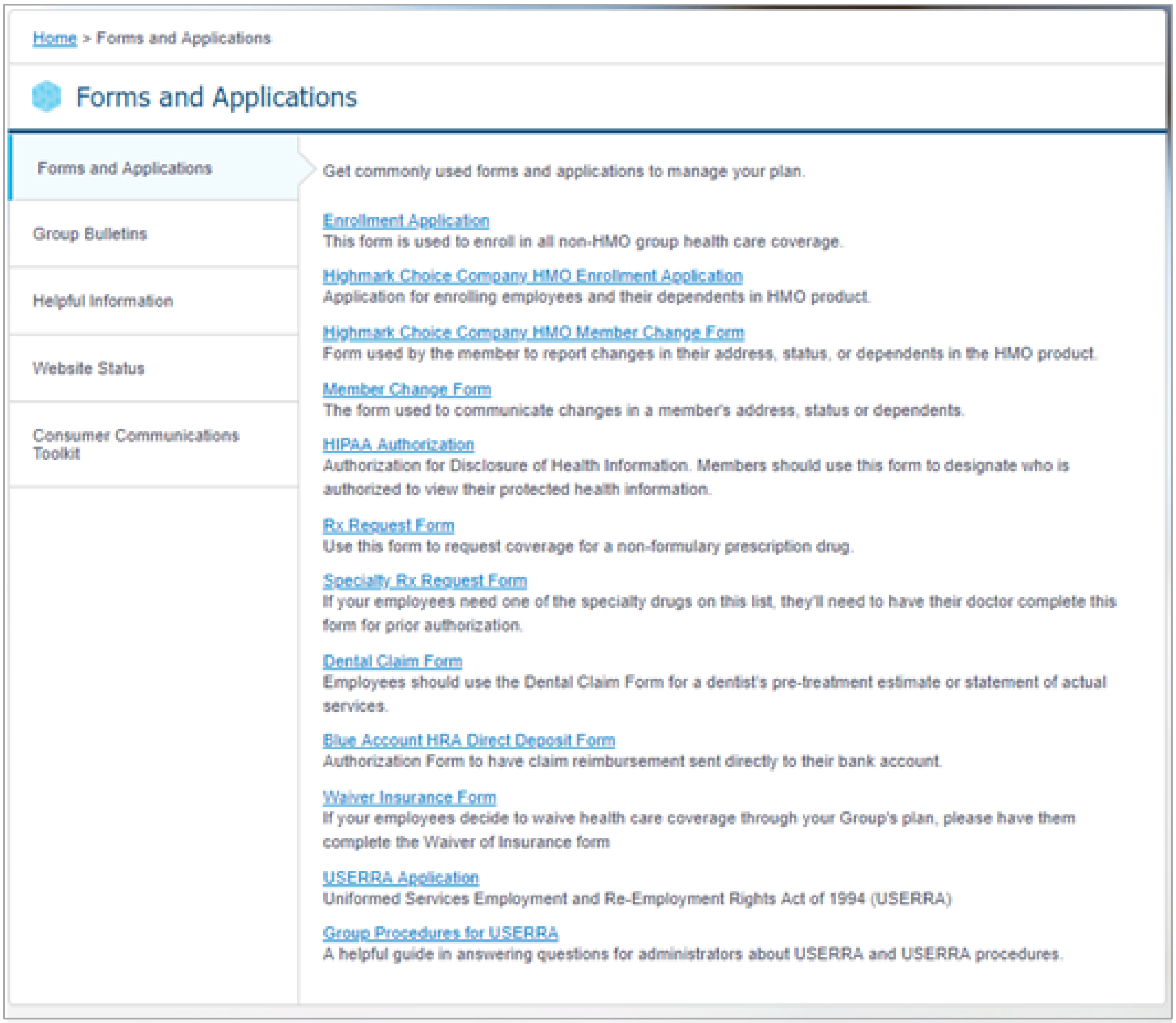
Enrollment Reports

Report Type	Tax Year	Last Run Date	File Type	
TIN	2016	09/06/2016	xls	Download
TIN	2015	09/06/2016	xls	Download
TIN	2016	09/02/2016	xls	Download
MEC	2015	06/16/2016	xls	Download
MEC	2015	09/01/2016	xls	Download
MEC	2015	09/02/2016	xls	Download
MEC	2015	09/06/2016	xls	Download

MEC Report User Guide Missing TIN Report User Guide

Section 7: Resources

Purpose: This section provides an overview of the resources you can access.



Home > Forms and Applications

Forms and Applications

- Forms and Applications
- Group Bulletins
- Helpful Information
- Website Status
- Consumer Communications Toolkit

Get commonly used forms and applications to manage your plan.

Enrollment Application
This form is used to enroll in all non-HMO group health care coverage.

Highmark Choice Company HMO Enrollment Application
Application for enrolling employees and their dependents in HMO product.

Highmark Choice Company HMO Member Change Form
Form used by the member to report changes in their address, status, or dependents in the HMO product.

Member Change Form
The form used to communicate changes in a member's address, status or dependents.

HIPAA Authorization
Authorization for Disclosure of Health Information. Members should use this form to designate who is authorized to view their protected health information.

Rx Request Form
Use this form to request coverage for a non-formulary prescription drug.

Specialty Rx Request Form
If your employees need one of the specialty drugs on this list, they'll need to have their doctor complete this form for prior authorization.

Dental Claim Form
Employees should use the Dental Claim Form for a dentist's pre-treatment estimate or statement of actual services.

Blue Account HRA Direct Deposit Form
Authorization Form to have claim reimbursement sent directly to their bank account.

Waiver Insurance Form
If your employees decide to waive health care coverage through your Group's plan, please have them complete the Waiver of Insurance form

USERRA Application
Uniformed Services Employment and Re-Employment Rights Act of 1994 (USERRA)

Group Procedures for USERRA
A helpful guide in answering questions for administrators about USERRA and USERRA procedures.