



BlueCross BlueShield
of Texas

ACA Small Group Enrollment Tool User Guide



For Producers and General Agents

Effective October 2017

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Purpose

The purpose of this user guide is to provide step-by-step instructions and guidance to Producers and General Agents (GAs) as they enroll their groups using the enhanced eSales ACA Small Group Enrollment tool.



Important: We encourage Producers to use the eSales ACA Small Group Enrollment tool. Enrolling groups through this tool and submitting clean cases eliminates some internal processing steps thus improving the turnaround time from quote to approval.

Overview of the Enrollment Process

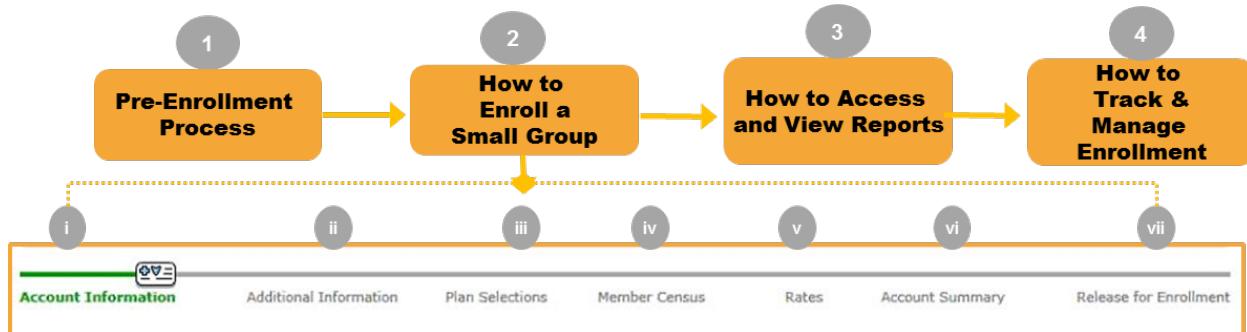
The eSales ACA Small Group Enrollment tool enables you to enroll your groups online in a user-friendly, efficient step-by-step process. You can enter the required information and upload the necessary documents to release your group for enrollment, initiating underwriter review. Within this portal, you can enter account and additional group information; select medical, dental and life plans; enter the member census; view rates; review the account summary, print and verify all information with your client; upload all required documentation to release the case for enrollment. You can also view the relevant reports.

The enhanced online tool helps to streamline and automate the enrollment process. It provides faster turnaround time for an enrollment from review to final decision. You can track the status of the case online and keep your clients updated on the enrollment status.

Let's review the steps to enroll a small group (1-50 employees) using the eSales ACA Small Group Enrollment tool.

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Overview of the Enrollment Process (Contd.)



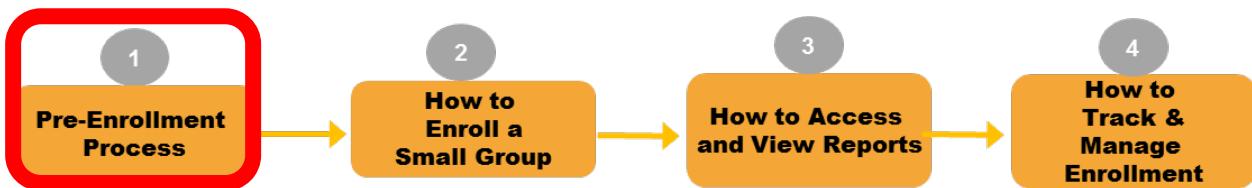
Once you have gathered the necessary information and documentation from your client, you access the eSales ACA Small Group Enrollment tool to enter all required information to release the group for enrollment. This initiates the Underwriting review process. To successfully enroll your group online, follow the steps outlined in this user guide.

Steps to Enroll a Small Group:

1. Pre-Enrollment Process
2. How to Enroll a Small Group
 - i. Account Information
 - ii. Additional Information
 - iii. Plan Selections
 - iv. Member Census
 - v. Rates
 - vi. Account Summary
 - vii. Release for Enrollment
3. How to Access and View Reports
4. How to Track and Manage Enrollment
 - i. Enrollment Status
 - ii. More Information Required
 - iii. Underwriting Approval Received
 - iv. My Enrollments

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1 Pre-Enrollment Process



Let's begin the online enrollment process. First, you must logon to the Blue Access for Producers (BAP) or the Producer Portal, and navigate to the eSales Tools home page.

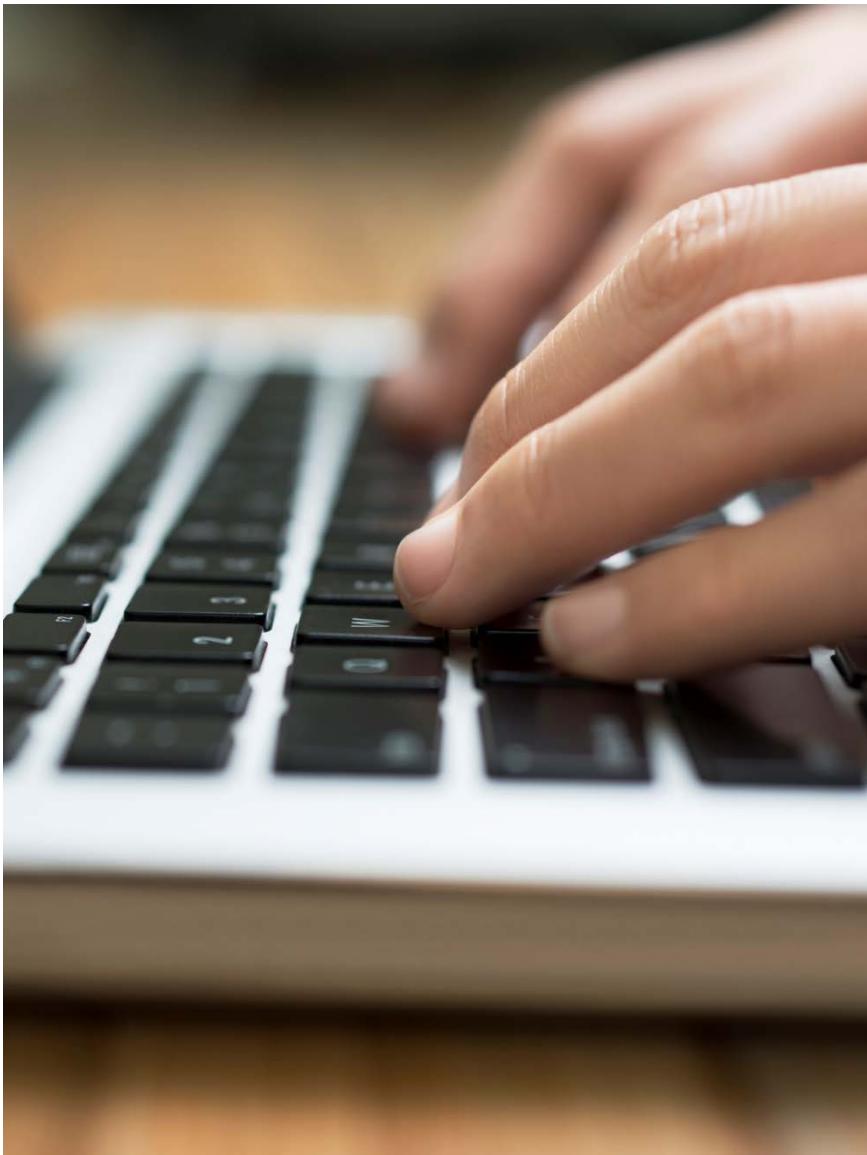
Accessing the eSales ACA Small Group Enrollment Tool

A new link has been added to the eSales Tools home page. At this time, it is recommended to use Internet Explorer or Google Chrome web browsers to access the Enrollment tool.

After you create a quote using the **eSales quoting application**, you return to the eSales Tools Home page, and click **ACA Small Group Enrollment** link to begin the enrollment process.

The screenshot shows the eSales Tools Home page with a navigation bar at the top. Below the navigation, there's a main content area with a sidebar on the left containing links like 'E-Sales Tools Links' (ACA Small Group Quoting, Blue Directions for Small Business, Request Center, Quoting 51-100 (non ACA), Plan Benefits and Rates, Medical Preliminary Request, etc.). The main content area features a 'Welcome to eSales Tools' message and two prominent 'ACA Small Group Enrollment' boxes. One box is located in the center, and another is at the bottom of the sidebar. Both boxes contain the same text: 'ACA Small Group Enrollment • for Small Groups with 1 - 50 eligible employees for effective dates on or after 12/01/2015'. These boxes are also highlighted with a red box. To the right of the sidebar, there are other links: 'Request Center' (submit required documentation for New Business ACA Enrollments (2-100)), 'Medical Preliminary Request' (submit medical information to Underwriting for small groups and receive an early assessment), and 'Benefit Plans' (produce Benefit Summaries for Middle Markets (51-150) in PDF format). The top right corner shows 'Logged In: SMITH JOHN Last Access: 2016-10-13 02:29 AM'.

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Enrollment with a Quote

Steps to start an enrollment process
using a quote in eSales Tools.

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1 Pre-Enrollment Process (Contd.)

Enrolling with a Quote

Once you have logged on to the producer portal and clicked the **ACA Small Group Enrollment** link within the eSales Tools, you can start the enrollment process.

From the Enrollment home page, you can now enroll a small group with a quote and without a quote.

The screenshot shows the eSales Tools Enrollment page for BlueCross BlueShield of Texas. At the top, there are navigation links for Contact Us, FAQ, Help, and Log Out. The main header says "Enrollment". Below the header, there's a search bar with dropdowns for Account Name, Agent, Division, and a "Status" dropdown set to "Quoted". A red box highlights the "Status" dropdown. To the right, there are fields for Quote Number (807754), Account Number, Effective Date, Case ID, and EIN. A red box highlights the "Quote Number" field. Below the search bar, a message says "Search by Quoted status to start enrolling a quoted prospect, or Start Enrollment without a Quote". A red box highlights the "Start Enrollment without a Quote" link. The results table shows one row for a prospect named TX_UG. The "Start Enrollment" button in the first column of the table is highlighted with a red box. The table also includes columns for Effective Date, Agent, Sales Executive, and Quote #.

Prospect	Effective Date	Agent	Sales Executive	Quote #
Start Enrollment TX_UG	10/15/2016	ITG Test Broker2	West Texas region - ItBroker2	807754

To enroll with a quote;

1. Search for the quote using the Quote Number or any portion of the Account Name.
2. From the **Status** drop-down list, select **Quoted**.
3. Click **Search** or hit the **Enter** key on the keyboard.
4. After you find your required quote, click **Start Enrollment**.

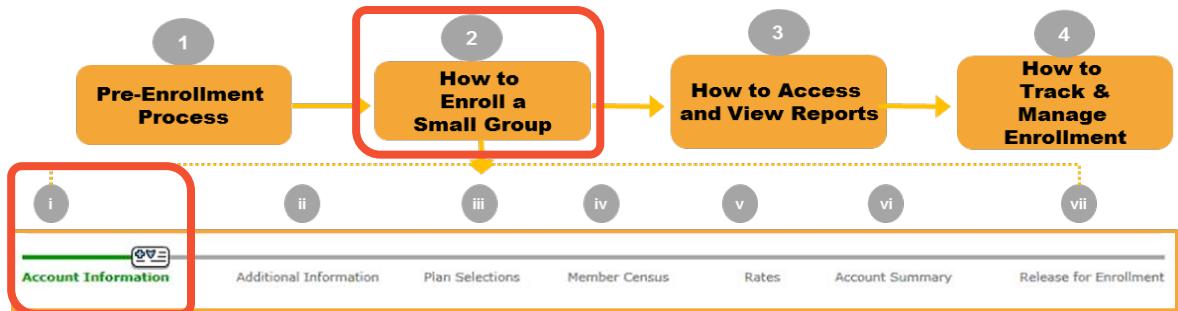
Note:

- Search by **Pre-Enrollment** only if returning to a case that is already in the enrollment process.
- Enrolling cases that have not been released for enrollment review will be auto discontinued by the system 60 days from the effective date.

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2 How to Enroll a Small Group

I. Account Information



Overview of Functionality and Navigation

On each screen of the enrollment tool, you see a progress bar that highlights the current step or screen in green. We have used the same progress bar to walk you through this user guide.



Step i: Account Information

After you search for the quote, and click **Start Enrollment**, the **Account Information** screen is displayed. At the top of each screen, you see the following buttons:

- **Reports:** Opens a list of available reports.
- **Documents List:** Opens a list of required documents.
- **Discontinue:** Allows users to discontinue a case any time throughout the enrollment process.
- **Attachments:** Allows users to attach the required documents. This functionality will be discussed in more detail later in the training.

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2 How to Enroll a Small Group (Contd.)

I. Account Information (contd.)

On this screen, enter the information in the required fields. All fields marked with an asterisk (*) are required. Some data is already populated in the fields.

The screenshot shows the 'Account Information' page with the following sections and data:

- General Information:**
 - *Employer's Legal Name: TX_UG
 - *Employer ID Number (EIN): []
 - *SIC Code: 0111 - Wheat farms
 - *Policy Effective Date: 10/15/2016
 - *Case Submitted to BCBS: 10/14/2016
 - *Does this group cover domestic partners?: Yes No
 - *Is Group subject to COBRA?: Yes No
 - *COBRA Administration?: Yes No
- Blue Access for Employers (BAE):**
 - Contact Name: []
 - Phone (numbers only): [] Ext. []
 - Contact Title: []
 - E-Mail Address: []
- Employee Retirement Income Security Act (ERISA):**
 - *ERISA Regulated Group Health Plan : Yes No
- Physical Address/Contact Information:**
 - Address:**
 - *Address 1: []
 - *City: []
 - *Zip Code: 75080
 - Address 2: []
 - State: Texas
 - *County: Please Select ▼
 - Secondary Contact:**
 - *E-Mail Address of Authorized Company Official: []
 - *Phone (numbers only): [] Ext. []
 - Fax (numbers only): []
 - Contact Title: []
 - *Different Billing Address?: Yes No
 - *Different Mailing Address?: Yes No
- Producer Information:**
 - Primary Producer:**
 - *Primary Producer Name: ITG Test Broker2
 - *Tax ID/SSN: ITBROKER2
 - *E-Mail Address: []
 - Telephone #: 8003995831
 - Fax #: []
 - *Producer #: ITBROKER2
 - *Confirm E-Mail Address: []
 - Complete Address: 901 South Central Expressway Richardson TX 75080

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Enrollment without a Quote

Steps to start an enrollment process
without a quote in eSales Tools.

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1 Pre-Enrollment Process (Contd.)

Enrolling without a Quote

You can also start the enrollment process without a quote.

1. Click **Start Enrollment without a Quote**.

The screenshot shows the 'Enrollment' page with a search interface. At the top left is a dropdown menu 'Search Existing Accounts/Quotes'. Below it is a search bar with placeholder text 'Search by Quoted status to start enrolling a quoted prospect' and a red box highlighting the 'Start Enrollment without a Quote' button. To the right of the search bar are several input fields: 'Account Name', 'Agent', 'Division' (set to 'Texas'), 'Quote Number', 'Account Number', 'Case ID', 'Status' (a dropdown menu), 'Effective Date', and 'EIN'. At the bottom right are 'Search' and 'Clear' buttons.

Note: In this User Guide, we will continue to use the **Start Enrollment without a Quote** option to explain the ACA Small Group Enrollment process.

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2 How to Enroll a Small Group (Contd.)

I. Account Information

The screenshot shows the 'Account Information' screen with the following details:

- Account Name:** (Blank)
- Market Segment:** Small Group
- Account Number:** (Blank)
- Effective Date:** (Blank)
- Producer:** ITG Test Broker2
- Status:** Pre-enrollment
- Quote Number:** NA
- Case ID:** 13466
- Created By:** External
- EFT Status:** Not Processed
- Buttons:** Reports, Documents List, Attachments, Log, History, Discontinue.

When an enrollment is started **without a quote**, some of the information on the page header will remain blank until the data is manually entered on the **Account Information** screen.

Other information will pre-populate for you:

- **Account Name:** blank
- **Market Segment:** Small Group
- Account Number: blank
- Effective Date: blank
- **Producer:** Producer name, unless General Agent is enrolling the case. In this example, ITG Test Broker2.
- **Status:** Pre-Enrollment
- Quote Number: NA
- **Case ID:** Unique number assigned to case. In this example, 13466.
- **Created By:** External
- **EFT Status**– Payment Status.

An Account Number will be reserved when you advance to the **Release for Enrollment** screen. The report links in the **Reports** button will also become active on this screen.

2 How to Enroll a Small Group (Contd.)

I. Account Information (contd.)

Account Information

General Information

- *Employer's Legal Name: [Text Box]
- *Employer ID Number (EIN): [Text Box]
- *SIC Code: [Text Box] [Find](#)
- *Policy Effective Date: [Dropdown: Please Select ▼]
- *Case Submitted to BCBS: [Text Box: 10/14/2016]
- *Does this group cover domestic partners?: Yes No
- *Is Group subject to COBRA?: Yes No
- *COBRA Administration?: Yes No

Blue Access for Employers (BAE)

Contact Name: [Text Box]	Contact Title: [Text Box]
Phone (numbers only): [Text Box]	Ext. [Text Box]
E-Mail Address: [Text Box]	

Employee Retirement Income Security Act (ERISA)

- *ERISA Regulated Group Health Plan : Yes No

Physical Address/Contact Information

(1) Please refer to the USPS website to confirm accurate address information. [Visit USPS](#)

*Address 1: [Text Box]	Address 2: [Text Box]
*City: [Text Box]	State: Texas
*Zip Code: [Text Box]	*County: [Dropdown: Please Select ▼]
Secondary E-Mail Address: [Text Box]	
*Phone (numbers only): [Text Box]	Ext. [Text Box]
Fax (numbers only): [Text Box]	
Administrative Contact: [Text Box]	
Contact Title: [Text Box]	
*Different Billing Address?: <input type="radio"/> Yes <input checked="" type="radio"/> No	
*Different Mailing Address?: <input type="radio"/> Yes <input checked="" type="radio"/> No	

Producer Information

Primary Producer

*Primary Producer Name: [Text Box] Find	ITG Test Broker2	Clear
*Tax ID/SSN: ITBROKER2	*Producer #: ITBROKER2	
*E-Mail Address: [Text Box]	*Confirm E-Mail Address: [Text Box]	
Telephone #: 8003995831	Complete Address: 901 South Central Expressway	
Fax #: [Text Box]		

When you start enrollment without a quote, the **Account Information** screen will be blank. You have to manually enter the data in all the required fields.

Note: The system will time out after several minutes of inactivity. Information is saved by clicking the green **Continue** button.

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2 How to Enroll a Small Group (Contd.)

I. Account Information (contd.)

- Enter the required information under the General Information section. The required fields are marked with an asterisk (*).

Account Information

Additional Information Plan Selections Member Census Rates Account Summary Release for Enrollment

① Alert: A group with the same EIN has been previously entered in this system. This is an informational alert only.

Account Information

General Information

*Employer's Legal Name: TEST_TX_UG *Does this group cover domestic partners?: Yes No

*Employer ID Number (EIN): 5555555555 *Is Group subject to COBRA?: Yes No

*SIC Code: 0111 Wheat farms *COBRA Administration?: Yes No

*Policy Effective Date: 10/15/2016 *Case Submitted to BCBS: 10/10/2016

Blue Access for Employers (BAE)

Contact Name: Contact Title: E-Mail Address:

Phone (numbers only): Ext:

Employee Retirement Income Security Act (ERISA)

*ERISA Regulated Group Health Plan: Yes No

Continue

Note: If enrolling a group with an EIN already in our system, the tool will display the following alert. *"Alert: A group with the same EIN has been previously entered in this system. This is an informational alert only."* However, the tool will still allow you to enroll the case.

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2 How to Enroll a Small Group (Contd.)

I. Account Information (contd.)

3. Answer the **Employee Retirement Income Security Act (ERISA)** question. When the **Yes** radio button is selected, additional fields will populate. In this example, we select ERISA as **No**.

Employee Retirement Income Security Act (ERISA)

*ERISA Regulated Group Health Plan : Yes No

*ERISA Plan Year - Beginning Date: _____

*ERISA Plan Year - End Date: _____

*ERISA Plan Sponsor: _____

4. Enter the **Company's Physical Address/Contact** Information. When entering the group's address in the **Physical Address** section, the tool will automatically check that the information is valid. If prompted, you need to enter a correct and accurate address to continue to the next required screen. If you encounter any issues while entering the address, visit the **USPS** link on the screen to confirm the appropriate address information.

Physical Address/Contact Information

ⓘ Please refer to the USPS website to confirm accurate address information. [Visit USPS](#)

*Address 1: 409 ARBORCREST DR

*City: RICHARDSON

*Zip Code: 75080

*E-Mail Address of Authorized Company Official: joe.young@company.com

*Phone (numbers only): 9722710000 Ext. 1111

*Administrative Contact: JOE YOUNG

*Different Billing Address?: Yes No

Address 2: _____

State: Texas

*County: Dallas

Secondary E-Mail Address: _____

Fax (numbers only): _____

Contact Title: _____

*Different Mailing Address?: Yes No

Note: When the zip code does not default, the user must select the county from the drop-down list. Please click the [USPS](#) link to check for the appropriate county. Incorrect county selection could result in incorrect rates.

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2 How to Enroll a Small Group (Contd.)

I. Account Information (contd.)

Billing Address/Contact Information			
*Address 1:	Address 2:		
*City:	*State: Please Select ▼		
*Zip Code:	*County: Please Select ▼		
*E-Mail Address of Authorized Company Official:		Secondary E-Mail Address:	
*Phone (numbers only): _____ Ext. _____		Fax (numbers only): _____	
*Administrative Contact: _____		Contact Title: _____	
Mailing Address/Contact Information			
*Address 1:	Address 2:		
*City:	*State: Please Select ▼		
*Zip Code:	*County: Please Select ▼		
*E-Mail Address of Authorized Company Official:		Secondary E-Mail Address:	
*Phone (numbers only): _____ Ext. _____		Fax (numbers only): _____	
*Administrative Contact: _____		Contact Title: _____	

Optional Step:

If there are separate physical and mailing addresses, select the **Yes** radio button for billing address and **No** radio button for the mailing address to populate the additional mailing address fields. If **Yes** is selected for the ‘different billing’ and/or ‘different mailing address’ questions, additional fields will populate. Enter all required information.



Important! Until further notice, if a group has multiple addresses, for the physical address, select **Yes** for billing address, and **No** for mailing address.

Note: Out of state addresses are acceptable in the billing and mailing address sections.

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2 How to Enroll a Small Group (Contd.)

I. Account Information (contd.)

Producer Information

Primary Producer

*Primary Producer Name:	<input type="text" value="ITG Test Broker2"/>	<input type="button" value="Find"/>	<input type="button" value="Clear"/>
*Tax ID/SSN:	ITBROKER2		
*E-Mail Address:	<input type="text"/>	*Producer #:	<input type="text" value="ITBROKER2"/>
Telephone #:	<input type="text" value="8003995831"/>	*Confirm E-Mail Address:	<input type="text"/>
Fax #:	<input type="text"/>		
Complete Address: 901 South Central Expressway			

Find a Producer

Producer Name:	<input type="text" value="rogers"/>
Phone Number:	<input type="text"/>
Producer Number:	<input type="text"/>
<input type="button" value="Search"/>	

Search Results

Producer Name	Producer Number	Phone	Fax	R/D/T	Contact Name
WIGHT LOUIS ROGERS	000000353	8063581344	8063560371	01/04/021	Dwight Rogers
WILLIAM GRADY ROGERS	000000672	9407230771		01/02/014	T Hutchings
NOEL GENE ROGERS	000006477	2107349801	2107349813	03/26/065	Noel Rogers
JAMES PATRICK ROGERS	000007597	9725231579	9725231579	01/02/015	JAMES ROGERS
RICHARD WADE ROGERS	000014130	9369336899	8776778660	02/16/049	RICHARD ROGERS
MATTHEW WILLIAM ROGERS	000016255	2149247479	9726448355	01/02/018	
BETTYE ANN SIDDONS ROGERS	000018222	5126190805	5127322885	03/29/074	BETTYE ROGERS
ROBERT JOSEPH ROGERS Jr.	000018288	2815960432		02/16/044	
ROGERS BENEFIT GROUP INC	000018793	6028508866	6022960884	07/99/099	Marla Wilkerson
ROBERT LEO ROGERS	000019196	9567241038	9567261174	03/26/065	

Optional Step: In the **Producer Information** section, the Primary Producer and/or General Agent (GA) information will appear blank. If you want to update the Primary Producer or Subproducer (writing agent) click **Find**. Enter any portion of the Producer's, General Agent's or Sub Producer's Name, Phone Number or Producer Number.

In this example, we search by the **Producer's** name. Click **Search**. Once the appropriate Producer is displayed, select the name by clicking **Use**. After selecting a Producer, you are automatically re-directed to the **Account Information** screen.

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2 How to Enroll a Small Group (Contd.)

I. Account Information (contd.)

Producer Information

Primary Producer

*Primary Producer Name:

*Tax ID/SSN: ITBROKER2

*E-Mail Address:

Telephone #:

Fax #:

*Producer #: ITBROKER2

*Confirm E-Mail Address:

Complete Address: 901 South Central Expressway

General Agent

General Agent Name:

Tax ID/SSN:

E-Mail Address:

Telephone #:

Fax #:

Producer #:

Confirm E-Mail Address:

Complete Address:

Subproducer

Subproducer Name:

Subproducer #:

*** - Required**

Optional Step (contd.): In this example, you have searched and updated the Producer's name. If you want to change the Primary Producer / General Agent / Subproducer's name, you can click **Clear** to remove the name in the fields and enter the desired value directly.

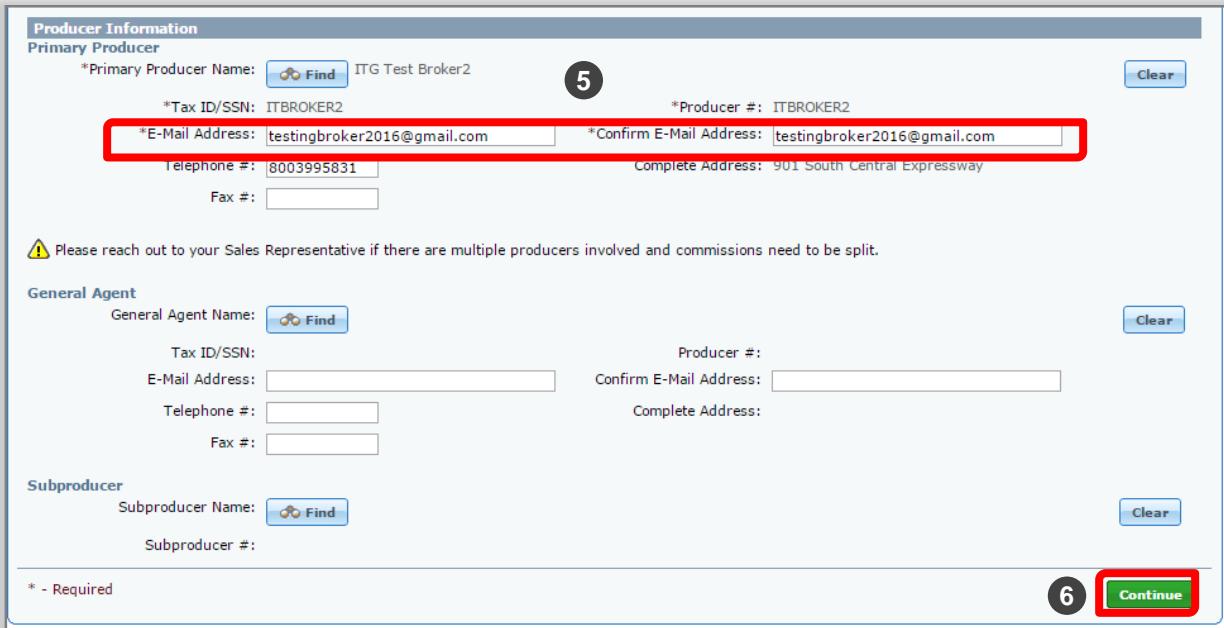


Important! If there are split commissions, contact your Sales Representative.

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2 How to Enroll a Small Group (Contd.)

I. Account Information (contd.)



The screenshot shows the 'Producer Information' section of the ACA Small Group Enrollment tool. The 'Primary Producer' tab is selected. In the 'E-Mail Address' field, the value 'testingbroker2016@gmail.com' is entered and highlighted with a red box. Next to it, in the 'Confirm E-Mail Address' field, the same value is also present. A yellow warning icon with the text 'Please reach out to your Sales Representative if there are multiple producers involved and commissions need to be split.' is displayed. Below the primary producer section, there are sections for 'General Agent' and 'Subproducer', both of which are currently empty. At the bottom left, a note says '* - Required'. On the right side, there are 'Clear' buttons for each section and a large green 'Continue' button at the bottom right.

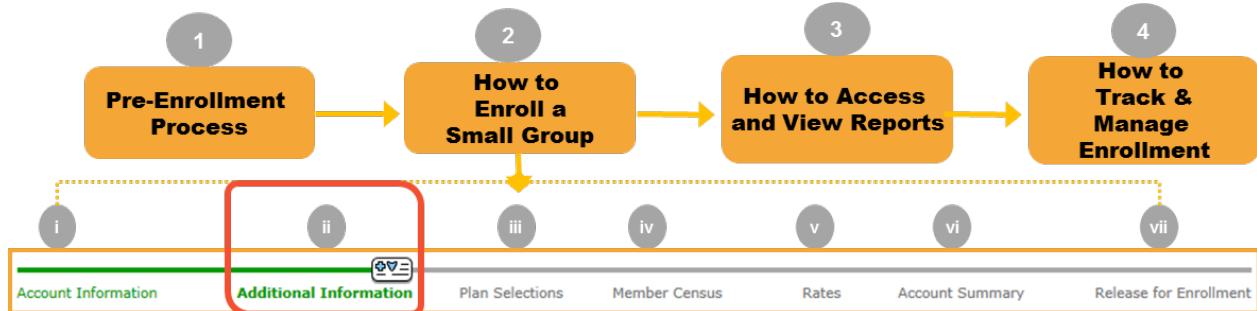
5. In the **Producer Information** section, you will be required to re-enter the email address to validate it. The tool will confirm that both the email addresses match. The tool will not allow you to copy the first instance of the email address into the second field. If the entries do not match, then you will view an error message: "*The email addresses do not match*". Enter the email address. Renter the email address to validate it.
6. Once all required fields are complete, click the green **Continue** button to save and move to the next screen. Once saved, the data entered will populate the fields in the header.

Note: Ensure that the email address is accurate. All the notifications and communications regarding your case will be sent to this email address. During the Underwriter Review, in case the Underwriter needs more information or any additional information, then all relevant emails will be sent to this email address.

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2 How to Enroll a Small Group (Contd.)

II. Additional Information



In the earlier step, you have entered the required account information for your group. Next you will enter additional group level information.

Additional Information

* Current Health Carrier: Cigna Life Insurance Co.

Eligibility*

*Waive the waiting period on initial enrollment? Yes No *Number of Employees serving waiting period:

The Eligibility Date for an employee who becomes eligible after the Effective date of the Group's Health Insurance Plan is determined by the **15th** day of the month following **0** days of employment.

HSA Vendor Selection

If HSA is selected, a vendor may be selected from the below options. (If option A, B are not selected, the HSA vendor will default to other or none).

A. Benefit Wallet
 B. HSA Bank
 Other/None

Previous * - Required **Continue**

Step ii: Additional Information

- Enter the group level information in the required fields using the documentation provided. All fields marked with an asterisk (*) are required. Use **Previous** and **Continue** to move backward and forward in the tool. Depending on your selection **Yes or No**, different additional fields will be displayed.

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2 How to Enroll a Small Group (Contd.)

II. Additional Information (contd.)

- On the **Additional Information** screen, select the relevant Health Carrier.

Account Information Additional Information Plan Selections Member Census Rates Account Summary Release for Enrollment

Additional Information

Previous Continue

1

Current Health Carrier: Cigna Life Insurance Co.

Eligibility*

*Waive the waiting period on initial enrollment Yes No

The Eligibility Date for an employee who becomes eligible after the Effective date of the Group's Health Insurance Plan is determined by the 15th day of the month following 60 days of employment.

HSA Vendor Selection

If HSA is selected, a vendor may be selected from the below options. (If option A, B are not selected, the HSA vendor will default to other or none).

- A. Benefit Wallet
- B. HSA Bank
- Other/None

2

3

Previous * - Required Continue

- Under the Eligibility section, if the **No** radio button is selected, additional fields will be displayed. In this example, we select **Yes**.

Note: Under the **Eligibility** section, you can enter the number from "1-60" for employees who have become eligible after the **Effective Date** of their health plan.

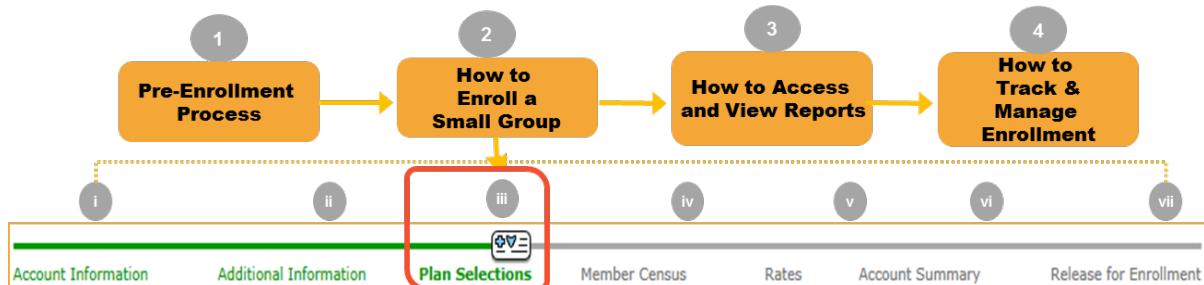
Under the HSA Vendor selection section, if a HSA is selected on the paperwork, a vendor may be selected here from the available options.

- Click **Continue** to proceed to the **Plan Selections** screen.

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2 How to Enroll a Small Group (Contd.)

III. Plan Selections



Step iii: Plan Selections: Now that you've entered additional information, you can select the appropriate medical, dental and life plans for your group using the documentation provided. All fields marked with an asterisk (*) are required.

Account Information	Additional Information	Plan Selections	Member Census	Rates	Account Summary	Release for Enrollment																																																																																																																																																																																																																																											
Plan Selections <div style="border: 2px solid red; padding: 2px; margin-bottom: 10px;"> <input checked="" type="radio"/> Yes <input type="radio"/> No </div> <p>In-Vitro Coverage: <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="10">Blue Choice PPO Network</th> </tr> <tr> <th>Plan #</th> <th>Ded In/Out</th> <th>Office Visit/ Specialist</th> <th>Coins In/Out</th> <th>OPX In/Out</th> <th>ER Copay *³/ER Coins</th> <th>IP In/Out</th> <th>OP Surg In/Out</th> <th>Ped Dental In/Out</th> <th>Rx **</th> </tr> </thead> <tbody> <tr> <td colspan="10">PPO Plans</td> </tr> <tr> <td colspan="10">Blue Platinum Plans</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>P600CHC</td> <td>\$250/\$500</td> <td>\$25/\$45</td> <td>80%/60%</td> <td>\$1250/\$2500</td> <td>\$300/80%</td> <td>\$150/\$250</td> <td>\$100/\$200</td> <td>70%/70%</td> <td>\$0/\$10/\$35/\$75/\$150</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>P601CHC</td> <td>\$1250/\$2500</td> <td>\$25/\$45</td> <td>100%/100%</td> <td>\$1250/\$2500</td> <td>\$300/100%</td> <td>\$150/\$250</td> <td>\$100/\$200</td> <td>70%/70%</td> <td>\$0/\$10/\$35/\$75/\$150</td> </tr> <tr> <td colspan="10">Blue Gold Plans</td> </tr> <tr> <td><input type="checkbox"/></td> <td>G620CHC</td> <td>\$1000/\$2000</td> <td>\$20/\$40</td> <td>80%/60%</td> <td>\$3900/\$7800</td> <td>\$400/80%</td> <td>NA/NA</td> <td>NA/NA</td> <td>70%/70%</td> <td>\$15/\$40/\$55</td> </tr> <tr> <td><input type="checkbox"/></td> <td>G623CHC</td> <td>\$1250/\$2500</td> <td>\$20/\$60</td> <td>100%/80%</td> <td>\$4500/\$9000</td> <td>\$300/100%</td> <td>\$150/\$250</td> <td>\$100/\$200</td> <td>70%/70%</td> <td>\$0/\$10/\$50/\$100/\$150</td> </tr> <tr> <td><input type="checkbox"/></td> <td>G622CHC</td> <td>\$1250/\$2500</td> <td>\$30/\$50</td> <td>80%/60%</td> <td>\$3500/\$7000</td> <td>\$400/80%</td> <td>NA/NA</td> <td>NA/NA</td> <td>70%/70%</td> <td>\$15/\$30/\$45</td> </tr> <tr> <td><input type="checkbox"/></td> <td>G621CHC</td> <td>\$3125/\$6250</td> <td>\$25/\$50</td> <td>100%/100%</td> <td>\$3125/\$6250</td> <td>\$400/100%</td> <td>NA/NA</td> <td>NA/NA</td> <td>100%/100%</td> <td>\$10/\$40/\$60</td> </tr> <tr> <td><input type="checkbox"/></td> <td>G617CHC</td> <td>\$3000/\$6000</td> <td>\$30/\$50</td> <td>100%/100%</td> <td>\$3000/\$6000</td> <td>\$400/100%</td> <td>\$200/\$300</td> <td>\$150/\$250</td> <td>100%/100%</td> <td>\$0/\$10/\$50/\$100/\$150</td> </tr> <tr> <td><input type="checkbox"/></td> <td>G616CHC</td> <td>\$1500/\$3000</td> <td>\$10/\$60</td> <td>80%/60%</td> <td>\$3500/\$7000</td> <td>\$400/80%</td> <td>\$200/\$300</td> <td>\$150/\$250</td> <td>70%/70%</td> <td>\$0/\$10/\$35/\$75/\$150</td> </tr> <tr> <td colspan="10">Blue Silver Plans</td> </tr> <tr> <td><input type="checkbox"/></td> <td>S610CHC *¹</td> <td>\$2000/\$4000</td> <td>\$40/\$70</td> <td>70%/50%</td> <td>\$6850/\$13700</td> <td>\$500/70%</td> <td>\$250/\$350</td> <td>\$200/\$300</td> <td>70%/70%</td> <td>\$0/\$10/\$50/\$100/\$150</td> </tr> <tr> <td><input type="checkbox"/></td> <td>S611CHC *¹</td> <td>\$2500/\$5000</td> <td>\$40/\$60</td> <td>80%/60%</td> <td>\$6600/\$13200</td> <td>\$500/80%</td> <td>\$250/\$350</td> <td>\$200/\$300</td> <td>70%/70%</td> <td>\$0/\$10/\$50/\$100/\$150</td> </tr> <tr> <td><input type="checkbox"/></td> <td>S607CHC</td> <td>\$3000/\$6000</td> <td>\$30/\$50</td> <td>80%/60%</td> <td>\$6350/\$12700</td> <td>\$500/80%</td> <td>\$250/\$350</td> <td>\$200/\$300</td> <td>70%/70%</td> <td>\$0/\$10/\$50/\$100/\$150</td> </tr> <tr> <td><input type="checkbox"/></td> <td>S608CHC</td> <td>\$3000/\$6000</td> <td>\$40/\$60</td> <td>70%/50%</td> <td>\$6000/\$12000</td> <td>\$500/70%</td> <td>NA/NA</td> <td>NA/NA</td> <td>70%/70%</td> <td>\$20/\$40/\$60</td> </tr> <tr> <td><input type="checkbox"/></td> <td>S606CHC</td> <td>\$6000/\$12000</td> <td>\$20/\$40</td> <td>100%/100%</td> <td>\$6000/\$12000</td> <td>\$500/100%</td> <td>\$250/\$350</td> <td>\$200/\$300</td> <td>100%/100%</td> <td>\$0/\$10/\$50/\$100/\$150</td> </tr> <tr> <td><input type="checkbox"/></td> <td>S600CHC</td> <td>\$6000/\$12000</td> <td>\$20/\$40</td> <td>100%/100%</td> <td>\$6000/\$12000</td> <td>NA/100%</td> <td>NA/NA</td> <td>NA/NA</td> <td>100%/100%</td> <td>\$0/\$10/\$35/\$75/\$150</td> </tr> <tr> <td colspan="10">Blue Bronze Plans</td> </tr> <tr> <td><input type="checkbox"/></td> <td>B600CHC</td> <td>\$6850/\$13700</td> <td>NA/NA</td> <td>100%/100%</td> <td>\$6850/\$13700</td> <td>NA/100%</td> <td>NA/NA</td> <td>NA/NA</td> <td>100%/100%</td> <td>100%</td> </tr> </tbody> </table>							Blue Choice PPO Network										Plan #	Ded In/Out	Office Visit/ Specialist	Coins In/Out	OPX In/Out	ER Copay * ³ /ER Coins	IP In/Out	OP Surg In/Out	Ped Dental In/Out	Rx **	PPO Plans										Blue Platinum Plans										<input checked="" type="checkbox"/>	P600CHC	\$250/\$500	\$25/\$45	80%/60%	\$1250/\$2500	\$300/80%	\$150/\$250	\$100/\$200	70%/70%	\$0/\$10/\$35/\$75/\$150	<input checked="" type="checkbox"/>	P601CHC	\$1250/\$2500	\$25/\$45	100%/100%	\$1250/\$2500	\$300/100%	\$150/\$250	\$100/\$200	70%/70%	\$0/\$10/\$35/\$75/\$150	Blue Gold Plans										<input type="checkbox"/>	G620CHC	\$1000/\$2000	\$20/\$40	80%/60%	\$3900/\$7800	\$400/80%	NA/NA	NA/NA	70%/70%	\$15/\$40/\$55	<input type="checkbox"/>	G623CHC	\$1250/\$2500	\$20/\$60	100%/80%	\$4500/\$9000	\$300/100%	\$150/\$250	\$100/\$200	70%/70%	\$0/\$10/\$50/\$100/\$150	<input type="checkbox"/>	G622CHC	\$1250/\$2500	\$30/\$50	80%/60%	\$3500/\$7000	\$400/80%	NA/NA	NA/NA	70%/70%	\$15/\$30/\$45	<input type="checkbox"/>	G621CHC	\$3125/\$6250	\$25/\$50	100%/100%	\$3125/\$6250	\$400/100%	NA/NA	NA/NA	100%/100%	\$10/\$40/\$60	<input type="checkbox"/>	G617CHC	\$3000/\$6000	\$30/\$50	100%/100%	\$3000/\$6000	\$400/100%	\$200/\$300	\$150/\$250	100%/100%	\$0/\$10/\$50/\$100/\$150	<input type="checkbox"/>	G616CHC	\$1500/\$3000	\$10/\$60	80%/60%	\$3500/\$7000	\$400/80%	\$200/\$300	\$150/\$250	70%/70%	\$0/\$10/\$35/\$75/\$150	Blue Silver Plans										<input type="checkbox"/>	S610CHC * ¹	\$2000/\$4000	\$40/\$70	70%/50%	\$6850/\$13700	\$500/70%	\$250/\$350	\$200/\$300	70%/70%	\$0/\$10/\$50/\$100/\$150	<input type="checkbox"/>	S611CHC * ¹	\$2500/\$5000	\$40/\$60	80%/60%	\$6600/\$13200	\$500/80%	\$250/\$350	\$200/\$300	70%/70%	\$0/\$10/\$50/\$100/\$150	<input type="checkbox"/>	S607CHC	\$3000/\$6000	\$30/\$50	80%/60%	\$6350/\$12700	\$500/80%	\$250/\$350	\$200/\$300	70%/70%	\$0/\$10/\$50/\$100/\$150	<input type="checkbox"/>	S608CHC	\$3000/\$6000	\$40/\$60	70%/50%	\$6000/\$12000	\$500/70%	NA/NA	NA/NA	70%/70%	\$20/\$40/\$60	<input type="checkbox"/>	S606CHC	\$6000/\$12000	\$20/\$40	100%/100%	\$6000/\$12000	\$500/100%	\$250/\$350	\$200/\$300	100%/100%	\$0/\$10/\$50/\$100/\$150	<input type="checkbox"/>	S600CHC	\$6000/\$12000	\$20/\$40	100%/100%	\$6000/\$12000	NA/100%	NA/NA	NA/NA	100%/100%	\$0/\$10/\$35/\$75/\$150	Blue Bronze Plans										<input type="checkbox"/>	B600CHC	\$6850/\$13700	NA/NA	100%/100%	\$6850/\$13700	NA/100%	NA/NA	NA/NA	100%/100%	100%
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<input checked="" type="checkbox"/>	P600CHC	\$250/\$500	\$25/\$45	80%/60%	\$1250/\$2500	\$300/80%	\$150/\$250	\$100/\$200	70%/70%	\$0/\$10/\$35/\$75/\$150																																																																																																																																																																																																																																							
<input checked="" type="checkbox"/>	P601CHC	\$1250/\$2500	\$25/\$45	100%/100%	\$1250/\$2500	\$300/100%	\$150/\$250	\$100/\$200	70%/70%	\$0/\$10/\$35/\$75/\$150																																																																																																																																																																																																																																							
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<input type="checkbox"/>	G622CHC	\$1250/\$2500	\$30/\$50	80%/60%	\$3500/\$7000	\$400/80%	NA/NA	NA/NA	70%/70%	\$15/\$30/\$45																																																																																																																																																																																																																																							
<input type="checkbox"/>	G621CHC	\$3125/\$6250	\$25/\$50	100%/100%	\$3125/\$6250	\$400/100%	NA/NA	NA/NA	100%/100%	\$10/\$40/\$60																																																																																																																																																																																																																																							
<input type="checkbox"/>	G617CHC	\$3000/\$6000	\$30/\$50	100%/100%	\$3000/\$6000	\$400/100%	\$200/\$300	\$150/\$250	100%/100%	\$0/\$10/\$50/\$100/\$150																																																																																																																																																																																																																																							
<input type="checkbox"/>	G616CHC	\$1500/\$3000	\$10/\$60	80%/60%	\$3500/\$7000	\$400/80%	\$200/\$300	\$150/\$250	70%/70%	\$0/\$10/\$35/\$75/\$150																																																																																																																																																																																																																																							
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<input type="checkbox"/>	S610CHC * ¹	\$2000/\$4000	\$40/\$70	70%/50%	\$6850/\$13700	\$500/70%	\$250/\$350	\$200/\$300	70%/70%	\$0/\$10/\$50/\$100/\$150																																																																																																																																																																																																																																							
<input type="checkbox"/>	S611CHC * ¹	\$2500/\$5000	\$40/\$60	80%/60%	\$6600/\$13200	\$500/80%	\$250/\$350	\$200/\$300	70%/70%	\$0/\$10/\$50/\$100/\$150																																																																																																																																																																																																																																							
<input type="checkbox"/>	S607CHC	\$3000/\$6000	\$30/\$50	80%/60%	\$6350/\$12700	\$500/80%	\$250/\$350	\$200/\$300	70%/70%	\$0/\$10/\$50/\$100/\$150																																																																																																																																																																																																																																							
<input type="checkbox"/>	S608CHC	\$3000/\$6000	\$40/\$60	70%/50%	\$6000/\$12000	\$500/70%	NA/NA	NA/NA	70%/70%	\$20/\$40/\$60																																																																																																																																																																																																																																							
<input type="checkbox"/>	S606CHC	\$6000/\$12000	\$20/\$40	100%/100%	\$6000/\$12000	\$500/100%	\$250/\$350	\$200/\$300	100%/100%	\$0/\$10/\$50/\$100/\$150																																																																																																																																																																																																																																							
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2 How to Enroll a Small Group (Contd.)

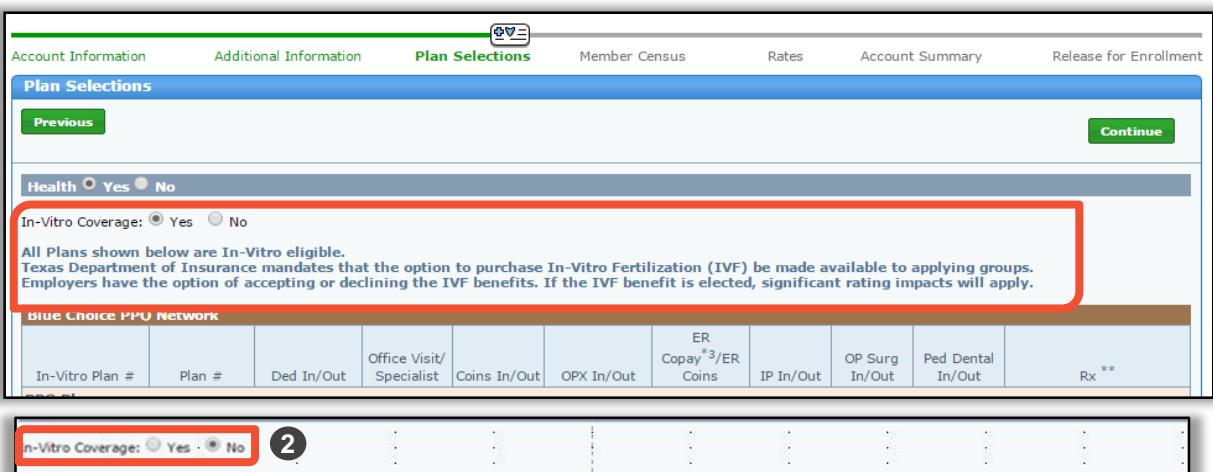
III. Plan Selections (contd.)

- On the **Plan Selections** screen, for Health, the **Yes** option will default. If the group has not elected a health plan (i.e. Dental or Life only plans), you must manually select **No**. In this example, we keep the default selection of **Yes** and select the health plans.



The screenshot shows the 'Plan Selections' screen. At the top, there is a radio button group for 'Health' with 'Yes' selected (highlighted by a red box) and 'No' unselected. Below this, there is another radio button group for 'In-Vitro Coverage' with 'Yes' selected (highlighted by a red box) and 'No' unselected. The main table below is titled 'Blue Choice PPO Network' and contains sections for 'PPO Plans' and 'Blue Platinum Plans'. The 'Blue Platinum Plans' section is highlighted with a red box and lists two plans: P600CHC and P601CHC, each with their respective details like Ded In/Out, Office Visit/Specialist, Coins In/Out, OPX In/Out, ER Copay *3/ER Coins, IP In/Out, OP Surg In/Out, Ped Dental In/Out, and Rx **.

- The **No** option will default for In-Vitro Coverage. If In-Vitro is covered, you must manually select **Yes**. If you select **Yes**, you can compare the with In-Vitro and without In-Vitro plans and make an informed decision. In this example, we select **No**.



The screenshot shows the 'Plan Selections' screen. At the top, there is a radio button group for 'Health' with 'Yes' selected (highlighted by a red box) and 'No' unselected. Below this, there is another radio button group for 'In-Vitro Coverage' with 'Yes' selected (highlighted by a red box) and 'No' unselected. A callout box with the number '2' highlights the 'In-Vitro Coverage' section. A note in the callout box states: 'All Plans shown below are In-Vitro eligible. Texas Department of Insurance mandates that the option to purchase In-Vitro Fertilization (IVF) be made available to applying groups. Employers have the option of accepting or declining the IVF benefits. If the IVF benefit is elected, significant rating impacts will apply.' The main table below is titled 'Blue Choice PPO Network' and contains sections for 'In-Vitro Plan #' and 'Plan #', followed by columns for Ded In/Out, Office Visit/Specialist, Coins In/Out, OPX In/Out, ER Copay *3/ER Coins, IP In/Out, OP Surg In/Out, Ped Dental In/Out, and Rx **.



Important! Selecting In-Vitro Coverage will significantly increase rates and change the plans.

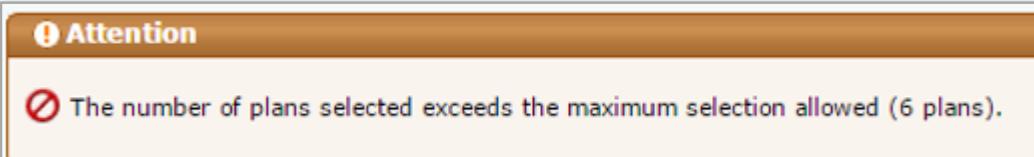
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2 How to Enroll a Small Group (Contd.)

III. Plan Selections (contd.)

Ancillary Products - Dental <input checked="" type="radio"/> Yes <input type="radio"/> No								3					
If Dental is purchased, select from the following Dental plans.													
Plan #	Plan Type	Deductible In/Out *2	Annual Benefit Max	Out-of-Network Reimb.	Coinsurance		Orthodontia Lifetime Max						
					In Network	Out Of Network							
True Group													
High Allocation													
<input checked="" type="checkbox"/>	DTXHR01	Passive	\$25/\$25	\$3000	90th R&C	100%/80%/50%/50%	100%/80%/50%/50%	\$2000					
<input type="checkbox"/>	DTXHR02	Passive	\$50/\$50	\$2000	90th R&C	100%/80%/50%/50%	100%/80%/50%/50%	\$2000					
<input type="checkbox"/>	DTXHR03	Passive	\$50/\$50	\$1500	90th R&C	100%/80%/50%/50%	100%/80%/50%/50%	\$1500					
<input type="checkbox"/>	DTXHR04	Passive	\$50/\$50	\$1000	90th R&C	100%/80%/50%/50%	100%/80%/50%/50%	\$1000					
<input type="checkbox"/>	DTXHM09 *1	Passive	\$50/\$50	\$1500	MAC	100%/80%/50%/NA	100%/80%/50%/NA	NA					
<input type="checkbox"/>	DTXHM11 *3	Passive	\$25/\$25	\$750	MAC	100%/80%/NA/NA	100%/80%/NA/NA	NA					
Low Allocation													
<input type="checkbox"/>	DTXLR05	Passive	\$50/\$50	\$1500	90th R&C	100%/80%/50%/NA	100%/80%/50%/NA	NA					
<input type="checkbox"/>	DTXLR06	Passive	\$50/\$50	\$1000	90th R&C	100%/80%/50%/NA	100%/80%/50%/NA	NA					
<input type="checkbox"/>	DTXLR07	Passive	\$75/\$75	\$1000	90th R&C	90%/70%/50%/NA	90%/70%/50%/NA	NA					
<input type="checkbox"/>	DTXLM08	Passive	\$50/\$50	\$1500	MAC	100%/80%/50%/50%	100%/80%/50%/50%	\$1000					
<input type="checkbox"/>	DTXLM10 *1	Passive	\$75/\$75	\$1000	MAC	90%/70%/50%/NA	90%/70%/50%/NA	NA					
Voluntary Group													
High Allocation													
<input type="checkbox"/>	DTXHR12 *1	Passive	\$50/\$50	\$1500	90th R&C	100%/80%/50%/50%	100%/80%/50%/50%	\$1500					
<input type="checkbox"/>	DTXHM13 *1	Passive	\$50/\$50	\$1500	MAC	100%/80%/50%/NA	100%/80%/50%/NA	NA					
<input type="checkbox"/>	DTXHM15 *3	Passive	\$25/\$25	\$750	MAC	100%/80%/NA/NA	100%/80%/NA/NA	NA					
Low Allocation													
<input type="checkbox"/>	DTXLM14 *1	Passive	\$75/\$75	\$1000	MAC	90%/70%/50%/NA	90%/70%/50%/NA	NA					

3. The Ancillary Products- Dental radio button will default to **No**. In this example, we select **Yes** and select the relevant dental plans.

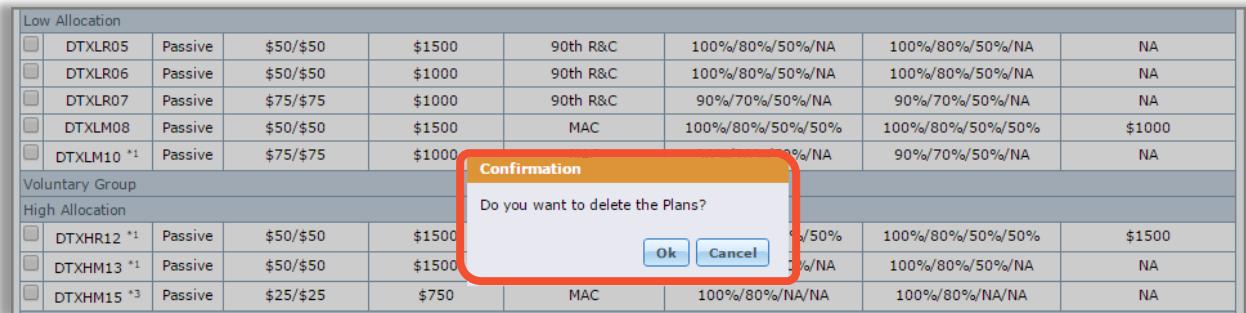


You can only select a specified number of medical, dental or life plans. You will receive the attention message above if the number of plans you select exceeds that number.

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2 How to Enroll a Small Group (Contd.)

III. Plan Selections (contd.)



The screenshot shows a user interface for selecting plans for a small group. It includes three tables: 'Low Allocation', 'Voluntary Group', and 'High Allocation'. A red box highlights a 'Confirmation' dialog box that appears over the 'High Allocation' table. The dialog box contains the text 'Do you want to delete the Plans?' with 'Ok' and 'Cancel' buttons.

Low Allocation								
	Plan ID	Status	Cost	Benefit Type	Eligibility	Plan Details	Plan Details	Plan Details
<input type="checkbox"/>	DTXLR05	Passive	\$50/\$50	\$1500	90th R&C	100%/80%/50%/NA	100%/80%/50%/NA	NA
<input type="checkbox"/>	DTXLR06	Passive	\$50/\$50	\$1000	90th R&C	100%/80%/50%/NA	100%/80%/50%/NA	NA
<input type="checkbox"/>	DTXLR07	Passive	\$75/\$75	\$1000	90th R&C	90%/70%/50%/NA	90%/70%/50%/NA	NA
<input type="checkbox"/>	DTXLM08	Passive	\$50/\$50	\$1500	MAC	100%/80%/50%/50%	100%/80%/50%/50%	\$1000
<input type="checkbox"/>	DTXLM10 *1	Passive	\$75/\$75	\$1000		90%/70%/50%/NA	90%/70%/50%/NA	NA

Voluntary Group								
High Allocation								
	Plan ID	Status	Cost	Benefit Type	Eligibility	Plan Details	Plan Details	Plan Details
<input type="checkbox"/>	DTXHR12 *1	Passive	\$50/\$50	\$1500		90%/50%	100%/80%/50%/50%	\$1500
<input type="checkbox"/>	DTXHM13 *1	Passive	\$50/\$50	\$1500		90%/NA	100%/80%/50%/NA	NA
<input type="checkbox"/>	DTXHM15 *3	Passive	\$25/\$25	\$750	MAC	100%/80%/NA/NA	100%/80%/NA/NA	NA

For any of the plans, if you have selected the **Yes** radio button and then change your selection to **No**, you see a confirmation pop-up asking **Do you want to delete the plans?** Click **OK** if no products are wanted in this category. This action does not remove any benefits, it only collapses the section.

2 How to Enroll a Small Group (Contd.)

III. Plan Selections (contd.)

Life Yes No 4

Select from the following Life plans.

Group Life and AD&D Short Term Disability Dependent Life

Life and STD Benefit Selections ▾

Employer Life Contribution

Enter the Percentage of the Premium that the Employer is going to contribute towards Life Coverage. 100% participation is required if contribution is 100%. The minimum contribution is 25% for Term Life and STD.

*Term Life Premium 5

Life/STD Classes

Define up to 3 classes of employees. For each class, select a multiple of earnings or a flat amount. If a multiple of earnings is selected, an annual salary will be required on the next page. Uncheck classes to remove them from use.

Class Description	Life			Short Term Disability		
	Flat	Salary	Max	Flat	Salary	Max
<input checked="" type="checkbox"/> 1 All Active Full Time	<input checked="" type="radio"/> \$30000 ▼	<input type="radio"/> ▼	<input type="radio"/> 30000	<input type="radio"/> ▼	<input type="radio"/> ▼	<input type="radio"/> ▼
<input type="checkbox"/> 2	<input type="radio"/> ▼	<input type="radio"/> ▼	<input type="radio"/> ▼	<input type="radio"/> ▼	<input type="radio"/> ▼	<input type="radio"/> ▼
<input type="checkbox"/> 3	<input type="radio"/> ▼	<input type="radio"/> ▼	<input type="radio"/> ▼	<input type="radio"/> ▼	<input type="radio"/> ▼	<input type="radio"/> ▼

Term Life Options

Age Reduction Factors:
35% at 65yrs and 50% at 70yrs, 75% at 75yrs, 85% at 80yrs ▼

Previous 6 **Continue**

4. The Life radio button will default to **No**. When the **Yes** radio button is selected, the Life plan options will populate. In this example, we select **Yes**. Click the '**Life and STD Benefit Selections**' link to populate the additional required fields. Only those fields applicable to the selected ancillary products will populate. Now, the Life Selection option will default to 0-9 employees.
5. Enter the Term Life Premium amount. In this example, it is \$100.
6. Click **Continue** to proceed to the **Member Census** screen.

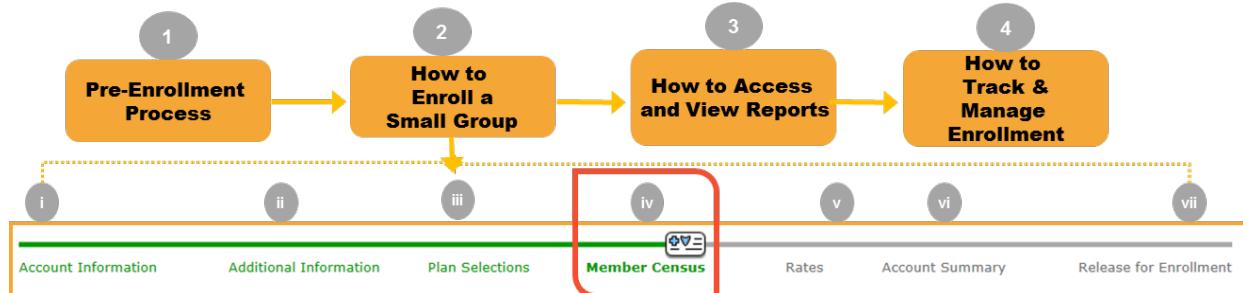


IMPORTANT! You must enter the percentage of the premium that the employer is going to contribute towards Life Coverage. When Life is selected, the Salary Period will default to Annual. On Member Census page, the Salary field minimum value is \$10,000.00.

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2 How to Enroll a Small Group (Contd.)

IV. Member Census



Step iv: Member Census:

You have entered the appropriate plans for your group. Next, you will enter the Member Census either manually or via a file import method using the provided documentation.

View Member	Name	Relationship Code	Gender	Date of Birth	Age	Health Coverage Type	Dental Coverage Type	State	Health Plan Selected	Dental Plan Selected

Enrollment Totals

*# of Employees On Payroll	<input type="text"/>
+ # of New Hires	<input type="text"/>
- # of Temporary Employees	<input type="text"/>
- # of Part Time Employees	<input type="text"/>
- # of Seasonal Employees	<input type="text"/>
- # of Terminated Employees	<input type="text"/>
- # of Employees Serving An Eligibility Waiting Period	<input type="text"/>
= Total Eligible Employees	<input type="text"/>

Health Coverage

# of Employees Enrolling In Health	<input type="text"/> 0
# of Employees Waiving With Other Health Coverage	<input type="text"/> 0
# of Employees Waiving Without Other Health Coverage	<input type="text"/> 0

Dental Coverage

# of Employees Enrolling In Dental	<input type="text"/> 0
# of Employees Waiving With Other Dental Coverage	<input type="text"/> 0
# of Employees Waiving Without Other Dental Coverage	<input type="text"/> 0

Note: BCBS may restrict open enrollment for those accounts not meeting 75 percent participation.

* - Required



IMPORTANT! Information for all eligible employees waiving coverage must be included in order to calculate the participation percentage.

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2 How to Enroll a Small Group (Contd.)

IV. Member Census

Manual Entry

The steps below will walk you through how to manually enter member census.

This screenshot shows the 'Member Census' screen. At the top, there are 'Previous' and 'Continue' buttons. In the center, it says 'Census Count: 0' and has a red box around the 'Add Member' button. Below this, there's a table header with columns: View Member, Name, Relationship Code, Gender, Date of Birth, Age, Health Coverage Type, Dental Coverage Type, State, Health Plan Selected, and Dental Plan Selected. The table body currently shows 0 - 0 of 0 rows.

1. On the Member Census screen, click **Add Member** to manually add the Member Census information.
2. Click **Continue** to go through the Employee Information, Coverage Elections, Dependent Information, Other Coverage, and Employee Application Complete Screens. As members are added, the census count will auto-populate the appropriate number of rows. Let's begin with the Employee Information screen.

- o 2a: **Employee Information:** General census information regarding the employee.

This screenshot shows the 'Enrollment for New Member' screen. It has tabs for 'Employee Information' (highlighted with a red box), 'Coverage Elections', 'Dependent Information', and 'Other Coverage'. Under 'Employee Information', there are sections for 'General Information' and 'Employment Information'. The 'General Information' section includes fields for Last Name (Black), SSN (55555555), Gender (M), Address (409 Arborcrest Dr), City (Richardson), Zip Code (75080), Home/Cell Phone, Email Address, First Name (Joe), Mid Init, Date of Birth (08/08/1980), Address 2, State (Texas), and Business Phone. The 'Employment Information' section includes fields for Marital Status (Please Select), Employment Status (Active), Hire Date (05/05/2015), and Employee Signature Date (06/10/2015). A note at the bottom says '* = Required'. There is also a 'Continue' button at the bottom right.

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2 How to Enroll a Small Group (Contd.)

IV. Member Census (contd.)

Manual Entry (contd.)

Step 2 continued: Add Member: Enrollment for New Member

- Employee Information: The Waiver information is also included in this section. You will have minimal data entry if a member waives all coverage. You are required to select the Waive Reason Code and Name.

Enrollment for New Member

Employee Information	Coverage Elections	Dependent Information	Other Coverage
*Waive All Coverage <input type="radio"/> Yes <input type="radio"/> No *Waive Reason Code: Select Waive Reason Description: [redacted]			

- 2b: Coverage Elections: Enter Health, Dental and Life product option selection at the member level.. When Life selected, the Salary Period will default to Annual. Salary minimum required is 10,000.00.

Enrollment for New Member

Employee Information	Coverage Elections	2b	Dependent Information	Other Coverage
*Health Coverage <input type="radio"/> Yes <input type="radio"/> No *Dental Coverage: <input type="radio"/> Yes <input type="radio"/> No *Life Coverage: <input type="radio"/> Yes <input type="radio"/> No				
Health Coverage *Coverage Type: EO *Type of Coverage: <input type="radio"/> PPO (Participating Provider Options) Network - P500PPO <input type="radio"/> PPO (Participating Provider Options) Network - G515PPO				
Dental Coverage *Coverage Type: EO *Type of Coverage: <input type="radio"/> Dental Plans - DSHR01				
Life Coverage Alert: The Salary entered is less than \$10,000. Annual Salary is required. *Term Life: Y *Job Class Type: All Active Full Time *Salary Period: Annual *Salary: [redacted]				
Previous	<small>* - Required Fields † - Required when BlueCare DHMO has been selected as the Dental Plan</small>			Continue

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2 How to Enroll a Small Group (Contd.)

IV. Member Census (contd.)

Manual Entry (contd.)

Step 2 continued: Add Member: Enrollment for New Member

- o **2c: Dependent Information:** General census information regarding covered dependents is entered here. If Dependents are covered, click **Add Dependent** and the applicable fields will populate.

Enrollment for New Member

Employee Information	Coverage Elections	Dependent Information	Other Coverage
Select Dependents Add Dependent	Dependent Information for New Dependent <div style="border: 1px solid #ccc; padding: 5px; margin-top: 10px;"> *Last Name: <input type="text"/> *Date of Birth: <input type="text"/> (mm/dd/yyyy) *Relationship: <select>Please Select</select> *Gender: <select>Please Select</select> </div> <div style="text-align: right; margin-top: 10px;"> <input type="button" value="Save"/> <input type="button" value="Clear"/> </div>		
Previous	<small>* - Required fields † - Required when HMO has been selected as the Health Plan ‡ - Required when CPO has been selected as the Health Plan</small>		Continue

Enter the dependent information click **Save** and then click **Continue**.

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2 How to Enroll a Small Group (Contd.)

IV. Member Census (contd.)

Manual Entry (contd.)

Step 2 continued: Add Member: Enrollment for New Member

- 2d: Other Coverage:** Any applicable Medicare information for both the employee and dependent are entered here. When the name is selected, additional Medicare information fields will populate. Enter the information and then click **Save** and **Close**.

The screenshot shows the 'Enrollment for New Member' interface. At the top, there are three tabs: 'Employee Information', 'Coverage Elections', and 'Dependent Information'. The 'Coverage Elections' tab is active, indicated by a red box around the '2d' label. On the right side of the header, there is a 'Print' icon and a 'Other Coverage' link, also highlighted with a red box.

In the main content area, under 'Medicare Information for Black Joe', there are several input fields:

- Medicare HIC Number: [Input Field]
- Medicare Eligible (Y/N/U): [Select] dropdown
- Medicare Reason: [Select] dropdown
- Medicare Primary or Secondary: [Select] dropdown

Below these are two rows for plan information:

Plan	Start Date	End Date
Medicare A	[Input Field] (mm/dd/yyyy)	[Input Field] (mm/dd/yyyy)
Medicare B	[Input Field] (mm/dd/yyyy)	[Input Field] (mm/dd/yyyy)

At the bottom left, there are 'Previous' and 'Next' buttons. At the bottom right, there is a 'Save' button and a 'Save and Close' button, also highlighted with a red box.

Footnote at the bottom of the form:

* - Required fields
† - Required when HMO has been selected as the Health Plan
‡ - Required when CPO has been selected as the Health Plan

Note: When HMO coverage is elected, additional fields will become visible to enter the Medical Group and PCP information. If no Medical Group IPA # is entered **597** will default. If the medical group defaults to **597**, the member will not receive or be able to print an ID card and may have difficulty accessing benefits until a medical group is selected. Please be sure to inform the member.



IMPORTANT! PCP and Medical Group information is required. Users may select the Provider Help link to access the provider finder portal.

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2 How to Enroll a Small Group (Contd.)

IV. Member Census (contd.)

Manual Entry (contd.)

Member Census

Census Count: 2 Add Member

	View Member	Name	Relationship Code	Gender	Date of Birth	Age	Health Coverage Type	Dental Coverage Type	State	Health Plan Selected	Dental Plan Selected
1		Joe Black	Employee	M	08/08/1980	36	EO	EO	TX	P600CHC	DTXHR01
2		Matt Brown	Employee	M	04/14/1970	46	EO	EO	TX	P600CHC	DTXHR01

Enrollment Totals

- * # of Employees On Payroll **3**
- + # of New Hires
- # of Temporary Employees
- # of Part Time Employees
- # of Seasonal Employees
- # of Terminated Employees
- # of Employees Serving An Eligibility Waiting Period
- = Total Eligible Employees **4**

Health Coverage

- # of Employees Enrolling In Health
- # of Employees Waiving With Other Health Coverage
- # of Employees Waiving Without Other Health Coverage

Dental Coverage

- # of Employees Enrolling In Dental
- # of Employees Waiving With Other Dental Coverage
- # of Employees Waiving Without Other Dental Coverage

Note: BCBS may restrict open enrollment for those accounts not meeting 75 percent participation.

* - Required

Previous Continue

Step iv: Member Census continued.

- In this example, we have added two members. Next, enter the total # of Employees on Payroll. This is a required field. The fields which follow must also be completed if applicable. The census totals for health and dental coverage will default based on the census information entered.
- After manually entering the information, you can click **Continue** to proceed to the **Rates** screen.

Confirmation

Are you sure you want to delete the Member?

Ok **Cancel**

	View Member	Name	Relationship Code	Gender	Coverage Type	State	Health Plan Selected	Dental Plan Selected
1		Joe Black	Employee	M	EO	TX	P600CHC	DTXHR01
2		Matt Brown	Employee	M	EO	TX	P600CHC	DTXHR01

Note: Members can be deleted by clicking the red 'x' next to their name.

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Account Information Additional Information Plan Selections **Member Census** Rates Account Summary Release for Enrollment

Member Census

Previous Continue

Census Count: 2 Add Member

	View Member	Name	Relationship Code	Gender	Date of Birth	Age	Health Coverage Type	Dental Coverage Type	State	Health Plan Selected	Dental Plan Selected
1	View	Joe Black	Employee	M	05/05/1975	41	EO	EO	IL	PE gruppo	DILHR01
2	View	Matt Brown	Employee	M	02/28/1970	46	EO				DILHR01

1 - 2 of 2

Import Census

Enrollment Totals

- *# of Employees On Payroll
- + # of New Hires
- # of Temporary Employees
- # of Part Time Employees
- # of Seasonal Employees
- # of Terminated Employees
- # of Employees Serving An Eligibility Waiting Period
- = Total Eligible Employees

Health Coverage

- # of Employees Enrolling In Health
- # of Employees Waiving With Other Health Coverage
- # of Employees Waiving Without Other Health Coverage

Dental Coverage

- # of Employees Enrolling In Dental
- # of Employees Waiving With Other Dental Coverage
- # of Employees Waiving Without Other Dental Coverage

Note: BCBS may restrict open enrollment for those accounts not meeting 70 percent participation.

* - Required

Previous Continue

HOW TO ENROLL A SMALL GROUP (CONTD.)

IV. MEMBER CENSUS (CONTD.)

Import Census

2 How to Enroll a Small Group (Contd.)

IV. Member Census (contd.)

Import Census

The screenshot shows the 'Member Census' page. At the top right, there is a green 'Continue' button with the number '1' above it. Below the 'Continue' button is a red rectangular button labeled 'Import Census'. The 'Import Census' button is highlighted with a red circle containing the number '1'. Other visible buttons include 'Previous' (green), 'Census Count' (blue), 'Add Member' (blue), 'Export Census' (blue), and 'Print Import Census' (blue).

Step iv: Member Census (Import Census)

1. To use the Import Census option, click **Import Census**.
2. If you don't have the latest template, click the **Census Import Template** link. Save the file on your local drive.

The screenshot shows the 'Import Census' pop-up window. At the top left is a note: 'Note: Please download the [updated template](#) for AMI division.' A red circle with the number '2' is placed over the 'updated template' link. Below the note is a section titled 'Steps to save the Import Census Template:' which contains four numbered steps. A red box highlights this entire section. At the bottom of the window are buttons for 'Select file to upload' (with 'Choose File' and 'no file chosen' options) and 'Load file' (with a blue arrow icon). A note at the bottom asks if a census already exists and provides 'Overwrite' and 'Append' options.

Note:

- The **Import Census** pop-up window includes a separate link for the **Help** file, which includes separate tabs for each division in the spreadsheet.
- Steps to properly download and save the import file.
- Clear definitions for **Overwrite** and **Append** import file function.
- *Please Note: A new version of the Census Import Template for Enrollment (CITE) will be available in BAP in October, 2017. Please download the new version to your local/network drive.*

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2 How to Enroll a Small Group (Contd.)

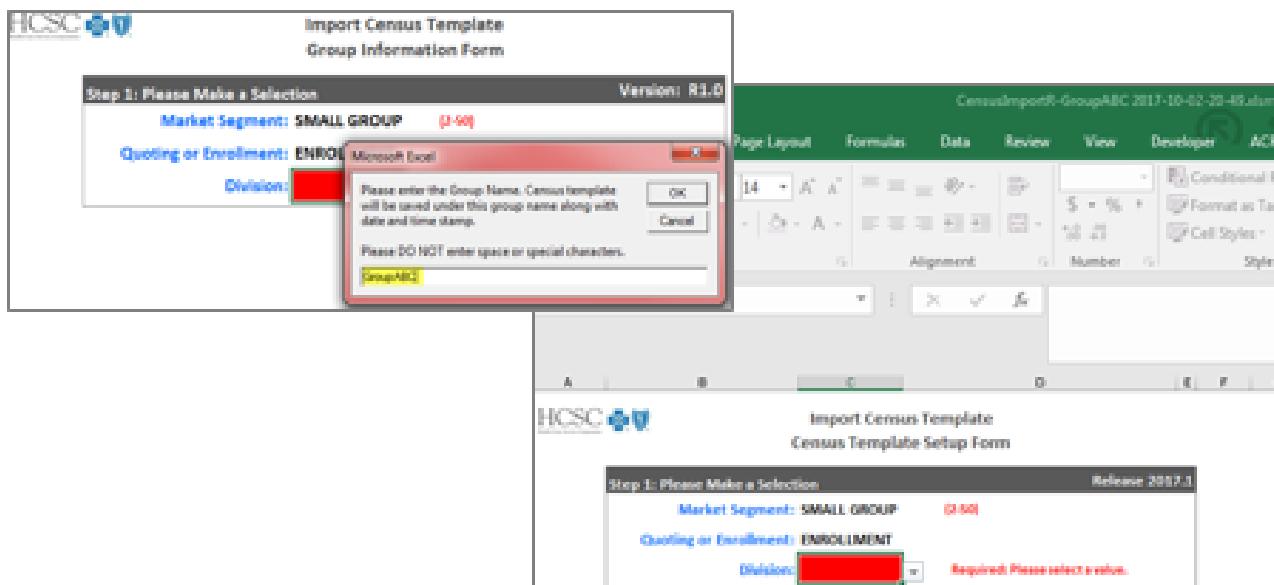
IV. Member Census (contd.)

Import Census (contd.)

Step iv: Member Census (Import Census)

Steps for entering a Group's Census using import census template:

- 1) Open **CITE** and save under the Group's Name.
- 2) Complete **Census Template Setup** form.
- 3) Enter data in **Import Census Template** tab.
- 4) Click **File Save** to validate data.
- 5) An **Error List** will be generated. Correct errors and click **File Save** to re-validate data.
- 6) Upon successful validation, upload **CITE** into **ACA Small Group Enrollment Tool**.



For more information, please refer to **ACA Small Group Enrollment Import Census Template Reference Guide Release 2017.1**.

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2 How to Enroll a Small Group (Contd.)

IV. Member Census (contd.)

Import Census (contd.)

Import Census

Note: Please download the [updated](#) template for TX division.

Download the Census Import Template or view an example of a formatted import file. Please refer to the Help file for additional details regarding the Import Census spreadsheet.

Steps to save the Import Census Template:

1. Click on the Census Import Template link and Save the file on your desktop.
2. Open saved Census Import Template, from the saved location, and select the appropriate Division from the drop down options. Click Continue.
3. Save to your desktop.
4. The Census Import Template is now ready to input the census information.

Select File to upload Census Impor...-11-18.xlsm 4

A census already exists. Do you wish to overwrite or append to the existing census?

Overwrite - This option will replace previously entered census information.
 Append - This option will add to existing census information

5

4. Click **Choose File** and select the appropriate file.
5. Click **Load File**.

Import Census

Download the Census Import Template or view an example of a formatted import file. Please refer to the Help file for additional details regarding the Import Census spreadsheet.

Steps to save the Import Census Template:

1. Click on the Census Import Template link and Save the file on your desktop.
2. Open saved Census Import Template, from the saved location, and select the appropriate Division from the drop down options. Click Continue.
3. Save to your desktop.
4. The Census Import Template is now ready to input the census information.

Select File to upload: Census Impor...-11-18.xlsm

A census already exists. Do you wish to overwrite or append to the existing census?
 Overwrite - This option will replace previously entered census information.
 Append - This option will add to existing census information

Note: "Override and Import" will upload the census ignoring the warning messages. Override and Import Cancel

Attention

✖ indicates Error Message
⚠ indicates Warning Message

Note: The Import Census pop-up will also include the following:

- A clarification for **Override and Import** upload option.
- A legend key for warning and error symbols

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2 How to Enroll a Small Group (Contd.)

IV. Member Census (contd.)

Import Census (contd.)

The screenshot shows the 'Import Census' page with the following details:

- Select File to upload:** Choose File Census Import...-11-18.xlsx
- A census already exists. Do you wish to overwrite or append to the existing census?**
 - Overwrite - This option will replace previously entered census information.
 - Append - This option will add to existing census information
- Note:** "Override and Import" will upload the census ignoring the warning messages.
- Buttons:** Load File, Override and Import (highlighted with a red box), Cancel.

A callout bubble labeled **6** points to the 'Override and Import' button.

Attention message box:

- Attention**
- !**
- Indicates Error Message**
- !** indicates Warning Message

6. Click **Override and Import**. The census information will automatically populate into the **Member Census** page.
7. Enter the total # of Employees on Payroll.
8. Click **Continue** to proceed to the **Rates** screen.

The screenshot shows the 'Member Census' page with the following details:

- Census Count:** 2 - Add Member
- Employee List:**

View Member	Name	Relationship Code	Gender	Date of Birth	Age	Health Coverage Type	Dental Coverage Type	State	Health Plan Selected	Dental Plan Selected
View	Joe Black	Employee	M	08/08/1980	36	EO	EO	TX	P600OHC	DTXH01
View	Matt Brown	Employee	M	04/14/1970	46	EO	EO	TX	P600OHC	DTXH01
- Enrollment Totals:**
 - *# of Employees On Payroll: **2** (highlighted with a red box)
 - + # of New Hires
 - # of Temporary Employees
 - # of Part Time Employees
 - # of Seasonal Employees
 - # of Terminated Employees
 - # of Employees Serving An Eligibility Waiting Period
 - = Total Eligible Employees: **2**
- Health Coverage:**
 - # of Employees Enrolling In Health: **2**
 - # of Employees Waiving With Other Health Coverage: **0**
 - # of Employees Waiving Without Other Health Coverage: **0**
- Dental Coverage:**
 - # of Employees Enrolling In Dental: **2**
 - # of Employees Waiving With Other Dental Coverage: **0**
 - # of Employees Waiving Without Other Dental Coverage: **0**
- Buttons:** Continue (highlighted with a red box), Previous.

A callout bubble labeled **7** points to the 'Payroll Employee Count' field, and another callout bubble labeled **8** points to the 'Continue' button.

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2 How to Enroll a Small Group (Contd.)

IV. Member Census (contd.)

Import Census (contd.)



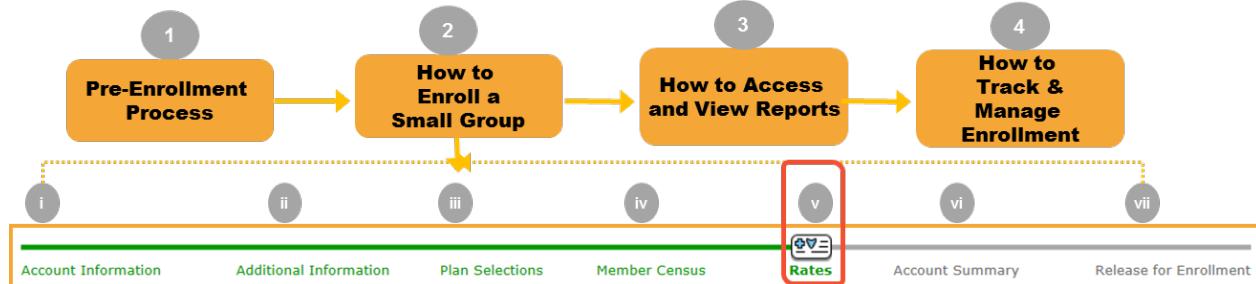
Helpful Tips

- 1) New census template will not work with Excel 2009 and older version. Please use the old import census template or enter census in ACA Enrollment Tool directly.
- 2) If macros are not enabled, you will need to click Enable Content button at the top or change your Excel Trust setting (Please refer to the training manual for instructions).
- 3) Each time you open CITE, you will be prompted to enter group name. This entry is used to save the file under that group's name along with date and time stamp. The original CITE file remains intact. For next group's census, open the original CITE file.
- 4) Entire cell will be highlighted in Red for required entry and if a value is invalid cells will be highlighted in Yellow.
- 5) If you are typing in data, value will be validated on Enter. A error message displays with Retry and Cancel button. Retry return you to the cell for edit and Cancel wipes out the typed value.
- 6) Before copying from an external source and pasting data onto CITE, please make sure the source format matches to the required format for the CITE census column.
- 7) Be sure to validate data once data entry is complete by clicking on File Save. A separate Error List tab will be generated. To fix the errors, you can toggle back and forth from Import Census tab and Error List tab.

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2 How to Enroll a Small Group (Contd.)

V. Rates



Step v: Rates

Electronic Funds Transfer (EFT) is required for Initial premium payment. On the Rates screen, enter the payment information.

Electronic Funds Transfer (EFT) is used to transfer the amount to Blue Cross and Blue Shield of TX”.

Rates

Previous **Continue**

Electronic Payment Information

The initial binder premium payment will be electronically transferred (EFT) to Blue Cross and Blue Shield of Texas.

The Electronic Funds Transfer (EFT) binder premium payment will only apply to the health and dental plans selected. The initial premium for life products, if purchased, will be requested on the first bill from Dearborn National. Do not include a binder premium payment for life products as part of the EFT.

*Bank Account Number: <input type="text"/>	*Bank Account Number Confirmation: <input type="text"/>
*Bank Routing Number: <input type="text"/>	*Bank Routing Number Confirmation: <input type="text"/>
*Bank Name: <input type="text"/>	*Account Holder Name: <input type="text"/>

Note: The EFT draw will occur after the case is approved and the Welcome Letter becomes available. The EFT will usually happen within 24-48 hours of approval. Please notify the group of the expediency of this transaction.

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2 How to Enroll a Small Group (Contd.)

V. Rates (contd.)

1. You will need to complete the group's Bank Account Number and Bank Routing Number information. These are required fields. The Bank Routing Number will only accept numerical values and should be equal to 9 digits. The tool will confirm that these critical required fields are entered correctly. If there is a mismatch, an error message will be displayed: "The Bank Account Numbers do not match." or
2. "The Bank Routing Number is invalid."

Attention

The Bank Account Numbers do not match.

Attention

The Bank Routing Number is invalid.

Note: The EFT binder premium payment will only apply to the health and dental plans selected. The initial premium for life products, if purchased, will be requested on the first bill from Dearborn National. Do not include a binder premium payment for life products as part of the EFT.

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2 How to Enroll a Small Group (Contd.)

V. Rates (contd.)

2. Next, you are required to edit the Bank Name and populate the Account Holder Name which are also mandatory fields.

[View URL Request/Response XML](#)

Electronic Payment Information

The initial binder premium payment will be electronically transferred (EFT) to Blue Cross and Blue Shield of Texas.

The Electronic Funds Transfer (EFT) binder premium payment will only apply to the health and dental plans selected. The initial premium for life products, if purchased, will be requested on the first bill from Dearborn National. Do not include a binder premium payment for life products as part of the EFT.

*Bank Account Number: <input type="text" value="123456789"/>	*Bank Account Number <input type="text" value="123456789"/> Confirmation: <input type="text"/>
*Bank Routing Number: <input type="text" value="01000013"/>	*Bank Routing Number <input type="text" value="01000013"/> Confirmation: <input type="text"/>
*Bank Name: <input type="text" value="Texas Test"/>	*Account Holder Name: <input type="text" value="Fred Texas Test"/>

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2 How to Enroll a Small Group (Contd.)

V. Rates (contd.)

3. The sub-section under Electronic Payment Information is the Billing Information. This section includes the following required fields: Address1, Address 2, City, State, Country, and Zip Code. Enter all the details in the required fields.

Electronic Payment Information

The initial binder premium payment will be electronically transferred (EFT) to Blue Cross and Blue Shield of Texas.

The Electronic Funds Transfer (EFT) binder premium payment will only apply to the health and dental plans selected. The initial premium for life products, if purchased, will be requested on the first bill from Dearborn National. Do not include a binder premium payment for life products as part of the EFT.

*Bank Routing Number: <input type="text" value="010000013"/>	*Bank Routing Number <input type="text" value="010000013"/> Confirmation: <input type="text"/>
*Bank Name: <input type="text" value="Texas Test"/>	*Account Holder Name: <input type="text" value="Fred Texas Test"/>

Billing Address/Contact Information

*Address 1: <input type="text" value="1 Hill"/>	Address 2: <input type="text"/>
*City: <input type="text" value="Austin"/>	*State: <input type="text" value="Texas"/>
Country: <input type="text" value="USA"/>	*Zip Code: <input type="text" value="75080"/>
*Payment Amount: <input type="text" value="1000.00"/>	*Payment Amount Confirmation: <input type="text" value="1000.00"/>
Transaction Number: <input type="text"/>	
Payment Status: Not Processed	

A minimum of 90% of the estimated first month's premium is required before processing can continue. If less than 90% of the estimated first month's premium is remitted, the case will be returned.

In order to secure coverage with BCBS, a binder payment is required. The information entered on this page will be used to debit the employer's account only AFTER underwriting has approved the case. This is a one-time payment to secure coverage. All payments for monthly bills must be arranged in BlueAccess for Employer's EFT or paid via check.

Let's discuss the **Billing Address/Contact Information** section. The Payment Amount is a required field and accepts value in dollars with decimal. For example: \$1000.00. You can also view the following notification on the screen. The Payment Amount must be input a second time to verify accuracy. *"A minimum of 90% of the estimated first month's premium is required before processing can continue. If less than 90% of the estimated first month's premium is remitted, the case will be returned"* message on the screen.

Another required field is the **Transaction Number**. This field will remain blank before case is released for enrollment. This field will be populated once the Underwriting approves the case and the tool sends the payment details for processing.

Note: When filling in the billing address/ contact information, enter the address and contact details for the specific group.

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2 How to Enroll a Small Group (Contd.)

V. Rates (contd.)

The Payment Status field has the following statuses:

- **Not Processed:** Is displayed, until the payment is processed at the vendor and success/fail message is returned.
- **Success:** Is displayed once the EFT payment details are transferred to Alacrity.
- **Fail:** Is displayed only if the Bank Routing Number, entered into the system and transferred to our payment vendor, is not valid.

Transaction Number:

Payment Status: Not Processed

A notification is displayed when you access this screen: *In order to secure coverage with BCBS, a binder payment is required. The information entered on this page will be used to debit the employer's account only AFTER underwriting has approved the case. This is a one-time payment to secure coverage. All payments for monthly bills must be arranged in Blue Access for Employer's EFT or paid via check.*

A minimum of 90% of the estimated first month's premium is required before processing can continue. If less than 90% of the estimated first month's premium is remitted, the case will be returned.

In order to secure coverage with BCBS, a binder payment is required. The information entered on this page will be used to debit the employer's account only AFTER underwriting has approved the case. This is a one-time payment to secure coverage. All payments for monthly bills must be arranged in BlueAccess for Employer's EFT or paid via check.

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2 How to Enroll a Small Group (Contd.)

V. Rates (contd.)

For unsuccessful Electronic Funds Transfer (EFT) payments, an automated email will be sent to the following recipients:

GA Cases

To: GA CC: N/A BCC: MktgTechEnrollment@bcbsil.com

NON-GA Cases

To: Broker CC: N/A BCC: MktgTechEnrollment@bcbsil.com

From: Blue Cross Blue Shield of Texas [<mailto:none@bcbstx.com>]
Sent: Wednesday, October 04, 2017 3:49 PM
To: Amy Stevens <Amy_Stevens@bcbsil.com>
Cc: Sucheta Mungale <Sucheta_Mungale@bcbstx.com>
Subject: AMY TX10.4 INT Account # 220035 - Unsuccessful Electronic Funds Transfer (EFT) Payment

Blue Cross and Blue Shield of Texas (BCBSTX) was unable to process the one time Electronic Funds Transfer (EFT) Payment for AMY TX10.4 INT Account # 220035.

When the EFT Payment is unsuccessful the initial premium payment will be due once the initial bill is received by the group.

For additional information regarding this transaction, please reference the log located in the ACA SG Enrollment Tool.

Please do not reply to this email. For questions, please contact the Service Center at 1-800-399-5831.

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2 How to Enroll a Small Group (Contd.)

V. Rates (contd.)

4. The Rating Model is displayed. You need to select the Rating Model either Member Level or 4-Tier Composite. In this example, we select **Member Level**. After making your selection, you can click **Print** to print the rates.

Rating Model

Member Level 4-Tier Composite 4

ATTENTION: There are two billing options to select from
 1) Member level age rates OR
 2) Composite rates.

Composite rates are calculated by aggregating the total premium across a four tier format. Important to note that billing changes are only allowed at policy anniversary date. Please carefully select the desired billing format for your enrolling client.

Member Level Rates															
Employer Name: TEST_TX_UG				Plan: P600CHC				Case ID: 13466							
Effective Date: 10/15/2016		Employer Zip Code: 75080		Employer County: Dallas											
Member Rates															
Age	Total Monthly Health Cost*	Age	Total Monthly Health Cost*	Age	Total Monthly Health Cost*	Age	Total Monthly Health Cost*	Age	Total Monthly Health Cost*	Age	Total Monthly Health Cost*				
<21	\$311.40	28	\$533.05	36	\$603.18	44	\$685.07	52	\$957.24	60	\$1,330.92				
21	\$490.39	29	\$548.75	37	\$607.10	45	\$708.12	53	\$1,000.39	61	\$1,377.99				
22	\$490.39	30	\$556.59	38	\$611.03	46	\$735.58	54	\$1,046.98	62	\$1,408.89				
23	\$490.39	31	\$568.36	39	\$618.87	47	\$766.48	55	\$1,093.57	63	\$1,447.63				
24	\$490.39	32	\$580.13	40	\$626.72	48	\$801.79	56	\$1,144.08	64	\$1,471.17				
25	\$492.35	33	\$587.49	41	\$638.49	49	\$836.60	57	\$1,195.08	65+	\$1,471.17				
26	\$502.16	34	\$595.33	42	\$649.77	50	\$875.84	58	\$1,249.51						
27	\$513.93	35	\$599.26	43	\$665.46	51	\$914.58	59	\$1,276.48						

* - Total Monthly Health Cost includes the effects of Health Insurer and Reinsurance Fees, plus any federal and state taxes applicable to these fees.

Census						
	Name	Relationship Code	Date of Birth	Age	Coverage Type	State
1	Joe Black	Employee	08/08/1980	36	EO	TX
2	Matt Brown	Employee	04/14/1970	46	EO	TX
						Total: \$1,338.76

* - Total Monthly Health Cost includes the effects of Health Insurer and Reinsurance Fees, plus any federal and state taxes applicable to these fees.
 Estimated Health Insurer & Reinsurance Fees = **\$36.00**

Print



ATTENTION: There are two billing options to select from
 1) Member level age rates OR 2) Composite rates.
 Select a rating model, and click the magnifying glass in the **Rates** column next to the product to view rates and Census information.

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2 How to Enroll a Small Group (Contd.)

V. Rates (contd.)

Composite Rates Example

Composite Rates						
Employer Name: TEST_TX_UG		Plan: P600CHC		Case ID: 13466 Print		
Effective Date: 10/15/2016		Employer Zip Code: 75080		Employer County: Dallas		
Rate Table						
4-Tier Rates						
Employee Only	Employee + Spouse *	Employee + Child *	Employee + Family *			
\$669.38	\$1,338.76	\$1,338.76	\$2,008.14			
<small>* The Composite Rates shown in the above 4Tier Rates table are specific to the plan shown in the header section and based on the census entered AND includes the effects of Health insurer and Reinsurance Fees,plus any Federal and State taxes applicable to these fees.</small>						
Census						
	Name	Relationship Code	Date of Birth	Age	Coverage Type	State
1	Joe Black	Employee	08/08/1980	36	EO	TX
2	Matt Brown	Employee	04/14/1970	46	EO	TX
					Total:	\$1,338.76
<small>* - Total Monthly Health Cost includes the effects of Health Insurer and Reinsurance Fees, plus any federal and state taxes applicable to these fees. Estimated Health Insurer & Reinsurance Fees = \$36.00</small>						
Print						

Note: Composite rates are calculated by aggregating the total premium across a four tier format. Important to note that billing changes are only allowed at policy anniversary date. Please carefully select the desired billing format for your enrolling client.

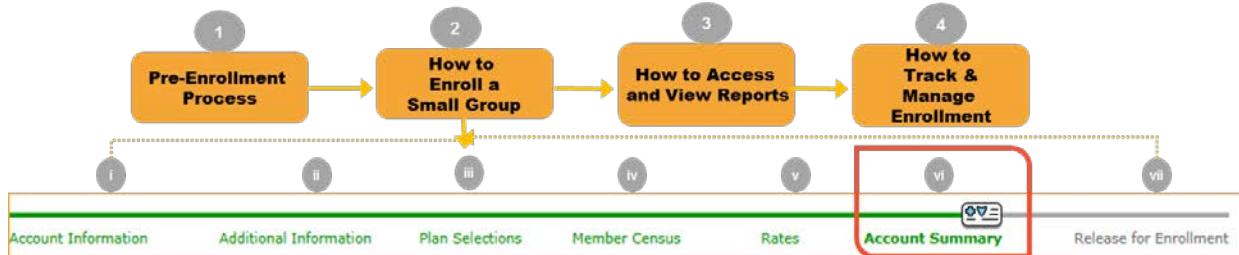
The screenshot shows a software interface with a navigation bar at the top. The 'Rates' tab is selected. Below the navigation bar, there are several tabs: Account Information, Additional Information, Plan Selections, Member Census, Rates, Account Summary, and Release for Enrollment. Under the 'Rates' tab, there are two buttons: 'Previous' and 'Continue'. A red box surrounds the 'Continue' button, which is circled with the number '5' above it.

- Click **Continue** to proceed to the **Account Summary** screen.

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2 How to Enroll a Small Group (Contd.)

VI. Account Summary



Step vi: Account Summary:

The **Account Summary** screen allows you to review all of the input data by section. Review the information you have entered and revise if needed. Separate panels with scroll bars display key information from previous screens. Click **Change** in each panel to view the relevant page if you want to make any edits. If changes are made, click **Continue** to go back to the **Account Summary** screen. This ensures that all edits have been saved and rates have been adjusted if necessary.

The screenshot shows the 'Account Summary' screen with several sections and input fields. At the top, there are tabs for Account Information, Additional Information, Plan Selections, Member Census, Rates, Account Summary (which is selected and highlighted in blue), and Release for Enrollment. The 'Account Summary' section contains the following data:

- General Information:**
 - Employer's Legal Name: TEST_TX_UG
 - Employer ID Number (EIN): 555555555
 - SIC Code: 0111-Wheat farms
 - Policy Effective Date: 10/15/2016
 - Case Submitted to BCBS: 10/10/2016
 - Does this group cover domestic partners?: No
 - Is Group subject to COBRA?: No
 - COBRA Administration?: No
- Blue Access for Employers (BAE):**
 - Contact Name: [redacted]
 - Phone (numbers only): Ext. [redacted]
 - Contact Title: [redacted]
 - E-Mail Address: [redacted]
- Employee Retirement Income Security Act (ERISA):**
 - Current Carrier Health: Cigna Life Insurance Co.
- Additional Information:**
 - Waive the waiting period on initial enrollment: Yes
 - The Eligibility Date for an employee who becomes eligible after the Effective date of the Group's Health Insurance Plan is determined by the 15th day of the month following 60 days of employment.
- HSA Vendor Selection:**
 - HSA Vendor Selected: [redacted]

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2 How to Enroll a Small Group (Contd.)

VI. Account Summary (contd.)

The **Electronic Payment Information** is now displayed under the **Plan Selections** and Header section. Under this section, all the data that was entered on the **Rates** screen will be displayed.

1. Click **Continue** to move to the **Release for Enrollment** screen.

This screenshot shows the 'Electronic Payment Information' section of a software interface. At the top, there's a link to 'View URE Request/Response XML'. Below it, a note states: 'The initial binder premium payment will be electronically transferred (EFT) to Blue Cross and Blue Shield of Texas.' A detailed note below explains: 'The Electronic Funds Transfer (EFT) binder premium payment will only apply to the health and dental plans selected. The initial premium for life products, if purchased, will be requested on the first bill from Dearborn National. Do not include a binder premium payment for life products as part of the EFT.' The form contains several input fields:

- *Bank Account Number: 123456789
- *Bank Routing Number: 010000133
- *Bank Name: Texas Test
- *Bank Account Number Confirmation: 123456789
- *Bank Routing Number Confirmation: 010000133
- *Account Holder Name: Fred Test
- *Address 1: 11 Jan Street
- *City: Austin
- Country: USA
- *Address 2: (empty)
- *State: Texas
- *Zip Code: 73301
- *Payment Amount: 100.00
- *Payment Amount Confirmation: 100.00
- Transaction Number: (empty)
- Payment Status: Not Processed

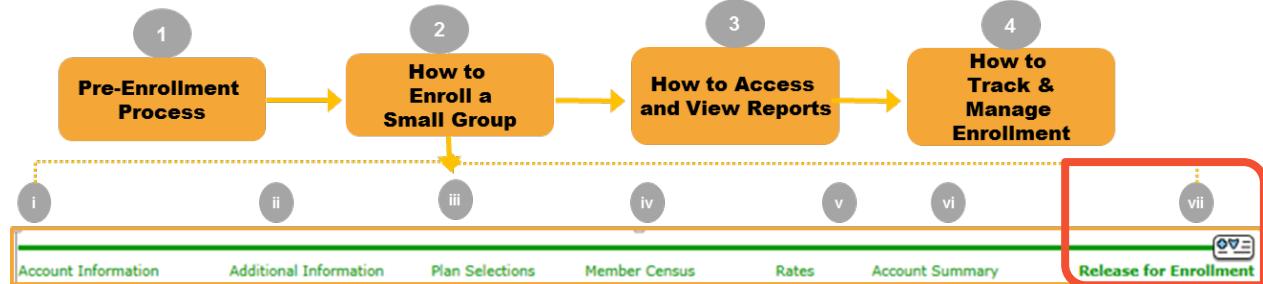
Note: You should be able to view the Electronic Funds Transfer (EFT) Payment Details document under the **Reports** tab on the **Account Summary** screen. You should also be able to view it irrespective of the status of the case.

You should be able to view the fields and their values in this document without been masked except for the Bank Account Number and the Bank Routing Number.

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2 How to Enroll a Small Group (Contd.)

VII. Release for Enrollment



Step vii: Release for Enrollment

Based on the default required documents, under the **Documents Needed for Enrollment** section, the list will populate. Documents will be required based on the selections made during the data entry process. In order to release the case for enrollment successfully, these documents must be attached.

Document	Status	Action
* Benefit Program Application (BPA) for New Small Groups 2-50	Missing	Signature Required
* Employer Group Information (EGI) Form	Missing	Signature Required
* Enrollment Application/Change Form	Missing	Signature Required
* State filed proof of business	Missing	
* Wage & Tax Statement/Proof of Wages	Missing	
Affidavit of Domestic Partnership		Signature Required
BenefitWallet Discovery Form		Signature Required
Dependent State Continuation of Coverage Form		Signature Required
Disabled Dependent Certification Form		Signature Required

I confirm that all uploaded documents requiring a signature have been signed.

- Click **View/Attach Documents**. This will populate a pop-up window, allowing the user to search system files to find the appropriate document.

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2 How to Enroll a Small Group (Contd.)

VII. Release for Enrollment (contd.)

Before proceeding to the next steps, let's discuss the **Documents Needed for Enrollment** section. This section easily identifies Required and Optional Documents. Required documents are identified by **bolded red font** and asterisks.

The “Missing” or “Attached” indicator will only appear for the required documents.

Documents Needed for Enrollment	
* Benefit Program Application (BPA) for New Small Groups 2-50	<input checked="" type="checkbox"/> Attached
* Employer Group Information (EGI) Form	<input checked="" type="checkbox"/> Attached
* Enrollment Application/Change Form	<input checked="" type="checkbox"/> Attached
* Wage & Tax Statement/Proof of Wages	<input checked="" type="checkbox"/> Attached
Affidavit of Domestic Partnership	<input type="checkbox"/> Signature Required
BenefitWallet Discovery Form	<input type="checkbox"/> Signature Required
Dependent State Continuation of Coverage Form	<input type="checkbox"/> Signature Required
Disabled Dependent Certification Form	<input type="checkbox"/> Signature Required
Employer Representative Authorization (ERA)	<input type="checkbox"/> Signature Required
HSA Bank Discovery Form	

Note: Beginning with January 2017 Effective Dates, the **Composite Rate Billing Method Declaration Form** will no longer be a required document to submit when you select 4-Tier Composite Billing as your Rating Method. This information will be captured on the new BPS.

2 How to Enroll a Small Group (Contd.)

VII. Release for Enrollment (contd.)

2. Click **Browse** and locate the appropriate system folder and file.
3. Select the document type from the **Document Type** drop-down list.
4. Click **Attach File**. The document shows in the **Existing Attached Documents** section. If the wrong document has been attached, use **Delete Document** to remove the document.

The screenshot shows the 'Attachments' section of a web application. At the top, there is a 'File' input field with 'Choose Files' and 'No file chosen' buttons, circled with a red box and labeled '2'. Next to it is a 'Document Type' dropdown menu set to 'Please Select', also circled with a red box and labeled '3'. Below these fields is a 'Description' input field. A large red box encloses the entire 'Document Type' dropdown and 'Description' field, and another red box encloses the 'File' input field and 'Document Type' dropdown. At the bottom of the 'File' input field is a 'Attach File' button, circled with a red box and labeled '4'. Below this is a table titled 'Existing Attached Documents'.

Existing Attached Documents			
File	Date/Time Stamp	Document Type	Description
il_bpa_2_50.doc	09/06/2017 08:24:08	BENEFIT PROGRAM APPLICATION (BPA) FOR NEW SMALL GROUPS 2-50	▼
22997_small_group_standard_health_application (1).pdf	09/06/2017 08:24:07	EMPLOYER GROUP INFORMATION (EGI) FORM	▼
il-small-group-extension-form-v4.pdf	09/06/2017 08:24:07	WAGE & TAX STATEMENT/PROOF OF WAGES	▼
group_info_form.pdf	09/06/2017 08:24:07	ENROLLMENT APPLICATION/CHANGE FORM	▼

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2 How to Enroll a Small Group (Contd.)

VII. Release for Enrollment (contd.)

Attachments

Select Browse to find a file(s) to attach. Uploaded files must be less than 50MB.

File	Document Type	Description
Choose Files No file chosen	Please Select	
Attach File		

Existing Attached Documents

File	Date/Time Stamp	Document Type	Description
il_bpa_2_50.doc	09/06/2017 08:24:08	BENEFIT PROGRAM APPLICATION (BPA) FOR NEW SMALL GROUPS 2-50	▼
22997_small_group_standard_health_application (1).pdf	09/06/2017 08:24:07	EMPLOYER GROUP INFORMATION (EGI) FORM	▼
il-small-group-extension-form-v4.pdf	09/06/2017 08:24:07	WAGE & TAX STATEMENT/PROOF OF WAGES	▼
group_info_form.pdf	09/06/2017 08:24:07	ENROLLMENT APPLICATION/CHANGE FORM	▼

You can also upload multiple documents, if required. When uploading multiple documents you can to assign multiple Document Types to the documents.

Important information about attaching multiple documents

- You must select one Document Type in order to attach the selected documents. This document type will be applied to all the attachments. Click **Attach**.
- Use the drop-down arrows next to the specific document to change the type
- After changing the necessary document types, click **Save**. When done, click **X** to return to the **Release for Enrollment** screen.

Note: The tool is compatible to support Zip files. A zip file may be uploaded and the applicable doc type selected. (i.e. employee applications) However, keep in mind that all required documents must be attached and document type selected, in order to release the group.

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2 How to Enroll a Small Group (Contd.)

VII. Release for Enrollment (contd.)

5. Once you close the Attachments window, you are re-directed to the **Release for Enrollment** screen. Select the '**I confirm that all uploaded documents requiring a signature have been signed**' check box.
6. Click **Release** to release the group to Underwriting for review.
7. Confirm your selections. These include: Rating Model, Plans, Payment Method and payment amount, and the Effective Date for the group. Click **Confirm**.

5

6

I confirm that all uploaded documents requiring a signature have been signed. Release

Confirm Release for Enrollment

I confirm that,

I have selected Member Level Rating model.

I have selected the below plan(s) for the group.
P600CHC

I have selected the effective date 10/01/2017 for the group.

Electronic Funds Transfer (EFT) will be used to transfer the dollar amount of 10.00 to Blue Cross and Blue Shield of TX.

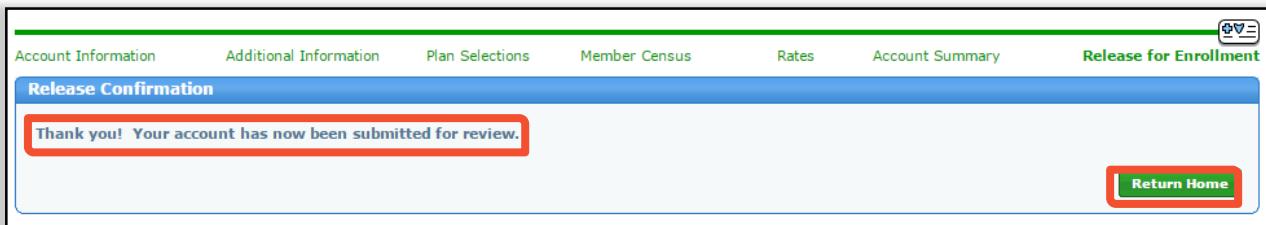
Confirm Cancel

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2 How to Enroll a Small Group (Contd.)

VII. Release for Enrollment (contd.)

After confirming, you receive a message saying “**Thank you! Your account has been submitted for review.**” At this point you can click **Return Home** to return to the home page.



Once you click **Release**, the group is in a read-only status. No additional changes can be made until after the Underwriter has reviewed the case. If the Underwriter requires additional information, an email will be sent to the address entered in the Producer section during the enrollment process. The case will then be open to you to go back in to the tool and enter/upload missing information or documents. Please add, edit or attach the requested data, then return the case to BCBS. If you require changes, prior to review or approval, please contact your sales representative as soon as possible.

Note:

- You need to ensure that all information is correct before submitting to BCBS. The only way to correct information entered into the system is if the Underwriter returns the case to the user for **More Info Required** with the reason code of **Data Change Needed**. Once submitted, you cannot edit data.
- The EFT draw will occur after the case is approved and the Welcome Letter becomes available. The EFT will usually happen within 24-48 hours of approval. Please notify the group of the expediency of this transaction.

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2 How to Enroll a Small Group (Contd.)

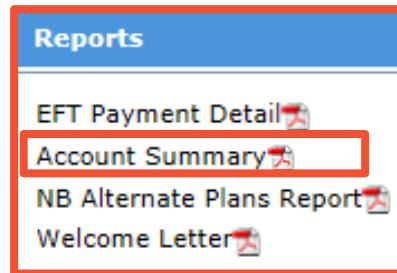
VI. Account Summary Report

Let's discuss the Account Summary Report.

Now, the **Account Summary Report** is available on the Release for Enrollment screen. Click **Reports** to view the report.

It is recommended that this document be reviewed and approved by the client for accuracy and to ensure that all plans, rates, and census information are accurate BEFORE the case is released. You can also view and print the report after the case has been approved.

The Account Summary Report is **not** emailed. Please access it through **Reports** on the online tool.



Account Summary

October 10, 2016
ITG Test Broker2
901 South Central Expressway
Richardson, TX 75080

RE: TEST_TX_UG
Account #190797
Effective Date: 10/15/2016

General Information:

Legal Name of Company: TEST_TX_UG	Employer Identification Number (EIN): 5555555555
Standard Industry Code (SIC): 0111	Description of SIC (Nature of Business): Wheat farms
Policy Effective Date: 10/15/2016	County: Dallas
Domestic Partner: N	TEFRA: N
ERISA: N	Waiting Period: 60
COBRA: N	COBRA Admin: N
Public Entity: In-Vitro: N	

Health Benefit Summary:

Blue Choice PPO Network - P6000HC: PLATINUM Plan; \$25/\$45 Office Copay/Specialist, \$250/\$500 DED In/Out; 80%/80% Coins In/Out; NA Coins Stopless In/Out; \$0/\$10/\$35/\$75/\$150 Pharmacy, \$300/80% ER Copay/ER Coins; \$75 Urgent Care Copay, \$150/\$250 IP In/Out; \$100/\$200 CP Surg In/Out; 70%/70% Pct Dental In/Out

Blue Choice PPO Network - P6010HC: PLATINUM Plan; \$25/\$45 Office Copay/Specialist, \$1250/\$2500 DED In/Out; 100%/100% Coins In/Out; NA Coins Stopless In/Out; \$0/\$10/\$35/\$75/\$150 Pharmacy; \$300/100% ER Copay/ER Coins; \$75 Urgent Care Copay; \$150/\$250 IP In/Out; \$100/\$200 CP Surg In/Out; 70%/70% Pct Dental In/Out

Note: Make sure that you review the data for accuracy prior to releasing the case. Once the case is released, no changes can be made. If additional information is required, you will be notified and your case will be opened to you to add the missing or requested information.

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2 How to Enroll a Small Group (Contd.)

VII. Release for Enrollment (contd.)

The **Documents List** button in the header provides access to the list of required and optional documents required for enrollment. You can click where it says “Some of these forms are available for download [here](#)”. The BAP Downloadable Forms for Small Group Products will open in a new browser. From this browser, forms may be opened and saved for attachment in enrollment.

Documents List

Please remember to gather these documents to attach at the end of the enrollment process. Some of these forms are available for download [here](#).

Required Documents	
Benefit Program Application (BPA) for New Small Groups 2-50	
Employer Group Information (EGI) Form	
Enrollment Application/Change Form	
State filed proof of business	
Wage & Tax Statement/Proof of Wages	

Optional Documents	
Affidavit of Domestic Partnership	
BenefitWallet Discovery Form	
Dependent State Continuation of Coverage Form	
Disabled Dependent Certification Form	
Employer Representative Authorization (ERA)	
HSA Bank Discovery Form	
Other	
Small Group Certificate of Common Ownership	
Supplemental Employment Verification Form	
Texas Nine (9) Month State Continuation of Insurance Application Form	

The screenshot shows the BlueCross BlueShield of Texas website. At the top, there's a navigation bar with links for Home, Get a Quote, Pharmacy, Forms, Provider Finder®, and Contact Us. To the right of the navigation is a 'Log In' button and a 'Company Information' link. Below the navigation, there's a search bar labeled 'FormFINDER' with a 'Find' button, and links for 'Advanced Search' and 'View All Forms'.

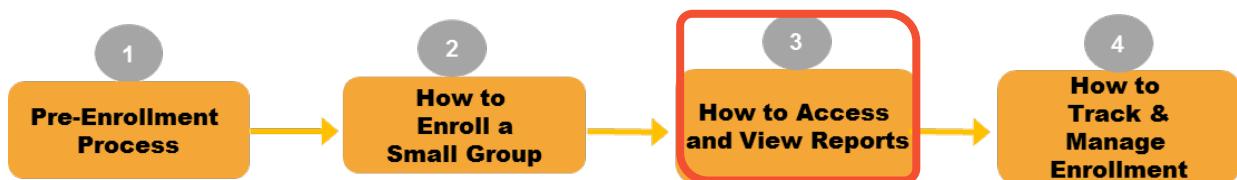
In the center, there's a section titled 'Downloadable Forms for Small Group Products'. It includes a sub-section for 'Forms for Individual Products (Under Age 65)' which lists 'Forms for Small Group Products (2-50)', 'Forms for Mid-Market Group Products (51-150)', 'Forms for Large Group Products (151+)', and 'Forms for Medicare Products'.

Below this, there's a table titled 'SMALL GROUP FORMS (Groups of 2-50)'. The table has columns for 'Stock # / Date', 'Enrollment Forms and Change Forms', and 'Texas Form #'. It lists several forms with their respective stock numbers and descriptions:

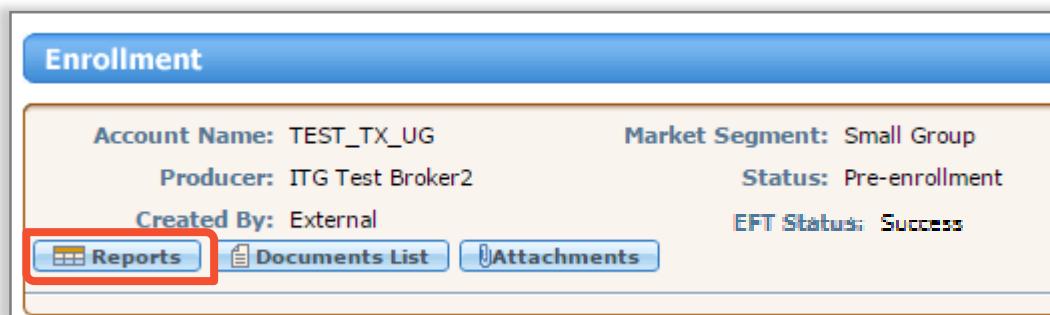
- 45331.0716 - [Affidavit of Domestic Partnership](#) - N/A
- 45331.0716sp - [Affidavit of Domestic Partnership - Spanish](#) - N/A
- N/A - [Away From Home Care Guest Membership Application](#) - for HMO members - N/A
- N/A - [Away From Home Care Guest Membership Application - Spanish](#) - for HMO members - N/A
- TXBPASG-OFF-EX 01.17 - [2017 Benefit Program Application \(BPA\) for New Small Groups 2-50](#) - for new accounts effective on or after 1/1/2017 - N/A

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3 How to Access and View Reports



You can access and view reports by clicking **Reports** in the upper left-hand corner of each screen.



Types of documents accessible in the **Reports** tab include:

Welcome Letter:

The Welcome Letter is available after Underwriting approves the case. An email advising that the group has been approved will be sent to the producer or GA. You can then go into **Reports** to retrieve the Welcome Letter. The Welcome Letter itself will **NOT** be sent within the email.

Account Summary: The Account Summary Report will become available in the Reports List after **Continue** is clicked on the Account Summary screen.

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3 How to Access and View Reports (Contd.)

Reports

- EFT Payment Detail
- Account Summary
- NB Alternate Plans Report
- Welcome Letter

BlueCross BlueShield of Texas

eSales Tools

Electronic Funds Transfer Payment Details

Employer Details:

Employer's Legal Name: TEST_TX_UG	Account Number: 190707
Employer ID: 5555555555	Policy Effective Date: 10/15/2018
E-Mail Address of Authorized Company Official: joe.young@company.com	Administrative Contact: Joe Young
Address 1: 409 Arborcrest Dr	Address 2:
City/Town/Village: Richardson	State: Texas
Zip Code: 75080	Telephone#: 9722710001

Payment Details:

Bank Name: Testing Texas	Account Holder Name: Test Texas
Bank Account Number: XXXXX6789	Bank Routing Number: XXXXX1045
Payment Amount: 1000.00	Transaction Number:
Address 1: 409 Arborcrest Dr	Address 2:
City/Town/Village: Richardson	State: Texas
Zip Code: 75080	Date: 10/10/2018

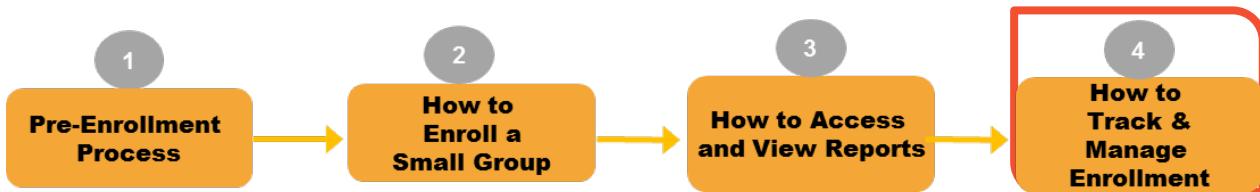
EFT Payment Details

The Electronic Funds Transfer (EFT) Detail report is available in the **Reports** tab. This report will capture the EFT information entered into the enrollment tool. This report is informational only and is not required to be submitted as part of the enrollment process.

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4 How to Track and Manage Enrollment

I. Enrollment Status



Once enrollment has been released, you can track the status of the case by searching the group from the **Enrollment** home page.

Enter information in any of the descriptor fields, or select the case from the **“Recently Accessed”** or **“My Enrollments”** section on the enrollment home screen. Once the group is selected, click **History**.

On the **Activity History** window, activities, along with activity date, status, and duration of activity are displayed. A list of activity and status definitions is also displayed.

Note: Quick status information can also be found in the header next to **Status**.

Enrollment Home			
Account Number: 190797	Effective Date: 10/15/2016	Quote Number: NA	Case ID: 13466
Log		History	
Send to BCBS			

Activity History			
Activity Date	Activity	Status	Duration
10/10/2016	Enrollment More Info Required		0 Day(s)
10/10/2016	Underwriter Review	Completed	0 Day(s)
10/10/2016	Enrollment Data Entry	Completed	0 Day(s)
10/10/2016	Start	Completed	0 Day(s)

Activity	Status	Definition
Enrollment Data Entry	Pre-enrollment	Pre-enrollment status is defined as one of the following. 1. A producer or General Agent has initiated the enrollment process but has not submitted the case to BCBS yet. 2. BCBS has received enrollment paperwork and is reviewing for completeness. The case has not been submitted to Underwriting yet.
Pre-Enrollment More Info Needed	Pre-Enrollment More Info Needed	BCBS has requested additional information and the submitter is in the process of obtaining requested information.
Underwriter Review	Pending UW review or Subsequent UW review	Enrollment documentation has been submitted to Underwriting for review
Submitter Review	Not approved or Enrollment More Info Required	UW has completed review of submission and has returned the enrollment to the submitter either not approving the submission or requesting additional information in order to complete the review

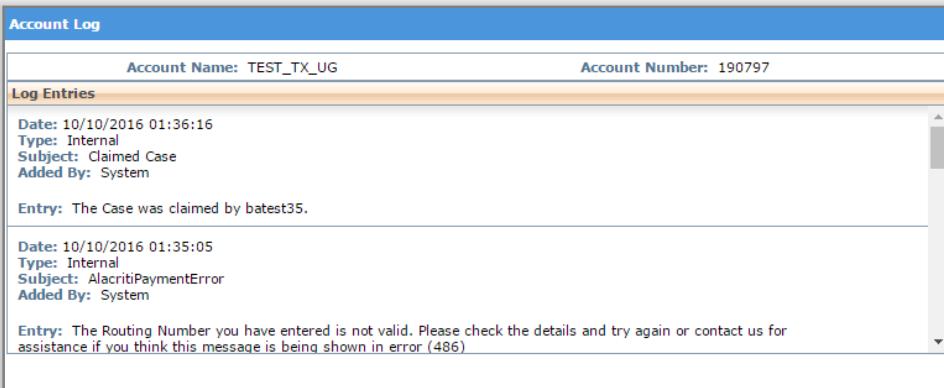
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4 How to Track and Manage Enrollment (Contd.)

I. Enrollment Status (contd.)



The screenshot shows the 'Enrollment Home' page. At the top, it displays the Account Number (190797), Effective Date (10/15/2016), Quote Number (NA), and Case ID (13466). Below this is a 'Log' button in a red box and a 'History' button in a blue box. A green 'Send to BCBS' button is at the bottom right.



The screenshot shows the 'Account Log' page for account TEST_TX_UG. It lists two log entries:

- Date: 10/10/2016 01:36:16, Type: Internal, Subject: Claimed Case, Added By: System. Entry: The Case was claimed by batest35.
- Date: 10/10/2016 01:35:05, Type: Internal, Subject: AlacritiPaymentError, Added By: System. Entry: The Routing Number you have entered is not valid. Please check the details and try again or contact us for assistance if you think this message is being shown in error (486)

Once the enrollment starts, details pertaining to the case are entered using the **Log** button.

For Example:

- If Underwriting indicates more information is required, a copy of the notes and reason codes will be added to the **Log** for your review. This will be the same information that would have been included in the email notification. Or you can also attach a separate document to provide additional clarification to the underwriter as needed.
- If the EFT transaction status is **Fail**, then you should view the **Log** for the reason and description as received from the payment vendor.

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4 How to Track and Manage Enrollment (Contd.)

II. More Information Required

In this example, once you have released the group for enrollment, the Underwriter reviews the case and sends an email notification requesting for more information.

The email notification includes the information that is required to complete the enrollment review. In this example, the underwriter requires completed documents from the Producer.

Sample “More Information Required” email notification is below.

Blue Cross Blue Shield of Texas (BCBSTX) requires additional information to continue reviewing the small employer group coverage enrollment for TEST_TX_UG Case ID #13425. The following information needs to be updated or provided:

- Missing/Incorrect/Incomplete Document (s)

Missing/Incorrect/Incomplete Document (s):

State filed proof of business - Incomplete
Wage & Tax Statement/Proof of Wages - Incomplete

Additional Notes: Incomplete Documents

Please return to eSales ACA Small Group Enrollment to search for this Case ID and make the necessary updates.

Please do not reply to this email. For questions, please call our Service Center at 800-399-5831 to coordinate resolution.

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4 How to Track and Manage Enrollment (Contd.)

II. More Information Required (contd.)

You will receive automated email notifications from the tool for cases that have been aging in the “*Enrollment More Info Required*” status. These emails will be sent to the email address that was provided on the Account Information screen during the initial data entry. A reminder email will be sent on the 3rd, 5th and 7th day if the case has not been returned to Underwriting. The case will be auto-discontinued 60 days after the Effective Date if the case is not returned to BCBS.

Sample of the Aging Alert email is below.

Blue Cross Blue Shield of Texas (BCBSTX) requires additional information to continue reviewing the small employer group coverage enrollment for TEST_TX_UG Case ID #13466. The case has been pended for 3 days and it needs your immediate attention in order to process it further. The following information needs to be updated or provided:

- Missing/Incorrect/Incomplete Document (s)

State filed proof of business - Incomplete
Wage & Tax Statement/Proof of Wages - Incomplete

Additional Notes: Incomplete Documents.

Please return to eSales ACA Small Group Enrollment to search for this Case ID and make the necessary updates.

Please do not reply to this email. For questions, please call our service center at 800-399-5831 to coordinate resolution.

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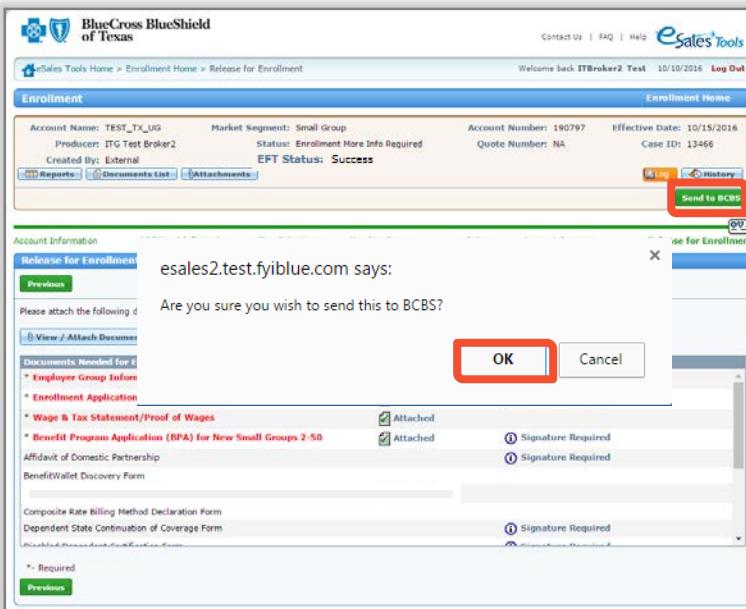
4 How to Track and Manage Enrollment (Contd.)

II. More Information Required (contd.)

Once you receive an email notification from the Underwriting team, you logon to the eSales Tools.

If Underwriting needs more information you may need to add or update information in one of the fields within the tool, as well as add some missing documentation.

In this example, you need to upload completed documents. You move to the **Release for Enrollment** screen and add the requested documents. Then, on this screen, you click **Send to BCBS** and then **OK**. The case will be returned to Underwriting for approval. The status of the case will be updated to “Pending UW Review”.



Note: You will have to navigate to the **Account Summary** screen to activate the **Send to BCBS** button. In this example, since we have to upload documents, we have moved to the **Release for Enrollment** screen.

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4 How to Track and Manage Enrollment (Contd.)

II. More Information Required (contd.)

You can add a log entry for this activity. Click **Log**, and **Add Entry** to communicate directly with the assigned Underwriter. Use the log entry to provide additional details pertaining to your case.

Once you click the **Send back to BCBS** button in the "More Info Required" activity, a system log entry is created.

Account Log

Account Name: TEST_TX_UG	Account Number: 190797
Add Entry	
Subject : Completed Documents Submitted	
Body : As per the email received, submitted the completed documents.	
Save	
Log Entries	

Account Log

Account Name: TEST_TX_UG	Account Number: 190797
Add Entry	
Log Entries	
Date: 10/10/2016 01:29:59 Type: Internal Subject: Completed Documents Submitted Added By: ITBroker2 Test	
Entry: As per the email received, submitted the completed documents	

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4 How to Track and Manage Enrollment (Contd.)

III. Underwriting Approval Received

An email notification will be sent to the General Agent (if applicable) or the Producer once the case has been approved by Underwriting.

Sample '**Enrollment Approved**' email below.

Blue Cross and Blue Shield of Texas (BCBSTX) has approved TEST_TX_UG for small group employer coverage with an effective date of 10/15/2016.

BCBSTX is in the process of finalizing your group's enrollment. You will receive another email notification after Identification Cards have been requested.

To access the Welcome Letter for this account's enrollment, log into eSales using the below link and instructions:

<https://producers.hcsc.net/producers/login>

1. Select **ACA Small Group Enrollment** from eSales Home Page

2. Search for your account in enrollment, once found, select the  View option next to the account name

3. From the account information page select  Reports

4. Select **Welcome Letter** 

Thank you for your business.

Please do not reply to this e-mail. This e-mail box is designated for outgoing messages only.

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4 How to Track and Manage Enrollment (Contd.)

III. Underwriting Approval Received (contd.)

The Welcome Letter is available after Underwriting approves the group. An email advising that the group has been approved is sent to the producer or GA. You can then click **Reports** in the tool and retrieve the Welcome Letter. The Welcome Letter itself is **NOT** sent within the email. An email is also sent once membership is complete.

Sample “Welcome Letter” below.

Welcome Letter

October 10, 2016
 ITG Test Broker2
 901 South Central Expressway
 Richardson, TX 75080

RE: TEST_TX_UG
 Account #:190797
 Effective Date:10/15/2016



BlueCross BlueShield
of Texas

TEST_TX_UG has been approved and your rates are indicated below. These rates are effective 10/15/2016.

Enrollment information, including member applications, is being processed. Member ID cards will be mailed shortly. Thank you for your continued business.

General Information:

Waiting Period:60	COBRA: N	COBRA Admin:N	TEFRA:	Public Entity:	County: Dallas	In-Vitro: N	Domestic Partner: N
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Benefit Summary:

Blue Choice PPO Network - PPO Plans - P600CHC: PLATINUM Plan; \$25/\$45 Office Copay/Specialist; \$250/\$500 DED In/Out; 80%/60% Coins In/Out; NA Coins Stoploss In/Out; \$0/\$10/\$35/\$75/\$150 Pharmacy; \$300/80% ER Copay/ER Coins; \$75 Urgent Care Copay; \$150/\$250 IP In/Out; \$100/\$200 OP Surg In/Out; 70%/70% Ped Dental In/Out

Blue Choice PPO Network - PPO Plans - P601CHC: PLATINUM Plan; \$25/\$45 Office Copay/Specialist; \$1250/\$2500 DED In/Out; 100%/100% Coins In/Out; NA Coins Stoploss In/Out; \$0/\$10/\$35/\$75/\$150 Pharmacy; \$300/100% ER Copay/ER Coins; \$75 Urgent Care Copay; \$150/\$250 IP In/Out; \$100/\$200 OP Surg In/Out; 70%/70% Ped Dental In/Out

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4 How to Track and Manage Enrollment (Contd.)

III. Underwriting Approval Received (contd.)

Temporary ID Cards: An email notification is sent to the General Agent (if applicable) or the Producer when ID cards are released, indicating that temporary ID cards are available as of the effective date of the group.

Sample 'ID Cards Released' email below.

Membership processing for TEST_TX_UG (Account # 190797) is complete and member ID cards have been requested. Temporary ID cards will be available as of the effective date of the account. To access temporary IDs for members of this account, follow these steps:

1. Log into Blue Access for Producers (BAP) using the following link: <https://producers.hcsc.net/producers/login>
2. From the BAP homepage, click the Blue Access for Employers (BAE) icon to access the BAE Account Search screen.
3. Select an account name from the listing. A maximum of 200 accounts will be listed.
4. If the account name is not listed, enter the name in the search fields and click **Find**.
5. Find the employee or dependent by using one of two search methods:

Search Option 1:

- a. On the BAE homepage, select the **Request/Print ID Card** option from the "I want to" menu.
- b. Select the **Employee** or **Dependent** radio button as appropriate.
- c. Enter the employee or dependent's SSN/ID Number or Last Name.
- d. Click the **Find** button.

Search Option 2:

- a. On the BAE homepage, click **Employee Maintenance** then **View/Update Employee** in the left-hand menu bar.
- b. Select the **Employee** or **Dependent** radio button as appropriate.
- c. Enter the employee or dependent's SSN/ID Number or Last Name.
- d. Select **Request/Print ID Card** from the "I want to" menu.
- e. Click the **Find** button.

6. Click on the employee or dependent's name in the Search Results table to be taken to the Request/Print ID Card screen.

7. To print a temporary ID card, click on the **Print a temporary ID card** link.

8. To email a temporary ID card, click on the **Email a temporary ID card** link.

9. Follow the instructions on the screen.

10. Click the **Confirm** button

Thank you for your business.

Please do not reply to this e-mail. For questions, please call our Service Center at 800-399-5831 to coordinate resolution.

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4 How to Track and Manage Enrollment (Contd.)

III. Underwriting Approval Received (contd.)

Once your case completes the ID Cards Released and Release Initial Bill activities, your case enrollment is complete.

Enrollment		Enrollment Home	
Account Name: TEST_TX_UG	Market Segment: Small Group	Account Number: 190797	Effective Date: 10/15/2016
Producer: ITG Test Broker2	Status: Enrollment Completed	Quote Number: NA	Case ID: 13466
Created By: External			
Reports	Documents List	Attachments	Log History
		EFT Status: Success	

Note: If the case is not approved for enrollment by Underwriting, a **Not Approved** email notification is sent to the Producer or GAs with the reason code(s). Contact our Service Center at 1-800-399-5831 if you have questions regarding a case that is not approved.

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4 How to Track and Manage Enrollment (Contd.)

Search Functionality

- From the Enrollment Home screen, you can now press the Enter key, on your keyboard, to submit your search request in addition to clicking the **Search** button on the screen.
- You can now search “In Process” or “Completed” enrollments by the account's nine-digit Employer Identification Number (EIN).

The screenshot shows the 'Enrollment' section of the ACA Small Group Enrollment User Guide. At the top, there is a blue header bar with the word 'Enrollment' on the left and 'Enrollment Home' on the right. Below the header, there is a search form titled 'Search Existing Accounts/Quotes'. The form includes fields for 'Account Name', 'Agent', 'Division' (set to 'Texas'), 'Quote Number', 'Account Number', 'Case ID', 'Status', 'Effective Date', and 'EIN'. The 'EIN' field is highlighted with a red box. Below the form, there are two buttons: a red-bordered 'Search' button and a 'Clear' button.

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4 How to Track and Manage Enrollment (Contd.)

IV. My Enrollments

During enrollment, if you want to view the status of the case, you can check the **My Enrollments** section of the enrollment tool. This section lists all cases currently in the enrollment process. The section will list the enrollments that you have enrolled using the tool yourself. You may sort columns for easy tracking.

My Enrollments						
Account	Account #	Effective Date	Sales Executive	Divison	Status	Last Activity
View ANGELA TEST 3	003531	12/01/2015		TX	Enrollment More Info Required	10/05/2015
View AMATEST TX 0928 AGING	177522	10/01/2016		TX	Enrollment More Info Required	09/29/2016
View TX EXT TEST TI 07052016	176873	08/01/2016		TX	Enrollment More Info Required	08/03/2016
View TEST_TX_UG	190790	10/15/2016		TX	Enrollment More Info Required	10/10/2016
View AMATEST TX 1009 EXT	190795	11/01/2016		TX	Pending UW review	10/09/2016
View AMATEST TX 1007 RC EXT	190785	11/01/2016		TX	Pending UW review	10/07/2016
View AMATEST TX 1006 EXT	177572	11/01/2016		TX	Pending UW review	10/06/2016
View EXT RPTS TEST TI 08032016	177034	09/01/2016		TX	Pending UW review	08/03/2016
View TEST TX BROKER DEMO	187385	01/01/2016		TX	Pending UW review	05/19/2016
View NATEST_TXEXT0310	184892	04/01/2016		TX	Pending UW review	04/04/2016
View AMATEST FSE ADV TX EXT 1	177547	11/01/2016		TX	Pending UW review	10/04/2016
View AMATEST_TX_1_1005	177568	11/01/2016		TX	Complete Acct/Membership entry	10/05/2016
View LAURA TX HMO ONLY	186243	06/01/2016		TX	Complete Acct/Membership entry	04/19/2016
View LAURA 092315 TEST EXTERNAL	003351	12/01/2015		TX	Complete Acct/Membership entry	10/02/2015
View TX_UG	177549	10/15/2016		TX	Enrollment Internal Action Required	10/05/2016

Note: Those cases that have aged after 2 days of inactivity in the “*Enrollment More Info Required*” status, the enrollment tool will highlight them in an Orange color, within the *Recently Accessed* and *My Enrollment* sections of the Enrollment home page, for awareness.

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4 How to Track and Manage Enrollment (Contd.)

IV. My Enrollments (contd.)

The **Recently Accessed** section lists all the enrollments that you have searched and viewed. This could be a combination of cases enrolled by yourself or by BCBS.

Recently Accessed					
Account	Effective Date	Sales Executive	Divison	Status	Last Activity
 TEST_TX_UG	10/15/2016		TX	Enrollment Completed	10/10/2016
 TEST_TX_UG	10/15/2016		TX	Enrollment More Info Required	10/10/2016
 TX_UG	10/15/2016		TX	Pre-enrollment	10/10/2016
 SYS Account Name Place Holder	-		TX	Pre-enrollment	10/10/2016
 AMATEST TX 1009 EXT	11/01/2016		TX	Pending UW review	10/09/2016
 JPM R4 TOUCHPOINT AGING AND EMAILS	01/01/2017		TX	In Progress	10/07/2016
 AMATEST TX 1007 RC EXT	11/01/2016		TX	Pending UW review	10/07/2016
 TEST_TX_UG	10/01/2016		TX	Pre-enrollment	10/07/2016
 SYS Account Name Place Holder	-		TX	Pre-enrollment	10/07/2016
 SYS Account Name Place Holder	-		TX	Pre-enrollment	10/07/2016
 SYS Account Name Place Holder	-		TX	Pre-enrollment	10/07/2016
 TEXT_TX_UG	10/15/2016		TX	Pre-enrollment	10/07/2016
 SYS Account Name Place Holder	-		TX	Pre-enrollment	10/07/2016
 SYS Account Name Place Holder	-		TX	Pre-enrollment	10/07/2016
 AMATEST TX 1006 EXT	11/01/2016		TX	Pending UW review	10/06/2016
 AMATEST SS 1006	01/01/2017		TX	Pre-enrollment	10/06/2016
 SYS Account Name Place Holder	-		TX	Pre-enrollment	10/05/2016
 SYS Account Name Place Holder	-		TX	Pre-enrollment	10/05/2016
 AMATEST_TX_1_1005	11/01/2016		TX	Complete Acct/Membership entry	10/05/2016
 SYS Account Name Place Holder	-		TX	Pre-enrollment	10/05/2016

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Resources and Help

For technical issues with the eSales enrollment tool, please contact our ITG Service Center at **1-888-706-0583**.

If there are any questions regarding any of the information within the user manual or the enrollment process, please feel free to email us at:

ACASmallGroupEnrollmentSupport@bcbsil.com

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