

## Employer Enrollment Tool

Maintenance guide for employers

Last updated September 25, 2023

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Welcome Tool tips Features by line of business Navigating to the tool Homepage navigation Group account navigation and group features Member account navigation and member features Document requests and uploads System support

## Welcome to your new tool....

Which is why we are happy to deliver the expanded digital capabilities of maintenance to the Employer Enroll Tool for Small Group and Core lines of business.

### At Blue Shield of California, we're dedicated to improving the Commercial Market experience for our customers.

# Make enrollment changes with confidence with the Employer Enrollment Tool





Real-time installation

Provider and other downstream systems will update in their normal SLA Visibility to your data

Group and member account pages make it easy to view information



Smart capabilities

Field level validations help you avoid typos and simple mistakes

### Simple submissions

Guided workflows direct you through each step of the process

## Experience easy enrollments yourself

Expected installation of new hire enrollment



Features available in one tool

21 \*

\* Large Group employers will have fewer features Tool submissions with self-service status tracking



## Tooltips

1

2

3

Views default to your recently viewed information. Use the filters My Groups or Agency Book of Business when first accessing company accounts

Use the search bar or Manage all Groups action button to access a group record

Access to edit group and member information is determined by profile roles set on the portal

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ick View all on the To-Do list to ee the full list of open tasks

Group reinstatement will remain outside of the tool. Please contact Broker and Employer Services to process group reinstatements

#### Open enrollment

## Enrollment tips

Make all of your open enrollment changes in the tool

3

Special Enrollment Period (SEP)

Identify the qualifying/life event in the tool and the tool will offer SEP updates

2

### Off-anniversary change and exceptions

You can also process changes outside of open enrollment

4

### Waivers & refusals

Existing Blue Shield groups do not need to include members refusing coverage

### Waiting periods

The tool will automatically implement the selected waiting periods

3

### Federal COBRA

Enroll and view Federal COBRA members

## Eligibility tips

### 2

### Member level benefits

Responsive fields will reflect the benefit rules in place

4

## Part-time & full-time coverage

Enroll and manage coverage for both levels of employees

## Features

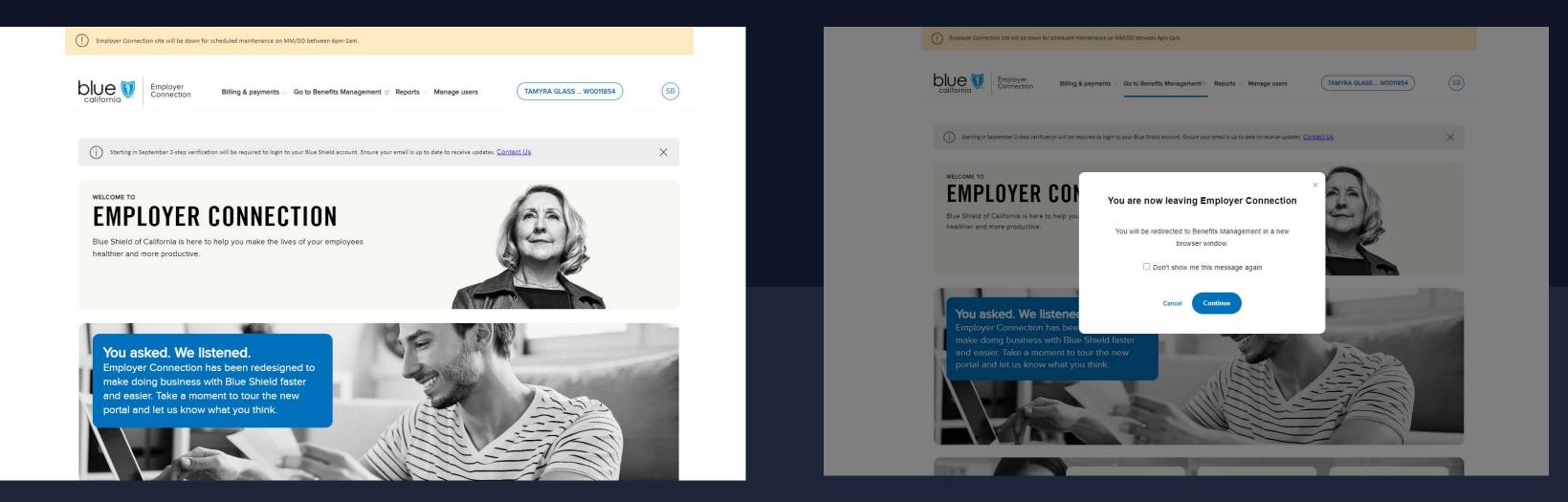
### Group

- Cancel a group
- Enroll employees
- Edit group address and contact information
- Edit group contribution amounts
- Edit group contacts
- Edit bill format
- Edit group name
- Edit group entity information
- Add a group class
- Add a plan or product
- Cancel a plan or product

### Member

- Cancel a subscriber
- Cancel dependents
- Order ID cards
- Download ID cards
- Edit subscriber and dependent demographics
- Edit contact information
- Edit class, subgroup, department code
- Add a plan or product
- Cancel a plan or product
- Add a dependent
- Enroll in COBRA

## Navigate to the tool



Log into Employer Connection

Use the links on the log in page to reset your password

### Click on the benefits management link in the top navigation bar

The button will route you to the Employer Enrollment Tool

## Homepage

#### Along the top:

• Search bar allows the user to search records they have permission to view, including quotes and enrollments.

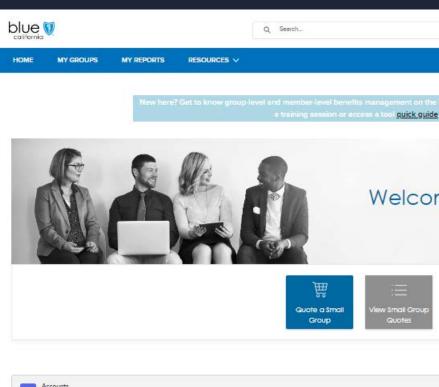
• Home returns the user to the Employer Enrollment Tool home page.

- My Groups displays the company account.
- My Reports houses your enrollment reports

• Resources links the broker to User Guide, Tips and Tricks, and a tool resource page with additional information.

#### Quick Actions:

• Manage all groups displays the groups owned by the logged in user and the agency book of business. To submit a group or member record change from the home or landing page, click on the button Manage All Groups.



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2	AUTOMOBIL PVT	W0101934	Customer	ISGBU	1/1/2023	Word & Brown, Ins	
3	CLEAR CONSTRUCTION	W0105243	Customer	ISGBU	4/1/2023	Warner Pacific Insu	

To Do

AUTOMOBIL PVT: Maintenance Documents Required

View More

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Employer Enrollment Tool. <u>Register</u> for 2			
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Manage All Groups			
· · ]	\$ * C		Core
MY GROUPS MY REPORTS RESOURCE	5 🗸		
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6/1/2022

To Do

View More

## Group level changes

AND AND AND

### Remember group features are available by line of business

## Group account

To begin a maintenance record change, select your company. Click on the blue account name to open the account record page. The account record page displays information regarding to your company. This is the launch point for all group and member transactions. The screen is split it up into different sections and tabs to organize the group's information. Click through the tabs and sections to view the current information on file.

# Group account continued

Enroll Employee button opens an enrollment application flow that will guide the user through the enrollment process.

Edit Group button opens a screen of cards each a different type of record change. Click on a card to include it in the transaction. Click on multiple cards at one time to submit many different record change types in one transaction.

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HOME MY GROUPS MY F	Reports Resources 🗸				
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<ul> <li>Account Information</li> <li>Account Name</li> <li>CLEAR CONSTRUCTION</li> </ul>	Tax ID 823613035	Effective Date 2019-04-01	Doing Business As	Name SIC C 1521	
<ul> <li>Address Information</li> <li>&gt; Principal Address</li> <li>&gt; Billing Address</li> </ul>					
✓ Waiting Period					
Class Code 1000	Class ACTIVE CA ELIGIBLES	Waiting Period			Effective Date 2023-04-01

Group level maintenance scope

There is different functionality between Core and Small Group. Core groups will have the ability to enroll members, change the demographic details, and change group contacts. Small Groups will have more cards including changes to class offerings, plan selections, and employer contribution amounts.

Large Group/ Core

Small Group

### • Enroll Employees

- Group details
- Group contacts
- Group plans
- Class plans
- Group name and

#### structure changes

- Contribution amounts
- Eligibility offerings
- Billing format
- Cancel group

### • Enroll Employees

- Group details
- Group contacts
- Cancel group

### Enroll employees

Use for - Enrolling new employees and their dependents

How - This transaction has a two-screen workflow. First, enter in the enrolling employee's information. This is the same information captured on the Employee Enrollment Application (EEA) form.

✓ Qualifying Event Details

Qualifying Event\*

Are you a Full-Time or ○ Full-Time ○ Part-T

Effective Date

The effective date does not

recalculated once it is recei

> Demographics Please expand to fix all inva

Subscriber Details Please expand to fix all inva

> Other Health Plan Inform Please expand to fix all invalid fields.

Enrol	l a	me	m	ber

Enter the subscriber applic	atior	n information into the fields.	
Required fields must be co	mple	ted before moving forward.	
	•	Qualifying Event Date*	苗
r Part-Time Employee? *			
ime			
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ved for processing.	Calcu	ilations. If a waiting period applies, the effective date will be	
alıd fields.			
alid fields.			
ation			

### Enroll employees continued

Next, select the plan election for the member(s). Click on the boxes to open up the product and plan fields.

Use the toggle buttons to accept or decline the products offered by your company. Then use the dropdown menu to select the member's plan from the available plans offered. Click the Save button before moving on.



©	o		
	Plan Selection	_	
	= 0		
	Plan sele	ctions	
	Make the member	plan selections	

Click on the member's name to open the fields to change the products and/or plans. Only the products and plans within the product offered by the group will display. Use the radio buttons to accept or decline a product and the drop down window to select the plan for enrollment and then save before moving forward.

#### Plans for current year enrollment @

employee	name					
		Next				
		Previous	$\supset$			
		Cancel				

product offered by the group will display. Use the radio buttons to accept or decline a product and the drop down window to

select the plan for enrollment and then save before moving forward.

Plans for current year enrollment 🛈

First Name employee	Last Name name	×
Medical		
O Accept 🛛	Decline	
Please select	at least one plan to continue.	
		Save

### Group cancelation

Use for – canceling a company's Blue Shield coverage.

How - Confirm the intention to cancel coverage. Then provide the cancelation date and reason so ended your Blue Shield coverage.

Are you sure you want to cancel this group? ' 🔿 Yes 🔷 No Cancellation Date\* 苘 Reason code\* • Next

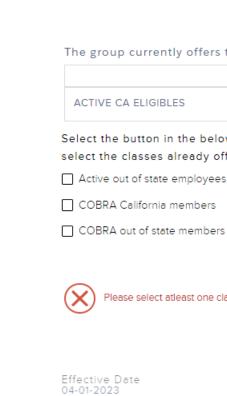


#### Canceling the group will terminate coverage from Blue Shield of California coverage.

### Class offerings

Use for - Small Group only. Add additional classes onto the group. We will not remove classes from a group, so once they are added they will remain active.

How - The tool will display the current active classes. Select the radio buttons to add a new class. The tool will display an auto calculated effective date for the change to take effect.





#### Class Offerings

Make changes to the enrollment classes offered by the group

Check the box to select an available class to be added to the group.

Classes cannot be offered cannot be re-selected.

#### The group currently offers the classes listed in the table

Select the button in the below list of available classes to add a new class to the group.You do not need to select the classes already offered.

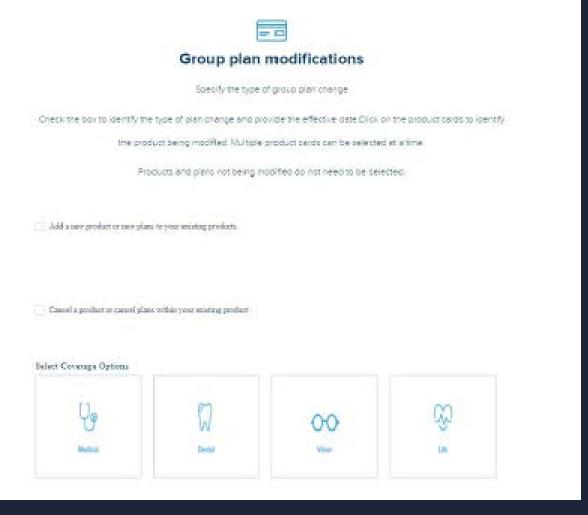
Please select atleast one class from the above list

茴

### Group plan changes

Use for - Small Group only. Group plan changes at both the product and plan level.

How - This transaction has a two-screen workflow. First, identify the type of plan change by checking the box next to that option, enter the effective date, and qualifying event information. Then, select the product related to this change (medical, dental, vision, or life) by clicking on the card. Multiple products/ cards can be selected in one transaction. On the second screen, the tool will show the current plans offered by the group in a scrollable list in the top left of the page.



## Group plan changes continued

Add a plan or product

1) select the plan package (medical) or plan offerings (specialty) type.

2) select from the networks available to the group. Note we will not show out of network as selectable options.

a list of plans will be presented. Use the checkboxes to mark the plans for the group.
 Note use select all or deselect all to select the plans within a whole network.



#### Select Medical Coverage

#### Note the providiphin selections.

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## Group plan changes continued

Cancel a plan or product

1) In the list of current plans offered by the group, click on the Cancel link. This will expand into two boxes that use toggle arrows to move plan names between the current plans and plans to be canceled.

2) Move a plan into the Cancel box.

3) A confirmation message will display on the screen that the selected plans will be canceled and removed from the group offering.

4) Check the box next to the confirmation message.

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#### Select Medical Coverage

Wellie the group plan selections

To each a planaeeeetthe plan package or option to view the networks and plans evaluate to the group. Use the check bores to indicate plant the group introffer. To cancer a pain, click on the observance. This in the content plan table, and use the encoded plan table.

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Note changes to medical benefits will prompt the tool to re-affirm the selections for the group's infertility rider.

### Group details

Use for - Update the principal business address, the business email, phone number, and mailing contact, the billing address, billing telephone, and billing contact.

How - Click on the address boxes to open additional fields and begin typing in new information. Click on the save button in the card before clicking Next.





Update Billin



Note users cannot add new contacts this is just updating the ones that we are already associated to this group.

Group details	
Make changes to the group demographic information	
Click on the demographic type to open the fields, enter the new group information, and then save.	
Required fields must be completed before moving forward.	
ncipal Business Address	
525 GARDEN STREET SANTA BARBARA CA	
ing Address(es)	
CLEAR CONSTRUCTION 525 GARDEN STREET SANTA BARBARA	
Next Previous Cancel	

### Employer contributions

<u>Use for – Small Group only. Update the</u> group's contribution amounts.

How – Use the checkboxes to select the offered products to make changes. Then select the checkbox to indicate if the contribution is a dollar amount or percentage amount and enter the desired amount.









Make changes to the contribution amounts.

Creck the box to indicate which product's contribution fields changing. Select the contribution type and enter the new

amount. Required fields must be completed and before moving forward.

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Choose the details you would like to modify

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Ure

Subscriber Contribution

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Depende	ent Comm	0.004

### Structure change

<u>Use for – Small Group only. Update the</u> group's name and/or legal entity type information.

How – Enter in the new information into the respective fields. Use the check box to indicate the level of changes being submitted.

Enter	only	th	e
	U	se	tl

New Group Legal Na

New Doing business

New Standard Indust

New Legal Entity Type

Select the type of chan

Simple Name Chang

Comprehensive Bus

(X) P

Please select the type

#### **Update Business Name**

e information that is changing into the corresponding fields. the checkbox to select the type of structure change.

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ry Classification (SIC) and Indus	stry description
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ge(s) requested:	
je	
iness Change	
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Next	
Previo	us

### Structure change - complex

<u>U</u>se for – Small Group only. Update multiple business entity criteria.

How – Check the box next to the type of change. Select multiple boxes for many changes.

#### Select all that Ownership Business p

Entity type

Employees

Add subsid

Merger Other

Enter the total

How many empl

How many empl

Enter the total

state ①

Enter the total n

quarter 💮

#### **Update Business Name**

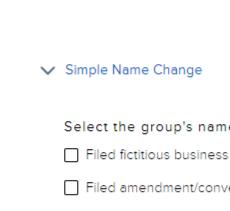
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number of current Full Time and Full Time Equivalent employees $\underline{\hat{w}}$	
loyed in prior calendar quarter? 👷	
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number of current Full Time and Full Time Equivalent employed out of	
umber of FTE and FTE employed out of state during the prior calendar	

Enter the total number of FTE and FTE employed out of state during the prior calendar year

### Structure change - simple

<u>Use for – Small Group only. Update the</u> group's name and/or legal entity type.

How – Check the box next to the type of change.





#### Select the group's name change filing. You can select either one or both \*

Filed fictitious business name (FBN) for new fictitious business Doing Business As (DBA)

Filed amendment/conversion for corporations/partnerships

	Next	
$\bigcirc$	Previous	$\bigcirc$
	Cancel	

### Billing attribute

<u>Use for – Small Group only. Update the</u> layout of the bill.

How – Use the toggle button to select the standard bill layout or the department code layout that organizes members by their department code.



Premium Statement Print Id

CLEAR CONSTRUC



#### **Modify Billing Information**

Organize how each premium statement ID appears on the bill. Use the toggle buttons to select the desired bill layout.

N	Standard Bill	Sort by Department Code
	Standard bill	Sort by Department Code
		Save
	Next	
	Previous	
	Cancel	

## Member level changes



## Member maintenance

To initiate a member maintenance record change, find the group and then the member. Navigate to the Group Account page and click on the Member Roster tab. The tab displays the current contract period employees. Select an employee from the roster by clicking on the name.

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## member account

Like the group account page, the member account page holds all of the valuable enrollment information for the selected person.

Click the buttons in the top right corner to initiate a transaction for this subscriber and any enrolled dependents.

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Subscril 9093	<sup>ber Id</sup> 38975	Gra
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> Contact Information

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S TRANSACTION HISTORY PR	RIMARY CARE PROVIDER			
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	Date Of Birth 09-07-1989 Age			
	09-07-1989 <sub>Age</sub> 34			
	09-07-1989 <sub>Age</sub>			
	09-07-1989 Age 34 Gender			
	09-07-1989 Age 34 Gender Male SSN			
Address Line 2	09-07-1989 Age 34 Gender Male SSN	State CA	Zip 93030	

All

## Member level maintenance scope

Both Core and Small Group have the full suite of member maintenance functionality. Additionally, the Employer Enrollment Tool includes all prior Benefits Management Tool functionality.

### Cancel member

- Reinstate member
- Order ID card
- Download ID card
- Member demographics
- Member contact
- Member plans
- Add dependent(s)
- COBRA enrollments
- Dependent

cancelation/reinstatement

### Member cancelation

Use for – Canceling an employee's Blue Shield coverage. If the employee has dependents this will also cancel their coverage.

How - Click on the cancel member button on the member account page. Provide the cancelation reason and date.

If your company offers CalCOBRA coverage you will see an additional field. Indicate if this member will elect the CalCOBRA coverage and we will send out the CalCOBRA packets for enrollment. Companies offering Federal COBRA will not have this additional field.

Subscriber

Member Name' MIGUEL TORRES

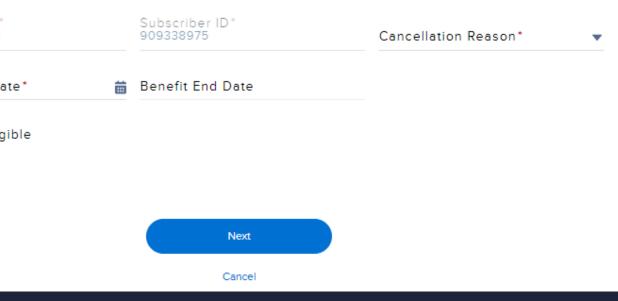
Cancellation Date\*

Cal-COBRA Eligible 🔿 Yes O No



#### Cancel member

#### Canceling members will remove them from Blue Shield of California healthcare coverage

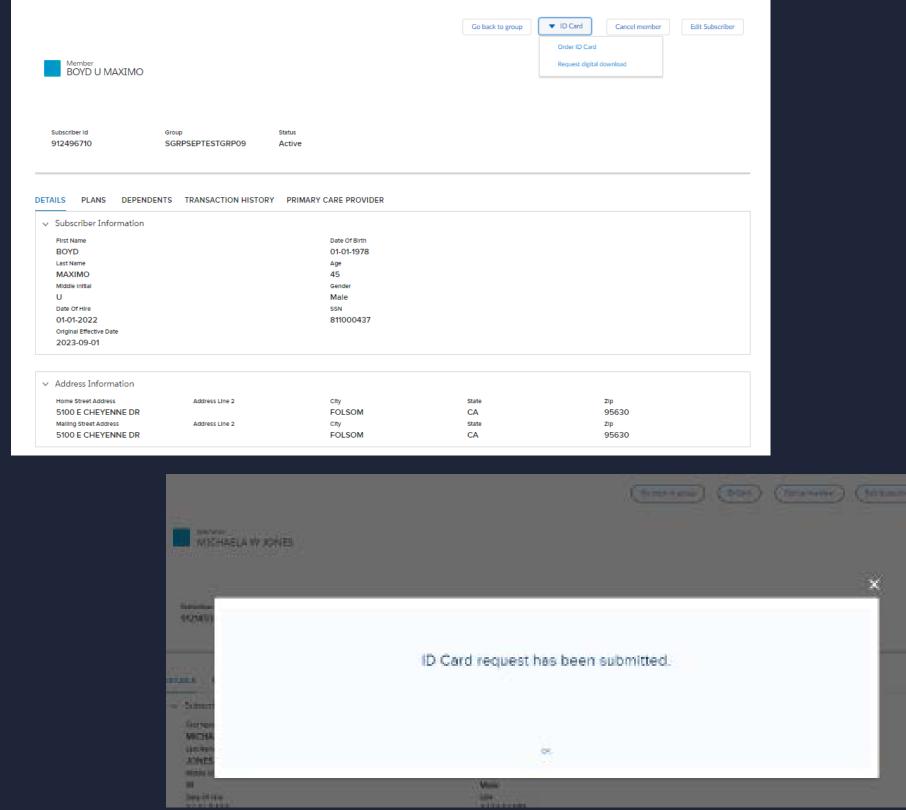


### Order ID cards

Use for – Reissuing member ID cards. If the employee has dependents this will send new ID cards for the household.

How - Click on the ID card button on the member account page and select the Order ID option. A window will open confirming the ID card order.

Tip! ID cards will be sent to the channel identified by the member. If the member selects digital communications and digital ID cards, we will send the reissued card to their Blue Shield app. If the member selects paper communications and paper ID cards, we will mail the ID card.

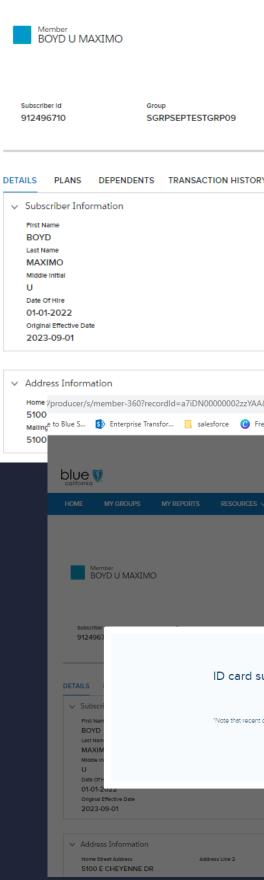




### Download ID cards

Use for – Reissuing member ID cards. If the employee has dependents this will send new ID cards for the household.

How - Click on the ID card button on the member account page and select the digital download option. A window will open confirming the ID card order. Only medical ID cards are available at this time. Tip! Changes to the member record can take up to 2 business days to generate a new ID card.



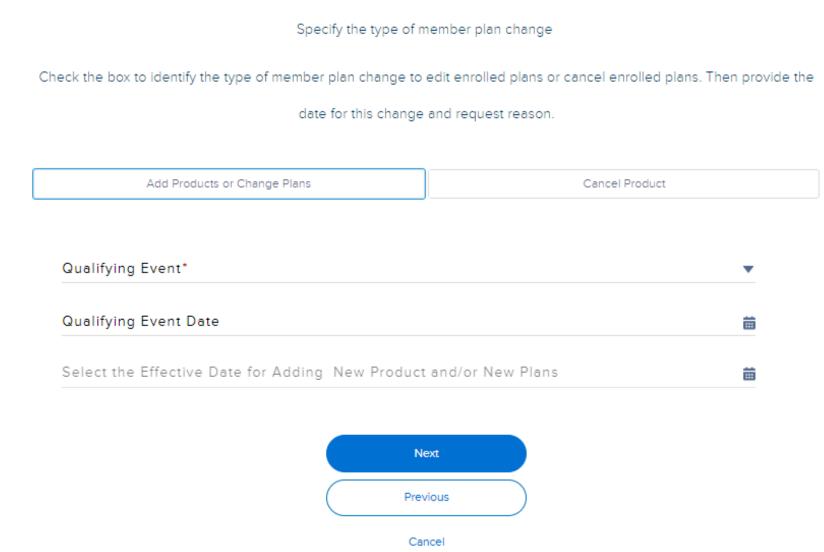
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01	1000437					Members: Use Bue 2 maximum benefits. Previders: Presentite service area the member	hield of California professed providers to receiver all claims with your local BCBS licensee in whose or received services or, when Medicare is primary, file re. For more information visit worker	We are here to help: blueshieldca.com/go		
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									contornia	

### Member plan changes

Use for – Member plan changes to products and plans.

How - This transaction has a two-screen workflow.

1) Identify the type of change with the toggle button, enter the effective date, and qualifying event information.



#### Member plan modifications

### Member plan changes continued

2) Click on the member's name to open the box and view the current plan elections. Use the radio buttons to accept or decline product coverage. For accepted products, use the dropdown window to the right to select an available plan. Click on Save.

Plans for current year enrollment @

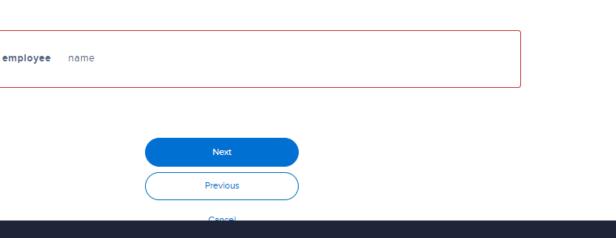




#### Plan selections

Make the member plan selections

Click on the member's name to open the fields to change the products and/or plans. Only the products and plans within the product offered by the group will display. Use the radio buttons to accept or decline a product and the drop down window to select the plan for enrollment and then save before moving forward.



product offered by the group will display. Use the radio buttons to accept or decline a product and the drop down window to

select the plan for enrollment and then save before moving forward

#### Plans for current year enrollment ()

First Name employee	Last Name name	×
Medical		
O Accept		
	ect at least one plan to continue.	

### Add dependents

Use for – enroll dependents to an existing subscriber.

How – This transaction has a two-screen workflow. These are the same fields as the EEA form.

1) Enter the enrollment application information by directly typing into the fields.

Enter the mem

Qualifying Ev Loss of Covera

Effective Date 08-30-2023

The effective dat

recalculated onc

V Depender

Depende

First Nam

Date of B

Gender\*

Gender I

SSN

Communi

Same addre

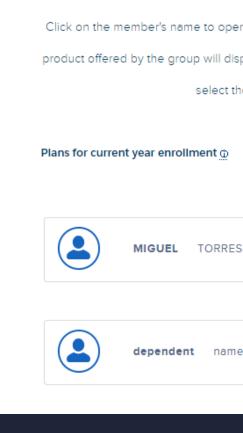
Same Race

Add ar

Add dep	pendent	
Enroll dependents	to the subscriber	
ber application information into the fields. Click	+Add new dependent to enroll	multiple dependents together.
Click Delete dependent to remove the a	additional dependent applicatio	n fields.
Required fields must be comp	leted before moving forward.	
ent" ge 🗸 🗸	Qualifying Event Date 08-29-2023	苗
e		
te does not reflect the group's waiting period calculat e it is received for processing.	ions. If a waiting period applies, the	effective date will be
nt Details		
nt Type*		
ne* Middle Initial	👻 Last Na	ame*
Birth* 🝵 Primary Care Provider	Primary Care Dentist	Find a Doctor
	-	
dentity •		
Ication Preference	- Email	
ess as subscriber?" O Yes O No		
and Ethnicity as the subscriber?	⊖ Yes — No	
nother dependent		

### Add dependents continued

2) Select the plan elections for the dependent based on the employee's elections. Click on the Save button before moving to the next step.





#### **Plan selections**

Make the member plan selections

Click on the member's name to open the fields to change the products and/or plans. Only the products and plans within the product offered by the group will display. Use the radio buttons to accept or decline a product and the drop down window to select the plan for enrollment and then save before moving forward.

×

rst Name ependent	Last Na name	me	×
Medical	Destruct		
Accept	Decline	Gold Trio HMO 0/30 OffEx	Save
		Next	
		Previous	

### Member details

Use for – Update the subscriber and any dependent demographic information (name, DOB, DOH, gender, etc.).

How – Directly type in the new information to the fields. If the subscriber has dependents, use the accordions to expand the dependent fields for updates.



First Name\* MIGUEL

SSN 615431172

Gender\* Male

Date of Hire 07-29-2019

Subscriber Statu

Full Time (

Earnings (exclud

Salary Effective

Effective Date 10-01-2019

#### Member details

Make changes to the member demographic information

Click on the member type to open the fields to change the member information.

Required fields must be completed before moving forward.

	Middle Initial	•	Last Name* TORRES	
	Date of Birth* 09/07/1989	莆		
•	Gender Identity	•	Marital Status* Single	•
				i
us *				
) Part Time				
ding overtime, bon	uses, etc.)		Earnings Frequency	•
Date				t
				i

### Member contact & classification

Use for – Update the member's contact information, addresses, class and subgroup assignment, and any department code in use.

How – Click on the box with member's name to edit the contact information for that member. Directly type in the new information to the fields. Click on the save button in the box before clicking Next.

Note the Google address lookup will not include second address line and needs to be added manually.

#### Subscriber

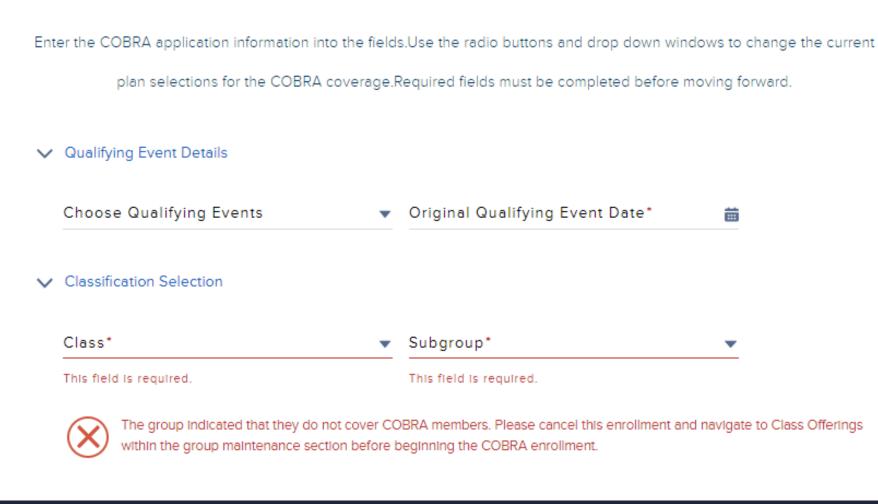
MIGU Hom 304 V

I	Member co	ntact and classifica	ation	
Make changes to t	the member address,	contact information, class, subgr	oup, and department code	
Click on th	e member's name to	open the fields to change the me	ember information.	
Req	uired fields must be c	completed and saved before mov	ving forward.	
cribers				
MIGUEL TORRES			×	
Home (Physical) Addre 304 W ROBERT AVE	ess"		1	
City* OXNARD	State* CA	Zipcode* 93030		
Address line 2				
Use updated Home	e address for maili	ng address		
Use updated Home	e address for all de	ependents		
Mailing address (if diff 304 W ROBERT AVE	'erent from home)*		1	
City* OXNARD	State* CA	Zipcode* 93030		
Address line 2				
Work Phone 805 793 9407				
Home Phone	Langua English	ge Preference*		
Email				
	Class* ACTIVE CA I	ELIGIBLES	Effective Date* ▼ 10-01-2019	ä
	Sub Group CLEAR CON		Effective Date*	
	CLEAR CON	STRUCTION	▼ 10-01-2019	₩
	● Add/Upc	late Department Code	Cancel Department Code	
	Departmen	t Code	Effective Date	ä
				Save
			Next	
		(	Previous	
			Cancel	

### Federal COBRA enrollment

Use for – Enroll an existing subscriber in COBRA.

How – Select the qualifying event, class, and subgroup information. The tool will give the option for plan changes, but this is not a required step.



#### **COBRA** enrollment

Enroll the subscriber and any dependents into COBRA

# Exception reviews

If a submission requires a document or Blue Shield review, a screen will display in the work flow prompting you for the exact information required. If you do not have a required document on-hand, use the Will upload later check box and click next. It it important to complete the transaction even if the document is provided at a later time.

#### Exception Review

The current transaction contains an exception and needs to be reviewed by Blue Shield before processing it. We will send status communications to the email on file for this account.

Enter the exception reason in the field below. As an added option, upload documentation to help support this exception request by clicking on the document upload button to search and attach the document. Note that documents are not required at this time.

DICEPTIONS	DOCUMENTS NEEDED
oup name uposta requested	<ol> <li>IIIS coolumentation of new mome pro Bits or ND or SS-4.</li> <li>Proof of represidences showing old and new nome, as follows a Amendment sinclor Conversion document, files with Co Secretary Of State (Concentrions, Partnerships, LLC only) and/or its Rothious Business Nome (Rin) atstament, filed with county (Rick Proprieto), or DBA changes)</li> </ol>
Reaction for submitting this exception reque	



### Upload documents for exceptions

Some submissions fall under an exception and needs to be reviewed by a Blue Shield team. The tool will prompt users during the submission if there is an exception. The screen will display what was captured and if any supplemental documents are needed and what those documents are.

Users can upload the requested documents on this screen:

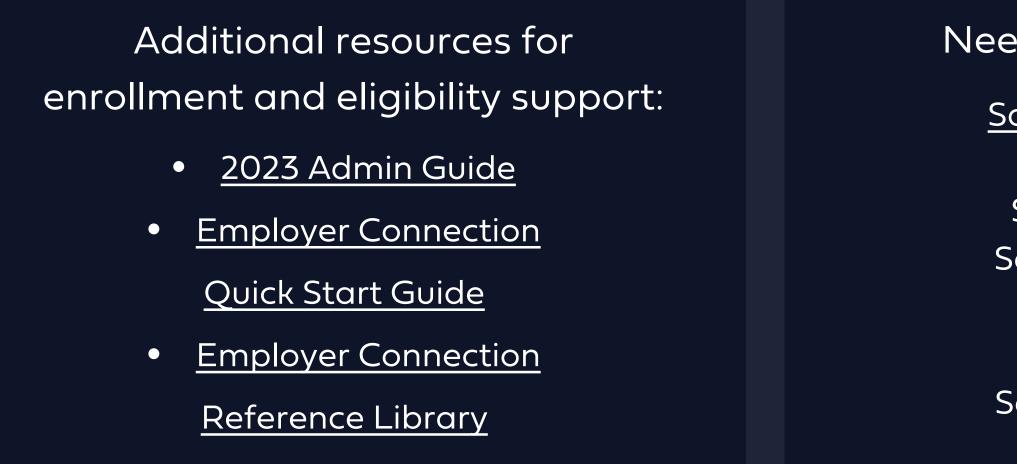
- 1. Click upload document
- 2. Select the document from your files
- 3. Enter an exception comment
- 4. Click next to submit the transaction with documents

- transaction without documents
- 2. System generated emails will remind you to
- upload documents s o
- processing can begin
- 3. To upload a document, navigate to the tool
- homepage
- 4. Click view more on the To Do list panel
- 5. Click on the maintenance documents required link next to the group's
- name
- 6. Click on the blue upload document button in the top right-hand
- corner
- 7. The tool will reload the exception document request screen Click 8. Upload document
- 9. Select the document
- 10. Click save

### Users can check a box to upload documents later: 1. Check the box will upload later and submit the

## Support

### Access additional tool resources on Employer Connection's <u>resource page</u>



Trouble logging in? Use the username and password reset links on the login page for immediate login assistance

Need to talk to someone? Sales Account contact list

> Small Group Employer Services (800) 325 - 5166

> Core Group Employer Services (855) 747 - 5809