



BlueCross BlueShield
of Texas

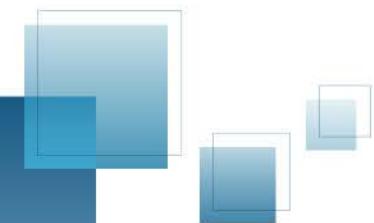
DocuSign Producer Training Guide

Effective February 2019

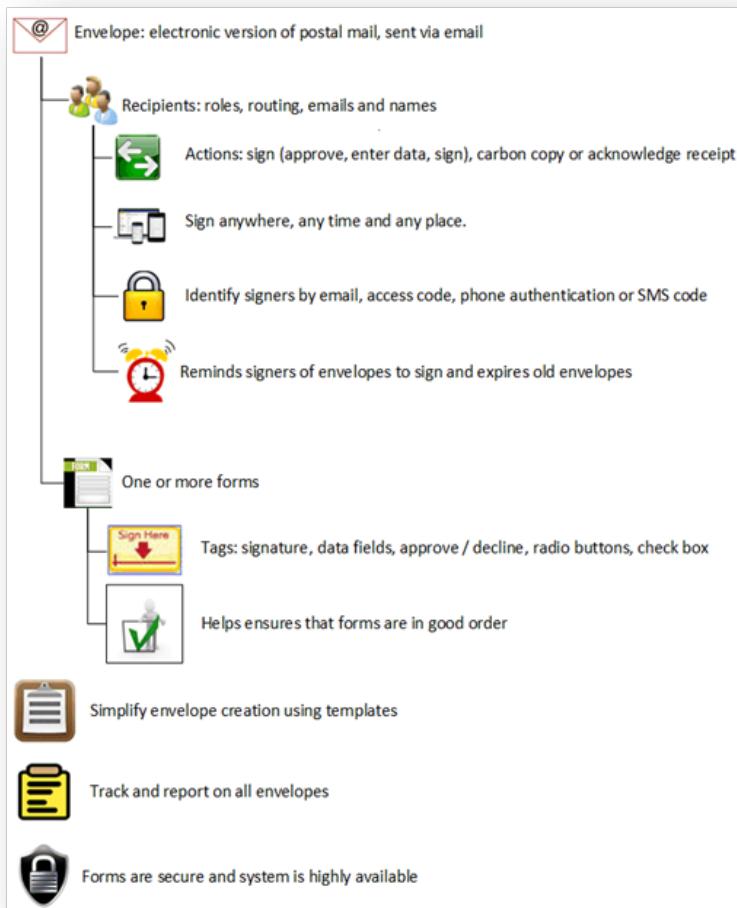


Training Agenda

- Concepts and Terminologies
- Accessing and Completing the PowerForm
- Complete and Sign DocuSign Envelope
- Signing Options
 - Finish Later
 - Decline to Sign
- Adopt a Signature



DocuSign Concepts and Terminologies



- **Envelope** - A DocuSign envelope is a container, used in sending one or more documents to recipient(s) for signature using the DocuSign system. Each document has multiple pages.
- **Tag** - A DocuSign tag is an interactive field. Tags can be placed on a document to indicate required fields or actions; a tag can prompt a signer to enter specific information, or initial in a particular location. Placing tags on a document guides the signer through the signing experience.
- **Reminder** – A reminder is an email notification sent to signer(s) automatically by the system. When reminders are enabled, you specify when and how often to send email notifications.
- **Expirations** - By default, all envelopes that are in process will expire if the recipient(s) does not complete the envelope. Expiration is configured at the account and can be overwritten at the envelope level. An option to send signers an expiration warning can be configured. When a document expires, the status changes to Voided and it can no longer be viewed or signed by recipients.
- **Template** – A DocuSign Template allows you to create a standard document, with set recipient roles, signing tabs and information fields. Templates can also contain the signing instructions for the document and any signature attachments. Templates help streamline the sending process when you frequently send the same or similar documents.
- **PowerForm** – Referred to as Web PowerForm, utilizes DocuSign Template and can be distributed via email or the web with a unique, secure URL automatically generated by the DocuSign system.

Accessing and Completing the PowerForm

Accessing the PowerForms

BlueCross BlueShield

blueaccess for Producers

Feedback Text Size: A A A

Home Individual Products Country Agency Prospective Producer Provider Finder® Prescription Drugs Contact Us Log In

Downloadable Forms

Forms for Individual Products
Forms for Regulated Small Business (2-50)
Forms for Mid-Market (51-150)
Forms for 151+ Employees

Downloadable Forms for Regulated Small Business (2-50)

Regulated cases with 50 or fewer TOTAL employees on average over the prior calendar year including all eligible and ineligible employee types such as temporary, union, seasonal, and part-time employees. This includes employees of Controlled/Affiliated entities and Domestic Parent companies.

New Business/Enrollment Forms

To review and sign your request now electronically, select the Sign Now option below. Or you can download and save the form to review and sign at a later date.

Form Name	Digital Form	Download
2019 Enrollment Package – Includes Benefit Program Application (BPA) for New Small Groups 2-50, Employer Group Information (EGI) Form, and Artifacts Documentation	sign now	N/A
2019 Benefit Program Application (BPA) – for accounts effective 1/1/19 and after	sign now	download form

Accessing the PowerForm

Find the Form Name from the Blue Access for ProducersSM Portal

To electronically complete and sign the form, select **Sign Now**

Accessing the PowerForms

PowerForm Signer Information

Fill in the name and email for each signing role listed below. Signers will receive an email inviting them to sign this document.

Please enter your name and email to begin the signing process.

Your Role:

Submitter

Your Name:

Your Email:

Please provide information for any other signers needed for this document.

Role:

Group

Name:

Email:

Role:

Producer

Name:

Email:

Role:

GA

Name:

Email:

➤ Entering Recipient's Information

- Enter the full name and e-mail address of the recipient(s) of the envelope.

Accessing the PowerForms

Please Review & Act on These Documents



Please review & sign your document. To begin the process of reviewing and signing your documents, please click the button above. Signing will not be complete until you have reviewed the agreement and you have confirmed your signature.

[View More](#)

 Please read the [Electronic Record and Signature Disclosure](#).
 I agree to use electronic records and signatures.

CONTINUE

OTHER ACTIONS ▾

Important: Click FINISH to send the Envelope to the Group.

BENEFIT PROGRAM APPLICATION ("BPA")

(All items are applicable to Grandfathered and Non-Grandfathered Insured Small Group Accounts unless otherwise specified.)

(All items are applicable to the HMO plan and the Non-HMO plan unless otherwise specified.)

➤ Agree to Electronically Sign

- Review and agree to the **Electronic Records and Signature Disclosure**.
- Select **Continue** to start the signing process.

Completing the PowerForm

Please review the documents below.

FINISH OTHER ACTIONS ▾

START


BlueCross BlueShield
of Texas

dearborn national[®]
1001 E. Lookout Drive
Richardson, Texas 75082

SMALL EMPLOYER BENEFIT PROGRAM APPLICATION
(Employer Application)

(The following information only applies if selecting a Consumer Choice plan)
You have the option to choose a Consumer Choice Health Maintenance Organization (HMO) health care plan that, either in whole or in part, does not provide state-mandated health benefits normally required in evidences of coverage in Texas. This standard health benefit plan may provide a more affordable health plan for you although, at the same time, it may provide you with fewer health plan benefits than those normally included as state-mandated health benefits in Texas. If you choose this standard health benefit plan, please consult with your insurance agent to discover which state-mandated health benefits are excluded in this evidence of coverage (Certificate of Coverage).

Application is hereby made to Blue Cross and Blue Shield of Texas (BCBCTX) and/or Dearborn National[®] Life Insurance Company ("Dearborn National").

Legal Name of Company: [REDACTED]

Employer Identification Number (EIN): [REDACTED] Nature of Business: [REDACTED] Standard Industry Code (SIC): [REDACTED]

Physical Address (number & street), City, State, ZIP: [REDACTED] FX: [REDACTED]

E-Mail Address of Authorized Company Official: [REDACTED] Telephone Number: [REDACTED]

Secondary E-Mail Address, if different from Authorized Company Official: [REDACTED] FAX Number: [REDACTED]

Complete Mailing Address, if different from physical address: [REDACTED]

Billing and Correspondence to the attention of: [REDACTED]

Billing Method Selection:
Please select one of the following billing methods.
(If no selection is made, your benefit plan(s) will default with their current billing method)

Composite Billing
 Age Billing

The Blue Access for Employers (BAE) contact person is the individual authorized by the Employer to access and maintain its account/employee information.
Name and title of the BAE contact person: [REDACTED] [REDACTED]

E-mail address of BAE contact person: [REDACTED]

Proprietary and Confidential Information of Blue Cross and Blue Shield of Texas. Not for use or disclosure outside Blue Cross and Blue Shield of Texas. Employer, their respective affiliated companies and third party representatives, except as written in evidence of Blue Cross and Blue Shield of Texas. Blue Cross and Blue Shield of Texas is a registered trademark of Health Care Service Corporation, a Mutual Legal Reserve Company, an independent licensee of the Blue Cross and Blue Shield Association.

*Products and services marketed under the Dearborn National[®] brand and the star logo are underwritten and/or provided by Dearborn National Life Insurance Company (Dearborn, IL) in all states except New York, the District of Columbia, the United States Virgin Islands, the British Virgin Islands, Guam and Puerto Rico.

Dearborn National[®] Life Insurance Company does not provide Blue Cross and Blue Shield of Texas products and services, and is a separate company.

TXBPASG-OFF-EX06.18 Page 1 DocuSign Envelope ID: 85a1087-2b04-4096-9ff4-31a0a06f2003

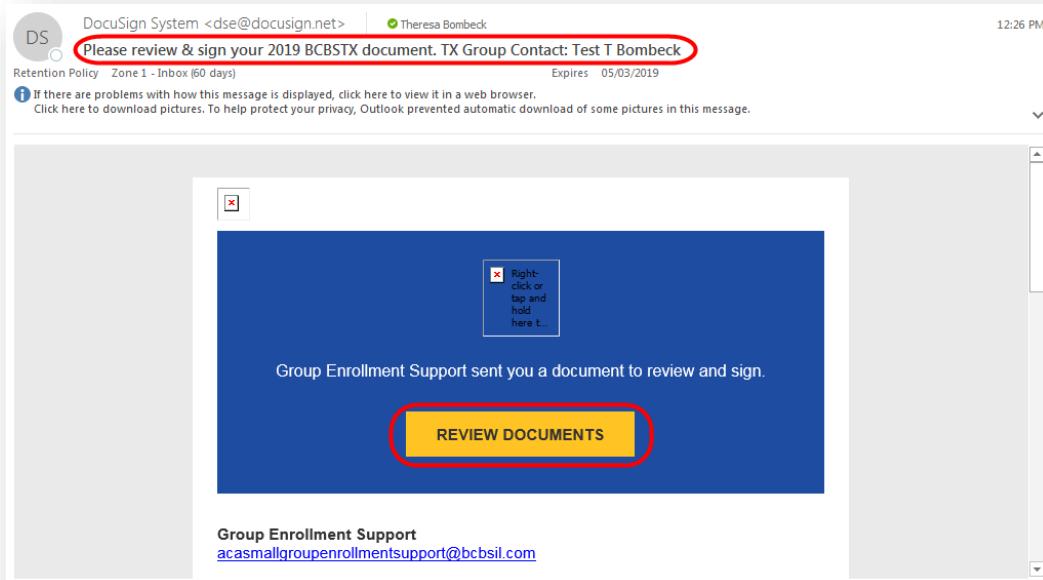
➤ PowerForm Completion

- Enter the required information on every form, sign when appropriate and select **FINISH** to complete the form and send the DocuSign paperwork to the Group.

Note: If **FINISH** button is not clicked and “X” is clicked to close then the DocuSign paperwork will not move forward to the Group and a new PowerForm will need to be submitted again.

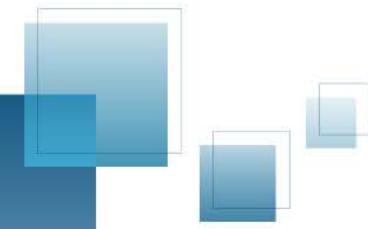
Complete and Sign DocuSign Envelope

➤ Complete and Sign DocuSign Envelope

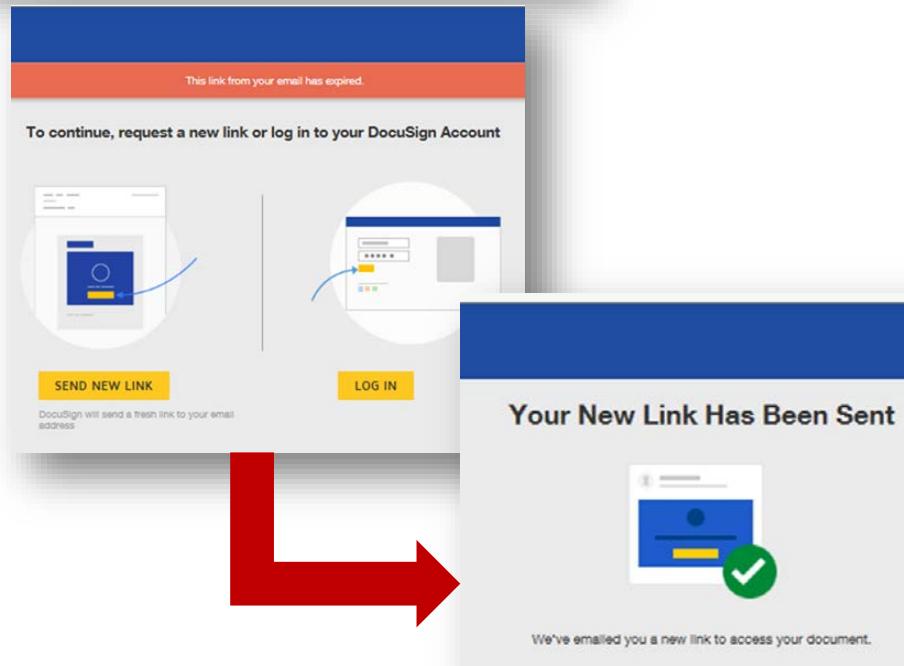


- When DocuSign e-mail is received from DocuSign, click on **REVIEW DOCUMENTS** to display DocuSign Documents.
- Complete filling out information.
- Select **FINISH LATER** to save entered information and return at a later time.
- If the DocuSign envelope is no longer needed, **DECLINE TO SIGN**.

Note: The **REVIEW DOCUMENTS** link will expire within 48 hours or five clicks and a new DocuSign email with a new link will be systematically sent by DocuSign.

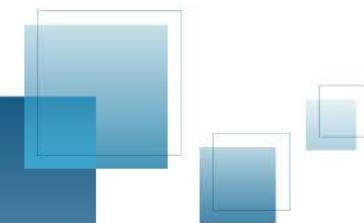


DocuSign Review Documents Link Expires

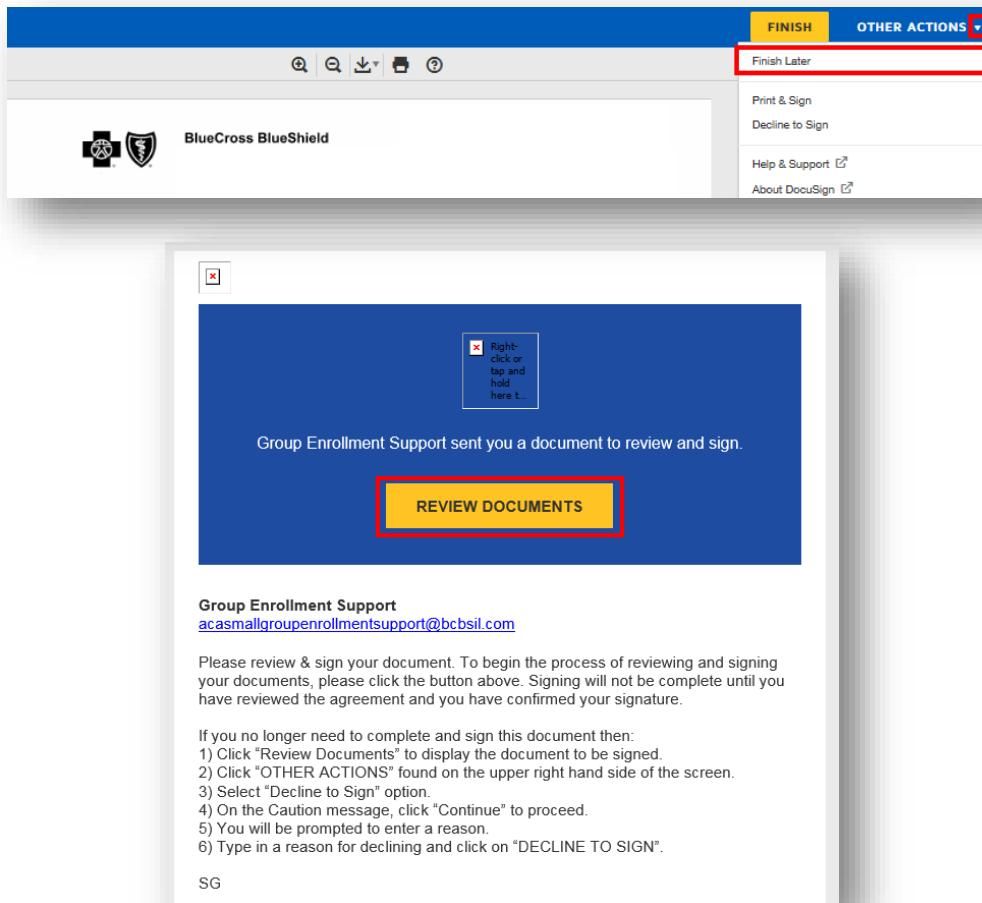


➤ Review Documents Link Expires

- URL link expires after 48 hours of being sent or after it has been clicked five times.
- When the **REVIEW DOCUMENTS** link is clicked and the link has expired, a message will be displayed indicating “*The link from your email has expired.*”
- A new link can be sent, by clicking the **SEND NEW LINK** button. A message will display that lets the user know a new link has been sent.
- DocuSign will send a new e-mail systematically with a new **REVIEW DOCUMENTS** link.
- Click **REVIEW DOCUMENTS** link from the new e-mail to access the DocuSign Documents.



Signing Option “Finish Later”

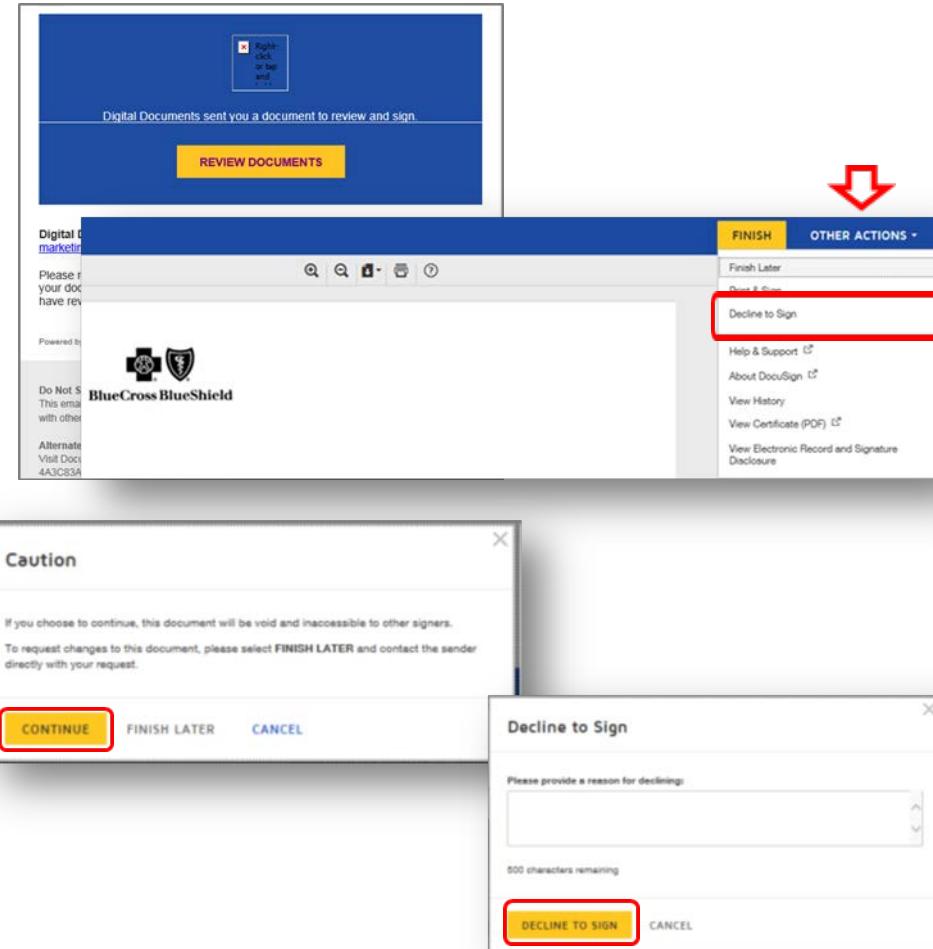


➤ Finish Later

- Click on the **OTHER ACTIONS** dropdown.
- Select **Finish Later** to save the document and complete the form, at a later time.
- Reopen the document from the DocuSign e-mail, by clicking on the **REVIEW DOCUMENTS** BUTTON.
- Continue completing and signing the document.

Note: DocuSign system will send a reminder e-mail if the envelope is incomplete. Envelope will be systematically voided if not signed by all parties within 30 days.

Signing Option “Decline to Sign”

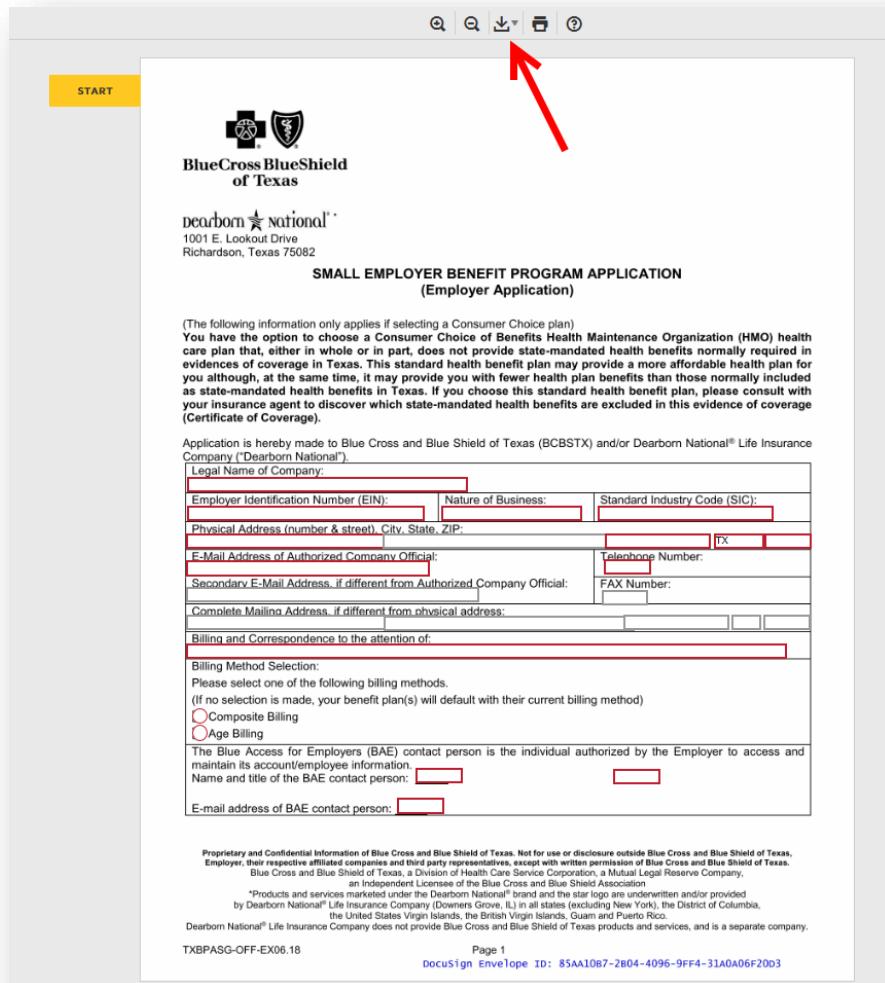


➤ Decline to Sign

If a DocuSign document no longer needs to be completed and signed, user should select the 'Decline to Sign' option, from the dropdown.

- Reopen the document from the DocuSign e-mail by clicking on **REVIEW DOCUMENTS**.
- Click the **OTHER ACTIONS** dropdown.
- Select **DECLINE TO SIGN**.
- A 'Caution' message will display, proceed by clicking on **CONTINUE**.
- 'Decline to Sign' message displays, with text box. User should explain reason for declining to sign the document, in the text box.
- Finally click **DECLINE TO SIGN**.

Envelope Completion and Sending to BCBS



Small Employer Benefit Program Application (Employer Application)

(The following information only applies if selecting a Consumer Choice plan)
You have the option to choose a Consumer Choice Health Maintenance Organization (HMO) health care plan that, either in whole or in part, does not provide state-mandated health benefits normally required in evidence of coverage in Texas. This standard health benefit plan may provide a more affordable health plan for you although, at the same time, it may provide you with fewer health plan benefits than those normally included as state-mandated health benefits in Texas. If you choose this standard health benefit plan, please consult with your insurance agent to discover which state-mandated health benefits are excluded in this evidence of coverage (Certificate of Coverage).

Application is hereby made to Blue Cross and Blue Shield of Texas (BCBSTX) and/or Dearborn National® Life Insurance Company ("Dearborn National").

Legal Name of Company: _____

Employer Identification Number (EIN): _____ Nature of Business: _____ Standard Industry Code (SIC): _____

Physical Address (number & street), City, State, ZIP: _____ TX _____

E-Mail Address of Authorized Company Official: _____ Telephone Number: _____

Secondary E-Mail Address, if different from Authorized Company Official: _____ FAX Number: _____

Complete Mailing Address, if different from physical address: _____

Billing and Correspondence to the attention of: _____

Billing Method Selection:
Please select one of the following billing methods.
(If no selection is made, your benefit plan(s) will default with their current billing method)

Composite Billing
 Age Billing

The Blue Access for Employers (BAE) contact person is the individual authorized by the Employer to access and maintain its account/employee information.

Name and title of the BAE contact person: _____

E-mail address of BAE contact person: _____

Proprietary and Confidential Information of Blue Cross and Blue Shield of Texas. Not for use or disclosure outside Blue Cross and Blue Shield of Texas, Employer, their respective affiliated companies and their respective service providers, except as provided in the Agreement of Blue Cross and Blue Shield of Texas. Blue Cross and Blue Shield of Texas is a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an independent licensee of the Blue Cross and Blue Shield Association.

*Products and services marketed under the Dearborn National® brand and the star logo are underwritten and/or provided by Dearborn National® Life Insurance Company (Downers Grove, IL) in all states (excluding New York), the District of Columbia, the United States Virgin Islands, the British Virgin Islands, Guam and Puerto Rico.

Dearborn National® Life Insurance Company does not provide Blue Cross and Blue Shield of Texas products and services, and is a separate company.

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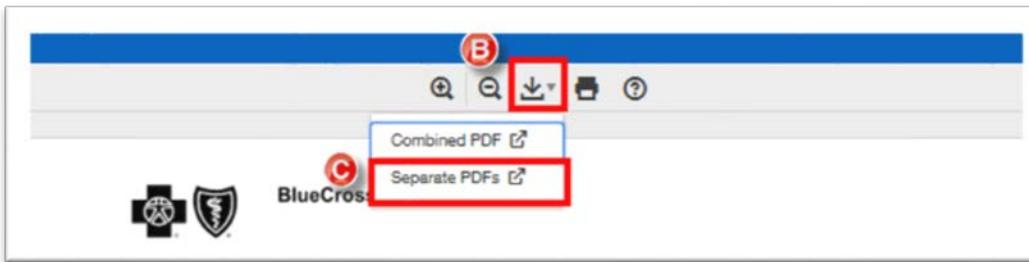
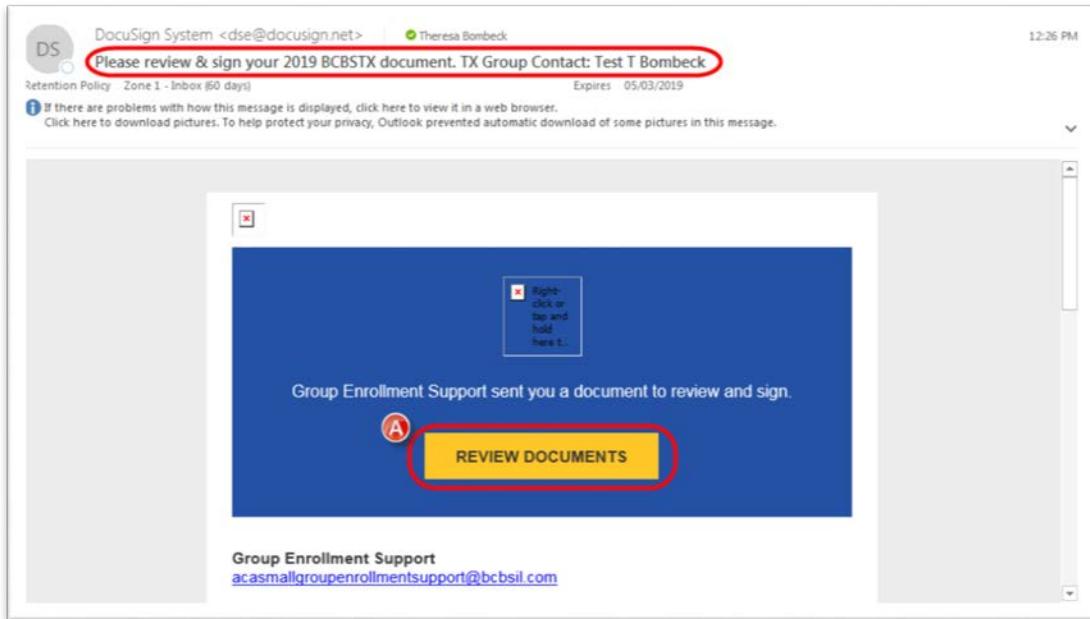
Page 1

docuSign Envelope ID: 85AA10B7-2B04-4096-9FF4-31A0A06F2003

➤ Envelope Completion

- DocuSign will send **Completed** email to all the signers.
- User will need to **click VIEW DOCUMENTS AND** download a PDF version of the completed DocuSign document (Please see red arrow).
- User will then submit to Blue Cross and Blue Shield (BCBS), following their current process.

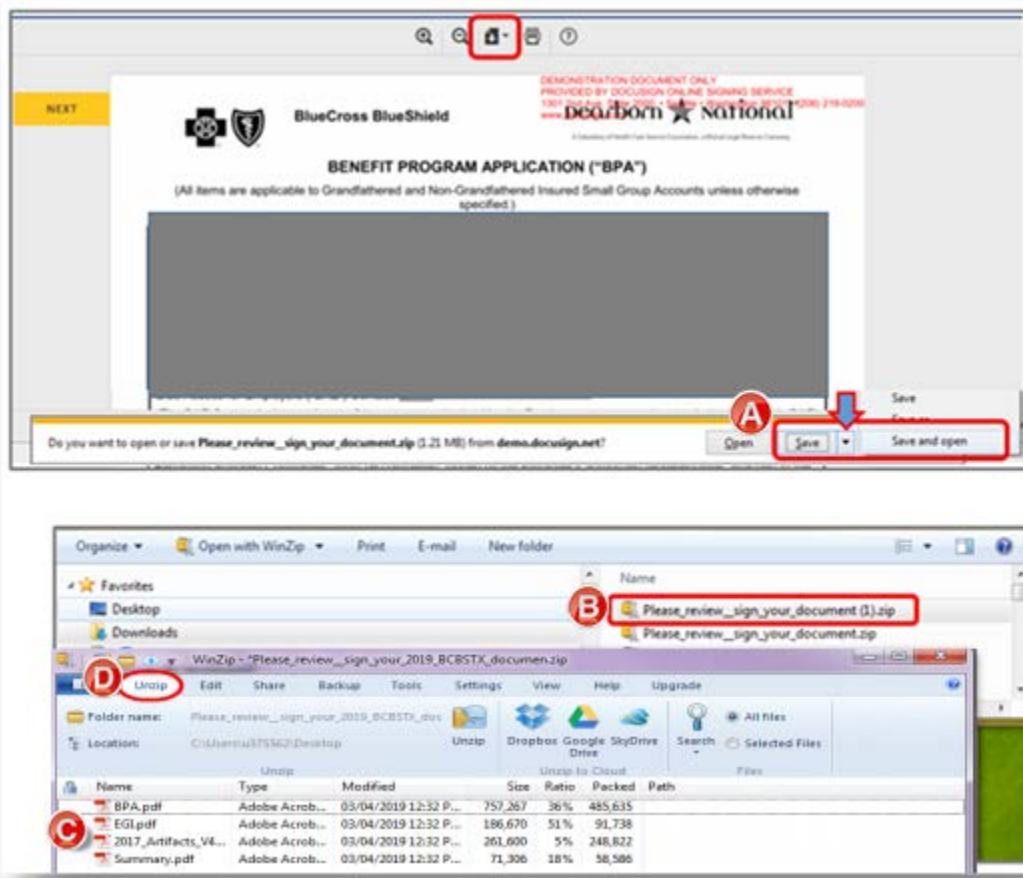
Envelope Completion and Sending to BCBS



➤ Download Completed and Signed DocuSign Document

- When completed e-mail is received from DocuSign, click on **REVIEW DOCUMENTS** to display DocuSign Documents.
- From the DocuSign Document click the down arrow icon (), to download PDFs.
- Select 'Separate PDFs' so that each individual PDF can be attached in the Enrolment Tool.

Envelope Completion and Sending to BCBS



➤ Download Completed and Signed DocuSign Document

- Click on the down arrow, by the **Save** button and select **Save and Open** from the dropdown list.
- The DocuSign Documents download as a zip file.
- The File Manager displays the PDFs within the downloaded zip file.
- Unzip the downloaded zip file and save in an existing folder or create a new folder and then save the document.

“In Process” DocuSign Document

Phone: 6304584568 Fax: na
Contact: jo jo
One of the account authorized by the Employer to access a
Phone: 6304587859 Fax: 6304587859
Policy Anniversary Date: 1 / Mar 1st 2017
Security Act of 1974 (ERISA) is a federal law that sets minimum standards for pension plans. In general, all employer groups, insured or ASO, are subject to ERISA. ERISA also applies to state and local governments and public school districts, and "church plans" as defined by the law.
1: Yes No
Beginning Date: N/A / 1 End Date: N/A / 1 (month/day)

➤ “In Process” – DocuSign Document

- In case a DocuSign PDF is downloaded, prior to being completed and signed, there will be an “In Process” watermark displayed, diagonally on the center of the page.
- “In Process” DocuSign PDFs should not be attached in the Enrollment Tool.
- The “In Process” watermark will not display on signed and completed DocuSign PDFs.

The background of the slide features a subtle, abstract design. It consists of several overlapping squares in varying shades of blue, ranging from light cyan to dark navy. These squares are positioned in the upper right quadrant of the slide, creating a sense of depth and modernity.

Adopt a Signature

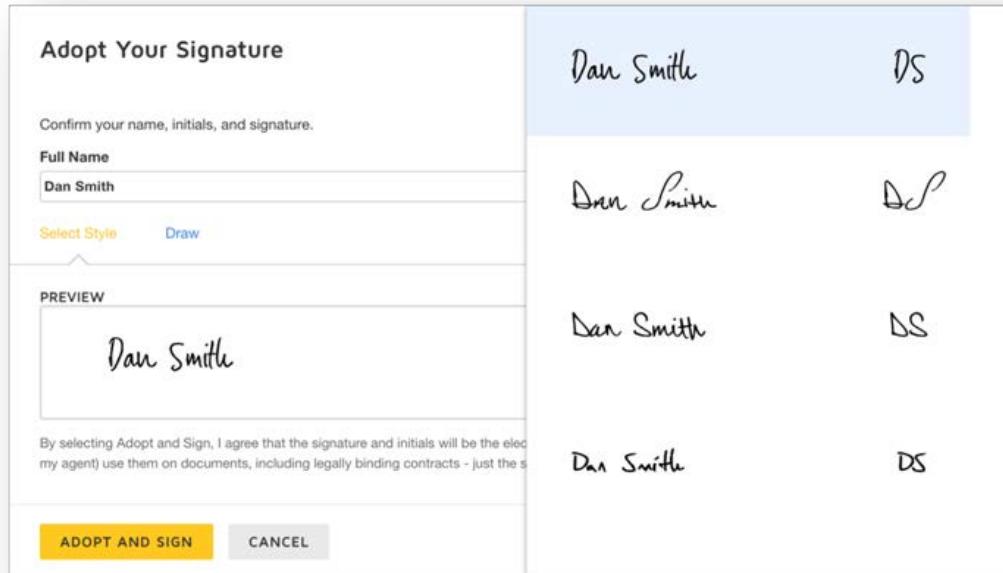
Adopt a Signature



➤ Adopting Your Signature

- After Selecting the **SIGN** tag, signer will be presented with an “Adopt Your Signature” pop-up window, to adopt a signature.
- Select the **ADOPT AND SIGN** button, to adopt and save your signature information.

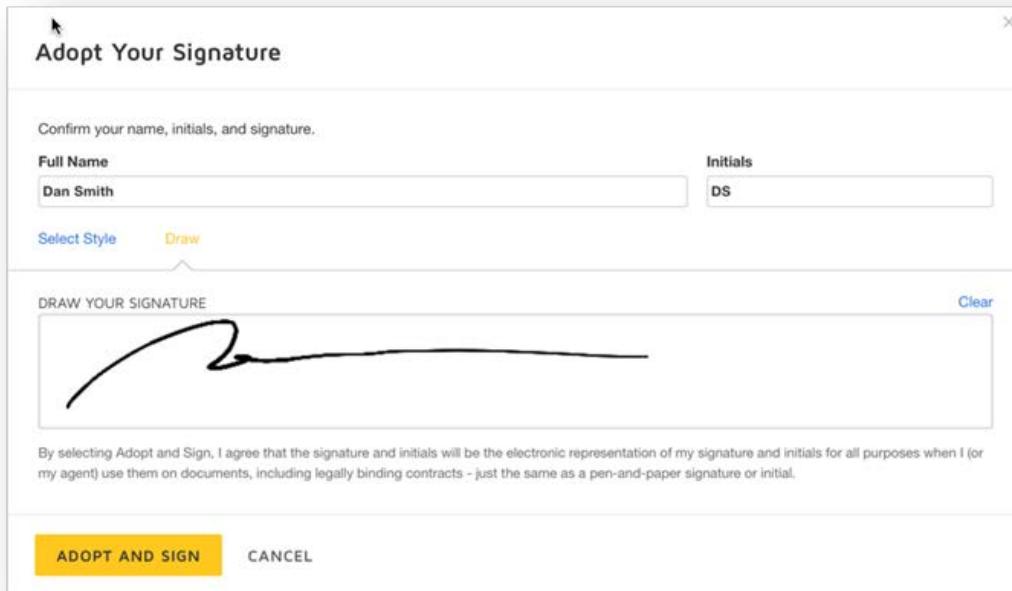
Adopt a Signature



➤ Selecting Signature Style

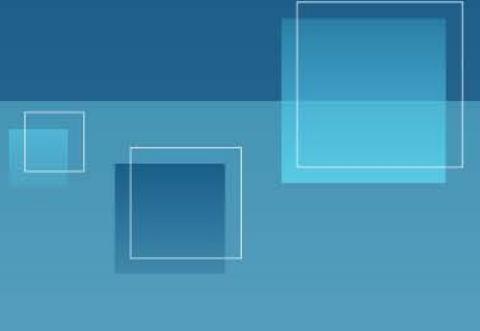
- Select **Style Type** to select from pre-defined signature layouts.
- Select **Adopt and Sign** to adopt the signature style.

Adopt a Signature



➤ Drawing Your Signature

- Select **Draw** to draw your desired signature in the box.
- Select **Adopt and Sign** to adopt the drawn signature.



**For additional information please see the
Group, Training & Admin section on Blue
Access for ProducersSM.**



BlueCross BlueShield of Texas

A Division of Health Care Service Corporation, a Mutual Legal Reserve Company,
an Independent Licensee of the Blue Cross and Blue Shield Association