

Created by: RCoE Testing & Training

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

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Regulatory Requirements:

The Regulatory Requirements pertaining to non-discrimination based on health status as well as nondiscrimination based on race, color, national origin, sex, age, or disability. Underwriters should not establish or approve separate rules for initial and/or continued eligibility, or separate premium rates that would apply discriminately to an individual member of a group based on any of these factors.

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 Group Enrollment tool.

Overview of the Enrollment Process

The eSales Small Group & Middle Market 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.

Enrolling a New Group



Once you have gathered the necessary information and documentation from your client, you access the eSales **Small Group & Middle Market 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.

Group Sales Tool Application: Login

Step	Action	
•	When enrolling a case, click on the Small Group and Middle Market Enrollment link. Small Group & Middle Market Enrollment	
	 Metallic Plans for Small Group Prospects with 50 or fewer total employees Standard Insured Plans for Middle Market Prospects with 51+ total employees 	
	Result: The Enrollment window opens.	



Enrollment with a Quote

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

Start Enrollment by Accessing Your Final Quote: A group can be enrolled with a quote and some

of the information such as the Market Segment and Division will transfer over from the quoting system.

Step	Action			
Enrollment	On the Group Sales Enrollment Page, search Status "QUOTED" and enter the "Quote ID" in the Quote Number Field. If the Quote ID is not available. Search by the account name.			
	Search Existing Accounts/Quotes 🔹			
	Search by Quoted status to start enrolling a quoted prospect, or Start SG Enrollment without a Quote			
	Account Name: Quote Number: 1147099 Status: Quoted Agent: Account Number: Effective Date:			
	Division: Texas Case ID: Market Segment: All			
	Clear Clear			
	(R) (G) 1 - 1 of 1 (D) (R)			
	Prospect Effective Date Agent Sales Executive Market Segment Quote #			
	Click Start Enrollment to begin the Enrollment process.			
Enrollment Home	The Enrollment Home Page: Account Information Page will display for Enrollment Data Entry completion.			
Page	BlueCross BlueShield			
Account	Contact Us FAQ Help Sates Tools			
Information	CeSales Tools Home > Enrollment Home > Account Information Welcome back JUAN NAVARRO 02/10/2021 Log Out			
	Enrollment Enrollment Home			
	Account Name: SONYA TXMMQUOTE 2.10 Market Segment: Middle Market Account Number: Effective Date: 03/01/2021			
	Producer: JUAN NAVARRO Status: Pre-enrollment Quote Number: 114/155 Case ID: 288253 Created By: External			
	E Reports Documents List Attachments			
	Discontinue DocuSign Envelope ID: (?) Import			
	<u>ea</u>			
	Account Information Additional Information Plan Selections Member Census Rates Account Summary Release for Enrollment			
	Account Information			
	Continue			
Enrollment Home	The Account Information header on the Enrollment Home page includes the following information:			
Page	Account Name			
	Market Segment			
	Account Number			
	Effective Date			
	Producer			
	• Status			
	Quote Number			
	Case ID			
	Created By DocuSign Envelop ID (when applicable)			

	Account Name: SONYA TXMMQUOTE 2.10	Market Segment: Middle Market	Account Number:	Effective Date: 03/01/2021
	Producer: JUAN NAVARRO	Status: Pre-enrollment	Quote Number: 1147155	Case ID: 288253
	Reports Documents List		è	ULog 🚯 History
	Discontinue	DocuSign Envelope ID:	0	Import
	The header information includes addit	rional huttons available duri	ing enrollment	
	Beports: Opens a list of availa	able reports (only available :	after UW approval.)	
	Documents List: Opens a list	of required documents		
	Attachments: Opens all accord	unt enrollment nanerwork a	attachments	
	\circ All active attachmen	ts are transferred from Reg	uest Center into Enrollm	ent
	Discontinue: A case can be d	iscontinued at any time dur	ing the enrollment proce	ess by clicking the
	Discontinue button, Enrolling	cases that have not been r	released for enrollment re	eview will be auto
	discontinued by the system 6	0 days from the effective da	ate	
	Log: Opens a text box used to) enter or review notes.		
	 Once the user begin 	s enrolling, account details (can be entered in the LOC	G. The LOG will be
	utilized by all users r	per assigned case for additic	onal notated information	when applicable up to
	and including missin	g information and Producer	/Sales follow up docume	ntation.
	 Any follow up inform 	nation details should be add	led to the LOG.	
	Note: If there have <i>not</i> been any i	notes added to the Log, the	radio button will appear	blue, however once
	notes are added, the Log radio bu	tton will appear orange.		
	Case ID: 285730			
	Mistory			
	Account Log			
	Add Entry Log Entries			
	• History: Opens the Activity H	istory window that shows th	ne Activity Date, Activity,	Status, and Duration of
	an account.			
	Account Log Account Name: TX Test DEMO Acco	sunt Number:		
	Add Entry Log Entries			
Enrollment Home	General Information Section:			
Page	General Information			
	*Employer's Legal Name: SONYA TXMMQUOTE *Employer ID Number (FIN):	2.10	*Does this group cover	domestic partners?: ○Yes ○No
General	*SIC Code: The Find 8111	-Legal services	*Is Group	subject to COBRA?: OYes No
Information	*Policy Effective Date: 03/01/2021 •			
	*Case Submitted to BCBS: 02/10/2021			
	Sales Rep. R/D/1: / /			
	Contact Name:		Contact Title:	
	Phone (numbers only): Ext.		E-Mail Address:	
	Enter all required information on the C	Seneral Information page u	ising the paperwork as th	e source document.
	Producer/GA is responsible for change	em will be carried forward in ng data in enrollment to ma	to the enrollment system	nowever, the
	(*) are required.		acti paper work. All fields	

	Answer Yes or No for the following questions:
	*Does this group cover domestic partners?: OYes ONo
	*Is Group subject to COBRA?: Oyes ONo
	Note1: Once the company EIN is entered, an alert will appear if there is an account in workflow with the same EIN. The alert reads " <i>Alert: A group with the same EIN has been previously entered in this system. This is an informational alert only.</i> " If the Producer/GA receives this alert, they will confirm the EIN with the client and make applicable updates. However, the tool will still allow you to enroll the case.
	① Alert: A group with the same EIN has been previously entered in this system. This is an informational alert only.
	Note2: When a Blue Access for Employers (BAE) contact, name is entered, the email address field becomes required.
Employee	Employee Retirement Income Security Act (ERISA):
Retirement Income Security Act (ERISA)	Employee Retirement Income Security Act (ERISA) *ERISA Regulated Group Health Plan : • Yes O No *ERISA Plan Year - Beginning Date: *ERISA Plan Sponsor: * ERISA Plan Year - End Date:
	Answer the 'Employee Retirement Income Security Act (ERISA)' question. Note: Additional fields open when the Yes radio button is selected The ERISA Plan Sponsor and, ERISA Plan Year beginning, and end date are required fields. Complete all required fields.
	Physical Address/Contact Information:
Physical Address/Contact Information	Enter the Company's Physical Address/Contact Information. If there are separate physical and mailing addresses, select the yes radio button for billing and no for mailing address to populate the additional information. If the 'Yes' radio buttons are checked for billing and/or mailing addresses , additional fields will populate. Enter all required information.
	Physical Address/Contact Information
	*Address 1: Address 2:
	*City: State: Texas *Zip Code: 75080 *County: Colling
	*E-Mail Address of Authorized Secondary E-Mail Address:
	*Phone (numbers only): Ext. Fax (numbers only):
	*Administrative Contact: Contact Title: *Different Billing Address?: ○Yes ●No *Different Mailing Address?: ○Yes ●No
	Note: The County will default based on the zip code entered, unless it is a shared zip code. When there is a shared
	zip code "Please select" will populate in the Zip Code field.
	*County: Please Select V
	An informational message including the link to USPS.com populates instructing the user to visit USPS to locate the appropriate county.

Find Zip Code	① Please refer to the USPS website to confirm accurate address information. Visit USPS
(County) using	Click on the Visit USPS link to go to the USPS.com web page.
USPS.com	In the USPS.com web page, click Quick Tools and select Look Up a Zip Code.
	Delivery Lesations Delivery Lesations Delivery Lesations Delivery Calculate a Price Delivery Delivery Delivery Delivery
	In the Zip Code by Address tab, enter the accounts Street Address , City , select State from drop down and click the Find radio button.
	Look Up a ZIP Code [™]
	By Address By City and State Cities by ZIP Code" Enter a component or readistrial street address, city, and state to one a specific ZP Code". Enter city and state to one at the ZIP Code" for see the cities it covers. that city.
	Find by Address Find by City & State Find Cities by 2IP
	ZIP Code™ by Address
	Enter a street address along with city and state OR enter a street address and ZIP Code", O
	Company
	Timeet Address Apr@ute/Dear
	Diy Baka
	Datas TX - Texas V
	20 Code"
	Find
Select County	Result: the full address populates
	ZIP Code™ by Address You entered:
	16731 COT RD OXLLSTX If more than one address matches the information provided, try narrowing your search by entering a street address and, if applicable, a unit
	number. Edit and search again.
	Click on the to expand the address to see the county.
	Result: The mailing industry details window expands and the County for that address is listed.
	16731 COIT RD DALLAS TX 75248-1750
	CARRIER ROUTE COUNTY C006 DALLAS
	Select this county from the dropdown in the County Field (Group Sales)

Address Message	If the Producer/GA receives a message that states "The address provided appears to be incorrect. Please input the			
	correct address.", Verify the address has been entered correctly and click on the "here" link to continue the			
	enrollment data entry.			
	Q Attention			
	The Address provided appears to be incorrect. Please input the correct Address. To continue with the address as entered, click here . An Incorrect address or zip code may result in incorrect rates.			
	In the Producer Information section			
Producer				
Information	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			
	Renter the email address to validate it.			
	Producer Information			
	*Primary Producer *Primary Producer Name: The Find JUAN NAVARRO			
	*Tax ID/SSN: 451584905 *Producer #: 000001023			
	*E-Mail Address: *Confirm E-Mail Address:			
	Telephone #: 9565852677 Complete Address: 119 E 12th St			
	Fax #: 9565852677			
	Please reach out to your Sales Representative if there are multiple producers involved and commissions need to be split.			
	General Agent			
	General Agent Name: Tind			
	Tax ID/SSN: Producer #: E-Mail Address: Confirm E-Mail Address:			
	Telephone #: Complete Address:			
	Fax #:			
	Subproducer			
	Subproducer Name: Clear			
	Subproducer #:			
	* - Required			
Continue Button	Click the green Continue radio button to move to the Additional Information page.			
	Continue			
	Next, you will enter additional group level information.			
Additional				
Information	Answer Yes or No for the following questions:			
	Select Current Health Carrier from the drendown list			
	Previous Continue			
	Public Entity: Oyes ©No			
	Include Retirees: Oyec ONo			
	*Current Health Carrier:			

Additional Information Eligibility	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 last following 0 v days of employment.
	Check "Yes" or "No" to the <i>"Waive the waiting period on initial enrollment?"</i> question based on paperwork.
	Note 1 : If "No" is selected for the "Waive the waiting period on initial Enrollment", <i>then "Number of Employees serving waiting period"</i> field will populate and become a required field. If yes is selected, this field will not be visible.
	Eligibility* *Waive the waiting period on initial enrollment? Yes No *Number of Employees serving waiting period:
	Note 2: If group selects No, member effective dates would be required for any applications received where the member is within the groups waiting period. If group selects Yes, member effective dates are not needed on enrollment applications
	Enter the Eligibility Date information. The eligibility date defaults based on the groups effective date (EX: 1 st or 15 th of the month). Select appropriate days of employment from drop down (EX: 0,30,60)
	The Eligibility Date for an employee who becomes eligible after the Effective date of the Group's Health Insurance Plan is determined by the 1st following 0 v ays of employment.
HSA Vendor Selection	If an HSA plan is selected on the paperwork, and HSA Bank or Benefit Wallet is the vendor, check the appropriate vendor from the available options. If no vendor is selected or one other than HSA Bank or Benefit Wallet is selected on the paperwork check "Other/None.
	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
	If an HSA plan was not selected, this field may be left blank
Continue Button	Click the green Continue radio button to move to the Additional Information page.
	Continue
	Plan Selections page : Using the documentation provided, select the appropriate health, dental, vision and life
Plan Selection Options and	plans as applicable. All fields marked with an asterisk (*) are required.
Offers	HMO Plan: HMO plans are specific to the state that offers it. If a group is selecting an HMO plan and has applicants
	who reside out of the State of Texas, the group must select a PPO plan to enroll the out of state applicants.
	Note: The "Yes" radio button will default for Health, however if the group has not elected a Health plan (FX: dental
	only group) then the "No" radio button must be checked.

	View Plans Request/Response	
	Health O Yes O No	
	Options and Offers -	
	PPO and HMO Options HMO Options In-Vitro Fertilization Speech & Hearing O Decime ? Caccept ?? O Decime ?? Decime ??	
	Options and Offers	
	In-Vitro (PPO and HMO) and Speech & Hearing (HMO only) defaults as "Decline" but can be changed to "Ac group elects this coverage on the BPA	cept" if
	Account Information Additional Information Plan Selections Member Census Rates Account Summary Release for Enrollment	
	Previous Continue	
	View Plans Request/Response Health ● Yes ● No	
	Options and Offers+	
	In-Vitro Fertilization Speech & Hearing Accept [2] Accept [2] Decline [2] Decline [2]	
	BlueChoice - PPO Plan # Ded In/Out Coins In/Out OPX In/Out Office Visit/Specialist ER Copsy/ER Coins IP In/Out OP Surg In/Out Preferred Rx MTBCP002"** \$500/\$10000 100%/50% \$1500/Unlimited \$30/\$60 \$500/100% 100%/50% \$0/\$10/\$50\$/\$250	
	BlueChoice - PV OPX In/Out OP	
Dental Plan	BlueChoice - PPO Plan # Ded In/Out OPX In/Out OPX In/Out OPX In/Out OPX In/Out Preferred Rx MTBCP002"*** \$S00/\$10000 100%/50% \$S00/100% 100%/50% \$0/\$10/\$505/\$205 \$0/\$10/\$505/\$205/\$205/\$205/\$205/\$205/\$205/\$20	fields
Dental Plan Selection	BlueChoice - PPO BlueChoice - Select the splicable - Select the applicable dental plan. BlueChoice - PPo	fields
Dental Plan Selection	BlueChoice - PPO Plan # Ded In/Out OPX In/Out OPK In/Out<	fields
Dental Plan Selection	BlueChoice - PPO BlueChoice - PPO BlueChoice - PPO BlueChoice - Pontal PIA BlueChoice - Pontal - PO BlueChoice - PPO BlueChoice - PPO BlueChoice - PPO Blue - P	fields
Dental Plan Selection	BlueChoice - PPO Plan # Ded In/Out OPX In/Out OPX In/Out OPX In/Out OPX In/Out OPX In/Out Preferred Rx MTBCP002**** \$500/\$1000 80%/\$60% \$300/Unlimited \$30/\$60 \$500/80% 80%/\$60% \$00%/\$0% \$00%/	fields
Dental Plan Selection	BlueChoice - PPO Plan # Ded In/Out OPX In/Out OPX In/Out OPX In/Out OPX In/Out Preferred Rx Image: Ded In/Out Coins In/Out OPX In/Out OPX In/Out Stool/Stool Stool Stool <t< th=""><th>fields</th></t<>	fields
Dental Plan Selection	BlueChoice - PPO Image: Construction of the Visit/Speciality ER Copey/ER Coins IP In/Out Preferred Rx Image:	fields
Dental Plan Selection	BlackChoice - PPO Ded In/Out Office Visit/Specialize ER Copay/ER Coins IP In/Out Preferred Rx Hins # Ded In/Out Coins In/Out Office Visit/Specialize ER Copay/ER Coins IP In/Out Preferred Rx HitsCr002*** S500/1000 100%/S0% S100/Unlimited S300/600 S000/100% S0% S100/Unlimited S300/600 S00/100% S0% S100/Unlimited S300/600 S00/100% S0%/S000/Unlimited S300/600 S00/100% S0%/S00%/S000/Unlimited S300/600 S00/100% S0%/S00%/S00%/S00%/S00%/S00%/S00%/S0	fields
Dental Plan Selection	BiocChoice = PPO Ded In/Out Construction OPE construction	fields
Dental Plan Selection	Nucling Products - Detail Or Soft In/Out OPF I	fields
Dental Plan Selection	Image: Project Strate Strat	fields
Dental Plan Selection	Image: Strate Strate Strate Strate Strate Strate Str	fields

Member	
Consus	Member Census
Census	Previous
	Census Count: 0 Add Member
	() 0 - 0 of 0 ()
	View Member Name Relationship Code Gender Date of Birth Age Type Type State Health Plan Selected Dental Plan Selected
	Click on Import Census
	Import Census
	Note: Please download the undated 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 to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your deplace to Build as the Census Import Template in the file on your
	Click of the Certists Import Template, from the saved location, and select the appropriate Division from the drop down options. Click Continue. Save to your desktop. Core of the Certist Template, in our ready to input the core of information.
	Select File to unload:
	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
	The Import Census Window Displays
	Click Browse to locate the saved census
	Once the document is located click load Load File to upload document
	No Errors Occur click
	The members will load
nrollment	Once all census information has been entered, complete the Enrollment Totals field.
otal	Enrollment Totals Health Coverage
	* Total Employer Population 51 # of Employees Enrolling In Health 17
	+ Retirees (for those divisions that offer Retiree Coverage)
	- 1099 Independent Contractors (if not eligible)
	- Part-Time/Seasonal/Temporary (if not eligible) 23 Dental Coverage
	- Union Employees (if not eligible) # of Employees Enrolling In Dental 17
	- In Waiting Period (if not waiving waiting period on enrollment) # of Employees Waiving With Other Dental Coverage
	= Total Eligible # of Employees Waiving Without Other Dental Coverage
	Note: BCBS may restrict open enrollment for those accounts not meeting 75 percent participation.
	Note: The Health Coverage and Dental Coverage fields will default based on census enrollment.
	Intermoters can be deleted by clicking the red X Health Coverage Dental Coverage
	View Member Name Relationship Code Gender Date of Birth Age Type Type State Health Plan Selected Dental Plan Selected
	Image:
	X 2 View Gilberto test Employee M 03/20/1992 28 EO EO TX MTBCP027 DTNHR32 X 2 Chira Colvin test Employee M 11/07/1074 45 EO TV MTBCP037 DTNHR32
ates	Rates
ales	Previous
	View kating kequest kesponse
	Rating Model 04-Tier Composite
	Rating Model
	Rating Model

Continue Click the green Continue radio button to move to the Additional Information page. Button Click the green Continue radio button to move to the Additional Information page.	Summary	ensure accuracy. Separate panels with scroll bars display key information from previous pages. Each panel includes a Change button, which takes user to the applicable page if edits are required. Account Information Additional Information Member Census Plan Selections Rating Model
Continue Button Click the green Continue radio button to move to the Additional Information page.		BR354 Regulated Group Health Plan : No Physical Address/Contact Information AddRess/Contact Information AddRess/Contact Information Fuble Entry: No Include Retiress: No Current Carrier Health: United Healthcare Etiphility Wain: the weiling period on infail envolment: Yes The Etiphility Date for an employee who becomes elipible after the Effective date of the Group's Health Insurance Plan is detarmined by the Set day of the month.
Continue Click the green Continue radio button to move to the Additional Information page. Continue Click the green Continue radio button to move to the Additional Information page.		
Continue Button Click the green Continue radio button to move to the Additional Information page.		Change
Image: Section		2 Glierts test Employee H 00/201992 28 80 80 TX HTCP027 070-933
Continue Click the green Continue radio button to move to the Additional Information page.		3 Galvin Set Employee M 51/07/1974 46 ED ED TX MTBCR027 DTM-R33
Continue Click the green Continue radio button to move to the Additional Information page. Continue Click the green Continue radio button to move to the Additional Information page.		4 Isaac Isel Employee M 09/10/1978 42 ED ED TX MTBCR027 DTM-R32
Continue Click the green Continue radio button to move to the Additional Information page.		5 Michelle text Employee # 06/13/1975 45 E0 E0 TX MTBCR027 DTN=R32
Continue Click the green Continue radio button to move to the Additional Information page.		6 Michael test Employee M 10/16/1963 57 80 80 TX MT8CR027 07N=R32
Continue Click the green Continue radio button to move to the Additional Information page.		7 Humberto text Employee M 01/01/1966 55 EO BO TX MTBCP027 DTN/R32
Solution Statistics		8 David test Employee M 07/13/1983 37 80 80 TX MT8CP027 DTN/R32
Series Series P 22.09/1392 48 0 <th0< th=""> 0</th0<>		9 Eric Seat Employee M 11/11/1968 52 EF EF TX MT8CP027 DTN-R32
Section		9.1 Michele test Spouse // 12/08/1972 48 · · ·
Continue Click the green Continue radio button to move to the Additional Information page. Continue Click the green Continue radio button to move to the Additional Information page.		9.2 rendy test Dependent Child # 01/20/2010 10
Continue Button Click the green Continue radio button to move to the Additional Information page.		an martial and Restaurant in an an the amproximation martial and an anti-
Mark # Distriction Distris Distris Dis		Plan Selections Composite Composite Composite
Continue Button Click the green Continue radio button to move to the Additional Information page.		Train a conservation Constrainty and Constrainty appendix to the copyright constrainty appendix to the provided and the constrainty appendix to the copyright constrainty appendix
Continue Click the green Continue radio button to move to the Additional Information page. Continue Click the green Continue radio button to move to the Additional Information page.		RED During Burden During Burden B
Continue Button Click the green Continue radio button to move to the Additional Information page.		Providence - electracy decide Prov
Continue Button Click the green Continue radio button to move to the Additional Information page.		Plan Celebrary Annual Service Out-Onlynom Celebrary Out-Onlynom Other Ot
Continue Click the green Continue radio button to move to the Additional Information page. Continue Continue		Contributive Grave
Continue Button Click the green Continue radio button to move to the Additional Information page.		High Allocation
Continue Button		07NHR32 Passive \$50 \$2000 90th R&C 100%/80%/50% 100%/80%/50% \$2000
Continue Click the green Continue radio button to move to the Additional Information page. Button Continue		
Continue Click the green Continue radio button to move to the Additional Information page. Button Continue		
Continue Click the green Continue radio button to move to the Additional Information page. Button Continue		
Button Continue	Continuo	Click the groop Continue radio button to move to the Additional Information page
Button	continue	Circk the green continue ratio button to move to the Additional Information page.
Continue	Button	
	BULLON	Continue
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Attached Attached	 Signature Required Signature Required Signature Required
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Attached	
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	Signature Required Signature Required
	(i) Signature Required
ocuments' butto	n an
ocuments butto	
er to search system	m files to find the appropriate document
'Document Nam	e' drop down. Use the scroll bar to see a
ill show in the 'Ex Needed for Enrol	isting Attached Documents.' Ilment' list will update to show 'Attached Ilment' list will update to show 'Attached
	Pocuments' butto

15

Release for	In the Release for Enrollment window, check the box in front of the <i>"I confirm that all uploaded documents requiring a signature have been signed"</i> statement. The Release radio button will become active. Click the Release
Enrollment	radio button.
	I confirm that all uploaded documents requiring a signature have been signed.
	Note: The 'Release' button will remain grayed out until all required documents are attached.
	Once the release button has been completed, the Confirm Release for Enrollment window opens.
	Confirm Release for Enrollment
	I confirm that,
	I have selected composite leaving mode. I have selected the below plan(s) for the group.
	I have selected the effective date 01/01/2021 for the group.
	Confirm Cancel
	Confirm each selection by checking the box next to the item. Once all items have been checked, the Confirm radio button changes to green and user may then click the Confirm radio button to release the group to underwriting for review and approval.
	Confirm Release for Enrollment
	I confirm that,
	I have selected Composite Rating model.
	I have selected the below plan(s) for the group. MTBCP027, DTNHR32
	I have selected the effective date 01/01/2021 for the group.
	Confirm
	Once the group is released, a message window will populate saying "Thank you! Your account has been submitted
	for review."
	Thank you. This account has now been submitted for further review.
	Return Home
	Enrollment is complete and the account is in the Data Entry Review Activity . Once the case has been verified, the case will be pushed to Underwriting Release.

Viewing Paperwork Attachments

Follow the below steps to view the attached paperwork.

Step	Action							
Attachments	Enrollment window opens to the Account Summary page.							
	In the Account header field, click on the Attachments radio button to view attached paperwork.							
	Account Name: SONYA TXMMQUOTE 2.10							
	Created By: External							
	Reports Documents List Attachments							
Attachment	Result: The Attachments window opens.							
Window	Attachments							
	Select Browse to find a file(s) to attach. Uploaded files must be less than 50MB.							
	Browse Please Select V							
	Attach File							
	Existing Attached Documents Description Name Status File Date/Time Stamp Document Name Description Name Status							
	Census Imp Ex TX 2020-08-27 Benefit Program Application Form (BPA) V BATEST47 COMPLETED Delete Document							
	Census Imp Ex TX 2020-08-27 Employer Group Information Form (EGI)							
	HDI 10 ale view 14/15/17 807							
	Links to the paperwork attachments are found under the File column. The Date/Time Stamp column identifies date							
	and time that paperwork was attached. The Document Name column identifies type of document attached. Not all							
	the attached documents in this window need to be opened for account enrollment processing. Refer to the							
	required documents for list of documents that need to be reviewed during enrollment process.							
	Required Documents:							
	Benefit Program Application Form (BPA) Employer Group Information Form (EGI)- Note: Attach the MSP for the EGI Enrollment Census							
On an Attached	To onen an attached degungent, click on the file link next to the required Degungent Nerge							
Open Attached	To open an attached document, click on the file link next to the required Document Name.							
Documents	Existing Attached Documents							
	Census Imp Ex TX 2020-08-27 Benefit Program Application Form (BPA)							
	HDL 10 pls.xism 14:35:09.73							
	Census Imp Ex TX 2020-08-27 Employer Group Information Form (EGI)							
	Census Imp Ex TX 2020-08-27 Enrollment Census V							
	The window populator acking if you want to open or rays this file. Click Open							
	ine window populates asking it you want to open or save this file. Click Open							
	Do you want to open or save MMEnrollment i estinginto - Copy (2).xisx from enrollment-ui-uat1.test.tyiblue.com?							
	Attached document opens for viewing. Repeat step above to open other needed documents for viewing.							
	Note: Keep all the needed documents open to complete accounts enrollment.							
	With all needed documents, still open, click the upper right-hand X to close the Attachments window							
	with an needed documents, sum open, click the upper right-hand X to close the Attachments window							

Returning the Case back to BCBS

There are instances when case may be sent back for more information. In that instance, the case will need to be returned to BCBS. Follow the below steps to return the case back to BCBS.

Step			Action					
Cases	The case returned will appear in "My Enrollments" in the status Enrollment More Info Required							
Returned by	My Enrollments							
BCB3	Assount	Account #	Effective Date	Cales Executive	Divisor	Status		
	View niha TX GA	298691	01/01/2021	Sales Executive	TX	Enrollment More Info		
	View the case and access the log					Required		
	Case ID: 285730							
	A copy of the notes and reason codes will	be added t	o the Log for	your review.				
	You can attach a separate document to pr	ovide addit	ional clarific	ation as needed.				
Ready to Return to BCBS	Once the additional information has been button on the Enrollment Home Page	fulfilled an	d the case is	ready to return t	o BCB	S. Select the Send to	BCBS	
neturn to bebb								
	Discontinue				Send to	BCBS DocuSign Envelope	ID: NA	
Massaga	A mossage window will populate saving "	1 ro vou cur	you wich to	cond to PCPS?"			J	
wiessage	A message window will populate saying A	are you sure	e you wish to	Senu lo BCBS!				
	Click OK enrollment-ui-uat1.hcsctest.net says Are you sure you wish to send this to BCBS?							
			°K	Cancel				
Case Returned	Once the group is released, a message wir	ndow will p	opulate sayir	ng "Thank you! Yo	our aco	count has been subm	itted	
	for further review."							
	Enrollment		6			Enrollment H	ome	
	These up This second has any here and							
	Return Home Thank you. This account has now been submitted for further review.							
	The case has been returned to BCBS							

Tracking and Managing Enrollment

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

Step	Action										
Recently	Enter information in any of the descriptor fields or select the case from the " Recently Accessed" or " My										
Accessed	Enrollments " section on the enrollment home screen.										
	My Enroliments										
Mv	Account		Account # E	ffective Date Sale	s Executive	Divis	on Status	Ma	arket egment		
Enrollments	🔁 View Kathy's	11/11 Test	291037 1	2/01/2020		тх	Deliver We Letter	Icome MI	м		
2	View TX MM R	teg	291021 0	01/15/2021		тх	Deliver We Letter	icome MI	м		
	My Enroliments				_						
	Account	RNAL USER EDIT	Account	# Effective I 12/15/20	Date Sales Ex 20	ecutive	Divis TX	Pre-Enrollr	ment More		
	View AMA	TEST_TXPRODcaseSGB	roker 298706	11/01/20	20		тх	Enrollment	ed t More Info		
								Required			
	Once the group	D IS Selected, Click	History.								
	Case ID: 28	5730									
		History									
Activity	On the Activity	History window,	activities, a	long with a	ctivity dat	te, sta	atus, and	d duratio	n of acti	vity are displaye	d. A
History	list of activity a	nd status definitio	ons is also di	isplayed.							
	Activity History										
	Activity Date	Activity		Status	Duratio	n					
	10/22/2020 10/22/2020	Enrollment More Info Require Underwriter Review	:d	Completed	103 Day(s) 0 Day(s)						
	10/22/2020	Enrollment Data Entry		Completed	0 Day(s)						
	Activity	Status		Definition	U Day(s)		-				
	Enrollment Data Entry	Pre-enrollment	Pre-enrollment	status is defined	as one of the						
			following. 1. A the enrollment case to BCBS y paperwork and case has not be	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 vet.							
	Enrollment More Info Required	Pre-Enrollment More Inf Needed	 BCBS has requised by submitter is in information. 	BCBS has requested additional information and the submitter is in the process of obtaining requested information.							
	Enrollment Data Entry Review	Enrollment Data Entry Review	Pre-Enrollment BCBS for review	Pre-Enrollment documentation has been submitted to BCBS for review.							
	Underwriter Review	Pending UW Review UW Re-Review from Sales	Enrollment doc Underwriting fo	Enrollment documentation has been submitted to Underwriting for review.							
	Submitter Review	In Progress	UW has comple returned the er approving the s information in o	eted review of sub prollment to the su submission or requ order to complete	mission and ha Ibmitter either Iesting addition the review.	not nal					
	Enrollment More Info Required	Enrollment More Info Required	UW has reques submitter is in information.	UW has requested additional information and the submitter is in the process of obtaining requested information.							
	Sales Review	Rate Offer Letter Review	Enrollment doc Sales for review	umentation has b w.	en submitted	to					
	Final Account Approval	Signed Rate Offer Letter Received BlueSTAR Transfer in Progress	Enrollment doc Underwriting fo	umentation has be r final approval.	en submitted t	:0					
	Internal Action Require	d Enrollment Internal Acti Required	on BCBS is taking our membershi	routine steps to fi p system.	nalize informat	ion in					
	Complete Acct/Membership Entry	Complete Acct/Membership entry	BCBS is in the p membership sy	process of inputtin stem.	g information i	n our					
	Review B* Manual Entr	y Review B* Manual Entry	BCBS is in the period	process of reviewin membership syste	ig the informat n.	tion					
	Welcome Letter Review	Welcome Letter Review	BCBS is in the Letter.	process of generat	ing the Welcon	ne					
	Deliver Welcome Letter	Deliver Welcome Letter	Welcome Letter Team.	r has been delivere	d to the Sales						
	Post Sales Prep	Post Sales Prep	BCBS is in the case.	process of complet	ing the enrolln	nent					

Enrollment	Once the enrollment starts, details pertaining to the case are entered using the Log button.						
Status for In	Case ID: 285730						
Process	Willog History C ^{Hy} C						
Enronments	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. You can also attach a separate document to provide additional clarification to the underwriter as needed.						