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Welcome to Employer eServices!

Manage your benefits administration online with Employer eServices. This suite of internet-based applications offers you immediate and secure access to manage health care benefits information.

Through the Employer eServices website, **www.employereservices.com**, you can:

- Enroll new employees immediately
- Verify or change eligibility information
- Request an employee ID card
- Terminate and reinstate employees

Enjoy fast service, simplified invoices, and immediate access to downloadable data through our electronic billing capability. Employer eServices also:

- Automatically notifies you via email when your online invoices are ready for viewing
- Allows you to view current or prior period activity
- Gives you the ability to download invoice detail (please note: If you have electronic billing, you will not receive hard copy invoices)
- Let's you pay your bill online

QUESTIONS?

For more information about Employer eServices from Medica or to register, contact the Medica Service Center:

■ **Phone**: 800-936-6880

Email: medicaservicecenter@medica.com

REGISTRATION

Upon registration for eServices, you will receive an email from eServices **Employer_eServices@uhc.com**. The email will contain a link that you will follow to complete your registration and create a login for Employer eServices.

Have a general question about Employer eServices or experience a technical issue while using eServices? Contact the Employer eServices customer support:

■ **Phone**: 800-651-5465

Employer eServices

Welcome to your benefits administration site.

Log In

If you experience issues logging in, click here or call Employer eServices Help Desk at 1-800-651-5465.

View Login Help →

Information You Need When You Need It

Employer eServices

- Eligibility Updates
- · Pay Invoices Online
- Wellness Tools & Tips
- And More!

Enjoy a powerful suite of online tools and resources that simplify your job and create a better experience for everyone.

Tour the New Site →





In this section, we will highlight the key parts of the homepage.



My Profile: Once you've logged in, review your profile for accuracy and make any needed changes.

Manage Users: See Page 30 for more details on this functionality.

2 MENU BAR

Select Group: Select the plan you will be working in.

 If you offer multiple plan or network options to your employees, they will each be represented by their corresponding group number.

You will find these group numbers in the **Select Group** drop down tab. It is important to be aware of which group number you are working in. You are only able to work with one group number at a time. When working with multiple group numbers, you will need to re-select that group number in the **Select Group** drop down box.

Dashboard: Your homepage.

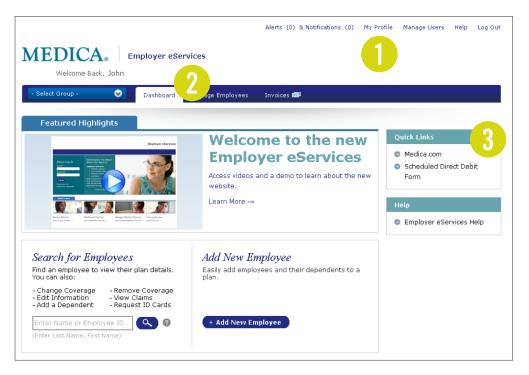
Manage Employees: This is where you initiate transactions.

Invoices: This is where you can access billing statements.

Access to features in **Manage Employees** and **Invoices** may vary depending on access granted as indicated during registration.

For example:

 Sally Smith in the account payable department may only have been given access on the registration form to access the **Invoice** tab. While Jane Doe in human resources was given access to the **Manage Employees** tab.



3 RIGHT SIDEBAR MENU – QUICK LINKS

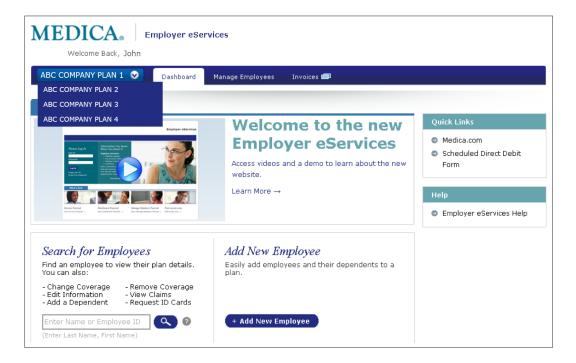
Medica.com: This will direct you to the homepage of Medica's main website.

Scheduled Direct Debit Form: Set up an automated payment.



ADDING NEW EMPLOYEES

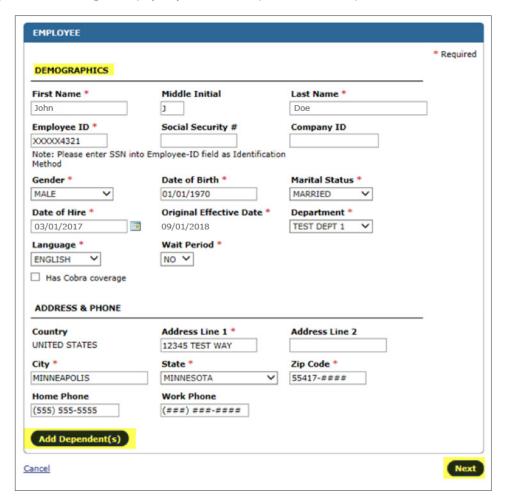
- First click on **Select Group** and choose the group number you want to work with.
- Once the group number has been selected, click Manage Employees on the menu bar or click the Add
 New Employee button from the home page.



• Enter the effective date and click **Continue**. The **Original Effective Date** is the date the coverage should begin.



- Enter employee demographic information.
- Once you're done adding an employee, you can add dependents. If no dependents need to be added, click Next.



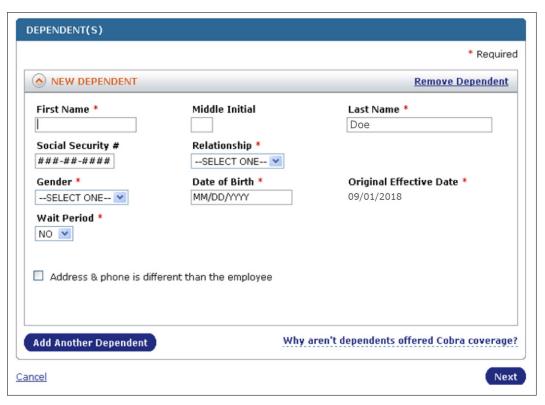
TIPS

- Only fields marked with an asterisk are required. The **Company ID** field should be left blank.
- Employee ID = SSN. It does not need to be entered again in the **Social Security #** field. Once entered, the first 5 digits will change to Xs for security purposes.
- If an employee has a wait period, select Yes in the Wait Period drop down and enter the hire date in the Wait Begin Date field that will appear.
- If you have departments, you will be presented with this field. If you do not have this as part of your client setup, the field will not be displayed*.

^{*}If you have previously requested departmentalized billing to break out employees on your invoice, your list of department codes will be found in the drop down. When you sign up to have your invoices in eServices, you will see these codes on this spreadsheet invoice in the column titled **Customer Defined Sort**.

ADDING DEPENDENTS

- Complete the dependent information.
- Click **Add Another Dependent** to add more dependents. Click **Next** when finished adding dependents.

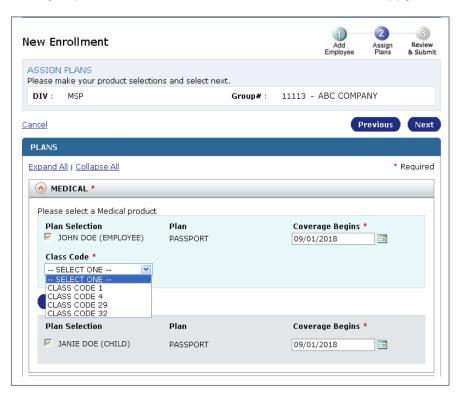


- The last name will pre-fill with the last name of the employee. If the last name is different than the employee's last name, you can change this field.
- Select **Spouse** or **Child** from the **Relationship** drop down. Do not use the **Other** option.

ASSIGN PLANS

As you can see on the upper right portion of the screen, you are now on Stage 2 "Assign Plans" on the progress bar.

In this stage, you will select appropriate the **Class Code** and **Primary Care Clinic** as well as indicate if the enrollee has Medicare or other insurance. Items that do not apply to your plan configuration (Class Codes or Primary Care Clinics) will not be displayed. You may skip **Medicare** and **Other Insurance** if those items do not apply to the enrollee.



NOTE

- The **Plan Selection** and **Coverage Begins** information is defaulted from information you entered earlier and should not be changed.
- Select the appropriate class code from the drop down. For example, Class Code 1 is most commonly used to indicate active single/employee only coverage and Class Code 29 is most commonly used to indicate COBRA single/employee only coverage. Both codes will drive a single premium rate on your invoice. Please contact the Medica Service Center if you are unsure of your class codes.

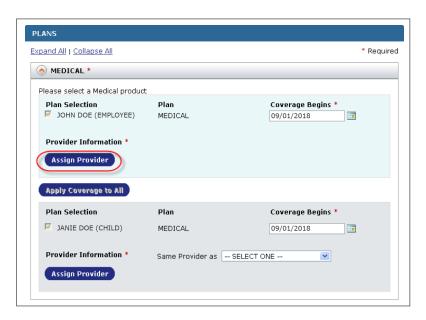
The class code number is associated with different coverage levels for your employees and drives the premium billing. Class codes are generally not used for small group business or those groups who choose to self-fund.

PRIMARY CARE CLINIC - For ACO / Medica Elect / Medica Essential products

The process for assigning Primary Care Clinics works the same regardless of product. The difference is that for ACOs you will be assigning the same default clinic to all enrollees, whereas for Elect and Essential you will be assigning the specific clinic that each enrollee has chosen as the location where they will seek their primary care.

Assigning the Primary Care Clinic for the employee (Elect and Essential)

• Click Assign Provider.



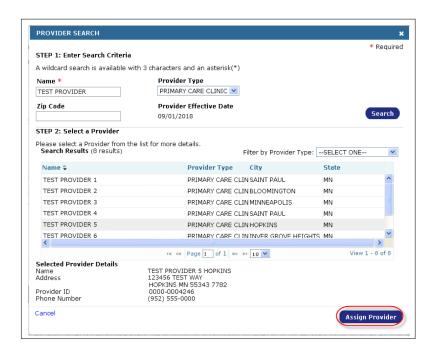
Step 1: Enter Search Criteria

- Enter only the first word of the clinic name. This will provide the best search results.
- Change Provider Type drop down to Primary Care Clinic.
- Leave Zip Code blank.
- Click Search.



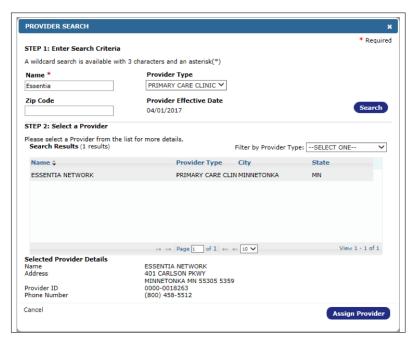
Step 2: Select a Provider

- Select the Primary Care Clinic from the list of results.
- Click the **Assign Provider** button.



Assigning the Primary Care Clinic for the employee (ACO)

- Click Assign Provider.
- Step 1: Enter Search Criteria
 - Enter only the first word of the ACO name (ex. Altru, Essentia, Ridgeview, etc.).
 - Change Provider Type drop down to Primary Care Clinic.
 - Leave Zip Code blank.
 - Click Search.
- Step 2: Select a Provider
 - Select the Primary Care Clinic from the list of results (only one result should be displayed for ACOs).
 - Click the **Assign Provider** button.



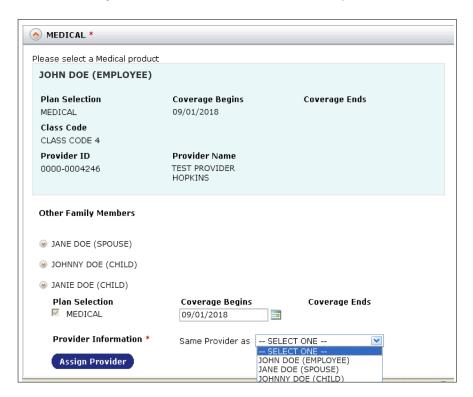
NOTE

For ACO products, although the employee and their dependents do not need to select a Primary Care Clinic, eServices still requires the assignment of a default ACO clinic. The member is still able to choose any provider within the network. When the search results for the ACO are displayed, the clinic address will appear as 401 Carlson Pkwy, Minnetonka, MN 55305. This is not an error, it is a default address.

Assigning the Primary Care Clinic for dependents

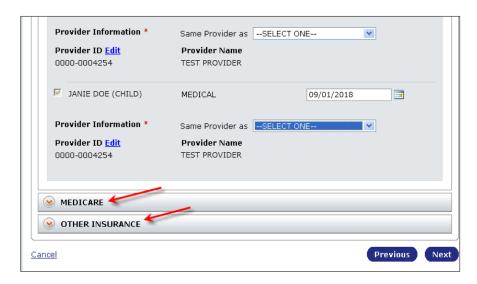
There are two ways to assign a Primary Care Clinic for dependents:

- 1. Click the **Assign Provider** button and follow the same steps used for the employee.
- 2. To assign the same Primary Care Clinic as the employee or any other family member that has already been completed, select that family member from the **Same Provider as** drop down.

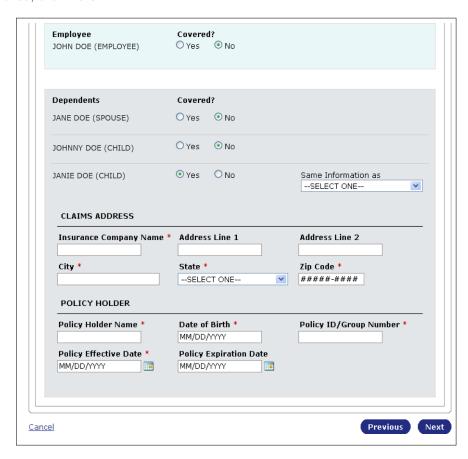


MEDICARE AND OTHER INSURANCE

- Click on Medicare or Other Insurance if the employee does have additional medical coverage. Those sections will open for additional information to be entered.
- If the employee does not have other medical insurance coverage, click **Next**.

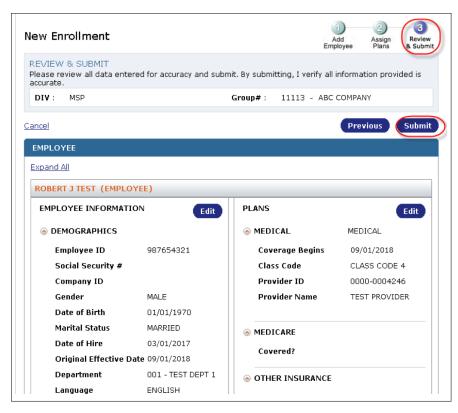


- If any of these data fields are unknown, it is best to skip the entire **Medicare** or **Other Insurance** section.
- When finished, click **Next**.

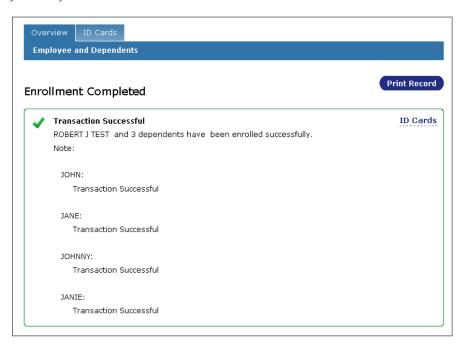


ENROLLMENT COMPLETION SCREEN

You can review all of the information that has been entered. If something is incorrect, click **Edit** and make any necessary changes. Once completed, click the "Submit" button.



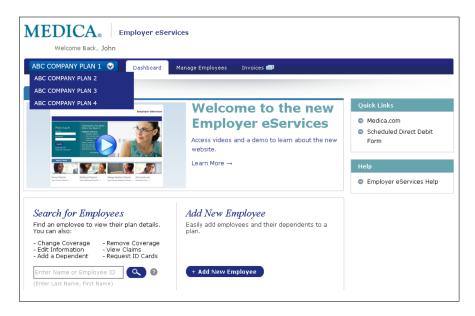
This is what it will look like when you submit a successful transaction. The members are now active in Medica's enrollment system. Pharmacy benefits will be available the next day. If there were errors found in this transaction, they will be displayed and you will be directed to which items need to be edited.



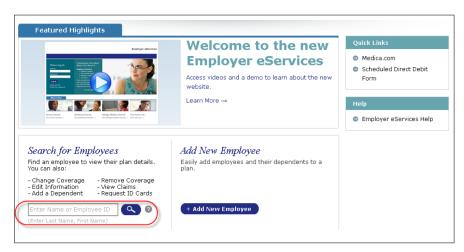
VIEWING AND UPDATING EMPLOYEE AND DEPENDENT INFORMATION

You will have the option to edit, terminate or reinstate coverage in this section.

• Be sure to select the group number the employee is in prior to performing a search.

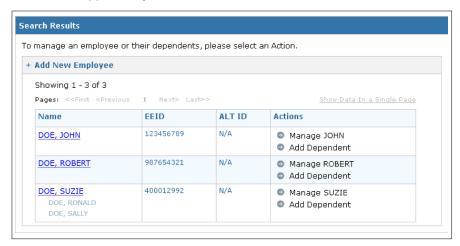


- Enter the search criteria. There are two ways to do this:
 - Enter the last name of the employee to view that person's information and any dependents under their coverage. If entering a last name, the search will return all employees with that same last name.
 - Social Security Number (SSN).

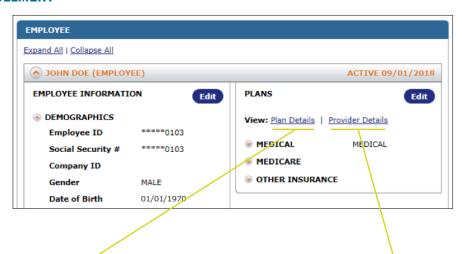


Click the Search button.

View the record by clicking on the employee name or by clicking Manage in the Actions box. All previously
entered information will appear for you to view.



REVIEW ENROLLMENT





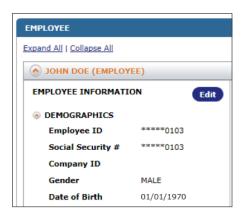
By clicking on **Plan Details**, you will be able to view the timeline information for this person.



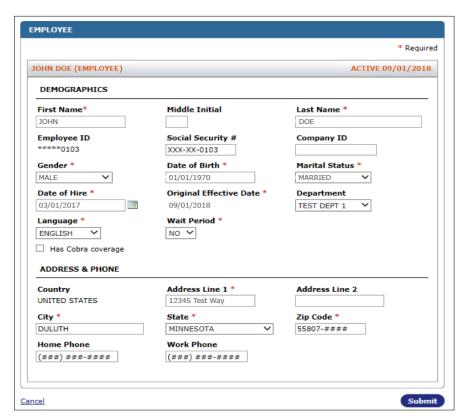
By clicking on **Provider Details**, you will be able to view the clinic information for those employees who have Elect, Essential or an ACO.

CHANGE ENROLLMENT

By clicking on the **Edit** button in the **Employee Information** box, you will be able to edit any data field that appears EXCEPT for the employee social security number. Corrections to an employee's SSN must be managed by Medica outside of the eServices portal and should be directed to Medica Customer Services at 800-936-6880. Corrections to dependent SSNs can be made in eServices.



Make any needed updates to the employee's information and click Submit.



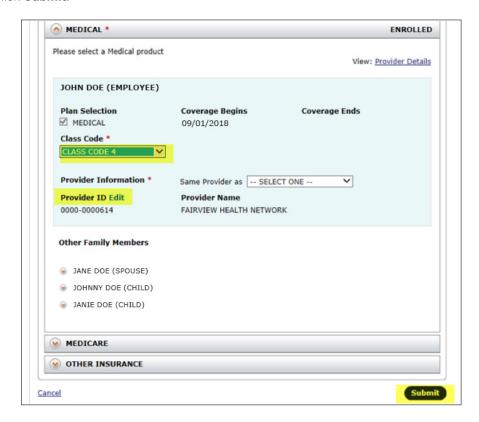
By clicking on the Edit button in the Plans box, you will be able to edit the Primary Care Clinic or the Billing Class Code.



 Once you have clicked on the Edit button, you will then enter the effective date of the change and click the Get Coverage Period button.



• From here, you can either update the **Class Code** or **Provider Information**. Once the change has been made, click **Submit**.

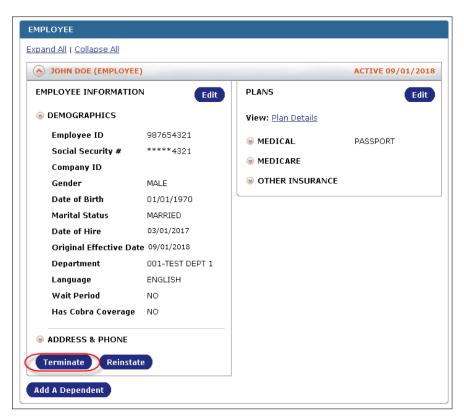


NOTE

Changes to the billing class code are made after there has been a dependent addition or termination impacting the coverage level of the employee. Once the dependent has been added (or terminated), return to the employee record. Click the **Edit** button under **Plans**. The effective date should coincide with the date the dependent was added or terminated. If dependent was added effective 1/1/18, make the change effective 1/1/18. If dependent was terminated effective 1/31/18, make the change effective 2/1/18.

TERMINATIONS

Clicking the **Terminate** button in the **Employee Information** box allows you to terminate the employee and/or any of their dependents. Terminating the employee will automatically terminate all of their dependents.



• Follow your group contract when entering termination dates. Most events have an "end of month" termination date. Some self-insured customers' contracts may state "date of event." The date you enter is the last day of coverage. For example, if the employee's last day of employment was 7/11/17, you would enter the coverage end date as 7/31/17.

- Once you have selected the enrollee(s) to be terminated, pick the Coverage End Reason from the drop down box.
- Click **Submit** when finished.



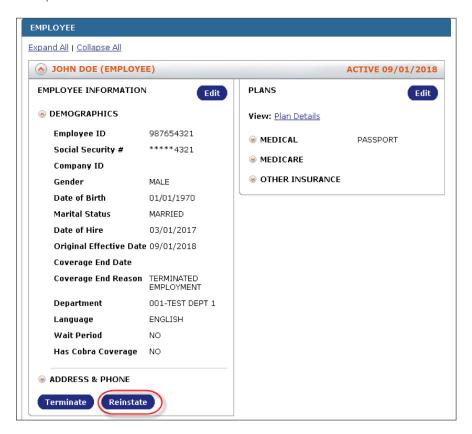
NOTE

You also have the option to click the **Terminate** button in the **Dependent Information** box, which allows you to terminate a specific dependent's coverage.

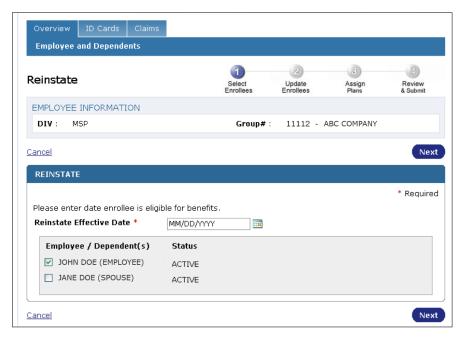
REINSTATE COVERAGE

The reinstate function is for members being enrolled onto the plan they were on previously. If the member is being reinstated onto a different plan than they were originally covered under, the reinstate function in eServices should NOT be used. In these cases, the member should be re-enrolled in the new plan after you have confirmed termination from the previous one.

 Clicking on the Reinstate button in the Employee Information box allows you to reinstate the employee and/ or any of their dependents.



- Clicking on the Reinstate button in the Dependent Information box allows you to reinstate the specific dependent's coverage. You may only reinstate a dependent's coverage when the employee is actively enrolled.
 - Check the box by each name that you wish to reinstate.
 - You MUST enter the effective date that the coverage is being reinstated. If this is not done, the system will default to the day after the prior coverage ended, which may not be the desired date for reinstatement of coverage.
 - Click Next.



- Review the demographic information to see if anything needs to be updated, such as the address.
- Click Next.

NOTE

If reinstating on COBRA coverage, click the box for **Has COBRA Coverage** and select the appropriate event from the drop down box.

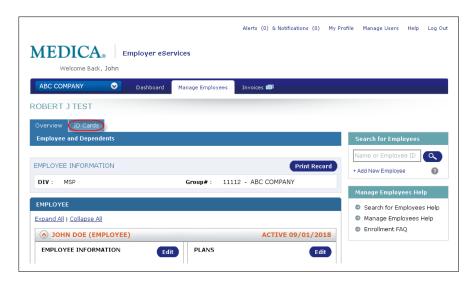
- If reinstating on COBRA coverage, select the correct COBRA class code. Contact the Medica Service Center if you are unsure of which class code to use.
- Remember to click **Submit** when you are done.
- The members are now active in the enrollment system. Pharmacy benefits will be available the next day.



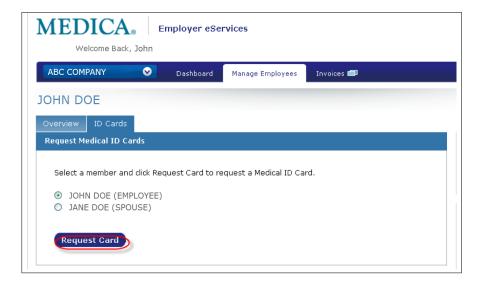


You do not need to request an ID card after performing transactions such as New Additions, Name Changes, Dependent Terminations, etc. These transactions automatically generate an ID card.

- To order an ID card, you must first select the member. To review information on selecting a member, go to **Viewing and updating employee and dependent information** on Page 15.
- Click the **ID Cards** tab while viewing a member record.



Select a member and click Request Card.



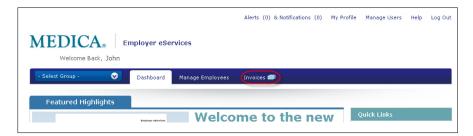


Employer eServices gives you the option to receive and view your monthly invoices online in the portal. If you select this option, you will no longer receive a paper invoice in the mail. An email will be sent when your invoice becomes available. You will have the ability to view 13 months of invoice history.

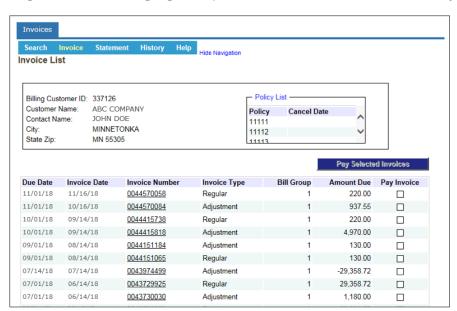
Additionally, Employer eServices provides the flexibility to make payments online. If you are interested in this option, please contact the Medica Service Center at 800-936-6880.

HOW TO VIEW YOUR INVOICE

• Click the **Invoices** tab from the main page.



You will be brought to a list of invoices going back up to 13 months. Click on the invoice number you want to view.



NOTE

There may be more than one invoice line for a given invoice date. The amount due reflects the total for that specific invoice. By selecting the regular or adjustment line, you will be able to see the whole invoice.

• After selecting an invoice line, you will have the following options:

View Invoice: Displays a PDF of the entire invoice.

View Invoice Summary: Displays a PDF of the summary page(s) of the invoice. **View Invoice Spread Sheet**: Downloads an Excel spreadsheet of the invoice.

View Remittance Stub: Displays a PDF of the remittance stub.

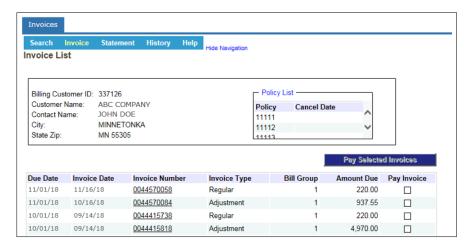
Request Adjustment Invoice: Used to recalculate and update the account balance and amount due if enrollment changes were made after the monthly invoice ran.



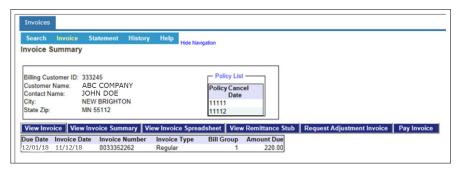
HOW TO PAY YOUR INVOICE ONLINE

There are two ways to pay your invoice online. You can select one or more invoices from the **Main Invoice** by checking the **Pay Invoice** box(es) or select a specific invoice under the **Invoice Number** column.

• From the **Main Invoice** list screen, select the invoices to be paid; then click on **Pay Selected Invoices**. If there is more than one invoice in a month, it is easier to initiate payment from the main invoice list screen by selecting **All Invoices**. If more than one invoice was selected, both invoices will appear on the payment screen.



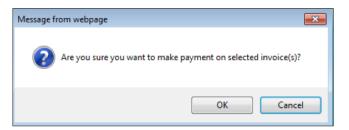
• From the screen for one specific invoice, click on **Pay Invoice**. Payment will only be for that invoice.



Once you have confirmed the payment amount, click on Submit Payment.



• A box to confirm payment will appear.



• Details of the payment transaction are available by clicking on the **History** tab on the navigation bar above.

Event Dat	e/Time	Online Activity Description
12/22/18	11:28:55 am CT	FirstName LastName requested an adjustment invoice
12/22/18	10:28:55 am CT	FirstName LastName requested a payment for statement S1000 for \$1000.00
12/22/18	10:00:55 am CT	FirstName LastName requested a payment for invoice(s) 000011111 for \$500.00 and 000022222 for \$1000.00. Total payment requested \$1500.00.

Managing Your Enrollment During Renewal

During your open enrollment period, you will utilize many of the transactions you have become familiar with throughout the year. This section will provide a brief outline of how to complete different types of open enrollment scenarios. For the more detailed process steps and tips, refer back to previous sections of this guide.

ENROLLEES WHO ARE TERMING COVERAGE

- Search for the employee who is terminating coverage.
- Click the **Terminate** button in the **Employee Information** box.
- Enter the termination date.
- Select the termination reason (in this case, the reason would be open enrollment termination).
- Click Submit.

ENROLLEES WHO ARE KEEPING THEIR SAME BENEFIT PLAN

No action needed. These enrollees will continue as is into the next plan year.

ENROLLEES WHO ARE KEEPING THEIR SAME BENEFIT PLAN BUT ARE MAKING OTHER CHANGES (ex. address, Primary Care Clinic, adding/dropping dependents)

- Search for the employee.
- Click on the employee name.
- Click Edit in the Employee Information section to update an item such as the address.
- Click **Edit** in the **Plans** section to update the Primary Care Clinic.
- Click **Add a Dependent** to add a dependent to the employee's benefit plan.
- Click the **Terminate** button to end the coverage for a dependent. To terminate multiple dependents at once, click the **Terminate** button under the employee and then select those dependents you wish to end coverage for. Be sure not to select the actual employee.

NOTE

Keep in mind that adding or terming dependents may require that employee's billing class code to be updated as well. To do this you will need to edit this item in the **Plans** section for the enrollee.

ENROLLEES WHO ARE CHANGING BENEFIT PLANS

You must first terminate the enrollee from the current plan before enrolling them in their new benefit plan.

- Search for the employee who is terminating coverage.
- Click on the **Terminate** button in the **Employee Information** box.
- Enter the termination date.
- Select the termination reason (in this case, the reason would be open enrollment termination).
- Click Submit
- Then enroll the person in their new benefit plan. This is done either through Reinstatement or Add New Employee.
 - **Reinstatement**: For employees previously covered under the same plan/group number and have selected that same plan again.
 - Add New Employee: For employees not previously covered under the plan they have now selected.

TO REINSTATE COVERAGE

- Select the appropriate group number.
- Search for the enrollee's name.
- Click the Reinstate button in the employee information box.
- Update the effective date to the desired effective date.
- Click **Next** and proceed with reviewing and editing required information.
- At the end, click **Submit**.

TO ADD NEW EMPLOYEE

- Select the appropriate group number.
- Click the Add New Employee button.
 Proceed with adding required data to complete the enrollment.
- At the end, click **Submit**.

Managing the Users Within Your Organization

HOME

Any changes to the individuals who have access to the eServices portal must be made by the **Client Master Administer** at your group. This role is able to add or inactivate users or change the permission level of users.

• To access this function, click the **Manage Users** link in the upper right portion of the screen.



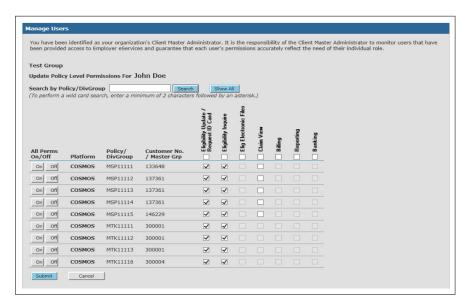
UPDATING AN EXISTING USER

 Locate the user from the list and click the **Update** link next to the permission level that will be updated (Policy Level or Billing).

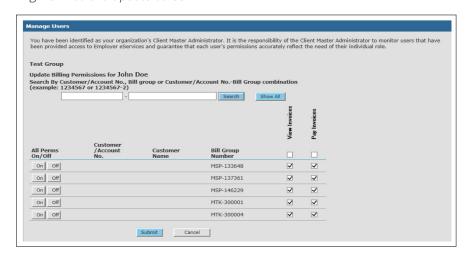


 Select or deselect the permission levels next to each policy number. Once the updates have been made, click the **Submit** button. Individual permission levels can be updated by clicking the check box, or all permission for a given policy number can be selected or deselected at once using the on/off feature.

Example of the Policy Level Permissions update screen



Example of the Billing Permissions update screen

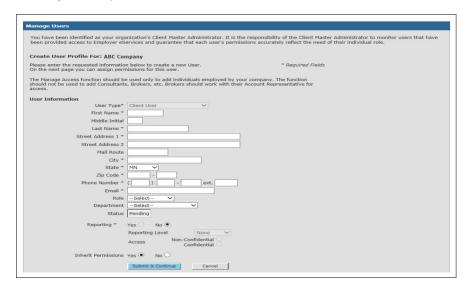


ADDING A NEW USER

Click the Add a New User link.



 Complete the information about the new user and click the Submit & Continue button. Selecting Yes under Inherit Permissions will give the new user the exact same permissions that you have. If you would rather manually select only certain permissions, select No.



TERMINATING A USER

- Click the **Update** link next to **User Profile**.
- Change the **Status** to **Inactive** and click the **Submit** button.





Q. Can you search for a Primary Care Clinic (PCC) by the 11-digit PCC number?

A. The search is a name search. The best way to search is to select Primary Care Clinic from the **Provider Type** drop down and then enter the first word in the clinic name followed by an asterisk (*).

Q. Is there a place to change someone's plan in eServices?

A. To change someone's plan, you will terminate their coverage in the current group number, then switch group numbers in the **Select Group** drop down and re-enter their information under the new group number (plan).

Q. Is there a way to search for an employee without selecting the group number first?

A. No, to find an employee you must first know the group number they are in and select that from the drop down.

Q. What is the waiting period field used for?

A. This field is used when enrolling a newly hired employee who had a waiting period before he/she became eligible for coverage.

Q. Can you enroll a dependent with a different address than the employee?

A. Yes, there is a box that says "Address & phone is different than the employee." Click this and enter the address of the dependent.

Q. Does the eServices site know what our eligibility rules are and create an error or edit if we enter a new employee with an effective date that does not match our rules?

A. No, there are no edits in eServices for eligibility rules.

Q. If we don't have a dependent's SSN, should we enter all 9s?

A. No, please leave the field blank if you do not have a dependent's SSN. We recommend adding the SSN when it becomes available.

Q. How do you change the class code when adding or terminating a dependent?

A. Once the transaction to add or term the dependent is completed, go back to the employee record and click **Edit** in the **Plans** section. From there you will be prompted to select an effective date for the change and then the class code drop down will appear and the code can be updated. If the dependent was added effective 3/1/18, select 3/1/18 as the effective date when updating the class code. If the dependent was terminated 4/30/18, select 5/1/18 as the effective date when updating the class code.

Q. Where can I see our departments on the invoice?

A. To view the departments, click on **View Invoice Spreadsheet**. This will open a spreadsheet version of your invoice and the department codes will be in the column named **Customer Defined Sort**.

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