

BROKER RESOURCE CENTER REFERENCE GUIDE

Enrollment Services

1

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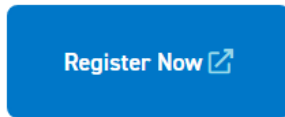
SECTION 1: USER REGISTRATION

SECTION 1: USER REGISTRATION

1. To start the registration process, go to www.bluecrossvt.org/ERC 1
2. Select “Register Now”

The role of Local Administrator is automatically assigned to the first individual registering for the business. The Local Administrator will add additional users within the organization.

2



Access is not immediate upon registration. Please allow up to three business days for your request to be reviewed. An email will be sent to the address provided during registration when your request is processed.

3. Confirm you are the appropriate person for the local administrator role.

What is a local administrator?

3


If you are the first individual registering for your group you will be assigned the local administrator role. This means you will have access to all the standard features of the ERC (same access as the user role) plus the system administrator feature for setting up and overseeing all other users of the group. Typically, the local administrator role is assigned to one individual, though rights can be assigned to more than one person at the company.

*If you are a user of the ERC but shouldn't be a local administrator, we recommend reaching out to your current portal administrator.

SECTION 1: USER REGISTRATION (CONT..)

4. Enter required information. **Be sure to make note of your username and password.** Confirmation will be sent to the email address you provide.

4



BlueCross BlueShield
of Vermont
An Independent Licensee of the Blue Cross and Blue Shield Association.

User Information

If you are an existing user of the Connect system please login. [Click here to start your session.](#)

First Name *

Middle Initial

Last Name *

Title

E-Mail *

Confirm E-Mail *

Office Phone *
Example: (555) 555-5555

Extension #
Example: 123456

Office Fax
Example: (555) 555-5555

User Name *

Password *

Confirm Password *

Security Question 1 *

Security Answer 1 *
Your answer may not contain your username.

Security Question 2 *

Security Answer 2 *
Your answer may not contain your username.


Security Question 3 *

Security Answer 3 *
Your answer may not contain your username.

Local Admin As the primary registrant, you are automatically a local admin

SECTION 1: USER REGISTRATION (CONT..)

5. Enter your required group information and select “Next.” (Do **NOT** enter hyphens in the tax ID field.)



Office Information

Enter the name and address of your office.

Organization Name *

Tax ID

Group Number *

Group Number 2

Group Number 3

Address *

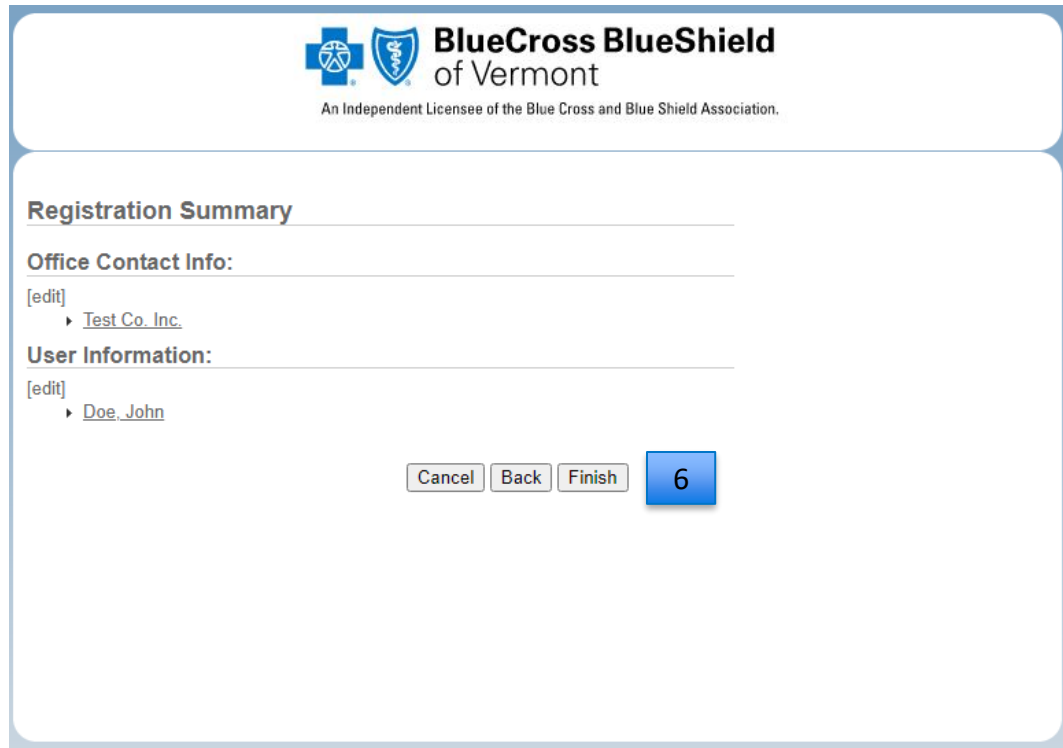
City *

State *

Zip Code *

SECTION 1: USER REGISTRATION (CONT..)

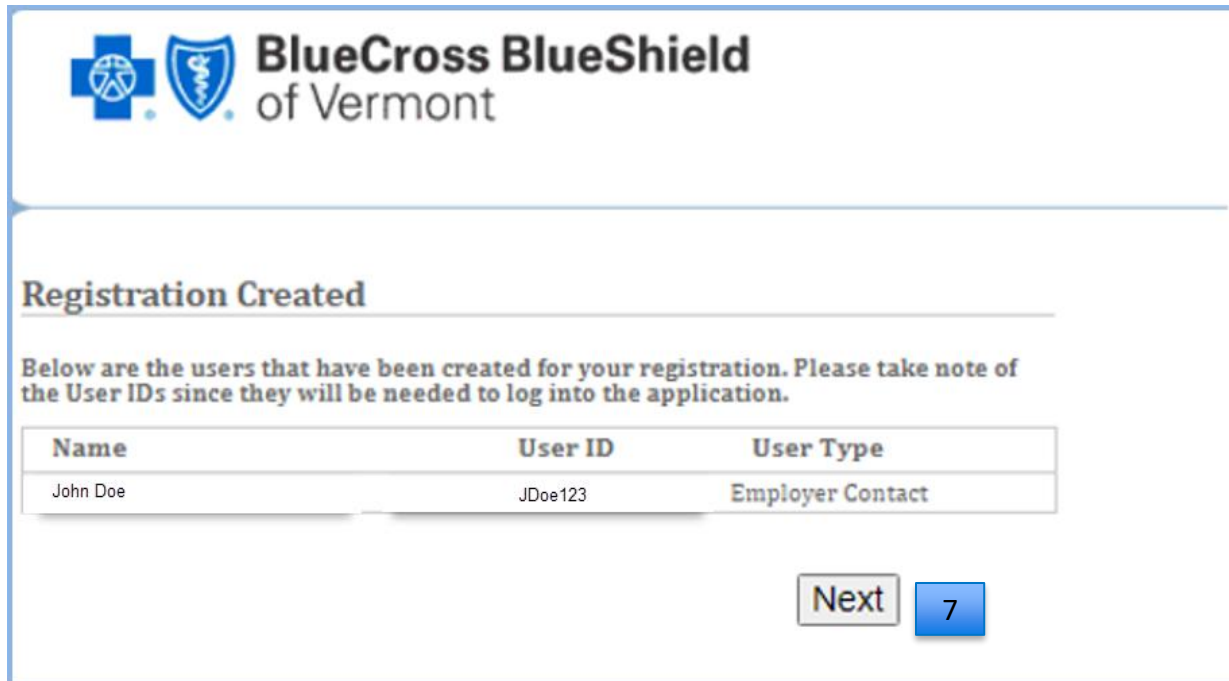
6. Review your registration summary. Verify office contact and user information. Select “Back” if necessary. Once completed, select “Finish.”



The screenshot shows the registration summary page for BlueCross BlueShield of Vermont. At the top, the logo and name are displayed, along with the text "An Independent Licensee of the Blue Cross and Blue Shield Association." Below this, the "Registration Summary" section is titled. Under "Office Contact Info:", there is an "[edit]" link and a dropdown menu showing "Test Co. Inc.". Under "User Information:", there is an "[edit]" link and a dropdown menu showing "Doe, John". At the bottom of the form, there are four buttons: "Cancel", "Back", "Finish", and a blue button with the number "6".

SECTION 1: USER REGISTRATION (CONT..)

7. Make a note of your username and password. You will **NOT** be able to return to this page once you select “Next.”



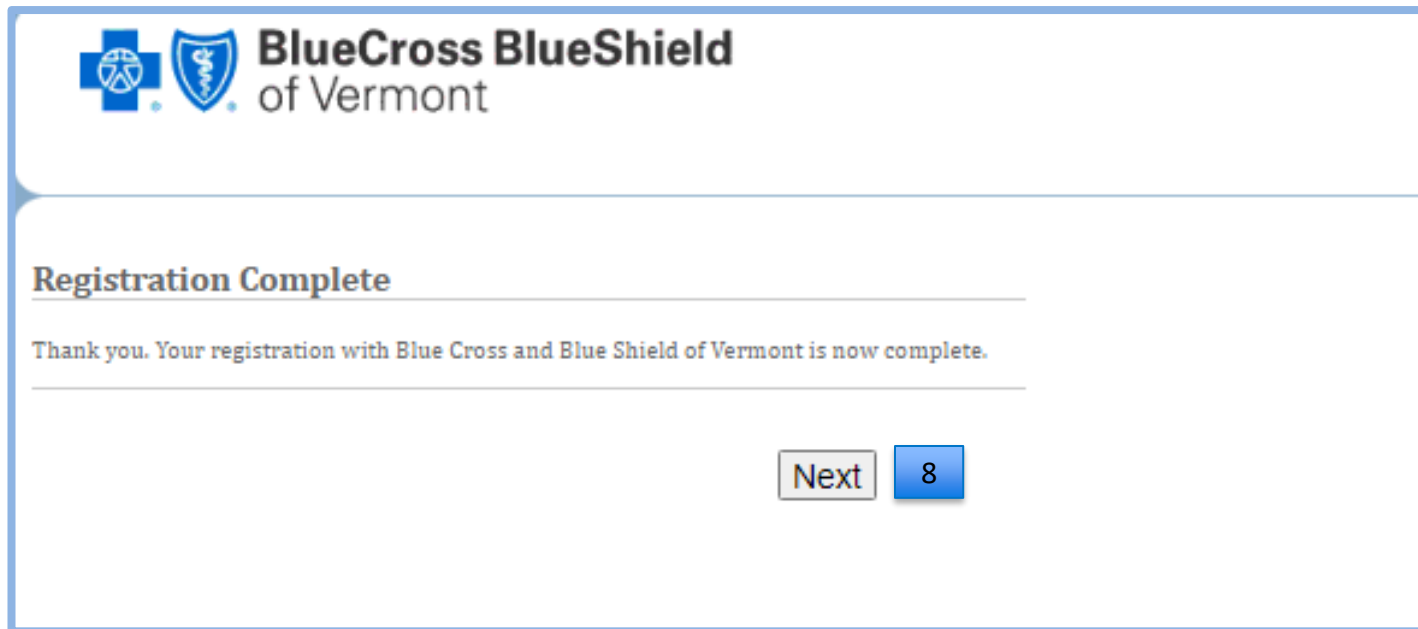
The screenshot shows the BlueCross BlueShield of Vermont logo at the top left. Below the logo, the text "Registration Created" is displayed in a bold, serif font. Underneath this, a message reads: "Below are the users that have been created for your registration. Please take note of the User IDs since they will be needed to log into the application." A table with three columns follows: "Name", "User ID", and "User Type". The table contains one row with the data: "John Doe", "JDoe123", and "Employer Contact". At the bottom right of the page, there is a "Next" button and a blue square button containing the number "7".

Name	User ID	User Type
John Doe	JDoe123	Employer Contact

SECTION 1: USER REGISTRATION (CONT..)

8. You have completed your registration! Once your application is processed, you will receive an email whether it has been approved or denied.

**Access is not immediate upon registration. Please allow up to three business days for your request to be reviewed.*



SECTION 2: NAVIGATING THE HOMEPAGE

SECTION 2: HOMEPAGE

1. The top ribbon and center points are quick links to commonly used functions.
2. Left-hand navigation- all the functionality available to help manage your employees and members.

BlueCross BlueShield of Vermont
An Independent Licensee of the Blue Cross and Blue Shield Association.

Welcome
Role: ERCOffice Manager Verification

Home Search Employees Document Manager Eligibility Tools & Resources

Log Out

1

2

My Employees

Current Employee
(None)

Search Employees

My Human Resources

Current Group
(None)

Initial Enrollment

My Health Plans

Eligibility
Provider Directory
Reports
Document Manager
Tools & Resources
Invoices

Administration

User Preferences
System Admin
Home

Hello, Welcome to your Employer Resource Center.

Welcome to the Employer Resource Center!
Please utilize our [ERC Reference Guide](#) for instructions on how to manage your group's information, access membership eligibility and process enrollment transactions.

Search Employees →
Search for and view employee plan information.

Reports →
Employee member roster and enrollment transaction reports.

Provider Directory →
Search our wide network of providers

Payments & Invoicing →
Looking for a PDF copy of your invoice? We've moved it to our payment site so all your invoicing and payment information is in one, convenient location.

Member Maintenance →
Resources for group enrollment, including FAQs.

SECTION 2: HOME PAGE OPTIONS

1. Choose Search Employees to access information for a specific employee.
2. Generate PDF or Excel documents for employee rosters and transaction reports.
3. Locate a Blue Cross Network provider.
4. Access to view your invoice in both PDF and CSV format, as well as access to M&T bill pay portal to pay your invoice.
5. Member Maintenance links you to our Membership-at-a-Glance resource and frequently used member forms.

The screenshot displays five navigation options on a home page, each in a white box with a blue border and a blue number in a square at the top right. The options are arranged in two rows. The first row contains three boxes: 'Search Employees' (1), 'Reports' (2), and 'Provider Directory' (3). The second row contains two boxes: 'Payments & Invoicing' (4) and 'Member Maintenance' (5). Each box includes a title with a right-pointing arrow and a brief description of the service.

- 1 Search Employees →**
Search for and view employee/member plan information.
- 2 Reports →**
Employee member roster and enrollment transaction reports.
- 3 Provider Directory →**
Search our wide network of providers
- 4 Payments & Invoicing →**
Invoices are now available for downloading in CSV or PDF format using the "Invoices" selection in the left-hand navigational panel. To pay and view your invoice, continue doing so in our payment portal.
- 5 Member Maintenance →**
Resources for group enrollment, including FAQs.

SECTION 2: LEFT-HAND NAVIGATION

The screenshot shows a vertical navigation menu with four main sections, each highlighted with a blue square and a number:

- 1 My Employees**: Includes 'Current Employee' (dropdown menu with '(None)' selected), 'Search Employees', and a search icon.
- 2 My Human Resources**: Includes 'Current Group' (dropdown menu with '(None)' selected), 'Search Employer Groups', and 'Initial Enrollment'.
- 3 My Health Plans**: Includes 'Eligibility', 'Provider Directory', 'Reports', 'Document Manager', 'Tools & Resources', and 'Invoices'.
- 4 Administration**: Includes 'User Preferences', 'System Admin', and 'Home'.

1. My Employees- Search for employees by last name or member ID to initiate any changes, and/or review benefit and eligibility.

2. My Human Resources – search between your group/divisions to elect benefit plan in order to initiate initial enrollments for new subscribers.

3. My Health Plans – review member eligibility as well as reports and tools to help manage your group plan.

4. Administration –review/edit your user profile.

SECTION 3: MY EMPLOYEES

SECTION 3: MY EMPLOYEES

1. Under “My Employees,” select the employee that you are updating by clicking on “Search Employees.”

**‘Current Employee’ drop down will contain a list of the last 25 employee searches.*

My Employees Employee Search

Current Employee
(None)

1 Search Employees

My Human Resources

Current Group
(None)

Search Employer Groups

Initial Enrollment

Employee Search

Conduct Employee Search

Employee Last Name Member ID

(ID Example - HP555555,HP4444444)

Search Filters

Current Group
(None)

Search Employer Groups

Initial Enrollment

As of 3/31/2023

Search Clear

*** To obtain a list of all employees under your plan, search by Member ID, using a value of V8.**

My Employees

Current Employee
Doe, John

Search Employees

Employee Information

Change Enrollment

Terminate Enrollment

Benefits and Eligibility

ID Card

John Doe
Member ID ZIL V87654321012301

Member Information

Date of Birth	Sex	Address
31 Jan 1977	Male	123 Test Lane, Tester, VT 01234
Phone	Email	
(802) 555-5555		

Benefits & Eligibility

Status	ACTIVE
Line of Business	Exclusive Provider Organization
Product	Test Co. EPO CDHP 1

SECTION 3: MY EMPLOYEES

Once you have selected the employee, you can perform the following actions located in the left-hand navigation bar:

- **Employee Information-** this is high level summary of your employees' demographics and benefit information.
- **Change Enrollment-** this option allows you to change contact information, update demographics, change a PCP, move to COBRA coverage, and add/modify dependent information.
- **Terminate Enrollment-** this option allows you to terminate the subscriber or one or more dependents. You must select a reason for the change such as death, divorce, termination of employment and voluntary cancel.
- **Benefits and Eligibility-** you can view the employee's eligibility, as well as access the Outline of Coverage for their benefits.
- **ID card** - If you need to order an ID card or print a proof of coverage for a member.

SECTION 3: MY EMPLOYEES-CHANGE ENROLLMENT

Change Enrollment – this option allows you to make demographic changes for your employees as well as manage life events.

(Required fields are marked with the “*” symbol.)

Change Enrollment

* Effective Date 

* Event Date 


Benefit Information

Plan Coverage

EPO CDHP 1 - VBNEDC02

Enrollment File Information

* Benefit Status 

* Employment Status 

* Reason for Change 

The following are valid Reason's for Change:

- **Birth** – add a newborn. **effective date should be the 1st day following the 60-day grace period. You can verify this date by searching for the newborn under Eligibility.*
- **Change in Identifying Data Elements** – change in name, gender, DOB, e-mail, contact phone number.
 - *value is required in the top/1st 'Contact Number' field.
- **Change of Location** – change in address
- **Initial Enrollment** – add a new dependent
- **Marriage** – add a spouse
- **PCP Change** – change PCP
- **COBRA** – Use to move employee coverage from Active to COBRA status. **If employee is still active, select change enrollment and indicate COBRA in Reason for Change. If employee is termed refer to page 22.*

SECTION 3: MY EMPLOYEES-TERMINATE ENROLLMENT

Terminate Enrollment – this option allows you to terminate the subscriber or one or more dependents.

1. You must select a reason for the change
2. Click “Submit”

(Required fields are marked with the “*” symbol.)

Terminate Enrollment

Subscriber Summary

Name Doe, John

Employer Group D001 CORPORATE -

Plan Coverage EPO CDHP 1 - VBNEDEC02

Enrollment File Information

Coverage Term Date 10/31/2022

Benefit Status Active

Employment Status Full-time/Full time active employee

Reason for Change -SELECT-

1

Terminate Enrollment Coverage Options

Name	Relationship	Birth Date	Death Date
<input type="checkbox"/> Doe, John	Self	5 Oct 1967	
<input type="checkbox"/> Doe, Jane	Spouse	31 Oct 1966	

2

Submit Cancel

The following are valid Reason's for Change:

- Death
- Divorce
- Termination of employment
- Voluntary withdrawal

SECTION 3: MY EMPLOYEES-BENEFITS AND ELIGIBILITY

Benefits and Eligibility – you can view the subscriber’s eligibility and benefits, request ID cards, as well as access the Outline of Coverage.

Benefits and Eligibility as of 12 Oct 2022



***you can download this page to a PDF for your records.**

	John Doe	Address	PCP
DOB			
Gender			
Member ID			
Phone			

[Request ID Card ▶](#)

Benefit Plan Information		Hover here for a link to view your Outline of Coverage	
Carrier	Blue Cross Blue Shield	Status	Active Plan
Product	Exclusive Provider Organization	Start Date	1 Dec 2021
Group	D001 [REDACTED] CORPORATE ([REDACTED])	End Date	
Division	[REDACTED] D001	Enrollment Origination Date	1 Dec 2021
Benefit Plan	VBNEC02 - [REDACTED] EPO CDHP 1	Group Benefit Effective	1 Jan 2011

Dependents					
Name	Birth Date	Gender	Member ID	Relationship	PCP
Jane Doe	31 Oct 1966	[REDACTED]	V [REDACTED]	Spouse	

SECTION 3: MY EMPLOYEES-ID CARD

ID Card- If you need to order an ID card or print a proof of coverage.

1. Under **“Request an ID Card”** check the member you would like to order an ID Card or print proof of coverage for.

2. Click **“Submit”** for ID Cards and **“Print”** for Proof of Coverage

*An ID card will be ordered and mailed to member in approximately 7-10 business days.

Order an ID Card

Check the box next to the family members(s) you would like to order an ID card for, then click **“Submit.”** You should receive your ID card(s) within 7-10 business days.

Print Proof of Coverage

Click **“Print”** in the upper right-hand corner of the table. Then, click the **“Print”** button next to the family member(s) you wish to print a proof of coverage for.



Request an ID Card

	Name	Member ID
1	<input checked="" type="checkbox"/> Doe, John	V8 01
2	<input type="button" value="Submit"/> <input type="button" value="Cancel"/>	

SECTION 4

MY HUMAN RESOURCES

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

To begin your initial enrollment, you will need to select the group/division in which you're enrolling your employee. There are two examples below of how to perform this search, depending on your access. If you have more than 25 qualifying plans under your access, you will follow example 2.

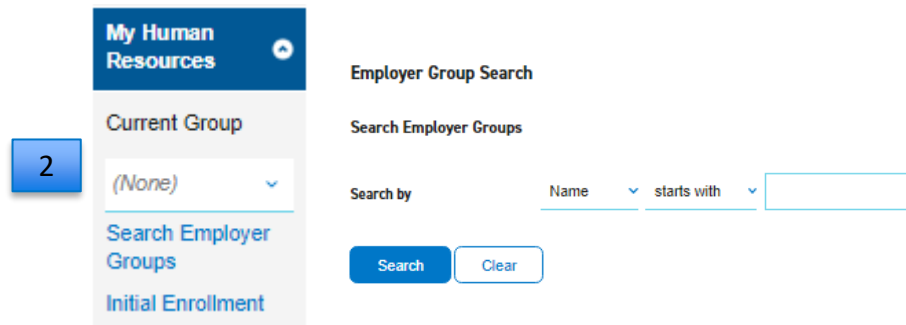
1. Under "My Human Resources," use the 'Current Group' drop down. This will have a list of all your eligible Group/Division that you've recently interacted with. To search for a Group not showing on the drop down, proceed to step 2.



The screenshot shows the 'My Human Resources' header in a dark blue box. Below it is a 'Current Group' dropdown menu with '(None)' selected. A blue box with the number '1' is positioned to the left of the dropdown.

***If you have a separate COBRA group or your group offers COBRA Benefit Plans, and your employee is currently termed; you will want to select the COBRA specific group/plan when electing COBRA as your reason for change.**

2. Under "My Human Resources," 'Search Employer Groups'. You will then be prompted to enter the name or number of the Group and Division that you are enrolling the employee in. Then hit "select".



The screenshot shows the 'My Human Resources' header. Below it is the 'Current Group' dropdown menu with '(None)' selected. A blue box with the number '2' is positioned to the left of the dropdown. To the right of the dropdown is the 'Search Employer Groups' section, which includes a 'Search by' dropdown menu with 'Name' and 'starts with' options, and a text input field. Below the input field are 'Search' and 'Clear' buttons.

*** To search multiple groups tied to your access list, Search by 'Number' and enter the first three characters of the group number.**

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

3. Once your “Current Group” is selected click on “Initial Enrollment” in the left-hand navigation bar.

The screenshot displays a web application interface. On the left, there are two main navigation sections: "My Employees" and "My Human Resources".

- My Employees:** Includes a dropdown menu currently set to "(None)", a "Search Employees" link, and an "Initial Enrollment" link at the bottom.
- My Human Resources:** Includes a dropdown menu currently set to "A123 Corp Inc.", a "Search Employer Groups" link, and an "Initial Enrollment" link at the bottom.

A blue square with the number "3" is positioned to the left of the "Initial Enrollment" link in the "My Human Resources" section.

On the right side of the interface, under the heading "Information", there is a blue information icon (i) followed by the text "Employer Group Selected". Below this, it states "Your current employer group is now: A123 Corp Inc."

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

4. Click “Select Plan” next to the benefit option in which you are enrolling the employee.

Below are the available plan options. Click ‘select plan’ next to the benefit plan the employee is enrolling in, then proceed with the initial enrollment process.

Benefit Plans

EPO (PCP)	- ABCD1234	SELECT PLAN	4
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Initial Enrollment– this option allows you to enroll new employees, as well as re-enroll terminated employees on COBRA continuation of coverage.

(Required fields are marked with the “” symbol.)

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

5. Effective dates must align with our membership guidelines. Our membership at a glance reference guide can be found [here](#).

Once you select “submit”, your transaction will be confirmed and submitted to Blue Cross of Vermont for processing. By submitting this transaction, you are authorizing the following:

- You, the employer, are attesting that you have an application or electronic enrollment election signed by the employee on or before the requested effective date and agree to its accuracy.
- The enrollment transaction adheres to the Group Benefits Policy for your Employer Group.

•

Benefit Enrollment

5	Effective Date	<input type="text" value="4/1/2023"/>		Hire Date	<input type="text"/>	
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Benefit Information

Plan Coverage

[Edit](#)

SECTION 8: MY HUMAN RESOURCES-INITIAL ENROLLMENT

6. The following are valid Reason's for Change:

- **Initial Enrollment** – add a new employee to your group plan along with their dependents.
- **COBRA** – Use to move employee coverage from Active to COBRA status. **If employee is still active, select change enrollment and indicate COBRA in Reason for Change.*

Enrollment File Information

<input type="checkbox"/> Benefit Status	Active
<input type="checkbox"/> Employment Status	Full-time/Full time active employee
<input type="checkbox"/> Reason for Change	

6


SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

7. You will be required to provide the following fields:

- Subscriber Demographic information-First Name, Last Name, SSN, Martial Status, Gender and Birth Date.
- Subscriber Contact Information- Contact Numbers, Mailing Address, and Mailing City, State and Zip.

(Required fields are marked with the “” symbol.)

Subscriber Demographic Information

 First Name

Middle Name

Last Name

Suffix

SSN

Marital Status

Gender

Birth Date

Subscriber Contact Information

Contact Numbers

Mailing Address

Mailing Apt/Suite

Mailing City

Mailing State, Zip

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

Are you apart of a managed care plan?

Managed Care Plans Must Select a Primary Care Provider

As part of a managed care plan, you must select a primary care provider (PCP) from our network. This is important because some health care services are only eligible for the highest benefits when your primary care provider does them.

If your plan requires a primary care provider (PCP) a PCP must assigned to each member. A PCP must be assigned for each covered family member in order to enroll—unless subscriber or dependent resides outside of the Blue Cross VT network area (Vermont and contiguous counties).

8. If applicable, Select “edit” within the Subscriber Provider Information Summary to add a provider selection.

Subscriber Provider Information Summary

Member	Provider	Provider Type
None		

8 Edit

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

9. To select a provider add a value for the search criteria using, name, NPI or zip. Click “Search”

10. Once you have selected the provider. Click “add”

Add Provider Selection

Member Doe, Jane ▾

Select Provider Name NPI Zip

Search **9**

10

11. Once your ‘Current Provider List’ is populated. Click “Finish”.

Current Provider List

Remove	Member	Provider	Provider Type
<input type="button" value="Remove"/>	Doe, Jane	IRVING S SMITH, DO	Primary Care Provider

11

* To remove your selection and elect a new PCP. Click “Remove”

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

12. If applicable, complete Dependent Information Summary to add dependents to the policy by clicking on “Edit”

*Dependents over 45, must have a Social Security Number to enroll

Dependent Information Summary

Name	Relationship	Birth Date
None		

12 [Edit](#)

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

13. You will be required to provide the following fields:

- Subscriber Demographic information-First Name, Last Name, SSN, Martial Status, Gender and Birth Date.
- Subscriber Contact Information- Contact Numbers, Mailing Address, and Mailing City, State and Zip.

(Required fields are marked with the “ * ” symbol.)

Add Or Modify Dependents 13

<p>Dependent Demographic Information</p> <p><input type="checkbox"/> First Name <input style="width: 100%;" type="text"/></p> <p>Middle Name <input style="width: 100%;" type="text"/></p> <p><input type="checkbox"/> Last Name <input style="width: 100%;" type="text"/></p> <p>Suffix <input style="width: 100%;" type="text"/></p> <p>SSN <input style="width: 100%;" type="text"/></p> <p><input type="checkbox"/> Relationship -Select- ▼</p>	<p>Dependent Contact Information</p> <p>Contact Numbers</p> <table border="0" style="width: 100%;"><tr><td style="width: 30%;"><input type="checkbox"/> Gender</td><td style="width: 30%;">-Select- ▼</td><td style="width: 40%;"><input style="width: 95%;" type="text"/></td></tr><tr><td></td><td>-Select- ▼</td><td><input style="width: 95%;" type="text"/></td></tr><tr><td></td><td>-Select- ▼</td><td><input style="width: 95%;" type="text"/></td></tr></table> <p><input type="checkbox"/> Birth Date <input style="width: 100%;" type="text"/></p> <p><input type="checkbox"/> Mailing Address <input style="width: 100%;" type="text"/></p> <p>Mailing Apt/Suite <input style="width: 100%;" type="text"/></p> <p><input type="checkbox"/> Mailing City <input style="width: 100%;" type="text"/></p> <p><input type="checkbox"/> Mailing State, Zip AA ▼ <input style="width: 40%;" type="text"/></p>	<input type="checkbox"/> Gender	-Select- ▼	<input style="width: 95%;" type="text"/>		-Select- ▼	<input style="width: 95%;" type="text"/>		-Select- ▼	<input style="width: 95%;" type="text"/>
<input type="checkbox"/> Gender	-Select- ▼	<input style="width: 95%;" type="text"/>								
	-Select- ▼	<input style="width: 95%;" type="text"/>								
	-Select- ▼	<input style="width: 95%;" type="text"/>								

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

Are you apart of a managed care plan? If not, skip to step 15.

14. Select “edit” within the Subscriber Provider Information Summary to add a provider selection.

15. Select “Add or Modify Dependents” to add your dependent to the Current Dependent Roster

Dependent Provider Information Summary

Member	Provider	Provider Type
None		

14 **Edit**

15 **Add Or Modify Dependents** **Cancel**

▪ Indicates required field

SECTION 4: MY HUMAN RESOURCES-INITIAL ENROLLMENT

16. Click “Return to Enrollment”
17. Once everything is complete, on “Submit”

Current Dependent Roster

Name	Relationship	Birth Date	Edit	Remove
None				

16 [Return to Enrollment](#)

17 [Submit](#) [Cancel](#)

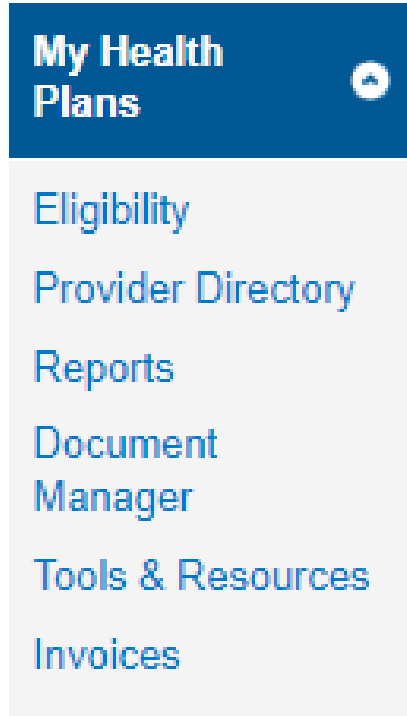
Indicates required field

SECTION 5: MY HEALTH PLANS

34

SECTION 5: MY HEALTH PLANS

Within 'My Health Plans' you can perform the following actions:



- **Eligibility** – search for all members, employees and their dependents
- **Provider Directory** – find a network provider
- **Reports** – run a membership roster, transaction reporting & employer group summary.
- **Document Manager** – store your historical reports
- **Tools and Resources** – provides quick and easy access to frequently used links and information.
- **Invoices** – view both a PDF and CSV version of your premium bill invoice.

SECTION 5: MY HEALTH PLANS – ELIGIBILITY

1. Click on “Eligibility”, which allows you to search all members; both subscribers and dependents – active and termed up to 18 months.
2. Use Eligibility Search to search by Last Name or Member ID. Include the “as of date” to narrow your results.

*** To obtain a list of all employees under your plan, search by Member ID, using a value of V8.**

My Health Plans

- 1 Eligibility
- Provider Directory
- Reports
- Document Manager
- Tools & Resources
- Invoices

Eligibility Search

Conduct Eligibility Search

2 Member Last Name Member ID ?

(ID Example - HP5555555,HP4444444)

Search Filters

As of

SECTION 5: MY HEALTH PLANS – PROVIDER DIRECTORY

1. Click on “Provider Directory”, to find a network provider or PCP.
2. Use any of the search options within Provider Search to narrow down your results.

The screenshot shows the 'My Health Plans' navigation menu on the left, with 'Provider Directory' highlighted by a blue box with the number '1'. The main content area is titled 'Provider Search' and is also highlighted by a blue box with the number '2'. The search form includes the following fields and options:

- Provider:** Radio buttons for Name (selected), ID, UPIN, and NPI. A text input field with the placeholder '(Last Name Example - Smith, John)'. A blue box with '1' is positioned to the left of this field.
- Practice:** Radio buttons for Name (selected), ID, and NPI. A text input field.
- Type:** A dropdown menu with 'Any Type' selected.
- Role / Specialty:** A checkbox for 'PCP and/or' and a dropdown menu with 'Any Specialty' and 'ACUPUNCTURIST' options.
- Search By Distance:** A link with a question mark icon.
- Distance:** A dropdown menu with 'No Preference' selected. Below it, the text 'Street address or zip code required for distance search.' is displayed.
- From:** A dropdown menu with '-Select-' selected.
- OR:** A separator line with 'OR' in the middle.
- Zip:** A text input field.
- Advanced Search Options:** A link with a question mark icon.
- Buttons:** 'Search' and 'Clear' buttons at the bottom.

SECTION 5: MY HEALTH PLANS – REPORTS

1. Selecting “Reports” under My Health Plans will give you access to your Employer Member Roster, Employer Group Summary Report and your Enrollment Transaction Report.

1

- My Health Plans
- Eligibility
- Provider Directory
- Reports
- Document Manager
- Tools & Resources
- Invoices

Report List Legacy Reports

Available Reports [Help](#)

Report Name	Report Description
Employer Group Summary Report	Displays a summary of a group or groups and their currently available benefit plan options.
Employer Member Roster	Displays a list of members based on the selected employer group.

Report List Legacy Reports

Available Reports [Help](#)

Report Name	Report Description
Enrollment Transaction Report	get a list of enrollment transactions

SECTION 5: MY HEALTH PLANS-REPORTS – EMPLOYER MEMBER ROSTER

1. Click on “Employer Member Roster.”

Report List Legacy Reports

Available Reports [Help](#)

Report Name	Report Description
1 Employer Member Roster	Displays a list of members based on the selected employer group.

SECTION 5: MY HEALTH PLANS-REPORTS – EMPLOYER MEMBER ROSTER (CONT.)

2. Set the parameters, (e.g. only 'Active Members' as of today's date or 'all members' as of 18 months in the past)
3. You can select all divisions under your Group ID or for a specific division.
4. Once parameters are filled in, click continue

Employer Member Roster

The screenshot shows a web form titled "Employer Member Roster" with three main sections and a "Continue" button. A blue box with the number "2" points to the "Member Selection" section, which includes a dropdown menu set to "Active Members", the text "As of", another dropdown menu set to "04/06/2023", and a calendar icon. A blue box with the number "3" points to the "Employer Group Selection" section, which contains the text "Please select only one employer group to narrow down the search. If an employer group is not selected no results will be returned." and a label "Employer Group ID Select Employer Group". A blue box with the number "4" points to the "Subscriber Section" which includes the text "A check in the box means the member is the primary subscriber." and a checkbox labeled "Filter By Subscribers Only". To the right of the form is a blue button labeled "Continue".

Search Employer Groups Refine your search results by indicating only a division number under *Group ID*; this will bring up only the division you are looking for. OR to run the report by group number, add the first 4 digits of the group name under *Name*.

SECTION 5: MY HEALTH PLANS-REPORTS – EMPLOYER MEMBER ROSTER (CONT.)

5. You can download the report in .pdf or a .csv (Excel).

Report - Employer Member Roster

5   [Back](#)

Member Roster by Employer

Employer Group Name:

Count of 2

Active

Members

As of: April 06, 2023

SECTION 9: MY HEALTH PLANS – REPORTS - EMPLOYER GROUP SUMMARY

1. Click on 'Employer Group Summary Report'

Report List Legacy Reports

Available Reports [Help](#)

Report Name	Report Description
Employer Group Summary Report	Displays a summary of a group or groups and their currently available benefit plan options.

2. You can select all divisions under your Group ID or select a specific division.
3. Once parameters are filled in, click continue

Employer Group Summary Report

Employer Group Selection
Select employer groups to narrow down the search. If an employer group is not selected all available Employer groups will be returned.

Employer Group ID
Select Employer Group

3 Continue

Important Note: Narrow your search results by entering a division number in the Group ID field; this will display only the specific division you need. Alternatively, to run the report by group name, enter the first four letters of the group name in the Name field.

SECTION 9: MY HEALTH PLANS – REPORTS - EMPLOYER GROUP SUMMARY (CONT.)

4. The Employer Group Summary Report is available to be downloaded in either PDF or CSV format.

Report - Employer Group Summary Report

4   [Back](#)

Employer Group Summary

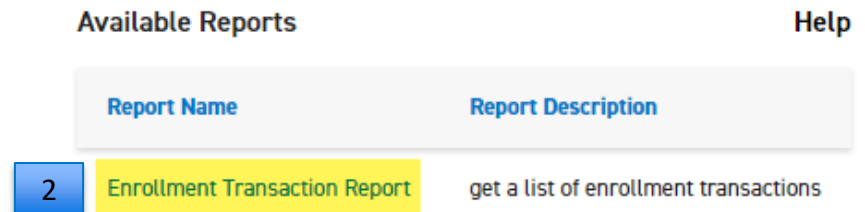
Employer Group ID	Employer Group Name	Benefit Plan Name	Benefit Plan ID	Effective Date	Expiration Date
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SECTION 5 MY HEALTH PLAN-REPORTS – ENROLLMENT TRANSACTION REPORT

1. Click on “Legacy Reports”



2. Click on “Enrollment Transaction Report”



SECTION 5: MY HEALTH PLANS-REPORTS – ENROLLMENT TRANSACTION REPORT (CONT.)

3. Use the “Selection Criteria” to set your own filters. Set your search filters under “**Search Criteria**”, “**Column Selection**” and “**Report Criteria**”

4. Set date filters by confirmation date or effective date within Search Criteria

5. Select the columns you want to display within Column Selection

6. Indicate if you want the report as a .pdf or a .csv (Excel) within Report Results

7. Click Submit

The screenshot shows the 'Enrollment Transaction Report' configuration interface. It is divided into several sections:

- Selection Criteria:**
 - Employer Group:** Radio buttons for 'All Employer Groups' (selected), 'Employer Group Name', and 'Employer Group ID'. A separator '— or —' is present.
 - Employee:** Radio buttons for 'Last Name', 'ID Number', and 'Social Security Number'. A search input field and a 'Search' button are below.
 - Confirmation Start Date:** A date input field with a calendar icon.
 - Confirmation End Date:** A date input field with a calendar icon.
 - Effective Start Date:** A date input field with a calendar icon.
 - Effective End Date:** A date input field with a calendar icon.
 - Transaction Type:** Checkboxes for 'Initial Enrollment', 'Open Enrollment', 'Change Enrollment', and 'Terminate Enrollment' (all checked).
 - Plan Coverage:** A dropdown menu currently showing 'All Coverages'.
- Column Selection:**
 - Available Columns:** A list box containing 'Member Name', 'Street Address', 'City', 'State', 'Zip Code', 'Home Phone', 'Birth Date', and 'Sex'.
 - Add/Remove:** Buttons to move items between the available and selected columns.
 - Selected Columns:** An empty list box on the right.
 - Move up/down:** Buttons to adjust the order of selected columns.
- Report Results:**
 - Display Results:** A dropdown menu.
 - Order By:** A dropdown menu with 'Choose to sort'.
 - Group by:** A dropdown menu with 'Choose to group'.
 - Submit/Clear:** Two buttons at the bottom.
- Report Criteria:**
 - Header:** Checkboxes for 'Include Selection Criteria' and 'Include Date'.
 - Footer:** Checkboxes for 'Include Selection Criteria' and 'Include Date'.
 - Lines Per Page:** An input field with the value '20'.

Numbered callouts (4-7) are placed on the left side of the form to highlight specific steps in the configuration process.

SECTION 5: MY HEALTH PLANS - DOCUMENT MANAGER

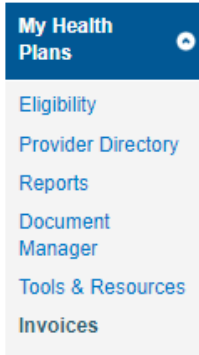
1. Click on “Document Manager” in the left-hand navigation
2. Click on the download icon to view any your current documents

The screenshot displays the 'My Health Plans' navigation menu on the left, with 'Document Manager' selected and marked with a blue box containing the number '1'. The main content area is titled 'Current Documents' and features a search bar with the text 'Document Search:' and a search term input field containing 'Document name'. Below the search bar are 'Search' and 'Clear' buttons. The document list is sorted by 'Newest' and shows 25 items per page. The list contains two entries:

Document Name	Owned By	Actions
Payor Administrative Report_20220825-123817.csv	[Redacted]	[Refresh] [Share] [Download] [Print]
Payor Admin Report of Confirmed Users created from 01-01-2013 to 05-31-2016.csv	Blue Cross And Blue Shield Of Vermont	[Refresh] [Share] [Download] [Print]

The download icon for the second document is highlighted with a red box and marked with a blue box containing the number '2'. Navigation arrows are visible at the bottom right of the list.

SECTION 9: MY HEALTH PLANS – INVOICES



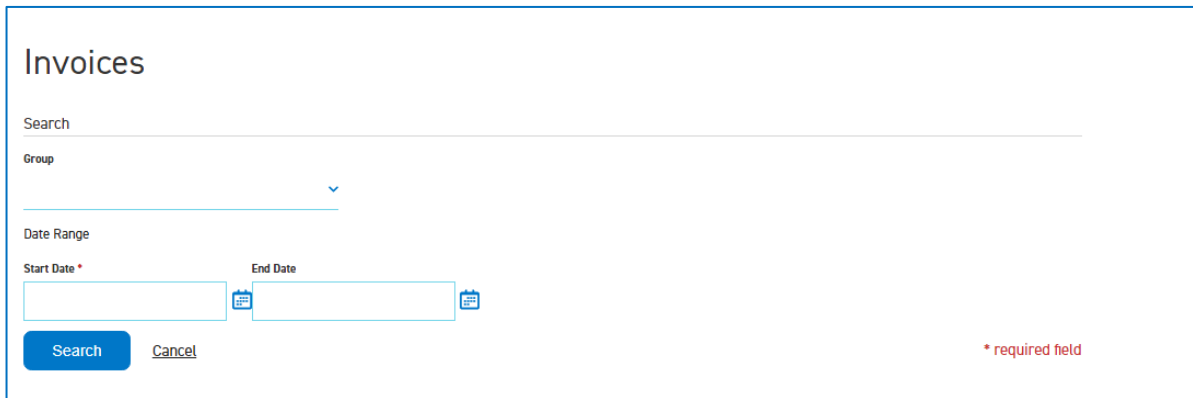
My Health Plans

- Eligibility
- Provider Directory
- Reports
- Document Manager
- Tools & Resources
- Invoices**

1

1. Click 'Invoices' to review your group(s) monthly invoices. Invoices are available in CSV and PDF file formats.
2. Select the group in the 'Group' drop down and choose the 'Select Date' of the invoice you would like to review and click 'Search'.

IMPORTANT: Brokers will only be able to view invoices for groups enrolled in our Qualified Health Plans (QHP), Blue Edge and Fully-Insured lines of business.



Invoices

Search

Group

Date Range

Start Date * End Date

Search Cancel

* required field

2

SECTION 9: MY HEALTH PLANS – INVOICES

A browser from <https://bcbs-vt.hylandcloud.com/appnet/docpop/docpop.aspx> will open with a list of invoices billed to the selected group. Invoices are available in both CSV and PDF formats.

**Filter options are available to limit search results

PDF - Begin with Invoice Date

CSV - Begin with FIN - Group Invoice

1



The screenshot shows the OnBase interface for 'Custom Query Results'. It features a search bar with the text 'Document Name' and a dropdown menu set to 'Contains...'. Below the search bar is a table with the following data:

Invoice Date	Inv #	123456789	Bill To Acct #	12345678900
FIN - Group Invoice Detail CSV Invoice Date-Group ID #-Division ID#				

To the right of the table, there are two blue arrows pointing left, labeled 'PDF' and 'CSV', indicating download options.

1. A Custom Query Result page will display your invoices in both PDF and CSV formats.

PDF- Monthly Invoice to download as a PDF. This version is a copy of the mailed invoice you receive each month.

CSV- A **Group Invoice Detail** provides a list of each member per Division ID.

SECTION 6:

NEED SUPPORT OR HAVE
QUESTIONS?

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SECTION 6: NEED SUPPORT OR HAVE QUESTIONS?

- For assistance, contact Blue Cross VT's Enrollment team:
 - By phone: (888) 320-9798; Option 2 for Large Group, and Option 3 for Small Group.
 - By Email: asinbox@bcbsvt.com