Online Enrollment

Employer

UnitedHealthcare®
A UnitedHealth Group Company

Select **Enroll.**
From **Complete Employer Application** screen select the option Select Employer, then
Complete all fields on the screen. Important – Employer must match all the information entered when
registering.
Click the **SEND** button to move to the next screen.

⚠ Enrollment Setup ☐ Employee Enrollment ☐ Final Acceptance

From **Enrollment Manager,** select **Upload Required Documents** for the following:
Wage and Tax Forms
Direct Deposit Authorization Form
Copy of Binder Check

Select **UPLOAD** next to each item to search and select the document to upload. When the document is
uploaded, the name of the document will appear on the screen.
To view the form, click on the underlined form name.

Next select **COMPLETE APPLICATION** button.

From **Let's Get Started screen**, review the supporting documents list; click the **NEXT** button to begin.

☐ Employer Information ☐ Employer Contribution(s) ☐ Eligibility Requirements ☐ Current Carrier
☐ Producer Information ☐ Application Summary ☐ Signature

As you move through the process the system will check off each section at the top of the screen, as each
section is completed.

Employer Information: enter the applicable information, mandatory fields are marked with a red asterisk *.
Click the **NEXT** button to continue.
Employer Contribution(s): enter the contribution for each section. Click the **NEXT** button.
Eligibility Requirements: complete the answers to the questions. Click the **NEXT** button. **General
Information**: complete each section, depending on the answer to the questions, other fields may appear to
complete. Click the **NEXT** button.
Questions Regarding Group Size: enter the applicable information, mandatory fields are marked with a red
asterisk * screen. Depending on the answer to the questions, other fields may appear to complete. Click the
NEXT button.
Current Carrier Information: complete the screen. Depending on the answer to the question, other fields may
appear to complete. Click the **NEXT** button.
Producer Information: verify and complete the information. Mandatory fields are marked with a red asterisk *.
Click the **NEXT** button to continue.
Employer Application Summary: review the information for accuracy, if edits are needed, select **EDIT** from
the appropriate section. If a printout is desired, select the **PRINT** button. Click the **NEXT** button.
Signature on Behalf of Employer: review each section on the screen. Complete the **Electronic Signature
Section** (NOTE: the signature must match the name exactly, including any middle initial). Click the **SUBMIT**
button.
Next select **START ENROLLMENT** button. Complete the information on the **Enrollment Setup** screen.

. Next select **START ENROLLMENT** button. Select **Edit** for each employee from the **Actions** column and
verify and complete the fields. Mandatory fields are marked with a red asterisk *. Click the **SAVE** button.

Select **OPEN ENROLLMENT.** The **Send Enrollment Invite** screen appears, complete the applicable
information and select **CONTUNUE**.
Select **SAVE**.