

Employer eServices®

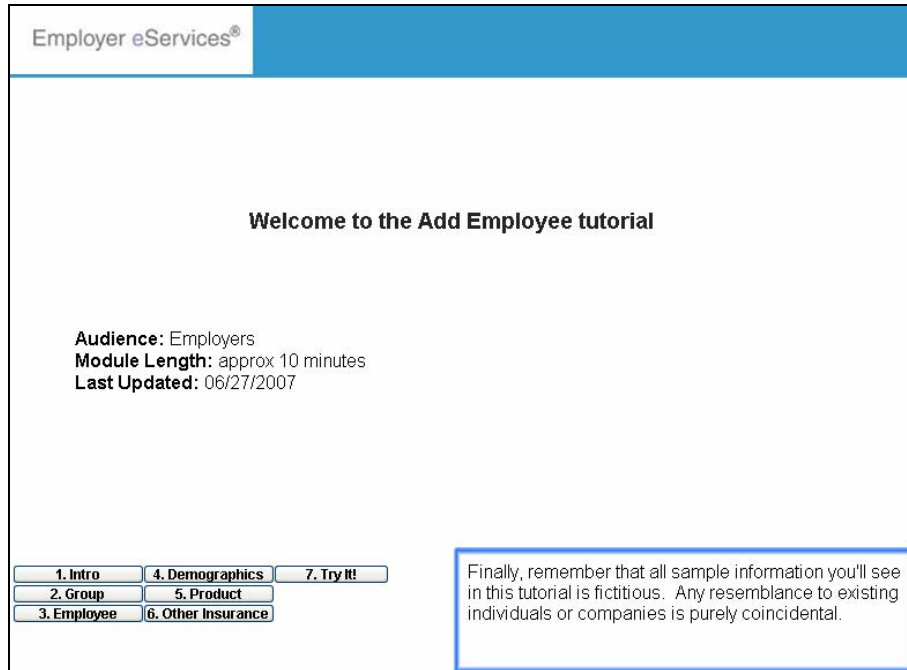
Welcome to the Add Employee tutorial

Audience: Employers
Module Length: approx 10 minutes
Last Updated: 06/27/2007

1. Intro	4. Demographics	7. Try It!
2. Group	5. Product	
3. Employee	6. Other Insurance	

Welcome to the Add Employee tutorial. In this tutorial, you'll learn how to add coverage for a new employee using Employer eServices.

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Employer eServices®

Welcome to the Add Employee tutorial

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Finally, remember that all sample information you'll see in this tutorial is fictitious. Any resemblance to existing individuals or companies is purely coincidental.

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The screenshot shows the Employer eServices website interface. At the top left, the logo "Employer eServices®" is displayed. Below it, a navigation bar contains "Enrollment" (highlighted with a red box and a blue callout bubble that says "Select the Enrollment option"), "ID Cards", "Help", "Training", and "Tutorials". A "Log Out" button is located on the right side of the navigation bar. The main content area features a "Welcome Guest," message, a brief description of the service, and a "Hot Topics!" section with several links. Below this are three columns of links under the headings "Resources", "Network Information", and "Programs & Services". At the bottom, there is a navigation menu with buttons for "1. Intro", "2. Group", "3. Employee", "4. Demographics", "5. Product", "6. Other Insurance", and "7. Try It!". A blue callout box on the right side of the page contains the text: "To begin, select the Enrollment menu option."

To begin, select the Enrollment menu option.

Employer eServices®

Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Welcome guest,

Employer eServices is your online, real-time gateway to review member eligibility, make enrollment changes and review claim status, reporting, billing and much more.

Hot Topics! Click on one of the following links for news and information about Medica products and services as well as legislative and industry news that could impact you and your employees:
[Medica Resource Helps Members Navigate Through Cost and Quality Decisions](#)

Resources
Click here to access:
[Contact Us](#)
[Health & Wellness Reporting](#)
[HIPAA Internet Site](#)
[Medica Employer Newsletters](#)
[Medica.com](#)
[MyMedica.com](#)
[Scheduled Direct Debit Form](#)

Network Information
Click here to access:
[Pharmacy](#)
[Provider Directory - Medica](#)

Programs & Services
Click here to access:
[Disease Management Programs](#)
[Medica CallLink Nurse Line](#)
[Medica Optum Employee Assistance Program](#)
[My Health Manager from MedicaSM](#)
[United Behavioral Health](#)

1. Intro 4. Demographics 7. Try It! Contact Us

2. Group 5. Product

3. Employee 6. Other Insurance

Information. Authorized site use
The site may be grounds for penalt

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Select the Add option

A second menu bar appears. Select the Add menu option.

A second menu bar appears. Select the Add menu option.

Add Employee

The screenshot shows the Employer eServices website interface. At the top, there is a navigation bar with 'Enrollment' and 'ID Cards' tabs, and 'Help', 'Training', and 'Tutorials' links. Below this is a menu with options: 'Add', 'Terminate', 'Reinstate', 'Change', and 'Inquire'. A 'Log Out' button is located on the right side of this menu. The 'Add' option is expanded, showing 'Employee' and 'Dependent' sub-options. A red box highlights the 'Employee' option, and a blue callout bubble points to it with the text 'Click the Employee option'. Below the menu, there is a 'Welcome' message and a 'Hot Topics' section with several links. Further down, there are three columns of links under the headings 'Resources', 'Network Information', and 'Programs & Services'. At the bottom of the page, there is a navigation bar with numbered buttons: '1. Intro', '2. Group', '3. Employee', '4. Demographics', '5. Product', '6. Other Insurance', and '7. Try It!'. A blue callout bubble points to the '3. Employee' button with the text 'Click the Employee menu option.'.

Click the Employee menu option.

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Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Select Group

Select a Group and Continue.

Select Group (Select Group) [v]

Help Continue

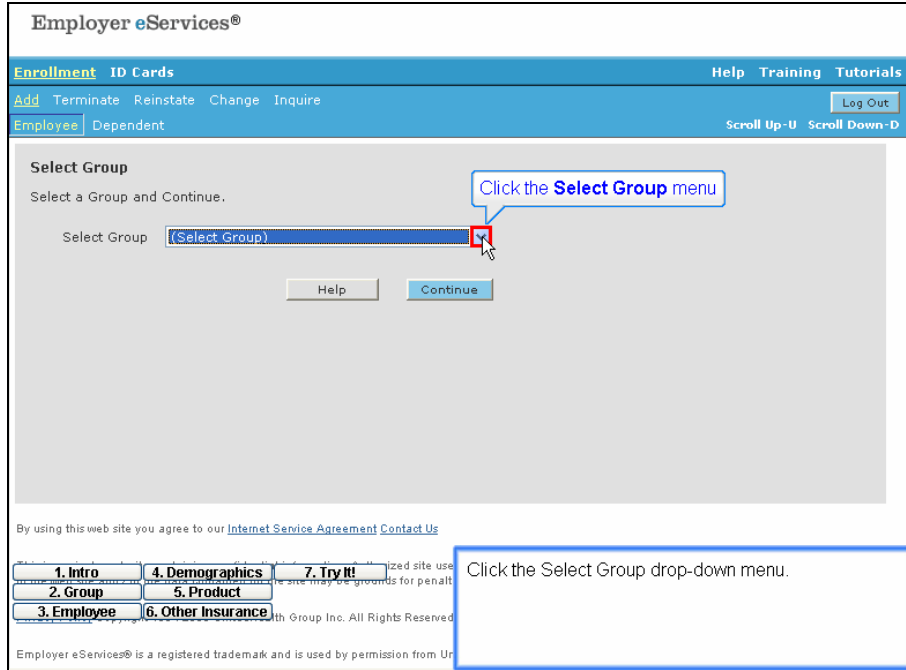
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1. Intro 2. Group 3. Employee 4. Demographics 5. Product 6. Other Insurance 7. Try It!

The Select Group screen displays.

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The Select Group screen displays.



Click the Select Group drop-down menu.

The Select Group drop-down menu appears. Select the group name with which the new employee will be associated.

The group name you selected now appears in the Select Group field. Click the Continue button.

Add Employee

Employer eServices®

Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up - U Scroll Down - D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: Policy Anniversary:

Add Employee

Step 1 Enter Information and select Continue.

* **Original Effective Date**

Original Effective Date* MM / DD / CCYY

COBRA

Continuation Enrollee Type

Help Continue

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1. Intro 4. Demographics 7. Try It!
2. Group 5. Product
3. Employee 6. Other Insurance

Required fields are marked with an asterisk.

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Required fields are marked with an asterisk.

Enter the Original Effective date. Note that you can press the Tab key to move to the next field.

Add Employee

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Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: Policy Anniversary:

Add Employee

Step 1 Enter Information and select Continue.
**Required fields*

Original Effective Date* 06 / 01 / 2007

Continuation Enrollee Type Leave COBRA box unchecked

Help Continue

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1. Intro 2. Group 3. Employee 4. Demographics 5. Product 6. Other Insurance 7. Try It!

In this example, the employee is not enrolling in COBRA.

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In this example, the employee is not enrolling in COBRA.

Add Employee

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Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: Policy Anniversary:

Add Employee

Step 1 Enter Information and select Continue.
**Required fields*

Original Effective Date* 06 / 01 / 2007
COBRA
Continuation Enrollee Type

Help Highlighted

Click the Continue button

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1. Intro 4. Demographics 7. Try It!
2. Group 5. Product
3. Employee 6. Other Insurance

Click the Continue button.

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Click the Continue button.

Add Employee

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Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: 00R1333 Insured ID:
Policy Status: A Policy Anniversary: 04/01

Employee Information Demographic Information Product Information Other Insurance Cobra (Optional)

Step 2

Enter Original Date of Hire

Date of Hire * MM/DD/CCYY Employee ID (SSN) * Alternate ID

* Required Field

Help Continue

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1. Intro 2. Group 3. Employee 4. Demographics 5. Product 6. Other Insurance 7. Try It!

The Employee Information tab displays. Enter the month, day, and year of the employee's original date of hire.

The Employee Information tab displays. Enter the month, day, and year of the employee's original date of hire.

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Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Employee Information Demographic Information Product Information Other Insurance Cobra (Optional)

Step 2 Employee Information

Date of Hire * 05 / 20 / 2007 Employee ID Alternate ID

Help Continue

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1. Intro 2. Group 3. Employee 4. Demographics 5. Product 6. Other Insurance 7. Try It!

Next, enter the employee's Social Security Number. Please note that the Alternate ID will be generated upon submission of enrollment. It will then be visible in the Inquiry mode.

Next, enter the employee's Social Security Number. Please note that the Alternate ID will be generated upon submission of enrollment. It will then be visible in the Inquiry mode.

Add Employee

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Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstate Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Employee Information Demographic Information Product Information Other Insurance Cobra (Optional)

Step 2 Employee Information * Required Field

Date of Hire * 05 / 20 / 2007 Employee ID (SSN) * 365365365
Alternate ID

Help Continue

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1. Intro 4. Demographics 7. Try It!
2. Group 5. Product
3. Employee 6. Other Insurance

Click the Continue button.

Click the Continue button.

Click the Continue button.

Add Employee

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Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up - U Scroll Down - D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Employee ID (SSN) Date of Hire *
Alternate ID
Date of Birth * / /
Last Name * Preferred Language *
First Name * MI
Address 1 *
Address 2
City *
State *
Home Phone - - Zip * -
Gender *
Enrollment Reason *

1. Intro **4. Demographics** **7. Try It!**
2. Group **5. Product** Help Con
3. Employee **6. Other Insurance**

Now that you have entered employee information, the Demographic Information tab displays.

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Now that you have entered employee information, the Demographic Information tab displays.

Add Employee

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Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Employee ID (SSN) 365365365 Date of Hire * 05/20/2007

Alternate ID

Date of Birth * MM / DD / CCYY

Last Name * Preferred Language * ENGLISH

First Name * MI

Address 1 *

Address 2 *

City *

State * Zip *

Home Phone - -

Gender *

Enrollment Reason * TIMELY

1. Intro 4. Demographics 7. Try It!
2. Group 5. Product
3. Employee 6. Other Insurance

Help Con

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All required fields are marked with an asterisk.

All required fields are marked with an asterisk.

Add Employee

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Add Terminate Reinst. Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Employee ID (SSN) 365365365 Enter Date of Birth Date of Hire * 05/20/2007

Alternate ID
Date of Birth * MM/DD / CCYY

Last Name * Preferred Language * ENGLISH
First Name * MI
Address 1 *
Address 2 *
City *
State * Zip * -
Home Phone - -
Gender *
Enrollment Reason * TIMELY

1. Intro 4. Demographics 7. Try It!
2. Group 5. Product
3. Employee 6. Other Insurance

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Enter the Date of Birth. Note that you can press the tab key to move to the next field.

Enter the Date of Birth. Note that you can press the tab key to move to the next field.

Add Employee

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Add Terminate Reinstater Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: 00R1333 Insured ID:
Policy Status: A Policy Anniversary: 04/01

Employee ID (SSN) 365365365 Date of Hire * 05/20/2007

Alternate ID Enter Employee Name

Date of Birth * 07 / 20 / 1972

Last Name * Highlight Box (358 x 53) Preferred Language * ENGLISH

First Name * (X:66; Y:258) MI

Address 1 *

Address 2 *

City *

State *

Home Phone - - Zip * -

Gender *

Enrollment Reason * TIMELY

1. Intro 4. Demographics 7. Try It!
2. Group 5. Product
3. Employee 6. Other Insurance

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Enter the employee's name.

Enter the employee's name.

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Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Last Name * SMITH Preferred Language **ENGLISH** MI
First Name *
Address 1 *
Address 2 *
City *
State * Zip * -
Home Phone - -
Gender *
Enrollment Reason * **TIMELY**

Help Continue

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1. Intro 4. Demographics 7. Try It!
2. Group 5. Product
3. Employee 6. Other Insurance

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Click the Preferred Language drop-down menu when the selection is other than the default of English.

Click the Preferred Language drop-down menu when the selection is other than the default of English.

Add Employee

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Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Employee ID (SSN) 365365365 Date of Hire * 05/20/2007

Alternate ID

Date of Birth * 07 / 20 / 1972

Last Name * SMITH Enter Address Preferred Language * ENGLISH

First Name * JON MI

Address 1 * Highlight Box (314 x 103)

Address 2 * (X:70; Y:308)

City * State * Zip *

Home Phone - -

Gender * Enrollment Reason * TIMELY

1. Intro 4. Demographics 7. Try It!
2. Group 5. Product Help Con
3. Employee 6. Other Insurance

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Enter the employee's address.

Enter the employee's address.

Add Employee

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Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

First Name * JON MI

Address 1 * 12 MAIN STREET

Address 2

City * NOWHERE

State * MISSOURI Zip * -

Home Phone -

Gender **Highlight Box**

Enrollment Reason * TIMELY

Click the Gender menu

Help Continue

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1. Intro 2. Group 3. Employee 4. Demographics 5. Product 6. Other Insurance 7. Try It!

Click the Gender drop-down menu.

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Click the Gender drop-down menu.

Add Employee

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Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

First Name * JON MI

Address 1 * 12 MAIN STREET

Address 2

City * NOWHERE

State * MISSOURI Zip * 63146 -

Home Phone 314 - 111 - 2222

Gender * **Select Gender**

Enrollment Reason * FEMALE **Highlight Box**

Help Continue

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1. Intro 2. Group 3. Employee 4. Demographics 5. Product 6. Other Insurance 7. Try It!

Select the employee's gender.

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Select the employee's gender.

Add Employee

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Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

First Name * JON MI

Address 1 * 12 MAIN STREET

Address 2

City * NOWHERE

State * MISSOURI Zip * 63146 -

Home Phone 314 - 11

Gender * MALE

Enrollment Reason * TIMELY

Help Continue

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1. Intro 2. Group 3. Employee 4. Demographics 5. Product 6. Other Insurance 7. Try It!

Click the Enrollment Reason drop-down menu.

Click the Enrollment Reason drop-down menu.

Add Employee

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Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: 00R1333 Insured ID:
Policy Status: A Policy Anniversary: 04/01

First Name * JON MI
Address 1 * 12 MAIN STREET
Address 2
City * NOWHERE
State * MISSOURI Zip * 63146 -
Home Phone 314 - 111 - 2222
Gender * MALE
Enrollment Reason * TIMELY

Select Enrollment Reason

TIMELY
LATE
HIGHLIGHT BOX
SPECIAL

Help Continue

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1. Intro 2. Group 3. Employee 4. Demographics 5. Product 6. Other Insurance 7. Try It!

Select the employee's enrollment reason. In this example, we'll select "Open".

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Select the employee's enrollment reason. In this example, we'll select "Open".

Add Employee

Employer eServices®

Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

First Name * JON MI
Address 1 * 12 MAIN STREET
Address 2
City * NOWHERE
State * MISSOURI Zip * 63146 -
Home Phone 314 - 111 - 2222
Gender * MALE
Enrollment Reason * OPEN

Click the **Continue** button

Help Hide Box

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1. Intro 2. Group 3. Employee 4. Demographics 5. Product 6. Other Insurance 7. Try It!

Verify the information you have entered is correct, then click the Continue button.

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Verify the information you have entered is correct, then click the Continue button.

The screenshot shows the 'Employer eServices' interface for adding an employee. At the top, there are navigation links for 'Enrollment' and 'ID Cards', and utility links for 'Help', 'Training', and 'Tutorials'. Below this is a header with 'Add', 'Terminate', 'Reinstate', 'Change', and 'Inquire' options, along with a 'Log Out' button. The main content area displays employee details: Enrollee, Policy (00R1333), Insured ID, Policy Status (A), and Policy Anniversary (04/01). A tabbed interface is shown with 'Employee Information', 'Demographic Information', 'Product Information' (highlighted with a red box), 'Other Insurance', and 'Cobra (Optional)'. The 'Product Information' tab is active, showing 'Step 4: Enter Product Information and select Continue.' Below this is a table for coverage lines with columns: Coverage Line, Coverage Description, Req'd, Coverage Select, Coverage Period Begin Date, and Coverage Period End Date. A row is filled with 'MEDICAL', 'CHOICE SELECT', 'N', a checked box, and '06/01/2007'. Below the table are fields for Status (ACTIVE), Relationship* (EMPLOYEE), Dependent Coverage, and Medicare Eligible. A question asks if the member has current or previous health coverage within the last 24 months, with 'Pre-Existing*' radio buttons for 'Yes' and 'No'. At the bottom left, a progress bar shows steps 1 through 7, with '5. Product' selected. A blue callout box on the right contains the text: 'Now that you have entered enrollee data, the Product Information tab displays.'

Now that you have entered enrollee data, the Product Information tab displays.

Employer eServices®

Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: 00R1333 Insured ID:
Policy Status: A Policy Anniversary: 04/01

Employee Information Demographic Information Product Information Other Insurance Cobra (Optional)

Step 4 Enter Product Information and select Continue.

Coverage Line	Coverage Description	Req'd	Coverage Select	Coverage Period Begin Date	Coverage Period End Date
MEDICAL	CHOICE SELECT	N	<input type="checkbox"/>	06/01/2007	

Status: ACTIVE Relationship*: EMPLOYEE
Dependent Coverage: Medicare Eligible:

Does the member you are enrolling, have current health coverage or had previous health coverage within the last 24 months with a break in coverage greater than 63 days? - Can only be entered on initial enrollment.
Pre-Existing* Yes No

1. Intro 4. Demographics 7. Try It!
2. Group 5. Product
3. Employee 6. Other Insurance

* Required Field

All required fields are marked with an asterisk.

All required fields are marked with an asterisk.

Add Employee

Employer eServices®

Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Employee Information Demographic Information **Product Information** Other Insurance Cobra (Optional)

Step 4 Enter Product Information and select Continue.

* Required Field

Coverage Line	Coverage Description	Req'd	Coverage Select	Coverage Period Begin Date	Coverage Period End Date
MEDICAL	CHOICE SELECT	N	<input type="text"/>	06/01/2007	

Status: ACTIVE Relationship*: EMPLOYEE

Dependent Coverage:

Does the member you are enrolling, have current health coverage or had previous health coverage within the last 24 months with a break in coverage greater than 63 days? - Can only be entered on initial enrollment.

Pre-Existing* Yes No

1. Intro 4. Demographics 7. Try It!
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To begin, click the Coverage Select box next to the desired products.

To begin, click the Coverage Select box next to the desired products.

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Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstater Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Employee Information Demographic Information **Product Information** Other Insurance Cobra (Optional)

Step 4 Enter Product Information and select Continue.

* Required Field

Coverage Line	Coverage Description	Req'd	Coverage Select	Coverage Period Begin Date	Coverage Period End Date
MEDICAL	CHOICE SELECT	N	<input checked="" type="checkbox"/>	06/01/2007	

Status: Relationship*:
Dependent Coverage: Medicare Eligible:

Does the member you are enrolling, have current health coverage or had previous health coverage within the last 24 months with a break in coverage greater than 63 days? - Can only be entered on initial enrollment.

Pre-Existing Health Coverage Yes No

1. Intro 4. Demographics 7. Try It!
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If your policy has a pre-existing clause, select the employee's Pre-Existing radio button. In this example, we'll select the Yes radio button.

If your policy has a pre-existing clause, select the employee's Pre-Existing radio button. In this example, we'll select the Yes radio button.

Add Employee

Employer eServices®

Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstate Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: **00R1333** Insured ID:
Policy Status: **A** Policy Anniversary: **04/01**

Status: ACTIVE Relationship*: EMPLOYEE
Dependent Coverage: Medicare Eligible:

Does the member you are enrolling, have current health coverage or had previous health coverage within the last 24 months with a break in coverage greater than 63 days? - Can only be entered on initial enrollment.
Pre-Existing* Yes No

Help **Continue**

Click the **Continue** button

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1. Intro 4. Demographics 7. Try It!
2. Group 5. Product
3. Employee 6. Other Insurance

Verify the information you have entered is correct, then click the Continue button.

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Verify the information you have entered is correct, then click the Continue button.

Now that you have entered product information data, the Other Insurance tab displays. Note that the fields at the top of this tab are greyed out and inaccessible when enrolling an employee.

The screenshot shows the 'Add Employee' form in the Employer eServices system. At the top, there are navigation tabs for 'Enrollment' and 'ID Cards', and a 'Log Out' button. Below this, there are links for 'Add', 'Terminate', 'Reinstate', 'Change', and 'Inquire'. The main form area is titled 'Employee' and contains fields for 'Enrollee:', 'Policy Status: A', 'Policy: 00R1333', 'Insured ID:', and 'Anniversary: 04/01'. A callout box points to the 'No' radio button with the text 'Select Medicare status'. Below this, there are sections for 'Medicare Part A' and 'Medicare Part B', each with radio buttons for 'Enrolled in Medicare Part A/B', 'Ineligible for Medicare Part A/B', and 'Not Enrolled in Medicare Part A/B'. At the bottom, there are tabs for '1. Intro', '2. Group', '3. Employee', '4. Demographics', '5. Product', '6. Other Insurance', and '7. Try It!'. A callout box at the bottom right contains the text: 'Select the radio button that best describes the employee's Medicare status. This is the only required entry on this page.'

Select the radio button that best describes the employee's Medicare status. This is the only required entry on this page.

Employer eServices®

Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change Inquire Log Out

Employee Dependent Scroll Up-U Scroll Down-D

Enrollee: Policy: 00R1333 Insured ID:
Policy Status: A Policy Anniversary: 04/01

On the day this coverage begins, will the enrollee be covered under Medicare?

Unknown No Yes If yes, indicate current Medicare Status: (complete all that applies)

Medicare Part A:

Enrolled in Medicare Part A: Effective Date [] / [] / [] Expiration Date [] / [] / []

Ineligible for Medicare Part A

Not Enrolled in Medicare Part A

Medicare Part B:

Enrolled in Medicare Part B: Effective Date [] / [] / [] Expiration Date [] / [] / []

Ineligible for Medicare Part B

Not Enrolled in Medicare Part B

Medicare Part D: Can only be enrolled in Part D, if enrolled in part A and/or Part B

1. Intro 4. Demographics 7. Try It! [] / []

2. Group 5. Product

3. Employee 6. Other Insurance

Not Enrolled in Medicare Part D

If you answer yes to this question, you will need to provide appropriate supporting information.

If you answer yes to this question, you will need to provide appropriate supporting information.

When you have finished entering this information, click the Submit button to finalize the employee's enrollment.

Employer eServices®

Enrollment ID Cards Help Training Tutorials

Add Terminate Reinstatement Change **Inquire** Log Out

Scroll Up-U Scroll Down-D

Enrollee: JON SMITH Policy: 00R1333 Insured ID: 365365365-00
Policy Status: A Policy Anniversary: 04/01

Employee Information Demographic Information Product Information Other Insurance Cobra (Optional)

Employee Information

Transaction Successful.

* Required Field

Date of Hire * 05/20/2007 Employee ID (SSN) * 365365365
Date of Retirement Alternate ID 986748812

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An inquiry-only screen will display a "Transaction Successful" message.

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