Employer eServices®		
We	lcome to the Chang	je Enrollment tutorial
Audience: Employers		
Module Length: Appr	oximately 7 minutes	
Last Updated: 04/04/	2007	
1. Introduction 3. 2. Select 4	Change . Try It!	Welcome to the Change Enrollment tutorial. In this tutorial, you'll learn how to change an enrollee's information using Employer eServices.

Slide notes

Text Captions

Welcome to the Change Enrollment tutorial. In this tutorial, you'll learn how to change an enrollee's information using Employer eServices.

Audience: Employers

Module Length: Approximately 7 minutes

Last Updated: 04/04/2007

Welcome to the Change Enrollment tutorial



Slide 2 - Slide 2

Employer eServices®				
We	lcome to the Chang	je Enrollment tutorial		
Audience: Employers				
Module Length: Appr	oximately 7 minutes			
Last Updated: 04/04/	Last Updated: 04/04/2007			
1. Introduction 3. 2. Select 4	Change . Try It!	As you proceed, you may use the controls at the bottom of this window to rewind, pause, or skip ahead during playback.		

Slide notes

Text Captions

As you proceed, you may use the controls at the bottom of this window to rewind, pause, or skip ahead during playback.

Welcome to the Change Enrollment tutorial

Audience: Employers

Module Length: Approximately 7 minutes

Last Updated: 04/04/2007

Employer eServices®

Slide 3 - Slide 3

Employer eServices®				
We	lcome to the Chang	je Enrollment tutorial		
Audience: Employers				
Module Length: Appr	Module Length: Approximately 7 minutes			
Last Updated: 04/04/	Last Updated: 04/04/2007			
1. Introduction 3. 2. Select 4	Change . Try It!	To move from one section to another, click the menu buttons found above the playback controls.		

Slide notes

Text Captions

Welcome to the Change Enrollment tutorial

To move from one section to another, click the menu buttons found above the playback controls.

Audience: Employers

Module Length: Approximately 7 minutes

Last Updated: 04/04/2007

Employer eServices®

Slide 4 - Slide 4

Employer eServices®				
We	lcome to the Chang	je Enrollment tutorial		
Audience: Employers				
Module Length: Appr	oximately 7 minutes			
Last Updated: 04/04/	Last Updated: 04/04/2007			
1. Introduction 3. 2. Select 4	Change . Try It!	Also, please note that your screens may be a bit different from the ones you'll see in this tutorial. The difference depends on your contractual agreement.		

Slide notes

Text Captions

Also, please note that your screens may be a bit different from the ones you'll see in this tutorial. The difference depends on your contractual agreement.

Welcome to the Change Enrollment tutorial

Audience: Employers

Module Length: Approximately 7 minutes

Last Updated: 04/04/2007



Slide 5 - Slide 5

Employer eServices®					
Wel	come to the Chang	je Enrollment tutorial			
Audience: Employers					
Module Length: Appr	oximately 7 minutes				
Last Updated: 04/04/2	Last Updated: 04/04/2007				
1. Introduction 3. (2. Select 4.	Change . Try It!	Finally, remember that all sample information you'll see in this tutorial is fictitious. Any resemblance to existing individuals or companies is purely coincidental.			

Slide notes

Text Captions

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

Welcome to the Change Enrollment tutorial

Audience: Employers

Module Length: Approximately 7 minutes

Last Updated: 04/04/2007



Slide 6 - Slide 6

Employer eServices [®]					
Enrollment ID Cards Billing			Help	Training	Tutorials
					Log Out
					^
Welcome User,					
Employer eServices is your online, real-tin much more.	ne gateway to eligibilit	y and enrollment cha	anges, claim status, repor	ting, billing	and
Hot Topics! Click on one of the following EMPLOYEE COMMUNICATION: Create your	links for up to the mini <u>own employee health</u>	ute news information and wellness newsle	atter!		
Hot Topic Link - Frontier Personal Health Manager on myuhc.com					
Plan Cost Estimator - click here to see how	<u>ι it can help γou and γ</u>	our employees			Ξ
Resources	Network Informat	ion	Programs & Service	5	
Click here to access:	Click here to access: Click here to access:				
Administrative Guides	Network East Shee	.+	Benavioral Health		
Brochures & Forms	Network Mans	<u>, (3</u>	Care Coordination		
Communication Resource Center	Physician Director	¥.	Complementary Med	icine	
<u>Contact Information</u>	UnitedHealth Premium Designation Healthy Pregnancy Program				
Help	<u>Program</u>		iPlan® Health Saving	s Account D	Demo
		The change pro	noes involves a seria	es of nade	es on
which you may updat		update an enrollee's	informatic	on.	
2. Select 4. Try It!		·····			

Slide notes

Text Captions

The change process involves a series of pages on which you may update an enrollee's information.



Slide 7 - Slide 7

Employer eServices®					
Enrollment ID Cards Billing		Help Training Tutorials			
		Log Out			
Welcome User.		<u>^</u>			
Welcome User, Employer eServices is your online, real-time gateway to eligibility and enrollment changes, claim status, reporting, billing and much more. Hot Topics! Click on one of the following links for up to the minute news information EMPLOYEE COMMUNICATION: Create your own employee health and wellness newsletter! Hot Topic Link - Frontier Personal Health Manager on myuhc.com Plan Cost Estimator - click here to see how it can help you and your employees					
Resources Click here to access: Administrative Guides Benefit Plan Coverage Documents Brochures & Forms Communication Resource Center Contact Information Help	Network Information Click here to access: <u>Network Changes</u> <u>Network Fact Sheets</u> <u>Network Maps</u> <u>Physician Directory</u> <u>UnitedHealth Premium Designation</u> <u>Program</u>	Programs & Services Click here to access: Behavioral Health Care24 Care Coordination Complementary Medicine Healthy Pregnancy Program iPlan® Health Savings Account Demo			
1. Introduction 3. Change 2. Select 4. Try It!	Keep in mir employee o	nd that an enrollee may be either an or an employee's dependent.			

Slide notes

Text Captions

Keep in mind that an enrollee may be either an employee or an employee's dependent.



Slide 8 - Slide 8

Employer eServices®					
Frighlight Boxt ID Cards Billing			Help	Training	Tutorials
Select the Enrollment option					Log Out
Welcome User,					<u>^</u>
Wercome oser, Employer eServices is your online, real-time gateway to eligibility and enrollment changes, claim status, reporting, billing and much more. Hot Topics! Click on one of the following links for up to the minute news information EMPLOYEE COMMUNICATION: Create your own employee health and wellness newsletter! Hot Topic Link - Frontier Personal Health Manager on myuhc.com Plan Cost Estimator - click here to see how it can help you and your employees					and
ResourcesNetwork InformationPrograms & ServicesClick here to access:Click here to access:Click here to access:Administrative GuidesNetwork ChangesBehavioral HealthBenefit Plan Coverage DocumentsNetwork Fact SheetsCare24Brochures & FormsNetwork MapsCare CoordinationCommunication Resource CenterPhysician DirectoryComplementary MedicineContact InformationUnitedHealth Premium DesignationHealthy Pregnancy ProgramHelpProgramiPlan@ Health Savings Account Demo					Demo
1. Introduction 3. Change 2. Select 4. Try It!		To begin, selec	t the Enrollment ment	u option.	

Slide notes

Text Captions

To begin, select the Enrollment menu option.

Select the Enrollment option



Slide 9 - Slide 9

Employer eServices®				
Enroliment ID Cards Billing			Help Tr	aining Tutorials
Add Terminate Reinstate Charge Inqui	re Electronic File			Log Out
Click the	Change option			-
Welcome User,				
Employer eServices is your online, real-time gateway to eligibility and enrollment changes, claim status, reporting, billing and much more. Hot Topics! Click on one of the following links for up to the minute news information EMPLOYEE COMMUNICATION: Create your own employee health and wellness newsletter! Hot Topic Link - Frontier Personal Health Manager on myuhc.com				
Resources	Network Informat	<u>tion</u>	Programs & Services	
Administrative Guides	Network Changes	:	Behavioral Health	
Benefit Plan Coverage Documents	Network Fact Shee	ets	Care24	
Brochures & Forms	Network Maps	—	Care Coordination	
Communication Resource Center	Physician Directory		Complementary Medicin	<u>e</u>
Contact Information	UnitedHealth Prem	ium Designation	Healthy Pregnancy Progr	<u>ram</u>
<u>Help</u>	Program	-	iPlan® Health Savings A	ccount Demo
A second menu bar appears. Click the Change menu				
. narodución 5. change	option.			
Z. Select 4. Try ft:				

Slide notes

Text Captions

A second menu bar appears. Click the Change menu option.

Click the Change option



Slide 10 - Slide 10

Employer eServices®	
<u>Enrollment</u> ID Cards Billing	Help Training Tutorials
Add Terminate Reinstate Charge Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D
Select Group from list, enter Employee Search criteria a Select Group (Select Grifight Box Employee Search By Employee ID By Last Name Select Enrollee Help Cont	Ind select Search.
By using this web site you agree to our <u>Internet Service Agreement</u> <u>Contact I</u>	15
1. Introduction 3. Change 2. Select 4. Try It!	The Select Group screen displays.

Slide notes

Text Captions

The Select Group screen displays.



Slide 11 - Slide 11

Employer eServices®	
<u>Enrollment</u> ID Cards Billing	Help Training Tutorials
Add Terminate Reinstate Change Inquire Electronic File	Log Out
4	Scroll Up-U Scroll Down-D
Select Group from list, enter Employee Search criteria a Select Group (Select Group)	ind select Search.
Employee Search 💿 By Employee ID	(ss Click the Select Group menu
O By Last Name Select Enrollee	First Initial Search
By using this web site you agree to our <u>Internet Service Agreement</u> <u>Contact</u>	<u>Us</u>
1. Introduction 3. Change 2. Select 4. Try It!	Click the Select Group drop-down menu.

Slide notes

Text Captions

Click the Select Group drop-down menu.

Click the Select Group menu



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Slide 12 - Slide 12

Employer eServices®	
Enrollment ID Cards Billing	Help Training Tutorials
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D
Select Group from list, enter Employee Search criteria a Select Group (Select Group) (Select Group) Employee Search (Select Group) GENEVA PHARMACHATIGNES, INC. 0700 LYNN'S BAKERY, INC. 040 836 ZOMBA RECORDING COMBA By Last Name Select Group Select Enrollee	nd select Search.
By using this web site you agree to our <u>Internet Service Agreement</u> Contact I 1. Introduction 3. Change 2. Select 4. Try It!	[≤] The Select Group drop-drown menu appears. Select the group name with which the enrollee is associated.

Slide notes

Text Captions

The Select Group drop-drown menu appears. Select the group name with which the enrollee is associated.

Select Group Name



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Slide 13 - Slide 13

Employer eServices®	
Enrollment ID Cards Billing	Help Training Tutorials
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D
Select Group from list, enter Employee Search criteria a Select Group GENEVA PHARMACEUTICALS, INC. 070	and select Search.
Employee Search By Employee ID Highlight-Box (642 × 70) By Last Name (X:26; Y:206)	(SS for Alternate ID) First Initial
Select Enrollee	tinue
By using this web site you agree to our <u>Internet Service Agreement</u> <u>Contact</u> 1. Introduction 3. Change 2. Select 4. Try It!	After you select the group, you will need to identify the employee. You may search for an employee by employee ID or by last name.

Slide notes

Text Captions

After you select the group, you will need to identify the employee. You may search for an employee by employee ID or by last name.



Slide 14 - Slide 14

Employer eServices®	
Enrollment ID Cards Billing	Help Training Tutorials
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D
Select Group from list, enter Employee Search criteria a Select Group GENEVA PHARMACEUTICALS, INC. 0700	nd select Search.
Employee Search 💿 By Employee ID	(SSN or Alternate ID)
Select Enrollee Click the Last Name button	First Initial Search
Help Cont	nue
By using this web site you agree to our <u>Internet Service Agreement</u> <u>Contact</u> 1. Introduction 3. Change	In this example, we will search by employee last name.
2. Select 4. Try It	

Slide notes

Text Captions

In this example, we will search by employee last name.

Click the Last Name button



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Slide 15 - Slide 15

Employer eServices®			
<u>Enrollment</u> ID Cards Billing	Help Training Tutorials		
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D		
Select Group from list, enter Employee Search criteria a	nd select Search.		
Select Group GENEVA PHARMACEUTICALS, INC. 0700	051 💌		
Employee Search 🔘 By Employee ID	(SSN or Alternate ID)		
Employee Search By Employee ID (SSN or Alternate ID) By Last Nattighlight Box First Initial Search Select Enrollee Help Continue			
1. Introduction 3. Change 2. Select 4. Try It!	Enter the employee's last name. Note that you may do a wild card search by entering the first three characters of the last name, followed by an asterisk.		

Slide notes

Text Captions

Enter the employee's last name. Note that you may do a wild card search by entering the first three characters of the last name, followed by an asterisk.

Enter Last Name



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Slide 16 - Slide 16

Employer eServices®	
<u>Enrollment</u> ID Cards Billing	Help Training Tutorials
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D
Select Group from list, enter Employee Search criteria a	nd select Search.
Select Group GENEVA PHARMACEUTICALS, INC. 0700	051 💌
Employee Search 🔿 By Employee ID	(SSN or Alternate ID)
By Last Name DOE	First Artial Search
Select Enrollee 🛛 💌	Click the Search button
Help Conti	nue
By using this web site you agree to our <u>Internet Service Agreement</u> <u>Contact L</u>	<u>ls</u>
1. Introduction 3. Change 2. Select 4. Try It!	Click the Search button.

Slide notes

Text Captions

Click the Search button.

Click the Search button



Slide 17 - Slide 17

Employer eServices®	
Enrollment ID Cards Billing	Help Training Tutorials
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D
Select Group from list, enter Employee Search criteria	and select Search.
Select Group GENEVA PHARMACEUTICALS, INC. 070	0051 💌
Employee Search 🔘 By Employee ID	(SSN or Alternate ID)
By Last Name DOE Select Enrollee DOE, JOHN (Employee) 00123456789 Help Con	Eirst Initial Search Click Select Enrollee menu
1. Introduction 3. Change 2. Select 4. Try It!	Click the Select Enrollee drop-down menu to select the employee's name from a list of matching search results.

Slide notes

Text Captions

Click the Select Enrollee drop-down menu to select the employee's name from a list of matching search results.

Click Select Enrollee menu



Slide 18 - Slide 18

Employer eServices®				
Enrollment ID Cards Billing	Help Training Tutorials			
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D			
Select Group from list, enter Employee Search criteria a	nd select Search.			
Select Group GENEVA PHARMACEUTICALS, INC. 0700	051 💌			
Employee Search 🔘 By Employee ID	(SSN or Alternate ID)			
 By Last Name DOE 	First Initial Search			
Select Enrollee DOE, JOHN (Employee) 00123456789 DOE, JOHN (Employee) 00123456789 Help Cominue Select Employee				
By using this web site you agree to our Internet Service Agreement Contact Us				
1. Introduction 3. Change 2. Select 4. Try It!	The Select Enrollee menu displays. Select the correct employee from the list.			

Slide notes

Text Captions

The Select Enrollee menu displays. Select the correct employee from the list.

Select Employee



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Slide 19 - Slide 19

Employer eServices®				
<u>Enrollment</u> ID Cards Billing	Help Training Tutorials			
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D			
Select Group from list, enter Employee Search criteria a	nd select Search.			
Select Group GENEVA PHARMACEUTICALS, INC. 0700	051 💌			
Employee Search 🔿 By Employee ID	(SSN or Alternate ID)			
 By Last Name DOE 	First Initial Search			
Select Enrollee DOE, JOHN (Errighight Box0123456789				
Help Highirt	Dick the Continue button			
By using this web site you agree to our <u>Internet Service Agreement</u> <u>Contact Us</u>				
1. Introduction 3. Change 2. Select 4. Try It:	The employee name you selected now appears in the Select Enrollee field. Click the Continue button.			

Slide notes

Text Captions

The employee name you selected now appears in the Select Enrollee field. Click the Continue button.

Click the **Continue** button



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Slide 20 - Slide 20

Employer eServices®				
<u>Enrollment</u> ID Cards Billing	Help Training Tutorials			
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D			
Enrollee: JOHN DOE Group: 0700051	Insured ID: 00123456789-00			
Employee Demographic Product Information Information Information	Other Insurghight Box			
Step 1 Enter employee information	on changes and Continue or Submit.			
*Required fields				
Original Date of Hire* 04 / 15 / 2006	Date of Retirement MM / DD / CCYY			
Date of Death MM / DD / CCYY				
Complete Alternate Payee information only when the payee is not the employee.				
Alternate Payee Indicator 🛛 Yes C 🛛 No 💿				
Alternate Payee ID				
1. Introduction 3. Change 2. Select 4. Try It!	While in the change mode, you may update data on any of the four tabs shown here.			

Slide notes

Text Captions

While in the change mode, you may update data on any of the four tabs shown here.



Slide 21 - Slide 21

Employer eServ	ices®					
Enrollment ID Cards I	Billing			Help	Training	Tutorials
Add Terminate Reinstate	e Change Inquire Ele	ctronic File		Scrol	llUp-U Scro	Log Out oll Down-D
Enrollee: JOHN DOE	Group:	0700051	Insured ID:	00123456789	-00	
Employee Information Step 1 *Required fields Original Date	Demographic Information Enter employ of Hire* 04 / 15 ,	Product Information ee informatio	Other Insurance	7 Submit.		
Complete Alternate Payee information only when the payee is not the employee. Alternate Payee Indicator Yes O No O Alternate Payee ID						
1. Introduction	3. Change		address.	agin by updatif	iy an enfo	illee 2

Slide notes

Text Captions

In this example, we'll begin by updating an enrollee's address.



Slide 22 - Slide 22

Employer eServices®	
Enrollment ID Cards Billing	Help Training Tutorials
Add Terminate Reinstate Charge Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D
Enrollee: JOHN DOE Group: 0700051	Insured ID: 00123456789-00
Employee Information Demographic Information Product Information Step 1 Click the Demograph *Required fields	Other Insurance ic Information tab e or Submit.
Original Date of Hire* 04 / 15 / 2006 Date of Death MM / DD / CCYY Complete Alternate Payee information only when the Alternate Payee Indicator Yes O No ©	Date of Retirement MM / DD / CCYY e payee is not the employee.
Alternate Payee ID	To make this change, begin by clicking the
1. Introduction 3. Change 2. Select 4. Try It!	Demographic Information tab.

Slide notes

Text Captions

To make this change, begin by clicking the Demographic Information tab.

Click the **Demographic Information** tab



Slide 23 - Slide 23

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Employer <mark>e</mark> Ser	vices®						
Enrollment ID Cards	Billing				Help	Training	Tutorials
Add Terminate Reinsta	ate Change Inquire El	ectronic File			Scro	ll Up-U Scr	Log Out roll Down-D
Enrollee: JOHN DOE	Group:	0700051		Insured ID:	00123456789	9-00	
Employee Information	Demographic Information	Product Information	Other Insuranc	e	it		
*Required fields	Enter demographie in		ges and contain				
Original Effective	05/01/2006		Termination				
Last Updated	05/01/2006						
Employee ID*	00123456789		SSN		-		
Date of Birth *	04 / 21 / 1967		Relationship*	EE EMPLOY	′EE	•	
Last Name*	DOE						
First Name*	ЈОНИ		Middle Initial				
Address 1*	123 MAIN ST						
1. Introduction 2. Select	3. Change 4. Try It!]	The Demogra only fields dis while in chan	aphic Inforr splayed in v ge mode.	mation tab di: white are elig	splays. N ible for up	ote that odates

Slide notes

Text Captions

The Demographic Information tab displays. Note that only fields displayed in white are eligible for updates while in change mode.



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Slide 24 - Slide 24

Employer <mark>e</mark> Ser	vices®						
Enrollment ID Cards	Billing				Hel	p Training	Tutorials
Add Terminate Reinsta	ate Change Inquire El	ectronic File			Sc	roll Up-U Sci	Log Out roll Down-D
Enrollee: JOHN DOE	Group:	0700051		Insured ID:	001234567	89-00	
Employee Information Step 2 *Required fields Original Effective Last Updated Employee ID* Date of Birth * Last Name*	Demographic Information Enter demographic inf 05/01/2006 05/01/2006 00123456789 04 / DOE	Product Information ormation chan	Other Insuranc ges and Continu Termination SSN Relationship*	e ue or Subm	nit.	x	
First Name* Address 1*	JOHN 123 MAIN ST		Middle Initial				
1. Introduction 2. Select	3. Change 4. Try It! (X:0; Y:470))	Update inforr	mation as I	necessary.		

Slide notes

Text Captions

Update information as necessary.



Slide 25 - Slide 25

Employer <mark>e</mark> Ser	vices®		
Enrollment ID Cards	Billing		Help Training Tutorials
Add Terminate Reinst	ate Change Inquire Electronic File		Log Out Scroll Up-U Scroll Down-D
Enrollee: JOHN DOE	Group: 0700051		Insured ID: 00123456789-00
First Name*	рони	Middle Initial	
Address 1*	321 TOWN AVE		
Address 2			
City*	ST CHARLES	Foreign Address	Yes O No 💿
State*	MISSOURI	Zip*	63301 -
Home Phone		Work Phone	
Gender*	MALE Ad	ldress Start Date	04 / 26 / 2006
Late Enrollee*	NEW HIRE		
	Help Highintin Bex	Submit	
By using this web site you agr	ee to our Internet Service Agreement Contact	<u>Us</u>	
This is a private web site cont	aining confidential information. Authorized site use	No. the second s	remation for business purposed only. Any up sutherized use of
1. Introduction	3. Change	enrollee.	update product information for this
2. Select	4. Try It!		

Slide notes

Text Captions

Next, we will update product information for this enrollee.



Slide 26 - Slide 26

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En	nployer <mark>e</mark> Serv	ices®							
Enroll	<mark>lment</mark> ID Cards F	Billing					Help	Training	Tutorials
Add 1	Terminate Reinstate	Change Inquire El	ectronic File				Scrol	ll Up-U Scr	Log Out oll Down-D
Enro	ollee: JOHN DOE	Group:	0700051		Insured	ID: 001234	56789	-00	
E	Employee Information	Demographic Information	Product Information	Other Insura	nce				
Ste	p 3 Enter pr	oduct information ch	anges and Co	ntinue or Sub	mit.				
Pro	duct			Effective Dat	e Terr	nination Date	;		
MI	EDICAL EDICAL			10/01/2006 09/01/2006	09/	30/2006			
	Enroll Co	py Remove	Modify Coverage	e Line	Assign Pi	rimary Provide	er		
	<u>Coverage</u> (0034 0034 PPOZN			<u>View Co</u>	<u>verage Detai</u>	<u>l</u>		
	1. Introduction 2. Select	3. Change 4. Try It!]	The Produ	t Informa	tion tab dis	plays.		

Slide notes

Text Captions

The Product Information tab displays.



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Slide 27 - Slide 27

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E	mployer <mark>e</mark> Serv	ices®								
Enro	<mark>illment</mark> ID Cards E	Billing						Help	Training	Tutorials
Add	Terminate Reinstate	e Change Inquire El	ectronic File					Scro	ll Up-U Sci	Log Out roll Down-D
En	rollee: JOHN DOE	Group:	0700051		In	sured ID:	001234	56789	9-00	
	Employee Information	Demographic Information	Product Information		Other Insurance					
St	Step 3 Enter product information changes and Continue or Submit.									
Pr	roduct			Effecti	ve Date	Termina	ation Date	е		
	MEDICAL MEDICAL			10/01 09/01	1/2006 1/2006	09/30/	2006			
	Enroll Co	py Remove	Modify Coverage	e Line	As	sign Prima	ary Provid	er		
	<u>Coverage</u> (0034 0034 PPOZN			Vi	ew Cover	<u>age Deta</u>	<u>il</u>		
	1. Introduction 2. Select	3. Change 4. Try It!]	From select	this tab, y tions.	ou may	add, ed	lit, or r	emove pi	roduct

Slide notes

Text Captions

From this tab, you may add, edit, or remove product selections.



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Slide 28 - Slide 28

Employer e	Services®									
Enrollment ID C	ards Billing							Help	Trainin	g Tutorials
Add Terminate R	einstate Change I	nquire Ele	ctronic File					Scro	ll Up-U 🤌	Log Out Scroll Down-D
Enrollee: JOHN I	DOE	Group:	0700051			Insured ID:	001234	156789	9-00	
Employee Information	Demograph Information	ic	Product Information	1	Other Insurance	•				
Step 3 E	nter product infori	nation ch	anges and Co	ntinue o	r Submi	t.				
Product				Effectiv	ve Date	Termina	ation Dati	э		
MEDICAL MEDICAL				10/01 09/01	/2006 /2006	09/30/	2006			
Enrol Policy Nu	Depy Remove	/e	Modify Coverage	e Line		Assign Prima	ary Provid	er]	
<u>Cove</u>						<u>View Cover</u>	<u>aqe Deta</u>	il		
1. Introductio	n 3. Cha 3. Cha 4. Try	nge		Keep the ter	in mind ms of y	that chan our contra	ges to c ictual aç	overa greem	ge are : ent.	subject to

Slide notes

Text Captions

Keep in mind that changes to coverage are subject to the terms of your contractual agreement.



Slide 29 - Slide 29

Employer eServices®							
Enrollment ID Cards Billing					Help	Training	Tutorials
Add Terminate Reinstate Chang	je Inquire El	ectronic File			Scro	ll Up-U Sci	Log Out roll Down-D
Enrollee: JOHN DOE	Group:	0700051		Insured ID:	00123456789	9-00	
Employee Demo Information Inform	graphic nation	Product Information	Other Insuranc	e			
Step 3 Enter product information changes and Continue or Submit.							
Produc			Effective Date	Termina	ation Date	_	
MEDI Click the Modify Co	verage Line	button	10/01/2006 09/01/2006 09/30/2006				
Enroll Copy R	.emove	Modifilig Works Base	e Line	Assign Prima	ary Provider	Ī	
Policy Number 0700051		~~					
Coverage 0034 003	34 PPOZN			View Cover	age Detail		
Croup Name CR2 ACT							
1. Introduction 3	. Change]	In this examp	ile, we'll up e Modify C	date the enro	llee's mei button	dical plan
2. Select	4. Try It!]	by clicking th	e mouny C	.overage inte	Dullon.	

Slide notes

Text Captions

In this example, we'll update the enrollee's medical plan by clicking the Modify Coverage line button.

Click the Modify Coverage Line button



Slide 30 - Slide 30

Employer eServices	5®			
<u>Enrollment</u> ID Cards Billin	g		Help Trai	ning Tutorials
Add Terminate Reinstate Ch	nange Inquire Electronic File		Scroll Up-	Log Out U Scroll Down-D
Enrollee: JOHN DOE	Group: 0700051	Insured	ID: 00123456789-00	
Modify Product En	ter Coverage, Positively Enrol	led and Continue	* Required Field	
Policy * 0700051 Cove	rage Type * MEDICAL	Effective Date *	10/01/2006	
Coverage*	Group Name	Plan Nan	ne	
0034 0034 PPOZN 01/01/3	2002 - GP2 ACTIVE	EMPLOYEES OPTIONS	PPO	
Market Name PCP/1 Termination Date	WIDE ACCESS	Coverage Loo	kup	
Positively Enrolled * Yes	Members Co	vered * Employee Only		
Eligibility Status * ACTI	VE Market	Number 0020494		
New Coinsurance	COBRA Pa	id-Date		
Salary Deductible	Sala	ry Year		
1. Introduction 2. Select	3. Change 4. Try It!	To change plan sele the right of the currer	ction, click the drop-c nt coverage selection	lown arrow to

Slide notes

Text Captions

To change plan selection, click the drop-down arrow to the right of the current coverage selection.



Slide 31 - Slide 31

Employer eServices [®]				
Enrollment ID Cards Billing			Help Training	Tutorials
Add Terminate Reinstate Change I	nquire Electronic File		Scroll Up-U Sc	Log Out roll Down-D
Enrollee: JOHN DOE	Group: 0700051	Insured ID: 00	123456789-00	
Modify Product Enter Cov	erage, Positively Enrolled an	d Continue *	Required Field	
Policy * 0700051 Coverage Ty	pe * MEDICAL	Effective Date * 10/01/2	2006	
Coverage*	Group Name	Plan Name		
0034 0034 PPOZN 01/01/2002 -	GP2 ACTIVE EMPLO	YEES OPTIONS PPO		
0034 0034 PPOZN 01/01/2002 - 0035 0035 PPOZN 01/01/2003 - 0036 0036 PPOZN 01/01/2004 -	GP2 ACTIVE EMPLO Hid&Actuative Emplo GP2 ACTIVE EMPLO	YEES OPTIONS PPO YEES OPTIONS PPO YEES OPTIONS PPO		
Positively Enrolled * Yes 🖃	Members	Select Plan		
Eligibility Status * ACTIVE	Market Numbe	r 0020494		
New Coinsurance	COBRA Paid-Dat	e		
Salary Deductible	Salary Yea	r		
1. Introduction 3. Chat 2. Select 4. Try	nge Sel /11:	ect a new plan from the	list.	

Slide notes

Text Captions

Select a new plan from the list.

Select Plan



Slide 32 - Slide 32

Employer eServices®		
Enrollment ID Cards Billing		Help Training Tutorials
Add Terminate Reinstate Change Inquire Electro	onic File	Log Out Scroll Up-U Scroll Down-D
Enrollee: JOHN DOE Group: 070	00051 Insured ID: 0	0123456789-00
Policy * 0700051 Coverage Type * MEDICAL	Effective Date * 10/01	/2006
Coverage* G	Group Name Plan Name	
0035 0035 PP0ZN 01/01/2003 - G	P2 ACTIVE EMPLOYEES OPTIONS PPO	
Market Name PCP/WIDE ACCESS	Coverage Lookup	
Termination Date		
Positively Enrolled * Yes 🗸 M	1embers Covered * Employee Only	
Eligibility Status * ACTIVE	Market Number 0024508	
New Coinsurance	COBBA Paid-Date	
Salary Deduction	Salary Year	
COBRA Adm		
Help Cancel Highlighte	9x	
1. Introduction 3. Change 2. Select 4. Try It! (X:0; Y:470)	When you have finished, o	click the Continue button.

Slide notes

Text Captions

When you have finished, click the Continue button.

Click the **Continue** button



Slide 33 - Slide 33

Employer eServices®					
Enrollment ID Cards Billing				Help Traini	ng Tutorials
Add Terminate Reinstate Change Inquire Ele	ectronic File			Scroll Up-U	Log Out Scroll Down-D
Enrollee: JOHN DOE Group:	0700051		Insured ID: 00123	456789-00	
Policy * 0700051 Coverage Type * MEDI	CAL		Effective Date * 10/01/2006]	
Coverage*	Group Name		Plan Name		
0035 0035 PPOZN 01/01 GP2	ACTIVE EMPL	OYEES	OPTIONS PPO		
Market Name PCP/WIDE ACCESS					
Termination Date					
Positively Enrolled * Yes	Members Co	vered *	Employee Only Highlight Box		-
Eligibility Status Highlid#0: B D xE	Market I	Number	0024508		
New Coinsurance	COBRA Pa	iid-Date			
Salary Deductible	Sala	iry Year			
COBRA Admin Type					
Help Back Car		ubmit			
1. Introduction 3. Change 2. Select 4. Try It!		On th Statu	e following page, you may s and Members Covered	y update Elig information.	ibility

Slide notes

Text Captions

On the following page, you may update Eligibility Status and Members Covered information.



Slide 34 - Slide 34

Employer eServices®				
Enrollment ID Cards Billing			Help Training Tutor	ials
Add Terminate Reinstate Change Inqu	ire Electronic File		Log C Scroll Up-U Scroll Dow)ut m-D
Enrollee: JOHN DOE	Group: 0700051	Insured ID:	00123456789-00	
Policy * 0700051 Coverage Type *	MEDICAL	Effective Date * 10/0	1/2006	
Coverage*	Group Name	Plan Name		
0035 0035 PPOZN 01/01	GP2 ACTIVE EMPLO	YEES OPTIONS PPO		
Market Name PCP/WIDE ACCE	SS			
Termination Date				
Positively Enrolled * Yes	Members Cov	ered * Employee Only	•	
Eligibility Status * ACTIVE	Market N	umber 0024508		
New Coinsurance	COBRA Pai	d-Date / / / /		
Salary Deductible	the Submit button	YYear		
COBRA Admin Type				
Help Back	Cancel Cancel	imit		
1. Introduction 3. Change		When you have finished,	click the Submit button.	
2. Select 4. Try It!				

Slide notes

Text Captions

When you have finished, click the Submit button.

Click the Submit button



Slide 35 - Slide 35

Employer eServi	ices®							
Enrollment ID Cards B	lilling					Help	Training	Tutorials
Add Terminate Reinstate	Change Inquire El	ectronic File				Scro	ll Up-U Sci	Log Out roll Down-D
Enrollee: JOHN DOE	Group:	0700051		Insu	red ID:	00123456789	-00	
Employee Information	Demographic Information	Product Information	Oth Ins	er Jrance				
Step 3 Enter product information changes and Continue or Submit. Trans####################################								
Product			Effective	Date	Termina	ition Date	_	
MEDICAL MEDICAL			10/01/2 09/01/2	006 006	09/30/2	2006		
Enroll Co	py Remove	Modify Coverage	ine	Assiç	jn Prima	ry Provider		
1. Introduction	3. Change 4. Try It!)	Back on Success updates	the Prod ful mess have bee	luct Info age co en com	ormation tab, nfirms that th ipleted.	a Transa e coveraț	action ge

Slide notes

Text Captions

Back on the Product Information tab, a Transaction Successful message confirms that the coverage updates have been completed.



Slide 36 - Slide 36

Employer eServices®					
<u>Enrollment</u> ID Cards Billing	Help Training Tutorials				
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D				
Enrollee: JOHN DOE Group: 0700051	Insured ID: 00123456789-00				
Market Name PCP/WIDE ACCESS PARALLEL					
Positively Enrolled YES	Members Covered Employee Only				
Eligibility Status ACTIVE	Market Number 0022502				
New Coinsurance	COBRA Paid-Date				
Salary Deductible	Salary Year				
COBRA Admin Type					
Physician Click the Continue button	Effective Date / /				
Help Highinghoge	Submit				
	~				
1. Introduction 3. Change	Click the Continue button at the bottom of the page.				
2. Select 4. Try It!					

Slide notes

Text Captions

Click the Continue button at the bottom of the page.

Click the **Continue** button



Slide 37 - Slide 37

Employer eServices®								
<u>Enrollment</u> ID	Cards B	illing				Help	Training	Tutorials
Add Terminate	Reinstate	Change Inquire El	ectronic File			Sci	oll Up-U Sci	Log Out roll Down-D
Enrollee: JOHN	DOE	Group:	0700051		Insured ID	0012345678	9-00	
Employee Information		Demographic Information	Product Information	(1)ther Insurance	1		
Step 4 Enter other insurance information changes and Submit. On the day this coverage begins, will the enrollee be covered under any other medical plan or policy, including another UnitedHealthcare plan? Other Insurance UNKNOWN Other Health (Non-Medicare) Information:								
If the dependent is covered, please select one of the following custody types: Type A: Dependent is covered under both employee's insurance plan and employee's spouse's insurance plan (married)								
1. Introduction 3. Change 2. Select 4. Try It!			The Ot	her Insurance ta	b displays.			

Slide notes

Text Captions

The Other Insurance tab displays.



Slide 38 - Slide 38

Employer eServices®					
<u>Enrollment</u> ID Cards Billing	Help Training Tutorials				
Add Terminate Reinstate Change Inquire Electronic File	Log Out Scroll Up-U Scroll Down-D				
Enrolled in Medicare Part D Effective Date / Ineligible for Medicare Part D Not Enrolled in Medicare Part D	/ Expiration Date / /				
Medicare Eligibility 🔽 💌					
Carrier 1 Carrier 2 Click the Submit button					
By using this web site you agree to our Internet Service Agreement <u>Contact Us</u> This is a private web site containing confidential information. Authorized site users should use this information for business purposes only. Any unauthorized use of					
the web site and / or the data contained on the site may be grounds for penalties 1. Introduction 3. Change 2. Select 4. Try It!	, fines or criminal conviction. Update this information as necessary, then click the Submit button.				

Slide notes

Text Captions

Update this information as necessary, then click the Submit button.

Click the Submit button



Slide 39 - Slide 39

Employer eServices®							
Enrollment ID Cards I	Billing				Help	Training	Tutorials
Add Terminate Reinstate	e Change <mark>Inquire</mark> El	ectronic File			Scro	ll Up-U Sc	Log Out roll Down-D
Enrollee: JOHN DOE	Group:	0700051		Insured ID	00123456789	9-00	
Employee Information	Demographic Information	Product Information	C)ther nsurance]		
Employee Information TransabiobioBu&@@ssful.							
*Required fields							
Origina	I Date of Hire* 04/15/ Date of Death	2006	D D	ate of Retirement			
Complete Alternate Payee information only when the payee is not the employee.							
1. Introduction 3. Change 2. Select 4. Try It!))	An inq Succe this en	uiry-only screen ssful message, o rollee have beer	displays a Tra confirming that n completed.	nsaction : your upo	dates to

Slide notes

Text Captions

An inquiry-only screen displays a Transaction Successful message, confirming that your updates to this enrollee have been completed.



Slide 40 - Slide 40

Employer eServices®	
You have c	Congratulations! ompleted the Change Enrollment tutorial.
	Congratulations! You've completed the Change Enrollment tutorial. In this tutorial, you learned how to change an enrollee's information using Employer eServices.

Slide notes

Text Captions

Congratulations! You've completed the Change Enrollment tutorial. In this tutorial, you learned how to change an enrollee's information using Employer eServices.

Congratulations!

You have completed the Change Enrollment tutorial.



Slide 41 - Slide 41

Employer eServices®		
You ha	Congra ve completed the C Online Train	tulations! Change Enrollment tutorial. ing Feedback
		Please take a moment to provide feedback on this tutorial. A link is provided on the tutorial menu page.

Slide notes

Text Captions

Please take a moment to provide feedback on this tutorial. A link is provided on the tutorial menu page.

Congratulations!

You have completed the Change Enrollment tutorial.

