

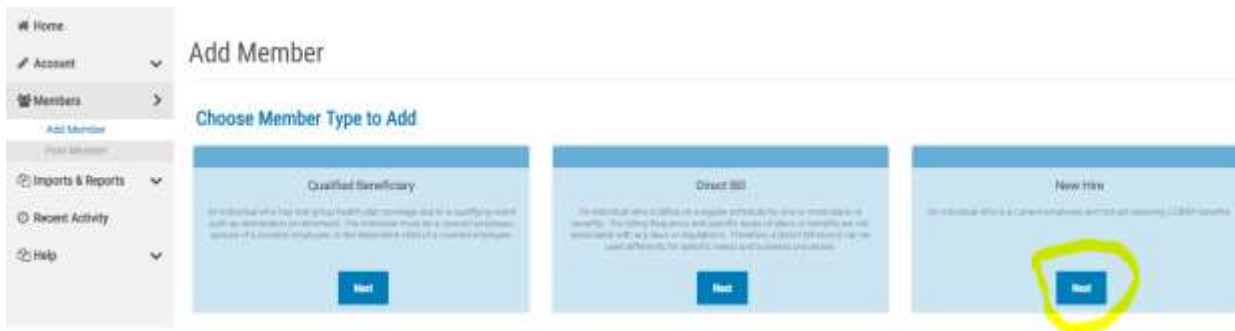
Adding an Active Insured Employee (New hire that enrolls in benefits or at open enrollment)

Only enter those people that are enrolled in a COBRA eligible benefit- Medical, Dental, Vision, EAP, FSA, and or HRA.

After signing in click “Add Member”

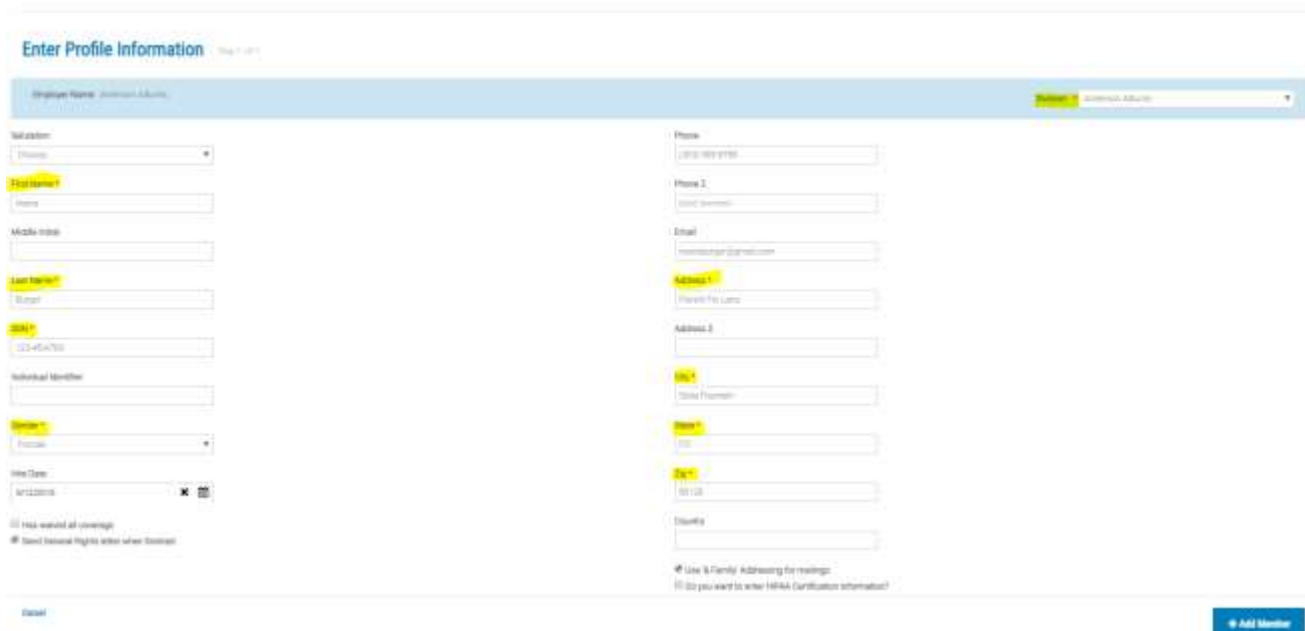


On the far right, select “Next” under New Hire



Complete all required fields with the red star indicator. And select Add Member at the bottom right when completed.

Add New Hire



Adding a Qualified Beneficiary – (A qualified event such as termination, reduction in hours, or ineligible dependent)

OPTION 1- Search for someone already in the system, and copy the demographic information.

If the employee is already in the system (This should be the option used most of the time. Throughout the year you should have been adding these members into the system at the time of enrollment into their benefits. Use the Find member instructions below.

After signing in search for the employee by completing one or all of the information, and then click Find Member

Welcome Anderson Albums
Thank you for using the self-service portal offered by Rocky Mountain Reserve, LLC/TEST

Home

Account
Members
Imports & Reports
Recent Activity
Help

You Have No New Messages

Find Member

Add Member

In the search results screen click on the name of the member to enter into their record.

Find Member

First Name
Last Name
DOB
Member ID
Member Type
Individual ID

Find Member

Member Type	Name	Member ID	DOB
New Hire	Burgess, Andrea	100	1/23/45-4/1989

Showing 1 of 1 of 1 entries

Bringing you to their new hire record. (below)

Profile

Member Information

Name: Iwana Burger	Phone: (000) 555-5785	SSN: 123-45-6789
Gender: F	Phone 2:	Individual Identifier:
Mailing Address: French Fry Lane Soda Fountain, CO 80128	Email: iwana.burger@gmail.com	Hire Date: 00/12/2018


[Enter HIPAA Certification Data](#)

Use & Family Addressing For Mailings:
Yes


Has Become A Qualified Beneficiary:
No

Has Waived All Coverage:
No

On the left hand side navigation select “Actions”



- Home
- Account
- Members
 - Add Member
 - Find Member
 - Individual Member
- Profile
- Communications
- Actions**
- Imports & Reports
- Recent Activity
- Help


Iwana Burger

Employer: Anderson Albums Division: Anderson Albums

Profile

Member Information

Name: Iwana Burger	Phone: (000) 555-5785	SSN: 123-45-6789
Gender: F	Phone 2:	Individual Identifier:
Mailing Address: French Fry Lane Soda Fountain, CO 80128	Email: iwana.burger@gmail.com	Hire Date: 00/12/2018

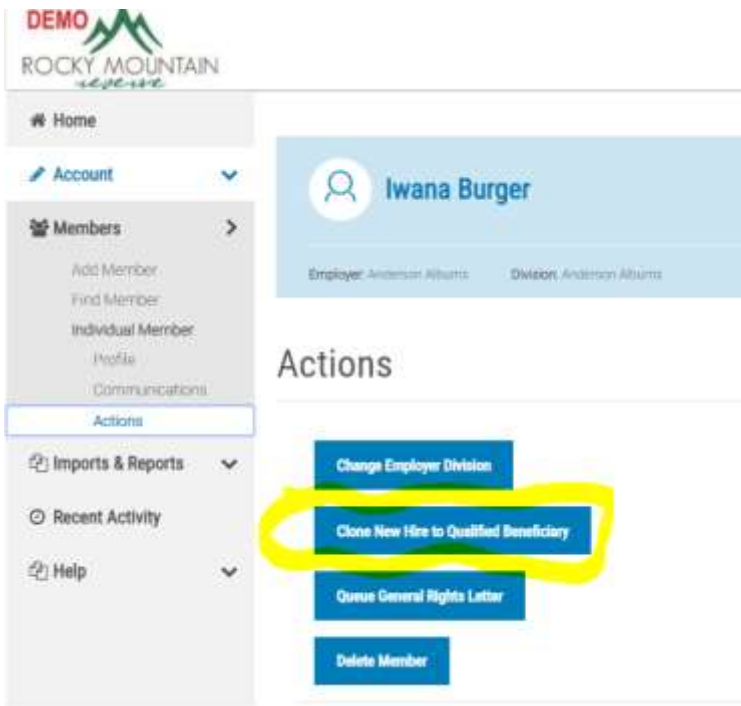
[Enter HIPAA Certification Data](#)

Use & Family Addressing For Mailings:
Yes

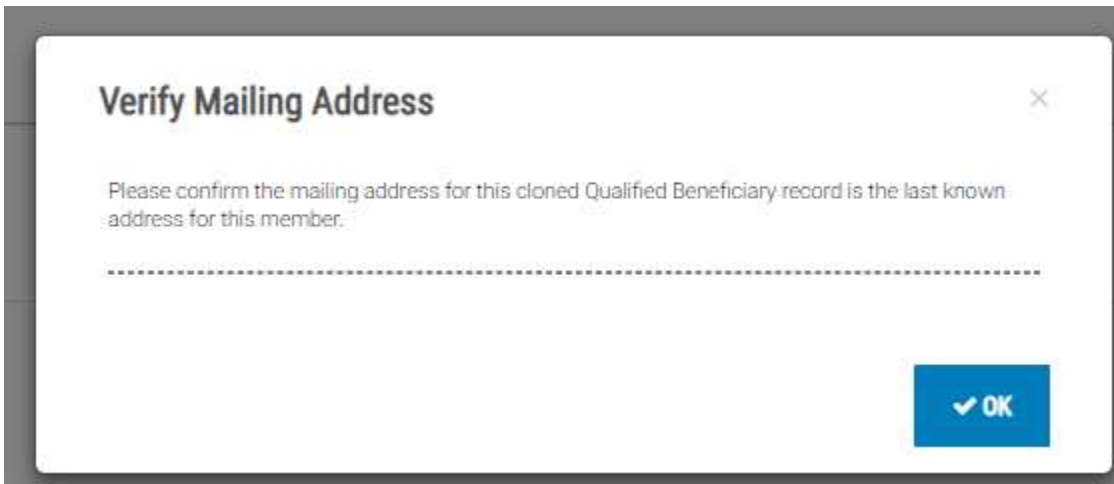
Has Become A Qualified Beneficiary:
No

Has Waived All Coverage:
No

Select “Clone New Hire to Qualified Beneficiary”- this will copy all the information from the new hire record to the QB record saving you time from having to enter it all in again. You will make changes on the next screen.



After reading the “Verify Mailing Address” warning click OK



Make any changes to the information you need to at this point (Last name may have changed if there was a marriage, address updated, phone or email has changed etc.

PLEASE ADD THE DATE OF BIRTH for the employee at this time. And click “Next”.

Add Qualified Beneficiary

Enter Profile Information Step 1 of 2

Employee Name: William M. Smith

Admin: William M. Smith

Relationship

First Name *

William

Middle Initial

Last Name *

Smith

Address *

123 Main St

Address 2

City *

San Francisco

State *

CA

Zip *

94111

Country

Phone

415-555-1234

Phone 2

415-555-5678

Email

william.s@company.com

DOB *

01-01-1975

Individual Identifier

Gender *

Female

Date of Birth

01/01/1975

Benefit Group

1

Account Structure

Employee Custom Data

Save

Next

Leave all the options on the left hand side as they are defaulted values. Select the event from the drop down box on the right, and enter the date of the event.

You will always mark “Has this member already been offered COBRA?” as NO on the left hand side.

Click save and continue.

Add Qualified Beneficiary

Enter Employee Information Step 1 of 2

Tobacco Use *	Event Category *
<input type="text"/>	<input checked="" type="radio"/> Employee
Employee Type *	<input type="radio"/> Dependent
<input type="text"/>	
Thrift Type *	Event Type *
<input type="text"/>	<input type="text"/>
Years of Service	Event Date *
<input type="text"/>	<input type="text"/>
Premium Coupon Type *	Date of New Enrollment Date *
<input type="text"/>	<input type="text"/>

Has this member already been offered COBRA? *

☐ Yes

☒ No

Cancel

Previous

Save & Continue

Click + Add Plan

Add Qualified Beneficiary

Enter Plan Information Step 2 of 2

+ Add Plan

Plans

Plan Name	Start Date	End Date	Coverage Level	Rate
No plans to display				

Bundles

Bundle Name	Start Date	End Date	Coverage Level	Rate
No bundles to display				

Cancel

Previous

Save & Continue

Select the plan from the drop down list, and the coverage level. Click Save to add this plan. (You need to change the radio button to Bundle to see the bundled plans if applicable).

Add Plan

☒ Plan

☐ Bundle

Plan *

Choose...

Coverage Level *

Cancel

Save

Notice the plan window expands and provides other information about this specific plan.

Add Plan

3

☒ Plan

☐ Bundle

Plan *

PPO ▼

Coverage Level *

QB + Family ▼

Plan rate for the selected coverage level is: \$2,400.00

PLAN COVERAGE INFORMATION

18	Months of Coverage *
60	Days to Elect *
45	Days to Make 1st Payment *
30	Days to Make Subsequent Payments *

COVERAGE PERIOD

Editing this date changes the First and Last day of Coverage

First Day of Coverage: *

11/01/2018 ✕ 📅

Last Day of Coverage:

04/30/2020

✕ Cancel

✓ Save

Click Save to add this plan to the plan.

You will see the plan added in the plans listing.

Add Qualified Beneficiary

Enter Plan Information

PPO has been successfully added

✕ Add Plan

Plans

MEDICAL

Plan Name

PPO

Start Date

End Date

Coverage Level

Rate

✕ Add Plan

Bundles

Bundle Name

View details for this bundle

Start Date

End Date

Coverage Level

Rate

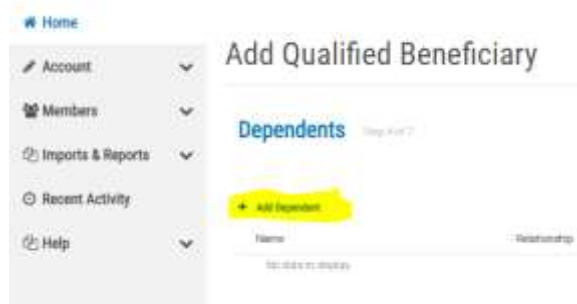
Search

✕ Previous

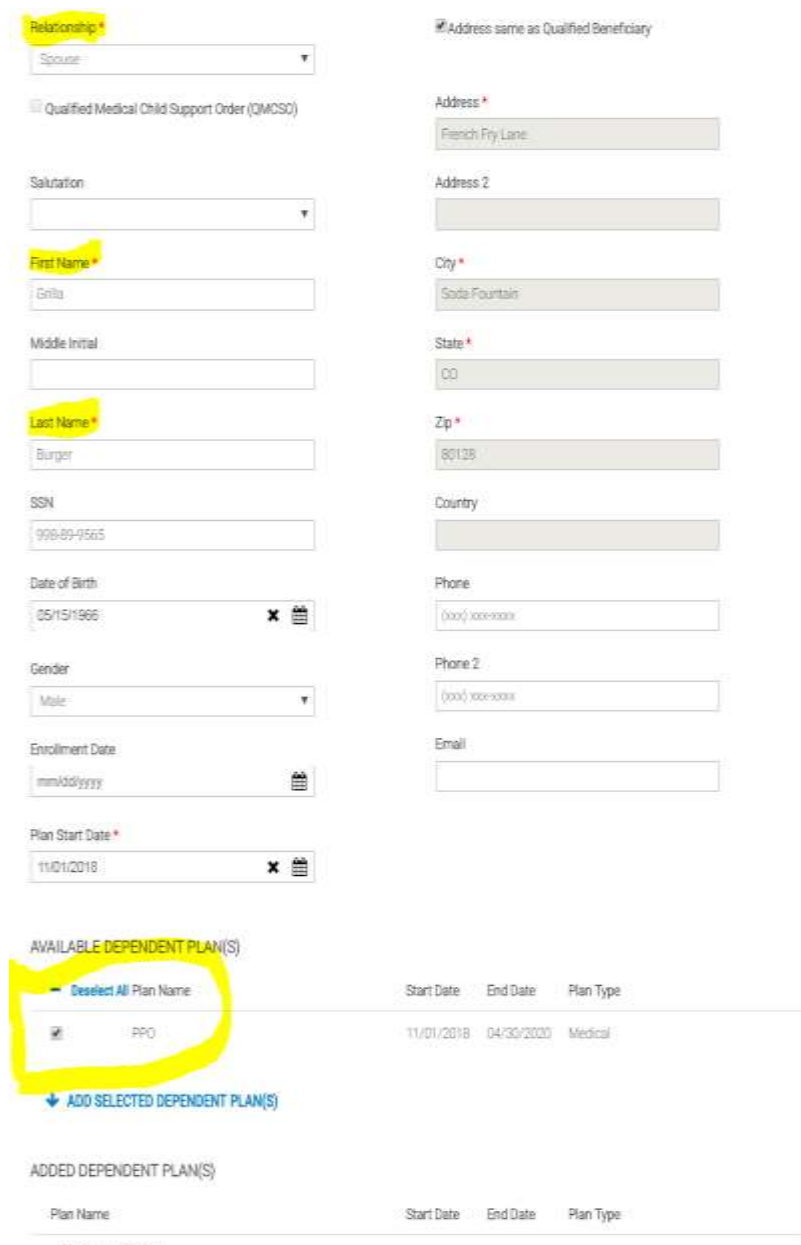
➔ Next & Continue

Repeat for all plans that the member was enrolled in at the time of the event. Click save and Continue.

If you need to add a dependent click "+ Add Dependent" If not, just click Save and Continue



Complete at a minimum the required fields and anything else you have on the dependent. Then at the bottom of the screen you must check the plans that the dependent is supposed to be enrolled on.



Plan Name	Start Date	End Date	Plan Type
PPO	11/01/2018	04/30/2020	Medical

After you have selected the plans YOU MUST CLICK ADD SELECTED PLANS.

Gender: Phone 2:

Enrollment Date: Email:

Plan Start Date:

AVAILABLE DEPENDENT PLAN(S)

	Plan Name	Start Date	End Date	Plan Type
<input checked="" type="checkbox"/>	PPO	11/01/2018	04/30/2020	Medical

[ADD SELECTED DEPENDENT PLAN\(S\)](#)

ADDED DEPENDENT PLAN(S)

Plan Name	Start Date	End Date	Plan Type
No data to display			

The plans will be added to the bottom of the screen and then click SAVE. (Repeat for each dependent)

AVAILABLE DEPENDENT PLAN(S)

[Deselect All](#) Plan Name Start Date End Date Plan Type

No data to display

[ADD SELECTED DEPENDENT PLAN\(S\)](#)

ADDED DEPENDENT PLAN(S)

Plan Name	Start Date	End Date	Plan Type	
PPO	11/01/2018	04/30/2020	Medical	Drop Delete

All dependents will show up on the main screen after you have successful added them.

Add Qualified Beneficiary

Dependents

Step 4 of 7

← Add Dependent

Name	Relationship	Date of Birth	DOB	Gender	
James Burger	Spouse	01/01/1980	01/01/1980	M	Edit Delete

[Cancel](#) [Previous](#) [Save & Continue](#)

Click save and continue

The next screens may not apply to you; if so you can click save and continue. Until you see Add a Member

Subsidies: If you as the employer are going to be providing a subsidy/ severance and paying a portion or all of the QB's COBRA Payment you would enter that information here. Subsidies are entered for each benefit.

Letter inserts: if you need to include these letter inserts select the check box on the letter you need, and it will be sent with the COBRA Packet (Specific Rights Notice).

***Letter Attachment:** If there were documents that you need to be able to attach to the COBRA packet(Specific Rights Notice) they would be available to select here. Please work with your account manager if to explore this feature.

*Additional charges may apply.

Click Add Member.

→ Add Member

You are returned to the main screen and a confirmation message displays.

Add Member

Iwara Burger has been successfully added as a Qualified Beneficiary

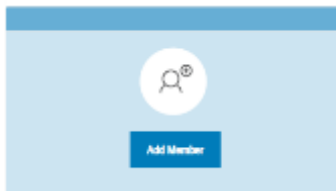
Choose Member Type to Add

<p>Qualified Beneficiary</p> <p>An individual who has lost group health plan coverage due to a qualifying event such as termination of employment. The individual must be a covered employee, spouse of a covered employee, or the dependent child of a covered employee.</p> <p>Next</p>	<p>Direct HIRE</p> <p>An individual who is hired as a regular employee for one or more plans or benefits. The hiring employer and specific basis of plan or benefit will not be considered with any benefit requirements. Therefore, a Direct HIRE individual does not offer any for specific needs and benefits provided.</p> <p>Next</p>	<p>New Hire</p> <p>An individual who is a current employee and not yet receiving COBRA benefits.</p> <p>Next</p>
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OPTION 2: If the employee was NOT in the system you would enter all information from scratch.

Click Add from the main screen, and then Next on the Qualified Beneficiary section. Complete all the information as explained.

Choose Member Type to Add



Qualified Beneficiary

An individual who has lost group health plan coverage due to a qualifying event such as termination or retirement. The individual must be a covered employee, spouse of a covered employee, or the dependent child of a covered employee.

Next