

eEnrollment and eBilling User Guide for Group Leaders



Louisiana

eEnrollment

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eEnrollment



- **What is eEnrollment?**

- Blue Cross' web-based benefits administration application
- Replaces paper and the Group Enrollment Tool (GET)
- Process open enrollment elections, add new hires, process qualifying life event changes, record terminations, etc. within 24-48 hours
- Access this secure, reliable, and user friendly tool via your laptop or mobile device


- **Within eEnrollment, you can:**

- Manage multiple classes and subgroups
- Run multiple reports
- Make life/qualifying event changes
- Add and terminate dependents by product
- View an electronic history of transactions keyed for subscribers
- See data visualization of what plans are selected most


WHAT OUR CUSTOMERS ARE SAYING



About Doing Business With Us **ONLINE**




Benefit enrollment and updates are processed quickly and efficiently




Info is available 24/7




Reports can be customized to meet our needs




Great tool for managing benefits



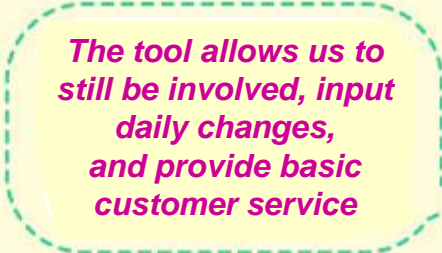
It has enabled me to be more efficient in the day to day operations of our business



I would recommend simply because it makes your job a little easier



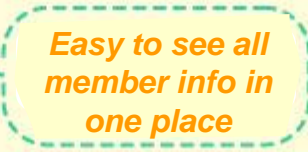
We've gained more control and input with our members' accounts




The tool allows us to still be involved, input daily changes, and provide basic customer service




User-friendly & convenient



Easy to see all member info in one place



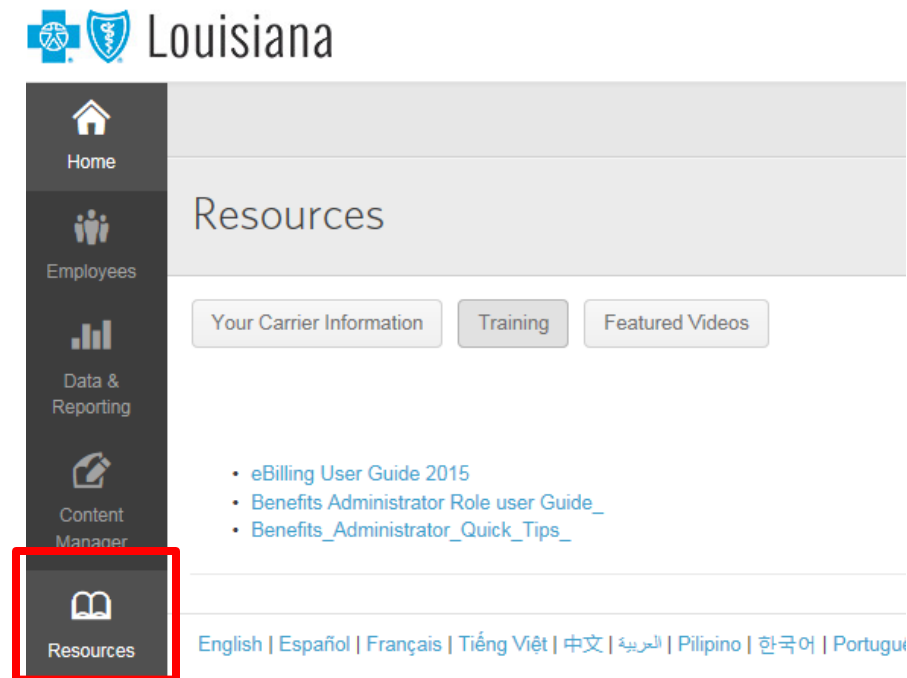
We can see what plans are utilized most



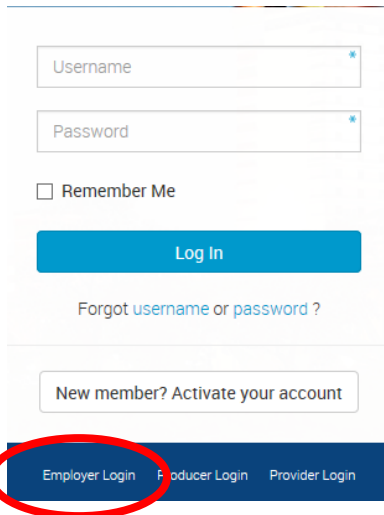
**Efficient
Effective
Empowering**

From the 'Resources' tab within eEnrollment:

- Click on 'Your Carrier Information' to find short videos to walk you through task specific actions
- Click on 'Training' to find Quick Tips and a Benefits Administrator Role User Guide



- Access is available to group leaders and producers
- Access can be provisioned at the subgroup level
- Group Leader must be registered for AccessBlue
- Log into AccessBlue on the bcbsla.com website



Username *

Password *

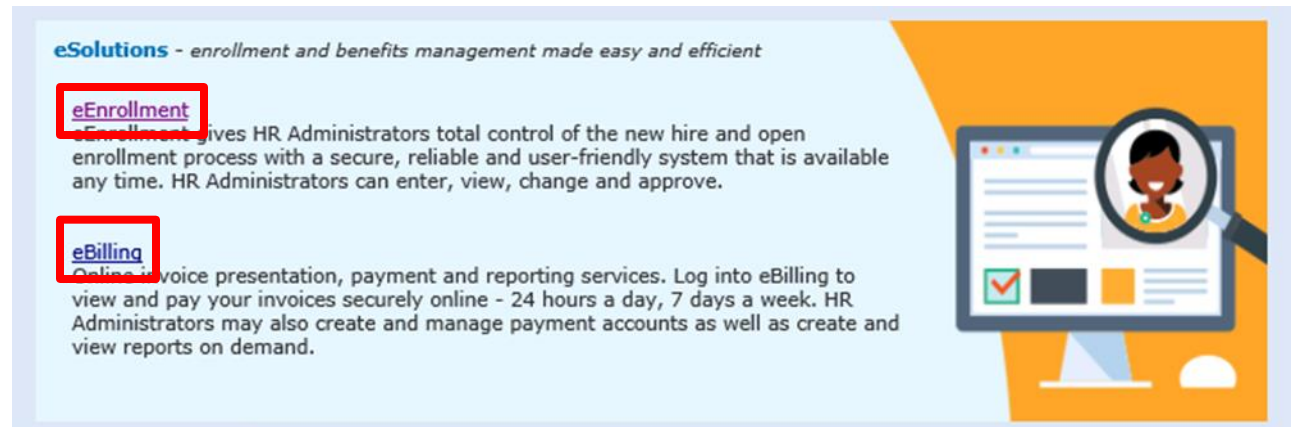
☐ Remember Me

Log In

Forgot [username](#) or [password](#) ?

New member? [Activate your account](#)


Employer Login Producer Login Provider Login



eSolutions - enrollment and benefits management made easy and efficient

eEnrollment
eEnrollment gives HR Administrators total control of the new hire and open enrollment process with a secure, reliable and user-friendly system that is available any time. HR Administrators can enter, view, change and approve.

eBilling
Online invoice presentation, payment and reporting services. Log into eBilling to view and pay your invoices securely online - 24 hours a day, 7 days a week. HR Administrators may also create and manage payment accounts as well as create and view reports on demand.



eEnrollment Common Transactions



Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross and Blue Shield Association and incorporated as Louisiana Health Service & Indemnity Company.

Subsequent Application (New Hire)



Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross and Blue Shield Association and incorporated as Louisiana Health Service & Indemnity Company.

Search for an Employee

- In the search field, enter the employee's full name, last name only, partial name, or SSN into the search field
- To view a full roster of employees, enter a comma in the search field




Search

Name or SSN 



.

Search

- To view the employee record, click employee's highlighted name

<input type="checkbox"/>	Type	Name
<input type="checkbox"/>		SMITH, ANDY
<input type="checkbox"/>		SMITH, CINDY
<input type="checkbox"/>		Smith, George

Subsequent Application

- From the 'Employees' tab, click the  button
- Enter demographic and work information. Required fields are identified with an asterisk (*). Click  at bottom of page.


Add New Employee

Personal Information

SSN*

First* / Middle / Last* / Suffix

Preferred Name (if different from first name)

Date of Birth* 

Gender*

Marital Status*

The following ONLY applies to groups with Life or Disability products that have more than one Life Class.

All other groups, please disregard and continue to slide 15.

- You will see one Life Class field per product until your group is close to renewal (approx. 90-120 days prior to renewal).

Class*	---Please Select---	▼
GTL Class Odd Year*	Waived or Ineligible	▼
LTD Class Odd Year*	Waived or Ineligible	▼
Location*	---Please Select---	▼
STD Class Odd Year*	Waived or Ineligible	▼
Voluntary Life Class Odd Year*	Waived or Ineligible	▼

The following ONLY applies to groups with Life or Disability products that have more than one Life Class.

- When your group is close to renewal (approx. 90-120 days prior to renewal), you will begin seeing two Life Class fields per product displayed as 'Class Even Year' and 'Class Odd Year.'

Class*	---Please Select---	▼
GTL Class Even Year*	Waived or Ineligible	▼
GTL Class Odd Year*	Waived or Ineligible	▼
Location*	---Please Select---	▼
Voluntary Life Class Even Year*	Waived or Ineligible	▼
Voluntary Life Class Odd Year*	Waived or Ineligible	▼

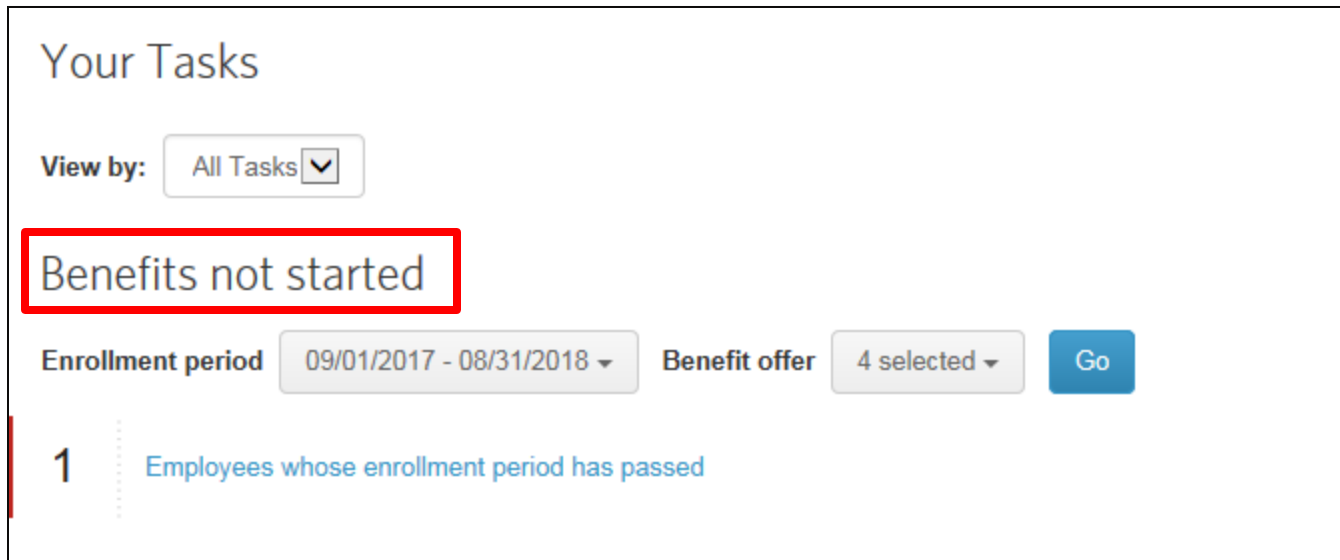
The following ONLY applies to groups with Life or Disability products that have more than one Life Class.

- When you see more than one Life Class field, you must make a selection for each drop-down in order to continue enrollment.

Class*	---Please Select--- <input type="button" value="v"/>
GTL Class Even Year*	Owners, Management <input type="button" value="v"/>
GTL Class Odd Year*	Owners, Management <input type="button" value="v"/>
Location*	---Please Select--- <input type="button" value="v"/>
Voluntary Life Class Even Year*	Owners, Management <input type="button" value="v"/>
Voluntary Life Class Odd Year*	Owners, Management <input type="button" value="v"/>

Subsequent Application (cont.)

- The employee is now saved in eEnrollment as an Active Employee, but is not enrolled in any benefits
 - If you exit eEnrollment after saving the employee but before enrolling them in benefits, you will find a task* on your home screen when logging back in.



Your Tasks

View by: All Tasks ▼

Benefits not started


Enrollment period 09/01/2017 - 08/31/2018 ▼ Benefit offer 4 selected ▼ Go


1 Employees whose enrollment period has passed

**A 'Benefits not started' task indicates the employee has not been enrolled in benefits and the transaction has not been submitted to BCBSLA.*


Subsequent Application (cont.)

- Click  to enroll the new Active Employee in benefits

 **Annabeth has 1 pending task**

 **Sections To Be Completed**

Medical Offer - Section not started.





Subsequent Application (cont.)

- Make benefit elections and click **Next**

Current Benefits

Medical Offer

Plan

*Select A Plan Offered By Blue Cross and Blue Shield of Louisiana

☐ PPO 1

PPO 1 Details

Individual Deductible	Family Deductible	Individual Out of Pocket Max	Family Out of Pocket Max	Primary Care Physician (PCP) Office Visits
\$1,000	\$3,000	\$5,000	\$10,000	\$40 copay

[View all plan details](#)

☒ PPO 2

PPO 2 Details

Individual Deductible	Family Deductible	Individual Out of Pocket Max	Family Out of Pocket Max	Primary Care Physician (PCP) Office Visits
\$500	\$1,000	\$3,000	\$6,000	\$30 copay

[View all plan details](#)

Decline Coverage

☐ Decline coverage for this person

Next

Subsequent Application (cont.)

- Select coverage tier and click **Next**

Persons covered on this plan must be between the ages of 0 Years and 120 Years.

Select a Coverage Level for PPO 2

- ☒ Employee Only
- ☐ Employee and Spouse
- ☐ Employee and Child(ren)
- ☐ Employee and Family

Decline Coverage

- ☐ Decline coverage for this employee

Next

Subsequent Application (cont.)

- Answer Medicare and Additional Insurance Questions and click **Next**

Medicare

Is the employee and/or any covered dependent enrolled in Medicare?

☐ Yes

☒ No, neither the employee nor any covered dependent is enrolled in Medicare.

Next

Additional Insurance

*Currently, do any of the persons covered under this benefit have other health insurance?

Do not include Blue Cross and Blue Shield of Louisiana medical insurance that the employee currently has through BCBSLA TEST GROUP.

☐ Yes, and I have all the required information: Policy Number, Policyholder, Carrier's Name, and Effective Date.

☐ Yes, but I do NOT have all the required details.

☒ No, neither the employee nor any dependent has had health insurance.

Next




Subsequent Application (cont.)

- Review information on the page for accuracy and click 

Current Benefits




Medical Offer

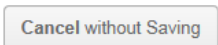
You may edit this benefit by clicking on the section's corresponding Edit button.

Medical	Accepted	
Plan	PPO 2	
Coverage Level	Employee Only	

Persons Covered

Name	Relationship
Annabeth Chase	Subscriber
To edit a person's Name or SSN, click the person's name.	

Medicare	None	
Additional Insurance	None	
Waive Wait Period	No	
Effective Date	01/23/2018	





Order ID Cards

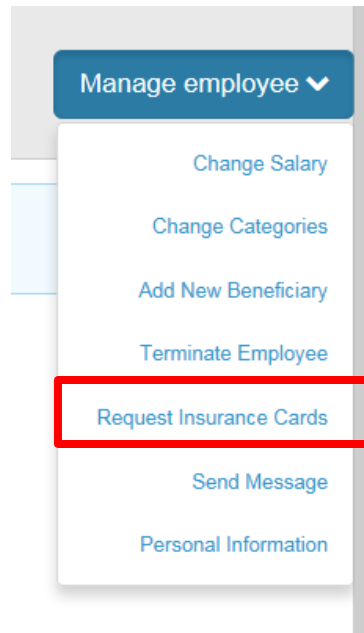


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Order ID Cards

- From the Employee Navigation Bar, search for and open the employee's record
- Click **Manage employee ▼** on the right side of the screen
- Select 'Request Insurance Cards' from the drop-down



Note: Request Insurance Cards option will not be available during a subscribers initial eligibility and open enrollment period.

Order ID Cards (cont'd)

- Select number of ID cards needed for each product, as applicable, from the drop-down
- Click **Send card request**

Request Insurance Cards

Please select the number of cards that you need.

	Health	
Dental: DENTAL 2017-2018	<div>Please Select ▼</div>	(Maximum of 2)
Medical: Single Blue Saver Individual (\$5000) Family (\$10000) 2017-2018	<div>Please Select ▼</div>	(Maximum of 3)

Cancel

Send card request

Add Dependent




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Add a Dependent

- From the Employee Navigation Bar, search for and open the employee's record
- Select 'Benefit Details'



Overview

Benefit details

Employee History

EMPLOYEE REPORTS

Employee Detail Report

Employee Benefit Summary Report

BCBSLA Offer 2018

Medical - Class ID: A001, Group Number: 86329FF2, Plan ID: LAA20016, Sub Group Number: 0000

Status: Accepted

Plan Name: Blue Saver 100/80 \$1600 (INCLUDES PHARMACY)

Coverage Level: Employee Only

Covered Persons: John Doe (Subscriber, effective 01/10/2018)

Edit

- Select the **Edit** button to right of the screen then **Edit due to Change Reason**

Add a Dependent (cont.)

- Select the Qualifying Life Event* from the drop down, then click

Next

Reason for Medical Change
You are making a change to benefit elections. Why are you making this change?


☒ --Select a new change reason--


*Open Enrollment is considered a Qualifying Life Event and will be listed in the drop down

- Enter Date of Qualifying Life Event, then click

Next



If yes, please enter the following:

Please enter the date of birth* 

When were you notified about this life event?* 

Add a Dependent (cont.)

- If Applicable,  Coverage Level, then Persons Covered

Coverage Level	Employee and Child(ren)		
Persons Covered			
Name	Relationship	Effective Date	
Jane Buck	Subscriber	02/01/2018	
	Alternate ID: AM0133200		
Beau Buck	Child	02/01/2018	
	Alternate ID: AM0769048		

To edit a person's Name or SSN, click the person's name.

- Once workflow is completed, click 

Cancel Coverage for a Dependent



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Cancel Coverage for a Dependent

- From the Employee Navigation Bar, search for and open the employee's record
- Select 'Benefit Details'



The screenshot displays the 'BCBSLA Offer 2018' page. On the left sidebar, the 'Benefit details' tab is highlighted with a red box. Below it, the 'Employee History' tab is visible. Under the 'EMPLOYEE REPORTS' section, there are links for 'Employee Detail Report', 'Employee Benefit Summary Report', and 'Report'. The main content area shows the following details:

- Medical** - Class ID: A001, Group Number: 86329FF2, Plan ID: LAA20016, Sub Group Number: 0000
- Status:** Accepted
- Plan Name:** Blue Saver 100/80 \$1600 (INCLUDES PHARMACY)
- Coverage Level:** Employee Only
- Covered Persons:** John Doe (Subscriber, effective 01/10/2018)

An 'Edit' button is highlighted with a red box in the top right corner of the main content area.

- Select the  button to right of the screen then 

Cancel Coverage for a Dependent (cont.)

- Select the Qualifying Life Event from the drop down, then click

Next


Reason for Medical Change
You are making a change to benefit elections. Why are you making this change?


☒ --Select a new change reason--

- Enter Date of Qualifying Life Event and date notified, then click

Next

If yes, please enter the following:

Enter date of event* 

When were you notified about this life event?* 

Cancel Coverage for a Dependent (cont.)

- If Applicable, edit Coverage Level, then
- Edit Persons Covered

Coverage Level	Employee and Child(ren)		<input type="button" value="Edit"/>
Persons Covered			<input type="button" value="Edit"/>
Name	Relationship	Effective Date	
Jane Buck	Subscriber	02/01/2018	
	Alternate ID: AM0133200		
Beau Buck	Child	02/01/2018	
	Alternate ID: AM0769048		

To edit a person's Name or SSN, click the person's name.

- Once workflow is completed, click

Cancel Coverage* for an Employee

**Cancelling coverage does not terminate employment; subscriber remains as an active employee.*



Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross and Blue Shield Association and incorporated as Louisiana Health Service & Indemnity Company.

Cancel Coverage for an Active Employee (cont.)


- Select the Qualifying Life Event from the drop down, then click **Next**


Reason for Medical Change
You are making a change to benefit elections. Why are you making this change?

☒ --Select a new change reason--

Cancel **Next**

- Enter Date of Qualifying Life Event and date notified, then click **Next**


Enter date of event* 

When were you notified about this life event?* 

Previous **Next**

Cancel Coverage for an Active Employee

- From the Employee Navigation Bar, search for and open the employee's record
- Select 'Benefit Details'



Overview

Benefit details

Employee History

EMPLOYEE REPORTS

Employee Detail Report

Employee Benefit Summary Report

BCBSLA Offer 2018

Medical - Class ID: A001, Group Number: 86329FF2, Plan ID: LAA20016, Sub Group Number: 0000

Status: Accepted

Plan Name: Blue Saver 100/80 \$1600 (INCLUDES PHARMACY)

Coverage Level: Employee Only

Covered Persons: John Doe (Subscriber, effective 01/10/2018)

Edit

- Select the **Edit** button to right of the screen
- On the next screen select **Cancel Benefits for All**

Cancel Coverage for an Active Employee (cont.)

- Select **Cancel Benefits for All** then select reason for cancellation

Reason for Change	Full Time to Part Time on 02/19/2018
Medical	Cancelled
Waiver of Medical Coverage	
I decline to enroll for this coverage due to:	
<div>Individual Plan</div>	
<div>Next</div>	

- Review information on screen for accuracy and click **Next**

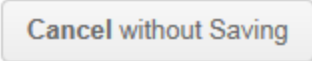

Reason for Change	Employee enrolled in Medicare on 02/19/2018
Medical	Cancelled
Declination Reason	Reason: I decline to enroll for this coverage due to: Medicare Company: Blue Cross and Blue Shield of Louisiana
End Date	
Enter an end date.*	<div>02/28/2018</div>
<div>Next</div>	

Cancel Coverage for an Active Employee (cont.)

- Review information on screen for accuracy and click 

You may edit this benefit by clicking on the section's corresponding Edit button.

Change Reason	
Medical	Cancelled
End Date	02/28/2018

Terminate an Employee

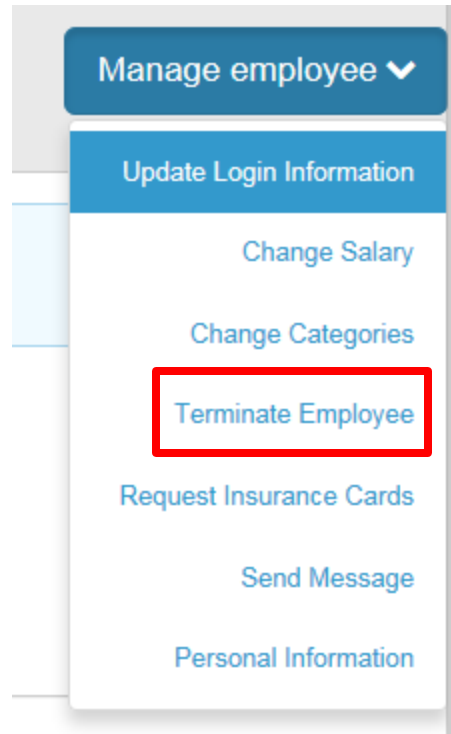


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Terminate an Employee

- From the Employee Navigation Bar, search for and open the employee's record
- Select Terminate Employee from the **Manage employee ▼** drop down



Terminate an Employee (cont.)

- Enter employee's date of termination and reason for the termination then click **Next**

Terminate Employment

Step 1 of 2

Dates

Employment Termination Date* 02/19/2018 x

Login

Do you wish to disable the employee's login?*

☒ Yes
☐ No

Termination Reason

What is the reason for termination?* ---Please Select---

If employee Termination is due to gross misconduct or any other reason for which COBRA benefits are revoked please select 'Involuntary due to Gross Misconduct'.
If the termination allows the employee to be eligible for COBRA benefits, please select either 'Voluntary' or 'Involuntary'.
If employee Termination is due to death of the employee, enter the date of death as the Employment Termination Date.

---Please Select---
Voluntary
Involuntary
Involuntary due to Gross Misconduct
Death of employee


Terminate an Employee (cont.)

- Review information for accuracy then click 

Terminate Employment

Step 2 of 2


Employment Termination Date

 02/19/2018

Disable Login

 Yes

Termination Reason

 Termination - COBRA Eligible

Cancel Current Elections

Medical Offer

Election

Cancellation

Information

Medical : PPO 1

02/28/2018

Termination rule: End of month that employment ends





Rehire an Employee



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Rehire an Employee

- From the Employee Navigation Bar, search for and open the employee's record in the Terminated Employees list

Employee Search Results

Last Name ,

☐ 78 Active Employees ☒ 30 Terminated Employees ☐ 57 Dependents

- Select Rehire Employee from the **Manage employee** drop down


Manage employee ▼

- Update Login Information
- Change Salary
- Change Categories
- Rehire Employee**
- Update Termination Details
- Manage COBRA
- Send Message
- Personal Information

Rehire an Employee (cont.)

- Enter the employee's rehire date and click 

Rehire Date and Login Information


Rehire Date* 

Login ID

New Password

Confirm New Password

☐ Allow employee to login



- Note: Login ID, New Password & Confirm New Password are for groups with employee facing functionality only*

Rehire an Employee (cont.)

- Select how to reinstate benefits for the employee and click

Next



Benefit Reinstatement

Do you want to reinstate benefits for this employee?*

- ☐ Yes, I want to reinstate the employee's benefits with the SAME plan, coverage level, and persons covered.
- ☒ Yes, I want to reinstate the employee's benefits, but I want to CHANGE the plan, coverage level or persons covered.
- ☐ No, I want the employee to make the benefit elections.
- ☐ No, I do not want to reinstate benefits for the employee at this time.

Next

Rehire an Employee (cont.)

- Review the information on the page and click 
- On the next screen, click 

Rehire Employee

Dan Jones

Original Hire Date 10/01/2014

Termination Date 12/16/2016

Last Rehire Date 02/19/2018


Summary of Previous Benefits

Medical Offer


Medical: PPO 1

Cancellation Date: 12/31/2016

Rehire Date and Login Information

 **Rehire Date** 02/19/2018

Benefit Reinstatement



 Reinstatement the employee's benefits, but I want to CHANGE the plan, coverage level or persons covered.

Benefits To Reinstatement

Medical Offer

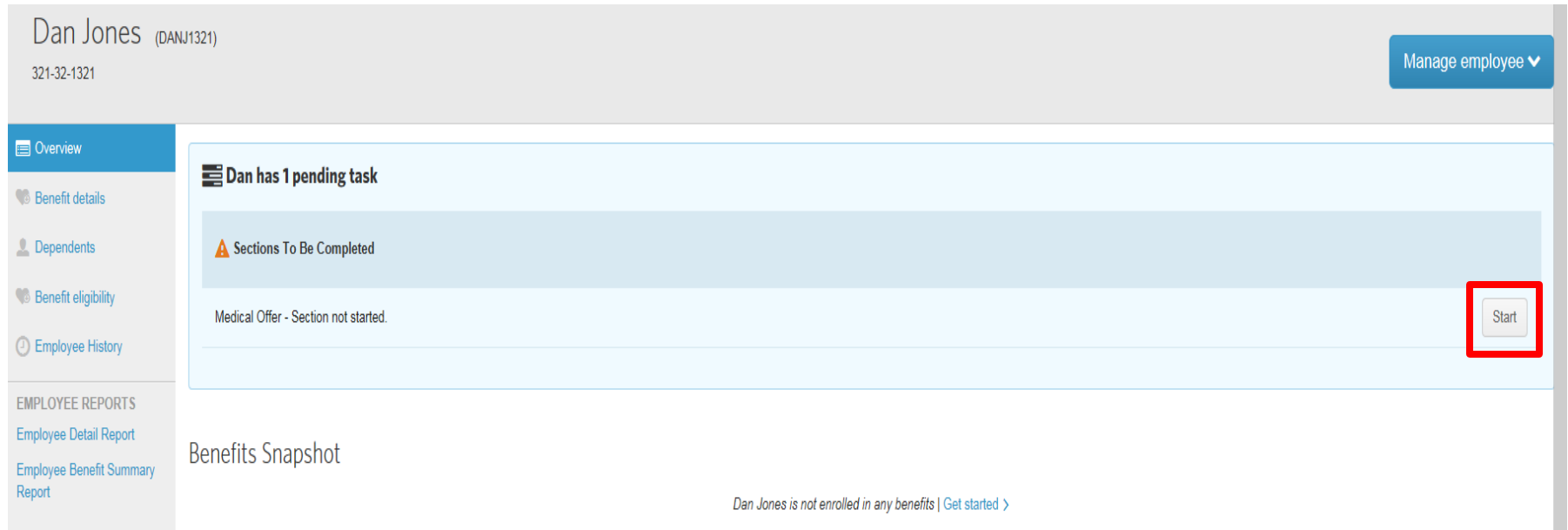
Medical: PPO 1

Cancellation Date: 12/31/2016

Rehire an Employee (cont.)

- The employee is once again an Active employee
- Click on the **Start** button to begin electing benefits for the rehired employee.



The screenshot displays the eEnrollment system interface for an employee named Dan Jones (ID: DANJ1321). The interface includes a top header with the employee's name and ID, a "Manage employee" button, and a left sidebar with navigation options: Overview, Benefit details, Dependents, Benefit eligibility, and Employee History. Below the sidebar, the main content area shows a "Benefits Snapshot" for Dan Jones. A blue banner at the top of the main content area states "Dan has 1 pending task". Below this, a light blue box titled "Sections To Be Completed" contains the text "Medical Offer - Section not started." and a "Start" button, which is highlighted with a red square. At the bottom of the main content area, a message states "Dan Jones is not enrolled in any benefits | Get started >".

Dan Jones (DANJ1321)
321-32-1321

Manage employee ▼

Overview

Benefit details

Dependents

Benefit eligibility

Employee History

EMPLOYEE REPORTS

Employee Detail Report

Employee Benefit Summary Report

Dan has 1 pending task

Sections To Be Completed

Medical Offer - Section not started.

Start

Benefits Snapshot

Dan Jones is not enrolled in any benefits | [Get started >](#)

Enroll Terminated Employee in COBRA



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Enroll Terminated Employee in COBRA

- From the Home tab, select [COBRA Manager >](#) then [COBRA Eligible Persons](#)
- Select the COBRA eligible person from the list
- Select Manage COBRA from the [Manage employee ▼](#) drop down



Enroll Terminated Employee in COBRA (cont.)

- Select product to enroll in and click **Add Policy**
- Select the qualifying event from the drop down

COBRA Benefits

COBRA MEDICAL Offer 2018

***Qualifying Event**

☒ Choose an existing event

Employee termination on 02/10/2018 ▼

- If applicable, select the appropriate plan to enroll in and continue through the workflow

• The member's previous plan has been defaulted for you to speed up the COBRA enrollment process. If this is not the correct plan for the COBRA enrollment, please make the correct selection.

Plan

*Select A Plan Offered By Blue Cross and Blue Shield of Louisiana

☒ PPO 1

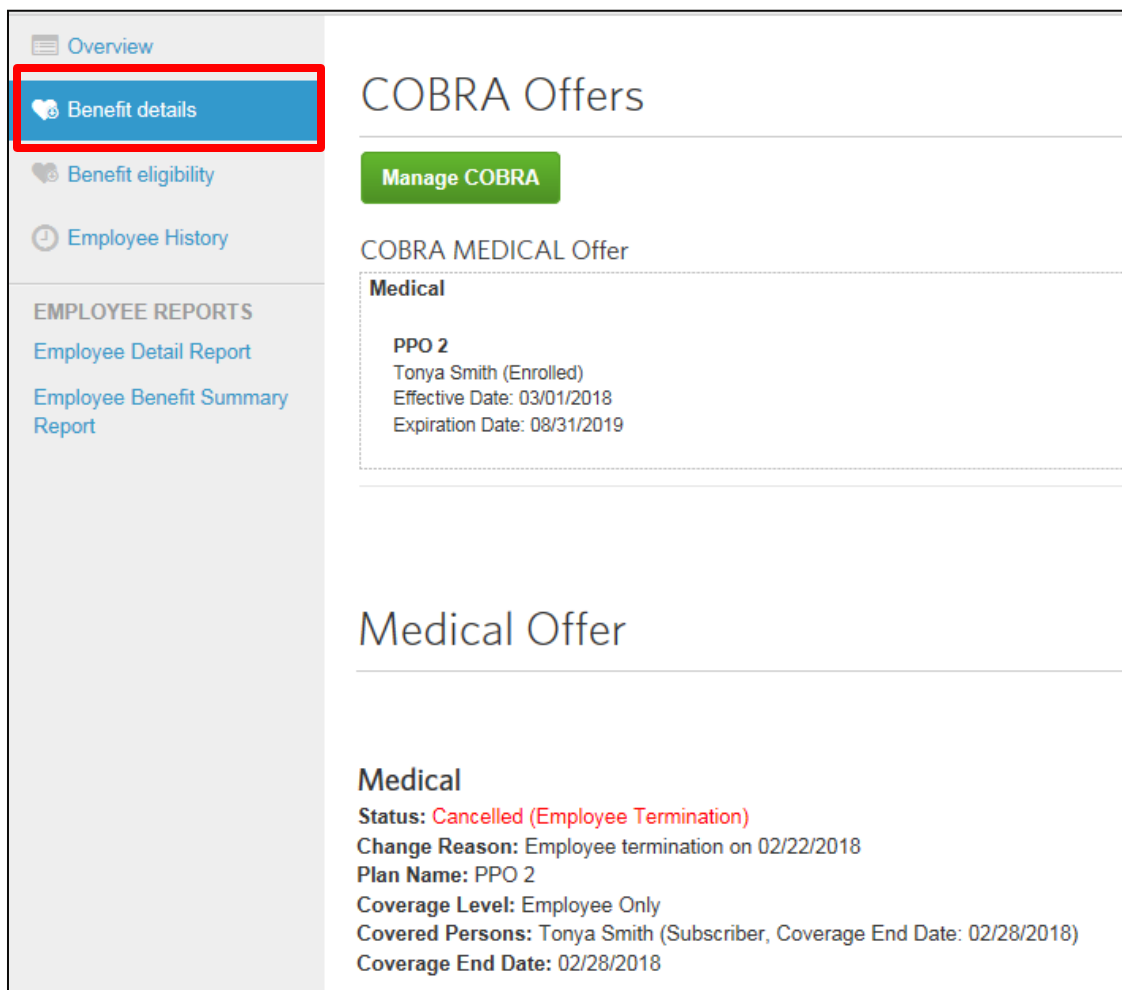
PPO 1 Details

Individual Deductible	Family Deductible	Individual Out of Pocket Max	Family Out of Pocket Max	Primary Care Physician (PCP) Office Visits
\$1,000	\$3,000	\$5,000	\$10,000	\$40 copay

[View all plan details](#)

Enroll Terminated Employee in COBRA (cont.)

- Once you click **Save** click Benefit details to see the terminated employees' COBRA elections



The screenshot displays the eEnrollment interface. On the left sidebar, the 'Benefit details' option is highlighted with a red rectangle. The main content area is titled 'COBRA Offers' and includes a green 'Manage COBRA' button. Below this, the 'COBRA MEDICAL Offer' section is visible, containing a 'Medical' subsection with details for 'PPO 2' for Tonya Smith (Enrolled), with an effective date of 03/01/2018 and an expiration date of 08/31/2019. Further down, another 'Medical Offer' section shows a 'Medical' subsection with a status of 'Cancelled (Employee Termination)', a change reason of 'Employee termination on 02/22/2018', a plan name of 'PPO 2', a coverage level of 'Employee Only', covered persons of 'Tonya Smith (Subscriber, Coverage End Date: 02/28/2018)', and a coverage end date of '02/28/2018'.

Overview

Benefit details

Benefit eligibility

Employee History

EMPLOYEE REPORTS

Employee Detail Report

Employee Benefit Summary Report

COBRA Offers

Manage COBRA

COBRA MEDICAL Offer

Medical

PPO 2
Tonya Smith (Enrolled)
Effective Date: 03/01/2018
Expiration Date: 08/31/2019

Medical Offer

Medical

Status: Cancelled (Employee Termination)
Change Reason: Employee termination on 02/22/2018
Plan Name: PPO 2
Coverage Level: Employee Only
Covered Persons: Tonya Smith (Subscriber, Coverage End Date: 02/28/2018)
Coverage End Date: 02/28/2018

Qualifying Event Documentation

- Only 5 transactions require additional documentation:
 - Overage dependent
 - Adoption – within 31 days of birth
 - Adoption – not within 31 days of birth
 - Qualified Medical Child Support Order or Court Order
 - Loss of Medicaid
- At the time the transaction is entered into eEnrollment, the person entering the transaction should:
 - Submit an email to MBSpecialAccountsInquiry@bcbsla.com (special groups) or SASInquiryMailbox@bcbsla.com (regular fully-insured maintenance) and include the following:
 - Group name and number,
 - Subscriber name and ID,
 - Dependent name, and
 - required documentation
 - **PLEASE NOTE:** a send-back letter may still go out requesting the documentation. If it has already been submitted, please disregard the send-back letter.

eBilling



You can:

- View and pay invoices securely online – 24 hours a day, 7 days a week
 - Option to pay prior month only, or total amount due when applicable
 - Option to pay at the subgroup level
- Consolidated invoice – medical, dental, life and disability on one invoice
- Sort and subtotal data to customize view or export invoice to Excel

The screenshot displays the eBilling Home interface. On the left is a dark sidebar with icons for Home, Billing, Reports, and Setup. The main content area has a light gray header with 'Home' and 'You are currently viewing: TEST GROUP'. Below this, it shows 'Your last login was 02/14/2018 at 11:35:52 AM EST' and 'Your Current 02/01/2018 Invoice'. The central invoice card for 'TEST GROUP' (ID 12T34FF4 / 0000) shows a due amount of \$3,369.09. It lists key dates and numbers: Due Date (02/01/2018), Billing Date (02/09/2018), Invoice Number (123470019999), Invoice Period From (02/01/2018), and Invoice Period Through (02/28/2018). At the bottom of the card are buttons for 'Make a Payment', 'Print Invoice', and 'View Details'. To the right of the invoice card are three sections: 'Other Invoices' (stating no delinquent invoices), 'Payments' (with links for 'Payment History', 'Pending Payments', and 'Payment Accounts'), and 'Scheduled Reports' (with links for 'Scheduled Reports' and 'Create Report'). A 'Reset' button is in the top right corner.

Home
You are currently viewing: TEST GROUP
Reset ▼

Your last login was 02/14/2018 at 11:35:52 AM EST

Your Current 02/01/2018 Invoice

TEST GROUP
12T34FF4 / 0000
\$3,369.09
Amount Due

Due Date: 02/01/2018
Billing Date: 02/09/2018
Invoice Number: 123470019999
Invoice Period From: 02/01/2018
Invoice Period Through: 02/28/2018

Make a Payment Print Invoice View Details

Other Invoices
You have no delinquent invoices.

Payments
Search and review your recent payments
[Payment History](#)
View your pending payments
[Pending Payments](#)
View your payment accounts
[Payment Accounts](#)

Scheduled Reports
View your scheduled reports
[Scheduled Reports](#)
Create a new scheduled report
[Create Report](#)

- Download invoices - No more paper invoices, checks, postage, and dated filing processes
- Never miss a payment with electronic payment options and email reminders
- Access accurate billing and payment history any time you need it







Your Current Invoices

View

Current

Submit

1 Items | 1-1

Group Level	 Subgroup ID	 Billing Period	 Invoice Number	 Billing Date	 Due Date	 Total Amount Due	
<div><div>Options</div></div>	12T34FF4 / 0000	0000	02/01/2018-02/28/2018	123470019999	02/09/2018	02/01/2018	\$3,369.09

[View Invoice](#)

eBilling Common Transactions



Louisiana

Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross and Blue Shield Association and incorporated as Louisiana Health Service & Indemnity Company.

View Invoice Details

- To view details of the invoice, click View Details or View Consolidated Details if you have more than one subgroup.

Invoice Period From: 03/01/2018
 Invoice Period Through: 03/31/2018

[Make a Payment](#)
[Print Invoices](#)
[View Consolidated Details](#)

- Click on Please Pay, Summary, Current Premiums and Employee Adjustments to see the sections of the invoice.

[Please Pay](#)
[Summary](#)
[Current Premiums](#)
[Employee Adjustments](#)

Consolidated Invoice View

[Pay Invoice](#)
[Print Invoice](#)

Name: TEST GROUP
 Group ID: 12T34FF4
 Invoice Period From: 03/01/2018
 Total Amount Due: \$6,738.18
Due Date: 03/01/2018
Invoice Period Through: 03/31/2018
Billing Date: 02/21/2018

Details

Amount* represents covered benefit amount for GTL, DL, ADD, VGTL, VADD, VSL, VSLA, VCL, STD, VSTD, VHL, VHLF and covered payroll for LTD and VLTD products.

Find By: [Search](#) [Reset](#)

18 Items | 1 - 18 | [Advanced Sorting](#)

	Class	Last Name	First Name	MI	Subscriber ID	Product	Amount*	Employer Share	Employee Share	Adjustment	Premium	Total Premium
	A001	WHITE	SNOW		200011111	AD&D	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.60	\$0.60
	A001	WHITE	SNOW		200011111	Group Care	\$0.00	\$0.00	\$0.00	(\$1,398.69)	\$1,119.03	(\$279.66)
	A001	WHITE	SNOW		200011111	GTL	\$10,000.00	\$0.00	\$0.00	\$0.00	\$3.40	\$3.40

Create Payment Account



Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross and Blue Shield Association and incorporated as Louisiana Health Service & Indemnity Company.

Create Payment Account

- Group leaders have the ability to create payment accounts by going to the Setup tab and clicking [Create Payment Account](#).

The screenshot shows the 'Payment Accounts' page in the eBilling system. The left sidebar contains navigation links: Home, Billing, Reports, and Setup. The 'Setup' link, represented by a gear icon, is highlighted with a red box. The main content area has a header 'Payment Accounts' and a sub-header 'Payment Accounts' with a folder icon. A blue button labeled 'Create Payment Account' is highlighted with a red box. Below this button is a message box that says: 'If you would like to enter your bank account information, please click the "Create Payment Account" button.' At the bottom, there is a table with two columns: 'Account Type' and 'Account Name'. The table shows 0 items and 0 - 0 results.

Account Type	Account Name
0 Items	0 - 0

Create Payment Account (cont'd)

- Group Leaders enter bank account information and may elect to make the account their default payment account.
- They may also elect to restrict the account so only they can view or make changes to it.

Basic Information

Invoice Restrictions

* = Required Fields

Bank Account Information

Account Name * Customized name for identifying the account

Bank Name *

City

State / Province ▼

Country Code

Account Type ▼

Account Holder *

Routing Number *

Account Number *

Confirm Account Number *

Routing Number

Account Number

Account Options

☒ Make this my default payment account

☐ Only I can view/edit/use this account for payment

Create Payment Account (cont'd)


- Group Leaders may elect to enable **Auto-Draft**, a recurring payment that happens each month on the due date (1st or 15th), by checking the box.
- Once enabled, **Auto-Draft** will begin the next due date. If **Auto-Draft** is enabled on the due date, prior to 4:00 pm CST, the first draft will occur that day.
- Click **Save** to complete creation of your payment account.

Auto-Draft

As a convenience to me, I authorize Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. to charge my checking or savings account a one-time payment or monthly recurring payments at the Bank (or other financial institution) I have named. I also authorize the Bank to debit the amount of those charges to my account.

I understand and agree that:

1. The Bank's rights with respect to each charge will be the same as if personally executed by me.
2. This authorization will remain in effect until I change my election. I will allow Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. thirty (30) days to act on this notice.
3. Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. and my bank may discontinue this service.
4. I understand that if any such check is dishonored by my Bank and any monthly amount due Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. is not paid within the time stipulated in the policy, the policy could be terminated as provided in the policy.
5. I understand that if my due date falls on a holiday or weekend (non-business day), my draft will occur the business day prior to my due date.
6. **To un-enroll in auto-draft, please un-check the box to stop auto-draft.**

☒

Auto-Draft Authorization Date: 08/07/2018 04:25:12 PM EST

Save

Cancel

Create Payment Account (cont'd)

- Group leaders may disable **Auto-Draft** at any time by going to the Setup tab, clicking on Payment Accounts and selecting the account with **Auto-Draft** enabled.
- Click on Options and select View/Edit Account from the drop-down menu

1 Items | 1 - 1 | [Advanced Search](#)

	Account Type	Account Name	Status	Default	Auto-Draft Enabled
<div>Options</div> <div> View/Edit Account Delete Account </div>	Bank Account	Account Name	Enabled	*	Yes

- Disable **Auto-Draft** by un-checking the box in the **Auto-Draft** section.
- If **Auto-Draft** is disabled on the due date, prior to 4:00 pm CST, the draft will not occur.
- Click **Save** to complete changes made to your payment account.

Auto-Draft

As a convenience to me, I authorize Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. to charge my checking or savings account a one-time payment or monthly recurring payments at the Bank (or other financial institution) I have named. I also authorize the Bank to debit the amount of those charges to my account.

I understand and agree that:

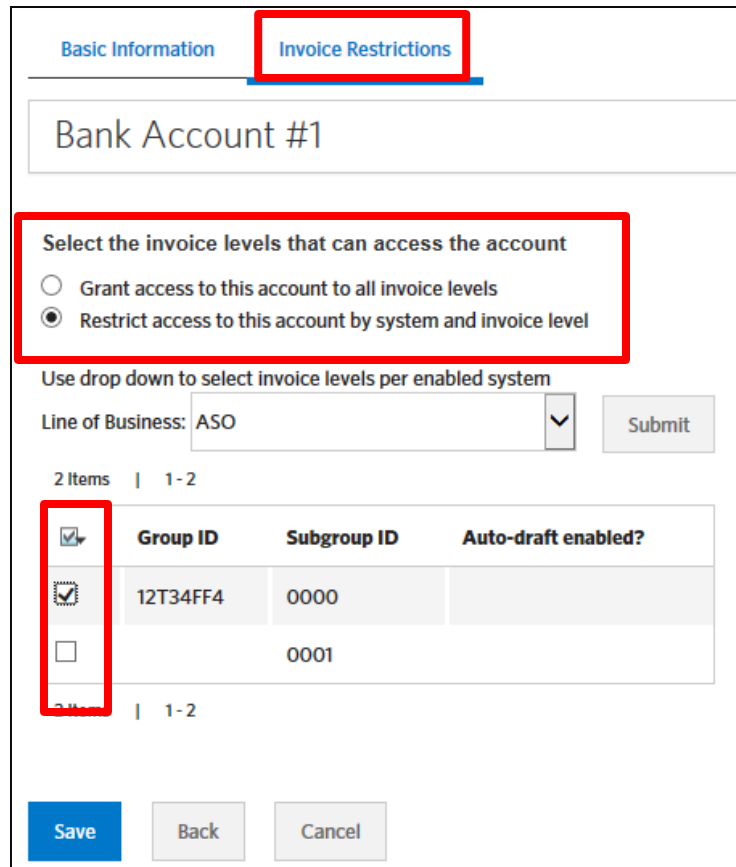
- The Bank's rights with respect to each charge will be the same as if personally executed by me.
- This authorization will remain in effect until I change my election. I will allow Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. thirty (30) days to act on this notice.
- Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. and my bank may discontinue this service.
- I understand that if any such check is dishonored by my Bank and any monthly amount due Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. is not paid within the time stipulated in the policy, the policy could be terminated as provided in the policy.
- I understand that if my due date falls on a holiday or weekend (non-business day), my draft will occur the business day prior to my due date.
- To un-enroll in auto-draft, please un-check the box to stop auto-draft.**

☐

Auto-Draft Cancellation Date: 08/08/2018 03:54:52 PM EST

Create Payment Account (cont'd)

- If the group has multiple subgroups, bank accounts can be made available to all subgroups for payment or restricted for use by only certain subgroups under Invoice Restrictions (only visible if group has multiple subgroups).
- Group leaders must click **Save** once selections are made.



Basic Information **Invoice Restrictions**

Bank Account #1

Select the invoice levels that can access the account

☐ Grant access to this account to all invoice levels

☒ Restrict access to this account by system and invoice level

Use drop down to select invoice levels per enabled system

Line of Business: ASO

2 Items | 1 - 2

<input checked="" type="checkbox"/>	Group ID	Subgroup ID	Auto-draft enabled?
<input checked="" type="checkbox"/>	12T34FF4	0000	
<input type="checkbox"/>		0001	

2 Items | 1 - 2

Make a Payment

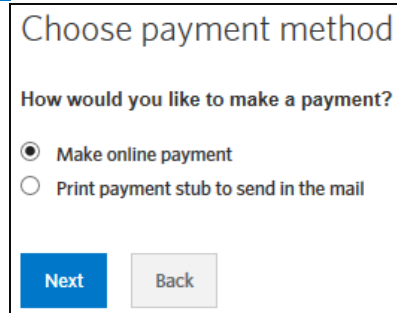


Louisiana

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Make a Payment

- Click **Make a Payment** and choose payment method*



Choose payment method

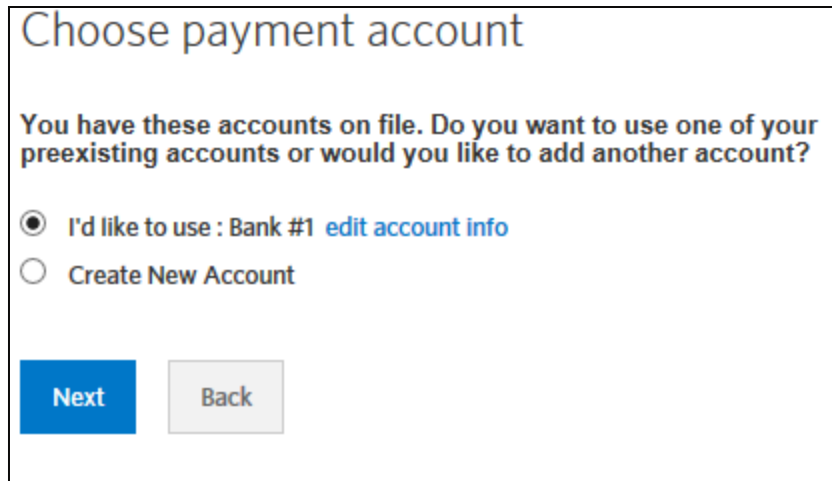
How would you like to make a payment?

☒ Make online payment

☐ Print payment stub to send in the mail

Next Back

- If you select to make an online payment, you will then choose to use a bank account you have already set up or create a new account then click **Next**



Choose payment account

You have these accounts on file. Do you want to use one of your preexisting accounts or would you like to add another account?

☒ I'd like to use : Bank #1 [edit account info](#)

☐ Create New Account

Next Back

**Groups with 100+ enrolled will only have the 'Make online payment' option available.*

Make a Payment (cont.)

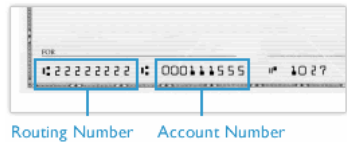
- If you choose to create a new account, you will need to enter your bank information then click **Next**

Bank Account Information

Account Name *	<input type="text"/>	Customized name for identifying the account
Bank Name *	<input type="text"/>	
City	<input type="text"/>	
State / Province	<input type="text" value="v"/>	
Country Code	<input type="text"/>	
Account Type	<input data-cs="2" data-kind="parent" type="text" value="Checking"/>	
Account Holder *	<input type="text"/>	
Routing Number *	<input type="text"/>	
Account Number *	<input type="text"/>	
Confirm Account Number *	<input type="text"/>	

Account Options

☒ I wish to keep my payment account information on file for future use



- You may also elect to save bank account information by checking the box under Account Options.

Make a Payment (cont.)


- You will have the option to pay the Outstanding Balance (prior month) or the Total Amount Due

Choose amount

Paying with: Bank #1 [change account](#)

Please choose from the following payment options:


☒ Pay Outstanding Balance \$0.00
☐ Pay Amount Due \$3,369.09

Date of Payment 

All payments made **after 4:00 PM CST** will be sent to the bank on the following business day.

- Payments made by 4:00 pm CST will be sent to the bank the same day

Make a Payment (cont.)

- Check the box to authorize payment. You also have the ability to print the screen. Click 

Confirm Information

Payment Account: Bank #1 [change account](#)
Amount of Payment: \$3,369.09 [edit payment amount](#)
Payment Date: 02/20/2018 [change payment date](#)
[Review invoice payment information details](#)

Payment Authorization

☐

As a convenience to me, I authorize Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. to charge my account a one-time payment or monthly recurring payments at the Bank (or other financial institution) I have named. I also authorize the Bank to debit the amount of those charges to my account. I understand and agree that:

1. The Bank's rights with respect to each charge will be the same as if personally executed by me.
2. This authorization will remain in effect until I change my election. I will allow Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. thirty (30) days to act on this notice.
3. Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. and my bank (or other financial institution) may discontinue this service.
4. I understand that if any such check is dishonored by my Bank (or other financial institution) and any monthly amount due Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. is not paid within the time stipulated in the policy, the policy could be terminated as provided in the policy.

Authorization Date:

Please [print](#) this screen for your records

All payments made **after 4:00 PM CST** will be sent to the bank on the following business day.


Submit Payment

Back

Make a Payment (cont.)

- You will receive a confirmation screen and have the ability to print this screen as well.

Payment Results



Thank You!

Payment Complete.

Your payment has been successfully submitted. Please allow 2-3 business days for your payment to be processed. The information presented is subject to final verification and validation and receipt of any payments previously submitted. If you have any problems viewing your information, you can call customer support at 855-236-2885 from 8:30 am to 5:30 pm CT Monday - Friday.

Your tracking number is **31799652**

Account Name: Bank #1
Payment Date*: 02/20/2018
Total Amount Paid: \$3,369.09

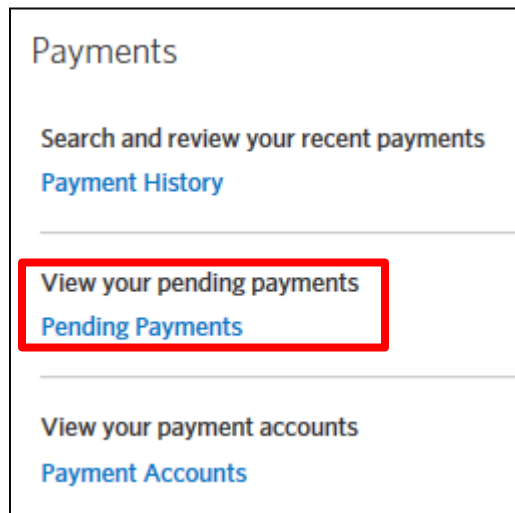
Please [print](#) this screen for your records

[Review invoice payment information details](#)

[Return to Home](#)

Pending Payments

- Group leaders can view scheduled payments by going to Pending Payments on the right side of the Home screen



- Payments will show as pending until 4:00 pm on the payment date.

Cancel a Pending Payment

- Group leaders can cancel a scheduled payment by
 - Going to Pending Payments on the right side of the Home screen
 - Select Cancel Payment from the Options drop down

Group ID	Subgroup ID	Billing Period	Invoice Number	Due Date	Billing Date	Total Amount Due	Payment Status	
Options	12T34FF4	0000	03/01/2018-03/31/2018	123470018888	03/01/2018	02/21/2018	\$3,369.09	Payment Pending
Cancel Payment		01	03/01/2018-03/31/2018	123470008888	03/01/2018	02/21/2018	\$3,369.09	Payment Pending

Print Invoice



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Print Invoice

- On the Home screen, click [Print Invoices](#)
- You can print to PDF, Excel (CSV) or HTML
- The following will result in a close approximation of the paper invoice (as shown on next slide)
 - Select Summary, Please Pay and Current Premium check boxes
 - Sort By Last Name, Then By Subscriber ID
 - Subtotal by Subscriber ID

Print Options

What format would you like for this report? PDF

There are 2 invoices selected to print. [select invoices](#)
Choose the invoice sections to include in this report:

☒ Summary

☒ Please Pay

☒ Current Premiums

☐ Employee Adjustments

Sort By	Last Name	Order	Ascending	<input type="checkbox"/> Subtotal by sorted column
Then By	Subscriber ID	Order	Ascending	<input checked="" type="checkbox"/> Subtotal by sorted column
Sort By	Subgroup ID	Order	Ascending	<input type="checkbox"/> Subtotal by sorted column
Then By		Order	Ascending	<input type="checkbox"/> Subtotal by sorted column

Print Cancel



Name	TEST GROUP	Group ID:	12T34FF4	Invoice Period From:	03/01/2018
Address	ATTN: SUPER WOMAN	Subgroup ID:	0000	Invoice Period Through:	03/31/2018
	P O BOX 1234	Due Date:	03/01/2018	Invoice Number:	123470018888
	HAMMOND LA 70404	Billing Date:	02/21/2018	Subscriber Count:	9

Current Premiums												
Class	Last Name	First Name	MI	Subscriber ID	SSN	Product	Amount*	Employer Share	Employee Share	Adjustment	Premium	Total Premium
A001	CAKE	KING	R	200022222		AD&D	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.60	\$0.60
A001	CAKE	KING	R	200022222		Group Care	\$0.00	\$0.00	\$0.00	\$0.00	\$1,119.03	\$1,119.03
A001	CAKE	KING	R	200022222		GTL	\$10,000.00	\$0.00	\$0.00	\$0.00	\$3.40	\$3.40
Subtotal for Subscriber ID 200022222							\$20,000.00	\$0.00	\$0.00	\$0.00	\$1,123.03	\$1,123.03
A001	TIME	VACTION	J	200033333		AD&D	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.60	\$0.60
A001	TIME	VACTION	J	200033333		Group Care	\$0.00	\$0.00	\$0.00	\$0.00	\$2,517.72	\$2,517.72
A001	TIME	VACTION	J	200033333		GTL	\$10,000.00	\$0.00	\$0.00	\$0.00	\$3.40	\$3.40
Subtotal for Subscriber ID 200033333							\$20,000.00	\$0.00	\$0.00	\$0.00	\$2,521.72	\$2,521.72
A001	WHITE	SNOW		200011111		AD&D	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.60	\$0.60
A001	WHITE	SNOW		200011111		Group Care	\$0.00	\$0.00	\$0.00	(\$1,398.69)	\$1,119.03	(\$279.66)
A001	WHITE	SNOW		200011111		GTL	\$10,000.00	\$0.00	\$0.00	\$0.00	\$3.40	\$3.40
Subtotal for Subscriber ID 200011111							\$20,000.00	\$0.00	\$0.00	(\$1,398.69)	\$1,122.03	(\$275.66)

	eEnrollment	eBilling
Access	eBusiness Service Desk: (225) 298-7567 (800) 258-3005 eBusinessServiceDesk@bcbsla.com	eBusiness Service Desk: (225) 298-7567 (800) 258-3005 eBusinessServiceDesk@bcbsla.com
Navigation	Resources Tab: Videos User Guide Help Line: 843-375-4967 (authentication required) Quick Tips for Brokers Quick Tips for Group Leaders	 Help Line: 855-236-2885 (authentication required) Quick Tips for Brokers Quick Tips for Group Leaders

Questions



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