COBRA Web Portal Guide

PRESENTED BY:

PAYFLEX®

Updated August, 2016

This user guide will assist you in utilizing the COBRA and Direct Billing features on the PayFlex Employer Portal. The guide explains the general functionality, tools and accessible features specific to your web credentials and access rights.

Getting Started

To log in, go to www.payflex.com and click on **Employers** on the top of the screen. Next, scroll to the far right side of the screen and click on **Sign In.** If you are a new user, your username will be your email address. Passwords are system-generated and will be sent via email. Upon your first logon, you should change your password. Under **Portal Administration** on the left hand navigation bar, select **Your Profile**.

Additionally on the left navigation bar, you will be able to access tools and account information under **Portal Administration**, **COBRA** .

COBRA

The **COBRA** link is on the left navigation bar.

COBRA Home provides a summary of the number of COBRA participants and the contact information for the dedicated COBRA Account Manager and customer service. From here, you can take a shortcut to the Participant screen by clicking on the participant count. **Note:** If the count is over 400, you will have to refine your search.

The **Participant** link includes a search function for you to locate a specific participant record. You may enter any part of a participant's first or last name; the member ID (which could be the Social Security number); or the last four digits of their member number. You may refine your search by selecting the Employer which the participant is assigned to, if applicable. **Note:** Only the Website Administrator can determine which users can access each Employer's participant information. Refer to the Portal User Management section.

Participant Info

Qualifying Event Info   Participant Info   Benefits   Portal Info   Payments   Account Status   Documents   Dependents

On the **Participant Info** page, you will see the links above. They will give you access to participant demographic information, COBRA enrollment status, benefits and payment history. This information is accessible in a 'read-only' mode, with the exception if updates to participant and dependent addresses are permitted. This is a configurable option per the employer's discretion. To search for a participant, you can enter the participant's first or last name, full member number or the last four digits of his or her member number. Click **Submit**. To view and/or download communications or notices sent to participants by PayFlex, click on the **Documents** link.

Step 1: Enter participant information	Step 2: Review participant information	Step 3: Confirmation

You must complete all the required fields before moving onto the next step. If you miss a required field, the system will prompt you to go back and fill in the necessary information. Once you complete Step 3, the new record will appear in a 'pending' status, allowing you to edit the participant information, if needed, until the next billing process runs. **Note:** The PayFlex billing process runs each business day, beginning at 5am CT.

To Enter a New Qualifying Event

Qualifying Event notices must be sent when an employee or qualifying beneficiary experiences an event resulting in a loss of coverage. To access the **Qualifying Event** screen, click on **COBRA** on the left hand navigation and select **Qualifying Events**. A list of participants will display in alphabetical order. Their status will indicate who has received or will receive a Qualifying Event notice within the date range you entered. Similar to the Initial Notices, you can view all pending and delivered documents in PDF format.

Qualifying Events

Enter A New Qualifying Event

Employer PayFlex Demo Company Cobra (COBRA) – 18

Start Date 09/08/2010   **End Date** 09/23/2010

Apply Filter

SSN	Last Name	First Name	Entered	Status	Action
745123457	DEMO	DIANA	09/23/2010	Pending	Edit Participant
123456780	JOHNSON	JULIE	09/23/2010	Pending	Edit Participant

As an employer, you can enter your own Qualifying Events via Payflex.com. Click on **Qualifying Events** on the left-hand side of the screen. Then click on the **Enter a New Qualifying Event** link. The first step requires you to enter participant information.

Step 1: Enter Participant Information

Enter the information for the Qualifying Beneficiary. This is the person to whom you are offering COBRA. The Member Number, in most cases, is the Social Security number (SSN). If it is, you can auto-populate the Member Number field by tabbing through the SSN field.

Note: Employee Member Number and Employee Name fields are only needed if the person being offered COBRA is NOT the employee (i.e. dependent-centered events).

These fields can be populated for tracking purposes which may assist in tying together who the Qualified Beneficiary is related to, but are not required.

Enter the date of the **Qualifying Event** and the Event Type, using the selections in the drop down menu. At this time, you don't need to enter a value in the ARRA Eligible field.

Employer	PayFlex Demo Company Cobra
Member Number	111222333
SSN	111222333
First Name	Nancy
Middle Initial	R
Last Name	Demo
Employee Member Number	
Employee First Name	
Employee Middle Initial	
Employee Last Name	
Qualifying Event Date	02/15/2012
Qualifying Event Type	1 - Termination of Employment
Arra Eligible	☐
Address 1	123 Test Drive
Address 2	
City	Omaha
Country	UNITED STATES
State	NEBRASKA
Zip	68106
Gender	Female

Enter the address information.
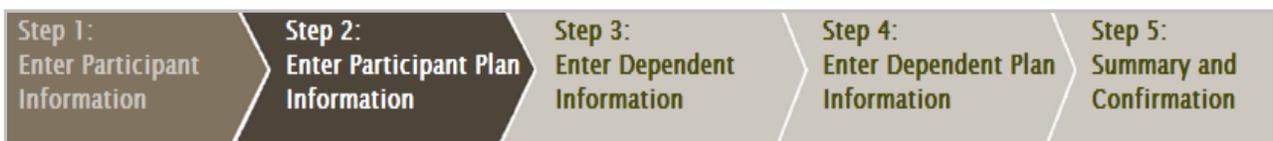
Select the Gender.

Enter the Birthday.

Optional: enter the participant's Hire Date. If the person being offered COBRA is NOT the employee, you can leave this field blank.

Some employers have PayFlex track company branches or divisions. If applicable, choose the appropriate Division in the drop down menu.

Gender	Female
Birthday	05/24/1969
Hire Date	09/05/2008
Division	E East
Category	COBRA
Denial Reason	

Cancel   Next

For the Category field, keep the default response of 'COBRA' and click the **Next** button. **Note:** You must complete all required fields before moving onto Step 2. If you miss a required field, the system will prompt you to go back and fill in the necessary information.

Step 1: Enter Participant Information	Step 2: Enter Participant Plan Information	Step 3: Enter Dependent Information	Step 4: Enter Dependent Plan Information	Step 5: Summary and Confirmation

Step 2: Enter Participant Plan Information

Note: Step 2 should be repeated for each benefit you are offering.

In the **Employer Benefit Template** drop down list, select the COBRA-eligible benefit that you must offer.

Select the **Coverage Level**.

Each of the fields below are used for a specific benefit. Therefore, you may not have to enter any or all of these fields.

> ➢ Use **Coverage Rate** when populating the monthly rate (without the 2% administration fee) for a Flexible Spending Account (FSA).

You may leave the **Has 18 Months Continuous Coverage and Original Benefit Start Date** field blank.

Click on the **Add Eligible Benefit** box. A message will appear at the top of the screen telling you that the benefit has been successfully added. **Note**: As you add each benefit, a summary of the benefits will display at the bottom of the screen. The **Rate** column will show the full rate with the 2% administration fee. It will not show the premiums less any subsidized amount. If you enter something in error, click on **Delete** to re-enter the benefit.

Description	Coverage Level	Entered	Effective	Coverage Amount	Rate	Subsidy Interval	Subsidy Amount	Eighteen Months	Original Benefit Start Date	Delete
MED – Aetna 250 Deductible (AETNA250) EE Employee Only 02/16/2012	EE Employee Only	03/05/2012 14:18	02/16/2012		102.00			Yes	N/A	Delete

Once you enter all benefits, click on the **Next** button to move to the next step. If applicable, you will continue with **Step 3: Enter Dependent Information** and **Step 4: Enter Dependent Plan Information**. You would add each dependent and their corresponding eligible offerings. You would repeat the steps for each dependent. If there is no dependent coverage, you will move right to Step 5.

Step 5: Summary and Confirmation

Review the Qualifying Event Summary information. If you need to make a correction, you can go back to the necessary step. Otherwise, click the **Finish** button to complete the entry.

Once you have submitted the Qualifying Event, the new record will appear in a 'Pending' status. You can edit the information, if needed, until the next time the billing process runs. **Note:** The PayFlex billing process runs each business day, beginning at 5am CT.

From this page, you can enter another Qualifying Event by clicking on the **Enter a New Qualifying Event** link and repeating the process.

To Create an On-Demand Report

On-Demand Reports allow users the ability to generate reports, as needed, per employer.

Select the employer name from the drop down box.

Select the type of report. The following are some of the reports available through the employer portal:

> ➢ Participant Amount Billed Report
> ➢ Participant Paid Thru Report
> ➢ Employer Census Report
> ➢ Participant Payments and Refunds Report

On-Demand Reports

Employer	PayFlex Demo Company Cobra (COBRA) – 18
Report	Employer Census Report
Start	09/01/2010
End	09/30/2010
Plan Year	
Format	CSV
Mask Member ID Numbers	☑

Submit

Enter a start and end date for the report. **Note:** The 'Plan Year' field is grayed out and is used only for Reimbursement Account services. For security purposes, you can also choose the **Mask Member ID Numbers**.

Click **Submit.** You will see the message below. It confirms that the system has received your request. You will receive an email once your report is available in the **Plan Reporting Archive.**

> Your request has been submitted successfully for report Employer Census Report, starting 09/01/2010, ending 09/30/2010, format CSV, employer PayFlex Demo Company Cobra, All plan years. You will receive an email in a few moments when the report is available.

Tips for Utilizing the PayFlex Site

1.) Always Click "**Employer**" first before you login

2.) Member info. = Employee info; Member number = Employee SS# (useful for divorce, dependent age off - connects the record back to the RF employee)

3.) QE date = **date coverage ends** (NOT necessarily termination date, but **loss of coverage date**)

5.) Ignore "subsidy" choices – n/a for COBRA

6.) Add benefits employee was enrolled in, including Medical, Dental, Vision, and Healthcare FSA. If applicable.

6.) **You must add benefits for each dependen**t (choices pre populate based on what you have selected for the employee). Enter the health, dental, and vision plans the COBRA qualified beneficiary was enrolled in.

7.) For the grad plan choose UMR medical as the bundle (for medical, dental and vision)

8.) Once entered into this portal, QE notice will be available next day (if needed asap. reach out to rep.)

9.) On-demand reports available; mostly done by CO but campuses will have access

10.) Aging out notification to be initiated by campuses after identified by CO. For these dependents, both **COBRA medical and Young Adult option must be selected**.

11.) SSN is required for dependents. Original benefit start date is not required.

12.) For Healthcare FSA COBRA, coverage rate is their monthly election (annual election/12)

Benefit Options Key

BCRMED- BLUE CHOISE ROCHESTER- MED: Excellus Blue Cross Blue Shield Medical Plan

CDHPYA-CDHPNYSYA-MED: CDPHP Young Adult Option

CDPHP-CDPHP-MED: CDPHP Medical Plan

DAVISVISION-DAVISVISION-VIS: Davis Vision Plan for Regular Employees

DAVISVISIONPLUS-DAVISVISIONPLUS-VIS: Davis Vision Plan Plus for Regular Employees

DELTADENTAL-DELTA DENTAL- DEN: Delta Dental Plan for Regular Employees

EBCBSPPOYA- EMPIRE BCBS Deductible PPO NYS Young Adult - MED: Empire Blue Cross Deductible Plan Young Adult Option

EBCBSTPPOYA- EMPIRE BCBS Traditional PPO NYS Young Adult* - MED:** Empire Blue Cross Traditional Plan Young Adult Option

EMPBCBSPPO- EMPIRE BCBS Deductible PPO- MED: Empire Blue Cross Deductible Plan

EMPBCBSTPPO- EMPIRE BCBS Traditional PPO- MED: Empire Blue Cross Traditional Plan

GRADDAVISVISIONPLUS- GRAD-DAVIS- VIS: N/A do not use

GRADDELTADENTAL- GRAD_DELTADENTAL- DEN: N/A do not use

INDEPHEALTH- INDEP HEALTH ASSOC-MED: Independent Health Medical Plan

INDEPHEALTHYA- INDEP HEALTH ASSOC- MED: Independent Health Medical Plan Young Adult Option.

MVP-MVP-MED: MVP Medical Plan

MVPYA- MVP NYS Young Adult- MED: MVP Medical Plan Young Adult Option

PFSFSA- PayFlex FSA- FLEX: Flexible Spending Account Benefit

UMR- UMR - MED: Graduate Student Medical Plan. Includes Dental and Vision.