

Tips for Working in Online Enrollment

When you first access Online Enrollment, click the Help link to review online Help. Online Help provides details about adding and changing subscriber information and assists you in using the application. Below are a few tips for using Online Enrollment effectively and efficiently.

Idle Time Out

The Online Enrollment system idle time is set for 30 minutes. If you have not been working in Online Enrollment for 30 minutes or longer, you will need to sign in again.

Navigating Through Screens

The screens are designed to facilitate data entry and to guide you through each process. You enter data and click a button or a text link to tell the system what you need. The system processes the information and displays the appropriate screen

You can click a button or a function tab to display a screen or you can press the **<Enter>** key, if the focus is on the button.

Review the Navigation section in online Help for details about screens and navigation tools.

Links (Bread Crumbs) to Screens

The maintenance screens (Update Subscriber/Add New Subscriber) contain links (bread crumbs) that allow you to return quickly to the starting point screen (Administer Enrollment and/or Search Results). When you click the link you return to the selected screen; any changes you made will not be retained.

Entering Data

Some field names have changed and new fields have been added. Some fields have specific formats, other fields do not allow certain characters, and some fields are optional. For example, all dates must be entered in mmddyyyy or mm/dd/yyyy format.

Review the Entering Data section in online Help for details about entering data in certain fields.

Saving Changes

When you add or change subscriber and/or dependent information and click **<OK>**, the changes are held in the Online Enrollment application. Only when you click **<Save & Close>** will the changes be saved to the Enrollment system.

Transaction Report Overview

You can access a report of the transactions you performed. You can view and/or print a transaction report for the current day and/or reports for past transactions.

Screen Review

The Administer Enrollment screen is the starting point for all enrollment transactions.

- In the *Search/Update Existing Subscriber* panel you can search for a subscriber and begin the process to update a subscriber's record
- In the *Add New Subscriber* panel you begin the process to add a new subscriber

You always return to the Administer Enrollment screen after updating a subscriber's record or adding a new subscriber.

- Add New Subscriber – enter subscriber and dependent(s) demographic and coverage information
- Update Subscriber – change information for an existing subscriber, access dependent(s) and access the new Coverage History screen
 - Change Group/Sub-Group
 - Change Coverage Type
 - Add Dependent
 - Update Dependent
 - Reinstate Subscriber
 - Reinstate Dependent
 - Click the Coverage History link to display the current and prior coverage information

Administer Enrollment

Online Enrollment

Signed in as testsecurian | [Reports](#) | [Help](#) | [Print](#)

[Edit Profile](#)
[Change Password](#)
[Sign Out](#)

Administer Enrollment

Search/Update Existing Subscriber

Subscriber ID	<input type="text"/>		
Group/Sub-Group	<input type="text" value="Select One"/>		<input type="button" value="v"/>
Last Name	<input type="text"/>	First Name	<input type="text"/>
Search by entering: Subscriber ID -or- Subscriber ID and Group/Sub-group -or- Group/Sub-group and Last Name			
			<input type="button" value="Go"/> <input type="button" value="Clear"/>

Add New Subscriber

*** Required field(s)**

Subscriber ID *	<input type="text"/>	Must enter Subscriber ID	
Group/Sub-Group *	<input type="text" value="Select One"/>		<input type="button" value="v"/>
			<input type="button" value="Go"/> <input type="button" value="Clear"/>

Add New Subscriber

Add New Subscriber

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Subscriber Details

* Required field(s)

Subscriber ID	987987987		
Group/Sub-Group	003265-0001 Marketing Test Group/Marketing Test Group		
First Name *	<input type="text"/>	Middle Name	<input type="text"/>
Last Name *	<input type="text"/>		
Suffix	<input type="text"/>	Prefix	<input type="text"/>
Date of Birth *	<input type="text"/>	Gender *	<input type="text" value="v"/>
Address 1 *	<input type="text"/>		
Address 2	<input type="text"/>		
City *	<input type="text"/>	State *	<input type="text"/>
		Postal Code *	<input type="text"/>
Country	<input type="text" value="USA"/>	County	<input type="text"/>
			<small>International Addresses Only</small>
Coverage Effective Date *	<input type="text"/>	Coverage Termination Date	<input type="text"/>
Coverage Type *	<input type="text" value="v"/>		
Hire Date *	<input type="text"/>	Benefit Wait Date	<input type="text"/>
COB Indicator	<input type="text" value="v"/>	COB Date	<input type="text"/>

Dependent Details

First Name *	<input type="text"/>	Middle Name	<input type="text"/>
Last Name	<input type="text"/>		
Suffix	<input type="text"/>	Prefix	<input type="text"/>
Date of Birth *	<input type="text"/>	Gender *	<input type="text" value="v"/>
		Relationship *	<input type="text" value="v"/>
Coverage Effective Date	<input type="text"/>	Coverage Termination Date	<input type="text"/>
Benefit Wait Date	<input type="text"/>		
Dependent Status	<input type="text" value="v"/>	Student Status Through Date	<input type="text"/>
COB Indicator	<input type="text" value="v"/>	COB Date	<input type="text"/>

[Add Next Dependent](#)

Update Subscriber

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Update Subscriber * Required field(s)

Subscriber Details

Subscriber ID: 987987987
 Group/Sub-Group: 003265-0001 Marketing Test Group/Marketing Test Group [Change](#)

First Name * Middle Name
 Last Name * Suffix Prefix
 Date of Birth * Gender *
 Address 1 *
 Address 2
 City * State * Postal Code *
 Country * County International Addresses Only
 Coverage Effective Date * Coverage Termination Date
 Coverage Type * Family [Change](#)
 Hire Date * Benefit Wait Date
 COB Indicator COB Date

Dependent Summary [Add Dependent](#)

Name	Date of Birth	Relationship	Coverage Effective Date	Coverage Termination Date	Dependent Status	Student Status Through Date
Justin Test	09/20/1973	Spouse	02/01/2006			
Thomas Test	04/20/2001	Child	02/01/2006			
Holly Test	03/25/2006	Child	03/25/2006			

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Change Group/Subgroup

Change Group/Subgroup | Julia Test * Required field(s)

Current Group/Sub-Group	003265-0001 Marketing Test Group/Marketing Test Group
New Group/Sub-Group *	003265-9272 Marketing Test Group/COBRA
Coverage Effective Date *	02012006

Change Coverage Type

Change Coverage Type | Julia Test * Required field(s)

Current Coverage Type	Family
New Coverage Type *	Subscriber plus child
Coverage Effective Date *	03012006

Select the dependents(s) who should have active coverage. Dependents not selected will have no coverage.

<input type="checkbox"/> Select All	Date of Birth	Relationship
<input type="checkbox"/> Justin Test	09/20/1973	Spouse
<input type="checkbox"/> Thomas Test	04/20/2001	Child
<input checked="" type="checkbox"/> Holly Test	03/25/2006	Child
<input checked="" type="checkbox"/> Add New Dependent		

Add Dependent

Add Dependent | Julia Test * Required field(s)

First Name *	<input type="text" value="Paula"/>	Middle Name	<input type="text"/>
Last Name	<input type="text"/>	Suffix	<input type="text"/>
Date of Birth *	<input type="text" value="06062003"/>	Gender *	<input type="text" value="Female"/>
		Relationship *	<input type="text" value="Child"/>
Coverage Effective Date *	<input type="text" value="03012006"/>	Coverage Termination Date	<input type="text"/>
		Benefit Wait Date	<input type="text"/>
Dependent Status	<input type="text"/>	Student Status Through Date	<input type="text"/>
COB Indicator	<input type="text"/>	COB Date	<input type="text"/>

Update Dependent

Update Dependent | Julia Test * Required field(s)

First Name *	<input type="text" value="Thomas"/>	Middle Name	<input type="text"/>
Last Name	<input type="text" value="Test"/>	Suffix	<input type="text"/>
Date of Birth *	<input type="text" value="04/20/2001"/>	Gender *	<input type="text" value="Male"/>
		Relationship *	<input type="text" value="Child"/>
Coverage Effective Date *	<input type="text" value="02/01/2006"/>	Coverage Termination Date	<input type="text" value="02/28/2006"/>
			Reinstate
Benefit Wait Date	<input type="text" value="01/01/2006"/>		
Dependent Status	<input type="text"/>	Student Status Through Date	<input type="text"/>
COB Indicator	<input type="text"/>	COB Date	<input type="text"/>

Reinstate Dependent

Coverage Effective Date *	<input type="text" value="03012006"/>	Coverage Termination Date	<input type="text"/>
		Benefit Wait Date	<input type="text"/>

Reinstate Subscriber

Reinstate Subscriber | Julia Test

Current Coverage

Group/Sub-Group	003265-0001 Marketing Test Group/Marketing Test Group		
Coverage Effective Date	03/01/2006	Coverage Termination Date	03/15/2006
Coverage Type	Subscriber plus child		
Hire Date	01/01/2006	Benefit Wait Date	

New Coverage * Required field(s)

Group/Sub-Group	003265-0001 Marketing Test Group/Marketing Test Group		
Coverage Effective Date *	<input type="text" value="04012006"/>		
Coverage Type *	<input type="text" value="Family"/>		
Hire Date *	<input type="text" value="04012006"/>	Benefit Wait Date	<input type="text"/>

Select the dependents(s) who should have active coverage. Dependents not selected will have no coverage.

<input checked="" type="checkbox"/> Select All	Date of Birth	Relationship
<input checked="" type="checkbox"/> Justin Test	09/20/1973	Spouse
<input checked="" type="checkbox"/> Thomas Test	04/20/2001	Child
<input checked="" type="checkbox"/> Paula Test	06/06/2001	Child
<input checked="" type="checkbox"/> Holly Test	03/25/2006	Child
<input type="checkbox"/> Add New Dependent		

If you also want to change the Group/Sub-Group, you do so on the Update Subscriber screen.

Reinstate Dependent

Update Dependent | Julia Test * Required field(s)

First Name *	<input type="text" value="Thomas"/>	Middle Name	<input type="text"/>
Last Name	<input type="text" value="Test"/>	Suffix	<input type="text"/>
Date of Birth *	<input type="text" value="04/20/2001"/>	Gender *	<input type="text" value="Male"/>
		Relationship *	<input type="text" value="Child"/>
Coverage Effective Date *	<input type="text" value="02/01/2006"/>	Coverage Termination Date	<input type="text" value="02/28/2006"/> Reinstate
Benefit Wait Date	<input type="text" value="01/01/2006"/>		
Dependent Status	<input type="text"/>	Student Status Through Date	<input type="text"/>
COB Indicator	<input type="text"/>	COB Date	<input type="text"/>

Reinstate Dependent

Coverage Effective Date *	<input type="text" value="03/01/2006"/>	Coverage Termination Date	<input type="text"/>	Benefit Wait Date	<input type="text"/>
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Coverage History

Online Enrollment Coverage History

[Close Window](#)
[Print](#)

Coverage History | Hillary Test

Current Coverage

Group/Sub-Group 003265-0001 Marketing Test Group/Marketing Test Group
Coverage Effective Date 02/01/2006 **Coverage Termination Date**
Coverage Type Family

[Close Dependents](#)

Name	Date of Birth	Relationship	Coverage Effective Date	Coverage Termination Date
Justin Test	09/20/1973	Spouse	02/01/2006	
Hailey Test	03/22/2006	Child	03/22/2006	

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Online Enrollment Transaction Report

[Close Window](#)
[Print](#)

Enter Transaction Date

Username | **jwolterman**

Subscriber ID	Last Name	First Name	Group/Sub-Group	Date of Birth	Coverage Effective Date	Coverage Termination Date	Coverage Type	Transaction
987987987	Test	Julia	003265-0001	09/16/1977	03/01/2006	03/15/2006	Sub+Ch	Added
987987987	Test	Julia	003265-0001	09/16/1977	03/01/2006	03/15/2006	Sub+Ch	Terminated
987987987	Test	Julia	003265-0001	09/16/1977	03/01/2006	03/15/2006	Sub+Ch	Updated
987987987	Test	Julia	003265-0001	09/16/1977	03/01/2006	03/15/2006	Sub+Ch	Updated

Printing: For best results set **orientation** to landscape in **page setup**.