



Employer Portal Guide

COBRA | Direct Bill

FloresHR.com

FloresHR.wealthcareemployer.com

800.532.3327


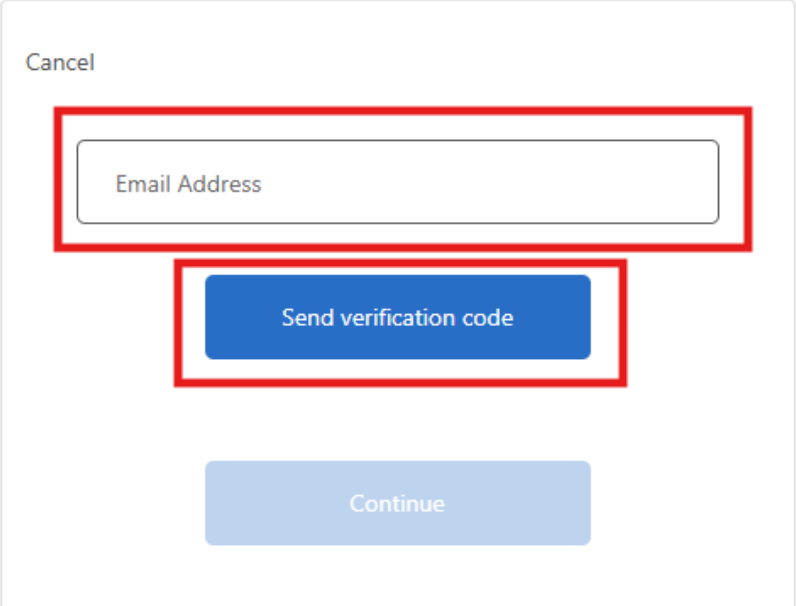
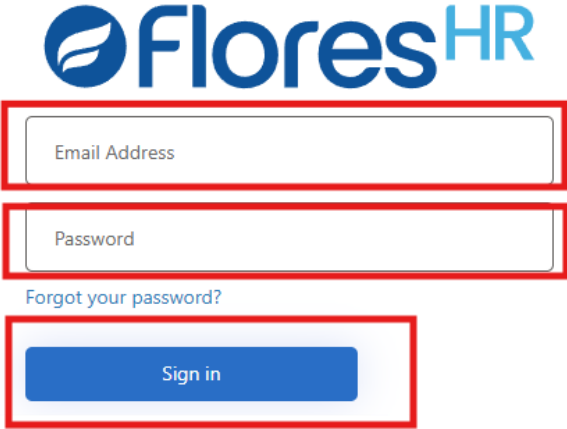
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Introduction to the FloresHR COBRA/Direct Bill Employer Portal

This guide is designed to help you navigate the COBRA and Direct Billing administration process using our platform. Whether you're managing initial notifications, qualifying events, or ongoing coverage, this resource will walk you through each step to ensure compliance and a smooth experience for both you and your employees.

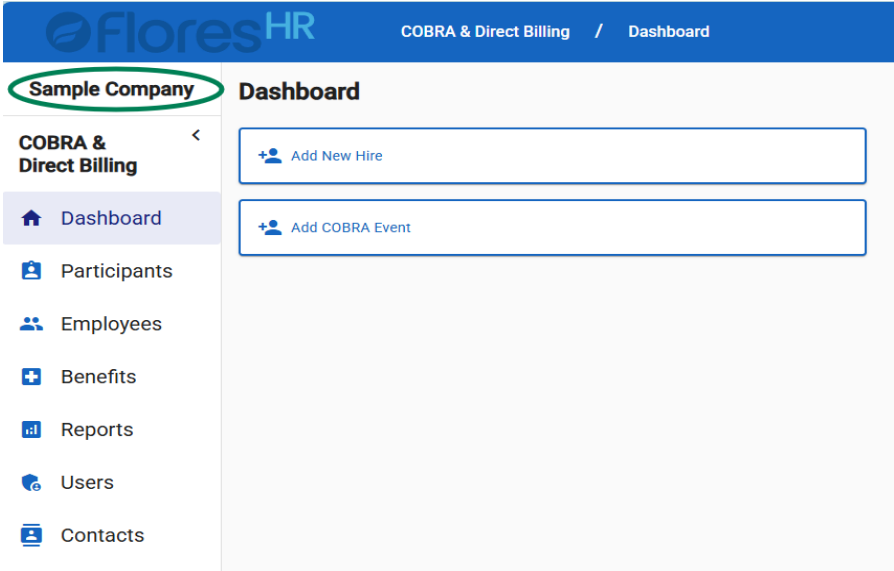
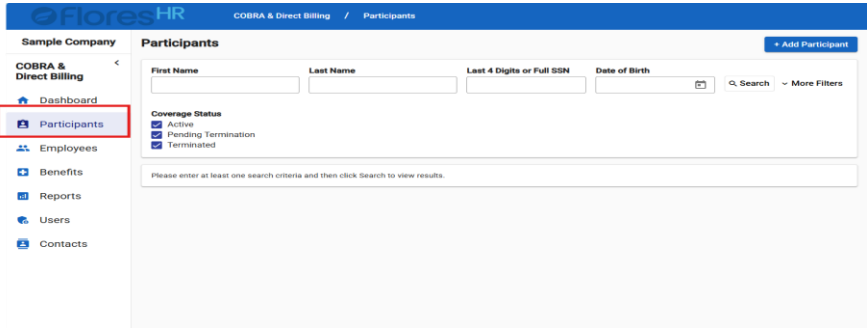
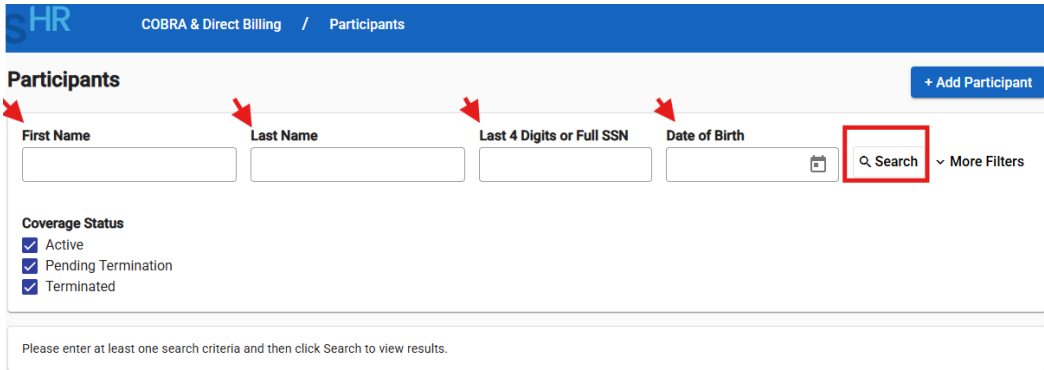
Initial Login Instructions

STEPS	SCREENSHOTS
<p>A registration email will be provided for initial log in from: <i>wealthcare COBRA on behalf of flores & associates,llc<noreply.Floreshr@wealthcarecobra.com></i></p> <p>From the email, click Accept An Alegeus User's Invite.</p>	<p>Flores & Associates, LLC has invited you to their COBRA, Retirement, and Direct Billing solution.</p> 
<p>Confirm the email address through a verification code and set up a password.</p> <p>Enter the User Email Address and click Send Verification Code.</p> <p>Create your Password.</p>	<p>Cancel</p> 
<p>Enter the Email and newly created Password and click Sign In to access the portal. Be sure to bookmark the URL for easy reference:</p> <p>https://floreshr.wealthcareemployer.com/</p>	

Click **Forgot Your Password?**
To change your password
anytime.

[Forgot your password?](#)

Employer Dashboard Overview

STEPS	SCREENSHOTS
<p><u>DASHBOARD</u></p> <p>In the Dashboard on the left side of the home screen, a list of links is provided.</p> <p>Your Employer Name will appear at the top left.</p>	
<p><u>PARTICIPANTS</u></p> <p>Click Participants to Search for any qualified beneficiaries.</p> <p>Adding A Participant will be covered in a later section</p>	
<p>All participants and their dependents are listed alphabetically by their First Name.</p> <p>Search by any of the following:</p> <ul style="list-style-type: none"> • First name • Last name • Last 4 digits of SSN • Date of birth 	

- Coverage status:
- Active
- Pending termination
- Terminated

Click **More Filters** on the right to display the additional fields to search:

- Address
- Postal code
- Coverage type (COBRA or direct bill)

Participants + Add Participant

First Name Last Name Last 4 Digits or Full SSN Date of Birth

Coverage Status Active Pending Termination Terminated

Address Postal Code Coverage Type

[More Filters](#)

Under the **Coverage Status** section – check/uncheck any boxes to expand/narrow the search.

Coverage Status

- Active
- Pending Termination
- Terminated

EMPLOYEES

Click **Employees to Search** for any employee records. Search by any of the following:

- First name
- Last name
- Last 4 digits of SSN
- Employee identifier (if any)

Employees + Add Employee

First Name Last Name Last 4 Digits or Full SSN Employee Identifier

Address Postal Code In Current Census Yes No

Or click **More Filters** to search by address and postal code

In current census

- **Yes** - census information to send the general rights letter.
- **No** -not included in census

BENEFITS

Click **Benefits** to review benefit plan information and to approve updates to rates.

Click **documents** to upload/view/remove any documents shared with all participants.

Click **Open Enrollments** to view/approve open enrollment plan rates and information.

Click **Approvals** to view/approve any open enrollments/updates to rates.

Click **Plan Rates** to view plans and rates. Rates shown do not include administration fees (i.e. 2%)

The screenshot shows a navigation menu for 'Sample Company'. The menu is organized into two columns. The left column contains: 'COBRA & Direct Billing' (with a left arrow), 'Dashboard' (with a house icon), 'Participants' (with a person icon), 'Employees' (with a group of people icon), 'Benefits' (with a plus icon and highlighted by a red box), 'Reports' (with a bar chart icon), 'Users' (with a shield icon), and 'Contacts' (with a person icon). The right column contains: 'Benefits' (with a left arrow), 'Documents' (with a document icon), 'Open Enrollments' (with a calendar icon), 'Approvals' (with a checkmark icon), and 'Plan Rates' (with a dollar sign icon).

REPORTS

Click **Reports** to view the report types available for use.

SEE APPENDIX 2: EMPLOYER PORTAL LIST W/ DESCRIPTION

USERS

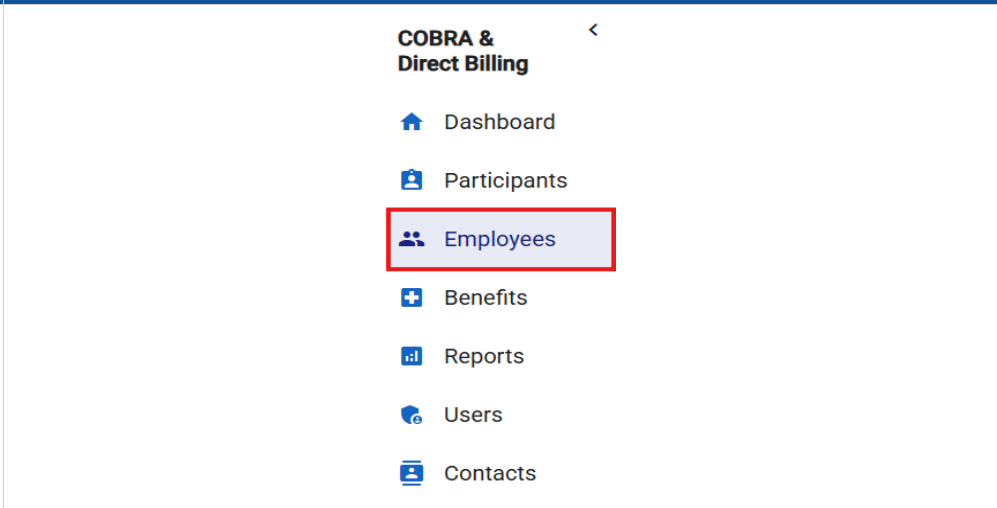
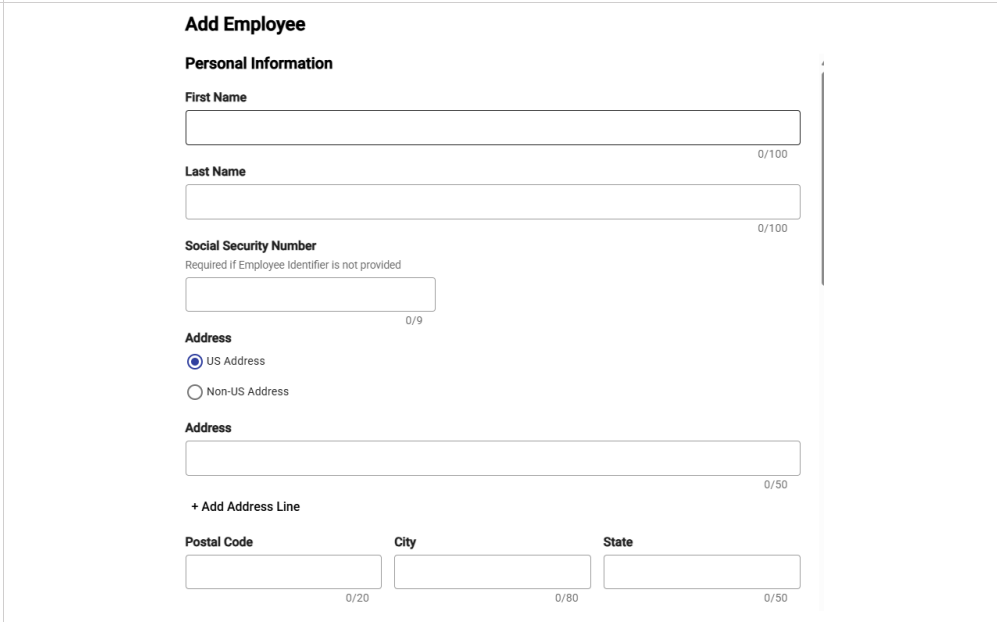
This section contains the users for the employer portal

Click **Users** to set up an HR admin or local user for the employer portal – see **Appendix 1** a list of roles and definitions

From the user details, you may **Resend The Invite Email** if the user did not receive it.

The screenshot shows a web interface for managing users. At the top right, there is a blue button labeled '+ Add User'. Below this, there is a search section with a text input field labeled 'Search Users' and a 'Search' button. To the right of the search field is a checkbox labeled 'Show Deactivated Users'. Below the search field, there is a message: 'There are no users added or not found based on the current search criteria.'

Add a New Hire (Newly Eligible Plan Member)

STEPS	SCREENSHOTS
<p>Log into the employer portal, choose Employees from the left menu and choose Add Employee in the upper right corner.</p>  <p>The screenshot shows a navigation menu for 'COBRA & Direct Billing'. The menu items are: Dashboard, Participants, Employees (highlighted with a red box), Benefits, Reports, Users, and Contacts.</p>	<p>Click + Add Employee</p> <p>Add all required information to the screen which will generate a COBRA initial rights notice to the employee.</p>  <p>The screenshot shows the 'Add Employee' form. The form is titled 'Add Employee' and has a section for 'Personal Information'. The fields are: First Name (0/100), Last Name (0/100), Social Security Number (0/9, with a note 'Required if Employee Identifier is not provided'), Address (0/50), and a section for 'Address' with a radio button for 'US Address' (selected) and 'Non-US Address'. Below this is another 'Address' field (0/50) and a '+ Add Address Line' button. At the bottom are fields for 'Postal Code' (0/20), 'City' (0/80), and 'State' (0/50).</p>

Add an employee identifier only if the social security number is not available.

Always leave the second section listed as **no** if you'd like the letter to generate and mail to the employee. All remaining fields on the page are optional and are not listed in the initial rights notice.

Employment Information

Employee Identifier

Required if Social Security Number is not provided

0/16

Is this record migrated or a takeover from another system?

No - General Notice Letter will be sent

Migrated - General Notice Letter will not be sent

Takeover - General Notice Letter will not be sent

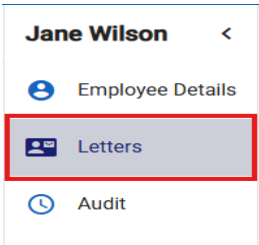
If the employee acquires a new benefits eligible spouse – you may retrigger the employee initial rights notice to satisfy the COBRA requirement to provide newly eligible plan members with an initial rights notice. This does not apply to dependent children on or added to an employer benefit plan.

Search for the employee who acquired a newly eligible plan member – spouse and click **View Details**.

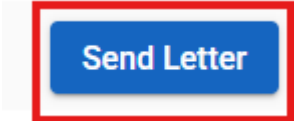
Employee	In Current Census
Jane Wilson	Yes

[View Details](#)

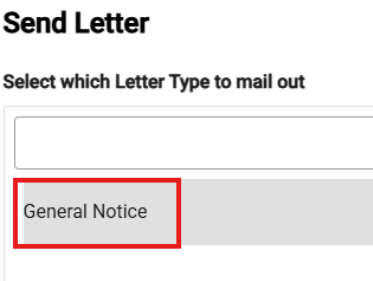
In the employee record click on **Letters**.



In the upper right corner click **Send Letter**



Choose **General Notice**



Click **Send Letter** in the lower right corner.

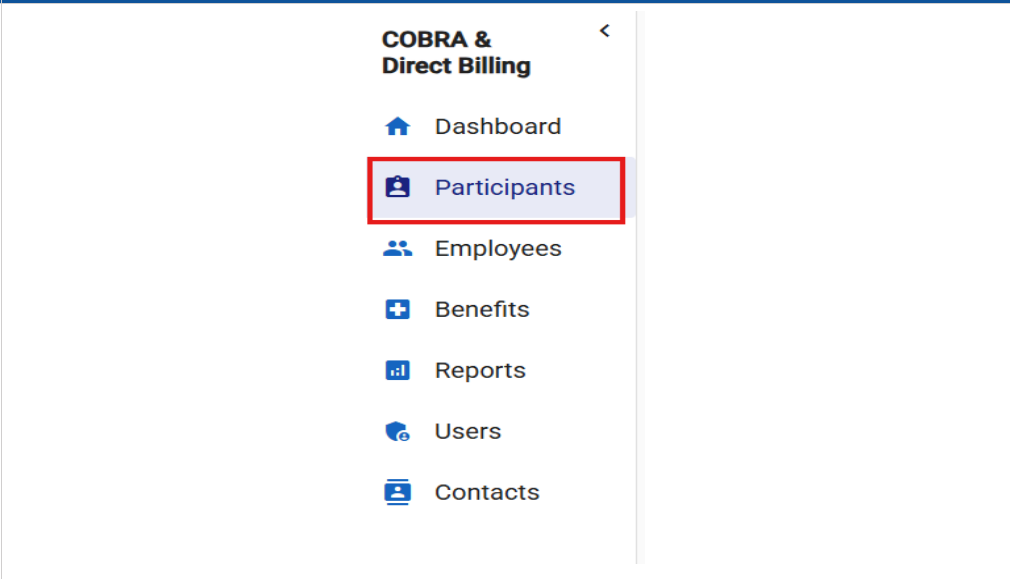
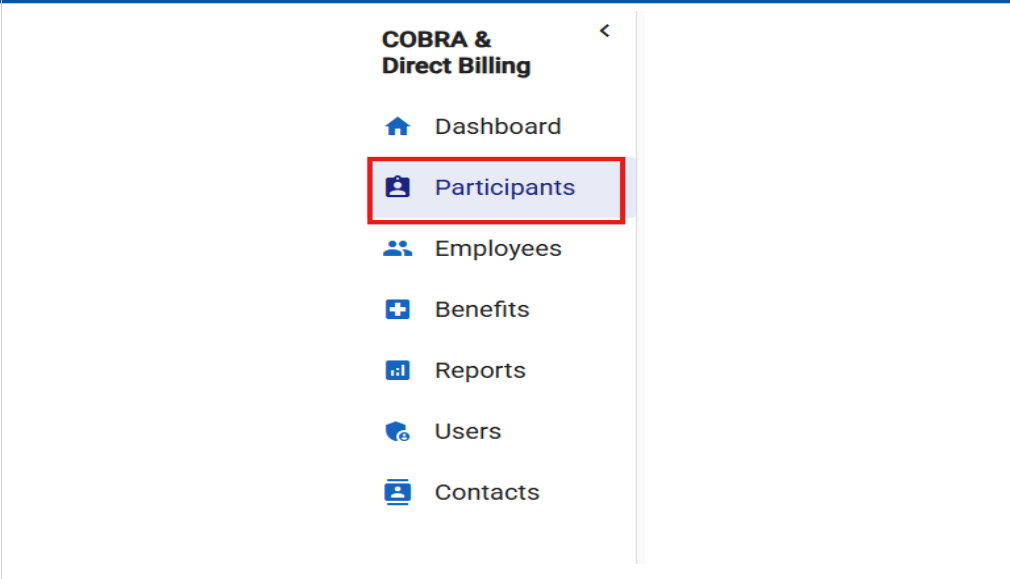
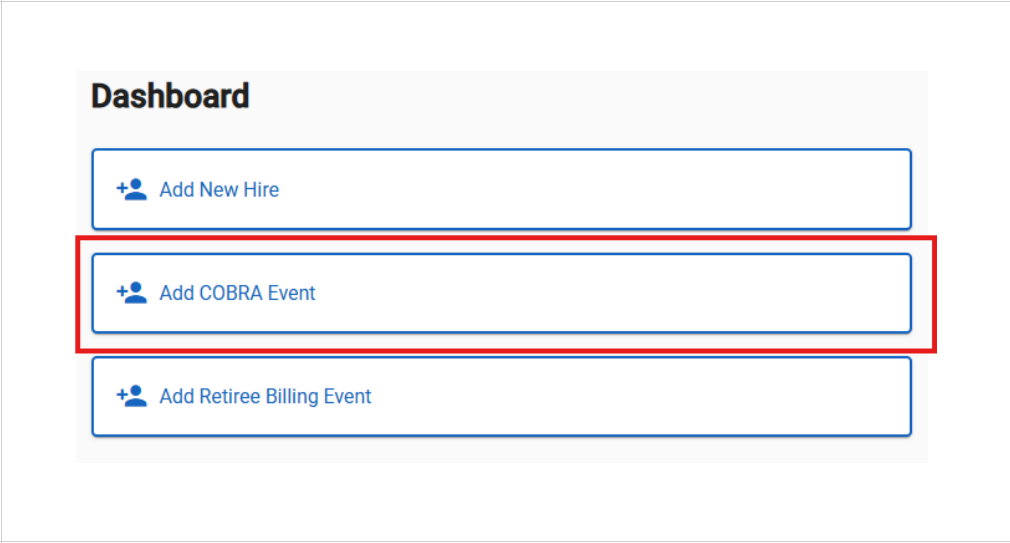




Under the **Letters** tab for the **Employee**, a list of **Letters** will be shown. You may click **Download Letter** to retrieve a pdf copy the day following entry or **Cancel Letter** on the day the new record is entered. After the letter is generated and sent the **Cancel Letter** option will no longer be available and is replaced by the **Download Letter** option. This is true

Letter Type	Mailed Date	Status	
General Notice	June 12, 2025	Sent	Download Letter
General Notice	June 13, 2025	Pending - User Created	Cancel Letter

for all letters in the platform.

Add a Participant – COBRA Qualified Beneficiary (COBRA Event)

STEPS	SCREENSHOTS
<p>Log into the employer portal, choose Participants from the left menu and choose Add Participant in the upper right corner.</p>  <p>The screenshot shows a sidebar menu for 'COBRA & Direct Billing'. The menu items are: Dashboard, Participants (highlighted with a red box), Employees, Benefits, Reports, Users, and Contacts.</p>	
<p>Or from the Dashboard click on add COBRA event to add A qualifying event.</p> <p>Note: if you subscribe to Direct Bill services that option will be available as well. (Shown in the example here as retiree billing)</p>	 <p>The screenshot shows a 'Dashboard' with three buttons: 'Add New Hire', 'Add COBRA Event' (highlighted with a red box), and 'Add Retiree Billing Event'.</p>
<p>You will see the screen Add Participant – COBRA Event</p>	 <p>The screenshot shows the heading 'Add Participant - COBRA Event'.</p>
<p>Under that heading there are 7 steps listed.</p>	 <p>The screenshot shows a progress bar with 7 steps: 1 Event Information, 2 Employee Information, 3 Benefit Information, 4 Primary Participant, 5 Dependents, 6 Subsidies, and 7 Review and Submit.</p>

- Event information
- Employee information
- Benefit information
- Primary participant
- Dependents (if any)
- Subsidies (if any)
- Review and submit

The first section – **Event Information** contains the primary information about the event.

- Qualifying event type (drop down)
- Qualifying event date (date)
- Is this A second qualifying event (yes/no)
- Disability extension (yes/no) – for assistance adding A disability extension, please reach out to your account manager.
- Migration – typically no (yes/**no**) if there is an acquisition and you wish to add the QBs from another

1 Event Information — 2 Employee Information — 3 Benefit Information

Event Information

Qualifying Event

Qualifying Event Date

MM/DD/YYYY

Is this a second Qualifying Event?

Yes
 No

Disability Extension

Yes
 No

Migration

Has this Qualifying Event been tracked in another system?

Yes
 No

platform, add them or reach out to your account manager for assistance loading the migrating QBs.

Click **Next**

Enter the **Employee Information** in the next section. Note the employee's name entered will display as entered on the qualifying event notice.

Required Fields:

- Employee first name
- Employee last name
- Social security number

Optional field information will not be listed on the qualifying event notice.

Click **Next**

The screenshot shows a multi-step form titled "Employee Information". At the top, there is a progress bar with four steps: 1. Event Information (checked), 2. Employee Information (highlighted), 3. Benefit Information, and 4. Primary Participant. Below the progress bar, the form fields are as follows:

- Employee First Name:** A text input field with a character count of 0/100.
- Employee Last Name:** A text input field with a character count of 0/100.
- Social Security Number:** A text input field with a character count of 0/9.
- Division (Optional):** A dropdown menu.
- Employee Identifier (Optional):** A text input field with a character count of 0/16.
- Hire Date (Optional):** A date picker field with the format MM/DD/YYYY.
- Termination Date (Optional):** A date picker field with the format MM/DD/YYYY.
- Rehire Date (Optional):** A date picker field with the format MM/DD/YYYY.
- Retirement Date (Optional):** A date picker field with the format MM/DD/YYYY.
- Primary Email (Optional):** A text input field with a character count of 0/100.
- Secondary Email (Optional):** A text input field with a character count of 0/100.

At the bottom of the form, there are two buttons: "Back" and "Next".

In the **Benefit Information** section, choose the benefit plan in which the employee was enrolled on the qualifying event date.

Click **Next**

Which benefits are the Employee or Employee's family enrolled in? 

Medical

Blue Cross Blue Shield Association CDHP

Not Covered

Vision

Aetna EPO

Not Covered

Back

Next

A Note About Health FSA Plans:

To determine if a participant is eligible to continue their health FSA please consider the following;

- If overspent (\$0 or negative balance, **no \$'s** available), do not offer FSA benefit under COBRA
- If underspent (positive balance current year + rollover balance from prior year, **\$'s available** to spend), offer FSA and add the monthly premium. To calculate the monthly premium (total election - contributed)/# of months remaining in the current plan year = COBRA monthly premium.
- If **COBRA starts first day of plan year** and FSA is **not** a rollover (gp or use it/lose it), do not offer FSA
- If **COBRA starts first day of plan year** and FSA is a rollover, offer \$0 FSA until end of COBRA period.
- If COBRA starts first day of plan year + FSA is a rollover + ppt did not fully contribute the elected FSA annual amount in the prev plan year: (least common - occurs if no payroll deductions are taken to the end of the plan year)
 1. To calculate first month [(total election - contributed)] = first month's total FSA COBRA premium.
 2. Second month onwards premium would be \$0 - these will be adjusted by floreshr. Please contact your representative for assistance.

To calculate the monthly premium, use the following calculation:

(Total election – contributed)/# of months remaining in the current plan year = COBRA monthly premium.

FSA

- ASI Flex FSA
- Not Covered

Monthly Contribution
Do not include administration fees

When adding a health FSA for COBRA continuation, the monthly amount is required.

Example of the calculation for the monthly health FSA premium

- To calculate the monthly FSA contribution amount:
- Determine the total annual election amount. \$500.00
 - Subtract the total amount contributed through payroll deductions. \$250.00
 - $\$500 - \$250 = \$250$
 - Divide the remaining amount by the number of months in the FSA plan year. $250.00 / 6 = \$41.66$

Note: this calculation does not include the 2% admin fee for COBRA. The admin fee will be added in the portal.

Add the calculated amount to the FSA plan.
Click **Next**.

FSA

- ASI Flex FSA
- Not Covered

Monthly Contribution
Do not include administration fees

The FSA plan will be listed on the next screen to confirm the entry.

Medical

Aetna Aetna Medical 2000 Plan

Not Covered

Vision

Aetna EPO

Not Covered

FSA

ASI Flex FSA

Not Covered

Back

Next

In the **Primary Participant** Section:

- Choose who is the primary participant
- Add address
- Phone numbers and email are optional
- Gender
- Is Tobacco User is optional

Primary Participant

Who is the Primary Participant?

- Employee
- Spouse
- Child
- Domestic Partner

First Name

Sally

Last Name

Swarthmore

Social Security Number

XXX-XX-6654

Primary Participant's Address

- US Address
- Non-US Address

Address

0/50

+ Add Address Line

Postal Code

0/20

City

0/80

State

0/50

Primary Phone Number (Optional)

0/14

Secondary Phone Number (Optional)

0/14

Email (Optional)

0/100

Gender

- Male
- Female
- Something Else

Is Tobacco User

- Yes
- No
- Unknown

- Date of Birth
- Disability and Medicare dates are optional

Confirm benefit options and click **Next**

Date of Birth

MM/DD/YYYY

Disability Start Date (Optional)

MM/DD/YYYY

Disability End Date (Optional)

MM/DD/YYYY

Medicare Start Date (Optional)

MM/DD/YYYY

Medicare End Date (Optional)

MM/DD/YYYY

Which benefits is this person enrolled in?

Medical

Blue Cross Blue Shield Association CDHP

Not Covered

Dental

Aetna DHMO

Not Covered

Vision

Aetna EPO

Not Covered

Back

Next

In the **Dependents** section, add any dependent information that is applicable.

Choose **+ Add Dependent**

Click **Next**

Provide the Primary Participant's Dependent Details

[+ Add Dependent](#)

No Dependents have been added. Click **Add Dependent** to add a dependent.

[Back](#)

[Next](#)

Choose the relationship of the dependent to the primary participant:

- Spouse
- Child
- Domestic Partner (as permissible under the plan)
- First Name
- Last Name
- Social Security Number
- Address is same as primary participant or different – you may enter a separate address for a dependent if applicable

Add Dependent

Relationship to Primary Participant

- Spouse
- Child
- Domestic Partner

First Name (Optional)

0/100

Last Name (Optional)

0/100

Social Security Number (Optional)

0/9

Address

- Use Primary Participant's Address
- Enter Different Address

12 Apple Valley Way
SCHENECTADY NY 12345 US

Continue adding
**Dependent
Information**

- Is Tobacco User (if required for the plan and if known)
- Date of Birth (many carriers require this if known)
- Disability and Medicare dates are optional

Add Dependent

Is Tobacco User

- Yes
- No
- Unknown

Date of Birth (Optional)

MM/DD/YYYY

Disability Start Date (Optional)

MM/DD/YYYY

Disability End Date (Optional)

MM/DD/YYYY

Medicare Start Date (Optional)

MM/DD/YYYY

Medicare End Date (Optional)

MM/DD/YYYY

Continue adding
Click the **Benefit Plans** the dependent was enrolled on the qualifying event date.

Which benefits is this person enrolled in?

Medical

- Blue Cross Blue Shield Association CDHP
- Not Covered

Dental

- Aetna DHMO
- Not Covered

Vision

- Aetna EPO
- Not Covered

Click **Add Dependent**

Close

Add Dependent

Information for the dependent who was added will be shown, and dependents may continue to show as added. Click **Next** when all covered dependents are added.

Spouse

Daniel Swarthmore

Back

Next

In the **Subsidies** section you may add any applicable subsidies. Note if the subsidy is added on the same day as the qualifying event, the subsidy information will be shown on the qualifying event notice. If the subsidy is added the next day or after the notice generates, the

Subsidies

+ Add Subsidy



Subsidies will cover the administration fees.

There are no subsidies added yet.

Back

Next

subsidy will not appear on the notice and another notice should be generated. The subsidy will appear in the member portal.

Click **+ Add Subsidy** to begin. Choose a **Benefit Type** in which the subsidy will apply. Choose the **Subsidy** percent or dollar amount.

If choosing a **Percent** – you may also add a **Max Dollar Amount** if applicable. Example shown: 50 percent of the COBRA premium will be subsidized by the employer up to a maximum of \$250/month.

Add Subsidy

General

Benefit Types Select All

- Medical
- Dental
- Vision

Subsidy

- Percent
- Dollar Amount

Subsidy

- Percent
- Dollar Amount

Percent

50

Max Dollar Amount (Optional)

250

When choosing a dollar amount, you may restrict to a specific plan or leave blank. You may add subsidy for a number of months, through the last day of COBRA coverage or a specific date range. Update any configuration changes and click **Add Subsidy**.

General

Benefit Types Select All

- Medical
- Dental
- Vision

Subsidy

- Percent
- Dollar Amount

Dollar Amount

Plan Restrictions

Start/End Configuration

- Months
- Dates

Start Month

End Month Setting

- Select Month
- Last Day of Coverage

When subsidy has been added, a line will appear showing the information added. To update, click **Edit Subsidy** or **Delete** it if needed.

Benefit Types	Subsidy	Plan Restrictions	Coverage Tier Maximum	Start Date	End Date	
Medical	\$100.00			June 1, 2025	September 30, 2025	Edit Subsidy

Items per page: 10 1 - 1 of 1

When the member elects and becomes enrolled (payment rec'd if applicable) the **Subsidies** tab will reflect the **Next Payment Due** information which will include the subsidy.

Subsidies

Next Payment Due

Due Date	Last Day to Pay	Days Remaining	Total	Subsidy	Amount Due	Already Paid	Remaining Amount Due	Running Total
July 1, 2025	July 31, 2025	37 Days	\$1,173.00	\$100.00	\$1,073.00	\$100.00	\$973.00	\$973.00

Cash In Bank: \$1,173.00 Unallocated Balance: \$100.00

The final section is **Review And Submit**. At this point you may click on any item on the top row to update. Hover over the item and click to go straight to that section.



Once all information is added and complete, click **Submit Participant**.

Add Participant - COBRA Event



Event Information Edit

Qualifying Event
Termination - Voluntary

Qualifying Event Date
May 1, 2025

Disability Extension
No

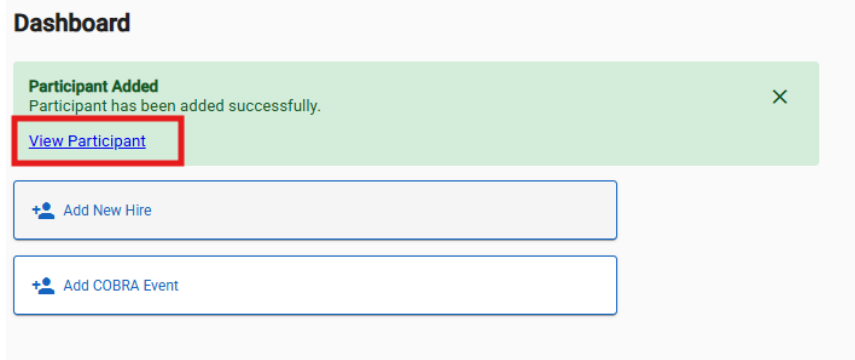
Initial Electable Plans Edit

Costs include the administration fees.

Plan	First Day of Coverage	Last Possible Day of Coverage	Enrollable	Cost
Medical Blue Cross Blue Shield Association CDHP	June 1, 2025	November 30, 2026	Primary Participant Suzie McDowell	Subscriber \$1,020.00
Dental Aetna DHMO	June 1, 2025	November 30, 2026	Primary Participant Suzie McDowell	Subscriber \$153.00
Vision Aetna EPO	May 2, 2025	November 1, 2026	Primary Participant Suzie McDowell	Subscriber \$25.50
				Total \$1,198.50 (Monthly)

Back Submit Participant Close

The **Dashboard** screen will appear with a green shaded area that includes a link to **View Participant** added or choose another action – **Add New Hire** (newly eligible plan member) or **Add COBRA Event**.



View a Participant Record

STEPS	SCREENSHOTS																											
<p>In the Participant tab, locate the record and click View Participant Details or the Down Arrow to see an overview of the record.</p>	<p>The screenshot displays a participant record for Jane Smith. It includes sections for Primary Participant, Dependents, Coverage Type, Coverage Status, Qualifying Event, Qualifying Event Date, Address, and Next Payment Due. A table provides a breakdown of the next payment due, and summary boxes show the cash in bank and unallocated balance.</p> <table border="1"> <thead> <tr> <th colspan="3">Next Payment Due</th> <th>Total</th> <th>Subsidy</th> <th>Amount Due</th> <th>Already Paid</th> <th>Remaining Amount Due</th> <th>Running Total</th> </tr> </thead> <tbody> <tr> <td>Due Date</td> <td>Last Day to Pay</td> <td>Days Remaining</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>July 1, 2025</td> <td>July 31, 2025</td> <td>37 Days</td> <td>\$1,173.00</td> <td>\$100.00</td> <td>\$1,073.00</td> <td>\$100.00</td> <td>\$973.00</td> <td>\$973.00</td> </tr> </tbody> </table>	Next Payment Due			Total	Subsidy	Amount Due	Already Paid	Remaining Amount Due	Running Total	Due Date	Last Day to Pay	Days Remaining							July 1, 2025	July 31, 2025	37 Days	\$1,173.00	\$100.00	\$1,073.00	\$100.00	\$973.00	\$973.00
Next Payment Due			Total	Subsidy	Amount Due	Already Paid	Remaining Amount Due	Running Total																				
Due Date	Last Day to Pay	Days Remaining																										
July 1, 2025	July 31, 2025	37 Days	\$1,173.00	\$100.00	\$1,073.00	\$100.00	\$973.00	\$973.00																				

Click **View Participant Details**

The member's name is shown in the upper left corner of the screen.

The **Coverage Details** section includes the member's status (see **Appendix 1** for definitions), basic event and demographic participant/dependent (if any) details.

Click **Edit General** or other **Edit** button on any screen to update the participant information if needed. If you edit information here – another qualifying event notice may be needed. Go to the **Letter** tab and click send next to the notice you wish to regenerate.

Choose **Delete Coverage** if the record was entered in error.

Note: once letters are generated, the ability to delete coverage is no longer available.

Click **View Mode** to return to the general tab after saving or without saving.

Jane Smith <

- COBRA Coverage Details
- Consumer Accounts
- Benefits
- Payments
- Billing
- Subsidies
- Carrier Communications
- Letters
- Notes and Documents
- Alerts
- Audit

COBRA Coverage Details

General Primary Participant Dependents Employee Information

General

Coverage Status: Enrolled

Event Information

[Edit General](#)

Scan Line ID
28

Qualifying Event
Termination - Voluntary

Qualifying Event Date
May 15, 2025

Original First Day of COBRA
-

Disability Extension
No

Is this record migrated or a takeover from another system?
No

Coverage Status

Last Day to Elect
August 11, 2025

Election Date
June 1, 2025

Migrated Paid Through Date
-

Paid Through Date
June 30, 2025

[Delete Coverage](#)

Jane Smith <

- COBRA Coverage Details
- Consumer Accounts
- Benefits
- Payments
- Billing
- Subsidies
- Carrier Communications
- Letters
- Notes and Documents
- Alerts
- Audit

COBRA Coverage Details

General Primary Participant Dependents Employee Information

General

Coverage Status: Enrolled

Event Information

[Edit General](#)

Scan Line ID
28

Qualifying Event
Termination - Voluntary

Qualifying Event Date
May 15, 2025

Original First Day of COBRA
-

Disability Extension
No

Is this record migrated or a takeover from another system?
No

Coverage Status

Last Day to Elect
August 11, 2025

Election Date
June 1, 2025

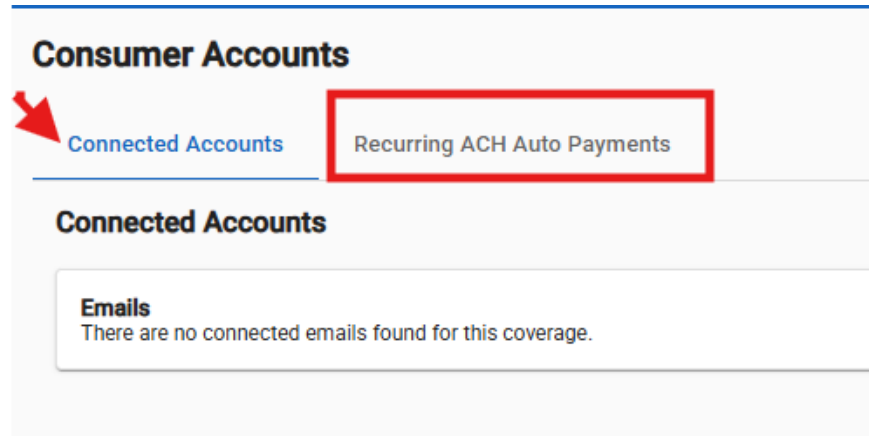
Migrated Paid Through Date
-

Paid Through Date
June 30, 2025

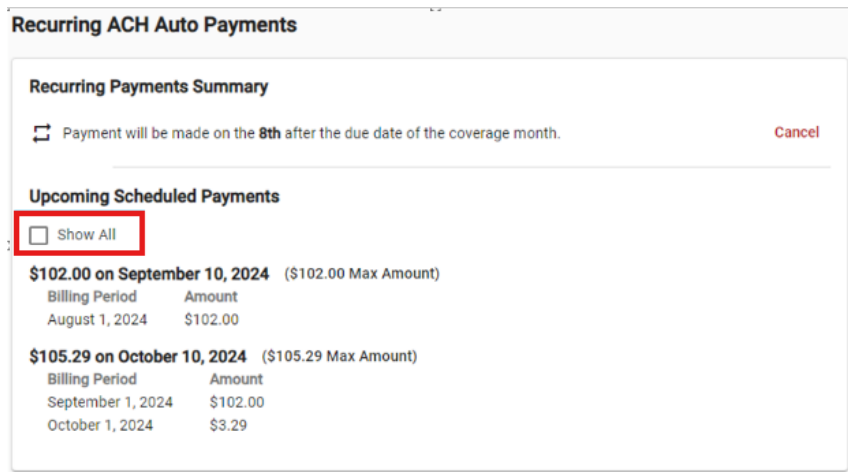
[Delete Coverage](#)

The **Consumer Accounts** tab includes the participants' email address associated with the account under the **Connected Accounts** tab.

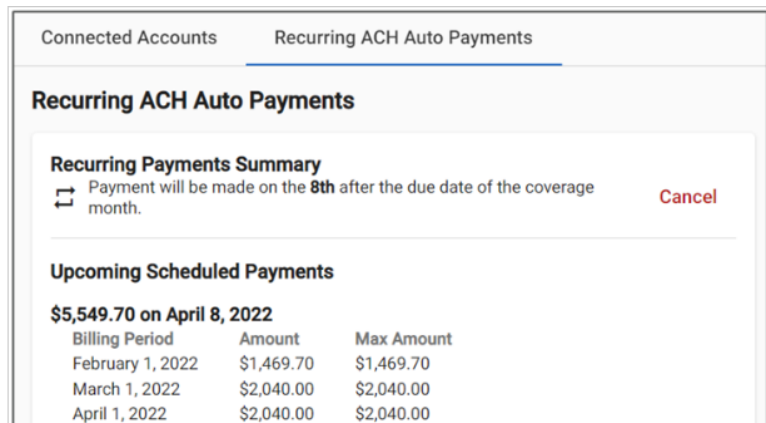
If the participant sets up **Recurring ACH Auto Payments**, that information is listed.



Click **Show All** to see A list of scheduled upcoming payments.
Example of recurring ACH payments scheduled for the 8th of the month following the due date (1st of the month).



This example shows a list of scheduled payments.



Note: if there is a rate change expected for an open enrollment and rates are not available at the time of the scheduled ACH, the platform will pull the prior amount into

Billing Period	Amount Due	Withdraw Date	Notification Date (max limit set)	Amount Withdrawn
July	\$1000	Jun 15	May 25	\$1000
August	\$1000	July 15	June 25	\$1000
September	Waiting on rates \$1000	August 15	July 25	\$1000
October	Waiting on rates \$1000	September 15	August 25	\$1000
November	\$1,100*3 = \$3,300 - \$2000 (already paid) = \$1,300	October 15	September 25	\$1,300
December	\$1,100	November 15	October 25	\$1100

the month waiting on rates and when rates are updated or approved, the platform will pull the difference due in the following ACH.

Benefits

Initial Electable Plans Elected Plans **Coverage Window**

[Override Coverage Windows](#)

Benefit Type	Loss of Employee Coverage Date	First Day of Coverage	Last Possible Day of Coverage
Medical	May 31, 2025	June 1, 2025	November 30, 2026
Dental	May 31, 2025	June 1, 2025	November 30, 2026
Vision	May 31, 2025	June 1, 2025	November 30, 2026

The **Benefit Tab** includes three sections:

- Initial electable plans
- Elected plans
- Coverage window

Benefits

[Initial Electable Plans](#) [Elected Plans](#) [Coverage Window](#)

In the **Initial Electable Plans** section there will be a list of plans and information the qb was offered in their qualifying event notice.

The **Initial Electable Plans** section also includes the members **Last Day To Elect**.

[Initial Electable Plans](#) [Elected Plans](#) [Coverage Window](#)

Initial Electable Plans

Last Day to Elect: September 8, 2025

Plan	Coverage Factors	Enrollable	Cost
Medical Blue Cross Blue Shield Association CDHP		Subscriber Aiden Collins Spouse Sue Collins	Subscriber + Family \$2,550.00 Edit
Dental Aetna DHMO Is Bundled With Medical Blue Cross Blue Shield Association CDHP		Subscriber Aiden Collins Spouse Sue Collins	Subscriber + Family \$255.00 Edit
Vision Aetna EPO		Subscriber Aiden Collins	Subscriber \$25.50 Edit

The **Elected Plans** tab includes the plans the members elect to continue. To select plans on behalf of a

Benefits

Initial Electable Plans **Elected Plans** Coverage Window

Elected Plans

Select a different plan date to view other coverage.

There are no elected plans found.

[New Enrollment](#)

member, click **New Enrollment**.

As shown in the screen shot here this member has not elected.

The election date is the date of the election for the member. Add the **Election Date**.

Review the plans offered and make any necessary updates for the election.

When the election is completed, click **New Enrollment**.

Note, once the elections are submitted, the members will receive an **Election Confirmation** letter that includes coupons to remit their initial payment. (If no payment received) click on the **letters** section to view the notices.

New Enrollment

Election Date
MM/DD/YYYY

07/01/2025

Medical

Plan

- Blue Cross Blue Shield Association CDHP
- Not Covered

Enrolled

- Primary Participant**
Aiden Collins
- Spouse**
Sue Collins

Dental

Plan

- Aetna DHMO
- Not Covered

Enrolled

- Primary Participant**
Aiden Collins
- Spouse**
Sue Collins

Vision

Plan

- Aetna EPO
- Not Covered

Enrolled

- Primary Participant**
Aiden Collins
- Spouse**
Sue Collins

Close

New Enrollment

After an election is processed, the effective date will show under **elected plans**. If the member continues COBRA through open enrollment, the renewal plan effective dates will show in the drop down.

Edits are available to the members' election if needed.

Benefits

Initial Electable Plans **Elected Plans** Coverage Window

Elected Plans ⓘ

Select a different plan date to view other coverage.
 July 1, 2025

New Enrollment

Form Submitted X
 Benefits have been successfully saved.

Plan	Start Date	End Date	Enrolled	Cost	
Medical Blue Cross Blue Shield Association CDHP	July 1, 2025	-	Subscriber Aiden Collins Spouse Sue Collins	Subscriber + Family \$2,550.00	Add/Drop Enrollee
Dental Aetna DHMO	July 1, 2025	-	Subscriber Aiden Collins Spouse Sue Collins	Subscriber + Family \$255.00	Add/Drop Enrollee
Vision Aetna EPO	June 26, 2025	-	Subscriber Aiden Collins	Subscriber \$25.50	Add/Drop Enrollee

Under the **coverage window** section, the benefit types are listed along with the corresponding dates related to the qualifying event type. (Example, termination of employment = 18 months – as shown, divorce = 36 months) these dates are editable if needed. Click **override coverage windows** to edit.

Benefits

Initial Electable Plans Elected Plans **Coverage Window**

Coverage Window [Override Coverage Windows](#)

Benefit Type	Loss of Employee Coverage Date	First Day of Coverage	Last Possible Day of Coverage
Medical	June 30, 2025	July 1, 2025	December 31, 2026
Dental	June 30, 2025	July 1, 2025	December 31, 2026
Vision	June 25, 2025	June 26, 2025	December 25, 2026

In the **payments** section the members' payments made to date (if any). Note any **subsidy** applied on the account will be shown here.

Payments [+ Add Payment](#)

Next Payment Due

Due Date	Last Day to Pay	Days Remaining	Total	Subsidy	Amount Due	Already Paid	Remaining Amount Due	Running Total
June 1, 2025	August 15, 2025	45 Days	\$4.25	\$0.00	\$4.25	\$0.00	\$4.25	\$4.25
July 1, 2025	August 15, 2025	45 Days	\$2,830.50	\$2,550.00	\$280.50	\$0.00	\$280.50	\$284.75
August 1, 2025	August 31, 2025	61 Days	\$2,830.50	\$2,550.00	\$280.50	\$0.00	\$280.50	\$565.25

Payments

There are no payments added yet. Click **Add Payment** to add a new Payment.

Payments, any payments added will show in the **payments tab**. The details about the payment are listed.

Payments

Payment Added
Payment has been added successfully. ✕

Postmark Date ↓	Method	Source	Total	
July 1, 2025	Non-Cash	On Account Adjustment	\$284.75	Void Payment ↓

Items per page: 10 1 - 1 of 1 < >

Tap the **down arrow** to view payment details. This is available for any payment added to the list.

Payments

Payment Added
Payment has been added successfully. ✕

Postmark Date ↓	Method	Source	Total	
July 1, 2025	Non-Cash	On Account Adjustment	\$284.75	Void Payment ▲

Deposit Date
July 1, 2025

Detail
-

Payment ID
-

Billing Period Date	Dollar Amount
June 1, 2025	\$4.25
July 1, 2025	\$280.50

Items per page: 10 1 - 1 of 1 < >

Under the **billing section**, all billing periods are listed for the remainder of the plan year. When an open enrollment is processed and approved, those billing periods will be added to the list.

Billing

Next Payment Due

Due Date	Last Day to Pay	Days Remaining	Total	Subsidy	Amount Due	Already Paid	Remaining Amount Due	Running Total
August 1, 2025	August 31, 2025	61 Days	\$2,830.50	\$2,550.00	\$280.50	\$0.00	\$280.50	\$280.50

Billing Periods

Show Billing Periods that are Waiting on Rates or Deleted

Due Date ↑	End Date	Total	Subsidy	Amount Due	Last Day to Pay	
June 1, 2025	June 30, 2025	\$4.25	\$0.00	Paid	August 15, 2025	▼
July 1, 2025	July 31, 2025	\$2,830.50	\$2,550.00	Paid	August 15, 2025	▼
August 1, 2025	August 31, 2025	\$2,830.50	\$2,550.00	\$280.50	August 31, 2025	▼
September 1, 2025	September 30, 2025	\$2,830.50	\$0.00	\$2,830.50	October 1, 2025	▼
October 1, 2025	October 31, 2025	\$2,830.50	\$0.00	\$2,830.50	October 31, 2025	▼
November 1, 2025	November 30, 2025	\$2,830.50	\$0.00	\$2,830.50	December 1, 2025	▼
December 1, 2025	December 31, 2025	\$2,830.50	\$0.00	\$2,830.50	December 31, 2025	▼

Items per page: 12 1 - 7 of 7 < >

Click the box – **show billing periods that are waiting on rates** or deleted to see future billing periods. Example shown here **january 1, 2026 – end of COBRA are waiting on rates.**

December 1, 2025	December 31, 2025	\$2,830.50	\$0.00	\$2,830.50	December 31, 2025	▼
January 1, 2026	January 31, 2026	\$0.00	\$0.00	Waiting On Rates	December 31, 2026	▼
February 1, 2026	February 28, 2026	\$0.00	\$0.00	Waiting On Rates	December 31, 2026	▼
March 1, 2026	March 31, 2026	\$0.00	\$0.00	Waiting On Rates	December 31, 2026	▼
April 1, 2026	April 30, 2026	\$0.00	\$0.00	Waiting On Rates	December 31, 2026	▼
May 1, 2026	May 31, 2026	\$0.00	\$0.00	Waiting On Rates	December 31, 2026	▼

Items per page: 12 1 – 12 of 19 < >

Click on any **drop-down** arrow to the right of the last day to pay date to view the **billing details, payments, subsidies, disbursements, and any overrides** needed depending on the situation.

July 1, 2025 July 31, 2025 \$2,830.50 \$2,550.00 Paid August 15, 2025 ^

[Billing Details](#) [Payments](#) [Subsidies](#) [Disbursements](#) [Override](#)

Payment Date	Source	Amount
July 1, 2025	On Account Adjustment	\$280.50 of \$284.75

July 1, 2025 July 31, 2025 \$2,830.50 \$2,550.00 Paid August 15, 2025 ^

[Billing Details](#) [Payments](#) [Subsidies](#) [Disbursements](#) [Override](#)

Plan	Premium	TPA	Employer	Carrier	Total Amount	Subsidy	Amount Due
Medical Blue Cross Blue Shield Association CDHP	\$2,500.00	\$50.00	\$0.00	\$0.00	\$2,550.00	\$2,550.00	\$0.00
Dental Aetna DHMO	\$250.00	\$5.00	\$0.00	\$0.00	\$255.00	\$0.00	\$255.00
Vision Aetna EPO	\$25.00	\$0.50	\$0.00	\$0.00	\$25.50	\$0.00	\$25.50
Total	\$2,775.00	\$55.50	\$0.00	\$0.00	\$2,830.50	\$2,550.00	\$280.50

July 1, 2025 July 31, 2025 \$2,830.50 \$2,550.00 Paid August 15, 2025 ^

[Billing Details](#) [Payments](#) [Subsidies](#) [Disbursements](#) [Override](#)

Payment Date	Source	Amount
July 1, 2025	On Account Adjustment	\$280.50 of \$284.75

July 1, 2025 July 31, 2025 \$2,830.50 \$2,550.00 Paid August 15, 2025 ^


[Billing Details](#) [Payments](#) [Subsidies](#) [Disbursements](#) [Override](#)

Benefit Type	Subsidy
Medical	100%


[Billing Details](#) [Payments](#) [Subsidies](#) [Disbursements](#) [Override](#)

Disbursements	Amount to TPA	Amount to Employer	Amount to Carrier
Next Disbursement	\$55.50	-\$55.50	\$0.00
Dental Aetna DHMO	\$5.00	-\$5.00	\$0.00
Vision Aetna EPO	\$0.50	-\$0.50	\$0.00
Medical Blue Cross Blue Shield Association CDHP	\$50.00	-\$50.00	\$0.00
Total	\$55.50	-\$55.50	\$0.00

[Billing Details](#) [Payments](#) [Subsidies](#) [Disbursements](#) [Override](#)

Last Day to Pay 

-

Rate Effective Date 

Medical Blue Cross Blue Shield Association CDHP -

Dental Aetna DHMO -

Vision Aetna EPO -

From the **subsidies** tab, any subsidy added to the member record is shown. From this tab a subsidy may be **added, edited, or deleted**.

Note, if a subsidy is added one day or later after the qualifying event is added, a new qualifying event notice which will include the subsidy information must be requeued by going to the letters tab on the member record and clicking send. The member portal will include the subsidy information immediately after submitting.

If the subsidy is added the same day the qualifying event is added, no further action is needed. The full subsidy amount added will be reflected in the qualifying event notice.

Subsidy permissions must be granted to an employer user to add/edit subsidies.

Subsidies + Add Subsidy

Next Payment Due

Due Date	Last Day to Pay	Days Remaining	Total	Subsidy	Amount Due	Already Paid	Remaining Amount Due	Running Total
August 1, 2025	August 31, 2025	61 Days	\$2,830.50	\$2,550.00	\$280.50	\$0.00	\$280.50	\$280.50

Subsidies

Subsidies will cover the administration fees.

Benefit Types	Subsidy	Plan Restrictions	Coverage Tier Maximum	Start Date	End Date	
Medical	100%		-	July 1, 2025	August 31, 2025	Edit Subsidy 📱

Items per page: 10 1 - 1 of 1 < >

Click **add subsidy** to add a subsidy to a member record – see the instructions above when adding a **qualifying event** to add the subsidy.



In the **carrier communication** section, all carrier communications for the members will be listed along with the details for each. Click the **down arrow** to the right of the row to see more detailed information.

Carrier Communications

[Communications](#) Enrollments Summary

Created Date	Plan	Type	Communicated Date	Status	
June 27, 2025	Vision Aetna EPO		Email	June 28, 2025	Sent Escalate ▼

Items per page: 10 1 - 1 of 1 <

After clicking the down arrow - more detailed information includes -

Delivery details – status of the notification and recipient email address.

Employee information – name and social security number.

Enrollment information – including coverage type and dates.

Enrolled people – name and enrollment type and reason.

Created Date	Plan	Type	Communicated Date	Status	
July 1, 2025	Medical Blue Cross Blue Shield Association CDHP		Email	July 2, 2025	Sent Escalate ^

[Delivery Details](#)
[Employee Information](#)
[Enrollment Information](#)
[Enrolled People](#)

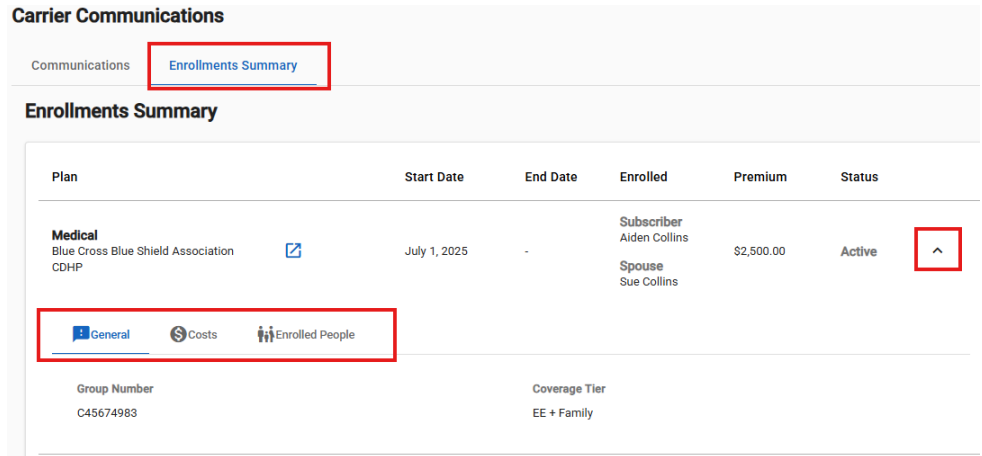
The **enrollment summary** tab includes the plan information, dates, who is enrolled, premium and status.

Click the down arrow on the right to view;

General plan information and tier

Costs include dates and cost

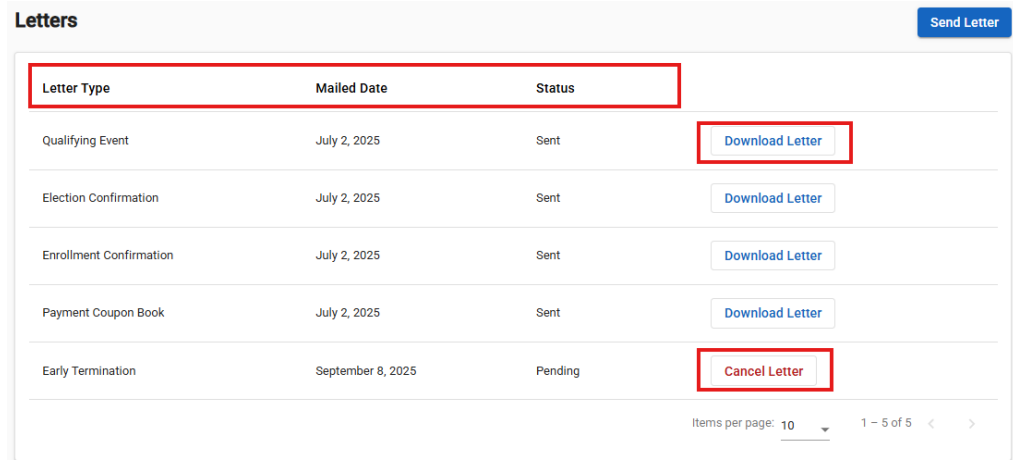
Enrolled people list the relationship to the subscriber, names and dates of those enrolled.



The screenshot shows the 'Carrier Communications' section with a sub-tab for 'Enrollments Summary'. Below this is a table with columns: Plan, Start Date, End Date, Enrolled, Premium, and Status. The 'Enrolled' column lists 'Subscriber Aiden Collins' and 'Spouse Sue Collins'. The 'Status' is 'Active'. Below the table are three tabs: 'General', 'Costs', and 'Enrolled People'. The 'General' tab is selected, showing 'Group Number C45674983' and 'Coverage Tier EE + Family'. A red box highlights the 'Enrollments Summary' tab, the 'Enrolled' column, the 'General' tab, and a small upward arrow icon in the 'Status' column.

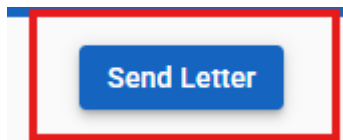
In the **letters** tab, a list of all letters sent and queued to send in the future will be listed. Those letters that were sent will show the mailed date, status and an option to download the letter.

If a letter is queued and you do not want it to send, click **cancel letter**.



The screenshot shows the 'Letters' section with a 'Send Letter' button in the top right. Below is a table with columns: Letter Type, Mailed Date, and Status. The table lists five letters: 'Qualifying Event', 'Election Confirmation', 'Enrollment Confirmation', 'Payment Coupon Book', and 'Early Termination'. The 'Early Termination' letter is 'Pending'. Each row has a 'Download Letter' button, except for 'Early Termination' which has a 'Cancel Letter' button. A red box highlights the table headers, the 'Download Letter' button for the first row, and the 'Cancel Letter' button for the last row. At the bottom right, it says 'Items per page: 10' and '1 - 5 of 5'.

To resend a letter that has already been sent, click **send letter** in the upper right corner.



Choose the letter you'd like to send from the list and click **send letter**.

Send Letter

Select which Letter Type to mail out

Q

Qualifying Event

Election Confirmation

Enrollment Confirmation

Payment Coupon

Payment Coupon (Late Notice)

Payment Coupon Book

Close **Send Letter**

When resending a letter – if you choose the qualifying event notice, the dates on the participant record will not change. You may cancel the letter the same day it was queued, however any day after that, you may not cancel the letter. The following day, you may download a copy.

Qualifying Event	July 10, 2025	Pending - User Created	Cancel Letter
------------------	---------------	------------------------	----------------------

In the **notes and documents** section, you will see any notes on the record and any documents visible to the member.

Notes and Documents

Notes Documents

Notes

In the **alerts** section, if there were errors on the member record such as rates not available, it will show here.

Alerts

Message

Note

 Yes
 No

Resolved

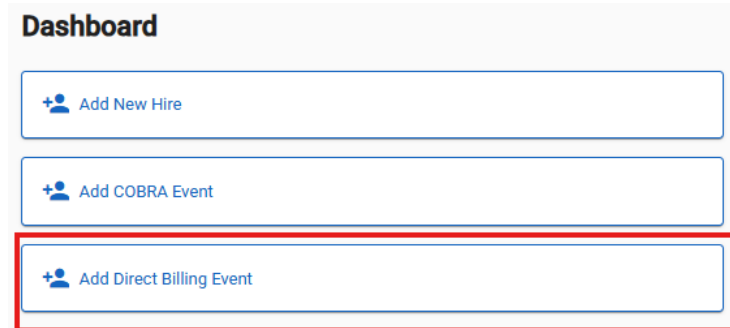
 Yes
 No

There are no alerts or not found based on the current search criteria.

Direct Billing

From the dashboard on the employer portal choose + add direct billing event.

Direct billing events are used for employees who remain on benefit plans and are not receiving a paycheck, i.E. Leave of absence.



In the add participant section there are 7 steps -

- Event
- Employee
- Benefit
- Primary participant
- Dependents
- Subsidies
- Review and submit

Add Participant - Direct Billing Event

1 Event Information — 2 Employee Information — 3 Benefit Information — 4 Primary Participant — 5 Dependents — 6 Subsidies — 7 Review and Submit

Event Information

Event Date

MM/DD/YYYY

Migration

Has this Direct Billing Event been tracked in another system?

Yes

No

[Next](#)

[Close](#)

In the **event section** – add the event date and if this record was tracked in another system prior to adding the information here.

Add Participant - Direct Billing Event

1 Event Information — 2 Employee Information — 3 Benefit Information

Event Information

Event Date

MM/DD/YYYY

06/15/2025



Migration

Has this Direct Billing Event been tracked in another system?

Yes

No

Next

Add Participant - Direct Billing Event

1 Event Information — 2 Employee Information — 3 Benefit Information — 4 Primary Participant — 5

Employee Information

Employee First Name

0/100

Employee Last Name

0/100

Social Security Number

0/9

Division (Optional)

Employee Identifier (Optional)

0/16

Hire Date (Optional)

MM/DD/YYYY



Termination Date (Optional)

MM/DD/YYYY



Rehire Date (Optional)

MM/DD/YYYY



Retirement Date (Optional)

MM/DD/YYYY



Primary Email (Optional) ⓘ

0/100

Secondary Email (Optional) ⓘ

0/100

Back

Next

In the **employee** section, add all required information and click **next**.

Note, name and ssn are required on this page unless the employer's divisions control benefit plan eligibility – then division is required.

Add Participant - Direct Billing Event

Event Information — 2 Employee Information

Employee Information

Employee First Name

Amanda

Employee Last Name

Willis

Social Security Number

444-55-4444

9/9

Division (Optional)

In the primary participant section, add the employee address, and optional fields are phone number and email. Click next

Continue adding the gender, tobacco user (if applicable – if not, leave unknown) Date of birth is required, and other dates are options.

Gender

- Male
 Female
 Something Else

Is Tobacco User

- Yes
 No
 Unknown

Date of Birth

MM/DD/YYYY

Disability Start Date (Optional)

MM/DD/YYYY

Disability End Date (Optional)

MM/DD/YYYY

Medicare Start Date (Optional)

MM/DD/YYYY

Medicare End Date (Optional)

MM/DD/YYYY

From the benefit section, choose the plans the member will be paying through direct bill.

Which benefits are the Employee or Employee's family enrolled in?

Medical

- Aetna Aetna Medical 2000 Plan
- Aetna Anthem Century Preferred \$5 UPSEU/Clerical
- Anthem BCBS Aetna Medical 2000 Plan
- Not Covered

Life

- Met Life Basic Life
- Not Covered

Option

- Aetna Aetna Medical 2000 Plan
- Not Covered

Option 2

- Aflac Chiropractic Plan
- Not Covered

The benefits will be listed for confirmation. If there are changes, add them here. Click next.

In the **dependent** section, add any dependent information here.

Add Dependent

Relationship to Primary Participant

- Spouse
- Child
- Domestic Partner

First Name (Optional)

Last Name (Optional)

Social Security Number (Optional)

0/9

Address

- Use Primary Participant's Address
- Enter Different Address

1001 89th Ave
SCHENECTADY NY 12345 US

Gender

- Male
- Female
- Something Else

Choose any **benefits** the dependent is enrolled in and should be included in the direct bill.

Continue adding any dependents and when finished click next.

Which benefits is this person enrolled in?

Medical

- Aetna Aetna Medical 2000 Plan
- Not Covered

Life

- Met Life Basic Life
- Not Covered

Option

- Aetna Aetna Medical 2000 Plan
- Not Covered

Option 2

- Aflac Chiropractic Plan
- Not Covered

Event Information Employee Information Benefit Infor

Subsidies

[+ Add Subsidy](#)

i Subsidies will cover the administration fees.

There are no subsidies added yet.

Back

Next

In the **subsidy** section, add any employer provided subsidy to the member if applicable.

In the review and submit section, make any necessary changes and/or click **submit participant**

Monthly Remittance – COBRA/Direct Bill

Timing:

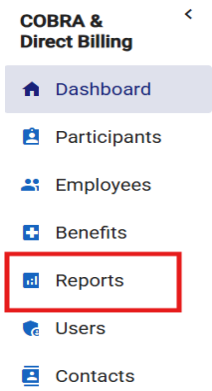

- On or around the 15th of each month the COBRA remittance process will be run
 - Those who receive a check remittance should expect their check to arrive within 10 business days of the first business day on or after 15th
 - Those who receive ACH should expect their remittance to arrive within 3 business days on or after the 15th

Periods Included:

- Premiums included in the remittance are below:
 - Termed employers – all month's premiums received
 - Active employers – current and previous months premiums received

Reporting:

- Details of the remittance can be found on the disbursement details report – by filtering by the remittance day
- Other fields are available to be added to the report to customize it to your needs once the report is opened in the client portal.

STEPS	SCREENSHOTS
From the home screen, choose Reports .	 <p>COBRA & Direct Billing</p> <ul style="list-style-type: none">DashboardParticipantsEmployeesBenefitsReportsUsersContacts
Choose the report, Disbursement Details	 <p>Disbursement and Payment Details</p> <ul style="list-style-type: none">Billing Period Details View ReportDisbursement Details View Report

On the next screen enter the date of the remittance, using the 15th of the month. Click View Report.

Setup Report: Disbursement and Payment Details

Disbursement Date Range

MM/DD/YYYY - MM/DD/YYYY

10/15/2025 - 10/15/2025



View Report

The report will show and on the left side menu the default set up includes Row Groups and Values which can be removed for ease of viewing. If these are not removed, click Export Report at the top left to download a copy of the report.

A screenshot of the report configuration interface. Under the 'Row Groups' section, 'DISBURSEMENT DATE' and 'DUE DATE' are listed with 'x' icons to their right, which are circled in red. Under the 'Values' section, 'sum(TPA AMOUNT)', 'sum(EMPLOYER AMOUNT)', and 'sum(CARRIER AMOUNT)' are listed with 'x' icons to their right, also circled in red.

With the Row Groups and Values removed, the report may be customized to suit the reconciliation needs.

The Columns indicator to the left may be toggled on and off.

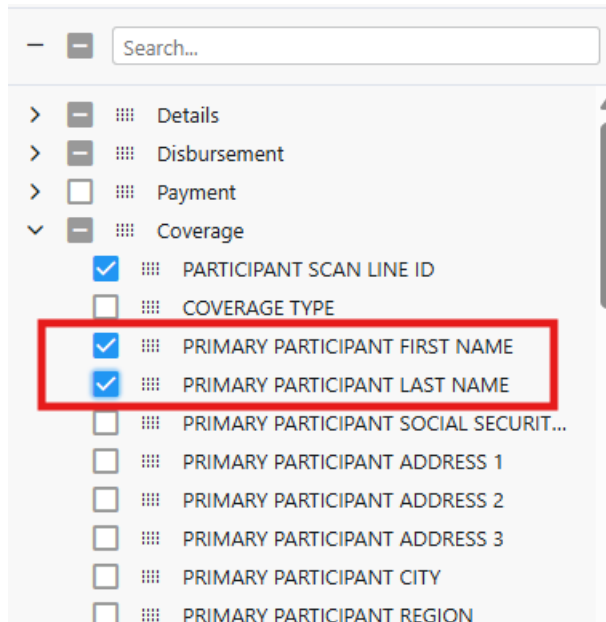
The report sections listed are the default fields available to be

A screenshot of the 'Columns' settings interface. A 'Pivot Mode' toggle is at the top left. Below it is a search bar. A list of report sections is shown with expand/collapse icons to their left, which are highlighted with a red box: Details, Disbursement, Payment, Coverage, Participant Billing Period, Billing Detail, Location, and Division. On the right side, a vertical 'Columns' indicator is shown with a red arrow pointing to it.

included/excluded in the report.

For Example: the **Participant Name** is not included by default in the report. To add it, expand the **Coverage** section and click the **Participant First Name** and **Participant Last Name**.

Click **Export Report** to download the report in .csv or .xlsx



Any updates made to the report may be saved for next month's reporting/reconciliation. Click **+Add Report**

Current Report

Disbursement Details

+ Add Report

Name the report and click **Add and Reload Report**. The report will now be available under the **Disbursement and Payment Details** section of the Report Tab

Add Report

Report Name

Company Monthly Remittance Report

Hide Rows and Aggregated Data for Opened Groups

Close

Add and Reload Report

Appendix 1: Employer User Profile Options

Permissions	HR Admin	HR Admin W/O Subsidies	HR Admin II	HR Admin II W/O Subsidies	HR Admin III
Update Benefit Documents	Y	Y	N	N	N
Manage Participants					
Search Participants (Search participants and view the Coverage Details, Benefits, Payments, Billing, Subsidies, Audits, and Letters. Search Employees)	Y	Y	Y	Y	Y
Create and Delete Participants (Create participants and delete participants before a letter is sent)	Y	Y	Y	Y	Y
Update Participants (Edit Coverage Details, Benefits, Billing, Subsidies, and Audits. Able to create or cancel Letters, send Escalation Emails, create Employees, and delete auto recurring payments)	Y	Y	Y	Y	N
Update Coverage Subsidies (Add, edit, or delete participants' subsidies)	Y	N	Y	N	Y
Reports					
View Full SSN in Reports (Can view full SSNs on reports)	Y	Y	Y	Y	Y
View Report Carrier Export (View the Enrollment Communication and the Enrollment reports)	Y	Y	Y	Y	Y
View Report Disbursement Details (View the Disbursement and Payment Details reports)	Y	Y	Y	Y	Y
View Report Employee Fields (View Employee Fields on reports)	Y	Y	Y	Y	Y
View Report Employee Groups (View Employee Groups on reports)	Y	Y	Y	Y	Y
View Report Notices Printed (View the Letters reports)	Y	Y	Y	Y	Y
View Report Participant Details (View the Participants reports)	Y	Y	Y	Y	Y
View Report Payments (View the Payments reports)	Y	Y	Y	Y	Y
View Carrier Disbursement Summary	Y	Y	N	N	N
View Report Plans and Rates (View the Plans and Rates reports)	Y	Y	Y	Y	Y
Miscellaneous					
Update Employer Users (Create and edit Employer users)	Y	Y	N	N	N

Permissions	HR Admin III W/O Subsidies	HR Admin IV	HR Admin IV W/O Subsidies	Benefit Admin	Benefit Admin II	Billing Admin
Update Benefit Documents	N	N	N	N	N	N
Manage Participants						
Search Participants (Search participants and view the Coverage Details, Benefits, Payments, Billing, Subsidies, Audits, and Letters. Search Employees)	Y	Y	Y	Y	Y	Y
Create and Delete Participants (Create participants and delete participants before a letter is sent)	Y	Y	Y	N	Y	N
Update Participants (Edit Coverage Details, Benefits, Billing, Subsidies, and Audits. Able to create or cancel Letters, send Escalation Emails, create Employees, and delete auto recurring payments)	N	N	N	N	Y	N
Update Coverage Subsidies (Add, edit, or delete participants' subsidies)	N	Y	N	N	Y	N
Reports						
View Full SSN in Reports (Can view full SSNs on reports)	Y	Y	Y	N	N	N
View Report Carrier Export (View the Enrollment Communication and the Enrollment reports)	Y	Y	Y	Y	Y	N
View Report Disbursement Details (View the Disbursement and Payment Details reports)	Y	Y	Y	Y	Y	N
View Report Employee Fields (View Employee Fields on reports)	Y	Y	Y	Y	N	N
View Report Employee Groups (View Employee Groups on reports)	Y	Y	Y	Y	N	N
View Report Notices Printed (View the Letters reports)	Y	Y	Y	Y	Y	N
View Report Participant Details (View the Participants reports)	Y	Y	Y	Y	Y	N
View Report Payments (View the Payments reports)	Y	Y	Y	Y	Y	N
View Carrier Disbursement Summary	N	N	N	Y	N	Y
View Report Plans and Rates (View the Plans and Rates reports)	Y	Y	Y	Y	Y	N
Miscellaneous						
Update Employer Users (Create and edit Employer users)	N	N	N	N	N	N

Permissions	Executive Level	Employee Service Rep
Update Benefit Documents	N	N
Manage Participants		
Search Participants <i>(Search participants and view the Coverage Details, Benefits, Payments, Billing, Subsidies, Audits, and Letters. Search Employees)</i>	Y	Y
Create and Delete Participants <i>(Create participants and delete participants before a letter is sent)</i>	N	N
Update Participants <i>(Edit Coverage Details, Benefits, Billing, Subsidies, and Audits. Able to create or cancel Letters, send Escalation Emails, create Employees, and delete auto recurring payments)</i>	N	N
Update Coverage Subsidies <i>(Add, edit, or delete participants' subsidies)</i>	N	N
Reports		
View Full SSN in Reports <i>(Can view full SSNs on reports)</i>	N	N
View Report Carrier Export <i>(View the Enrollment Communication and the Enrollment reports)</i>	N	N
View Report Disbursement Details <i>(View the Disbursement and Payment Details reports)</i>	N	N
View Report Employee Fields <i>(View Employee Fields on reports)</i>	N	N
View Report Employee Groups <i>(View Employee Groups on reports)</i>	N	N
View Report Notices Printed <i>(View the Letters reports)</i>	N	N
View Report Participant Details <i>(View the Participants reports)</i>	N	N
View Report Payments <i>(View the Payments reports)</i>	N	N
View Carrier Disbursement Summary	N	N
View Report Plans and Rates <i>(View the Plans and Rates reports)</i>	N	N
Miscellaneous		
Update Employer Users <i>(Create and edit Employer users)</i>	N	N

Appendix 2: Employer Portal Report List with Descriptions

REPORT NAME	REPORT DESCRIPTION
CARRIER COMMUNICATIONS WITH ENROLLEES	
COMMUNICATION DETAILS	<p>View communications with enrollees and the associated details.</p> <ul style="list-style-type: none"> • Filter by: created date range and employer group
COMMUNICATION IN QUEUE	<p>View all enrollee communications currently in the queue.</p> <ul style="list-style-type: none"> • Filter by: created date range and employer group
EMAIL STATUS	<p>View the email status, email used, and status details of carrier/enrollee emails.</p> <ul style="list-style-type: none"> • Filter by: created date range and employer group
SUPPRESSED COMMUNICATIONS	<p>View suppressed status enrollee communications with the suppressed reason and the enrollee's email status.</p> <ul style="list-style-type: none"> • Filter by: created date range and employer group
Disbursement and payment details	
BILLING PERIOD DETAILS	<p>View the billing periods that have been disbursed within a specific date range, and their associated details, for a participant.</p> <ul style="list-style-type: none"> • Filter by: disbursement date range
DISBURSEMENT DETAILS	<p>View the disbursements that have been disbursed within a specific date range, and their associated details, for a participant.</p> <ul style="list-style-type: none"> • Filter by: disbursement date range

Employees	
ACTIVE	View employees with a status of active . <ul style="list-style-type: none"> • Filter by: active
TERMINATED	View employees with a status of terminated . <ul style="list-style-type: none"> • Filter by: terminated
ENROLLMENTS	
ENROLLMENT CENSUS	View the enrollment for a specific billing due date range, and the associated details, for a participant. <ul style="list-style-type: none"> • Filter by: billing due date range
ENROLLMENT DETAILS	View a participant's enrollment for a specific billing due date range and the associated details. <ul style="list-style-type: none"> • Filter by: billing due date range and employee
TERMINATED PARTICIPANTS	View the enrollment for a specific billing due date range, and their associated details, for a participant who is terminated. <ul style="list-style-type: none"> • Filter by: billing due date range
LETTERS	
LETTERS SENT COUNT	View the letters, and their associated addressee details, sent out of wcc. <ul style="list-style-type: none"> • Filter by: send date range
Participants	
ELECTED AND ENROLLED	View the participant information for anyone whose status is 'elected' or 'enrolled'. <ul style="list-style-type: none"> • Filter by: include terminated and pending termination
PENDING ELECTION	View the participant information for anyone whose status is 'pending election'.

- **Filter by: include terminated and pending termination**

Appendix 3: Coverage Status and Examples

Potential participant COBRA coverage statuses. The participant's status can be found at the top of the general tab.

COVERAGE STATUSES	
STATUS NAME	DESCRIPTION
NEW	The participant has not elected coverage and does not have a last day to elect date (due to a manual override).
PENDING ELECTION	The participant has not elected coverage and the last day to elect has not yet passed.
ELECTED	The participant elected coverage but did not fully paid their first premium by the initial last day to pay date.
ENROLLED	The participant elected coverage and fully paid their initial premium by their initial last day to pay date.
PENDING TERMINATION	The participant has reached the projected termination date. Note that the projected termination date field is not seen on a screen but is a field available from the enrollments report.
TERMINATED	Eight (8) days have passed since the participant's projected termination date with no change to the participant's record (a payment was not added). The participant is no longer enrolled in any plan(s).