Meritain Health Employer Website User Guide

Meritain Health
An Aetna Company

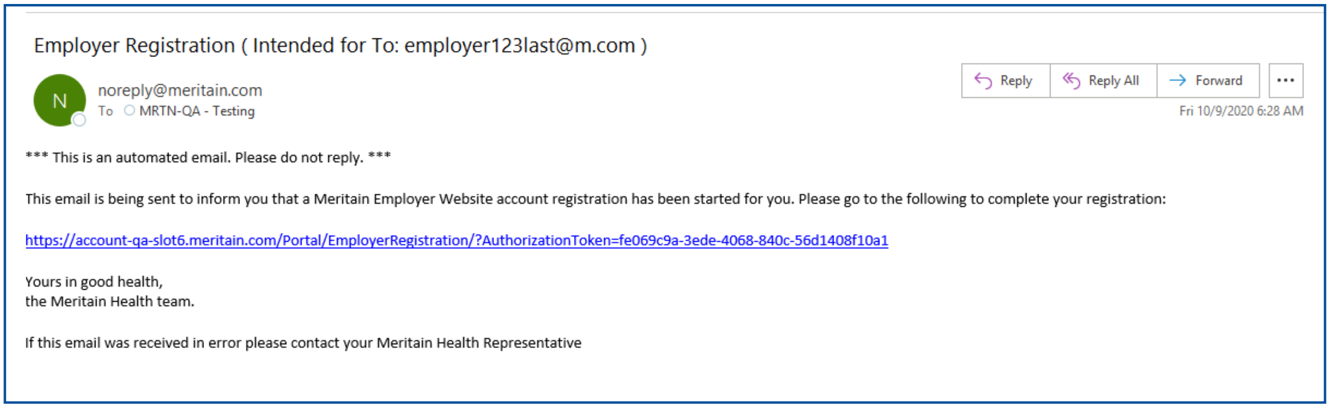
Contents

Introduction

Meritain Health® offers employers the ability to access account balances, claim information, member information, health coverage, drug and prescription information, and invoices. The employer website is your resource to manage your employee benefits plan. Meritain Health features may vary depending on access rights.

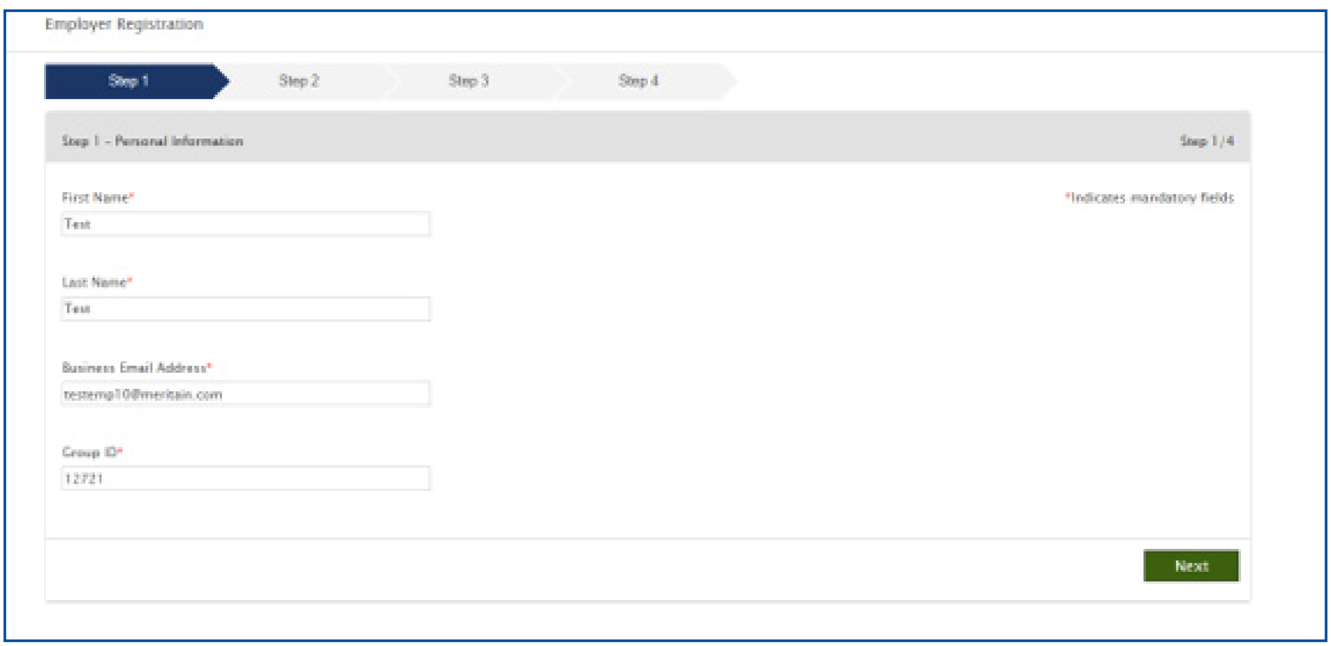
Registration

When a new employer is set up on the website, an employer user will be selected as an employer group representative—a Super User. A system-generated email will be sent to the employer user to register. Invitations to register remain active for 15 days. Once registered, the employer Super User is able to request accounts for other employees. Once requested, a system-generated email will be sent to the employer user to register as well, remaining active for 15 days. To register a user account, use the link located in the system generated email.

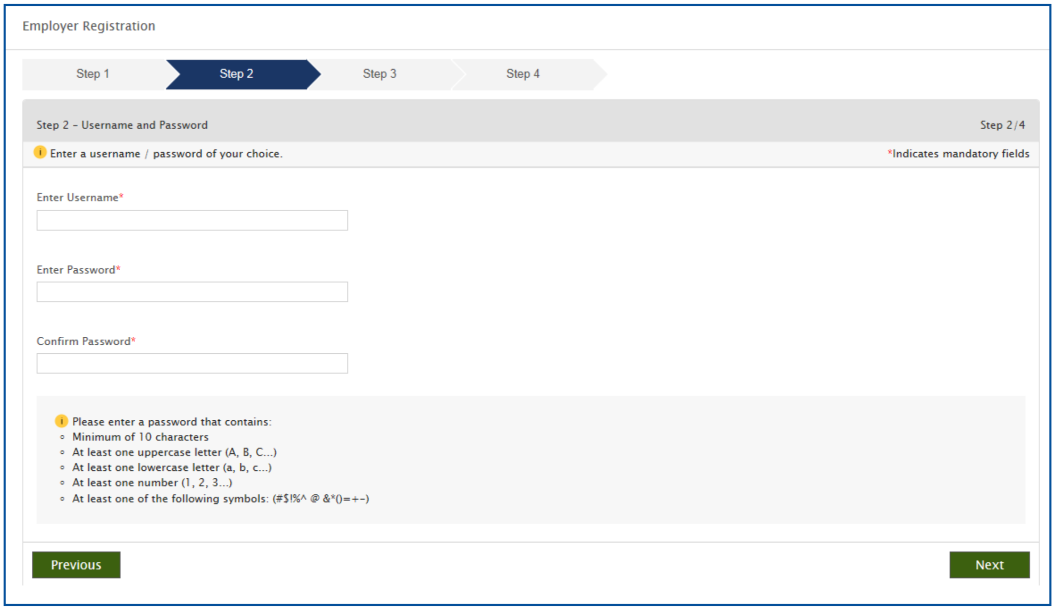


Please note: If you will be registering as both an employer user and member user for the account, you can use the same email address for both registrations. However, you will need to setup a different username and password for each.

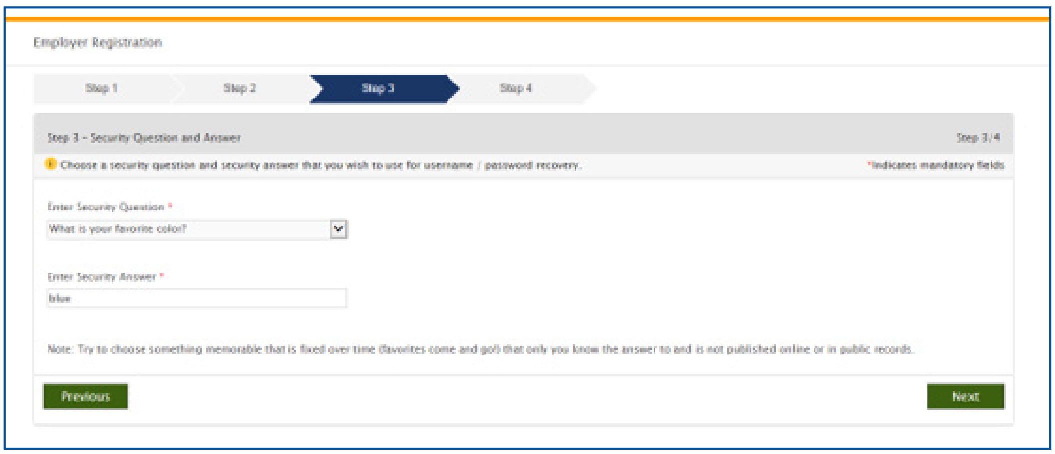
Step 1: Enter your personal information on the registration page and click *Next*.



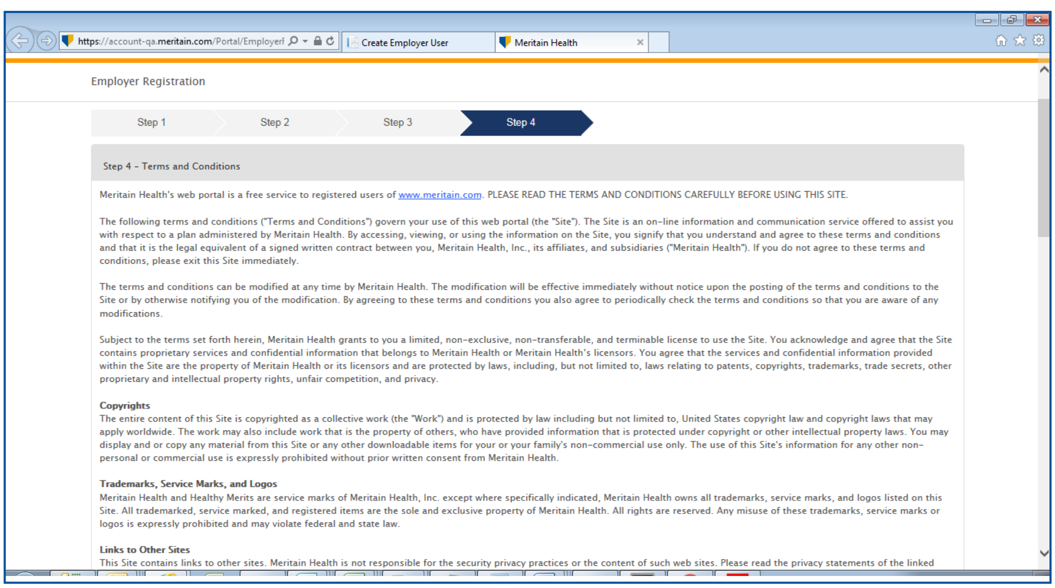
Step 2: Create your username and password.



Step 3: Choose and answer a security question.

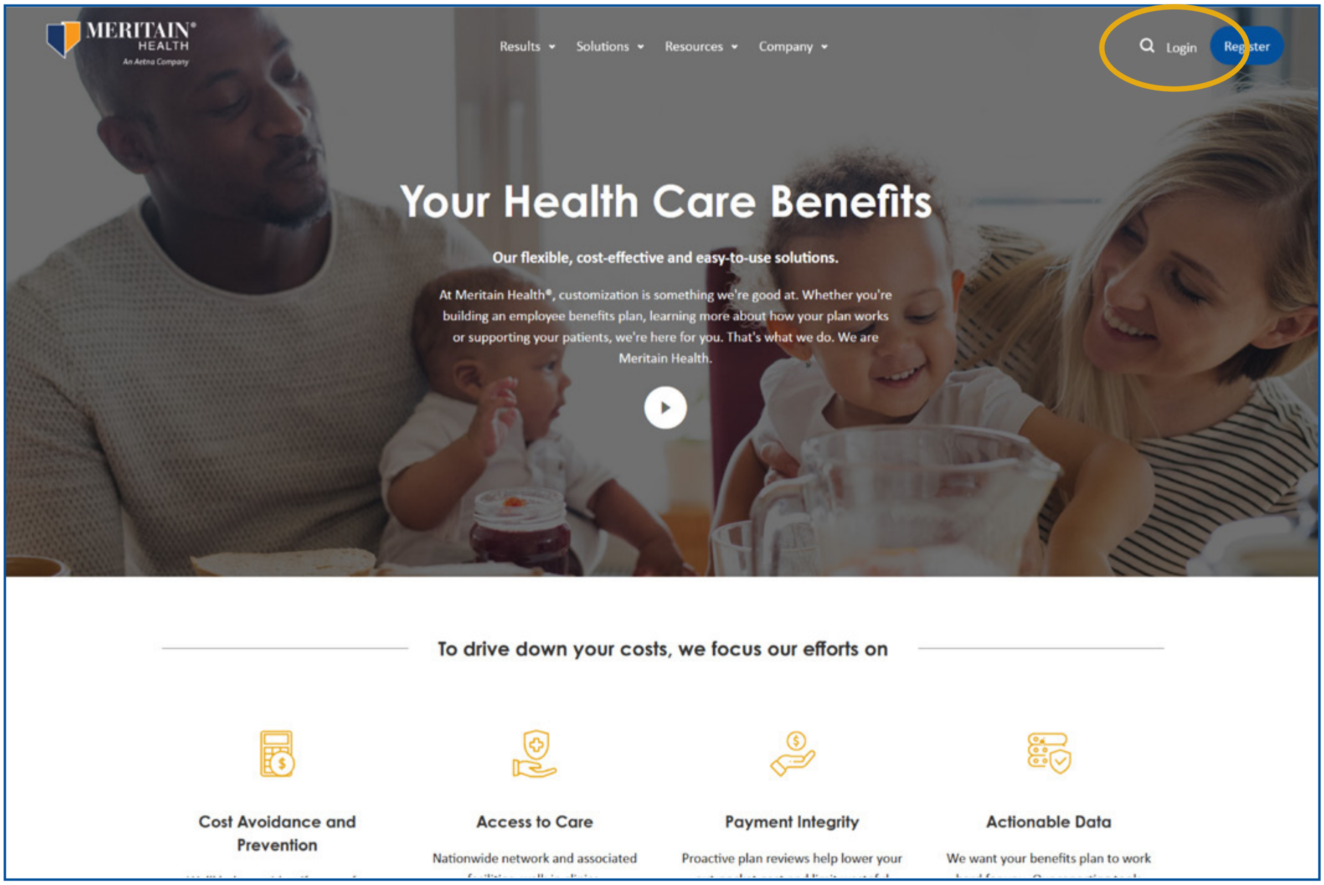


Step 4: Review terms and conditions.

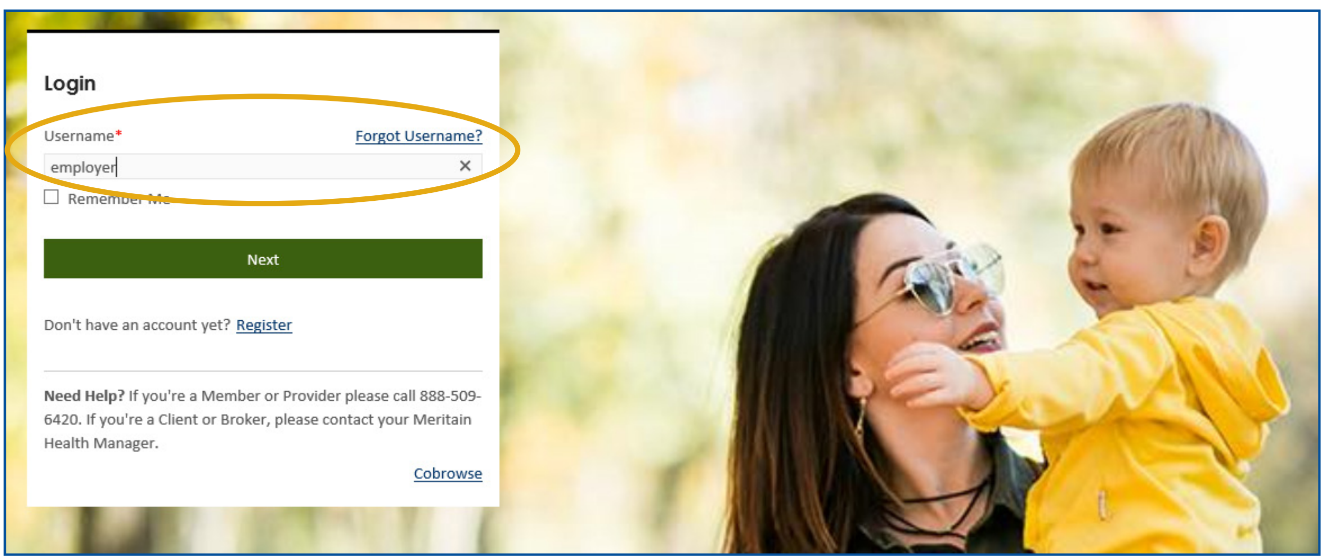


Logging In

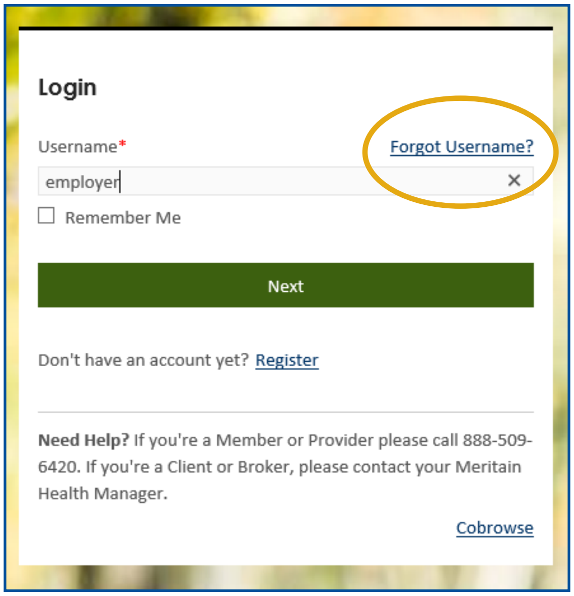
To log in, go to Meritain Health homepage at **www.meritain.com** and click *Login* in the upper right-hand corner of the page.



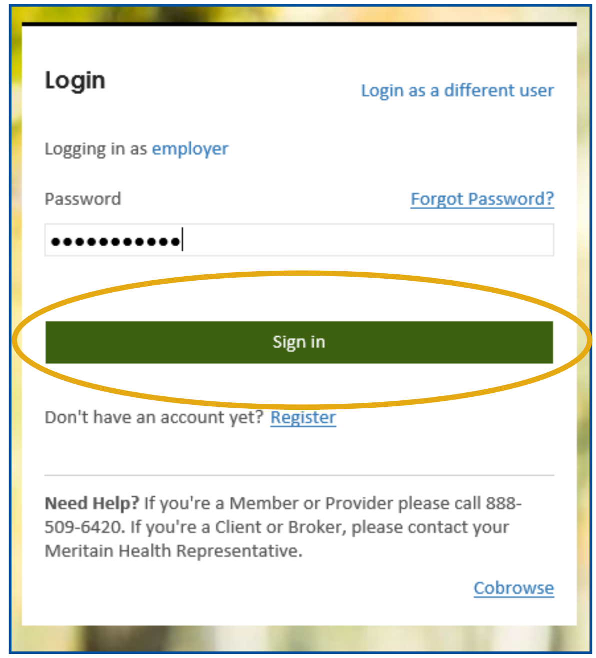
1. Enter your username in the *Username* field.



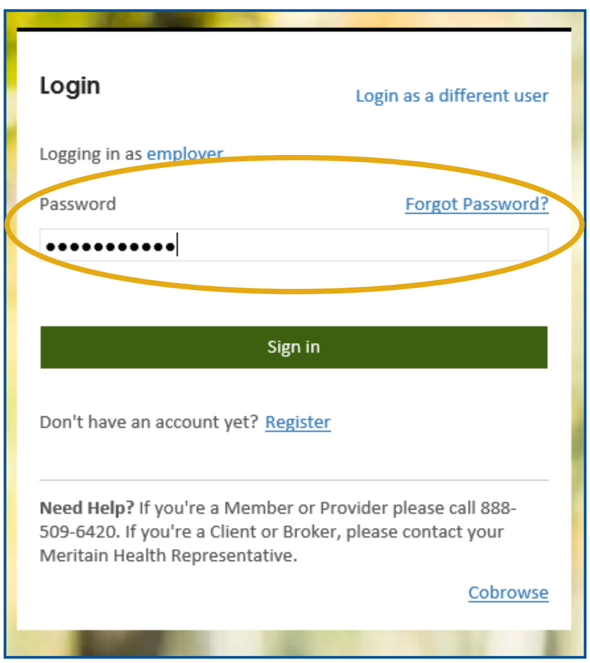
2. If you forget your username, simply click the *Forgot Username* link on the homepage and follow the prompts.



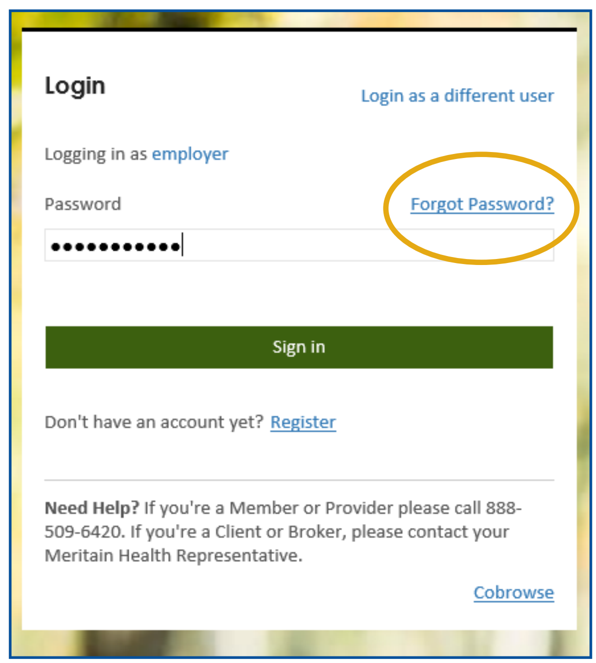
3. Enter your password in the *Password* field.



4. Then, click *Sign In*.

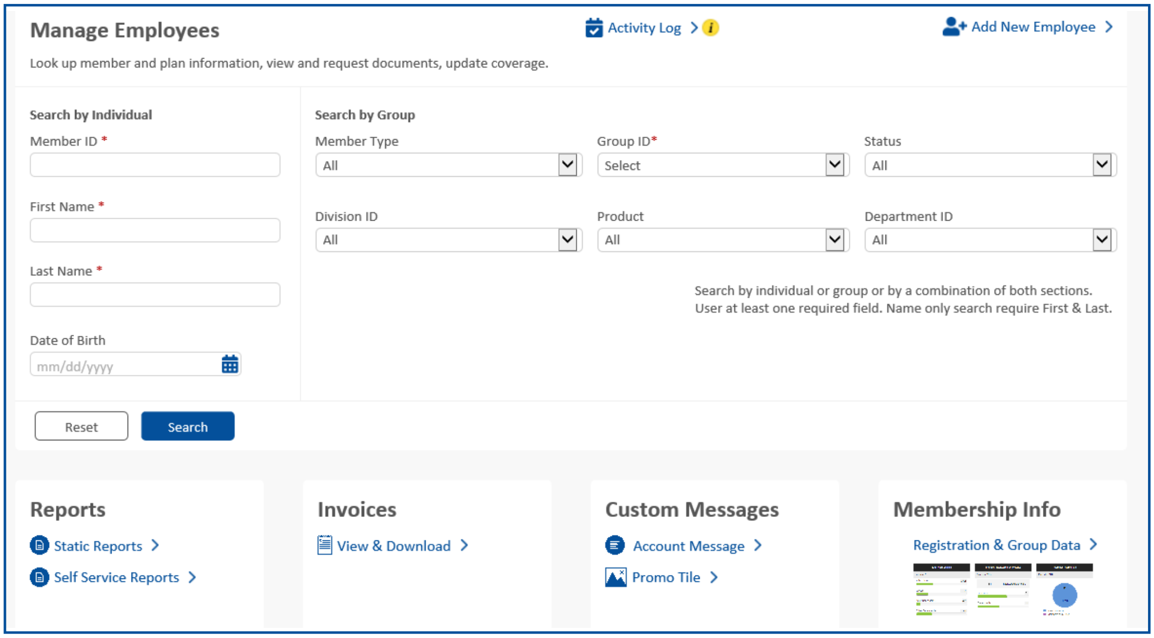


5. If you forget your password, simply click the *Forgot Password* link on the login homepage and follow the prompts.



The Landing Page

Our employer landing page allows you to easily manage your employee membership. Here you can search for a specific member, review your activity log or add a new employee.



The landing page also has quick links to resources employers use most, like reporting and invoicing. You can use the *Custom Messages* section to send messages to your members. The *Membership Info* area gives you a high-level overview of your plan membership.

Employer Website Flow

The website also includes drop-down menus for easy navigation.

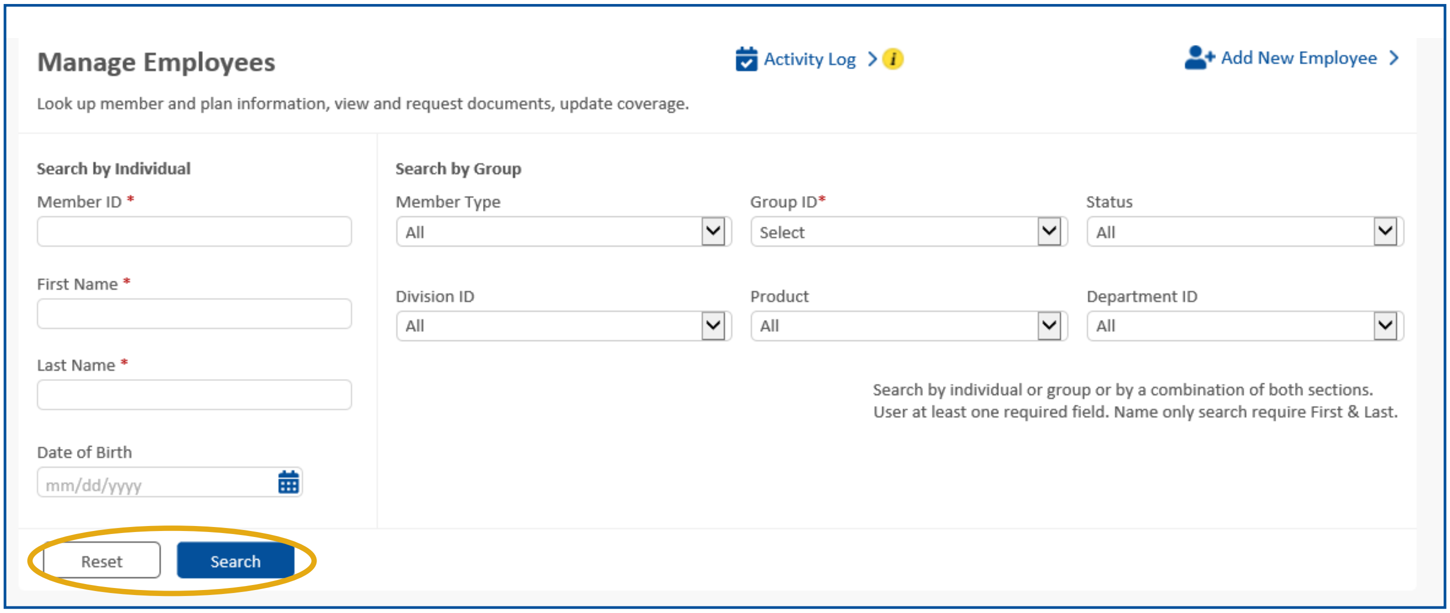
Employee Membership

The Meritain Health employer website is your one-stop-shop to easily find the benefits and eligibility information you need. You can find important member eligibility information, plus request and print ID cards, right on the employer homepage.

View Membership

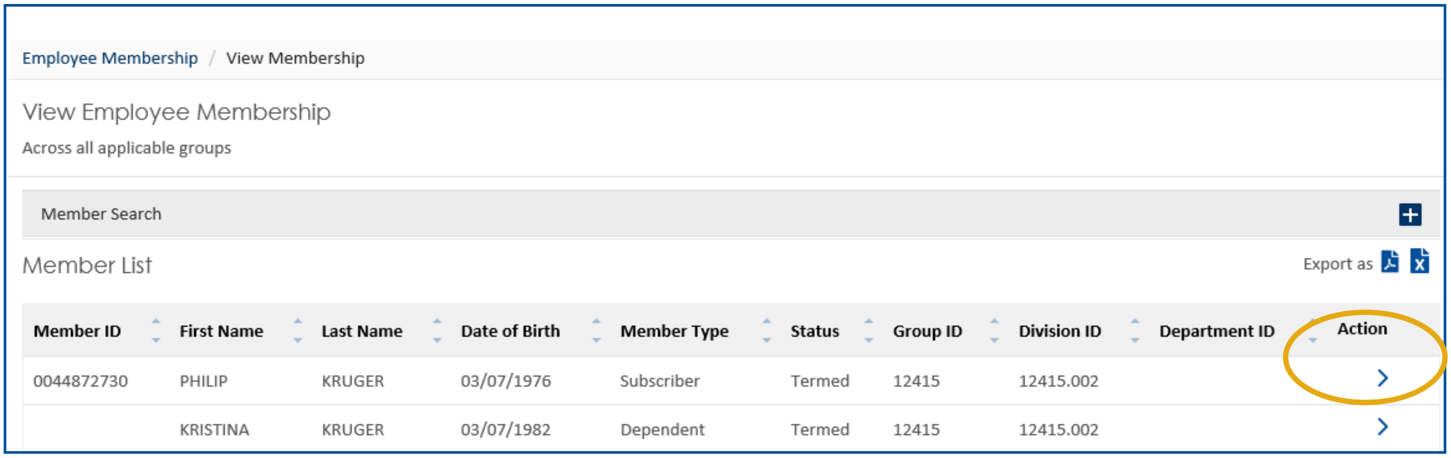
You can view employee membership information by going to the Manage Employees section right on the homepage.

Search for members by entering the member's ID, name or group ID and click *Search*. If you need to start over, simply click *Reset* to clear the form.

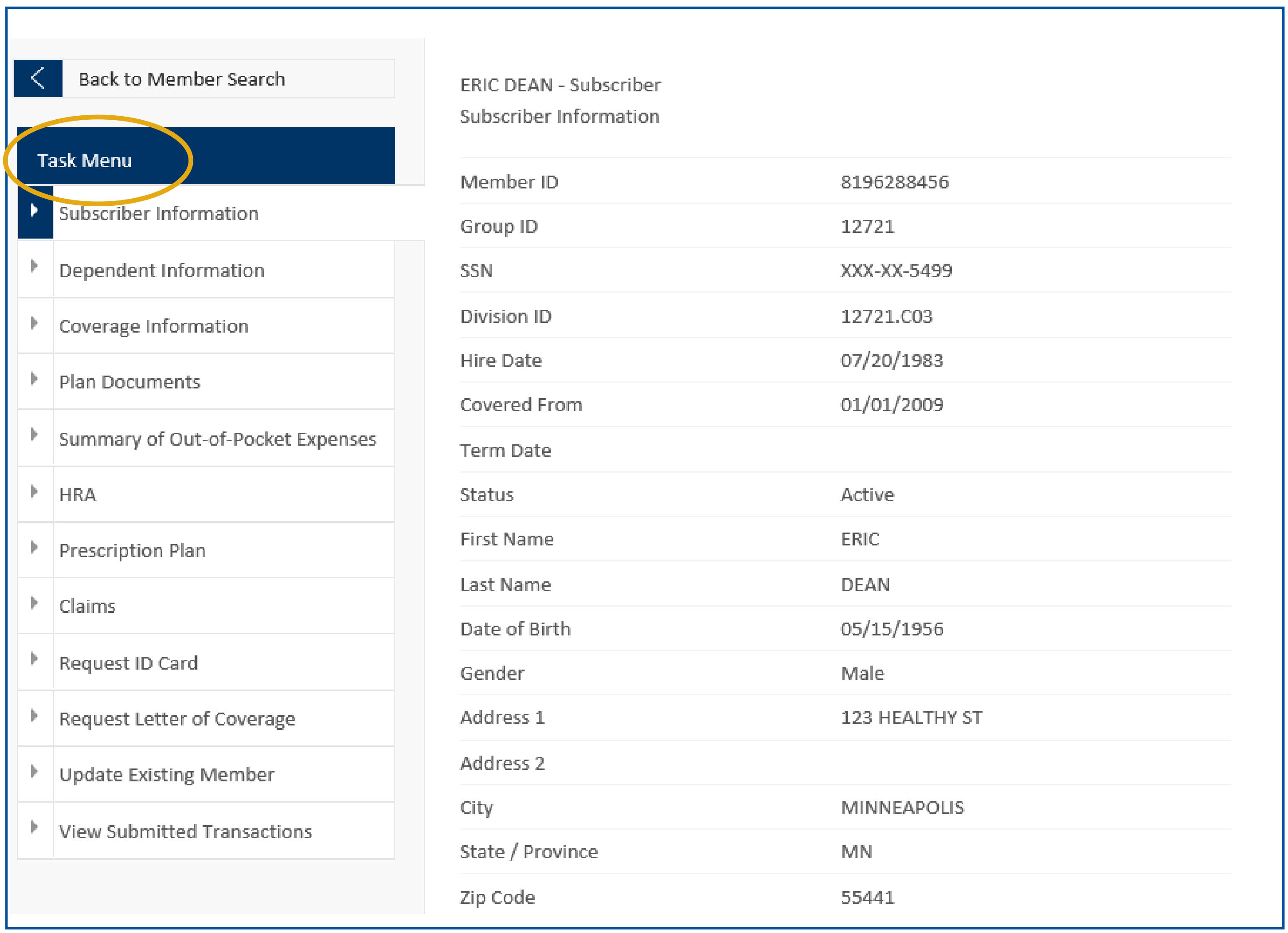


You can also go to the Employee Membership drop-down on the top toolbar and click *View Membership* to search for members enrolled in the plan.

To view specific information about a member, click the arrow under the Action column, next to the member's name. You'll arrive at a *Member Information* page that contains: **subscriber information, dependent information, coverage, plan documents** and more.



Use the *Task Menu* to navigate through employee records.



Task Menu

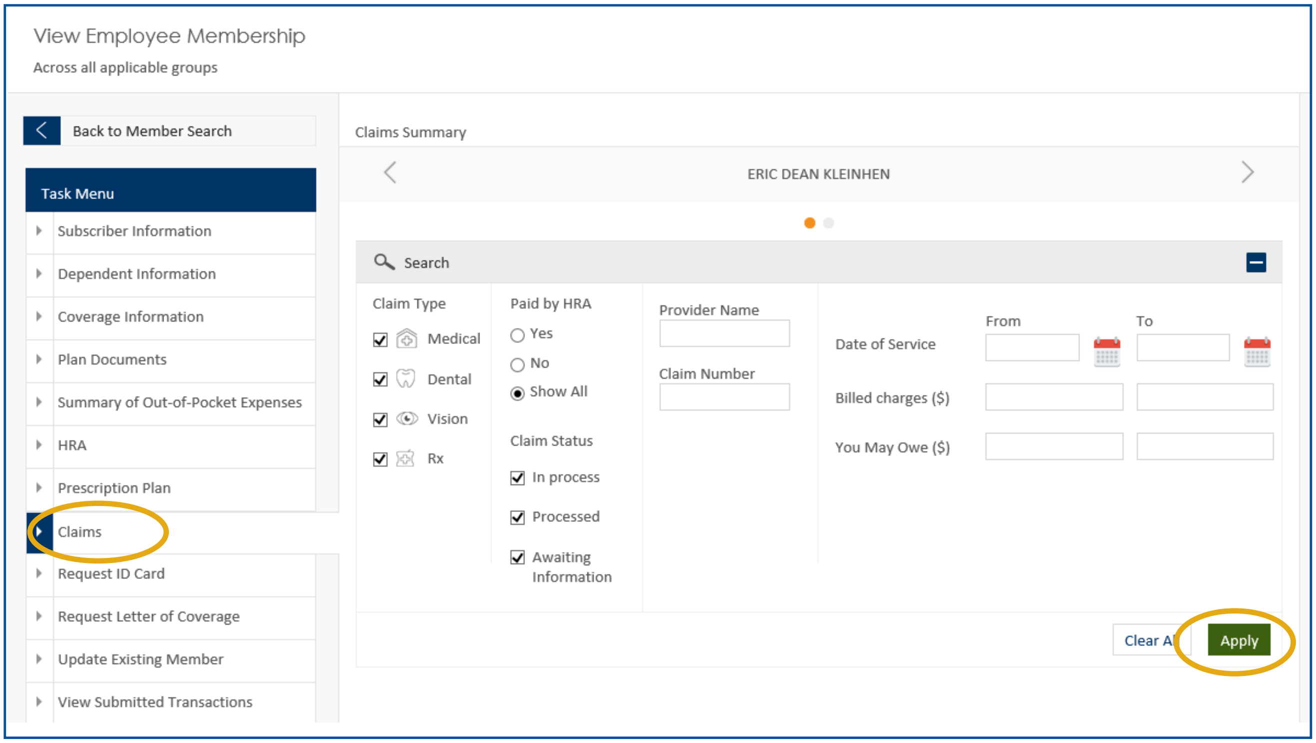
Subscriber Information	View demographics and ID numbers.
Dependent Information	Lists each dependent and their information.
Plan Documents	Links to documents for each plan.
Coverage Information	Lists both current and historical coverage information.
Summary of Out-of-Pocket Expenses	Graphs for tracking visit limits and out-of-pocket amounts for the plan and each member on the plan.
HRA	Health Reimbursement Account (HRA) is a type of U.S. employer-funded health benefit plan that reimburses employees for out-of-pocket medical expenses.
Prescription Plan	View prescription plan information.
Claims*	View details of processed and in-process claims and EOBs.
Request ID Card*	Request additional copies of an ID card.
Request Letter of Coverage*	Request a copy of a Letter of Coverage.
Update Existing Member*	Make demographic updates, changes in coverage, termination, COB updates.
View Submitted Transactions*	View transactions that have been entered or submitted to Meritain Health for processing.
* additional instructions are included in this document.	

Claims

You can view both in-process and processed claims for members enrolled in your benefits plan. Start by using the *Manage Employees* form on the homepage to access employee records.

You can also go to the Employee Membership drop-down on the top toolbar and click *View Membership* to search for members enrolled in the plan.

Click on *Claims* on the *Task Menu* to the left. The claims summary page will appear. Narrow your search by using claim type, claim status or, date of service or click the *Apply* button for a list of claims.

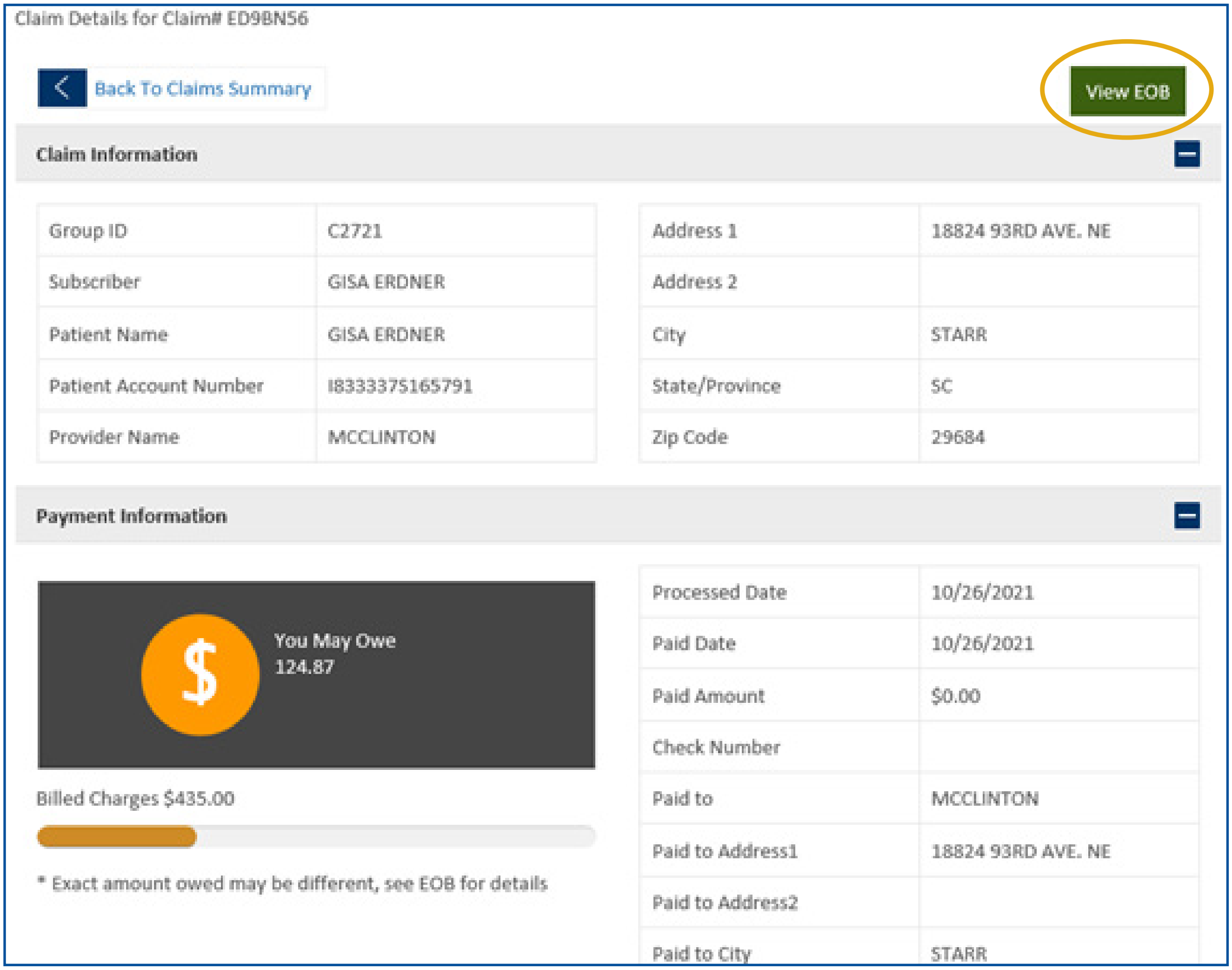


If you would like to view a claim from the list, click the *View link* next to the claim.

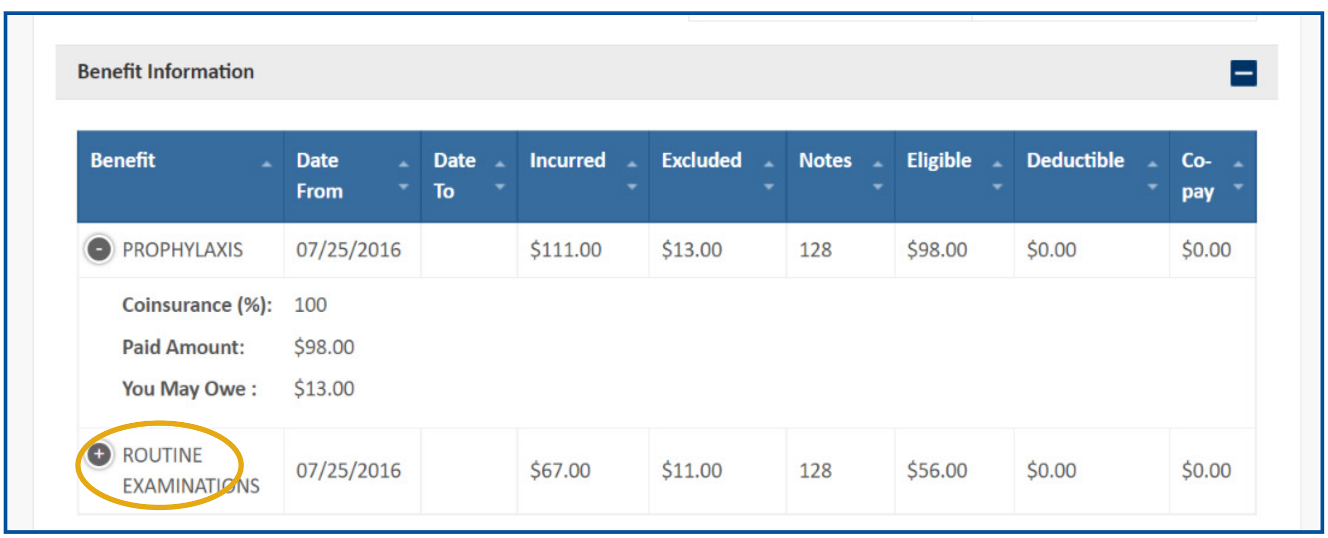
Claim Status	Claim Type	Provider Name	Date of Service	Claim Number	Billed Charges	Patient Responsibility	Details
Processed	Medical	SHIFLER DEALTON	07/25/2016	MGF3403	$178.00	$24.00	View
In Process	Medical	QULLIA GALES	02/01/2018	BZ85769	$215.00	i	View

i Information not available until claim completes processing.

To view an EOB, click the green *View EOB* button.



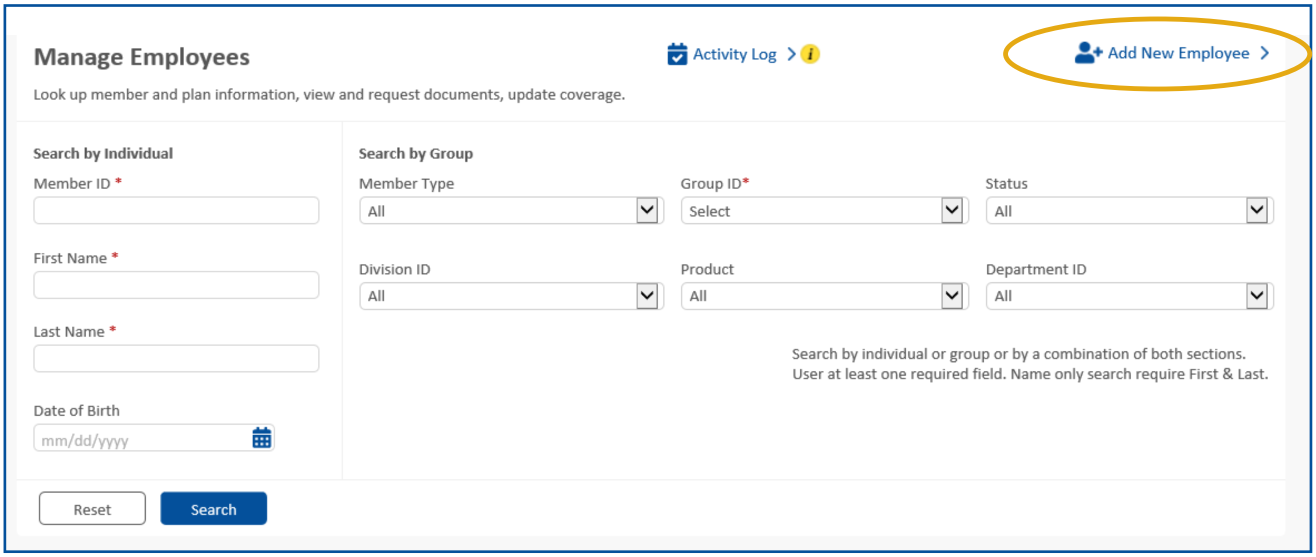
To view more details about each line on the claim, click the + in the Benefit column:

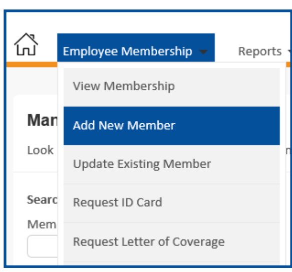


Add New Member

In this section, you can add a new employee to your plan and any dependents. You'll also be able pick products they can access with their plan coverage.

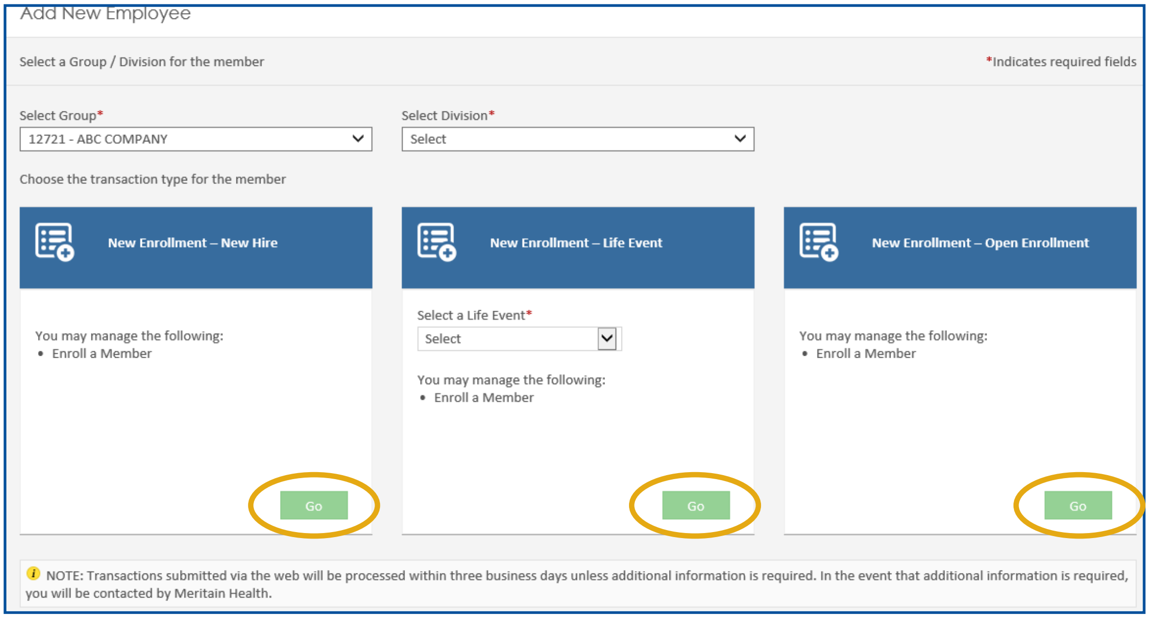
To get started, click on the *Add New Employee* link on the homepage.



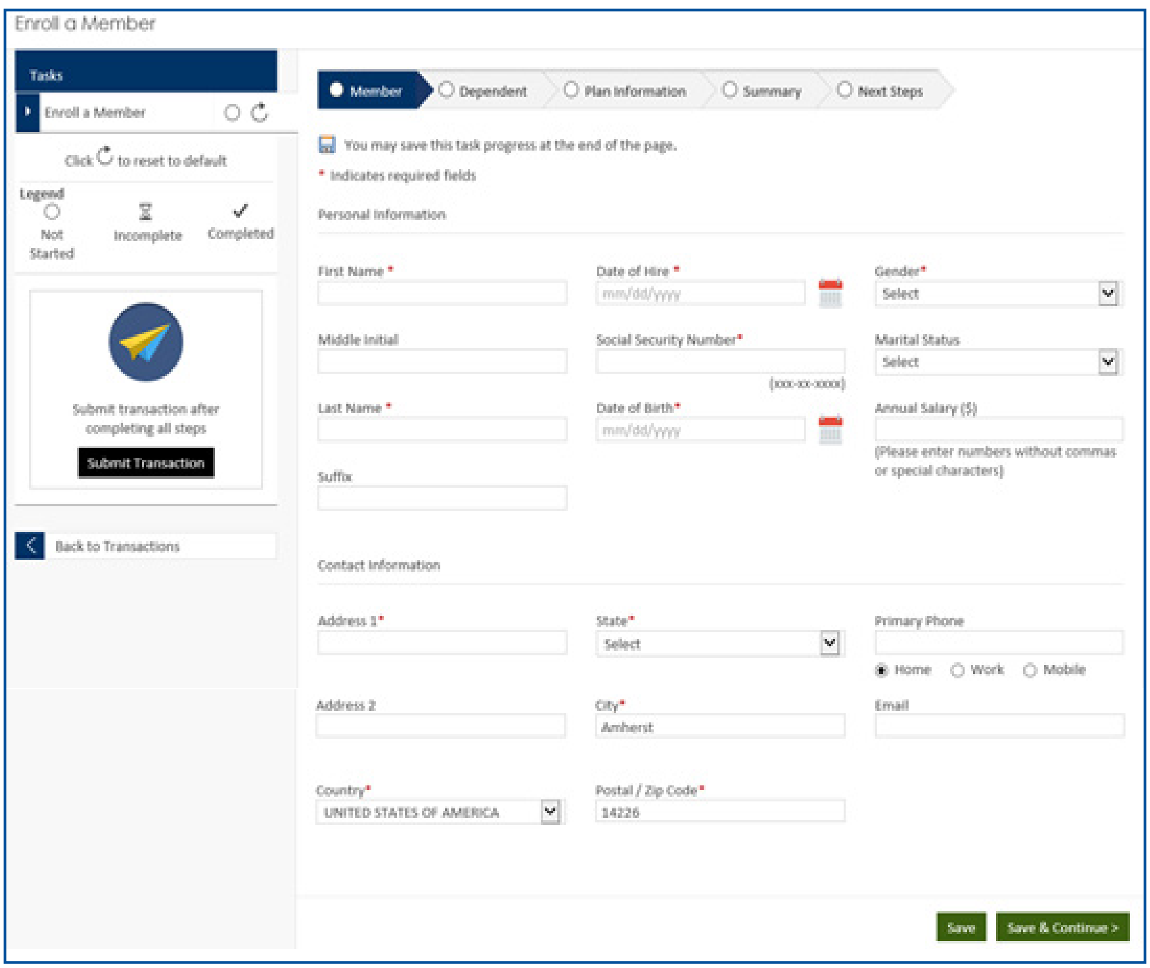


You can also go to the Employee Membership drop-down on the top toolbar, and click *Add New Member* to enroll members in the plan.

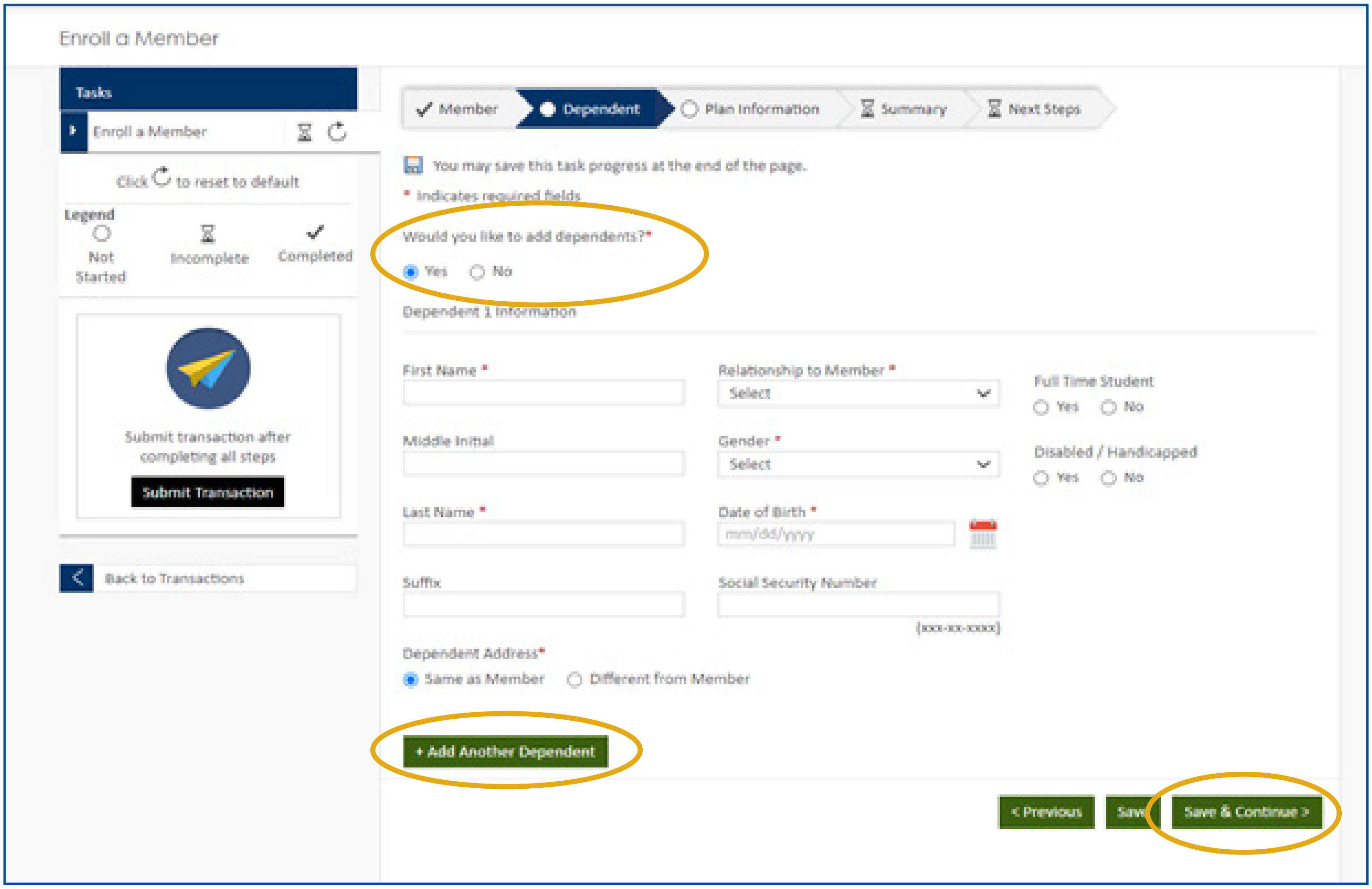
Select a Group and Division from the available choices in each of those drop-down fields. Next, choose from three different options: *New Hire, Life Event or Open Enrollment*—depending on the situation. Once you've made your selection, click the green *Go* button.



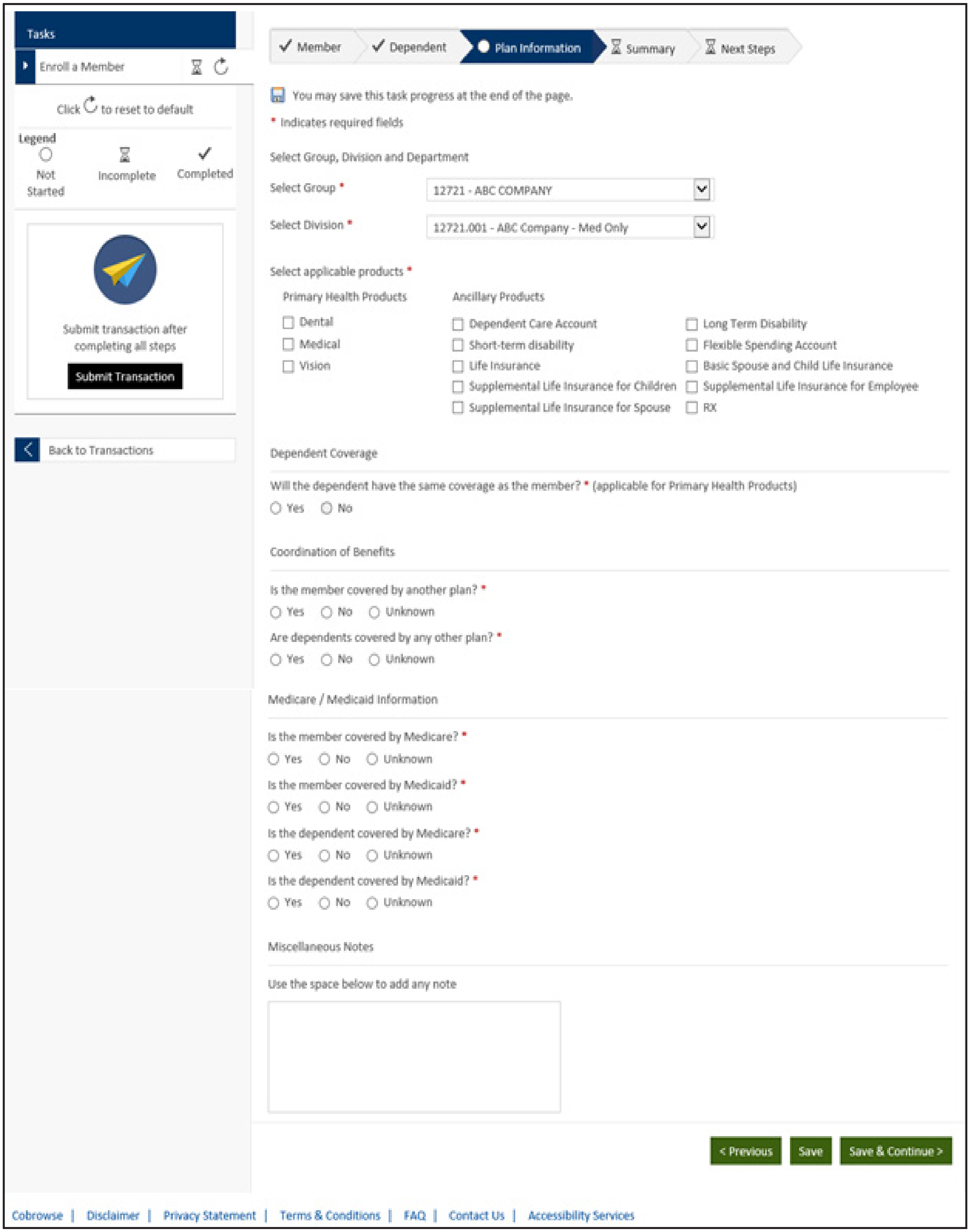
A progress bar at the top of the screen will guide you through the enrollment process. The system will prompt you if additional information is needed.



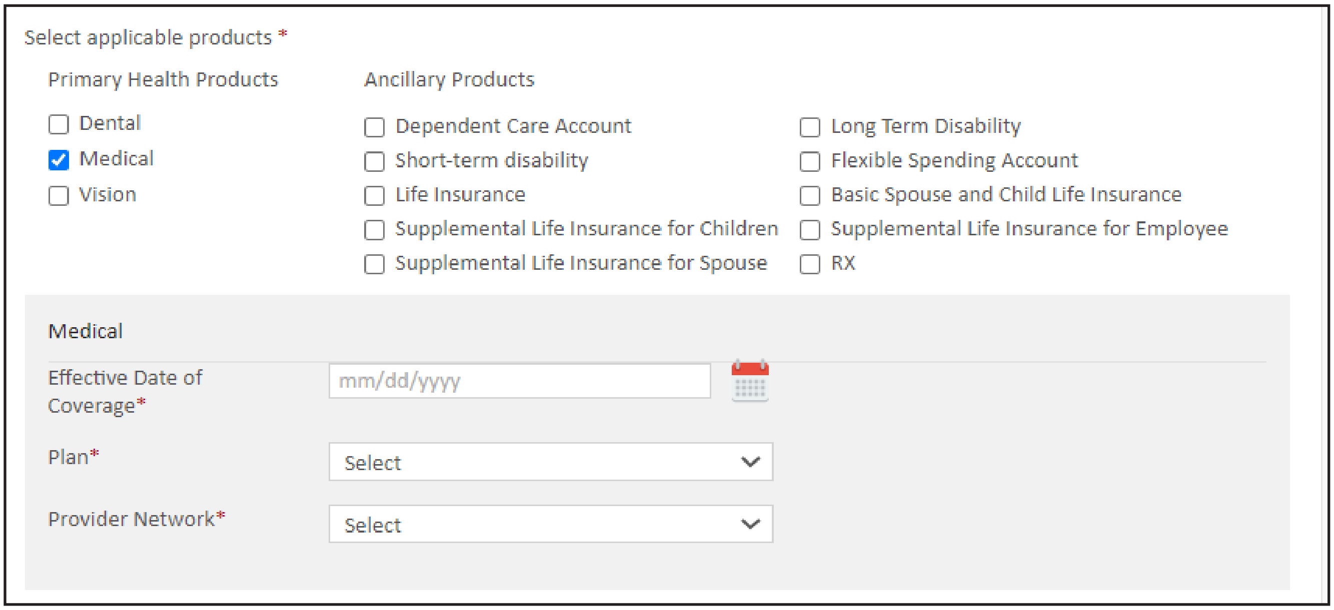
Under the Dependents tab, click *Yes* if you need to add dependents. Enter each required field, indicated with a red asterisk. Use the *Add Another Dependent* button to open additional forms for each dependent on the plan. If you're not adding dependents, click *No*. When finished, click *Save and Continue*.



Enter all applicable information on the Plan Information tab. Required fields are marked with a red asterisk. Additional fields may appear, based upon your answers.

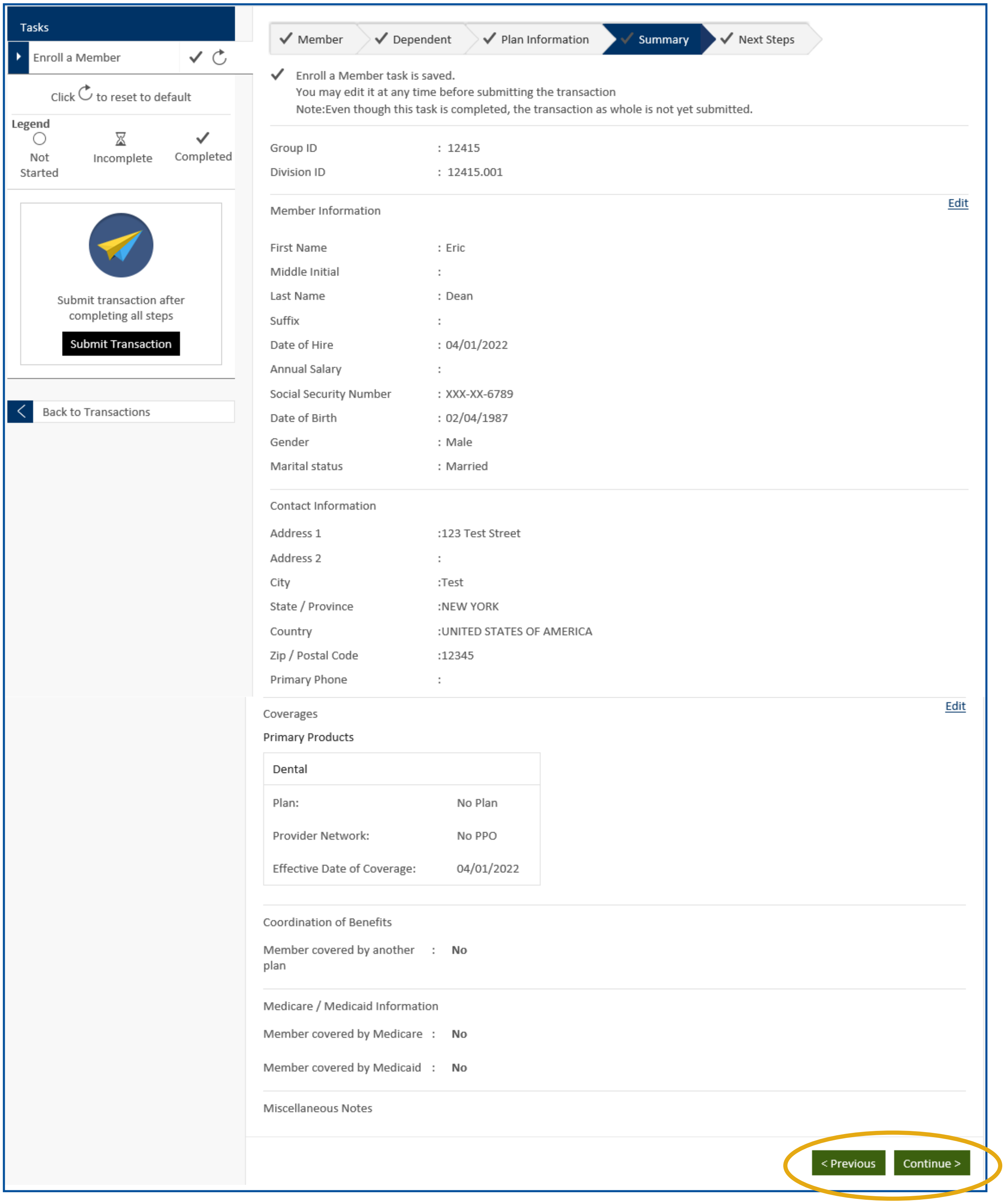


As you assign benefits, additional fields will become available. Depending on the setup needs for your group, the Plan and/or Provider Network fields may not require entry. If this is the case, the fields will be locked so no selection can be made. (This is expected and you can move to the next section.)

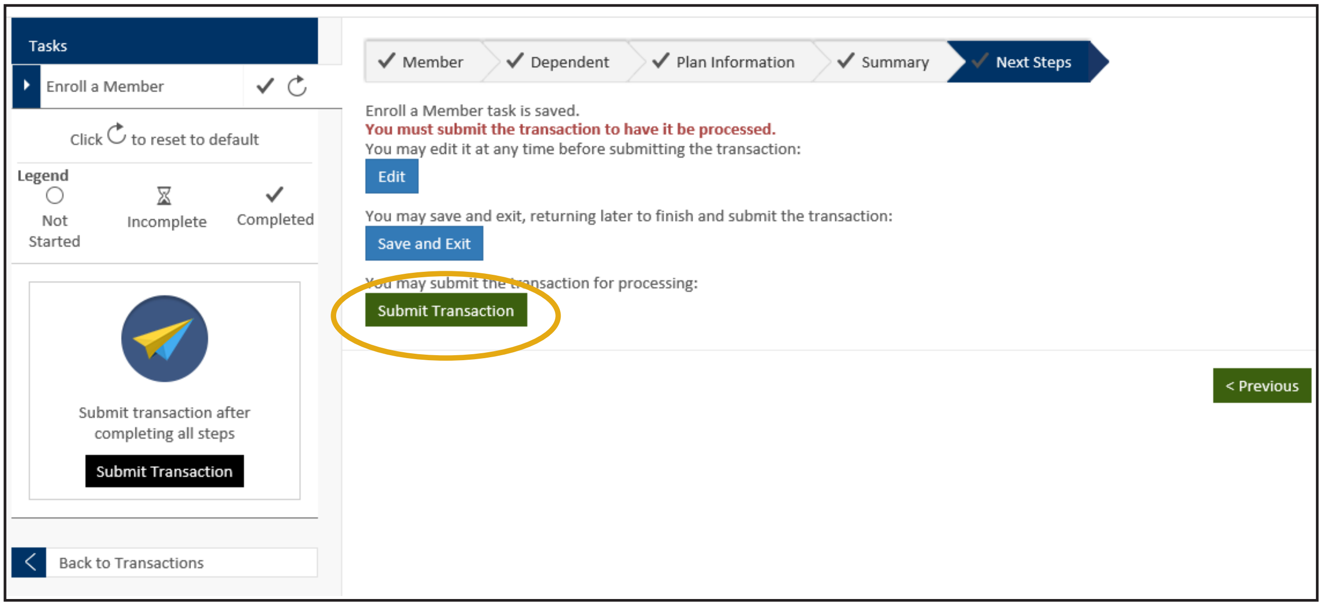


Once you choose an answer under Coordination of Benefits, be sure to mark all corresponding fields that appear.

The Summary page lists all information you've entered. If this looks good, click *Continue*. If you need to make changes, click *Previous* to go back and edit.

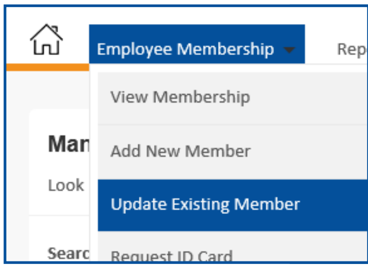


On the *Next Steps tab*, click the green *Submit Transaction* button then click *Yes*. You will receive a successful message and a transaction ID number. **Please note:** It can take up to three business days to process your transaction before you notice members you added within your website. The *Save and Exit button* does not send the transaction to Meritain Health. It saves the entered information in a saved queue for completion and submission later.



Update Existing Member

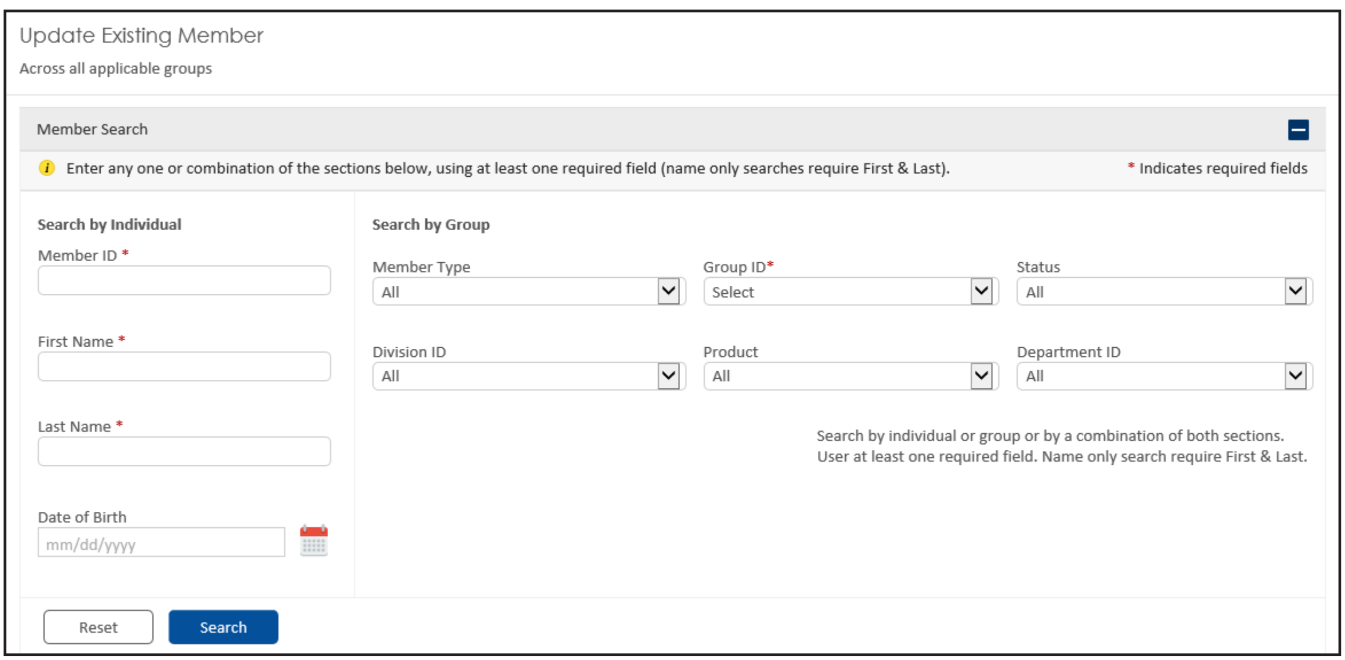
Several options are available for updating the records or coverage of existing member and their dependents. Access an employee record using *View Membership* from the landing page.



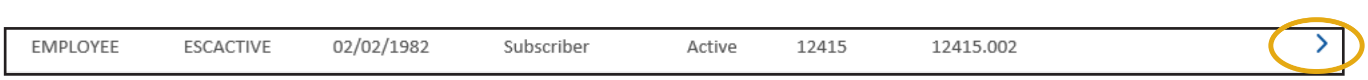
From the Employee Membership drop-down on the top toolbar, and click *Update Existing Member.*

The following updates are available:

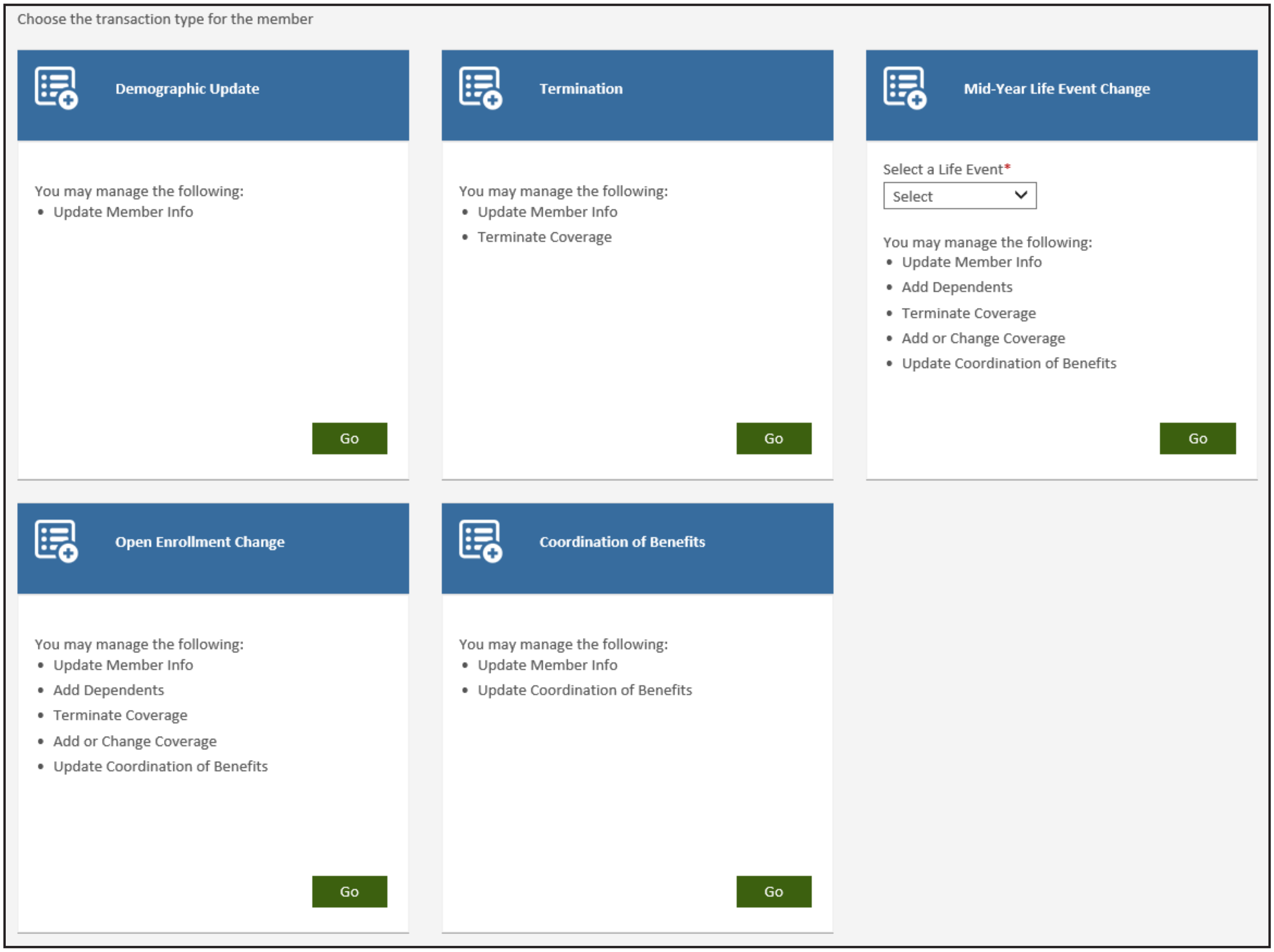
Demographic Update	Update name, address, date of birth, phone and email for a subscriber and dependents.
Termination	Ending coverage for member and/or dependents and remove coverage due to a termination of employment.
Mid-year Life Event Change	Add, change or terminate coverage for members or dependents based on events like adoption, marriage, or loss of coverage.
Open Enrollment Change	Make open enrollment corrections and division changes.
Coordination of Benefits	Record other insurance information for members and their dependents.



Next, click *Select* next to the member's name.

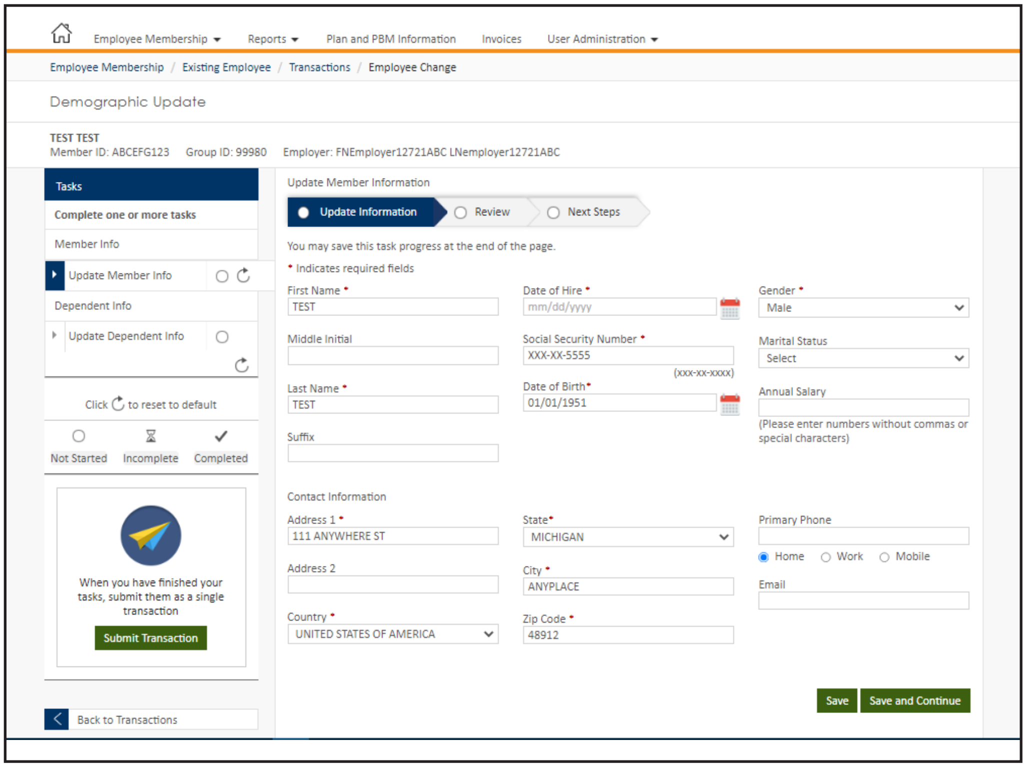


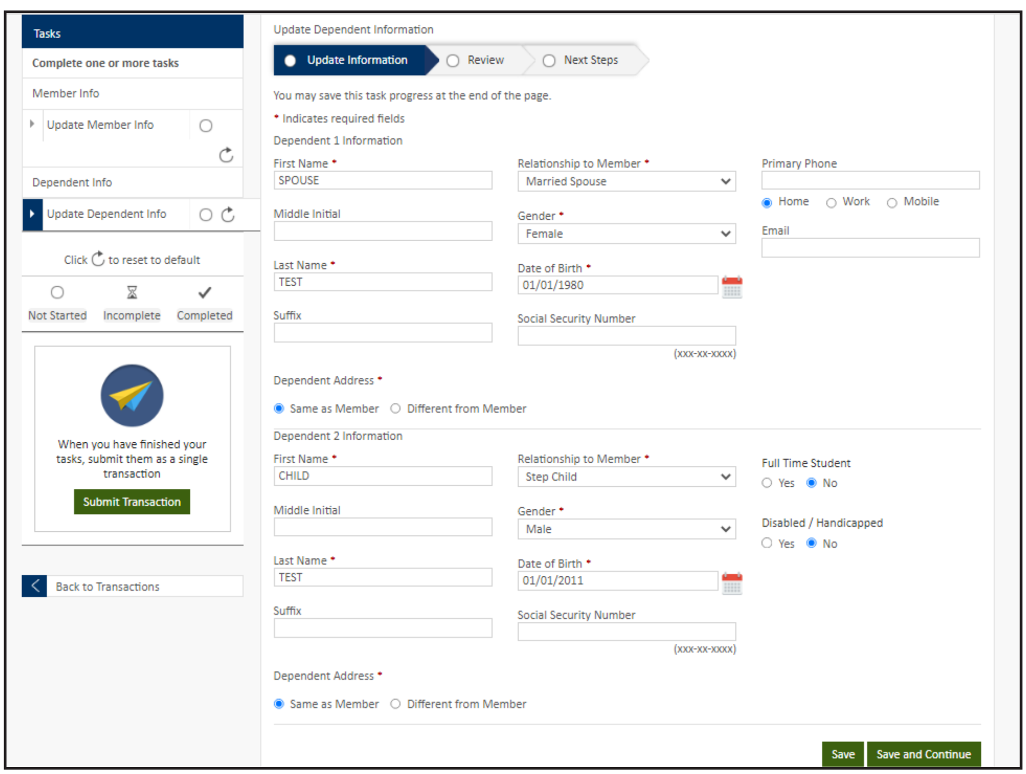
Select the transaction type you would like to update for the member.



Demographic Update

1. Enter updated information for the member in the form. Click *Save and Continue*.
2. Use *Update Dependent Information,* in the left-side task bar to update dependent information.
3. Click Submit Transaction in the left-hand task bar, or continue to *Next Steps* and click *Submit Transaction*.
4. Confirm submission and receive a *Success* confirmation and transaction ID number.

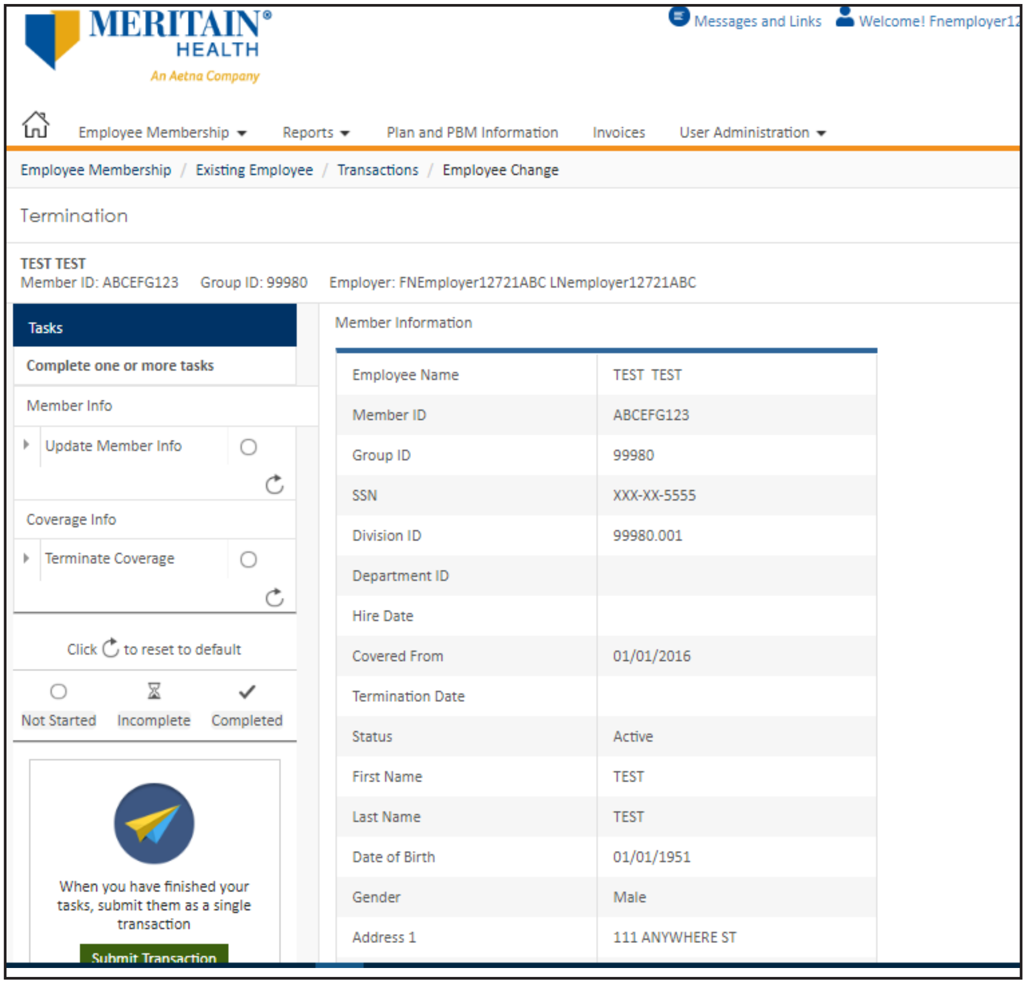




Termination

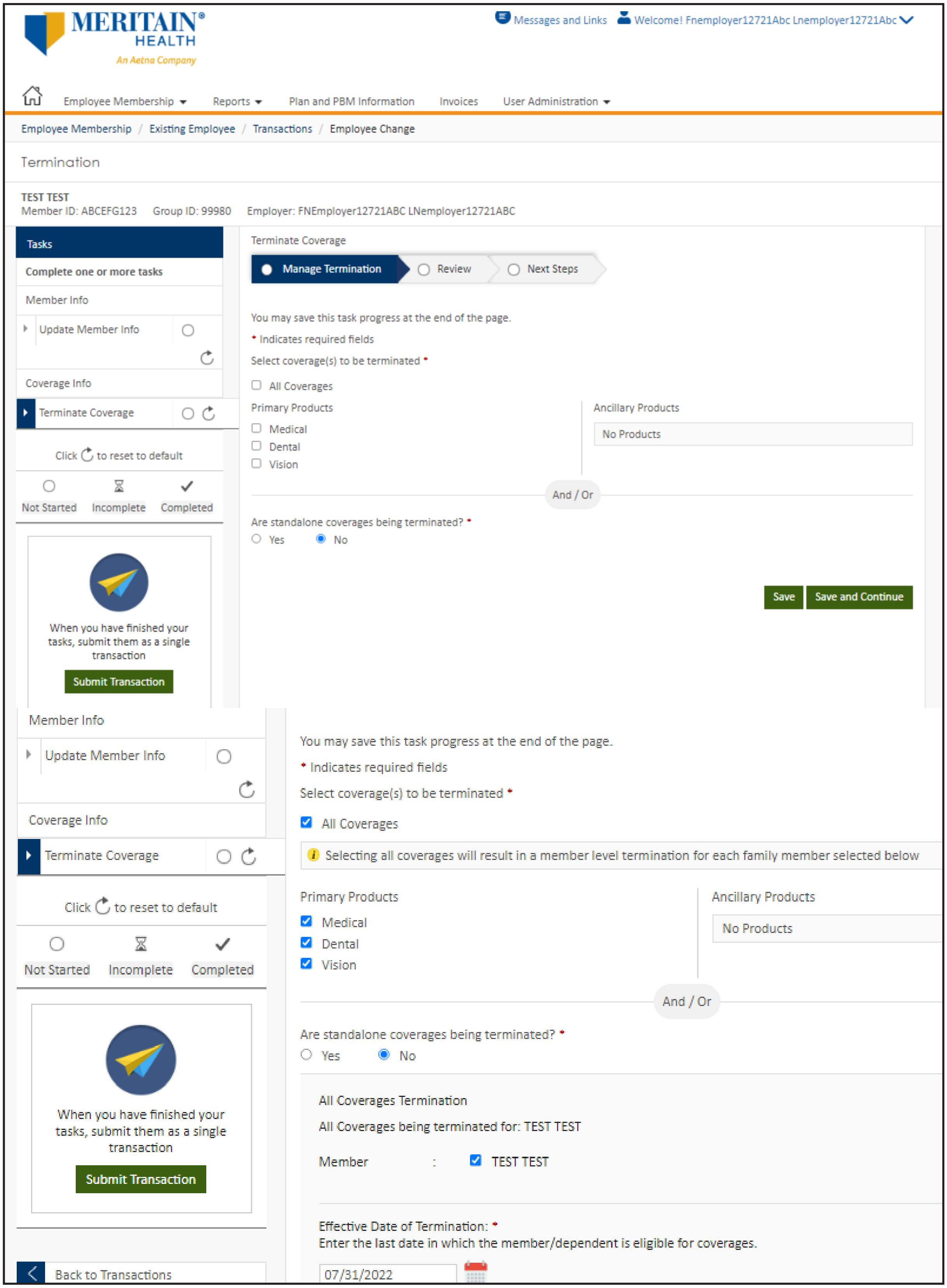
Remove coverage due to termination of employment.

1. To terminate members or coverages, select the Termination transaction type.
2. From the Task menu on the left, select the task to *Terminate Coverage* and/or *Update Member Info* which will allow updates to demographic information. Click *Terminate Coverage* to initiate the termination process.



3. You can check the box to terminate all coverages, or select individual products to terminate.
4. **Please note:** The Terminate Coverage task is the same across transaction types. Whether you attempt to terminate coverage using the *Termination*, *Mid-year Life Event Change*, or *Open Enrollment Change* transactions types, the steps described below will apply.
5. Once the products are selected you'll see a question about standalone products. This question will always default to *No* but can be changed to Yes by the user if the group has applicable standalone products to terminate (*the standalone process is detailed at the end of these steps.*)

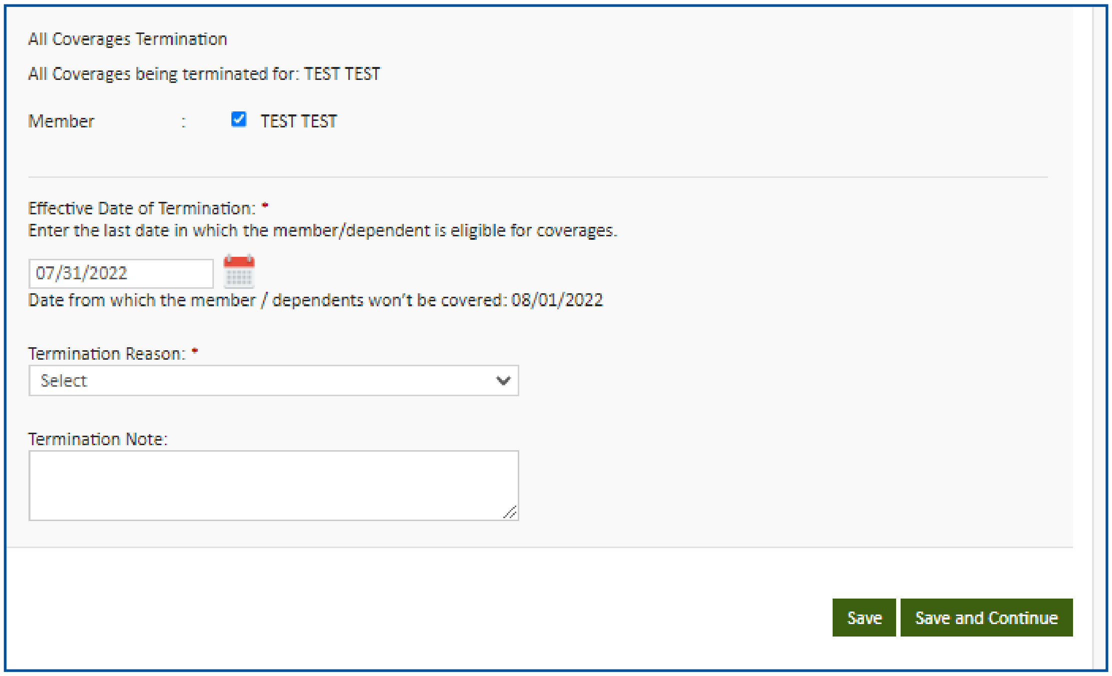
6. Next, confirm the termination, which will terminate the member and any existing dependents, or you opt to only terminate dependent(s).



7. Input the effective date of termination. You can manually enter the date, or click on the date picker icon to select a date.

8. Please note that the effective date entered in this field should be the date from which the member/dependents won't be covered. For example. If 7/31/2022 is used, this will mean that as of 8/1/2022, the member will no longer have coverage.

9. Select the applicable *Termination Reason* from the drop-down list. **Please note:** when terminating a dependent only, the list of Termination Reasons will only display dependent applicable termination reasons.


All Coverages Termination

All Coverages being terminated for: TEST TEST

Member : TEST TEST

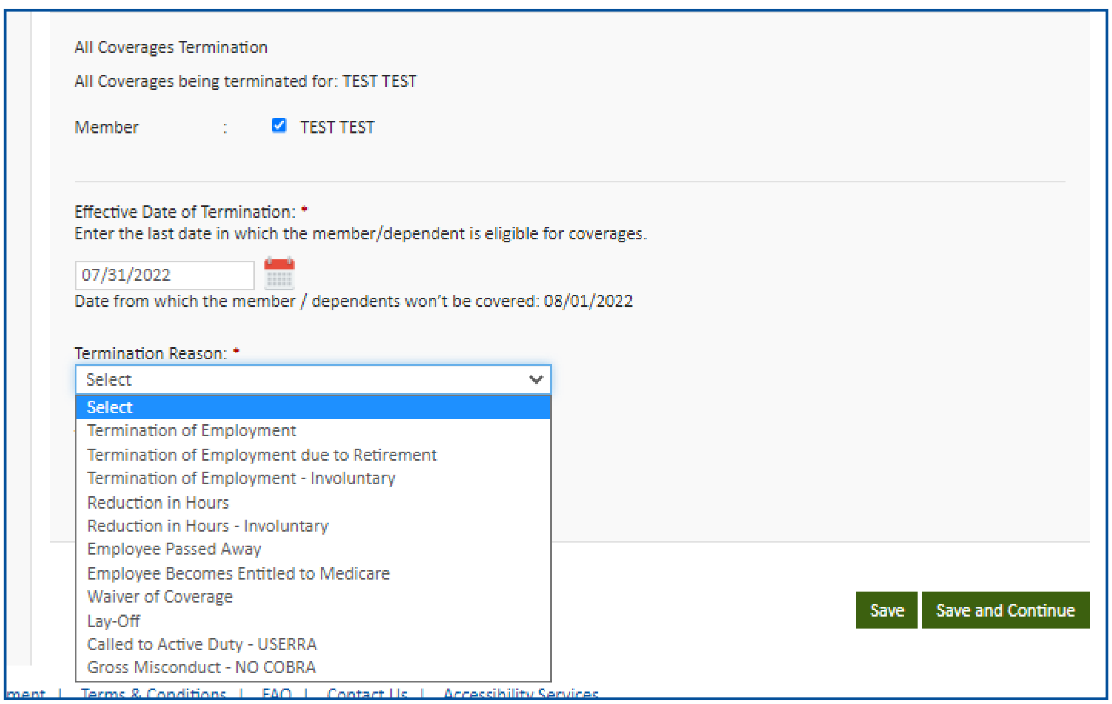
Effective Date of Termination: *
Enter the last date in which the member/dependent is eligible for coverages.

07/31/2022
Date from which the member / dependents won't be covered: 08/01/2022

Termination Reason: *
Select

Termination Note:

Save
Save and Continue


All Coverages Termination

All Coverages being terminated for: TEST TEST

Member : TEST TEST

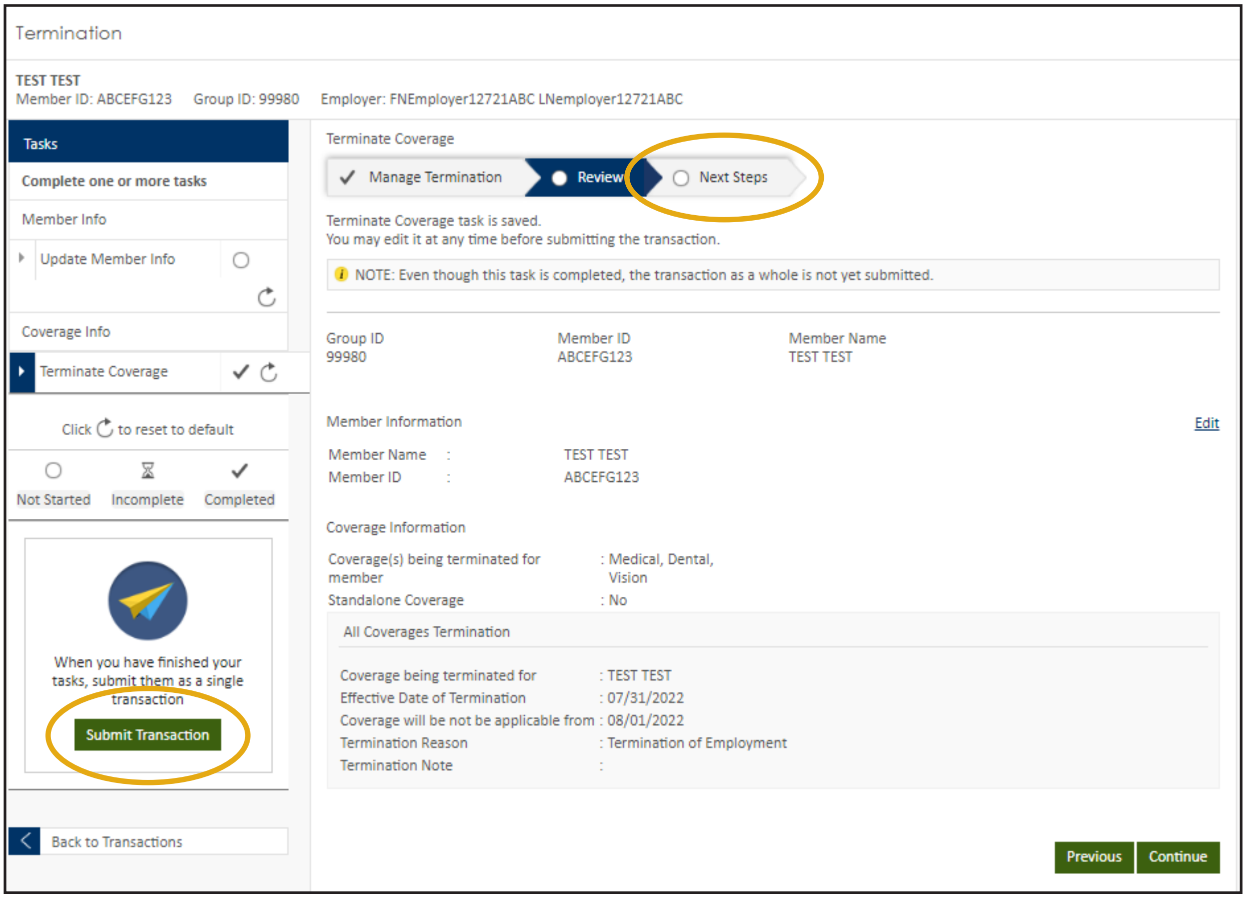
Effective Date of Termination: *
Enter the last date in which the member/dependent is eligible for coverages.

07/31/2022
Date from which the member / dependents won't be covered: 08/01/2022

Termination Reason: *
Select

Select
Termination of Employment
Termination of Employment due to Retirement
Termination of Employment - Involuntary
Reduction in Hours
Reduction in Hours - Involuntary
Employee Passed Away
Employee Becomes Entitled to Medicare
Waiver of Coverage
Lay-Off
Called to Active Duty - USERRA
Gross Misconduct - NO COBRA

Save
Save and Continue

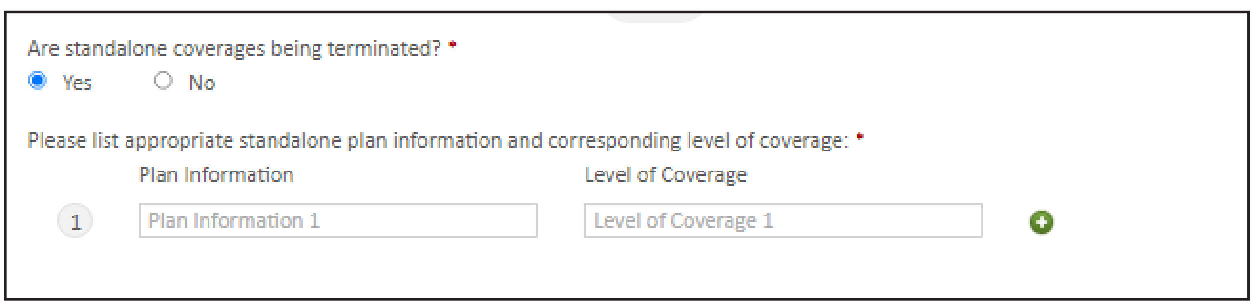


10. Use the Task menu to complete related tasks and use *Submit Transaction* to submit multiple tasks as a single transaction. A *Submit Transaction* button is also available in the Next Steps tab.

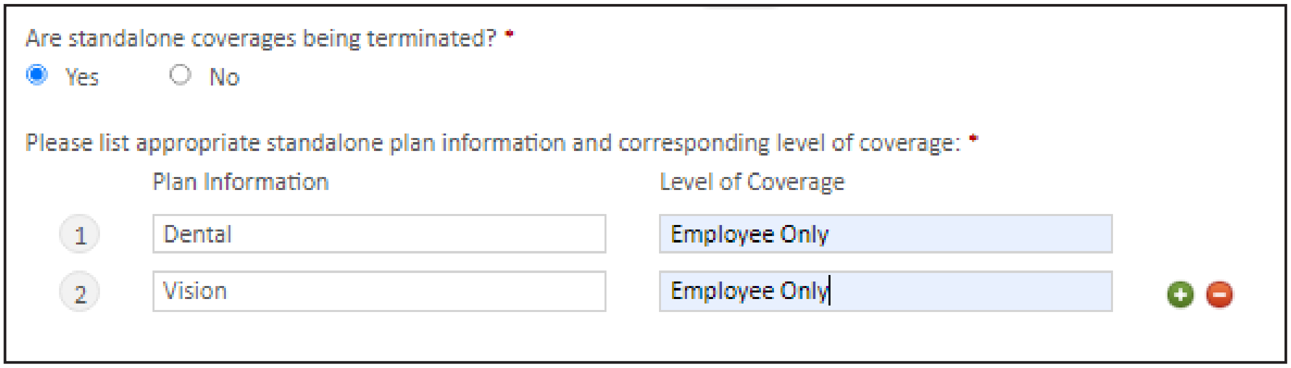
11. Users will confirm submission and receive a success message.

Terminations with Standalone Coverage

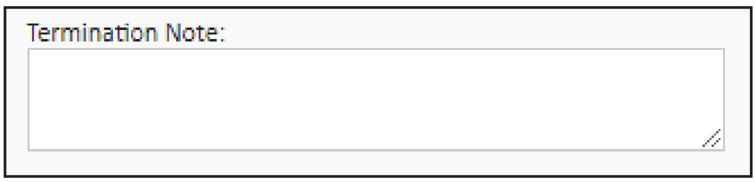
- When Meritain Health administers standalone COBRA for a client, you'll need to notify Meritain Health of any standalone benefits at termination. Users can do this by clicking *Yes* to the standalone question.
- Additional boxes will expand allowing the user to detail any standalone coverages using free form text boxes.



- Below is an example of how a user could complete these fields. The + and – signs can be used to add or subtract additional rows.



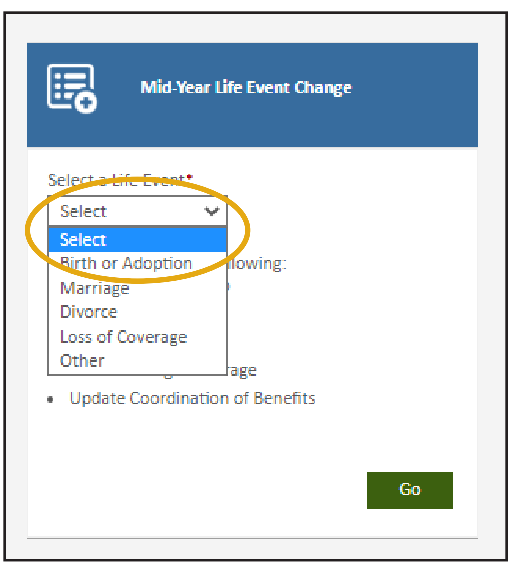
- **Please note:** if the terminated member has a dependent enrolled in standalone coverages only, we will need that dependent's demographic information to add them to our system for the appropriate standalone COBRA offer. Please use the Termination Note section at the end of the termination transaction to provide the name, date of birth, gender, and relationship of the dependent.



Mid-Year Life Event Change

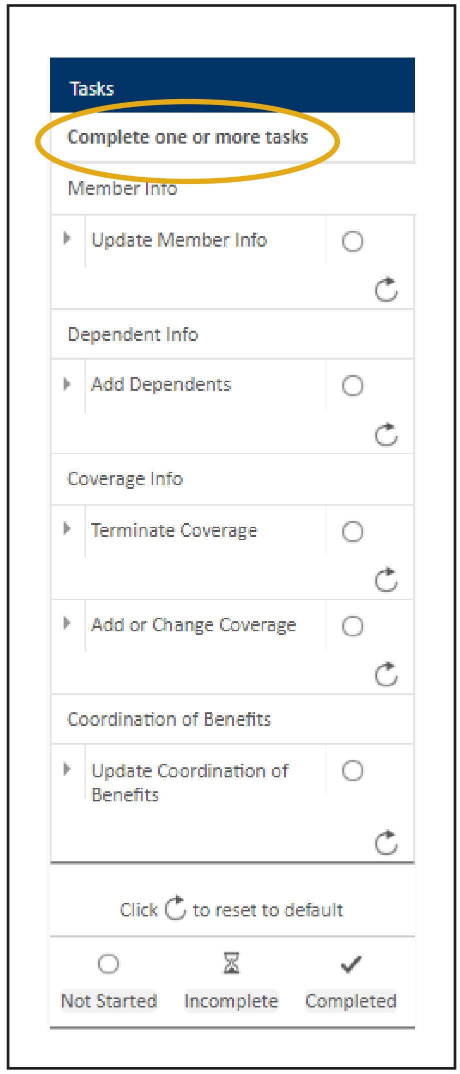
When a member experiences a life event, select the *Mid-Year Life Event Change* transaction type. Selections to choose from include update Member Info, Add Dependents, Terminate Coverage, Add or Change Coverage, and Update Coordination of Benefits Information.

1. Start by selecting the applicable life event from the drop-down menu. This field is required.
    - If none of the available life events apply, select *Other*. A free form text box will appear, allowing you to enter an event.



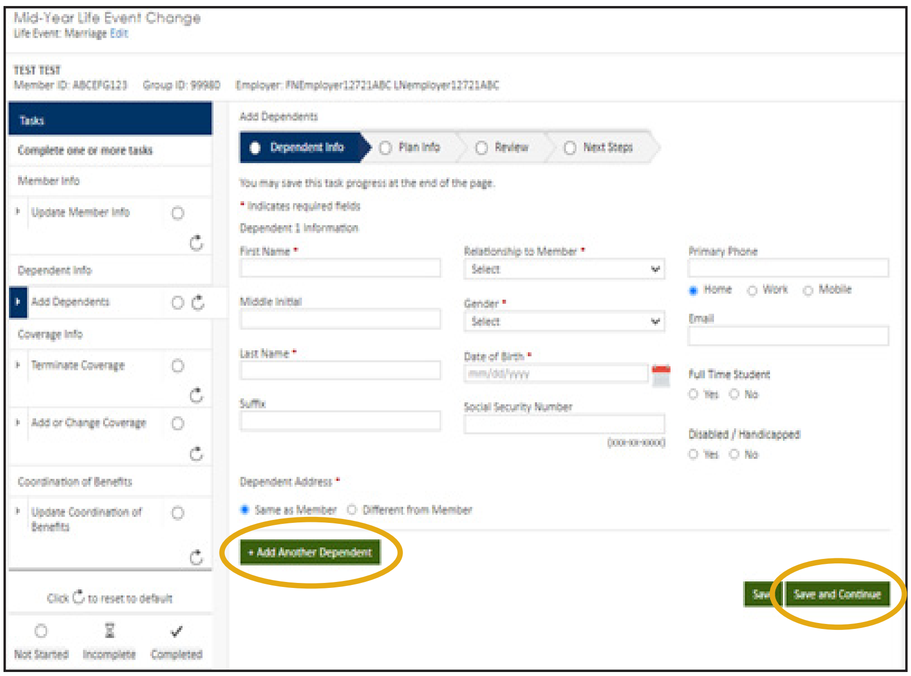
2. Select the applicable task(s) from the task menu. For the Marriage life event, select *Add Dependents*.

   Remember, once a task is complete, additional tasks can be performed within the same transaction. This allows users the freedom to make multiple changes to the same contract at the same time.



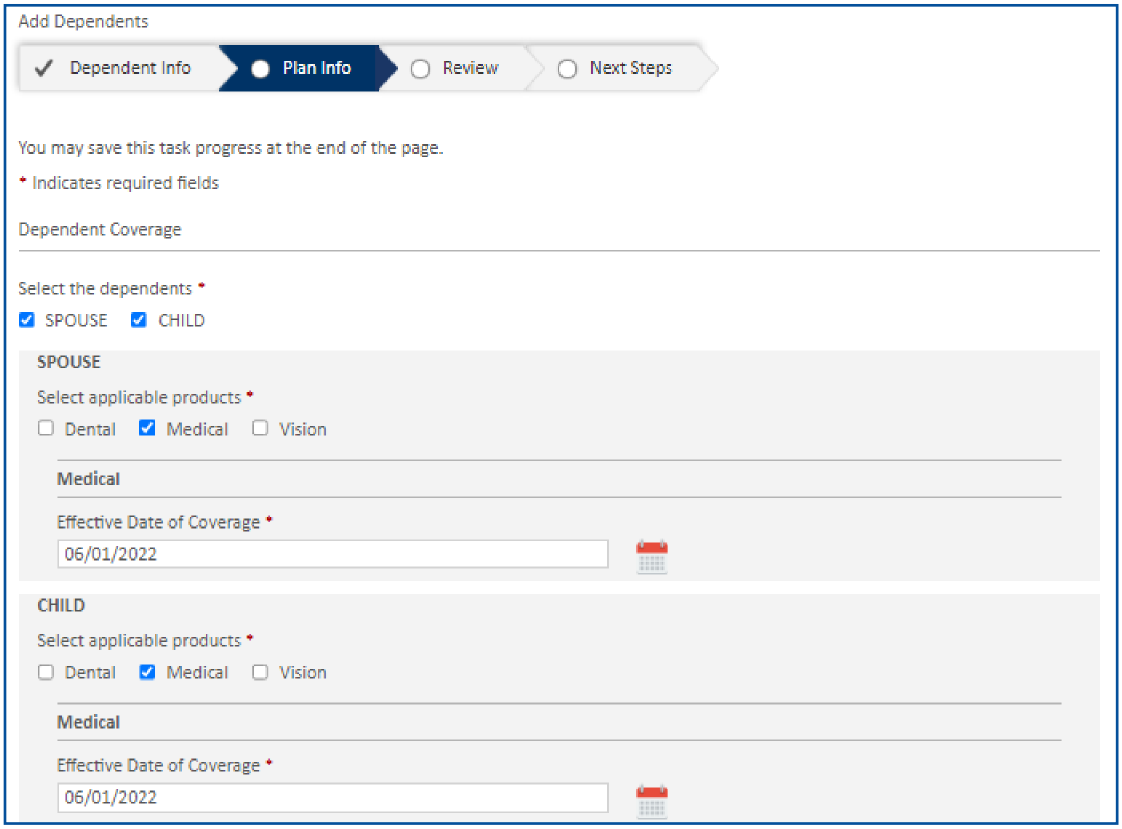
3. First, add the new dependent's demographic information. Be sure to complete all the required fields. The website will display a warning message if you forget to complete a required field.

   If you wish to add more than one dependent, click the *+Add Another Dependent* button. If you clicked *+Add Another Dependent* in error, click the link to reset and clear dependent 2 information. This will remove the additional dependent. Click the green *Save and Continue* button once all dependent information is completed.

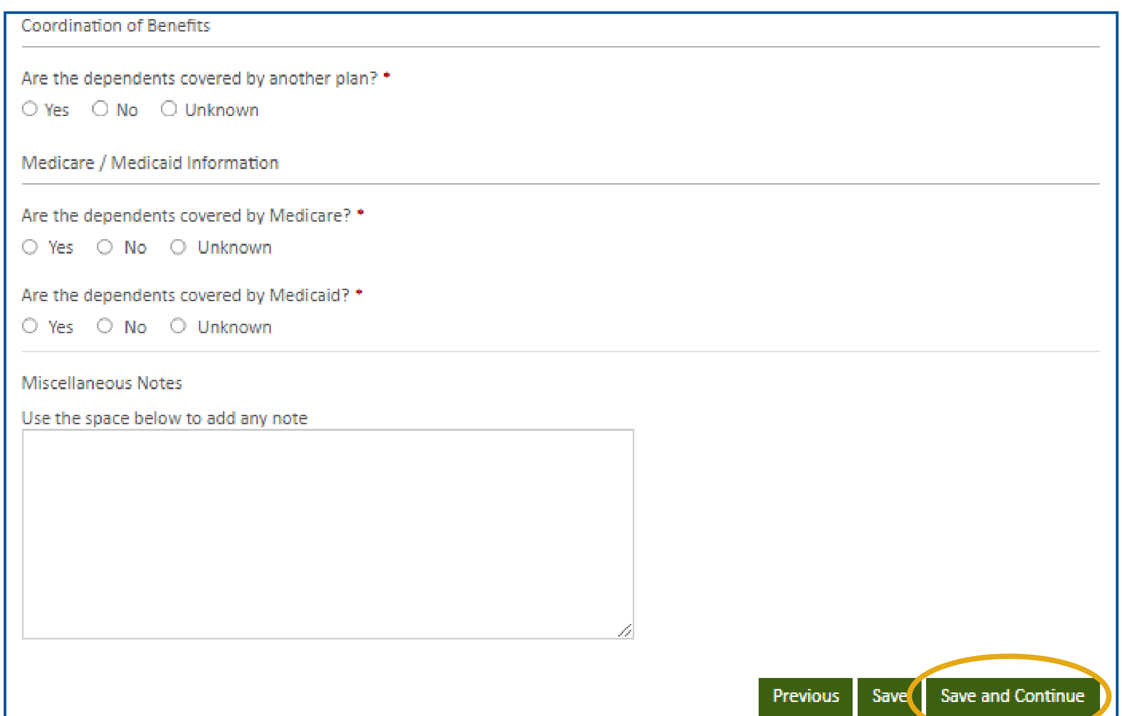


Next, users are directed to the Plan Info section. Coverage can be added, and users can also provide Coordination of Benefits information for the newly added dependents.

4. Select the dependents and applicable products. Users will be asked to provide an effective date for the addition of each coverage. Use the *calener icon* or type in the effective date.



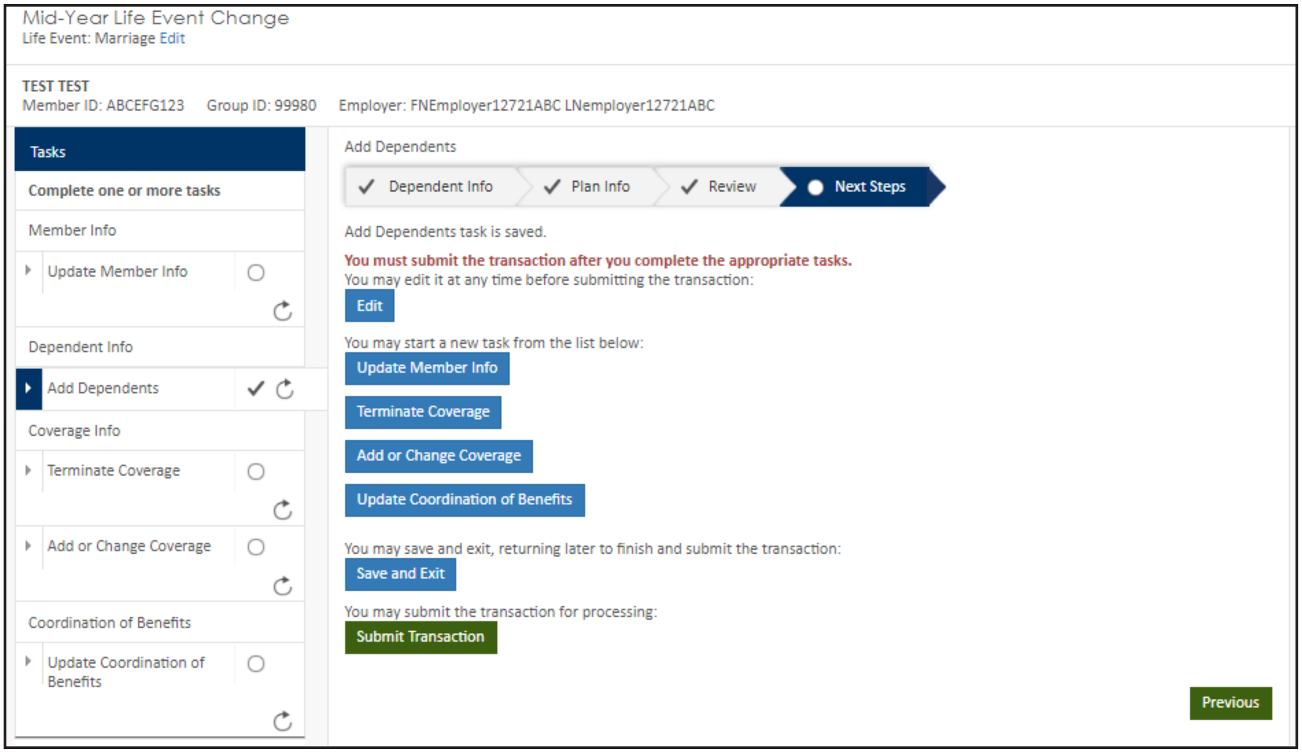
4. Complete the required Coordination of Benefits questions, then click the green *Save and Continue* button.



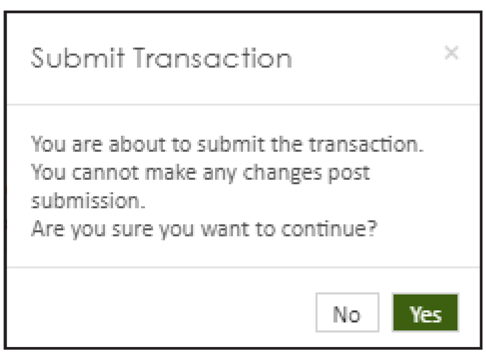
6. The last step allows users to review everything completed for the Add Dependents task. Users can go back to specific sections and make edits if needed. Click the green *Continue* button in the bottom right corner.

   Please note: even though the individual Add Dependents task is completed, the transaction as a whole is not yet submitted for processing until the user clicks the green *Submit transaction* button.

7. Additional tasks can be selected from the Task Menu on the left side of the screen, or users can select from the additional tasks listed in blue.

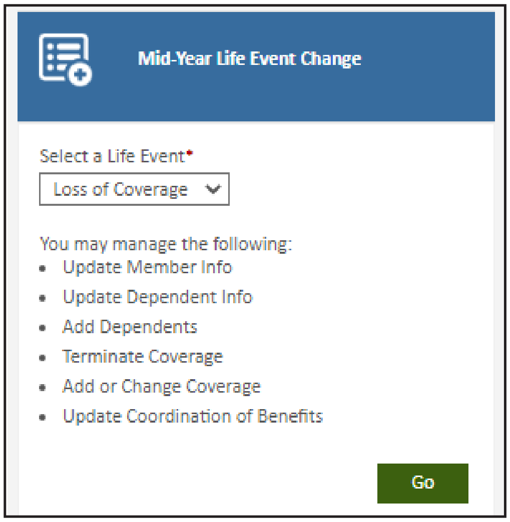


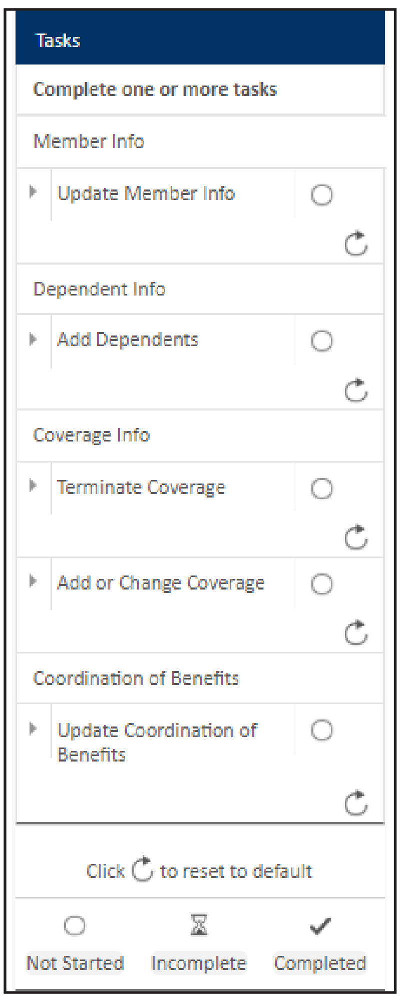
8. Click the green *Submit Transaction* button to submit all completed tasks within the transaction for processing with Meritain Health, confirm submission and receive a confirmation message.



Mid-Year Life Event Change—Loss of Coverage Life Event

1. For Loss of Coverage, users could take a variety of actions. In this example, the subscriber is experiencing a loss of other coverage. We will reinstate the member's coverage with Meritain Health using the *Add or Change* Coverage task.
2. When using the *Add or Change coverage Coverage* task, it is important to remember this task only allows users to add new coverage(s) or make changes to existing coverage(s).



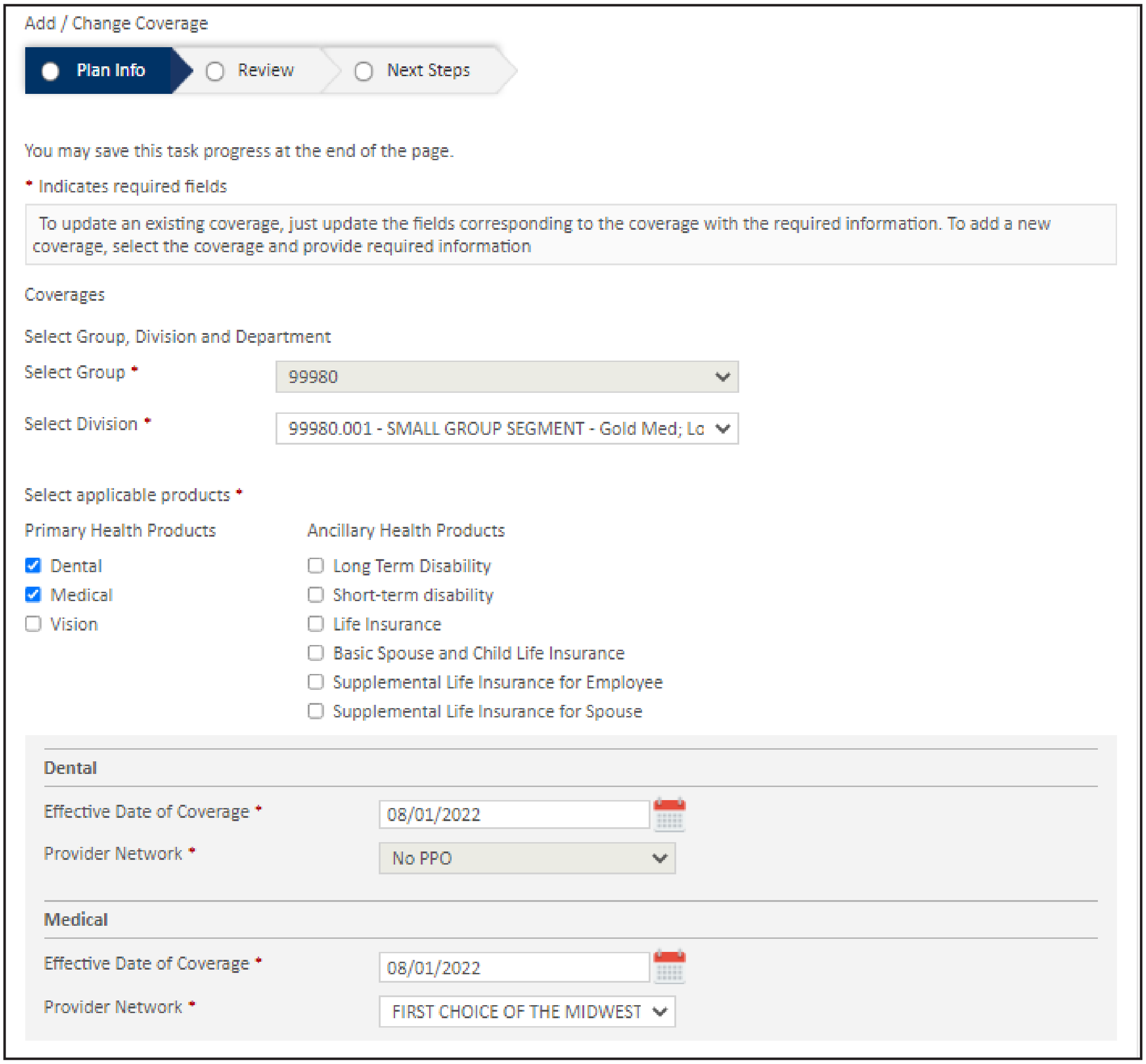


If a termination of coverage is needed, use the Terminate Coverage task. Users cannot drop coverage from the Add or Change Coverage task.

3. On the Plan Info screen, users will see any current coverages the member is enrolled in along with the most recent effective date for each corresponding coverage. To update an existing coverage, update the fields corresponding to the coverage with the required information.

   Select the coverage(s) using the check boxes and supply the required effective date and any other required information.

   Please note: Any fields that are grayed out do not require an entry from the user. An example of this can be seen in the below picture under the Provider Network field for Dental coverage.



4. Use the Yes/No radio buttons to confirm whether the change in coverage also applies to dependents. Select the checkbox for the applicable dependents if needed.


Dependent Coverage

Does this change in coverage apply to dependents ? (Yes/No) *

Yes No

Select the dependents *

SPOUSE CHILD

SPOUSE

Select applicable products *

Dental Medical

CHILD

Select applicable products *

Dental Medical

5. Select the applicable products for each dependent. Add the effective dates and any other required information.


Dependent Coverage

Does this change in coverage apply to dependents ? (Yes/No) *

Yes No

Select the dependents *

SPOUSE CHILD

SPOUSE

Select applicable products *

Dental Medical

Medical

Effective Date of Coverage *

08/01/2022

CHILD

Select applicable products *

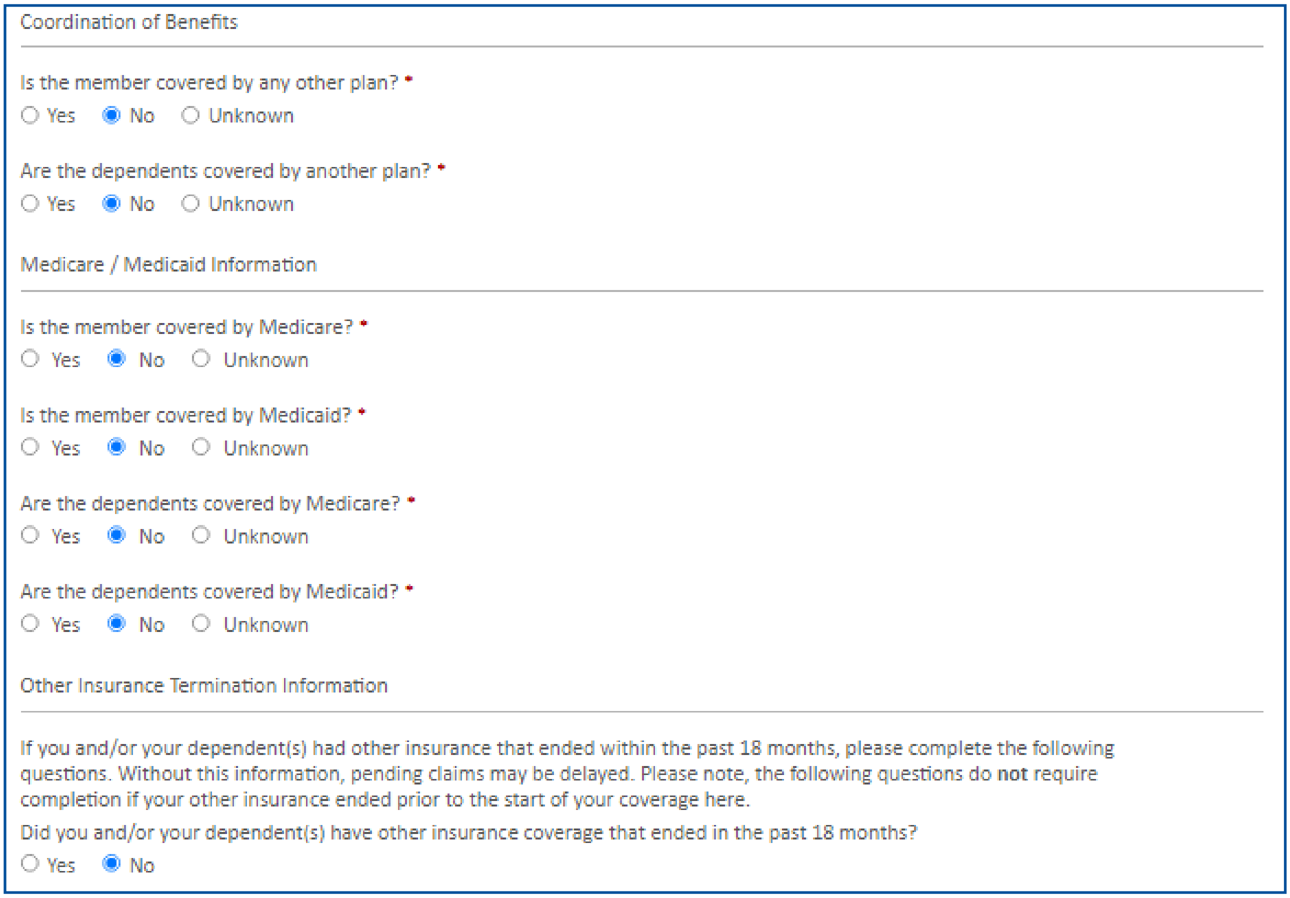
Dental Medical

Medical

Effective Date of Coverage *

08/01/2022

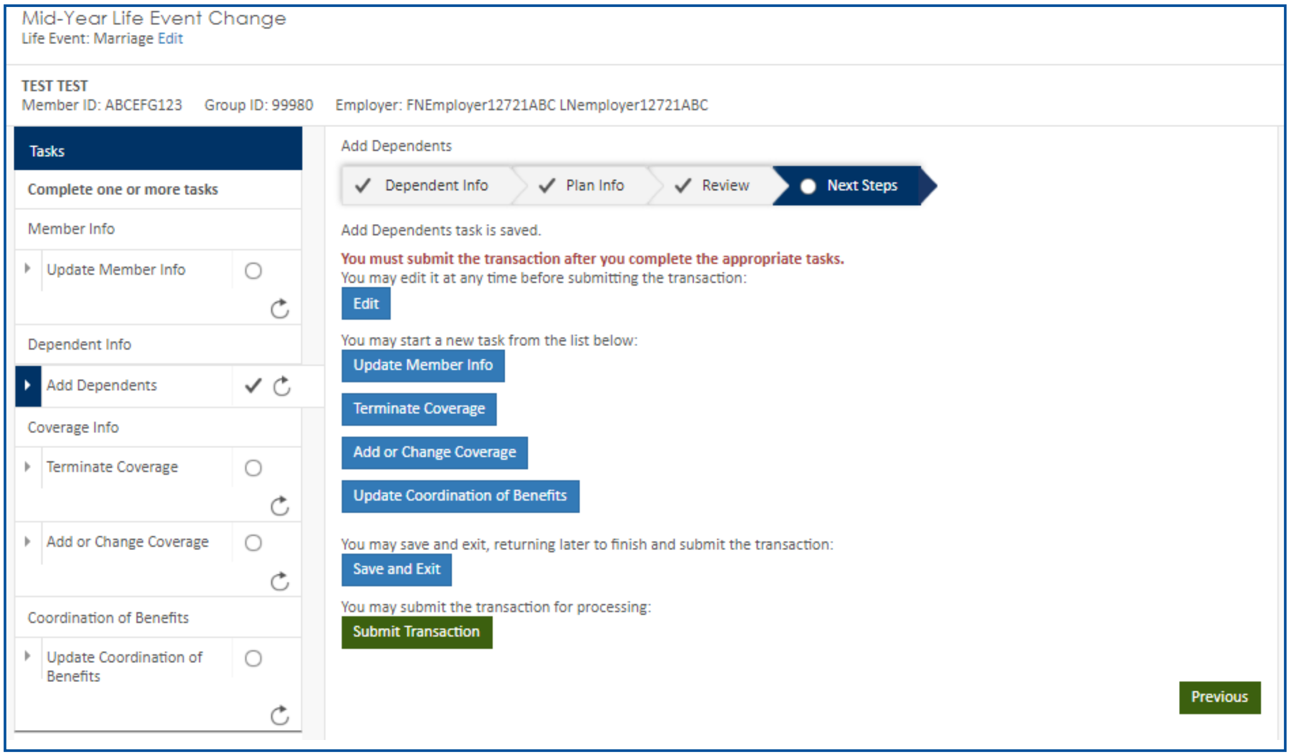
6. Users must supply updated Coordination of Benefits information for all family members when using the *Add or Change Coverage* task. Click the green *Save and Continue* button in the bottom right corner once all updates are complete.



7. The last step allows users to review everything completed for the *Add or Change Coverage* task. Users can go back to specific sections and make edits if needed. Click the green *Continue* button in the bottom right corner.

   Please note: even though the individual task is completed, the transaction as a whole is not yet submitted for processing until the user clicks the green *Submit Transaction* button.

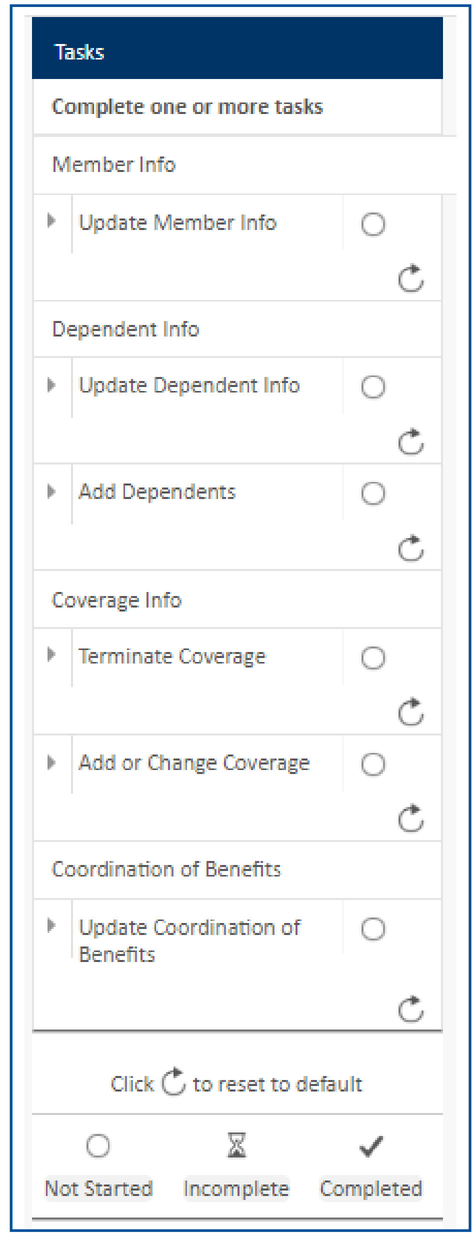
8. To complete an additional task, it can be selected from the Task Menu on the left side of the screen, or users can select from the additional tasks listed in blue.

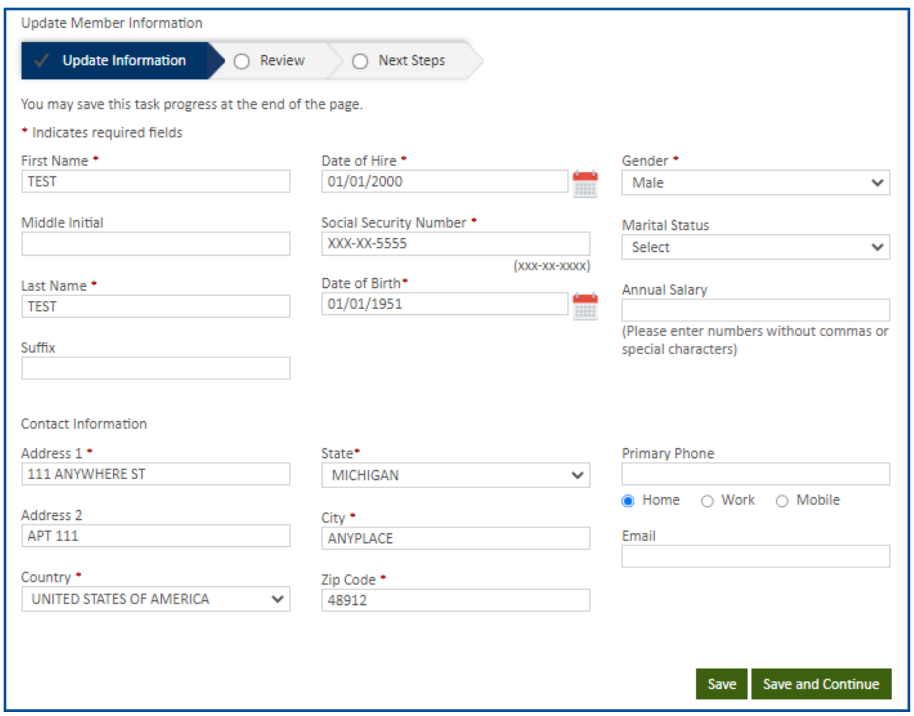


Open Enrollment Change

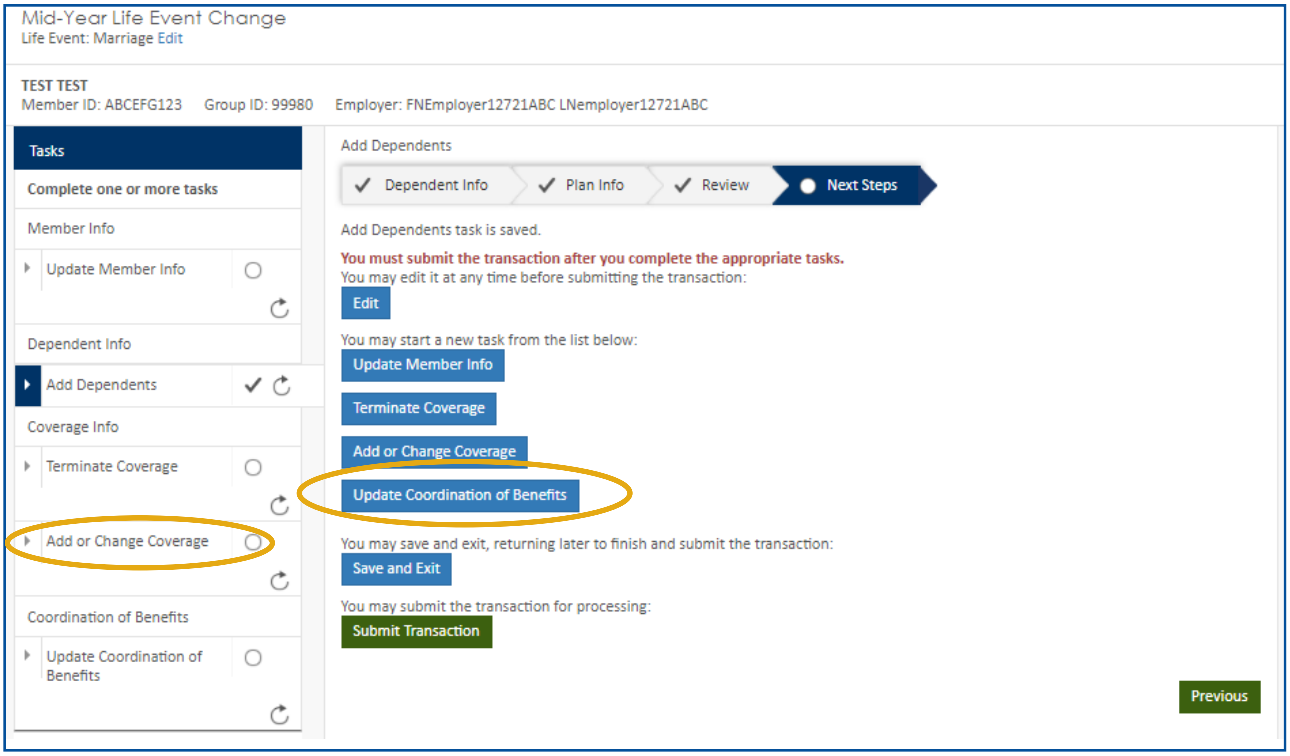
The Open Enrollment Change transaction type allows employer users to make any changes necessary to a member record due to open enrollment. Users can select options like, Update Member Info, Add Dependents, Change Divisions, Terminate Coverage, Add or Change Coverage, and Update Coordination of Benefits Information.

1. In this example, we will process a division change and update an address.
2. To update an address, select *Update Member Info* from the Task Menu.
3. Please note, if a demographic update for a dependent is needed, choose *Update Dependent Info* from the Task Menu.
4. Update the applicable fields under the Contact Information section. Click the green *Save and Continue* button when complete.
5. Review everything completed for the Update Member Info task. Users can go back to specific sections and make edits if needed. Click the green *Save and Continue* button in the bottom right corner.

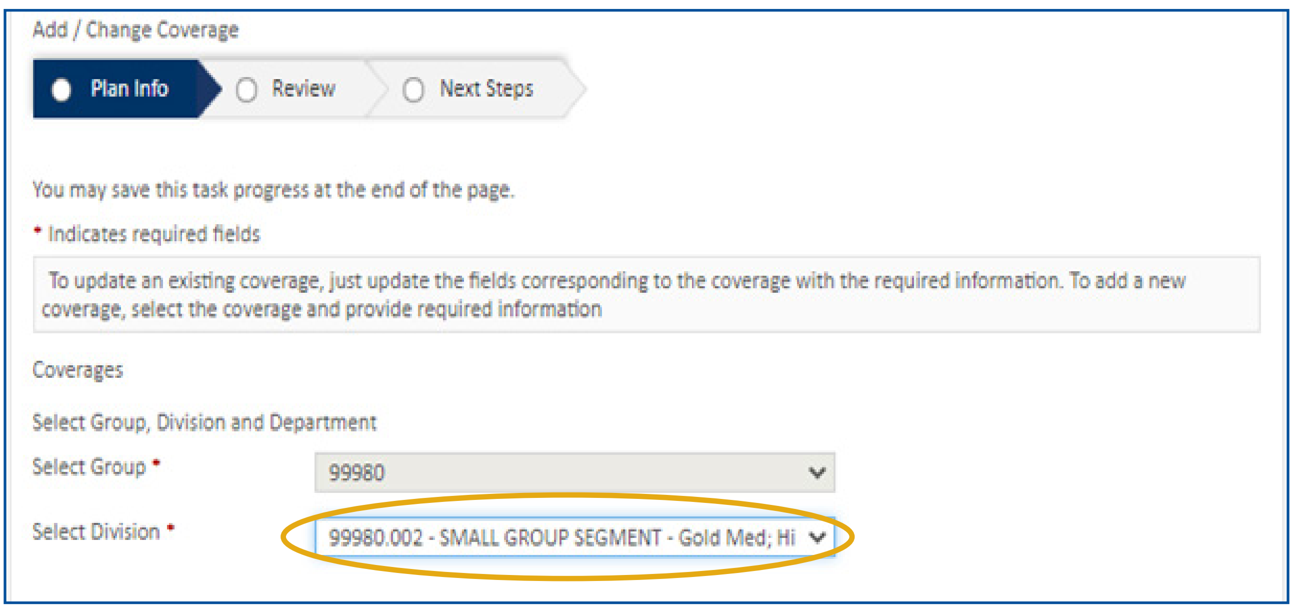




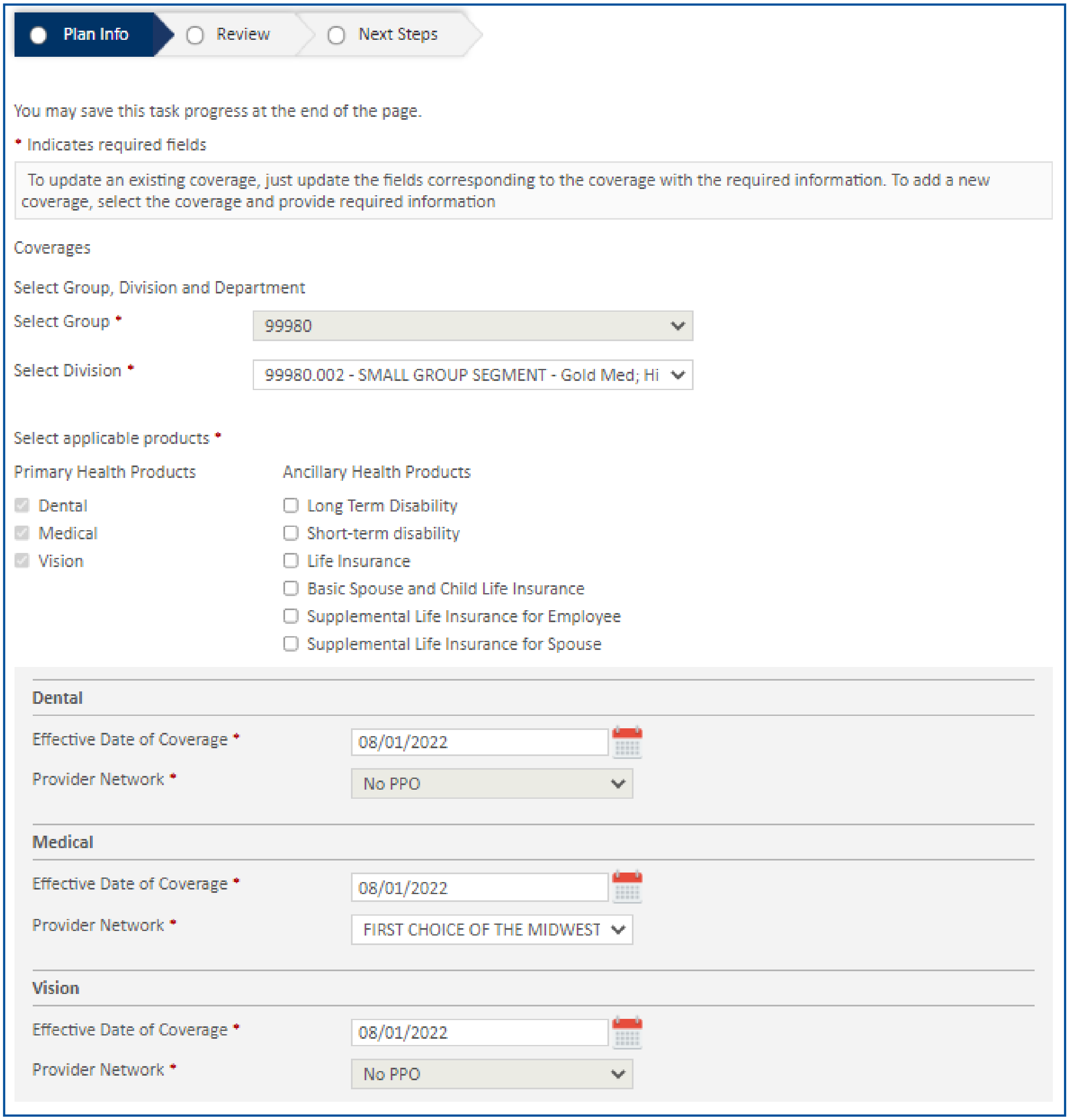
6. Select the *Add* or *Change Coverage* task from the Task Menu or set of blue buttons to complete the Division Change portion of the update.



7. Under Plan Info, there is a field labeled *Select Division*. This field is pre-populated with the subscriber's current division. To change the division, select the appropriate division from the drop-down menu.



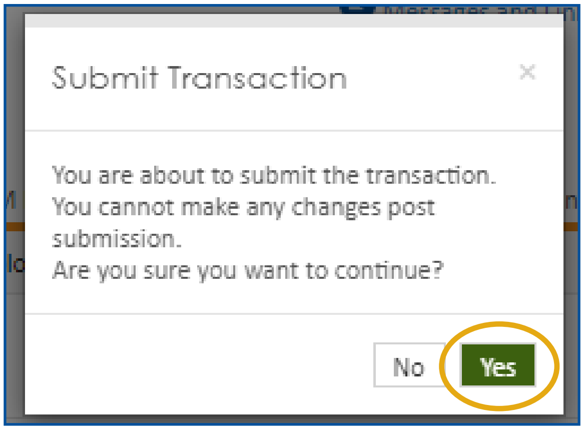
8. Next, update the effective dates for all current coverages so the effective date of the division change is clear. When using the Open Enrollment Change transaction type, the effective date of the client's open enrollment should be used.



9. Complete the Coordination of Benefits section, then click the green *Save and Continue* button at the bottom right of the screen.

10. Review everything completed for the Add or Change Coverage task and make any edits if needed. Click the green *Continue* button in the bottom right corner.

11. Select an additional task to complete if needed. Otherwise, click the green *Submit Transaction* button to submit the address change and division change to Meritain Health for processing. A dialog box will appear to ensure the user is ready to submit the transaction. Click *Yes*.

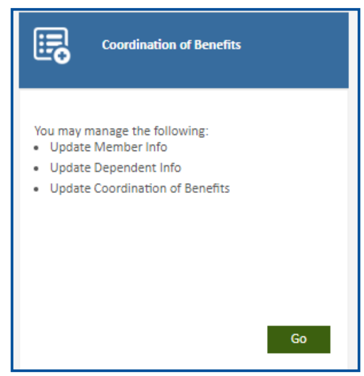


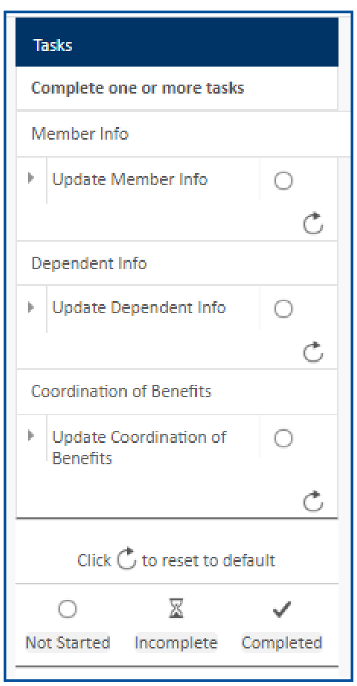
You will receive a congratulations message, as well as a transaction ID number once the transaction is successfully submitted.

Coordination of Benefits

1. Users can update Coordination of Benefits for existing members using the Mid-year Life Event Change, Open Enrollment Change, or Coordination of Benefits transaction types.

2. If a user only needs to update Coordination of Benefits information, it is most convenient to use the designated Coordination of Benefits transaction type. Click *Go*.



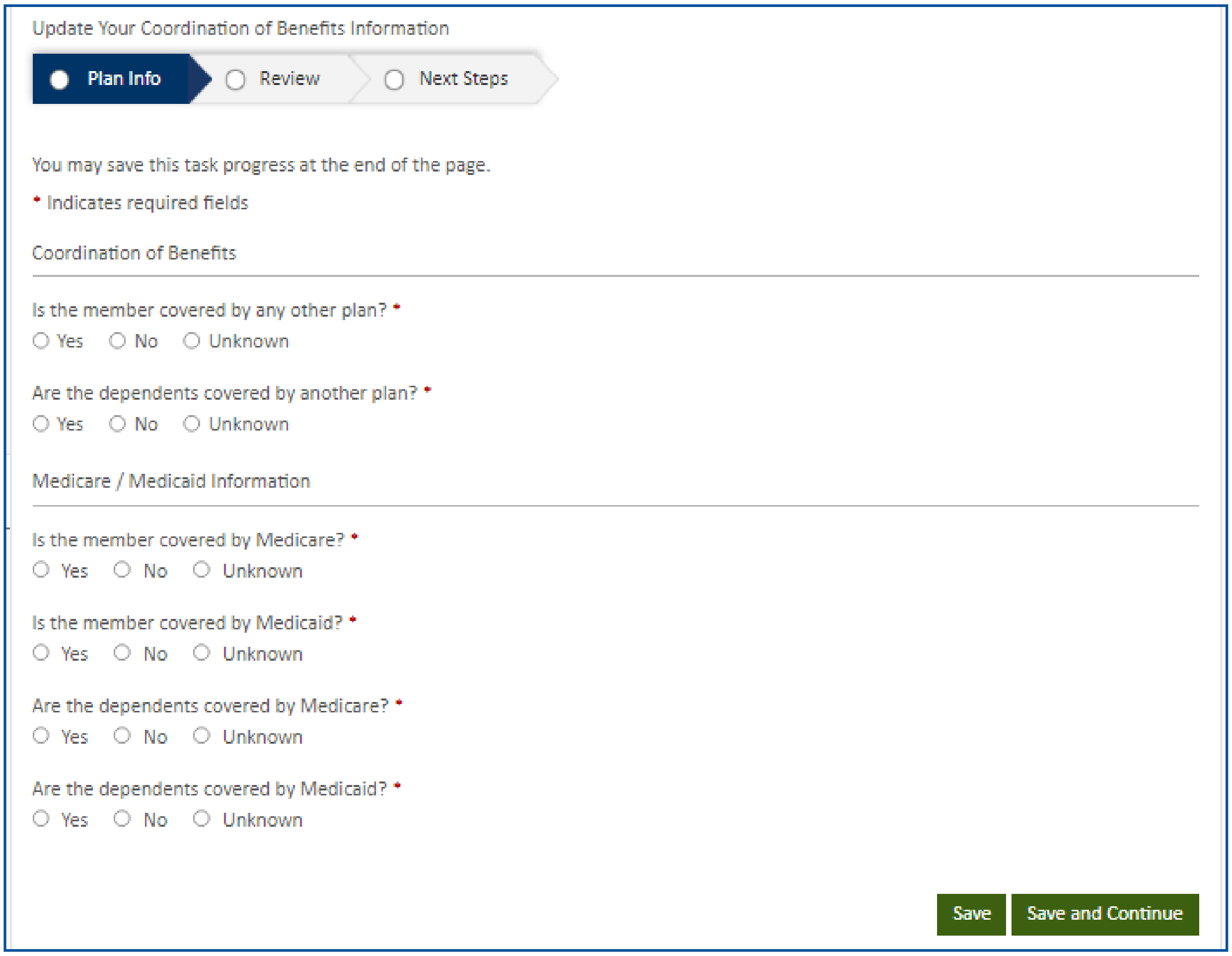


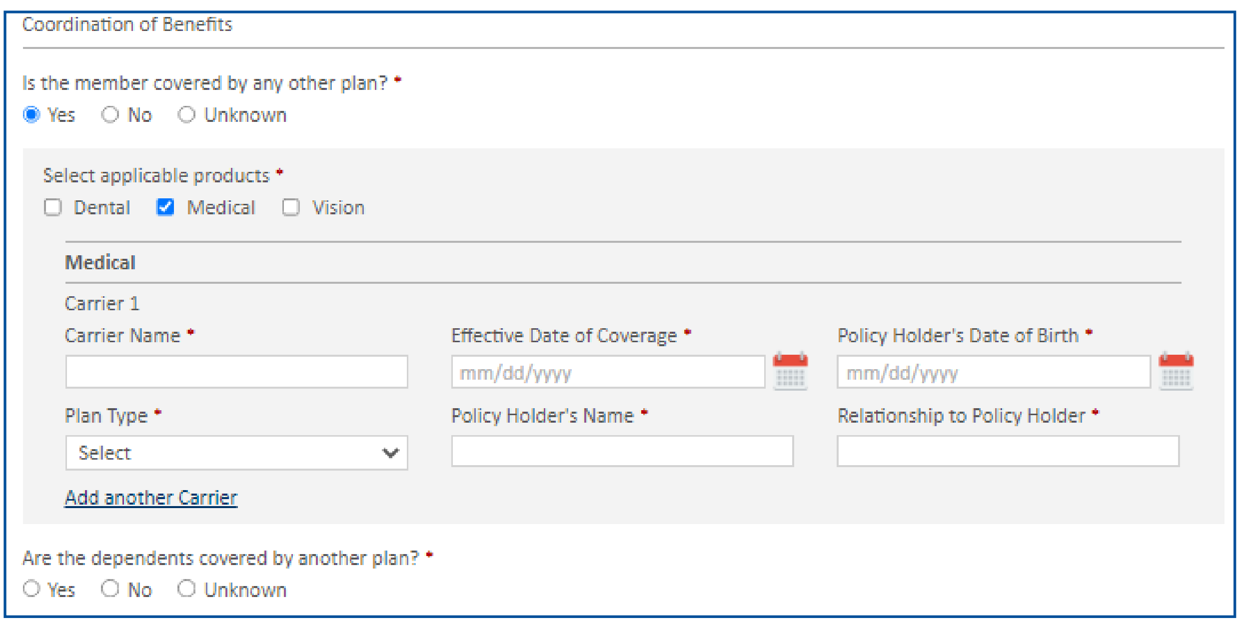
3. Click *Update Coordination of Benefits* from the Task Menu. **Please note:** users can also use the Update Member Info and Update Dependent Info tasks, if needed.

4. A blank Coordination of Benefits form will display. If a subscriber does not have dependents on file and has never previously enrolled with dependents, only questions pertaining to the member will display.

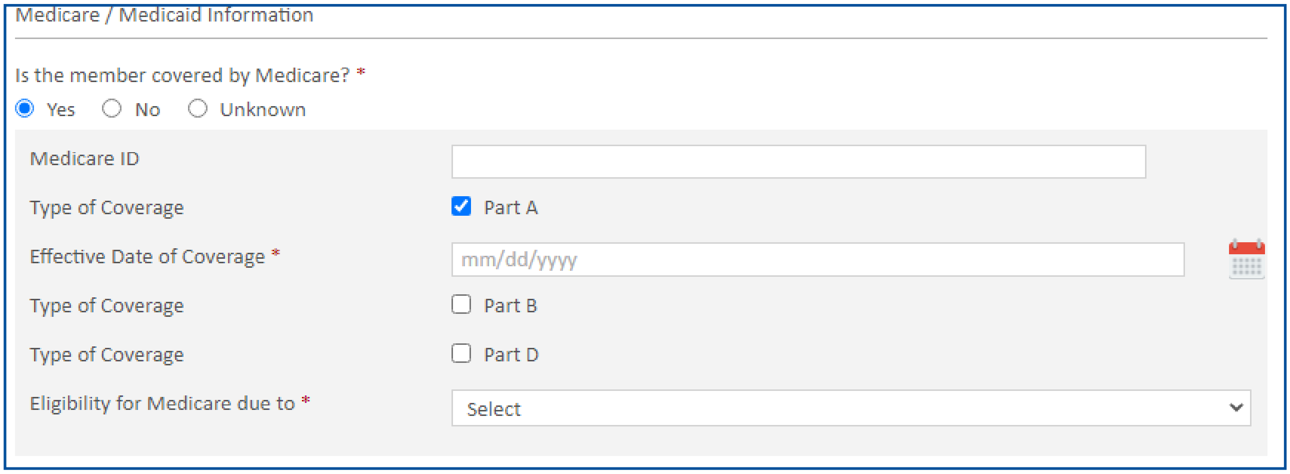
5. Make the appropriate selections for each question. A *Yes, No,* or *Unknown* selection is required for all questions to submit the transaction to Meritain Health. **Please note:** the form contains separate questions pertaining to other coverage through Medicare or Medicaid.

6. When the answer *Yes* is selected, additional boxes expand to capture the detailed information about the other insurance. Fields with a red asterisk indicate they are required.

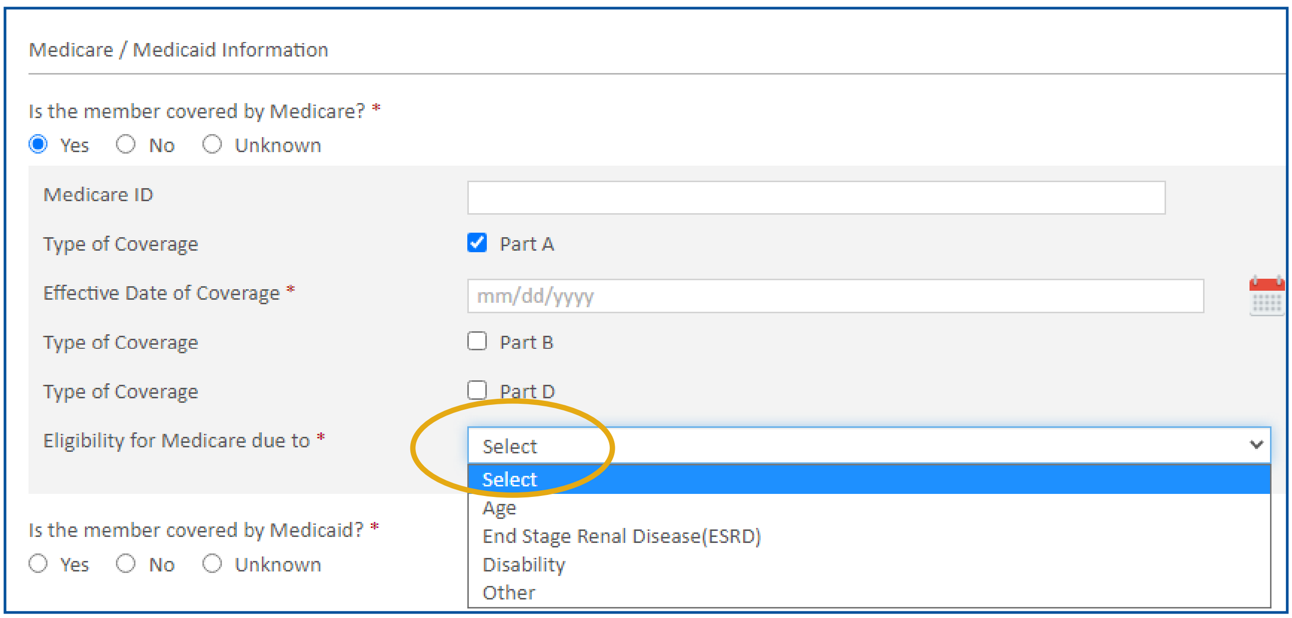




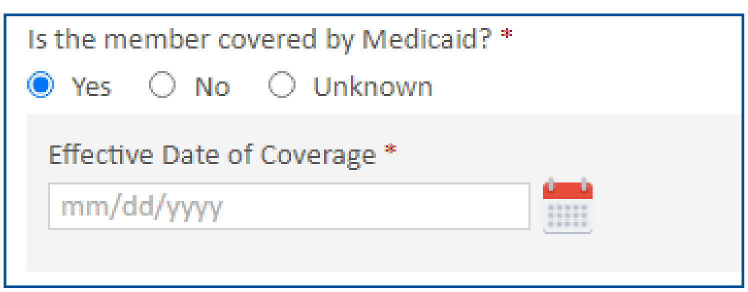
7. If a member or dependent(s) has Medicare, select *Yes* to the applicable question. A box will expand allowing the user to type the Medicare ID and indicate whether the Medicare beneficiary has Parts A, B, and/or D. A required Effective Date of Coverage field expands when Parts A, B, or D are selected.



8. Select the applicable reason for Medicare coverage from the drop down menu next to the *Eligibility for Medicare due to* field.

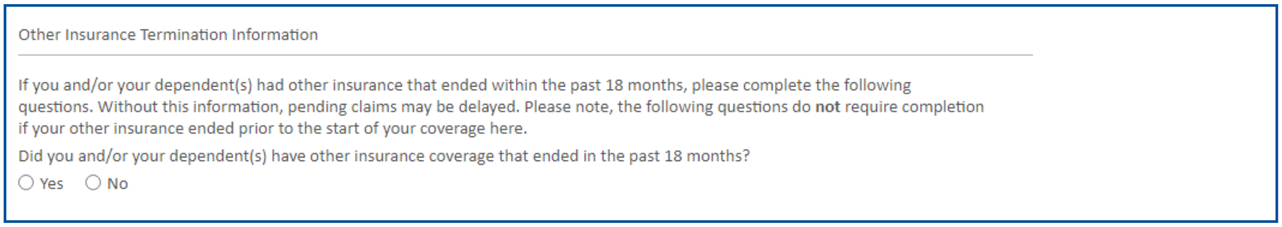


9. If the member or dependents have other coverage through Medicaid, select Yes to the Medicaid question and provide the Effective Date of Coverage.



10. If at least one family member has no other coverage, a final question will appear at the end of the Coordination of Benefits transaction. This question asks whether any family members had other insurance coverage that ended within the last 18 months. This question is important to ensure there are no gaps in the Coordination of Benefits history Meritain Health has on file, which could result in pended claims.

   - This question is optional. It is not necessary to complete if a member or family members had other coverage, but it ended prior to their coverage with Meritain Health.
   - If any family members had other coverage that terminated within the past 18 months while they were also covered by Meritain Health, answer *Yes* to this question.



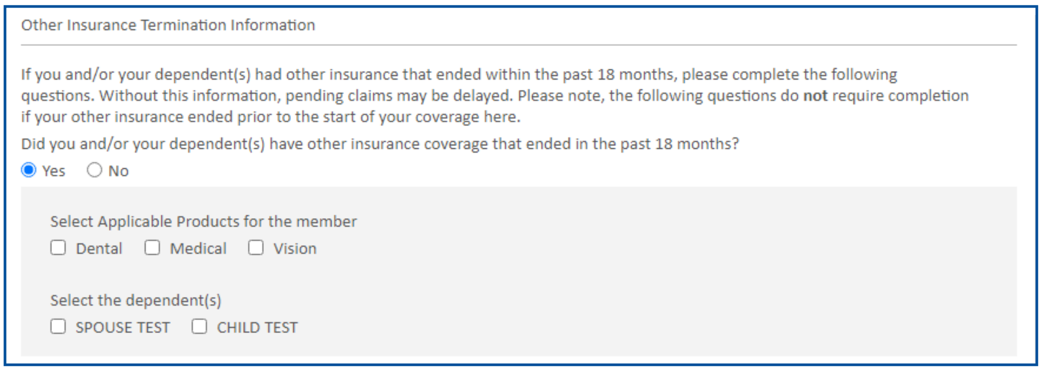
Other Insurance Termination Information

If you and/or your dependent(s) had other insurance that ended within the past 18 months, please complete the following questions. Without this information, pending claims may be delayed. Please note, the following questions do **not** require completion if your other insurance ended prior to the start of your coverage here.

Did you and/or your dependent(s) have other insurance coverage that ended in the past 18 months?

○ Yes ○ No

11. Checkboxes will expand allowing the user to select the applicable products if the member (subscriber) had the other insurance. Leave these blank if the member did not have other coverage.



Other Insurance Termination Information

If you and/or your dependent(s) had other insurance that ended within the past 18 months, please complete the following questions. Without this information, pending claims may be delayed. Please note, the following questions do **not** require completion if your other insurance ended prior to the start of your coverage here.

Did you and/or your dependent(s) have other insurance coverage that ended in the past 18 months?

◉ Yes ○ No

Select Applicable Products for the member

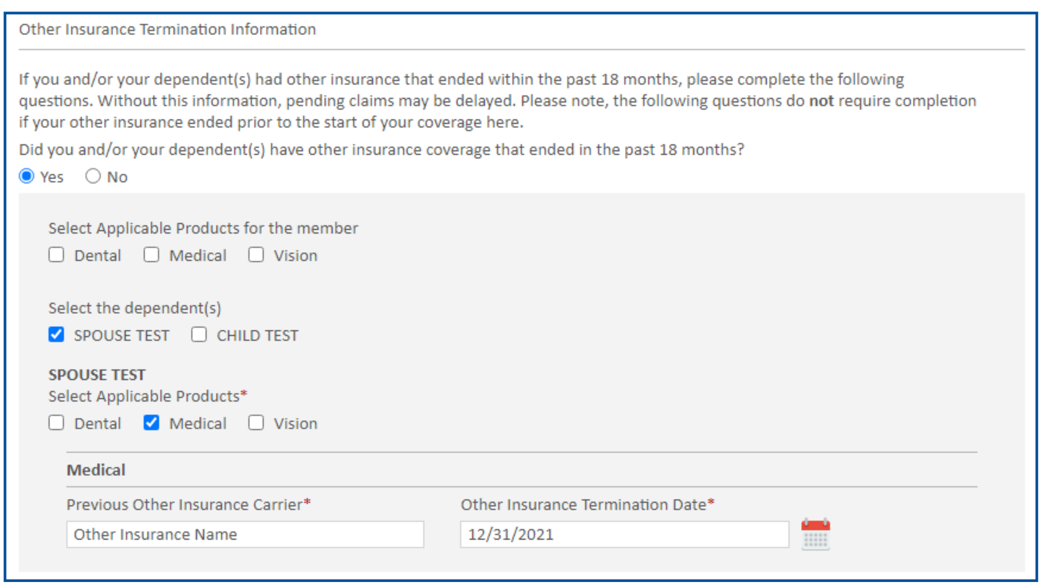
☐ Dental ☐ Medical ☐ Vision

Select the dependent(s)

☐ SPOUSE TEST ☐ CHILD TEST

12. If it was a dependent(s) that previously had the other insurance, check the box with the applicable dependent name(s) and then select the applicable product(s).

13. For any other insurance products selected, a final set of fields will expand allowing the user to capture the previous other insurance carrier and the termination date of that other insurance.



Other Insurance Termination Information

If you and/or your dependent(s) had other insurance that ended within the past 18 months, please complete the following questions. Without this information, pending claims may be delayed. Please note, the following questions do **not** require completion if your other insurance ended prior to the start of your coverage here.

Did you and/or your dependent(s) have other insurance coverage that ended in the past 18 months?

◉ Yes ○ No

Select Applicable Products for the member

☐ Dental ☐ Medical ☐ Vision

Select the dependent(s)

☑ SPOUSE TEST ☐ CHILD TEST

SPOUSE TEST

Select Applicable Products*

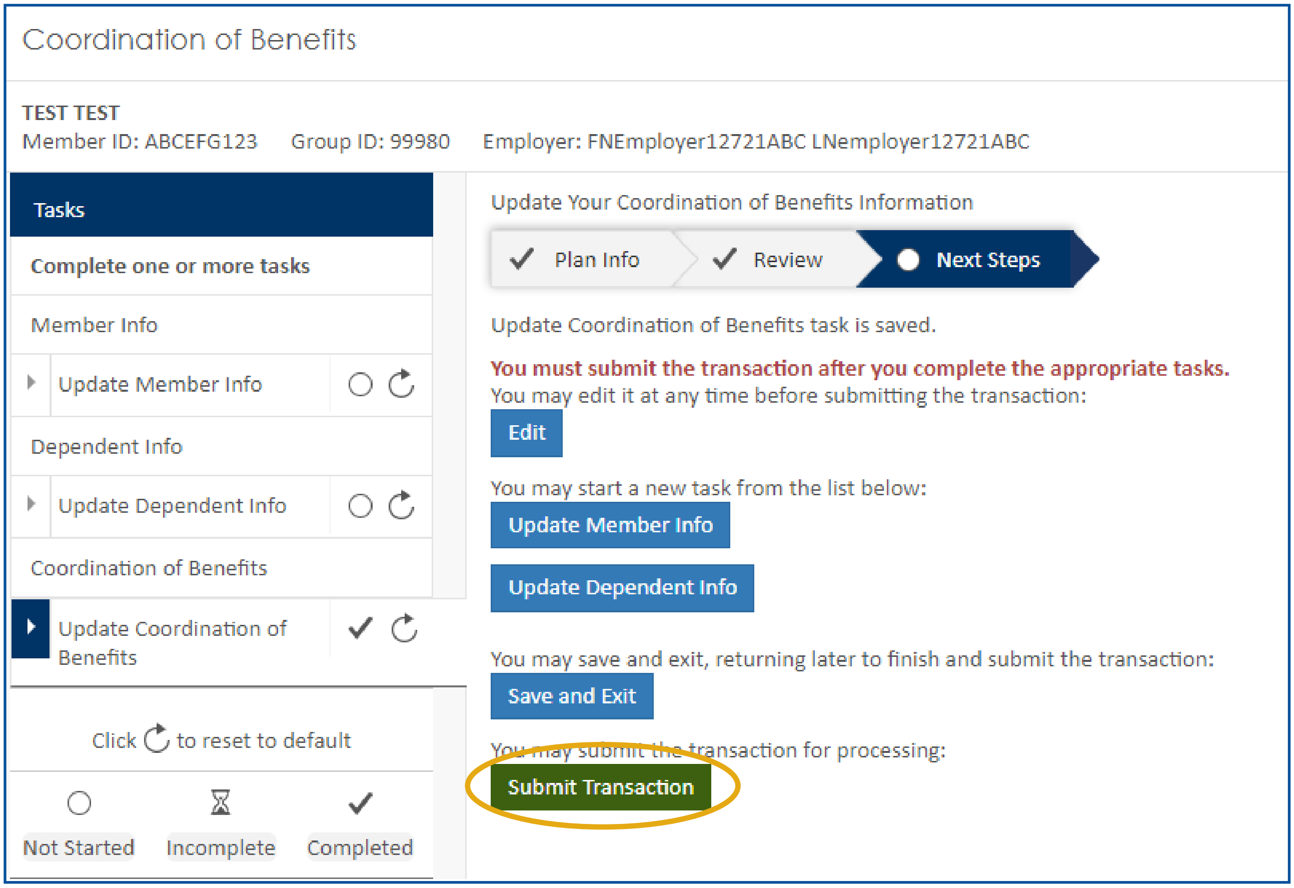
☐ Dental ☑ Medical ☐ Vision

Medical

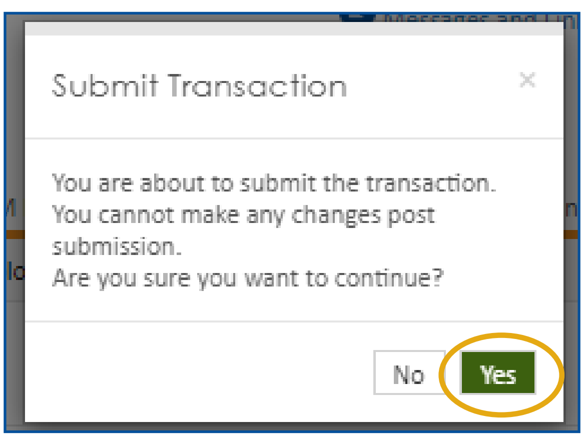
Previous Other Insurance Carrier*	Other Insurance Termination Date*
Other Insurance Name	12/31/2021

14. Once complete, click the green *Save and Continue* button. Review and edit if necessary. Click the green *Continue* button in the bottom right corner when finished.

15. Users can select additional tasks from the Task Menu on the left side of the screen, or select from the additional tasks listed in blue.

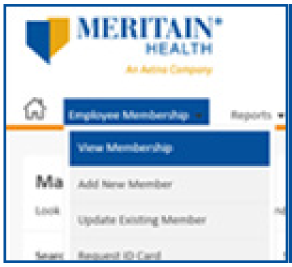


16. Click the green *Submit Transaction* button to submit all completed tasks within the transaction for Meritain Health processing. A dialog box will appear to ensure the user is ready to submit the transaction. Click *Yes*. You will receive a congratulations message, as well as a transaction ID number once the transaction is successfully submitted.

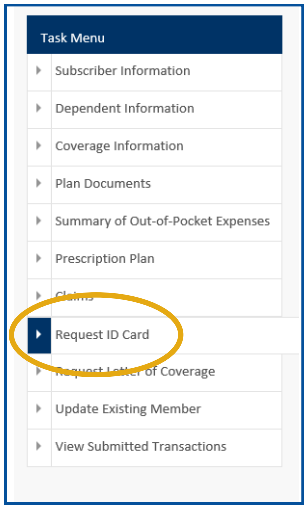


Request ID Card

Search for employee record via the *Manage Employee* tile on the homepage.

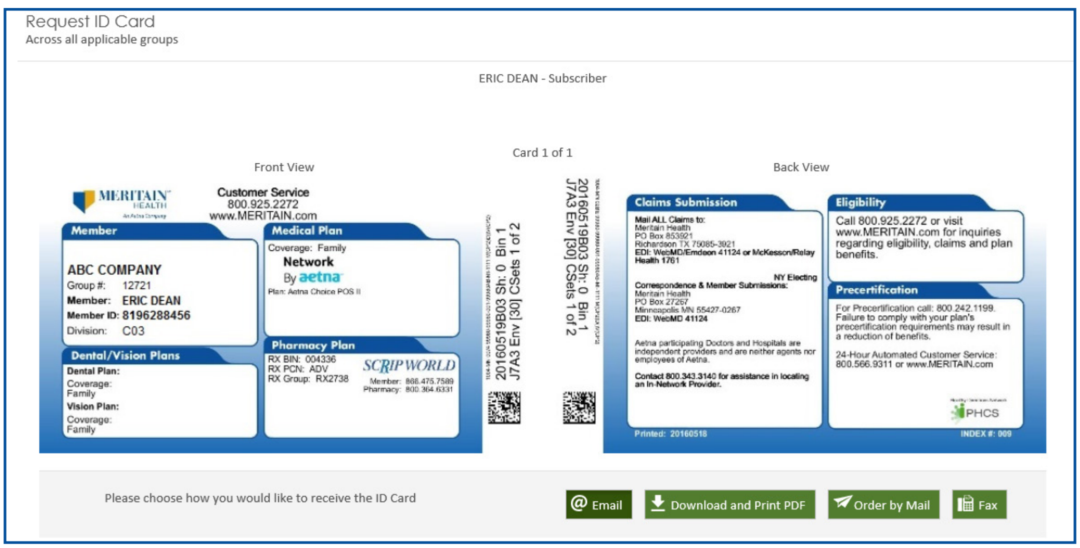


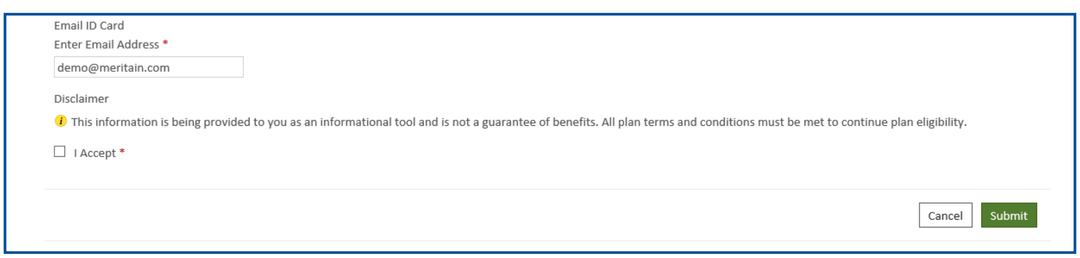
Alternatively, you can use the Employee Membership drop-down on the top toolbar and click *Request ID Card*, then search for the employee.



Use the task menu on the left side of the page to navigate to *Request ID Card*.

Four options are available for card delivery, additional information fields will open based on choice.




Email ID Card

Enter Email Address *

demo@meritain.com

Disclaimer

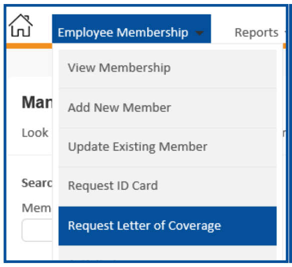
This information is being provided to you as an informational tool and is not a guarantee of benefits. All plan terms and conditions must be met to continue plan eligibility.

☐ I Accept *

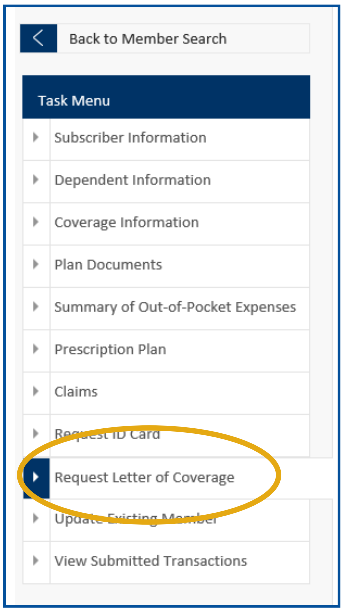
Cancel Submit

Request Letter of Coverage

Request a letter of coverage by using the *Manage Employee* form to access the employee record.

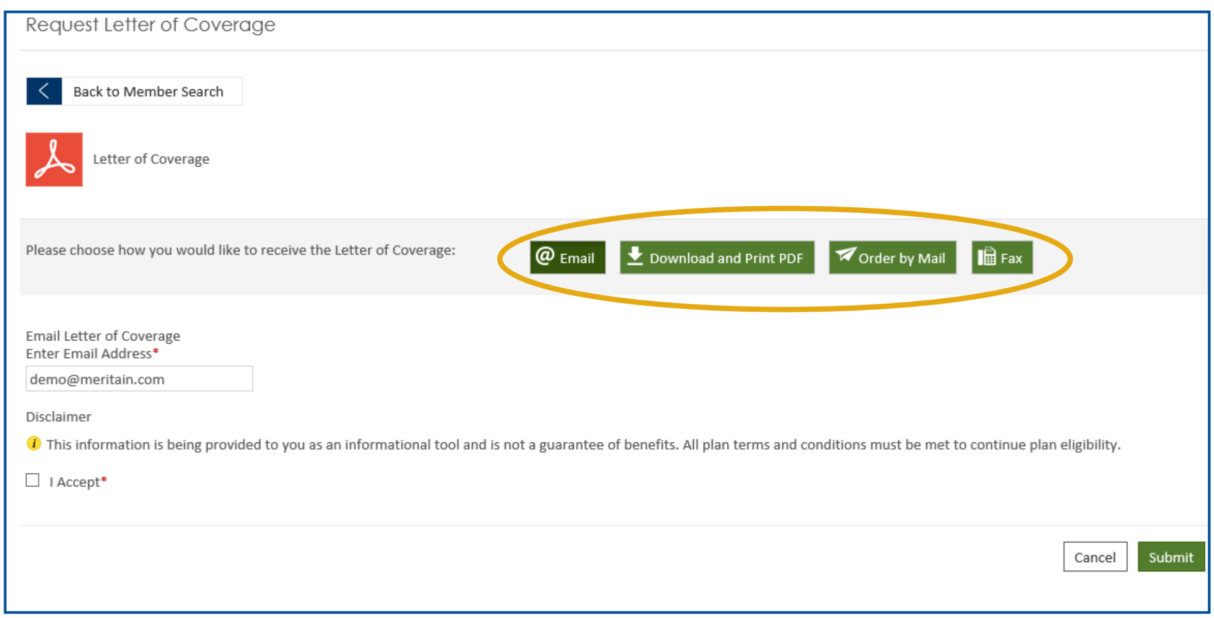


Alternatively, you can use the Employee Membership drop-down on the top toolbar and click *Request Letter of Coverage*, then search for the employee.



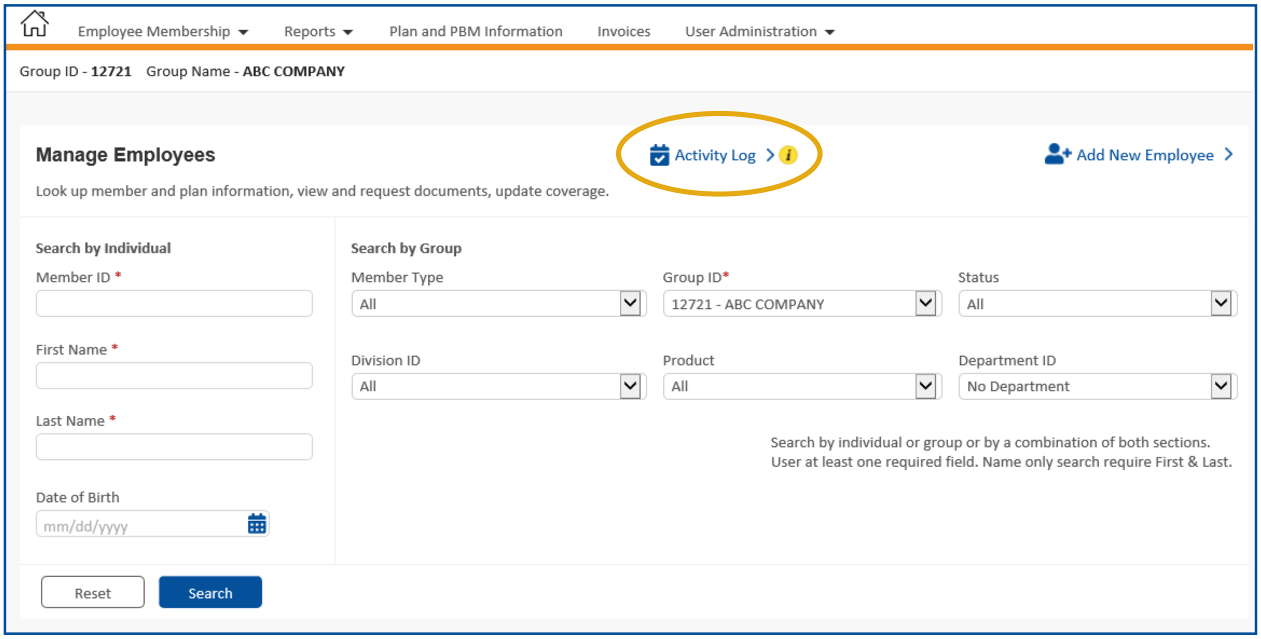
Use the Task Menu to select *Request Letter of Coverage*.

Four options are available for letter delivery, additional fields will open based on delivery choice.

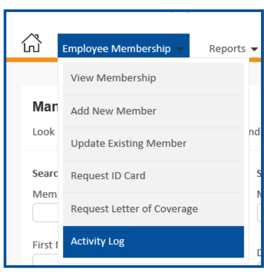


Activity Log

The Activity Log feature allows you to view submitted, saved and pending transactions. You can access the feature right on the homepage—just click on the *Activity Log* link on the top.



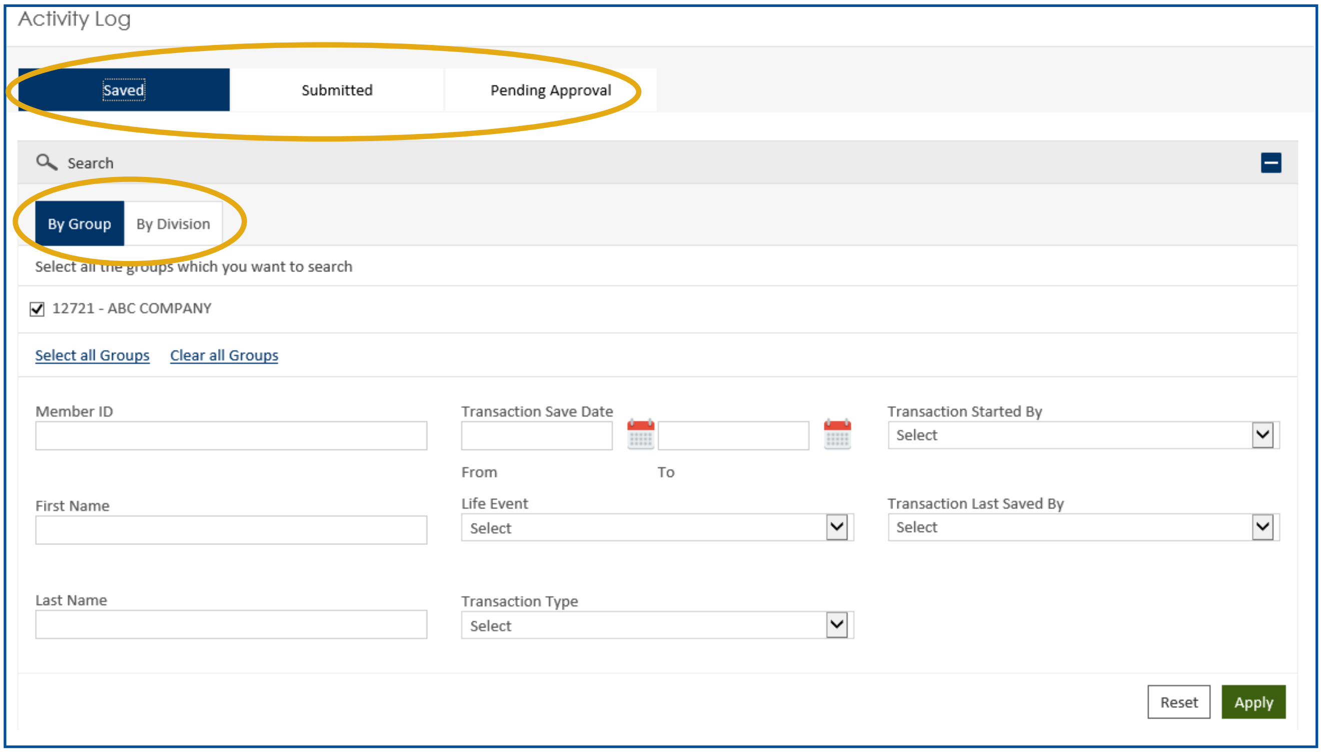
In addition, you can go to the Employee Membership drop-down on the top toolbar and click *Activity Log* to search and view transactions.



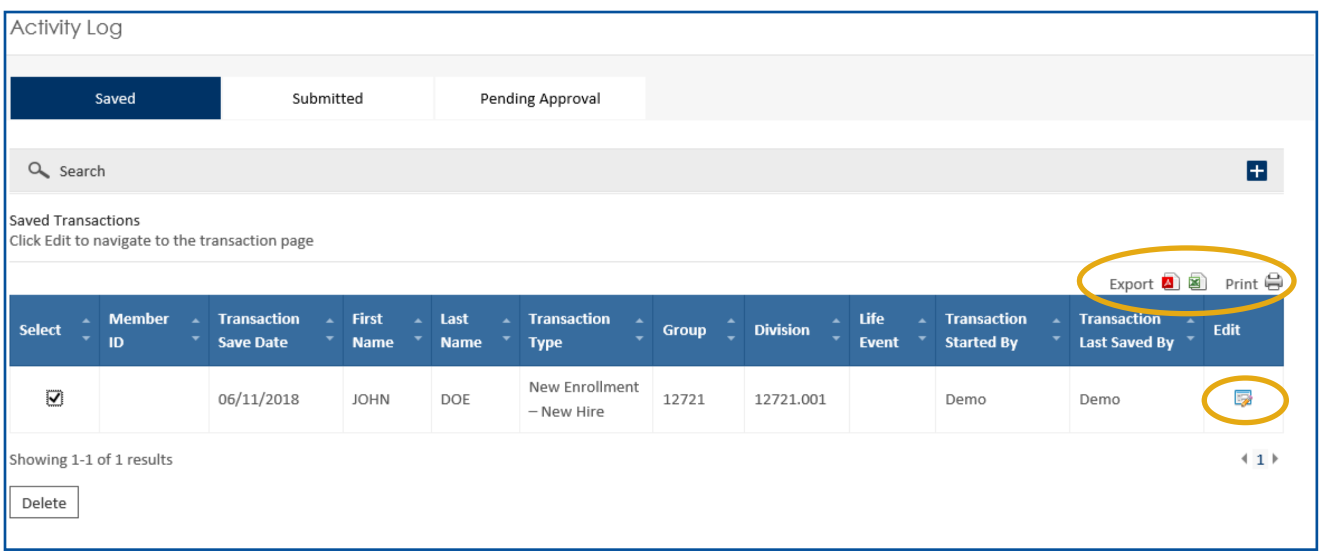
Alternatively, you can use the Employee Membership drop-down on the top toolbar and click *Activity Log*.

Once you reach the transaction search page, you may search saved, submitted and pending approval transactions by group oor division. Then enter you will appear at the transaction search page. You may search saved, submitted and pending approval transactions by group or division. Then, enter your information in the required fields and click *Apply*.

- **Saved** transactions have been partially entered into the system, but not yet submitted to Meritain Health for processing.
- **Submitted** transactions have been submitted to Meritain Health for processing.
- **Pending** Approval are updates from members submitted via the member website. Once transactions have been reviewed, they can be submitted to Meritain Health for processing.

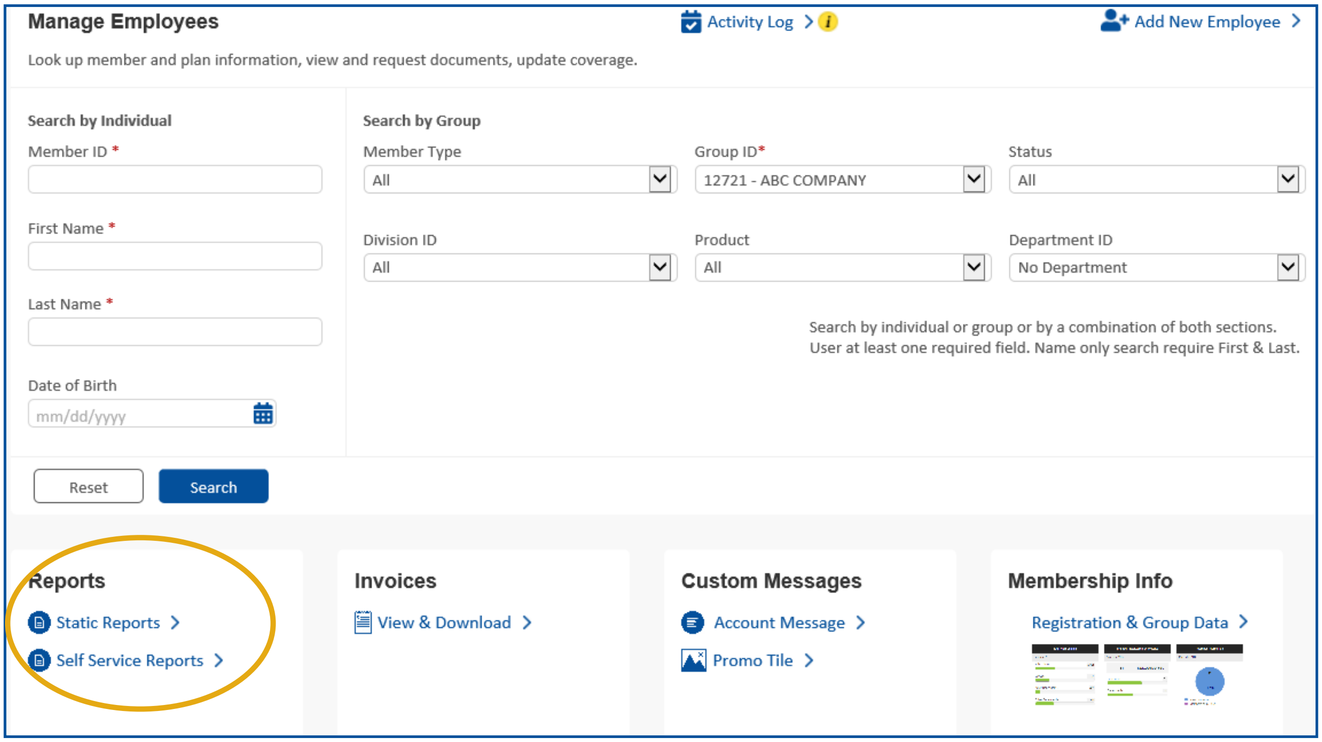


You may export your transactions in pdf or excel format. You also have the option to print the transactions or edit them.

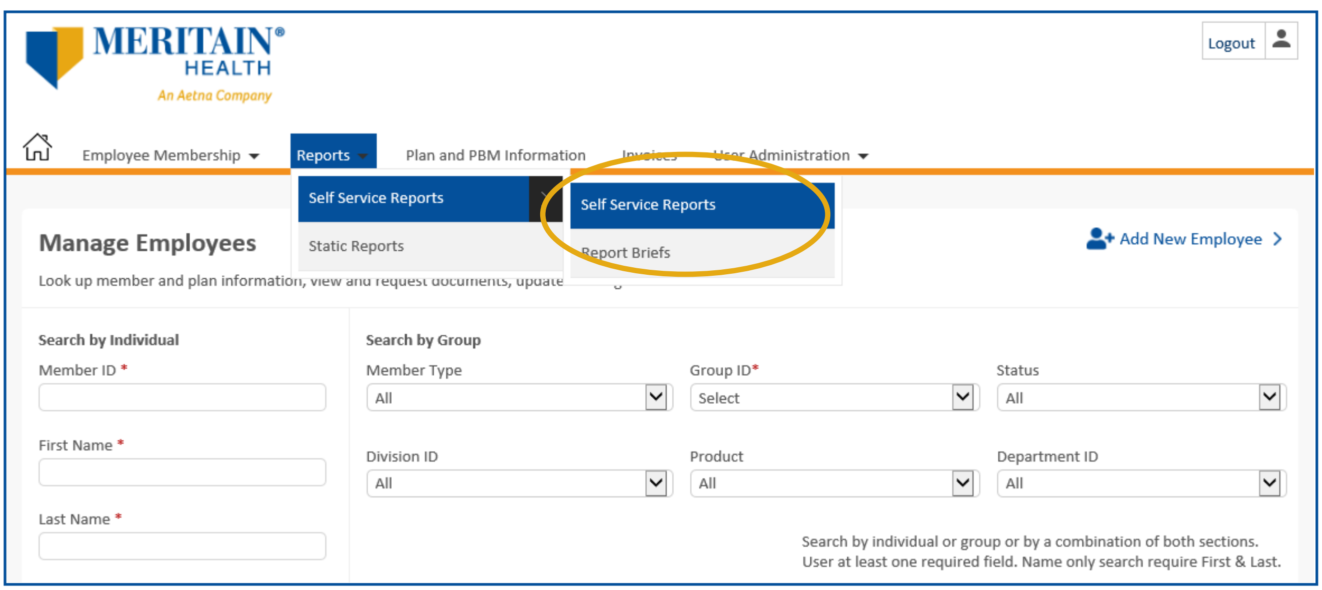


Reports

For help managing your health benefit plan, you can run reports right from the employer website. Go to the *Reports* widget at the bottom of the employer homepage and select the report options available.



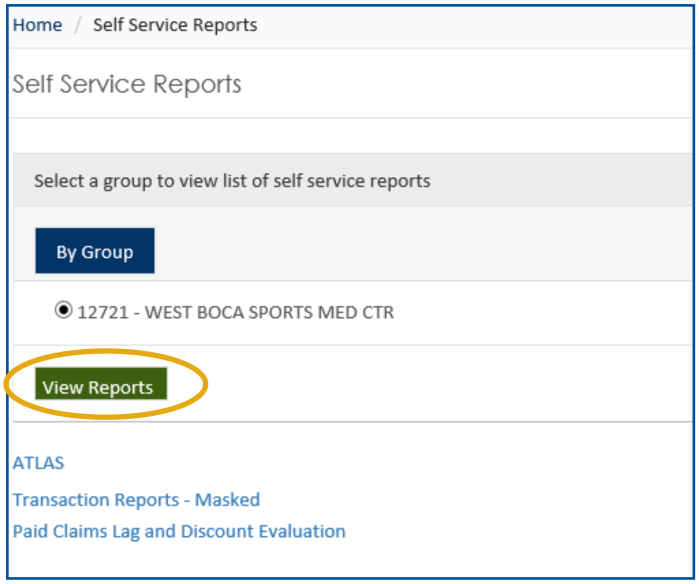
In addition, you can go to the *Reports* drop-down on the top toolbar, and select the *Self Service Reports*, *Static Reports* or *Report Briefs* option.



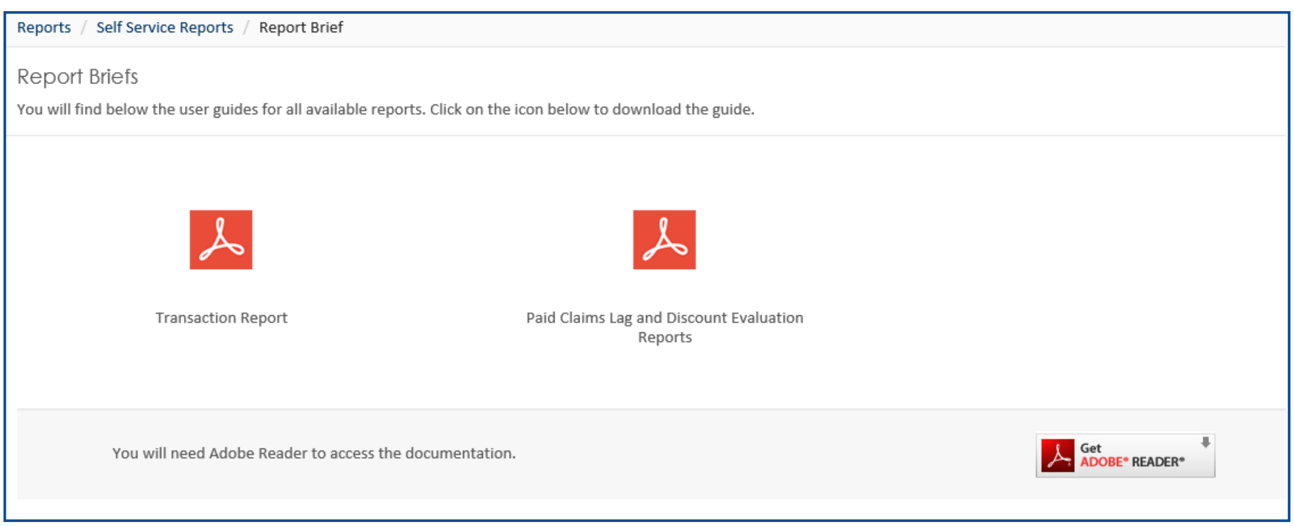
The Self Service Reports include:

- Transaction details—show any refunds received from the prior month. This information is listed at the top of the report.
- Claims log.
- Discount evaluation reports.

You can also access your plan utilization and performance reports under the link for our ATLAS reporting tool. To view the reports, simply click on the *View Reports* links.



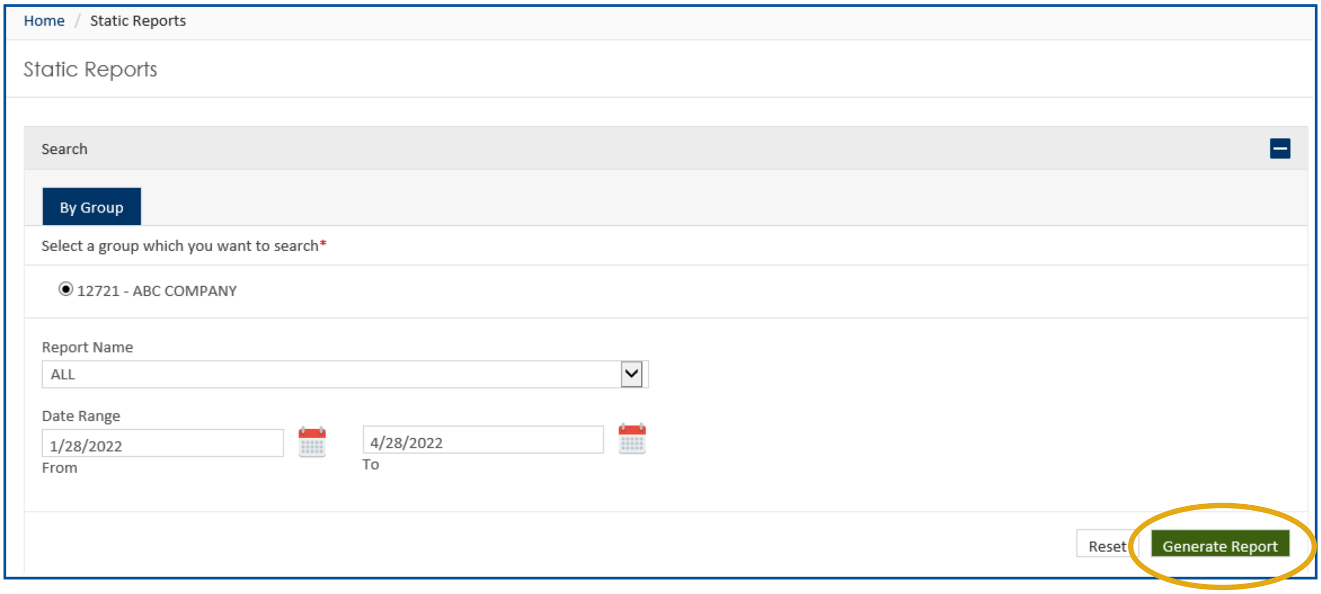
The **Report Brief** (found in the Self-Service Report drop-down) contains all the user guides for all available reports. You can click on the link and then export to excel or access with the download button.



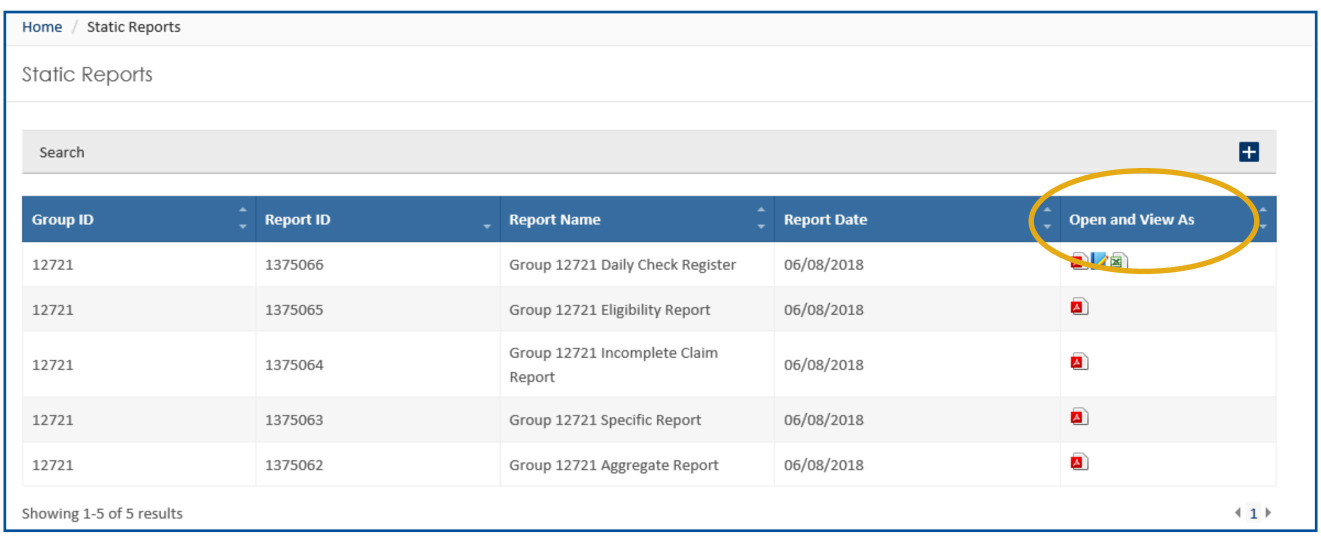
The **Static Reports** set up for each group is located in the drop-down list and may include:

- Daily check registers
- Various claims reports
- Stop loss reports
- Eligibility reports

To run a report, select the *Report Name* from the drop-down, specify the date range for the report and click the *Generate Report* button.



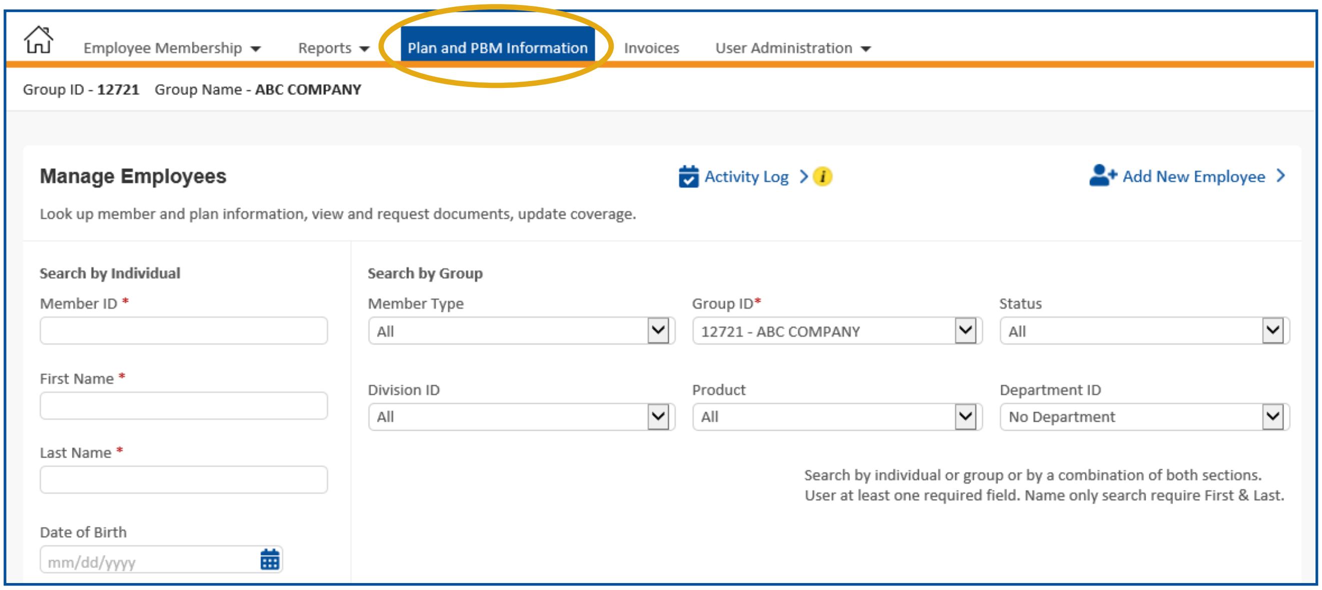
The reports results will appear. To view the reports, choose from the *Open* and *View As* column.



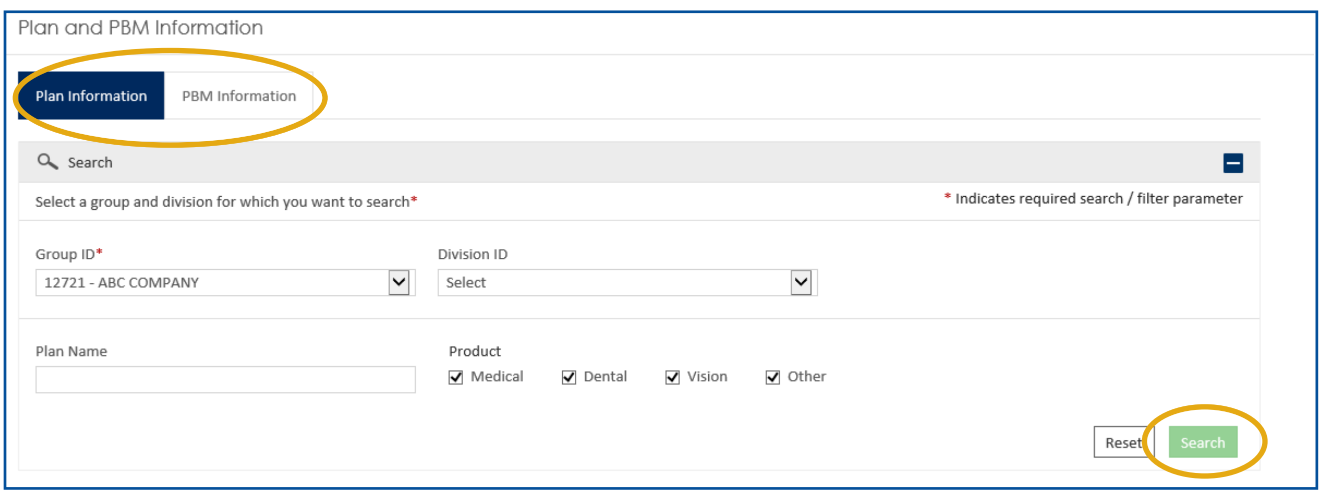
Plan and PBM Information

This section houses plan documents, URLs and PBM vendor information. It is split into two tabs: Plan Information and PBM Information.

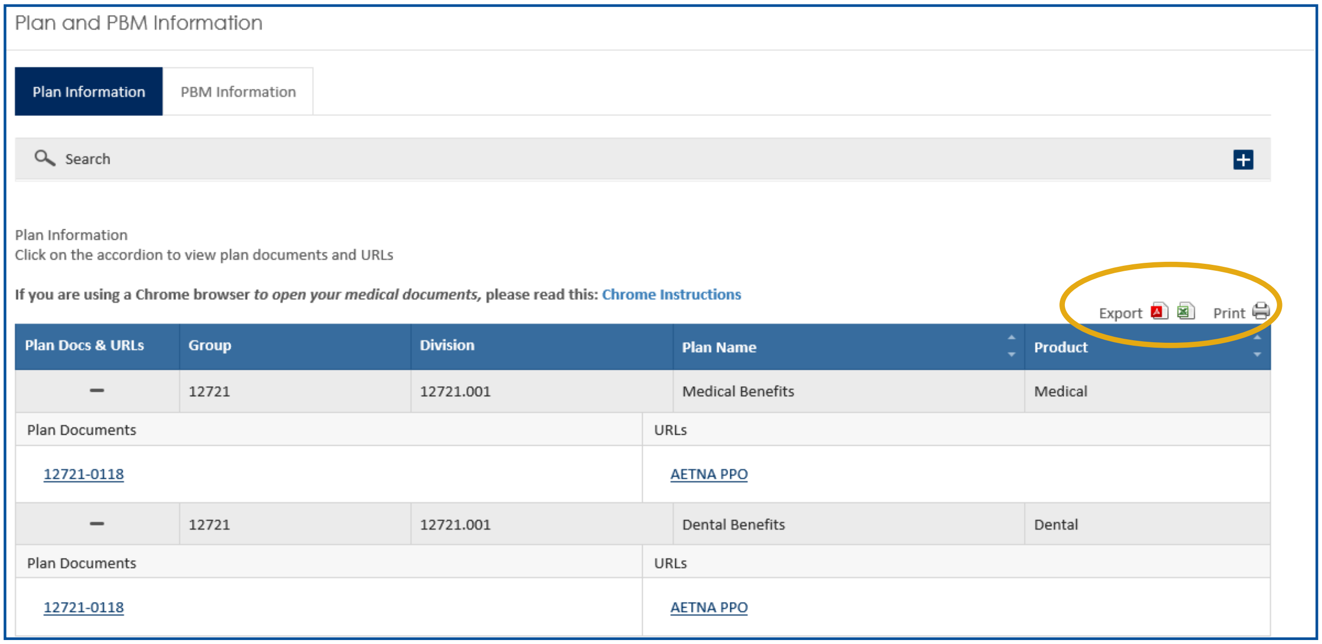
You can access the plan information, right on the homepage. Just click on *Plan and PBM Information* on the top menu toolbar.



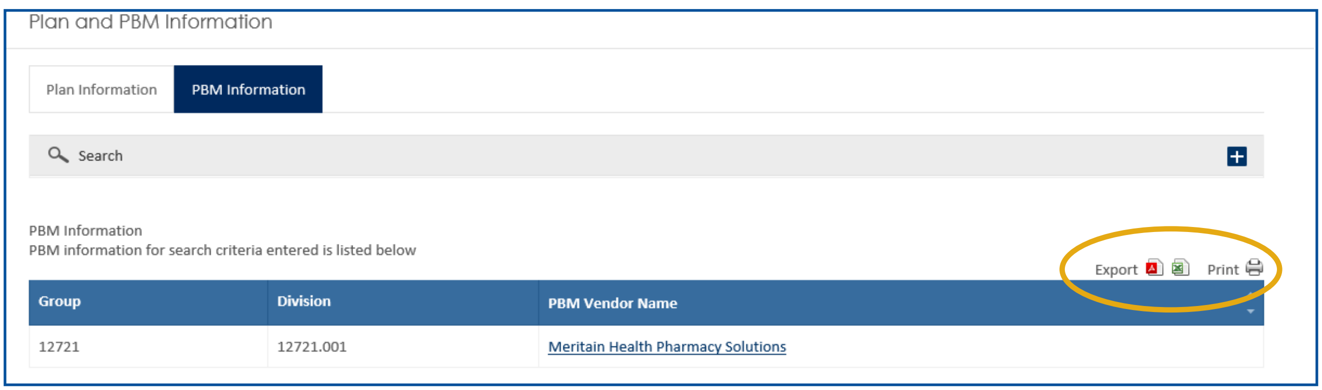
You will be able to select one or more groups. As you select groups, the divisions belonging to those groups selected are populated under the Divisions tab. Then, click *Search*.



The plan information list will appear. Click on the attachment to download and export in PDF or Excel format. In addition, you can print the attachment.

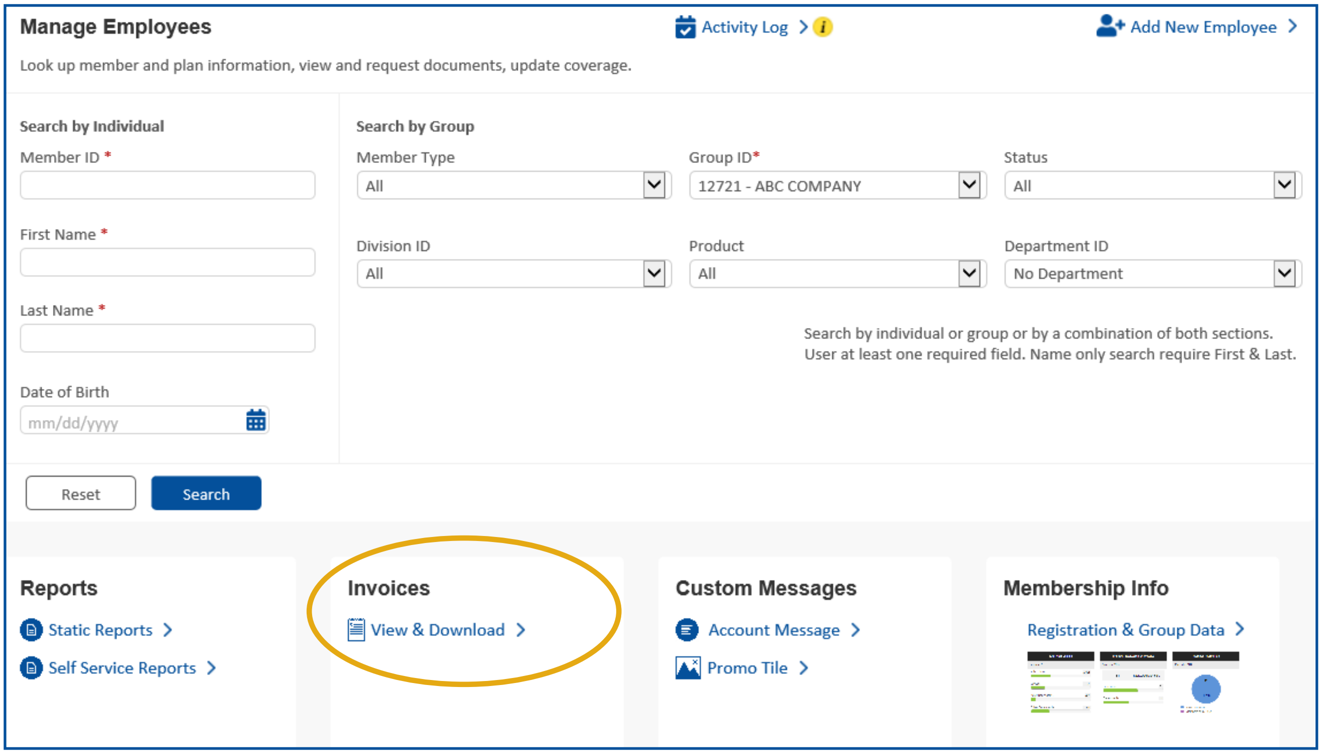


The PBM information list will appear. Click on the attachment to download and export in pdf or excel format. In addition, you can print the attachment. Then, click on the PBM vendor name link.

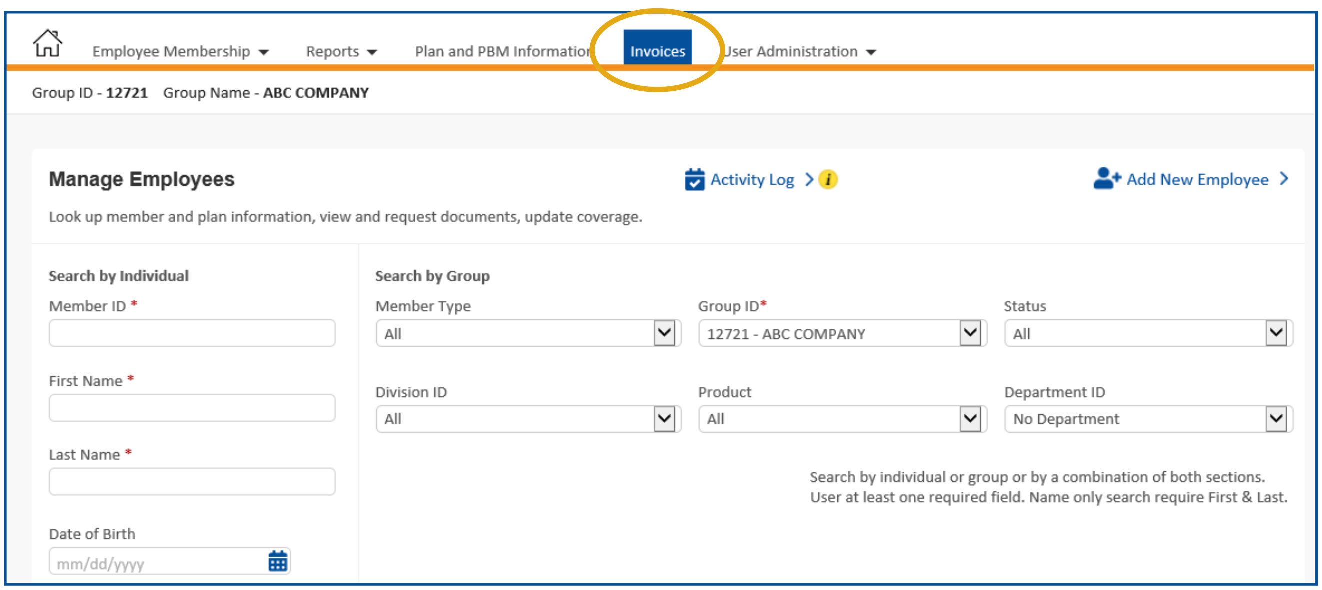


Invoices

For help managing your health benefit plan, you can download invoices right from the employer website. Go to the *Invoices* widget at the bottom of the employer homepage and select *View & Download*.



In addition, you can view invoices, right on the homepage. Just click on *Invoices* on the top menu toolbar.



A list of all the invoices will appear. You can click on the attachment to download your invoices in PDF or Excel format. You can also print your invoices. These can be displayed by clicking on the icon.

Filter

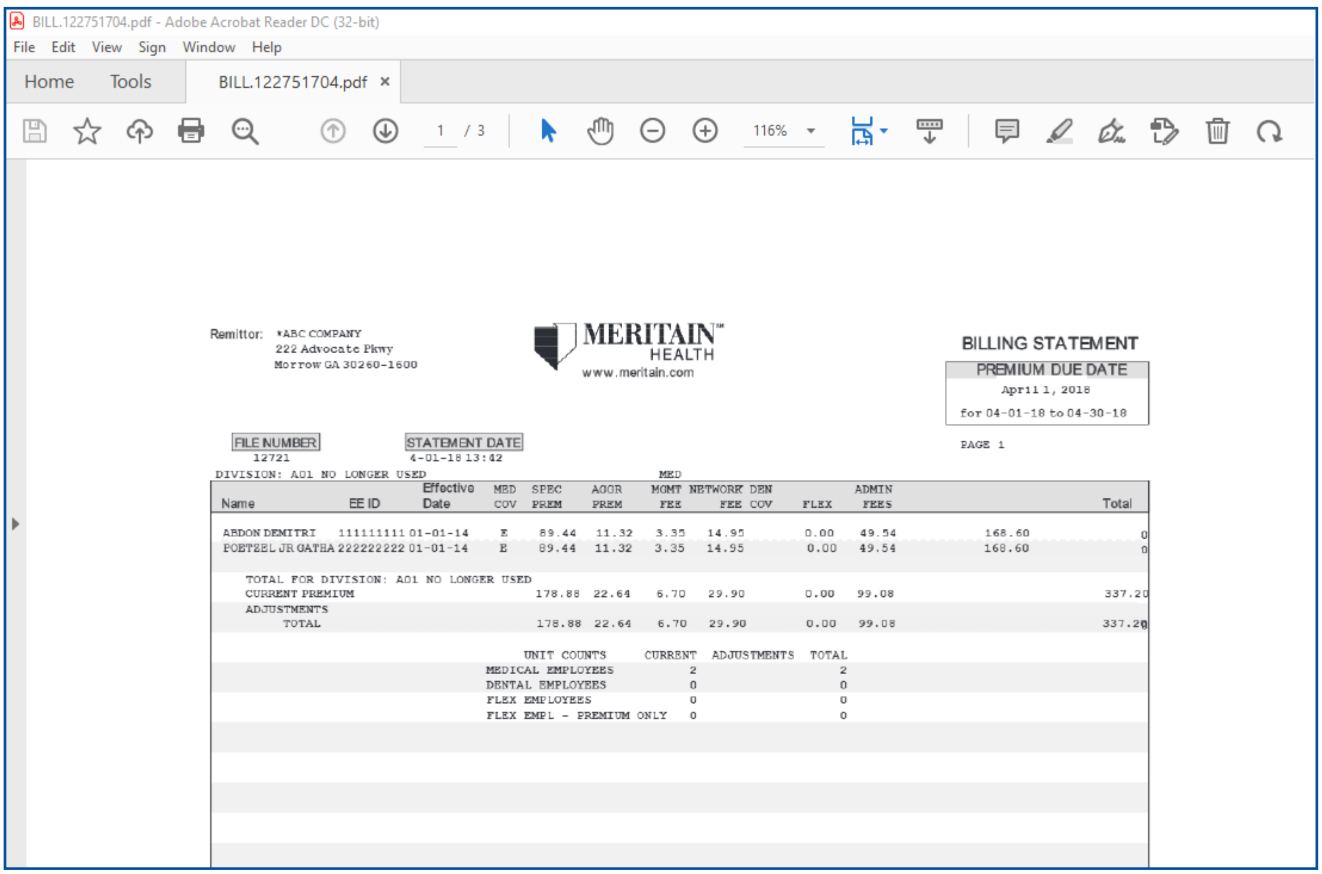
Invoices
Click on the attachment to download the invoice

Export Print

Group ID	Invoice Date	Due Date	Invoice Amount($)	Attachment
12721	04/01/2018	04/01/2018	337.20	
12721	12/12/2017	12/01/2017	124147.09	
12721	11/14/2017	11/01/2017	121993.80	
12721	10/17/2017	10/01/2017	121884.74	
12721	09/19/2017	09/01/2017	119788.71	
12721	08/29/2017	08/01/2017	120685.53	
12721	06/30/2017	07/01/2017	113000.94	
12721	06/13/2017	06/01/2017	12736.79	
12721	05/09/2017	05/01/2017	111618.16	
12721	04/18/2017	04/01/2017	112217.49	

Showing 1-10 of 10 results 1

This is an example of an invoice in PDF form.



Remittor: *ABC COMPANY
222 Advocate Pkwy
Morrow GA 30260-1600

MERITAIN HEALTH
www.meritain.com

BILLING STATEMENT

PREMIUM DUE DATE
April 1, 2018
for 04-01-18 to 04-30-18

FILE NUMBER 12721

STATEMENT DATE 4-01-18 13:42

PAGE 1

DIVISION: A01 NO LONGER USED

Name	EE ID	Effective Date	MED COV	SPEC PREM	AGGR PREM	MED MGMT FEE	NETWORK FEE	DEN COV	FLEX	ADMIN FEES		Total
ABDON DEMITRI	111111111	01-01-14	E	89.44	11.32	3.35	14.95		0.00	49.54	168.60	0
POETZEL JR GATHA	222222222	01-01-14	E	89.44	11.32	3.35	14.95		0.00	49.54	168.60	0
TOTAL FOR DIVISION: A01 NO LONGER USED												
CURRENT PREMIUM				178.88	22.64	6.70	29.90		0.00	99.08		337.20
ADJUSTMENTS												
TOTAL				178.88	22.64	6.70	29.90		0.00	99.08		337.20

UNIT COUNTS	CURRENT	ADJUSTMENTS	TOTAL
MEDICAL EMPLOYEES	2		2
DENTAL EMPLOYEES	0		0
FLEX EMPLOYEES	0		0
FLEX EMPL - PREMIUM ONLY	0		0

User Administration

When it comes to managing your employee benefits plan, your Meritain Health website has everything you need! It's fast and easy to add or remove users to your group's account.

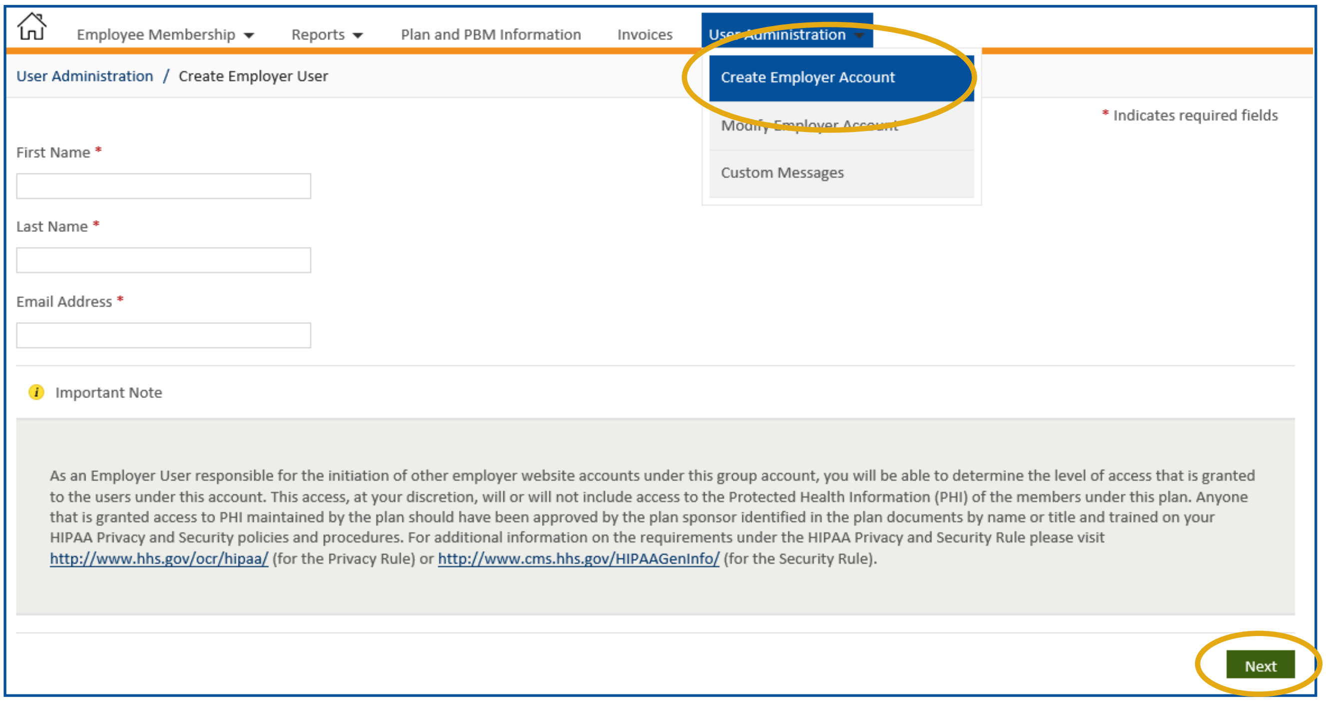
Please note, Meritain Health requires employer users to sign our Authorization Form and submit it to a client advocate. Once we've received your completed form, you will be authorized for the functions outlined in this guide. [add disclaimer to screen: *Not all groups have this feature available/elected for their employer users.*]

Create Employer Account

Once logged in, it's easy to add users to your Meritain Health website. First, click on the *User Administration* drop-down on the top toolbar of the homepage.

Next, click on *Create Employer Account*.

You'll be able to add user information, such as first name, last name and email address. After you've added this information, click *Next*.

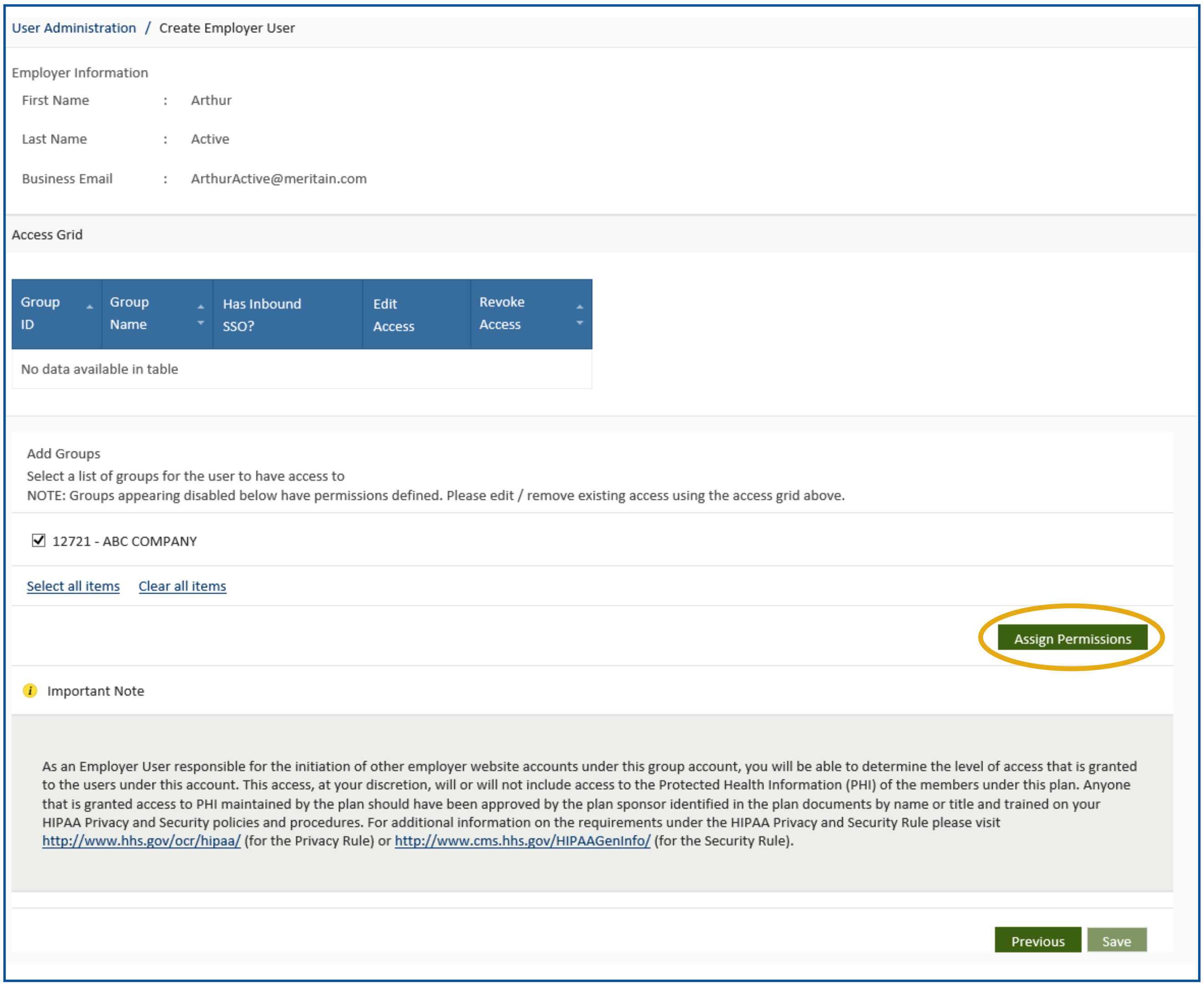


After the new user is created, you can assign permissions to their account when you click the *Assign Permissions* button.

Permissions you can assign include:

- Access to view members' claims
- Access to read dashboard messages
- Ability to enroll members
- Ability to create more employer users

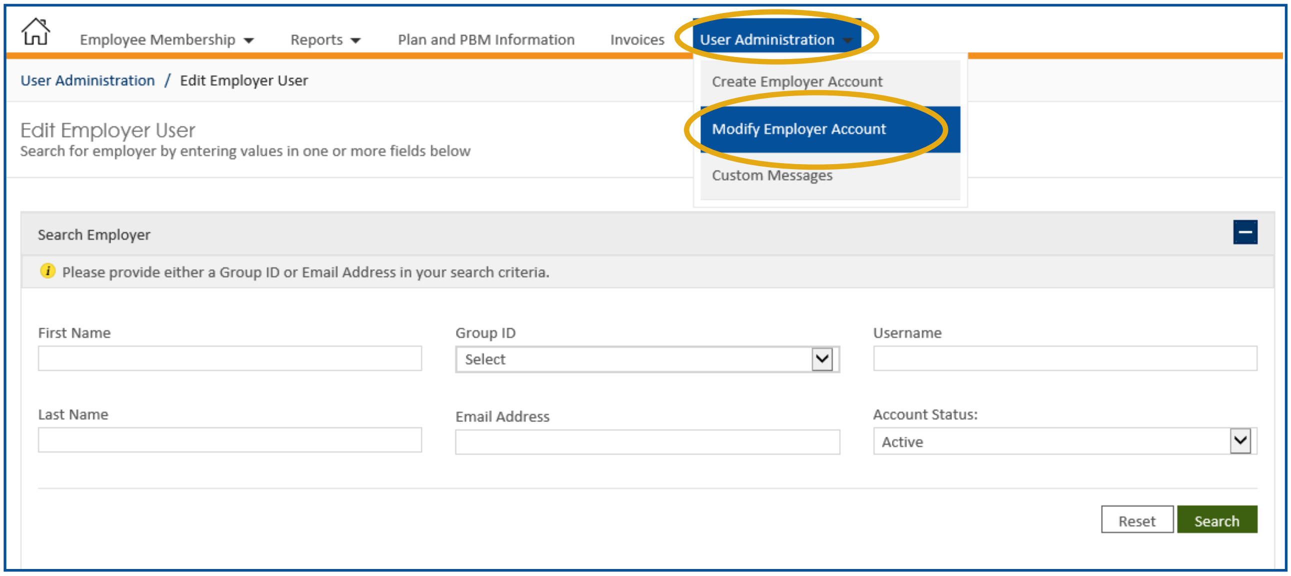
After you have assigned permissions to the user, click the *divisions and reports* they will have access to. Click the *Save Permission* button on the bottom right to save your changes.



Modify Employer Account

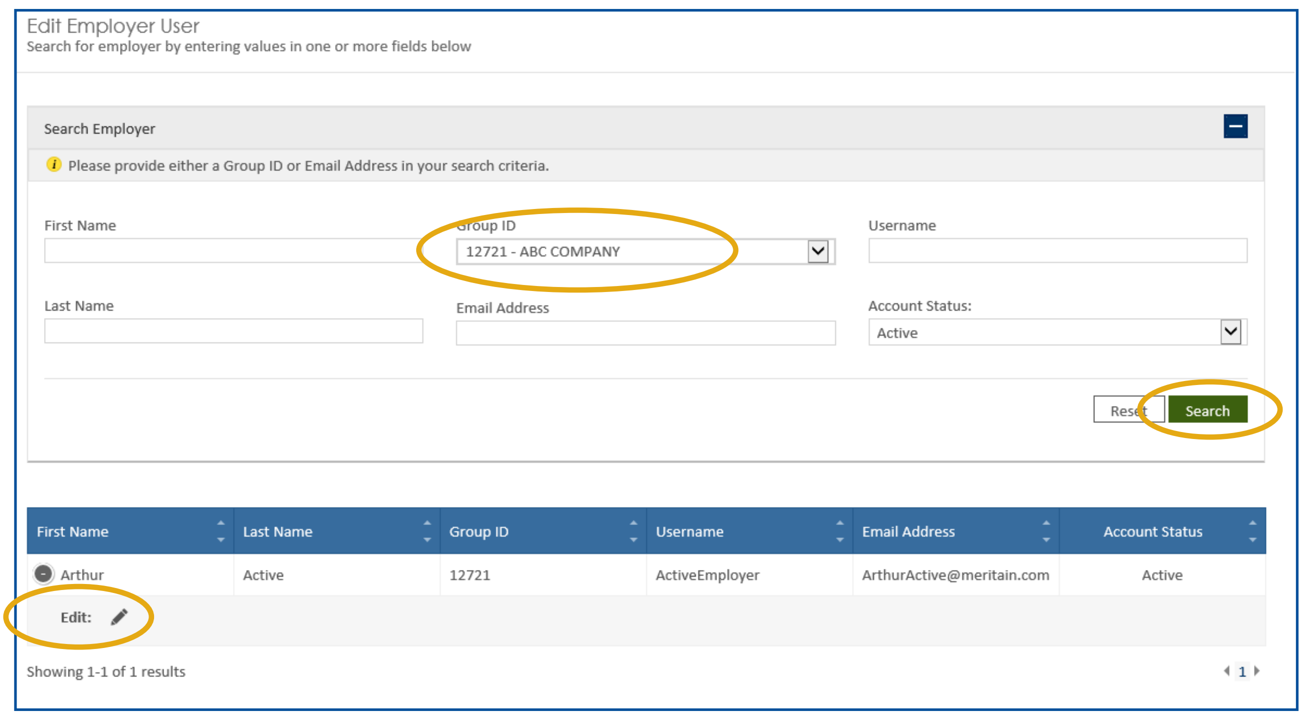
If an employee no longer needs permission as a user on the website, you can easily remove them from the account.

On the homepage, click on the *User Administration* dropdown on the top toolbar and choose *Modify Employer Account*.



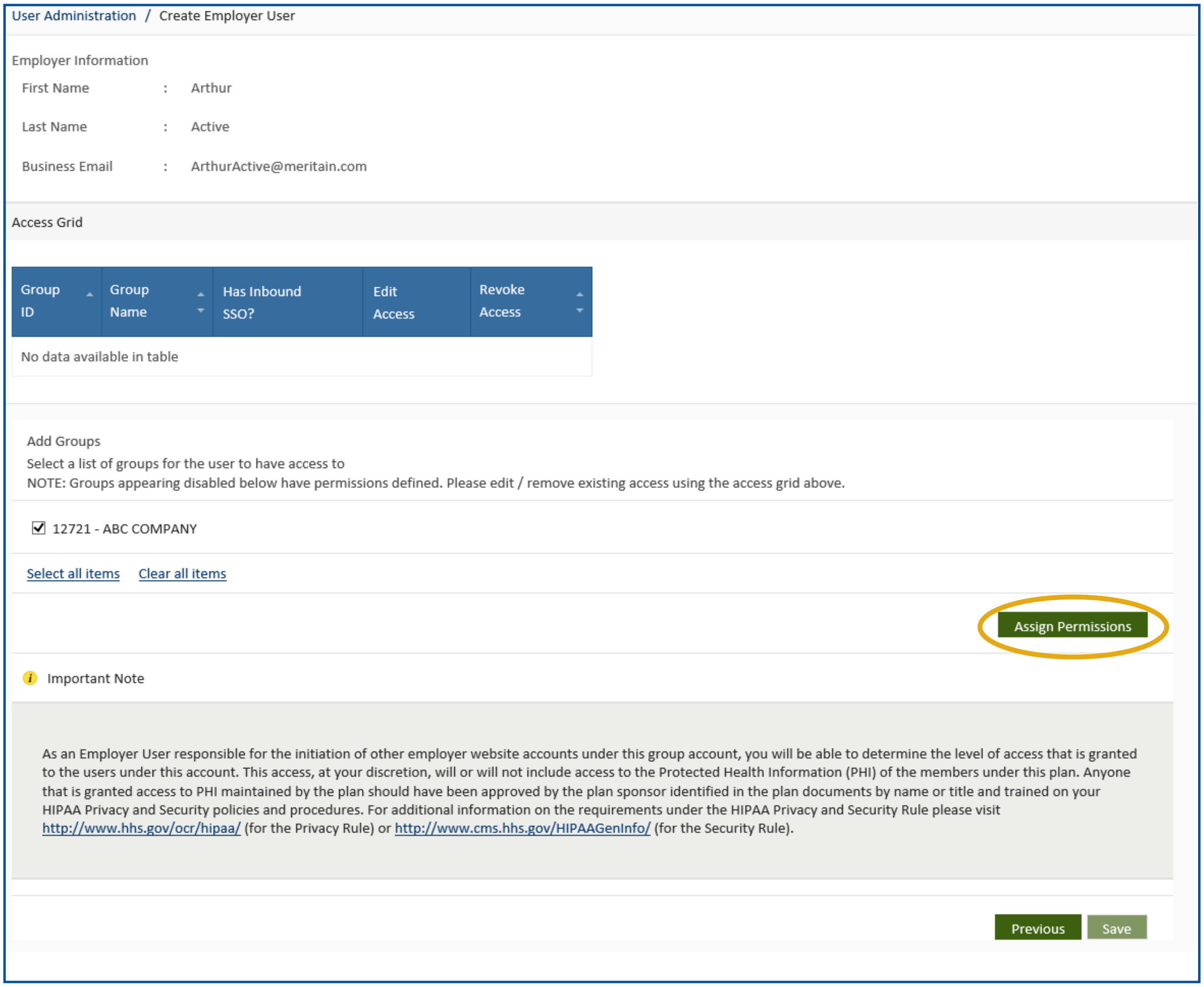
You will arrive at the Edit Employer User page. From here, enter identifying information for the group, such as name or group ID, and click *Search*.

Find the group in the list and click *Edit* in the last column on the left.



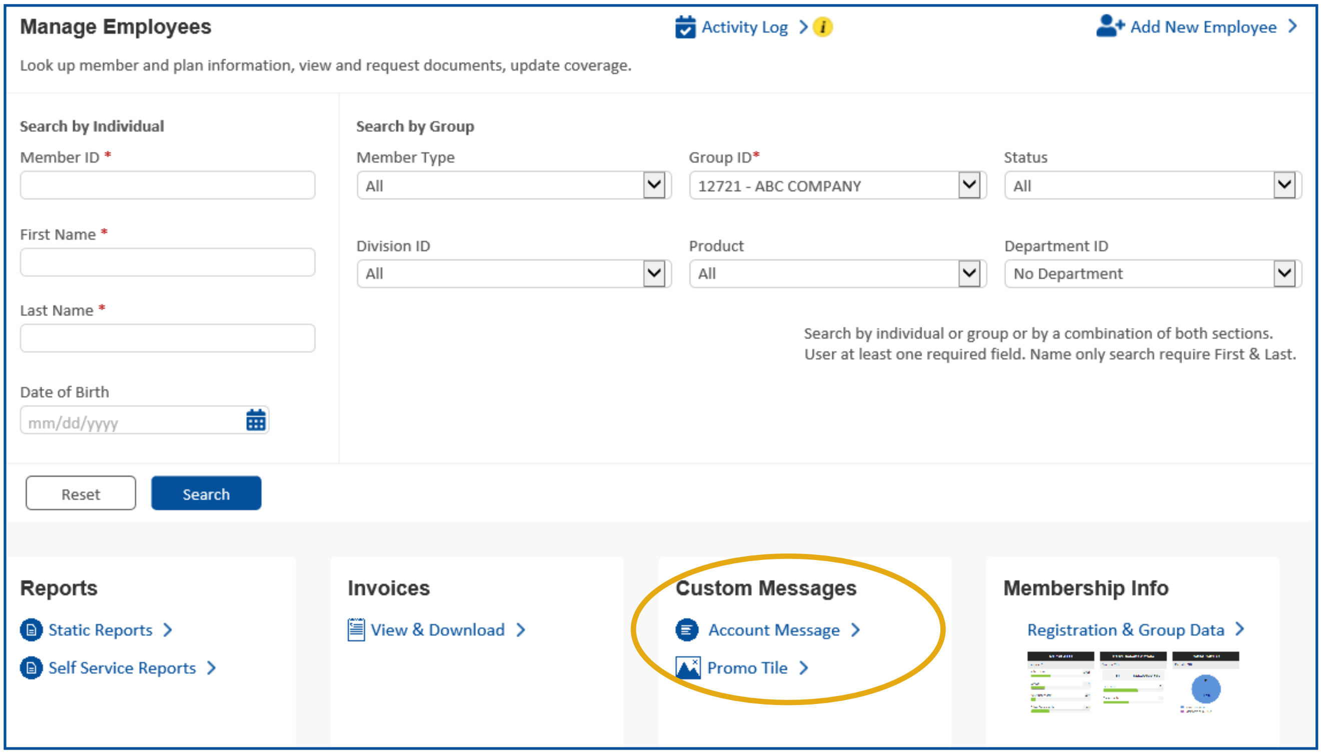
You will pull up the access grid. Click the icon under *Edit Access* and choose *Inactive*. **Please note:** if you click *Revoke Access*, you will get an error message.

Next, click on the *Assign Permissions* button. In the list of permissions, uncheck all selections. Click the *Save Permission* button on the bottom right to save your changes.



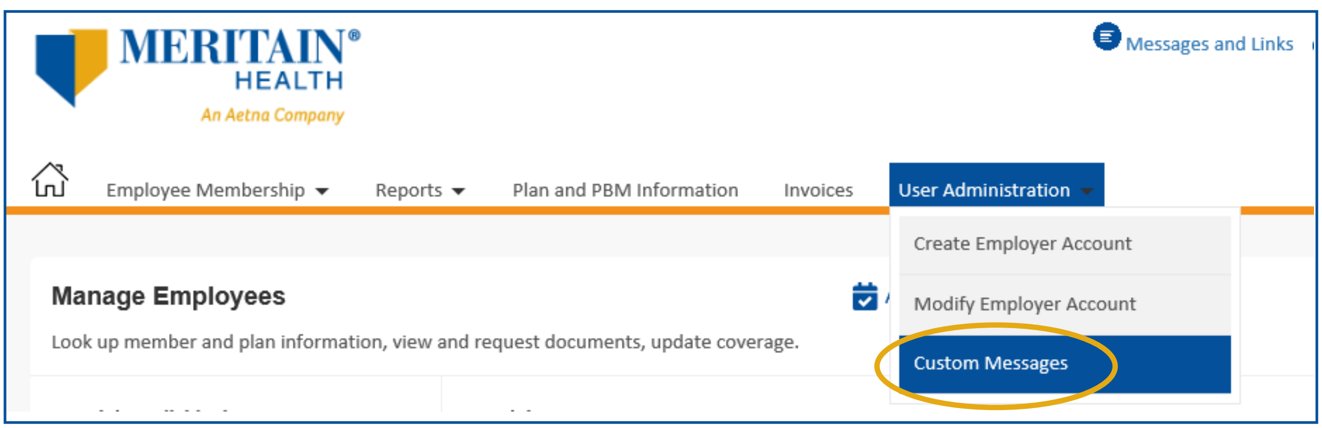
Custom Messages

You can access Custom Messages in widget at the bottom of the employer homepage and select the report options available.



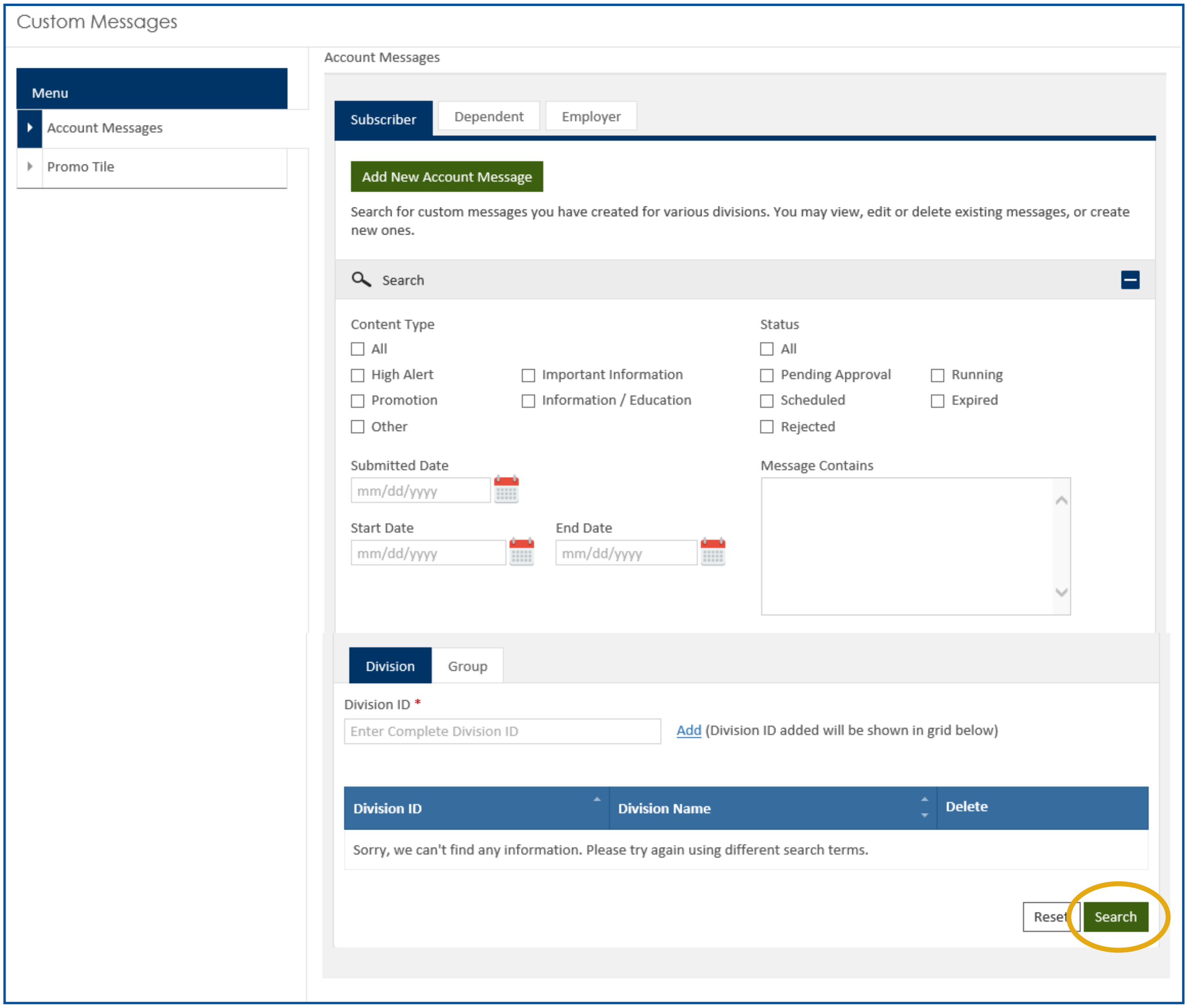
You can also access Custom Messages, by clicking on the User Administration dropdown on the top toolbar of the homepage.

Next, click *Custom Messages*.

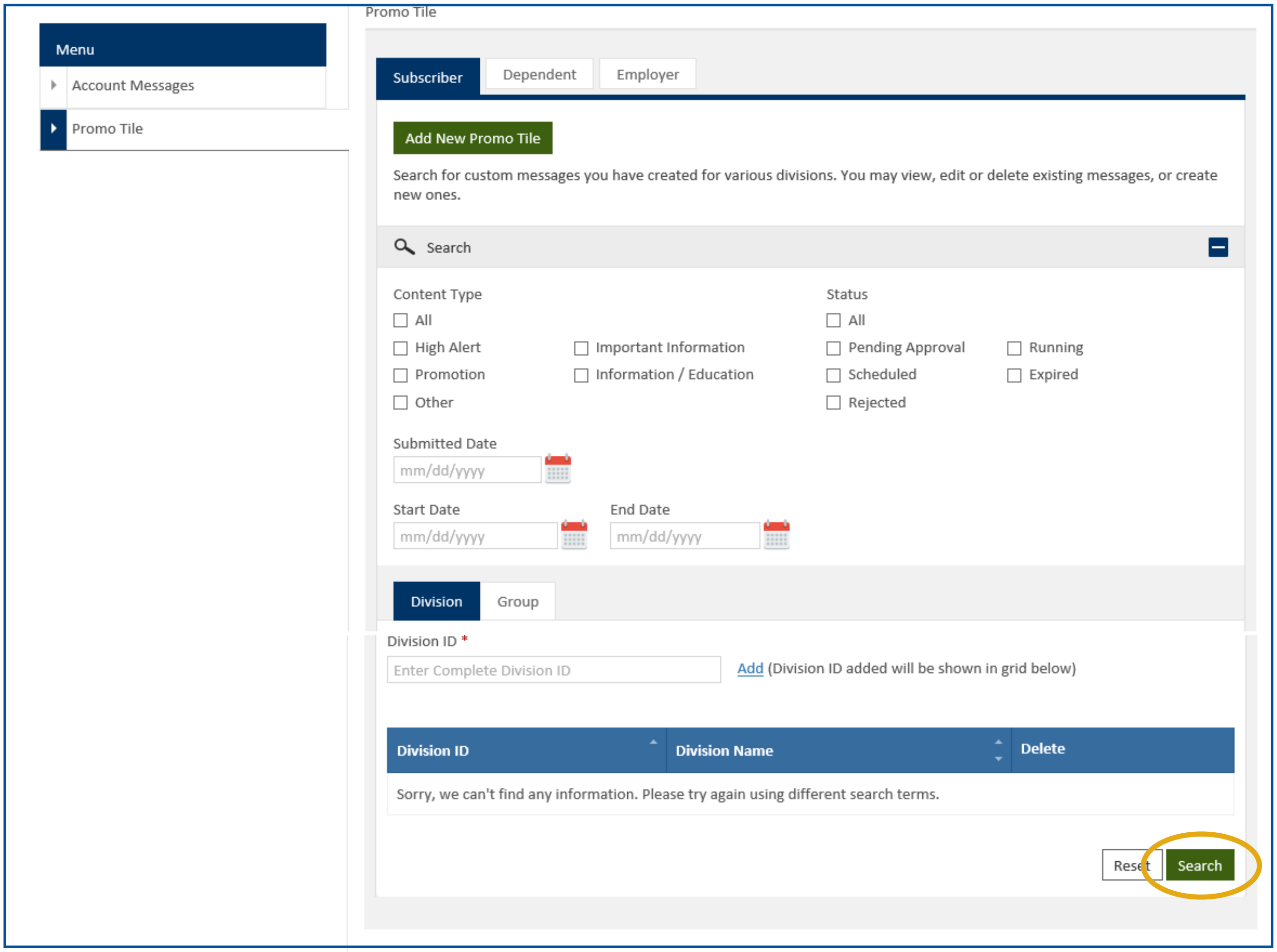


You can customize messages by selecting *Account Messages* or *Promo Tile*. You have the option to choose the type of member (Subscriber/Dependent/Employer) using the tabs available. You will be able to set dashboard message or promo tile for each type of member.

To add a new message for a group/division/employer click on *Account Messages*. Next, enter the information required and click *Search*.



To add a new promo tile for a group/division/employer click on *Promo Tile*. Next, enter the information required and click *Search*.



For more information

The Meritain Health employer website is your resource to manage your employee benefits plan.

If you have any questions about logging in or navigating the website, please contact your client advocate team member or your Meritain Health representative.

MERITAIN® HEALTH
An Aetna Company