Meritain Health®
Employer Website User Guide

Simple. Transparent. Versatile.

At Meritain Health®, we're creating unrivaled connections.

Meritain Health®
an aetna® company

Contents

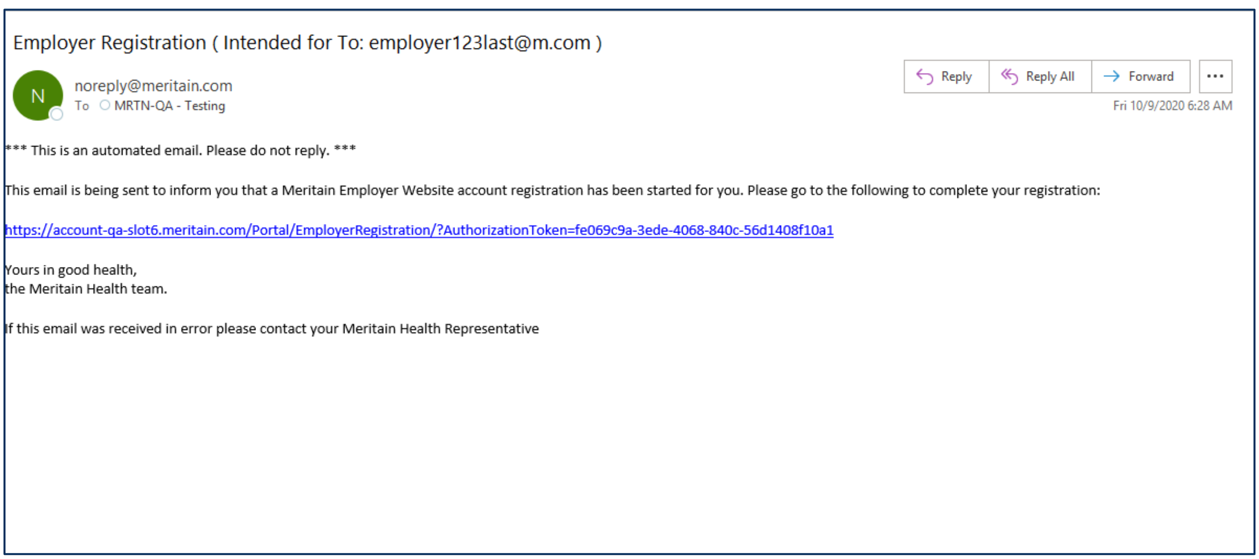
Introduction

Meritain Health® offers employers online access to account balances, claim information, member information, health coverage, drug and prescription information and invoices. Our employer portal is your resource to manage your employee benefits plan. Features may vary depending on your level of the access.

Registration

When a new employer is set up on the website, an employer user will be selected as the group's representative. A system generated email will be sent to the employer user to register. Invitations to register remain active for 15 days. Once registered, the group representative 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 provided in the system generated email.


Employer Registration (Intended for To: employer123last@m.com)

N noreply@meritain.com
To MRTN-QA - Testing

Reply | Reply All | Forward | ...

Fri 10/9/2020 6:28 AM

*** This is an automated email. Please do not reply. ***

This email is being sent to inform you that a Meritain Employer Website account registration has been started for you. Please go to the following to complete your registration:

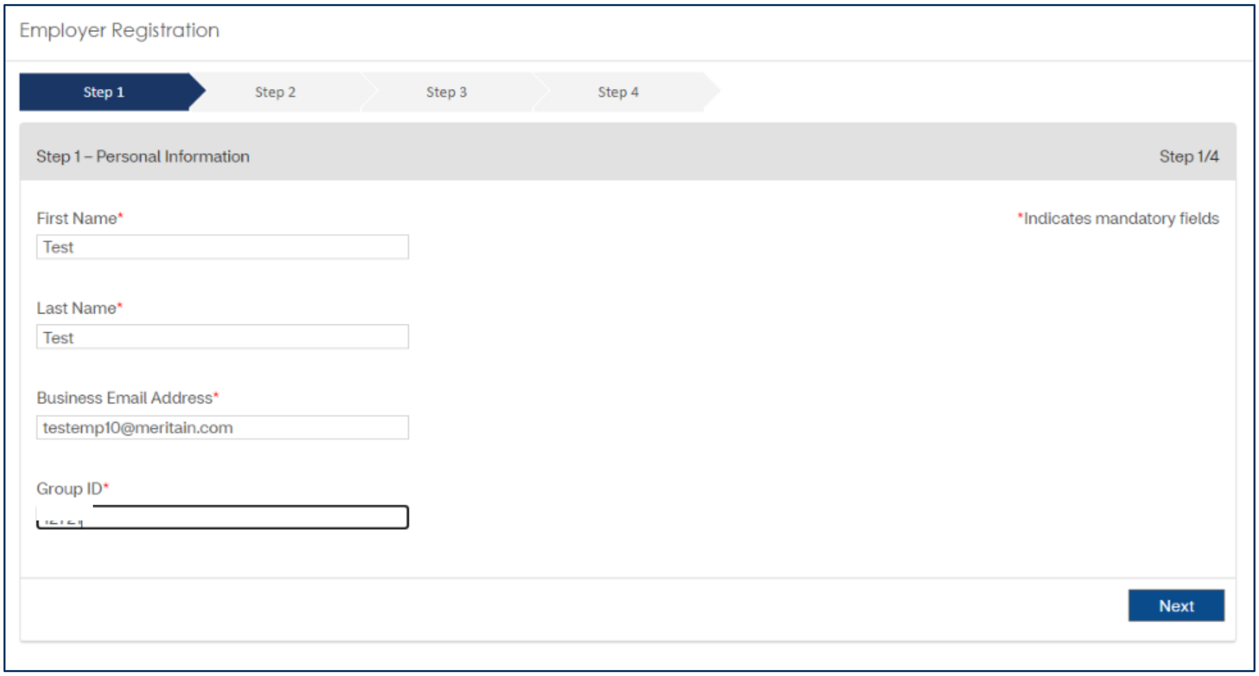
https://account-qa-slot6.meritain.com/Portal/EmployerRegistration/?AuthorizationToken=fe069c9a-3ede-4068-840c-56d1408f10a1

Yours in good health,
the Meritain Health team.

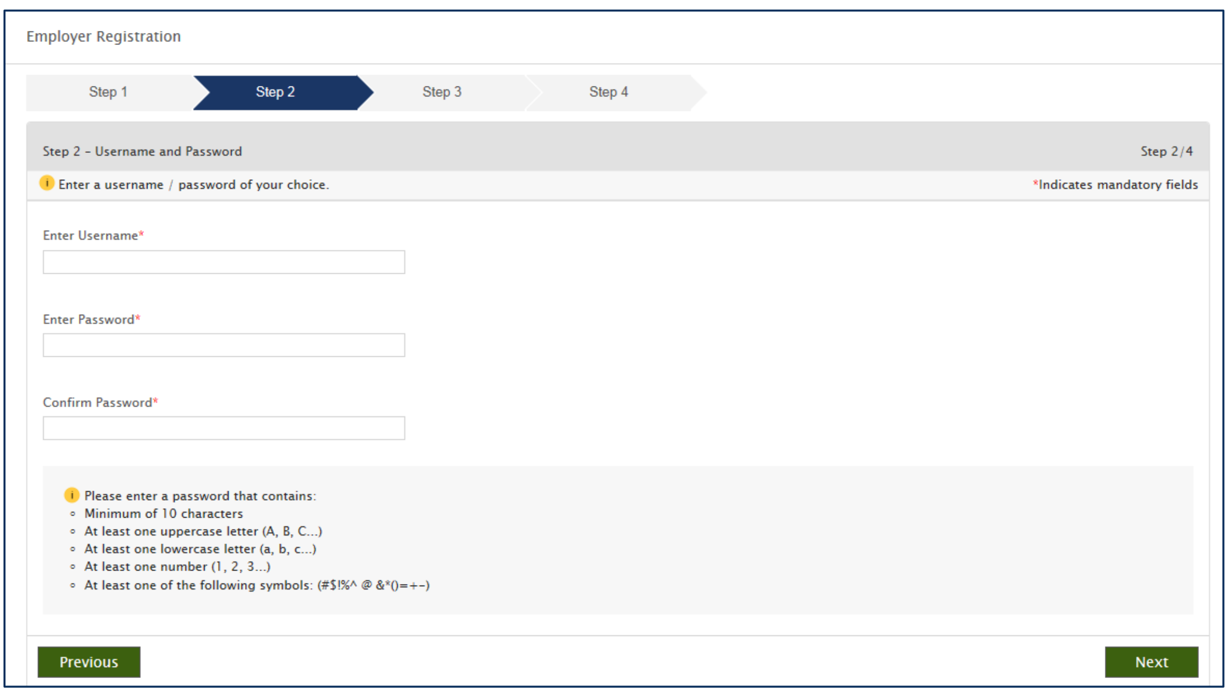
If this email was received in error please contact your Meritain Health Representative

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

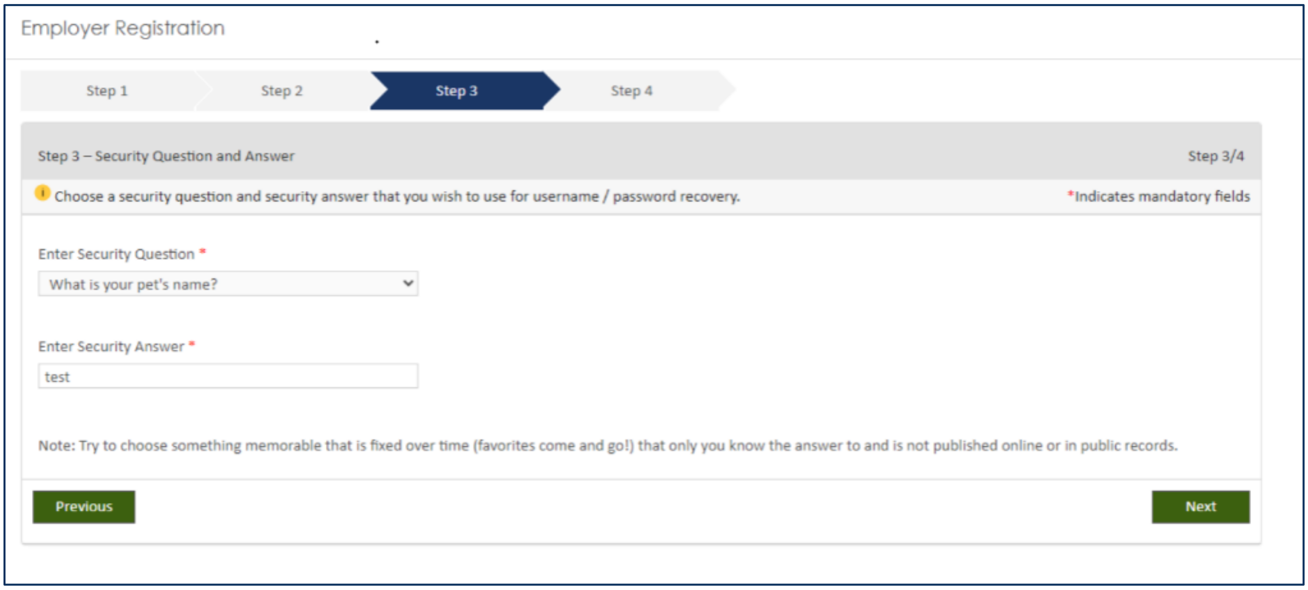
Step 1: Enter your personal information on the *registration* page and then, click *Next*.



Step 2: Create your username and password.



Step 3: Answer security question



Employer Registration

Step 1 Step 2 Step 3 Step 4

Step 3 – Security Question and Answer

Step 3/4

Choose a security question and security answer that you wish to use for username / password recovery.

*Indicates mandatory fields

Enter Security Question *

What is your pet's name?

Enter Security Answer *

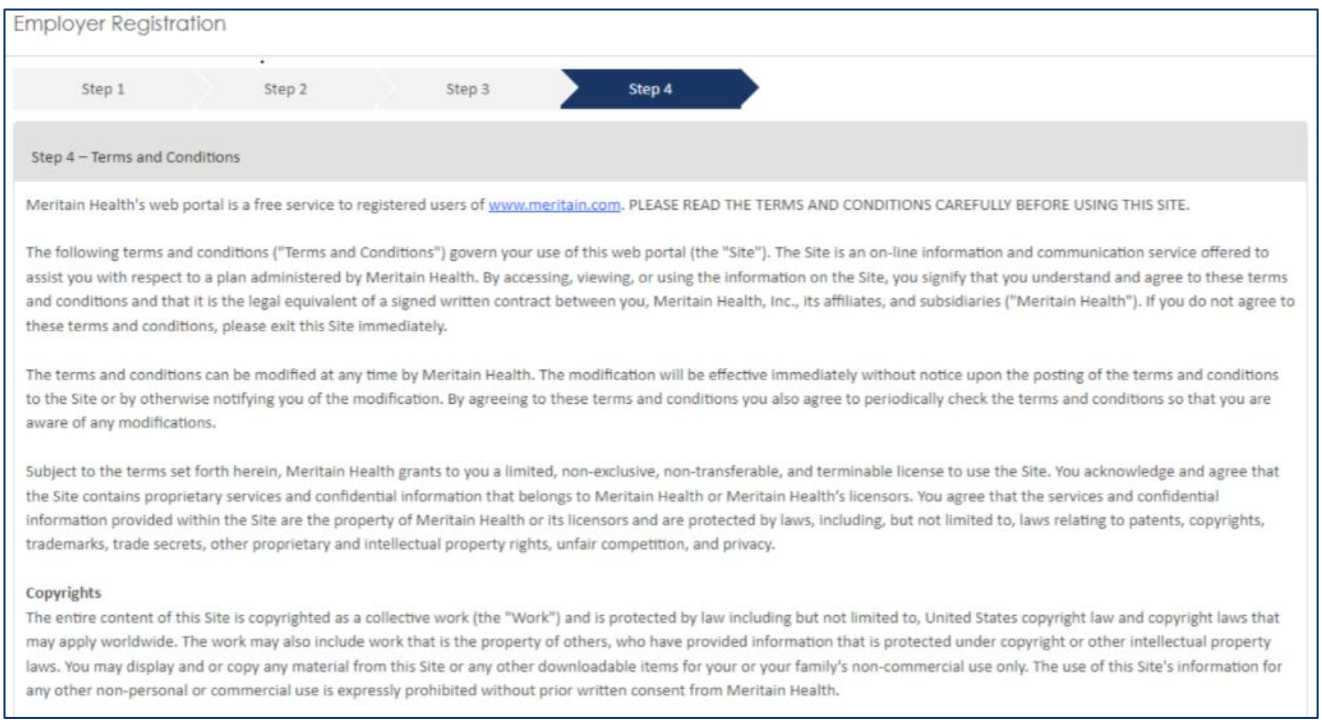
test

Note: Try to choose something memorable that is fixed over time (favorites come and go!) that only you know the answer to and is not published online or in public records.

Previous

Next

Step 4: Terms and conditions



Employer Registration

Step 1 Step 2 Step 3 Step 4

Step 4 – Terms and Conditions

Meritain Health's web portal is a free service to registered users of www.meritain.com. PLEASE READ THE TERMS AND CONDITIONS CAREFULLY BEFORE USING THIS SITE.

The following terms and conditions ("Terms and Conditions") govern your use of this web portal (the "Site"). The Site is an on-line information and communication service offered to assist you with respect to a plan administered by Meritain Health. By accessing, viewing, or using the information on the Site, you signify that you understand and agree to these terms and conditions and that it is the legal equivalent of a signed written contract between you, Meritain Health, Inc., its affiliates, and subsidiaries ("Meritain Health"). If you do not agree to these terms and conditions, please exit this Site immediately.

The terms and conditions can be modified at any time by Meritain Health. The modification will be effective immediately without notice upon the posting of the terms and conditions to the Site or by otherwise notifying you of the modification. By agreeing to these terms and conditions you also agree to periodically check the terms and conditions so that you are aware of any modifications.

Subject to the terms set forth herein, Meritain Health grants to you a limited, non-exclusive, non-transferable, and terminable license to use the Site. You acknowledge and agree that the Site contains proprietary services and confidential information that belongs to Meritain Health or Meritain Health's licensors. You agree that the services and confidential information provided within the Site are the property of Meritain Health or its licensors and are protected by laws, including, but not limited to, laws relating to patents, copyrights, trademarks, trade secrets, other proprietary and intellectual property rights, unfair competition, and privacy.

Copyrights

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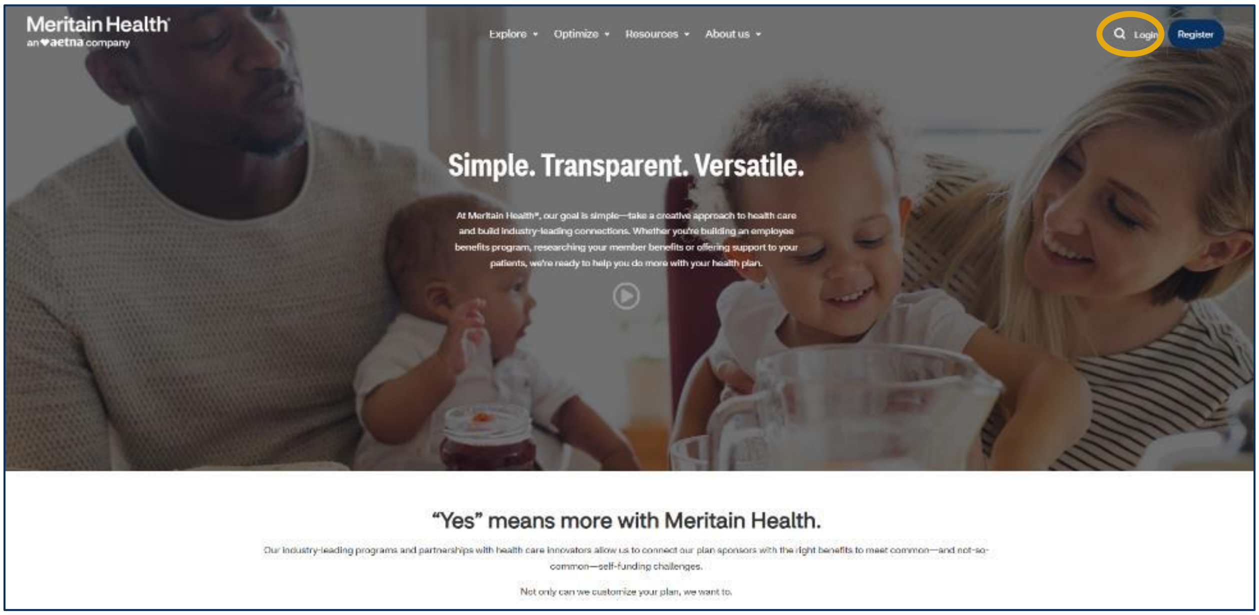
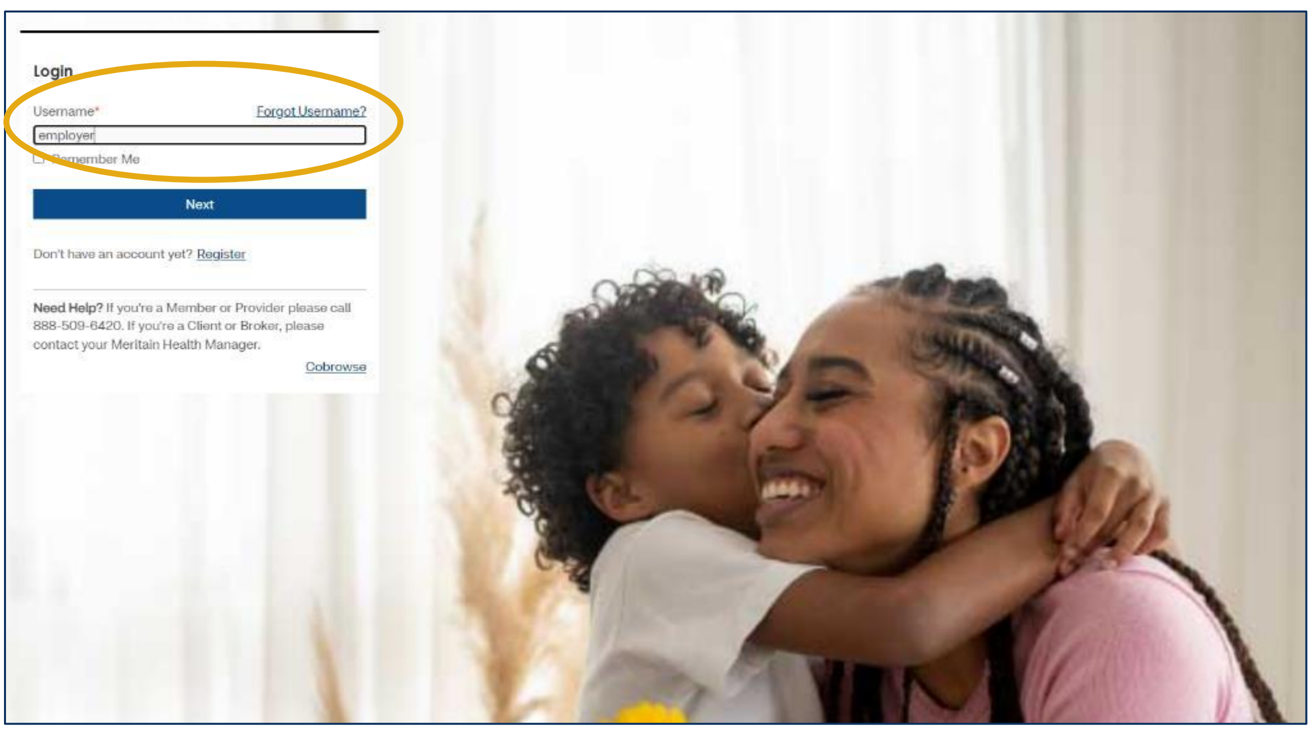
Logging In

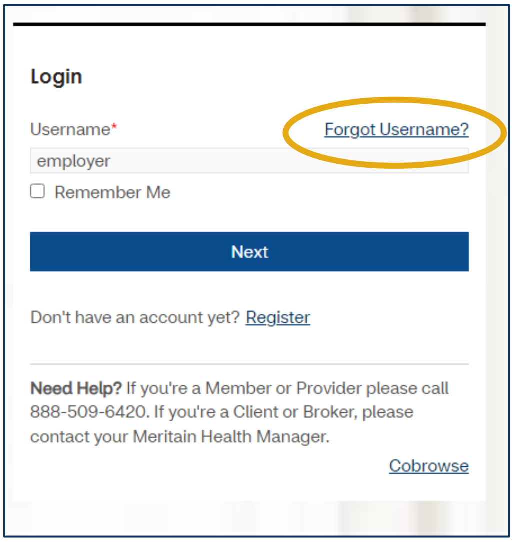
To log in to the portal, go to www.meritain.com and click *Login* in the upper right-hand corner of the Meritain Health home page.



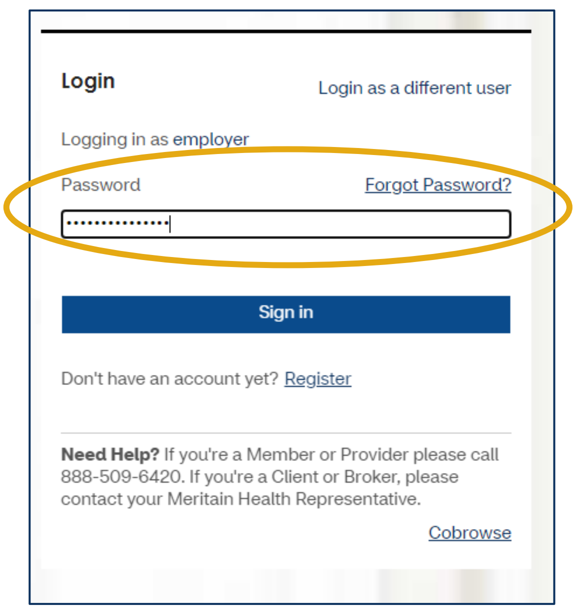
1. Enter your username on the *Username* field.



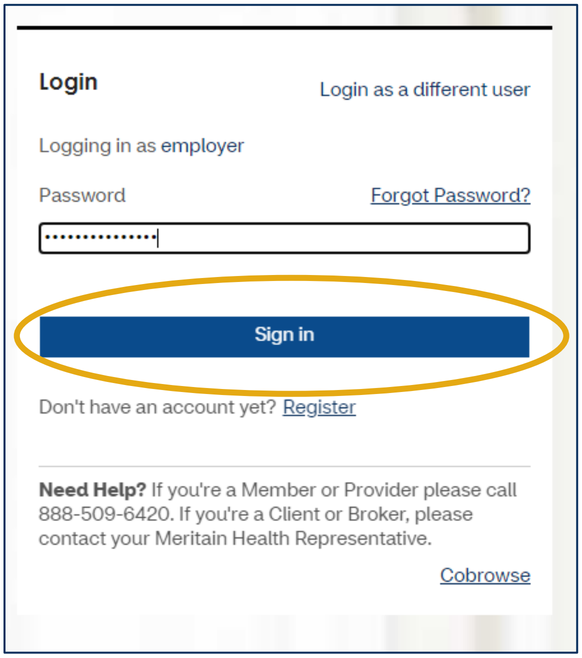
2. If you forget your username, click the *Forgot Username* link (located on the login page) and follow the prompts.



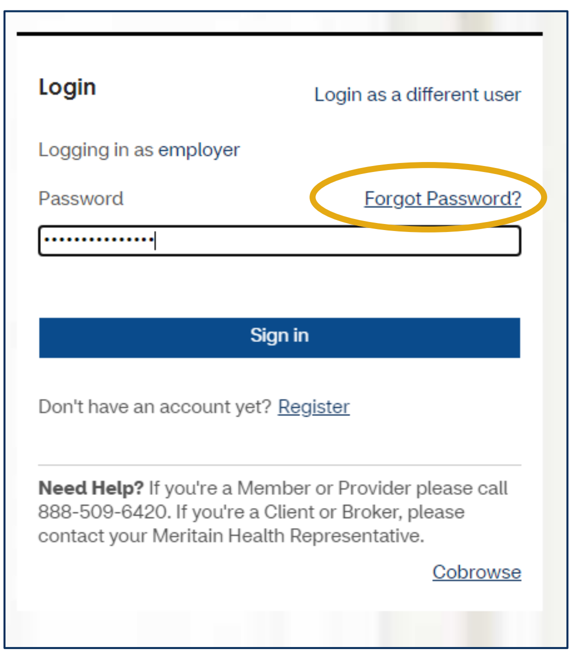
3. Enter password in the *Password* field.



4. Then, click the *Sign In* button.

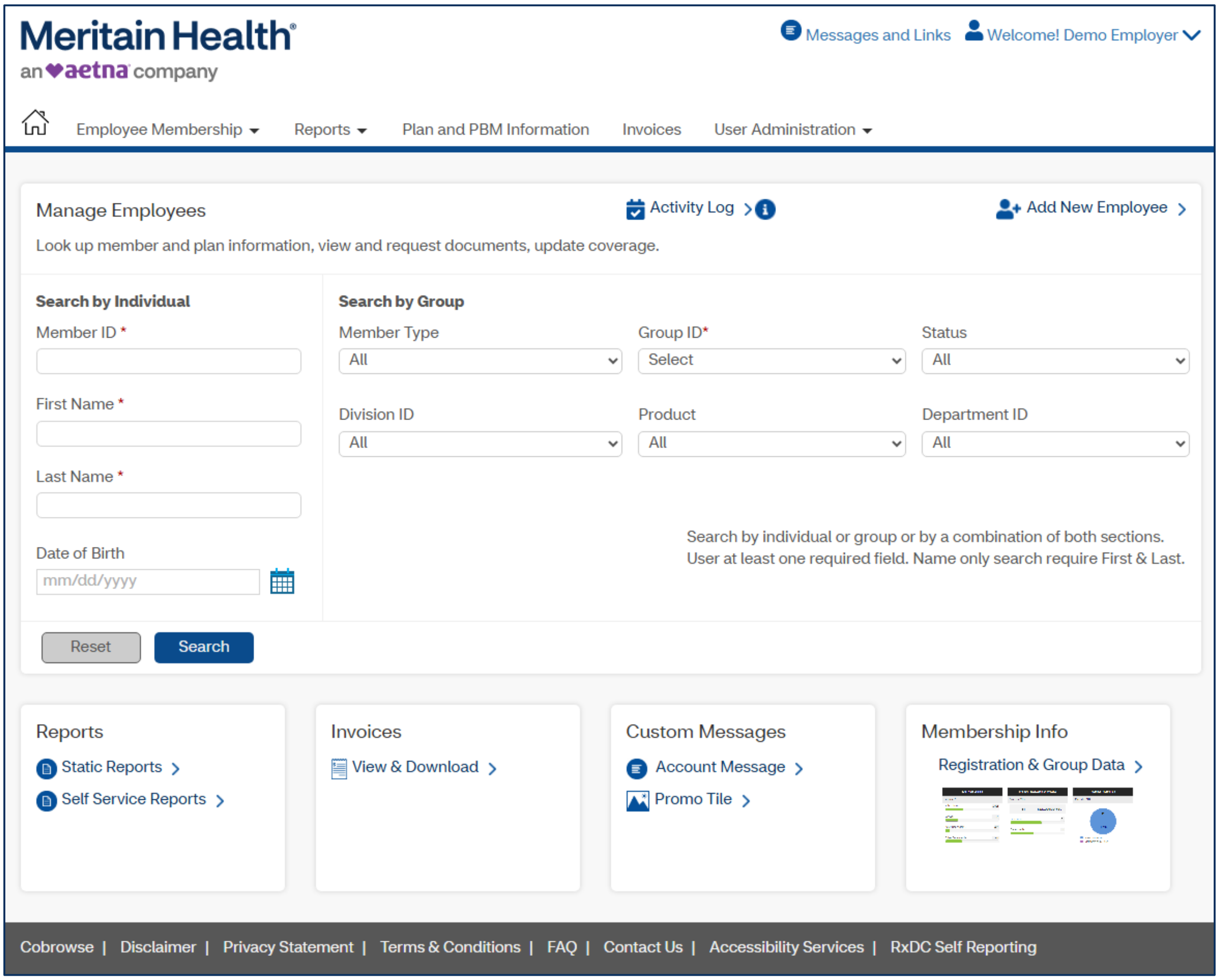


5. If you forget your password, click the *Forgot Password* link (located on the login page) and follow the prompts.



Employer home page

Our employer homepage allows you to easily manage your employee membership. You can search for a specific member, review your activity log or add a new employee directly from the homepage.



The homepage also has convenient quick links to resources employers use most, such as reporting and invoicing. The *Custom Messages* link allows you to compose messages to your members and the *Membership Info* link gives you a high-level overview of your plan membership.

Employer Navigation Flow

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

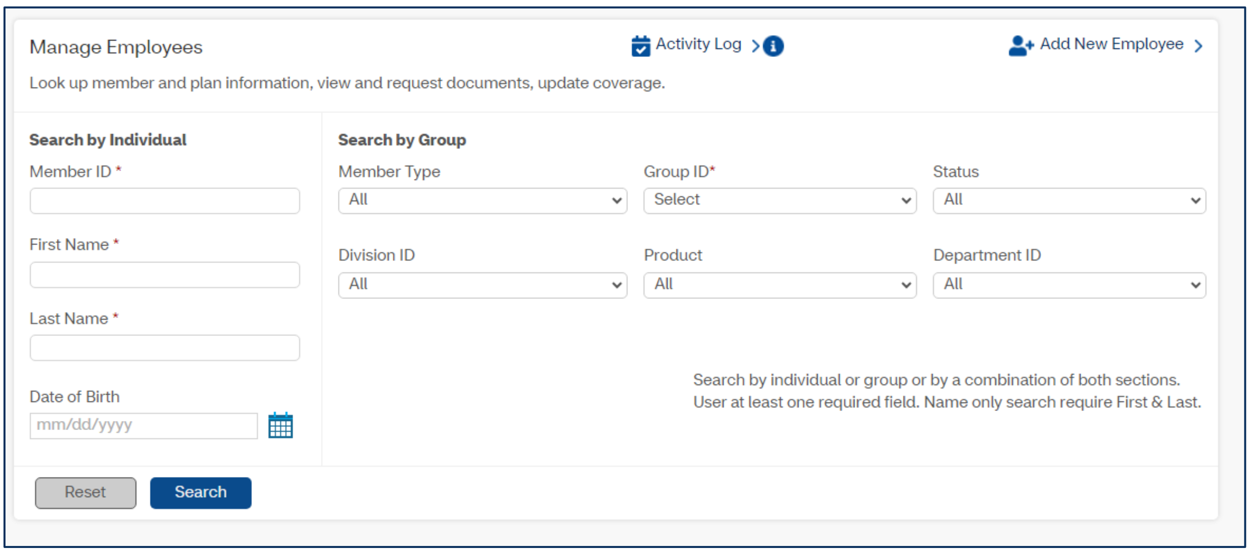
Employee Membership

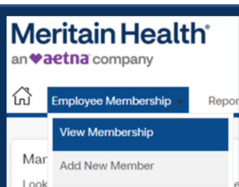
Our employer website is your one-stop-shop to easily find the benefits and eligibility information you need. You can find important member eligibility information, plus request and print ID cards, right on the employer homepage.

View Membership

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

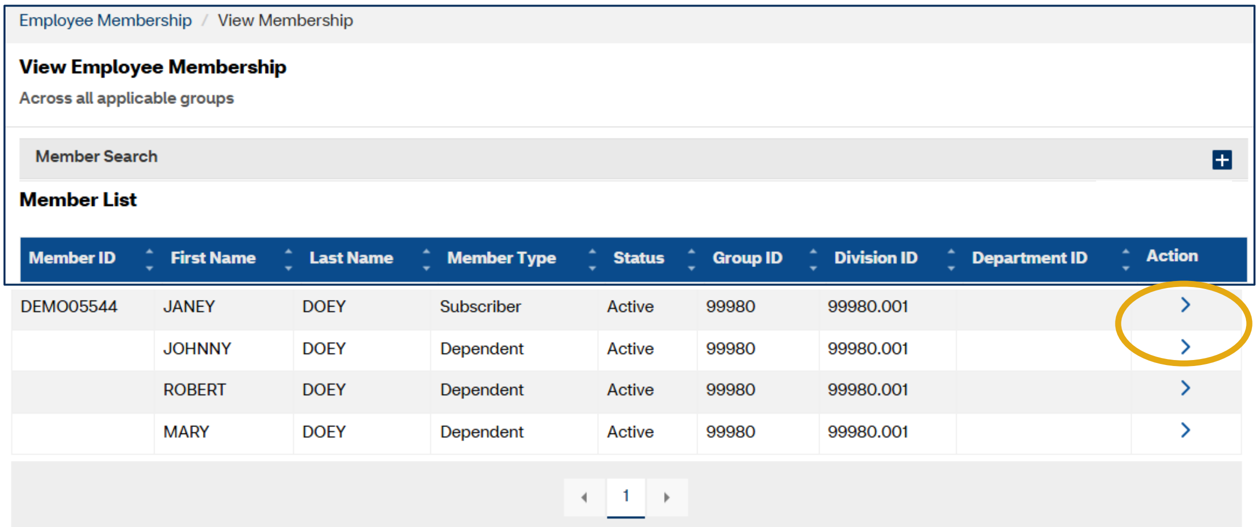
Search for members by entering the member's ID, name or group ID and click *Search*. If you need to start over, click *Reset* to clear the form.



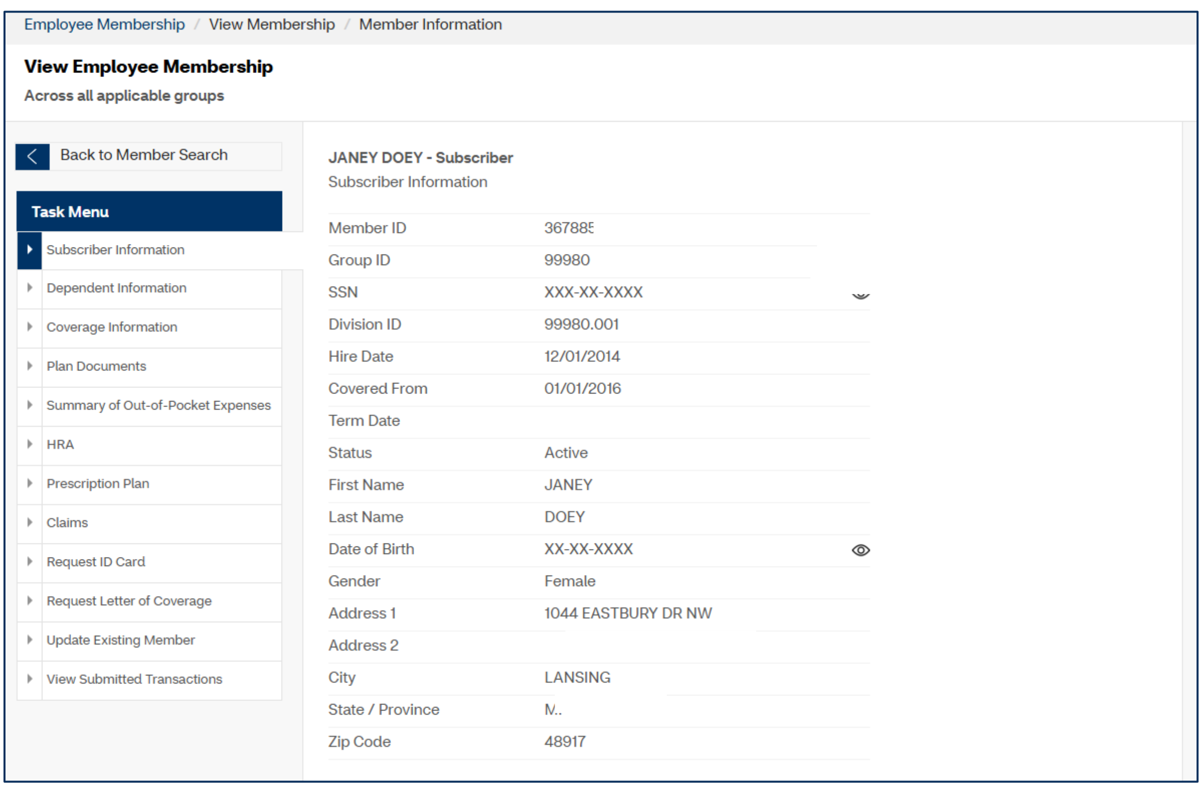


You can also go to the Employee Membership drop-down on the top toolbar and click *View Membership* to search for members enrolled in the plan.

To view specific information about a member, click the arrow under *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 the employee records.

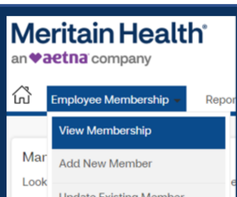


Task Menu

Subscriber Information	View demographics and ID numbers.
Dependent Information	List each dependent and their information.
Plan documents	Links to documents for each plan.
Coverage Information	List 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 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 the ID card.
Request Letter of Coverage*	Request a copy of the 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.	

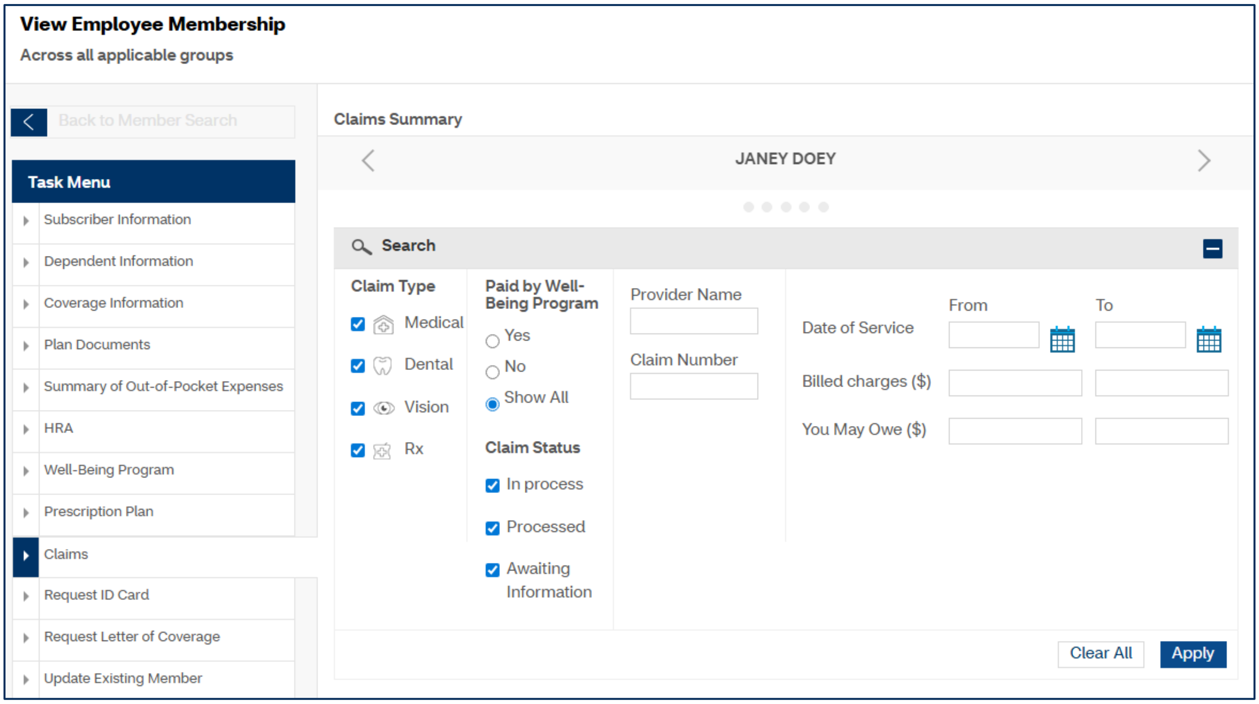
Claims

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 the 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
In Process	Medical	INCOMPLETE/ILLEGIBLE CLAIM DEFAULT	07/05/2023	GL0M465	$222.00	
In Process	Medical	REIMBURSEMENT FORM DEFAULT	09/14/2022	FH8W927	$0.00	
In Process	Medical	INCOMPLETE/ILLEGIBLE CLAIM DEFAULT	02/02/2022	EQ3BB86	$1.00	
In Process	Medical	INCOMPLETE/ILLEGIBLE CLAIM DEFAULT	07/10/2019	B45YR83	$10.00	

Showing 1-4 of 4 results 1

Information not available until claim completes processing.

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

Back To Claims Summary

View EOB

Claim Information

Group ID	127[illegible]	Address 1	APT 251 [illegible]
Subscriber	ERIC DEA[illegible]	Address 2	
Patient Name	ERIC DEA[illegible]	City	LANCASTER
Patient Account Number	K1252025400	State/Province	OH
Provider Name	FRIEDELL	Zip Code	43130-9539
Diagnosis Code			

Payment Information

You May Owe
0.00

Billed Charges $25.00

* Exact amount owed may be different, see EOB for details

Processed Date	06/27/2023
Paid Date	06/27/2023
Paid Amount	$21.25
Check Number	89935273
Paid to	FRIEDELL
Paid to Address1	APT 251 H
Paid to Address2	
Paid to City	LANCASTER
Paid to State	OH
Paid to Zip Code	43130-9539

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

Benefit Information

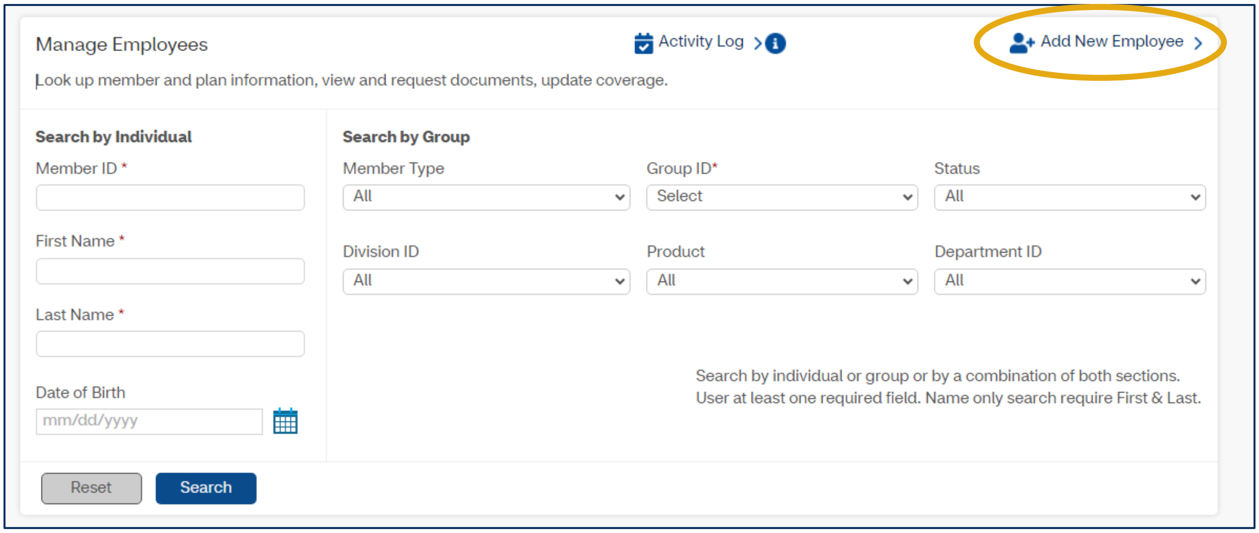
Benefit	Diagnosis Code	Date From	Date To	Incurred	Excluded	Notes	Eligible
HCR PREVENTIVE SERVICES	Z00.00	6/16/2023		$25.00	$3.75	120	$21.25

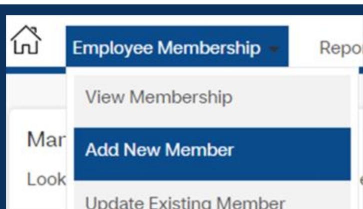
Deductible:	$0.00
Co-pay:	$0.00
Coinsurance (%):	100
Paid Amount:	$21.25
You May Owe :	$0.00

Adding a New Member

If an employee is joining your benefits plan, you can easily add them and their dependents on the website. You can also add any products they will access as part of their plan coverage.

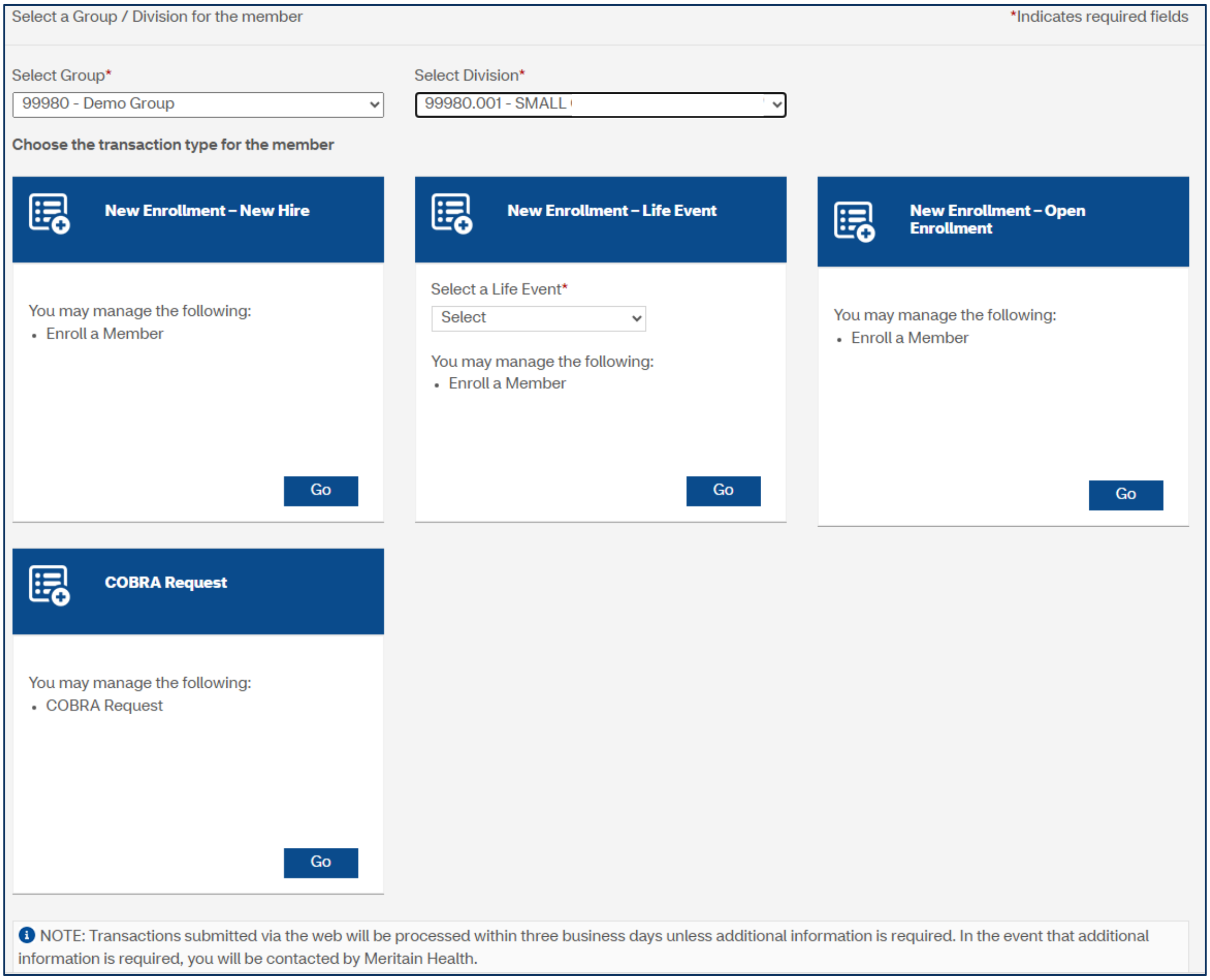
To get started, click on the *Add New Employee* link right on the homepage.



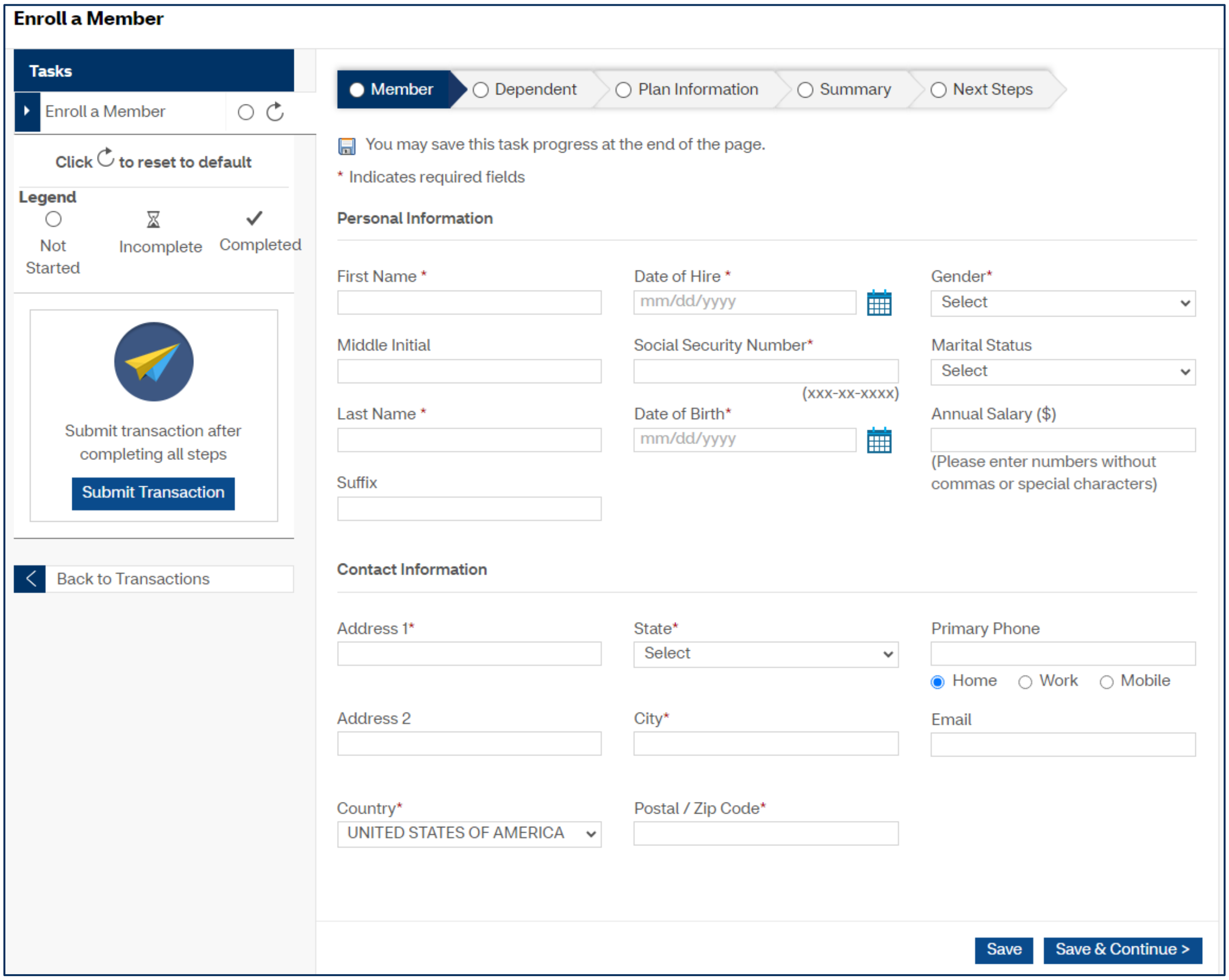


You can also go to the *Employee Membership* drop-down on the top toolbar and click *Add New Member* to enroll members in the plan.

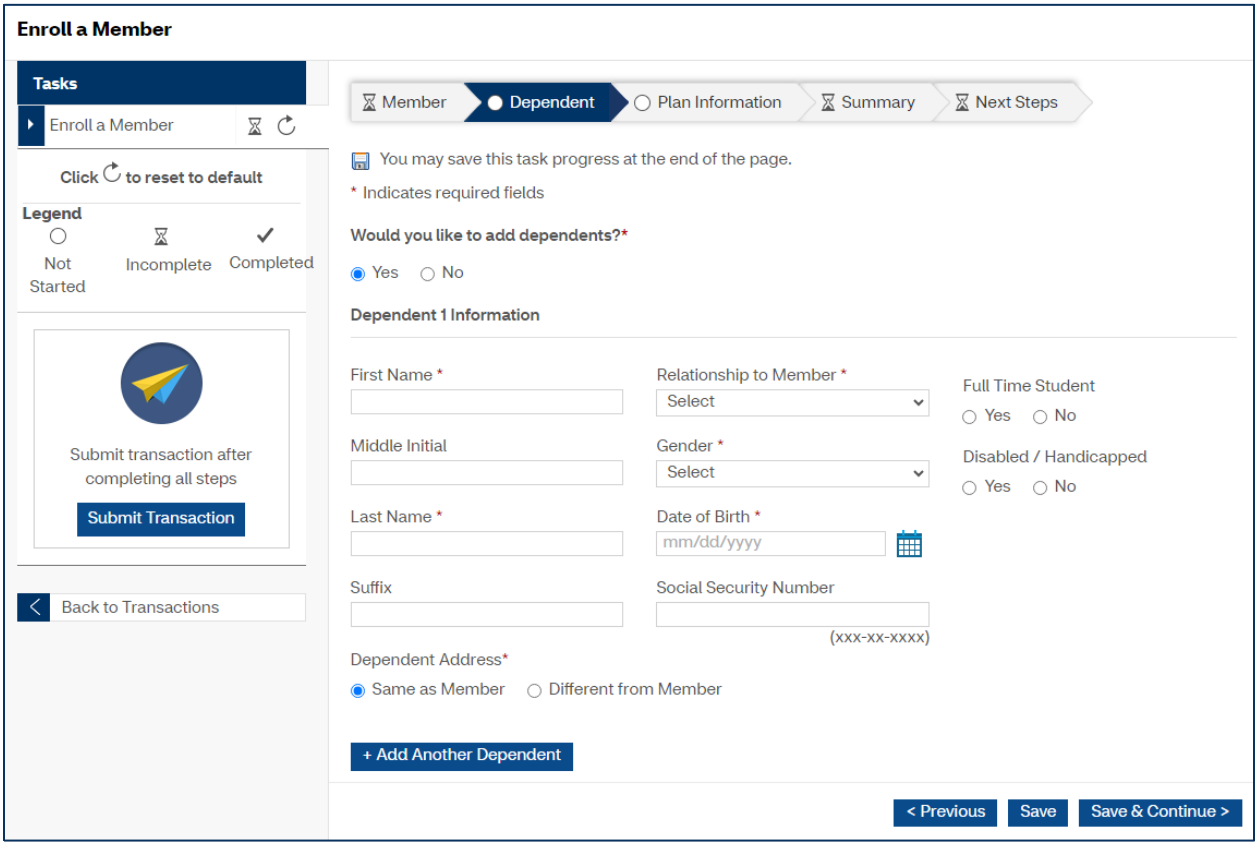
Next, choose a group ID from the drop-down box. Then, choose the division ID from the next drop-down. From this page, you can choose from three different options: *New Hire*, *Life Event* or *Open Enrollment*—depending on the situation. Once you've made your selection, click the blue *Go* button.



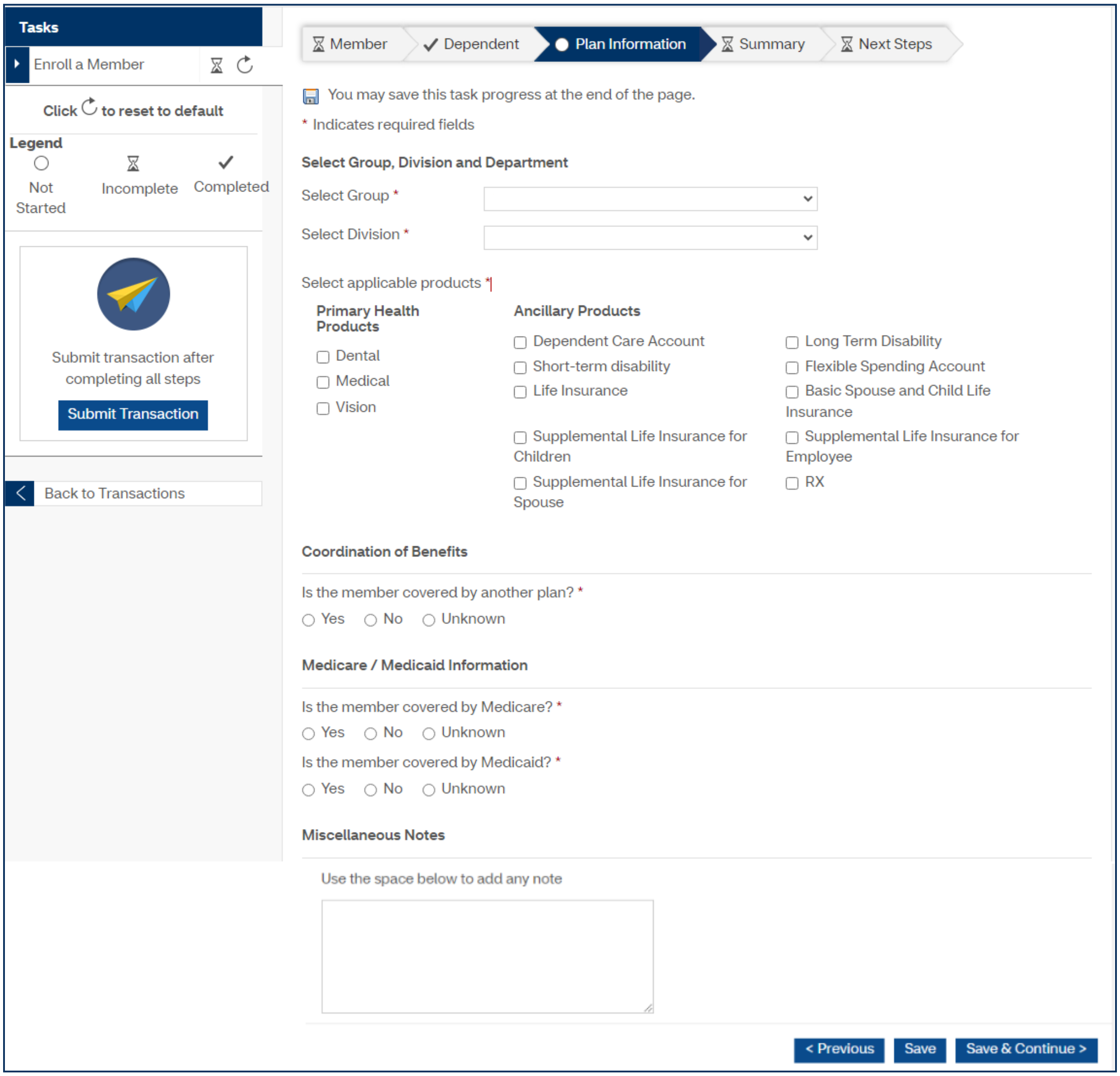
A progress bar at the top of the screen will guide you through the enrollment process. The system will prompt you if additional information needed.



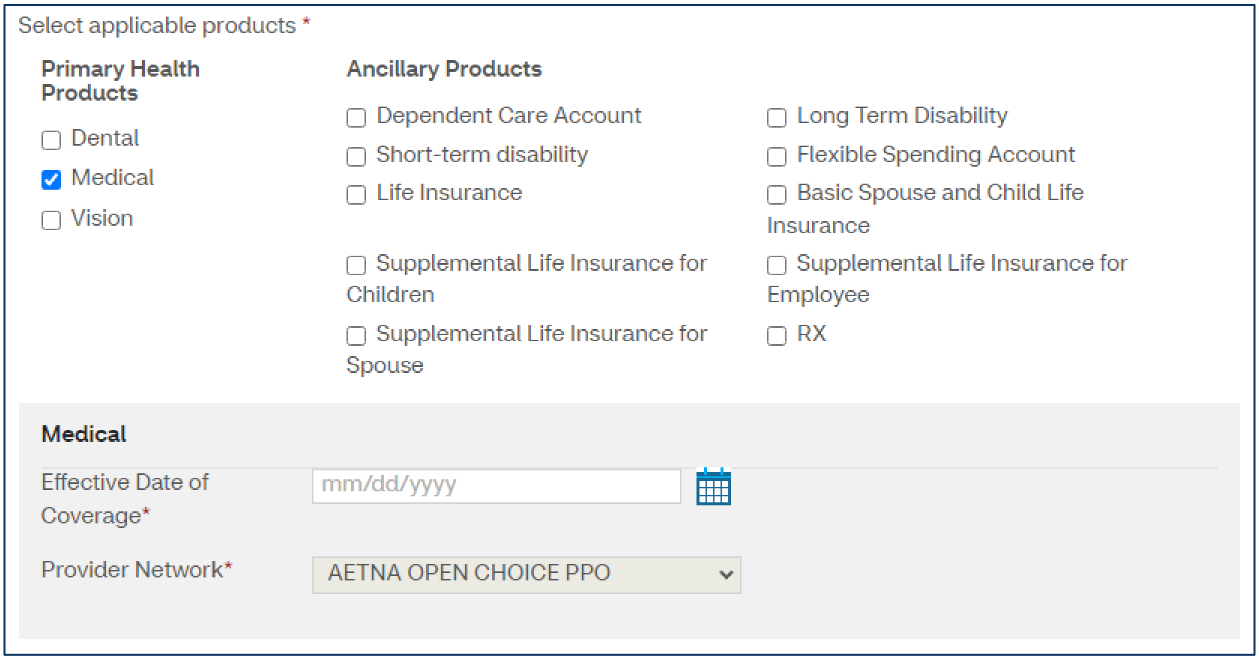
Next is the *Dependents* tab. If you need to enter dependents, click *Yes* and enter all information marked with a red asterisk. Use the *Add Another Dependent* button to open additional forms for each dependent on the plan. If you're not adding dependents, click *No*. When finished, click *Save and Continue*.



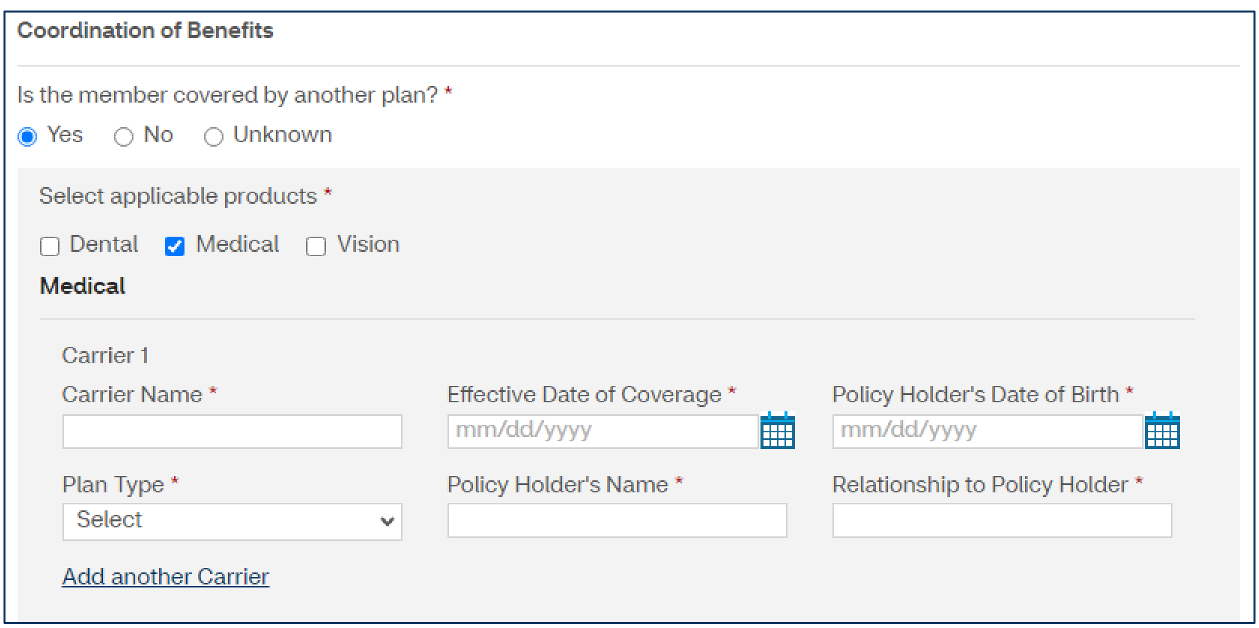
Enter all applicable information on the *Plan Information* tab. Required fields are marked with a red asterisk. Additional fields may appear, based upon your answers.



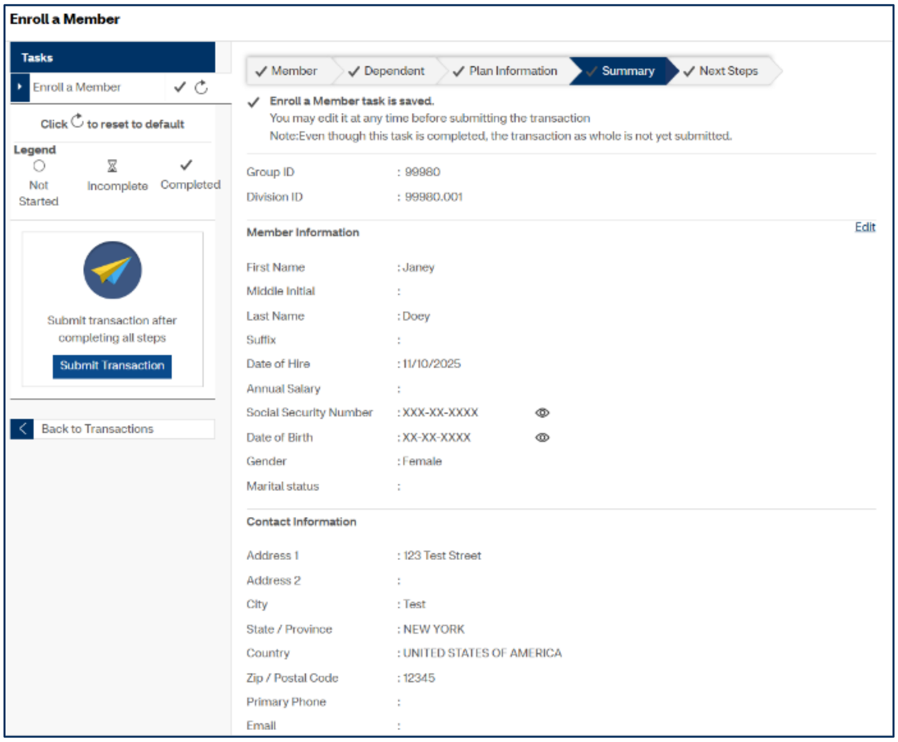
As you assign benefits, additional fields will become available. Depending on the setup needs for your group, the *Plan and/or Provider Network* fields may not require entry. If this is the case, the fields will be locked so no selection can be made. (This is expected, and you can move to the next section.)

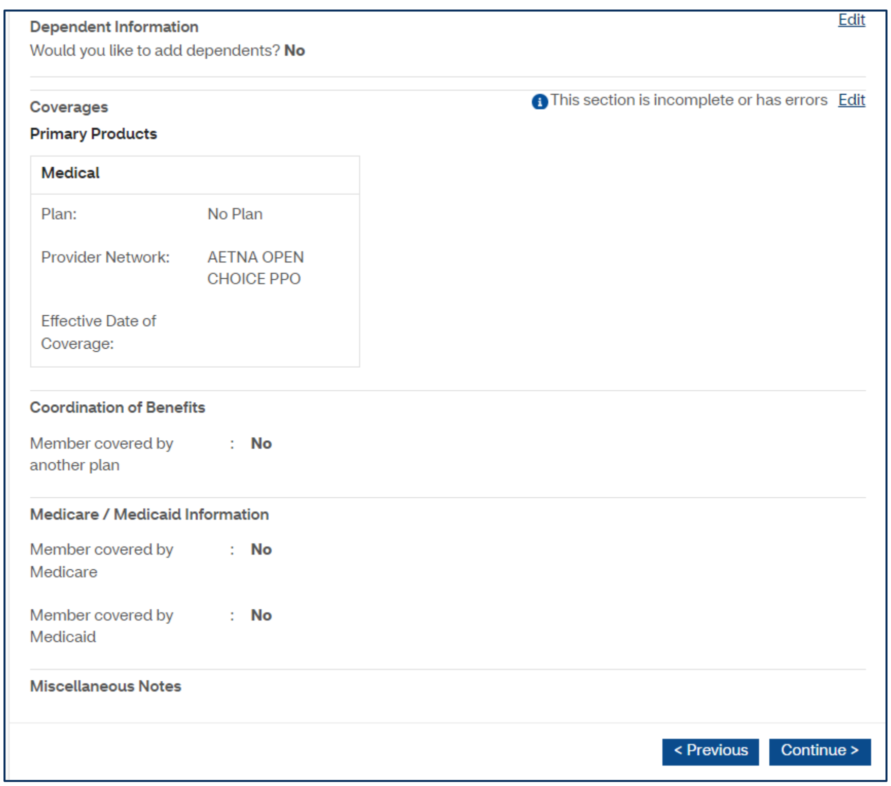


Once you choose an answer under *Coordination of Benefits*, be sure to mark all corresponding fields that appear.

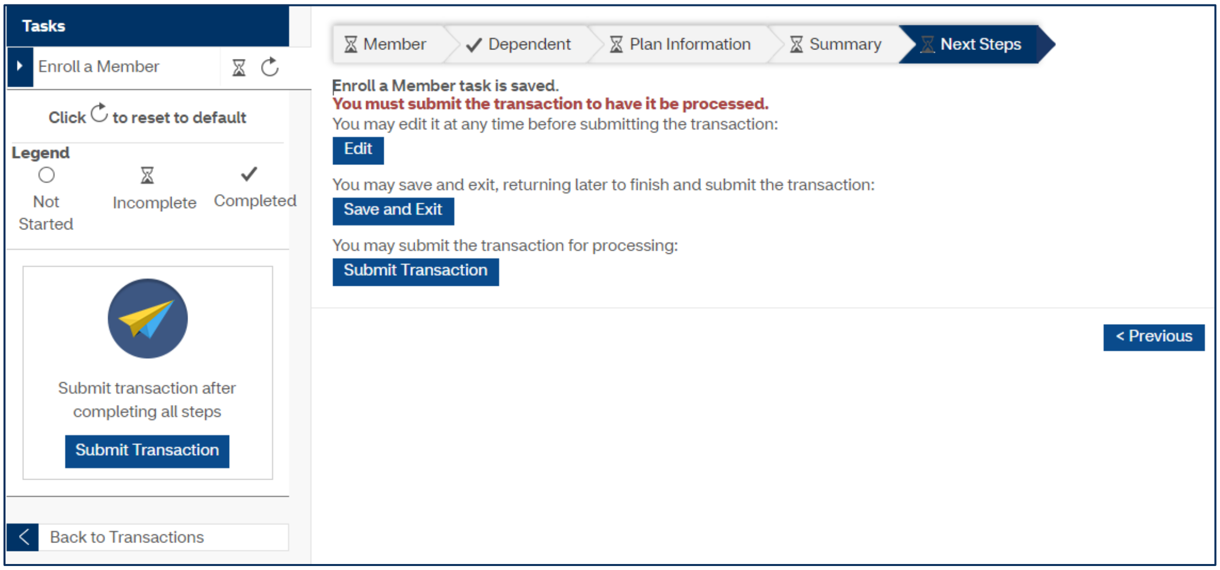


The *Summary* page lists all information you've entered. If this looks good, click *Continue*. If you need to make changes, click *Previous* to go back and edit.



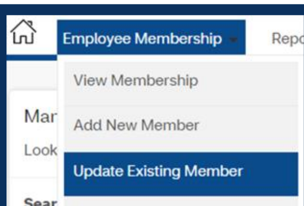


On the *Next Steps* tab, click the blue *Submit Transaction* button, then click *Yes. You will receive a* successful message and a transaction ID number. **Please note**: it can take up to three business days to process your transaction before you notice the members you added within your website. The *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

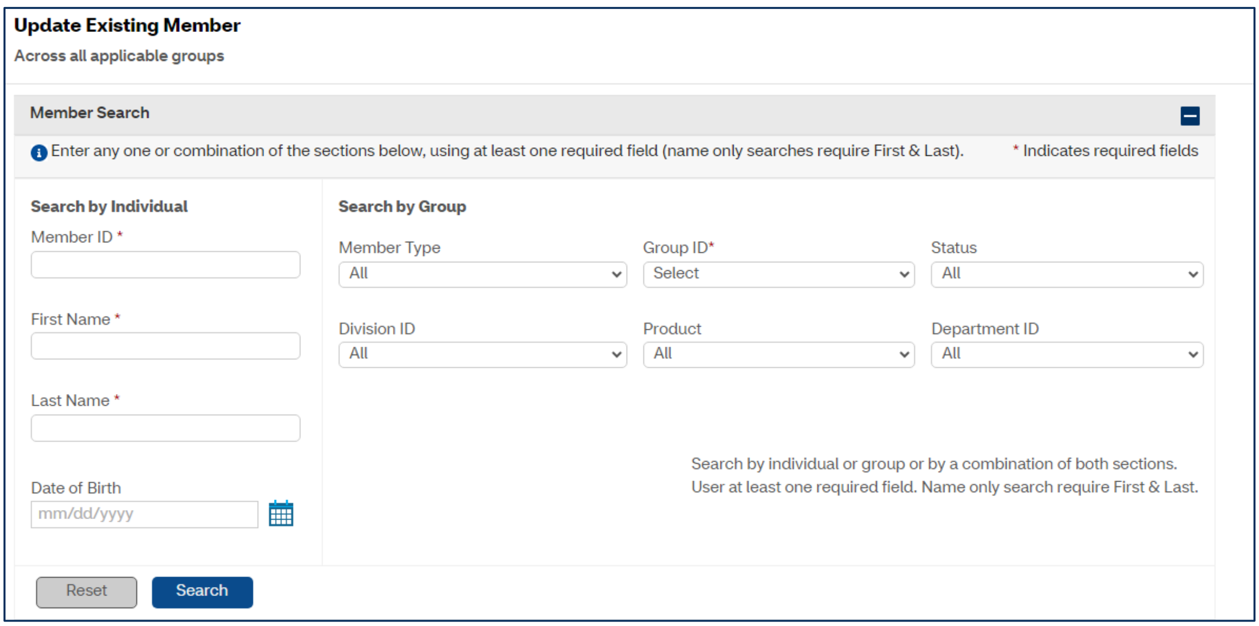
Several options are available for updating the records or coverage to an existing member and their dependents. Access an employee record using View Membership from the landing page.



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.

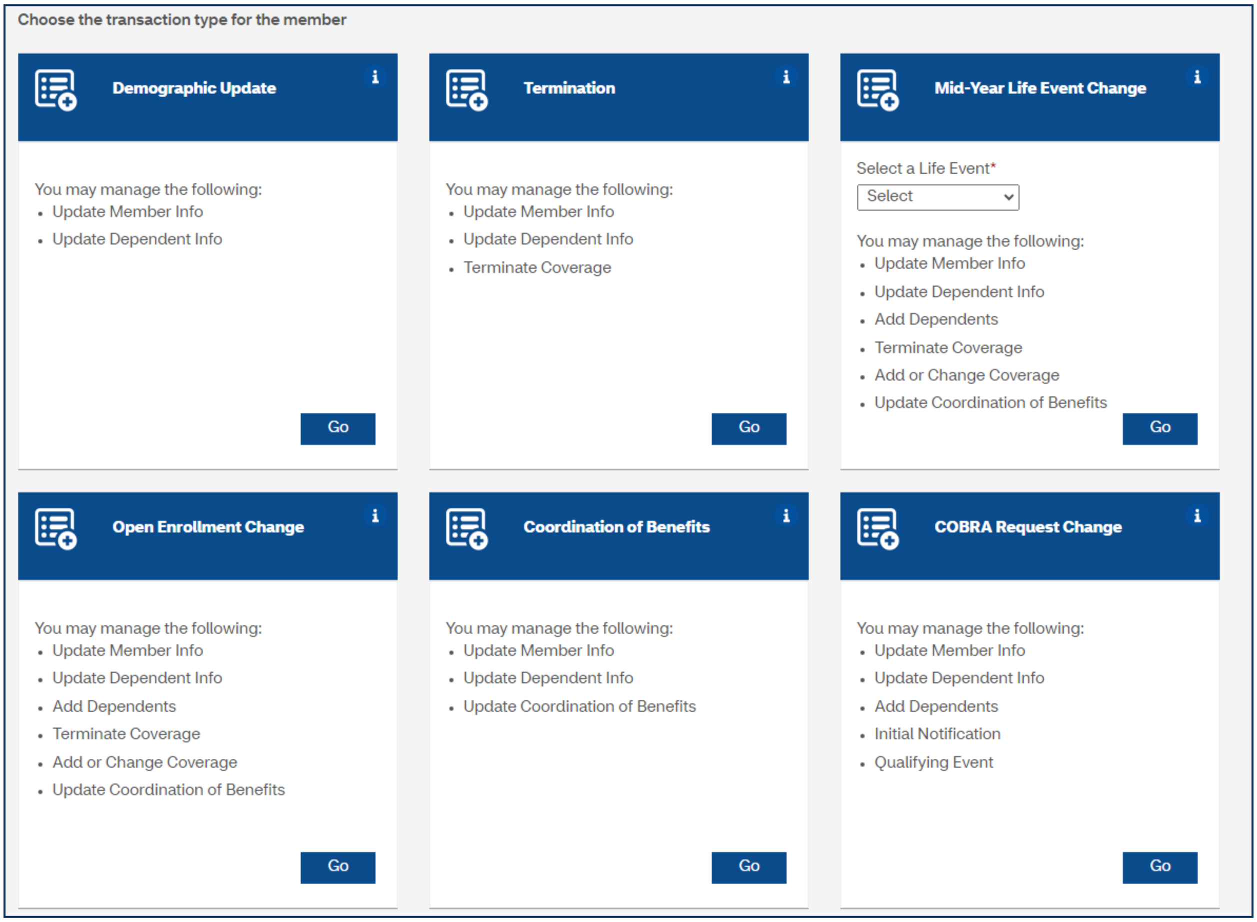


Next, click *Select* next to the member's name.

Member List

Member ID	First Name	Last Name	Member Type	Status	Group ID	Division ID	Department ID	Action
DEMO05544	JANEY	DOEY	Subscriber	Active	99980	99980.001		>
	JOHNNY	DOEY	Dependent	Active	99980	99980.001		

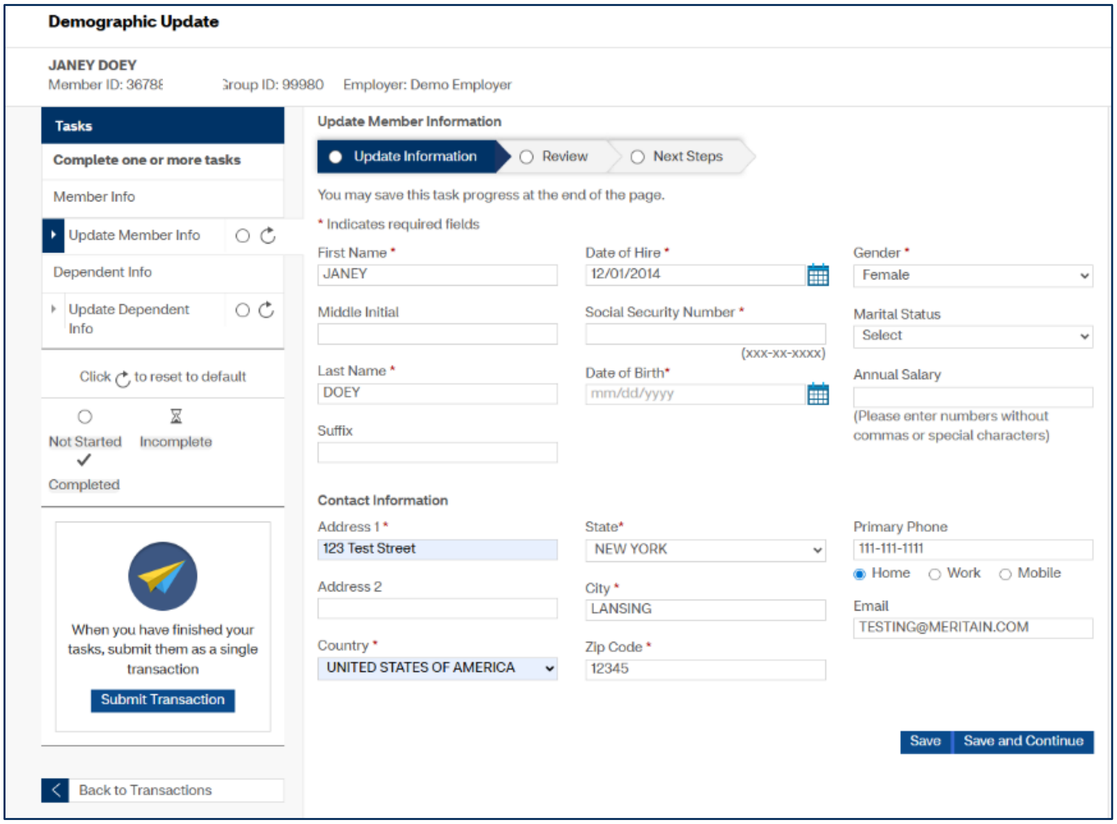
Select the transaction type you would like to update for the member.

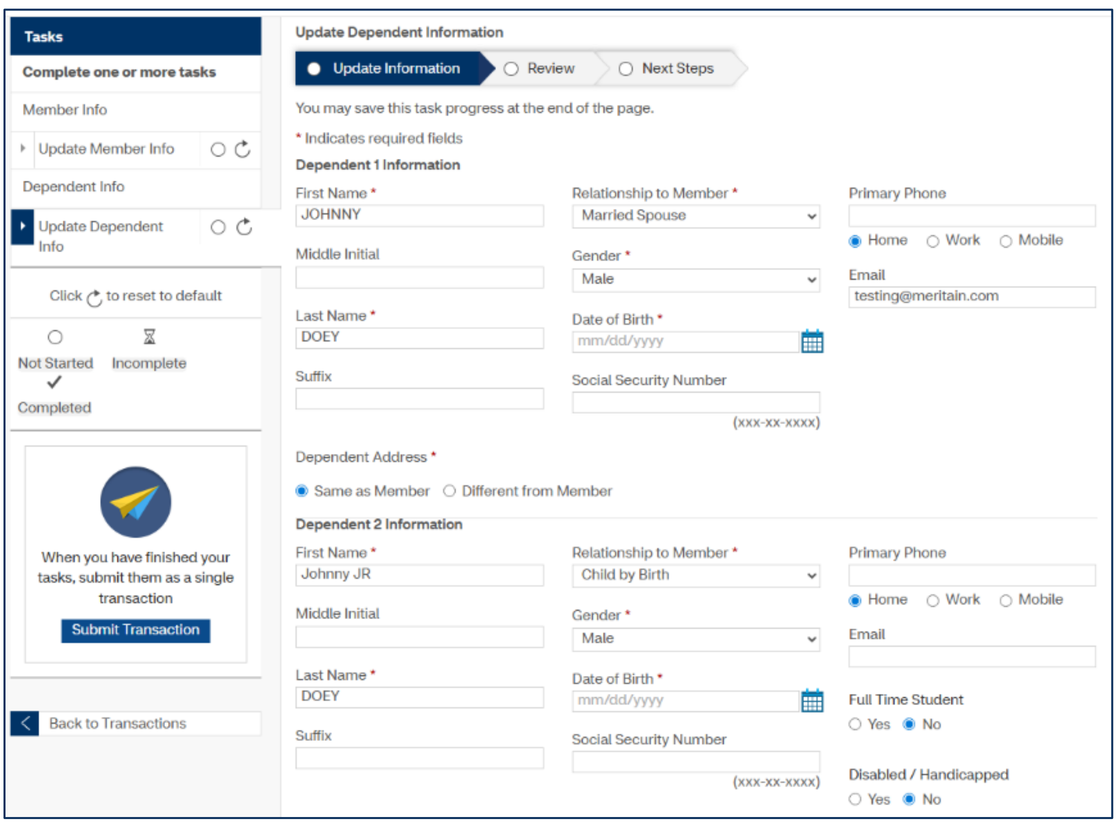


Demographic Update

Use this form to update member and dependent information, such as addresses and contact information.

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.


Demographic Update
JANEY DOEY
Member ID: 3678ε
Group ID: 99980
Employer: Demo Employer
Tasks
Complete one or more tasks
Member Info
Update Member Info
Dependent Info
Update Dependent Info
Click to reset to default
Not Started
Incomplete
Completed
When you have finished your tasks, submit them as a single transaction
Submit Transaction
Back to Transactions
Update Member Information
Update Information
Review
Next Steps
You may save this task progress at the end of the page.
* Indicates required fields
First Name *
JANEY
Date of Hire *
12/01/2014
Gender *
Female
Middle Initial
Social Security Number *
(xxx-xx-xxxx)
Marital Status
Select
Last Name *
DOEY
Date of Birth*
mm/dd/yyyy
Annual Salary
(Please enter numbers without commas or special characters)
Suffix
Contact Information
Address 1 *
123 Test Street
State*
NEW YORK
Primary Phone
111-111-1111
Home
Work
Mobile
Address 2
City *
LANSING
Email
TESTING@MERITAIN.COM
Country *
UNITED STATES OF AMERICA
Zip Code *
12345
Save
Save and Continue

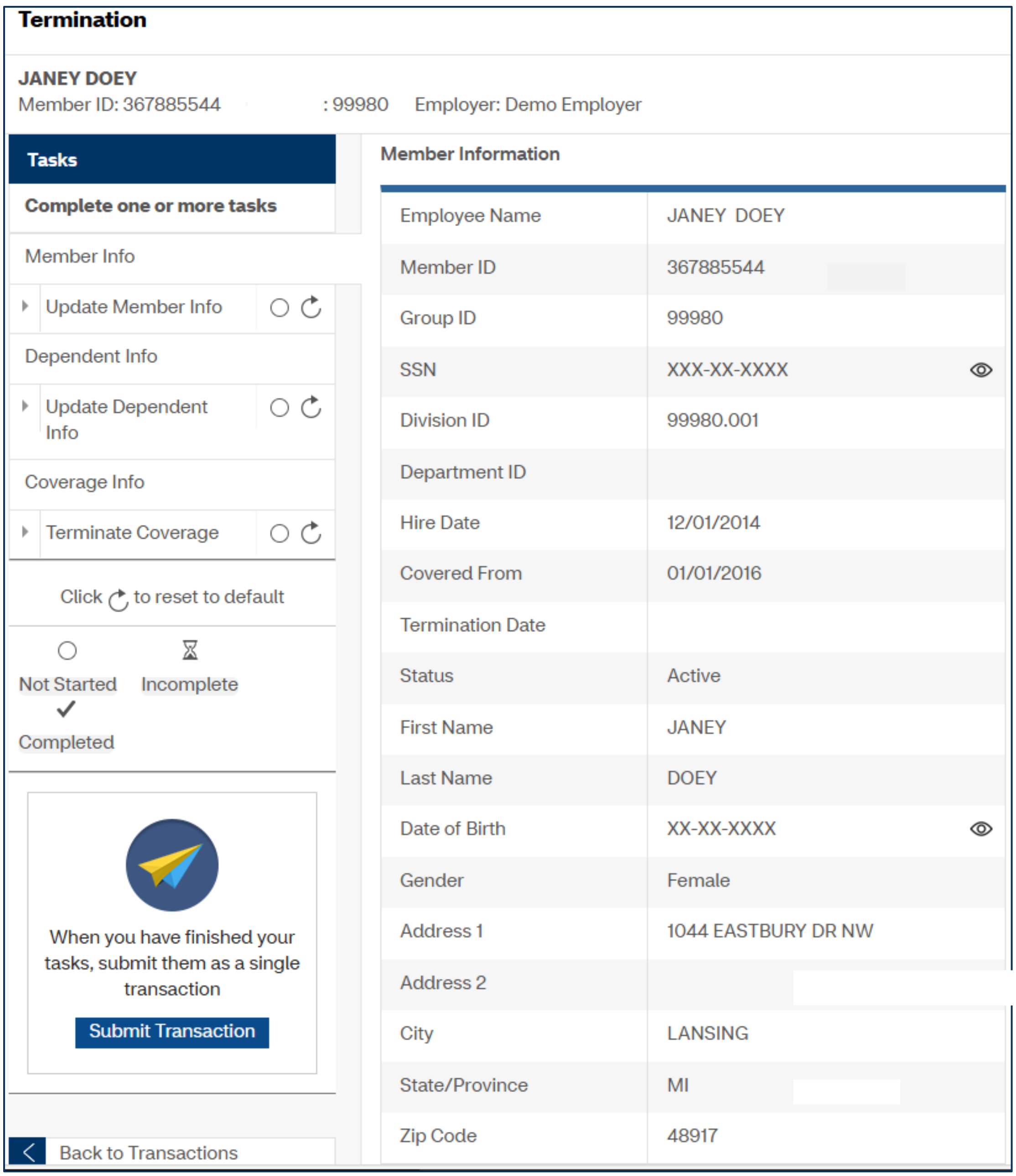

Tasks
Complete one or more tasks
Member Info
Update Member Info
Dependent Info
Update Dependent Info
Click to reset to default
Not Started
Incomplete
Completed
When you have finished your tasks, submit them as a single transaction
Submit Transaction
Back to Transactions
Update Dependent Information
Update Information
Review
Next Steps
You may save this task progress at the end of the page.
* Indicates required fields
Dependent 1 Information
First Name *
JOHNNY
Relationship to Member *
Married Spouse
Primary Phone
Home
Work
Mobile
Middle Initial
Gender *
Male
Email
testing@meritain.com
Last Name *
DOEY
Date of Birth *
mm/dd/yyyy
Suffix
Social Security Number
(xxx-xx-xxxx)
Dependent Address *
Same as Member
Different from Member
Dependent 2 Information
First Name *
Johnny JR
Relationship to Member *
Child by Birth
Primary Phone
Home
Work
Mobile
Middle Initial
Gender *
Male
Email
Last Name *
DOEY
Date of Birth *
mm/dd/yyyy
Full Time Student
Yes
No
Suffix
Social Security Number
(xxx-xx-xxxx)
Disabled / Handicapped
Yes
No

Termination

Remove coverage due to a 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.



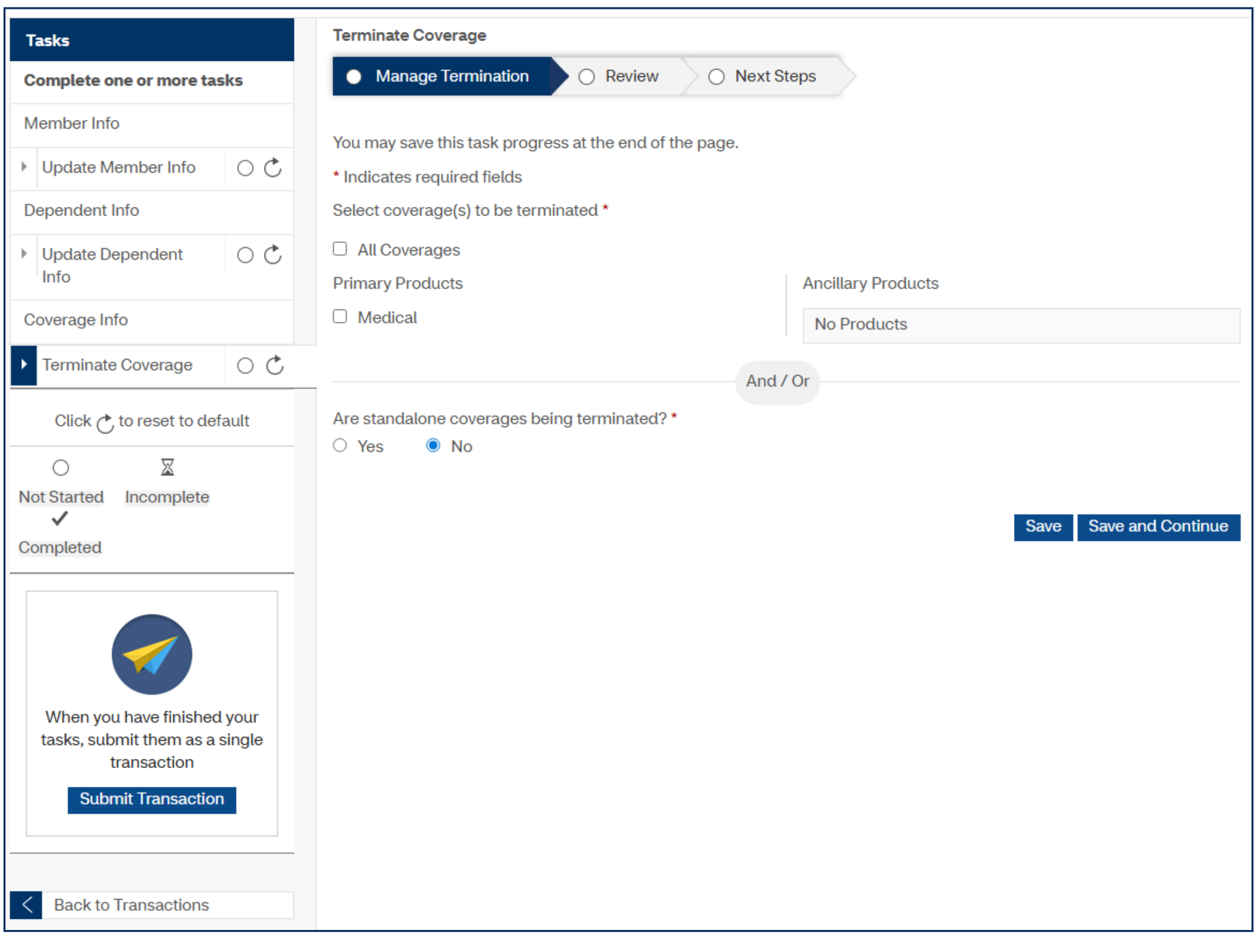
3. Users will have the option to check the box to terminate all coverages or select individual products to terminate.

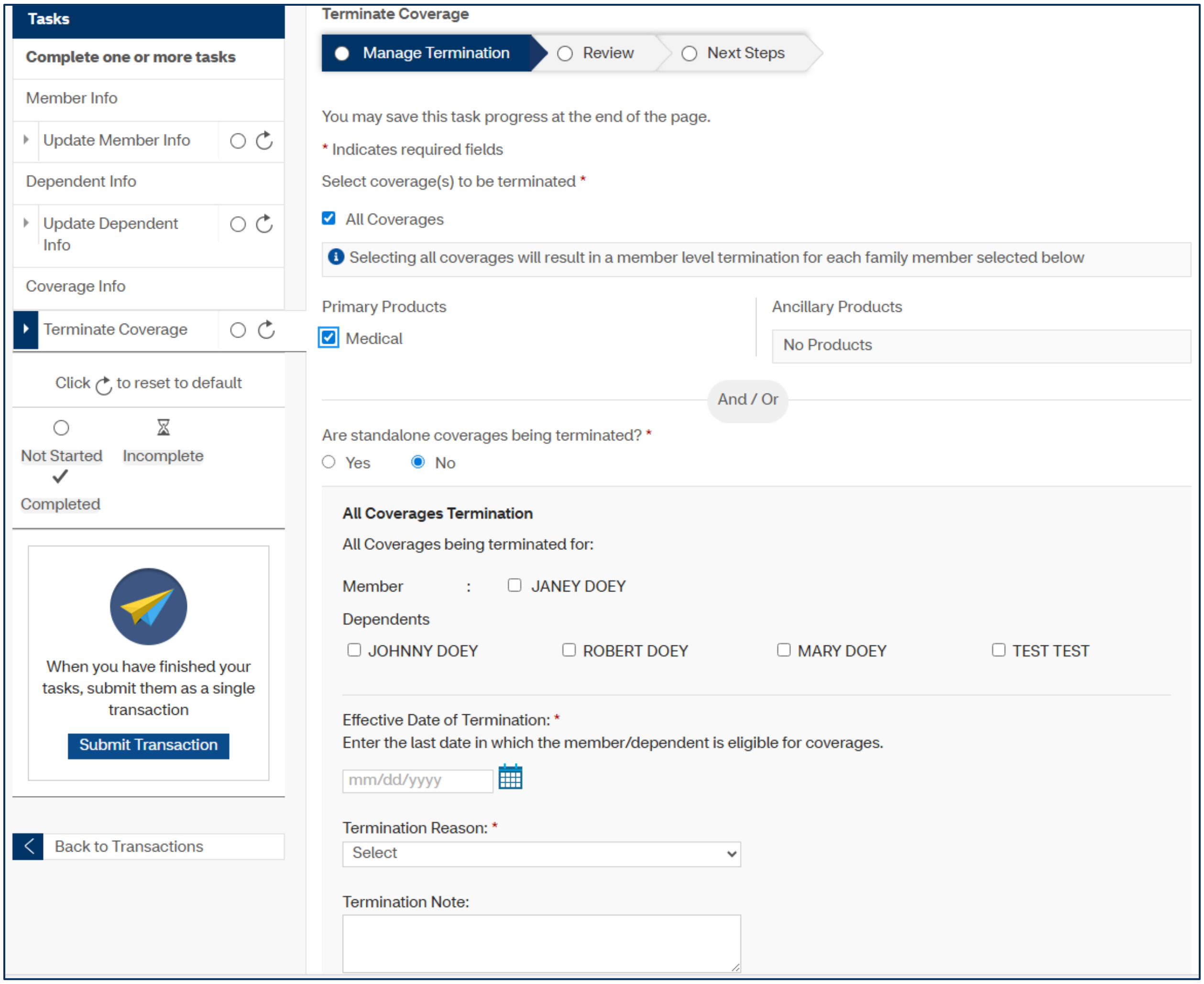
4. **Please note:** The *Terminate Coverage* task is the same across transaction types. Whether you attempt to terminate coverage using the *Termination,* Mid-year Life Event Change, or Open Enrollment Change transaction types, the steps described below will apply.

5. Once the products are selected, users will see a question about standalone products.

6. This question will always default to no but can be changed yes by the user if the group has applicable standalone products to terminate (the standalone process is detailed at the end of these steps).

7. Next, the user will confirm whether the termination is for the member, which will terminate the member and any existing family members, or the user can opt to only terminate dependent(s).

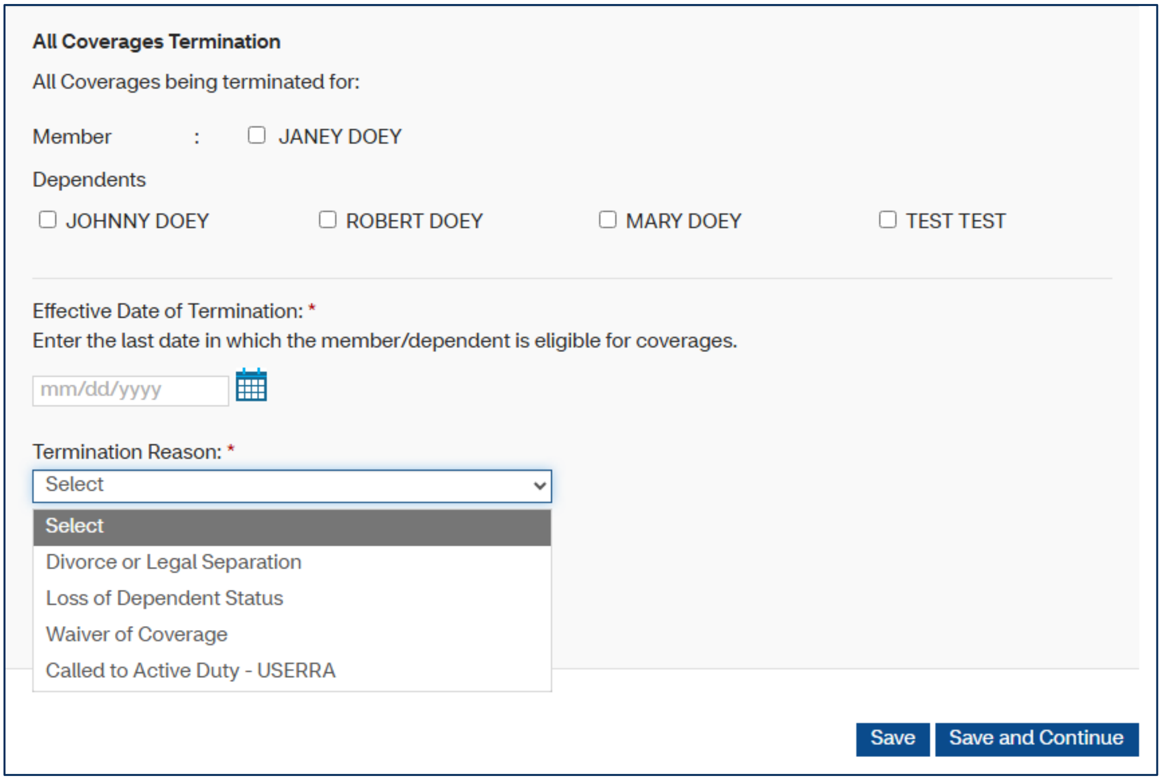


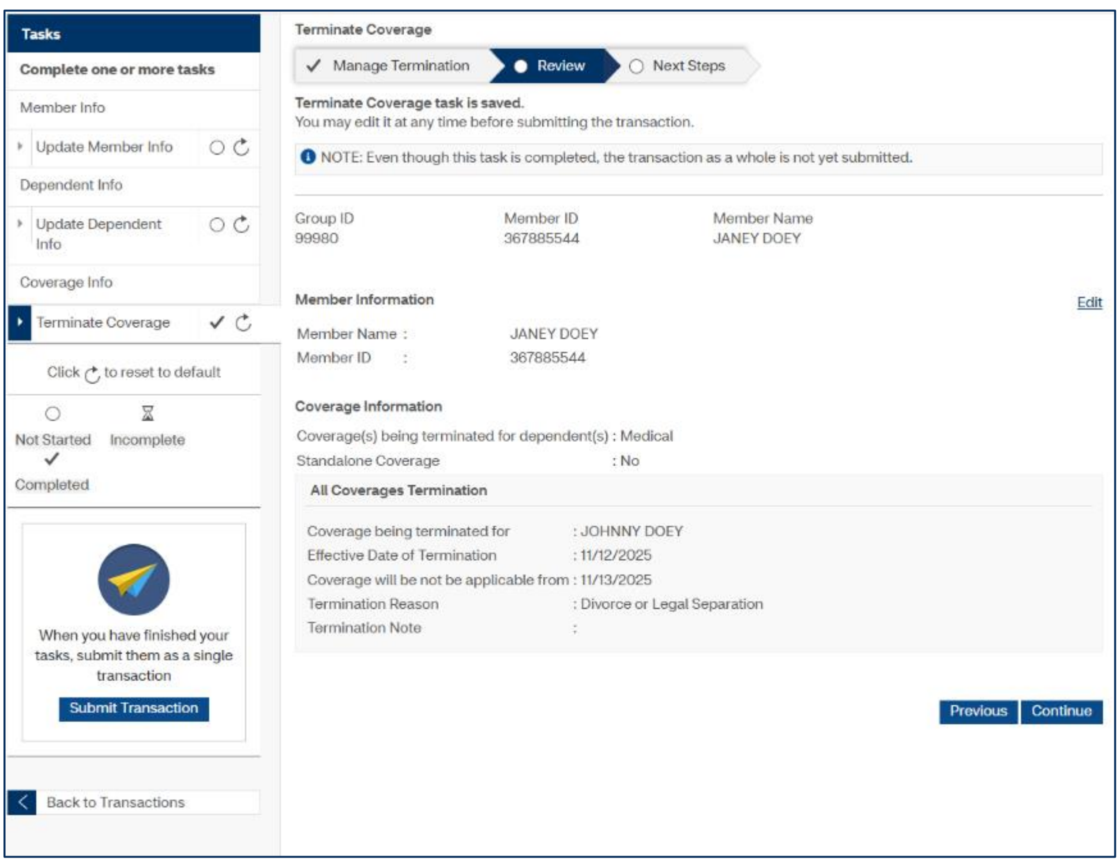


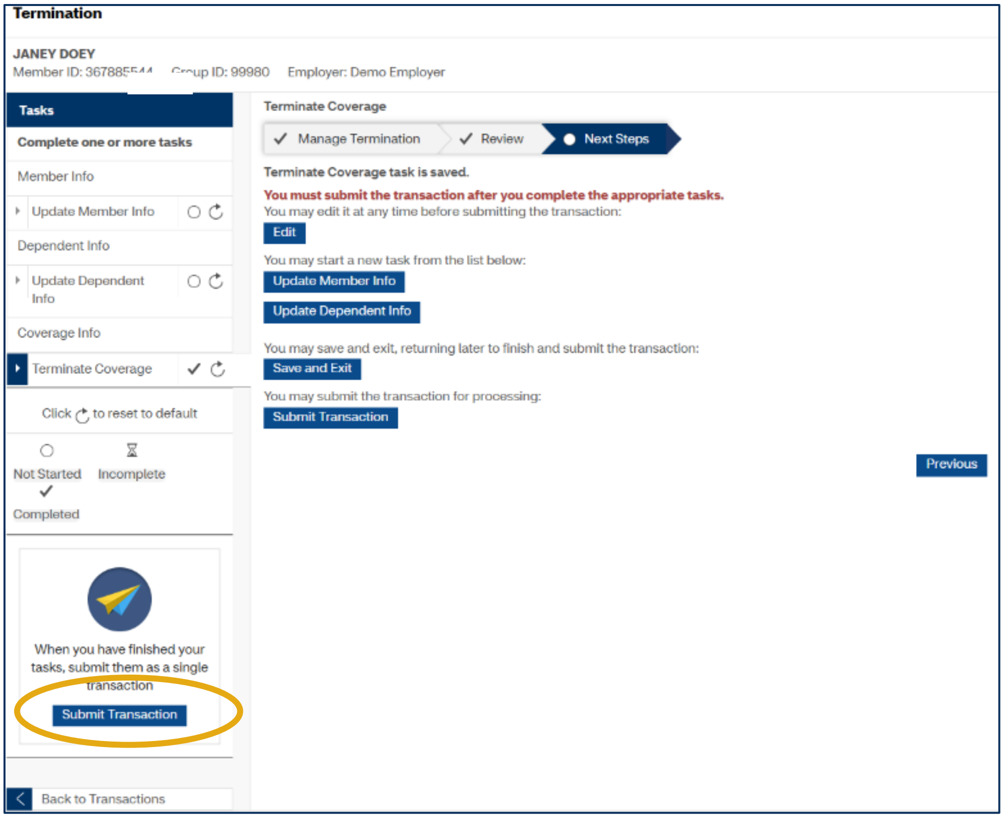
8. Input the effective date of termination. You can manually enter the date or click on the date picker icon to select a date.

9. **Please note:** 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.

10. 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:
Member : JANEY DOEY
Dependents
JOHNNY DOEY
ROBERT DOEY
MARY DOEY
TEST TEST
Effective Date of Termination: *
Enter the last date in which the member/dependent is eligible for coverages.
mm/dd/yyyy
Termination Reason: *
Select
Select
Divorce or Legal Separation
Loss of Dependent Status
Waiver of Coverage
Called to Active Duty - USERRA
Save
Save and Continue


Tasks
Complete one or more tasks
Member Info
Update Member Info
Dependent Info
Update Dependent Info
Coverage Info
Terminate Coverage
Click to reset to default
Not Started
Incomplete
Completed
When you have finished your tasks, submit them as a single transaction
Submit Transaction
Back to Transactions
Terminate Coverage
Manage Termination
Review
Next Steps
Terminate Coverage task is saved.
You may edit it at any time before submitting the transaction.
NOTE: Even though this task is completed, the transaction as a whole is not yet submitted.
Group ID
99980
Member ID
367885544
Member Name
JANEY DOEY
Member Information
Edit
Member Name : JANEY DOEY
Member ID : 367885544
Coverage Information
Coverage(s) being terminated for dependent(s) : Medical
Standalone Coverage : No
All Coverages Termination
Coverage being terminated for : JOHNNY DOEY
Effective Date of Termination : 11/12/2025
Coverage will be not be applicable from : 11/13/2025
Termination Reason : Divorce or Legal Separation
Termination Note :
Previous
Continue



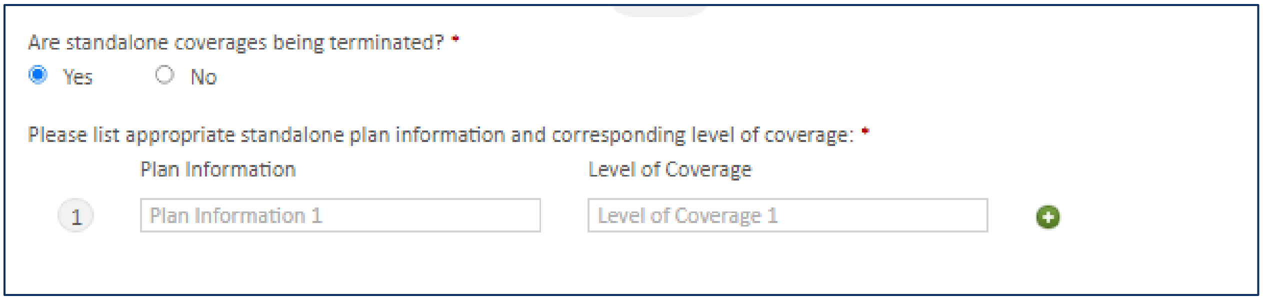
11. Use the *Task* menu to complete related tasks and use the *Submit Transaction* to submit multiple tasks as a single transaction. A *Submit Transaction* button is also available in the *Next Steps* tab.

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

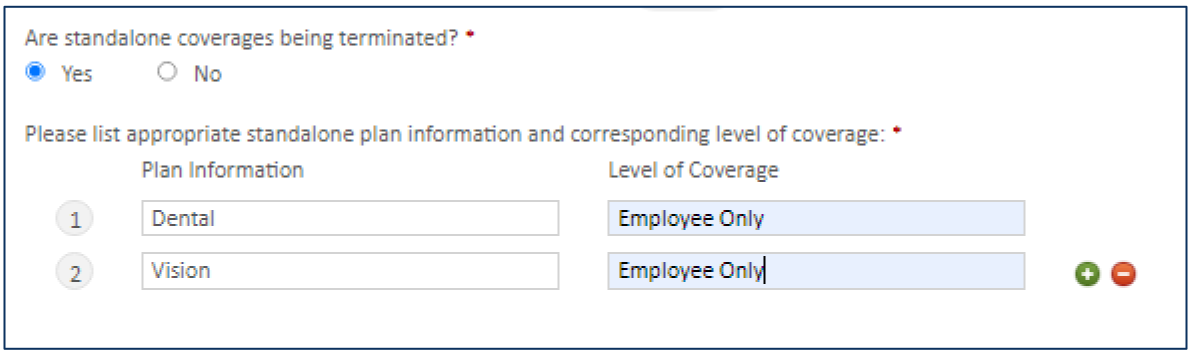
Terminations with Standalone Coverage

- 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.

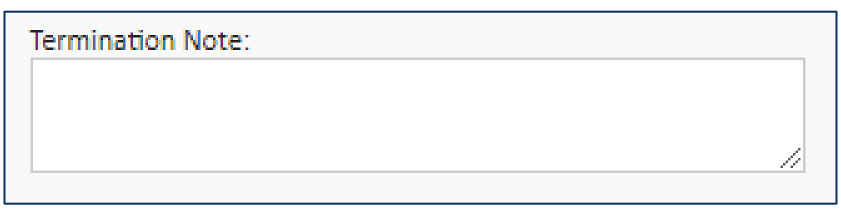
- Additional boxes will expand allowing the user to detail any standalone coverages using free form text boxes.



- 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 member terminating has a dependent enrolled in standalone coverages only, we will need that dependent's demographic information to add the dependent 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.

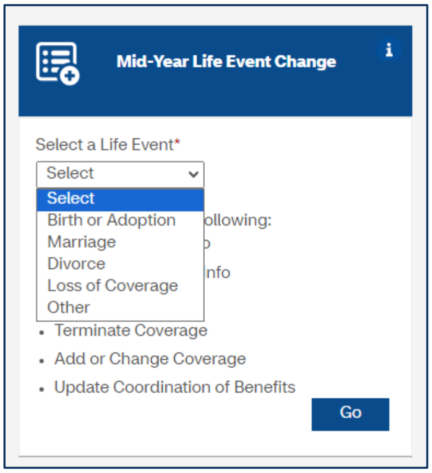


Mid-Year Life Event Change

When a member experiences a life event, employer users should select the *Mid-Year Life Event Change* transaction type. It will allow a user to 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.

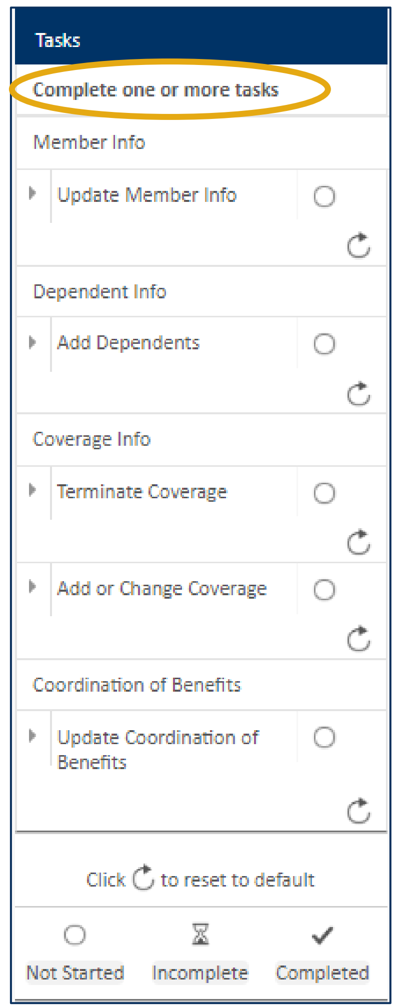


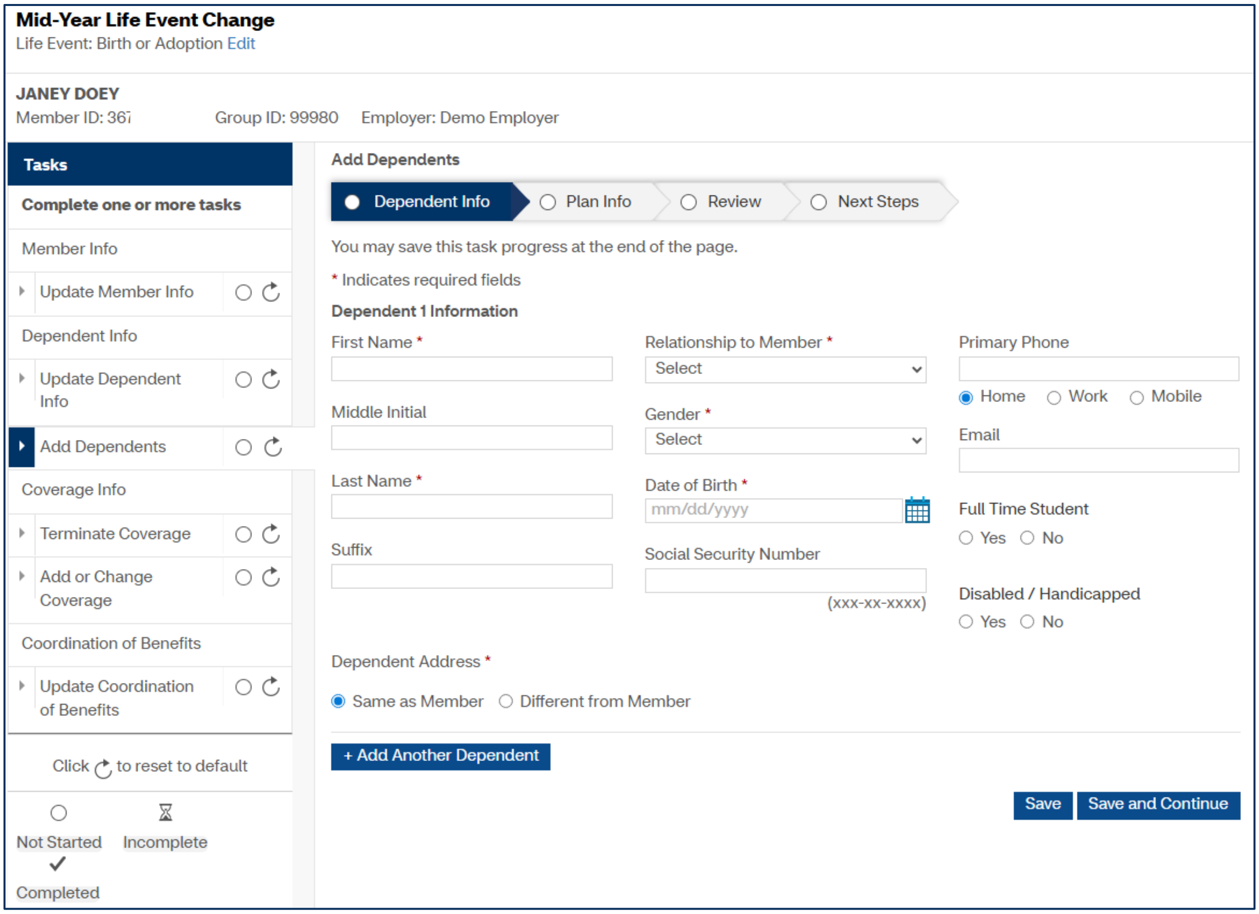
2. Select the applicable task(s) from the *Task Menu*. For the Marriage Life Event, select *Add Dependents,* if needed.

   Remember, once a task is complete, additional tasks can be completed 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.

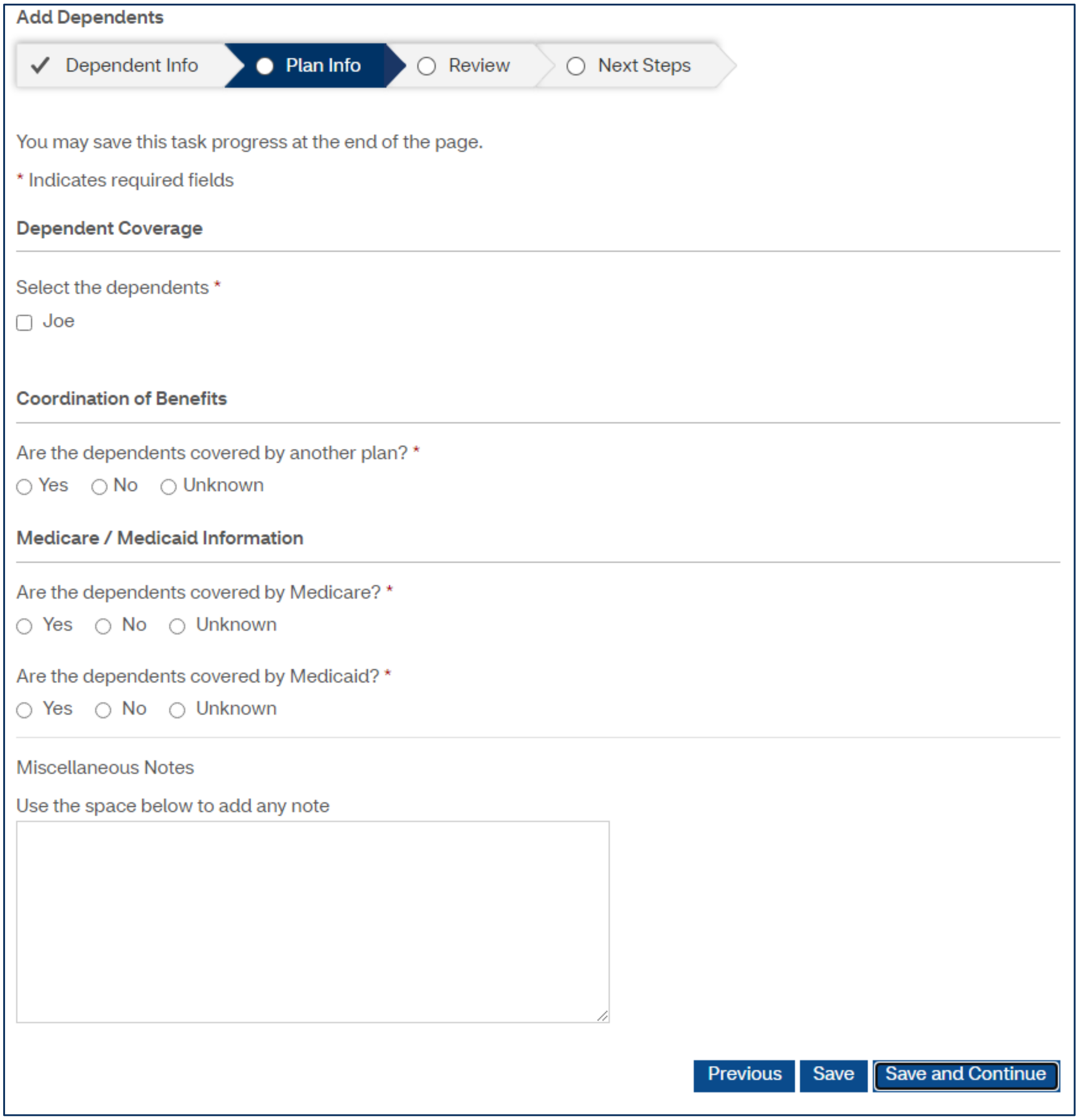
   If you wish to add more than one dependent, click the *+Add Another Dependent* button. If you clicked *+Add Another Dependent* in error, click the link to *Reset and Clear Dependent 2 Information*. This will remove the additional dependent. Click the blue *Save and Continue* button once all dependent 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 *calendar icon* or type in the effective date.


Add Dependents

Dependent Info | Plan Info | Review | Next Steps

You may save this task progress at the end of the page.

* Indicates required fields

Dependent Coverage

Select the dependents *

☐ Joe

Coordination of Benefits

Are the dependents covered by another plan? *

○ Yes ○ No ○ Unknown

Medicare / Medicaid Information

Are the dependents covered by Medicare? *

○ Yes ○ No ○ Unknown

Are the dependents covered by Medicaid? *

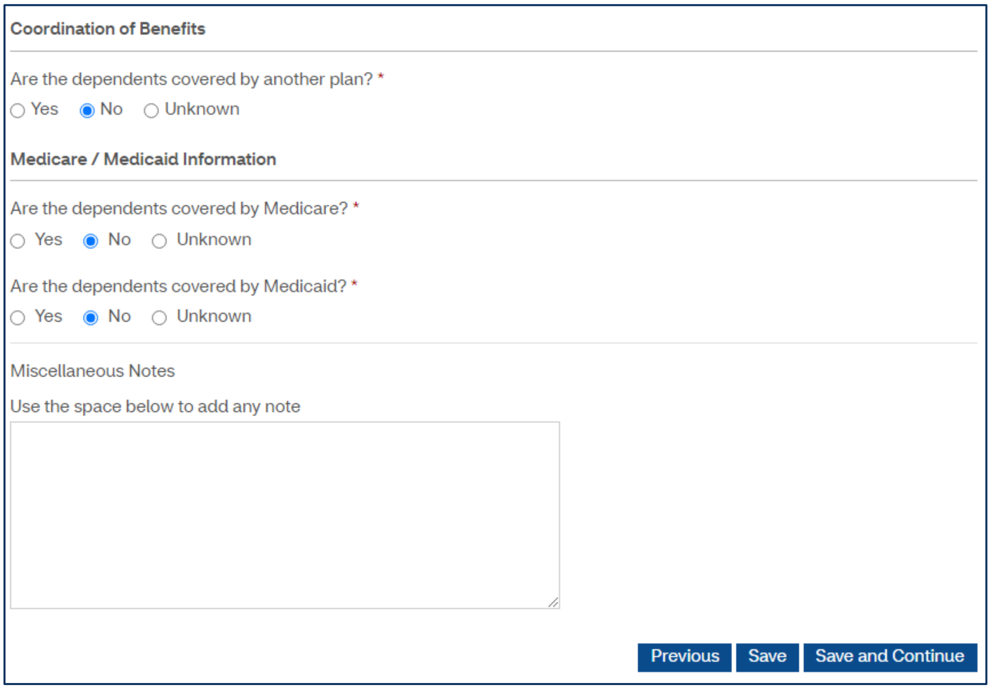
○ Yes ○ No ○ Unknown

Miscellaneous Notes

Use the space below to add any note

Previous | Save | Save and Continue

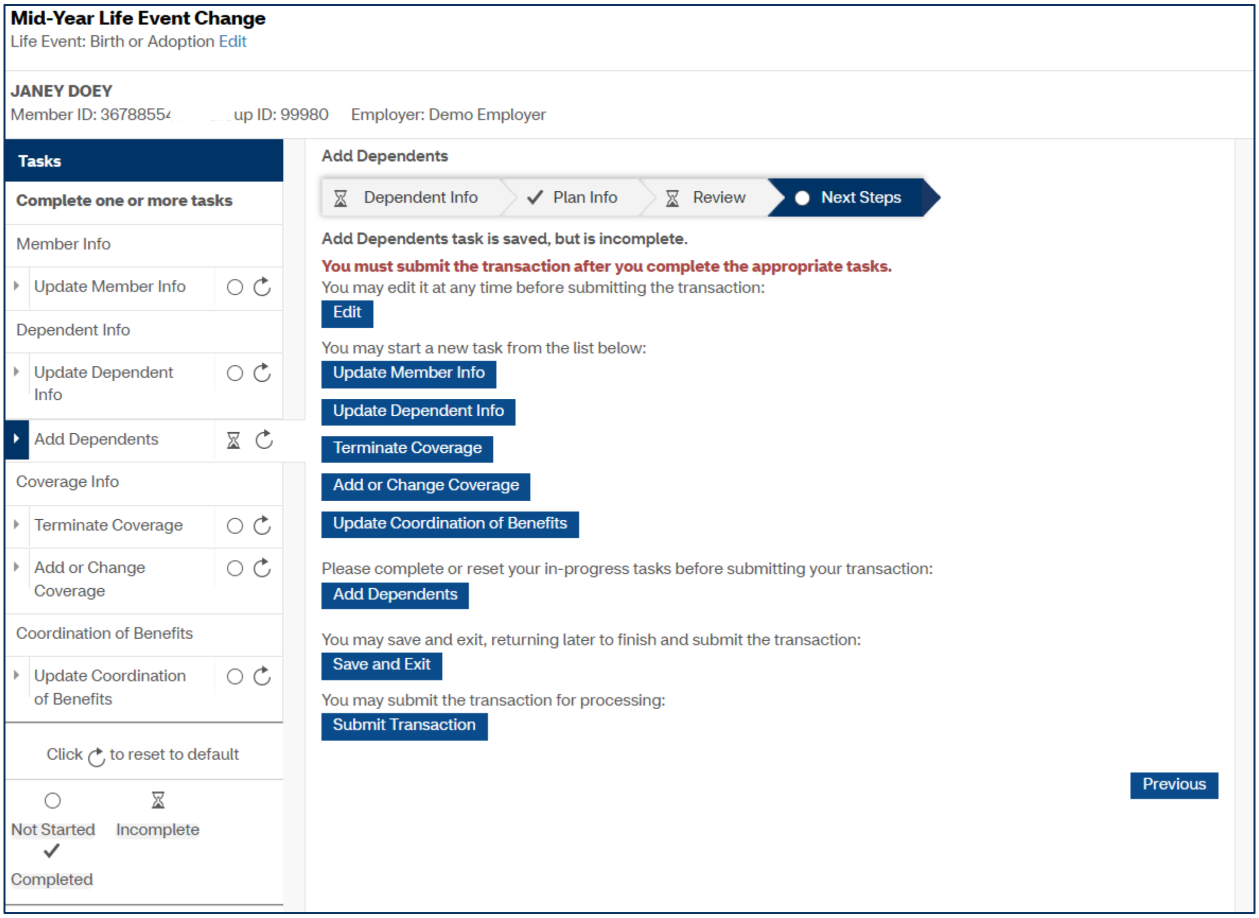
5. Complete the required *Coordination of Benefits* questions, then click the blue *Save and Continue* button.



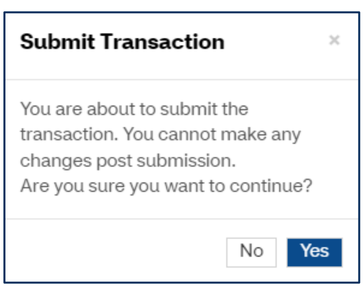
6. The last step allows users to review everything completed for the *Add Dependents* task. Users can go back to specific sections and make edits if needed. Click the *blue Continue* button in the bottom right corner.

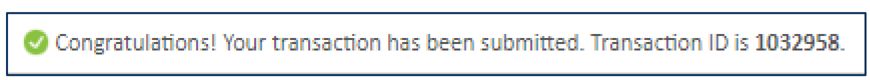
   Please note: even though the individual *Add Dependents* task is completed, the transaction as a whole is not yet submitted for processing until the user clicks the blue *Submit transaction* button.

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

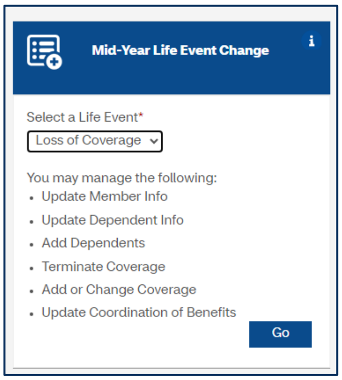


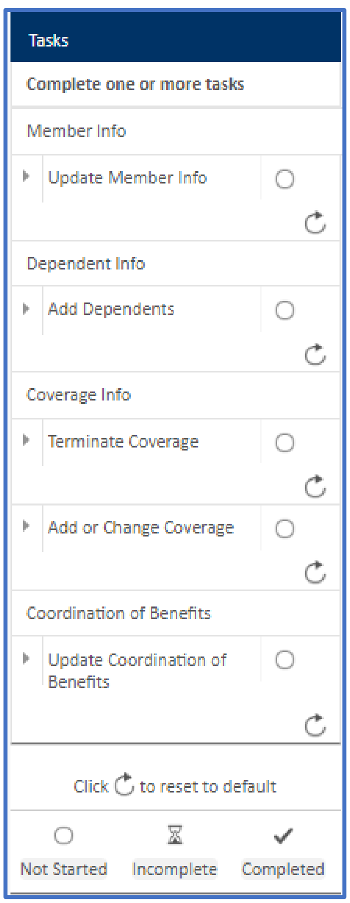


Mid-Year Life Event Change – Loss of Coverage Life Event

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 task*, it is important to remember this task only allows users to add new coverage(s) or make changes to existing coverage(s).



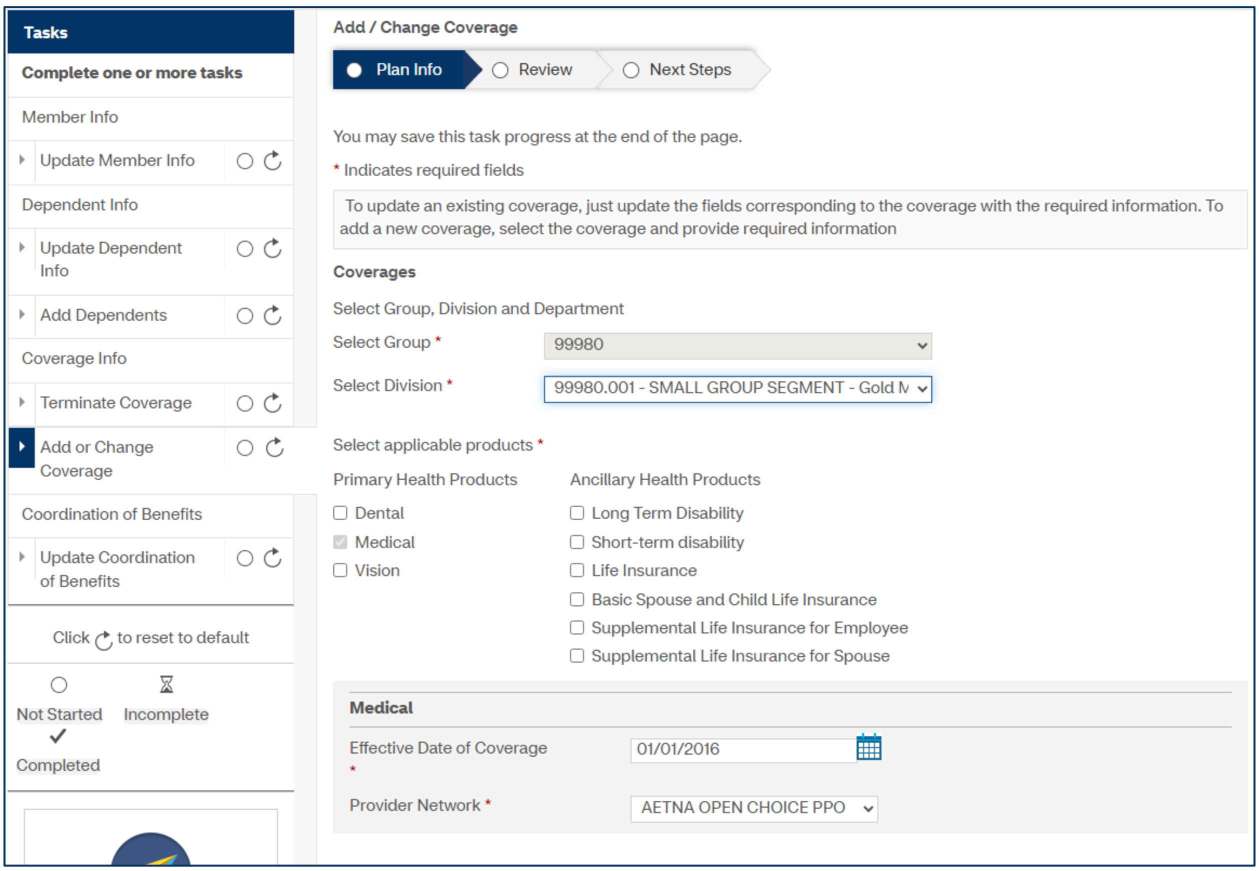


If a termination of coverage is needed, use the Terminate Coverage task. Users cannot drop coverage from the Add or Change Coverage task.

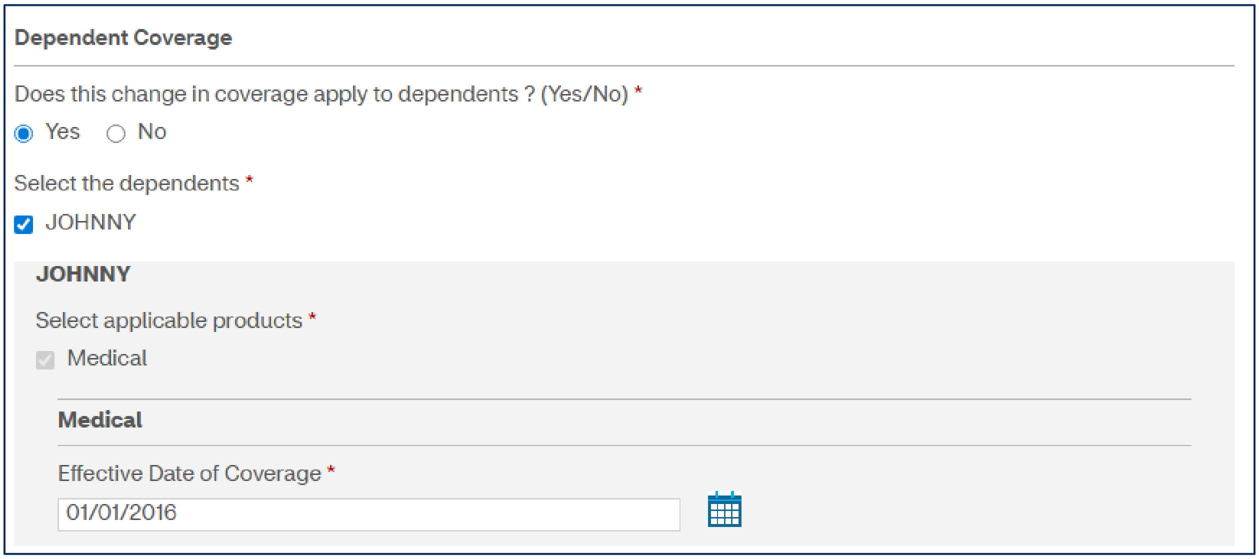
3. On the *Plan Info* screen, users will see any current coverages the member is enrolled in along with the most recent effective date for each corresponding coverage. To update an existing coverage, update the fields corresponding to the coverage with the required information.

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

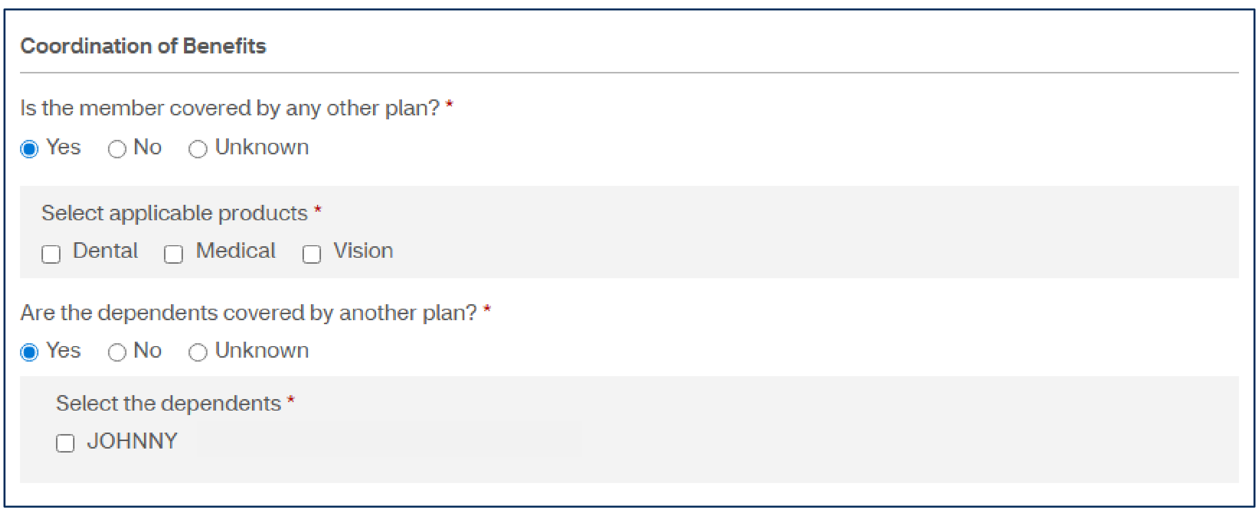
   Please note: Any fields that are grayed out do not require an entry from the user. An example of this can be seen in the below picture under the *Provider Network* field for *Dental Coverage*.



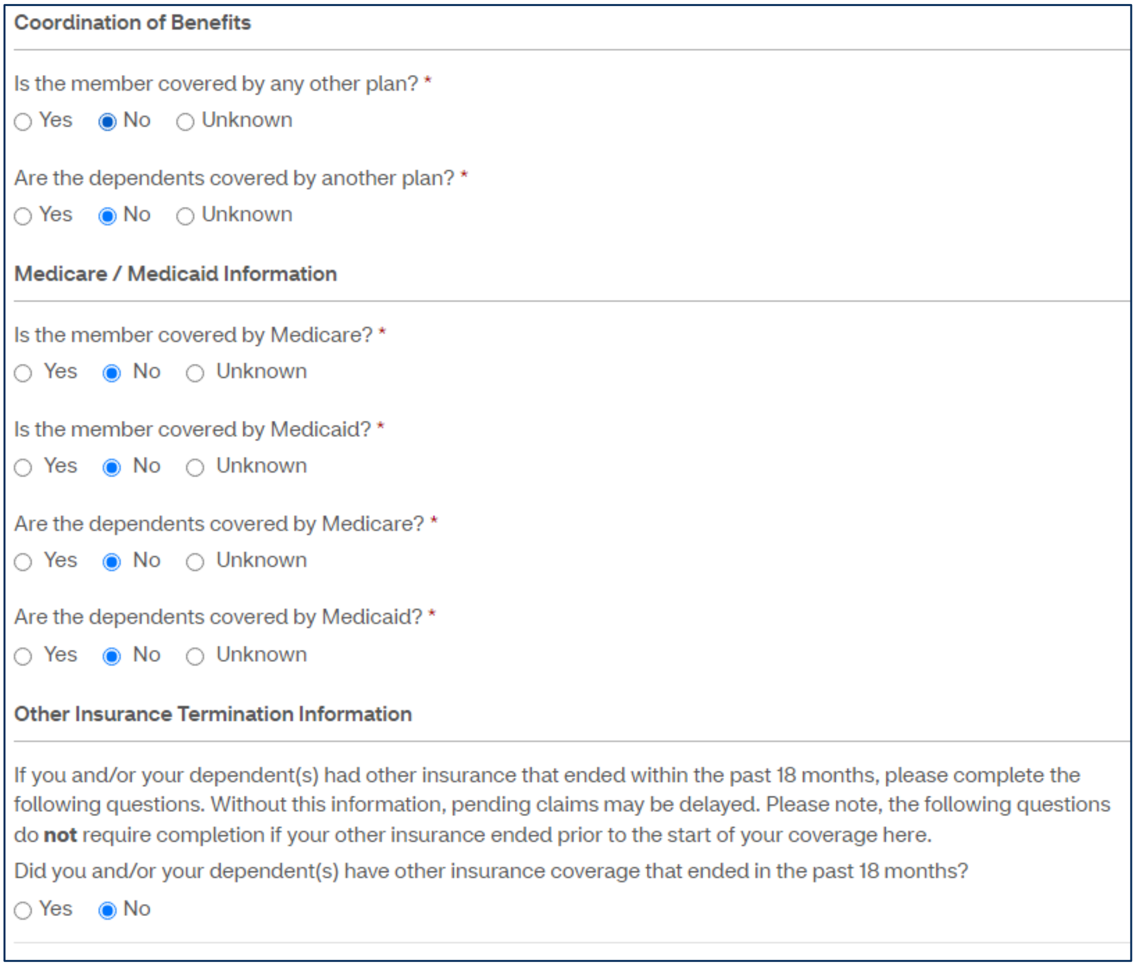
4. Use the *Yes/No* buttons to confirm whether the change in coverage also applies to dependents. Select the checkbox for the applicable dependents if needed.



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



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



Coordination of Benefits

Is the member covered by any other plan? *

○ Yes ◉ No ○ Unknown

Are the dependents covered by another plan? *

○ Yes ◉ No ○ Unknown

Medicare / Medicaid Information

Is the member covered by Medicare? *

○ Yes ◉ No ○ Unknown

Is the member covered by Medicaid? *

○ Yes ◉ No ○ Unknown

Are the dependents covered by Medicare? *

○ Yes ◉ No ○ Unknown

Are the dependents covered by Medicaid? *

○ Yes ◉ No ○ Unknown

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.

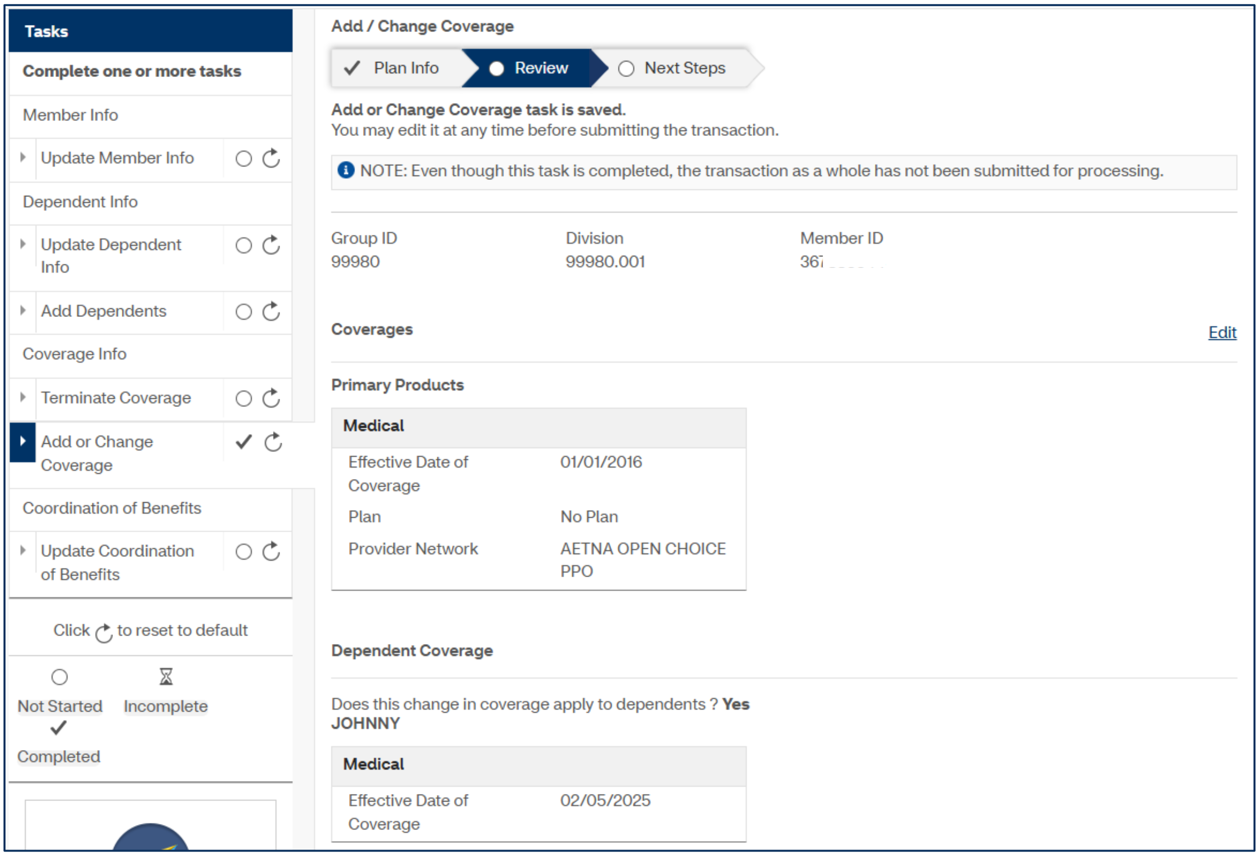
Did you and/or your dependent(s) have other insurance coverage that ended in the past 18 months?

○ Yes ◉ No

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 blue *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 blue *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 such as *Update Member Info, Add Dependents, Change Divisions, Terminate Coverage, Add or Change Coverage and Update Coordination of Benefits Information*.

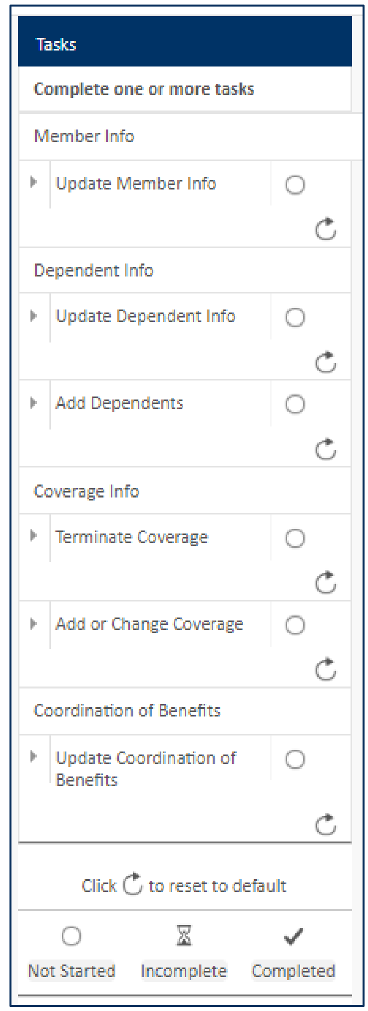
1. In this example, we will process a division change and update an address.

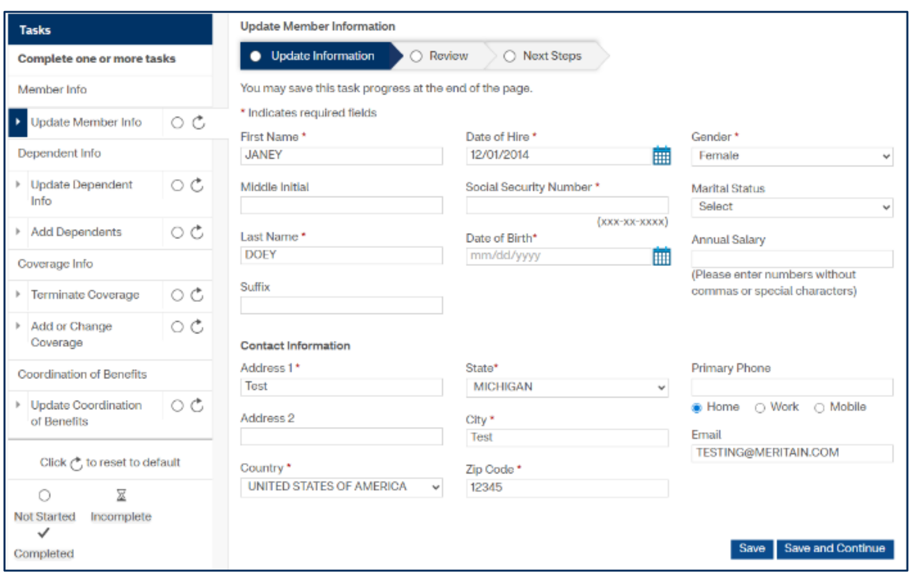
2. To update an address, *select Update Member Info* from the *Task Menu*.

3. Please note, if a demographic update for a dependent is needed, choose *Update Dependent Info* from the Task Menu.

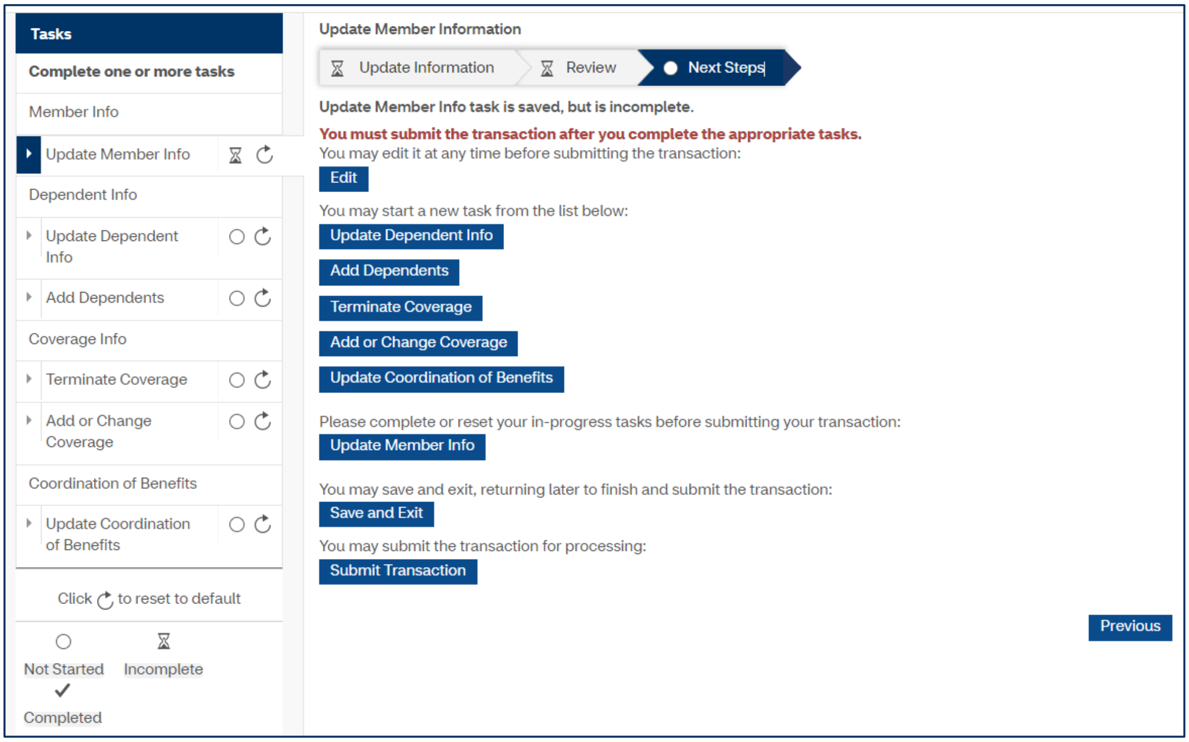
4. Update the applicable fields under *the Contact information* section. Click the blue *Save and Continue* button when complete.

5. Review everything completed for the *Update Member Info* task. Users can go back to specific sections and make edits if needed. Click the blue *Save and Continue* button in the bottom right corner.

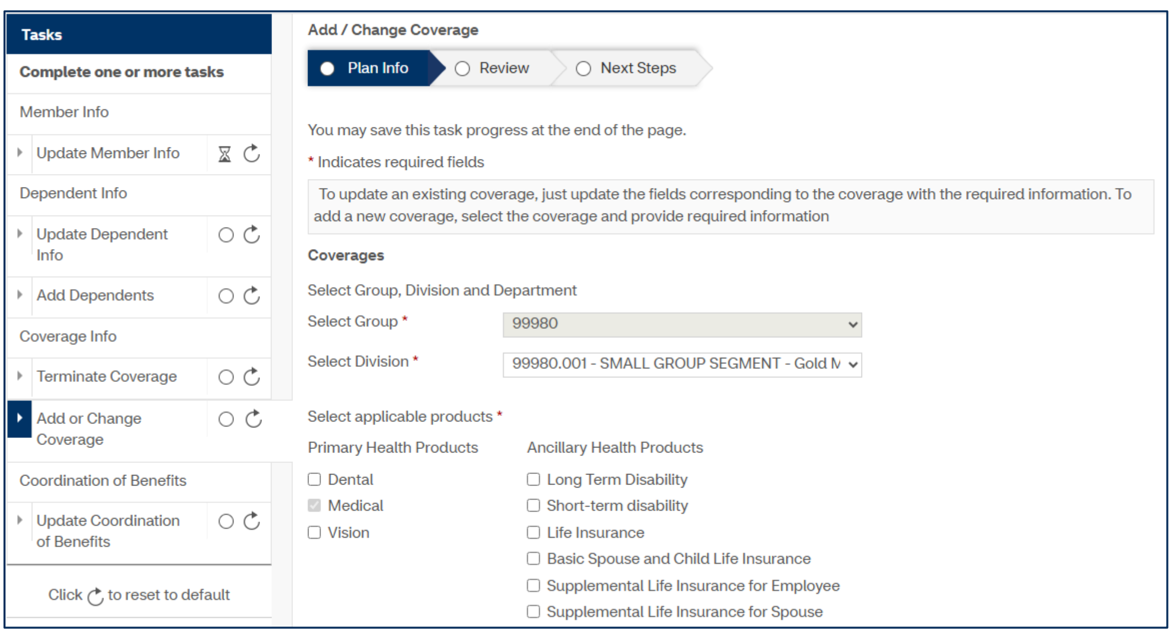




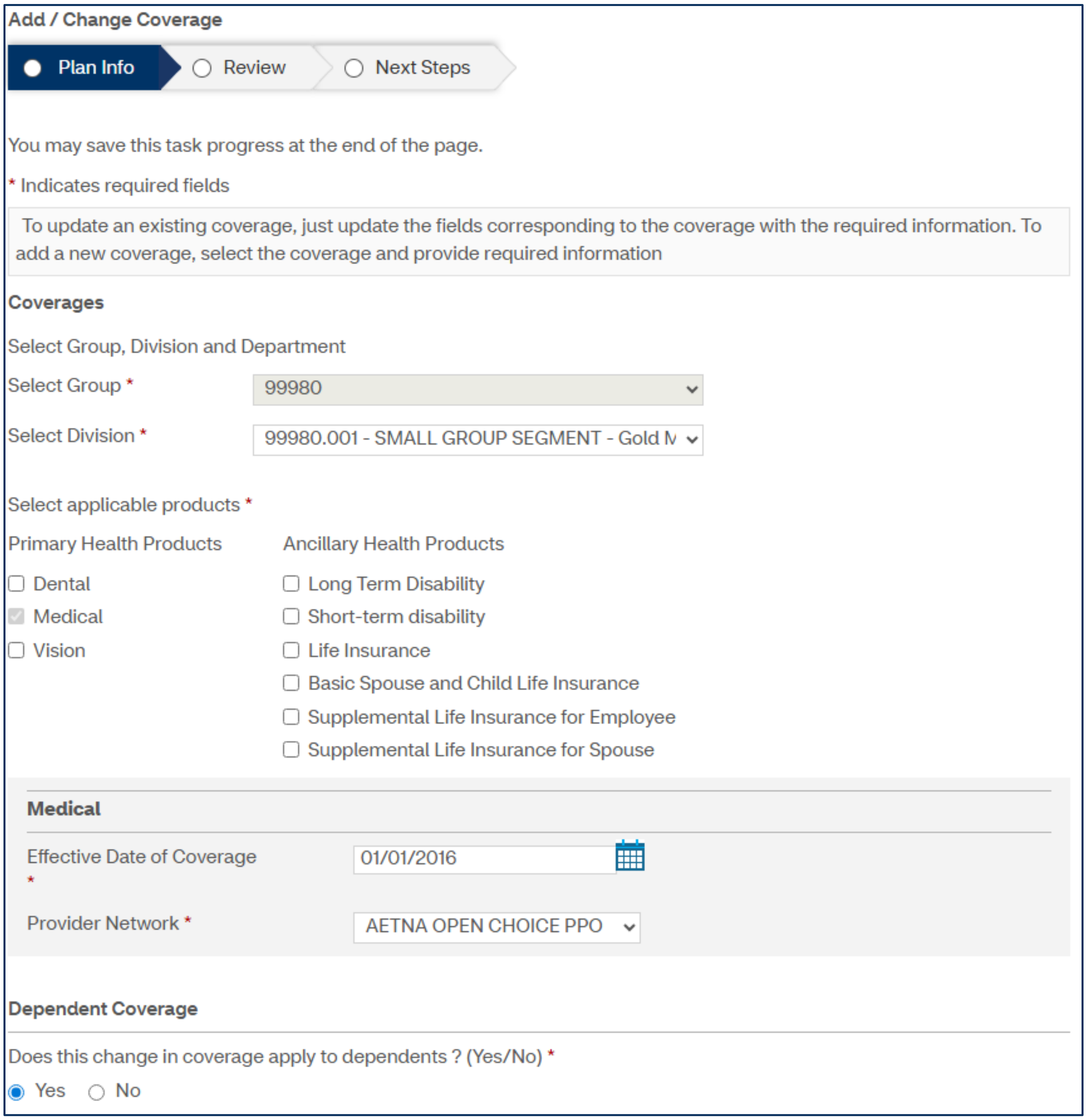
6. Select the *Add or Change Coverage* task from the *Task Menu* or set of blue buttons to complete the *Division Change* portion of the update.



7. Under *Plan Info*, there is a field to *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.

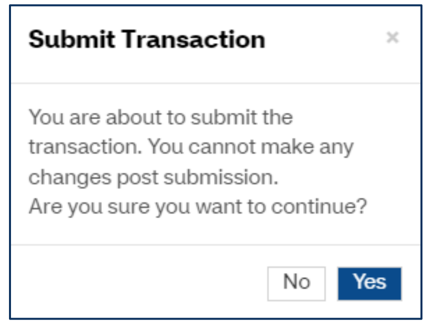


9. Complete the *Coordination of Benefits* section, then click the blue *Save and Continue* button at the bottom right of the screen.

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

11. Select an additional task to complete if needed. Otherwise, click the blue *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

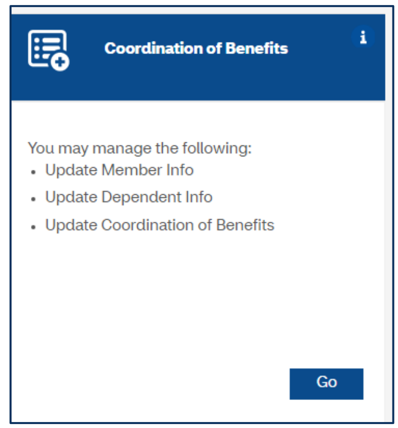
1. Users can update Coordination of Benefits for existing members using the *Mid-year Life Event Change, Open Enrollment Change or Coordination of Benefits* transaction types.

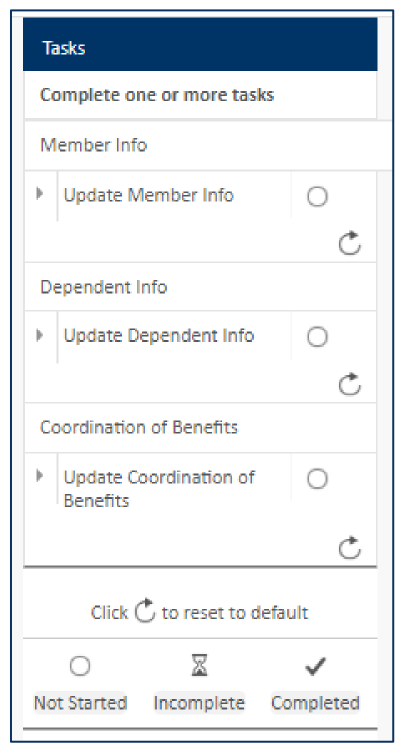
2. If a user only needs to update Coordination of Benefits information, use the designated Coordination of Benefits transaction type. Click *Go*.

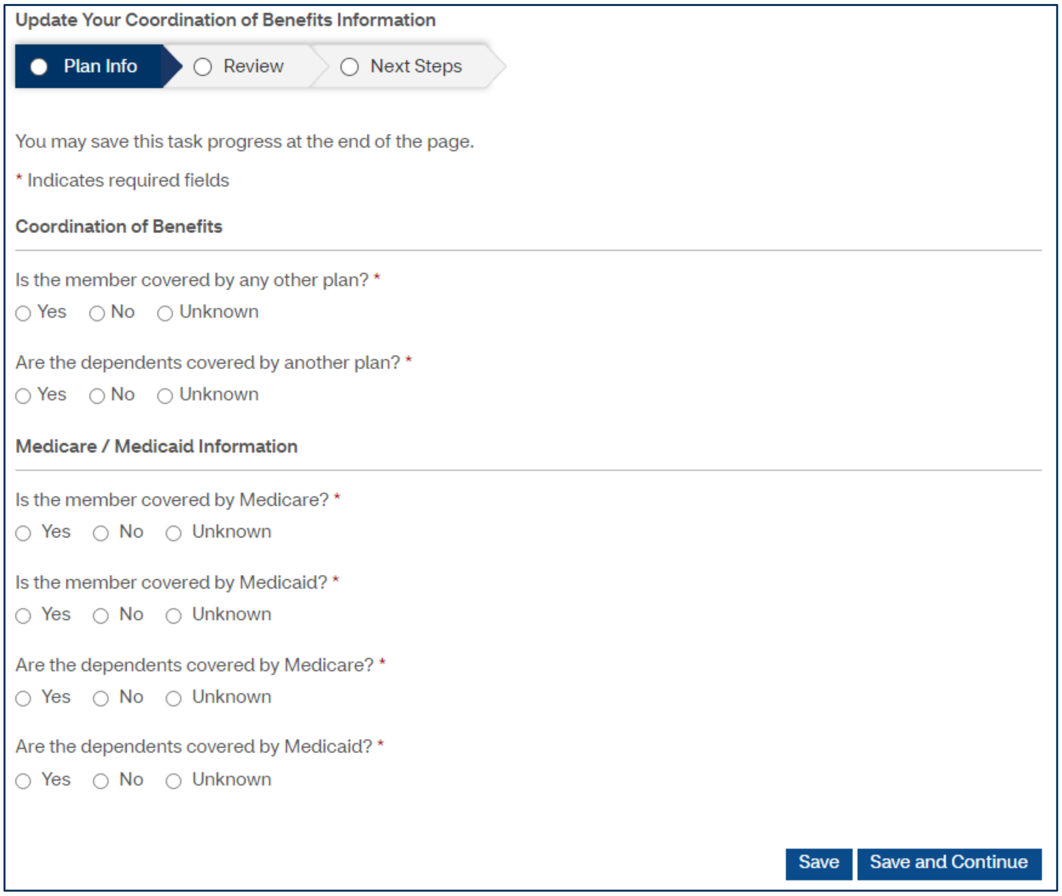
3. Click *Update Coordination of Benefits* from the *Task Menu*. **Please note:** users can also use the *Update Member Info* and *Update Dependent Info* tasks if needed.

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.

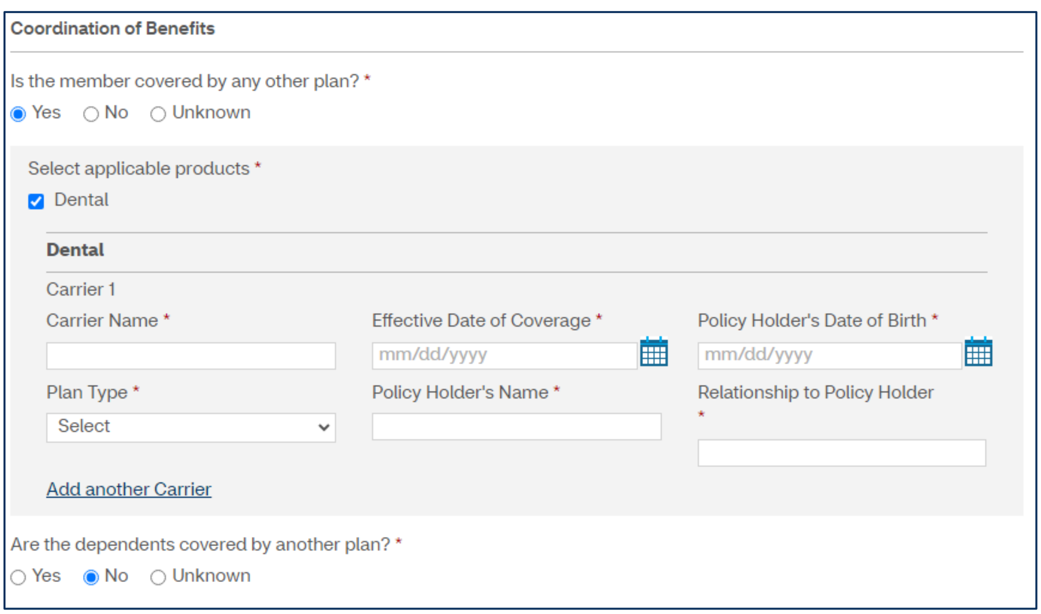
5. Make the appropriate selections for each question. A *Yes*, *No* or *Unknown* selection is required for all questions to submit the transaction to Meritain Health. **Please note:** the form contains separate questions pertaining to other coverage through Medicare or Medicaid.



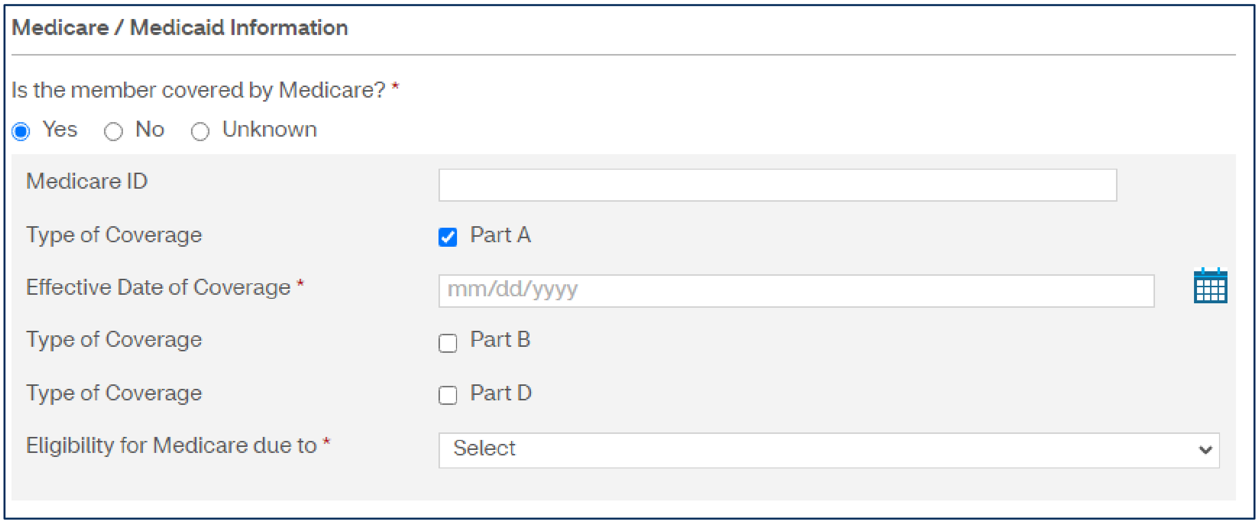




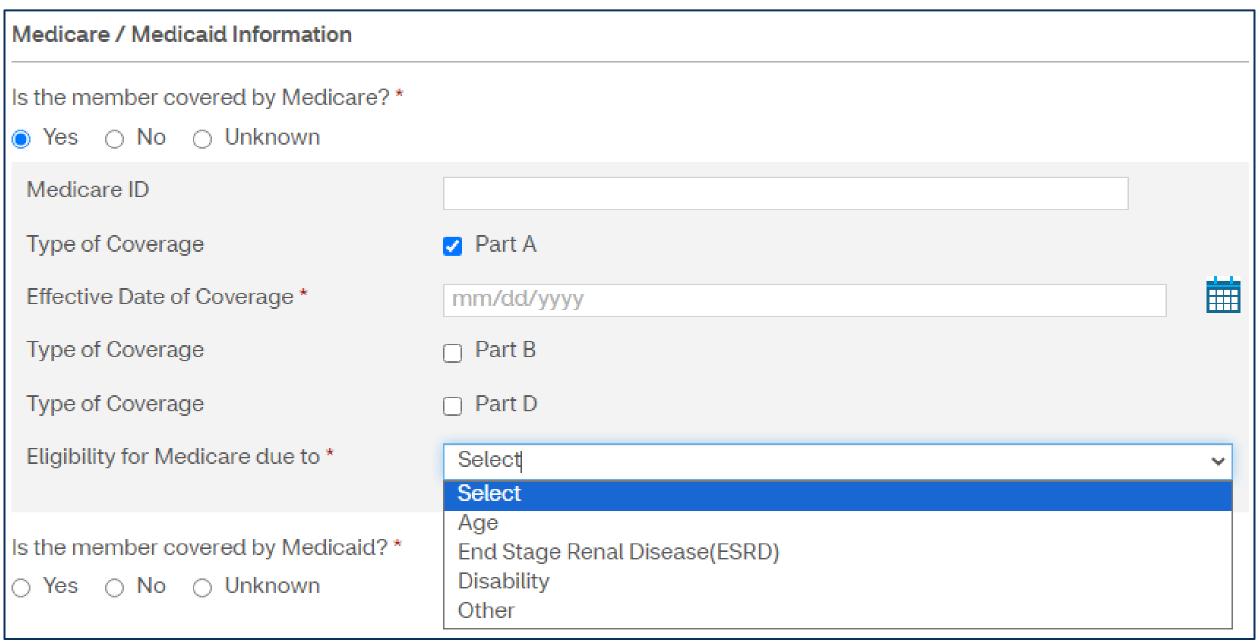
6. When *Yes* is selected, additional boxes expand to capture the detailed information about the other insurance. Fields with a red asterisk indicate they are required.



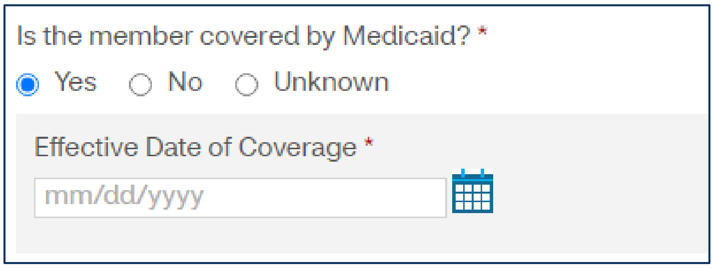
7. If a member or dependent(s) has Medicare, select *Yes* to the applicable question. A box will expand allowing the user to type the Medicare ID and indicate whether the Medicare beneficiary has Parts A, B and/or D. A required Effective Date of Coverage field expands when Parts A, B or D are selected.



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



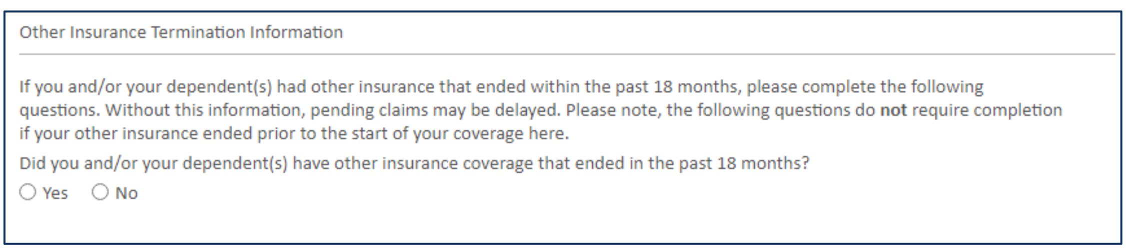
9. If the member or dependents have other coverage through Medicaid, select *Yes* to the Medicaid question and provide the *Effective Date of Coverage*.



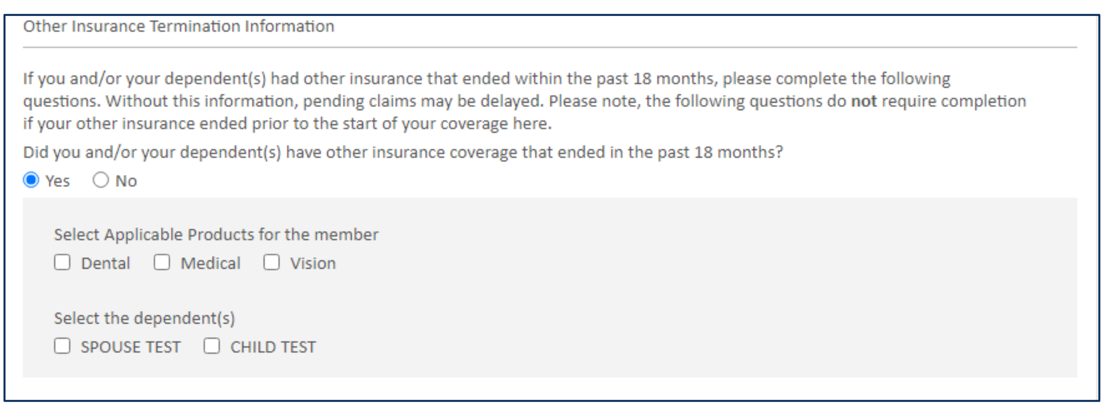
10. If at least one family member has no other coverage, you'll be asked whether any family members had other insurance coverage that ended within the last 18 months. This question is important to ensure there are no gaps in the Coordination of Benefits history Meritain Health has on file which could 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.

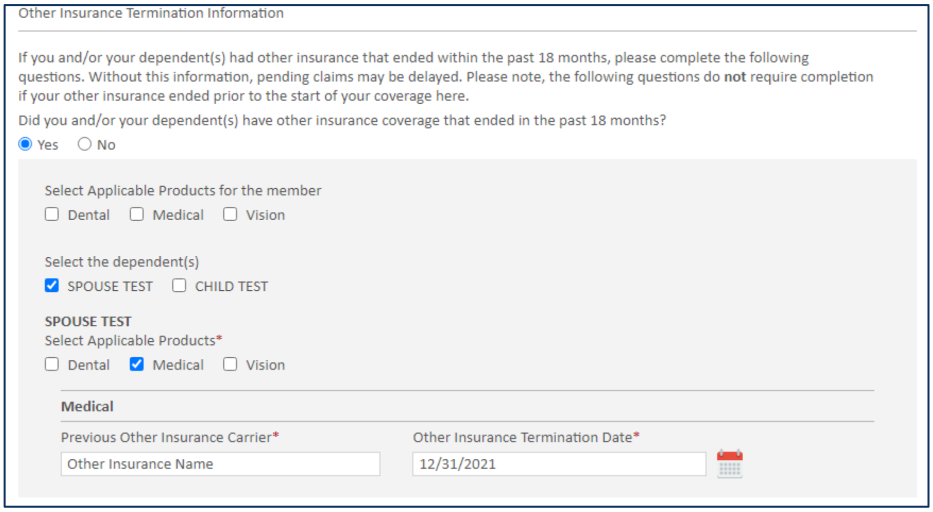


11. Checkboxes will expand allowing the user to select the applicable products if the member (subscriber) had the other insurance. Leave these blank if the member did not have other coverage.



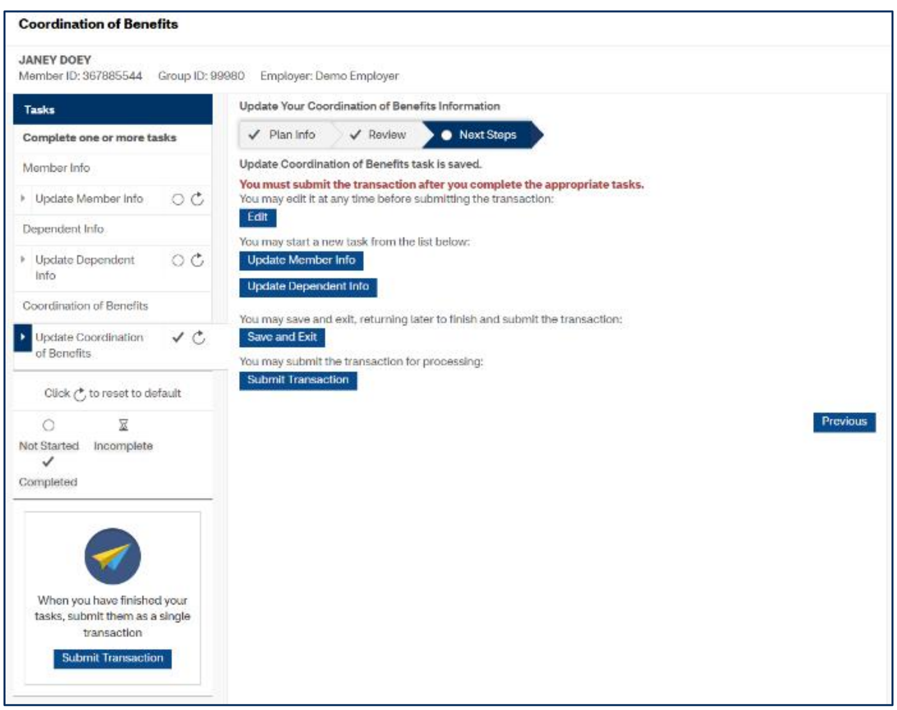
12. If it was a dependent(s) that previously had the other insurance, check the box with the applicable dependent name(s) and then select the applicable product(s).

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.

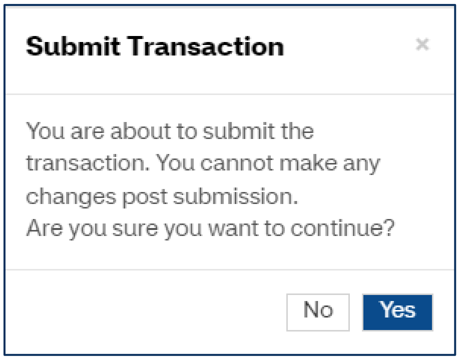


14. Once complete, click the blue *Save and Continue* button. Review and edit if necessary. Click the blue *Continue* button in the bottom right corner when finished.

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.

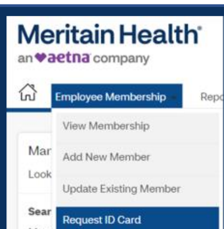


16. Click the blue *Submit Transaction* button to submit all completed tasks within the transaction for Meritain Health processing. A dialog box will appear to ensure the user is ready to submit the transaction. Click *Yes*. You will receive a congratulations message, as well as a Transaction ID number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



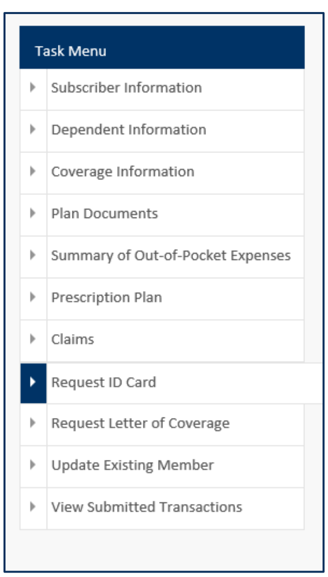
Request ID Card

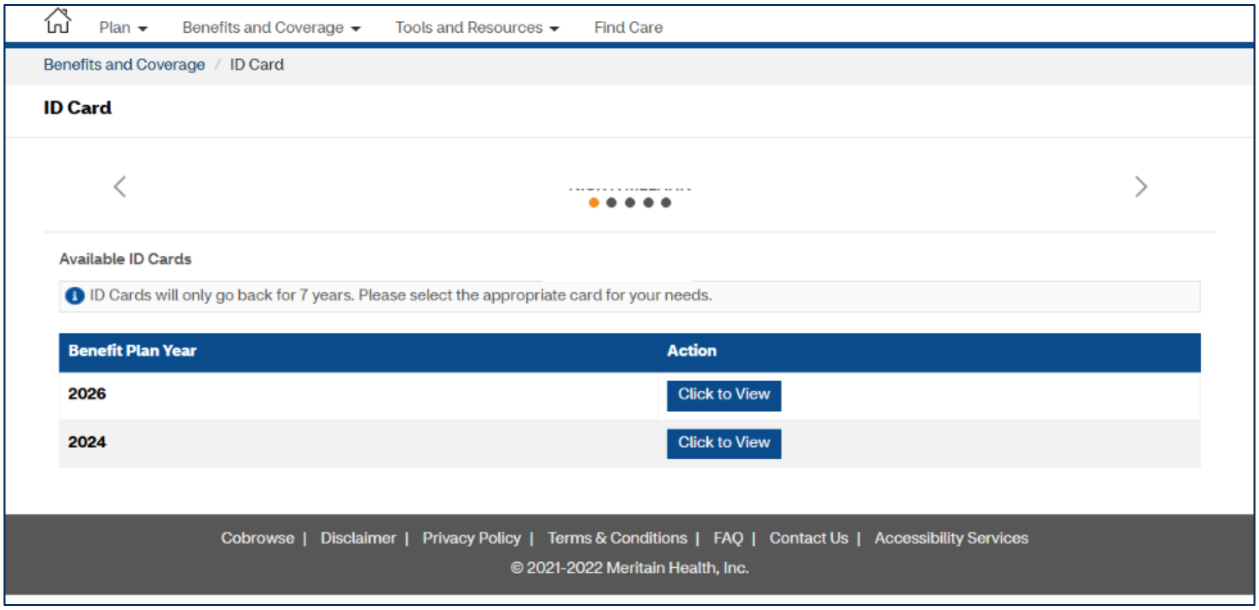
Search for employee record via the Manage Employee tile on the homepage and enter employee record.



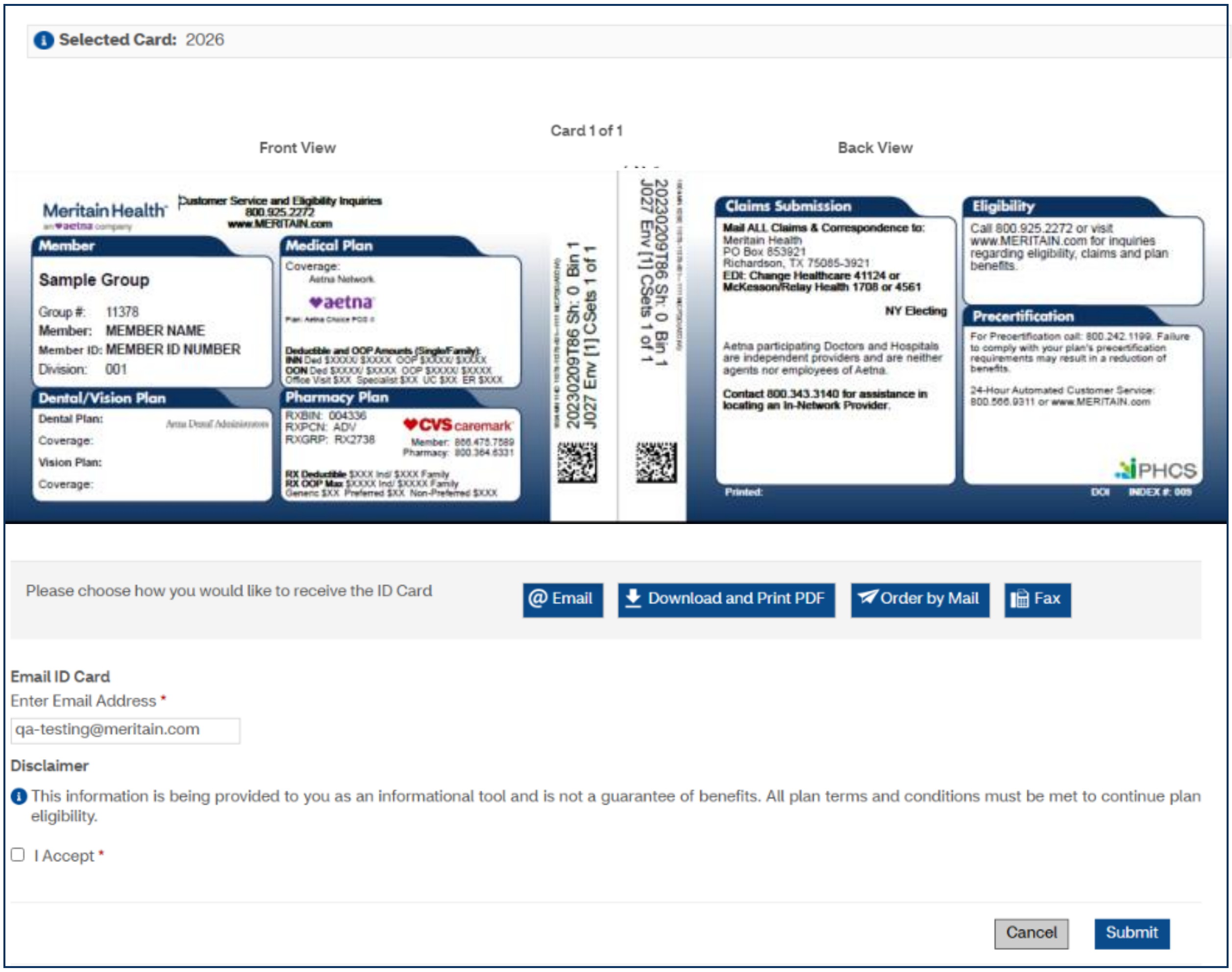
Alternatively, you can use the Employee Membership drop-down on the top toolbar and click *Request ID Card,* then search for the employee.

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





If the member has historical ID cards available in Meritain Health, you will see multiple Click to View selection options to view ID cards from specific plan years. Historical ID cards will go back seven years and the Meritain Health website will begin retaining historical ID cards as of 2026 plan year. Four options are available for card delivery; additional information fields will open based on choice.

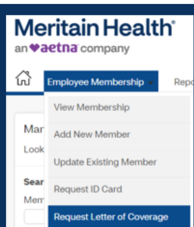


If a member does not have multiple ID cards available for review, you will not be given specific benefit plan year options, and your active ID card will load without having to select an option.

When viewing your ID card, you'll be able to view your card and download a PDF, have a copy of your card emailed to you or emailed/faxed to your provider. We also provide an Order by Mail option when viewing active ID cards to have your ID mailed to you. **Please note:** we do not provide mail services for expired ID cards.

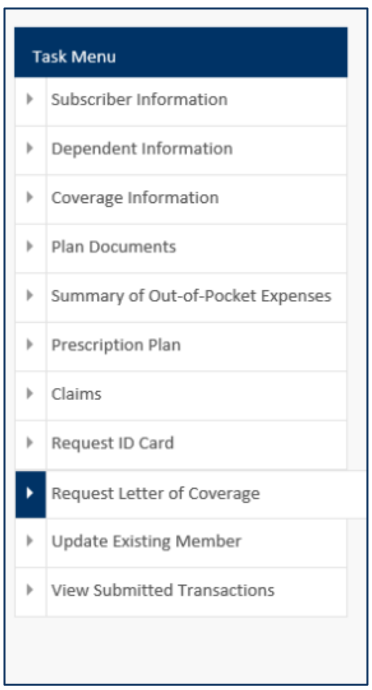
Request Letter of Coverage

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

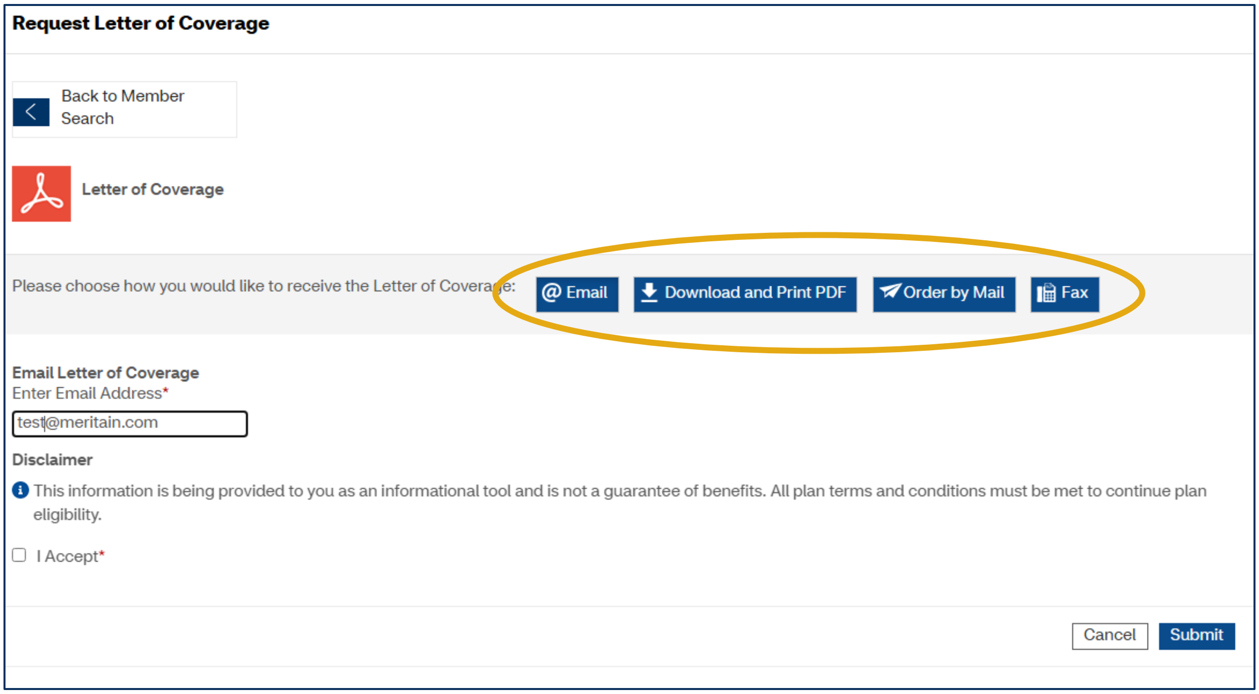


Alternatively, you can use the *Employee Membership* drop-down on the top toolbar and click *Request Letter of Coverage,* then search for the employee.

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

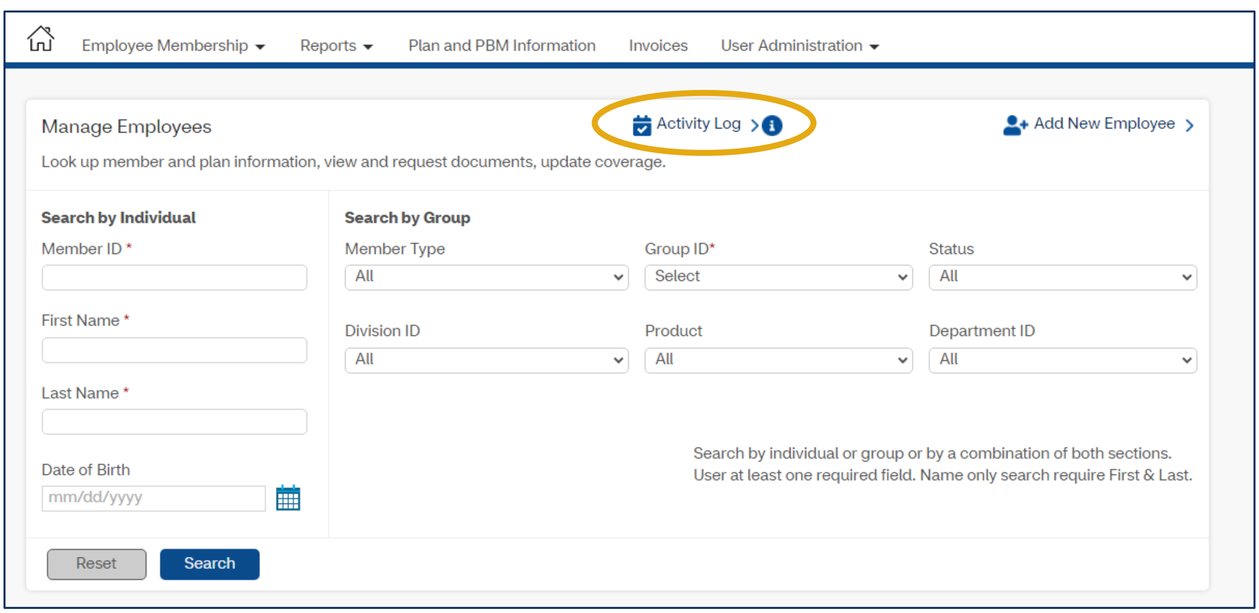


Four options are available for letter delivery; additional fields will open based on delivery choice.

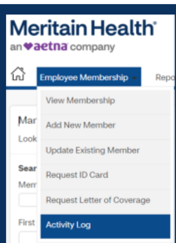


Activity Log

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*.

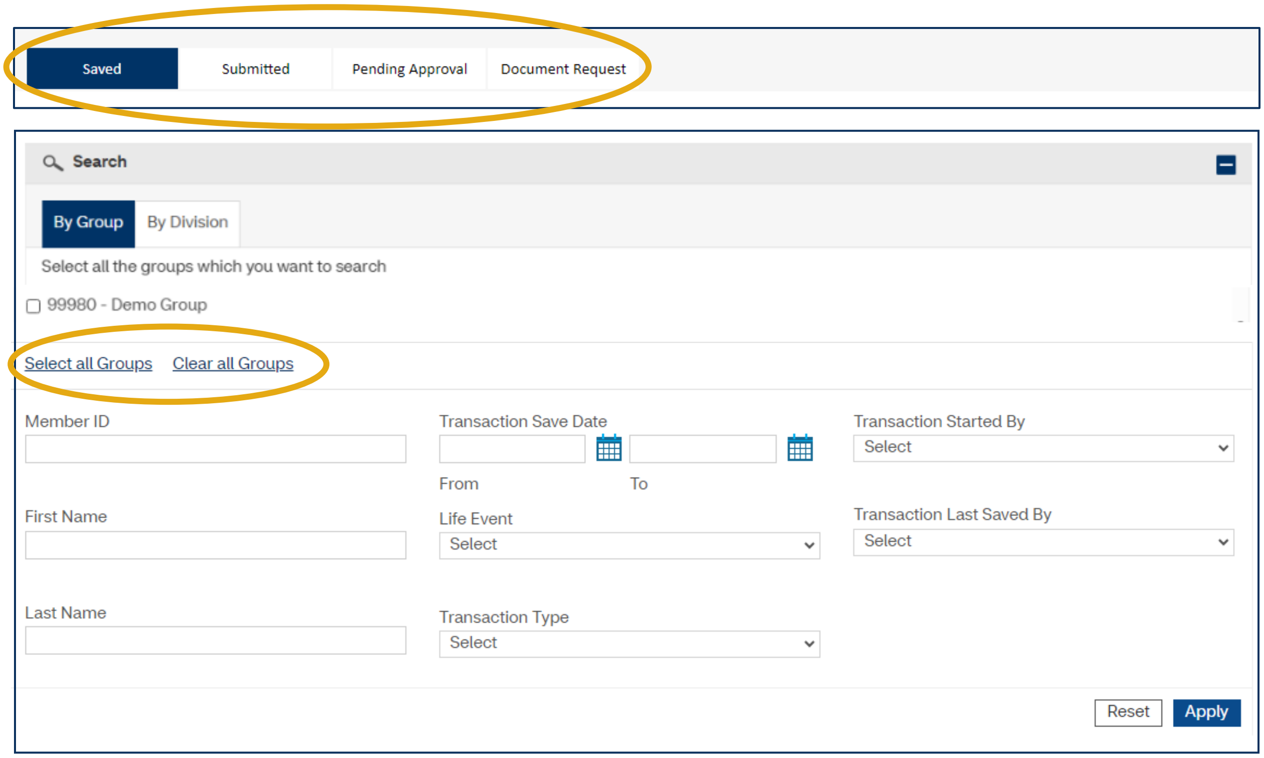
Once you reach the transaction search page, you may search saved, submitted and pending approval transactions by group or division. Then, enter your information in the required fields and click *Apply*.

- **Saved** transactions have been partially entered into the system but not yet submitted to Meritain Health for processing.

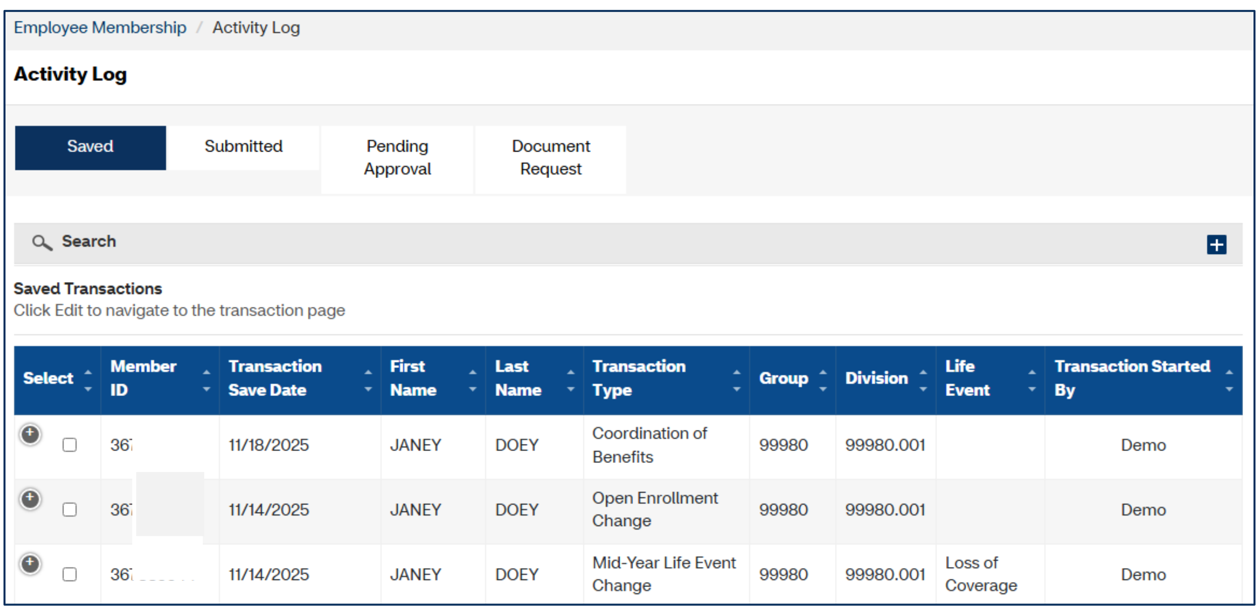
- **Submitted** transactions have been submitted to Meritain Health for processing.

- **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.

- **Document Request** now shows all transactions related to a document requests (e.g., ID cards and Letter of Coverage). This allows the ability for a quick list of any *Document Request* sent previously.

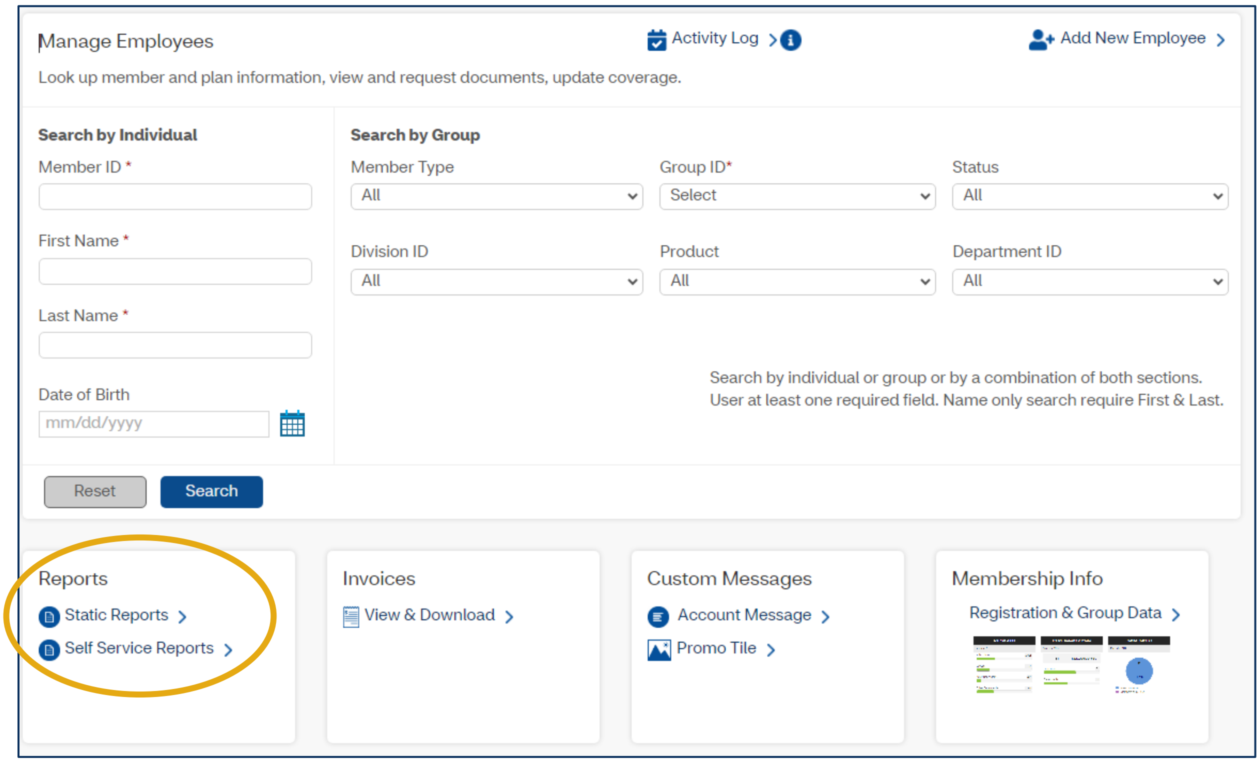


You may export your transactions in PDF or Excel format. You also have the option to print the transactions or edit them.

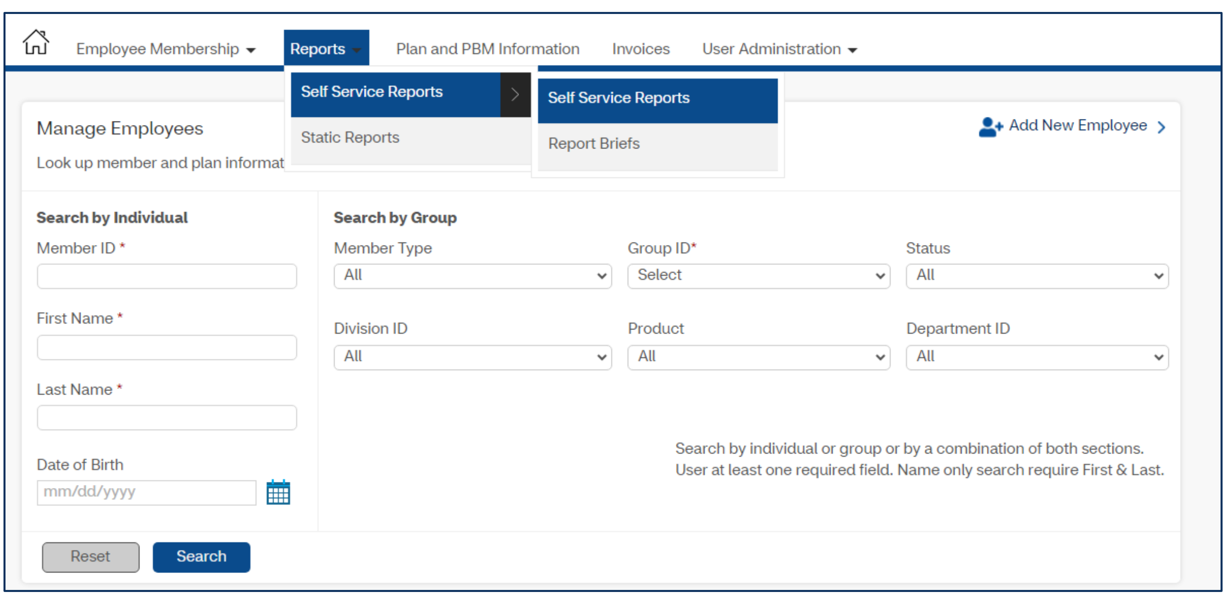


Reports

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.



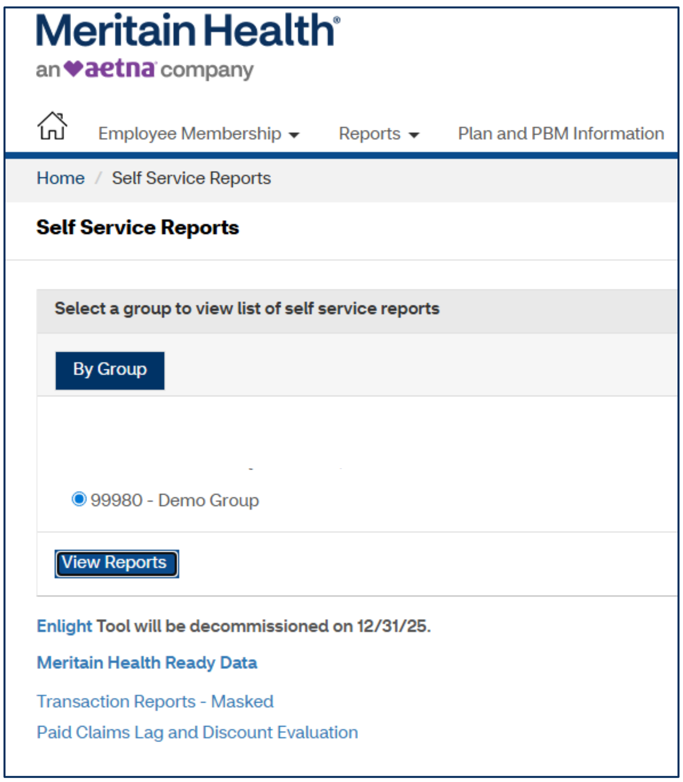
In addition, you can go to the *Reports* drop-down on the top toolbar, and select the *Self-Service Reports, Static Reports or Report Briefs* option.



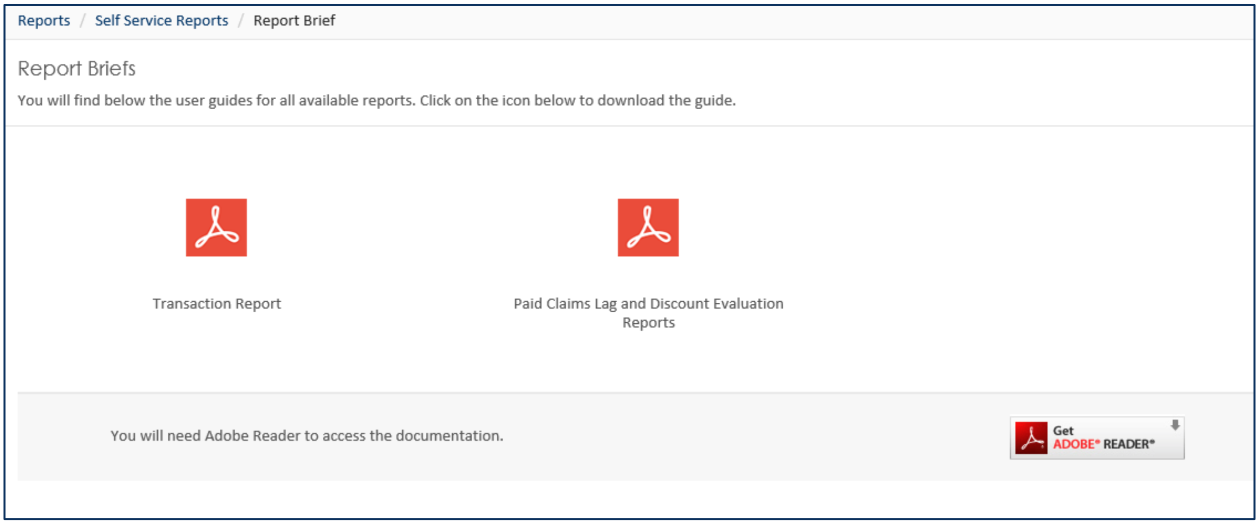
The *Self-Service Reports* include:

- 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 within our Meritain Health Ready Data reporting tool. To view the reports, click on the *View Reports* links.



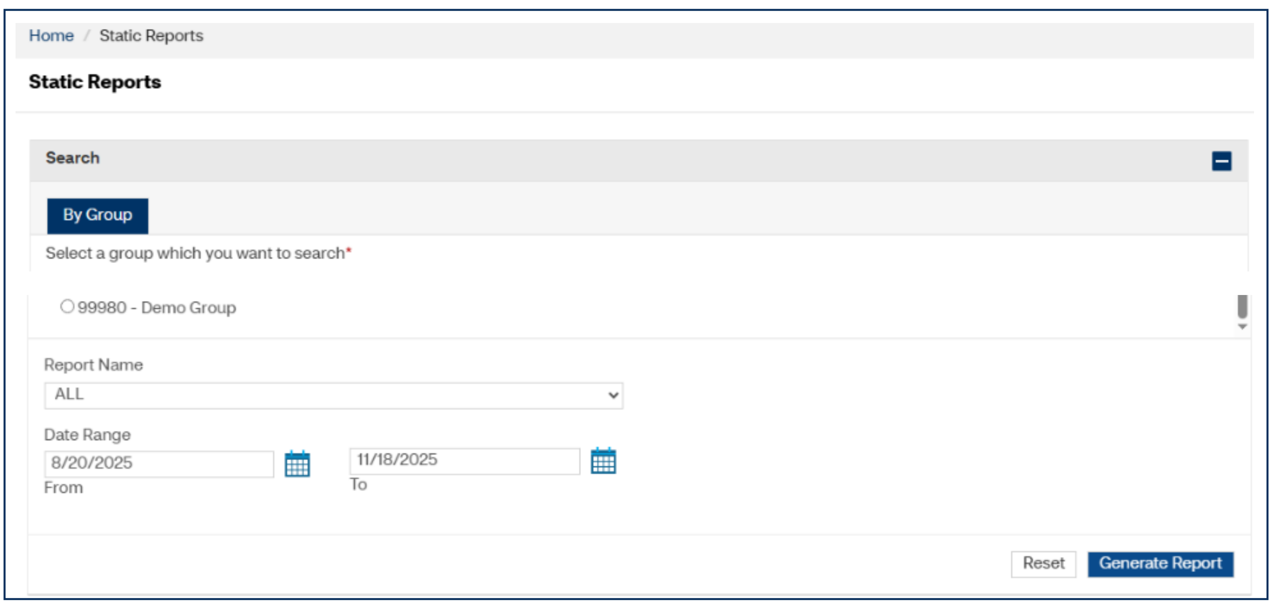
The **Report Brief** (found in the *Self-Service Report* drop-down) contains all the user guides for all available reports. You can click on the link and then export to excel or access with the download button.



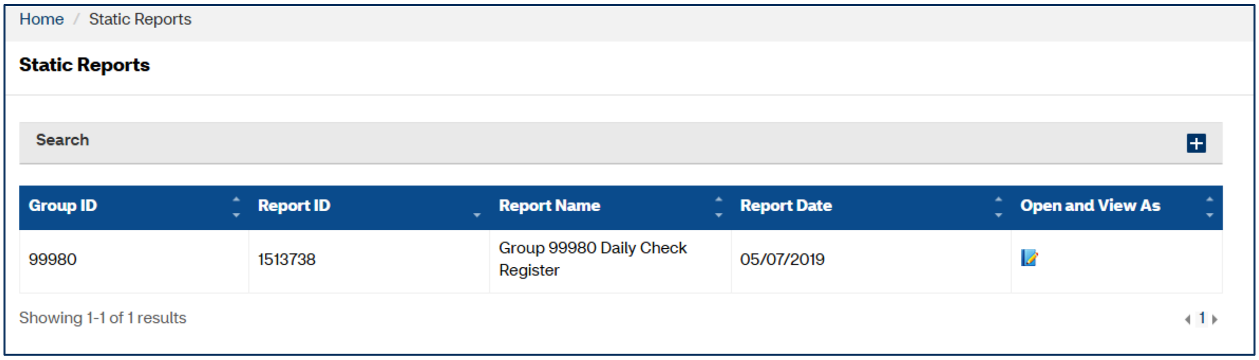
The **Static Reports** set up for each group is located in the drop-down list and may include:

- 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.



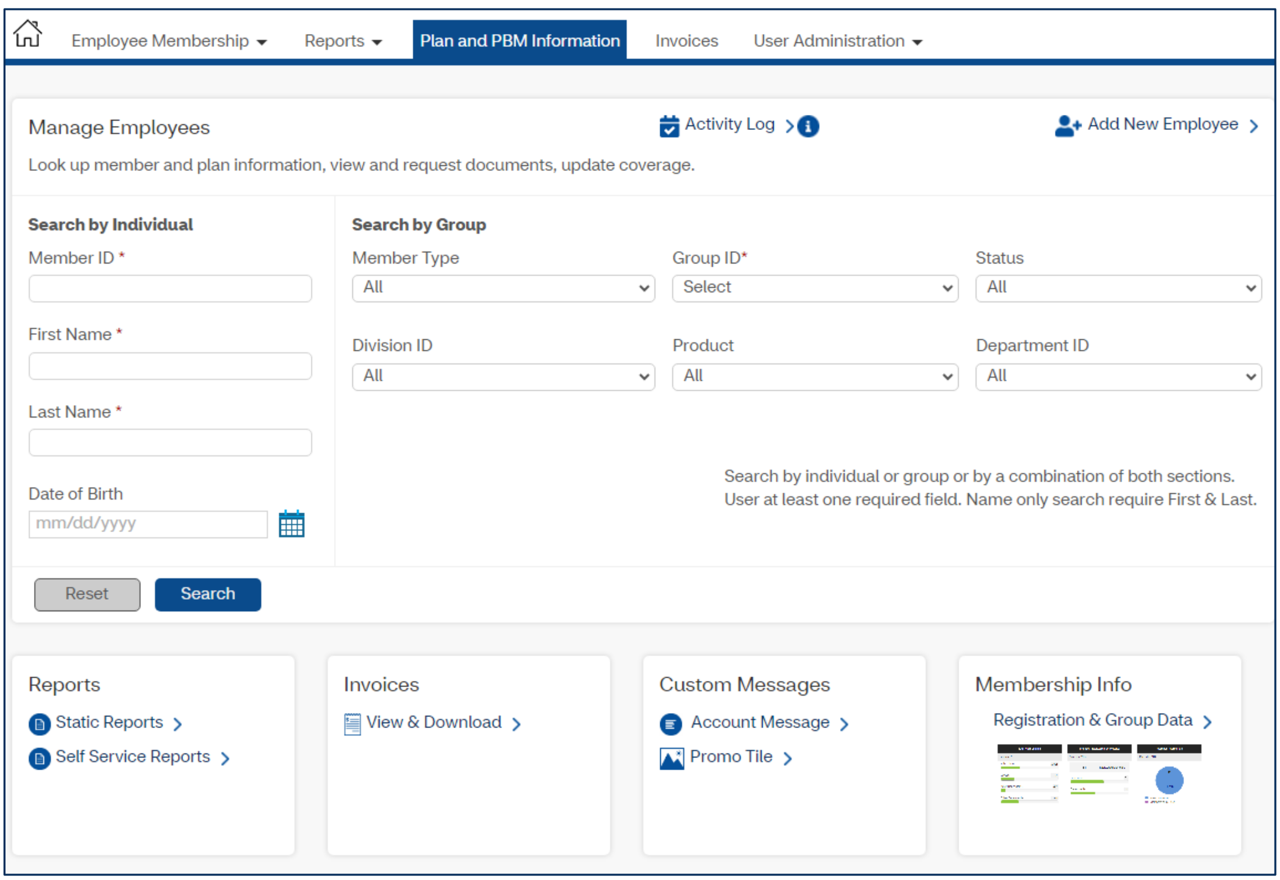
The report results will appear. To view the reports, choose from the *Open and View As* column.



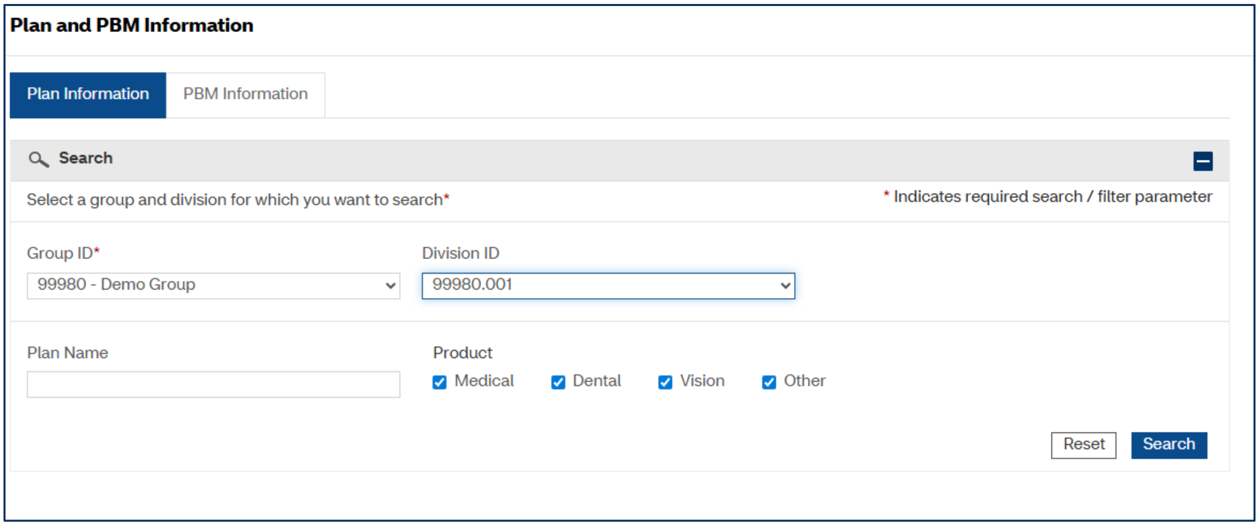
Plan and PBM Information

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

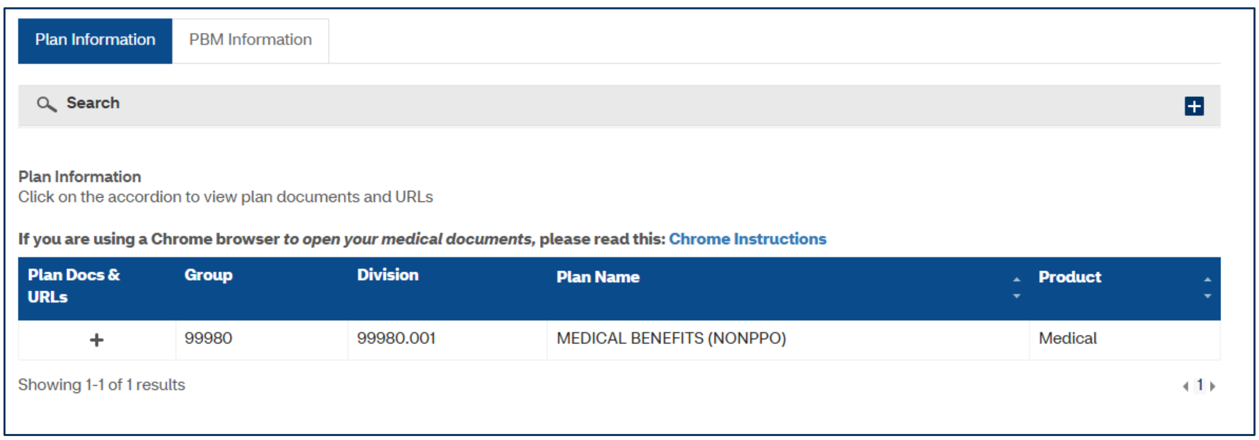
You can access the plan information on the homepage. Just click on *Plan and PBM Information* on the top menu toolbar.



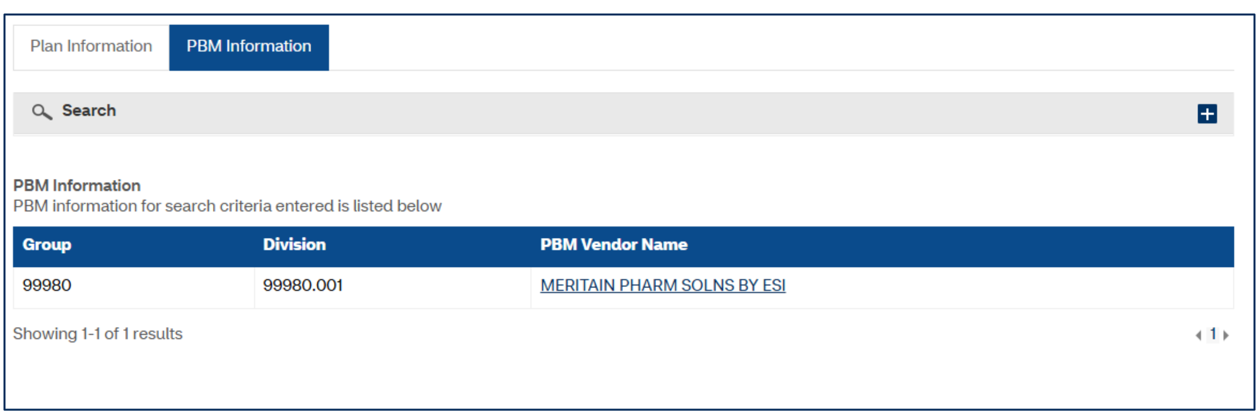
You will be able to select one or more groups. As you select the groups, the divisions belonging to the groups selected are populated under the *Divisions* tab. Selection of groups is necessary to select divisions. Then, click *Search*.



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.

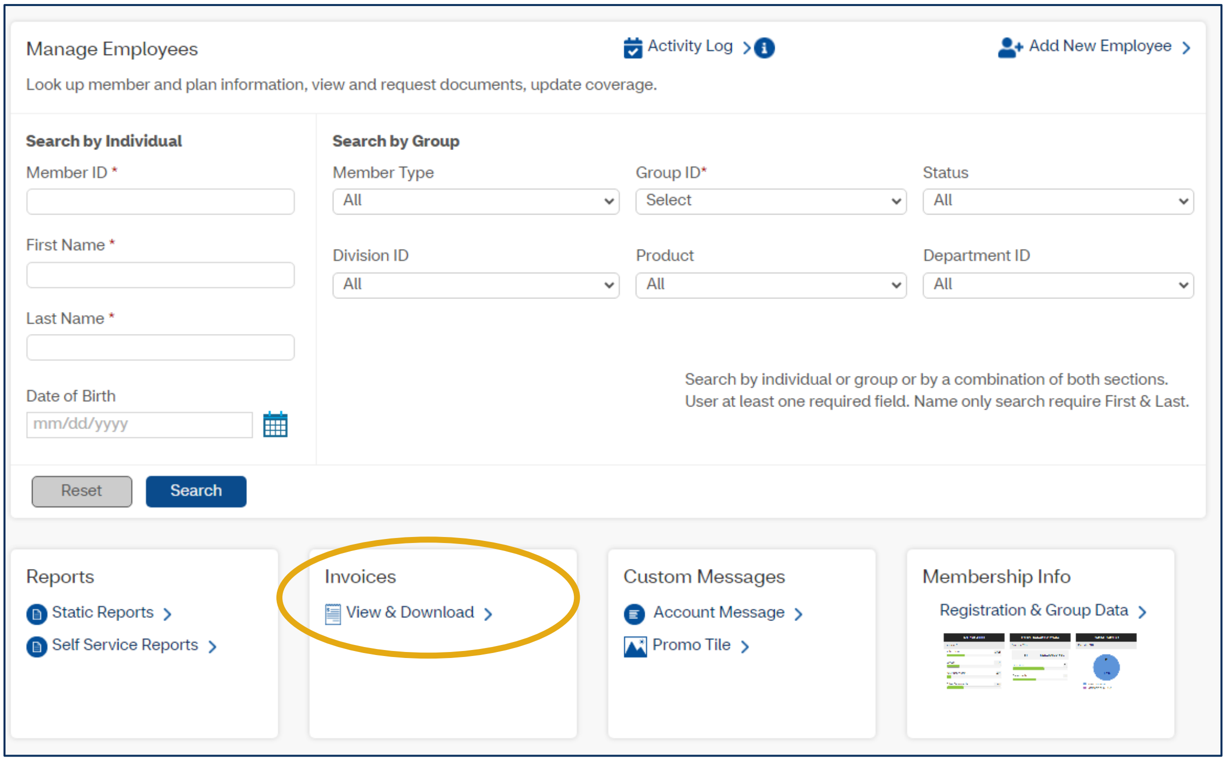


The PBM information list will appear. Click on the attachment to download and export in PDF or Excel format. In addition, you can print the attachment. Then, click on the PBM vendor name link.

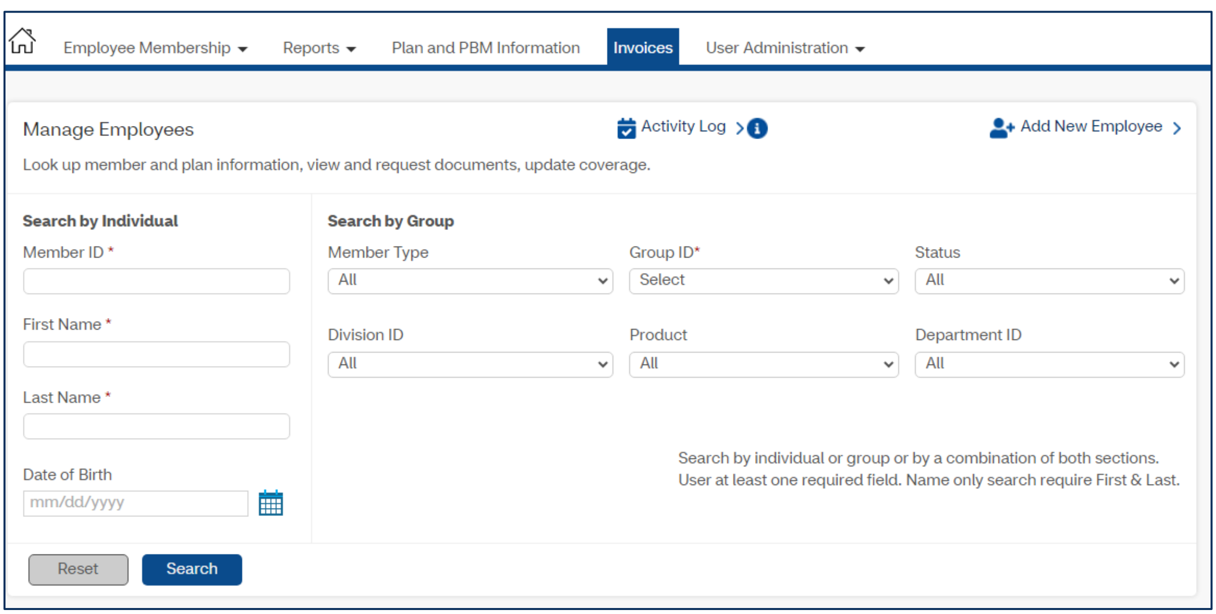


Invoices

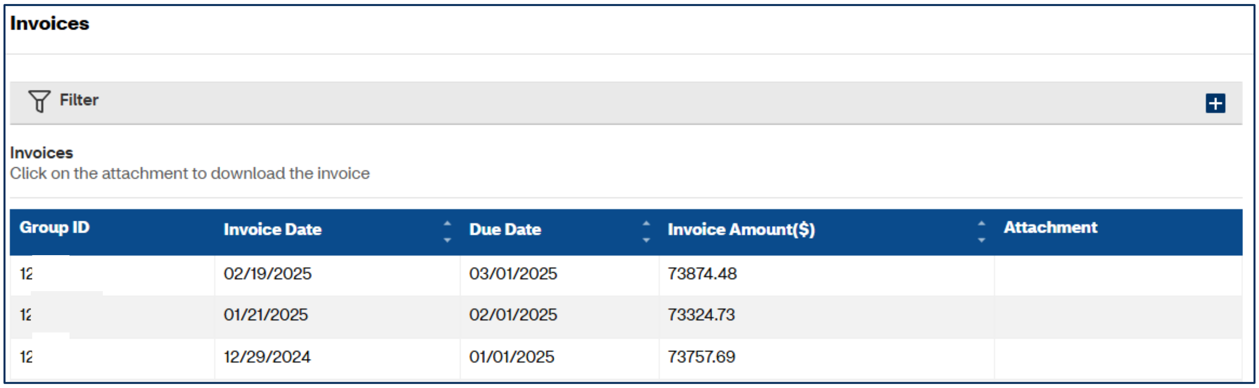
For help managing your health benefit plan, you can download invoices right from the employer website. Go to the *Invoices* widget at the bottom of the employer homepage and select *View and Download*.



In addition, you can view invoices 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.



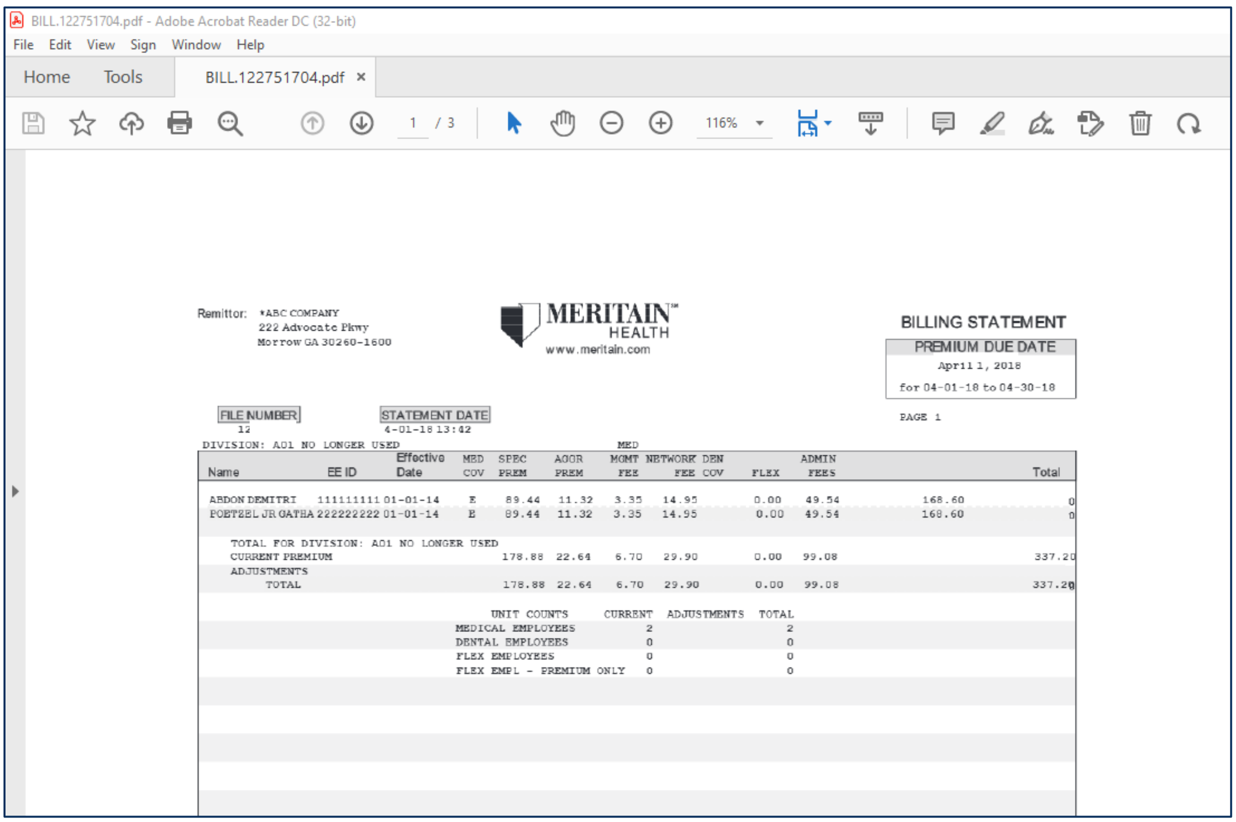
Invoices

Filter

Invoices
Click on the attachment to download the invoice

Group ID	Invoice Date	Due Date	Invoice Amount($)	Attachment
12	02/19/2025	03/01/2025	73874.48	
12	01/21/2025	02/01/2025	73324.73	
12	12/29/2024	01/01/2025	73757.69	

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

PAGE 1

FILE NUMBER
12

STATEMENT DATE
4-01-18 13:42

DIVISION: A01 NO LONGER USED

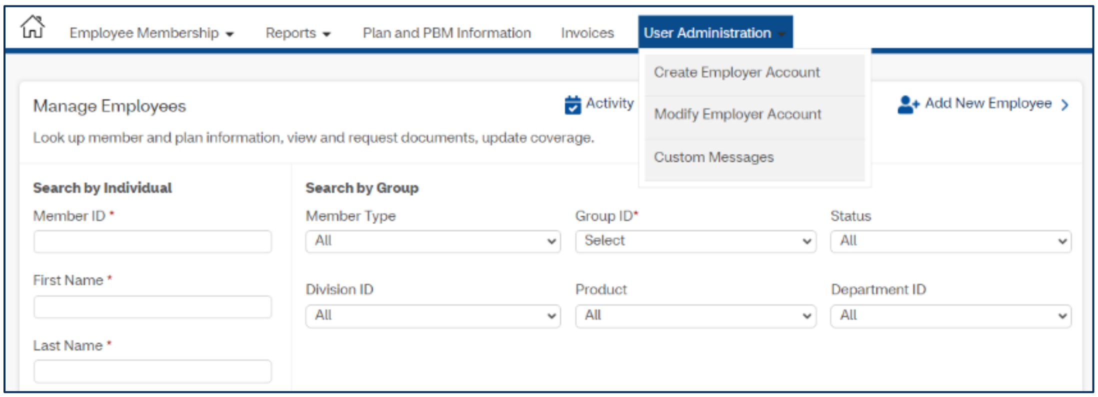
Name	EE ID	Effective Date	MED COV	SPEC PREM	AGGR PREM	MED MGMT FEE	NETWORK FEE	DEN COV	FLEX	ADMIN FEES		Total
ABDON DEMITRI	111111111	01-01-14	E	89.44	11.32	3.35	14.95		0.00	49.54	168.60	0
POETZEL JR GATHA	222222222	01-01-14	E	89.44	11.32	3.35	14.95		0.00	49.54	168.60	0
TOTAL FOR DIVISION: A01 NO LONGER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

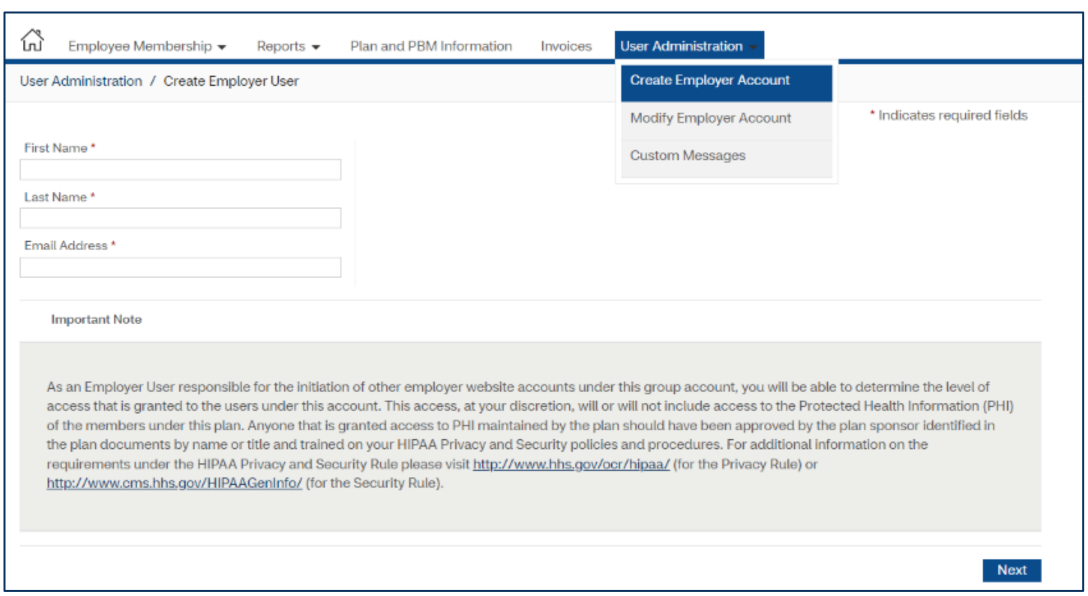


Create Employer Account

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



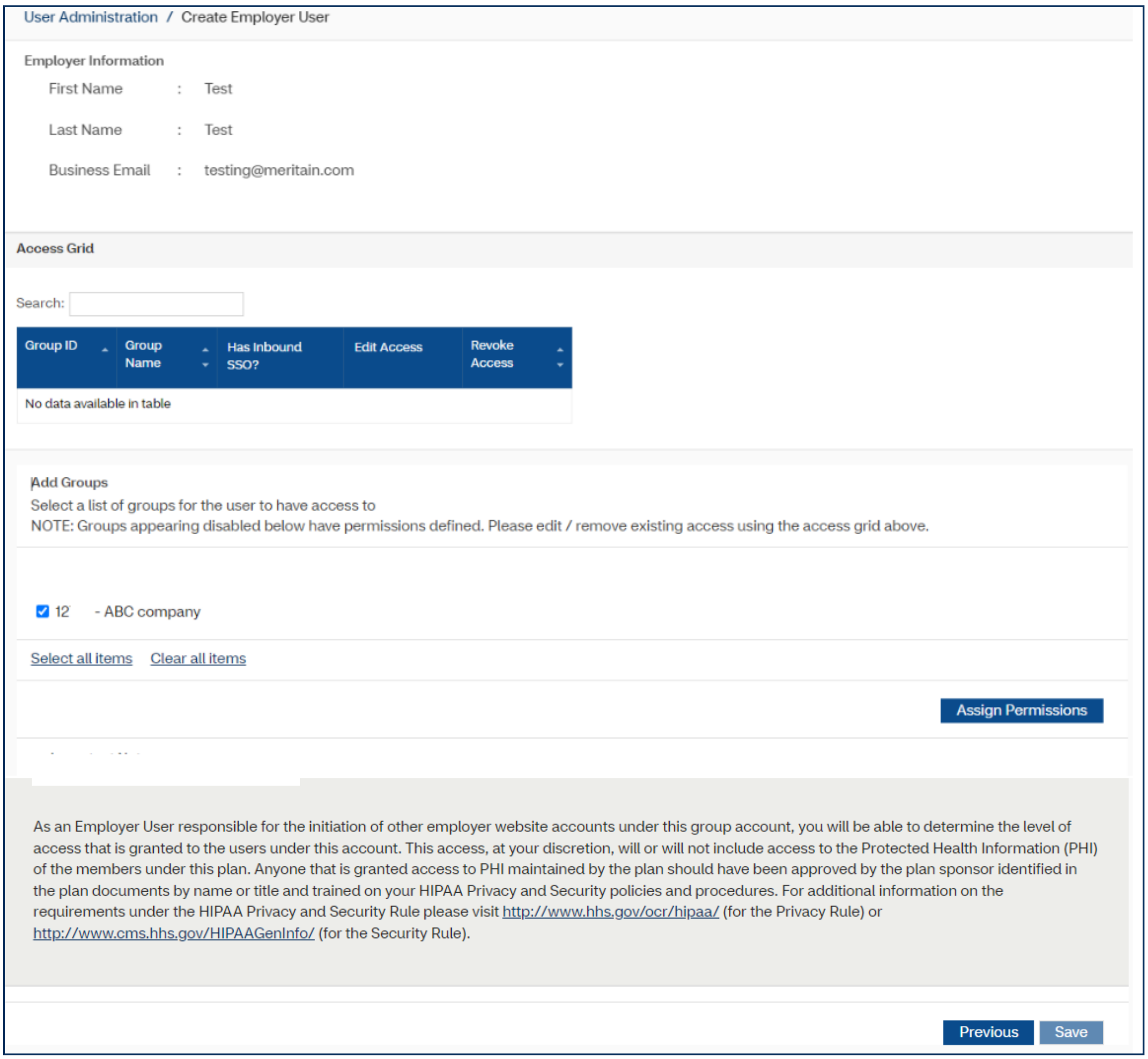
Note: Not all groups have this feature available/elected for their employer users.

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.

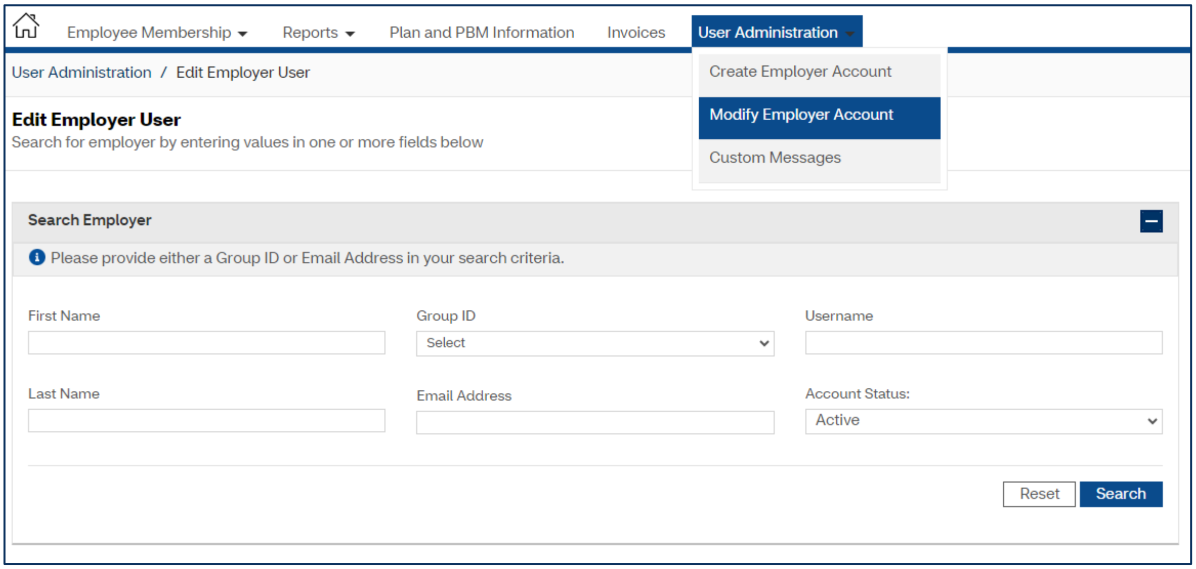
After you have assigned permissions to the user, click the *divisions and reports* they will have access to. Click the *Save Permission* button on the bottom right to save your changes.



Modify Employer Account

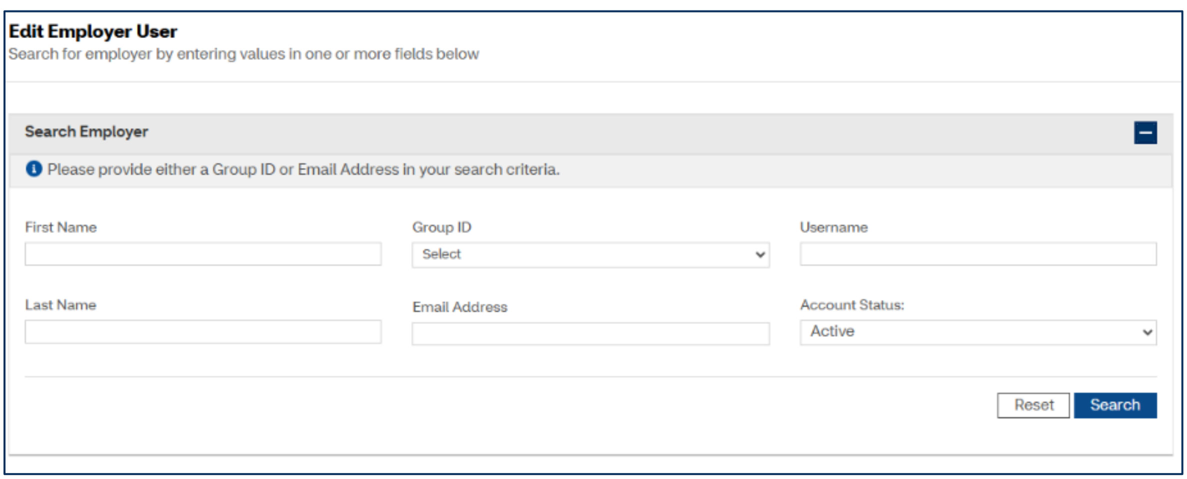
If an employee no longer needs permission as a user on the website, you can easily remove them from the account.

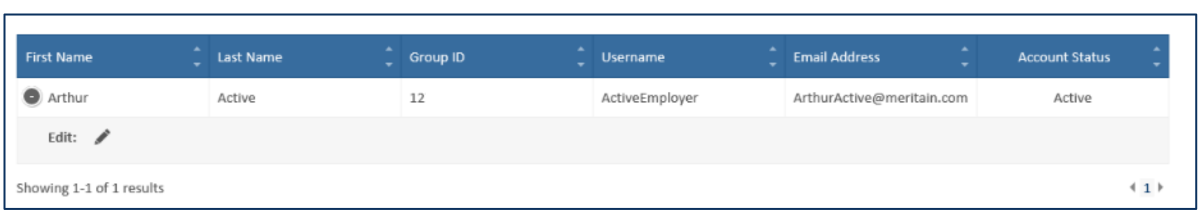
On the homepage, click on the *User Administration* drop-down on the top toolbar and choose *Modify Employer Account*.



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*.

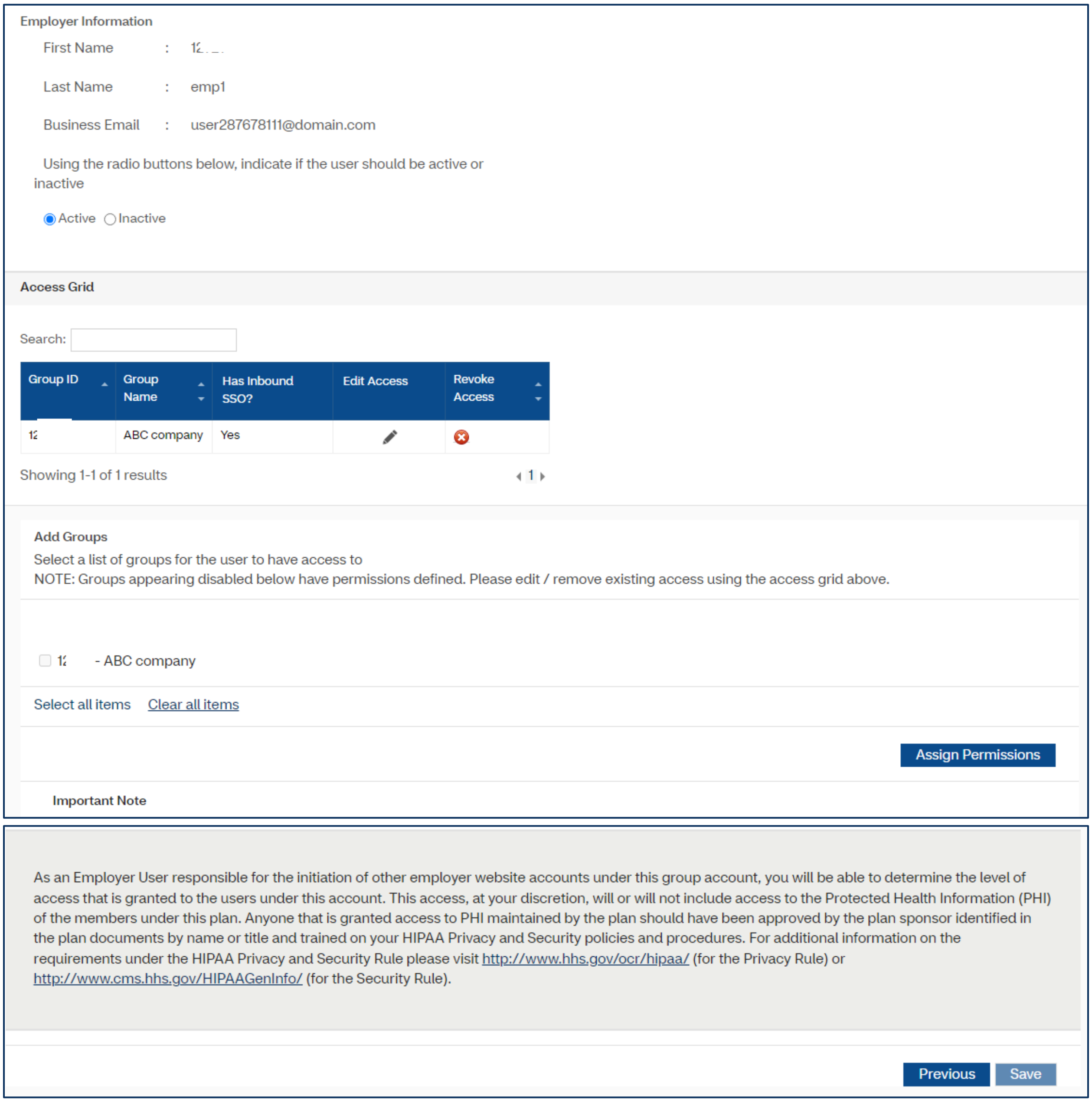
Find the group in the list and click *Edit* in the last column on the left.





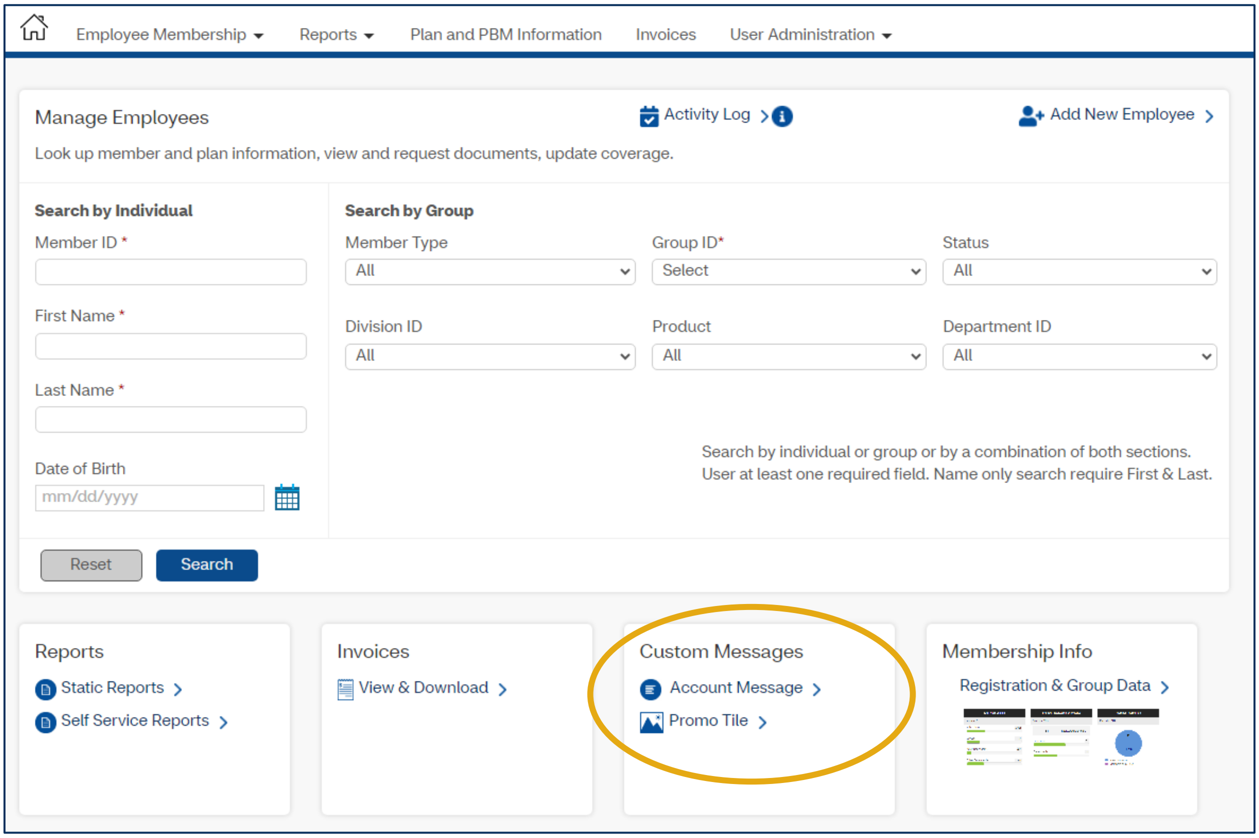
You will pull up the access grid. Click the icon under *Edit Access* and choose *Inactive*. **Please note**: if you click *Revoke Access*, you will get an error message.

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.



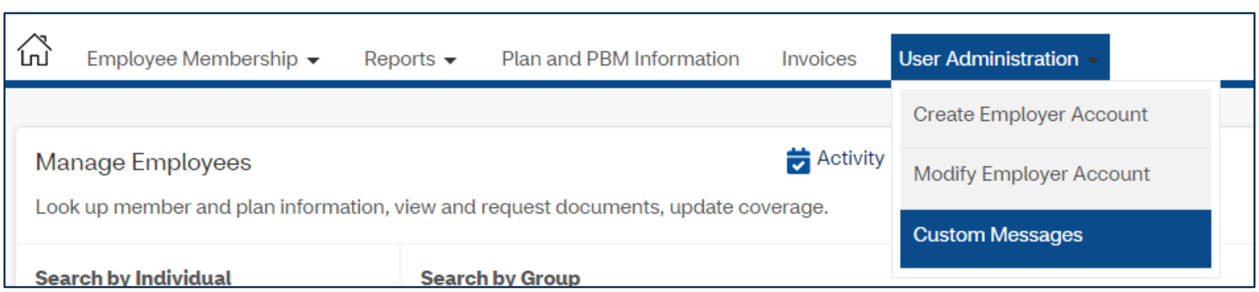
Custom Messages

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



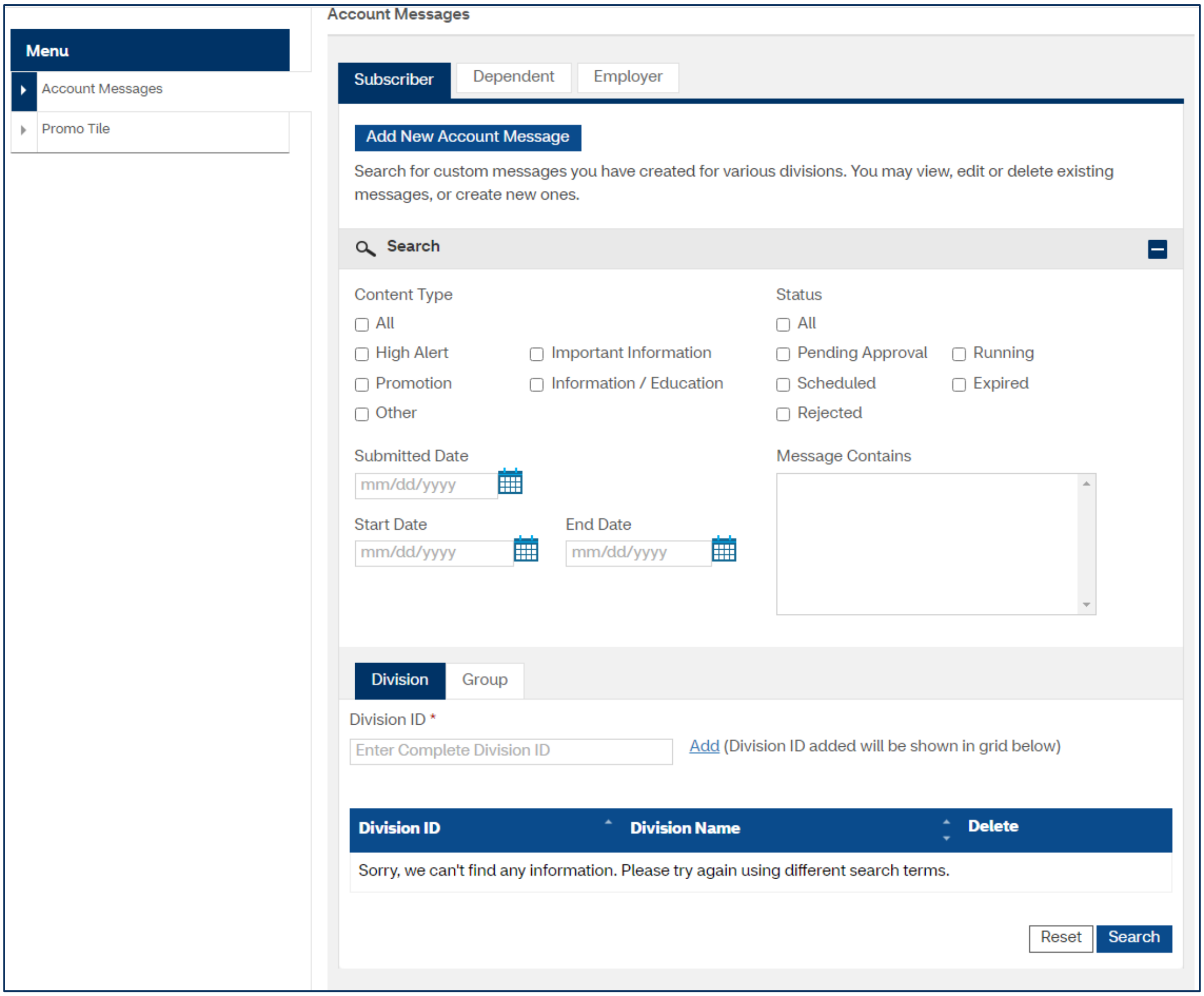
You can also access *Custom Messages* by clicking on the *User Administration* drop-down on the top toolbar of the homepage.

Next, click *Custom Messages*.

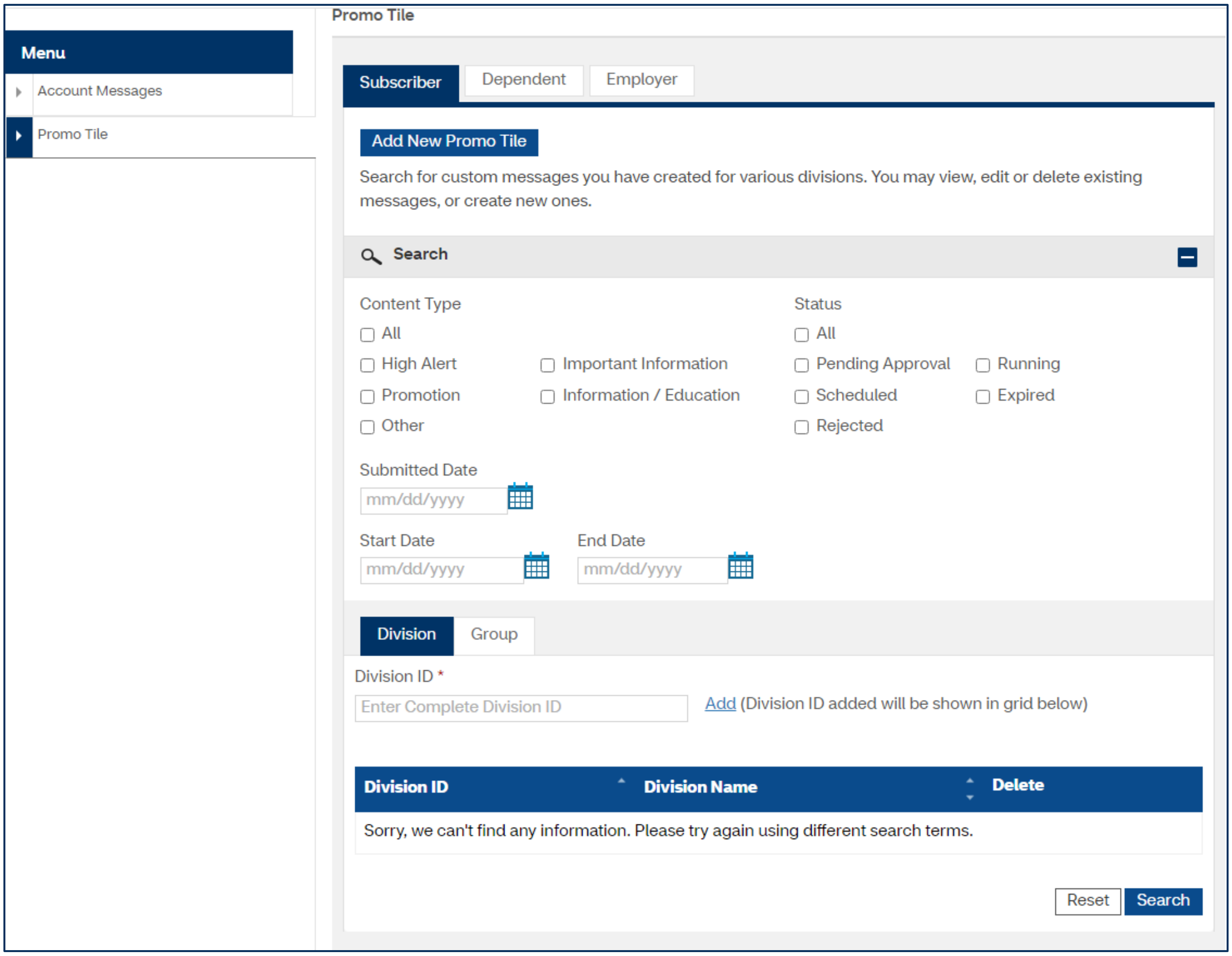


You can customize messages by selecting *Account Messages* or *Promo Tile*. You have the option to choose the type of member (Subscriber/Dependent/Employer) using the tabs available. You will be able to set dashboard message or promo tile for the specific type of member.

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

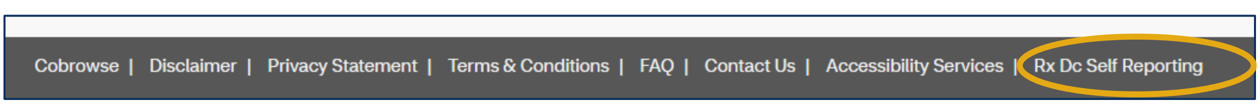


To add a new promo tile for a group/division/employer, click on *Promo Tile*. Next, enter the information required and click *Search*.



Prescription DC Self Reporting

You can now log into the Meritain Health website and access the Rx Dc Self Reporting via Footer on the employer website and update the Rx DC Plan sponsor data. This feature will allow the users to search by Group ID and fill in the Groups Stoploss Premiums and Claims Cost for the previous year.



The user will have to select their desired group and fill in the required fields. Once the fields are filled in, the user will click *Submit* and be redirected to a submission success page.

RxDC Self Service Reporting

RxDC Plan Sponsor Data Collection for 6/1/25 Reports (Data for 2024 calendar year)

Meritain Health Group ID*

Please Select...

Determine Market Segment: Your average # of employees in 2023.*

Consider employees even if they are not enrolled in the health plan. This will be used to determine your market segment.

Please Select...

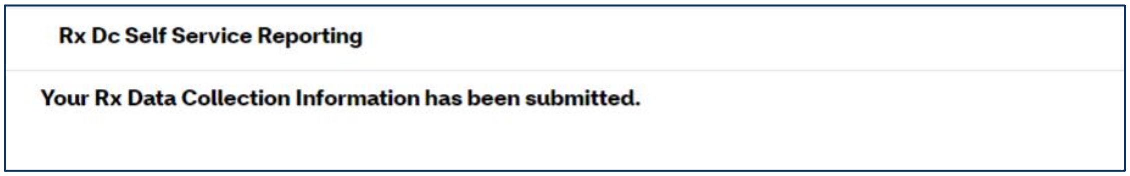
Premium Reporting – Any amounts in the "What we Show on File" Column is meant as a starting point ONLY. It is your responsibility to ensure the numbers reported are complete and accurate. We will report what you enter in the "Your 2024 Data Submission" column.

Data Request Description	What We Show on File for 2024	Your 2024 Data Submission
Total Stoploss Premium Paid in Calendar Year The amount you enter must be included in the amount you reported (shown on the right, if applicable) for total premium equivalents. Enter 0 if group does not purchase stoploss.	0	
Total Premium Paid by Members If you did not charge members a premium in 2024, enter 0 and check this box. Report the total annual premium collected from members during 2024. • Include actual spending by members in 2024, even if the plan does not run on a calendar year. • Include premium or premium equivalents paid by members. • Exclude premium or premium equivalents paid by employers or other plan sponsors on behalf of members.	We do not collect member premium data, so we have no number to provide here.	
Total Premium Equivalents - Total Plan Cost for Self-Funded Coverage Report the total annual premium equivalent amounts representing the total cost of providing and maintaining coverage for all members. Enter the amount that best represents the total cost of providing and maintaining coverage in calendar year 2024. • Include claims cost, administrative cost, Administrative Services Only (ASO) and other TPA fees, stop-loss premiums, network access fees, payments made under capitation contracts with providers for benefits covered under the plan. • Subtract stop loss reimbursements and prescription drug rebates received by the plan during 2024. • Exclude amounts paid by Medicare, premium equivalents that will be reported by another reporting entity (i.e., another vendor is reporting premium equivalents for your pharmacy carve out or stop loss purchased outside of Meritain Health), amounts related to account-based plans or HRAs, excepted benefits, and member cost share amounts.	According to claims paid in our system, we show your total claims cost in 2024 as: 0 Please remember that claims are only one part of the calculation.	
Total Premium Paid by Employers This number is calculated from the entries above: Total Premium Equivalents minus Total Premium Paid by Members. The number CANNOT not be negative. To change the number, you must adjust the Total Premium Equivalent and/or Total Premium Paid by Members. Contact your Account Manager if you believe a negative number is accurate.		

Check box to certify the calculation for Total Premium Paid by Employers above is correct. ☐*

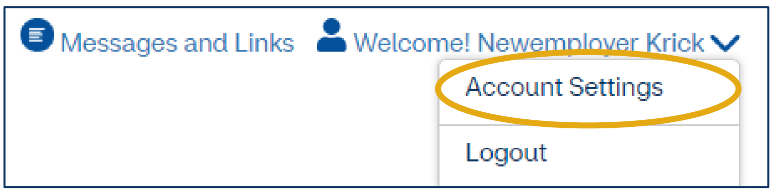
Submit

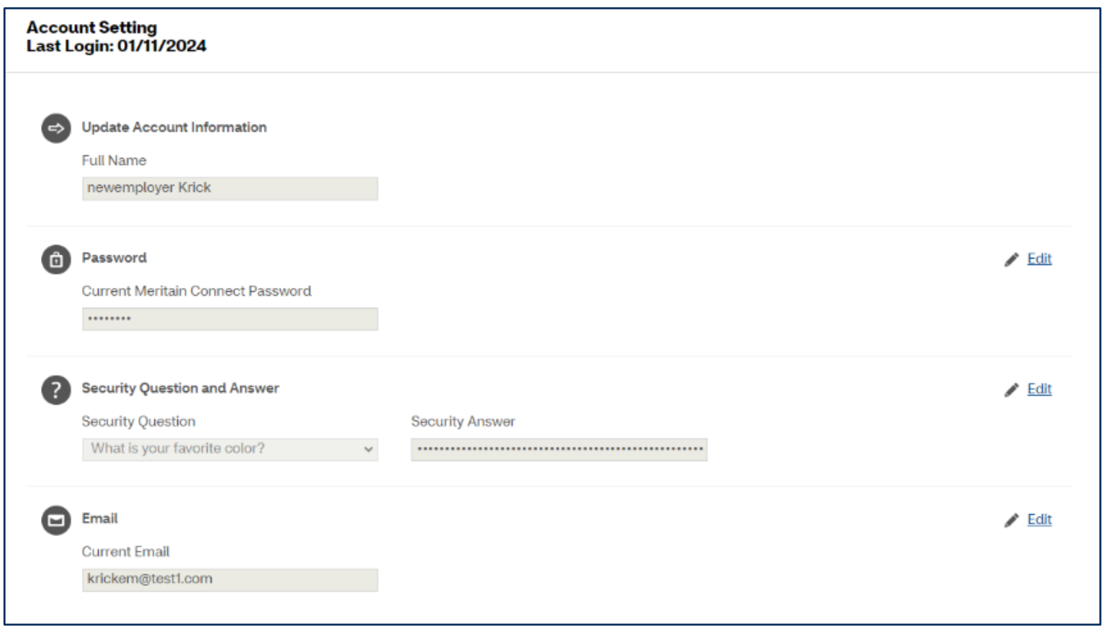
Submission Message



Account Settings

You can update and change your account information in the Account Settings feature. This feature will allow you to update password, current security question and answer and email address.





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 or your Meritain Health consultant.

Simple. Transparent. Versatile.

At Meritain Health®, we're creating unrivaled connections.

Meritain Health®
an aetna company