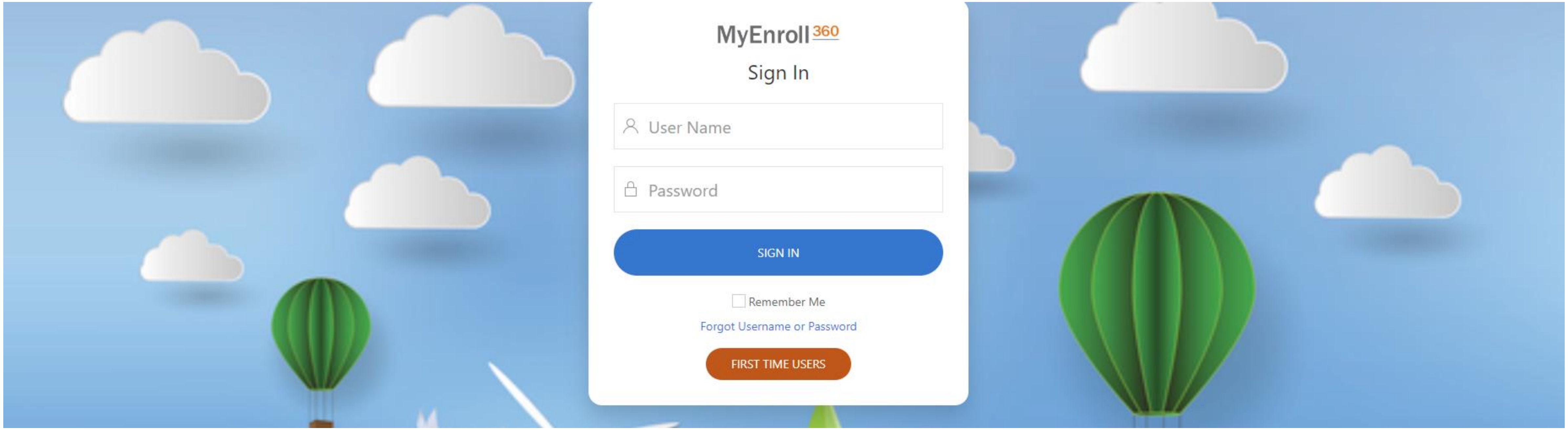
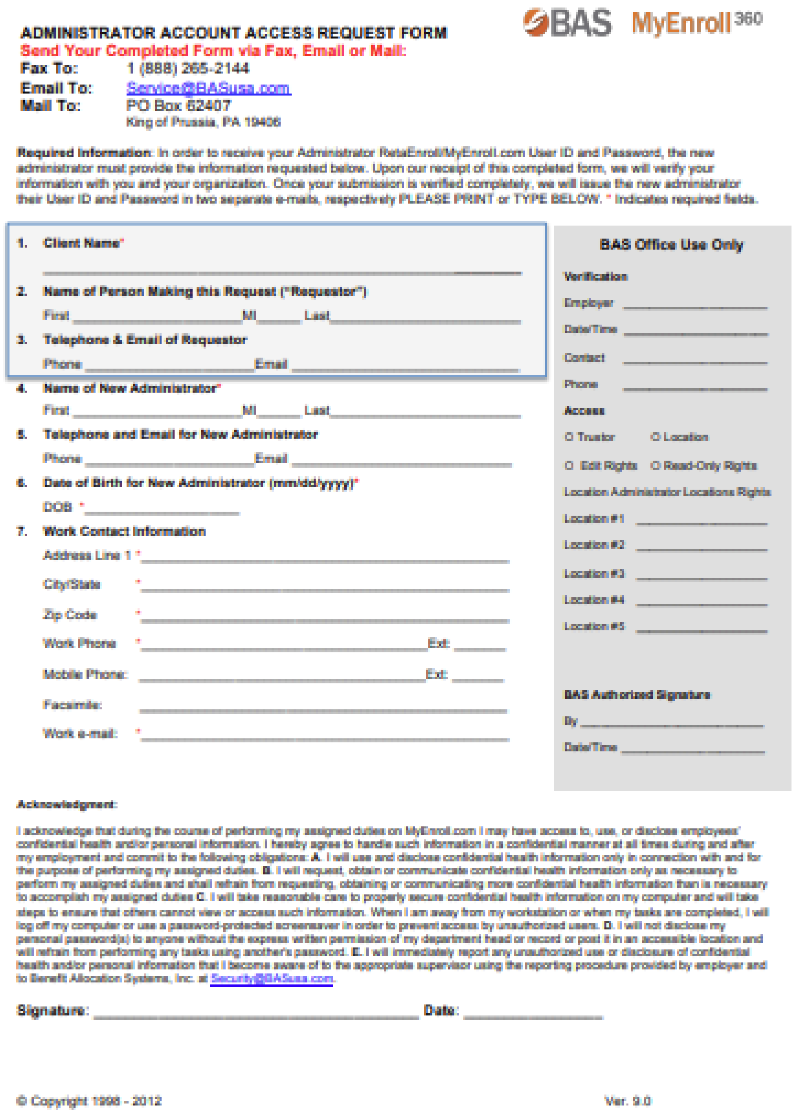


MyEnroll360 New Administrator Guide

New Administrator

- Be sure to complete the Administrator Request Form and email it to Service@BASusa.com
- Any time you have a new administrator that needs admin access to your location, you will need to complete this form
- There can be more than one administrator but only one billing contact for MyEnroll.com
- Be sure to note on the form who the billing contact will be



ADMINISTRATOR ACCOUNT ACCESS REQUEST FORM

BAS MyEnroll 360

Send Your Completed Form via Fax, Email or Mail:

Fax To: 1 (888) 265-2144
Email To: Service@BASusa.com
Mail To: PO Box 62407
King of Prussia, PA 19406

Required Information: In order to receive your Administrator RetaEnroll/MyEnroll.com User ID and Password, the new administrator must provide the information requested below. Upon our receipt of this completed form, we will verify your information with you and your organization. Once your submission is verified completely, we will issue the new administrator their User ID and Password in two separate e-mails, respectively PLEASE PRINT or TYPE BELOW. * Indicates required fields.

1. **Client Name***
2. **Name of Person Making this Request ("Requestor")**
   First ____ MI ____ Last ____
3. **Telephone & Email of Requestor**
   Phone ____ Email ____
4. **Name of New Administrator***
   First ____ MI ____ Last ____
5. **Telephone and Email for New Administrator**
   Phone ____ Email ____
6. **Date of Birth for New Administrator (mm/dd/yyyy)***
   DOB * ____
7. **Work Contact Information**
   Address Line 1 * ____
   City/State * ____
   Zip Code * ____
   Work Phone * ____ Ext: ____
   Mobile Phone: ____ Ext: ____
   Facsimile: ____
   Work e-mail: * ____

BAS Office Use Only

Verification
Employer ____
Date/Time ____
Contact ____
Phone ____

Access
O Trustor O Location
O Edit Rights O Read-Only Rights
Location Administrator Locations Rights
Location #1 ____
Location #2 ____
Location #3 ____
Location #4 ____
Location #5 ____

BAS Authorized Signature
By ____
Date/Time ____

Acknowledgment:

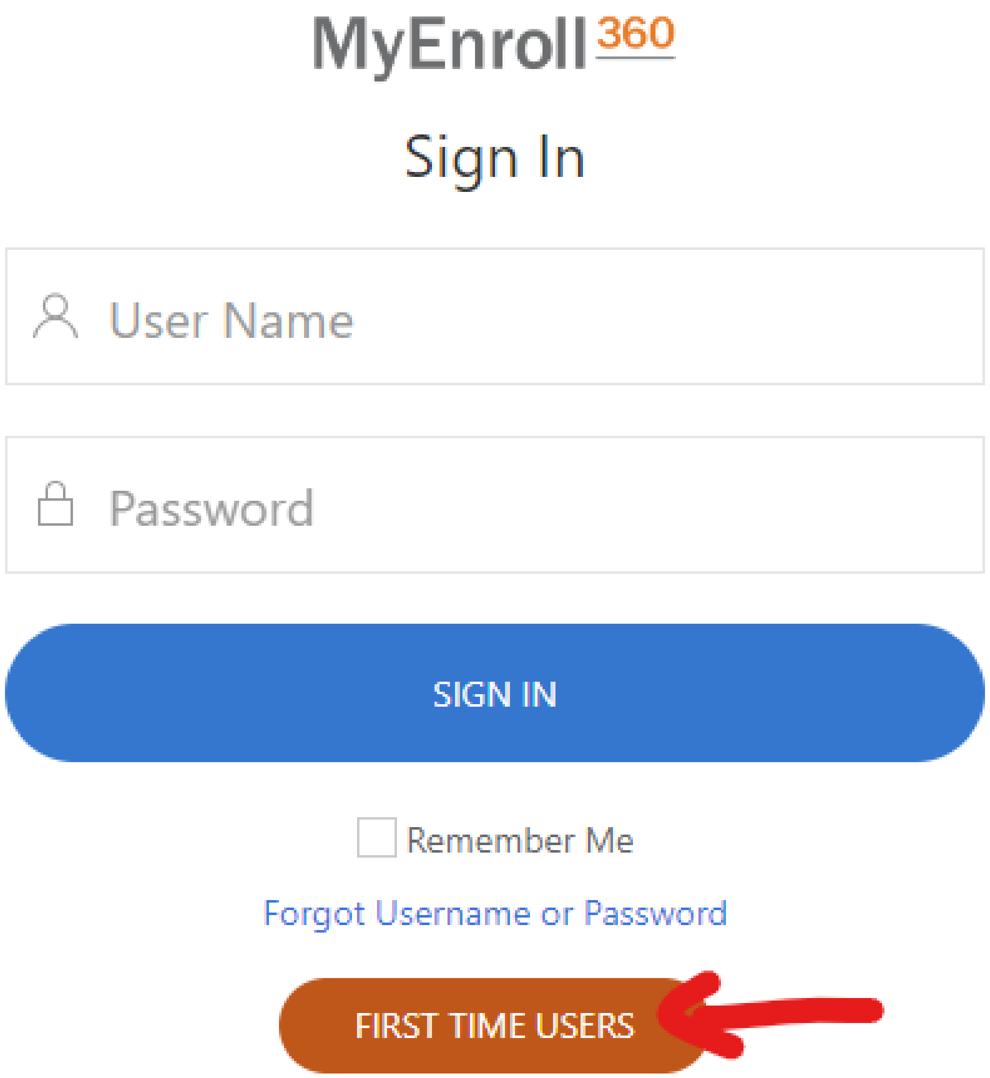
I acknowledge that during the course of performing my assigned duties on MyEnroll.com I may have access to, use, or disclose employees' confidential health and/or personal information. I hereby agree to handle such information in a confidential manner at all times during and after my employment and commit to the following obligations: **A.** I will use and disclose confidential health information only in connection with and for the purpose of performing my assigned duties. **B.** I will request, obtain or communicate confidential health information only as necessary to perform my assigned duties and shall refrain from requesting, obtaining or communicating more confidential health information than is necessary to accomplish my assigned duties **C.** I will take reasonable care to properly secure confidential health information on my computer and will take steps to ensure that others cannot view or access such information. When I am away from my workstation or when my tasks are completed, I will log off my computer or use a password-protected screensaver in order to prevent access by unauthorized users. **D.** I will not disclose my personal password(s) to anyone without the express written permission of my department head or record or post it in an accessible location and will refrain from performing any tasks using another's password. **E.** I will immediately report any unauthorized use or disclosure of confidential health and/or personal information that I become aware of to the appropriate supervisor using the reporting procedure provided by employer and to Benefit Allocation Systems, Inc. at Security@BASusa.com.

Signature: ____ **Date:** ____

 Ver. 9.0

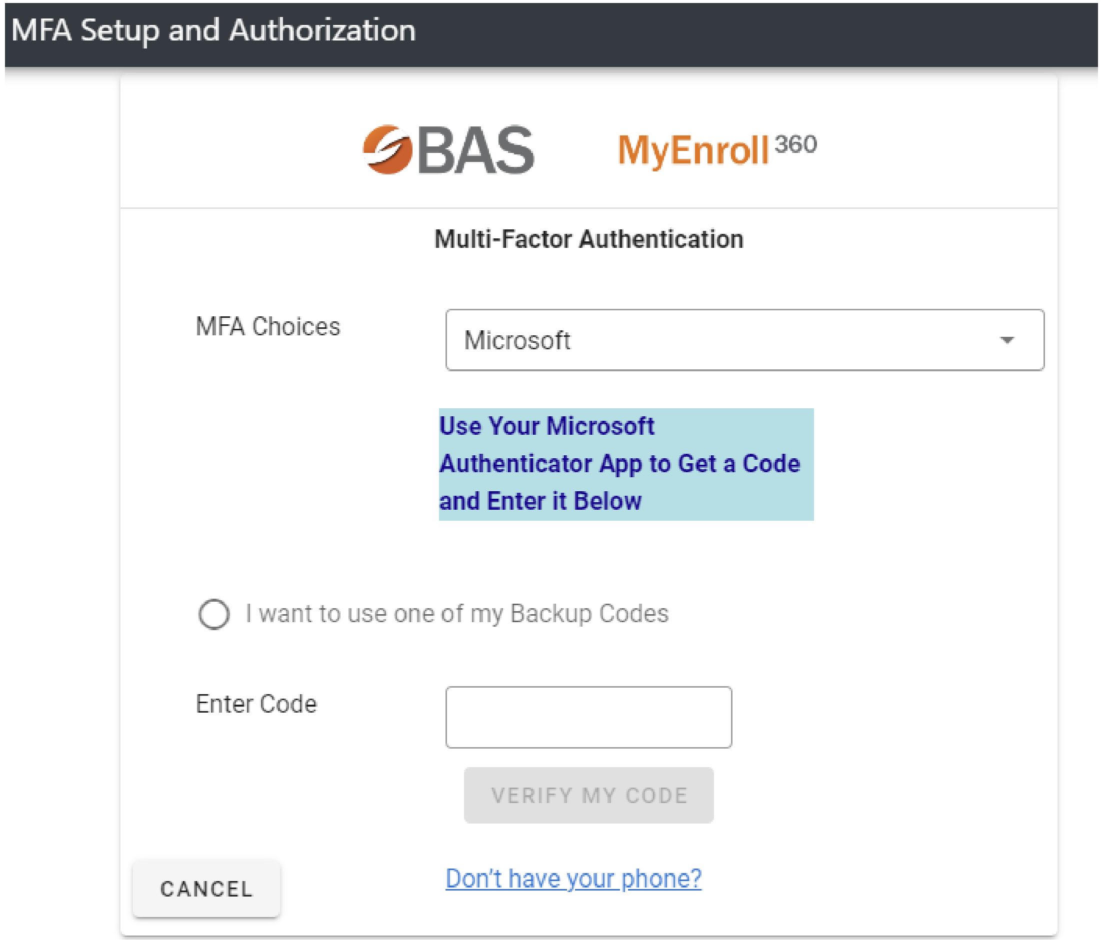
Creating an Account

- Click on First Time Users to create an account
- From there, follow the prompts to set up a username and password
- You will receive an email with a verification code; if it never arrives, check your Junk folder
- If you have trouble, the MyEnroll Support Team is ready to assist and may be reached at 800-945-5513 or service@myenroll.com
- Once you have created your username & password, you are ready to login to MyEnroll.com



Signing In

- Go to www.myenroll.com and enter your username and password
- BAS uses multi-factor authentication, so you will be prompted to enter a Multi-Factor Authentication Code
- You can set this up via the app or have a code texted to your cell phone

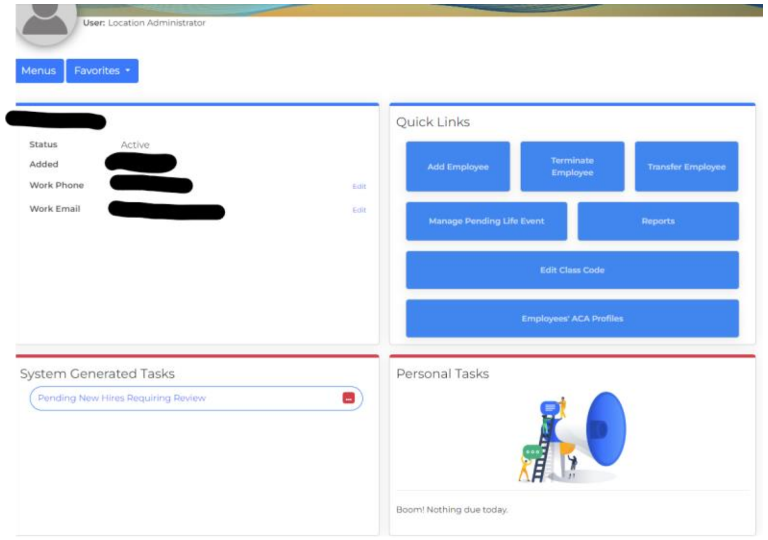


Two Screens

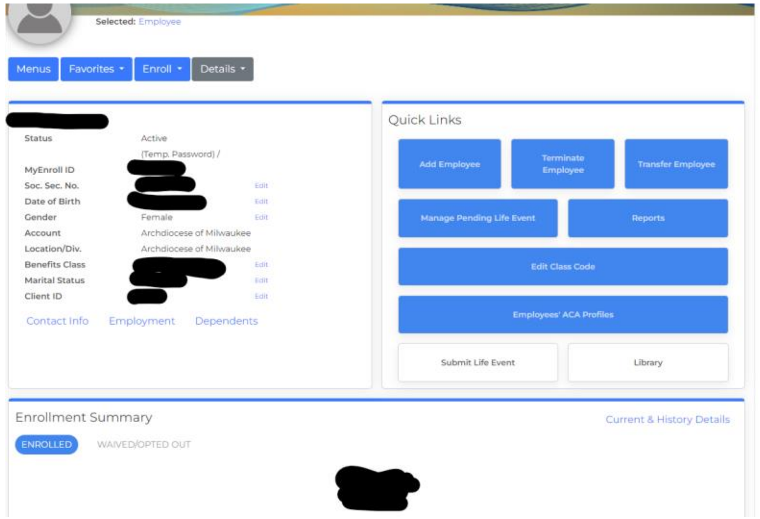
- As the administrator at your location and an employee, you have **two screens** - an administrator screen and an employee screen

- When you login, you will always land on your administrator screen
  - From this screen, you can access Quick Links, System Generated Tasks (e.g., transfer approvals), and Personal Tasks

- To get to your Employee Profile screen, put your last name in the Search Box
  - From this screen, you can view your benefits, access the Library, submit Life Events, update beneficiaries, etc.



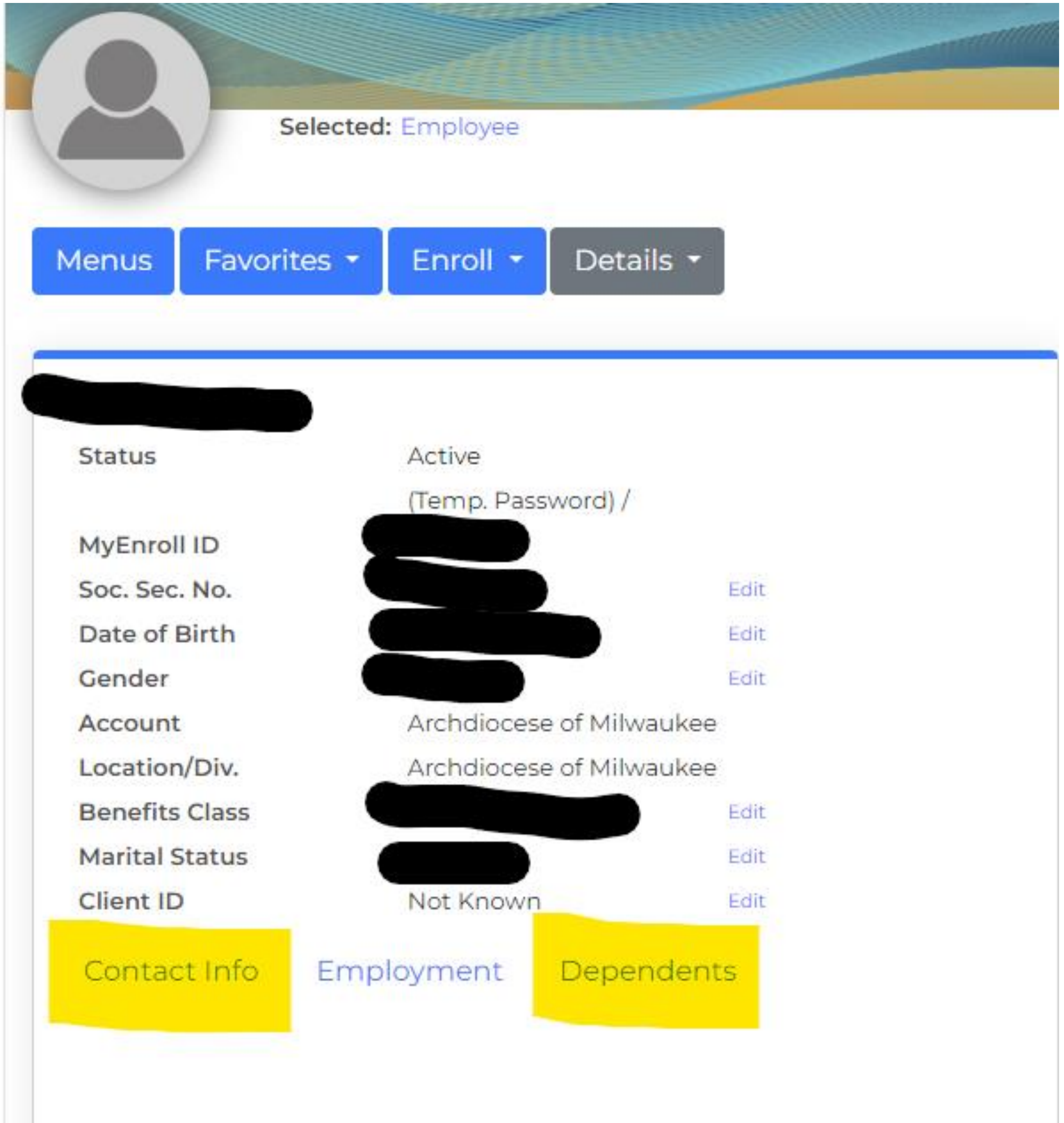
Home Screen 1



Home Screen 2

Employee Profile Screen

- To view the Employee Profile screen for one of your employees, put his/her last name in the Search box
    - As the administrator, you can update data for the selected employee when in this screen (e.g., Contact Info, Employment Info, Dependent Info)
    - You can also complete administrator tasks from this screen by clicking on the appropriate link under Quick Links (e.g., Transfer Employee, Terminate Employee, Edit Class Code, Submit Life Event)

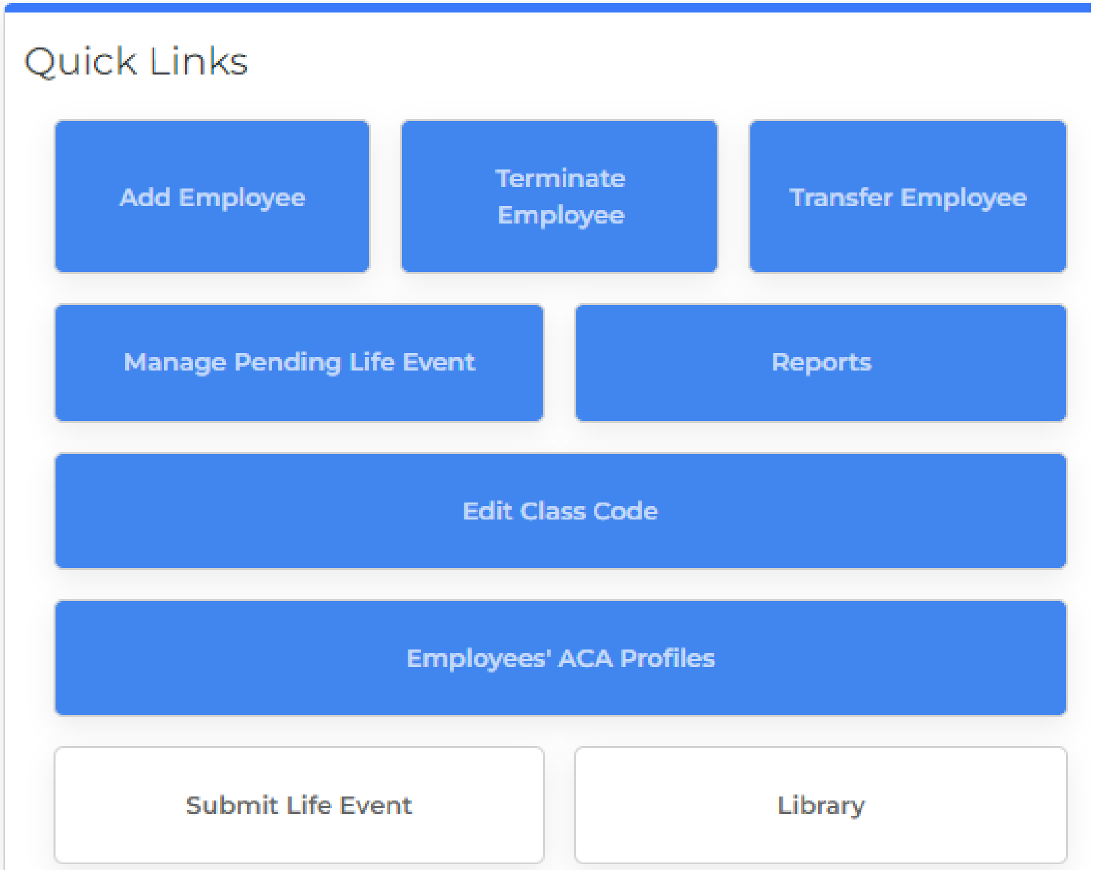


Quick Links

- Remember, Quick Links is the place to go to:

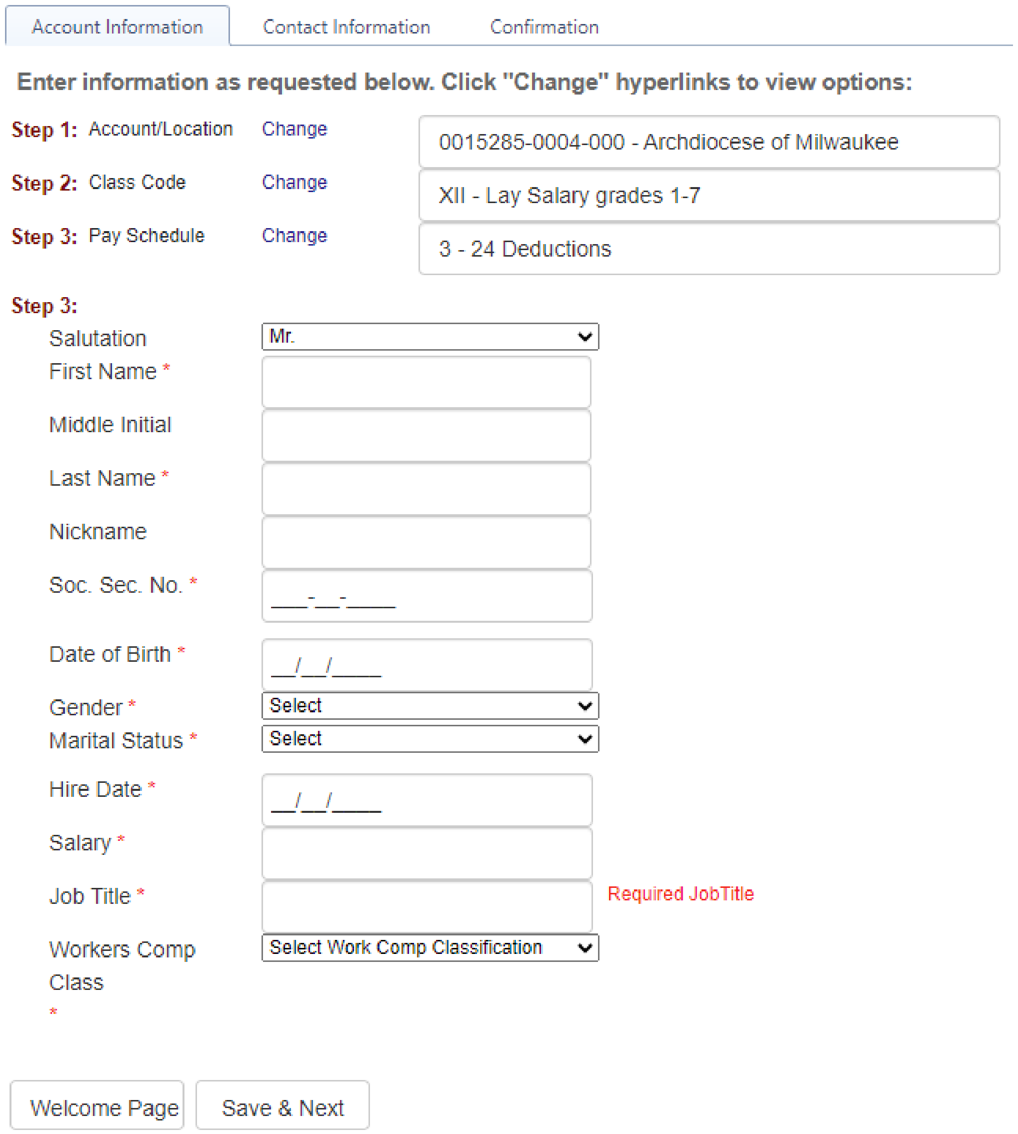
  - Add a new employee
  - Terminate an employee
  - Transfer an employee
  - Edit Class Codes
  - Submit/Mange Life Events
  - Access the Library*

    *The Library is accessible from the employee profile screen only



Add New Employee

- Click on the Add New Employee in Quick Links
- In the New Hire Wizard Program click on Add New Employee
- Enter Account/Location (Step 1)
- Enter Class Code (Step 2)
- Enter Pay Schedule (Step 3)
- Enter Employee Demographics (Step 3 Cont.)
  - Make sure this information is accurate!
  - Enter the correct Workers Comp Class Codes (see next slide for details)
- Click on Save & Next
- Enter Employee Contact Information
  - Make sure this information is accurate!
- Click on Save & Next
- If all information entered is correct, click either Approve or Add Another New Hire



Workers’ Compensation Classification Codes

- Select the appropriate WCC by selecting the appropriate description* for your new hire
- The code will populate the field automatically based on the description you selected

* WCC descriptions are posted in the Library

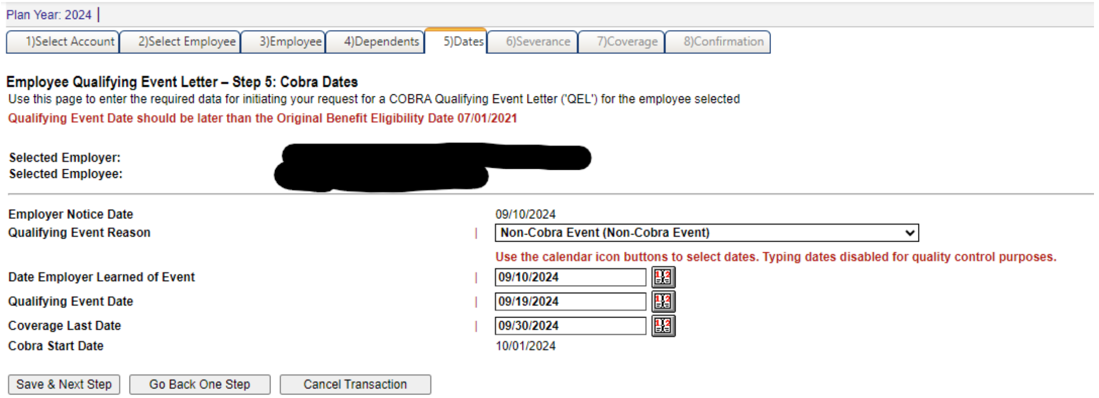
Workers' Compensation Classification Codes

Description	W/C Code
Diocesan Priests and Deacons (Use Box 1 of compensation worksheet. Exclude help out stipends.)	8868
Religious Order Women and Men (Include payroll dollars paid directly to their order(s))	8868
Church Professional Staff: Parish Director, Pastoral Associate, DAS, Business Manager, Bookkeeper, Secretary, Clerical, Youth/Young Adult Ministers, Music Director, Organist, Liturgist	8810
School Professional Staff: Teachers, Religious Ed, Nurse, Clerical, School Office Staff (do NOT include priests or religious here)	8868
Maintenance, Custodial, Janitorial, Cafeteria and Kitchen Staff	9101
Nursery and Day Care Staff, All Other	8868
Cemetery Office Staff; other than church or school staff. Do NOT include laborers or drivers here.	8810
Cemetery Laborers/Drivers (Use line above for cemetery office staff)	9220
FULL TIME Domestic Rectory Housekeeper	0913
PART TIME Domestic Rectory Housekeeper	0908
Bus Drivers	7380

Revised 2024.02.07

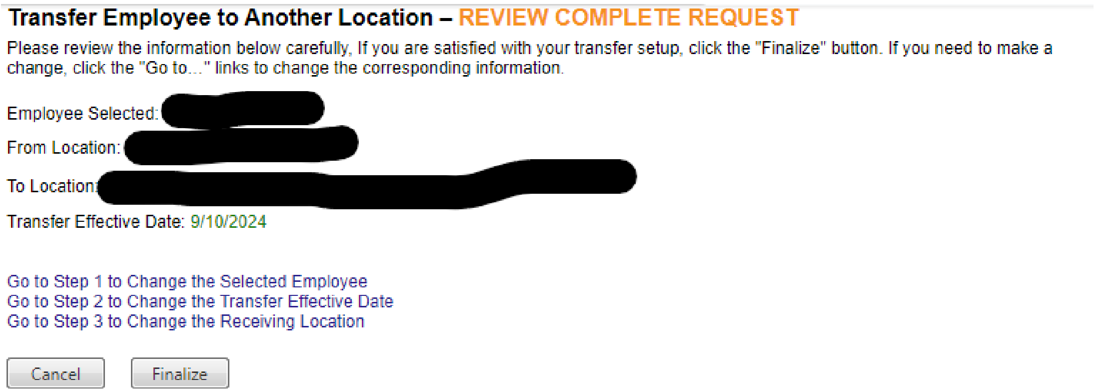
Terminating an Employee

- Go to the employee’s profile
- Select Terminate Employee under Quick Links
- Confirm that you have selected the correct employee by clicking on, “Yes”
- Make sure all information is correct, then click on Save & Next Step
- You will see eligible dependents (if applicable) to be covered under Continuation of Coverage
- Under the Qualifying Event Reason, select the best match from the dropdown:
    - Non-Cobra Event (for those that did not have medical insurance while employed)
    - Termination of Employment-18 Months (for those employees that had medical coverage while employed)
    - Death of Employee with Dependents
    - Early Retiree (offer not limited to 18 months; must be 60+ years old and have 10+ years of consecutive employment)
- Enter the date information; MyEnroll will calculate Coverage Last Date and Cobra Start Date



Transferring an Employee

- Go to the employee's profile screen
- Click on Transfer Employee under Quick Links
- Be sure the correct employee is selected & click on Next
- Enter the Transfer Date & click Next
- Select the Receiving Location from the dropdown
- Select their Receiving Class (if applicable/known)
- Then click on Next
- Review all information, if correct, click on Finalize



Submitting a Life Event

- Best practice is to have employees submit their own life events
- Life events cannot be submitted until they happen
- Life events must be submitted within 30 days
- Supporting documentation is required
  - To submit a life event, the member must login and select, Submit Life Event and follow the prompts
  - Select the appropriate Event Group, then Life Event
  - Enter the Life Event date; the new coverage effective date will auto populate, select Next
  - Add notes and upload the documentation to support the life event and click Next
  - Add comments for the administrator and click Next
  - Review the information for accuracy and click Next
  - The employee will then be prompted to elect/terminate/change coverage
- Once the Life Event has been submitted, the Master Administrator will either "Approve" or "Decline" or ask for more information.

Instructions from your Employer

INSTRUCTIONS FROM YOUR EMPLOYER

Qualified Life Event (QLE) Submission

Elections related to a Qualified Life Event (QLE) must be entered within 30 days of the qualifying event. You can only submit a QLE if the event has already occurred.

You will be prompted to upload documents to verify the Qualified Life Event. Examples of supporting documents include but are not limited to:

- Marriage License
- Birth Certificate
- Death Certificate
- Adoption Decree
- Proof of Legal Guardianship
- Divorce Decree
- Proof of new insurance (with the effective date of new coverage noted)
- Loss of Insurance (with proof of prior coverage and effective date of termination noted)

Medical, Dental, and Vision elections are effective on the first of the month following the date of the event.

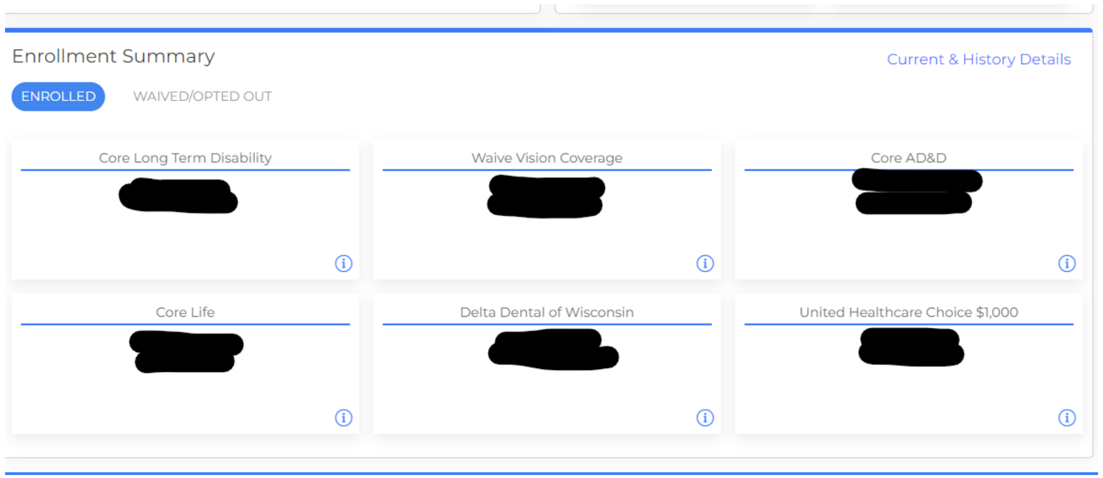
Confirming Your Elections

The last step in this process allows you to review and print a summary of your benefits elections. If you are satisfied with your elections, click Submit. Otherwise, you may return to any of the proceeding steps to make changes.

☐ I Accept the Terms & Conditions

After the Life Event is Approved

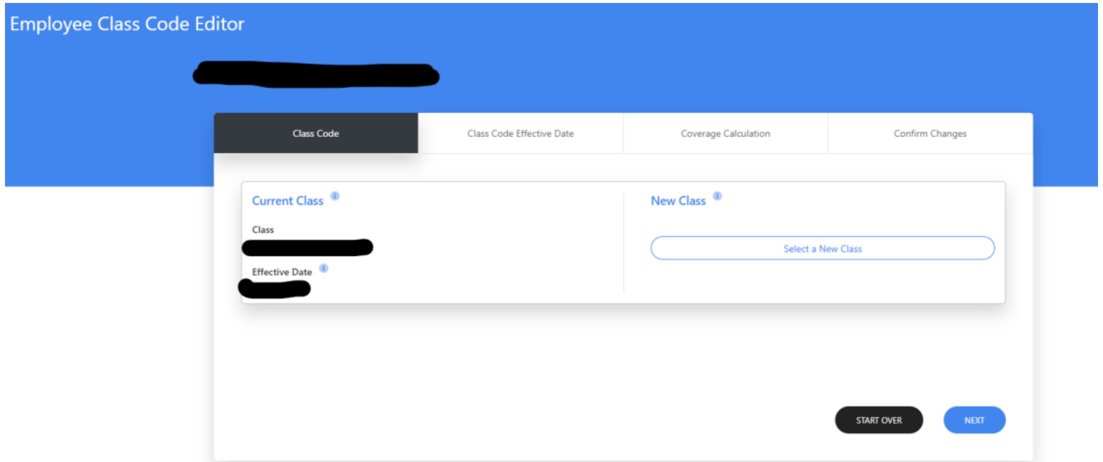
- After your employee has submitted a Life Event, or after you have submitted it on his/her behalf, and it has been approved, the new coverage details will be viewable in the Enrollment Summary on the employee's profile page



Edit Class Code

- Go to the employee's profile page
- Click Edit Class Code under Quick Links (or Edit next to Benefits Class Code under the employee's name)
- Click on Select a New Class and then, Next
- Enter the effective date.

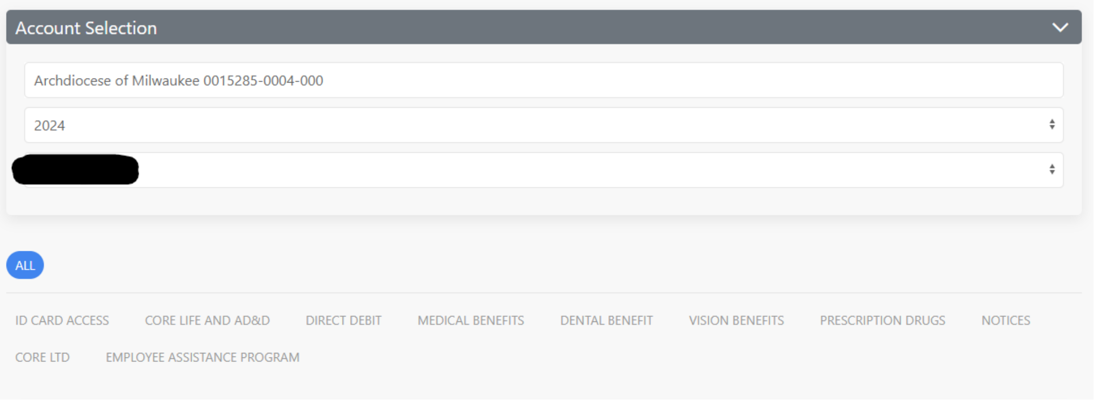
  DO NOT UPDATE THE HIRE DATE
- Depending on the benefit class code, you may need to change/update coverage calculations. Once this is complete, click Next
- Confirm all information is correct
- Note: At any point, you can always click on Cancel or Start Over



Library

- The benefits documents for all the products offered under the St Raphael Health Plan are posted in the Library along with important notices

  Be sure to select the appropriate Plan year



ID Card Access Information

- Located in the Library
- Electronic access to ID cards is available 24/7
- Hardcopy ID cards will be mailed to the member's home address 7-10 days from the coverage effective date
- There are no hardcopy ID cards for VSP Vision

ARCHDIOCESE of MILWAUKEE
St. Raphael
Health Plan
Together in Benefits • For your Health and Well-Being

MEDICAL, DENTAL, AND VISION ID CARD ACCESS INFORMATION
Weekly electronic file feeds from MyEnroll.com to United Healthcare, Caremark, Delta Dental, and VSP ensure timely enrollments, which means ID cards should arrive in a timely manner as well. ID cards are mailed directly to members, so it is especially important that addresses are correct in MyEnroll.com.

There is no ID card for the VSP vision insurance. The provider will access the member's coverage in the VSP portal via the member's SSN or name and date of birth. To ensure a vision provider is in-network, the member should go to www.vsp.com and select, *Find a Doctor*.

ID card information is available 24/7 via the carrier websites after registering for an account and on the carrier apps. Members may also call the carriers directly to order new cards. Contact information along with the St Raphael Health Plan group number for each carrier is below.

United Healthcare (Group # 712332): www.myuhc.com, 888-525-2089

Caremark (Group # 2407): www.caremark.com, 800-565-7091

Delta Dental (Group# 07607): www.deltadentalwi.com, 800-236-3712

VSP (Group # 30048122): www.vsp.com, 800-877-7195

ACCESS TO CONTRACEPTIVE SERVICES
To access contraceptive services or contraceptives, members must contact United Healthcare (contraceptive services) or Caremark (prescriptions) directly via the numbers noted above to request access to the *Contraceptive Services Only* benefit (UHC) or to request a contraceptives-only ID card (Caremark).

Invoices

- To access your invoices, please follow these steps:

  From either the administration or employee profile screen, click on Menu

  Then click on Billing

  Then “Invoice History PDFs”

  Select the invoice you wish to view

Master Account: Archdiocese of Milwaukee

Select a Location: [redacted]

Billing Date Range From: 9/11/2023 To: 9/11/2024 Search

Invoice Date	Invoice
2024-09	INS Billing Statement [redacted]
2024-08	INS Billing Statement [redacted]
2024-07	INS Billing Statement [redacted]
2024-06	INS Billing Statement [redacted]
2024-05	INS Billing Statement [redacted]
2024-04	INS Billing Statement [redacted]
2024-03	INS Billing Statement [redacted]
2024-02	INS Billing Statement [redacted]
2024-01	INS Billing Statement [redacted]
2023-12	INS Billing Statement [redacted]
2023-11	INS Billing Statement [redacted]
2023-10	INS Billing Statement [redacted]
2023-09	INS Billing Statement [redacted]

Questions?

If you have questions or concerns, reach out the benefits administration team:

MyEnroll Support Team
800-945-5513
service@myenroll.com

Tania Howell
Benefits Assistant
414-769-3424
howellt@archmil.org

Maureen Wurster
HR and Benefits Administrator
414-769-3423
wursterm@archmil.org