Health Insurance Update Application – Health Plans

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General Information

The application provides Health Plans with a process to termination and reinstatement direct pay contracts directly into ETF's health insurance database. This application also allows Health Plans to view health insurance contracts that are not direct pay contracts and all covered individuals under a specific contract. One specific Health Plan cannot view contracts that are with another Health Plan.

Special Notes

- The individual accessing the system must obtain security clearance by submitting the **Online Network for Health Plans Security Agreement**, form ET-8937.
- The application requires your **Web browser** to have cookies enabled and JavaScript on.
- For additional assistance, please call : (608) 264-9182 or (608) 266-7705.

Step-by-Step Instructions (Text Only)

- 1) Enter the Online Network for Health Plans (ONHP) Portal
- 2) Select the "Health Insurance Enrollment Update" link.
- 3) The "ETF Web Application Logon" screen will appear.
- 4) Type your User ID.
- 5) Press the "Tab" key.
- 6) Type your password.
- 7) Click "Log In"
- 8) Type your three-digit Health Plan number.
- 9) Click the "Submit" button.
- 10) The Contract Search Screen will appear.
- 11) Type the subscriber's social security number and click the "Display" button. Your search results will be displayed under the headings provided.
 - a) If there is only one search result, you can choose one of the following actions from the "Link To" drop down box.
 - i) "Covered Individual" provides specific information regarding the covered individuals on the contract.
 - (1) NOTE: If you are viewing a family contract, a next individual button will appear at the bottom of the screen. Click "next individual" to view detailed information for the next individual (spouse or dependents) on that specific contract. Click "previous individual" to navigate back to the previous subscriber.
 - b) "Enrollment Update" is used to terminate or reinstate a subscriber's contract in addition to showing detailed subscriber history and information.
 - c) If more than one search result is displayed, the subscriber has more than one contract (past, present, or future).
 - i) Enter "Desired Sequence Number: corresponding to the "Seq#" column on the left of the screen, and click Accept.
 - (1) NOTE: The screen view will not change. The sequence number will be stored to identify the contract you want to view.
 - d) Choose "Enrollment Update" from the "Link To" dropdown to view this contract.
 - e) There are three fields that can be updated:
 - i) Enrollment Type
 - ii) Coverage End
 - iii) Comments

- (1) NOTE: All of the other fields and dropdown boxes are for informational purposes only. If you attempt to alter data in these other fields, you will receive an error message in the message area in the upper left portion of the screen.
- 12) To terminate a contract,
 - a) "Enrollment Type" Select the description from the drop down list. You may also enter the numerical reason code.
 - b) "Coverage End Date" must be the last calendar date of the month coverage ends, e.g. 08/31/2009.
 - c) "Comments" Add any notes that help clarify special situations or important details. When adding comments, the user should include their name and the current date the comment is being added.
 - d) Click the accept button
 - NOTE: If you see "UPDATE SUCCESSFUL," your change is put into effect immediately. If you see an error message, you have failed to change both the Enrollment Type and Coverage End Date. Or you may have attempted to change a field you are not permitted to update.
- 13) To reinstate a contract
 - a) "Enrollment Type" 12
 - b) "Coverage End Date" For direct pay annuitants, remove date that is populated in the Coverage End field. If a COBRA contract is being reinstated, the user must update the coverage end date to the original coverage end date for the 36 month COBRA period.
 - c) "Comments" Add any notes that help clarify special situations or important details. User is to include their name and the current date the comment is being added.
 - d) Click the accept button
 - i) NOTE: If you see "UPDATE SUCCESSFUL," your change is put into effect immediately. If you see an error message, you have failed to change both the Enrollment Type and Coverage End Date. Or you may have attempted to change a field you are not permitted to update.

Step-by-Step Instructions with Visuals

	Employee Trust Funds (ETF) On-line Network for Health Plans (ONHP)
Welcome to the [epartment of Employee Trust Funds On-line Network for Health Plans (ONHP). This is a new and innovative way to retrieve data and keep en information current. ONHP is an interactive Internet application that is easy and convenient to use.
Logon and Password S	upport (608) 264-9181 / 866-843-9724 or email us at <u>ETFOnLineHelp@etf.state.wi.us</u>
Employer Communicat	ons Center (608) 264-7900
Account Maintena	ince
<u>Health Plans - Reset P</u>	issword
Description: Provides I	lealth plans with the ability to reset their own logon password.
Email Contact Informal	on Update
Description: Provides I	ealth plans a secure view of current contact information and the ability to update information to ensure proper administration of ETF benefit programs.
Applications	<u>5537</u> , Pax Nullibel. (006) 200-360 I
Health Insurance Enro Description: Provides	Inent Update Instructions Click here instatements directly into ETF's health insurance database. In addition, this provides health plan encommediate means and the begin
Health Insurance Pren	ium Inquiry Instructions
Description: Provides	realth plans a secure view of health insurance premium information by coverage month.
Health Insurance PDP	Inguiry Instructions
Description: Provides	a secure view of health insurance Prescription Drug Plan (PDP) premium information by coverage month.

ett visconsin department of EMPLOYEE TUUST FUNDS	ETF Web Applications Logon
Туре	your User ID and Password
User ID:	
Password:	
Login	set



Health Plan Logon

Instructions Logout

This Internet application is intended for use by health plans to verify health insurance coverage for their clients.

Please enter your Health Plan Code and press enter.



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ILA	300301	RIDER SSIN TO CO		ITRACT SLARUN			Display		an screen		
κ Tα):										
к то	SSN:	•		Type th secu th	ne Subscrib Irity numbo Ne "Display	er's social er and click " button					

Enter Desired Sequence Number:



Health Insurance Contract Search

Instructions Logout

v								
SSN: 387-04-2602								
Seq# SSN Name	DOB	Contract Status	Covg Begin	Covg End	Coverage	Туре	Carrier	Employer
1 MATT G HEWBERT	08/02/1971	PENDING AUDIT	02/15/2006		02 FAMILY	~ ~	05 DEAN HEALTH	0933000 33963 HARA , CITY OF P02/S01
2		CONTRACT ENDED	11/01/2000	02/14/2006	01 SINGLE	~ ~	05 DEAN HEALTH	0933000 33963 HARA , CITY OF P02/S01

Subscriber Sex: M	Spouse F Sex:	
Marital Status: MARRIED V Date: 09/17/1971	Other Group No Health:	
Physician County: 13 DANE	TERMINATION – select reason	
Enrollment Type: 01 INITIAL OFFERING		
Coverage Type: 02 FAMILY Stnd Plan Wait Period:	REINSTATEMENT – always use "12" SUTTIX: UNITY UW HEALTH	
Employer/Group: 0458000 70458 VIL OF MAZOMANIE	Prev Employer No: Surcharge: S37 SMALL GRP Q3 YEAR 1 & 2 - 60%	
Employer 04/30/2009 Received: 04/30/2009 Employment 10/17/1967 Begin: 10/17/1967 Event Date:	Coverage 07/01/2009 Begin: Coverage End:	Coverage Report: 07-2009
Total Premium: 1,950.00 (s REINSTATEMENT – Leave blank.	Resend to PBM/HP: □	
Comments: TERMINATION & REINSTATE Type details of change here. Include user name providing comment and current date.	TMENT the	