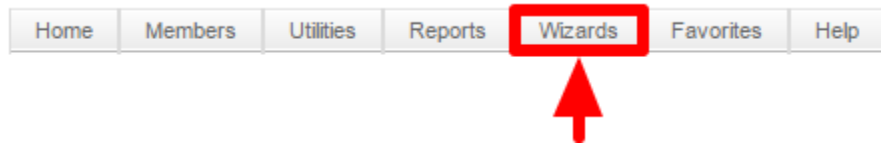


Adding a QB in COBRA

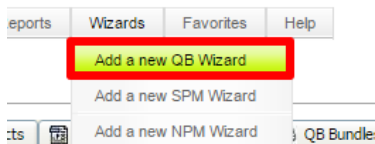
When a qualifying event causes an employee to become eligible for COBRA, they must be added to the system as a new QB. The QB's general information is required along with the event information. You will then apply the appropriate plans for the QB's continuation of coverage.

Follow these simple steps to see how its all done:

Step 1: From the **HOME** page of your company's **CLIENT PORTAL**, select the **WIZARDS** tab located at the top-center of the page.



Step 2: From the drop down menu, select the **ADD A NEW QB WIZARD**.



Step 3: Welcome to the **ADD A NEW QB WIZARD!** All required fields are outlined in red. Enter the QB's information and select the **NEXT** button to continue to the **EVENT** tab.

1- General 2- Event 3- Plans 4- Dependents 5- Subsidies 6- Letter-Inserts Letter Attachments 7- Notes

Client Name: **The Demo Client** Division: **Super Demo Company**

Salutation: Choose... First Name: **Demo** MI: Last Name: **Person**

Identification Information: SSN: **012-22-3456** Individual Identifier:

Contact Information: Email: **Please Add Email Address and Phone #** Phone: **(303) 369-7886** Phone 2: **() - -**

Primary Address: Address: **7100 E. Belleview Ave.** Address 2: **Ste. 300** City: **Greenwood Village** St: **CO** Zip: **80111** Country:

Demographics: Gender: Male Female DOB: **01/01/1980** Tobacco Use: **Unknown**

Employee Information: Employee Type: **Full-Time Employee** Payroll Type: **Salary** Years of Service:

QB Setup: Premium Coupon Type: **Coupon Book** Uses Health Coverage Tax Credit

Client-Specific Information: Benefit Group: Account Structure: Client Custom Data:

Next Previous Finish Cancel

Step 4: Enter the required event information (outlined in red), and then select the **NEXT** button to continue to the **PLANS** tab. ***The **CATEGORY** section allows you to set whether the **QB** is employee or dependent (Dependent being used typically in the event of a divorce or a dependent child ceasing to be a dependent).***

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter Attachments 7. Notes

Qualifying Event Information:
Category: Employee Dependent
Event Type: Termination
Event Date: 07/02/2015

HIPAA Information:
Date of Hire/Enrollment Date: 02/02/2013

Legacy QB:
 Legacy QB

Previous **Next** Finish Cancel

Step 5: Now you have to add the plans for the QB. From the **PLANS** tab, select the **ADD A PLAN** button.

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter Attachments 7. Notes

+ Add a Plan Refresh

Insurance Type	First Day of COBRA	Last Day of COBRA	Months COBRA	Days Elect	Days 1stPmt	Days SubPmts	Status	Status	Status Date	Election Postmark	Term Date
No records to display.											

Previous Next Finish Cancel

Step 6: Choose the **PLAN** and **COVERAGE LEVEL**. Select the **INSERT** button to include the selected plan.

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter Attachments 7. Notes

Plan Bundle

Plan: Medical PPO
Coverage Level: EE + Spouse
Plan rate for the selected Coverage Level is : \$400.0000

Insurance Type Information:
Months of Coverage: 18
Days to Elect: 60
Days to Make 1st Payment: 45
Days to Make Subsequent Payments: 30

First / Last Days of COBRA:
Editing these dates changes the First and Last day of COBRA
FDOC (First Day of COBRA): 08/01/2015
LDOC (Last Day of COBRA): 01/31/2017

Insert Cancel

Previous Next Finish Cancel

Step 7: The first plan should now be visible. You may add any other necessary plans via the same method. As you can see below, we have added **MEDICAL** for EE+Spouse. So we must still add the other plans offered to our demo QB (**VISION** and **DENTAL**). Select **ADD A PLAN** again to finish adding the appropriate plans.

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter-Attachments 7. Notes

+ Add a Plan Refresh

Insurance Type	First Day of COBRA	Last Day of COBRA	Months COBRA	Days Elect	Days 1stPmt	Days SubPmts	Status	Status	Status Date	Election Postmark	Term Date
Medical	08/01/2015	01/31/2017	18	60	45	30	P	Pending	07/10/2015		
	Start Date	End Date	Plan Name	Carrier Plan Identification		Coverage Level	Bundle Name				
Edit	08/01/2015	01/31/2017	Medical PPO	Medical PPO		EE + Spouse				Drop	Delete

Previous Next Finish Cancel

Step 8 (OPTIONAL): Once all of the necessary plans have been added for the QB, select the **NEXT** button to go to the **DEPENDENTS** tab.

****At this point, if you do not have any dependents or subsidies to add, you may select the **FINISH** button to complete the **ADD A NEW QB** process.****

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter-Attachments 7. Notes

+ Add a Plan Refresh

Insurance Type	First Day of COBRA	Last Day of COBRA	Months COBRA	Days Elect	Days 1stPmt	Days SubPmts	Status	Status	Status Date	Election Postmark	Term Date
Medical	08/01/2015	01/31/2017	18	60	45	30	P	Pending	07/10/2015		
	Start Date	End Date	Plan Name	Carrier Plan Identification		Coverage Level	Bundle Name				
Edit	08/01/2015	01/31/2017	Medical PPO	Medical PPO		EE + Spouse				Drop	Delete
Dental	08/01/2015	01/31/2017	18	60	45	30	P	Pending	07/10/2015		
	Start Date	End Date	Plan Name	Carrier Plan Identification		Coverage Level	Bundle Name				
Edit	08/01/2015	01/31/2017	Dental PPO Trial	Dental PPO Trial		EE + Spouse				Drop	Delete
Vision	08/01/2015	01/31/2017	18	60	45	30	P	Pending	07/10/2015		
	Start Date	End Date	Plan Name	Carrier Plan Identification		Coverage Level	Bundle Name				
Edit	08/01/2015	01/31/2017	Vision PPO	Vision PPO		EE + Spouse				Drop	Delete

Previous **Next** Finish Cancel

Step 9 (OPTIONAL): The next step is to add all dependents to be included in the continuation. Select the **ADD A DEPENDENT** button to continue.

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter-Attachments 7. Notes

+ Add a Dependent Refresh

Name	Relation	Date of Birth	SSN	Sex
No records to display.				

Previous Next Finish Cancel

Step 10 (OPTIONAL): Enter all of the required fields (outlined in red), and please include the **SSN** and **DOB**. Select the **SAVE** button to continue.

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter-Attachments 7. Notes

Relationship: Spouse
Salutation: Mrs. First Name: Demo MI: Last Name: Person

Identification Information:
SSN: 222-22-2222

Contact Information:
Email: Phone: Phone 2:

Address: Same As QB

Demographics:
Gender: Male Female
DOB:

HIPAA Information:
Enrollment Date:

Step 11 (OPTIONAL): You must now select **ADD PLAN** next to each desired plan. The plans will move to the **ADDED DEPENDENT PLAN(S)** section when chosen. Click the **SAVE** button to proceed.

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter-Attachments 7. Notes

Relationship: Spouse
Salutation: Mrs. First Name: Demo MI: Last Name: Person

Identification Information:
SSN: 222-22-2222

Contact Information:
Email: Phone: Phone 2:

Address: Same As QB

Demographics:
Gender: Male Female
DOB: 12/12/81

HIPAA Information:
Enrollment Date:

Start Date:
Start Date: 08/01/2015

Added Dependent Plan(s)

Insurance Type	First Day Of COBRA	Last Day Of COBRA
No records to display.		

Available Dependent Plan(s)

	Plan Name	Bundle Name
<input checked="" type="button" value="Add Plan"/>	Dental PPO Trial	
<input checked="" type="button" value="Add Plan"/>	Medical PPO	
<input checked="" type="button" value="Add Plan"/>	Vision PPO	

Step 12 (OPTIONAL): Now that the first dependent has been added, you may add any others that may exist. If there are no other dependents to add, then you can select the **NEXT** button to continue to the **SUBSIDIES** tab. If you do not need to add subsidies, then you may click **FINISH** to complete the **ADD A NEW QB PROCESS**.

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter-Attachments 7. Notes

+ Add a Dependent Refresh

Name	Relation	Date of Birth	SSN	Sex
Person_Demo	Spouse	12/12/1981	222-22-2222	Delete

Previous **Next** Finish Cancel

Step 13 (OPTIONAL): Select the **ADD A SUBSIDY SCHEDULE** button to set the details of the subsidy. If no subsidy is necessary, then click **FINISH** to complete the process.

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter-Attachments 7. Notes

+ Add a Subsidy Schedule Refresh

Start Date	End Date	Insurance Type	Subsidy Type	Subsidy Amount Type	Amount
No records to display.					

Previous Next Finish Cancel

Step 14 (OPTIONAL): Set the **SUBSIDY SCHEDULE** by completing the required fields. Select the **OK** button to proceed.

1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter-Inserts Letter-Attachments 7. Notes

Subsidy Schedule

Subsidy Schedule Start: 08/01/2015 Subsidy Schedule End: 10/31/2015

Subsidy Schedule Type: Emp Subsidy

Subsidy Schedule Amount Type: Percentage Amount: 100.00 %

Insurance Type: Medical

Ok Cancel

Previous Next Finish Cancel

Step 15: Review and edit the subsidy details if desired. Choose the **FINISH** button to proceed.

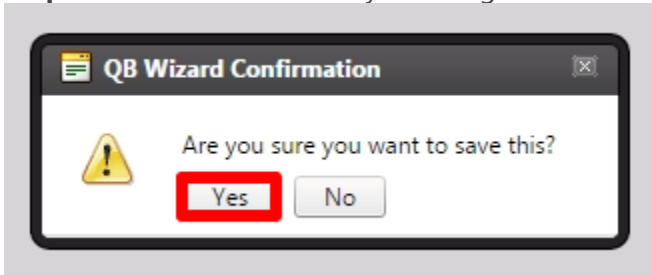
1. General 2. Event 3. Plans 4. Dependents 5. Subsidies 6. Letter Inserts Letter Attachments 7. Notes

+ Add a Subsidy Schedule Refresh

	Start Date	End Date	Insurance Type	Subsidy Type	Subsidy Amount Type	Amount	
Edit	08/01/2015	10/31/2015	Dental	Emp Subsidy	Percentage	100.00 %	Delete
Edit	08/01/2015	10/31/2015	Medical	Emp Subsidy	Percentage	100.00 %	Delete
Edit	08/01/2015	10/31/2015	Vision	Emp Subsidy	Percentage	100.00 %	Delete

Previous Next **Finish** Cancel

Step 16: Confirm and save by selecting **YES** in the **QB WIZARD CONFIRMATION** window.



Congratulations! The QB has been added.

Home Members Utilities Reports Wizards Favorites Help Logoff

Pro-Flex
PRO-FLEX ADMINISTRATORS LLC

Demo Person - 012-22-3456 - 303 369-7886 | [Please Add Email Address and Phone #](#) | The Demo Client Quick Search

QB SPM NPM

Last Name:
 First Name:
 SSN:
 Individual ID:
 Member ID:
 Include Inactive

+ Add a new QB Refresh

Name	SSN	Ind. ID
Enter Search Criteria		

Profile General Event Plans Dependents Subsidies Payments Premiums Premiums Due Letter Inserts Letter Attachments Communications Messages

QB Information:

Name: Demo Person
 Address: 7100 E. Belleview Ave.
 Ste. 300
 Greenwood Village, CO 80111
 SSN: 012-22-3456
 DOB: 1/1/1980
 Individual ID:
 Phone: (303) 369-7886
 Email: [Please Add Email Address and Phone #](#)
 Member ID: 80723

QB Event Information:

Event Category: Employee
 Event Type: Termination
 Qualifying Event Date: 07/02/2015
 Date Entered: 07/10/2015
 Original Date of Hire/Enrollment Date: 02/02/2013
 Specific Rights Processed Date:
 2nd Event: No
 Legacy: No
 Latest Election PMD: 09/30/2015
 Last Day of Initial Grace Period:

QB Additional Information:

Disability Extension Approved: No
 Uses Health Coverage Tax Credit: No
 Conversion Letter Processed: No
 At Least 1 Dependent on QMCSO: No
 Last Subsidy Month:
 Registration Code:
 Registration Date/Time:
 User Name:

Client / Client Division:
 Client: The Demo Client Client Division: Super Demo Company

Last Payment:

Postmark Date	Entered Date	Amount	Payment Method	Check #

Next Payment:

Premium Month	Amount Due	Latest PMD

Current Plan Information:

Insurance Type	Plan	First Day of COBRA	Last Day of COBRA	Coverage Level	Status	Bundle Name
Dental	Dental PPO Trial	08/01/2015	01/31/2017	EE + Spouse	Pending	
Medical	Medical PPO	08/01/2015	01/31/2017	EE + Spouse	Pending	
Vision	Vision PPO	08/01/2015	01/31/2017	EE + Spouse	Pending	