Employer Group Web User Guide

Manage Your Account at mvphealthcare.com
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MVP Health Care’s Employer Portal

MVP Health Care® supports employers in developing a culture of health – helping to improve the overall health and performance of your workforce.

Using the Employer Portal at mvphealthcare.com, Health Benefits Administrators can quickly and easily process routine transactions, including:

- Ordering employee ID cards
- Making changes to your employees' files such as changing an employee's or dependent's name, address, other insurance/Medicare effective dates, or retiree effective dates
- Terminating or reactivating subscribers or dependents
- Adding or changing dependents
- Making plan changes such as changing an employee's subgroup, plan, class, type, department or location code
Important Phone Numbers

The **Group Personal Service Team** will support Brokers and HBAs with eligibility and enrollment-type questions.

Dedicated phone number will route directly to the Service Center:

**1-844-946-8003**

Email: **GPST@mvphealthcare.com**

Or to reach your local office, call **1-800-TALK-MVP (825-5687)**.

For login assistance, please call our eSupport Help Desk at **1-888-656-5695**.
Accessing the MVP Health Care Website

Navigate to the MVP Health Care website at mvphealthcare.com.

Select the **Employers** tab.
Sign In to the MVP Employer Portal

Using the login ID that you were provided, enter your username and password and click **Sign In**.

For technical problems or login assistance, please call our eSupport Help Desk at **1-888-656-5695**.
Navigating the MVP Employer Portal

Upon successful login, a welcome message and navigation menu will appear on the left sidebar.

Once logged in, this navigation menu only displays on the Manage Your Account pages. If you navigate to a different section of the website, simply choose Manage Your Account from the top navigation options.
Enroll Online

This form is used for a first-time enrollment only.

Select **Enroll Online** from the left navigation bar.

Enter the **Effective Date** (dd/mm/yyyy). Tab to the Product field.

Select the applicable product from the **Product** drop-down box.

Then, from the drop-down menu, select the **qualifying event** associated with the enrollment.

Click **Submit**. The online application form will be displayed.
Online Enrollment Form

Complete sections 1-5 on the enrollment form, then click **Submit**.

**Section 1** – Provide employee information

**Sections 2 & Section 3** – Enrollment/Change and Coverage information is pre-populated based on the selections on the prior page. If modifications are needed, select the browser's *Back* button and make the appropriate plan and qualifying event selection.
Online Enrollment Form

Section 4 – Provide information on the employee and the employee’s dependents. Information includes Gender, DOB, and Social Security Number for each.

<table>
<thead>
<tr>
<th>Relationship to Employee</th>
<th>Name First, M, Last</th>
<th>Gender</th>
<th>Date of Birth MM/DD/YYYY</th>
<th>Social Security Number</th>
<th>Check if Disabled</th>
<th>PCP Number</th>
<th>Primary Care Physician (PCP) Last and First Name</th>
<th>Check Box if Current Patient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Relationship to Employee</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Relationship to Employee</td>
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<td></td>
</tr>
<tr>
<td>*Relationship to Employee</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:** With the exception of your spouse, each dependent must be under 27 years of age, unless a disability waiver is attached or a rider has been purchased to extend coverage. To obtain a waiver, call MVP.

**Note:** the PCP section is not required or displayed for every plan option.
Online Enrollment Form

Selecting a PCP

Online help is available for plans that require the selection of a PCP.

Select the magnifying glass icon to open the PCP search screen.

Select whether or not the employee is a current patient.

Enter the provider’s name, or zip and radius, then select **Find**.
Online Enrollment Form

Selecting a PCP

The screen shown on the right is a result of a provider search using the last name “Smith.”

Click Select next to the name of the employee’s PCP to pre-fill your selection in section four of the enrollment form.
Online Enrollment Form

Section 5 – Signature authorization will be auto-populated when you enter employee and dependent information in Section 4.

Within this section, you will be required to complete the Approved By and Subgroup Number (where applicable) fields.
Online Enrollment Form

Authorize and Submit

When the entire online enrollment form is complete, please review the disclaimer and authorization statements, and click **Submit**.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and in New York shall also be subject to civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

On behalf of myself and any listed dependents, I (we) hereby apply for membership in MVP. I understand that benefits provided under MVP's Healthy NY, HMO, Indemnity, PPO, and EPO plans may be subject to pre-existing condition limitations. If applicable, a medical questionnaire will be forwarded to you for your completion.

I authorize my employer to deduct from my earnings the necessary contribution, if any, required of me.

I hereby authorize any licensed physician, hospital or other health care provider to furnish MVP with such medical information about myself and my minor eligible dependents listed on the application that may be required to allow MVP to administer my benefits. This authorization EXCLUDES the release of any information about previously administered tests for HIV antibodies, T-cell counts, AIDS, or ARC.

I hereby certify that the statements made are true and complete to the best of my knowledge and belief.
Group Roster

The **Group Roster** allows a complete view of all employees on the plan. The roster can be sorted by employee last name, ID number, or subgroup group number. Select the sort choice from the **Sort by** drop-down box. You can also filter by **Member Status** – Active, Terminated, All.

**To search the roster:**
1. Enter the employee or dependent’s ID number;   **or**
2. Employee’s last name
3. Click **Find**

For a **full roster of all employees**, leave all fields blank, and click **Find**.
Group Roster Search

An example of a roster is displayed below. The **member’s last name** is a selectable field.

<table>
<thead>
<tr>
<th>Member ID</th>
<th>Last Name</th>
<th>First Name</th>
<th>Gender</th>
<th>Plan Type</th>
<th>Sub Group</th>
<th>Active</th>
<th>Effective Date</th>
<th>Member Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>800123400</td>
<td>SMITH</td>
<td>JOHN</td>
<td>M</td>
<td>HMO</td>
<td>0001</td>
<td>Yes</td>
<td>01/01/2016</td>
<td>1</td>
</tr>
<tr>
<td>800246800</td>
<td>SMITH</td>
<td>JACK</td>
<td>M</td>
<td>HMO</td>
<td>0003</td>
<td>Yes</td>
<td>01/01/2016</td>
<td>1</td>
</tr>
<tr>
<td>800135700</td>
<td>SMITH</td>
<td>JANE</td>
<td>F</td>
<td>HMO</td>
<td>0002</td>
<td>Yes</td>
<td>01/01/2016</td>
<td>6</td>
</tr>
<tr>
<td>800432100</td>
<td>SMITH</td>
<td>JAMES</td>
<td>M</td>
<td>HMO</td>
<td>0006</td>
<td>Yes</td>
<td>01/01/2016</td>
<td>2</td>
</tr>
</tbody>
</table>

You can also select **Download Roster** to export a **full member roster** in Excel that provides more robust information than the basic search.
Group Roster Search

Once the roster is retrieved, select the **last name** of the member to view specific information about that member or to perform other functions as shown here.

**Note:** online changes for members or subscribers cannot be made until AFTER the plan effective date.

<table>
<thead>
<tr>
<th>Member ID</th>
<th>Last Name</th>
<th>First Name</th>
<th>Gender</th>
<th>Plan Type</th>
<th>Sub Group</th>
<th>Active</th>
<th>Effective Date</th>
<th>Member Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>800123400</td>
<td>SMITH</td>
<td>JOHN</td>
<td>M</td>
<td>HMO</td>
<td>0001</td>
<td>Yes</td>
<td>01/01/2016</td>
<td>1</td>
</tr>
</tbody>
</table>
Plan Changes

The **Change Health Care Plan** function is used to move members from one plan to another.

The **Plan Change** page can be accessed multiple ways from the main navigation menu:

1. **Changes > Plan Changes**
2. **Transfer Group #**
3. **Group Roster > Search for a Member > Change Health Care Plan**

### Plan Change

The following change may prompt a new ID Card to be mailed to your employee.

If you would like to change a subscriber’s existing employer information, please fill in the appropriate fields below. You must enter a reason and an effective date for the change.

<table>
<thead>
<tr>
<th>ID</th>
<th>Name</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>01234</td>
<td>Group XYZ</td>
<td></td>
</tr>
</tbody>
</table>

**Group Information**

*Note:* You can change the group email address for plan transfer email confirmations. To permanently change your group email address please use the group profile change application.

**Subscriber Information**

*Note:* Please fill in the appropriate fields below to change the subscriber product and plan information. A reason code and an effective date are required prior to submitting the change.

<table>
<thead>
<tr>
<th>Member ID</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>800123400</td>
<td>JOHN SMITH</td>
</tr>
</tbody>
</table>
Plan Changes

A new effective date and reason for the change must be entered.

Complete all appropriate fields and press **Submit** to save the changes.

**Plan Change From:**

- **Medical**
- **Subgroup** 0001
- **Class** A001
- **Product** H2500ACW

**Plan Change To:**

- **Medical**
- **Subgroup** 0001
- **Class** A003
- **Product** H3050AL0

**Effective Date**

**Reason for Change**

**Note:** These fields must be consistent with the information in MVP’s system. Otherwise, any changes could result in the member being incorrectly termed in our system as a result of any discrepancies. For a detailed group structure, please reach out to your MVP Sales Representative.
Use this function to change employee or dependent information.

Current employee information is pre-filled in each field. Make necessary edits, and select Change Employee Info to submit the changes.

**Notes:** You must enter a Subscriber ID or SSN to access this page. Changes made online will take approximately one business day to process. If you would like to check the status of or have questions about your transaction, call the Group Personal Service Team at 1-844-946-8003.
Add Dependents

To add a dependent, enter all appropriate information and select **Add Dependent** to save changes.

**Notes:** You must enter a Subscriber ID or SSN to access this page.
Not all plans require assigning a PCP.
Terminate Subscriber or Dependents

To terminate a member’s coverage, click the check box next to the member to be terminated. The entire family’s products can be terminated by clicking on the checkbox located next to the member ID.

Select a termination reason code from the drop down box and click Next.

Note: You must enter a Subscriber ID or SSN to access this page.

You can also terminate an individual product by entering the termination date in the corresponding field. Please use the last day of the month that the coverage is effective.

Screen continued on the next page...
Terminate Subscriber or Dependents

A confirmation screen appears. If all changes are correct, select **Terminate**.
Transaction History

You can view **Transaction History** by choosing the activity type(s) that search all of the web transactions submitted.
Transaction History

This example of a **Transaction History report** shows the transaction date, contract name and number, status, who created the activity, and the activity type.

<table>
<thead>
<tr>
<th>Transaction Date</th>
<th>Contract Number</th>
<th>Contract Holder</th>
<th>Current Status</th>
<th>Activity Created By</th>
<th>Activity Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mar-26-2018</td>
<td></td>
<td></td>
<td>Processed</td>
<td></td>
<td>Enrollment</td>
</tr>
<tr>
<td>Apr-18-2018</td>
<td></td>
<td></td>
<td>Processed</td>
<td></td>
<td>Dependent Add</td>
</tr>
<tr>
<td>June-04-2018</td>
<td></td>
<td></td>
<td>Processed</td>
<td></td>
<td>Dependent Add</td>
</tr>
<tr>
<td>Nov-01-2018</td>
<td></td>
<td></td>
<td>Pending</td>
<td></td>
<td>Termination</td>
</tr>
</tbody>
</table>

**Activity Type** is a selectable field that you can select for more specific information.
Submitting Retiree Drug Subsidy (RDS) Files

The **RDS Submission** function allows you to electronically upload a Retiree Drug Subsidy file. The group must be registered with MVP’s EAS EDI coordinators to use this function.

Information regarding file format and submission instructions is available from the EAS EDI coordinators.
Changes

The **Changes** function allows you to perform a variety of maintenance functions for members such as:

- Address and plan changes
- Add or change dependent information
- Reactivate or terminate subscribers or dependents
- Order ID cards
ID Cards

To order ID Cards, enter the subscriber’s ID or social security number and select **Find Subscriber**.
Ordering ID Cards and Temporary ID Cards

Verify that the address displayed is correct, and select Order.

Note: This screen is also used to view and print a temporary ID card.

A temporary ID card is displayed on the next page.
Viewing & Printing Temporary ID Cards

To view and print a temporary ID Card, select **Click here to display a Temporary ID Card** on the Order ID Cards page.

An example of a temporary ID card is displayed below. This card is valid for 10 days. Use the print function in your Web browser to print a copy of the ID card.

![Temporary ID Card Example](image_url)
Change My Information

The **Change My Information** function is used to change your contact information in your web profile only. *This function does not appear in the navigation menu for ASO groups.*

Note: Changing the address, phone and email address on this page does **NOT** change it in our billing system. Please contact your MVP sales representative for these changes. Your representative will complete the proper paperwork to submit the change to the system.
Update Account

The **Update Account** function is used to maintain the web account email address, password, and security question.

You must have a valid email address and completed security question on file to use our online *Forgot Username* and *Forgot Password* functions.

**Note:** Changing the email address on the Updated Profile page does **NOT** change it in our billing system. Please contact your sales representative for these changes. Your representative will complete the proper paperwork to submit the change to the system.
Other Important Information

Changes to Enrollment
A member can be added online up to 30 days after the members’ effective date.
A member can be retro-termed up to 60 days after the term date.

Logout
To maintain security and privacy, please be sure to Logout when you are not using the online Employer Portal.