

**COBRAFlex**

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# **COBRAFlex** **Companion User Guide**



## Getting Started with COBRAflex Companion

COBRAflex Companion is a web portal which allows you and COBRAflex to work more efficiently with the day-to-day task of COBRA Administration. This guide was developed to help you navigate through the website and understand the basic COBRA regulations. While using the website, you will have access to more in-depth help than this manual provides. Look for the [?] for help on a particular topic or send an email to the ESG COBRA [cobra@esgcorp.biz](mailto:cobra@esgcorp.biz).

## Signing In

Open your web browser and go to [www.employeesolutionsgroup.com/employers](http://www.employeesolutionsgroup.com/employers). Click on the 'COBRA Admin Portal' or COBRA Logo by scrolling down towards the middle of the page. Enter your username and password and click the Log In button to enter the site. Once you have signed on, you will be taken to your Dashboard.

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# EMPLOYERS



## Welcome, Client Partners!

*Thank you for choosing ESG, we appreciate your business. Get started by logging into your Administrator account below:*

### Qualifying Event Employee Status Change?

*For employers currently not using Navigator or Ease to communicate employment status changes (i.e. termination of coverage)*

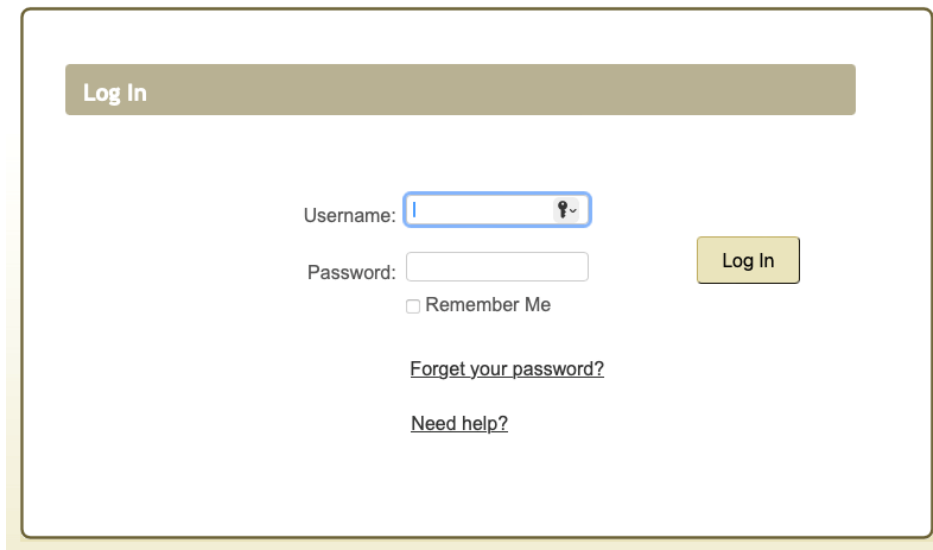
COBRA ADMIN PORTAL



# COBRA



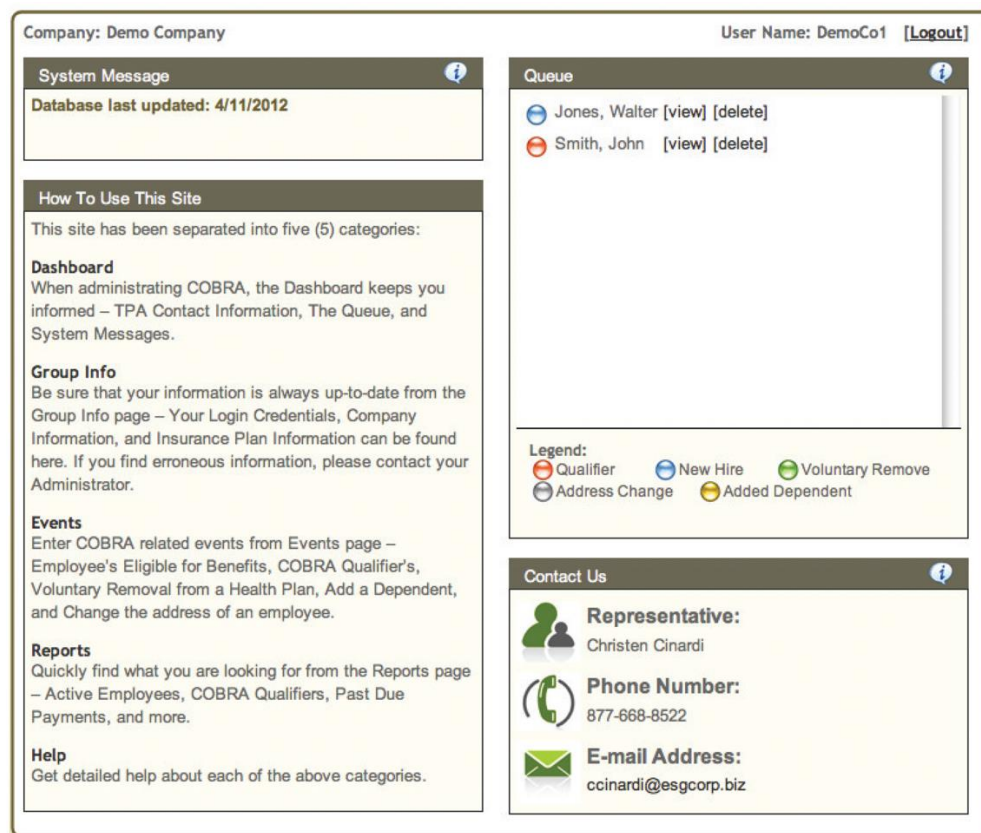
If you do not have your username and password, contact ESG Customer Service by emailing [customerservice@esgcorp.biz](mailto:customerservice@esgcorp.biz) or reaching out to your ESG Customer Service Representative.



The image shows a web form for logging in to an ESG system. At the top left of the form area is a dark grey button labeled "Log In". Below this, the "Username:" label is followed by a text input field with a blue border and a small user icon on the right. The "Password:" label is followed by a text input field. To the right of the password field is a yellow button labeled "Log In". Below the password field is a checkbox labeled "Remember Me". At the bottom of the form are two links: "[Forget your password?](#)" and "[Need help?](#)".

## Dashboard

After signing in, on the first page you will see the Dashboard. The Dashboard keeps you informed of what is going on within the web portal. It's divided into separate sections which includes System Messages, The Queue, How To Use This Site tutorials, and Contact Us.



**System Messages** displays important information about the status of the site, when your database was last updated, and errors you may have encountered while using the site.

**The Queue** displays individuals and the event associated with them (i.e. New COBRA Qualifier, Address Change, etc.) You may view and delete items in the queue. Each night the items in your queue will be sent securely to COBRAFlex for processing.

## Group Information

The group information page displays information and you and your company.

**User Credentials** are used when logging into the system. It's important that you keep this information updated and protected. If you forget your password, you will need a valid email address for the system to email you a new temporary password. You may change your password by entering your old password (or temporary password provided) and then enter your new desired password.

**Company Information & Insurance Plan Information** is used in the system when producing notifications and reports. If you find an error in one of these sections, please notify ESG COBRA by sending an email to [cobra@esgcorp.biz](mailto:cobra@esgcorp.biz).

Company: Demo Company
User Name: DemoCo1
Logout

### User Credentials

Change your password by entering your old password and then entering your new password. If you ever forget your password, the system can email you a temporary password to the email address found below.

User Name: DemoCo1

Last Login Date: 4/12/2012 12:25:10 PM

Old Password:

New Password:  [?]

Confirm Password:

Email Address: jsims@esgcorp.biz

Update Information

### Company Information

This is your company information and can only be edited by your administrator. If you find an error, please notify your Administrator.

Company Name: Demo Company

Mailing Address: 111 State Street

Address Overflow:

City, State and Zip Code: Chicago, IL 60000

Company Contact: Lisa Smith

Title: HR Manager

### Insurance Information

Select an insurance plan from the drop-down box to review the plan's information and rates. If you find an error, please notify your Administrator.

Plan Name: Blue Cross PPO

Plan Year: 01/01/2012 to 12/31/2012

Plan allows conversion: Yes

Loss of Dependent Status Age: 26

Loss of Student Status Age: 26

Rates

| Single | 2 Party | EE + Child(ren) | Family |
|--------|---------|-----------------|--------|
| 250.00 | 350.00  | 350.00          | 650.00 |

The following plans require offering COBRA Continuation coverage:

- Medical Indemnity Insurance Plans
- Preferred Provider Organization (PPO)
- Health Maintenance Organizations (HMO)
- Exclusive Provider Organizations (EPO)
- Dental Indemnity Plans
- Prepaid Dental Plans
- Prescription Drug Plans
- Drug/Alcohol Treatment Plans
- Vision Plans
- Hearing Plans
- Long-Term Care Plans
- Free-standing Psychiatric Plans
- Medical Reimbursement Accounts (under Section 125/105)
- Life Insurance (mandated in some States)

## **Events**

Enter Employee and COBRA related events from the Events Page. There are (3) sections to this page which include COBRA Qualifying Events, Employee Events, and Help.

### **COBRA Qualifying Events**

A Qualifying Event is triggered when an employee, spouse or dependent child has lost coverage from the group health plan for one of the reasons listed below:

- Termination of Employment
- Divorce or Legal Separation
- Reduction in Work Hours
- Death of Employee
- Loss of “Dependent” status

**Once a qualifying event is experienced, you (the employer) will need to enter the qualifiers information into the system so that COBRAflex may produce the necessary notifications.**

To enter a new COBRA qualifier, you will need the employee information, insurance plan information, and dependent information (if applicable). This information is collected through a series of screens within the Companion portal. If the qualifier was previously entered in the system as an active employee, select their name from the drop-down list; otherwise, select **‘Not Entered’** and then click **‘Go’**.

This first page will help you collect personal information on the COBRA qualifier. Complete the page and click Next to continue. Depending on the qualifying event, you may be taken to the dependent information page. Enter all the dependents who were enrolled in any of the group health plans at the time of the qualifying event and click **‘Next’** to continue. You will now be asked to complete the insurance plan information. Indicate all the plans that the qualifier and dependents were enrolled in and click **‘Next’** to continue to the summary page.

Company: Demo Company
User Name: DemoCo1
Logout

## Involuntary Termination of Employment

COBRA Qualifier Information

**Section 1: Qualifying Event Reason and Date**

Please enter the employee's qualifying event date.

Event Reason: Invol. Termination of Employment      Event Date: 04/12/2012 [?]

**Section 2: Employee's Information**

Please complete this section with the employee's information.

Social Security # 111-23-3333 [?]

Last Name Smith

First Name John

Gender Male

Middle Initial

Date of Birth 01/01/1960

Mailing Address 123 Main Street

**Address Overflow**

City Chicago

State Illinois

Zip 61114

Date of Hire 01/01/2011

Benefits Effective Date 02/01/2011 [?]

Items in Green are optional.

Next >>

This page is a review of all the information that you entered. Please review and when you are sure that everything is correct, click 'Save' to send the information to the queue. If you find a mistake, click 'Back' to correct the error and return to this page to save. After saving to the queue, you may want to print the page for your records. The 'Print' button will display after you click 'Save'.

Company: Demo Company
User Name: DemoCo1
Logout

## Involuntary Termination of Employment

Please review the information prior to saving the data to the queue. If you find any mistakes, click the 'Back' button to correct them. After saving the data, you may print a copy for your records.

**Employee's Name: John Smith**

**General Information:**

|                                |                                  |
|--------------------------------|----------------------------------|
| COBRA Qualifying Event Reason: | Invol. Termination of Employment |
| COBRA Qualifying Event Date:   | 04/12/2012                       |
| Mailing Address:               | 123 Main Street                  |
| City, State, Zip:              | Chicago, IL 61114                |

**Insurance Plan Information:**

|                      |                        |
|----------------------|------------------------|
| Name: Blue Cross PPO | Coverage: 'EE & Spouse |
|----------------------|------------------------|

**COBRA Qualifiers:**

|                                 |                           |
|---------------------------------|---------------------------|
| John Smith                      | Social/ID: 111-23-3333    |
| Benefits Start Date: 02/01/2011 | Date of Birth: 01/01/1960 |
| Lisa Smith                      |                           |
| Benefits Start Date: 02/01/2011 | DOB: 03/01/1961           |

<< Back
Save
Cancel

## Employee Events

You can administer multiple employee related updates in this section which include:

- Enter an employee who became eligible for benefits
- Remove an employee from the group health plan without triggering a COBRA qualifying event
- Add a dependent (spouse or child)
- Change the address of an employee

### ***Enter an Employee who becomes eligible for Benefits***

The COBRA legislation requires General Notice (or Initial COBRA Notification) be sent to new employees and their covered spouse enrolling on the group health plan. The law states that this document must be sent within 90-days of their eligibility. ESG recommends you send it within 30-days to ensure compliance.

Company: Demo Company
User Name: demouser [Logout](#)

### Employee Eligible for Benefits

Employee Information

Complete this section with the employee's information.

Last Name Jones
First Name Walter
Gender Male
Mailing Address 100 West Vine St
City Tempe
State Arizona
Social Security # 233-11-2334
Date of Hire 1/1/1990
Benefits Effective Date 1/1/1995
Send Notice in Spanish No

Middle Initial T
Date of Birth 9/5/1970
Address Overflow
Zip 85282

Items in Green are optional.

Next >>

Begin entering information on the new employee. You will need to enter their 'Date of Hire' and 'Effective Date' of the insurance coverage. These dates will be stored and needed when/if the employee or dependent experiences a qualifying

event. This data is essential in preparing a Certificate of Creditable Coverage which is required by HIPAA. Once the Employee's generation information has been completed, click 'Next' to continue to the dependent information form. If you elect to track dependent information, enter as much of the **dependents** information as available which includes:

- First and last name
- Benefit start date (if different than employee)
- Date of birth
- Student status

If the employee does not have any dependents or once you have completed the form, click 'Next' to continue to the insurance information form. Select the plan name and coverage type that the employee and his/her covered dependents are enrolled in. Once you have selected the insurance plan information, click 'Next' to 'Save' and 'Print' the entered information. The employee's information will be added to the Queue.

### ***Remove an employee from the group health plan without triggering a COBRA qualifying event***

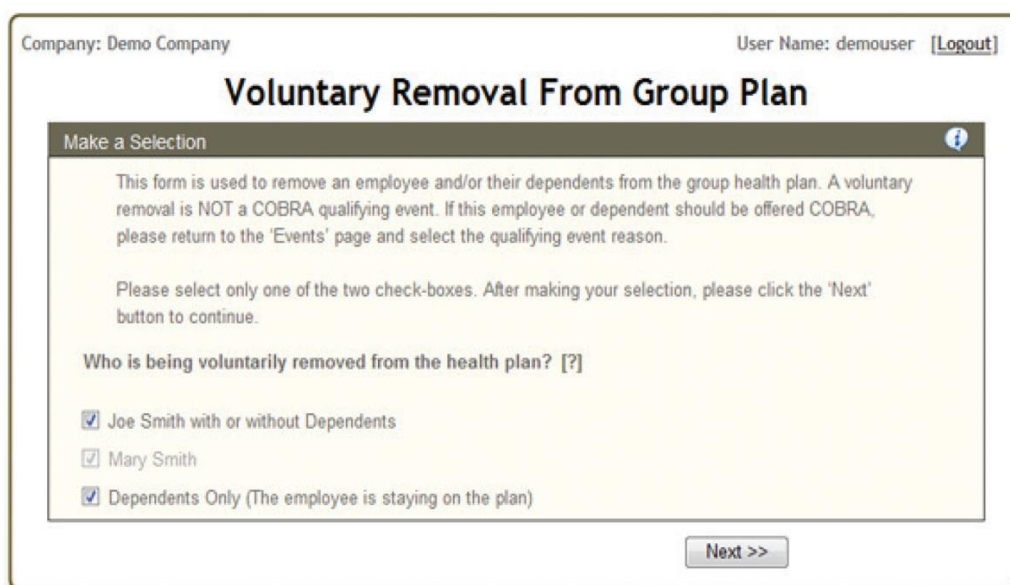
An active employee may ask to remove his/her dependents or themselves from the group health plan. They may have received other group coverage, qualify for state/federal provided benefits or the employee can no longer afford their portion of the premiums. A voluntary removal from the group plan is NOT a qualifying event and is not required under COBRA. Performing this function is optional. It's important to note, if later it turns out the employee was removing the dependents "in anticipation" of a qualifying event (i.e. divorce), the dependents may be eligible for COBRA coverage.

### ***Notify individuals of their removal from the group plan***

1. Select 'Produce a Certificate of Coverage' (Voluntary Removal from Plan) option found on the Events page
2. Select the name of the employee or dependent who will be removed from the plan and click 'Go' to continue
3. Select the individual(s) that will be removed from the plan and click 'Next'

4. Complete the rest of the required information and then 'Save' it to the queue

COBRAflex will be notified of the event and will mail a Certificate of Creditable Coverage to the individual being removed from the plan.



Company: Demo Company User Name: demouser [Logout]

### Voluntary Removal From Group Plan

**Make a Selection**

This form is used to remove an employee and/or their dependents from the group health plan. A voluntary removal is NOT a COBRA qualifying event. If this employee or dependent should be offered COBRA, please return to the 'Events' page and select the qualifying event reason.

Please select only one of the two check-boxes. After making your selection, please click the 'Next' button to continue.

Who is being voluntarily removed from the health plan? [?]

☒ Joe Smith with or without Dependents

☒ Mary Smith

☒ Dependents Only (The employee is staying on the plan)

Next >>

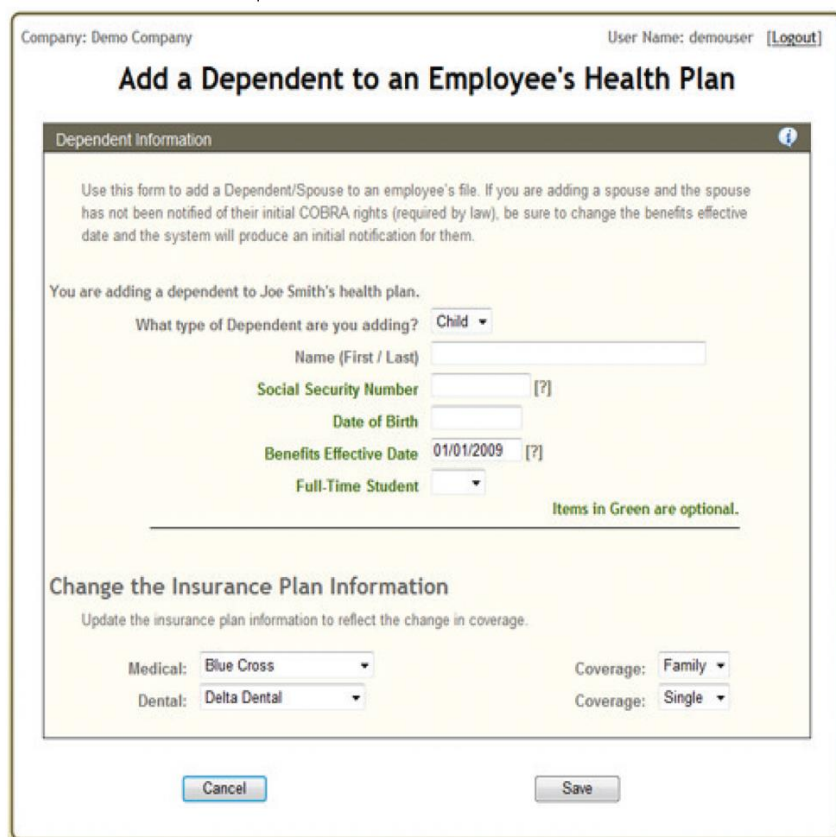
### ***Add a dependent (spouse or child)***

COBRA requires the plan to provide the initial notice to the covered employee and spouse. Therefore, if the spouse becomes covered on the plan at a later date, the spouse should be sent an initial COBRA notification. Alternatively, a child does **NOT** need to be sent an initial COBRA notice when they are added to the plan.

To add a dependent to an employee's plan, click on 'Add' a dependent to an Employee's Health Plan, the select the employee's name from the drop-down list and click 'Go'.

Complete the form to add a dependent to an employee's existing health plan. The form will be pre-populated with the employee's benefit start date. If you do not change the benefit start date from the pre-populated date, the dependent will only be added the employee's file, and a notice will **NOT** be prepared.

You will also need to update the Insurance Plan Information to reflect the changes to the plan. After completing the form, click the 'Save' button to save the dependents information. Once saved, you will have an option to print the form.



Company: Demo Company User Name: demouser [Logout](#)

### Add a Dependent to an Employee's Health Plan

**Dependent Information**

Use this form to add a Dependent/Spouse to an employee's file. If you are adding a spouse and the spouse has not been notified of their initial COBRA rights (required by law), be sure to change the benefits effective date and the system will produce an initial notification for them.

You are adding a dependent to Joe Smith's health plan.

What type of Dependent are you adding?

Name (First / Last)

Social Security Number  [?]

Date of Birth

Benefits Effective Date 01/01/2009 [?]

Full-Time Student

Items in Green are optional.

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**Change the Insurance Plan Information**

Update the insurance plan information to reflect the change in coverage.

Medical:  Coverage:

Dental:  Coverage:

## Reports

The reports page allows you to run reports with information that COBRAFlex has entered or information that has been imported from My COBRAFlex online. For example, if you entered a new COBRA qualifier and that qualifier is still in the queue, the qualifier will not show on the COBRA Qualifying Event Report. Once COBRAFlex imports the information, it will then be available online. You can check the date your data was last updated from your Dashboard.

To run a report, follow these instructions:

1. Select the name of the report from the 'Select Report' drop-down list
2. Select the timeframe that you would like the report to be run (if applicable)
3. Select how you would the report to be sorted

4. Click the 'Go' button to create the report
5. The report will be displayed on the screen

If you would like to print the report, click the printer icon at the top of the report. A printer friendly formatted report will be displayed in a new window. You may also save the report data to a CSV file that can be opened in MS Excel. Click the 'CSV' icon to save the file to your computer.

## **Safe Computing**

### **Secure Sockets Layer (SSL)**

My COBRAFlex Online uses a secure sockets layer to encrypt and protect data transferred over web pages. An SSL Certificate stored on our server contains a public key and private key. A public key is used to encrypt information and a private key is used to decipher it. When a browser points to a secured domain, an SSL handshake authenticates the server and the client, then establishes an encryption method with a unique session key.

### **Encrypted Social Security Numbers**

My COBRAFlex Online uses encryption when storing social security number on our server. Encrypting all social security numbers adds an extra layer of protection on top of SSL.