

# HOW TO ENROLL



# **Benefitbay – How To Enroll**





Review and

and HIPAA

# Benefitbay – How To Enroll



Those choosing to shop for coverage in the ICHRA plan will select the "Shop" button.

		•	
Enrollment ends on October 31, 2023 for coverage s	arting 2023-12-01		
Your available employer contribution is up to: \$616	08		
Enrollment			
Family Enrollment Status			
	Me: Pena, John	× NOT COVERED	>
	Spouse: Pena, Sarah	× NOT COVERED	
Your options	<b>Shop</b> I would like to review the available plan options.	>	
	Custom Plan Entry Enter custom plan details for government-subsidiz	ed or Medicare plans.	
	Waive I do not need to enroll in any plans. I understand to changes unless I have a qualifying life event	hat I will not be able to make any >	
	-		

# Benefitbay – How To Enroll



Employees will		
see their employer	nrollment ends on September 21, 2023 <u>Learn more</u>	
ICHRA	ur Employer ICHRA contribution is up to: \$928.12	
contribution		
displayed.	t's select which family members you want to be included in this medical cover	age
Choose which	Jane Hubbard	
family members	ct the address for the plan selection	
you will be Addres	ess	
shopping for or	3 Fun Lane, City 95252 V	
covering.	This address will be set as the home address for all included family members	
	Save and continue Back to dashboard	
		$\bigcirc$

### Benefitbay – Subsidy Check

Based on your cost of insurance and your income, you may get presented with two options to choose from; you can select your employer's ICHRA contribution <u>OR</u> a government subsidy, whichever is greater.



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# **Benefitbay – Plan Filter Options**



You may want to use the filters to shop for available plans.

You can filter by:

- □ Carrier
- Metal levels
- □ Plan type
- □ HSA eligible
- □ Network
- Providers

You can also a sort by:

- Premium (Low-High)
- Premium (High-Low)
- □ Deductible (Low-High)
- Deductible (High-Low)

Enrollment ends on November 12, 2024 for coverage starting Dec		
Go back to enrollment	Carriers	
25 available medical plans	BlueCross BlueShield of Massachusetts	
Sort by	Harvard Pilgrim Health Care	
Premium Low-High ~ 111 Filters	Mass General Brigham	
	THP Direct	
<b>#0.00</b>	WellSense Health Plan (BMC)	
<b>\$U.UU</b> My cost per pay period	Metal levels	
Carrier	Bronze	
THP Direct	Expanded bronze	
Plan Tufts Health Direct Bronze 2850	Silver	
Plan ID	Gold	
59763MA0040014-01	Platinum	
Individual Deductible \$2,850	Plan types	
Individual Max Out Of Pocket	П нмо	
Coinsurance	PPO	
Show more details ~	HSA Eligible	
	Yes	
Compare	□ No	
	Networks	
	Allies	
Need help s	Hmo Blue	
Let our expert te	Hmo Flex	
Schedule a call :	Standard	

# Benefitbay – Plan Comparisons

\$0.00	
My cost per pay period	
Carrier Ambetter	
Silver 201 HSA	
9an ID 1663FL0170003	
ndividual Deductible n-Network: \$5,800 / Out-of-Network: Not Covered	
ndividual Max Out of Pocket	
Colneurance	
)%	
Add Preferred	
\$0.37	
My cost per pay period	
Carrier	
Ambetter	
B Bronze 7	
Plan ID 21863FL0160002	





# Benefitbay – What If I Still Need Help?



\$1.26	L
My cost per pay period	
<b>Carrier</b> Oscar	
<b>Plan</b> Bronze Simple- Standard	
Individual Deductible In-Network: \$9,100 / Out-of-Network: Not Covered	
Individual Max Out Of Pocket In-Network: \$9,100 / Out-of-Network: Not Covered	
Coinsurance 0%	
Show more details ~	
*** ~~	ſ
Still not sure which plan to select?	
Let our expert team help guide you to the perfect plan for you.	20 20 20
Schedule a call >	

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# Benefitbay – What If I Still Need Help?



### Your personalized benefits journey is almost complete.

Please review the plan shown and confirm that you have selected the insurance policy you would like to enroll for 2023.

Schedule time with enroller

Please reach out to us at **support@benefitbay.com** or use the BenefitBay™ chat in the bottom right corner.

Pick a convenient time to speak with a Benefitbay representative or enroller for assistance.

# Benefitbay – Review Your Selected Plan and Confirm G Gallagher

### Review your plan details one more time.

### \$75.47

My cost per pay period

**Carrier** Anthem

**Plan** Bronze 60 HDHP EPO

Individual Deductible In-Network: \$7,000 / Out-of-Network: Not Covered

Individual Max Out Of Pocket In-Network: \$7,000 / Out-of-Network: Not Covered

Coinsurance

### <u>Show more details</u> $\sim$

Doctor Visit Cost In-Network: \$0 after deductible / Out-of-Network: Not Covered

Specialist Cost In-Network: \$0 after deductible / Out-of-Network: Not Covered

### ER Visit

In-Network: \$0 after deductible / Out-of-Network: \$0 after deductible | limit: waived if admitted

#### Prescription Drugs

In-Network: \$0 after deductible / Out-of-Network: Not CoveredIn-Network: \$0 after deductible / Out-of-Network: Network: Network:

### Plan Type

EPO

### Metal

Expanded Bronze

### Effective Date 10/01/2023

HSA Eligible Yes

# Benefitbay – Review Your Selected Plan and Confirm G Gallagher

### Doctor Visit Cost

In-Network: \$0 after deductible / Out-of-Network: Not Covered

### Specialist Cost

In-Network: \$0 after deductible / Out-of-Network: Not Covered

### ER Visit

In-Network: \$0 after deductible / Out-of-Network: \$0 after deductible | limit: waived if admitted

### Prescription Drugs

In-Network: \$0 after deductible / Out-of-Network: Not CoveredIn-Network: \$0 after deductible / Out-of-Network: \$0 after deductible / Out-of-Network: Not CoveredIn-Network: \$0 after deductible / Out-of-Network: \$0 after deduct

#### Plan Type EPO

Metal Expanded Bronze

Effective Date 10/01/2023

### HSA Eligible

Yes

Market Off-Exchange

Family Deductible \$In-Network: \$14,000 / Out-of-Network: Not Covered

Monthly ICHRA Amount \$928.12

Family Out of Pocket Max In-Network: \$14,000 / Out-of-Network: Not Covered

### Providers in Network

Dr. Walter Kip Johnson



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# Confirm your selection.

# Benefitbay: Complete Enrollment by Submitting App



Confirm your cost per pay period and then select "Submit my application".

	Your personalize	d benefits	journey is	almost	complete
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IMPORTANT! HMO plans require that each person on the plan has a primary care physician (PCP). If you have selected a PCP they may not be available for this plan. You can either select a different PCP or submit the application and the carrier will select a PCP for anyone without a valid PCP below.

Availability

Participants	Provider
Erin Colligan	X NOT SELECTED
YYYY Colligan	X NOT SELECTED

age Providers	Manage
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Please review the information shown and confirm that you have selected the insurance policy you would like for coverage starting December 2024.

Once your application has been submitted you will need to work with benefitbay® support if you require any changes. If we need anything else, we will reach out. Please be sure to respond promptly to emails from support@benefitbay.com.

#### Submit my application

Please reach out to us at support@benefitbay.com or use the benefitbay® chat in the bottom right corner if you have any questions

Need help selecting a plan? Let our expert team help guide you to the perfect plan Schedule a call >



My cost per pay period

Carrier Harvard Pilgrim Health Care

Plan S HPHC HMO HSA 3400 - Flex (2011

Plan ID 36046MA0750168-00

Individual Deductible \$3,400

Individual Max Out Of Pocket \$8,050

Coinsurance

22

Participants Erin Colligan / YYYY Colligan

Show more details ~

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# **Enrollment: Payment Information**



	Enrollment
	Enrollment complete Great job! Your enrollment is complete. If you need to make any changes to the plans below, please reach out to us using the chat bubble or email us at support@benefitbay.com.
Congratulations! Your enrollment	Family enrollment status Me: Brady, Tom
is complete.	Enrolled plans
	\$44.40 My cost per pay period Carrier UnitedHealthcare Plan G UHC Gold Advantage (\$0 Virtual Urgent Care, \$3 Tier 2 Rx, \$0 Insulin)
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# Benefitbay: You can find all your documents here



Your home screen also contains a link to your Documents.

Individual coverage HRA notice		
Gold Classic- Standard		
ICHRA Plan Document		
Signed HIPAA Agreement Document		
Signed ICHRA Agreement Document		
		6

# Benefitbay: Your Benefitbay provided banking info



If you need to make a premium payment for your individual medical plan, you will use your Benefitbay ARC (advanced premium payment) account. The account information is located under the Wallet tab and displays your Account and Routing numbers for premium payment. You may need to access these to set up monthly recurring payments with your medical carrier of choice. If you need help setting up your payment method, please contact Benefitbay support for assistance. Benefitbay may also reach out to you as well.

	ARC account							
	Name on account:	Jeni Jenny	C					
) Coverage	Routing:	8675309	O					
Profile	Account number:	XXXX1982	C					
Wallet	Latest transaction:	11/04/2	024					
Employment History								
EP history								
Medical Providers								
Documents	Do <b>NOT</b> use Use the info	your persona under the Wa	al ban allet ta	k acc ab.	count	Inform	ation.	
Employee Notes								