







Adding Members | New Hires

New Hires should be added within the first 90 days of coverage.


Select ADD Member from the home page or the menu bar


Welcome Mason's Masonry

-  Home
-  Account ▾
-  Members >
- Add Member**
- Find Member
-  Imports & Reports ▾
-  Recent Activity
-  Help ▾







Home

 You Have No New Messages [View All Messages](#)

First Name	Last Name	 Find Member
<input type="text"/>	<input type="text"/>	
SSN	Individual ID	
<input type="text" value="XXX-XX-XXXX"/>	<input type="text"/>	
Member ID	Member Type	
<input type="text"/>	ALL ▾	


Add Member

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Add Member

Choose Member Type to Add

Qualified Beneficiary

An individual who has lost group health plan coverage due to a qualifying event such as termination or retirement. The individual must be a covered employee, spouse of a covered employee, or the dependent child of a covered employee.

Next

Direct Bill

An individual who is billed on a regular schedule for one or more plans or benefits. The billing frequency and specific types of plans or benefits are not associated with any laws or regulations. Therefore, a Direct Bill record can be used differently for specific needs and business processes.

Next

New Hire

An individual who is a current employee and not yet receiving COBRA benefits.

Next

Adding Members | New Hires

- Fields with a red asterisk are required*
- Enter demographics
- **Check Use ‘& Family’ addressing for mailings** if there are dependents.
- The **Hire Date** is optional, but encouraged. Keep in mind that if someone comes off of your benefits, but later rejoins, they would need another General Rights Notice when they rejoin the plan (*most often occurs with a re-hire*).
- **Select Add Member to complete the entry.**

Notice will be automatically generated and mailed the next business day.

Members >

[Add Member](#)

[Find Member](#)

[Imports & Reports](#) v

[Recent Activity](#)

[Help](#) v

Enter Profile Information

Step 1 of 1

Employer Name: Mason's Masonry **Division:** * Mason's Masonry

Salutation
Choose... v

First Name *
Carmela

Middle Initial

Last Name *
Jones

SSN *
999-88-7777

Individual Identifier

Gender *
Female v

Hire Date
06/01/2018 x 📅

Has waived all coverage
 Send General Rights letter when finished

Phone
(xxx) xxx-xxxx

Phone 2
(xxx) xxx-xxxx

Email

Address *
435 Maple Street

Address 2

City *
Oakwood

State *
MD

Zip *
99922

Country

Use '& Family' Addressing for mailings
 Do you want to enter HIPAA Certification information?

[Cancel](#) [➔ Add Member](#)