

eBilling User Guide



Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross and Blue Shield Association and incorporated as Louisiana Health Service & Indemnity Company.

Transactions:

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\(including Enable Auto-Draft\)](#)
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View Invoice Details



Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross and Blue Shield Association and incorporated as Louisiana Health Service & Indemnity Company.

View Invoice Details

- To view details of the invoice, click 'View Details' or 'View Consolidated Details' if you have more than one subgroup.

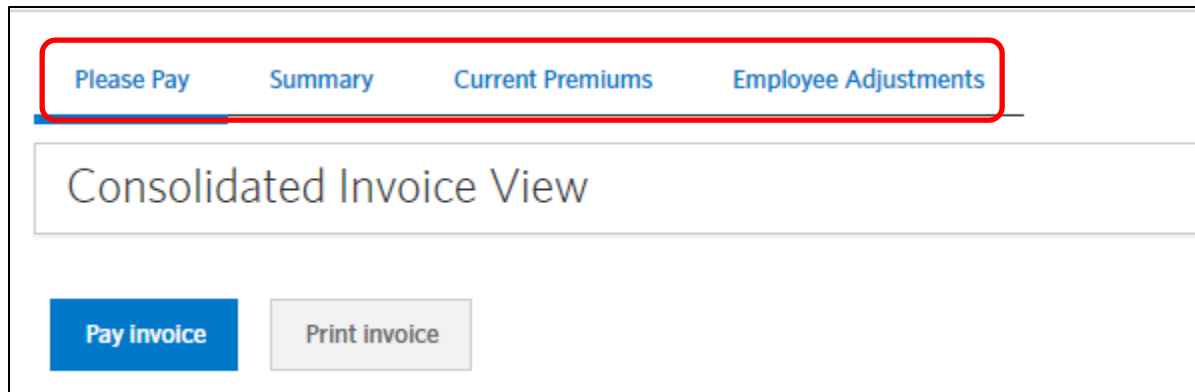
OTHER TEST GROUP
43T21FF4

Due Date:	03/01/2018
Billing Date:	02/21/2018
Invoice Period From:	03/01/2018
Invoice Period Through:	03/31/2018

[Make a Payment](#) [Print Invoices](#) [View Consolidated Details](#)

View Invoice Details

- Click on 'Please Pay,' 'Summary,' 'Current Premiums' and 'Employee Adjustments' to see the various sections of the invoice.



Create Payment Account

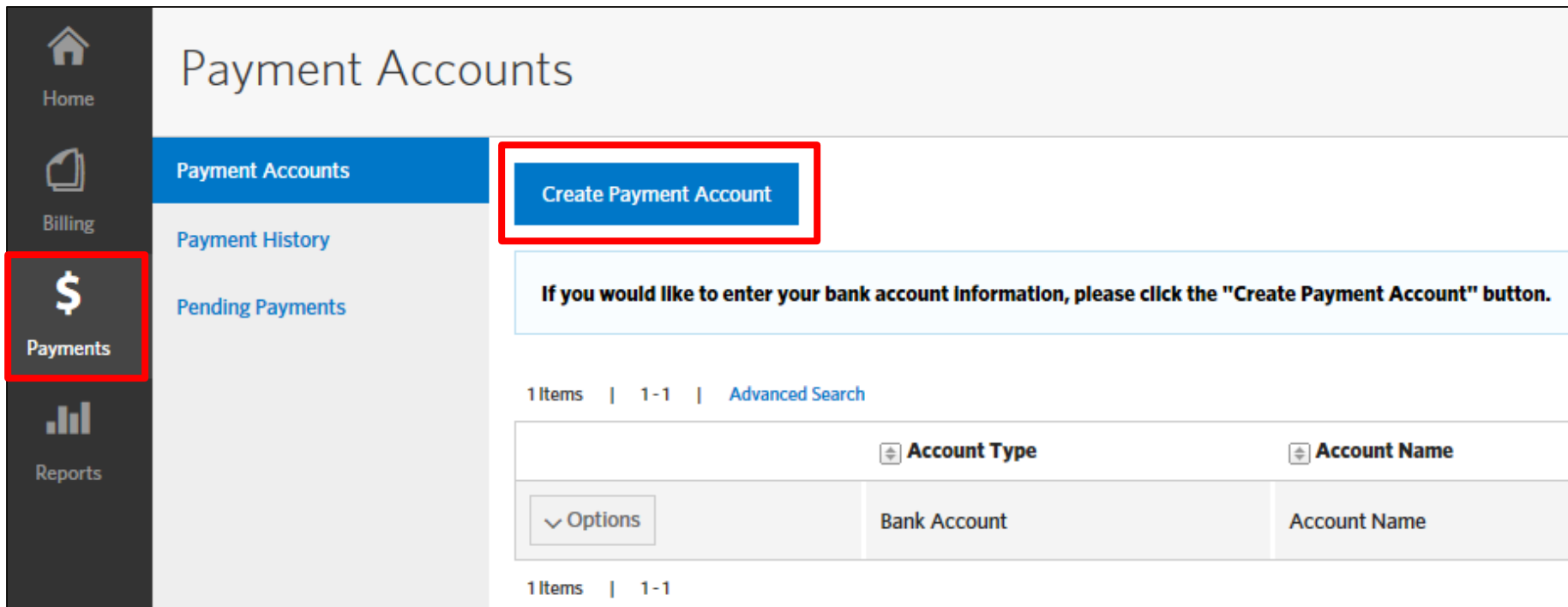
(including how to enable Auto-Draft)



Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross and Blue Shield Association and incorporated as Louisiana Health Service & Indemnity Company.

Create Payment Account

- Group leaders have the ability to create payment accounts by going to the 'Payments' tab and clicking [Create Payment Account](#).



The screenshot displays the 'Payment Accounts' page in the eBilling system. The left sidebar contains navigation options: Home, Billing, Payments (highlighted with a red box), and Reports. The main content area is titled 'Payment Accounts' and features a sub-menu with 'Payment Accounts' (highlighted), 'Payment History', and 'Pending Payments'. A blue button labeled 'Create Payment Account' is highlighted with a red box. Below this button, a message states: 'If you would like to enter your bank account information, please click the "Create Payment Account" button.' A table below the message shows one item with columns for 'Account Type' (Bank Account) and 'Account Name' (Account Name). The table also includes a 'Options' dropdown and pagination information (1 Items | 1-1 | Advanced Search).

Create Payment Account (cont.)

- Group Leaders enter bank account information and may elect to make the account the default payment account.
- Under Account Options you may also elect to restrict the account so only you can view or make changes to it.
 - *If elected, this option will not allow anyone else to see or use the account to make a payment.*

Bank Account Information

Please allow 5 days prior to payment due date for auto payments. This account must be saved as a one-time payment for full amount due. Auto-draft will not occur until the next invoice due date.

Account Name *

Bank Name *

City

State / Province

Country Code

Account Type: Checking

Account Holder *

Routing Number *

Account Number *

Confirm Account Number *

Account Options

Make this my default payment account

Only I can view/edit/use this account for payment

Next Cancel

Create Payment Account (cont.)

- Group Leaders may elect to enable **Auto-Draft**, a recurring payment that happens each month on the due date (1st or 15th), by checking the box.
- Once enabled, **Auto-Draft** will begin on the next due date (see Important information below).
 - If **Auto-Draft** is enabled on the due date, prior to 4:00 pm CST, the first draft will occur that day.
 - If **Auto-Draft** is enabled on the due date, after 4:00 pm CST, the first draft will occur the next day.
- Click **Save** to complete creation of your payment account.

Auto-Draft

As a convenience to me, I authorize Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. to charge my checking or savings account a one-time payment or monthly recurring payments at the Bank (or other financial institution) I have named. I also authorize the Bank to debit the amount of those charges to my account.

I understand and agree that:

1. The Bank's rights with respect to each charge will be the same as if personally executed by me.
2. This authorization will remain in effect until I change my election. I will allow Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. thirty (30) days to act on this notice.
3. Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. and my bank may discontinue this service.
4. I understand that if any such check is dishonored by my Bank and any monthly amount due Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. is not paid within the time stipulated in the policy, the policy could be terminated as provided in the policy.
5. I understand that if my due date falls on a holiday or weekend (non-business day), my draft will occur the business day prior to my due date.
6. **To un-enroll in auto-draft, please un-check the box to stop auto-draft.**

Auto-Draft Authorization Date: 08/07/2018 04:25:12 PM EST

Save Cancel

*Important

If a payment has been made against the current invoice (you make a one-time payment for prior month only) Auto-Draft will not begin until the next month's due date.

Create Payment Account (cont.)

- Group leaders may disable **Auto-Draft** at any time by going to the 'Payments' tab, clicking on Payment Accounts and selecting the account with **Auto-Draft** enabled.
- Click on Options and select View/Edit Account from the drop-down menu.

1 Items | 1-1 | [Advanced Search](#)

	Account Type	Account Name	Status	Default	Auto-Draft Enabled
<div>Options</div> <ul style="list-style-type: none">View/Edit AccountDelete Account	Bank Account	Account Name	Enabled	*	Yes

- Disable **Auto-Draft** by un-checking the box in the **Auto-Draft** section.
- If **Auto-Draft** is disabled on the due date, prior to 4:00 pm CST, the draft will not occur.
- Click **Save** to complete changes made to your payment account.

Auto-Draft

As a convenience to me, I authorize Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. to charge my checking or savings account a one-time payment or monthly recurring payments at the Bank (or other financial institution) I have named. I also authorize the Bank to debit the amount of those charges to my account.

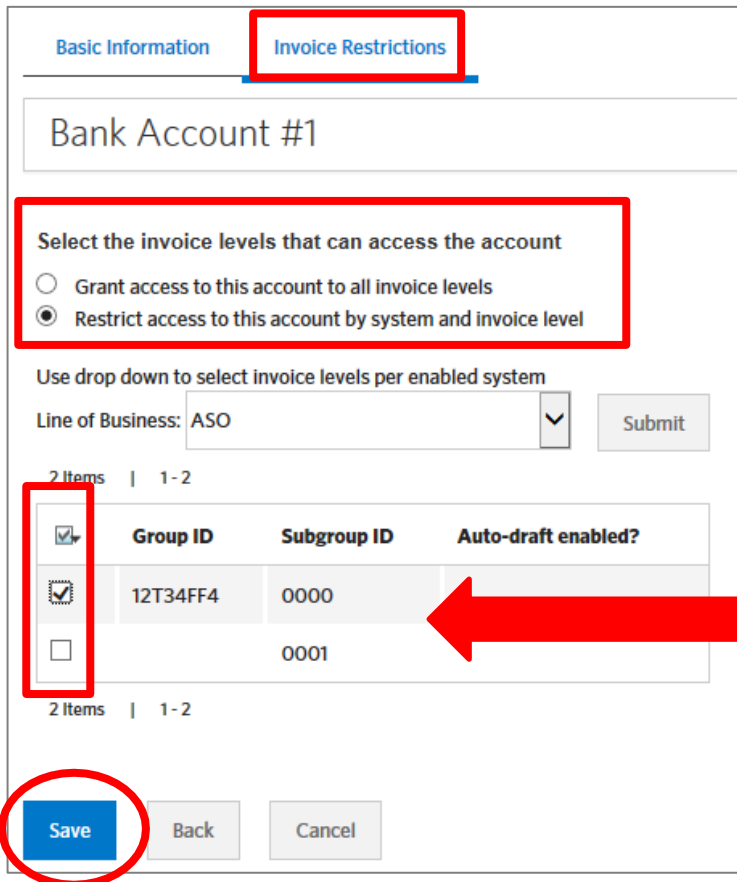
I understand and agree that:

1. The Bank's rights with respect to each charge will be the same as if personally executed by me.
2. This authorization will remain in effect until I change my election. I will allow Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. thirty (30) days to act on this notice.
3. Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. and my bank may discontinue this service.
4. I understand that if any such check is dishonored by my Bank and any monthly amount due Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. is not paid within the time stipulated in the policy, the policy could be terminated as provided in the policy.
5. I understand that if my due date falls on a holiday or weekend (non-business day), my draft will occur the business day prior to my due date.
6. **To un-enroll in auto-draft, please un-check the box to stop auto-draft.**

Auto-Draft Cancellation Date: 08/08/2018 03:54:52 PM EST

Create Payment Account (cont.)

- If the group has multiple subgroups, bank accounts can be made available to all subgroups for payment or restricted to certain subgroups* by clicking on Invoice Restrictions (only visible if group has multiple subgroups).
- Group leaders must click **Save** once selections are made.



Basic Information **Invoice Restrictions**

Bank Account #1

Select the invoice levels that can access the account

Grant access to this account to all invoice levels

Restrict access to this account by system and invoice level

Use drop down to select invoice levels per enabled system

Line of Business: ASO

2 Items | 1 - 2

<input checked="" type="checkbox"/>	Group ID	Subgroup ID	Auto-draft enabled?
<input checked="" type="checkbox"/>	12T34FF4	0000	
<input type="checkbox"/>		0001	

2 Items | 1 - 2

Save

*If a subgroup is added after setting up the bank account, go to Invoice Restrictions and select the additional subgroup to be paid with that account.

Make a Payment



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Make a Payment

- Click **Make a Payment** and choose method of payment* then click **Next**.

Choose payment method

How would you like to make a payment?

Make online payment

Print payment stub to send in the mail

Next Back

**If paying by check select Print payment stub to send in the mail*

- If you have a bank account saved already, the next screen will ask if you want to use the saved bank account or create a new one.

Choose payment account

You have these accounts on file. Do you want to use one of your preexisting accounts or would you like to add another account?

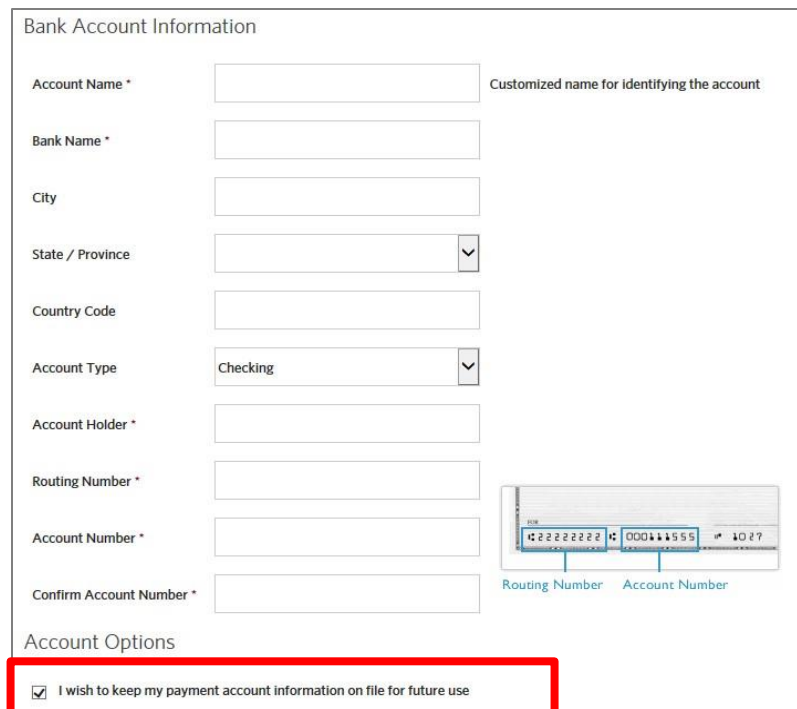
I'd like to use : Bank #1 [edit account info](#)

Create New Account

Next Back

Make a Payment (cont.)

- If you choose to create a new account, you will need to enter your bank information then click **Next**.



Bank Account Information

Account Name * Customized name for identifying the account

Bank Name *

City

State / Province ▼

Country Code

Account Type ▼

Account Holder *

Routing Number *

Account Number *

Confirm Account Number *

Account Options

I wish to keep my payment account information on file for future use

- You may also elect to save bank account information by checking the box under Account Options.

Please Note: You cannot pay an amount due from multiple accounts. An amount due can be paid using only one (1) account.

Make a Payment (cont.)

- You will have the option to pay the Outstanding Balance (prior month) or the Total Amount Due, if applicable.


Choose amount

Paying with: Bank #1 [change account](#)

Please choose from the following payment options:

Pay Outstanding Balance \$0.00

Pay Amount Due \$3,369.09


Date of Payment 

All payments made **after 4:00 PM CST** will be sent to the bank on the following business day.

[Next](#) [Back](#)

- Payments made by 4:00 pm CST will be sent to the bank the same day.

Make a Payment (cont.)

- Check the box to authorize payment. You also have the ability to print the screen. Click  .

Confirm Information

Payment Account: Bank #1 [change account](#)
Amount of Payment: \$3,369.09 [edit payment amount](#)
Payment Date: 02/20/2018 [change payment date](#)
[Review invoice payment information details](#)

Payment Authorization

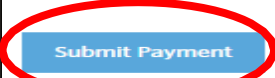
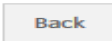
As a convenience to me, I authorize Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. to charge my account a one-time payment or monthly recurring payments at the Bank (or other financial institution) I have named. I also authorize the Bank to debit the amount of those charges to my account. I understand and agree that:

1. The Bank's rights with respect to each charge will be the same as if personally executed by me.
2. This authorization will remain in effect until I change my election. I will allow Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. thirty (30) days to act on this notice.
3. Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. and my bank (or other financial institution) may discontinue this service.
4. I understand that if any such check is dishonored by my Bank (or other financial institution) and any monthly amount due Blue Cross and Blue Shield of Louisiana and its affiliate, HMO Louisiana, Inc. is not paid within the time stipulated in the policy, the policy could be terminated as provided in the policy.

Authorization Date:

Please [print](#) this screen for your records


All payments made **after 4:00 PM CST** will be sent to the bank on the following business day.

Make a Payment (cont.)

- You will receive a confirmation screen and have the ability to print this screen.

Payment Results



Thank You!

Payment Complete.

Your payment has been successfully submitted. Please allow 2-3 business days for your payment to be processed. The information presented is subject to final verification and validation and receipt of any payments previously submitted. If you have any problems viewing your information, you can call customer support at 855-236-2885 from 8:30 am to 5:30 pm CT Monday - Friday.

Your tracking number is **31799652**

Account Name: Bank #1
Payment Date*: 02/20/2018
Total Amount Paid: \$3,369.09

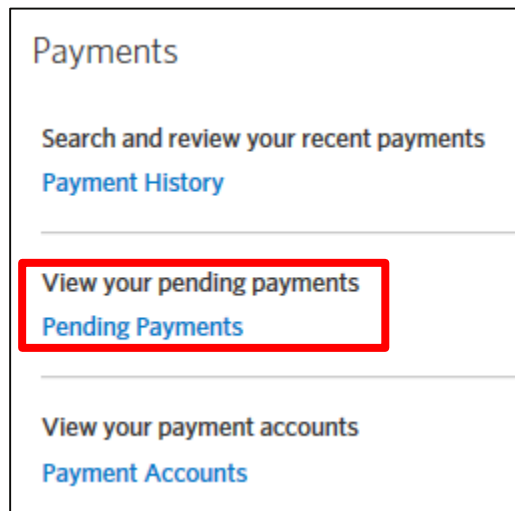
Please [print](#) this screen for your records

[Review invoice payment information details](#)

[Return to Home](#)

Pending Payments

- Group leaders can view scheduled payments by going to Pending Payments* on the right side of the Home screen



- Payments will show as pending until 4:00 pm CST on the payment date.

**If you have Auto-Draft enabled, your monthly draft will not show as a Pending Payment until 12:00 am on the day it is due to draft.*

Cancel a Pending Payment

- Group leaders can cancel a scheduled payment by
 - Click Pending Payments on the right side of the Home screen
 - Select Cancel Payment from the Options drop down

Group ID	Subgroup ID	Billing Period	Invoice Number	Due Date	Billing Date	Total Amount Due	Payment Status	
<input type="button" value="Options"/>	12T34FF4	0000	03/01/2018-03/31/2018	123470018888	03/01/2018	02/21/2018	\$3,369.09	Payment Pending
Cancel Payment			03/01/2018-03/31/2018	123470008888	03/01/2018	02/21/2018	\$3,369.09	Payment Pending

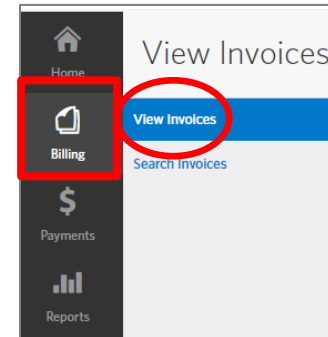
Search for Previous Invoice



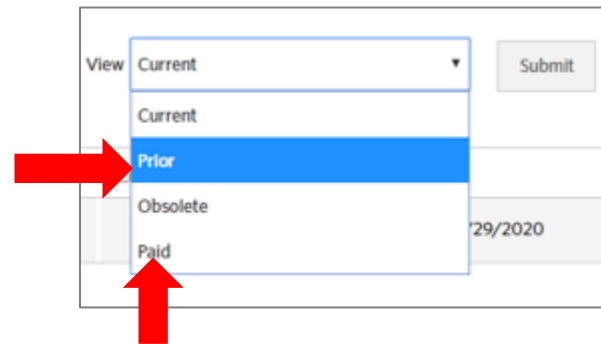
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Search for Previous Invoice

- Go to the Billing tab then View Invoices



- Select either Prior or Paid from the View drop-down, then Submit



Prior invoices are those that do not have a payment applied to them and the next month's invoice has generated.

Paid invoices are those that have payments applied to them.

Obsolete invoices are those that were replaced with another invoice for the same period (referred to as a rebill). Group leaders cannot view obsolete invoices.

Search for Previous Invoice (cont.)

- On the next screen, locate the invoice you want to view by Billing Period, Billing Date (date invoice generated), Amount Due or Due Date.

2 Items | 1-2

	Group Level	Subgroup ID	Billing Period	Invoice Number	Billing Date	Due Date	Total Amount Due
Options	+ 43T21FF4		02/01/2018-02/28/2018		02/09/2018	02/01/2018	\$10,088.67
Options	+ 43T21FF4		03/01/2018-03/31/2018		02/21/2018	03/01/2018	\$20,177.34

2 Items | 1-2

View Invoice

Print invoice

- You can elect to view or print the selected invoice.

Print Invoice



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Print Invoice

- On the Home screen, click **Print Invoices**.
- You can print to PDF, Excel (CSV) or HTML.
- The following will result in a close approximation of the paper invoice (as shown on next slide).
 - Sort By Last Name, Then By Subscriber ID for both Current Premiums and Employee Adjustments
 - Subtotal by Subscriber ID

Print Options

What format would you like for this report? PDF

There are 2 invoices selected to print. [select invoices](#)
Choose the invoice sections to include in this report:

Summary

Please Pay

Current Premiums

Employee Adjustments

Sort By	Last Name	Order	Ascending	<input type="checkbox"/>	Subtotal by sorted column
Then By	Subscriber I	Order	Ascending	<input checked="" type="checkbox"/>	Subtotal by sorted column
Sort By	Last Name	Order	Ascending	<input type="checkbox"/>	Subtotal by sorted column
Then By	Subscriber I	Order	Ascending	<input checked="" type="checkbox"/>	Subtotal by sorted column



Name	TEST GROUP	Group ID:	12T34FF4	Invoice Period From:	03/01/2018
Address	ATTN: SUPER WOMAN	Subgroup ID:	0000	Invoice Period Through:	03/31/2018
	P O BOX 1234	Due Date:	03/01/2018	Invoice Number:	123470018888
	HAMMOND LA 70404	Billing Date:	02/21/2018	Subscriber Count:	9

Current Premiums												
Class	Last Name	First Name	MI	Subscriber ID	SSN	Product	Amount*	Employer Share	Employee Share	Adjustment	Premium	Total Premium
A001	CAKE	KING	R	200022222		AD&D	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.60	\$0.60
A001	CAKE	KING	R	200022222		Group Care	\$0.00	\$0.00	\$0.00	\$0.00	\$1,119.03	\$1,119.03
A001	CAKE	KING	R	200022222		GTL	\$10,000.00	\$0.00	\$0.00	\$0.00	\$3.40	\$3.40
Subtotal for Subscriber ID 200022222							\$20,000.00	\$0.00	\$0.00	\$0.00	\$1,123.03	\$1,123.03
A001	TIME	VACTION	J	200033333		AD&D	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.60	\$0.60
A001	TIME	VACTION	J	200033333		Group Care	\$0.00	\$0.00	\$0.00	\$0.00	\$2,517.72	\$2,517.72
A001	TIME	VACTION	J	200033333		GTL	\$10,000.00	\$0.00	\$0.00	\$0.00	\$3.40	\$3.40
Subtotal for Subscriber ID 200033333							\$20,000.00	\$0.00	\$0.00	\$0.00	\$2,521.72	\$2,521.72
A001	WHITE	SNOW		200011111		AD&D	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.60	\$0.60
A001	WHITE	SNOW		200011111		Group Care	\$0.00	\$0.00	\$0.00	(\$1,398.69)	\$1,119.03	(\$279.66)
A001	WHITE	SNOW		200011111		GTL	\$10,000.00	\$0.00	\$0.00	\$0.00	\$3.40	\$3.40
Subtotal for Subscriber ID 200011111							\$20,000.00	\$0.00	\$0.00	(\$1,398.69)	\$1,122.03	(\$276.26)

Contact Information



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	eEnrollment	eBilling
Access	<p>Blue Cross Service Desk: (225) 298-7567, Option 3 (800) 258-3005, Option 3 eBusinessServiceDesk@bcbsla.com</p>	<p>Blue Cross Service Desk: (225) 298-7567, Option 3 (800) 258-3005, Option 3 eBusinessServiceDesk@bcbsla.com</p>
Navigation	<p>Announcements Section on Home Screen: Link to training registration page, this User Guide, Quick Tips and other resource materials</p> <p>eEnrollment Resources Tab: Benefits Administrator Role Training Videos Benefits Administrator Role user Guide 2018_4 Benefitfocus Benefits Administrator Quick Tips</p> <p>eEnrollment Help Line: 843-375-4967 (authentication required)</p>	<p>Carrier Resources Section on Home Screen: Link to User Guide, Quick tips and other helpful resources</p> <p>Online Billing Help Line: 855-236-2885 (authentication required)</p>
Training	<p>Click here to register for a live, online training.</p> <p>You can also register by clicking the link found in the Announcements section of your group's Home screen.</p>	<p>Click here to register for a live, online training.</p> <p>You can also register by clicking the link found in the Carrier Resources section of your group's Home screen.</p>