



North Carolina
State Health Plan

FOR TEACHERS AND STATE EMPLOYEES

A Division of the Department of State Treasurer



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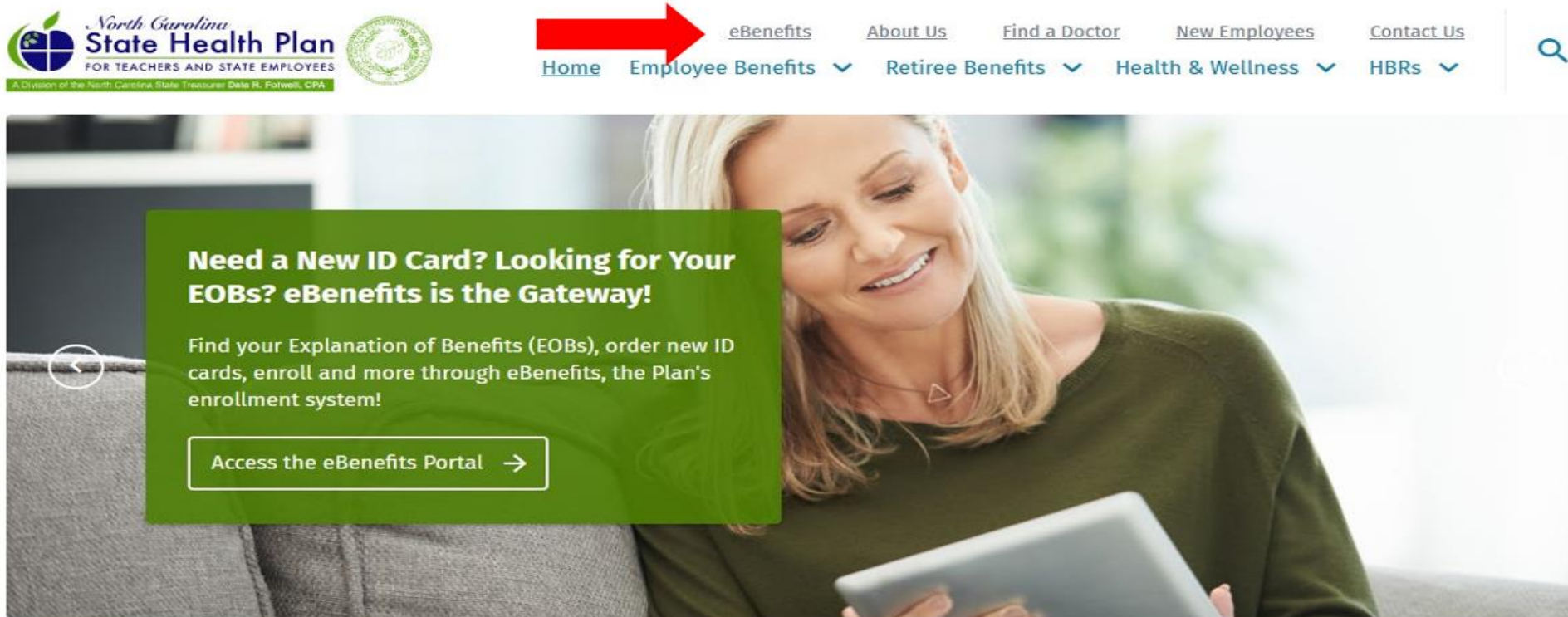


Step-by-Step Enrollment Instructions

A Division of the Department of State Treasurer

State Health Plan Website

- Once your Health Benefits Representative has created a personal record for you in the eBenefits system, go to the State Health Plan's website at www.shpnc.org and click eBenefits located at the top center on the home screen.



eBenefits

 **eBenefits** is the Gateway to your Enrollment

To log into eBenefits, click the gold button for YOUR enrollment system. If your employer is not listed, select the gold "eBenefits" button or contact your HR representative for assistance.

Once you're logged into eBenefits, you can enroll, make changes and access your benefit information through Blue Connect, where you can find your EOBs and order new ID cards.

Click Here!



Access Your Benefits via eBenefits

Login to eBenefits, the State Health Plan's



Retirees Using the ORBIT System

Login to eBenefits through ORBIT



Employees Using the BEACON System

Login to eBenefits through BEACON



Employees of the University of North Carolina and Constituent

Enter your Username and Password



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Login ID: Your **first** name, the **first initial** of your **last** name and the last 4 digits of your Social Security number. Initial Password: Your Social Security number without spaces or dashes.

• Example for employee John Doe with SSN 111-22-3333: Login ID is JohnD3333 and Password is 111223333.

* If you have transferred from another agency and already had an account in eBenefits, Login ID: Your **last** name, the **first initial** of your **first** name and the last 4 digits of your SSN without spaces or dashes.

Log in to your account

Username*

Password*

[Reset your Account](#)
Technical Questions?

Changing Your Password

- You will be prompted to change your password as soon as you log in.
- After you select **Save**, you will also be asked to select your secret questions and answers.
- Select **Save** again and **Next**.

Your Account

Change your username, password and secret questions.

Username

Current username

OCT333

Edit

Password

New password *

Confirm new password *

Save

Cancel



Your Password must contain 8-15 characters, at least 1 number, and at least 1 upper case and 1 lower case letter. Your password cannot contain more than 2 of the same characters in a row or your Login ID.

Secret questions

Edit

Getting Started

- When you have arrived at the Member Home Page at login, you will be able to get started on your enrollment. Just follow the prompts in this slide and the ones that follow.

The screenshot displays the Member Home Page interface. On the left is a navigation sidebar with links for Home, Dependents, Language Preferences, Manage Account (with sub-links for Login Information, Medicare, and Select or Update Primary Care Provider), and My Docs (with sub-links for View Tax Documents and Document Center). The main content area features a dark blue header, followed by a white box titled "Important Messages for You" containing a warning icon and the text "You have new benefits being offered to you." Below this is a message: "You have 30 days to elect your Current Enrollment benefits." A yellow "Get started >" button is highlighted with a green callout box that says "Click Get Started". Below this is another white box titled "Do you need to update your PCP?" with the instruction: "Click the 'Select or Update Primary Care Provider' link under Manage Account." The footer is green and contains copyright information, a "Questions?" link with a phone number, and operating hours.

Adding Dependents

- You will be asked if you want to list any dependents. Either select **ADD DEPENDENT** and follow the instructions on the screen to add a dependent or **Next** if no dependent.

The screenshot shows a three-step enrollment process: Profile, Shop for benefits, and Confirm & Finish. The 'Profile' step is active. The main heading is 'Before you enroll in benefits' with the question 'Do you need to add any dependents to your profile?'. A light blue note box states: 'Note: You'll also be able to add dependents and select who you want to cover when you enroll in or edit your benefits.' Below the note are three buttons: 'Add Dependent', 'Next', and 'Previous'. The 'Next' button is highlighted in orange. A green callout box with a pointer to the 'Next' button contains the text 'Click Next'.

Begin Enrollment

Profile Shop for benefits Confirm & Finish

Current Benefits

You have incomplete benefits. Please check the steps below to make sure you have completed all the steps in the enrollment process.

Your benefits

1. Choose your Medical coverage

**Click
Begin
Enrollment**

Select Your Plan

Profile Shop for benefits Confirm & Finish

Choose your Medical plan.
Please review your options and choose the plan that best meets your needs.

Who do you want to cover on this plan?
Add Dependent

70/30 PPO Plan **\$85.00**
Monthly Cost

Please click Select plan to enroll.

Benefit Year Deductible	\$1,080 Individual/\$3,240 Family
Office Visit Copay	\$40 Copay
Preventive Care	\$40 Copay
Specialist Visit Copay	\$94 Copay

Select plan Plan details

80/20 PPO Plan **\$110.00**
Monthly Cost

Please click Select plan to enroll.

Benefit Year Deductible	\$1,250 Individual/\$3,750 Family
Office Visit Copay	\$25, \$10 if you use PCP on ID card
Preventive Care	\$0 Copay
Specialist Visit Copay	\$80 Copay

Select plan Plan details

Decline Coverage I would like to decline Medical coverage.

Previous Cancel

Select desired plan.

Tobacco Attestation Premium Credit

Click **Tobacco User Attestation** and select the appropriate answer. Then click **Next**.

Profile Shop for benefits Confirm & Finish

Premium credits

> **Tobacco Attestation (Worth \$60 Premium Credit)** \$60.00 per month

I attest that I am **NOT** a tobacco user, or if I am a tobacco user, I agree to visit a **CVS Minute Clinic** for at least one tobacco cessation counseling session. (Please note: You may lose your individual \$60 monthly premium credit if you do not visit a **CVS Minute Clinic** 90 days after the last day of **Open Enrollment** or from your initial enrollment date.) As part of this attestation, I understand that making a false statement, representation or attestation could result in my termination from **State Health Plan** coverage. I also agree to cooperate with the **Plan** in any efforts to verify my tobacco status.

Select the appropriate response below:

- I am **NOT** a tobacco user
- I **AM** a tobacco user, **BUT** I agree to visit a **CVS Minute Clinic** for at least one tobacco cessation counseling session within 90 days after the last day of **Open Enrollment** or from my initial enrollment date.
- I **AM** a tobacco user

Next Previous Cancel

Make selection and Click **Next**

PCP Selection

Profile Shop for benefits Confirm & Finish

Medical

Search from the list of providers to enter your PCP (Primary Care Provider) information.

		PCP Name
<input type="text"/>	<input type="button" value="Search"/>	<input type="text"/>

Select PCP if desired and click Next.

Additional Insurance

Profile Shop for benefits

Additional Insurance

Currently, do any of the persons covered for this benefit including yourself have other health insurance?

Yes
 No

Please Note:
It is very important to enter your and/or your covered dependents' insurance policies. By providing this information, you will ensure that the claims for you and your covered dependents will be processed timely and accurately.

Additional insurance information should NOT be supplied on non-medical policies such as Dental, Vision, Life, Cancer or Medicaid. You do not need to provide information on policies you have previously had with other State Health Plan agencies. Additional insurance information is used to coordinate benefits if you or your dependents have other medical coverage in addition to the State Health Plan, which will continue after you are enrolled in the State Health Plan.

Next Previous Cancel

Select **Yes** and enter other insurance if applicable and click **Next**.

Medical Summary Page

The screenshot shows the '2019 SHP Medical Summary' page. At the top, there are navigation tabs: 'Profile', 'Shop for benefits', and 'Confirm & Finish'. Below the title, a message states: 'Your 2019 SHP Medical benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.'

The main content area is divided into several sections:

- Medical 80/20 PPO Plan:** Includes details like 'Offered By: Blue Cross and Blue Shield of North Carolina', 'Effective Date: 01/01/2019', 'You Pay: \$50.00 per month', and 'Persons Covered: SHP OE0007'. It has an 'Edit' link next to 'Premium credits'.
- Medicare:** States 'No policy on record' and 'No medicare policy information on record'.
- Additional Insurance:** States 'No policy on record' and 'No additional insurance policy information on record'. It has an 'Edit' link.
- Primary Care Provider:** Has an 'Edit' link.

At the bottom left, there is a 'Save' button. On the right side, there is a 'Cost Summary' section with a table of benefit elections and a 'You Pay' summary table.


Four callout boxes with green backgrounds and black text provide instructions:

- One points to the 'Edit' link next to 'Premium credits' with the text: 'Click **Edit** to modify tobacco survey answer if you need to.'
- Another points to the 'Edit' link next to 'Additional Insurance' with the text: 'Click **Edit** to update additional insurance if you need to.'
- A third points to the 'Edit' link next to 'Primary Care Provider' with the text: 'Click **Edit** to add a Primary Care Provider if you need to.'
- The fourth points to the 'Save' button with the text: 'Click **Save**'.

Other options to edit Premium Credit, Additional Insurance and Primary Care Provider (PCP) will follow. Remember, if you enroll in the 80/20 Plan and visit your PCP, you can receive a copay reduction.

Review Elections and Select Save!


Your benefits

 **1. Your Medical coverage**
Visit the Plan's website at www.shpnc.org for more information about your plan options!

80/20 PPO Plan **\$50.00**
per month

Offered By: Blue Cross and Blue Shield of North Carolina
Effective Date: 01/01/2019
Persons Covered:

Click "Complete Enrollment" to complete enrollment process

 **The choices you pick
Will NOT stick
Unless you SAVE them
With a CLICK!**

Confirmation Page

Home
Profile
Benefits
Dependents
Language Preferences

Manage Account
Login Information
Medicare
Select or Update Primary Care Provider

My Docs

✓ **Congratulations, [redacted]!** You have successfully completed your enrollment process.
Your confirmation number is: 1788600897-5dq951. Please review and print your Confirmation Statement for your records.

Welcome,
[Get Started >](#)

Benefits Snapshot

Medical
80/20 PPO Plan | Employee Only | Effective as of 01/01/2019

\$50.00
Monthly

Do you need to update your PCP?
Click the "Select or Update Primary Care Provider" link under Manage Account.

Click to view and print Confirmation Statement

Confirmation statement example.

Date Printed: 07/13/2018

Confirmation Statement

NC, USA 28304

Home Phone:

Employing Unit Assigned ID
Date of Hire: 08/16/2001
Gender: Male
Marital Status: Married

Open Enrollment Elections Monthly Subscriber Costs: \$50.00

Relationship: Subscriber | Date of Birth: [redacted]

✓ **80/20 PPO Plan** Employee Only Effective: 01/01/2019
Monthly Cost \$50.00 *