

# **Employer Portal User Guide**

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## Introduction

This guide covers the Employer portal features for Groups and their staff.

We have implemented this Employer Web Portal to give our Groups the ability to conduct online activities.

The Employer Portal allows you to perform the following tasks:

- Search member eligibility
- Enroll, update, and terminate members online
- Perform secure, private, and safe transactions
- View specific subgroup information you have been given user rights to
- Search for a Dentist

This guide walks you through these tasks and shows you how to conduct them.

## User Account and Group Overview

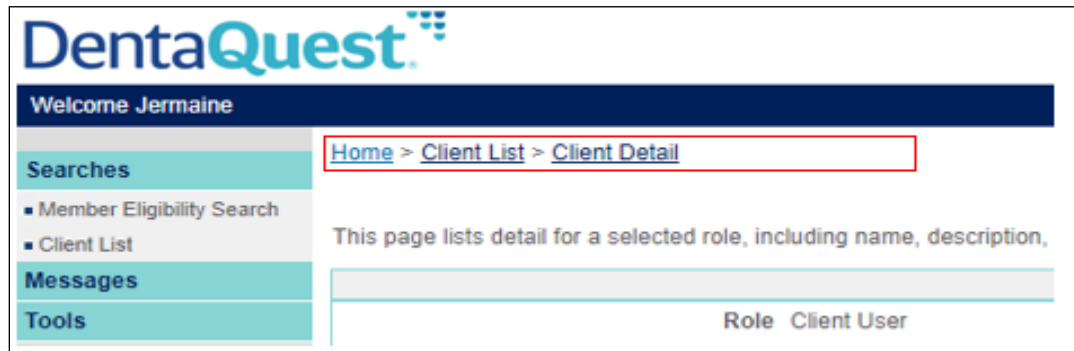
These are the user accounts security roles. The type of user account determines what functions can be performed:

User Role	Add/Change Members	View Invoice	Payment	Add Additional Users	Reset A User's Password
Client User	X				
Client Super User	X	X	X	X	X
Client User and Invoice View	X	X			
Invoice and Online Payment Only		X	X		
Invoice View Only		X			
View Only	View Member Eligibility Listing Only	X			

## Breadcrumb Trail

The breadcrumb trail in the upper-left corner of your page lists all the previous pages that you have navigated through to reach the current page. Use the breadcrumb trail to return to any previous page by clicking the link for the page to which you want to return.

**Warning:** Do not use your browser's Back button. The portal does not support the use of a browser's back button, which is why the breadcrumb trail is available for you to return to a previous page.



## Web Portal Login Page

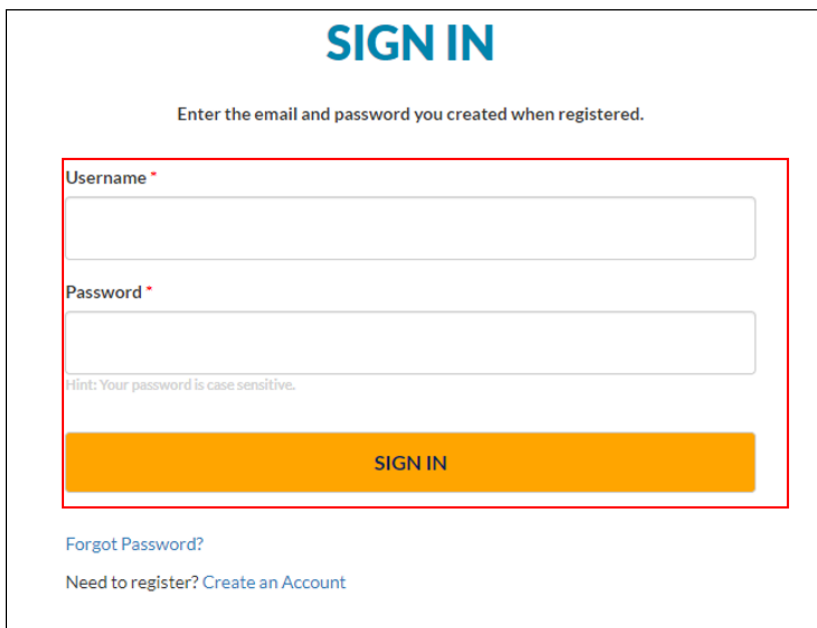
The Login Page allows you to login to the Employer Portal.

### Logging into Your Portal:

Use your web browser to navigate to <https://connectsso.dentaquest.com/dqclientportal/index.html>

On the portal login page that appears, enter your username in the **User ID** field, your password in the **Password** field, and then click the **Login** button.

**Note:** If you do not have or remember your password, you can request your password. See “**Forgot Password**”.



**SIGN IN**

Enter the email and password you created when registered.

Username \*

Password \*

Hint: Your password is case sensitive.

**SIGN IN**

[Forgot Password?](#)

[Need to register? Create an Account](#)

1. This first time you log on, you are prompted to enter a password and set your security questions.

#### Password Rules:

- At least 10 characters
- 1 Uppercase Letter
- 1 Lowercase Letter
- 1 Special Character
- A number

**Note:** You cannot use the following special characters: (; \ { } [ ] “ % ~)

- You cannot use any of your last ten passwords.
2. Type the password into the **Password** field.
  3. Type the same password into the **Confirm Password** field.
  4. Select your security questions and enter your responses.

5. Click **Submit**.

The first screenshot shows the 'SECURE YOUR ACCOUNT' form. It has a title 'SECURE YOUR ACCOUNT' in blue. Below it are three input fields: 'Username' with the value 'gford', 'Create Password \*' with masked characters, and 'Confirm Password \*' with masked characters. A note below the password fields states: 'Use at least eight characters. The password should include one uppercase letter, one lowercase letter and one number.'

The second screenshot shows the 'Security Questions' form. It has a title 'Security Questions' and a paragraph: 'These security questions will help use verify your identify when you need to access your account or change your password. Choose questions with answers you can easily remember.' There are three identical question sets. Each set consists of a dropdown menu for the question (currently showing 'What is your favorite childhood stuffed animal') and a text input field for the answer. At the bottom is an orange 'Next' button.

## 6. Security questions rules

- You have to pick 3 different security questions
- The answers to the questions need to be different
- The answer cannot contain a word from the question

7. The first time you log in, you are prompted to accept the **Terms of Use**:

- Click the Next button.  
Your Home page appears after a successful login.

reference to its conflicts or choice of law provisions.

When you, on behalf of the Group, click "Yes, I agree with the terms and conditions of the DeltaQuest Group Web Portal" below, the time and date of your agreement will be recorded as the effective date of this Agreement between you and DeltaQuest.

The Group's access to the Web Portal is conditioned upon agreement with the terms and conditions of the Web Portal.

In order to continue, you must agree with the statement.

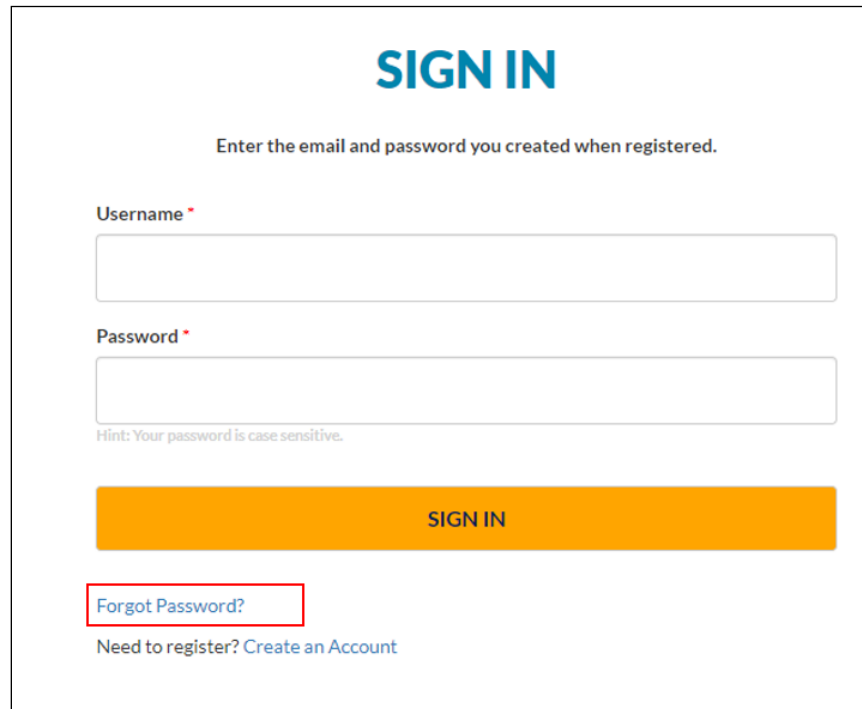
☐ Yes, I agree with the statement ☐ No, I do not agree with the statement

## Forgot Password

If you do not know your password, you can request it by clicking the **Forgot Password?** link.

### Retrieve Your Password

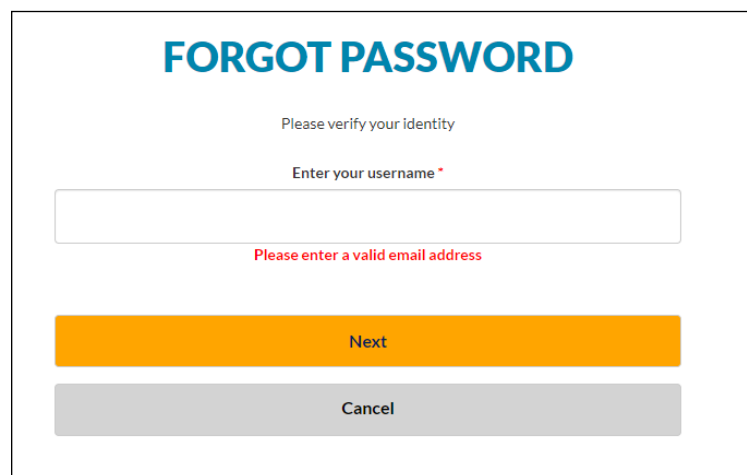
1. Click the **Forgot Password?** link below the **Login** button on the left side of the page.



The screenshot shows the 'SIGN IN' page. At the top, the text 'SIGN IN' is displayed in large blue letters. Below it, a subtitle reads 'Enter the email and password you created when registered.' There are two input fields: 'Username \*' and 'Password \*'. Below the password field is a hint: 'Hint: Your password is case sensitive.' A large orange button labeled 'SIGN IN' is positioned below the fields. At the bottom left, the link 'Forgot Password?' is highlighted with a red rectangle. Below this link is the text 'Need to register? [Create an Account](#)'.

The **FORGOT PASSWORD** page appears.

2. Type your User ID (Username) into the **User ID** field.
3. Click **Next**.



The screenshot shows the 'FORGOT PASSWORD' page. At the top, the text 'FORGOT PASSWORD' is displayed in large blue letters. Below it, a subtitle reads 'Please verify your identity'. There is an input field labeled 'Enter your username \*'. Below this field is a red error message: 'Please enter a valid email address'. At the bottom, there are two buttons: an orange button labeled 'Next' and a gray button labeled 'Cancel'.



If prompted, Enter the following...

1. Type your User ID (Username) into the **User ID** field.
2. Type your last name into the **User Last Name** field.
3. Type your first name into the **User First Name** field.
4. Click the **Next** button.
5. If **Username**, **User Last Name**, and **First Name** match the records, the **Request Password Response** page appears.
6. Click Submit.
  - If this does not work or you do not know your User ID, you need to contact The Dental Care Plus Group, a DentaQuest company to have your password reset.

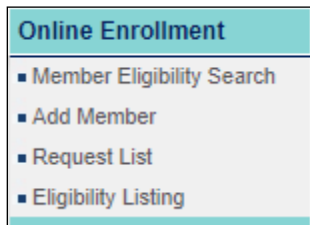
## Portal Menus

The Portal Menus are where you access the functional areas of the portal:

- Administration
  - This menu only displays if you are a Super User. It allows you access to add and maintain other users for your group.
- Online Enrollment
  - This menu allows you to access the Member Enrollment page, where you can add employees to your group or make changes to existing members on the plan.
    - Member Eligibility Search – search for a member to view their eligibility or add and maintain the enrollment record.
    - Add Member – search for a member to add/update member eligibility.
    - Request List – view the transactions you submitted through online enrollment.
    - Eligibility Listing – view the status of a members request for coverage.
- Billing & Payment: view or pay invoices.
  - View Invoice: view invoices. You can also pay invoices from here if you have the appropriate security.
  - Pay Invoice: pay invoices and set up recurring payments.
- Tools
  - This menu allows you to access the other available portal tools:
    - User Profile – edit your user account.
    - Request ID card – Request an ID card for a member.

## Online Enrollment Menu

The **Online Enrollment** menu on the left side of the page contains the following menu items:



1. **Member Eligibility Search**

This menu item allows you to search for a member in the specific subgroup(s) you have been given user rights to so you can view their eligibility. Once you find a member you can access the links to update their record. You can also add a new member.

2. **Add Member**

This menu items allows you to add new members



You must always search for the member before you try to add a new member.

3. **Request List**

- This menu item opens the Request List page to view the transactions you submitted through online enrollment.

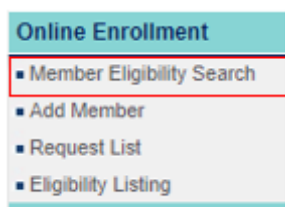
4. **Eligibility Listing**

- This menu item allows you to view a complete list of members (and dependents) in the specific subgroup(s) you have been given user rights.

## Performing a Member Eligibility Search

You can perform an eligibility check on members in any subgroup where you have user rights.

1. Click the **Online Enrollment > Member Eligibility Search** menu item from the Portal Menus on the left side of the page to display the **Member Eligibility Search** page.



2. Enter the member or dependent for whom you want to perform an eligibility search:
  - You must enter either:
    - The DOB (date of birth) or select it from the pop-up calendar in the **DOB** field **or**
    - The Social Security number in the **SSN** field.
  - You can also enter any of the following fields to narrow down your search results:
    - Enter the service date or select it from the pop-up calendar in the Service Date field, if necessary. The results will default to today's date if a specific date is not entered.
    - The member number in the Member Number field.
    - The member's last name and part of the first name in the Member Last Name and Member First Name fields.
3. Click the **Search** button.

A screenshot of the "Member Eligibility Search" web page. At the top left is a "Home" link. The page title is "Member Eligibility Search". Below the title is a paragraph of instructions: "This functionality will allow you to perform member eligibility checks. To check eligibility, please enter a Service Date, Date of Birth and either Member Number or Member's complete last Name and at least a partial first name. If you feel a member is eligible for service but a check indicates the member is non-eligible or it is a non-participating provider, please contact a service representative. All dates must be entered in the following format: MM/DD/YYYY. Slashes must also be entered. To navigate through the screen, please use the Tab Key, not the Enter Key. Please note this information does not guarantee or imply payment and is contingent upon other factors, including but not limited to eligibility changes, covered services and benefit limitations." Below the text is a form with several input fields: "Service Date" (with a calendar icon and a question mark, containing "03/09/2021"), "Date Of Birth" (with a question mark), "SSN" (with a red asterisk and a question mark), "Member Number" (with a question mark and "(123456)"), "Member First Name" (with a question mark), and "Member Last Name" (with a question mark). At the bottom center of the form is a "Search" button.

The **Member Eligibility List** page appears with the results based on the criteria entered.

There are three sections on this page – the member (subscriber or dependent) will appear in the section that is appropriate for the service date entered:

1. **Active** (Eligible): the coverage is active for the service date entered.
2. **Ineligible** (Not Eligible): the coverage is not active for the service date entered.
3. **Not Found** (Member Not Found): a matching member could not be identified. If you need to enroll the member, proceed to the section **Add a New Member**.

**Note:** This section only appears if one of the members searched for is not found.

The **Member Eligibility List** page contains general member eligibility information. Click **Search Again** to redisplay the **Member Eligibility Search** page and repeat the search process.

Home > Member Eligibility Search

### Member Eligibility List

This page displays the Members meeting the search criteria. You can conduct another search by clicking search again, view Member detail by clicking a Member name link, and print the results by using the Printer Friendly Format button.  
**Please note this information does not guarantee or imply payment and is contingent upon other factors, including but not limited to eligibility changes, covered services and benefit limitations.**

Results are for members who are/were eligible as of 03/09/2021 ?

Download File Printer Friendly Format Add New Member

**Active**

Member Number	Date Of Birth	Member Name	Effective Dates	Subgroup	Benefit	Client Number	Network Name	Paid Through Date	Dentist/Office Name	Dentist Effective Date
No Results Found										

**Ineligible**

Member Number	Date Of Birth	Member Name	Eligibility Effective Date	Eligibility Expiration Date
No Results Found				

**Not Found**

Member Number	Date Of Birth	Member First Name	Member Last Name	Error Message
	09/19/1975			Unable to identify member. You can search again with additional information or contact the health plan.

Note: If you wish to search again, the information you originally entered for these members will be retained allowing you to correct any information you previously entered.

Search Again

## View Member Details

1. Click the **Online Enrollment > Member Eligibility Search** menu item from the Portal Menus, on the left side of the page, to display the **Member Eligibility Search**. Search for the member.



2. On the **Member Eligibility List** page, click a **Member Name** link to display the **Member Detail** page for that member.

Home > Member Eligibility Search

### Member Eligibility List

This page displays the Members meeting the search criteria. You can conduct another search by clicking search again, view Member detail by clicking a Member name link, and print the results by using the Printer Friendly Format button.  
**Please note this information does not guarantee or imply payment and is contingent upon other factors, including but not limited to eligibility changes, covered services and benefit limitations.**

Results are for members who are/were eligible as of 03/09/2021

Download File Printer Friendly Format Add New Member

Active										
Member Number	Date Of Birth	Member Name	Effective Dates	Subgroup	Benefit	Client Number	Network Name	Paid Through Date	Dentist/Office Name	Dentist Effective Date
930062202	01/15/1980	BRUCE GINGER	02/01/2021-	ABC CO High B	Usage	0234560002	OH DCPG DHMO			

Ineligible				
Member Number	Date Of Birth	Member Name	Eligibility Effective Date	Eligibility Expiration Date
No Results Found				

Note: If you wish to search again, the information you originally entered for these members will be retained allowing you to correct any information you previously entered.

Search Again

There are four sections on this page:

1. **Members:**
  - Member Number
  - Date of Birth
  - Gender
  - Student Status Code
  - Address
  - Note: Select the member's name link to view information for any of the dependents.
2. **Eligibility Information:**
  - Subgroup
  - Coverage Level Code
  - Benefit Effective Date
  - Termination Date
  - Paid Through Date (This is for COBRA members only)
  - Print Temporary ID Card
3. **Primary Care Dentist** section – not in use currently.

#### 4. Pending Requests section – not is use currently.

[Home](#) > [Member Eligibility Search](#) > [Member Eligibility List](#)



**Member Detail**

This page displays member-specific information.

Benefit Administrators, select the **Benefit Maintenance** link in order to edit member information, update coverage, add dependents and to access other options.

\*=Required Fields





**Search**

Service Date\*    (MM/DD/YYYY)

Client: **ABC CO High B - 0234560002**

**Members**

Select	Member Name	Relationship	Member Number
<input checked="" type="checkbox"/>	BRUCE GINGER	Self	930062202

BRUCE GINGER  [Benefit Maintenance](#)  [View Benefit Maximums](#)  [View Service History](#)  [View Provider Directory](#)

Member Number 930062202

Date Of Birth 01/15/1980

Gender MALE

Address 8460 BROWNSBORO PL CINCINNATI, OH 45255

[View Eligibility History](#)

**Eligibility Information**

Subgroup	Coverage Level Code	Benefit Effective Date	Termination Date	Paid Through Date	Print Temporary ID Card
<a href="#">ABC CO High B</a>	Enrollee Only	02/01/2021			<a href="#">Print Temporary ID Card</a>

**Primary Care Dentist**

Dentist/Office Name	Provider Type	Network Name	Dentist Effective Date
No Results Found			

**User Account Information**

Confirmation Number	Date Submitted
No Results Found	

[View Requests](#)

## Print Temp ID Card

1. As a client user click on Online Enrollment → Member Eligibility Search → Enter member details

**DentaQuest** Client

Welcome James Home | Ghost Sign Out

**Member Eligibility Search**

This functionality will allow you to perform member eligibility checks. To check eligibility, please enter a Service Date, Date of Birth and either Member Number or Member's complete last Name and at least a partial first name. If you feel a member is eligible for service but a check indicates the member is non-eligible or it is a non-participating provider, please contact a service representative.

All dates must be entered in the following format: MM/DD/YYYY. Slashes must also be entered. To navigate through the screen, please use the Tab Key, not the Enter Key.

Service Date: 03/16/2021 (MM/DD/YYYY)

Date of Birth: (MM/DD/YYYY)

SSN: (123456)

Member Number: (123456)

Member First Name: (123456)

Member Last Name: (123456)

Search

2. From Result screen, click on the name of the member. (Member name becomes URL if eligible/active member)

**DentaQuest** Client

Welcome James Home | Ghost Sign Out

**Member Eligibility List**

This page displays the Members meeting the search criteria. You can conduct another search by clicking search again, view Member detail by clicking a Member name link, and print the results by using the Printer Friendly Format button.

Please note this information does not guarantee or imply payment and is contingent upon other factors, including but not limited to eligibility changes, covered services and benefit limitations.

Results are for members who were eligible as of 03/16/2021

Download File Printer Friendly Format Add New Member

Member Number	Date Of Birth	Member Name	Effective Dates	Subgroup	Benefit Usage	Client Number	Network Name	Paid Through Date	Dentist/Office Name	Dentist Effective Date
		<a href="#">John Doe</a>								

**Ineligible**

Member Number	Date Of Birth	Member Name	Eligibility Effective Date	Eligibility Expiration Date
			No Results Found	

Note: If you wish to search again, the information you originally entered for these members will be retained allowing you to correct any information you previously entered.

Search Again

3. From Member Details page → click on Print Temporary ID Card link (highlighted below)

Client: [Redacted]

**Members**

Select Member Name Relationship Member Number

John Doe Self [Redacted]

Benefit Maintenance View Benefit Maximums View Claims View Service History View Provider Directory

Member Number [Redacted]

Date Of Birth [Redacted]

Gender MALE

Address [Redacted]

**Eligibility Information**

View Eligibility History

Subgroup	Coverage Level Code	Benefit Effective Date	Termination Date	Paid Through Date	Print Temporary ID Card
Enrollee Only		10/9/2016			<a href="#">Print Temporary ID Card</a>

**Primary Care Dentist**

Dentist/Office Name	Provider Type	Network Name	Dentist Effective Date
		No Results Found	

**Other Coverage**

LOB Coverage Type	COB Code	Effective Dates	Insurer Name	Insurer Payment Order	ID Number	Policy No
			No Results Found			

**User Account Information**

View Requests

Confirmation Number	Date Submitted
	No Results Found



## View Member Benefits

On the **Member Eligibility** List page, click a **Subgroup name** link to display the **Benefit Plan Summary of Benefits** page for that member.

[Home](#) > [Member Eligibility Search](#)

### Member Eligibility List

This page displays the Members meeting the search criteria. You can conduct another search by clicking search again, view Member detail by clicking a Member name link, and print the results by using the Printer Friendly Format button.  
**Please note this information does not guarantee or imply payment and is contingent upon other factors, including but not limited to eligibility changes, covered services and benefit limitations.**

Results are for members who are/were eligible as of 03/09/2021

[Download File](#) [Printer Friendly Format](#) [Add New Member](#)

Active										
Member Number	Date Of Birth	Member Name	Effective Dates	Subgroup	Benefit	Client Number	Network Name	Paid Through Date	Dentist/Office Name	Dentist Effective Date
930062202	01/15/1980	BRUCE GINGER	02/01/2021-	ABC CO High B	Usage	0234560002	OH DCPG DHMO			

Ineligible				
Member Number	Date Of Birth	Member Name	Eligibility Effective Date	Eligibility Expiration Date
No Results Found				

Note: If you wish to search again, the information you originally entered for these members will be retained allowing you to correct any information you previously entered.

[Search Again](#)

These sections are on this page:

1. **Description** section – lists the member's group.
2. **Documents**: this contains client specific documents, when applicable.
3. **Group Information** section – lists calendar/plan year maximum, dependent ages, COB type and product.
4. **Deductible** section – lists individual and family deductibles, when applicable.
5. **Maximums** section – lists the annual maximum for the plan.
6. **Lifetime Maximum** section – lists lifetime maximums, when applicable.
7. **Benefit categories** section – lists each benefit category, the covered percentage and the common procedures and time limits in those categories.

## Add A New Member

1. Click the **Online Enrollment > Member Eligibility Search** menu item from the Portal Menus, on the left side of the page, to display the **Member Eligibility Search** page. Search for the member you need to add.



***You must always search for the member before you try to add a new member.***



2. When the member is not found, click **Add New Member** from the **Member Eligibility List** results screen.

Home > Member Eligibility Search

### Member Eligibility List

This page displays the Members meeting the search criteria. You can conduct another search by clicking search again, view Member detail by clicking a Member name link, and print the results by using the Printer Friendly Format button.  
**Please note this information does not guarantee or imply payment and is contingent upon other factors, including but not limited to eligibility changes, covered services and benefit limitations.**

Results are for members who are/were eligible as of 03/09/2021

Download File Printer Friendly Format **Add New Member**

Member Number	Date Of Birth	Member Name	Effective Dates	Subgroup	Benefit	Client Number	Network Name	Paid Through Date	Dentist/Office Name	Dentist Effective Date
930062202	01/15/1980	BRUCE GINGER	02/01/2021-	ABC CO High B	Usage	0234560002	OH DCPG DHMO			

**Ineligible**

Member Number	Date Of Birth	Member Name	Eligibility Effective Date	Eligibility Expiration Date
No Results Found				

Note: If you wish to search again, the information you originally entered for these members will be retained allowing you to correct any information you previously entered.

Search Again

3. Enter all the required information in each of the fields in the **General** and **Address Information** sections.
4. **Note:** All fields indicated with an \* are required.
5. In the **Employment Information** section, select the client name from the **Client Name** drop-down list.
6. Click **Next**.

[Home](#) > [Member Eligibility Search](#) > [Member Eligibility List](#)

### Add Member

This page allows you to add a new member. Enter the required information and click Submit & Enroll to save the information and continue on to benefit enrollment.

#### General Information

First Name\*  ?

Middle Initial  ?

Last Name\*  ?

Gender

#### Address Information

Address  ?

Address 2  ?

City\*  ?

State  ?

Zip Code  ?

Email  ?

#### Employment Information

Client Name  ABC Company High Option 0234560000


\*Required Field



From the Client Name drop down list, always select the **sub-group** the member will be enrolled in.

The **Member Benefit Maintenance** screen appears with the subscriber information pre-populated.

7. In the **Available Subgroups** section, click the ☐ to select the subgroup you chose for this member.
8. Enter the effective date in the **Benefit Effective Date** field. If you have a new hire waiting period, you will need to apply that and enter their true effective date on the plan. The system does not apply that automatically.
9. If this is a member only coverage, click **Review** and skip to step 12. If you need to add any dependents, continue to step 9.
10. From the **Member Benefit Maintenance** screen, click the **Add Dependent** link. The Add Dependent information section will appear.

 Dependents must be added at the same time a new member is added. If the dependent is not added as part of this request, you will not be able to add dependents to this member for 24 hours.

Home > [Member Eligibility Search](#) > [Member Eligibility List](#) > [Add Member](#)

### Member Benefit Maintenance

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

Client Name ABC CO High C-0234560003

Members					Subscriber Information
Member Name	Relationship	Member Number	Date Of Birth	Gender	Apply to
Test T Test	Self			MALE	<input checked="" type="checkbox"/>

**Subscriber Information**

First Name\*  ?

Middle Initial  ?

Last Name\*  ?

DOB\*

SSN\*

Gender Code\* MALE ▼

Relationship Code\* Self ▼

☐ Disabled

**Address Information**

Address\*  ?


Address 2

City\*  ?

State\* WI ▼ ?

Zip Code\*  ?

**Available Subgroups**

Subgroup	Subgroup No	Line Of Business No	Select	Benefit Effective Date*
ABC CO High C	0234560003	DENTAL	<input type="checkbox"/>	<input type="text"/> 

[Back To Previous Page](#)
[Cancel Request](#)
[Review](#)
[Add Dependent](#)

## 11. Enter the dependent's information in the Personal Information section:

- If the dependent is a full-time student, select Full Time Student from the **Student Status Code** drop-down list.
- **Note:** If the dependent is a child under the age of 18, Student Status Code does not have to be selected. No additional documentation is needed.
- If the dependent is disabled, select the **Disabled** ☐.

12. If you have additional dependents to add for this subscriber, click **Add Another Dependent** and repeat step 10 for each additional dependent. Otherwise, click **Review**.

**Member Benefit Maintenance**

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

Client Name ABC CO High C-0234560003

Members				Subscriber Information	Dependent Information
Member Name	Relationship	Member Number	Date Of Birth	Gender	Apply to
Test T Test	Self			MALE	<input checked="" type="checkbox"/>

**Add Dependent**

You will be given the opportunity to review any changes prior to submitting them.

**Added Dependents**

Edit	Delete	Member Name	Relationship	Date Of Birth	Gender
------	--------	-------------	--------------	---------------	--------

**Personal Info**

First Name\*

Middle Initial

Last Name\*

DOB\*

Gender Code\*

Relationship Code\*

Student Status Code

☐ Disabled

**Available Subgroups**


Subgroup	Subgroup No	Line Of Business No	Select	Benefit Effective Date*
ABC CO High C	0234560003	DENTAL	<input checked="" type="checkbox"/>	03/01/2021

13. The **Member Benefit Maintenance** screen will appear again with the information you provided for the subscriber and any dependents you added. If changes need to be made, click the **Back** button. If all information is accurate, click **Submit**.

[Home](#) > [Member Eligibility Search](#) > [Member Eligibility List](#) > [Add Member](#)

### Member Benefit Maintenance

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

 [Printer Friendly Format](#)

Coverage Level Codes			
Subgroup	Benefit Effective Date	Termination Date	Coverage Level Code
ABC CO High C	03/01/2021		Enrollee + Children

Subscriber Information						
Member Name	Date Of Birth	SSN	Gender	Relationship	Student Status Code	Disabled
Test T Test	01/01/1990	123-45-6789	MALE	Self		N
Testo L Test	01/01/2010		FEMALE	Child	Full-Time	N
Testoo Test	01/01/2010		FEMALE	Child	Full-Time	N

Member Name	Address	Address 2	City	State	Zip Code
Test T Test	1234 5th st		Milwaukee	WI	53224
Testo L Test	1234 5th st		Milwaukee	WI	53224
Testoo Test	1234 5th st		Milwaukee	WI	53224

Member Name	Subgroup	Subgroup No	Benefit Effective Date
Test T Test	ABC CO High C	0234560003	03/01/2021
Testo L Test	ABC CO High C	0234560003	03/01/2021
Testoo Test	ABC CO High C	0234560003	03/01/2021

You will receive a message and a confirmation number when your enrollment request is successfully submitted. Please note, changes will be reflected on the next business day.

[Home](#) > [Member Eligibility Search](#) > [Member Eligibility List](#) > [Add Member](#)

**Success**  
Your Request has been submitted.  
Confirmation Number is 1004

Your transaction will be updated in our system within 24 hours. If you have any questions concerning your submission, please contact the Member Enrollment & Support Department.

## Member Benefit Maintenance

You can update a member's benefit information by accessing the **Benefit Maintenance** page. This page provides links to view the member information, edit a member's address or other information, add a dependent, change the member's benefit selection, or terminate coverage.

1. Conduct a Member Eligibility Search.
2. Click the Member Name.
3. From the Member Detail page, click Benefit Maintenance.

### DID YOU KNOW?

You can combine multiple changes to the same member/family into a single transaction.

When completing a change for a member, such as an address or demographic change, remember that you can make changes to each family member by clicking on the name and making the change prior to hitting the REVIEW button.

The **Member Benefit Maintenance** page will display with the available update options.

Home > Member Eligibility Search > Member Eligibility List > Member Detail

### Member Benefit Maintenance

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

Service Date 03/10/2021  
Client Name ABC CO High B-0234560002

Members	Relationship	Member Number	Date Of Birth	Gender	Apply to
BRUCE GINGER	Self	930062202	01/15/1980	MALE	

View Member Information | Edit Address | Edit Member Information | Add Dependent | Terminate Coverage | Transfer to a New Subgroup | Other Coverage

**View Member Information**

Member Name BRUCE GINGER  
Member Number 930062202  
Date Of Birth 01/15/1980  
SSN 001-55-9908  
Gender MALE

Relationship Self  
Disabled N

Address 8460 BROWNSBORO PL CINCINNATI OH 45255

### View Member Information

**Note:** Not in use currently.

Home > Member Eligibility Search > Member Eligibility List > Member Detail

### Member Benefit Maintenance

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

Service Date 03/10/2021  
Client Name ABC CO High B-0234560002

Members	Relationship	Member Number	Date Of Birth	Gender	Apply to
BRUCE GINGER	Self	930062202	01/15/1980	MALE	

View Member Information | Edit Address | Edit Member Information | Add Dependent | Terminate Coverage | Transfer to a New Subgroup | Other Coverage

### Edit Address

Use the **Edit Address** link to modify the subscriber address. Only a subscriber address may be modified. This portal cannot be used to change a dependent's address.

1. From the Member Benefit Maintenance screen, select the Edit Address link.

**Add Dependent**

You will be given the opportunity to review any changes prior to submitting them.

Edit	Delete	Member Name	Relationship	Date Of Birth	Gender
<p><b>Personal Info</b></p> <p>First Name* <input type="text"/> ?</p> <p>Middle Initial <input type="text"/> ?</p> <p>Last Name* <input type="text"/> ?</p> <p>DOB* <input type="text"/></p> <p>Gender Code* <input type="text"/></p> <p>Relationship Code* <input type="text"/></p> <p>Student Status Code <input type="text"/></p> <p><input type="checkbox"/> Disabled</p>					

Subgroup	Subgroup No	Line Of Business No	Select	Benefit Effective Date*
ABC CO High B	0234560002	DENTAL	<input type="checkbox"/>	<input type="text"/>

The Address Information section will appear.

Home > Member Eligibility Search > Member Eligibility List > Member Detail

**Member Benefit Maintenance**

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

Service Date 03/10/2021  
Client Name ABC CO High B-0234560002

Members

Member Name	Relationship	Member Number	Date Of Birth	Gender	Apply to
BRUCE GINGER	Self	930062202	01/15/1980	MALE	<input type="checkbox"/>

**View Member Information**

Member Name BRUCE GINGER  
Member Number 930062202  
Date Of Birth 01/15/1980  
SSN 001-55-9988  
Gender MALE

Relationship Self  
Disabled N

Address 8460 BROWNSBORO PL CINCINNATI OH 45255

4. Enter the new address in the Address, City, State, and Zip Code fields.
5. Click Review to save the changes and return to the View Member Information screen.
6. Once you have reviewed the information, click Submit to

**Address Information**

You will be given the opportunity to review any changes prior to submitting them.

Address\*  Address 2  City\*  State\*  Zip Code\*

8460 BROWNSBORO PL ?  ? CINCINNATI ? OH ? 45255 ?



## Edit Member Information

Use the **Edit Member Information** link to modify a member's general information.

1. From the **Member Benefit Maintenance** screen, select the person you want to edit by clicking on the name in the **Member Name** column.
2. Select Edit Member Information. The Edit Member Information section will appear.

Home > Member Eligibility Search > Member Eligibility List > Member Detail

### Member Benefit Maintenance

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

Service Date 03/10/2021  
Client Name ABC CO High B-0234560002

Members	View Member Information	Edit Address	Edit Member Information	Add Dependent	Terminate Coverage	Transfer to a New Subgroup	Other Coverage
Member Name	Relationship	Member Number	Date Of Birth	Gender	Apply to		
BRUCE GINGER	Self	930062202	01/15/1980	MALE	<input type="checkbox"/>		

**View Member Information**

Member Name BRUCE GINGER  
Member Number 930062202  
Date Of Birth 01/15/1980  
SSN 001-55-9988  
Gender MALE

Relationship Self  
Disabled N

Address 8480 BROWNSBORO PL CINCINNATI OH 45255

3. Edit the member information in the appropriate fields.
4. Click Review to save the changes and return to the View Member Information screen.

BRUCE GINGER Self 930062202 01/15/1980 MALE ☐

**Edit Member Information**

You will be given the opportunity to review any changes prior to submitting them.


First Name\* BRUCE ?  
Middle Initial ?  
Last Name\* GINGER ?  
DOB\* 01/15/1980  
SSN\* 001-55-9988

Gender Code\* MALE  
Relationship Code\* Self  
☐ Disabled

Cancel Request Review

## Add Dependent

1. From the Member Benefit Maintenance screen, click Add Dependent. The Add Dependent section will appear.

 You cannot add a dependent unless the member is already active in the portal. If it has been less than 24 hours since you added the member, please check back in 24 hours.

[Home](#) > [Member Eligibility Search](#) > [Member Eligibility List](#) > [Member Detail](#)

### Member Benefit Maintenance

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

Service Date 03/10/2021  
Client Name ABC CO High B-0234560002

Members						<a href="#">Edit Address</a>	<a href="#">Edit Member Information</a>	<a href="#">Add Dependent</a>	<a href="#">Other Coverage</a>
Member Name	Relationship	Member Number	Date Of Birth	Gender	Apply to				
BRUCE GINGER	Self	930062202	01/15/1980	MALE					

#### Add Dependent

You will be given the opportunity to review any changes prior to submitting them.

#### Added Dependents

Edit	Delete	Member Name	Relationship	Date Of Birth	Gender
------	--------	-------------	--------------	---------------	--------

#### Personal Info

First Name*	<input type="text"/>	Gender Code*	<input type="text"/>
Middle Initial	<input type="text"/>	Relationship Code*	<input type="text"/>
Last Name*	<input type="text"/>	Student Status Code	<input type="text"/>
DOB*	<input type="text"/>	<input type="checkbox"/> Disabled	

#### Available Subgroups

Subgroup	Subgroup No	Line Of Business No	Select	Benefit Effective Date*
ABC CO High B	0234560002	DENTAL	<input type="checkbox"/>	<input type="text"/>

2. In the **Personal Info** section, enter the following information:
  - If the dependent is over 18, select the student status from the **Student Status Code** drop-down list. No additional documentation is necessary at this time.
  - If the dependent is disabled, click the ☐ **Disabled** checkbox.
3. In the **Available Subgroups** section, click the **Select** box and enter an effective date in the **Benefit Effective Date** field.
4. If you need to add another dependent, click **Add Another Dependent**. Otherwise, click **Review** to save the changes and return to the **View Member Information** screen.

[Home](#) > [Member Eligibility Search](#) > [Member Eligibility List](#) > [Member Detail](#)

### Member Benefit Maintenance

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

Service Date: 03/10/2021  
Client Name: ABC CO High B-0234560002

Members	<a href="#">Edit Address</a>	<a href="#">Edit Member Information</a>	<a href="#">Add Dependent</a>	<a href="#">Other Coverage</a>	
Member Name	Relationship	Member Number	Date Of Birth	Gender	Apply to
BRUCE GINGER	Self	930062202	01/15/1980	MALE	<input type="checkbox"/>

**Add Dependent**

You will be given the opportunity to review any changes prior to submitting them.

**Added Dependents**

Edit	Delete	Member Name	Relationship	Date Of Birth	Gender
------	--------	-------------	--------------	---------------	--------

**Personal Info**

First Name\*  ?

Middle Initial  ?

Last Name\*  ?

DOB\*

Gender Code\*

Relationship Code\*

Student Status Code

☐ Disabled

**Available Subgroups**

Subgroup	Subgroup No	Line Of Business No	Select	Benefit Effective Date*
ABC CO High B	0234560002	DENTAL	<input type="checkbox"/>	<input type="text"/>

[Cancel Request](#) [Review](#) [Add Another Dependent](#)

## Terminate a Members Coverage

1. From the **Member Benefit Maintenance** screen, select the **Terminate Coverage** link. The **Terminate Coverage** section appears.

[Home](#) > [Member Eligibility Search](#) > [Member Eligibility List](#) > [Member Detail](#)

### Member Benefit Maintenance

This page has options for you to edit a member's information, add dependents, terminate coverage and more. Every transaction will bring you to a review screen prior to submitting. When reviewing any changes, click the Back button to return to the previous page and edit information appearing incorrectly on the Review Page.

Service Date 03/18/2021  
Client Name

Members					
		Edit Address	Edit Member Information	Terminate Coverage	Other Coverage
Member Name	Relationship	Member Number	Date Of Birth	Gender	Apply to
	Self		10/07/1985	MALE	<input checked="" type="checkbox"/>

#### Terminate Coverage

You will be given the opportunity to review any changes prior to submitting them.

#### Current Subgroups

Subgroup	Subgroup No	Line Of Business No	Eligibility Benefit Dates	Select	Termination Date*
		DENTAL	09/01/2019 -	<input type="checkbox"/>	<input type="text"/>

Cancel Request

Review

**By default, the subscriber and all dependents will be selected for termination.**

- To terminate the entire family, leave the checkboxes select.
  - Deselect any dependents that should not be terminated.
2. In the **Current Subgroups** section, select the subgroup(s) where coverage should be terminated by selecting the ☐.
  3. Enter the date coverage should end for each of the selected subgroups in the **Termination Date** field.
  4. Click **Review** to save the changes and return to the **View Member Information** screen.

## Transfer a Member to a New Subgroup

1. From the **Member Benefit Maintenance** screen, select the **Transfer to a New Subgroup** link. The **Transfer to a New Subgroup** section will appear. You can only do this if you have user rights to all subgroups.
2. If you are:
  - Adding a new subgroup(s), select the ☐ for the subgroup(s) you are adding, and enter the effective date in the **Benefit Effective Date** field.
  - Terminating a subgroup(s), select the ☐ for the subgroup(s) you are terminating, and enter the termination date in the **Termination Date** field.
3. Click **Review** to save the changes and return to the **View Member Information** screen.

Transfer to a New Subgroup

To transfer the member into a new subgroup, select the subgroup from the dropdown and enter an effective date.

Select a New Subgroup: ABC CO High C - 0234560003

Available Subgroups

Subgroup	Subgroup No	Line Of Business No	Select	Benefit Effective Date*
ABC CO High C	0234560003	DENTAL	<input type="checkbox"/>	<input type="text"/>

Cancel Request

Review

## Reinstate Coverage

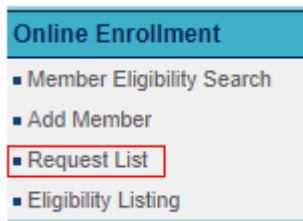
If a subscriber is terminated, you can reinstate their coverage into the same subgroup. Add a new record if you are reinstating them to a new subgroup.

1. Conduct a Member Eligibility Search.
2. From the Member Detail page, click the Benefit Maintenance link.
3. On the Member Benefit Maintenance page, click the Reinstate Coverage link. The Reinstate Coverage section will appear.
4. In the Available Subgroups section, click the ☐ next to the subgroup.
5. Enter the effective date of coverage in the Benefit Effective Date field.
6. Click Review to save the changes and return to the Member Benefit Maintenance screen.

You will receive a confirmation that your request was successful.

## Request List

The **Online Enrollment > Request List** menu item in the Portal Menus, on the left side of the page, allows you to open the **Request List** page and view the transactions you have submitted.



## View a Request

1. Click the **Online Enrollment > Request List** menu item from the Portal Menus on the left side of the page. The **Request List** page appears.
2. To search for a request:
  - To find a specific request, enter the confirmation number into the **Confirmation Number** field.
  - To view requests by status, select a status from the **Request Status** drop-down list.
  - To view requests that have been submitted within a specific date range, type the date range into **Created Date** fields or use the pop-up calendars to select the dates.
  - To search by member number, enter the member number in the **Member Number** field.
  - To search by member name, enter the member's last name and partial first name in the **Member Last Name** and **Member First Name** fields.
3. Click **Search**. The requests that match your search criteria will appear in the **Results** section.

**Note:** The **Request Status** indicates that the request was submitted. It does not indicate that the request has been processed yet. It may take up to *24 hours* for the request to be processed.

 A screenshot of the 'Request List' web page. At the top, there's a 'Home' link and the title 'Request List'. Below the title, a message says 'This page will display all requests made by your group.' The main section is titled 'Search' and contains several input fields: 'Confirmation Number' (text box), 'Request Status' (dropdown), 'Created Date' (two date pickers with a 'to' separator and '(MM/DD/YYYY)' format), and 'Requesting User' (text box with a 'Clear' button). There's a checkbox labeled 'Look in ABC Company High Option employer subgroups'. Below the search section is the 'Member Information' section with a 'Clear' button and three text boxes: 'Member Number' (with a help icon and '(123456)' placeholder), 'Member First Name', and 'Member Last Name'. A 'Search' button is at the bottom of the search section. Below the search section is a 'Results' section with a 'Download File' link. The results table has columns: 'Confirmation Number', 'Request Status', 'Enrollment Request Type', 'Member Name', 'Subscriber Name', 'Date Submitted', and 'Date Last Updated'. The table currently shows 'No Results Found'.

4. Select the request you want to view from the **Request List** page by clicking the request number located in the **Confirmation Number** column. The **Request Detail** page will appear.

The **Request Detail** page contains:

**Request Information** – Indicates the confirmation number, status of the request, client name and number, and the enrollment request type.

**Requesting User Information** - Indicates the name and email of the user who submitted the request.

**Subscriber Information** – Indicates the subscriber information, including name, date of birth, social security number, gender, address, and student status (if applicable).

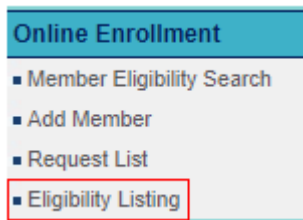
**Benefit Selection** - Indicates the subgroup name and number, effective and termination dates, coverage level code, and benefit plan name.

**Dependent Information (if applicable)** - Indicates the dependent information, including name, date of birth, social security number, gender, address, and student status (if applicable).



## Eligibility Listing

The **Online Enrollment > Eligibility Listing** menu item, in the portal menus on the left side of the page, allows you to view a list of all members and/or dependents.



### Eligibility Listing Search

1. Click the **Online Enrollment > Eligibility Listing** menu item from the Portal Menus on the left side of the page. The **Eligibility Listing** page appears.
2. You can filter your search by:
  - Subgroup
  - Check the appropriate box to filter by coverage status:
    - Active status
    - Terminated status
    - Future status
3. You can also display additional information by checking the appropriate box:
  - Dependents
  - Address
4. Click **Search**. The subscribers that match your search criteria will appear in the **Results** section.

[Home](#)

### Eligibility Listing

This page allows you to sort the members or dependents of each or all subgroups by their eligibility status. There is also the option to download your results as an Excel file.

**Filters**

Subgroup: -- All --

Show: ☒ Active ☐ Dependents ☐ Terminated ☐ Address ☐ Future

**Results** [Printer Friendly Format](#) [Download File](#)

Member Number	Member First Name	Member Last Name	Date Of Birth	Client Name	Subgroup No	Benefit Effective Date	Termination Date	Coverage Level Code
930062207	ANDREW	BARTRAM	03/11/1952	ABC CO High B 0234560002	0234560002	02/01/2021		Enrollee Only
930062202	BRUCE	GINGER	01/15/1980	ABC CO High B 0234560002	0234560002	02/01/2021		Enrollee Only
930062213	TONY	KING	06/05/1977	ABC CO High C 0234560003	0234560003	02/01/2021		Family
930062208	SONYA	LOPEZ	05/14/1980	ABC CO High C 0234560003	0234560003	02/01/2021		Enrollee + Spouse
930062212	NIGEL	SHEPPARD	04/11/1965	ABC CO High B 0234560002	0234560002	02/01/2021		Family
930062203	GEORGE	SMALL	05/05/1989	ABC CO High C 0234560003	0234560003	02/01/2021		Enrollee + Spouse

## Billing & Payment

---

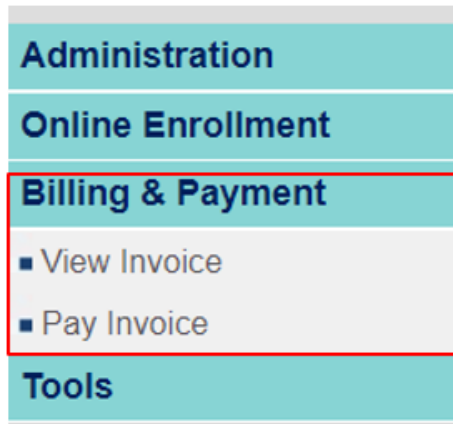
The Billing & Payment menu allows you to:

1. View Invoices
2. Pay invoices
  - One Time
  - Recurring
3. Export an invoice to Excel

## Accessing the Payment Functionality on the Employer Portal

1. Click **Billing & Payment** in the menu to view the options.
2. Click on the appropriate option:
  - **View Invoice:** This allows you to view an invoice.
  - **Pay Invoice:** This will only display if you have the security to pay an invoice.

**Note:** If you have the security to make a payment, you will also be able to do that from View Invoice.



## View Invoice Options

The left-hand toolbar contains the following options:

1. **Go Paperless:** All clients will default to Electronic (paperless). If you would like to also receive a hard copy, you can make this change here. Please note, this functionality is only available to those with Super User Access
2. **Invoices:** to view invoices
3. **Make a Payment:** to make a one time or recurring payment
4. **Electronic Payment History:** to view online payment history
5. **Account Settings:** to view your personal settings
6. **Terms & Conditions:** to view the terms and conditions of use
7. **Contact Us:** to view options for contacting
8. **Log Off:** to log off the portal

## Account Settings

To make changes to your receipt method, select the Account Settings option. Note: Only Super User access can make these changes.

**All clients will default to Electronic (paperless).**

1. If you would like to receive paper invoices, you can unenroll individual or ALL group id's to receive a hard copy invoice. If you select to print/mail an invoice, they will still be available to you on the Portal.

### Notes:

- Any user who logs into the portal will get an e-mail when your next new invoice is available.
  - If you are going to pay by check. You will need to PRINT a copy of the first page of your invoice, and include the detachable coupon slip on the bottom part of the invoice so the payment can be applied accurately.
2. If you have not accepted the Terms and Conditions:
    - Click **Terms and Conditions** to see the requirements for using this feature.
    - Click **I have read and accept the Terms & Conditions.**

- Click **Enroll/Go Paperless** to enroll all the groups that display on the **Go Paperless** screen.

**Note:** As a super user, you can click on **Unenroll** on specific groups or **Unenroll ALL**. If you select Unenroll, you will begin to receive hard copy invoices in the mail.

My User Account Settings			
Email			
Mary.Smith@mail.com			
Group Numbers associated with this profile			
Action	Status	Group Number	Group Name
Unenroll	Paperless	001234-9901	ABC Co., Boston
Unenroll	Paperless	001234-9902	ABC Co., Georgia
Unenroll	Paperless	001234-9903	ABC Co., COBRA





## Invoices

- Click **Invoices** to display invoices for all subgroups that have been assigned to you.

### Notes:

- This will only display up to 12 months of invoices.
- If you want to keep invoices longer than the 12 months, download and save a copy in a PDF or HTML format for your records.

Invoices
Make Payment
Electronic Payment History
Account Settings
Contact Us
Log Off

Invoices						
Welcome!						
PDF	HTML	Group Number	Invoice Date	Due Date	Invoice Number	Amount Due
						
		080013-0001	01/15/2021	02/01/2021	30397280	1000.00

- Click on a column label, to sort by that column.
- Enter specific criteria in a search box to narrow down your search. For example, enter an Invoice Number.
- Click on the dropdown next to an invoice to see a snapshot of the **Activity Summary** page of the invoice.

### Self-Insured View



Activity Summary for Billing Period: 08/01/2020 - 08/31/2020			
<b>ABC Co., Boston</b>			
Previous Balance	\$21,301.47	Activity Summary	
Payment	-\$21,301.47	Claims Paid During Jun 2020	\$24,992.51
Adjustment	\$0.00	Administrative Expense Per Member	\$6,676.45
Carried Forward	\$0.00	Administrative Adjustment	\$79.60
		Subtotal	\$31,748.56
		<b>Total Amount Due</b>	<b>\$31,748.56</b>

### Fully Insured/Risk View

Activity Summary for Billing Period: 08/01/2020 - 08/31/2020			
<b>ABC Co., Boston</b>			
Previous Balance	\$302.40	Activity Summary	
Payment	-\$302.40	Current Amount Due	-\$753.90
Adjustment	\$0.00	<b>Total Amount Due</b>	<b>-\$753.90</b>
Carried Forward	\$0.00		

- To view or save a PDF or HTML copy of the invoice.

**Note:** From HTML you can also export an employee or claims listing, when available, to Excel.

- Click  to get and save a PDF version.
- Click  to get and save a HTML version. This allows you to click on an item, like the subscriber listing, and export to Excel.

## Make Payment:

### Make a One Time Payment:

1. Click **Make Payment** to make a onetime or recurring payment online. Please note, recurring payments are effective for future dated invoices only. If you have a current open invoice, please submit a one time payment, then establish the recurring payment.

#### Notes:

- This only displays if you have the necessary security to make a payment.
- The first time you make a payment, you will be asked to choose a security image and give it a label. This will help you confirm when a notification is received.

The image shows two parts of the client portal interface. On the left is a sidebar menu with the following items: Invoices, Make Payment (highlighted with a red box), Electronic Payment History, Account Settings, Contact Us, and Log Off. On the right is the 'Set up Account Security' page. It has a heading 'Choose a Security Image and give it a label' and a subtext: 'You'll see your selected security image and label in email notifications. When you see your image and label on a notification, you can be sure it is from us.' Below this is a grid of 12 small images. Underneath the grid is a text input field labeled 'Give your image a label'. At the bottom, there is a checkbox with the text: 'By clicking this box, you are enrolling in this service and have read and agree to the [Terms of Service](#) for this site.'

2. Click on the circle to the left of the current invoice.

The image shows the 'Pay My Bills' page on the DentaQuest portal. The page has a header with 'DentaQuest' logo and navigation links: Home, Pay My Bills (active), and Recurring Payment. Below the header is a 'Pay My Bills' section with a 'Due Date' dropdown and an 'Advanced Search' button. There are two tabs: 'UNPAID AND PARTIALLY PAID' (active) and 'HISTORY'. A 'Total Balance: \$1,000.00' is displayed. Below this is a table of invoices:

	Invoice Date	Due Date	Invoice Number	Amount Due	Remaining Amount	Payment Amount	Payment Code / Comments
<div> <div></div> <div> Group ID 0800130001  Test_Group_Name_0800130001 </div> </div>	1/15/2021	2/1/2021	30397280	1,000.00	1,000.00	1,000.00	

A red box highlights the selection circle to the left of the first invoice row.

3. Click on the down arrow in the **Payment Amount** column, to view the total amount due:
  - **Risk/Premium/Fully Insured** groups will only see the total amount due for this invoice.

**Notes:**

- This will reflect the total amount due (invoice amount plus any amount past due and credits).
- This will not reflect payments made outside the portal (i.e., via check or ACH/wire transfer).
  - **Self-Insured** groups will see the claims and admin.
    - In the Amount Due, you will see the claims and admin for the current month plus any past due amount
    - In the Claim Amount Due (self-insured only) you will only see the current month's claims.
    - In the Administrative Amount Due (self-insured only) you will only see the current month's administrative cost.

Amount Due	\$226,371.86
Claims Amount Due	\$208,209.99
Administrative Amount Due	\$22,919.20

**Notes:**

- This will reflect the total amount due (invoice amount plus any amount past due and credits).
- This will not reflect payments made outside the portal (i.e., via check or ACH/wire transfer).



- Enter the amount you want to pay in the **Payment Amount** column.

**Note:** if you are paying the amount listed, you do not have to type anything.

**DentaQuest** Home **Pay My Bills** Recurring Payment Invoice\_ViewPay\_080013000

**Pay My Bills** Due Date  [Advanced Search](#)

**UNPAID AND PARTIALLY PAID** **HISTORY** [Hide Account Groupings](#) [Export](#)

Total Balance: \$1,000.00

Invoice Date	Due Date	Invoice Number	Amount Due	Remaining Amount	Payment Amount	Payment Code / Comments
Group ID 0800130001 Test_Group_Name_0800130001						
1/15/2021	2/1/2021	30397280	1,000.00	1,000.00	1,000.00	

**MESSAGES** [View](#)

Now that you are registered for the client portal, you will begin getting all your statements and other communications

**PAYMENT SUMMARY**

0 Invoices \$0.00  
[Remove All](#)

Payment Method [Add A Payment Method](#)

Pay Date  
2/18/2021

Payments confirmed before Thursday, February 18, 2021 4:00 PM ET will be posted on Friday, February 19, 2021. Payments confirmed after Thursday, February 18, 2021 4:00 PM ET will be posted on Monday, February 22, 2021.

[Cancel](#) [Continue to Payment](#)

- If you are paying an amount other than the total, you will be prompted to select a Payment Code. Choose the item from the dropdown that describes what you are paying.
- Click on the Edit Comment Pencil to add a comment to explain your payment.

**COMMENTS**

[Cancel](#) [OK](#)

7. The Payment Summary box will display the number of invoices you've selected and the total amount to be paid.
  - **Remove all** will remove the invoices chosen.
  - Click **Add a Payment Method**, if you are a first-time payer or if you want to add a new payment method. You can save multiple payment methods.
    - Enter the bank information.
    - Click **Add**. This will bring you back to the Payment page.

**Add A Payment Method**

**BANK ACCOUNT**

Account Type: ☐ Personal ☒ Business

Banking Type: ☒ Checking Account ☐ Savings Account

Give This Account a Nickname:

Name on the Account:

Routing Number:

Account #:

Re-enter Account #:

Pay to the Order of:

Routing Number Account Number

*Make sure to use your bank account number, not your ATM or Debit card number.*

Anybank USA

By selecting 'Agree and Add Account', you authorize the information you've provided on the above account to be used for creation of a charge to the account listed above. You also affirm that the information you provided is correct, that you are a signer on the account above and there are available funds to cover the amount of any transactions that you authorize.

☒ Agree and Add Account

**Add**

8. In **Payment Summary** section, choose the correct bank from the dropdown.
9. Click on the calendar in the **Pay Date** section, to choose the date you want the funds pulled from your bank account.
10. Click **Continue to Payment**.

**PAYMENT SUMMARY**

1 Invoice \$1,000.00

[Remove All](#)

Payment Method [Add A Payment Method](#)

Anybank USA

Pay Date

2/18/2021

Payments confirmed before Thursday, February 18, 2021 4:00 PM ET will be posted on Friday, February 19, 2021. Payments confirmed after Thursday, February 18, 2021 4:00 PM ET will be posted on Monday, February 22, 2021.

[Cancel](#) **Continue to Payment**

11. The **Verify Payment** screen will display. Validate that the bank, payment amount and payment date are correct.
12. Click the box for “**By checking this box you agree to the terms and conditions above**”.
13. Click **Make Payment**.
14. The **Payment Confirmation** page will appear. You can:
  - Print a Confirmation Page
  - Return to Pay My Bills
  - Log Out

### Confirmation

**Thank You!** Your payment has been made.

[Print Confirmation Page](#)

<b>Payment Date</b>	2/18/2021
<b>Payment Method</b>	Account 1101A 3436
<b>Total Payment</b>	\$1,000.00

Invoice\_ViewPay\_0800130000\_16207

You have been provided a confirmation number. Please save this page for your records.

Payments confirmed before Thursday, February 18, 2021 4:00 PM ET will be posted on Friday, February 19, 2021. Payments confirmed after Thursday, February 18, 2021 4:00 PM ET will be posted on Monday, February 22, 2021.

If you have any further questions about payments to Dental Care Plus, please contact our office at 800-367-9466 .

Group ID	Confirmation #	Payment Amount	Number of Invoices
0800130001	3100060839	\$1,000.00	1

[Set Up Recurring Payment](#)
[Return to Pay My Bills](#)
[Log Out](#)

## Make a Recurring Payment

1. Click **Make Payment** to make a recurring payment.

### Notes:

- This only displays if you have the necessary security to make a payment.
- The first time you are making a payment, you will be asked to choose a security image and give it a label. This will insure you that the notification is from us.

The image shows two parts of the client portal interface. On the left is a sidebar menu with options: Invoices, Make Payment (highlighted with a red box), Electronic Payment History, Account Settings, Contact Us, and Log Off. On the right is the 'Set up Account Security' page, which prompts the user to 'Choose a Security Image and give it a label'. It displays a grid of 12 small images for selection. Below the grid is a text input field labeled 'Give your image a label'. At the bottom, there is a checkbox with the text: 'By clicking this box, you are enrolling in this service and have read and agree to the Terms of Service for this site.'

Click **Recurring Payment**.

The image shows the top navigation bar of the DentaQuest portal. The 'Recurring Payment' tab is highlighted with a red box. Other tabs include Home, Pay My Bills, and a user profile icon labeled 'Invoice\_ViewPay\_080013000'. Below the navigation bar is a dark blue header with the text 'Recurring Payment'.

2. Click Create New Recurring Payment.

The image shows the 'Recurring Payment' page in the DentaQuest portal. The 'Create New Recurring Payment' button is highlighted with a red box. Below the button is a 'Recurring Payment Message' box with text: 'Auto-Pay will begin following the first billing cycle after you have set up the Recurring Payment. Continue to pay as usual until you receive an email notifying you the Recurring Payments are being processed.' To the right of the message box is a red text box with an example: 'Example: If an invoice is generated in March for an April payment and you select Recurring Payment: 1. You will still need to make the April payment as a one-time payment online 2. The first recurring payment will be for May'.

3. Enter a name for the payment in the **Payment Name** box (i.e., ABC Company, Monthly Dental Payment).


**Note:** You must set up recurring for each subgroup separately.

4. Click **Continue**.
5. Select the *DUE DATE* in the **When would you like to make your payment** box.
6. In the **Payment Amount** section, select the Amount Due.

**Note:** The amount due on the bill is the total amount due, including any past due balances shown on the invoice.

7. In the **Keep Making This Payment Section**, select one of the following:
  - **I Stop the Payment**: the recurring payment will continue until it's cancelled.
  - **Number of Payments**: allows you to enter a specific number of payments.
  - **Specific Date**: allows you to enter a specific date when you want to stop recurring payments. The recurring payment will execute up to and including the date entered.
8. Optional: Click the box to **Send a reminder** a certain number of days before the payment is processed.
9. Click **Continue**.
10. On the Recurring Payment Setup screen:
  - Select a payment method from the dropdown if it is already created **or**
  - Click **Add a Payment Method** to create a new one.
    - Enter the bank information.
    - Click **Add**. This will bring you back to the Payment page.

### Add A Payment Method

 **BANK ACCOUNT**

Account Type

Personal

Business

Banking Type

Checking Account

Savings Account

Give This Account a Nickname

Name on the Account

ABC Company

Routing Number

123456789

Anybank USA

Account #

123456

Re-enter Account #

123456

Pay to the Order of

123456789 1000123456 1111

Routing Number

Account Number

Make sure to use your bank account number, not your ATM or Debit card number.

☒ Agree and Add Account

Add

11. The **Recurring Payment Setup – Payment Method** section will reappear. If there is more than one payment method, select the correct banking information from the drop down.
12. Click **Continue**.
13. On the **Billing Authorization** screen, click **By checking this box you agree to the terms and conditions stated above**.
14. Click **Finish**. A confirmation page will appear.

**Note:** Click the **Review/Edit/Delete** button if you want to review, make changes, or delete the recurring payment.

DentaQuest

Home Pay My Bills Recurring Payment Invoice\_ViewPay\_080013000

Recurring Payment

Recurring Payment

ABC COMPANY

Paid on Account 0800130001  
Paid on the 20th of the Month

Review/Edit/Delete

15. Click **Pay My Bills** if you want to return to the main payment screen. You must pay any outstanding balances before Recurring Payment begins.

## Electronic Payment History

1. Click this to display any payments that were made on the Portal.

### Notes:

- This will not display payments made directly to DentaQuest by check or ACH/wire transfer.
- This will display up to 12 months of payments.

Invoices
 Make Payment
 Electronic Payment History
 Account Settings
 Contact Us
 Log Off

### Electronic Payment History

Welcome!

Transaction Confirmation Number	Transaction Type	Payment Method	Group Number	Invoice Number	Payment Date	Payment Amount
There are no Payments for you to view at this time.						

### Account Settings: Click this to display:

- Your email.
- View whether you are set up for Paperless or Print Mail.
  - If you are Print Mail, you have the option to Go Paperless from this screen.

### My User Account Settings

Email

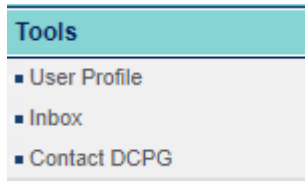
Mary.Smith@mail.com

Group Numbers associated with this profile

Action	Status	Group Number	Group Name
	Print/Mail	001234-9901	ABC Co., Boston

## Tools Menu

The **Tools** menu on the left side of the page contains the following menu items:

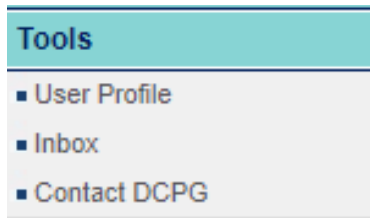


- **User Profile**  
This menu item allows you to view your user information and change your name, password, password question, and email address.
- **Inbox**  
This menu item opens your **Inbox** page where you can view any messages sent to you

## Viewing the User Profile

The **Tools > User Profile** menu item allows you to access your **User Profile** page and view and update your user information. You can change your name, password, security question, and email address on this page.

### Edit Your User Profile



2. Click the **Tools > User Profile** menu item.
3. Edit any information you want to update:
  - To update your name, edit the name fields in the **Personal Information** section.
  - To change your password, type the old password into the **Old Password** field in the **Change Password** section, type a new password into the **New Password** field, and then type the new password into the **Confirm New Password** field.

### Notes:

#### Password Rules:

- At least 10 characters
- 1 Uppercase Letter
- 1 Lowercase Letter
- 1 Special Character
- A number

#### Note:

- You cannot use the following special characters: (; \ { } [ ] " % ~)
- You cannot use any of your last ten passwords.
- To change your email address, type your new email address into the **Email** field in the **Email Address** section.



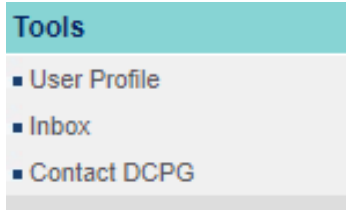
- To edit your security question, select a security question from the **Password Question** drop-down list in the **Security Question** section and type your answer into the **Password Answer** field.
- To save your changes, click **Submit**.

## Request an ID Card

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From the Employer Portal Home Page:

1. Click **Tools**.
2. Click **Contact DCPG**.



3. Select **ID Card Request** from the **Message Type** dropdown.
4. Click the **Member Search** magnifying glass icon.
5. Search for the subscriber you wish to request a card for. Cards are only sent with the name of the subscriber. All required fields are marked with a red asterisk (\*).
  - You must enter either:
    - The **DOB** (date of birth) **or** \*
    - The **Social Security Number** \*
  - To narrow your results, you may enter the following:
    - **Service Date**. The results will default to today's date if a specific date is not entered.
    - **Member Number**.
    - **Member First Name**.
    - **Member Last Name**.
6. Click **Search**.
7. Click **Select** next to the name of the member. The member information will appear.
8. Type "Please send card" in the **Description** box.
9. Click **Submit**. The member will receive a card within 7-10 business days.

## Administration

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From the Employer Portal Home Page:

1. Click **Administration**.
2. Click **User List**.

