MyPlanTools

EMPLOYER USER GUIDE

Quartz®

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EMPLOYER PORTAL HOME PAGE
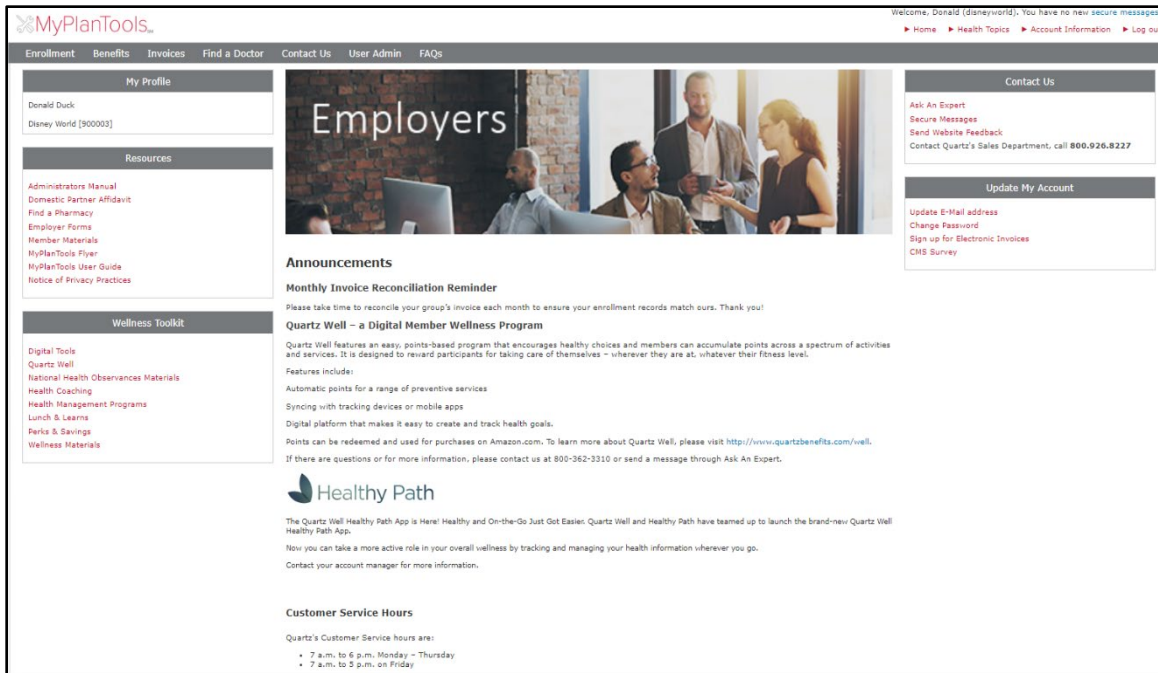
- In the upper right-hand corner of the page, there are four links, including:

LINK	FUNCTION
Home	Return to Homepage of MyPlanTools
Health Topics	View health topics and tools
Account Information	Contains user's email address, password, and communication preference – the user may edit this information
Log Out	Exit MyPlanTools Account

- In the upper-middle of the page, there is a gray menu bar, which includes:

MENU BAR	FUNCTION
Enrollment	Add new employees, change/term current employees, access a list of currently enrolled employees, or edit in-process enrollment forms
Benefits	Access benefit information
Invoices	View and pay bills
Find a Doctor	Search for participating providers
Contact Us	Send and receive secure messages, access the "Ask an Expert" screen, and provide website feedback
User Admin	Add new MyPlanTools users and manage current users
FAQs	Find answers to frequently asked questions

This user guide highlights the functionality of the gray bar menu, starting with Enrollment

ENROLLMENT

ADD NEW EMPLOYEES

Employers can send one or multiple enrollment forms or complete the enrollment form on behalf of the employee.

Send One Enrollment Form

- The employee will receive an email with a link to complete the enrollment form. Once they submit their enrollment form, you will be able to review it through the enrollment dashboard. The request can be returned to the employee if any changes are needed. If all information is correct, you can submit the enrollment form for processing.

1. Complete Employee Information. Required fields are noted with an asterisk (*)
2. Click "Send Form"

Send Multiple Enrollment Forms

- Upload a list of employees eligible to participate in your group's health plan.

1. Download the template
2. Complete the template by filling out all fields for each employee and save to your computer

	A	B	C	D	E	F	G	H	I	J
1	First Name	Middle Initial	Last Name	Employment Status [Active/COBRA/Leave of Absence/Retired]	Number of Hours Worked	Requested Effective Date	Date Employed	9001000 - Disney World - UNITY HMO-COPAY - Active	Enrollment Deadline	Email Address
2										
3										
4										
5										

3. Click "Choose File"
4. Click "Upload and Preview"

Upload Employee Enrollment List

Follow the steps below to upload a list of employees eligible to participate in your group's health plan.

1. Download the Template

2. Complete the Template ❓

3. Select The Completed Template
   [Choose File] No file chosen

4. Upload and Preview Your Changes

[Upload and Preview]   Cancel

5. Review and indicate whether the employer should approve completed employee enrollment forms before submission

- NOTE – Selecting "No" will send all enrollment forms for processing upon employee completion

6. Click "Confirm"
7. Application Confirmation displays

Thank You

Emails have been sent to the selected employees inviting them to complete an enrollment form to join your group health plan.

If you have opted to review completed enrollment forms prior to submitting to Unity, you may review these through the enrollment dashboard.

[Return to Enrollment Dashboard]   [Add Additional Employee(s)]

Complete Enrollment Form

- Complete Enrollment Form on behalf of the Employee

The below screen will display showing these two options:

- NOTE – The first option only applies to **Small Group Employers** trying to complete an Enrollment Form on behalf of the employee. If the employee under a Small Group Employer is waiving coverage for themselves, their spouse, or their children, they must complete their own form per state law.

1. If a Large Group Employer or the employee is not waiving any dependent coverage, please continue and click "Complete Enrollment Form"
2. Enter Requested Effective Date (this will bring up all group numbers available for the requested effective date)
3. Select Group Number that employee should be enrolled in
4. Click Continue

5. Complete Employee Information. Required fields are noted with an asterisk (*)
6. Click Continue

Employee Enrollment Form

Employee Information

Last Name *

First Name *   Middle Initial

Social Security Number or Tax ID Number (TIN) *

☐ Check this box if you do not have a Social Security Number

┌─ Street Address ─────────────────────────────────────

Address Line 1 *

Apt. #

City *

State *
Wisconsin ⌄

ZIP *

County

7. Select if Dependents will be enrolled on the plan

- If No, click "No" and "Continue" to move on to Review (Step # 11)
- If Yes, click "Yes" and "Continue" to complete Dependent Information (Step #8)

Employee Enrollment Form

Will there be any dependents on this plan?
◉ Yes
○ No

Continue   Cancel

8. Complete Dependent Information. Required fields are noted with an asterisk (*)
9. Click "Continue"

Employee Enrollment Form

Dependent Information

Relationship *
Please Select ⌄

Last Name *

First Name *   Middle Initial

Social Security Number or Tax ID Number (TIN) *

Birth Date *

☐ Check this box if you do not have a Social Security Number

10. Complete Steps 7-9 until all dependents have been keyed. Click "Continue"
11. Review the information keyed for accuracy. If changes are needed, click "Edit" on the section(s) needing updates. To Cancel the enrollment request, click "Cancel Request." If the enrollment form is accurate and ready to submit, click "Send for Processing."

Employee Enrollment Form – New Request

Please review the information below. If changes are needed, you may edit or add information by selecting the category. If all of the information is correct, you can submit the request to us for processing by selecting the "Send For Processing" button. The request may be cancelled by selecting "Cancel Request".

New Employee Request

Current Status	Employer Review
Company	Disney World
Date Sent	5/18/2021
Deadline Date	

Plan Information (Edit)

Requested Effective Date	5/1/2021
Group Health Plan	9001000 - Disney World - QUARTZ HMO-COPAY - Active

Employee Information (Edit)

Full Name	Dewey Duck
Social Security Number or TIN	123-45-6789
Street Address	
Date of Birth	8/19/1975
Gender	Female
Marital Status	Single
Primary Language Spoken	English
Phone	
Employment Status	Active
Weekly Hours	40
What is the first day you worked/rehired full-time with your current employer?	4/1/2021
Enrollment Reason	New Hire
Health benefits through another policy	No
In Worker's Compensation Case?	No
PCP Selection:	None selected.

Dependents (Add)

Dependent 1 (Remove) (Edit)

Full Name	Donald Duck
Relationship	Life Partner
Date of Birth	3/1/1985
Social Security Number or TIN	135-74-5136
Gender	Male
Address	
Health benefits through another policy	No
PCP Selection:	None selected.

Notes (Add)

No notes.

[Cancel Request] [Send For Processing]

12. Application Confirmation displays

Thank You

The request for _____ has been submitted for processing, please allow 7-10 days for the Enrollment to be processed and display on your Membership List.

If the request is complete, the changes will be made to your group health plan. If we have any questions, we will contact you.
Please note: completed requests will remain in this status for 90 days even if they have been successfully processed.

[Return to Enrollment Dashboard] [Add Additional Employee(s)]

- NOTE – If a member has an urgent prescription request or doctor appointment, the best way to have this expedited is by emailing your sales representative with the urgent request. Please make sure to include the application or a screenshot of the MyPlanTools entry. All other non-urgent requests will follow the normal Enrollment workflow process.

ENROLLMENT DASHBOARD

- Download Employee & Dependent List
- View employees and dependents participating in the group health plan
- Make updates/changes to those employees and dependents currently enrolled
- Reinstate employee and dependent coverage
- Terminate employee and dependent coverage
- Add/Move Members to COBRA
- View status of MyPlanTools requests

EMPLOYEES TAB

Download Employee List

MyPlanTools Users with a user type of "Employer" and "Employer-Membership" can click on "Download Employee List" and access the group's membership list; chose from the Active, Term, or Both radio buttons for the desired output. The membership list is a comma-separated file (.csv), which automatically opens into an Excel spreadsheet. Once open, the employer can save the file.

*Resulting Excel Spreadsheet after download

View Employee and Dependent Information

By clicking on the "View" button next to the employee's name, the employer can:
- View employee & dependent's demographic information
- View eligibility information
- View and print an ID card

  - **NOTE** – Terminated employees will stay on the Enrollment Dashboard for two years after their termination.

Employee Name ▾	Number	Group Name	Date of Birth	Term Date			
PRINCE P ALADDIN	99999999900	DISNEY WORLD	4/2/1963	Effective	View	Edit	Term
DONALD DUCK	55555555500	DISNEY WORLD	8/10/1977	12/31/2199	View	Edit	Term
ROBIN R HOOD	44444444400	DISNEY WORLD	12/29/1979	Effective	View	Edit	Term

Demographics

- View demographic information for employees and dependents

Employee Information

Update Employee Information

Demographics | Eligibility | Print ID Card

Employee Information
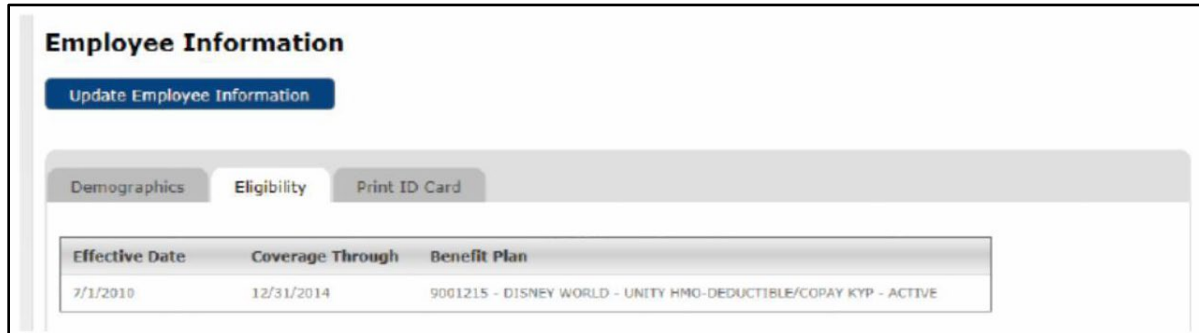
Full Name	PRINCE P ALADDIN
Effective Date:	From 7/1/2010 to CURRENT
Date of Birth	4/2/1963
Gender	MALE
Marital Status	MARRIED
Address	555 MAGIC CARPET LANE SAUK CITY. WI 53583
Employee Number	99999999900
PCP:	MARIAH A QUINN MD
PCP Facility:	WEST CLINIC OFFICE
PCP Effective Date:	7/2/2012
PCP Address:	451 JUNCTION RD MADISON, WI 53717

Dependents

No dependents

Eligibility

- View Eligibility information such as effective date, coverage end date, group number/name, and benefit plan information
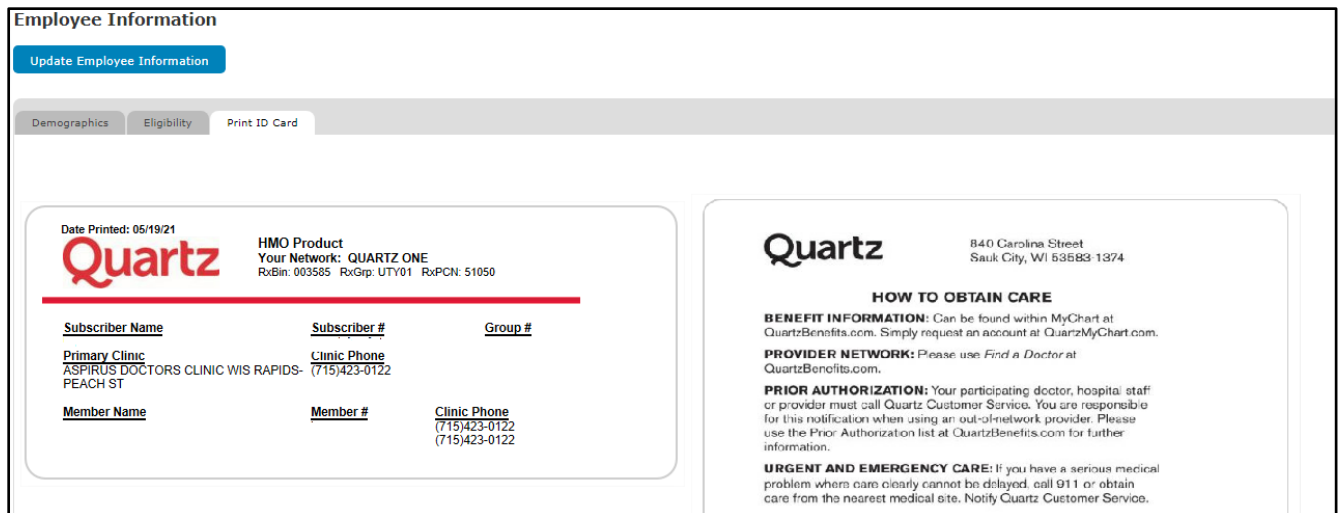
Employee Information

Update Employee Information

Demographics	Eligibility	Print ID Card

Effective Date	Coverage Through	Benefit Plan
7/1/2010	12/31/2014	9001215 - DISNEY WORLD - UNITY HMO-DEDUCTIBLE/COPAY KYP - ACTIVE

Print ID Card

Employee Information

Update Employee Information

Demographics	Eligibility	Print ID Card

Date Printed: 05/19/21

Quartz

HMO Product
Your Network: QUARTZ ONE
RxBin: 003585 RxGrp: UTY01 RxPCN: 51050

Subscriber Name	Subscriber #	Group #

Primary Clinic | Clinic Phone
ASPIRUS DOCTORS CLINIC WIS RAPIDS- (715)423-0122
PEACH ST

Member Name | Member # | Clinic Phone
(715)423-0122
(715)423-0122

Quartz
840 Carolina Street
Sauk City, WI 53583-1374

HOW TO OBTAIN CARE

BENEFIT INFORMATION: Can be found within MyChart at QuartzBenefits.com. Simply request an account at QuartzMyChart.com.

PROVIDER NETWORK: Please use *Find a Doctor* at QuartzBenefits.com.

PRIOR AUTHORIZATION: Your participating doctor, hospital staff or provider must call Quartz Customer Service. You are responsible for this notification when using an out-of-network provider. Please use the Prior Authorization list at QuartzBenefits.com for further information.

URGENT AND EMERGENCY CARE: If you have a serious medical problem where care clearly cannot be delayed, call 911 or obtain care from the nearest medical site. Notify Quartz Customer Service.

Edit Employee and Dependent Information

By clicking on the "Edit" button next to the employee's name, the employer can edit the following:
- Change Name or Address
- Change PCP
- Add Dependents
- Change COBRA Plan – See Page 19 for directions
- Change Group Health Plan
- Other

Employee Name ▾	Number	Group Name	Date of Birth	Term Date			
PRINCE P ALADDIN	99999999900	DISNEY WORLD	4/2/1963	Effective	View	Edit	Term
DONALD DUCK	55555555500	DISNEY WORLD	8/10/1977	12/31/2199	View	Edit	Term
ROBIN R HOOD	44444444400	DISNEY WORLD	12/29/1979	Effective	View	Edit	Term

Change name or address

1. Click "Edit" next to "Change Name" or "Change Address"

2. Select member(s) at the top that the change applies to, enter the effective date, and update all/any fields that are changing

Change Name

Select Members *
○ PRINCE P ALADDIN

Effective Date *
[   ] 📅

First Name
[   ]

Last Name
[   ]

Date of Birth
[   ] 📅

Change Address

Select Members *
☐ PRINCE P ALADDIN

Effective Date *
[   ] 📅

Address 1 *
[555 Magic Carpet Lane]

Address 2
[   ]

City *
[SAUK CITY]

State *
[Wisconsin   ▾]

Zip *
[53583]

County
[   ]

Work Phone Number
[   ] [   ] [   ]

Home Phone Number *
[608] [231] [0180]

Email Address
[   ]

3. Click "Continue," review for accuracy, and click "Send for Processing"

Change PCP

1. Click "Edit" next to "Change PCP"

Update Employee Information

PRINCE P ALADDIN has 18 requests previously submitted.

Select a category below to update information for the selected employee and/or their dependent(s)

Change Request

Employee Name	Prince P Aladdin
Employee Number	99999999900
Company	Disney World

Change Name	(Edit)
No Name change.	

Change Address	(Edit)
No address change.	

Change PCP	(Edit)
No Primary Care Provider change.	

Add Dependents	(Add)
No new dependents.	

Change COBRA Plan	(Edit)
No COBRA change.	

Change Group Health Plan	(Edit)
No health plan change.	

Other	(Edit)
No other changes.	

2. Select member(s) at the top that the change applies for

3. Under "Select PCP or Clinic," click "Edit"

Select Primary Care Provider

Select Family Members *
☐ PRINCE P ALADDIN

Current PCP: MARIAH A QUINN MD
WEST CLINIC OFFICE
451 JUNCTION RD
MADISON, WI 53717

Select PCP: *
None selected.

[Edit]

Effective Date: *

MM/DD/YYYY

[Continue]   Cancel

4. Click either "Select a Provider" or "Select a Clinic" and enter search criteria followed by clicking "Search." Choose a provider or clinic and click "Select." Click "Yes" or "No" (if prompted) if this new selection is the employee's current PCP. There is also an option of "Assign" If you want Quartz to assign a PCP closest to the employee's home.

Edit Primary Care Provider   **Close**

○ Select a Provider - Search by name, zip code, or city.
○ Select a Clinic - Search by name, zip code, or city.

5. Enter effective date
6. Click "Continue," review for accuracy, and click "Send for Processing"

Add Dependents

1. Click "Add" next to "Add Dependents"

2. Complete Dependent information. Required fields are noted with an asterisk (*)
3. Click "Edit" under "Select Primary Care Provider (PCP)" to choose a PCP for the dependent
4. Click "Continue"

Add Dependent

Reason For Adding Dependent *
[Please Select ▼]

Requested Effective Date *
[_____] 📅
MM/DD/YYYY

Dependent Information

Relationship *
[Please Select ▼]

First Name *   Middle Initial   Last Name *
[_____]   [___]   [_____]

Social Security Number *   Birth Date *
[___] [___] [____]   [_____]
☐ Check this box if you do not have a Social
Security Number

Gender *
[Select Gender ▼]

Address
555 Magic Carpet Lane
SAUK CITY, WI 53583
608-231-0188 (Home Phone Number)
(Edit)

Does this individual have health benefits through another policy? *
[Please Select ▼]

Select Primary Care Provider (PCP)

None selected.

[Edit]

[Continue]   Cancel

5. Indicate if there is another dependent to add. If "Yes," repeat the above process until all
    dependents are added. If "No," click "Continue," review for accuracy, and click "Send for
    Processing."

Add Dependent

Current Dependents:
Aladdin Aladdin Jr (Edit)

Do you want to add another dependent?
○ Yes
◉ No

[Continue]   Cancel

« Back to Employee Information

Change Group Health Plan

1. Click "Edit" next to "Change Group Health Plan"

Update Employee Information

PRINCE P ALADDIN has 18 requests previously submitted.

Select a category below to update information for the selected employee and/or their dependent(s)

Change Request	
Employee Name	Prince P Aladdin
Employee Number	99999999900
Company	Disney World

Change Name	(Edit)
No Name change.	

Change Address	(Edit)
No address change.	

Change PCP	(Edit)
No Primary Care Provider change.	

Add Dependents	(Add)
No new dependents.	

Change COBRA Plan	(Edit)
No COBRA change.	

Change Group Health Plan	(Edit)
No health plan change.	

Other	(Edit)
No other changes.	

2. Enter the effective date for the new coverage
3. Choose the group health plan to change to from the list of options available
4. Select the reason for the change from the drop-down menu. If "Other" is chosen, a field appears to type the reason
5. Click "Continue," review for accuracy, and click "Send for Processing"

Effective Date *

05/01/2021

Select Group Health Plan *
○ 9001000 - Disney World - QUARTZ HMO-COPAY - Active

Reason For Change *

Please Select ⌄

Please Select
Adoption of Child
Birth of Child
Increase in Hours
Loss of Other Coverage
Marriage
New Hire
Open Enrollment
Other
Rehire
Return from layoff

Other

1. Click "Edit" next to "Other"

Update Employee Information

PRINCE P ALADDIN has 18 requests previously submitted.

Select a category below to update information for the selected employee and/or their dependent(s)

Change Request

Employee Name	Prince P Aladdin
Employee Number	99999999900
Company	Disney World

Change Name   (Edit)

No Name change.

Change Address   (Edit)

No address change.

Change PCP   (Edit)

No Primary Care Provider change.

Add Dependents   (Add)

No new dependents.

Change COBRA Plan   (Edit)

No COBRA change.

Change Group Health Plan   (Edit)

No health plan change.

Other   (Edit)

No other changes.

2. Type details for "Add Other Change" and enter the effective date
3. Click Continue," review for accuracy, and click "Send for Processing"

Add Other Changes

Add Other Change *

Effective Date *

[Continue]   Cancel

Reinstating/Re-enrolling a Terminated Employee

By clicking the "Reinstate" button next to the employee's name, the employer can re-enroll the employee

1. Click "Reinstate" next to the employee's name

2. Follow the instructions 1-6 listed above in the "Complete Enrollment Form" section
3. Fill in any missing information that is not pre-filled and also review any pre-filled information for accuracy.
    - o Note – SSN is not pre-filled in as we do not store that information in the portal. Employment Status, Weekly Hours, Date Employed, Enrollment Reason, other health benefits, and Workers Compensation are also not filled in as that information needs to be re-confirmed

4. Click "Continue"
5. Follow the instructions 7-12 listed above in the "Complete Enrollment Form" section

Terming an Employee or Dependent

By clicking the "Term" button next to the employee's name, the employer can terminate either an employee or an employee's dependents

1. Click "Term" next to the employee's name

2. Select "Yes" under "Terminate Coverage" for any member that should be terminated. Leave "No" selected for any member(s) that should remain Active, if necessary.

- **NOTE** - The Term Request will only be sent for those members you select "Yes." If you only want to term a dependent(s), only select "Yes" for that dependent(s) and leave "No" selected for the employee and anyone else who should remain Active. If terming the entire family, select "Yes" for the subscriber, and the entire family will default to "Yes" as well.

3. Enter end date under "Date of Termination" for all members who will be terming. If any Active members are remaining, leave blank.
4. Select the reason for termination under "Reason" for all members who will be terming. If any Active members are remaining, leave blank.

Term Employee

Please select employee/dependents to terminate coverage and enter the date that the event took place.

Name	Terminate Coverage	Date of Termination	Reason
DONALD DUCK	● No ○ Yes		Please Select ⌄
DAISEY DUCK	○ No ● Yes	05/31/2021	Divorced or Legal Separation ⌄

Per your contract, an employee/dependent can only be termed within 60 days of our receipt of notice.

5. Click "Continue," review for accuracy, and click "Send for Processing"

Add/Move Members to COBRA

There are two ways to move members to COBRA from the Enrollment Dashboard. Both ways are outlined below. Option #1 is primarily used if the member elects COBRA coverage after the termination request is sent. Option #2 is primarily used if the member knows they want to elect COBRA before the employer sends through the termination request.

Option #1: Term the Member and then Reinstate

1. Follow all directions listed above in the "**Terming an Employee or Dependent**" section
2. After sending the term through for processing, click "Return to Enrollment Dashboard"

Thank You

The request for Prince Aladdin has been submitted for processing, please allow 7-10 days for the Enrollment to be processed and display on your Membership List.

If the request is complete, the changes will be made to your group health plan. If we have any questions, we will contact you.
Please note: completed requests will remain in this status for 90 days even if they have been successfully processed.

Return to Enrollment Dashboard   Add Additional Employee(s)

3. Follow directions listed above in the "**Reinstating/Re-enrolling a Terminated Employee**" section

- **IMPORTANT TO NOTE** – You cannot reinstate the member until after the member's term date has passed. The reinstate button will not be available until the term date has passed, as the member will still technically be "Active" in our system.

4. In the "Select a Group Health Plan" screen, select the appropriate COBRA group that the member should be moved to. If there is no corresponding COBRA group, select the Active group number that the member is/was enrolled in. Then click "Continue."

5. Once in the "Edit" section of the Employee Information, make sure to:

- Update any Employee Information if necessary
- Under the "Employment Status" drop-down, change to COBRA and
- Fill in "Weekly Hours" and "Date Employed"
- Under the "Enrollment Reason" drop-down, change to COBRA
- Update the "COBRA Start Date" to the date after the employee termed
- Select the appropriate reason for COBRA under the "COBRA Reason" drop-down

6. Click "Continue"
7. Follow the instructions 7-12 listed above in the "Complete Enrollment Form" section

Option #2: Change the Members to COBRA Plan

1. Click "Edit" next to the employee's name

2. Click "Edit" next to the "Change Group Health Plan" tab

Change COBRA Plan (Edit)

No COBRA change.

3. Select Member(s) who will be enrolling in COBRA coverage. If there is a member(s) that will not transfer to COBRA coverage from Active coverage, leave them unchecked
4. Enter the effective date of COBRA coverage, the day after the employee termed
5. Select the appropriate reason for COBRA under the "Reason for Change" drop-down
6. Select the appropriate COBRA group that the member should be moved to. If there is no corresponding COBRA group, select the Active group number that the member is/was enrolled in
7. Click "Continue," review for accuracy, and click "Send for Processing"

Change COBRA Plan

Select Family Members *
☑ PRINCE P ALADDIN

Effective Date: *
06/01/2021 📅
MM/DD/YYYY

Reason For Change *
Termination ▾

Select Group Health Plan *
◉ 9001000 - Disney World - QUARTZ HMO-COPAY - Active

[Continue]   Cancel

REQUESTS TAB

View Status of MyPlanTools Requests by Request & Status Types.

Requests by Type

Type	Created By Employer	Sent To Employee	Employer Review	Sent For Processing
New	28	11	4	3
Term	--	--	13	1
Change	--	--	29	4
Reinstatement	--	--	3	0

Status Types

- **Created by Employer** – The enrollment form has been started by the employer but has not been completed or submitted for processing
- **Sent to Employee** – An email has been sent to the employee with a link to complete the enrollment form. Once they submit their form, it will move to Employer Review
- **Employer Review –** The request needs to be reviewed by the employer before submission. The employer can return it to the employee if any changes are needed, or submit the request for processing
- **Sent for Processing** – The request has been submitted for processing. If the request is complete, the employee and/or dependent(s) will be added to the Group plan and can be viewed on the Employees tab two business days after Quartz has processed the enrollment. If Quartz has any questions while processing, you will receive an email notification. Please note: Completed requests will remain in this status for 90 days even if they have been successfully processed.

- **Cancel Enrollment Request Sent to an Employee** – If an employer needs to cancel out an enrollment request that has been sent to an employee, follow the below directions:

    - **NOTE** – This does not apply to enrollment requests that have already been sent to Quartz for processing

1. Click the underlined red number under "Sent to Employee."

Requests by Type

Type	Created By Employer	Sent To Employee
New	28	11
Term	--	--
Change	--	--
Reinstatement	--	--

2. Click "Cancel" next to the employee enrollment in need of canceling

First Name	Last Name ▾	Company #	Date Sent	Deadline Date	Type	Workflow Step		
Charlie	Bear	900003	6/22/2018	7/31/2018	New	Sent To Employee	View	Cancel
Cinderella	Charming	900003	6/7/2018	6/9/2018	New	Sent To Employee	View	Cancel
Daisy	Duck	900003	1/25/2019	1/28/2019	New	Sent To Employee	View	Cancel

3. There will be a pop-up to verify the cancellation. If you want to continue with cancellation, click "OK."

Selecting OK will cancel this request and remove it from your enrollment dashboard.
If you wish to revisit the request, you and/or your employee will need to complete a new form.

Are you sure you want to cancel this request?

[OK] [Cancel]

BENEFITS

- The Benefits tab lists all Employer Groups by Group Name, Plan, Type, Group Number, License, and Term Date

Groups

Select a group to view document information.

Search By: [   ] [Search] ☐ Display Termed Groups

Group Name ▾	Plan	Type	Group #	License	Term Date
Disney World	QUARTZ HMO-COPAY	Active	9001000	Quartz Health Benefit Plans Corporation	Effective

Viewing 1 - 1 of 1 Groups

- Click on the **Group Number/Group Name/Plan** for which you would like to view benefit information. This will display current and past benefit documents (e.g., Summary of Benefits and Coverage Schedule of Benefits, Certificate of Coverage, and Riders) for the respective coverage dates.

Group Information

Benefit information for Disney World is provided below. Select the document you want to view.

Document Name	Coverage Date
Current Documents	
Summary of Benefits and Coverage (SBC)	8/1/2020 - 7/31/2021
Schedule of Benefits for your Certificate	8/1/2020 - 7/31/2021
Certificate of Coverage	8/1/2020 - 7/31/2021
Pharmacy Rider	8/1/2020 - 7/31/2021
Artificial Insemination Rider	8/1/2020 - 7/31/2021
Flyer Preventive Services	8/1/2020 - 7/31/2021
Out of Area Dependent Rider	8/1/2020 - 7/31/2021
Previous Documents	
Summary of Benefits and Coverage (SBC)	8/1/2019 - 7/31/2020
Schedule of Benefits for your Certificate	8/1/2019 - 7/31/2020
Certificate of Coverage	8/1/2019 - 7/31/2020
Pharmacy Rider	8/1/2019 - 7/31/2020
Artificial Insemination Rider	8/1/2019 - 7/31/2020
Flyer Preventive Services	8/1/2019 - 7/31/2020
Name Change Endorsement	8/1/2019 - 7/31/2020

- You can switch Groups by selecting from the drop-down menu on the top right-hand side of the screen

Switch Group: 9001000 - Disney World ⌄

INVOICES

- The Invoices tab allows you to view current and previous invoices
- By clicking on the drop-down menu on the top right-hand side of the screen, you can filter by month and year to find the invoice you want. The default will display the last two months
- When clicking on "View Bill," a pdf version of your invoice will display

Premium Invoices

Group Name: All Groups ⌄   Month: Last 2 Months ⌄   Search

	Coverage Month	Group Number	Group Name	Premium Total
View Bill Pay Bill	June 2021	9001000	Disney World	$50,743.82
View Bill	May 2021	9001000	DISNEY WORLD	$47,994.77

- The invoices tab also allows you to pay your bill for the most recent billing cycle
- When clicking on "Pay Bill," there are two options - making a one-time payment or setting up automatic payments. You can also modify your auto-pay as well as manage payment methods

One-Time Payment
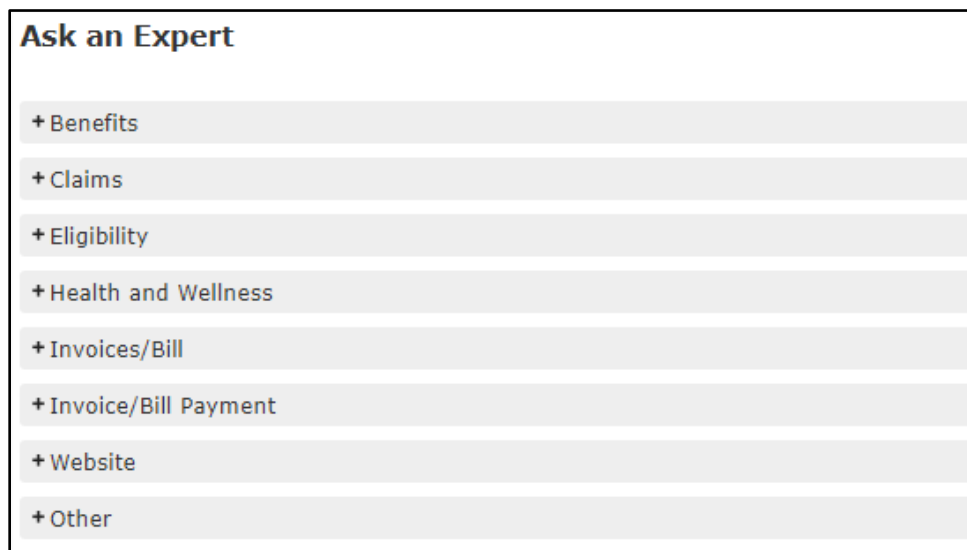

Set up Automatic Payments

FIND A DOCTOR

- By hovering over the "Find a Doctor" tab and clicking on "Quartz," this will redirect you to **the Quartz Find a Doctor search tool** on the public website
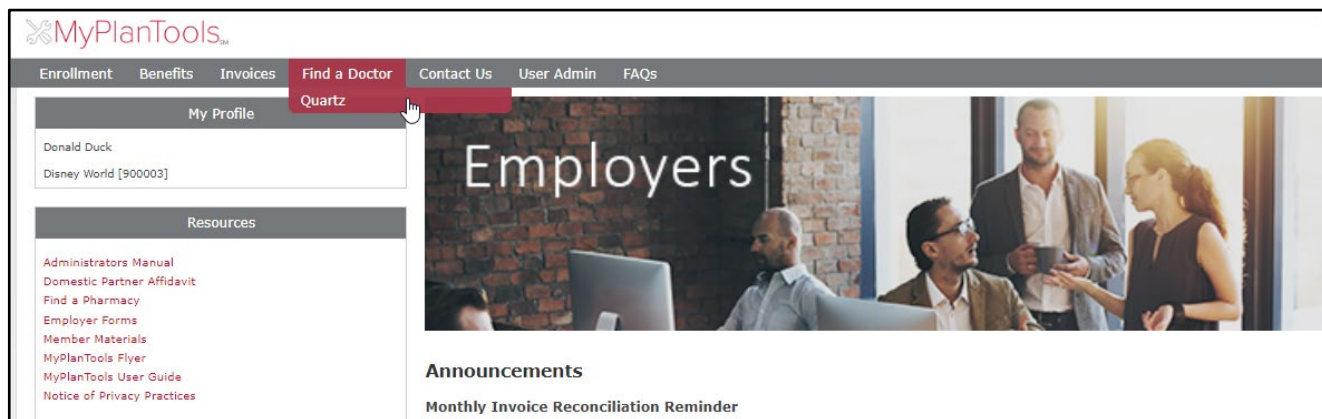
CONTACT US

Ask an Expert

- Using "Ask an Expert" allows users to view answers to frequently asked questions as well as send secure messages to Customer Service

- Click on the "+" sign next to the topic you want to ask a question on. Check to see if your question is already listed in blue. If so, click on the question, which will display the answer. If you do not see your question, click "Send a Message," type the message you want to send, provide an attachment if necessary, and click "Send."

Secure Message Center

- Secure Message Center is the inbox for secure communications with Customer Service, providing users with another way to efficiently communicate with Quartz. It is more secure than email and helps users keep track of their communications with Quartz. Our Customer Service Department strives to respond within one business day

Website feedback

- Quartz is always interested to hear opinions about what would enhance a user's experience with MyPlanTools. Take a moment to let us know how we're doing and what other functionality we could provide to make working with Quartz easier for you by sending us a message through Feedback

Feedback

We are always interested to hear your opinions about what would make your experience better and more efficient. Please take a moment to let us know how we're doing and / or what other functionality we could provide to make your job easier.

| Name: | Donald Duck |
| Comments: | |

1000 characters remaining.

Send Feedback   Cancel

USER ADMIN

- **NOTE** – Only a user with the access type of "Employer" can Add or Manage Users

ADD USER

1. Click "Add User"
2. Complete User Information. Required fields are noted with an asterisk (*)

Create User

User Information

First Name: *   Middle Initial: Last Name: *

Email Address: *   Confirm Email Address: *

Phone:

3. Complete Personal Preferences Section. Required fields are noted with an asterisk (*)

- Group Premium Billing – "Email" is the default option. NOTE - if you select "Mail," there will be a $25 paper billing fee applied
- Access – There are three types of access types:

  - User can view invoices = Employer Invoice User Type (Select if Billing Access only)
  - User can update membership = Employer Membership User Type (Select if Enrollment Access only)
  - User can view invoices, update membership and add/remove users = Employer User Type (Select if both Billing & Enrollment access)

Personal Preferences

Group Premium Billing:
- ● Email
- ○ Mail

Access: *
- ○ User can view invoices
- ○ User can update membership
- ○ User can view invoices, update membership and add / remove users

4. Complete Login Information. Required fields are noted with an asterisk (*)

   - Username – type the preferred username. If that username is already taken, you will be stopped from submitting and asked to select a new username
   - Send automated UserID and Password emails – Select "Yes" if you want an automated email sent to the user on their UserID and Password. A password email will be auto-generated for the user, and then they can update after logging in
   - Send automated Employer Welcome email – Select "Yes" if you want a welcome email with basic information sent to the user

Login Information

Username: *
[   ]

Send automated UserID and Password emails?*   Send automated Employer Welcome email?*
- ○ Yes   - ○ Yes
- ○ No   - ○ No

5. Click "Create User"

Manage Users

- You can view all users that have access to your employer MyPlanTools site. To show inactive/deactivated accounts, check the box next to "Show Inactive Accounts."

Modify User

1. Click on the user you want to modify
2. Update the field(s) you want to modify (first name, last name, email address, phone, premium billing preference, access type).

   - **NOTE** – you cannot update the username or password. You can send a password reset email to the user if they have forgotten their password. This will send an auto-generated password email

3. Click "Update User"

Modify User

User Information

First Name: *
Jane

Middle Initial:

Last Name: *
Doe

Email Address: *
happy@test.com

Phone:
608 555 2345

Personal Preferences

Group Premium Billing:
◉ Email
○ Mail

Access: *
○ User can view invoices
○ User can update membership
◉ User can view invoices, update membership and add / remove users

Login Information

Username:
janedoe11

Password:
****

Active:
Yes ▾

To prevent this person from logging in, select No.

Send user a password-reset

[Send Password-Reset]

Send automated User ID and Password

[Send New User Emails]

Send automated Employer Welcome

[Send Employer Welcome Email]

Deactivate User

1. Click on the user you want to deactivate
2. Select "No" from the "Active" drop-down menu under the Login Information Section
3. Click "Update User"

Login Information

Username:
janedoe11

Active:
No ▾ ⬅

To prevent this person from logging in, select No.

FAQ

BENEFITS

- How can I provide a copy of the benefits to my employees?

CLAIMS

- How can my employees check to see if Quartz received their claim?
- How long does it take to process and pay a claim?
- What is an Explanation of Benefits (EOB) Statement? Is this a bill?
- Why can't I see a patient's claims?

ELIGIBILITY

- How quickly should I report changes in membership to my group plan?
- What do I do when an employee is laid off from work?
- What if I have an emergency enrollment?
- What is a qualifying event?
- What is my group probationary period for new hires?
- When do I offer COBRA or State Continuation to my employees?
- Who is covered as a dependent under the employee's policy?

FIND A DOCTOR

- How can my employees find a doctor or practitioner?

PREMIUM INVOICES/BILL

- Can I pay online?
- How do I check the status of my bill?
- How do I sign up for electronic bills?
- I did not receive my invoice/e-bill
- I received my invoice/e-bill. What can I do if I don't agree with the amount due?
- May I pay my premium quarterly?
- What are my payment options?
- What if I need assistance while I'm trying to make a payment?
- What is this paper billing fee?
- When is my monthly premium payment due?
- Why did I receive a late payment notice?

QUARTZ WELL & WELLNESS PROGRAMS

- What health and wellness programs are available to my employees?

WEBSITE

- How do I provide feedback about your website?
- How do I request materials?