

2024

Online Employer Center Guide

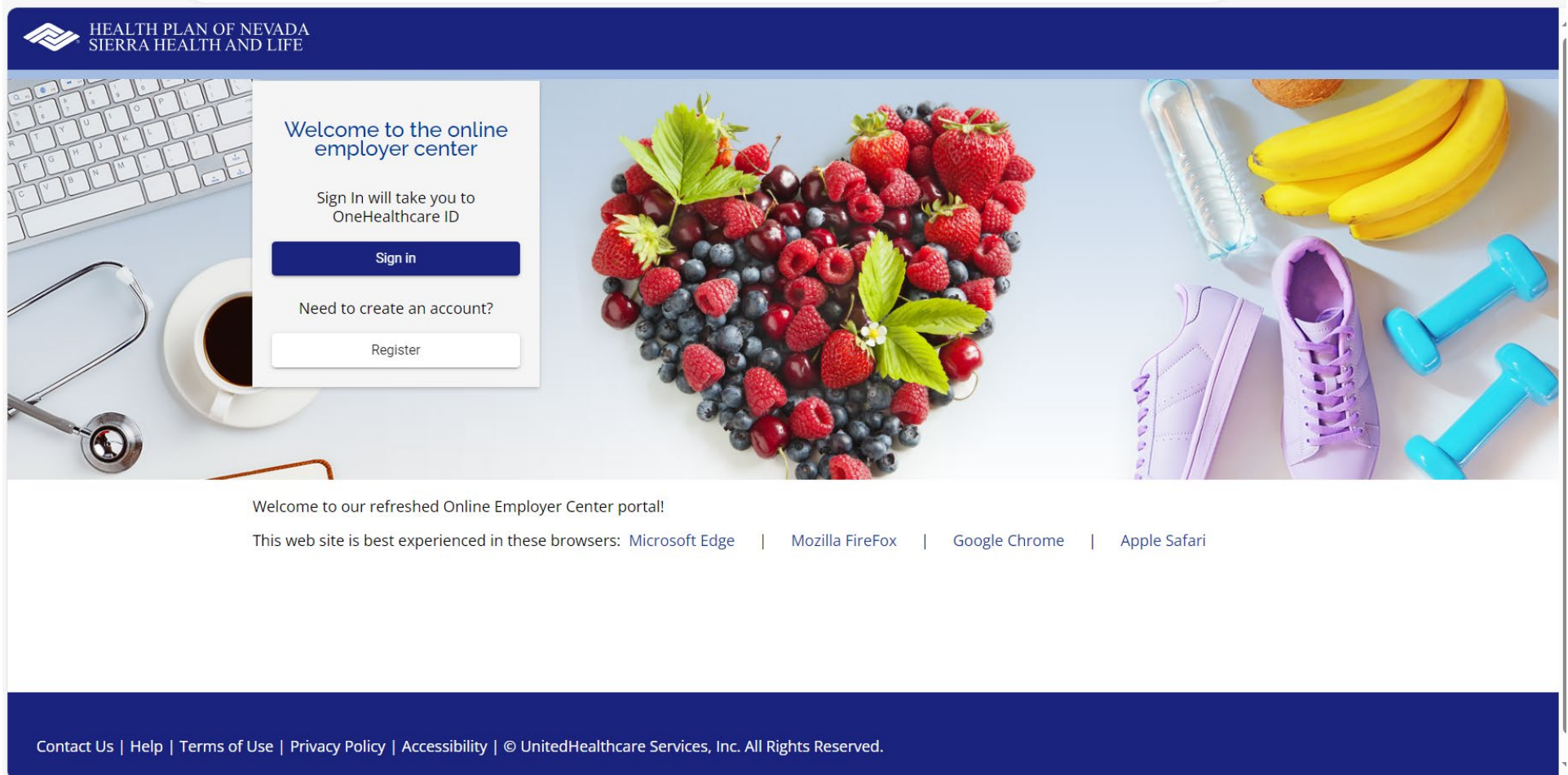


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Login Screen

Visit the [Online Employer Center \(OEC\)](#), enter your One Healthcare ID and password, and sign in.



The screenshot displays the login interface for the Health Plan of Nevada's Online Employer Center. At the top left, the logo for "HEALTH PLAN OF NEVADA SIERRA HEALTH AND LIFE" is visible. The main content area features a white login box on the left with the heading "Welcome to the online employer center". Below this, it states "Sign In will take you to OneHealthcare ID" and provides two buttons: a blue "Sign in" button and a white "Register" button. The text "Need to create an account?" is positioned above the "Register" button. The background of the page is a collage of health-related items: a keyboard, a stethoscope, a coffee cup, a heart-shaped arrangement of various fruits (strawberries, raspberries, blueberries, cherries), a water bottle, bananas, purple sneakers, and blue dumbbells. Below the main content area, a message reads "Welcome to our refreshed Online Employer Center portal!" followed by a list of recommended browsers: "This web site is best experienced in these browsers: Microsoft Edge | Mozilla FireFox | Google Chrome | Apple Safari". The footer contains a dark blue bar with white text: "Contact Us | Help | Terms of Use | Privacy Policy | Accessibility | © UnitedHealthcare Services, Inc. All Rights Reserved."

HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE

Welcome to the online
employer center

Sign In will take you to
OneHealthcare ID

Sign in

Need to create an account?

Register

Welcome to our refreshed Online Employer Center portal!

This web site is best experienced in these browsers: Microsoft Edge | Mozilla FireFox | Google Chrome | Apple Safari

Contact Us | Help | Terms of Use | Privacy Policy | Accessibility | © UnitedHealthcare Services, Inc. All Rights Reserved.

Home Screen

The Online Employer Center provides secure 24/7 access to important tools and information.

The screenshot displays the Home Screen of the Health Plan of Nevada Sierra Health and Life Online Employer Center. The interface features a dark blue header with the company logo and name on the left, and the user's role 'Employer' and a profile icon on the right. A left-hand navigation menu lists various tools such as Dashboard, Members, Membership Roster, Billing Information and Payment History, View Invoices, Contract Documents, Summary of Benefits and Coverage, CAA RxDC Reporting, Eligibility Maintenance, and Pay Premium. Below the navigation menu is a 'News' section with a welcome message and a 'Read More' button. The main content area includes an emergency notification placeholder, a 'Recent Members' table with columns for Member Number, First Name, Last Name, Date of Birth, and As of Date, and a special notices placeholder.

HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE

Employer

Emergency notification that will display at the top of the page for a serious issue...

Recent Members

Member Number	First Name	Last Name	Date of Birth	As of Date
---------------	------------	-----------	---------------	------------

Special notices and announcements will be posted here for any important communications.
Additional news items will be available from the links below the left navigation.

News

Welcome to the new Employer Center!
We hope you enjoy the new experience!

Read More

My Account

To view your profile information and employer center roles, select the icon in the top right corner.

HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE

Employer: [User Icon]

- Dashboard
- Members
- Membership Roster
- Billing Information and Payment History
- View Invoices
- Contract Documents
- Summary of Benefits and Coverage
- CAA RxDC Reporting
- Eligibility Maintenance
- Pay Premium

Emergency notification that will display at the top of the page for a serious issue...

Recent Members

Member Number	First Name	Last Name	Date of Birth	As of Date
---------------	------------	-----------	---------------	------------

Special notices and announcements will be posted here for any important communications.
Additional news items will be available from the links below the left navigation.

Welcome to the new Employer Center!
We hope you enjoy the new experience!
[Read More](#)

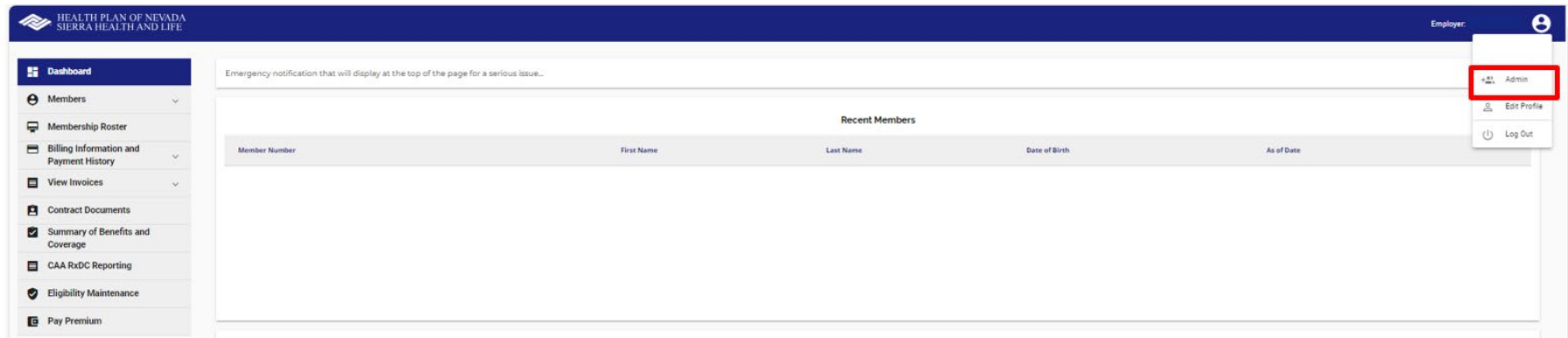
Admin

Edit Profile

Log Out


View Users and Add New Users

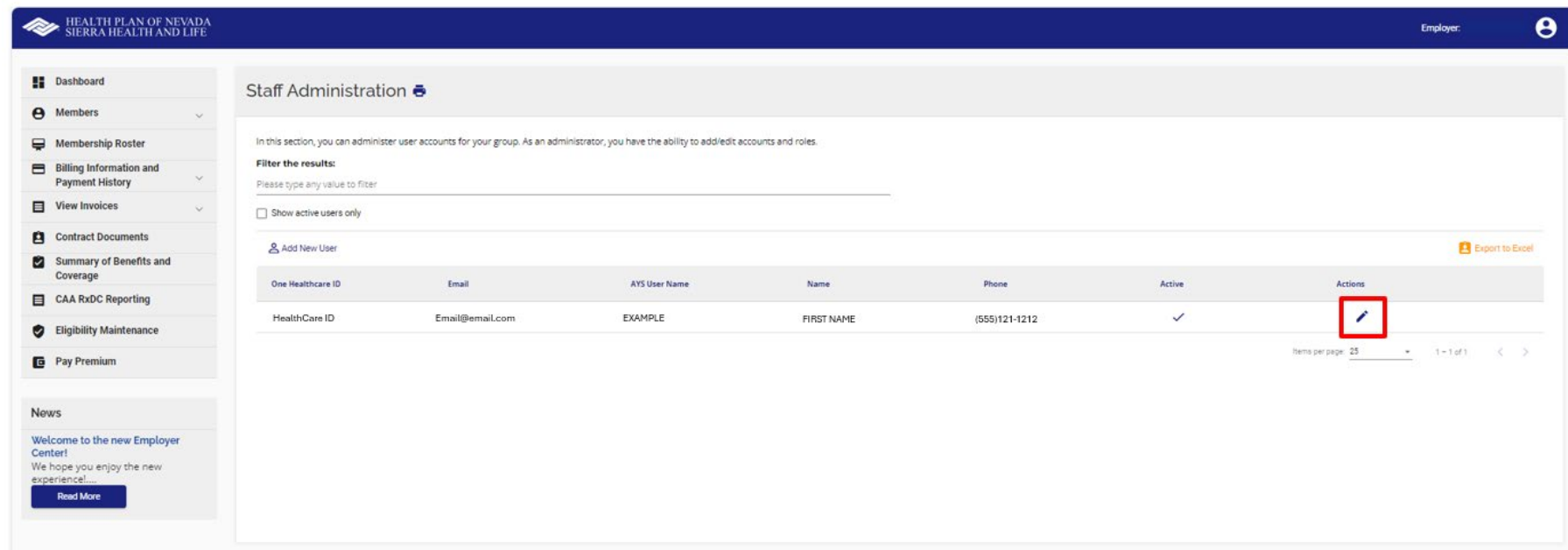
From the home screen, select **Admin** in the dropdown options. This option allows you to view, edit and add new users.



The screenshot shows the dashboard interface. On the left is a navigation menu with items like Dashboard, Members, Membership Roster, Billing Information and Payment History, View Invoices, Contract Documents, Summary of Benefits and Coverage, CAA RxDC Reporting, Eligibility Maintenance, and Pay Premium. The main content area has a header with the company logo and name, and a user profile dropdown in the top right corner. The dropdown menu is open, showing options: Admin (highlighted with a red box), Edit Profile, and Log Out. Below the dropdown is a table titled "Recent Members" with columns for Member Number, First Name, Last Name, Date of Birth, and As of Date.

Staff Administration

To view and edit current users, select the **Actions** icon 



The screenshot shows the "Staff Administration" page. It includes a navigation menu on the left and a main content area. The main content area has a header "Staff Administration" and a sub-header "In this section, you can administer user accounts for your group. As an administrator, you have the ability to add/edit accounts and roles." Below this is a "Filter the results:" section with a search input field and a "Show active users only" checkbox. There is an "Add New User" button and an "Export to Excel" button. A table lists user accounts with columns: One Healthcare ID, Email, AYS User Name, Name, Phone, Active, and Actions. The Actions column contains a pencil icon (highlighted with a red box). The table has one row of data: HealthCare ID, Email@email.com, EXAMPLE, FIRST NAME, (555)121-1212, and a checkmark in the Active column. At the bottom right of the table, there is a "Items per page: 25" dropdown and "1 - 1 of 1" pagination.

To add a new user, select **Add New User**.

The screenshot shows the 'Staff Administration' page. On the left is a navigation menu with items like Dashboard, Members, Membership Roster, Billing Information and Payment History, View Invoices, Contract Documents, Summary of Benefits and Coverage, CAA RxDC Reporting, Eligibility Maintenance, and Pay Premium. Below the menu is a 'News' section with a welcome message and a 'Read More' button. The main content area is titled 'Staff Administration' and contains a description of user management capabilities. Below this is a 'Filter the results:' section with a search input and a 'Show active users only' checkbox. A table lists user accounts with columns for One Healthcare ID, Email, AYS User Name, Name, Phone, Active, and Actions. The 'Add New User' button is highlighted with a red box. An 'Export to Excel' button is also visible. At the bottom right, there is a pagination control showing 'Items per page: 25' and '1 - 1 of 1'.

HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE

Employer:

Staff Administration

In this section, you can administer user accounts for your group. As an administrator, you have the ability to add/edit accounts and roles.

Filter the results:
Please type any value to filter

Show active users only

Add New User

One Healthcare ID	Email	AYS User Name	Name	Phone	Active	Actions
HealthCare ID	Email@email.com	EXAMPLE	FIRST NAME	(555)121-1212	✓	

Items per page: 25 1 - 1 of 1

Populate the required fields. Make sure you check the box for any **Roles** you would like the new user to have access to in the Online Employer Center. Once complete, click **Add**.

The screenshot shows the 'New User' form in the Health Plan of Nevada Sierra Health and Life system. The form is divided into three main sections: Personal Information, Member Of, and Roles.

Personal Information

Requestor Job Title *	Legal Last Name *
Legal First Name *	Email *
Phone Number * <small>Format: (000) 000-0000</small>	Fax Number * <small>Format: (000) 000-0000</small>

Member Of

Employer Id	Name	Active	Admin
12345678	EXAMPLE GROUP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Roles

Name	Active
OEM	<input checked="" type="checkbox"/>
Create Admin Access	<input checked="" type="checkbox"/>
Employer - Invoices	<input checked="" type="checkbox"/>

At the bottom of the form, there are two buttons: **Add** and **Cancel**.

Roles:

OEM – Online Eligibility Maintenance allows the user to process Adds, Terms & Changes to your membership.

Create Admin Access – Allows the user the ability to add users with admin access to the Online Employer Center. Note that users with admin access is limited to three.

Employer Invoices – Provides access to view and download monthly premium invoice

Member Search

From the home page, select the **Members** dropdown. Then search for a member to see their overview as well as benefits, coverage and copay information.

The screenshot displays the 'HEALTH PLAN OF NEVADA SIERRA HEALTH AND LIFE' interface. The top navigation bar includes the logo and the text 'Employer.' with a user profile icon. A left-hand sidebar contains a menu with the following items: 'Dashboard', 'Members' (highlighted with a red box), 'Member Search' (also highlighted with a red box), 'Membership Roster', 'Billing Information and Payment History', 'View Invoices', 'Contract Documents', 'Summary of Benefits and Coverage', 'CAA RxDC Reporting', 'Eligibility Maintenance', and 'Pay Premium'. Below the sidebar is a 'News' section with the heading 'Welcome to the new Employer Center!' and a 'Read More' button. The main content area is titled 'Member Search' and features three radio buttons for search criteria: 'Member Number' (selected), 'Member Name', and 'Social Security #'. Below these are input fields for 'Effective Date' (with the value '7/27/2024') and 'Member Number *'. At the bottom of the search area are 'Search' and 'Reset' buttons.

Steps to Search for a Member

From the home page, select the **Members** dropdown. You can search using their member ID, member name or their social security number. The effective date defaults to current date. To view employees with future effective dates be sure to change the effective date to the date their coverage begins.

Member Number Option

If you would like to search for a **subscriber only**, enter the **9 digits plus the suffix 00**. To search for a **dependent only**, enter the **9 digits plus the suffix (01, 02, etc.)**. To display the **subscriber and all dependents** underneath that subscriber, just enter the **9 digits**.

HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE

Employer:

Dashboard

Members

Member Search

Member Summary

Eligibility Summary

Deductible/Accumulators

Cost Share

ID Card

Plan Documents

Membership Roster

Billing Information and Payment History

View Invoices

Contract Documents

Summary of Benefits and

Member Search

Member Number Member Name Social Security #

Effective Date
7/27/2024

Member Number *
123456789

Search Reset

Member Number	Member Name ↑	Date of Birth	Gender	Line of Business	Products	Actions
12345678901	DEPENDENT NAME	02/28/2016	M	SHL Nevada	<ul style="list-style-type: none">MEDICALPHARMACY	⋮
12345678902	DEPENDENT NAME	01/23/2018	M	SHL Nevada	<ul style="list-style-type: none">MEDICALPHARMACY	⋮
12345678900	SUBSCRIBER NAME	09/15/1990	M	SHL Nevada	<ul style="list-style-type: none">MEDICALPHARMACY	⋮

Items per page: 25 1 - 3 of 3

Member Name Option

You are required to enter the member's first and last name. The date of birth is optional. This search option only populates the member you are searching; it will **not** include any dependents if applicable.

The screenshot shows the 'Member Search' page of the Health Plan of Nevada. The header includes the logo and name 'HEALTH PLAN OF NEVADA SIERRA HEALTH AND LIFE' on the left, and 'Employer:' with a user profile icon on the right. A left-hand navigation menu contains the following items: Dashboard, Members (with a sub-menu 'Member Search'), Membership Roster, Billing Information and Payment History, View Invoices, Contract Documents, Summary of Benefits and Coverage, and CAA RxDC Reporting. The main content area is titled 'Member Search' and features three radio buttons for search criteria: 'Member Number', 'Member Name' (which is selected), and 'Social Security #'. Below these are three input fields: 'Effective Date' (with the value '7/27/2024' and a calendar icon), 'First Name *', and 'Last Name *'. A 'Date of Birth' field with a calendar icon is also present. At the bottom of the search area are two buttons: 'Search' and 'Reset'.

Member Social Security Number Option

Populate the 9-digit social security number. This search option only populates the member you are searching; it will **not** include any dependents if applicable.

The screenshot shows the 'Member Search' interface for the Health Plan of Nevada. The top navigation bar is dark blue with the logo and name 'HEALTH PLAN OF NEVADA SIERRA HEALTH AND LIFE' on the left, 'Employer:' on the right, and a user profile icon. A left sidebar contains a menu with 'Dashboard', 'Members' (expanded), 'Membership Roster', 'Billing Information and Payment History', 'View Invoices', and 'Contract Documents'. The 'Member Search' option is highlighted in blue. The main content area is titled 'Member Search' and features three radio buttons: 'Member Number', 'Member Name', and 'Social Security #', with the latter selected. Below the radio buttons, there is an 'Effective Date' field with the value '7/27/2024' and a calendar icon. A 'Social Security #' field with an asterisk is present, followed by 'Search' and 'Reset' buttons.

Member Roster

From the home page, select the **Member Roster**. This feature will display your entire group roster or if your group has multiple subgroups, you can access each individually.

The effective date defaults to current date. To view employees with future effective dates, change the effective date to the date their coverage begins.

In this screen you can also pull up a single member using either first and last name; date of birth is optional or the member ID.

The screenshot shows the 'Membership Roster' search interface. On the left is a navigation menu with options: Dashboard, Members, Membership Roster (selected), Billing Information and Payment History, View Invoices, Contract Documents, Summary of Benefits and Coverage, CAA RxDC Reporting, Eligibility Maintenance, and Pay Premium. Below the menu is a 'News' section with a 'Read More' button. The main content area is titled 'Membership Roster' and contains search fields for Last Name, First Name, Date of Birth, Member Effective Date, Member ID, and Subgroup. A 'Show Dependents' checkbox is also present. The 'Member Effective Date' is set to 8/20/2024, and the 'Subgroup' is set to 'All'. 'Search' and 'Reset' buttons are at the bottom of the search area.

HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE

Employer:

Dashboard

Members

Membership Roster

Billing Information and Payment History

View Invoices

Contract Documents

Summary of Benefits and Coverage

CAA RxDC Reporting

Eligibility Maintenance

Pay Premium

News

Welcome to the new Employer Center!

We have a new look and feel. Please let us know what you think!

Read More

Membership Roster

Last Name

First Name

Date of Birth

Member Effective Date
8/20/2024

Member ID


Show Dependents

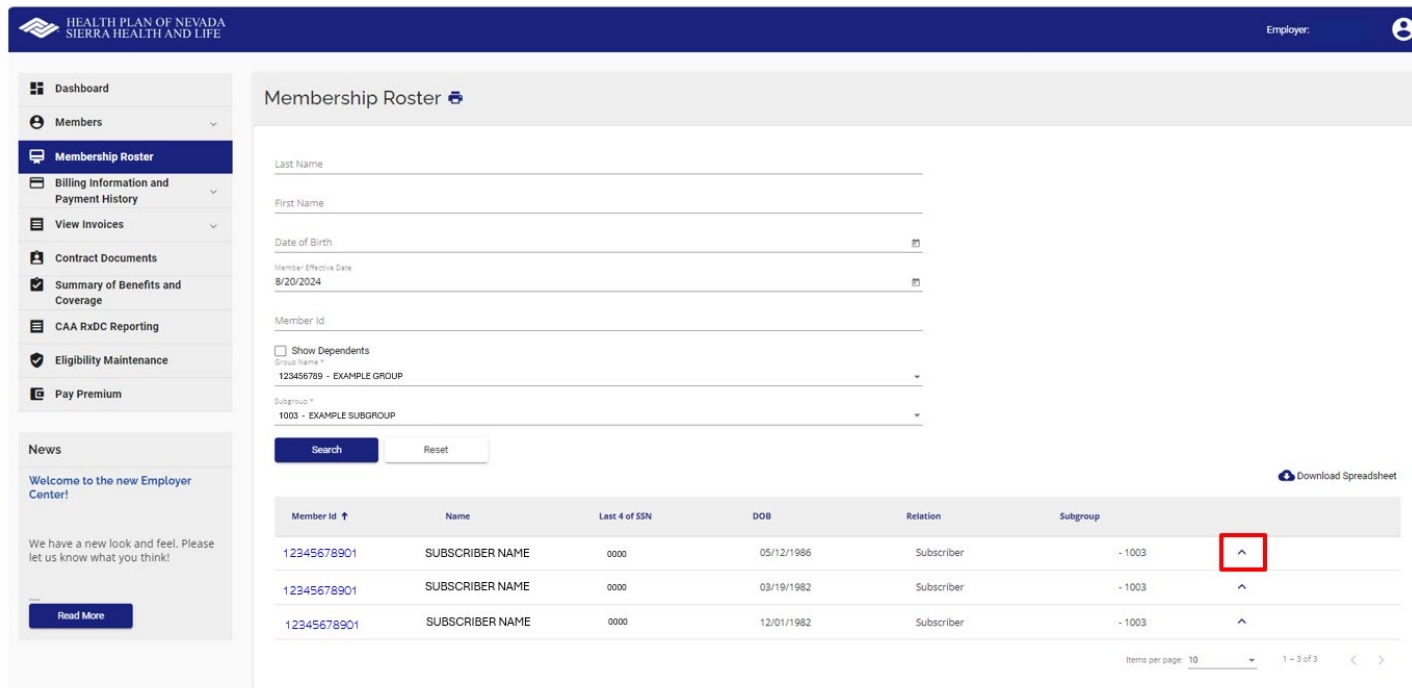
123456789 - EXAMPLE GROUP

Subgroup *


All

Search Reset

From the Membership Roster, you can expand on the subscriber to gain a quick view of covered members, class, benefits description, contact information and ID card by clicking 



HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE

Employer: 

Dashboard
Members
Membership Roster
Billing Information and Payment History
View Invoices
Contract Documents
Summary of Benefits and Coverage
CAA RxDC Reporting
Eligibility Maintenance
Pay Premium

News
Welcome to the new Employer Center!
We have a new look and feel. Please let us know what you think!
[Read More](#)







Membership Roster

Last Name
First Name
Date of Birth
Member Effective Date
Member ID
 Show Dependents
Group Name *
123456789 - EXAMPLE GROUP
Subgroup *
1003 - EXAMPLE SUBGROUP

[Search](#) [Reset](#) [Download Spreadsheet](#)

Member Id ↑	Name	Last 4 of SSN	DOB	Relation	Subgroup	
12345678901	SUBSCRIBER NAME	0000	05/12/1986	Subscriber	- 1003	↑
12345678901	SUBSCRIBER NAME	0000	03/19/1982	Subscriber	- 1003	↑
12345678901	SUBSCRIBER NAME	0000	12/01/1982	Subscriber	- 1003	↑

Items per page: 10 1 - 3 of 3

Member Id ↑	Name	Last 4 of SSN	DOB	Relation	Subgroup											
123456789	SUBSCRIBER NAME	0000	05/12/1986	Subscriber	- 1003	▼										
<table border="1"> <thead> <tr> <th>Covered Members</th> <th>Class</th> <th>Benefits Description</th> <th>Contact Info</th> <th>View ID Card</th> </tr> </thead> <tbody> <tr> <td>A - Family</td> <td>100B - POS GOLD KEY EMPLOYEES ADMIN AND MANAGEMENT</td> <td> Medical - SG NX POS 2023 Solutions Gold 25/0/500/20% Eff Dt: 11/1/2023 Pharmacy - SG NX RX POS 2023 Solutions Gold Adv 15/40/70/300 6500/0 Eff Dt: 11/1/2023 </td> <td></td> <td></td> </tr> </tbody> </table>							Covered Members	Class	Benefits Description	Contact Info	View ID Card	A - Family	100B - POS GOLD KEY EMPLOYEES ADMIN AND MANAGEMENT	Medical - SG NX POS 2023 Solutions Gold 25/0/500/20% Eff Dt: 11/1/2023 Pharmacy - SG NX RX POS 2023 Solutions Gold Adv 15/40/70/300 6500/0 Eff Dt: 11/1/2023		
Covered Members	Class	Benefits Description	Contact Info	View ID Card												
A - Family	100B - POS GOLD KEY EMPLOYEES ADMIN AND MANAGEMENT	Medical - SG NX POS 2023 Solutions Gold 25/0/500/20% Eff Dt: 11/1/2023 Pharmacy - SG NX RX POS 2023 Solutions Gold Adv 15/40/70/300 6500/0 Eff Dt: 11/1/2023														
12345678901	SUBSCRIBER NAME	0000	03/19/1982	Subscriber	- 1003	↑										
12345678901	SUBSCRIBER NAME	0000	12/01/1982	Subscriber	- 1003	↑										

Items per page: 10 0 of 0 1 - 3 of 3

On the Membership Roster, each member's ID is hyperlinked. Click on it to view the member summary, eligibility summary, deductible/accumulators, cost share, ID card and plan documents. Each category can be navigated on the menu located on the lefthand side of the screen.

**HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE** Employer:

Name Subscriber Name	Member Number 123456789	As of Date 08/20/2024	Gender M	Date of Birth 05/12/1986	Example Group
-------------------------	----------------------------	--------------------------	-------------	-----------------------------	---------------

- Dashboard
- Members** ^
- Member Search
- Member Summary
- Eligibility Summary
- Deductible/Accumulators
- Cost Share**
- ID Card
- Plan Documents

Membership Roster

- Billing Information and Payment History v
- View Invoices v
- Contract Documents
- Summary of Benefits and Coverage
- CAA RxDC Reporting
- Eligibility Maintenance

Member Copay Information

Medical Copay
Pharmacy Copay

Display as a list Display by category

As of Date *

Search

Care Options ↑	HMO Plan Provider	PPO Plan Provider	Non Plan Provider
24/7 Advice Nurse	\$0	\$0	\$0
24/7 Virtual Visits	\$0	Not Covered	Not Covered
24/7 Virtual Visits	\$0	Not Covered	Not Covered
Ambulance	\$250	\$250	\$250
Ambulatory Surgical Facility Services	\$200	20% After CYD*	50% After CYD*
Anesthesia	\$150	20% After CYD*	50% After CYD*
Anesthesia, Inpatient	\$150	20% After CYD*	50% After CYD*
Anti-Cancer Therapy	\$25	20% After CYD*	50% After CYD*
Applied Behavioral Analysis (ABA) for treatment of Autism for Members up to age 22	\$25	\$0	\$0

Billing and Payment History

Select the **Billing Information and Payment History** to view up to 36 months of invoices and payment history.

The screenshot displays the user interface for the Health Plan of Nevada Sierra Health and Life. The top navigation bar includes the logo and name of the health plan on the left, the text "Employer:" followed by a user profile icon on the right, and the title "Group Billing & Payment Information" in the center. A left-hand sidebar menu lists various options: Dashboard, Members, Membership Roster, Billing Information and Payment History (highlighted with a red box), Group Billing & Payment Information, View Invoices, Contract Documents, Summary of Benefits and Coverage, CAA RxDc Reporting, Eligibility Maintenance, and Pay Premium. The main content area features a search filter for "Group Billing & Payment Information" with two tabs: "Billing Information" (selected) and "Payment Information". Below the tabs are input fields for "Group Name *", "Subgroup *", "From Date +" (set to 8/1/2023), and "To Date +" (set to 8/22/2024). At the bottom of the search area are "Search" and "Reset" buttons.

Select Billing Information

You can view up to 36 months invoices and payment history.

- Use the **Select a group** dropdown to select your group.
- Then use the **Select a subgroup** dropdown to choose your subgroup.
- Enter **From/To Date**.
- Click **Search**.

Group Billing & Payment Information


Billing Information Payment Information

Group Name *
123456789 - EXAMPLE GROUP

Subgroup *
1003 - EXAMPLE SUBGROUP

From Date *
8/1/2023

To Date *
8/23/2024

 The grid displays the invoices submitted within the last year. To see older invoices, change the search dates and click Search.

Invoice Number	Due Date	End Date	Total Billed Amount	Total Received	Payment Status
12345678901	09/01/2024	09/30/2024	\$2,554.44	\$0.00	Unpaid
12345678902	08/01/2024	08/31/2024	\$2,554.44	\$2,554.44	Paid In Full
12345678903	07/01/2024	07/31/2024	\$2,554.44	\$2,554.44	Paid In Full
12345678904	06/01/2024	06/30/2024	\$2,554.44	\$2,554.44	Paid In Full

Select Payment Information

You can view up to 36 months of payment history.

- Use the **Select a group** dropdown to select your group.
- Then use the **Select a subgroup** dropdown to choose your subgroup.
- Enter **From/To Date**.
- Click **Search**.

Group Billing & Payment Information

Billing Information **Payment Information**


Group Name *
123456789 - EXAMPLE GROUP

Subgroup *
1003 - EXAMPLE SUBGROUP

From Date *
8/1/2023

To Date *
8/23/2024

Search Reset

 The grid displays the invoices submitted within the last year. To see older invoices, change the search dates and click Search.

Received Date	Check No./Trans Type	Payment Method	Receipt Amount
08/01/2023	RS_ECHCK	Bank Draft (EFT)	\$27,223.88
09/05/2023	RS_ECHCK	Bank Draft (EFT)	\$26,163.94
10/04/2023	RS_ECHCK	Bank Draft (EFT)	\$26,220.79
11/07/2023	RS_ECHCK	Bank Draft (EFT)	\$26,154.53
12/05/2023	RS_ECHCK	Bank Draft (EFT)	\$26,809.70

View Invoices

View Invoices allows you to download your monthly premium invoice. You have your choice of a PDF or CSV format.

The screenshot displays the user interface for the Health Plan of Nevada Sierra Health and Life. The top navigation bar includes the company logo and name on the left, and the text 'Employer:' followed by a user profile icon on the right. A left-hand sidebar menu contains several options: 'Dashboard', 'Members', 'Membership Roster', 'Billing Information and Payment History', 'View Invoices', 'Contract Documents', 'Summary of Benefits and Coverage', 'CAA RxDC Reporting', 'Eligibility Maintenance', and 'Pay Premium'. The 'View Invoices' option is highlighted with a red rectangular box, and a sub-menu item 'Group Invoices' is visible below it. The main content area is titled 'Group Invoices' and features a form with the following fields: 'Group Name *' (123456789 - EXAMPLE GROUP), 'Subgroup *' (1003 - EXAMPLE SUBGROUP), 'Invoices *' (07/01/2024), and 'Invoice Format *' (CSV). At the bottom of the form are two buttons: 'View Invoice' and 'Reset'.

A history by subgroup is available. Select the month you would like to download in the **Invoice** dropdown.

Group Invoices 


Group Name *
12345678 - EXAMPLE GROUP

Subgroup *
1234 - EXAMPLE SUBGROUP

Invoices *
08/01/2024
07/01/2024
06/01/2024
05/01/2024
04/01/2024
03/01/2024



Select an **Invoice Format** (PDF or a comma-separated values (CSV) Excel file). Both format can be saved, attached to an email or printed.

Group Invoices 

Group Name *
12345678 – EXAMPLE GROUP

Subgroup *
1234 – EXAMPLE SUBGROUP

Invoices *
08/01/2024

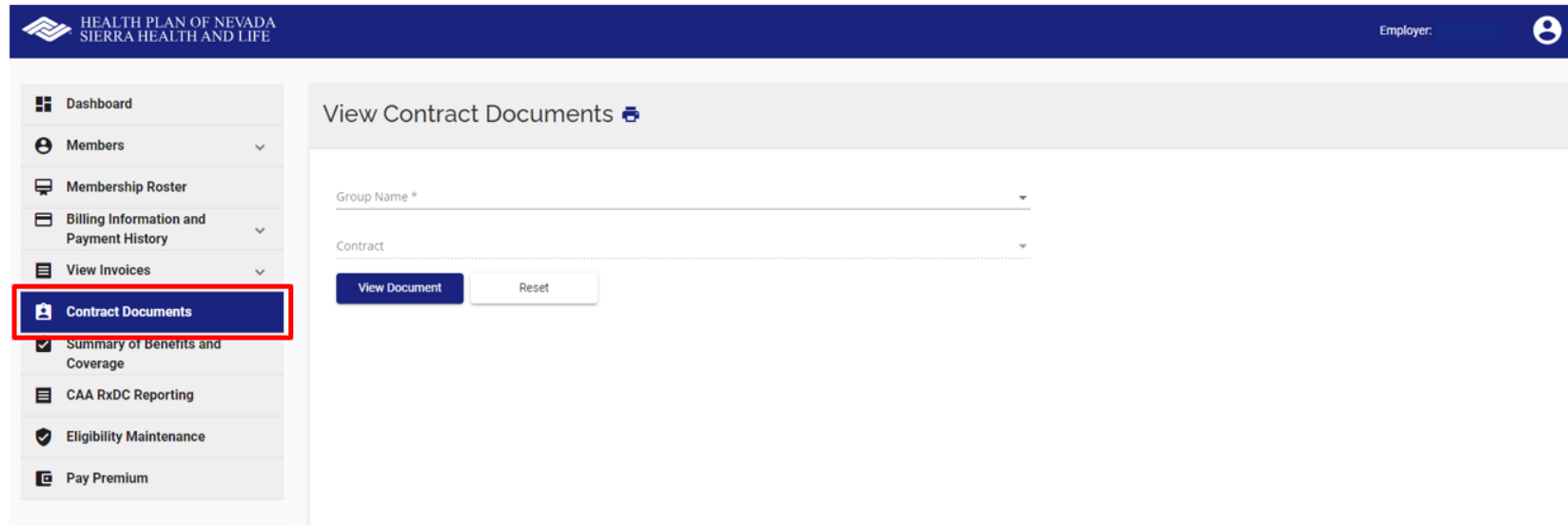
Invoice Format *
PDF

- PDF
- CSV




Contract Documents

Contract Documents provides you with access to a PDF of your groups contractual documents so you can easily access them when needed.



Use the **Contract** dropdown to choose the **Contract Document** you would like to view.

View Contract Documents 

Group Name *
12345678 - EXAMPLE GROUP

Contract *
EXAMPLE CONTRACT DOCUMENT

Summary of Benefits and Coverage

Summary of Benefits and Coverage will display the current Summary of Benefits & Coverage (SBC) for each benefit available to your employees.

- Dashboard
- Members
- Membership Roster
- Billing Information and Payment History
- View Invoices
- Contract Documents
- Summary of Benefits and Coverage
- CAA RxDC Reporting
- Eligibility Maintenance
- Pay Premium

Summary of Benefits and Coverage

12345678 - EXAMPLE GROUP

1003 - EXAMPLE SUBGROUP

As Of Date *
8/7/2024

Submit Reset

Summary of Benefits and Coverage: What this Plan Covers & What You Pay For Covered Services Coverage Period: 09/01/2024 - 09/01/2024

Sierra Health and Life: EPO 2018 My Solutions Gold 7 \$25/\$50/\$75/50% Coverage for: | Plan Type:

! The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, www.sierrahealthandlife.com. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms see the Glossary. You can view the Glossary at www.healthcare.gov/sbc-glossary or call 1-800-888-2264 to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall deductible?	\$2,500 / Insured and \$5,000 / Family	Generally, you must pay all of the costs from providers up to the deductible amount before this plan begins to pay. If you have other family members on the plan, each family member must meet their own individual deductible until the total amount of deductible expenses paid by all family members meets the overall family deductible.
Are there services covered before you meet your deductible?	Yes. Preventive care from Plan Providers is covered before you meet your deductible.	This plan covers some items and services even if you haven't yet met the deductible amount. But a copayment or coinsurance may apply. For example, this plan covers certain preventive services without cost sharing and before you meet your deductible. See a list of covered preventive services at https://www.healthcare.gov/coverage/preventive-care-benefits/ .
Are there other deductibles for specific services?	Yes. \$750/Insured, \$1,500/Family deductible for Tiers 3 and 4 for prescription drug coverage. There are no other specific deductibles.	You must pay all of the costs for these services up to the specific deductible amount before this plan begins to pay for these services.
What is the out-of-pocket limit for this plan?	\$7,900 / Insured and \$15,800 / Family	The out-of-pocket limit is the most you could pay in a year for covered services. If you have other family members in this plan, they have to meet their own out-of-pocket limits until the overall family out-of-pocket limit has been met.
What is not included in the out-of-pocket limit?	Penalties for not complying with SHL's Managed Care Program, premiums, balance-billing charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Will you pay less if you use a network provider?	Yes. See www.sierrahealthandlife.com/Member/Doctor-or-Provider or call 1-800-888-2264 for a list of network providers.	This plan uses a provider network. You will pay less if you use a provider in the plan's network. You will pay the most if you use an out-of-network provider, and you might receive a bill from a provider for the difference between the provider's charge and what your plan pays (balance billing). Be aware your network provider might use an out-of-network provider for some services (such

CAA RxDC Reporting

Under the Consolidated Appropriations Act (CAA), health insurers offering fully insured group health plans are required to report data annually regarding prescription drugs and health care spending to the Departments of Health and Human Services, Labor, and Treasury (Tri-Agencies). This information must be submitted to CMS through a web portal set up by the Centers for Medicare & Medicaid Services (CMS). This page will assist in collecting the required data HPN/SHL must submit on behalf of the employer group.



Dashboard

Members

Membership Roster

Billing Information and
Payment History

View Invoices

Contract Documents

Summary of Benefits and
Coverage

CAA RxDC Reporting

Eligibility Maintenance

Pay Premium

News

Welcome to the new Employer
Center!

We hope you enjoy the new
experience!....

Read More

CAA RxDC Reporting

Disclaimer:

The Employer Group agrees that by providing the requested information for the CAA Rx Data Collection annual filing, the information is accurate and complete. The Employer group understands that this information will be reported by Health Plan of Nevada and Sierra Health and Life to CMS on behalf of the Employer Group. Prior to updating the information, the Employer Group should confirm they have coordinated with their broker, if applicable, to avoid duplicate submissions.

- [WorkSheet](#)
- [FAQ's](#)

Group Name *

Eligibility Maintenance

To manage your group's adds, terms and changes, select **Eligibility Maintenance**.



- Dashboard
- Members
- Membership Roster
- Billing Information and Payment History
- View Invoices
- Contract Documents
- Summary of Benefits and Coverage
- CAA RxDC Reporting
- Eligibility Maintenance**
- Pay Premium

News

Welcome to the new Employer Center!
We hope you enjoy the new experience!....

[Read More](#)



Emergency notification that will display at the top of the page for a serious issue...

Recent Members

Member Number	First Name	Last Name	Date of Birth	As of Date
12345678901	FIRST NAME	LAST NAME	01/11/2000	08/07/2024
12345678902	FIRST NAME	LAST NAME	08/23/1982	08/05/2024
12345678903	FIRST NAME	LAST NAME	03/19/1982	08/05/2024
12345678904	FIRST NAME	LAST NAME	08/08/1982	08/05/2024
12345678905	FIRST NAME	LAST NAME	03/04/1972	08/05/2024

Special notices and announcements will be posted here for any important communications.
Additional news items will be available from the links below the left navigation.

A new window will appear and display your options located on the left of the screen.

 HEALTH PLAN OF NEVADA A UnitedHealthcare Company
 SIERRA HEALTH AND LIFE A UnitedHealthcare Company
Add Subscriber/Family
Add Dependent
Reinstate
Term Member
Change
Member Language Race Ethnicity
History Log
Log Out

Online Enrollment

For Employers

Use this online service for your enrollment needs.

If you experience any issues during your transaction, please contact your Group Services representative for assistance.

Add Subscriber/Family

Add Subscriber/Family allows you to add a new member by entering the requested information. Make sure all the required fields marked with an asterisk (*) are filled out. When each page is complete, click **Next** to continue. On the final page, select **Submit Changes**.

HEALTH PLAN OF NEVADA
A UnitedHealthcare Company

SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

Add Subscriber/Family

Add Dependent

Reinstate

Term Member

Change

Member Language Race Ethnicity

History Log

Log Out

Add Subscriber/Family

Employee Information

Name: Group:
Subgroup:
Class:

* Indicates Required Field
Please do not use the Browser 'Back' button to navigate within this application.

Employment [Employee Information](#) [Eligible Family Members](#) [Coverage Selection](#) [Other Medical Coverage](#) [Review](#) [Submit Changes](#)

Employment Information

*Group:

*Subgroup:

*Class:

*DOMF First of month following *DOH Date of Hire

*Reason for Application:

*Life Event refers to a Special Enrollment Event. Legal documentation must be submitted to your Group Services Representative.

*Date of Hire:

If the employee is reclassified to full-time status, please provide the date of full-time employment

Employment

*Requested Effective Date: Dept. Code (if applicable):

Position/Title: *Hours Worked Per Week:

Employee # (if applicable):

COBRA

Start Date: End Date:


Employee Name

*Last Name:


*First Name:

Middle:

A confirmation page will display with the member's ID number and option to view and print a PDF of the health plan ID card.



HEALTH PLAN OF NEVADA
A UnitedHealthcare Company



SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

- Add Subscriber/Family
- Add Dependent
- Reinstate
- Term Member
- Change
- Member Language Race Ethnicity
- History Log
- Log Out

Confirmation Add/EXAMPLE TEST

Employee Information

Name: TEST, EXAMPLE Group: Example Group
 Subgroup: - 1003
 Class: 1004 - PPO SILVER 7000 KEY EMPLOYEES ADMIN AND

* Indicates Required Field
Please do not use the Browser 'Back' button to navigate within this application.

Confirmation #:

The following new addition request was requested:

Name	Member ID	Requested Effective Date	Relationship	Date of Birth	Reason for Application	PCP	OBGYN	Benefits	ID Cards
TEST, EXAMPLE	123456789	8/1/2024	Subscriber	12/25/2020	New Hire			M P 1 D V	ID Card

Date and Time Stamp: Updated by EMPLOYER:

To review member eligibility, visit the Online Member Center and select Member Search. Cobra transactions will be processed within 4 business days. The ID Card links display a temporary ID Card image. Physical ID Cards will be mailed in 7 - 10 business days.

Submission of this request does not guarantee coverage. It may be subject to review, audit and request for additional information before the requested transaction is approved or denied.

Please print this page for your records.

Add Dependent

Add Dependent allows you to add a new dependent to an existing member by entering the requested information. Make sure all the required fields marked with an asterisk (*) are filled out. When each page is complete, click **Next** to continue. On the final page, select **Submit Changes**.

HEALTH PLAN OF NEVADA
A UnitedHealthcare Company

SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

Add Subscriber/Family

Add Dependent

Reinstate

Term Member

Change

Member Language Race Ethnicity

History Log

Log Out

Add Dependent/

Employee Information

Name: Subscriber Name Group: Example Group
Subgroup: - 1003
Class: 1008 - POS GOLD KEY EMPLOYEES ADMIN AND MANA

Subscriber: 123456789-00

* Indicates Required Field
Please do not use the Browser 'Back' button to navigate within this application.

Eligible Family Members Other Medical Coverage Submit Changes

*Reason for Application: Select One...
Life Events refer to a Special Enrollment Event. Legal documentation must be submitted to your Group Services Representative.

*Requested Effective Date:

Edit/Add Family Member

*Relationship: Select One... HPN Primary Care Provider Code:
*Last Name: HPN OB/GYN Provider Code:
*First Name: Note: If Provider information is blank, HPN will automatically assign a default provider
Middle: Within the past six months have you used tobacco regularly (four or more times per week on average excluding religious or ceremonial use)?
*Gender: Select One... Yes No
*Date of Birth:
*SSN:

Coverage Selection

Type	Effective Date	Product	Description
Medical	11/01/2023		Product description
Pharmacy	11/01/2023		Product description
Dental	11/01/2023		Product description
Vision	11/01/2021		Product description
Health and Wellness	11/01/2021		Product description

Save Cancel

Family Members

Cancel Next

A confirmation page will display with the dependent's member ID number and option to view and print a PDF of the health plan ID card.

HEALTH PLAN OF NEVADA
A UnitedHealthcare Company

SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

Add Subscriber/Family

Add Dependent

Reinstate

Term Member

Change

Member Language Race Ethnicity

History Log

Log Out

Confirmation Dependent Add

Employee Information

Name: TEST, EXAMPLE Group: Example Group

Subgroup: - 1003

Class: 1004 - PPO SILVER 7000 KEY EMPLOYEES ADMIN AND

* Indicates Required Field
Please do not use the Browser 'Back' button to navigate within this application.

Confirmation #:

The following new addition request was requested:

Name	Member ID	Requested Effective Date	Relationship	Date of Birth	Reason for Application	PCP	OBGYN	Benefits	ID Cards
TEST, EXAMPLE	123456789	8/1/2024	Subscriber	12/25/2020	Newborn			MP1DV	ID Card

Date and Time Stamp: Updated by EMPLOYER:

To review member eligibility, visit the Online Member Center and select Member Search. Cobra transactions will be processed within 4 business days. The ID Card links display a temporary ID Card image. Physical ID Cards will be mailed in 7 - 10 business days.

Submission of this request does not guarantee coverage. It may be subject to review, audit and request for additional information before the requested transaction is approved or denied.

Please print this page for your records.

Reinstate

Reinstate allows you to reinstate coverage for an employee or dependent who previously had coverage by entering the requested information. Make sure all the required fields marked with an asterisk (*) are filled out. When each page is complete, click **Next** to continue. On the final page, select **Submit Changes**.

HEALTH PLAN OF NEVADA
A UnitedHealthcare Company

SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

Add Subscriber/Family

Add Dependent

Reinstate

Term Member

Change

Member Language Race Ethnicity

History Log

Log Out

Reinstate/

Employee Information

Name: Example Member Group: 12345678 - Example Group

Status: Subgroup: 12345678-1001 - Example Subgroup

Subscriber: Class: 1002 - ALL EE'S POS

* Indicates Required Field
Please do not use the Browser 'Back' button to navigate within this application.

Employment Employee Information Reinstate/Update Dependents Add Dependents Coverage Selection Review Submit Changes

Employment Information

*Group: 12345678 - Example Group

*Subgroup: 12345678 - 1001 - Example Subgroup

*Class: 1002 - ALL EE'S POS

*Reinstate Reason: Select One...


*Rehire Date:

*Requested Effective Date:


*Hours Worked Per Week:

Cancel Next

A confirmation page will display with the member ID number and option to view and print a PDF of the health plan ID card.



HEALTH PLAN OF NEVADA
A UnitedHealthcare Company



SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

- Add Subscriber/Family
- Add Dependent
- Reinstate
- Term Member
- Change
- Member Language Race Ethnicity
- History Log
- Log Out

Confirmation

Employee Information

Name: TEST, EXAMPLE Group: Example Group
 Subgroup: - 1003
 Class: 1004 - PPO SILVER 7000 KEY EMPLOYEES ADMIN AND

* Indicates Required Field
 Please do not use the Browser 'Back' button to navigate within this application.

Confirmation #:

The following new addition request was requested:

Name	Member ID	Requested Effective Date	Relationship	Date of Birth	Reason for Application	PCP	OBGYN	Benefits	ID Cards
TEST, EXAMPLE	123456789	8/1/2024	Subscriber	12/25/2020	None			M P 1 D V	ID Card

Date and Time Stamp: Updated by EMPLOYER:

To review member eligibility, visit the Online Member Center and select Member Search. Cobra transactions will be processed within 4 business days. The ID Card links display a temporary ID Card image. Physical ID Cards will be mailed in 7 - 10 business days.

Submission of this request does not guarantee coverage. It may be subject to review, audit and request for additional information before the requested transaction is approved or denied.

Please print this page for your records.

Termination of a Member

If you selected **Term Member**, complete a search to locate the member (dependent or subscriber). Then enter in the **Termination Date** and choose the **Termination Reason** from the dropdown menu. When each page is complete, click **Next** to continue. On the final page, select **Submit Changes**.

HEALTH PLAN OF NEVADA
A UnitedHealthcare Company

SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

Add Subscriber/Family

Add Dependent

Reinstate

Term Member

Change

Member Language Race Ethnicity

History Log

Log Out

Term Member /

Employee Information

Name: Example Member Group: 12345678 - Example Group
Subgroup: 12345678 - Example Subgroup
Subscriber: Class: 1002 - ALL EE'S POS

* Indicates Required Field
Please do not use the Browser 'Back' button to navigate within this application.

Terminate Employee Information Submit Changes

Terminate a Dependent or Subscriber

Enter the member's last day of coverage. The termination date must not exceed the contracted allowable as defined in the Group Enrollment Agreement.

When terminating the entire family, enter a termination date and reason on the subscriber record only. All dependents will be assigned the same termination date as their subscriber.

Family Members

Relationship	Name	Termination Date	Termination Reason	Subscriber ID
Subscriber	EXAMPLE MEMBER		Select One...	12345678-00

Cancel Next

Change a Member's Information

If you selected **Change**, you'll be able to edit the **Subgroup**, **Class**, **Employee Demographic**, **Dependent Demographic** and **Coverage Selection** information as needed. When each page is complete, click **Next** to continue. On the final page, select **Submit Changes**. Class changes are only available during open enrollment.

HEALTH PLAN OF NEVADA
A UnitedHealthcare Company

SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

Add Subscriber/Family

Add Dependent

Reinstate

Term Member

Change

Member Language Race Ethnicity

History Log

Log Out

Change/

Employee Information

Name: EXAMPLE MEMBER Group: 12345678 - Example Group
Subgroup: 12345678 - 1002 - Example Subgroup
Class: 1002 - ALL EE'S POS

Subscriber:

* Indicates Required Field
Please do not use the Browser 'Back' button to navigate within this application.

Employment Employee Demographic Dependent Demographic Coverage Selection Submit Changes

Current Information

Subgroup: 12345678 - 1002 - Example Subgroup
Class: 1002 - ALL EE'S POS

Coverage

*Group: 12345678 - Example Group
*Subgroup: 12345678 - 1001 - Example Subgroup
*Class: 1002 - ALL EE'S POS

Type	Effective Date	Product	Description
Medical	11/01/2023		Product description
Pharmacy	11/01/2023		Product description
Dental	11/01/2023		Product description

*FOMF First of month following *DOH Date of Hire



Employment Information

Dept. Code: (if applicable): 6720
Employee # (if applicable):
*Requested Effective Date:

Cancel Next

Member Language Race Ethnicity

This option will allow you to update **Language, Race & Ethnicity** for members and dependents.

 HEALTH PLAN OF NEVADA A UnitedHealthcare Company	<h3>MemberLanguageRaceEthnicity/</h3>													
 SIERRA HEALTH AND LIFE A UnitedHealthcare Company	<p>Employee Information</p> <table><tr><td>Name:</td><td>EXAMPLE MEMBER</td><td>Group:</td><td>12345678 - Example Group</td></tr><tr><td></td><td></td><td>Subgroup:</td><td>12345678 - 1002 - Example Subgroup</td></tr><tr><td></td><td></td><td>Class:</td><td>1002 - ALL EE'S POS</td></tr></table>		Name:	EXAMPLE MEMBER	Group:	12345678 - Example Group			Subgroup:	12345678 - 1002 - Example Subgroup			Class:	1002 - ALL EE'S POS
Name:	EXAMPLE MEMBER	Group:	12345678 - Example Group											
		Subgroup:	12345678 - 1002 - Example Subgroup											
		Class:	1002 - ALL EE'S POS											
Add Subscriber/Family	Subscriber: :													
Add Dependent	* Indicates Required Field Please do not use the Browser 'Back' button to navigate within this application.													
Reinstate	Language:	<input type="text"/>												
Term Member	Race:	<input type="text"/>												
Change	Ethnicity:	<input type="text"/>												
Member Language Race Ethnicity														
History Log														
Log Out														

Cancel	Submit
Print	Main Menu

History Log

The **history log** will provide you with a history of transactions that were completed in the Online Eligibility Maintenance portal. You'll be able to view the user ID that completed the transaction, date, time, type of transaction along with the confirmation ID. There is an option to export this table to excel.

The screenshot displays the 'History Log' interface. On the left is a navigation menu with options: 'Add Subscriber/Family', 'Add Dependent', 'Reinstate', 'Term Member', 'Change', 'Member Language Race Ethnicity', 'History Log' (highlighted with a red box), and 'Log Out'. The main content area shows the 'History Log' title and search filters: 'User ID: EXAMPLE USER ID 007', 'Group ID: 12345678', 'Group Name: EXAMPLE GROUP', 'From Date: 08/27/2023', and 'To Date: 08/27/2024'. A 'Search' button is present. Below the filters is a table with columns: 'TransactionDate', 'Subscriber Id', 'Subscriber Name', 'Type', and 'Confirmation Id'. An 'Export' button is located above the table. The table contains two rows of data.

TransactionDate	Subscriber Id	Subscriber Name	Type	Confirmation Id
8/27/2024 8:12:04 AM	00	EXAMPLE MEMBER	ADDSUBSCRIBER	1234
8/27/2024 8:11:06 AM	00000000	EXAMPLE MEMBER	TERM	1234

Pay Premium

From the homepage, select the **Pay Premium** tab. If you only have one subgroup, you'll automatically be directed to the payment page. You'll be able to set up a single payment or auto payment using your checking, debit or credit card account. Please contact your Group Services representative for credit card limitations. Currently, we do not take Discover credit cards. If you have more than one subgroup, you'll be directed to another screen to select a subgroup.

The screenshot shows the user interface of the Health Plan of Nevada Sierra Health and Life portal. At the top, there is a dark blue header with the logo and name of the health plan on the left, and the text 'Employer:' followed by a user profile icon on the right. Below the header is a left-hand navigation menu with several options: 'Dashboard', 'Members', 'Membership Roster', 'Billing Information and Payment History', 'View Invoices', 'Contract Documents', 'Summary of Benefits and Coverage', 'CAA RxDC Reporting', 'Eligibility Maintenance', and 'Pay Premium'. The 'Pay Premium' option is highlighted with a red rectangular border. To the right of the navigation menu is the main content area. At the top of this area is a placeholder for an emergency notification. Below that is a section titled 'Recent Members' which contains a table with five columns: 'Member Number', 'First Name', 'Last Name', 'Date of Birth', and 'As of Date'. The table lists five members with their respective details. At the bottom of the main content area is another placeholder for special notices and announcements.

HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE

Employer:

Dashboard

Members

Membership Roster

Billing Information and Payment History

View Invoices

Contract Documents

Summary of Benefits and Coverage

CAA RxDC Reporting

Eligibility Maintenance

Pay Premium

Emergency notification that will display at the top of the page for a serious issue...

Recent Members

Member Number	First Name	Last Name	Date of Birth	As of Date
12345678901	FIRST NAME	LAST NAME	01/11/2000	08/07/2024
12345678902	FIRST NAME	LAST NAME	08/23/1982	08/05/2024
12345678903	FIRST NAME	LAST NAME	03/19/1982	08/05/2024
12345678904	FIRST NAME	LAST NAME	08/08/1982	08/05/2024
12345678905	FIRST NAME	LAST NAME	03/04/1972	08/05/2024

Special notices and announcements will be posted here for any important communications.
Additional news items will be available from the links below the left navigation.

News

Welcome to the new Employer Center!
We hope you enjoy the new experience!....
[Read More](#)

Choose one Subgroup:

Pay Premium will be direct you to this page. Select the desired **Subgroup** to be directed to the payment screen to make your payment.

HEALTH PLAN OF NEVADA
SIERRA HEALTH AND LIFE

Employer

- Dashboard
- Members
- Membership Roster
- Billing Information and Payment History
- View Invoices
- Contract Documents
- Summary of Benefits and Coverage
- CAA RxDC Reporting
- Eligibility Maintenance
- Pay Premium**

News

Pay Premium

Your **premium**, the amount you pay for your health plan, is due on the first day of each month. You can make a one-time payment or set up automatic monthly payments.

It's **important to review your payment schedule each year**. Your January invoice may reflect changes you elected during open enrollment and/or a renewal rate change. Payments made will apply to any outstanding premium balance before they are applied to your current plan year. **In addition, make sure you only have one payment schedule set up to avoid overpayment.**

You don't have any pending payments.

Total Billed Amount: \$0.00 **Total Amount Paid: \$0.00** **Total Amount Due: \$0.00**

Subgroup Name * **1234 – EXAMPLE SUBGROUP**

Filter by date range:
Start Date: 7/8/2024 End Date: 8/8/2024

Keyword:
Invoice Number

Create Date: 07/08/2024 **DUE DATE: 8/1/24**
Invoice #241900001281 **END DATE: 8/31/24**

Status: Paid In Full

Total Billed	Total Received
\$611.84	\$611.84

Invoice Error

Payment Options Screen:

Select the desired **payment option**. You can set up a single payment or auto payment using your checking, debit or credit card account. Please contact your Group Services representative for credit card limitations. Currently, we do not take Discover credit cards. You can also update your communication preferences, review your payment history and account activity.

For the best experience, we recommend using the Chrome or Microsoft Edge browser. If you have any questions, please contact your billing or service representative.

Welcome LLL ENTERPRISES INC You have a payable balance.

Your current balance is \$1,764.11

Save time, worry less

Autopay

Automatically pay my bill every month

[Setup automatic payments](#)

One-time Payment

✓ ✓ ✓

Make a payment

[Pay Now](#)

[Update your communication preferences Update Now](#)

Autopay Setup:

Select the **Setup automatic payments** button.

For the best experience, we recommend using the Chrome or Microsoft Edge browser. If you have any questions, please contact your billing or service representative.

Welcome LLL ENTERPRISES INC DBA DAISHO SUSHI! You have a payable balance.

Your current balance is \$1,764.11

Autopay
Save time, worry less
Automatically pay my bill every month
Setup automatic payments


One-time Payment
Make a payment
Pay Now

Update your communication preferences [Update Now](#)

Autopay Setup Continued:
Select the **day of the month** you want the payment to draft. The click **Next**.

ONLINE CENTER [Quick Menu](#) | [My Account](#) | [Admin](#) | [Eligibility Maintenance](#) | [Pay Premium](#)

[COVID-19 Return to Worksite Information](#)
*** Menu Options Enabled Once Member Has Been Selected.
[Home](#) > [Pay Premium](#)

 For the best experience, we recommend using the Chrome or Microsoft Edge browser. If you have any questions, please contact your billing or service representative.

Set up AutoPay

AutoPay Setup Choose Payment Payment Confirmation

Online Automatic Payments

Use online automatic payments to pay your bill each month based on the payment schedule you select. Since payments are automatically deducted from your bank account, please remember to update or delete any bank information when it is no longer valid.

Payment Amount

Total amount due on my account
The total amount due on your account will be paid automatically. This total may not match your most recent billing statement due to premium payments or adjustments processed after your invoice date.

Payment Date

Pay on the same day: of every month

Please select the monthly date you have selected to pay your bill is on or before the due date. Selecting a date after the due date may cause your account to become past due.

Your AutoPay will process on the selected day each month.

Autopay Setup Continued:

Select **Credit or Debit Card** or **E-Check (ACH)**.

ONLINE CENTER 60007152

[Quick Menu](#) | [My Account](#) | [Admin](#) | [Eligibility Maintenance](#) | [Pay Premium](#)

[COVID-19 Return to Worksite Information](#)
*** Menu Options Enabled Once Member Has Been Selected.
[Home](#) > [Pay Premium](#)

For the best experience, we recommend using the Chrome or Microsoft Edge browser. If you have any questions, please contact your billing or service representative.

Set up AutoPay

AutoPay Setup Choose Payment Payment Confirmation

Choose your payment method

Credit or Debit Card

E-Check

Set up AutoPay

Payment Amount	Total amount due on my account
Payment Date	Pay on the same day: 1st of every month

Review your preferences for payment receipt & reminders

Autopay Setup Continued:

Scroll down and select **Email** or **Phone**. Enter the email address or cell phone number for your payment related notifications.

payment receipt & reminders.

Choose how to receive your receipt for this payment and notifications for upcoming payments. Providing the contact information would be treated as consent to communicate.

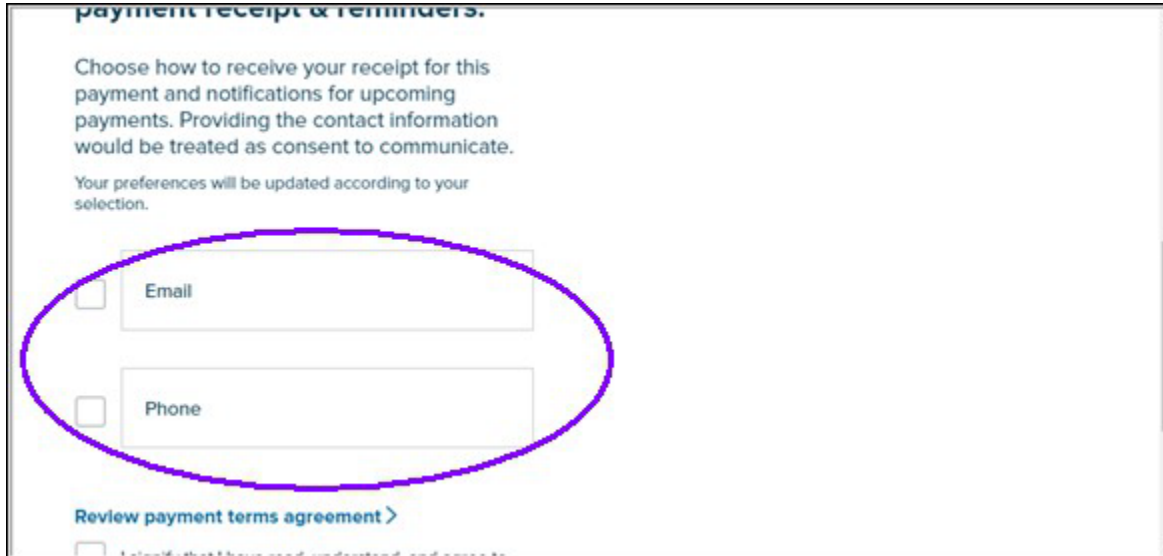
Your preferences will be updated according to your selection.

Email

Phone

[Review payment terms agreement >](#)

I understand that I have read, understood, and agree to



Autopay Setup Continued:

Scroll down and check the box under **Review payment terms agreement**.



Review payment terms agreement >

I signify that I have read, understand, and agree to the terms of the pre-authorized recurring payments terms and conditions

Back Next

The **Terms and Conditions** will open.



Terms and Conditions

Print

SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

HEALTH PLAN OF NEVADA
A UnitedHealthcare Company

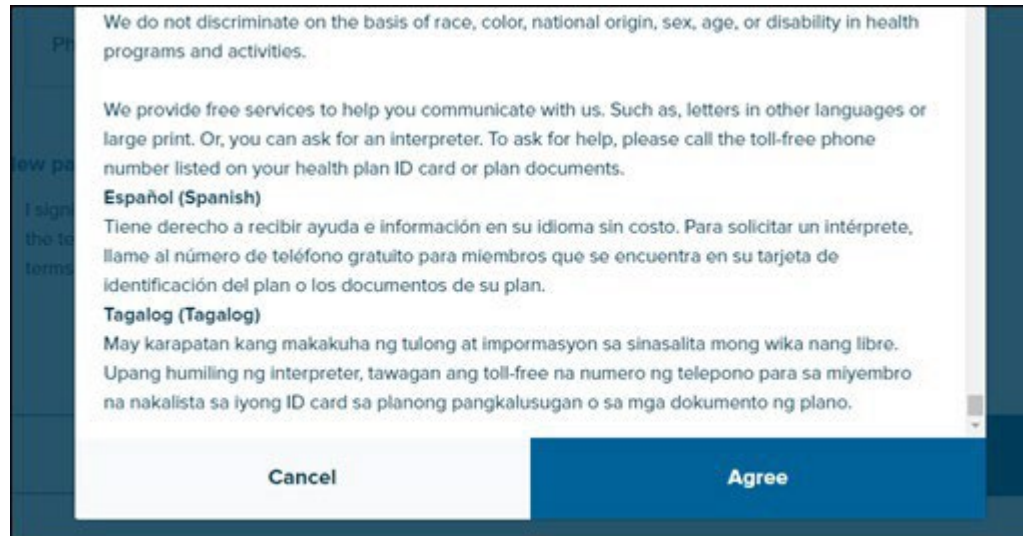
THIS PAYMENT SERVICE IS SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS

Do not use or access this Website or Service if You do not agree to be bound by these Terms and Conditions

These Terms and Conditions ("Terms and Conditions") are in effect for all transactions processed through this payments website ("Website") on or after May 1st, 2022 and apply to and govern Your access to and use of this Website, the Service and all Alternative Channels. This payment processing service is offered to You on behalf of your Biller Health Plan of Nevada, Inc. (HPN).

Autopay Setup Continued:

Scroll all the way down and click **Agree**.



We do not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

We provide free services to help you communicate with us. Such as, letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free phone number listed on your health plan ID card or plan documents.

Español (Spanish)
Tiene derecho a recibir ayuda e información en su idioma sin costo. Para solicitar un intérprete, llame al número de teléfono gratuito para miembros que se encuentra en su tarjeta de identificación del plan o los documentos de su plan.

Tagalog (Tagalog)
May karapatan kang makakuha ng tulong at impormasyon sa sinasalita mong wika nang libre. Upang humiling ng interpreter, tawagan ang toll-free na numero ng telepono para sa miyembro na nakalista sa iyong ID card sa planong pangkalusugan o sa mga dokumento ng plano.

Cancel **Agree**

The **Terms and Conditions** box will close and bring you back to the Autopay screen. Click **Next**.



Review payment terms agreement >

I signify that I have read, understand, and agree to the terms of the pre-authorized recurring payments terms and conditions

Back **Next**

Note: Please note that you must scroll all the way to the bottom of the Terms and Conditions to be able to click Agree.

Autopay Setup Continued:

When the payment method box opens, enter your payment information. Then click **Confirm payment** button.

Optional: You can click the box to save the payment information for future use.

New Credit or Debit Card ✕

Name on card
LLL ENTERPRISES INC DBA DAISHO SUSHI LLL ENTERPRISES INC DBA DAISHO

Credit/debit card number AMEX M VISA

Expiration date (MM/YY)

Billing address

Country/Region
US-United States ▼

State/Province
State/Province ▼

ZIP/Postal code

City

Address line 1

Address line 2

Save this card for future use

[Back](#) [Confirm payment](#)

Autopay Setup Confirmation:

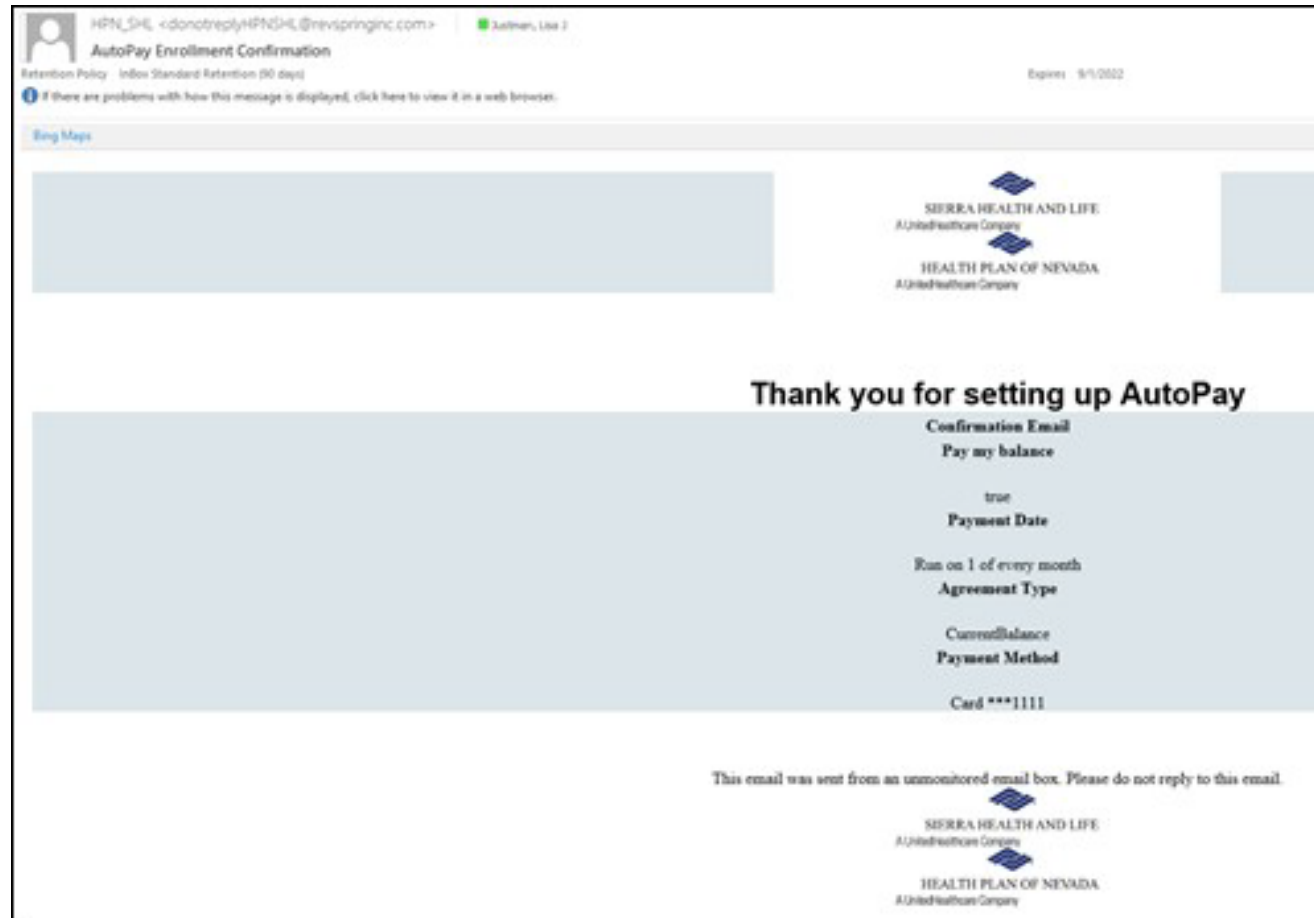
The confirmation screen will display. You can **Print**, **Email** or **Text** the confirmation. Note: If you opt-in for text and/or email notifications, you'll receive the following message.

Your autopay is confirmed. Thank you!

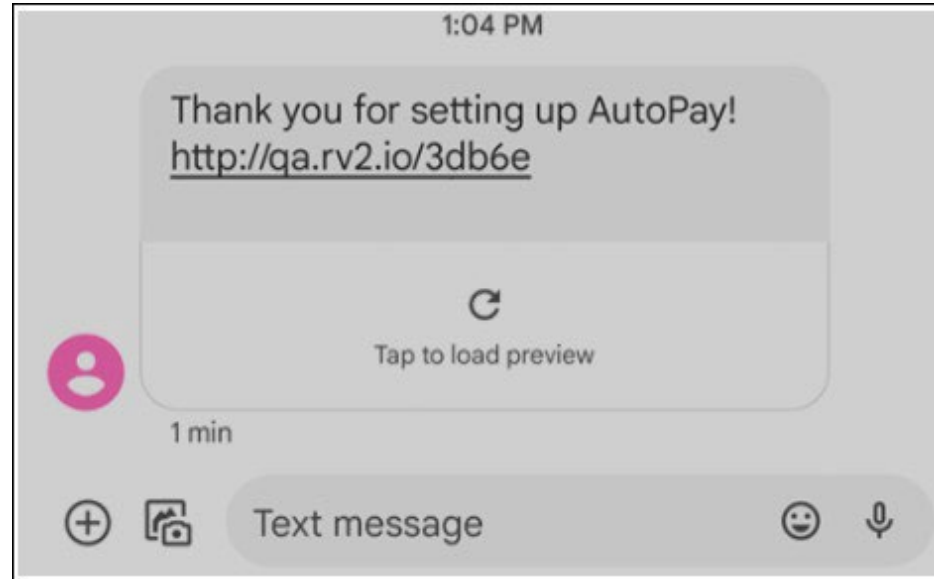
Your account will be charged on the scheduled date.

Current Balance Agreement Type: CurrentBalance	Your receipt
Payment Amount: Total amount due on my account	<input checked="" type="checkbox"/> Email
Starting Date: Pay on the same day: 1st of every month	<input type="checkbox"/> Text
	<input type="checkbox"/> Print

Autopay Setup Confirmation – Email Notification Example:



Autopay Setup Confirmation – Text Notification Example:



Thank you for reading and using this guide. We hope you have found it informative and useful.

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