



# AmeriCorpsBenefits

☆☆☆☆☆ Benefiting Those Who Work for the Benefit of Others!

## Welcome to the AmeriCorpsBenefits VOLUNTEER Insurance Program

### Grantee Guide

#### **VOLUNTEER Enrollment Process**

This guide provides all the information you will need to complete the VOLUNTEER enrollment for the AmeriCorpsBenefits Insurance Program. The enrollment process includes a set of screens designed to help you gather information about your AmeriCorpsBenefits VOLUNTEERS.

Please read through this guide before you begin your enrollment. Make sure you have all the VOLUNTEER information ready to enter into the website. At the end of the process, you will be able to review and confirm all the information before submitting to ASRM.

Please click the link e-mailed to you to enter the **AmeriCorpsBenefits Website**. Have your **Username** and **Password** ready >>>

1

Select: **GRANTEE**

The screenshot shows the AmeriCorpsBenefits website. At the top, there is a navigation bar with links for HOME, GRANTEE, PARTICIPANTS, and CONTACT US. Below this is a red header with the text "Grantees Overview". The main content area is titled "2009 - 2010 Year Program" and includes sections for Overview, F.A.Q., and Materials. The Overview section states: "Choose from among two health plans -- each differs in monthly premium and benefits -- and select the one that best matches the needs of your organization and your Volunteers." The Materials section includes a link to "A Quick Glance at 2009-2010 Program Year AmeriCorpsBenefits Health Plans" and a link to the "2009-2010 AmeriCorpsBenefits Plan Brochure". An Adobe Acrobat Reader logo is visible in the bottom right corner of the page content.

2

Select:

**For roster entry or changes.**  
[Please click here.](#)

The screenshot shows the AmeriCorpsBenefits website page for roster entry or changes. The header features the AmeriCorps logo and the text "The call to volunteer service... It's the spirit of America. It's the spirit of the Corps. And in that spirit, we believe good work deserves great rewards!". The page is titled "Grantees" and includes a navigation bar with HOME, GRANTEE, PARTICIPANTS, and CONTACT US. The main content area is titled "Grantees" and includes a section for "For roster entry or changes" with a link to "Please click here." and a section for "For step-by-step enrollment instructions" with a link to "click here for help." The page also features a list of benefits under the heading "AmeriCorpsBenefits. Meaningful health insurance protection:" and a section for "Click Here for the 2009/2010 Program Year" with a link to "Click Here for the 2009/2010 Program Year". A login section includes a text input field for "Enter the first 7 characters of your group number." and a "Click Here to Log In" button. The page concludes with the text "If you have questions, e-mail us at admin@americorpsbenefits.com." and the AmeriCorpsBenefits logo and tagline "It's Your Choice. To Their Benefit."

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## User Login

Enter the **Username and Password (this was e-mailed to you after submission of the Request for Group Insurance)**.

Select **Login**.

Click the **Forgot The Password?** button if you have cannot remember the password. Enter the e-mail address used when registering, and if the system finds a match, the password will be sent to the e-mail address found.

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Your Account Information will be displayed here.

Select



You may change your password at this time by clicking **Change Password**.

Review the account information on this screen. If you need to make any changes **click Edit Information**.

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## Account Information

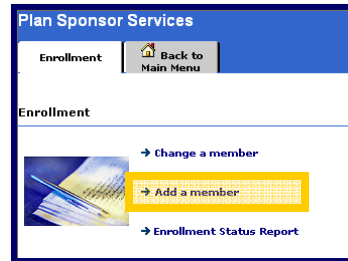
Select



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### Account Information

Select **Add a member**



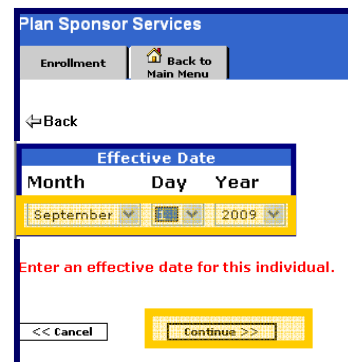
The screenshot shows the 'Plan Sponsor Services' interface. At the top, there is a blue header with 'Plan Sponsor Services' and a 'Back to Main Menu' button. Below the header, there is a navigation bar with 'Enrollment' and 'Back to Main Menu'. The main content area is titled 'Enrollment' and contains three links: 'Change a member', 'Add a member' (highlighted with a yellow box), and 'Enrollment Status Report'.

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### Account Information

Enter **Effective Date** for this VOLUNTEER

Select **Continue>>**



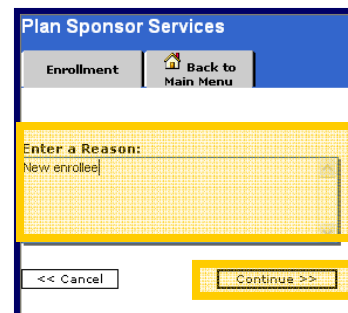
The screenshot shows the 'Plan Sponsor Services' interface. At the top, there is a blue header with 'Plan Sponsor Services' and a 'Back to Main Menu' button. Below the header, there is a navigation bar with 'Enrollment' and 'Back to Main Menu'. The main content area is titled 'Effective Date' and contains a form with three dropdown menus for 'Month', 'Day', and 'Year'. The 'Month' dropdown is set to 'September', the 'Day' dropdown is set to '1', and the 'Year' dropdown is set to '2009'. Below the form, there is a red text prompt: 'Enter an effective date for this individual.' At the bottom, there are two buttons: '<< Cancel' and 'Continue >>' (highlighted with a yellow box).

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### Effective Date

Enter **Reason**

Select **Continue>>**



The screenshot shows the 'Plan Sponsor Services' interface. At the top, there is a blue header with 'Plan Sponsor Services' and a 'Back to Main Menu' button. Below the header, there is a navigation bar with 'Enrollment' and 'Back to Main Menu'. The main content area is titled 'Enter a Reason:' and contains a text input field with the text 'New enrollee'. Below the input field, there are two buttons: '<< Cancel' and 'Continue >>' (highlighted with a yellow box).

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### Account Information

Complete all the **(Required)** fields, then

Select **Change Coverage**

The screenshot shows the 'Plan Sponsor Services' interface. At the top, there are buttons for 'Enrollment' and 'Back to Main Menu'. Below these are navigation buttons: '<< Cancel', 'Terminate this Member', and 'Send Information >>'. The main section is titled 'Members Information' and contains several required fields: Social Security Number (format: (123-12-1234)), First Name, Last Name, Address 1, City, State (dropdown), Zip Code, Gender (dropdown), Birth Date (Month, Day, Year dropdowns, format: (MM/DD/YYYY)), and Date of Hire (Month, Day, Year dropdowns, format: (MM/DD/YYYY)). A 'Change Coverage' button is highlighted at the bottom. Below the form is a 'Coverage Information' section with the message 'No coverage information was found for this individual.' and another 'Change Coverage' button.

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### Account Information

Enter **Effective Date** of change. If new enrollment, this date is the effective date of the VOLUNTEER

Select **Continue>>**

The screenshot shows the 'Plan Sponsor Services' interface. At the top, there are buttons for 'Enrollment' and 'Back to Main Menu'. Below these is a 'Back' button. The main section is titled 'Effective Date' and contains a form with three dropdown menus: 'Month' (set to September), 'Day' (set to 1), and 'Year' (set to 2009). Below the form is a red message: 'Enter an effective date for this individual.' At the bottom, there are buttons for '<< Cancel' and 'Continue >>', with the latter being highlighted.

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Select **Coverage**

Select **Change/Add Coverage**

The screenshot shows the 'Plan Sponsor Services' interface. At the top, there are buttons for 'Enrollment' and 'Back to Main Menu'. Below these is a 'Coverages' section with a list of options. The first option is 'AMERICORPS PLAN 1' with a radio button selected. Below it is 'EE FULL MONTH' with a radio button. At the bottom, there are buttons for '<< Cancel' and 'Change/Add Coverage', with the latter being highlighted.

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This screen is a view of all the information you have entered for this VOLUNTEER. If this is correct

Select **Send Information >>**

Plan Sponsor Services

Enrollment [Back to Main Menu](#)

<< Cancel Terminate this Member **Send Information >>**

Members Info

Social Security Number : 123-45-6589 (123-12-1234) (Required)

First Name : SALLY (Required)

Last Name : VOLUNTEER (Required)

Address1 : 123 MAIN STREET (Required)

City : DETROIT (Required)

State : Michigan (Required)

Zip Code : 90909 (Required)

Gender : Female (Required)

Birth Date : January 29 1980 (MM/DD/YYYY) (Required)

Date of Hire : August 1 2006 (MM/DD/YYYY) (Required)

Coverage Information

AMERICORPS PLAN 1  
EE FULL MONTH

Change Coverage

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**NOTE:** You will receive a **Pop-up** indicating

**Enrollment is not complete**

You must  
Select **OK**

Plan Sponsor Services

Enrollment [Back to Main Menu](#)

Verify Information

Enrollment is not complete. You must click continue.

<< Go Back Continue >>

Print a copy

Member's Information

Social Security Number : 123-45-6589

First Name : SALLY

Last Name : VOLUNTEER

Address : 123 MAIN STREET

City : DETROIT

State : MI

Zip Code : 90909

Gender : F

Birth Date : 1/29/1980

Date of Hire : 8/1/2006

Coverage Information

Effective: 8/1/2006

Old Coverage:

New Coverage:

AMERICORPS PLAN 1  
EE FULL MONTH

Microsoft Internet Explorer

Your Enrollment Change(s) are not complete.  
You must click onto Continue after reviewing the enrollment.

OK

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**Enrollment Agreement**

Read the Enrollment Agreement and click **Agree**

Plan Sponsor Services

Enrollment [Back to Main Menu](#) [Online Account](#) [Site Map](#)

Enrollment Agreement

Please read this agreement carefully.

By accepting this agreement, I hereby authorize ASRM and/or BCS Insurance Company, as applicable, to process the enrollment information I have provided.

Do Not Agree **Do Not Agree**

Congratulations, you have completed enrollment for this VOLUNTEER.

You may now proceed to add the next VOLUNTEER.

