

BENEFITS ADMINISTRATOR PORTAL ACCESS FORM

The VBA Benefits Administrator Portal

Managing Your VBA Account

At VBA, we strive to make things as simple as possible. With our Benefits Administrator Portal, you can:

View Plan Rules

• Download Enrollment Reports

· Access Online Bills

• Manage Enrollment by adding, modifying or terminating an employee or dependent

If your group submits enrollment using EDI 834 or flat files, enrollment management is not available through the portal. However, portal access may be used to view plan rules, access online bills and download enrollment reports. If your plan is self-funded, online bills are unavailable.

Portal Roles

VBA's Benefits Administrator Portal includes user roles to limit access to sensitive member enrollment data with your group's security in mind. Use the below chart to determine appropriate user access. The Benefits Administrator has the ability to grant portal access via this form. Contact clientrelations@vbaplans.com to change the Benefits Administrator VBA has on file.

Role	Plan Rule	Enrollment Reports	Online Bills	Manage Enrollment	Monthly Invoice Emails	Enrollment Change Emails	Grant Portal Access
Payer	View	View	View	N/A	Optional	N/A	N/A
Enroller	View	View	N/A	Edit	N/A	Optional	N/A

Benefits Administrator Access

Step	Details		
1. Getting started	 Determine what members of your organization should have access to the Benefits Administrator Portal. This may include your broker or third party administrator. Select roles for each person. 		
2. How to submit	Complete the Benefits Administrator Access Form. To submit the form, you may email, mail or fax to: clientrelations@vbaplans.com VBA 400 Lydia Street, Suite 300, Carnegie, PA 15106 412-881-4898 (Facsimile)		
3. Accessing your account	 Please allow up to 3 business days for VBA to process your Benefits Administrator Access Form. A member of VBA's enrollment team will reach out to set up your account and users via phone call or email. 		



BENEFITS ADMINISTRATOR PORTAL ACCESS FORM

All fields must be completed, unless noted otherwise.

Section I. Group Information								
Group Number	Group Name							
Benefits Administrator Full Name	Email	Work Phone Number						
VBA's Benefits Administrator Portal includes the option to limit user roles by applicable subgroup. Subgroups must be separated by a comma.								
Section II. Authorized User								
1. Full Name	Email	Work Phone Number						
Check one:	Check either: Payer or Enrol	ler						
Add Change Delete	Invoice Emails (Optional) Enrolln	nent Change Emails (Optional)						
Subgroup(s) (Optional)								
Authorized User	le	West Division Name						
2. Full Name	Email	Work Phone Number						
Check one:	Check either: Payer or Enrol	ler						
Add Change Delete	Invoice Emails (Optional) Enrolln	nent Change Emails (Optional)						
Subgroup(s) (Optional)								
Authorized User								
3. Full Name	Email	Work Phone Number						
Check one:	Check either: Payer or Enrol	ler .						
Add Change Delete	,	nent Change Emails (Optional)						
Subgroup(s) (Optional)								
Section III. Authorized Signature								
By signing below, I acknowledge my designation as Benefits Administrator. I understand that I am responsible for updating access to the VBA Benefits Administrator Portal, that I myself have full access, and I hereby authorize the addition, deletion or change of users as listed in Section II. The date signed below is the effective date for this Form.								
Benefits Administrator Signature	Date Signed							