

ONLINE ACCOUNT MANAGEMENTSM

Benefit Administration Simplified

Online Account Management (OAM) gives you convenient and secure access to self-service tools that save you time and make administering your group's health plan simple.

We have recently made significant enhancements to OAM that help make plan administration as convenient as possible. We have streamlined functions and made it easier than ever for you to complete tasks, delegate access and retrieve information when you need it, all with just a few clicks.

TOP 5 REASONS TO USE OAM...



1 Simplify administrative tasks with online enrollment:

- Eliminate paperwork and having to print and mail forms.
- Receive immediate confirmation of new enrollments.
- See additions, terminations and other changes in the roster within two business days.
- View, request and print temporary ID cards whenever you need them.
- View and download employee rosters.

2 Save time and eliminate paper with the online pay feature:

- Choose between automatic recurring payments, or make one-time payments on a single or multiple invoices.
- Receive email notifications when invoices are available online and when payments have been processed.
- View real-time payment history.
- Terminate employees from open invoices and pay the adjusted amount due.

3 Manage your time by delegating tasks to associates with online user management:

- Eliminate the need to share your login information.
- Have more control over associates' transactions.

4 Use the Secure Message Center to streamline communications:

- Send an email directly to a representative who can answer your specific question or when you need assistance.
- Rest assured your message is secure and privacy is protected.

YOU'RE IN GOOD COMPANY!

- On average, about 60% of eligible groups use OAM on a regular basis.
- Nearly 70% of registered users* are satisfied or highly satisfied with the tools available.

*Based on results of a 2012 survey of employer group policyholders.

Top FIVE Reasons, continued

- 5 Access the information you need to evaluate your group's plan with online reports:** (For large-group health plans. Ask your account manager if these are available for your group.)
- Supplement Health Care Utilization Reports with online versions.
 - Review plan costs and utilization:
 - Identify which diagnoses are impacting utilization.
 - Analyze benefit expenses.
 - Evaluate network utilization.
 - Drill-down capabilities enable you to filter and view specific data in your preferred format at any time, which also saves you the expense of ad-hoc reports.
 - Print reports in PDF, or view and save in Excel.

Valuable tools await you, so don't delay. Log in or register for OAM at <https://oam.cvty.com> and make administering your group's health plan simple. If you need assistance, please contact your Coventry representative.

BEFORE OAM

Enrollment: Amy, a human resources associate, faxes the application for a new employee to her company's health insurance carrier. Amy confirms the new employee has been enrolled when she reviews the next paper invoice that comes in the mail. In the meantime, the new employee has emailed Amy numerous times asking about his status.

Terminations: Amy has received a bill and notices that her company is still being charged a premium for an employee who had quit several weeks ago. She calls the health insurance company's customer service department to get the bill adjusted.

Communication: Amy calls customer service with a question about a claim, but she selects the wrong menu prompt. After she explains the nature of her call to the customer service representative, she is then transferred to the appropriate department.

WITH OAM

Enrollment: Amy receives a health plan application for a new employee. She enters the information using OAM and receives enrollment confirmation as soon as she is done. Within two days, the employee is added to the roster, and Amy delivers a temporary ID card to him before he has a chance to email even once about his status.

Terminations: Whenever an employee terminates, Amy is able to immediately adjust the bill online.

Communication: Amy sends her claims question via a secure email to the CARETeam. She is able to direct her question about the claim to a CARETeam representative who specializes in that area and receives an answer by the end of the day.

