

## Make a monthly payment

This section provides an overview of each pay schedule that you are invoiced and when payment was received for the coverage. This is an important area if you want confirmation of payment receipt by isolved Benefit Services.

You can view with the following filter criteria:

- “All” pay schedules – paid, invoice, not invoiced.
- “Paid” pay schedules – showing you only those that you have paid.
- “Invoiced” pay schedules – only those that require a payment and have been invoiced.

**Note:** If you have not yet submitted your COBRA Election Form, we cannot accept an online payment to your account. You will need to submit your completed form before making online payments.

### Realtime Payments

Periods  All  Paid  Invoiced

Example of “Paid” period:

2023

January

<b>[CAREFIRST] [BCBS ADVAN 750] [EE+SPOUSE]</b> Period Start: 1/1/2023 Period End: 1/31/2023 Due: 1/1/2023 Grace: 1/31/2023 Paid (9/2/2022)	<b>[VSP] [VISION] [EE+SPOUSE]</b> Period Start: 1/1/2023 Period End: 1/31/2023 Due: 1/1/2023 Grace: 1/31/2023 Paid (9/2/2022)
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If you are beyond a period to pay for coverage (beyond your grace date), you will see this noted within this section.

November

**[CAREFIRST] [BCBS ADVAN 750]  
[EE+SPOUSE]**  
Period Start: 11/1/2022  
Period End: 11/30/2022  
Due: 11/1/2022  
Grace: 12/1/2022

**\$1,463.54**

[Invoice](#)

**Payments not permitted after grace date**

Realtime Payments

Periods  All  Paid  Invoiced  Future Periods

2023

March

[CAREFIRST] [BCBS ADVAN 750] [EE+SPOUSE]  
Period Start: 3/1/2023  
Period End: 3/31/2023  
Due: 3/1/2023 **\$1,492.81**  
Grace: 3/31/2023  
[Invoice](#)  
Invoiced

[VSP] [VISION] [EE+SPOUSE]  
Period Start: 3/1/2023  
Period End: 3/31/2023  
Due: 3/1/2023 **\$16.90**  
Grace: 3/31/2023  
[Invoice](#)  
Invoiced

When you have been invoiced for a coverage period, you will see those coverages in the grid with checkboxes available. This is where you will check what coverages you would like to pay for online.

You may also view your invoice within this section by clicking on “Invoice” under the coverage.

[CAREFIRST] [BCBS ADVAN 750] [EE+SPOUSE]  
Period Start: 3/1/2023  
Period End: 3/31/2023  
Due: 3/1/2023 **\$1,492.81**  
Grace: 3/31/2023  
[Invoice](#)  
Invoiced

Once you have checked the coverages you are paying for, go to the bottom of the page and click **Pay for Selected**. You may only select periods that have been invoiced.

Realtime Payments

Periods  All  Paid  Invoiced  Future Periods

2023

March

[CAREFIRST] [BCBS ADVAN 750] [EE+SPOUSE]  
Period Start: 3/1/2023  
Period End: 3/31/2023  
Due: 3/1/2023 **\$1,492.81**  
Grace: 3/31/2023  
[Invoice](#)  
Invoiced

[VSP] [VISION] [EE+SPOUSE]  
Period Start: 3/1/2023  
Period End: 3/31/2023  
Due: 3/1/2023 **\$16.90**  
Grace: 3/31/2023  
[Invoice](#)  
Invoiced

[PAY FOR SELECTED](#)



Please enter all of the information below and click Continue.

**Contact Information**

\* First name:   
Middle name:   
\* Last name:   
\* ZIP code:   
\* Daytime phone number: (  )  -  ext.   
\* Email address:   
Please provide an e-mail address so that we may send you a confirmation of payment or to notify you of any payment problems. Your e-mail address will not be used for any other purpose.  
\* Retype email address:

This will open a new window and take you to our Online Payment Center (Powered by Paymentus). Here you will enter your information, including phone number and email address, for your payment confirmation. Once you have entered all the information (\* is required fields), click **Continue**.

The next screen walks you through setting up your monthly payment. The only type of online payment allowed is e-Check, which deducts funds from either a checking or savings account. You will need to have your bank name, account number and bank transit/routing number to set up your payment.

**Note:** There is a \$1.45 convenience fee for each payment made online.

All fields listed with \* are required fields. You must agree to allow the payment by checking the box next to *I agree to the authorization agreement for direct payment (ACH Debit)*.

Please enter all of the information below and click Continue.

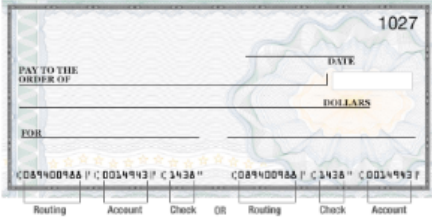
**Account Information**

\* Payment type: PC Accounts  
Please enter your Policy Account Number, including all letters and numbers.  
\* Policy number:

**Payment Information**

Coverage Reference Number: ca2ead7b-ce2a-4f57-94bd-21a59fbae3f6  
Coverage Start Date: 20140701  
Coverage End Date: 20140731  
Coverage Name: BCBS MI HDHP M/D/V 1000 EE 1  
Coverage Description: BCBS MI HDHP M/D/V 1000 EE 1 20140701-20140731 1623.34

Payment method: E-Check  
\* Account type:   
\* Routing number:   
\* Account number:   
Bank name:   
\* Account holder name:   
Date due: **Jul 1, 2014**  
\* Payment amount: \$

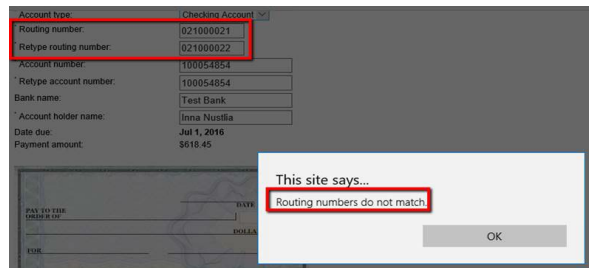
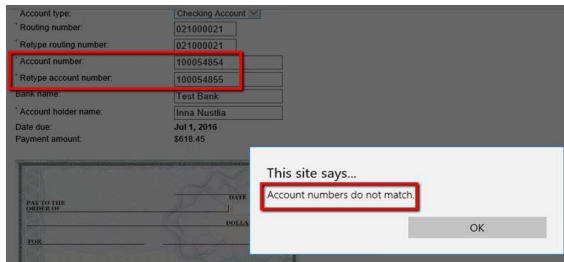


**A service fee charged by Paymentus will be added to your payment.**

[View Authorization Agreement for direct payment \(ACH Debit\)](#)  
 I agree to the authorization agreement for direct payment (ACH Debit).



You will be asked to enter your account number and routing number twice, to assist you with making sure you type the correct numbers. If the entries do not match, you will see the following errors.



Once all fields listed with \* are entered you must agree to allow the payment by checking the box next to "I agree to the authorization agreement for direct payment (ACH Debit)."

Please confirm all of the information below and click Make Payment.

Contact Information	Change
First name:	SAMPLE
Middle name:	
Last name:	PERSON
ZIP code:	50261
Daytime phone number:	(555) 555-5555
Email address:	todd@test.com

Account Information	Change
Payment type:	Insurance Coverage
Payment method:	E-Check
Date due:	Feb 1, 2020
Payment amount:	\$3,189.12
Paymentus Fee:	\$1.45
<input type="checkbox"/> I agree to the service fee charged by Paymentus to be added to this payment	
Total amount charged:	\$3,190.57

Payment Information	Change
Account type:	Checking Account
Account holder name:	SAMPLE PERSON
Account number:	****4584
Routing number:	****0021
Bank Name:	SMB&T

[Click to read the Terms and Conditions](#)  
 I agree to the Terms and Conditions.

**Make Payment** **Cancel**

You will then be on the confirmation payment page where you can review all information entered and make any necessary changes.

**Note:** You must agree to both the \$1.45 convenience fee and the *Terms and Conditions* before you can click **Make Payment**. Payments are cut off daily at 11:59 p.m. ET. Any payment made after that time will be dated for the following business day.

After you click **Make Payment**, you will be taken to a confirmation page. You will also receive an email confirmation of your payment.

Thank you. The following payment has been successfully submitted.

Payment Submitted	
Confirmation number:	27171372
Payment date:	Jun 17, 2014 2:07:12 PM
Payment type:	PC Accounts
Policy number:	7e395ebaa85242b0b2a69babcd90ed31
Payment method:	Checking Account
Card number:	****4584
Payment amount:	\$1,623.34
Paymentus Fee:	\$1.65
Total amount charged:	\$1,625.29

[Print this page](#) [Back to home](#)

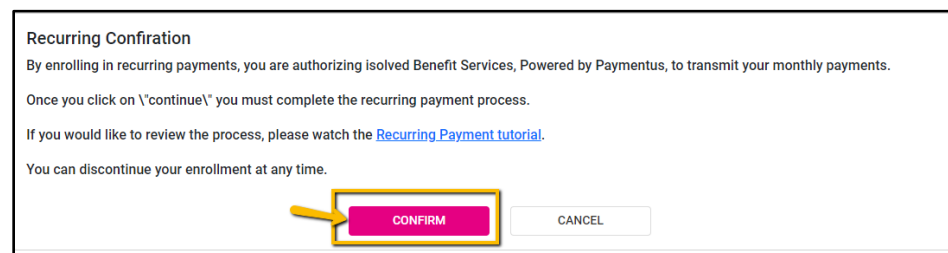
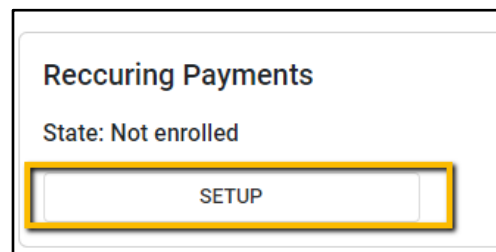
Once you have submitted your payment through the Paymentus site you will be directed back to the isolved Benefit Services COBRA Online Portal. There you will see the coverages you are paying; you will see a notice stating "Your payment is processing. Please wait." Do not click on anything during this process.



## Make a recurring payment online

To set up recurring payments, click **Setup Recurring Payments** instead of choosing an invoiced period. This will take you to a page to enroll and set up your banking information.

**Note:** You must be paid through the current month to schedule recurring payments to begin for the following month.

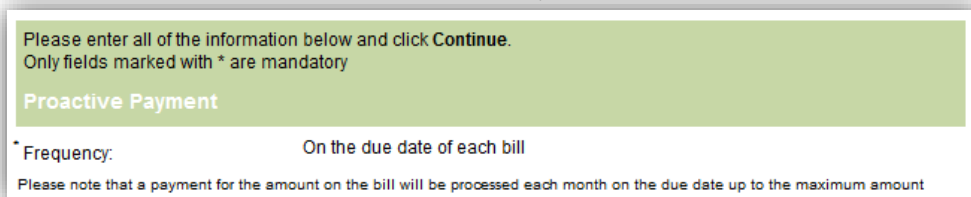


If we do not have complete information, you will be directed to complete your employee information on our site before entering payment information.

You will be requested to fill out the form for recurring payments.

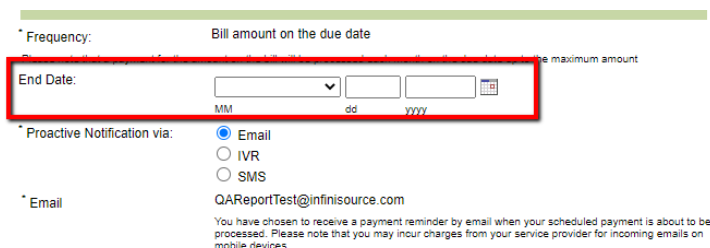
The required fields are as follows:

- Frequency (date payment will be made each month)
  - On the due date of each bill, in most cases this is the first of the month



**Note:** Please note that a payment for the amount on the bill will be processed each month on the specified schedule day; if schedule day is greater than the last day of the schedule month then the last day of the month is used for the schedule day.

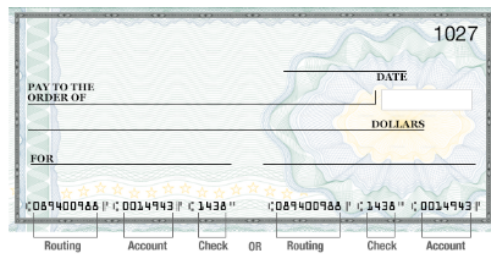
- End Date (last period to pull premium for COBRA coverage)
  - Examples:
    - COBRA ends 12/31/2023 – use this date if you want to pay through COBRA expires date
    - Only require COBRA through 1/31/23, COBRA expires 6/30/2023. Use the 1/31/2023 date, that is the last month COBRA payment will be pulled



You can receive a payment reminder by either Email, IVR or SMS. Please note that you may incur charges from your service provider for incoming emails on mobile devices.

### Payment Information

\* Payment Method: E-Check  
 \* Account Type: --SELECT--  
 \* Routing Number:   
 \* Retype routing number:   
 \* Account Number:   
 \* Retype account number:   
 Bank Name:   
 \* Account Holder Name:



[View Authorization Agreement for direct debit payment \(ACH Debit\).](#)

I authorize ACH direct debit payment (ACH Debit).

The next screen walks you through setting up your monthly payment. The only type of online payment allowed is e-Check, which deducts funds from either a checking or savings account. You will need to have your bank name, account number and bank transit/routing number to set up your payment.

Please review all of the information below and click Submit.

### Contact Information

First name: SAMPLE  
 Last name: PERSON  
 Email address: sample@test.com

### Account Information

Payment type: Continuation Coverage  
 Suspended: No  
 Payment method: E-Check  
 Proactive Notification via: EMAIL  
 Contact me at: sample@test.com  
 Notify me: 0 days in advance  
 Start date: Feb 19, 2020  
 End date: N/A  
 Frequency: Bill amount on the due date  
 Maximum payment amount: N/A  
 Processing fee: N/A  
 I agree to the convenience fee of \$1.45 to be charged by Paymentus and added to each payment transaction.  
 Total amount charged: N/A

### Payment Method Information

Account type: Checking Account  
 Account holder name: Sample Person  
 Account number: \*\*\*\*4584  
 Routing number: \*\*\*\*0021  
 Bank name: SMB&T

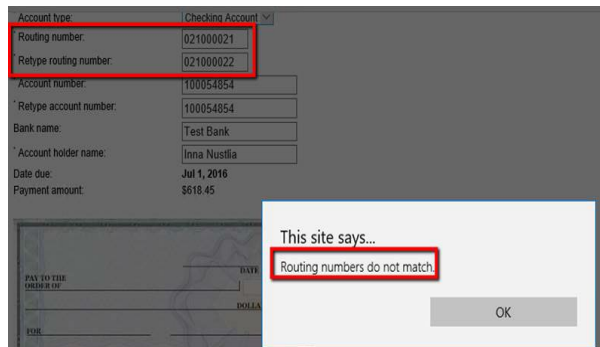
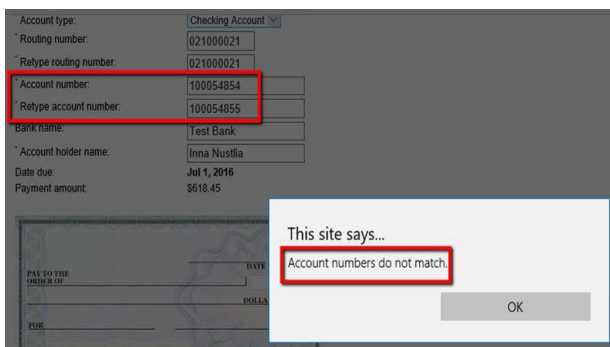
[Click to read the Terms and Conditions](#)

I agree to the Terms and Conditions.

**Note:** You must check the box to authorize the ACH direct debit payment (ACH debit).

You will then be on the confirmation payment page where you can review all information entered and make any necessary changes.

You are required to enter your routing number and account number twice to reduce incorrect data. If you enter in once incorrectly you will see the following error and will need to correct before allowed to complete the payment process.



**Note:** Once you have completed all the required fields, you must check *I agree to the Terms and Conditions* before you click **Submit**. Payments are cut off daily at 11:59 p.m. ET. Any payment made after that time will be dated for the following business day.

Proactive Payment Details	
Confirmation number:	11642
Start date:	Sep 8, 2014
End date:	Dec 31, 2014
Frequency:	Monthly - bill amount
Schedule day:	20
Next payment date:	Sep 20, 2014
Proactive Notification via:	EMAIL
Contact me at:	KANE@TEST.COM
Notify me:	7 days in advance
Payment type:	Insurance Coverage
Payment method:	Checking Account
Account number:	*****2654
Routing number:	****0001
Bank name:	SMB&T
Payment amount:	N/A
Total amount:	N/A

[Schedule Another Payment](#)      [Print this page](#)

## Proactive Payment Details

This page provides you with all of the details of your recurring payment. You may print this page for your records or schedule a payment to be applied prior to the next scheduled payment.

**Note:** Only the full premium due will be pulled for recurring payment. Anything outside the full amount invoiced will be required to be paid through the monthly payment option. You will receive an email notification the morning the payment is processed each month.

If reoccurring payments are being set up please note an invoice will no longer be sent via mail or email, but they can be viewed online under the invoices tab.

## Update/Change Information for Recurring Payment

You can update your information for recurring payment including banking account information, end date, etc. by following the below steps.

1. Navigate to the [isolved Benefit Services login page](#).

2. Under “Make a Payment”, click on “Paymentus Customer Dashboard”

3. The Paymentus Customer Dashboard will open on the “Payment” tab. Click on the “Schedule” tab.

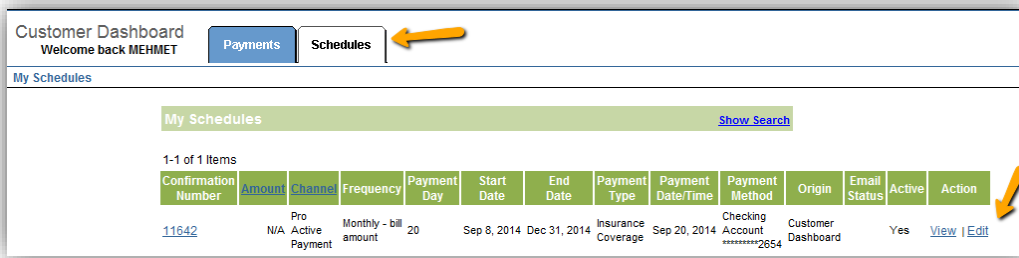
4. You will see “My Schedules”, click on “Edit” to open the existing schedule

5. You will be able to update your banking information or end date here. You will be prompted to agree to the Terms and Conditions for ACH payments again, click continue. You will agree to the \$1.45 processing fee here as well. Click continue and submit.

The screenshot shows the 'Customer Dashboard' with a 'Schedules' tab selected. Below the navigation bar is a 'Search Proactive Payments' section with the following fields:

- Confirmation Number: [text input]
- Account number: [text input]
- Payment Type: [-SELECT-]
- Payment amount range: From: \$ [text input] To: \$ [text input]
- Payment Date Range: Start Date: [MM] [dd] [yyyy] [calendar icon]
- End Date: [MM] [dd] [yyyy] [calendar icon]
- Payment Method: [-SELECT-]
- display inactive schedules

A 'Search' button is located at the bottom of the form.



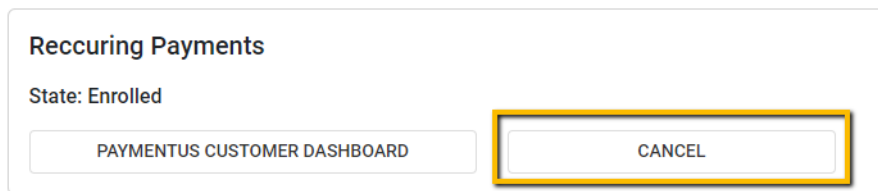
**Note:** Do not cancel your existing Recurring Payment and open a new Recurring payment.

## Cancel Recurring Payment

If you would like to cancel your recurring payments, please follow these steps.

Once your recurring payments are set up, your Dashboard on the isolved Benefit Services COBRA Online Portal will contain the following options:

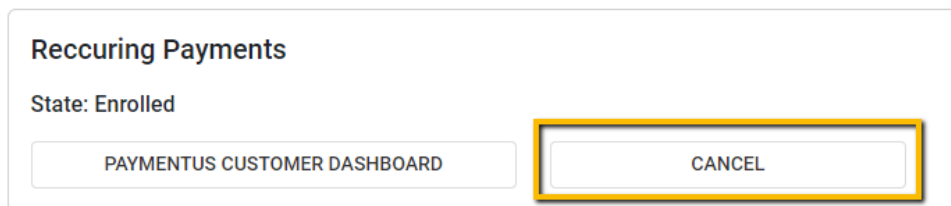
- Paymentus Customer Dashboard
- Cancel



Click on the **Paymentus Customer Dashboard** will take you to the website (Paymentus) where all your banking information was entered. Please see information above if you need to make any changes.

**Cancel** allows you to cancel your recurring payments set up through the Paymentus website. Please follow these steps to complete this process.

Click on "Cancel" from the isolved Benefit Services COBRA Online Portal





## Invoices

### GO PAPERLESS

You can choose from two delivery methods to receive your monthly Continuation Coverage Invoices.

1. US Mail
2. Email - your monthly Continuation Coverage Invoice(s) will be sent via email as an attachment.\*

You will have access to download all of your monthly Continuation Coverage Invoice(s) via the COBRA Employee site under Invoices Sent.

US Mail  
 Email - your monthly Continuation Coverage Invoice(s) will be sent via email as an attachment.

UPDATE

You may set up your invoices to be received either by email or US Mail. Click on “Invoices” in the left menu bar within the isolved Benefit Services Online Portal. Here you have the option to choose between US Mail or email for your invoices.

**\*Note:** You must first confirm your email address with isolved Benefit Services before you can set up to receive invoices via email. You can do that under “Participants” and click on “Confirm”.

Contact Us

Announcements

Participants

Notices/Letters

Elected Plans

Invoices

Make a Payment

My Documents

My Profile

Guides & Tutorials

JOHN J DOE

Event Date:	07/18/2022	Event Type:	Involuntary Termination of Employment	Received:	07/25/2022
Relationship:	Employee	DOB:	09/16/1960	Gender:	MALE
Address:	4651 SW ALPHA ST PORT	City, State, Zip:	CAPSHAW WA 72838	Email:	<span style="border: 1px solid yellow; padding: 2px;">jdoe@test.com</span> <a href="#">Confirm</a>

Plan	Loss Of Coverage	Last Date To Elect	Expires	Premium
DELTA DENTAL DENTAL ENHANCED SINGLE	07/31/2022	12/30/2022	01/31/2024	\$37.86
PRIORITY HEALTH HMO TIER SINGLE	07/31/2022	12/30/2022	01/31/2024	\$672.89

[Edit](#)

You may view your invoices from within the Online Portal by selecting “Invoices” from the left menu and then clicking **Download** next to the invoice you would like to view.

Invoices Sent: 4			
Invoice Date	Invoice No	Payor	Download
2/6/2023	DOEJ75A5	JOHN J DOE	<a href="#">Download</a>
1/27/2023	DOEJ8A10	JOHN J DOE	<a href="#">Download</a>

## Paymentus Customer Dashboard

Here you can view your scheduled payments and any payments that have been deducted from your checking or savings account.

## Cancel Recurring Payments

Here you can cancel your recurring payments that you have scheduled. Please review detailed instructions above on cancelling recurring payments.



## Payment Help

Documents to assist you with making online payments with isolved Benefit Services.

## Payments

This offers you a view of all payments received by isolved Benefit Services. It will provide information on payment type, check number, how much was paid and allocated, if there was any refund, the post mark date on the payment, and when it was received by isolved Benefit Services and deposited.