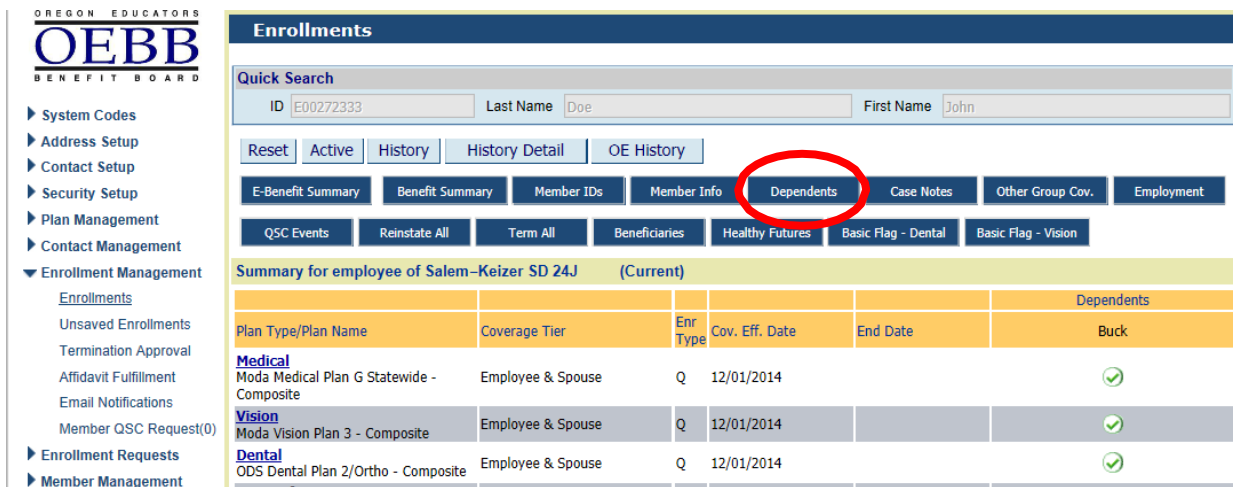


How to Add a Dependent by QSC

1. Bring up the employee record in Enrollment Management.



**OREGON EDUCATORS
OEBB
BENEFIT BOARD**

- System Codes
- Address Setup
- Contact Setup
- Security Setup
- Plan Management
- Contact Management
- Enrollment Management
 - Enrollments
 - Unsaved Enrollments
 - Termination Approval
 - Affidavit Fulfillment
 - Email Notifications
 - Member QSC Request(0)
- Enrollment Requests
- Member Management

Enrollments

Quick Search
 ID: E00272333 Last Name: Doe First Name: John

Reset Active History History Detail OE History

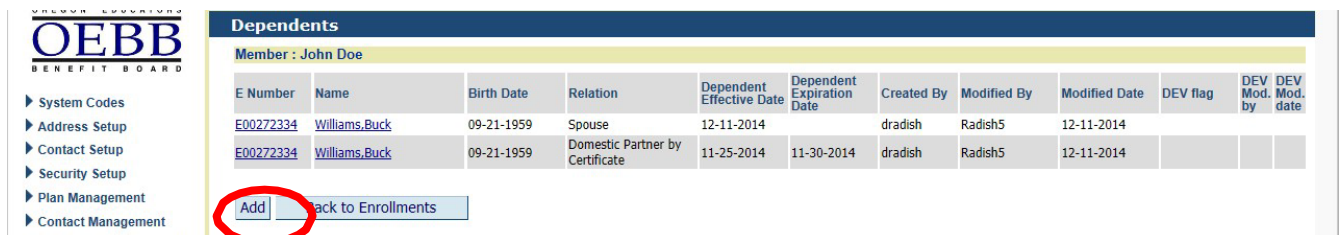
E-Benefit Summary Benefit Summary Member IDs Member Info **Dependents** Case Notes Other Group Cov. Employment

QSC Events Reinstate All Term All Beneficiaries Healthy Futures Basic Flag - Dental Basic Flag - Vision

Summary for employee of Salem-Keizer SD 24J (Current)

Plan Type/Plan Name	Coverage Tier	Enr Type	Cov. Eff. Date	End Date	Dependents
Medical Moda Medical Plan G Statewide - Composite	Employee & Spouse	Q	12/01/2014		Buck ✓
Vision Moda Vision Plan 3 - Composite	Employee & Spouse	Q	12/01/2014		✓
Dental ODS Dental Plan 2/Ortho - Composite	Employee & Spouse	Q	12/01/2014		✓

2. Click on the Dependents button as shown above.



**OREGON EDUCATORS
OEBB
BENEFIT BOARD**

- System Codes
- Address Setup
- Contact Setup
- Security Setup
- Plan Management
- Contact Management

Dependents

Member : John Doe

E Number	Name	Birth Date	Relation	Dependent Effective Date	Dependent Expiration Date	Created By	Modified By	Modified Date	DEV flag	DEV Mod. by	DEV Mod. date
E00272334	Williams,Buck	09-21-1959	Spouse	12-11-2014		dradish	Radish5	12-11-2014			
E00272334	Williams,Buck	09-21-1959	Domestic Partner by Certificate	11-25-2014	11-30-2014	dradish	Radish5	12-11-2014			

Add Back to Enrollments

3. Click on the Add button.

MyOEBB – How to Add a Dependent by a QSC

OREGON EDUCATORS
OEBB
BENEFIT BOARD

- System Codes
- Address Setup
- Contact Setup
- Security Setup
- Plan Management
- Contact Management
- Enrollment Management
 - Enrollments
 - Unsaved Enrollments
 - Termination Approval
 - Affidavit Fulfillment
 - Email Notifications
 - Member QSC Request(0)
- Enrollment Requests
- Member Management
- Document Management
- Utilities
- Home Page Alerts
- Reports
- Payroll Interface
- Report Mart
- BHS Interface

Dependents

Member : John Doe

Choose from Existing Members: ID Name

Relationship Type Gender Child Type Birth Date

Last Name First Name MI

Same Address as Subscriber Affidavit Fulfillment Date/Adoption Date

SSN HICN No response

Ethnicity and Medicare Eligibility

Ethnicity Medicare Eligibility

Race

☐ Asian ☐ Black/African American ☐ American Indian/Alaska Native ☐ Native Hawaiian/Other Pacific Islander

☐ White ☐ Other ☐ Refused (Can only pick one) ☐ Unknown

Tobacco Usage

☐ Have used tobacco products within the past 12 months

☐ Haven't used tobacco products within the past 12 months

☐ Have never used tobacco products

Dependent Effective Date Dependent Expiration Date

02-13-2015

Dependent IDs

Save Delete Search Reset **Back to Enrollments**

- Complete the dependent information and click Save. If you are adding more than one dependent, you **must** click the Reset button prior to adding the next dependent. When you are done adding dependents, click the Back to Enrollments button.

OREGON EDUCATORS
OEBB
BENEFIT BOARD

- System Codes
- Address Setup
- Contact Setup
- Security Setup
- Plan Management
- Contact Management
- Enrollment Management
 - Enrollments
 - Unsaved Enrollments
 - Termination Approval
 - Affidavit Fulfillment
 - Email Notifications
 - Member QSC Request(0)
- Enrollment Requests
- Member Management
- Document Management
- Utilities
- Home Page Alerts
- Reports
- Payroll Interface
- Report Mart

Enrollments

Quick Search ID Last Name First Name

Reset Active History History Detail OE History

E-Benefit Summary Benefit Summary Member IDs Member Info Dependents Case Notes Other Group Cov. Employment

QSC Events Instate All Term All Beneficiaries Healthy Futures Basic Flag - Dental Basic Flag - Vision

Summary for employee of Salem-Keizer SD 24J (Current)

Plan Type/Plan Name	Coverage Tier	Enr Type	Cov. Eff. Date	End Date	Dependents
Medical Moda Medical Plan G Statewide - Composite	Employee & Spouse	Q	12/01/2014		Buck Fawn
Vision Moda Vision Plan 3 - Composite	Employee & Spouse	Q	12/01/2014		
Dental ODS Dental Plan 2/Ortho - Composite	Employee & Spouse	Q	12/01/2014		
Basic Life Plan 11 Basic Life-\$100,000	Employee Only - \$100,000	N	11/01/2014		
Basic Accidental Death and Dismemberment Plan 11 Basic AD&D-\$100,000	Employee Only - \$100,000	N	11/01/2014		
Optional Employee Life Declined			11/01/2014		
Optional Spouse/Partner Life Declined			11/01/2014		

- Click on the QSC Events button.

MyOEBS – How to Add a Dependent by a QSC

QSC Events - Individual Plan Changes

Member : Jane Doe

Query returned zero records. Please change your search criteria and try again.

Add Close

6. Click the Add button.

QSC Events Type - List of Values

Type

Find

Close

[Reset Field\(s\)](#)

Type

Change in Domestic Partnerships

[Gain Partner and/or Partners Children by Affidavit/Certification](#)

Change in Employees Marital Status

[Gain Spouse and/or Children through Marriage](#)

[Gain Spouse and/or Children through Marriage to a Previously Covered Domestic Partner](#)

Change in Number of Employees Dependents

[Gain Child through Birth/Adoption/Placement for Adoption/Affidavit of Dependency](#)

7. Click on the appropriate QSC as shown above.

Member : Jane Doe

■ QSC Events	Gain Child through Birth/Adoption/Placement for Adoption/Affidavit of Dependency	
■ Actual Event Date	11-12-2008	Transaction Date
■ QSC Event Date	11-30-2008	QSC Used By
Coverage Eff Date		

Dependents - Select All Affected Dependents by this QSC					
Relation	Name	Gender	E Number	Birth Date	Affected Dependent
Child	Ryan Doe	M		11-12-2008	<input checked="" type="checkbox"/>
Spouse	John Doe	M		09-21-1959	<input type="checkbox"/>
Child	Sally Doe	F		09-21-2008	<input type="checkbox"/>

Save Delete Search Reset Close

8. Complete the QSC dates. Only check the affected Dependent. The coverage Effective Date will be the first of the month following the QSC Event Date. Click on Save.

MyOEBB – How to Add a Dependent by a QSC

OEBB
BENEFIT BOARD

- System Codes
- Address Setup
- Contact Setup
- Security Setup
- Plan Management
- Contact Management
- Enrollment Management
 - Enrollments
 - Unsaved Enrollments
 - Termination Approval
 - Affidavit Fulfillment
 - Email Notifications
 - Member QSC Request
- Enrollment Requests

QSC Events - Individual Plan Changes

Record Saved Successfully
Member : John Doe

QSC Events: Gain Child through Birth/Adoption/Placement for Adoption

Actual Event Date: 02-16-2015 Transaction Date: 06-27-2015

QSC Event Date: 02-16-2015 QSC Used By: Debbie Radish-oebb admin

Coverage Eff Date: 03-01-2015

Dependents - Select All Affected Dependents by this QSC

Relation	Name	Gender	E Number	Birth Date	Affected Dependent
Spouse	Buck Williams	M		09-21-1959	<input type="checkbox"/>
Child	Fawn Doe	F		02-01-2015	<input checked="" type="checkbox"/>

Save Delete Search Reset Back to Enrollments Update QSC

Process Steps:

- Verify the Coverage Effective Date. If the date is correct, click Save again. If the Coverage Effective date is incorrect, you can make the necessary changes then click Save. You will see **Record Saved Successfully**. Click the **Back to Enrollments** button.

OEBB
BENEFIT BOARD

- System Codes
- Address Setup
- Contact Setup
- Security Setup
- Plan Management
- Contact Management
- Enrollment Management
 - Enrollments
 - Unsaved Enrollments
 - Termination Approval
 - Affidavit Fulfillment
 - Email Notifications
 - Member QSC Request(0)
- Enrollment Requests
- Member Management
- Document Management
- Utilities
- Home Page Alerts
- Reports
- Payroll Interface
- Report Mart
- DES Interface

Enrollments
Member has active QSC.

Quick Search
ID: E00272333 Last Name: Doe First Name: John

Save Reset Active History History Detail OE History

E-Benefit Summary Benefit Summary Member IDs Member Info Dependents Case Notes Other Group Cov. Employment

QSC Events Reinstate All Term All Beneficiaries Healthy Futures Basic Flag - Dental Basic Flag - Vision

Summary for employee of Salem-Keizer SD 24J (QSC)

Plan Type/Plan Name	Coverage Tier	Enr Type	Cov. Eff. Date	End Date	Dependents
Medical Noda Medical Plan G Statewide - Composite	Employee & Spouse	Q	12/01/2014		Buck: <input checked="" type="checkbox"/> Fawn: <input checked="" type="checkbox"/>
Vision Noda Vision Plan 3 - Composite	Employee & Spouse	Q	12/01/2014		Buck: <input checked="" type="checkbox"/> Fawn: <input checked="" type="checkbox"/>
Dental ODS Dental Plan 2/Ortho - Composite	Employee & Spouse	Q	12/01/2014		Buck: <input checked="" type="checkbox"/> Fawn: <input checked="" type="checkbox"/>
Basic Life Plan 11 Basic Life-\$100,000	Employee Only - \$100,000	N	11/01/2014		Buck: <input checked="" type="checkbox"/> Fawn: <input checked="" type="checkbox"/>
Basic Accidental Death and Dismemberment Plan 11 Basic AD&D-\$100,000	Employee Only - \$100,000	N	11/01/2014		Buck: <input checked="" type="checkbox"/> Fawn: <input checked="" type="checkbox"/>
Optional Employee Life Declined			11/01/2014		

- Only click on the plan links that the dependent will be added to.

MyOEBB – How to Add a Dependent by a QSC

Contact management
 Enrollment Management
 Enrollments
 Unsaved Enrollments
 Termination Approval
 Affidavit Fulfillment
 Email Notifications
 Member QSC Request(0)
 Enrollment Requests
 Member Management
 Document Management
 Utilities
 Home Page Alerts
 Reports
 Payroll Interface
 Report Mart
 BHS Interface

QSC being used

Gain Child through Birth/Adoption/Placement for Adoption

New Coverage Start Date

03/01/2015

Eligible Plans

☐ Kaiser Medical Plan 1 - Composite
☐ Kaiser Medical Plan 2 - Composite
☐ Kaiser Medical Plan 3 - Composite
☐ Moda Medical Plan A Statewide - Composite
☐ Moda Medical Plan B Statewide - Composite
☐ Moda Medical Plan C Statewide - Composite
☐ Moda Medical Plan D Statewide - Composite
☐ Moda Medical Plan E Statewide - Composite
☐ Moda Medical Plan F Statewide - Composite
☒ Moda Medical Plan G Statewide - Composite
☐ Moda Medical Plan H Statewide - Composite
☐ Moda Medical Plan A Synergy - Composite
☐ Moda Medical Plan B Synergy - Composite
☐ Moda Medical Plan C Synergy - Composite
☐ Moda Medical Plan D Synergy - Composite
☐ Moda Medical Plan E Synergy - Composite
☐ Moda Medical Plan F Synergy - Composite
☐ Moda Medical Plan G Synergy - Composite
☐ Moda Medical Plan H Synergy - Composite

Members Including Self (check marked members get coverage)

<input checked="" type="checkbox"/>	John Doe	21-SEP-59	Self
<input checked="" type="checkbox"/>	Buck Williams	21-SEP-59	Spouse
<input type="checkbox"/>	Fawn Doe	01-FEB-15	Child

Accept & Continue Back

11. Check the dependent that is to be added. Make sure that all dependents who should have coverage have a check mark, including the member. Select the appropriate medical plan. Click on Accept & Continue. Then click on the back button.

Contact Setup
 Security Setup
 Plan Management
 Enrollment Management
 Enrollment Requests
 Member Management
 Document Management
 Home Page Alerts
 Reports
 Payroll Interface
 Report Mart

OEBB
BENEFIT BOARD

Enrollments

Member has active QSC.

Quick Search

ID E00272333 Last Name Doe First Name John

Save Reset Active History History Detail OE History

E-Benefit Summary Benefit Summary Member IDs Member Info Dependents Case Notes Other Group Cov. Employment

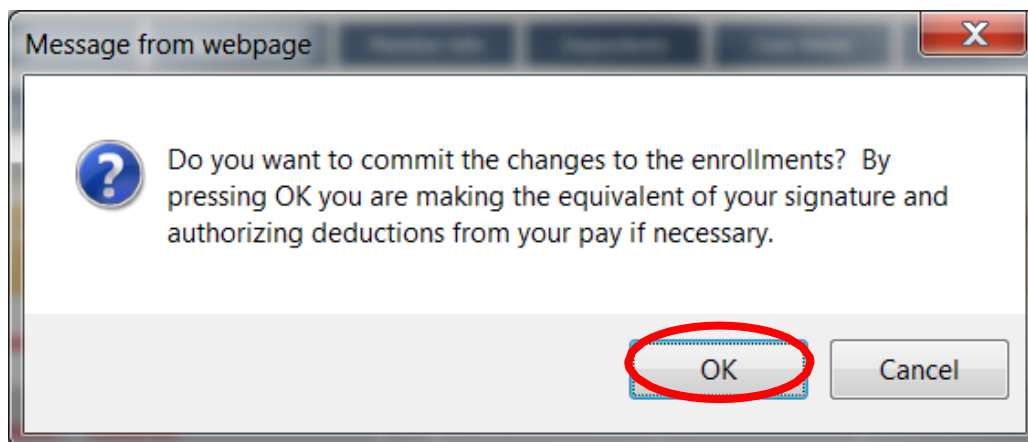
QSC Events Reinstatement All Term All Beneficiaries Healthy Futures

Summary for employee of Salem-Keizer SD 24J (QSC)

Plan Type/Plan Name	Coverage Tier	Enr Type	Cov. Eff. Date	End Date	Buck	Fawn	
Medical Moda Medical Plan G Statewide - Composite	Employee, Spouse & Children	Q	03/01/2015		✓	✓	✗
Vision Moda Vision Plan 3 - Composite	Employee, Spouse & Children	Q	03/01/2015		✓	✓	✗
Dental ODS Dental Plan 2/Ortho - Composite	Employee & Spouse	Q	12/01/2014		✓		✗
Basic Life Plan 11 Basic Life-\$100,000	Employee Only - \$100,000	N	11/01/2014				✗
Basic Accidental Death and Dismemberment Plan 11 Basic AD&D-\$100,000	Employee Only - \$100,000	N	11/01/2014				✗
Optional Employee Life Declined			11/01/2014				

12. Once the dependent has been added to the appropriate plans, click the Save button.

MyOEBB – How to Add a Dependent by a QSC



13. Click OK.

enrollments
Record Saved Successfully

Quick Search

ID: E00272333 Last Name: Doe First Name: John

Reset Active History History Detail OE History

E-Benefit Summary Benefit Summary Member IDs Member Info Dependents Case Notes Other Group Cov. Employment

QSC Events Reinstate All Term All Beneficiaries Healthy Futures Basic Flag - Dental Basic Flag - Vision

Summary for employee of Salem-Keizer SD 24J (Current)

Plan Type/Plan Name	Coverage Tier	Enr Type	Cov. Eff. Date	End Date	Buck	Fawn
Medical Moda Medical Plan G Statewide - Composite	Employee, Spouse & Children	Q	03/01/2015		✓	✓
Vision Moda Vision Plan 3 - Composite	Employee, Spouse & Children	Q	03/01/2015		✓	✓
Dental ODS Dental Plan 2/Ortho - Composite	Employee & Spouse	Q	12/01/2014		✓	
Basic Life Plan 11 Basic Life-\$100,000	Employee Only - \$100,000	N	11/01/2014			
Basic Accidental Death and Dismemberment Plan 11 Basic AD&D-\$100,000	Employee Only - \$100,000	N	11/01/2014			
Optional Employee Life <i>Declined</i>			11/01/2014			
Optional Spouse/Partner Life <i>Declined</i>			11/01/2014			
Optional Child Life						

14. You will then see **Record Saved Successfully**.