

Equity League Funds Tutorial on Paying Online

While some people are able to make their health contributions online with no instructions, the first time they try it, others find it helpful to have instructions that walk them through the entire process, step by step. Such instructions for various kinds of payments (e.g., \$100 quarterly contributions, contributions for dependent coverage and contributions for COBRA coverage) appear immediately below. However, in order to make any kind of payment for health coverage you must go to www.equityleague.org and either Click on “Health Payments” on the bar at the top of the page, or Click on “Health Care Payments” in the “Member Services” section of the first page that appears (the Equity League home page). A new page called “Health Fund Payments” will appear and that is where you begin the payment process. To continue, please pick the appropriate section from sections I – VI below (when you need to make multiple payments, for example for health coverage and then dental coverage, begin with any section you wish and after adding that kind of payment to your cart, Click on “Continue Shopping”, then “Return to Main Page” to once again return to the “Health Fund Payments” page and add another kind of payment to your “cart”).

I. Making Your \$100 Quarterly Contribution (when you are only covering yourself – not dependents)

- 1) Click on “\$100 Contribution” within the page, or on the “Quarterly Contribution” tab on the bar across the top of the “Health Fund Payments” page.
- 2) A page called “Quarterly Contribution” will appear, where you have several choices (the first of which is the most common). Your first available choice is to make a \$100 contribution for a specific quarter for which you have already earned eligibility. To do this, Click on the downward pointing arrow on the blue background, then Click on the appropriate quarter for which you wish to pay. Finally, Click on “Add to Cart”. Your second choice is to pay for two quarters for which you have already earned coverage (\$200), by going to the “Quarterly Contribution 2 Quarters” and simply Clicking on the “Add to Cart” button (there is only one option here). Finally, you can pay for a full 12 months of coverage that you have already earned (\$400), by Clicking on the “Add to Cart” button in the “Quarterly Contribution 4 Quarters” section (there is only one option here as well).
- 3) If this is the first time you are paying online, you’ll be asked to register, by providing your name, e-mail address, creating a password with at least 8 characters, selecting and providing an answer for a challenge question and choosing a format for the e-mail confirmation you will receive. This process not only provides the Fund with the information it needs to process your payment, but it will enable you to look up your payment history in the future. So if you are ever wondering “did I make that payment for the second quarter of ___?”, you can get the answer (if you registered in the past, you will be asked to sign in using your password instead of having to go through the registration process again). Once you have entered all the registration information and Clicked on “Save”, Click on “Back to Cart” (unless you wish to change your name or e-mail address on file – in which case you Click on “Preferences”, or if you wish to check or change your password – in which case you Click on “Password”).
- 4) On the new page that appears, please enter your Billing Invoice No.. This 7 digit number appears on the front of your bill and providing it helps to assure that your payment is

credited correctly. Your payment can be processed even if you don't know your Billing Invoice Number, but entering the number will help the Fund Office in researching your payment in the future, should there ever be a problem with it.

- 5) Next, you must choose a payment option (Visa on Master Card only) by Clicking on the down arrow to the right of the box that says "Payment Option".
- 6) Click on "Checkout". You will now be taken to the last page in this process, where you enter your billing information exactly as it appears on your credit card bill, as well as your Equity Member ID #. You must also indicate your card type and card information. Once that information has been entered, you Click on "Confirm" and your request for payment will be processed. This may take a few seconds but do not Click on the "Confirm" button a second time, as this may cause a payment to be made twice.
- 7) Once your order has been placed a confirmation screen will provide you with an Order number. Shortly after your payment has been made, you will receive an e-mail as well confirming your payment. If you for some reason you don't receive an e-mail confirming your order please contact the Fund office immediately.
- 8) Congratulations! You have made your payment and received a payment receipt, which you can print out for your records. The next time you make a payment it will be easier, not only because you will be more familiar with the process, but because some of your information will be stored, so that you won't have to enter it again in the future (though not your sensitive credit card information – the Fund Office does not even see that). You'll just need to remember your password. Thanks for choosing online payment.
- 9) If you have any questions, you can call the Fund Office at: 212.869. 9380, or 800.344.5220.

II. Contributions Toward Medical Benefits When You Are Covered by Employment or COBRA and Want Coverage for Yourself OR Yourself AND At Least One Dependent Under the Funds POS Plan Administered by CIGNA (not an HMO)

- 1) From the "Health Fund Payments" page, choose "Cigna Administered Medical Benefit" (the "POS Self Pay (CIGNA)" tab on the bar at the top of the page). You'll be taken to a page called "POS Self Pay (CIGNA)", which applies to all payments for the CIGNA administered medical plan.
- 2) If you are eligible for coverage by employment (you worked enough weeks to earn coverage by the Fund), Click on the "POS (CIGNA) Covered By Employment" tab at the top of the page. If you haven't made your \$100 quarterly contribution already, make that \$100 quarterly contribution now by Clicking on the down arrow in the "Quarterly Contribution" section and then Clicking on the quarter you wish to pay for. Then Click "Add to Cart". You'll be brought to a new page. Go to the bottom of that page and Click "Continue Shopping" to return to the "POS (CIGNA) Covered by Employment" page. Now move down the page to choose the appropriate dependent coverage that you wish to pay for (One dependent, Two or more dependents or when two members are covered by employment with One or more dependents). Click on the down arrow and then Click on the coverage period you want to pay for (it must be the same quarter that for which you are making the employee contribution). Finally Click on "Add to Cart". Then following the same instructions as for steps 3-10 in Section I above.
- 3) If you are eligible for medical benefits because of COBRA or because of Vesting Beyond COBRA coverage and you want coverage under the POS Plan Administered by CIGNA, on "POS Self Pay CIGNA" page, you can Click on the tab at the top of the screen labeled

“COBRA and Vested Beyond COBRA”. You’ll be taken to a page with that name. There you can choose, as appropriate, coverage for yourself only (COBRA Single Coverage), or for yourself and one dependent (COBRA Member + 1 Dependent Coverage), or for yourself and two or more dependents (COBRA Member + 2 or more Dependents). Then Click on the down arrow with the blue background in the section you have chosen and Click on the coverage period you wish to pay for. Finally, Click on “Add to Cart”. Then you can follow the instructions in steps 3-9 in section I above.

III. Paying for HMO Coverage for Yourself and Your Dependents (whether you are covered by employment or by COBRA or Vesting Beyond COBRA eligibility – except for COBRA under the NY State Subsidy Continuation Program, for instruction for that coverage please go to section IV below).

- 1) From the “Health Fund Payments” page, choose “HMO Self Pay” (same named tab on the bar at the top of the page), if there is an available HMO in your geographic area. You will be taken to the “HMO Self Pay” page, where you can Click on the HMO that is available in your area from among the tabs at the top of the page.(Aetna for Aetna HMOs in CT, GA, IL, MA, NJ and NY, HIP for NY only, Kaiser for CO, Northern or Southern CA, or Washington DC, Pacificare for Oregon or Washington State, and Medica for MN). If you select Aetna, Pacificare or Kaiser, you will need to Click on the HMO in your area from among the tabs at the top of the page, if you select HIP or Medica there are no choices among States.
- 2) Once you are in the correct HMO and State, you’ll be presented with the option to make your \$100 contribution for your own coverage (if you have not already done so elsewhere on the Web-site). Alternatively, you can choose coverage for yourself and one dependent, a domestic partner or two or more dependents if you are covered by employment. If you have COBRA coverage instead, you can also choose employee only, employee and one dependent, employee and a domestic partner or employee and two or more dependents coverage). Then follow the instructions for steps 3-9 in section I above.

IV. Paying for Health Coverage for Yourself Under the NY State Subsidy Continuation Program

- 1) From the “Health Fund Payments” page, Click on “NY State Subsidy Continuation Program” (“NY State Cobra Subsidy” on the tab at the top of the page).
- 2) Enter the premium amount you need to pay under the subsidy program (in the box labeled “Price”), then Click on the down arrow to the right of the (Month/Year) and Click on the month you would like pay for. Finally, Click on the down arrow to the right of the “Type of Coverage” box and Click on “Subsidy”, then Click on “Add to Cart”. Then follow the instructions for steps 3-9 in section I above.

V. Paying For Supplemental-Medicare Coverage When You Are Medicare Eligible and No Longer Covered by Employment (those 65 and over who are covered by employment can follow the instructions on sections I, II or III above, as appropriate).

- 1) From the “Health Fund Payments” page, Click on “POS Self Pay (CIGNA)”, then Click on “Supplemental-Medicare Coverage” to pay for coverage that will supplement your Medicare coverage if you are a retiree (if you are still working, the Fund coverage is still primary and not supplemental to Medicare – which means you obtain coverage by making your \$100 quarterly contribution and submit claims to CIGNA first, then send bills for unpaid amounts to Medicare for payment of certain claim amounts that CIGNA has not

paid). On this page you choose, as appropriate, coverage for yourself only, for your self and one dependent who is under 65, or one dependent who is also 65 or above, or two dependents who are under 65, or one dependent who is 65 or above and another who is under 65. Once you've decided on the kind of coverage you want to pay for, Click on the down arrow to the right of the "Coverage Period" box in that section and then Click on the period of coverage that you want to pay for. Finally, Click on "Add to Cart". Then follow steps 3-9 in section I above.

VI.. For Dental Coverage

- 1) From the "Health Fund Payments" page, (which you can get to from other pages by clicking on "Return to Main Page") Click on "Dental Coverage" tab and you will be brought to the "Dental Coverage" page where you can pay for dental coverage for yourself, or yourself and your dependent(s), in either the Dental HMO (DHMO) or the Dental PPO.
- 2) On the left hand side of the page, you'll see your DHMO choices (member only, member and 1 dependent and member and 2 or more dependents). On the right hand side, there are comparable choices for the Dental PPO coverage. Once you have identified the area of the page pertaining to the kind of coverage you want, Click on the down arrow to the right of the "Coverage Period" box in that area and then Click on the coverage period you'd like. Finally, Click on "Add to Cart" and follow steps 3-9 in Section 1 above.

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