

Welcome to **Consociate • Dansig Online Claims Access**, an online source to your benefit and claim information. We encourage you to utilize this guide to make the most of this convenient informational tool.

GETTING STARTED

- Using your internet browser, go to www.consociatedansig.com
- Under the employee Customer Quick Tools click on **Medical Claims Access** to enter the site.

New User

- If you are a new user click **Register**.
- Select your User Type from the drop down list
 - Employee if you are the member
 - Dependent if you are an insured other than the employee member (i.e. spouse or child)
- Enter your pertinent information as it appears on your health identification card or on your enrollment form.
- Click **Next**
 - If you are an insured, enter a Username and Password of your choosing and fill in the remaining fields.
 - If you are a dependent, enter a Username, and a password will be assigned and mailed to you.

Please Note: Passwords are case sensitive.

Registered User

Simply enter your Username and Password and click **Submit**

TOOLS FOR YOUR USE

Following you will find a brief description of the tools the *Online Claims Access* program has to offer. All navigation tools are on the left side of your screen. Simply click on the heading pertinent to the task you wish to complete.

Security

The Security feature allows you to:

- Change your User Name
- Change your Password
- Change your email address
- Simply enter your changes and click **Submit**

Please note: Any other changes made to your *e-benefits* profile cannot be completed online. Please contact your benefits department to make name, address and social security number changes.

Enrollment

The enrollment feature allows you to change your enrollment details. Choose from the following functions.

Please note: The Enrollment feature is not offered for all employer groups.

- Change Your Enrollment
 - Once you click on this feature, you will select from the following topics in the drop down list for your desired action.
 - Add Dependent
(if you are adding a new dependent to your coverage)
 - Change Employee Information
(i.e. address, telephone number change)
 - Change Enrollment Information
(i.e. add or decline medical or dental benefits)
 - Open Enrollment
(i.e. use this to add dependents or enroll in your employer group health plan during a period of open enrollment)
- View Your Enrollment History
- Print Your Enrollment Form

ID Cards

This feature allows you to print a temporary ID card.

- Click **Temporary ID card**.
- Enter your Corporate Code (this is your group number listed on your ID card). If you have lost your card, you can find this number under **my profile** in this program. To confirm, contact us at 888-242-4357.
- Your benefit information will appear in a new window.
- You can print this information by clicking on your browser Print button.



Inquiry

The features under Inquiry allow you to research your claims and verify your coverage.

Please note: this verification of coverage and benefit information is based upon available data. It does not constitute a guarantee of coverage or payment of any claims. Be aware there may be outstanding claims not yet posted to our systems.

- Flexible Spending Account Inquiry

This feature allows you to view your Annual Election, YTD contribution, YTD payments, current balance and remaining unused election for your medical, dependent care, and HRA reimbursements.

- To view a Balance report:

- Click **Cafeteria Plan**
- Select the name of the insured and click **Submit**
- A summary of your plan appears.
- Click on the eyeglass icon to view details regarding contributions and disbursements.

- Claims Inquiry

This feature allows you to check on the status of a claim, or view an Explanation of Benefits (EOB).

- To view a claim:

- Click **Claims Inquiry**
- Select the name of the claimant you wish to inquire about from the drop down list
- Enter a date range in which the claim occurred
- Click **Submit**

A Claim Summary screen will appear with all the pertinent information regarding your claim search

- To view claim detail:

- Click on the eyeglass icon to the left of the claim you wish to view.
- In this screen you can view a copy of the Explanation of Benefits (EOB) page that is mailed to the insured or a copy of checks dispersed. Simply click on the **EOB/Checks** button.

- Also within this screen you can view the Message Code Explanation. Simply click on the blue number under the "Message" heading.

- Coverage Verification

This feature allows you to review your coverage including: coverage type, deductible amounts, and accumulators met. To access this information:

- Click **Coverage Verification**
- Enter a date for which you want to verify coverage
- Choose claimant you'd like to verify from the drop down list
- Click **Submit**
- The claimant's eligibility will then appear.

Please note: If your employer's Summary Plan Description (SPD) is available, you will find a link to this document on this screen.

Links

When you click on this feature, you have easy access to the web sites of specific organizations that pertain to your group.

Help

If at any point you are having trouble navigating the site or have a question:

- Click on **Contents** on the left-hand side of the screen.
- Click on **Enrollee Tasks**.
- A new screen will come up where you will find a Table of Contents. Click on the topic of your inquiry.
- If you'd like to speak to customer service directly, feel free to call us at 888-242-4357.

AGC Health Plan of Illinois

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Third Party Administrator – Preferred Provider Organization