

Blue Cross NC- State Health Plan Facets Migration 2021 eBilling HBR Training



Module Objectives

By the end of this module, you should be able to:

- Understand the new Facets account structure for the State Health Plan (SHP)
- Log into eBilling for Facets and Power MHS (PMHS)
- Access SHP Facets billing tabs
- Handle key Facets eBilling scenarios
- Access contact information

Facets Account Structure



Group Numbers and Member ID

- The State Health Plan will have ONE group with multiple subgroups
- Group number will be 8 digits
 - 14170742
- Subgroup ID is 4 digits
- Member ID (3-digit alpha prefix followed by 9 numbers)
 - The subscriber will have Member suffix 00
 - The first dependent will have a 01
 - The second dependent a 02 and so forth



ID Cards in Facets

Subscriber ID #



Provider Type	CPP	Non CPP
Selected PCP*	\$0	\$30
Phy/Occu/Spch Therapy/Chiro	\$36	\$72
Specialist	\$47	\$94
Behavioral Health	\$0	\$45
Urgent Care	\$100	
ER	\$337 + Ded & 30%	
Other Info	INN	OON
Ind Deductible	\$1,500	\$3,000
Ind OOP Max	\$5,900	\$11,800
Family Deductible	\$4,500	\$9,000
Family OOP Max	\$16,300	\$32,600

* If PCP not selected, in-network copay \$45

CPP: Clear Pricing Project
INN: In-network/OON: Out-of-network
OOP: Out-of-pocket



Subscriber: **JOHN A SAMPLE** **00**

Member:

Subscriber ID:
YPY123400000

DEPARTMENT OF TRANSPORTATION
Date Issued: **01/01/2022** Group No: **14170742**

RXBIN: **004336** RXPCN: **ADV** RXGRP: **RX0274**

Primary Care Provider (PCP)

Dr. PCP
123 Anywhere Street
123-456-7890

NC SHP Network 70/30 Plan

Paid for by YOU and other NC Taxpayers

- Last 2 digits indicate:
- Employee 00
 - First Dependent 01
 - Second Dependent 02

8-digit State Health Plan Group #

ID Cards in Facets

Back of Card

State Health Plan Administered by:



Claims may be subject to review. For nonparticipating providers, members are responsible for ensuring the prior review/cert is obtained. For non-NC providers, members are responsible for ensuring the prior review/cert is obtained for Professional and/or outpatient services.

BlueCross and BlueShield of North Carolina, an independent licensee of the BlueCross and BlueShield Association, provides administrative services only for this self-funded plan and does not assume any financial risk for claims.

**Find A Clear Pricing
Project Provider and Save!**

Visit us online at:
www.SHPNC.org

♥ **CVS** caremark® Pharmacy Benefits Administrator

Subscriber: JOHN A SAMPLE 00

Member:

Subscriber ID: YPY123400000

Phone

Benefits & Claims	888-234-2416
Eligibility & Enrollment*	855-859-0966
Find Non-NC Providers	800-810-2583
Provider Service	800-214-4844
Prior Review/Certification	800-672-7897
Behavioral Health	800-367-6143
Pharmacy Help Desk*	800-364-6331
CVS Caremark*	888-321-3124

*Contracts directly with State Health Plan

Mail

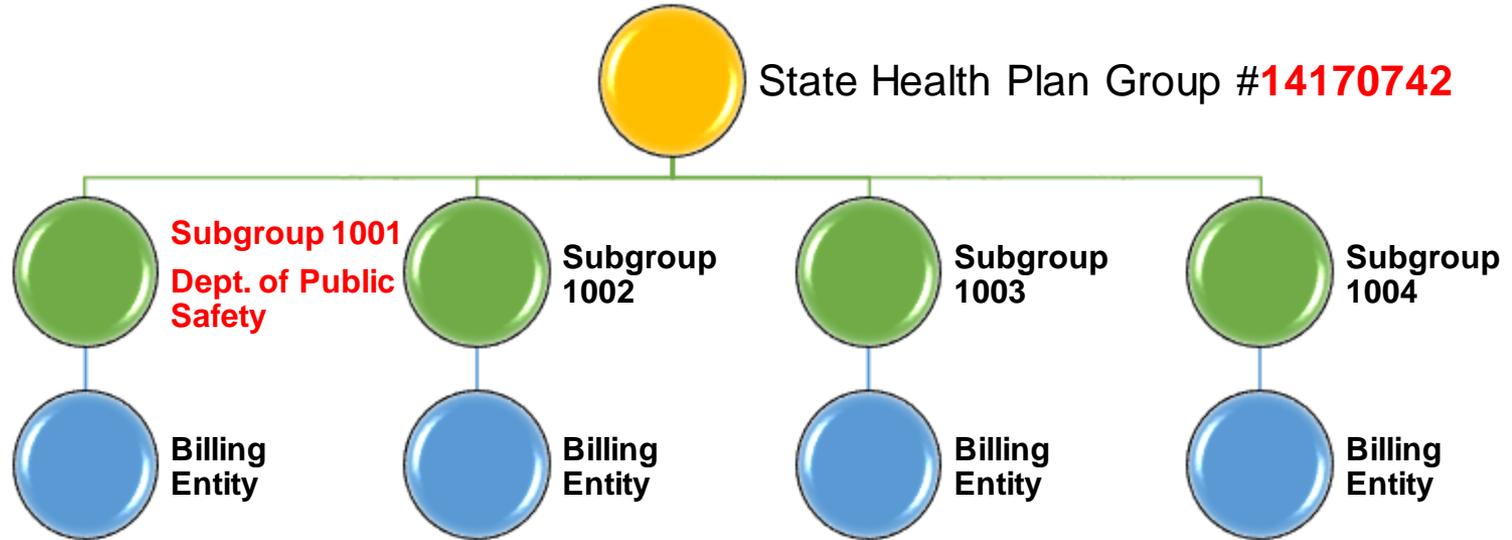
BlueCross and BlueShield of North Carolina
PO Box 30087
Durham, NC 27702-0035

*Providers send claims to their local
BlueCross BlueShield Plan*

Online

SHPNC.org

The State Health Plan Group Structure for Facets



PMHS vs. Facets

	PMHS	Facets
Benefit Package	<i>Examples:</i> 430Y, 430Q, 430K	Class Plan combination
Tier	<i>Examples:</i> SNGL, SBDS, LDSN	Calculated during Billing Batch based on active members of the family: <ul style="list-style-type: none">• Employee• Employee + Spouse• Employee + Children• Family
Agency or Employing Unit	Group = S14010	Subgroup = 1001
Employee Status	Non-Perm FT, Retired, Part time, Job Share, Cobra, Last month active	Class
Medicare Primary Status	Tier	Plan
Smoker Status	Part of the Tier	Indicator

Sample Class Plan Data Elements

Class

Employee Category	Class (Facets)
Full Time	FT- Active
Full Time	FT - Non-Perm (Contractors)
Full Time	FT - Non-Perm (Retiree)
Part Time	PT - 100% EE
Part Time	PT - ER+ EE
Job Share	Job Share
Leave of Absence	LOA - Fully Paid
Leave of Absence	LOA - Partially Paid
Retiree	Retiree - 0%
Retiree	Retiree - 100%
Retiree	Retiree - 50%
RIF	12 Month RIF
RIF	Forever RIF
COBRA	COBRA
Last Month Active	Last Month Active
Symbolic Subscriber	Symbolic Subscriber - 0%
Symbolic Subscriber	Symbolic Subscriber - 50%

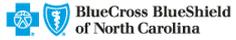
Plan

Plan ID	Plan Description
1020S01M	SHP - Plan A - All (Non-MP)
1020S02M	SHP - Plan A - Sub(Non-MP) & Dep (MP/ESRD)
1020S03M	SHP - Plan A - Sub (ESRD/MP) & Dep (Non-MP)
1020S04M	SHP - Plan A - Sub (ESRD/MP) & Dep (ESRD/MP)
1020S05M	SHP - Plan B - All (Non-MP)
1020S06M	SHP - Plan B - Sub (Non-MP) & Dep (MP/ESRD)
1020S07M	SHP - Plan B - Sub (ESRD/MP) & Dep (Non-MP)
1020S08M	SHP - Plan B - Sub (ESRD/MP) & Dep (ESRD/MP)
1020S11M	SHP - HDHP

Plan Xwalk	
Plan Name	Plan Type
Plan A	SHP - Blue Options - 70/30
Plan B	SHP - Blue Options - 80/20
HDHP	SHP - Blue Options - HDHP

Billing Changes





Welcome to State Health Plan eBilling!

The State Health Plan eBilling solution allows the viewing and payment of your premium bills quickly, accurately and securely. Just login and get started, it's that easy.

All State Health Plan premium payments are due on the 1st of each month.

 **Log in to your account**

Username*

Password*

[Log in](#)

[Forgot your Username? >](#)
[Forgot your Password? >](#)

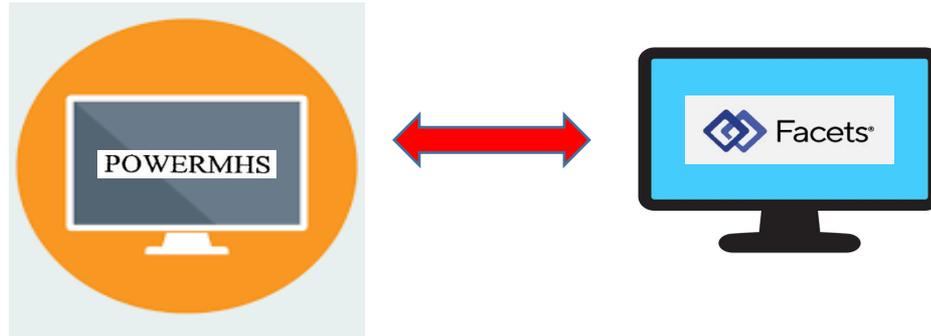
Support Hours - 8:30 a.m. to 5:30 p.m. EST Monday through Friday

Supported Browsers
[Learn about Officially Supported Browsers](#)

Login Information

Two Logins

- Starting in mid-November, a **new login** will be required to access eBilling in the new platform for billing periods dated 1/1/2022 and after.
- Your existing login ID will continue to be used to access bills on the old platform for billing periods dated 12/31/2021 and prior.



Welcome Email



Dear James McGill,

Welcome to Blue Cross NC eBilling, a secure online billing system! Your new username and instructions on how to set up your password are provided below.

NOTE - HBRs will have 2 logins:

1. use your existing login for invoices with a billing period 12/1/2021 - 12/31/2021 and prior
2. use the new login below for invoices with a billing period 1/1/2022 and after

Be aware that as long as retroactive changes with benefit effective dates prior to 1/1/2022 are allowed, HBRs will need to log into both systems and make a payment for any amount under each login:

Username: CRJMGILL

Password: instructions provided below

To get started, visit <https://bcbsnc-shp.secureebilling.com> to access and pay your Blue Cross NC eBilling invoices.

Instructions for setting up your password:

1. Once you have accessed the Blue Cross NC eBilling website, click the "Forgot your Password" link
2. Enter the username provided in this email and complete the security check and submit
3. An email will be sent to your email address providing a 6-digit validation code **valid for only 15 minutes!**
4. Enter the 6-digit validation code on the Blue Cross NC eBilling screen and complete the security check
5. Enter and confirm the new password and SUBMIT
6. You will be logged in to Blue Cross NC eBilling to view and pay your invoices

Upon logging into Blue Cross NC e-Billing, please go to the Payments tab to establish your payment account. The account can only be set up with a checking or savings account number. Credit cards are not an accepted form of payment.

Thank you,

Blue Cross Blue Shield of North Carolina

DO NOT REPLY TO THIS EMAIL. FOR ANY PASSWORD OR LOGIN ISSUES WITH YOUR NEW EBILLING CREDENTIALS, PLEASE CONTACT HBR SUPPORT AT 1-800-422-5249. FOR QUESTIONS REGARDING BILLING OR EBILLING PROCESS, PLEASE CONTACT THE HBR BILLING LINE AT 1-800-245-7319.

Accessing eBilling

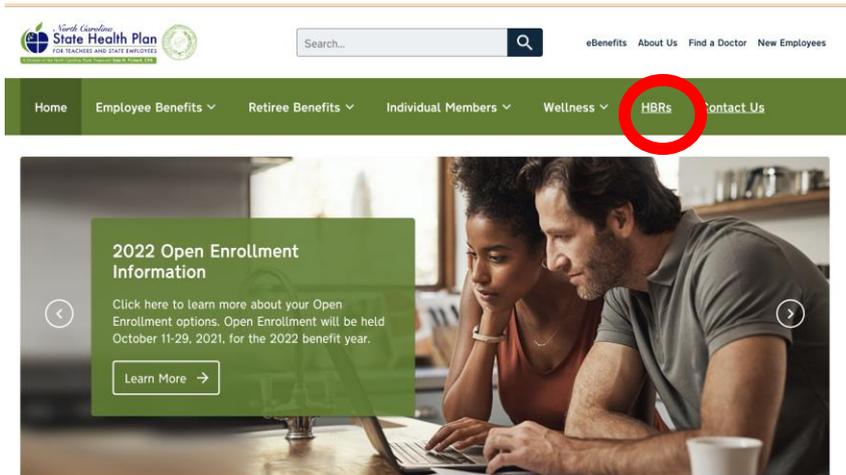
You will continue to access eBilling via this link:
<https://bcbsnc-shp.secureebilling.com>



Welcome to State Health Plan eBilling!

The State Health Plan eBilling solution allows the viewing and payment of your premium bills quickly, accurately and securely. Just login and get started, it's that easy.

All State Health Plan premium payments are due on the 1st of each month.



You can access the eBilling guide on the State Health Plan website under HBRs. <https://www.shpnc.org>

Then vs. Now

eBilling home page

The screenshot shows the eBilling home page with several key sections highlighted by callouts:

- Navigation Bar:** A vertical sidebar on the left containing icons for Home, Billing, Payments, and Reports.
- Current Invoice:** A large central area displaying the current invoice amount of \$79,301,545.46. Below the amount, there are buttons for 'View Payment', 'Print Invoice', and 'View Details'.
- Invoice Actions:** A callout pointing to the 'View Payment', 'Print Invoice', and 'View Details' buttons.
- Quick Links:** A callout pointing to a section on the right side of the page containing links for 'Search and view your payments', 'View your payment accounts', and 'Scheduled Reports'.
- Important Messages:** A callout pointing to a 'Messages' section on the right side of the page, which contains information about auto-draft payments and a list of immediate-origins.

HBR Home Screen – Facets



Home

Home

You are currently viewing: UNC ASHEVILLE

Return to ▾



Billing

Your last login was 10/01/2021 at 10:27:53 AM EST



Payments

Your Current 10/01/2021 Invoice



Reports



Users

UNC ASHEVILLE

20000001042 / 20000001042

\$2,532.38

Amount Due

Invoice Type:	Premium
Due Date:	10/01/2021
Bill Date:	09/26/2021
Billing Period:	10/01/2021-10/31/2021
Invoice #:	212700000002155

Make a Payment

Print Invoice

View Details

Your email: Mahidhar.tere@bcsnc.com [Edit](#)

Messages

Did you know?

For Auto-draft payments, bank pre-authorizations are required. Prior to enabling Auto-draft please contact your Financial Institution to ensure they have the appropriate information for payment acceptance.

This could include, but is not limited to the following:

- Immediate Origin or File ID: 7560894904
- Immediate Origin Name or Company Name: BCBSNC SHP
- Company Name: StateHealthPlan

There may be a delay of one or two days for invoice data to display in eBilling.

PAYMENT MAILING ADDRESS CHANGE

Effective immediately send check payments to:

Blue Cross NC
PO Box 580031
Charlotte, NC 28258-0031

Financial Totals– Facets



Andre Bennett

Home

Billing

Payments

Reports

Users

Invoice Details

You are currently viewing: TOWN OF SUNSET BEACH

Return to ▾

View Invoices

Search Invoices

Financial Totals | Summary | Details | Retroactivity | **Fees and Other Services**

[Pay Invoice](#) | [Print Invoice](#)

	Subgroup	Billing Entity	Bill Date	Billing Period	Invoice #	End Thru Date	Due Date	Amount Due
TOWN OF SUNSET BEACH 700 SUNSET BLVD NORT SUNSET BEACH, NC 28468	200000001222	200000001222	10/17/2021	11/01/2021-11/30/2021	2129100000000117	11/30/2021	11/01/2021	\$16,084.22

Financial Totals

Original Totals	
FEEES AND SERVICES	\$50.00
INVOICE TOTAL	\$3,107.60
BALANCE FORWARD	\$12,926.62
TOTAL AMOUNT DUE	\$16,084.22

Fees and Other Services – Example

BlueCross BlueShield of North Carolina | State Health Plan | Andre Bennett

Invoice Details

You are currently viewing: SALLIE B HOWARD

Return to ▾

Home | Billing | Payments | Reports | Users

View Invoices

Search Invoices

Financial Totals | Summary | Details | Retroactivity | **Fees and Other Services**

Pay Invoice | Print Invoice

SALLIE B HOWARD ACADIA NORTHSTAR 5029 FALLS OF NEUSE RD #218 RALEIGH, NC 27609	Subgroup 200000001122 Due Date 11/01/2021	Billing Entity 200000001122 Amount Due \$9,979.87	Bill Date 10/17/2021	Billing Period 11/01/2021-11/30/2021	Invoice # 212910000000113	Paid Thru Date 08/31/2021
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Financial Totals

Original Totals	
FEES AND SERVICES	\$20.00
INVOICE TOTAL	\$3,303.44
BALANCE FORWARD	\$6,656.43
TOTAL AMOUNT DUE	\$9,979.87

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Fees and Other Services – Example

BlueCross BlueShield of North Carolina | State Health Plan | Andre Bennett

Invoice Details

You are currently viewing: SALLIE B HOWARD

Return to ▾

View Invoices

Financial Totals | Summary | Details | Retroactive | **Fees and Other Services**

Search Invoices

Pay Invoice | Print Invoice

SALLIE B HOWARD ACADIA NORTHSTAR 5029 FALLS OF NEUSE RD #218 RALEIGH, NC 27609	Subgroup 200000001122 Due Date 11/01/2021	Billing Entity 200000001122 Amount Due \$9,979.87	Bill Date 10/17/2021	Billing Period 11/01/2021-11/30/2021	Invoice # 212910000000113	Paid Thru Date 08/31/2021
--	--	--	-------------------------	---	------------------------------	------------------------------

1 Items

Fee Description	Count	Amount
Flu Clinic Charge	1	\$20.00

1 Items

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Invoice – Example



**BlueCross BlueShield
of North Carolina**



North Carolina
State Health Plan
FOR TEACHERS AND STATE EMPLOYEES
A Division of the Department of State Treasurer

Blue Cross Blue Shield of North Carolina

Export / Print Invoice Report

Report Format:

PDF

Generated On:

10/27/2021 10:45:45 AM EDT

NC A AND T STATE UNIV

200000001047 / 200000001047

Due Date:

10/01/2021

Invoice #:

212700000002719

Invoice Date:

09/26/2021

Billing Period:

10/01/2021-10/31/2021

View Summary

CURRENT for this period

Type	Premium Contribution	Subscriber Count	Account Total
CURRENT	Employee Amount	5	\$2,080.00
	Employer Amount	5	\$2,609.80
Total CURRENT Premium:		10	\$4,689.80

View Summary

RETRO for this period

Type	Premium Contribution	Subscriber Count	Account Total
RETRO	Employee Amount	0	\$0.00
	Employer Amount	0	\$0.00
Total RETRO Premium:		0	\$0.00

View Summary

NET for this period

Type	Premium Contribution	Subscriber Count	Account Total
NET	Employee Amount	5	\$2,080.00
	Employer Amount	5	\$2,609.80
Total NET Premium:		10	\$4,689.80
Total Premium:		20	\$9,379.60

Invoice – Example

	BlueCross BlueShield of North Carolina		<i>North Carolina</i> State Health Plan <small>FOR TEACHERS AND STATE EMPLOYEES</small> <i>A Division of the Department of State Treasurer</i>
NC A AND T STATE UNIV 200000001047 / 200000001047			
Due Date:		10/01/2021	
Invoice #:		212700000002719	
Invoice Date:		09/28/2021	
Billing Period:		10/01/2021-10/31/2021	

View Financial Totals	
FEES AND SERVICES	\$0.00
INVOICE TOTAL	\$4,689.80
BALANCE FORWARD	\$4,689.80
TOTAL AMOUNT DUE	\$9,379.60

Updates to Invoice	
Updated Paid Thru Date	10/31/2021
Updated Balance Forward	\$0.00
Updated Amount Due	\$0.00

Invoice – Example

Details																
SSN	Subscriber ID	Last Name	First Name	Payroll No	From	Thru	Class ID	Class Description	Plan ID	Plan Description	Tobacco User	Tier	Employer Amount	Employee Amount	Total Charges	
xxx-xx-1089	104208834	Member1089	TestA		10/1/2021	10/31/2021	1001	FT - Active	1020S05M	SHP - Plan B - All (Non-MP)	no	Employee Only	\$521.96	\$50.00	\$571.96	
xxx-xx-1090	104208835	Member1090	TestB		10/1/2021	10/31/2021	1001	FT - Active	1020S05M	SHP - Plan B - All (Non-MP)	no	Employee + Spouse	\$521.96	\$700.00	\$1,221.96	
xxx-xx-1092	104208836	Member1092	TestC		10/1/2021	10/31/2021	1001	FT - Active	1020S05M	SHP - Plan B - All (Non-MP)	no	Employee + Children	\$521.96	\$305.00	\$826.96	
xxx-xx-1094	104208837	Member1094	TestD		10/1/2021	10/31/2021	1001	FT - Active	1020S05M	SHP - Plan B - All (Non-MP)	no	Employee + Children	\$521.96	\$305.00	\$826.96	
xxx-xx-1097	104208838	Member1097	TestE		10/1/2021	10/31/2021	1001	FT - Active	1020S05M	SHP - Plan B - All (Non-MP)	no	Family	\$521.96	\$720.00	\$1,241.96	

NC A AND T STATE UNIV	
200000001047 / 200000001047	
Due Date:	10/1/2021
Invoice #:	212700000002719
Invoice Date:	9/26/2021
Billing Period:	10/01/2021-10/31/2021

Summary – Facets

Same differences as Financial Totals Tab

View Invoices

Financial Totals
Summary
Details
Retroactivity
Fees and Other Services

Pay Invoice

Print Invoice

UNC ASHEVILLE PHILLIPS HALL, ROOM 228 ONE UNIVERSITY HEIGHTS ASHEVILLE, NC 28804	Subgroup 200000001042	Billing Entity 200000001042	Bill Date 09/26/2021	Billing Period 10/01/2021-10/31/2021	Invoice # 212700000002155	Paid Thru Date 08/31/2021
	Due Date 10/01/2021	Amount Due \$2,532.38				

CURRENT for this period			
Type	Premium Contribution	Subscriber Count	Account Total
CURRENT	Employee Amount	5	\$2,507.30
	Employer Amount	5	\$0.00
Total CURRENT Premium:		10	\$2,507.30
RETRO for this period			
Type	Premium Contribution	Subscriber Count	Account Total
RETRO	Employee Amount	90	\$0.00
	Employer Amount	90	\$0.00
Total RETRO Premium:		180	\$0.00
NET for this period			
Type	Premium Contribution	Subscriber Count	Account Total

Details – Facets

Same differences as Financial Totals Tab

View Invoices

Search Invoices

Financial Totals Summary **Details** Retroactivity Fees and Other Services

Pay Invoice Print Invoice

ORCA ASHEVILLE
PHILLIPS HALL, ROOM 228
ONE UNIVERSITY HEIGHTS
ASHEVILLE, NC 28804

Subgroup
200000001042

Due Date
10/01/2021

Billing Entity
200000001042

Amount Due
\$2,532.38

Bill Date
09/26/2021

Billing Period
10/01/2021-10/31/2021

Invoice #
212700000002155

Paid Thru Date
08/31/2021

Details

Find By Please Select Search Reset

5 Items | 1-5 | Advanced Sorting

	Subscriber ID	Last Name	First Name	Payroll No	From	Thru	Class ID	Class Description	Plan ID	Plan Description	Tobacco User	Tier	Employer Amount	Employee Amount	Total Charges
Options	104208812	Davis	Stephanie		10/01/2021	10/31/2021	1005	PT - ER+ EE	1020S11M	SH - HDHP	no	Employee + Children	\$0.00	\$426.66	\$426.66
Options	104208809	Graham	Barbara		10/01/2021	10/31/2021	1005	PT - ER+ EE	1020S11M	SHP - HDHP	no	Employee Only	\$0.00	\$238.66	\$238.66
Options	104208810	Martin	Tiffany		10/01/2021	10/31/2021	1005	PT - ER+ EE	1020S11M	SHP - HDHP	no	Employee + Spouse	\$0.00	\$655.66	\$655.66

Verbiage in column is different

Retroactivity – Facets

Same differences as Financial Totals Tab

View Invoices

Financial Totals Summary Details **Retroactivity** Fees and Other Services

Search Invoices

Pay Invoice Print Invoice

UNC ASHEVILLE PHILLIPS HALL, ROOM 228 ONE UNIVERSITY HEIGHTS ASHEVILLE, NC 28804	Subgroup 200000001042	Billing Entity 200000001042	Bill Date 09/26/2021	Billing Period 10/01/2021-10/31/2021	Invoice # 212700000002155	Paid Thru Date 08/31/2021
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Retroactive Adjustments

Find By Please Select Search Reset

45 Items | 1 - 20 Advanced Sorting

Subscriber ID	Last Name	First Name	Payroll No	From	Thru	Class ID	Class Description	Plan ID	Plan Description	Tobacco User	Tier	Employer Amount	Employee Amount	Total Charges
104208812	Davis	Stephanie		07/01/2021	07/31/2021	1005	PT - ER+ EE	1020S11M	SHP - HDHP	no	Employee + Children	\$0.00	\$0.00	\$0.00
104208812	Davis	Stephanie		05/01/2021	05/31/2021	1005	PT - ER+ EE	1020S11M	SHP - HDHP	no	Employee + Children	\$0.00	\$0.00	\$0.00
104208812	Davis	Stephanie		06/01/2021	06/30/2021	1005	PT - ER+ EE	1020S11M	SHP - HDHP	no	Employee + Children	\$0.00	\$0.00	\$0.00
104208812	Davis	Stephanie		01/01/2021	01/31/2021	1005	PT - ER+ EE	1020S11M	SHP - HDHP	no	Employee +	\$0.00	\$0.00	\$0.00

Verbiage in column is different

Make Payments

eBilling will continue to provide several options for paying invoices:

- Make Online Invoice Payments
- Enable Auto-Draft Payments
- Pay via check

The eBilling guide provides detailed instructions for each payment option:

- www.shpnc.org
 - HBRs Tab
 - Payroll and Billing

Please note that payments will now be made in both eBilling portals.

- Payments for invoices in the PMHS (Current) eBilling portal will be made in the PMHS (Current) eBilling portal
- Payments for invoices in the Facets (Future) eBilling portal will be made in the Facets (Future) eBilling portal

Application of Payments - Check

Each check will be reviewed to see whether funds are still owed in PMHS *

No balance in PMHS

- Apply to oldest Facets balance, interest first if applicable.

Balance in PMHS

- Apply to oldest PMHS or Facets balance, interest first in each case.
- Remainder to Facets balance by manual adjustment

* Assessment will be made on each payment until PMHS accounts are paid up through 12/31/2021.

Regardless of above criteria – PMHS credit balances will be moved to Facets at a future time to be determined by the Plan.

Application of Payments - Draft

- HBRs can only pay billed amount from each system:
 - Payments drafted in PMHS eBilling will be applied to PMHS.
 - Payments drafted in Facets eBilling will be applied to Facets.

Wrap Up

What's Changing

- **New Tab**
 - Fees and Other Services
- **New Terminology**
 - Subgroup
 - Billing Entity
 - Invoice Number
- **New Fields**
 - Subscriber ID
 - Class ID
 - Class Description
 - Plan ID
 - Plan Description
 - Tobacco User
 - Tier
 - Employee only
 - Employee + Spouse
 - Employee + Children
 - Family

These are NOT Changing *

- **Creating Reports**
 - **Viewing Invoices**
 - **Making Payments**
- * While the process for these are not changing, you will notice verbiage changes (i.e., Group Number to Subgroup, etc.)

Important Contact Information

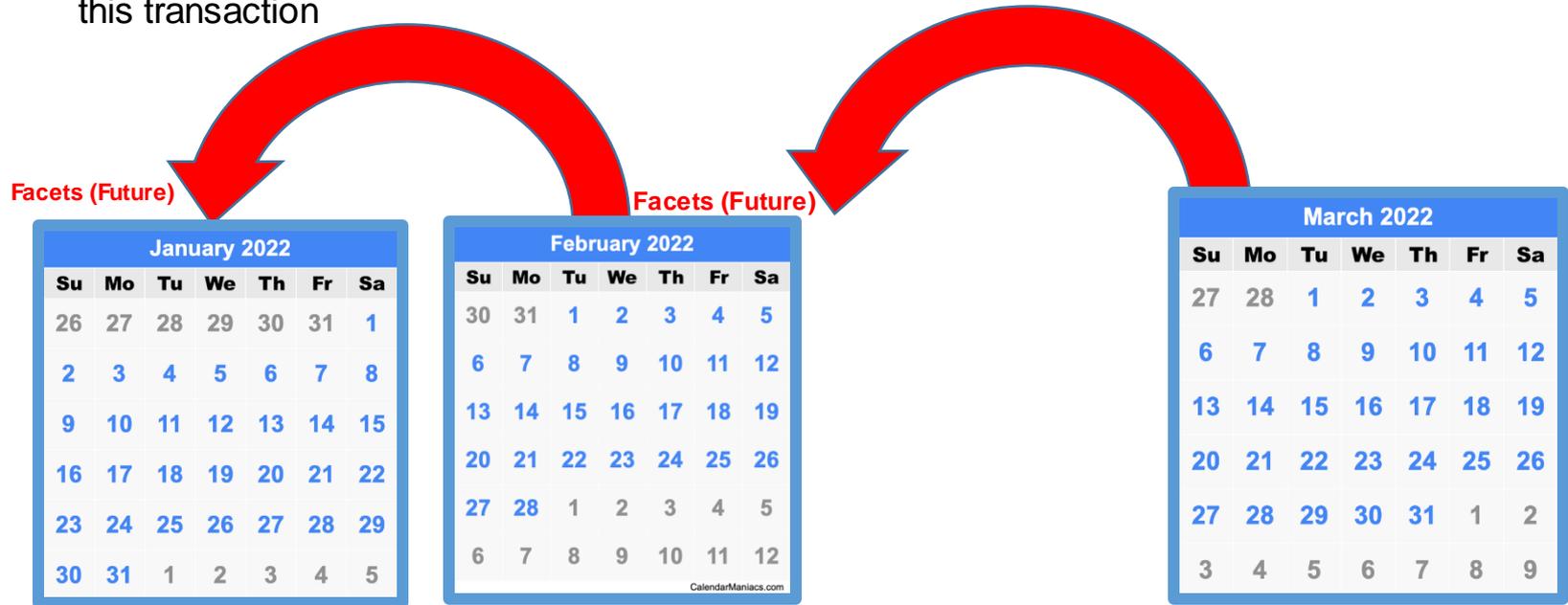
HBR Billing Line	For Member Enrollment Questions (Benefitfocus)	eBilling Password Reset
1-800-245-7319	1-800-422-5249	HBRInquiries@nctreasurer.com

Billing Scenarios

Scenario #1

In March 2022, a HBR enters a retroactive transaction for a member to be effective 1/1/2022 and an invoice is generated with this transaction

Retroactivity will show in the new Facets (future) eBilling portal

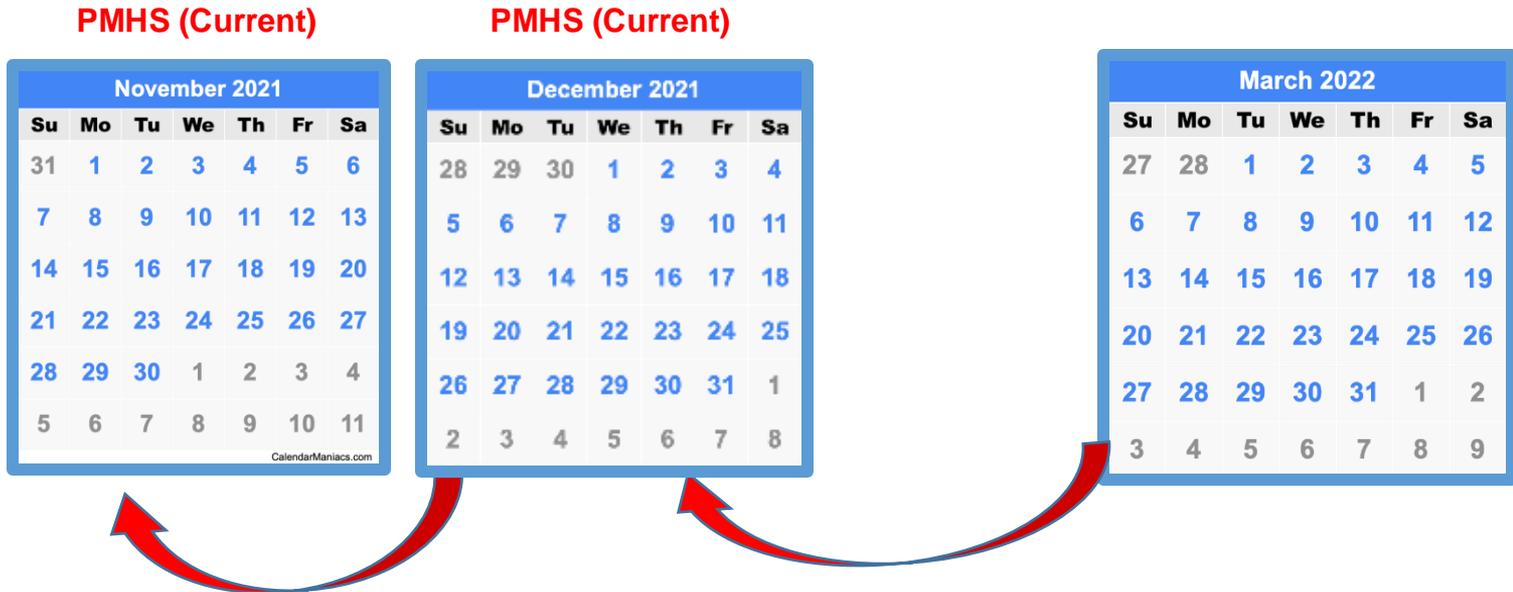


In this scenario, the HBR will pay in the Facets (Future) eBilling portal.

Scenario #2

In March 2022, a HBR enters a retroactive transaction for 11/1/2021 to 12/31/2021 for a member who is currently effective 1/1/2022 and an invoice is generated with this transaction

Retroactivity will show in the current PMHS (Current) eBilling portal



In this scenario, the HBR will pay in the PMHS (Current) eBilling portal.

Scenario #3

In March 2022, a HBR enters a retroactive transaction for a member effective 11/1/2021 who is **not currently active** and invoices with this information are generated.

Retroactivity will show in the PMHS (Current) eBilling portal for any billing periods prior to 1/1/2022 and the new Facets (Future) eBilling portal for any billing periods 1/1/2022 and after.

PMHS (Current)

November 2021						
Su	Mo	Tu	We	Th	Fr	Sa
31	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	1	2	3	4
5	6	7	8	9	10	11

PMHS (Current)

December 2021						
Su	Mo	Tu	We	Th	Fr	Sa
28	29	30	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	1
2	3	4	5	6	7	8

Facets (Future)

January 2022						
Su	Mo	Tu	We	Th	Fr	Sa
26	27	28	29	30	31	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31	1	2	3	4	5

Facets (Future)

February 2022						
Su	Mo	Tu	We	Th	Fr	Sa
30	31	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	1	2	3	4	5
6	7	8	9	10	11	12



March 2022						
Su	Mo	Tu	We	Th	Fr	Sa
27	28	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	1	2
3	4	5	6	7	8	9

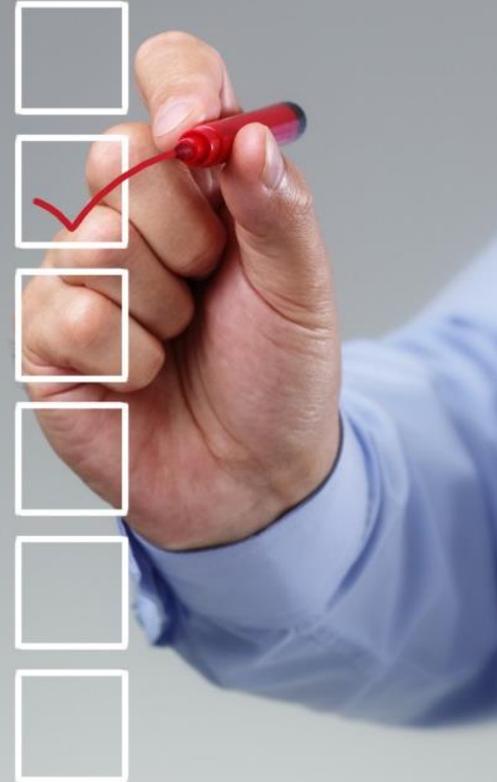
In this scenario, the HBR will pay in the Facets (Future) and PMHS (Current) eBilling portal.

Local Governments/Charter School Retroactive Billing for December Only

- Local governments and charter schools who have retroactivity in PMHS will not see their invoices until 12/21/21.
- This will only occur for local governments and charter school retroactive invoices in December 2021.

Now that you have completed this module, you should be able to:

- Understand the new Facets account structure for the State Health Plan (SHP)
- Log into eBilling for Facets and Power MHS (PMHS)
- Access SHP Facets billing tabs
- Handle key Facets eBilling scenarios
- Access contact information



Questions



Thank You

For Attending The Training