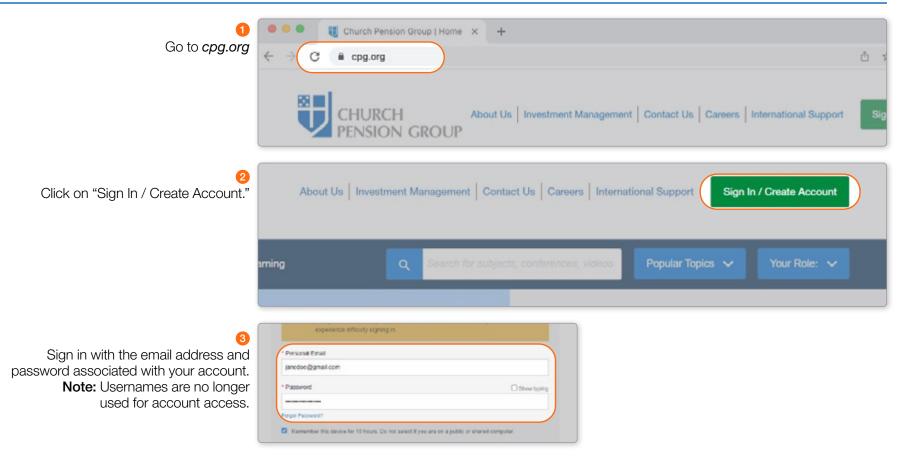


Plan Selection for Administrators

These instructions will guide you through CPG's systems as you make your group plan selections for the coming year.

This task is carried out by the Diocese, Group, and Institution administrators who are responsible for making plan selections for their benefits group(s).

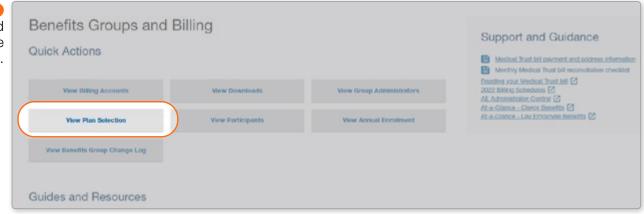
Step One: Log in



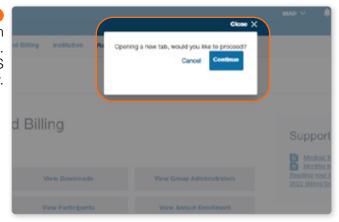
From the MAP dashboard, select the "Benefits Groups and Billing" tab.



From the "Benefits Groups and Billing" landing page, click on the "View Plan Selections" button.



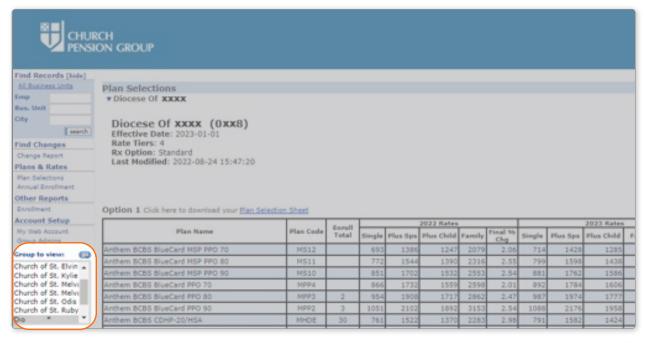
A pop-up will ask you to confirm that you want to open a new tab. Click "Continue," to open the MLPS application in a new window.



1

The left side of the MLPS Plan Selection screen offers a menu of options.

If you are responsible for multiple benefits groups (Association Numbers, or ASSNs), choose the group for which you are making plan selections.



2

Otherwise, the screen will display the medical plans to select for your group.



1

Review your plan choices and determine your plan selections.

Click the "Accept" or "Decline" button next to each plan. You must do this for each plan! Use the "Clear Changes" button to start over.

If you wish to request a rate tier or Rx (pharmacy plan) option change, see "Request an Additional Quote" instructions below.

Plan Name	Plan Code	Enroll Total	2022 Rates					2023 Rates					2023 Election	
			Single	Plus Sps	Plus Child	Family	Final % Chg	Single	Plus Sps	Plus Child	Family	Final % Chg	Accept	Decli
Anthem BCBS BlueCard MSP PPO 70	MS12		693	1386	1247	2079	2.06	714	1428	1285	2142	3.04	101	0
Anthem BCBS BlueCard HSP PPO 80	MS11		772	1544	1390	2316	2.55	799	1598	1438	2397	3.48	101	0
Anthem BCBS BlueCard MSP PPO 90	MS10		851	1702	1532	2553	2.54	881	1762	1586	2643	3.53		-0
Anthem BCBS BlueCard PPO 70	MPP4		866	1732	1559	2590	2.01	892	1784	1606	2676	3.01		0
Anthem BCBS BlueCard PPO 80	HPP3	2	954	1908	1717	2862	2.47	987	1974	1777	2961	3.46	[0]	0
Anthem BCBS BlueCard PPO 90	MPP2	3	1051	2102	1892	3153	2.54	1088	2176	1958	3264	3.52	181	0
Anthem BCBS CDHP-20/HSA	MHDE	30	761	1522	1370	2283	2.98	791	1582	1424	2373	3.94		0
Cigna Open Access Plus CDHP-20/HSA	MHDC	182	761	1522	1370	2283	2.98	791	1582	1424	2373	3.94	0	
Cigna Open Access Plus MSP PPO 70	MGM4		693	1386	1247	2079	2.06	714	1428	1285	2142	3.04	. 0	
Cigna Open Access Plus HSP PPO 80	NGH3		772	1544	1390	2316	2.55	799	1598	1438	2397	3.48	0	
Cigna Open Access Plus MSP PPO 90	MGM2	1	851	1702	1532	2553	2.53	881	1762	1586	2643	3.53	0	
Cigna Open Access Plus PPO 70	MG04	1	866	1732	1559	2598	2.01	892	1784	1606	2676	3.00	0	
Cigna Open Access Plus PPO 80	MG03	1	954	1908	1717	2862	2.46	987	1974	1777	2961	3.46	0	
Cigna Open Access Plus PPO 90	MG02	5	1051	2102	1892	3153	2.54	1088	2176	1958	3264	3.52	0	
Anthem BCBS BlueCard HSP PPO 100	MSG9							955	1910	1719	2865	3.48		-0
Anthem BCBS BlueCard PPO 100	MPP1							1180	2360	2124	3540	3.51	181	0
Anthem BCBS CDHP-15/HSA	MHDG							917	1834	1651	2751	3.97	101	0
Cigna Open Access Plus CDHP-15/HSA	MCDH							917	1934	1651	2751	3.97	0	
Cigna Open Access Plus NSP PPO 100	MGH1							955	1910	1719	2865	3.48	0	
Cigna Open Access Plus PPO 100	MG01						V 2	1180	2360	2124	3540	3.51	0	

Review the Participating Group Agreement, the Administrative Policy Manual, and the Legal Consent set forth above the checkbox, and then, if you agree to their terms, click the checkbox to give legal consent on behalf of your Participating Group and click "Submit."



Confirm by clicking "OK" in the pop-up window.



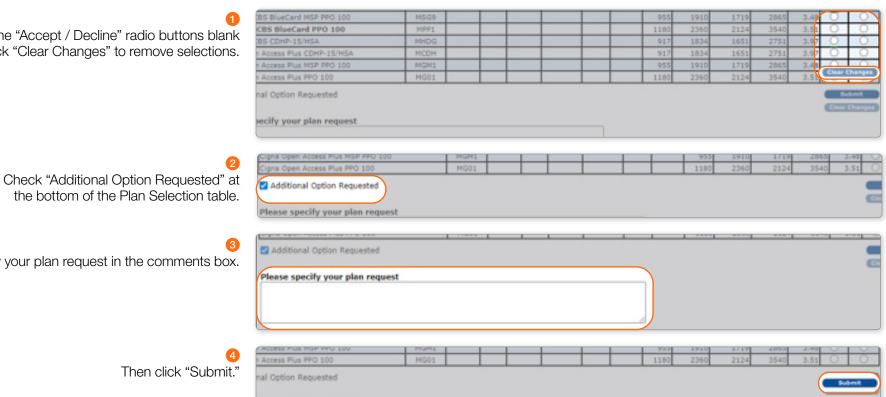
Plans and Rate selections have been updated successfully - When you see the green text at the top of the screen, it means that plans and rate selections have been successfully updated. Your selection grid will then become inactive.

Click the Plan Selection Sheet link to view a PDF of your completed selections.



Optional: Request an Additional Quote

Leave the "Accept / Decline" radio buttons blank or click "Clear Changes" to remove selections.



Specify your plan request in the comments box.

Then click "Submit."

ecify your plan request



Use these dropdown menus to choose from the multiple rate tiers and/or Rx (pharmacy plan) options you requested.

Choose "Rate Tiers" and/or "Rx Option" values for the plans presented in response to your optional request.



2

Then click the "View Plans" button to see the rate changes displayed on screen.



3

To complete plan selections, follow the instructions above in Step Four: "Review Renewal Package, Plans / Rates, and Make Plan Selections", #2 and #3.

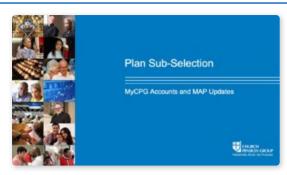
Note: All plans **cannot** be **declined**. If you attempt to do so, a warning message will appear.



Institution Plan Sub-select (for Institution Administrators)

Plan sub-selection allows institutions to offer only a subset of the medical and dental plan options made available by their Participating Groups.

To view a demo of Institution Plan Sub-selection, *click here*.



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