



Employers



Paying Your Premiums Online





Paying Your Premiums Online

Table of Contents

Table of Contents	1
Making Your First Payment (Binder)	2
Setting Up Autopay (Recurring Payments)	9
Turning Off Autopay (Recurring Payments)	15
Making a One-Time Payment.....	19
Contact and Additional Information	23



Paying Your Premiums Online

This guide shows Small Business owners how to pay health insurance premiums online through secure electronic check payment in the MA Health Connector account. It covers:

- Making your first payment (binder payment)
- Setting up or deleting recurring payments (autopay)
- Making a one-time payment

Making Your First Payment (Binder)

Your first payment is called your binder payment. You must follow these steps to make your first payment. If you would like to set up autopay, you can do so after making your binder payment.

Step 1. Login to your Employer account on mahealthconnector.org

Step 2. Select 'Billing' from the left menu.

My Health Connector

- Employees
- Benefits
- Brokers
- Documents
- Billing**
- Messages 18

My Health Benefits Program

EMPLOYEE ENROLLMENTS AND WAIVERS ?

Minimum Re

2 out of 2 have enrolled or waived coverage

PLAN YEAR

ENROLLMENT PERIOD	November 15th, 2019 -November 20th, 2019	STATUS
COVERAGE YEAR	December 1st, 2019 -November 30th, 2020	Active



Step 3. Select the 'Statements' tab to view the invoice for your first month of coverage. Record the total amount due – you will need it when you set up your payment.

Account Number: [REDACTED]

Total Amount Due ⓘ	Past Due Amount ⓘ
\$1,149.65	\$0.00

Recent ActivityStatementsPay My Bill

Recent Activity

Description	Amount
+ Payments since 12/02/2019 invoice	
+ Enrollment changes since 12/02/2019 invoice ⓘ	

Step 4. Select the 'Pay My Bill' tab.

Recent ActivityStatementsPay My Bill

Billing

Health Connector issues one monthly invoice at the beginning of each month. The invoice includes next month's premium payments, and any adjustments from previous months. The total amount due reflects all premiums due (health and dental if applicable), even when you offer coverage from more than one insurer.



Employers



Step 5. Select 'Pay Online'.

Account Number: [Redacted]

Total Amount Due ⓘ	Past Due Amount ⓘ
\$1,149.65	\$0.00

[Recent Activity](#)[Statements](#)[Pay My Bill](#)

Billing

Health Connector issues one monthly invoice at the beginning of each month. The invoice includes next month's premium payments, and any adjustments from previous months. The total amount due reflects all premiums due (health and dental if applicable), even when you offer coverage from more than one insurer.

Your Health Connector account number: [Redacted]

Health Connector offers multiple payment options including:

1.

[Pay Online ⓘ](#)

[How to Pay Online - Instructions](#)

My Health Connector

Employees

Benefits

Brokers

Documents

Billing

Messages 18

Update Business Info

View Enrollment Reports

My Employees: 2

Step 6. Select 'Pay Online'.

[Recent Activity](#)[Statements](#)[Pay My Bill](#)

Billing

Health Connector's on-line payment is powered by Wells Fargo E-Bill Express. By clicking this link, you will be subject to the terms of use found on that website.

[Cancel](#)[Pay Online](#)



Employers



Step 7. Select 'Pay My Bills'.



[Home](#)

[Pay My Bills](#)

[Recurring Payment](#)

Step 8. Select the row that says 'Due Date' and 'Payment Note'. You'll see a row with 'MA Health Connector Account Number 1' expand below.

Due Date	Payment Note	Amount Due	Payment Amount

Step 9. Select 'Initial Binder Payment' from drop down menu

Due Date	Payment Note	Amount Due	Payment Amount
	Account Number 233751		
	Initial Binder Payment	0.00	
11/30/2019		0.00	0.00

Step 10. Enter the total amount due from your invoice.



[Home](#)


[Pay My Bills](#)

[Recurring Payment](#)

Due Date	Payment Note	Amount Due	Payment Amount
11/30/2019		0.00	0.00



Step 11. Select 'Add A Payment Method'.


 PAYMENT SUMMARY

0 Invoices

\$0.00

[Remove All](#)

Payment Method

 [Add A Payment Method](#)

Pay Date

12/03/2019

Payments confirmed before Tuesday, December 03, 2019 8:00 PM ET will be posted on Tuesday, December 03, 2019. Payments confirmed after Tuesday, December 03, 2019 8:00 PM ET will be posted on Wednesday, December 04, 2019.

[Cancel](#)

Continue to Payment



Step 12. Enter bank account information. Select 'Add'.

Add A Payment Method

BANK ACCOUNT

Account Type

Personal

Business

Banking Type

Checking Account

Savings Account

Give This Account a Nickname

Account

Name on the Account

Jane Doe

Routing Number

091000022

US BANK NA

Account #

000123456

Re-enter Account #

000123456

Pay to the
Order of

123456789

000123456

1111

Routing Number

Account Number

Make sure to use your bank account number, not your ATM
or Debit card number.

By selecting "Agree and Add Account", you authorize the information you've provided on the above account to be used for
creation of a charge to the account listed above. You also affirm that the information you provided is correct, that you are a
signer on the account above and there are available funds to cover the amount of any transactions that you authorize.

☒ Agree and Add Account

Add



Important: Double check your routing and account numbers to make sure we process your payment accurately.



Employers



Step 13. Check your payment information and review the Payment Terms & Conditions. Select 'Make Payment'.

PAYMENT SUMMARY

1 Invoice

\$1,149.65

Payment Method

[Add A Payment Method](#)

Account US BANK NA *****3456

Payment Date

12/11/2019

Payments confirmed before Wednesday, December 11, 2019 8:00 PM ET will be posted on Wednesday, December 11, 2019. Payments confirmed after Wednesday, December 11, 2019 8:00 PM ET will be posted on Thursday, December 12, 2019.

Payment Terms & Conditions

These terms and conditions govern your use of the Internet Bill Presentment and Payment Service (the "Service"). As used in these Terms, the words "we," "us," and "our" refer to Wells Fargo Bank, N.A. (or its affiliate). The words "you" and "your" refer to you as the business entity accepting these Terms and using the Service. The words "you" and "your" also include any user you authorize to use the Service on your behalf.

1. Erroneous Instructions. If we receive a payment instruction authorized by you and the instruction is erroneous in any way, we shall have no obligation or liability for the error.

2. Transaction Limitations. Please be aware that certain types of bank accounts have limits on the numbers of transfers or withdrawals that may be made per month. Your bank may refuse transfers which would exceed such limits, so we recommend you check with your bank to determine what limitations are imposed on withdrawals from any account. If we are not able to debit the amount required to cover an

[Print Terms and Conditions](#)

☒ By checking this box you agree to the terms and conditions stated above.

By clicking the **Make Payment** button I, **Jane Doe**, confirm that today, Wednesday December 11, 2019, I am authorizing a one-time debit from my Checking account ending in *****3456 in the amount of \$1149.65 USD to be remitted to Health Connector. This debit will occur on or after Wednesday December 11, 2019.

If you have any questions regarding this transaction request, please call 800-841-2900.

Make Payment

[Cancel](#)

Step 14. You can print a copy of your payment confirmation for your records. Wells Fargo will also email you a payment confirmation.



Setting Up Autopay (Recurring Payments)

Step 1. Login to your employer account on mahealthconnector.org

Step 2. Select 'Billing' from the left menu.

My Health Connector

- Employees
- Benefits
- Brokers
- Documents
- Billing**
- Messages 18

My Health Benefits Program

EMPLOYEE ENROLLMENTS AND WAIVERS ?

Minimum Re

2 out of 2 have enrolled or waived coverage

PLAN YEAR

ENROLLMENT PERIOD	November 15th, 2019 -November 20th, 2019	STATUS
COVERAGE YEAR	December 1st, 2019 -November 30th, 2020	Active

Step 3. Select the 'Pay My Bill' tab.

Recent Activity Statements **Pay My Bill**

Billing

Health Connector issues one monthly invoice at the beginning of each month. The invoice includes next month's premium payments, and any adjustments from previous months. The total amount due reflects all premiums due (health and dental if applicable), even when you offer coverage from more than one insurer.



Employers



Step 4. Select 'Pay Online'.

Account Number: [Redacted]

Total Amount Due ⓘ	Past Due Amount ⓘ
\$1,149.65	\$0.00

Recent Activity | Statements | **Pay My Bill**

Billing

Health Connector issues one monthly invoice at the beginning of each month. The invoice includes next month's premium payments, and any adjustments from previous months. The total amount due reflects all premiums due (health and dental if applicable), even when you offer coverage from more than one insurer.

Your Health Connector account number: [Redacted]

Health Connector offers multiple payment options including:

Pay Online ⓘ

[How to Pay Online - Instructions](#)

My Health Connector
Employees
Benefits
Brokers
Documents
Billing
Messages 18

Update Business Info
View Enrollment Reports
My Employees: 2

Step 5. Select 'Pay Online'.

Recent Activity | Statements | **Pay My Bill**

Billing

Health Connector's on-line payment is powered by Wells Fargo E-Bill Express. By clicking this link, you will be subject to the terms of use found on that website.

Cancel | **Pay Online**



Employers



Step 6. Select 'Add' Auto Pay.

[Home](#) [Pay My Bills](#) [Recurring Payment](#)

Payment Note	
Due Date	12/31/2019
Amount Due	\$1,252.18

Payment Amount
\$ 1,252.18

Payment Method [+ Add A Payment Method](#)

Pay Date
12/18/2019

MESSAGES [View](#)
For Customer Service, please call 1-888-813-9220 (Monday-Friday 8:00 AM – 6:00 PM)

RECURRING PAYMENT [Add](#)

Step 7. Select 'Create New Recurring Payment'.

[Home](#)[Pay My Bills](#)[Recurring Payment](#)

Recurring Payment

Recurring Payment

Recurring Payment Message

Recurring Payment will begin following the first billing cycle after you have set up the Recurring Payment (which could be up to 30 days). Continue to pay as usual until you receive an email notifying you the Recurring Payments are being processed.

[+ Create New Recurring Payment](#)



Employers



Step 8. Enter a payment name and select 'Continue'.



[Home](#)

[Pay My Bills](#)

[Recurring Payment](#)

Recurring Payment Setup

[PAYMENT INFO](#)

[SCHEDULE](#)

[PAYMENT METHOD](#)

[AUTHORIZATIONS](#)

Payment Name

Select Account Number

Recurring Payment for Account Number

Recurring Payment will begin following the first billing cycle after you have set up the Recurring Payment (which could be up to 30 days). Continue to pay as usual until you receive an email notifying you the Recurring Payments are being processed.

[Continue](#)

Step 9. Enter your payment information and select 'Continue'.

Recurring Payment Setup

[✓ PAYMENT INFO](#)

[SCHEDULE](#)

[PAYMENT METHOD](#)

[AUTHORIZATIONS](#)

When would you like to make your payment?

On Due Date

Day of the Month

Payment Amount

Amount Due

Up to Amount

Fixed Amount

Keep Making This Payment Until

I Stop The Payment

Number of Payments

Specific Date

☐ Send me a reminder 1 days before payment is to be processed.

Disclaimer: We recommend you record this payment schedule as a reminder in the event the email is overlooked or not delivered to your email address.

[Go Back](#)

[Continue](#)

Important: Be sure to:

- Select a recurring payment date after the 10th of the month, but before the 23rd. This means you'll have your invoice for each month before your payment is withdrawn.
- If you are concerned about overpayment, select 'Up to Amount' or 'Fixed Amount'.



Employers



Step 10. Select 'Add A Payment Method'.



[Home](#)

[Pay My Bills](#)

[Recurring Payment](#)



Recurring Payment Setup

[✓ PAYMENT INFO](#)

[✓ SCHEDULE](#)

PAYMENT METHOD

[AUTHORIZATIONS](#)

Payment Method

[Add A Payment Method](#)

Account US BANK NA *****3456

[Go Back](#)

[Continue](#)

Step 11. Enter bank account information. Select 'Add'.

Account Type	Account #
<input checked="" type="radio"/> Personal <input type="radio"/> Business	<input type="text" value="000123456"/>
Banking Type	Re-enter Account #
<input checked="" type="radio"/> Checking Account <input type="radio"/> Savings Account	<input type="text" value="000123456"/>
Give This Account a Nickname	
<input type="text" value="Account"/>	
Name on the Account	
<input type="text" value="Name on The account"/>	
Routing Number	
<input type="text" value="091000022"/>	

Pay to the Order of _____

⑆ 123456789 ⑆ 000123456 ⑆ 1111

Routing Number **Account Number**

Make sure to use your bank account number, not your ATM or Debit card number.

Important: Double check your routing and account numbers to make sure we process your payment accurately.



Employers



Step 12. Review and agree to the Billing Authorization. Select 'Finish'.

Billing Authorization

[Print Authorization](#)

I authorize Health Connector to automatically initiate entries to my financial account listed above in this authorization, for payments to my Health Connector account [redacted] at the stated times listed above.

I further authorize the Financial Institution to accept these debit entries as valid debit activities under my account. Proof of the payment will appear on my financial account statement as one charge to Health Connector. My authorization will remain in effect for the length of time stated above or until I cancel it online and give Health Connector a reasonable opportunity to act.

Your Recurring Payment will be initiated and a payment made either after an invoice is rendered, or on a date selected during setup. In the event that no invoice is rendered or the date you select is prior to the posting of an invoice (except for specific date for a fixed amount, which doesn't need a new invoice rendered), then the Recurring Payment will not be made. We are not responsible for a Recurring Payment where no invoice is in the system against which a Recurring Payment can be processed.

Please print a copy of this authorization and retain for your records.

☒ By checking this box you agree to the terms and conditions stated above.

[Go Back](#)

Finish

Step 13. You will see an alert at the top of your screen showing that your recurring payment has been set up. Wells Fargo will also email you a confirmation.

Recurring Payment

DECEMBER PREMIUM

[Review/Delete](#)

Paid on Account [redacted]
Paid on the 5th of the Month



Important: If you need to update your recurring payment, follow the steps for Turning Off Autopay (Recurring Payments) and then set up a new autopayment.



Turning Off Autopay (Recurring Payments)

Step 1. Login to your employer account on mahealthconnector.org

Step 2. Select 'Billing' from the left menu.

My Health Benefits Program

EMPLOYEE ENROLLMENTS AND WAIVERS ?

Minimum Re

2 out of 2 have enrolled or waived coverage

PLAN YEAR

ENROLLMENT PERIOD	November 15th, 2019 -November 20th, 2019	STATUS
COVERAGE YEAR	December 1st, 2019 -November 30th, 2020	Active

Step 3. Select the 'Pay My Bill' tab.

Billing

Health Connector issues one monthly invoice at the beginning of each month. The invoice includes next month's premium payments, and any adjustments from previous months. The total amount due reflects all premiums due (health and dental if applicable), even when you offer coverage from more than one insurer.

Step 4. Select 'Pay Online'.



My Health
Connector

Employees

Benefits

Brokers

Documents

Billing

Messages 18

Update Business Info
View Enrollment Reports

My Employees: 2

Account Number: [REDACTED]

Total Amount Due ⓘ

\$1,149.65

Past Due Amount ⓘ

\$0.00

Recent Activity

Statements

Pay My Bill

Billing

Health Connector issues one monthly invoice at the beginning of each month. The invoice includes next month's premium payments, and any adjustments from previous months. The total amount due reflects all premiums due (health and dental if applicable), even when you offer coverage from more than one insurer.

Your Health Connector account number: [REDACTED]

Health Connector offers multiple payment options including:

1. **Pay Online** ⓘ

[How to Pay Online - Instructions](#)

Step 5. Select 'Pay Online'.

Recent Activity

Statements

Pay My Bill

Billing

Health Co

month. T

adjustme

premium

from mo

Your Hea

Health Connector's on-line payment is powered by Wells Fargo E-Bill Express. By clicking this link, you will be subject to the terms of use found on that website.

Cancel

Pay Online



Employers



Step 6. Select 'Autopay/Recurring Payment'.



[Home](#)

[Pay My Bills](#)

[Recurring Payment](#)

Step 7. Select 'Review/Delete'.



[Home](#)

Recurring Payment

Recurring Payment

DECEMBER PREMIUM

Paid on Account



Paid on the 5th of the Month

[Review/Delete](#)



Step 8. Select 'Delete'. This will turn off your autopayment.

Manage Recurring Payment

PAYMENT INFO			
<p>Payment Name</p> <p>December Premium</p> <p>Select Account Number</p> <p></p> <p>Recurring Payment will begin following the first billing cycle after you have set up the Recurring Payment (which could be up to 30 days). Continue to pay as usual until you receive an email notifying you the Recurring Payments are being processed.</p>	<table><tr><td><p>Next Payment Amount</p><p>Amount Due</p><p>Payment Schedule</p><p>Amount due will be paid on the 5th</p><p>Setup Date</p><p>12/04/2019</p></td><td><p>Next Payment Date</p><p>12/5/2019</p><p>Pay Until</p><p>The Recurring Payment will continue until it is cancelled.</p><p>Email Reminder</p><p>1 days before payment is to be processed.</p></td></tr></table>	<p>Next Payment Amount</p> <p>Amount Due</p> <p>Payment Schedule</p> <p>Amount due will be paid on the 5th</p> <p>Setup Date</p> <p>12/04/2019</p>	<p>Next Payment Date</p> <p>12/5/2019</p> <p>Pay Until</p> <p>The Recurring Payment will continue until it is cancelled.</p> <p>Email Reminder</p> <p>1 days before payment is to be processed.</p>
<p>Next Payment Amount</p> <p>Amount Due</p> <p>Payment Schedule</p> <p>Amount due will be paid on the 5th</p> <p>Setup Date</p> <p>12/04/2019</p>	<p>Next Payment Date</p> <p>12/5/2019</p> <p>Pay Until</p> <p>The Recurring Payment will continue until it is cancelled.</p> <p>Email Reminder</p> <p>1 days before payment is to be processed.</p>		
<p>▶ PAYMENT METHOD</p>			
<p>▶ AUTHORIZATIONS</p>			

[Go Back](#)

Delete



Making a One-Time Payment

Use this option to make a one-time payment. Payments submitted before 8pm on bank business days will post the same day.

Step 1. Login to your employer account on mahealthconnector.org.

Step 2. Select 'Billing' from the left menu.

PLAN YEAR		
ENROLLMENT PERIOD	November 15th, 2019 - November 20th, 2019	STATUS
COVERAGE YEAR	December 1st, 2019 - November 30th, 2020	Active

Step 3. Select the 'Pay My Bill' tab.

Billing

Health Connector issues one monthly invoice at the beginning of each month. The invoice includes next month's premium payments, and any adjustments from previous months. The total amount due reflects all premiums due (health and dental if applicable), even when you offer coverage from more than one insurer.



Employers



Step 4. Select 'Pay Online'.

Account Number:

Total Amount Due ⓘ	Past Due Amount ⓘ
\$1,149.65	\$0.00

[Recent Activity](#) [Statements](#) [Pay My Bill](#)

Billing

Health Connector issues one monthly invoice at the beginning of each month. The invoice includes next month's premium payments, and any adjustments from previous months. The total amount due reflects all premiums due (health and dental if applicable), even when you offer coverage from more than one insurer.

Your Health Connector account number

Health Connector offers multiple payment options including:

1. [Pay Online](#) ⓘ

[How to Pay Online - Instructions](#)

Step 5. Select 'Pay Online'.

[Recent Activity](#) [Statements](#) [Pay My Bill](#)

Billing

Health Connector's on-line payment is powered by Wells Fargo E-Bill Express. By clicking this link, you will be subject to the terms of use found on that website.

[Cancel](#) [Pay Online](#)



Step 6. Select 'Add a Payment Method'.

1 **PAYMENT SUMMARY**

0 Invoices **\$0.00**

[Remove All](#)

Payment Method [+ Add A Payment Method](#)

Pay Date

12/03/2019

Payments confirmed before Tuesday, December 03, 2019 8:00 PM ET will be posted on Tuesday, December 03, 2019. Payments confirmed after Tuesday, December 03, 2019 8:00 PM ET will be posted on Wednesday, December 04, 2019.

[Cancel](#) **Continue to Payment**



Step 7. Enter bank account information. Select 'Add'.

Account Type <div>Personal Business</div>	Account # <div>000123456</div>
Banking Type <div>Checking Account Savings Account</div>	Re-enter Account # <div>000123456</div>
Give This Account a Nickname <div>Account</div>	<p>Pay to the Order of _____</p> <p>123456789 000123456 1111</p> <p>Routing Number Account Number</p> <p><i>Make sure to use your bank account number, not your ATM or Debit card number.</i></p>
Name on the Account <div>Name on Theaccount</div>	
Routing Number <div>091000022</div>	

Important: Double check your routing and account numbers to make sure we process your payment accurately.



Employers



Step 8. Check your payment information and review the Payment Terms & Conditions. Select 'Make Payment'.

Verify Payment

PAYMENT SUMMARY
1 Invoice \$914.28

Payments confirmed before Wednesday, December 11, 2019 8:00 PM ET will be posted on Wednesday, December 11, 2019. Payments confirmed after Wednesday, December 11, 2019 8:00 PM ET will be posted on Thursday, December 12, 2019.

Payment Method [Add A Payment Method](#)
Account US BANK NA *****3456

Payment Date
12/11/2019

Payment Terms & Conditions
These terms and conditions govern your use of the Internet Bill Presentment and Payment Service (the "Service"). As used in these Terms, the words "we," "us," and "our" refer to Wells Fargo Bank, N.A. (or its affiliate). The words "you" and "your" refer to you as the business entity accepting these Terms and using the Service. The words "you" and "your" also include any user you authorize to use the Service on your behalf.

1. Erroneous Instructions. If we receive a payment instruction authorized by you and the instruction is erroneous in any way, we shall have no obligation or liability for the error.

2. Transaction Limitations. Please be aware that certain types of bank accounts have limits on the numbers of transfers or withdrawals that may be made per month. Your bank may refuse transfers which would exceed such limits, so we recommend you check with your bank to determine what limitations are imposed on withdrawals from any account. If we are not able to debit the amount required to cover an

[Print Terms and Conditions](#)

☒ By checking this box you agree to the terms and conditions stated above.
By clicking the **Make Payment** button I, **Name on account**, confirm that today, Wednesday December 11, 2019, I am authorizing a one-time debit from my Checking account ending in *****3456 in the amount of \$914.28 USD to be remitted to Health Connector. This debit will occur on or after Wednesday December 11, 2019.
If you have any questions regarding this transaction request, please call 800-841-2900.

Make Payment

[Cancel](#)

Step 9. You can print a copy of your payment confirmation for your records. Wells Fargo will also email you a payment confirmation.

Contact and Additional Information

Still have questions? Call MA Health Connector at (888) 813-9220.

Last Updated: 12/23/19 12:56 PM