


# Adding Domestic Partners using BCBSVT Employer Resource Center (ERC)

November 2020

**Domestic Partners may only be added at initial enrollment or during open enrollment.**

# Click on “Add a New Enrollment”

 **of Vermont**  
*An Independent Licensee of the Blue Cross and Blue Shield Association.*

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[Quick Search](#) > [Group Details](#)

# Click on “Enrolling a member with a Domestic Partner

Quick Search

Add a New Enrollment

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## Add New Enrollment

### Step 1 - Add New Enrollment Instructions

The Add New Enrollment function enables you to add a new hire Subscriber to a Blue Cross and Blue Shield of Vermont plan.

- If you would like to add a dependent to an existing policy, please select Quick Search above to search on the Subscriber and add the Dependent on that Subscriber's policy.
- If you're enrolling a member with a Domestic Partner [click here](#)
- The following enrollment transactions require additional paperwork, and are not available online. If you need to add an enrollment for one of the following scenarios, please complete the required forms and mail them to Blue Cross and Blue Shield of Vermont and do not complete the enrollment via this application.

Enrollment of an [Incapacitated Dependent](#)

Enrollment due to a [Court Order](#)

Enrollment [where the social security number is unknown or not applicable](#)

Cancel

Continue

# Click “ok” to continue

## Notice of non-discrimination

Blue Cross and Blue Shield of Vermont (BCBSVT) does not discriminate on the basis of race, color, national origin, age, disability, gender identity or sex.

For free language-assistance services, call [\(800\) 247-2583](tel:8002472583).

Pour obtenir des services d'assistance linguistique gratuits, appelez le [\(800\) 247-2583](tel:8002472583).

Para servicios gratuitos de asistencia con el idioma, llame al [\(800\) 247-2583](tel:8002472583).

اللغوية المجانية، اتصل ع الرقم للحصول ع خدمات المساعدة. [2583-247 \(800\)](tel:8002472583)

Kostenlose fremdsprachliche Unterstützung erhalten Sie unter [\(800\) 247-2583](tel:8002472583).

Per i servizi gratuiti di assistenza linguistica, chiamare il numero. [\(800\) 247-2583](tel:8002472583)

無料の通訳サービスのご利用は、[\(800\) 247-2583](tel:8002472583) までお電話ください。

ननःशुलुक भाषा सहायता सेवाह का लागग, [\(800\) 247-2583](tel:8002472583) मा कल गनहु ोस।

Para serviços gratuitos de assistência linguística, ligue para o [\(800\) 247-2583](tel:8002472583).

Чтобы получить бесплатные услуги переводчика, позвоните по телефону [\(800\)247-2583](tel:8002472583).

Za besplatnu uslugu prevođenja, pozovite na broj [\(800\) 247-2583](tel:8002472583).

สำหรับกรให้บ้กรกร ความช่วยเหลือ นภษฟรี โทร [\(800\) 247-2583](tel:8002472583)

Para sa libreng mga serbisyo ng tulong pangwika, tumawag sa [\(800\) 247-2583](tel:8002472583).

Để biết các dịch vụ hỗ trợ ngôn ngữ miễn phí, hãy gọi số [\(800\) 247-2583](tel:8002472583).

如需免費語言協助服務請致電。 [\(800\) 247-2583](tel:8002472583)

Tajaajila gargaarsa afaan hiikuu ka altii malee argachuuf [\(800\) 247-2583](tel:8002472583) bilbilaa.

Ok, Continue 



Click “New” or “Add to Existing” policy

## Group Enrollment Form

PART 1

PART 2

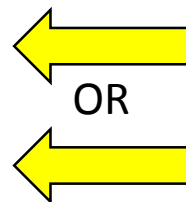
PART 3


PART 4

PART 5

FINISH

- New Employee with Domestic Partner [Show Description](#)
- Add Domestic Partner to existing policy [Show Description](#)
- Court Ordered Enrollment [Show Description](#)



Continue 

# Complete Group Enrollment Part 1-Finish

## Group Enrollment Form



### Subscriber Information

Please fill in the information pertaining to the individual/employee applying for coverage.

First Name  MI  Last Name

Social Security No.    Phone Number

Street Address   
 (Optional)

City  State  Zip

# Notes

- This transaction will NOT show in your ERC transaction log as this is done outside of your portal
- Any questions or concerns please call or email our enrollment services team at:
  - [Asinbox@bcbsvt.com](mailto:Asinbox@bcbsvt.com)
  - 1-888-320-9798 (Monday – Friday, 8am-4:30pm)