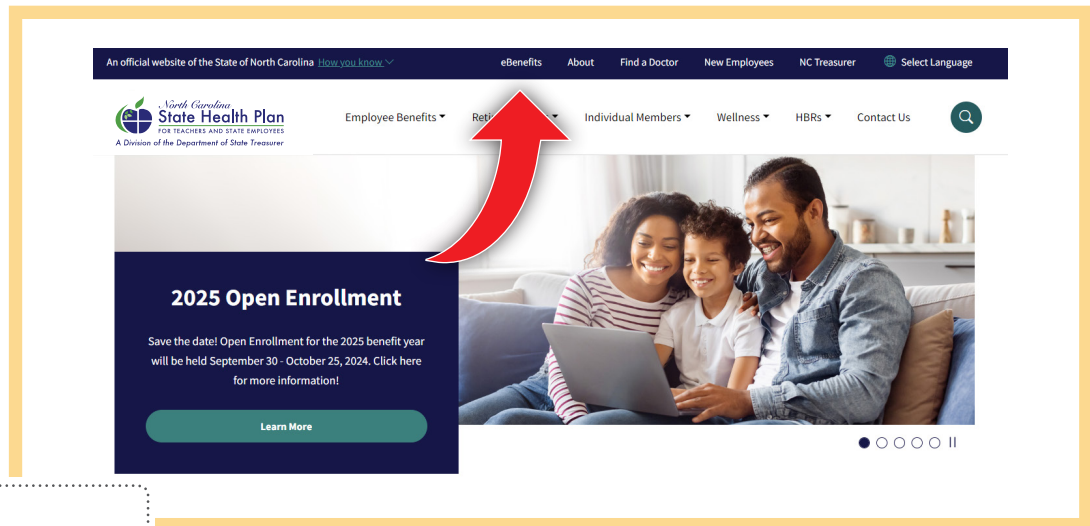


How to Select or Update your Primary Care Provider

Selecting or updating your Primary Care Provider (PCP) in eBenefits, the State Health Plan's (Plan) enrollment system, is now easier than ever. Please note that it takes 5-7 days for changes to take effect and for a new member ID card to be issued. Follow the steps below to make your updates:



1

GO TO
www.SHPNC.org
CLICK ON eBenefits

Go to the State Health Plan's website www.SHPNC.org and click eBenefits.



2

SELECT
Appropriate
Enrollment System

If you are employed by any of the organizations in the boxes, click to enroll. If not, click Access your Benefits via eBenefits.

3

SELECT
Select or Update
Primary Care Provider
CLICK Search

Home
Profile
Benefits
Dependents
Language Preferences

Important Messages for You

Dependent Verified
The following dependents have been verified: [REDACTED]

Manage Account

Login Information
Medicare
Life Change
Select or Update Primary Care Provider
My Documents

Have you experienced a life change that requires you to edit your benefits?
Whether you have recently had a baby or experienced another event that requires you to edit your benefits, we are here to help. Let us walk you through any changes in or that your coverage best fits your needs.

[Get Started >](#)

Search from the list of providers to enter your PCP (Primary Care Provider) information.

[REDACTED] #Name

PCP Copay Reduction Reminder

4

ENTER
Search Criteria

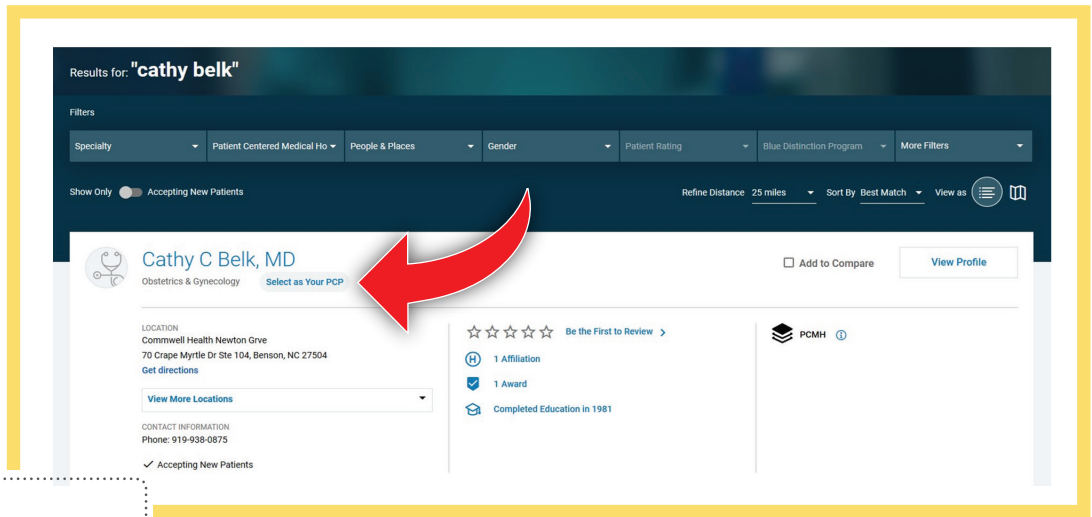
Not electing a PCP will disqualify you from potential copay reduction.
Do Not Choose PCP

Search Names, Facilities, and Specialty

North Carolina State Health Plan Raleigh, NC - 27604

Browse by Category or

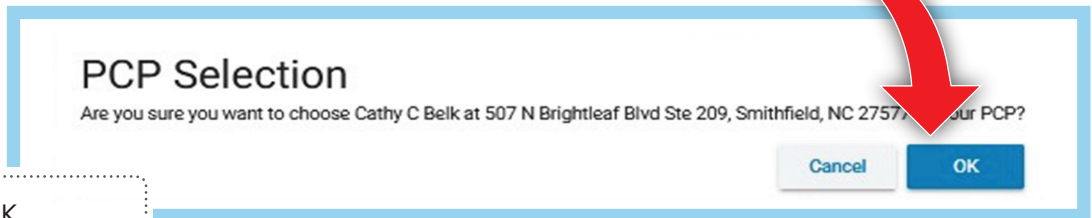
You can search for provider name, facility and specialty.
You can also search by typing in the location.



5

CLICK
Select as Your PCP

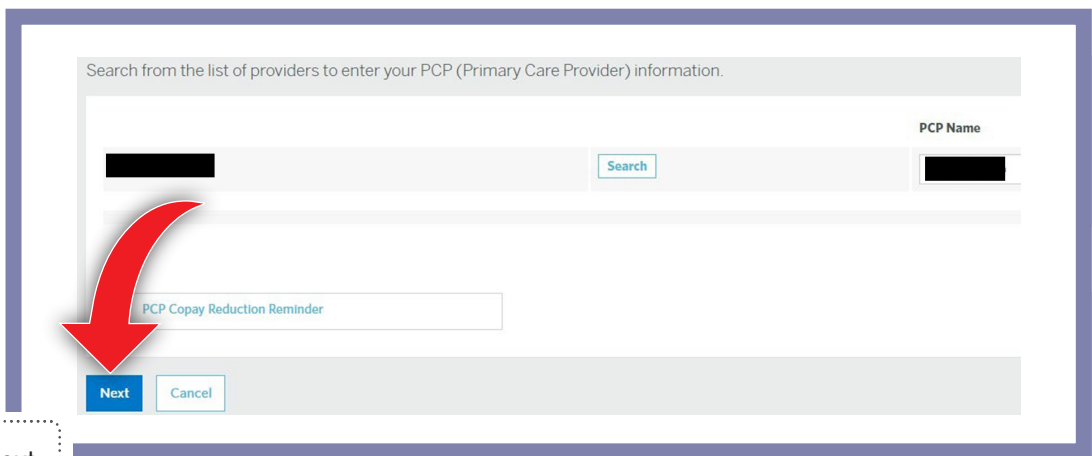
Select the desired provider.



6

CLICK OK
to confirm selection

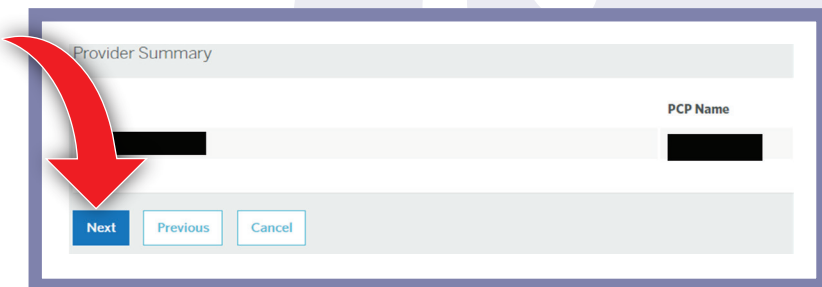
Complete all steps in the enrollment process.



7

CLICK Next

Click Next on both the eBenefits and Provider Summary pages.



Premium credits

> Tobacco Attestation (Premium Credit \$60)

\$60.00 per month

I attest that I am NOT a tobacco user (includes cigarettes, cigars, pipes, chewing tobacco, snuff, vaping or any product containing nicotine). Or if I am a tobacco user, I agree to complete at least one tobacco cessation counseling session within the first 90 days of my date of hire. (Please note: You may lose your \$60 monthly premium credit if you do not visit a Primary Care Provider for a tobacco cessation counseling session as agreed within the first 90 days of my date of hire.) As part of this attestation, I understand that making a false statement, representation or attestation could result in my termination from State Health Plan coverage. I also agree to cooperate with the Plan in any efforts to verify my tobacco status.

Select the appropriate response below:

- I am NOT a tobacco user (includes cigarettes, cigars, pipes, chewing tobacco, snuff, vaping or any product containing nicotine).
- I am a tobacco user, I agree to complete at least one tobacco cessation counseling session by November 30, 2024. (Please note: You may lose your \$60 monthly premium credit if you do not visit a Primary Care Provider for a tobacco cessation counseling session as agreed by November 30, 2024.) As part of this attestation, I understand that making a false statement, representation or attestation could result in my termination from State Health Plan coverage. I also agree to cooperate with the Plan
- I AM a tobacco user

Next

Cancel

8

CLICK Next

2024 SHP Medical Summary

Your 2024 SHP Medical benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.

Medical

Enhanced PPO Plan (80/20)

Effective Date 01/01/2024

You Pay [redacted] per month

Persons Covered [redacted]

Plan Details

Plan Details

Plan Details

Plan Details

Plan Details

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9

CLICK Save

This will bring you back to eBenefits with this Provider now listed as your PCP.