



BAY BRIDGE ADMINISTRATORS

EMPLOYEE BENEFITS PORTAL

MANAGE YOUR BENEFITS ONLINE

The Employee Benefits Portal from Bay Bridge Administrators, provides secure, continuous access to benefit information and tools designed for your insurance needs.

Registration is fast and simple.

NOW YOU CAN

- Manage your benefits in one place.
- Change personal information.
- View and print digital ID cards.
- View your policy documents.
- Submit claims and upload claim documentation.

REGISTER IN 3 EASY STEPS!

1. Log on to portal.bbadmin.com and click **SIGN UP**.
2. Enter your desired login email and password. Enter your basic info and your account will be linked.

EMPLOYEE BENEFITS PORTAL

MANAGE YOUR CLAIMS

Below your information you'll find **My Policies** and **My Recent Claims**.

Select your policy and directly file a claim and upload the necessary documents.

Under the **My Recent Claims** portion of your dashboard, you are able to view:

- Claims status
- Uploaded claim documents
- Claim number and link to your Explanation of Benefits (EOB)
- Amount Paid

My Policies							
Policy #	Policy Type	Effective	Terminated	Benefit Level	Coverage	Covered Dependents	File Claims
2222222	GAP	02/02/2022		Premier	F	JOHN DOE (S) PETER DOE (C) SARAH DOE (C)	General Wellness
2222222	GAP	02/02/2022		7500	F	JOHN DOE (S) PETER DOE (C) SARAH DOE (C)	General

My Recent Claims							
Claim #	Wksht #	Policy #	Policy Type	Claimant	Received	Finalized	Status
A1111111	1	2222222	GAP	DOE, JANE	01/01/2024	Pending Review	\$
B2222222	1	2222222	GAP	DOE, JANE	01/10/2024	Paid	\$
C3333333	1	2222222	GAP	DOE, JANE	01/20/2024	Paid	\$

[View EOB Upload Documents](#) [View EOB Upload Documents](#)

HOW TO FILE A CLAIM ONLINE

1. Under **My Policies** select the **General** link next to your products name.
2. Use the portal to submit a new claim or to submit additional documents for an on-going claim. Use the drop-down menu to select the claimant. Select the product applicable to your claim submission. Include the claim number if it is an ongoing claim or leave blank for a new claim. Add a date and a brief description of your claim.
3. Press **Submit Claim** and a confirmation Page will appear. Your new submission will appear under **My Recent claims** within 60 minutes.

Effective	Terminated	Benefit Level	Coverage	Covered Dependents	File Claims
02/02/2022		7500	F	JOHN DOE (S) PETER DOE (C)	General

New General claim filing

Claim Filing Instructions
Please download and complete the claim forms for your claim type, following the instructions on the downloaded form. You can upload the completed forms below.

[Supplemental Insurance Claim Forms](#)
[Supplemental Insurance Claim Filing Instructions](#)
[Supplemental Prescription Benefit Claim Form](#)

If you have any questions, please contact your employer's benefits administrator.

Claim Number (Leave blank unless filing more items under an existing open claim)

Claimant (If claiming for a covered dependent)

Select the dependent for whom you are claiming if applicable

Claim for

Select the type of claim you are filing

Claim description

If injured, how?

Date occurred
Date of prior occurrence
Notes

Select supporting documents for upload

Choose File

It may take up to 60 minutes for this claim to appear on your dashboard.

Submit Claim

CONTACT US

1-800-845-7519

portalsupport@bbaadmin.com

M-F 9 AM - 6 PM EST



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