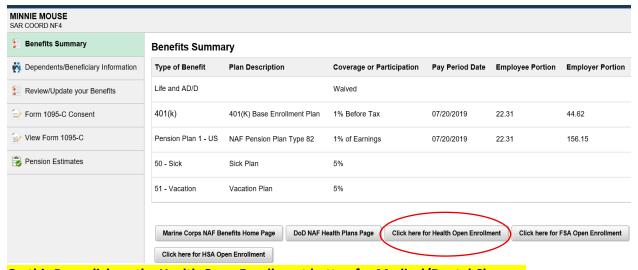
### HEALTH PLAN OPEN ENROLLMENT USER AID

#### **LOG IN LANDING PAGE – CLICK THE BENEFITS TILE**



#### **BRINGS UP THE BENEFITS SUMMARY PAGE**



On this Page click on the Health Open Enrollment button for Medical/Dental Changes

The Health and Dental Selection Page (HMO's plans will be displayed for commands with HMOs)

Click in the box for the plan you want to enroll in

Medical Plan Provider	Employee Only	Employee + Child(ren)		Family	Employee + Spouse
Aetna Choice POS II	\$86.15	\$166.27	<b>✓</b>	\$263.62	\$199.01
Aetna US Health Care Tradtl	\$86.15	\$166.27		\$263.62	\$199.01
High Ded Health Plan Aetna POS	\$68.92	\$133.02		\$210.89	\$159.21

Dental Plan Provider		Employee Only		Employee + Child(ren)		Family		Employee + Spouse
Aetna US Health Care Dental		\$4.50		\$8.68	~	\$13.76		\$10.38
Stand Alone Dental		\$15.54		\$34.97		\$50.51		\$31.08

If enrolling dependents make sure they are already listed as dependent, if not you will need to add them before continuing. Once you are ready you will select which dependents you want to cover. Ineligible dependents will be grayed out for selection.

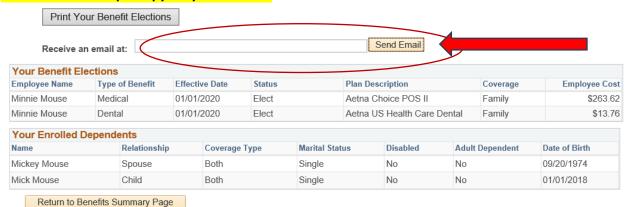
#### **Submit Confirmation**

For your Medical coverage, you have selected Family coverage, High Ded Health Plan Aetna POS at a biweekly rate of \$210.89.

For your Dental coverage, you have selected Family coverage, Aetna US Health Care Dental at a biweekly rate of \$13.76.

Please select which Dependents you want covered									
	Select	Name	Relationship	Coverage Type	Marital Status	Disabled	Adult Dependent	Date of Birth	
1	✓	Mickey Mouse	Spouse	Both	Single	No	No	09/20/1974	
2	~	Mick Mouse	Child	Both	Single	No	No	01/01/2018	
	ОК	Cancel							

Once the transaction is complete it will take you to Open Enrollment Summary Page, at this point you can email the changes to your personal email or click print your benefit elections. You should do one or the other to keep a copy for your records.

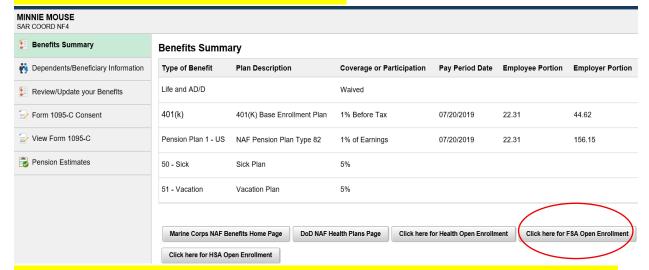


# FSA OPEN ENROLLMENT USER AID

#### **LOG IN LANDING PAGE – CLICK THE BENEFITS TILE**



#### **BRINGS UP THE BENEFITS SUMMARY PAGE**



On this Page the click on the FSA Open Enrollment button for FSA enrollments This will bring you to the Selection page. Pick your FSA secleciton and click calculate and It will give your 2017 bi-weekly contributions. Click save.

Select FSA plan and enter an Annual Pledge Amount. The cutoff date for enrollment in the current year has expired, therefore your elections will become effective January 01 of next year.

Flexible Spending Account Contribution							
Select	Annual Pledge Amount	FSA Plan	Remaining Pay Periods	Estimated Per-Pay-Period Contribution			
✓	1000.00	FSA - Health	0	38.46			
✓	1000.00	FSA - Dependent	0	38.46			
	Calculate		Save				

If Dependent Care FSA is elected a warning will be displayed prior to saving. Click OK if you still want to enroll, or Cancel to go back and change the election.

#### Message

FSA - Dependent Warning (20000,434)

You have elected to make a contribution in Dependent Care FSA Plan (DCFSA). DCFSA contributions can only be used toward eligible Child or Adult Day Care Expenses. To continue and confirm this contribution election, select OK and Save.

To cancel this contribution election or if you are unsure of this election, select Cancel, unselect the FSA-Dependent Plan, and contact your HR office for more information before enrolling.

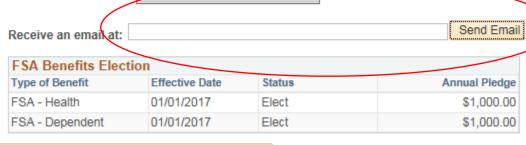
OK Cancel

Once the transaction is complete it will take you to Open Enrollment Summary Page, at this point you can email the changes to your personal email or click print your benefit elections. You should do one or the other to keep a copy for your records.

## Flexible Spending Account Enrollment Summary



The Save was successful.

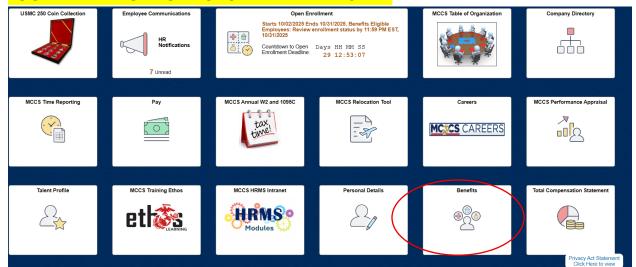


Print Your Benefit Elections

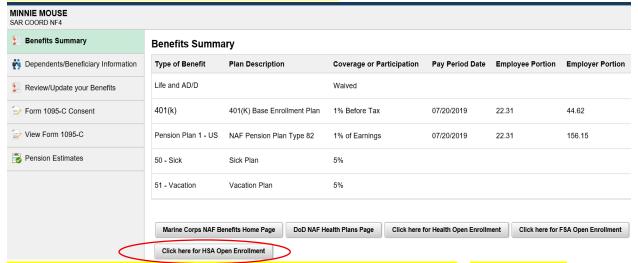
Return to Benefits Information Summary Page

## HSA OPEN ENROLLMENT USER AID

#### **LOG IN LANDING PAGE – CLICK THE BENEFITS TILE**



#### **BRINGS UP THE BENEFITS SUMMARY PAGE**



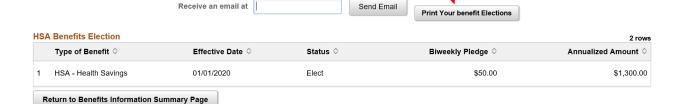
On this Page the click on the HSA Open Enrollment button. You must be enrolled in the HDHP medical plan before you can enroll in HSA.

### Enter your bi-weekly HSA deferral amount and then save.

Select HSA plan and enter an Annual Pledge Amount. The cutoff date for enrollment in the current year has expired, therefore your elections will become effective January 01 of next year. **Health Savings Account Contribution** Biweekly Deduction HSA Plan Remaining Pay Periods **Est. Annual Contrib** Enroll Amount

YTD Contrib **~** 50.00 HSA - Health Savings 26 Term Health Savings Account Calculate Save

### **Health Savings Account Summary** The Save was successful.



Once the transaction is complete it will take you to Open Enrollment Summary Page, at this point you can email the changes to your personal email or click print your benefit elections. You should do one or the other to keep a copy for your records.

### SHORT TERM DISABILITY OPEN ENROLLMENT USER AID

#### **LOG IN LANDING PAGE – CLICK THE BENEFITS TILE**

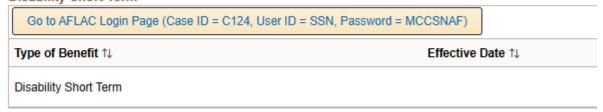


### **BRINGS THE BENEFITS SUMMARY PAGE**



On this page you can click on the Review/Update your benefits. Then scroll down to Disability Short Term

#### **Disability Short Term**



# Once there you will login with the following information:

Go to AFLAC Login Page (Case ID = C124, User ID = SSN, Password = MCCSNAF)





