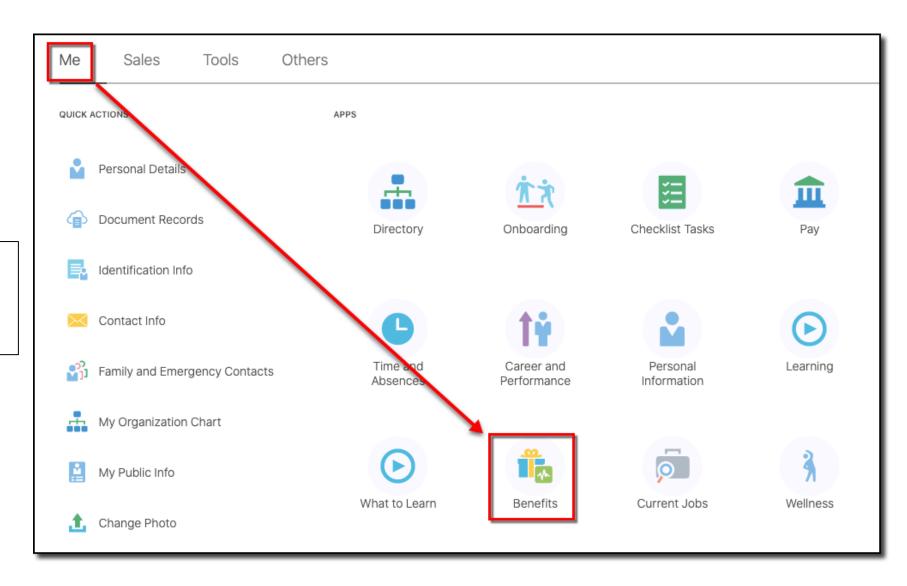
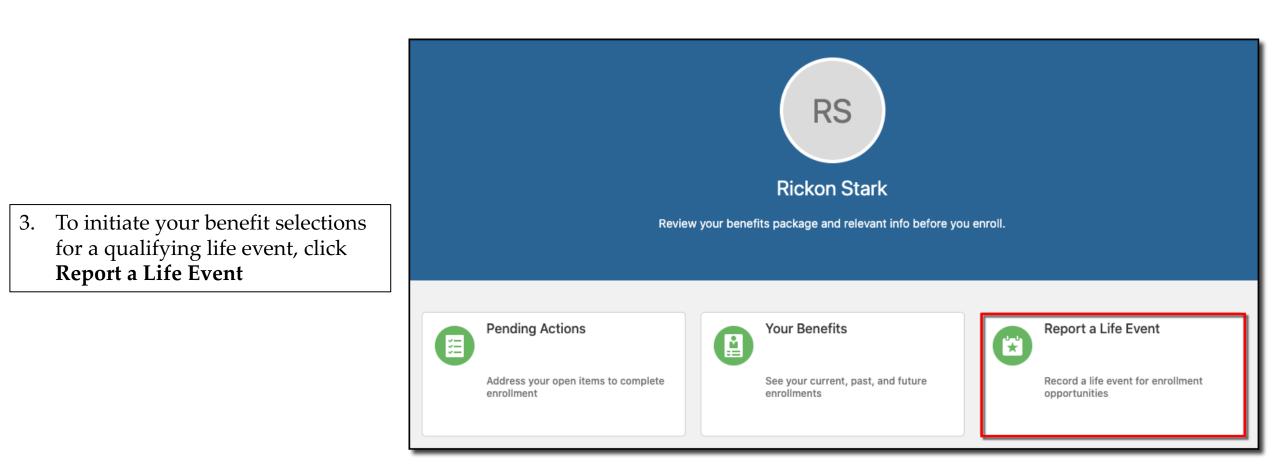
- 1. Select **Me** to display your employee functions
- 2. Click **Benefits**



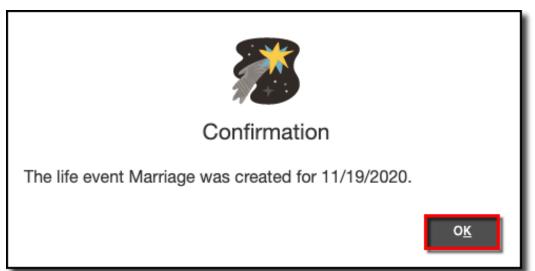




ESS – Enrolling in Benefits (Life Event)

- 4. Select the applicable **life event** and enter the **occurrence date**
- 5. Click **Continue**

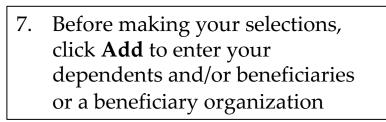
t a Life Event		Continue <u>C</u> ancel
tark		
— 17		
Information Select a life event to see if it provi	ides you opportunities to elect new benefits or chapge e	evisting ones
Select a me event to see in it provi	des you opportunities to elect new benefits of charge e	existing ones.
Calact a Life Event		
Select a Life Event		
Select a Life Event		
Add a Child		
 Add a Child Divorce 		
 Add a Child Divorce Gain of Coverage 		
 Add a Child Divorce Gain of Coverage Loss of Coverage 		
 Add a Child Divorce Gain of Coverage Loss of Coverage Marriage 		

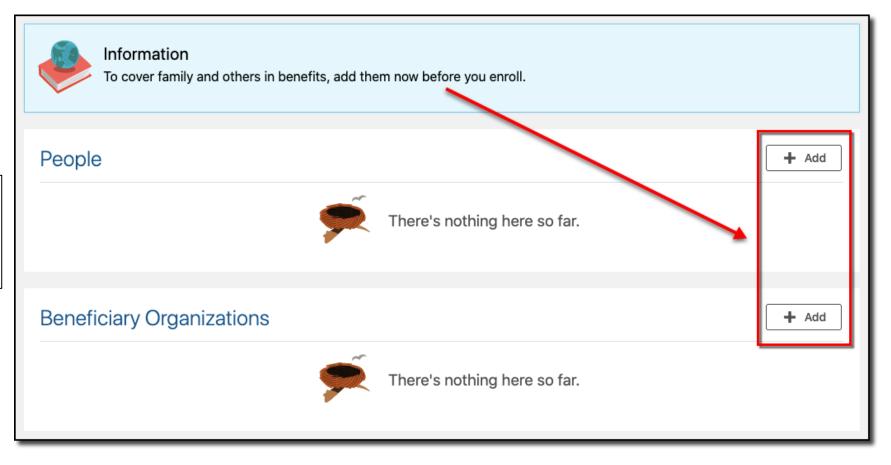


Note: A notification appears indicating the life event was created

6. Click **OK**









- 8. To add a person, enter the person's information
- **Note**: Required fields are indicated with a blue asterisk
- 9. Be sure to enter details for all sections on the page
- 10. When finished, click **Submit**

ew Contact	Sub <u>m</u> it <u>C</u> ancel
	1
Basic Information	
Prefix	Middle Name
*Last Name	Suffix
Stark	
*First Name	Preferred Name
Catelyn	
*Relationship	Sex
Child ~	Female ~
*What's the start date of this relationship?	Date of Birth
4/13/2015	4/13/2015
	This person is an emergency contact
Student Status	Tobacco Use
Select a value V	None
Disability Type	Covered by another plan?
Select a value V	No



- 11. If applicable, click **Add** again to enter additional people to cover
- 12. When finished, click **Continue**

eople to Cover	r	Continue	<u>C</u> ancel
	Information To cover family and others in benefits, add them now before you enroll.	/	
	Catelyn Stark Child	Add	
	Beneficiary Organizations + Image: Comparison of the state of the st	Add	



and click **Accept** to continue

ESS – Enrolling in Benefits (Life Event)

Start Enrollment Cancel Authorization Community MENTAL HEALTH 13. Read the **Authorization** statement The information I am providing is accurate, and I authorize the coverage selections and the associated payroll deductions. Enrollments remain in effect until changed or canceled by me during an annual open enrollment, or when permitted by a qualified life event. I understand that my eligibility for benefits may be affected if I subsequently change my contracted work schedule. I understand that my elections are binding, based upon CMHA-CEI Program plan provisions and applicable laws and regulations. I also understand that the coverages I am applying for may require that I provide additional information. We reserve the right to terminate any plan, policy, or procedure at any time and at our sole discretion. Decline Accept

Note: Each benefit plan that you are eligible for will be displayed on the **Benefits Program** page

Note: Even if the plans change or are different than what you see in this job aid, the steps to complete the enrollment remain the same

MHA Benefits	Program	Sub <u>m</u> it	<u>C</u> ancel
	Currency in USD Your Total Cost	0.00 Pay Period	
	Medical CMHA Medical	🖋 Edit	
	There's nothing here so far.		
	HRA Factor CMHA HRA Factor	🖍 Edit	

Retirement 🖋 Edit CMHA Retirement Plan MERS Defined Benefit Plan Single STD and LTD 💉 Edit CMHA STD and LTD Short Term Disability STD Secondary 60.57 Long Term Disability LTD Secondary 4.61

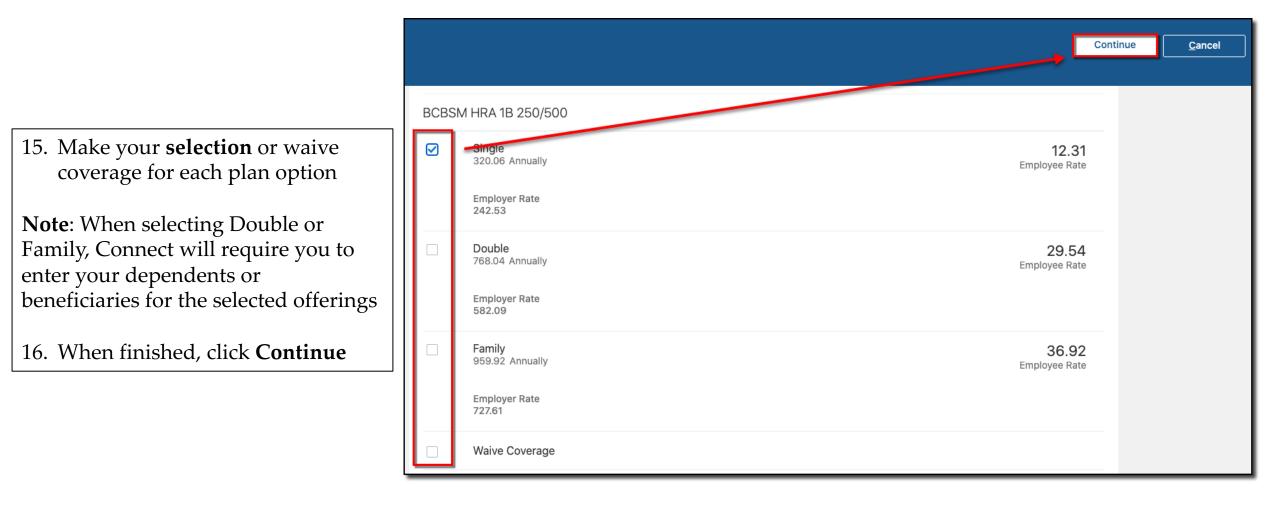
Note: Connect automatically enrolls employees into certain plans such as MERS, Short-Term Disability, and Long-Term Disability

Note: Even if you see the Edit button for these plans, you are not able to enter any selections



	Medical	🖍 Edit
	CMHA Medical	
	There's nothing here so far.	
14. Click Edit to enter the details for each of the plans that require a	HRA Factor	🖍 Edit
selection	CMHA HRA Factor	
	There's nothing here so far.	
	Dental	🖍 Edit
	CMHA Dental	





Note: As you make your selections, Connect will display the employer

and employee cost for each option as

well as the total cost to you per pay

period

Currency in USD	
Your Total Cost	220.7 Per Pay Perio
Medical	🖍 Ed
CMHA Medical	
BCBSM HRA 1B 250/500 Single	12.3
HRA Factor	<i>I</i> €0
CMHA HRA Factor	
HRA Factor 1B Single	

ESS – Enrolling in Benefits (Life Event)



CN

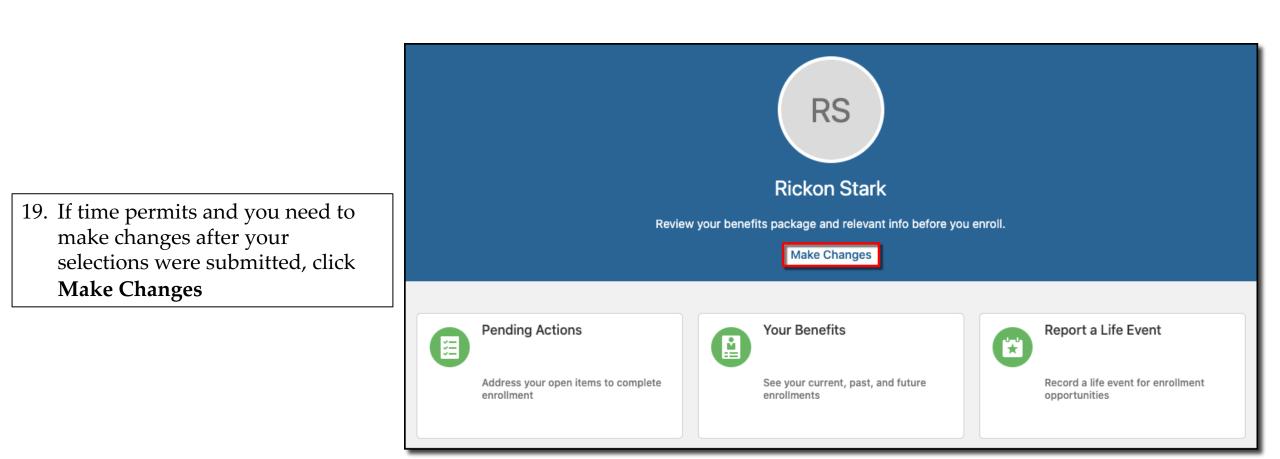
HA Benefits Program	Sub <u>m</u> it <u>C</u> ancel
Currency in USD	220.75
Your Total Cost	Per Pay Period
Medical CMHA Medical	🖋 Edit
BCBSM HRA 1B 250/500	12.31
Single	~

Note : A notification appears
indicating your benefit selections
were saved.

18.	If desired, click Print to print or
	save an electronic copy of your
	enrollment selections

Confirn CMHA Ber	nation nefits Program		Print
<i>***</i> *********************************	Confirmation Your benefit elections were saved. You can make changes until 11:59 PM EST, 11/26/2020.		
	cy in USD Total Cost Each Pay Period	220.75	







Note: You will return to the same open enrollment page where you started

- Following the previous steps, make any necessary updates
- 20. Begin by verifying/updating your **People to Cover**
- 21. When finished, click **Continue**

	Continue	<u>C</u> ancel
Information To cover family and others in benefits, add them now before you enroll.		
People Catelyn Stark Child	+ Add	



- 22. Click **Edit** to make any other updates
- 23. When finished, click **Submit**

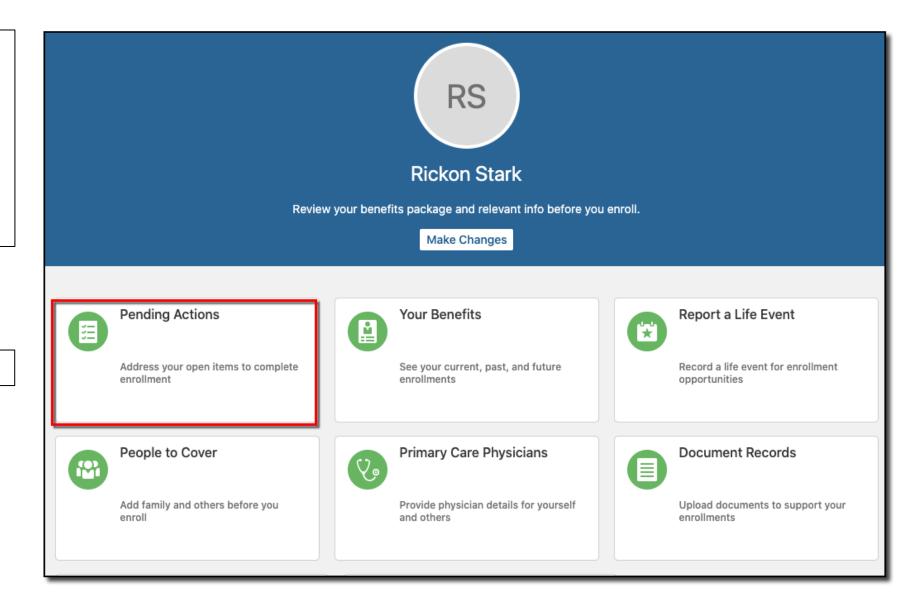
Program	Sub <u>m</u> it <u>C</u> ancel
Medical	🖍 Edit
CMHA Medical	
BCBSM HRA 1B 250/500 Single	12.31
HRA Factor	🖉 Edit
CMHA HRA Factor	
HRA Factor 1B Single	
Dental	🖍 Edit
CMHA Dental	

ESS – Enrolling in Benefits (Life Event)

Note: After you submit your selections, be sure to check your Pending Actions

Note: Pending Actions will indicate if you need to provide any supporting documents that are required to finalize your enrollment

24. Click Pending Actions

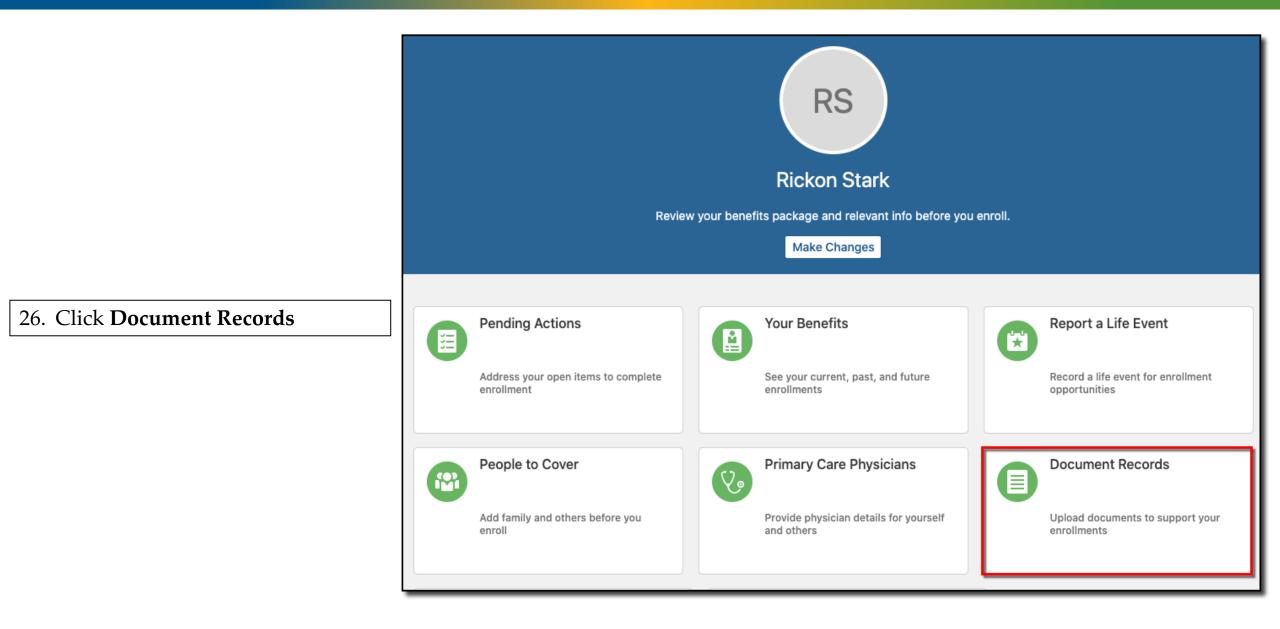




Note: In this example, the employee needs to upload a Birth Certificate for Sia Stark

25.	Click the back arrow to return to
	your Benefits page

	Pending Actions ickon Stark
	CMHA Benefits Program
	Medical
	Birth certificate: Sia Stark BCBSM HDHP 1400/2800 - Double
	Pending Actions lickon Stark
RS P	
RS P	
RS P R	ickon Stark
RS	ickon Stark CMHA Benefits Program





	Document Records Rickon Stark		
27. Click Add	Document Records Search by type, name, or numl Show Filters Exclude Payroll × Expired × Sort By Last Updated - Descendi		
	Nothing matches your search. Try again.		

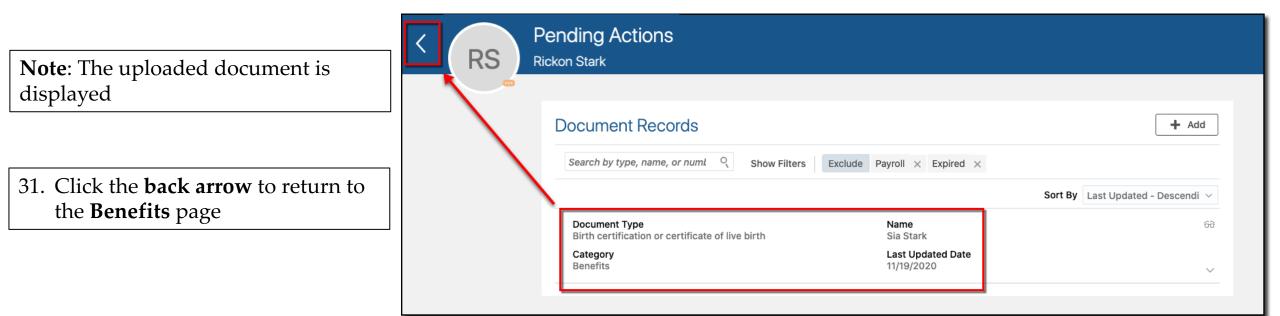
ESS – Enrolling in Benefits (Life Event)

<u>C</u>ancel

Add D Rickon St	ocument ^{ark}		Sub <u>n</u>
	*Document Type Birth certification or certific Birth certification or certific Category Benefits *Name Sia Stark Number From Date 11/19/2020 To Date 11/19/2020 Issuing Country United States	Country United States Issuing Location Michigan Issued On 4/13/2015 Issuing Authority Issuing Comments Context Value	
	Attachments	r click to add attachment v By Catelyn Stark on 11/19/2020 X	

- 28. Enter all the necessary **document details**
- 29. Drag or upload the required **attachment**
- 30. Click Submit





ESS – Enrolling in Benefits (Life Event)

32. Click **Pending Actions**

Note: The action will remain pending until Benefits receives the documentation and marks the action as complete

End of Procedure

Review your benefits package and relevant info before you enroll.								
Pending Actions	Your Benefits	Report a Life Event						
Address your open items to complete enrollment	See your current, past, and future enrollments	Record a life event for enrollment opportunities						

CMHA Benefits Program

Medical

Birth certificate: Sia Stark

BCBSM HDHP 1400/2800 - Double