LIBERTY
ELEMENTARY SCHOOL DISTRICT

BenefitsCONNECT
ON-LINE ENROLLMENT INSTRUCTIONS

Prepared By:

Gallagher

Insurance | Risk Management | Consulting

Instructions for On-line Enrollment

Liberty Elementary School District, in conjunction with Gallagher Benefit Services, is proud to bring you an innovative method for enrolling in our benefit programs. You will begin to enroll for your benefits via the internet through a secure website - benefitsCONNECT™ - designed specifically Liberty Elementary School District.

To enroll follow these 4 easy steps.

1. Access the following Website: http://enroll.benefitsconnect.net/libertyschools

2. Enter your login: First 6 letters of last name +
First letter of first name +
Last 4 digits of SSN
Example1:   Mickey Starfish SSN 123456789
Login = starfim6789
Example2:   John Smith SSN 987654321
Login = smithj4321

3. Enter your password: SSN (with no dashes) – You will be prompted to change your password. Your new password must contain at least 6 (six) characters.

Do not use your internet browser back/forward buttons. You may use the navigation buttons at the bottom of each page or the links in the menu options down left side of the page under the log out button.

Adobe Acrobat Reader will be required to view benefit summaries. This can be downloaded at http://www.adobe.com/products/acrobat/readstep2.html

4. Complete the enrollment process.
The website will take you step by step, one screen at a time, to enroll in your benefits for the upcoming year. You must complete all fields in **RED** type. **Please enter the current date if prompted for an effective date of change on any page.** You will view the following information in this order:

1) **Security Questions:** Select your answers to your security questions.

2) **Password Change**: Change to your new password.

3) **Employee Usage Agreement:** Acknowledgement of electronic signature use.

4) **Personal Information:** Verify your name, social security number, date of birth and address. You will be required to update your tobacco status, email and marital status (if not single).

5) **Emergency Contact:** Enter at least one emergency contact.

6) **Dependents/Beneficiaries:** Add spouse and child (ren) here. If you do not add your dependents here, they will not be eligible for benefits. All benefit eligible (full-time) employees must add beneficiary for the Company paid Life and AD&D coverage. You may designate an existing dependent or create new ones. You may list primary and contingent beneficiaries. Please be sure to have beneficiary Social Security Number available as well as the beneficiary Date of Birth or you will not be able to complete the on-line enrollment process. For each beneficiary designation, you will be prompted to select the beneficiary on the benefit election page.

7) **Medical (If Applicable):** Select Medical; or waive the benefit.

8) **Dental (If Applicable):** Select Dental; or waive the benefit.

9) **Vision (If Applicable):** Select Vision; or waive benefit.

10) **Health Savings Account (If Applicable):** Enter contribution amount. You may enter $0 if you choose to not contribute.

11) **Teladoc (If Applicable):** Elect employer paid benefit option.

12) **Basic Life/AD&D:** Displays amount of coverage the employer provides, as this is a paid benefit for the employee.

13) **Voluntary Life (If Applicable):** If you wish to elect additional life coverage for yourself, elect amount of coverage within the scroll bar; or waive enrollment. This benefit may require the completion of an Evidence of Insurability form.

14) **Voluntary Spouse Life (If Applicable):** If you wish to elect life coverage for your spouse, elect amount of coverage within the scroll bar; or waive enrollment. This benefit may require the completion of an Evidence of Insurability form.

15) **Voluntary Child Life (If Applicable):** If you wish to elect life coverage for your child(ren), elect amount of coverage within the scroll bar; or waive enrollment.

16) **Voluntary Short-term Disability (If Applicable)**: Displays amount of coverage available, select Voluntary Short-term Disability; or waive the benefit. This benefit may require the completion of an Evidence of Insurability form.

17) **Voluntary Accident (If Applicable)**: Select the enrollment option; or waive the benefit.

18) **Voluntary Critical Illness (If Applicable)**: If you wish to elect Critical Illness coverage select the enrollment option; or waive enrollment.

19) **Healthcare Flexible Spending Account (If Applicable)**: Enter contribution amount; or waive the benefit.

20) **Limited Purpose Flexible Spending Account (If Applicable)**: Enter contribution amount; or waive the benefit.

21) **Dependent Care Flexible Spending Account (If Applicable)**: Enter contribution amount; or waive the benefit.

22) **Employee Assistance Program (If Applicable):** Elect employer paid benefit option.

23) **Consolidated Enrollment Form:** At the top of the page you have 2 tabs. The first tab is called Future Elections. This is to show you what you are electing for the new plan year. The second tab is called My Benefits. This is to show you your current benefit enrollments including those you elected on the Future Elections tab. You are not enrolled until you hit the **"Finish Elections"** button at the <u>TOP</u> of the Future Elections tab on the Consolidated Enrollment Form page. Above the Finish Elections button you have the options to print a copy for your records or email a copy to your email on file that you entered on the personal information page at the start of enrollment.

To change personal information: (Profile, Education, etc…) Click on the "Personal Information" option or corresponding option in the menu on the left side of the page. Make the appropriate changes and save your information.

To change dependent information: Click on the "Dependents" icon in the center of the page and select to add a spouse or child or click on the dependent your wish to change.

To change your benefit elections: Click on the "Benefit Information" icon in the center of the page, click on the FUTURE ELECTIONS tab at the top of the page and click EDIT ELECTION under the benefit you wish to change and update you enrollment.

To change your password: Go to the main login page as listed above on page 2 and click the "Forgot Password?" link.

If you have any questions regarding your enrollment, please contact your Human Resources Department.

Please give great care to protect your login ID and your password.

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