

Benefit Enrollment Self Service Guide DRAFT

All employees are required to complete the online enrollment for 2021 benefits. Follow these step-bystep directions on how to enroll.

How to Access?

- 1. Login to e-Central account.
- 2. Click Employee

Continuing Education
Students
Faculty
Employees

3. Click Human Resources

ecentral East Central College 1964 Prairie Dell Road Union, MO 63084 (1636)584-6500	Lo
Employees - WebAdvisor for Employees Menu	
The following links may display confidential information.	
User Account	My Documents
What's my password Change Password	
eCentral FAQ	Banking Information
Employee Profile	View My 1099-MISC Information
Human Resources	
	New Budget View - Self Service

4. Click benefits

EAST CENTRAL COLLEGE	<u>ه</u>
Employment · Employee · Employee Overview	
Welcome to Colleague Employee Self-Service!	
Tax Information Here you can change your consent for e-delivery of tax information.	Banking Information Here you can view and update your banking information
Earnings Statements Here you can view your earnings statement history.	Here you can view your leave balances and leave reque
Position History Here you can view a list of your positions.	Stipend History Here you can view a list of your stipends.
Benefits Here you can enroll in benefits.	

5. Click Start Here

EAST CENTRAL COLLEGE			A kimberly.aguilar	〔→ Sign out	(?) Help
Employment · Employee · Benefits					
Benefits					
New for 2021 - All full-time employees are required to complete the online 2021 Insurance Benefits Open Enrollment is open Wednesday, November 11, Failure to complete online enrollment could jeopardize your insurance cove If you have questions, please contact Human Resources. Read less Open Enrollment Open enrollment begins 11/2/20	enrollment for insurance benefits for the 2021 benefit year regardless if you do 2020 and closes at midnight on Monday, November 30, 2020. erage. 	not plan to make	changes.		
Pending Elections Not Started	Start Here	Depender Manage Depend	nts/Beneficiaries		
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To get started, click Choose Plan on Medical section to start.
 Note: Can be completed in any order & can be saved and resumed at a later time

Benefi < <u>Benefits</u>	its Enrollment		
Before y 1) <u>Review</u> 2) If addi 3) If you Please n If you ha	vou get started: w the 2021 Self-Service open enrollment user guide. (NEED TO ADD LINK) ing dependents to insurance coverage, you will need name, birth date and social security number of each individual. need to confirm your current medical plan and network coverage, click <u>here.</u> note: In order to submit your enrollment, a green check mark must appear next to each benefit option. ave any questions, please contact Human Resources. Read less		
Open I	Enrollment Benefits		
	Medical Insurance <u>Choose a Plan</u> Your Plan		
		\bigcirc	Waive this benefit
	Please click on this button if you choose to "waive" this benefit.		
\$ +	Dental Insurance Choose a Plan		
0	Your Plan		
		\bigcirc	Waive this benefit
	Please click on this button if you choose to "waive" this benefit.		
\$ +	Vision Insurance <u>Choose a Plan</u>		
	Your Plan		
		\bigcirc	Waive this benefit

7. Select the plan you wish to enroll in. When finished with selection, **click Save and then click Benefits Enrollment** to return to main page.



To view directions on adding Dependents; see page _____

8. A green check mark will appear when the section has been completed. Please note in order to submit your enrollment, a green check mark must appear next to each benefit option. From the main page, click Choose a Plan next to dental insurance.

Before <u>1</u> 1) <u>Revie</u> 2) If ado 3) If you	you get started: <u>w</u> the 2021 Self-Service open enrollment user guide. (NEED TO ADD LINK) ding dependents to insurance coverage, you will need name, birth date and social security number of each individual. u need to confirm your current medical plan and network coverage, click <u>here.</u> Read more	
Open	Enrollment Benefits	
	Medical Insurance Update Plan	
1	Your Plan HSA - Non BJC Employee Only	Waive this benefit (i)
	Please click on this button if you choose to "waive" this benefit.	
	Dental Insurance Choose a Plan	
	Your Plan	
		Waive this benefit
	Please click on this button if you choose to "waive" this benefit.	
	Vision Insurance <u>Choose a Plan</u>	
	Your Plan	
		Waive this benefit
	Please click on this button if you choose to "waive" this benefit.	
	Health Savings Account <u>Choose a Plan</u>	
	Your Plan	
		Waive this benefit
	Waive this benefit if: 1) You are enrolled in the College's base plan* 2) You are covered under a spouse's plan* 3) You do not wish to contribute to your H.S.A. *Note: you are not eligible to participate in the HSA	
	Flexible Spending Account Choose a Plan	
	Your Plan	

Waive this benefit

9. Select the plan you wish to enroll in. When finished with selection, **click Save and then click Benefits Enrollment** to return to main page.

Benefits Selection	
< Benefits Enrollment	
The College is offering dental insurance with Delta Dental with no premium cost	
Before you get started with your selection:	
 <u>View</u> the virtual orientation on plan details. If adding dependents to insurance coverage, you will need name, birth date a 	
3) <u>2021 Plan Summary</u> 4) 2021 Dental Insurance Rate Sheet	
Dentellesurges	
Dental insurance	
Choose a Plan Select 1 plan or waive this benefit	Cancel
Dental Employee Only	
Dental Employee + Spouse	
Dental Employee + Child(ren)	
Dental Employee + Family	
Waive this benefit	

Please click on this button if you choose to "waive" this benefit.

10. A green check mark will appear when the section has been completed. From the main page, click Choose a Plan next to vision insurance.

Open Enrollment Benefits



11. Select the plan you wish to enroll in. When finished with selection, **click Save and then click Benefits Enrollment** to return to main page.

Benefits Selection	
Benefits Enrollment	
The College is offering vision insurance with EyeMed with no premiu	
Before you get started with your selection:	
 2) If adding dependents to insurance coverage, you will need name, 	
3) <u>2021 Plan Summary</u> 4) 2021 Vision Insurance Rate Sheet	
·/ <u></u>	
Vicion Incurance	
VISION INSURANCE	Cancel
Choose a Plan	
Select 1 plan or waive this benefit	
Vision Employee Only	
Vision Employee + Spouse	
Vision Employee + Child(ren)	
Vision Employee + Family	

Waive this benefit

Please click on this button if you choose to "waive" this benefit.

12. A green check mark will appear when the section has been completed.

From the main page, click Choose a Plan next to Health Savings Account. **OR** click **waive** if you do not wish to contribute.

Open Enrollment Benefits



Health Savings Account – Only for employees who are enrolled in a High Deductible Plan and want to contribute to an HSA. Employee will need to WAIVE benefit if:

- You are enrolled in the College's base plan
- You are covered under a spouse's plan
- You do not wish to contribute to your HSA

Follow steps below to contribute to your HSA.

- 1. Select Contribution Plan (will see two options if 55 or older)
- 2. Enter in pay period amount
- 3. Click Save
- 4. Click Benefits Enrollment to return to main page

Benefits Selection	
An employee enrolled in a high deductible plan is eligible for a health savings account. 1) Employees may contribute to a health savings account through payroll deduction. This chart lists the amo 2) For employee only coverage - the amount the College contributes to your H.S.A. applies toward the IRS lin 3) For dependent/family coverage, the College does not contribute to a health savings account.	
You will need to determine the amount you will contribute and enter below. View this <u>chart</u> Read more	
Health Savings Account	
Choose a Plan Select 1 plan or waive this benefit	Cancel
✓ HSA Employee Contribution (Payroll Deduction)	
HSA Employee Contribution (Payroll Deduction)	
Pay Period Amount	
\$0.0d	>
Waive this benefit (1)	
Waive this benefit if: 1) You are enrolled in the College's base plan* 2) You are covered under a spouse's plan HSA	

13. A green check mark will appear when the section has been completed.

From the main page, click Choose a Plan next to Flexible Spending Account. <u>OR</u> click **waive** if you do not wish to contribute.



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Flexible Spending Account: Only for employees who would like to enroll in a FSA. Employees are not required to enroll. Employee will need to **WAIVE** coverage if not electing to contribute to a FSA benefit.

Follow steps below to contribute to your FSA.

- 1. Select FSA benefit
- 2. Enter amount per pay period
- 3. Click Save; Click Benefits Enrollment to return to main page

Benefits Selection	
Benefits Enrollment	
Flexible Spending Accounts (FSA) allow you set aside money from your paycheck on a pretax basis to pay for	
 Medical: Option for employees enrolled in the Base Plan. Annual Maximum Contribution \$2,750. Limited Purpose: Option for employees enrolled in the High Deductible Plan (HSA). Annual Maximum Contribution 3) Dependent Care can be used for work-related child care expenses Annual Maximum Contribution up to \$5 FSA Expense Calculator Worksheet 	
Additional information Read more	
Flexible Spending Account	
Choose Plans Select between 1 and 2 plans or waive this benefit	
SA - Medical Reimbursement	Cancel Save
FSA - Limited Purpose	
FSA - Dependent Care	
FSA - Medical Reimbursement	
Enter Annual Amount (Max Amount: \$2,749.92)	
FSA - Dependent Care	
Enter Annual Amount (Max Amount: \$4,999.92)	
Waive this benefit (1)	
Please click on this button if you choose to "waive" this benefit.	

14. A green check mark will appear when the section has been completed. From the main page, click Choose a Plan next to Life Insurance.



Life Insurance – All employees must select the college paid plan. When complete, click Save; click Benefits Enrollment to return to main page.

Note: To change beneficiary or supplemental coverage, contact Human Resources.



After completing each section, a green check mark should appear on all sections. You are now able to review your selection and submit. You can even download a PDF of your selection.

Open Enrollment Benefits

	Medical Insurance Update Plan	
	Your Plan	
	HSA - NON BJC Employee Only	Waive this benefit
	Please click on this button if you choose to "waive" this benefit.	
\$ +	Dental Insurance Update Plan	
	Your Plan	
	Dental Employee Only	Benefits Summary
	Please click on this button if you choose to "waive" this benefit.	HSA - Non BJC Employee Only
	Vision Insurance, Judate Plan	Dental Employee Only
	VISION INSULATICE Opticate Plan	Vision Employee Only
	Your Plan Vision Employee Only	HSA Employee Contribution (Payroll Deduction)
		Flexible Spending Account (Waived)
	Please click on this button if you choose to "waive" this benefit.	Life / AD & D (\$50,000 College Paid)
\$ +	Health Savings Account Update Plan	
	Your Plan	Review and Submit
	HSA Employee Contribution (Payroll Deduction)	
	Waive this benefit if: 1) You are enrolled in the College's base plan* 2) You are covered under a spouse's plan* 3) You do not wish to contribute to your H.S.A.	
5	Flexible Spending Account Choose a Plan	
	Your Plan	
	-	Waive this benefit
	Please click on this button if you choose to "waive" this benefit.	
	Life Insurance Update Plan	
~_~	Your Plan	

Life / AD & D (\$50,000 College Paid)



Adding dependents - If adding dependents:

- Click on "Manage Dependents/Beneficiaries" •
- Click add another
- **Click Person** •

This mess	sage is modified on Colleague screen BENP. Dependents ma	ay on an employee's benefits until the end of the year in	which they turn 26 a	at which time they need to be removed.	
Manag	e Dependents/Beneficiaries				Add Another
	rou nave no dependents or beneficiaries on file.				
		000-2020 Ellucian Company L.P. and its affiliates. All right	ts reserved. <u>Privacy</u>		
	Add new dependent/beneficiar				
	Select Category:				
	O Person				
	 Organization Fill in all required data. (N Click save to return to sel Salast Dependents 	ne, Address, Birth Date, SSN) tion screen			
Step 1	 Organization 1. Fill in all required data. (N 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	ne, Address, Birth Date, SSN) tion screen ection to return to main page			
Step 1	 Organization 1. Fill in all required data. (N 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page		Middle Name	
Step 1	 Organization 1. Fill in all required data. (N 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page		Middle Name	
Step 1 fix ielect t Name *	 Organization 1. Fill in all required data. (N 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page		Middle Name	
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fix ielect t Name *	 Organization 1. Fill in all required data. (N. 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page		Middle Name Birth Date M/d/yyyy	
fix ielect t Name *	 Organization 1. Fill in all required data. (N 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page Irst Name uffix select		Middle Name	
Step 1 fix ielect t Name * ial Security Nur 99-99-9999 ider ielect	 Organization 1. Fill in all required data. (N 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page Irst Name uffix select		Middle Name Birth Date Mrd/yyyy Marital Status Select	
Step 1 fix ielect t Name * ial Security Nur 99-99-9999 inder ielect	 Organization 1. Fill in all required data. (N. 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page irst Name uffix select	v	Middle Name Birth Date M/d/yyyy Marital Status Select	
Step 1 fix ielect t Name * ial Security Nur 99-99-9999 inder ielect	 Organization 1. Fill in all required data. (N 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page Irst Name uffix Select elationship Select		Middle Name Birth Date Mrd/yyyy Marital Status Select City	
Step 1 fix ielect t Name * ial Security Nur 99-99-9999 ider ielect	 Organization 1. Fill in all required data. (N 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page irst Name uffix select elationship select ddress Line2		Middle Name Birth Date Mrd/yyyy Marital Status Select City	
Step 1 fix ielect t Name * ial Security Nur 99-9999 inder ielect ielect	 Organization 1. Fill in all required data. (N 2. Click save to return to sel 3. Select Dependents 4. Click save; click benefits s 	me, Address, Birth Date, SSN) tion screen ection to return to main page Irst Name uffix select elationship select ddress Line2		Middle Name Birth Date Mid/yyyy Marital Status Select City Country	







Step 3

START

- 1. Click eCentral from East Central homepage (top right hand)
- 2. Click login
- 3. Enter in user name & password
- 4. Click Employees
- 5. Click Human Resources
- 6. Click Benefits
- 7. Click Start Enrollment
- 8. Click Choose a Plan under Medical Insurance
- 9. Select plan
 - If adding dependents_____
- 10. Click Save
- 11. Click Benefits Enrollment
- 12. From main page, click Choose a Plan under Dental Insurance
- 13. Select Plan
- 14. Click Save
- 15. Click Benefits Enrollment
- 16. From main page, click Choose a Plan under Vision Insurance
- 17. Select Plan
- 18. Click Save
- 19. Click Benefits Enrollment
- 20. From main page, click Choose a Plan under Health Savings Account OR click WAIVE
- 21. If not waiving, select plan
- 22. Enter pay period amount
- 23. Click Save
- 24. Click Benefits Enrollment
- 25. From main page, click Choose a Plan under Flexible Spending Account OR click WAIVE
- 26. If not waiving, select plan
- 27. Enter pay period amount
- 28. Click Save
- 29. Click Benefits Enrollment
- 30. From main page, click Choose a Plan under Life Insurance
- 31. Select Plan
- 32. Click Save
- 33. Click Benefits Enrollment
- 34. Click Review & Submit

FINISH