Guide to Benefits Enrollment

Enrolling is easy and available 24 hours a day via Employee Self-Service at http://leo.cc.emory.edu.

How to Enroll Online

Enroll online through Employee Self-Service at http://leo.cc.emory.edu. Enrolling online will ensure accuracy and save time. If you do not know your Emory University NETID and password call the IT Help Desk at 404-727-7777.

1. Log On to the Employee Self-Service, click the words Self Service to expand your available selections. Under the Benefits section click Benefits Enrollment.

2. If you are choosing coverage for the first time or want to view your current elections, choose Select.

3. Change or choose your elections by clicking Edit beside a particular plan and follow the prompts to view and/or change your current coverage. You may also enroll, add or drop dependents.

4. After editing your coverage in each plan, your new elections, covered dependents and payroll deductions will be displayed.

5. You will be prompted at the bottom of the page to Continue if coverage is correct or Edit if you have made an error.

6. Print a copy of the enrollment summary after you have finalized and edited your elections.

7. Click Continue at the bottom of the Enrollment Summary page and then Submit after reading the Authorize Elections Statement. Print the confirmation page for your records.

Review your benefit elections through Employee Self-Service at http://leo.cc.emory.edu. Following your enrollment, a confirmation statement of your benefit elections will be mailed to your home address. Please read the statement carefully to ensure accuracy as elections cannot be changed.

Screen Shot Guide to Benefits Enrollment

Whether you are enrolling in benefits due to a job related event such as hire or open enrollment, or if you have experienced a family status change such as marriage or birth and need to enroll dependents, Employee Self Service can walk you through the process.

Benefits Home Page
To enter your benefit elections click on **Benefits** under Employee Self Service. The Benefits page will open with options for **Benefits Summary**, **Family Status Changes** and **Benefits Enrollment**.

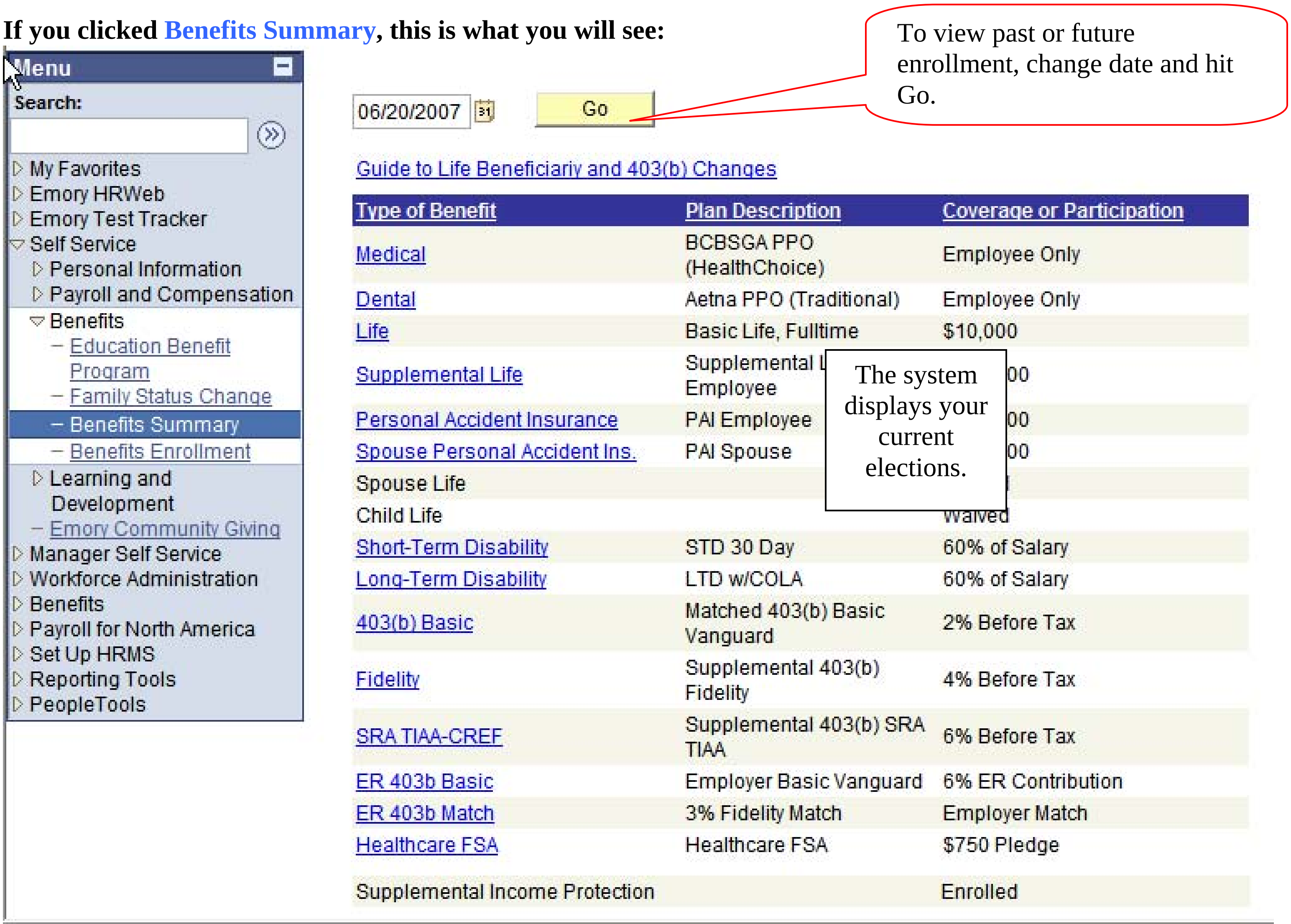
Here is what you'll see:

- **Benefits Summary** displays your current enrollment in the benefit plans, covered dependents and beneficiary data previously elected within self service. You may update beneficiary data for your life plans under this link. If you haven't elected beneficiaries within self service, then we are maintaining them on your last paper form. You may also change 403b contribution percents here, although you cannot enter brand new elections or vendors. New elections and/or vendors require additional applications. You will be directed to the Benefits web site for directions on completing those applications. 457b plans are also excluded from online entry. Please see the web site for information on changing 457b plans.

- The **Family Status Changes** link allows you to record events such as marriage, divorce, newborns, adoptions, changes in your spouse or dependent's employment status, or overage children who no longer qualify as dependents.

- **Benefit Enrollment** takes you directly into the enrollment panels for open events. Job related events like new hire or open enrollment will be opened by Human Resources. After Family Status Change has been created, you may regain access through Benefits Enrollment. This is also where you access Annual Enrollment each fall.

If you clicked Benefits Summary, this is what you will see:



Menu

Search:

- My Favorites
- Emory HRWeb
- Emory Test Tracker
- Self Service
  - Personal Information
  - Payroll and Compensation
  - Benefits
    - Education Benefit Program
    - Family Status Change
    - Benefits Summary
    - Benefits Enrollment
  - Learning and Development
  - Emory Community Giving
- Manager Self Service
- Workforce Administration
- Benefits
- Payroll for North America
- Set Up HRMS
- Reporting Tools
- PeopleTools

To view your benefits as of another date, enter the date and click Go:

06/20/2007 Go

Medical

Plan Name:	BCBSGA PPO (HealthChoice)
Plan Provider:	Blue Cross Blue Shield
Coverage:	Employee Only
Group Number:	EMORY
Customer Service:	1.800.441.2273 **Ext:**

Links to individual plans provide more detail information such as Group Numbers and Customer Service telephone numbers.

Covered Dependents

Click the covered dependent's name to review their personal information. You may update (Edit) personal information with the exception of Name, Date of Birth, and Social Security Number. Contact the Benefits Department at (404) 727-7613 to request changes to those fields.

No dependent/beneficiary enrollments were found.

Additional Information

Return to Employee Benefit Summary

Clicking a life plan link will open a box with an edit option to update beneficiary data.

Life

To view your benefits as of another date, enter the date and click Go:

10/10/2006 Go

Life

Plan Name:	Basic Life, Fulltime
Plan Provider:	Ing Benefits
Coverage Level:	$10000
Group Number:	61715-6
Customer Service:	1.800.409.9880

Covered Beneficiaries

Click Edit to change your current beneficiary allocations or to add a new beneficiary. For beneficiaries already listed, click the beneficiary's name to review the individual's personal information. You may update (Edit) personal information with the exception of Name, Date of Birth, and Social Security Number. Contact the Benefits Department at (404) 727-7613 to request changes to those fields.

Name	Relationship	Allocation
	Spouse	100%

Edit

Primary Beneficiaries are displayed. Click Edit to view Secondary Beneficiaries or to make changes to either allocation.

Go To: Benefits Summary

Change Current Beneficiaries and Allocations

To change the allocations for your current beneficiaries, enter the new percents in the New Primary and New Secondary Allocation columns. Each column must total to 100%. Percents must be entered in whole numbers without decimals. For example, three primary beneficiaries would have to be divided into 34%, 33% and 33%.

Primary beneficiary(ies) will receive total payment. Secondary beneficiary(ies) will receive payment only if no Primary beneficiary(ies) survives the insured. Beneficiaries in the same class will receive separate shares based upon the percents you designate. If no named beneficiary survives the insured or if the estate of the insured is named as beneficiary, payment will be made in one sum to the estate of the insured.

If you wish to name your estate as beneficiary, please add a new Dependent/Beneficiary record. Enter the First Name as "To the Estate of xxxxxx" and type your first name instead of xxxxxx. Enter The Last Name as your Last Name. If your estate is set up with a name that does not follow this naming convention or if you need to list the name of a Trust, you will need to complete a paper Life Insurance form.

The form may be downloaded and printed at the following web site:

Life Insurance Enrollment Form

Allocation Type

Enter Primary Allocations as: Percent

Enter Secondary Allocations as: Percent

Name	Relationship	Current Primary Percent	Current Secondary Percent	New Primary Allocation	New Secondary Allocation
	Spouse	100			
	Son		34		
	Daughter		33		
	Daughter		33		
			Update Totals	0	0

Enter New Allocations here. Primary Allocation must add up to 100% and must be entered as whole numbers without decimals. If you chose to list Secondary Beneficiaries, that allocation also needs to equal 100%.

Add a New Beneficiary

Selecting a 403b plan will open the plan detail page, including the edit option for changing the contribution percent.

SRA TIAA-CREF

To view your benefits as of another date, enter the date and click Go:

10/10/2006 Go

SRA TIAA-CREF

Plan Name: Supplemental 403(b) SRA TIAA

Plan Provider: TIAA CREF

Group Number: HL27/HL26

Customer Service: 1.800.842.2733 **Ext:**

Current Contributions

Click Edit to change your Supplemental Employee Contribution. The combination of your Basic and Supplemental contributions cannot exceed $15,000 annually or $20,000 if you are age 50 or above. If you would like to terminate your contributions or make elections with a new vendor, you will need to submit a new Retirement Authorization Form and enroll with the vendor if applicable. Forms and instructions on how to enroll are on the Human Resources web site under Retirement Plan. If you would like to contribute the IRS maximum amount and would like the Benefits Office to calculate the amount, call (404) 727-7613. Changes take effect immediately.

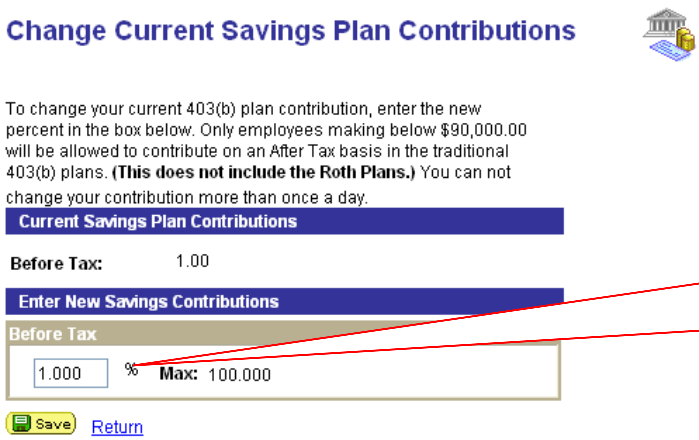
Before Tax: 1%

Edit

Click Edit to change your contribution percent. You may only make changes to plans you are currently enrolled in and the system does not allow you to stop contributions on this site. To make new elections or to stop current elections, please click the link to Retirement Plans to download the appropriate forms.

Benefits Summary

Once you've clicked Edit, the following page is displayed:



Change Current Savings Plan Contributions

To change your current 403(b) plan contribution, enter the new percent in the box below. Only employees making below $90,000.00 will be allowed to contribute on an After Tax basis in the traditional 403(b) plans. **(This does not include the Roth Plans.)** You can not change your contribution more than once a day.

Current Savings Plan Contributions

Before Tax: 1.00

Enter New Savings Contributions

Before Tax

1.000 % **Max:** 100.000

Save Return

Enter your new percent and hit Save

The change will be effective with the next payroll run.

It is important for you to note that the 403(b) Basic plan is the plan matched by the University once you have satisfied the plan requirements – one year of service, age 21, and 1,000 hours. Before contributing to any Supplemental plans, you should contribute 2% to the Basic plan to receive the maximum matching funds. Do not reduce the 403(b) Basic plan without understanding the consequences to the University match. All plan and vesting requirements apply to employee elections entered online.

If you click on Family Status, the first page you see is the page to click into Create New Family Status Change or if you already have and want to make changes within the 31 days go to Benefits Enrollment:

The Family Status Change Certification Page will come up next when you create a New Family Status Change.

Family Status Change Certification

Date: 02/07/2005

To begin enrollment, please complete sections 1, 2, 3, and 4 of the Certification form.

1. I certify that I have incurred the following Family Status Change:

(Please check one)

- ○ **Marriage**
- ○ **Divorce, Legal Separation, or Annulment**
- ○ **Newborn/Legal Guardian**
- ○ **Adoption**
- ○ **Death of Dependent**
- ○ **Start or Termination of spouse or dependent employment**
- ○ **Spouse has changed from Part-Time to Full-Time or Vice Versa**
- ○ **Spouse has taken unpaid leave of absence**
- ○ **Dependent has lost/gained Eligibility**
- ○ **Significant change in coverage due to spouse's employment**
- ○ **Spouse or dependent Open Enrollment Period**
- ○ **Spouse or dependent gains or loses Medicare/Medicaid coverage**
- ○ **Change in dependent care provider or cost for Dependent Care Flexible Spending Account**

The following events require documentation.
Contact the Benefits Department at (404) 727-7613 to process one of these events.

* Change in residence to an area in or out of plan network
* Dependent loses state's SCHIP plan
* Judgement, Decree, or Court Order to add dependent coverage
* New Domestic Partner Agreement completed
* Domestic Partner Termination

2. Event Date

(Enter the date the event occurred)

02/07/2005 MM/DD/YYYY

Examples: Newborn - Date of Birth
Adoption - Date Child is Placed in Home
Dependent loses Eligibility - Date they marry or no longer qualify as a dependent
(If losing student status, then date is their birth date in the current year. For example, a child born 6/2/1983 losing coverage in 2005, would have an event date of 6/2/2005.)

3. My dependent(s) meet one of Emory's definitions of an eligible dependent:

(Verify that your dependent qualifies)

Legal Spouse
Natural born Son or Daughter
Legally adopted Son or Daughter
Step Son or Step Daughter residing in my home
Son or Daughter by court order Legal Guardianship
Same-Sex Domestic Partner with notarized SSDP Agreement
Same-Sex Domestic Partner's Son or Daughter with notarized SSDP Agreement

*** Unmarried children are eligbile up to age 19 or to age 25 if they are a full time student.**
Contact the Benefits Department at (404) 727-7613 to establish eligibility for a disabled child.

4. I wish to do the following:

(Select the action you wish to take)

- ○ **Add dependents to my existing plan**
- ○ **Terminate dependents from my existing plan**
- ○ **Add new coverage on myself and eligible dependents**
- ○ **Terminate myself and all dependents**
- ○ **Change Dependent Care Flexible Spending Account election**

Please Read Carefully

By clicking the Accept button below, I certify that all statements made above are true. I understand that falsifying healthcare and dependent records may result in my immediate dismissal from Emory University. If I choose not to certify the data above, I may click Cancel to exit this page.

[Accept] [Cancel]

Read Carefully!

In Section 1, click on the type of event that best describes the change in your circumstance. If you have experienced one of the last 5 events, then you are required to provide documentation to the Benefits Department. You cannot create any of these enrollment events on-line.

The Event Date is the actual date the change occurred. For overage dependents, that is their birthday, this year.

Although certain relatives may qualify as your financial dependent (mother/father), they may not meet Emory's definition of a qualified dependent.

Please click on the action that best describes how you want to change your plans.

Click Accept to continue the process or Cancel to exit without creating an event.

If you make an error, please do not add another event to try and correct. Call the Benefits Department at (404) 727-7613 for assistance.