

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

This guide is your go-to resource for navigating the enrollment process with confidence. Whether you're just starting out or looking to review your options, this guide is here to support you every step of the way.

Employees who are employed by MetroPlus will be required to select from the MetroPlus Health Plans for the first year (365 days)

Supporting Documentation will be **required** for any modification and/or addition of Dependent Information.

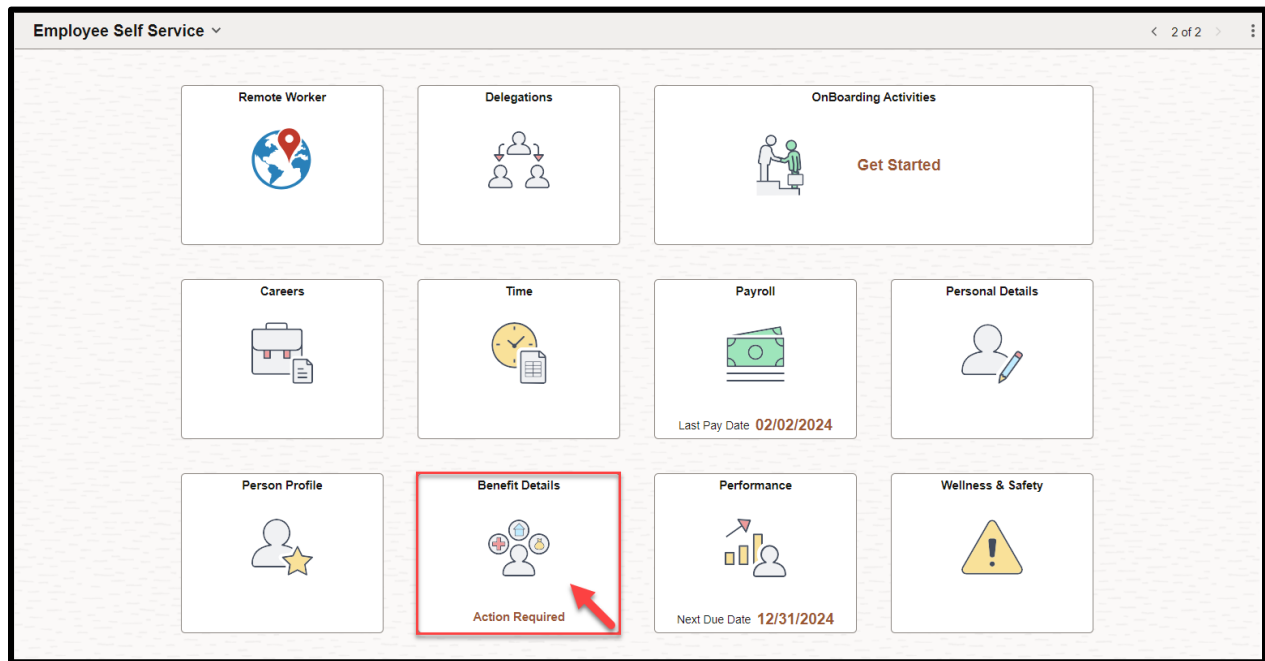
Table of Contents

Pages: 2-3	<u>Navigating to Benefits Enrollment</u>
Pages: 4-6	<u>Adding/Updating Dependent(s)</u>
Pages: 7-10	<u>Uploading Dependent Documents</u>
Page: 11	<u>Enrolling Dependent(s)</u>
Pages: 12-13	<u>Benefit Plan Comparison</u>
Page: 14-15	<u>Finalizing/Submitting Enrollment</u>
Page: 16	<u>Enrollment Preview Statement</u>

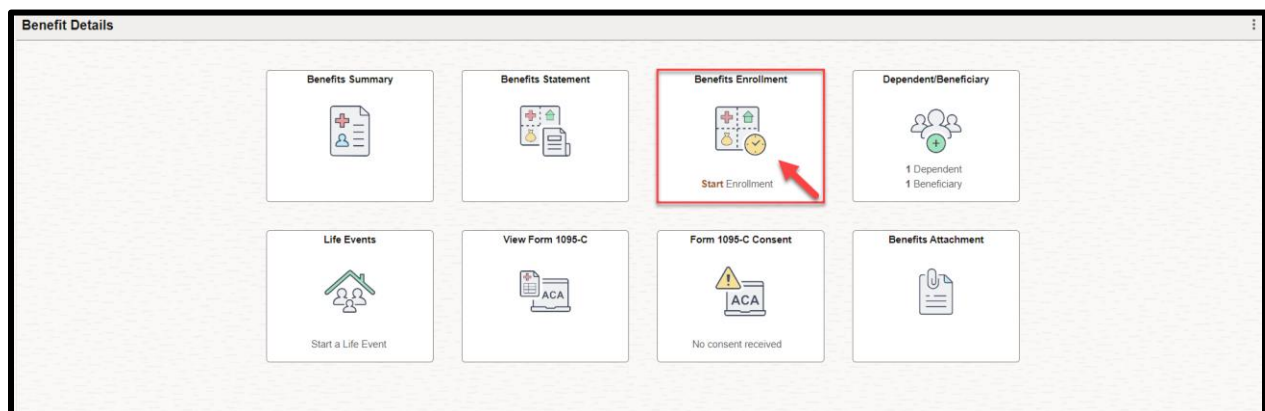
How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Navigating to Benefits Enrollment

1. After successfully authenticating and logging into [Employee self service](#), click the **Benefits Details** tile.



2. Navigate to **Benefits Enrollment**.



How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Navigating to Benefits Enrollment

IMPORTANT: You have **31 days** from the date of your event to enroll into your health benefits. If you have passed your 31 day mark, please refer to the following guide for [Qualifying Event](#)

Please Note: Event Description → This is your Qualifying Event
Clicking the blue “i” button will give you a brief description of the Qualifying Event

Event Date → This is the date your new Benefits Coverage will take effect

Event Status → Only Events in an Open or Submitted Status can be edited

3. Click the **“Start”** button to continue.

The screenshot shows the 'Benefits Enrollment' page. At the top, there is a section for 'Staff Nurse-Amb Care Med OP' with instructions on how to use the system. Below this is a table titled 'Your Benefit Events' with columns: Event Description, Event Date, Event Status, and Job Title. The first row shows 'New Hire' with an information icon (i), '01/02/2024', 'Open', and 'Staff Nurse-Amb Care Med OP'. A 'Start' button is located at the end of this row, highlighted with a red arrow.

4. Click the **“Medical”** tile to enroll/change your Medical coverage.

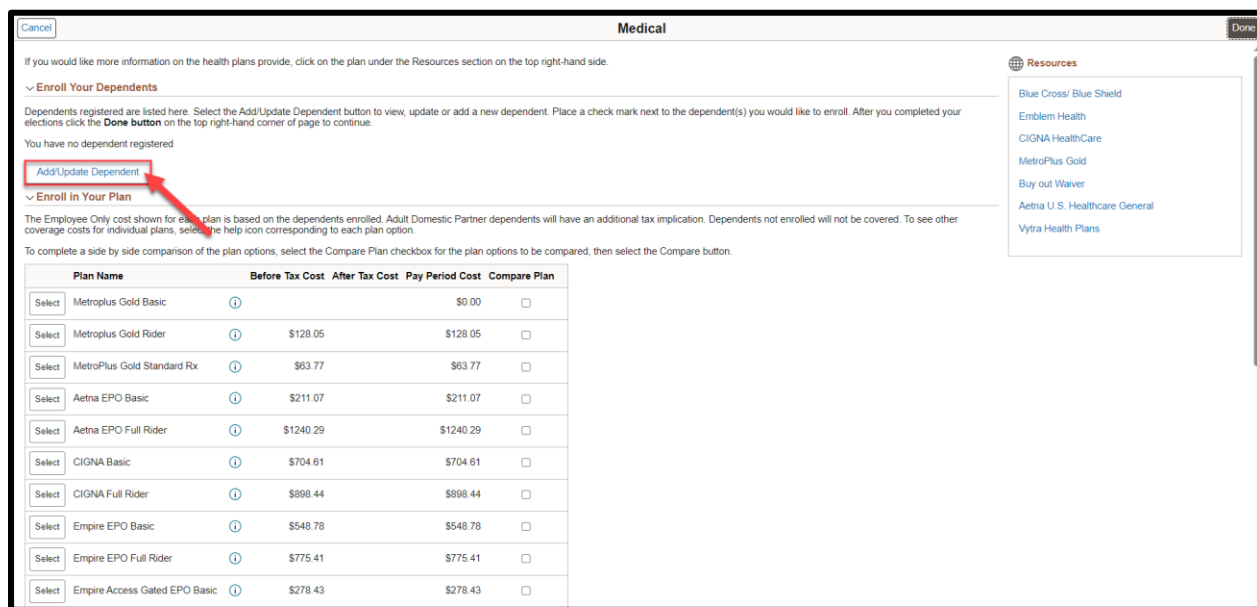
The screenshot shows the 'Benefits Enrollment' page with the 'Medical' tile selected. The page displays the current status as 'Pending Review' and the 'Pay Period Cost' as '\$0.00'. Below this, there is a section for 'Benefit Plans' with a 'Medical' tile highlighted by a red box and a red arrow. The 'Medical' tile shows 'Current: No Coverage', 'New: None', 'Status: Pending Review', and '0 Dependents'. At the bottom of the 'Medical' tile, it says 'Pay Period Cost: \$0.00' and 'Review'.

Please note: The flexible spending accounts and retirement plan options listed are view only. You must reach out to each entity directly to enroll/make changes.

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Adding/Updating Dependent(s)

5. Click the “**Add/Update Dependent**” button to add your dependent(s).



Cancel Medical Done

If you would like more information on the health plans provide, click on the plan under the Resources section on the top right-hand side.

▼ **Enroll Your Dependents**

Dependents registered are listed here. Select the Add/Update Dependent button to view, update or add a new dependent. Place a check mark next to the dependent(s) you would like to enroll. After you completed your elections click the **Done** button on the top right-hand corner of page to continue.

You have no dependent registered

Add/Update Dependent

▼ **Enroll in Your Plan**

The Employee Only cost shown for each plan is based on the dependents enrolled. Adult Domestic Partner dependents will have an additional tax implication. Dependents not enrolled will not be covered. To see other coverage costs for individual plans, select the help icon corresponding to each plan option.

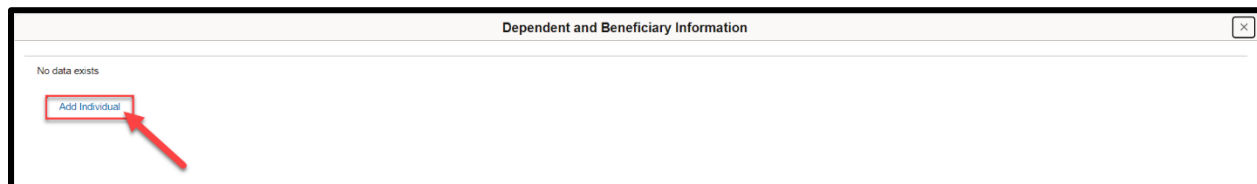
To complete a side by side comparison of the plan options, select the Compare Plan checkbox for the plan options to be compared, then select the Compare button.

	Plan Name	Before Tax Cost	After Tax Cost	Pay Period Cost	Compare Plan
Select	MetroPlus Gold Basic	①		\$0.00	<input type="checkbox"/>
Select	MetroPlus Gold Rider	①	\$128.05	\$128.05	<input type="checkbox"/>
Select	MetroPlus Gold Standard Rx	①	\$63.77	\$63.77	<input type="checkbox"/>
Select	Aetna EPO Basic	①	\$211.07	\$211.07	<input type="checkbox"/>
Select	Aetna EPO Full Rider	①	\$1240.29	\$1240.29	<input type="checkbox"/>
Select	CIGNA Basic	①	\$704.61	\$704.61	<input type="checkbox"/>
Select	CIGNA Full Rider	①	\$898.44	\$898.44	<input type="checkbox"/>
Select	Empire EPO Basic	①	\$548.78	\$548.78	<input type="checkbox"/>
Select	Empire EPO Full Rider	①	\$775.41	\$775.41	<input type="checkbox"/>
Select	Empire Access Gated EPO Basic	①	\$278.43	\$278.43	<input type="checkbox"/>

Resources

- Blue Cross/ Blue Shield
- Emblem Health
- CIGNA HealthCare
- MetroPlus Gold
- Buy out Waiver
- Aetna U.S. Healthcare General
- Vytra Health Plans

6. Click the “**Add Individual**” button to add your dependent(s) personal information.



Dependent and Beneficiary Information

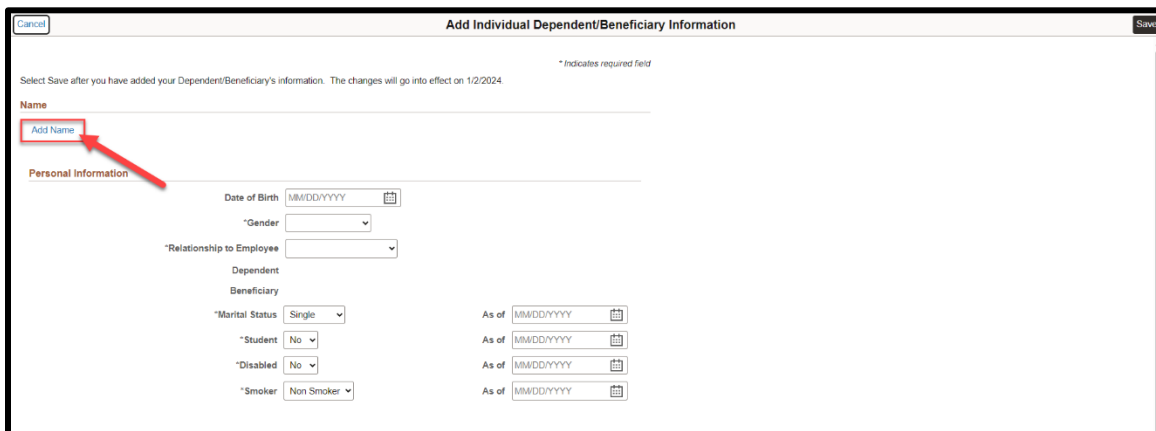
No data exists

Add Individual

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Adding/Updating Dependent(s)

Click the “Add Name” button.



Add Individual Dependent/Beneficiary Information

Select Save after you have added your Dependent/Beneficiary's information. The changes will go into effect on 1/2/2024. * Indicates required field

Name

Add Name

Personal Information

Date of Birth

*Gender

*Relationship to Employee

Dependent

Beneficiary

*Marital Status

*Student

*Disabled

*Smoker

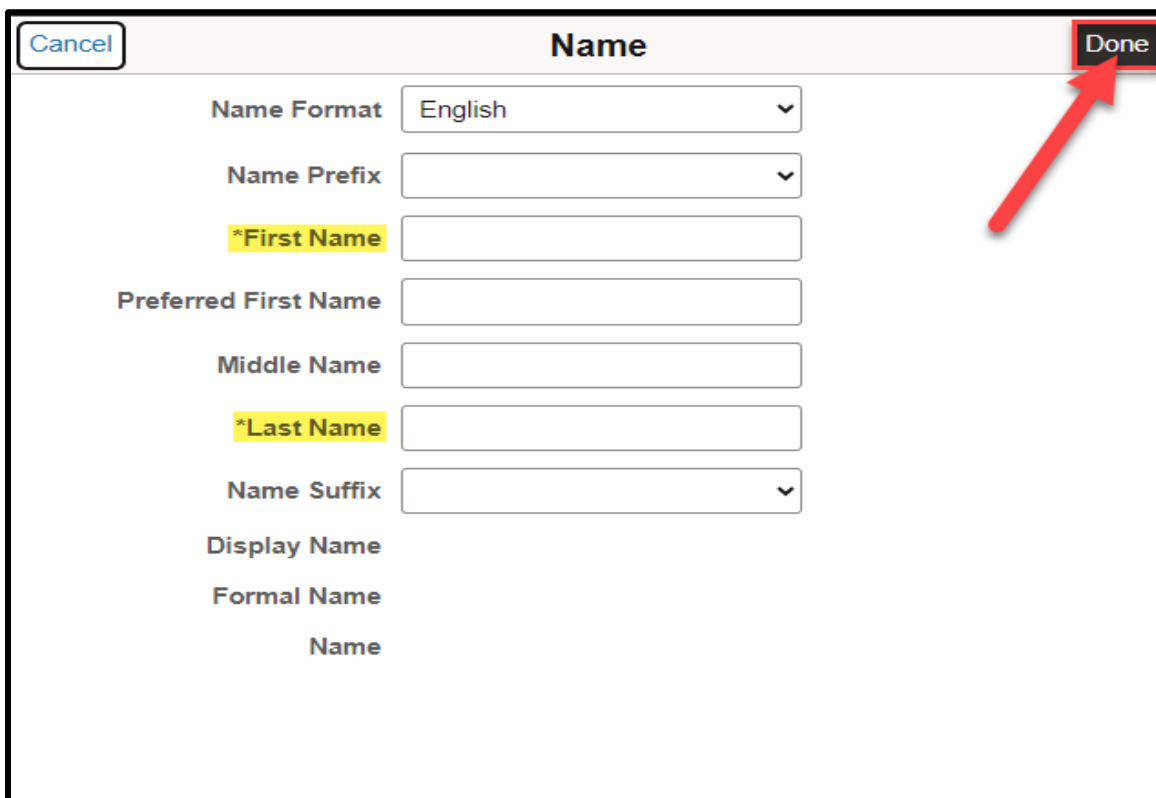
As of

As of

As of

As of

7. Enter the required fields and click the “Done” button.



Name

Cancel **Done**

Name Format

Name Prefix

***First Name**

Preferred First Name

Middle Name

***Last Name**

Name Suffix

Display Name

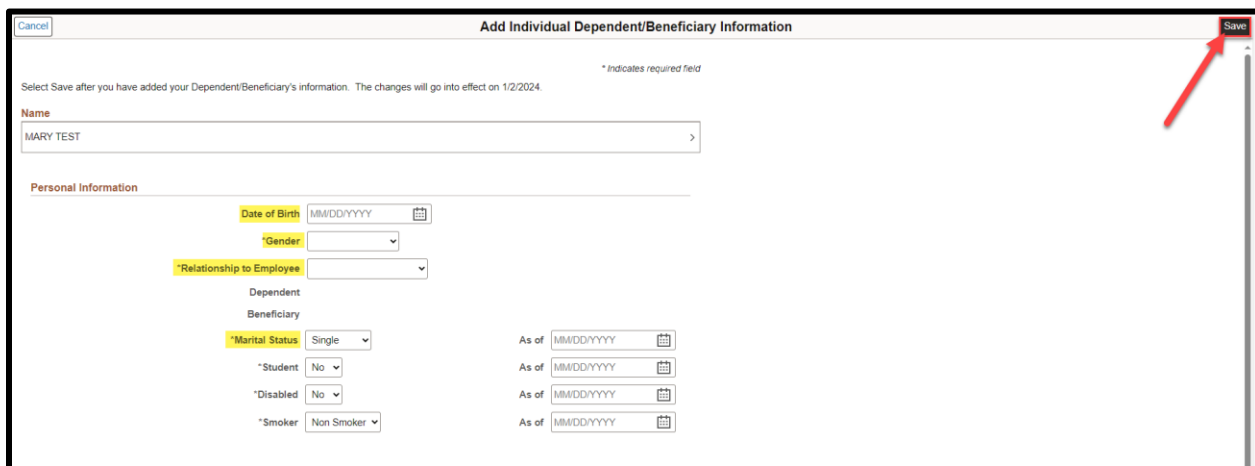
Formal Name

Name

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Adding/Updating Dependent(s)

8. Enter the required fields and click the “Save” button.



Cancel Add Individual Dependent/Beneficiary Information Save

Select Save after you have added your Dependent/Beneficiary's information. The changes will go into effect on 1/2/2024. * Indicates required field

Name
MARY TEST >

Personal Information

Date of Birth MM/DD/YYYY

*Gender

*Relationship to Employee

Dependent
Beneficiary

*Marital Status Single

*Student No

*Disabled No

*Smoker Non Smoker

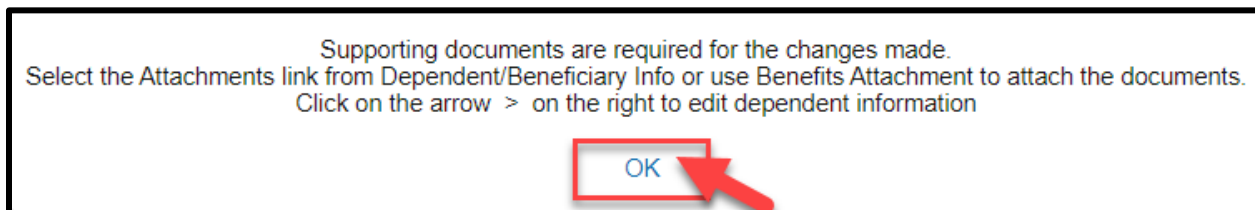
As of MM/DD/YYYY

As of MM/DD/YYYY

As of MM/DD/YYYY

As of MM/DD/YYYY

Supporting Documentation will be required for all modifications and additions of Dependents. Click “OK”.



Supporting documents are required for the changes made.
Select the Attachments link from Dependent/Beneficiary Info or use Benefits Attachment to attach the documents.
Click on the arrow > on the right to edit dependent information

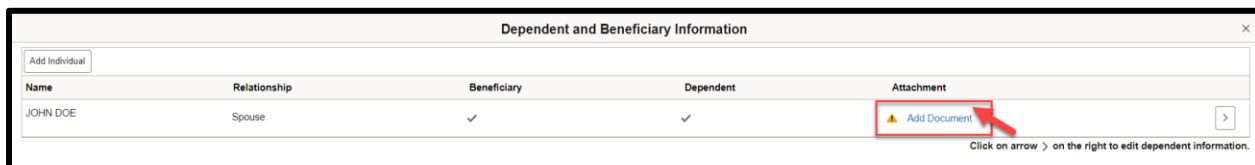
OK

REMEMBER, check your Outlook email in order to make sure your changes have been approved by HRSS/Benefits. If there are any problems, HRSS/Benefits will contact you via email. If you fail to respond, your requests will NOT be processed.

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Uploading Dependent Documents

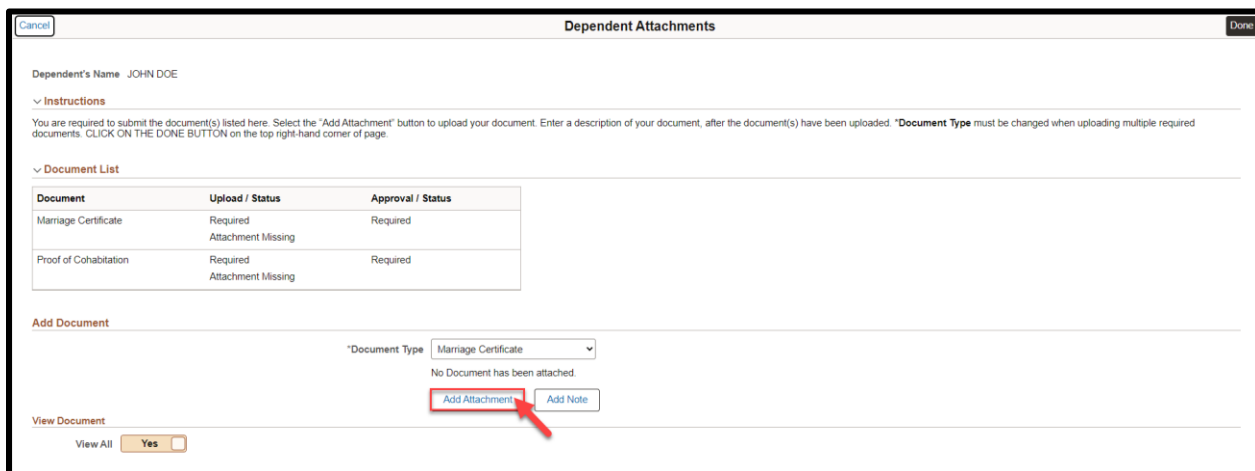
9. Click on the “Add Document” link to begin submitting Supporting Documentation for your new dependent.



Name	Relationship	Beneficiary	Dependent	Attachment
JOHN DOE	Spouse	✓	✓	Add Document

Click on arrow > on the right to edit dependent information.

10. Scan any supporting documents and attach the electronic documents by clicking the “Add Attachment” button.



Dependent's Name: JOHN DOE

Instructions
You are required to submit the document(s) listed here. Select the "Add Attachment" button to upload your document. Enter a description of your document, after the document(s) have been uploaded. *Document Type must be changed when uploading multiple required documents. CLICK ON THE DONE BUTTON on the top right-hand corner of page.

Document	Upload / Status	Approval / Status
Marriage Certificate	Required Attachment Missing	Required
Proof of Cohabitation	Required Attachment Missing	Required

Add Document

*Document Type: Marriage Certificate

No Document has been attached.

[Add Attachment](#) [Add Note](#)

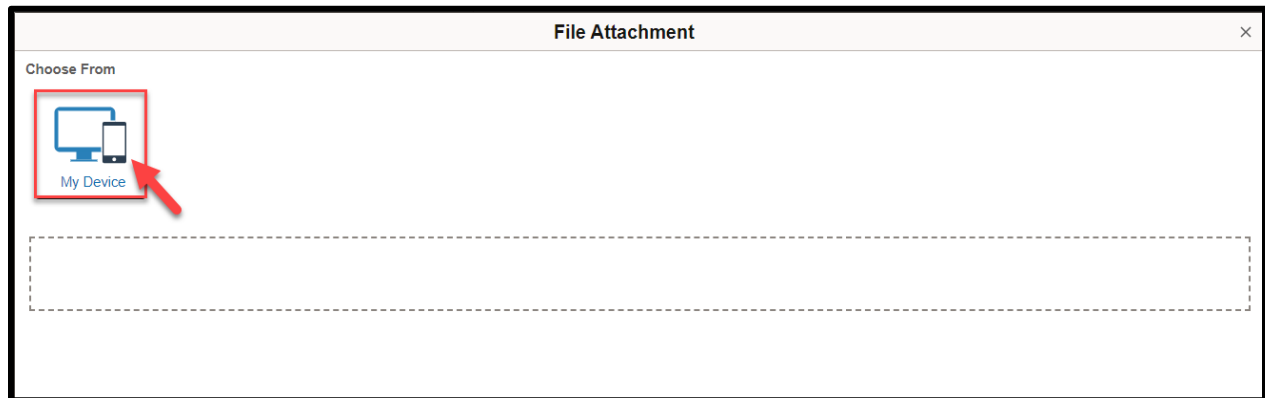
View Document

View All: ☒ Yes ☐ No

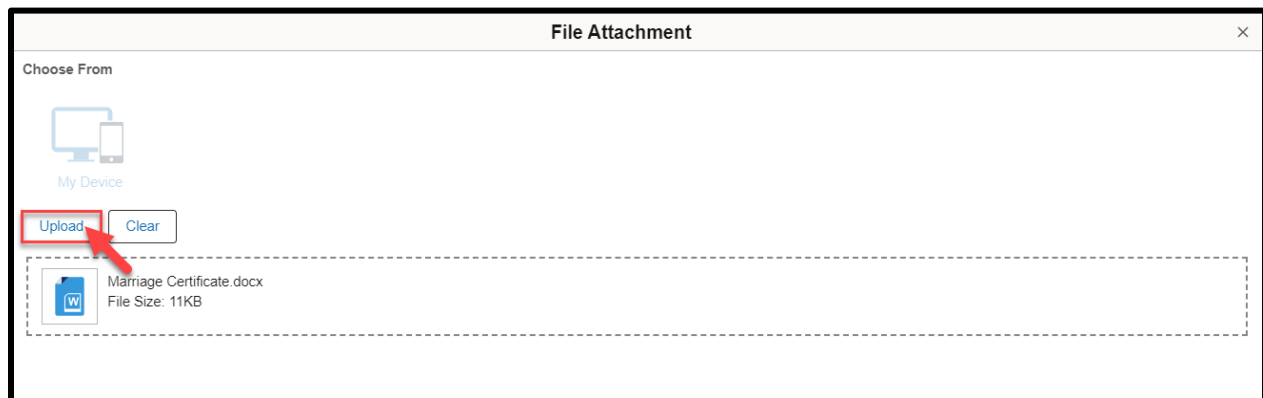
How to Enroll into Health Benefits
via Employee Self Service:
(Family Coverage)

Uploading Dependent Documents

Click “**My Device**” to select your file.



After finding your document, make sure you see your attachment. Then click “**Upload**” pushbutton to upload your document.



How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Uploading Dependent Documents

Once your upload is complete, click **“Done”**.

File Attachment

Choose From

My Device

Marriage Certificate.docx
File Size: 11KB

Done

Upload Complete

Remember to change the **“Document Type”** when uploading multiple required documents.

Dependent Attachments

Dependent's Name: JOHN DOE

Instructions

You are required to submit the document(s) listed here. Select the "Add Attachment" button to upload your document. Enter a description of your document, after the document(s) have been uploaded. **"Document Type"** must be changed when uploading multiple required documents. **CLICK ON THE DONE BUTTON** on the top right-hand corner of page.

Document List

Document	Upload / Status	Approval / Status
Marriage Certificate	Required Uploaded	Required
Proof of Cohabitation	Required Attachment Missing	Required

Add Document

*Document Type: Proof of Cohabitation

Add Attachment Add Note

View Document

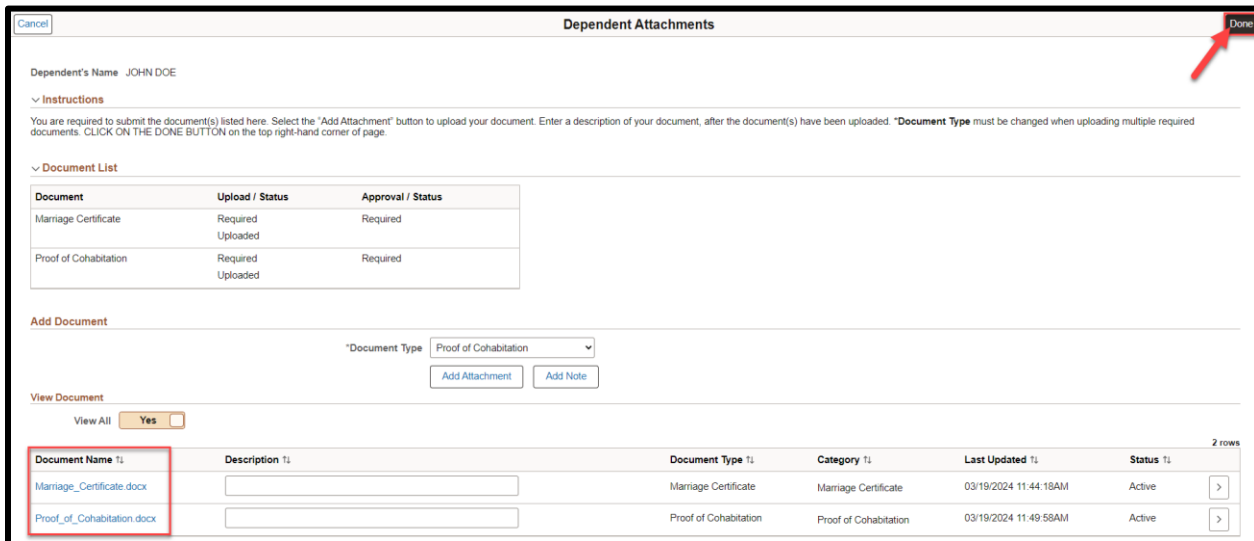
View All Yes

Document Name	Description	Document Type	Category	Last Updated	Status
Marriage_Certificate.docx		Marriage Certificate	Marriage Certificate	03/19/2024 11:44:18AM	Active

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Uploading Dependent Documents

11. After you have attached all files, click “**Done**” for your Form to be sent to HRSS/HHC Corporate Benefits for review.



Cancel Done

Dependent's Name JOHN DOE

Instructions

You are required to submit the document(s) listed here. Select the 'Add Attachment' button to upload your document. Enter a description of your document, after the document(s) have been uploaded. *Document Type must be changed when uploading multiple required documents. CLICK ON THE DONE BUTTON on the top right-hand corner of page.

Document List

Document	Upload / Status	Approval / Status
Marriage Certificate	Required Uploaded	Required
Proof of Cohabitation	Required Uploaded	Required

Add Document

*Document Type Proof of Cohabitation

Add Attachment Add Note

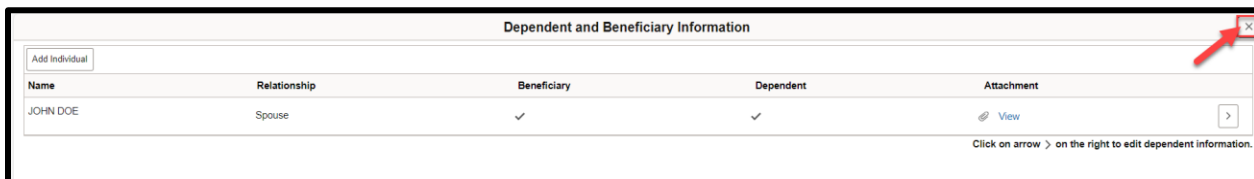
View Document

View All Yes

Document Name	Description	Document Type	Category	Last Updated	Status	
Marriage_Certificate.docx		Marriage Certificate	Marriage Certificate	03/19/2024 11:44:18AM	Active	>
Proof_of_Cohabitation.docx		Proof of Cohabitation	Proof of Cohabitation	03/19/2024 11:49:58AM	Active	>

2 rows

12. The following screen will appear, click the “X” button at the top to exit out of this screen.



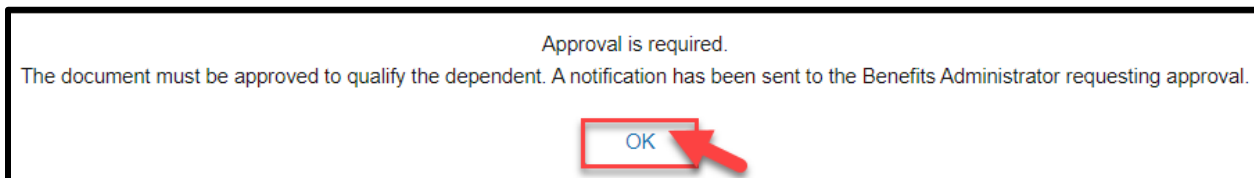
Dependent and Beneficiary Information X

Add Individual

Name	Relationship	Beneficiary	Dependent	Attachment
JOHN DOE	Spouse	✓	✓	View

Click on arrow > on the right to edit dependent information.

13. REMEMBER, Supporting Documentation will be required for all modifications and additions of Dependents. Click “OK”. The supporting documentation must be approved by the Benefits department



Approval is required.

The document must be approved to qualify the dependent. A notification has been sent to the Benefits Administrator requesting approval.

OK

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Enrolling Dependent(s)

14. Check the box next to all the dependents that you want to cover. This allows you to add dependents for Health Coverage purposes ONLY. This has no impact on your Tax withholding.

Cancel

Medical

Done

If you would like more information on the health plans provider, click on the plan under the Resources section on the top right-hand side.

Enroll Your Dependents

Dependents registered are listed here. Select the Add/Update Dependent button to view, update or add a new dependent. Place a check mark next to the dependent(s) you would like to enroll. After you completed your elections click the **Done** button on the top right-hand corner of page to continue.

Dependents	Relationship
<input checked="" type="checkbox"/> JOHN DOE	Spouse

Add/Update Dependent

Enroll in Your Plan

The Employee Only cost shown for each plan is based on the dependents enrolled. Adult Domestic Partner dependents will have an additional tax implication. Dependents not enrolled will not be covered. To see other coverage costs for individual plans, select the help icon corresponding to each plan option.

To complete a side by side comparison of the plan options, select the Compare Plan checkbox for the plan options to be compared, then select the Compare button.

Plan Name	Before Tax Cost	After Tax Cost	Pay Period Cost	Compare Plan
Select Metroplus Gold Basic	①		\$0.00	<input type="checkbox"/>
Select Metroplus Gold Rider	①	\$320.13	\$320.13	<input type="checkbox"/>
Select MetroPlus Gold Standard Rx	①	\$116.50	\$116.50	<input type="checkbox"/>
Select Aetna EPO Basic	①	\$876.83	\$876.83	<input type="checkbox"/>
Select Aetna EPO Full Rider	①	\$3787.79	\$3787.79	<input type="checkbox"/>
Select CIGNA Basic	①	\$1880.70	\$1880.70	<input type="checkbox"/>
Select CIGNA Full Rider	①	\$2467.32	\$2467.32	<input type="checkbox"/>
Select DC37	①		\$0.00	<input type="checkbox"/>

Resources

- Blue Cross/ Blue Shield
- Emblem Health
- CIGNA HealthCare
- MetroPlus Gold
- Buy out Waiver
- Aetna U.S. Healthcare General
- DC-37 Med-Team
- Vytra Health Plans

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Benefit Plan Comparison

The health plan comparison page is a valuable tool that allows you to compare different health insurance plans based on various factors such as coverage, cost, and geographic service area.

15. Select the plans you would like to compare, by clicking the **“Compare Box”** at the end of plan row.

Cancel Medical Done

If you would like more information on the health plans provider, click on the plan under the Resources section on the top right-hand side.

▼ **Enroll Your Dependents**

Dependents registered are listed here. Select the Add/Update Dependent button to view, update or add a new dependent. Place a check mark next to the dependent(s) you would like to enroll. After you completed your elections click the **Done** button on the top right-hand corner of page to continue.

Dependents	Relationship
<input checked="" type="checkbox"/> JOHN DOE	Spouse

[Add/Update Dependent](#)

▼ **Enroll in Your Plan**

The Employee Only cost shown for each plan is based on the dependents enrolled. Adult Domestic Partner dependents will have an additional tax implication. Dependents not enrolled will not be covered. To see other coverage costs for individual plans, select the help icon corresponding to each plan option.

To complete a side by side comparison of the plan options, select the Compare Plan checkbox for the plan options to be compared, then select the Compare button.

Plan Name	Before Tax Cost	After Tax Cost	Pay Period Cost	Compare Plan
Select MetroPlus Gold Basic ⓘ			\$0.00	<input checked="" type="checkbox"/>
Select MetroPlus Gold Rider ⓘ	\$320.13	\$320.13	\$320.13	<input type="checkbox"/>
Select MetroPlus Gold Standard Rx ⓘ	\$116.50	\$116.50	\$116.50	<input checked="" type="checkbox"/>
Select Aetna EPO Basic ⓘ	\$876.83	\$876.83	\$876.83	<input type="checkbox"/>
Select Aetna EPO Full Rider ⓘ	\$3787.79	\$3787.79	\$3787.79	<input type="checkbox"/>
Select CIGNA Basic ⓘ	\$1880.70	\$1880.70	\$1880.70	<input type="checkbox"/>
Select CIGNA Full Rider ⓘ	\$2467.32	\$2467.32	\$2467.32	<input type="checkbox"/>

Resources

- Blue Cross/ Blue Shield
- Emblem Health
- CIGNA HealthCare
- MetroPlus Gold
- Buy out Waiver
- Aetna U.S. Healthcare General
- DC-37 Med-Team
- Vytra Health Plans

Click **“Compare”** to view a side-by-side comparison of health plans.

Select	HIP HMO Basic ⓘ		\$0.00	<input type="checkbox"/>
Select	HIP HMO Carveout ⓘ	\$4.75	\$4.75	<input type="checkbox"/>
Select	HIP POS Basic ⓘ	\$559.92	\$559.92	<input type="checkbox"/>
Select	HIP POS Full Rider ⓘ	\$756.39	\$756.39	<input type="checkbox"/>
Select	Vytra Basic ⓘ	\$104.08	\$104.08	<input type="checkbox"/>
Select	Vytra Full Rider ⓘ	\$299.49	\$299.49	<input type="checkbox"/>
Select	Empire EPO Basic - After Tax ⓘ	\$548.78	\$548.78	<input type="checkbox"/>
Select	GHI/CBP Carveout - After Tax ⓘ	\$2.90	\$2.90	<input type="checkbox"/>
Select	HIP HMO - Carveout - After Tax ⓘ	\$11.63	\$11.63	<input type="checkbox"/>
Select	Buyout Waiver ⓘ		\$0.00	<input type="checkbox"/>
✓	Waive		\$0.00	<input type="checkbox"/>

[Overview of All Plans](#) [Compare](#)

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Benefit Plan Comparison

The page will generate a side-by-side comparison of available health plans to help them make an informed decision. This resource aims to simplify the complex process of choosing a health insurance plan by providing clear and concise information to assist you in selecting the best plan that meets you and your dependents healthcare needs.

Benefits Plan Comparison

The following displays a comparison for the In-Network Providers. For additional information and other plan details, please refer to the [Summary of Benefits and Coverage \(SBC\)](#) Document. Right click on the link and open it in a new tab/window.

Expand All | Collapse All

MetroPlus Gold Basic **MetroPlus Gold Standard Rx**

✓ Coverage Level Cost
These are all the available Coverage Costs

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Employee Only	\$63.77 Before-Tax	\$63.77 Before-Tax
Family	\$116.50 Before-Tax	\$116.50 Before-Tax
Employee + Domestic Partner	\$116.50 Before and After Tax	\$116.50 Before and After Tax
Family (with Domestic Partner)	\$116.50 Before and After Tax	\$116.50 Before and After Tax

✓ Pay Period Cost
The cost shown is based on the dependents you have enrolled.

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Employee Only	\$63.77	\$63.77

> Plan Cost and Credit Detail

✓ Overall deductible

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Overall Deductible	\$0.00	\$0.00

> Services Before Deductible Met

✓ Deductibles-Specific Services

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Deductibles-Specific Services	No	No

✓ Out of Pocket Limit

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Out of Pocket Limit	\$7,150 Individual/\$14,300 Family	\$7,150 Individual/\$14,300 Family

✓ Out of Pocket Limit Exclusions

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Out of Pocket Limit Exclusions	Premiums, penalties, balanced-bill charges, and health care this plan doesn't cover.	Premiums, penalties, balanced-bill charges, and health care this plan doesn't cover.

Click **“Done”** after comparing plans.

Benefits Plan Comparison

The following displays a comparison for the In-Network Providers. For additional information and other plan details, please refer to the [Summary of Benefits and Coverage \(SBC\)](#) Document. Right click on the link and open it in a new tab/window.

Expand All | Collapse All

MetroPlus Gold Basic **MetroPlus Gold Standard Rx**

✓ Coverage Level Cost
These are all the available Coverage Costs

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Employee Only	\$63.77 Before-Tax	\$63.77 Before-Tax
Family	\$116.50 Before-Tax	\$116.50 Before-Tax
Employee + Domestic Partner	\$116.50 Before and After Tax	\$116.50 Before and After Tax
Family (with Domestic Partner)	\$116.50 Before and After Tax	\$116.50 Before and After Tax

✓ Pay Period Cost
The cost shown is based on the dependents you have enrolled.

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Employee Only	\$63.77	\$63.77

> Plan Cost and Credit Detail

✓ Overall deductible

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Overall Deductible	\$0.00	\$0.00

> Services Before Deductible Met

✓ Deductibles-Specific Services

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Deductibles-Specific Services	No	No

✓ Out of Pocket Limit

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Out of Pocket Limit	\$7,150 Individual/\$14,300 Family	\$7,150 Individual/\$14,300 Family

✓ Out of Pocket Limit Exclusions

Coverage Level	MetroPlus Gold Basic	MetroPlus Gold Standard Rx
Out of Pocket Limit Exclusions	Premiums, penalties, balanced-bill charges, and health care this plan doesn't cover.	Premiums, penalties, balanced-bill charges, and health care this plan doesn't cover.

Done

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Finalizing/Submitting Enrollment

16. Select the plan in which you would like to enroll, by clicking **“Select”** next to the plan name. Be sure the box next to all the dependents that you want to cover are checked. Click **“Done”** button.

The screenshot shows the 'Medical' enrollment page. At the top right, a red arrow points to a 'Done' button labeled 'STEP 2'. Below the 'Enroll Your Dependents' section, there is a table of health plans. A red arrow points to the 'Select' button next to 'MetroPlus Gold Basic' in the first row of the table. The table has columns: Plan Name, Before Tax Cost, After Tax Cost, Pay Period Cost, and Compare Plan.

Plan Name	Before Tax Cost	After Tax Cost	Pay Period Cost	Compare Plan
Select MetroPlus Gold Basic			\$0.00	<input type="checkbox"/>
Select MetroPlus Gold Rider		\$320.13	\$320.13	<input type="checkbox"/>
Select MetroPlus Gold Standard Rx		\$116.50	\$116.50	<input type="checkbox"/>
Select Aetna EPO Basic		\$876.83	\$876.83	<input type="checkbox"/>
Select Aetna EPO Full Rider		\$3787.79	\$3787.79	<input type="checkbox"/>
Select CIGNA Basic		\$1880.70	\$1880.70	<input type="checkbox"/>
Select CIGNA Full Rider		\$2467.32	\$2467.32	<input type="checkbox"/>
Select DC37			\$0.00	<input type="checkbox"/>

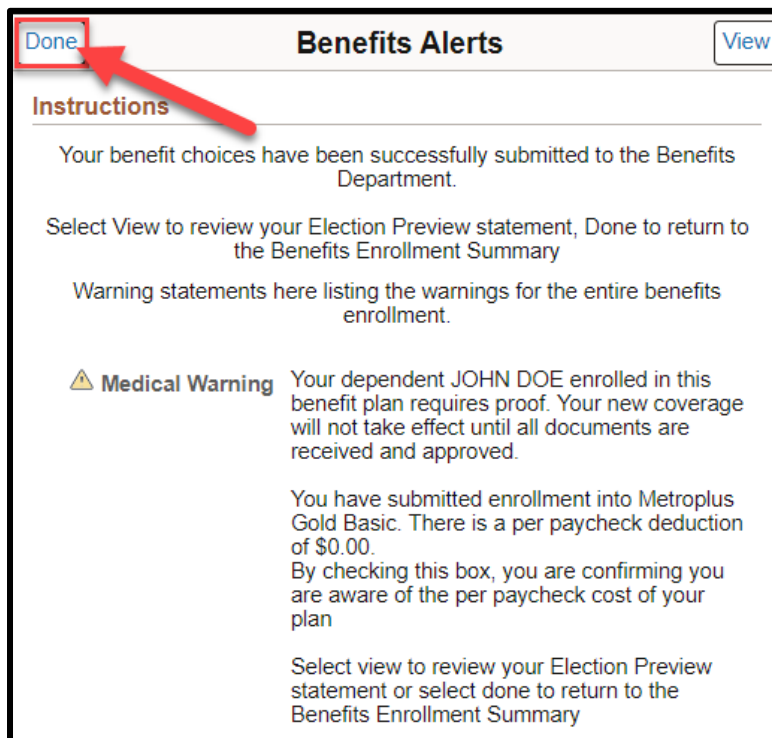
17. You will be prompted to review your new plan and costs. After reviewing click **“Submit Enrollment”**.

The screenshot shows the 'Benefits Enrollment' summary page. At the top, it says 'Your Pay Period Cost \$0.00' and 'Full Cost \$0.00'. Below this, the status is 'Pending Review'. A red arrow points to a 'Submit Enrollment' button. Below the button, there is a 'Benefit Plans' section with a 'Medical' tab selected. Under the 'Medical' tab, it shows 'Current: No Coverage' and 'New: MetroPlus Gold Basic' with a status of 'Changed'. At the bottom, it says 'Pay Period Cost \$0.00' and has a 'Review' button.

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

Finalizing/Submitting Enrollment

18. You will receive a Benefits Alerts. Review the content of your alert and Click the **“DONE”** button.



[Done](#)

Benefits Alerts


[View](#)

Instructions

Your benefit choices have been successfully submitted to the Benefits Department.

Select View to review your Election Preview statement, Done to return to the Benefits Enrollment Summary

Warning statements here listing the warnings for the entire benefits enrollment.


Medical Warning Your dependent JOHN DOE enrolled in this benefit plan requires proof. Your new coverage will not take effect until all documents are received and approved.

You have submitted enrollment into Metroplus Gold Basic. There is a per paycheck deduction of \$0.00.

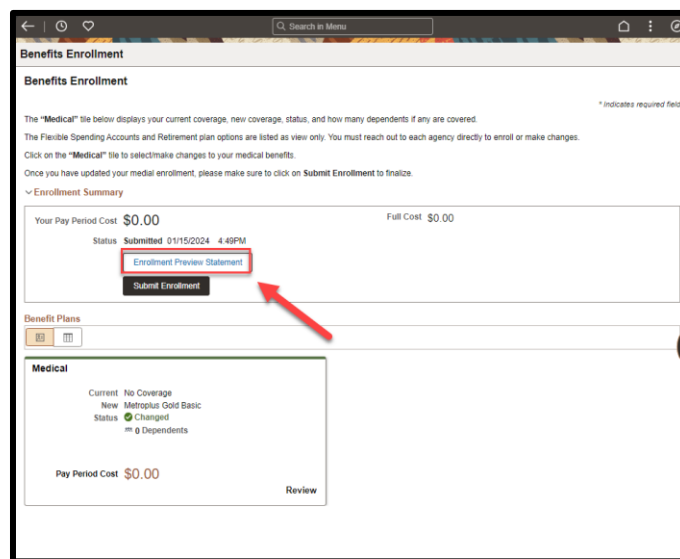
By checking this box, you are confirming you are aware of the per paycheck cost of your plan

Select view to review your Election Preview statement or select done to return to the Benefits Enrollment Summary

How to Enroll into Health Benefits via Employee Self Service: (Family Coverage)

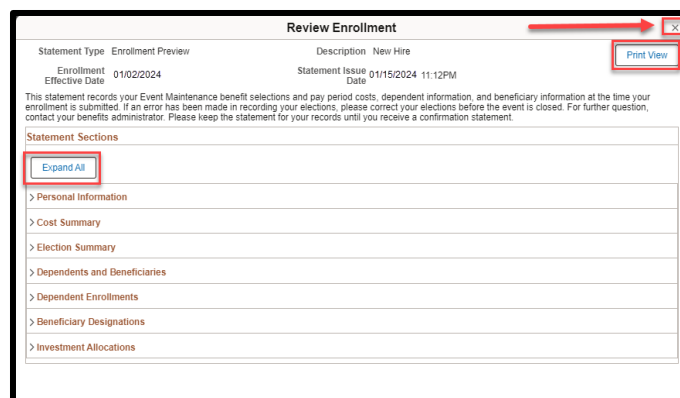
Enrollment Preview Statement

You may also review your enrollment by clicking “**Enrollment Preview Statement**”



The screenshot shows the 'Benefits Enrollment' page. At the top, there's a search bar and a 'Search in Menu' button. Below that, the 'Benefits Enrollment' section contains instructions and a summary. The 'Enrollment Summary' section shows 'Your Pay Period Cost: \$0.00' and 'Full Cost: \$0.00'. The status is 'Submitted 01/15/2024 4:49PM'. A red box highlights the 'Enrollment Preview Statement' button, and a red arrow points to it. Below this, the 'Benefits Plans' section shows the 'Medical' plan with 'Current: No Coverage' and 'New: Metroplus Gold Basic'. The status is 'Charged' and '0 Dependents'. The 'Pay Period Cost' is '\$0.00' and there is a 'Review' button.

You may review and print your enrollment. **Expand All** to view your personal information, cost summary, election summary, dependent and beneficiaries, dependent enrollments/status of enrollment, beneficiary designations, investment allocation.



The screenshot shows the 'Review Enrollment' page. At the top, there's a 'Print View' button. Below that, the 'Statement Type' is 'Enrollment Preview' and the 'Description' is 'New Hire'. The 'Enrollment Effective Date' is '01/02/2024' and the 'Statement Issue Date' is '01/15/2024 11:12PM'. A red box highlights the 'Expand All' button, and a red arrow points to it. Below this, the 'Statement Sections' list includes 'Personal Information', 'Cost Summary', 'Election Summary', 'Dependents and Beneficiaries', 'Dependent Enrollments', 'Beneficiary Designations', and 'Investment Allocations'.

If you have any questions about your elections you can contact HRSS/NYC Heath + Hospitals Corporate Benefits by phone at (646) 458-5634 or by email at HHCBenefits@nychhc.org.