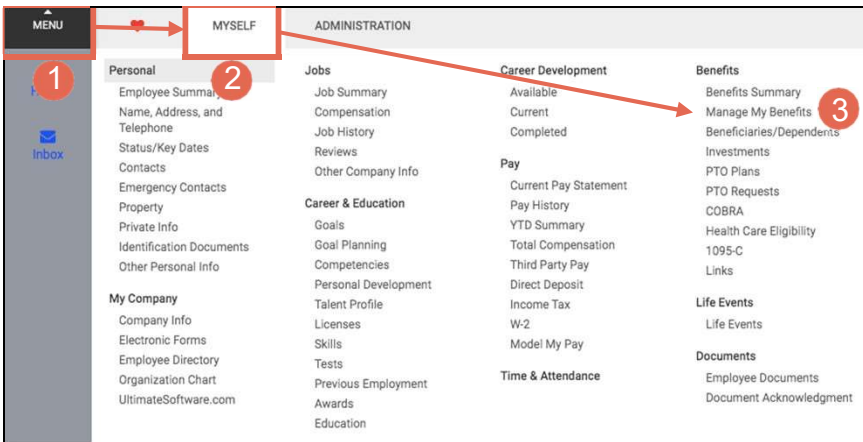


# ANNUAL ENROLLMENT

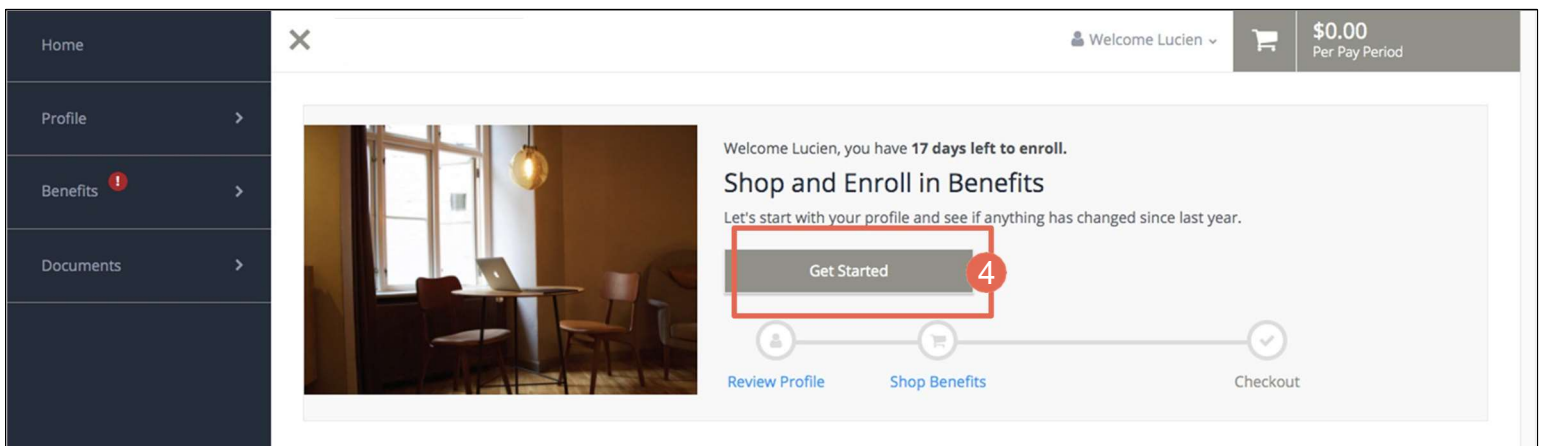
Annual Enrollment refers to the period during which you can enroll in a benefits plan. During this process, you will review information for you and your family, shop for available benefits, select benefit plans, and review and confirm benefit plan selections.

**Annual Enrollment runs from October 28 through November 8, 2024, for benefits that will be effective January 1, 2025.**

**PLEASE NOTE: You must complete your Annual Enrollment by November 8, 2024, to ensure that you will have the benefits you want for 2025.**



1. Select **Menu**.
2. Hover over **Myself**.
3. Under Benefits, select **Manage My Benefits**.
4. Select **Get Started**.



# ANNUAL ENROLLMENT

Welcome Lucien | \$0.00 Per Pay Period

### Manage your profile

Make sure we have it right!  
This info is used for your paycheck, taxes and ID cards. If you have any adjustments, please click the "Menu" button on the top left of your screen and select the "Employee Summary" under the "Personal" heading.

Basic Information	
First Name Lucien	Middle Name
Last Name TEST9902	SSN 834-53-5119

Contact Information	
Address 1 123 Main Street	Address 2
City Evermore	State Texas
Zip 12345	Home Phone
Office Phone	E-mail * <small>You must specify a value</small>
Alternate E-mail	

Personal Information	
Gender Male	Marital Status Married

5. Fill in any necessary personal information. Required fields are marked by asterisks.
6. Scroll to the bottom of the screen and click **Save**, then **Review My Family**.



Welcome Lucien | \$0.00 Per Pay Period

### Manage your family members

View, add, edit or remove dependents here. If you add a new family member, the family member won't be added to your benefits automatically. You still need to add the family member to any applicable benefits.

#### Current Family Members

<p>Chrissy TEST9902 Spouse Born 11/04/1981</p> <p><a href="#">View Details</a></p> <p><a href="#">Remove</a> <a href="#">Edit</a> <a href="#">Remove</a> <a href="#">Edit</a></p>	<p>Krista TEST9902 Child Born 08/31/2011</p> <p><a href="#">View Details</a></p>	<p><a href="#">+ Add Family Member</a></p>
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< Back | Next: Shop for Benefits

7. In this section, *Manage your family members*, you can:
  - A. Review or edit the Dependent information on file for Current Family Members by clicking **Edit**.

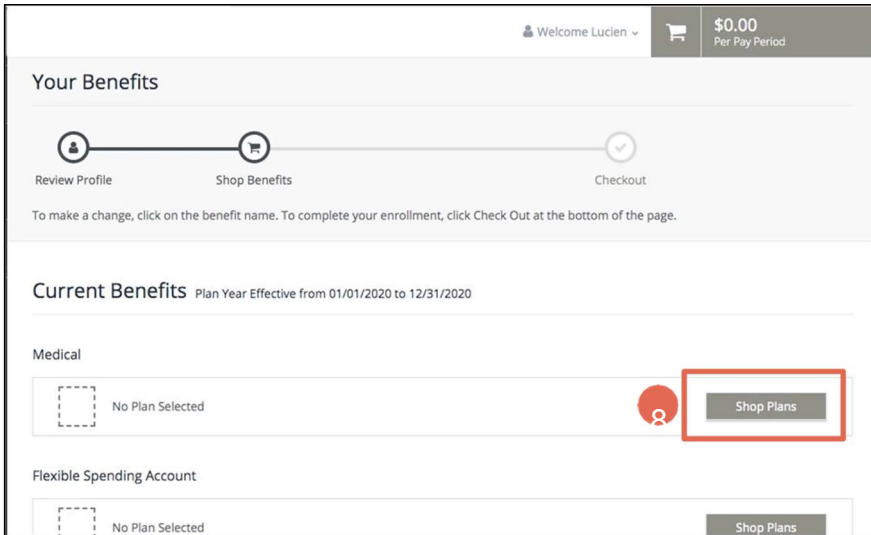
**Important:** Confirm that family members' social security numbers are listed and correct. Click **View Details** on each family member to verify the social security number listed.

- B. Add a family member as a dependent by selecting **Add Family Member**.

When all family information is correct, select **Next: Shop for Benefits**.



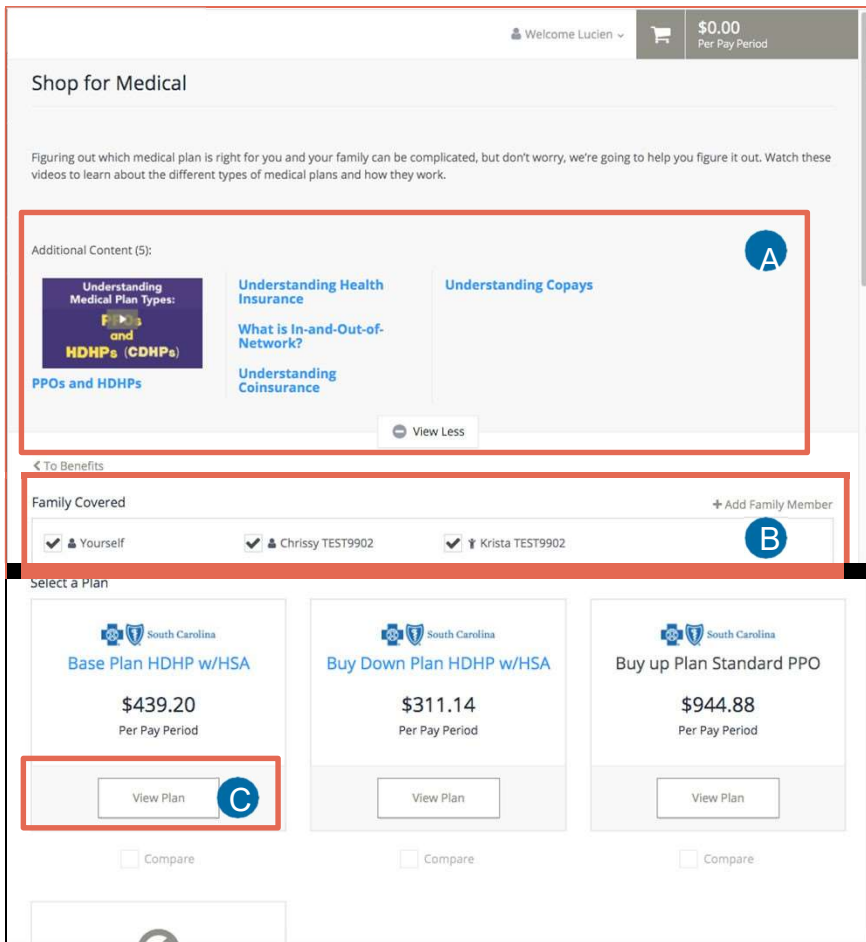
# ANNUAL ENROLLMENT



8. At the *Your Benefits* section, select the **Shop Plans** button for each of the benefit plans available to you (for example, Medical, Dental, Vision), as applicable.

### Note:

- Your current elections will be shown on the election page.
- You must re-enroll in medical, flex accounts, and HSA in order to continue those benefits.
- You do not need to re-enroll for all other plans unless you wish to make changes.



### For each plan:

- A. The top of each plan will show you a list of available resources to understand the benefits. Videos, articles, and more can be accessed here.
- B. The **Family Covered** option enables you to select or deselect family members to include in the elected benefits plan.
- C. To view details of one plan, click **View Plan**.

### Note:

- Your view may differ depending on your company.

# ANNUAL ENROLLMENT

Medical: Base Plan HDHP w/HSA

< To Available Plans

Family Covered + Add Family Member

Family Member	Coverage Option	Cost
<input checked="" type="checkbox"/> Yourself	Employee	\$75.40 Per Pay Period
<input checked="" type="checkbox"/> Chrissy TEST9902	Employee + Spouse	\$300.48 Per Pay Period
<input checked="" type="checkbox"/> Krista TEST9902	Employee + Child(ren)	\$267.60 Per Pay Period
	Employee + Family	\$439.20 Per Pay Period

South Carolina  
Base Plan HDHP w/HSA  
\$439.20  
Per Pay Period

**A** Update Cart

**B** Decline Medical Benefits

**9**

9. From each plan, add or decline the benefit.

A. To add or change a benefit, select **Update Cart**.

B. To decline a benefit, select **Decline**. You may be prompted to enter a reason for declining the benefit.

Repeat this process for all available benefits. As you go through the elections, you will see a running total of cost per pay period appear in the top right of your screen.

# ANNUAL ENROLLMENT

You must select or decline all coverages before moving on **10** Next: Review Beneficiaries

MetLife Supplemental Employee Life Coverage amount \$0.00

**Primary Beneficiaries (Required \*)**  
You must designate a primary beneficiary for this benefit.

**11** + Add Beneficiary

Would you like to add secondary beneficiaries? No Yes

10. If you have elected a benefit that requires a designated beneficiary, click **Next: Review Beneficiaries**.

**Beneficiaries:** A beneficiary can be:

- A current dependent
- A new beneficiary
- A secondary beneficiary

11. From Manage Your Beneficiaries, select **Add Beneficiary**.

**12** X Add Beneficiary

Select an existing beneficiary from the drop-down menu or enter a new beneficiary's information below.

Mardell TEST27179

or create a new one

Name \* **A**  
Mardell TEST27179

Relationship \*  
Spouse

Allocation \* **B**  
100

Address 1  
123 Main Street

Address 2

City  
Evermore

**C** Add Cancel

12. Add Beneficiary Window:
  - A. Enter their information into the available fields, as needed.
  - B. Add an allocation amount for the beneficiary. The combined allocation amount for beneficiaries must add up to 100%.
  - C. Click **Add**.
13. Repeat 12A-12C for secondary beneficiaries.

MetLife Supplemental Employee Life Coverage amount \$0.00

**Primary Beneficiaries (Required \*)**  
You must designate a primary beneficiary for this benefit.

Mardell TEST27179, Spouse Allocation 100%

+ Add Beneficiary Allocation Total: 100%

Would you like to add secondary beneficiaries? No Yes

# ANNUAL ENROLLMENT

Coverage Declined View or Change Plan

Basic Short Term Disability

**MetLife** Basic Short Term Disability View or Change Plan

Basic Long Term Disability

**MetLife** Basic LTD View or Change Plan

Employer Contribution	\$1,718.41
Your Cost Per Pay Period	\$705.76

You must select or decline all coverages before **14**

**Review and Checkout**

14. Once each benefit has been elected and beneficiaries have been assigned, click **Review and Checkout**. You will see your benefit elections.

Welcome Lucien \$705.76  
Per Pay Period

### Confirm your Benefit Elections

Review Profile Shop Benefits Checkout

Last Step! Take a few moments and check things over. If it looks good, then click Checkout at the bottom and you'll be all set. If not, click on Your Benefits to make changes. If we have an e-mail address on file for you, you can send yourself an email that contains your confirmation statement.

By the way, if you get married, unmarried or have a baby, come back and let us know! We want to make sure you have the right benefits for your family - no matter what size. Watch the video below to learn more and making a change to your benefits.

**15**

### Current Benefits

Plan Year Effective from 01/01/2020 to 12/31/2020

#### Review Changes

Medical

**South Carolina** Base Plan HDHP w/HSA \$439.20  
Per Pay Period

**A** View or Change Plan

**B** Checkout

[Back](#)

15. Review your benefit elections.  
 A. If changes are required, click **View or Change Plan** for any benefit you wish to change.  
 B. When all elections are correct, click **Checkout**.

Welcome Lucien \$705.76  
Per Pay Period

### Current Benefit Elections

**Enrollment Complete!**

You have completed the open enrollment process and confirmed your benefits.

Need a copy of your benefits confirmation statement? **Send by Email** **16**

Review Profile Shop Benefits Checkout

The coverage details listed below are the current active elections on file for you and your dependents.

- If you believe there is an error in your statement, please contact your Benefits Administrator.
- If you need to make changes due to a qualifying life event, please click on the Life Event link.

Click on the icons below to print your confirmation statement or generate a pdf file.

16. The Enrollment Complete screen will appear and a summary of your benefit elections will be available.

# ANNUAL ENROLLMENT

Your To-Do List 1 0 of 1 Complete

Answer a few short health questions to complete your application for MetLife benefits. 14

**Current Benefits** Plan Year Effective from 01/01/2020 to 12/31/2020 [Download](#) [Email](#) [Print](#)

Below are your new elections. Benefit elections may be changed during your company's Open Enrollment or if you've had a Qualifying Life Event.

**Medical**

South Carolina	Base Plan HDHP w/HSA	\$300.48 Per Pay Period	<a href="#">View or Change Plan</a>
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**Health Savings Account**

NueSynergy	Health Savings Account	\$675.00 Per Pay Period	<a href="#">View or Change Plan</a>
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17. Your **To-Do List** will include any additional items that need your attention. These items must be completed by November 11<sup>th</sup>.

Need to make a change to your elections after submitting? Benefit elections can be changed throughout the Annual Enrollment period (October 28<sup>th</sup> through November 8<sup>th</sup>). After, November 8, 2024, no further changes will be allowed unless you have a qualified life event.

To make a change during the Annual Enrollment period, access your elections by selecting Menu → Myself → Manage My Benefits. Click **View Confirmation**. Click **View or Change Plan**, then follow steps 15-17 to check out.