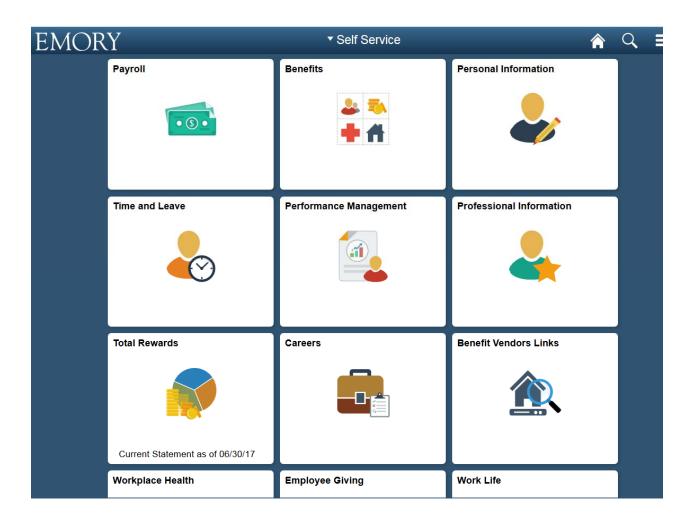
Guide to Benefits Enrollment

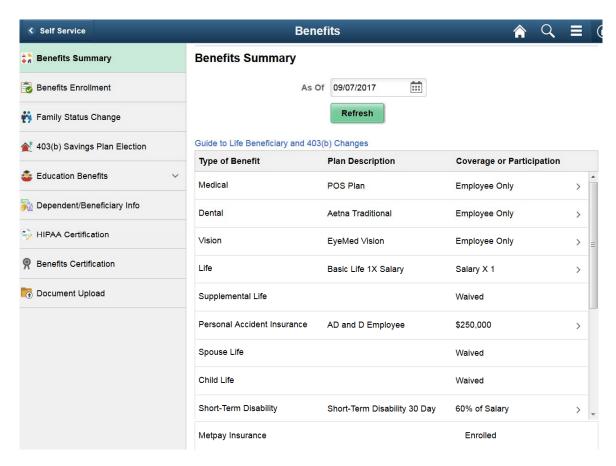
Whether you are enrolling in benefits due to a job related event such as Hire/Rehire or Annual Enrollment, or if you have experienced a Family Status Change such as marriage or birth and need to enroll dependents, Employee Self Service can walk you through the process.

To enter your benefit elections click on the **Benefits** tile under Self Service. The Benefits page will open with options for **Benefits Summary**, **Benefits Enrollment** and **Family Status Change**.

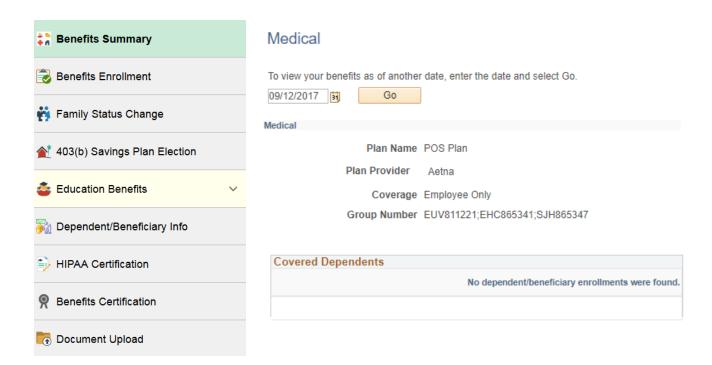


•Benefits Summary displays your current enrollment in the benefit plans, covered dependents and beneficiary data previously elected within self service. You may update beneficiary data for your life plans under this link.

You may also start, stop, and change 403b contributions on self service under 403(b) Savings Plan Elections. 457b plans are excluded from online entry. Please see the web site for information on changing 457b plans.



*Links to individual plans provide more detail information such as Group Numbers.



• Benefits Enrollment takes you directly into the enrollment panels for open events.

Benefits Enrollment for Emory University

If you have a current event open for Benefits Enrollment it will be listed below and you may begin enrollment by clicking **Select**. After your initial enrollment, the only time you may change your benefit choices is during Annual Enrollment or a qualified Family Status Change (FSC).

Once you have selected the event, you must **Edit** each plan to add or terminate coverage on yourself or your dependents.

If your enrollment status is closed or if you have other problems entering your elections, please contact the Benefits Department at (404) 727-7613.



If you click on Family Status Change, 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:



Family Status Change Certification

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

How to complete a Family Status Change

1. I certify that I have incurred the following Family Status Change and that I am within 31 days of the event:

Date: 09/12/2017

(Please check one)

107	Man	130	E

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 or Medicaid coverage

Change in dependent care provider or cost for Dependent Care Flexible Spending Account

The following events require documentation. You cannot create any of these events on-line. 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)

09/12/2017 MM/DD/YYYY

Dates to use:

Marriage - Date of Marriage

Newborn - Date of Birth

· Adoption - Date Child is Placed in Home

 Dependent loses Eligibility - Date they no longer qualify as a dependent. (For example, if you divorce, the event date is the Date of Divorce.)

3. My dependent(s) meets 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 with notarized SSDP Agreement
 Same-Sex Domestic Partner's Son or Daughter with notarized SSDP Agreement

Please Note

Some dependent changes may require verification and proof relationship, i.e. dependents with
different last names and Same-Sex Domestic Partners. If verification is requested and not
provided by the deadline, coverage for that dependent will be terminated retro-active back to the
event date. The Benefits Department will contact you if additional information is needed.

Unmarried children are eligible up to age 26.

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 - action must be consistent with the Family Status Change selected above)

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 I may be asked for documentation at anytime supporting the changes that I have made have occurred with 31 days of the event and the persons listed on the coverages fall within Emory's definition of eligible dependents. If I choose not to certify the data above, I may click the browser Back button to exit this page.

Accept



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.

Please answer the questions below and click Accept to continue to your Benefits Enrollment.

El	JV Benefits Certification
Plea	ase respond to determine if the tobacco surcharge applies to you.
Н	ave you used any tobacco products in the last 60 days?
Ans	swer
0	Yes
0	No
	as your spouse\partner used any tobacco products in the last 60 days?
Sel	ection
	Yes
	No
1	Do not have a spouse\partner

To begin enrollment, click Select

Benefits Enrollment for Emory University

If you have a current event open for Benefits Enrollment it will be listed below and you may begin enrollment by clicking **Select**. After your initial enrollment, the only time you may change your benefit choices is during Annual Enrollment or a qualified Family Status Change (FSC).

Once you have selected the event, you must Edit each plan to add or terminate coverage on yourself or your dependents.

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Benefits Enrollment						
Event Description	Event Date	Event Status	Job Title			
Family Status Change	08/31/2017	Open		Select		