

Saratoga Hospital 2019 Open Enrollment

Step-by-Step Guide for Completing the Online Open Enrollment Process in UltiPro

Online Open Enrollment is Available
Monday, October 29th – Wednesday, November 21st



Open Enrollment Steps

Review your current benefit elections

Changes that require your action:

- Flexible Spending Accounts: If you have a flexible spending account, **you must make new elections. Current elections will not roll over to the new calendar year.**
- To add, change or remove a dependent: You will not be able to make these changes in your open enrollment session. In UltiPro, go to Menu/Myself/Contacts. Submit dependent changes for Benefit Administrator review. Once approved, you can then go back into your open enrollment session to make benefit updates.

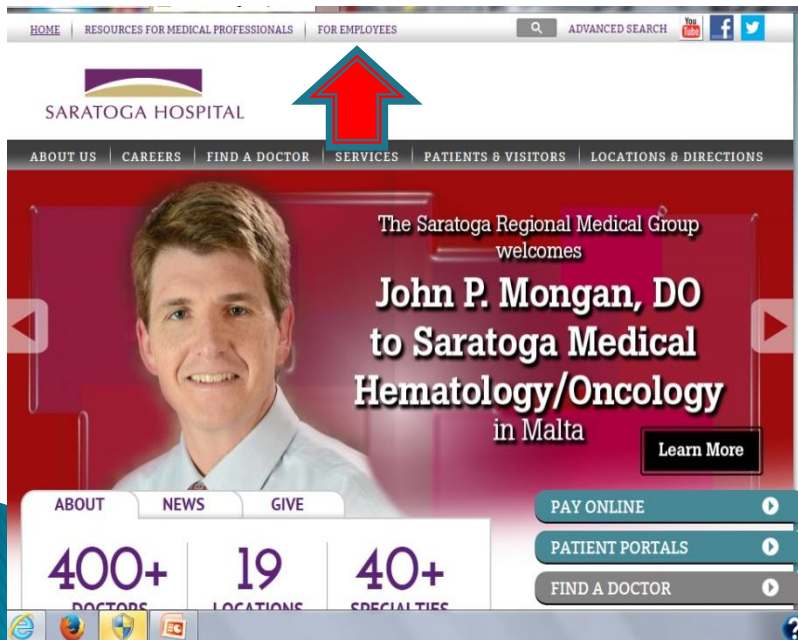
If neither of these changes apply to you, then you don't need to take any action through the online enrollment. Your current coverage will continue into the next year at the applicable rates.

NOTE: The dollar amounts and dates used throughout this guide are for illustrative purposes only and do not reflect the 2019 premiums or dates for enrollment.

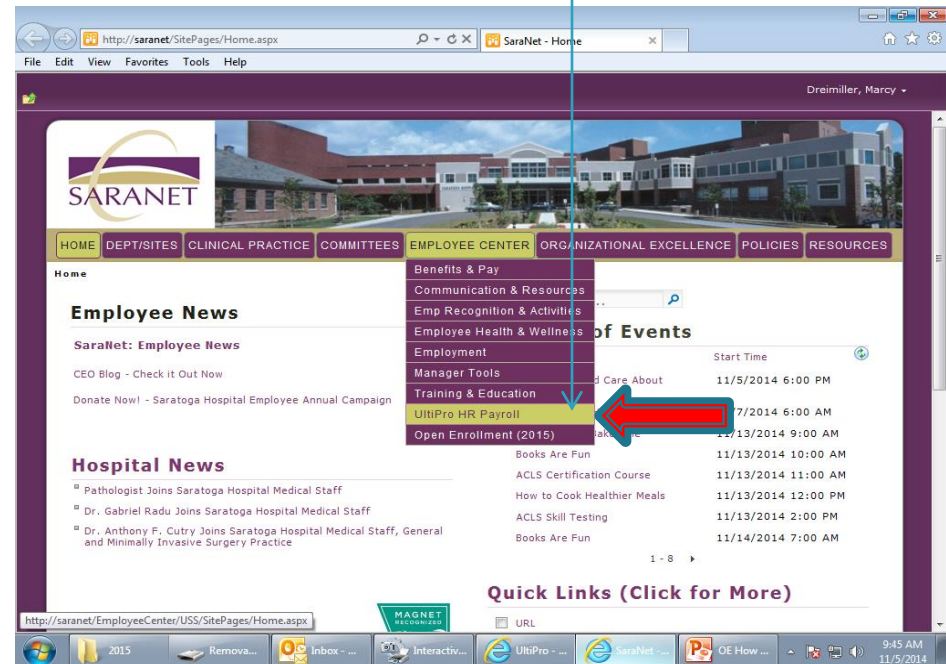
Getting Started: Accessing UltiPro

There are two ways to access your UltiPro account:

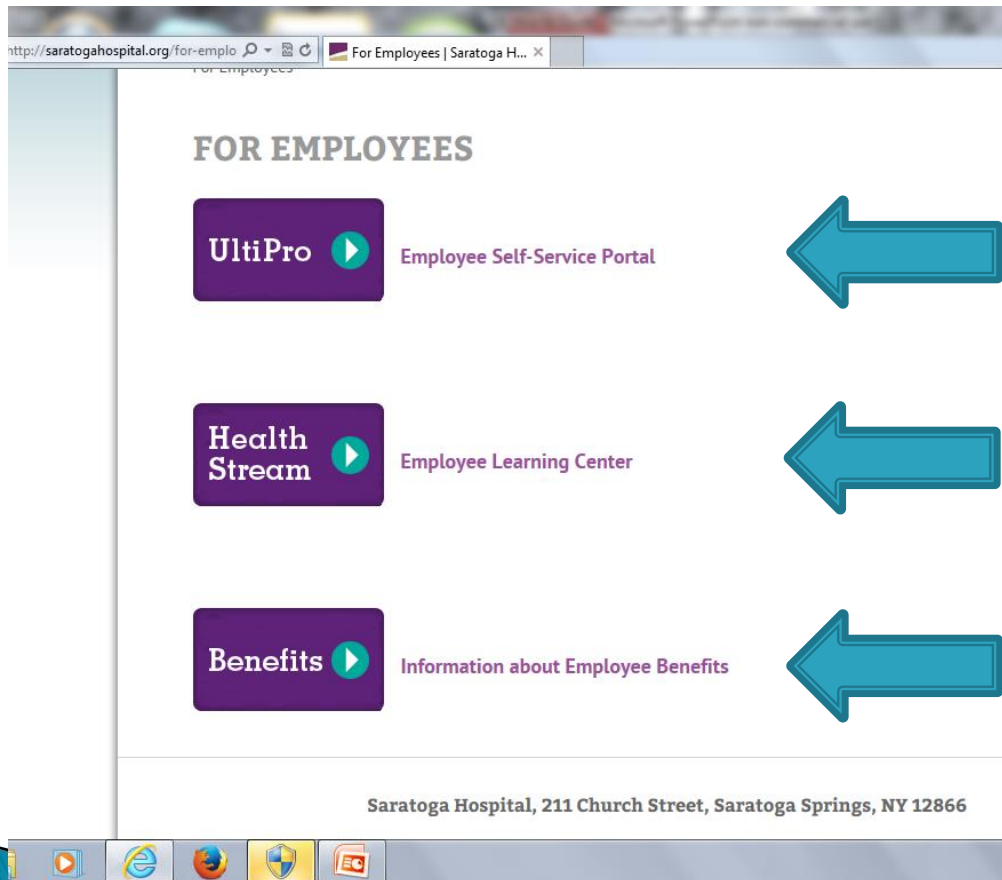
1. From any computer, inside or outside of the hospital, go to the hospital website at www.saratogahospital.org and click on the *For Employees* tab at the top



2. From inside the hospital, go to SaraNet and click on the UltiPro link from the Employee Center Page



Accessing UltiPro from the Hospital Website (www.saratogahospital.org)

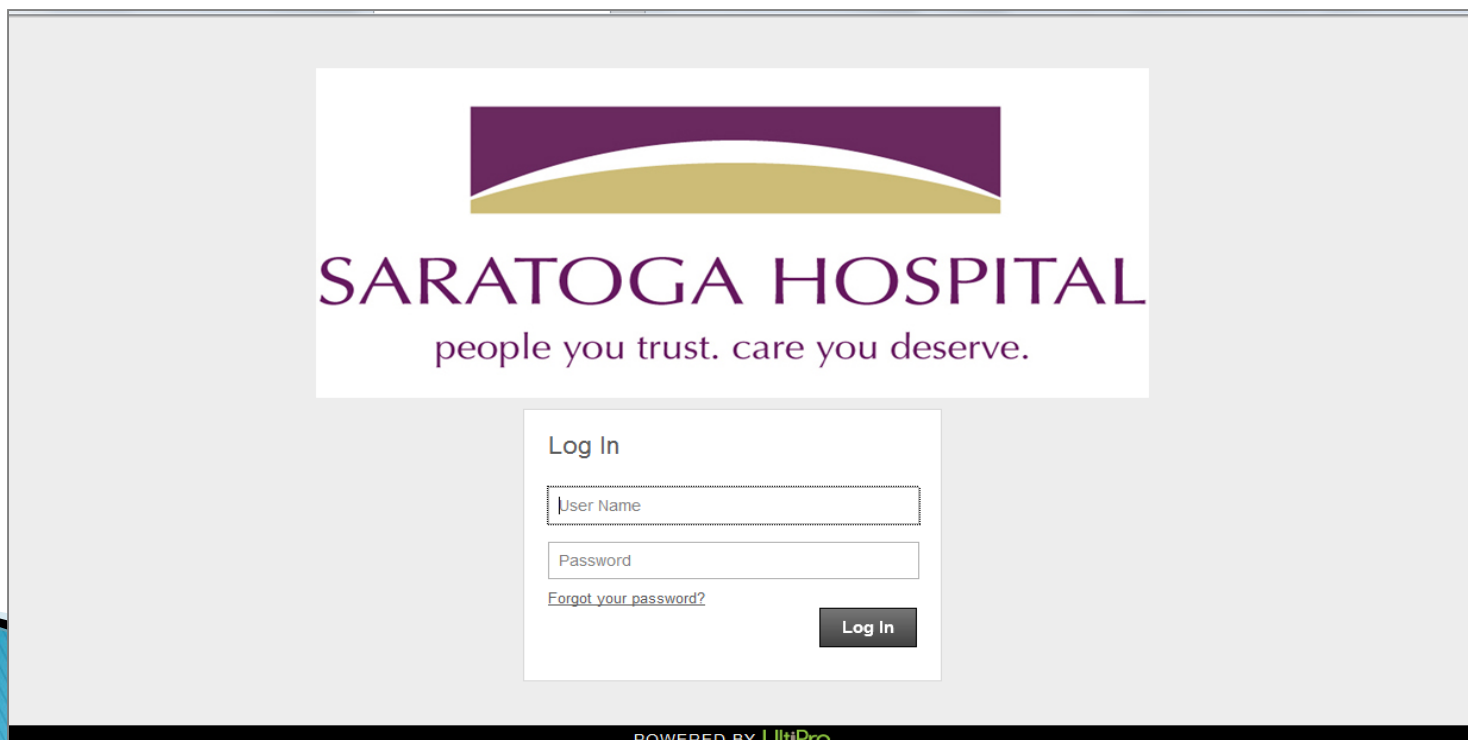



Click on the UltiPro button to access the site.

This page also has a link to the Healthstream Learning System

This link brings you to additional Benefit Plan information for you to reference during open enrollment.


At the UltiPro home page, login using your full hospital email address as your username and if you are logging in for the first time, your date of birth as your password using this format: mmddyyyy. If you need help logging in, contact ultipro@saratogacare.org. If you have already created a new password, continue to use your unique password.




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Log In

[Forgot your password?](#)

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To get ready for open enrollment, log into UltiPro, and move the mouse cursor to the Myself tab on your home page until the drop down menu appears.

Adirondack HOSPITAL
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Home Help Logout

Find...

Myself

- Personal
Name, Address, and Telephone
Contacts
- Jobs
Job Summary
Compensation
Job History
- Pay
Current Pay Statement
Pay History
YTD Summary
Direct Deposit
Income Tax
- Benefits**
Current Benefits
Beneficiaries/Dependents
Investments
PTO Plans
PTO Requests
COBRA
Health Care Eligibility
Links
- Open Enrollment

Pay
Last pay date
11/06/2014
View pay statement

Direct Deposit

Contacts

Name, Address, and Telephone

Income Tax

To view current benefits, click on Current Benefits

To start open enrollment, click on Open Enrollment

When you click on Current Benefits, this is the page that will display your current benefit elections.

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https://e22.ultipro.com/default.aspx

Inbox Share Ideas Help Logout

Requests Myself My Team My Company Employee Admin Payroll Processing Reporting Business Intelligence Transfer Data Recruitment Talent Management Benefits Admin Payroll Adm Find...

Personal Jobs Career & Education Career Development Pay **Benefits** Open Enrollment Life Events Documents

Current Benefits Beneficiaries/Dependents Investments PTO Plans PTO Requests COBRA Health Care Eligibility Links

Current Benefits Summary

Benefit seniority date: 11/23/2009

print help

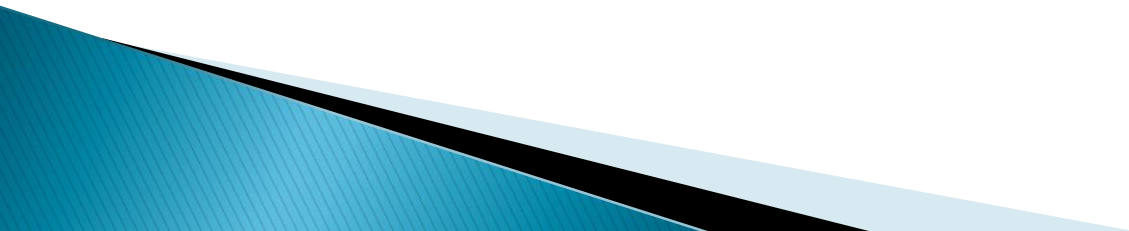
Quick Tours and Tips
Benefits Section Overview

Benefit ^	Plan	Coverage	Coverage		Employee		Employer		▼
			Start	Stop	Last	YTD	Last	YTD	
Deferred Comp(USA)	403 B Catchup	5.00 %	01/01/2014		\$533.10	\$17,118.02	\$0.00	\$0.00	
Dental	FT Dental Comprehensive	Family	01/01/2014		\$15.80	\$363.40	\$29.06	\$290.60	
Flexible Spending Account	Med Reimb Flex Spend	\$60.00	01/01/2014		\$60.00	\$1,380.00	\$0.00	\$0.00	
Group Term Life Insurance	Excess Life	1.0000	11/23/2009		\$0.00	\$0.00	\$0.00	\$0.00	
Medical	FT HEALTH INSURANCE	Family	07/01/2014		\$161.62	\$1,454.58	\$385.52	\$3,469.68	
Miscellaneous	Guild	\$0.00			\$35.00	\$70.00	\$0.00	\$0.00	
Miscellaneous	Cafe Charges	\$0.00			\$33.19	\$914.66	\$0.00	\$0.00	
Miscellaneous	Comm Health Ctr	\$29.00			\$21.00	\$514.00	\$0.00	\$0.00	
Miscellaneous	Foundation	\$40.00			\$40.00	\$800.00	\$0.00	\$0.00	

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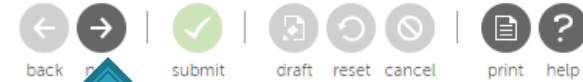
7:30 PM 11/4/2014

Starting the Open Enrollment Process



On the open enrollment home page, a notice will tell you how many days are left to submit your elections.

rollment



You currently have 30 days remaining to submit your elections for this open enrollment session

Welcome to Open Enrollment. Open enrollment is the one time a year opportunity for you to review and make changes to your benefit elections. The Open Enrollment period runs from October 29 - November 21, 2018. You can only make changes during this period. All elections must be made before the end of the day on November 21st. If you are not making any changes, you will be automatically enrolled in the same benefits at the applicable rates. Information on how to make your elections is available on the Employee Center/Open enrollment or on the hospital website by clicking on the following link:

<http://saranet/EmployeeCenter/Benefits/SitePages/Open%20Enrollment.aspx>

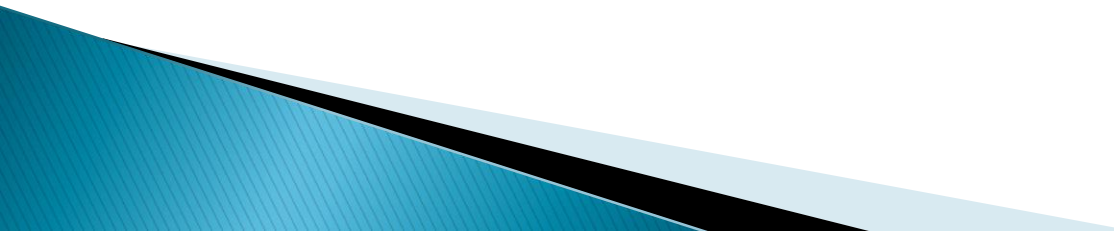
To navigate through the pages, click on the “next” and “back” arrows.

The left hand side displays the list of benefits in which you are eligible to enroll. You can go directly to any of the benefits by clicking on the specific plan.

This link will bring you to info and resources on the hospital website.

- Medical
- Dental
- Vision
- Flexible Spending Account
 - Med Reimb Flex Spend
 - Dependent Care Flex Spend
- Voluntary Short Term DBL
- Employee Supplemental Life
 - OE Supplemental Term Life Insurance
- Spousal Supplemental Life
 - OE Supplemental Term Life Spouse
- Child Supplemental Life
 - OE Term Life Child
- Additional
 - OE AFLAC Accident
 - OE AFLAC-CA
 - OE Aflac Hospital Indemnity

Verifying Beneficiaries and Dependents



The beneficiary and dependent page provides current information.

Employee Open Enrollment
2015 Open Enrollment

- Steps
- About Open Enrollment
- Verify Beneficiary And Dependent Information
- Medical
- Prescription Drug
- Dental
- Vision
- Flexible Spending Account
- Med Reimb Flex Spend
- Dependent Care Flex Spend
- Voluntary Short Term DBL
- Employee Supplemental Life
- Spousal Supplemental Life
- Child Supplemental Life
- Other

Verify Beneficiary and Dependent Information

|
 |
 |
 |

Find by

Name ^	Relationship	Designation
<input type="text"/>	Daughter	<input type="checkbox"/> Beneficiary <input checked="" type="checkbox"/> Dependent <input type="checkbox"/> Emergency contact
<input type="text"/>	Spouse	<input type="checkbox"/> Beneficiary <input checked="" type="checkbox"/> Dependent <input type="checkbox"/> Emergency contact
<input type="text"/>	Daughter	<input type="checkbox"/> Beneficiary <input checked="" type="checkbox"/> Dependent <input type="checkbox"/> Emergency contact

NEW THIS YEAR: You will not be able to add, change or remove a dependent from within your open enrollment session. To do so, go to Menu/Myself/Contacts in UltiPro. Submit dependent changes for Benefit Administrator review. Once approved, you can then go back into your open enrollment session to make benefit updates.

Benefit Plans

Medical/RX, Dental and Vision Plans

Each plan has an individual page that provides:

- ▶ A brief plan description
- ▶ Your current election, cost and coverage
- ▶ Cost and election section
- ▶ A link to additional info and resources

A brief description is provided for each plan. If you click on your current option box on the right hand side, the box will display your current cost, coverage option and enrolled dependents.

- About Open Enrollment
- Verify Beneficiary And Dependent Information
- Medical**
- Dental
- Vision
- Flexible Spending Account
 - Med Reimb Flex Spend
 - Dependent Care Flex Spend
- Voluntary Short Term DBL
- Employee Supplemental Life
 - OE Supplemental Term Life Insurance
- Spousal Supplemental Life
 - OE Supplemental Term Life Spouse
- Child Supplemental Life
 - OE Term Life Child
- Additional
 - OE AFLAC Accident
 - OE AFLAC-CA

Select a Plan

Use the options below to choose or decline a plan.

Health and Prescription coverage are administered by CDPHP. You will receive one benefit card for both health and prescription. Rates shown for this plan include both health and prescription costs.

There are two plan options with different individual deductibles and out of pocket maximums. Please review the individual plan options to determine which one is best for you. For a complete summary of benefit coverage, applicable copayments, deductibles, coinsurance and out of pocket maximums, go to SaraNet/Employee Center/Benefits & Pay or click on the following link for resources located on the hospital website: <http://saratogahospital.org/information->

[Read more](#)

I decline Medical plans.

FT 250 Ded Hlth w/Rx

Options

- | | |
|--------------------------------------|----------|
| <input type="radio"/> Employee | \$58.11 |
| <input type="radio"/> Employee + One | \$204.34 |
| <input type="radio"/> Family | \$284.71 |

[back](#) [next](#) [submit](#) [draft](#) [reset](#) [cancel](#)

[print](#) [help](#)

Click Here

Current Plan
as of 12/31/2018

▶ FT 500 Ded Hlth w/Rx



▼ **FT HEALTH INSURANCE**

Your cost

Option

Family

Plan Dependents

You can elect coverage for yourself, one dependent (this includes spouse, child or domestic partner), or family. If electing

You may need to scroll down on the page to see additional information on the benefit plan and view the cost section.

- About Open Enrollment
- Verify Beneficiary And Dependent Information
- Medical**
- Dental
- Vision
- Flexible Spending Account
 - Med Reimb Flex Spend
 - Dependent Care Flex Spend
- Voluntary Short Term DBL
- Employee Supplementl Life
 - OE Supplemental Term Life Insurance
 - Spousal Supplemental Life
 - OE Supplemental Term Life Spouse
- Child Supplemental Life
 - OE Term Life Child
- Additional
 - OE AFLAC Accident
 - OE AFLAC-CA
 - OE Aflac Hospital Indemnity

Medical

Select a Plan

Use the options below to choose or decline a plan.

Health and Prescription coverage are administered by CDPHP. You will receive one benefit card for both health and prescription. Rates shown for this plan include both health and prescription costs.

There are two plan options with different individual deductibles and out of pocket maximums. Please review the individual plan options to determine which one is best for you. For a complete summary of benefit coverage, applicable copayments, deductibles, coinsurance and out of pocket maximums, go to SaraNet/Employee Center/Benefits & Pay or click on the following link for resources located on the hospital website: <http://saratogahospital.org/information->

[Read more](#)

I decline Medical plans.

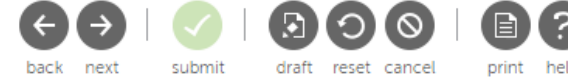
Do not select the decline Box unless you want to drop coverage.

FT 250 Ded Hlth w/Rx

Options

- | | |
|--------------------------------------|----------|
| <input type="radio"/> Employee | \$58.11 |
| <input type="radio"/> Employee + One | \$204.34 |
| <input type="radio"/> Family | \$284.71 |

← Sample Cost



Current Plan
as of 12/31/2018

► FT 500 Ded hlth w/Rx

FT 250 Ded Hlth w/Rx Plan Information

You can elect coverage for yourself, one dependent (this includes spouse, child or domestic partner), or family. If electing coverage for



Steps

About Open Enrollment

Verify Beneficiary And
Dependent Information

Medical

Dental

Vision

Flexible Spending Account

Med Reimb Flex Spend

Dependent Care Flex Spend

Voluntary Short Term DBL

Employee Supplemental Life

Spousal Supplemental Life

Child Supplemental Life

Other

Voluntary Legal Plan

AFLAC-CA

AFLAC Accident

Liberty Mutual

Whole Life

Vision



Select a Plan

Use the options below to choose or decline a plan.

A comprehensive vision plan is offered through Davis Vision. The plan provides for annual eye exams with a \$10.00 copay, new lens purchased annually and new frames purchased every two years.

Current Plan

as of 12/27/2014

► Vision Insurance

If you are electing a plan for the first time, click on the circle next to the plan title. Select coverage (employee, employee + One or family).

Decline Vision plan

Vision Insurance

Options

- Employee \$2.87
- Employee + One \$5.16
- Family \$8.03

Sample Cost

Vision Insurance Plan Information

This comprehensive vision plan provides an annual eye exam at a \$10.00 copay, lens



If you are changing the level of coverage, want to take a dependent off your plan or add a dependent to the plan, click on the circle next to the plan title, then click on the coverage option you want.

- About Open Enrollment
- Verify Beneficiary And Dependent Information
- Medical
- Dental
- Vision
- Flexible Spending Account
- Med Reimb Flex Spend
- Dependent Care Flex Spend
- Voluntary Short Term DBL
- Voluntary Long Term DBL
- Employee Supplemental Life
- Spousal Supplemental Life
- Child Supplemental

Medical

- back
- next
- submit
- draft
- reset
- cancel
- print
- help

I decline Medical plans.

FT HEALTH INSURANCE

\$167.25 Biweekly

Options

- Employee \$31.95
- Employee + One \$120.35
- Family \$167.25

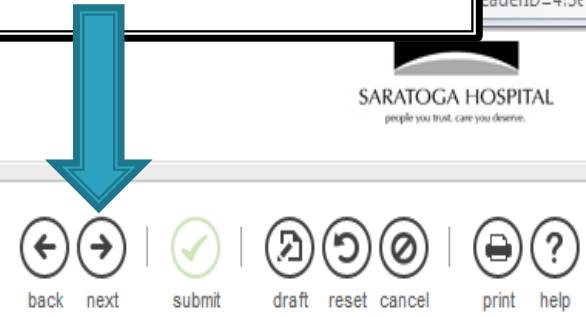
Enroll Dependents

You must enroll between 2 and 99 dependents in the plan.

- [Name Field]
- [Name Field]
- [Name Field]

Your current dependents will appear. Click on the box next to those dependents that you want to be covered under the plan. For anyone that you do not elect, if they have existing coverage, it will end 12/31.

Continue to use the “next” arrow to move through the medical, dental and vision plan options.



- Employee Open Enrollment
- 2015 Open Enrollment
- Steps
 - About Open Enrollment
 - Verify Beneficiary And Dependent Information
 - Medical
 - Dental
 - Vision
 - Flexible Spending Account
 - Med Reimb Flex Spend
 - Dependent Care Flex Spend
 - Voluntary Short Term DBL
 - Employee Supplemental Life
 - Spousal Supplemental Life
 - Child Supplemental Life
 - Other
 - Voluntary Legal Plan
 - AFLAC-CA
 - AFLAC Accident
 - Liberty Mutual
 - Whole Life

Vision

Select a Plan

Use the options below to choose or decline a plan.

A comprehensive vision plan is offered through Davis Vision. The plan provides for annual eye exams with a \$10.00 copay, new lens purchased annually and new frames purchased every two years.

I decline Vision plans.

Vision Insurance

Options

- Employee \$2.87
- Employee + One \$5.16
- Family \$8.03

Current Plan
as of 12/27/2014

► **Vision Insurance**

Vision Insurance Plan Information
This comprehensive vision plan provides an annual eye exam at a \$10.00 copay, lens

Click on the **DRAFT** button to save any changes you have made. You can come back at any time during the open enrollment period to complete your elections or make changes.

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Vision

A comprehensive vision plan is offered through Davis Vision. The plan provides for annual eye exams with a \$10.00 copay, new lenses purchased annually and new frames purchased every two years. For additional information, go to SaraNet/Employee Center/2015 Open Enrollment or click on the following link to bring you to information and resources on the Employee Benefits page of the hospital website: <http://saratogahospital.org/information-about-employee-benefits/>

If you currently have coverage, you do not need to take any action. Your current coverage will continue in 2015. Please note that if you check the "I decline" box below, your existing coverage will end 12/31/2014.

I decline Vision plans.

If you decline coverage or opt not to enroll in vision at this time, you will not be able to enroll until the next open enrollment or unless you experience a qualifying event during the plan year. Once enrolled, you can not make changes or drop coverage during the plan year unless you experience a qualifying event.

more ...

back next submit draft reset cancel print help

Clicking on the **Cancel** Button will exit you from the enrollment process. You can start again but any changes you made will be lost.



- Steps
- About Open Enrollment
 - Verify Beneficiary And Dependent Information
 - Medical
 - Dental
 - Vision
 - Flexible Spending Account
 - Med Reimb Flex Spend
 - Dependent Care Flex Spend
 - Voluntary Short Term DBL
 - Employee Supplemental Life
 - Spousal Supplemental Life
 - Child Supplemental Life
 - Other
 - Voluntary Legal Plan
 - AFLAC-CA
 - AFLAC Accident
 - Liberty Mutual
 - Whole Life
 - Confirm Your Elections Or

Vision

Navigation icons: back, next, submit, draft, reset, cancel, print, help

A comprehensive vision plan is offered through Davis Vision. The plan provides for annual eye exams with a \$10.00 copay, new lenses purchased annually and new frames purchased every two years. For additional information, go to SaraNet/Employee Center/2015 Open Enrollment or click on the following link to bring you to information and resources on the Employee Benefits page of the hospital website: <http://saratogahospital.org/information-about-employee-benefits/>

If you currently have coverage, you do not need to take any action. Your current coverage will continue in 2015. Please note that if you check the "I decline" box below, your existing coverage will end 12/31/2014.

If you elect to decline medical, dental or vision, you will get this message. You will not be able to enroll again until next Open Enrollment, or unless you experience a qualifying event.

I decline Vision plans.

If you decline coverage or opt not to enroll in vision at this time, you will not be able to enroll until the next open enrollment or unless you experience a qualifying event during the plan year. Once enrolled, you can not make changes or drop coverage during the plan year unless you experience a qualifying event.

[more ...](#)

Flexible Spending Plans

Medical Reimbursement and Dependent Care

Flexible Spending Accounts (FSA) allow you to set aside pre-tax dollars to pay for eligible medical, prescription, dental, vision or child care costs.

- ▶ If you have current flexible spending accounts, **you must elect new flexible spending amounts each year. Previous election amounts do not roll over from one year to the next.**
- ▶ If you are electing flexible spending for the first time, you must also indicate the amount desired.
- ▶ The next few slides will demonstrate how to elect flexible spending amounts.

For Medical Reimbursement flexible spending, click on the current plan box to see your current election amount.

The screenshot shows a web interface for a Flexible Spending Account. On the left is a sidebar with a 'Steps' section containing links: 'About Open Enrollment', 'Verify Beneficiary And Dependent Information', 'Medical' (highlighted with a grey box), 'Dental', 'Vision', 'Flexible Spending Account', 'Med Reimb Flex Spend', 'Dependent Care Flex Spend', 'Voluntary Short Term DBL', 'Employee Supplemental Life', 'Spousal Supplemental Life', 'Child Supplemental Life', and 'Other'. The main content area is titled 'Flexible Spending Account' and includes navigation buttons (back, next, submit, reset, cancel, print, help). The 'Current Plan' section shows 'Med Reimb Flex Spend' with a 'Your cost' of '\$60.00 Biweekly'. A blue arrow points from the top callout box to the 'Current Plan' box, and another blue arrow points from the bottom callout box to the 'Your cost' text.

Steps

- About Open Enrollment
- Verify Beneficiary And Dependent Information
- Medical
- Dental
- Vision
- Flexible Spending Account
- Med Reimb Flex Spend
- Dependent Care Flex Spend
- Voluntary Short Term DBL
- Employee Supplemental Life
- Spousal Supplemental Life
- Child Supplemental Life
- Other

Flexible Spending Account

back next submit reset cancel print help

Select a Plan

Use the options below to choose or decline a plan.

Pre-tax flex spending account elections for medical expense reimbursement or dependent care must be made each year during open enrollment. Previous elections do not roll over from one year to the next. You can defer up to \$2,550 for medical reimbursement accounts and up to \$5,000 for dependent care accounts. For more information, go to SaraNet/Employee Center/2015 Open Enrollment or click on the following link to go to the employee benefits page of the hospital website: <http://saratogahospital.org/information-about-employee-benefits/>. Please note that if you check the "I decline" box below, you are declining enrollment in the applicable flex spending accounts.

To make an election, click on the circle next to the plan title. Go to the Goal Amount box. To select an amount different than the maximum allowed, click in the box, delete the amount and enter the annual amount you would like to elect. Click again outside the annual goal amount box and the per pay period amount will display.

Current Plan
as of 12/27/2014

- ▼ **Med Reimb Flex Spend**
Your cost
\$60.00 Biweekly

Directions are provided on how to indicate your election amount

You may need to scroll down to view the election area. To indicate your desired election amount, click in the circle next to the flex spend plan title.

The screenshot shows a web interface for a Flexible Spending Account. On the left is a sidebar with a 'Steps' menu containing: About Open Enrollment, Verify Beneficiary And Dependent Information, Medical, Dental, Vision, Flexible Spending Account, Med Reimb Flex Spend, Dependent Care Flex Spend, Voluntary Short Term DBL, Employee Supplemental Life, Spousal Supplemental Life, Child Supplemental Life, and Other. The 'Flexible Spending Account' step is highlighted. The main content area is titled 'Flexible Spending Account' and includes navigation icons (back, next, submit, draft, reset, cancel, print, help) and a 'more ...' link. A large blue arrow points to the 'Med Reimb Flex Spend' option, which is selected with a radio button. Below it, the amount '\$57.70 Biweekly' is shown. A text box labeled 'Amount Per Pay Period' contains the value '57.70'. Another text box labeled 'Goal Amount' contains the value '1,500.00'. A blue arrow points to this 'Goal Amount' box. A callout box explains that clicking in the goal amount box allows for a change to the annual amount. Below the goal amount, the text '\$1,500.00 annually*' is displayed, with a note '*estimated amounts' below it. A second callout box provides information about the 2019 limit: 'Enter an amount: The maximum limit for 2019 is projected to increase to \$2,700 but has not been finalized. Please watch your email for plan updates.' The Windows taskbar at the bottom shows several open applications: Windows Explorer, Microsoft Office Word, Interactive Services, Internet Explorer, OE How to..., and Microsoft Word. The system clock shows 10:18 AM on 11/5/2014.

decline the Med Reimb Flex Spend plan.

Med Reimb Flex Spend

\$57.70 Biweekly

Amount Per Pay Period

57.70

Goal Amount

Goal amount 1,500.00

Click in the **goal amount** box to make a change to the annual amount. The amount that will be deducted each pay period will be displayed above.

Enter an amount:
The maximum limit for 2019 is projected to increase to \$2,700 but has not been finalized. Please watch your email for plan updates.

and \$1,500.00 annually*

*estimated amounts

You must make an election to either enroll in, or decline, both types of flexible spending accounts; Medical Reimbursement and Dependent Care.

If you fail to do so, you will not be able to submit your elections.



If you want to decline Flexible Spending deductions, click in the box next to the "I decline" statement.

Please note that if you decline flex spending during open enrollment, you will not be able to re-enroll until open enrollment next year.

100%

Benefit Plans

Short Term Disability and Long Term Disability

- ▶ Voluntary Short Term and/or Long Term Disability insurance coverage may be purchased through UNUM.
 - Please review the information on each plan and refer to the resources available on the hospital website or on SaraNet.
- ▶ **If you do not already have voluntary Short Term or Long Term Disability coverage, you may elect coverage during open enrollment, BUT you must complete an online Evidence of Insurability form at the following link:**
<https://securehealth.unum.com/eoiaccess> Employee Access Code: 2CV5NCJ
- **If you currently have voluntary disability coverage and want to continue the benefit, *you do not need to take any action.***

You can find out the benefit amount and cost of coverage by clicking in the small circle next to the plan name. The per pay period amount will display.

- Steps
- About Open Enrollment
 - Verify Beneficiary and Dependent Information
 - Medical
 - Dental
 - Vision
 - Flexible Spending Account
 - Med Reimb Flex Spend
 - Dependent Care Flex Spend
 - Voluntary Short Term DBL
 - Employee Supplemental Life
 - Spousal Supplemental Life
 - Child Supplemental Life
 - Other

Voluntary Short Term DBL



If you currently have coverage, you do not need to take any action. Your current coverage will continue in 2015. **Please note that if you check the "I decline" box below, your existing coverage will end 12/31/2014.**

To determine the cost of coverage, click on the circle below next to the plan title and the per pay period cost will display.

If, after reviewing the cost of the benefit, you decide you don't want the coverage, click reset.

decline Voluntary Short Term DBL plans.

Voluntary Short Term Disability

\$6.03 Biweekly

Sample Cost

Benefit Amount

\$159.38 Per week

This is the weekly benefit you would be paid if you were out on short term disability. It is based on your current salary and scheduled hours.

Benefit Plans

Supplemental Term Life Employee, Spouse and Child

- ▶ If you are interested in term life insurance coverage for yourself, or you would like life insurance coverage for your spouse and/or child/children, Supplemental Term Life Insurance coverage may be purchased through UNUM.
 - Up to \$100,000 for Spouse/Domestic Partners and up to \$300,000 for employees* (*certain limitations apply – review plan document for additional qualifications regarding employee coverage limits)
- ▶ If you do not already have supplemental term life insurance for yourself, your spouse or child, or you are increasing your current coverage above the guaranteed issue amounts, you will have to complete an online **Evidence of Insurability** form by following the link provided during the selection process (<https://securehealth.unum.com/eoiaaccess>) and using **Employee Access Code: 2CV5NCJ**.
- ▶ Follow the same process when electing supplemental term life for a spouse or child as well. You do not need to elect a beneficiary for either of these plans.

To elect this benefit, click on the circle next to the Supplemental Term Life plan. Then go into the 'Desired benefit amount' box and enter the coverage amount you wish to purchase.

The screenshot shows a web application interface for selecting an Employee Supplemental Life insurance plan. On the left is a sidebar with a 'Steps' section and a list of options: About Open Enrollment, Verify Beneficiary And Dependent Information, Medical (highlighted), Dental, Vision, Flexible Spending Account, Med Reimb Flex Spend Dependent Care Flex Spend, Voluntary Short Term DBL, Employee Supplemental Life, Spousal Supplemental Life, Child Supplemental Life, and Other. The main content area is titled 'Employee Supplemental Life' and includes navigation buttons (back, next, submit, draft, reset, cancel, print, help) at the top right. A heading reads 'I decline Employee Supplemental Life plans.' Below this, the 'Supplemental Term Life Insurance' option is selected, indicated by a radio button and a blue arrow pointing to it. A callout box states: 'The biweekly cost of the benefit amount you are requesting will display.' Below this, the 'Desired benefit amount' is set to '\$10,000.00' in a text box, with another callout box pointing to it. A third callout box on the right says: 'If, after reviewing the cost of the benefit, you decide you don't want the coverage, click reset.' The interface also displays the biweekly cost of '\$0.48 Biweekly' and provides additional information: 'The maximum benefit amount value is \$250,000.00', 'Evidence of insurability is required for amounts over \$0.01.', and 'Estimated benefit cost until EOI is approved is .'. A right-hand pane titled 'Supplemental Term Life Insurance Plan Information' contains further details. The Windows taskbar at the bottom shows various open applications and the system clock at 5:18 PM on 11/5/2014.

Employee Supplemental Life

back next submit draft reset cancel print help

I decline Employee Supplemental Life plans.

Supplemental Term Life Insurance

The biweekly cost of the benefit amount you are requesting will display.

\$0.48 Biweekly

Benefit Amount

Desired benefit amount

If, after reviewing the cost of the benefit, you decide you don't want the coverage, click reset.

The maximum benefit amount value is \$250,000.00

Evidence of insurability is required for amounts over \$0.01.

Estimated benefit cost until EOI is approved is .

Supplemental Term Life Insurance Plan Information

Supplemental term life insurance is available in amounts of \$10,000 with coverage up to \$100,000 guaranteed issue. Additional coverage up to \$250,000 subject to medical

100%

The reset button will return your elections back to the original setting.

Employee Open Enrollment
2015 Open Enrollment



- Steps
- About Open Enrollment
 - Verify Beneficiary And Dependent Information
 - Medical
 - Dental
 - Vision
 - Flexible Spending Account
 - Med Reimb Flex Spend
 - Dependent Care Flex Spend
 - Voluntary Short Term DBL
 - Employee Supplemental Life
 - Spousal Supplemental Life
 - Child Supplemental Life
 - Other
 - Voluntary Legal Plan
 - AFLAC-CA
 - AFLAC Accident

Other



Select a Plan

Use the options below to choose a plan.

Additional voluntary benefits are provided to meet the needs of employees and their families. These include: MetLaw/Hyatt Legal Plan, New York Life Insurance, three AFLAC Plans; Critical Care, Accident Indemnity and Hospital Advantage Plan, Allstate Critical Illness and Universal Life Insurance w/LTD, Nationwide Pet Insurance and CyberScout Identity Management.

Information on each plan can be found on Saranet .

Current Plan

as of 12/27/2014

No current plans for this type.

[more ...](#)

Voluntary Legal Plan

To indicate your interest in the applicable plan, click in the circle next to the plan title. We will be providing the names of employees who select these plans to the plan representatives throughout the enrollment period but you should feel free to contact them as well.

Voluntary Legal Plan Information This voluntary legal plan is offered through

Other Benefit Plans

There are a number of other benefit plans that you can elect during open enrollment. For most of them, the cost of the plan depends on the amount of coverage you are requesting.

- ▶ **Voluntary Legal Plan: MetLaw – Hyatt Legal** <https://info.legalplans.com/Home/>
Password MetLaw
- ▶ **AFLAC:** Warren Weil at 518.321.1168 or Warren_weil@us.aflac.com
- ▶ **Liberty Mutual:** Christn Zorda at 518.782.2541 ext. 51748 or Christin.Zorda@LibertyMutual.com
- ▶ **NY Whole Life:** Joe Lee at 214.274.9545
- ▶ **Allstate Universal Life/Critical Illness:** Brian Johnson at 518.371.5522 ext. 154 or bjohnson@nyltcb.com
- ▶ **Nationwide Pet Insurance:** petinsurance.com/saratogahospital or call 877.738.7874
- ▶ **CyberScout Identity Management:** Customer Service: 1-877-432-7463
 - To enroll visit: <https://saratogahospital.e.paylogix.com/Login.aspx>



To discuss cost and coverage options, contact the representative.

Confirming Your Elections

- ▶ Once you have gone through all the benefit options you will need to confirm your elections.
- ▶ **REMINDER:** If you're seeing a message like this at the top of the page, it means you have not made an election to either enroll or decline in the Flexible Spending section. Your "submit" button will not be active until you have made an election there.

Confirm Your Elections or Changes



i Information

- Your elections cannot be submitted until elections for the required plan type(s) have been completed:

Flexible Spending Account

Med Reimb Flex Spend

Dependent Care Flex Spend

Make sure you review both current benefits and new benefits to make sure your elections are correct.

Confirm Your Elections or Changes



ATTENTION

If your screen is wide enough, you will see the current and new benefits side-by-side. If not, your new benefits will be listed under your current benefits, so just scroll down to see them.

This page shows a summary of the changes you are about to make. Please verify your changes by selecting the plan type or plan description hyperlink to return to the election page. When you are done, click the submit button in the toolbar.

Personal Information

Name
Address

Home phone
Work phone
Work extension
E-mail

Current Benefits - As of 12/31/2018

Estimated Total Cost:

Plan Type	Plan Details	Your bi-weekly cost
Additional	AFLAC Accident Covered Family Members <input type="text"/>	\$15.84 ?
Additional	AFLAC Hospital Indemnity Plan Covered Family Members	\$23.76

New Benefits - As of 01/01/2019

Estimated Total Cost: \$0.00 ?

Plan Type	Plan Details	Your bi-weekly cost
Medical	No election has been made	
Dental	No election has been made	
Vision	No election has been made	
Flexible Spending Account	Med Reimb Flex Spend No election has been made	

Employee Open Enrollment

2015 Open Enrollment

Steps

About Open Enrollment

Verify Beneficiary And Dependent Information

Medical

Dental

Vision

Flexible Spending Account

Med Reimb Flex Spend
Dependent Care Flex Spend

Voluntary Short Term DBL

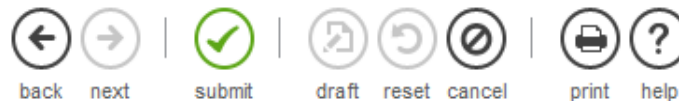
Employee Supplemental Life

Spousal Supplemental Life

Child Supplemental Life

Other

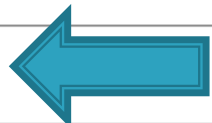
Confirm Your Elections or Changes



New Benefits - As Of 12/28/20

Plan Type	Plan Details	
<u>Medical</u>	No Election Has	
	No Election Has	
<u>Dental</u>	No Election Has Been Made	
<u>Vision</u>	No Election Has Been Made	
<u>Voluntary Short Term DBL</u>	Voluntary Short Term Disability Benefit Amount: \$159.38 Per Week	\$6.03

NOTE: Only *newly* elected benefits will be listed in the Plan Details and include a cost. **The statement "No Election Has Been Made" means you have not changed the status of the benefit indicated.** Any previous elections will continue into the new year at the appropriate rates.



Submitting Your Elections

- ▶ When you are satisfied with your Benefit Elections, click the submit button.

Confirm Your Elections or Changes



- ▶ Did you remember to either enroll in, or decline, both types of flexible spending accounts? **You will not be able to submit your elections unless you have done so.** If necessary, go back to the flexible spending section and enroll or decline each plan.
- ▶ You can go back into the open enrollment session to review and make changes up to the last day of open enrollment: November 21st. *No changes can be made after that date.*
- ▶ You can print a summary of your elections for your records.
- ▶ The benefits that you are electing will remain in force until 12/31/18 unless you experience a Qualifying Event (i.e., birth of a child, marriage, divorce or change of employment status for you or your spouse). You have 30 days from the date of the event to make changes to your benefits.
- ▶ Questions? Email benefits@saratogacare.org