

Purpose: Enroll in BenExtend Insurance during Special Aflac Enrollment Period

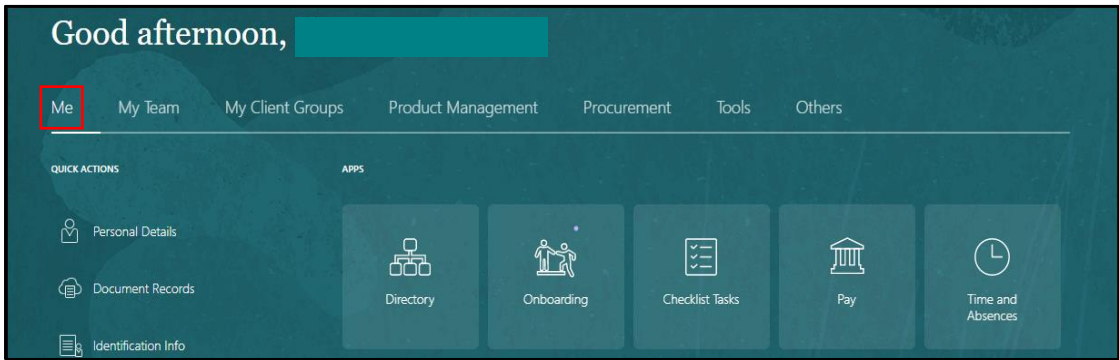
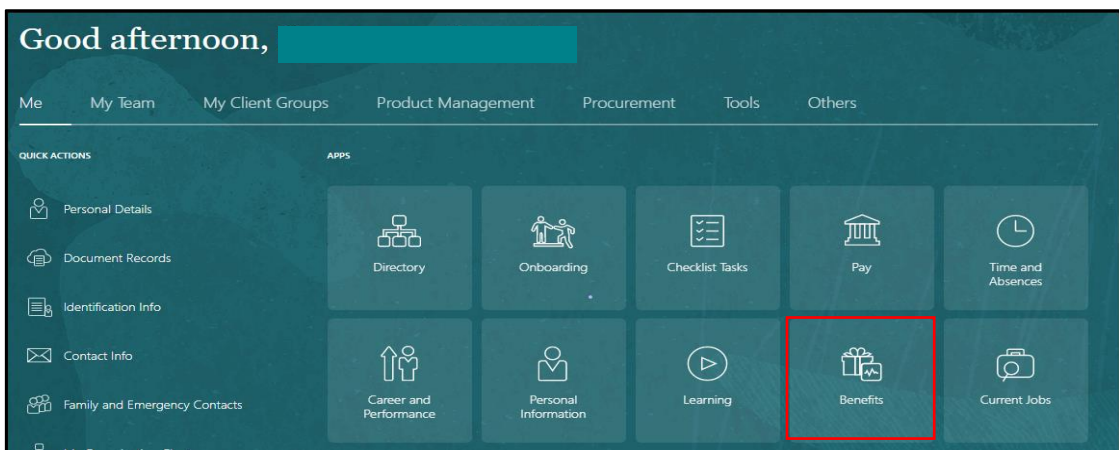
Audience: Atrium Health Navicent Teammates eligible for benefits



This job aid provides instructions **for enrolling in BenExtend Insurance during the Special Aflac Enrollment period June 5 – 23, 2023.**

Note: This job aid is for all Atrium Health Navicent benefits-eligible teammates.

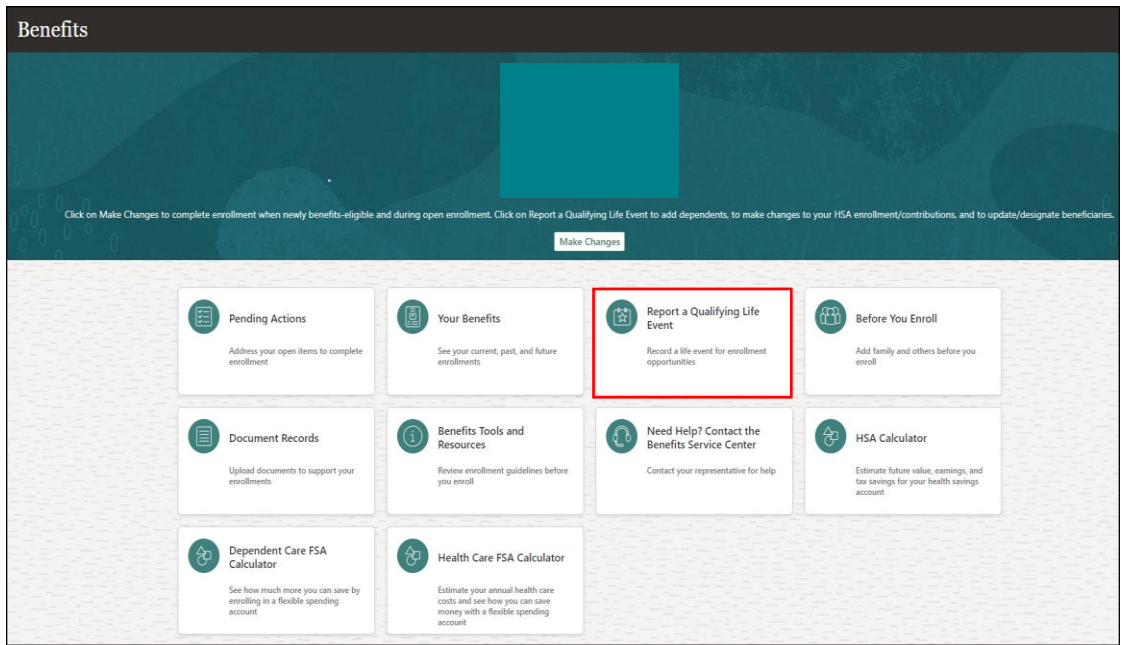
1. Enroll in BenExtend Bundle

NAVIGATION	ME → BENEFITS → REPORT A QUALIFYING LIFE EVENT
<p>Step 1: Click on Me tab.</p>	
<p>Step 2: Click on Benefits tile.</p>	

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Step 3:
Click on **Report a Qualifying Life Event.**



The screenshot shows a 'Benefits' dashboard with a 'Make Changes' button at the top. Below it are several tiles: 'Pending Actions', 'Your Benefits', 'Report a Qualifying Life Event' (highlighted with a red border), 'Before You Enroll', 'Document Records', 'Benefits Tools and Resources', 'Need Help? Contact the Benefits Service Center', 'HSA Calculator', 'Dependent Care FSA Calculator', and 'Health Care FSA Calculator'.

Step 4:
Scroll down and click on **Special Enrollment – New Voluntary Plan.**

Information

Select a life event to see if it provides you opportunities to elect new benefits or change existing ones.

Qualifying Life Event	Documentation Needed	Region	How to Submit Documentation	Pending Action
Divorce Legal separation Loss of coverage elsewhere Gain in coverage elsewhere	Divorce Annulment Separations Letter/Papers Letter from Provider Copy of Insurance card/letter with coverage end date Letter from Provider Copy of Insurance card/letter with coverage start date	Atrium/Navicent	Upload supporting documentation to the "Document Records" page. Note: Documentation must be submitted and approved before enrollment or changes can be made. You will receive notification once documentation is approved	Pending Actions can be viewed under Me> Benefits> Pending Actions
Marriage Adoption or Birth	Marriage Certificate Birth Adoption Certificate	Atrium/Navicent	You will receive a documentation request from Alight Solutions, LLC. Compliance is time-sensitive and necessary for your dependent's coverage	Pending Actions can be viewed under Me> Benefits> Pending Actions

Select a Life Event

- Add a new child in your coverage as part of birth, adoption or legal placement
- Add spouse and/or dependent children due to marriage
- Special Enrollment - New Voluntary Plan
- To add, update or change your HSA Contribution
- To add, update or change your designated beneficiary information
- To cancel benefit plans - Accident, BenExtend Bundle, Critical Illness, Hospital, Identity Theft and Universal Life


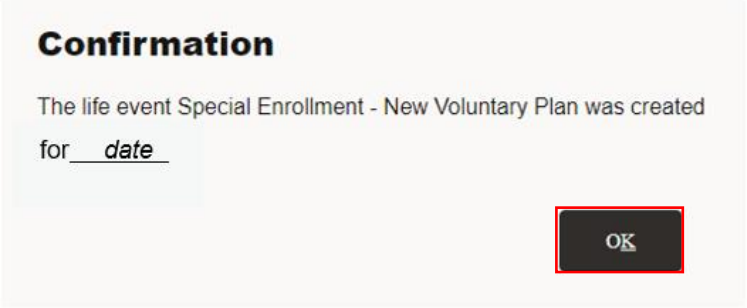
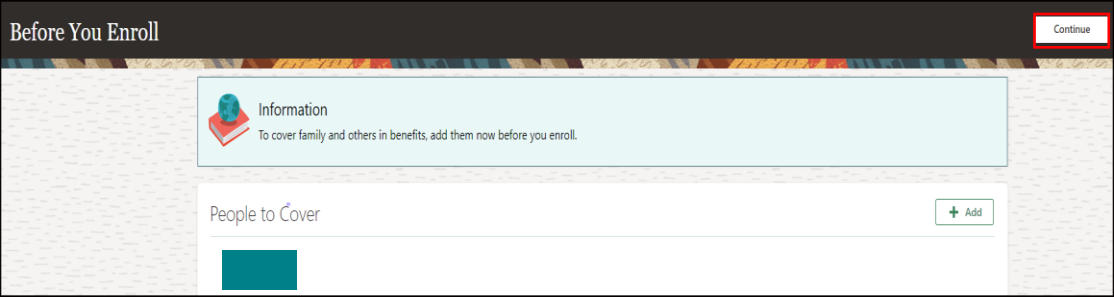
Step 5:
Use the **current date** for "When did this event occur?".

Special Enrollment - New Voluntary Plan

*When did this event occur?

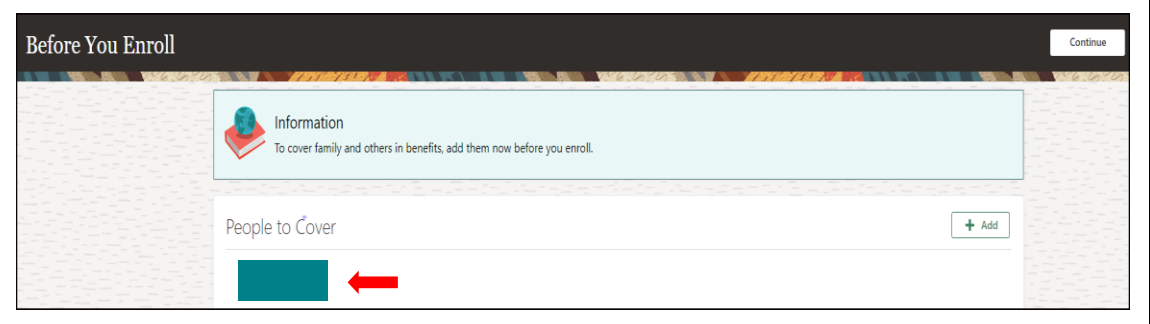
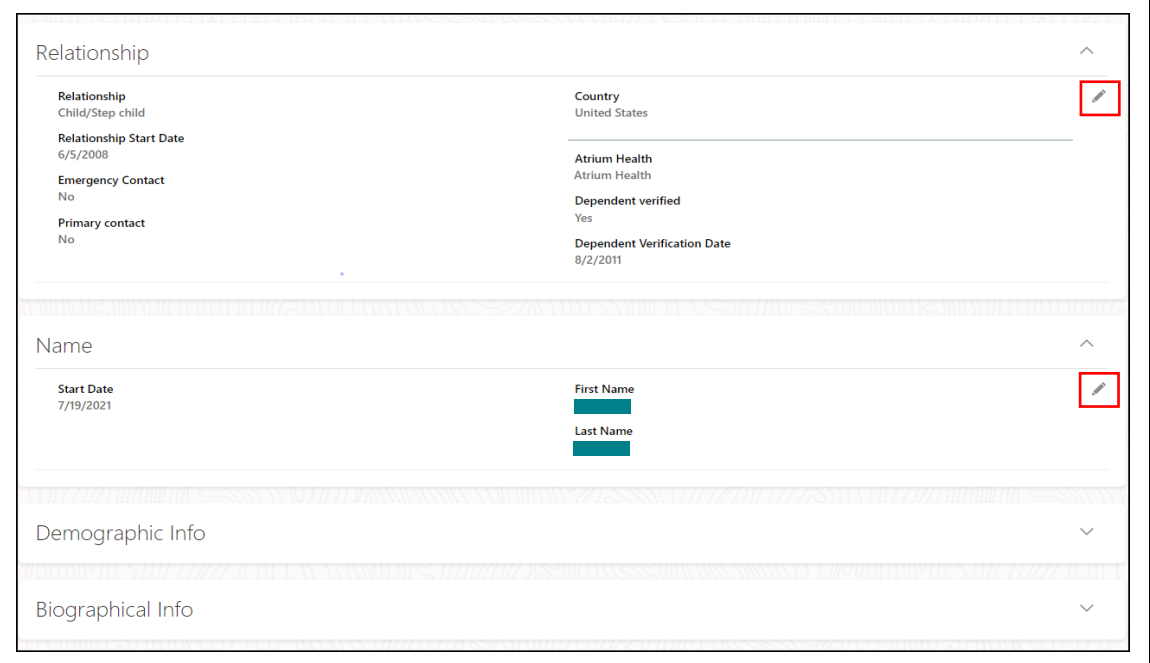
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<p>Step 6: Click Continue in top right corner.</p>	
<p>Step 7: You will receive a Confirmation. Click OK.</p> <p>See Tips: Step 7a Error! Reference source not found.Error! Reference source not found.Error! Reference source not found.for instructions on proceeding if you receive a message other than this confirmation.</p>	
<p>Note: Steps 8-9 are only for teammates who need to edit or add dependents/beneficiaries. Click Continue to bypass these steps and go directly to Step 10.</p>	

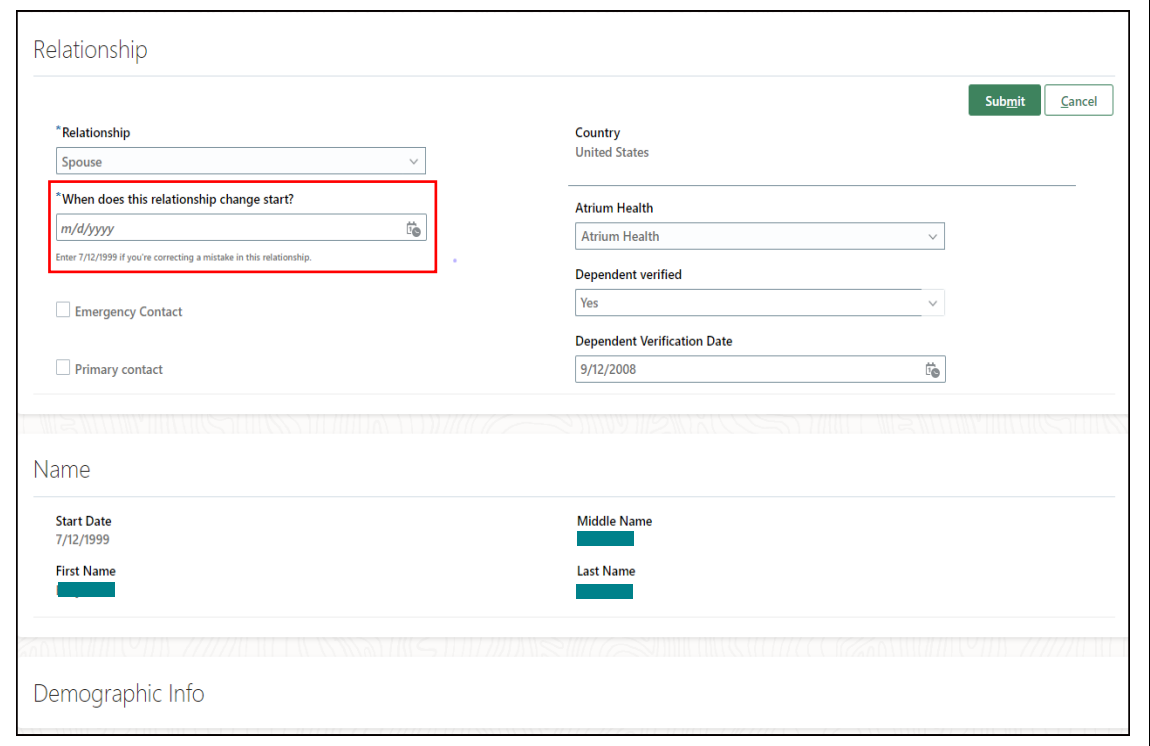

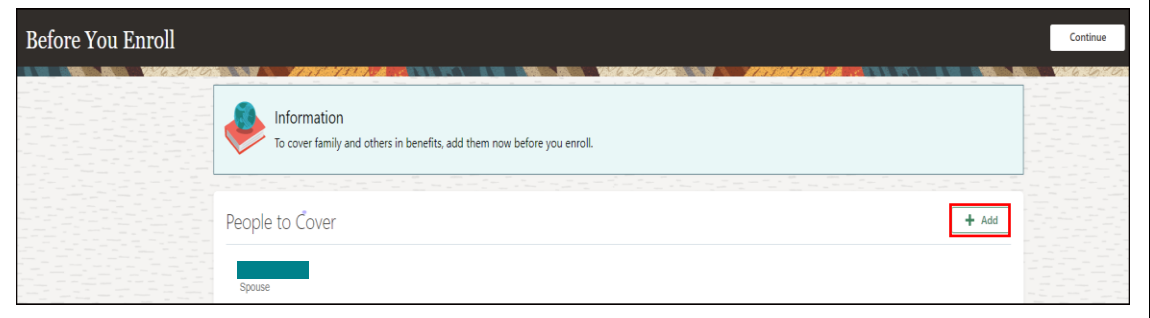
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<p>Step 8a: To edit an existing dependent/beneficiary, click on the person's name.</p>	
<p>Step 8b: Click on the pencil edit icon(s).</p>	

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<p>Step 8c: Edit each category as needed.</p> <p>Note: Enter date when name or relationship change occurred in appropriate categories.</p>	
<p>Step 8d: Click Submit.</p>	
<p>Step 9a: To add a dependent/beneficiary, click + Add.</p>	

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<p>Step 9b: Add dependent information on the Basic Information screen.</p>	<div style="border: 1px solid black; padding: 10px;"> <h3 style="margin-top: 0;">Basic Information</h3> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>First Name</p> <input style="width: 95%;" type="text"/></td> <td style="width: 50%; vertical-align: top;"> <p>Suffix</p> <input style="width: 95%;" type="text" value="Select a value"/></td> </tr> <tr> <td style="vertical-align: top;"> <p>Middle Name</p> <input style="width: 95%;" type="text"/></td> <td style="vertical-align: top;"> <p>Preferred Name</p> <input style="width: 95%;" type="text"/></td> </tr> <tr> <td style="vertical-align: top;"> <p>*Last Name</p> <input style="width: 95%;" type="text"/></td> <td style="vertical-align: top;"> <p>Credentials</p> <input style="width: 95%;" type="text" value="Select a value"/></td> </tr> <tr> <td style="vertical-align: top;"> <p>Prefix</p> <input style="width: 95%;" type="text" value="Select a value"/></td> <td style="vertical-align: top;"> <p><input type="checkbox"/> This person is an emergency contact ?</p> </td> </tr> <tr> <td style="vertical-align: top;"> <p>*Relationship</p> <input style="width: 95%;" type="text" value="Select a value"/></td> <td style="vertical-align: top;"> <p><input type="checkbox"/> Primary contact</p> </td> </tr> <tr> <td style="vertical-align: top;"> <p>*Relationship Start Date (Ex: Marriage date for Spouse)</p> <input style="width: 95%;" type="text" value="m/d/yyyy"/></td> <td style="vertical-align: top;"> <p>Atrium Health</p> <input style="width: 95%;" type="text"/></td> </tr> <tr> <td style="vertical-align: top;"> <p>Gender</p> <input style="width: 95%;" type="text" value="Select a value"/></td> <td></td> </tr> <tr> <td style="vertical-align: top;"> <p>Date of Birth</p> <input style="width: 95%;" type="text" value="m/d/yyyy"/></td> <td></td> </tr> </table> </div>	<p>First Name</p> <input style="width: 95%;" type="text"/>	<p>Suffix</p> <input style="width: 95%;" type="text" value="Select a value"/>	<p>Middle Name</p> <input style="width: 95%;" type="text"/>	<p>Preferred Name</p> <input style="width: 95%;" type="text"/>	<p>*Last Name</p> <input style="width: 95%;" type="text"/>	<p>Credentials</p> <input style="width: 95%;" type="text" value="Select a value"/>	<p>Prefix</p> <input style="width: 95%;" type="text" value="Select a value"/>	<p><input type="checkbox"/> This person is an emergency contact ?</p>	<p>*Relationship</p> <input style="width: 95%;" type="text" value="Select a value"/>	<p><input type="checkbox"/> Primary contact</p>	<p>*Relationship Start Date (Ex: Marriage date for Spouse)</p> <input style="width: 95%;" type="text" value="m/d/yyyy"/>	<p>Atrium Health</p> <input style="width: 95%;" type="text"/>	<p>Gender</p> <input style="width: 95%;" type="text" value="Select a value"/>		<p>Date of Birth</p> <input style="width: 95%;" type="text" value="m/d/yyyy"/>	
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<p>Step 9c: Click Submit in top right corner.</p>	<div style="text-align: right; margin-top: 20px;"> <input style="border: 2px solid red; background-color: #2e7d32; color: white; padding: 5px 15px; margin-right: 10px;" type="button" value="Submit"/> <input style="background-color: #333; color: white; padding: 5px 15px;" type="button" value="Cancel"/> </div>																
<p>Step 9d: Click Continue.</p>	<div style="text-align: right; margin-top: 20px;"> <input style="border: 2px solid red; background-color: #2e7d32; color: white; padding: 5px 15px; margin-right: 10px;" type="button" value="Continue"/> <input style="background-color: #333; color: white; padding: 5px 15px;" type="button" value="Cancel"/> </div>																
<p>Step 10: Read the Attestation, then click Accept.</p>	<div style="border: 1px solid #ccc; padding: 10px;"> <p style="color: #0070c0; margin-top: 0;">Atrium Health Navicent Benefits Attestation</p> <p>The information I am providing is accurate, and I authorize the coverage selections and the associated payroll deductions.</p> <p>I understand that in order to maintain the Health Savings Account, Health Care Flexible Spending Account, and/or Dependent Care Flexible Spending Account, I must re-enroll each year. Enrollments remain in effect until changed or canceled by me during an annual open enrollment, or when permitted by a qualified life event.</p> <p>I understand the following:</p> <ul style="list-style-type: none"> • My eligibility for benefits may be affected if my work status changes. • My benefit elections are binding, based upon plan provisions, and applicable laws and regulations. • My benefit elections are final and may not be changed during the year, unless I experience a qualified life event as defined in the Summary Plan Description booklet. • The benefit elections I am applying for may require that I provide additional information. We reserve the right to terminate any plan, policy, or procedure at any time and at our sole discretion. • If I am a full-time permanent teammate, I have 30 days to enroll in benefits with Atrium Health Navicent. If I fail to enroll in benefits within the 30-day period, my benefits will automatically be defaulted as noted in the table below. • If I am a part-time permanent teammate and eligible for benefits, I have 30 days to enroll in benefits with Atrium Health Navicent. If I fail to enroll in benefits within the 30-day period, my benefits will automatically be defaulted as noted in the table below. • MetLife's Group Accident and Hospital Indemnity products are intended to supplement, and are not a substitute for, comprehensive medical coverage. By enrolling, I acknowledge I have read the outline of coverage, disclosure and fraud warnings and declare that all information I have given is true and complete to the best of my knowledge and belief. • MetLife's Critical Illness product is intended to supplement, and is not a substitute for, comprehensive medical coverage. By enrolling, I declare that no person being enrolled is covered under any Title XIX program (Medicaid or any similarly named program) acknowledge I have read the outline of coverage, disclosure, fraud warnings and Shoppers Guide to Cancel Insurance and declare that all information I have given is true and complete to the best of my knowledge and belief. • By enrolling in Aflac's Group BenExtend coverage, I acknowledge that I have read and understand the Aflac Enrollment Language document that contains fraud, suitability, and other important certification and disclosure language located on PeopleConnect. <table border="1" style="width: 100%; border-collapse: collapse; margin: 10px 0;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 35%;">Full-Time</th> <th style="width: 35%;">Part-Time</th> </tr> </thead> <tbody> <tr> <td>Basic Life and AD&D</td> <td>1x annual pay (minimum \$25,000 and maximum \$1,000,000)</td> <td>1x annual pay (minimum \$25,000 and maximum \$1,000,000)</td> </tr> <tr> <td>Long Term Disability</td> <td>Company Paid LTD at 60% of gross base monthly wage</td> <td>Not Available</td> </tr> </tbody> </table> <p>I acknowledge that if I add any dependents to my insurance policies, I will need to provide dependent verification documentation within 30 days of my hire date or the life event date. Failure to provide these documents will result in loss of coverage for my dependents.</p> <p>I acknowledge that I must elect a beneficiary for my basic life insurance policy that is provided by Atrium Health Navicent.</p> <div style="text-align: right; margin-top: 10px;"> <input style="border: 2px solid red; background-color: #2e7d32; color: white; padding: 5px 15px; margin-right: 10px;" type="button" value="Accept"/> <input style="background-color: #ccc; padding: 5px 15px;" type="button" value="Decline"/> </div> </div>		Full-Time	Part-Time	Basic Life and AD&D	1x annual pay (minimum \$25,000 and maximum \$1,000,000)	1x annual pay (minimum \$25,000 and maximum \$1,000,000)	Long Term Disability	Company Paid LTD at 60% of gross base monthly wage	Not Available							
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Step 11:
Click **pencil edit** icon to enroll in the BenExtend Bundle

Medical Coverage Edit

Hospital Admission Insurance

Waived-Hospital Admission

Accident Insurance

Waived-Accident Insurance

Critical Illness

Waived-Critical Illness

BenExtend Bundle



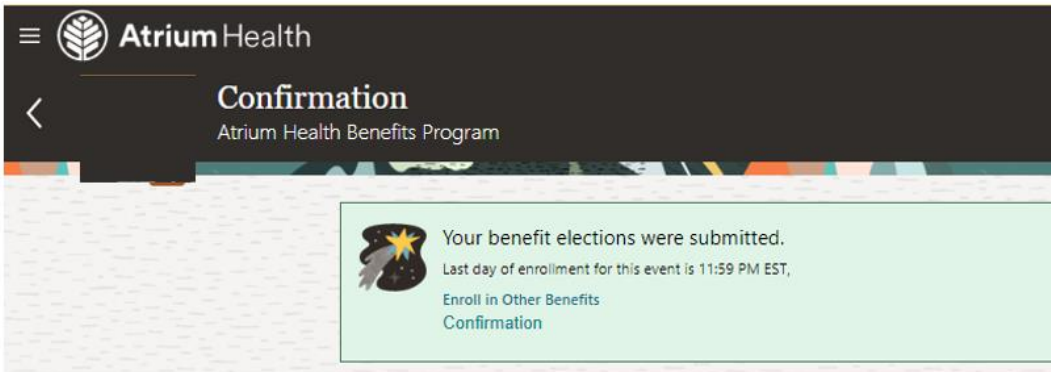
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<p>Step 12: Select the checkbox next to the coverage tier you want to elect.</p>	<p>BenExtend Bundle</p> <hr/> <p>BenExtend Bundle AH</p> <table border="1"><tr><td><input type="checkbox"/></td><td>Teammate Only</td><td>\$ 13.8 <small>Teammate Contribution per pay period</small></td></tr><tr><td><input type="checkbox"/></td><td>Teammate + Spouse</td><td>\$ 27.12 <small>Teammate Contribution per pay period</small></td></tr><tr><td><input type="checkbox"/></td><td>Teammate + Child(ren)</td><td>\$ 21.01 <small>Teammate Contribution per pay period</small></td></tr><tr><td><input type="checkbox"/></td><td>Teammate + Family</td><td>\$ 34.32 <small>Teammate Contribution per pay period</small></td></tr></table>	<input type="checkbox"/>	Teammate Only	\$ 13.8 <small>Teammate Contribution per pay period</small>	<input type="checkbox"/>	Teammate + Spouse	\$ 27.12 <small>Teammate Contribution per pay period</small>	<input type="checkbox"/>	Teammate + Child(ren)	\$ 21.01 <small>Teammate Contribution per pay period</small>	<input type="checkbox"/>	Teammate + Family	\$ 34.32 <small>Teammate Contribution per pay period</small>
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<p>Step 12a: When selecting a coverage tier other than Teammate Only, you will also need to select the dependent(s) to be covered, and click OK</p>	<p>BenExtend Bundle</p> <hr/> <p>BenExtend Bundle AH</p> <table border="1"><tr><td><input type="checkbox"/></td><td>Teammate Only</td><td>\$ 13.8 <small>Teammate Contribution per pay period</small></td></tr></table> <p style="text-align: right;"><input type="button" value="OK"/> <input type="button" value="Cancel"/></p> <p>BenExtend Bundle AH</p> <table border="1"><tr><td>Teammate + Spouse</td><td>\$ 27.12 <small>Teammate Contribution per pay period</small></td></tr></table> <p>Who do you want to cover?</p> <table border="1"><tr><td><input type="checkbox"/></td><td>(Spouse)</td></tr></table>	<input type="checkbox"/>	Teammate Only	\$ 13.8 <small>Teammate Contribution per pay period</small>	Teammate + Spouse	\$ 27.12 <small>Teammate Contribution per pay period</small>	<input type="checkbox"/>	(Spouse)					
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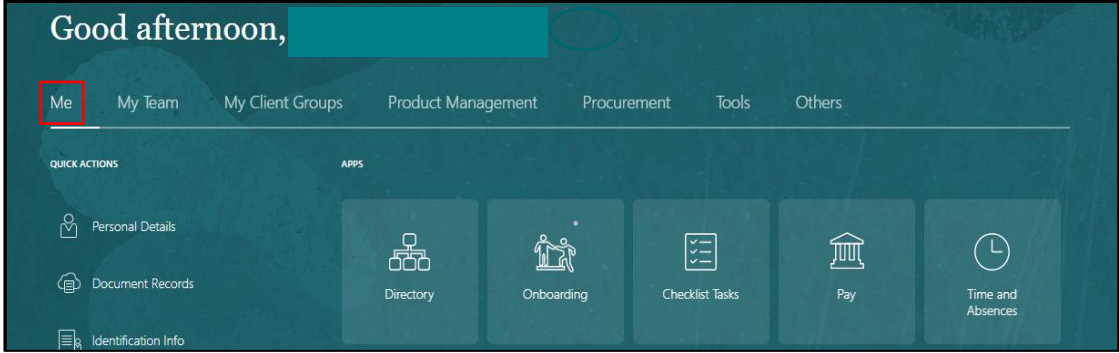
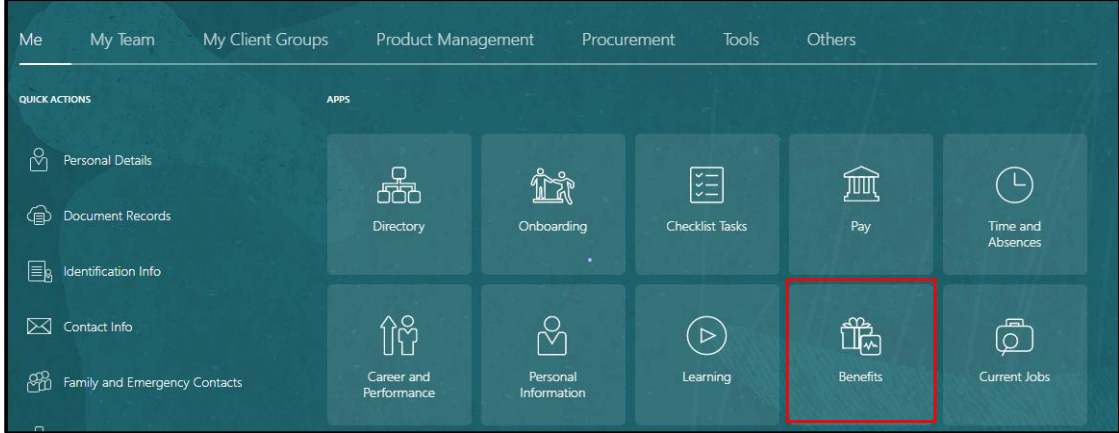
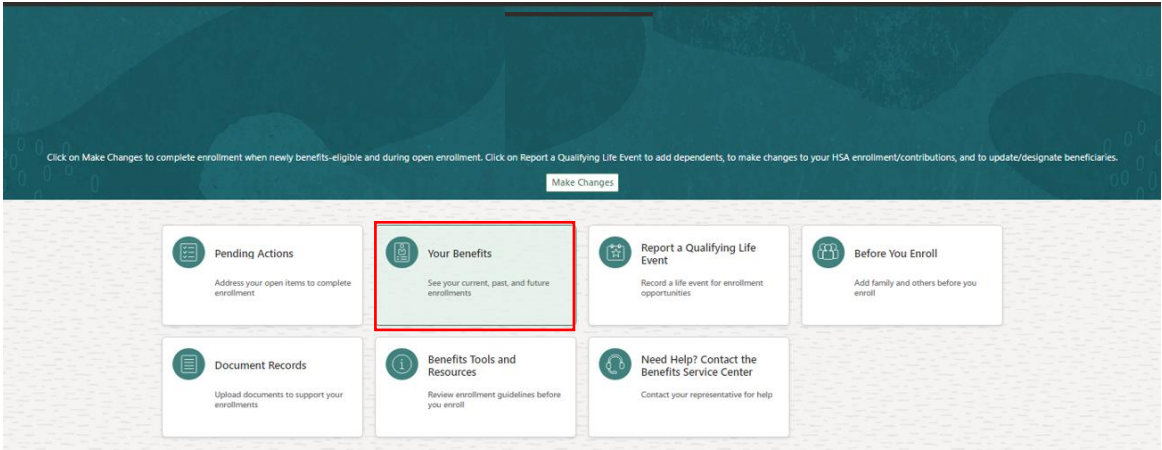
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<p>Step 13: Click Continue.</p>	
<p>Step 14: Click Submit to finalize your election.</p>	
<p>Step 15: You will receive a Confirmation.</p> <p>Note: if you receive a confirmation that differs from this one, call the Benefits Service Center for assistance.</p>	

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2. View the Benefits Summary

NAVIGATION	ME → BENEFITS → YOUR BENEFITS
<p>Step 1: Click on Me tab.</p>	 <p>The screenshot shows a user dashboard with a navigation bar at the top containing 'Me', 'My Team', 'My Client Groups', 'Product Management', 'Procurement', 'Tools', and 'Others'. The 'Me' tab is highlighted with a red box. Below the navigation bar, there are sections for 'QUICK ACTIONS' and 'APPS'. The 'QUICK ACTIONS' section includes 'Personal Details', 'Document Records', and 'Identification Info'. The 'APPS' section includes 'Directory', 'Onboarding', 'Checklist Tasks', 'Pay', and 'Time and Absences'.</p>
<p>Step 2: Click on Benefits tile.</p>	 <p>The screenshot shows the same user dashboard as in Step 1. The 'Benefits' tile in the 'APPS' section is highlighted with a red box. The 'QUICK ACTIONS' section now includes 'Personal Details', 'Document Records', 'Identification Info', 'Contact Info', and 'Family and Emergency Contacts'. The 'APPS' section includes 'Directory', 'Onboarding', 'Checklist Tasks', 'Pay', 'Time and Absences', 'Career and Performance', 'Personal Information', 'Learning', 'Benefits', and 'Current Jobs'.</p>
<p>Step 3: Click on Your Benefits.</p>	 <p>The screenshot shows the 'Your Benefits' page. At the top, there is a 'Make Changes' button. Below it, there are several tiles: 'Pending Actions', 'Your Benefits' (highlighted with a red box), 'Report a Qualifying Life Event', 'Before You Enroll', 'Document Records', 'Benefits Tools and Resources', and 'Need Help? Contact the Benefits Service Center'. The 'Your Benefits' tile contains the text: 'See your current, past, and future enrollments'.</p>

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<p>Step 4: Click on View Benefits Summary in the top right corner.</p>																																									
<p>Step 5: You will see a Benefits Confirmation and Summary sheet. Review for accuracy and save or print.</p>	<p style="text-align: center;">Benefits Confirmation and Summary</p> <p style="text-align: right;">Employee Number</p> <p>Benefits Selections</p> <table border="1" data-bbox="407 821 1495 1077"> <thead> <tr> <th>Plan</th> <th>Option</th> <th>Coverage</th> <th>Original Coverage Start Date</th> <th>Coverage Start Date</th> <th>Coverage End Date</th> <th>Teammate contribution per pay period</th> <th>Employer contribution per pay period</th> </tr> </thead> <tbody> <tr> <td>Waived-Hospital Admission</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td>0</td> </tr> <tr> <td>Waived-Accident Insurance</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td>0</td> </tr> <tr> <td>Waived-Critical Illness</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td>0</td> </tr> <tr> <td>BenExtend Bundle AH</td> <td>Teammate + Spouse</td> <td></td> <td></td> <td></td> <td></td> <td>27.12</td> <td>0</td> </tr> </tbody> </table> <p>Covered Dependents</p>	Plan	Option	Coverage	Original Coverage Start Date	Coverage Start Date	Coverage End Date	Teammate contribution per pay period	Employer contribution per pay period	Waived-Hospital Admission						0	0	Waived-Accident Insurance						0	0	Waived-Critical Illness						0	0	BenExtend Bundle AH	Teammate + Spouse					27.12	0
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<p style="text-align: center;">Tips</p> <p>Step 7a: If you received a message other than a confirmation that the life event was created, contact the Benefits Service Center. See contact numbers below.</p> <p style="text-align: center;">To contact the Benefits Service Center, call 800-964-4780</p>																																									