ESS – Benefits – Benefits Participation Overview

- 1. **Benefits Participation Overview** Displays the current benefit programs for which an employee is currently enrolled. Information displayed will vary from employee to employee based on enrollments. In the *Benefits Participation Overview*, employees are able to do the following:
 - View a listing of currently enrolled benefit programs along with the plan descriptions, employee and employer contributions, and other options that apply to each specific program.
 - For most benefit plans, a link is available that will take the employee to the benefit provider's website for additional information as well as a link to the benefit plan's description.
 - For savings and retirement plans, view the name of the provider, the flat rate contribution made to that provider or the percent of salary being contributed to that provider.
 - View Flexible Spending Account annual contributions and reimbursements received.
 - View information related to dependents covered under enrolled health plans.
 - View, update, and/or add beneficiaries associated with voluntary AD&D and/or voluntary life insurance plans.
 - 1.1. Select the Benefits Participation Overview link from the Benefits menu in ESS.



1.2. The *Plan Participation Overview* screen will appear as shown below.

beneficiaries to any of those plans, simply click on the link of the corresponding plan.

Enrolled Plans			
Plan	Effective Date	Begin Date	End Date
lighmark PPO (PEBTF)	7/18/2016	7/18/2016	12/31/9999
Prescription (PEBTF)	7/18/2016	7/18/2016	12/31/9999
Prescription Buy Up (PEBTF)	7/18/2016	7/18/2016	1/6/2017
Basic Group Life Ins	7/18/2016	7/18/2016	12/31/9999
ong Term Disability	7/18/2016	7/18/2016	12/31/9999
/ol AD&D Employee	7/18/2016	8/8/2016	12/31/9999
/ol AD&D Spouse	7/18/2016	8/8/2016	12/31/9999
/ol AD&D Child	7/18/2016	8/8/2016	12/31/9999
/ol Life Employee	7/18/2016	8/8/2016	12/31/9999
/ol Life Spouse	7/18/2016	8/8/2016	12/31/9999
/ol Life Child	7/18/2016	8/8/2016	12/31/9999
103bTSA	7/18/2016	7/18/2016	12/31/9999
ERS Class A3 = 6.25%	7/18/2016	7/18/2016	12/31/9999
et Healthy Non Par (PEBTF)	7/18/2016	7/18/2016	12/31/9999
State System EE's Assist Prog	7/18/2016	7/18/2016	12/31/9999

1.2.1. The date column descriptions are defined as follows:

Effective Date: This is the earliest date the employee was enrolled in the related plan.

Begin Date: This date may be different than the *Effective Date* to reflect any modifications made to the plan since the earliest *Effective Date*. For example if dependents were added or dropped from a plan, a new *Begin Date* is created.

End Date: If the date is equal to 12/31/9999, it means the plan is not scheduled to end. If the *End Date* does not equal 12/31/9999, the plan will end on the date displayed.

Enrolled Plans			
Plan	Effective Date	Begin Date	End Date
iqhmark PPO (PEBTF)	7/18/2016	7/18/2016	12/31/9999
rescription (PEBTF)	7/18/2016	7/18/2016	12/31/9999
rescription Buy Up (PEBTF)	7/18/2016	7/18/2016	1/6/2017

NOTE: Only benefit plans that pertain to the employee in context will be displayed. For the purposes of this document, a SCUPA employee is being used as an example. The *Enrolled Plans* displayed will vary depending on the employee.

NOTE (cont.): For any plan not described in this document, simply click on the plan from the *Plan Participation Overview* to drill deeper for more information.

- **1.3.** Click on the desired plan from the *Enrolled Plans* listing under *Plan Participation Overview* to drill deeper for more information about that particular plan. In the example used here, *Highmark PPO (PEBTF)* was selected. The *Plan Details* screen shown below will appear with the following information/options available:
 - **1.3.1.** The *Plan* will display the full name of the plan being viewed. In this case, *Highmark PPO* (*PEBTF*) is the plan in context. The *Plan Type* tells users the type of benefit plan that is being viewed. In this case, the plan type is *Medical*.
 - 1.3.2. The *Provider* link takes users to the website for the plan provider. In this case, users will be taken to PEBTF's website. The *Plan Description* link takes users to an internal PASSHE website where more information is provided on the specific plans available. In this case, more information is provided on the medical plans available.
 - **1.3.3.** The *Plan Options* section describes the specific *Health Plan Option* and *Coverage Type*. *Highmark PPO (PEBTF)* is the health plan option shown here with a coverage type of *Multi-Party.*

- **1.3.4.** The *Costs Bi-weekly* section displays how much money the *Employee* and the *Employer* contribute to the plan.
- **1.3.5.** The *Enrolled Dependents* section simply displays the dependents of the employee who are attached to the particular plan in context.

NOTE: Click the Back to Plan Overview button to return to the Plan Participation Overview.

Highmark PPO (PEBTF)						
Plan Details	1.3.1		1.3.2			
Back to Plan Overview						
Plan: Hig Plan Type: Me	hmark PPO (PEBTF) dical	Pro Pla	<u>wider</u> n Description			
Plan Options						
Health Plan Option: Hi Coverage Type: N	ighmark PPO (PEBTF) Iulti-Party	1.3.3				
Costs Bi-weekly						
Employee St Additional Post-Tax Cost St Imputed Income St Employer St	37.66 0.00 0.00 455.00	1.3.4				
			1.3.5			
Dependent enrollment require	s verfiication with PEBTF r	ecords.				
Enrolled Dependents						
Name	Relation	SSN	Birth Date			
Wife SCUPA	Spouse	*****88888	1/1/1980			
Child SCUPA	Child	*****11111	1/1/2015			

If enrolled in one or more voluntary AD&D and/or voluntary life insurance plans, employees can view, update, and or/add beneficiaries to any of those plans. (Note: This process only allows for beneficiary changes. No adjustments may be made to coverage amounts.)

2. Select the desired voluntary insurance plan from the *Plan Participation Overview* screen. In the example here, the voluntary AD&D employee plan is selected.

Enrolled Plans					
Effective Date	Begin Date	End Date			
7/18/2016	7/18/2016	12/31/9999			
7/18/2016	7/18/2016	12/31/9999			
7/18/2016	7/18/2016	1/6/2017			
7/18/2016	7/18/2016	12/31/9999			
7/18/2016	7/18/2016	12/31/9999			
7/18/2016	8/8/2016	12/31/9999			
7/18/2016	8/8/2016	12/31/9999			
7/18/2016	8/8/2016	12/31/9999			
7/19/2016	9/9/2016	12/21/0000			
	Effective Date 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016	Effective Date Begin Date 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 7/18/2016 8/8/2016 7/18/2016 8/8/2016 7/18/2016 8/8/2016 7/18/2016 8/8/2016 7/18/2016 8/8/2016 7/18/2016 8/8/2016			

2.3. An overview of the voluntary plan selected will display. At the bottom of the screen, both primary and contingent beneficiaries designated for the plan will be displayed.

Plan Details					
Back to Plan Overview					
Plan: Plan Type:	Vol AD&D En Vol AD&D EE	nployee	Plan Description		
Insurance Options & Coverage					
Insurance Option:	Vol. AD&D I	E			
Basic Coverage Amount		\$10,000.00			
Additional Units	3 x	\$10,000.00			
Insurance Coverage		\$40,000.00	1		
Costs Bi-weekly					
Employee	\$0.28				
Employer	\$0.00				
dd/Modify Beneficiary Desi	gnations				
our beneficiary designations	for record effe	ctive 08/08/2016.			
Beneficiary Name		Relationship	Percentage	e Contingent	
Wife SCUPA		Spouse	100		
Child SCUPA		Child	100	Image: A state of the state	

2.3.1. To make changes to beneficiary designations, select the *Add/Modify Beneficiary Designations* button.

Add/Modify Beneficiary Designations						
our conclusion, designations for						
Beneficiary Name	Relationship	Percentage	Contingent			
Beneficiary Name Wife SCUPA	Relationship Spouse	Percentage 100	Contingent			

2.3.2. The following pop-up window will appear. Select the *Continue* button to begin making modifications or *Cancel* to abort the process.



2.3.3. The *Beneficiaries* window will appear. The text at the top of the window provides directions for making desired changes. The next steps will illustrate these directions.

Beneficiaries:							
Your current beneficiary designation(s) associated with your Vol AD&D Employee Insurance Plan are displayed below. To make changes to your beneficiary designation(s), follow these directions:							
To modify primary beneficiary elections, change the percentage after each person and/or organization to the percentage desired. The total among primary beneficiaries must add up to 100%.							
 To modify contingent beneficiary elections, change the percentage after each person and/or organization to the percentage desired and designate the beneficiary as contingent by clicking the check box under the Contingent column. The total among contingent beneficiaries must add up to 100%. To add a family member/dependent or outside organization that does not currently appear in the list to designate as a beneficiary, you can add new beneficiaries by selecting Add New Beneficiaries. After adding new beneficiaries through this process, you will be returned to this page in order to make beneficiary designation changes associated with your Vol AD&D Employee Insurance Plan. 							
Beneficiary Name	Relationship	Percentage	Contingent				
Wife SCUPA	Spouse	100					
Child SCUPA	Child	100					
Test Add	Stepchild	0					
Ins Plans - No Beneficiary Designated	No Beneficiaries Designated	0					
Test	Charity organization	0					
Add New Beneficiaries Save Changes Ca	incel						

2.3.4. To modify primary beneficiary elections, change the percentage after each person and/or organization to the percentage desired. The total among primary beneficiaries must add up to 100%. (NOTE: A primary beneficiary will never have a checkmark in the *Contingent* column.)

Beneficiary Name	Relationship	Percentage	Contingent
Wife SCUPA	Spouse	34	
Child SCUPA	Child	33	
Test Add	Stepchild	33	
Ins Plans - No Beneficiary Designated	No Beneficiaries Designated	0	
Test	Charity organization	0	
Add New Beneficiaries Save Changes C	ancel		

2.3.5. To modify contingent beneficiary elections, change the percentage after each person and/or organization to the percentage desired and designate the beneficiary as contingent by clicking the check box under the Contingent column. The total among contingent beneficiaries must add up to 100%. (NOTE: Contingent beneficiaries are not required.)

Beneficiary Name	Relationship	Percentage	Contingent	
Wife SCUPA	Spouse	34		
Child SCUPA	Child	33		
Test Add	Stepchild	33		
Ins Plans - No Beneficiary Designated	No Beneficiaries Designated	0		
Test	Charity organization	100		-
Add New Beneficiaries Save Changes Ca	ancel			

2.3.6. When finished making modifications, select the Save Changes button.

Beneficiary Name	Relationship	Percentage	Contingent
Wife SCUPA	Spouse	34	
Child SCUPA	Child	33	
Test Add	Stepchild	33	
Ins Plans - No Beneficiary Designated	No Beneficiaries Designated	0	
Test	Charity organization	100	
Add New Beneficiaries Save Changes C	ancel		

2.3.7. A message will be displayed that changes have been saved successfully.



2.3.8. To add a family member/dependent or outside organization that does not currently appear in the list to designate as a beneficiary, new beneficiaries can be added by selecting *Add New Beneficiaries*.

To add a family member/dependent or outsid beneficiary, you can add new beneficiaries by this process, you will be returned to this page AD&D Employee Insurance Plan.	e organization that does not currently appe y selecting Add New Beneficiaries. After in order to make beneficiary designation c	ear in the list to d adding new ben hanges associa	lesignate as a eficiaries through ted with your Vol
Beneficiary Name	Relationship	Percentage	Contingent
Wife SCUPA	Spouse	34	
Child SCUPA	Child	33	
Test Add	Stepchild	33	
Test	Charity organization	100	
Ins Plans - No Beneficiary Designated	No Beneficiaries Designated	0	
Add New Beneficiaries Save Changes Ca	ancel		

2.3.9. The Family Member/Dependent/Beneficiary Information window will appear. To add new beneficiaries, select Add Another Dependent. (NOTE: If skipping this step is desired, select Save Information and/or Continue.)

Family Member / Dependent / Beneficiary Information To add a new individual to be designated as a beneficiary, select the Add Another Dependent button and follow the steps. If you do not wish to add a new individual to be designated as a beneficiary, simply select the Save Information and/or Continue button. Stored Family Members / Dependents / Beneficiaries							
₽	Relationship	No.	Full Name	Birth Date	Social Security Number		
	Spouse		SCUPA, Wife	1/1/1980	***-**-8888		
	Child	01	SCUPA, Child	1/1/2015	***-**-1111		
	Stepchild	01	Add, Test	1/1/2013	***-**-5555		
Ad	d Another Dependent		Save Information	and/or Continue 🕨			

2.3.10. Complete the information as required. When finished, select Save Dependent Information.

Family Member / Dependent Input Form				
Relationship: *	•	Marital Status: *	•	
First Name: *		Middle Initial:		
Last Name: *		Suffix:	•	
Gender:	Male 💌	Tax Status:	Non Taxab	
		Caralian		
		Smoker		
Birth Date: *		Social Security Number: *		
Physician Name:		Physician Number:		
Current Patient:	Physician info is only required if you plan on enrolling in	a HMO health plan.		
	Dependent Validation			
	Original Documentation verifying the individual's re	lationship to the employee (e.g. birth certificate,	
	marriage certificate, DP tax status, etc.) must be pr	ovided.		
If the address of	f this family member / dependent is the same as you	r permanent address, leave	these fields blank.	
Street:				
City:				
State:				
Postal Code:		/		
r ostar oodo.				
Cancel Save Dependent Information				
	Cancel Save Dependent into			

2.3.11. A message will be displayed confirming the family member/dependent information has been saved. Repeat steps 2.3.9 – 2.3.10 as many times as necessary. When finished, select *Save Information and/or Continue.*

Fa	Family Member / Dependent / Beneficiary Information					
To a If yo Cont	To add a new individual to be designated as a beneficiary, select the Add Another Dependent button and follow the steps. If you do not wish to add a new individual to be designated as a beneficiary, simply select the Save Information and/or Continue button.					
St	ored Family Members / D	ependen	ts / Beneficiaries			
卧	Relationship	No.	Full Name	Birth Date	Social Security Number	
	Spouse		SCUPA, Wife	1/1/1980	***-**-8888	
	Child	01	SCUPA, Child	1/1/2015	***-**-1111	
	Child	02	SCUPA, Newbown	8/1/2016	***-**-5555	
	Stepchild	01	Add, Test	1/1/2013	***-**-5555	
Ade	Add Another Dependent					
	Vour family member / dependent information has been updated.					
	Save Information and/or Continue					

2.3.12. The *External Organization Information* window will appear. To add a new external organization to be assigned as a beneficiary, select *Add Another Organization*. (NOTE: If skipping this step is desired, select *Save External Organizations and/or Continue*.)

External Organization Information To add a new external organization to be designated as a beneficiary, select the Add Another Organization button and follow the steps. If you do not wish to add a new external organization to be designated as a beneficiary, simply select the Save External Organizations and/or Continue button.					
St	Stored External Organization				
B	OrgName	OrgType	Тах		
	Test	Charity Organization	124		
Add Another Organization					
	Save External Organizations and/or Continue				

2.3.13. Complete the information as required. When finished, select *Save Organization Information.*

External Organization Information				
To add a new external organization to be designated as a beneficiary, select the Add Another Organization button and follow the steps. If you do not wish to add a new external organization to be designated as a beneficiary, simply select the Save External Organizations and/or Continue button.				
Stored External Organization				
OrgName	OrgType	Тах		
Test	Charity Organization	124		
Add Another Organization				
External Organization Input Form				
• Organization Type: *	Organization Name	e: *		
Tax ID:				
Address of the External Organizati	nc			
Street and House No:				
City:				
State:	v			
Postal Code:		45		
Country:	United States			
Telephone Number:				
	Cancel Save Organization Information			

2.3.14. A message will be displayed confirming the outside organization information has been saved. Repeat steps 2.3.12 – 2.3.13 as many times as necessary. When finished, select *Save External Organizations and/or Continue*.

External Organization Information To add a new external organization to be designated as a beneficiary, select the Add Another Organization button and follow the steps. If you do not wish to add a new external organization to be designated as a beneficiary, simply select the Save External Organizations and/or Continue button.				
Stored External organization				
B OrgName	OrgType	Tax		
Test	Charity Organization	124		
Trust test	Trust Fund			
Add Another Organization				
Save External Organizations and/or Continue				
External Organization successfully added.				

2.3.15. You will then be returned to the *Beneficiary* window where designation changes can be made. The new family member(s)/outside organization(s) that were newly added to the system now appear for beneficiary designation. Refer to steps 2.3.1 -2.3.7 for designation instructions.

ľ	\$ process, אָטָש אאר פראש drived withis page in order to make beneficiary שאסק association changes associated with your עטר BD Employee Insurance Plan.				
H	Beneficiary Name	Relationship	Percentage	Contingent	
	Wife SCUPA	Spouse	34		
	Child SCUPA	Child	33		
	Test Add	Stepchild	33		
L	Test	Charity organization	100	~	
	Newbown SCUPA	Child	0		
	Ins Plans - No Beneficiary Designated	No Beneficiaries Designated	0		
K	Trust test	Trust Fund	0		
	Add New Beneficiaries Save Changes Ca	incel			