

# eBenefits Tipsheet



# **Completing Benefit Elections on eBenefits**

eBenefits is used by employees for online benefits enrollment and qualifying election changes.

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#### **Need Help?**

Contact your agency benefits specialist for help. If you don't know your agency benefits specialist, call a Care Coordinator at 833-740-3258.

## **New Hire Enrollment**

If you are enrolling as a new hire, your election process will be the same as the Open Enrollment process. However, you won't have any prior elections to review.

If you elect basic life insurance coverage, you'll need to select at least one beneficiary. If you waive participation, or fail to enroll within 31 days of hire, and later choose to enroll in life insurance, you will be subject to evidence of insurability guidelines.

## **Making Open Enrollment Elections**

**Step 1:** Visit https://corect.ct.gov/. Log in with your user ID and password. Confirm that your primary email is listed in Core-CT. To add a primary email, go to Main Menu, then My System Profile.

Step 2: From the Main Menu, select Self Service > Benefits > Benefits Enrollment.

	Search Menu:			
ORACLE	avaren menu.			
	Self Service     Denefits     Worklist     Reporting Tools	Time Reporting     Personal Information     Payroll and Compensation     Reports	*	
	PeopleTools     Change My Password     My Personalizations     My System Profile	Denefits	Dependents and Beneficiaries Life Events Benefits Summary	

**Step 3:** Click Select to start the Open Enrollment process. Review the information, then select Continue.

Step 4: Scroll to the bottom to see estimated premiums. These estimates will change as you make benefit elections. Select Edit to view the benefit plan options available to you.

Open E	nrollment			
The Enrolln	nent Summary will display which benefit options are open for Edit.			
1 Imp	ortant: Your enrollment is not complete until you click on the Up	odate Elections button		
and	then submit your changes for approval by your Agency Benefit	s Specialist. For		
que	stions regarding your enrollment in the Health Enhancement Pr	ogram (HEP) or your		
cum	ent HEP Status, contact Care Management Solutions, Inc. at 87	7-687-1448.		
Enrollme	nt Summary			
Medical		Costs per Pay Check	Costs Annually	Edit
Current: A	Inthem State BlueCare POE Empl Only	48.87	1,270.62	
New:	In them State BlueCare POE:Family	173.13	4,501.38	

## **Making Open Enrollment Elections**

## Step 5:

If you want to enroll eligible dependents, select Add/Review Dependents. Note: If the address for the new dependent is different from the employee address, remove the check mark in the Same Address as Employee field. Select Save and Continue to proceed. If you notice an error in your dependent information, contact your agency benefits specialist to update the information. Do not enter the same dependent more than once.

Step 6: After adding your dependents, enroll or disenroll them using the check box next to the dependent's name. Select Update and Continue to proceed.

#### **Enroll Your Dependents**

Check the Enroll box next to the name of the eligible dependent(s) you are enrolling. Uncheck the Enroll box next to the name of the dependent(s) you are removing. Note: If the eligible dependent(s) you wish to enroll do not appear in the list, click the 'Add/Review Dependents' button.

Enroll Name Relationship
Jpdate and Continue Discard Changes

)ependent Bene	ficiary	
Enroll	Name	Relationship
☑ ¯		Child
2	Spouse Name	Spouse

## Step 7:

You will be returned to the Benefits Enrollment page where you can review your enrollment and costs. Select **Save and Continue** to proceed.

## **Making Open Enrollment Elections**

**Step 8:** For each dependent you have enrolled, enter the required documentation (e.g., long-form birth certificate, marriage certificate) as an attachment on the Proof Document Upload page. Select **Save** once your document(s) has been uploaded. Repeat this step for each new dependent you are enrolling. Select **Done** to complete the document upload process. If you are not adding documentation, select **Add Note**.

**Step 9:** Review your benefit selections before submitting. Select **Save** and **Continue** to proceed.

Medical			Costs per Pay Check	Costs Annually	Edit
Current: Anthem State BlueCare POE:Empl Only			48.87	1,270.62	
New: Anthem State BlueCare POE:Family		-	173.13	4,501.38	
Dental			Costs per Pay Check	Costs Annually	Edit
Current: Enhanced Dental:Empl Only			0.00	0.00	
New: Enhanced Dental:Family	-	_	10.37	269.62	
Life			Costs per Pay Check	Costs Annually	
Current: BasicGrpLf: Salary X 1			7.60	197.60	
New: BasicGrpLf: Salary X 1 : \$38,000			7.60	197.60	
Supplemental Life			Costs per Pay Check	Costs Annually	
Current: Waive					
New: Waive					
This table summarizes estimated costs for your new bene	efit changes	1 1			
Election Summary					
Summarized estimates for new Benefit Elections	Costs per Pay Check	Coats Annually			
Costs	191.10	4,968.60			
Your Costs	191.10	4,968.60			
Save and Continue					

#### Step 10:

Read the important Authorize Elections information on the Submit Benefit Choices page. Select **Submit** to authorize and submit your elections. On the following page, select **OK** to submit your enrollment.

Once you have submitted your elections, you will receive an email notification confirming that your agency benefits specialist has received your request.

If you have any questions about the enrollment process, contact your agency benefits specialist.

Once you make your benefit elections during Open Enrollment, they remain in effect from July 1 through June 30 of the following plan year, unless you have a qualifying life event, such as:

- Marriage, divorce or legal separation
- Birth or adoption of a child
- Death of a dependent
- Change in residence that affects your or your dependent's benefits eligibility
- Loss of your or a dependent's coverage under another plan (e.g., your spouse's plan)
- Change in your spouse's employment that results in a loss or gain of medical and/or dental coverage through their employer
- You and/or your dependent has Medicaid or Children's Health Insurance Program (CHIP) coverage that has been terminated, or you and/or your dependent becomes eligible for a state premium-assistance subsidy through one of these programs
- A significant midyear increase in the cost of coverage
- You enroll in Medicare, Medicaid or health insurance through a Marketplace/Exchange

## Submitting Your Qualifying Life Event Election Change

*IMPORTANT!* To make a midyear coverage change, you must complete the steps below and provide required documentation within 30 days of the event.

The change you make must be consistent with the life event. For example, if you get married, you can add your spouse to your health benefits. Plan changes can only be made during open enrollment. The change will be effective the 1st of the month following the date of the qualifying event.

#### **Step 1:** Visit https://corect.ct.gov/. Log in with your user ID and password.

Step 2: From the Main Menu, select Self Service > Benefits > Life Events.



# **Step 3:** Review the information, then select the applicable life event from the list. On the following page, enter the life event date and select OK.

## **Life Event Changes**

- **Step 4:** Use the Next button to navigate through the benefit election options. On the Add/Review Dependent/Beneficiary page, use the steps on pages 4-5 of this tipsheet to add a new dependent.
- **Step 5:** Once you're done adding new dependents, select Next and then Start My Enrollment. Click Select next to the event description to continue.
- **Step 6:** Select Edit to enroll in coverage, and add or remove dependents based on your life event. Enroll or disenroll dependents by using the check box next to the dependent's name. Select Update and Continue to proceed.
- Step 7: Review your changes or new enrollment. Select Update Elections to continue. Scroll to the bottom to see estimated premiums. Select Save and Continue to complete your enrollment.

This table summarizes estimated costs for your ne	w benefit changes	
Election Summary		
Summarized estimates for new Benefit Elections	Costs per Pay Check	Costs Annually
Costs	191.10	4,968.60
Your Costs	191.10	4,968.60

**Step 8:** Read the Authorization Elections page. Select **Submit** to authorize and submit your elections.

**Step 9:** Select Next in the upper right corner to complete your life event change. Follow the steps on page 5 of this tipsheet to upload required documentation.

Select Complete to finalize your life event changes.

Once you have submitted your elections, you will receive an email notification confirming that your agency benefits specialist has received your request.

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