



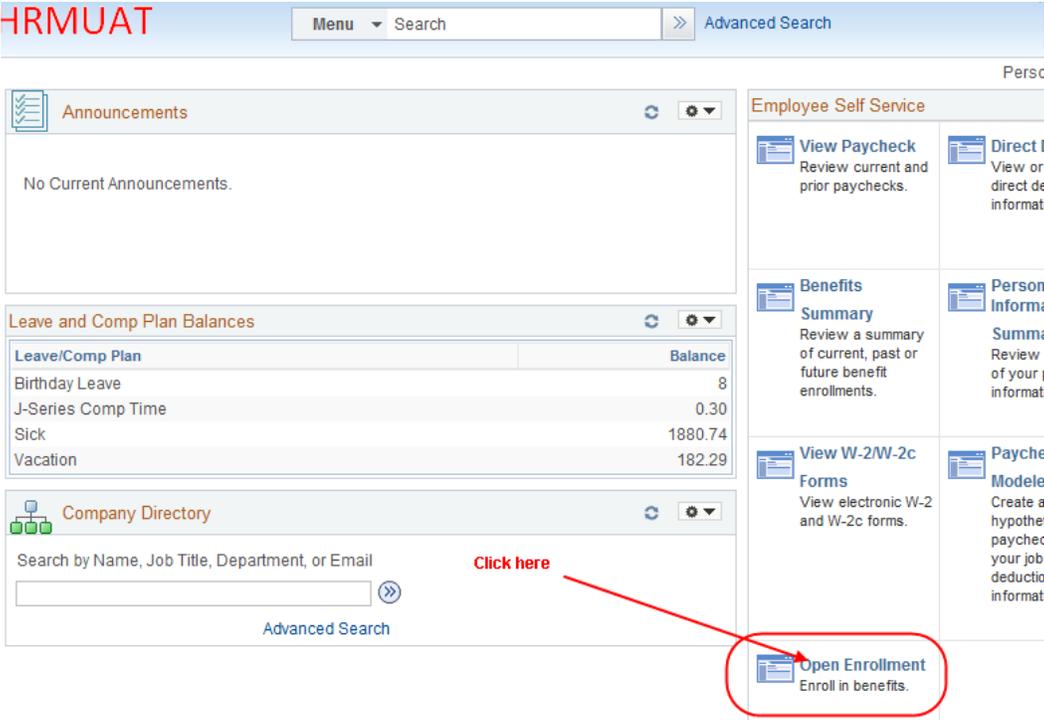
# Employee Self Service Open Enrollment

We provide detailed instructions for a few key benefits, including how to add dependents to your insurance coverage and how to elect and enter an annual pledge for our Flexible Spending Accounts, also known as FSAs.

| Step | Action   |
|------|--|
| 1.   | <p>Open an internet session from any browser. In the address line type <a href="http://employee.cabq.gov">employee.cabq.gov</a>. You can also get there by going to the City's Employee website at <a href="http://eweb.cabq.gov">eweb.cabq.gov</a>. Once there, you can click on the <b>Employee Self Service</b> link in the top left corner. This will take you to the login screen for Peoplesoft.</p>  |
| 2.   | <p>When the login page appears, sign in to Peoplesoft by entering your <b>User ID</b> and <b>Password</b>. Your <b>User ID</b> is a 6 character value that follows one of the following protocols: Exxxxx (the x's being the last 5 numbers in your Employee ID) or a 6 character alpha field comprised of a department identifier and your initials.</p>  |
| 3.   | <p>Enter your User ID into the <b>User ID</b> field.</p>   |
| 4.   | <p>Press <b>[Tab]</b> to go to the <b>Password</b> field.</p>  |
| 5.   | <p>Enter your password into the <b>Password</b> field. If you do not know your password, or if you have entered the wrong password 3 or more times and have been locked out, you will need to call the helpdesk at 768-2930 to have your password reset. If you have questions about the benefits being offered, please contact the Benefits Office at 768-3758.</p>   |
| 6.   | <p>Click on the <b>Sign In</b> button.</p>   |

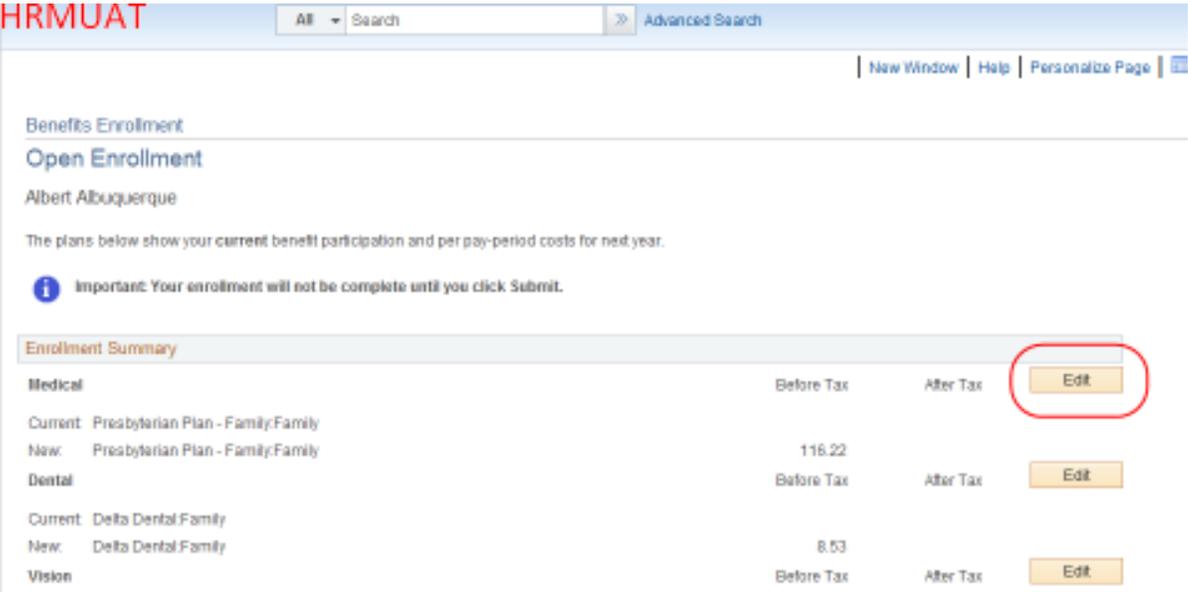


# Employee Self Service Open Enrollment

| Step                | Action   |                     |                  |               |  |  |                   |            |              |           |  |                 |            |      |                  |               |
|---------------------|--|---------------------|------------------|---------------|--|--|-------------------|------------|--------------|-----------|--|-----------------|------------|------|------------------|---------------|
| 7.                  | <p>On the ESS Home Page, click on the <b>Open Enrollment</b> link:</p>    |                     |                  |               |  |  |                   |            |              |           |  |                 |            |      |                  |               |
| 8.                  | <p>After you click the Open Enrollment link, you will be at the Benefits Enrollment screen. Here you will see a <b>Select</b> button. Click on this button to get started with your Open Enrollment.</p> <p><b>Benefits Enrollment</b></p> <p>Albert Albuquerque</p> <p>Open enrollment is your annual opportunity to modify your benefit choices. <b>Please carefully read the instructions on each page as this will help you successfully complete the Open Enrollment process.</b></p> <p>To continue participating in the <b>Flexible Spending Accounts</b> you must re-enroll in these programs during the Open Enrollment period.</p> <p>You will be able to review the cost of each benefit on the Enrollment Summary.</p> <table border="1" data-bbox="305 1575 1200 1717"> <thead> <tr> <th colspan="5">Open Benefit Events</th> </tr> <tr> <th>Event Description</th> <th>Event Date</th> <th>Event Status</th> <th>Job Title</th> <th></th> </tr> </thead> <tbody> <tr> <td>Open Enrollment</td> <td> 07/01/2015</td> <td>Open</td> <td>Security Officer</td> <td><b>Select</b></td> </tr> </tbody> </table> <p>If you want to add coverage for a dependent for which you have not previously provided proof of your relationship, you will need to provide documentation (i.e. Marriage Certificate, Birth Certificate, Court Order etc.) You will have the opportunity to upload the document later in this event.</p> | Open Benefit Events |                  |               |  |  | Event Description | Event Date | Event Status | Job Title |  | Open Enrollment | 07/01/2015 | Open | Security Officer | <b>Select</b> |
| Open Benefit Events |  |                     |                  |               |  |  |                   |            |              |           |  |                 |            |      |                  |               |
| Event Description   | Event Date   | Event Status        | Job Title        |               |  |  |                   |            |              |           |  |                 |            |      |                  |               |
| Open Enrollment     | 07/01/2015   | Open                | Security Officer | <b>Select</b> |  |  |                   |            |              |           |  |                 |            |      |                  |               |



# Employee Self Service Open Enrollment

| Step    | Action   |                    |                   |                    |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |
|---------|--|--------------------|-------------------|--------------------|-------------------|--------|---------|--|--|--|-------------|--|--------|--|--|--------|------------------------------|--|--|-------------|--------------------------|------|--|--|--------|--|--|--|-------------|
| 9.      | On the <b>Enrollment Summary</b> page, you will see a list of all of all of the benefits that open for election during Open Enrollment. You will also see both your <i>Current</i> and <i>New</i> coverage. For most benefits, your current selection will continue if you do nothing. The exception to that is Flexible Spending Accounts. You will need to re-enroll each year if you would like to continue your Flexible Spending Account(s) for the new year.   |                    |                   |                    |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |
| 10.     | On the following pages, we will give you instructions and examples for making elections for some of your benefits. We will not go over every single type of benefit, but the approach is similar for all of the benefits. We will specifically cover medical insurance, adding new dependents, voluntary and spouse life, and flexible spending accounts.  |                    |                   |                    |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |
| 11.     | <p>In order to elect a new benefit or change an existing election, click on the <b>Edit</b> button to the right of that benefit. For example, click on the <b>Edit</b> button next to Medical to add or change the plan or the coverage that you currently have:</p>  <p>The screenshot shows the HRMUAT Open Enrollment page for Albert Albuquerque. It features an 'Enrollment Summary' table with columns for 'Medical', 'Dental', and 'Vision'. Each row shows 'Current' and 'New' plan options, 'Before Tax' and 'After Tax' amounts, and an 'Edit' button. The 'Edit' button for the Medical plan is circled in red.</p> <table border="1" data-bbox="289 1119 1437 1375"> <thead> <tr> <th>Benefit</th> <th>Current Plan</th> <th>Current Before Tax</th> <th>Current After Tax</th> <th>Action</th> </tr> </thead> <tbody> <tr> <td rowspan="2">Medical</td> <td>Current: Presbyterian Plan - Family/Family</td> <td></td> <td></td> <td><b>Edit</b></td> </tr> <tr> <td>New: Presbyterian Plan - Family/Family</td> <td>116.22</td> <td></td> <td></td> </tr> <tr> <td rowspan="2">Dental</td> <td>Current: Delta Dental Family</td> <td></td> <td></td> <td><b>Edit</b></td> </tr> <tr> <td>New: Delta Dental Family</td> <td>8.53</td> <td></td> <td></td> </tr> <tr> <td>Vision</td> <td></td> <td></td> <td></td> <td><b>Edit</b></td> </tr> </tbody> </table> | Benefit            | Current Plan      | Current Before Tax | Current After Tax | Action | Medical | Current: Presbyterian Plan - Family/Family |  |  | <b>Edit</b> | New: Presbyterian Plan - Family/Family | 116.22 |  |  | Dental | Current: Delta Dental Family |  |  | <b>Edit</b> | New: Delta Dental Family | 8.53 |  |  | Vision |  |  |  | <b>Edit</b> |
| Benefit | Current Plan   | Current Before Tax | Current After Tax | Action             |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |
| Medical | Current: Presbyterian Plan - Family/Family   |                    |                   | <b>Edit</b>        |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |
|         | New: Presbyterian Plan - Family/Family   | 116.22             |                   |                    |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |
| Dental  | Current: Delta Dental Family   |                    |                   | <b>Edit</b>        |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |
|         | New: Delta Dental Family   | 8.53               |                   |                    |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |
| Vision  |  |                    |                   | <b>Edit</b>        |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |
| 12.     | After you are in the <b>Medical</b> plan election page, you will see the different plans along with the premiums for each coverage. Choose the plan you want to elect, and then Click the <b>Continue</b> button. This will save your election.  |                    |                   |                    |                   |        |         |  |  |  |             |  |        |  |  |        |                              |  |  |             |                          |      |  |  |        |  |  |  |             |



# Employee Self Service Open Enrollment

| Step                                | Action   |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
|-------------------------------------|--|-----------------------|--|--|--------|------|--------------|--------------------------|---------------------|--------|-------------------------------------|----------------------|-------|-------------------------------------|----------------------|-------|-------------------------------------|---------------------|-------|
| 13.                                 | <p>If you want to add a dependent already listed but not yet covered, select the box next to that dependent in the Dependent Beneficiary table at the bottom of the <b>Medical</b> plan election page to add that dependent to your coverage. In this screen shot, you can see that the three children are already enrolled in your medical coverage. But the spouse is not currently enrolled. To add the spouse, simply click on the Enroll box to the left of the spouse's name:</p> <table border="1"> <thead> <tr> <th colspan="3">Dependent Beneficiary</th> </tr> <tr> <th>Enroll</th> <th>Name</th> <th>Relationship</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td>Annie A Albuquerque</td> <td>Spouse</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Andrew A Albuquerque</td> <td>Child</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Alyssa A Albuquerque</td> <td>Child</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Amber A Albuquerque</td> <td>Child</td> </tr> </tbody> </table> | Dependent Beneficiary |  |  | Enroll | Name | Relationship | <input type="checkbox"/> | Annie A Albuquerque | Spouse | <input checked="" type="checkbox"/> | Andrew A Albuquerque | Child | <input checked="" type="checkbox"/> | Alyssa A Albuquerque | Child | <input checked="" type="checkbox"/> | Amber A Albuquerque | Child |
| Dependent Beneficiary               |  |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| Enroll                              | Name   | Relationship          |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| <input type="checkbox"/>            | Annie A Albuquerque  | Spouse                |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| <input checked="" type="checkbox"/> | Andrew A Albuquerque   | Child                 |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| <input checked="" type="checkbox"/> | Alyssa A Albuquerque   | Child                 |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| <input checked="" type="checkbox"/> | Amber A Albuquerque  | Child                 |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| 14.                                 | <p>If you need to add a dependent that is not yet listed, click on the <b>Add/Review Dependents</b> button at the bottom of the page.</p> <p style="text-align: center;"><input type="button" value="Add/Review Dependents"/></p> <p>Please Note: In order to add a dependent that will be eligible for insurance coverage, you will be required to provide proof of the relationship. The only relationships that qualify for insurance coverage are Spouses, Children, Domestic Partners, Domestic Partners' children, and step children. Children and stepchildren can only be covered until 26 years of age.</p>   |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| 15.                                 | On the next page, it will show all of your Dependents and Beneficiaries. Click on the <b>Add/Review Dependents</b> button to add a new dependent.  |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| 16.                                 | Enter the <b>First Name</b> of the new dependent.  |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| 17.                                 | Enter the <b>Last Name</b> of the new dependent.   |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| 18.                                 | Enter the <b>Date of Birth</b> .   |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| 19.                                 | Enter the <b>Gender</b> .  |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| 20.                                 | Enter the <b>Social Security Number</b> .  |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| 21.                                 | Enter the <b>Relationship</b> to the Employee. The relationship type defines if an individual is a Dependent or a Beneficiary (dependents are automatically defined as both).  |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |
| 22.                                 | Enter an <b>Address</b> for the New Dependent. If the dependent lives with you, you can select the <b>Same Address</b> as Employee box and the <b>Same Phone</b> as Employee box.  |                       |  |  |        |      |              |                          |                     |        |                                     |                      |       |                                     |                      |       |                                     |                     |       |



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| Step | Action  |
|------|---|
| 23.  | <p>You can now attach the Birth Certificate, Marriage Certificate, or other legal documents to provide your proof of relationship. To upload a scanned document, click on the <b>Attach Document</b> link:</p> <p><input type="checkbox"/> Same Phone as Employee</p> <p>Phone <input type="text"/></p> <p><input type="button" value="Save"/></p> <p><b>Attach Document</b></p> <p><a href="#">Return to Dependent/Beneficiary Summary</a></p>   |
| 24.  | <p>Select the type of document you will be uploading by clicking on the magnifying glass, then click the <b>Add Attachment</b> button:</p> <p><b>Document Upload</b></p> <p>Instructions</p> <p>In order to add a dependent to your insurance you are required to provide proof of your relationship. Click the magnifying glass below then choose the type of document you will be uploading, and then click the Add Attachment button.</p> <p>Open Enrollment</p> <p>Open Enrollment Documents</p> <p>Select a document <input type="text" value="BN_BIRTH"/> <input type="button" value="Birth"/> <b>Choose the type of document here</b></p> <p><input type="button" value="Add Attachment"/> <input type="button" value="Add Note"/> <b>Then click the Add Attachment button</b></p> |
| 25.  | <p>Enter a description of the document and the dependent's name in the Subject field. Click the <b>Add Attachment</b> button:</p>   |



| Step | Action   |
|------|--|
| 26.  | <p>Next click on the <b>Browse</b> button and locate the copy of your scanned document. Click the document name, and then click on the <b>Upload</b> button. Once the document appears, click the <b>SAVE</b> button. Once you click the <b>SAVE</b> button, you will receive a message that <i>Approval of the Document is Required</i> and that a message has been sent to the Benefits Office.</p> <p><a href="#">Maintain Attachments</a></p> <hr/> <p><b>Document Definition - New Attachment</b></p> <p>▼ <b>Instructions</b></p> <p>You have chosen to enter a new attachment. In the subject line please enter the type of document and the dependent's name. For example: Birth Certificate John Smith.</p> <p>▼ <b>Selection Criteria</b></p> <p><b>Description</b> Birth</p> <hr/> <p>*<b>Subject</b> <input type="text" value="Birth Certificate for Alice Albuquerque"/></p> <p><b>Attachment</b> Birth_Certificate_for_Alice_Albuquerque.docx</p> <p><input type="button" value="View Attachment"/></p> <p><input type="button" value="Save"/></p> |
| 27.  | If you are unable to scan and attach your document, you can do so by visiting the Benefits Office on the 7 <sup>th</sup> Floor of Old City Hall.   |
| 28.  | Return to the <b>Dependent/Beneficiary Summary</b> page, and <b>SAVE</b> your new dependent. This dependent is now available to add to your insurance coverage, pending approval by the Benefits Office.   |
| 29.  | To add or change your <b>Voluntary Life</b> elections, click on the <b>Edit</b> button to the right of the Voluntary Life plan.  |



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| Step  | Action  |                |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
|---|---|----------------|-----------|-----------|--|----|-----------|---|----|-----------|--|------|-----------|--|------|-----------|
| 30.   | <p>If you are currently enrolled in <b>Voluntary Life</b>, you can increase your benefit by \$10,000 each year without <b>Evidence of Insurability</b>, up to \$250,000. Your current coverage is displayed at the top of the page, and is also displayed in the detailed plan below. The asterisks next to the listed plans indicate the levels for which you will need to complete a <b>Personal Health Application</b>. To elect in new or increased coverage, simply click the small radio button next to the level for which you would like to elect. You can see the biweekly premium for the coverage you are choosing.</p> <table border="1" data-bbox="305 541 1516 911"> <thead> <tr> <th>Coverage Level</th> <th>Your Cost</th> <th>Tax Class</th> </tr> </thead> <tbody> <tr> <td><input type="radio"/> Voluntary Life 10,000 (\$10,000)</td> <td>88</td> <td>After-Tax</td> </tr> <tr> <td><input checked="" type="radio"/> Voluntary Life 20,000 (\$20,000)</td> <td>76</td> <td>After-Tax</td> </tr> <tr> <td><input type="radio"/> Voluntary Life 30,000 (\$30,000)</td> <td>5.64</td> <td>After-Tax</td> </tr> <tr> <td><input type="radio"/>* Voluntary Life 40,000 (\$40,000)</td> <td>7.52</td> <td>After-Tax</td> </tr> </tbody> </table> <p><b>You can choose one level without Evidence of Insurability.</b></p> <p><b>If you want to increase more than one level, it will be subject to review and approval.</b></p> <p>Note: If you are not currently enrolled in <b>Voluntary Life</b>, any amount you request is subject to review.</p> | Coverage Level | Your Cost | Tax Class | <input type="radio"/> Voluntary Life 10,000 (\$10,000) | 88 | After-Tax | <input checked="" type="radio"/> Voluntary Life 20,000 (\$20,000) | 76 | After-Tax | <input type="radio"/> Voluntary Life 30,000 (\$30,000) | 5.64 | After-Tax | <input type="radio"/> * Voluntary Life 40,000 (\$40,000) | 7.52 | After-Tax |
| Coverage Level  | Your Cost   | Tax Class      |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| <input type="radio"/> Voluntary Life 10,000 (\$10,000)            | 88  | After-Tax      |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| <input checked="" type="radio"/> Voluntary Life 20,000 (\$20,000) | 76  | After-Tax      |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| <input type="radio"/> Voluntary Life 30,000 (\$30,000)            | 5.64  | After-Tax      |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| <input type="radio"/> * Voluntary Life 40,000 (\$40,000)          | 7.52  | After-Tax      |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| 31.   | <p>You can also add or change beneficiaries for your <b>Voluntary</b> and <b>Basic Life</b> plans by clicking on the Edit button next to those plans. Add or remove beneficiaries and/or change the primary and secondary (contingent) allocations for the beneficiaries you have chosen. Ensure that the allocations for both primary and secondary beneficiaries add up to 100 percent.</p>   |                |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| 32.   | <p>Once you have selected the amount you are requesting, or have added or changed your beneficiaries or their allocations, click the <b>Continue</b> button to SAVE your elections.</p>   |                |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| 33.   | <p><b>Spouse Life</b> works in the same manner as <b>Voluntary Life</b>, but approval for all levels is subject to review once your spouse has completed a Personal Health Application. <b>Please note</b> that you must choose the covered dependent for this plan (spouse or domestic partner). Beneficiaries are not chosen for Spouse Life: The employee is always the beneficiary on Spouse Life plans.</p>  |                |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| 34.   | <p>Elections of <b>Short Term</b> and <b>Long Term Disability</b> are also always subject to review once you have completed a Personal Health Application.</p>  |                |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| 35.   | <p><b>Flexible Spending Accounts</b> must be re-elected each year.</p>  |                |           |           |  |    |           |   |    |           |  |      |           |  |      |           |
| 36.   | <p>Click on the Edit button next to the <b>Flexible Spending Account(s)</b> you would like to elect.</p>  |                |           |           |  |    |           |   |    |           |  |      |           |  |      |           |



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|---------------------------------------|--|------------------------|------|---------------------------------------|------|----------------------------------|----|-------|--|---------------------------------------|------|
| 37.                                   | <p>Choose the <b>Flexible Spending Account</b> radio button. The annual pledge field will appear, where you will need to state an annual pledge. Please note the minimum and maximum pledge amounts on the election page.</p> <p><b>i</b> Important! Your current coverage is: Waive. You will continue with this coverage if you do not make a choice.</p> <p>Your annual pledge must be between \$260.00 and \$2,550.00, which are the limits established for this plan.</p> <p>Select an Option</p> <p><input type="radio"/> No, I do not want to enroll.</p> <p><input checked="" type="radio"/> Flexible Medical Spending Acct</p>  |                        |      |                                       |      |                                  |    |       |  |                                       |      |
| 38.                                   | <p>Use the <b>Worksheet</b> link to help you make your elections amounts.</p> <p>Flexible Spending Accounts Worksheet</p> <p>Use this worksheet to determine your desired Annual Pledge. Once you enter your New Annual Pledge, click Calculate and the system will estimate your per-pay-period contributions.</p> <p>Estimate from Per-Pay-Period Contributions</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td>Your New Annual Pledge</td> <td style="border: 1px solid black; width: 50px; text-align: center;">0.00</td> </tr> <tr> <td>Minus Your Year-To-Date Contributions</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Divided by Pay Periods Remaining</td> <td style="text-align: right;">26</td> </tr> <tr> <td colspan="2" style="text-align: center;">-----</td> </tr> <tr> <td>Estimated Per-Pay-Period Contribution</td> <td style="text-align: right;">0.00</td> </tr> </table> <p><a href="#">Return</a> <span style="float: right;"><input type="button" value="Calculate"/></span></p> <p>If you enter an annual pledge amount and click Calculate, you can see how much will come out of each check. If you know how much you would like to contribute each pay period, click the <b>Estimate from Per-Pay-Period Contributions</b> to see how much your annual pledge needs to be.</p> | Your New Annual Pledge | 0.00 | Minus Your Year-To-Date Contributions | 0.00 | Divided by Pay Periods Remaining | 26 | ----- |  | Estimated Per-Pay-Period Contribution | 0.00 |
| Your New Annual Pledge                | 0.00   |                        |      |                                       |      |                                  |    |       |  |                                       |      |
| Minus Your Year-To-Date Contributions | 0.00   |                        |      |                                       |      |                                  |    |       |  |                                       |      |
| Divided by Pay Periods Remaining      | 26   |                        |      |                                       |      |                                  |    |       |  |                                       |      |
| -----                                 |  |                        |      |                                       |      |                                  |    |       |  |                                       |      |
| Estimated Per-Pay-Period Contribution | 0.00   |                        |      |                                       |      |                                  |    |       |  |                                       |      |
| 39.                                   | Click the <b>OK</b> button to save your <b>Flexible Spending Account</b> election.   |                        |      |                                       |      |                                  |    |       |  |                                       |      |
| 40.                                   | The premiums you see on the <b>Enrollment Summary</b> page are the premiums for the upcoming year. At the bottom of the <b>Enrollment Summary</b> page are the Before-Tax and After-Tax totals you will be paying for the benefits you will be enrolled in. There is also a total for what the City will paying towards your benefits.   |                        |      |                                       |      |                                  |    |       |  |                                       |      |
| 41.                                   | Once you are happy with all of your Open Enrollment elections, click the <b>Submit</b> button at the bottom of the <b>Enrollment Summary</b> page. Once you click this button, the system will check for any errors or warnings and display them on the next page. Errors must be cleared up before your election can be completed. Warnings are simply bringing something to your attention. Once any/all errors are corrected, click on the <b>Submit</b> button on the final submission page. This will submit your choices to the Benefits Office.   |                        |      |                                       |      |                                  |    |       |  |                                       |      |
| 42.                                   | <b>End of Procedure.</b>   |                        |      |                                       |      |                                  |    |       |  |                                       |      |