Benefits Portal Enrollment – Full-Time Employees

| Enrollment Steps | Screen Shots |
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| 1. Sign in (Option a, b, or c) |  |
| * 1. Single Sign On (SSO)      1. Log into MySLCC      2. Navigate to the Employee Tab of MySLCC.      3. Click on the Benefit Enrollment link underneath the Employee Dashboard. (When using this link, you may be asked to also sign into your SLCC Microsoft Office 365 account.) | Benefits Enrollment Portal on your myslcc page |
| * 1. Direct Login      1. Go to the link [https://slccbenefits.hrintouch.com](https://slccbenefits.hrintouch.com/)      2. To log in please use the following: Username = “SLCC” + “ID#” Example: SLCCS00123456. Temporary Password = SSN with dashes. Example: 999-99-9999      3. Create a new password | Direct Login Screen |
| * 1. App      1. Install the Benefitplace App from Google Play or the Apple App Store      2. Reset your password via *Direct Login* before you use the Mobile App      3. Enter our company code: SLCCBenefits      4. To log in please use the following: Username = “**SLCC**” + “**ID#**” -- Example: **SLCCS00123456.** Password: Newly created password | BenefitFocus App |
| 1. Click on the Click here to enroll in Benefits button | Welcome screen on the Benefits Communication Portal |
| 1. Click on Get Started | Welcome Page |
| 1. Review information known about you and click next | Information about you |
| 1. Select your communication preferences and click next | review communication preferences |
| 1. Click on Add dependents and add your dependent’s information (if applicable) | Make sure to add your dependents and check if their information is already correct. |
| 1. Answer the Tobacco and Nicotine question. This is only used for Critical Illness through the Hartford to establish the cost. | Answer question if you are a tobacco user |
| 1. Click on Begin Enrollment to choose your medical coverage or select decline coverage. | Click begin enrollment to enroll in medical |
| 1. Add dependents to your medical plan by clicking their name (if applicable). Make sure the dependents show green; this means they are covered. If they show as white, they will not be covered | Select dependents you want on medical plan |
| 1. Choose a medical plan by selecting Select Plan or select decline coverage. | select your medical plan by clicking on select plan next to the plan and network you want |
| * 1. If you selected a High Deductible Health Plan, answer the Health Savings Account Questions | if you select a high deductible plan, aree to the HSA terms |
| 1. Add dependents to your dental plan by clicking their name (if applicable). Make sure the dependents show green; this means they are covered. If they show as white, they will not be covered click Select Plan to enroll in the dental plan or select decline coverage. | select your dependents and pick your dental plan |
| 1. Add dependents to your vision plan by clicking their name (if applicable). Make sure the dependents show green; this means they are covered. If they show as white, they will not be covered. Choose a vision plan by selecting Select Plan or select decline coverage. | select your dependents and enroll in the vision plan |
| 1. Enroll in a Flexible Spending Plan (if you selected the Traditional Plan) or select decline coverage.   OR  Enroll in a Health Savings Account (if you selected the High Deductible Plan) or select decline coverage   1. Enroll in a Flexible Spending Plan (if you selected the Traditional Plan) or select decline coverage. | if you enrolled in a traditional plan, select or decline the FSA |
| b. Click Select Plan for Flexible Spending Account and Enter the total amount you want for the year in your FSA or select decline coverage. | say how much you want in your FSA for the year |
| * 1. Agree or Disagree to the Health Savings Account Acknowledgement if you chose the High Deductible Plan | If you enrolled in a high deductible plan, agree to the hsa terms |
| * 1. Answer the Medicare Acknowledgement Question | say if you are enrolled in medicare  Image of not enrolled or enrolled in Medicare choices |
| * 1. If you want the Health Savings Account, click yes. If not, click no you do want the account. | Would you like a HSA |
| * 1. Decide if you want to contribute to your HSA | How much do you want to put in your HSA? |
| * 1. Say how much and how often you want to contribute to the HSA if you selected Custom Amount | say if you want to contribute to the HSA ongoing or just once |
| * 1. Review Contribution and click Save | Review your HSA contribution |
| 1. Enroll in the Dependent Care Flexible Spending Account by clicking Select Plan and choose the amount you want for the year or select decline coverage. | say how much you want to put in the Dependent Care FSA for the plan year |
| 1. Review the summary of benefits you enrolled in so far and click save. | review the summary and click save |
| 1. Click Begin Enrollment for your Life Insurance | click begin enrollment for your life insurance |
| 1. Review how much your Basic Life Plan is and select Next | review your college paid for life insurance plan |
| 1. Click Add Beneficiary and Select the Beneficiary type (Person, Organization, Trust, or Estate) | click add beneficiary to say who gets your life insurance if you pass away |
| 1. Choose a beneficiary from your dependents list or select Enter New Beneficiary | click enter new beneficiary or select your dependent if you want to add a person as a beneficiary |
| 1. Choose Primary or Secondary for Beneficiary Type. Choose a percent in Allocation. To add more beneficiaries, click Add Beneficiary | say if you want them as primary or secondary and the percent you want to give them of the total |
| 1. Review how much your Basic Accidental Death & Dismemberment Insurance Plan is and select Next. Review our Life and AD&D summary and click save. | review your college paid accidental death and dismemberment plan |
| 1. Enroll in the Supplemental Life Insurance by clicking Begin Enrollment or select decline coverage. | click begin enrollment for your supplemental life insurance |
| 1. Select the amount of your Supplemental Life Insurance and click Select Plan or select decline coverage. | add or decline additional life insurance for yourself |
| * 1. If you select 4x salary, you will get a notice about completing Evidence of Insurability. This means you answer medical questions and the life insurance company will decide if they approve 4x your salary request. | Evidence of Insurability required notice |
| 1. Select your spouse/partner or add them to the list of select decline coverage. | select your spouse or partner to cover in life insurance |
| 1. Select the amount of life insurance you want for your spouse/partner or select decline coverage. | select or decline how much life insurance you want for your spouse or partner |
| 1. Select child(ren) you want covered on the life insurance or select decline coverage. | select children you want covered on your child life insurance plan |
| 1. Select the amount of life insurance you want for your child(ren) or select decline coverage. Add dependents to your child life insurance plan by clicking their name (if applicable). Make sure the dependents show green; this means they are covered. If they show as white, they will not be covered. | select the amount of life insurance you want on your children or decline |
| 1. Select the amount of Supplemental Accidental Death & Dismemberment (AD&D) or select decline coverage. You must select additional if you want to add this coverage on your spouse, partner, or children | select how much additional AD&D insurance you want. you must select additional if you want to add AD&D on your spouse/partner or children |
| * 1. If you want Supplemental Accidental Death & Dismemberment (AD&D) through PEHP instead or in addition to the coverage through Securian, please see the bottom corner of the same enrollment page for the enrollment form | PEHP Offer for video and flyer and enrollment form |
| 1. Select your spouse/partner for AD&D Insurance or select decline coverage. | select your spouse or partner for AD&D coverage |
| 1. Select the amount of Spouse AD&D or select decline coverage. | select the amount of AD&D you want on your spouse or partner |
| 1. Select child(ren) you want covered for AD&D or select decline coverage. | select the children you want covered on AD&D |
| 1. Choose the amount of AD&D coverage for your child(ren) or select decline coverage. Add dependents to your child AD&D insurance plan by clicking their name (if applicable). Make sure the dependents show green; this means they are covered. If they show as white, they will not be covered. | select the amount of AD&D you want on your children |
| 1. Review the Supplemental Life insurance and AD&D Summary and click save. Click Begin Enrollment for Long-Term Disability | click begin enrollment for your long term disability plan |
| 1. Review how much your Long-Term Disability is and select Next. Review the summary and click save. | review your long term disability plan. you cannot decline this plan because the college pays for it |
| 1. Begin Enrollment for Critical Illness Coverage or select decline coverage. | begin enrollment ro decline coverage for critical illness |
| 1. Select whom you want covered on Critical Illness Insurance and choose the amount of coverage you want or select decline coverage. Add dependents to your plan by clicking their name (if applicable). Make sure the dependents show green; this means they are covered. If they show as white, they will not be covered. | choose the amount of coverage on your critical illness |
| 1. Select who you want covered on the Hospital Indemnity and Select Plan to enroll or select decline coverage. Add dependents to your plan by clicking their name (if applicable). Make sure the dependents show green; this means they are covered. If they show as white, they will not be covered. | Decline or pick who you want on your hospital indemnity plan |
| 1. Select who you want covered on the Accident Insurance and Select Plan to enroll or select decline coverage. Add dependents to your plan by clicking their name (if applicable). Make sure the dependents show green; this means they are covered. If they show as white, they will not be covered. | select who you want on your accident insurance plan. select plan or decline coverage |
| 1. Review the Illness, Hospital, and Accident Insurance Summary and click Save | summary of coverage for illness, hospital, and accident insurance. |
| 1. Click Begin Enrollment for Legal Insurance or select decline coverage. | Choose your legal coverage or decline |
| 1. Review who you want covered and pick which Legal Insurance plan you want by clicking Select Plan or select decline coverage. Add dependents to your plan by clicking their name (if applicable). Make sure the dependents show green; this means they are covered. If they show as white, they will not be covered. Review coverage and click save. | pick who you want on your legal insurance plan. pick a plan with divorce coverage or without divorce coverage |
| 1. Click begin enrollment to pick with which company you want the college to contribute to your retirement. | begin enrollment for your college contribution to your retirement |
| 1. Answer if you have worked full-time for SLCC, left full-time employment, and then returned to full-time employment with SLCC | select if you have worked full-time for SLCC, left full-time employment, and then returned to full-time employment with SLCC |
| 1. Answer the question if you have had the state retirement plan and had retirement contributions with the state prior to this job and click next. | Answer the question if you have previously had a retirement with the state |
| 1. Select with which company you want the college to contribute to your retirement. Review your selection and click save   Please note that you can only pick the state retirement plan if you have had retirement contributions with them prior. | Pick between Fidelity, TIAA, State Retirement (if applicable), or Fidelity and TIAA |
| 1. Click continue to shop & offers | click continue to shop & offers |
| 1. Select Identity Protection and Nationwide Pet Insurance if you wish to enroll. If you want to decline these plans click complete enrollment. | Shop and Offers page for Identity Protection and Pet Insurance |
| 1. Review your selection and enter payment information if you enrolled in the Legal Plan | review benefits and add payment information (if applicable) |
| 1. Review Plan Enrollments and click Benefit Detail Report | completed enrollment page |
| 1. Review Enrollment | benefit detail report |
| 1. Click My Evidence of Insurability. This screen will only appear if you selected 4x your salary in supplemental life insurance. | click my evidence of insurability |
| 1. Your enrollment is complete and don’t forget to log out | log out by clicking on profile |

Contact the Benefits Office for Questions: 801-957-4595