

Employee Self -Service Guide

Sample Employee Open Enrollment Communication and Instruction

ADP Benefits & Talent Solutions





Overview

Open Enrollment Communication

ADP has provided a sample template for communicating Open Enrollment information to your employees. Keep in mind that Employee Self Service contains an Enrollment wizard that walks employees through Open Enrollment.

Please customize this template for your company where you find text that is formatted as follows:

- * Indicates areas where you may refer to the website in a different way. Please change the text, if appropriate.
- ** Indicates areas where you may need to enter your company-specific information.

You can also place customized instructions on the Home page, which allows you to provide your employees with additional information and directions. To customize instructions, click the **Configure homepage** icon.



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Sample Communication

Dear Employee,

We are excited to announce the start of Open Enrollment on the *Employee Self Service** website.

This letter explains what you need to do to complete your enrollments. The Open Enrollment period will last <<**ENTER DURATION>>**, starting <**ENTER DATE>>** and ending <**ENTER DATE>>**. All changes to your benefits must be completed by <**ENTER TIME and DATE>>**. The changes that you make to your benefits will take effect on **<ENTER BENEFIT EFFECTIVE DATE**>**.

Log in to Workforce Now to access the Employee Self-Service* website.

https://workforcenow.adp.com

۵	English (US) 🗸
	Welcome to ADP®
	er ID Remember User ID 0
	Next
	Forgot your user ID?
	New user ? 🎄 Create account
	Download the ADP mobile app Scan the OR code with your device to begin (if your employer supports the mobile experience). Secure and convenient tools right in your hands for simple, anytime access across devices.

Enter your User ID and password, and then click Sign In.

Note: If this is your first time logging in, click **Create account**. If you are unsure of the registration code, please contact your HR team.



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Upon logging in, you will be presented with a pop-up showing important information about this Open Enrollment period. You can click **Enroll Now** or **Remind Me Later**.

Note: This pop-up is displayed each time you log in during the Open Enrollment period. 24-hours after submitting your selections the pop-up will no longer display.



Select **Enroll Now** will bring you to the Myself – Benefits – Enrollments screen where you can click **Start Enrollment**.





You will be taken to the *Welcome Note*. Please review all information on this page, as there are often important details regarding your Open Enrollment options. Click **Next** after reviewing the Welcome Note to move to **Manage Dependents**.

0	pen Enrollment		×
W	/elcome	Welcome	
м	lanage Dependents	Welcome to the Open Enrollment period. This enrollment period gives you the opportunity to make election changes for certain benefits. During this enrollment period you can:	
Se	elect Benefits	Make changes to plan contributions, such as health savings account (HSA) or retirement plans	
U	pload Documents	Add or change the level of your insurance coverage Add or update Beneficiary assignment	
Re	eview and Submit	Complete Beneficiary assignment	
		Please review your options and costs carefully. Once the enrollment period has ended your choices will be final until the next enrollment period or until you have a qualifying life event. Contact your Human Resources department if you have questions.	

The **Manage Dependents** page is where you can add/view/edit your dependent and beneficiaries. Select "**Add dependent or beneficiary**" to add a new dependent/beneficiary. You would use the *3-dot* action icon to view/edit an existing dependent/beneficiary.

Back Next





Click **Next** to proceed to **Surveys**.

The **Survey** screen will prompt *only* if applicable based on the settings within the enrollment profile itself. If any tobacco attestation is required you must acknowledge the attestation ("I agree that all the information provided about my dependents and my tobacco usage is true and correct") in order for **Next** to be available and allow you to continue to the **Select Benefits** page.

Open Enrollment		×
Welcome	Surveys	
Manage Dependents	Before you continue, confirm the following information.	
Surveys	Tobacco Usage	
Select Benefits	Are you a Tobacco User?	
Review and Submit	 No Yes 	
	Is Spouse Name a Tobacco User?	
	O No	
	○ Yes	
	I agree that all the information provided about my dependents and my tobacco usage is true and correct	
	Finish later	Back Next





The below page is for clients with Decision Support enabled. Skip to pg 9 if you do not have Decision Support

The **Help Me Choose** step in the employee self-service wizard is where Decision Support (powered by Nayya) is located. It's an optional feature allowing you to walk through an interview-based questionnaire about health, lifestyle, and financial information to provide recommendations for the best benefit plan offerings, suited specifically for you. The responses you fill out are only between you and Nayya. Your employer will not be able to view any of the responses. On average, the Decision Support process will take around 13 minutes to complete.





The below page is for clients with Decision Support enabled. Skip to pg 9 if you do not have Decision Support

The next step is **Select Benefits**. You will see the plans that have been recommended by Nayya and plans that have already been selected.

You can continue to make enrollment changes outside of the recommendations. There are badges on each enrollment card, shown below, that display your enrollment status. (i.e. Selected = Enrolled, Recommended = part of recommendation)

en Enrollmen	t 2022			
come	Select Benefits			
nage Dependents				
veys	🛅 14 days left to enroll	Employer cost per paycheck	Your cost per paycheck	Go to section -
p Me Choose	Effective: September 1, 2022	\$65.88	\$20.34	
ect Benefits	Benefit recommendations just for you	1!		
load Documents	Based on your survey responses, we selected the following	ng benefit plans. Select the plan that best meets	your needs and begin you	r enrollment.
view and Submit	Action Required			
	You can confirm details for the plan we selected or select	t another one.		
	Critical Illness			View all plans
	DS Critical Illness		Selected	Recommended
	Effective: September 1, 2022			
	Who is covered?			Per Paycheck
	You			\$0.42
	\$30,000.00			
	Employee Coverage			
			Finish la	ter Back





Employee Self Service is split up into three sections: Action Required, Selected Plans and Eligible Benefits.

• Action Required – These are items that need to be reviewed to move forward. These plans could require a beneficiary to be designated or a waive reason to be provided.

Open Enrollment					×
Welcome	Select Benefits				i
Manage Dependents					
Surveys	11 days left to enroll Effective: August 1, 2022	Employer cost per paycheck	Your cost per paycheck	Go to section 🔹	
Select Benefits	Encouro, Pugus y LOLL	•	•		1
Review and Submit	Action Required These plans need your attention. You can confirm details for this plan or click View all plans t	Action Required These plans need your attention. You can confirm details for this plan or click View all plans to select another plan. You can also waive the benefit.			
	₩ Dental		Waive be	nefit View all plans	
	Multiple available options You have 3 benefit options available to choose from. See what is right for you!				

• Selected Plans – These are benefit plans that you are already enrolled in and can make changes to. This section also displays any enrollments that are pending additional approval.

Selected Plans	
You are enrolled in the following plans. You can make changes until the enrollment period closes.	
ି Medical	Waive benefit View all plans
HDHP 2021 Effective: July 1, 2022	O Pending Approval
Who is covered? You, Spouse Name, Child Name and Child Name	Per Paycheck \$138.00
♀ Miscellaneous	Waive benefit View all plans
Custom Medical 2022 Effective: January 1, 2022	Selected
Who is covered? You, newchildnew test, Child Name, Child Name and Spouse Name	PerPayoheok \$2.31



• Eligible Benefits – These are other benefit plans that are available for you to enroll in. If you select a benefit plan in the eligible benefits section, the enrollment will be moved to the Enrolled Benefits section.

Open Enrollment		×
	Eligible Plans You're eligible to enroll in the following plans.	
	© Vision View all plans	ן
	Vision, All Employee You have 1 benefit options available to choose from. See what is right for you!	
	di Health Savings Account	כ
	RC HSA You have 1 benefit options available to choose from. See what is right for you!	
	It's FSA Health Care	j
	Multiple available options	
	Finish later Back	Next

Waive benefit should only display for benefit plan types that require a waive reason. Employees should only select **Waive benefit** if you do not want to continue enrollment in a benefit or are not enrolled currently and a waive reason is required.

If you chose to *waive* a benefit, you will be required to select a Waive Reason.

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View all plans will allow the employee to view the plans that are available in that plan grouping.

Eligible Plans

You're eligible to enroll in the following plans.	
ଫ Medical Waive b	enefit View all plans
Multiple available options You have 3 benefit options available to choose from. See what is right for you!	

While enrolling in a plan, please be sure to indicate which dependents should be covered in the **Covered Individuals** section, if applicable. Then proceed with your enrollment.

Medical		
Select the plan that meets your needs and add the dependents you want to cover.		
Your company requires you to enter a reason to waive this coverage.		
Covered Individuals		
✓ John Snow (You) Sally Snow (Spouse)		
4 Plans Available +** Plan comparison		
Aetna Choice PPO		
(1 individual selected)		
Provider	Employer cost per paycheck	Your cost per paycheck
Aetna Inc.	\$245.90	\$112.52
Select plan		
RC HDHP		
(1 individual calactad) 🖪 Additional dataile		
	(Waive benefit Back

Note: The coverage level for your enrollment (Employee Only, Employee + Spouse, Employee + Child(ren), Employee + Family) is driven by which dependents you enroll.





When you choose to enroll in a plan, it will display the **Per Paycheck** cost for the employee and employer.

(1 in Pro	C PPO, Medical PPO ndividual selected) vider etna Inc.	Employer cost per paycheck \$60.00	Your cost per paycheck \$57.00
	Confirm the details for this plan selection or waive this benefit.	(Confirm details

Confirm details may include some additional information needed (i.e. PCP-ID).

Confirm Details	×
Aetna Inc.: RC PPO Medical PPO	
Covered Individual You	
Primary Care Physician Details	
John Snow Enter Primary Care Physician Detalls	
First Name ID Number	
Per Paycheck Costs Total Cost Per Paycheck \$57.00	
Back Confi	

Review your enrollment, costs, and covered individuals carefully before clicking on **Confirm**. Once confimed, you will receive a confirmation message that you are now enrolled and the enrollment will be displayed under **Selected Plans**.

elect Benefits					
You enrolled in RC PPO, Medical PPO.]	
The second secon	Employer cost per paycheck	Your cost per paycheck \$57.00	Go to section 🔹		
elected Plans					
ou are enrolled in the following plans. You can make changes until the enrollment	t period closes.				
V Medical		Waive be	enefit View all plans		~
RC PPO			Selected		
Effective: October 1, 2022					•••
Who is covered? You			Per Paycheck		•
			\$57.00		
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Voluntary Life Elections and Beneficiaries:

When you elect Voluntary Life, you will also need to designate your beneficiaries. Start by clicking **View all plans**, and then choose the amount of coverage you want to elect from the drop down.

ailable Plans		
overed Individual		
John Snow (You)		
an Available		
'- Voluntary Life		
vider		
ardian Life		
ardian Life Select Coverage Amount		
ardian Life Select Coverage Amount		
ardian Life Select Coverage Amount Additional Coverage Total Actual Coverage Amount		
ardian Life Select Coverage Amount Additional Coverage \$240,000.00 \$240,000.00		
ardian Life Select Coverage Amount Additional Coverage \$240,000.00 \$240,000.00		
aardian Life Select Coverage Amount Additional Coverage \$240,000.00 \$240,000.00 \$240,000.00 £vidence of Insurability will be required for this enrollment.	Evidence of Insurability (EOI) and approval from t	he insurance carrier.
sardian Life Select Coverage Amount Additional Coverage \$240,000.00 Evidence of Insurability will be required for this enrollment. A Over The Limit - Approval Required	Evidence of Insurability (EOI) and approval from t	he insurance carrier.
tardian Life Select Coverage Amount Additional Coverage \$240,000.00 Evidence of Insurability will be required for this enrollment. Over The Limit - Approval Required	Evidence of Insurability (EOI) and approval from t Employer cost per paysheek	he insurance carrier. Your cost per paycheck

If the amount selected is over the Guarantee Issue amount, additional approval will be required, and you will be asked to complete **Evidence of Insurability** (EOI) and submit it to your employer. Your full election amount will not be approved until this process is completed. Next you will want to enter your beneficiary designation. Including **Primary** and **Secondary**, if applicable. All beneficiary delegation percentages combined must equal 100% for each category (Primary or Secondary).

Beneficiary	Primary	Secondary	
Sally Snow	100 %	0 %	
Total	100.00%	0.00%	

Click **Confirm details** and review your selection and beneficiary delegations.

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Then click **Confirm** to continue with your enrollment elections.

Confirm Details

Covered Individ		
	191	
You		
Coverage		
Total Actual Coverag	e Amount	
\$240,000.0		
Beneficiaries		
Sally Snow (Spous	a)	Primary (100.00%)
Per Paycheck C	osts	
Employer Cost	Your Cost	
\$0.00	\$17.50	

Continue through each step until all elections are complete and all tasks under the **Action Required** section are addressed. When ready to proceed to the Summary page, click **Next** to proceed to **Review and Submit** step.

Back Confirm

Open Enrollment					×
Welcome	Select Benefits				
Manage Dependents					
Surveys	46 days left to enroll Effective: October 1, 2022	Employer cost per paycheck	Your cost per paycheck	Go to section 🝷	
Select Benefits					
Review and Submit	Selected Plans You are enrolled in the following plans. You can make changes until the enrollment period close	ses.			
	양 Medical		Waive bene	fit View all plans	
	Aetna Choice PPO Effective: October 1, 2022			Selected	×
	Who is covered? You and Sally Snow			Per Paycheck \$253.17	\mathbf{X}
	ି pental			View all plans	
			Finish I	ater Back Ne	a — 🔪 🚥
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Review all of your selections/changes. When you have confirmed them, click **Submit Enrollment**. Note that your benefit elections will not be processed until you click **Submit Enrollment.** If you click **Save for later** instead, these enrollments will not be submitted to your HR team until you fully submit the enrollment changes.

Open Enrollment			
Welcome	Review and Submit		
Manage Dependents			
Surveys	a 46 days left to enroll	Employer cost per paycheck	Your cost per paycheck
Select Benefits	Effective: October 1, 2022	Ş333.20	Ş293.17
Review and Submit	Your benefit elections will not be effective until you click Submit enrollment.		
	Enrolled plans		
	You are enrolled in the following plans. You can make changes until the enrollment period closes.		
	양 Medical		S Enrolled
	Effective: October 1, 2022		
	Aetna Choice PPO		\$253.17
	Who is covered?		Per Paycheck
	You and Sally Snow		
	() Dested		
		Finish later B	ack Submit enrollment

There will be a pop-up confirming your submission notating the date and time of submission. Please ensure you receive the confirmation note indicating your elections have been submitted.



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If you would like to make additional changes or modifications during the Open Enrollment Period, you may log in and navigate to Myself > Benefits > Enrollments and click the Manage Enrollment option in the Open Enrollment box. This will bring you back to the beginning of the profile to make any desired election changes.

		۹		
Home Resources - Myself -				
	My Information	Pay	Time & Attendance	Talent
	Profile	Personal Accrued Time	My Time Entry	Performance Dashboard
	Personal Information	Calculators	My Timecard	Performance Goals
	Dependents & Beneficiaries	Payment Options	Actual vs Scheduled	Compensation Notices
	Employment	Tax Withholdings	My Schedule	Career Center
	Organizational Chart	Total Rewards	Annual Summary	My Learning
	My Documents	Pay & Tax Statements	Holiday List	Benefits
	Surveys		Attendance	Enrollments
			Time Off	Employee Discounts - LifeMart
Enrollme	ents			
Open Enro	ollment		Submitted	
🌲 47 days left	to make changes			
	period is still open. You 022 at 11:59 p.m. ET.	ı can make chang	es until	
Manage enro	Reset ever	nt		

You may also navigate by finding the **My Benefits** tile on the homepage and select **Manage**. The tile will also reflect the "Submitted" status with the date and time of submission.



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