

BENEFITS Enrollment Guidelines

Click on any web address in the table to go directly to that website.

BENEFIT	IS ENROLLMENT REQUIRED?	CAN I ENROLL ON SELF SERVICE?	IS PAPER ENROLLMENT AN OPTION?
Health Insurance Dental Insurance Vision Insurance	Yes, even if you are electing to decline coverage.	Yes, during the initial 60 days of eligible employment, marriage or birth/adoption of a child; and annually during Open Enrollment. Enrollment at any other time must be done via paper enrollment form.	Yes. Use the RF Benefits Enrollment form.
Basic Life and AD&D Coverage	No, coverage is automatic.	Yes and no. Coverage is automatic, so you will not have to enroll, but you may designate or change beneficiaries during the initial 60 days of eligible employment and annually during Open Enrollment. Beneficiary changes at any other time must be made via paper enrollment form.	Yes and no. Coverage is automatic, so you will not have to enroll, but you may designate or change beneficiaries using the RF Benefits Enrollment form.
Optional Life and AD&D Coverage	Yes.	Yes, during the initial 60 days of eligible employment. At any other time, coverage and beneficiary changes must be made via paper enrollment form.	Yes. Use the RF Benefits Enrollment form. Evidence of insurability is also required for coverage increases and late enrollments.
Optional Dependent Life and AD&D Coverage	Yes.	Yes, during the initial 60 days of eligible employment. At any other time, coverage changes must be made via paper enrollment form.	Yes. Use the RF Benefits Enrollment form and Optional Dependent Life Enrollment form. Evidence of insurability is required for dependent or spouse coverage greater than \$20,000 and for coverage changes.
NY SDI/ PFL	No, coverage is automatic.	No, coverage is automatic.	No, coverage is automatic.
Voluntary Short-Term Disability	Yes.	Yes, during the initial 60 days of eligible employment. At any other time, coverage changes must be made via paper enrollment form.	Yes. Use the RF Benefits Enrollment form and Voluntary Short-Term Disability Enrollment form. Evidence of insurability is also required for coverage increases and late enrollments.
Long-Term Disability	No, coverage is automatic.	No, coverage is automatic.	No, coverage is automatic.
Basic Retirement	No. Contributions begin automatically after you satisfy the eligibility requirements.	No. However, you should log on to the vendor website (www.tiaa.org/rfsuny) to designate your beneficiary and/or if you would like to choose an investment option other than the default (age-based target date fund).	No. However, you should log on to the vendor website (www.tiaa.org/rfsuny) to designate your beneficiary and/or if you would like to choose an investment option other than the default (age-based target date fund).
Optional Retirement	Yes.	Yes, at any time during the year. However, you should log on to the vendor website (www.tiaa.org/rfsuny) to designate your beneficiary and/or if you would like to choose an investment option other than the default (age-based target date fund).	Yes. Use the RF Salary Reduction Agreement form. However, you should log on to the vendor website (www.tiaa.org/rfsuny) to designate your beneficiary and/or if you would like to choose an investment option other than the default (age-based target date fund).
Deferred Compensation (special eligibility rules apply)	Yes.	No. Paper enrollment form only.	Yes. Complete the voluntary salary deferral agreement and the TIAA enrollment form.
Health and Dependent Care Flexible Spending Accounts	Yes.	Yes, during the initial 60 days of eligible employment and annually during Open Enrollment. At any other time, coverage changes must be made via paper enrollment form.	Yes. Use the Flexible Spending Account Enrollment form.
RF Ride Transit Benefit	Yes.	Yes, but log in via the vendor website (www.payflex.com).	No.

BENEFITS How to View Your Benefits

GO TO: Employee Self Service Home > Main Menu > Employee Self Service > My Benefits

1. **Accept** the Legal Disclaimer verifying that you are providing accurate information and click **Next**.
2. On the Dependents and Beneficiaries page, you can review your dependent and beneficiary information. If you need to update this information see [How to Enroll in or Make Changes to Benefits](#) on the next page. Click **Next**.
3. Select the program you wish to review and click **Next**.
4. Click the **Current Benefits** tab and use the drop-down menu to select the effective date of the benefits you would like to review.
5. Click **Go**.

SUNY RF Employee Self Service

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Benefits Enrollment **Current Benefits**

Current Benefits Name **Pat Smith** Program **Benefits**

Please show me the benefits as of 01-Jan-2013 and later

Benefit Selections and Rate Details

Details	Plan	Option	Coverage Start Date	Coverage	Emp Pretax	Emp After Tax	RF Cost
Show	Healthcare - Blue Cross Traditional PPO - Pretax	EE Only	12-Feb-2012		35.73	0.00	262.01
Show	Dental - Dental Plan - Pretax	EE Only	01-Jul-2012		1.63	0.00	14.69
Show	Vision - Vision Plan	EE Only	01-Jul-2012		0.00	0.00	1.97
Show	Basic Life - Basic Life and ADD		01-Jul-2012	50000.00	0.00	0.00	2.40
Show	Short Term Disability - NYS		29-Jan-2012		0.00	0.00	2.02
Show	Long Term Disability - Long Term Disability		01-Jan-2013		0.00	0.00	6.89
Show	Flexible Spending Accounts - Health Care Spending Account	Dollar Amount	01-Jan-2012	2500.00	96.15	0.00	0.00
Show	Voluntary Life Insurance - Optional Life and ADD	4X Salary	01-Jul-2012	160000.00	0.00	7.04	0.00
Show	Voluntary Short Term Disability - Voluntary Short Term	\$400 Weekly Income	29-Jan-2012	400.00	0.00	6.80	0.00
Total					133.51	13.84	289.98

Beneficiaries

Plan	Option	Beneficiary	Relationship	Social Security Number	Primary	% Contingent	%
Basic Life - Basic Life and ADD		Pat Smith	Self	001-01-0002	100	0	

Benefits Enrollment Current Benefits Diagnostics Home Logout Preferences Help

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BENEFITS How to Enroll in or Make Changes to Benefits

GO TO: Employee Self Service Home > Main Menu > Employee Self Service > My Benefits

1. **Accept** the Legal Disclaimer verifying that you are providing accurate information and click **Next**.
2. On the Dependents and Beneficiaries page, you can add or update your dependent and beneficiary information.

To add dependents and/or beneficiaries:

Tip! Before getting started, be sure you have your dependent's or beneficiary's full legal name, date of birth and Social Security number (if one has been assigned).

- a. Click **Add Another Person**.
- b. Enter information in all the required (*) fields following the guidelines below. Social Security numbers are required unless your dependent has not yet been issued one. ←

If you are a new employee, the relationship start date is your date of hire.

If you have a new child, the relationship start date is your child's date of birth/adoption.

If you are adding a spouse, the relationship start date is your date of marriage.

If you have dependent changes for any other reason, contact your campus Benefits Office.

- c. Click **Apply** at the bottom of the screen to save your changes.
- d. Repeat these steps to add more dependents or beneficiaries.

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Dependents and Beneficiaries

Name Pat Smith

Add Another Person

Name	Relationship	Social Security Number	Birth Date	Update
No results found.				

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! Be very careful to enter your correct relationship start date. An error in this early step will create issues throughout your enrollment process that may force you to re-start or disqualify your enrollment.

When you add dependents any time after initial or open enrollment ends, your new dependents will need to be certified. When off-cycle changes are necessary to your dependents list due to birth, adoption, or marriage, you must submit legal documentation for the changes. Acceptable proof includes marriage and birth certificates or adoption documentation. Your campus Benefits Office must receive certification of your dependent changes before coverage will be effective.

BENEFITS How to Enroll in or Make Changes to Benefits *Continued*

To update information for a current dependent and/or beneficiary:

- a. Click the pencil icon in the row in which the person's name appears.
 - b. Update the information as needed.
 - c. Click **Apply** at the bottom of the screen to save your changes.
 - d. Repeat these steps to update more dependents and beneficiaries.
3. When you are finished adding/updating your dependents and beneficiaries, click **Next**.
 4. Select the **Benefits** program for the following benefits.

Enrolling In ...

Medical, Dental, Vision, Voluntary Life and AD&D Insurance, Voluntary Short-term Disability, Flexible Spending Accounts

Note: *Basic Life and AD&D, Short-term Disability, Paid Family Leave, and Long-term Disability are automatic benefits and do not require enrollment.*

Choose Program Name ...

Benefits

Qualified Transportation Benefit See carrier website to enroll, you will not be able to enroll here.

5. Click **Next**.



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SUNY RF Employee Self Service

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Dependents and Beneficiaries Name Pat Smith Cancel Next

Add Another Person

Name	Relationship	Social Security Number	Birth Date	Update
David Smith	Spouse	001-01-0009	01-Apr-2000	
Grace Smith	Child	001-01-0010	27-Jul-2007	

Cancel Next

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BENEFITS How to Enroll in or Make Changes to Benefits *Continued*

- On the Benefits Enrollment page is a summary of your current benefit elections. All newly eligible employees will default to “Waived” for Health, Dental and Vision coverage. To make your elections, click **Update Benefits** on the bottom right. For more information about your options, visit www.rfsuny.org/benefits.
- Use the checkboxes and fields to enter your elections for each benefit. Benefit levels with a certificate icon next to them require certification. Also, some benefits are provided to you automatically at no charge. You will not be able to change those elections.

Tip! Select the pre-tax option to ensure your benefits are exempt from taxes.

If you don't see the benefit options you're looking for, make sure you have added all your dependents and their birth dates. If you go back to add dependents or beneficiaries, your Benefits Enrollment changes will not be saved. If you are not eligible for a certain option and you think you should be, contact your campus Benefits Office.

! *Your Dependent Care and/or Health Care Spending elections must be entered annually. The amount you enter for dependent care should not include the employer subsidy. To receive the subsidy, you must check the Dependent Care Spending Employer Subsidy box.*

- When you're ready to elect coverages for specific dependents, click **Next**.

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Update Enrollments

Name: **Pat Smith** Program: **Benefits**
 Event Name: **1.0 FTE Gain** Enrollment Period: **01-JAN-2014 - 02-MAR-2014**

Healthcare

Plan	Option	Select	Emp Pretax	Emp After Tax	RF Cost
Blue Cross Traditional PPO - Pretax	EE Only	<input type="checkbox"/>	35.73		262.01
	EE + Spouse	<input type="checkbox"/>	123.82		500.16
	EE + Child(ren)	<input type="checkbox"/>	97.45		428.87
	EE + Family	<input checked="" type="checkbox"/>	195.88		694.99
Blue Cross Deductible PPO - Pretax	EE Only	<input type="checkbox"/>	0.00	0.00	0.00
	EE + Spouse	<input type="checkbox"/>	0.00	0.00	0.00
	EE + Child(ren)	<input type="checkbox"/>	0.00	0.00	0.00
	EE + Family	<input type="checkbox"/>	0.00	0.00	0.00
CDPHP - Pretax	EE Only	<input type="checkbox"/>	32.66		239.50
	EE + Spouse	<input type="checkbox"/>	106.14		438.19
	EE + Child(ren)	<input type="checkbox"/>	98.80		418.32
	EE + Family	<input type="checkbox"/>	164.94		597.13
MVP - Pretax	EE Only	<input type="checkbox"/>	35.24		258.44
	EE + Spouse	<input type="checkbox"/>	115.79		476.22

Flexible Spending Accounts

Plan	Option	Select	Coverage	Emp Pretax
Health Care Spending Account	Dollar Amount	<input type="checkbox"/>	0.00	0.00
	Dollar Amount	<input checked="" type="checkbox"/>	500.00	19.23
Dependent Care Spending Employer Subsidy		<input checked="" type="checkbox"/>	700.00	

BENEFITS How to Enroll in or Make Changes to Benefits *Continued*

9. Use the checkboxes to designate which dependents receive which coverages.
10. Once you have made your elections, click **Next**.
11. On the Beneficiary Selection page, update your beneficiary designations. Click **Recalculate** to ensure your totals do not exceed 100%.

Tip! If you would like some or all of your benefits to go to your estate, assign the percentage to your own name.
12. Once you have entered your beneficiary designations, click **Next**.
13. On the Confirmation Statement, you can review your elections to confirm they are accurate.
 - a. **To print your Confirmation Statement**, click **Confirmation Statement**, and then use your browser's print function.
 - ! *You will not have a chance to review your confirmation statement again, so be sure to print it now for future reference.*
 - b. **To make changes to your elections**, click **Back**.
 - c. **To complete the enrollment process**, click **Finish**.

On the Confirmation Statement page, you may see warnings indicating that proper certification is required before coverage can begin for your dependents. Please contact your campus Benefits Office for more details.

*Tip! To enroll in Optional Retirement, click the **Change Program** tab at the top of the page to switch the benefits program to Optional Retirement and start at step 3 in the Optional Retirement section.*

SUNY RF Employee Self Service

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Benefits Enrollment **Current Benefits**

Update Enrollments Cover Dependents Update Beneficiaries **Confirmation Statement**

Confirmation
Your changes have been saved. To make additional changes, return to the Overview page and repeat the process. Please print this page for your records.

Confirmation Statement
Name: **Pat Smith** Program: **Benefits**
Event Name: **1.0 FTE Gain** Enrollment Period: **01-JAN-2014 - 02-MAR-2014**

TIP Click Confirmation Statement to get a PDF document of your enrollments. Click Finish to complete the enrollment process, then click the Logout link when you are ready to leave the application.

Benefit Selections

Plan	Option	Coverage Start Date	Coverage	Emp Pretax	Emp After Tax	RF Cost
Healthcare - Blue Cross Traditional PPO - Pretax	EE + Family	12-Feb-2014		195.88	0.00	694.99
Dental - Dental Plan - Pretax	Family	01-Jul-2014		7.20	0.00	31.38
Vision - Vision Plan	Family	01-Jul-2014		0.00	0.00	4.68
Basic Life - Basic Life and ADD		01-Jul-2014	50000.00	0.00	0.00	2.40
Short Term Disability - NYS		29-Jan-2014		0.00	0.00	2.02
Long Term Disability - Long Term Disability		01-Jan-2015		0.00	0.00	6.89
Flexible Spending Accounts - Dependent Care Spending Account	Dollar Amount	01-Jan-2014	500.00	19.23	0.00	0.00
Flexible Spending Accounts - Dependent Care Spending Employer Subsidy		01-Jan-2014	700.00	0.00	0.00	0.00
Total				222.31	0.00	742.36

Covered Dependents

Plan	Option	Coverage Start Date	Dependent Relationship
Healthcare - Blue Cross Traditional PPO - Pretax	EE + Family	12-Feb-2014	David Smith Spouse
		12-Feb-2014	Grace Smith Child
Dental - Dental Plan - Pretax	Family	01-Jul-2014	David Smith Spouse
		01-Jul-2014	Grace Smith Child
Vision - Vision Plan	Family	01-Jul-2014	David Smith Spouse
		01-Jul-2014	Grace Smith Child

Beneficiaries

Plan	Option	Beneficiary Relationship	Social Security Number	Primary %	Contingent %
Basic Life - Basic Life and ADD		David Smith Spouse	001-01-0009	100	0

Back Confirmation Statement Finish

Benefits Enrollment Current Benefits Diagnostics Home Logout Preferences Help

BENEFITS How to Enroll in or Make Changes to Optional Retirement

GO TO: Employee Self Service Home > Main Menu > Employee Self Service > My Benefits

1. **Accept** the Legal Disclaimer verifying that you are providing accurate information and click **Next**.
2. On the Dependents and Beneficiaries page, click **Next**.
3. Select the **Optional Retirement** program and click **Next**.
4. On the Benefits Enrollment page is a summary of your current Optional Retirement election (stated as a percentage of gross pay). To enroll or update this amount, click **Update Benefits** on the bottom right.
5. Enter the percent of gross pay you would like to contribute and click **Next**.
6. Click **Next** again as there are no covered dependents for this program and beneficiaries must be designated at TIAA-CREF.
7. On the Confirmation Statement, you can review your elections to confirm they are accurate.
 - a. **To print your Confirmation Statement**, click **Confirmation Statement**, and then use your browser's print function.
 - ! *You will not have a chance to review your confirmation statement again, so be sure to print it now for future reference.*
 - b. **To make changes to your elections**, click **Back**.
 - c. **To complete the enrollment process**, click **Finish**.

This deduction will take place immediately, and be processed in the first pay period to be run after you have made your election.

The screenshot shows the 'Select Program' page in the SUNY RF Employee Self Service system. The user's name is Pat Smith. There are two radio button options: 'Benefits' and 'Optional Retirement'. The 'Optional Retirement' option is selected. A red circle with the number '3' and a dashed arrow points to the 'Optional Retirement' radio button. The page includes navigation links like 'Diagnostics', 'Home', 'Logout', 'Preferences', and 'Help' at the top and bottom.

Note that you can review your dependent and beneficiary information, but all beneficiaries for Optional Retirement must be managed at TIAA-CREF.