

Postcard  
from the  
path...

## Open Enrollment 2009 - How To Enroll Overview

### What is Open Enrollment?

Open Enrollment is the period when you are given an opportunity to review your current benefit elections, review insurance plans and make benefit changes to meet your needs and the needs of your family.

### How do I enroll or make changes to my current health care benefits?

Access the Ohio Administrative Knowledge System (OAKS) Self Service at [eBenefits.ohio.gov](http://eBenefits.ohio.gov).

You will need your OAKS Employee ID to enroll. If you have forgotten your Employee ID number, you may contact the Ohio Department of Administrative Services Human Capital Management Customer Service Unit:

E-Mail:  
[dashrd.hcmoakssupport@das.state.oh.us](mailto:dashrd.hcmoakssupport@das.state.oh.us)

Phone:  
614.466.8857 or 1.800.409.1205

To enroll, click on the 2009 Open Enrollment link at [das.ohio.gov/benefits](http://das.ohio.gov/benefits).

### Access OAKS Self Service at [eBenefits.ohio.gov](http://eBenefits.ohio.gov) to make changes:

- May 4-8, and May 11-15:  
All day except 7 pm to 9 pm.
- Saturday, May 9: All day except 4 pm to 6 pm.
- Sunday, May 10: All day except 4 pm to midnight.
- Saturday, May 16: All day except 4 pm to 6 pm.
- Sunday, May 17: All day through OAKS Self-Service ending at 11:59 pm.

### Paper enrollment forms available:

Contact your agency's human resources benefits specialist to complete a personalized paper enrollment form generated from OAKS.

You may also access a Medical Benefit Enrollment and Change Form (ADM4717) on the Open Enrollment Web page at [das.ohio.gov/benefits](http://das.ohio.gov/benefits).

Paper enrollment forms must be completed and submitted to your agency's human resources office by the Open Enrollment deadline, Sunday, May 17.

**OhioDAS**

...walking together down a path of wellness, through insight and information for a healthy workforce.

# Top Ten Q's and A's about Open Enrollment

1	<b>When is Open Enrollment?</b> May 4 - May 17.
2	<b>Do I need to take any action during Open Enrollment if I'm not making any changes?</b> If you are making no changes in your plan selections and no changes in your dependents, you don't need to take any action. However, we encourage all employees to verify that their dependents are eligible for coverage.
3	<b>Do all of the medical plans have a deductible starting in July?</b> Yes.
4	<b>Do I have to pay extra for my wife even if we have our children on our plan?</b> Yes. There is a \$12.50 per month surcharge for all spouses. When divided into 26 pays (\$12.50 X 12 divided by 26), this will add \$5.77 to your bi-weekly employee contribution rate.
5	<b>I cover only myself and my spouse. I have no children on my plan. Why do I have to pay more than employees who are covering multiple children?</b> The cost to cover an adult is considerably higher than the cost to cover a child.
6	<b>Do we still have two "free pays" a year?</b> No. Beginning July 1, 2009, the amount paid by the employee for health insurance will be paid over 26 rather than 24 pays.
7	<b>Do I need to enroll if I am not changing medical, dental or vision?</b> No. You will continue to be enrolled in these programs unless you go into OAKS and make a change or complete a paper enrollment form.



8	<b>I understand that we are going current with our health care contribution rates beginning July 1, 2009. Does this mean we have a free month for health care deductions since we pay a month in advance?</b> No. Employees that enrolled in health care prior to July 1, 2009 will have insurance coverage until the last day of the month following termination. Employees enrolling in health care beginning July 1, 2009 and later will have coverage until the end of the month in which they are terminating.
9	<b>Does my office visit copay count towards my out-of-pocket maximum?</b> Yes.
10	<b>What are out-of-pocket expenses?</b> Copays + Deductibles + Coinsurance = Out-of-pocket expenses.