

# Benefits Enrollment Instructions



## To enroll or disenroll, please follow the steps below:

1. Review information about available benefits by carefully reading this Open Enrollment edition of *Pathways to myBenefits*. If you have questions, contact your agency benefits representative, human resources office or the Ohio Department of Administrative Services' HR Customer Service desk at 1.800.409.1205, Option 2.
2. Enroll in medical, dental and vision coverage or make changes to your current coverage or your dependents' current coverage by going online to [myOhio.gov](http://myOhio.gov) or by obtaining a paper form.

### A. Online

- Go to [myOhio.gov](http://myOhio.gov). Enter your State of Ohio User ID and password. If you have forgotten your State of Ohio User ID or password, contact HR Customer Service by calling toll-free, 1.800.409.1205, or in Columbus, 614.466.8857. Make sure to select Option 1 when prompted;
- Click on **myBenefits** under Self Service Quick Access on the right side of the page;
- The Benefits Summary page will open; review your current benefit information;
- Click on **Enroll in Benefits and make the necessary changes or updates**.
  - Submit your enrollment or changes. All transactions must be completed, submitted and confirmed prior to 7 p.m. Friday, May 16. The system will not accept any entries beginning at 7 p.m. Friday, May 16. Make sure your online changes are correctly submitted by clicking the **SUBMIT** button on the last two pages of the process. At the end, you will receive a confirmation message that can be printed for your records.
    - For detailed instructions on how to enroll or disenroll online, go to: [das.ohio.gov/EnrollmentInstructions](http://das.ohio.gov/EnrollmentInstructions).
    - Online Open Enrollment is available May 5 to 16, 2014, as follows:
      - Weekdays – All day except 7 to 9 p.m.
      - Saturdays – All day except 4 to 6 p.m.
      - Sundays – All day except 4 p.m. to midnight

### B. Paper

- For medical coverage for all eligible employees and dental and vision coverage for exempt employees, obtain a paper State of Ohio Benefit Enrollment/Change Form (ADM 4717) on the Benefits Administration website at: [das.ohio.gov/HealthCareForms](http://das.ohio.gov/HealthCareForms) or from your agency's human resources office.
- For all bargaining unit members, forms to change dental and vision coverage are available at [www.benefitstrust.org](http://www.benefitstrust.org) > Forms & Info.
- Submit your enrollment or changes by giving your completed and signed State of Ohio Benefit Enrollment/Change Form (ADM4717) and/or the Union Benefits Trust Dental & Vision Enrollment Form to your agency's human resources office by 4 p.m. Friday, May 16.

Following Open Enrollment all employees will receive a confirmation letter in the mail. This letter should arrive in early June. Please review this letter carefully to ensure your enrollment elections have been processed correctly.



## IMPORTANT

If you are enrolling for the first time and/or adding new dependents during this Open Enrollment, you must provide the required eligibility documentation for your dependents. A listing of the required documentation can be found at: [das.ohio.gov/eligibilityrequirements](http://das.ohio.gov/eligibilityrequirements).

Coverage will not be provided for dependents until the eligibility documents are received and approved. The final deadline to submit all required documentation is July 31.