This job aid provides instructions to new employees about how to enroll in benefits online through eBenefits. If you have questions, please contact your agency payroll and benefits office.

You have 30 days from your date of hire to enroll in benefits. Once you begin enrolling through eBenefits, you must make ALL your elections at the same time. Before you begin, you should know the plans in which you want to enroll. If you are covering family members, you will need their name, date of birth and Social Security number.

**HEALTH INSURANCE INFORMATION**

Each health plan has 4 enrollment options:
- Regular plan with dental (e.g. Dean w/ Dental)
- Regular plan without dental (e.g. Dean no Dental)
- High Deductible Health Plan with dental (e.g. HDHP Dean w/ Dental)
- High Deductible Health Plan without dental (e.g. HDHP Dean no Dental)

See #8 below to learn how to turn on a health plan filter to reduce the health plans that appear on the enrollment page.

**EMPLOYEES WITH NO PRIOR WISCONSIN RETIREMENT SYSTEM (WRS) SERVICE**

- **Health (Waiting Period) Plan**: coverage is effective on the 1st of the month on or following the completion of 2 months of WRS state service. Coverage will begin when you are eligible for the employer contribution towards health insurance.
- **Health (100% Employee Paid) Plan**: coverage is effective on the 1st of the month that first occurs during your 30-day enrollment period. You will pay the full cost of coverage until you have 2 months of WRS state service. If you enroll in this plan, you must first make your election in the same health plan on the Health (Waiting Period) Plan page.

**ENROLLING IN BENEFITS**

1. Log in to Employee Self Service: [https://ess.wi.gov](https://ess.wi.gov)
2. Click on the My Benefits Tile on the Employee Self Service Homepage.
3. Click on the Benefits Enrollment page in the My Benefits Navigation Collection.
4. This will bring you to the Enrollment Landing Page. Review the material on this page and click on the Select button to start the enrollment process.
5. You will see the Enrollment Summary Page. Only benefit plans that you are eligible for will be listed on this page.

**SELECTING A PLAN**

6. To enroll in a benefit plan, click Edit next to the plan.
7. Enrollment options for that plan will display. To select a plan, click on the radio button next to the plan name. If you want to Waive coverage, scroll to the bottom of the page and click the radio button next to the Waive option.
8. On the health insurance page, you can turn on a filter to reduce the number of plans that appear on the page. Click the radio button next to the types of plans you would like to see and click Apply Filter.
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ADDITION DEPENDENTS

When you make a benefit election, you do not pick the coverage level (ex. single, family...). The system will determine the correct coverage level when/if you enroll dependents in the plan.

9. Once you make your plan selection, scroll down to the bottom of the page to add your dependents.

10. Click on Add/Review Dependents

11. On the next screen, click on Add a dependent

12. Enter the following information for each dependent:
   - First Name
   - Last Name
   - Name Prefix/Suffix (if applicable)
   - Date of Birth
   - Gender
   - Social Security Number
   - Relationship to Employee
   - Marital Status
   - Marital Status as of date (if single, do not need to enter a date)
   - Disabled status of any children if over age 26

13. If the dependent’s address and phone are the same as the employee’s, click on the applicable checkbox. If different, enter the address and/or phone number.

14. Scroll down and click Save to add the dependent and click OK.

15. Review the information on the new dependent and repeat process if you have additional dependents to add.

16. Once all dependents are entered, click Return to Event Selection.

17. Once you have made your selection on the page, scroll to the bottom of the page and check the enroll box next to the dependents you want to enroll and click Update and Continue. If you do not want to save your changes, click Discard Changes.

REMINDER – if you enroll in family health insurance, you are required to cover all eligible family members. For the dental and vision plans, there is no requirement to cover all family members if you elect family coverage.

18. When you click Update and Continue, you will be brought to a page that confirms your election. Review this information for accuracy and click Update Elections. This will save your elections.
19. You will be brought back to the **Enrollment Summary Page**. You will see your election next to “New”.

20. Continue making your benefit elections by clicking **Edit** next to the plan and enter your election.

21. There are 6 plans that require you to either enroll or waive coverage:
   - Health
   - State Group Life
   - State Group Life Additional (must waive even if you waived State Group Life)
   - State Group Life Spouse & Dep (must waive even if you waived State Group Life)
   - ICI Standard
   - ICI Supplemental (only available to employees who earn more than $64,000/year)

   You will not be able to submit your elections until you either enroll in or waive coverage for the plans listed above.

22. Once you have made all your elections, scroll to the bottom of the **Enrollment Summary** page and click **Save and Continue** to begin the submission process.

23. If you enrolled in health insurance, you will be required to indicate if you have Other Health Insurance or Medicare. If you answer “Yes”, complete the requested information about the plan if available.

   The “Other Health Insurance” is asking if you will have other health insurance effective when your State health insurance begins. **If you currently have other insurance but it will end when your State insurance starts, you should answer “No” to Other Health Insurance.**

24. Click **Save and Continue**.

25. Once you save your elections, you are taken to the **Submit Benefits Choices Page**. You MUST click the **Submit** button on this page to submit your final elections.

26. After you click **Submit**, you will be taken to the **Submit Confirmation Page**. This confirms that your elections have been submitted.
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REVIEWING YOUR BENEFIT SUMMARY

1. Overnight, your benefit elections will be finalized. You can confirm your elections by reviewing your benefits summary the day after you submit your elections.


3. Click on the My Benefits Tile on the Employee Self Service Homepage.

4. Your Benefits Summary as of today will automatically appear on the page.

5. Enter the date that your benefits are effective on the top of the page. Click Refresh.

6. All benefit elections as of the date on the page will be listed. Click on the arrow at the far right for more information about the plan and/or a list of covered dependents.

RESOURCES

Health Insurance
- 2022 Health Insurance Landing Page
- 2022 It’s Your Choice Decision Guide
- Health Plan Search
- Premiums
- Health Plan Design Comparison

Supplemental Plans
- Basic Dental Coverage
- Supplemental/Major Dental Coverage
- Dental Comparison Chart
- DeltaVision Website
- DeltaVision Summary of Benefits
- Securian Accident Plan
- Accident Plan Benefit Summary

Life Insurance
- State Group Life Insurance

Disability Insurance
- Income Continuation Insurance

Pre-Tax Savings Plans (Healthcare FSA, Dependent Day Care FSA, Pre-Tax Parking/Transit Accounts)
- Optum Financial | ConnectYourCare Website
- Pre-Tax Savings Plan Page (ETF)

Health Savings Accounts
- HSA Plan Webpage

Wellness
- Well Wisconsin Portal

Savings Plans
- Wisconsin Deferred Compensation (457 Plan)
- Edvest (529 College Savings Plan)

Health Insurance Opt-Out Stipend
If not enrolling in health insurance, you may be eligible for a health insurance opt-out stipend. See the health insurance page in eBenefits for eligibility requirement. You must Waive your health insurance in eBenefits and complete a paper health insurance application to apply for the stipend within 30 days of hire.

Benefits Mentor – Your Interactive Benefits Counselor

IBM Benefits Mentor is the new interactive benefits counselor for active state employees. Benefits Mentor will use your claims information (if available) as a basis for personalized plan design recommendations. Benefits Mentor also considers your medical needs and what is the most important to you when choosing a health plan.

You will need to register and verify your email address prior to using Benefits Mentor for the first time. See How to Sign Up for Benefits Mentor to get started.

*Chrome is the preferred browser for Benefits Mentor. You are not enrolling through Benefits Mentor. Enroll as directed by your agency.