

The purpose of this job aide is to guide with making any insurance/benefit changes during Open Enrollment. **Please Note: You MUST make a selection for Medical Insurance. If no selection is made, you will automatically be assigned and you may forfeit Gym enrollment.**

Open Enrollment Benefits Election

Step 1

- Open an Internet Browser
- Navigate to [Employee Self-Service](#) login
- Enter User ID (Employee ID i.e. – E12345)
- Enter Password
- Select Sign In

If you have issues logging in, please contact The Help Desk at 505-768-2930.

Step 2

- On the dashboard page, click the Open Enrollment tile
- There will be a countdown to Open Enrollment, once the countdown hits **zero** you will no longer be able to access Open Enrollment

Step 3

- On the next page, you'll be welcomed and provided **IMPORTANT** information about benefits as well as an Open Enrollment events schedule.
- Click "Next" on the right-hand side of the screen.

Open Enrollment Benefits Election

Step 4

- Review your Home/Mailing Address. If your Home/Mailing Address needs to be updated, please select the corresponding section(s) to be updated. The mailing address is used to send benefits information and provider cards. Once updated, select the save button on the top right of the pop-up page. Confirm your information is correct, click the Next button. **[Note: If your Home/Mailing Address is up to date, select the Next button to skip this step.]**

Address

Instruction
To save United States addresses at least one of the following fields must get populated: Address 1, Address 2, Address 3

Change As Of: 04/23/2024

Address Type: Home

*Country: United States

Address 1: [Redacted]

Address 2: [Redacted]

Address 3: [Redacted]

City: Albuquerque

State: New Mexico

Postal: [Redacted]

County: [Redacted]

Buttons: Cancel, Save

Step 5

- Review your Contact Information. If your Contact Information needs to be updated, please select the phone number or email address to be updated. Once updated, select the save button on the top right of the pop-up page. Confirm your information is correct, click the Next button. **[Note: If your Contact Information is up to date, select the Next button to skip this step.]**

Personal Information - Please Review and Update as necessary

Phone

Number	Extension	Type	Preferred
505: [Redacted]		Main	✓
505: [Redacted]		Work	

Email
No email exists
Add Email

Instant Message
No instant message exists
Add IM

Step 6

- Review your Dependent/Beneficiary information. **PLEASE DO NOT OVERRIDE INFORMATION WITH A DIFFERENT DEPENDENT.** If you need to **add** a Dependent/Beneficiary select the “Add Individual” button. Once done, click the Next button. [Note: You may update information by clicking on the arrow to the right of the individual’s name.]

Open Enrollment
Enrollment Period 4/5/2024 - 5/31/2024
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Do not overwrite any dependent/beneficiary. To add a dependent/beneficiary, click Add Individual.

Select to update Dependent/Beneficiary information

Name	Relationship	Beneficiary	Dependent	Attachment
[Redacted]	Parent	✓		
[Redacted]	Parent	✓		
[Redacted]	Domestic Partner Adult	✓	✓	
[Redacted]	Child	✓	✓	View
[Redacted]	Child	✓	✓	Incomplete

Step 7

- Next, you’ll be taken to the Benefits Enrollment page. **IMPORTANT:** You **MUST** select an option for your Medical Plan. If you do not make a selection, you will automatically be assigned. You must also select the “Taxable Gym Plans” if you would like to add the Gym Benefit. Medical Plan Enrollment is required for Gym enrollment.

Open Enrollment
Enrollment Period 4/5/2024 - 5/31/2024

Benefits Enrollment

The Enrollment Overview displays which benefit options are open for edits. All of your benefit changes will be effective the date of the event.
You MUST click on “External Enrollment” for the elections to be sent to the Benefits Office.

Enrollment Summary

Your Pay Period Cost: \$10.75
Status: Pending Review
Subsidized Enrollment

Full Cost: \$10.75
Employer Cost: \$18.51

Medical | Taxable Gym Plans | Dental

Medical: Current: Prohibited/Active with Gym, New: Wave, Status: Visited, Pay Period Cost: \$0.00

Taxable Gym Plans: Current: No Coverage, New: No Coverage, Status: Visited, Pay Period Cost: \$0.00

Dental: Current: Delta Dental, New: Delta Dental, Status: Visited, Pay Period Cost: \$2.98

You must click here if you would like to enroll for the Gym Benefit.

- Take time to review all of your current benefits by visiting the individual **Benefit Plan Boxes**.
- If you would like to change or waive any benefit, select the box to update. This will open a new screen where you will be able to make changes.
 1. While making your decision you may select the “Medical Provider” link to the right of the page.
 2. Once you’ve made your decision, click “Select” next to the plan you have decided to elect. If you choose to waive the benefit, click Select next to Waive.
 3. If adding Dependents click the box next to each Dependent you wish to enroll.
 4. Select “Done” at the top right of the page when you’ve selected your plan.

Medical 4 Done

All of our medical choices provide wellness as part of their benefits and are available to protect you and your dependents if you become sick or injured. Enrollment in the benefits may require proof of coverage.

Enroll Your Dependents

Dependents that the employee has registered are listed here. Select the Add/Update Dependent button to view, update or add a new dependent.

Dependents	Relationship
<input type="checkbox"/>	Domestic Partner Adult
<input type="checkbox"/>	Child
<input type="checkbox"/>	Child

Enroll in Your Plan

The EE + EE Child + DP cost shown for each plan is based on the dependents enrolled. Plans that do not offer coverage for the dependents enrolled are not available to select. To see other coverage costs for individual plans, select the help icon corresponding to each plan option.

Plan Name	Before Tax Cost	After Tax Cost	Employer Cost	Pay Period Cost
<input type="checkbox"/> BCBS EPO in Network Only	\$93.16	\$77.13	\$681.17	\$170.26
<input type="checkbox"/> BCBS PPO in & Out of Network	\$93.16	\$77.13	\$681.17	\$170.26
<input checked="" type="checkbox"/> UHC EPO in Network Only	\$93.16	\$77.13	\$681.17	\$170.26
<input type="checkbox"/> UHC PPO in & Out of Network	\$93.16	\$77.13	\$681.17	\$170.26
<input type="checkbox"/> Waive				\$0.00

Contact Information

Phone: 505/768-3758
 Email: en@albuquerquebenefits@city.gov
 Address: PO Box 1283, Albuquerque, NM 87103

Resources

Once **ALL** benefit selections are made and are correct, you may finish your election by selecting the **“Submit Enrollment”** button for completion. Select the “Next” button.

IMPOTANT REMINDERS:

- If you would like to keep your Flex Spending, this does have to be re-elected.
- If you are increasing your Voluntary Life and/or are adding a new dependent to this benefit, an [Evidence of Insurability](#) may be required.

Open Enrollment

Enrollment Period 4/5/2024 - 5/31/2024

Benefits Enrollment

The Enrollment Overview displays which benefit options are open for edits. All of your benefit changes will be effective the date of the event. You **MUST** click on **“Submit Enrollment”** for the elections to be sent to the Benefits Office.

Enrollment Summary

Your Pay Period Cost: **\$181.04**
 Status: Submitted

Full Cost: **\$181.04**
 Employer Cost: **\$689.68**

STD - Vision
 Medical

Contact Information

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 Email: en@albuquerquebenefits@city.gov
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Resources

Open Enrollment Benefits Election

Step 8

- The Benefits Statement drop down will allow you to review your Confirmation Statements and Submitted Enrollments.
- Each individual event will show specifics on your elections when selected and will allow you to print the information.
- Select the Next button

The screenshot shows the 'Open Enrollment' page with an enrollment period of 4/5/2024 to 5/31/2024. A dropdown menu for 'Statement Type' is open, showing 'Confirmation Statement' and 'Submitted Enrollment'. A red circle highlights the dropdown menu, and another red circle highlights the 'Next' button in the top right corner.

Step 9

- Once at the Summary Page, you have completed your Open Enrollment event. If you need to go back to any portion, select the “Previous” button.

NOTE: The Summary page will also provide you with a timeframe as to how long you may return to the event and make any updates.

The screenshot shows the 'Open Enrollment' page with an enrollment period of 4/5/2024 to 5/31/2024. The page title is 'Summary with Info Only'. A red circle highlights the 'Previous' button in the top right corner.

Summary with Info Only

If you have submitted your enrollment, review your elections on the Benefits Statements step and keep a copy of your submitted elections as a record. If you have not completed your elections, go to the Benefits Enrollment step and complete your elections by selecting the Submit Enrollment button.

You can return to this event before 11:59PM MST, 5/31/2024 by selecting the Open Enrollment file on Employee Self Service. Once the open enrollment period ends, your elections will be validated and finalized. If you did not submit your elections, your enrollment will be based on the default options. If you have any questions please contact the Insurance & Benefits Division of the Human Resources Department at employeeaffairs@cityofalbuquerque.gov or (505) 768-3758.