









# Quick Reference Guide for 2022 Benefits Open Enrollment



Begin the Open Enrollment Process													
<p>During the Open Enrollment dates, you will see the following Announcement and an Inbox Task</p> <p>To start your benefit enrollments, click on the link:</p> <p style="text-align: center;"><i>Announcement</i> <i>or</i> <i>Inbox Task item</i></p>	<div style="border: 1px solid red; padding: 5px; margin-bottom: 10px;">  Announcements 1 item                 </div> <div style="border: 1px solid red; padding: 5px; margin-bottom: 10px;">  <p>Click Benefit Open Enrollment. FSA and HSA election will need <b>Benefits Open Enrollment</b></p> </div> <p style="text-align: center;">OR</p> <div style="border: 1px solid red; padding: 5px;">  Inbox 1 item                 </div> <div style="border: 1px solid red; padding: 5px; margin-top: 5px;"> <p><b>Open Enrollment Change:</b></p> </div>												
<p>Click "Let's Get Started" on the next screen</p>	<div style="border: 1px solid red; padding: 5px; text-align: center;"> <p>Let's Get Started</p> </div>												
Start Open Enrollment Elections – Medical, Dental and Vision Enrollment													
<p>Click <b>Enroll or Manage</b> under each benefit plan you want to be covered in 2022</p> <ul style="list-style-type: none"> <li>• <b>Medical</b></li> <li>• <b>Dental</b></li> <li>• <b>Vision</b></li> </ul>	<div style="border: 1px solid red; padding: 5px;"> <p>Health Care and Accounts</p> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid #ccc; padding: 5px; text-align: center;">  Medical Waived  <b>Enroll</b> </div> <div style="border: 1px solid #ccc; padding: 5px; text-align: center;">  Dental Waived  <b>Enroll</b> </div> <div style="border: 1px solid #ccc; padding: 5px; text-align: center;">  Vision Waived  <b>Enroll</b> </div> </div> </div>												
<p>Click <b>Select</b> for the benefit plan you want to enroll</p> <p>Click <b>Confirm and Continue</b> (select dependents on the next page)</p>	<div style="border: 1px solid red; padding: 5px;"> <p>*Selection</p> <p><input checked="" type="radio"/> Select</p> <p><input type="radio"/> Waive</p> </div> <div style="text-align: center; margin: 10px 0;">  </div> <div style="border: 1px solid red; padding: 5px; text-align: center;"> <p>Confirm and Continue</p> </div>												
<p>To cover a dependent, <b>check the box</b> in the Select Column for each dependent you want to cover</p> <p>As you select dependents, the Coverage and Cost update automatically</p> <p>At the bottom of the screen, Click <b>Save</b></p> <p>See instructions below if you need to add a new dependent.</p>	<div style="border: 1px solid red; padding: 5px; margin-bottom: 10px;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Select</th> <th>Dependent</th> <th>Relationship</th> <th>Date of Birth</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Suzie Sunshine</td> <td>Child</td> <td>01/01/2010</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>David Sunshine</td> <td>Child</td> <td>01/01/2010</td> </tr> </tbody> </table> </div> <div style="border: 1px solid red; padding: 5px; margin-bottom: 10px;"> <p>Coverage <span style="float: right;">* Associate + Child(ren)</span></p> <p>Plan cost per paycheck <span style="float: right;">\$230.00</span></p> </div> <div style="text-align: center; margin: 10px 0;">  </div> <div style="border: 1px solid red; padding: 5px; text-align: center;"> <p>Save</p> </div>	Select	Dependent	Relationship	Date of Birth	<input checked="" type="checkbox"/>	Suzie Sunshine	Child	01/01/2010	<input checked="" type="checkbox"/>	David Sunshine	Child	01/01/2010
Select	Dependent	Relationship	Date of Birth										
<input checked="" type="checkbox"/>	Suzie Sunshine	Child	01/01/2010										
<input checked="" type="checkbox"/>	David Sunshine	Child	01/01/2010										
Add a New Dependent													
<p>To Add New Dependents:</p> <ol style="list-style-type: none"> <li>1. Click <b>Add New Dependent</b></li> </ol> <p>Click <b>OK</b> to continue</p>	<div style="border: 1px solid red; padding: 5px; text-align: center;"> <p>Add New Dependent</p> </div>												

**Enter Dependent's Name required fields:**

- First name
- Last Name

**Name**

Country \*

Prefix

**First Name \***

Middle Name

**Last Name \***

Suffix

**Enter Dependent's Personal Information required fields:**

- Relationship
- Date of Birth
- Gender

**Personal Information**

**Relationship \***

**Date of Birth \***

Age (empty)

**Gender \***

Citizenship Status

Full-time Student

Student Status Start Date

Student Status End Date

Disabled

**Enter Dependent's National IDs (SSN):**

1. Click **Add**
2. Country: click **Frequently Used** by, select **United State of America**
3. National ID Type: select **Social Security Number (SSN)**
4. Add/Edit ID: enter **SSN number**
5. Click **Save**

**Note: Social security numbers are required for all covered spouse and children. If you do not have the SSN at the time of enrollment, you must enter the "Reason SSN is Not Available" to continue. Once you have obtained the SSN, you can update your dependent's record later.**

**National IDs**

Click the Add button to enter one or more National Identifiers for this dependent.

**Country \***

**National ID Type \***

Current ID (empty)

**Add/Edit ID \***



**\*Social Security Number**

Social Security Number (SSN)

Reason SSN is Not Available

**Check the box** next to each dependent you wish to cover, then click **Save**

Select	Dependent	Relationship	Date of Birth
<input type="checkbox"/>	Jane Doe	Spouse	01/01/1970

**Reminder! Repeat steps for each plan your dependent(s) will be covered: (Medical, Dental and Vision) in 2022**

Medical  
Waived

**Enroll**

Dental  
Waived

**Enroll**

Vision  
Waived

**Enroll**

**Critical Illness, Accident Plan and Hospital Indemnity Enrollment**

Click **Enroll or Manage** under each benefit plan you want to be covered in 2022

- Voluntary Critical Illness
- Voluntary Accident Coverage
- Voluntary Hospital Indemnity

Voluntary Critical Illness  
Waived

**Enroll**

Voluntary Accident  
Waived

**Enroll**

Voluntary Hospital  
Waived

**Enroll**

Click **Select** for the plan you want to enroll in

Click **Confirm and Continue**

\*Selection

**Select**

Waive

If you want to enroll dependents, **Check the box** next to each dependent you want to enroll

As you select dependents, the Coverage and Cost update automatically

Click **Save**

Select	Dependent	Relationship
<input checked="" type="checkbox"/>	Tiffany White	Child
<input checked="" type="checkbox"/>	Toni White	Child

➔ **Save**

**Flexible Spending Account Enrollment**

You must **Enroll** each year to contribute to a Healthcare FSA, Dependent FSA, and/or Limited Purpose FSA

Note: Limited Purpose FSA is not an option for most Employees

Click **Enroll** under the coverage you want to enroll in

Healthcare FSA  
Waived

**Enroll**

Dependent Care FSA  
Waived

**Enroll**

Limited Purpose FSA  
Waived

**Enroll**

- **Healthcare FSA** for eligible healthcare expenses.
- **Dependent Care FSA** for child/adult day care expense only.
- **Limited Purpose FSA** must be enrolled on the HDHP Health Savings Plan. For eligible vision and dental expenses only.

Click **Select** to enroll in the FSA Account

Click **Confirm and Continue** to add your contribution amount

\*Selection

**Select**

Waive

➔

**Confirm and Continue**

Enter the \$ amount you would like to contribute each pay or annually

**Contribute**

Per Paycheck:

Annual:

Total Paychecks

Minimum Annual Amount: \$1.00

Maximum Annual Amount: \$2,750.00

This is the Minimum and Maximum amount you can contribute to your FSA Account

Click **Save**  
Repeat the steps above to add any of the other FSA options



**Health Savings Account Enrollment**

You must **Enroll** each year to contribute to a Health Savings Account (HSA)  
  
To have an HSA you **MUST** be enrolled in the **HDHP Health Savings Medical Plan**  
  
To contribute or receive the Dealer Tire contribution, click **"Enroll"**

**Health Savings Account**  
Waived

**Do NOT** Enroll in the HSA Account if you have **selected** **Medical Plan 1, Medical Plan 2 or Medical Plan 3**

Click **Select** to enroll in the HSA Account.  
  
Then Click **Confirm and Continue** to add your contribution amount.

\*Selection

Select

Waive

Don't lose **FREE MONEY** - To receive the Dealer Tire contribution, you **MUST** click **"Select"** and **enter \$0**

Enter **\$0** to receive the **Dealer Tire contribution**  
- OR -  
Enter the \$ amount you would like to contribute each pay or annually and the Dealer Tire Contribution will be added automatically

**Contribute**

Per Paycheck:

Annual:

Annual Company Contribution: \$500.00

Total Annual HSA Contribution: \$500.00

Maximum Annual Amount: \$7,200.00

This is the amount Dealer Tire will contribute based on your medical enrollment

This is the maximum you can contribute to your HSA Account

Click **"Save"**



**Company Paid Benefits – Basic Term Life and AD&D, Short Term Disability, and Long Term Disability**

These are company paid benefits no elections are needed.

Click on **Manage** to see the benefit

For **Basic Life**, add a **Primary Beneficiary**, click the **+ sign**

**Important!** Without a beneficiary listed for your company-provided Basic Life Insurance and/or your Associate Voluntary Life Insurance (if enrolled), your policy payout will be held up in probate, taxed and potentially go to the state.

Click on the ellipsis to select an **existing Person or add a New Beneficiary** then enter percentage

Note: if you have multiple primary beneficiaries the % in total needs to be 100%

**Voluntary Life Enrollment**

To Enroll or change your Voluntary Life Insurance, Click **Enroll** or **Manage** for the Voluntary Life Benefit(s)

- Associate Life
- Spouse Life
- Child Life

**Note:** Click “Manage” or “Enroll” for each coverage you want to change.

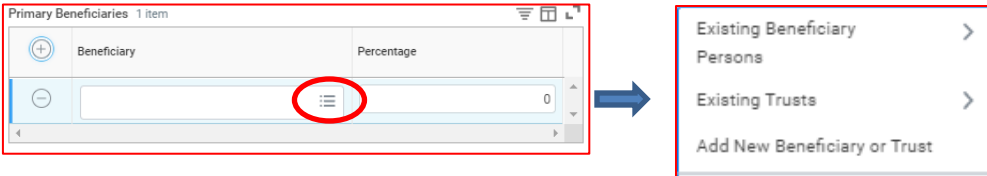
Click **Select** or **Waive**, and click **Confirm and Continue**

To choose the amount of Coverage, click on the **ellipsis** then **select the dollar amount of coverage**

For **Voluntary Associate Life**, add a **Primary Beneficiary**, click the **+ sign**

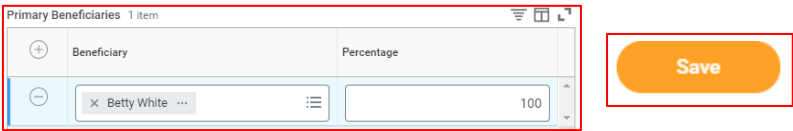
**Important!** Without a beneficiary listed for your company-provided Basic Life Insurance and/or your Associate Voluntary Life Insurance (if enrolled), your policy payout will be held up in probate, taxed and potentially go to the state.

Click on the ellipsis to select an **existing Person or add a New Beneficiary** then enter percentage %.  
**Note:** if you have multiple primary beneficiaries the % in total need to be 100



This is what it would look like when you are finished

Click **Save**

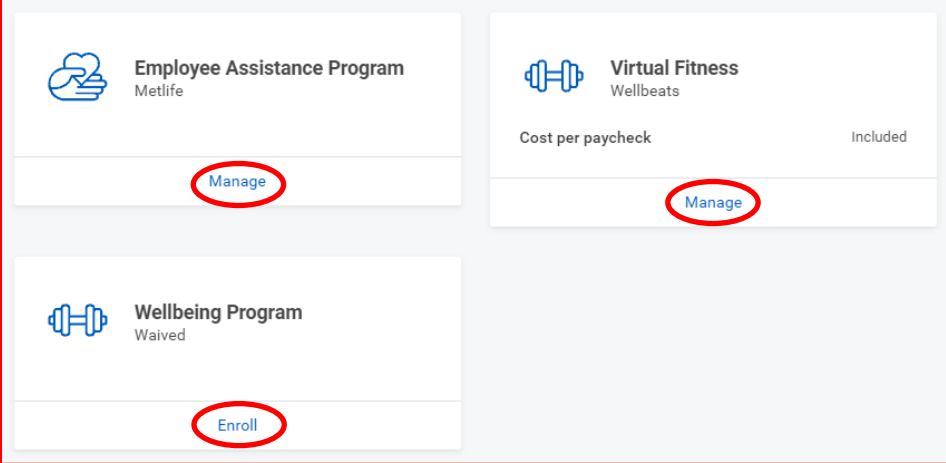


**Additional Benefits Enrollment**

**Employee Assistance Program** is a company paid benefit

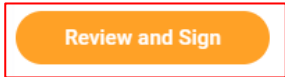
**Virtual Fitness** through Wellbeats™ is a company paid benefit for all employees and continues to be **“Free”** in 2022.

**HealthWi\$e Wellbeing Program** powered by Virgin Pulse gives you the tools to get active, get healthy, and focus on your wellbeing. Complete activities to reach a Premium Reduction Level and receive a discount on your 2023 medical premiums and earn Pulse Cash!

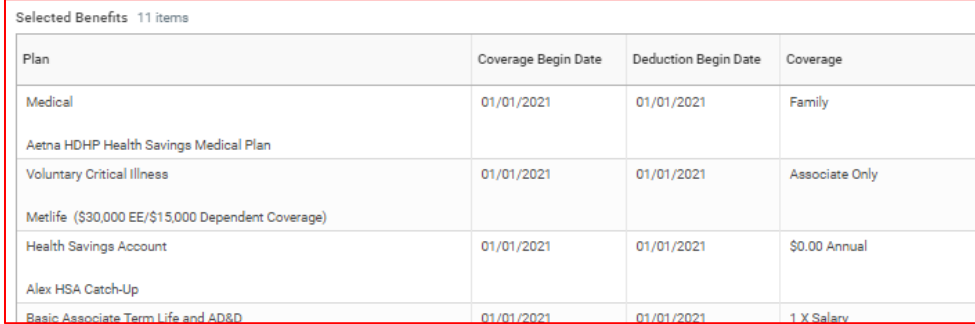


**Submit Enrollment Selections**

At the bottom of the page, Click **“Review and Sign”** button



Review your enrollment.



Plan	Coverage Begin Date	Deduction Begin Date	Coverage
Medical	01/01/2021	01/01/2021	Family
Aetna HDHP Health Savings Medical Plan			
Voluntary Critical Illness	01/01/2021	01/01/2021	Associate Only
Metlife (\$30,000 EE/\$15,000 Dependent Coverage)			
Health Savings Account	01/01/2021	01/01/2021	\$0.00 Annual
Alex HSA Catch-Up			
Basic Associate Term Life and AD&D	01/01/2021	01/01/2021	1 X Salary

Scroll to the bottom of the page and check the box **I Accept**

Click **Submit** to complete your enrollment



**Remember to print your Benefit Statement for your record**