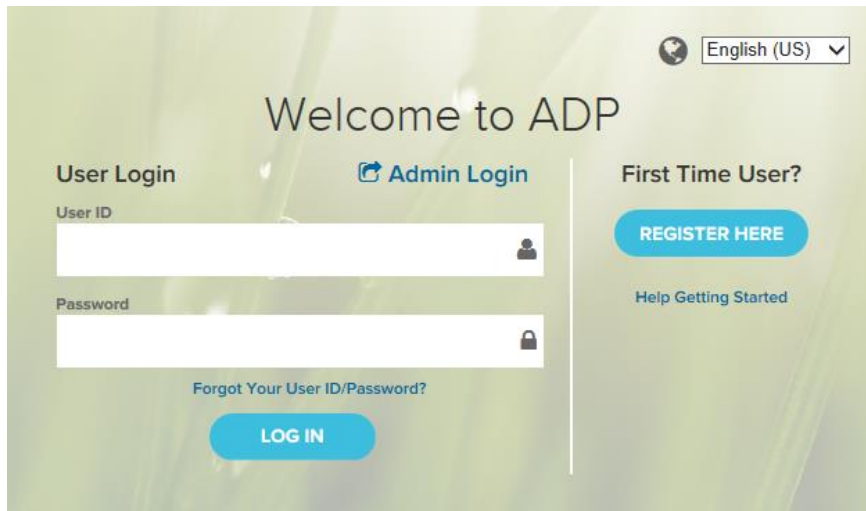


ADP Enrollment Instructions

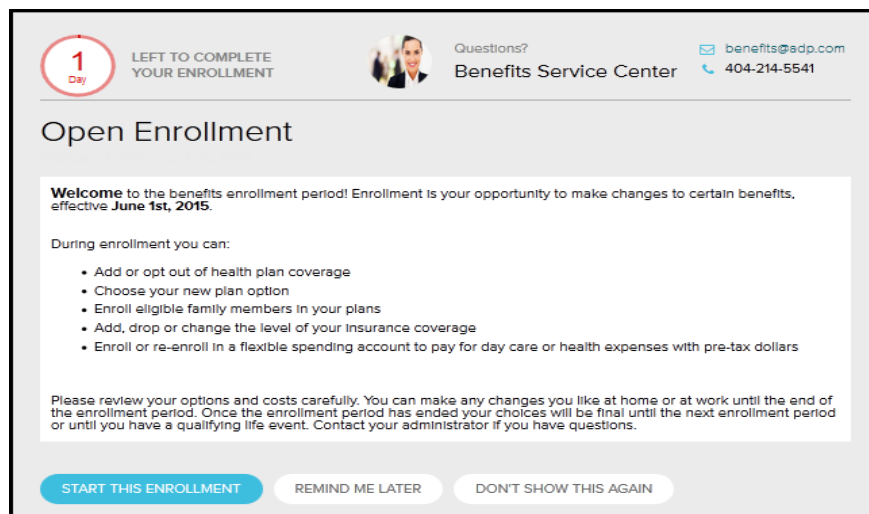
Log In to Your Web Site

- 1) Access the Employee Self Service* Web site.
- 2) Click User Login.



The image shows the ADP login page. At the top right, there is a language selector set to "English (US)". The main heading is "Welcome to ADP". Below this, there are two login options: "User Login" and "Admin Login". The "User Login" section contains two input fields: "User ID" and "Password", each with a corresponding icon (a person and a lock). Below these fields is a "Forgot Your User ID/Password?" link and a blue "LOG IN" button. To the right of the login fields, there is a "First Time User?" section with a blue "REGISTER HERE" button and a "Help Getting Started" link.

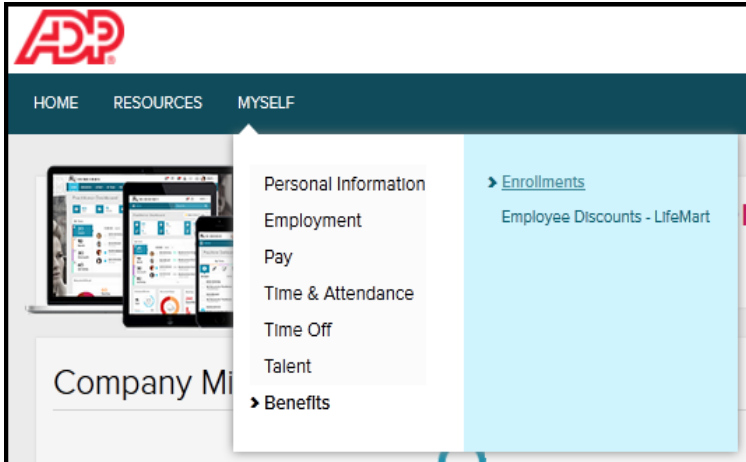
Note: Information or activity notification pages may display. Please respond as needed to continue.



The image shows an "Open Enrollment" notification page. At the top left, there is a red circle with the number "1" and the text "Day LEFT TO COMPLETE YOUR ENROLLMENT". To the right of this, there is a "Questions?" link, a "Benefits Service Center" link, and contact information: "benefits@adp.com" and "404-214-5541". The main heading is "Open Enrollment". Below this, there is a "Welcome to the benefits enrollment period! Enrollment is your opportunity to make changes to certain benefits, effective June 1st, 2015." section. This is followed by a "During enrollment you can:" section with a bulleted list of options: "Add or opt out of health plan coverage", "Choose your new plan option", "Enroll eligible family members in your plans", "Add, drop or change the level of your insurance coverage", and "Enroll or re-enroll in a flexible spending account to pay for day care or health expenses with pre-tax dollars". Below the list, there is a paragraph of text: "Please review your options and costs carefully. You can make any changes you like at home or at work until the end of the enrollment period. Once the enrollment period has ended your choices will be final until the next enrollment period or until you have a qualifying life event. Contact your administrator if you have questions." At the bottom, there are three buttons: "START THIS ENROLLMENT", "REMIND ME LATER", and "DON'T SHOW THIS AGAIN".



After you log in, use the Enrollments page to review your current benefits, if applicable, and make your Open Enrollment selections.




To View Your Current Enrollment Details

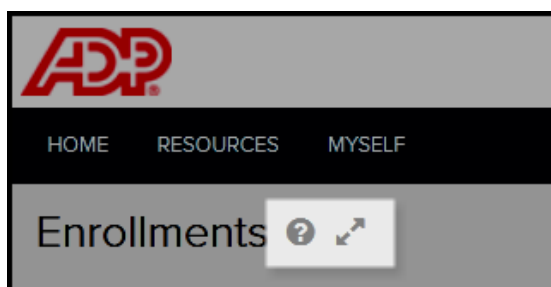


Starting Point: Myself > Benefits > Enrollments

- 1 Click the Plan Name to view details of the enrollment and to edit beneficiary assignments.
- 2 On the Enrollment Details page, review enrollment information for the plan you selected.
- 3 When you have completed your review, click Done.
(You can select other plans to review as needed.)

Tip: The Help  icon and the Full Screen  icon display on the top of the page (following the name of the page):

- Click the Help  icon to find additional assistance and information.
- Click the Full Screen  icon to expand the page you are viewing, click the Restore  icon to return to the normal view.



To Make Open Enrollment Elections

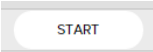

Starting Point:

A) Splash Page > Start This Enrollment (or)

B) Myself > Benefits > Enrollments

- 1 A) If the Splash Page is activated by your HR admin and you qualify for Open Enrollment, during your Open Enrollment period you will be prompted by the Splash Page upon login. To enter the Open Enrollment process click on Start This Enrollment.



B) On the Enrollments page, click Start  or Resume  next to your Open Enrollment profile. (Resume is available when you are returning to complete your enrollment.)

Review dependents and beneficiaries.

Note: You can edit newly added dependents by clicking on their name. To edit a previously entered dependent, you must select **Myself > Personal Information > Dependents & Beneficiaries**. You can click a dependent's or beneficiary's name to view their information.

Enrollments ? ↗

Open Enrollment

Review Information Choose Plans Submit

FINISH LATER REVIEW & COMPLETE

1. Review Dependents and Beneficiaries

Review your dependents and beneficiaries and make any additions. Only those people and organizations listed can be included in your benefits elections.

ADD DEPENDENT/BENEFICIARY ▾

NAME	DEPENDENT	BENEFICIARY	RELATIONSHIP
Sylvie Barrow	✓	✓	Child
Violet Barrow	✓	✓	Child

Newly Added Pending Approval

2. Start Your Enrollment

Tell us how you want to proceed through this enrollment.

- Walk Me Through My Benefit Options**
Take me through each available benefit option in the order that my administrator designated. I can review each option so that I can make any new selections or make changes to my existing enrollments.
- I Know What I Want To Change**
Choose one or more benefit options that you want to review. You will only be able to make changes or new selections for the options that you select.
- I Do Not Want To Make Any Changes**
I do not want to make any changes. Keep my current selections..

CANCEL CONTINUE

Note: For additional assistance, click the **Help** ? icon.

If you need to add or update a newly added dependent or beneficiary, complete Step 3: if not, go to Step 4.

2) Add a new dependent or beneficiary or update a newly added dependent or beneficiary. You can click a dependent's or beneficiary's name to view their information.

a. On the Enrollments page, in the Add a Dependent/Beneficiary field, select **Dependent/Beneficiary**.

1. Review Dependents and Beneficiaries

Review your dependents and beneficiaries and make any additions. Only those people and organizations listed can be included in your benefits elections.

ADD DEPENDENT/BENEFICIARY ▾

Dependent/Beneficiary	DEPENDENT	BENEFICIARY	RELATIONSHIP
<ul style="list-style-type: none"> Dependent/Beneficiary Beneficiary Only (Person) Beneficiary Only (Organization) 			
✓ Cyril Barrow	✓	✓	Child
Violet Barrow	✓	✓	Child

Newly Added Pending Approval

b. Enter the new dependent's information and, when complete, click **Done**.

Note: Although the fields may appear light in color, you can enter information and use selection lists as needed.

Dependent/Beneficiary

Personal Information

First Name * Middle Name Last Name *

Generation Suffix Professional Suffix Birth Date * Age XX Years XX Months

Gender *

Check All That Apply

Fulltime Student

Disabled

Date Of Disability

Medicare

Tobacco User

Medicaid

Veteran

Required state

Relationship Information

Relationship *

- 4 Start your enrollment by selecting **Walk Me Through My Benefit Options, I Know What I Want to Change** or **I Do Not Want to Make Any Changes**.

2. Start Your Enrollment

Tell us how you want to proceed through this enrollment.

- Walk Me Through My Benefit Options**
Take me through each available benefit option in the order that my administrator designated. I can review each option so that I can make any new selections or make changes to my existing enrollments.
- I Know What I Want To Change**
Choose one or more benefit options that you want to review. You will only be able to make changes or new selections for the options that you select.
- I Do Not Want To Make Any Changes**
I do not want to make any changes. Keep my current selections.

CANCEL CONTINUE

- 5 If you select **I Know What I Want to Change**, you can select the benefit options, and then click **Continue** to go to the plans available in the selected options.

2. Start Your Enrollment

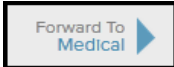
Tell us how you want to proceed through this enrollment.

- Walk Me Through My Benefit Options**
Take me through each available benefit option in the order that my administrator designated. I can review each option so that I can make any new selections or make changes to my existing enrollments.
- I Know What I Want To Change**
Choose one or more benefit options that you want to review. You will only be able to make changes or new selections for the options that you select.
- I Do Not Want To Make Any Changes**
I do not want to make any changes. Keep my current selections.

<input type="checkbox"/> Medical	<input type="checkbox"/> Flexible Spending Accounts	<input type="checkbox"/> Dental and Vision
<input type="checkbox"/> Life Insurance	<input type="checkbox"/> Disability Insurance	<input type="checkbox"/> Retirement and Savings
<input type="checkbox"/> Wellness	<input type="checkbox"/> Custom - Miscellaneous	<input type="checkbox"/> Other Plans - Miscellaneous

CANCEL CONTINUE

- 6 Select a benefit plan from the list on the left.

Tip: You must go through the plan categories in the order presented either by clicking a plan name on the left (going from top to bottom) or by using the **Forward To** option  to move to the next plan category.

Open Enrollment

Review Information Choose Plans Submit

FINISH LATER REVIEW & COMPLETE

PRINT Forward To Medical

Welcome

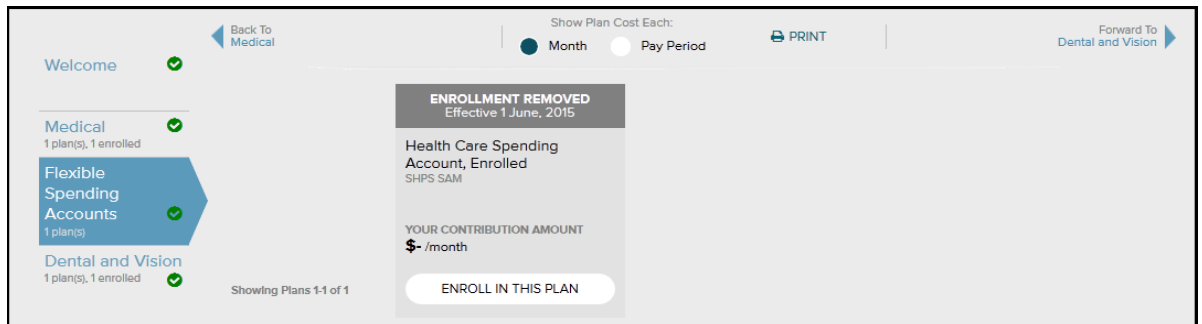
Welcome to the benefits enrollment period! Enrollment is your opportunity to make changes to certain benefits, effective June 1st, 2015.

During enrollment you can:

- Add or opt out of health plan coverage
- Choose your new plan option
- Enroll eligible family members in your plans
- Add, drop or change the level of your insurance coverage
- Enroll or re-enroll in a flexible spending account to pay for day care or health expenses with pre-tax dollars

Please review your options and costs carefully. You can make any changes you like at home or at work until the end of the enrollment period. Once the enrollment period has ended your choices will be final until the next enrollment period or until you have a qualifying life event. Contact your administrator if you have questions.

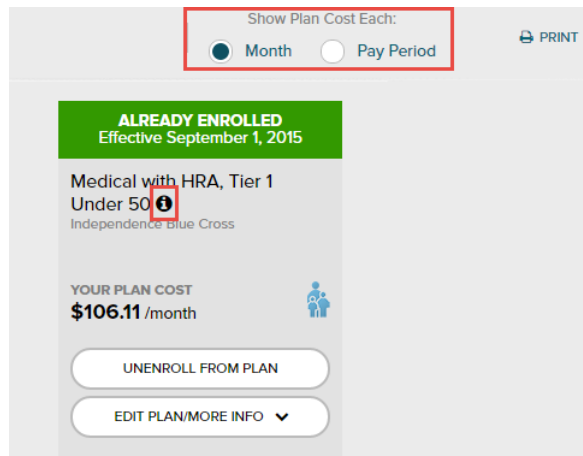
- 7 To enroll in a plan, click **Enroll in This Plan** for the appropriate benefit plan.
(For more information about the plan, click **More Info**.)



- a) To switch from the Per Month cost amount to the Per Pay Period amount, click on the radio icon **Pay Period**



- b) If your HR admin made more information available on a specific plan you will see an “i” icon to click on next to the plan name.



- 8 Choose a **Coverage Level** for the selected plan.

9 Choose (Enroll) Dependents (if applicable)

Vision, Option
VSP

YOUR PLAN COST \$6.00 /month	DEDUCTION INFORMATION ⓘ \$2.77 Biweekly	EMPLOYER PAYS \$8.00 /month	COVERAGE STARTS 1 June, 2015
--	--	--------------------------------	---------------------------------

1 Choose A Coverage Level
Choose the level of coverage that meets your needs and budget.

Coverage Level	Your Plan Cost	Employer Pays
<input type="radio"/> EMPLOYEE ONLY	\$2.00	\$6.00
<input type="radio"/> EMPLOYEE + 1	\$4.00	\$7.00
<input checked="" type="radio"/> EMPLOYEE + 2	\$6.00	\$8.00
<input type="radio"/> FAMILY	\$8.00	\$9.00

2 Choose Dependents
Review or select who will be covered under this plan. Some may be unavailable or pre-selected for you based on your choice of coverage level.

Enroll	Name	Relationship
<input checked="" type="checkbox"/>	Sylvia Barrow	Child
<input checked="" type="checkbox"/>	Violet Barrow	Child

CANCEL ENROLL



- 10 After reviewing all plans and making your selections, click **Review & Complete**.

✓ REVIEW & COMPLETE

Note: You cannot select Review & Complete until all plans have been reviewed.

- 11 Review your benefits elections:

- Click **Return to Choose Plan** if you want to make changes now.
- Click **Finish Later** to make changes later.


Enrollments  

Open Enrollment Review Information → Choose Plans → Submit FINISH LATER COMPLETE ENROLLMENT

Show Plan Cost Each: Month Pay Period PRINT

1 Review Your Benefits Elections

Please review your benefits elections below. Your choices will not be processed until you click Complete Enrollment.

PLAN	COVERAGE LEVEL	YOUR COST	EMPLOYER PAYS	EFFECTIVE DATE
Medical				
<input checked="" type="checkbox"/> PPO, Option United HealthCare	 EMPLOYEE + CHILDREN	\$80.00/month	\$100.00/month	01/06/15
Flexible Spending Accounts				
<input checked="" type="checkbox"/> Health Care Spending Account, Enrolled SHPS SAM	\$23.00/pay period	\$49.83/month	\$50.00/month	01/06/15
Life Insurance				
<input checked="" type="checkbox"/> Employee Voluntary Life, Option MetLife	\$390,000	\$2,502.50/month	\$227.50/month	01/01/15
Disability Insurance				
<input checked="" type="checkbox"/> Short Term Disability, Option MetLife	67% of earnings up to \$10,000.00 per week	\$1.63/month	\$3.79/month	01/01/15
Retirement and Savings				
<input checked="" type="checkbox"/> 401k, Percent Election Fidelity	-	\$-/month	\$-/month	01/06/15
Wellness				
<input checked="" type="checkbox"/> Let's Get Well!, Option Vitality		\$0.00/month	\$3.00/month	01/06/15
Custom - Miscellaneous				
<input checked="" type="checkbox"/> ELP, Enrolled ADP		\$0.00/month	\$0.00/month	01/06/15
<input checked="" type="checkbox"/> Identity Protection, Enrolled ADP	HOUSEHOLD	\$3.00/month	\$5.00/month	01/06/15
Other Plans - Miscellaneous				
<input checked="" type="checkbox"/> Custom Plan Content Test, Enrolled ADP	EMPLOYEE ONLY	\$1.00/month	\$2.00/month	01/06/15
TOTAL		\$2,637.96/month	\$391.29/month	

Newly Added Change To Current Enrollment Removed From Enrollment Pending Approval

2 Choose Waive Reasons

You elected to not enroll in one or more plan types listed below. Please choose a reason below to waive coverage.

PLAN TYPE	WAIVE REASON *
Retirement and Savings - 401(k) plan	<input type="text"/>
Retirement and Savings - Other	<input type="text"/>
Health and Welfare - Vision	<input type="text"/>



3 Complete Your Enrollment




You can complete this enrollment, finish later by saving your progress or return to your plan choices.

< RETURN TO CHOOSE PLANS FINISH LATER COMPLETE ENROLLMENT

12 If the **Choose Waive Reasons** section displays, you have not enrolled in the plan types listed.

- If this is correct, select a **Waive Reason**, for each plan type.
- If this is not correct, click **Return to Choose Plans** and enroll in the appropriate plans











Enrollments  





Open Enrollment



FINISH LATER
✓ COMPLETE ENROLLMENT

Show Plan Cost Each: Month Pay Period PRINT

1 Review Your Benefits Elections

Please review your benefits elections below. Your choices will not be processed until you click Complete Enrollment.

PLAN	COVERAGE LEVEL	YOUR COST	EMPLOYER PAYS	EFFECTIVE DATE
Medical				
 PPO, Option United HealthCare	 EMPLOYEE + CHILDREN	\$80.00 /month	\$100.00/month	01/06/15
Flexible Spending Accounts				
 Health Care Spending Account, Enrolled SHPS SAM	\$23.00/pay period	\$49.83 /month	\$50.00/month	01/06/15
Life Insurance				
 Employee Voluntary Life, Option MetLife	\$390,000	\$2,502.50 /month	\$227.50/month	01/01/15
Disability Insurance				
 Short Term Disability, Option MetLife	67% of earnings up to \$10,000.00 per week	\$1.63 /month	\$3.79/month	01/01/15
Retirement and Savings				
 401k, Percent Election Fidelity	-	\$- /month	\$-/month	01/06/15
Wellness				
 Let's Get Well!, Option Vitairy		\$0.00 /month	\$3.00/month	01/06/15
Custom - Miscellaneous				
 ELP, Enrolled ADP		\$0.00 /month	\$0.00/month	01/06/15
 Identity Protection, Enrolled ADP	HOUSEHOLD	\$3.00 /month	\$5.00/month	01/06/15
Other Plans - Miscellaneous				
 Custom Plan Content Test, Enrolled ADP	EMPLOYEE ONLY	\$1.00 /month	\$2.00/month	01/06/15
		TOTAL	\$2,637.96 /month	\$391.29/month

 Newly Added  Change To Current Enrollment  Removed From Enrollment  Pending Approval

2 Choose Waive Reasons

You elected to not enroll in one or more plan types listed below. Please choose a reason below to waive coverage.

PLAN TYPE	WAIVE REASON *
Retirement and Savings - 401(k) plan	<input type="text"/>
Retirement and Savings - Other	<input type="text"/>
Health and Welfare - Vision	<input type="text"/>

3 Complete Your Enrollment

You can complete this enrollment, finish later by saving your progress or return to your plan choices.

< RETURN TO CHOOSE PLANS
FINISH LATER
✓ COMPLETE ENROLLMENT

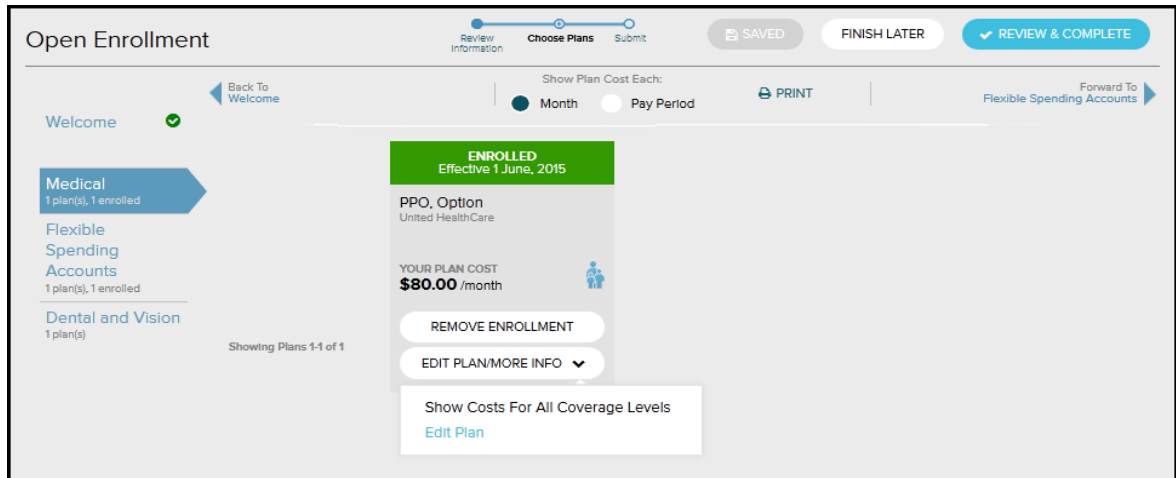
13 After reviewing your benefits election selections, do one of the following:

- a) Click **Return to Choose Plan** to make changes now.
- b) Click **Finish Later** to make changes later.
- c) Click **Complete Enrollment** to finish your enrollment.

Tip: See Step 13 for information on changing your enrollment coverage or dependent enrollments.

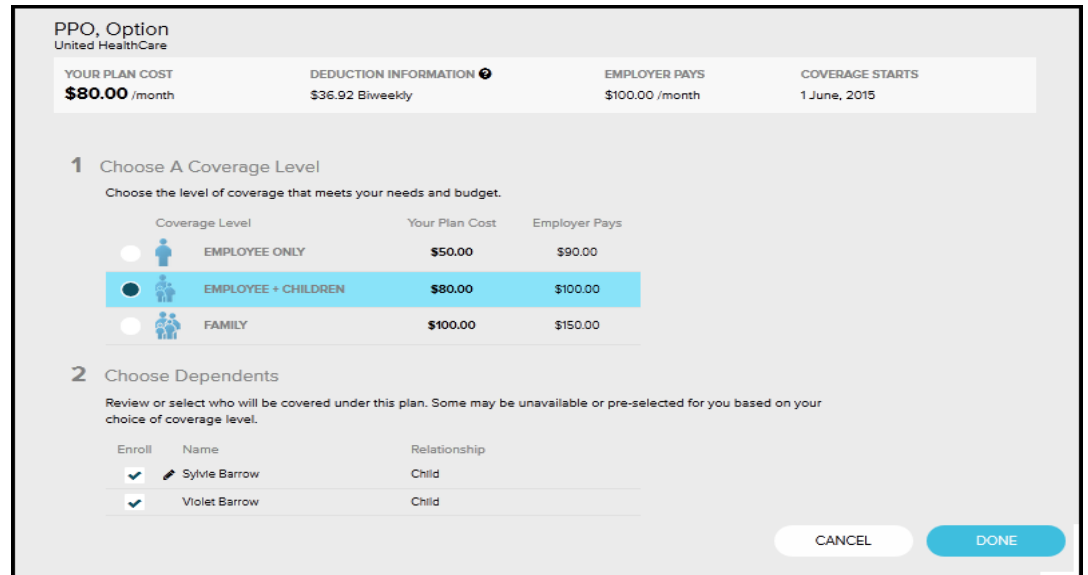
14 To change your coverage level or enrollment information for a dependent, return to the plan selection page and do the following:

- a) Select the **Plan Type**, then **Edit Plan/More Info**, and then select **Edit Plan**.

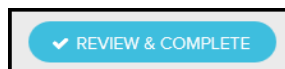


- b) Change enrollment information as needed and click **Done**.

Important: Ensure that you have correctly selected the eligible dependents who should be covered under this plan.



15 After reviewing all plans and making your selections, click **Review & Complete**.



16 Then do one of the following:

- a. Click Return to **Choose Plan** to make changes now.
- b. Click **Finish Later** to make changes later.
- c. Click **Complete Enrollment** to finish your enrollment.

If you have any questions using the **Employee Self Service*** Web site, or if you make an enrollment error, please contact your plan administrator, Barbara Coates, Benefits@Cenergistic.com. Pending changes can only be corrected by your company's administrator.