

Open Enrollment

For 2019 Port-sponsored Benefit Plans

Overview:

1. Log on to PeopleSoft HCM using the same credentials you use to log in to your computer. Use the PeopleSoft HCM Time/HR Self Service quick link available on the Compass home page.
2. Once logged on to HCM, click the **Benefits** tile.
3. Select **Benefits Enrollment** from the left-hand menu.
4. Review the instructions, and then click the **Select** button.
5. **Review the instructions and the Enrollment summary section.** Click the **Edit** button at the end of each option for which you want to make a change or election. If no change is needed to medical or dental, you do not need to click the **Edit** button. If you want vision coverage you must click the **Edit** button to enroll in vision coverage for yourself and/or dependents. Please note:
 - Employees covered by the Port's medical and dental plan will see up to six options: Medical, Dental, Vision, Flexible Spending HealthCare, Flexible Spending Dependent Care and Health Savings Account.
 - Employees who receive their medical and/or dental benefits (if any) from their union will see only the two Flexible Spending Account options since their open enrollment process is not managed by the Port.
 - Interns or non-represented (non-union) emergency hires will only see a medical option.
6. Review the instructions. Select the option you wish to enroll in by clicking the **small circle** in front of the plan name.
7. Scroll down and review the instructions to enroll your family members. To add new dependents, click the **Add/Review Dependents** button. Check the **Enroll** box next to the name of each dependent you would like to enroll. When you are finished, click **Continue**.
8. Review the summary of your election. Click **Discard Changes** to make changes. Click **Update Elections** to store your choices.
9. Complete the same process for the remaining options. Once you have finished making your elections, click the **Continue** button.
10. You will be taken to the Submit Benefit Choices page. Review the instructions. Click **Cancel** if you need to make more changes. To finalize your elections, click the **Submit** button.
11. You will be taken to the Submit Confirmation page, click **OK**.
12. Click **OK** to receive your confirmation statement.
13. You will now see your Event Status has changed to Submitted.

Detailed Steps on Enrolling for Benefits in HCM

1. Log on to PeopleSoft HCM using the same credentials you use to log in to your computer. Use the PeopleSoft HCM Time/HR Self Service quick link available on the Compass home page:

PeopleSoft HCM Time/HR Self Service

The screenshot shows the Compass home page with the 'Quick Links' dropdown menu open. The 'PeopleSoft HCM Time/HR Self Svc' link is highlighted with a red box. The page includes a navigation bar with 'Port Internet', 'Sustainability', 'My Site', and 'Phonebook'. The main content area features a 'COMPASS' logo, 'Port of Seattle' branding, and various news tiles. The 'Quick Links' menu lists numerous options, including 'PeopleSoft HCM Time/HR Self Svc'.

Port Internet Sustainability My Site Phonebook Search this site...

COMPASS

Port of Seattle

Divisions Events Calendar Quick Links My Links

Compass

Airport Conference Center
Airport Vacation/Business Travel Parking
Announcements
Brand Central
CFO Dashboard
Careers and Recruiting
Classified Ads
Code of Conduct
Collaboration Sites
Commission Memo Routing
Community Giving Campaign
Deals
Employee Resource Groups (ERGs)
Expenses (Concur)
Forms & Templates
Human Resources & Development
ICT Self-Service Site
Learning Portal (LMS)
Maximo
Metrics Dashboard
Mission, Vision & Strategies
MSDS Online
PeopleSoft Financials
PeopleSoft HCM Time/HR Self Svc
Policies and Procedures
Public Records
Records Management
Search for Leases
Search for Vouchers
Spirit and Wellness
Workplace Responsibility
Web Access Email

Commission meeting updates

Port Receives Award for Financial Reporting Excellence. Congrats to all who made it happen!

Injury Free Days: 1 -- Safe

Seaport Alliance

Staying Competitive. Seattle and Tacoma together

Read more

What's on your mind?

Join the conversation

Blogger

Port press releases

Back Hired as Director Real Estate Development

from CEO Fick [here](#).

O Town Hall on Nov. 17

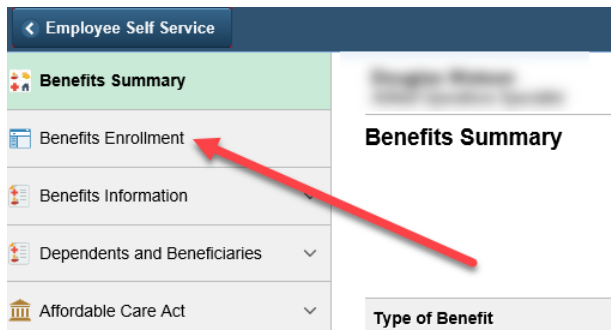
Hall has been moved to:
7, 11 a.m. - 12 noon, P69 Atrium

Just come and hear the latest from CEO Ted Fick and bring have for him!

2. Once logged on to HCM, click the **Benefits** tile:



3. Select **Benefits Enrollment** from the left-hand menu.



4. Review the instructions, then click the **Select** button:

Employee Self Service

- Benefits Summary
- Life Events
- Benefits Enrollment**
- Benefits Information
- Dependents and Beneficiaries
- Affordable Care Act

Benefits Enrollment

Welcome to this year's Open Enrollment event! The Open Enrollment period begins November 12, 2018 and ends at 11:59 p.m. on November 30, 2018.

MEDICAL INSURANCE: You are only required to make an election during Open Enrollment if you want to change your current election and/or add/remove family members. You may want to make an election if your eligibility for the Wellness premium discount has changed. Your options are:
 (a) Enroll in a medical plan for yourself and any eligible family members for whom you desire coverage, or
 (b) Waive coverage.
If you do not make an election, you and your family members' current coverage will continue next year.

*Remember: Vision coverage is no longer included in Medical Coverage. You must enroll in Vision if you want Vision coverage.

HEALTH SAVINGS ACCOUNT (HSA): If you enroll in the HDHP (High Deductible) plan, you may also elect an HSA. Please ensure you meet the HSA eligibility requirements before you make this election. Eligibility requirements can be found in the Internal Revenue Service (IRS) Publication 969.
If you do not make an election, you will have no HSA and will not receive any Port contribution for which you may be eligible as part of the Wellness Program.

NOTE: If you do not want an HSA payroll deduction, but want the Port contribution, you must elect HSA and enter \$0 as your contribution.

DENTAL INSURANCE: You are only required to make an election during Open Enrollment if you want to change your current coverage. Your options are:
 (a) Elect a dental plan for yourself and any eligible family members for whom you desire coverage, or
 (b) Waive coverage.
If you do not make an election, you and your family members' current coverage will continue next year.

VISION INSURANCE: You are only required to make an election during Open Enrollment if you want to add vision coverage for you and/or your family members.
If you do not make an election, you and your family members' will not have vision coverage in 2019.

FLEXIBLE SPENDING ACCOUNTS (FSA): You may elect during Open Enrollment a HealthCare FSA (for unreimbursed health care expenses) and/or a Dependent Care FSA (for child day care and/or adult care expenses) for 2019.
If you do not make an election(s), you will have no FSA account(s).
 Exception: Up to \$500 of your current 2018 FSA election that has not been used by the end of 2018 will rollover to 2019 into your current account. You can still access those funds without enrolling in a 2019 FSA.

NOTE: If you elected to enroll in the HDHP and elect the *HealthCare Limited FSA* option, reimbursement for your healthcare expenses will be limited to only dental and vision expenses until your deductible is satisfied.

CONTACTS: The Total Rewards Team is available to answer questions you have about your coverage and options. Based on the first letter of your last name, please contact one of the Total Rewards Specialists below if you need assistance.

(A - F) Cutie Burns at 206-787-3022 or Burns.C@portseattle.org
 (G - N) Khan Thavongsack at 206-787-6136 or Thavongsack.K@portseattle.org
 (O - Z) Ruth Sanoy at 206-787-5148 or Sanoy.R@portseattle.org

Open Benefit Events				
Event Description	Event Date	Event Status	Job Title	
Open Enrollment	01/01/2019	Open		Select

After you click the Select button, it will take a few seconds for your benefits enrollment information to load.

5. Review the instructions and the Enrollment summary section.

- Employees covered by the Port's medical, dental, and vision plans will see up to six options: Medical, Dental, Vision, Flexible Spending HealthCare, Flexible Spending Dependent Care and Health Savings Account.
- Employees who receive their medical and/or dental benefits (if any) from their union will see only the two Flexible Spending Account options since their open enrollment process is not managed by the Port.
- Interns or non-represented (non-union) emergency hires will only see a medical option.

Click the **Edit** buttons at the end of each option for which you want to make a change or election. If no change is needed to medical or dental, you do not need to click the **Edit** button. If you want vision coverage you must click the Edit button to enroll in vision coverage for yourself and/or dependents. For this example we will make a medical election:

[Benefits Enrollment](#)

Open Enrollment

To make your benefit elections, click the "Edit" button to the right of each option listed below: Medical, Dental, Vision, HealthCare Flexible Spending Account, Dependent Care Flexible Spending Account, and Health Savings Account.

If you do not actively elect to enroll in a medical, dental, vision, flexible spending accounts, or health savings account plan, you will receive default coverage as follows:

Medical: Same plan and coverage level as in 2018. (e.g. Employee only, family, etc.)

Dental: Same plan and coverage level as in 2018. (e.g. Employee only, family, etc.)

Delta Dental Legacy, formally known as "Delta Dental-Premier"

Delta Dental Core, formally known as "Delta Dental PPO"

Delta Dental Enhanced, New plan offered in 2019!!

Vision: No coverage

HealthCare Flexible Spending Account: No account.

Dependent Care Flexible Spending Account: No account.

Health Savings Account: No account.

i Important: Your enrollment will not be complete until you click the "Submit" box on the last page after all your elections are made.

Enrollment Summary

Medical	Before Tax	<input type="button" value="Edit"/>
Current: High Deductible:EE+SP+CH		
New: High Deductible:EE+SP+CH	45.35	
Dental	Before Tax	<input type="button" value="Edit"/>
Current: Delta Dental PPO:EE+SP+CH		
New: Delta Dental Core:EE+SP+CH	6.36	
Vision	Before Tax	<input type="button" value="Edit"/>
Current:		
New:		
Flex Spending Health Care	Before Tax	<input type="button" value="Edit"/>
Current: Healthcare FSA Limited w/ HSA: \$500.00		
New:		
Flex Spending Dependent Care	Before Tax	<input type="button" value="Edit"/>
Current:		
New:		
Health Savings Account	Before Tax	<input type="button" value="Edit"/>
Current: Health Savings Acct--Family: \$1,500.00		
New:		

Election Summary

Summarized estimates for new Benefit Elections	Total	Before Tax	After Tax Cost
Costs	51.71	51.71	0.00
Your Costs	51.71	51.71	0.00

Review the Enrollment Summary to make sure the "New" coverage for each plan above is correct. If you need to make a change to a plan, click Edit and make your change. Then, click Continue and then Submit.

i

- Review the instructions. Select the option you wish to enroll in by clicking the **small circle** in front of the plan name:

Medical

The Port of Seattle offers you a choice between three medical plans. Your pre-tax premiums will be deducted from the first two paychecks of each month for that month's coverage. The first deduction will be taken from your first January paycheck.

If you would like to provide medical coverage for an eligible family member who is not already covered, please first select the medical plan you want, then see the instructions that follow in the section entitled *Enroll Your Family Members*.

i Important! Your current 2018 coverage is: Deductible w/Wellness with Employee Only coverage. You will continue with this coverage if you do not make a choice.

Your enrollment on this page may affect your choices for the following type(s) of coverage:
Flex Spending Health Care
Health Savings Account

Complete your enrollment on this page before enrolling in the benefit plans listed above.

Select an Option

Click on the small circle in front of the plan's name to enroll.

Here are your available options with your per-pay-period costs:

[Overview of All Plans and Costs](#)

Select one of the following plan(s):

- High Deductible
- Deductible w/Wellness
- Medical HMO w/ Wellness

Coverage Level	Your Costs	Tax Class
Employee Only	\$14.05	Before-Tax
Employee and Spouse	\$83.77	Before-Tax
Employee and Children	\$78.37	Before-Tax
Family (Empl+Sp+Children)	\$120.52	Before-Tax
EE + DP (Tax) + DP Ch (Tax)	\$120.52	Before-Tax
EE +CH + DP + DP Ch	\$120.52	Before-Tax
EE + DP	\$83.77	Before-Tax
EE + Ch + DP Ch	\$78.37	Before-Tax
EE + Child(ren) + DP	\$120.52	Before-Tax
EE + DP Ch	\$78.37	Before-Tax
EE + DP (NT)	\$83.77	Before-Tax
EE + Ch + DP Ch (NT)	\$78.37	Before-Tax
EE + Ch + DP (NT)	\$120.52	Before-Tax
EE + DP Ch (NT)	\$78.37	Before-Tax
EE + DP (NT) + DP Ch (NT)	\$120.52	Before-Tax
EE + Ch + DP (NT) + DP Ch (NT)	\$120.52	Before-Tax

Waive

7. Scroll down and review the instructions to enroll your family members. To add new dependents, click the **Add/Review Dependents** button. Check the **Enroll** box next to the name of each dependent you would like to enroll. When you are finished, click **Continue**.

Enroll Your Family Members

You must check the **ENROLL** box by the name of each individual listed below for whom you want coverage under the selected plan.

TAX STATUS: If the tax status of your domestic partner or domestic partner's children shown below under "Relationship" is not correct (NT=Nontaxable, Tax=Taxable), please contact the Total Rewards team in Human Resources.

ADDING FAMILY MEMBERS: Click on the Add/Review Dependents button to add a new family member to your list. You also need to complete and submit the forms below to the Total Rewards Team in Human Resources by Wednesday, December 5, 2018. **Your newly added dependents will have no coverage in 2019 if these forms are not submitted.**

~ If you add a spouse or domestic partner, you need to submit an [Affidavit of Dependent Coverage](#) and an [Affidavit of Marriage/Domestic Partnership](#).

~ If you add a child, you need to submit an [Affidavit of Dependent Coverage](#).

REVISING INFORMATION: If you click on the Add/Review Dependents button below, please note that you cannot change any of the displayed information for your current family members. Please contact the Total Rewards Team if any information needs to be corrected. **Also, please be aware that beneficiary designation changes cannot be made via HCM yet.**

The following list displays all individuals whose information is already stored in HCM as your eligible dependent(s). If you wish to add another eligible dependent, click the "[Add/Review Dependents](#)" button.

Eligible children can be covered on your medical, dental and/or vision insurance through the month in which they turn age 26.

You must check the "**Enroll**" box by the name of each individual for whom you want coverage under this plan. **If you do not check the "Enroll" box, the individual will have no coverage beginning January 1, 2019.**

Dependent Beneficiary		
Enroll	Name	Relationship
<input checked="" type="checkbox"/>	[REDACTED]	Spouse

Add/Review Dependents

Continue

Discard Changes

Click **Continue** to store your choice until you are ready to submit your final enrollment on the Enrollment Summary.

Select the **Discard Changes** button to ignore all entries made on this page and return to the Enrollment Summary.

8. Review the summary of your election. Click **Discard Changes** to make changes. Click **Update Elections** to store your choices:

Benefits Enrollment

Medical



Important: Your enrollment will not be complete until you click the "Submit" box on the last page after all your elections are made.

Your Choice

You have chosen Deductible w/Wellness with Employee and Spouse coverage.

Your Estimated Per-Pay-Period Cost

Your Cost \$113.62

Your Covered Dependents

Dependent Information

Name	Relationship
[REDACTED]	Spouse

Notes

Deductions for this choice will start with the first January paycheck.

Update Elections

Discard Changes

Select the **Update Elections** button to store your choices.

Select the **Discard Changes** button to go back and change your choices.

9. Complete the same process for the remaining options. Once you have finished making your elections, click the **Continue** button:

Benefits Enrollment

Open Enrollment

To make your benefit elections, click the "Edit" button to the right of each option listed below: Medical, Dental, Vision, HealthCare Flexible Spending Account, Dependent Care Flexible Spending Account, and Health Savings Account.

If you do not actively elect to enroll in a medical, dental, vision, flexible spending accounts, or health savings account plan, you will receive default coverage as follows:

Medical: Same plan and coverage level as in 2018. (e.g. Employee only, family, etc.)

Dental: Same plan and coverage level as in 2018. (e.g. Employee only, family, etc.)

Delta Dental Legacy, formally known as "Delta Dental-Premier"

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Delta Dental Enhanced, New plan offered in 2019!!

Vision: No coverage

HealthCare Flexible Spending Account: No account.

Dependent Care Flexible Spending Account: No account.

Health Savings Account: No account.

i Important: Your enrollment will not be complete until you click the "Submit" box on the last page after all your elections are made.

Enrollment Summary

Medical	Before Tax	Edit
Current: High Deductible:EE+SP+CH		
New: Deductible w/Wellness:Empl +Spou	113.62	Edit
Dental	Before Tax	Edit
Current: Delta Dental PPO:EE+SP+CH		
New: Delta Dental Core:EE+SP+CH	6.36	Edit
Vision	Before Tax	Edit
Current:		
New: Vision -Core:EE+SP+CH	1.50	Edit
Flex Spending Health Care	Before Tax	Edit
Current: Healthcare FSA Limited w/ HSA: \$500.00		
New: Healthcare FSA: \$500.00	20.83	Edit
Flex Spending Dependent Care	Before Tax	Edit
Current:		
New:		
Health Savings Account	Before Tax	Edit
Current: Health Savings Acct--Family: \$1,500.00		
New:		

This table summarizes your per-pay-period costs for your new benefit choices.

Election Summary			
Summarized estimates for new Benefit Elections	Total	Before Tax	After Tax Cost
Costs	142.31	142.31	0.00
Your Costs	142.31	142.31	0.00

Continue

Review the Enrollment Summary to make sure the "New" coverage for each plan above is correct. If you need to make a change to a plan, click **Edit** and make your change. Then, click **Continue** and then **Submit**.



10. You will be taken to the Submit Benefit Choices page. Review the instructions. Click **Cancel** if you need to make more changes. To finalize your elections, click the **Submit** button:

Benefits Enrollment

Submit Benefit Choices

Select the **Cancel** button if you are not ready to submit your choices and wish to return to the Enrollment Summary.

You may store your choices on each page and return to the Enrollment Summary as many times as you'd like up until the enrollment deadline even after you click **Submit**. The elections you last submit before the deadline will be processed by the Total Rewards Team.

Once the deadline has passed, you will not be able to make any further benefit changes until the next Open Enrollment period unless you have a qualifying family status change.

Authorize Elections

Previously submitted enrollment information for a specific plan is superseded by changes or default changes made during this open enrollment. I certify that my family members and I are eligible for the coverage requested. I understand that the availability of any particular product cannot be guaranteed and provider network composition is subject to change. I also acknowledge that, with the exception of Aetna Rx Home Delivery, participating providers and vendors for the Deductible and High Deductible Health plans are independent contractors and are neither agents nor employees of Aetna. I authorize the Port of Seattle to deduct from my earnings any premium I am required to pay for the coverages I selected above and any premium associated with future changes by election or default in successive years.

I declare that the information I have provided on this form is true, correct and complete to the best of my knowledge and that I have read and understand the information included in this on-line enrollment process and the descriptive material covering the options provided under the Port of Seattle's benefit plans.

I authorize the insurance carriers and third party claims administrators to obtain, examine or release information needed to coordinate benefits or process claims for myself or my family. I understand that I may be subject to disciplinary action and/or repayment of any claims paid by my health plan or premiums paid by my employer if I have provided false, incomplete, or misleading information or fail to update this information in accordance with eligibility guidelines.

Submit

Cancel

Click the link below to read the PayFlex Health Savings Account Custodial Agreement.

[HSA Terms & Conditions](#)

If I have elected to enroll in an HSA, by clicking "Submit" I attest to the following:

I have read and understand and accept the terms and conditions of the HSA Custodial Agreement.

I authorize the Custodian or its affiliate Bank of New York Mellon to accept instructions from me to exchange shares in my account by telephone, in accordance with HSA program restrictions and the procedures set forth in the applicable Funds' prospectuses.

I may revoke or change this authorization by accessing my BNY Mellon account on the PayFlex site.

I may designate, update or change my account beneficiaries at any time using the beneficiary change form located on the PayFlex website.

I acknowledge that I am applying electronically to open a Health Savings Account and, therefore, my signature on this application will be electronic. By submitting this application electronically, I understand that my electronic "signature" is binding to the same extent as my written signature.

Click **Submit** and you will be returned to the page where you will be able to print your selections by clicking on **OK**.

Select the **Cancel** button if you are not ready to submit your choices and wish to return to the Enrollment Summary.

11. You will be taken to the Submit Confirmation page, click **OK**.

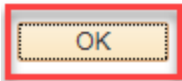
Benefits Enrollment

Submit Confirmation

Your benefit choices have been successfully submitted to the Total Rewards Team in the Human Resources Department.

To return to the Benefits Enrollment page, click **OK**.

Click the **OK** button below to print your elections.



12. Click **OK** to receive your confirmation statement.

Message

Confirmation statement will be created and emailed to you in the next 20 minutes.



13. You will now see your Event Status has changed to Submitted.

Open Benefit Events					
Event Description		Event Date	Event Status	Job Title	
Open Enrollment		01/01/2019	Submitted		