



**Open Enrollment Overview**

This Job Aid provides a walkthrough of the enrollment steps users need to complete during Open Enrollment (OE) in Cardinal Employee Self-Service (ESS).

The dates shown throughout this Job Aid were taken for the 2024 Open Enrollment time frame. However, the process contained in this Job Aid applies to all Open Enrollment dates.

Throughout the Job Aid, there will be verbiage blurred out on the screenshots. Please remember to read the instructions and the fine print on the actual pages in Cardinal when going through the Open Enrollment steps.

**Table of Contents**

Revision History .....2

Making Open Enrollment Elections in ESS.....3

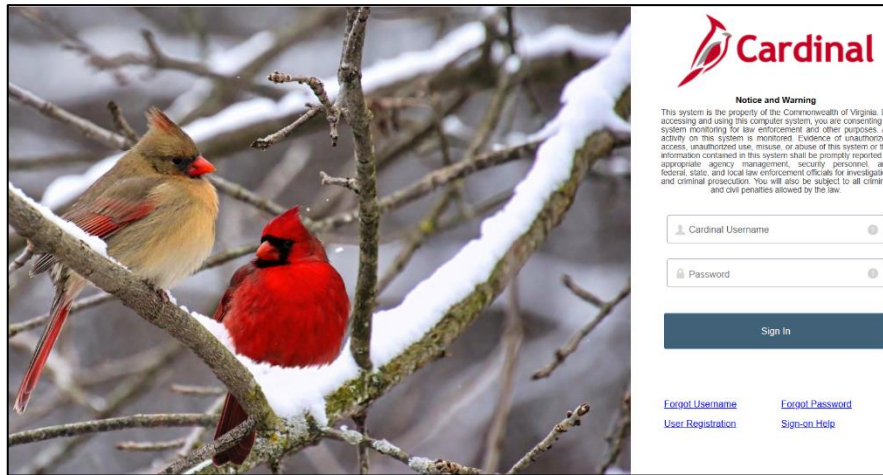
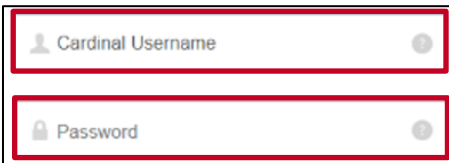
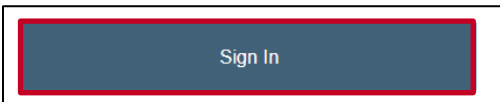


### Revision History

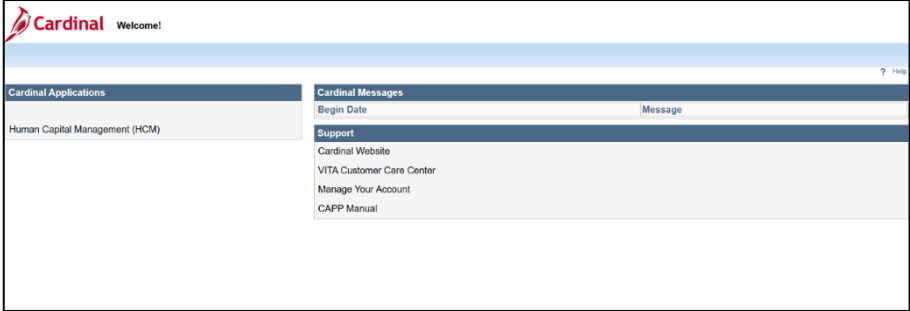
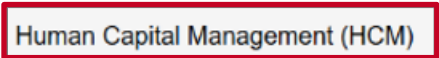
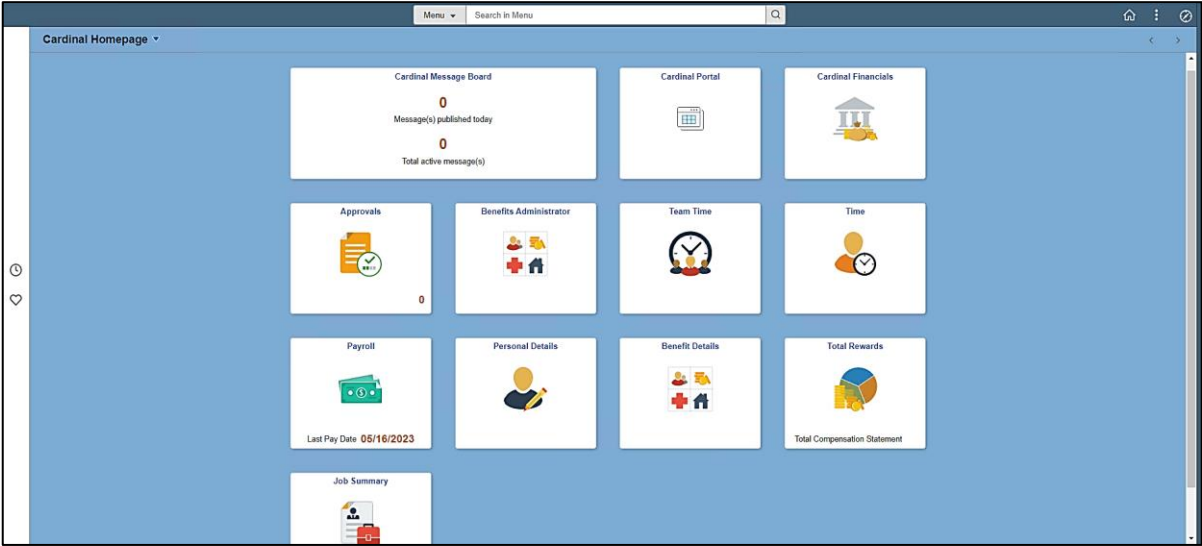

Revision Date	Summary of Changes
9/4/2024	Baseline


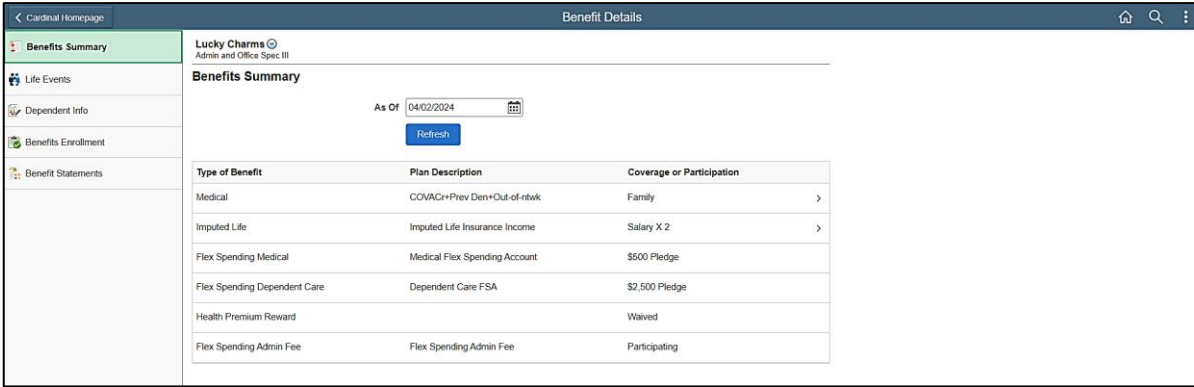
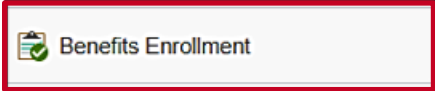
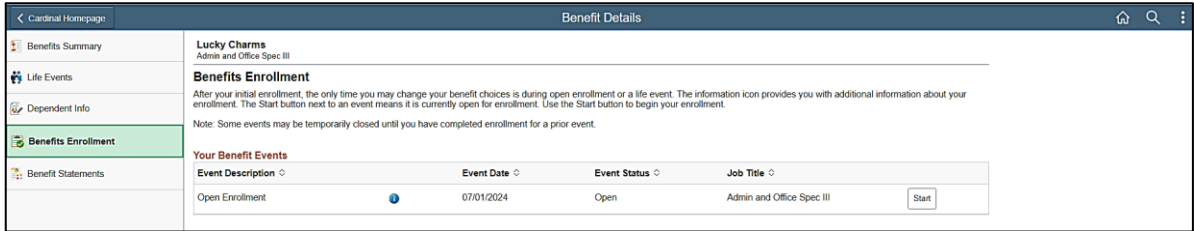

## Making Open Enrollment Elections in ESS


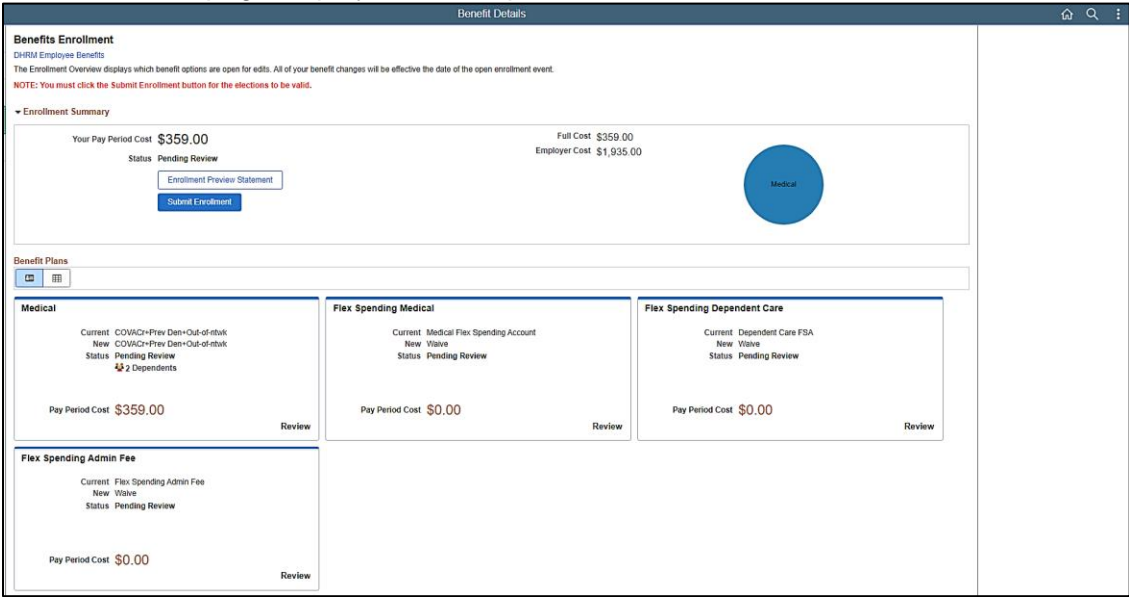

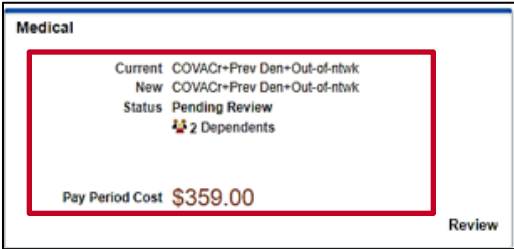
The Open Enrollment process contained in this Job Aid can only be completed during the Open Enrollment (OE) period. Outside of the OE window, employees can only change their benefits through a Life Event (i.e., Birth, Adoption, Divorce, Marriage, etc.) in Employee Self-Service or by contacting their agency Benefits Administrator (BA).

Step	Action
1.	Log into Cardinal (my.cardinal.virginia.gov).
<p>The <b>Cardinal Login</b> page displays.</p> <div data-bbox="373 663 1250 1134">  </div>	
2.	Enter the Employee Username and Password in the <b>Cardinal Username</b> and <b>Password</b> field.
<div data-bbox="263 1218 709 1379">  </div>	
3.	Click the <b>Sign In</b> button.
<div data-bbox="263 1467 760 1568">  </div>	




Step	Action
	<p>The <b>Portal Welcome</b> page displays.</p> 
4.	<p>Click the <b>Human Capital Management</b> link.</p> 
	<p>The <b>Cardinal Homepage</b> displays.</p> 
	<p>The tiles displayed on the <b>Cardinal Homepage</b> for each user will vary based upon individual preferences and security settings.</p>

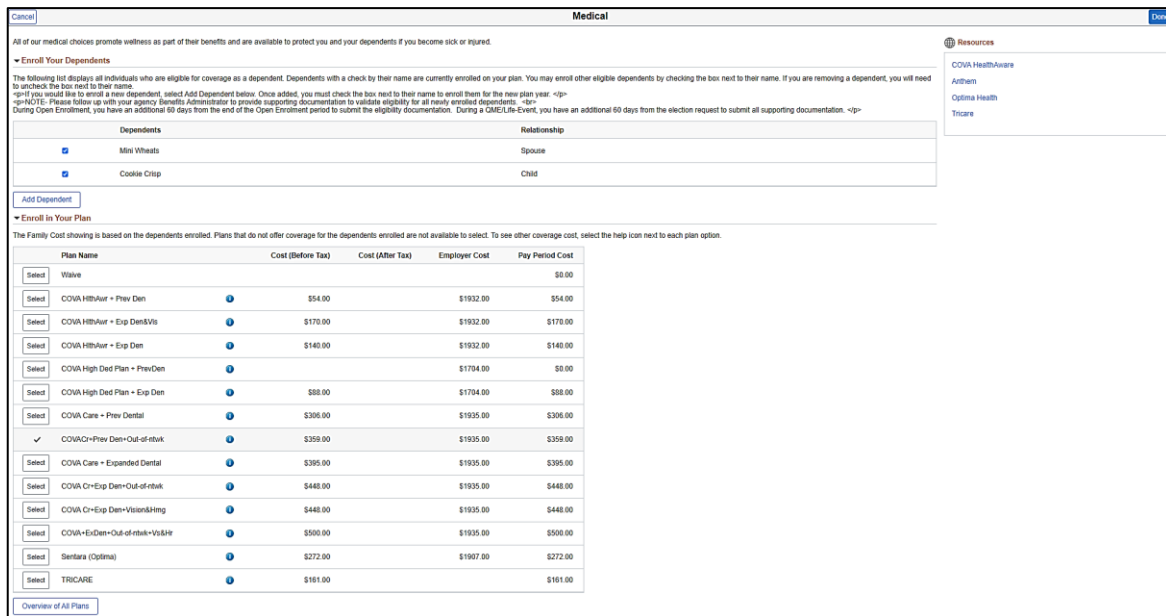
Step	Action
5.	<p>Click the <b>Benefit Details</b> tile.</p> 
<p>The <b>Benefits Details</b> page displays with the <b>Benefits Summary</b> tab displayed by default.</p> 	
6.	<p>Click the <b>Benefits Enrollment</b> menu item on the left-hand side of the page.</p> 
<p>The <b>Benefits Enrollment</b> page displays.</p> 	
7.	<p>Click the <b>Start</b> button for the Open Enrollment event.</p> 

Step	Action
	<p>If you have already completed any elections for this Open Enrollment and you need to make updates or any additional elections, the Status for the Open Enrollment event will be "Submitted" and the <b>Start</b> button will be replaced with a <b>Re-Elect</b> or a <b>Resume</b> button.</p>
	<p>The <b>Benefits Enrollment</b> page displays for the Open Enrollment.</p> 
	<p>The Benefit Plans available on this page depend on your benefits eligibility. Retirees will only see the <b>Medical</b> tile. The steps within this Job Aid start by detailing the steps for changing your Health Plan (<b>Medical</b> tile). Proceed to the applicable Step for the plan you need to enroll in based on the following:</p> <ul style="list-style-type: none"> <li>• Health Plan: Step 8</li> <li>• Flex Spending Medical: Step 36</li> <li>• Flex Spending Dependent Care: Step 42</li> </ul>
8.	<p>Review your current enrollment information within the <b>Medical</b> tile. The New enrollment information defaults with the same enrollment information.</p> 



Step	Action
9.	<p>Click the <b>Medical</b> tile to begin the enrollment process.</p> 


The **Medical** page displays.





The Medical page displays the following information:

- Medical** tile: Shows Current COVAC+Prev Den+Out-of-rtwk, New COVAC+Prev Den+Out-of-rtwk, Status Pending Review, 2 Dependents, Pay Period Cost \$359.00, and a Review button.
- Enroll Your Dependents** section: Lists dependents Mini Wheats (Spouse) and Cookie Crisp (Child) with checkboxes to enroll them.
- Enroll in Your Plan** section: Displays a table of available plans with their costs.

Plan Name	Cost (Before Tax)	Cost (After Tax)	Employer Cost	Pay Period Cost
Waive				\$0.00
COVAC+HbHxur + Prev Den	\$54.00	\$54.00	\$1932.00	\$54.00
COVAC+HbHxur + Exp Den&Vls	\$170.00	\$170.00	\$1932.00	\$170.00
COVAC+HbHxur + Exp Den	\$140.00	\$140.00	\$1932.00	\$140.00
COVAC+High Ded Plan + Prev Den			\$1704.00	\$0.00
COVAC+High Ded Plan + Exp Den	\$88.00	\$88.00	\$1704.00	\$88.00
COVAC+Care + Prev Dental	\$306.00	\$306.00	\$1935.00	\$306.00
COVAC+Prev Den+Out-of-rtwk	\$359.00	\$359.00	\$1935.00	\$359.00
COVAC+Care + Expanded Dental	\$395.00	\$395.00	\$1935.00	\$395.00
COVAC+Co+Exp Den+Out-of-rtwk	\$448.00	\$448.00	\$1935.00	\$448.00
COVAC+Co+Exp Den+Vision&Hmg	\$448.00	\$448.00	\$1935.00	\$448.00
COVAC+ExDen+Out-of-rtwk+Vls&Hr	\$500.00	\$500.00	\$1935.00	\$500.00
Stentara (Optima)	\$272.00	\$272.00	\$1907.00	\$272.00
TIRCARE	\$161.00	\$161.00		\$161.00

10.	<p>Review the existing dependents covered under your health plan within the <b>Enroll Your Dependents</b> section to determine if changes are needed.</p> 
-----	--

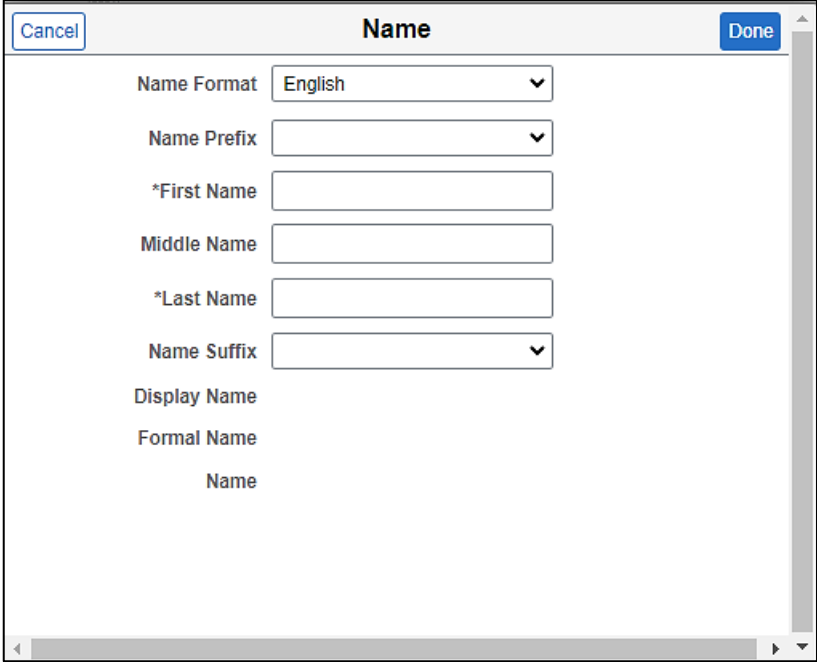
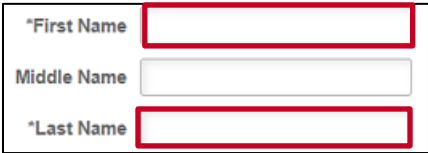


11.	<p>If you need to add a dependent to your health plan coverage, click the <b>Add Dependent</b> button. If you are not adding a dependent, skip to Step 32.</p> 
-----	--

	<p>Only add dependents that will be covered under your health plan. Do not add any beneficiaries into Cardinal. Beneficiaries (for life insurance or retirement) are not tracked in Cardinal. See your agency Benefits Administrator for any additional questions related to beneficiaries.</p>
---	---

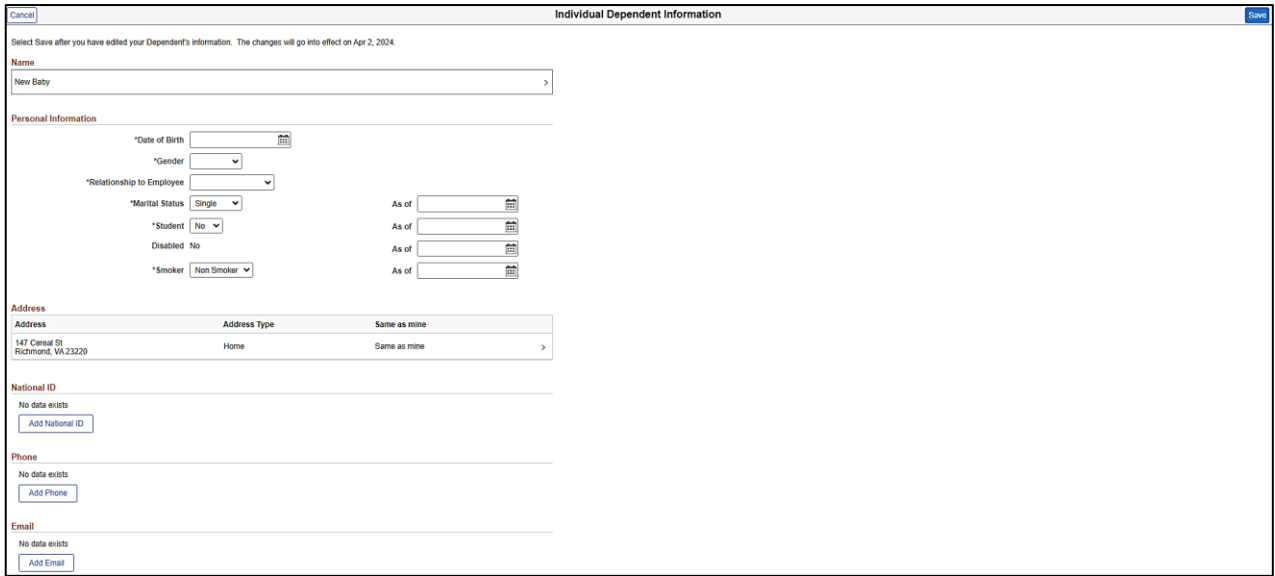



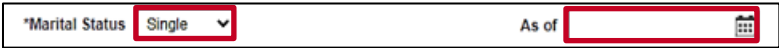
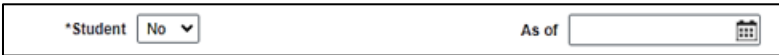




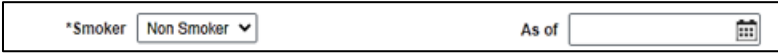
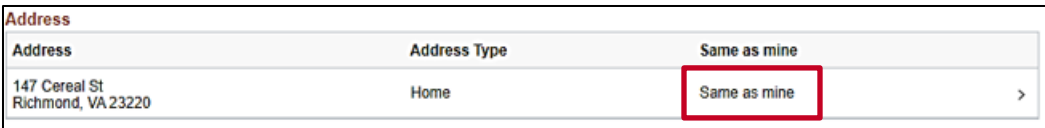



Step	Action																
	<p>The <b>Dependent Information</b> page displays.</p> <div><div><div>Dependent Information</div><table><tr><td colspan="4"><div>Add Individual</div></td></tr><tr><th>Name</th><th>Relationship</th><th>Dependent</th><th>Dependent Type</th></tr><tr><td>Miss Wheat</td><td>Spouse</td><td>✓</td><td>Approved Dependent</td></tr><tr><td>Cookie Crisp</td><td>Child</td><td>✓</td><td>Approved Dependent</td></tr></table></div></div>	<div>Add Individual</div>				Name	Relationship	Dependent	Dependent Type	Miss Wheat	Spouse	✓	Approved Dependent	Cookie Crisp	Child	✓	Approved Dependent
<div>Add Individual</div>																	
Name	Relationship	Dependent	Dependent Type														
Miss Wheat	Spouse	✓	Approved Dependent														
Cookie Crisp	Child	✓	Approved Dependent														
12.	<p>Click the <b>Add Individual</b> button to add a dependent to your Employee Record.</p> <div><div><div>Add Individual</div></div></div>																
	<p>The <b>Individual Dependent Information</b> page displays.</p> <div><div><div>Individual Dependent Information</div><div><div>Cancel</div><div>Save</div></div><div>Select Save after you have edited your Dependent's information. The changes will go into effect on Apr 2, 2024.</div><div><div>Name</div><div><div>Add Name</div></div></div><div><div>Personal Information</div><div><div>*Date of Birth</div><div>*Gender</div><div>*Relationship to Employee</div><div>*Marital Status</div><div>*Student</div><div>Disabled</div><div>*Smoker</div><div>As of</div><div>As of</div><div>As of</div><div>As of</div></div></div><div><div>Address</div><div><div>Address</div><div>Address Type</div><div>Same as mine</div></div><div><div>147 Cereal St</div><div>Home</div><div>Same as mine</div></div><div><div>Richmond, VA 23220</div><div></div><div></div></div></div><div><div>National ID</div><div>No data exists</div><div><div>Add National ID</div></div></div><div><div>Phone</div><div>No data exists</div><div><div>Add Phone</div></div></div><div><div>Email</div><div>No data exists</div><div><div>Add Email</div></div></div></div></div>																
13.	<p>Click the <b>Add Name</b> button.</p> <div><div><div>Add Name</div></div></div>																





Step	Action
	<p>The <b>Name</b> page displays in a pop-up window.</p> 
14.	<p>Enter your dependent's name information in the corresponding fields. The <b>First Name</b> and <b>Last Name</b> fields are required.</p> 
	<p>Suffixes should only be entered in the <b>Name Suffix</b> field.</p>
15.	<p>Click the <b>Done</b> button.</p> 

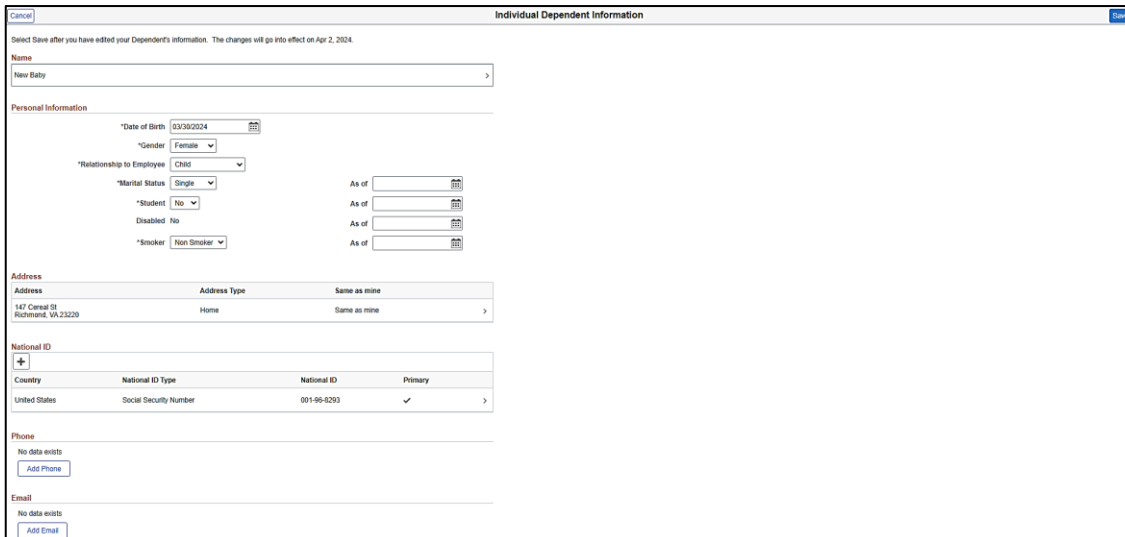


Step	Action
	<p>The <b>Individual Dependent Information</b> page redispays with the name populated.</p> <div></div>
16.	<p>Enter your dependent's date of birth in the <b>Date of Birth</b> field or select the appropriate date of birth using the <b>Date of Birth Calendar</b> icon.</p> <div></div>
17.	<p>Select your dependent's gender using the <b>Gender</b> dropdown button.</p> <div></div>
18.	<p>Select your dependent's relationship to you using the <b>Relationship to Employee</b> dropdown button.</p> <div></div>
19.	<p>Update your dependent's marital status using the <b>Marital Status</b> dropdown button as needed (defaults to "Single").</p> <div></div>
20.	<p>The <b>Student</b> field defaults to "No". There is no requirement to update this field as the <b>Student</b> field is not tracked in Cardinal nor transmitted to the Health Benefits Vendor.</p> <div></div>



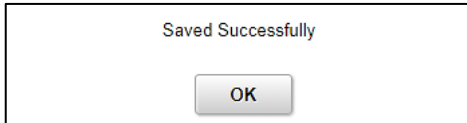
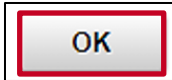



Step	Action
21.	<p>The <b>Disabled</b> field defaults to “No”. Do not change this value.</p> 
	<p>If your dependent is “Disabled”, you must provide proof of disability to your agency Benefits Administrator outside of Cardinal.</p>
22.	<p>The <b>Smoker</b> field defaults to “No”. Do not update this field as Cardinal does not track nor transmit smoker status to the Health Benefits Vendor.</p> 
23.	<p>If your dependent has the same address as you do, verify that the <b>Address</b> section is set to “Same as mine”.</p> 
	<p>If your dependent has a different address than you, click on the address row and edit the dependent’s address information accordingly.</p>
24.	<p>Click the <b>Add National ID</b> button within the <b>National ID</b> section.</p> 
<p>The <b>National ID</b> page displays in a pop-up window.</p> 	

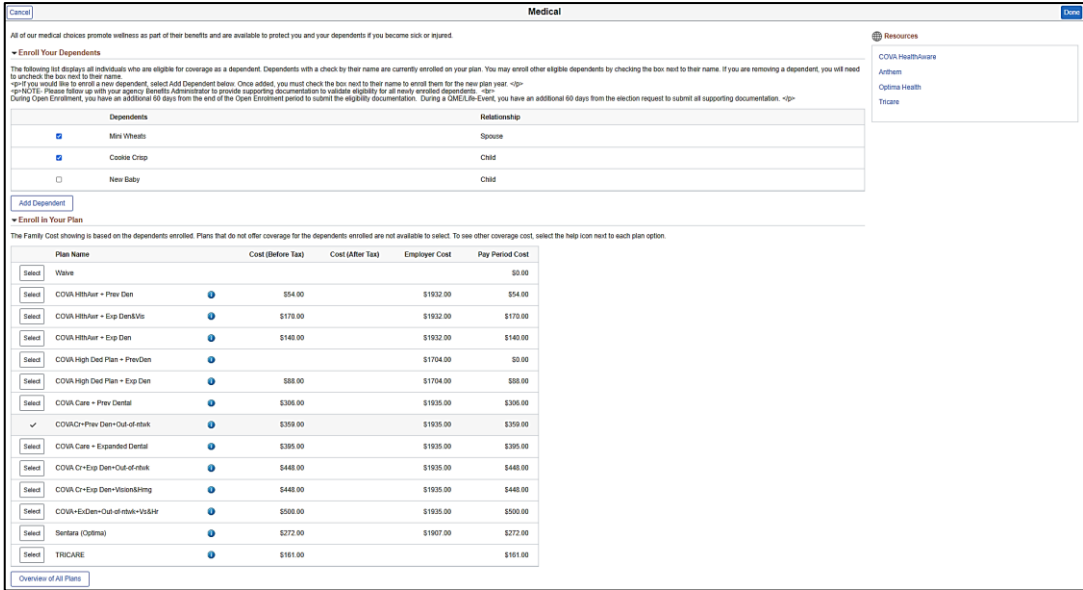
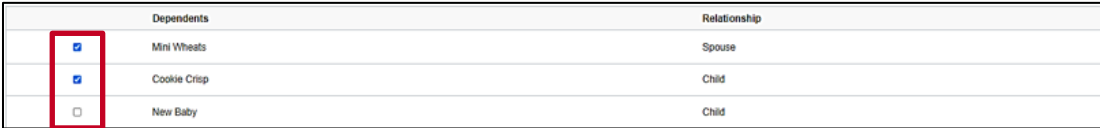

Step	Action
25.	<p>Complete the <b>Country</b>, <b>National ID Type</b>, and <b>National ID (SSN)</b> fields for the dependent.</p> <div> <div>*Country <input type="text"/></div> <div>*National ID Type <input type="text"/></div> <div>*National ID <input type="text"/></div> </div>
	<p>If you don't have an SSN for your dependent, the record will save without a National ID entered. However, your agency Benefits Administrator will reach out to obtain the SSN in the future.</p>
	<p>"No" can only be selected for the <b>Primary</b> slide field if there is more than one type of National ID listed for the dependent (e.g., dual citizenship).</p>
26.	<p>Click the <b>Done</b> button.</p> <div> <div>Done</div> </div>

The **Individual Dependent Information** page redispays.



The screenshot shows the 'Individual Dependent Information' form. It includes fields for Name (New Baby), Date of Birth (03/30/2024), Gender (Female), Relationship to Employee (Child), Marital Status (Single), Student status (No), Disabled status (No), Smoker status (Non Smoker), Address (147 Canal St, Richmond, VA 23220), and National ID information (Country: United States, National ID Type: Social Security Number, National ID: 001-96-6293, Primary: checked). There are also sections for Phone and Email, both currently showing 'No data exists'.

Step	Action
27.	<p>Optionally add phone or email information for the dependent. These are not required for dependents.</p> 
28.	<p>Click the <b>Save</b> button in the top right-hand corner of the page.</p> 
<p>A <b>Saved Successfully</b> message displays in a pop-up window.</p> 	
29.	<p>Click the <b>OK</b> button.</p> 
<p>The <b>Dependent Information</b> page returns.</p> 	
30.	<p>Repeat Steps 12 – 29 as required until all dependents are added.</p>
	<p>When adding dependents to coverage, supporting documentation is required that provides proof of eligibility. <b>Do not miss your Open Enrollment deadline.</b> If you <b>do not</b> have the documentation, you can still submit your election request. The eligibility documents can be submitted later. Supporting documentation must be submitted within 60 days of the Open Enrollment Event Date. See your agency Benefits Administrator for more information.</p>
31.	<p>After all dependents are added, click the <b>Close (X)</b> icon in the upper right-hand corner of the page.</p> 

Step	Action
	<p>The <b>Medical</b> page redisplays.</p> 
32.	<p>Within the <b>Enroll Your Dependents</b> section, select the <b>Enroll</b> checkbox option for each dependent you want covered for the new plan year.</p> 
	<p>As you select dependents, the coverage costs below will update accordingly.</p>



Step	Action
------	--------

The **Medical** page refreshes.

Cancel Medical Done

All of our medical choices promote wellness as part of their benefits and are available to protect you and your dependents if you become sick or injured.

Enroll Your Dependents

The following list displays all individuals who are eligible for coverage as a dependent. Dependents with a check by their name are currently enrolled on your plan. You may enroll other eligible dependents by checking the box next to their name. If you are removing a dependent, you will need to uncheck the box next to their name.

Click the Select button to enroll a new dependent. Once added, you must check the box next to their name to enroll them for the new plan year. <ip>  
<ip>H&V: Please select the plan your agency Benefits Administrator is providing supporting documentation to validate eligibility for all newly enrolled dependents. <ip>  
<ip>During Open Enrollment, you have an additional 60 days from the end of the Open Enrollment period to submit the eligibility documentation. During a COVACr Event, you have an additional 60 days from the election request to submit all supporting documentation. <ip>

Dependents	Relationship
<input checked="" type="checkbox"/> Mini White	Spouse
<input checked="" type="checkbox"/> Corbin Crisp	Child
<input checked="" type="checkbox"/> New Baby	Child

Add Dependent

Enroll in Your Plan

The Family Cost showing 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 cost, select the help icon next to each plan option.

Plan Name	Cost (Before Tax)	Cost (After Tax)	Employer Cost	Pay Period Cost
Select Waive				\$0.00
Select COVA HlthAwrr + Prev Den	\$54.00		\$1932.00	\$54.00
Select COVA HlthAwrr + Exp Den&Vis	\$170.00		\$1932.00	\$170.00
Select COVA HlthAwrr + Exp Den	\$140.00		\$1932.00	\$140.00
Select COVA High Ded Plan + PrevDen			\$1704.00	\$0.00
Select COVA High Ded Plan + Exp Den	\$88.00		\$1704.00	\$88.00
Select COVA Care + Prev Dental	\$306.00		\$1935.00	\$306.00
COVACr+Prev Den+Out-of-ntwk	\$359.00		\$1935.00	\$359.00
Select COVA Care + Expanded Dental	\$395.00		\$1935.00	\$395.00
Select COVA Cr+Exp Den+Out-of-ntwk	\$448.00		\$1935.00	\$448.00
Select COVA Cr+Exp Den+Vision&Hmg	\$448.00		\$1935.00	\$448.00
Select COVA+ExDen+Out-of-ntwk+Vs&Hr	\$500.00		\$1935.00	\$500.00
Select Sentara (Optima)	\$272.00		\$1907.00	\$272.00
Select TRICARE	\$161.00			\$161.00


Overview of All Plans

33. Within the **Enroll in Your Plan** section, select the Health Plan you wish to enroll in for the new plan year by clicking the corresponding **Select** button.

Enroll in Your Plan

The Family Cost showing 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 cost,

Plan Name	Cost (Before Tax)	Cost (After Tax)	Employer Cost	Pay Period Cost
Select Waive				\$0.00
Select COVA HlthAwrr + Prev Den	\$54.00		\$1932.00	\$54.00
Select COVA HlthAwrr + Exp Den&Vis	\$170.00		\$1932.00	\$170.00
Select COVA HlthAwrr + Exp Den	\$140.00		\$1932.00	\$140.00
Select COVA High Ded Plan + PrevDen			\$1704.00	\$0.00
Select COVA High Ded Plan + Exp Den	\$88.00		\$1704.00	\$88.00
Select COVA Care + Prev Dental	\$306.00		\$1935.00	\$306.00
COVACr+Prev Den+Out-of-ntwk	\$359.00		\$1935.00	\$359.00
Select COVA Care + Expanded Dental	\$395.00		\$1935.00	\$395.00
Select COVA Cr+Exp Den+Out-of-ntwk	\$448.00		\$1935.00	\$448.00
Select COVA Cr+Exp Den+Vision&Hmg	\$448.00		\$1935.00	\$448.00
Select COVA+ExDen+Out-of-ntwk+Vs&Hr	\$500.00		\$1935.00	\$500.00
Select Sentara (Optima)	\$272.00		\$1907.00	\$272.00
Select TRICARE	\$161.00			\$161.00

Step	Action
	Optionally click the blue <b>Information</b> icon for any of the plans to view additional information. There are also links in the <b>Resources</b> section of the page that can be used to view additional information.

The **Medical** page refreshes with the selected plan. A green checkmark displays for the selected plan.

Cancel

Medical

Done

All of our medical choices promote wellness as part of their benefits and are available to protect you and your dependents if you become sick or injured.

Enroll Your Dependents














The following list displays all individuals who are eligible for coverage as a dependent. Dependents with a check by their name are currently enrolled on your plan. You may enroll other eligible dependents by checking the box next to their name. If you are removing a dependent, you will need to uncheck the box next to their name.  
-> If you would like to enroll a new dependent, select Add Dependent below. Once added, you must check the box next to their name to enroll them for the new plan year. ->  
->NOTE: Please follow up with your agency Benefits Administrator to provide supporting documentation to validate eligibility for all newly enrolled dependents. ->  
During Open Enrollment, you have an additional 60 days from the end of the Open Enrollment period to submit the eligibility documentation. During a CARE/Life Event, you have an additional 60 days from the election request to submit all supporting documentation. ->

Dependents	Relationship
<input checked="" type="checkbox"/> Mini Wheat	Spouse
<input checked="" type="checkbox"/> Cookie Crisp	Child
<input checked="" type="checkbox"/> New Baby	Child

Add Dependent

Enroll in Your Plan

The Family Cost showing 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 cost, select the help icon next to each plan option.

Plan Name	Cost (Before Tax)	Cost (After Tax)	Employer Cost	Pay Period Cost
<div>Select</div> Waive				\$0.00
<div>Select</div> COVA Hltbkr + Prev Den		\$54.00	\$1932.00	\$54.00
<div>Select</div> COVA Hltbkr + Exp Den&Vls		\$170.00	\$1932.00	\$170.00
<div>Select</div> COVA Hltbkr + Exp Den		\$140.00	\$1932.00	\$140.00
<div>Select</div> COVA High Ded Plan + PrevDen			\$1704.00	\$0.00
<div>Select</div> COVA High Ded Plan + Exp Den		\$88.00	\$1704.00	\$88.00
<div><input checked="" type="checkbox"/></div> COVA Care + Prev Dental		\$306.00	\$1935.00	\$306.00
<div>Select</div> COVA C+Prev Den+Out-of-rtak		\$359.00	\$1935.00	\$359.00
<div>Select</div> COVA Care + Expanded Dental		\$395.00	\$1935.00	\$395.00
<div>Select</div> COVA C+Exp Den+Out-of-rtak		\$448.00	\$1935.00	\$448.00
<div>Select</div> COVA C+Exp Den+Vision&Hmg		\$448.00	\$1935.00	\$448.00
<div>Select</div> COVA+ExpDen+Out-of-rtak+V&Hr		\$500.00	\$1935.00	\$500.00
<div>Select</div> Sentara (Optima)		\$272.00	\$1907.00	\$272.00
<div>Select</div> TRICARE		\$161.00		\$161.00

Overview of All Plans

Resources

COVA HealthAware


Arbman

Optima Health

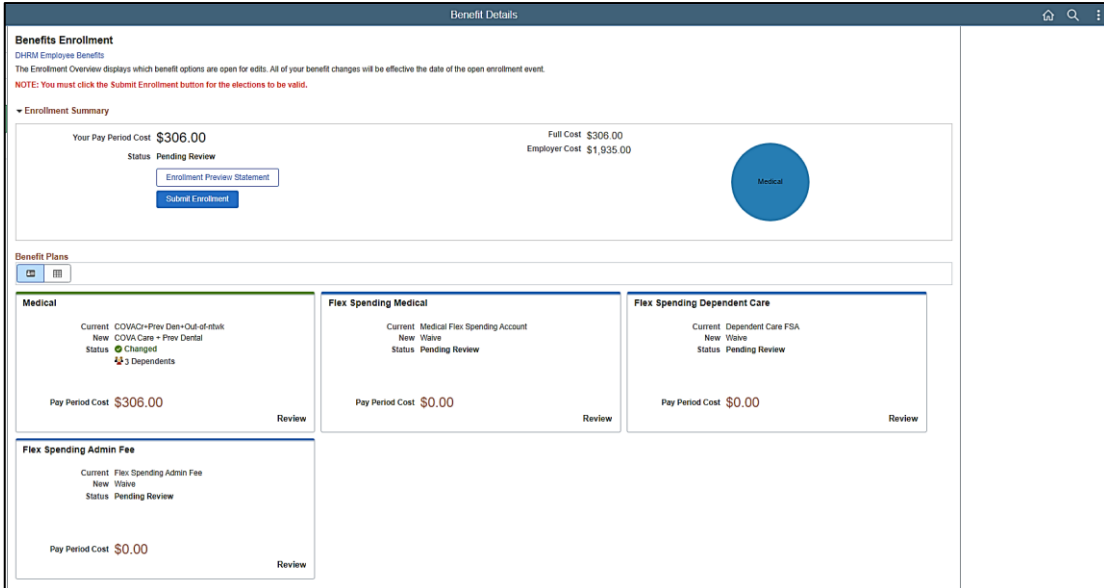




Tricare

34.


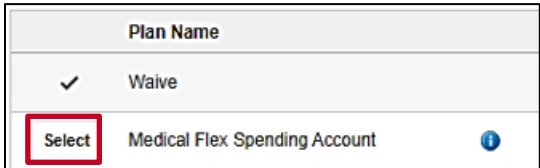



Click the **Done** button in the upper right-hand corner of the page.



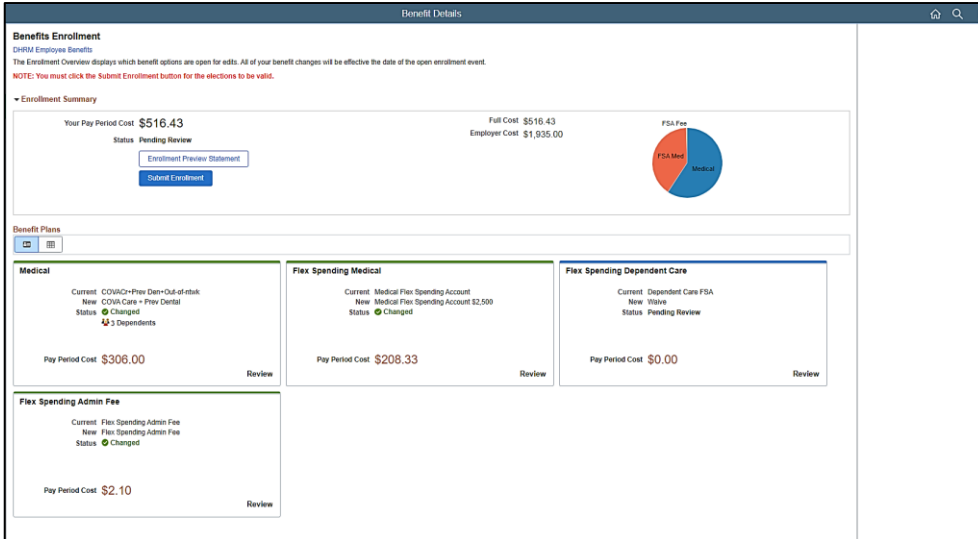





Step	Action
<p>The <b>Benefit Details</b> page returns.</p> 	
35.	<p>Review the updated information in the <b>Medical</b> tile.</p> 
	<p>The <b>Medical</b> tile now displays the coverage selected in the <b>New</b> row and the number of dependents enrolled along with the Pay Period Cost for the new plan year. Additionally, the <b>Medical</b> tile now has a Status of “Changed”.</p>
36.	<p>Click the <b>Flex Spending Medical</b> tile.</p> 
	<p>Flex Spending accounts must re-elected each year (it is currently waived in this example but will be elected for this plan year).</p>




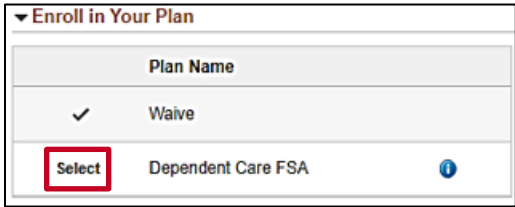





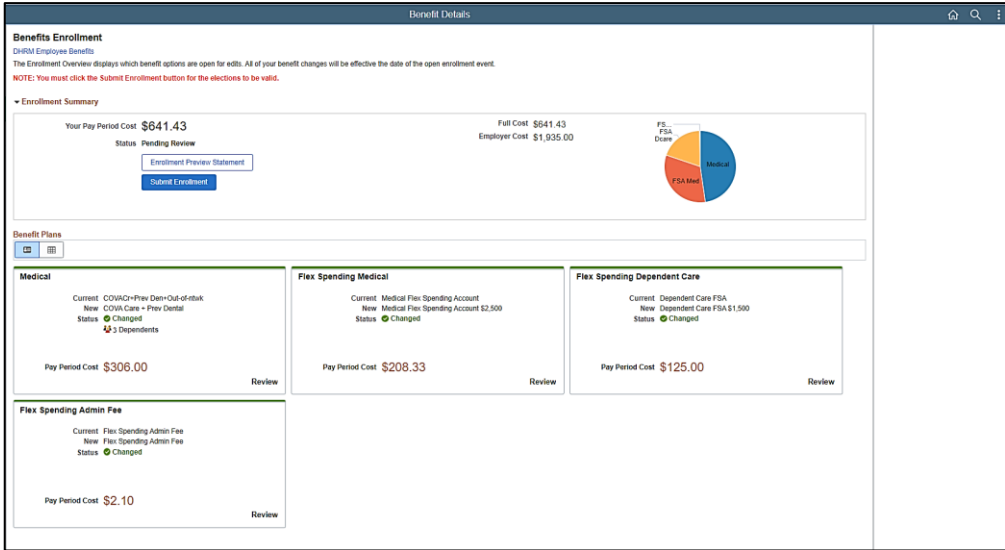


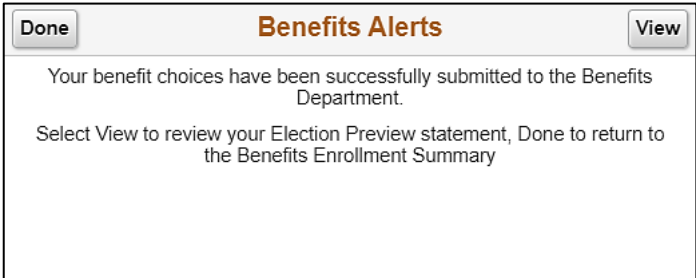

Step	Action
	<p>The <b>Flex Spending Medical</b> page displays.</p> 
37.	<p>Click the <b>Select</b> button to elect the Flex Spending Medical plan.</p> 
	<p>The <b>Flex Spending Medical</b> page refreshes.</p> 
38.	<p>Enter the applicable amount in the <b>Annual Pledge</b> field. The amount entered must be the amount you want to come out of your pay for the entire plan year.</p> 
39.	<p>Click the <b>Done</b> button in the upper right-hand corner of the page.</p> 



Step	Action
	<p>The <b>Benefit Details</b> page redispays.</p> 
40.	<p>Review the updated information in the <b>Flex Spending Medical</b> tile.</p> 
	<p>The <b>Flex Spending Medical</b> tile now displays the plan as selected in the <b>New</b> row along with the Pay Period Cost for the new plan year. Additionally, the <b>Flex Spending Medical</b> tile now has a Status of “Changed”.</p>
41.	<p>Review the <b>Flex Spending Admin Fee</b> tile. Once either a Flex Spending Medical or Flex Spending Dependent Care plan is enrolled in, the system automatically enrolls you in the Flex Spending Admin Fee and this cannot be updated. If you are not enrolling in a Flex Spending Dependent Care plan, skip to Step 46.</p> 




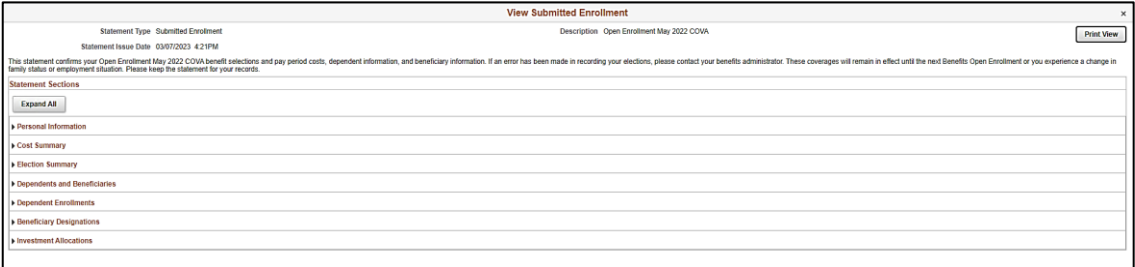

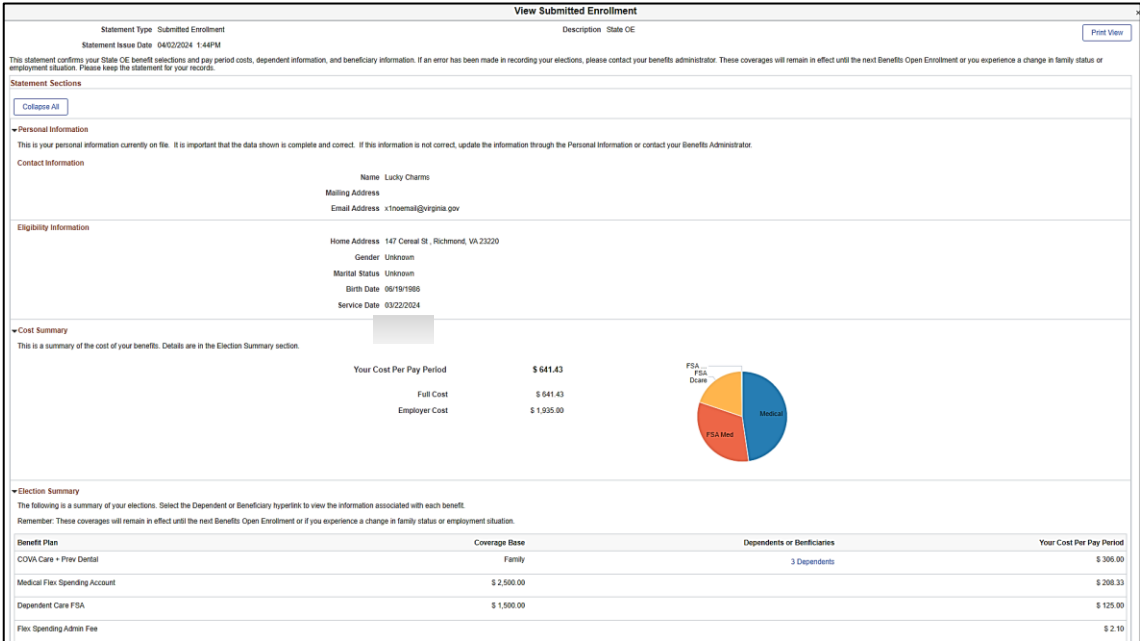

Step	Action
42.	<p>Click the <b>Flex Spending Dependent Care</b> tile.</p> 
	<p>Flex Spending accounts must re-elected each year (it is currently waived in this example but will be elected for this plan year).</p>
<p>The <b>Flex Spending Dependent Care</b> page displays.</p> 	
43.	<p>Click the <b>Select</b> button to elect the Flex Spending Dependent Care plan.</p> 
<p>The <b>Flex Spending Dependent Care</b> page refreshes.</p> 	
44.	<p>Enter the applicable amount in the <b>Annual Pledge</b> field. The amount entered must be the amount you want to come out of your pay for the <b>entire</b> plan year.</p> 


Step	Action
45.	<p>Click the <b>Done</b> button in the upper right-hand corner of the page.</p> 
<p>The <b>Benefits Details</b> page redisplay.</p> 	
46.	<p>Review your elections and then click the <b>Submit Enrollment</b> button.</p> 
	<p>This step <b>must</b> be performed to submit your open enrollment elections.</p>
<p>A <b>Benefits Alerts</b> message displays in a pop-up window.</p> 	
47.	<p>Click the <b>View</b> button to review your Election Preview Statement.</p> 



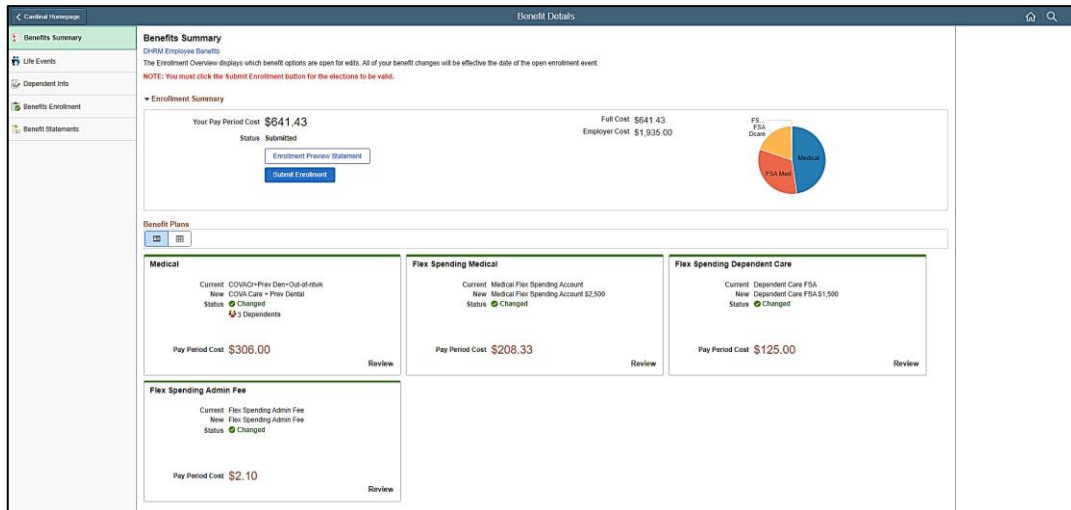
# Benefits Job Aid


## ESS\_How to Make Open Enrollment Elections

Step	Action
	If you don't want to review your Election Preview Statement, click the <b>Done</b> button and you have completed the open enrollment process.
The <b>View Submitted Enrollment</b> page displays.	
	
48.	Click the <b>Expand All</b> button. 
The page refreshes and the detailed information displays.	
	
49.	Review the enrollment information as needed. Optionally, click the <b>Print View</b> button to print the Election Preview Statement. 

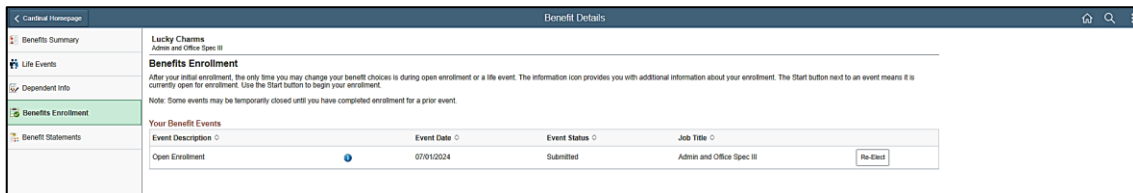
Step	Action
50.	Once complete, click the <b>Close (X)</b> icon to return to the <b>Benefit Details</b> page. 

The **Benefit Details** page redisplay.



51.	Click the <b>Benefits Enrollment</b> menu item on the left-hand side of the page. 
-----	--

The **Benefits Enrollment** page redisplay.




The Event Status now displays as “Submitted”. If you added a dependent during the open enrollment process, you must now submit the supporting documentation to your agency Benefits Administrator for the coverage to be transmitted to the Health Benefits Vendor. Supporting documentation must be submitted within 60 days of the Open Enrollment Event Date.

Congratulations! You have completed the benefit enrollment process for Open Enrollment. You will receive an email with your open enrollment confirmation statement.