



WELCOME
to Open Enrollment
2025

D214 My Apps

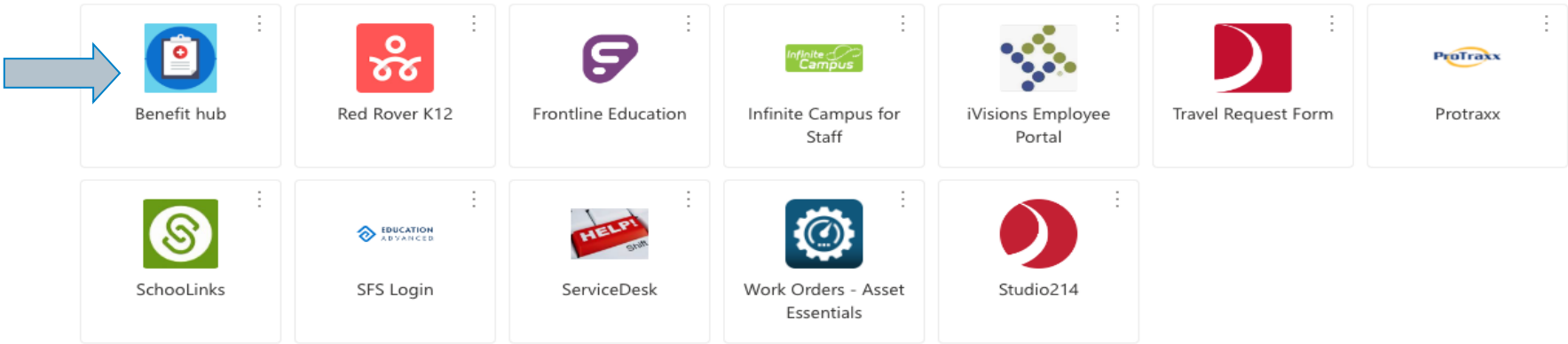
Apps dashboard

 Add apps  Create collection  Customize view













Staff Links Apps

Staff Links

 Settings



The dashboard displays a grid of application tiles. A blue arrow points to the 'Benefit hub' tile in the top-left corner. Each tile contains an icon, a title, and a vertical ellipsis menu icon in the top-right corner.

 Benefit hub	 Red Rover K12	 Frontline Education	 Infinite Campus for Staff	 iVisions Employee Portal	 Travel Request Form	 Protraxx
 SchoolLinks	 SFS Login	 ServiceDesk	 Work Orders - Asset Essentials	 Studio214		

<https://c2mb.ajg.com/townshipd214/home/>

Agenda

1

What's New, What's Changing, What's Staying?

High level overview that we will dive deeper throughout the presentation.

2

Your costs

How much is going to come out of your paycheck every pay period?

3

Open Enrollment Process

How to make changes? Other requirements for HSA and FSA participants.

4

Additional D214 Benefits

Consider participating in the 403(b). IMRF pension members – also consider the Voluntary Additional Contribution (VAC) program.

What's New / Changing / Staying the Same?

What's New?

- Benefitsolver - **New** employee enrollment portal (No longer using AF)
- Voya Financial - Voluntary Accident, Critical Illness, Hospital Indemnity
- The Standard - Voluntary Short Term Disability, Long Term Disability, AD&D
- Limited Purpose FSA

What's Changing?

- HDHP Deductible increases for Single (from \$3,200 to \$3,300) and Family (from \$6,000 to \$6,400)
- HSA, FSA, Dependent Care FSA, Transit/Commuter FSA vendor: MyChoice Accounts through UMB Bank
- Voluntary benefits vendors
- Per paycheck premium deductions

What's New / Changing / Staying the Same?

What's Staying the Same?

- BCBS remains our Medical carrier
 - MedImpact remains our PBM for PPO/HDHP; Prime remains our PBM for HMO
- Allied/Guardian remains our Dental carrier
- EyeMed remains our Vision carrier
- The Board HSA contribution (\$1,600 for Single coverage; \$3,200 for Family coverage) is unchanged

Medical Plan Options



Medical Benefits Comparison

Benefit	PPO Plan		High Deductible Health Plan (HSA)		HMO Plan
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network ONLY
Individual Deductible	\$750		\$3,300	\$6,600	\$0
Family Deductible	\$1,500		\$6,400	\$12,800	\$0
Individual Out-of-Pocket Max*	\$2,250	\$3,750	\$3,300	\$13,200	\$1,500
Family Out-of-Pocket Max*	\$4,500	\$7,500	\$6,400	\$25,600	\$3,000
Office Visit	90% after deductible	80% after deductible	100% after deductible	80% after deductible	\$20 copay
Preventive Care	Covered at 100%	80% after deductible	Covered at 100%	80% after deductible	Covered at 100%
Inpatient Admission	90% after deductible	\$300 copay, then 70% after deductible	100% after deductible	80% after deductible	Covered at 100%
Emergency Room	\$150 copay (waived if admitted)		100% after deductible	80% after deductible	ER: \$100 copay; UC: \$20 copay
OT/PT/ST & Chiropractic	90% after deductible	80% after deductible	100% after deductible	80% after deductible	Covered at 100%
Prescription Out-of-Pocket Limit	\$7,200 (Ind.); \$14,400 (Fam.)		N/A		\$5,100 (Ind.); \$10,200 (Fam.)
Retail Rx (30-day supply) – Generic / Preferred / Non-Preferred / Specialty	\$20 / \$40 / \$80 / \$100		100% after deductible		\$20 / \$40 / \$80 / \$100
Mail Order Rx (90-day supply) – Generic / Preferred / Non-Preferred / Specialty	\$40 / \$80 / \$160		100% after deductible		\$40 / \$80 / \$160

2025 Insurance Premiums

	Total Monthly Premium	Monthly Board Contribution	Monthly Employee Deduction	Employee Per Pay Deduction (24 pays)	Employee Per Pay Deduction (20 pays*)
BCBS PPO					
Single	\$861.73	\$712.33	\$149.40	\$74.70	\$89.64
Family	\$2,411.35	\$1,880.73	\$530.62	\$265.31	\$318.37
BCBS HDHP**					
Single	\$830.51	\$755.54	\$74.97	\$37.49	\$44.98
Family	\$2,324.01	\$2,023.55	\$300.46	\$150.23	\$180.28
BCBS HMO					
Single	\$731.95	\$658.32	\$73.63	\$36.82	\$44.18
Family	\$2,049.48	\$1,765.36	\$284.12	\$142.06	\$170.47
Allied Dental					
Single	\$81.75	\$73.85	\$7.90	\$3.95	\$4.74
Family	\$182.64	\$157.83	\$24.81	\$12.41	\$14.89
EyeMed Vision					
Single	\$7.60	\$0.00	\$7.60	\$3.80	\$4.56
Family	\$19.38	\$0.00	\$19.38	\$9.69	\$11.63

What Is a Health Savings Account?



- A Health Savings Account (HSA) is an individually owned, portable, tax-advantaged account that only eligible individuals may establish.
- Accounts earn interest and can be invested, over minimum balances
- An HSA is exclusively for paying qualified medical expenses.
- HSAs must be used in combination with a qualified High Deductible Health Plan (HDHP).
- No “use it or lose it” rules — you own the account, which means you keep the funds in your account if you leave the company or change plans.

HSA Contributions

The IRS determines the minimum/maximum amounts. The amounts are adjusted annually for inflation.

Employee, employer or any other person may make contributions on behalf of an eligible individual.

U.S. Treasury Guidelines	2024 Maximum HSA Contribution	2025 Maximum HSA Contribution
Single Coverage	\$4,150	\$4,300
Family Coverage	\$8,300	\$8,550
Individuals age 55 and older can make catch-up contributions: \$1,000		

****2025 D214 HSA Contribution: \$1,600 for Single Coverage; \$3,200 for Family Coverage****

HSA Contributions cont.

- You can contribute over 24 pay periods or fewer.
- You can make contribution changes monthly throughout the year.
- Your contributions are only available as you are deducted through payroll.

Open Enrollment 2024



Open Enrollment Meeting Presentations and FAQs

Insurance/OE FAQs

- [2024 PPO and HMO Open Enrollment Member Presentation](#)
- [2024 PPO and HMO Open Enrollment Member Recording](#)
- [Group Meeting Presentation 2023](#)

- [2024 Benefit Guide](#)
- [Rate Sheet 2024](#)
- [2024 HSA Employee Contribution Election Form](#)
- [Vision Benefit Summary with Eye360](#)
- [Eye360 - Enhanced Offer](#)
- [Wondr Flyer](#)
- [Livongo - Hypertension Program](#)
- [Livongo - Diabetes Management Program](#)
- [SBC - PPO](#)
- [SBC - HDHP](#)
- [SBC - HMO](#)
- [Fitness Program](#)

HSA Eligibility

To be an eligible individual and qualify for an HSA you:

Must be enrolled in an HSA-compatible High Deductible Health Plan (HDHP)

May not have other types of insurance with first-dollar medical coverage

May not be claimed as a dependent on another person's tax return

May not be enrolled in Medicare

An individual can be **Medicare-eligible** and have an HSA. However, once enrolled in Medicare, contributions to the HSA account must stop. The individual can keep any funds in the account prior to enrolling in Medicare and use those funds to pay for qualified medical expenses tax-free.

What Is a Flexible Spending Account?



- A Flexible Spending Account (FSA) allows you to set aside up to **\$3,200** on a pre-tax basis to cover medical, dental and vision expenses for you and your tax dependents.
- Both you and your spouse (if applicable) can pledge the full **\$3,200** (\$6,400 total).
- Your annual pledge is available on Day 1 of your plan (unlike the HSA).
- PPO and HMO participants are eligible to participate in the FSA.
- Use it or lose it — there is a carryover/rollover of **\$640 from the 2024 plan year to 2025, but if your balance exceeds \$640**, those additional funds revert back to the employer.
- You cannot make changes to your annual pledge (unlike the HSA)
- You cannot participate make/receive contributions in an HSA and participate in the Medical FSA. New in 2025 - Limited Purpose FSA.

What Is a Limited Purpose Flexible Spending Account?



- A Limited Purpose Flexible Spending Account (LPFSA) allows you to set aside up to **\$3,200** on a pre-tax basis to cover **dental** and **vision** expenses for you and your tax dependents.
- You CAN participate make/receive contributions in an HSA and participate in the Limited Purpose FSA (unlike the Medical FSA).
- Use it or lose it — there is a carryover/rollover of **\$640 from the 2024 plan year to 2025, but if your balance exceeds \$640**, those additional funds revert back to the employer.

What Is a Dependent Care Flexible Spending Account?

DEPENDENT CARE FSA



- A Dependent Care FSA (DCFSA) allows you to set aside up to \$5,000 on a pre-tax basis to cover dependent care related expenses.
- Eligible dependent care expenses include before and after-school care, nannies, day care facilities, summer camps, elder care and nursing homes.
- Full list of eligible expenses: <https://www.businessolver.com/mychoice-accounts/participants/fsa-hra-eligible-expense/>
- You and your spouse (if applicable) can only pledge up to the \$5,000 annual maximum (unlike the Medical & Limited Purpose FSA).
- Reimbursement amounts are only available as you make contributions through payroll deductions (unlike the Medical & Limited Purpose FSA).
- You CAN participate make/receive contributions in an HSA and participate in the Dependent Care FSA (unlike the Medical FSA).
- Use it or lose it - there is no rollover (unlike the Medical & Limited Purpose FSA).
- You cannot make changes to your annual pledge amount (unlike the HSA).

What Is a Transit Spending Account?



- A Commuter Spending Account, also known as a Transit Spending Account allows you to set aside up to \$315 on a pre-tax basis to cover commuting expenses incurred when going to/from work.
- Eligible expenses include trains and busses.
- Reimbursement amounts are only available as you make contributions through payroll deductions (unlike the Medical & Limited Purpose FSA).
- You CAN participate make/receive contributions in an HSA and participate in the Transit Spending Account.
- Use it or lose it - there is no rollover (unlike the Medical & Limited Purpose FSA).
- You can make changes to your annual pledge amount.

But there's more...

Sample debit card



- For a full list of eligible expenses, visit:
<https://www.businessolver.com/mychoice-accounts/participants/fsa-hra-eligible-expense/>
- If you enroll in any of these spending accounts, you will receive ONE debit card for HSA, FSA (including Limited FSA), Dependent Care and/or Transit.
- As a reminder, MyChoice Accounts will be the administrator of these benefit and utilizes UMB Bank.
- FSA Carryover/rollover balances from 2024 will be available **end of April**.
- HSA - You must actively re-elect HSA during OE:
 - If you have a balance with AF that you'd like to transfer over to your MyChoice account with Businessolver, you will need to agree to open an account and to transfer funds.
 - If you have investments, you must liquidate these investments by February 17, 2025.
 - During the transfer period, there will be a blackout period from February 21, 2025 - March 10, 2025. Your funds will be available March 11th.
 - During the blackout period, you will have access to your new funds contributed by the district (and you) as of January 1, 2025.

Dental Insurance

- Dental remains with Allied Benefit Systems
- The plan utilizes Guardian's **DentalGuard Preferred Network**
 - Provider Finder tool: <https://www.guardiananytime.com/fpapp/search>
- Remember in-network dentists accept lower fees-per-service which allows you to stretch your annual maximum benefit and receive more services

24 Pay Employees

Employees

Single: \$3.95

Single: \$4.74

Family: \$12.41

Family: \$14.89

Rates

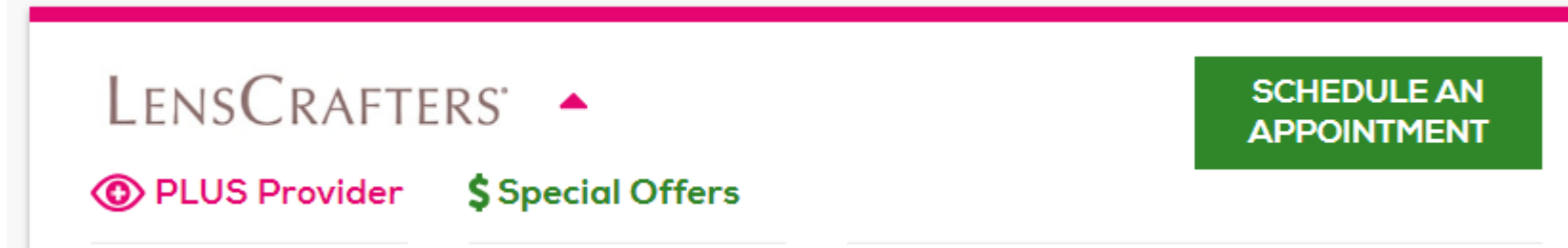
20 Pay



Vision Insurance



- Voluntary Vision remains with EyeMed
- Enhanced benefits with Eye360 when using a PLUS provider
 - Provider Finder tool:
https://eyedoclocator.eyemedvisioncare.com/member/en?utm_content=text&utm_source=eyemed.com&utm_medium=top_nav&utm_campaign=find-an-eye-doctor&utm_term=leaf_text
 - Insight Network



- Annual eye exam copay reducing from \$10 to \$0
- Increased frame allowance from \$150 to \$200



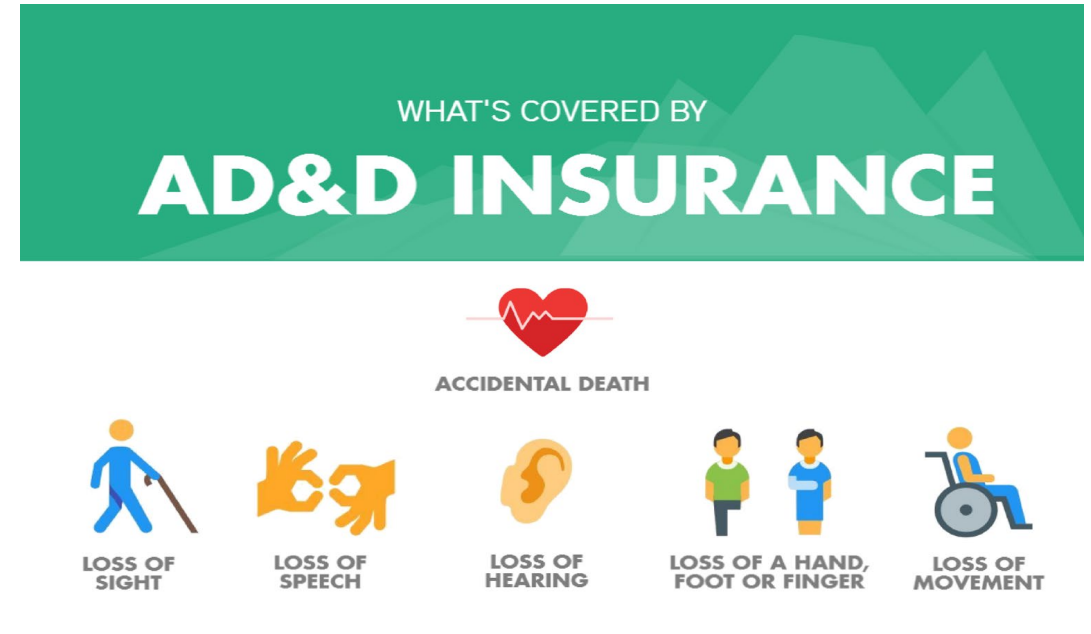
Voluntary Life Insurance



- Remains with The Standard
- A special open enrollment period is being offered, which will allow you to enroll without having to complete EOI (medical underwriting) up to the Guarantee Issue (GI) amounts for you and your spouse. This applies even if you previously waived coverage
- Note: *Elections made after this special enrollment period will be subject to EOI.*
- If you previously applied for coverage with The Standard, but were denied, you will be required to submit EOI again.
- Employee: \$10,000 - \$500,000
 - **GI increased to \$150,000**
 - Increments of \$10,000
- Spouse: \$10,000 - \$250,000
 - **GI increased to \$50,000**
 - Increments of \$10,000
- Child: \$5,000 - \$20,000
 - All amounts are GI
 - Increments of \$5,000

Voluntary Accidental Death and Dismemberment (AD&D) Insurance

- Changing vendors from AIG to The Standard
- Employee: \$10,000 - \$500,000
 - No EOI
 - Increments of \$10,000
- Spouse: \$10,000 - \$250,000
 - No EOI
 - Increments of \$10,000
 - Limited to 100% of your coverage
- Child: \$5,000 - \$20,000
 - No EOI
 - Increments of \$5,000
 - Limited to 100% of your coverage



Voluntary Short-Term Disability



- New benefit through The Standard
- All full-time staff are eligible
- Two plan options
 - Both plans have the same benefit schedule but the elimination period is different
 - This refers to how long you need to be disabled before benefits can begin
- STD can help cover mortgage/rent, utilities, medical bills, childcare costs, etc. while you're unable to work
- Need more information? The Standard will be providing the opportunity for you to schedule a call to speak to a representative

	Group STD Plan A	Group STD Plan B
Benefit Schedule	60%	60%
Insured Predisability Earnings	\$2,500	\$2,500
Maximum Weekly Benefit	\$1,500	\$1,500
Minimum Weekly Benefit	\$25	\$25
Benefit Waiting Period Accident	14 Days	7 Days
Benefit Waiting Period Sickness	14 Days	7 Days
Maximum Benefit Period	180 Days	180 Days



Voluntary Long-Term Disability



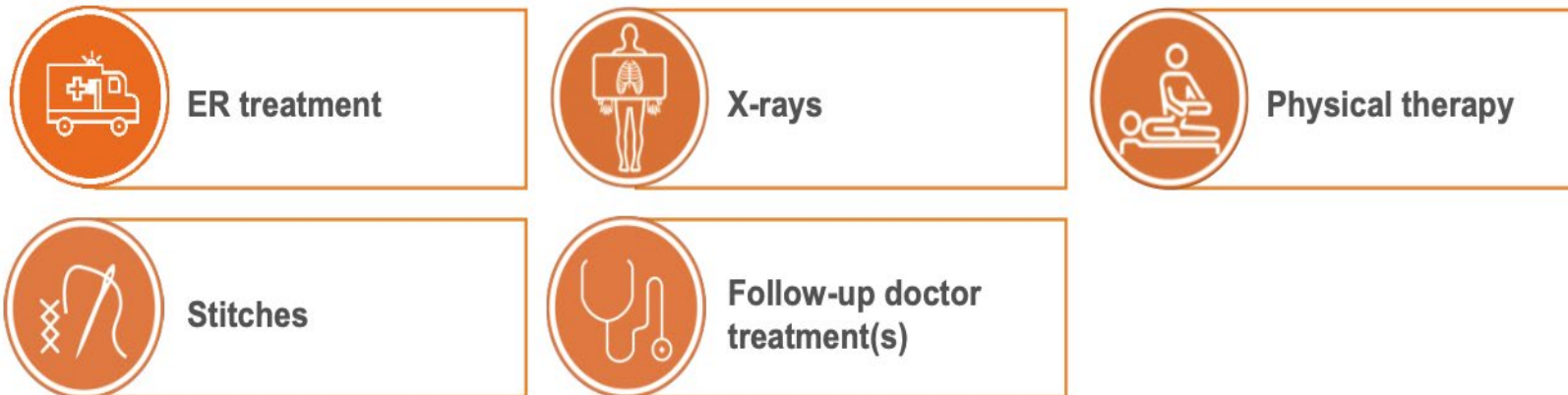
- New benefit through The Standard
- All full-time staff are eligible
- One Plan Option
 - Begins after 180 day elimination period
 - Pays 60% of your eligible earnings up to a maximum benefit of \$7,500
- Similar to the STD, LTD can help cover expenses while you're unable to work
- Need more information? The Standard will be providing the opportunity for you to schedule a call to speak to a representative



	Voluntary LTD Plan 2-All other Members
Benefit Schedule	60%
All Sources Benefit	n/a
Insured Predisability Earnings (1)	\$12,500
Maximum Monthly Benefit	\$7,500
Minimum Monthly Benefit	\$100 or 10%
Benefit Waiting Period	180 Days
Maximum Benefit Period	To SSNRA
Guarantee Issue Benefit Amount	Full Benefit
Employer Contribution	0%
Minimum Participation	Greater of 25% or 10 lives
Taxability of Benefits	Non-Taxable
Own Occupation Period	36 Months
Partial/Residual Disability	Included
Preexisting Condition Period	3/12
Mental & Nervous Limitation	24 months
Substance Abuse Limitation	24 months
Other Limited Conditions	24 months
Return to Work Incentive	12 months
Employee Assistance Program	Included: 3 face-to-face

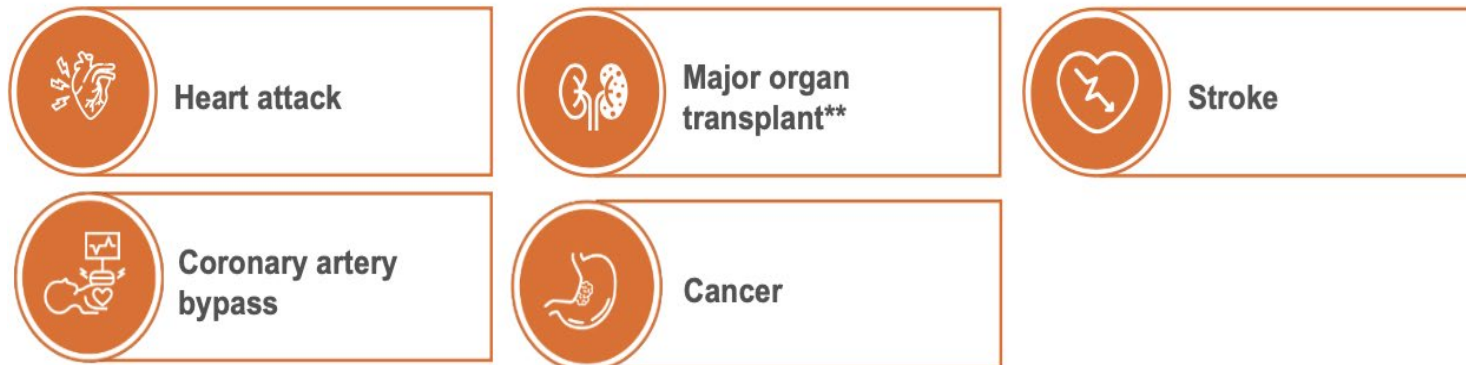
Voluntary Accident

- Changing vendors from American Fidelity to Voya Financial
- Two plan options: Standard and Enhanced
- For more information, visit D214's microsite: <https://presents.voya.com/EBRC/d214>



Voluntary Critical Illness

- Changing vendors from American Fidelity to Voya Financial
- Benefit amounts between \$10,000 and \$30,000
 - Spouse benefit is 50% of Employee Amount
 - Child benefit is 25% of Employee Amount
- For more information, visit D214's microsite: <https://presents.voya.com/EBRC/d214>



Voluntary Hospital Indemnity



- Changing vendors from American Fidelity to Voya Financial
- Two plan options: Standard and Enhanced
- For more information, visit D214's microsite: <https://presents.voya.com/EBRC/d214>

Type of Admission	Benefit Amount Standard Plan	Benefit Amount Enhanced Plan
Hospital Admission	\$1,000	\$2,000
Critical Care Unit (CCU) Admission	\$1,000	\$2,000

Type of Facility	Daily Benefit Standard Plan	Daily Benefit Enhanced Plan
Hospital confinement (1 x the daily benefit amount, up to 10 days maximum per confinement)	\$100	\$200
Critical Care Unit (CCU) confinement (1 x the daily benefit amount, up to 10 days maximum per confinement)	\$100	\$200
Rehabilitation Facility confinement (1/2 of the daily benefit amount, up to 10 days maximum per confinement)	\$50	\$100

Observation Unit		
At least 4 consecutive hours but less than 20 consecutive hours, other than as an inpatient. Not payable for any day that a facility confinement or admission benefit is payable.	\$100	\$100



BCBS “Extras”

- Digital Health Partners:
 - Teladoc [Diabetes](#) and [Hypertension](#) management programs (PPO/HDHP)
 - [Wondr](#) - skills-based digital weight loss program (PPO, HDHP and HMO)
- Learn to Live program – mental health coaching program available to PPO/HDHP members
- Benefit Value Advisor (BVA) – helps set appointments, provide procedure cost estimates and assists with obtaining prior authorizations. Available to PPO/HDHP members
- [Member Rewards](#) – in conjunction with BVA, compares costs for procedures and allows PPO members to receive cash rewards when using a reward-eligible location
- [Well onTarget](#) – member wellness portal which includes [fitness program options](#), personal wellness challenges, the Blue Points rewards program (allowing you to earn rewards when engaging in healthy behaviors) and much more

BCBS “Extras” cont.

- Blue365 – discount program for healthy meals, fitness equipment/apparel, etc.
- Ovia Health - women and family health
- Identity Theft Protection through Experian – mental health coaching program available to PPO/HDHP members
- Perspectives Employee Assistance Program (EAP)

Diabetes Management by Teladoc Health

The Diabetes Management program by Teladoc Health combines a connected glucose meter and personal support. Features include:

- Real-time personalized messaging on the connected blood glucose meter, plus ability to send reports directly to PCP
- Certified diabetes educators available 24/7/365
- Instant interventions when blood glucose readings are out of range
- Optional notifications for high and low readings to give loved ones and providers insight
- Test strips and lancets at no extra cost, delivered right to the member's door
- Business reports on enrollment, activation and clinical outcomes
- Member-initiated reporting to a Blue Cross and Blue Shield of Illinois clinician with blood glucose readings and trends to enable more focused conversations



**PPO/HDHP
Members Only**

Hypertension Management Solution Program

- Easy remote monitoring via wireless-connected blood pressure cuff
- Notifications for high blood pressure readings and reminders to check blood pressure
- Intuitive mobile experience to track progress and receive personalized, clinically-grounded coaching and educational content
- 24/7 coaching in nutrition and weight stress and blood pressure management
- Services covered as preventive with no out-of-pocket costs.



**If you are eligible,
Teladoc will contact you
about how to sign up for
this program.**

**PPO/HDHP
Members Only**



Wondr®

Metabolic Syndrome Reversal Program

**PPO, HDHP and HMO
Members**

- Online program and mobile app allows members access anywhere at any time
- Builds behavioral skills (no dieting) to promote long-term weight loss and risk reduction
- Integration with activity trackers and voice-controlled/smart speakers
- Services covered as preventive with no out-of-pocket cost

**Your employer or Wondr
will send you information
about how to sign up**

www.wondrhealth.com/sscrmp

Digital Mental Health

(available to non-HMO members)



Online programs through Learn to Live at no added cost for:

- Stress, anxiety and worry
- Depression
- Social anxiety
- Insomnia
- Panic
- Substance use
- Resiliency

- Available to employees and their family members 13 years and older
- Programs in English and Spanish
- Personal coaching by phone, text or email

Get started with a mental health assessment:

- Log in to Blue Access for MembersSM
- Choose Wellness, then find Digital Mental Health

Learn to Live provides educational behavioral health programs; members considering further medical treatment should consult with a physician.

Member Rewards

(available to non-HMO members)



Guiding Members to Lower-Cost and High-Quality Options

Member Rewards helps you shop for procedures and services, and earn cash rewards.

- Save money by shopping in-network
- Compare costs for scans, colonoscopies, surgeries and more
- Estimate out-of-pocket costs



How Does Member Rewards Work?

1

Call a Benefits Value Advisor or search online via Provider Finder[®] to find a reward-eligible location for your procedure

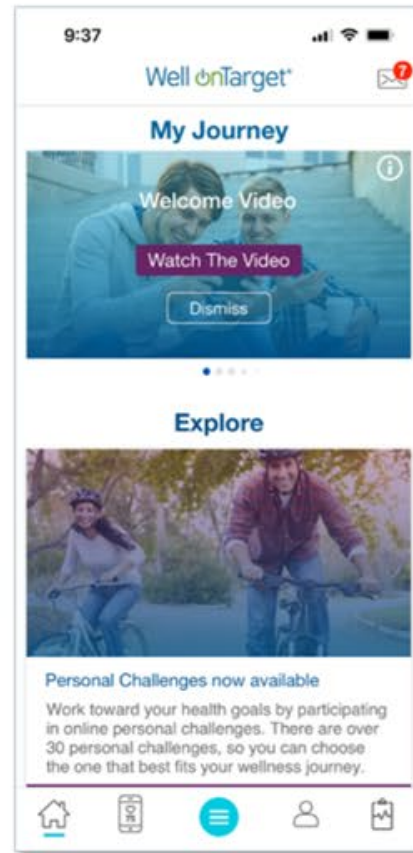
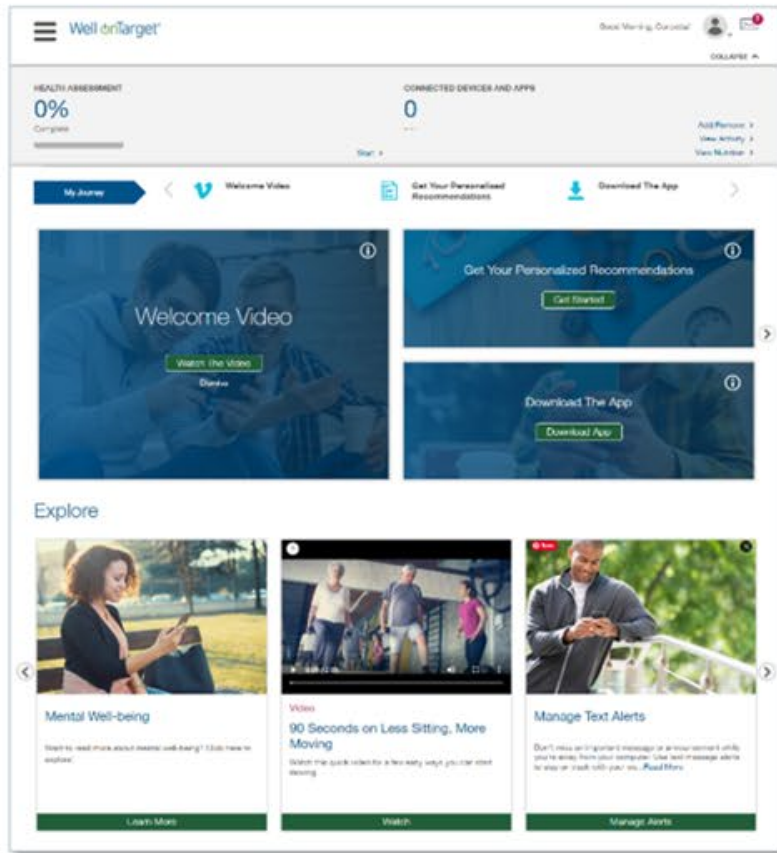
2

Get the procedure at your chosen reward-eligible location

3

Receive a cash reward by check, which will be mailed directly to your home, after your claim is paid and the location is verified as reward-eligible

Member Wellness Portal



The portal includes recommended activities that make up your Personal Member Journey.

The Fitness Program is provided by Tivity Health™ Services, LLC, an independent contractor which administers the Prime® Network of fitness centers. The Prime Network is made up of independently-owned and managed fitness centers. Prime is a registered trademark of Tivity Health, Inc. Tivity Health is a trademark of Tivity Health, Inc.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

Screen images are for illustrative purposes only.

Well onTarget® Highlights

- Health Assessment
- Member dashboard
- Digital self-management programs
- Trackers and tools
- Interactive symptom checker
- Health and wellness content
- Secured messaging
- Blue PointsSM rewards*
- Fitness Program
- Tracking for fitness and nutrition and also device integration
- Personal wellness challenges
- Mobile app (AlwaysOn)

*Blue Points program rules are subject to change without prior notice. Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

AlwaysOn is owned and operated by Onlife Health Inc. an independent company that has contracted with Blue Cross and Blue Shield of Illinois to provide digital health management for members with coverage through BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

Retirement Programs

- 403(b) / 457(b)
- IMRF Voluntary Additional Contributions



403(b) / 457(b)



> Employees > Employers > Advisors > Track Forms

Plan Detail

Below is a complete listing of your available 403(b)/457(b) providers, including information about their available investment types, agent contact information, and online enrollment. In addition, you will find a Salary Reduction Agreement to start, stop, or change your deduction, as well as forms to request a transaction.



Plan Details for Township High School Dist. 214, Arlington Heights IL

403(b)	457(b)
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Step 1 – Go to www.omni403b.com/plandetail/7899

Step 2 – Choose 403(b) or 457(b) (or both!)

Step 3 – Select a Participating Investment Provider

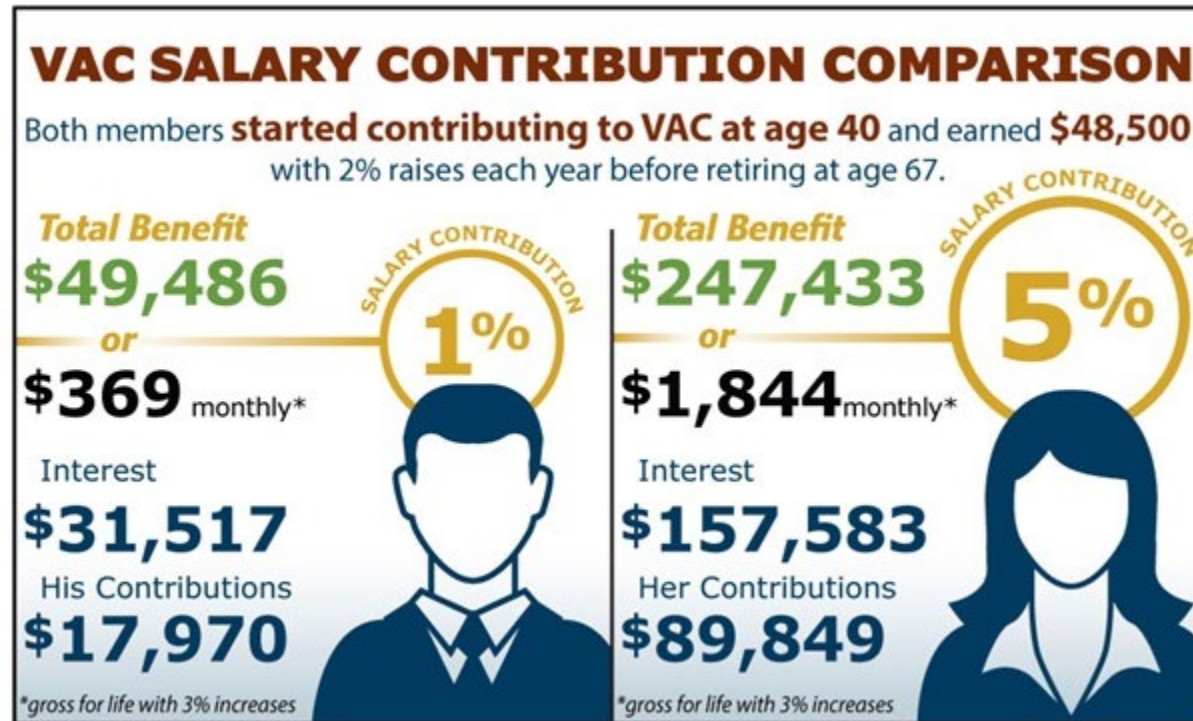
Step 4 – Work with Investment Provider to establish the account and select investment vehicles

Step 5 – Complete the electronic Salary Reduction Agreement – SRA and submit to OMNI for processing

- American Century Services LLC
- American Fidelity Assurance Co.
- Ameriprise Financial/RiverSource
- Aspire - IPX
- Aspire Financial Services
- Corebridge Financial (formerly AIG/VALIC)
- Equitable (formerly AXA)
- Fiduciary Trust Intl-Franklin Templeton
- Horace Mann Life Ins. Co.
- Invesco OppenheimerFunds
- Lincoln Investment Planning
- ROTH - American Century Services LLC
- ROTH - Aspire
- ROTH - Aspire - IPX
- ROTH - Equitable (formerly AXA)
- ROTH - Horace Mann Life Ins. Co.
- ROTH - Invesco OppenheimerFunds
- ROTH - Lincoln Investment

IMRF Voluntary Additional Contribution (VAC) program

- Allows IMRF staff to save additional retirement income
- Post-tax up to 10% of your annualized salary
- Current ROI 7.25%



2025 Enrollment Process

- Benefitsolver



Our Benefits Enrollment Is Now Open!

Dear Erica Smith,

Today is the day. Our benefits enrollment is now open, and you have until the close of your enrollment period to make your benefits elections for the upcoming year.

Log in to www.D214benefits.com to review your benefits, make changes or confirm continuation of the benefits you currently have. If you do not complete your transaction prior to the window close date, you will be unable to make changes to your employee benefits until the next benefits enrollment period, unless you experience a qualifying life event, such as a marriage, birth or adoption.

If you have any questions, please log in to www.D214benefits.com to review information regarding your benefit options. Your benefits summary is available 24/7.

If you are logging in for the first time, you will need to register as a first-time user. The company key is d214.

ACT NOW to ensure you and your family are covered for the coming year.

Thank you,
Township High School District 214

- Instructions

- Visit www.d214benefits.com Company code **D214** (case-sensitive)

Easy Enrollment Process

During this enrollment, you'll be required to register and use the company code **D214** by visiting www.d214benefits.com

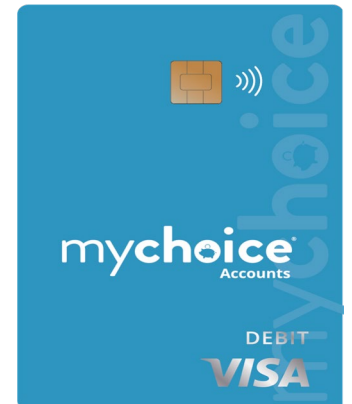
The enrollment process will allow you to:

- Explore your options
- Chat with Sofia
- Use the decision support tool
- Enroll in coverage
- Finalize your election and access your benefit summary

The screenshot displays the user interface for the enrollment process. It features a registration form with fields for 'User Name' and 'Password', both marked as 'case sensitive'. A 'Register' button is located below the password field. Below the registration form is a 'Login' button and a link for 'Trouble Logging In?'. A message for 'RETURNING USERS' instructs them to click the 'Trouble Logging In?' link to reset their login details. A navigation bar includes links for 'Home', 'Message Center', and 'Reference Center'. A prominent banner states 'Enrollment is Here!' with a sub-message 'Your Enrollment Ends November 12' and a 'Start Here' button. At the bottom, a chat window for 'Sofia, your trusted benefits advisor!' is open, showing a welcome message and a 'Type Your Question' input field. A 'Back' button is on the left and a 'Next' button is on the right.

2025 Enrollment Process (cont.)

- Once enrollment is complete, you will receive a benefits confirmation statement showing your 2025 coverage elections and per pay period premium amounts
- Payroll deduction changes will occur during the first pay period in January
- ID cards for Medical/Pharmacy/Dental/Vision will be issued before January 1st if you've made any changes or enrolled for the first time
- All HDHP participants who are eligible for an HSA will receive a new HSA debit card from MyChoice Accounts
- All FSA participants will receive new Debit Cards



Questions.....

- [Open Enrollment FAQs](#)
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