



**ANNOUNCING**

**For Organization of Staff Analyst Members**

**SPECIAL OPEN ENROLLMENT!!!!**

**March 1 – April 30, 2014**

**OPTIONAL TERM LIFE**

What you need to know:

- First Reliance Standard Life - new carrier **REPLACING PRUDENTIAL**
- **New Voluntary Group Term Life Offering for Active Members** to replace the current **GUL** plan
- **Guarantee Issue up to \$100,000 without a medical exam** during the Special Open Enrollment Period. (Coverage restrictions apply. See other side for more details)
- **ACT QUICKLY AS THIS OFFER ONLY LASTS DURING THE SPECIAL OPEN ENROLLMENT PERIOD MENTIONED ABOVE!**
- **The Website** and how to access it:  
*Access the benefit communication website: <http://www.mybenefitscount.com> and follow the instructions on the enclosed to log in to the system.*

# First Reliance Standard Voluntary Coverage



Dear Member:

The Organization of Staff Analysts has ended our relationship with the Prudential Insurance Company. We will now be covered with First Reliance Standard Life Insurance Company. OSA will continue to provide Basic Life Insurance & Accidental Death & Dismemberment (AD&D) coverage in the amount of \$50,000 at no cost to our active members. Retiree basic life coverage will remain at \$5,000 per retired member, with no AD&D coverage.

OSA will also continue to offer our active members the opportunity to purchase Voluntary Group Term Life Insurance coverage through payroll deduction. **Those active members who are currently enrolled in the Prudential voluntary GUL Life plan will remain covered at their current elected amounts and their payroll deduction amounts will also remain the same (Herein referred to as being "grandfathered").** The coverage however will now be provided by First Reliance Standard Life, with this new voluntary term life group policy, and all administrative services will be handled through our new carrier.

First Reliance Standard is offering our active members a **"Special Open Enrollment" starting March 1, 2014**. This voluntary offering will be communicated to you and enrolled through an **ON LINE** website. First Reliance Standard has contracted with a company by the name of **"BrokerSuite"** and all benefit information, including projected costs, coverage limits, & dependent coverage options are outlined on this user-friendly website.

For those who are not currently enrolled in the Voluntary Group Term Life Insurance Plan, you may ask **"Why should I consider purchasing voluntary Life Insurance?"** You may find the answer in the information below:

- You can elect coverage in increments of \$10,000, up to \$500,000 for yourself and up to \$250,000 for your spouse. Dependent child coverage options range from \$2,500 to \$10,000 provided that member or spouse coverage is elected.
- **Guaranteed Issue Coverage** - During this "Special Open Enrollment" period, coverage is offered to our active members on a Guaranteed Issue basis (not having to answer any medical questions) as follows;
  - Active members under the age of 60 - up to \$100,000 maximum of coverage.
  - Active members age 60 through 69 - \$10,000 of coverage.
  - Spouses, if also under the age of 60 up to \$30,000 maximum of coverage.

#### **\*Guarantee Issue Notes:**

1. The Guaranteed Issue offers mentioned above will only be available to current active members during this open enrollment period, provided members sign up from March 1, 2014 to April 30, 2014.
  2. Those Members whose voluntary life coverage is being "grandfathered" will only be eligible for Guarantee Issue coverage if their current coverage is less than the Guarantee Issue maximum. (Example: Age 50; Current Coverage = \$50,000. New Guarantee Issue coverage available during the Open Enrollment Period; \$100,000 - \$50,000 = **\$50,000**)
  3. Those Members whose voluntary life coverage is being "grandfathered" would not be eligible for Guarantee Issue coverage if their current coverage exceeds the Guarantee Issue maximum. (Example: Age 50; Current Coverage = \$150,000. No New Guarantee Issue coverage is available during the Open Enrollment Period since \$150,000 is greater than the \$100,000 Guaranteed Issue maximum)
- Any coverage applied for in excess of the Guarantee Issue maximum above ARE subject to medical questions and satisfactory proof of insurability.
  - All Guaranteed Issue amounts will be effective 5/1/2014, while amounts in excess of the guaranteed amounts will be effective the first of the month following First Reliance Standard's approval
  - You pay automatically through convenient payroll deductions.
  - You can take this coverage with you if you leave, and continue it up to age 75 (Portability Rates Apply)
  - Coverage is guaranteed convertible to a whole life policy.

***Additional Details on the back and on the website.***



## **FOR ORGANIZATION OF STAFF ANALYSTS MEMBERS**

### **Voluntary Life Enrollment Instructions**

#### **WELCOME TO THE VOLUNTARY TERM LIFE ENROLLMENT WEBSITE!!**

This website will be available to you 24 hours a day, 7 days a week to help you enroll in the Voluntary Life insurance program for OSA Members. Through this website you will have access to information regarding the Life Insurance Benefits offered to you and your family. You will be able to look at the plans available to you, download forms, and update beneficiaries!

All Voluntary Term Life plan elections and waivers will be made through this website!

In order to get started, you will have to Log in to the BrokerSuite website. Below you will find instructions how to access the website and start the enrollment process.

**Step 1:** Access the benefit communication website: [www.mybenefitscount.com](http://www.mybenefitscount.com) and log in as outlined below:

Your Username is as follows.

First four letters of first name, your last name @osarsli.com  
(If less than 4 letters are in your first name, use all three letters)

Example: Anthony Dorset  
**anthdorset@osarsli.com**

Your Temporary Password criteria are listed below:

First letter of first name capitalized, First letter of last name lower case, and month and day of birth (Should be 6 characters)

Example: Anthony Dorset – Month & Day of birth - January 08  
**Ad0108**

#### **Log In to MyBenefitsCount™**

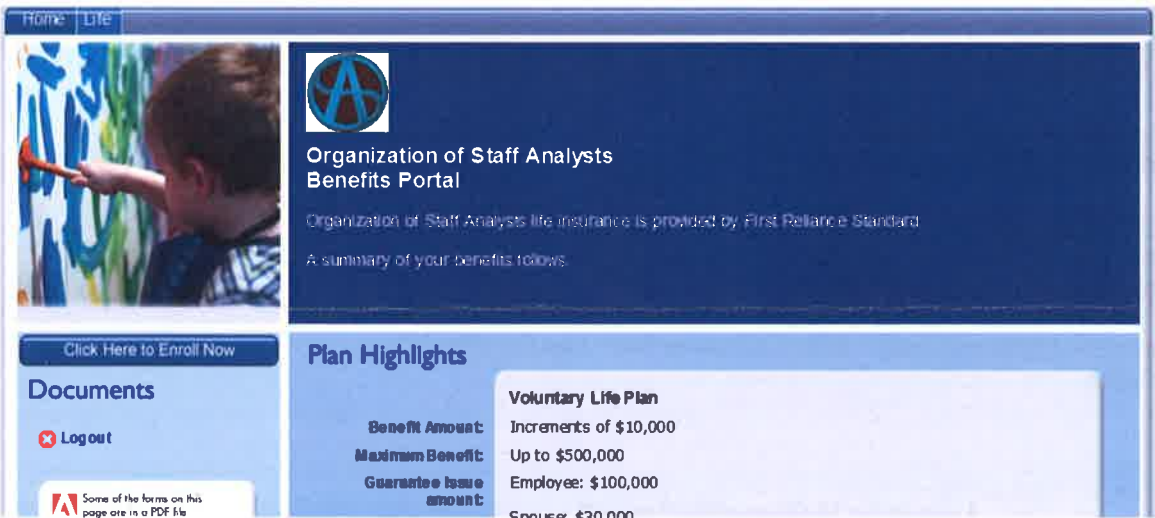
Username	<input type="text"/>	<input type="submit" value="Submit"/>
	example: name@domain.com	
Password	<input type="password"/>	<a href="#">Reset password</a>
note: password is case-sensitive		

Step 2: Reset your Password – Click on [Reset Password](#).

Once you have completed your password reset you should log in and will arrive at your Life insurance website:



Choose any tab in the top row and then click the “Enroll Now” button located in the left column of the screen:



**Step 3: Enrollment events.** Choose "Enroll Now", the pink highlighted button, in order to access the system and make Voluntary Life Insurance elections.

**Electronic Benefit Enrollment**

**Common Actions**

**Enroll Now**

☐ Change Personal Information

☐ Change Primary Care Provider (PCP)

☐ Change Address

**Plan Changes**

☐ Switch Plans

☐ Cancel Coverage

☐ Change Coverage Level

**Dependent Events**

☐ Birth of a Dependent

☐ Adoption

☐ Death of a Dependent

**Life Events**

☐ Marriage

☐ Retirement

☐ Disability

☐ Legal Separation

☐ Divorce

The next page you will see is a welcome screen describing the steps you will be following through the system:

**Electronic Benefit Enrollment**

**WELCOME**

[Next](#)

On the following pages you will answer questions that will help us process your Employee Benefit Enrollment Forms. Here are the steps you will take:

- 1. ENTER PERSONAL INFORMATION**  
On the next page you will be prompted to enter your personal information. This information will be added to the forms for each of your insurance carriers. This step will save you time when filling out other enrollment forms. If you have ever used Tax Software to do your tax returns you should be used to the process.
- 2. CHOOSE BENEFIT PLANS**  
After filling out your personal information you will be prompted to choose plans. Your employer has selected several benefit options for you. If you have questions, explore the rest of this site or talk to your Human Resource manager to learn more about your choices.
- 3. ENROLL**  
Once you have selected the benefits you want you will be prompted on a series of screens to fill out additional information needed for each enrollment form. You will not have to re-enter information you entered on previous forms such as address, marriage status, etc. Only new information required for a specific enrollment form will be requested.
- 4. CONFIRM YOUR CHOICES**  
Once you have filled out the enrollment forms you will be asked to confirm your choices. If you want to make any changes, simply click the Edit button and you can make any corrections you wish.
- 5. SAVE FORMS**  
Once you have confirmed your choices, you will be presented with links for each completed PDF form. Simply click the appropriate button to open the form in PDF format and then print, save or email it.

**That's all there is to it!** If you have any questions, please contact your human resources manager. To get started, press the NEXT link at the top or bottom of this screen.

[Next](#)

Note: This site stores all information you enter so that you may return and make corrections.



**Step 4:** Profile page. Enter demographic data for yourself. In addition, add demographic for your spouse and all dependents you plan to enroll. Yellow highlighted fields are required.

**STEP ONE: Enter Personal Information** Maintenance Reason: Initial Enrollment

**Enrollment in progress**  
Confirm when done.

**Menu**

**Profile**

[Choose Plans](#)

[Confirm Choices](#)

[Print Forms](#)

[Logout](#)

**Life**

Voluntary Life Employee Coverage \$ 0.00

**Total** \$ 0.00

\* All amounts are Monthly

Note: All amounts are rounded to the penny for display purposes and may be slightly different than your final premium.

**Employee Profile**

**Employee Profile**

\*First Name:  Middle Name  Last Name

\*Social Security No:  Format is 9 digits, no dashes (E.g. 123456789)

Marital Status:

\*Date of Birth:  Sex:

**Employee Address**

\*Street Address 1:

Street Address 2:

\*City/Town:  State:  Zip Code:  5 or 9 digits

County:

**SUBMIT**

**Step 5:** Choose plans. You will be required to elect or waive all of the voluntary life being offered before you can continue through the system. For a reminder of the plan information, click the blue arrow under "Click to view plan details".

**STEP TWO: Choose Enrollment/Change Forms**

**Enrollment in progress**  
Confirm when done.

**Menu**

**Profile**

[Choose Plans](#)

[Confirm Choices](#)

[Print Forms](#)

[Logout](#)

**Life**

Voluntary Life Employee Coverage \$ 0.00

**Total** \$ 0.00

\* All amounts are Monthly

Note: All amounts are rounded to the penny for display purposes and may be slightly different than your final premium.

**NOTE: If you decide to not participate in a plan being offered, future participation at a later date may require evidence of insurability.**

**Life Plans**

**Voluntary Life**

☒ Elect | ☐ Waive >> Employee Coverage (100% Employee Paid)

[Click to View Plan Details](#)

**<< Edit Profile** **Submit & Next >>**

Use the Menu on the left to navigate. Do not use your Web Browser BACK button.

By pressing SUBMIT, you agree to allow us to store your personal information.

**Step 6 – Benefit screens.** You will be asked specific questions for voluntary life you would like to elect this plan year. Please check specifically which dependents you would like to enroll on the plan. If you do not check your spouse/dependents, they will **not** be enrolled in benefits.

#### STEP THREE: Fill Out Forms

**Enrollment in progress**  
Confirm when done.

**Menu**

Profile  
Choose Plans  
Confirm Choices  
Print Forms  
Logout  
Life  
Voluntary Life Employee Coverage  
Total

**Voluntary Life Benefits**

**Special Instructions**  
Guarantee Issue: You may apply for any amount of Life insurance coverage up to \$200,000 for yourself and any amount of coverage up to \$100,000 for your spouse. Issue amount(s) will be subject to evidence of insurability. Your Evidence of Insurability (EOI) Form can be found here. Please click to download, fill out, and submit.

**Benefit Election**

\*Employee Coverage: \$0.00 / \$0.00 (Benefit Amount / Premium)  
Spouse Coverage: SELECT (Benefit Amount / Premium)  
Child(ren) Coverage: SELECT (Benefit Amount / Premium)

Premium Summary:

\* All amounts are Monthly

**Step 7 – Confirm Choices.** An overview of your elections will be shown on the confirmation page. To make change, select “Edit Enrollment”. If all of the information is correct, select “Confirm and View Forms”. **In order to complete the process and become enrolled in voluntary life, you must select “Confirm and View Forms” before leaving the system.**

#### STEP FOUR: Confirm Choices

**Enrollment in progress**  
Confirm when done.

**Menu**

Profile  
Choose Plans  
Confirm Choices  
Print Forms  
Logout  
Life  
Voluntary Life Employee Coverage  
Total

**Confirm Choices**

Your changes for Plans for Wallace Baxter have been submitted.  
You can edit these changes or view your benefit forms.

	Your Benefit Cost per Pay Period	Notes
Voluntary Life Employee Coverage	\$ 2.37	
<b>Total:</b>	<b>\$ 2.37</b>	

**CONFIRMATION OF BENEFIT CHOICES:** By confirming my benefit choices, and pressing the [Confirm] button, I hereby certify that I have been advised of the features and benefits of the programs offered to me and if I have decided not to participate, I understand future participation at a later date may require evidence of insurability.

<< Edit Enrollment      Confirm and View Forms >>

\* All amounts are Monthly  
Note: All amounts are rounded to the penny for display purposes and may be slightly different than your final premium.

**Step 8 – Print and Save forms.** If you would like a paper confirmation of your elections, you may print a form for voluntary life. It is not a requirement to print the forms.

STEP Five: Submit Forms

1

Enrollment in progress

Confirm when done.

Menu

Profile

Choose Plans

Confirm Choices

Print Forms

Logout

Life

Voluntary Life Employee Coverage

\$ 2.37

Total

\$ 2.37

All amounts are Monthly

Note: All amounts are rounded to the penny for display purposes and may be slightly different than your final premium.

Your Forms Are Completed

Click the buttons below to open. Then you can print, email or save.

Voluntary Life Employee Coverage

You have completed the enrollment process. What would you like to do now?

Edit Profile

Close Window

Change Enrollment Choices

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