



open enrollment



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# benefit plans VS deductions

## BENEFIT PLANS

- allows Open Enrollment within the system
- employees can submit life change requests
- Your benefits information is all stored in one place for convenient census reporting, ACA reporting (required for employers of 50+ FTE), and tracking dependents, eligibility, and pricing
- Can be integrated with carrier connectivity to automatically send benefits data to the benefits provider
- Removes the need for employees to complete paper enrollment. All data can be stored in Elements and easily accessible to employees for compliance

## DEDUCTIONS

- only tracks the employee and employer contributions
- the data must be imported into Elements or manually applied to each employee
- Does not allow for ACA reporting
- Cannot be set up for carrier connectivity

## what APS needs from you

APS requires your new benefit plan information 30 days before your Open Enrollment start date

- This gives us the time that we need to either build new plans, or update current plans and Open Enrollment instructions

For existing plans with new pricing, we only need the monthly employee and employer contributions

- We do not need the weekly/biweekly/semi-monthly/yearly amounts, COBRA rates, or plan details. By providing us the monthly employee and employer amounts alone, we can quickly and accurately add or update your plans in Elements.
  - If you are considering changing or know you are changing providers or getting new plans from your current provider, please contact us as soon as you know, even if it's a month before your enrollment period

# APS' benefit data gathering document

Core Benefit (Medical, Dental, Vision)			
Type of Benefit Plan:	<input type="text"/>		
Name of Benefit Plan :	<input type="text"/>		
Name of Provider:	<input type="text"/>		
Certificate # (optional)	<input type="text"/>		
Policy # (optional)	<input type="text"/>		
How will benefit information be sent to your benefit provider?			
<input type="text"/>			
Monthly Contributions			
Please provide a copy of premiums from your Benefit Provider			
Level of Coverage (can change descriptions)	Total Monthly Premium	Employer Portion of Monthly Premium	Employee Premium (calculated)
Employee			\$ -
Employee + Spouse			\$ -
Employee + Child			\$ -
Family			\$ -
			\$ -
			\$ -
			\$ -

Plan and Deduction Information			
	Start Date	End Date	
Effective dates of the plan:	<input type="text"/>	<input type="text"/>	
Eligibility requirements of plan:	<input type="text"/>		
Waiting period for the plan:	<input type="text"/>		
Deduction code for withholding employee premium:	<input type="text"/>		
Withhold on a pre-tax or post-tax basis:	<input type="text"/>		
Display employer premium on pay statement?	<input type="text"/>		
Pay Frequency (list all that apply:)	<input type="text"/>		
How often to withheld from employee?	<input type="text"/>		
Withhold on 3rd pay of month for biweekly ?	<input type="text"/>		
Withhold on 5th pay of month for weekly?	<input type="text"/>		
Is there a surcharge if employee is a tobacco user?	<input type="text"/>		
Is the plan self-insured?	<input type="text"/>		
Is the plan COBRA eligible?	<input type="text"/>		
Is this a High Deductible Health Plan (HDHP)?	<input type="text"/>		

# Continued...

Flexible Spending Accounts/Health Savings	
Note: It's not necessary to enter Flexible Spending Account information on each plan.	
Do you offer a Flexible Spending Account for Medical?	<input type="checkbox"/>
Please explain employee contributions allowed:	
<input type="text"/>	
Please explain employer contribution if provided:	
<input type="text"/>	
Do you offer a Flexible Spending Account for Dependent Care?	<input type="checkbox"/>
Please explain employee contributions allowed:	
<input type="text"/>	
Please explain employer contribution if provided:	
<input type="text"/>	
For HDHP, is there a Health Savings Account offered:	<input type="checkbox"/>
Please provide employee contribution detail for HSA if applicable:	
<input type="text"/>	
Please provide employer contribution detail for HSA if applicable:	
<input type="text"/>	

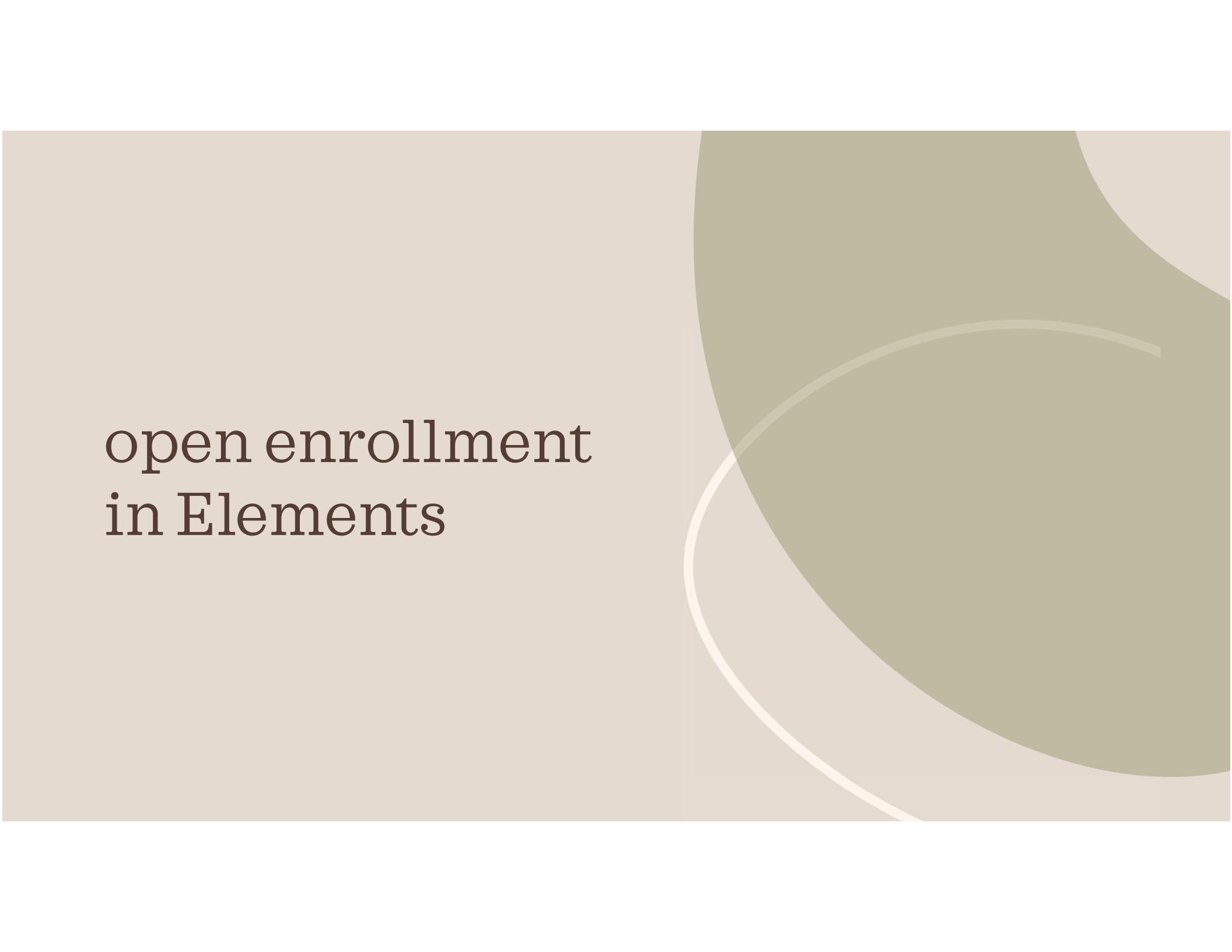
ACA Reporting (required for medical plans if utilizing APS for ACA)			
Does this plan meet the following metrics?			
Offered to:	Minimum Essential Coverage	Provide Minimum Value	Conditional Offer
Employee			
Spouse			
Dependent(s)			
Open Enrollment and/or New Employee Enrollment through APS			
Include plan in Open Enrollment?	<input type="checkbox"/>		
Benefit Year start/end date:	<input type="text"/>		
Open enrollment start/end dates:	<input type="text"/>		
Include plan in New Employee Enrollment?	<input type="checkbox"/>		
Instructions for the employee, specific to this plan, during the enrollment process:			
<input type="text"/>			
Display employer premiums to the employee:	<input type="checkbox"/>		
Auto Enroll Employees into this plan?	<input type="checkbox"/>		
Is the following required for spouse/dependent(s)?			
	Required to select?	Birthday Required?	SSN Required?
Spouse			
Dependents			

# Continued...

Plan Features for Employee Enrollment process ( optional )	
Provide the information to be displayed to employee during the enrollment process. Only provide information if you want that feature displayed.	
Feature Name	Information to Display
Primary Office Visit	
Specialist Office Visit	
Emergency Room Visit	
In-Patient Hospital	
Deductible - Individual	
Deductible - Family	
Max Out of Pocket- Individual	
Max Out of Pocket - Family	

Life Change Events			
Should this plan be available for a life event change?		<input type="text"/>	
Following are life events that have been set-up. Indicate if to exclude any of these. Add any additional life events needed.			
Note: it's only necessary to define list of life events on one plan unless events are			
Description	Exclude?	Description	Exclude?
Job Change	<input type="text"/>	Birth	<input type="text"/>
Death	<input type="text"/>	Adoption	<input type="text"/>
Marriage	<input type="text"/>	Newly Eligible	<input type="text"/>
Divorce	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
When is an employee eligible after the event occurs?		<input type="text"/>	
Instructions for the employee, specific to this plan, during the enrollment process:			
<input type="text"/>			

If you are unsure of the answers to any of the questions on the benefits data gathering form, please consult your broker



open enrollment  
in Elements



## troubleshooting

- Employee cannot submit their open enrollment (submit button is grayed out)
  - Check to see which year of enrollment the employee is currently on; if the prior year's enrollment was started but not submitted or deleted by an admin, that will need done so the employee can start the current year's enrollment
  - Check to see if the employee is trying to submit the enrollment after the specified open enrollment period in the benefit profile. \*enrollment must be completed for all employees during the specified period, otherwise it must be reopened for all employees again.
- Employee's open enrollment is submitted (not approved) but they need to make changes –OR- employee's open enrollment is submitted AND approved and they need to make changes
  - Unfortunately, unless your workflow has a 'reject' step in it, the only way to "reopen" an employee's enrollment is to completely delete their request and have them redo everything. If you would like for APS to add a 'reject' step in your workflow, please let us know and we can add that step in before your open enrollment period begins.
- Rule of thumb: **do not** approve any employee's enrollment request until **AFTER** the enrollment period has closed. Once closed, then you can review and approve all enrollment requests.