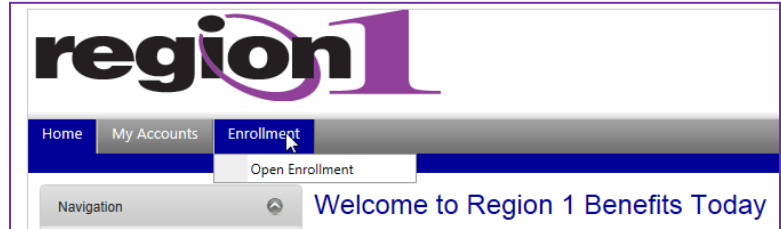


# Online Enrollment Instructions

To begin online enrollment go the Participant Portal- [www.mywealthcareonline.com/r1benefitstoday](http://www.mywealthcareonline.com/r1benefitstoday)

To begin the enrollment process, select “Enrollment” on the toolbar, and then select “Get Started”



In the Employer ID space, insert REG followed by your four digit Employer ID/Group # (REG5171). Click “Submit” when done.

**Important Note:** If you are not directed to the next step, you may be experiencing web browser issues. The web browsers supported by this on-line application process are – Internet Explorer (v9 & 10); Chrome (v30 & 31); and Firefox (v23 & 24).

Enter your Employee ID and your last name. If you do not know your Employee ID, ask your HR Department. Enter the text verification that is listed. This is case sensitive. Click “Start Application” when done.

For each flex benefit plan that is offered you can either enroll in the plan or waive enrollment. It is not required that you waive enrollment for each plan you don’t select. To enroll or waive enrollment, click on the Action function for each plan. A summary explanation of each plan is listed below. **You may only enroll in one of the three medical expense reimbursement accounts shown below.**

**Dependent Care** – daycare expenses.

**FSA - Eligible medical, dental and vision expenses** you, your spouse and dependants.

**LP2 - Limited Scope Medical FSA – Employee and Dependents** – Medical, dental and vision expenses for you and your dependents; NO spouse expenses. Used if your spouse has a Health Savings Account.

**LPF - Limited Scope Medical FSA – Vision and Dental** Dental and vision expenses for you, your spouse and dependents; Used if you and/or your spouse has a Health Savings Account.

Enrollment Summary					
Below are benefit plans that you are eligible to enroll. Please click on the "Enroll Now" or "Waive Now" link under the Action column to either enroll or waive your enrollment for each plan.					
Plan Name	Plan Year	Election	Dependents	Status	Action
Dependent Care Reimbursement - DCA		\$0.00	N/A	New	Enroll Now - or - Waive Now
FSA - Medical Expense Reimbursement - FSA		\$0.00	N/A	New	Enroll Now - or - Waive Now
Limited Scope Medical FSA - Employee + Dependent - LP2		\$0.00	N/A	New	Enroll Now - or - Waive Now
Limited Scope Medical FSA - Vision and Dental - LPF		\$0.00	N/A	New	Enroll Now - or - Waive Now

**Note** – You will run through this next process for each plan that you wish to enroll in.

- Select “Enroll Now” for your desired plan. Your demographic information should be auto-filled. Change any incorrect information. Any fields marked with an “\*” are required. A valid e-mail address is required.
- If you would like to add dependent information into the system for the plans you selected, please contact our office so we can link them to the appropriate plan. Adding dependents is not required.
- When finished, click “Next”.
- The “Account Details” screen will appear with the plan type and dates. **Fill in an annual election amount.**
- Certify your election decision by checking the box. When finished, click “Next”.
- A summary screen will appear, at which time you may review and edit any information. Review carefully! When you have completed your review and edit process, read the agreement terms and check the box to verify your agreement with the terms listed.

To finish enrollment in the selected plan, you must complete the E-signature process. Fill in your name, spelling it exactly as shown in the demographics portion of the screen you just reviewed. Select the “Submit Application” button. It will take you back to the Enrollment Summary where you can enroll in another plan option, or waive the other plans.

Electronic Signature		
In submitting my e-signature below, I attest that I have reviewed the information I provided and it is accurate to the best of my knowledge. I also agree to the terms and conditions listed in the online enrollment process.		
First Name*	Last Name*	Date Signed
<input type="text"/>	<input type="text"/>	10/30/2013
Confirm First Name*	Confirm Last Name*	
<input type="text"/>	<input type="text"/>	
<input type="button" value="Submit Application"/>		

If you wish to waive enrollment in a specific plan, select “Waive Now” and a box will appear. Simply check the box and click Submit. It should take you back to the Enrollment Summary and you can select the next plan option to enroll or waive enrollment. Plan waiver is not required.

**Once you have enrolled or waived the desired plans, you are finished with the online enrollment process. You can log back into the online enrollment feature at any time during the open enrollment window and make changes to your elections.**

**If you have not already done so previously, we suggest that you go through the registration process on the Participant Portal. Please close this web session and then log back in to this website. Click on “Register” to start the process. You will need your Employee and Employer ID to register. Instructions for Portal registration can be found on our website at [r1benefitstoday.org](http://r1benefitstoday.org).**