

MUNIS SELF SERVICE OPEN ENROLLMENT INSTRUCTIONS

From your web browser type in the address:

<https://cfsd16.munisselfservice.com>

Enter your user name and password. Your user name is your first initial and last name with no spaces. For example, John Smith would be jsmith. Your password is your employee/badge number.

Once you have logged in, your name should appear in the upper right hand corner. Click on "Benefits" on the right. Your CURRENT elections will appear. (Please see page 2)

To elect your "OPEN ENROLLMENT" benefits for 2019-2020, click on the [BLUE open enrollment](#) at the top or the Open Enrollment, on the right. (Please see page 2)

Once you elect/decline, you will have a chance to review all of your elections.

Then click "SUBMIT" and a GREEN check mark will appear. You are done! (Once you click SUBMIT, you will be unable to make changes)

I will send you an email stating your elections have been submitted. If you have any questions, please feel free to contact me at sburnette@cfsd16.org.

REMEMBER, MUNIS **DOES NOT** CALCULATE YOUR PAYROLL BENEFIT DEDUCTIONS AMOUNTS. Please see the EMPLOYEE BENEFITS RATE CHART.

Benefits

Current Year Elections

[Report/View Life Events](#)

[Home](#)

 You must complete your [open enrollment](#) before 5/17/2019

After you make changes to your elections, please click "Continue" to review and submit them.

Benefit	Current Election	
HEALTH INSURANCE	BCBS COPAY GOLD PLAN EMPLOYEE + SPOUSE \$0.00 details	
DENTAL INSURANCE	DELTA DENTAL EMPLOYEE + FAMILY \$0.00 details	
DELTA VISION INSURANCE	DELTA VISION EMPLOYEE + SPOUSE \$0.00 details	Decline benefit Make New Election
UNITED PET CARE INSURANCE	Declined	Decline benefit Make New Election
SHORT TERM DISABILITY	Declined	
FLEXIBLE MEDICAL SPENDING	FLEXIBLE MEDICAL SPENDING \$75.00 details	
FLEXIBLE DEPENDENT SPENDING	Declined	
EMPLOYEE VOLUNTARY SUPP LIFE	Declined	
SPOUSE VOLUNTARY SUPP LIFE	Declined	
CHILD(REN) VOLUNTARY SUPP LIFE	Declined	
403B RETIREMENT PLAN	Declined	Decline benefit Make New Election

[Continue](#)

[Employee Self Service](#)

[Benefits](#)

[Open Enrollment](#)

[Pay/Tax Information](#)

[Personal Information](#)

[Time Off](#)

Open Enrollment

Make Elections

Make a selection for each benefit, then click "Continue". You must submit this enrollment by 5/17/2019.

Benefit	Current Election	New Election	
HEALTH INSURANCE	BCBS COPAY GOLD PLAN EMPLOYEE + SPOUSE \$0.00 details	Election Not Made	Decline benefit Make New Election
DENTAL INSURANCE	DELTA DENTAL EMPLOYEE + FAMILY \$0.00 details	Election Not Made	Decline benefit No changes Make New Election
DELTA VISION INSURANCE	DELTA VISION EMPLOYEE + SPOUSE \$0.00 details	Election Not Made	Decline benefit Make New Election
UNITED PET CARE INSURANCE	Declined	Election Not Made	Decline benefit Make New Election
SHORT TERM DISABILITY	Declined	Election Not Made	Decline benefit Make New Election
FLEXIBLE MEDICAL SPENDING	FLEXIBLE MEDICAL SPENDING \$75.00 details	Election Not Made	Decline benefit Make New Election
FLEXIBLE DEPENDENT SPENDING	Declined	Election Not Made	Decline benefit Make New Election
EMPLOYEE VOLUNTARY SUPP LIFE	Declined	Election Not Made	Decline benefit Make New Election
SPOUSE VOLUNTARY SUPP LIFE	Declined	Election Not Made	Decline benefit Make New Election
CHILD(REN) VOLUNTARY SUPP LIFE	Declined	Election Not Made	Decline benefit Make New Election
403B RETIREMENT PLAN	Declined	Election Not Made	Decline benefit Make New Election

[Continue](#)