

MISSISSIPPI UNIVERSITY FOR WOMEN OPEN ENROLLMENT

The online enrollment will open on October 1, 2015. You will be able to make your Cafeteria plan election, dental, vision or any of the following AFLAC products (cancer, accident and hospital income/recovery) online (see page 2 for instructions). If you wish to enroll in other insurance products that cannot be enrolled online, or would like assistance, please contact Sharon Foster in Human Resources – 662.329.7211. If you wish to remove a spouse and/or dependent from an AFLAC product, you must contact Benefit Concepts at 662.329.4044. ***Representatives will be available to assist you with the enrollment and answer any questions about their products and services.

No action is required if there are no changes. Please make address changes online. Human Resources will send any additional forms needed.

Note: The new annual maximum for Unreimbursed Medical is \$2550.00, a \$50.00 increase. If you want to increase to the maximum amount, you will need to enter the change.

CAFETERIA PLAN: Elections for Plan Year: January 1, 2016 – December 31, 2016

A Section 125 Cafeteria Plan is a tax savings plan which allows participating employees to deduct certain expenses from gross earnings before the computation of federal, state, and social security taxes. Under our plan, we will continue to have the following four (3) options.

CURRENT INSURANCE DEDUCTIONS ELIGIBLE TO PRE-TAX

Insurance:	Option 1.	State Health and Life Insurance, Dental, Vision, Cancer, Hospital Income, Accident and Sickness
Flexible Spending:	Option 2.	Dependent Care Expenses
	Option 3.	Unreimbursed Medical Expenses

OPTION 1. INSURANCE

When making your on-line election, simply indicate that you wish to have your premiums pre-taxed under our plan. Payroll will make the necessary adjustments and your eligible premiums will be deducted pre-tax.

FLEXIBLE SPENDING

Flexible Spending: Option 2. Dependent Care Expenses
Option 3. Unreimbursed Medical Expenses

OPTION 1. INSURANCE

When making your on-line election, indicate that you wish to have your premiums pre-taxed under our plan. Payroll will make the necessary adjustments and your eligible premiums will be deducted pre-tax.

OPTION 2. DEPENDENT CARE EXPENSE

If you have dependents that require care while you and your spouse work, participation in this part of the plan can save taxes by pre-taxing the expense. Estimate your dependent care expenses for the **current plan year**, up to a maximum of **\$5,000 per calendar year, (\$2,500 if married filing a separate return.)** Your election will be divided by the number of pay periods in the plan year and deducted pre-tax. For more information log on to: www.sabcflex.com/content/dependent-care

OPTION 3. UNREIMBURSED MEDICAL EXPENSES

If you have medical expenses which you have to pay out of your own pocket, such as; your medical deductibles, co-insurance, dental expenses, eye care expenses, etc., you may save valuable tax dollars by pre-taxing these expenses. To participate, you must estimate the out-of-pocket medical expenses you will incur during the plan year up to a maximum of **\$2,550**. Your plan year election amount will be divided by 12 year and deducted pre-tax. After eligible expenses have been incurred, submit proof of the expense with a reimbursement form or online, and you will be reimbursed up to the amount you have requested, not to exceed your annual election. Please go to (www.sabcflex.com/content/eligible-medical-expenses) for more information on eligible expenses. Expenses may be for you, your spouse or children under age 27.

All services rendered for unreimbursed medical should be on the list of eligible deductible medical expenses. Should you have a medical expense not listed, contact SABC at 1.800.844.2555.

All elections made under your flexible benefit cafeteria plan are irrevocable unless a Status Change occurs. Examples of Status Changes are - marriage, divorce, birth, death, adoption or a change of your spouse's employment. Election under Dependent Care and/or Unreimbursed Medical should be conservative. Any monies not claimed by the end of the plan year or at least sixty (60) days after the close of the plan year, will be forfeited. **All expenses must be incurred within the benefit period listed as described on page 1.**

CLAIMS PROCEDURES

To receive reimbursement for expenses incurred during the plan year you must submit a Claim Form (Request for Reimbursement) to Southern Administrators and Benefit Consultants, Inc. Attached or along with the claim form, you must provide a receipt from the third party provider for each expense. An Explanation of Benefits from your insurance provider is your best receipt and may be required. You may also scan your receipts and submit your claim online through our on-line portal or smart phone app. For more information: <https://www.sabcflex.com/content/claim-procedures>.

ON-LINE ENROLLMENT INSTRUCTIONS **Opens on October 1, 2015 and Closes on October 31, 2015**

Go to www.sabcflex.com and click SABCElect online enrollment (first icon on the bottom left).

Enter your **BANNER ID** (no dashes) as your employee ID, and your six digit date of birth as your password (mmddyy).

Step 1. Review and revise any personal information that is incorrect. Click the Continue to Step 2 button.

Step 2. Review your current benefit information. If correct and you have no changes, continue to the next page.

If you wish to **enroll** in the **dental, vision** or any of the designated **AFLAC** products, click the **enroll** button next to the product and follow the instructions. Complete the online application. Once complete, you will return to the Cafeteria Plan enrollment. To **cancel** any supplemental **insurance** product, click the **terminate** button and complete the online form. To review benefits under the plan, click on the name of the products that are highlighted in blue.

Step 3. For employees participating in Flexible spending. Make your Flexible Spending election(s). If you are electing to participate in Flexible Spending for the first time, please have your direct deposit information available to enter online.

Step 4. Review the summary of your elections. If correct, proceed to the next step. If incorrect, click the back button.

Step 5. Read the plan provisions, acknowledge that you understand, and sign using your employee (Banner ID) number. Your enrollment is complete. Please print copy for your records and click done.

If you have questions or trouble with online enrollment, contact Southern Administrators and Benefit Consultants Inc. at 1.800.844.2555 .