



MEMBER BENEFITS PORTAL

Plan Source

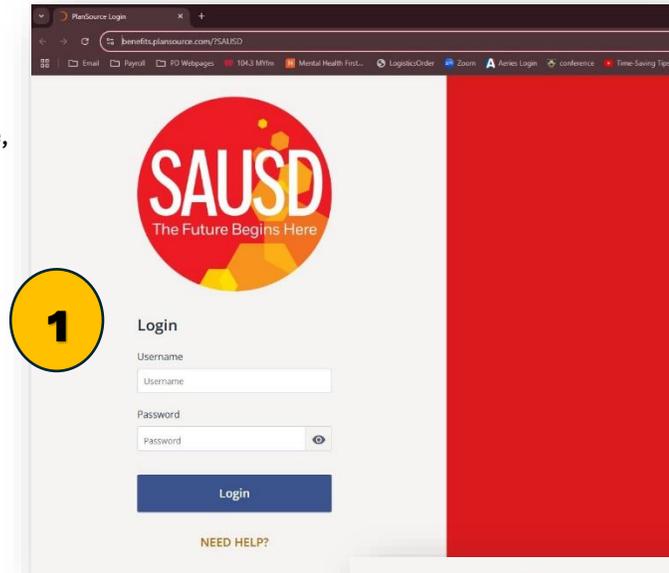
Step 1: Login Screen

Enter **Username**: The first initial of your first name, up to the first six characters of your last name, and the last four of your SSN.

Example: An employee named Jane Anderson, with the SSN xxx-xx-1234 would have the username "janders1234".

Default **Password**: Your birthdate in YYYYMMDD format. Example: A birthdate of August 14, 1962, would result in the password "19620814".

Click Login Button

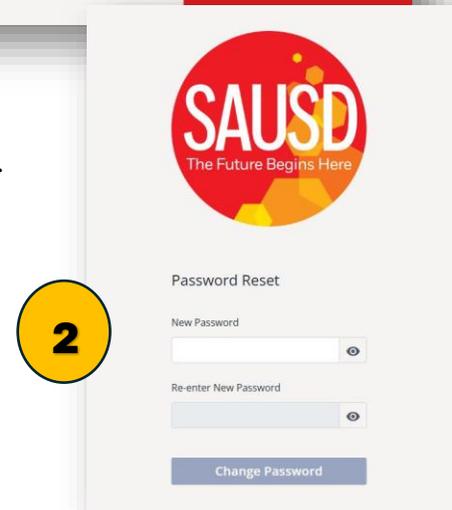


The first time you log in, you will be prompted to change your password.

Step 2: Password Reset

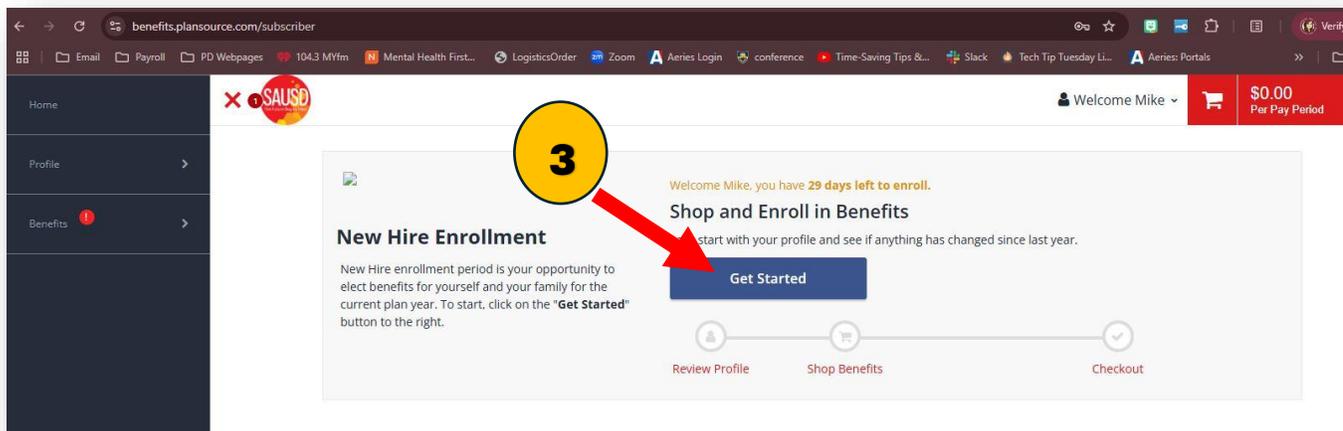
Enter a New Password

Re-enter New Password



Step 3:

Click **Get Started** Button



Step 4:

Screen will be prepopulated with personal information.

Please enter your cell phone number and email address (only fields that can be changed)

Click **Save** once you have verified your information is correct

Verify your Personal Information and make changes if needed

This information is used for:

- reporting to the benefit carriers
- to issue your ID cards and process your claims
- to process your payroll, taxes, etc.

If any of the information is incorrect and you are unable to change it on this page, please contact your Human Resources representative.

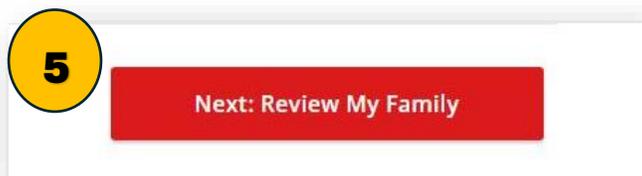
Basic Information	Contact Information
First Name Mike	Address 1 126 main street
Middle Name 	Address 2
Last Name AAASample	City Santa Ana
Name Suffix 	State California
SSN 777-00-9999	Zip 92701
	Home Phone Home Phone
	Cell * 714-222-3333
	E-mail * none@cafe125.com

Personal Information	Other
Birthdate 07/14/1973	Hire Date 02/24/2025
Gender * Male	Job Title * Test EE
Marital Status * Married	

CANCEL Save

Step 5:

Click **Next: Review My Family** button



Step 6: Review of Dependent Information

You can Add/Edit/Remove dependents on this screen

Click **Next: Shop for Benefits**

Review the Dependent Information on file below

Dependents must be listed on this page to be enrolled in coverage.

You may:

- Add New Dependents
- Edit Existing Dependent Information
- Remove Existing Dependent

By adding a dependent, you are confirming that this is a legal dependent, eligible for benefits under one or more of your available plans.

Current Family Members

+ Add Family Member

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Next: Shop for Benefits

< BACK

Step 7:

Click the **Shop Plans** button
(Medical, Vision, or Dental)
that you would like to elect.

Current Benefit Elections

Review Profile | **Shop Benefits** | Checkout

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- To **change an election**, click directly on the name of the benefit.
- To **complete enrollment**, click continue at the bottom of the page.

Current Benefits Plan Year Effective from 07/01/2024 to 06/30/2025

Medical

No Plan Selected **Shop Plans**

Vision

No Plan Selected **Shop Plans**

Dental

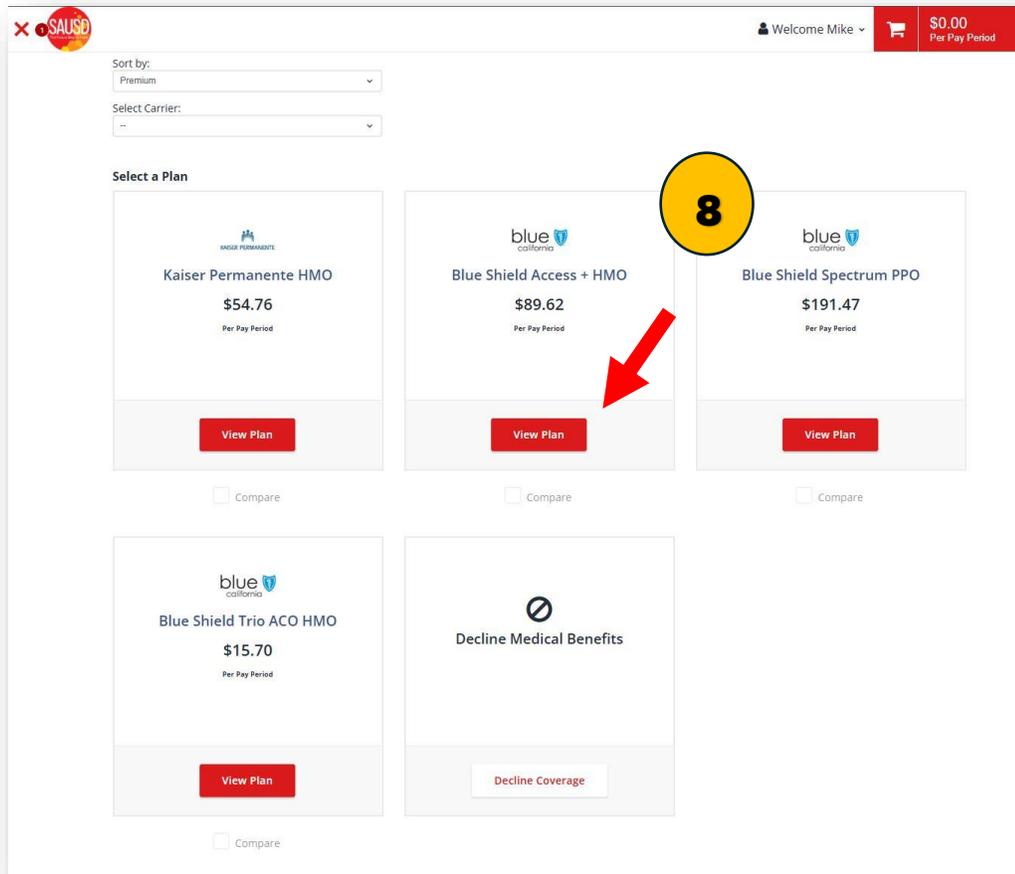
No Plan Selected **Shop Plans**

Basic Employee Life

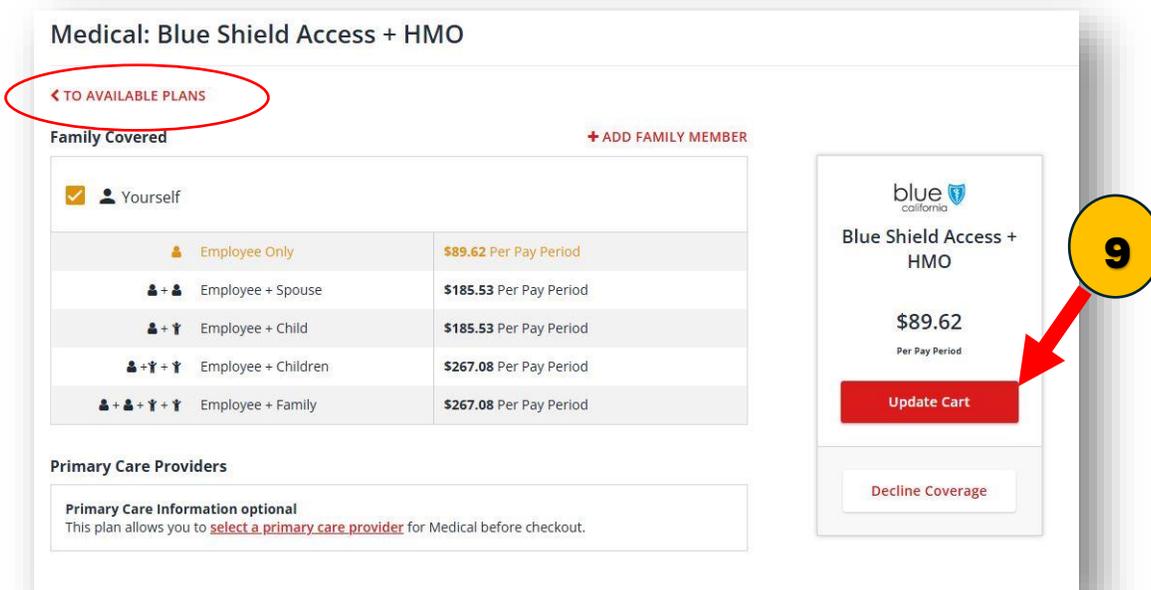
Basic Life - Class 3 **Review & Confirm**

Employer Contribution \$4.78
Your Cost Per Pay Period \$0.00

Step 8: View Medical plans by clicking on **View Plan** buttons



Step 9: To elect a plan click Update Cart or to go back to view another plan click “To Available Plans”



Step 10: Confirm whether spouse is benefit eligible.

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Question 1 of 1

My spouse is also a benefit eligible or retired Certificated or Management employee of the Santa Ana Unified School District. Completed

Subscriber: Nathan AAASample

YES

NO

BACK

Step 11: Click **Save** button

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View Less

My spouse is also a benefit eligible or retired Certificated or Management employee of the Santa Ana Unified School District. Edit

A: NO

BACK

Save

Step 12: Follow steps 8 and 9 to elect Dental

< TO BENEFITS

Family Covered + ADD FAMILY MEMBER

- Yourself
- Jan AAASample
- Lucas AAASample
- Jacob AAASample

Select a Plan

Plan Name	Cost	Action
Dental Care HMO	\$0.00	View Plan
Delta Network PPO	\$148.31	View Plan
Delta Incentive PPO	\$181.50	View Plan

Compare

Decline Dental Benefits

Decline Coverage

Step 13: Review and Confirm elections

Current Benefit Elections

Review Profile | Shop Benefits | Checkout

- To change an election, click directly on the name of the benefit.
- To complete enrollment, click continue at the bottom of the page.

Current Benefits Plan Year Effective from 07/01/2024 to 06/30/2025

Co-employed Spouse Survey - Certificated/Management Employees

Status: Completed | Dates: Last Updated 03/17/2025 | View Summary

Medical

Blue Shield Access + HMO | \$1,045.92 Per Pay Period | View or Change

Vision

VSP Vision | View or Change

Dental

Delta Network PPO | \$148.31 Per Pay Period | View or Change

Basic Employee Life

Basic Life - Class 2 | **Review & Confirm**

Employer Contribution: \$2,352.89
Your Cost Per Pay Period: \$1,194.23

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Step 14: Click Checkout

Employer Contribution: \$2,352.89
Your Cost Per Pay Period: \$1,194.23

Checkout

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Step 15: Email yourself a copy of your benefits

Current Benefit Elections

New Hire Enrollment!

Congratulations. You have completed the new hire enrollment process and confirmed your benefits.

Need a copy of your benefits confirmation statement? **Send by Email**

Review Profile | Shop Benefits | Checkout

The coverage details listed below are the current active elections on file for you and your dependents.

- If you believe there is an error in your statement, please contact your Benefits Administrator.
- If you need to make changes due to a change in your status, please contact your Benefits Administrator.

Click on the icons below to print your statement or to email a copy to yourself.

E-mail Benefit Confirmation Statement

Select the email address you would like your confirmation statement to be sent to. Change your email address by editing it in My Profile.

E-mail | none@cafe125.com

Cancel | **Send**

Current Benefits Plan Year Effective from 07/01/2024 to 06/30/2025

Below are your new elections. Benefit elections are subject to change.

Co-employed Spouse Survey - Certificated/Management Employees

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