

Munis Employee Self Service-Open Enrollment Instructions

1. Using your internet browser navigate to: <https://apps.nnva.gov/mss>

Enter your City Active Directory account. This is the username you use for the LTS system or to check your City email.

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Sign in

Email or AD username

gillissj 1

Continue 2

Only active, city employees may use this login. All other users must log in by visiting Munis Self Service.

2. Login to Munis Employee Self using your City issued Active Directory (AD) account credentials. Your City AD credentials are what you use to sign into LTS (Leave and Timesheet System) or to check your City email address.

Enter your City Active Directory password. This is the password you use for the LTS system or to check your City email.

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Expand Menu

Login

Username

gillissj

Forgot your username?

Password

..... 3

Forgot your password?

Log in 4

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3. Once signed in: Select "Benefits"

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Employee Self Service

Benefits ←

Pay/Tax Information

Personal Information

Time Off

Training Opportunities

Employment Opportunities

4. After clicking on Benefits, the below screen should appear. Select *Open Enrollment* if not already selected.

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Employee Self Service

Benefits

Current Year Elections

! You must complete your open enrollment before 11/5/2018.

Benefit

NON TOBACCO USER

SMOKER/TOBACCO USER

LUMENOS HDHP-NON SMOKER

HEALTH INS - NO SMOKE/TOBACCO

LUMENOS-HDHP SMOKER/TOBACCO

HEALTH INS - YES SMOKE/TOBACCO

HEALTH SAVINGS ACCOUNT-LUMENOS

FLEX SPEND MEDICAL

FLEX SPEND DEPENDENT CARE

DENTAL INSURANCE

VISION INSURANCE

FITNESS - ONE LIFE

FITNESS-RIVERSIDE WELLNESS

FITNESS-YMCA

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5. You are now able to choose the benefits you would like to be enrolled into for 2019. If you are not enrolling in a specific benefit option please select “DECLINE BENEFIT”. If electing health insurance, you must ***first*** certify or select if you are either: Smoke free or a Smoker/Tobacco User.

6. Your health insurance options are based on the smoke free or smoker status you selected.

Benefit	Current Election	New Election	
NON TOBACCO USER	I HAVE NOT SMOKED AND/OR USED TOBACCO IN THE PAST 6 MONTHS. \$0.00 details	I HAVE NOT SMOKED AND/OR USED TOBACCO IN THE PAST 6 MONTHS. \$0.00 details	Decline benefit Change New Election
SMOKER/TOBACCO USER	Declined	Declined	Change New Election
LUMENOS HDHP-NON SMOKER	Declined	Election Not Made	Decline benefit Make New Election
HEALTH INS - NO SMOKE/TOBACCO	PPO FAMILY \$218.00 details	Election Not Made	Decline benefit Make New Election

7. Select HEALTH INS to view the PPO, Lumenos HDHP or Healthkeepers (HMO) plans. To view and choose a level of coverage, click on the “+” sign.

7a. When making your enrollment choices, you have the ability to:

- a. Decline the benefit
- b. Make New Election (This should be used to elect or change coverage, including adding or removing remove a spouse or dependent)

*As an employee, you are automatically covered on the coverage you select. Please do not add yourself as a dependent or spouse.

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8. Selecting “Making New” Election requires you to choose a coverage level. If you are choosing coverage other than “Single”, you will need to select your dependents or add new dependents.

PPO
 PPO SINGLE
Employee Cost \$80.85 / Employer Cost \$253.32
 PPO SINGLE PLUS 1 CHILD
Employee Cost \$129.88 / Employer Cost \$412.65
 PPO SINGLE PLUS SPOUSE
Employee Cost \$172.41 / Employer Cost \$534.64
 PPO FAMILY
Employee Cost \$218.90 / Employer Cost \$703.01

HMO
 Decline

ANGELA C

Coverage must be added for at least 2 dependents.

There are no dependents to display.

9 a. If the dependent has been previously covered on your plan you can choose their name from the drop down box and select “add coverage”.

PPO FAMILY
Employee Cost \$218.90 / Employer Cost \$703.01

HMO
 Decline

ANGELA C

Coverage must be added for at least 2 dependents.

*If you need to remove a dependent, simply do not select their name from the drop down box; only add coverage for the dependents that you want to be covered in 2019.

9 b. To “Edit” an existing dependent’s information (**full legal name, date of birth or Social Security number**) after selecting “add coverage”, simply edit the necessary field (s) with the corrected information.

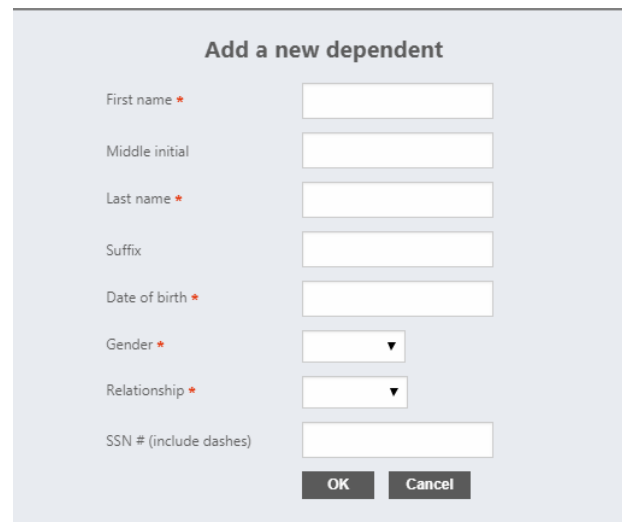
Edit

BROOKLYN M

First name *
 Middle initial
 Last name *
 Suffix
 Date of birth *
 Gender * ▼
 Relationship * ▼
 SSN # (include dashes)

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9 c. To add a dependent, select **Add new dependent**. A box will appear (see example on the right) for you to add the **full legal name**, date of birth, gender, relationship, and Social Security number. Please remember to include the Social Security Number for insurance coverages.



The screenshot shows a form titled "Add a new dependent" with the following fields and controls:

- First name * (text input)
- Middle initial (text input)
- Last name * (text input)
- Suffix (text input)
- Date of birth * (text input)
- Gender * (dropdown menu)
- Relationship * (dropdown menu)
- SSN # (include dashes) (text input)
- OK button
- Cancel button

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10. After you have completed making your selections, please select **Continue** at the bottom of the page. The following summary page should appear:

Review your enrollment

Review

NON TOBACCO USER	
ELECTION - I HAVE NOT SMOKED AND/OR USED TOBACCO IN THE PAST 6 MONTHS.	
<hr/>	
SMOKER/TOBACCO USER	
ELECTION - Declined	
<hr/>	
LUMENOS HDHP-NON SMOKER	
ELECTION - Declined	
<hr/>	
HEALTH INS - NO SMOKE/TOBACCO	
ELECTION - PPO SINGLE	
Employee Cost	\$80.85
Employer Cost	\$253.32
<hr/>	
LUMENOS-HDHP SMOKER/TOBACCO	
ELECTION - Declined	
<hr/>	
HEALTH INS - YES SMOKE/TOBACCO	
ELECTION - Declined	
<hr/>	
HEALTH SAVINGS ACCOUNT-LUMENOS	
ELECTION - Declined	
<hr/>	
FLEX SPEND MEDICAL	
ELECTION - Declined	
<hr/>	
FLEX SPEND DEPENDENT CARE	
ELECTION - Declined	
<hr/>	
DENTAL INSURANCE	
ELECTION - SINGLE	
Employee Cost	\$4.00
Employer Cost	\$10.35
<hr/>	
VISION INSURANCE	
ELECTION - SINGLE	
Employee Cost	\$4.00
<hr/>	
TOTAL EMPLOYEE COST	\$88.85

Submit Choices Modify Cancel



Make a selection

Important Final Steps:

1. Review your summary and either choose **SUBMIT CHOICES** to complete your enrollment or select **MODIFY** if you want to go back and make changes. If you choose **CANCEL** you will lose what you have already completed and will have to begin again.

***PRINT A COPY OF THE SUMMARY**

2. Once you have selected **SUBMIT CHOICES**, you can continue to make changes to your enrollment selections until 5:00pm on November 5, 2018, by selecting **CONTINUE** at the bottom right corner of the Open Enrollment tab.

3. After the Open Enrollment portal closes, you will **not** be able to make any additional changes through Employee Self Service.

Please contact the Department of Human Resources Benefits Division at benefits@nnva.gov for assistance.