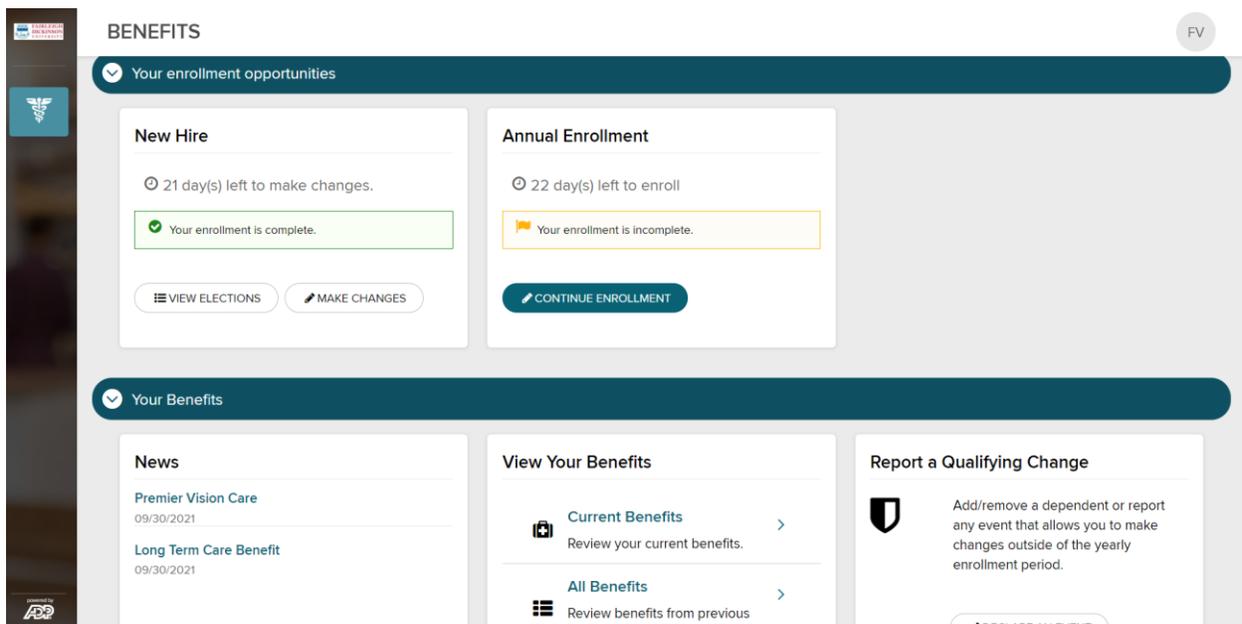


Tutorial for Open Enrollment

Please review the below screenshots and instructions to assist you during open enrollment. To get started please log onto www.myadp.com. If you are not yet registered, please review emails sent to the community regarding the process. For additional registration assistance please contact payroll@fdu.edu

*Please note that the screenshots below are for illustration purposes only. Information on the tiles that you will have access to in MyADP have been personalized.

1. Once logged into My ADP, under the **“Benefits”** tile, please follow the link for **“Annual Enrollment.”**



2. **“Review Your Dependents”**, if you currently have dependents covered under any benefits (i.e. Medical), you will see their information listed. Please note the following:

- a) If you will be adding a dependent to coverage during annual enrollment that is not listed, please click **“Add New Dependent”**
- b) If you would like to elect a person to be a beneficiary for the life insurance plan who is not a dependent (i.e. parent, friend), please click **“Add New Beneficiary”**.



Important... You are acting as FDUtest Vantage working at Fairleigh Dickinson University END SESSION

REVIEW YOUR INFO

ENROLL IN BENEFITS

22 DAYS LEFT TO MAKE CHANGES
Event Date: Jan 1, 2022

REVIEW YOUR DEPENDENTS

[+ ADD NEW DEPENDENT](#) [+ ADD NEW BENEFICIARY](#)

<p>Self FDUtest Vantage YOU</p> <p>VIEW</p> <p>Covered For: Eligible for some benefits but not enrolled in any yet</p> <p>Beneficiary Allocations: Allocations cannot be assigned to the primary insured</p>	<p>Dependent Sam Vantage Spouse</p> <p>VIEW</p> <p>Covered For: Eligible for some benefits but not enrolled in any yet</p> <p>Beneficiary Allocations: ✚ BASIC LIFE & ADD Primary Beneficiary 100%</p>
---	--

[SAVE & FINISH LATER](#) [NEXT >](#)

<p>Dependent Jane Vantage Child</p> <p>VIEW</p> <p>Covered For: Eligible for some benefits but not enrolled in any yet</p> <p>Beneficiary Allocations: No allocations assigned yet</p>	
---	--

[SAVE & FINISH LATER](#) [NEXT >](#)

3. You will see information regarding your basic life and LTD benefits. No action needed for LTD, **but** you must indicate your beneficiaries for Life Insurance (additional instructions on beneficiaries are included).

✔ Your Elections (2) [JUMP TO](#)

BASIC LIFE & ADD [CHANGE](#)

	<p>Basic Life and AD&D Insurance : \$50,000.00 <small>Effective Date: Jan 1, 2022</small></p> <p>\$0.00 ?</p> <p>BENEFICIARIES Sam Vantage</p>
---	---

✔ Your Elections (2) [JUMP TO](#)

BASIC LTD [CHANGE](#)

	<p>Long Term Disability : \$6,000.00 <small>Effective Date: Jan 1, 2022</small></p> <p>\$0.00 ?</p>
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4. Your current enrollment will show on the medical page. If you choose to change plans, enroll, or waive, please make the appropriate election. Please make sure any eligible dependents (spouse and children) who you wish to enroll have the box by their name checked. If you wish to waive coverage for a dependent, please uncheck their name(s). The per pay premium amount will change as you select and deselect dependents. If you are adding dependents, you will receive additional information to supply the needed documentation (birth certificate, marriage certificate, etc.). Documents **MUST** be provided for enrollment to be completed.

< ANNUAL ENROLLMENT Medical 

ABOUT THIS BENEFIT ^

Enter or change your selections in the sections below.

WHO IS COVERED ^

FDUtest Vantage *You*

 Sam Vantage *Spouse*

 Jane Vantage *Child*

MEDICAL PLANS ^

Choice Plus POS SELECT THIS PLAN

 CARRIER'S WEBSITE
Plan cost Per Paycheck
\$340.54

Choice Plus POS SELECT THIS PLAN

 CARRIER'S WEBSITE
Plan cost Per Paycheck
\$340.54

Mid Range Choice Plus POS SELECT THIS PLAN

 CARRIER'S WEBSITE
Plan cost Per Paycheck
\$316.79

High Deductible POS SELECT THIS PLAN

 CARRIER'S WEBSITE
Plan cost Per Paycheck
\$124.58

Important... You are ac

Save Your Election

YOU ARE ENROLLING IN

Medical - Mid Range Choice Plus POS

PER PAYCHECK	COSTS
PLAN COST:	\$316.79 ⓘ
TOTAL PER PAYCHECK:	\$316.79 ⓘ

COVERED INDIVIDUALS - MEDICAL

- FV** FDUtest Vantage
You
- SV** Sam Vantage
Spouse
- JV** Jane Vantage
Child

[SAVE AND CONTINUE TO HEALTH CARE FSA](#)
[SAVE AND RETURN TO ALL BENEFITS](#)

5. Please select your beneficiaries for the life insurance plan. You will have the opportunity again to add a beneficiary that is not a dependent.

< ANNUAL ENROLLMENT

Basic Life & ADD

ABOUT THIS BENEFIT

Basic Life and AD&D is fully paid for by FDU. Your coverage amount is 1X your regular annual earning up to a maximum amount of \$50,000.

YOUR COVERAGE

BENEFIT OPTION	PLAN COST PER PAYCHECK
BASIC LIFE AND AD&D... ▾	\$0.00

SELECT YOUR BENEFICIARIES

Divide the proceeds of your benefits between as many beneficiaries as you like.
Primary beneficiaries are mandatory but **secondary** beneficiaries are optional. The total proceeds must equal 100%.

[+ ADD NEW BENEFICIARY](#)

[PRIMARY](#) [SECONDARY](#)

SELECT YOUR BENEFICIARIES

Divide the proceeds of your benefits between as many beneficiaries as you like.

Primary beneficiaries are mandatory but **secondary** beneficiaries are optional. The total proceeds must equal 100%.

[+ ADD NEW BENEFICIARY](#)

	PRIMARY	SECONDARY
Sam Vantage Spouse	100 %	0 %
Jane Vantage Child	0 %	0 %
TOTAL:	100%	0%

[+ ADD NEW BENEFICIARY](#)

6. Please read the below information regarding supplemental life insurance. Please note, if you are not currently enrolled and would like to apply, you **MUST** complete an Evidence of Insurability. If you already have supplemental life or will be applying, please follow the same process for electing your beneficiaries.

ABOUT THIS BENEFIT [^](#)

Enter or change your selections in the sections below. You may elect coverage in \$10,000 increments up to \$500,000. Only during your new hire enrollment are you eligible for a Guaranteed Issue (\$140,000) amount without Evidence of Insurability (EOI). You will be required to submit EOI if applying for an additional coverage amount. The link for the EOI may be found in Documents Library. Please review the Plan Document found in the Documents Library for a complete understanding of all Life and AD&D benefits.

[↑ LESS](#)

SELECT YOUR COVERAGE

BENEFIT OPTION

\$140,000.00

PLAN COST PER PAYCHECK

\$3.50



Evidence of Insurability (EOI) is required.

SELECT YOUR BENEFICIARIES

Divide the proceeds of your benefits between as many beneficiaries as you like.

Primary beneficiaries are mandatory but **secondary** beneficiaries are optional. The total proceeds must equal 100%.

+ ADD NEW BENEFICIARY

	PRIMARY	SECONDARY
Sam Vantage Spouse	50 %	0 %
Jane Vantage Child	50 %	0 %
TOTAL:	100%	0%

+ ADD NEW BENEFICIARY

Save Your Election

YOU ARE ENROLLING IN

Additional Life - \$140,000.00

⌚ Pending: Waiting for EOI form submission

BENEFIT OPTION: Employee Supplemental Life:
\$140,000.00

PER PAYCHECK	COSTS
PLAN COST:	\$3.50 ⓘ
TOTAL PER PAYCHECK:	\$3.50 ⓘ

PRIMARY ALLOCATIONS

SV	Sam Vantage Spouse	50%
JV	Jane Vantage Child	50%

SAVE AND CONTINUE TO OPTIONAL AD&D

SAVE AND RETURN TO ALL BENEFITS

Save Your Election

🚩 Evidence of Insurability (EOI) is required.

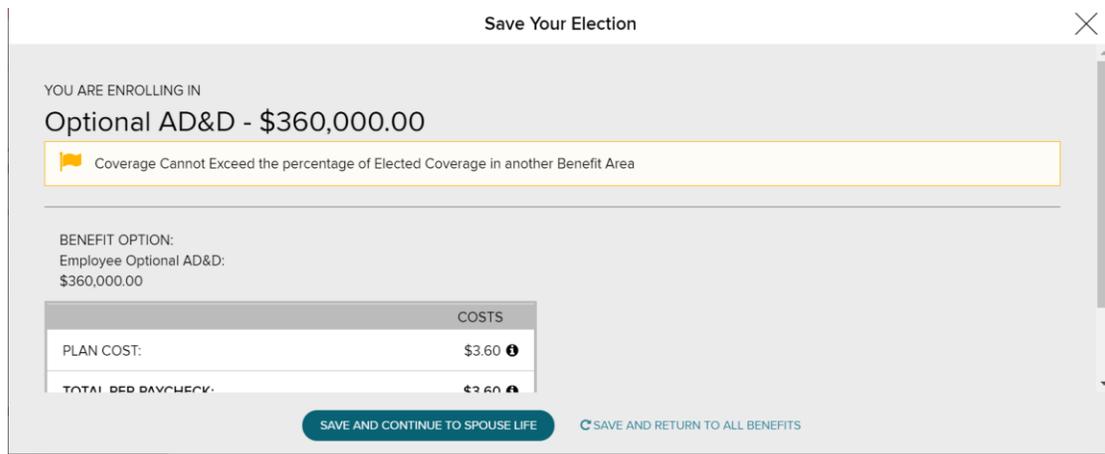
🔒 You are guaranteed the coverage below until the pending coverage is approved and becomes effective.

BENEFIT OPTION:
Employee Supplemental Life:
\$10,000.00

	COSTS
PLAN COST:	\$0.25 ⓘ
TOTAL PER PAYCHECK:	\$0.25 ⓘ

SAVE AND CONTINUE TO OPTIONAL AD&D

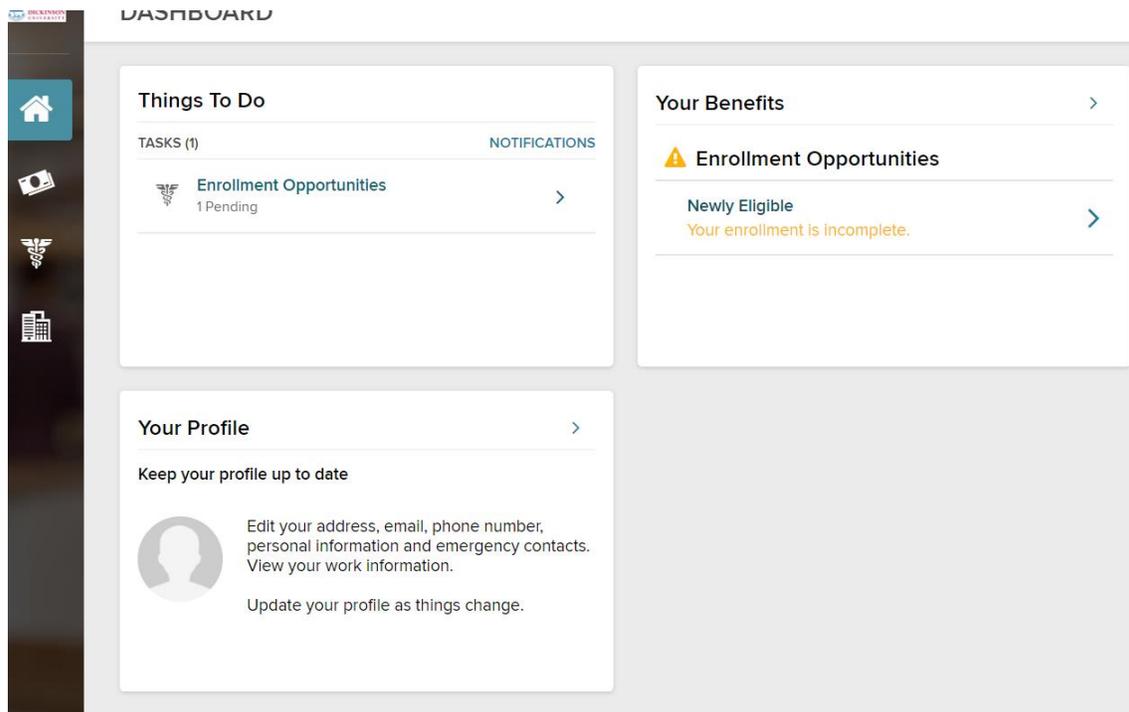
SAVE AND RETURN TO ALL BENEFITS



As you continue through the enrollment process, you will have other benefits to elect or waive. Please refer to the email sent to the community regarding each benefit.

After your elections are complete, you will receive a **confirmation** and can review your confirmation statement.

Once complete, please return to your **“Dashboard”** and under **“Your Profile”**, please complete the emergency contact form.



ADD STATUS MESSAGE

CONTACT PREFERENCES

CONFIGURE THIS PAGE

Work Information

Status: Active

WORK CELL PHONE
[REDACTED]

TIME WITH COMPANY
0 yrs, 4 mo

1000 River Road
Teaneck, NJ 07666
US

Human Resources: Admin

Personal Information

[REDACTED]

[REDACTED]

[REDACTED]
US

Emergency Contacts

No Emergency Contacts.
It is important that you add your emergency contact info.

Pay Information

Compensation
[REDACTED] Show

Per Pay Period
[REDACTED] Show

My Documents

There are currently no documents uploaded. You can upload and store documents here.

UPLOAD DOCUMENTS

< BACK

Emergency Contact

Primary Contact

Primary

FIRST NAME * LAST NAME * RELATIONSHIP *

[REDACTED] [REDACTED] [REDACTED]

+ ADD LANDLINE

TYPE * COUNTRY NUMBER * REMOVE

[REDACTED] United Stat... [REDACTED] [REDACTED]

Same as my legal address

COUNTRY

[REDACTED]

STREET ONE

[REDACTED]