CHANGING BENEFIT ELECTIONS DUE TO A QUALIFYING EVENT

ADD A DEPENDENT

STEP	ACTION
1	Log into HRconnect at https://portal.adp.com. Click on the *Benefits Enrollment* tab.
2	Click on the *Add Dependent* link in the 'Dependents' box. *Note: You can add a person to your list of dependents or change/update their information at any time. But you cannot add a dependent to your benefits unless there is a valid qualifying event.*

3	(a) Use the drop-down list to choose the reason for adding this dependent to your benefits and (b) enter the date the reason for the change occurred. (c) Click **Submit**.

4	The next screen shows your current dependents. Click on the **Add Dependent** button (if applicable) or **Submit** to continue. **IF YOU DO NOT NEED TO ADD DEPENDENTS, SKIP TO STEP 8.**

5 Enter the requested information about your dependent in the fields on the next screen (see below). Fields with a red arrow preceding them are required. If you need to add more than one dependent, click **Add Another** after each one. When you have added the last dependent, click **Done**.

■ **Add Dependents**

Enter information about your dependent in the fields below. Click Done when you have completed entering the information or click Add Another dependent. If you want to clear all the fields at any point, click Reset.

First Name: ► Hope   Middle Name: [   ]   Last Name: ► Smith   Su

Birth Date: ► 10/15/2009 (mm/dd/yyyy)   Social Security Number: 123456789

Gender: ► Female ▼   Relationship: ► Child ▼

☐ Full Time Student

☐ Disabled

Disability Date: [   ] (mm/dd/yyyy)

[Done]   [Add Another]   [Reset]   [Cancel]

6 You will return to the screen that's illustrated in Step 4 above. A note at the top will indicate that you added your dependent successfully. Confirm that the information is correct and click **Submit.**

Manage Dependents   [?]

☑ Hope Smith has been added successfully.
You may add another dependent or click **Submit** and begin making elections.

Your dependent(s) are listed below. You can click Add Dependent to tell us about another dependent, click Update next to a dependent

7 You will now have the opportunity to enroll the new dependent(s) in your benefits.

8 Your current elections are displayed. Only those benefits to which you are allowed to make a change will be highlighted. The rest will be grayed out. Click on the first benefit to which the dependent(s) should be added. (We'll use medical as our example.)

Summary
■ Confirmation

Summaries
■ Eligibility Summary

■ **Benefit Elections**   [?]

Benefit	Plan Election	Coverage	Semi-Monthly Cost	Employer Contribution
Medical	HRA1 w/o CCN	Associate + Family Self, John, Jane, Billy	$144.50 *	$355.50
Dental	Delta PPO	Associate + Family Self, John, Jane, Billy	$27.49 *	$15.03
Vision	VSP	Associate + Family Self, John, Jane, Billy	$10.20 *	$0.00
Company-Paid Life & AD&D	Company-Paid Life & AD&D		$0.00 **	$3.15
Associate Supplemental Life & AD&D	Waive			$0.00

9 The option for that benefit in which you are currently enrolled will be the only one highlighted. In the **Coverage Information** section, click in the **Cover** box for the new dependent(s) and click '**Done'** at the bottom of the screen. Repeat this process for each benefit to which you are eligible to add the new dependent(s).

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CONFIRM BENEFIT ELECTIONS – AFTER ADDING A DEPENDENT

10 On the summary screen confirm that:
- All desired elections have been recorded
- All benefit elections show the dependents you wish to have covered on each benefit

11 If you are satisfied with your elections, select *Confirm Elections* at the bottom of the page.
Note: If you do not select 'CONFIRM ELECTIONS,' changes WILL NOT be recorded.

12 The next screen will display the *Certification Statement*. Click on the **I agree** button to continue the confirmation of your elections.

13 The next screen will ask if you want an email sent notifying you that your elections have been accepted. Complete the fields as appropriate and click **Submit**.

14 Once elections are confirmed, you will receive a confirmation number. Retain this for your records. **Print your confirmation statement.**

15 **Print your confirmation statement.** Once elections are confirmed, you will receive a confirmation number. Retain this for your records.

CNO FINANCIAL GROUP

DELETE A DEPENDENT

STEP	ACTION
1	Log into HRconnect at https://portal.adp.com. Click on the *Benefits Enrollment* tab.
2	Click on the *Delete Dependent* link in the 'Dependents' box. *Note: You can delete a person from your list of dependents or change/update their information at any time. But you cannot delete a dependent from your benefits unless there is a valid qualifying event.*

| 3 | Use the drop-down list to (a) choose the reason for deleting this dependent to your benefits and (b) enter the date that the reason for the change occurred. (c) Click **Submit**. |

| 4 | The next screen shows your current dependents. Click the box in the **Remove** column for the dependent(s) to be deleted. Click on the **Delete Dependent** button and **Submit** to continue. |

| 5 | A note at the top will indicate that you deleted your dependent successfully. This will remove all coverage for the indicated dependent(s). |

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Manage Dependents

☑ You have successfully deleted John. You may delete another dependent or click **Submit** and begin making elections.

To remove a dependent, select the dependent and click Delete Dependent. Your dependent will be deleted and will no longer be enrolled in benefits. If you do not want to delete the dependent selected, click Cancel.

Add Dependent

Remove	First Name	M	Last Name	Birth Date	SSN	Relationship	Gender	Disabled	Full Time Student
☐	Jane		Smith	01/01/1998		Child	Female	No	No
☐	Billy		Smith	01/10/2000		Child	Male	No	No
☐	Hope		Smith	10/15/2009	***-**-****	Child	Female	No	No

Delete Dependent

Submit   Cancel

CHANGE BENEFIT ELECTIONS

STEP	ACTION
1	Log into HRconnect at https://portal.adp.com. Click on the *Benefits Enrollment* tab.
2	Click on the *Change Benefits* link in the 'Change Your Benefits' box to add coverage for yourself and dependents due to a valid Qualifying Event.

STEP	ACTION
3	(a) Use the drop-down list to choose the reason for changing your benefits at this time and (b) enter the date the reason for the change occurred. (c) Click **Submit**.

STEP	ACTION
4	The next screen shows your current dependents. Click on the **Add Dependent** button and **Submit** to continue. Or, if you aren't making changes to dependents, simply click **Submit** to continue.

STEP	ACTION
5	To add dependents, reference the **ADDING DEPENDENTS** Quick Reference Guide and follow steps 5-15.

6 The screen will show current benefit elections, if there are any. (**NOTE:** If you do not see your current elections, click on the event that you just created in order to view current elections.) Click on the highlighted name of a benefit to be changed. [ex. To change the medical election, click on the Medical link in the *Benefit* column.]

Summary	**■ Benefit Elections**				[?]
■ Confirmation	**Benefit**	**Plan Election**	**Coverage**	**Semi-Monthly Cost**	**Employer Contribution**
Summaries	Medical	HRA1 w/o CCN	Associate + Family Self, John, Jane, Billy	$144.50 *	$355.50
■ Eligibility Summary	Dental	Delta PPO	Associate + Family Self, John, Jane, Billy	$27.49 *	$15.03
	Vision	VSP	Associate + Family Self, John, Jane, Billy	$10.20 *	$0.00
	Company-Paid Life & AD&D	Company-Paid Life & AD&D		$0.00 **	$3.15
	Associate Supplemental				

7 The screen below will be displayed for that benefit. Select the desired option and **make sure appropriate dependents are checked.** Click '**Done**' at the bottom of the screen. Repeat this process for each benefit you want to change.

8 Once you've selected all your benefits, go to the *Summary* screen by clicking on the 'summary' link in the left side bar.

CONFIRM BENEFIT ELECTIONS

9 On the summary screen confirm that:
  - All desired elections have been recorded
  - All benefit elections show the dependents you wish to have covered on each benefit

10 If you are satisfied with your elections, select *Confirm Elections* at the bottom of the page.
Note: If you do not select 'CONFIRM ELECTIONS,' changes WILL NOT be recorded.

11   The next screen will display the *Certification Statement*. Click on the **I agree** button to continue the confirmation of your elections.

Certification Statement

I hereby enroll for coverage under my employer's Associate Benefit Plans and authorize the appropriate deductions to be taken from my earnings, if any. I understand that I am eligible to enroll for the coverage listed above, and may choose to waive my eligibility by selecting "Waive" in the appropriate sections.

I authorize any providers, insurers or other parties with any information related to me or my dependents' health status or condition, to release same to the Plans for any purpose related to this election. I understand this authorization expires upon written revocation, 60 days after execution or when I terminate coverage. I understand that I have the right to revoke this authorization at any time by sending written notification to our designated Privacy Office. I understand revocation is not effective for information previously disclosed or redisclosed by the recipient. My enrollment and eligibility under the plans cannot be conditioned upon signing, and I may refuse to sign

[I Agree]   [I Disagree]

12   The next screen will ask if you want an email sent notifying you that your elections have been accepted. Complete the fields as appropriate and click **Submit**.

13   Once elections are confirmed, you will receive a confirmation number. Retain this for your records. **Print your confirmation statement.**

14   **Take your confidential Health Assessment** at redbrickhealth.com. Once you've registered, click the *Health Assessment* tab to get started. You'll be eligible for the lower medical premiums only after you've completed your Health Assessment.