A presentation slide with a blue and purple color scheme. The title 'New Employee Benefits' is in white on a dark blue background. Below it, the subtitle 'for Eligible Employees of the USDA Marketing and Regulatory Programs (AMS, APHIS, GIPSA, FAS & MSPB)' is also in white. To the right, contact information for the Benefits Section is listed in white text. At the bottom right, there is a date 'January 2018' and a link to 'Contact us - Benefits' in blue text. A horizontal purple bar is positioned above the contact information.

New Employee Benefits
for Eligible Employees of
the USDA Marketing and Regulatory Programs
(AMS, APHIS, GIPSA, FAS & MSPB)

USDA, MRPBS
Human Resources Operations
Benefits Section
250 Marquette Ave, Suite 410
Minneapolis MN 55401

Contact the Benefits Assistant who works with
your agency/program:
[Contact us - Benefits](#)
FAX: 612-336-3545

January 2018

Welcome to this Overview of Employees Benefits. This slide show will take you through the process of obtaining information on each benefit, how to enroll, and the deadlines for document submission.

As you move through this presentation, there are links that will take you to other websites. Please click the links for additional information

Employee Benefits



The benefits for which you may be entitled are described below. These include:

- Eligibility for Benefits
- Life Insurance
- Health Insurance
- Dental and Vision Insurance
- Flexible Spending Accounts
- Retirement
- Thrift Savings Plan
- Long Term Care Insurance
- Designation of Beneficiary

Here is a list of the topics covered in this presentation:

We will begin by explaining the requirements that determine eligibility for benefits. We will then go over each benefit program and how to enroll. We will finish this presentation by explaining how to complete the appropriate designation of beneficiary forms.



Eligibility for Employee Benefits

- Work Schedules (Tours of duty) are:
 - Full time
 - Part time
 - Intermittent
 - Seasonal
- Appointment types are:
 - Career or Career Conditional
 - Excepted, Excepted Conditional or Excepted Indefinite
 - Term
 - Provisional

Let's begin by reviewing how eligibility for benefits is determined. Eligibility for employee benefits generally depends upon your tour of duty and your type of appointment.

A Full time work schedule generally means over 32 hours a week. Part time schedule 16-32 hours a week. An Intermittent work schedule has no predetermined work schedule or hours, or is less than 16 hours per week. Seasonal employees work a season of the year, and are placed in non-pay status for part of the year. Benefits are based on work schedule established at time of appointment. Generally, those hired under a non-temporary appointment that have a regular tour of duty are eligible for all Federal employee benefits.

The Office of Personnel Management has amended the Federal Employees Health Benefits (FEHB) Program eligibility requirements to include certain temporary, seasonal and intermittent employees. Under this new regulation, employees who are expected to work 130 hours per month or more for at least 90 days, and will receive the same government contributions as full-time employees. At this time, the same is not true for part time employees. These certain temporary, seasonal and intermittent employees are also eligible to enroll in a healthcare flexible spending account through FSAFEDS and Federal Long Term Care Insurance Program (FLTCIP) which we will discuss later in the presentation. However, they

are not eligible for any other benefits such as life insurance or the thrift savings plan.

Life Insurance

Federal Employees Group Life insurance (FEGLI) offers you choices on coverage for yourself and eligible family members.

- Newly hired employees are automatically covered by Basic Life as of the date of your employment. Within 60 days of your employment, you may elect optional coverage.
- You may waive all coverage; however, there are no regular scheduled open seasons for life insurance.

Please note - The newest regulation allowing certain eligible temporary, seasonal and intermittent employees to enroll in health benefits are NOT eligible to enroll in the FEGLI program.

Life Insurance



- For complete information, including the FE-76-21, FEGLI booklet for Federal Employees, and a calculator to help you determine the value and cost of coverage, link to: [FEGLI Program Handbook](#)
- Complete the SF-2817, Life Insurance Election Form, even if you are electing the automatic Basic Life coverage only:
http://www.opm.gov/forms/pdf_fill/sf2817.pdf
- Send the completed form (copy 1 – Official Personnel copy only) to the Human Resources Operations office in Minneapolis **within 60 days of your appointment**. This form may be faxed to 612-336-3545, or mailed.
- Please watch your Statement of Earnings and Leave for the FEGLI deductions.

You should refer to the Office of Personnel Management's (OPM) website to review the Federal Employee Group Life Insurance Booklet (FE 76-21) which provides a comprehensive overview of the program. OPM's website also has a wonderful, user-friendly, calculator to help you determine coverage that meets your life insurance needs.

All newly eligible employees must complete a Standard Form 2817 and submit it to the Human Resources Operations Office in Minneapolis within 60 days of their appointment. Forms may be faxed or mailed.

Life Insurance



- **Rehired employees whose break in Federal service is less than 180 days** are automatically enrolled with the level of coverage in effect at the time of separation from previous Federal employment.
- **Rehired employees whose break in Federal service is 180 days or more** are automatically enrolled with the level of coverage in effect at the time of separation from previous Federal employment **UNLESS** you previously waived coverage. If you waived coverage, then you will be covered under Basic only. You have 60 days from the date of rehire to make a new life insurance election or waiver.
- If you do not wish to continue this coverage, you may reduce or cancel at any time, but you may not elect to increase the coverage, unless you had a qualifying life event during your break.

If you are a rehired Federal employee, your opportunities to make a new election of coverage varies based on the length of your break in service.

Rehired employees whose break in Federal service is less than 180 days are automatically enrolled with the level of coverage in effect at the time of separation from previous Federal employment.

Rehired employees whose break in Federal service is 180 days or more are automatically enrolled with Basic only (even if previously waived), and the same level of optional insurance that you had in your prior position, unless you make a new election of coverage. You have 60 days from the date of rehire to elect additional life insurance.

Coverage may be waived at any time.

Life Insurance



- Employees transferring from one Federal agency to another are NOT eligible to elect additional life insurance based on the transfer.
- Please watch your Earnings and Leave Statement to be sure your previous life insurance coverage continues.

You are not eligible to elect additional insurance based on a transfer from one agency to another. However, you should watch your Earnings and Leave Statement to make sure your coverage was properly transferred from your prior agency. Please contact your servicing benefits assistant or specialist immediately if you notice any type of error.

Health Insurance



Federal Employees Health Benefits (FEHB) program offers a variety of health plans.

Let's go through the steps:

- Choose a health plan
- Complete the SF-2809, Health Insurance Election Form
- FAX or mail the form to Human Resources Operations in Minneapolis within 60 days of your employment date.

Choosing a health plan requires some research to find a health plan that meets your health care needs.

Let's go through the steps in choosing a health plan.

The first step when choosing a health plan requires you to consider the health care needs of you and your family.

Health Insurance



How to choose a health plan:

- You will find information to help you compare and choose a plan at the Office of Personnel Management's web site:
<http://www.opm.gov/healthcare-insurance/healthcare/plan-information/>
- Before you make a selection, review the individual plan brochures to find a plan which offers coverage best suited for your health care needs.
- If you have certain doctors or clinics that you want to use, make sure the provider is a preferred provider with the health plan of your choice by using the Provider Directory on the plan's website, or calling the plan. Links to each plan's website are provided by OPM in the Plan Comparison tool.
- When you have decided on a plan, find the 3-digit plan code from the plan's brochure or on OPM's website.

The Office of Personnel Management's (OPM) website has a Compare Health Plan link that will help you compare the plans that meet your needs and are available in your area.

The tool allows you to review specific plan brochures and costs, locate contact numbers for plan representatives, and refer you to a list of preferred providers for each plan. The tool also provides you with the three-digit enrollment code which you must use during the enrollment process. For example 104 is the enrollment code for Blue Cross/Blue Shield – Self Only Standard plan.

Health Insurance



How to enroll in a health plan:

- Complete the SF-2809, Health Benefits Election Form:
http://www.opm.gov/forms/pdf_fill/sf2809.pdf
- Follow the instructions included with the form.
- Print the last 2 pages of the form, and send it to Human Resources Operations in Minneapolis within 60 days of your employment date. The other copies are not needed. This form may be faxed to 612-336-3545, or mailed.
- Even if you elect not to enroll in a health plan at this time, you are required to complete the SF-2809, electing not to enroll, and send it to Human Resources Operations in Minneapolis within 60 days of your employment date.
- If you miss this opportunity to enroll, you will need to wait for the annual open season, or a qualifying life event.

To complete the SF-2809, you must use the 3-digit enrollment code from the plan brochure to indicate your selection, and if applicable, the names, social security numbers, and birth dates of eligible family members.

If you choose to not enroll in a health plan, you are still required to complete a SF-2809 waiving your opportunity to enroll.

You must submit your form to the Human Resource Office in Minneapolis within 60 days of your appointment.

Health Insurance



- **New enrollments** are effective the first day of the pay period which begins after the completed SF-2809 is received by the Human Resources Benefits office and which follows a pay period during any part of which you were in a pay status.
- A copy of the form will be emailed/mailed after we have processed it, showing the effective date. This is your proof of coverage until your health plan sends you identification cards.
- Watch your statement of earnings and leave for the health benefit premiums to be deducted. You can expect your health plan ID cards to arrive several weeks after that.

Your coverage is effective at the beginning of the pay period after the date HRO in Minneapolis receives the completed enrollment form as long as you are in pay status.

A copy of the processed form will be returned to you as proof of your coverage before your ID cards arrive.

Health Insurance



- If you elect to be covered by an FEHB plan, your health insurance premiums are automatically taken on a pre-tax basis from your salary, which means your taxable income is lower for Federal, State, Social Security and Medicare taxes.
- If you want to waive pre-tax participation and have your health insurance premiums deducted from your pay on an after-tax basis (which means more of your income is taxable), you must complete a waiver form and send it with your completed SF-2809, Health Benefits Registration form. Please contact your Benefits Specialist for the pre-tax waiver form.
- For additional information, go to [Premium Conversion](#)

Health insurance premiums are withheld from your salary on a pre tax basis; therefore, your taxable income is lowered.

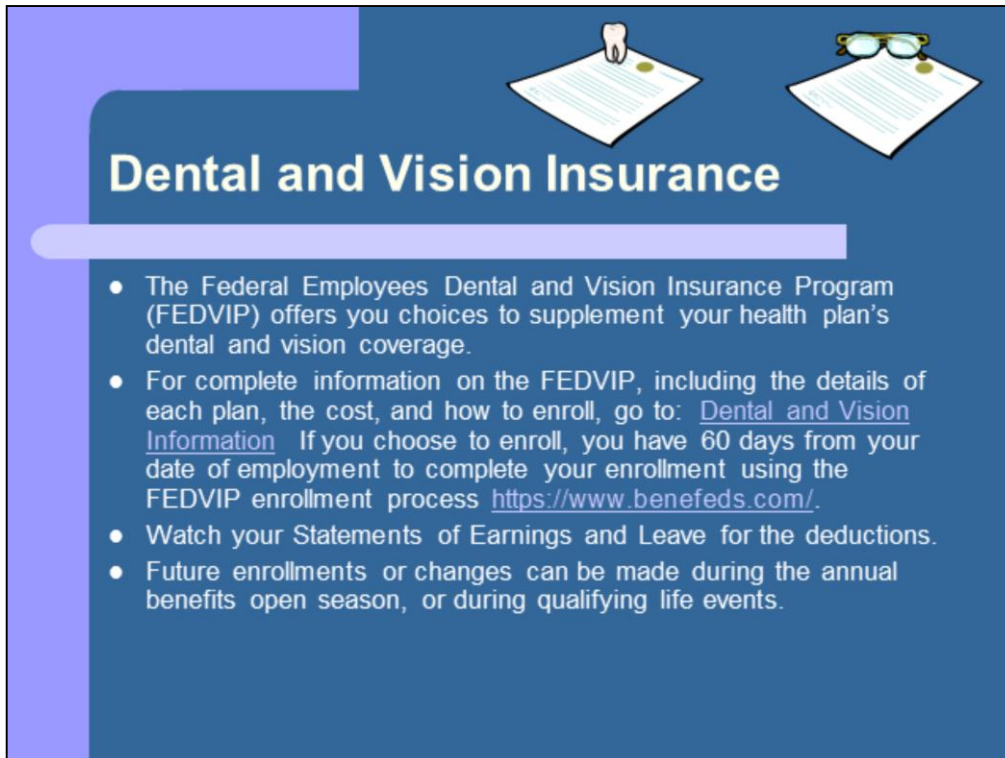
Information about Premium Conversion can be found on OPM's website.

If you wish to waive the tax advantage, you must complete a waiver form and submit it with your SF-2809.

Health Insurance

- **Employees transferring** from one Federal agency to another are not generally eligible to change health benefits elections. If your transfer requires you to move out of your health benefits service area, or lose your other health insurance coverage, you may be eligible to elect a new health plan.
- Please watch your earnings statement to be sure that your previous health insurance coverage is transferred correctly.

Employees who move out of their health benefits service area as a result of their transfer should elect an insurance plan available within their new location.

A graphic with a blue background and a purple sidebar on the left. At the top, there are two white document icons: the left one has a tooth on it, and the right one has a pair of glasses. Below the icons is the title "Dental and Vision Insurance" in white text. A horizontal purple bar is positioned below the title. Underneath the bar is a bulleted list of four items in white text.

Dental and Vision Insurance

- The Federal Employees Dental and Vision Insurance Program (FEDVIP) offers you choices to supplement your health plan's dental and vision coverage.
- For complete information on the FEDVIP, including the details of each plan, the cost, and how to enroll, go to: [Dental and Vision Information](#). If you choose to enroll, you have 60 days from your date of employment to complete your enrollment using the FEDVIP enrollment process <https://www.benefeds.com/>.
- Watch your Statements of Earnings and Leave for the deductions.
- Future enrollments or changes can be made during the annual benefits open season, or during qualifying life events.

You have 60 days from the date of your appointment to enroll in a supplemental dental or vision plan or both! The BENEFEDS website must be used to complete your enrollment.

Dental and Vision Insurance

- **Employees transferring** from one Federal agency to another are generally not eligible to change FEDVIP elections unless moving out of a regional plan's service area.
- **Transferring employees** who are already enrolled in FEDVIP are required to contact BENEFEDS to report the change in employing Federal agencies and payroll offices. This is not a deduction that automatically transfers from one Federal agency to another. Link to <https://www.benefeds.com/>
- Watch your Statements of Earnings and Leave for the deductions.



Flexible Spending Accounts

- The Flexible Spending Accounts (FSA) program allows employees to use pre-tax allotments to pay for eligible dependent care expenses or certain health care expenses that are not reimbursed by another source.
- **If you are a new employee** eligible for FSAFEDS, you will have 60 days to make an election to participate in FSA, but no later than September 30 of the plan year. You can elect an FSA during the annual open season held each fall for the following plan year.

For complete information, please link to <http://www.fsafeds.com>.

An additional way to reduce your taxable income is to enroll in a Flexible Spending Account!

These accounts allow you to be reimbursed for out-of-pocket expenses not covered by any other source. For complete information and enrollment instructions please visit the FSAFEDS website.

You have 60 days from the date of your appointment to elect to contribute to a Flexible Spending Account.

Flexible Spending Accounts

- **Employees transferring** from one Federal agency to another are generally not eligible to elect flexible spending based on the transfer, however, if your previous agency withheld flexible spending deductions from your salary, you are required to contact FSAFEDS at 1-877-372-3337 to report your change in employing Federal agencies and payroll office. This is not a deduction that automatically transfers from one Federal agency to another.
- Please watch your Statements of Earnings and Leave for the FSA deductions.

Retirement



There are three retirement plans for most Federal employees:

- The Federal Employees Retirement System (FERS including FERS-RAE and FERS-FRAE)
- The Civil Service Retirement System (CSRS)
- The Civil Service Retirement System Offset (CSRS Offset)

Coverage under one of these plans depends on your type of appointment, work schedule, and whether you are a new employee or a rehired employee with prior coverage under CSRS or FERS.

Retirement coverage under one of the retirement plans is dependent on your appointment, work schedule, and whether or not you have prior Federal service.

Foreign Officers may be covered under Foreign Service Retirement and Disability System (FSRDS) or Foreign Service Pension System (FSPS).

Retirement



- If you are a newly covered employee with less than 5 years of prior Federal civilian service, you are covered by the Federal Employees Retirement System
- The **FERS Booklet, RI 90-1**, <http://www.opm.gov/retire/pubs/pamphlets/fers.asp>, explains the benefits of the plan, which includes a Basic Annuity, Social Security, and the Thrift Savings Plan (TSP).

Newly eligible employees are generally covered under the Federal Employees Retirement System (FERS). In 2012 Congress passed a law that all new Federal employees with less than 5 years of prior Federal Service would have been placed into FERS-RAE and pay 3.1% into their defined pension instead of .08%. In 2013, Congress passed another law increasing the retirement contribution from 3.1% and placing employee into FERS-FRAE and pay 4.4% effective January 1, 2014. This is the only difference for new employees covered under FERS and all the rules for FERS retirement remain the same for those contributing higher contributions. The FERS Booklet explains the three part benefit system which includes a defined retirement benefit, Social Security and the Thrift Savings Plan.

Retirement



If you are a rehired Federal employee:

- who was previously covered by the Civil Service Retirement System (CSRS), and your break in Federal civilian service was less than 1 year, you are covered by CSRS.
- who was previously covered by the CSRS and your break in service was more than 1 year, and you had more than 5 years of prior Federal civilian service as of 12/31/1986, you are covered by CSRS-Offset.
- who had a break in service ending after 12/31/86, and you had completed 5 years of creditable civilian service as of your last break in service, you are covered by CSRS-Offset.

Rehired Federal employees have additional factors that determine their retirement system coverage:

Ask yourself:

How much previous Federal service do I have?

Do you have a break in Federal service of more than 3 days?

How long was the break in service?

When was the break in service?

If you have questions, please contact your Benefits Specialist.

Retirement



- If you are rehired and covered by CSRS or CSRS-Offset, you have a 6 month period from the date of your appointment to transfer to FERS. You may compare the benefits of both plans by using **RI 90-3, FERS Transfer Handbook, A Guide to Making your Decision**, at <http://www.opm.gov/retire/pubs/pamphlets/fers.asp>, and make your decision to remain in CSRS or transfer to FERS, using SF-3109.
- Contact your servicing Benefits Specialist if you have any questions.

If your previous service was covered under the Civil Service Retirement System (CSRS) or the Civil Service Retirement System Offset Plan (Offset), you may have an opportunity to transfer to FERS within 6 months of your appointment date.

Your Benefits Specialist is a great resource for additional information regarding your retirement coverage.

Retirement



If you performed active duty military service after 1956, you can complete a deposit to add the service for retirement purposes.

Minimize the interest charges by making the service credit payment now.

For more information, contact your Benefits Specialist.

[Military Duty](#)

Have you had active duty military service?

If you have military service, this service may be creditable for retirement purposes by making a service credit deposit to the retirement fund.

Completing the deposit early in your career can also save you money down the road! Please contact your Benefits Specialist for more information.

Thrift Savings Plan



- The Thrift Savings Plan (TSP) is a retirement savings and investment plan for employees covered under a retirement plan (ie: FERS/CSRS).
- If you are covered under FERS the government will match up to 5% of your salary.
- TSP Traditional fund option means that you pay no taxes on contributions or earnings until you withdraw your account.
- TSP ROTH option means that you pay the taxes up front and the withdrawal is tax free.
- For complete information on TSP please go to the TSP web site, <http://www.tsp.gov>.
- Look under Civilian Forms and Publications to find the [Summary of the Thrift Savings Plan, TSPBK08](#), and [Managing Your Account, TSPBK30](#).

The Thrift Savings Plan (TSP) is a retirement savings and investment plan for FERS and CSRS/CSRS-Offset employees that allows you to save for the future and reduce your current taxable income. Or you can enroll in the ROTH option and you pay the taxes up front, which means you will receive your ROTH contributions and earnings tax free at retirement following age 59 ½.

Thrift Savings Plan



- Newly hired employees or rehired employees, who have had a break in service of more than 31 days will have an automatic 3% of their basic pay withheld from their salary and deposited into an age appropriate Lifecycle fund.
- Employees who are subject to the automatic enrollment may opt out by completing a TSP-1 Election Form. Employees who elect to terminate contributions within the first pay period and whose forms are received in Minneapolis by the end of the first pay period will not be subject to any withholdings.
- FERS employees are eligible to receive agency contributions immediately. See the Summary of the TSP for information on the matching contributions.
- Participation of FERS employees is strongly encouraged, since TSP is a major part of the total retirement package.

While contributing to TSP is optional, it is important to invest and invest early in your career, since your TSP account is a major component of your retirement benefit package. For FERS employees, the government will match up to 5% of your salary. That's FREE money!

You may change your enrollment at any time by faxing or mailing a completed TSP-1 form to the benefits section in the HRO in Minneapolis.

Thrift Savings Plan

- You may submit a TSP-1, TSP Election Form at any time:
[TSP Forms](#)
- The TSP-1 should be sent to the Minneapolis Human Resources Operations Benefits office. It may be mailed or faxed to 612-336-3545.
- The effective date of your election is the first day of the pay period following the one in which the form is received. **Exception:** Employees who elect to opt out of automatic enrollment within the first pay period and their forms are received in Minneapolis by the end of the first pay period will not be subject to any withholdings.
- Take advantage of this important benefit by participating as soon as you become eligible!

Thrift Savings Plan



- Once your TSP account is activated by your contribution, the TSP Service Office will issue you a TSP Personal Identification Number (PIN) which you may use to make investment fund allocations and interfund transfers using the TSP web site or the Thriftline. Your contributions will be invested in an age appropriate Lifecycle Fund until your fund allocation is processed. Find out more about the TSP funds at <http://www.tsp.gov/>
- Once your TSP account is activated by your contribution, you may also transfer or roll over money into the TSP, from another qualifying investment plan. Find out more on the TSP-60 form, available on the TSP web site.
- An employee who has had contributions automatically withheld from his salary may use a TSP-25, Request for Automatic Enrollment Refund Form, to request a refund no later than 90 days after TSP receives the first automatic enrollment contribution.
- Please watch your Statement of Earnings and Leave to be sure your TSP contributions are withheld.

You will have access to your TSP account information via the TSP website following the opening of your account with your first contribution.

Your account number and Personal Identification Number (PIN) will be mailed to you for use in making fund allocations, interfund transfers, or for simply checking your account status.

If you have a qualified IRA or employer sponsored retirement plan, such as a 401K, there are provisions to rollover those monies into your TSP account, if you choose to do so.

Thrift Savings Plan



- **Rehired employees with a break in Federal service of less than 31 days** will continue to have their previous TSP contributions withheld.
- **Rehired employees, with a break in service of more than 30 days** will be subject to automatic enrollment.
- Please watch your Statement of Earnings and Leave to be sure your TSP contributions are withheld.

If you are rehired into Federal service within 31 days and previously contributed to TSP, your contribution rate remains unchanged.

Thrift Savings Plan

- **Employees transferring** from one Federal agency to another will continue to have their previous TSP contribution election withheld. Employees transferring with an outstanding (unpaid) TSP loan should notify Human Resources of the loan information in order to continue the loan deduction.
- Please watch your Statement of Earnings and Leave to be sure your TSP contributions are withheld.



Federal Long Term Care Insurance

- Long term care is lengthy or lifelong assistance needed for the activities of daily living (eating, bathing, dressing, etc.) due to injury, illness, or cognitive impairment (e.g., Alzheimer's disease). It may be the most expensive type of care you ever face, and most health care programs do not routinely cover it.
- Coverage provides financial resources for care in a nursing home, assisted living facility, adult day care, or at home.

One of today's most expensive types of care can be due to an extended injury or illness that may require long-term assistance.

Long Term Care Insurance may provide financial assistance in securing the facilities or qualified care in such cases.



Federal Long Term Care Insurance

Key benefits of the Federal Long Term Care program include:

- Long Term Care Insurance is managed by John Hancock Life & Health Insurance Company.
- Qualified relatives can also apply – even if you are not ready to apply for coverage, consider it for your parents and parents-in-law to help secure their future.
- If you apply within 60 days of becoming eligible, you and your spouse qualify for abbreviated underwriting (fewer health questions means it may be easier to be approved for coverage).

Some key components of the program include:

Long Term Care Insurance is managed by John Hancock Life & Health Insurance Company, a reputable and long-standing company.

Qualified relatives can also apply – even if you are not ready to apply for coverage, consider it for your parents and parents-in-law to help secure their future.

If you apply within 60 days of becoming eligible, you and your spouse may qualify for abbreviated underwriting (fewer health questions means it may be easier to be approved for coverage).



Federal Long Term Care Insurance

- Link to <http://www.LTCFEDS.com> for information and to request an application package, or call 1-800-LTCFEDS (1-800-582-3337).
- **New employees** have 60 days from the date of employment to complete the short application for enrollment.

The short application process is only available within the first 60 days following the date of your appointment.

Extensive information regarding the Federal Long Term Care Insurance program is available on their website.

Federal Long Term Care Insurance

- **Employees transferring** from one Federal agency to another, who are already enrolled in the LTC and pay through payroll deduction, are required to contact LTCFEDS at 1-800-582-3337 to report your change in employing Federal agencies and payroll office, and to pay any missed premiums. This is not a deduction that automatically transfers from one Federal agency to another. Please watch your Statements of Earnings and Leave for deductions.

Designation of Beneficiaries



You may designate a beneficiary, or beneficiaries, to receive payments upon your death for your life insurance, unpaid compensation, retirement contributions, and Thrift Savings Plan. You should complete designation forms **only** if you are not satisfied with the normal order of payment, which is:

- to your widow or widower
- if no widow/widower, to your children in equal shares
- if no children, to your parent(s)
- if no parent(s), to your estate
- if no estate, to your next of kin

Designation of Beneficiary forms are very important, but are often forgotten. Many employees submit the forms, but forget to update them if life circumstances change.

You should only complete these forms if you are **not** satisfied with the order of precedence listed here.

Designation of Beneficiaries



If you wish to designate other than the normal order of payment, please click below to complete the appropriate forms:

- SF-1152, Designation of Beneficiary for Unpaid Compensation
- SF-2808, Designation of Beneficiary for Civil Service Retirement System
- SF-3102, Designation of Beneficiary for Federal Employees Retirement System
- SF-2823, Designation of Beneficiary for Federal Employees Group Life Insurance:
- TSP-3, Designation of Beneficiary for Thrift Savings Plan:

[Designation of Beneficiary forms](#)

If you want to establish how certain benefits are to be paid, the designation of beneficiary forms listed should be completed, signed and witnessed by two individuals that are not assigned designees.

Designation of Beneficiaries



- The designation form for CSRS and TSP must be sent to the address listed on the form. Do not send those forms to Human Resources.
- The designation forms for FERS, FEGLI, and Unpaid Compensation should be mailed directly to the Benefits section of the Human Resources Operations in Minneapolis.
- If you choose to submit designation forms, you are responsible for their accuracy and completeness, and for keeping them up to date as life changes occur.

The original forms – these forms may not be faxed – should be mailed to the appropriate offices:

Designations for the Civil Service retirement System and the thrift Savings Plan should be sent to the address on each form.

All other forms may be sent to the Benefits section of HRO in Minneapolis.

Keep in mind, these designations are not valid until certified by the respective offices.

Questions?



- Please contact the Human Resources Operations Benefits Specialist serving your program, if you have questions regarding your new employee benefits:

[Contact Benefits](#)

Thank you and please remember to contact your Benefits Specialist for your new employee benefit questions!