## Member Self-Service Portal Enrollment - Dependent is No Longer a Full-Time Student

## **Disenroll from Dental and Vision Plans**

1. Once you've registered and logged into the Member Self-Service Portal, you'll be directed to the home page. Click View Detail under Life Events.

ACCESSIBILITY VIEW					2 COMMUNICATION CENTER NOTIFICATIONS MY ACCOUNT CONTACT US LOGOUT
	HI DONALD				
	Home				
		DONALD, her	e are some thin	gs you need to do next	4 ) 4 )
			8		
			UPDATE YOUR	EMAIL	
	tools My benefits \$40.89 Your total per-pay cost	\$0.00 \$40.89 YOUR PRE-TAX PER-PAYFOUR POS DEDUCTIONS DEDUCTIO	T. TAX PER PAY	LIFE EVENTS	
	Benefitz	Coverage Options	Coverage Details		
	Medicar	EUTF HMO Keiser Standard Medical (Including Re) w/ Chiro	Sef		
	Prescription Drug	No Coverage	No Caverage		
	Dentel	EUTF Dantal	Two Party	View details	
	Vision	EUTF Vision	Two Party		
	Life Insurance	EUTF Ufe Insurance	\$53,770		
	View Benefits Selections		Quick Actions		

2. Click **Start>** in the Dependent is No Longer a Full-time Student row.

Home

Enroll & Make Cha	anges	
UPDATE YOUR COVERAGE To make changes to your current selections and/or p your changes within a certain time period. EVENTS	ersonal information, choose the applicable link from the table. In some	cases, you may need to make
Description	Eligibility Period	Actions
Diseased due to Encollment in Other Courses	45 days before and 45 days after the super date	Start \
Disenroll due to Enrollment in Medicaid Coverage	60 days before and 60 days after the event date	Start >
Adoption	45 days of the event date	Start >
Birth	180 days of the event date	Start>
Civil Union	45 days of the event date	Start>
Death of Dependent	730 days of the event date	Start>
Dependent is No Longer a Full-time Student	45 days of the event date	Start>
Domestic Partnership	45 days of the event date	Start>
Guardianship	45 days of the event date	Start>
Leave of Absence Without Pay	45 days of the event date	Start >
Loss of Coverage	45 days before and 45 days after the event date	Start >
Loss of Medicaid Coverage	60 days before and 60 days after the event date	Start >
Marriage	45 days of the event date	Start >
Militany Losue of Absonce Mitheut Day	45 days of the event date	Start

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3. Window reminds you to change student status from "Yes" to "No" in the Family Step prior to removing child from dental and vision plans. Click **Continue**.

UPDATE YOUR COVER	AGE		
To make changes to your c your changes within a certa	urrent selections and/or pe ain time period.	rsonal information, choose the applicable link from the table. In some ca	ases, you may need to
EVENTS			
Description		Eligibility Period	Actions
Life Event	Dependent is No	b Longer a Full-time Student $ imes$	
Disenroll due to Enrollme	The numose of this enrollment event is to remove your ineligible dependent from your		Start >
Disenroll due to Enrollme	and vision plans. You mu Step prior to removing yo	st edit your dependent's Student Status from Y to N in the <b>Family</b> our dependent child from your dental and vision plans.	Start>
Adoption			Start >
Birth		Cancel Continue	Start>
Civil Union		45 days of the event date	Start >
Death of Dependent		730 days of the event date	Start >
Dependent is No Longer a	Full-time Student	45 days of the event date	Start >
Dava astia Davta avalaira		45 days of the event date	Start >

4. Enter event date then click Continue.

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Home			Depende Full-time	ent is No Longer a Student
	Enroll & Make Change		The time limit with of Dependent is No event date.	in which you may make your changes as a result. 9 Longer a Full-time Student is <b>45 days of the</b>
	UPDATE YOUR COVERAGE		ENTER THE EVENT D	ATE*
			ay need 12	15 2023
	EVENTS			
		Eligibility Period	Contin	ue Cancel
	Life Event			
	Diserval due to Enrollment in Other Coverage	45 days before and 45 days after the event date	Start.)	
		60 days before and 60 days after the event date	Start D	
		45 days of the event date	Stort)	
			Start)	
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			Start 3	
	Dependent is No Longer a Full-time Student	45 days of the event date	Start)	
			Start)	
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		45 days before and 45 days after the event date	Start)	
			Start >	
		45 days of the event date	Start)	
	An Image of a state of all research states (c) of their	set all the set of the second state.	Prove D	-

5. Under the dependent's name that is no longer a full-time student, click View Details.

ACCESSIBILITY VIEW				2 COMMUNICATION CENTER NOTIFICATIONS MY ACCOUNT CONTACT US LOGOUT
Home				۲
👪 Family	🗿 Health Plans	🗞 Life Insurance 🛛 🖉 Complete	your Enrollment	
		Dependent is No Longer a Full-time Str. <b>Family</b> Please review your family members ou remove family members if the informat enter all benefit leighbe dependents, e medical, prescription drug, dental and added or listed below to be enrolled in	dent - December 5, 2023 rently on file. You may add, update or tion displayed is not accurate. Please en if you are not errolling them in your or vision plans. Dependents must be coverage.	
		Add Fannily Member  DONALD DUCK  Relationship Myself D.O.B jan 1, 1980  View Details  Q Your employer has provided us ye enrollment.	Dillon Duck	
( Previous				(Net )

6. Under "Currently a full-time student?", select "No" and click Save.



## 7. Click **Next** in the bottom right corner.



8. Review health plans. The "Dependent Is No Longer a Full-Time Student" event applies to dental and vision plan enrollment only. Dependent children can be enrolled in medical and prescription drug plans until age 26, regardless of whether they are a full-time student or not. Click Next to continue.

ACCESSIBILITY VIEW					2 COMMUNICATION CENTER NOTIFICATIONS MY ACCOUNT CONTACT US LOGOUT
Home					۲
👪 Family	😈 Health Plans	🗞 Elfe Insurance 🛛 🖉 Com	lete your Enrollment		
		Dependent is No Longer a Full-time S Health Plans	tudent - December 5, 2023	Vition	Ĩ
			rug Dentar	Value	
		Important information     Medical     Iacknowledge that I have read, und binding arbitration and give up our membership in delivery of services Here	lerstood, and agree to the Kaiser Fou constitutional rights to a jury trial for or items. By clicking submit I underst	ndation Heal any claims a and this acti	Ith Plan arbitration agreements I, on behalf of myrolif, my heirs, relations: and envolved dependents, agree to, agricum Kaiser and its health care providers for alleged ideation of any duty sinting out of or related to on serves as my electronic agneture of agreement. Complete copy of the Arbitration Agreement is available
		Medical ①			
		Select who is covered	EUTF HMO Kaiser Standard Medical (Including Rx) w/ Chiro \$25.00 per pay	0	
< Previous		Cost \$33	per pay period: 00	s .	Employer cost per pay period: 1239.05 Size all benefits and costs

9. Prescription drug coverage is bundled with medical plans. Click Next to continue.

ACCESSIBILITY VIEW			2 COMMUNICATION CENTER NOTIFICATION	S MY ACCOUNT CONTACT US	LOGOUT
Home					۲
👪 Family	Health Plans	🗞 Life Insurance 😔 Complete your Enrollment			
		Dependent is No Longer a Full-time Student - December 5, 2023 Health Plans	Ę		
		Medical Prescription Drug Dental Vision			
		Important information     Prescription Drug Kaiser Non-Medicare and Medicare medical plans include Prescription Drugs. You cannot enrol in the EUTF PPD Prescription Drug Plan. Prescription Drug			
		Prescription Drug \$0 per pay			
_		No Coverage Option No Coverage Category Cost our cessore Cost our cessore Cost our cessore Cost our cessore Cost our cessore			
< Previous		cooper pay period:     employer cost per pay period:     133.00     1239.05     See all benefits and costs			iext >

10. Review dental plan enrollment. Dependent that is no longer a full-time student has a slash next to their name and is marked ineligible and no longer enrolled in the plan. The cost listed for each plan is per pay period. Click Next to continue.

ACCESSIBILITY VIEW		2 COMMUNICATION CENTER NOTIFICATIONS MY ACCOUNT CONTACT US LOBOUT	ľ
Home			
👪 Family	👸 Health Plans	🗞 Life Insurance 🛛 😔 Complete your Divuliment	
		Dependent is No Longer a Full-time Student - December 5, 2023 Health Plans	
		webcai Prescription only Demain Vision	ł
		Important Information     Dental According to the waiting period requirements for this plan, coverage will begin on December 16, 2023	
		Dental ①	1
		Select who is covered EUTF Dental O Kara Select was a selected by Select was a selected by Select was a selected by Selected Bara Selected Bar	
		Stitus Dack Child ST.16 per pay	ļ
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< Previous		Cost per pay pende: Employer cost per pay pende: \$33.00 \$239.05 \$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$	ļ

11. Review vision plan enrollment. Dependent that is no longer a full-time student has a slash next to their name and is marked ineligible and no longer enrolled in the plan. Click Next to continue.

ACCESSIBILITY VIEW			2 COMMUNICATION CENTER NOTIFICATIONS MY ACCOUNT CONTACT US LOGOUT
Home			۲
👪 Family	Health Plans	🗞 Life Insurance 🛛 🖓 Complete your Envolument	
		Dependent is No Longer a Full-time Student - December 5, 2023 Health Plans	<b>E</b>
		Medical Prescription Drug Dental Vision	
		Important information     Vision     According to the waiting period requirements for this plan, coverage will begin on December 16, 2023	
		Vision ()	
		Select who is covered EUTF Vision	
		Chid Stillen Duck \$0.84	
< Previous		Cost per pay period: \$33.00 \$23.05 \$55 see all possible costs	(100)

- 12. For State and County of Maui employees, review premium conversion plan selection then click Next. All other employees, skip to step 13.
- 13. Review life insurance enrollment then click Next.
- 14. Review enrollment changes, cost summary and terms and conditions. If you agree to the terms and conditions, check the box next to "I agree to the terms and conditions" and then click Complete Enrollment.
- 15. Your enrollment request has been submitted. There are no required supporting documents for this event. Review enrollment and COBRA documents from the homepage under Communication Center in the upper black navigation bar. Click Next to take a survey or to navigate back to the homepage.