

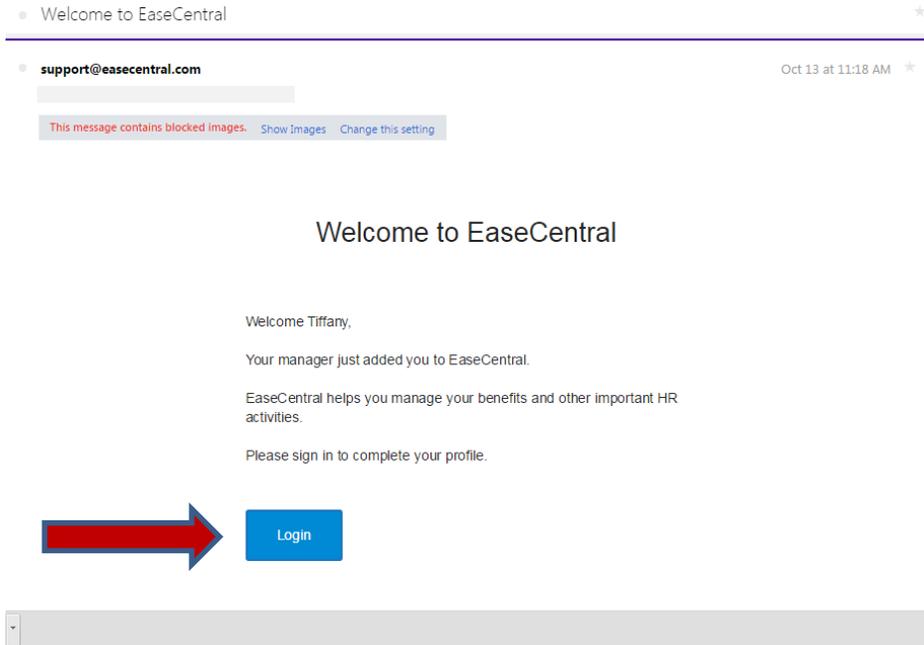
Welcome to EaseCentral!

EaseCentral will allow you to complete your benefits elections online via a secure portal. The following guide will walk you through the basics of completing your enrollment.

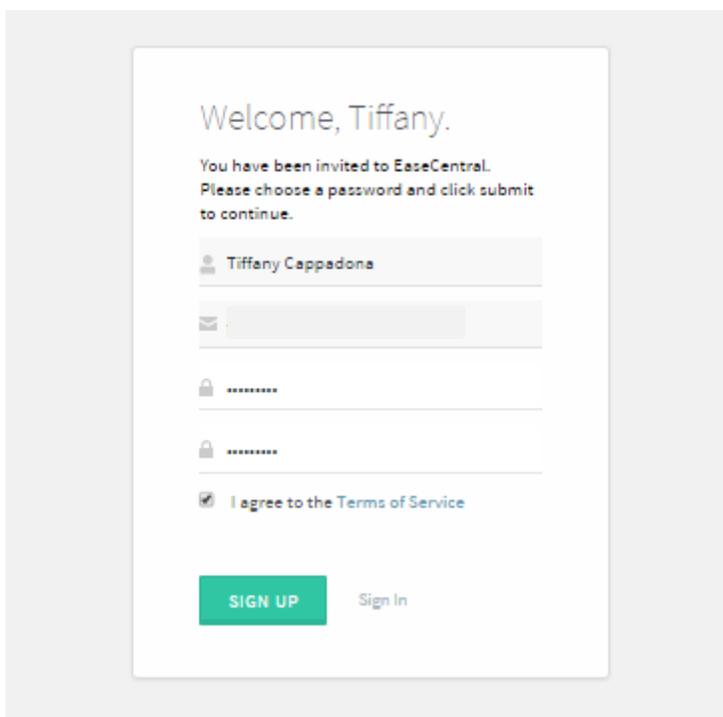
If you have questions, please contact your Filice representative.

Getting Started

You will receive an email with a link to your login page:

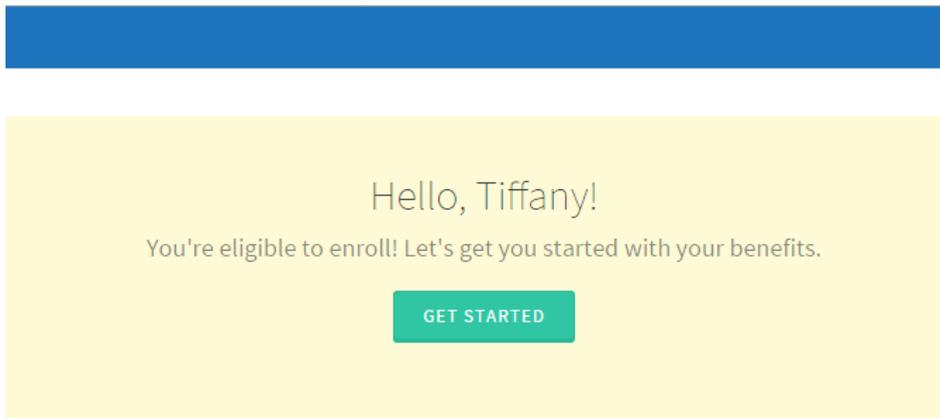


You will be directed to your login page and asked to set up a password using the following structure:



- Passwords must contain:*
- One lower case letter
 - One upper case letter
 - One special character or number
 - Contain a minimum of 8 characters.

Once you are logged in, you will be directed to a welcome page.
Click on "GET STARTED" to begin your enrollment process.



Hello, Tiffany!

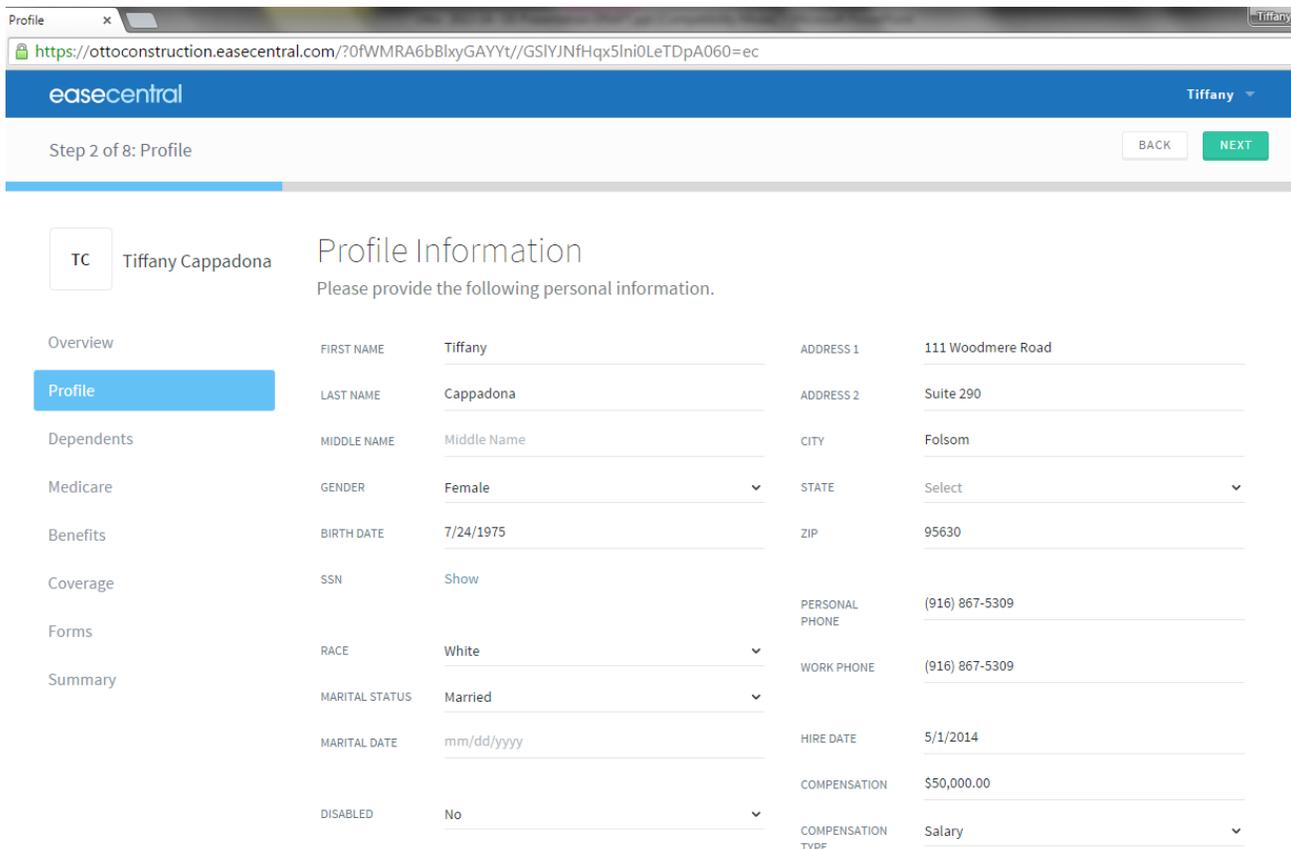
You're eligible to enroll! Let's get you started with your benefits.

[GET STARTED](#)

- 
Document Library
- 
Manage Benefits
- 
View Profile

Completing Your Profile & Enrolling

You will be directed to your profile page. Please complete or review the information there to move on to enrolling.



Profile Information

Please provide the following personal information.

FIRST NAME	Tiffany	ADDRESS 1	111 Woodmere Road
LAST NAME	Cappadona	ADDRESS 2	Suite 290
MIDDLE NAME	Middle Name	CITY	Folsom
GENDER	Female	STATE	Select
BIRTH DATE	7/24/1975	ZIP	95630
SSN	Show	PERSONAL PHONE	(916) 867-5309
RACE	White	WORK PHONE	(916) 867-5309
MARITAL STATUS	Married	HIRE DATE	5/1/2014
MARITAL DATE	mm/dd/yyyy	COMPENSATION	\$50,000.00
DISABLED	No	COMPENSATION TYPE	Salary

You will be prompted to add your dependents. Please include the SSN and date of birth for each covered member.

Step 1

easecentral COMPANIES REPORTS Tiffany

Otto Construction > Employees > Tiffany Cappadona

TC Tiffany Cappadona Dependents ADD DEPENDENT

Profile

Dependents

Benefits

Documents

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NO DEPENDENTS HAVE BEEN SPECIFIED

Step 2

easecentral COMPANIES REPORTS Tiffany

Otto Construction > Employees > Tiffany Cappadona

TC Tiffany Cappadona Dependents ADD DEPENDENT

Profile

Dependents

Benefits

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Add Dependent

FIRST NAME First Name

LAST NAME Last Name

BIRTH DATE mm/dd/yyyy

RELATIONSHIP Select

ADD DEPENDENT CANCEL

Step 3

easecentral COMPANIES REPORTS Tiffany

Otto Construction > Employees > Tiffany Cappadona

TC Tiffany Cappadona Dependents Details DELETE DEPENDENT BACK TO DEPENDENTS

Please provide the following detailed information.

Profile

Dependents

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FIRST NAME Daphen

LAST NAME Cappadona

MIDDLE NAME Middle Name

GENDER Select

BIRTH DATE (4) 1/1/2011

SSN 111-22-3333

RELATIONSHIP Child

DISABLED Select

ADDRESS RESIDES AT A DIFFERENT ADDRESS

You may have a screen come up asking if you are eligible for Medicare. If you are, please complete that section, otherwise please move on to enrolling for your plans. Here is an example of enrolling for Medical:

Your screen will come up looking like this. **To enroll move the circle next to “Waived” over to the right for each family member you wish to elect coverage for.**

easecentral Tiffany

Step 5 of 8: Benefits BACK NEXT

TC Tiffany Cappadona **Medical Plan**

Please select a medical plan that best meets your financial and health care needs.

Overview
Profile
Dependents
Medicare
Benefits
Coverage
Forms
Summary

Who is covered?

Waived Tiffany Cappadona (Employee)

Waived Daphne Cappadona (Child)

Waiving Dependents Not Entered

You have specified that you are Married but you have not provided any Spouse information. Insurance carriers assume your Spouse is waiving.

Waive Spouse

BACK NEXT

Benefit Summary

Medical

Dental
Employee, 1 Child
\$45.31 per pay period, pre-tax

Voluntary Vision
Employee
\$0.00 per pay period

TOTAL COST
\$45.31

Once you have selected who to cover, you can select your plan:

easecentral Tiffany

COMPANIES REPORTS

Otto Construction > Employees > Tiffany Cappadona < >

TC Tiffany Cappadona **Medical Plan**

Please select a medical plan that best meets your financial and health care needs.

Profile
Dependents
Benefits
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I-9

Who is covered?

Covered Tiffany Cappadona (Employee)

Waived Daphne Cappadona (Child)

Choose your Medical Plan

Plan	Premium	Details
<input checked="" type="checkbox"/> Sutter Health Platinum HMO	\$0.00	Show
<input type="checkbox"/> Blue Shield Gold PPO 750 (Off Exchange) Plan Summary- Blue Shield PPO Gold 750	\$0.00	Show

Benefit Summary

Medical

Dental
Not yet specified

Voluntary Vision
Not yet specified

TOTAL COST
\$0.00

[Download Enrollment Forms](#)
[Download Enrollment History](#)
[View Enrollment Summary](#)

As you scroll further down the page, you can see when your benefits begin. If you are enrolling for coverage on a plan that requires you select a primary care physician (HMO), you will need to scroll further down the page and select your doctor for each family member as instructed. You may need to look up your provider online prior to completing this portion of your enrollment. Once you have completed this page, select "Next" to move on to the next benefit plan to enroll in.

Plan Information

COVERAGE EFFECTIVE DATE 12/1/2015

Please remember to select a primary care physician. You can access a list of participating providers here www.sutterhealthplus.org

Primary Care Clinician (PCC) Information

Person	PCC Id	PCC Name	Current PCC?
Tiffany Cappadona	<input type="text" value="Id or #"/>	<input type="text" value="Name or Phone"/>	<input type="checkbox"/>
Daphne Cappadona	<input type="text" value="Id or #"/>	<input type="text" value="Name or Phone"/>	<input type="checkbox"/>

Admin Override

EFFECTIVE DATE

\$0.00
per pay period, pre-tax

As you continue your enrollment in the available plans, you will see your employee cost on the right hand side of the screen.

easescentral COMPANIES REPORTS Tiffany

Otto Construction > Employees > Tiffany Cappadona

TC Tiffany Cappadona **Dental Plan**

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Who is covered?

- Covered Tiffany Cappadona (Employee)
- Covered Daphne Cappadona (Child)

Choose your Dental Plan

Plan	Premium	Details
<input checked="" type="checkbox"/> Unum PPO Dental	\$45.31	Show

Plan Information

COVERAGE EFFECTIVE DATE 12/1/2015

Benefit Summary

Medical
Not yet specified

Dental

Voluntary Vision
Not yet specified

TOTAL COST
\$45.31

[Download Enrollment Forms](#)
[Download Enrollment History](#)
[View Enrollment Summary](#)

Once you have selected all of your plans, if you are missing any information it will not let you proceed and submit your enrollment. You will see a screen similar to this which will tell you what information is required:

Employee Forms x Tiffany

https://ottoconstruction.easescentral.com/?0fWMRA6bBlxyGAYYt//GSnOSzEFHS8JQQ6Zvh6uHxmk=ec

easescentral Tiffany

Step 7 of 8: Forms BACK NEXT

TC Tiffany Cappadona **Missing Information**

You must provide the following information before you can review your enrollment forms and finish.

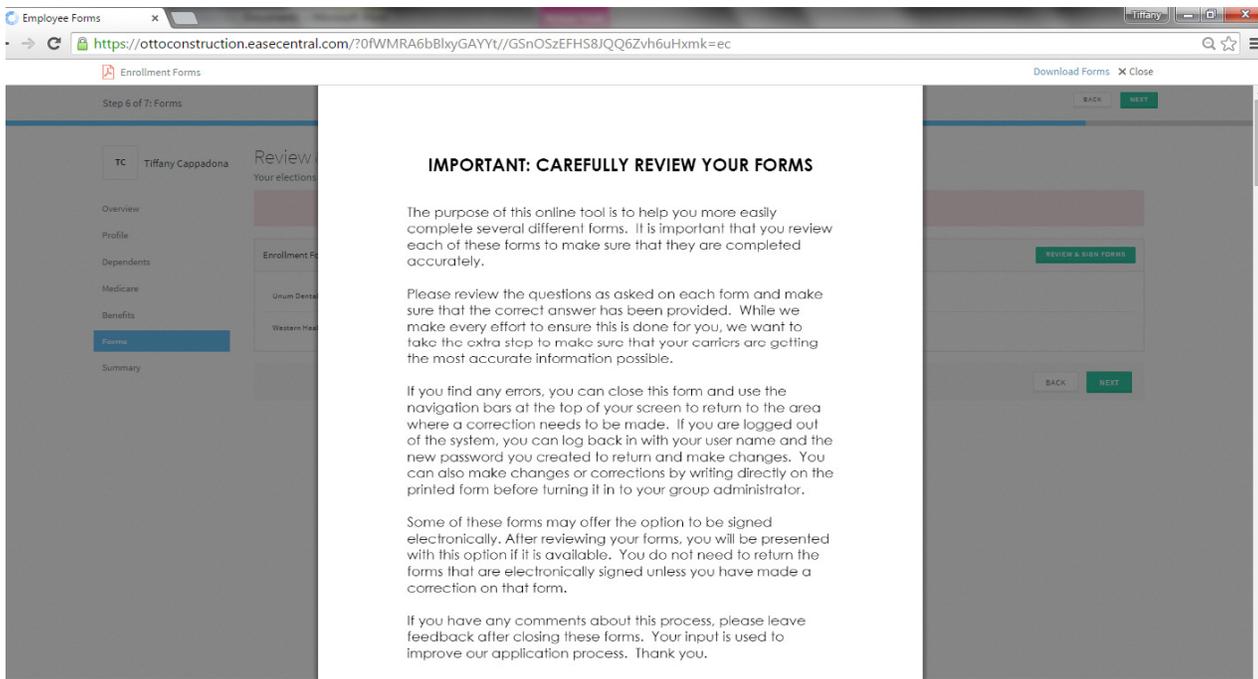
Required Information

- Tiffany Cappadona is missing required information: State, Marital Date, Job Title
- Daphne Cappadona is missing required information: Gender, Student Status
- Tiffany Cappadona - Western Health Advantage Gateway 20 Platinum is missing required information: Primary Care Clinic Id
- Daphne Cappadona - Western Health Advantage Gateway 20 Platinum is missing required information: Primary Care Clinic Id, Primary Care Clinic Name

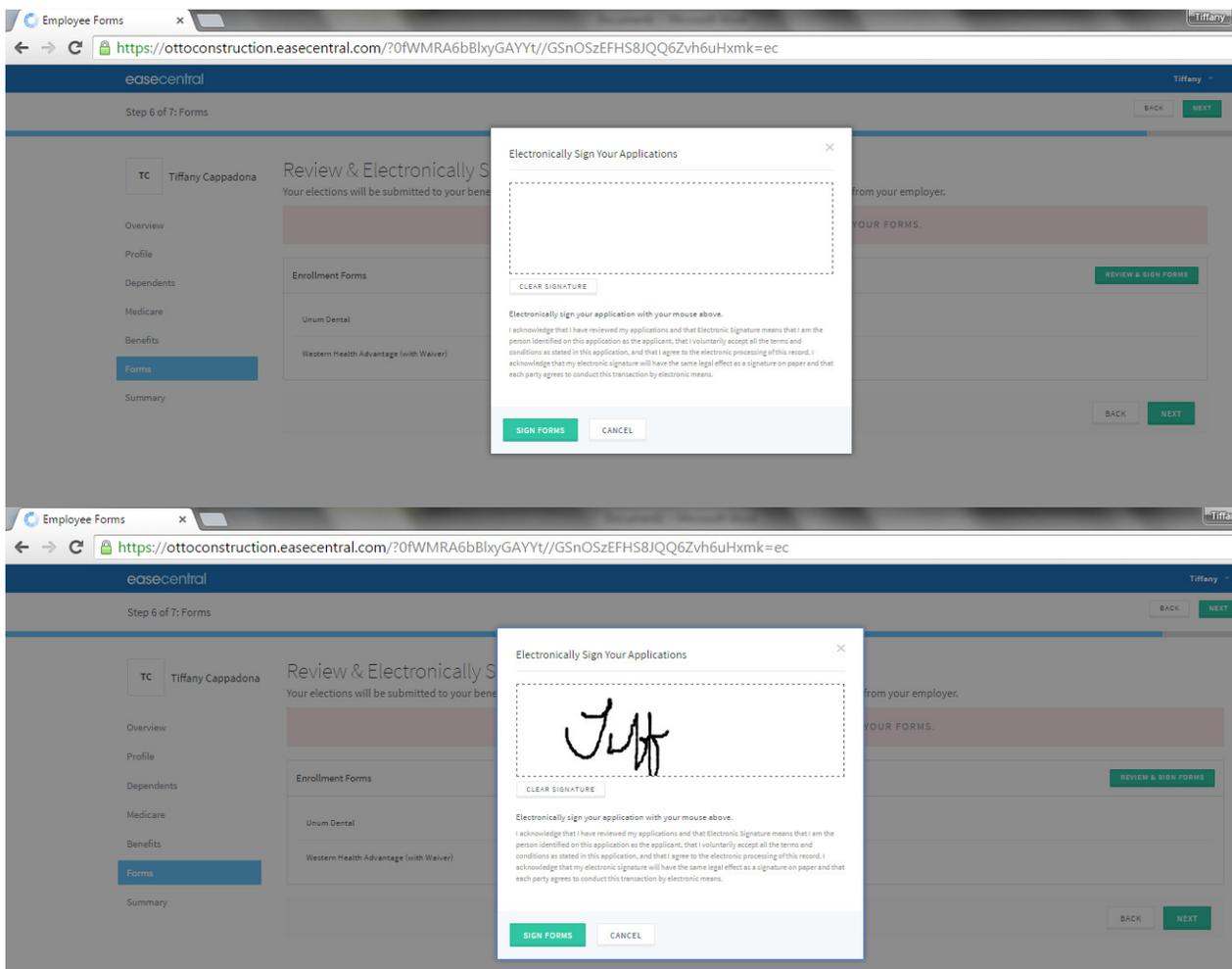
BACK NEXT

Overview
Profile
Dependents
Medicare
Benefits
Coverage
Forms
Summary

If all of your information has been completed and you have finished making your plan elections, you will be asked to review your elections and the enrollment forms that have been populated by the system:



When you have completed the review of your forms, you will be prompted to sign them electronically:



You will see that your forms have been signed and saved. Click next to move on to the final screen:

The screenshot shows the 'Review & Electronically Sign Your Enrollment Forms' screen. The user is Tiffany Cappadona. A green banner at the top states: 'GREAT! YOUR FORMS HAVE BEEN SIGNED. CLICK NEXT TO CONTINUE.' Below this, there is a table of enrollment forms:

Enrollment Forms	REVIEW & SIGN FORMS
Unum Dental	
Western Health Advantage (with Waiver)	

Navigation buttons 'BACK' and 'NEXT' are visible at the bottom right of the form list.

You will have the opportunity to print a summary of your enrollment here when complete:

The screenshot shows the 'Summary' screen. Below the title 'Summary', it says: 'Below is the summary of your benefit selections.' A red arrow points to a 'PRINT' button on the right side of the page. Below this, there is a note: 'Note that you are required to electronically sign your forms. If you have not yet done so click here.'

The summary is divided into two main sections:

Family Information

Name	Relationship	Gender	Birth Date	Tobacco User	Address
Tiffany C. Cappadona	Employee	Female	7/24/1975 (40)		111 Woodmere Road, Suite 290, Folsom, CA 95630
Daphne Cappadona	Child	Female	1/1/2011 (4)		Same as Employee

Benefits Information

Plan	Election Details	Waiver Details	Employee Cost
Medical Western Health Advantage Gateway 20 Platinum Effective: 12/1/2015	Employee	1 Child, Spouse; Reason(s): Spouse's group plan	
Dental Unum PPO Dental Effective: 12/1/2015	Employee, 1 Child	Spouse; Reason(s): Spouse's group plan	\$45.31, Pre-Tax
Voluntary Vision VSP PPO Vision Effective: 12/1/2015	Employee	1 Child, Spouse; Reason(s): Spouse's group plan	
Total			\$45.31, Pre-Tax

Navigation buttons 'BACK' and 'NEXT' are visible at the bottom right of the summary table.