

Online Services – Benefit Enrollment Online for Employees

It is now possible for employees to enroll or change their OCC benefits online through Online Services. Online Services is a secure Internet site that provides a web-based interface to information contained in OCC's database.

How do I get there?

There are two options to access Online Services.

- On any OCC computer, navigate to **Infomart**, if it is not already set to your homepage. Select **Online Services** in the upper right-hand corner.
- Or, go to OCC's home page (<http://www.oaklandcc.edu>) and select **Online Services** from the left-hand navigational links.

How do I find out my username?

1. Click on **Log in**.



2. Enter your **OCC network User Name** and **Password**. If you are unable to login, please contact the IT Support Center at (248) 341-2100.

A screenshot of the "Log In" page on the Oakland Community College Online Services website. The page has a green header with the college logo, "Oakland Community College Online Services", and links for "LOG IN", "MAIN MENU", and "CONTACT US". Below the header, there is a "Log In" section with two input fields: "User Name:" and "Password:". Arrows point to these fields. Below the "Password:" field is a "Show Hint" checkbox. At the bottom of the section is a "SUBMIT" button.

3. Click **Submit**.

Online Services – Benefit Enrollment Online for Employees

4. Select **Employees** from the right-hand side.

Oakland Community College
Online Services

[CHANGE PASSWORD](#) | [LOG OUT](#) | [MAIN MENU](#) | [CONTACT US](#)

Welcome Cissie Patterson

Online Services gives students, staff, and the community access to our databases.

Please Log In to see additional menu options.

Online Services Hours
Monday - Saturday, 7:00 AM - 11:45 PM
Sunday, Noon - 11:45 PM

Need Help?
Click the Help tab found on most Online Services pages or search the [Frequently Asked Questions](#). For additional assistance, phone (248) 341-2200, Monday - Thursday 8:30 AM - 6:00 PM, Friday 8:00 AM - 5:00 PM.

Professional Education

Students

Faculty

Employees

Administration

5. The **Online Services for Employees** menu appears. You will see two new additions to the Employee menu, listed under 'Employee Profile' – *Current Benefits* and *Benefit Enrollment*.

OAKLAND COMMUNITY COLLEGE

test011012 v3.1.6
created January 10, 2012

[Change Password](#) | [Log Out](#) | [Main Menu](#) | [Employees Menu](#) | [Contact Us](#)

Employees - Online Services for Employees Menu Welcome John Doe

The following links may display confidential information.

User Account

- [I'm New to Online Services](#)
- [What's my User Name?](#)
- [What's my password?](#)
- [Change Password](#)
- [Change/Add E-mail](#)
- [Register Your Security Questions](#)

Financial Information

- [Bank Information \(No Foreign Banks\)](#)
- [E-Check Direct Deposit FAQ](#)
- [Budget Summary](#)
- [Budget Selection](#)

Instructions

- [Tutorial for Employees](#)
- [Tutorial for Organization/Budget Managers](#)

Employee Profile

- [Position Summary](#)
- [Leave Plan Summary](#)
- [My Stipends](#)
- [Pay Advices](#)
- [W-2 Statements - 1/1/2011](#)
- [Current Benefits](#)
- [Benefit Enrollment](#)

Employee Resources

- [Outlook Web Access \(OWA\)](#)
- [PDTC Training History](#)

Message Alerts

- [Sign Up for Message Alerts](#)

Employee Profile

The Employee Profile offers 2 areas to explore for OCC employee benefits:


Current Benefits – List of benefits you are currently enrolled in.

Benefit Enrollment– Your link to Benefit Enrollment Online.

Online Services – Benefit Enrollment Online for Employees

Current Benefits

Choose **Current Benefits**. A list of those benefits for which you are currently enrolled will appear.

 OAKLAND COMMUNITY COLLEGE®

test011012 v3.1.6
created January 10, 2012

Change Password | Log Out | Main Menu | Employees Menu | Help | Contact Us

Employees>Welcome John Doe

Current Benefits

Current Benefits	Coverage/ Participation	Dependents	Health Care Provider Information	Beneficiaries
Aetna Single Coverage. Cost Sharing Required.	Employee - \$56.48			
College Provided Life Ins \$70,000	Employee			
Dental Core- \$1000/\$2000 Ortho- 1 Person (No Cost)	Employee - \$0.00			
Long Term Disability 60%	Employee			
Short Term Disability 60%	Employee			
Vision Core \$65 Frames/\$115 Contacts- 1 Person	Employee - \$0.00			


Additional Information

This screen indicates the current benefit, coverage/participation cost and dependents included on the plan.

Click **Employees Menu** to return to the Employee Profile Menu.

Benefit Enrollment

Choose **Benefit Enrollment**. The Benefit Enrollment screen will appear.

 OAKLAND COMMUNITY COLLEGE®

test011012 v3.1.6
created January 10, 2012

Change Password | Log Out | Main Menu | Employees Menu | Help | Contact Us

Employees>Welcome John Doe

Benefit Enrollment

Welcome to Benefit Enrollment Online. This benefit plan period is from January 1 through December 31.

Current Benefits	Coverage or Participation Levels	Dependents	Available During This Enrollment Period
Aetna Single Coverage. Cost Sharing Required.	Employee - \$56.48		Yes
College Provided Life Ins \$70,000	Employee		Yes
Dental Core- \$1000/\$2000 Ortho- 1 Person (No Cost)	Employee - \$0.00		Yes
Long Term Disability 60%	Employee		Yes
Short Term Disability 60%	Employee		Yes
Vision Core \$65 Frames/\$115 Contacts- 1 Person	Employee - \$0.00		Yes

☒ Enroll or Change Benefits
☐ Manage Dependents
☐ Proceed to Enrollment Completion

Continue

Online Services – Benefit Enrollment Online for Employees

Your Current Benefit enrollment is listed on this screen. It includes the current benefits, coverage/participation cost and dependents included on the plan.

The screenshot shows the 'Benefit Enrollment' page for an employee named John Doe. The page header includes the Oakland Community College logo and navigation links: Change Password, Log Out, Main Menu, Employees Menu, Help, and Contact Us. The page title is 'Benefit Enrollment' and it includes a welcome message: 'Welcome to Benefit Enrollment Online. This benefit plan period is from January 1 through December 31.'

The main content area displays a table of current benefits:

Current Benefits	Coverage or Participation Levels	Dependents	Available During This Enrollment Period
Aetna Single Coverage. Cost Sharing Required.	Employee - \$56.48		Yes
College Provided Life Ins \$70,000	Employee		Yes
Dental Core- \$1000/\$2000 Ortho- 1 Person (No Cost)	Employee - \$0.00		Yes
Long Term Disability 60%	Employee		Yes
Short Term Disability 60%	Employee		Yes
Vision Core \$65 Frames/\$115 Contacts- 1 Person	Employee - \$0.00		Yes

Below the table, there are three radio buttons for selecting an action:

- ☒ Enroll or Change Benefits
- ☐ Manage Dependents
- ☐ Proceed to Enrollment Completion

A 'Continue' button is located below the radio buttons.

The footer of the page includes copyright information: Copyright 2010 Oakland Community College, 2480 Opdyke Road, Bloomfield Hills, MI 48304, 248.341.2000. It also includes links for Privacy Statement, Vision, Mission, Purposes, Goals, Accreditations, and Webmaster.

On the bottom of the screen are three radio buttons:

☒ Enroll or Change Benefits – To enroll or change your current benefits, select this option and click on Continue.

☐ Manage Dependents – To manage your dependents, select this option and click on Continue.

☐ Proceed to Enrollment Completion – (*Not available this enrollment period.*) If you do not want to change your benefits for the year, select this option and click on Continue.

Online Services – Benefit Enrollment Online for Employees

1. **Enroll or Change Benefits** – Select those benefits that you wish to enroll in (or change) for this election period.

OAKLAND COMMUNITY COLLEGE®

test011012 v3.1.6
created January 10, 2012

Change Password | Log Out | Main Menu | Employees Menu | Help | Contact Us

Employees Welcome John Doe

Select Benefits to Enroll or Change

Select All That Apply	Benefit Selections
<input type="checkbox"/>	Medical Insurance
<input type="checkbox"/>	Dental Insurance
<input type="checkbox"/>	Vision
<input type="checkbox"/>	College Provided Life Ins
<input type="checkbox"/>	Short-Term Disability
<input type="checkbox"/>	Long Term Disability
<input type="checkbox"/>	Health Care FSA
<input type="checkbox"/>	Dependent Flex Spending Account
<input type="checkbox"/>	Adoption Flex Spending

Continue

Change Password | Log Out | Main Menu | Employees Menu | Help | Contact Us

Copyright 2010 Oakland Community College, 2400 Opdyke Road, Bloomfield Hills, MI 48304, 248.341.2000
PRIVACY STATEMENT | VISION, MISSION, PURPOSES, GOALS | ACCREDITATIONS | WEBMASTER

2. The first benefit selection form will appear. In the picture below, the current medical insurance benefits are listed along with cost per pay.

Employees

Benefit Selection

Current Medical Insurance Benefits	Cost Per Pay
Aetna Single Coverage. Cost Sharing Required.	Employee - \$56.48

Please review your current medical benefit and select your choice for the current year.
For benefit and rate information click on the links below.

Select One	Medical Insurance Benefits	Coverage or Participation Levels	Rate Information
<input type="radio"/>	Aetna Single Coverage. Cost Sharing Required.	Employee	
<input type="radio"/>	Aetna 2 Person Coverage. Cost Sharing Required.	Employee + one other	
<input checked="" type="radio"/>	Aetna Family Coverage. Cost Sharing Required.	Family	
<input type="radio"/>	Aetna Option1- Single - \$600 Refund	Employee	
<input type="radio"/>	Aetna Option1- 2 Person- \$600 Refund	Employee + one other	
<input type="radio"/>	Aetna Option1- Family- \$600 Refund	Family	
<input type="radio"/>	Medical Opt Out-Non Faculty	Opt Out	

<input checked="" type="radio"/>	Save information and go to the next form
<input type="radio"/>	Do not save changes and go to the next form

SUBMIT

3. Select the medical insurance benefit you wish to enroll in for this election period.
4. Make sure '**Save information and go to the next form**' is selected. Select **Submit**.

Online Services – Benefit Enrollment Online for Employees

Employees

Dependents for This Benefit

Benefit
Aetna Family Coverage, Cost Sharing Required - Family

You do not have any dependents on file. To add a dependent, select the Add or Manage Dependents option below.

☐ Save information and go to the next form
☒ Add or Manage Dependents
☐ Do not save changes and go to the next form

SUBMIT

5. If you have selected an option with dependents, you will need to add your dependents for this benefit. Click Submit.

Employees

Dependents

Select	Name	Address	Gender	Relationship to Employee	Birth Date	SSN
<input checked="" type="radio"/>	ADD NEW					
<input type="radio"/>	Return to the Dependents for This Benefit form					

SUBMIT

6. Select “ADD NEW” to add new dependents to this benefit. Click Submit.

Employees

Maintain Dependent

*=Required

Enter the name and demographic information for an individual below.

Prefix
First Name *
Middle Name
Last Name *
Suffix
Relationship to Employee *
Birth Date * SSN * Gender *

Enter the address data information below.

Address Lines

City State Zip Code

☒ Save information and go to the next form
☐ Do not save changes and go to the next form

SUBMIT

Online Services – Benefit Enrollment Online for Employees

- Complete the required fields and make sure 'Save information and go to the next form' is selected and click Submit.

Employees

Maintain Dependent

*Required

Enter the name and demographic information for an individual below.

Prefix
 First Name *
 Middle Name
 Last Name *
 Suffix
 Relationship to Employee *
 Birth Date * SSN * Gender *

Enter the address data information below.

Address Lines

 City State Zip Code

☒ Save information and go to the next form
☐ Do not save changes and go to the next form

SUBMIT

- You should see the added dependent listed on the screen. Select 'ADD NEW' to add additional dependents (repeat steps 6-8). If you are finished adding dependents, make sure 'Save information and go to the next form' is selected and click Submit.

Employees

Dependents

Select	Name	Address	Gender	Relationship to Employee	Birth Date	SSN
<input type="radio"/>	Ms. Jane E. Doe	123 Treetops Lane Auburn Hills MI 48326	F	Spouse	01/01/79	123-45-6789
<input type="radio"/>	ADD NEW					
<input checked="" type="radio"/>	Return to the Dependents for This Benefit form					

SUBMIT

- You will see the dependents you have added listed on the screen. Select the dependents you wish to add to this benefit (medical). Make sure 'Save information and go to the next form' is selected and click Submit.

Employees

Dependents for This Benefit

Benefit
 Aetna Family Coverage, Cost Sharing Required - Family

Select	Dependent Name	Relationship to Employee	Full Time Student
<input checked="" type="checkbox"/>	Ms. Jane E. Doe	Spouse	No
<input checked="" type="checkbox"/>	Miss Jennifer L. Doe	Child	No
<input checked="" type="checkbox"/>	Mr. Jimmy D Doe	Child	No

☒ Save information and go to the next form
☐ Add or Manage Dependents
☐ Do not save changes and go to the next form

SUBMIT

Online Services – Benefit Enrollment Online for Employees

10. Once you click Submit, the next benefit form will appear.

Benefit Selection

Current Dental Insurance Benefits Cost Per Pay
Dental Core- \$1000/\$2000 Ortho- 1 Person (No Cost) Employee - \$0.00

Please review your current dental benefit and select your choice for the current year.
For rate and benefit information click on the links below.

Select One	Dental Insurance Benefits	Coverage or Participation Levels	Rate Information
<input checked="" type="radio"/>	Dental Core- \$1000/\$2000 Ortho- 1 Person (No Cost)	Employee	
<input type="radio"/>	Dental Core- \$1000/\$2000 Ortho- 2 Person (No Cost)	Employee + one other	
<input type="radio"/>	Dental Core- \$1000/\$2000 Ortho - Family (No Cost)	Family	
<input type="radio"/>	Dental Option I- \$1000/\$3000 Ortho - 1 Person	Employee	
<input type="radio"/>	Dental Option I- \$1000/\$3000 Ortho - 2 Person	Employee + one other	
<input type="radio"/>	Dental Option I- \$1000/\$3000 Ortho - Family	Family	
<input type="radio"/>	Dental Option II- \$1200/\$2000 Ortho - 1 Person	Employee	
<input type="radio"/>	Dental Option II- \$1200/\$2000 Ortho - 2 Person	Employee + one other	
<input type="radio"/>	Dental Option II- \$1200/\$2000 Ortho - Family	Family	
<input type="radio"/>	Dental Opt Out - \$150 Refund - Non-Faculty	Opt Out	

☒ Save information and go to the next form
☐ Do not save changes and go to the next form

SUBMIT

11. Select the benefit you wish to enroll in for this election period.

12. Make sure **'Save information and go to the next form'** is selected. Select **Submit**.

13. Once again, you will see the dependents you have added listed on the screen. Select the dependents you wish to add to this benefit (i.e. dental). Make sure *'Save information and go to the next form'* is selected and click Submit.

Dependents for This Benefit

Benefit
Dental Core- \$1000/\$2000 Ortho - Family (No Cost) - Family

Select	Dependent Name	Relationship to Employee	Full Time Student
<input checked="" type="checkbox"/>	Ms. Jane E. Doe	Spouse	No
<input checked="" type="checkbox"/>	Miss Jennifer L. Doe	Child	No
<input checked="" type="checkbox"/>	Mr. Jimmy D. Doe	Child	No

☒ Save information and go to the next form
☐ Add or Manage Dependents
☐ Do not save changes and go to the next form

SUBMIT

14. Repeat steps 10-13 for each type of benefit (i.e. vision, life insurance, short-term disability & long-term disability.)

15. You will then need to make a selection for Health Care FSA (flexible spending account) & Dependent Care FSA benefits.

Online Services – Benefit Enrollment Online for Employees

16. You may select to opt out of the Health Care FSA or you select to enroll in Health Care Flex Spending (minimum of \$120 or maximum of \$2,500 per year.)

Benefit Selection

Current Health Care FSA Benefits		Cost Per Pay	
You are currently not enrolled in any benefits.			
Pending Elections for This Enrollment Period		Enrollment Action	Cost Per Pay
Health Care Flex Spending, Min \$120-Max \$2500		Enroll	Flex Spending - Annual: \$2,500.00; Pay Period: \$100.00

☐ Opt out of Health Care FSA

Select One	Health Care FSA Benefits	Coverage or Participation Levels	Rate Information
<input checked="" type="checkbox"/>	Health Care Flex Spending, Min \$120-Max \$2500	Flex Spending	

☒ Save information and go to the next form
☐ Do not save changes and go to the next form

SUBMIT

17. In the above example, John Doe opted to participate in the Health Care FSA Benefits. The 'Enter Annual Flexible Spending Amount' screen appears. Enter the annual amount you wish to put in your FSA (minimum \$120, maximum \$2,500).

Enter Annual Flexible Spending Amount

Flexible Spending Benefit	Maximum Amount Allowed	Number of Pay Periods	Annual Amount
Health Care Flex Spending, Min \$120-Max \$2500 - Flex Spending	\$5,000.00	25	2,500.00

☒ Save information and go to the next form
☐ Do not save changes and go to the next form

SUBMIT

18. Repeat steps 16-17 for Dependent Care FSA & Adoption Care FSA benefits.
19. Once you have completed all of the benefit forms, you will be taken to the Enrollment Confirmation form. Review this form carefully to ensure all of your benefit selections have been saved.

Online Services – Benefit Enrollment Online for Employees

Enrollment Confirmation

Pending Elections for This Benefit Enrollment	Enrollment Action	Coverage or Participation Levels	Dependents
Adoption Flex Spending	Opt Out		
Aetna Single Coverage, Cost Sharing Required.	Cancel	Employee	
Aetna Family Coverage, Cost Sharing Required.	Enroll	Family	Jane Doe, Jennifer Doe, Jimmy Doe
Dental Core- \$1000/\$2000 Ortho- 1 Person (No Cost)	Cancel	Employee	
Dental Core- \$1000/\$2000 Ortho - Family (No Cost)	Enroll	Family	Jane Doe, Jennifer Doe, Jimmy Doe
Vision Core \$65 Frames/\$115 Contacts- 1 Person	Cancel	Employee	
Vision Core \$65 Frames/\$115 Contacts- Family	Enroll	Family	Jane Doe, Jennifer Doe, Jimmy Doe
College Provided Life Ins \$70,000	Keep/Update	Employee	
Short Term Disability 60%	Keep/Update	Employee	
Long Term Disability 60%	Keep/Update	Employee	
Health Care Flex Spending, Min \$120-Max \$2500	Enroll	Flex Spending - Annual: \$2,500.00; Pay Period: \$100.00	
Dependent Care Flex Spending \$520 Min/\$5,000 Max	Enroll	Employee - Annual: \$5,000.00; Pay Period: \$200.00	

☐ Save Choices and Complete Later

☐ Save and go back to make other selections or corrections

☐ Manage Dependents

☒ Ready to sign

After confirming your elections, check "Ready to Sign" and "Electronic Signature for Final Enrollment" to complete the benefit enrollment process.

☒ Electronic Signature for Final Enrollment

SUBMIT

20. When you are ready to confirm your selections, you have four choices:

- **Save Choices and Complete Later** (this does not submit anything to HR.)
- **Save and go back to make other selections or corrections** (this does not submit anything to HR.)
- **Manage Dependents** (this is used to add or change dependent information. This does not submit anything to HR.)
- **Ready to Sign** (This option is used when all is correct and you want to **submit your selections to HR.**)

21. After confirming your selections, check "Ready to Sign" and then check the box next to Electronic Signature for Final Enrollment. Then click on Submit.

22. If you have any errors, or if information is missing, you will get the following screen:

Enrollment Confirmation

Your electronic signature cannot be accepted until the errors below are corrected. Please select "Save and go back to make other selections or corrections."
You must enter the appropriate number of dependents for Aetna Family Coverage, Cost Sharing Required..

Pending Elections for This Benefit Enrollment	Enrollment Action	Coverage or Participation Levels	Dependents
Adoption Flex Spending	Opt Out		
Aetna Single Coverage, Cost Sharing Required.	Cancel	Employee	
Aetna Family Coverage, Cost Sharing Required.	Enroll	Family	
Dental Core- \$1000/\$2000 Ortho- 1 Person (No Cost)	Cancel	Employee	
Dental Core- \$1000/\$2000 Ortho - Family (No Cost)	Enroll	Family	Jane Doe, Jennifer Doe, Jimmy Doe
Vision Core \$65 Frames/\$115 Contacts- 1 Person	Cancel	Employee	
Vision Core \$65 Frames/\$115 Contacts- Family	Enroll	Family	Jane Doe, Jennifer Doe, Jimmy Doe
College Provided Life Ins \$70,000	Keep/Update	Employee	
Short Term Disability 60%	Keep/Update	Employee	
Long Term Disability 60%	Keep/Update	Employee	
Health Care Flex Spending, Min \$120-Max \$5,000	Enroll	Flex Spending - Annual: \$2,500.00; Pay Period: \$100.00	
Dependent Care Flex Spending \$520 Min/\$5,000 Max	Enroll	Employee - Annual: \$5,000.00; Pay Period: \$200.00	

☐ Save Choices and Complete Later

☐ Save and go back to make other selections or corrections

☐ Manage Dependents

☐ Ready to sign

After confirming your elections, check "Ready to Sign" and "Electronic Signature for Final Enrollment" to complete the benefit enrollment process.

☐ Electronic Signature for Final Enrollment

SUBMIT

Make sure to correct any errors and re-submit.

23. When your enrollment selection is complete and you have signed using Electronic Signature for Final Enrollment, you will receive the following message:

Confirmation Complete

Thank you for enrolling online. The benefits you selected will be viewable through online services beginning January 1.

Should you wish to make changes to your benefit selections before enrollment closes, you may click on the button "Remove my signature and allow changes to my elections" at the bottom of the first page in the benefit enrollment. However, if you do this, please remember that no benefit election is in effect until you re-sign your electronic signature.

For additional information please contact HR@oaklandcc.edu

24. You may then log-out of Online Services or return to the Employees Menu.

How do I log out?

Select **Log Out**. Be sure to close your browser (Internet Explorer) upon completion for security purposes.

What if I have questions regarding my information?

If you have any questions regarding your employee information, please contact the following:

◆ ID / Password problems:

- Contact IT Support Center, 248.341.2100

◆ Benefits Enrollment Questions:

- Auburn Hills, District Office (includes FH and PC) & Highland Lakes
 - Contact Julie Hoyt, 248.341.2029 or e-mail www.HR@oaklandcc.edu
- Orchard Ridge, Royal Oak & Southfield
 - Contact Vanessa Belcher, 248.341.2030 or e-mail www.HR@oaklandcc.edu