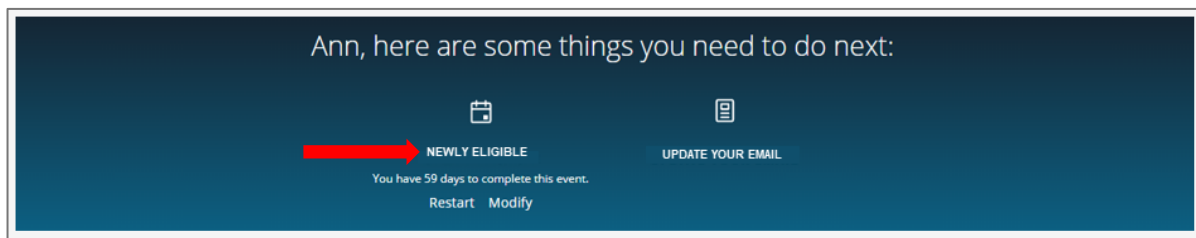
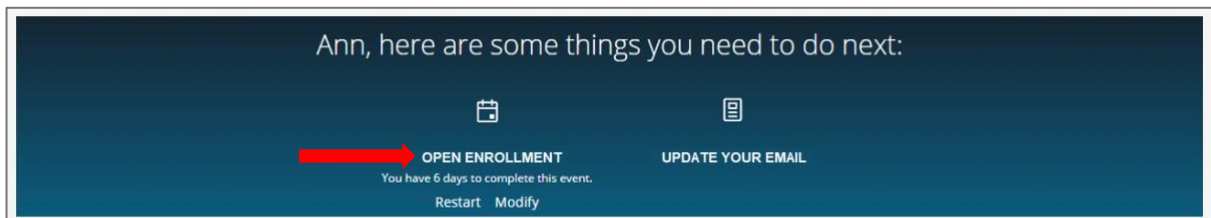


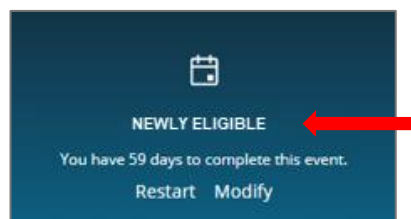
Benefits Enrollment



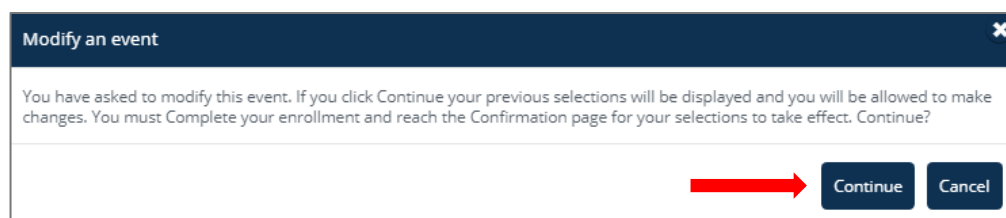
If you have an enrollment opportunity available, there will be an event for your benefits enrollment in the blue banner of your home page. As a newly hired employee, an event for **Newly Eligible** appears in the blue banner.



During your Open Enrollment period, there will be an event in the blue banner for your Open Enrollment too.



1. Click **Modify** on the event.
 An instructional window opens.



2. Read the instructions and click the **Continue** button.
This will take you to the Family screen.

Home

CONCORDIA PLANS

<

Family

Concordia Health Plan (CHP)

Personal Spending Accounts (PSAs)

Concordia Disability and Survivor Plan (CDSP)

Voluntary Benefits


>

Newly Eligible - April 1, 2023

Family

Please review your family members currently on file. You may add, update or remove family members if the information below is not accurate.

If your employer offers the Concordia Disability and Survivor Plan (CDSP), you are entitled to valuable life insurance benefits for your spouse and children. Be sure to list them here, regardless of your intent to enroll them in the Concordia Health Plan (CHP) and/or voluntary benefits.



+ Add Family Member

Ann

Relationship

Myself

D.O.B

[View Details](#)

 Your employer has provided us your information for your benefit enrollment.

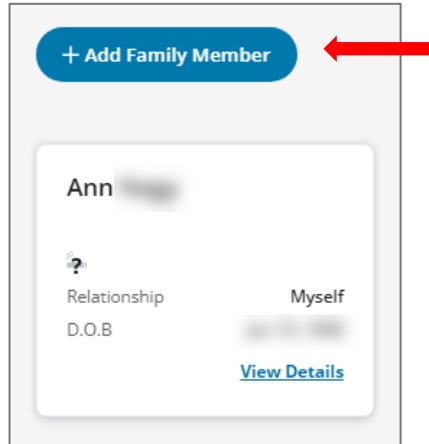
< Previous

Next >

Add a Dependent

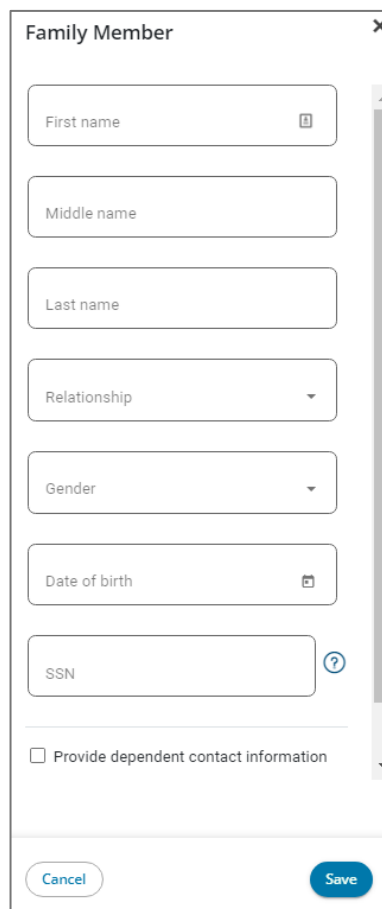
If you are married or have children, use this section to add them to your benefits record. If your employer offers the Concordia Disability and Survivor Plan (CDSP), you are entitled to valuable life insurance benefits for your spouse and children. Be sure to list them here as dependents, regardless of your enrollment in the Concordia Health Plan (CHP).

If you are married, here you will identify a spouse.



A screenshot of a user interface. At the top, there is a blue button with a white plus sign and the text '+ Add Family Member'. A red arrow points to this button from the right. Below the button is a card for a family member named 'Ann'. The card shows a blurred profile picture, a question mark icon, and the text 'Relationship' and 'D.O.B.' with corresponding blurred information. To the right of the card, the text 'Myself' is visible. At the bottom right of the card is a blue link that says 'View Details'.

1. Click the **Add Family Member** button.
The Family Member panel displays.



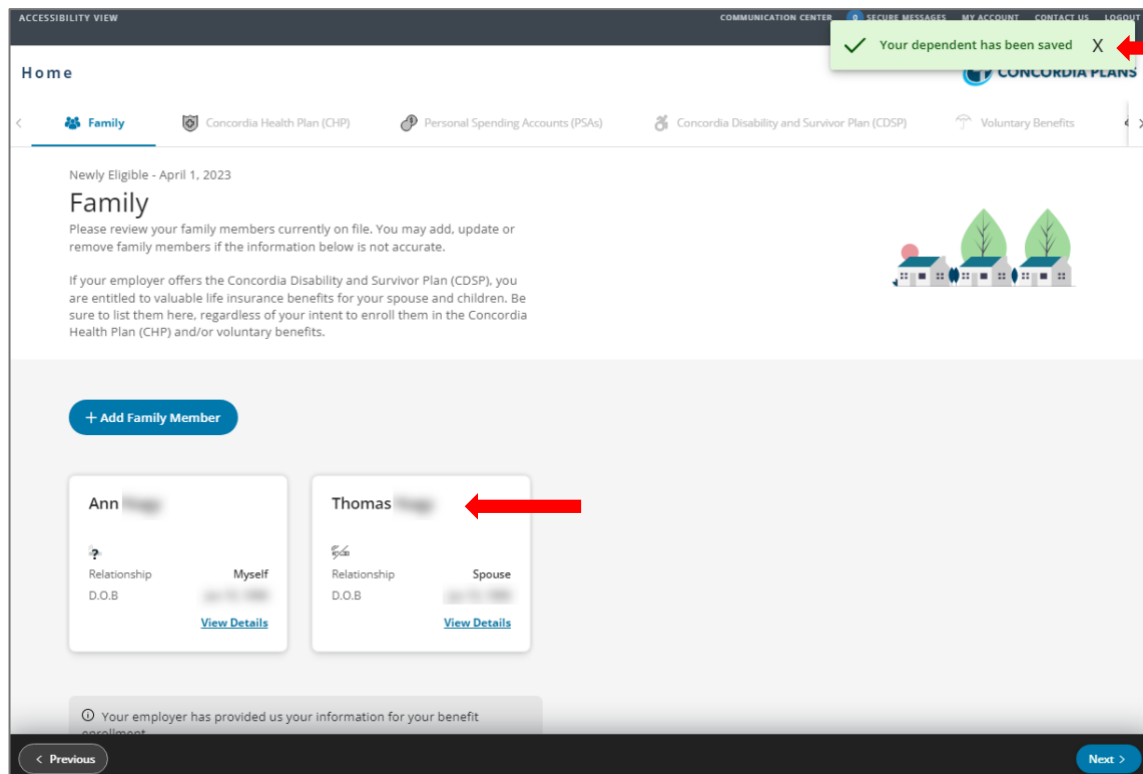
A screenshot of a 'Family Member' form. The form has a title bar with 'Family Member' and a close button (X). The form contains several input fields: 'First name' with a calendar icon, 'Middle name', 'Last name', 'Relationship' with a dropdown arrow, 'Gender' with a dropdown arrow, 'Date of birth' with a calendar icon, and 'SSN' with a help icon (i). Below these fields is a checkbox labeled 'Provide dependent contact information'. At the bottom of the form are two buttons: 'Cancel' and 'Save'.

2. Enter the dependent's information in the **First name, Middle name, Last name, Relationship, Gender, Date of birth and SSN** fields.

3. Click the **Save** button.



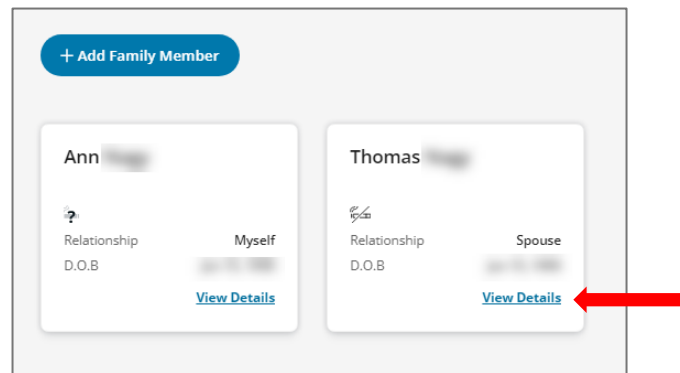
The new dependent appears on the Family screen. A confirmation message displays briefly in the top right corner of the screen.



4. Click the **X** to close the confirmation message.
5. Repeat the steps in this section to add any remaining dependents.

View Family Details

1. Click the **View Details** link on one of the family members.

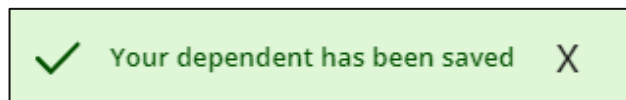


The Family Member panel displays.

The screenshot shows a 'Family Member' form with the following fields: 'First name' (Thomas), 'Middle name' (James), 'Last name' (placeholder), 'Relationship' (Spouse), and 'Gender' (Male). At the bottom are 'Cancel' and 'Save' buttons. A red arrow points to the 'Middle name' field, and another red arrow points to the 'Save' button.

In this example, the Middle Name was added.

2. Make any required changes, and then click the **Save** button.
(Click the Cancel button if not saving changes). The system returns to the Family screen with the confirmation message.



Continue Enrollment

1. When you're finished adding family members, click the **Next** button at the bottom of the screen.

ACCESSIBILITY VIEW COMMUNICATION CENTER SECURE MESSAGES MY ACCOUNT CONTACT US LOGOUT

Home

Family

Newly Eligible - April 1, 2023

Family

Please review your family members currently on file. You may add, update or remove family members if the information below is not accurate.

If your employer offers the Concordia Disability and Survivor Plan (CDSP), you are entitled to valuable life insurance benefits for your spouse and children. Be sure to list them here, regardless of your intent to enroll them in the Concordia Health Plan (CHP) and/or voluntary benefits.

+ Add Family Member

Ann

Relationship: Myself

D.O.B.

View Details

Thomas

Relationship: Spouse

D.O.B.

View Details

< Previous Next >

2. If your employer offers the Concordia Health Plan (CHP), the CHP enrollment screen displays.

Note the plan options at the top of the screen and the sub-options below. The blue text indicates which options are open (in this case, the Concordia Health Plan (CHP) is open along with the Medical option below).

Concordia Health Plan (CHP)

Personal Spending Accounts (PSAs)

Concordia Disability and Survivor Plan (CDSP)

Voluntary Benefits

Newly Eligible - April 1, 2023

Concordia Health Plan (CHP)

Medical Dental Vision Wellness

Medical

Compare Plans

The Concordia Health Plan (CHP) provides medical coverage including office visits, hospital stays and emergency care. It also includes coverage for prescription drugs, mental health, preventive care and more. Select your plan option and the family members you wish to cover below.

Member and Employer cost responsibilities vary by LCMS ministry. Please check with your employer if you have questions on any cost responsibility that may impact your paycheck deduction.

If you see the CHP Options A, B, C, D, E, HDHP, HMO, HMO-C or HMO-C2 below, Concordia Plans believes these to be considered "grandfathered health plans" under the Affordable Care Act (ACA) and may not include certain consumer protections of the ACA that apply to other plans. For questions and more information, you may refer to the Grandfathered Health Plan Notice [here](#), call Concordia Plans at 888-927-7526 or contact the U.S. Department of Health and Human Services at [healthreform.gov](#).

As you continue with your enrollment, you will move across these options and make your selections.

3. Scroll down this screen to view additional details.

Medical Compare Plans

The Concordia Health Plan (CHP) provides medical coverage including office visits, hospital stays and emergency care. It also includes coverage for prescription drugs, mental health, preventive care and more. Select your plan option and the family members you wish to cover below.

Member and Employer cost responsibilities vary by LCMS ministry. Please check with your employer if you have questions on any cost responsibility that may impact your paycheck deduction.

If you see the CHP Options A, B, C, D, E, HDHP, HMO, HMO-C or HMO-C2 below, Concordia Plans believes these to be considered "grandfathered health plans" under the Affordable Care Act (ACA) and may not include certain consumer protections of the ACA that apply to other plans. For questions and more information, you may refer to the Grandfathered Health Plan Notice [here](#), call Concordia Plans at 888-927-7526 or contact the U.S. Department of Health and Human Services at healthreform.gov.

Select who is covered

☒ Ann Myself

☐ Thomas Spouse

Decline Coverage Select

Option HDHP (BCBS) Select View Details

Healthy Me HSA - A (BCBS) View Details

Scroll down

The member in this example (identified as *Myself*) has medical coverage, as indicated by the checkbox next to the name and the check icon on one of the medical options.

The added spouse does not have this coverage yet – note the empty checkbox. Click the checkbox next to all dependents you'd like to enroll in the CHP.

If your employer offers more than one health plan option, the **Compare Plans** feature allows for comparing the available plans to help determine the best option.

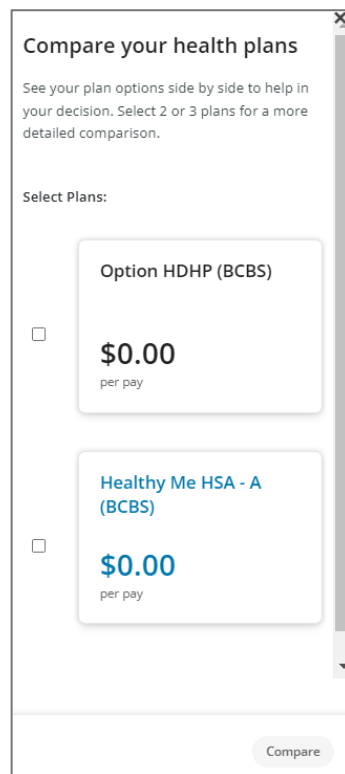
Medical Compare Plans

The Concordia Health Plan (CHP) provides medical coverage including office visits, hospital stays and emergency care. It also includes coverage for prescription drugs, mental health, preventive care and more. Select your plan option and the family members you wish to cover below.

Member and Employer cost responsibilities vary by LCMS ministry. Please check with your employer if you have questions on any cost responsibility that may impact your paycheck deduction.

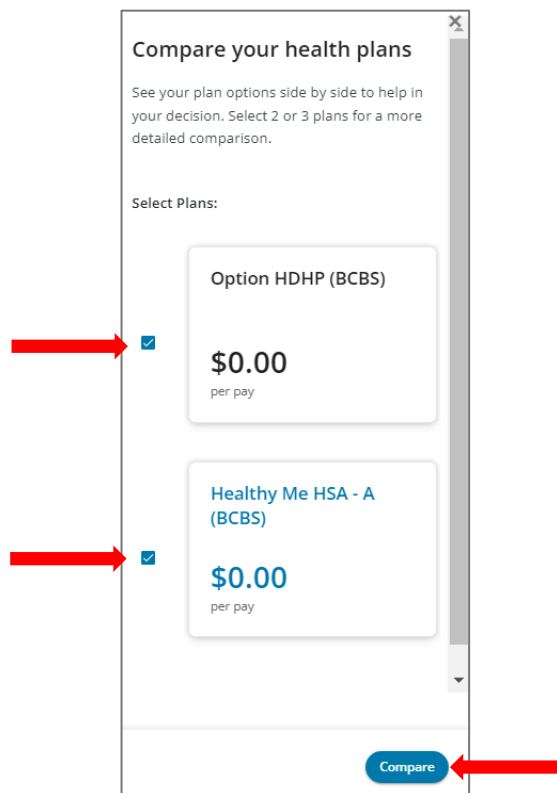
4. Click the **Compare Plans** button.

The **Compare your health plans** panel displays.



The screenshot shows a window titled "Compare your health plans" with a close button (X) in the top right corner. Below the title is a descriptive paragraph: "See your plan options side by side to help in your decision. Select 2 or 3 plans for a more detailed comparison." Under the heading "Select Plans:", there are two plan cards. The first card is "Option HDHP (BCBS)" with a checkbox to its left and "\$0.00 per pay" below it. The second card is "Healthy Me HSA - A (BCBS)" with a checkbox to its left and "\$0.00 per pay" below it. At the bottom right of the window is a "Compare" button.

5. Click two or more checkboxes to select plans.



This screenshot shows the same "Compare your health plans" window, but now both checkboxes are checked. Two red arrows point to the checkboxes: one to the top checkbox and one to the bottom checkbox. A third red arrow points to the "Compare" button at the bottom right, which is now highlighted in blue.

6. Click the **Compare** button.

The Compare Plans window displays. If applicable, your current plan election is listed in blue text.

7. Click the **Select** button to choose a plan, and then click the **Done** button.
The Medical screen displays with the selected plan. If you wish to continue with your current plan election, simply click the **Done** button.

< Go back

Compare Plans

Print

Option HDHP (BCBS)

\$0.00

per pay

Select

Healthy Me HSA - A (BCBS)

\$0.00

per pay

Select

| Medical | | |
|----------------------------------|--|--|
| | Out-of-Network: 20% coinsurance after deductible | deductible Out-of-Network: Member pays 40% coinsurance after deductible |
| Dental/Vision | Bundled | Unbundled |
| Summary of Benefits and Coverage | Option HDHP (BCBS) | Healthy Me HSA A (BCBS) |

Done

8. Click the checkbox for the **Spouse** if you also wish to enroll your spouse in the Concordia Health Plan.

Select who is covered

☒ Ann Myself

☐ Thomas Spouse

Decline Coverage

Select

Option HDHP (BCBS)

Select View Details

Healthy Me HSA - A (BCBS)

View Details

Select who is covered

☒ Ann Myself

☒ Thomas Spouse

Decline Coverage

Select

Option HDHP (BCBS)

Select View Details

Healthy Me HSA - A (BCBS)

View Details

Note: As you progress through the event, the Annual and Per Pay Employee Costs display at the bottom of the screen (if applicable). It is important to note that any employer or member cost(s) may not include any shared cost for your health coverage. Member and employer cost responsibilities vary by LCMS ministry, so please check with your employer if you have any questions on any cost responsibility that will impact your paycheck deductions.

The screenshot shows the 'Medical' plan selection screen. At the top, there are tabs for 'Medical', 'Dental', 'Vision', and 'Wellness'. The 'Medical' tab is active. Below the tabs, there is a 'Compare Plans' button. The main content area contains text about the Concordia Health Plan (CHP) and instructions for selecting a plan. Below this text, there are three main selection areas: 'Select who is covered', 'Decline Coverage', and 'Option HDHP (BCBS)'. The 'Select who is covered' section has two checkboxes: 'Ann Myself' (checked) and 'Thomas Spouse' (checked). The 'Decline Coverage' section has a 'Select' button. The 'Option HDHP (BCBS)' section has a 'Select' button and a 'View Details' button. To the right of these sections, there is a 'Healthy Me HSA - A (BCBS)' option with a checkmark and a 'View Details' button. At the bottom, there is a dark bar with a 'Previous' button, 'Your per pay payroll deduction: \$1.90', 'Your annual payroll deduction: \$22.80', a 'See all benefits and costs' link, and a 'Next' button.

9. Click the **Next** button.
The Dental screen displays.

The screenshot shows the 'Dental' plan selection screen. At the top, there are tabs for 'Medical', 'Dental', 'Vision', and 'Wellness'. The 'Dental' tab is active, indicated by a red arrow. Below the tabs, there is a 'Dental' heading and text about reviewing and selecting a dental plan. Below this text, there are three main selection areas: 'Select who is covered', 'Decline Coverage', and 'Dental Plus Unbundled'. The 'Select who is covered' section has two checkboxes: 'Ann Myself' (checked) and 'Thomas Spouse' (checked). The 'Decline Coverage' section has a 'Waived' button. The 'Dental Plus Unbundled' section has a 'Select' button. At the bottom, there is a dark bar with a 'Previous' button, 'Your per pay payroll deduction: \$1.90', 'Your annual payroll deduction: \$22.80', a 'See all benefits and costs' link, and a 'Next' button.

10. Click the checkbox for the **Spouse** (or any additional dependents) to add them to the dental plan.

Select who is covered

☒ Ann Myself

☒ Thomas Spouse

Decline Coverage

Dental Plus Unbundled

Select

Scroll down

< Previous

Your per pay payroll deduction: \$1.90

Your annual payroll deduction: \$22.80

[See all benefits and costs](#)

Next >

11. Click the **Next** button.

< Previous

Your per pay payroll deduction: \$1.90

Your annual payroll deduction: \$22.80

[See all benefits and costs](#)

Next >

The new Annual and Per Pay Employee Costs display at the bottom of the screen (if applicable). A Notification window may open based on the election. It is important to note that any employer or member cost(s) may not include any shared cost for your health coverage. Member and employer cost responsibilities vary by LCMS ministry, so please check with your employer if you have any questions on any cost responsibility that will impact your paycheck deductions.

Notification

The system recalculated the costs based on the choices you just made. If you are satisfied with the choices and the updated costs, proceed to the next step. Otherwise, revise your choices and click Recalculate

OK

12. Click the **OK** button on the Notification window.

13. Click the **Next** button.
The Vision screen displays

Medical **D** Vision Wellness

Vision

Review and/or select your vision plan option and the dependents you would like to cover below.

Member and Employer cost responsibilities vary by LCMS ministry. Please check with your employer if you have questions on any cost responsibility that may impact your paycheck deductions.

Select who is covered

☐ Ann Myself

☐ Thomas Spouse

Decline Coverage ☒

Waived

Vision Basic Unbundled

Select

Back to top

< Previous

Your per pay payroll deduction: \$1.90

Your annual payroll deduction: \$22.80

See all benefits and costs

Next >

14. Click the checkbox for the **Spouse** (or any additional dependents) to add them to the Vision plan.

Select who is covered

☒ Ann Myself

☒ Thomas Spouse

Decline Coverage

Select

Vision Basic Unbundled ☐

Scroll down

< Previous

Recalculate

Next >

< Previous

Your per pay payroll deduction: \$1.90

Your annual payroll deduction: \$22.80

See all benefits and costs

Next >

15. Click the **Next** button.
The new Annual and Per Pay Employee Costs display at the bottom of the screen (if applicable).

16. If your employer offers a Personal Savings Accounts (PSA) and you are eligible based on your health plan enrollment, the PSA screen displays.

Family Concordia Health Plan (CHP) Personal Spending Accounts (PSAs) Concordia Disability and Survivor Plan (CDSP) Voluntary Benefits

Newly Eligible - April 1, 2023

Personal Spending Accounts (PSAs)

Personal Spending Accounts (PSAs) allow you to use tax-free dollars to pay for eligible expenses, including medical, prescription, dental, vision and dependent care. Eligible expenses and availability of funds vary by account type. Click [here](#) to learn more about PSAs.

Health Savings Account Member Contribution

Annual Contribution Amt

\$0
Per Month

[Back to top](#)

[Previous](#) Your per pay payroll deduction: \$1.90 Your annual payroll deduction: \$22.80 [Next](#)

[See all benefits and costs](#)

Your eligible PSA options will display.

Health Savings Account Member Contribution

Annual Contribution Amt

\$1000

\$0
Per Month

17. Enter your desired annual contribution in the **Annual Contribution Amt** field of the appropriate PSA option(s).

A Notification window may open based on the election.

Notification

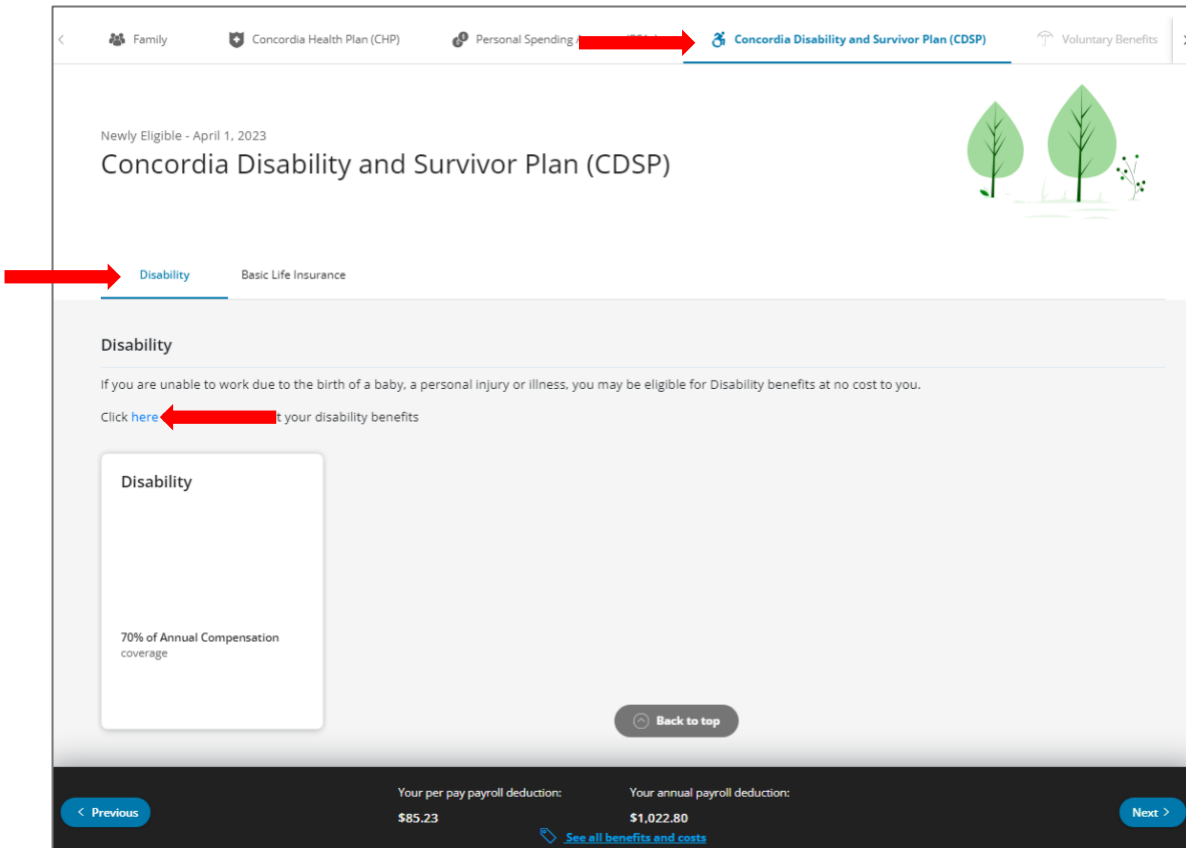
The system recalculated the costs based on the choices you just made. If you are satisfied with the choices and the updated costs, proceed to the next step. Otherwise, revise your choices and click Recalculate

[OK](#)

18. Click the **OK** button on the Notification window.

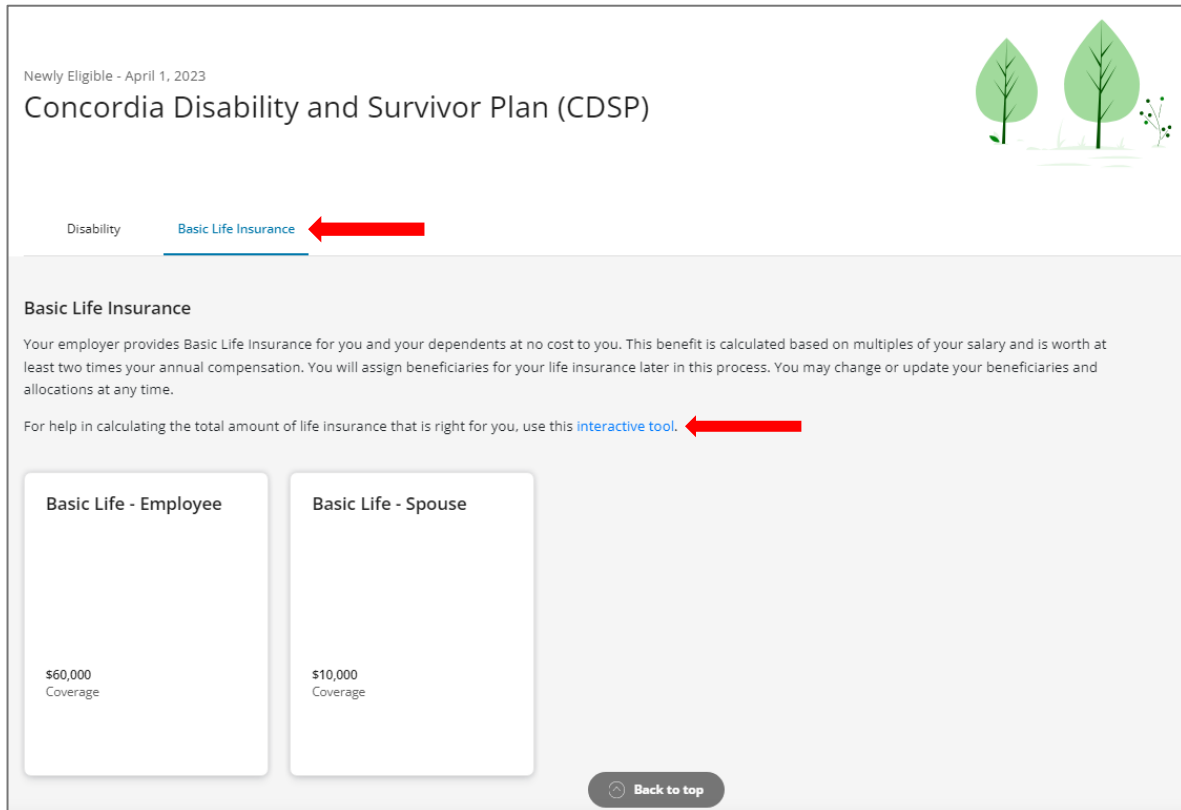
Click the **Next** button.

19. Click the **Next** button.
The Concordia Disability & Survivor Plan screen displays.
Disability is the first option.



20. Click the **here** link to learn more about your [Disability benefits](#).
A new browser tab opens with this information. When finished, close the new browser tab and click the **Next** button.

The Basic Life Insurance screen displays your coverage and additional life insurance benefits for your spouse and children as part of the Concordia Disability and Survivor Plan.



21. Click the [interactive tool](#) link to learn more about Life Insurance amounts.
A new browser tab opens with this information.
22. When finished, close the new browser tab to return to the enrollment screen, and then click the **Next** button.

The Voluntary Benefits screen displays. Supplemental Life Insurance is the first option.

Concordia Health Plan (CHP) Personal Spending Accounts (PSAs) Concordia Disability and Survivor **Voluntary Benefits** Retirement

Newly Eligible - April 1, 2023

Voluntary Benefits

Supplemental Life Insurance For Accidents and Injuries Critical Illness Insurance

Supplemental Life Insurance

Supplemental Life Insurance is in addition to the Basic Life Insurance benefit provided through the Concordia Disability and Survivor Plan. The cost of this insurance will be payroll deducted.

The rates for this coverage vary by age group. Your group is determined based on your age as of January 1 of the current calendar year. If your birthday this year puts you in the next age group (for example, 30-34, 35-39), your rates will increase on January 1 in the following calendar year. Click to learn more about [Supplemental Life Insurance](#) or to view [age groups and rates](#).

For help in calculating the amount of life insurance that is right for you, use this [interactive tool](#).

Supplemental Life - Employee
\$0
Per Month
Option
Decline Coverage

Supplemental Life - Spouse
\$0
Per Month
Option
Decline Coverage

Scroll down

23. If you wish to purchase additional life insurance, click the drop-down arrow for **Supplemental Life – Employee** and select an amount.

Supplemental Life - Employee

\$2.80
Per Month

Decline Coverage

\$50,000

\$100,000

\$150,000

\$200,000

24. Repeat the previous step for **Supplemental Life – Spouse**.

Note the recalculated amounts on the tools and at the bottom of the screen, if applicable.

Supplemental Life - Employee
\$2.80 Per Month
Option: \$50,000

Supplemental Life - Spouse
\$3.60 Per Month
Option: \$50,000
Smoker status

Back to top

< Previous Your per pay payroll deduction: \$91.63 Your annual payroll deduction: \$1,099.60 Next >

[See all benefits and costs](#)

Supplemental Life rates vary based on your tobacco/nicotine usage. If you have not yet indicated a smoking status for you and/or your spouse, you will see a message to **Provide Smoker Status**. Follow the prompts on the screen.

❗ Error

- Supplemental Life - Employee
Supplemental Life Insurance has different rates depending upon your tobacco/nicotine usage. Please provide your smoker status.

[Provide smoker status](#)


Certain amounts of Supplemental Life insurance require you to submit Evidence of Insurability (EOI) before the amount is approved. You will see the message below if your election requires EOI. Securian will contact you with instructions to submit the necessary information.

ℹ Important information

- Supplemental Life - Spouse
The coverage you elected for supplemental life insurance requires Evidence of Insurability (EOI). Securian will contact you with instructions to complete the needed additional medical information.

25. Click the **Next** button.

The Voluntary Insurance for Accidents and Injuries screen displays (if applicable).

Supple  Voluntary Insurance for Accidents and Injuries Critical Illness Insurance

Voluntary Insurance for Accidents and Injuries

Voluntary insurance for accidents and injuries can protect you and your family financially for an unexpected event. The cost of any voluntary benefits you elect will be payroll deducted.

Click for more information on [Accidental Death and Dismemberment Insurance](#) or to see [rates](#).

Click for more information on [Accidental Injury Insurance](#) or to see [rates](#).

Accidental Death & Dismemberment Insurance

\$0
Per Month

Option
Decline Coverage ▼

Decline Coverage
Detail

Update

Accidental Injury Insurance

\$0
Per Month

Option
Decline Coverage ▼

Decline Coverage
Category

Update

26. If you wish to purchase Accidental Death & Dismemberment Insurance, click the drop-down arrow to indicate your desired amount.

Accidental Death & Dismemberment Insurance

\$0
Per Month

Option
Decline Coverage ▼

\$25,000
\$50,000
\$75,000
\$100,000

After selecting the amount, click **Update** to select the family member you wish to cover.

Accidental Death & Dismemberment Insurance

\$0.65
Per Month

Option
\$25,000 ▼

Member
Detail

Update

Click the checkbox next to the dependent(s), then click **Save**.

×

Accidental Death & Dismemberment Insurance

Please select your coverage:

☐ Myself

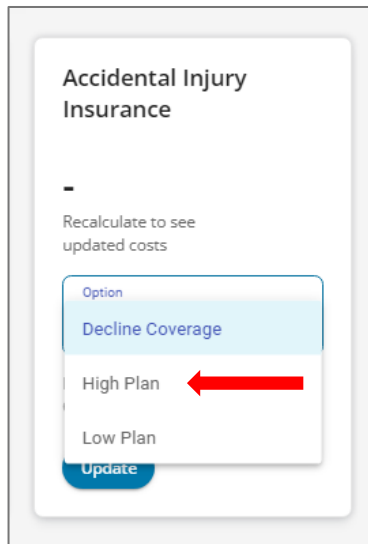
☒ Spouse

Add Dependent

Save



27. If you wish to purchase **Accidental Injury Insurance**, click the drop-down arrow and select your desired plan.



Accidental Injury Insurance

-

Recalculate to see updated costs

Option

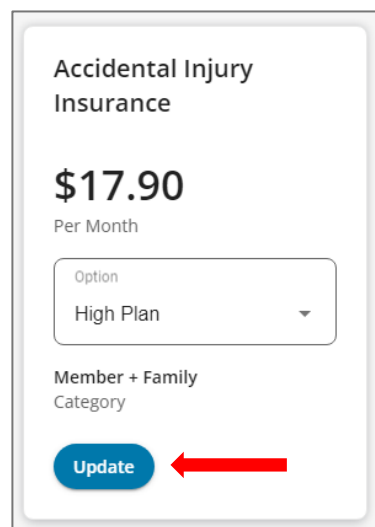
Decline Coverage

High Plan ←

Low Plan

Update

After selecting the amount, click **Update** to select the family member you wish to cover. Click the checkbox next to the dependent(s), then click **Save**.



Accidental Injury Insurance

\$17.90

Per Month

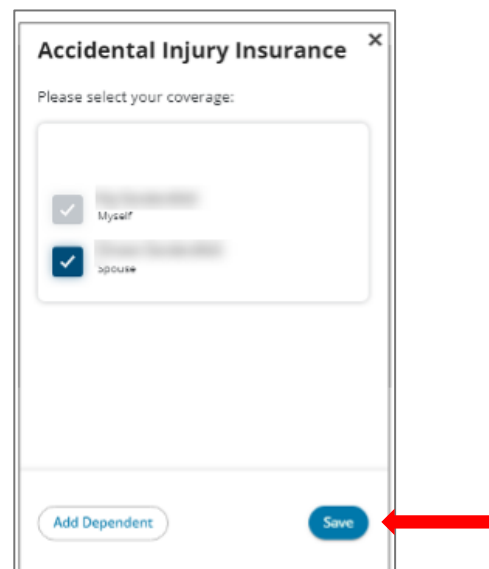
Option

High Plan

Member + Family

Category

Update ←



Accidental Injury Insurance ×

Please select your coverage:

☒ Myself

☒ Spouse

Add Dependent

Save ←

28. Note the recalculated amounts at the bottom of the screen and click the **Next** button. The Critical Illness Insurance screen displays (if applicable).

Supplemental Life Insurance Voluntary Insurance for Accidents and Injuries **Critical Illness Insurance** ←

Critical Illness Insurance

Critical Illness Insurance, offered through Cigna, helps you prepare financially for an unexpected health event. It pays a lump-sum benefit when you or a family member are diagnosed with a covered condition.

The rates for this coverage vary by age group. Your group is determined based on your age as of January 1 of the current calendar year. If your birthday this year puts you in the next age group (for example, 30-34, 35-39), your rates will increase on January 1 in the following calendar year. Click to learn more about [Critical Illness Insurance](#) or to view [age groups and rates](#).

Critical Illness Employee

\$11.00
Per Month

Option
\$10,000 ←

Critical Illness Spouse

\$0
Per Month

Option
Decline Coverage ▼

[Back to top](#)

29. Make desired selections for the **Employee** and **Spouse** (and Children, if applicable), and then click the **Next** button.

The Retirement screen displays your Concordia Plans retirement solutions – the Concordia Retirement Savings Plan (CRSP) 403(b) and the Concordia Savings Plan (CRP) Pension. These two work together to help you be prepared financially for retirement.

Health Plan (CHP) Personal Spending Accounts (PSAs) Concordia Disability and Survivor Plan (CDSP) Vol Retirement Benefit

Newly Eligible - April 1, 2023

Retirement

Concordia Retirement Savings Plan (CRSP) 403(b) Concordia Retirement Plan (CRP) - Pension

CRSP 403(b) Dollar Amount Contributions

The Concordia Retirement Savings Plan (CRSP) 403(b), administered through Fidelity Investments, is crucial to building a secure retirement, working together with your Concordia Retirement Plan (CRP) pension benefits and Social Security to provide you a complete retirement paycheck.

You have two savings options. The pre-tax option offers lower taxable income today, while the after-tax Roth option allows you to have tax-free income in retirement. There are also additional tax advantages for rostered workers. Click [here](#) for help choosing which option is right for you.

CRSP 403(b) Pre-Tax Dollar Amount

CRSP 403(b) After-Tax Roth Dollar Amount

CRSP 403(b) Percentage Contributions

CRSP 403(b) Pre-Tax Percentage

CRSP 403(b) After-Tax Roth Percentage

[Scroll down](#)

[< Previous](#)

Your per pay payroll deduction:
\$89.73

Your annual payroll deduction:
\$1,076.80

[See all benefits and costs](#)[Next >](#)

30. If your employer offers the **Concordia Retirement Savings Plan 403(b)**, you can enter either a dollar amount or percent per paycheck for the Pre-Tax, After-Tax Roth, or both options.

Be sure to enter your beneficiaries for the CRSP 403(b) on the [Fidelity website](#)

CRSP 403(b) Pre-Tax Dollar Amount

CRSP 403(b) After-Tax Roth Dollar Amount

[Scroll down](#)

[< Previous](#)

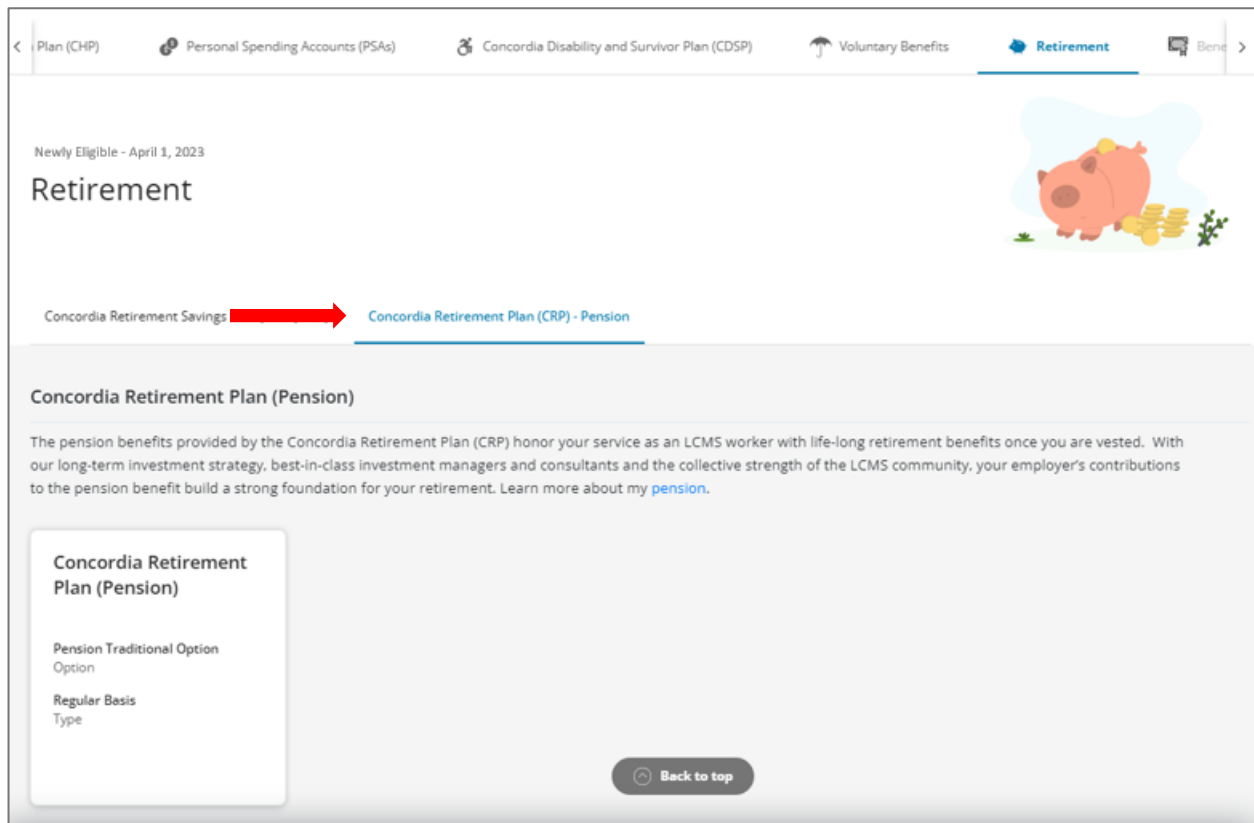
Your per pay payroll deduction:
\$289.73

Your annual payroll deduction:
\$3,476.80

[See all benefits and costs](#)[Next >](#)

31. Click the **Next** button.

The Concordia Retirement Plan (CRP) – Pension screen displays.



No changes are required on this screen, as this benefit is 100% funded by your employer. If you wish to see more information about the value of your pension, you can view your PSOB or visit Retirement Connection through the Quick Links or by visiting RetirementConnection.ehr.com.

32. Click the **Next** button.

The Beneficiaries screen is where you can assign beneficiaries for Basic and Supplemental Life Insurance and other applicable coverage.

Note: If you are enrolled in the CRSP 403(b), be sure to enter your beneficiaries for that benefit on the [Fidelity website](#)

Personal Spending Accounts (PSAs) Concordia Disability and Survivor Plan (CDSP) Voluntary Benefits **Beneficiaries**

Newly Eligible - April 1, 2023

Beneficiaries

Your beneficiary is the person (or people) who will receive your benefits if something happens to you. By adding a beneficiary designation, you'll be able to make sure your wishes will be honored.

You may add, change or delete your beneficiaries below. You cannot designate your current employer as a beneficiary. If designating a trust, you must designate a specifically named trust in order for your designation to be considered valid.

If you participate in the Concordia Retirement Savings Plan (CRSP) 403(b), you must designate your CRSP beneficiaries on the [Fidelity website](#).

Contingent* - Optional

| Designated beneficiary(ies) | Basic Life | | Supplemental Life - Employee | |
|---|------------|-------------|------------------------------|-------------|
| | Primary | Contingent* | Primary | Contingent* |
| To get started add your first beneficiary | | | | |
| Add a Beneficiary | | | | |

33. To add a beneficiary, click the **Add a Beneficiary** button. The Add a Beneficiary panel displays.

Add a Beneficiary

- ☐ Add a new beneficiary
- ☐ Choose a family member
- ☐ Designate your estate
- ☐ Add a trust
- ☐ Add an organization

Next

34. Select the appropriate beneficiary option. You can add a new beneficiary, select from a family member (the list you entered on your **My Family** page), designate your estate, add a trust or add an organization. (Note: you cannot add your current employer as a beneficiary).

Select your desired beneficiary option and click the **Next** button.

35. Complete all fields for the beneficiary and click the **Save** button.

The system confirms the addition of the beneficiary. Repeat this process if you wish to add additional beneficiaries.

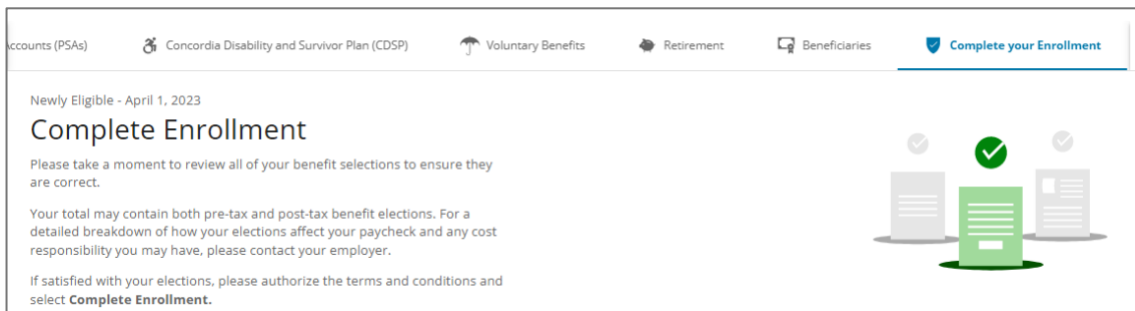
Contingent* - Optional

| Designated beneficiary(ies) | Basic Life | | Supplemental Life - Employee | |
|--|------------|-------------|------------------------------|-------------|
| | Primary | Contingent* | Primary | Contingent* |
| <div>Spouse Edit</div> | 100% | | 100% | |
| Add a Beneficiary | | | | |
| Total | 100% | 0% | 100% | 0% |

36. Enter the percent allocations for your beneficiaries.

- A **Primary Beneficiary** is person or entity named to receive your death benefit benefit(s). More than one primary beneficiary can be named, and you have the option to assign specific percentages of your benefits to each.
- A **Contingent Beneficiary** (optional) is the person or entity named to receive your death benefit(s) if the primary beneficiary is deceased, unable to be located, or refuses the benefit when proceeds are to be paid. More than one contingent beneficiary can be named, and you have the option to assign specific percentages of your benefits to each.
- If you specify Primary and Contingent Beneficiaries, the percentages allocated in each column must equal 100%.

When you are finished entering your Beneficiaries and allocations, click the **Next** button. The system advances to the Complete Enrollment screen.



The screenshot shows the 'Complete Enrollment' screen. At the top, there is a navigation bar with icons and labels for 'Accounts (PSAs)', 'Concordia Disability and Survivor Plan (CDSP)', 'Voluntary Benefits', 'Retirement', 'Beneficiaries', and 'Complete your Enrollment' (which is highlighted). Below the navigation bar, the text reads: 'Newly Eligible - April 1, 2023', 'Complete Enrollment', 'Please take a moment to review all of your benefit selections to ensure they are correct.', 'Your total may contain both pre-tax and post-tax benefit elections. For a detailed breakdown of how your elections affect your paycheck and any cost responsibility you may have, please contact your employer.', and 'If satisfied with your elections, please authorize the terms and conditions and select **Complete Enrollment**.' On the right side, there is an illustration of three document icons, with the central one being green and featuring a white checkmark.

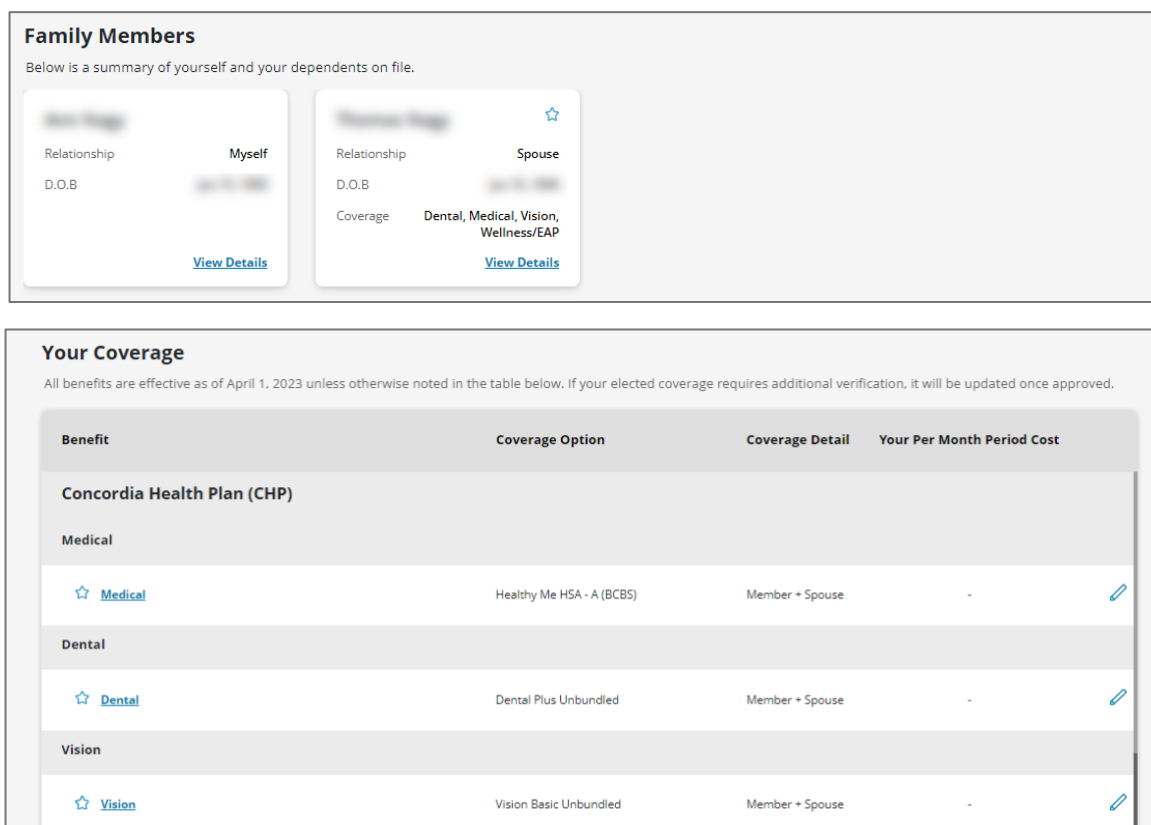
If you elected Supplemental Life insurance that requires EOI, you will see a reminder here.

Important information

- Supplemental Life - Spouse

The coverage you elected for supplemental life insurance requires Evidence of Insurability (EOI). Securian will contact you with instructions to complete the needed additional medical information.

37. Scroll down this screen to view the **Family Members** and **Your Coverage** sections.



The screenshot displays two sections: 'Family Members' and 'Your Coverage'.

Family Members

Below is a summary of yourself and your dependents on file.




| Relationship | Myself | Relationship | Spouse |
|--------------|------------------------------|--------------|---|
| D.O.B | | D.O.B | |
| | View Details | Coverage | Dental, Medical, Vision, Wellness/EAP View Details |

Your Coverage

All benefits are effective as of April 1, 2023 unless otherwise noted in the table below. If your elected coverage requires additional verification, it will be updated once approved.

| Benefit | Coverage Option | Coverage Detail | Your Per Month Period Cost |
|------------------------------------|---------------------------|-----------------|----------------------------|
| Concordia Health Plan (CHP) | | | |
| Medical | | | |
| ☆ Medical | Healthy Me HSA - A (BCBS) | Member + Spouse | - |
| Dental | | | |
| ☆ Dental | Dental Plus Unbundled | Member + Spouse | - |
| Vision | | | |
| ☆ Vision | Vision Basic Unbundled | Member + Spouse | - |

Items with a **pencil** icon to the far right may be edited.

| Voluntary Benefits | | | |
|--|----------|--------|---|
| Supplemental Life Insurance | | | |
| ☆ Supplemental Life - Employee | \$50,000 | \$2.80 |  |
| ☆ Supplemental Life - Spouse  | \$50,000 | \$3.60 |  |



38. To edit a benefit election, click one of the pencil icons. The system returns to that screen; you may review or edit your choices.

Supplemental Life Insurance

Supplemental Life Insurance is in addition to the Basic Life Insurance benefit provided through the Concordia Disability and Survivor Plan. The cost of this insurance will be payroll deducted.

The rates for this coverage vary by age group. Your group is determined based on your age as of January 1 of the current calendar year. If your birthday this year puts you in the next age group (for example, 30-34, 35-39), your rates will increase on January 1 in the following calendar year. Click to learn more about [Supplemental Life Insurance](#) or to view [age groups and rates](#).

For help in calculating the amount of life insurance that is right for you, use this [interactive tool](#).

Supplemental Life - Employee

\$2.80
Per Month

Option
\$50,000

Smoker status

Supplemental Life - Spouse

Decline Coverage

\$25,000

\$50,000

\$75,000

\$100,000

Smoker status

Back to top



39. After you complete your edits, click the **Next** button.

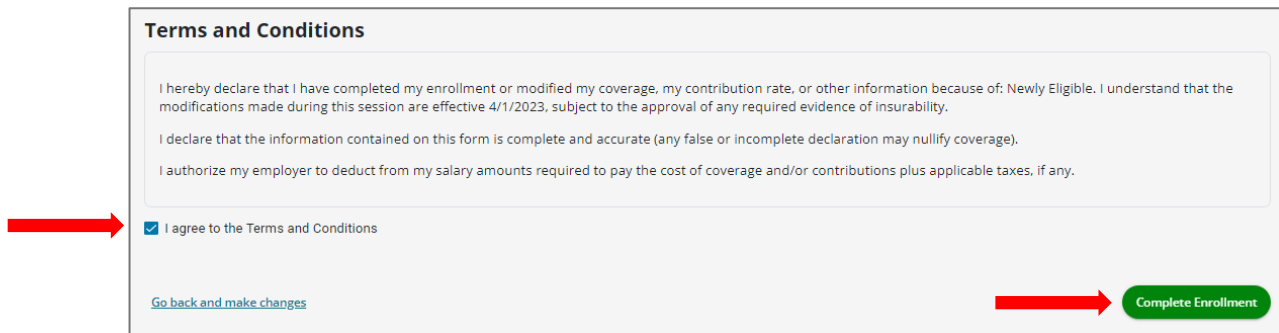
You may continue to make edits or keep clicking **Next** until you return to the Complete Enrollment screen.

40. On the Complete Enrollment screen, scroll down to the **Cost Summary** section.

| Cost Summary | |
|----------------------------|------------|
| Total Costs | |
| Your total per-month cost | \$289.73 |
| Your total annual cost | \$3,476.80 |
| Total annual employer cost | \$12.00 |

It is important to note that any employer or member cost(s) listed may not include any shared cost for your health coverage. Member and employer cost responsibilities vary by LCMS ministry, so please check with your employer if you have any questions on any cost responsibility that will impact your paycheck deductions.

41. Scroll down to the **Terms and Conditions** section.



Terms and Conditions

I hereby declare that I have completed my enrollment or modified my coverage, my contribution rate, or other information because of: Newly Eligible. I understand that the modifications made during this session are effective 4/1/2023, subject to the approval of any required evidence of insurability.

I declare that the information contained on this form is complete and accurate (any false or incomplete declaration may nullify coverage).

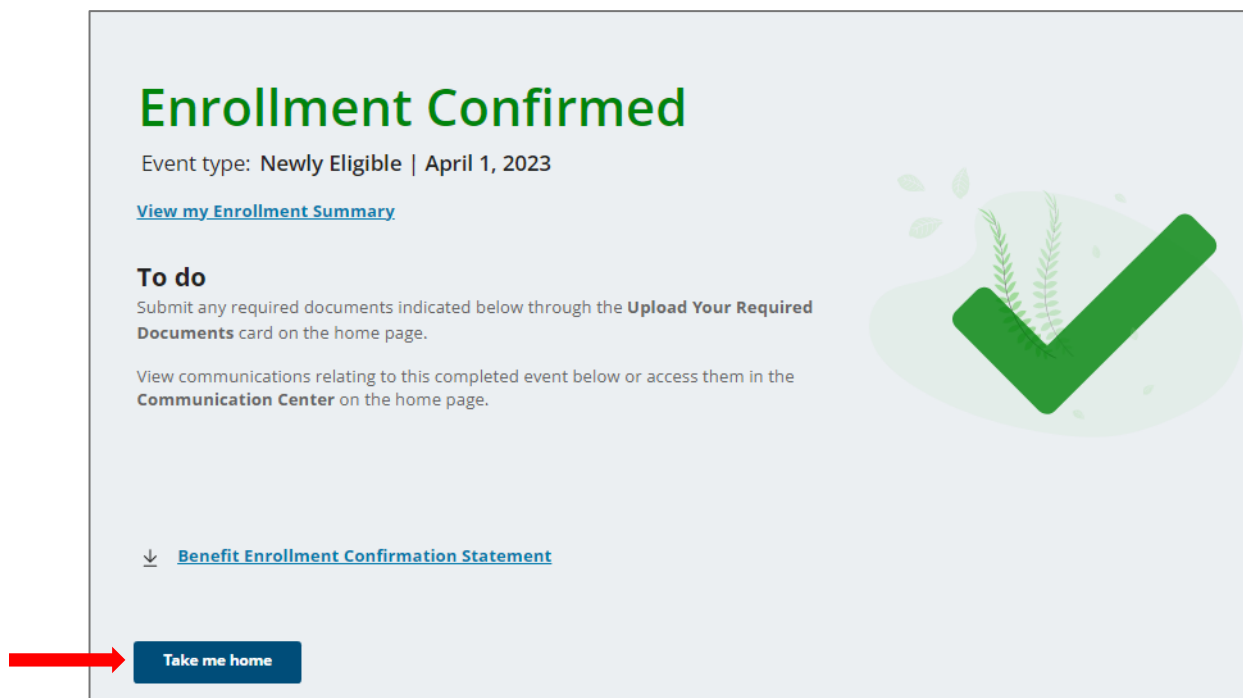
I authorize my employer to deduct from my salary amounts required to pay the cost of coverage and/or contributions plus applicable taxes, if any.

☒ I agree to the Terms and Conditions

[Go back and make changes](#) [Complete Enrollment](#)

42. Read the Terms and Conditions and click the checkbox to indicate if you agree.

43. Click the **Complete Enrollment** button.
The Enrollment Confirmed screen displays.



Enrollment Confirmed

Event type: Newly Eligible | April 1, 2023

[View my Enrollment Summary](#)

To do

Submit any required documents indicated below through the **Upload Your Required Documents** card on the home page.

View communications relating to this completed event below or access them in the **Communication Center** on the home page.

↓ [Benefit Enrollment Confirmation Statement](#)

[Take me home](#)

Note the **To Do** section, indicating that there are additional tasks for you to complete, such as viewing your confirmation statement.

44. Click the **Take Me Home** button.
The Home screen displays.