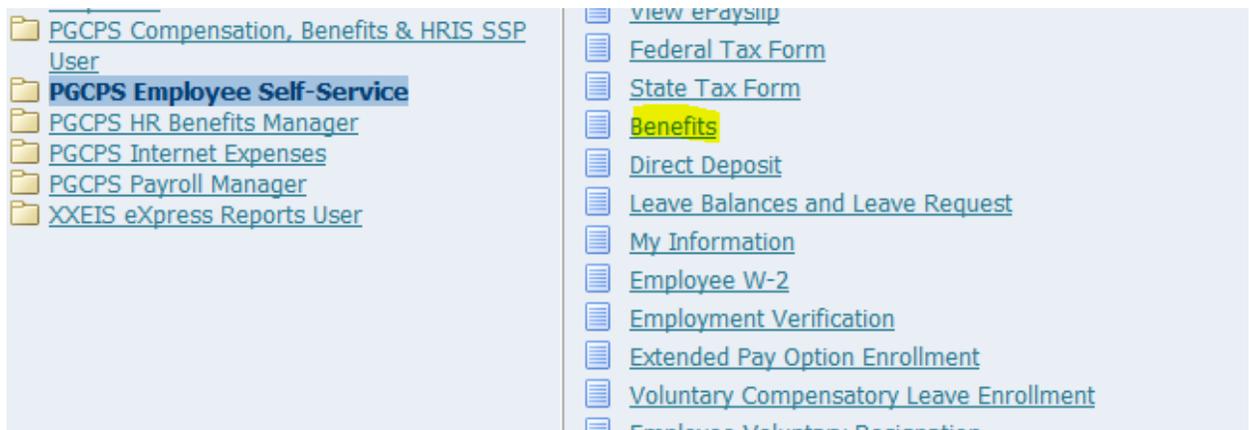


Self Service Instructions for Updating Basic/Optional Life Insurance

1. Log into Oracle Self Service
2. Click Benefits



Please read The Welcome Screen/Legal Disclaimer and select “Accept”. Click Next

Welcome,

As an employee eligible for benefits:

- Current employees may,
 - Review current benefits
 - Update their beneficiary information
- Newly hired employees, within 30 days of their date of hire, may,
 - Elect to enroll in,
 - medical, prescription, dental, vision coverage,
 - flexible spending account (FSA) (health and/or child care),
 - supplemental life insurance (optional life, spouse life, child life and/or long term disability)
 - Designate beneficiary(ies) for their life insurance

When electing benefits:

- Benefits coverage is effective the first of the month following the date you elect to enroll (i.e. If you are electing coverage in October, coverage would be effective November 1st)
 - If you choose not to participate in benefits, you MUST elect the “no coverage option”.
- All benefit eligible employees are eligible for PGCPS sponsored life insurance coverage, and are encouraged to update their beneficiaries as they experience life changing events. Updating your beneficiaries for your life insurance can be done at any time.

Disclaimer:

The Oracle Employee Self Service website is the gateway to selecting your benefits. Selections made within the Employee Self Service System are binding for the benefit plan year (January - December); unless you experience an IRS (Section 125) “qualifying life event”, also known as “qualifying event” or “family status change”. Examples of qualifying life events include, marriage, divorce, birth, adoption, loss of coverage, or gain of coverage.

If you experience a “qualifying event” or “family status change” you have 30 days from the date of the event or status change to make changes to your benefit elections during the plan year.

By proceeding, you agree that:

- All the information provided is accurate.
- You will provide the designated third party administrator with any required supporting documentation (marriage certificate, birth certificate(s), and Social Security Number(s) etc.) to properly enroll your dependent(s) on the benefit plan(s) elected.
- The information submitted represents your enrollment choice(s) and that you are authorizing contributions to be withheld from your pay on a pre-tax basis for the healthcare coverage selected.
- You authorize participating vendors to forward general information concerning medical services or supplies provided to you or to any of your family member(s) listed on the coverage for the purpose of review, investigation or payment of a claim. This authorization is valid for the duration of coverage.
- You will contact the Benefits Services Office immediately if your coverage level is incorrect, as you may be subject to a catch up deduction.

Questions and/or concerns: email pgcps.benefits@pgcps.org or contact 301-952-6600 for assistance.

Benefits Services

- Accept
 Decline

[Cancel](#) [Printable Page](#) [Next](#)

3. Please confirm each family member you are adding to your Life Insurance is listed in the box titled, “Contacts and Beneficiaries”.
 - a. If the name is not listed click Add a person and enter dependents information

Contacts and Beneficiaries

Name [Redacted]

Cancel Next

Add Another Person

Name	Relationship	Social Security Number	Birth Date	Update
[Redacted]	Spouse	[Redacted]	[Redacted]	
[Redacted]	Child	[Redacted]	[Redacted]	
[Redacted]	Child	[Redacted]	[Redacted]	

TIP Press update icon to validate address and other information.

Cancel Next

4. Click Next
5. Click Update Beneficiaries.
6. Click Next
7. Determine the amount you want to allocate to your primary and/or contingent beneficiary (ies). The amount needs to total 100%.

Update Beneficiaries

Name [Redacted]

Program Active Benefits Program

Back Next

Beneficiary Selection

Life Insurance : Basic Life Insurance

Family Members and Others

Beneficiary	Relationship	Social Security Number	Primary %	Contingent %	Clear
[Redacted]	Child	[Redacted]	<input type="text" value="0"/>	<input type="text" value="50"/>	
[Redacted]	Child	[Redacted]	<input type="text" value="0"/>	<input type="text" value="50"/>	
[Redacted]	Spouse	[Redacted]	<input type="text" value="100"/>	<input type="text" value="0"/>	

Recalculate

Primary %	Contingent %
100	100

TIP Total Percentages for the plan must equal 100

8. Continue to click Next until you get to the Confirmation Screen
9. Click Finish