

JUDICIARY BENEFITS CENTER
How to Enroll Guide

Judiciary Benefits

PHILOSOPHY

A goal of the judiciary is to be a model employer so it may attract and retain well-qualified employees. The judiciary's employee benefits program is an important tool in attracting and retaining these employees. Therefore, the judiciary's benefits program will be one that is responsive to the reasonable needs of employees, is competitive in the market place, and is fiscally responsible.

Your Federal Judiciary Benefits Program provides a wide range of benefits and choices so you can create a package to "BeneFit" your individual needs.



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Welcome: Your Federal Judiciary Benefits Program Web Site



Login page

Click on a heading to view links for additional information.



Login with Helpful Links



Log In | Contact Us | Help

FEDERAL JUDICIARY BENEFITS PROGRAM

User Name

Password

[Forgot your password?](#)

[Forgot your user name?](#)



Welcome

The Judiciary Benefits Center is your confidential, one-stop resource for information and tools designed to help you better manage your personal health and benefits.

Judiciary Benefits Center brings you information and tools to:

- Enroll in your benefits
- Track your Health
- And much, much more

If you're ready to take control of your health and benefits, and don't yet have a user name and password, select the "New Users - Register Here" button.

Already registered? Simply enter your user name and password to get started.

Helpful Links and Forms

Additional documents and forms are available to you upon login. Simply click on a heading below to view links to additional information.

+Enrollment and Benefits

- [Judiciary Benefits Center/How to Enroll Guide](#)
- [Five Easy Registration Steps](#)
- [Consider Enrolling in the FSA](#)

+Claim Forms

- [Health Care Reimbursement Claim Form](#)
- [Dependent Care Reimbursement Claim Form](#)
- [Dependent Care Processing Procedures](#)
- [Dependent Care Recertification Form](#)
- [Commuter Claim Form](#)

+FAQ's

- [Benefits Brochure](#)
- [Frequently Asked Questions](#)
- [Flexible Benefit OTC Guide](#)
- [Flexible Benefit Commonly Submitted Claim Reference Guide](#)
- [Eligible Expense Guide](#)
- [Privacy Laws and Concern](#)

Have a question or need help? Contact us at:

Judiciary Benefits Center Line: 1-888-442-FLEX (3539)
Benefits Counselors are available from 9:00 a.m. until 9:00 p.m., Eastern Time, Monday through Friday

Fax Line: 1-800-778-0045

Mailing Address: SHPS
Federal Judiciary Benefits Program
P.O. Box 35680
Louisville, KY 40232

Registration

Step 1

If your name contains any special characters or spaces, like the examples listed below, please enter them within the First and Last Name fields.

- Apostrophes: O'Malley
- Spaces: Donaldson Smith
- Periods: John.Hennessy
- Hyphens: Rogers-Peterson
- Suffixes: Smith Jr

*Required Fields are notated with an asterisk:

- First Name
- Last Name
- Date of Birth
- Social Security Number of Subscriber

Security: Is this site safe/secure?

Yes! This site utilizes proven methods to maintain the security of your information. These methods include: internal firewalls; security audits and assessments; Secure Socket Layers and Transport Layer Security (1024-bit keys for encryption); and user-level security controls. To learn more, please click on the "Privacy Policy" link at the bottom of any site page.

Step 2

You will need to enter your contact information:

*Required Fields are notated with an asterisk:

- Address Line 1
- Country
- City
- State
- Zip + 4
- Email
- Confirm Email
- Phone Number
- How did you hear about the portal?

Step 3

Your User Name is case sensitive and must:

- Be between 8 and 32 characters in length
- Begin with a letter
- Not contain any spaces

Step 4

To complete your account setup, you must first review and accept the Terms and Conditions. You must check the box indicating you accept and then click on "Create Account".

Step 5

Congratulations! Your registration is now complete and your account has been created. A confirmation email will be sent to the email address you provided with information regarding your account.

Personal Home Page

Home | My Links | My Profile | Logout | Contact Us | Help

BENEFIT FOR LIFE

FEDERAL JUDICIARY BENEFITS PROGRAM

SEARCH Health Library CR Search Health Medication GO

Welcome (my) Benefits (my) Health (my) Profile

Welcome to Judiciary Benefits Center

Re-enroll them this November! Now's the time to select your Flexible Spending Account(s) for 2011. You can also change your FEHB health insurance plan (or elect one if you're not now covered). And it's easy to enroll! Here's how:

Online

- Click the **(my) Benefits** tab at the top of this page
- Click the **Enroll or Get More Information** link
- Click **Annual Enrollment** (found in the link box on the left)

Telephone

- Call **1-888-442-FLEX (3539)**
- Available from 9:00 a.m. until 9:00 p.m., Eastern Time, Monday through Friday

Paper

- Click the **(my) Benefits** tab at the top of this page
- Click the **Access Judiciary Documents and Forms** link
- Scroll to "Flexible Benefit Programs" and click **Flexible Benefit Program Enrollment Form**.
- Scroll to "FEHB Program" and click **SF 2900**.

Consolidated Benefits Information

By clicking the below links, you can go directly to each of the websites connected to your Federal benefits.

BEHFEEDS
Enroll in the Federal Employees Dental and Vision Insurance Program (FEDVIP).

CEHM
Learn more about plans in the Federal health, dental and vision insurance programs.

Plan Smart Choices
This site offers tools to compare up to four benefit plans; find plans in your area; and to learn how to potentially save taxes through flexible spending accounts, health savings accounts or high-deductible health plans.

What's New:

Features Overview
Learn more about the Portal Features and Tools!
[Take me to Overview >](#)

Health News
Feature Story: The bugs... or more?
It's October. The holiday season is approaching, and soon most of the greeting cards in the stores say "happy holidays." But what if you're not happy?

Recent Headlines

- Many Americans Share Damned Study
- Female Carpenters Face a Heavier Toll: Study
- Health Care Reform Bill Boosts Outlook, Analysis
- Health Tip: Mold Can Be a Health Risk
- Health Tip: Catches Over Larynxes
- 40-Year-Old Girl Dies Shows Promise Against Aning

[More Health News >>](#)

My Health Trackers [GET MY TRACKERS >](#)

Blood Pressure [VIEW HISTORY >](#)

You have less than two entries saved for the Blood Pressure. Once you have two or more saved entries for this tracker, a chart will be displayed here to help you monitor any changes.

1 What are "messages" on this site?

Messages are unique communications just for you! Topics may include health education, benefits information and/or spending accounts updates. These messages help you get the most out of this site—so read them carefully—and check back often to stay up-to-date!

Why don't I see any messages?

Messages are driven by what we know about you. So, the more you use this site—the more targeted information we can provide!

2 What are "Manage Reminders?"

This tool lets you log future events that you want to remember, such as medical appointments or lab tests. By choosing a recurrence, you can be reminded on a regular basis about events important to you. (my) Reminders will send you an e-mail for each event on the reminder date that you choose.

3 What are "My Health Trackers?"

These tools allow you to monitor important health-related numbers, such as your weight, blood pressure and cholesterol. Enter your numbers into these tools regularly, and they will be displayed in a chart over different time periods. You can then print off this information to share with your doctor. It's a great way to follow your progress!

(my) Benefits Page

The screenshot shows the Federal Judiciary Benefits Program website. The main navigation bar includes 'Home', 'My Links', 'My Profile', 'Logout', and 'Contact Us'. Below the navigation bar is a search bar with 'Health Library' and 'OR' options. The main content area is divided into several sections:

- Benefits Summary:** A red box with the number '1' is placed over the 'Enroll or Get More Information...' link in the 'Other Helpful Links' section.
- My Current Benefits:** A table showing various benefits and their details.
- Spending Accounts:** A table showing account balances for Healthcare FSA, Transit, and Parking.
- Messages:** A section for viewing messages and managing reminders.

Benefit	Election	Coverage
Federal Employees Health Benefits (FEHB) Program	Blue Cross Blue Shield Service Standard-10	Self+Family-5
Premium Payment Plan	Premium Payment Plan Pre-Tax	PPP
Health Care Reimbursement Account	\$0.00	PRE-TAX
Dependent Care Reimbursement Account	\$0.00	PRE-TAX
Parking Reimbursement Account	\$230.00	PRE-TAX
Mass Transit Reimbursement Account	\$230.00	PRE-TAX
Federal Employees' Group Life Insurance (FEGLI) Program	X0 - Basic+Option B (5x)+Option A	FEGLI

Account	Balance
Healthcare FSA	\$0.00
Transit	\$0.00
Parking	\$0.00

1 This is where you will enroll in your benefits. See page 11 for detailed instructions on enrollment.

(my) Health Page

What is “(my) Health?”

This tool provides a number of different tools and resources, including a personal health assessment, health promotion information, and access to health-related news.



9

(my) Profile Page

What is “(my) Profile”?

You can change your contact information and password in the (my) Profile section. “My Preferences” reflects your selections for “My New Interests” as well as “My Health Trackers”. You may make changes and save updates at anytime. This information will be used to determine what messages you receive.



SHPS Judiciary Benefits Center Enrollment Modules

Annual Benefits Enrollment—page 11: During the Annual Enrollment Period, you can enroll in the **Premium Payment Plan (PPP)**, the **Federal Employees Health Benefits Program (FEHB)**, a **Health Care Reimbursement Account (HCRA)**, and a **Dependent Care Reimbursement Account (DCRA)**. To enroll in a **Parking Reimbursement Account** or **Mass Transit Reimbursement Account**, please access these benefits via the **Anytime Enrollment** module (information located on page 15).

Anytime Enrollment—page 15: You can enroll or make changes to your Parking Reimbursement Account or Mass Transit Reimbursement at any time during the year.

Qualified Life Events—page 16: You can make certain changes to your benefits elections throughout the year, if they meet the Internal Revenue Service requirements. If your situation meets the IRS requirements, you can make changes online to your Federal Employees Health Benefits coverage. To make changes to other benefits, contact **SHPS Judiciary Benefits Center** at **1-888-442-FLEX (3539)** for assistance.

New Hire Enrollment—page 18: If you are a newly hired employee, you have 60 days from your date of hire to enroll in the **Premium Payment Plan (PPP)**, the **Federal Employees Health Benefits Program (FEHB)**, a **Health Care Reimbursement Account (HCRA)**, and a **Dependent Care Reimbursement Account (DCRA)**. You can also access enrollment screens for the **Parking Reimbursement Account** or **Mass Transit Reimbursement Account** in this module; however you are not limited to the 60-day window and can enroll in these benefits at any time during the year.

Annual Benefits Enrollment Opportunity

Each year you will have an opportunity to review and change your benefit options for the upcoming Plan Year.

Once you have registered, you can begin to explore your options and make your enrollment decisions. Just follow the steps below:

1. Login with your user name and password.



2. Click on the (my)Benefits tab.



3. Click on **Enroll or Get More Information** to proceed with your enrollment.



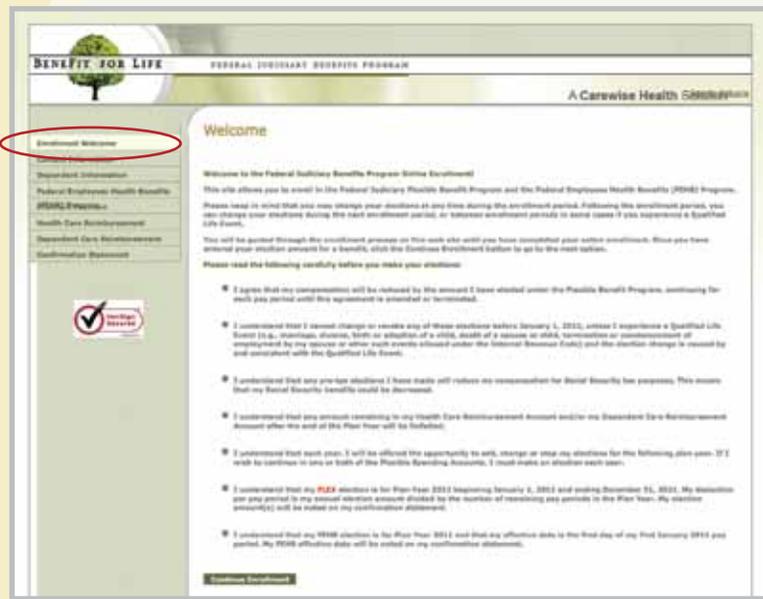
4. Click on Annual Enrollment in the left navigation bar.

Back to Portal
Contact Information
Current Elections
Qualified Life Events
Anytime Enrollment
Annual Enrollment
Reimbursement Accounts
Get Documents
Federal Employees' Group Life Insurance (FEGLI) Program
Contact Us
Return to Welcome



5. You will be brought to the welcome message for enrollment. Please read the information and select "Continue Enrollment" to proceed to the next section.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees Health Benefits (FEHB) Program
Premium Payment
Health Care Reimbursement
Dependent Care Reimbursement
Confirmation Statement



6. Enter your Contact Information.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees Health Benefits (FEHB) Program
Premium Payment
Health Care Reimbursement
Dependent Care Reimbursement
Confirmation Statement



10. Enter your HCRA election.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees Health Benefits (FEHB) Program
Premium Payment
Health Care Reimbursement
Dependent Care Reimbursement
Confirmation Statement

11. Enter your DCRA election.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees Health Benefits (FEHB) Program
Premium Payment
Health Care Reimbursement
Dependent Care Reimbursement
Confirmation Statement

NOTE: You can also enroll in a **Parking Reimbursement Account** or **Mass Transit Reimbursement Account** during Annual Enrollment. However, you must go to the **Anytime Enrollment** module to make your elections.

12. Congratulations! You have completed your enrollment. You can view, print, and email a copy of your **Confirmation Statement**.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees Health Benefits (FEHB) Program
Premium Payment
Health Care Reimbursement
Dependent Care Reimbursement
Confirmation Statement

Anytime Enrollment

You can elect to enroll in a Parking Reimbursement Account or Mass Transit Reimbursement Account at any time during the year.

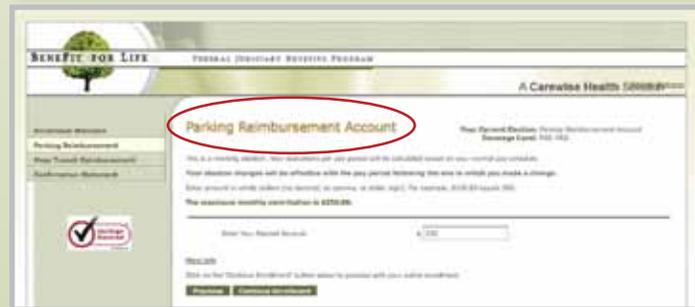
1. Click on **Anytime Enrollment** in the left navigation bar.



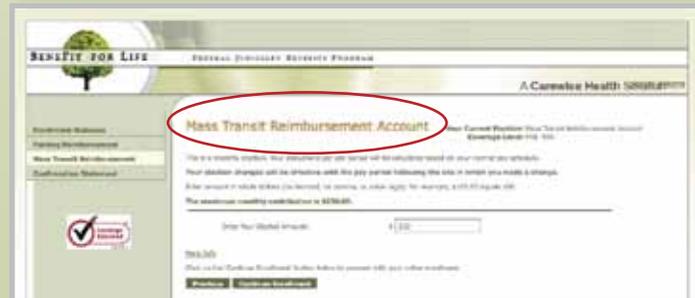
2. You will be brought to the welcome message for enrollment. Please read the information and select "Continue Enrollment" to proceed to the next section.



3. Enter your **Parking Reimbursement** election.



4. Enter your **Mass Transit Reimbursement** election.



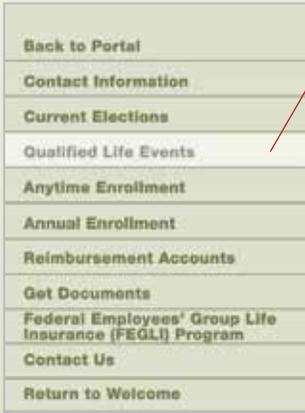
5. Congratulations! You have completed your enrollment. You can view, print, and email a copy of your **Confirmation Statement**.



Qualified Life Events

A Qualified Life Event (QLE) allows you to make changes to your benefits outside of Annual Enrollment. Your changes must be on account of, and consistent with, the event type. For example, if you were making a change as a result of having a child, you would be able to increase your benefits. You would not be allowed to decrease. Please refer to the full listing of QLE types on the web page.

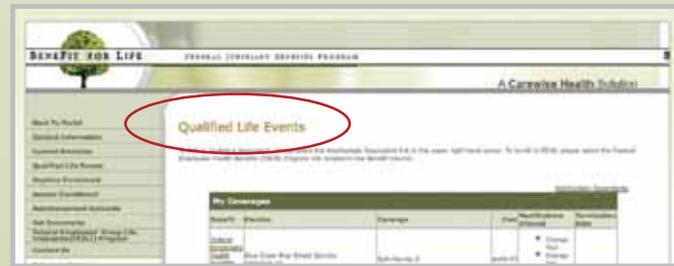
1. Click on **Qualified Life Events** in the left navigation bar.



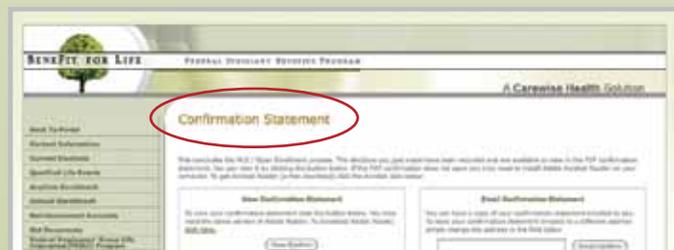
2. Make your **Qualified Life Event** selection from the drop down list, enter the date of your event, and select the "Add Event" button.



3. This screen allows you to make a change to your FEHB enrollment if an FEHB election change is on account of, and consistent with, your QLE.



4. Congratulations! You have completed your QLE. You can view, print, and email a copy of your **Confirmation Statement**.



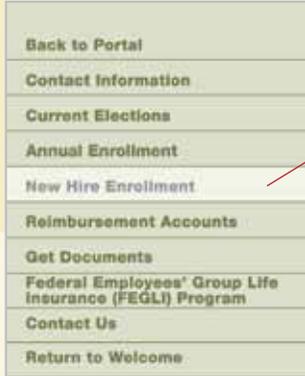
Or, you can call the SHPS Judiciary Benefits Center at 1-888-442-FLEX (3539) to give your FEHB change information (including the type and date of the Qualifying Life Event) to a SHPS Benefits Counselor. The Counselor will enter your enrollment into the SHPS system and send you a confirmation statement. Benefits Counselors are available from 9:00 a.m. until 9:00 p.m., Eastern Time, Monday through Friday.

- To make an election change for a Qualified Life Event to your Premium Payment Plan (PPP) election, your Health Care Reimbursement Account (HCRA) election, and/or your Dependent Care Reimbursement Account (DCRA) election, contact the SHPS Judiciary Benefits Center directly at 1-888-442-FLEX (3539). Benefits Counselors are available from 9:00 a.m. until 9:00 p.m., Eastern Time, Monday through Friday.

New Hire Enrollment

If you are a newly hired employee, you will automatically be guided to this page where you can learn about, and enroll in, your benefits.

1. Click on **New Hire Enrollment** in the left navigation bar.



2. You will be brought to the welcome message for enrollment. Please read the information and select "Continue Enrollment" to proceed to the next section.



3. Enter your Contact Information.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees' Health Benefits (FEHB) Program
Premium Payment Plan
Health Care Reimbursement
Dependent Care Reimbursement
Parking Reimbursement
Mass Transit Reimbursement
Confirmation Statement



4. Enter your Dependent Information (if applicable).

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees' Health Benefits (FEHB) Program
Premium Payment Plan
Health Care Reimbursement
Dependent Care Reimbursement
Parking Reimbursement
Mass Transit Reimbursement
Confirmation Statement



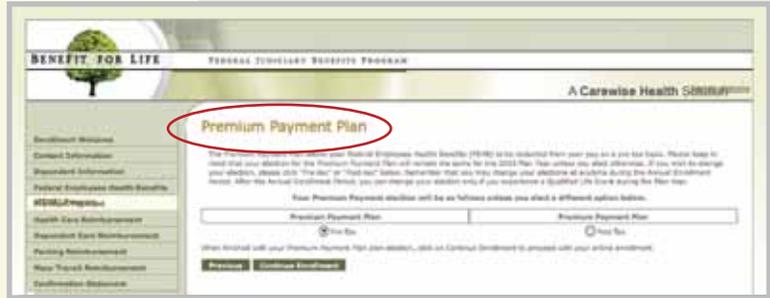
5. Select your FEHB Insurance Plan.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees' Health Benefits (FEHB) Program
Premium Payment Plan
Health Care Reimbursement
Dependent Care Reimbursement
Parking Reimbursement
Mass Transit Reimbursement
Confirmation Statement



6. Select your Premium Payment Plan election.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees' Health Benefits (FEHB) Program
Premium Payment Plan
Health Care Reimbursement
Dependent Care Reimbursement
Parking Reimbursement
Mass Transit Reimbursement
Confirmation Statement



7. Enter your HCRA election.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees' Health Benefits (FEHB) Program
Premium Payment Plan
Health Care Reimbursement
Dependent Care Reimbursement
Parking Reimbursement
Mass Transit Reimbursement
Confirmation Statement



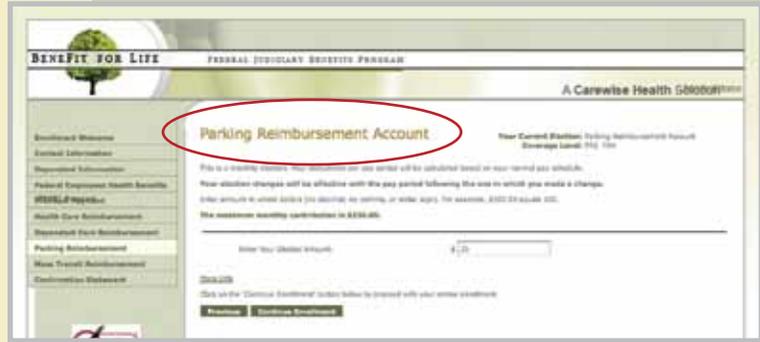
8. Enter your DCRA election.

Enrollment Welcome
Contact Information
Dependent Information
Federal Employees' Health Benefits (FEHB) Program
Premium Payment Plan
Health Care Reimbursement
Dependent Care Reimbursement
Parking Reimbursement
Mass Transit Reimbursement
Confirmation Statement



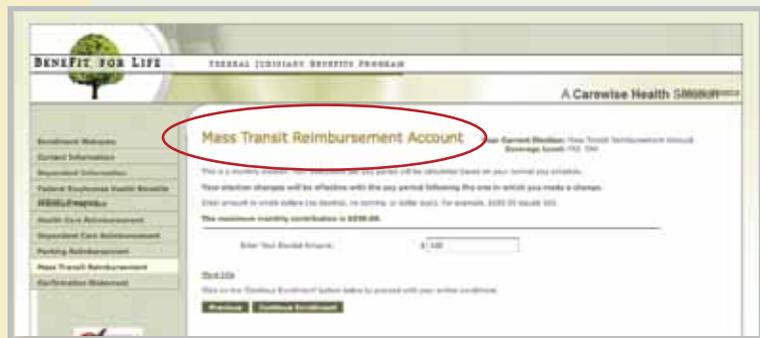
9. Enter your **Parking Reimbursement** election.

- Enrollment Welcome
- Contact Information
- Dependent Information
- Federal Employees' Health Benefits (FEHB) Program
- Premium Payment Plan
- Health Care Reimbursement
- Dependent Care Reimbursement
- Parking Reimbursement**
- Mass Transit Reimbursement
- Confirmation Statement



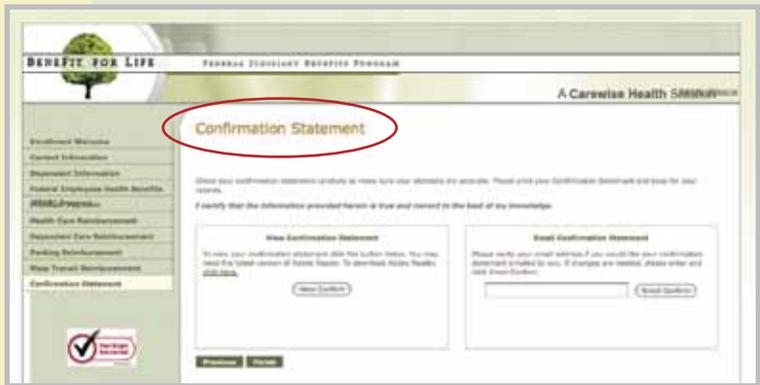
10. Enter your **Mass Transit Reimbursement** election.

- Enrollment Welcome
- Contact Information
- Dependent Information
- Federal Employees' Health Benefits (FEHB) Program
- Premium Payment Plan
- Health Care Reimbursement
- Dependent Care Reimbursement
- Parking Reimbursement
- Mass Transit Reimbursement**
- Confirmation Statement



11. Congratulations! You have completed your enrollment. You can view, print, and email a copy of your **Confirmation Statement**.

- Enrollment Welcome
- Contact Information
- Dependent Information
- Federal Employees' Health Benefits (FEHB) Program
- Premium Payment Plan
- Health Care Reimbursement
- Dependent Care Reimbursement
- Parking Reimbursement
- Mass Transit Reimbursement
- Confirmation Statement**



Get Documents Page

On the main portal home page under (my)Benefits, you can find a link to download important forms in pdf format.





BENEFIT FOR LIFE FEDERAL JUDICIARY BENEFITS

- Back To Portal
- Current Information
- Current Elections
- Qualified Life Events
- Anytime Enrollment
- Annual Enrollment
- Reimbursement Accounts
- Get Documents
- Federal Employees' Group Life Insurance (FGLI) Program
- Return to Welcome



Get Documents

The "Get Documents" service center allows you to download important forms in pdf format (PDF). You will need Adobe Acrobat Reader version 4.0.5 or higher to open the documents. To download the free Acrobat Reader software, click the Adobe icon below and follow the instructions.

Some documents are available in an interactive format that enables you to type or key in required information. However, the forms cannot be saved with your information for future use. We must print the form to submit it to SAPS.

Commuter Benefit Program	
Commuter Benefit Program Summary (Plan Description) L2502	A summary of the Federal Judiciary Commuter Benefit Program plan document, written in easy-to-understand language.
Commuter Benefit Program Enrollment Form	This form can be used to enroll in or change your contribution to the Commuter Benefit Plan at any time.
Commuter Benefit Program Claim Form	Used for filing claims for reimbursement from the Commuter Benefit Plan.
Flexible Benefit Program	
Flexible Benefit Program Summary (Plan Description)	A summary of the Federal Judiciary Flexible Benefit Program plan document, written in easy-to-understand language.
Flexible Benefit Program Enrollment Form	Use to enroll in the Health Care Spending Account (HCSA), the Dependent Care Spending Account (DCSA) and/or the Premium Reimbursement Plan (note: enrollment at any time other than Annual Enrollment may be limited. Please review the SFO for details).
Flexible Benefit Program HCSA Claim Form	Used for filing claims for reimbursement from HCSA.
Flexible Benefit Program DCSA Claim Form	Used for filing claims for reimbursement from DCSA.
DCSA Reconciliation Form	This form is used to re-apply claims for future dated DCSA claims once the services have been incurred.
Flexible Spending Eligible Expense Guide	Information about the types of expenses eligible for reimbursement under HCSA, DCSA and Commuter.
Dependent Care Tax Credit Worksheet	A worksheet that helps you determine which is better, the Dependent Care Reimbursement Account or the Dependent Care Tax Credit.
QIC Change Form	Used for notification of a "qualifying life event" to change your Flexible Benefit Program elections.
QIC Fact Sheet	What is a qualifying event?
Benefits/Health/OTC Reference Guide	A Quick Reference Guide outlining IRS defined categories for OTC medicines and products reimbursable under a HCSA.
Flexible Benefit Community Submitted Claim Reference Guide	A Quick Reference Guide outlining the most common items that are claimed under a HCSA, including the documentation required with a claim submission.
FERS Program	
FERS Handbook for Federal Employees	This handbook provides general information for employees about the Federal Employee Health Benefits (FERS) Program.
FERS Form	Federal employees use this form to enroll or make changes in the Federal Employee Health Benefits (FERS) Program.
FERS Biweekly Effective Date Schedule	FERS effective date schedule for those paid on a biweekly basis.
FERS Monthly Effective Date Schedule	FERS effective date schedule for those paid on a monthly basis.
FGLI Program	
FGLI Booklet for Federal Employees	This booklet provides general information for employees about the Federal Employees' Group Life Insurance (FGLI) Program.
Life Insurance Election - SF 2817	Eligible employees are automatically enrolled in Basic Insurance. You can elect optional insurance or waive your participation in this benefit by using this form.
Request for Insurance - SF 2822	Eligible employees use this form to request life insurance coverage by providing medical information. Your employing agency must complete Part A of this form.
Designation of Beneficiary - SF 2823	FGLI enrollees and assignees use this form to designate who should receive the death benefits. This form is NOT required if you have not filed a previous designation of beneficiary form and are satisfied with the standard order of precedence. Original Must Be Sent to Your Agency.
FGLI Biweekly Effective Date Schedule	FGLI effective date schedule for those paid on a biweekly basis.
FGLI Monthly Effective Date Schedule	FGLI effective date schedule for those paid on a monthly basis.
Enrollment Guides	
Benefits Structure	The Benefits Structure for the 2011 Plan Year.
Judiciary Benefits Contribution to Enroll Guide	Step-by-step instructions for utilizing the Judiciary Benefits Center web site.
2011 Annual Enrollment Fact Sheet	Information regarding the 2011 Annual Enrollment Period.
FLEX/Commuter Effective Date Schedules	
Biweekly Effective Date Schedule	Flex/Commuter effective date schedule for those paid on a biweekly basis.
Monthly Effective Date Schedule	Flex/Commuter effective date schedule for those paid on a monthly basis.

NOTE: To avoid experiencing problems, please ensure you have installed the latest version of Acrobat Reader:

 Simply click on the Adobe icon to download.
 This application is best viewed using Internet Explorer 5.0 or Netscape 5.0 or higher.

FEGLI Program Information Page

On this page you will find information on how to enroll in or make a change to your Federal Employees' Group Life Insurance (FEGLI) Program enrollment.



SF 2817 link opens

Use this form to elect or waive FEGLI Coverage.

Form Approved:
OMB No. 3206-0230

Life Insurance Election Federal Employees' Group Life Insurance Program See Privacy Act Statement on back of Part 3

1 General Instructions
By law, unless you waive all coverage or are ineligible, you are automatically covered for Basic life insurance as an employee. When you first become eligible for FEGLI, you may (1) elect Basic and any or all of the options, (2) elect Basic but waive all of the options, or (3) waive all life insurance coverage. If you are changing a previous election, see the back of Part 3 - Employee Copy.

- Read the back of Part 3 - Employee Copy carefully.
- Assignees completing this form should read Items 5 and 6 on the back of Part 3.
- Do not separate the parts. Give this form to your employing office which will complete the form and return your copy to you.

This election supersedes all previous elections.

2 Fill in identifying information concerning the employee.

Name (Last)	(First)	(Middle)	Date of birth (mm/dd/yyyy)	Social Security Number
Employing department or agency		OWCP claim number, if applicable	Location of department or agency where employee works (City, state, ZIP Code)	Daytime telephone number (including area code)

3 To elect or retain Basic, sign and date below. If you do not sign for Basic, you may not elect or retain any form of optional insurance. If you do not want any insurance at all, skip to Section 5.

Basic	I want Basic. I authorize deductions to pay my share of the cost. (Basic may be provided without cost to Postal Service employees.) Signature (Do not print. Only the Employee/Assignee may sign. Signatures by guardians, conservators or through a power of attorney are not acceptable.)	Date (mm/dd/yyyy)
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4 Optional
If you signed for Basic in item 3 above, you may elect or retain any or all of the following options (UNLESS you have previously waived any or all of these options, in which case you may elect only those options which you are eligible to elect as outlined in the FEGLI booklet). Sign the box(es) below for any option(s) you are eligible for and wish to elect or retain. If you do not sign for an option, you have waived it and your future opportunities to enroll in it are strictly limited. You will not be covered for any option(s) for which you do not sign below, regardless of whether you previously elected the option(s).

Option A - Standard	Option B - Additional	Option C - Family
I want Option A. I authorize deductions to pay the full cost.	I want Option B in the multiple of my annual basic pay I indicate below. I authorize deductions to pay the full cost.	I want Option C in the multiple I indicate below. I understand that each multiple is worth \$5,000 upon the death of my spouse, and \$10,000 upon the death of an eligible child.

FEGLI Frequently Asked Questions

This link takes you to the Office of Personnel Management's Insurance Programs FEGLI information page.

The screenshot shows the top of the OPM website with navigation links (OPM.gov Home, Subject Index, Important Links, Contact Us, Help) and a search bar. Below the header is a banner for "Insurance Programs" with a photo of a family and text stating it's the world's largest group life insurance program. A red-bordered box contains a warning about archive material. The main heading is "Federal Employees' Group Life Insurance Program Frequently Asked Questions". On the left is a sidebar with a "FAQs" section and a "Select Question" dropdown menu. The main content area lists "FEGLI FAQ TOPICS" including Assignments, Break in Service, Claims, Conversion, Court Orders, Decreasing Coverage, Designations of Beneficiary, Family Members, General Information, Increasing Coverage, Living Benefits, LWOP, Military and FEGLI, Miscellaneous, Payment, Portability, Retirement and FEGLI, Vatical Settlement, and Workers' Compensation and FEGLI. At the bottom, there is a "2004 Open Season Archive" section with links for Open Season FAQs and FEGLI Basics.

Contact Us:

You can fill out this form to provide comments or request additional information.

The "Contact Us" form includes a thank-you message and contact information for the SHPS Processing Center in Louisville, KY. It provides phone and fax numbers. The form fields include: a "Phone:" input field, a "Reason for Feedback:" dropdown menu with the text "Please select a reason...", and a "Comments:" text area.

Checklist

Use the following checklist to enroll:

- An Annual Enrollment Period is generally held every year during November and December. The actual dates for Annual Enrollment are announced in October.
- As a newly eligible judge or judiciary employee, remember that you have a specific timeframe to enroll in the various benefit programs offered at the judiciary.
- Remember, if eligible, you will automatically be enrolled in the pre-tax option of the Premium Payment Plan and Basic coverage of the FEGLI Program unless you waive or make an election.
- The Commuter Benefit Programs allow you to make changes at any time during the year.
- By providing SHPS your e-mail address when enrolling in the Flexible Benefit Programs and Commuter Benefit Programs, you can receive enrollment confirmations and claims payment acknowledgement via electronic mail.
- Call the SHPS Judiciary Benefits Center at 1-888-442-FLEX (3539) for assistance with registering and logging into the Judiciary Benefits Center at <http://judiciary.shps.com>.



Federal Judiciary Benefits Program
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