



**IMPORTANT QUESTION - HAVE YOU REGISTERED AND LOGGED-IN TO METLIFE AND DESIGNATED A BENEFICIARY FOR YOUR LIFE INSURANCE?**

**IMPORTANT: TO ALL COS EMPLOYEES ~ REGARDING YOUR \$25,000 EMPLOYER PAID LIFE INSURANCE AND ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE –**

The City of Springfield partnered with **METLIFE** March 2018 for the City-paid basic term life and accidental death and dismemberment (AD&D) insurance coverage in the amount of \$25,000 for both benefits. *(This amount is limited to 65% of such amount if you are age 65 – 69, amount will be 50% at age 70).* Employee beneficiary information did not carry over to MetLife during the vendor transition last year. Meaning, **all employees need to designate their beneficiaries online if you haven't already.** **Note: If you do not identify your beneficiaries online with MetLife, any proceeds upon your death will go to your estate.**



**HOW DO I UPDATE MY BENEFICIARIES ONLINE?** Review the instructions first and then access this link [www.benefitsconnect.net/springfieldil](http://www.benefitsconnect.net/springfieldil) to register and get started. *If you are directed to a site asking for a Company ID, this is the wrong site -- just close out and try the link again.*

**PROBLEMS REGISTERING ONLINE** – Please call GIS (MetLife) Benefits, Inc. at 815.941.4474 ext. 3 for online enrollment support and they will be able to assist you. Office is open Monday through Friday from 8:30 am to 5:00 pm CST. If you are prompted to leave a message, someone will return your call within one business day. Your City HR Department cannot update your beneficiaries for you.

**Additional note:** As always, it is extremely important to review your March paycheck deductions to confirm they reflect the correct deductions you were expecting for your supplemental policies to insure coverage. If you have any questions in regards to your benefit deductions, please contact an HR Benefits representative at 217-789-2446.

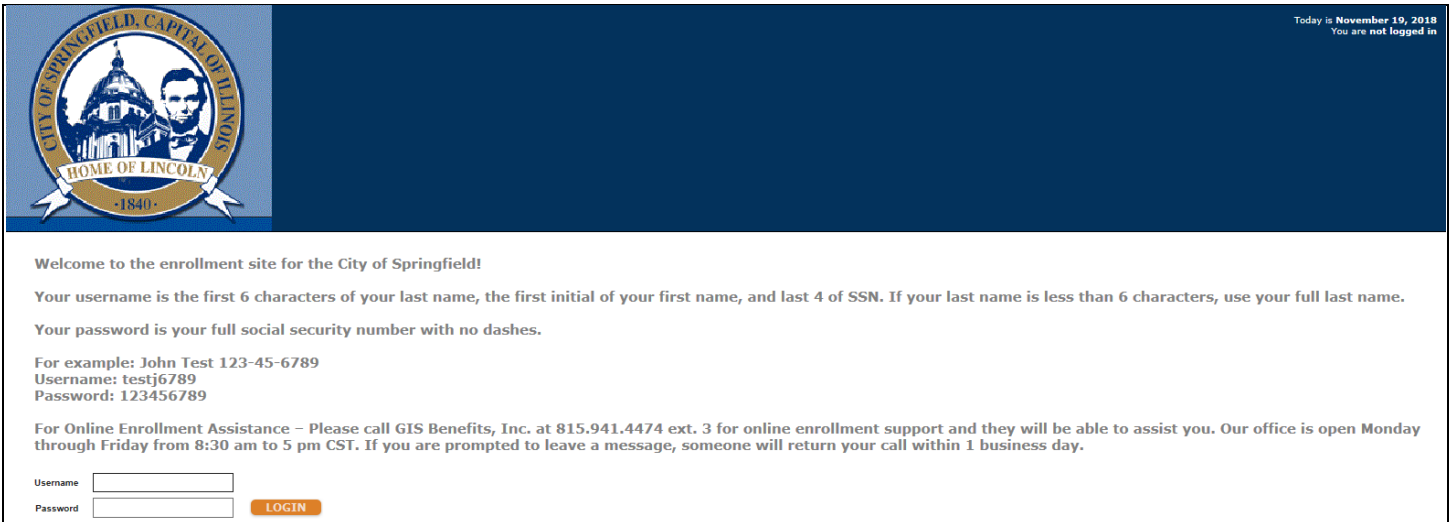
## INSTRUCTIONS FOR REGISTERING WITH METLIFE AND UPDATING BENEFICIARY INFORMATION

LET'S GET STARTED - Read instructions first before clicking on the link to familiarize yourself with the process.

If you already registered and just want to update or view your beneficiaries click on the link and login. See beneficiary instructions towards the end of these procedures.

CLICK on [www.benefitsconnect.net/springfieldil](http://www.benefitsconnect.net/springfieldil)

After clicking on the link, you will see the City of Springfield logo and the welcome page as shown below. *If you are directed to a site asking for a Company ID, which is the wrong site--just close out and try the link again.*



Welcome to the enrollment site for the City of Springfield!

Your username is the first 6 characters of your last name, the first initial of your first name, and last 4 of SSN. If your last name is less than 6 characters, use your full last name.

Your password is your full social security number with no dashes.

For example: John Test 123-45-6789  
Username: testj6789  
Password: 123456789

For Online Enrollment Assistance - Please call GIS Benefits, Inc. at 815.941.4474 ext. 3 for online enrollment support and they will be able to assist you. Our office is open Monday through Friday from 8:30 am to 5 pm CST. If you are prompted to leave a message, someone will return your call within 1 business day.

Username

Password

You must first register and enter your personal profile before you can update your beneficiaries. Please try to become accustomed to online involvement since it is imperative we reach this goal as a City of Springfield member. The City's HR Department cannot update your beneficiaries; you must complete this process online.

### User Name and Password

Initially your user name and password are defaulted to a standard format. Upon completing your first login you will be prompted to change your password. Let's walk through a sample login.

Your **user name** is made up of the **first six letters of your last name**, followed by your **first initial** and **the last four numbers of your social security number**. The **initial password** for the system is your **social security number** (without dashes).

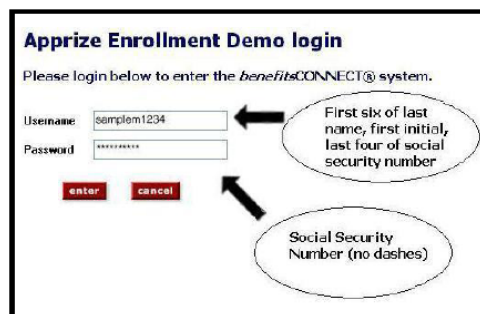
#### **Example:**

**Employee Name:** Matt Sample

**Social Security Number:** 949-12-1234

**User Name:** samplem1234

**Password:** 949121234



**Apprize Enrollment Demo login**

Please login below to enter the *benefitsCONNECT@* system.

Username:

Password:

First six of last name, first initial, last four of social security number

Social Security Number (no dashes)

You will then be prompted to change your password. Once your password has been changed, you will be directed to the employee menu as shown on the following page.

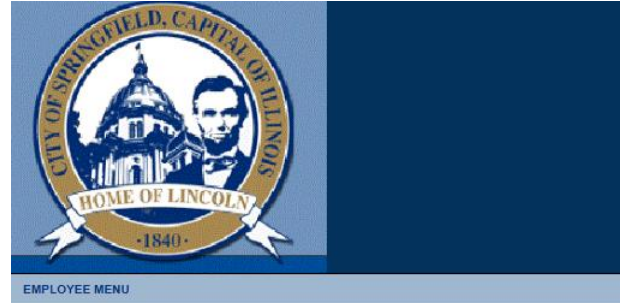
## Entering Personal Profiles



Password changed.



Click on Personal Information



Password changed.



Then click on Profile

After your initial login, the system will take you to the PERSONAL INFORMATION section. Please complete all fields. **Bolded** fields are required, and must be completed. When you have completed all of the fields, click *save & continue* to proceed to the next screen.

**personal information**

Please complete the 5-section enrollment process.

Click the "save" button at the bottom of the page after you've entered the profile information.

Fields in bold are required.

General Information

<b>First Name</b>	Jane
Middle Initial	
Last Name	Sample
Title	No Title
Social Security No.	123456789
Government Visa No.	Not specified
EEO Etnic Code	Select EEO Code
EEO Job Category	Select EEO Job Category
Gender	Female
Date of Birth	10/25/1993 state in full text, mm/dd/yyyy

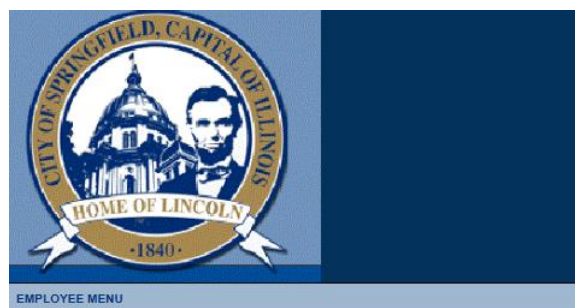
Contact Information

<b>Street Address</b>	
Street Address 2	

# Entering Beneficiary Information



Click on Benefits Plan Information



Then click on Beneficiary Information

## Editing or Viewing Your Beneficiary Information

**Step 1:** To update or view your Beneficiaries, click on Benefit Plan Information and select Beneficiary Information.

Name	Date of Birth	Social Security No.	Relation	Add to Policy
Steve Test	1/1/1980	123123122	Spouse	No Place Available

[Click here to add a new beneficiary record.](#)

Below is the list of existing beneficiary allocations.

Beneficiary Name	Percentage Primary	Contingent
Test, Steve	100	0

**Step 2:** You can review or edit your Beneficiaries at any time. To add a new Beneficiary, select "Click Here".

**Note:**  
All Primary percents must equal 100%.  
All Contingent percents must equal 100%.

To view your Plan Summaries you are enrolled in, click on "Benefit Plan Enrollment", then click on the eyeglasses next to any benefit to open the outline of benefits.

**WHAT IF I AM HAVING PROBLEMS REGISTERING ONLINE?** – Please call GIS (MetLife) Benefits, Inc. at 815.941.4474 ext. 3 for online enrollment support and they will be able to assist you. Office is open Monday through Friday from 8:30 am to 5:00 pm CST. If you are prompted to leave a message, someone will return your call within one business day.