



State of Maine

Office of Employee Health and Benefits

2020 Annual Open Enrollment Instructions

The Office of Employee Health and Benefits understands that due to this unprecedented time, most State of Maine employees are currently working remotely and may not have access to printers and/or scanners. To assist, we've created multiple avenues for the submission of open enrollment applications to adjust to this remote work environment. The available avenues include:

- **Option 1:** An online application that can be completed and submitted using a secure application portal found on our website.
- **Option 2:** A PDF version of the application that can be printed, completed, scanned and emailed back to info.benefits@maine.gov or mailed to **61 State House Station Augusta, ME 04330-0061**.
- **Option 3:** By Request Only: A hard copy of the application mailed to your home, completed, and mailed back to **61 State House Station Augusta, ME 04330-0061**.

Below are the provided instructions for each Open Enrollment avenue.

Option 1: Online application

1. Using **Google Chrome** direct yourself to:
https://www.maine.gov/bhr/oe/benefits/Open_Enrollment
2. Click on the portal link provided to redirect yourself to the online form.
3. Anything italicized with "*****" is information that is required.
4. Enter in "Subscriber Information".
5. When entering "Subscriber Information" insert the appropriate dashes when entering SSN, Date of Birth and telephone number (e.g. 000-00-000), 01/31/2020).
6. Complete "Employment Information". Once completed click "Continue to Benefit Plan Membership Information"
7. Begin "Benefit Plan Membership Information" section. Under this section Self-information is only required if you wish to change or delete your coverage.
8. If you choose to enroll a dependent, complete "Benefit Plan Membership Information" section for each dependent and attach any required documentation (e.g. birth certificate, marriage license) by clicking the "File" button and attach the appropriate document(s).

9. When filling out the “Benefit Plan Membership Information” section for either you or your dependents, please select “No changes” if you wish to keep any of your plans (Health, Dental and Vision) the same while making adjustments. (i.e. if you were previously only enrolled in the Health plan you would select “No changes”, but if you wish to now enroll in the Dental plan you would select “Enroll”).
10. Click “Add Member” after completing each “Benefit Plan Membership Information” section.
11. Once all “Benefit Plan Membership Information” sections you wish to have on your plan are complete, click “Continue” to review.
12. Review your application. If correct review the disclosure statement before clicking “The disclosure statement has been read and agreed to by the individual submitting this group benefit plan/enrollment change form.”.
13. Sign your first and last name, date the application, and click “Continue to Submit” to submit your application.

Option 2 A: PDF Version - 3 or less dependents

***Important note:** Please use *this option only if you intend to email the completed application from your SOM email using SOM intranet.*

1. Navigate to https://www.maine.gov/bhr/oeh/benefits/Open_Enrollment.
2. Click on the link that reads “Open Enrollment Application PDF”.
3. Print PDF File / Begin filling out the application
4. Once the application is completed, signed, and dated, scan the application to your place of choice (e.g. desktop, file folder, etc.) **or** enclose in an envelope if you wish to submit via USPS.
5. If you wish to submit your application via email, please name your file to read: “OE App Lastname.Firstname 1 of 1”, example: “OE App Doe.Jane 1 of 1”.
6. Submit your completed application and any needed dependent verification documents as an attachment within **one** email from your maine.gov email address, to info.benefits@maine.gov **OR** mail completed application and any needed dependent verification documents to **61 State House Station Augusta, ME 04330-0061**.

Option 2 B: PDF Version, + more than 3 child dependents

***Important note:** Please use *this option only if you intend to email the completed application from your SOM email using SOM intranet.*

1. Navigate yourself to https://www.maine.gov/bhr/oeh/benefits/Open_Enrollment.
2. Click on the link that reads “Open Enrollment Application PDF”.
3. Print 2 copies of the PDF File / Begin filling out the application
4. Once the first application is completed, dated and signed; scan the application to your place of choice (e.g. desktop, file folder, etc.) **or** enclose in an envelope if you wish to submit via USPS.

5. If you wish to submit via email name your first file to read: "OE App Lastname.Firstname 1 of 2", example: "OE App Doe.Jane 1 of 2".
6. Fill out second copy of application, this time only completing section 1: "**Subscriber Information**" and sections **5a** and **5b** for your additional child dependents.
7. Once the second application is completed, dated and signed; scan the application to your place of choice (e.g. desktop, file folder, etc.) **OR** enclose in the same envelope as application 1 if you wish to submit via USPS.
8. If you wish to submit via email name your second file to read: "OE App Lastname.Firstname 2 of 2", example: "OE App Doe.Jane 2 of 2".
9. Submit **both** of your applications and any needed dependent verification documents as an attachment within **one** email from your maine.gov email address, to info.benefits@maine.gov **OR** mail **both** of your applications and any needed dependent verification documents in one envelope to **61 State House Station Augusta, ME 04330-0061**.

Option 3: Mailed Application

***Important Note:** Please use this *option only if the other two are not available to you*.

1. Call the Office of Employee Health and Benefits at (207)-624-7380 or 1-800-422-4503 prior to **May 18th**.
2. Request that you be mailed either one (or two if you wish to enroll/edit more than 3 child dependents) hard copy versions of the benefits application.
3. Provide your home mailing address.
4. Once you receive the application via USPS, complete the application(s) and mail completed application(s) and any needed dependent verification documents to **61 State House Station Augusta, ME 04330-0061**.

ALL APPLICATIONS AND ACCOMPANYING DOCUMENTATION MUST BE RECEIVED BY THE OFFICE OF EMPLOYEE HEALTH AND BENEFITS BY 4:30PM, FRIDAY, MAY 29, 2020.

If you have further questions regarding open enrollment, please contact the Office of Employee Health and Benefits by calling (207)-624-7380 or 1-800-422-450