



Munis Self Service

Employee Self Service Open Enrollment

<https://wcpsmd.com/links/munis-time-card-and-employee-self-service>

*For questions regarding Munis Open Enrollment,
please email: WCPS_Benefits@wcps.k12.md.us*

Employee Self Service – Open Enrollment

<https://wcpsmd.com/links/munis-time-card-and-employee-self-service>

Employee Self Service (ESS) is the Munis® Self Service application created specifically for current employees to access personal benefit information.

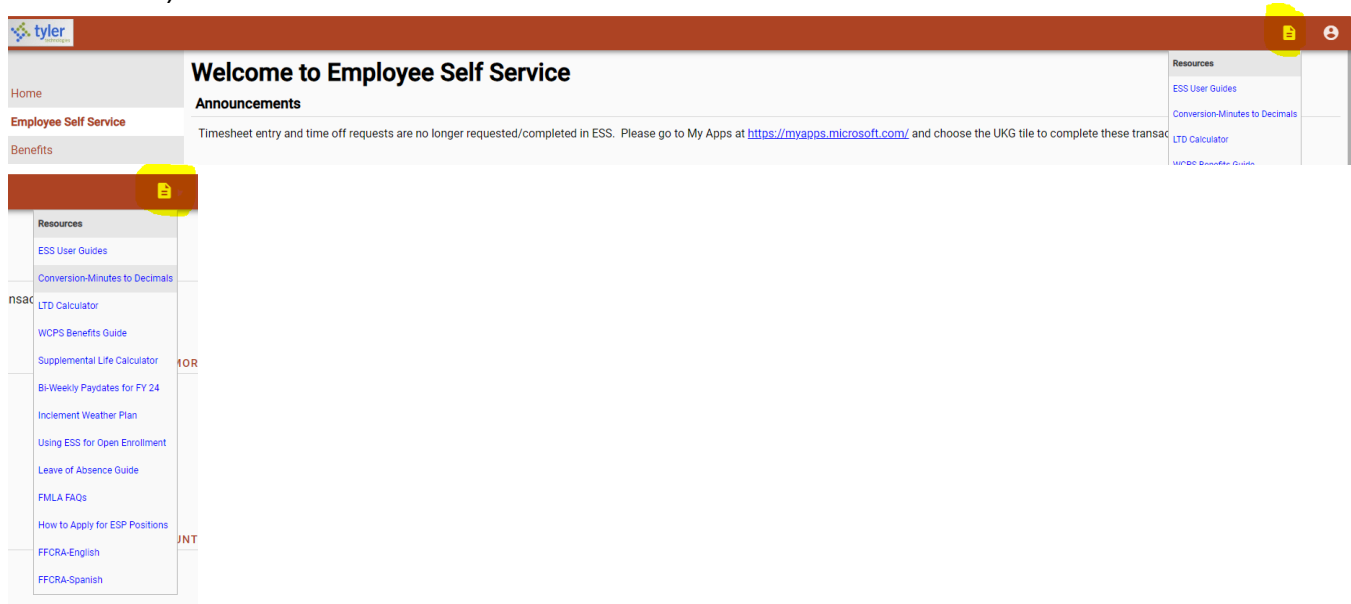
Employees must have a valid login to access the ESS application. This will be the same username and password that you use to login to your computer, email and pay information. **(Typically, the first 5 letters of your last name and first three of your first name and the password that you created.)** If you have any issues logging in, please contact the HELPDESK at 301-766-8911.

ESS Home Page

The home page of the ESS application displays personal information, organizational announcements, time-off, and pay details.

Resources

The Resources option in the ESS banner displays links to available employee resources, which can be helpful websites (such as health-insurer home pages), company pay schedules, or individual documents that are applicable to your organization (such as employee handbooks).



When you click a resources link, ESS opens it in a new browser window.

Benefits

When you click on the Benefits link, it will show your current benefit elections for the 7/1/2023 – 6/30/2024 plan year.

<ul style="list-style-type: none"> Home Employee Self Service Benefits Open Enrollment Life Events Certifications Employee Notifications Pay/Tax Information Performance Management Personal Information 	<h3>Existing Benefits</h3> <p>! You must complete your open enrollment before 5/23/2024.</p> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>MEDICAL</p> <p>IN/OUT NETWORK MEDICAL - EMPLOYEE + FAMILY 26 DEDUCTIONS – \$173.74</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>DENTAL</p> <p>DENTAL - EMPLOYEE + FAMILY 26 DEDUCTIONS – \$6.66</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>VISION</p> <p>VISION - EMPLOYEE ONLY 26 DEDUCTIONS – \$1.26</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>SUPPLEMENTAL LIFE INSURANCE</p> <p>SUPPLEMENTAL LIFE, 3 X SALARY - 26 DEDUCTIONS – \$33.91</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>VOLUNTARY AD&D</p> <p>VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT \$200,000 26 DEDUC – \$1.85</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>DEPENDENT LIFE INSURANCE</p> <p>DEPENDENT LIFE INSURANCE - 26 DEDUCTIONS – \$1.29</p> </div>
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Open Enrollment

By clicking on Open Enrollment, you can review current elections, make new elections, or change current elections. To keep the same benefit choice, do not make any changes. If you want to make an election of Decline benefit or edit, you can chose to do so.

For a specified benefit, click **EDIT** to make your election for the upcoming year.

The program displays the appropriate benefits selection page. To make an election, select the appropriate choice for each section.

Home
Employee Self Service

Benefits

Open Enrollment

Life Events

Certifications

Employee Notifications

Pay/Tax Information

Performance Management

Personal Information

Open Enrollment – Make Elections

Make a selection for each benefit, then click "Continue". You must submit this enrollment by 5/23/2024.

MEDICAL

IN/OUT NETWORK MEDICAL - EMPLOYEE + FAMILY 26 DEDUCTIONS – \$182.42
Existing benefit: IN/OUT NETWORK MEDICAL - EMPLOYEE + FAMILY 26 DEDUCTIONS – \$173.74

DECLINE EDIT

DENTAL

DENTAL - EMPLOYEE + FAMILY 26 DEDUCTIONS – \$6.79
Existing benefit: DENTAL - EMPLOYEE + FAMILY 26 DEDUCTIONS – \$6.66

DECLINE EDIT

VISION

Election not made
Existing benefit: VISION - EMPLOYEE ONLY 26 DEDUCTIONS – \$1.26

DECLINE NO CHANGES SELECT

SUPPLEMENTAL LIFE INSURANCE

Election not made
Existing benefit: SUPPLEMENTAL LIFE, 3 X SALARY - 26 DEDUCTIONS – \$33.91

DECLINE NO CHANGES SELECT

VOLUNTARY AD&D

Election not made
Existing benefit: VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT \$200,000 26 DEDUC – \$1.85

DECLINE NO CHANGES SELECT

Benefits – MEDICAL

[WCPS medical plan comparison](#) | [Cigna website](#)

Please choose from one of the available medical/rx plans. Make sure to choose the correct level of coverage. *Employee only; *Employee + Child(ren) - no spouse; *Employee + Spouse - no children; *Family - employee, spouse and one or more children.

**IN/OUT NETWORK MEDICAL -
EMPLOYEE ONLY 26 DEDUCTIONS**

Pay period employee cost **\$72.04**
Pay period employer cost \$408.24
Employee annual cost \$1,873.04
Employer annual cost \$10,614.24

**IN/OUT NETWORK MEDICAL -
EMPLOYEE + CHILD(REN) 26
DEDUCTIONS**

Pay period employee cost **\$110.37**
Pay period employer cost \$625.44
Employee annual cost \$2,869.62
Employer annual cost \$16,261.44

**IN/OUT NETWORK MEDICAL -
EMPLOYEE + SPOUSE 26 DEDUCTIONS**

Pay period employee cost **\$144.09**
Pay period employer cost \$816.49
Employee annual cost \$3,746.34
Employer annual cost \$21,228.74

**IN/OUT NETWORK MEDICAL -
EMPLOYEE + FAMILY 26 DEDUCTIONS** Coverage can be added for additional dependents

If the benefit you select requires that you specify dependents or beneficiaries, select Add a New Dependent or Add existing dependent.

**IN/OUT NETWORK MEDICAL -
EMPLOYEE + SPOUSE 26 DEDUCTIONS**

Pay period employee cost **\$144.09**
Pay period employer cost \$816.49
Employee annual cost \$3,746.34
Employer annual cost \$21,228.74

Coverage must be added for exactly 1 dependent

+ ADD NEW DEPENDENT

Add existing dependent

Note: **Add New Dependent**, as applicable, to enter personal details for dependents not already in the system. **Add existing dependents** is dependents in the system currently.

Add a new dependent

First name *

Middle initial

Last name *

Suffix

Date of birth *

Gender *

Relationship *

SSN # (include dashes)

Date of Birth Format is mm/dd/yyyy

SSN# Format is xxx-xx-xxxx

All fields with an * are required.

For Relationship field, ONLY select CHILD or SPOUSE. **DO NOT** select any other option.

Click **continue**.

SUPPLEMENTAL LIFE INSURANCE	No Election Made	LIFE, 1 X SALARY - 26 DEDUCTIONS \$0.00 details	Decline benefit Change New Election
VOLUNTARY AD&D	No Election Made	VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT \$50,000 26 DEDUCT \$0.46 details	Decline benefit Change New Election
DEPENDENT LIFE INSURANCE	No Election Made	DEPENDENT LIFE INSURANCE - 26 DEDUCTIONS \$1.29 details	Decline benefit Change New Election
LONG TERM DISABILITY	No Election Made	LONG TERM DISABILITY - A&S 26 DEDUCTIONS \$0.00 details	Decline benefit Change New Election

All costs are per pay period. Your estimated total cost per pay period is **\$172.16**. The [paycheck simulator](#) can show how this effects your net pay.

When you have completed defining your new election, click **Continue**. The program refreshes the page with the updated information. Continue making all of your appropriate enrollment choices. When you have completed your open enrollment choices, the program displays a summary for each benefit type.

Review your enrollment

Review

MEDICAL

ELECTION - PREMIUM MEDICAL - EMPLOYEE + FAMILY 26 DEDUCTIONS

TERRI TYLER

TOMMY TYLER

Pay Period Employee Cost \$167.74

Pay Period Employer Cost \$729.25

Annual Employee Cost \$4,361.24

Annual Employer Cost \$18,960.50

Submit Choices

Modify

Cancel

PLEASE MAKE SURE ALL OF YOUR COVERED DEPENDENTS ARE LISTED ON EACH COVERAGE YOU WANT THEM TO HAVE. IF THEIR NAMES ARE NOT LISTED ON THE COVERAGE, YOU HAVE NOT SELECTED FOR THEM TO HAVE THAT COVERAGE FOR THE NEW PLAN YEAR. To make changes, click **Modify**. Once you have verified that your selections are correct, click **Submit Choices**.

The program displays a Confirmation page. You are encouraged to take a screen shot of this confirmation page or print it for your records. You will get an email confirmation as well.

Confirmation

✔ Your enrollment was submitted successfully. You can make changes until your choices have been approved. You may want to print this page for your records.

If you have added new dependents onto applicable plans, please send proof of relationship to the HR Benefits team as soon as possible (marriage and/or birth certificates). Changes/additions to long-term disability (LTD) and/or supplemental life require an Evidence of Insurability form.

To modify before the end of open enrollment, click Make changes to your new elections. Remember to resubmit!

You can now...

- [Make changes to your new elections](#)
- [Use other services](#)
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