

## EMPLOYEE CHECKLIST

60-80 DAYS BEFORE	YOUR DATE:
-------------------	------------

### Research prior spend needs

- Review previous year's medical, dental and vision expenses
- Identify doctor(s), prescriptions, and other required expenses for the next year
- Examine previous year's FSA and HSA spending and forecast next year's expense
- Select which family members will be on your employer-sponsored plan

45-50 DAYS BEFORE	YOUR DATE:
-------------------	------------

### Company roll-out and communication

- Create a list of questions to review with your employer or HR administrator
- Attend company learning session on changes to benefits or added benefits
- Review company-provided materials, brochures and benefits
- Add important dates and deadlines to personal calendar
- Identify which plans align best to your required doctor(s) and expenses
- Review changes to HSA, FSA caps, co-pays, premiums and deductibles
- Discuss plan options with partner/spouse if applicable

30-45 DAYS BEFORE	YOUR DATE:
-------------------	------------

Selection period is: \_\_\_\_\_. You must enroll or decline by: \_\_\_\_\_.

- Select & enroll in your medical, dental and vision plans
- Choose your FSA or HSA contribution amounts
- Enroll in additional perks programs based on anticipated usage

AFTER EFFECTIVE DATE	YOUR DATE:
----------------------	------------

### ID cards received

- Ensure you received ID cards for applicable medical, dental and vision plans

AFTER FIRST PAYCHECK	YOUR DATE:
----------------------	------------

### Review for accuracy

- Review paycheck and ensure contribution amounts are accurate