

# CTA Benefits Open Enrollment

- The following steps will show you how to:
  - Enter dependent information
  - Review existing coverage
  - Make benefit changes
  - Review benefit elections
  - Submit benefit elections
  - Confirm benefit elections

Welcome To CTA HR Benefits  
Employee Self-Service Online

**Benefit Enrollment**

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NOTE: This is a demo of the Benefits Self-Service process to help you prepare for enrolling online.

Login

Username

Password

Login

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Step	Action
1	Log into Oracle using your user name and password.

## Click Forgot User Name/ Password Link

## Answer Security Authentication Questions

## CTA Password Reset Confirmation

ORACLE® E-Business Suite  
Diagnostics Home Preferences

Login

Username

Password

✓ TIP: Forgot your Username/Password?

2

cta  
Diagnostics Home Preferences

CTA Employee Identification - Step 2 of 3  
Please complete the following authentication questionnaire.  
Click the "Next" button to continue with Password Reset.

Primary Residence Zip Code

Last 4 Digits of SSN

Month of Birth

cta  
Diagnostics Home Preferences

CTA Employee Password Reset Confirmation  
ERP Password has been successfully reset! Please note:  
your Username and/or Password and click "Ok" to return  
to the Oracle Login screen.

Username: E012345  
Password: CTACV#1234

## 1 Enter Badge Number

## Reset Username and Temporary Password

cta  
Diagnostics Home Preferences

CTA Employee Identification - Step 1 of 3  
Please enter your Badge Number and click the "Next" button  
to continue with Password Reset.

Badge Number:

3

cta  
Diagnostics Home Preferences

CTA Employee Identification - Step 3 of 3  
Warning! You are about to reset your Password.  
Please click "Ok" to continue.

- Write down Username and temporary Password exactly as displayed.
- Click "OK" to return to the Oracle Login screen.
- Enter Username and reset Password.

**Note:** You will be immediately prompted to change your Password after you click "Login."

### Quick & Easy!









**For assistance call  
Oracle Hotline  
(312) 681-2225  
Then press 4**

Step	Action
2	To change your password follow the onscreen instructions.



## Navigator

-  [CTA Employee Self Service](#)
-  [CTA iRecruitment Employee Candidate](#)
-  [CTA Learner Self-Service](#)

### CTA Employee Self Service

-  [All Actions Awaiting Your Attention](#)
-  [Personal Information](#)
-  [Special Information Types](#)
-  [Extra Information Types](#)
-  [Payslip](#)
-  [Direct Deposit](#)
-  [Online Tax Form](#)
-  [Employee W-2](#)
-  [Benefits](#)
-  [Employee Views](#)

### Professional Details

-  [Education and Qualifications](#)
-  [Other Professional Awards](#)

## Favorites

[Edit Favorites](#)

You have not selected any favorites. Please use the "Edit Favorites" button to set up your favorites.

Step	Action
3	Click on the CTA Employee Self Service link , then click on Benefits in the middle of the page.



Online Enrollment - View current enrollment or enroll in CTA's benefit plans

Name [REDACTED]

[Cancel](#)[Next](#)

# CTA HR Benefits

## Employee Self-Service Online

Cigna is our medical provider

CVS Caremark is our pharmacy benefit provider

Humana/CompBenefits is our dental provider

Please note, eligible dependents will not be enrolled for coverage without proper documentation. [Click here](#) for documentation requirements. You must fax proper documentation to HR Benefit Services at 312 275-8722 or mail it to HR Benefits, 567 W. Lake, 3rd floor, Chicago, IL 60661-1495.

To make corrections to your dependent information contact HR Benefit Services at 312-681-2225; press 3.

<a href="#">Add New Dependent</a>			
Name	Relationship	Social Security Number	Birth Date
[REDACTED]	Spouse	[REDACTED]	[REDACTED]
	Son		
	Daughter		

### CTA BENEFIT RESOURCES:

<a href="#">CTA Benefits</a>
<a href="#">Cigna</a>
<a href="#">My Cigna</a>
<a href="#">Cigna EAP</a>
<a href="#">CVS Caremark</a>
<a href="#">Humana</a>
<a href="#">Flexible Spending Accounts</a>
<a href="#">CTA 401K &amp; 457 Plans</a>
<a href="#">Galls-CTA Uniforms</a>

Step	Action
4	You should now see your Covered Dependents. To enroll a dependent, click the "Add New Dependent" button.



## Add Dependents and Beneficiaries

Name [REDACTED]

Cancel

Apply

YOU CAN ADD A DEPENDENT OR BENEFICIARY HERE; HOWEVER, THE DEPENDENT OR BENEFICIARY IS NOT ACTUALLY ADDED TO THE INSURANCE PLAN UNTIL PROPER DOCUMENTATION IS RECEIVED FROM YOU BY THE BENEFIT SERVICES DEPARTMENT. [CLICK HERE FOR DOCUMENTATION REQUIREMENTS.](#)

\* Indicates required field

## Name and Relationship

\* Relationship

Relationship Start Date

(example: 30-Oct-2014)

Title

\* First Name

Middle Name

\* Last Name

Suffix

(example: Jr.)

## Miscellaneous Information

\* Date of Birth

Mandatory Field

Social Security

(example: 123-45-6789)

Is this Person Disabled?

Gender

Mandatory Field

Cancel

Apply

Step	Action
5	Enter the required information, then Click "Apply" (Repeat steps to add more than one dependent). NOTE: <u>Carefully read the instructions at the top of the page.</u> Dependents will not be added until documentation is received by HR Benefit Services.

**Online Enrollment - View current enrollment or enroll in CTA's benefit plans**

Name

[REDACTED]

# CTA HR Benefits

## Employee Self-Service Online

**Cigna is our medical provider****CVS Caremark is our pharmacy benefit provider****Humana/CompBenefits is our dental provider**

Please note, eligible dependents will not be enrolled for coverage without proper documentation. [Click here](#) for documentation requirements. You must fax proper documentation to HR Benefit Services at 312 275-8722 or mail it to HR Benefits, 567 W. Lake, 3rd floor, Chicago, IL 60661-1495.

To make corrections to your dependent information contact HR Benefit Services at 312-681-2225; press 3.

<input type="button" value="Add New Dependent"/>			
Name	Relationship	Social Security Number	Birth Date
[REDACTED]	Spouse	[REDACTED]	[REDACTED]
	Son		
	Daughter		

**CTA BENEFIT RESOURCES:**

<a href="#">CTA Benefits</a>
<a href="#">Cigna</a>
<a href="#">My Cigna</a>
<a href="#">Cigna EAP</a>
<a href="#">CVS Caremark</a>
<a href="#">Humana</a>
<a href="#">Flexible Spending Accounts</a>
<a href="#">CTA 401K &amp; 457 Plans</a>
<a href="#">Galls-CTA Uniforms</a>

Step	Action
6	You should now see your Covered Dependents and the dependents you added. To view your current coverage, Click the "Next" button.



## Benefit Enrollments

Name [REDACTED]  
Event Name **Open**Program **CTA Craft Union Benefits**  
Enrollment Period **13-OCT-2014 - 31-OCT-2014**[Update Benefits](#)

## Welcome To CTA HR Benefits Employee Self-Service Online

### Benefit Enrollment

#### Important Reminder:

Unless you have an eligible change in family status, open enrollment is the only time of the year when you can:

- make changes to medical and dental plans;
- opt-out of currently elected plans (documentation is required);
- add or delete dependents (documentation is required)

Outside of Open Enrollment you have 31 days from an eligible change in family status (i.e., new marriage, new birth, adoption, or divorce) to enroll eligible dependents in your CTA medical/dental plans.

Benefit representatives are available M-F, 8:00 a.m. to 4:30 p.m. at (312) 681-2225; press 3.

If you experience technical difficulty enrolling through self-service, contact HR Technology at (312) 681-2225; press 4.

#### Benefit Selections

Plan	Option	Coverage Start Date	Pre Tax Cost	FSA Pre Tax Cost
Medical - <a href="#">Cigna Ratified</a>	Family (90%-70%)	10-Aug-2014	90.00	0.00
Dental - <a href="#">Humana Dental PPO - Ratified</a>	Family	10-Aug-2014	7.18	0.00
Life Insurance - Basic AD&D As Of Jan 1st	1x Annual Salary	01-Jan-2015	0.00	0.00
Life Insurance - Basic Life As Of Jan 1st	1x Annual Salary	01-Jan-2015	0.00	0.00
Total			97.18	0.00

#### Covered Dependents

Plan	Coverage Start Date	Dependent	Relationship	Social Security Number	Coverage End Date	Option
Medical - Cigna Ratified	10-Aug-2014	[REDACTED]	Spouse	[REDACTED]		Family (90%-70%)
	10-Aug-2014		Son			
	10-Aug-2014		Daughter			
Dental - Humana Dental PPO - Ratified	10-Aug-2014		Spouse	[REDACTED]		Family

**TIP** The values displayed above are based on the default elections.

[Update Benefits](#)

Step	Action
7	You should now see your Current Enrollment. To make changes, Click on the “Update Benefits” button.



Update Benefits: Update Enrollments

Name

Event Name

Open

Program

Enrollment Period

CTA Craft Union Benefits

13-OCT-2014 - 31-OCT-2014

Recalculate

Back

Next

Currency = US Dollar

Medical

PLEASE SELECT YOUR MEDICAL PLAN AND OPTION

(ADDING NEW DEPENDENTS REQUIRE DOCUMENTATION I.E., MARRIAGE LICENSE, BIRTH CERTIFICATE, ETC. YOUR DEPENDENTS WILL NOT BE COVERED UNTIL DOCUMENTATION IS RECEIVED.)

Indicates Certification is required.

Plan	Option	Select	Biweekly Deduction	Annual Opt Out Provision (paid bi-weekly)
Waive Health Plan		<input type="checkbox"/>		950.00
Cigna Ratified				
	Single (90%-70%)	<input type="checkbox"/>	48.46	
	Family (90%-70%)	<input checked="" type="checkbox"/>	90.00	
	Single (80%-60%)	<input type="checkbox"/>	36.92	
	Family (80%-60%)	<input type="checkbox"/>	69.23	

Dental

PLEASE SELECT YOUR DENTAL PLAN AND OPTION

(ADDING NEW DEPENDENTS REQUIRE DOCUMENTATION; I.E., MARRIAGE LICENSE, BIRTH CERTIFICATE, ETC. YOUR DEPENDENTS WILL NOT BE COVERED UNTIL DOCUMENTATION IS RECEIVED.)

Plan	Option	Select	Biweekly Deduction
CompDent Prestige 75 - Ratified			
	Single	<input type="checkbox"/>	0.00
	Family	<input type="checkbox"/>	3.69
Humana Dental PPO - Ratified			
	Single	<input type="checkbox"/>	0.00
	Family	<input checked="" type="checkbox"/>	7.18

Life Insurance

YOU CANNOT MAKE CHANGES TO LIFE INSURANCE. THE FOLLOWING IS FOR YOUR INFORMATION.

Plan	Option	Select	Coverage
Basic AD&D As Of Jan 1st	1x Annual Salary	<input checked="" type="checkbox"/>	
Basic Life As Of Jan 1st	1x Annual Salary	<input checked="" type="checkbox"/>	

Supplemental Life

Plan	Option	Select	Coverage	Biweekly Deduction
Supplemental Life As Of Jan 1st				
	1x Annual Salary	<input type="checkbox"/>		4.59

Recalculate

Back

Next

Step	Action
8	To change health/dental plans, click the box next to the Plan/Option of your choice (SCROLL DOWN TO SEE ALL PLANS/OPTIONS) then click the “Next” button.



Update Benefits: Cover Dependents

Name

Event Name **Open**

Program **CTA Craft Union Benefits**

Enrollment Period **13-OCT-2014 - 31-OCT-2014**

[Back](#)

[Next](#)

Dependent Selection

☒ TIP Missing Persons may not be eligible.

Medical : Cigna Ratified Family (90%-70%)

Dependent	Relationship	Social Security Number	Cover
REDACTED	Spouse	REDACTED	<input checked="" type="checkbox"/>
	Daughter		<input checked="" type="checkbox"/>
	Son		<input checked="" type="checkbox"/>

Dental : Humana Dental PPO - Ratified Family

Dependent	Relationship	Social Security Number	Cover
REDACTED	Spouse	REDACTED	<input checked="" type="checkbox"/>
	Daughter		<input checked="" type="checkbox"/>
	Son		<input checked="" type="checkbox"/>

Step	Action
9	Check the box under “Cover” for the dependent(s) you added. Remove the “v ” in the Cover box to delete a dependent, then click the “Next” button.

[Update Enrollments](#)[Cover Dependents](#)[Confirmation Statement](#)[Confirmation](#)

Your changes have been saved. To make additional changes, return to the Overview page and repeat the process. Please print this page for your records.

**Confirmation Statement**

Name [REDACTED]  
Event Name **Open**

Program **CTA Craft Union Benefits**  
Enrollment Period **13-OCT-2014 - 31-OCT-2014**

[Back](#)[Finish](#)[Printable Page](#)

## Congratulations! 🎉

You have successfully enrolled yourself into CTA Benefits. New dependents require documentation before coverage is approved. If you have chosen to waive coverage, you are required to provide proof of outside coverage to HR Benefit Services. To make additional changes, return to the Overview page and repeat the process. Please print a copy of the confirmation page for your records.

**FOR ANY QUESTIONS REGARDING YOUR BENEFIT PLANS CALL:****(312) 681-2225; press 3****FOR TECHNICAL ISSUES WITH SELF-SERVICE CALL:****(312) 681-2225; press 4****Benefit Selections**

Plan	Option	Coverage	Coverage Start Date	Pre Tax Cost	FSA Pre Tax Cost
Medical - <a href="#">Cigna Ratified</a>	Family (90%-70%)		10-Aug-2014	90.00	0.00
Dental - <a href="#">Humana Dental PPO - Ratified</a>	Family		10-Aug-2014	7.18	0.00
Life Insurance - Basic AD&D As Of Jan 1st	1x Annual Salary	[REDACTED]	01-Jan-2015	0.00	0.00
Life Insurance - Basic Life As Of Jan 1st	1x Annual Salary	[REDACTED]	01-Jan-2015	0.00	0.00
<b>Total</b>				<b>97.18</b>	<b>0.00</b>

**Covered Dependents**

Plan	Coverage Start Date	Dependent	Relationship	Social Security Number	Coverage End Date	Option
Medical - Cigna Ratified	10-Aug-2014	[REDACTED]	Spouse	[REDACTED]		Family (90%-70%)
	10-Aug-2014	[REDACTED]	Son			
	10-Aug-2014	[REDACTED]	Daughter			
Dental - Humana Dental PPO - Ratified	10-Aug-2014	[REDACTED]	Spouse	[REDACTED]		Family

I authorize the Chicago Transit Authority to deduct my health care premiums on a pre-tax basis under the rules of Section 125 of the Internal Revenue Code.

[Back](#)[Finish](#)[Printable Page](#)
[Benefits Enrollment](#) | [Current Benefits](#) | [Home](#) | [Logout](#) | [Preferences](#) | [Help](#)

Step	Action
10	Review your elections and dependent information – carefully review messages at the top of the page. <u>To send a copy of the Confirmation Statement to your email, Click on the “Printable Page” button, select “File” at the top of the screen, scroll down to “Send” and over to “Page by E-mail”.</u> Click “Finish” to return to the Self-Service home page and logout to exit.