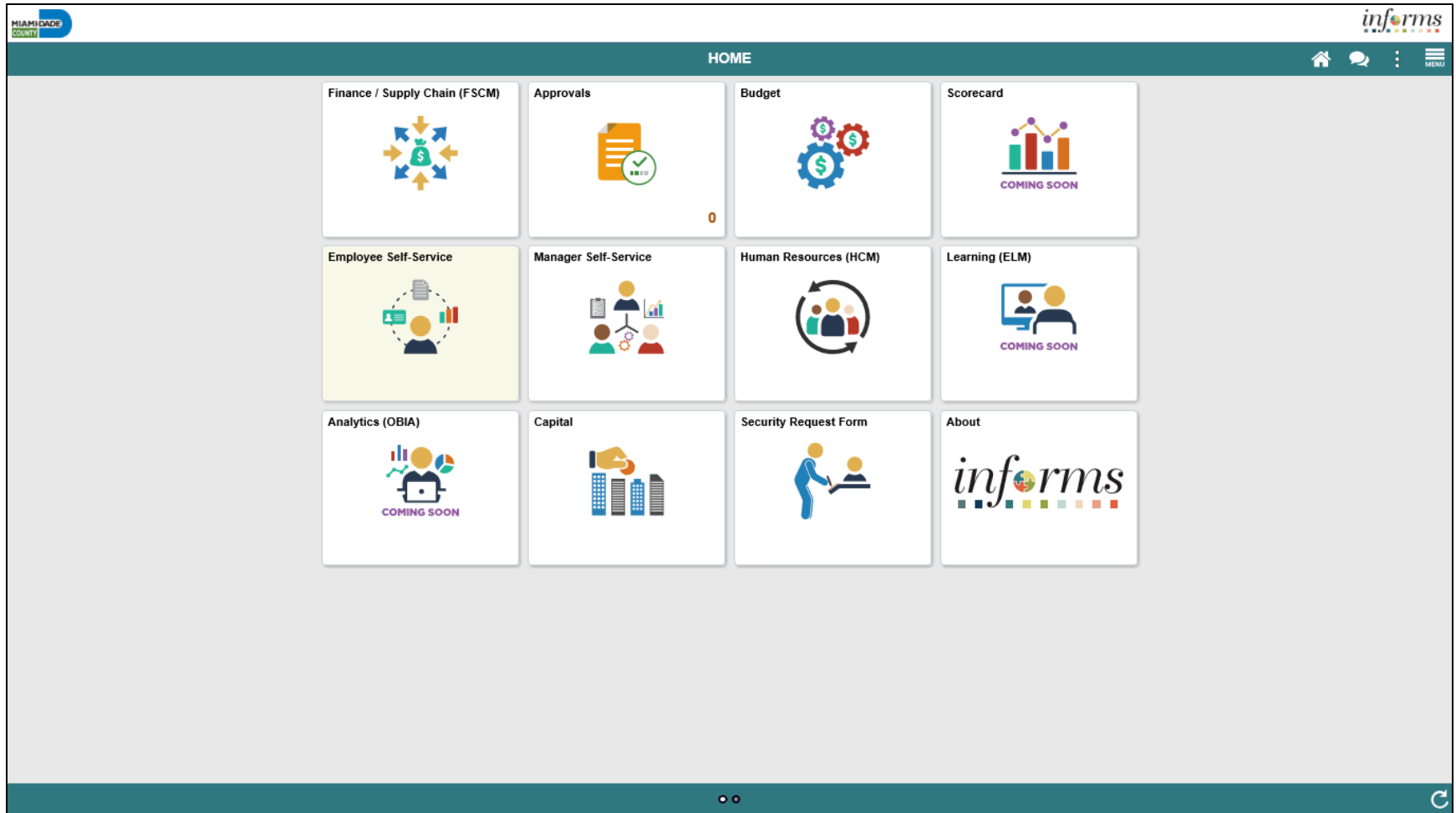




Remove a Dependent During Open Enrollment

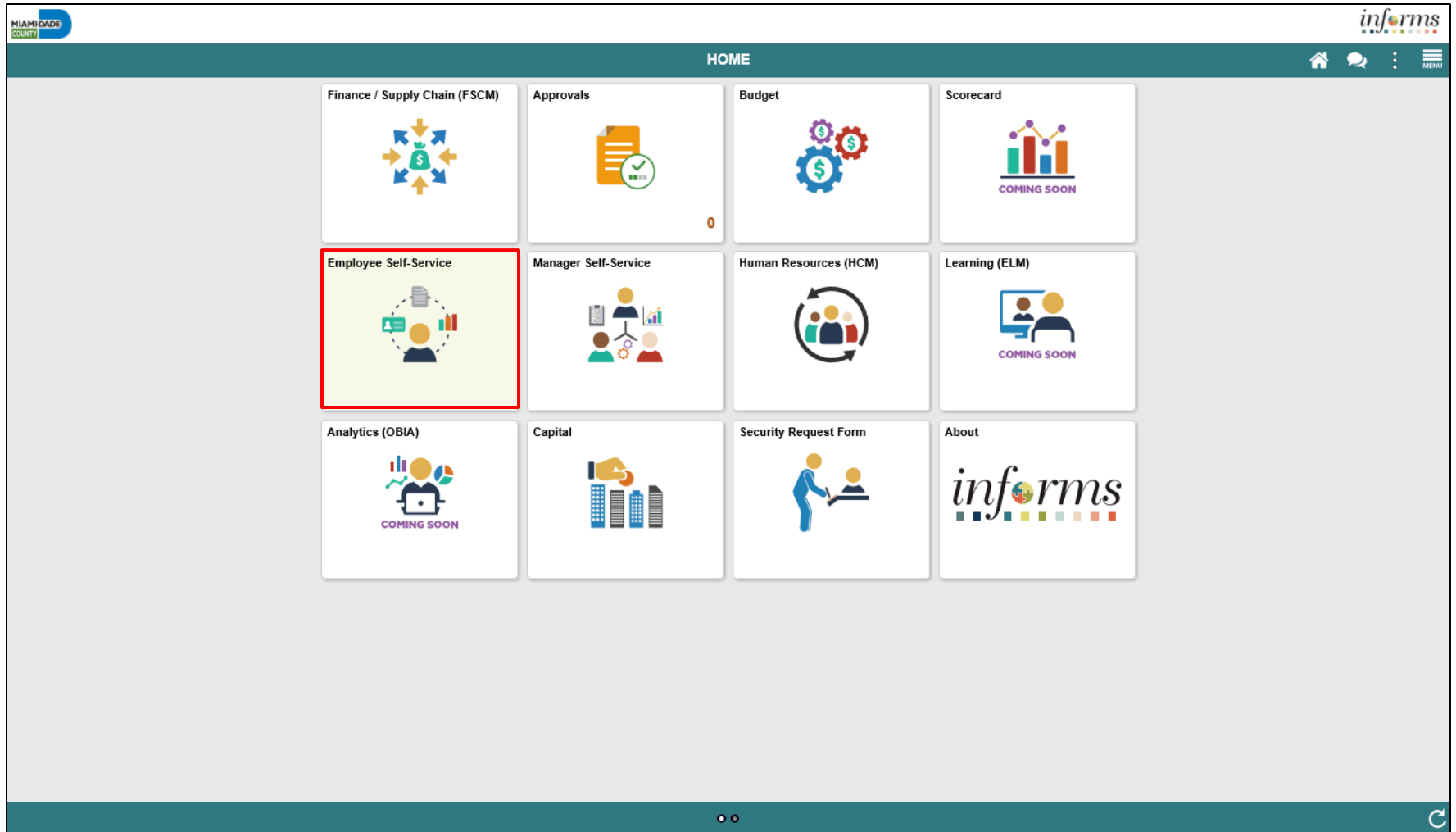
Visit the INFORMS home page at <https://informs.miamidade.gov/>

If not already logged in, enter your login credentials.



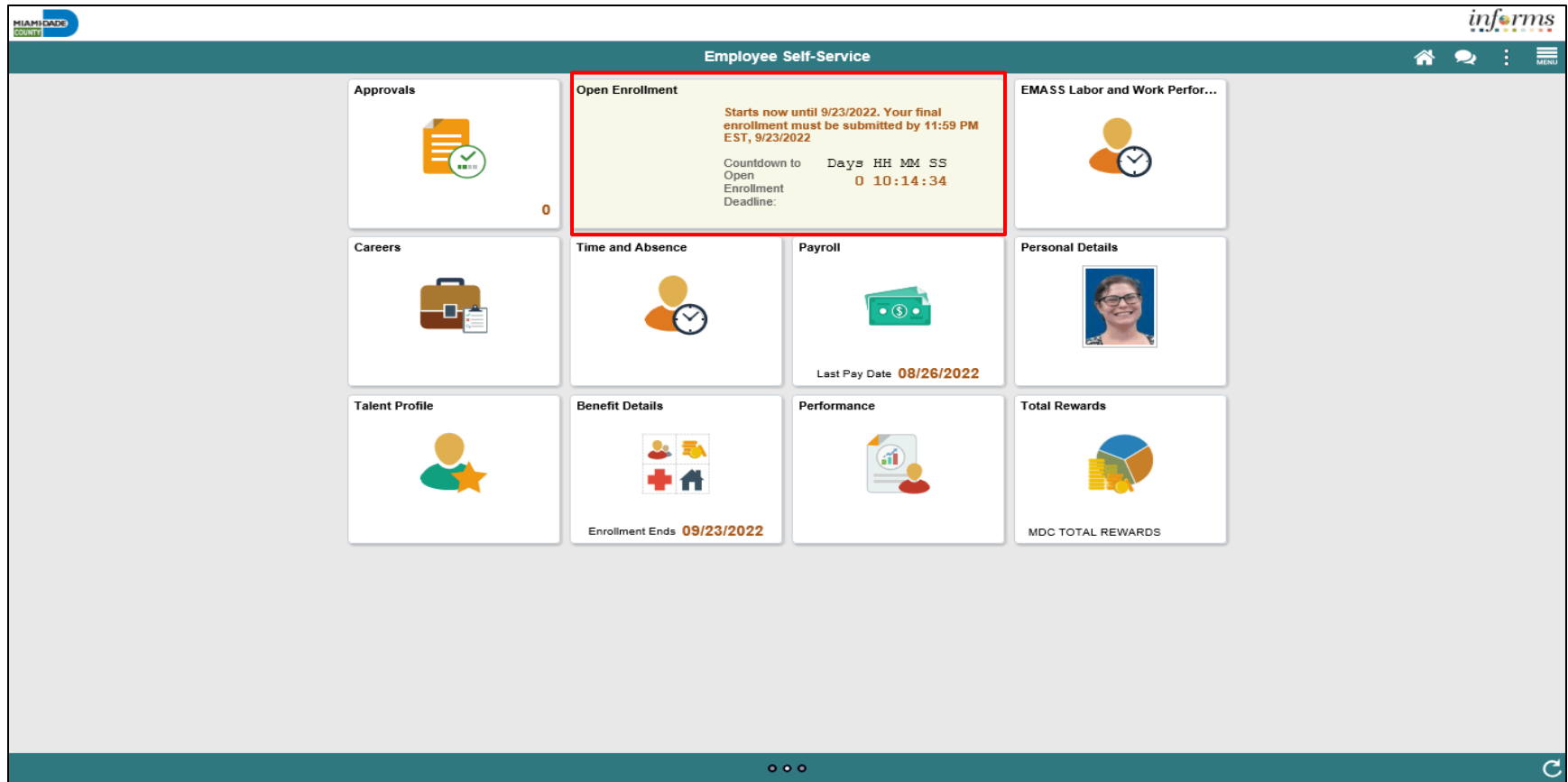
Step 1:

Click the **Employee Self-Service** tile.



Step 2:

Click the **Open Enrollment** tile.



Employee Self-Service

Open Enrollment

Starts now until 9/23/2022. Your final enrollment must be submitted by 11:59 PM EST, 9/23/2022

Countdown to Open Enrollment Deadline: Days HH MM SS 0 10:14:34

Approvals

Carers

Talent Profile

Time and Absence

Benefit Details

Enrollment Ends 09/23/2022

Payroll

Last Pay Date 08/26/2022

Performance

EMAAS Labor and Work Perform...

Personal Details

Total Rewards

MDC TOTAL REWARDS

Step 3:

Click the **Benefits Enrollment** button.

Next >

Welcome ● Visited	Task: Welcome <p>Open enrollment is your annual opportunity to modify your benefit choices. The video gives you step by step instruction on how to enroll your benefits. Your elections will begin on 1/1/2026.</p> <p>IMPORTANT OPEN ENROLLMENT REMINDERS:</p> <ul style="list-style-type: none"> Effective 1/1/2026, Aetna will be our new medical insurance carrier. Your Aetna medical coverage and benefits will be the same as your current coverage. Your online Open Enrollment form will reflect the Aetna plan that corresponds with your current coverage. The Flexible Spending Account (FSA) does not automatically roll over. You must enroll in the plan every year during Open Enrollment to continue coverage. ONE-TIME OPPORTUNITY! If you are enrolling in the LOW OPTION for Short Term Disability or Long Term Disability, no Statement of Health is required. For any other new enrollment or coverage increase, you must complete and submit the Statement of Health form. Click here for the form. ONE-TIME OPPORTUNITY! Employees currently enrolled in Optional Life coverage with 1x, 2x or 3x salary may increase to 4x salary without completing Evidence of Insurability. To make an election for Optional Life coverage, visit the Minnesota Life benefits portal at Minnesota Life. Submit proof of eligibility for newly added dependents before Open Enrollment closes. Submit Affidavit of Dependent Eligibility for your age 26-29 dependents enrolled in County medical coverage. Remove any ineligible dependents from your coverage before Open Enrollment closes. If you are waiving County medical coverage, go into the Medical section and select Waive - Decline Coverage. Click SUBMIT ENROLLMENT to complete your elections. Then, click ENROLLMENT PREVIEW STATEMENT to view and print the confirmation of your elections.
Dependent Info ✓ Complete	
Benefits Summary ● Visited	
Benefits Enrollment ✓ Complete	
Summary ● Visited	
Benefits Statements ● Visited	

Step 4:

Click the tile for the benefit plan from which you wish to remove dependents.

[< Previous](#)
[Next >](#)

Welcome
● Visited

Dependent Info
✔ Complete

Benefits Summary
● Visited

Benefits Enrollment
✔ Complete

Summary
● Visited

Benefits Statements
● Visited

Task: Benefits Enrollment

* Indicates required field

The Enrollment Overview displays which benefit options are open for elections/changes. Once you have clicked **SUBMIT ENROLLMENT**, click **ENROLLMENT PREVIEW STATEMENT** to view and print the confirmation of your elections.

▼ **Enrollment Summary**

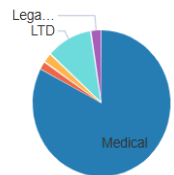
Your Pay Period Cost **\$285.50**

Full Cost **\$285.50**

Status **Pending Review**

Enrollment Preview Statement

Submit Enrollment



Benefit Plans

Medical

Current Aetna-Select Advantage HMO
New Aetna-Select Advantage HMO
Status **✔ Changed**
⚙ 2 Dependents

Pay Period Cost **\$236.00**

Review

Dental

Current Delta Dental PPO Enriched
New Delta Dental PPO Enriched
Status **Pending Review**
⚙ 0 Dependents

Pay Period Cost **\$5.45**

Review

Vision

Current Humana Vision Enriched
New Humana Vision Enriched
Status **Pending Review**
⚙ 0 Dependents

Pay Period Cost **\$6.18**

Review

Life

Short-Term Disability

Long-Term Disability

Step 5:

Check the box next to the dependent you wish to remove from coverage.
Click the **DONE** button. Procedure completed.

Cancel

Medical

Done

All of our medical choices promote wellness as part of their benefits and are available to protect you and your dependents if you become sick or injured. Enrollment in this benefit may require proof of coverage.

▼ **Enroll Your Dependents**

Dependents that the employee has registered are listed here. Select the Add/Update Dependent button to view, update or add a new dependent.

Dependents	Relationship
<input checked="" type="checkbox"/> JASON W HILL	Spouse
<input type="checkbox"/> Jane Doe	Child

Add/Update Dependent

▼ **Enroll in Your Plan**