

Review Current Benefit Elections
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The tasks in this documentation provide end users with the tools to enter data and collect data in NIS. It is the responsibility of the agencies to comply with State Statutes, Federal Rules and Regulations, and State policies. For further information concerning State Statutes and policies, please refer to both internal agency resources and the Department of Administrative Services website: <http://www.das.state.ne.us/>.

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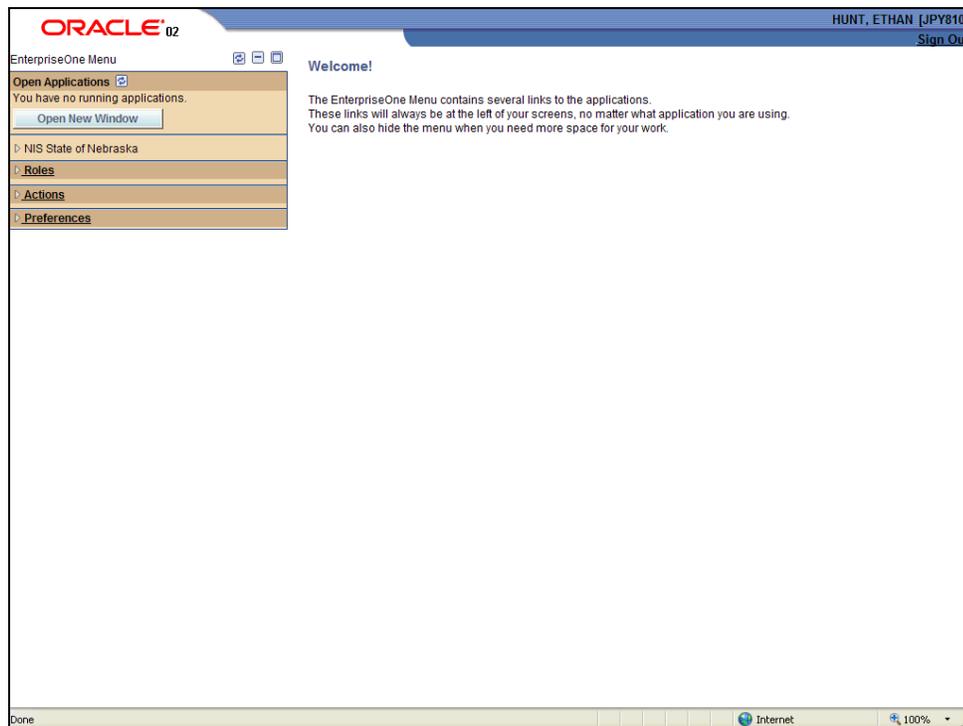
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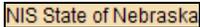
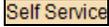
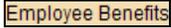
Review Current Benefit Elections

Review Current Benefit Elections

Procedure

In this lesson you will learn how to review your current benefits elections.

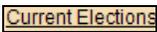


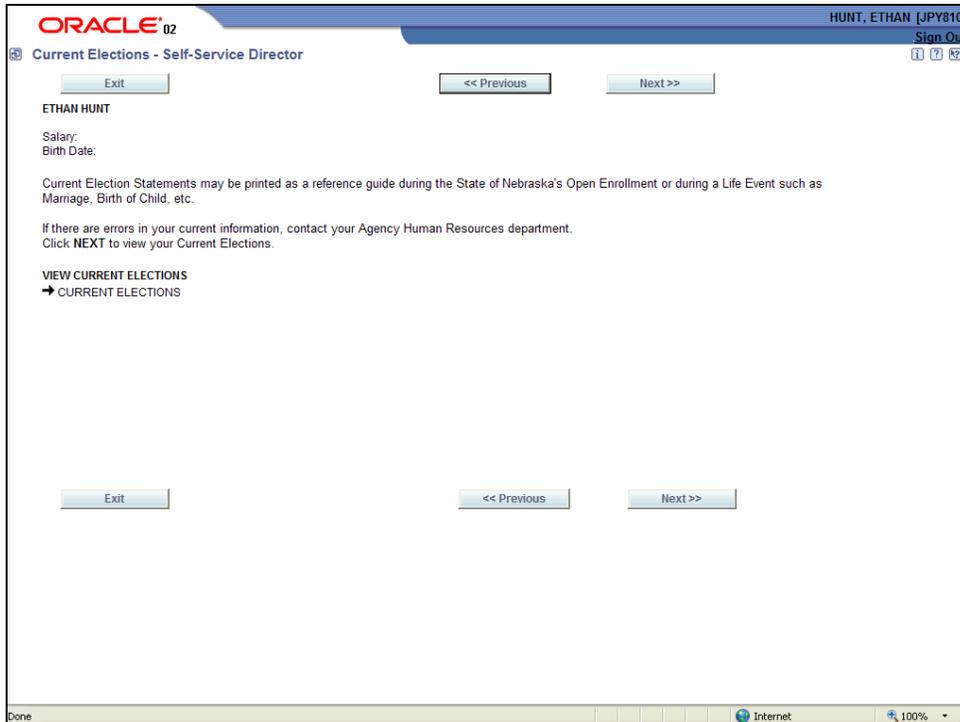
Step	Action
1.	Click the NIS State of Nebraska link. 
2.	Click the Self Service link. 
3.	Click the Employee Benefits link. 

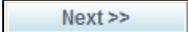
Training Guide

Review Current Benefit Elections



Step	Action
4.	Click the Current Elections link. 
5.	On Current Elections – Self-Service Director screen, read the text before viewing your current elections.



Step	Action
6.	To review your current elections click the Next >> button. 
7.	Review your current benefit information.

ORACLE 02 HUNT, ETHAN [JPY810] Sign Out

Current Elections - CURRENT ELECTIONS

Exit << Previous Next >>

[PRINT a Copy of This Statement](#)

Current Elections

Benefits as of: 05/15/09

ETHAN HUNT Employee Number:
Tax Id:

Total Employee Cost: \$ 235.02 (per pay period)
Total Employer Cost: \$ 751.71 (per pay period)

Totals May Include Amounts From Categories Not Shown

Benefits Category	Benefits Plan Selected	Employee Cost (per pay period)	Employer Cost (per pay period)
MEDICAL BENEFITS	FAMILY CHOICE HEALTH BWKLY	\$ 199.69	\$ 751.21
DENTAL	FAMILY DENTAL BIWEEKLY	\$ 34.22	\$ 0
BASIC LIFE INSURANCE BENEFITS	Basic Life Insurance Biweekly	\$ 0	\$.50
LONG TERM DISABILITY	WAIVER - LONG TERM DISABILITY	\$ 0	\$ 0
VISION BENEFITS	WAIVER - VISION	\$ 0	\$ 0
ACCIDENTAL DEATH & DISMEM	BIWEEKLY ACC DEATH & DISMEMBERMENT	\$.05	\$ 0
FLEX DEPENDENT	WAIVE FLEX DEPENDENT CARE	\$ 0	\$ 0
FLEX MEDICAL	WAIVER - FLEXIBLE SPENDING ACCOUNTS	\$ 0	\$ 0
LIFE - DEPENDENT	LOW OPTIONAL DEPENDENT LIFE FAMILY	\$ 1.06	\$ 0
LIFE - OPTIONAL LIFE	WAIVER OPTIONAL LIFE	\$ 0	\$ 0
Cost Per Pay Period:		\$ 235.02	\$ 751.71

Step	Action
8.	Be sure to scroll down to make sure you see all of your information.
9.	You can print a copy of the screen by clicking the PRINT a Copy of This Statement link at the bottom of the screen. The screen will print to the local printer set up with your computer. If you have difficulty with the printer or need a printer set up for your computer contact your IT staff.
10.	When you are finished reviewing click the Next >> button. 
11.	End of Procedure.