From your Benefits Dashboard – Click on the Manage button on the Manage Information tile

| 1 | BENEFITS | | | | |
|---|---------------------|--|---|------------------------|----------------|
| | | | | | |
| ¥ | Current Benefits | | Report a Qualifying Change | Manage Information | Manage More |
| | Û | Renew you current benefits of overhood continuation satements rolated to benefit changes. | Additionore a dependent or report any contribut allows you to make changes outside of the yearly encolment period. //DECLARE AN EVENT | Vew your personal info | R HSA Election |
| | Additional Benefits | | Forms & Plan Documents | | |
| | 0 | Additional benefits complement benefits provided by your employer. | Find borreft forms and plan documents you need here. | | |
| | | (| (• VEN ALL | | |

It will take you to the below screen, Manage Your Info – Dependents & Beneficiaries. Next to Dependents name, click EDIT (you only need to edit one of the dependents, you do not need to click EDIT next to each one).

| (BENEFITS | mms) Manage Your Info – Dependents & Beneficiaries | | | | | |
|---|--|----------|--|---|---------------------------------|-----------------|
| Declare a | Declare a life event to add, delete or change your dependent coverage. If it is open enrollment, you can make the same changes without declaring a life event. | | | | | |
| You can add new beneficiaries, or edit information and allocations for existing beneficiaries here. | | | | | | |
| ADD NEW DEPENDENT O ADD NEW BENEFICIARY | | | | | | |
| * | ou ∕view | | | | | 2 Benefits |
| COVER | ED FOR | | | ALLOCATION NOT AVAILABLE FOR PRIMARY INSU | RED | |
| \odot | MEDICAL | 🖓 dental | | | | |
| | | | | | | |
| | | | | | | |
| DC | POUSE | | | | 2 Benefit | / 2 Allocations |
| COVER | IED FOR | | | BENEFICIARY ALLOCATIONS | | |
| \otimes | MEDICAL | 🕅 DENTAL | | C BASIC LIFE AND AD4D INSURANCE 100% | S OPTIONAL LIFE INSURANCE 100% | |
| | | | | PRIMARY SECONDARY | | |
| | | | | | | |
| BC | HLD | MOVE | | | 2 Benefits | / 2 Allocations |
| COVER | IED FOR | | | BENEFICIARY ALLOCATIONS | | |
| 91 | MEDICAL | 🕅 DENTAL | | BASIC LIFE AND AD4D INSURANCE 50% | SON OPTIONAL LIFE INSURANCE SON | |
| | | | | PRIMARY SECONDARY | | |
| | | | | | | |
| GC | | IVE | | | 2 Benefit | / 2 Allocations |
| COVER | IED FOR | | | BENEFICIARY ALLOCATIONS | | |
| ÷. | MEDICAL | 😳 dental | | BASIC LIFE AND AD4D INSURANCE 50% | OPTIONAL LIFE INSURANCE 50% | |
| | | | | PRIMARY SECONDARY | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

You will then see page: Review <your dependents name here> Info.

Click EDIT either at the top or bottom of your screen

| (BENEFITS | Review Info |
|-------------------------|--|
| | VET |
| Name | |
| Covered For | ^t [⊗] Medical ^O |
| | ℜ Dental |
| Beneficiary Allocations | G Basic Life and AD 100% |
| | A Optional Life Insur 100% |
| | ත් Optional Spouse L 0% |
| | O Optional Spouse 0% |
| | PRIMARY SISCONEMARY |
| Address | |
| | United States of America |
| Relationship | Spouse |
| Gender | Male |
| Date Of Birth | хоо хоох @Show |
| Social Security# | x00-x00-x00 @Show |
| Status | Ref Time Student Detabled |
| | VEDT |

Once it opens, click EDIT next to the plan you wish to update Beneficiary information for:

| < BENEFITS | Review | | |
|-------------------------|---|------|----------|
| L3 | | SAVE | * CANCEL |
| Name | RET NAME * | | |
| | LAST MARG* | | |
| Covered For | © Medicat ♥ | | |
| | R Dental | | |
| Beneficiary Allocations | C Basic Life and AD 100% / Ear | | |
| | A Optional Life Insur 100% ∠ron | | |
| | O Optional Spouse L 0% / IDIT O Optional Spouse 0% / IDIT | | |
| | e realizer e scorear | | |

You will then make your allocations. When done, click SAVE at the bottom:

| | | PRIMARY | SECONDARY |
|--------|---|---------|-----------|
| Spouse | | 100 % | 0 % |
| Child | | 0 % | 50 % |
| Child | | 0 % | 50 % |
| AL: | 1 | 100% | 100% |

You will return to "Review" page, confirm allocations are correct and click on SAVE in the upper right corner.

| < BENEFITS | Review | |
|-------------------------|-------------------------------------|---------------|
| 45 | | SAVE × CANCEL |
| Name | REST NAME * | - |
| | MICKENAME | |
| | LACTAGE? | |
| | | |
| Covered For | [©] Medical ⊘ | |
| | R Dental | |
| Beneficiary Allocations | C Basic Life and AD 100% FOT | |
| | Optional Life Insur 100% / EDIT | |
| | 0 ⁸ Optional Spouse L 0% | |
| | - | |

Once completed successfully, you will see the below at the top of your page and you may exit the application.

| (| < BENEFITS | Review |
|---|---------------------------------|--------|
| 2 | | |
| • | You have successfully updated : | |
| | Name | |