

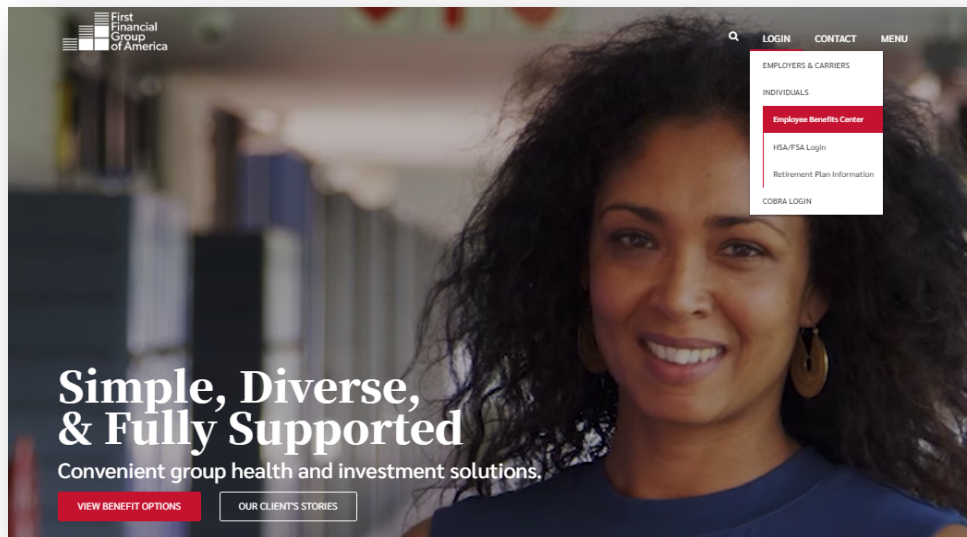
Welcome to Ffenroll! Follow the easy steps below to make your benefit(s) selections online.

If you experience technical difficulty or have trouble during your enrollment, please call our Enrollment Solutions Help Desk at (855) 523-8422 Monday through Friday, 7 a.m. to 5 p.m. Central time.

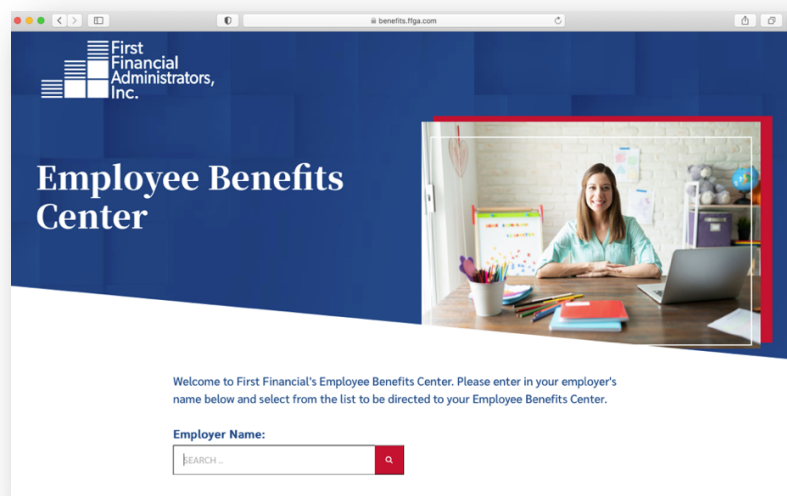
For coverage eligibility questions, contact your benefits office.

Navigating to Ffenroll:

1. Go to www.ffga.com. (If you are already on the How To Enroll page on your Employee Benefit Center website, click [here](#) to skip to step 5.)



2. Click on Login on the top menu and then select Employee Benefits Center.
3. Once you are on <https://benefits.ffga.com>, enter your Employer's name in the box. This will take you to your Employee Benefits Center.



4. On your Employee Benefits Center website, click on How to Enroll from the menu at the top of the page.
5. Scroll down and select the red Enroll Now button to go to the enrollment website.

Enroll Online

Before clicking the Ffenroll link at the bottom, please note the login and PIN information below and then review following steps.

LOGIN

Login: Your Employee ID or Social Security Number (no dashes)

PIN (first login only): The last four digits of your social and the last two digits of the year you were born (six digits total)

New PIN: The first time you log in you will be required to change to a new PIN. Please note your new PIN because you will use the new PIN from that point forward.

VIEW CURRENT BENEFITS

After logging in, you will arrive at the welcome screen. Your current benefits and premium deductions will be listed on this screen.

VIEW/ADD DEPENDENTS

Click next to view your dependents. It is very important to make sure the social security numbers and birth dates listed are correct. If you plan to add dependents, you will need to enter their social security numbers and birth dates.

BEGIN ELECTIONS

Click next again to begin making your benefit elections. Remember, no changes to your elections can be made during the plan year unless you have either a qualified mid-year change under Section 125 or a special enrollment event.

ENROLL NOW | **HOW TO ENROLL GUIDE**

QUESTIONS?

Technical Assistance:

If you experience technical difficulty or have trouble maneuvering through the enrollment process, please call the FFGA Enrollment Solutions Help Desk line at (855) 523-8422 from 7 a.m. to 5 p.m. CST or email techsupport@ffga.com.

Online Enrollment Assistance:

For questions about benefit plans, premiums or to meet with an FFGA representative in person, call (800) 672-9666.

English >

FFenroll Enrollment Site

6. Login:

- Employee ID
 - The Employee ID is either your social security number or your Employee ID.
- PIN
 - Your Personal Identification Number (PIN) is the last 4 digits of your SSN and the last 2 digits of the year you were born (this should be a 6-digit number).
 - Please note: Your PIN may be required on some applications as your electronic signature.

First Financial Group of America | **FFenroll**

Enrollment Site

Employee ID or Social Security Number

Personal Identification Number (PIN)

By entering your user ID and Personal Identification Number, you are agreeing to the terms of the [Consent to Enroll Electronically](#).

Log in

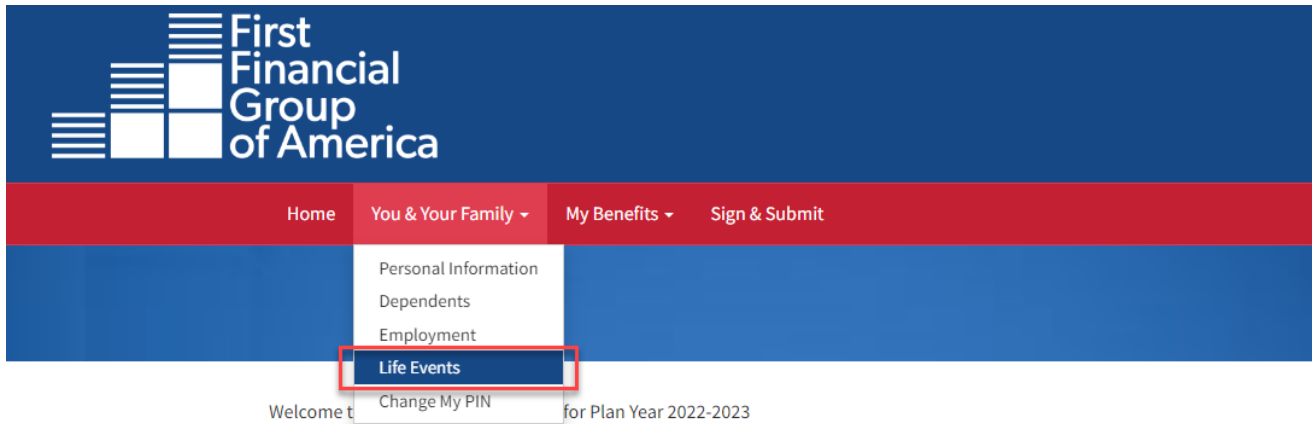
[Forgot Pin?](#) | [Security Information](#) | [Privacy Policy](#)

If you need help enrolling or trouble logging in please call the Ffenroll Support Help desk at 855-523-8422

Administrative users: login to the Administrative Site

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Self Enroll Life Event Changes - Instructions



Select You & Your Family

Click on **Life Events**

Life Events

In general, you may only enroll for benefits at specific times of the year designated by your Benefits department. However, certain changes in your life may require you to update your benefit elections or employee information on file.

Please choose any of the following that apply.

Life Event

Please choose any of the following that apply.

- I am a new employee and wish to enroll in benefits.
- I changed my name, address, phone number, or e-mail address.
- I changed job status, changed salary, or transferred to a new location.
- I recently got married or became a party to a civil union or domestic partnership
- I have a new child (birth, adoption, or regained custody).
- I am taking an approved Leave of Absence.
- I am retiring.
- I (or my eligible dependent) recently lost or gained similar coverage.
- I request a change to my benefits due to a court order.

Select Life Event that's applicable. Please note that some life events cannot be made on this page. Please review comment next to event.

[← Back](#)

[Next →](#)

Coverage Change

Select which plans you would like to change. **Event Date** refers to date the change took place. **Do not** use Effective Date of when the coverage is to start or end.

- TRS Medical
- Recuro Telemedicine
- Masa Medical Transport
- MetLife Dental
- Davis Vision
- Flexible Spending Account - FSA
- Health Savings Account - HSA
- Dependent Care Account - DCA
- MetLife Hospital Indemnity
- AF Group Cancer
- MetLife Critical Illness
- Standard Disability
- SunLife Employee Life
- SunLife Spouse Life
- SunLife Child Life
- Texas Life Insurance
- Arag Legal
- iLock Identity Theft Protection
- Allstate Cancer
- IAP Educators Choice Deduction Information
- IAP Choice Deduction Information 1

← Select benefits change applies.

Note: Event Date is the date the change took place not the effective date of the new coverage.

Event Date:

Life Event: Please Confirm

Once my PIN has been entered, I certify that one of the following conditions applies:

- I have recently lost coverage in a similar benefit.
- The plan I selected recently underwent a material change in coverage or cost.

Such a material change is a qualifying event under Section 125 of the Internal Revenue Service code, which may entitle me to change certain benefits.

Click to finalize change:

Reason for change:

← Add notes as it relates to the change, then click green arrow to confirm change

Life Event: Please Confirm

You are eligible to re-enroll in following benefit plans. Please make selections and press Next button

✓ You are not currently enrolled in benefits.

You can select other benefits that are eligible for change based on life event. If not applicable, please leave blank and click next

- TRS Medical
- Recuro Telemedicine
- Masa Medical Transport
- Flexible Spending Account - FSA
- Health Savings Account - HSA
- Dependent Care Account - DCA
- MetLife Hospital Indemnity
- AF Group Cancer
- MetLife Critical Illness
- Standard Disability
- SunLife Employee Life
- SunLife Spouse Life
- SunLife Child Life
- Texas Life Insurance
- Arag Legal
- iLock Identity Theft Protection

Some life events will require documentation to be provided.

Life Event: Birth / Adoption

Please enter information on the birth or adoption.

Reason: Birth

Relationship: Child

Name: Child
First MI Last Suffix

Date of Birth: 03/31/2023

SSN:

Gender: Male Female Other

Verification Document: Birth certificate

Upload Documentation

Here you may upload additional documentation.



Upload from my computer

Using this option you may upload files directly from this computer. Click the upload icon and follow the instructions on the dialog pop-up.

Upload Documentation by importing requested documentation.

Uploading from your computer. Document must be PDF, JPEG, PNG, or GIF format.

Upload Documentation

Upload Documentation

Choose File Birth Certificate.png

File Name: Birth Certificate.png

Document Type: Birth Certificate

OK **Cancel**

File Name	Document Type	Size	Uploaded By	Date	
Birth Certificate.png	Birth Certificate	57.87 KB		04/25/2023 15:56:24 UTC	X

Save **Cancel**

Confirm Life Event

Once my PIN has been entered, I certify that I have had a birth or adoption of a child in my household. A birth or adoption is considered a qualifying event under Section 125 of the Internal Revenue Service code entitling me to re-enroll in certain benefit plans

Click to finalize change:



Reason for change:

Child birth on 3/31/2023.

Select the benefit(s) to add, drop or change.

You are eligible to re-enroll in following benefit plans. Please make selections and press Next button

✓ You are not currently enrolled in benefits.

- TRS Medical
- Recuro Telemedicine
- Masa Medical Transport
- Dependent Care Account - DCA
- MetLife Hospital Indemnity
- AF Group Cancer
- MetLife Critical Illness
- Standard Disability
- SunLife Employee Life
- SunLife Spouse Life
- SunLife Child Life
- Texas Life Insurance

Make Selections as applicable and confirm.

VISION

Your Cost: Per Pay Period

Employee Only: \$4.17

Employee + Spouse: \$8.48

Employee + Children: \$8.73

Employee+Family: \$12.09

Covered People:

Kristina Test

Child Test

Enroll

DECLINE COVERAGE

Your Cost: \$0.00

Decline

Once all changes have been made, review Confirmation Form. Verify your changes.

Here is a recap of your enrollment elections. The summary below shows your election for each benefit and includes your pre-tax and post-tax contributions **per pay period** for each plan.

- **Are You Satisfied With Your Elections?** If you are satisfied with your choices, click on the "NEXT" button at the bottom of this screen to sign your Enrollment Verification Form electronically.
- **Need to Make Some Changes?** From the MyBenefits Menu at the top of the screen, click on the benefit you wish to change. You will then be prompted to Unlock the benefit and complete enrollment in the plan.

YOUR COVERAGE WILL NOT TAKE EFFECT AND DEDUCTIONS WILL NOT START UNTIL YOU SIGN YOUR CONFIRMATION FORM.


Benefit Confirmation / Deduction Authorization

Name		Date of Birth	Home Phone	Work Phone	Address	
Kristina Test		01/01/1970			123 abc Spring, TX 77379	
Employee ID	Hire/Elig Date	Gender	E-mail Address			
65656	04/24/2023	F	-			
Location			Department			
Magnolia ISD			Staff			
Job Class			Title			
FT/PT			4			
Reason for Completing Form						
Dependent Added From Birth						

Benefit Plan	Option	Cvg	Ded Cycle	Effective Date	Benefit Amount	Requested		Employee Cost		Employer Cost
						Benefit	Cost	Pre-tax	After-tax	
TRS Medical	TRS - Decline Medical	EO	24	05/01/2023				0.00	0.00	0.00
Davis Vision	Davis Vision	EC	24	05/01/2023				8.73	0.00	0.00
SunLife Basic Life	Sun Life Employer Paid	EO	24	05/01/2023	10,000			0.00	0.00	0.55

Review **Benefit Confirmation/Deduction Authorization** and Click Sign Form to finalize changes.

Employee: By clicking the *Sign Form* button, I am electronically signing the form listed above.



Your requested changes are submitted once you arrive to this page.

Very Important: Your changes will not be in effect until Magnolia ISD reviews and approves documentation.

Sign/Submit Complete

Congratulations!

Your enrollment is now complete. You may log-in to the system at any time during the year to review your benefit elections.

Recap of Your Elections

Listed below is a recap of your elections including who is covered under each benefit plan and your named beneficiaries. **Scroll down to the bottom of this screen to view a list of your completed enrollment forms.**

You can download your signed forms for your records. To exit click Logout button.

Completed Forms

Following is a list of forms reviewed and/or signed during the enrollment. Click on the form name to view or print.

Press *Logout* to exit the website.

Form Name	Date Signed/Reviewed
 Enrollment Confirmation	04/25/2023

Technical Assistance:

- If you experience technical difficulty or have trouble maneuvering through the enrollment process, please call the FFGA Enrollment Solutions Help Desk line at (855) 523-8422 Monday through Friday from 7 a.m. to 5 p.m. Central time or email ff enroll@ffga.com.