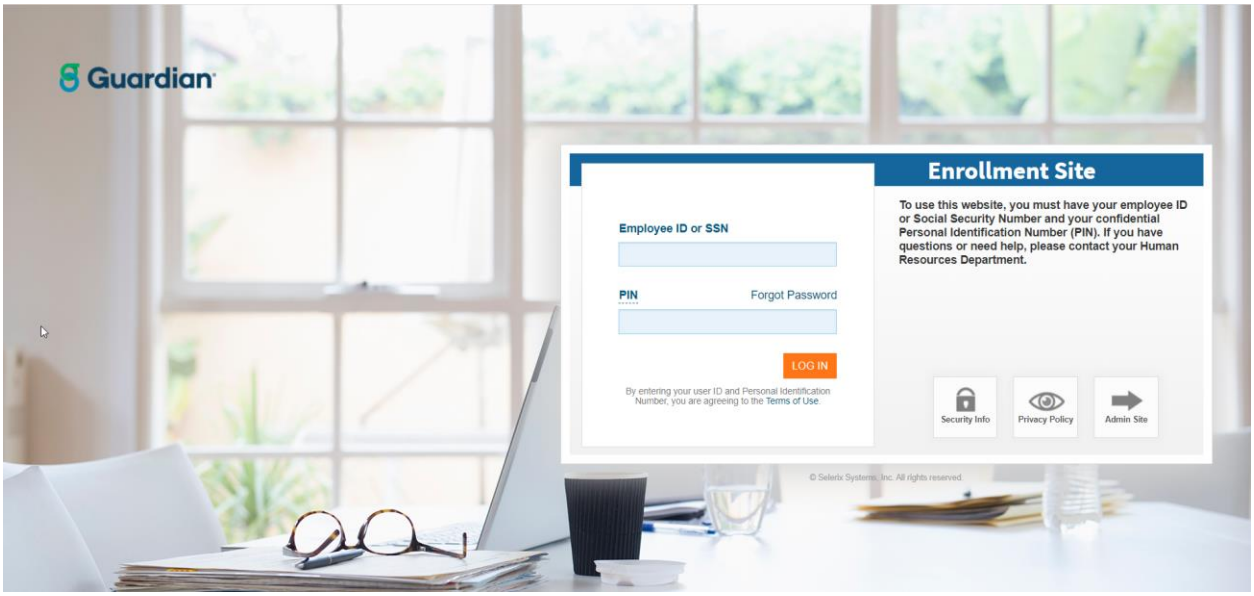
2026 Plan Year Benefit Enrollment Guide

For enrollment assistance, or questions about any of the benefits available for enrollment, please call the USD 231 Benefit Enrollment line at **866-434-0050**

Welcome! To begin your 2026 Annual Benefit Enrollment please click here → guardian.benselect.com/enroll to access the USD 231 Benefit Administration System.

You should now see the screen below.



To log-in follow these steps:

1. Enter your Social Security Number (no dashes).
2. PIN = The last four of your Social Security Number and the last two digits of your birth year (ex. 545466).
3. Click **LOGIN.**

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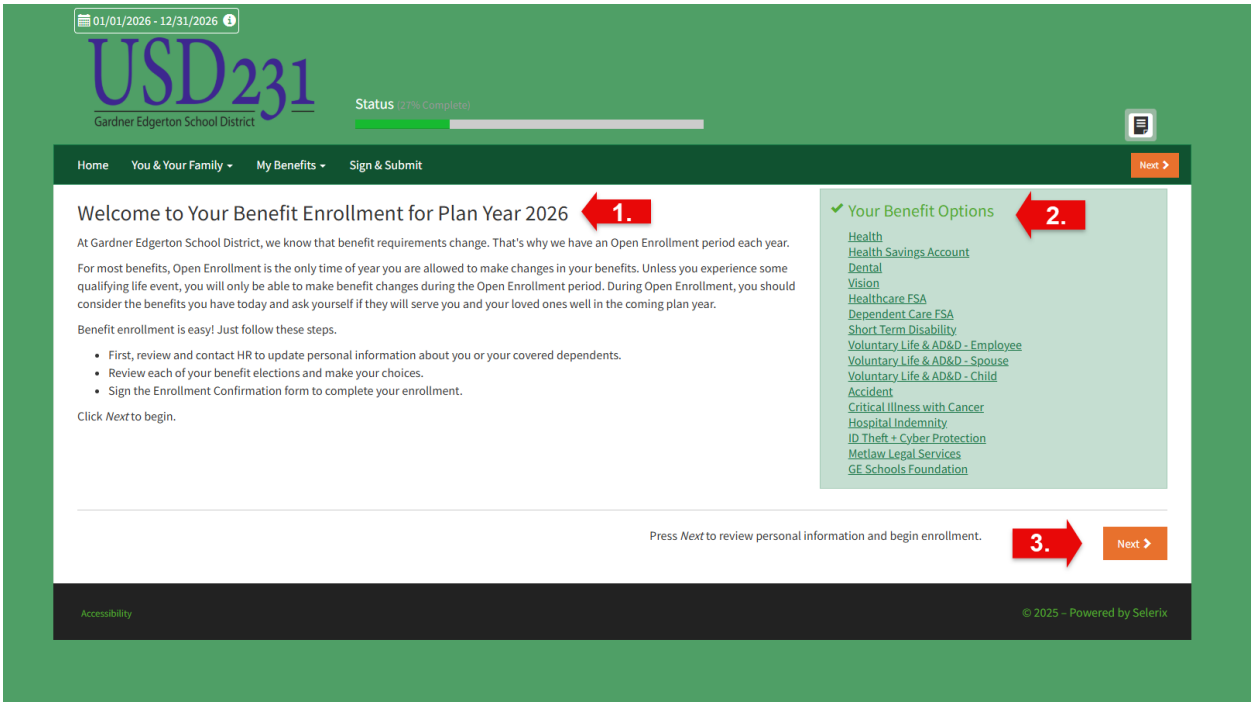

1. Please review the Welcome Page.
2. This is a list of 2026 employee benefits you will be reviewing.
3. Click **Next.**

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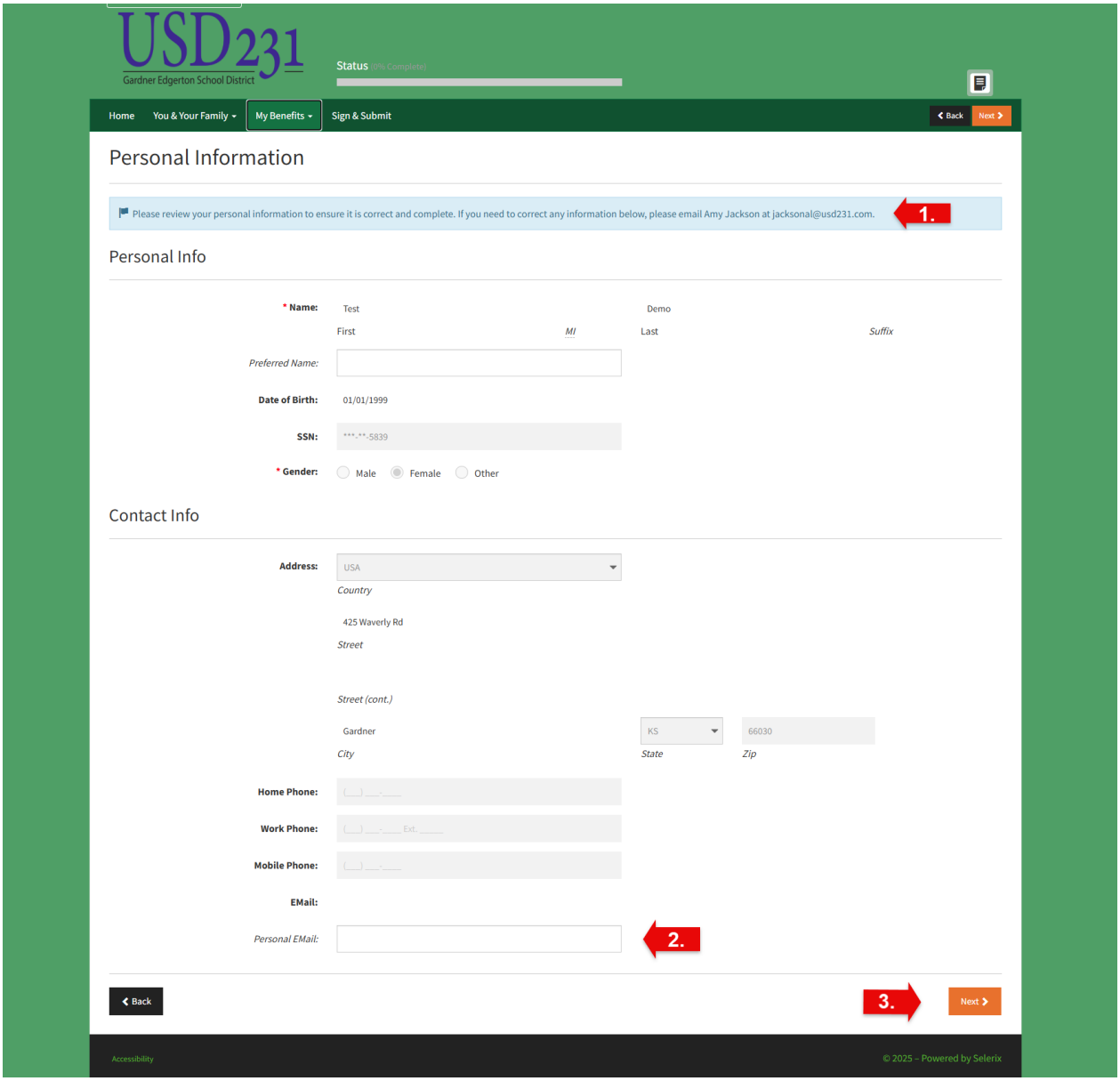

1. Review contact information. Please contact HR for any items needing updated.
2. You may update your personal email address here.
3. Click **Next.**

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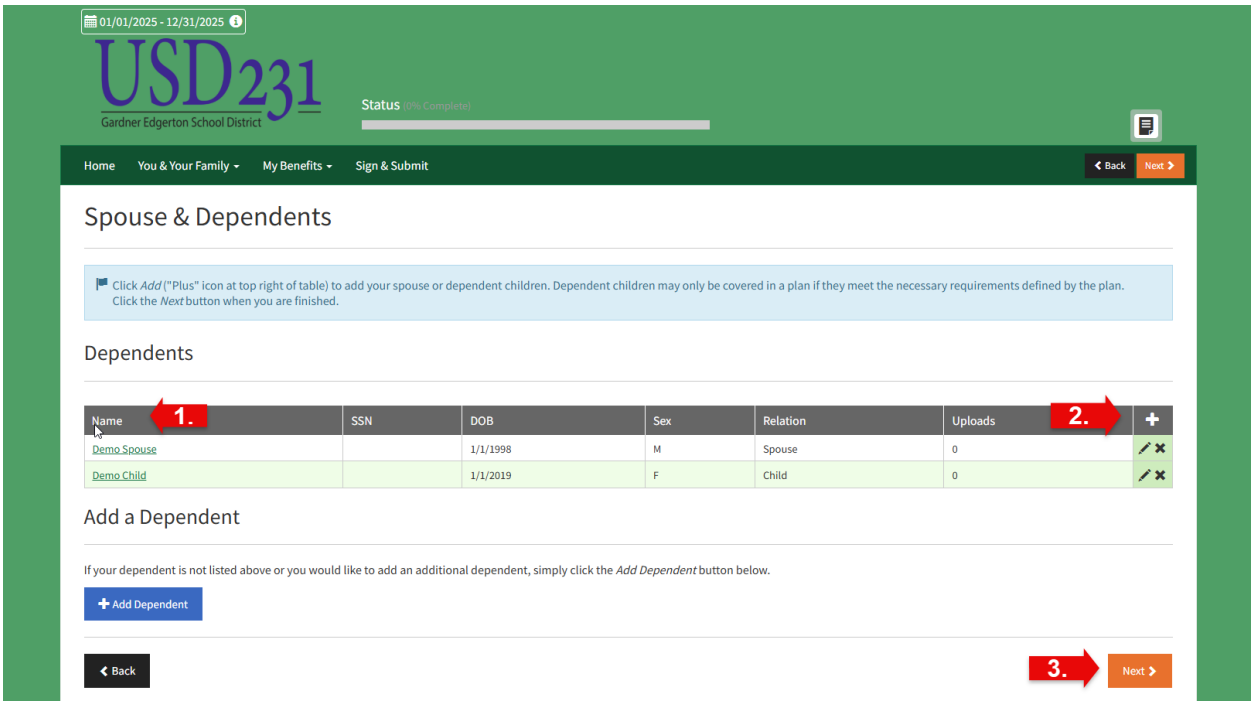

1. If you have current dependents enrolled, they will show here. Review for accuracy. To make changes, click on the Pencil icon next on each dependent's line.
2. To add a dependent click the plus sign and enter the necessary data.
3. When complete, or if you have no dependents, click **Next.**

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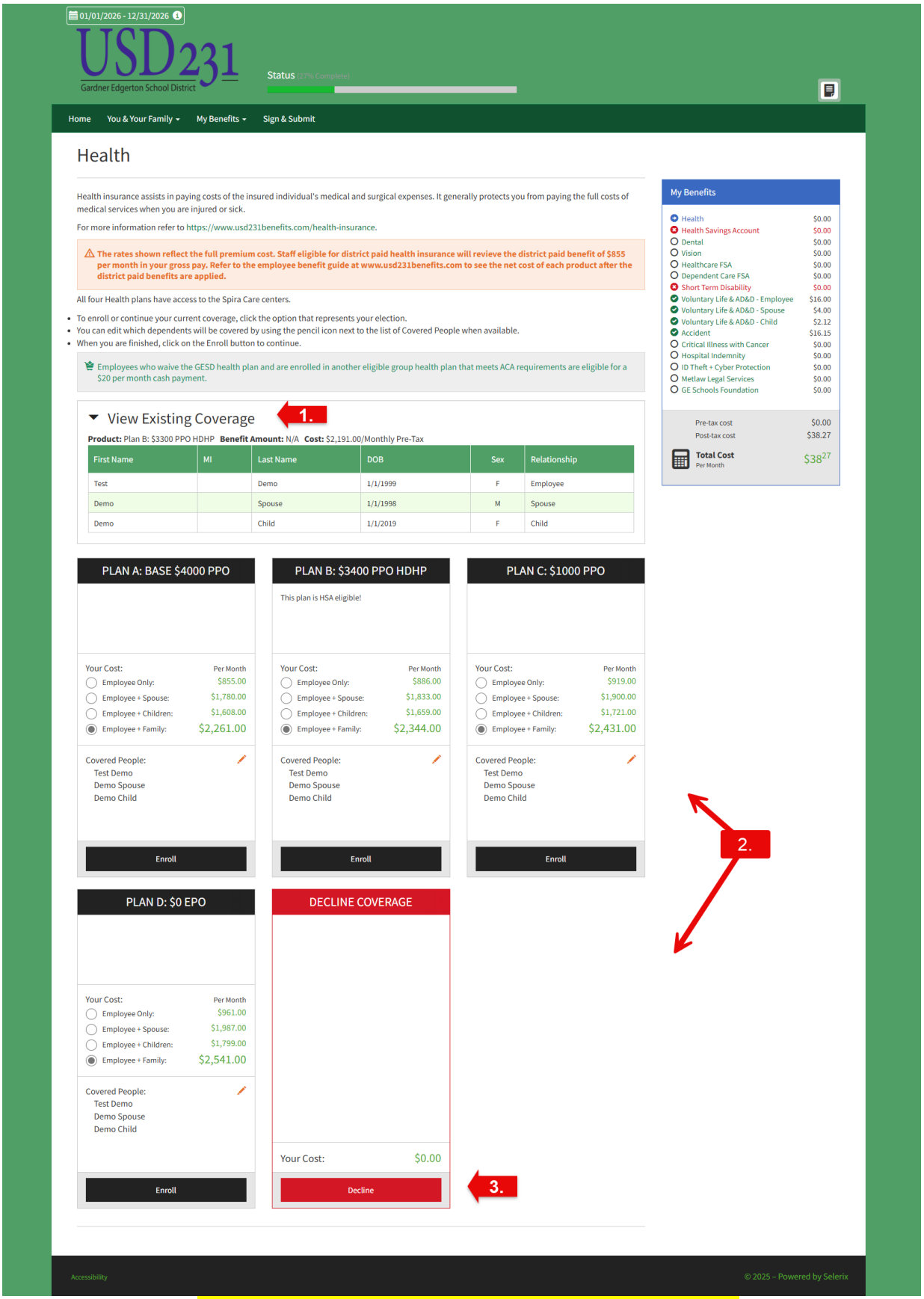

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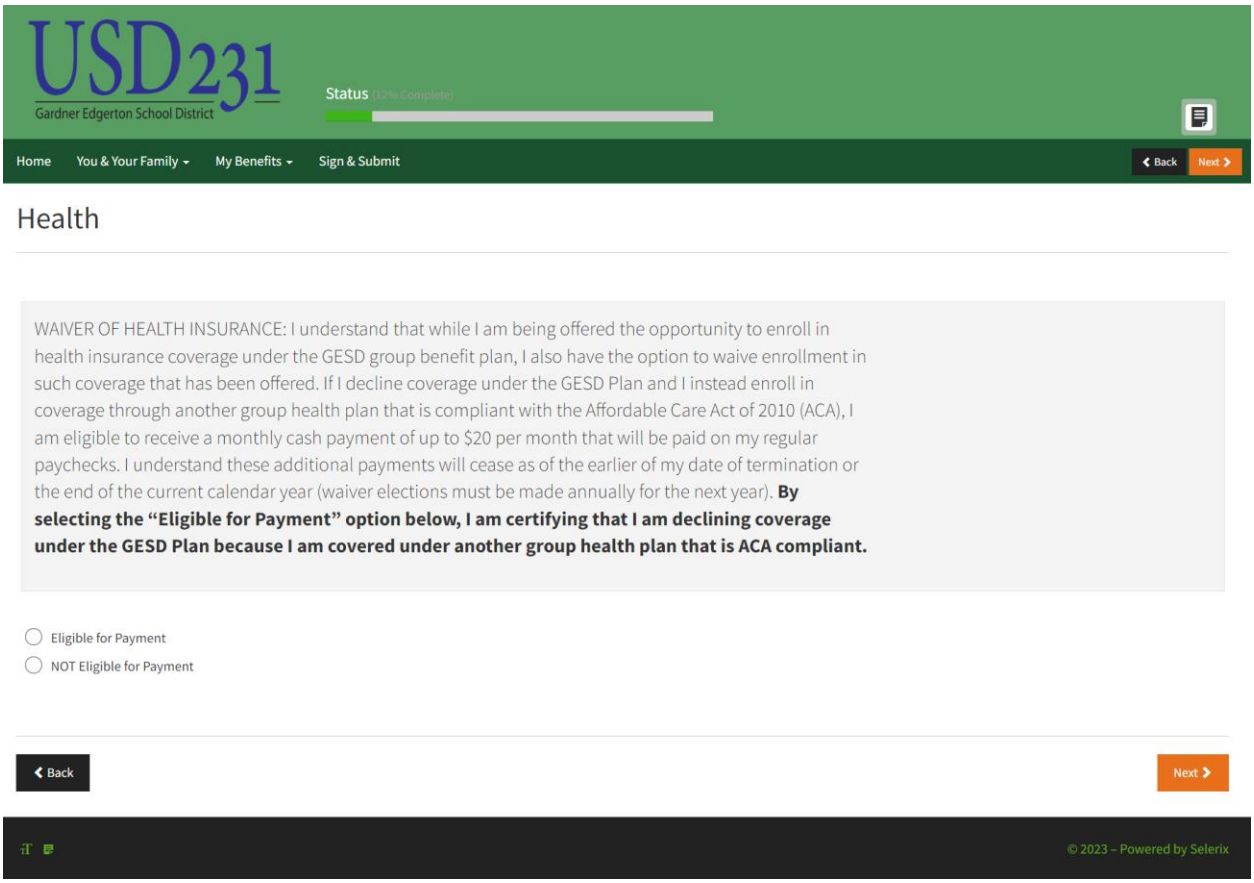
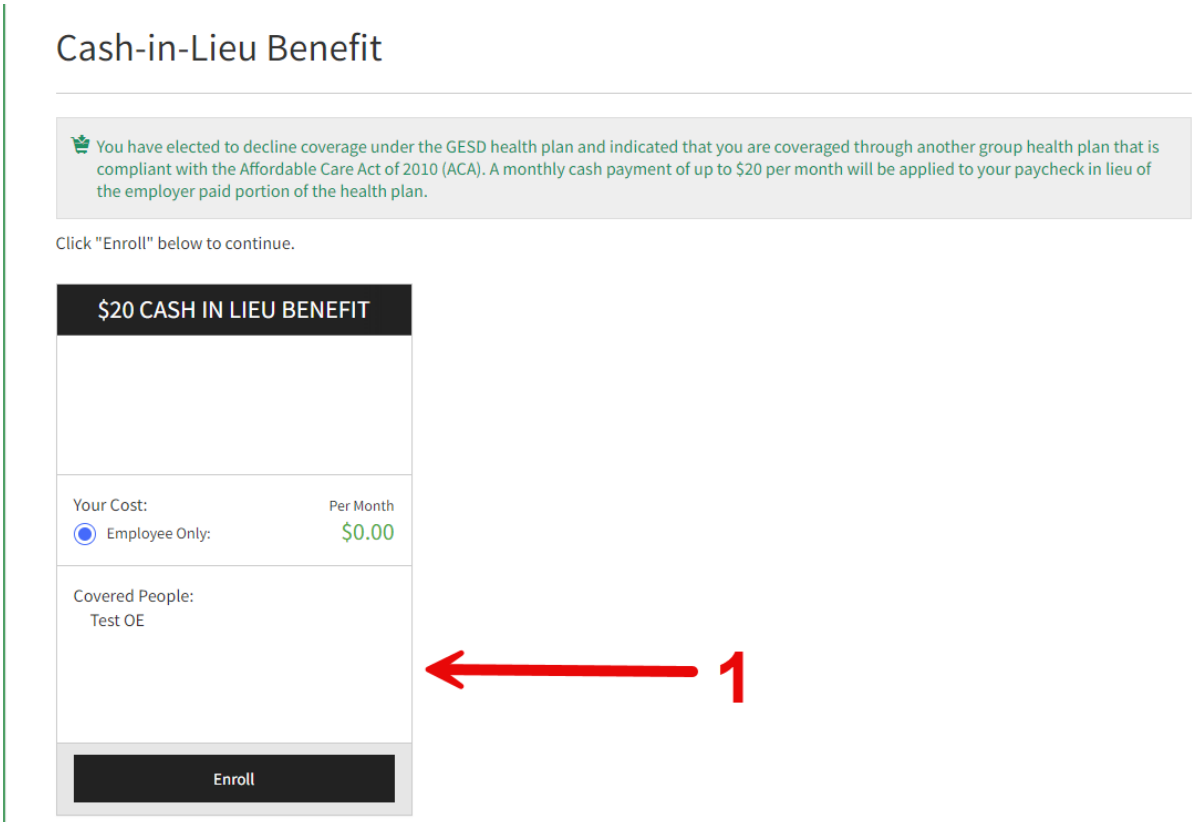
1. Review existing coverage from prior year
2. Plan information will be displayed here. Select the applicable radial button for the plan and tier you would like to enroll in for 2026 (I.e. Employee Only, Employee + Spouse, etc.) then click Enroll under that plan.
3. If you wish to decline this coverage, select Decline

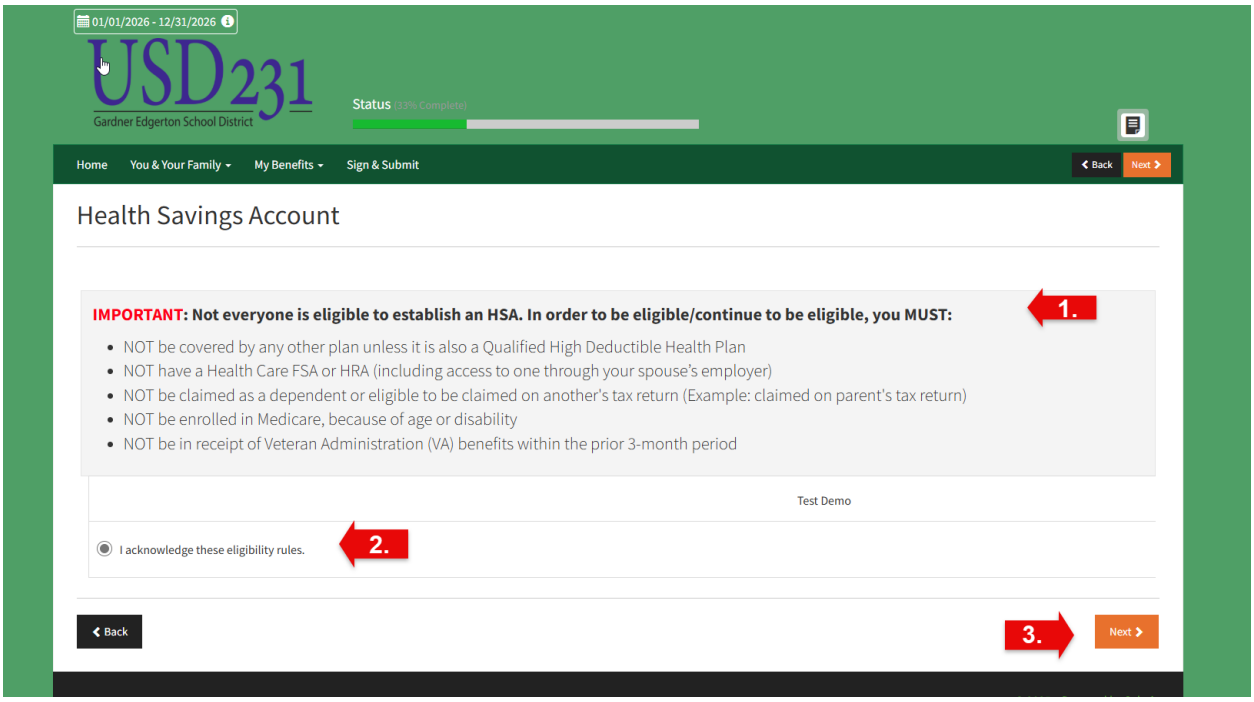
IF YOU DECLINE HEALTH INSURANCE You may be eligible for a Cash In Lieu Benefit



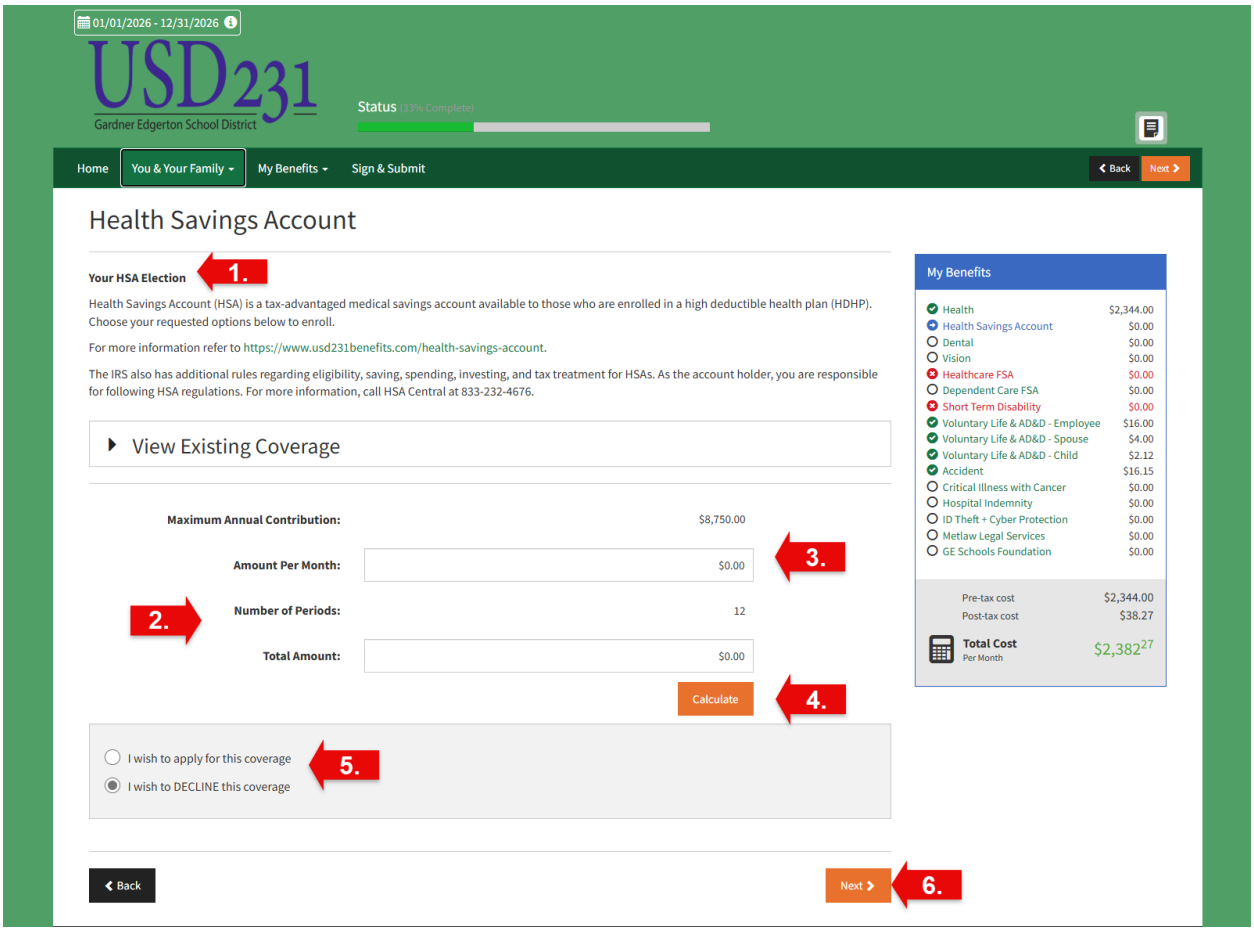
1. After declining health insurance, you will see the page above
2. Please read through the criteria on the screen – if you waive and are enrolled elsewhere in a qualifying GROUP health plan, and in an eligible job class, select Eligible for Payment
3. If you do not meet the listed criteria, please select NOT Eligible for Payment



1. If you selected “Eligible for Payment”, you will be brought to this screen, acknowledging that you will receive the $20 cash in lieu, and that there is no cost to you. One selecting enroll, you will be taken to the dental enrollment page.



1. If you have selected an HSA eligible medical plan, you must acknowledge that the eligibility statements apply
2. Select your acknowledgement
3. Click NEXT to make your HSA election



1. If you have selected an HSA eligible plan, read about your HSA options here
2. Be aware of the maximum contribution amounts
3. You can enter contribution amount in the “per month” field or in the “Total Amount” field
4. Clicking here will **Calculate** the amounts into both fields automatically
5. Select if you wish to apply for the HSA option or Waive the option
6. Click **Next** once complete

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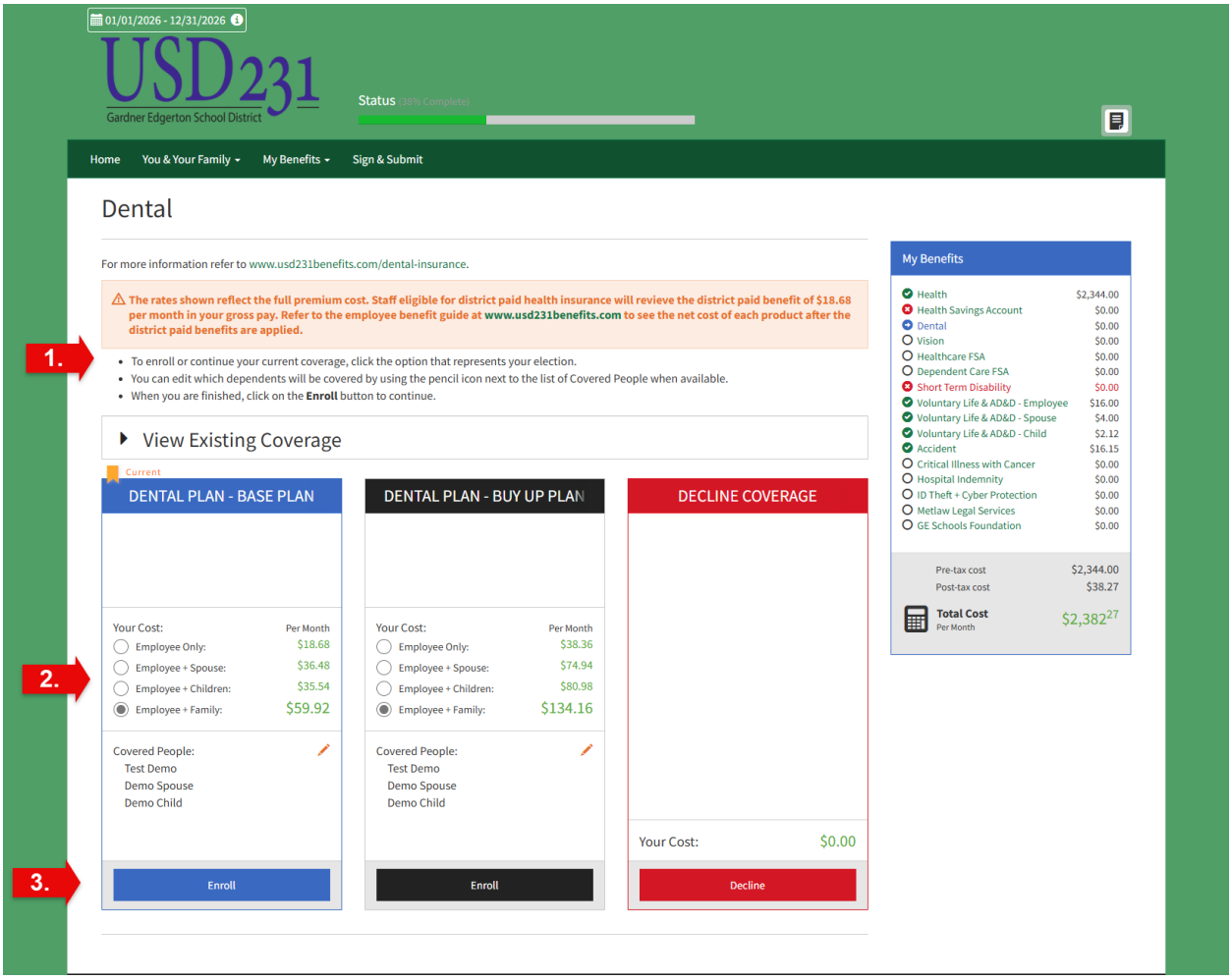

1. If you wish to enroll in Dental follow the prompts
2. Select the tier you would like to enroll in here
3. Click Enroll or Decline to move forward

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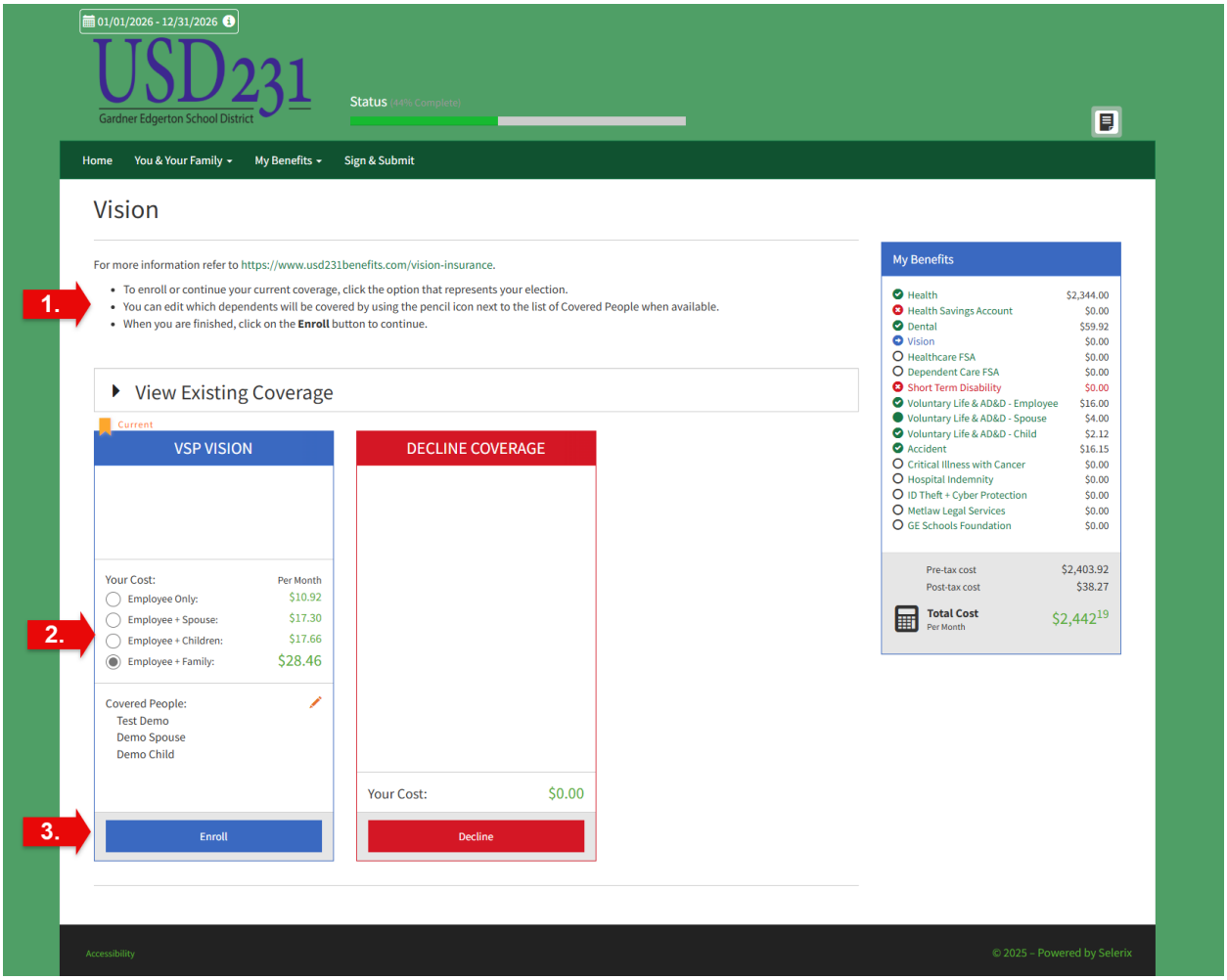

1. If you wish to enroll in Vision follow the prompts
2. Select the tier you would like to enroll in here
3. Click Enroll or Decline to move forward

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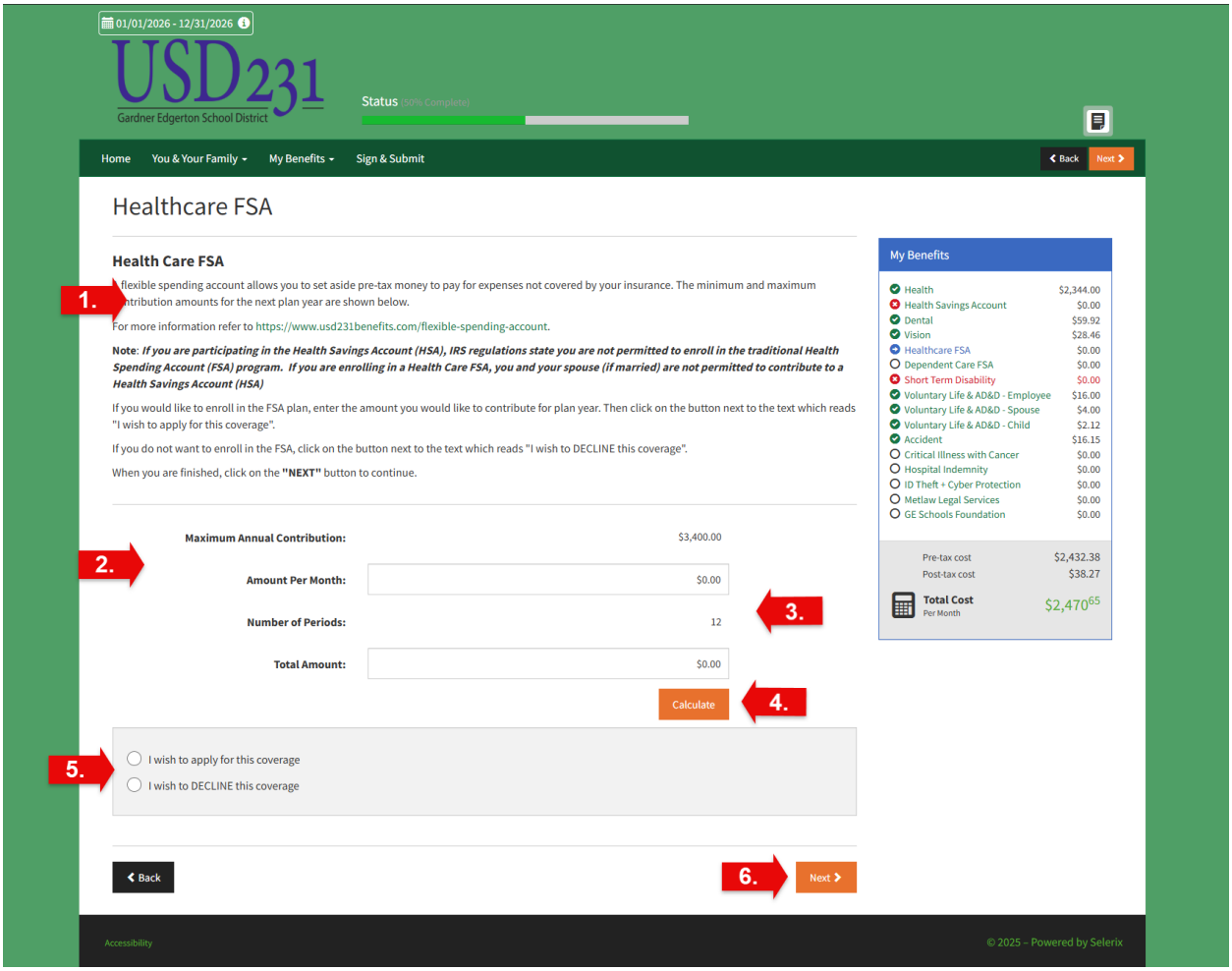

1. If you or your spouse are not enrolled in an HSA, you are eligible for Health FSA. If you wish to enroll in Health FSA follow the prompts
2. Be mindful of the annual limits
3. You can enter contribution amount in the “per month” field or in the “Total Amount” field
4. Clicking here will **Calculate** the amounts into both fields automatically
5. Select if you wish to apply or Waive this option
6. Click **Next** once complete

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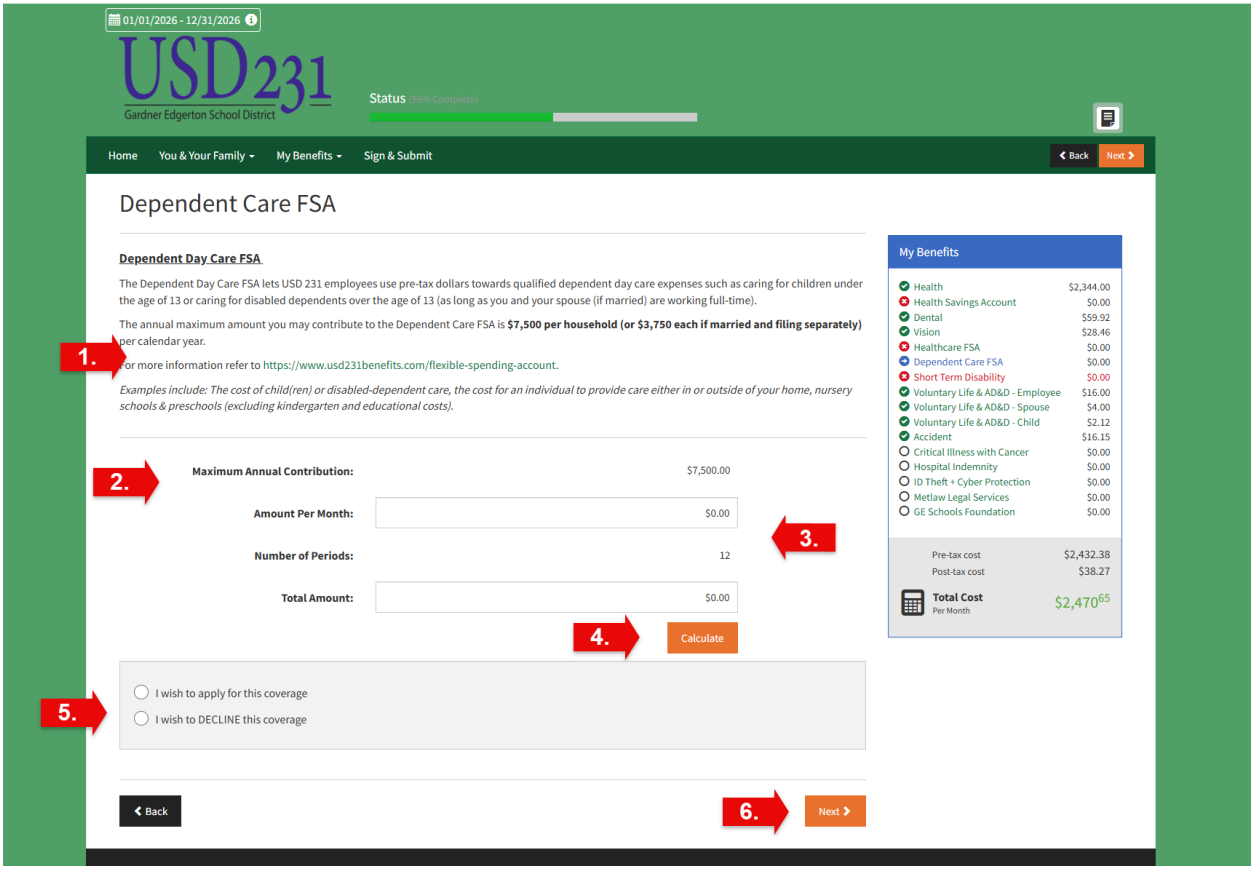

1. If you wish to enroll in a Dependent Care FSA follow the prompts
2. Be mindful of the plan limits
3. You can enter an amount in the “per month” field or in the “Total Amount” field
4. Clicking here will **Calculate** the amounts into both fields automatically
5. Select if you wish to apply or Waive this option
6. Click **Next** once complete

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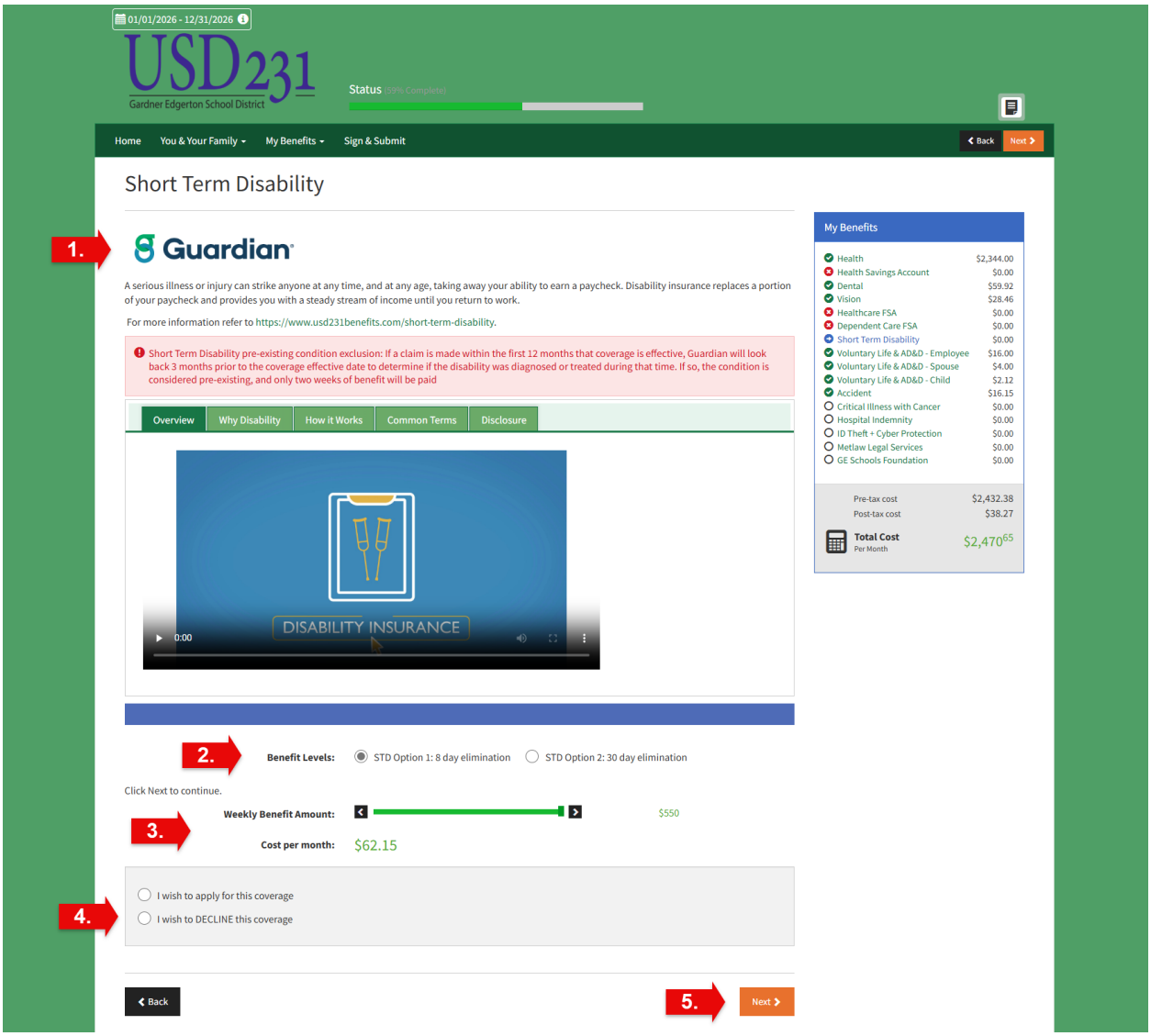

1. Review the Short Term Disability Plan details here
2. Select the 8-day or 30-day elimination period
3. Your Voluntary Short-term Disability benefit amount options and cost are shown here. If the bar turns red, you have chosen an amount that will require Evidence of Insurability (EOI). EOI information will be sent out after Open Enrollment is complete, or can be completed by visiting www.guardiananytime.com/eoi
4. Select if you wish to apply or Waive this option
5. Click **Next** once complete

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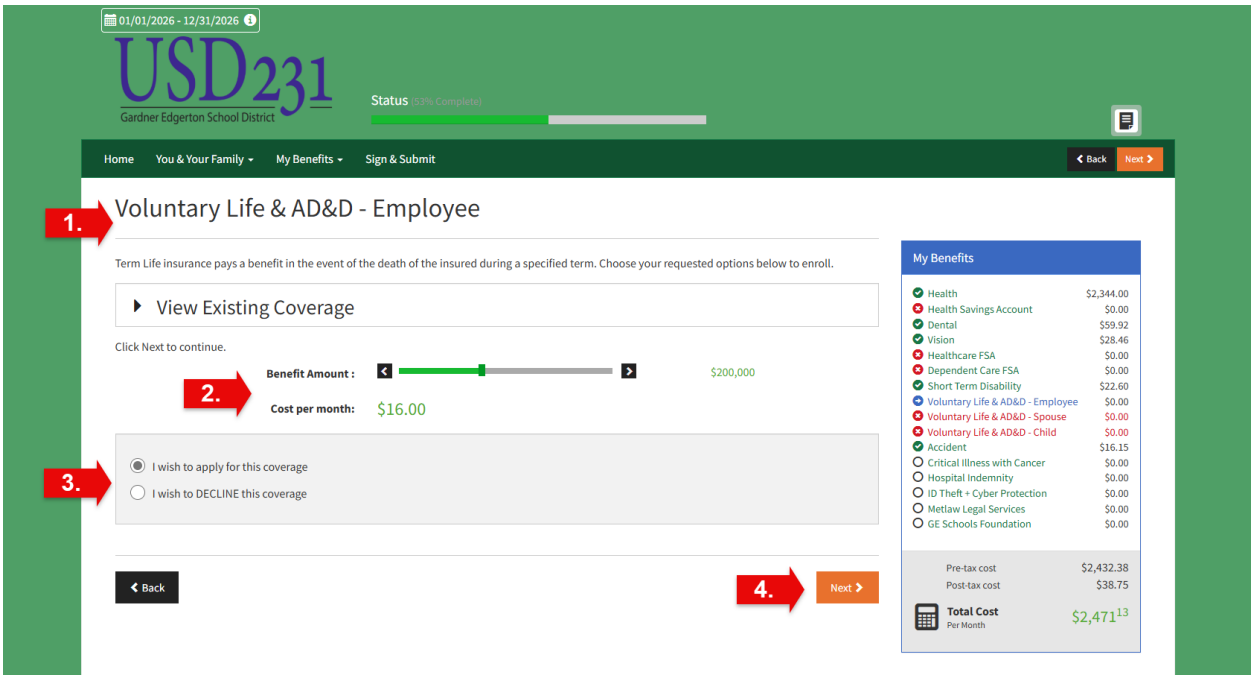
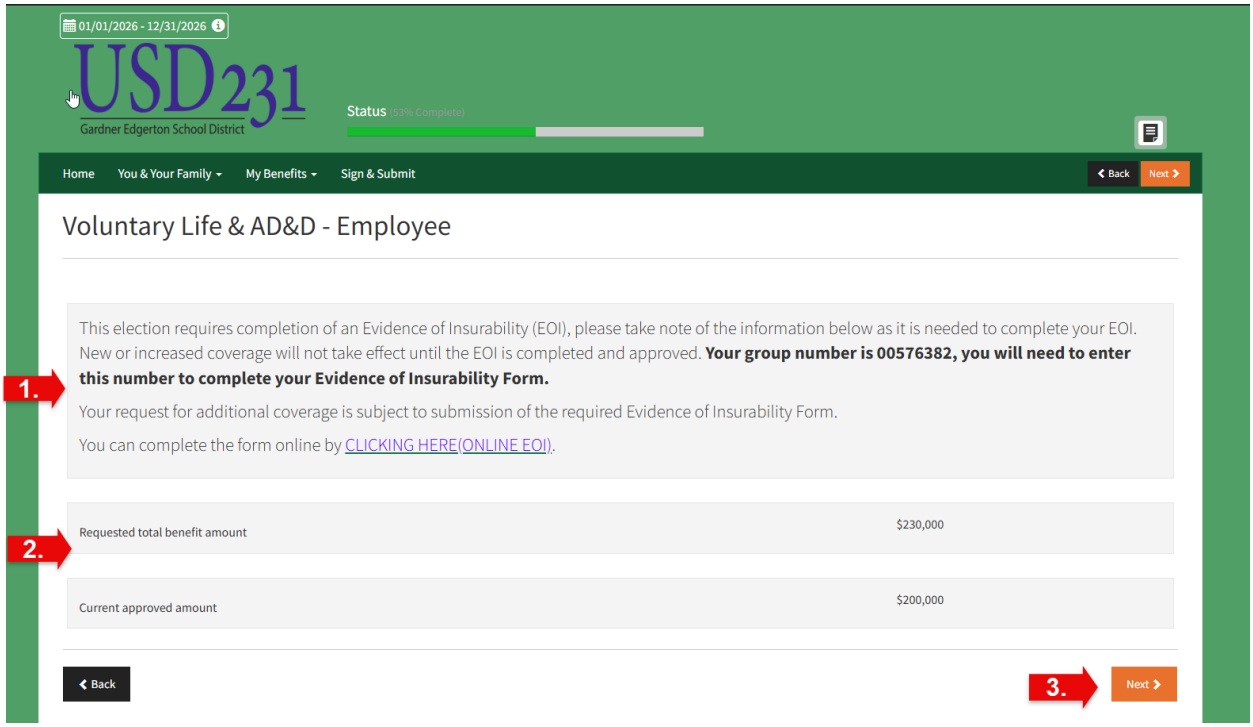
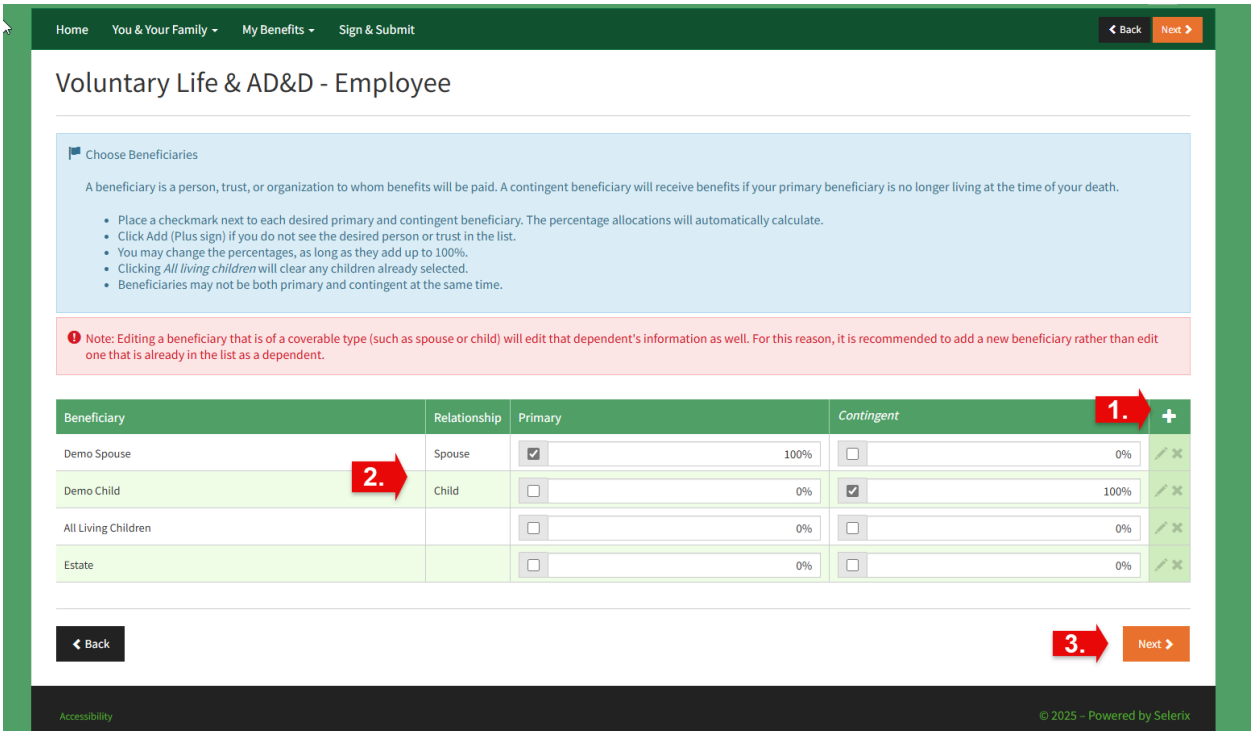


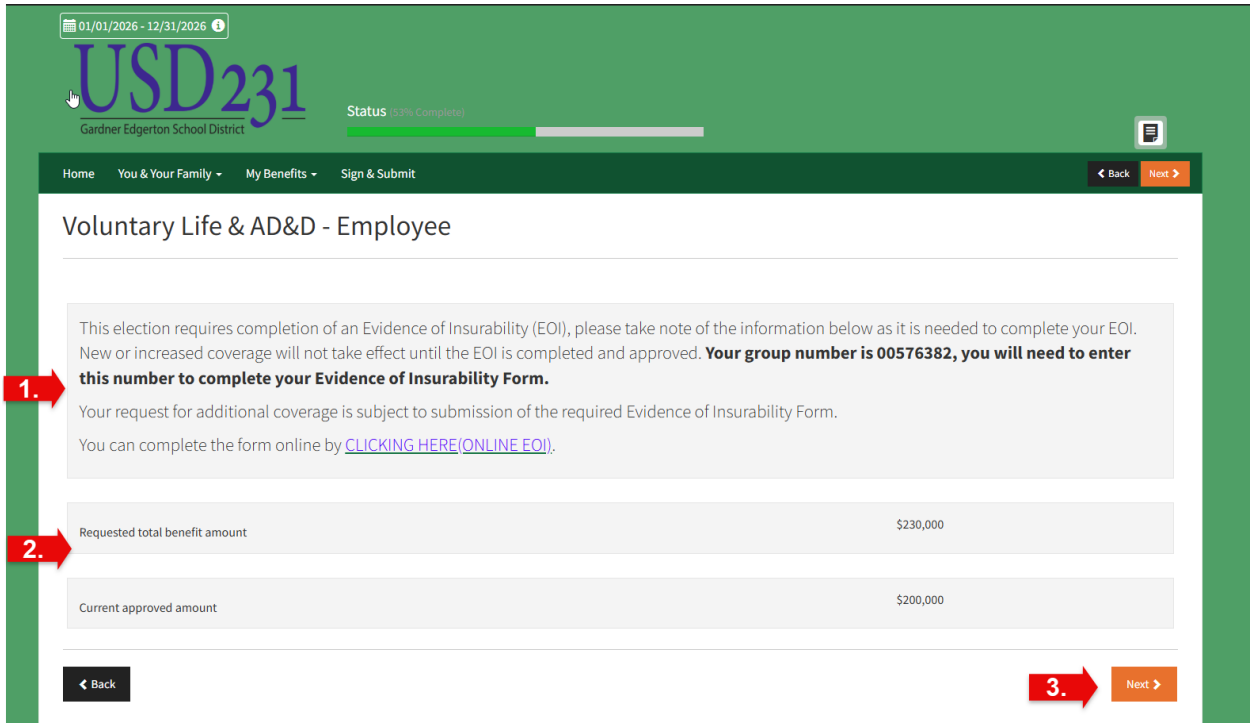
1. You may read about the Voluntary Life and AD&D here, and follow the prompts
2. You can drag the bar here to adjust the life benefit amount and see the correlating monthly cost. If electing over the Guarantee Issue amount, or for the first time, amounts will turn RED and the above pop-up will appear.
    a. Evidence of Insurability (EOI) will be required if the bar turns red. You will see the link to complete your EOI, as well as the amounts that will pend EOI, after you assign a beneficiary
3. Select if you wish to apply or Waive this option
4. Click **Next** once complete
   (If you choose to enroll, follow the prompts to assign or add a Beneficiary, and move on to the EOI page)



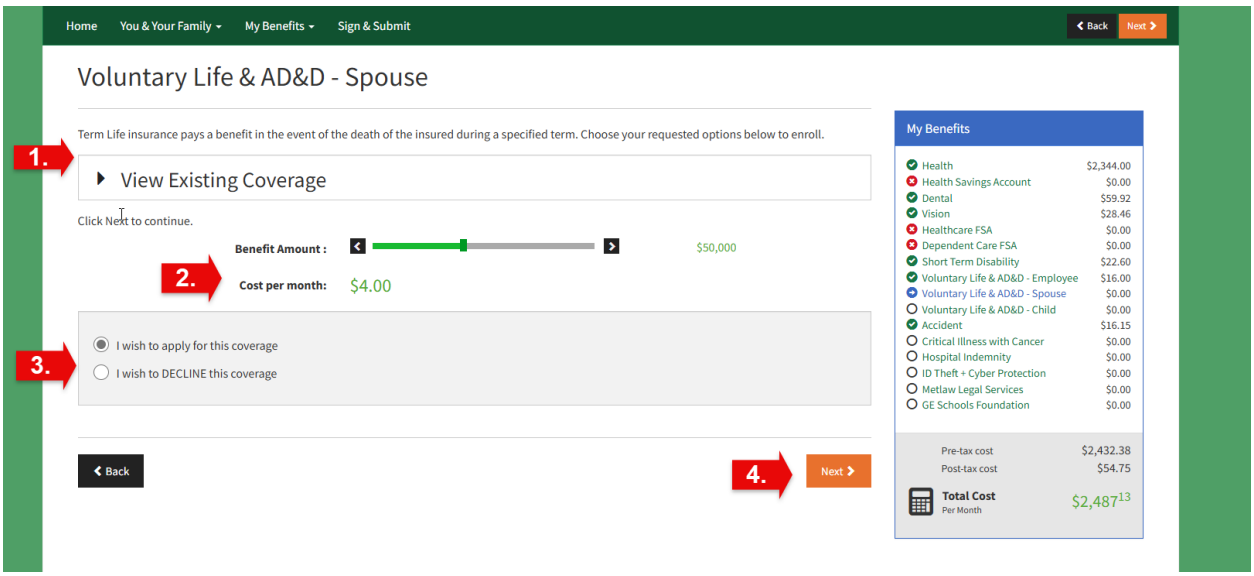


1. Click the plus sign to add a new beneficiary
2. Once you have added your beneficiaries, enter the percentage you would like each to receive. You may also assign a contingent beneficiary.

3. Once complete, select NEXT



1. If you have elected an amount that requires Evidence of Insurability (EOI), this screen will appear. Please review the instructions for completing your EOI. You may follow the link and complete now, or save the website and complete the EOI at a later time. However EOI MUST be completed before the requested coverage will take effect
2. Review your current and proposed elections
3. When you are ready, click NEXT



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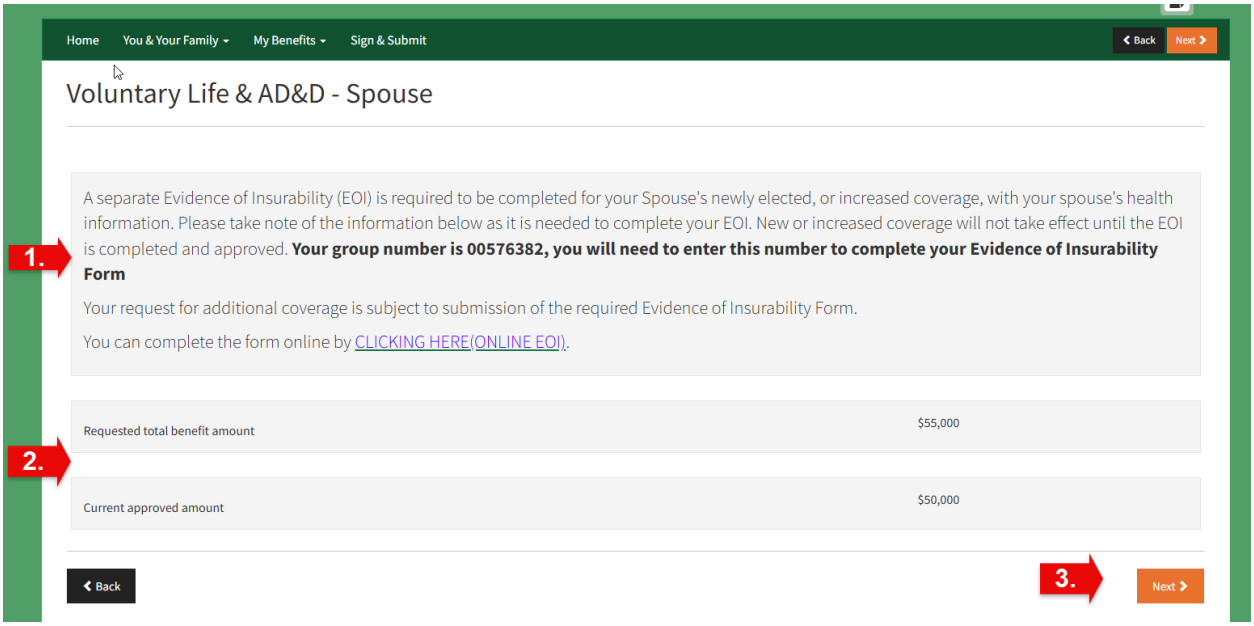
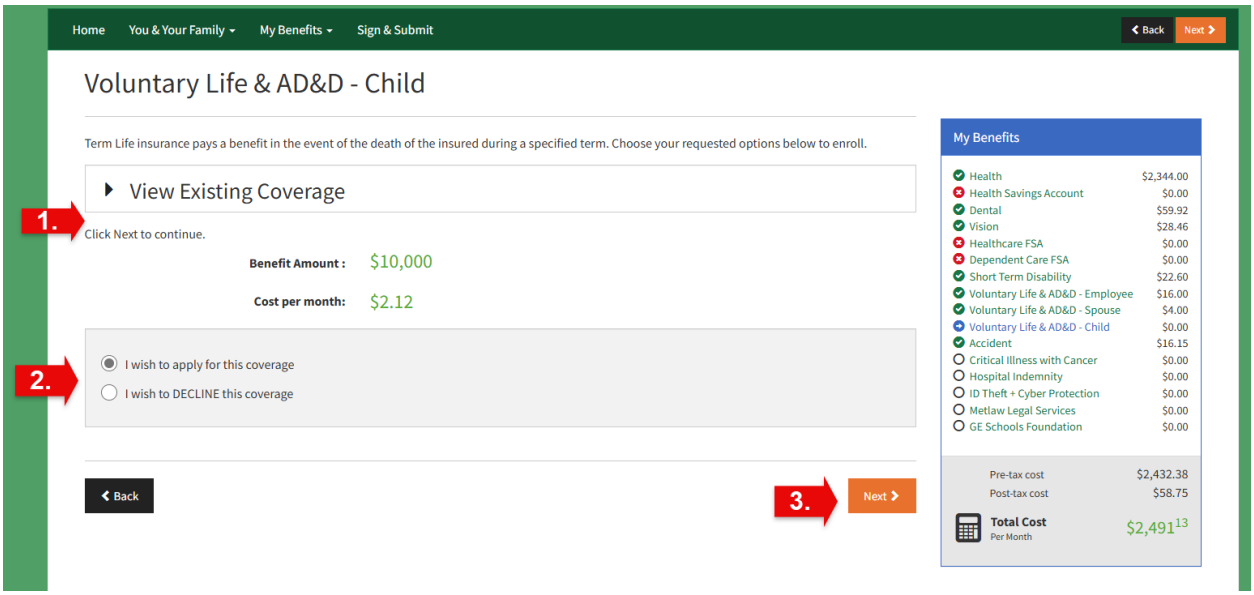
1. To elect Spouse Supplemental Life, you must elect Supplemental Life coverage for yourself. Review the spouse life details here.
2. You can drag the bar here to adjust the life benefit amount and see the correlating per month cost. If electing over the Guarantee Issue amount, amounts will turn RED and the above pop-up will appear.
    a. Evidence of Insurability (EOI) will be required if the bar turns red. You will see the link to complete EOI for your spouse, as well as the amounts that will pend EOI, after you assign a beneficiary
3. Select if you wish to apply or Waive this option
4. Click **Next** once complete



1. If you have elected an amount for your spouse that requires Evidence of Insurability (EOI), this screen will appear. Please review the instructions for completing your EOI. You may follow the link and complete now, or save the website and complete the EOI at a later time. However EOI MUST be completed before the requested coverage will take effect
2. Review your current and proposed elections
3. When you are ready, click NEXT



1. To elect Child Supplemental Life, you must elect Supplemental Life coverage for yourself. Review the child life details here.
2. Select if you wish to apply or Waive this option
    a. Evidence of Insurability (EOI) will **NOT** be required for Child Life, but coverage will pend until any pending employee coverage is approved.
3. Click **Next** once complete

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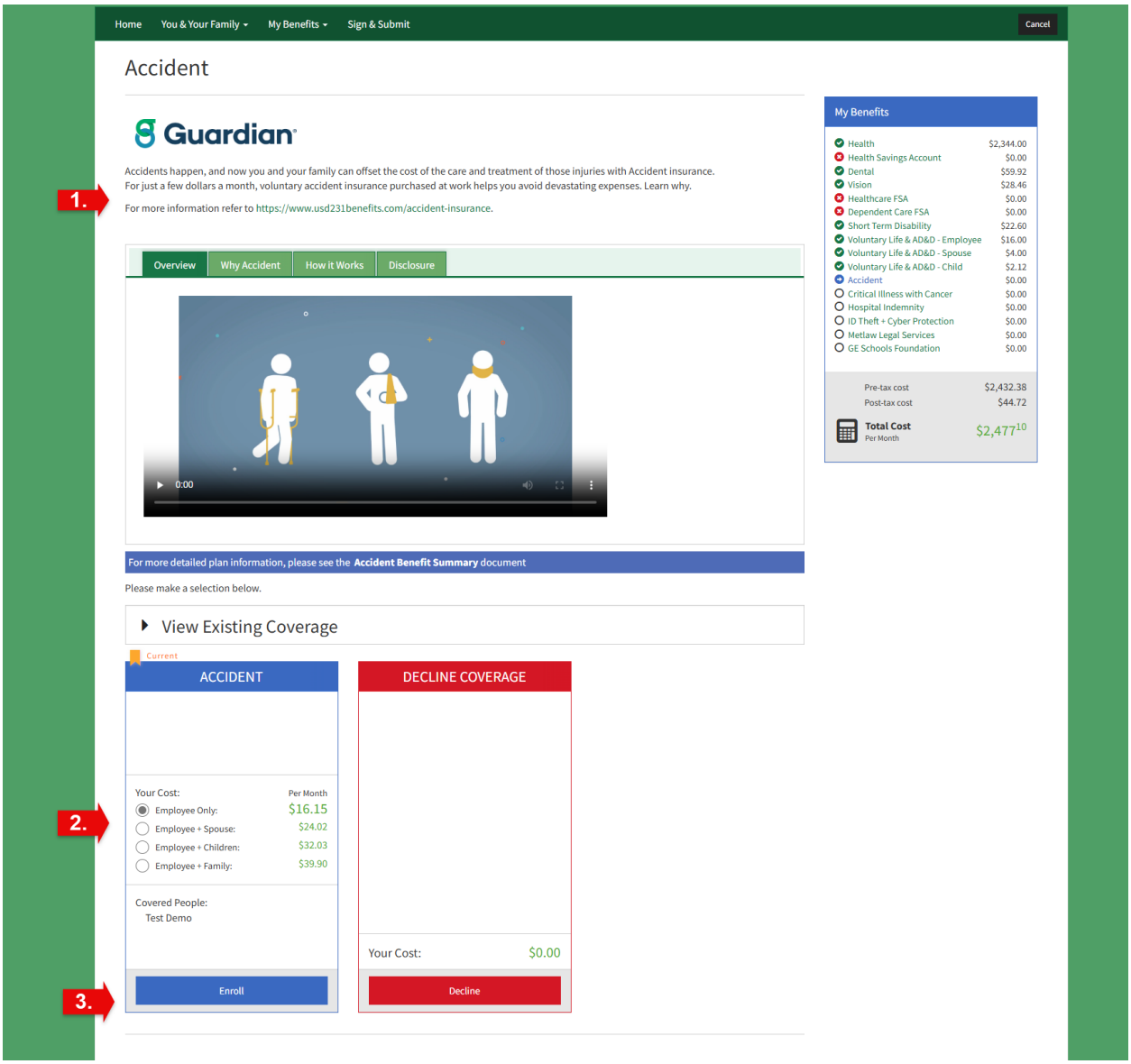

1. If you wish to enroll in the Group Accident plan, follow the prompts
2. Select the coverage tier you wish to apply for
3. Click Enroll or Decline

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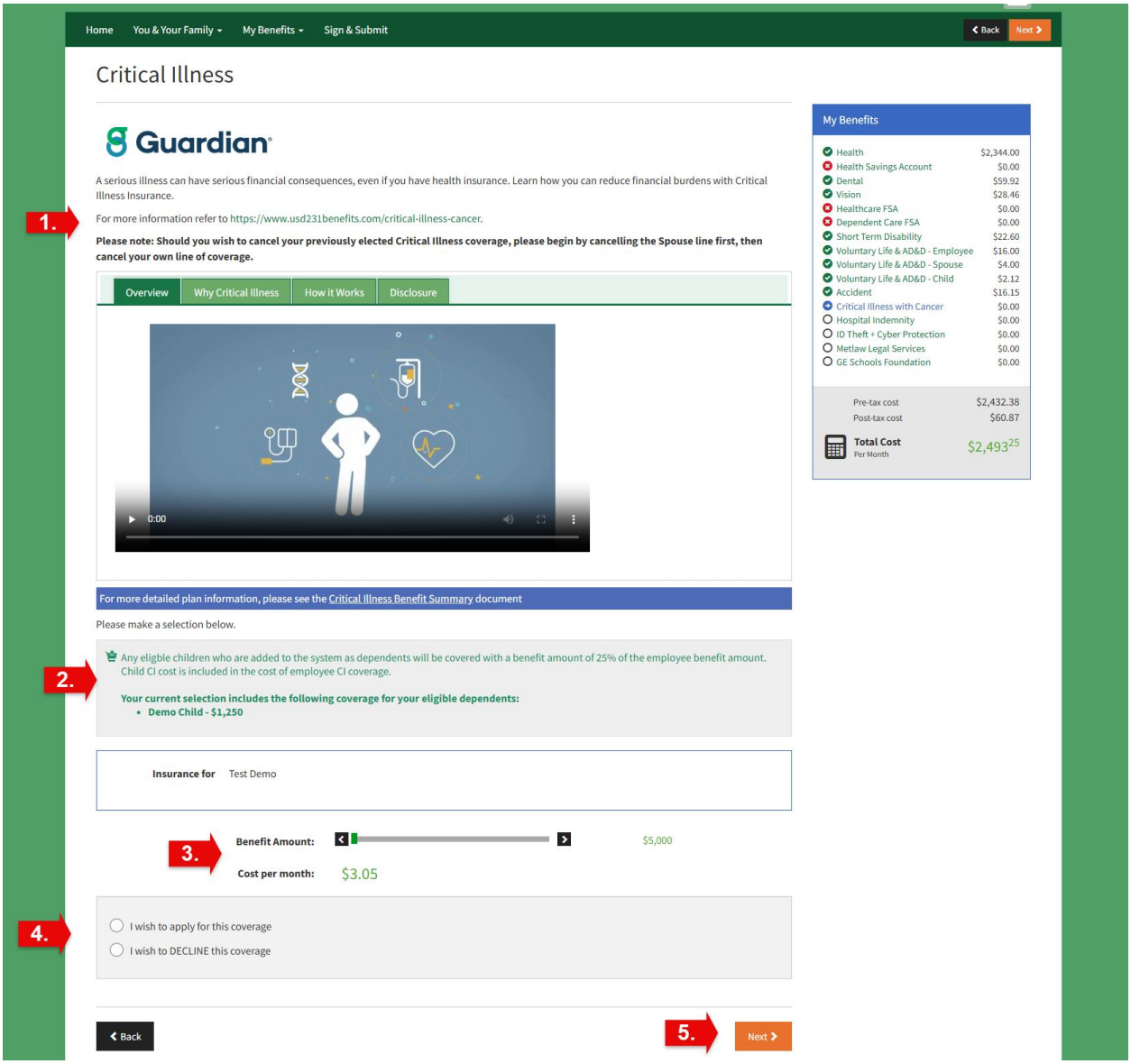
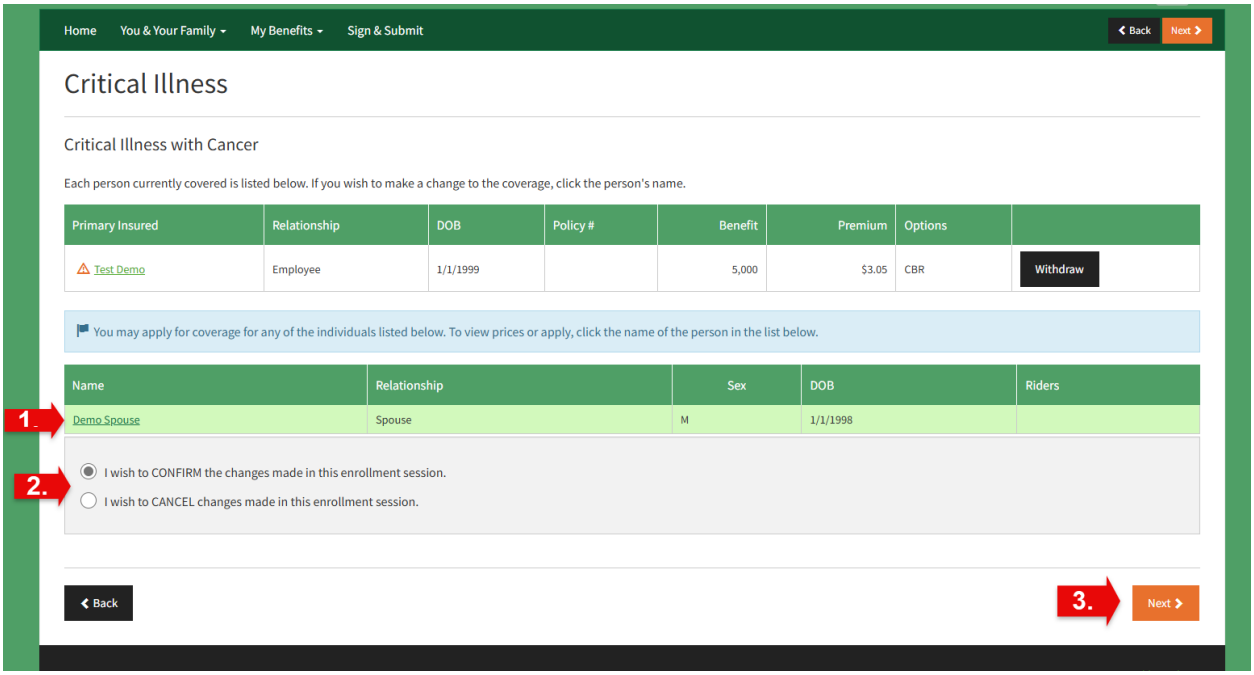
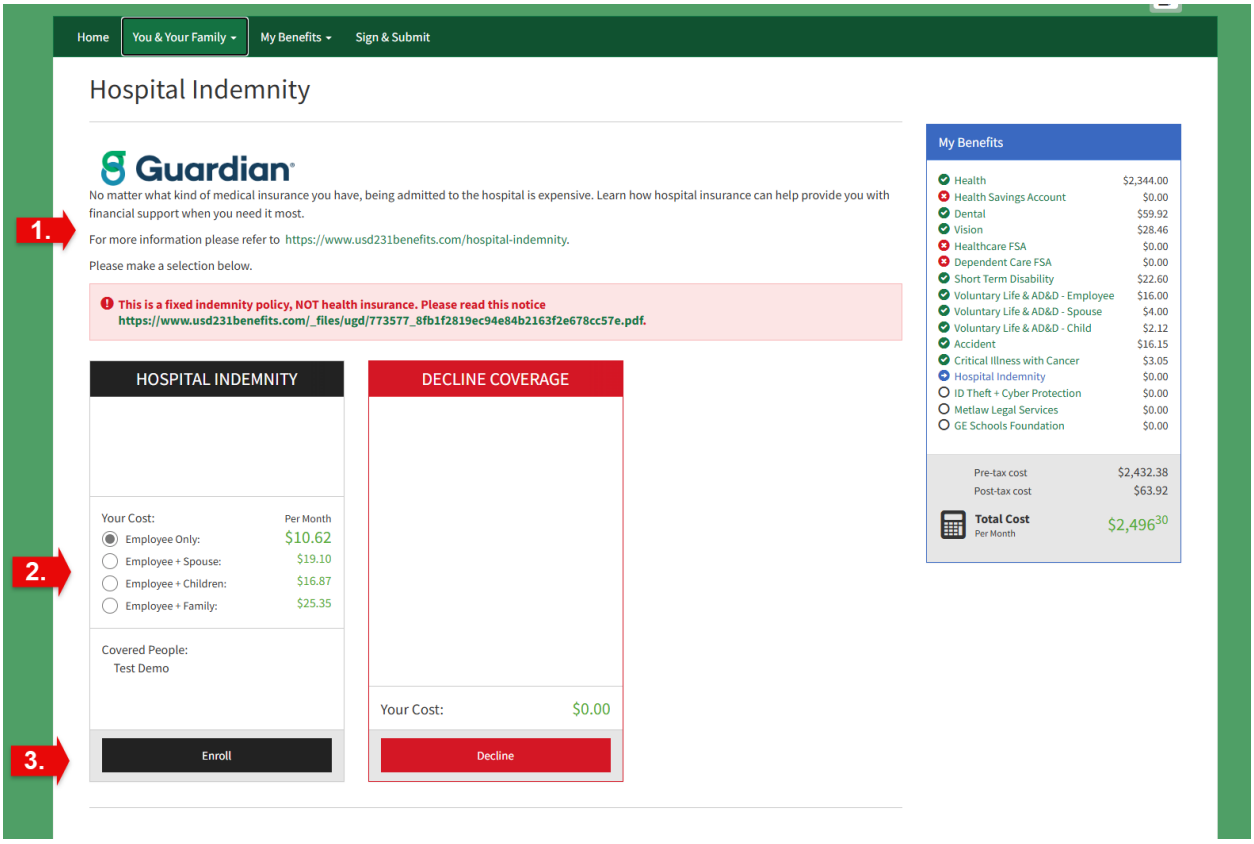


1. If you wish to enroll in the Group Critical Illness follow the prompts
2. Please note, any eligible children who are added to the system as dependents will be covered with a benefit amount of 25% of the employee benefit amount. There is no additional cost for this child coverage. This section will show each eligible child and their coverage amount.
3. You can drag the green bar here to adjust the benefit amount and see the correlating cost
4. Select if you wish to apply or waive this option
5. Click **Next** once complete



If you were enrolled in CI in past years, you will be brought to this screen after you have selected the enrollment amount for yourself

1. If you wish to elect for your spouse, or change the current CI election for your spouse, select their name
2. If you do not wish to elect or change amounts for your spouse, select that you would like to CONIFRM or CANCEL the changes you made to your own coverage
3. Then click NEXT



1. If you wish to enroll in the Group Hospital Indemnity follow the prompts
2. Select the tier you would like to enroll in here
3. Click Enroll or Decline

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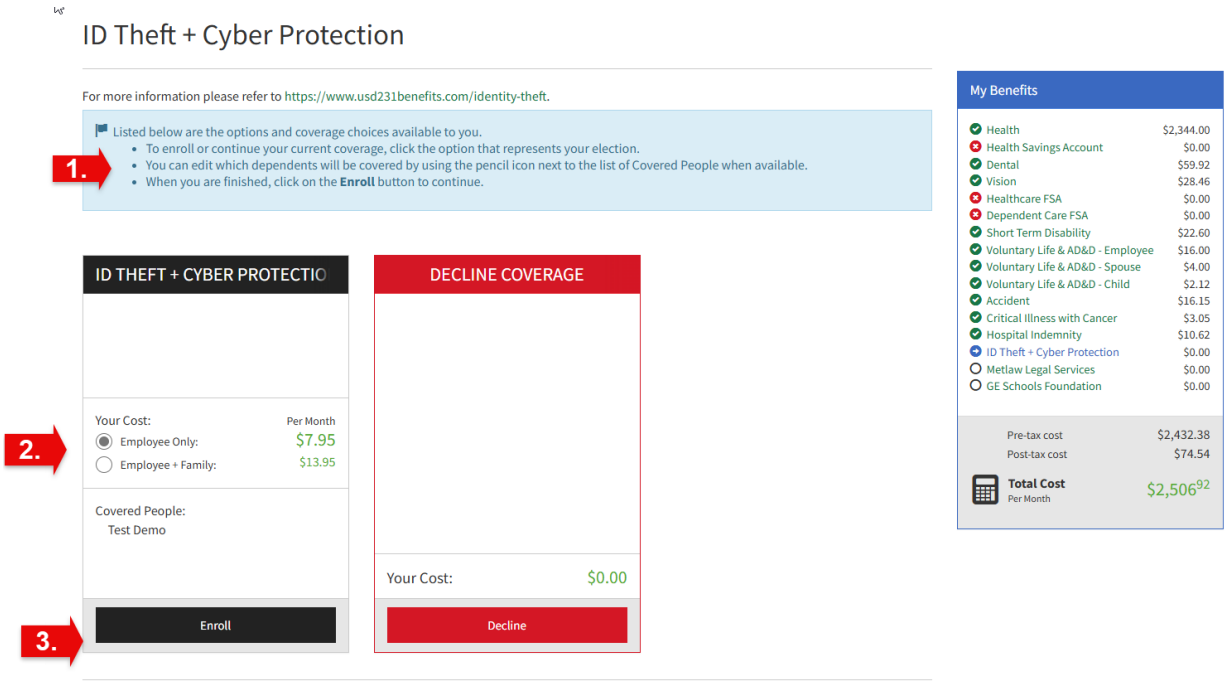

1. Review the options for Identity Theft Protection
2. Select your coverage tier
3. Choose to Enroll or Decline

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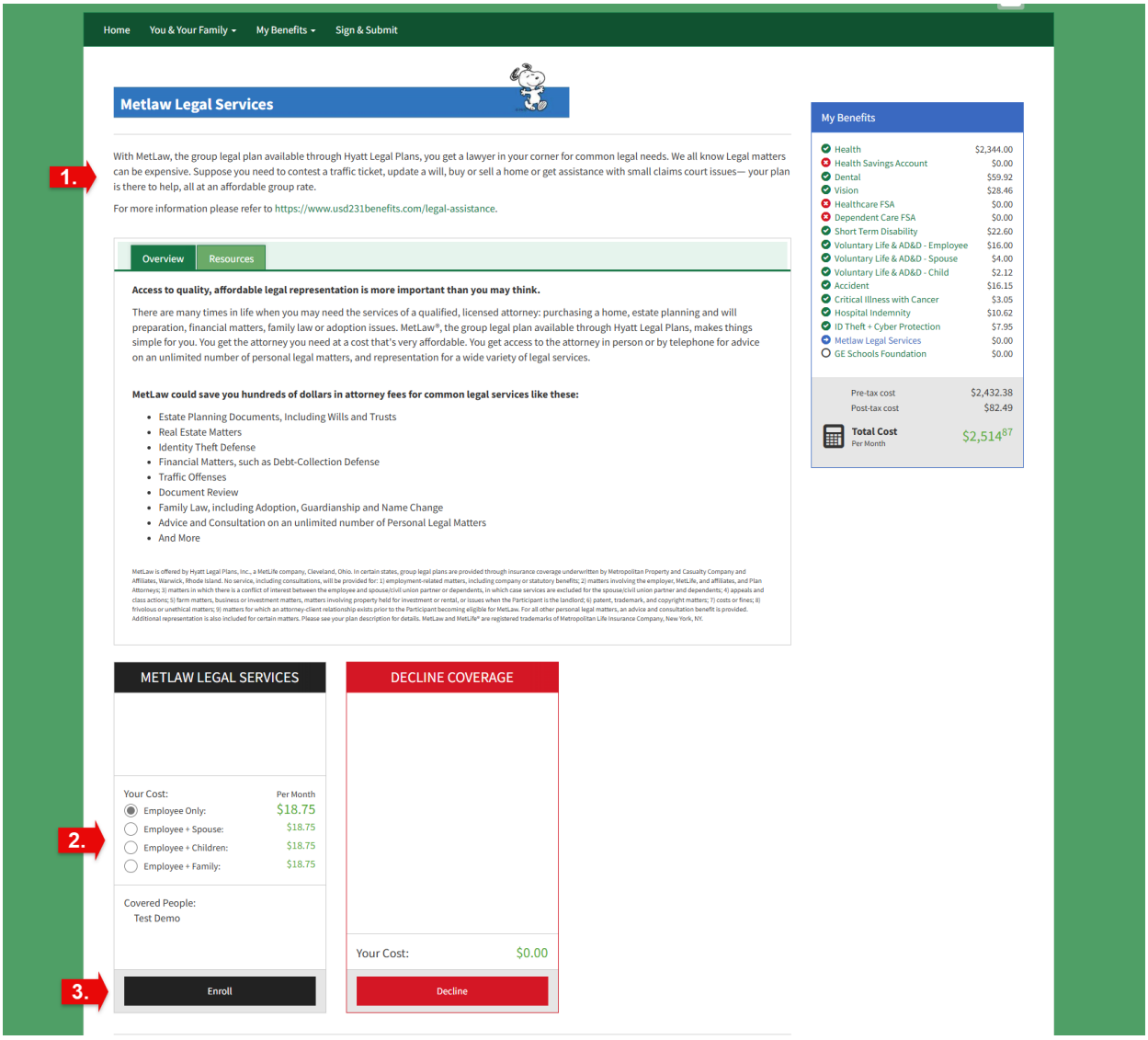

1. Review the details for the prepaid Legal plan
2. Select your coverage tier
3. Choose to Enroll or Decline

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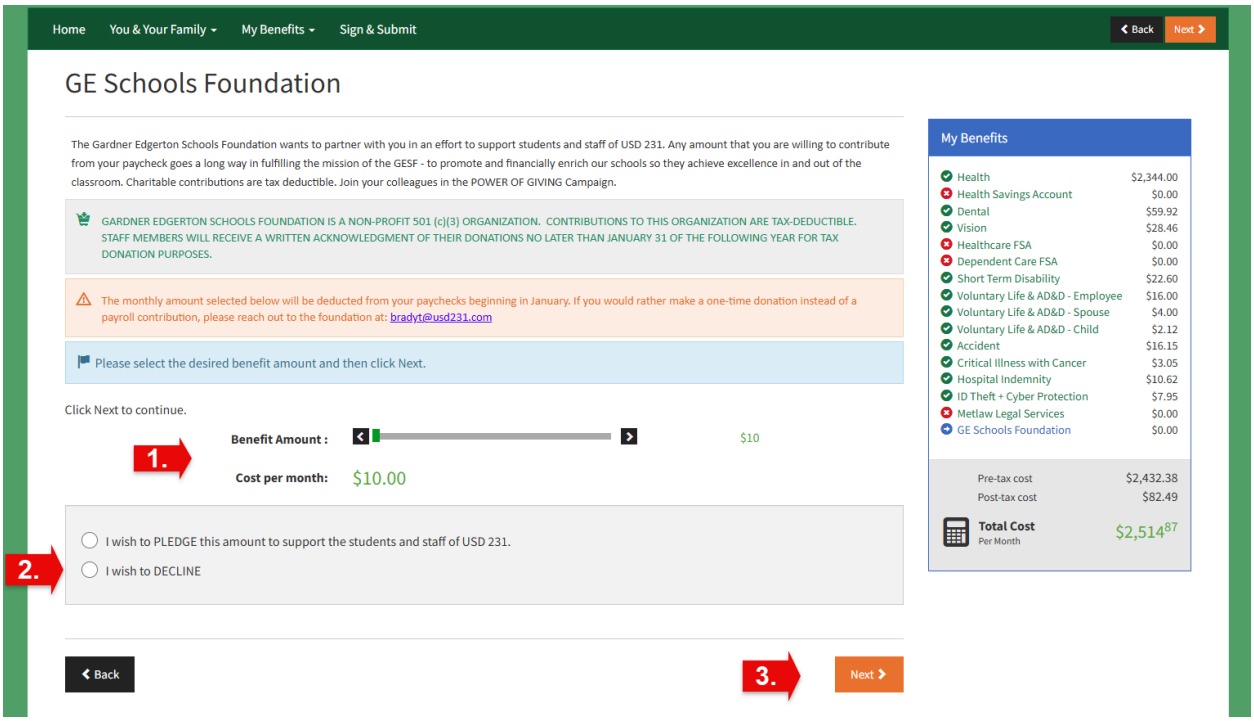


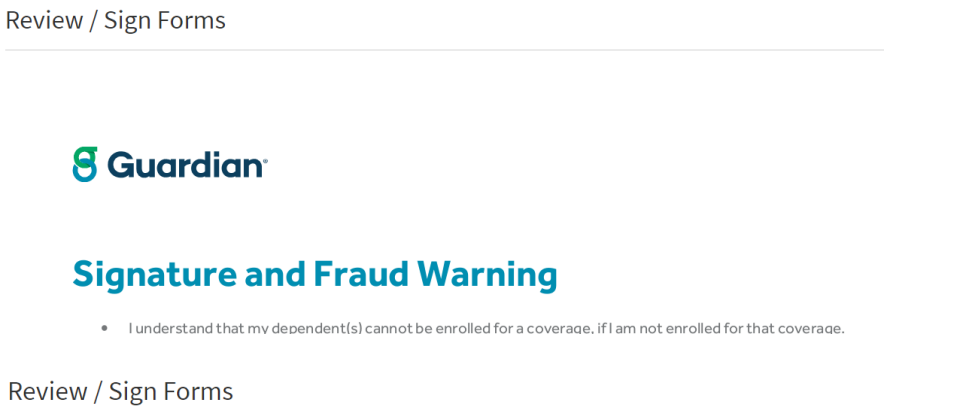
The final enrollment pages are for the GE Schools Foundation. If you wish to donate read through the information at the top of the page, then:

1. Use the sliding bar to elect the amount you wish to donate per paycheck
2. Select Pledge or Decline
3. Hit Next

On the following screen, you will be able to select your Tshirt size, to receive your Tshirt for your donation. And on the final page, donors giving $25 or more/month OR +$10/month increase from the previous year's commitment will ALSO receive their choice of a GESF Polo Shirt or GESF Tumbler.

Once your selections are made, hit Next.

If you have elected any Guardian products, review and acknowledge the Guardian Fraud Warning and Electronic Consent Forms by clicking SIGN FORM at the bottom of the pages


Review / Sign Forms

Guardian

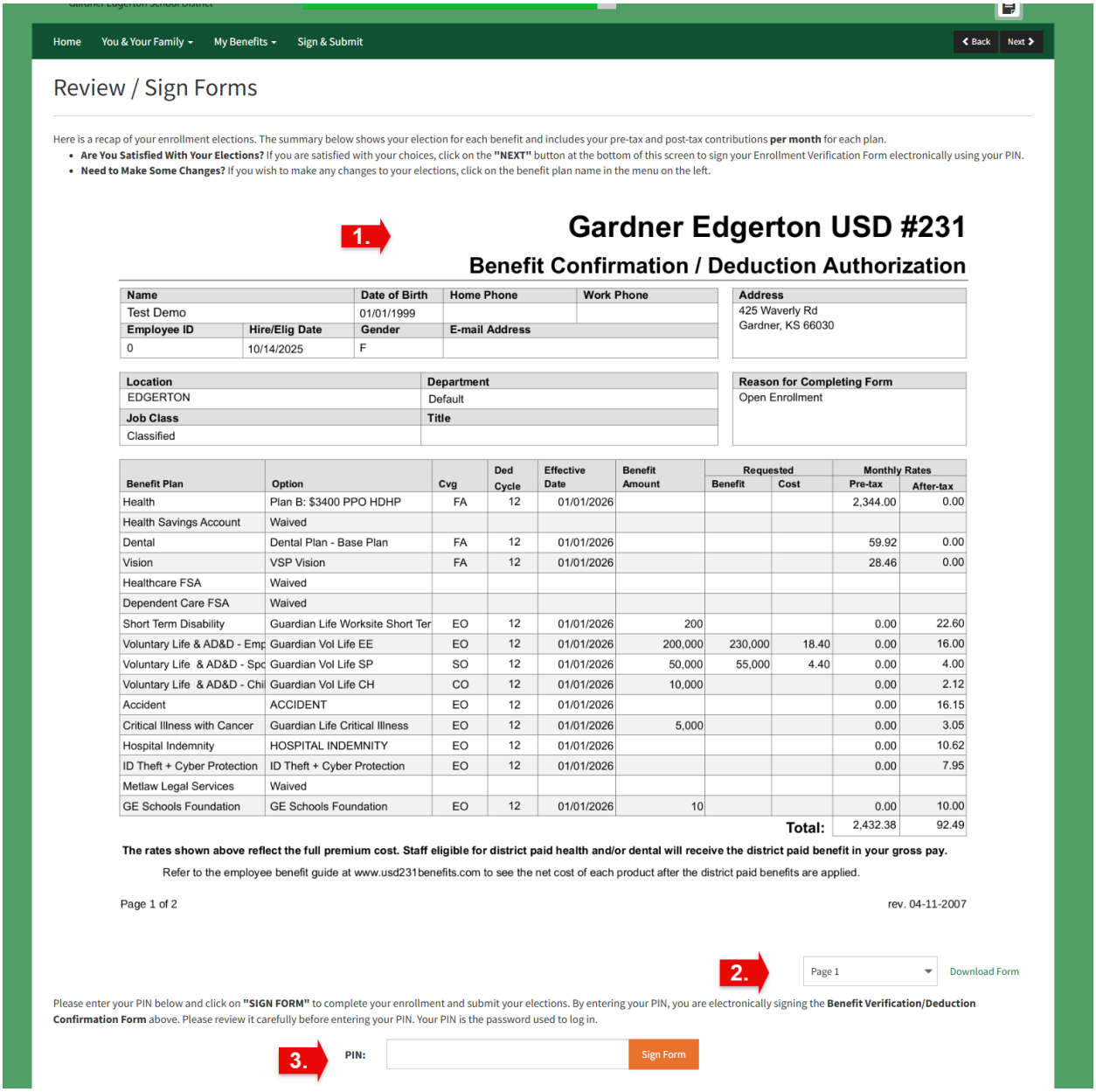
Signature and Fraud Warning

- I understand that my dependent(s) cannot be enrolled for a coverage, if I am not enrolled for that coverage.

Review / Sign Forms

Guardian

VOLUNTARY CONSENT TO RECEIVE THE ELECTRONIC TRANSMISSION OF DOCUMENTS



1. Review all your elections for Open Enrollment here
2. Toggle to the 2nd page of the Benefit Confirmation here
3. Sign your PIN (the password you used to log in to the enrollment site = the last four digits of your Social Security Number and the last two digits of your birth year).

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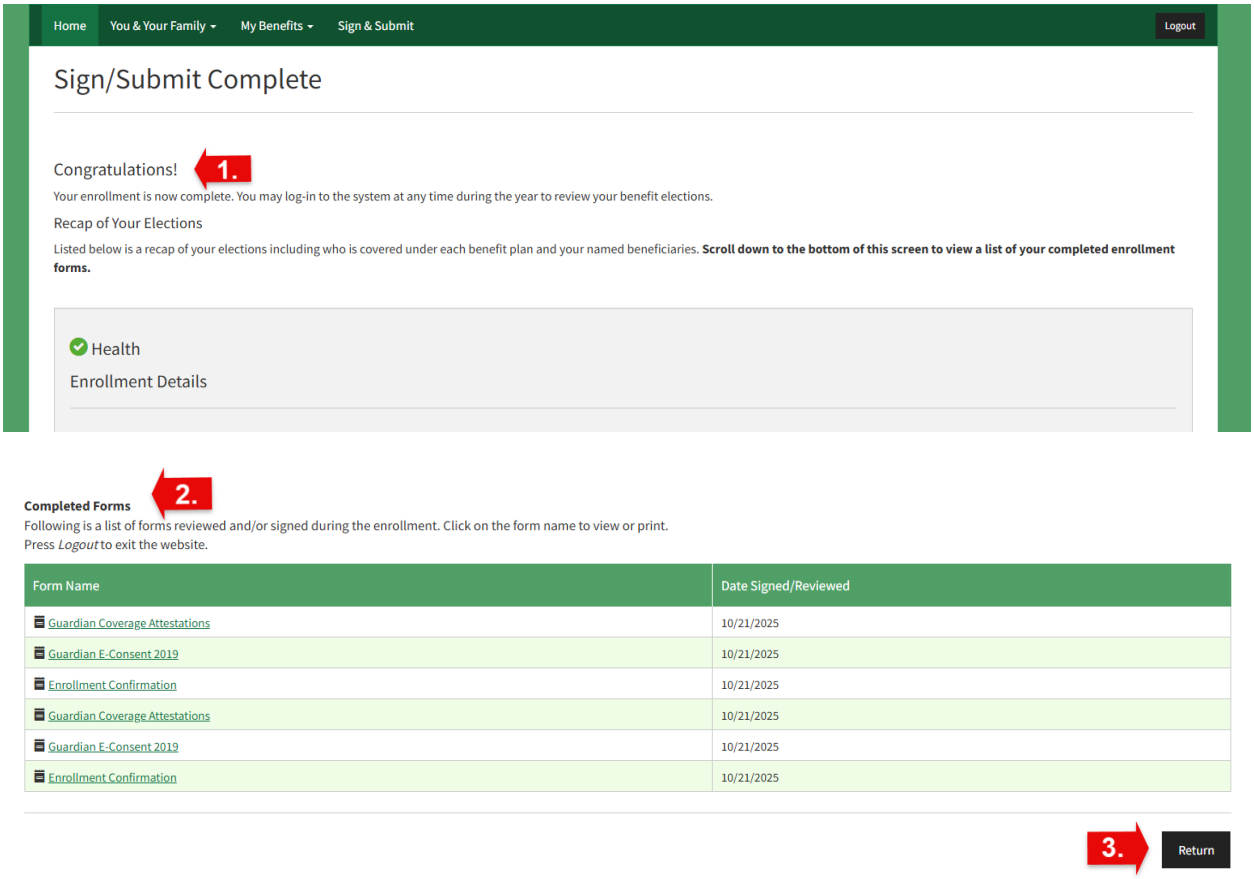

1. Congratulations! You have completed your 2026 benefit enrollment. Scroll through to see the plans you elected
2. At the bottom of the page you will see copies of any forms you signed. You can print these off at any time.
3. Click Return to back to the Welcome Page. You will receive a benefit confirmation email shortly after your enrollment is complete.