

# HOW DO I CHANGE MY BENEFITS?

Changes and the opportunities for changes vary. Here are some of the most common requests the Benefits Administrator receives:

1. I need to add my new wife / new baby / etc.: Being "new" is the key. Under the federal provisions for Section 125 Cafeteria Plans (both our medical and dental plans are "125" benefits, meaning you pay no taxes on premiums, but are subject to change limits), you have to apply for the addition of a new dependent within 31 days. The form required for Section 125 change consideration is on this site under "Forms & Reference".
2. I need to get onto our plan: We need to know details in order to explain what's available. If you still have questions after visiting the MY BENEFITS link on this website, please call Team Services.
3. I need to drop my coverage: Depends which coverage. The Dental and Medical are subject to Section 125 Cafeteria Plan restrictions. The forms are on this site under "Forms & Reference". Most other changes would only be allowed annually either during "Open Enrollment" or at another designated time (for example, at year end). Call Team Services to explain your need and see if we can accommodate your request.

FOR MORE ANSWERS, EITHER CLICK ON OUR "MY BENEFITS" BUTTON OR CALL TEAM SERVICES @ 210.558.5005