

PlanSource Login and Enrollment Instructions

Login to PlanSource at https://benefits.plansource.com

• Your username will be the first initial of your first name, the first 6 characters of your last name, and the last 4 digits of your SSN.

• For Example: Taylor Williams, XXX-XX-1234 would be twillia1234

• Your default password will be set to your date of birth in the YYYYMMDD format.

Complete the following steps to elect the desired coverage for you and your family.



Launch Enrollment

On the homepage, click "Get Started" to begin your enrollment.

	~	Verify your Pers	Verify your Personal Information				
My Profile		Please review your personal information below.					
		If your information needs to be edited or updated, please scroll to the bottom of the screen and click the EDIT INFO button.					
My ID Cards							🖋 Edit Info
	>	Basic Information			Contact Information		
	>	First Name * Chris	Middle Name Two		Address 1 * 123 Main Street	Address 2	
	>	Last Name * TEST	^{SSN *} 845-49-0913		City * Evermore	State * Alabama	
					Zip * 12345	Home Phone	
		Personal Inform	nation		Cell	Office Phone	

Profile

First, you'll be asked to review and update your profile and ensure that all information is correct. You will also be asked to review your dependent information.

	Profile	>	Current Benefit Election	ns	
		~	a Review Profile	- R	
	Documents	>	Time to shop for your benefits! Select a benefit below to review your av	vailable plans. Be sure to review all benefits before checking out.	Additional Content (2): Document Library Don't Forget!
		>			

Shop for Benefits

All of the benefits available for you to enroll in will be listed on this page. Click each benefit plan to review and make your elections.



the reverse the second of the		& Welcome Chris - F \$443.55 Per Pay Period
Medical: BCBSNC Base Plan		
To Available Plans Family Covered	+ Add Family Mem	ber
Vourself	e 🖌 🕈 Kid One	💀 BlueCross BlueShield of North Carolina
🌡 Employee Only	\$51.21 Per Pay Period	BCBSNC Base Plan
🛔 + 🌲 🛛 Employee + Spouse	\$232.25 Per Pay Period	\$360.42
🛔 + 🏌 + 🏌 Employee + Children	\$178.11 Per Pay Period	Per Pay Period
鲁+鲁+甞+甞 Employee + Family	\$360.42 Per Pay Period	🀂 Update Cart
Current Benefit	Coverage effective from 10/01/2019 to 09/30/2	020
BlueCross BlueShield of North Carolina	BCBSNC Base Plan \$360.42 Per Pay Period	Occline Medical Benefits

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

Plan Details

The plan detail page will give you information about each plan.

Select a Plan

Click "Edit Family Covered" and select the card for each family member you would like to cover. Then "Update Cart"

		the rest solutions and the rest solution of the res		Per Pay Period
	>	Dental		Employee Assistance Program: Voya EAP
nefits 🕕	~	O O	\$21.80 Per Pay Period	Plans to Review Medical: BCBSNC Base Plan
ew Hire Benefits rollment Incomplete				Spouse Critical Illness: Decline
	>	vision		O Child Critical illness: Decline
		C O BUCKET BACKET BEEBSNC Exam Plus Vision Plan	\$7.50 Per Pay Period	Dental: BCBSNC Dental Plan
		Pacie Employee Life		Vision: BCBSNC Exam Plus Vision Plan
				Basic Short Term Disability: Voya Short Term Disability - Leadership Team
		O VOYA. Voya Basic Employee Life		Basic Long Term Disability: Voya Long Term Disability
		O You are changing from: Voya Basic Employee Life		
				20 of 20 In Cart
			You must select or decline all c	🏲 Review & Checkout

Shopping Cart

The cart displays a running total of your combined benefits cost. You will need to select or decline each benefit.

Checkout

To finalize your choices, click "Review and checkout". You **MUST** complete checkout and submit in order to enroll.