




MetLife

| Log in and Enrollment Instructions |

How to Guide:

- Create a new account. You will be provided an email with a link or log into www.nnvabenefits.com You will need your Employee ID number which can be found at the top left hand corner of your paystub, First Name, Last Name (as stated in Munis) and your date of birth. Check the “I’m not a robot” and then click “Next”.



Create a New Account


To begin, enter the following information:

EMPLOYEE ID (LOCATED ON YOUR PAYSTUB)

FIRST NAME

LAST NAME

DATE OF BIRTH (MM/DD/YYYY) 

I'm not a robot 
reCAPTCHA
Privacy - Terms

NEXT

➤ Enter an email address and create a password. Your password must be 8 characters long and satisfy 3 of the 4 following:

- ✓ Has at least one uppercase character
- ✓ Has at least one lowercase character
- ✓ Has at least one special character
- ✓ Has at least one numeric character

You will have to confirm your password by re-entering it then click “Next”.

Enter Email Address and Password

New Password

Confirm Password

✓ Your password must satisfy 3 of the following 4 conditions:

- ✓ Has at least one uppercase character.
- ✓ Has at least one lowercase character.
- ✓ Has at least one special character.
- ✓ Has at least one numeric character.

✓ Must be at least 8 characters.

NEXT

➤ You will have to enter your email address and add a cell phone number for recovery in the event you forget your login information.

Click “Send Code”

Set up Recovery Options

You must verify your email and enter the recovery code to authorize your account. You may also submit a cell phone number for an additional recovery option.

Email Address


Verified

Cell Phone Number

SEND CODE

NEXT

- Once you receive the 6 character verification code on your cell phone, you will enter and click “Submit”.



Set up Recovery Options

You must verify your email and enter the recovery code to authorize your account. You may also submit a cell phone number for an additional recovery option.

Email Address
ROBBINSMD@NNVA.GOV
.....

✔ Verified

Cell Phone Number
7573257610
.....

A 6 character verification code has been sent to the device you selected. Please enter it below:

Enter code

You have **09:43** minutes left.

➤ This is the Welcome page. Click “Continue”.

2020 OPTIONAL LIFE OPEN ENROLLMENT

- Welcome
- Set Up Your Family

CHOOSE MY BENEFITS

- Employee Life \$2.25
- Spouse Optional Life \$2.25
- Confirm Elections
- Confirmation Statement

Welcome to your Open Enrollment Transaction!

City of Newport News understands that Group Life insurance is an important part of your benefits program and wants to make sure you have the opportunity to help protect your family's financial security. We are pleased to announce that City of Newport News has chosen MetLife as the new provider of your life insurance program effective January 1, 2021.

If you need additional coverage to protect your family's financial security, you can enroll or increase your existing coverage (subject to EOI requirements) during the upcoming enrollment period, **November 16th-20th, 2020!**

[CONTINUE](#)

➤ This page allows you to “Set Up Your Family”. **If you have Child Life Insurance coverage, then you will need to click on “Add an Eligible Dependent” and list all children that are covered for that child life insurance. If they are not listed, then they will not be insured.**

Newport News

Welcome | LOGOUT | CONTACT | LANGUAGE | ACCOUNT SETTINGS

View My Info & Benefits | Benefits Overview, FAQ & Forms | Manage My Benefits

Set Up Your Family

Taking care of yourself and your family today can help prepare you for a long and healthy life. To get started, please tell us a little about your family members.

My Family (Dependents)

- In this section you will add information for your dependents eligible for coverage in the MetLife Life Insurance benefit plans.
- Dependent children up to age 26 are eligible for coverage and must be added below to reflect on your enrollment.
- Dependent children over 26, are eligible for coverage provided the child is incapable of self-support due to a mental or physical disability, is fully dependent on you for support as indicated on your federal tax return, and is approved by your medical plan to continue coverage past age 26.

My Important People (Beneficiaries)

- In addition to your eligible dependents, you can add important people who you may designate as beneficiaries to your profile.

Review My Family

Employee: SSN XXX-XX-XXXX, DOB MM/DD/YYYY

Spouse: SSN XXX-XX-XXXX, DOB MM/DD/YYYY

[Add an Eligible Dependent](#)

Review My Important People

You Have No Important People Set Up at this Time.

[Add an Important Person](#)

[PREVIOUS](#) [CONTINUE](#)

Add/Edit Family Members

Who would you like to add?

Child

First Name*

Jane

Last Name*

Doe

SSN*

001-01-0001

DOB*

01/08/2001

I don't have an SSN

Female

Disabled

Student

Personal Email

*****@***.com

Cell Phone

(XXX) XXX-XXXX

Same as Employee's Home Address

Address 1

[Redacted]

Address 2

[Redacted]

City

NEWPORT NEWS

State

VA

Zip

23608

CANCEL

SAVE

Click "Save"

- This screen shows your current coverage. You will have the option to “**Keep Coverage**”, “**Elect Coverage Amount**” to make changes or “**Decline Coverage**”.

View My Info & Benefits
Benefits Overview, FAQ & Forms
Manage My Benefits

2020 OPTIONAL LIFE OPEN ENROLLMENT

Set Up Your Family

CHOOSE MY BENEFITS

Employee Life \$12.31

Basic Life

Supp Life Compare

Beneficiaries

EOI Explanation

Confirm

Spouse Optional Life \$6.16

Child Optional Life \$0.90

Confirm Elections

Confirmation Statement

[Learn About Basic Life Insurance](#)

City of Newport News pays for your basic life insurance, but you may purchase additional coverage for yourself, your spouse and/or children.

To enroll in Employee Paid Supplemental Life select "Elect Coverage Amount".

CURRENT COVERAGE

METLIFE
BASIC LIFE (CLASS 1)

Benefit Amount	\$62,000.00
Salary Multiplier	1x
Per Pay	\$0.00
Effective Date	1/1/2021
Beneficiaries:	▼

EMPLOYEE SUPPLEMENTAL

Benefit Amount	\$246,000.00
Salary Multiplier	4x
Per Pay	\$12.31
Effective Date	1/1/2021
Beneficiaries:	▼

KEEP
COVERAGE >

ELECT
COVERAGE AMOUNT >

DECLINE
COVERAGE >

PREVIOUS

- If you choose to change coverage and select “Elect Coverage Amount” then you will see your options on the next screen. You can either select to increase or decrease your coverage. As you change your options, the premium cost per pay will change accordingly.

The screenshot shows the '2020 OPTIONAL LIFE OPEN ENROLLMENT' page. On the left is a navigation menu with options like 'Set Up Your Family', 'Employee Life', 'Basic Life', and 'Supp Life Compare'. The main content area is titled 'Learn About the Optional Life Insurance' and includes explanatory text and a table of costs.

Category	Coverage Amount	Coverage Cost	Per Pay Cost
EMPLOYER PAID BASIC	Your employer automatically provides you with Basic Insurance coverage at no cost to you	\$62,000.00	\$0.00
EMPLOYEE PAID SUPPLEMENTAL	4.0x SALARY	\$246,000.00	\$12.31
Total Cost		\$308,000.00	\$12.31

Buttons for 'PREVIOUS' and 'CONTINUE' are visible at the bottom.


- Now enter your beneficiary information for Basic Life and Supplemental Life.

The screenshot shows the 'Assign Your Beneficiaries' page. It includes instructions on how to designate primary and secondary beneficiaries. A table shows the current beneficiary status for 'BASIC LIFE (CLASS 1)'. A 'Spouse' is listed as a beneficiary with 0% primary and 0% secondary designation. There is an 'ADD BENEFICIARY' button and a 'Total' section showing 0% for both primary and secondary designations.

Beneficiary	Primary %	Secondary %
Spouse	0 %	0 %
Total	0 %	0 %

Buttons for 'PREVIOUS' and 'CONTINUE' are visible at the bottom.

- Once you have elected your level of coverage and entered beneficiary information, you will be provided a comparison of your current coverage compared to the new coverage selected.



[View My Info & Benefits](#)

[Benefits Overview, FAQ & Forms](#)

[Manage My Benefits](#)

2020 OPTIONAL LIFE OPEN ENROLLMENT

Set Up Your Family

CHOOSE MY BENEFITS

Employee Life \$12.31

Basic Life

Supp Life Compare

Beneficiaries

EOI Explanation

Confirm

Spouse Optional Life \$6.16

Child Optional Life \$0.90

Confirm Elections

Confirmation Statement

Confirm Your Life Insurance Election

Please review your Life Insurance elections to make sure you've selected the appropriate coverage. If all looks good, go to the next step.

CURRENT COVERAGE

METLIFE

BASIC LIFE (CLASS 1)

Benefit Amount \$62,000.00

Salary Multiplier 1x

Per Pay \$0.00

Effective Date 1/1/2021

Beneficiaries: ▼

EMPLOYEE SUPPLEMENTAL

Benefit Amount \$246,000.00

Salary Multiplier 4x

Per Pay \$12.31

Effective Date 1/1/2021

Beneficiaries: ▼

NEW COVERAGE

METLIFE

BASIC LIFE (CLASS 1)

Benefit Amount \$62,000.00

Salary Multiplier 1x

Per Pay \$0.00

Effective Date 1/1/2021

Beneficiaries: ▼

EMPLOYEE SUPPLEMENTAL

Benefit Amount \$123,000.00


Salary Multiplier 2x

Per Pay \$6.16

Effective Date 1/1/2021

Beneficiaries: ▼

PREVIOUS



CONTINUE

➤ You will encounter the same process and choices with Spouse Supplemental Insurance:

View My Info & Benefits Benefits Overview, FAQ & Forms Manage My Benefits

2020 OPTIONAL LIFE OPEN ENROLLMENT

- ✓ Set Up Your Family
- CHOOSE MY BENEFITS**
- ✓ Employee Life \$6.16
- ✓ Spouse Optional Life \$6.16
- Learn**
- Compare
- EOI Explanation
- Confirm
- Child Optional Life \$0.90
- Confirm Elections
- Confirmation Statement

Learn About Spouse Optional Life Insurance

If you purchase Supplemental Life insurance for yourself, you may also purchase coverage for your spouse. You are automatically the beneficiary of the coverage you elect on your spouse. The cost of this is deducted from your payroll through payroll deductions.

CURRENT COVERAGE

METLIFE
SPOUSE SUPPLEMENTAL SPOUSE ONLY

Benefit **\$123,000.00**

Salary Multiplier **2x**

Per Pay **\$6.16**

Effective Date **1/1/2021**

Who's Covered **Spouse**

KEEP COVERAGE

ELECT COVERAGE AMOUNT

DECLINE COVERAGE

PREVIOUS

View My Info & Benefits Benefits Overview, FAQ & Forms Manage My Benefits

Spouse Optional Life Insurance

You can elect Spouse Optional Life Insurance up to 2X's your annual salary.

Any increase or new election will be subject to Evidence of Insurability (EOI) requirements.

During Open Enrollment, spouses newly enrolling or increasing coverage will be subject to Evidence of Insurability (EOI) or proof of good health. To provide proof of good health, you will be asked to complete a health questionnaire and are subject to insurance carrier approval. MetLife may approve or decline coverage based on a review of your health history.

SPOUSE SUPPLEMENTAL

— 1.0x SALARY +

\$62,000.00 COVERAGE | **\$3.10 PER PAY** **WAIVE**

Total Cost **\$62,000.00 COVERAGE** | **\$3.10 PER PAY**

PREVIOUS **CONTINUE**



2020 OPTIONAL LIFE OPEN ENROLLMENT

Set Up Your Family

CHOOSE MY BENEFITS

Employee Life \$6.16

Spouse Optional Life \$6.16

Learn

Compare

EOI Explanation

Confirm

Child Optional Life \$0.90

Confirm Elections

Confirmation Statement

Confirm your Spouse Optional Life Insurance



Please review your Spouse Optional Life Insurance elections to make sure you've selected the appropriate coverage. If all looks good, go to the next step.

CURRENT COVERAGE

METLIFE	
SPOUSE SUPPLEMENTAL	
SPOUSE ONLY	
<i>*Plan terminated before effective</i>	
Benefit	\$123,000.00
Salary Multiplier	2x
Per Pay	\$6.16
Effective Date	1/1/2021
Term Date	12/31/2020
Who's Covered	Spouse

NEW COVERAGE

METLIFE	
SPOUSE SUPPLEMENTAL	
SPOUSE ONLY	
Benefit	\$62,000.00
Salary Multiplier	1x
Per Pay	\$3.10
Effective Date	1/1/2021
Who's Covered	Spouse

PREVIOUS



CONTINUE

- If you have elected Child Life Insurance, please click **“Elect”** to add the child(ren) to be covered.

Home View My Info & Benefits Benefits Overview, FAQ & Forms Manage My Benefits

2020 OPTIONAL LIFE OPEN ENROLLMENT

- ✔ Set Up Your Family

CHOOSE MY BENEFITS

- ✔ Employee Life \$6.16
- ✔ Spouse Optional Life \$3.10
- ✔ Child Optional Life \$0.90
- Learn**
- Compare
- Confirm
- Confirm Elections
- Confirmation Statement

Learn About Child Optional Life Insurance

If you purchase Supplemental Life insurance for yourself, you may also purchase coverage for your child(ren). You are automatically the beneficiary of the coverage you elect on your child(ren). The cost of this is deducted from your payroll through payroll deductions.

CURRENT COVERAGE

METLIFE	
CHILD SUPPLEMENTAL	
CHILD(REN) ONLY	
Benefit	\$10,000.00
Per Pay	\$0.90
Effective Date	1/1/2021
Who's Covered	Employee

KEEP COVERAGE

ELECT COVERAGE AMOUNT

DECLINE COVERAGE

PREVIOUS

Add/Edit Family Members

Who would you like to add? Child

First Name* Last Name*

SSN* I don't have an SSN

DOB* Disabled Student

Female Disabled Student

Personal Email Cell Phone

Same as Employee's Home Address

Address 1

Address 2

City State Zip

CANCEL **SAVE**

Click the drop down box to select each child to be covered and then save your election.

➤ This final page is for you to review your selections. If you notice any errors, please correct before continuing.



View My Info & Benefits

Benefits Overview, FAQ & Forms

Manage My Benefits

2020 OPTIONAL LIFE OPEN ENROLLMENT

Set Up Your Family

CHOOSE MY BENEFITS

Employee Life \$6.16

Spouse Optional Life \$3.10

Child Optional Life \$0.90

Confirm Elections

Confirmation Statement

**HOLD ON YOU'RE NOT DONE YET!
IT'S TIME TO REVIEW AND APPROVE YOUR SELECTIONS.**

Look over your plans and once you're ready to approve, enter your 4 digit signature in the [Confirm My Elections](#) box and hit the [Confirm](#) button at the bottom of the page. [Need to Make a Change?](#) Select the [Make Changes](#) button in each plan card.

My Personal Information

Date of Birth _____ Gender **Female**

Age **44** Marital Status **Unknown**

My Contact Information

EMAIL _____ PHONE _____

ADDRESS _____

Address
NEWPORT NEWS, VA 23608

My Important People

Spouse (Male) Verified

SSN _____ Age **45**

Date of Birth _____

Child (Female) None

SSN _____ Age **19**

Date of Birth _____

METLIFE EDIT **\$0.00**
Per Pay

BASIC LIFE (CLASS 1)

Coverage Amount **\$62,000.00** Coverage Tier **EMPLOYEE ONLY**

Effective Date **01/01/2021**

Covered Members Employee Effective 1/1/2021

Beneficiaries Spouse Primary 100%

- If your selections are correct, then you will enter the last 4 digits of your SSN to confirm and press continue.

MY TOTAL COST

Employee Cost

\$13.22

Per Pay

SSN to confirm elections

By entering the last 4 digits of your social security number you are digitally confirming your benefits election and authorizing deductions for coverage.

PREVIOUS

CONTINUE

- You may print a copy for your records.