

# NUFlex Benefits Enrollment Guide

Updated: October 18, 2024

You can submit your NUFlex Benefits changes online using Firefly's Employee Self Service (ESS) website by 5:00 P.M. on the last day of the enrollment period. **You can update or remove plans as many times as you like during the enrollment period.** Each time, you will receive an updated confirmation statement the following day with your latest selection.

This online method is fast and convenient and can be completed from any computer that has access to the internet. Instructions for completing the online enrollment process are provided below. Or if you prefer, video tutorials are available from a tile on the Firefly home page (directs you to [Benefits Enrollment Help](#)).

\*Note: all dates/times listed are Central Time (CT).

## HELPFUL HINTS

- Benefits enrollment help documentation and videos can be found [here](#).
- If you have questions about the online enrollment process, contact your [campus benefits office](#).

**UNL** 402-472-2600

**UNO** 402-554-3660

**UNK** 308-865-8522

**UNMC** 402-559-4340

**UNCA** 402-472-5258

- Links to benefits enrollment information:  
[NUFlex Benefits Summary](#) | [Price Tag Summary](#) | [Benefits Webpage](#)

## LOG IN TO FIREFLY

- Windows users should use Microsoft Edge, Mozilla Firefox, or Google Chrome. Macintosh users can use Mozilla Firefox, Chrome, or Safari to complete the enrollment.
- Enter your NU ID or University email address in the **User ID** field.
- Enter your password in the **password** field.
  - If necessary, use the "Forgot your password?" link. Refer to last page of this handout for contact information.
- Click **Login**. Validate with Two-Factor Authentication (Duo) with your preferred method.

## INSTRUCTIONS: VIDEOS AND HELP DOCUMENTS

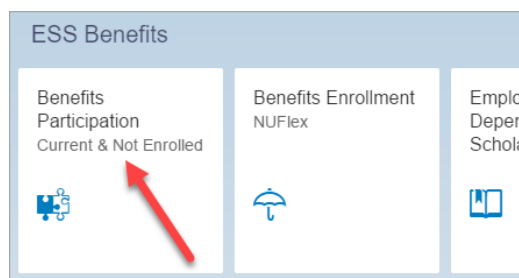
Instructional videos are available to assist with the enrollment process. Click on the *Benefits Enrollment Guides: Help* tile at the top of the Firefly home page (only available during the benefits enrollment period) or click [here](#).

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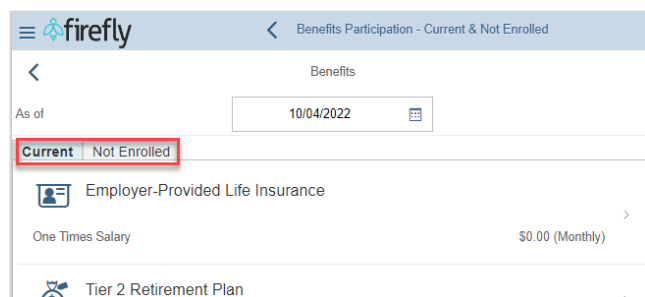
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## REVIEW CURRENT BENEFITS

At any time, you can review your current coverage as well as plans that are available, but you are not enrolled in. Click on the **Benefits Participation** tile.



Select the appropriate tab, **Current or Not Enrolled**, to view the corresponding information.



## ACCESSING NUFLEX BENEFITS ENROLLMENT

Benefits enrollment can be accessed from:

- A tile at the top of the Firefly home page (only available during the benefits enrollment period); or
- From within Firefly's Employee Self Service (ESS), click on the **Benefits Enrollment** tile.

## GETTING STARTED

The getting started screen appears which contains important items to have before continuing with benefit enrollment.

Enrollment Instructions

Getting Started

You may enroll, cancel, or change coverage elections for medical, dental, vision, life long term disability, long term care, and flexible spending accounts during the Annual NUFlex Benefit Enrollment period. During Annual NUFlex Enrollment, you can go through the enrollment process as many times as necessary.

Important items to have before continuing with your benefit enrollment:

- Legal names, birthdates, and social security numbers of any dependents who will be added to benefit plans.
- [Dependent verification documentation](#) can be scanned and electronically attached or they can be brought into your benefits office but **MUST** be received before the end of your benefit enrollment period otherwise your unverified dependents will be removed from your benefit plan enrollment.
- Any life insurance coverage increases will require proof of insurability and a Statement of Health must be completed for the proposed insured. The Statement of Health will request demographic information, drivers license numbers, and health information including specific dates of treatment for medical conditions and extended family medical history.

Start Enrollment

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Click on [Start Enrollment](#).

The online enrollment statement will appear. Please read the statement and click on [Agree and Save](#) to indicate your electronic signature.

Electronic Signature

**Electronic Signature (required):**

I understand and approve the enrollment selections set forth in my online enrollment and agree to conduct the enrollment transactions by electronic means. I understand and agree that clicking "Save" on the screens that follow will serve as my designation(s) of the benefits options I select and could result in changes to my benefits coverage. I also understand that if no changes are made during the enrollment period, I will keep my current benefits, I will not be enrolled in the Flexible Spending Account plans, and my "Tobacco/Nicotine Designation" will be defaulted to a tobacco/nicotine user, resulting in higher premiums for voluntary life insurance coverage.

In accordance with Nebraska Revised Statute § 48-1230, I hereby authorize the Board of Regents of the University of Nebraska (Employer) to deduct from my earnings the amount of my premiums or other contributions (if any) for the

dependents may require proof of insurability on any plan proposed for coverage. Any application must be submitted in accordance with University and/or insurance company guidelines.

If you decline medical insurance enrollment for yourself or your dependents (including your spouse or your Adult Designee) because of other medical insurance coverage, you may in the future be able to enroll yourself or your dependents in this plan, provided that you request enrollment within 31 days after your other coverage ends. In addition, if you acquire a new spouse or dependent as a result of marriage, birth, or adoption, you may be able to enroll yourself, your spouse, and your dependent, provided that you request enrollment within 31 days after the marriage, birth, or adoption.

[Agree and Save](#)
[Close](#)

## VERIFY/EDIT PERMANENT ADDRESS

Review your information and if the information is correct, click on [No Change](#). Otherwise make any necessary changes and click on [Update](#). You may receive a pop-up message providing a suggested address. Click on either [Use USPS Address](#) or [Keep Original Address](#).

Review/Edit Permanent Address for use in official mailings

\*Address Line 1: 5115 Starr St

\*City: Lincoln

\*State: NE

\*ZIP Code: 685060000

Email Address: dgreen@nebraska.edu

Telephone Number: 402-472-1234

Telephone Number / Type 2: 402-555-9898 TEL3

Telephone Number / Type 3:

Telephone Number / Type 4:

Telephone Number / Type 5:

The U.S. Postal Service suggests a modified address.

**Original Address:**

5115 Starr St  
Lincoln NE 685060000

**Suggested USPS Address:**

5115 STARR ST  
LINCOLN NE 68504-3155

[Use USPS Address](#)
[Keep Original Address](#)

[No Change](#)
[Update](#)

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If your current year enrollment includes voluntary life insurance, a pop-up message will appear with the tobacco/nicotine designation. Enter the required information and click on [Save](#).

## BENEFITS ENROLLMENT: START HERE

The main screen contains a left-side navigation panel and a blue tabbed section on the right.

- From any menu, you can click on [Confirmation Statement](#) at the bottom left of the screen to review your existing plans (if applicable).
- Use the left side menu to navigate through health plans, insurance plans, and flexible spending accounts.
- Use the blue tabs at the top of the page to navigate to the health assessment, history, and survey.

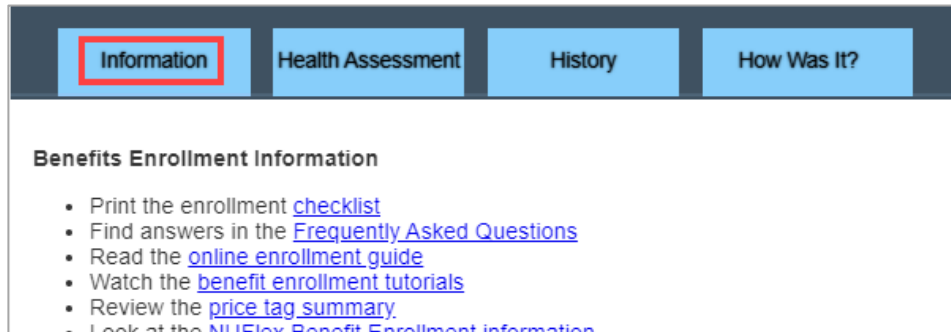
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## NAVIGATION: BLUE TABS

### Information

Provides information and links to important information regarding benefits enrollment.



### Health Risk Assessment

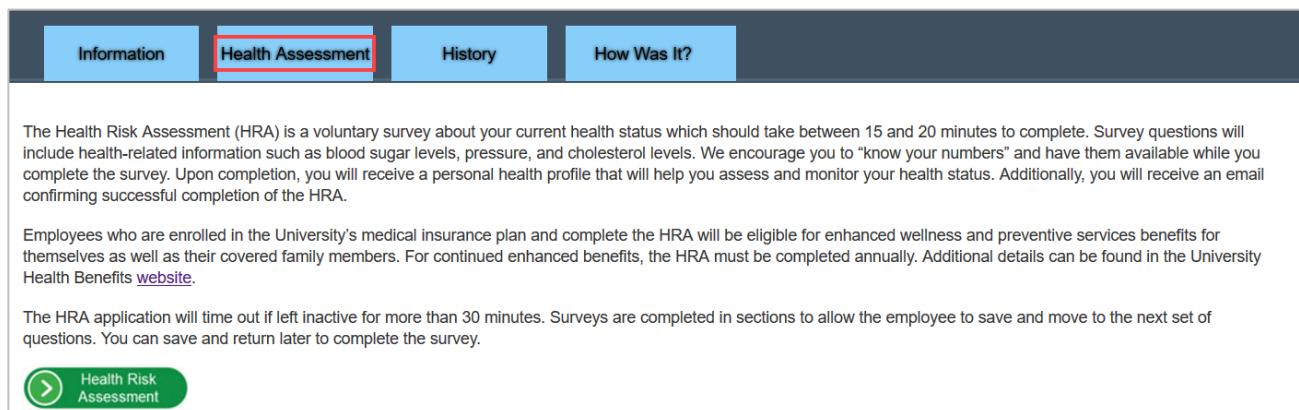
The health risk assessment (HRA) should be completed each year to receive the enhanced wellness and preventative services benefit for you and your covered dependents who are enrolled in the University's medical and prescription drug plans. The HRA takes approximately 15 to 20 minutes. After completing all sections and clicking on submit, you will be able to print/save a PDF of your personal health profile. You will also receive a confirmation email to retain for your records. During the enrollment period, you can return to the HRA to view your profile or engage in the What-If Analysis\*.

The HRA allows you to save in progress and return later to complete the process.



The HRA application will time out if left inactive for more than 30 minutes.

\*Application allows you to alter your answers to see how it may change your health profile; however, this does **not** change your final/submitted report.



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## History

Any changes you have made during the enrollment period will be listed on this screen.

Information	Health Assessment	History	How Was It?
<p>Changes you've made during this enrollment period</p>			
Medical Care Insurance		10/18/2024	
You added new coverage: Basic, Employee Only.			
Accidental Death & Dismemberment Insurance		10/18/2024	
You added new coverage in the amount of \$25,000.00.			
Long Term Disability Insurance		10/18/2024	
You added new coverage in the amount of \$80,072.00.			
Health Care Flexible Spending Account		10/18/2024	
You added a new annual contribution of \$2,500.00.			



## How Was It?

Take a brief survey to submit feedback on your benefits enrollment experience.

Information	Health Assessment	History	How Was It?
<p><b>How was it?</b></p>			
<p>1. What was your overall impression of the benefits enrollment process?</p> <p>Below Expectations      Meets Expectations      Exceeds Expectations      No Opinion</p> <p><input type="radio"/>      <input type="radio"/>      <input type="radio"/>      <input type="radio"/></p>			
<p>2. Tell us about your experience with benefits enrollment.</p> <p><input type="text"/></p>			

## NAVIGATION: ASSURITY STATEMENT OF HEALTH

If you enroll in or increase coverage for voluntary life insurance or dependent life insurance, you must complete the Assurity online statement of health. If you do not complete the statement of health, your insurance will be reset to your current amount.

	Start Here / End Here	>
	Assurity Statement of Health	>

Required

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## NAVIGATION: HEALTH PLANS

In this section of the NUFlex Benefits Enrollment, you can select **Medical Care Insurance**, **Dental Care Insurance**, and **Vision Care Insurance** to review or make changes to your life insurance plan coverages. From this list you can add, edit or remove benefit plans as needed.

- If you add a plan or make changes to an existing plan, you must click on **Save** at the bottom right to ensure your changes have been saved.
- If you are enrolled in a plan, you will see **✓ Enrolled** and the amount.

Medical Care Insurance

\$234.00  
Monthly

Provider: [Blue Cross/Blue Shield](#)

✓ Enrolled

All medical options include prescription drug coverage through: [EmpiRx Health](#)

Start Here / End Here

Assurity Statement of Health

Health Plans

Medical Care Insurance

Dental Care Insurance

Vision Care Insurance

- You can view a list of insurance and benefits providers with contact information by clicking on the information icon located on each plan page.

Medical Care Insurance

\$234.00  
Monthly

Provider: [Blue Cross/Blue Shield](#)

✓ Enrolled

All medical options include prescription drug coverage through: [EmpiRx Health](#)

Information

Medical Care Insurance

\$234.00  
Monthly

Provider: [Blue Cross/Blue Shield](#)

✓ Enrolled

All medical options include prescription drug coverage through: [EmpiRx Health](#)

Information

### General

The medical insurance plan provides comprehensive medical insurance coverage for the treatment of an illness or injury. Several options are provided which differ in the deductible, coinsurance, and stop-loss limits. The medical options cover services such as hospital room and board, hospital supplies, surgery, office visits, outpatient treatment, laboratory tests, and x-rays. For more details, consult the [Medical Insurance Information](#).

If you or your children are eligible for Medicaid or CHIP, please refer to the the addition information [Premium Assistance Under Medicaid and the Children's Health Insurance Program \(CHIP\)](#).

### Prescription

All medical options include prescription drug coverage through our prescription drug prover. For more details, consult the [Prescription Drug Summary](#).

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## NAVIGATION: INSURANCE PLANS

In this section of the NUFlex Benefits Enrollment, you can select **Long Term Disability Insurance, Voluntary Life Insurance, Long Term Care Insurance, Dependent Life Insurance – Spouse/AD, Dependent Life Insurance – Child, and Accidental Death & Dismemberment Insurance** to review or make changes to your life insurance plan coverages. From this list you can add, edit or remove benefit plans as needed.

- To review current plan or enroll in a new plan, click on the corresponding left menu.
- If you add a plan or make changes to an existing plan, you must click on **Save** at the bottom right to ensure your changes have been saved.

### Notes:

- If you enroll in or increase coverage for **Dependent Life Insurance – Spouse/AD**, you must complete a statement of health form.
- If you enroll in or increase coverage for **Voluntary Life Insurance**, you must complete a statement of health form. If you enroll in Voluntary Life Insurance, you must fill out the tobacco/nicotine designation each year.

Insurance Plans	
 Long Term Disability Insurance	Enrolled Last Update: 10/18/2024
 Voluntary Life Insurance & Tobacco/Nicotine Designation	Not Enrolled
 Accidental Death & Dismemberment Insurance	Enrolled Last Update: 10/18/2024
 Dependent Life Insurance - Spouse/AD	Not Enrolled
 Dependent Life Insurance - Child	Not Enrolled
 Long Term Care Insurance	

▼

Tobacco/Nicotine Designation

The Tobacco/Nicotine Designation is a declaration of any tobacco or nicotine usage during your lifetime.

Have you EVER used any form of tobacco or nicotine, including smokeless tobacco, nicotine substitutes (e.g. patches, gum, etc.)?

☒ No
 ☐ Yes
 Approximate Date Last Used:



- You can view a list of insurance and benefits providers with contact information by clicking on the information icon located on each plan page.

Long Term Disability Insurance

\$15.48 Monthly

Provider: UNUM

Enrolled



Plan Details

Long Term Disability Insurance

\$15.48 Monthly

Provider: UNUM

Enrolled

General

The long term disability insurance plan (LTD) provides monthly benefits if you become ill or injured and are unable to work. This income replacement is designed to restore part of the work earnings lost during a period of disability. For more details, consult the [Long Term Disability Information](#).

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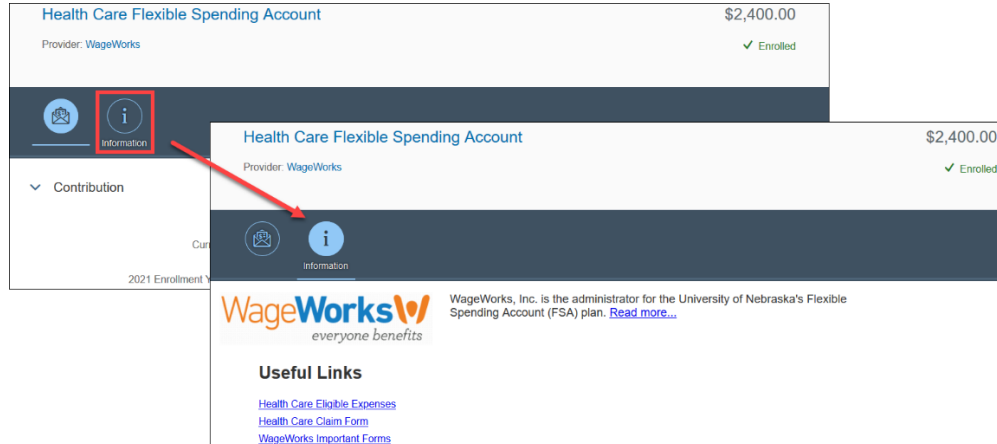
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## NAVIGATION: FLEXIBLE SPENDING ACCOUNTS

In this section of the NUFlex Benefits Enrollment, you can select **Health Care Flexible Spending Account** and **Dependent Care Flexible Spending Account** to review or make changes to your flexible spending account coverage.

- Unspent 2024 calendar year contributions for Health Care FSA (up to \$640) will carry over to the 2025 calendar year. This action may not be permitted by the IRS for the following year, so please plan accordingly.
- If you add a plan or make changes to an existing plan, you must click on **Save** at the bottom right to ensure your changes have been saved.
- You must indicate your contribution every enrollment period, for both health care account and dependent care account, even if it is the same amount as the previous year.
- Information regarding the health care account and dependent care account can be found by clicking on the information icon near the top of each page.

Flexible Spending Accounts	
	<b>Health Care Flexible Spending Account</b> Enrolled Last Update: 10/18/2024
	<b>Dependent Care Flexible Spending Account</b> Not Enrolled



**Health Care Flexible Spending Account** \$2,400.00  
 Provider: WageWorks ✓ Enrolled

**Health Care Flexible Spending Account** \$2,400.00  
 Provider: WageWorks ✓ Enrolled

**WageWorks** everyone benefits  
 WageWorks, Inc. is the administrator for the University of Nebraska's Flexible Spending Account (FSA) plan. [Read more...](#)

**Useful Links**  
[Health Care Eligible Expenses](#)  
[Health Care Claim Form](#)  
[WageWorks Important Forms](#)

## REVIEW CONFIRMATION STATEMENT

Validate plans, coverage, and price tags by clicking on **Confirmation Statement** at the bottom of any screen.

You can update or remove plans as many times as you like during the enrollment period. You can download the PDF or immediately email the confirmation statement by clicking on the corresponding option at the bottom right of the page.

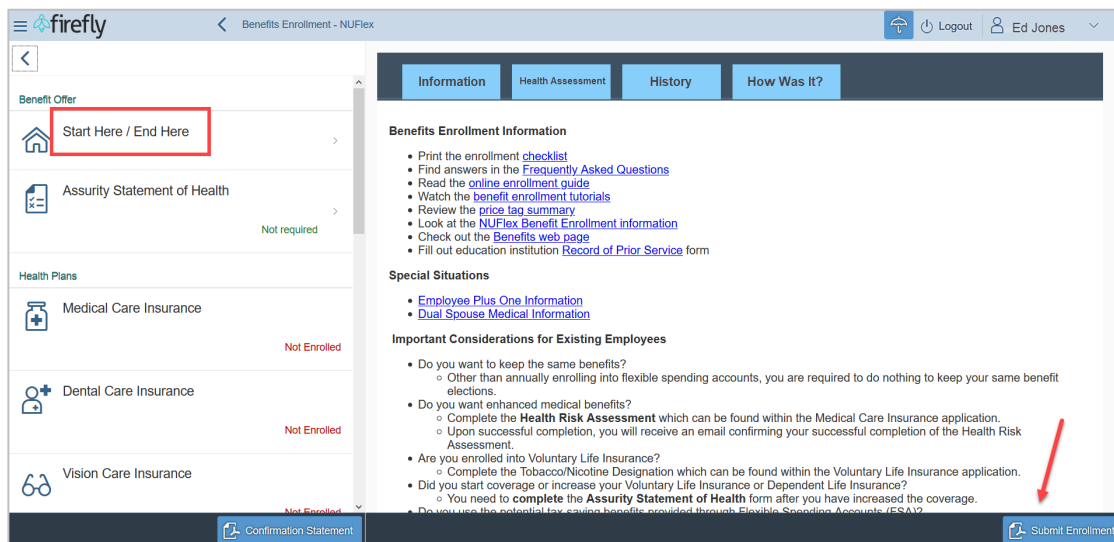



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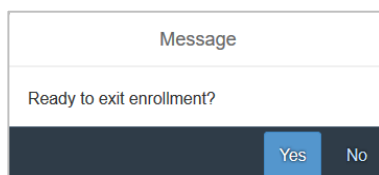
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## SUBMIT ENROLLMENT

Return to the **Start Here/End Here** tab. Click  on at the bottom right.



A pop-up message will appear. Click  and the enrollment has been completed for this session.  
**Reminder:** You can return to the NUFlex benefits application as many times as you like during the enrollment period.




Each time you submit enrollment, you will receive an updated confirmation statement sent to your work email account the following day with your latest selection.

## REMINDERS

- Take the Health Risk Assessment (HRA) survey for enhanced medical and prescription drug benefits. This will open a new browser window. The survey takes approximately 10-15 minutes and you can save in progress and return later to complete the process. You can also log back into Firefly at any time during the enrollment period to complete the survey.
- If required:
  - Upload or mail your [Dependent Verification](#) form(s) to your campus benefit office.
  - Complete the **Assurity Life Insurance Statement of Health**.
- Feedback (optional): please take a moment to provide comments on the enrollment process with this short survey.

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- Click the  (back arrow) to return to Firefly's Employee Self Service. You may repeat the above process at any time during benefits enrollment period and changes will be accepted until 5:00 P.M. on the last day of the enrollment period.

## IMPORTANT NOTES

- For assistance with your Firefly ID and password, contact the ITS Help Desk.  
(402) 472-7373 | [nusupport@nebraska.edu](mailto:nusupport@nebraska.edu)
- You can also contact your campus help desk:

**UNL:** e-mail [beth.benson@unl.edu](mailto:beth.benson@unl.edu)


**UNMC:** call 402-559-2899

**UNO:** call 402-554-4357

**UNK:** call 308-865-8522

**UNCA:** call 402-472-7373

- Windows users can use Microsoft Edge, Mozilla Firefox, or Google Chrome. Macintosh users can use Mozilla Firefox, Chrome, or Safari to complete the enrollment.

 **Important!** Do not wait until the last minute to make your changes during the NUFlex Benefits Enrollment period. During periods of high usage, online enrollment may be temporarily unavailable or have slow response time. *You can update or remove plans as many times as you like during the enrollment period.*