EBIS overview

website: http://www.hr.dla.mil/

Select Automated Tools

DLA HUMAN RESOURCES
Your Human Resources Connection

Contact Us | Home

NSPS | Forms | Helpful Links | Personnel Employee Bulletins | Automated Tools | HR Mission | Human Capital Program Development

Prospective Employees

Looking for an exciting and meaningful career with the Defense Logistics Agency? This area will provide you with information on our mission, career fields, job announcements, and hiring process and hiring programs.

News & Announcements

- Current student job opportunities available at the Defense Supply Center Columbus (DSCC)
- Federal Employees Group Life Insurance (FEGLI) Election Opportunity
- 2009 TSP Contributions
- 2009 TSP Catch Up Contributions

More News and Announcements

DLA and DHRA Serviced Employees
or
DoD Serviced Employees

Are you already a DLA serviced employee or a military member assigned to DLA? Are you looking for information about promotion, insurance, retirement, and other HR programs and processes available to you? Use the appropriate link above for the answers.

Enter the DLA Training Center

The DLA Training Center (DTC) provides educational development and delivery services for the DLA and can provide a wide range of services for the larger Federal community. DTC also manages the DLA Corporate Intern Program.

Privacy/Security | Accessibility | External Link Disclaimer | Viewers | Email Webmaster

Last updated: April 24, 2009 10:45 AM

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Automated Tools

Automated Staffing Program (ASP)
ASP is the Defense Logistics Agency's automated staffing program. The program will allow you to create and edit your resume, apply for DLA vacancies, and check on the status of the applications you submit.

Customer Service Unit (CSU)
Provides civilian personnel data to supervisors and managers of the employees in their organization only.

Defense Civilian Personnel Data System (DCPDS)
Department of Def se Human Resources (HR) informa intain workforce data.

Electronic Official Personnel Folder (EOPF)
Human Resource offices are required to maintain a file o y active civilian employee. If you are a civilian employee serviced for Human Resourc gency, an account has been established for you and you may access it through thi m.

Click on EBIS

Employee Benefits Information System (EBIS)
The Employee Benefits Information System (EBIS) is the latest automated tool created to provide 24 hour access to information you need about programs such as health benefits, life insurance, retirement, and the Thrift Savings plan.

HR Self Service (My Biz/My Workplace)
An exciting new web-based Oracle Self Service application within the Defense Civilian Personnel Data System (DCPDS) that allows you to access and view your personnel information 24 hours a day/7 days a week.

Learning Management System (LMS)
LMS is a commercial off-the-shelf software package that provides one-stop capabilities for employees and supervisors to better manage the entire spectrum of learning from planning to learning event execution within a single environment. The LMS gives DLA the ability to create and deliver training content through e-learning within the automated system. These systems will allow users to schedule instruction, store training information, and automate Individual Development Plans (IDPs).

My Pay
The Defense Finance and Accounting Service (DFAS) website for employee pay information. With your account you can view, print, and save leave and earnings statements, view and print tax statements, change federal and state withholdings, manage your allotments, and make address changes,and more

Current Employee Resources - DLA's Employee Benefits Information System (EBIS)

Day-dreaming about the future and want to see a retirement estimate? Did you recently get married and now need to change your health benefits enrollment from single to family? Or did you want to see how much life insurance you are carrying?

DLA is working hard to make information about your federal employee benefits programs more accessible. The **Employee Benefits Informatio** g 24 hour access to information you need about programs such as health benefi ngs plan. Get detailed program information and even make changes to your enrol life events. Your personal information is protected and available only to you.

Select NEW USER

You may access the w ng links. If you are a first time EBIS user, please select new user.

- New User
- Returning User / Forgot Password - **Go directly to EBIS**
- Separated or Retired Employees

Last updated: April 14, 2009 10:23 AM

Current Employee Resources - EBIS New User

Current Employee Resources Home Page

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Before Proceeding Read Log-On Procedures

IF YOU ARE A NEW USER:

The first time you access the EBIS system you must create a unique username and password. To begin this process, click on the New User button toward the bottom of the page. You will be taken to another page to enter information to verify your identify. Enter the requested information and click on the Continue button. At the next screen enter the requested username and password information and click on the Set Password button. If you were successful in setting up your account, you will receive a message indicating your s[illegible] At the login screen, enter your new username and password and click the Login button.

Click EBIS now

Go to EBIS Now.

EBIS EMPLOYEE BENEFITS INFORMATION SYSTEM

Help

Welcome to the Employee Benefits Information System (EBIS)...

Department of Defense EBIS Login

Current Users:
Enter your Username and your Password.

Username

Password

Forgot Login

Login...

New Users:
ATTENTION!

If you already have an established EBIS account and this is the first time you have logged in since 12/15/2007, please click on the Forgot Username/Password link.

At the next screen, enter your identifying information and click the Continue button. At the next screen you will be prompted to create a new unique username and secure password.

If you have never created an EBIS account, you will need to scroll down the page and click on the New User button. Input the requested information and click on the Continue button. Upon clicking the Continue button, you will be prompted to create a unique user name and secure password.

Read text and scroll down.

Enter your Username and your Password.

Username

Password

Forgot Login

Login...

New Users:

ATTENTION!

If you already have an established EBIS account and this is the first time you have logged in since 12/15/2007, please click on the Forgot Username/Password link.

At the next screen, enter your identifying information and click the Continue button. At the next screen you will be prompted to create a new unique username and secure password.

If you have never created an EBIS account, you will need to scroll down the page and click on the New User button. Input the requested information and click on the Continue button. Upon clicking the Continue button, you will be prompted to create a unique user name and secure password.

If you have login or other technical questions, email the EBIS administrator at ebis@dla.mil.

For benefits questions (Retirement, TSP, Life Insurance, Health Benefits, etc) please contact your DLA Human Resources Center

New User

Click New User

EBIS EMPLOYEE BENEFITS INFORMATION SYSTEM

User Validation

In order to establish (or reestablish) your login information you must be a validated user. Enter the information below to and click the continue button to be validated as a user.

Enter Your Social Security Number (NNNNNNNNN):

Enter Your Date of Birth (MM/DD/YYYY):

Enter Your Service Computation Date (MM/DD/YYYY):

Indicate Your Pay Plan:

Enter Your Grade: (XX)

Enter Your Step: (XX)

If you are an employee covered by the NSPS, please enter the following:

Pay Plan: Enter your Pay Schedule
Grade: Enter your Pay Band
Step: Enter 00

Enter information as shown:

- SSN w/o slashes or dashes.
- DOB as two digit month, two digit day and four digit year.
- Service Comp Date (SCD) is your date of hire*.
- Pay Plan may be GS, WG or YA.
- Grade is dependent on your position.
- Step is most often 01 (00 for YA).

*may differ if you have prior military and or federal civilian service.

IS : Login - Microsoft Internet Explorer provided by DSCC

Edit View Favorites Tools Help

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https://www.ebis.hr.dla.mil/ebisii/account-change.aspx?mode=resetuser Go Links SnagIt Convert

BIS EMPLOYEE BENEFITS INFORMATION SYSTEM

Establish or Reestablish Login...

To establish or reestablish your login enter the information below and click the continue button.

Example: ABcd@#12z

Username: MUSTB7210

You can set your Username. It must be [illegible] characters long.

Enter Your New Password:

Password must contain at least 2 character(s) from at least 4 of these 4 categories: uppercase alphabetical (A-Z), lowercase alphabetical (a-z), numeric (0-9) or special characters (~{}:;,.?-=+|<>!@#$%^&*()][/\). and be between 9 and 15 characters long.

Re-enter Your New Password:

Email: Worker.bee@dla.mil

Set Password

Trusted sites

EMPLOYEE BENEFITS INFORMATION SYSTEM

My Benefits | Calculators | Transac | Forms | My Profile | Inforn

Welcome to the Employee Benefits Information System (EBI

Click on the transaction icon to complete your health & life insurance and TSP elections.

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Department of Defense

The Employee Benefits Information System (EBIS) is designed to provide F
retirement & benefits.

To get started - choose one of the following:

My Benefits — Click for a comprehensive personal statement of your retirement and benefits.

Calculators — Click to use a variety of retirement and TSP calculators.

Transactions — Click to view current coverage and/or change your TSP, FEHB, or FEGLI benefits.

Forms — Click to fill and/or print benefits related forms.

HR Link — Click to view estimates from your Human Resources office.

My Profile — Click to personalize your information that is used in EBIS.

Click to view information about Federal employee benefits.

EMPLOYEE BENEFITS INFORMATION SYSTEM

My Benefits | Calculators | Transactions | Forms | HR Link | My Profile | Informat

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Transactions

FEHB Current Coverage

Premium cost for temporary employees will be higher than the cost reflected below. Please refer to the Guide to FEHB Plans.

Plan Code	112
Plan Name	Blue Cross and Blue Shield Servi
Type of Enrollment	Basic Family
Cost Per Pay Period	$99.91

History | Change

FEHB

Only blackened buttons work. Select change to begin.

Void

TSP Current Coverage

You are currently contributing to TSP.

Retirement Plan	FERS
Contribution Amount	$0.00
Contribution Percent	12%

History | Change

TSP Pending Transaction

You have no pending transactions.

Void

FEGLI Current Coverage

All FEGLI amounts and costs are based on your age as of the pay period ending date: 04/11/2009.
Enrollment Code: C0

FEGLI Pending Transaction

You have no pending transactions.
If you completed a FEGLI transaction that is effective today there will be no pending transaction.

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Transactions : Change

Select the type of FEHB transaction you wish to complete:

Add a Foster Child

Begin

Add a Foster Child
Non-Open Season

Cancel

As a new user, your options will be new enrollment & non-open season. You will selec the new enrollment option and click begin.

Custom Text trans-change.aspx

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Transactions : FEHB : Non-Open Season

Select how you wish to choose your health plan:

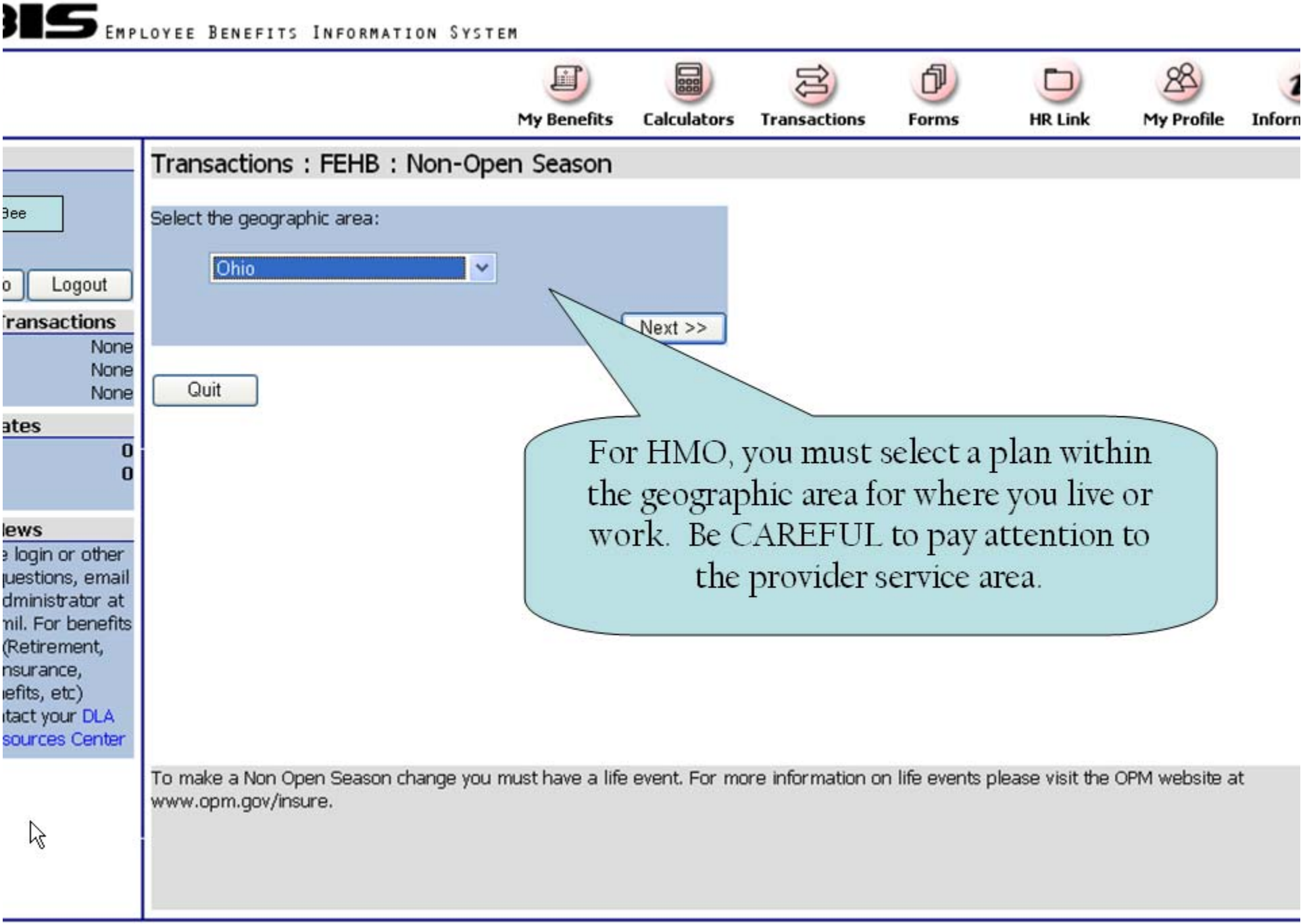
- Allow me to enter the plan code I want.
- Show me the Nationwide Fee-for-Service plans (FFS) and al me to choose the plan I want.
- Show me the plans by Geographical Area (HMO or FFS nationwide) and allow me to choose the plan I want.

Nex

Quit

If you have researched the OPM websi (www.opm.gov) and know the plan y want to select, click the first radio butt If not, you may review all health provid by clicking the 2nd (Fee for Service) & (HMO).

To make a Non Open Season change you must have a life event. For more informa www.opm.gov/insure.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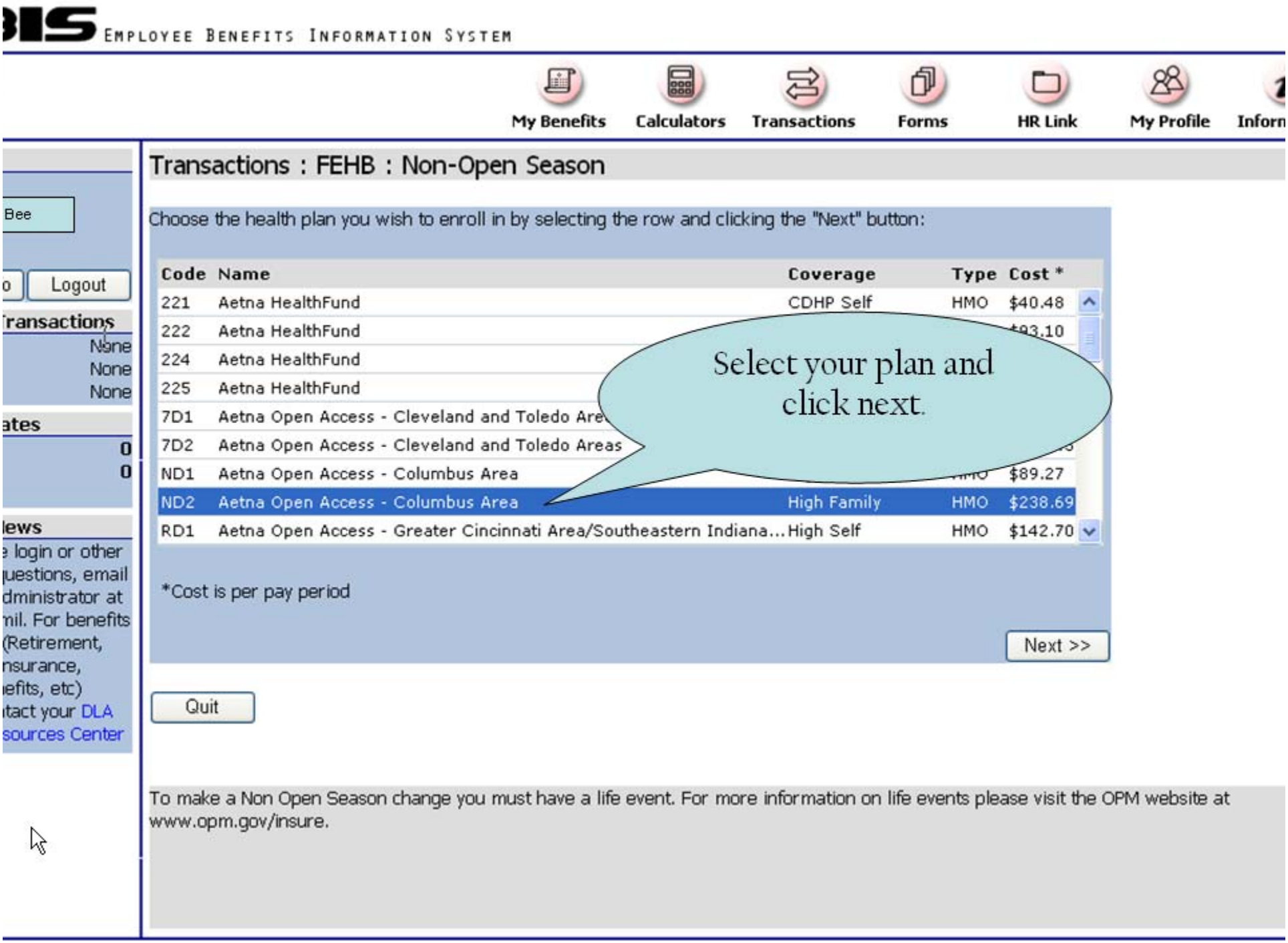
Transactions : FEHB : Non-Open Season
Select the geographic area:
Ohio
Next >>
Quit
For HMO, you must select a plan within the geographic area for where you live or work. Be CAREFUL to pay attention to the provider service area.
To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at www.opm.gov/insure.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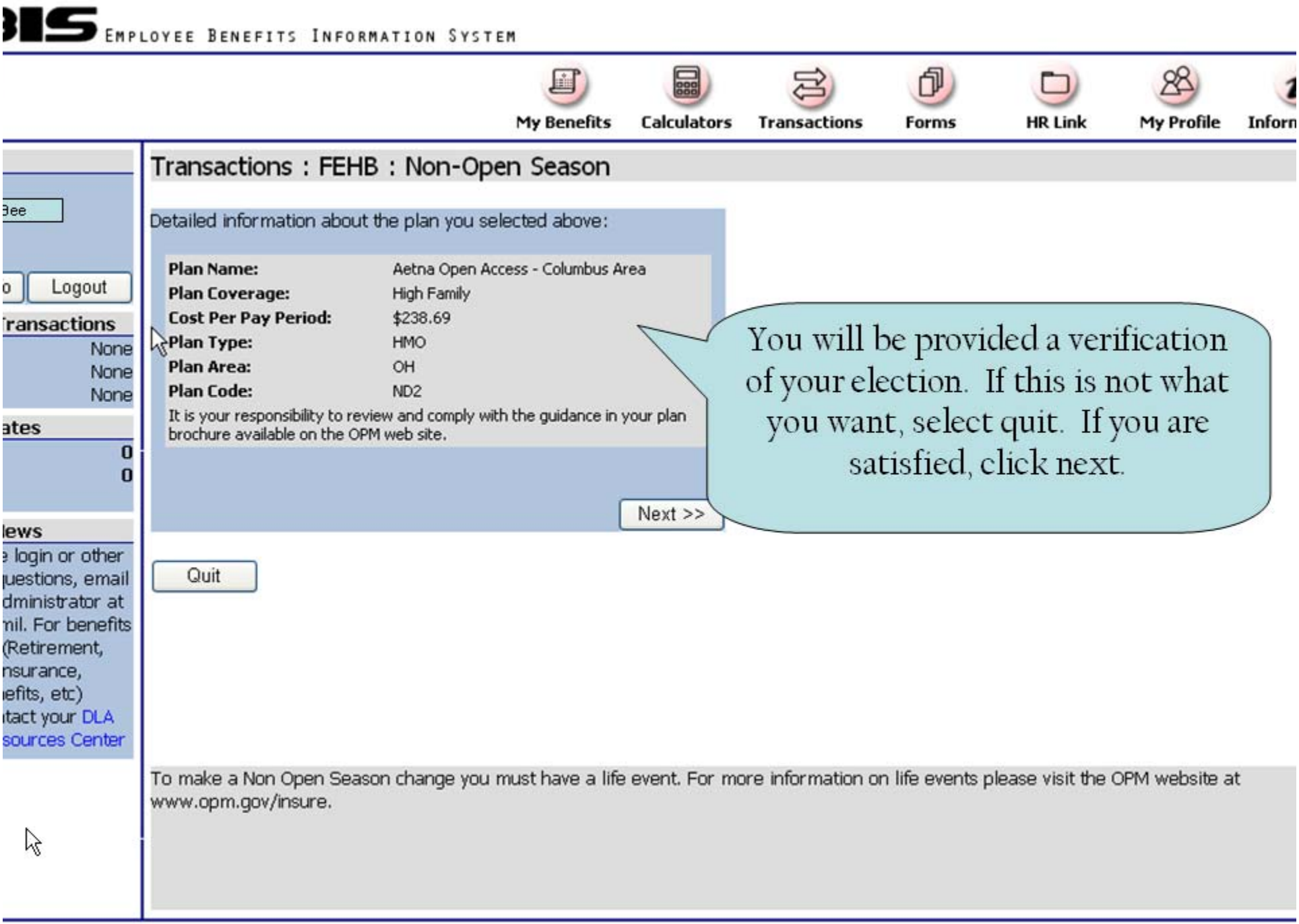
Transactions : FEHB : Non-Open Season
Choose the health plan you wish to enroll in by selecting the row and clicking the "Next" button:
Code Name Coverage Type Cost *
221 Aetna HealthFund CDHP Self HMO $40.48
222 Aetna HealthFund
224 Aetna HealthFund
225 Aetna HealthFund
7D1 Aetna Open Access - Cleveland and Toledo Are
7D2 Aetna Open Access - Cleveland and Toledo Areas
ND1 Aetna Open Access - Columbus Area $89.27
ND2 Aetna Open Access - Columbus Area High Family HMO $238.69
RD1 Aetna Open Access - Greater Cincinnati Area/Southeastern Indiana... High Self HMO $142.70
Select your plan and click next.
*Cost is per pay period
Next >>
Quit
To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at www.opm.gov/insure.


EMPLOYEE BENEFITS INFORMATION SYSTEM
My Benefits
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Logout
Transactions : FEHB : Non-Open Season
Detailed information about the plan you selected above:
Plan Name: Aetna Open Access - Columbus Area
Plan Coverage: High Family
Cost Per Pay Period: $238.69
Plan Type: HMO
Plan Area: OH
Plan Code: ND2
It is your responsibility to review and comply with the guidance in your plan brochure available on the OPM web site.
Next >>
Quit
You will be provided a verification of your election. If this is not what you want, select quit. If you are satisfied, click next.
To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at www.opm.gov/insure.

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Transactions : FEHB : Non-Open Season

Are you married?
If you are separated but NOT divorced, then you are still married.

- (•) Yes, I am married.
- ( ) No, I am NOT married.

Next >>

Quit

You are required to answer this based on your current legal situation.

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at www.opm.gov/insure.

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Transactions : FEHB : Non-Open Season

Other insurance information.
Do you have any group health insurance coverage other than the FEHB plan in which you are now enrolled? If so, click to enable the check box below and enter the requested information and click the 'Next >>' button.

If you do not wish to make a change because no other family member has group health insurance, then click the 'Next >>' button to proceed.

☐ I have other insurance.

Name of Policy Holder
(last first middle initial)

Insurance Policy Number

☐ Medicare (you) Part A Only ☐ Medicare Part D

☐ TriCare/CHAMPUS

☐ Other (specify name)

Next >>

Quit

This screen is if you have other insurance, to provide that data. If none, select next.

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at www.opm.gov/insure.

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Transactions : FEHB : Non-Open Season

Family Member Management:
Since you indicated that you wish to enroll in a non-self-only FEHB plan, you must add at least one family member to this plan. Use the following options to help you manage the family members subject to this plan.

What would you like to do?

- (•) Add a family member to the FEHB plan I have selected.
- Edit a family member in the FEHB plan I have selected.
- Remove a family member from the FEHB plan I have selected.
- I am done managing family members.

Next >>

Members you have enterd already:

FIRST NAME	MI	LAST NAME	SUFFIX
SSN	DOB	SEX	RELATIONSHIP
ADDRESS ONE			
ADDRESS TWO			
ADDRESS THREE			
CITY	STATE	ZIP CODE	ZIP PLUS FOUR
OTHER INS	MEDICARE	TRICARE/CHAMPUS	OTHER PROVIDER
OTHER POLICY HOLDER			
OTHER POLICY NUMBER			
OTHER POLICY NAME			

Quit

If a family plan is selected, you will be required to add family members.

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Transactions : FEHB : Non-Open Season

Family Member Management:
Please enter the requested information about the family member.

First Name	Ifound
Middle Initial	A
Last Name	Wife
Suffix	
SSN (NNNNNNNNN)	123456789
DOB (MM/DD/YYYY)	11/22/1966
Sex	Female
Relationship	Spouse

You will need to update your family member data and mailing address.

Enter the current address of the family member.
The home address will be used by the FEHB carrier to mail any correspondence relating to their health insurance.

Address 1	1234 My Street
Address 2	
Address 3	
City	Ourtown
State	OH
Zip Code - +4	43111-1111

Other insurance information.
Does the family member have any group health insurance coverage other than the FEHB plan in which you are now enrolled? If so, click to enable the check box below and enter the requested information and click the 'Add Member' or 'Update Member' button.

e contact your DLA
an Resources Center

Address 1 1234 My Street
Address 2
Address 3
City Ourtown
State OH
Zip Code - +4 43111-1111

Other insurance information.
Does the family member have any group health insurance coverage other than the FEHB plan in which you are now enrolled? If so, click to enable the check box below and enter the requested information and click the 'Add Member' or 'Update Member' button.

If you do not wish to make a change because this family member does not have group health insurance, then click the 'Add Member' or 'Update Member' button to proceed.

☐ The member has other insurance.

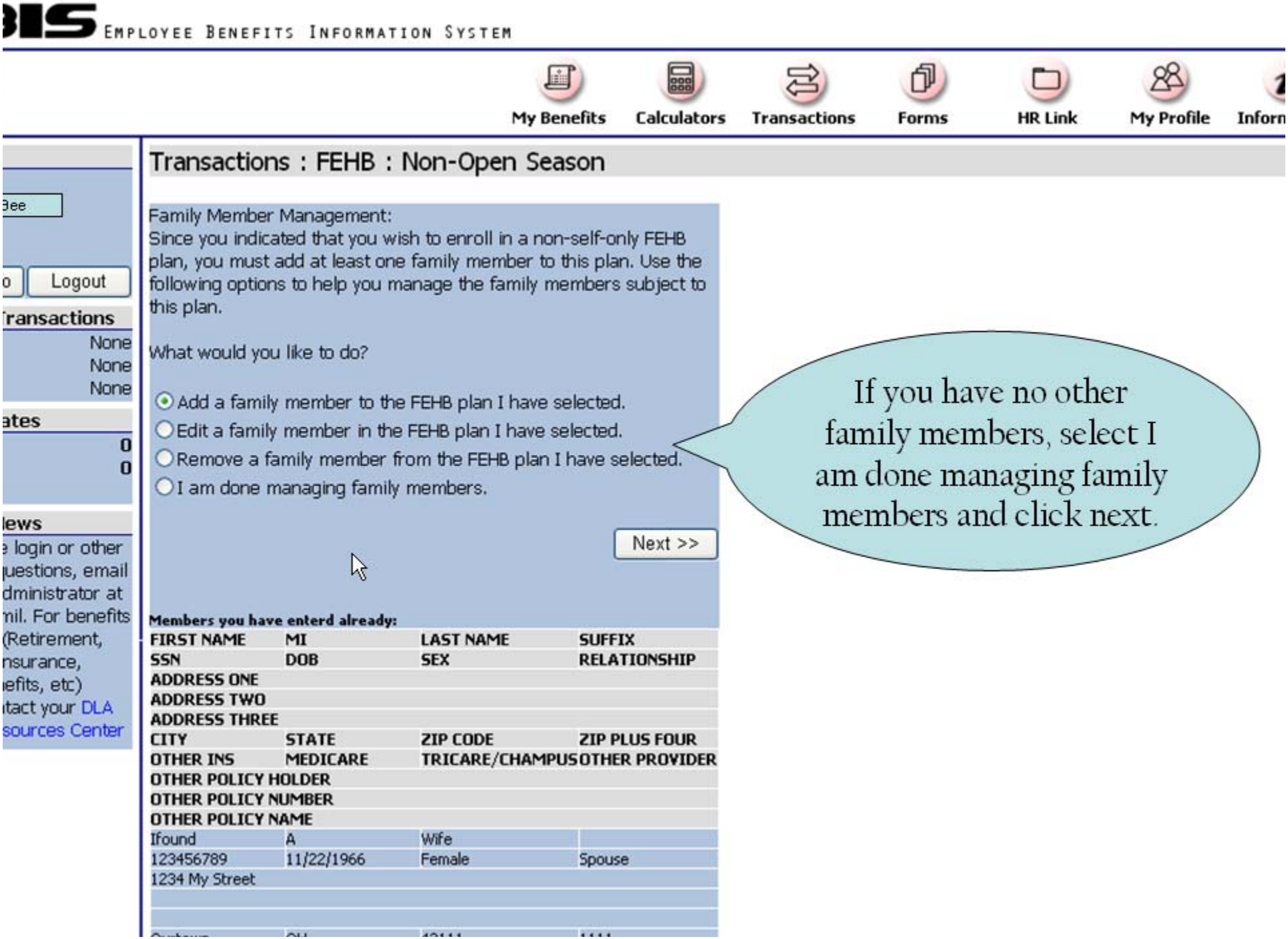
Name of Policy Holder
(last first middle initial)
Insurance Policy Number
☐ Medicare (member) Part A Only ☐ Medicare Part D
☐ TriCare/CHAMPUS
☐ Other (specify name)

Cancel Add Member

Quit

After updating the basic data and mailing address, you will need to provide outside insurance information, if any, for the family member and click add member.

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at www.opm.gov/insure.


EMPLOYEE BENEFITS INFORMATION SYSTEM
My Benefits
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Transactions : FEHB : Non-Open Season
Family Member Management:
Since you indicated that you wish to enroll in a non-self-only FEHB plan, you must add at least one family member to this plan. Use the following options to help you manage the family members subject to this plan.
What would you like to do?
Add a family member to the FEHB plan I have selected.
Edit a family member in the FEHB plan I have selected.
Remove a family member from the FEHB plan I have selected.
I am done managing family members.
Next >>
Members you have enterd already:
FIRST NAME MI LAST NAME SUFFIX
SSN DOB SEX RELATIONSHIP
ADDRESS ONE
ADDRESS TWO
ADDRESS THREE
CITY STATE ZIP CODE ZIP PLUS FOUR
OTHER INS MEDICARE TRICARE/CHAMPUS OTHER PROVIDER
OTHER POLICY HOLDER
OTHER POLICY NUMBER
OTHER POLICY NAME
Ifound A Wife
123456789 11/22/1966 Female Spouse
1234 My Street
If you have no other family members, select I am done managing family members and click next.

EMPLOYEE BENEFITS INFORMATION SYSTEM

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Transactions : FEHB : Non-Open Season

Enter your current address.
Your home address will be used by the FEHB carrier to mail any correspondence relating to your health insurance. If you are satisfied with the address shown below, click the 'Next >>' button. If you would like to enter a different address to be used by your FEHB carrier, just edit the information below and click the 'Next >>' button.

This will not affect the address you have on file with your payroll office. You are still responsible for notifying your agency payroll office of any address change.

Address 1	1234 My Stree
Address 2	
City	Ourtown
State	OH
Zip Code - +4	43111-1111

Next >>

Quit

This screen is very important, as this is your address and where the insurance cards will be mailed.

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at www.opm.gov/insure.

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Transactions : Summary & Signature (FEHB)

FEHB Transaction Information

Premium cost for temporary employees will be higher than the cost reflected below.
Please refer to the Guide to FEHB Plans, RI 70-B, for the correct premium.

Based on the transaction information you entered, your projected FEHB enrollment is:

FEHB Pending Transaction
Effective Date: 04/26/2009

Transaction: Non-Open Season Enrollment

Plan Code	ND2
Plan Name	Aetna Open Access - Columbus Are
Type of Enrollment	High Family
Cost Per Pay Period	$238.69

This confirms your election.

***** ELECTRONIC SIGNATURE *****

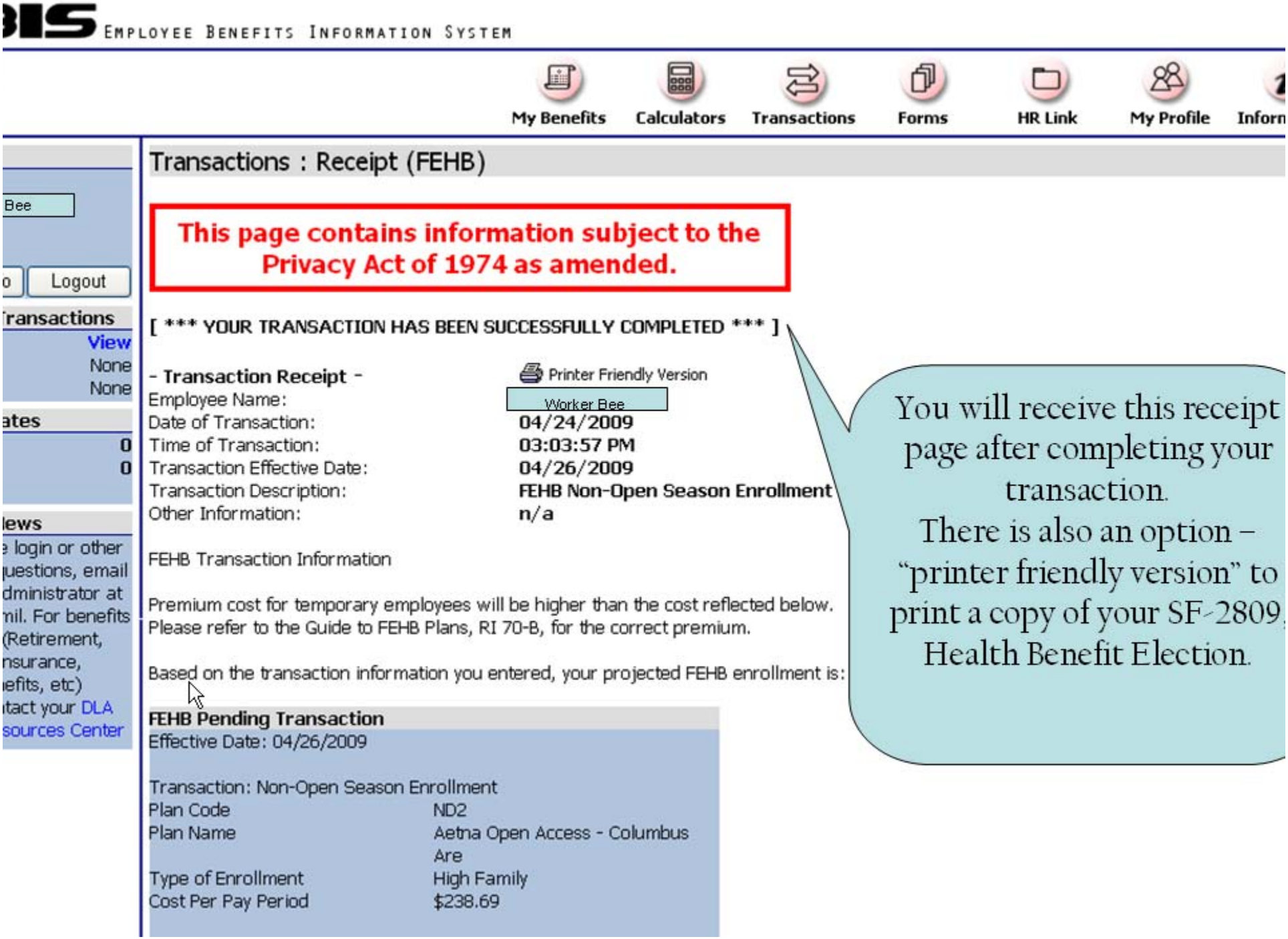
WARNING: Be advised that any false statement in this transaction, or willful misrepresentation, is a violation of the law punishable by a fine of not more than $10,000 or imprisonment of not more than 5 years, or both, according to federal law. Additionally, this may result in disciplinary action up to and including removal from Federal employment.

By clicking the 'Process Transaction' button, I understand that my EBIS web site login information is my electronic signature in effecting this transaction.

Process Transaction **I acknowledge and wish to PROCESS THIS TRANSACTION.**

Cancel Transaction

Process the transaction to complete or cancel to stop your action.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Transactions : Receipt (FEHB)
This page contains information subject to the Privacy Act of 1974 as amended.
[*** YOUR TRANSACTION HAS BEEN SUCCESSFULLY COMPLETED ***]
- Transaction Receipt -
Printer Friendly Version
Employee Name:
Worker Bee
Date of Transaction:
04/24/2009
Time of Transaction:
03:03:57 PM
Transaction Effective Date:
04/26/2009
Transaction Description:
FEHB Non-Open Season Enrollment
Other Information:
n/a
FEHB Transaction Information
Premium cost for temporary employees will be higher than the cost reflected below.
Please refer to the Guide to FEHB Plans, RI 70-B, for the correct premium.
Based on the transaction information you entered, your projected FEHB enrollment is:
FEHB Pending Transaction
Effective Date: 04/26/2009
Transaction: Non-Open Season Enrollment
Plan Code
ND2
Plan Name
Aetna Open Access - Columbus Are
Type of Enrollment
High Family
Cost Per Pay Period
$238.69
You will receive this receipt page after completing your transaction.
There is also an option – "printer friendly version" to print a copy of your SF-2809, Health Benefit Election.

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FEHB Current Coverage

Premium cost for temporary employees will be higher than the cost reflected below. Please refer to the Guide to FEHB Plans.

Plan Code	112
Plan Name	Blue Cross and Blue Shield Servi
Type of Enrollment	Basic Family
Cost Per Pay Period	$99.91

History | Change

FEHB Pending Transaction

You have no pending transactions.

Void

TSP Current Coverage

You are currently contributing to TSP.

Retirement Plan	FERS
Contribution Amount	$0.00
Contribution Percent	12%

History | Change

TSP Pending Transaction

You have no pending transactions.

Void

To start, stop or change TSP click change.

FEGLI Current Coverage

All FEGLI amounts and costs are based on your age as of the pay period ending date: 04/11/2009.
Enrollment Code: C0

Coverage Type	Amount of Coverage	Cost Per Pay Period	Multiple Factor
Basic	$104,400.00	$13.05	n/a
Option A	$0.00	$0.00	n/a
Option B	$0.00	$0.00	0
Option C	$0/$0	$0.00	0
Total Cost Per Pay Period		$13.05	

History | Change

FEGLI Pending Transaction

You have no pending transactions.
If you completed a FEGLI transaction that is effective today there will be no pending transaction.

Void

Important: Print a copy of the completed transaction form using the `Printer Friendly? version to serve as your receipt of transaction until the change becomes effective.

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Transactions

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Transactions : Change

Select the type of TSP transaction you wish to complete:

Stop Contributions

Begin

Stop Contributions
Election

Cancel

Stop is to stop existing contributions.
Election is to change or start contributions.

Custom Text trans-change.aspx

Transactions : TSP : Election

You may contribute up to 100% of your basic pay or a dollar amount.

I wish to contribute the following PERCENTAGE of my basic pay per pay period to my Thrift Savings Plan account.

I wish to contribute the following AMOUNT of my basic pay per pay period to my Thrift Savings Plan account.

Enter amount or percent based on selection above:

The amount you elect to contribute is per pay period. No contributio will be deducted if the amount you specify exceeds the amount of your pay after all other mandatory deductions have been taken.

Next >>

Quit

You will need to elect a percentage or dollar amount.

Enter the percent or dollar.

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Transactions : Summary & Signature (TSP)

TSP Transaction Information

Based on the transaction information you entered, your projected TSP enrollment is:

TSP Pending Transaction

Effective Date: 04/26/2009
Transaction: Election

Contribution Amount	$0.00
Contribution Percent	13%

This is a summary and electronic signature of your transaction. You will receive a receipt on the next page and option to print a copy of your TSP-1.

***** ELECTRONIC SIGNATURE *****

WARNING: Be advised that any false statement in this transaction, or willful misrepresentation, is a violation of the law punishable by a fine of not more than $10,000 or imprisonment of not more than 5 years, or both, according to federal law. Additionally, this may result in disciplinary action up to and including removal from Federal employment.

By clicking the 'Process Transaction' button, I understand that my EBIS web site login information is my electronic signature in effecting this transaction.

Process Transaction — **I acknowledge and wish to PROCESS THIS TRANSACTION.**

Cancel Transaction — **I do not acknowledge and wish to STOP this transaction.**

in Info | Logout

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@dla.mil. For benefits
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Life Insurance,
h Benefits, etc)
e contact your DLA
an Resources Center

Premium cost for temporary employees will be higher than the cost reflected below. Please refer to the Guide to FEHB Plans.

Plan Code	112
Plan Name	Blue Cross and Blue Shield Servi
Type of Enrollment	Basic Family
Cost Per Pay Period	$99.91

History | Change

You have no pending transactions.

Void

TSP Current Coverage

You are currently contributing to TSP.

Retirement Plan	FERS
Contribution Amount	$0.00
Contribution Percent	12%

History | Change

TSP Pending

You have n

FEGLI Current Coverage

All FEGLI amounts and costs are based on your age as of the pay period ending date: 04/11/2009.
Enrollment Code: C0

Coverage Type	Amount of Coverage	Cost Per Pay Period	M
Basic	$104,400.00	$13.05	n/a
Option A	$0.00	$0.00	n/a
Option B	$0.00	$0.00	0
Option C	$0/$0	$0.00	0
Total Cost Per Pay Period		$13.05	

History | Change

Important: Print a copy of the completed transaction form using the `Printer Friendly? ... the change becomes effective.

As a new employee you have 31 days to elect optional coverage. There are no annual open seasons for changes to your life insurance. Future elections may be made after a physical or qualified life event, but restrictions will be made to either change.

Remember, your basic life insurance may show a higher rate than your salary if you are under age 45, as you are entitled to an "Extra Benefit" at no additional cost

e benefit icon is your
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for the federal
government.

My Personal Statement of Benefits

Printer Friendly Version

ment | rance | Social Security | TSP | Death and Disability | Other

Insurance Benefits

BENEFITS

e, you are entitled to enroll yourself and any eligible family members in a health plan offered under the Federal nefits (FEHB) program, unless your position is excluded from coverage by law or regulation. If you meet the l be eligible to continue your health insurance into retirement.

Name	Blue Cross and Blue Shield Service Benefit Plan - Nationwide
Plan Code	112
Type of Enrollment	FFS
Employee Cost Per Pay Period	$99.91
Agency Cost Per Pay Period	$299.75

The Plan Name is the FEHB plan in which you are currently enrolled as of the pay period ending date of this statement of benefits. The Plan Code is the enrollment code assigned to your plan name and type of enrollment. The Type of Enrollment covers only you as Self Only or covers you and your eligible family members as Self and Family. The Employee Cost Per Pay Period is your share of the cost of the premium for your FEHB coverage. The Agency Cost Per Pay Period is your agency's share of the cost of the premium for your FEHB coverage.

LIFE INSURANCE BENEFITS

If you are eligible, you are automatically enrolled in Basic insurance under the Federal Employees' Group Life Insurance (FEGLI) program unless you waive this coverage. If you have Basic insurance, you may also elect Optional insurance.There are three types of Optional

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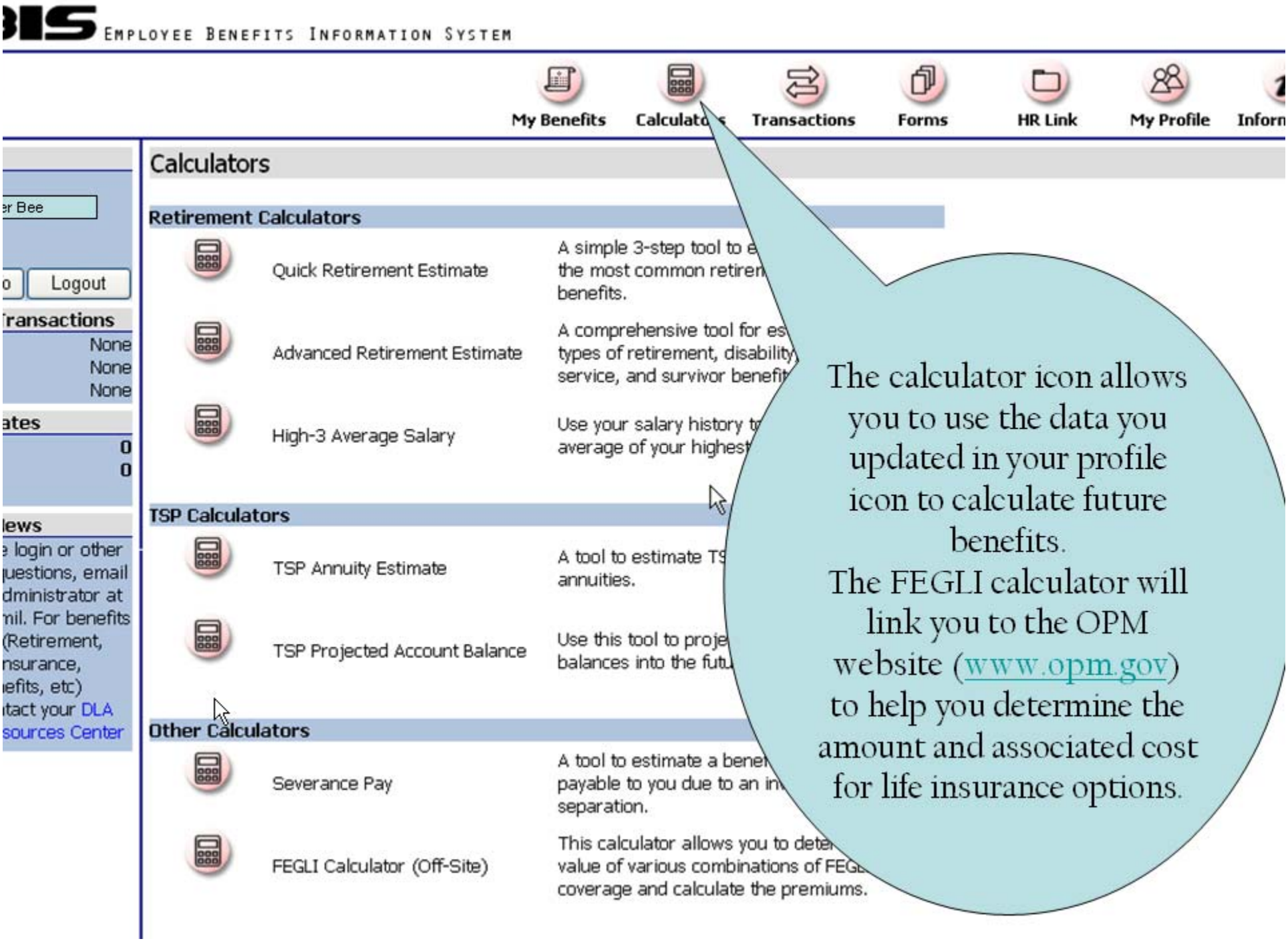

The calculator icon allows you to use the data you updated in your profile icon to calculate future benefits.

The FEGLI calculator will link you to the OPM website (www.opm.gov) to help you determine the amount and associated cost for life insurance options.

EMPLOYEE BENEFITS INFORMATION SYSTEM

My Benefits | Calculators | Transactions | Forms | HR Link | My Profile

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Forms

Retirement Related Forms

OPM1515 - Military Service Deposit Election
RI20-97 - Estimated Earnings During Military Service
SF2801-1 - Certified Summary of Federal Service (CSRS)
SF2801-2 - Spouse's Consent to Survivor Election (CSRS)
SF2801 Schedules A,B,C - A- Military Service Information, B- Military Retired Pay, C- Fe
SF2801 Schedule D - Agency Checklist of Immediate Retirement Procedures
SF2801 - Instructions
SF2801 - Application for Immediate Retirement CSRS

The forms attached have been placed here for your convenience in completing your retiren

The forms available from
icon are PDF and/or PDF
able documents. These f
DO NOT automatically u
any systems. You must
complete, print, sign, dat
mail, scan/email or fax th
document to your service
DHRC Benefit Team. Fo
current contact informat
visit
http://www.hr.dla.mil/cntct

My Profile

Personal Data

- My FERS Covered Earnings
- My Social Security Covered Earnings
- My TSP Account Balance

Your profile requires you to manually enter your FERS covered earnings (from your LES), SS earnings (from your PEBS statement from the SSA) and TSP (from your TSP account at www.tsp.gov). Your profile is only as good as the data you keep up-to-date.

In order to have this information populate into your current estimate you must update utilizing your current TSP or Social Security statemen
calculations are contingent upon the information that you have entered.

EMPLOYEE BENEFITS INFORMATION SYSTEM

My Benefits | Calculators | Transactions | Forms | HR Link | My Profile

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Information

Search the Information Library: By Keyword

Search...

Directory: The Information Library is organized by topic.

- Retirement
  - Civil Service Retirement System (CSRS)
    - **CSRS Types of Retirement**
      - Voluntary Retirement
      - Early Retirement
      - Discontinued Service Retirement
      - Disability Retirement
      - Deferred Retirement
    - **CSRS Creditable Civilian Service**
      - Overview
      - Leave Without Pay (LWOP)
      - Receipt of Workers' Compensation Benefits
      - Part-Time Service
      - Intermittent Service
      - Deposit Service
      - Redeposit Service
    - **CSRS Creditable Military Service**
      - Overview
      - Military Retirees
      - Members of the Military Reserves
      - Members of the National Guard
      - Post-1956 Military Service Deposit

The information icon is a library of benefit related trivia. This should be the first place you look if you have a question on your benefit package and then contact one of our human resource specialists for specific guidance.