



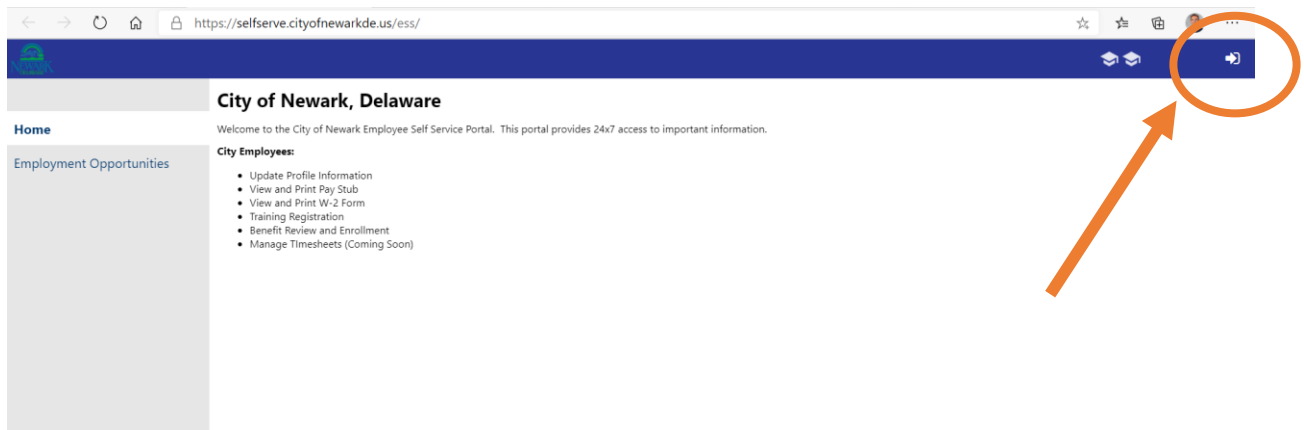
CITY OF NEWARK DELAWARE

FULL-TIME STAFF MEMBER 2026 OPEN ENROLLMENT SELECTION PROCESS

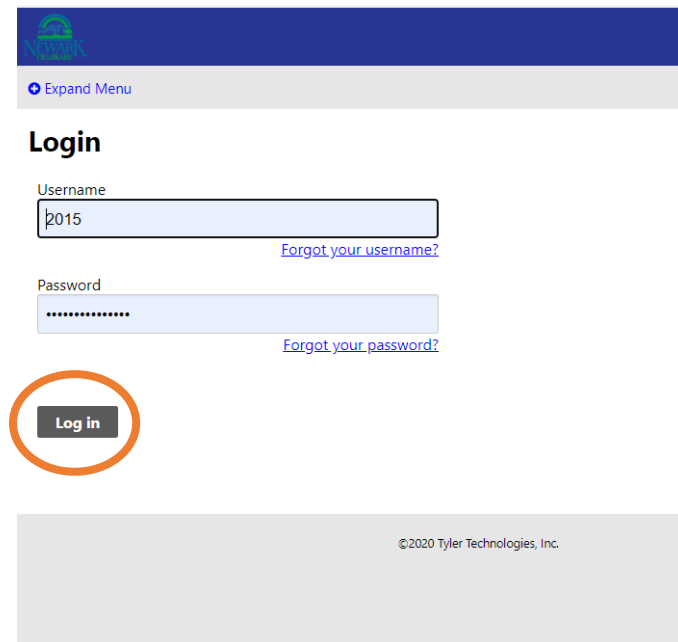
Please read through the following steps and complete your Open Enrollment selections by Friday, November 7, 2025!

STEP ONE: Go to Employee Self Service (ESS) via the City intranet or by going straight to <https://selfserve.cityofnewarkde.us/ess/>.

STEP TWO: Click on the log-in button in the top right corner:

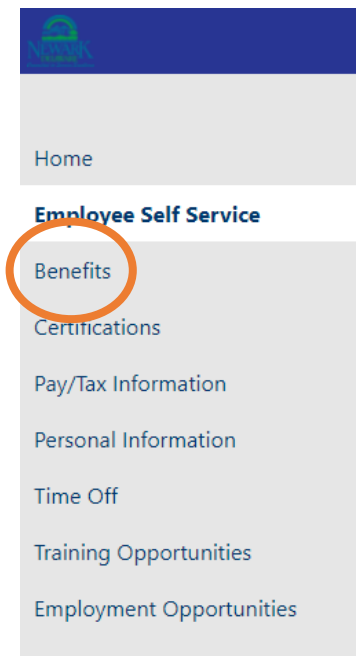


STEP THREE: Enter log-in information (employee # as Username; personal password) to enter the site. Please let Tracy Bak (tbak@newark.de.us) know if you have difficulty signing in. She will reset your password for you:

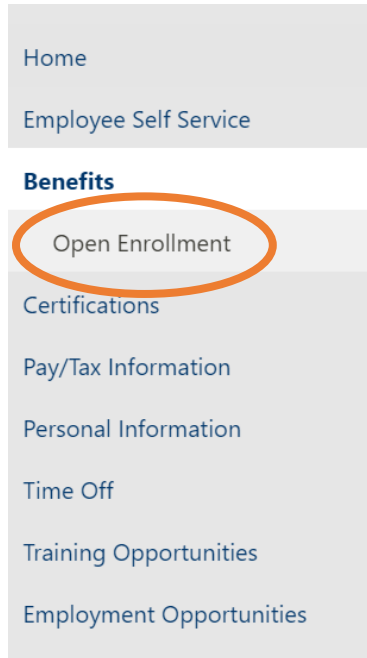


The screenshot shows a login page with a dark blue header containing a logo. Below the header is a light gray bar with a blue "Expand Menu" link. The main content area is white and features the heading "Login". Under "Login", there are two input fields: "Username" with the value "2015" and "Password" with masked characters. To the right of each field is a blue link: "Forgot your username?" and "Forgot your password?". Below the password field is a dark gray "Log in" button, which is circled in orange. At the bottom of the page, there is a light gray footer with the text "©2020 Tyler Technologies, Inc."

STEP FOUR: Once logged in, find the **Benefits** tab on the left side of the screen. Click the link:



STEP FIVE: **Open Enrollment** will pop up beneath **Benefits**. Click **Open Enrollment**:



STEP SIX: The 2026 Open Enrollment page will have ten (10) selection possibilities. All eligible benefits must be selected or declined. If you are making changes to any coverages for 2026, click on **Select** for the appropriate coverage area(s) (health, dental, & vision), which will bring you to the selection options for each benefit selection. If you are not making changes to any coverages for 2026, click on **No Changes** for appropriate coverage area(s). If you are declining coverage for 2026 (i.e., not using the City’s insurance offerings), click on **Decline** for the appropriate coverage area(s).

Please note: if you had any qualifying events that changed your plan(s) in 2025, these must be selected again here—selecting “No Changes” will copy your submission for 2025 and may miss changes or added/subtracted dependents/beneficiaries.

VOLUNTARY BENEFITS: Dependent life insurance, FSAs, HSA, and FUNdraiser Friday selections must be made through ESS.

YOU MUST MAKE THESE ELECTIONS EVEN IF YOU CURRENTLY HAVE BENEFITS.

If you are selecting the PPO or HMO plans, you must decline the HDHP plan; and vice versa. The “Health Savings Account (HDHP)” and “Limited FSA (DENT/VIS ONLY)” options will only populate as eligible selections if you select the HDHP. If you are opting into these plans, please do not select the Medical FSA.

Open Enrollment – Make Elections

1 Make a selection for each benefit, then click “Continue”. You must submit this enrollment by 11/14/2021.

Welcome to the City of Newark's Open Enrollment portal for 2022. Please choose “Select,” “Decline,” or “No Changes” for each line below. All selections must be made before 5:00 p.m. on November 12, 2021 to ensure you have benefits for 2022.

Please note: If you had any qualifying events that changed your plan(s) in 2021, these must be selected again here—selecting “No Changes” will copy your submission for 2021 and may miss changes or added/subtracted dependents/beneficiaries.

HEALTH HMO/PPO AETNA - PPO - EMPLOYEE ONLY – \$0.00 Existing benefit: AETNA - PPO - EMPLOYEE ONLY – \$0.00	DECLINE NO CHANGES SELECT
HEALTH HDHP PPO Declined	DECLINE NO CHANGES SELECT
DENTAL BENEFIT Election not made Existing benefit: DELTA DENTAL - EMPLOYEE ONLY – \$0.00	DECLINE NO CHANGES SELECT
VISION BENEFIT Election not made Existing benefit: VBA - VISION PLAN - EMPLOYEE ONLY – \$0.00	DECLINE NO CHANGES SELECT
LIFE INSURANCE (OPTIONAL) Election not made	DECLINE SELECT
DEPENDENT LIFE (OPTIONAL) Election not made	DECLINE SELECT
DEPENDENT CARE FSA (OPTIONAL) Election not made	DECLINE SELECT
MEDICAL FSA (OPTIONAL) Election not made	DECLINE SELECT
HEALTH SAVINGS ACCOUNT (HDHP) Declined	Enrollment in this section requires enrollment in HEALTH HDHP PPO
LIMITED FSA (DENT/VIS ONLY) Declined	Enrollment in this section requires enrollment in HEALTH HDHP PPO
FRIDAY CASUAL DAY Election not made	DECLINE SELECT
Estimated total cost per pay period \$0.00	

STEP SEVEN: If you are newly selecting into the HMO Plan, you will need to enter a 6-digit Primary Care Provider (PCP) number. Once clicking **Select** on the **2026 Health Benefit** tab, the following link will pop up in the top right corner of the screen, which will help you find your PCP's number if you do not know it:

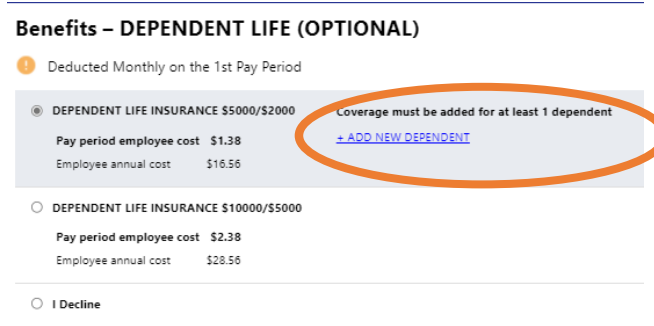


Benefits – 2021 HEALTH BENEFIT

Choose one or decline coverage.

[HMO PCP # Finder](#)

STEP EIGHT: If you are opting into the dependent life insurance, you must input at least one dependent:



Benefits – DEPENDENT LIFE (OPTIONAL)

Deducted Monthly on the 1st Pay Period

☒ DEPENDENT LIFE INSURANCE \$5000/\$2000 Coverage must be added for at least 1 dependent
Pay period employee cost \$1.38
Employee annual cost \$16.56
[+ ADD NEW DEPENDENT](#)

☐ DEPENDENT LIFE INSURANCE \$10000/\$5000
Pay period employee cost \$2.38
Employee annual cost \$28.56

☐ I Decline

STEP EIGHT: *HSA & FSA Contribution Limits:*

If you are signing up for the HSA, the employee-only maximum per-pay contribution amount is \$112.50 and the family maximum per-pay contribution amount is \$222.91.

If you are signing up for the Health or Limited FSA, the maximum per-pay contribution amount is \$119.23.

If you are signing up for the Dependent Care Account, the maximum per-pay contribution amount is \$288.46.

STEP NINE: Once you completed your selections, click **Continue**:

Please note: If you had any qualifying events that changed your plan(s) in 2021, these must be selected again here—selecting "No Changes" will copy your submission for 2021 and may miss changes or added/subtracted dependents/beneficiaries.

HEALTH HMO/PPO Declined Existing benefit: AETNA - PPO - EMPLOYEE ONLY - \$0.00	EDIT	▼
HEALTH HDHP PPO AETNA - HIGH DEDUCTIBLE PPO - EMPLOYEE ONLY - \$0.00	DECLINE	EDIT
DENTAL BENEFIT DELTA DENTAL - EMPLOYEE ONLY - \$0.00 Existing benefit: DELTA DENTAL - EMPLOYEE ONLY - \$0.00	DECLINE	EDIT
VISION BENEFIT VBA - VISION PLAN - EMPLOYEE ONLY - \$0.00 Existing benefit: VBA - VISION PLAN - EMPLOYEE ONLY - \$0.00	DECLINE	EDIT
LIFE INSURANCE (OPTIONAL) SUPPLEMENTAL LIFE INSURANCE - \$10.50	DECLINE	EDIT
DEPENDENT LIFE (OPTIONAL) Declined		EDIT
DEPENDENT CARE FSA (OPTIONAL) Election not made	DECLINE	SELECT
MEDICAL FSA (OPTIONAL) Declined		EDIT
HEALTH SAVINGS ACCOUNT (HDHP) Declined		EDIT
LIMITED FSA (DENT/VIS ONLY) LIMITED FLEXIBLE SPENDING ACCOUNT (DENTAL/VISION) - \$105.77	DECLINE	EDIT
FRIDAY CASUAL DAY FRIDAY CASUAL DAY - \$5.00	DECLINE	EDIT

Estimated total cost per pay period

The [benefits simulator](#) can show how this affects your net pay.

CONTINUE

STEP TEN: Review your selections and click **Submit** at the bottom of the page:

CANCEL MODIFY **SUBMIT**

THAT'S IT! PLEASE BE SURE TO CLICK THROUGH TO SUBMIT AND YOU RECEIVE A CONFIRMATION. YOUR ENROLLMENT WILL NOT BE COMPLETE WITHOUT FINISHING THE ENTIRE PROCESS!

Confirmation

+ Your enrollment was submitted successfully. You can make changes until your choices have been approved. You may want to print this page for your records.

Reach out to HR Administrator Tracy Bak at tbak@newark.de.us or (302) 366-7000 x1031 if you have additional questions or difficulty.