



# CapsLive

Employee Support

Business Support

Clinical Support

Serv

★ **Featured Applications**

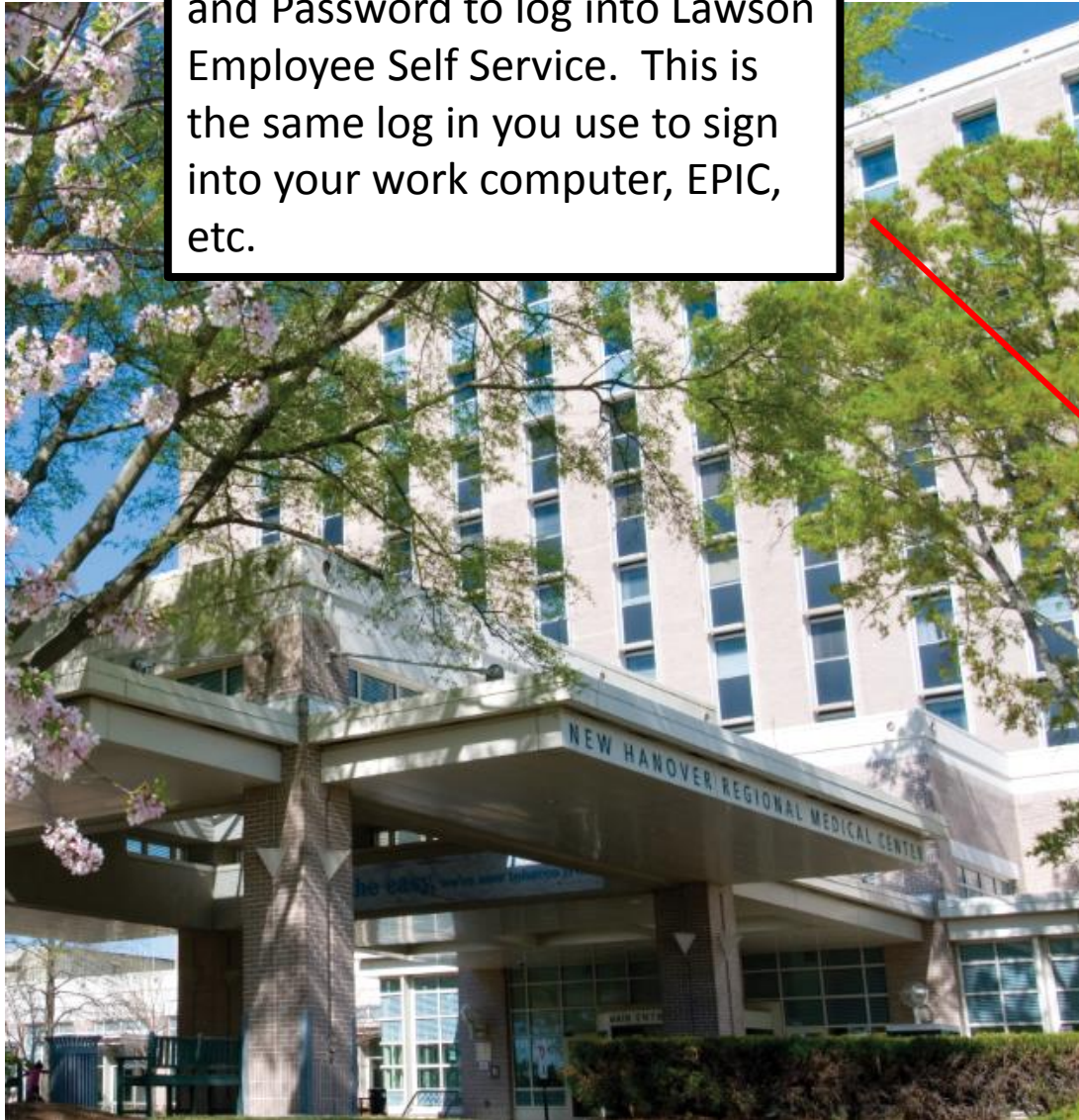
[Customize and View all](#)

[Collapse](#) ^



To enroll or make changes to your benefits, you will need to log onto Lawson Employee Self Service (ESS). One way to access Lawson is through the link on CapsLive.

Enter your Network User-Name and Password to log into Lawson Employee Self Service. This is the same log in you use to sign into your work computer, EPIC, etc.

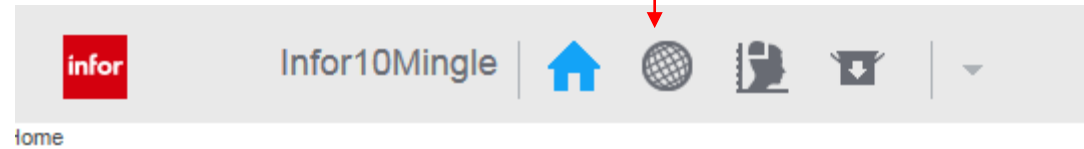


Sign in with your organizational account

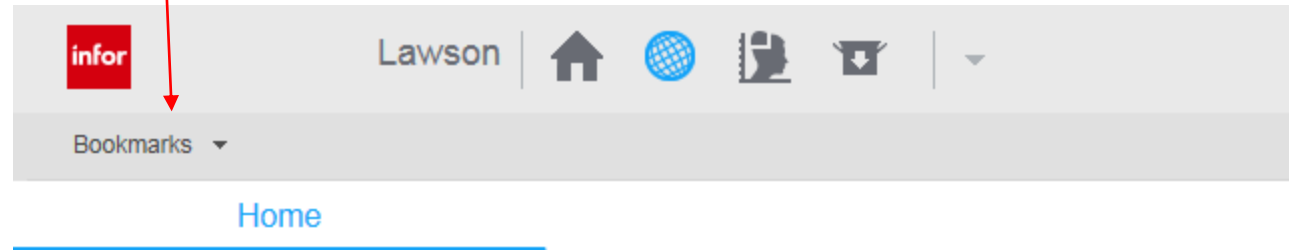
Sign in

Sign in above with your NHRMC credentials to access Infor Lawson.

Once you are logged on, please click the globe icon.



Click Bookmarks



Lawson

10.0.9.0

#### Common Tasks

- > [Manage Subscriptions](#)  
Manage your navigation links and home page content
- > [Manage User Options](#)  
Customize options and your favorites
- > [Username Lookup](#)  
Lookup username

**Quick Tip:** If you do not see Bookmarks after pressing the Globe Icon, you may need to refresh Lawson. Simply log out and log in again. If you still cannot see Bookmarks after logging in a second time, please call the IS Help Desk for assistance at 910-667-7855.

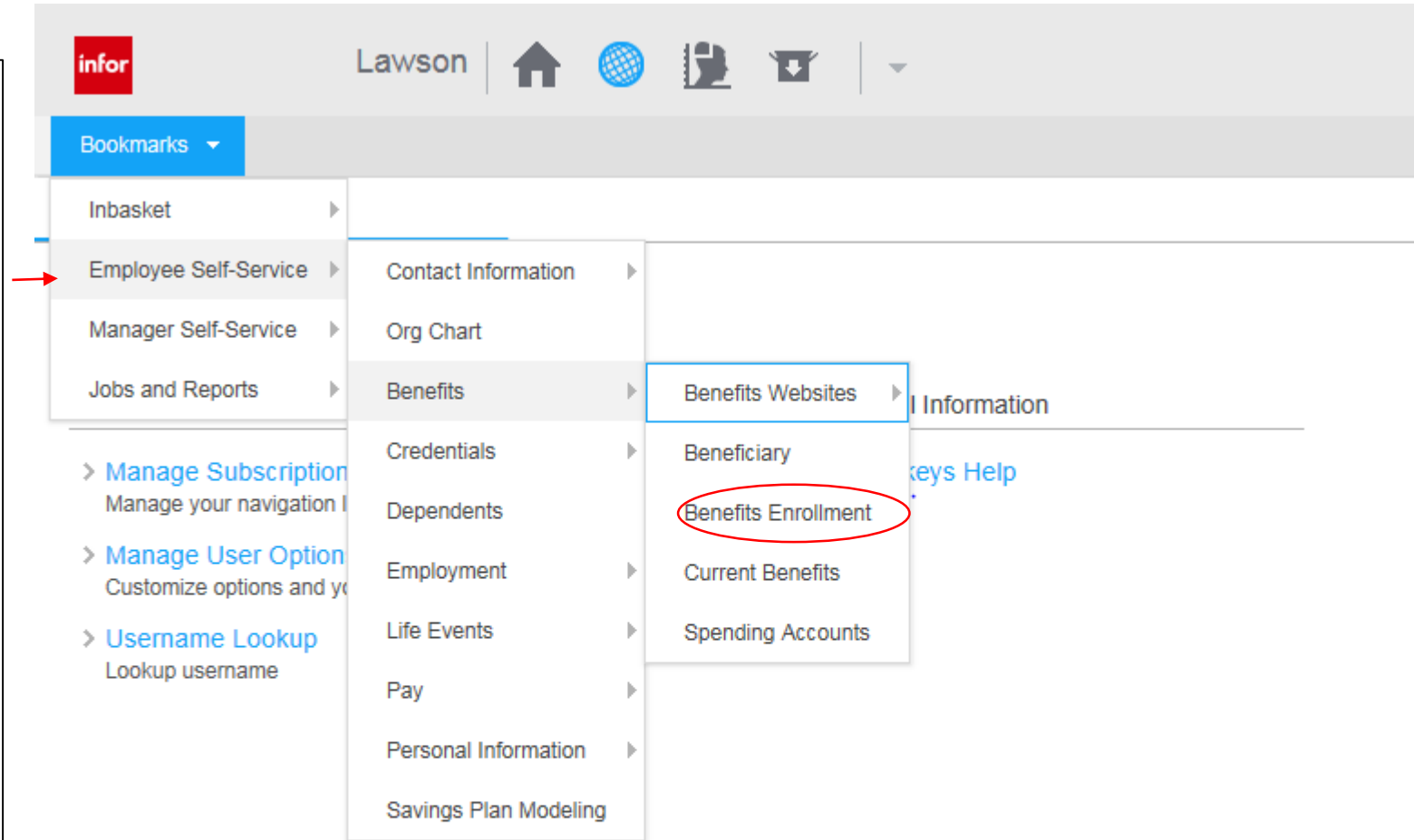
Once you click on Bookmarks, use the mouse to hover over

(1) Employee Self Service,

(2) then over to Benefits,

(3) then over to Benefits Enrollment.

Click on Benefits Enrollment.



At this point, you are ready to enroll or make changes to your benefits. **Please read each screen carefully and follow the prompts.**

As a reminder, detailed information about benefits, including rates, is available on the Benefits website: [www.nhrmc.org/employees/benefits](http://www.nhrmc.org/employees/benefits)

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## Benefits Enrollment Acknowledgement

2018. I also understand that my benefit choices generally will be effective from January 1, 2018 until December 31, 2018 a

enter the Lawson Benefits Enrollment System at anytime during my enrollment period.

Press "Continue" to confirm.

Plan	Coverage	Your Cost	Company Cost
NHRMC Plan	Family	116.77 Pre-tax	680.42
Ameritas Dental Plan	Emp/Family	33.70 Pre-tax	23.22
Community Eye Care-Vision Plan	Emp + Fam	13.76 Pre-tax	
Supplemental Life Insurance	432,000.00	48.45 After-tax	
Dependent Life Insurance	15K/Dep	2.86 After-tax	
Optional Spousal Life	50,000.00	3.35 After-tax	
Long Term Disability - 90 Days	60% of salary 64,671.36		14.92
Healthcare FSA	520.00 per year	20.00 Pre-tax	
Dependent Day Care FSA	5,000.00 per year	2,500.00 Pre-tax	

Plan	Covered Dependents
NHRMC Plan	
Ameritas Dental Plan	
Community Eye Care-Vision Plan	

Pay Period Summary	Cost
Total pre-tax contributions	2,684.23
Total after-tax contributions	54.66
Total company contributions	718.56

Your deductions may differ slightly due to rounding.

To accept the above changes: Click "Continue" and **WAIT** for the pop up box to print your confirmation.  
To go back and make changes: Click "Make Changes" to make changes to your benefit elections.



Once you have completed your elections, you will see this summary of your elections and the cost (contributions). If you are ready to complete your enrollment, click “continue.”  
Your enrollment is not complete until you click “continue” on this page.

Quick tip: To make changes to your elections, click “make changes.” Once you complete your changes, you will return to this summary page. You will need to click “continue” at that time to complete your enrollment.

Plan	Coverage	
NHRMC Plan	Family	1
Ameritas Dental Plan	Emp/Family	
Community Eye Care-Vision Plan	Emp + Fam	
Supplemental Life Insurance	432,000.00	
Dependent Life Insurance	15K/Dep	
Optional Spousal Life	50,000.00	
Long Term Disability - 90 Days		
Healthcare FSA		2,5
Dependent Day Care FSA		
Plan		
NHRMC Plan		
Ameritas Dental Plan		
Community Eye Care-Vision Plan		
Total pre-tax contributions		
Total after-tax contributions		
Total company contributions		

**?** Dialog ✕

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Do you want to print these elections for your reference?

Yes  
 No

Do you want to send these elections to your email address on file?

Yes  
 No

[Continue](#)

Click "yes" in this pop-up box to either print your Benefit Confirmation Statement or have a copy emailed to your NHRMC account. **Be sure to keep a copy of your Benefit Confirmation Statement!**



[Benefits Enrollment](#)

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[Enrollment Elections](#)

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Congratulations

Your enrollment has been successful.

Your benefit summary has been sent to the following email address: @nhrmc.org

Once your enrollment is complete and you have chosen how to receive your Benefit Confirmation Statement, you will see this screen.

**Congratulations! You completed your enrollment!**

If you have any questions about enrollment, please contact the HR Benefits Team by calling **910-667-6000**.