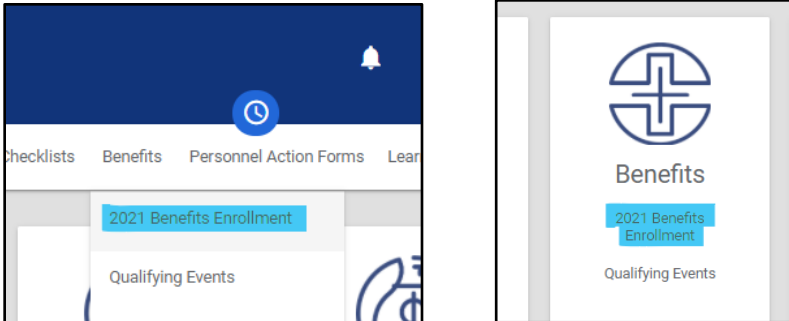


# HOW TO CHANGE BENEFIT AMOUNTS IN SELF-SERVICE

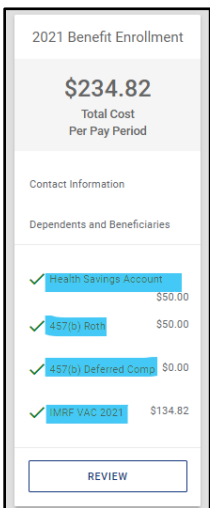
You can change the amounts for many of your voluntary benefits directly through Paycom Employee Self Service. Changes can be made to your HSA amount, 457(b) Nationwide Roth or Pre-Tax amount, and your IMRF VAC %.

Below are the steps to make these changes:

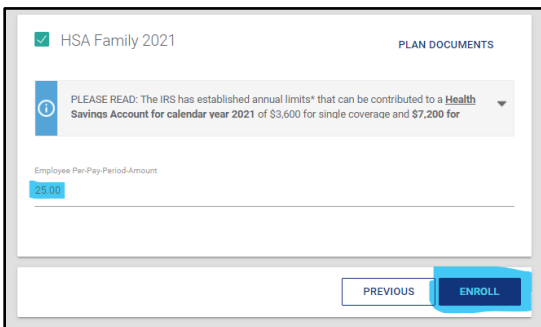
**Step 1:** Sign in to your Self Service account and navigate to the current year Benefits Enrollment under the Benefits section.




**Step 2:** On the right navigation box, click on the account you want to change.



**Step 3:** Enter the new per-pay-period-amount and click Enroll. (For the IMRF VAC, you will enter a percentage).



Step 3a: For a IMRF VAC change, you are required to complete a form. After you click to Finalize, you will need to click on the Blue “IMRF VAC Form” link. You will need to enter the last 4 of your SSN, mark the Change box and enter the same % you entered in the previous step. Enter your electronic signature and click COMPLETE when finished.

Step 1 View the provided file  **IMRF VAC Form** and review it.

Step 2 Complete the form by entering your information and save the file.

IMRF VAC Form

> 🔍 🔍 🖨️ CANCEL NEXT ACTION COMPLETE

Employer Name <b>Madison County Government</b>	Employer IMRF ID Number <b>3034</b>
<b>CERTIFICATION BY MEMBER</b> I elect to (check one): <div><input type="checkbox"/> <b>Make</b> Voluntary Additional Contributions to the Illinois Municipal Retirement Fund <b>at the rate of</b> <input type="text"/> % (NOT TO EXCEED 10%) and authorize my employer to deduct these contributions from my earnings.</div> <div><input checked="" type="checkbox"/> <b>Change</b> my Voluntary Additional Contributions to the Illinois Municipal Retirement fund <b>to the rate of</b> <input type="text" value="4"/> % (NOT TO EXCEED 10%) and authorize my employer to deduct these contributions from my earnings.</div> <div><input type="checkbox"/> <b>Stop</b> my Voluntary Additional Contributions to the Illinois Municipal Retirement Fund.</div> <div><div>X <input type="text" value="Signature"/></div><div>12/30/2020</div></div> <div>Signature of MemberDate (MM/DD/YYYY)</div>	
<b>CERTIFICATION BY AUTHORIZED AGENT</b> I certify that Voluntary Additional Contributions will be made from the member's IMRF reportable earnings beginning with earnings	

Step 4: Click “Finalize” and then “Sign and Submit” to submit your change request.

2021 Benefit Enrollment

\$209.82

Total Cost  
Per Pay Period

Contact Information

Dependents and Beneficiaries

✓ Health Savings Account

\$25.00

✓ 457(b) Roth

\$50.00

✓ 457(b) Deferred Comp

\$0.00

✓ IMRF VAC 2021

\$134.82

REVIEW

FINALIZE

Enrollment Submission

By pressing Sign and Submit, you are confirming your open enrollment elections.

CANCEL SIGN AND SUBMIT