TRANSAMERICA®
Employee Benefits

TransApp
Self-Service Guide

Your guide to benefits enrollment online.

User Guide to TransApp

Along with the link to TransApp you received a personal invitation code. Enter the code then register by creating a username and password.
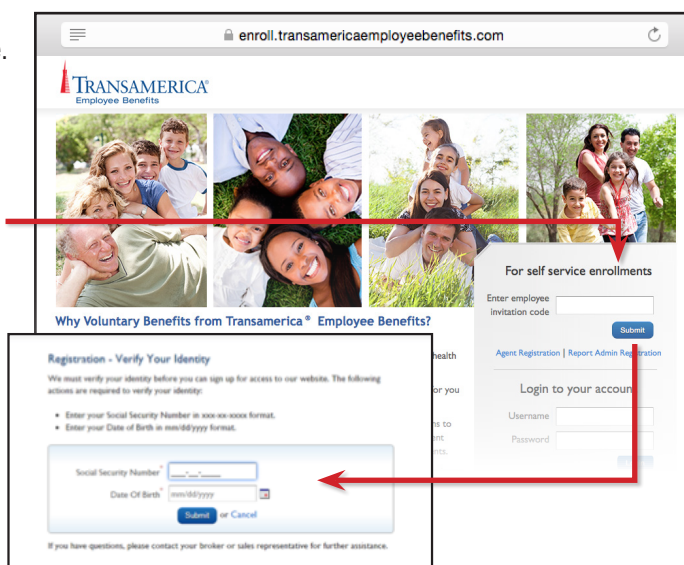
Step 1:

Go to: **enroll.transamericaemployeebenefits.com**

In the Enter employee invitation code field, enter your **invitation code** and click **submit.**

Your invitation code would have been provided to you by your Agent or Employer.

Step 2:

On the following screen you will **Verify Your Identity** with your Social Security Number and Birth Date and click **submit.**

Step 3:

Create Your Account by completing the fields with your information.

Required fields are noted with a red asterisk.

NOTE: If the Captcha is not legible, obtain a new Captcha by clicking the blue arrows to the right of the Captcha.

After you have entered the required information and agreed to the Site User Agreement, click **Register**.

Click the 'Get Started' button to begin your enrollment.

Step 4:
The **My Information** screen lists your basic personal information as received from your employer.

You will need to **verify any pre-populated information** on this screen and **answer blank fields**.

Required fields are noted with a red asterisk.

Click **Save and Continue**.

*If the **Martial Status field** is set to single, you will not be able to enroll your spouse.*

If the **Marital Status field is set to married**, you'll have the option to add a spouse by selecting **Add Spouse Information,** then click **Save & Continue**.

The **Spouse Information** screen asks for spouse's basic personal information.

Answer the required questions.

Click **Save & Continue**.

If you wish to enroll your dependents in benefits click **Add New Dependent**.

Click **Save & Continue**.

Enter each Dependent's information separately.

The **Dependent Information** screen asks for dependent(s) basic personal information. Answer the required questions.

Click **Save**.

Step 5:
The **Employment Information** screen lists your employment details such as date of hire and annual salary.

Answer the additional questions.

Click **Save & Continue**.

Some fields are pre-populated from the census and cannot be edited during enrollment.

Contact your employer if you notice an errors on pre-populated fields.

Step 6:

The **My Open Enrollment Benefits** screen lists available products.

In the My Open Enrollment Benefits screen, click **Start Section** to proceed to the applicable product landing page for each benefit.

Each product has a landing page that provides product information along with a link to a brief video about the product.

Review the information and click **Continue to Enrollment**.

Waiving coverage on a product will change the weekly deduction amount to $0.00 and will only give you the option to 'Save & Continue' unless the box is unchecked.

Step 7:

On the **Product Options** screen, there is a link to download the product's brochure. Use this to consider the different benefit options. It also outlines the riders available to you, your spouse, and dependents.

Use the **Coverage Type dropdown menu** to determine the type of coverage.

Use the **Benefit Amount dropdown menu** to review and select the desired benefit amount.

Or you may select **Waive All Coverage** check box to decline benefits for this particular product.

Once the fields are correctly set to your choices, click **Save & Continue**.

This will take you back to the My Open Enrollment Benefits page and you can start the next section.

The following screens are not applicable for every product.
TransApp will guide you to the screens required based on your underwriting, product and benefit selections.

Responses to these questions may affect the benefit amount you are eligible for, or your application to be declined. Pop-up windows will inform you of any changes.

The **Evidence of Insurability Screen** appears when you select a coverage amount above the Guaranteed Issue amount for your enrollment.

Read and respond to each underwriting question. Based on your group's offer, you may need to supply additional information.

Once the questions have been answered, click **Save & Complete**.

The **Policy Owner** screen allows you to change the policy owner to a different insured.

It will list the current policy owner's name and address by default. If you don't need this to change, and the information is correct, click **Save & Continue**.

A primary beneficiary is the person to receive the proceeds of the death benefit in the event of the Insured's death. The contingent beneficiary will receive benefits if the primary beneficiary is deceased.

If your marital status is set to married, the Spouse listed will be the default for your policy. You are set as the default if your status is single.

The **Beneficiaries** screen appears next for products where benefits could be paid to a beneficiary. Beneficiaries need to be created for each policy. You can create up to 10 Primary and 10 Contingent Beneficiaries.

Click **add new** under **Primary Beneficiaries** or **Contingent Beneficiaries.**

The **Add New Beneficiary** screen will display.

For convenience, you can use the **Family Members drop down menu** to select the a beneficiary whose information you have already submitted. Then click **Select**. Or you can add a new Beneficiary and click **Add New.**

You will assign each Beneficiary a percentage. Beneficiary percentages need to add up to 100%.

Click **Save & Continue** button when all of the beneficiaries are added.

The **Statement & Agreements** screen is for insurance products that have caps on total insurance benefits. The page lets you to tell us if you have any existing life insurance policies or contracts.

Once the question has been answered, click **Save & Continue**.

Your first product enrollment is complete!

The **My Open Enrollment Benefits** page will display again to confirm your benefit elections, effective date and deduction amounts.

Select **Make Changes** or **Start Section** on the next product.

✓	**Success**
?	**Not yet Reviewed or Waived**
✗	**Wavied**

To finalize your enrollment, you must elect or waive all the product(s) that appear on the My Benefits screen.

For changes to completed benefit elections, click **Make Changes** next to the product you want to change.

Repeat Steps 6 and 7 for the remaining benefits offered. Once you are satified with your elections, simply click **Finalize Elections.** to navigate to the next page and review your choices.

TRANSAMERICA
EMPLOYEE BENEFITS

Home   Basic Information   My Benefits

Please review and finalize your elections below

Congratulations! Your benefits enrollment is nearly complete! You have made choices that will affect your family's health coverage and costs all year long. Please take this opportunity to review the information on this page and make sure that it is accurate before finalizing your elections.

Again, thank you for enrolling with Transamerica Employee Benefits. We look forward to helping you and your family prepare for a better tomorrow.

FINISH LINE AHEAD

Critical Illness view pdf	$4.68
Term Life view pdf	$4.88
Hospital Indemnity view pdf	$4.99

The following will serve as your electronic signature

Last 4 digits of your Social Security Number*

Date of Birth (MMDD)*

Mother's Maiden Name*

☐ **Important:** I have reviewed my benefits applications and approve of my final elections.

Your Enrollment Progress

✓ 1. My Basic Information
✓ 2. My Open Enrollment Benefits
   3. Finalize
✓ 4. Summary

Make Changes

Finalize Elections

$14.55
post-tax deduction

The **Finalize** screen is required to complete the enrollment.

Enter the:
- Last four digits of your SSN,
- Date of Birth (format MMDD)
- Mother's Maiden Name.

Check the box to certify the information provided is accurate and complete.

You may view each product's application by clicking the **view pdf** link.

Post-tax premium deductions are displayed next to each product elected.

Total post-tax premium is displayed under the Finalize Elections button.

Click **Finalize Elections** to complete the enrollment.

If you log-out before clicking the Finalize Elections button, no coverage will be received.

Application Sample

TRANSAMERICA
LIFE INSURANCE COMPANY

Transamerica Life Insurance Company *("Insurer")*
Home Office: Cedar Rapids, IA
Administrative Office: P.O. Box 8063
Little Rock, AR 72203-8063

Universal Life Application

☑ First Application   ☐ Add Dependents – Contract # _____   ☐ Increase Coverage – Contract # _____

Group Name	Group Number	Location

Applicant (Last, First, M.I.)	☐ Male ☑ Female	Social Security No.	Date of birth 5/4/1954	Date of marriage*** 1/1/1984
Spouse** (Last, First, M.I.)	☑ Male ☐ Female	Social Security No.	Date of birth 4/1/1954	

Date of hire 11/24/2009	Avg hours worked per week 40	Annual salary $40,141.00	Occupation	Applicant ID 12

Have you or your spouse** used tobacco products in the last year?
Applicant ☑ No ☐ Yes   Spouse** ☑ No ☐ Yes   Home phone _____   Work phone/ext. _____

Home address	City Springfield	State Illinois	Zip code 60603

Life insurance certificate/policy owner (Last, First) *(If different than applicant)*	Address	Relationship	Social Security No.

Primary Beneficiary: (Last, First, M.I.)   SEE CONTINUATION FORM   Relationship: _____

Contingent Beneficiary: (Last, First, M.I.)   Relationship: _____

*Applicant will be the beneficiary for any spouse** and/or child(ren) coverage*

Payroll Mode: ☐ Weekly   ☐ Bi-Weekly   ☐ Semi-Monthly   ☑ Monthly   ☐ Other _____

I Am Applying For:

Universal Life: Benefit Option ☑ A (level) ☐ B (increasing)		Automatic Increase Option Rider	Level Term Rider		
Face Amount*	Premium per pay period*		Face Amount*	Rider Length	Premium per pay period*
☑ Applicant $100,000	$238.42	☑ Yes ☐ No		☐ 10yr ☐ 20yr	$0.00

TRANSAMERICA
EMPLOYEE BENEFITS

Welcome, TESTTracy L TESTBecker! | Logout
Last Login: 6/11/2015

Home   My Benefits

My Open Enrollment Benefits
Thank you for completing Open Enrollment!

Change Benefit Elections *please complete by 12/31/2015*   Make Changes

Payroll Deduction Form   View PDF

Critical Illness
Benefit coverage is effective: 1/1/2015
You have selected the following product:
• CriticalAssistance Advance Insurance view details
View PDF
$4.68
weekly deduction

Term Life
Benefit coverage is effective: 1/1/2015
You have selected the following product:
• Term Life Insurance view details
View PDF
$4.88
weekly deduction

Hospital Indemnity
Benefit coverage is effective: 1/1/2015
You have selected the following product:
• Hospital Indemnity Insurance view details
View PDF
$4.99
weekly deduction

Your Enrollment Progress
1. My Basic Information
2. My Open Enrollment Benefits
3. Finalize
4. Summary

$14.55
post-tax deduction

After you finalize your enrollment the **Summary** screen is available for viewing the applications and payroll deductions.

Congratulations!
You have completed your enrollment.

You may click **view details** to see benefit elections.

You may click **view pdf** to see the completed application.

Click **Logout** at the top right when you are done.