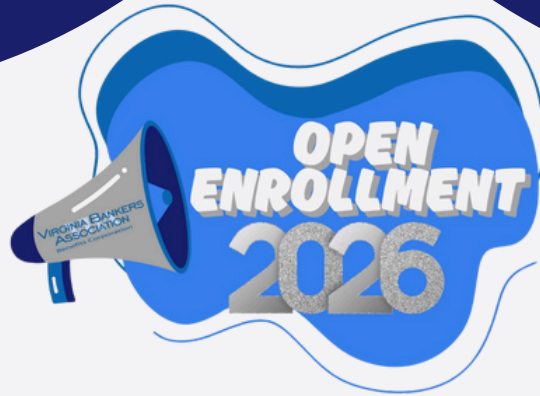




2026 OPEN ENROLLMENT EMPLOYEE INSTRUCTIONS

WELCOME TO THE VBA BENEFITS
CORPORATION'S ENROLLMENT
SITE.



Go to the bswift website

<http://vbabenefits.bswift.com>

Or, log in through your payroll site's
Single Sign On (SSO) option, if applicable.

1

Log In

Username

Password

[First Time User/Forgot Password](#)

Log In >

- **First Time User/Forgot Password:** click the link circled above.
- **Multifactor Authentication:** You will then be prompted to complete Multifactor Authentication to verify your identity with an email address or phone number. Once the identification code is entered, you will be able to create a new password and be redirected to the Log In Screen.

Enter your login information

- **Username:** First 4 letters of your last name and last 4 numbers of your Social Security Number (Example: John Smith = smit1234). If you need assistance, reach out to your HR Administrator or the VBA Benefits team at 800-643-5599.

2

Welcome to Your 2026 Open Enrollment

Your Status: Not Started

Enrollment Deadline:

Learn about what's new, compare plans and make your benefit elections.

[Visit the Enrollment Center](#)

Welcome Page

To enter the Open Enrollment Window,
click on the "Visit the Enrollment
Center" button.

3

2026 OPEN ENROLLMENT EMPLOYEE INSTRUCTIONS

PAGE 2

4

Welcome to your 2026 Open Enrollment

Your Status: Not Started

Enrollment Deadline:

Enroll Now

Click “Enroll Now”
Enter Open Enrollment.

5

Your Information

Make sure your personal information is correct. Fields marked with an asterisk (*) are required. Once complete, scroll to the bottom of this page, select the “I agree” checkbox and continue.

By checking the “I agree” box, I am agreeing to all the choices, changes, and submissions made on the following pages where I initially enroll in benefits or when I make benefit election updates. In addition, I understand that my employer may choose to standardly provide electronic communications, such as but not limited to, notices, benefit details, and plan documents in lieu of mailing.

☒ I agree

Language Assistance:

Español | 中文 | Tagalog | 한국어 | Tagalog | Pycckий | العربية | Koryŏl | Français | Polski | Português | Italiano | Deutsch | 日本語 | Other Languages...

Privacy Policy

Accessibility Services

Non-discrimination Notice

Browser Requirements

Continue

6

Family Information

Ensure all eligible dependents are listed.

Because of ACA reporting requirements, you must include even those you do not intend to cover.

- Adding a new dependent to the medical and/or dental plan will require the submission of documentation. **Instructions on how to submit dependent documentation begin with step 14 (pg. 4).**
- Once complete, select the “I agree” checkbox and continue.

Your Information | Your Benefits | Final Questions | Review and Confirm

Please enter all family information before beginning your enrollment regardless of whether the family members are to be covered by your benefits or not. To do so, click Add Family Member. To verify or edit the information of a family member who has already been entered, click on the person's name. If you do not have any family members, click Continue.

Allison Tester

Female Employee

Edit >

George Test

Male Spouse

Edit >



Add Dependents

I agree that the above information is accurate.

☐ I agree

Language Assistance:

Español | 中文 | Tagalog | 한국어 | Tagalog | Pycckий | العربية | Koryŏl | Français | Polski | Português | Italiano | Deutsch | 日本語 | Other Languages...

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Continue

7

Company Wide Enrollment

- Next you will see a pop-up for Emma, the “Help me decide” tool. If you provide the requested information, you will receive personalized plan recommendations. It takes about 2 minutes to complete.
- Benefits are grouped by type (i.e., medical, dental, vision, etc.), and each may include more than one plan. To elect plans and select which dependents to cover, click on “View Plan Options”.



I can help simplify your healthcare journey.

Take this 1–3 minute interview to get a personalized plan recommendation. I'll match you with the best coverage options for your needs.

Help me decide

I don't want help

Medical

NO PLAN SELECTED

* Selection Required

I don't want this benefit (waive)

View Plan Options

Health Savings Account

NO PLAN

* Selection Required

I don't want this benefit (waive)

View Plan Options

2026 OPEN ENROLLMENT EMPLOYEE INSTRUCTIONS

PAGE 3

Medical

Who will be covered by this plan?

☒ Allison Tester (Employee)

☒ George Test (Spouse)

[Add Dependents](#)

Language Assistance:
Español | 中文 | Tiếng Việt | 한국어 | Tagalog | Pycckий | العربية | Kreyòl | Français | Polski | Português | Italiano | Deutsch | 日本語 | العربية | Other Languages...

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[Back to Benefits](#) [Continue](#)

Who will be covered?

Any Dependents listed under your Family Information will be listed here. Check/Uncheck to Enroll/Unenroll dependents for the 2026 plan.

- You may also add dependents from this screen.
- Click Continue when complete.

8

[View All Plans Side-by-Side](#)

KeyCare 3500

[View plan details](#)

Your cost per month: \$12

Tier: Employee + Spouse

[Select](#)

KeyCare 5000

[View plan details](#)

Your cost per month: \$12

Tier: Employee + Spouse

[Select](#)

“Select” or “Keep Selection”

Complete for each benefit type.

- You may view plan details for each plan.

9

Tobacco Surcharge

Your Cost per month: \$0

PLAN: Tobacco Surcharge (Employee status)

I do not qualify as non-tobacco user and I choose to pay the \$50/month premium surcharge if electing medical coverage.

[View Plan Options](#)

Medical

Your Cost per month: \$12

PLAN: KeyCare 3500

[View plan details](#)

COVERAGE: Employee + Spouse

Allison Tester (Employee)

George Test (Spouse)

[View Plan Options](#)

Health Savings Account

Your Cost per month: \$0

PLAN: Health Savings Account Plan

HSA Banking Partner:

CONTRIBUTION: \$0

[View Plan Options](#)

Dental **Vision** **FSA HealthCare**

[Save and Finish Later](#) [Continue](#)

Complete Elections

Once an election is made, it will show “completed” and the benefit icon will turn green. This shows that you have selected a plan for that benefit type.

- Repeat steps 7 - 9 for each plan type.
- When all benefit icons are green, Click Continue.

10

Once You've Reviewed All Your Selections:

I hereby acknowledge that I am making a benefit election for my benefits and am authorizing payroll deduction from my earnings. I understand that if I decline any of my benefit elections, I cannot later change my elections during the plan year unless I have a qualified change in family status. I also acknowledge that I have reviewed the Summary of Benefits and Coverages for the medical plans listed above.

☒ I agree, and I'm finished with my enrollment.

Language Assistance:
Español | 中文 | Tiếng Việt | 한국어 | Tagalog | Pycckий | العربية | Kreyòl | Français | Polski | Português | Italiano | Deutsch | 日本語 | العربية | Other Languages...

[Privacy Policy](#) | [Accessibility Services](#) | [Nondiscrimination Notice](#) | [Browser Requirements](#)

[Save and Finish Later](#) [Complete Enrollment](#)

Review and Confirm

Review, edit your elections, and add beneficiaries for Life Insurance (if applicable).

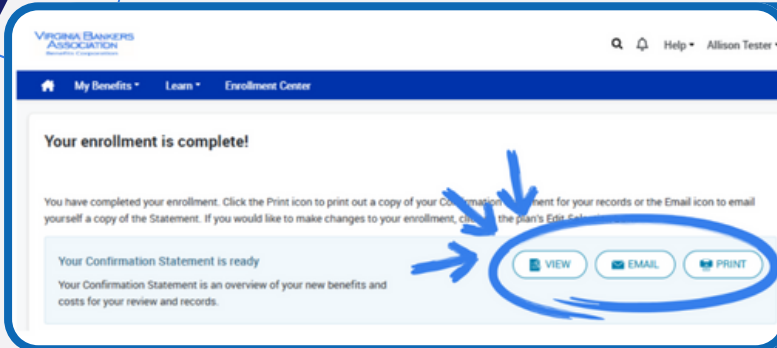
- After making sure all your selections are correct, scroll to the bottom of the page, read the participation statement, and select “I agree”.
- Then click “Complete Enrollment”.

11

2026 OPEN ENROLLMENT EMPLOYEE INSTRUCTIONS

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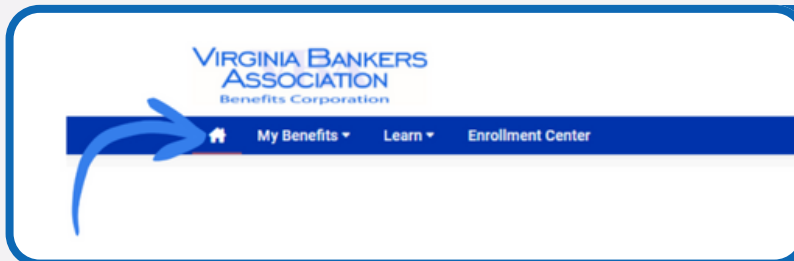


Your enrollment is complete!

Select an option to view, email, or print your benefit confirmation statement.

- Email will be sent to the preferred email address on file. To update this, navigate to "Update My Personal & Communication Preferences" and select "View Communication Preferences".

13



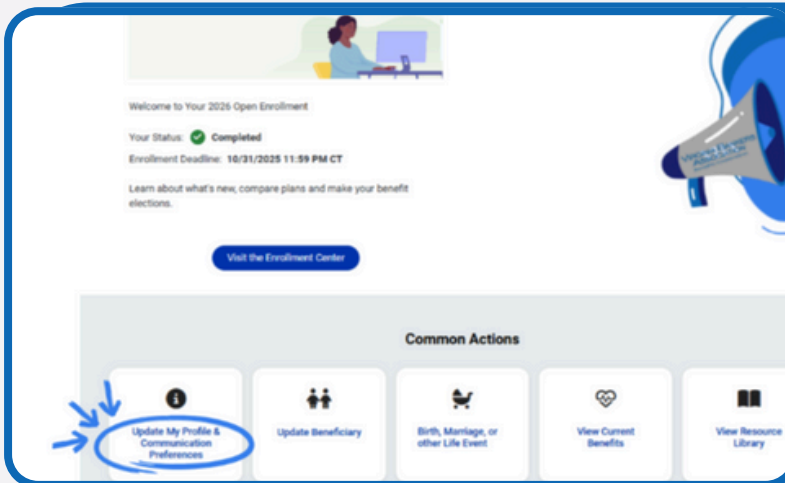
Return to the Home Page:

Select the house icon from the top menu to return to the homepage.

You may resubmit your elections up until the end of the Open Enrollment period.

If you did not add new dependents to the medical and/or dental plan, you are done!
If you added new dependents to the medical and/or dental plan, please complete steps 14 - 18 below.

14

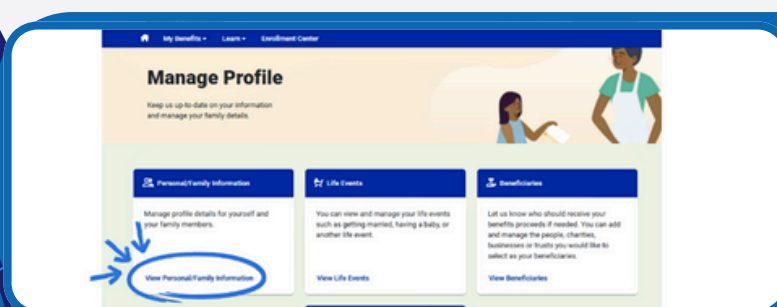


Dependent Verification

If you enrolled a new dependent in the medical and/or dental plan, you must submit documentation to verify their eligibility.

- [Click here to view dependent documentation options/requirements.](#)
- After returning to the Home page, click on "Update My Profile & Communication Preferences".

15



"View Personal / Family Information"

Click on this option within the Personal/Family Information box.

2026 OPEN ENROLLMENT EMPLOYEE INSTRUCTIONS

PAGE 5

16

The screenshot shows the Virginia Bankers Association Enrollment Center. On the left, a menu lists 'Personal Information', 'Family Information', 'Beneficiaries', 'Life Event', and 'Employee File'. 'Employee File' is circled in blue with three arrows pointing to it. The main area shows 'Family Information' for Allison Tester (Female Employee) and George Test (Male Spouse).

“Employee File”

Select from the lefthand menu.

17

The screenshot shows the 'Employee File' page for Allison Tester. A table lists dependents: Allison Tester (Employee, 11/15/1989) and George Test (Spouse, 01/01/1990). Next to each name is a 'View and Upload' link. The 'View and Upload Documents' link for George Test is circled in blue with three arrows pointing to it.

“View and Upload Documents”

Click on this option (next to the dependent you are adding to medical and/or dental coverage).

18

The screenshot shows the 'File Upload' form for George Test spouse. It includes fields for Document Type (with a dropdown arrow circled), File (with a 'Choose File' button circled), Title (set to 'Document'), Description, Document Date (set to 11/03/2025), and a checkbox for 'Are you uploading for a Dependent Verification?' (set to 'Yes'). The 'Save' button is circled in blue with three arrows pointing to it.

File Upload

Review the [dependent documentation options/requirements](#).

- Click the drop-down menu to select the document type.
 - Click “Choose File” and upload your document. You may either take a picture and upload it to the bswift mobile app, or load it via your computer.
 - Enter “Document” for the Title.
 - Leave the Description blank.
 - Enter today’s date for the Document Date.
 - Select “Yes” under “Are you uploading for a Dependent Verification”.
 - When complete, click Save.
- After the document is uploaded it will either be **accepted or require further review**.
 - Reviews can take up to five business days, and a decision will be communicated thereafter. The medical and/or dental plan enrollment will pend until the document is reviewed and approved.
 - Navigate back to the Employee File to view the status of your dependent verification.

Questions? Reach out to your HR Administrator or
the VBA Benefits team at 800-643-5599