

# EBIS overview

website: <http://www.hr.dla.mil/>

Select Automated Tools

The screenshot shows the DLA Human Resources website interface. At the top, there is a navigation bar with the DLA logo and the text "DLA HUMAN RESOURCES Your Human Resources Connection". Below this is a secondary navigation bar with menu items: NSPS, Forms, Helpful Links, Personnel Employee Bulletins, Automated Tools (highlighted with a speech bubble), HR Mission, and Human Capital Program Development. The main content area is divided into three columns. The left column features a photo of a diverse group of people looking at a laptop, with the heading "Prospective Employees" and a paragraph: "Looking for an exciting and meaningful career with the Defense Logistics Agency? This area will provide you with information on our mission, career fields, job announcements, and hiring process and hiring programs." The middle column is titled "News & Announcements" and contains a list of links: "Current student job opportunities available at the Defense Supply Center Columbus (DSCC)", "Federal Employees Group Life Insurance (FEGLI) Election Opportunity PDF", "2009 TSP Contributions PDF", and "2009 TSP Catch Up Contributions PDF". Below the list is a link for "More News and Announcements" with a newspaper icon. The right column is titled "DLA and DHRA Serviced Employees or DoD Serviced Employees" and contains a paragraph: "Are you already a DLA serviced employee or a military member assigned to DLA? Are you looking for information about promotion, insurance, retirement, and other HR programs and processes available to you? Use the appropriate link above for the answers." Below this is a link for "Enter the DLA Training Center" and a paragraph: "The DLA Training Center (DTC) provides educational development and delivery services for the DLA and can provide a wide range of services for the larger Federal community. DTC also manages the DLA Corporate Intern Program." At the bottom of the page, there is a footer with links for "Privacy/Security", "Accessibility", "External Link Disclaimer", "Viewers", and "Email Webmaster", followed by the text "Last updated: April 24, 2009 10:45 AM". The Windows taskbar at the very bottom shows the start button, several open applications (2 Micros..., Document..., Presentati..., Adobe Con..., DLA Huma...), and the system clock showing 2:08 PM.



## Automated Tools

### [Automated Staffing Program \(ASP\)](#)

ASP is the Defense Logistics Agency's automated staffing program. The program will allow you to create and edit your resume, apply for DLA vacancies, and check on the status of the applications you submit.

### [Customer Service Unit \(CSU\)](#)

Provides civilian personnel data to supervisors and managers of the employees in their organization only.

### [Defense Civilian Personnel Data System \(DCPDS\)](#)

Department of Defense Human Resources (HR) information system that maintains workforce data.

### [Electronic Official Personnel Folder \(EOPF\)](#)

Human Resource offices are required to maintain a file on every active civilian employee. If you are a civilian employee serviced for Human Resources at the Defense Logistics Agency, an account has been established for you and you may access it through this system.

### [Employee Benefits Information System \(EBIS\)](#)

The Employee Benefits Information System (EBIS) is the latest automated tool created to provide 24 hour access to information you need about programs such as health benefits, life insurance, retirement, and the Thrift Savings plan.

### [HR Self Service \(My Biz/My Workplace\)](#)

An exciting new web-based Oracle Self Service application within the Defense Civilian Personnel Data System (DCPDS) that allows you to access and view your personnel information 24 hours a day/7 days a week.

### [Learning Management System \(LMS\)](#)

LMS is a commercial off-the-shelf software package that provides one-stop capabilities for employees and supervisors to better manage the entire spectrum of learning from planning to learning event execution within a single environment. The LMS gives DLA the ability to create and deliver training content through e-learning within the automated system. These systems will allow users to schedule instruction, store training information, and automate Individual Development Plans (IDPs).

### [My Pay](#)

The Defense Finance and Accounting Service (DFAS) website for employee pay information. With your account you can view, print, and save leave and earnings statements, view and print tax statements, change federal and state withholdings, manage your allotments, and make address changes, and more

Click on EBIS

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## Current Employee Resources - DLA's Employee Benefits Information System (EBIS)

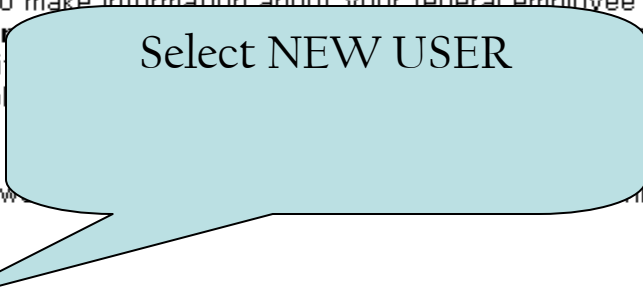
### [Current Employee Resources Home Page](#)

Day-dreaming about the future and want to see a retirement estimate? Did you recently get married and now need to change your health benefits enrollment from single to family? Or did you want to see how much life insurance you are carrying?

DLA is working hard to make information about your federal employee benefits programs more accessible. The **Employee Benefits Information System (EBIS)** provides 24 hour access to information you need about programs such as health benefits, life insurance, and retirement. Get detailed program information and even make changes to your enrollment. Your personal information is protected and available only to you.

You may access the website through the following links. If you are a first time EBIS user, please select new user.

- [New User](#)
- [Returning User / Forgot Password](#)  - Go directly to EBIS
- [Separated or Retired Employees](#)





## Current Employee Resources - EBIS New User

[Current Employee Resources Home Page](#)

### Before Proceeding Read Log-On Procedures

#### IF YOU ARE A NEW USER:

The first time you access the EBIS system you must create a unique username and password. To begin this process, click on the New User button toward the bottom of the page. You will be taken to another page to enter information to verify your identify. Enter the requested information and click on the Continue button. At the next screen enter the requested username and password information and click on the Get E-mail button. If you were successful in setting up your account, you will receive a message indicating your success. At the login screen, enter your new username and password and click the Login button.

Click EBIS now

Go to [EBIS Now](#).



Welcome to the Employee Benefits Information System (EBIS)...

### Department of Defense EBIS Login

**Current Users:**

Enter your Username and your Password.

Username

Password

[Forgot Login](#)

Login...

**New Users:**

**ATTENTION!**

If you already have an established EBIS account and this is the first time you have logged in since 12/15/2007, please click on the Forgot Username/Password link.

At the next screen, enter your identifying information and click the Continue button. At the next screen you will be prompted to create a new unique username and secure password.

**If you have never created an EBIS account,** you will need to scroll down the page and click on the New User button. Input the requested information and click on the Continue button. Upon clicking the Continue button, you will be prompted to create a unique user name and secure password.

Read text and scroll down.

Enter your Username and your Password.

Username

Password

[Forgot Login](#)

Login...

**New Users:  
ATTENTION!**

If you already have an established EBIS account and this is the first time you have logged in since 12/15/2007, please click on the Forgot Username/Password link.

At the next screen, enter your identifying information and click the Continue button. At the next screen you will be prompted to create a new unique username and secure password.

**If you have never created an EBIS account**, you will need to scroll down the page and click on the New User button. Input the requested information and click on the Continue button. Upon clicking the Continue button, you will be prompted to create a unique user name and secure password.

If you have login or other technical questions, email the EBIS administrator at [ebis@dla.mil](mailto:ebis@dla.mil).

For benefits questions (Retirement, TSP, Life Insurance, Health Benefits, etc) please contact your [DLA Human Resources Center](#)

New User

Click New User

### User Validation

In order to establish (or reestablish) your login information you must be a validated user. Enter the information below to and click the continue button to be validated as a user.

Enter Your Social Security Number (NNNNNNNNNN):

Enter Your Date of Birth (MM/DD/YYYY):

Enter Your Service Computation Date (MM/DD/YYYY):

Indicate Your Pay Plan: ( )

Enter Your Grade: (XX)

Enter Your Step: (XX)

If you are an employee covered by the NSPS, please enter the following:

Pay Plan: Enter your Pay Schedule

Grade: Enter your Pay Band

Step: Enter 00

Enter information as shown:

- SSN w/o slashes or dashes.
- DOB as two digit month, two digit day and four digit year.
- Service Comp Date (SCD) is your date of hire\*.
  - Pay Plan may be GS, WG or YA.
  - Grade is dependent on your position.
  - Step is most often 01 (00 for YA).

\*may differ if you have prior military and or federal civilian service.

# BIS

EMPLOYEE BENEFITS INFORMATION SYSTEM

## Establish or Reestablish Login...

To establish or reestablish your login enter the information below and click the continue button.

Username:

You can set your Username. It must be 7-15 characters long.

Enter Your New Password:

Password must contain at least 2 character(s) from at least 4 of these 4 categories: uppercase alphabetical (A-Z), lowercase alphabetical (a-z), numeric (0-9) or special characters (~!{};,:?-=+|<>!@#\$\$%^&\*()[]/\), and be between 9 and 15 characters long.

Re-enter Your New Password:

Email:

Set Password

Example: ABcd@#12z



## Welcome to the Employee Benefits Information System (EBIS)

### Department of Defense

The Employee Benefits Information System (EBIS) is designed to provide Federal employees with information on retirement & benefits.

To get started - choose one of the following:



#### My Benefits

Click for a comprehensive personal statement of your retirement and benefits.



#### Calculators

Click to use a variety of retirement and TSP calculators.



#### Transactions

Click to view current coverage and/or change your TSP, FEHB, or FEGLI benefits.



#### Forms

Click to fill and/or print benefits related forms.



#### HR Link

Click to view estimates from your Human Resources office.



#### My Profile

Click to personalize your information that is used in EBIS.



Click to view information about Federal employee benefits.

Click on the transaction icon to complete your health & life insurance and TSP elections.

EBIS

Logout

Transactions

None

None

None

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)



Logout

Transactions

None

None

None

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Sign in or other options, email administrator at [redacted]. For benefits information, retirement, insurance, etc) visit your DLA Resources Center

### Transactions

#### FEHB Current Coverage

Premium cost for temporary employees will be higher than the cost reflected below. Please refer to the Guide to FEHB Plans.

|                     |                                  |
|---------------------|----------------------------------|
| Plan Code           | 112                              |
| Plan Name           | Blue Cross and Blue Shield Servi |
| Type of Enrollment  | Basic Family                     |
| Cost Per Pay Period | \$99.91                          |

History   Change

Void

Only blackened buttons work. Select change to begin.

#### TSP Current Coverage

You are currently contributing to TSP.

|                      |        |
|----------------------|--------|
| Retirement Plan      | FERS   |
| Contribution Amount  | \$0.00 |
| Contribution Percent | 12%    |

History   Change

#### TSP Pending Transaction

You have no pending transactions.

Void

#### FEGLI Current Coverage

All FEGLI amounts and costs are based on your age as of the pay period ending date: 04/11/2009.  
Enrollment Code: C0

#### FEGLI Pending Transaction

You have no pending transactions.  
If you completed a FEGLI transaction that is effective today there will be no pending transaction.

### Transactions : Change

Select the type of FEHB transaction you wish to complete:

- Add a Foster Child
- Add a Foster Child**
- Non-Open Season

Begin

Cancel

As a new user, your options will be new enrollment & non-open season. You will select the new enrollment option and click begin.

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Logout

Transactions

None

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None

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)

Custom Text trans-change.aspx



My Benefits



Calculators



Transactions



Forms



HR Link



My Profile

## Transactions : FEHB : Non-Open Season

Select how you wish to choose your health plan:

- Allow me to enter the plan code I want.
- Show me the Nationwide Fee-for-Service plans (FFS) and allow me to choose the plan I want.
- Show me the plans by Geographical Area (HMO or FFS, nationwide) and allow me to choose the plan I want.

Next

Quit

If you have researched the OPM website ([www.opm.gov](http://www.opm.gov)) and know the plan you want to select, click the first radio button. If not, you may review all health providers by clicking the 2<sup>nd</sup> (Fee for Service) & (HMO).

To make a Non Open Season change you must have a life event. For more information visit [www.opm.gov/insure](http://www.opm.gov/insure).



### Transactions : FEHB : Non-Open Season

Select the geographic area:

Ohio

Next >>

Quit

For HMO, you must select a plan within the geographic area for where you live or work. Be CAREFUL to pay attention to the provider service area.

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at [www.opm.gov/insure](http://www.opm.gov/insure).

See

Logout

Transactions

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)



### Transactions : FEHB : Non-Open Season

Choose the health plan you wish to enroll in by selecting the row and clicking the "Next" button:

| Code       | Name  | Coverage           | Type       | Cost *          |
|------------|---|--------------------|------------|-----------------|
| 221        | Aetna HealthFund  | CDHP Self          | HMO        | \$40.48         |
| 222        | Aetna HealthFund  |                    |            | \$93.10         |
| 224        | Aetna HealthFund  |                    |            |                 |
| 225        | Aetna HealthFund  |                    |            |                 |
| 7D1        | Aetna Open Access - Cleveland and Toledo Area                       |                    |            |                 |
| 7D2        | Aetna Open Access - Cleveland and Toledo Areas                      |                    |            |                 |
| ND1        | Aetna Open Access - Columbus Area                                   |                    | HMO        | \$89.27         |
| <b>ND2</b> | <b>Aetna Open Access - Columbus Area</b>                            | <b>High Family</b> | <b>HMO</b> | <b>\$238.69</b> |
| RD1        | Aetna Open Access - Greater Cincinnati Area/Southeastern Indiana... | High Self          | HMO        | \$142.70        |

Select your plan and click next.

\*Cost is per pay period

Next >>

Quit

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at [www.opm.gov/insure](http://www.opm.gov/insure).

Bee

Logout

Transactions

None

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e login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)

### Transactions : FEHB : Non-Open Season

Detailed information about the plan you selected above:

|                             |                                   |
|-----------------------------|-----------------------------------|
| <b>Plan Name:</b>           | Aetna Open Access - Columbus Area |
| <b>Plan Coverage:</b>       | High Family                       |
| <b>Cost Per Pay Period:</b> | \$238.69                          |
| <b>Plan Type:</b>           | HMO                               |
| <b>Plan Area:</b>           | OH                                |
| <b>Plan Code:</b>           | ND2                               |

It is your responsibility to review and comply with the guidance in your plan brochure available on the OPM web site.

Next >>

Quit

You will be provided a verification of your election. If this is not what you want, select quit. If you are satisfied, click next.

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at [www.opm.gov/insure](http://www.opm.gov/insure).

See

Logout

Transactions

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)

Bee

Logout

Transactions

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)

### Transactions : FEHB : Non-Open Season

Are you married?  
If you are separated but NOT divorced, then you are still married.

Yes, I am married.  
 No, I am NOT married.

Next >>

Quit

You are required to answer this based on your current legal situation.

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at [www.opm.gov/insure](http://www.opm.gov/insure).



### Transactions : FEHB : Non-Open Season

Other insurance information.

Do you have any group health insurance coverage other than the FEHB plan in which you are now enrolled? If so, click to enable the check box below and enter the requested information and click the 'Next >>' button.

If you do not wish to make a change because no other family member has group health insurance, then click the 'Next >>' button to proceed.

I have other insurance.

Name of Policy Holder  
(last first middle initial)

Insurance Policy Number

Medicare (you)    Medicare Part D

TriCare/CHAMPUS

Other (specify name)

This screen is if you have other insurance, to provide that data. If none, select next.

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at [www.opm.gov/insure](http://www.opm.gov/insure).

Transactions : FEHB : Non-Open Season

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 (Retirement,  
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 efits, etc)  
 ctact your [DLA](#)  
[sources Center](#)

Family Member Management:  
 Since you indicated that you wish to enroll in a non-self-only FEHB plan, you must add at least one family member to this plan. Use the following options to help you manage the family members subject to this plan.

- What would you like to do?
- Add a family member to the FEHB plan I have selected.
  - Edit a family member in the FEHB plan I have selected.
  - Remove a family member from the FEHB plan I have selected.
  - I am done managing family members.

Next >>

Members you have entered already:

| FIRST NAME          | MI       | LAST NAME       | SUFFIX         |
|---------------------|----------|-----------------|----------------|
| SSN                 | DOB      | SEX             | RELATIONSHIP   |
| ADDRESS ONE         |          |                 |                |
| ADDRESS TWO         |          |                 |                |
| ADDRESS THREE       |          |                 |                |
| CITY                | STATE    | ZIP CODE        | ZIP PLUS FOUR  |
| OTHER INS           | MEDICARE | TRICARE/CHAMPUS | OTHER PROVIDER |
| OTHER POLICY HOLDER |          |                 |                |
| OTHER POLICY NUMBER |          |                 |                |
| OTHER POLICY NAME   |          |                 |                |

Quit

If a family plan is selected, you will be required to add family members.

## Transactions : FEHB : Non-Open Season

[Bee](#)[Logout](#)

### Transactions

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None

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questions, email  
administrator at  
mil. For benefits  
(Retirement,  
insurance,  
benefits, etc)  
contact your [DLA  
sources Center](#)

#### Family Member Management:

Please enter the requested information about the family member.

|                  |   |
|------------------|---|
| First Name       | <input type="text" value="lfound"/>     |
| Middle Initial   | <input type="text" value="A"/>          |
| Last Name        | <input type="text" value="Wife"/>       |
| Suffix           | <input type="text"/>                    |
| SSN (NNNNNNNNN)  | <input type="text" value="123456789"/>  |
| DOB (MM/DD/YYYY) | <input type="text" value="11/22/1966"/> |
| Sex              | <input type="text" value="Female"/>     |
| Relationship     | <input type="text" value="Spouse"/>     |

Enter the current address of the family member.  
The home address will be used by the FEHB carrier to mail any  
correspondence relating to their health insurance.

|               |   |
|---------------|---|
| Address 1     | <input type="text" value="1234 My Street"/> |
| Address 2     | <input type="text"/>                        |
| Address 3     | <input type="text"/>                        |
| City          | <input type="text" value="Ourtown"/>        |
| State         | <input type="text" value="OH"/>             |
| Zip Code - +4 | <input type="text" value="43111-1111"/>     |

#### Other insurance information.

Does the family member have any group health insurance coverage  
other than the FEHB plan in which you are now enrolled? If so, click to  
enable the check box below and enter the requested information and  
click the 'Add Member' or 'Update Member' button.

You will need to update your family member data and mailing address.

Address 1 1234 My Street  
Address 2  
Address 3  
City Ourtown  
State OH  
Zip Code - +4 43111-1111

Other insurance information.  
Does the family member have any group health insurance coverage other than the FEHB plan in which you are now enrolled? If so, click to enable the check box below and enter the requested information and click the 'Add Member' or 'Update Member' button.

If you do not wish to make a change because this family member does not have group health insurance, then click the 'Add Member' or 'Update Member' button to proceed.

The member has other insurance.

Name of Policy Holder (last first middle initial)

Insurance Policy Number

Medicare (member) Part A Only  Medicare Part D

TriCare/CHAMPUS

Other (specify name)

Cancel Add Member

Quit

After updating the basic data and mailing address, you will need to provide outside insurance information, if any, for the family member and click add member.

Transactions : FEHB : Non-Open Season

Family Member Management:  
 Since you indicated that you wish to enroll in a non-self-only FEHB plan, you must add at least one family member to this plan. Use the following options to help you manage the family members subject to this plan.

- What would you like to do?
- Add a family member to the FEHB plan I have selected.
  - Edit a family member in the FEHB plan I have selected.
  - Remove a family member from the FEHB plan I have selected.
  - I am done managing family members.

Next >>

Members you have entered already:

| FIRST NAME          | MI         | LAST NAME       | SUFFIX         |
|---------------------|------------|-----------------|----------------|
| SSN                 | DOB        | SEX             | RELATIONSHIP   |
| ADDRESS ONE         |            |                 |                |
| ADDRESS TWO         |            |                 |                |
| ADDRESS THREE       |            |                 |                |
| CITY                | STATE      | ZIP CODE        | ZIP PLUS FOUR  |
| OTHER INS           | MEDICARE   | TRICARE/CHAMPUS | OTHER PROVIDER |
| OTHER POLICY HOLDER |            |                 |                |
| OTHER POLICY NUMBER |            |                 |                |
| OTHER POLICY NAME   |            |                 |                |
| I found             | A          | Wife            |                |
| 123456789           | 11/22/1966 | Female          | Spouse         |
| 1234 My Street      |            |                 |                |
|                     |            |                 |                |
|                     |            |                 |                |

If you have no other family members, select I am done managing family members and click next.

See

Logout

Transactions

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your DLA sources Center



### Transactions : FEHB : Non-Open Season

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Logout

Transactions

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tact your [DLA](#)

[sources Center](#)

Enter your current address.  
Your home address will be used by the FEHB carrier to mail any correspondence relating to your health insurance. If you are satisfied with the address shown below, click the 'Next >>' button. If you would like to enter a different address to be used by your FEHB carrier, just edit the information below and click the 'Next >>' button.

This will not affect the address you have on file with your payroll office. You are still responsible for notifying your agency payroll office of any address change.

|               |  |
|---------------|--|
| Address 1     | <input type="text" value="1234 My Stree"/> |
| Address 2     | <input type="text"/>                       |
| City          | <input type="text" value="Ourtown"/>       |
| State         | <input type="text" value="OH"/>            |
| Zip Code - +4 | <input type="text" value="43111-1111"/>    |

This screen is very important, as this is your address and where the insurance cards will be mailed.

To make a Non Open Season change you must have a life event. For more information on life events please visit the OPM website at [www.opm.gov/insure](http://www.opm.gov/insure).

### Transactions : Summary & Signature (FEHB)

FEHB Transaction Information

Premium cost for temporary employees will be higher than the cost reflected below. Please refer to the Guide to FEHB Plans, RI 70-B, for the correct premium.

Based on the transaction information you entered, your projected FEHB enrollment is:

#### FEHB Pending Transaction

Effective Date: 04/26/2009

|   |                                  |
|---|----------------------------------|
| Transaction: Non-Open Season Enrollment |                                  |
| Plan Code                               | ND2                              |
| Plan Name                               | Aetna Open Access - Columbus Are |
| Type of Enrollment                      | High Family                      |
| Cost Per Pay Period                     | \$238.69                         |

This confirms your election.

#### \*\*\* ELECTRONIC SIGNATURE \*\*\*

**WARNING: Be advised that any false statement in this transaction, or willful misrepresentation, is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both, according to federal law. Additionally, this may result in disciplinary action up to and including removal from Federal employment.**

**By clicking the 'Process Transaction' button, I understand that my EBIS web site login information is my electronic signature in effecting this transaction.**

Process Transaction

I acknowledge and wish to PROCESS THIS TRANSACTION.

Cancel Transaction

Process the transaction to complete or cancel to stop your action.

Bee

Logout

Transactions

None

None

None

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your DLA sources Center

Transactions : Receipt (FEHB)

**This page contains information subject to the Privacy Act of 1974 as amended.**

[ \*\*\* YOUR TRANSACTION HAS BEEN SUCCESSFULLY COMPLETED \*\*\* ]

- Transaction Receipt -

Printer Friendly Version

Worker Bee

Employee Name: 04/24/2009  
Date of Transaction: 03:03:57 PM  
Time of Transaction: 04/26/2009  
Transaction Effective Date: FEHB Non-Open Season Enrollment  
Transaction Description: n/a  
Other Information:

FEHB Transaction Information

Premium cost for temporary employees will be higher than the cost reflected below. Please refer to the Guide to FEHB Plans, RI 70-B, for the correct premium.

Based on the transaction information you entered, your projected FEHB enrollment is:

|   |                                     |
|---|-------------------------------------|
| <b>FEHB Pending Transaction</b>         |                                     |
| Effective Date: 04/26/2009              |                                     |
| Transaction: Non-Open Season Enrollment |                                     |
| Plan Code                               | ND2                                 |
| Plan Name                               | Aetna Open Access - Columbus<br>Are |
| Type of Enrollment                      | High Family                         |
| Cost Per Pay Period                     | \$238.69                            |

You will receive this receipt page after completing your transaction. There is also an option – “printer friendly version” to print a copy of your SF-2809 Health Benefit Election.

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Logout

Transactions

View

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None

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your DLA sources Center



Home | My Info | Logout

**My Pending Transactions**

None  
None  
None

**My Estimates**

0  
0

**Agency News**

If you have login or other technical questions, email the BIS administrator at [pbda@da.mil](mailto:pbda@da.mil). For benefits questions (Retirement, Life Insurance, Health Benefits, etc) please contact your [DLA Human Resources Center](#)

**FEHB Current Coverage**

Premium cost for temporary employees will be higher than the cost reflected below. Please refer to the Guide to FEHB Plans.

Plan Code: 112  
Plan Name: Blue Cross and Blue Shield Servi  
Type of Enrollment: Basic Family  
Cost Per Pay Period: \$99.91

History Change

**FEHB Pending Transaction**

You have no pending transactions.

Void

**TSP Current Coverage**

You are currently contributing to TSP.

Retirement Plan: FERS  
Contribution Amount: \$0.00  
Contribution Percent: 12%

History Change

**TSP Pending Transaction**

You have no pending transactions.

Void

To start, stop or change TSP click change.

**FEGLI Current Coverage**

All FEGLI amounts and costs are based on your age as of the pay period ending date: 04/11/2009.  
Enrollment Code: CD

| Coverage Type             | Amount of Coverage | Cost Per Pay Period | Multiple Factor |
|---------------------------|--------------------|---------------------|-----------------|
| Basic                     | \$104,400.00       | \$13.05             | n/a             |
| Option A                  | \$0.00             | \$0.00              | n/a             |
| Option B                  | \$0.00             | \$0.00              | 0               |
| Option C                  | \$0/\$0            | \$0.00              | 0               |
| Total Cost Per Pay Period |                    | \$13.05             |                 |

History Change

**FEGLI Pending Transaction**

You have no pending transactions.  
If you completed a FEGLI transaction that is effective today there will be no pending transaction.

Void

Important: Print a copy of the completed transaction form using the 'Printer Friendly?' version to serve as your receipt of transaction until the change becomes effective.

### Transactions : Change

Select the type of TSP transaction you wish to complete:

Stop Contributions  
Stop Contributions  
Election

Begin

Cancel

Stop is to stop existing contributions.  
Election is to change or start contributions.

Logout

Transactions

None  
None  
None

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)

Custom Text trans-change.aspx

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**Transactions**

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tact your [DLA](#)  
[sources Center](#)

### Transactions : TSP : Election

You may contribute up to 100% of your basic pay or a dollar amount.

I wish to contribute the following PERCENTAGE of my basic pay per pay period to my Thrift Savings Plan account.

I wish to contribute the following AMOUNT of my basic pay per pay period to my Thrift Savings Plan account.

Enter amount or percent based on selection above:

The amount you elect to contribute is per pay period. No contribution will be deducted if the amount you specify exceeds the amount of your pay after all other mandatory deductions have been taken.

You will need to elect a percentage or dollar amount.

Enter the percent or dollar.

## Transactions : Summary & Signature (TSP)

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Logout

Transactions

- None
- None
- None

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your DLA sources Center

### TSP Transaction Information

Based on the transaction information you entered, your projected TSP enrollment is:

### TSP Pending Transaction

Effective Date: 04/26/2009

Transaction: Election

|                      |        |
|----------------------|--------|
| Contribution Amount  | \$0.00 |
| Contribution Percent | 13%    |

This is a summary and electronic signature of your transaction. You will receive a receipt on the next page and option to print a copy of your TSP-1.

### \*\*\* ELECTRONIC SIGNATURE \*\*\*

**WARNING: Be advised that any false statement in this transaction, or which misrepresentation, is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both, according to federal law. Additionally, this may result in disciplinary action up to and including removal from Federal employment.**

**By clicking the 'Process Transaction' button, I understand that my EBIS web site login information is my electronic signature in effecting this transaction.**

|  |  |
|--|--|
| <input type="button" value="Process Transaction"/> | <b>I acknowledge and wish to PROCESS THIS TRANSACTION.</b>     |
| <input type="button" value="Cancel Transaction"/>  | <b>I do not acknowledge and wish to STOP this transaction.</b> |







My Benefits



Calculators



Transactions



Forms



HR Link



My Profile



Inform

My Personal Statement of Benefits

Printer Friendly Version

- Health Insurance
- Social Security
- TSP
- Death and Disability
- Other

Insurance Benefits

**BENEFITS**

As an employee, you are entitled to enroll yourself and any eligible family members in a health plan offered under the Federal Employees Health Benefits (FEHB) program, unless your position is excluded from coverage by law or regulation. If you meet the requirements, you will be eligible to continue your health insurance into retirement.

|                              |  |
|------------------------------|--|
| Plan Name                    | Blue Cross and Blue Shield Service Benefit Plan - Nationwide |
| Plan Code                    | 112  |
| Type of Enrollment           | FFS  |
| Employee Cost Per Pay Period | \$99.91  |
| Agency Cost Per Pay Period   | \$299.75   |

The Plan Name is the FEHB plan in which you are currently enrolled as of the pay period ending date of this statement of benefits. The Plan Code is the enrollment code assigned to your plan name and type of enrollment. The Type of Enrollment covers only you as Self Only or covers you and your eligible family members as Self and Family. The Employee Cost Per Pay Period is your share of the cost of the premium for your FEHB coverage. The Agency Cost Per Pay Period is your agency's share of the cost of the premium for your FEHB coverage.

**LIFE INSURANCE BENEFITS**




If you are eligible, you are automatically enrolled in Basic insurance under the Federal Employees' Group Life Insurance (FGLI) program unless you waive this coverage. If you have Basic insurance, you may also elect Optional insurance. There are three types of Optional

The benefit icon is your personal statement of benefits, covering what your benefit package consists of while working for the federal government.


For login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)

## Calculators



### Retirement Calculators

-  Quick Retirement Estimate  
A simple 3-step tool to estimate the most common retirement benefits.
-  Advanced Retirement Estimate  
A comprehensive tool for estimating types of retirement, disability service, and survivor benefits.
-  High-3 Average Salary  
Use your salary history to calculate the average of your highest 3 years of salary.

### TSP Calculators

-  TSP Annuity Estimate  
A tool to estimate TSP annuities.
-  TSP Projected Account Balance  
Use this tool to project account balances into the future.

### Other Calculators

-  Severance Pay  
A tool to estimate a benefit payable to you due to an involuntary separation.
-  FEGLI Calculator (Off-Site)  
This calculator allows you to determine the value of various combinations of FEGLI coverage and calculate the premiums.

The calculator icon allows you to use the data you updated in your profile icon to calculate future benefits. The FEGLI calculator will link you to the OPM website ([www.opm.gov](http://www.opm.gov)) to help you determine the amount and associated cost for life insurance options.

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Logout

Transactions

None  
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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)

### Forms

#### Retirement Related Forms

- OPM1515 - Military Service Deposit Election
- RI20-97 - Estimated Earnings During Military Service
- SF2801-1 - Certified Summary of Federal Service (CSRS)
- SF2801-2 - Spouse's Consent to Survivor Election (CSRS)
- SF2801 Schedules A,B,C - A- Military Service Information, B- Military Retired Pay, C- Fe
- SF2801 Schedule D - Agency Checklist of Immediate Retirement Procedures
- SF2801 - Instructions
- SF2801 - Application for Immediate Retirement CSRS

Logout

actions

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The forms available from icon are PDF and/or PDF able documents. These DO NOT automatically u any systems. You must complete, print, sign, dat mail, scan/email or fax th document to your service DHRC Benefit Team. For current contact informat visit <http://www.hr.dla.mil/cntct>

The forms attached have been placed here for your convenience in completing your retire



## My Profile

### Personal Data

-  My FERS Covered Earnings
-  My Social Security Covered Earnings
-  My TSP Account Balance

Your profile requires you to manually enter your FERS covered earnings (from your LES), SS earnings (from your PEBS statement from the SSA) and TSP (from your TSP account at [www.tsp.gov](http://www.tsp.gov)). Your profile is only as good as the data you keep up-to-date.

See

Logout

Transactions

None  
None  
None

Dates

0  
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News

login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your [DLA sources Center](#)

In order to have this information populate into your current estimate you must update utilizing your current TSP or Social Security statement calculations are contingent upon the information that you have entered.

Bees

Logout

Transactions

None

None

None

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login or other questions, email administrator at mil. For benefits (Retirement, insurance, benefits, etc) contact your DLA sources Center

## Information

Search the Information Library: By Keyword

Directory: The Information Library is organized by topic.

### Retirement

#### Civil Service Retirement System (CSRS)

##### CSRS Types of Retirement

-  [Voluntary Retirement](#)
-  [Early Retirement](#)
-  [Discontinued Service Retirement](#)
-  [Disability Retirement](#)
-  [Deferred Retirement](#)

##### CSRS Creditable Civilian Service

-  [Overview](#)
-  [Leave Without Pay \(LWOP\)](#)
-  [Receipt of Workers' Compensation Benefits](#)
-  [Part-Time Service](#)
-  [Intermittent Service](#)
-  [Deposit Service](#)
-  [Redeposit Service](#)

##### CSRS Creditable Military Service

-  [Overview](#)
-  [Military Retirees](#)
-  [Members of the Military Reserves](#)
-  [Members of the National Guard](#)
-  [Post-1956 Military Service Deposit](#)

##### CSRS Retirement Contributions and Refunds

The information icon is a library of benefit related trivia. This should be the first place you look if you have a question on your benefit package and then contact one of our human resource specialists for specific guidance.