



Flex Open Enrollment in ESS

Employee Self Service ess.cityofmadison.com

Employee Self Service (ESS) is an external website that allows employees access to their employment information such as previous pay stubs and W2's through their personal computers or mobile devices.

If you've never logged into ESS before, the user ID is the employee number displayed on the upper left hand corner of your pay stub. The first time you log in, your password will be the last 4 digits of your social security number. You'll then be prompted to change the password. If you've forgotten your password and need it reset, please contact the City IT Helpdesk at 608-266-4193 or review the provided [guide](#). For additional assistance, please contact Central Payroll at payroll@cityofmadison.com.

Employee Self Service

Benefits

Open Enrollment

Expense Reports

Pay/Tax Information

Personal Information

Time Off

Time Entry

ESS is used to process the annual open enrollment changes related to our Flex Medical and Dependent Care programs. Employees may use ESS during the Flex open enrollment period of November 10 through November 26, 2025 to enroll, change or cancel flex benefits for the 2026 plan year.

If you are not eligible to participate in the flex medical and dependent care programs, you will not have benefit information available to you in ESS.

Participation in Flex Medical or Dependent Care benefits *must* be elected each year. If you do nothing, you will not have flex benefits for 2026.

Please ensure you have a valid email address provided under Personal Information. This is used for your confirmation email of your open enrollment elections as well as any other ESS initiated employee changes and will be provided to the Flex vendor for your account setup.

The Open Enrollment module is located under the Benefits section of ESS. Click on **Benefits** and then select [Open Enrollment](#) to proceed.

All other changes in the current year due to a qualifying event should be processed through HR. Screenshots provided below may be from a prior benefit year. The enrollment steps have not changed.

Existing Benefits

! You must complete your [open enrollment](#) before 11/19/2021.

DELTA DENTAL INSURANCE
DENTAL SINGLE - EMPLOYEE ONLY - \$34.86



Estimated total cost per pay period

\$34.86

Open Enrollment – Make Elections

 Make a selection for each benefit, then click "Continue". *You must submit this enrollment by 11/18/2022.*

Welcome to Flex Open Enrollment for the 2023 Plan Year!

- You will use this program to enroll in Flex Medical and/or Dependent Care coverage for the 2023 benefit year.
- Amounts elected are the per pay period amounts and are withheld on each of the 26 biweekly payroll checks.
- To determine your pay period amount based on an annual amount, divide it by 26 and round up to the nearest cent.
- The annual limit for Medical is \$3050 and the annual limit for Dependent Care is \$5000.
- Your final deduction of the year may be adjusted to comply with the annual limit.
- The first deductions for 2023 elections will be on the check dated January 6, 2023.
- Questions? Please reach out to benefits@cityofmadison.com or 608-266-4615.

FLEX MEDICAL

Election not made

Existing benefit: FLEX MEDICAL – \$109.62

DECLINE

SELECT 

FLEX DEPENDENT CARE

Election not made

Existing benefit: Declined

DECLINE

SELECT

Estimated total cost per pay period

\$0.00

The [paycheck simulator](#) can show how this affects your net pay.

CONTINUE

To decline benefits for the 2026 plan year, choose **DECLINE** for the appropriate benefit.

To enroll in 2026 coverage, choose **SELECT** on the appropriate benefit type to enter your per pay period election amount.

Benefits – FLEX MEDICAL

[HR Flex Website](#) | [TASC](#)

 Enter your PER PAY PERIOD amount below. The 2023 annual limit for medical is \$3050 and the City has 26 pay dates a year. To elect the maximum amount, enter 117.31 for your per pay period amount below ($3050/26 = 117.31$).

☒ FLEX MEDICAL

Pay period employee cost \$109.62

Employee annual cost \$0.00

Amount

117.31

☐ I Decline

CANCEL

CONTINUE

Please note the amount you elect is the *per pay period amount*. To figure out the per pay period amount based on an annual amount, divide the annual amount by 26 and round up to the nearest cent.

If you wish to elect the maximum amount of \$3400 for 2026 Flex Medical coverage, enter 130.77 as your PER PAY PERIOD amount.

If you wish to elect the maximum amount for \$7500 for 2026 Flex Dependent Care, enter 288.47 as your PER PAY PERIOD amount.

Once you have completed your elections, you may preview how the cost of the premiums will impact your net/take home pay with the paycheck simulator tool or select **CONTINUE**.

Estimated total cost per pay period	\$105.77
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The [paycheck simulator](#) can show how this effects your net pay.

CONTINUE

The “pay period” or “per pay period” costs noted throughout the ESS Flex open enrollment program reflect the contribution amounts withheld on the first 26 regular paychecks dated in 2026.

After selecting **CONTINUE**, you’ll be given a chance to review your open enrollment elections. The annual amount listed reflects the 26 biweekly contributions totaled. The annual amounts displayed may total a few cents more than the IRS designated limits. Payroll will automatically adjust the last contribution of the year to maintain compliance with the IRS mandated Flex Medical and Dependent Care limits.

To make further changes, you may select **MODIFY**. When you’re satisfied with your changes, **SUBMIT** them for processing.

Review your enrollment

FLEX MEDICAL	
FLEX MEDICAL	
Pay period employee cost	\$109.62
Annual employee cost	\$2,850.12
Election amount	\$109.62
FLEX DEPENDENT CARE	
Declined	
TOTAL PAY PERIOD EMPLOYEE COST	\$109.62
TOTAL ANNUAL EMPLOYEE COST	\$2,850.12

CANCEL MODIFY **SUBMIT**

You’ll be presented with a confirmation screen. You may print/save for your records. You’ll also receive a confirmation email to the address stored under the Personal Information section of ESS. It is the same email you receive your biweekly pay statement if you participate in direct deposit.

Confirmation

 Your enrollment was submitted successfully. You can make changes until your choices have been approved. You may want to print this page for your records.

The pay check of January 7th, 2022 will reflect the first deductions for the elected Flex Medical and Dependent Care coverage.

FLEX MEDICAL

 Reply  Reply All  Forward  IM

 NoReply@MUNIS.com

Benefit Enrollment Summary:

Employees may continue to make changes to their Flex Medical and Flex Dependent Care elections from November 10, 2025 through November 26, 2025 through the ESS open enrollment program. Once the open enrollment period is over, you will no longer be able to make elections in ESS.