



Middle States Association

OFFICE OF HUMAN RESOURCES
25 CORPORATE PARK DRIVE

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Health Insurance Enrollment for WCT Members:

**You will need to complete the steps below to register in health insurance. Please complete ASAP, but definitely within 30 days of hire date. Your insurance will be effective _____.
(Fill in based on orientation)**

Step 1: Go to the following website: <https://ops.employeenavigator.com/benefits/login.aspx>

Step 2: Click on “Register as a New User”

At this point, you will create your username and password so you can proceed.

You will need the following information to create your user name and password:

First Name

Last Name

Company Identifier = WCSD

Last 4 Digits of Social Security Number

Birth Date (mm/dd/yyyy)



PLEASE NOTE – use your name as it appears on your WCSD pay stub, or information provided at time of hire -when enrolling!

Step 3: Click on “Next” to proceed and follow the on-screen instructions.

PLEASE NOTE – your password will require 6 characters inclusive of letters, a number and a symbol

Please note that if you are opting out of insurance, you need to still go online and opt-out. You will also need to complete the form provided at time of hire and submit per the instructions listed to be enrolled in the buyout.