Workday **Open Enrollment** Instructions for Desktop

All Items	45 items	Change Benefits for Open Enrollment
Q Search: All Items	†	Created: 01/31/2024 Effective: 04/02/2024
dlà <u>Advanced Search</u>		Open Enrollment April 1 - March 31 01/31/2024-02/01/202
Annual Re-Enrollment:	☆	Choose new plans or re-enroll in the plans you currently have

2 Click **Enroll** in the benefits you would like to enroll in.

Health Care and Accounts		
Wedical Waived	Dental Waived	Vision Waived
Enroll	Erroli	Enroll
Health Care Flexible Spending Account	Dependent (DAY) Care Flexible Spending Account Waived	
Enroll	Enroll	

3 Click Select on the plan you would like to enroll in and the click the "Confirm and Continue" button on the bottom of the page.

If you are adding any dependents to your insurance, **check the box next to their name**. Dependents are not automatically added. You must enroll your dependents to your plan. Please ensure their address is correct in Workday for Dependent Wrap coverage.

	Select	Dependent	Relationship	Date of Birth	
			Spouse		*
			Child (Natural/Adopted)		
			Child (Natural/Adopted)		-
l	4			•	





4 Add any Social Security Numbers if prompted by Workday and then click the Save button. Continue through each benefit in the open enrollment event until all desired benefits are enrolled in.

pen Enrollment April 1 - March 31				XIII
jected Total Cost (Monthly) 22.14				
Health Care and Accounts				
Medical Security Health Plan Enrich HMO HDHP Elite UPDATED	Dental Delta Dental UPDATED		Vision Delta Dental Vision UPDATED	
Cost (Monthly) Included	Cost (Monthly)	\$50.14	Cost (Monthly)	\$12.88
Coverage Employee + Family	Coverage	Family	Coverage	Employee + 1
Dependents 3	Dependents	3	Dependents	Ť
Manage	Manage		Manage	,
Health Care Flexible Spending Account DB: - Direralfied Benefit Services Inc (MEFBA) UPDATED	Dependent (DAY) Care Flexible Sp Waived	ending Account		
Contribution (Monthly) \$41.67				
Manage	Enroll			
mandye				

5 Group Term life insurance and Travel Accident insurance are MCHS provided benefits so you would only need to review beneficiary information (if needed). If you would like to make changes, you can click on the "Manage" button to review.

Insurance		
Group Term Life Cigna 1.25 x Salary (Employer Coverage 1.25 x		Supplemental Life Cigna (Employee) Cost (Monthly) \$12.00 Coverage \$150,000
Manage	Manage	
		Manage
Supplemental Life Spouse Cigna (Spouse)	Supplemental Life Child Cigna (Child)	Voluntary AD&D Berkley (Family)
Cost (Monthly)	.40 Cost (Monthly) \$0.80	Cost (Monthly) \$2.25
Coverage S:	000 Coverage \$10,000	Coverage \$50,000
Manage	Manage	Manage
Short Term Disability Cigna 20% / 60% (Employee)	Long Term Disability Group 3 Cigna (Employee)	
Coverage 70% of	ary Coverage 60% of Salary	
Manage	Manage	

6 Supplemental Life insurance (employee, spouse, child) can be enrolled in at any time during the year, but you have the option of enrolling during the open enrollment event. Please be aware if you are newly electing or increasing the insurance amount on the benefits, that you would be required to complete a health questionnaire from New York Life (our life insurance plan administrator) to be approved.

Short Term Disability, Long Term Disability and Employee Assistance are provided by MCHS to employees, so no action is required under these benefits.

Cigna 70% / 60% (Employee)	70% of Salary	Coverage	Long Term Disability Group 3 Cigna (Employee)	60% of Salary
Manage			Manage	
Additional Benefits				
Employee Assistance Plan Employee Resource Center (EAP)				
Manage				

8 If you have finished your enrollment, click on the "Review and Sign" button at the bottom of the page. Otherwise, you can click the "Save for Later" button and come back to your open enrollment event until Friday, March 8, 2024, at 5 p.m.

9 Carefully review the final page of open enrollment to ensure you are enrolled in your desired benefits/plans, any dependents that you would like to have enrolled in those plans.

Scroll to the bottom of the page and review the Electronic Signature requirement. Once you have read and agree to the terms, click the "I Accept" button and then the "Submit" button.

11 Once you submit the event, you can review your elections by clicking on the "View 2024 Benefit Statement" button or you can click "Done" to exit the event. You can screenshot or print this page for your records/verification of your enrollment.

How to change your open enrollment benefits

- 1 If you submitted your open enrollment event and decide to make changes while open enrollment is still occurring, you can get back into the event by logging into Workday and clicking on the **Benefits** application under the Menu.
- 2 Scroll to the bottom of the screen and then click the **"Change Open** Enrollment" button.

hange	View
Benefits	Benefit Elections
Beneficiaries	Benefit Elections as of Date
Dependents	
urrent Cost	
	n Enrollment
ı	Benefits Beneficiaries Dependents urrent Cost





32112-000_Desktop