During Open Enrollment, all benefited employees will enroll in the benefits they choose for the following plan year. Changes made during open enrollment will take effect on 7/1/2021.

Even if you are continuing the same coverage as the previous year, you still need to review and confirm your elections.

The effective date for coverage is July 1, 2021.

If you have a life event that changes your medical/dental/vision benefits AFTER the deadline for Open Enrollment, but BEFORE the changes that take effect July 1, 2021, you will need to REENROLL in Open Enrollment. This will come to your Workday Inbox.

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What You Need to Begin

During open enrollment, you will verify/update and submit three things:

1. Modifications to medical, dental, vision benefits: elect or waive coverage, change plans and/or add/drop dependents.

2. Changes to applicable Life Insurance Options and confirming beneficiaries for Life insurance.

3. Flexible Spending Accounts: Must be re-elected each year.

You will see options that are available to you. If you have questions about your eligibility, contact your UPG Benefits Specialist at 434-980-6101 or by email at R Benefits (if emailing from your Health System email).
If you are adding dependents, you will need his/her name, date of birth and social security number, and if adding a spouse to medical coverage you will also need to complete a spousal affidavit that you will receive through Workday.

### Elect / Waive Medical, Dental, Vision Insurance

1. Sign into Workday and go to your Workday Inbox.
2. Go to the message titled Open Enrollment Change: Your name on 07/01/2021 and click on that item.
3. Scroll down to see the benefit plans available to you, radio buttons to elect or waive coverage, the dependents enrolled, coverage type, your cost and the employer contribution.
   - Medical – UPG - Anthem PPO – Healthkeepers
   - Medical – UPG - Anthem PPO - KeyCare Plus
   - Dental – UPG - United Concordia DPO – BuyUp
   - Dental – UPG - United Concordia DPO - Core
   - Vision – UPG - Anthem Uniview Vision VIS

To make changes to coverage level, click on the box under Coverage and select the option that matches your needs.
Define who should be covered by clicking on the menu button under Enroll Dependents.

If you are adding someone already listed as a dependent, click Existing Dependents and put a check in box beside those who should be covered by plan.

Check or uncheck the box next to the name. If you are removing them from coverage, you can click the x beside the name.

- If the person you want to add to coverage is not listed, you can click Add My Dependent From Enrollment. See the section below on adding a dependent for more details (starting with Step 3).

### If Adding Dependent

During Open Enrollment, you can add or drop dependents from coverage for the plan year. After Open Enrollment, you can only make changes to dependents if there is a qualifying life event.

1. Open the Open Enrollment message from Inbox.
2. Change Coverage in the plan you wish to modify to reflect the coverage needed (i.e., from Employee Only to Employee + Spouse)
3. From the menu button under Enroll Dependents, click Add My Dependent From Enrollment.
4. Answer if you wish to add the new dependent as a beneficiary (Yes or No).
5. Fill out the required fields denoted with *. (Name, relationship, date of birth, gender, student status (for children), National ID (Social Security Number).
6. Continue the process on page 6, starting with step 3.

Once you Submit changes to open enrollment, and add a spouse to cover for medical benefits, you will receive an Inbox task to complete. This will be the spousal affidavit and it must be completed in order to finalize your benefit elections for Open Enrollment.

Spouses who have access to affordable health care coverage that provides minimum value through his/her employer, and spouses who are employed in a benefits-eligible position by UVA cannot be added as dependents for medical insurance. Employees who want to cover their eligible spouse on the Health Plan must complete the Spousal Affidavit.
Benefits: UPG Open Enrollment

Staff & Team Member

**Elect / Waive Flexible Spending Accounts**

You can elect or waive Flexible Spending Account Elections for Health Care FSA or Dependent Care FSA. Note the minimum and maximum ranges.

**FSA’s MUST be re-elected each year, even if you are not making changes to your contributions. If you do not take any action, you will not be enrolled in Flexible Spending for the new plan year beginning on July 1, 2021.**

1. Select **Elect** or **Waive** radio button.

2. If you select **Elect**, you will define how much you want to contribute for the year **OR** per paycheck. The other box will auto populate.

3. If you **Waive** coverage, you don’t need to do anything else.

4. Click **Continue**.
Other Life Insurance Elections

If you are eligible for other insurance options (e.g., supplemental life, etc.), you will be presented these options now.

1. Review the coverage for which you are eligible.

2. If there are options to modify coverage, make any changes you require. To make a change, click the menu icon to make a new election. Click Continue.

3. Define the beneficiary for the elected insurance plans (as needed). There must be at least one primary beneficiary listed:
   - If there is a name listed and you do not wish to make a change, click Continue.
   - If there is no name listed; you wish to make a change to beneficiaries; or you want to distribute the funds differently, follow the steps in the next section. Otherwise, go to Review and Submit.

Add Beneficiary

The next step is to add a beneficiary.
1. Under the beneficiary, click the + icon. (if adding a person to the list). If you are adding the first person, simply click the menu button.

2. Click **Beneficiary Persons** and select the person you wish to choose.

3. If you wish to add a person, click **Create**.
   - Choose **Add Beneficiary** to choose someone who is not currently associated with any of your benefits.
     
     If you add a beneficiary, you will be directed through a process of adding them. It will require additional information including name, address, and date of birth.
   
   - Choose **Add Beneficiary Using Existing Contact** to choose someone who is listed in the contacts you have in Workday.
   
   - You can choose **Add Trust** to define a trust. This will require the Trust Name, Trust ID, Trust Date, and Trustee Name.

4. If you already have a trust set up in the system, you can choose **Trusts**, then select the trust.
5. Define the primary (and contingent, if applicable) percentages for each insurance benefit. Each benefit must total 100%.

Note: The Supplemental Life and Supplemental AD&D must be covered for the same amount. The Spouse Life and Spouse and Spouse AD&D must also have matching coverage levels.

If you are currently waived, or enrolled in Principal’s supplemental life insurance, you can add/increase coverage in the amount of $20k for self or $10k for a spouse, or flat $20k for a dependent child. These amounts are on a guarantee issue basis, without evidence of insurability (EOI) provided you don’t exceed $200k on yourself, or $30k for a spouse. You must submit an EOI form to the vendor if you are requesting coverage above the guarantee issue, and your defaulted enrollment will reduce to the guarantee issue amount until additional coverage is approved by the vendor. The EOI form will come to your inbox in Workday to print for submittal.

Review and Submit

1. Review your elected and waived benefits for accuracy. You can use Go Back to make any changes.
2. Respond to any error messages.
3. Attach any required documentation in the Attachments section.
4. Read the information in the Electronic Signature section, including any linked documents.
5. Use the Save for Later button to save your options in the Inbox to revisit at a later time but be sure to complete before the deadline.
6. If all elections look correct, click the I Agree checkbox and Submit

Electronic Signature

Eligibility is immediate but it may take up to 3 weeks for vendors to learn of your new eligibility.

You can use Bright Horizons back-up care to access affordable, temporary care for loved ones of any age or for yourself. For details visit: [link]

The Faculty and Employee Assistance Program (FEAP) provides comprehensive, onsite employee assistance which helps employees identify and improve employee retention. For details visit: [link]

AUTHORIZATION: I authorize deductions from my earnings for all contributions to any Group or Voluntary Plans and programs I elect during this enrollment.

Section 125: Enrollments in pre-tax plans can only be made during new hire eligibility periods, annual open enrollment, or for qualifying events. Enrollments at the end of my enrollment and immediately post-paid withholdings in any of the elections are different from the ones I choose so they’ll follow your submission. Dependent documentation and Social Security Numbers (or Tax ID #) are required for all family members covered. I hereby authorize my employer to enroll my eligible dependents. I will have 30 days from my first or qualifying event date to provide the appropriate documentation. Dependents from elected Plans.

HIPAA PRIVACY NOTICE

PLAN DETAILS: I understand information for all Plans and programs are available at [link]. I also understand communication is on file, or through the portal address listed in the payroll system.

Eligibility is immediate but it may take up to 3 weeks for vendors to learn of your new eligibility.

As an employee of UVA Physicians Group you could receive exclusive savings on your auto and home insurance. For program details call [phone number].

AUTHORIZATION: I authorize deductions from my earnings for all contributions to any Group or Voluntary Plans and programs I elect during this enrollment.

Section 125: Enrollments in pre-tax plans can only be made during new hire eligibility periods, annual open enrollment, or for qualifying events. Enrollments at the end of my enrollment and immediately post-paid withholdings in any of the elections are different from the ones I choose so they’ll follow your submission. Dependent documentation and Social Security Numbers (or Tax ID #) are required for all family members covered under Group Voluntary Plans. I understand appropriate supporting documentation is required to enroll my eligible dependents. I will otherwise the Plan will default unenrolled unattainable dependents from enrolled Plans.

HIPAA PRIVACY NOTICE

PLAN DETAILS: I understand information for all Plans and programs are available at [link]. I also understand communication is on file, or through the portal address listed in the payroll system.

I Agree

Submit Go Back Cancel

Print
It is a good idea to print a copy of the Elections Confirmation, to keep for your records.

**Changes Before Deadline**

As long as the open enrollment period is open, you can make changes to your elections. To do this:

1. From the Benefits Application, click on **Change Open Enrollment**.
   
   You will be making changes to what has been previously submitted. Any changes made will need to be resubmitted. If you do not resubmit, the changes will be disregarded, and the previous submission will remain in effect. Click **OK**.

2. Move through the same screens to elect or waive coverage, finally submitting the changes.

3. **Print** the new confirmation of benefit elections.

**Review Elections as of Date**

After your elections have been finalized by Human Resources, you can review your benefit elections as of a future or past date. To do this:

1. From the Benefits Application, click on **Benefit Elections as of Date** button, under **View**.

2. Define the date from when you wish to see the benefits and click **OK**.

You will be able to review your benefits elections from this screen.