

As a new hire, one of your first tasks series of tasks is to complete your I-9, and to select or waive your benefits. You will receive a series of inbox tasks to start the process. You may or may not be eligible for all things listed in this job aid, depending on your organization.

Tasks

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Before You Begin

Once you make your benefit elections, for most benefits, you will not be able to make any changes for the remainder of the calendar year without a qualified life event, or during open enrollment.

Some benefits like the Mandatory Retirement plan are not eligible to change for the duration of your employment. So be sure you have asked any questions about your available options prior to making benefit selections.


Have your dependent(s) information ready before you begin your benefit enrollments, such as dependent(s) date(s) of birth, SSN or visa information, and home mailing address information if different from your own. Documentation requirements will be listed inside the event, and an opportunity to attach documentation will be on the Attachments section at the end of your New Hire enrollment event.

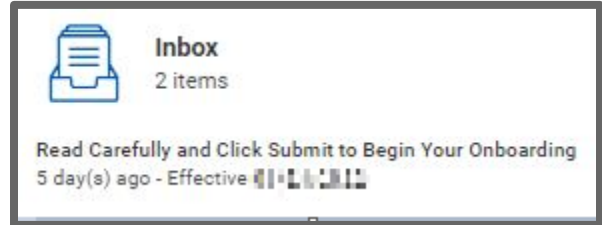
Getting Started

Scroll down to your Workday inbox (near the bottom of your Workday homepage) where you will receive multiple Workday inbox to-do steps as a new hire.

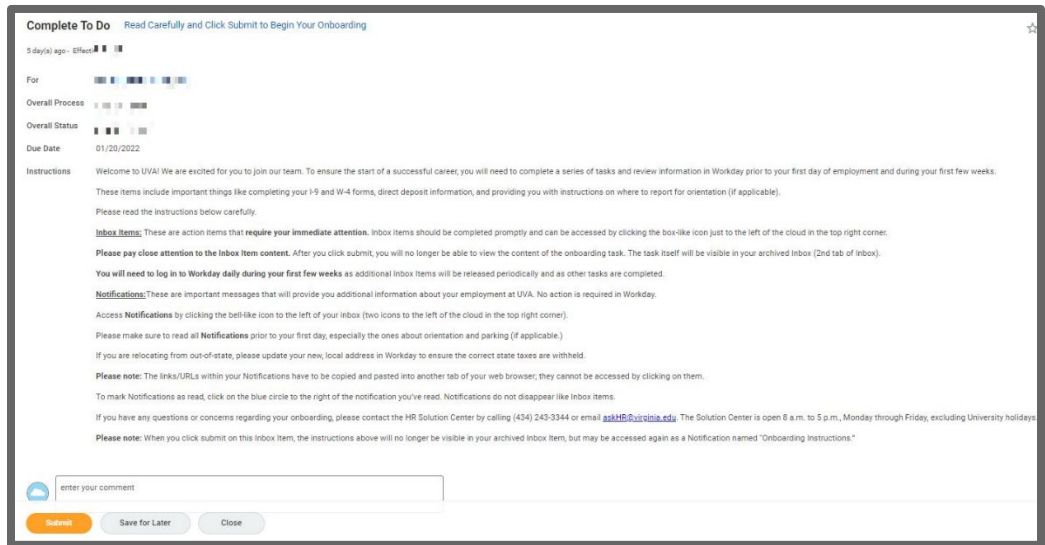
You must complete all steps in your Workday inbox to avoid receiving waived benefits and/or default enrollments.

1. From the Workday homepage, go to your Workday

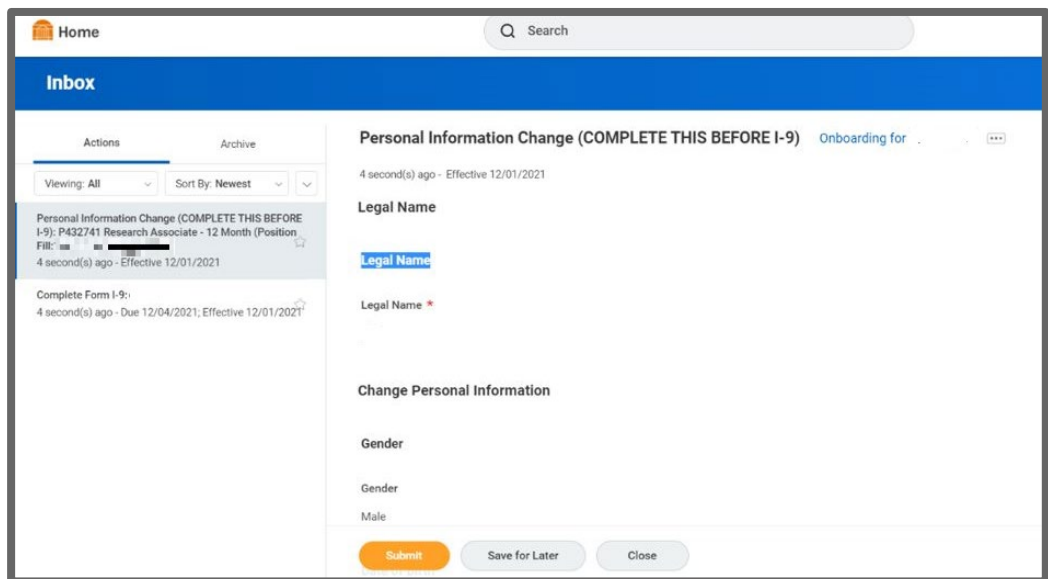
Inbox . Click on the item titled **Read Carefully and Click Submit to Begin Your Onboarding**.



2. Read the **Complete To Do** information provided and click **Submit**.



3. Complete the **Personal Information Change** item and click **Submit**.



- 4. The next task is **Complete Form I-9**. Click on it, and make sure to include your Social Security number entered in the 'US Social Security Number' field.

Exception: If you are in the process of requesting a Social Security Number.

Complete Form I-9

Employment Eligibility Verification
Department of Homeland Security, U.S. Citizenship and Immigration Services
USCIS Form I-9
OMB No. 1815-0047
Expires 10/31/2022

*START HERE Download and read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

Form I-9 Instructions:
ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation
Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.

Last Name (Family Name) * [] First Name (Given Name) * [] Middle Initial [] Other Last Names Used (if any) []
Error: Enter a last name that has only letters, spaces, hyphens, or single quotes. Error: Enter a first name that has only letters, spaces, hyphens, or single quotes.

Address (Street Number and Name) * [] Apt. Number [] City or Town * [] State * [] ZIP Code * []

Date of Birth * [MM/DD/YYYY] U.S. Social Security Number [] Employee's E-mail Address [] Employee's Telephone Number []

I attest, under penalty of perjury, that I am (check one of the following boxes):

- 1. A citizen of the United States
- 2. A noncitizen national of the United States (See instructions)
- 3. A lawful permanent resident (Alien Registration Number/USCIS Number): []
- 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy) Some aliens may write "N/A" in the expiration date field. (See instructions)

Alien authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.

Submit **Save for Later** **Cancel**

- 5. Click **Submit**. In the next section, you will upload documents to finish your I-9.

Maintain Worker Documents for I-9

Scan or take a picture of your acceptable I-9 documents and save them to your computer. Follow the below instructions to upload them under Maintain My Worker Documents.

- 1. From the **Workday search bar** enter '**Maintain My Worker Documents**' and select the report that appears below.

Q **Maintain My Worker Documents** [X]

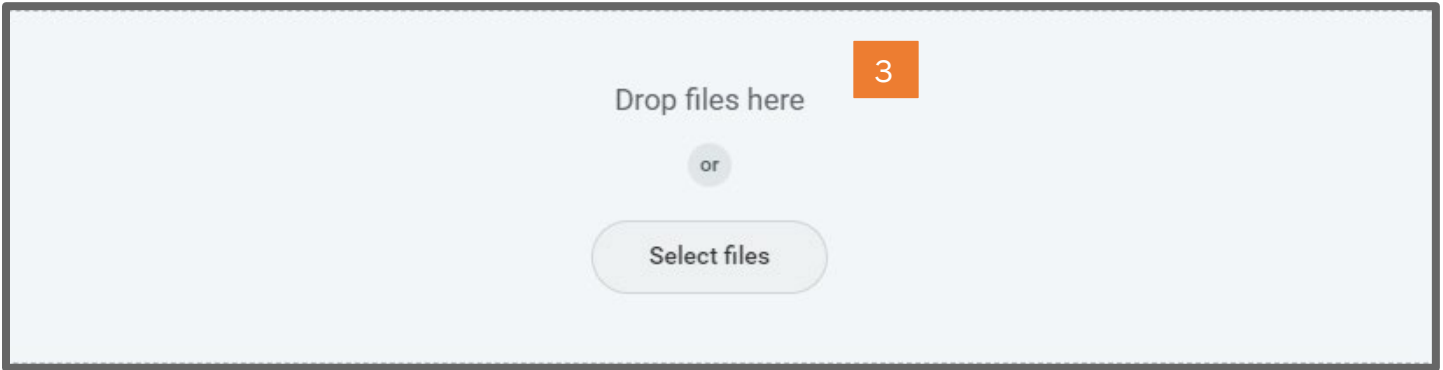
Maintain My Worker Documents Report

- 2. Click the **ADD** button.

Maintain My Worker Documents

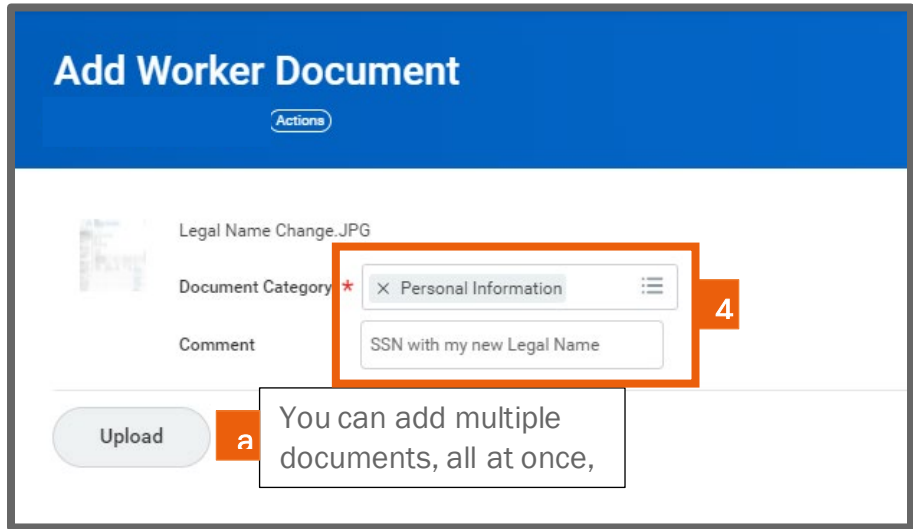
Add

3. Either Drag and Drop your document into the ‘Drop files here’ box or use the ‘Select files’ button to locate the document on your computer.



4. After you’ve selected your document, choose the best Document Category (required) and add a Comment (optional).

a. If you want to upload additional documents, click the **UPLOAD** button, and repeat steps 3-4 until you’ve added all documents you intend to upload.



5. Once you’ve added all the documents you wish to add at this time, click **OK**.
6. Your document has now been added to your Worker Documents! Click **DONE** to exit.

Complete Questionnaire

Benefit-eligible Academic and Medical Center new hire employees, hired after 3/5/2023, will receive a questionnaire presenting the choices below:

- **First of the month following your hire:** You can choose to start your medical, dental and/or vision benefits on the first of the month after you are hired. This may be a good option if you have coverage from a previous employer or are under a family member’s coverage that is still active through the end of the month. If your hire date is on the first day of the month, your coverage start date will be the same as your hire date.

- **Date of hire:** If you need coverage immediately, you have the option to start your medical, dental, and/or vision benefits as of your date of hire. This may be a good option if you are currently not covered elsewhere, and you desire coverage as soon as possible.
- **I do not want medical, dental and/or vision coverage:** You will have the opportunity to officially waive your medical, dental and/or vision benefit options as well as enroll or waive in other benefits during your new hire change benefit event.

Please indicate when you want your Medical, Dental, and Vision Benefit Coverage to begin. Your Medical, Dental, and Vision Benefit Coverage will all have the same beginning date depending upon your election below:
(Required)

Medical, Dental and Vision begins: First of Month Following Hire

Medical, Dental and Vision begins: Date of Hire

I do not want Medical, Dental and/or Vision Coverage

After making your selection, click **OK**.

Look for the change benefit event in your Workday inbox to make your benefit elections. Following submission of the change benefits event, please keep an eye on your Workday inbox as you could receive additional inbox tasks to complete.

Based on the timing of your elections, you may owe retro premiums back to your coverage start date. If so, your payroll deductions may be higher than normal on your early paychecks that include benefit deductions.

Please visit the [New Hire Benefits Page](#) for any questions regarding coverage and how it works with your prior employer.

Complete Benefit Tasks

1. From the Workday homepage, go to your

Workday Inbox . Click on the item titled **Change Benefits for Life Event**.



Note: This may be labeled New Hire Event, Employment Status Change Event or Insurance & Supplemental Retirement Event.



2. Click the **Let's Get Started** button.
3. This benefit election will include (dependent on eligibility) medical, dental, vision, HSA, FSA, mandatory retirement.

- Click on every tile in your event to enroll, waive (where applicable), and view all of your options. Note that most tiles will have 2 pages of information to click through. Medical benefits, like Health, Dental, and Vision benefits will have your available options on the Plans Available Page. And Dependent(s) will be updated on the second page of the tile. Benefits like FSA, and Retirement benefits will have your vendor plan option(s) on the Plans Available Page, and the Contribution amount will be on the second page of the tile.

- Once you select an enrollment plan, click **Confirm and Continue** on your enrollment elections. If you have not yet entered dependents, **add them now**. You will not be able to go back and add them later without a Qualifying Life Event.

Projected Total Cost (Biweekly (Benefits))
\$10.50

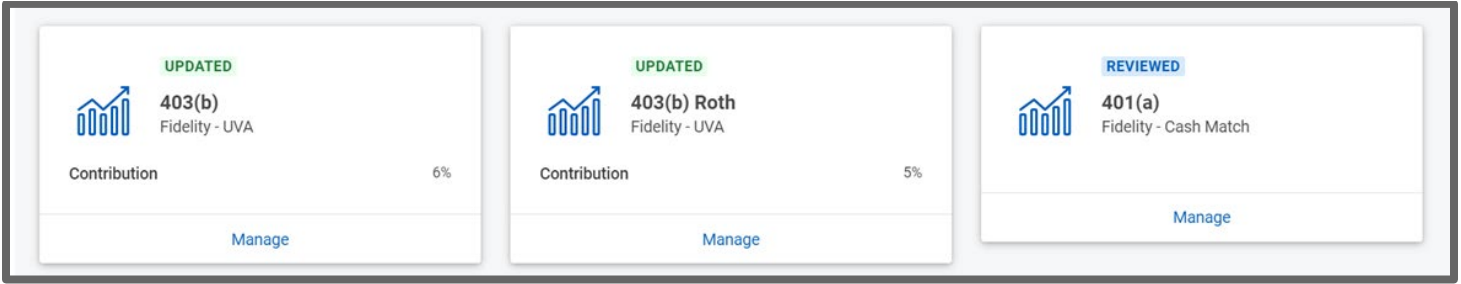
Plans Available

Select a plan or Waive to opt out of Medical. The displayed cost of waived plans assumes coverage for Employee Only.

3 items

*Selection	Benefit Plan	You Pay (Biweekly (Benefits))	Company C (Benefits)
<input checked="" type="radio"/> Select <input type="radio"/> Waive	Aetna POS - Basic Health	\$10.00	\$232.13
<input type="radio"/> Select <input checked="" type="radio"/> Waive	Aetna POS - Choice Health	\$91.50	\$246.63
<input type="radio"/> Select <input checked="" type="radio"/> Waive	Aetna POS - Value Health	\$43.75	\$235.00

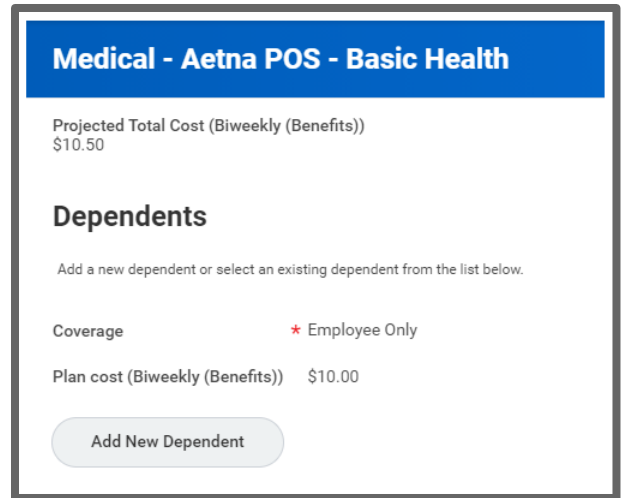
For each tile you change, the benefit status for the tile displays as ‘Updated’, for each tile you open, but do not change, the tile status displays as ‘Reviewed.’



Add Dependent to Health, Dental, Vision and Adding Dependents

Eligible Dependents may be added to your medical, dental, and/or vision insurance. Spouses are eligible for dental and vision insurance but must be eligible for medical based on the working spouse rule. See the eligible dependent and spouse eligibility links in your medical, dental, and vision enrollment tiles for the current health, dental, and vision eligibility rules.

1. To add a dependent, click on the **Add New Dependent** button.

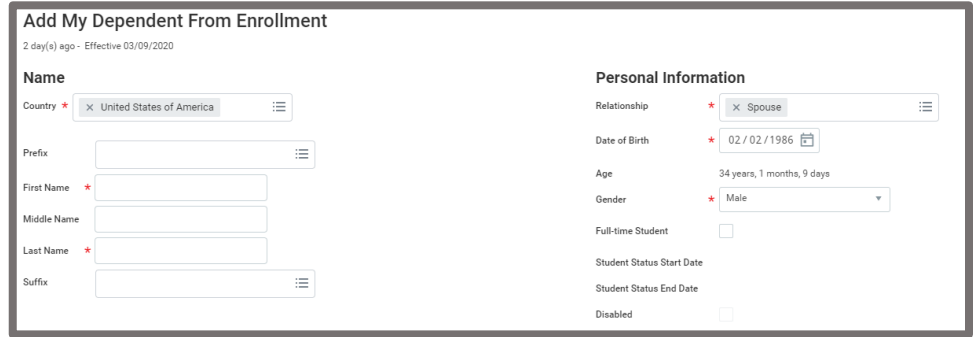


2. Click **OK**.

Note: If you are a rehire (previously employed at UVA), previous dependents show at the bottom. If you wish to add them, check the checkbox in front of the names of the dependents you wish to add. If no dependents display, you must add them using the following steps.

3. Fill out all required fields:

- Full Legal Name
- Gender
- Date of birth
- Relationship
- Contact information (must enter at least one)
- National ID (Social Security Number)



4. Click **Save**.


5. If you did not submit the **Social Security Number (SSN)** on the previous screen, enter it now. If your new dependent is a newborn, enter 'this is a newborn' in the **Reason SSN is Not Available** field.

6. Click **Save**.



7. You will receive a save confirmation.

- You will be returned to the Health Care and Accounts page multiple times. Click on each tile you wish to enroll yourself and your dependents by clicking the **Select** radio button, **Confirm and Continue**.



Your Medical changes have been updated, but not submitted

Next steps: Update another plan, or click Review and Sign once you're ready to submit your changes.

8. Continue with your elections, checking the checkbox in front of your dependents you wish to add to each plan and **Save**.

Flexible Spending Accounts (FSA)/Health Savings Account Plan Elections

To learn more about Flexible Spending Accounts (FSA), or Health Savings Accounts, review the General Instructions help text on the right side of each FSA and HSA tile. Benefit tiles displayed in your new hire enrollment events will vary based on your benefits eligibility.

1. Click the **Select** or **Waive** radio button to begin.
2. Click **Confirm and Continue**.

Health Savings Account

Projected Total Cost (Biweekly (Benefits))
\$26.12

Plans Available

Select a plan or Waive to opt out of Health Savings Account.

*Selection	Benefit Plan	You Contribute (Biweekly (Benefits))	Company Contribution (Biweekly (Benefits))
<input checked="" type="radio"/> Select <input type="radio"/> Waive	Chard Snyder	\$0.00	

Health Savings Account Instructions

General Instructions

Do not waive the HSA. If you do not wish to contribute part of your pay to your HSA, elect the HSA plan with an annual employee amount of \$0.00.

Important Information About Your Health Savings Election

- Please visit the [Benefit Savings Accounts](#) for IMPORTANT UVA plan rules and yearly contribution limits.
- If you wish to contribute part of your pay to your HSA, the minimum annual employee amount is \$120.
- The maximum annual HSA contribution includes both the **employer and employee amounts** and varies depending on your age and your health plan tier (Employee only, Employee + Child(ren), Employee + Spouse, Family). Please review the HSA information on the [HR website](#) to determine your specific HSA IRS maximum.
- It is recommended that you enter the annual amount that you would like to contribute into your HSA and allow the system to calculate the per paycheck amount. By entering an annual amount, you are guaranteed to reach that amount at the end of the year. Entering a per paycheck amount may result in not reaching the full, desired annual amount.
- Your enrollment will be effective on the first of the month after the bank opens your Health Savings Account.

Are You Eligible for a Health Savings Account?

If you answer YES to any of these 8 questions, you are NOT eligible for the Health Savings Account (HSA) benefit and will need to enroll in either the Choice Health or Value

3. You will define how much you want to contribute for the year (Annual) **OR** per paycheck. The other box will auto populate.

**If you elected the Basic Health Plan, you must elect the HSA even if you are not contributing.

4. If you **Waive** coverage, you don't need to do anything else.

Note: Basic Health members must elect the HSA.

5. Click **Save**.

Health Savings Account - Chard Snyder

Projected Total Cost (Biweekly (Benefits))
\$26.12

Contribute

Per Paycheck


Annual Remaining Paychecks 13

Maximum Annual Amount: \$7,200.00

Summary

Contribution (Biweekly (Benefits))	\$0.00
Total Annual HSA Contribution	\$0.00

- 6. You will see a save confirmation.



Your Health Savings Account changes have been updated, but not submitted


Next steps: Update another plan, or click Review and Sign once you're ready to submit your changes.

Mandatory Retirement

If your position is eligible for Mandatory Retirement, this tile will be display as waived. Note: Your new hire enrollment events will vary based on your benefits eligibility.

- 1. On this tile you will see options related to your Mandatory Retirement plan. You must select this enrollment. If you have more than one option in this tile, be sure to carefully make your selection. **This enrollment is an irrevocable decision.** Depending on your mandatory retirement plan eligibility, you may be required to complete addition form(s). If required to complete form(s), you will be notified in your benefit event and with a follow-up task send to your Workday inbox after your benefits are submitted.

Retirement



Retirement Plan
Waived

[Enroll](#)


- 2. In your Retirement tile, on the Plans Available page, you will see a list of your available plan(s) and vendor(s). Click **Confirm and Continue** button to go to the Contribute page.

Plans Available

You must select a plan.

2 items

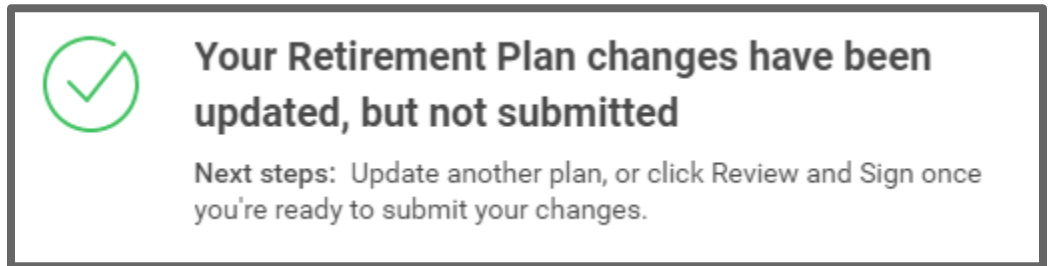
*Selection
<input type="radio"/> Select
<input checked="" type="radio"/> Waive
<input type="radio"/> Select
<input checked="" type="radio"/> Waive



- 3. On the Contribute page, if there is a Contribution (%) field here, then enter the number 5 for your mandatory employee contribution percentage amount. If there is no fill-able field, then the set contribution percentage amount will automatically display.



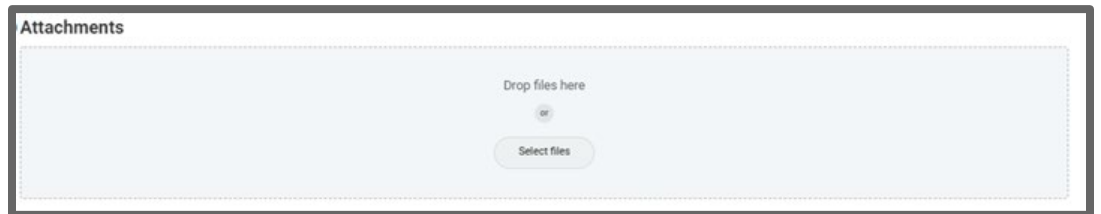
- 4. Click Save.
- 5. You will receive a save confirmation.



View Summary

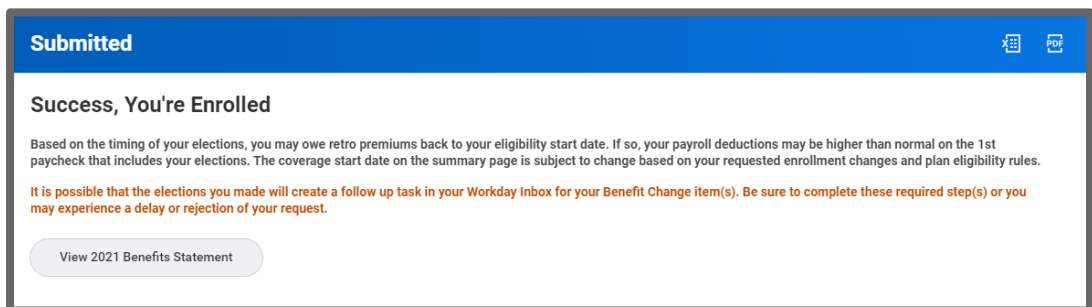
Your elections are not yet complete until you review your elections and click the Review and Sign button. Review all the choices you elected. Once you click Submit, you may not make changes.

- Scroll through the View Summary page to review everything and read the authorization.
- On the View Summary page, use the Attachments section to upload documentation for your dependent(s).



- If you are happy with the change, scroll down to the Electronic Signature and click **I Accept** checkbox.
- Click **Submit**.

- 6. You will receive 'Success, You're Enrolled' confirmation with a link to a **View 202X Benefits**

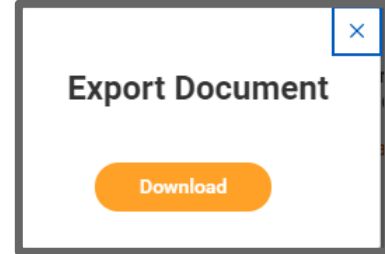


a

Statement, which shows this change only.

Note: This button gives you the option to print your change request. It is a good idea to print a copy of the Elections Confirmation, to keep for your records.

- 7. Click the **View 202X Benefits Statement** button.
- 8. Click the **Print** button.
- 9. Click the **Download** button.
- 10. Your document displays, which allows you to **Open** and **Print**.
- 11. Click the **Home** button.
- 12. Print a copy for your records by clicking **Print**. This will open a PDF of the page that you can either save or print.
- 13. Click **Done**.



HSA and Spousal Affidavit

If you entered a spouse as a dependent or elected an HSA, you need to agree to the HSA Terms and Conditions and UVA Spousal Affidavit. These tasks will come as a separate inbox item after you submit your benefit elections. Refresh your screen to receive this task if you do not see it.

Review the term PDF by clicking on the link that will come to your Workday Inbox.

By clicking "I agree", you are verifying that your spouse is NOT eligible for Health Benefits from his/her employer that provides minimum value, as defined by the Affordable Care Act (for spousal affidavit) and/or your confirmation of eligibility for an HSA.

Review Documents

Review Documents for Benefit Change - Hire : [Redacted] ☆ ⚙️ 🗑️

9 second(s) ago - Effective 12/27/2022

Documents

Document	UVA Spousal Affidavit 01/01/2023
Instructions	Please review the Spousal Affidavit PDF by clicking the link above.
Signature Statement	By clicking "I Agree" below, you are verifying that your spouse is either: 1) NOT eligible for affordable Health Benefits from his/her employer that provides minimum value, as defined by the Affordable Care Act; OR 2) Eligible for Affordable Health Benefits from his/her employer that provides minimum value, as defined by the Affordable Care Act, but ALL of his/her employer's health options are HMOs and the spouse lives outside the HMOs' defined service areas. Documentation from the spouse's employer is required and can be uploaded here in the Attachments section box. If you cannot agree to this statement, please contact the Solution Center at AskHR@virginia.edu or call 434-243-3344.

I Agree

If you cannot agree to this statement, please contact the Solution Center at AskHR@virginia.edu or call 434-243-3344


VRS-65 DocuSign Form

Based on your retirement plan eligibility, you may need to complete the VRS65 form. If you are eligible, you'll receive the VRS65 DocuSign link as a to-do step in your workday inbox. Once the VRS-65 form displays, note the fields in red are required. All other fields are optional.


Review Documents for Benefit Change - ☆ ⚙️ ↗️

Documents


Instructions
 Click on the **blue** DocuSign Link.
 Click the acknowledge checkbox and continue button to open the form.
 Fill out the form following the instructions on page two of the document.
 Click the finish button in the top right.
 Click the submit button on the Workday task to complete the form.
 Return to your Workday inbox for additional to-do steps for your benefits.


 [Click Blue DocuSign button below - Do NOT use this link.pdf](#)


Click the below button to e-sign. Please note that when signing documents you will be leaving Workday Service. You may need to wait a few seconds for the signature status of the documents to be updated in Workday before you can submit the Inbox task. Please wait until you are redirected to Workday before you close your browser.


eSign by DocuSign 

Please Review & Act on These Documents DocuSign

 **Workday DocuSign Integration**
University of Virginia - Workday DocuSign

 [Please read the Electronic Record and Signature Disclosure.](#)

I agree to use electronic records and signatures.  CONTINUE OTHER ACTIONS ▾

 3. Employee Name (First, M. Last) 4. Social Security Number

Complete this form within 60 days from the date you are first employed in a position eligible for the Optional Retirement Plan for Higher Education (ORPHE). Your election on this form is irrevocable and notifies VRS of your choice to be covered by the ORPHE or by the Virginia Retirement System (VRS). See "Completing the Election of Retirement Plan" for more information. If we do not receive this form within 60 days of the date you are first employed, you are covered by the VRS Hybrid Retirement Plan unless you have prior service (see box 5).


- In section 1 of the VRS-65 form, click the down-arrow to select your **Employer Code**.

DocuSign Envelope ID: 63ECB86F-A98F-4533-9132-16251C41A6F6

START

ELECTION OF RETIREMENT PLAN

OPTIONAL RETIREMENT PLAN FOR HIGHER EDUCATION



VIRGINIA RETIREMENT SYSTEM
 P.O. Box 2500 • Richmond, Virginia 23218-2500
 Toll Free 1-888-827-3847
 Fax 804-786-9718
www.varetire.org

1. Employer Code
-- select --

2. Empl -- select --
30207 - Academic
30209 - Medical Center
30245 - Wise for

Complete this form within 60 days from the date you are first employed in a position eligible for the Optional Retirement Plan for Higher Education (ORPHE). Your election on this form is irrevocable and notifies VRS of your choice to be covered by the ORPHE or by the Virginia Retirement System (VRS). See "Completing the Election of Retirement Plan" for more information. If we do not receive this form within 60 days of the date you are first employed, you are covered by the VRS Hybrid Retirement Plan unless you have prior service (see box 5).

2. Enter your **Social Security Number** in section 4.

3. Complete section 5, only if you have **prior state service**.

4. Enter your **hire date** or **first day of employment** in Section 6.

5. In section 7, the **Employee Statement and Election of Plan**, select a radio button from the options presented.

Note: These options are applicable to all staff types, not just faculty.

6. In the **Retirement Plan Election** section, you must choose one. If you select the first option, you must also select the drop-down and choose which plan you wish to enroll.


7. Click the **Sign**  arrow.

8. Click **Finish**.


9. Click **Submit**.

Documents

On this page, you can only download the original, unsigned version of the document.

Document 

Instructions Click on the **blue** DocuSign Link.
Click the acknowledge checkbox and continue button to open the form.
Fill out the form following the instructions on page two of the document.
Click the finish button in the top right.
Click the submit button on the Workday task to complete the form.
Return to your Workday inbox for additional to-do steps for your benefits.



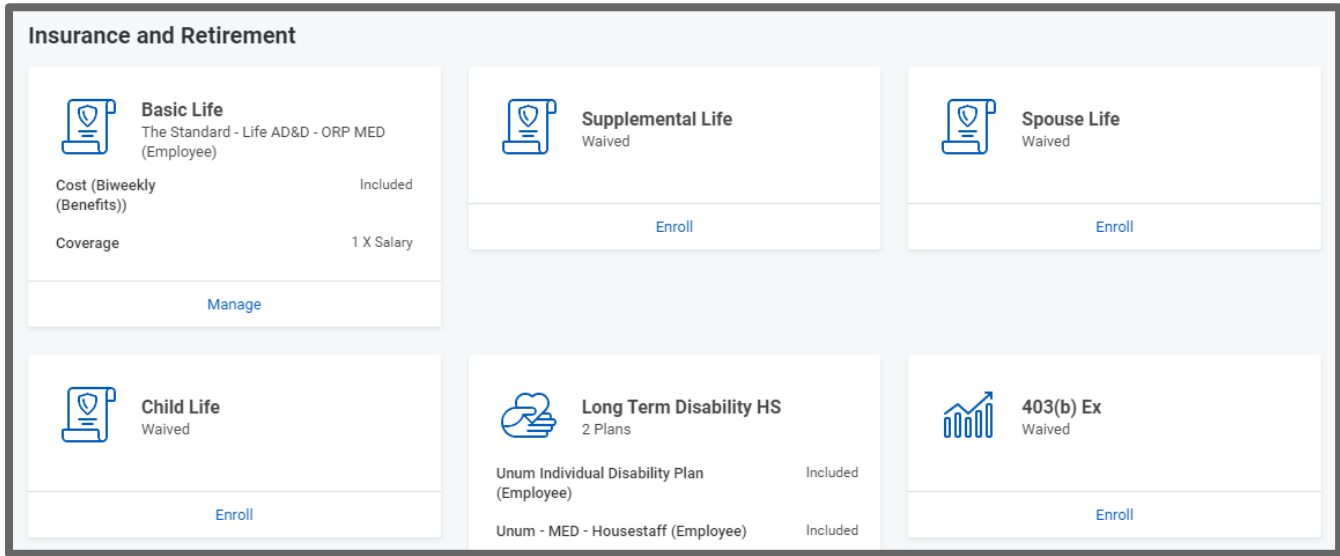
Submit Save for Later Cancel

Insurance and Supplemental Retirement







A Benefit Change-Insurance and Supplemental Retirement inbox task appears in your Workday inbox.

1. Click on the inbox task titled Benefit Change-Insurance and Supplemental Retirement.
2. Click the **Let's Get Started** button.

- Click on each tile in the benefit event. In each tile you will enroll, waive (where applicable), or view all of your options. Note that most tiles will have 2 pages of information to click through. Insurance benefits like life insurance and disability will show your vendor and/or options on the Plans Available page.

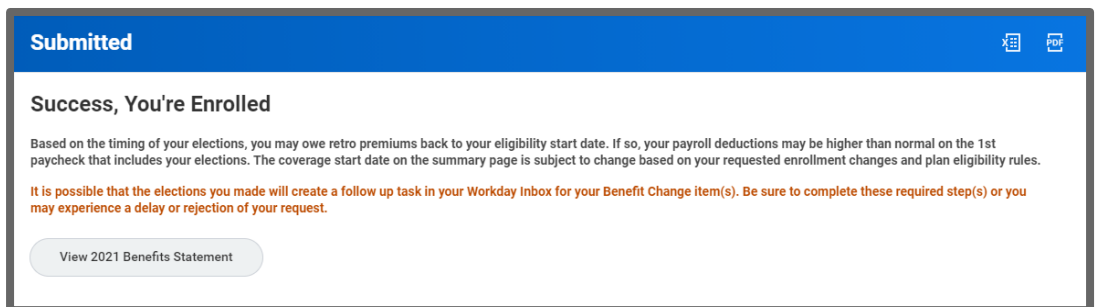


Insurance and Retirement

 <p>Basic Life The Standard - Life AD&D - ORP MED (Employee)</p> <p>Cost (Biweekly (Benefits)) Included</p> <p>Coverage 1 X Salary</p> <p>Manage</p>	 <p>Supplemental Life Waived</p> <p>Enroll</p>	 <p>Spouse Life Waived</p> <p>Enroll</p>
 <p>Child Life Waived</p> <p>Enroll</p>	 <p>Long Term Disability HS 2 Plans</p> <p>Unum Individual Disability Plan (Employee) Included</p> <p>Unum - MED - Housestaff (Employee) Included</p>	 <p>403(b) Ex Waived</p> <p>Enroll</p>

- If any of your benefits allow beneficiaries to be named in the system, that will be on page 2 of the tile. If beneficiaries are named outside of the system, look for links to those instructions inside of that benefit tile.
- Tiles with benefits like supplemental 403(b) retirement will have your vendor and plan option(s) on the Plans Available Page, and the Contribution amount will be on the second page of the tile.
- Click **Confirm and Continue**.
- Depending on which tile you select, additional selections may be necessary.
- Click **Save**.
- You will receive a save confirmation.
- When all changes are added, click the **Review and Sign** button.
- If you are happy with the change, scroll down to the Electronic Signature and click **I Accept** checkbox.
- Click **Submit**.

- You will receive a 'Success, You're Enrolled' confirmation with a link to a **View 2021 Benefits Statement**, which shows this change only.



Submitted

Success, You're Enrolled

Based on the timing of your elections, you may owe retro premiums back to your eligibility start date. If so, your payroll deductions may be higher than normal on the 1st paycheck that includes your elections. The coverage start date on the summary page is subject to change based on your requested enrollment changes and plan eligibility rules.

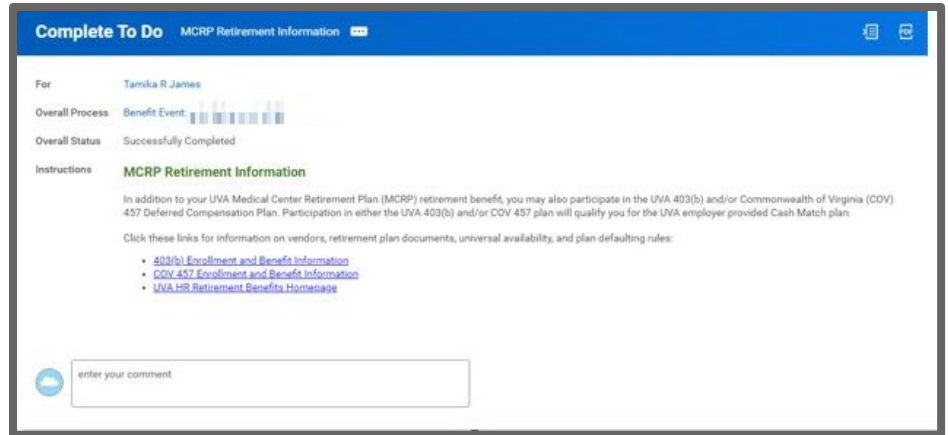
It is possible that the elections you made will create a follow up task in your Workday Inbox for your Benefit Change item(s). Be sure to complete these required step(s) or you may experience a delay or rejection of your request.

[View 2021 Benefits Statement](#)

Mandatory Retirement Information

If you are eligible and have enrolled in any Mandatory Retirement benefit (ORP, MCRP, or VRS) you will receive an important informational to-do step in your Workday inbox.

1. Click the links to read more about your Mandatory Retirement plan, receive any required form(s), and learn more about additional optional benefits.
2. To clear the informational notice from your inbox, click **Submit**.



View Elections and Proof of Coverage

To view your elections, follow these steps.

1. From the Benefits Application, click on **Benefit Elections as of Date** (under View).
2. Enter the first date of your eligibility (typically the first of the month following your start date). Click **OK**.

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

