

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 7/1/2023.

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



Dates of open enrollment are  
**May 22-June 2, 2023**

The effective date for coverage is July 1, 2023.



If you have a life event that changes your medical/dental/vision benefits **DURING OR AFTER** the deadline for Open Enrollment, but **BEFORE** the changes that take effect July 1, 2023, you will need to **RE-ENTER** your Open Enrollment Choices. This will come to your Workday Inbox.

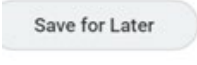
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## What You Need to Begin


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

- Modifications to medical, dental, vision benefits: elect or waive coverage, change plans and/or add/drop dependents.
- Changes to applicable Life Insurance Options and confirming beneficiaries for Life insurance.
- Flexible Spending Accounts: Must be re-elected each year.

- 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.
- If you are adding a spouse to medical coverage, you will also need to **complete a spousal affidavit** that you will receive in your **Workday Inbox**.
- If you open a tile and decide to not make any changes, click the Cancel button to get back out.
- You must click on each tile you wish to change prior to selecting the Review and Sign button, which is done when you are finished updating all your plans.
- Use the Save for Later button  when you're in the middle of selecting your benefits but are not ready to Review and Sign. Save for Later will save you from losing any changes you've selected. Make sure to go back to your Open Enrollment event to Review and Sign prior to the deadline or any changes you saved for later will be lost.

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 [rbenefits@uvahealth.org](mailto:rbenefits@uvahealth.org) (if emailing from your Health System email).


## Select / 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 07/01/2023** and click on that item.
3. Click the **Let's Get Started**  button.
4. Your choices for **Health Care and Accounts** and **Insurance** display. Click on the Manage/Enroll/View button on the tile for the plan you'd like to enroll, edit/manage, or waive. If you're already enrolled in a plan, the button at the bottom of the tile will display as Manage. Otherwise, the button will display as Enroll. Click each tile you'd like to enroll, edit/manage, or waive.
  - Medical – UPG - Anthem PPO – Healthkeepers
  - Medical – UPG - Anthem PPO - KeyCare Plus
  - Health Care FSA-McGriff
  - Dental – UPG - Guardian DPO – BuyUp
  - Dental – UPG - Guardian DPO - Core
  - Dependent Care FSA-McGriff
  - Life Insurance-Self-Spouse and Child-Guardian
  - Vision – UPG – Guardian VIS

Note: **Premiums may vary from the screenshots shown below.**

Note: Your plan options may be different than the ones you see above, depending on eligibility.

### Health Care and Accounts




**Medical - UPG**  
Anthem PPO - Healthkeepers

Cost per paycheck \$261.13

Coverage Family

Dependents 3

[Manage](#)




**Dental - UPG**  
Guardian DPO - Buy up

Cost per paycheck \$60.53

Coverage Family

Dependents 3

[Manage](#)




**Vision - UPG**  
Guardian VIS

Cost per paycheck \$2.94


Coverage Employee Only

[Manage](#)




**Health Care FSA - UPG**  
Waived

[Enroll](#)



**Dependent Care FSA - UPG**  
Waived

[Enroll](#)




**Group Life - UPG**  
Principal (Employee)

Cost per paycheck Included

Coverage 2 X Salary

[Manage](#)




**Basic AD&D**  
Principal - UPG (Employee)

Cost per paycheck Included

Coverage 2 X Salary

[Manage](#)




**Supplemental Life - UPG**  
Principal (Employee)

Cost per paycheck \$8.03

Coverage \$100,000

[Manage](#)




**Supplemental AD&D - UPG**  
Principal (Employee)

Cost per paycheck \$0.97

Coverage \$100,000

[Manage](#)




**Spouse Life - UPG**  
Principal (Spouse)

Cost per paycheck \$2.41

Coverage \$30,000

[Manage](#)




**Spouse AD&D - UPG**  
Principal (Spouse)

Cost per paycheck \$0.29

Coverage \$30,000

[Manage](#)




**Child Life - UPG**  
Principal (Child)

Cost per paycheck \$0.83

Coverage \$20,000

[Manage](#)




**Short Term Disability - UPG - 6**  
Principal (Employee)

Cost per paycheck Included

Coverage 70% of Salary

[Manage](#)



**Long Term Disability - UPG**  
Principal - Staff (Employee)

Cost per paycheck Included

Coverage 60% of Salary

5. Once you click on a tile (e.g., Medical), your current plans you selected or waived will display in the **Selection** column. If during Open Enrollment, you are trying to enroll in a benefit for the first time that

**Plans Available**

Select a plan or Waive to opt out of Medical - UPG.

1 item

*Selection	Benefit Plan Details	You Pay (Biweekly)	Company Contribution (Biweekly)
<input checked="" type="radio"/> Select <input type="radio"/> Waive	Anthem PPO - Healthkeepers	\$261.13	\$679.26

was previously waived, you may notice that the radio button is greyed out and set in the waived status (e.g., Insurance plans). To enroll, you will have to reach out for additional assistance to [rbenefits@uvahealth.org](mailto:rbenefits@uvahealth.org).

6. To continue, click the **Confirm and Continue** button.

7. To add a new dependent(s), click the **Add New Dependent** button. Your current Coverage type will display. If you plan to add a new dependent(s). Go to the section on [Adding Dependent During Open Enrollment](#).

**Dependents**

Add a new dependent or select an existing dependent from the list below.

Coverage ★ Employee Only

Plan cost (Biweekly (Benefits)) \$10.00

**Add New Dependent**

8. To remove a dependent, uncheck the checkbox in front of the name of the dependent you wish to remove.

2 items

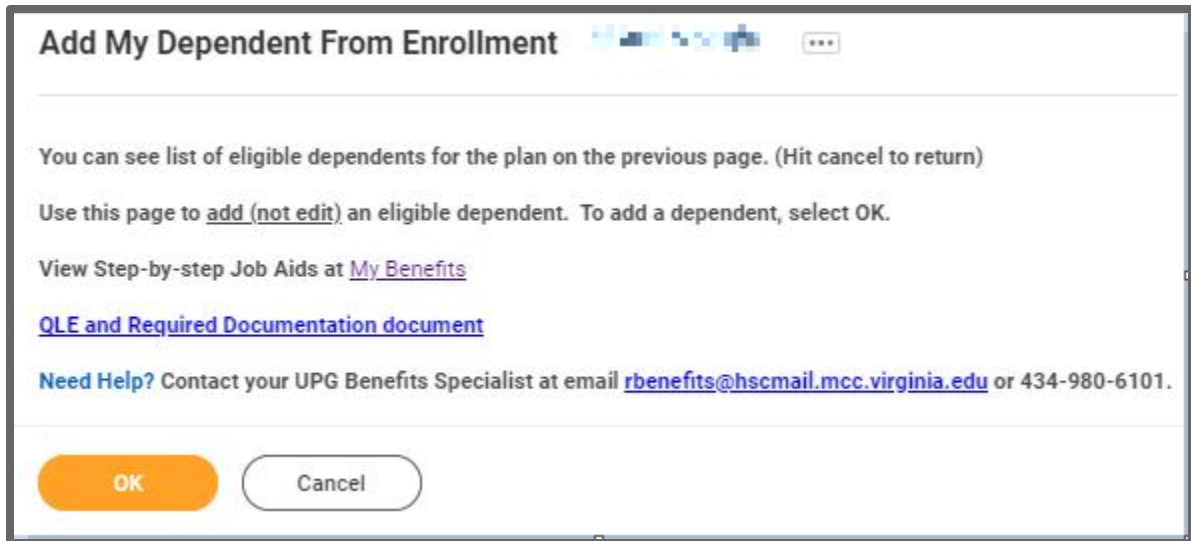
Select	Dependent	Relationship	Date of Birth
<input checked="" type="checkbox"/>	[Redacted Name]	Spouse	[Redacted Date]
<input checked="" type="checkbox"/>	[Redacted Name]	Child	[Redacted Date]

9. 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**.
10. Continue with your elections, checking the checkbox in front of your dependents you wish to add to each plan and **Save**.

## Adding Dependent During Open Enrollment

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. After selecting the Add New Dependent button, and reading the below information, click OK.



**Add My Dependent From Enrollment**

You can see list of eligible dependents for the plan on the previous page. (Hit cancel to return)

Use this page to add (not edit) an eligible dependent. To add a dependent, select OK.

View Step-by-step Job Aids at [My Benefits](#)

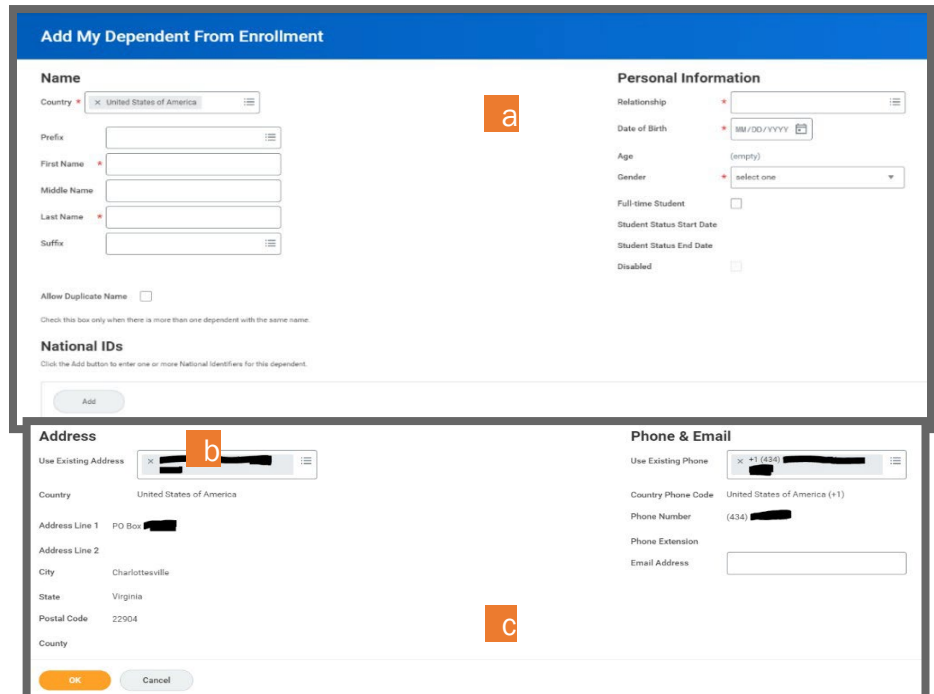
[OLE and Required Documentation document](#)

**Need Help?** Contact your UPG Benefits Specialist at email [rbenefits@hscmail.mcc.virginia.edu](mailto:rbenefits@hscmail.mcc.virginia.edu) or 434-980-6101.

**OK** **Cancel**

2. On the 'Add My Dependent From Enrollment' entry screen:

- Fill in the required details regarding the dependent (First/Last Name, Relationship, Date of Birth, and gender are required).
- If you have a Social Security Number, Under National ID's click 'ADD', select USA as Country, Social Security Number as ID type, and enter the SSN (if you don't yet have a social security number (e.g., for a newborn) you can skip this for now, but you must provide the SSN as soon as you have the number available).



**Add My Dependent From Enrollment**

**Name**

Country: United States of America

Prefix:

First Name:

Middle Name:

Last Name:

Suffix:

Allow Duplicate Name: ☐

Check this box only when there is more than one dependent with the same name.

**National IDs**

Click the Add button to enter one or more National Identifiers for this dependent.

**Add**

**Address**

Use Existing Address:

Country: United States of America

Address Line 1: PO Box

Address Line 2:

City: Charlottesville

State: Virginia

Postal Code: 22904

County:

**Phone & Email**

Use Existing Phone:

Country Phone Code: United States of America (+1)

Phone Number: (434)

Phone Extension:

Email Address:

**OK** **Cancel**

- After entering the SSN, or if you don't yet have an SSN (e.g., for a newborn child), review the Address information at the bottom of the page, make changes if necessary, and

then click **Save**.

3. If you still need to add the Social Security Number, the Dependent Social Security Numbers section will display. Either add the SSN or if you don't have one yet, select the radio button in front of Reason SSN is Not Available and enter the reason (e.g., this is a newborn).
4. Click the **Add New Dependent** button again and repeat the steps to add additional dependents if you have multiple dependents to add.

5. Once you have added all your dependents, click **Save**.
6. Your **Coverage** type will change according to the number and type of dependents. You will see this immediately within the tile.

You will see an updated, not submitted confirmation.



**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.


7. If you already clicked save after adding your first dependent, and you need to add another, click the **Manage** button again under Medical.
8. Click **Confirm and Continue**.
9. Click the **Add New Dependent** button again and go back to Step 1 of this section.
10. On the Plans Available page, you will see your available options or existing election. Then click the **Confirm and Continue** button to go to the Dependent page. On the Dependent page, you can review or change your dependent(s) information or coverage.

Update each Health, Dental, or Vision tile where you are requesting dependent changes (as applicable).

Some benefit tiles are display only and require other steps to request changes. Please read the help text in each benefit tile for specific instructions based on each benefit plan.

11. After adding dependents to your medical plan, click on each tile (e.g., Dental, Vision, etc.) you wish to add your dependent(s).
12. Select the checkbox in front of the name(s) of the dependent(s) you wish to add to each plan.
13. Click **Save**.

14. You will see an updated, not submitted confirmation for each plan each time you successfully add your dependent.



**Your Dental 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.



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.**

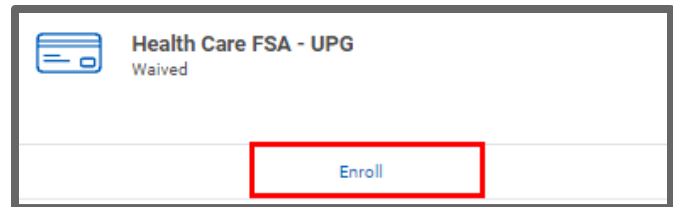
Spouses who have access to affordable health care coverage that provides minimum value through his/her employer, and spouses who are employed in a benefits-eligible position by UVA **cannot** be added as dependents for medical insurance. *If your spouse's employer offers affordable health care that provides minimum value but none of their health options has in-network coverage at the spouse's residence, your spouse is eligible to be a dependent on the UPG Health Plan.* **Employees who want to cover their eligible spouse on the Health Plan must complete the Spousal Affidavit.**

## Select / 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, 2023.**

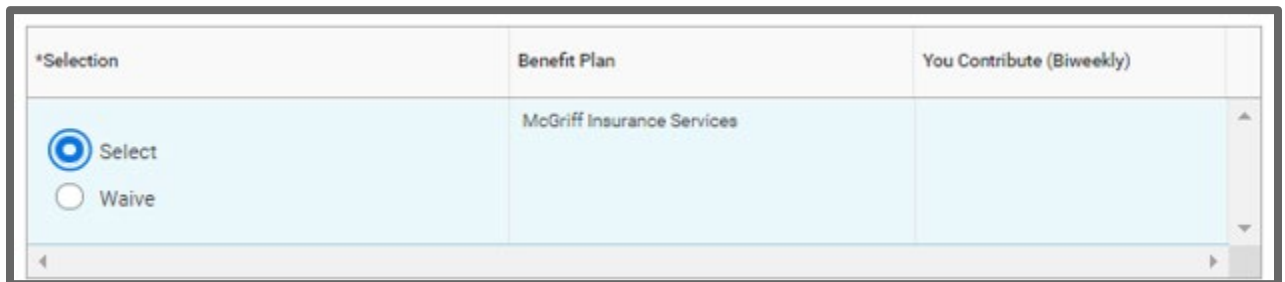
1. Click on enroll in the **FSA** plan tile of your choice.



Health Care FSA - UPG  
Waived

Enroll

- If you see Waived, and that is your choice, you don't need to do anything.
- If you wish to enroll, select the Select radio button, additional steps for enrollment continue with Step 2 below.



*Selection	Benefit Plan	You Contribute (Biweekly)
<input checked="" type="radio"/> Select <input type="radio"/> Waive	McGriff Insurance Services	

2. Click **Confirm and Continue**.
3. Enter in either a biweekly or annual amount. The system will calculate the other.

Note: The minimum and maximum amounts shown.



**Contribute**

Per Paycheck  Annual

Total Paychecks 26

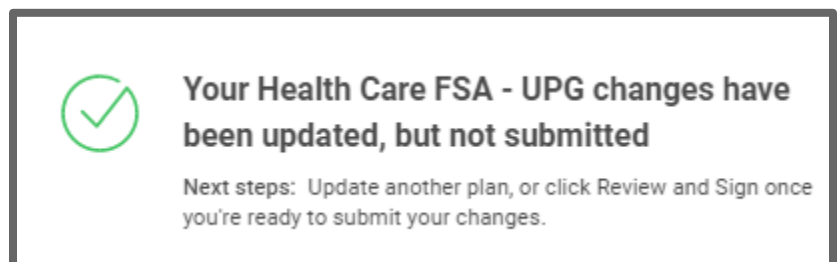
Minimum Annual Amount: \$50.00


Maximum Annual Amount: \$2,850.00

**Summary**

Total Annual Contribution \$0.00

4. Click **Save**.
5. You will receive an updated but not submitted confirmation.



 **Your Health Care FSA - UPG 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.



## 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. Click on enroll in the **Life** plan tile of your choice.

- If you see Waived, and that is your choice, you don't need to do anything.
- If you wish to enroll, select the Select radio button, additional steps for enrollment continue with Step 2 below

2. Click **Confirm and Continue**.

3. Review the **Coverage** for which you are eligible.

4. If there are options to modify coverage, make any changes you require. To make a change, enter the new value in the Coverage field.

5. 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 **Save**.

- 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.
6. You will complete steps 3-5 twice, once for Accidental Death and Dismemberment and once for Life Insurance.

## Add Beneficiary

The next step is to add a beneficiary.

1. Under the beneficiary, click the + icon. (if adding a person to the list).

Beneficiary	Percentage
<div> <div>+</div> <div> <div>Search</div> <div>Existing Beneficiary Persons</div> <div>Existing Trusts</div> <div>Add New Beneficiary or Trust</div> </div> </div>	<div>0</div>

2. If you wish to add a person, choose the appropriate option above.
- Choose **Add Beneficiary or Trust** to choose someone who is not currently associated with any of your benefits. A Trust will require the Trust Name, Trust ID, Trust Date, and Trustee Name.
- 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.
- If you choose Existing Trusts, you must already have a trust set up in the system, you can select the Trust.
- Choose **Existing Beneficiary Persons** to choose someone who is listed in the contacts you have in Workday
  - You can choose **Existing Trust** to define a an trust that already exists.
3. 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.

## Create New Beneficiary

If you selected to Add New Beneficiary or Trust you will see the option to choose either Add New Beneficiary or Add New Trust.

1. With the Add New Beneficiary radio button selected, click **Continue**.

### Add New Beneficiary or Trust

A beneficiary is the person or entity you name to receive this benefit. A trust is an arrangement that allows a third party, or trustee, to hold assets on behalf of a beneficiary or beneficiaries.

Would you like to add a new beneficiary or trust?

☒ Add New Beneficiary  
☐ Add New Trust

2. Fill out all required information starting with Relationship.

- Date of Birth
- Gender
- Legal Name
- Click the Contact Information tab and complete as much as possible.

Note: Under the Address button, **Use Existing Address** may provide options you can use if your beneficiary lives with you.

- Click the National IDs tab to enter the Social Security Number, or Government ID.

Relationship \*

Use as Beneficiary ☒

Date of Birth

Age (empty)

Gender

Allow Duplicate Name ☐

Legal Name    Contact Information    National IDs    Additional Government IDs

Country \*

Prefix

First Name \*

Middle Name

Last Name \*

Suffix

3. Click **OK**.

4. Once the new person is added, they will show under your **Primary Beneficiaries** to allow you to alter or add a value in

### Beneficiaries

Select an existing or add a new beneficiary person or trust to this plan. You can also adjust the percentage allocation for each beneficiary.

Primary Beneficiaries 3 items

	Beneficiary	Percentage
<input type="button" value="−"/>	<input type="text" value="x Christian Evans"/>	<input type="text" value="0"/>
<input type="button" value="−"/>	<input type="text" value="x [Redacted]"/>	<input type="text" value="50"/>
<input type="button" value="−"/>	<input type="text" value="x [Redacted]"/>	<input type="text" value="50"/>

the Percentage column.

5. To delete a beneficiary, click the minus sign in front of the name you wish to delete and adjust the percentages.
6. You may also add **Secondary Beneficiaries** as desired.
7. Click **Save**.
8. You will receive an updated not submitted confirmation.

## Add New Beneficiary or Trust

To add a New Trust, follow these steps:

1. Select the radio button in front of **Add New Trust** and click **Continue**.

Add New Beneficiary or Trust

A beneficiary is the person or entity you name to receive this benefit. A trust is an arrangement that allows a third party, or trustee, to hold assets on behalf of a beneficiary or beneficiaries.

Would you like to add a new beneficiary or trust?

☐ Add New Beneficiary
 ☒ Add New Trust

Continue

Cancel

2. Fill out all required pieces:
    - Trust Name
    - Trust ID
    - Trust Date
  3. You can also fill out Beneficiary Trustee Names and scroll down to enter the Contact Information.
  4. Click **OK**.
  5. The Trust will now show to edit as desired.
- Note: You must add a percentage value.
6. To delete a beneficiary, click the minus sign in front of the name you wish to delete and adjust the percentages.
  7. When you are done adding and editing, click the **Save** button.
  8. You will receive an updated not submitted confirmation.

Trust Name \*

Trust ID

Trust Date

### Trustee Contact Information

#### Trustee Name

Country \*

X
United States of America

Prefix

First Name \*

Middle Name

Last Name \*

Suffix

Remove

	Beneficiary	Percentage
+	<input type="text" value="Trust"/>	<input type="text" value="0"/>
-	<input type="text" value="Beneficiary"/>	<input type="text" value="0"/>
-	<input type="text" value="Beneficiary"/>	<input type="text" value="50"/>
-	<input type="text" value="Beneficiary"/>	<input type="text" value="50"/>


## Review and Sign/View Summary

Once you are finished updating and reviewing all your plans, you will Review and Sign, View the Summary of your changes, and add any required documentation.

If you are finished, but you are not ready to Review and Sign, use the **Save for Later** button to save the changes you've entered thus far. Make sure to go back and **Review and Sign** prior to the deadline or any changes you saved for later will be lost.

Save for Later

Visit the [UPG Open Enrollment | UVA HR \(virginia.edu\)](#) webpage for complete information. Contact [rbenefits@uvahealth.org](mailto:rbenefits@uvahealth.org) or 434-980-6101 with questions.

1. When you are finished updating all your plans, click the **Review and Sign** button.
2. If you have more benefit changes to add, click the **Cancel** button to add additional changes.
3. After clicking the **Review and Sign** button, scroll through the **View Summary** of your proposed change.
4. If you need to attach documentation, use the **Attachments** section to add your required documentation.
  - Click Select Files or drag and drop to the Drop files here section.
  - If you have multiple documents to upload, click the upload  button after downloading the first document.
5. If you are happy with the change, scroll down to the **Electronic Signature** section and click the '**Accept**' checkbox.
6. Click **Submit**.
7. You will receive a 'Submitted confirmation with a link to a **View 2023 Benefits Statement**, which shows this change only

**You've submitted your elections.**

Your retirement elections may be changed at any time. To enroll or update your 403(b) elections, go to your Workday Homepage, Select your Benefits App / Change Benefits / Retirement Savings Change - Self Service. Select today's date or a future date as the beginning date of your new elections.

Open enrollment elections will be effective July 1st following the open enrollment period. Dependent documentation and Social Security Numbers must be provided and are required for all dependents added to your benefit plans during open enrollment.

In order to catch up your required employee contributions to your eligibility start date for your new benefits, you may experience higher payroll deductions the first time benefits post to your paycheck. Coverage start date on 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.

**Important Dates:**

Benefits go into effect	07/01/2022
Final day to update benefits	06/03/2022

[View 2022 Benefits Statement](#)

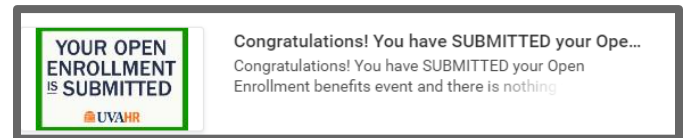
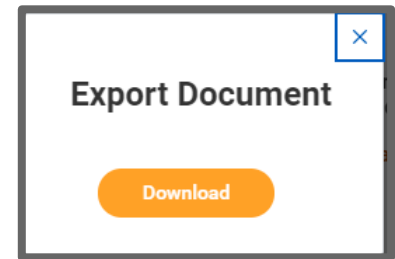
8. Note: The 'View 2023 Benefits Statement' button gives you the option to print your change request, which is recommended. See the [Print](#) section below.

## Print

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

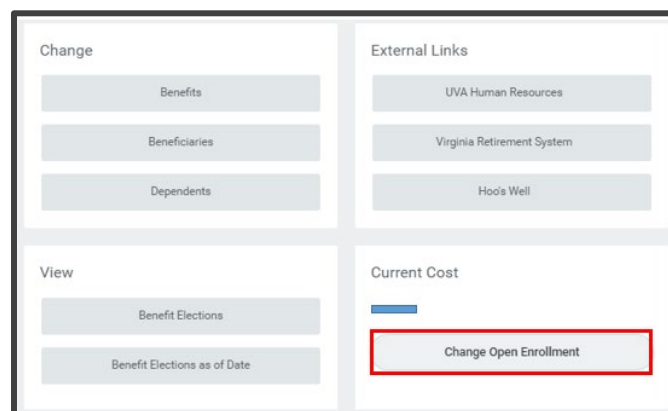
**Print** then **Download**  to create a PDF of the document that you can either print or save.

1. Click the **View 2023 Benefits Statement** button.
2. Click the **Print** button.
3. Click the **Download** button.
4. Your document displays, which allows you to **Open** and **Print**.
5. Print a copy for your records by clicking **Print**. This will open a PDF of the page that you can either save or print.
6. Click the **Home** button.
7. Under Announcements it will now say 'Congratulations! You have submitted your Open Enrollment benefits event.'



## 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. Click the **Let's Get Started** button.
3. Any missing items, such as Social Security Number, will display first.
4. Move through the same screens to elect or waive coverage, finally submitting the changes.
5. **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.

## Spousal Affidavit

If you added a spouse as a dependent, you need to complete an affidavit. This task 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.

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



2. By clicking the “I agree”, 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 his/her employer’s health options are HMOs and the spouse lives outside the HMOs’ defined service areas.

3. Click **Submit**.

4. You will receive a submit confirmation.

If you cannot agree to this statement, please contact your UPG Benefits Specialist at [rbenefits@uvahealth.org](mailto:rbenefits@uvahealth.org) or 434-980-6101.

**Review Documents** Review Documents for Open Enrollment Change: [ ] on 07/01/2022

3 second(s) ago - Effective 07/01/2022

**Documents**

Document	2022 UPG Spousal Affidavit
Instructions	Please review the Spousal Affidavit PDF by clicking the link above.
Signature Statement	<p>By clicking "I Agree" below, you are verifying that your spouse is either:</p> <p>1) NOT eligible for affordable Health Benefits from his/her employer that provides minimum value, as defined by the Affordable Care Act; OR</p> <p>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.</p> <p>Documentation from the spouse's employer is required and can be uploaded here in the Attachments section box.</p> <p>If you cannot agree to this statement, please contact your UPG Benefits Specialist at <a href="mailto:rbenefits@hscmail.mcc.virginia.edu">rbenefits@hscmail.mcc.virginia.edu</a> or 434-980-6101.</p>
I Agree	<input type="checkbox"/>