

Workday: Enrolling in Benefits due to a change in work schedule or employment status

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FAQs

- Associates may enroll in benefits mid-year if they experience a change in work schedule such as an increase in hours, or a switch between a Part Time non-benefit eligible position to a benefit eligible position.
- If you are already benefits eligible and increase or decrease your hours but continue to work 20 hours per week, you are not eligible to change your benefit elections.
- Associates must work 20 hours per week or a .5 FTE to be eligible for benefits.
- You have 30 days from the effective date to be enroll in benefits.
- Enrollment changes are effective the first of the month following the event as a result of change in employment status.



Welcome

It's Tuesday, January 25, 2022

Awaiting Your Action

...



New Job Description Summary: Choco Bear (123456)

Inbox - 22 hour(s) ago



Benefit Change - Benefit Eligible Status Change : Choco Bear (123456) on 01/23/2022

Inbox - 22 hour(s) ago

DUE 01/25/2022



Remote Worker Agreement: Choco Bear (123456)

Inbox - 22 hour(s) ago

DUE 01/27/2022

Quick Tasks

My Payslips

Time Off Balance

My Goals

[View All Apps](#)

Click on the Inbox to find the Benefit Eligible Status Change task.

Timely Suggestions

Announcements



2021 W-2 Tax Documents Available



Inbox

Actions

Archive

Viewing: All | Sort By: Newest

New Job Description Summary: Choco Bear (123456)
22 hour(s) ago - Effective 01/23/2022

Benefit Change - Benefit Eligible Status Change : Choco Bear (123456) on 01/23/2022
22 hour(s) ago - Due 01/25/2022; Effective 01/23/2022

Remote Worker Agreement: Choco Bear (123456)
22 hour(s) ago - Due 01/27/2022; Effective 01/23/2022

Manager Evaluation: 2021 CHOC Annual Performance Review for Associates: Choco Bear (123456)
3 month(s) ago - Effective 06/30/2021

Change Benefit Elections

22 hour(s) ago - Due 01/25/2022; Effective 01/23/2022

Initiated On 01/24/2022

Submit Elections By 02/22/2022

Let's Get Started

Locate the Benefit Eligible Status Change task and click "Let's Get Started".










Benefit Eligible Status Change

Projected Total Cost Per Paycheck
\$0.00

Projected Total Credits
\$0.00

If you wish to enroll in a Medical Plan,
click "Enroll" on the Medical card.

Health Care and Accounts

 Medical Waived Enroll	 Dental Waived Enroll	 Vision Waived Enroll
 Accident Waived Enroll	 Hospital Indemnity Waived Enroll	 Critical Illness Waived Enroll
 Surcharge CHOC Spouse Cost per paycheck Included Review and Sign Save for Later	 Health Savings Account Waived Enroll	 FSA Medical Waived Enroll



Medical

Projected Total Cost Per Paycheck
\$0.00

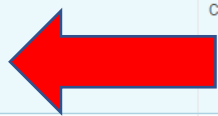
Projected Total Credits
\$0.00

Plans Available

Select a plan or Waive to opt out of Medical. The displayed cost of waived plans assumes coverage for Spouse/DP was offered medical coverage by employer but declined to enroll.

4 items

*Selection	Benefit Plan	You Pay (Biweekly)	Company Contribution (Biweekly)
<input type="radio"/> Select <input checked="" type="radio"/> Waive	Cigna HDHP	\$105.30	\$415.62
<input type="radio"/> Select <input checked="" type="radio"/> Waive	Cigna HMO Full Network	\$66.18	\$298.12
<input checked="" type="radio"/> Select <input type="radio"/> Waive	Cigna HMO Select Network	\$23.40	\$272.99
<input type="radio"/> Select <input checked="" type="radio"/> Waive	Cigna PPO	\$135.37	\$552.58



Health Care Instructions

General Instructions

When you select the Cigna HMO Select, HMO Full or PPO plans, you may also enroll in the Health Care Flexible Spending Account (FSA). When you select the Cigna HDHP plan, you may also enroll in the Health Savings Account (HSA) and the Limited Purpose FSA.

Definitions:

Health Savings Account (HSA) is a tax-free savings account that works with the Cigna HDHP plan to help you pay for the cost of out-of-pocket health care and prescription expenses.

Health Care FSA reimburses medical, dental, and vision expenses.

Limited Purpose FSA reimburses for dental and vision expenses and may only be used with the Cigna HDHP plan.

Dependent Care FSA reimburses for day/night care expenses for qualifying dependents which include 1) children under the age of 13 who qualify as dependents on your federal tax return or 2) spouse or dependents of any age who are physically or mentally unable to care for themselves and who qualify as dependents on your Federal tax return.

To find information about CHOC Benefits Plans and Programs go to:

<https://benefits.choc.org/>

Select the medical plan you wish to enroll in and click "Confirm and Continue".

Confirm and Continue

Cancel



Medical - Cigna HMO Select Network

Projected Total Cost Per Paycheck
\$145.26

Projected Total Credits
\$0.00

Dependents

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

Coverage ★ Employee + Family

Plan cost per paycheck \$145.26

Add New Dependent

4 items

Select	Dependent	Relationship	Date of Birth
<input checked="" type="checkbox"/>	Charli Sams	Child	07/04/2014
<input checked="" type="checkbox"/>	Ryan Sams	Child	01/06/2016
<input checked="" type="checkbox"/>	Timothy Sams	Spouse	10/08/1979
<input checked="" type="checkbox"/>	Anthony Sams	Child	08/16/2019

Save

Cancel

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If you wish to enroll a dependent, click the checkbox next to their name and then click "Save".



Finalizing Benefit Elections



Benefit Eligible Status Change

Projected Total Cost Per Paycheck \$145.26
Projected Total Credits \$0.00

Health Care and Accounts

Medical
Cigna HMO Select Network

Cost per paycheck \$145.26

Coverage Employee + Family

Dependents 4

[Manage](#)

Dental
Waived

[Enroll](#)

Vision
Waived

[Enroll](#)

Accident
Waived

[Enroll](#)

Hospital Indemnity
Waived

[Enroll](#)

Critical Illness
Waived

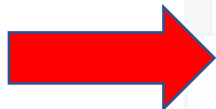
[Enroll](#)

Surcharges

[Review and Sign](#) [Save for Later](#)

Health Savings Account
Waived

FSA Medical
Waived



To finalize your benefit enrollment, click "Review and Sign".

View Summary

Projected Total Cost Per Paycheck \$145.26 Projected Total Credits \$0.00

Continue scrolling down the webpage to submit your benefit elections.

To find information about CHOC Benefits Plans and Programs go to: <http://benefits.choc.org/>

Please note, you have not completed your enrollment until you select, "I Agree" and "Submit" at the bottom of this page.

Turn on the new tables view

Selected Benefits 4 items

Plan	Coverage Begin Date	Deduction Begin Date	Coverage	Dependents	Beneficiaries	Cost
Medical Cigna HMO Select Network	02/01/2022	02/01/2022	Employee + Family	Anthony Sams Charli Sams Ryan Sams Timothy Sams		\$145.26
Surcharge CHOC Spouse	02/01/2022	02/01/2022	Spouse/DP is not a dependent.			Included
Basic Life The Hartford (Employee)	02/01/2022	02/01/2022	1 X Salary			Included
Basic AD&D The Hartford (Employee)	02/01/2022	02/01/2022	1 X Salary			Included

Turn on the new tables view

Waived Benefits 14 items



Total Benefits Cost 1 item



Company Contribution	Employee Cost	Credits	Net Cost
\$747.44	\$145.26	\$0.00	\$145.26

Attachments

Drop files here

or

Select files

Electronic Signature

I acknowledge that I have been given the opportunity to enroll myself and/or eligible dependents in my employer's benefits plans. I hereby authorize CHOC Children's to take any applicable deductions from my salary with regard to these benefits plans, including applying any start, stop, increase, decrease or change in deduction amount.

I Accept

enter your comment

Process History

Choco Bear (123456)
Change Benefits for Life Event- Awaiting Action

Due 01/25/2022

Submit Cancel



Associates must click "I accept" and "Submit to finalize benefit elections.

LONG LIVE CHILDHOOD

Have questions or Need Help? [Submit a Benefits Coverage after Status Changes Case](#)

