

OBJECTIVE


Use the steps below to complete Open Enrollment for your benefits on your desktop.

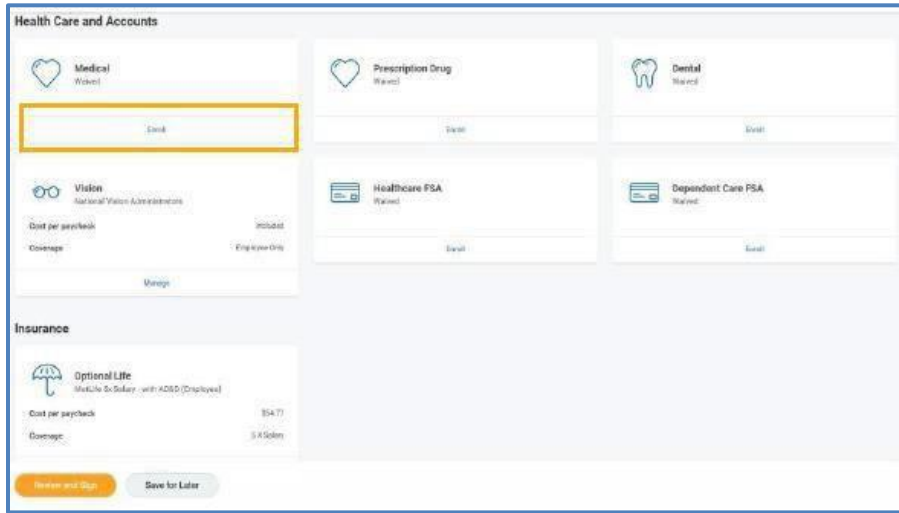
Once a year, open enrollment allows you to update your benefit elections. You will receive a task in your My Tasks section from which you can access the open enrollment options.

This document contains the following job aids:

- [Selecting your Benefits](#)
- [Adding a new Dependent](#)
- [Modifying an Existing Dependent](#)
- [Adding Optional Group Life Insurance](#)
- [Designating Life Insurance Beneficiaries](#)
- [Adding Benefits: Healthcare FSA and Dependent Care FSA](#)
- [Attaching Supporting Documentation](#)
- [Completing your Open Enrollment](#)

SELECTING YOUR BENEFITS

1. Navigate to your **My Tasks** icon  located at the upper right corner of the homepage.
2. Click the **Open Enrollment Change** task from your My Tasks.
3. Click **Let's Get Started**. Result: You see your current enrolled benefit plans.
4. Click **Manage** or **Enroll** in each benefit box you wish to elect or change coverage, starting with Medical.



5. For each benefit plan option, choose either:
 - a) **Select** to choose the option, or,
 - b) **Waive** to pass on that coverage.

Plans Available

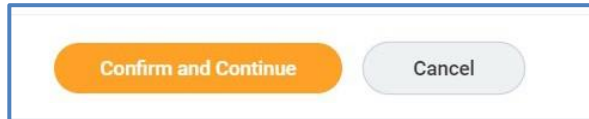
Select a plan or Waive to opt out of Medical. The displayed cost of waived plans assumes coverage for Employee Only.

5 items

*Selection	Benefit Plan	You Pay (Biweekly)	Company Contribution (Biweek
<input type="radio"/> Select <input checked="" type="radio"/> Waive	Aetna HMO Open Access	\$22.04	\$198.39
<input type="radio"/> Select <input checked="" type="radio"/> Waive	BlueChoice Advantage PPO High Option	\$75.18	\$211.76
<input type="radio"/> Select <input checked="" type="radio"/> Waive	BlueChoice Advantage PPO Standard Option	\$52.94	\$211.76
<input type="radio"/> Select <input checked="" type="radio"/> Waive	Kaiser Permanent HMO	\$24.56	\$221.01

Your screenshots may vary in color from this document; however, processes are correct as of revision date.
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- Review the **Important Information** under the **Health Care Instructions** section to ensure you make an appropriate selection.
- Click the **Confirm and Continue** button once you have made the appropriate plan selection.



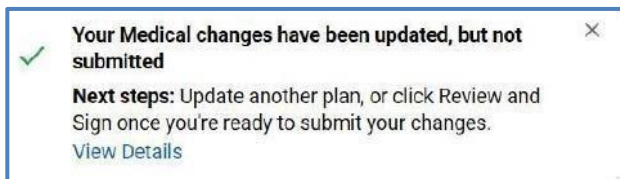
- Click the box next to any dependent you want to cover or uncheck the box next to any dependent you want to remove from coverage. Then click **Save**.

 A screenshot of the "Dependents" section. It shows a heading "Dependents" and a sub-heading "Add a new dependent or select an existing dependent from the list below." Below this, it displays "Coverage" as "Employee + Family" and "Plan cost per paycheck" as "\$73.65". There is an "Add New Dependent" button. Below that is a table with 4 items. The table has columns for "Select", "Dependent", "Relationship", and "Date of Birth".

Select	Dependent	Relationship	Date of Birth
<input type="checkbox"/>	Cameron Smith	Child	10/28/2005
<input checked="" type="checkbox"/>	Candace Smith	Legal Spouse	07/29/1977
<input checked="" type="checkbox"/>	Kendyl Smith	Child	09/08/2003
<input type="checkbox"/>	Kennedy Smith	Child	08/28/2008

 At the bottom of the table are "Save" and "Cancel" buttons.

- After completing steps 3-7 for each benefit you want to **Enroll/Manage**, you will receive confirmation of your selections.



- Click the **Review and Sign** button to finalize your selections. Result: The **Summary page** appears.



11. Review your selections.
12. Scroll to the bottom of the **Summary page**.
13. Click the **I accept** box to electronically sign your selections.
14. Click **Submit**.

Electronic Signature

By submitting the changes you have requested, you are certifying that the information you have provided in support of these changes will be relied upon by the Plan Administrator for purposes of enrolling or effecting changes in coverage for you or your dependents on the plan. Falsification of any of the information provided to the Plan Administrator may result in your termination from the plan. The Plan reserves the right to demand reimbursement for all current and future benefits from each paycheck. Please note: In connection with documents that are part of the Plan records (such as this form), it is a criminal violation to knowingly make, cover up, or fail to disclose any fact the disclosure of which is necessary to administer the Plan in accordance with the Plan documents, or to demand reimbursement of more than \$10,000 and/or imprisonment (not more than five years).

If you did NOT elect the \$650 Waiver Credit, the Waiver Credit Acknowledgement paragraph below does not apply to you.

Waiver Credit Acknowledgement
I understand that I am eligible to receive medical coverage provided by the City of Baltimore. I acknowledge that I am responsible for my own prescription and/or vision.

I acknowledge that it will be my responsibility to provide insurance coverage for myself and/or my dependents.

I understand, that I will not be able to re-enroll for medical benefits as described above until the next announced annual open enrollment period.

I Accept

enter your comment

Submit Cancel

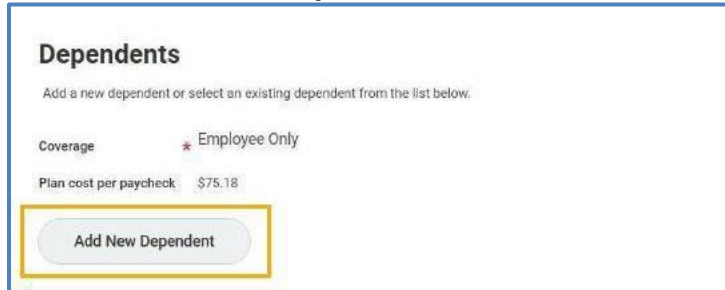
Result: Your elections have been submitted.

ADDING A NEW DEPENDENT

Use the steps below to add dependents to a plan you select or modify during open enrollment. Any dependent you have added to previous plans are automatically added.

You have chosen to **Confirm and Continue** your benefits.

1. Click the **Add New Dependent** button.



Dependents

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

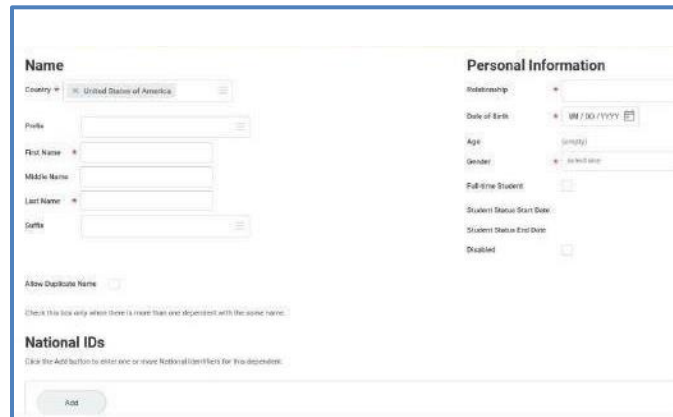
Coverage * Employee Only

Plan cost per paycheck: \$75.18

Add New Dependent

Result: The **Add Dependent from Enrollment** disclosure screen opens.

2. Read the disclosure information then click **OK**. Result: **Add Dependent for Enrollment** screen opens.
3. Enter information in the required fields.



Name

Country: United States of America

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.

Personal Information

Relationship: +

Date of Birth: MM/DD/YYYY

Age: (empty)

Gender: as listed

Full-Time Student:

Student Status Start Date:

Student Status End Date:

Disabled:

National IDs

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

4. Click the **Save** button.


- 5. You will return to the Dependent screen and the newly added dependent should appear in the dependent box with a blue checkmark indicating they have been added to the coverage. This is your opportunity to add the dependent's SSN which is required for coverage.

The screenshot shows a web interface for managing dependents. At the top, there is a table with columns for selection, name, relationship, and date of birth. The table contains two rows: one for 'Kennedy Smith' (Child, 08/28/2008) with an unchecked checkbox, and one for 'Test Test' (Child, 06/01/2020) with a checked checkbox. Below the table, a message states: 'You have dependents covered under your health care plan without a Social Security Number. Enter their Social Security Number (SSN) or Reason SSN is Not Available if you don't have access to their number at this time.' Below this message is a section titled 'Dependent Social Security Numbers' with '1 Item'. It contains a table with columns for 'Dependent' and '*Social Security Number'. The 'Test Test' row is selected, and the 'Social Security Number (SSN)' option is chosen, with a text input field containing '--'. The 'Reason SSN is Not Available' option is also present with an empty text input field. At the bottom of the form are 'Save' and 'Cancel' buttons.

- 6. Click the **Save** button.

MODIFYING AN EXISTING DEPENDENT

Use the steps below to modify information for an existing dependent in Workday.

1. Click the **Menu** icon located at the top left corner of your homepage and then click on the Benefits icon .
2. Click **Dependents** under the **Change** Section.



3. Click the **Edit** button located next to the **Benefit Elections** column.

Dependents 1 item				
Dependent	Relationship	Age	Benefit Elections	
Herbert Open Enrollment	Legal Spouse	76 years, 1 months, 20 days	Beth Open Enrollment 	Edit

4. Review the current dependent information and enter any changes as needed.
5. Click **Submit** to save and submit the modified dependent information.

ADDING OPTIONAL GROUP LIFE INSURANCE

Use the steps below to add optional life insurance to your City of Baltimore Health benefits.

1. Navigate to the “**Healthcare and Accounts**” screen and select the **Insurance** section of the enrollment options.
2. Select either:
 - a. **Enroll** to add a new life insurance policy to your enrollment options, or
 - b. **Manage** to edit an existing plan.

Result: The Optional Life Insurance options will display.

3. For each option, choose either:
 - a. **Select** to choose the life insurance coverage option, or
 - b. **Waive** to decline the life insurance coverage option.

Selection	Benefit Plan	You Pay (Weekly)
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 1x Salary - with AD&D (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 2x Salary (Employee)	
<input checked="" type="radio"/> Select <input type="radio"/> Waive	MedLife 2x Salary (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 2x Salary - with AD&D (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 3x Salary (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 3x Salary - with AD&D (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 3x Salary (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 3x Salary - with AD&D (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 4x Salary (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 4x Salary - with AD&D (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 4x Salary (Employee)	
<input type="radio"/> Select <input checked="" type="radio"/> Waive	MedLife 4x Salary - with AD&D (Employee)	

Result: The **Total Cost** based on your selections is displayed in the upper right corner.

4. Click **Confirm and Continue**.

Result: You have added optional life insurance to your medical plan.

DESIGNATING LIFE INSURANCE BENEFICIARIES

Life insurance beneficiary designations **cannot** be completed through Workday. Life insurance beneficiaries can only be designated directly through MetLife.

How to Register on the MetLife website

Website: <https://online.metlife.com/edge/web/public/benefits>

Step 1: Provide your group name and click to select it and then click “Next.”

Step 2: The login screen. To begin accessing personal plan information, click on “Log In” at the top-middle of the page, and on the next screen, select “Create New Account” and complete the registration process.

Step 3: Enter personal information. Enter your first and last name, identifying data, and e-mail address.

Step 4: Establish account credentials. You will need to create a unique username and password for future access to My Benefits. You will also need to choose and answer three identity verification questions to be used in the event you forget your password. In addition to reading and agreeing to the website’s Term of Use, you will be asked to opt into electronic consent.

Step 5: Process complete. Now you will be brought to the “Thank You” page.

If you have any questions about your basic or optional life insurance coverage, please contact MetLife at 1 (866) 492-6983 or the Office of Employee benefits at 410-396-5830 with any questions.

How to designate a Life Insurance Beneficiary?

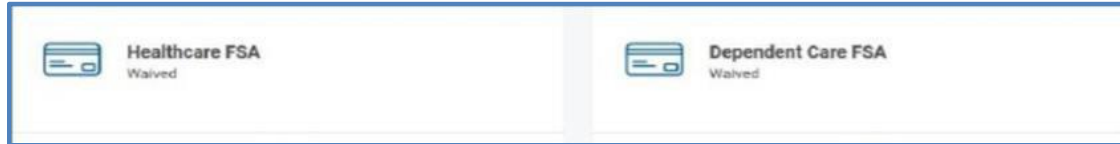
1. Log on to metlife.com/mybenefits and enter ‘City of Baltimore’ in the Employer or Association field.
2. On the ‘**Welcome to MyBenefits**’ page you can register as a new user or if you have already registered, select Login and then enter your username and password.
3. Once you log in to MyBenefits, select the ‘**Group Life Insurance**’ link.
4. Click on ‘**Beneficiaries**’ at the top of the page and follow the instructions.

Changes to your beneficiary are effective immediately. Beneficiaries can be added or changed at any time throughout the year. You can also print a paper copy for your records.

Note: Employees without computer access may call MetLife at 1 (866) 492-6983 to request a new beneficiary designation form if needed or if they cannot remember previous designations. MetLife will not identify current beneficiaries over the phone due to HIPPA. If you are not sure, complete a new form. Once you have requested and completed the form, please mail it or fax it back to Metlife for processing, please use the address on the form.

ADDING BENEFITS: HEALTHCARE FSA & DEPENDENT CARE FSA

Use the steps below to add **Healthcare FSA** and/or **Dependent Care FSA** during the Open Enrollment period.



1. Navigate to the **Healthcare FSA/Dependent Care FSA** section.
2. For each plan in which you want to enroll, select either:
 - a. **Enroll** to add a new HC FSA/ DC FSA plan to your enrollment options, or
 - b. **Manage** to re-enroll in the HC FSA / DC FSA for the open enrollment period.
3. Review your elections.
4. Click **Confirm and Continue**.
5. Enter the **Per Paycheck** amount or enter the **Annual** amount you want to be deducted on the **Contribute** page.
6. Click **Save**.

ATTACHING SUPPORTING DOCUMENTATION

Use the steps below to add any supporting documentation that is required.

1. Click the **Review and Sign** button to go to the **Summary Page**.
2. Review your selections in the **Summary Page** and scroll down to the **Attachments** section.
3. Drag and drop any supporting documentation into the **Attachment** field or click **Select** to browse for files
4. Enter **comments** if needed.
5. Click **Upload** to complete attaching any supporting documentation.

COMPLETING YOUR OPEN ENROLLMENT

Use the steps below to complete your open enrollment:

1. Navigate to the end of your enrollment **Summary Page**.
2. Read the **Electronic Signature** information and click **I accept** to confirm your elections.
3. Click **Submit**. Result: A confirmation page displays.
4. Click **Done** to complete the task.
5. (OPTIONAL) Click the **View Benefits Statement** button to view your benefits statement.
6. Click **Print** to generate a PDF version for your records. Result: You have submitted your elections.

STILL HAVE QUESTIONS ABOUT WORKDAY

For additional support and questions about Workday please contact your agency HR Practitioner.