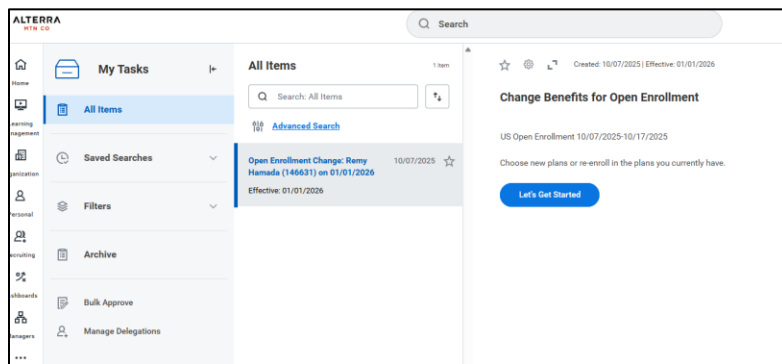
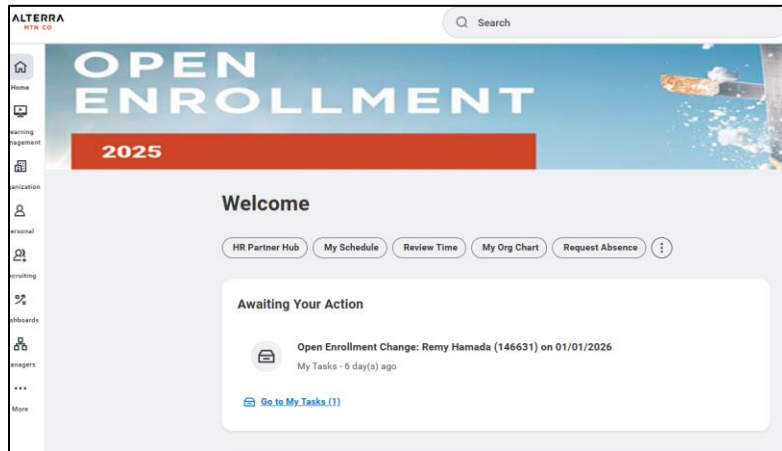


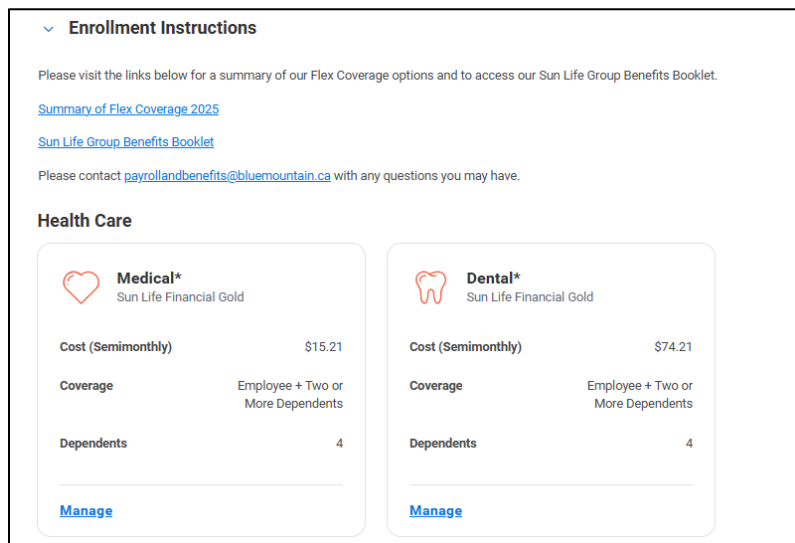
Open Enrollment Instructions in Workday

Step 1: Navigate to either the home page or the task inbox, select the Open Enrollment event and click **Let's Get Started**



Step 2: Answer the required Health Information question, click **Continue** until you reach the Open Enrollment elections screen.

Step 3: From here, you can click **Manage** to update and change any elections.



Open Enrollment Instructions in Workday

Step 4: Clicking **Manage** will show plan options; employees should Select or Waive elections, when available (some benefits are required) and then click **Confirm and Continue**.

Projected Total Cost (Semimonthly)
\$212.71

Plans Available

You must select a plan. The displayed cost of waived plans assumes coverage for Employee + Two or More Dependents. If Employee + Two or More Dependents coverage isn't available, it assumes Employee Only coverage.

4 items

Benefit Plan	*Selection	You Pay (Semimonthly)	Company Contribution (Semimonthly)
Opt Out Waive	☐ Select ☒ Waive	Included	\$0.00
Sun Life Financial Bronze	☐ Select ☒ Waive	Included	\$61.34
Sun Life Financial Gold	☒ Select ☐ Waive	\$15.21	\$130.86
Sun Life Financial Silver	☐ Select ☒ Waive	Included	\$107.55

Confirm and Continue

Cancel

Step 5: Employees can **Add New Dependent** if applicable, entering all demographic information required.

Medical* - Sun Life Financial Gold CA Annual Enrollment t

Projected Total Cost (Semimonthly)
\$212.71

Dependents

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

Coverage * Employee + Two or More Dependents

Plan cost (Semimonthly) \$15.21

Add New Dependent

Open Enrollment Instructions in Workday

Add Dependent

Relationship

*

Use as Dependent

☒

Use as Beneficiary

☐

Inactive Date

(empty)

Date of Birth

*

MM/DD/YYYY

Age

(empty)

Gender

*

Primary Nationality

Citizenship Status

Payroll Dependent

☒

Step 6: When all elections have been made and reviewed; click **Review and Sign**

Spouse Optional Life Insurance

Sun Life Financial (Spouse)

Cost (Semimonthly)

\$25.60

Coverage

\$300,000

Manage

Child Optional Life Insurance

Waived

Enroll

Optional Critical Illness

Waived

Enroll

Spouse Optional Critical Illness

Waived

Enroll

Additional Benefits

Review and Sign

Save for Later

Open Enrollment Instructions in Workday

Step 7: The final action is to acknowledge and click “**I Accept**” box under the Electronic Signature to complete the Open Enrollment task. Once acknowledged, click **Submit**.

Electronic Signature

Legal Notice: Please Read

Your name and Password are considered your "Electronic Signature" and will serve as your confirmation of the accuracy of the information provided. You understand and approve the enrollment as indicated above. You hereby authorize the company to deduct from your earnings the amount of the premium for the selected plan.

If you decline medical insurance enrollment for yourself or your dependents, including your spouse, because of other medical coverage, you may be able to enroll yourself, your spouse, or your dependents at a later date. If you have a new spouse or dependent as a result of marriage, birth, or adoption, you may be able to enroll yourself, your spouse, or your dependents at a later date.

I Accept ☒

Submit

Save for Later

Cancel