

WORKDAY | BENEFITS CHANGE: QUALIFYING LIFE EVENT

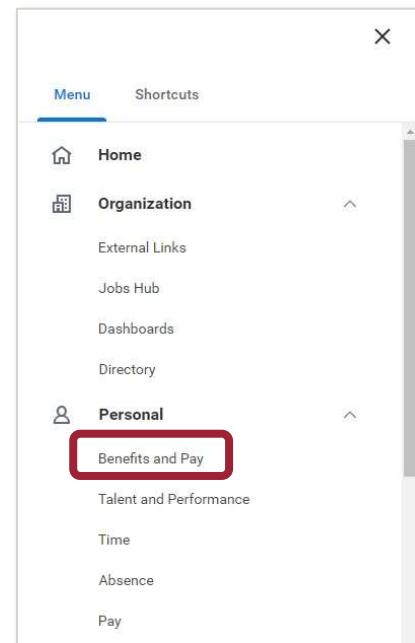
Use this process to **update your Benefits** elections when you experience a **Qualifying Life Event**. **Changes must be submitted within (30 day) required timeline.**

What is a Qualifying Life Event (QLE)?

A qualifying life event is a **significant life change** that impacts your health insurance needs, allowing you to enroll in or change your health plan outside of the annual Open Enrollment Period. Common QLEs include:

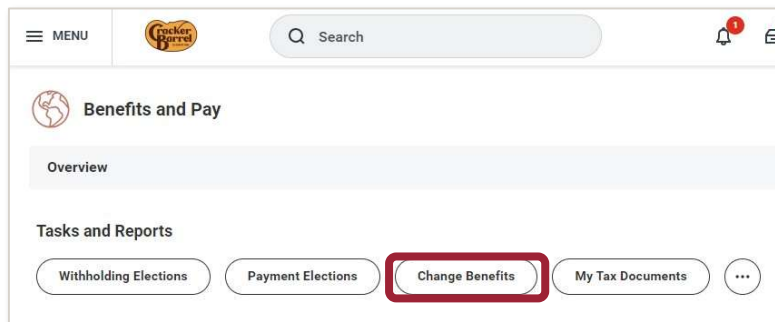
- Marital Status Changes (e.g., marriage, divorce, legal separation)
- Family Changes (e.g., birth or adoption of a child)
- Employment changes (e.g., promotion, reduction in hours)

1 Access the **Benefits and Pay** App from your Menu.



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2 Select **Change Benefits**.



3 Select the appropriate **Change Reason** from the dropdown menu.

Required fields will populate based on your selection.

Example shown here:
Marriage.

A screenshot of the 'Change Benefits' form in Workday. The form is for 'Abriel Livermore'. The 'Change Reason' field is marked with a red asterisk and has a dropdown menu open. The dropdown menu lists various reasons for changing benefits, with 'Marriage' highlighted in blue. Other options include 'Birth or Adoption', 'Cancel Voluntary Benefits', 'Change Beneficiaries', 'Change Commuter Contribution', 'Change HSA Contribution', 'Change in Day Care Provider', 'Death of Child / Spouse', 'Dependent Gains Other Coverage', 'Divorce / Legal Separation', 'Employee Gains Other Coverage', 'Employee or Dependent Loses Other Coverage', 'End of Domestic Partnership - CA, OR, WA Only', 'Gain / Loss of Medicare/Medicaid/CHIP', 'New Domestic Partnership - CA, OR, WA Only', and 'Significant Reduction in Hours'. To the left of the dropdown, there is a text input field with a placeholder 'enter your c...' and a blue circular icon with a cloud.

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4 Enter **Date** of qualifying event.

Deadline for submitting elections will populate based on event date.

You may need to click outside of the calendar pop-up for other sections to populate.

Enter Date of Marriage * 04/19/2025

Submit Elections By 05/18/2025

Benefits Offered

- Accident
- Basic AD&D
- Basic Life
- Child Optional Life
- Critical Illness
- More (7)

5 Attach any required documentation to support qualifying event (e.g., Birth Certificate, Marriage Certificate).

Select **Upload** to add additional files as needed.

Attachments

Drop files here

or

Select files

Attachments

Marriage License.pdf

Successfully Uploaded!

Comment

Upload

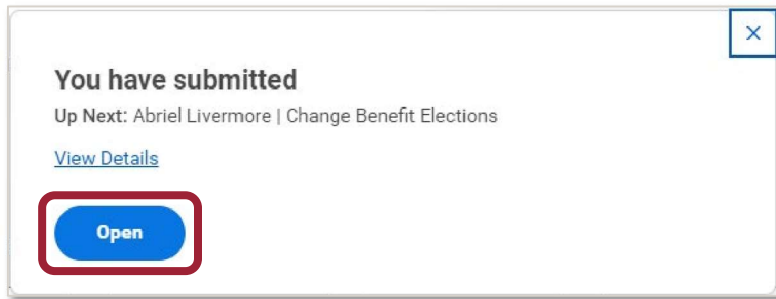
6 Select **Submit**.

Next, you will be prompted to add or update your Benefit Elections.



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- 7 Click **Open** to begin your Benefit Elections.



You have submitted

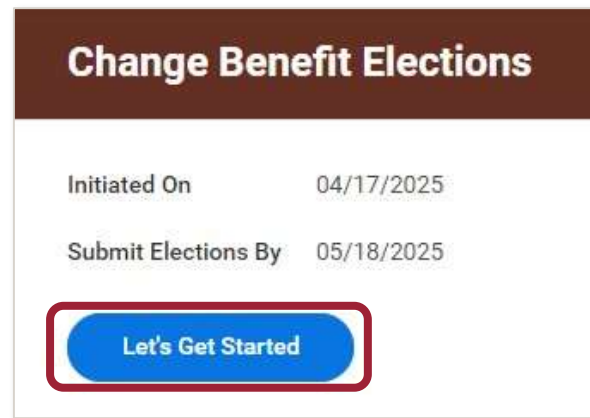
Up Next: Abriel Livermore | Change Benefit Elections

[View Details](#)

Open

- 8 Click **Let's Get Started**.

*Clicking **Let's Get Started** will initiate an enrollment process. If you choose not to complete your enrollment, you must **submit a ticket** to the **HR Service Desk** for a Home Office Benefits member to **cancel the task***



Change Benefit Elections

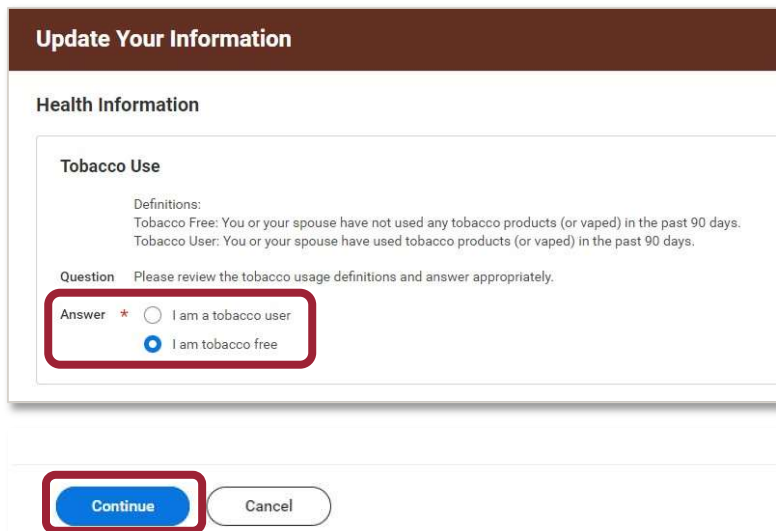
Initiated On 04/17/2025

Submit Elections By 05/18/2025

Let's Get Started

- 9 Answer the pre-screening question on **Tobacco Use** to see accurate prices for your Benefit Elections.

Click **Continue**.



Update Your Information

Health Information

Tobacco Use

Definitions:
Tobacco Free: You or your spouse have not used any tobacco products (or vaped) in the past 90 days.
Tobacco User: You or your spouse have used tobacco products (or vaped) in the past 90 days.

Question Please review the tobacco usage definitions and answer appropriately.

Answer * ☐ I am a tobacco user
☒ I am tobacco free

Continue Cancel



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10 Click **Continue**.

The screenshot shows a confirmation screen titled "Information Updated" in a dark blue header. Below the header, the text reads: "Thanks for updating your information." followed by "Next up, you'll confirm benefits you'd like to keep the same, or add any changes you'd like to make." At the bottom of the screen, there are two buttons: a blue "Continue" button with a red border and a grey "Cancel" button.

11 Carefully review all onscreen Enrollment Instructions.

Click each tile to View, Enroll, or Manage your Benefit Elections.

The screenshot shows the "Marriage" enrollment screen. At the top, it says "Projected Total Cost Per Paycheck \$0.00". Below this is a section titled "Enrollment Instructions" with a dropdown arrow. The instructions text reads: "Review your benefit options available by clicking the link to your [Employee Benefits Center](#). Click each tile below to **Enroll**, **Manage** or **View** the benefit options available. For some benefits such as Basic Life/AD&D you will not be able to change the option, but you should **Manage** it to add beneficiary allocations. For other options, you will only be able to **View** the election and no changes may be made. Please ensure you review each tile for all the benefit options available to you and the status will update to **Reviewed** or **Updated** for each tile when you have done so. When you are done with your elections, click the **Review and Sign** button to review your final elections and complete the **Electronic Signature**. Scroll down the page and review any messages and your overall cost." Below the instructions are four benefit tiles: "Medical" (Waived), "Dental" (Waived), "Vision", and "Accident". Each tile has an "Enroll" link. At the bottom, there are two buttons: a blue "Review and Sign" button with a red border and a grey "Save for Later" button.



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- 12 For each tile, select the coverage that best fits your situation. If your updated coverage involves a Dependent or Spouse, you will be prompted to enter their information on subsequent screens.

When selecting Life Coverage, you will need to choose a Beneficiary.

*For full details on each available plan, please review your Benefits Enrollment Guide. After each plan selection, click **Confirm and Continue**.*

Plan Name	Selection	Cost	Cost
BCBSTN HDHP Traditional	Select		
Value Health	Waive		
Symetra Limited Plan Health Basics	Waive	\$13.52	\$8.76

- 13 If not adding a Dependent, skip to **Step 18**.

TO ADD A DEPENDENT DURING ENROLLMENT:

Click **Add New Dependent**

Medical - BCBSTN HDHP Health Savings Advantage

Projected Total Cost Per Paycheck
\$352.18

Dependents

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

Coverage: Employee + Child(ren)

Plan cost per paycheck

Add New Dependent

- Employee Only
- Employee + Spouse
- Employee + Child(ren)
- Employee + Family
- Employee + Spouse (Spouse can be covered elsewhere)
- Employee + Family (Spouse can be covered elsewhere)

Save Cancel



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- 14 Choose to **Create Dependent** or use an existing Beneficiary or Emergency Contact, then click **OK**.

The screenshot shows a web form titled "Add My Dependent From Enrollment". At the top, the name "Alana Tunstel" is entered. Below this, there are two radio button options: "Use an Existing Beneficiary or Emergency Contact" (which is unselected) and "Create Dependent" (which is selected and highlighted with a red rectangular box). Below the radio buttons is a checkbox labeled "Use as Beneficiary" which is also unselected. A set of instructions follows: "1. Check this box if you want your dependent to be a beneficiary and a dependent. 2. Click OK to add a new dependent. 3. On the next page, please complete all required information such as Relationship, Date of Birth, Gender, Name and Contact information for your dependent - all required fields are marked with a red asterisk." Below the instructions is a link: "For a list of Eligible Dependents, please click the following link. Dependent verification is required for all dependents. Your dependent will not be enrolled until verification is received and verified." At the bottom right, there are two buttons: "Cancel" and "OK".

- 15 Enter all required information in the form, then *scroll down* to add a **National ID**.

The screenshot shows the "Add My Dependent From Enrollment" form with the "Personal Information" section expanded. The "Name" section includes fields for Country (set to "United States of America"), Prefix, First Name (marked with a red asterisk), Middle Name, Last Name (marked with a red asterisk), and Suffix. The "Personal Information" section includes fields for Relationship (set to "Child"), Date of Birth (set to "07/07/2025"), Age (set to "0 years, 0 months, 7 days"), Gender (set to "Female"), and Citizenship Status (set to "Citizen (United States of America)"). Below these fields is a "Tobacco Use" section with a note: "Please review the tobacco usage definitions and answer appropriately. Definitions: Tobacco Free: Your spouse has not used any tobacco products (or vaped) in the past 90 days. Tobacco User: Your spouse has used tobacco products (or vaped) in the past 90 days." There are two radio button options: "My spouse is tobacco free" (selected) and "My spouse is a tobacco user". At the bottom, there is a "Disabled" checkbox and an "Allow Duplicate Name" checkbox. At the very bottom, there are "Save" and "Cancel" buttons.



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- 16** Click **Add**, then enter all required information for your Dependent. Then, click **Save**.

National IDs

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

Country *

National ID Type *

Current ID (empty)

Add/Edit ID *

Alert: This national identifier you entered is already in use. Verify that the information is accurate.

Issued Date

Expiration Date

Issued By

Series

Verification Date 07/14/2025

Verified By Alana Tunstel

Address **Phone & Email**

- 17** Ensure your desired Coverage is selected and the Dependent(s) you would like covered are checked off.

Medical - BCBSTN HDHP Health Savings Advantage 9/16/2017

Projected Total Cost Per Paycheck
\$352.18

Dependents

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

Coverage *

Plan cost per paycheck \$171.92

1 item

Select	Dependent	Relationship	Date of Birth
☒	First Last	Child	07/07/2025

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.

Health Care

General Instructions

1. Click the **Select** button to enroll. To review covers
2. Click **Confirm and C**
3. You will enroll depen
4. Click the **Save** button
5. Click the **Cancel** button

For more information c
If your spouse is eligib
enrolls in your Cracker
\$225 per month. Selec
elsewhere) or the Empl
firms that your spouse



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- 18 Review the summary of all your Elections, then click **Submit**.

View Summary

Projected Total Cost Per Paycheck
\$0.00

Review your elections below for accuracy and scroll to review any messages and errors as well as the **Total Benefits Cost** – both the company contribution and your cost per pay period.

Scroll to the bottom and read and check the electronic signature. Click the **Submit** button when complete. Please note if you click **Cancel** on this page, this does NOT cancel the event, only returns you to the election page. You may only cancel events that you initiated – to do so, return to your **Inbox** and select this event; using the gear icon, select **Cancel**.

Selected Benefits 0 items

Plan	Calculated Coverage Begin Date	Coverage Begin Date	Calculated Deduction Begin Date
No items available.			

Waived Benefits 12 items

Medical	Waived
Dental	Waived
Vision	Waived
Accident	Waived

Submit

Save for Later

Cancel

- 19 Click **Done**.

The Benefits Team will review your documentation and reach out if they need further information.

Submitted

You've submitted your elections.

You have submitted your benefit elections. If they require approval, they have been routed to the Benefits Department. You may want to print these elections for your own records.

View 2025 Benefits Statement

Done

