




Benefits: Open Enrollment

Once a year, Open Enrollment allows you to update your benefit elections. During this period, you will receive a task in your My Tasks inbox. Follow the steps below to complete your enrollment.

Open Enrollment

From your homepage:

1. Select the **My Tasks** icon .
2. Action items can be found in your My Tasks inbox. Select the **Open Enrollment** task.
3. Select **Let's Get Started**.
4. Answer the Health Questionnaire for Tobacco Use and select **Continue**. Select **Continue** again to proceed with benefit selection.
5. Select **Manage** for each benefit tile you require updates to.

Notable Mentions:

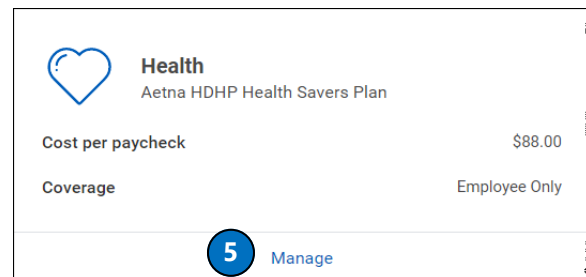
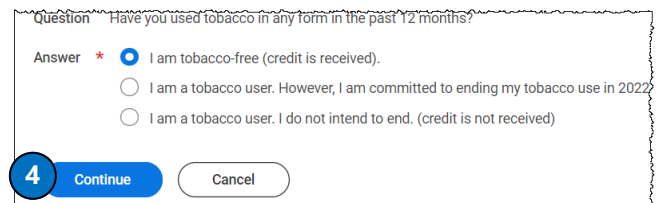
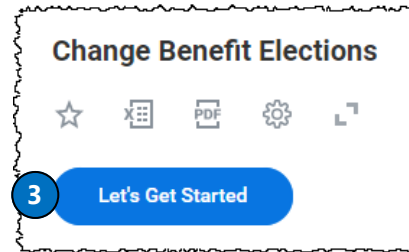
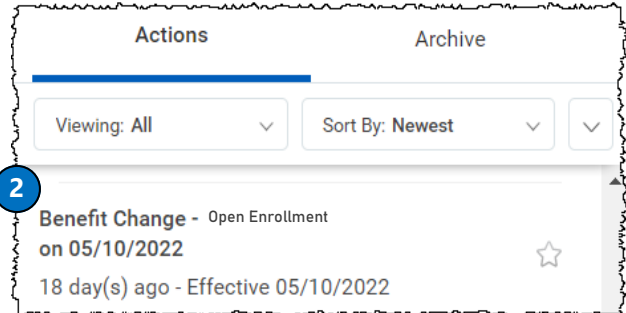
A blue **“Reviewed”** shows you have reviewed the information, and a green **“Updated”** indicated your benefits have been updated.

If you have selected a Health plan, you will need to complete the spousal surcharge tile.

If you have selected the Health Savers Plan you will need to complete the Health Savers Account tile.

If you are adding an eligible disabled child over the age of 26, contact the Benefits teams.

Take the time to ensure your beneficiary(ies) are set up for basic and supplement life insurance.





Benefits: Open Enrollment (con't)

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From your homepage:

6. Choose **Select** or **Waive** for each medical election.

Note: If you want to know more about each plan, choose the **Plan Details** links (in blue) to review.

Note: Remember to **Confirm and Continue** as you page through your benefit elections and make your selections.

7. Proceed to review all benefit tiles available. Once you have completed making your coverage selections, select **Review and Sign**.

Note: If you **Save for Later** or want to make changes before the Open Enrollment window closes, return to the Workday homepage and click on the **Open Enrollment** announcement and resubmit your selections. You must select **Review and Sign** for your selection to save for 2024 benefits.

8. Now that your coverage elections are confirmed select the **Check Box** and proceed by selecting **Submit**. A confirmation statement will appear on the screen. Save the statement or print it for your confirmation of your enrollment.

*Selection	Benefit Plan Details
<input type="radio"/> Select <input checked="" type="radio"/> Waive	Aetna HDHP Health Savers Plan
<input type="radio"/> Select <input checked="" type="radio"/> Waive	Aetna PPO Plus
<input checked="" type="radio"/> Select <input type="radio"/> Waive	Aetna PPO Select

7

Review and Sign Save for Later

8

Electronic Signature

I understand that:

I am making an election concerning the above described benefits. I authorize the plan administrator to enroll me and my dependents in the plan and to change my election during the plan year unless there is a change in my status or I then revoke my earlier election.

I cannot revoke or change this election during the plan year unless there is a change in my status or I then revoke my earlier election.

I verify and affirm that the dependents enrolled for Health, Dental and/or Vision are all eligible for enrollment and including termination. By checking this box, this serves as my electronic signature.

I Accept

Submit Save for Later Cancel

QUESTIONS?

Please email BusinessEducation@vumc.org.