

Open Enrollment 2015

Open Enrollment runs from
Wednesday, May 6, 2015 at 7:00 a.m. Central Time through
Wednesday, May 20, 2015 at 5:00 p.m. Central Time
Coverage starts July 1, 2015 and ends June 30, 2016

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OPEN ENROLLMENT

Open Enrollment is when Nebraska State Government employees can make, or change, their benefit elections. This election process is done in the Employee Work Center. This year, Open Enrollment will be active from Wednesday, May 6, 2015 at 7:00 a.m. Central Time to Wednesday, May 20, 2015 at 5:00 p.m. Central Time.

Open Enrollment 2015

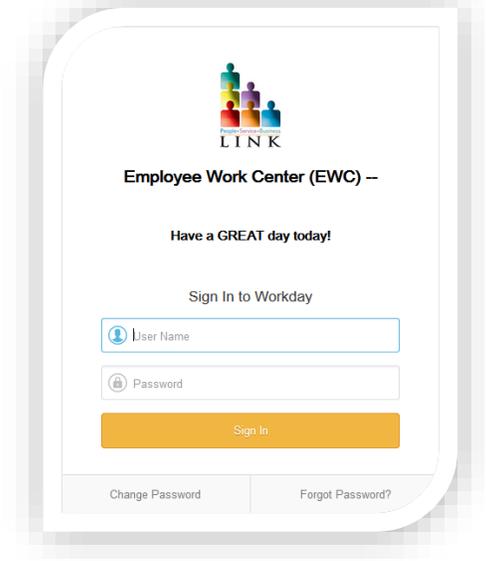
First Time Signing In

You should have received your User Name and Password. If this is your first time signing in to the Employee Work Center, you will be asked to change your password (use the password from your Security Partner in the Old Password field). You will also need to answer three security questions, which will be used if you forget your password in the future.

If you do not know your password, or if you forgot it, you can click “forgot password?” or contact your agency Security Partner / Authorized Agent.

Forgot User Name

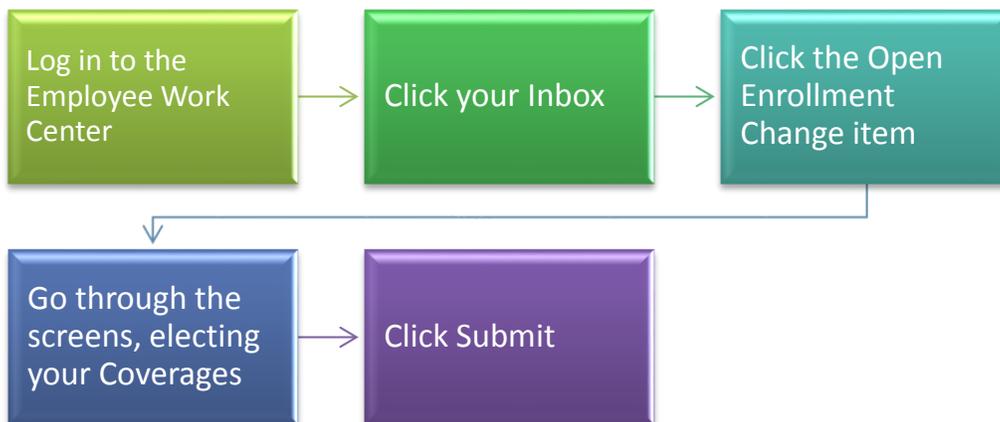
If you do not remember your User Name for the Employee Work Center, contact the LINK Help Desk at as.linkhelp@nebraska.gov or 402-471-6234.



Log in

1. Go to [Employee Work Center](#) (or [click here for the accessible version](#)).
2. Type your User Name, press tab, and then type your password.
3. Click Sign In (or press enter).

Open Enrollment Process Flow

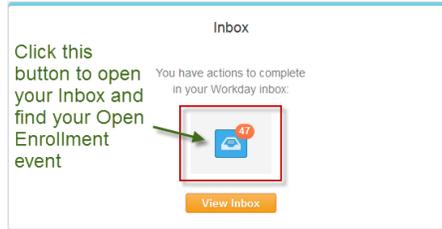


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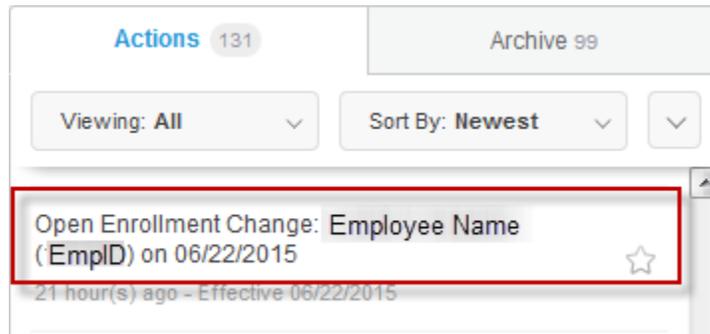
1. Once logged in, you will see an Inbox item on your My Workday 2.0 page (your home page in the Employee Work Center).

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- Click the box in the middle to open your Inbox.



- On the left side of the screen, find and click your Open Enrollment Change item.



- On the right side of the screen, you will see your Change Benefits for Open Enrollment event.

Change Benefits for Open Enrollment Open Enrollment for **Employee Name (Emp ID)** - Step 1 of 7

Event Date: 06/22/2015 Total Employee Net Cost/Credit: **\$131.34 Semi-monthly Cost**

Health Care Elections 7 items

Benefit Plan	*Elect / Waive	Coverage	Enroll Dependents	Employee Cost (Semi-monthly)	Employer Contribution (Semi-monthly)	Plan Description	Provider Website
Medical - United Health Care PPO Consumer Focused Health Plan (HSA Eligible)	<input type="radio"/> Elect <input checked="" type="radio"/> Waive					Summary of Benefits & Coverage - Consumer Focused	United Health Care
Medical - United Health Care Regular	<input type="radio"/> Elect <input checked="" type="radio"/> Waive					Summary of Benefits & Coverage - Regular	United Health Care

On every page of the Open Enrollment process, there is important information and instructions pertaining to your Medical and Insurance coverages. **Be sure to read all instructions carefully.**

- At the bottom of this screen, you will see the Health Care Elections for which you are eligible, depending on your position (whether Full-time or Part-time and whether Permanent or Temporary). This is where you make your Health Care Elections, including Medical, Dental, and Vision.

HEALTH CARE ELECTIONS

- To choose a Medical Plan, click the Elect radio button for that plan.

If you choose the “Medical - United Health Care PPO Consumer Focused Health Plan (HSA Eligible)” plan, you will be allowed to choose a Health Savings Account (HSA) on the next screen.

- If you choose a Medical Plan, you will need to choose the Coverage, in other words, who will be covered by this election. Click the prompt () in the Coverage column for the plan you selected. Choose who you want to cover. Your options are:
 - Employee Only.

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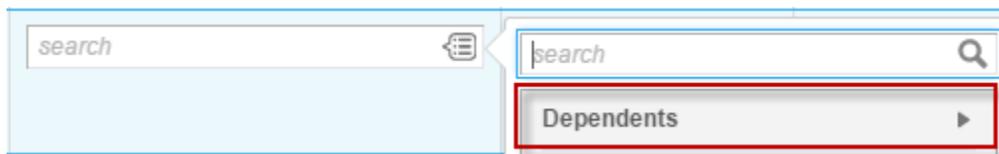
- b. Employee + Spouse.
- c. Employee + Child(ren).
- d. Family.

Benefit Plan	*Elect / Waive	Coverage	Enroll Dependents	Employee Cost (Semi-monthly)	Employer Contribution (Semi-monthly)	Plan Description	Provider Website
Medical - United Health Care High Deductible Plan	<input type="radio"/> Elect <input checked="" type="radio"/> Waive					Summary of Benefits & Costs - 1/00	United Health Care
				Total:	37.50	50.00	

- 3. If you choose anything other than Employee Only, you will need to Enroll Dependents in the next column over.

Enroll Dependents

- 1. You need to choose who will be covered by each Medical Plan. If you already have Medical, Dental, and/or Vision coverage, your dependent(s) are probably in the system, and you will not need to enter them again.
- 2. To enroll your dependents, click the prompt in the Enroll Dependents field. When you click the prompt, be sure to click the Dependents link (the first item in the list). This will show the Dependents already tied to your record.



- 3. If you need to add new dependents, because your dependent(s) is not listed, click Create, and then click Add My Dependent From Enrollment.
- 4. You will be asked, "Is your new dependent already a beneficiary or emergency contact?" Click Yes or No, as appropriate.

Add My Dependent From Enrollment **Employee Name (Emp ID)**...

22 hour(s) ago - Effective 06/22/2015

Is your new dependent already a beneficiary or emergency contact?

Yes
 No

If yes, which one?

search

Use your new dependent as a beneficiary?

Yes
 No

- 5. If you click Yes, you will need to click the prompt under the line that says, "If yes, which one?" Choose the appropriate dependent from the list shown.
- 6. On the last question, click Yes or No whether or not you want to "Use your new dependent as a beneficiary?"
- 7. After you answer and click OK, you will be required to enter the following information for each new dependent:
 - a. Country.
 - b. First Name.

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- c. Last Name.
 - d. Relationship (to the employee).
 - e. Date of Birth.
 - f. Gender.
 - g. While Citizenship Status is not required, please add this information for each dependent. Click the prompt, then click Citizenship Statuses, then choose the appropriate Status from the list.
 - h. You should add the Social Security Number for this person. To do this, click the Add button under National IDs. Complete the appropriate information.
8. Click OK.
- Your Coverage and Dependents must match. For example, if you choose Family coverage, but only enroll your spouse, you will see an error message when you click Continue.
-
9. You will be returned to the Health Care Elections screen. The Employee Cost and Employer Contribution columns will populate for the Plan and Coverages you choose. You can also view a “running total” in the upper right-hand corner of each screen.
- Total Employee Net Cost/Credit
\$198.02 Semi-monthly Cost
10. Elect or Waive the dental and/or vision plans using the same steps outlined above.
11. After making your elections, click Continue.

Navigate Open Enrollment

1. Use Continue or Save for Later at the bottom of each page. On each page after the first, there is a More button that allows the option to either Go Back or Cancel (the first page just shows a Cancel button).
2. If you are in the middle of Open Enrollment and you need to stop, click Save for Later. This saves the information you have entered so far. When you return, those elections will still be there. To continue, click your Inbox, and then click the Open Enrollment Change event. It will start again at the instruction page ... click Continue to the point where you need to make other changes/elections.

HEALTH SAVINGS ACCOUNT (HSA) PLAN DEPENDENCIES

1. If you selected the “Medical - United Health Care PPO Consumer Focused Health Plan (HSA Eligible)” plan, you will be able to choose (or waive) the HSA. If you selected another plan, you are not allowed to choose the HSA.

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- You will see a line that says “Your number of remaining periods for the year.” After clicking Elect, you need to enter a dollar amount to contribute. You can enter the amount for the entire year or you can enter the amount per pay period. The other field will calculate automatically.

Health Savings Election

Benefit Plan	*Elect / Waive	Contribution Range (Annual)	
HSA<=54 - OptumHealth HSA Bank Health Savings Plan for Employees age 54 or younger	<input checked="" type="radio"/> Elect <input type="radio"/> Waive	Your number of remaining periods for the year	24
		How much do you want to contribute for the total year?	<input type="text" value="0.00"/>
		How much do you want to contribute (Semi-monthly)?	<input type="text" value="0.00"/>

Health Savings Account (HSA) and Medical Flex Spending Account

- You may not choose both the HSA account and the Medical Flex account. You can enroll in one or the other, or waive both. The system will allow you to choose both, but, at the end, on the Benefit Elections review screen, you will see a Critical Alert that says, “Medical Flex - ASI Medical Flex cannot be elected if you have elected HSA>=55 - Optum HSA Bank Health Savings Plan for Employees age 55 or older.” You need to click Go Back to make any necessary changes.

SPENDING ACCOUNT ELECTIONS – DEPENDENT CARE FSA AND MEDICAL FLEX FSA

- The next step allows you to choose Dependent Care Flex and/or Medical Flex.
- If you wish to enroll in Dependent Care Flex or Medical Flex, click the Elect radio button for the specific plan.

Spending Account Elections 2 items

Benefit Plan	*Elect / Waive	Contributions		Supporting Information	
Dependent Care Flex - ASI Dependent Flex	<input type="radio"/> Elect <input checked="" type="radio"/> Waive	Your number of remaining periods for the year	24	Minimum Contribution (Annual)	\$72.00
		How much do you want to contribute for the total year?	<input type="text" value="0.00"/>	Maximum Contribution (Annual)	\$5,000.00
		How much do you want to contribute (Semi-monthly)?	<input type="text" value="0.00"/>	Provider Website	ASI
Medical Flex - ASI Medical Flex	<input checked="" type="radio"/> Elect <input type="radio"/> Waive	Your number of remaining periods for the year	24	Minimum Contribution (Annual)	\$120.00
		How much do you want to contribute for the total year?	<input type="text" value="1,200.00"/>	Maximum Contribution (Annual)	\$2,500.00
		How much do you want to contribute (Semi-monthly)?	<input type="text" value="50.00"/>	Provider Website	ASI

- After clicking Elect, you need to enter a dollar amount to contribute. You can enter the amount for the entire year or you can enter the amount per pay period. The other field will automatically calculate.
- After entering your dollar amount, click Continue.

INSURANCE PLAN DEPENDENCIES AND COVERAGE LIMITATIONS

- If you are Full-time employee, you are automatically enrolled in the Basic Life - Aetna Full Time (Employee). You are not able to Waive this election. If you are Part Time, you will be able to Elect or Waive this election.

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2. Previous life insurance elections will be displayed. You can change them by Electing, Waiving, or changing your Coverage Level.

Insurance Plan Dependencies and Coverage Limitations

Benefit Plan	*Elect / Waive	Coverage Level	Covers Dependents	Calculated Coverage	Employee Cost (Monthly)	Employer Contribution (Monthly)	Provider Website
Basic Life - Aetna Full Time (Employee)	<input type="radio"/> Elect <input type="radio"/> Waive	\$20,000		\$20,000.00		\$0.96	Aetna
Optional Supplemental Life - Aetna 0.5 - 5X Salary (Employee)	<input checked="" type="radio"/> Elect	2 X Salary		\$94,000.00	\$2.26		Aetna
Optional Supplemental Life - Aetna 0.5 - 5X Salary (Employee)	<input type="radio"/> Waive						

3. You can choose the following:
 - a. Optional Supplemental Life.
 - b. Dependent Life (if you have dependents in the system).
 - c. Accidental Death and Dismemberment (AD&D).

For Long Term Disability (LTD), all participants will default to their current enrollment. To make changes to LTD, contact your HR representative.

The premiums shown for life insurance are based on your current salary. However, these rates may change if you receive a salary increase and/or a salary decrease.

4. After you make your elections, click Continue.

BENEFICIARY DESIGNATIONS

1. If you choose any plans that require a beneficiary, you will now be asked to designate your beneficiaries. If you had previously designated beneficiaries, your previous selections will populate.
2. To add a beneficiary, you can either choose from your existing beneficiaries, or Create a new one. If you create a new beneficiary, you need to enter information about that person. You are required to enter an address for each beneficiary. You can choose to "Use Existing Address" or enter a different address, if not the same as yours.
3. If the person you wish to designate as a beneficiary is displayed, click their name to add them to the plan. The beneficiary will be displayed in the Beneficiary field.
4. For each person listed, click either Primary Percentage or Contingent Percentage, and then enter the amount in the Percentage field. For each plan, the percentage for the primary beneficiaries must equal 100. For example, in the screenshot below there are three beneficiaries displayed for the Optional Life plan. Their percentages are 15, 25, and 60, which add up to 100.

Beneficiary Designations		Beneficiary	*Beneficiary	*Primary Percentage / Contingent Percentag
Optional Supplemental Life - Aetna 0.5 - 5X Salary (Employee)	Aetna	<input checked="" type="checkbox"/>	<input type="button" value="+"/>	<input checked="" type="radio"/> Primary Percentage <input type="text" value="15"/> <input type="radio"/> Contingent Percentage <input type="text" value="0"/>
			<input type="button" value="-"/>	<input type="radio"/> Primary Percentage <input type="text" value="25"/> <input type="radio"/> Contingent Percentage <input type="text" value="0"/>
			<input type="button" value="-"/>	<input checked="" type="radio"/> Primary Percentage <input type="text" value="60"/> <input type="radio"/> Contingent Percentage <input type="text" value="0"/>
			<input type="button" value="-"/>	<input type="radio"/> Primary Percentage <input type="text" value="0"/> <input type="radio"/> Contingent Percentage <input type="text" value="0"/>

5. To delete a beneficiary, click the blue minus sign to the left of his/her name.

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- You will see a radio button for Contingent Percentage. You are not required to have contingent beneficiaries. However, if you do, the Contingent Percentage must also equal 100 for those beneficiaries.
- When finished with your beneficiary designations, click Continue.

ADDITIONAL BENEFITS ELECTIONS – ELECTRONIC W-2

- One of the final steps is to choose whether you want an electronic version or a paper copy of your W-2.
If you choose Yes, you will be able to access your W-2 sooner than if you choose No.
- Depending on your previous selection (last year), the Elect radio button for W-2 Elections may already be selected. You cannot waive this election. If you click Waive and then click Continue, you will receive an error message.

	Benefit Plan	*Elect / Waive	Coverage
	W-2 Elections - State of Nebraska W-2 Elections	<input checked="" type="radio"/> Elect <input type="radio"/> Waive	Yes

- Click the prompt in the Coverage column to make your selection for accessing your W-2. Choose one of the following (If you do not choose Yes or No, and then click continue, you will get an error message):
 - Yes – to access your W-2 electronically.
 - No – a paper copy of your W-2 will be mailed to you.
- After making your W-2 election, click Continue.

BENEFIT ELECTIONS REVIEW FOR OPEN ENROLLMENT

- After making all of your elections, you will be taken to a review page which displays your elections, waived coverages, and beneficiary designations. Click the arrow to the left of Waived Coverages and Beneficiary Designations to view those items. At the bottom of the page is an Electronic Signature where you will certify that you understand the provisions outlined.

If you selected both the HSA and the FSA, you will see a Critical Alert on this page that says, “Medical Flex - ASI Medical Flex cannot be elected if you have elected HSA \geq 55 - Optum HSA Bank Health Savings Plan for Employees age 55 or older” OR “Medical Flex - ASI Medical Flex cannot be elected if you have elected HSA \leq 54 - Optum HSA Bank Health Savings Plan for Employees age 54 or younger,” depending on your age. You need to click Go Back to make any necessary changes.

- The Elected Coverages table includes:
 - The Benefit Plans you selected.
 - Coverage Begin Date.
 - Deduction Begin Date.
 - Coverage (whom you are covering).
 - Calculated coverage (for life insurance and LTD plans).
 - Dependents (if any).

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- g. Beneficiaries (if any).
 - h. Employee Cost (per pay period) ... i.e., your cost.
 - i. Employer Contribution.
3. At the bottom of this page is an Electronic Signature, with some very important information. Please read all information in the Electronic Signature section carefully.
 4. Before you can submit your elections, you need to check the I Agree check box. When you check this box, you are agreeing to the following statements: "Your name and password are considered your electronic signature and serve as your confirmation of the accuracy of the information submitted. When you mark the "I AGREE" checkbox, you are certifying that you have read and understand the following provisions."

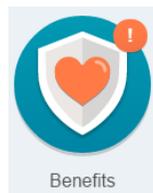


5. Below the Electronic Signature is a comment box. Any comments you submit with your selection process will not alter or change any benefit elections you have made during this process, but will become a permanent part of the record.
6. When you are finished, click Submit.
7. After you submit, you will see a printable confirmation page. To print this page, click the Print button. This will open a PDF version of the page, which is printer-friendly. You can either print a hard copy of this page, or save a copy to your computer.
8. When finished, click Close.
9. The Open Enrollment window will close and you will be taken back to your Employee Work Center home page.

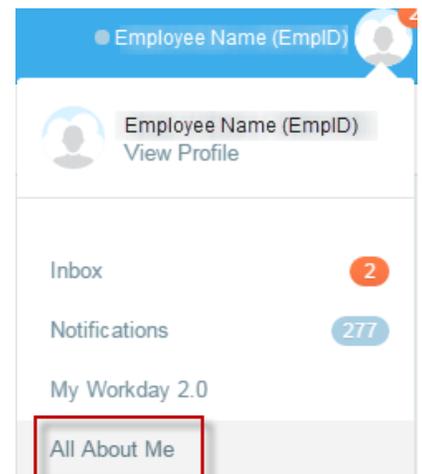
The Open Enrollment Change event will no longer be listed in your Inbox.

CHANGE YOUR ELECTIONS (DURING OPEN ENROLLMENT)

1. During the period that Open Enrollment is active (Wednesday, May 6, 2015 at 7:00 a.m. Central Time - Wednesday, May 20, 2015 at 5:00 p.m. Central Time), you are allowed to make changes to your elections. Go to your All About Me page by clicking your name in the upper right-hand corner, and then selecting All About Me (screenshot at right).
2. On the next screen, click the Benefits icon.



3. Under Current Cost, you will see a button (link) to Change Open Enrollment.



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4. If you click this link, you will be returned to the beginning of the Open Enrollment event, where you can make changes by following the steps in this document.

[Change Open Enrollment](#)

If you click this link, you **MUST** go through the entire Open Enrollment process and obtain a new confirmation page, even if you don't make changes.

OPEN ENROLLMENT ASSISTANCE

If you need assistance completing Open Enrollment, you have several options available:

- There will be multiple Open Enrollment labs where employees can find one-on-one assistance with Open Enrollment. You will be able to find the dates, times, and locations at <http://link.nebraska.gov/>.
- Contact the LINK Help Desk at 402-471-6234 or as.linkhelp@nebraska.gov.
- Contact your agency Human Resource department.

LINK HELP DESK CONTACT INFORMATION

The LINK Help Desk provides assistance for the following programs:

- The Employee Work Center
- The Employee Development Center
- The Recruitment & Selection Center

Email: as.linkhelp@nebraska.gov

Phone: 402.471.6234