

Benefit change requests (outside of new hire and open enrollment)

You have 30 days including the date of the qualifying event to submit your request to change your coverage through Workday. Documentation of the status change must be provided before the change will be approved.

The only exception is for Medicare/Medicaid in which you have 60 days.

To request a change, you will first launch a benefit change request:

1. Go to <https://link.nebraska.gov/>
2. Log in to Workday
3. Click on Menu and select Benefits (top left corner of screen)
4. Click Change Benefits
5. Choose the “change reason” that fits your situation from the Change Reason drop-down menu.
6. Enter the date the benefit change request prompts you for
7. Click Submit, then click Open, then click “Let’s Get Started”

You will then work through/complete the benefit change request and submit for review.

Following is the documentation needed for the various benefit change requests:

Birth: Documentation accepted is either a scanned copy of either the “keepsake” birth certificate from the hospital (must include parent name, newborn name and date of birth) or the government issued birth certificate. Please note, the “keepsake” birth certificate is **not** the Hospital Worksheet or the crib tag.

Medicaid: Notice of Action letter

Where to find the Notice of Action letter online

- Log in to Access Nebraska
- Click Manage Benefits
- Click Correspondence
- Click the down arrow
- On the file link – click the piece of paper (this should be the Notice of Action letter).

Loss of other credible group coverage: Normally when you are losing coverage due to becoming ineligible you are offered COBRA. While you may not want or need COBRA, the notification packet contains all the information of the plans you are losing and the date the coverages are ending, that is the documentation that most people use (provide entire COBRA packet).

Otherwise a letter from the HR/Benefits department on their letterhead stating what specific coverage is ending, the date the coverage is ending and whose coverage is ending (by name).

Or both the benefit summary and certificate of prior coverage

All documentation needs to include:

- last date of coverage
- what coverage is ending (medical, dental and/or vision)
- who lost coverage (by name for each of the coverages lost)

Gain of other credible group coverage: The confirmation statement from the new coverage may have all of this information.

Otherwise a letter from the HR/Benefits department on their letterhead stating what specific coverage is starting, the effective date of the coverage and who gained coverage for each plan elected.

Or both the benefit summary and certificate of current coverage

All documentation needs to include:

- first date of coverage
- what coverage is gained (medical, dental and/or vision)
- who gained coverage (by name for each of the coverages gained)

Marriage: Marriage Certificate stamped by the Court

Medicare: The documentation will be either the Medicare Part B card or the letter from Social Security Administration.

Divorce – divorce decree signed by the Judge

Spouse Open Enrollment: Confirmation statement from the prior Open Enrollment (showing who is/is not enrolled in the specific benefits) and Confirmation statement for the current Open Enrollment (upcoming plan year showing who is/is not enrolled in the specific benefits and the effective date coverage is ending/starting).

Otherwise, a letter from the HR/Benefits department on their letterhead stating medical coverage is ending/starting, the date the coverage is ending/starting and whose coverage is ending/starting (by name)

For additional information or questions, please contact the Benefits Team at as.employeebenefits@nebraska.gov or 402-471-4443 or 877-721-2228