

# UW Hospitals and Clinics

## New Hire Benefit Enrollment Guide

This enrollment guide will walk you step-by-step through the enrollment process and outline all required information needed to ensure a successful enrollment in your new hire benefits.

### Questions?

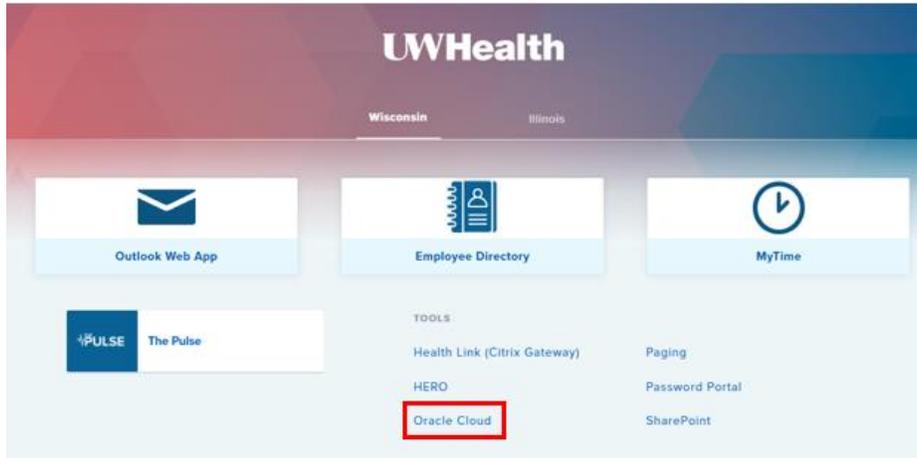
If you have any questions after reviewing the benefit information below, please reach out to the UW Health HR Service Center by submitting a [Benefit Enrollment Opportunities & Change question](#) through The Pulse (can be accessed once you start) or by calling (608) 263-6500 Monday – Friday 7:30 AM – 5:00 PM.

# Accessing Onboarding Tasks

Onboarding tasks are assigned to you within Oracle Cloud to outline the required steps that must be taken within your first few days of employment.

## Viewing Your Onboarding Tasks

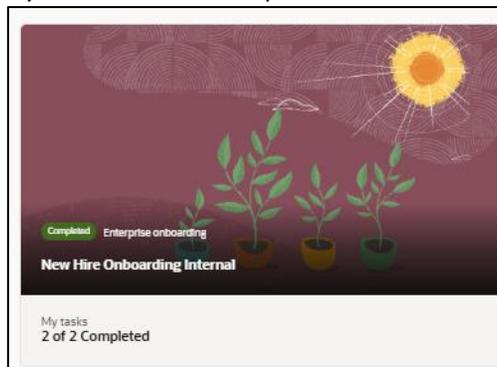
Navigate to the [The Pulse](#) and access [Oracle Cloud](#).



Once logged into Oracle Cloud, click the *Journeys* tile to review the tasks assigned to you.



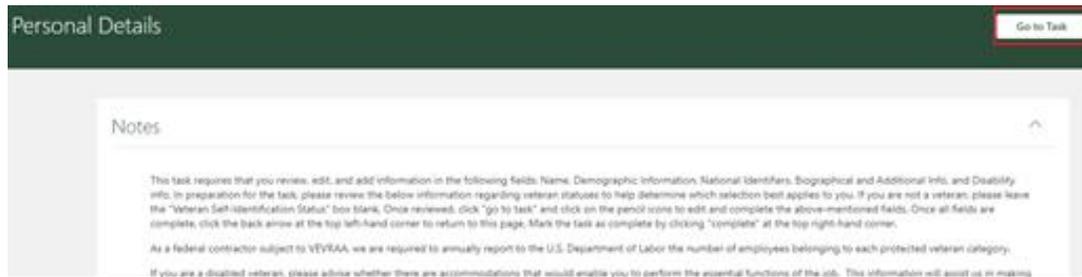
Click on the New Hire Onboarding journey to review and complete tasks:



All tasks will be included with their respective resources and due dates.

# Personal Details

To complete the personal details, which include verifying important information needed for a successful benefit enrollment, click onto the task, and review the information. When you have reviewed the information and you are ready to continue, click *Go to Task*.



As you are reviewing your personal information, to view full details and make any edits, click on the pencil icon to the far right.

## Name

If updates are needed to your name, changes can be made in this section. Please note any changes to your legal name require you to submit your Social Security Card for review; however, if you have a [preferred name](#), you can update the system with that information. Click *Submit* when you are finished.

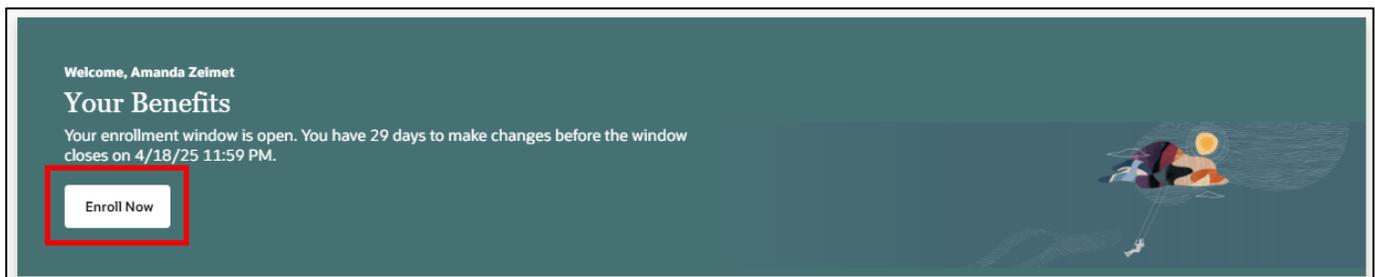
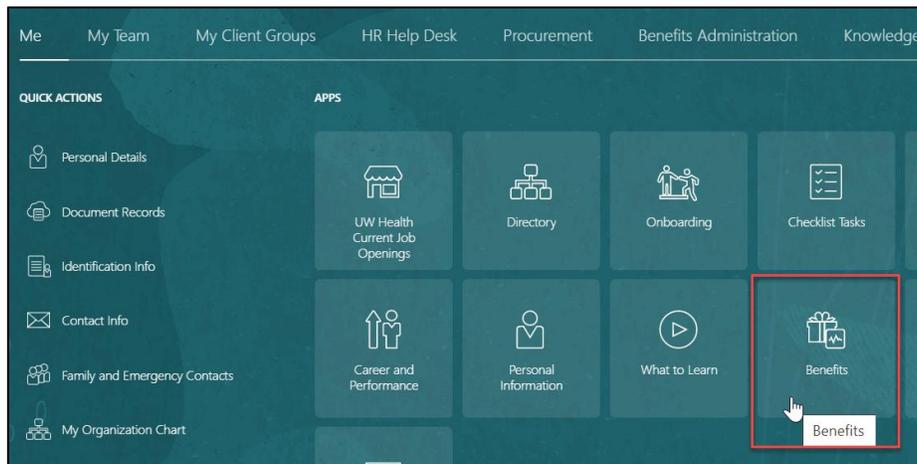
## Demographic Information

Within this section, you are responsible for reviewing and making updates to your ethnicity, veteran status, marital status and more. All of this information is important and there are notes below on what is required for a successful benefit enrollment.

Once you have completed these fields and verified all information, click *Save*.

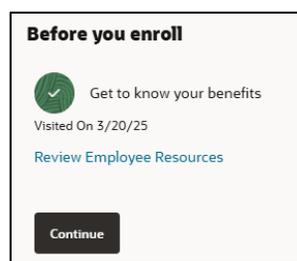
# Benefit Enrollment

To complete your benefit enrollment, click on the *Benefit Enrollment* task and review the instructions on the page on how to navigate to the *Benefits* homepage. (Me > Benefits > Enroll Now)



## Before You Enroll

**Get to know your benefits:** The first step in the process is to get to know your benefits. In this step, you can review employee resources, which will outline benefit details and additional information. You can click to review, or Continue to proceed.



**Choose how you want to enroll:** Oracle will guide you through your options and display benefits you are eligible for. It is selected as the Discovery path, which is recommended as the default option. Click Continue to proceed.

**Verify people you'd like to cover:** Before enrolling, you must list any individual you wish to have covered by your benefits as a dependent or beneficiary, as well as include any relevant information for them.

Please note: This will be an inclusive list of any contacts you have set up in the system, including beneficiaries, dependents, emergency contacts and more. Not all people on this screen are eligible to be covered by benefits. The designation of the beneficiary/dependent for each plan will be done in the next step.

To Add Dependent/Beneficiary

Click + at the top right of the screen. As you are going through this, you will be required to provide accurate information for all dependents – including date of birth, marital status, and Social Security Number. Ensure you have this information

readily accessible during the enrollment process. **Do not add a contact more than one time.** If you experience any issues, please contact the HR Service Center.

**Basic info**

Global Name

First Name Middle Name Last Name Required

Suffix Credentials Preferred Name

Relationship

Relationship Effective Date (Use Contact DoB or Employee Hire D... Required Gender Required

Date of Birth Required This person is an emergency contact Primary Contact

## Basic Information

The following fields must be completed in this section:

- First Name
- Middle Name
- Last Name
- Relationship – Spouse, Child, Stepchild, etc.
- Effective Date – Use this contact’s date of birth or your hire date in this field. This must be on or prior to your hire date in order to effectively enroll them in benefits.
- Gender
- Date of Birth

## Communication & Address

Add personal contact information for the dependents who are listed. This is particularly important if you are marking this contact as an emergency contact.

## National Identifiers

This is where you will list the Social Security Number for any dependents. Any dependent who is covered by a health, dental, or vision insurance benefit must have a Social Security Number listed. Individuals who are listed as a beneficiary or who are not covered by your benefit plans are not required to have this information.

To enter in the Social Security Number,

- Select *United States* as Country
- Select *Social Security Number* as National ID Type
- Enter the number as the National ID

*Note: Issue date and expiration date are not required.*

**National identifiers**

Country United States National ID Type Social Security Number National ID Required

Issue Date Place of Issue Expiration Date

Click Submit.

Once all contacts are added and information is verified as correct, click Continue.

**Enroll in Benefits that matter to you:** You’re all set! Click Edit to make your elections.

## Accept Terms & Conditions

You will be prompted to accept the terms & conditions to complete your enrollment. You can click into the links to review the details. Once you are ready to continue, click *Accept* to move forward with your enrollment.

## Authorization

Please [click here](#) to review the Terms and Conditions before accepting.

By clicking Accept, I understand that Wis. Stat. §943.395 provides criminal penalties for knowingly making false or fraudulent claims on this election of benefits and hereby certify that, to the best of my knowledge and belief, all information provided is true and correct.

I agree to the provisions of the plans in which I have enrolled and hereby authorize deduction of the premium(s) from my salary.

I understand that additional documentation may be required at any time to verify eligibility, and I agree to cooperate with those requests.

I authorize UW Hospitals and Clinics to send any necessary personal information to my selected providers to initiate and support coverage.

Decline

Accept

# Health Insurance

## Opt-Out Incentive

The opt-out incentive is a benefit available to UWHC employees who are eligible for, but waive health insurance through UWHC and meet eligibility requirements as outlined by ETF. This includes not being covered by another State of Wisconsin health insurance plan.

If you are not enrolling in health insurance, you may be eligible for the Opt-Out Incentive. To elect the Opt-Out Incentive as a new hire, you will need to click Enroll on the appropriate box, *Enroll (Waiving Medical)*, in the Opt-Out section and check *Waive* in the Medical section.

If you elect the Opt-Out Incentive, ETF and HR are required to review your eligibility and verify that information.

Opt-Out	Click Enroll to waive the opt out, because you are enrolling in health insurance with UWHC.	This is the default option displayed; this option would apply if you are not eligible for the opt out, but waiving health.
<p>Medical Opt-Out Incentive</p> <p>Enroll (Waiving Medical)</p> <p>Enroll View Details</p>	<p><b>Enrolled</b> Medical Opt-Out Incentive</p> <p>Waive (Enrolling in Medical)</p> <p>Unenroll View Details</p>	<p>Medical Opt-Out Incentive</p> <p>Waive (Waiving Medical and Not eligible for Opt-Out)</p> <p>Enroll View Details</p>

## Enrolling in Health Insurance?

If you are enrolling in health insurance, you will want to choose one of the health plans listed at the appropriate coverage level by clicking Enroll in the appropriate box.

Note: There are many health plans available to UWHC employees, so you will want to find the correct health plan and plan design based on your desired election (health plan, HDHP or non-HDHP, with or without dental).

## Early Coverage

As a UWHC employee, you have the option to enroll in early coverage (effective the 1<sup>st</sup> of the month following your start date) and you would be responsible for paying 100% of the premium until employer contributions begin. If you are wanting to enroll in early coverage, please complete your new hire elections and contact the HR Service Center to adjust the premiums and coverage start date for your health insurance.

## Single or Family Coverage?

Depending on the coverage level you are planning to enroll in, click Enroll on the appropriate box for single or family coverage.

If you have successfully added eligible dependents on the previous screen, you should see them set up here as dependents to cover by this plan.

- *If you do not see a dependent listed or do not have the family plan listed and you should, contact the HR Service Center for assistance.*

If you enroll family coverage, you will be prompted to designate the dependents you wish to be covered by the plan.

**Please note:** As a UWHC employee, the Department of Employee Trust Funds (ETF) who administers the health insurance

benefit requires that all eligible members of a family are covered by a family plan. All dependents must be selected as part of this process to prevent any delays in your enrollment. Additionally, documentation to verify the eligibility of the relationship of each dependent must be provided as part of the enrollment process.

### Enrolling in a High Deductible Health Plan?

If you are wanting to enroll in a High Deductible Health Plan (HDHP), you must select the health plan that lists “HDHP” in the name by clicking Enroll on the appropriate box.

Quartz UW Health **HDHP** Dental (Dane County Providers)

### Enrolling in Uniform Dental Insurance?

If you are enrolling in a health insurance plan with the uniform dental benefit, you must select the health plan with the dental option listed by clicking Enroll on the appropriate box.

Quartz UW Health **Dental** (Dane County Providers)

Quartz UW Health **No Dental** (Dane County Providers)

Once you have successfully made your election for health insurance, click *Continue*.

## Dental Insurance

In this section, you would make your election for any supplemental dental benefits, including the Preventive plan.

### Enrolling in Dental Insurance?

If you are planning to enroll in the Supplemental Dental, Select or Select Plus, or the Preventive Dental plan, review your options and click Enroll for the appropriate option based on your desired election. The default option selected will be Waive.

### Coverage Level?

Dependent on the plan selected, you have various options of the different coverage levels to have – *employee only*, *employee + spouse*, etc. Click Enroll on the appropriate box and designate the dependents you wish to have covered by the plan.

- *If you do not see a dependent listed, contact the HR Service Center for assistance.*

Once you have successfully made your election for dental insurance, click *Continue*.

## Vision Insurance

### Enrolling in Vision Insurance?

If you are planning to enroll in the DeltaVision plan, review your options and click Enroll on the appropriate box for the coverage level you are selecting. The default option selected will be Waive.

### Coverage Level?

When enrolling in the DeltaVision insurance, you have the option to enroll in employee only, employee + spouse, employee + child(ren) or family coverage. Click Enroll on the appropriate box and designate the dependents you wish to have covered by the plan.

- *If you do not see a dependent listed, contact the HR Service Center for assistance.*

Once you have successfully made your election for vision insurance, click *Continue*.

## Spending Accounts

### Health Care Flexible Spending Account

If you are interested in enrolling in a Health Care FSA, click Enroll in the box to elect and type in your annual election (up to the IRS maximum). Keep in mind these contributions will be taken over the remaining pay periods in the year, and as you enter an amount and click Save, it will calculate your per pay period deduction. Once you have determined the amount of your annual election, click *Continue*

### **Dependent Care Flexible Spending Account**

If you are interested in enrolling in a Dependent Care FSA, click Enroll in the box to elect and type in your annual election (up to the IRS maximum). Keep in mind these contributions will be taken over the remaining pay periods in the year, and as you enter an amount and click Save, it will calculate your per pay period deduction. Once you have determined the amount of your annual election, click *Continue*.

Once you have successfully made your election for your Health Care Flexible Spending Account and/or Dependent Care Flexible Spending Account, click *Continue*.

## **Savings Accounts**

### **Enrolled in a High Deductible Health Plan?**

If you are enrolled in a high-deductible health plan (HDHP), you are required to complete the enrollment in a health savings account (HSA). Although you are requested to be enrolled in the plan, you are not required to contribute your own dollars to this account.

### **Single or Family HDHP?**

Dependent on the coverage level for your HDHP, you must select a health savings account at that same level as well by clicking Enroll in the box for *Single* or *Family*.

### **Employee Contribution**

You have the option to make a contribution to your health savings account by typing in an amount between 0 and the IRS maximum. Keep in mind, these contributions will be taken over the remaining pay periods in the year, and as you enter an amount and click Save, it will calculate your per pay period deduction. Once you have determined the amount of employee contributions, click *Continue*

### **HSA Employer Contribution**

By default, this box will be checked. No action is required by you in this section. If enrolled in an HDHP, you will receive employer contributions towards your HSA.

### **Limited Purpose Flexible Spending Account**

If you are interested in enrolling in a Limited Purpose FSA, click Enroll in the box to elect and type in your annual election (up to the IRS maximum). Keep in mind these contributions will be taken over the remaining pay periods in the year, and as you enter an amount and click Save, it will calculate your per pay period deduction. Once you have determined the amount of your annual election, click *Continue*.

Once you have successfully made your election for your Health Savings Account and/or Limited Purpose FSA, click *Continue*.

## **Life Insurance**

With the State Group Life Insurance benefit, you can enroll in up to 5x of coverage. Based on your desired units of coverage, the appropriate boxes should be checked to make that election:

<b>Units of Coverage</b>	<b>Election Option</b>
1	Basic

2	Basic + Supplemental
3	Basic + Supplemental + 1 Unit of Additional
4	Basic + Supplemental + 2 Units of Additional
5	Basic + Supplemental + 3 Units of Additional

To make the elections, click Enroll on the appropriate boxes within the sections for coverage (Basic, Supplemental, Additional – 1x, 2x, or 3x)

You can also elect Spouse or Dependent coverage if you have an eligible dependent to cover by this plan. To enroll, click Enroll the box for 1 or 2 units of coverage. You do not designate any dependents to cover by this plan as it is a blanket policy that applies to all eligible dependents.

Once you have successfully made your election for your State Group Life Insurance benefit, click *Continue*.

## Supplemental Life Insurance

### Supplemental Life Insurance

If you are planning to enroll in Supplemental Life Insurance for yourself, spouse and/or dependent children, click Enroll on the box enroll in the coverage you desire and enter in the amount of coverage (up to the maximum at time of initial offering).

- **Note:** To enroll in Supplemental Life – Spouse or Supplemental Life – Dependent Children, you must be enrolled in Supplemental Life – Employee coverage.

### AD&D with Identify Theft Protection

If you are planning to enroll in AD&D with Identify Theft Protection, click Enroll on the box based on the desired coverage level (Single or Family). To select the coverage amount, choose from the drop down. You will also be prompted to designate the beneficiary(ies) for this plan.

Once you have successfully made your election for Supplemental Life Insurance, click *Continue*.

## Disability

### Income Continuation Insurance (ICI)

If you are planning to enroll in ICI coverage, click Enroll in the option to Elect coverage.

Once you have successfully made your election for your disability insurance, click *Continue*.

## Other Benefit Plan(s)

### Accident Insurance

If you are planning to enroll in Accident Insurance, click Enroll in the option to elect coverage.

Once you have successfully made your election for this plan, click *Continue*.

## Retirement

Although the retirement option is displayed here, this election cannot be modified. This is intended to display what the required percentage of employee and employer contribution is for the current benefit year.

## Review & Submit

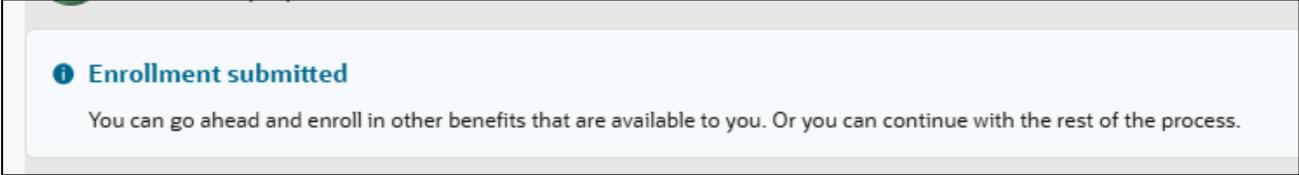
The final step of the enrollment process is to review and submit our elections. Take the opportunity to review the elections made, dependents designated and premiums for each plan.

**Total Cost Per Pay Period:** This is the total cost per pay period based on elections made. There's a breakdown below of the pretax and after tax portions of that, as well as an annual cost (which is the total cost multiplied by 24 pay periods throughout the year).

Once you have successfully made all your desired elections, click *Submit*.

Note: if there are any issues with elections made, you will receive an error message once you click submit to address/correct those issues.

Once you successfully submit, you will receive a confirmation:

A screenshot of a confirmation message box. It has a light blue background with a white border. On the left, there is a blue circular icon with a white exclamation mark. To its right, the text "Enrollment submitted" is written in a bold, blue font. Below this, in a smaller, grey font, is the text: "You can go ahead and enroll in other benefits that are available to you. Or you can continue with the rest of the process."

### Enrollment submitted

You can go ahead and enroll in other benefits that are available to you. Or you can continue with the rest of the process.

Click Continue to most onto Post-Enrollment tasks.

## Post-Enrollment

**Complete pending actions:** Pending actions are the final step in successfully completing your enrollment and will vary depending on what you had elected as coverage. Review the information here on what action is required to resolve the pending actions.

**Note:** If you receive a message stating "You're up to date on your tasks" there are no pending actions to review.

### Opt-Out Incentive – Proof of Coverage

If you elect to receive the Opt Out Incentive as a new hire, your confirmation will display that your plan is suspended.

This triggers a pending action for HR to review and complete in advance of your start date. **No action is required by you;** however, this will display as a pending action. Once your eligibility has been reviewed, HR will update this information and a communication will be sent to your work email.

### Requires Additional Dependent Designation

If you elected to enroll in a plan to cover any eligible dependents, you are required to check the boxes during the enrollment process of the dependents to be covered. If this information is missed, a pending action will be displayed requiring you to review the enrollment and designate the correct dependents.

To complete pending action,

- Click into the pending action
- Review the plan and plan option elected
- Review the Who do you want to cover?
- If there is a dependent who should be covered, select their name
- Once complete, click *Save & Close*

### Designate Beneficiary

If you are enrolled in the AD&D plan and did not designate a beneficiary as part of the enrollment process, this will appear as a pending action.

To complete pending action,

- Click into the pending action
- If the desired beneficiary is listed, designate the appropriate percentage for the primary and contingent beneficiaries. If designating multiple as primary or multiple as contingent, the sum of percentages must equal 100%
  - *If the desired beneficiary is not listed, contact the HR Service Center for assistance*
- Once complete, click *Save & Close*

## Review Payroll Deductions

Based on the effective date of your coverage, you will begin seeing deductions for the benefits you had elected to enroll in. Employees are responsible for reviewing their paycheck to verify the deductions.

*Note: If your enrollment was completed after deductions should have begun for any benefits, you may see a retro adjustment of missed premiums on your paycheck.*

If you have any questions, please contact the HR Service Center.