Sun Health UKG (formerly Kronos)

Open Enrollment Instructions

The following is a step-by-step guide for to enroll or change your benefits during Open Enrollment by using UKG Workforce Ready system. This training document should be used in conjunction with your Team Member Benefits Guide provided by your HR Benefits Team. Please contact your Benefits Team at HRSupport@sunhealth.org for any questions.

1. Login to UKG Workforce Ready at https://secure.saashr.com/ta/6144183.login

WORKFORCE READY	
L Username	
Password	
LOGIN	
Forgot your password?	

2. Click <u>My Info (single person icon) > My Benefits</u> > click on <u>Enrollment</u>.





3. Choose <u>Start</u> at the bottom of the Open Enrollment area.



4. This is where you begin selecting or waiving benefits. If you do not select or waive each benefit, you will not be able to successfully submit your election.



5. Review the instructions before beginning your benefit selections. On the left column you will find a list of benefits that you will need to review and select or waive.

	CONTINUE
Instructions	Instructions
Supporting Information	As you navigate through your benefit categories (Medical, Dental, Vision, etc.), review the coverage which best meets your family needs.
Medical	
Dental	Note that there are options to compare plan pricing and features to assist you with your selections.
Vision	Once you have decided on a plan, click on the "select" checkbox next to the plan. If you are not interested in enrollment under a certain category you MUST waive the plan by
Company Paid Life Insurance & AD&D	clicking "Waive this Option" on the top left corner.
Supplemental Life	When selecting a plan that requires a dependent enrollment (e.g. Employee plus Spouse, Children or Family) you will need to define those dependents. You will need to have
Short Term Disability	your dependent information handy such as their SSN, birth date and contact information.
Long Term Disability	NOTE: You must complete the Confirmation Selection tab, enter your electronic signature and Kronos password for your enrollment to be considered for
Accident Insurance	activation.
Critical Insurance	Your information will be forwarded to the HR Benefits Team for review and approval. You can always return to view your benefit submission status or approved benefits.
Flexible Spending Accounts	

7. When multiple plans exist for the same benefit as they do with Medical and Dental, you can compare the cost of plans by choosing by clicking "Compare Plans" on the top right.

Instructions	Medical Compare Plans
Supporting Information	Three Medical plans available to you:
Medical	HDHP with Health Savings Account Base Plan
Dental	Buy-Up Plan "Ask your HR Representative or Campus Wellness Champion for information on how to earn a discount on your health insurance premium by participating in the Employee Wellbeing Program or employer funded Health Savings Account if participating in the HDMP
Vision	
Company Paid Life Insurance & AD&D	
Supplemental Life	
Short Term Disability	High Leductible Health Plan
Long Term Disability	High Deductible Health Plan
Accident Insurance	Coverage Name
Critical Insurance	
Flexible Spending Accounts	Open Acress Base Plan
Confirm & Submit	Open Access Bas Plan
	Coverage Name -
	Open access Buy Up Plan
	Open Acceds Buy Up Plan
	Name

8. Your current benefits will have a "Previously Enrolled" label. You can select the benefit plan you want to participate in by clicking the box next to the appropriate plan. If you do not want to enroll in the benefit, you can waive the benefit by clicking the box at the upper left portion of your screen.

Instructions	Medical	Compare Plan
Supporting Information	Three Medical plans available to you:	
Medical	HDHP with Health Savings Account	
Dental	Bary-Up Plan **** **** **** **** ****	unded Health Savings Account if participating
Vision		
Company Paid Life Insurance & AD&D		
Supplemental Life	Waive all Medical	
Short Term Disability	igh Deductible Health Plan	
Long Term Disability	High Dedictible Health Plan	
Accident Insurance	Coverage 11 ume	
Critical Insurance		
Flexible Spending Accounts	Open Access Base Plan	
Confirm & Submit	Open Accelle Base Plan	
	Coverage hume	
	C Open Access Bity Un Plan	
	Open Access Buy Up Plan	
	Coverage Name -	

9. When selecting a benefit, you will need to select "Coverage Level" for all benefits desired by using the drop down option.

Fill in Required Info for Selected Plan	X	
	Fill in Required Info for Selected Plan	×
_	Coverage Level	
	Coverage *	
	Employee Employee and Spouse Employee and Child(ren) Employee and Family	ND SELECT

10. Complete information for your "Dependent" and/or "Beneficiary." Dependent applies to when adding your spouse or children to a medical, dental and/or vision plan. Beneficiary applies when you would like to designate a beneficiary for your life insurance coverage.*

The following dependent/beneficiary information is required:

- Name
- Social Security Number
- Date of Birth
- Gender
- Full-Time Student status**

For dependents covered under medical, dental or life coverage, the only acceptable choices are "SPOUSE" and "CHILD."

^{*}If adding a beneficiary, you will be prompted to indicate the percentage of distribution for each beneficiary on the benefit screen.

**Your dependents, child(ren) and/or spouse do not need to be full-time students to participate in benefits. Therefore you can answer Yes or No. This is just a required field by UKG.

Once all information is entered and verified, click "Save and Select." See the following image for an example.

Fill in Required Info for Sel	ected Plan		×
Coverage Level			
Coverage *			
Employee and Spouse		,	~
Spouse			
(i) Require 1 Spouse			
✓ Page 1 of 1 ▶ 0 Rows			+ Add 👻
↑ Name	Relationship	Birth Date	Actions
(i) No Data to Display			
		CANCEL	TE AND SELECT

11. Continue through each benefit tab until all benefit tabs have been completed. Completed benefit tabs will be marked with a green checkmark as shown on the next page.

IMPORTANT:

You will not be able to complete and submit your enrollment until you have either elected or waived each benefit tab.

13.Confirm your selections by reviewing the "Confirm & Select " tab. If any tabs are missing the green checkmark, go back to that tab and select or waive that benefit to complete your elections. Once you have reviewed your elections, choose "Submit ." On the Confirm & Submit tab you also can click the "Download PDF" to save a copy of your records.

Started on May 11, 2021	SUBMIT
Instructions	Confirm & Submit
Medical	READ CAREFULLY BEFORE SUBMITTING BENEFIT REQUEST
Oental	Thank you for selecting (or waiving) your benefit elections. Please take a moment to review the plan and coverage levels.
Vision	Note: If you choose to waive coverage for any category (Medical, Dental, Vision, etc) you may not be able to enroll back into the plan(s) until the next Annual Open Enrollment unless you experience a Qualified Life Event (QLE). Review your Benefits Guide for a full list of Qualified Life Events. Under a QLE you have 31 days from the event to submit a benefit request through Kronos and submit proper documentation.
Company Paid Life Insurance & AD&D	If you are satisfied with your benefit plan selections and have completed each category you will be able to click the "Submit Request" option which will prompt you to enter your name and Kronos password.
Supplemental Life	If the "Submit Request" option is not available then you have an error. Common errors are as follows:
Short Term Disability	Dependents may still need to be added and applied to the benefit plan Beneficiary information may still need to be added and applied to the benefit plan including SSN & date of birth(s) The "Why Converse" actions may still need to be added and applied to the benefit plan including SSN & date of birth(s)
🖉 Long Term Disability - Company Paid	 Here wave coverage option may not be selected on a plan you do not want to enrom in. Hint: Each category tab should be shaded once completed. If a tab is not shaded then that specific tab needs further attention before beenfits can be submitted
Accident Insurance	The Human Resources Benefit Team will review your benefit submission and will contact you with any questions. You may reach the Benefit Team at HRSupport@sunhealth.org or 623-777-2604 or 623- 777-2602.
Critical Insurance	± Download PDF
Flexible Spending Accounts	Total Plans: Estimated Monthly Premium
Confirm & Submit	2 Estimated Monthly Taxable Income

14. After you click "Submit," you will be prompted to enter your password you use to log into UKG. If you receive an error, this indicates you did not enter the correct password.

You may contact your Benefits Team at HRSupport@sunhealth.org

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