UKG Pro Benefits Hub
Employee Open Enrollment Guide

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Contents

Open Enrollment Period and Election Process 3
Start an open enrollment session 3
Open enrollment details 4
Update family profiles 4
Select benefits 6
Medical 7
Compare medical plans 9
Dental 12
Vision 13
HSA 14
Basic Life 16
Upload documents 18
Finish open enrollment 19
View and print your benefits summary 20

Open Enrollment Period and Election Process

Open Enrollment is a period during the calendar year when employees can make additions or changes to their benefit plans.

The Open Enrollment session is configured by the Benefits Hub Administrator in UKG Pro Benefits Hub. Once configured, employees can review, elect, and submit benefit choices during the Open Enrollment session. For example, employees may change health care, life insurance, and short-term disability coverage for themselves and eligible family members.

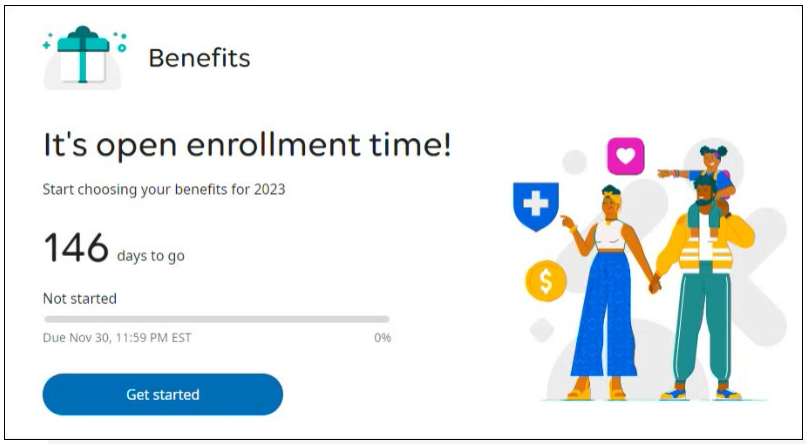
Before beginning the process of electing benefits, employees should read benefit plan information and plan their benefit choices ahead of time to make sure enough time is available to complete the process.

Start an open enrollment session

UKG Pro Benefits Hub enables you to choose your benefits for the upcoming calendar year using the benefits open enrollment feature. Before you select your benefits, you will review company information related to your upcoming benefits and update your family profiles.

Navigation: Menu > Myself > Benefits > Benefits Hub

1. From the **Benefits** sections, select **Get started**.



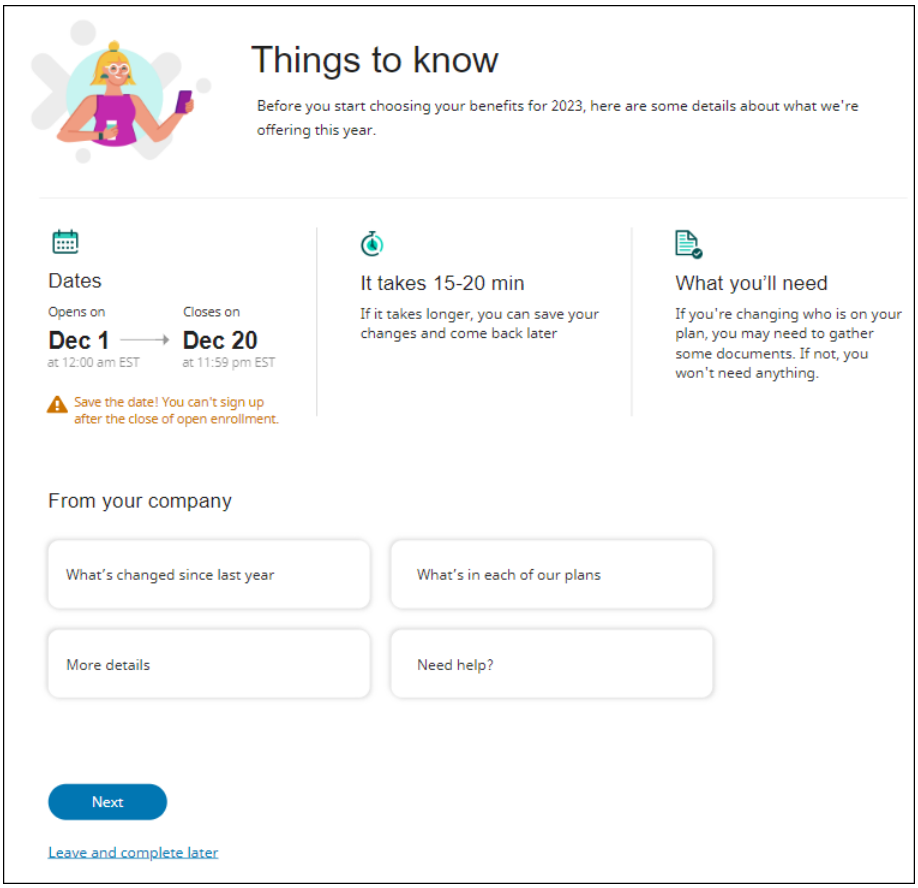
Note:
During the Open Enrollment period, a shortcut to the benefit elections tool is available from the home page when using the Smart dashboard.

2. At the **Welcome to open enrollment** window, select **Let's get this started**.

The Open Enrollment wizard displays.

Open enrollment details

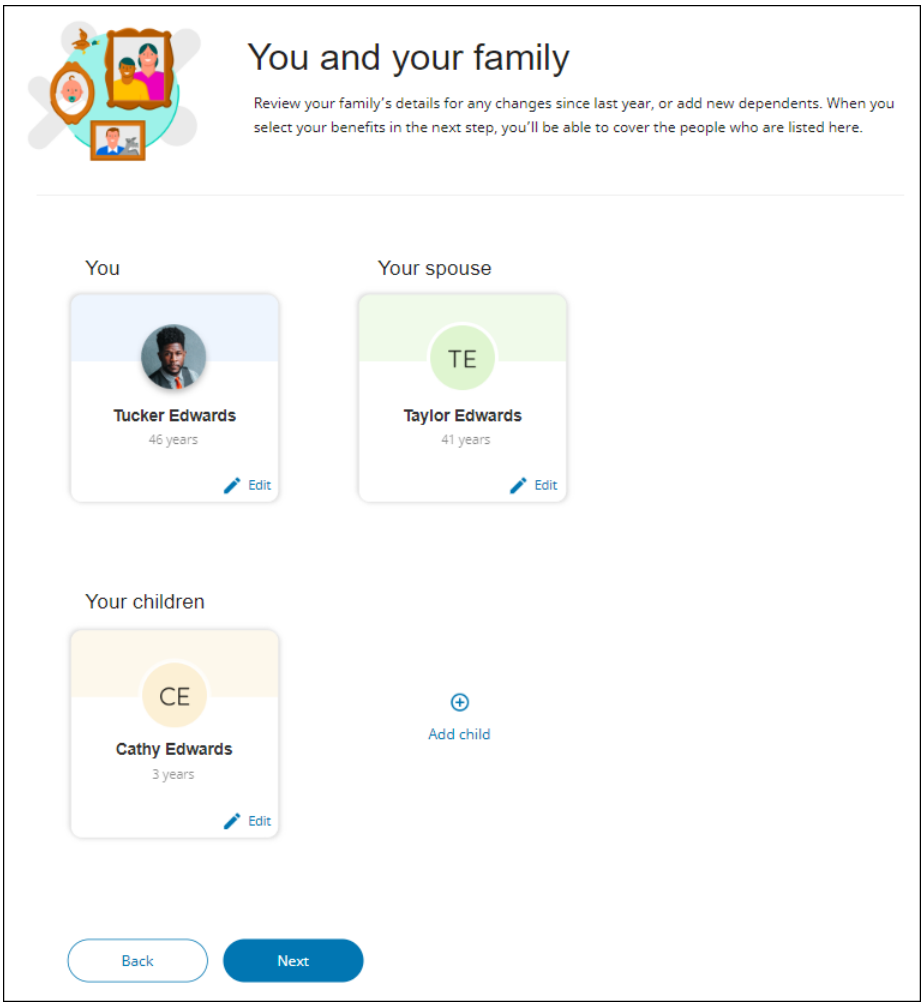
The Welcome page provides details about open enrollment, including the date range for selecting benefits and other details from your company. Select each box under the From your company section to learn about what's changed since last year, what's included in your company's benefits plans, and more.



Select **Next** to continue.

Update family profiles

The You and Your Family section is where you identify the members of your family who are eligible for benefits coverage. You can edit existing family member profiles and add dependents.



Member profiles include general information such as name, date of birth, and contact details.

General information

First name *

Middle name

Last name *

Suffix

Gender *

Date of birth *

Relationship *

Social security number

Disabled

Why we ask this information

Full time student

Contact information

Same address as you?

Yes No

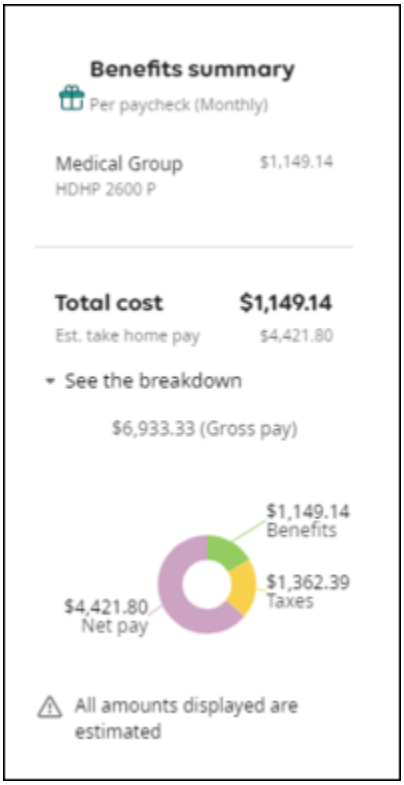
6840 Mccord St
Columbus, OH 43085
United States

Select **Next** to continue.

Select benefits

The process of choosing your benefits begins at the Benefits Selection step. In this step, you will review the benefit options available to you. This section outlines enrollment in Medical, Dental, Vision, Health Savings Account, and Basic Life plans. Other options may include Voluntary Life, Accident, Flexible Spending Accounts, and more. Your enrollment experience will only display your benefit eligibility.

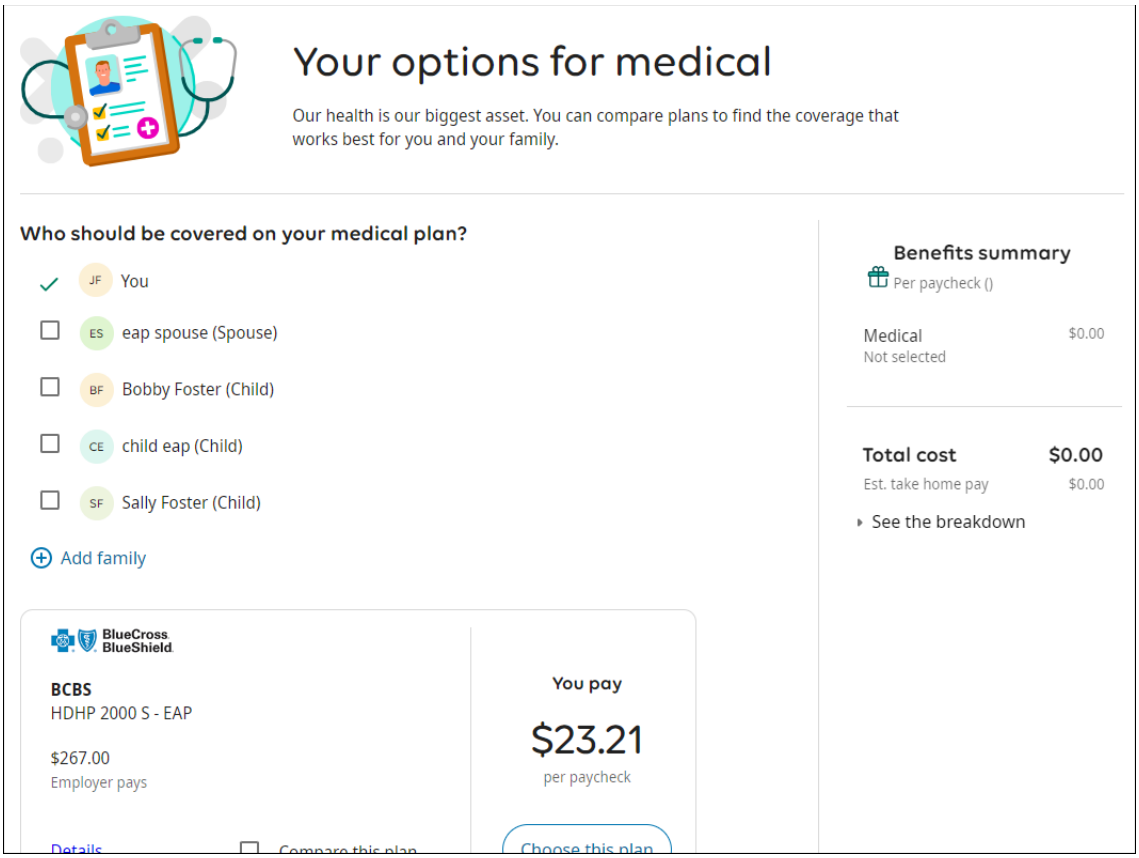
The options presented to you vary depending on the selections you make. As you make your selections, the Benefits Summary section updates to include the total cost of your selected benefits and includes a breakdown of the costs relevant to your gross pay.



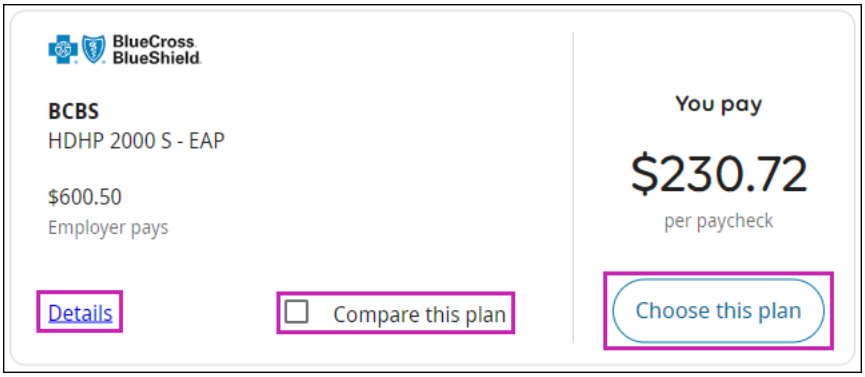
Medical

The Medical page enables you to choose which family members to include in your medical coverage, add family members who are not displayed, compare the available medical plans, and select a plan.

Note:
When adding a family member, the change typically only applies to the selected coverage. However, if applicable, the family member is available for selection on other coverages. For example, if you select a family member while viewing the medical plan, this election does not automatically apply to your dental plan unless the benefits are part of a bundle. Regardless, you can select the added family member to the dental plan by following the same process.



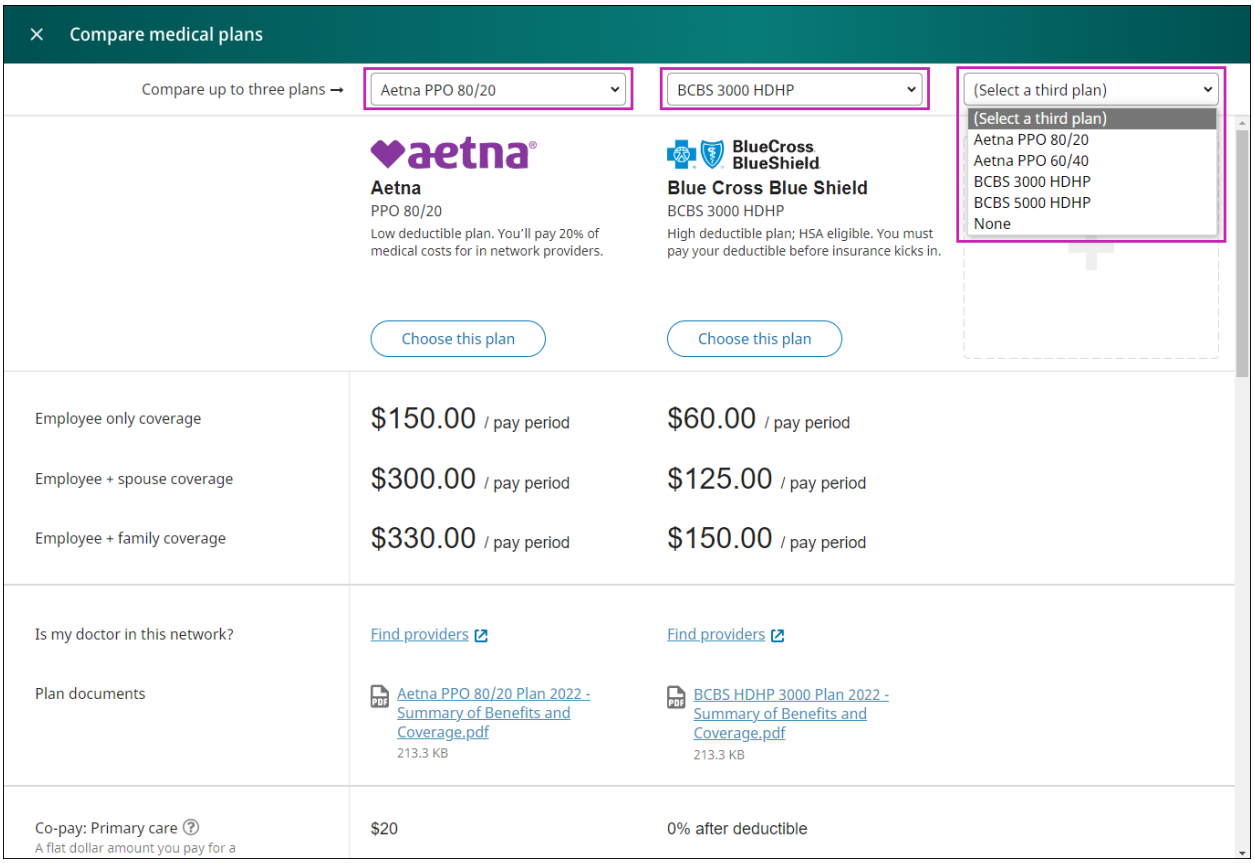
Each medical plan is listed as a card that includes the plan type, deductible amount, out of pocket maximum, employer cost, and your cost per paycheck. From each card, you can select **Details** to view more information about the plan, select **Compare this plan** to add it to a plan comparison, or select **Choose this plan**.



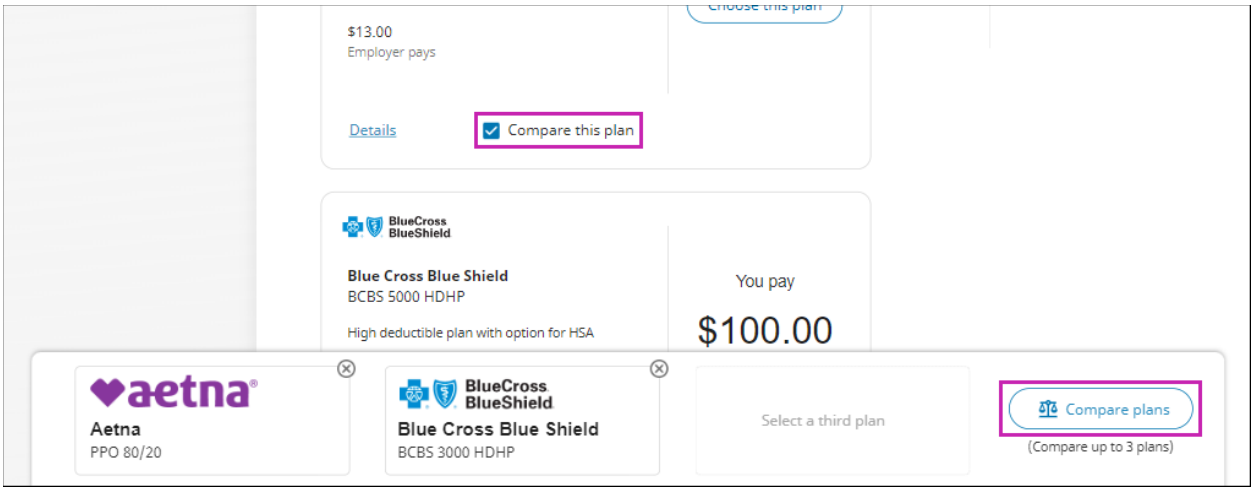
You can also choose to decline medical coverage from the **Decline coverage** card.

Compare medical plans

You can compare up to three medical plans using the Compare Plans feature. You can navigate to the Compare Plans page and select the plans you want to compare from the drop-down lists.



Alternatively, you can select the **Compare this plan** box on each plan card and then select **Compare plans** from the comparison bar at the bottom of the page.



The Compare Medical Plans page includes important details about the selected plans in a side-by-side view. You can select a plan from this page or select Close to return to the previous page.

× Compare medical plans

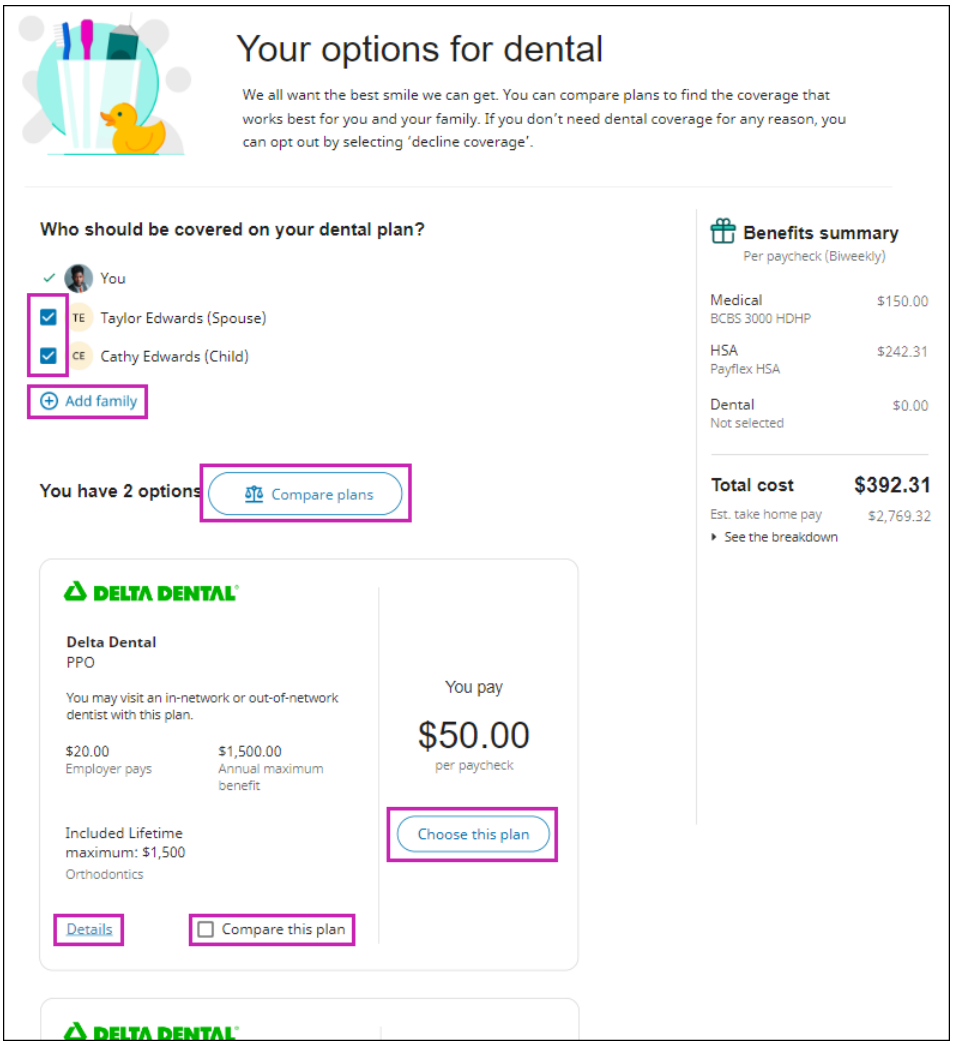
Compare up to three plans →	Aetna PPO 80/20	BCBS 3000 HDHP	(Select a third plan)
	Aetna PPO 80/20 Low deductible plan. You'll pay 20% of medical costs for in network providers.	Blue Cross Blue Shield BCBS 3000 HDHP High deductible plan; HSA eligible. You must pay your deductible before insurance kicks in.	Aetna PPO 80/20 Low deductible plan. You'll pay 20% of medical costs for in network providers.
	Choose this plan	Choose this plan	Choose this plan
Employee only coverage	$150.00 / pay period	$60.00 / pay period	$150.00 / pay period
Employee + spouse coverage	$300.00 / pay period	$125.00 / pay period	$300.00 / pay period
Employee + family coverage	$330.00 / pay period	$150.00 / pay period	$330.00 / pay period
Is my doctor in this network?	Find providers	Find providers	Find providers
Plan documents	Aetna PPO 80/20 Plan 2022 - Summary of Benefits and Coverage.pdf 213.3 KB	BCBS HDHP 3000 Plan 2022 - Summary of Benefits and Coverage.pdf 213.3 KB	Aetna PPO 80/20 Plan 2022 - Summary of Benefits and Coverage.pdf 213.3 KB
Co-pay: Primary care A flat dollar amount you pay for a covered service each time you use it	$20	0% after deductible	$20
Co-pay: Specialist A flat dollar amount you pay for a covered service each time you use it for a specialist visit	$25	0% after deductible	$25
Coinsurance A percentage of the charge for medical care you must pay	In network: 20% Out of network: 40%	In network: 0% after deductible met Out of network: 40% after deductible met	In network: 20% Out of network: 40%
Deductible The amount you pay in a calendar year before your health plan begins to pay	In network: Individual - $500 / Family - $1,000 Out of network: Individual - $1,500 / Family - $3,000	In network: Individual - $3,000 / Family - $6,000 Out of network: Individual - $9,000 / Family - $18,000	In network: Individual - $500 / Family - $1,000 Out of network: Individual - $1,500 / Family - $3,000
Emergency room The cost of a visit to a hospital emergency department	$150 co-pay per visit. Deductible does not apply.	$150 co-pay per visit, plus 20% co-insurance after deductible	$150 co-pay per visit. Deductible does not apply.
Inpatient hospital Charges for building maintenance, equipment, supplies, salaries and hospital revenues	Facility fee (hospital room) - 10% coinsurance Physician fees – 10% coinsurance	0% after deductible	Facility fee (hospital room) - 10% coinsurance Physician fees – 10% coinsurance
Lab tests Laboratory tests such as blood work	20%	0% after deductible	20%
Lab X-ray Special laboratory tests such as x-rays	20%	0% after deductible	20%
Out of pocket maximum - In network Maximum you will be responsible for until insurance company takes over payments	Individual - $2,500 Family - $5,000	Individual - $3,000 Family - $6,000	Individual - $2,500 Family - $5,000
Out of pocket maximum - Out of network Maximum you will be responsible for until insurance company takes over payments	Individual - $5,000 Family - $10,000	Individual - $9,000 Family - $18,000	Individual - $5,000 Family - $10,000
Prescriptions Health insurance or plan that helps pay for prescription drugs and medications	$10 / $45 / $75	0% / 0% / 0% after deductible Prescriptions are subject to medical/Rx deductible	$10 / $45 / $75
Urgent care Care for an illness, injury or condition serious enough for immediate care	$25	0% after deductible	$25
	Choose this plan	Choose this plan	Choose this plan

Close

After selecting a medical plan, select **Next**.

Dental

The Dental page is similar to the Medical page, including the options to choose who is covered, add a family member, compare plans, and view specific details about each offered plan.

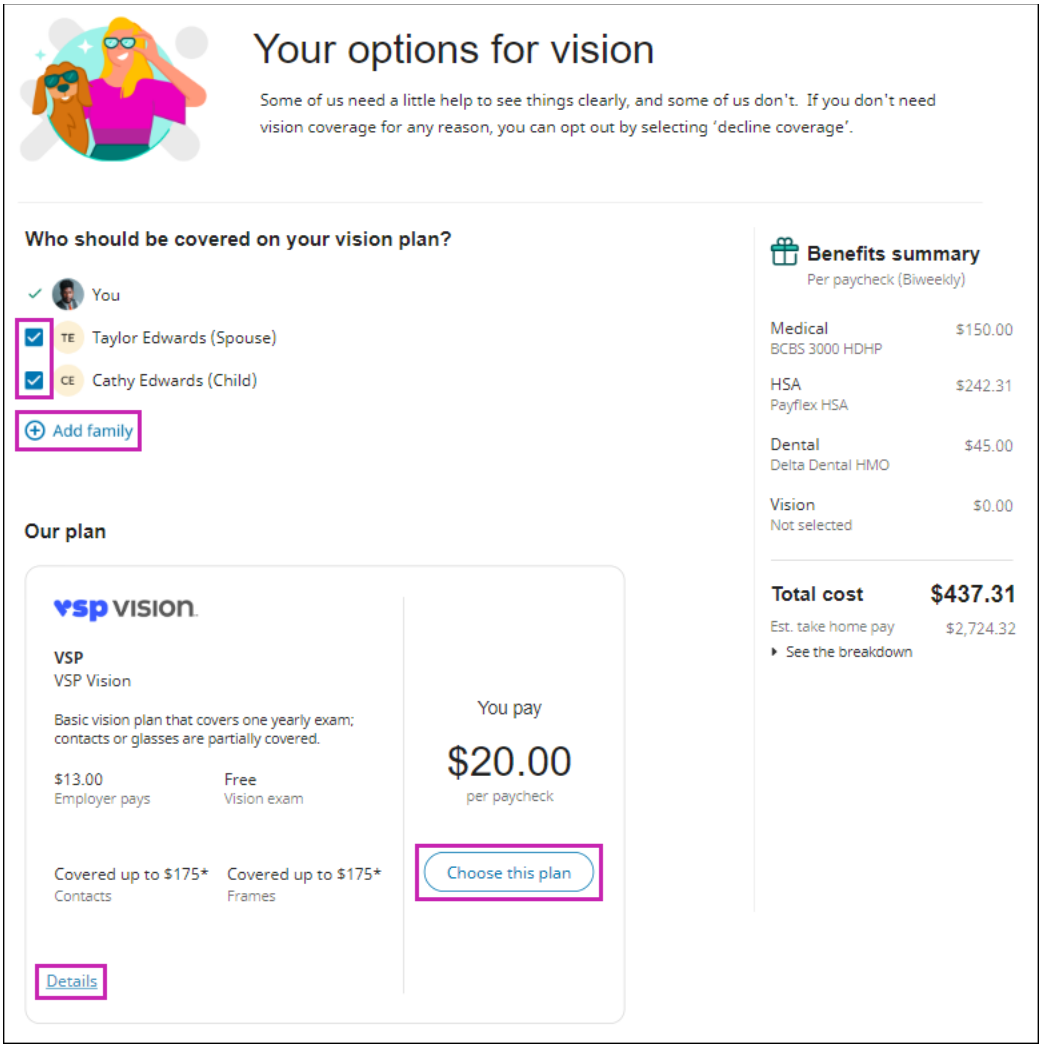


You can choose a plan by selecting **Choose this plan** on the plan card or decline dental coverage from the **Decline coverage** card.

Select **Next** to continue.

Vision

The Vision page includes the options to choose who is covered, add a family member, and view specific details of the offered plan.

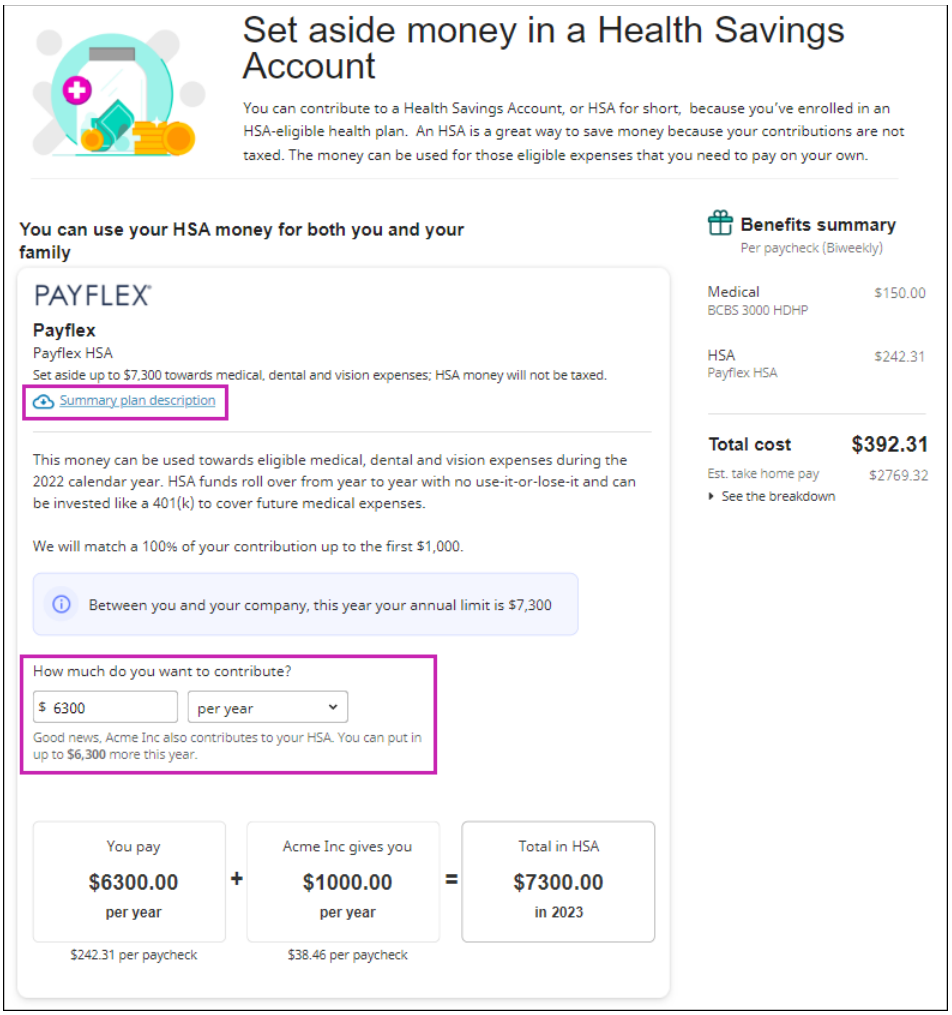


You can choose the plan by selecting **Choose this plan** on the plan card or decline vision coverage from the **Decline coverage** card.

Select **Next** to continue.

HSA

The HSA page includes a high-level overview of the offered HSA plan, a link to download the Summary plan description, and the ability to choose how much to contribute to your HSA each paycheck or year.



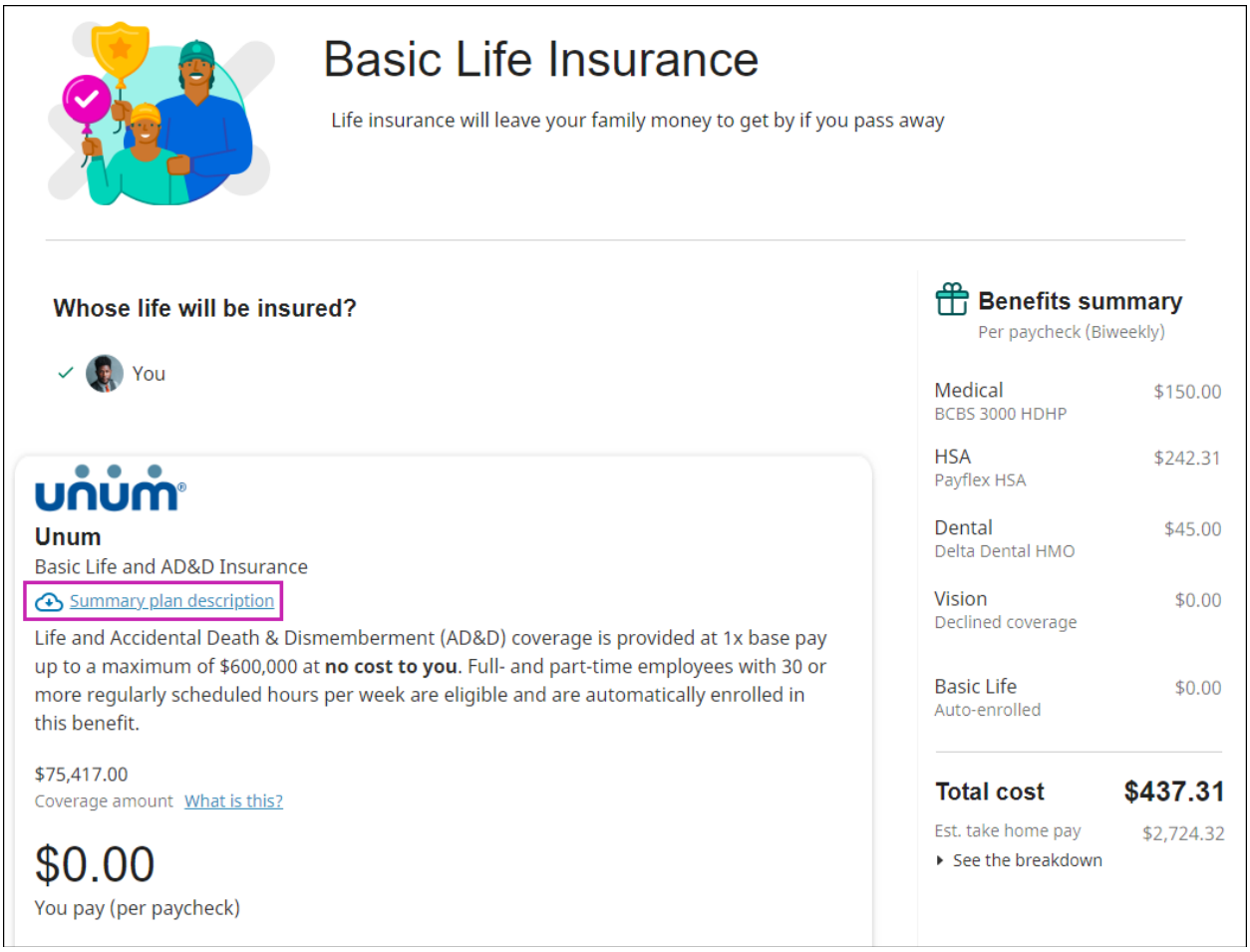
Note:
If you choose to enroll in an HSA plan, you must agree to the consent to open an HSA bank account before proceeding.

You can also choose not to contribute to an HSA.

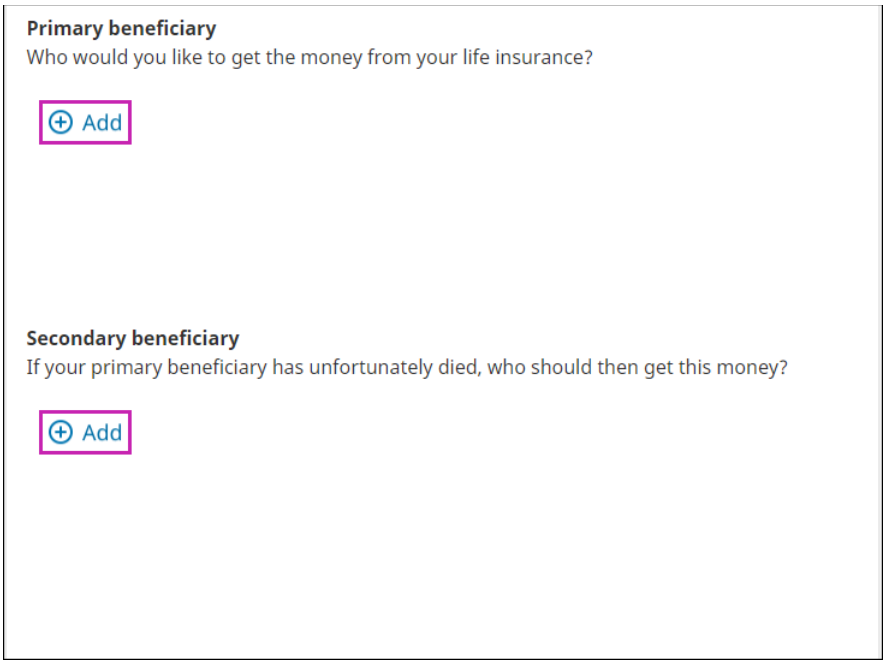
Select **Next** to continue.

Basic Life

The Basic Life Insurance page includes a description of the coverage with a link to download the Summary plan description, the coverage amount, and the ability to add beneficiaries.

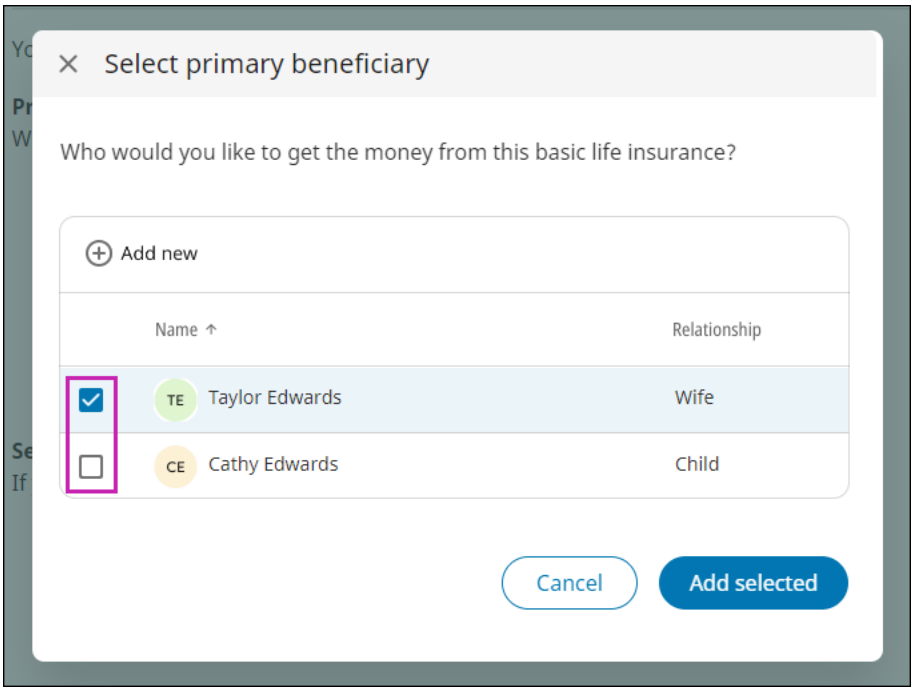


1. From the **Primary beneficiary** section, select **Add**.



Note:
For benefits that require a beneficiary, select one or more Primary Beneficiaries. A beneficiary can be a current dependent or you can add a new beneficiary, as needed. The total allocation amount for Primary Beneficiaries must add up to 100%.

2. In the **Select primary beneficiary** window, select the box next to the desired beneficiary.



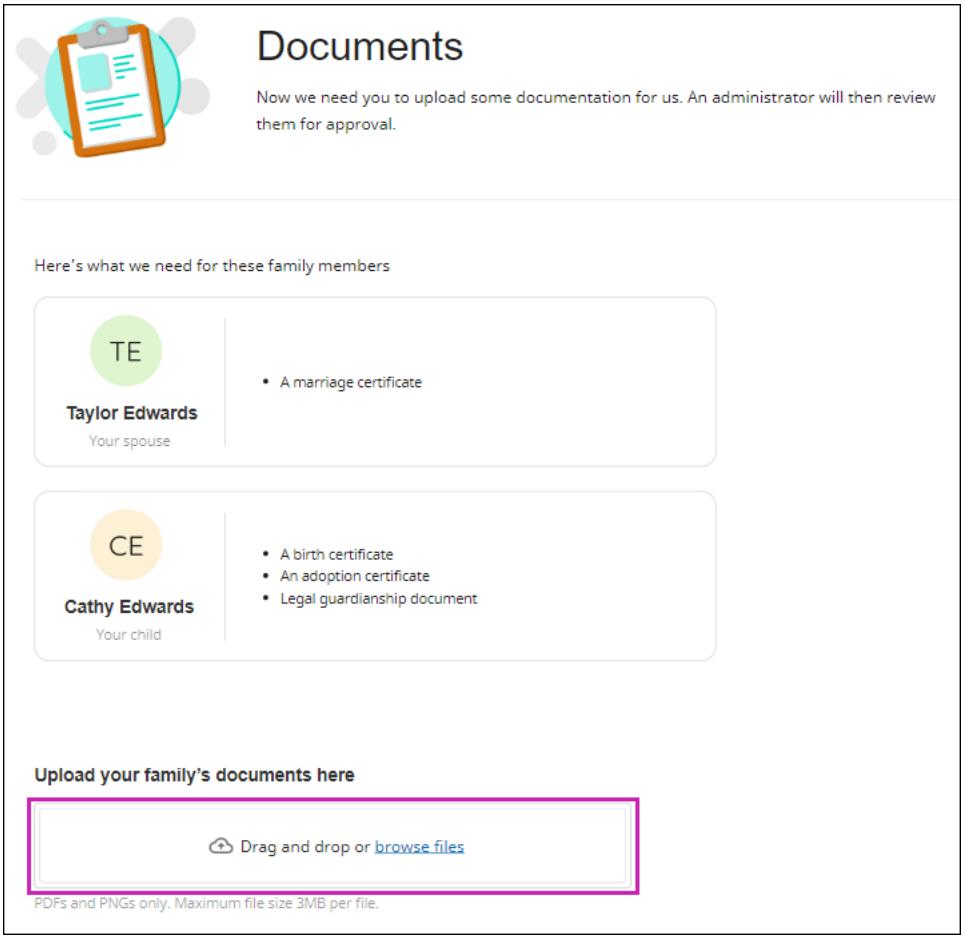
3. Select **Add selected**.

> **Note:**
> You can remove a beneficiary by selecting the delete icon next to their name.

4. Optional. Repeat these steps from the **Secondary beneficiary** section.
5. Select **Choose This Plan**.
6. Select **Next**.

Upload documents

The Upload documents page displays a list of documents required for each family member covered by the selected benefits. You can drag and drop the documents or navigation from the page to the location of the documents on your computer for uploading. If your company does not require documentation when selecting benefits, this page will not display.

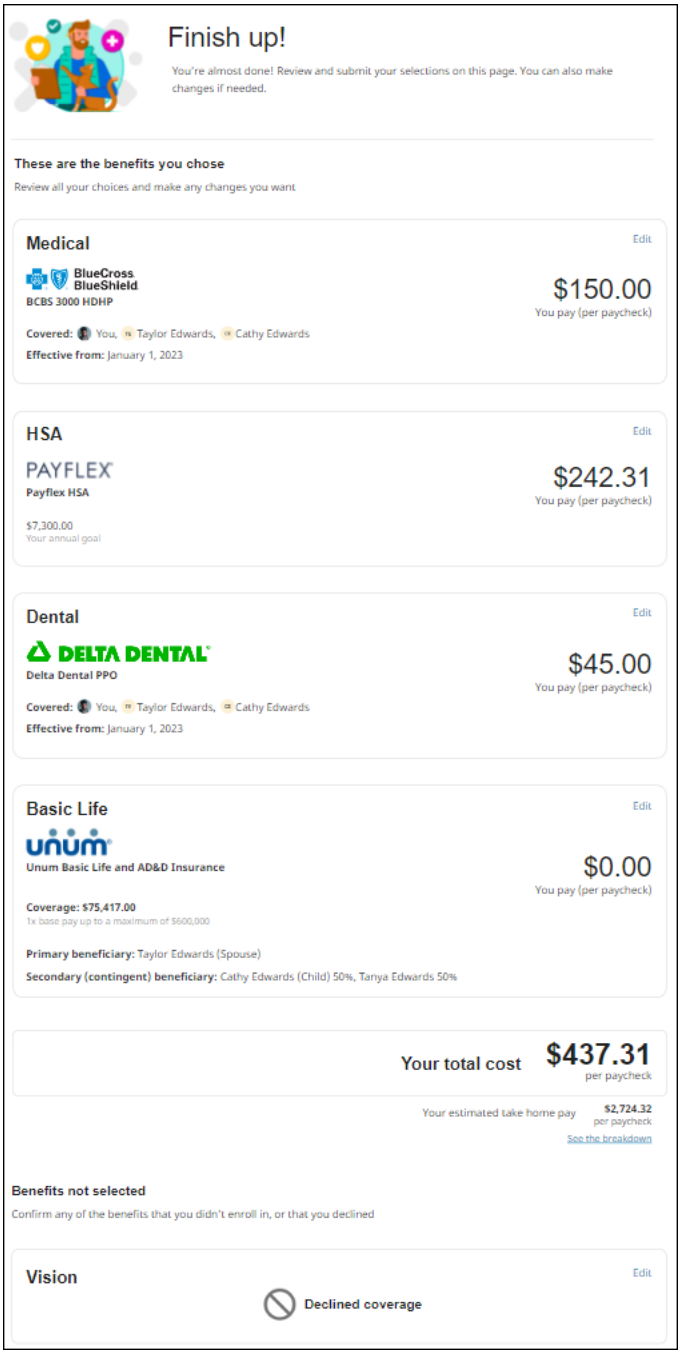


Select **Next** to continue.

Finish open enrollment

The Finish Up page is the summary of your selections and includes cards for each benefit category, including cards for declined coverage. The cards consist of high-level details and the cost of the plan. You can select **Edit** on any card to make changes to that benefit.

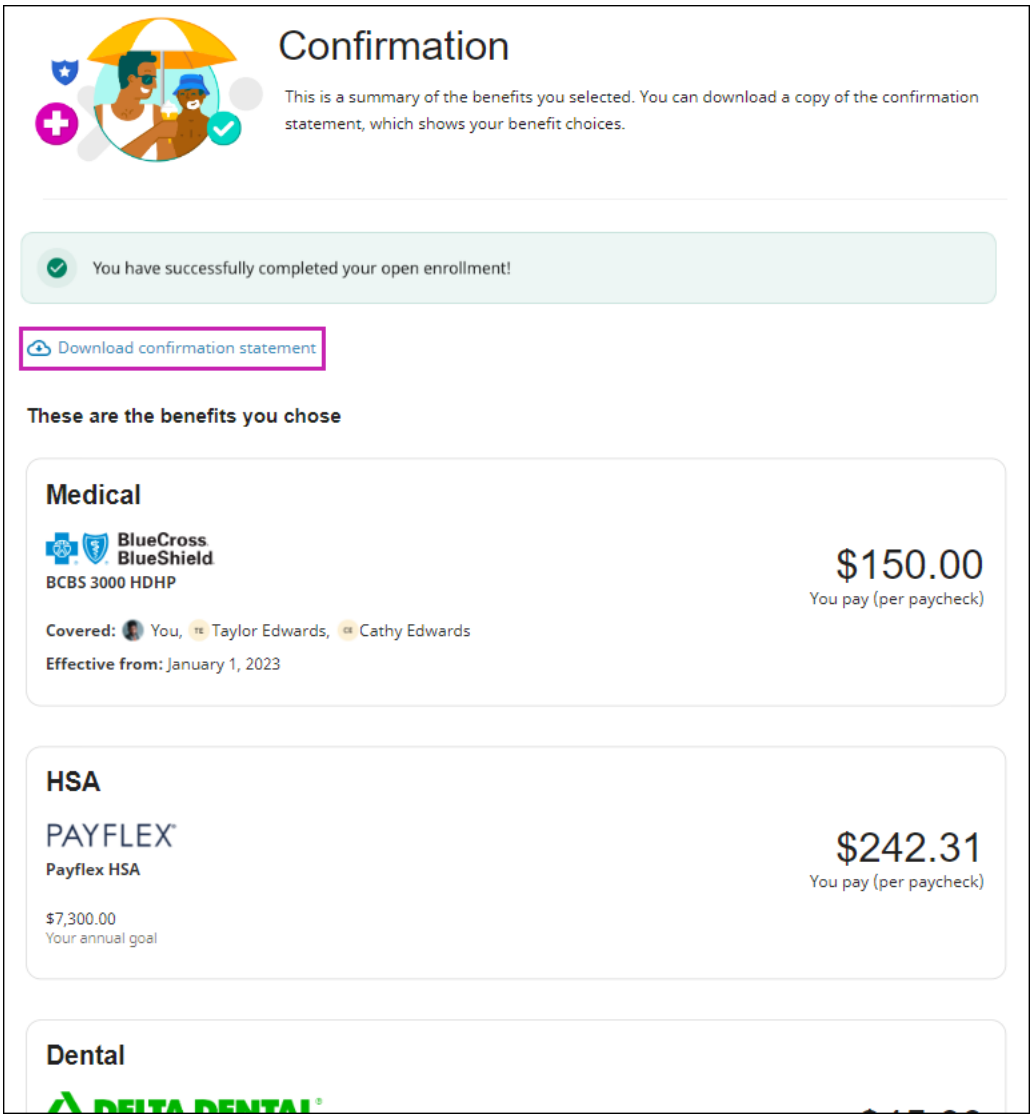
The total cost of your selections displays at the end of the summary and includes a link to view the breakdown of the total.



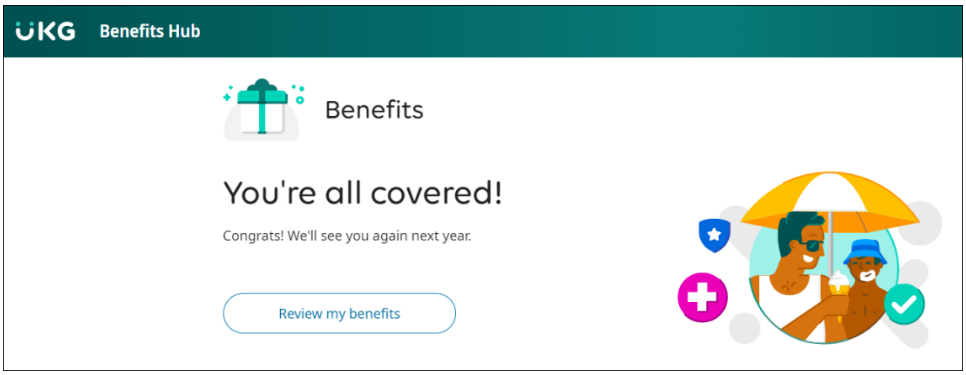
When you are finished reviewing your elections, select **Submit**. A confirmation window displays. Select **Close** to view the Confirmation page.

View and print your benefits summary

The Confirmation page displays a summary of your benefits and includes a link to download the confirmation statement.



Select **Close** to return to Benefits Hub.



From the Benefits Hub home page, you can select Review My Benefits to return to the confirmation page and review your selections. When your benefit elections are approved, you can view them from the Benefits Summary page.