

GNA/INTERN OPEN ENROLLMENT NAVIGATION THROUGH UKG

You can access UKG using any computer or iPad with internet access. You must use Firefox or Chrome web browser. You cannot access open enrollment via the app on your cellphone.

STEP 1: Login to UKG and navigate to Menu \rightarrow Myself \rightarrow Open Enrollment. Click NEXT to navigate through each screen.



STEP 2: Verify Beneficiary and Dependent Information

The first page will ask you to verify beneficiary and dependent information. If you have changes to make to existing contacts, click on their name (blue, underscored) and make appropriate edits. If you are adding a dependent to your health insurance, you must update their date of birth, social security number, and gender and check the "Dependent" box. Click **NEXT** when finished.

Information		id back-next sybrit druft-reset i	cancel print he
Name -	Relationship	Designation	×
Parametric Atlant	Other	Beneficiary Dependent Envergency contact	
Filma Dana	lanut	Beneficiary Dependent If Emergency contact	
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STEP 3: Medical insurance enrollment

Select one of the following, then click **NEXT**:

- **I decline Medical plans** use this if you are waiving coverage. This is for employees who are covered on Sewer District medical coverage as a dependent (ex: spouse or parent working at the Sewer District).
- Intern (ACA) Medical & Rx use this to enroll in the Sewer District's medical coverage, then select the level of coverage (*Employee Only, Employee + One, or Employee + Family*). If you are adding a new dependent, please send proof of relationship to <u>HRDirect@neorsd.org</u>.

About Open Enrollment	Medical	← → ⊘ back next submit	draft reset cancel print help
Verify Beneficiary And Dependent Information			
Medical	Select a Plan Use the options below to choose or decline a plan.		Current Plan
Additional	Medical is provided by Medical Mutual of Ohio.		as of 12/31/2022
Dental (Non-Union)			▶ Intern (ACA) Medical & Rx
Confirm Your Elections Or Changes	I decline Medical plans.		
	O Intern (ACA) Medical & Rx	Intern (ACA) Medical & Rx Plan Information Proof of relationship (marriage/birth certificate) must be submitted to HRDirect@neorsd.org for all newly	
	Options	enrolled dep	endents.
	Employee Unity \$04.30 Employee + One \$128.55 Employee + Family \$176.10		

STEP 4: Dental insurance enrollment

Select one of the following, then click **NEXT**:

- I decline the Dental (Non-Union) plan use this if you are waiving coverage. (i.e. already covered as a dependent on another Sewer District employee's plan or do not wis to enroll in dental coverage at the Sewer District)
- **Dental (Non-Union)** Select this and the level of coverage desired (*Employee Only, Employee + One, or Employee + Family*) if you wish to enroll in the Sewer District dental plan.

About Open Enrollment	Additional	\leftrightarrow \rightarrow \heartsuit back next subr	mit draft reset cancel print help
Verify Beneficiary And Dependent Information			
Medical Additional	Select a Plan Use the options below to choose or decline a plan.		Current Plan as of 12/31/2022
Dental (Non-Union)			 Dental & Vision (Non-Union)
Vision & Hearing (Non-Union)	I decline the Dental (Non-Union) plan.		
Confirm Your Elections Or Changes			
	O Dental (Non-Union)		
	Options		
	Employee Only \$2.27		
	O Employee + One \$4.54		
	Employee + Family \$6.53		



STEP 5: Vision and Hearing insurance enrollment

Select one of the following then click **NEXT**:

- I decline the Vision & Hearing (Non-Union) plan use this if you are waiving coverage. Ex: already covered as a dependent on another Sewer District employee's plan or do not wis to enroll in vision/hearing coverage at the Sewer District.
- **Vision & Hearing (Non-Union)** Select this and the level of coverage desired (*Employee Only, Employee + One, or Employee + Family*) if you wish to enroll in the Sewer District vision/hearing plan.

About Open Enrollment	Additional		\leftrightarrow \rightarrow $ $ \oslash back next subm	it draft reset cancel print help
Verify Beneficiary And Dependent Information				
Medical	Select a Plan Use the options below to choose or decline a	a plan.		Current Plan as of 12/31/2022
Additional				
Dental (Non-Union)				► Dental & Vision (Non-Union)
Vision & Hearing (Non-Union)	I decline the Vision & Hearing (Non-	Union) plan.		
Confirm Your Elections Or Changes				
	O Vision & Hearing (Non-Union)			
	Options			
	O Employee Only	\$0.40		
	O Employee + One	\$0.80		
	O Employee + Family	\$1.01		

Step 6: Review your elections and click *Submit*. CONGRATULATIONS! You are finished with Open Enrollment!

