



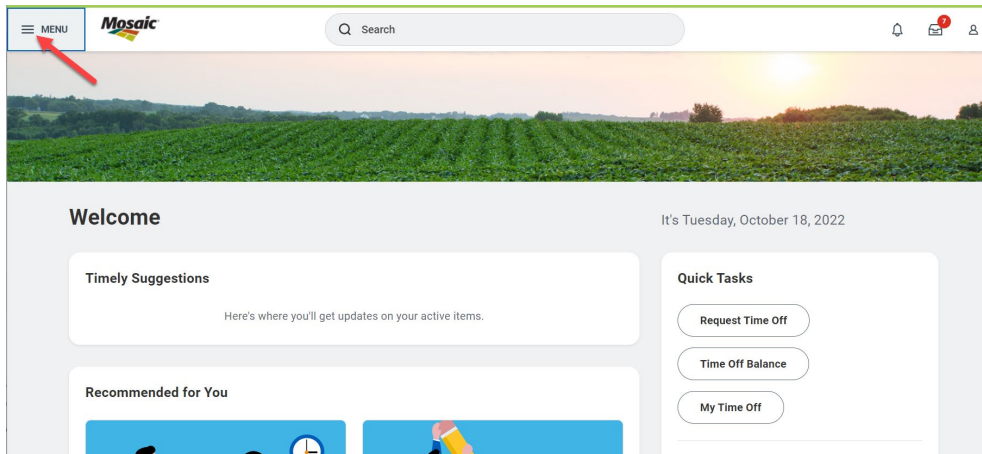
Updating Benefits for a Life Event in Workday

Objectives:

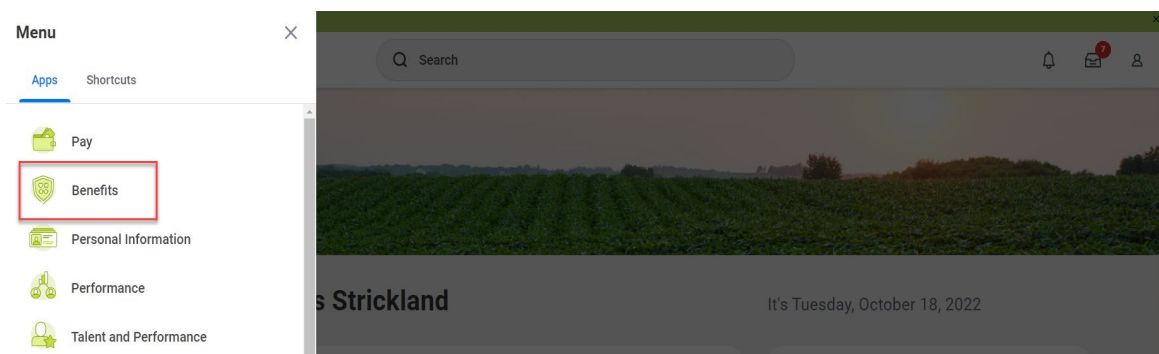
- Beneficiary Change
- Birth/Adoption of a Child(ren)
- Death of Spouse, Domestic Partner or Child(ren)
- Dependent Care Expenses – Significant Change
- Gain, Loss or Significant Change to Other Coverage
- Health Savings Account Contribution Change
- Life and AD&D Election Change
- LTD Election Change
- Marital Status or Domestic Partner Change

How do I change my Benefits in Workday for a Life Event?

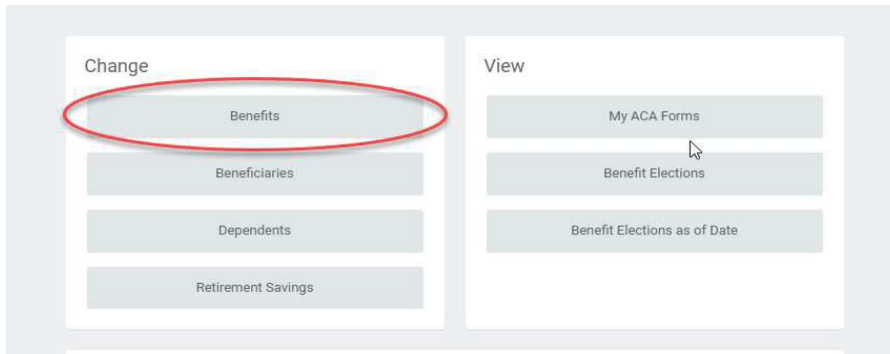
1. From the **Home Page**, click the **Menu** in the top left



2. Go to **Benefits**, under the **Menu**



3. Click on **Benefits**



4. Under **Change Reason**, select the applicable Life Event change and the Benefit Event Date. And click **Submit** in the bottom left corner.

Change Benefits [dropdown] [menu icon]

Change Reason * Beneficiary Change

- Birth/Adoption of a Child(ren)
- Death of Spouse, Domestic Partner or Child(ren)
- Dependent Care Expenses - Significant Change
- Gain, Loss, or Significant Change to Other Coverage
- Health Savings Account Contribution Change
- Life and AD&D Election Change
- LTD Election Change
- Marital Status or Domestic Partner Change

Benefit Event Date * MM/DD/YYYY [calendar icon]

Submit Elections By (empty)

[comment icon] enter your comment

Submit Save for Later Cancel

Instructive

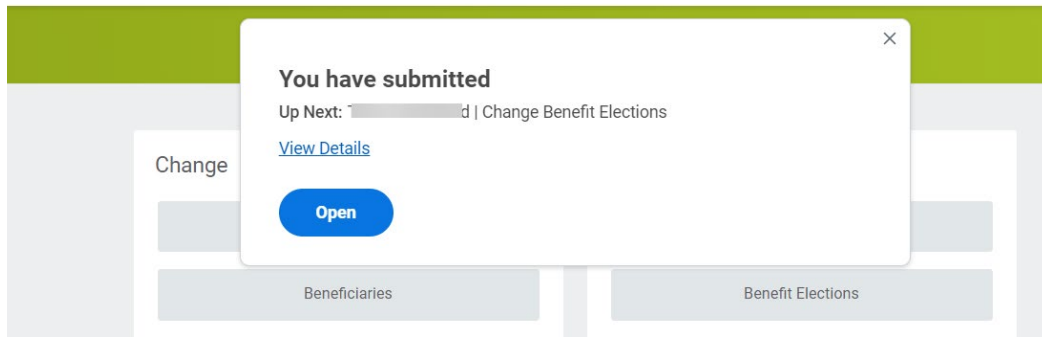
Select the Change field.

For example the E When adding or d Benefit Event Dat

Remember, if a ql miss your opporrt Enrollment. For a

If you added any r (HRC) within 60 d event/change with scan/email to [hrc](#)

5. A pop-up will come on the screen, you will select **Open**. Then select **Let's Get Started**.



Change Benefit Elections

Initiated On 10/18/2022

Submit Elections By 10/22/2022

Let's Get Started

6. Select the applicable changes for the **Life Event** selection you have chosen.

7. If you are making updates to a Beneficiary, you will need to select **Manage** under the plan the beneficiary should be tied to. Then click on **Confirm and Continue**. This section allows you to add, delete, or adjust the percentage amount

Standard Employee Life - Prudential Class 1 (Employee)

Projected Total Cost (Monthly)

██████████

Projected Total Credits

\$0.00

Coverage

Calculated Coverage

██████████

Coverage

1 X Salary

Plan cost (Monthly)

Included

Beneficiaries

Select an existing or add a new beneficiary person or trust to this plan. You can also adjust the percentage allocation for each beneficiary.

Primary Beneficiaries 1 item

+	Beneficiary	Percentage
-	x ██████████ ...	100

Secondary Beneficiaries 0 items

+	Beneficiary	Percentage
No Data		

Plar
Pro
Ge
Mos
berr
Not
* Re
amc
Clic
Bei

8. Select the **I Agree** button and then hit **Submit**

Electronic Signature

LEGAL NOTICE / PAYROLL DEDUCTION AUTHORIZATION: Please Read:

When you check the "I AGREE" check box below, you are certifying that you understand:

1. Your benefit elections are legal and binding transactions.
2. You have verified that the coverage you elected includes any eligible dependents you wish to cover for 2021.
3. You are authorizing a salary reduction for your benefit costs as shown in Workday. Furthermore, you understand that for any pre-tax benefit plans, the election cannot be revoked or changed during the year without an IRS approved qualifying event.
4. Your eligibility for Mosaic's benefit plans is governed by the applicable Plan document. In the event there is conflict between this enrollment system and the Plan, the rules of the Plan will govern.
5. You are agreeing that the tobacco designation for both you and your spouse/domestic partner is true and accurate. Please note:
 - The tobacco status that you indicate for both you and your spouse/domestic partner will determine your starting medical plan rates and/or any applicable tobacco payroll credits due to you.
 - You may be tested to confirm you do not use nicotine and your tobacco status will be changed if the status you indicated does not match your test results.
 - You can earn a Tobacco cessation credit to off-set your medical plan rates by registering and completing the tobacco cessation program through the Cigna Quit Today program in 2021. For more information about how you can participate, watch for additional information following Annual Enrollment. Note: An alternative means can be provided in the instance where completing the program may be unreasonably difficult or medically inadvisable.
6. Life and disability insurance benefits may be pending for Evidence of Insurability (EOI) and will be subject to approval by the provider.
7. You may be required to submit documentation to support your request to add new dependents to your benefit change. If required, you will receive notification to submit the supporting documents. Failure to submit documentation within the requested time period will result in retro cancellation of coverage for dependents in question and any additional premiums collected will be refunded through payroll. Please Note: Any claims for ineligible dependents that may have been processed with healthcare providers will be reprocessed, any and all service payments will become you or your ineligible dependent(s) responsibility.

I Agree

9. Ensure that you submit all required documentation for Life Event change, if required, within 60 days of the event date by email to **HRConnect@mosaicco.com**.

Documentation is required for the below events:

- Birth/Adoption of a Child(ren)
- Death of Spouse, Domestic Partner or Child(ren)
- Dependent Care Expenses – Significant Change
- Gain, Loss or Significant Change to Other Coverage
- Marital Status or Domestic Partner Change

* If adding dependents for the first time, dependent verification documents are required. Mosaic requires valid documentation (a Birth Certificate for Dependent Children, a Marriage Certificate for Spouses, or a Domestic Partner Affidavit) to establish relations to your eligible dependent(s).

10. If you have any questions in regards to the process you can contact **HR Connect** at **855-660-6947**