Open Enrollment Guide - Kronos/UKG

Step 1—Log into Kronos/UKG

1. Access the Kronos WFR application:

https://secure4.saashr.com/ta/6154610.login

2. Access the Kronos mobile app (Android or iPhone): UKG Ready



For mobile, short Company Name: 6154610

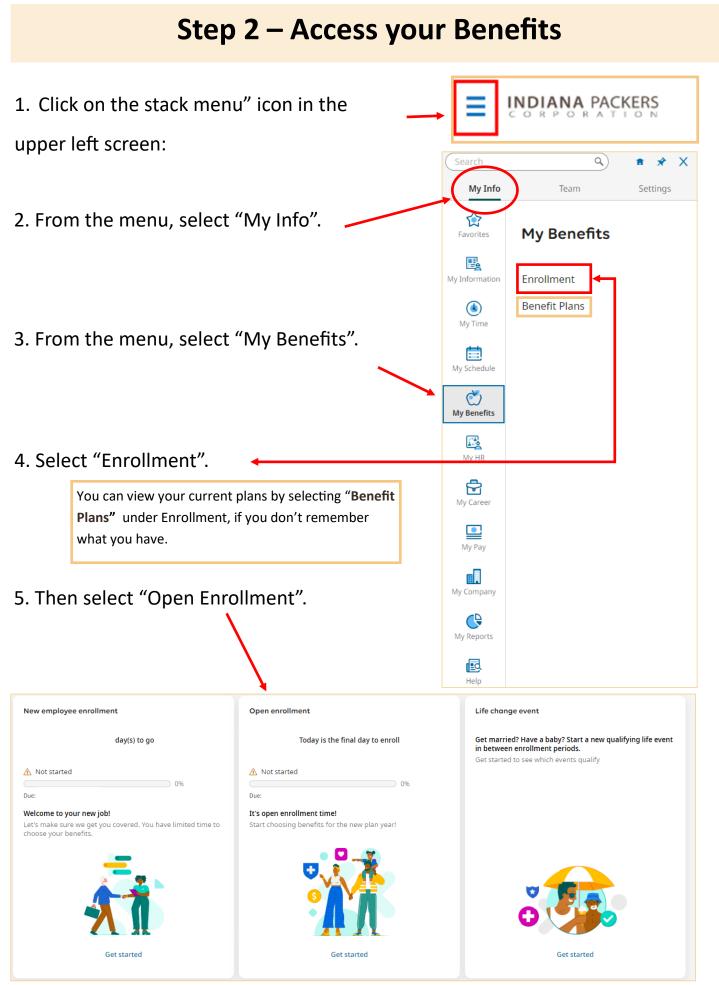
3. Enter your username:

First name initial + last name initial + employee ID *Example: mb12345*

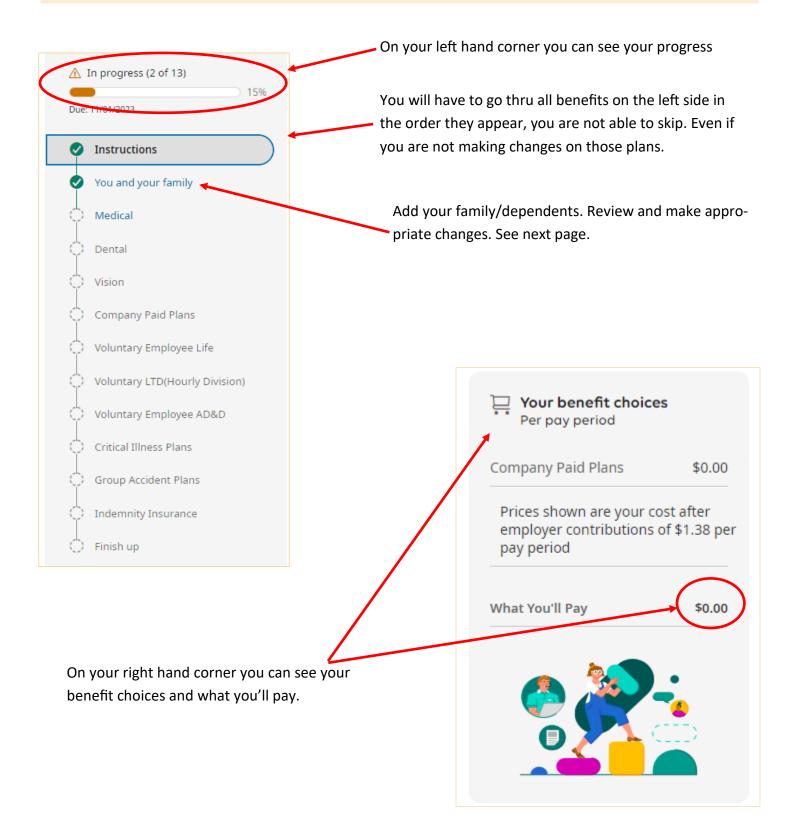
4. Enter your password:

Password must contain:

- One uppercase letter
- One lower case letter
- One number
- One special character

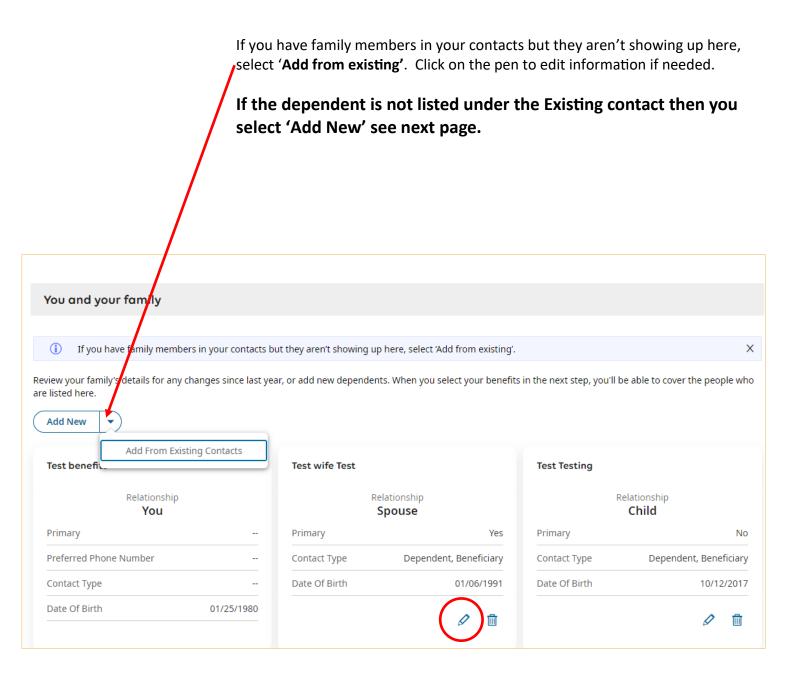


Step 3 – Start your Enrollment, update dependents



Adding/Updating Contacts/Dependents

Review your family's details for any changes since last year, or add new dependents. When you select your benefits in the next step, you'll be able to cover the people who are listed here.



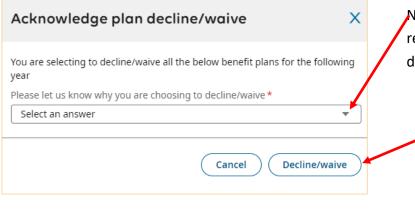
Add New Contact

Select the "Contact Type"			
Add Account Contact		×	
Salutation	Contact type Emergency Dependent Benet First Name*	īciary	
Middle	Last Name*		
Suffix	Relationship * Choose		fill in the blanks. Have
Code Work Phone United States (+1) Code Home Phone United States (+1)	Primary Primary	55N a	nd Date of birth handy.
United States (+1) Image: Coll Phone Code Cell Phone United States (+1) Image: Coll Phone	O Primary	NOTE	: You add a new contact
National ID Primary National ID Social Security Number 🔹	999-99-9999	ø	
Email	Account ID		
Birth Date mm/dd/yyyy Height	Gender Undefined Weight Gancel	Save	
	Cancel	Save	

Step 4 – Make your selections

If you don't want a specific plan, you have the option to **Waive** by clicking on the Decline/waive button:

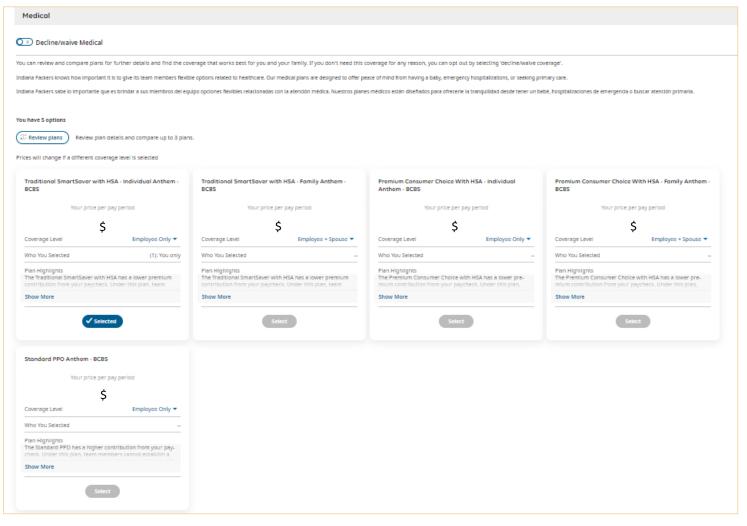
← Enrollment				
▲ In progress (2 of 13)	Medical			
Due: 11/01/2023	Decline/waive Medical			
Instructions		werane that works best for you and your family. If you don't need this	coverage for any reason, you can opt out by selecting 'decline/walve co	uerane'
You and your family			eace of mind from having a baby, emergency hospitalizations, or seeking pri	
Medical	Indiana Packers sabe lo importante que es brindar a sus miembros del eq	ulpo opciones flexibles relacionadas con la atención médica. Nuestros plane	es médicos están diseñados para ofrecerie la tranquilidad desde tener un be	ebé, hospitalizaciones de emergencia o buscar atención primaria.
Dental	You have 5 options			
Company Paid Plans	Review plan details and compare up to 3 plan	τ.		
Voluntary Employee Life	Prices will change if a different coverage level is selected			
Voluntary LTD(Hourly Division) Voluntary Employee AD&D	Traditional SmartSaver with HSA - Individual Anthem - BCBS	Traditional SmartSaver with HSA - Family Anthem - BCBS	Premium Consumer Choice With HSA - Individual Anthem - BCBS	Premium Consumer Choice With HSA - Family Anthem - BCBS
Critical Illness Plans	Your price per pay period	Your price per pay period	Your price per pay period	Your price per pay period
Group Accident Plans	\$	\$	\$	\$
Indemnity Insurance	Coverage Level Employee Only 🕶	Coverage Level Employee + Spouse ▼	Coverage Level Employee Only 🕶	Coverage Level Employee + Spouse -
🖒 Finish up	Who You Selected	Who You Selected	Viho You Selected	Who You Selected
	The Traditional SmartSaver with HSA has a lower premium contribution from your paycheck. Under this plan, team	The Traditional SmartSaver with HSA has a lower premium contribution from your paycheck. Under this plan, team	The Preimlum Consumer Choice with HSA has a lower pre- mium contribution from your paycheck. Under this plan,	The Preinlum Consumer Choice with HSA has a lower pre- mium contribution from your paycheck. Under this plan,
	Show More	Show More	Show More	Show More
	Select	Select	Select	Select
	Standard PPO Anthem - BCBS			
	Your price per pay period			
	Coverage Level Employee Only			
	Who You Selected			
	Plan Highlights The Standard PPO has a higher contribution from your pay- check. Under this plan, team members cannot establish a			
	Show More			
	Select			



NOTE: The medical plan is the only plan that requires a waived reason. Select from the drop down arrow, then click on Decline/waive

Make your selections cont.

Otherwise choose a medical plan that best fit your needs, you will see the cost on each plan. You will also see what you'll pay as you go along on the right side of the screen. Continue with the rest of the benefits.



1. When selecting a medical plan that has an HSA, you will see the next box below, click on select.

iere is only 1 plan available	(Eq Plan details
ices will change if a different o	overage level is selected
HSA - Individual Plan	/
Your price per p	pay period
\$0.0	00 /
Coverage Level	Indivirual 🔻
Plan Highlights	
To qualify for this type of acc pate in the Traditional Smart	
Show More	
Coverage	\$3,850.00
Select	

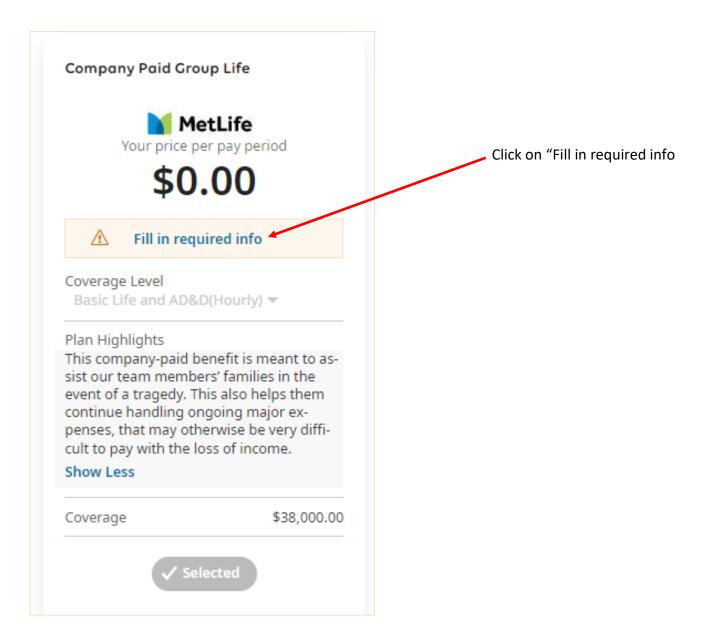
2.You will see this box, here you will enter the **Annual** amount you want to save towards your HSA:

Plan details		×
Coverage level		
Individual You are applying	this benefit only to yourself	*
Amount # Units		
		 Cancel Save and Select

Make your selections cont.

Company Paid Plans:

You don't have the option to "Waive" this plan because you are automatically enrolled. But, you must name at least one primary beneficiary in order to proceed to the next benefit plan.



Adding Beneficiaries

Plan details			×	
Choose your beneficiaries Who would you like to get the money from this insurance	?			
Require 1-20 beneficiaries Page 1 of 1 > 0 Rows			+ Add	
Name	Birth Date	Percentage	Actions	
No Data to Display				
Choose your contingent beneficiaries If your primary beneficiary(s) unfortunately died, who should then get this money?				
Require 0-20 contingent beneficiaries				
✓ Page 1 of 1 → 0 Rows			+ Add ▼	
Name	Birth Date	Percentage	Actions	
(i) No Data to Display				
	Cancel Save and Select			

Adding a Primary Beneficiary:

Select +Add

Select: "Add From Existing Contacts", you probably already have them on the list. Make sure their information is correct. Otherwise, you will have to select "Add New", follow instructions on page 5.

Assign percentage	:	×	Adding only 1 Primary Bene ficiary:
What percentage of the money should selected b beneficiary amounts must add up to 100%) Test wife Test	eneficiary(s) receive? (Total		Add 100 under the percent- age then save
Percentage 100			
	Cancel Save		

Adding Beneficiaries cont.

Plan details				×	
Choose your beneficiar Who would you like to get th	e money from this insurance:	?			
 ✓ Page 1 of 1 → 	1 - 1 of 1 Rows			+ Add 🔻	
Name ↑	Relationship	Birth Date	Percentage	Actions	
Test wife Test	Spouse	01/06/1991	50		
Grand Totals			50%		
Choose your contingent beneficiaries If your primary beneficiary(s) unfortunately died, who should then get this money?					
Require 0-20 contingent beneficiaries					
Page 1 of 1	0 Rows			+ Add 🔻	
Name ↑	Relationship	Birth Date	Percentage	Actions	
No Data to Display					
Cancel Save and Select					

Adding more than 1 Primary Beneficiary:

You will see a message stating the percentage must be 100%. Continue adding beneficiaries until you reach the amount.

Adding a Contingent Beneficiary:

This is your back up beneficiary. It's not required but if you wish to add one, you can. Follow the steps for adding contacts. Make sure it's not the same contact that you listed as your primary beneficiary.

Step 6—Confirm & Submit your Enrollment



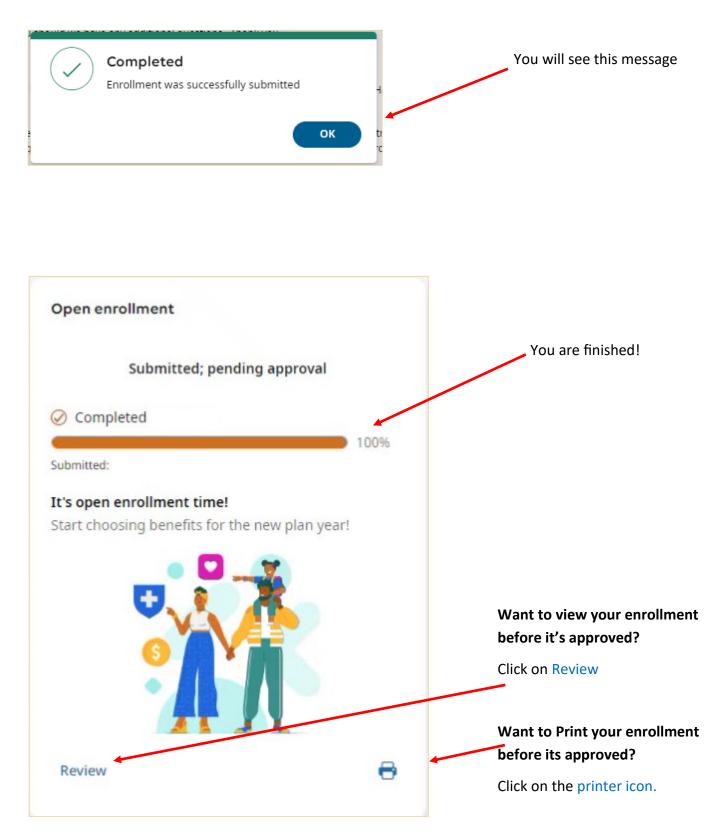


2. Confirm your elections, you can still make changes before submitting the enrollment. Just click on the edit buttons or go to the specific plan. Enrollment acknowledgement Х Please type your (Test benefits) password to confirm. Password * 3. Submit your enrollment If you wish to make additional changes, click on "decline and you by typing your Kronos /UKG turn to the option menu. Click on "accept satisfied with your selections and wish to proceed with the password. This is your elecsubmittal process. tronic signature. Note that you will not be enrolled in new plans until you complete this selection and acceptance process. Contract your Benefits Department should you have any questions regarding this process. True and complete acknowledgement: The answers I have provided throughout this benefit submission are to the best of my knowledge and belief, true and complete. I hereby enroll for benefits for which I am presently eligible or for which I may become eligible under my employer's group contract(s). If any deductions are required for this coverage, I authorize such deductions from my earnings. I reserve the right to revoke this deduction authorization any time upon written notice unless I have chosen to use pretax and post-tax deductions. You can review the status of your benefits at any time by going to "My Account > My Benefits > Review Benefit" 4. Click on Accept Si deseas hacer cambios adicionales, haz click en "decline" (renunciar) y regresaras al menú de opciones. Si estas satisfecho con tus selecciones y deseas continuar con el proceso de petición haz click en "accept" (aceptar). Nota que serás inscrito en los nuevos nlanes hasta que tú Decline Accept

1. You should be at the Finish

up section.

After you submit your Enrollment



**Note: After you submit your Open Enrollment, you are not able to make any changes. See your Benefits Department in order to make appropriate changes before the cut off date.*