

Complete your New Hire Enrollment

Welcome to the University of Idaho! Please review these important reminders about your benefits enrollment:

- **Understanding your benefits**: You are encouraged to complete a <u>benefits orientation</u> and review the <u>benefits guide</u> before enrolling, so you can make the most informed choices about which coverages are right for you and your family.
- Wait for the email: You will receive an email at your employee email address when your myBenefits portal opens for you to select or waive benefits coverage. This is usually within two weeks of your first day of work.
- Waiving Coverage: If you wish to waive coverage (for example, if you are covered under your spouse's plan), you **must** still complete the benefit enrollment process and select waived coverage. Proof of other coverage is required. If your other coverage is through another U of I employee, please email benefits@uidaho.edu for assistance with your proof of other coverage.
- **Deadline:** You will have **30 days** from your first day or work to complete your enrollment or waive coverage and to provide any required documentation. If you do not make an election before the deadline, you will be automatically placed in default coverage and will be unable to make changes until the next annual enrollment period, unless you experience a qualified life event. For more information, please visit uidaho.edu/benefits.

Step 1: Log In

Sign in to MyUI at <u>https://my.uidaho.edu</u>. On the Employee Resources card, select myBenefits.



Step 2: Start your Benefits Enrollment

On the myBenefits landing page, select New Hire to begin your enrollment. The banner will display the remaining days available to complete your enrollment.





Step 3: Add your Dependents

Follow the prompts to add dependents.

- You only need to list dependents who will be covered on your medical, dental, vision, and/or life insurance plans.
- If your dependents do not have SSNs, enter 111-11-1111 for the first dependent, 222-22-2222 for the second dependent, etc.
 - As soon as SSN is received, you will return to the myBenefits portal to update your dependent information.

Add a Dependent		0
Personal Information		
	*Required Fields	
SSN:		
First Name: *		
Initials:		
Last Name: *		
Relationship: *	Other Eligible Adult 🔹 👔	
Gender:*	Male Female	
Date of Birth + (MM/DD/YYYY):	MM/DD/YYYY 晃 😢	

Save and Add Another	Save and Close	Cancel

Step 4: Select your Benefits Coverage

Health Benefits: Confirm your plan choices for your medical, dental and vision coverage, as well as which dependents are covered on each plan. If you are waiving coverage, select Waived as your plan choice.

Tax Free Savings & Spending Accounts: Enter the **TOTAL ANNUAL** amount you wish to contribute to an HSA, FSA or DCFSA.

Life Insurance and AD&D: Select any optional life, spouse/dependent life or additional disability benefit coverage.

Personalize your benefits plan

	1	Family 2	Benofits	3 Beneficiaries	(4) Finalize	
Health Benefits						Cost Summary
Benefit	Selection	Coverage Level	Cost			COMPANY CONTRIBUTIONS
Help me de	edical/Rx High Deductible H v	Who is covered? You Spouse Daught Charge who is covered	\$122.94			YOUR COSTS You per pay pre fax distactions 5122.54
	Dental Standard Dental ~	Who is covered?				deductores. \$0.00
	Vision VSP Network Plary	Who is covered?			\rightarrow	Recalculate
Next						
Tax Free Savings 8	Spending Accounts					

After each change, you can use the "Recalculate" button on the right side of the screen to see your updated cost per pay period.



Step 5: Designate Beneficiaries

Enter the beneficiaries who your basic and optional life benefits would be paid out to in the event of your death. If you have multiple "Primary" beneficiaries, the total of the percentages assigned to them must equal 100%. You may also designate "Contingent" beneficiaries (who the benefits would be paid to in the event that they could not be paid to the "Primary" beneficiaries).

Add a Beneficiary			8
Personal Information			
	Required Fields		
Select a dependent as	our beneficiary or designate a	a different person.	
Select from Dependents:	~		
	OR		
First Name: *			
Initials:			
Last Name: *			
Relationship: *	Brother ~		
Gender:	🔿 Female 🔿 Male		
Date of Birth (MM/DD/YYYY):	MM/DD/YYYY 晃 🔞		
	Save and Add Another Sav	re and Close	Cancel

Step 6: Finalize

Personalize your benefits plan

Annual Enrollment - January 1, 2025

A Non-critical warnings

Based on the selections you made during this event, enrollment form(s) are required to be completed. The required forms can be viewed and printed by accessing the Forms Task.

In order for this event to be completed you will need to upload a copy of your marriage certificate.

Print your confirmation statement

The selections you made have been submitted successfully.

Event name: Annual Enrollment

Effective date: January 1, 2025

Date completed: October 2, 2024

lf you wish, you can print a summary of your new selections.

Your new selections will appear in your Personal Profile once processed

You will also need to provide the following forms in order to finalize the enrolment.

Forms

Û	Forms
	Copy of a marriage certificate
	(Provide by: January 31, 2025)
	Proof of financial interdependency or a tax form from within the last 2 years
	(Provide by: January 31, 2025)

Done

Print a copy of your confirmation statement and retain it for your records. If there are any technical issues, you will be asked to provide this documentation.



Step 7: Upload Required Documentation, if applicable

If you added dependents or waived coverage, you will need to upload documentation (see table below).

- Return to the myBenefits homepage
- Select View/Upload Required Documents
- Select Upload Required Documents
- Follow the instructions to upload your documents

Important: Please redact any sensitive information (financial amounts, SSN, etc.). For tax returns, be sure to include the signature page or confirmation of electronic submission.



View/Upload Required Documents



Action	Required Documentation	
Adding a Spouse	Marriage certificate and one proof of financial interdependency (joint utility bill, rental agreement, joint financial account, etc.) OR Joint tax return	
Adding a Child	Birth certificate or court-filed adoption paperwork OR Tax return showing the child listed as a dependent	
Waiving Coverage	Proof of other coverage, such as a copy of your insurance card or a letter from your carrier confirming your coverage	

If you need assistance, please email <u>benefits@uidaho.edu</u>.