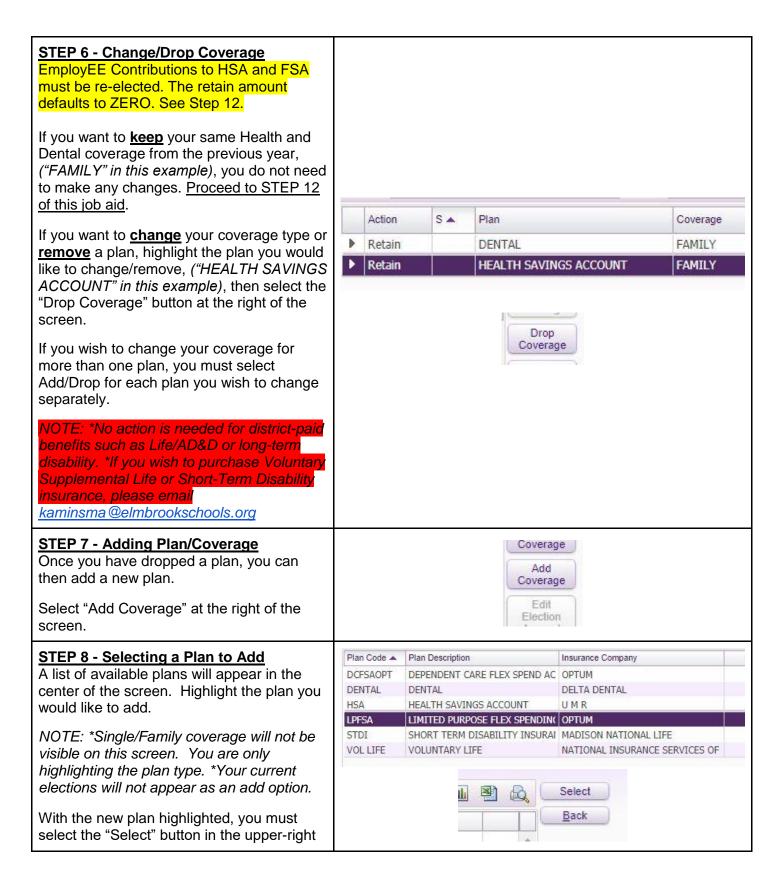
# How to Complete Benefits Open Enrollment in Skyward

<b>STEP 1</b> When logged into the Skyward Employee Access portal, select the "Online Open Enrollment" tab at the top of your screen.	ELMBROOK SCHOO SKYWARD Home Employee Time True Information Off Time Time Employee Access	DL DISTRICT, WI FastTrack FastTrac Open Positions Screene		Online Open Enrollmer	nt
STEP 2 - View Current Coverage You can view your current coverage elections by clicking arrow next to current and highlighting your plan group title. (ALL FULL; ADMIN; 30-39) In this example the plan group title is "ALL FULL" under the "Current Coverage" selection in the upper left of your screen. If 30-39 is seen those staff are part time (75- .99 FTE)	<ul> <li>Open Enrollment (2)</li> <li>Current Coverage</li> <li>ALL FULL</li> <li>Open Enrollment ALL FULL</li> <li>Current Coverage</li> <li>Employee:</li> <li>Current Coverage</li> <li>Employee Setu</li> </ul>			age	
<b>STEP 3 - Current Coverage Listing</b> When your plan group title, <i>("ALL FULL" in this example)</i> , under "Current Coverage" is	Views: General Views	rs: *Skyward De	fault ▼		
	Plan 🔺 Coverage			Deduction Code	pe
highlighted, your current coverage elections will appear in the center of the screen.	▶ DENTAL	FAMILY		5DENF	pe
Clicking on the arrow next to each plan will expand more details. I.e. Deduction per pay/month as well as benefit per pay / per month	HEALTH SAVINGS ACCO	Ender Marchae		5HSAF	
	► HSA CONTRIBUTIONS	FAMILY			
	LIFE/AD&D	ALL			
	LONG TERM DISABILITY	ALL			
<b>STEP 4 - Open Enrollment Process</b> To begin the open enrollment process, highlight your plan group title, <i>("ALL FULL"</i> <i>in this example)</i> , under the "Open Enrollment" selection in the upper left of your screen.	<ul> <li>Open Enrollment</li> <li>Current Coverage ALL FULL</li> <li>Open Enrollment</li> <li>ALL FULL</li> <li>Open E</li> </ul>				
<b>STEP 5 - Open Enrollment Plan Details</b> See current plan details by selecting the arrow to the left of your highlighted plan in the center of the screen.	Views: Sub Plan Information	▼ <u>Filters:</u> *Skyw	ard Default ▼		
	Action S Plan Retain DENTAL Sub Plan Information	Cover FAMI	1994	Deducti per Mor 16	
The arrow will expand the selection to show you additional plan details.	Deduction: Deduction per Pay: Deduction per Month: Age Based:	DENTAL-FAMILY 8.20 16.40 no	Benefit Benefit per Pay: Benefit per Month:	DENTAL-FAMILY 56.88 113.76	

#### How to Complete Benefits Open Enrollment in Skyward



of your screen.	
STEP 9 - Selecting Coverage to AddAfter adding a new plan, you will be prompted to select the coverage you would like to add.For a plan that offers an option of single or family coverage, both will appear on this screen. You must highlight your coverage choice.With your coverage choice highlighted, you must select the "Select" button in the upper- right of your screen.	Views: General ▼       Filters: *Skyward Default ▼         Coverage ▲       F/S       Curr       Deduction code         ALL       F       N       5FSLO       0.00         Image: Select       Back
STEP 10 - Entering an Election AmountIf the new coverage you have chosenincludes a pre-tax employee contributionoption, you will be prompted to enter theANNUALamount you would like tocontribute.NOTE: Your annual election is divided by24, (26-pay employees have 2 paycheckswithout a deduction and 22-pay employeeshave double-deductions in May and June).Once you have entered your annualamount, select "Save" in the upper-right ofyour screen.	Election Amount   Employee:   Insurance Group:   ALL FULL TIME EXCEPT ADMIN   Insurance Plan:   LIMITED PURPOSE FLEX SPENDING ACCT-OPTUM   Ins Coverage:   ALL   Enter the Annual Election Amount:   0.00
STEP 11 - Verifying New PlanOnce you complete the necessary steps of adding a new plan and/or coverage, you will be routed back to your open enrollment coverage overview screen.The plan you added should now appear in your plan list with "Add" under the Action column in green lettering.	Views:       Sub Plan Information       Filters:       *Skyward Default         Action       S ▲       Plan       Coverage         Main       LIMITED PURPOSE FLEX SPENDING       ALL         Retain       DENTAL       FAMILY         Retain       HEALTH SAVINGS ACCOUNT       FAMILY

STEP 12 - Employee Contribution	Views: Sub Plan Information					
If you wish to contribute additional dollars pre-tax to your plan each pay period, you	Action	S 🔺	Plan	Coverage		
	LIMITED PURPOSE FLEX SPENDING ALL		EX SPENDING ALL			
will need to highlight the plan and select the	Retain		DENTAL	FAMILY		
"Edit Election Amount" button at the right of the screen.	Retain		HEALTH SAVINGS ACC	COUNT FAMILY		
			Coverag	P		
NOTE: This amount <b>DOES NOT</b> carry over						
from your prior year's elections. You must			Edit	1		
re-elect your contribution amount each year.			Amoun	t		
You will be promoted to optor the ANNULAL			Depende	ent		
You will be prompted to enter the <b>ANNUAL</b> amount you would like to contribute.						
	Election A	mount				
NOTE: Your annual election is divided by	Annual Elec	tion Amou	nt		Save	
24, (26-pay employees have 2 paychecks	Employee:					
without a deduction and 22-pay employees			ULL TIME EXCEPT ADMIN			
have double-deductions in May and June).		rage: ALL	ED PURPOSE FLEX SPEND	ING ACCI-OPTUM		
Once you have entered your annual		-				
amount, select "Save" in the upper-right of	Enter the Annual Election Amount: 0.00					
your screen.						
STEP 13 - OE Custom Form Click on OE Custom Forms. Open file under Custom Form/Screen. Answer question, Save. Go back to Open Enrollment and proceed to Step 14.	Current Coverage ALL FULL Open Enrollment ALL FULL OE Custom Forms Instructions This form is required to be completed prior to submission of your open enrollment.  Custom Form/Screen Custom Profile.Medicare Enrolled Required Completion					
STEP 14 - Completing Open Enrollment Once you have reviewed all of your coverages, you must select the "Submit Coverage Selections to HR" button at the lower-right of your screen.			Submit Coverag Selection to HR	e		

Your open enrollment is now complete. Should additional forms or information be required, you will be contacted by a member of the Total Employee Rewards Team.

# NOTES

#### THE FOLLOWING BENEFITS MUST BE ELECTED EACH YEAR

- Flexible Spending Account (FSA). Can only be done at time of open enrollment unless life changing event or new hire.
  - Limited Purpose Medical IRS Maximum
  - Dependent Care IRS Maximum
- HSA Employee Pre-Tax Contributions Can be done anytime throughout the year. Allow 1-2 weeks to process on payroll.

## OTHER BENEFITS THAT CAN BE ELECTED ANYTIME THROUGHOUT THE YEAR BY COMPLETING AN APPLICATION \*

- Voluntary Life Insurance Employee, Spouse and Dependent coverage available
- Short Term Disability Insurance

\*Medical documentation may be necessary for each of these benefits and approvals/denials are handled through National Insurance Medical underwriting)

### **DISTRICT PROVIDED BENEFIT – (Provided automatically to those eligible)**

- Health Savings Account (HSA) EmployER Contribution \$1,000 Single / \$2,000 Family; upon full year (January - December) health insurance election.
- Life Insurance 1x your salary, rounded to the nearest 1,000
- Long Term Disability

#### TOTAL REWARDS BENEFIT TEAM

- Lori Golomski golomskL@elmbrookschools.org
- Stephanie Matter <u>matters@elmbrookschools.org</u>
- Lisa Jennaro jennarol@elmbrookschools.org
- Lisa Robinson <u>robinsoL@elmbrookschools.org</u>
- Chelsey Varga <u>vargac@elmbrookschools.org</u>
- Pamela Casey <u>caseyp@elmbrookschools.org</u>