Decision/Enrollment Guide

FOR CONTRACT COLLEGE EMPLOYEES

- Decision worksheets
- How to enroll
Do you need to re-enroll? You may not need to do a thing in Workday!

If you’re happy with your current health plan elections, and don’t want an FSA in 2019 — you don’t need to do anything — you will automatically remain in the same coverage as last year!

Important reminder: If you want a Flexible Spending Account in 2019 you must re-enroll before 10am on January 18, 2019. FSA enrollments do not carry over from year to year.

CONTENTS

1: Health Plan - page 3 - 7
   Specific instructions on how to fill out the PS404 Form based on the change you’re requesting.

2: FSA - page 8 - 17
   Worksheets to help you plan your contributions, plus a step-by-step guide to the enrollment process in Workday.

3: Legal Insurance - page 18
   Completed directly with the vendor.
If you do need to make changes, follow these tips to make enrollment easy

✓ Not sure if you want to change anything?
  Take a look at the Contract College Health Plan Comparison Chart and the NYSHIP Health Insurance Choices for 2019 booklet to compare features between plan options, including participating and non-participating providers; and see the 2019 Rate Chart. More details available at hr.cornell.edu/enroll.

✓ Enrolling in an FSA? Find your “Open Enrollment Event” in Workday
  You should receive an email on December 18 notifying you that your “Open Enrollment Event” is ready. Log in to Workday; click on your account icon in the top right corner of your screen, and choose “Inbox” from the drop-down menu. Click on “Open Enrollment Event” to get started.

✓ Follow step-by-step instructions
  This booklet shows directions to guide you through option transfer health plan changes and enrolling in an FSA. If you get stuck, contact us!

✓ Make sure your enrollments go to the right place!
  • Health plan changes need to be submitted in paper form to HR Services & Transitions Center, hand delivered by 4:30 pm EST 1/18/19 or postmarked by 1/18/19.
  • FSA enrollment is submitted online via Workday by 10 am EST 1/18/19.
  • Legal Insurance enrollment is submitted online via Mercer Insurance by 12/31. You may contact Mercer at 1-800-553-4861.
Permitted health plan changes

You can make three changes to your health plan coverage as part of the Option Transfer period, regardless of whether a qualifying event has affected you or your dependents’ eligibility.

Changes will take effect January 3, 2019.

A. Change between the Empire Plan and a NYSHIP HMO
B. Drop all dependents and change from family to individual coverage
C. Voluntarily cancel your coverage

Health Plan Changes Outside of the Option Transfer Period

These changes to your NYSHIP health plan can be made at any time:

• enroll for the first time
• add coverage for your spouse, partner, or dependents
• remove dependents from your plan

However, a 10-week waiting period applies unless you have a qualifying event based on IRS guidelines. A qualifying event is a change of family status, such as marriage, birth of a child, etc. If your request is the result of a qualifying event, you must attach proof of that event and the date it occurred; see documentation requirements.

How to do it:

A PS404 New York State Health Insurance Transaction Form must be submitted for yourself and each dependent.

Collect any required documentation

Submit PS404s and documentation to:
HR Services & Transitions Center
East Hill Office Building Suite 110
395 Pine Tree Rd
Ithaca, NY 14850

Instructions and forms are downloadable at hr.cornell.edu/contract-college-option-transfer/option-transfer-select-plan
Want to make a change? Let’s get started!

All health plan changes require that you submit a paper PS404 Enrollment Form to HR Services & Transitions Center.

Download the Cornell version of the form, and then follow the instructions on the following pages depending on the type of change you want to make.

Questions about your coverage?

Get all the details about your health plan options with NYSHIP from the “Health Insurance Choices for 2019” booklet, which can be downloaded at:

A. Change between the Empire Plan and HMOs

How to make the change: Complete sections 1-8 on the front, section 10H on the back and sign and date under the authorization section. Do not complete the dependent section as that will remain the same.

Submit this form to HR Services & Transitions Center by 4:30 pm EST 1/18/19 or postmarked by 1/18/19:

HR Services & Transitions Center
395 Pine Tree Road
East Hill Office Building, Suite 110
Ithaca, New York 14850
B. Drop all dependents and change from family to individual coverage

How to make the change: Complete sections 1-8 and 10F on the front of the form and check; “change coverage”, “medical”, “change to Individual” and “voluntarily cancel coverage for my dependents.” Sign and date the authorization section on the back of the form.

Submit this form to HR Services & Transitions Center by 4:30 pm EST 1/18/19 or postmarked by 1/18/19:
HR Services & Transitions Center
395 Pine Tree Road
East Hill Office Building, Suite 110
Ithaca, New York 14850
C. Voluntarily cancel your coverage

**How to make the change:** Complete sections 1-8 on the front of the form; check 10E “Voluntarily cancel coverage” and select “medical” box, and sign and date on the back.

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**Front:**

**Important!**

If you choose to voluntarily cancel your coverage, this results in the complete termination of your health insurance plan.

Submit this form to HR Services & Transitions Center by 4:30 pm EST 1/18/19 or postmarked by 1/18/19:

HR Services & Transitions Center
395 Pine Tree Road
East Hill Office Building, Suite 110
Ithaca, New York 14850

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**Back:**
Flexible Spending Accounts

You have the option to enroll in two different FSA’s:

A. Medical FSA: for medical expenses not covered by your health plan

B. Dependent Care FSA: for childcare or other dependent care expenses

The worksheets on the next pages can help you determine how much you may want to contribute to an FSA.

IMPORTANT:

• FSA’s must be elected every year you choose to participate!

• Enrollment is processed in Workday. See the step-by-step instructions on the following pages to guide you through the enrollment process.

A flexible spending account can help you reduce taxable income and increase your take-home pay.

Not sure if a flexible spending account is for you?

Find out more!
https://hr.cornell.edu/sites/default/files/documents/fsa_payflex_flyer.pdf
A. Medical FSA -- Savings Calculator

How much should I contribute? A Savings Calculator can help you itemize unreimbursed health and dependent care expenses to assist you in determining your health care spending account contributions.

1. Medical expenses not covered by insurance
   - Deductibles, co-pays, co-insurance: ____________
   - Physician visits and routine exams: ____________
   - Prescription drugs: ____________
   - Over-the-counter items (see notice below): ____________
   - Insulin, syringes and diabetic supplies: ____________
   - Annual physicals: ____________
   - Chiropractic treatments: ____________
   - Other medical expenses: ____________

   TOTAL MEDICAL EXPENSES: ____________

Over-the-counter (OTC) Notice: Effective January 1, 2011, an OTC drug and medicine purchase will require a prescription to be reimbursed as an eligible healthcare expense. Examples of drugs and medicines requiring a prescription are items such as cough or cold medicine, pain relievers, and allergy or sinus medications. Items that will continue to be reimbursed without a prescription include bandages, saline solutions, insulin and diabetic supplies, and diagnostic test kits.
2. Dental expenses not covered by insurance

- Check ups and cleanings: 
- Fillings, root canals: 
- Crowns, bridges and dentures: 
- Oral surgery or orthodontia: 
- Other dental expenses

**TOTAL DENTAL EXPENSES:**

3. Vision and hearing care expenses not covered by insurance

- Vision exams: 
- Eyeglasses, prescription sunglasses: 
- Contact lenses and cleaning solution: 
- Corrective eye surgery (LASIK, cataract, etc.): 
- Hearing exams, aids and batteries:

**TOTAL VISION AND HEARING EXPENSES:**

**GRAND TOTAL OF MEDICAL, DENTAL, AND VISION & HEARING:**

**MINUS 2018 ROLLOVER - UP TO $500:**

**EQUALS YOUR 2019 CONTRIBUTION:**

**IRS maximum contribution limit**

- The 2019 limit for **FSA medical** per employee is $2,700. This does not include the 2018 rollover dollars.
B. Dependent Care FSA -- Savings Calculator

**How much should I contribute?**

Keep the following in mind when estimating your expenses:

- Amounts you pay for dependent care while you are off work due to vacation, holidays, illness or injury are not eligible expenses.
- If your dependent is a student, your expense may be different during the months when school is not in session.

**Dependent care expenses**

Total dependent care expenses: 

Minus Cornell Child Care Grant: 

EQUALS 2019 CONTRIBUTION:

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**IRS maximum contribution limit**

- The 2019 limit for FSA dependent care is $5,000 per household.
Ready To Enroll In An FSA? Let’s get started!

Once you know how much you’d like to contribute, you can enroll in Workday.

When you login to Workday, click on your photo in the upper right corner of your screen, then click on “Inbox” in the drop-down menu.

Click on the “Open Enrollment Event.”
Workday screen #1: 2019 Health & Dental Elections

What you see in Workday

Your elected health and dental plans from 2018 are shown. These selections will carry over as is unless you submit a paper PS404 Form to HR Services and Transitions Center by 4:30 p.m. EST January 18, 2019.

Actions you need to take in Workday

None! Click continue.

Health Care Elections

<table>
<thead>
<tr>
<th>Benefit Plan</th>
<th>*Elect / Waive</th>
<th>Enroll Dependents</th>
<th>Coverage</th>
<th>Employee Cost (Semi-monthly)</th>
<th>Employer Contribution (Semi-monthly)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical and Prescription - New York State 001 - The Empire Plan</td>
<td>Elect</td>
<td>Employee</td>
<td>$57.64</td>
<td>$302.66</td>
<td></td>
</tr>
<tr>
<td>Medical Prescription - New York State 072 - HMO Blue</td>
<td>Elect</td>
<td>Waive</td>
<td>Employee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical and Prescription - New York State 300 - Capital District PHP - Central</td>
<td>Elect</td>
<td>Waive</td>
<td>Employee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical and Prescription - New York State 330 - MVP Health Care - Central</td>
<td>Elect</td>
<td>Waive</td>
<td>Employee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental - New York State</td>
<td>Elect</td>
<td>Waive</td>
<td>Employee</td>
<td>$13.57</td>
<td></td>
</tr>
</tbody>
</table>

Health plans changes can only be completed by a paper form – your current health and dental plan elections appear grayed out and will carry over unless you submit a paper PS404 Form.

No plan actions can be completed on this page. Please click the orange “Continue” button at bottom of page.
Workday screen #2:
Flexible Spending Accounts for Medical and Dependent Care

What you see in Workday

If you want a Flexible Spending Account for Medical and/or Dependent Care you must enroll every year!

Actions you need to take in Workday

CHOOSE ONE PLAN OR BOTH:

- Click on the ‘Elect’ button for the plan(s) you wish to enroll
- Enter your contribution

You can enter your contribution by total for the year or per paycheck, and Workday will automatically calculate the other figure!

<table>
<thead>
<tr>
<th>Benefit Plan</th>
<th>*Elect / Waive</th>
<th>Contributions</th>
<th>Supporting Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flexible Spending Account - Medical Care</td>
<td>Elect</td>
<td>Your number of remaining payroll deductions for the year 24</td>
<td></td>
</tr>
<tr>
<td>PayFlex</td>
<td></td>
<td>Your actual contributions from payroll</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$0.00</td>
<td>Minimum Contribution (Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>How much do you want to contribute for the total year?</td>
<td>$0.24</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1,000.00</td>
<td>Maximum Contribution (Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>How much do you want to contribute per paycheck (Semi-monthly)?</td>
<td>$2,500.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>41.67</td>
<td></td>
</tr>
<tr>
<td>Flexible Spending Account - Dependent Care</td>
<td>Elect</td>
<td>Your number of remaining payroll deductions for the year 24</td>
<td></td>
</tr>
<tr>
<td>PayFlex</td>
<td></td>
<td>Your actual contributions from payroll</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$0.00</td>
<td>Minimum Contribution (Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>How much do you want to contribute for the total year?</td>
<td>$0.24</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3,000.00</td>
<td>Maximum Contribution (Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>125.00</td>
<td>$5,000.00</td>
</tr>
</tbody>
</table>

CHILD CARE GRANT RECIPIENTS

Recipients of a Cornell Child Care Grant should not include award amounts in their DEPENDENT CARE totals for 2019. Only include additional dollars YOU wish to be deducted from YOUR pay; i.e., if Cornell’s award is $3,000, enter $2,000 in Workday as supplement from your own pay to reach the $5,000 household limit.
Workday screen #3: Insurance

What you see in Workday

These benefits are automatic, and presented only for your information.

Visit the HR website if you would like information about obtaining additional insurance, including group universal life, long-term care, personal accident, auto, home, or pet insurance.

Note that the open enrollment period for legal insurance is through December 31, 2018; enrollment must be made directly with ARAG through Mercer Voluntary Benefits: [http://www.cornellvoluntarybenefits.com/](http://www.cornellvoluntarybenefits.com/)

No action is needed on this screen!
Workday screen #4: Review and Submit

What you see in Workday

You’re almost done! This screen summarizes your enrollments. It shows your new 2019 FSA enrollments and your 2018 health coverage, which will roll over unless you submit a paper PS404 Enrollment Form to HR Services & Transitions Center by 4:30 p.m. EST January 18, 2019.

Action required

Click the green “Submit” button at the bottom the page to complete your FSA enrollment in Workday. Then, if you need to make changes to your health coverage, submit the paper PS404 Enrollment Form to HR Services & Transitions Center if you have not done so already.

Your FSA submission is not complete until you receive the confirmation message shown on the next page.

<table>
<thead>
<tr>
<th>Benefit Plan</th>
<th>Coverage Begin Date</th>
<th>Deduction Begin Date</th>
<th>Coverage</th>
<th>Calculated Coverage Dependants</th>
<th>Benefits</th>
<th>Employee Cost (Semi-monthly)</th>
<th>Employer Contribution (Semi-monthly)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical and Prescription - New York State 001 - The Empire Plan</td>
<td>08/11/2016</td>
<td>08/11/2016</td>
<td>Employee</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental - New York State</td>
<td>02/01/2017</td>
<td>02/01/2017</td>
<td>Employee</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flexible Spending Account - Medical Care - PayFlex</td>
<td>01/01/2018</td>
<td>01/01/2018</td>
<td>$2,000.00 Annual</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basic Life Insurance - Cigna (Employee)</td>
<td>07/18/2016</td>
<td>07/18/2016</td>
<td>0.5 X Salary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Short Term Disability (STD) - Cornell University (Employee)</td>
<td>07/18/2016</td>
<td>07/18/2016</td>
<td>50% of Salary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Long Term Disability (LTD) - Cigna - Contract College (Employee)</td>
<td>07/18/2016</td>
<td>07/18/2016</td>
<td>60% of Salary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total:

Submit

You must click the submit button at bottom of page to complete your FSA enrollment!

Your submission is not complete until you receive a confirmation message.
Workday screen #5: Confirmation

What you see in Workday

Your submission is not complete until you receive this Confirmation message, which you should print for your records.

Oops! Submitted, and need to make an FSA change?

Go to the Workday homepage and click on the “Benefits” icon. Select “Change Open Enrollment” under the “Current Cost” heading. This option will be available until 10am EST January 18, 2019.
Legal Insurance

Optional legal insurance is processed outside of Workday, and has a separate open enrollment period ending December 31, 2018.

This is the only time period you can enroll in or cancel coverage effective January 1, 2019.

You must enroll directly with the insurer; you cannot enroll via Workday. You may contact Mercer at 1-800-553-4861.

Is legal insurance right for you? [Learn more](#).
HR Services & Transitions Center

WE’RE HERE TO HELP

Have questions about your benefits?

LOOK ONLINE: enroll.hr.cornell.edu

EMAIL US: hrservices@cornell.edu

PHONE US: (607) 255-3936

VISIT US: East Hill Office Building (EHOB)
Suite 110
395 Pine Tree Rd.
Ithaca, NY 14850

HOURS: 8am - 4:30pm, M-F