

Q&A: U.S. Annual Enrollment 2024



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Reminders and Tips From the Experts

1. What are the most critical things to review?

We're excited to share that there are a number of great enhancements for our Workmates and their families. Please review the detailed changes described on [WorkdayBenefits.com](https://workdaybenefits.com) for more information. Looking for a quick overview? Check out the [2024 Annual Enrollment Highlights](#).

2. What's changing for next year?

Go to [WorkdayBenefits.com](https://workdaybenefits.com) for details about 2024 changes and enhancements—and there's plenty of them!

- **SimplePay Health** joins our current medical plans, which are administered by Cigna and Kaiser. It uses the Aetna network, which is a new network for Workmates. This innovative new plan has some significant differences from a traditional health plan beyond the new network, so be sure to read up on how it works. Did we mention it's **FREE (even for family coverage)** in 2024?
- The new **Cigna dental** option provides Workmates a different network of providers, with the same great dental coverage.
- Meet **Benepass**, our new partner for Flexible Spending Accounts (FSAs) and commuter benefits. Remember that you must reelect FSAs each year, so if you want to participate in an FSA in 2024, you'll need to enroll.

Looking for expert advice regarding your health, life insurance, HSA, FSAs, and voluntary benefits coverage? Ask the pros at [Northstar](#), Workday's **free** financial planning and counseling benefit!

3. What's *not* changing?

- Workday will continue to cover the majority of the cost of health plan coverage for our Workmates and their families.
- Mental health support, basic life and AD&D, salary continuation during a qualified leave of absence, family planning and caregiver assistance, financial counseling, and more are automatically included (and paid for by Workday) for all eligible U.S. Workmates.
- There's a whole list of other programs available to you that don't require enrollment each year. Review the program tiles included in your Annual Enrollment event in Workday for more information. Don't forget that [WorkdayBenefits.com](https://workdaybenefits.com) is available year-round and can be shared with your covered family members too.

4. How do I know which medical plan to choose?

Everyone's circumstances are different. Luckily, we've got some new tools to help you through the process.

- [The decision support tool on WorkdayBenefits.com](#) will suggest two medical plans based on your answers to a few questions.
- We've outlined several scenarios on [WorkdayBenefits.com](https://workdaybenefits.com) to show you how the plans compare across a variety of medical and family situations.
- [The medical plan comparison chart](#) allows you to compare all the medical plans we offer, side by side.
- Ask about your situation at the in-person benefits fairs in Pleasanton, Atlanta, Boulder, and Salt Lake City.

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5. How do I change my medical, dental, or vision plans for myself or my family members?

Always verify that you've checked the box next to each dependent's name while you're in the medical, dental, and vision plan tiles. If a dependent's name is not checked, they will not have coverage under that plan. You aren't required to cover all the same dependents on medical, dental, and/or vision, which means that when you switch plans, you need to check the box for each dependent you want to cover on each plan.

6. Is there anything else I should watch out for when I'm enrolling?

Take the time to check your confirmation statement carefully. There's a limited time frame to make corrections or changes. If you miss that window, you may not have the coverage for your family in 2024 that you intended.

7. I've already submitted, but how can I see what I elected?

After you've submitted your elections, but before you exit the enrollment event, you'll have the option to print or download a confirmation statement for your records. If you skipped that step, you can access your enrollment event again by clicking the link from your Workday home page announcement. But remember, if you restart the enrollment event, you'll also need to resubmit it to keep your changes.

8. What if I need to make changes after I submit my elections?

If it's before the end of the day on Wednesday, November 15, click on the Annual Enrollment announcement on your Workday home page to access your event and make changes, if needed. Don't forget, you must click the **Submit** button when you're done for those changes to be captured for the 2024 plan year.

9. When does my new coverage start?

Annual Enrollment coverage updates, including new plans and dependent enrollments, will be transmitted for processing to the benefits carriers in early December, and your new elections and coverage will be effective starting January 1, 2024.

General Enrollment

10. How and when do I enroll?

Beginning November 1, you'll find the Annual Enrollment announcement when you log in to Workday. Click the announcement and follow the prompts.

- Choose your benefits for 2024, and don't forget to click **Submit**.
- Elect your Employee Stock Purchase Plan (ESPP) contributions.

Enroll before the deadline. The deadline to submit your Annual Enrollment elections is Wednesday, November 15, but don't wait until the last minute. It doesn't leave much time for questions or changes.

11. Do I need to complete my Annual Enrollment task?

Yes, please! Even if you aren't planning to make any changes to your coverage, we strongly recommend clicking into the Annual Enrollment task to ensure that you and your dependents are enrolled in the right plans to fit your needs for 2024, and then submitting the event.

Keep in mind that under IRS rules, for the majority of your benefits, you can only make changes to your elections during the year if you have a [qualifying life event](#). So, take the time now to make sure your elections for 2024 are exactly what you intend. You'll find your enrollment event in your Workday inbox beginning Wednesday, November 1. Enrollment will be available until the end of the day on Wednesday, November 15.

12. Where do I go for more information?

- [WorkdayBenefits.com](#) is your starting point. You'll find key information about all our plans, including changes for next year, plan summaries, and more.
- Attend the [U.S. Benefits Webinar and carrier-specific webinars](#) from October 31 to November 13. Can't make one? We get it. We'll be recording them just in case. Pro tip: Download the invites from our events calendar so you don't forget to join us. Need the replay link? [Here you go](#).
- Have a question you can't find the answer to? Reading through this FAQ is a great place to start. Some plans will have one-on-one conversations or office-hours-style webinars available for you to ask questions. If you have a Workday-specific question, open a [People Guide Request](#). Someone from our team will personally get back to you.

13. What happens if I don't enroll by the deadline?

In many cases, we'll be able to keep you in the same coverage you had for 2023, but there are some exceptions. Plus, you'll miss out on your once-a-year chance to make sure you have the right coverage for the following year, unless you have a [qualifying life event](#).

- You'll miss the opportunity to enroll in the new SimplePay Health medical plan or Cigna dental plan in 2024.
- You'll waive participation in Flexible Spending Accounts (FSAs) for 2024.
- You'll miss out on the chance to increase your life insurance without evidence of insurability.
- You can't join our new pet insurance plan with PetPartners in 2024.

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14. Whom can I cover? Do I need to submit proof?

You can elect coverage for your legal spouse, qualified domestic partner, and/or eligible children. Workday does not require proof of [dependent eligibility](#) to enroll your family, but we do reserve the right to request it, if needed, to support an audit or resolve an inquiry. Keep in mind that if you decide to cover a domestic partner (or their children) on Workday plans, a portion of your contributions will be made after-tax, and imputed income may also apply.

15. How do I add a dependent to my coverage?

Start by selecting the plan tile where you'd like to add dependent(s) coverage. Once you've selected or confirmed that you're enrolled in the intended plan, click **Confirm** and **Continue**. Then, follow the steps below that apply to your situation:

- If this is a **new dependent** (i.e., someone you've never added before):
 - ◆ Click **Add New Dependent**, then select **Create Dependent**. If you'd like to list this dependent as a beneficiary, check **Use as Beneficiary** and then **Ok**.
 - ◆ Enter your dependent's personal information, and click **Save**.
 - ◆ Confirm that your dependent's name is now listed and that the checkbox next to their name is checked (if you want them to have coverage under that plan).
- If you want to add an existing dependent to a plan: Confirm that the checkbox next to your dependent's name is checked. An unchecked box means they will not have coverage under that plan.

16. What are the tax implications of enrolling my domestic partner in medical coverage?

If you enroll your domestic partner and/or your domestic partner's child(ren) in health plan coverage, the entire cost of their coverage that is paid for by Workday is considered a part of your gross income for federal tax purposes. Need help understanding these rules? Reach out to [Northstar](#) for extra guidance!

17. What happens if I have a qualifying life event or address change during Annual Enrollment?

Marriages, babies, and other life changes happen when they happen, whether it's Annual Enrollment or not! If this is your situation, focus first on completing and submitting your [qualifying life event](#). Benefits plans rely on effective dates, so you'll need to process your 2023 change first, since those coverage changes will go into effect before your Annual Enrollment elections do.

- If you've moved and your new address changes any of the benefits available to you, you'll see a related qualifying life event automatically appear in your Workday inbox for action.
- For all other types of qualifying life events, submit the **Change Benefits** task in Workday to get started.
- After you've completed your 2023 changes, you'll see the Annual Enrollment event reappear in your Workday inbox, and you'll need to complete it again (if you had already submitted it), so that the changes carry forward to your 2024 coverage as well. You'll have two weeks from the day that event launches to your Workday inbox to submit your Annual Enrollment event with the updated elections.

18. I joined Workday in 2023. Do I have to enroll again?

Yes. Going forward, you'll only need to do this once a year (or when you have a [qualifying life event](#)), but the elections you made as a new hire earlier in the year only cover you through the end of 2023. Since there are changes for next year, you'll want to review your coverage during Annual Enrollment and verify that you (and your qualified dependents) are enrolled in the plans you want. If not, this is your opportunity to make and submit any changes to your elections for 2024.

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19. What if I'm on a leave of absence during Annual Enrollment?

During a leave, you can still access Workday using your normal credentials, and you'll want to enroll for 2024 benefits through your Annual Enrollment task, just as if you were actively at work. Keep in mind that certain increases, like life insurance, may not go into effect if you're still on a leave as of January 1, 2024, but they will apply as soon as you return to work.

Tip: If you are having trouble accessing Okta or Workday, please contact Business Technology at 877-951-9348.

20. Where is my 401(k) enrollment shown?

You can review and request changes to your 401(k) contributions and investment options at any time; no Annual Enrollment is required! Head over to [Fidelity](#) to check on your retirement plans and savings. Want some extra help planning your contributions for next year? Let us introduce you to [Northstar](#)!

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Medical: SimplePay Health (more plan information [here](#))

21. How is SimplePay Health different?

As the name implies, it's designed to make health insurance simpler. Plus, it could save you some serious cash.

SimplePay Health uses a national network administered by Aetna, which is different from our current Cigna and Kaiser medical plans. When you need care, you'll first search for a provider through the SimplePay Health app. Providers are organized by three tiers: tier 1 (green), tier 2 (yellow), and tier 3 (red). Tier one is for providers with the highest quality in care and lowest copays.

At the time of your visit, you will present your ID card and pay \$0 (including prescription pickups). With SimplePay Health, you pay for any covered services you receive through one convenient bill at the end of each month. If you need more time to pay the full bill, you can take advantage of 0% financing.

Many providers are in both the Cigna and SimplePay Health networks, but if you'd like to verify ahead of time, visit the [SimplePay Health website](#). Or contact a [SimplePay Health Valet](#) at 800-606-3564 for assistance finding a provider.

Current Kaiser members: Because you can only visit Kaiser doctors, you would need to find a new doctor within the Aetna network if you were to switch to SimplePay Health. A SimplePay Health Valet can help you find high-quality doctors.

Important! Be on the lookout after you submit enrollment for a link to the Member Financial Onboarding Agreement. You'll need to complete the agreement and set up a method of payment for your monthly billing statement. You'll get the link and instructions through a task in your Workday inbox.

22. Can I elect an HSA if I enroll in SimplePay Health?

The SimplePay Health plan does not meet the IRS requirements for Health Savings Account (HSA) contributions. If you enroll in the SimplePay Health plan, you can't elect or contribute further to an HSA. However, if you have HSA funds from 2023 or before, you can continue to use them for health care expenses, even after you move to SimplePay Health. Existing HSA funds are always yours to keep—you don't forfeit them, and they don't expire.

23. Can I elect a Health Care Flexible Spending Account (FSA) if I enroll in SimplePay Health?

Yes. You can elect a Health Care FSA when you enroll in SimplePay Health. This is a convenient, tax-free way to cover the costs detailed in your monthly SimplePay Health bill! If you enroll in a Health Care FSA for 2024, you'll get a new virtual debit card issued by [Benepass](#) that you can use for your SimplePay Health copays.

24. How do I know how much my care will cost?

You can look up providers and services on the SimplePay Health member portal or through the SimplePay Health app (both available January 1, 2024). For right now, take a look at the [SimplePay Health website](#) for cost information. Providers are listed in tiers based on their quality rankings. The highest-quality providers cost you less. There's also a schedule of copays that you can use to see the cost for common services like office visits, prescriptions, and more. If you'd like help evaluating costs, call a [SimplePay Health Valet](#) at 800-606-3564 for one-on-one assistance.

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25. How do I pay for my care?

You'll get one bill at the end of each month for all medical and prescription drug copays that you're responsible for. You can use 2024 FSA and/or prior year HSA funds (if available) to cover the cost of your copays, or you can simply pay out of pocket, just like any other medical plan. If you need more time to pay your full bill, you can take advantage of 0% financing through SimplePay Health. See also ["Can you tell me more about the Member Financial Onboarding Agreement?"](#) below.

26. How does SimplePay Health determine which providers fall under which tier?

SimplePay Health assesses in-network providers on four criteria:

- Quality – Best-in-class trainings, certifications, and care outcomes
- Relationship – Associated with top-quality facilities
- Experience – Delivers a positive patient experience
- Efficiency – Delivers the best (and appropriate amount) of care for the best price

Then, SimplePay Health assigns providers a tier based on those four areas. Those tiers are:

- Tier 1 (green) – Meets all criteria; lowest copay
- Tier 2 (yellow) – Meets most criteria; average copay
- Tier 3 (red) – Meets some criteria; highest copay

To find participating providers, including provider tiers, check the [SimplePay Health website](#).

27. Do I have to use in-network providers on the SimplePay Health plan?

No. You aren't required to use in-network providers. However, your copays are more expensive with out-of-network providers, and the SimplePay Health plan doesn't have an annual out-of-pocket maximum for out-of-network care.

28. I'm in the middle of treatment. Can I keep my current doctor?

First, check to see if your current provider is already in the Aetna network. If not, contact SimplePay Health for a Transition of Care form to continue care with your current doctor for an in-network price (up to six months). You can reach a [SimplePay Health Valet](#) at 800-606-3564 or at healthvalet@simplepayhealth.com.

29. Who handles prescriptions for SimplePay Health? Will the cost of my prescriptions be different if I have Cigna with CVS Caremark as my prescription drug carrier?

SimplePay Health prescription drug coverage is administered by CVS Caremark. The CVS Caremark network includes major retail pharmacies like Walgreens, Costco, and—naturally—CVS. Your cost depends on the type of prescription you fill (generic, preferred brand, non-preferred brand, specialty) and the length of the fill (30-day or 90-day). In most cases, that means the exact cost of your prescriptions varies between Cigna plans and the SimplePay Health plan. With SimplePay Health, you'll show the pharmacist your ID card and pay \$0 when you pick up your prescription(s). You'll pay your share via your monthly statement from SimplePay Health. Review the [medical plan comparison chart](#) for prescription drug copays.

30. Can I use Mind Matters (powered by Lyra) with SimplePay Health?

Yes. You can use Mind Matters (powered by Lyra) with SimplePay Health. Mind Matters providers are in-network, so you may continue to see the same provider. Plus, Mind Matters providers are covered at the in-network level even beyond the first 16 sessions per year provided to you at no cost.

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31. Can I use Cloud Care/Premise Health services with this plan?

Yes! You have access to all Premise Health services, including Cloud Care in Pleasanton, nearsite health centers in Atlanta, and 24/7 virtual care. The best part? It costs you \$0. Use the My Premise Health app, visit MyPremiseHealth.com, or call 844-737-0894 to get started.

32. If I enroll in SimplePay Health, can I still use Maven Wallet?

Absolutely! All Maven services, including support for fertility, surrogacy, adoption, and more are available to you automatically at no cost. If you're planning to expand your family, or if you already have and could use a little extra support, [check out what Maven has to offer](#).

33. I have secondary insurance. Can I enroll in SimplePay Health?

In most cases, it's not financially advantageous to have double medical plan coverage due to rules commonly referred to as "coordination of benefits." We strongly recommend that you have a detailed conversation with a [SimplePay Health Valet](#) before enrolling as secondary coverage. You can reach a Health Valet at 800-606-3564 or via healthvalet@simplepayhealth.com for assistance.

34. Do I have to complete the Member Financial Onboarding Agreement to enroll?

Yes, and this is important! **You must complete the financial agreement no later than November 30.** Otherwise, you won't be eligible to remain in the SimplePay Health plan beginning January 1. The Member Financial Onboarding Agreement is a legal requirement because the plan is providing the funding for your copays up front, and you are responsible for making payment back to the plan for the copays associated with the care you received.

35. Can you tell me more about the Member Financial Onboarding Agreement?

One of the benefit features included with your SimplePay plan is a financial line of credit, available to you up to your out-of-pocket maximum. This line of credit can (but is not required to) be used to spread your out-of-pocket cost over an extended period of time at a 0% interest rate. This financial well-being benefit can help avoid the need to use high interest rate financing to pay for your out-of-pocket healthcare costs. There is no credit check, and there is no impact to your credit report.

Since this is a financial line of credit, Workmates will be required to electronically review and sign a financial disclosure and authorization document. As part of the process, you will be asked to provide your preferred payment account and method. While you have the option to pay your monthly statements by mail or online, you are asked to provide access to an account, which can remain on file and be used either for convenience or to process for late payments. Completion of this financial authorization document is a requirement for participation in the SimplePay Health plan.

When you receive your monthly statement, you have the option of either paying in full or choosing to pay the minimum amount due. If you pay in full, you'll receive a 1.5% credit on your next monthly statement. If not, you'll be asked to pay the minimum amount due (typically \$100, or your balance, whichever is less). Should the minimum amount ever become unaffordable, please reach out to your [SimplePay Health Valet](#) for assistance in reducing the minimum amount due.

We hope you appreciate the value and convenience of this benefit of 0% financing with no fees or penalties. And while you're not required to utilize this line of credit, it's nice to know it is available to be accessed at any time with no impact to you financially, or to your credit report.

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36. This seems too good to be true. What's the catch??

SimplePay is a comprehensive medical plan - just like what you have today, but simpler. We think you're going to love it, but there's always a few things to think about.

- Are you putting the maximum into your Health Savings Account (HSA) to save for healthcare in retirement? You won't be able to make HSA contributions while you're enrolled in SimplePay - this is due to IRS regulations that require you be enrolled in a *"qualified high deductible health plan"*. You can still save on taxes by using a [Flexible Spending Account \(FSA\)](#) instead.
- Do you have providers that aren't in the SimplePay Health network? Depending on how much those providers charge for their services, you could still come out ahead - but take the time to find out so you're not surprised in January.
- Do you prefer to do a lot of math? Like figuring out deductibles, coinsurance percentages, network discounts, and receiving multiple bills each month? SimplePay eliminates all that for you and tells you the copay up front, but if you enjoy the math of a traditional medical plan, you might not like SimplePay.
- Have a worry or concern we haven't addressed? Reach out to a [SimplePay Health Valet](#) at 800-606-3564 or via healthvalet@simplepayhealth.com for assistance.

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Medical: Cigna (more plan information [here](#))

37. What's changing in the Cigna Smart Plan?

- Due to IRS guidelines, the in-network Cigna Smart Plan deductible will increase in 2024 to \$1,600 for employee only coverage and \$3,200 for family coverage.
- The Workday contribution to the Health Savings Account accompanying the Cigna Smart Plan is decreasing to \$1,000 for employee-only coverage and \$2,000 for family coverage.
- The in-network out-of-pocket maximum is decreasing to \$3,200 for employee-only coverage and \$6,400 for family coverage.
- Per-paycheck contributions are modestly increasing.

Looking for a more detailed deep dive? Sign up for a [one-on-one appointment](#), read the [plan summaries](#), and review the [medical plan comparison chart](#).

38. What's changing in the Cigna Core Plan?

Modest increases to Workmate per-paycheck contributions will apply to the Cigna and Kaiser medical plans.

39. Can I talk to someone about the Cigna plan options in more detail?

You bet! Sign up for a [one-on-one appointment](#) with [Olga Reyna](#), our dedicated Client Service Partner, or contact Cigna at 877-505-5870.

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Medical: Kaiser (more plan information [here](#))

40. What's changing in the Kaiser plans?

Modest increases to Workmate per-paycheck contributions will apply to the Cigna and Kaiser medical plans. Also, due to IRS requirements, the Kaiser Smart Plan deductible will increase in 2024 to \$1,600 for employee-only coverage and \$3,200 for family coverage.

Read the [plan summaries](#), and review the [medical plan comparison chart](#).

41. How is the Kaiser plan different from Cigna and SimplePay Health?

Kaiser takes an under-one-roof approach to health care. That means your primary care physician—and doctors they refer you to—will be Kaiser doctors. Those doctors likely all work in the same building, and they'll coordinate your care together. Here's the catch: Unless it's an emergency, your care is only covered when you visit Kaiser doctors and facilities (i.e., no out-of-network coverage).

If you're considering enrolling in a Kaiser plan, keep these things in mind:

- All your doctors must be Kaiser doctors, so you may have to switch from the providers you visit now.
- You'll need to visit Kaiser facilities for medical care. Do you and your dependents live near a Kaiser facility? How often might you need to travel out of Kaiser coverage areas?
- Your prescriptions must be filled at Kaiser pharmacies.
- The Kaiser Traditional Plan has no deductible and the lowest out-of-pocket maximum of all Workday medical plans.

42. Can I talk to someone about the Kaiser plan options?

You bet. Get in touch with Kaiser by texting 773-974-3113, Monday through Friday, 6:00 a.m. to 6:00 p.m. Pacific time, or by calling 800-324-9208 to speak to a representative Monday through Friday, 7:00 a.m. to 6:00 p.m. Pacific time.

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Dental (more plan information [here](#))

43. Is anything changing in 2024?

Yes! You can now select our new Cigna dental plan: the Total Cigna DPPO. The new Cigna plan offers the same benefits and coverage as the Delta Dental PPO plan, but with a different network option. A summary of the Cigna Dental plan option is available [here](#).

44. Do I have to enroll in a Cigna medical plan to enroll in the new Cigna dental plan?

No. You do not have to be enrolled in a Cigna medical plan to enroll in the Total Cigna DPPO dental plan. If you enroll in the Cigna dental option, you'll receive a separate ID card, just for dental coverage, in late December.

45. How do I find dentists in the Cigna network?

Go to [Cigna.com](https://www.cigna.com) and use the [Find a Doctor tool](#) to find in-network dentists near you. When asked to select your plan, choose **Total Cigna DPPO**. There are two sub-networks within the Total Cigna DPPO network—Cigna DPPO Advantage and Cigna DPPO. While both sub-networks of dentists are considered in-network, you'll receive greater discounts with a Cigna DPPO Advantage provider.

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Vision (more plan information [here](#))

46. Is anything changing in 2024?

Good news! There are a couple of enhancements to the vision plan for 2024.

- Lens enhancements are covered (impact resistance for adults; high index; UV protection).
- We're increasing the out-of-network reimbursement allowance for retinal scans.

Get more details about coverage and copays [under our vision benefits](#).

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Health Savings Account (more plan information [here](#))

47. Do I need to enroll if I want to keep contributing the same amount?

If you reenroll in one of the Smart Plans, your current Health Savings Account (HSA) contributions will automatically continue in 2024. If you want to take advantage of the higher contribution limits for next year, you must increase your contributions. If you'll be 55 or older in 2024, you can contribute an extra \$1,000 to your HSA.

2024 HSA Limits	Yourself only	You + dependents
IRS annual maximum	\$4,150	\$8,300
Workday contribution	\$1,000	\$2,000
You can contribute up to	\$3,150	\$6,300

48. How will I get the Workday contribution to my Health Savings Account (HSA)?

Workmates electing the Cigna or Kaiser Smart Plan during Annual Enrollment will see a portion of the Workday contribution deposited to their HSAs each pay period beginning in January (24 pay periods). If you've already set up an HSA with Fidelity, you don't need to act further.

Note: If this is the first time you've elected a Smart Plan, be on the lookout for information from Fidelity in mid-December about how to open your account. If you don't sign up ASAP, the Workday HSA contribution to your account may be delayed.

49. I am enrolling in a Smart Plan, but I do not want to enroll in the HSA. Can the HSA be waived?

You may choose to opt out of the HSA if you don't want to receive the Workday contributions, or if you're not eligible due to other coverage. If this applies to you, please submit a [People Guide Request](#), and the benefits team will make the update after Annual Enrollment ends.

50. Can I contribute a lump sum to my HSA at the beginning of the year?

Yes, but you should be careful. The HSA contributions you make through payroll deductions, plus Workday contributions, appear in your HSA incrementally over 24 pay periods. If the total amount of your contributions and the Workday contribution over the course of the year exceeds the IRS limit for 2024, then your excess contributions will be subject to an IRS penalty. Factoring in the Workday contribution, the maximum amount you can contribute in 2024 is \$3,150 for employee-only coverage and \$6,300 if you're covering any dependents. If you're considering making contributions directly to your HSA, we recommend you consult with [Northstar](#) to review any tax implications. If you wish to proceed, contact [Fidelity](#) directly for next steps.

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Flexible Spending Accounts (FSAs) (more plan information [here](#))

51. Is anything changing for Flexible Spending Accounts (FSAs)?

Starting in 2024, Benepass will replace HealthEquity as our administrator for FSA and commuter benefits. It comes with a much cleaner online app and interface, plus a digital FSA debit card. The IRS may increase the annual maximum contribution limits for FSAs in 2024, but they haven't released their decision yet.

52. What happens to my unused FSA funds from 2023? Will they transfer to Benepass?

Your unused 2023 FSA funds will not immediately transfer to Benepass.

- For **Health Care FSA**: Up to \$610 of funds remaining in your 2023 FSA can be rolled over to 2024. These funds will remain in your HealthEquity account through March 31, 2024, to enable you to submit your final 2023 claims. At that point, any remaining funds in your HealthEquity account will transfer to your new Benepass account. New contributions for 2024 will go to your Benepass account.
- For **Dependent Care FSA**: No funds will roll over to 2024. You forfeit (i.e., lose) any funds remaining in your account after December 31, 2023.

53. If I have an FSA expense in late December but I can't submit my claim until January, how and where will I submit my claim?

If you have an FSA expense from 2023, you can submit it to HealthEquity for reimbursement through March 31, 2024. You cannot submit claims for 2023 expenses past March 31, 2024. Remember, debit card transactions always use funds from the current year when you swipe. So, you can't use your HealthEquity debit card after December 31, 2023, at the doctor's office or pharmacy, nor to pay a bill online. To get reimbursed for expenses in 2023, you'll need to log in to your HealthEquity account and submit a claim. And you can't use your shiny new Benepass card in 2024 to pay for an expense from 2023.

54. When will new FSA cards be issued?

Benepass is a virtual card platform, meaning you'll receive a new, digital Health Care FSA card from Benepass through the Benepass app. Beginning in January, you can download the Benepass app and register your account for the first time. You may then request a physical card if needed, which will be mailed in 5–7 business days.

55. Do I need to enroll if I want to keep the same FSA amounts?

Yes. If you want to participate in a Health Care or Dependent Care FSA, you must enroll each year. We're not allowed to assume that you want to contribute the same amount each year. Before you decide what to contribute in 2024, make sure you understand how much carryover you expect from 2023.

Since we have a new FSA administrator in 2024, your Health Care FSA carryover (if applicable) will remain in your old account with HealthEquity until after March 31, 2024, at which point any qualified remaining carryover balance will be transferred to Benepass. Your 2024 contributions will go to your new account with Benepass.

As a reminder, Dependent Care FSAs do not allow for carryover of any unused funds, and Health Care FSA carryover is up to a maximum of \$610. Any unused Health Care FSA funds above the carryover limit are forfeited. So, plan carefully, or you could risk losing your account balance.

Updated November 2023

56. I am enrolling in a Smart Plan with Health Savings Account (HSA) for 2024, but I also want to contribute to an FSA. Is that permitted?

Yes, but there are some considerations you should be familiar with. If you contribute to a Health Care Flexible Spending Account (FSA) during the same year that you have a Smart Plan with an HSA, your FSA will be considered "limited purpose." The difference? A Health Care FSA is for all eligible health care expenses, including medical, prescription drug, dental, and vision care. A Limited Purpose FSA is exclusively for dental and vision expenses until you meet your plan deductible, at which point you can use it for medical and prescription drug expenses.

57. Where can I find my 2023 FSA and Limited Purpose FSA account balances?

Log in to the [HealthEquity website](#) to review your 2023 FSA balances. If you have not opened an account, your ID code is the last four digits of your Employee ID Number (add a leading zero, if needed, to make four digits).

Updated November 2023

Commuter Accounts (more plan information [here](#))

58. Is there any change to the commuter benefit?

Starting in 2024, Benepass will replace HealthEquity as our administrator for commuter benefits and FSAs. The IRS may increase the annual maximum contribution limits for commuter accounts in 2024, but they haven't released their decision yet.

You'll make your election in Workday for 2024 contributions. You'll see the two new commuter plan options when you make your Annual Enrollment elections. As part of the change, your contributions for commuter plans will be deducted every pay period (24 pay periods each year).

59. Can I enroll in commuter benefits any time or only during Annual Enrollment?

Commuter benefits enrollment is not limited to Annual Enrollment; however, the deadline for enrolling in the commuter benefits is the Friday before each paycheck. For example, to contribute for February 2024, you would need to have submitted your election no later than Friday, January 26. The first paycheck in February is issued on Friday, February 2, and the processing cutoff is the prior Friday.

60. What happens to my existing commuter plan balances?

Any contributions that you made in and prior to 2023 will continue to be administered by WageWorks until March 31, 2024. Remaining balances for FSA and commuter plans will be transitioned to Benepass shortly after the March 31 filing deadline.

Updated November 2023

Life and AD&D Insurance (more plan information [here](#))

61. When does evidence of insurability (EOI) apply?

- For Basic Life and AD&D, which is paid for by Workday, no EOI applies during 2024 Annual Enrollment. If you previously elected the \$50,000 option and would like to enroll in coverage up to two times your eligible pay, you may do so during Annual Enrollment without EOI.
- You may increase your voluntary life insurance coverage up to \$100,000 during Annual Enrollment without EOI. The most voluntary life coverage you can elect is 5 times your eligible pay or \$1 million, whichever is less.
- You may increase life insurance coverage for your spouse up to \$50,000 during 2024 Annual Enrollment without EOI, subject to the plan maximum of \$500,000 or the amount of your own voluntary life insurance coverage, whichever is less.
- AD&D coverage increases don't require EOI. You may elect and/or increase AD&D coverage for yourself, your spouse, and/or your eligible children without EOI.

62. How do I complete EOI if required?

Workmates who need to complete EOI for additional Voluntary Life coverage will see a task in Workday beginning November 21 that includes a link to the Unum EOI application.

*Tip: If you accidentally hit **Submit** too soon on the Workday task, you can still access the task through the EOI Announcement or navigate to the Unum site. Go to Workday, select the **Benefits** app, then look for the **Unum EOI** option in the **External Links** section.*

63. Why has my life insurance premium increased?

Although our life insurance rates are not increasing for 2024, you're another year older, which can mean an increase to your life insurance premium. [Review the rates by age band.](#)

Updated November 2023

Disability Plans (more plan information [here](#))

64. What's the difference between long-term disability (LTD) and salary continuation?

The Workday Salary Continuation program is there to support you immediately after a serious illness or injury. After 52 weeks, if you're still unable to return to work due to a qualified health condition, long-term disability (LTD) applies.

65. Is disability still managed by Unum?

No. In 2024, leave of absence and disability coverage will be through Lincoln Financial (replacing Unum).

66. What is the difference between imputed income for LTD coverage compared to a pretax Workday-paid benefit?

It all comes down to when taxes will apply. If your coverage is paid pretax (or 100% by Workday), then any benefits you receive from the plan later—for example, if you become disabled—are taxable in the year you receive payment. On the other hand, if you pay for the coverage with post-tax dollars (or in this case, by having imputed income applied), the benefits you receive from the plan are not taxable.

67. Where can I find more information about disability and leaves of absence?

You don't need to do anything special to enroll in disability and leaves of absence benefits. These are provided automatically by Workday for your protection. Learn more at WorkdayBenefits.com.

68. I live in California. Do I need to have California VDI coverage?

California law says you must have either Workday Voluntary Disability Insurance (VDI) or California State Disability Insurance (SDI). However, you're allowed to switch. While both plans cost the same, the Workday VDI plan provides a richer benefit, meaning it's much better protection for you.

Updated November 2023

More Protection for You and Your Family (more information [here](#))

69. What's the difference between long-term care (LTC) and long-term disability (LTD)?

Long-term care and long-term disability may sound similar, but they're actually different coverages.

- [Long-term disability \(LTD\)](#) provides partial wage replacement when you're unable to work due to your own illness or injury for more than 52 weeks. Eligible Workmates are automatically enrolled in LTD, paid for by Workday.
- Long-term care (LTC) provides a benefit to help cover the costs of services like home health care, hospice services, and nursing facilities when you're unable to perform activities of daily living, such as eating, bathing, and dressing. You have two options for LTC—a Unum plan and a new Trustmark plan. During 2024 Annual Enrollment, you can purchase LTC coverage from Trustmark up to certain guaranteed-issue amounts without medical review.

Have questions about policy amounts, eligible expenses, or the enrollment process? Call AGIS at 877-485-2318, or email LTCHelp@AGIS.com for assistance.

70. How is the new long-term care (LTC) plan with Trustmark different from the current plan with Unum?

The new LTC plan with Trustmark offers a slightly different type of policy—one that blends life insurance and LTC options. We've also added enrollment and concierge support through AGIS. For example, AGIS can help explain what LTC is, how it works, how the Unum and Trustmark plans compare, and why it may work for your situation.

71. Can I sign up for long-term care (LTC) with Trustmark and elect payroll deductions for this benefit?

Workday Payroll doesn't deduct premiums that you pay to Trustmark for your LTC policy. As part of purchasing your Trustmark policy, the AGIS team will assist you with setting up a payment method for your policy. If you ever leave Workday, your coverage (and premium payments) will continue uninterrupted.

Note: You won't see your Trustmark LTC plan coverage in Workday. Refer to the policy confirmation and documents provided by Trustmark for your records.

72. When can I enroll in long-term care (LTC)?

You can enroll in LTC during Annual Enrollment, and your policy will be effective December 1, 2023. However, for this new plan from Trustmark, you'll also have a special opportunity to enroll in spring 2024.

73. Are there any changes to MetLife Legal Plans?

Yes, and it's good news! If you enroll in the MetLife Legal Plans Parents Plus during this Annual Enrollment, you'll get TurboTax next year for free! Find more information about exactly what services are covered under the [two MetLife Legal Plans options](#).

74. What is critical illness, accident, and hospital coverage?

Each of these are [separate plans offered through Unum](#) that cover different circumstances. What they all have in common is a wellness benefit available each year from Unum just for getting routine preventive care. You can claim the Unum wellness benefit for each plan and each covered family member every year! Do the math, and you'll see just how affordable some extra coverage can be.

Updated November 2023

Time Away

75. What's changing with leaves of absence for U.S. Workmates next year?

In 2024, Lincoln Financial will take over the administration for most U.S. leaves of absences, like medical leave, bonding time, and caregiver leave. We'll share more information closer to the start of the year about how leaves of absence will work going forward.

76. If I have a leave scheduled into 2024, will it automatically transfer to Lincoln Financial, or will it stay with Unum?

Short answer: It depends. The process will look a bit different for Workmates in California compared to other states, so be on the lookout for more information in December.

77. Are there any changes to time off programs?

Yes! We're adding Veterans Day as a paid holiday for U.S. Workmates starting in 2024. [Get the whole calendar.](#)

Updated November 2023

Financial Support (more information [here](#))

78. Are there any changes to the 401(k) in 2024?

You have a new student loan repayment option that works alongside your 401(k)! Starting in 2024, if you contribute 6% of your pay between your student loans *and* your 401(k), you'll be eligible for the full Workday 401(k) match. Sound good? Be sure to enroll on [Fidelity's website](#) between November 1 and December 31, 2023. Expect additional information from Fidelity in the coming weeks if you're currently contributing less than 6% of your pay each year to your 401(k).

79. Is there any new support for student loans?

Say hello to the **Student Debt 401(k) Match Program**—a student loan repayment option that works alongside your 401(k).

Starting in 2024, Workday is allowed to treat your student loan payments the same way as your 401(k) contributions, to get the full Workday match. So, as long as your student loan payments plus your 401(k) contributions equal 6% of your annual pay, you'll get the full matching contribution from Workday.

At the end of 2024, if you haven't contributed 6% of your pay to your 401(k) and you're enrolled in the Student Debt 401(k) Match Program, Fidelity will check how much you paid toward your student loans. Then, in January 2025, Workday will make a true-up matching contribution to your 401(k) with your student loans factored in.

Expect additional information from Fidelity in November if you're currently contributing less than 6% of your pay each year to your 401(k).

80. Can I receive a 3% match on my 401(k) contributions and a 3% match on my student loan payments?

No. Workday will match 50% of your first 6% of your pay that you contribute to either your 401(k) or student loan payments combined (up to the plan maximums). There's no requirement as to how you split up your contributions. All Workday matching contributions will be put into your 401(k).

81. How do I transfer my 3% match to my student loan payment from my 401(k)?

You must enroll on [Fidelity's website](#). Your enrollment will ensure that we're able to confirm your student loan payments throughout 2024.

Updated November 2023

More Protection for Your Pets (more information [here](#))

82. If I already have Nationwide pet insurance, can I keep that policy instead of switching to PetPartners? What about my payroll deductions?

Your policy with Nationwide will continue until or unless you cancel it. Effective January 1, 2024, you can't pay for your Nationwide coverage through payroll deductions. If you choose to keep your Nationwide policy, you'll be responsible for setting up a recurring payment method before January 1. Nationwide will reach out with next steps to all policyholders in December.

83. Will the new plan cover all my pets?

PetPartners only covers cats and dogs, and they must be less than 10 years old at the time you sign up. If you have an existing policy for an older pet, or exotic (non-dog or non-cat) animal with Nationwide, you may want to retain that coverage.

84. What if my pet has a pre-existing condition? Aren't those usually excluded?

You're smart to ask this one! The PetPartners plan includes waiting periods for pre-existing conditions, but they offer "Prior Coverage Credit" if the condition was covered by a prior policy. Need some help with the insurance-speak? Give PetPartners a call at 800-956-2495.

85. When can I enroll?

Unlike Nationwide, PetPartners requires you to enroll in pet insurance during Annual Enrollment or following a qualifying life event. Their qualifying life events include some exciting ones, like adopting a new pet or the birth of puppies or kittens.

86. The enrollment took me straight to the PetPartners site. Will I pay PetPartners directly, or do I pay through payroll deductions?

You'll need to complete your application for coverage on the PetPartners website. As part of purchasing a policy, you'll be asked for your pet's information and to authorize PetPartners to deduct premiums for coverage from your Workday paycheck. Keep in mind that, unlike other pet insurance, the PetPartners plan is a group insurance policy, and you can't make changes during the year unless you have a qualifying life event.

87. How does coverage work with PetPartners?

Just like medical insurance for humans, it depends on the plan you select. There are two PetPartners plans for you to choose from. [Compare the plans](#). A big advantage of the new PetPartners plan is that it offers coverage for cats and dogs with preexisting conditions. There's a lot that goes into the coverage, so if you're interested, consider joining the [PetPartners webinar](#) to get all your questions answered.

88. This sounds great! What do I have to do?

If you'd like to elect coverage with PetPartners, visit their website, and provide your pet's (and your own) details during Annual Enrollment. Unlike other individual policies, you can only enroll with PetPartners when first hired, during Annual Enrollment, or following a qualifying life event.

89. I've enrolled on the PetPartners site, but Workday still shows the plan as waived. Is there a problem?

Not at all! Because this is a new plan that you enrolled in directly with PetPartners, your Workday enrollment event won't yet show the coverage and deductions you elected. After annual enrollment is closed, PetPartners will notify Workday of coverage elections and deduction amounts and the benefits team will update your Workday data. Be on the lookout for your policy documents and confirmation directly from PetPartners shortly after you enroll on their site.