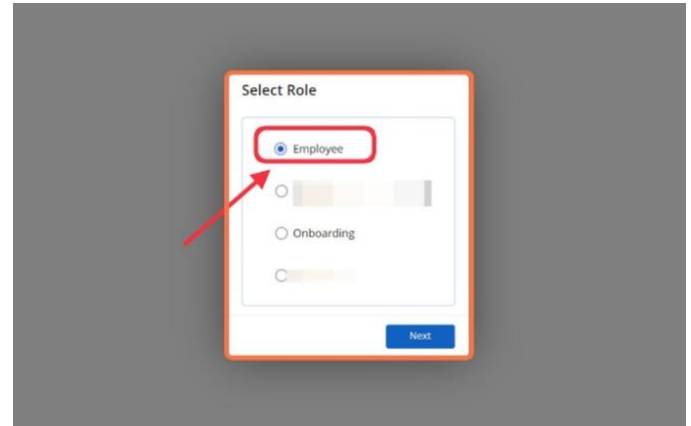
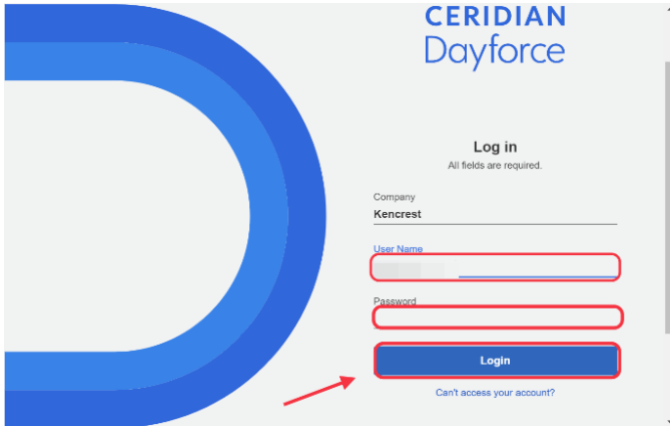


# OPEN ENROLLMENT IN DAYFORCE

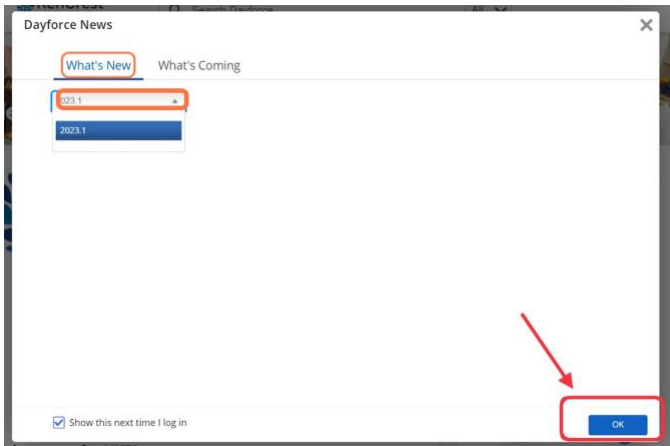
Things to do before logging into DayForce to complete your Open Enrollment:

- Review Benefits Guidebook – you can also do this from the link in the Enrollment screen during the process.
- Gather any information you will need; If adding dependents, you will need birth date(s) and social security number(s).

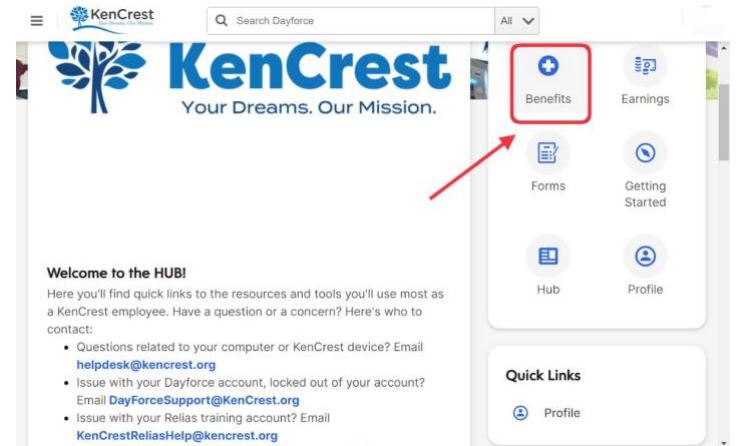
Log into Dayforce: <https://dayforcehcm.com>. **NOTE:** For the Benefits section – a computer/laptop should be used – all functionality is not available in the app!



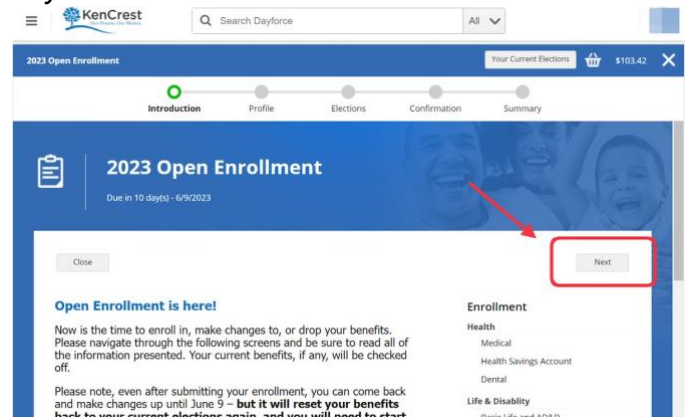
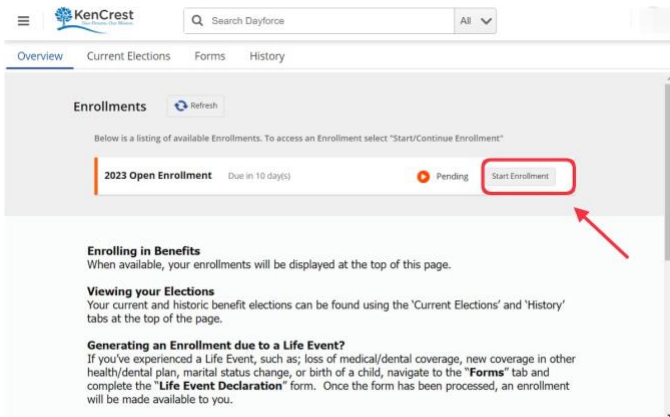
Click on Ok



Click on Benefits

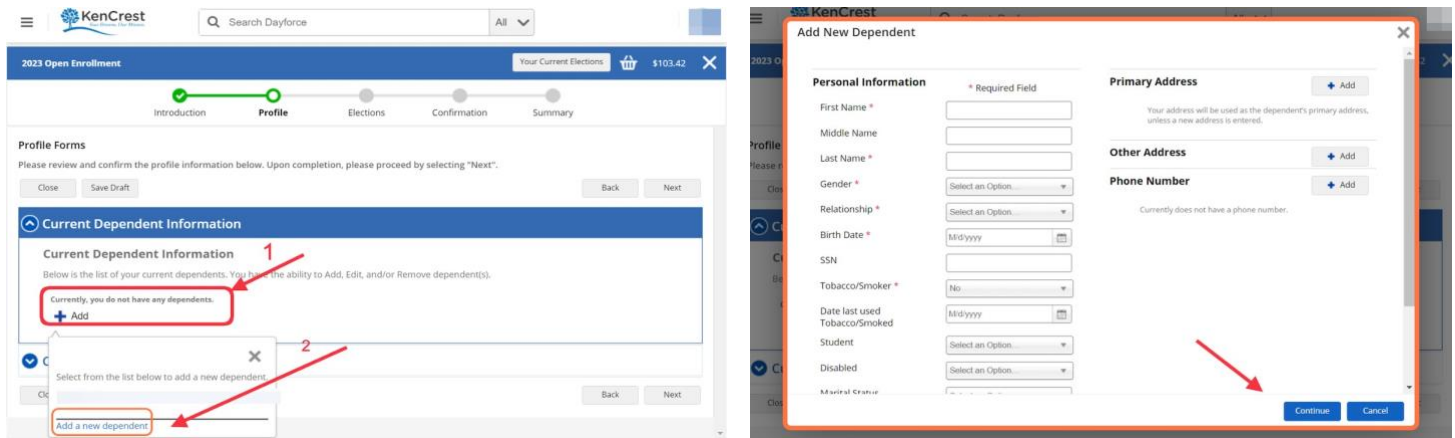


Click on “2024 Open Enrollment”, Click on “Start Enrollment” You will see the Welcome Page – you can click on the link to view the *Benefits Guidebook and other documents/flyer for the benefits*. **NOTE: you can also click on the UNUM link where you can enroll in Critical Illness, Whole Life Insurance, Hospital Plan and/or Accident Plan. Those enrollments are not done in Dayforce.**

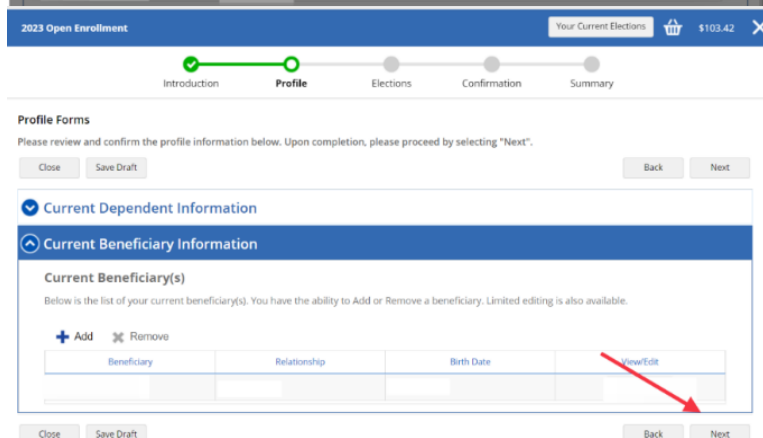
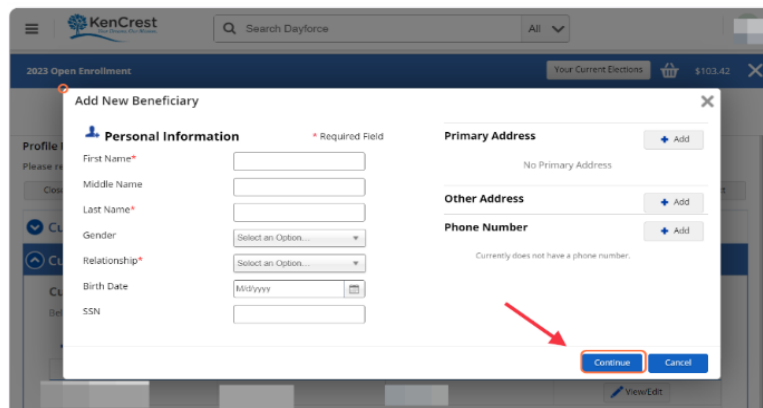
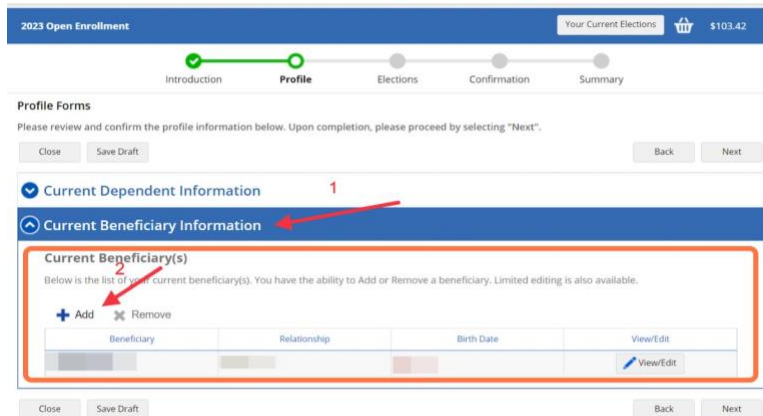


Click on “Next”. This will take you to Profile Forms where you will need to first add **Dependents and Beneficiaries**. Have the dates of birth and social security numbers available for anyone you wish to add. **To add dependent(s) select add, then add a new dependent.**

Add Dependents - Click on the arrow then "Add", then add a new dependent. Enter the required data then "Continue". You can edit Dependents before you commit, but once saved and past the enrollment period, you cannot make Dependent changes until a Life Event or the next Open Enrollment.

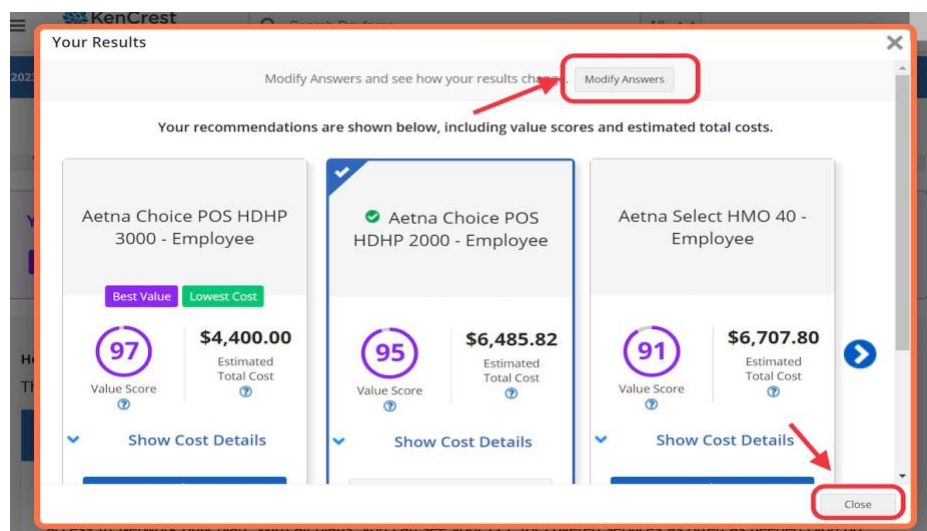
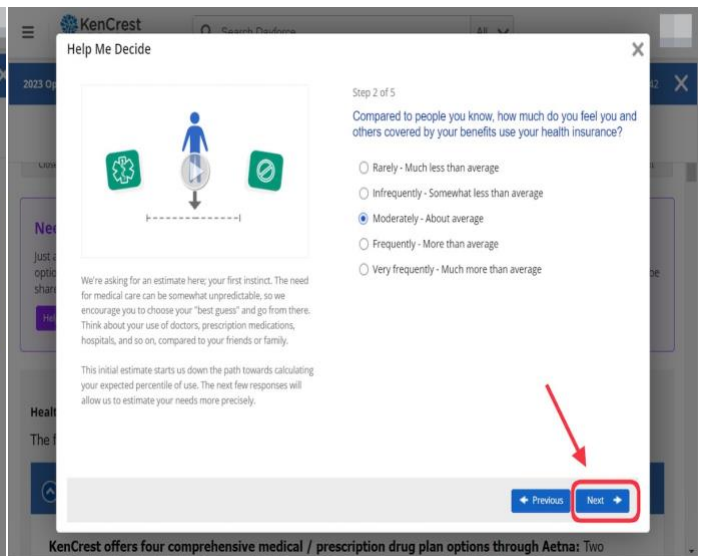
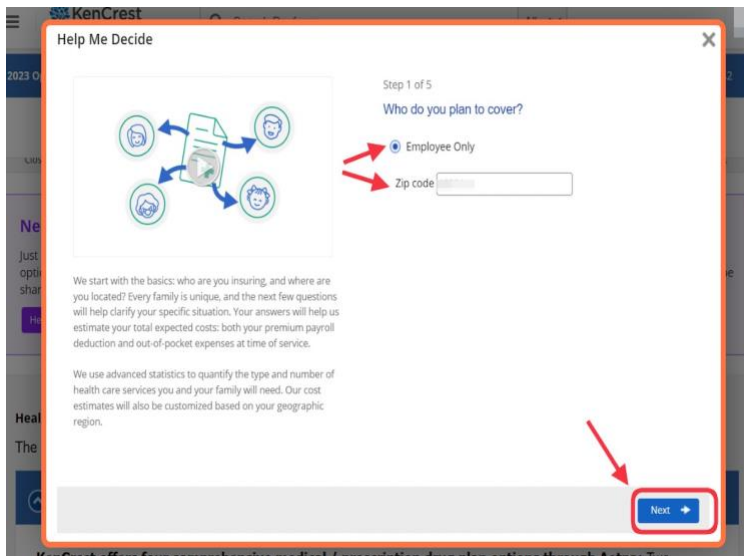
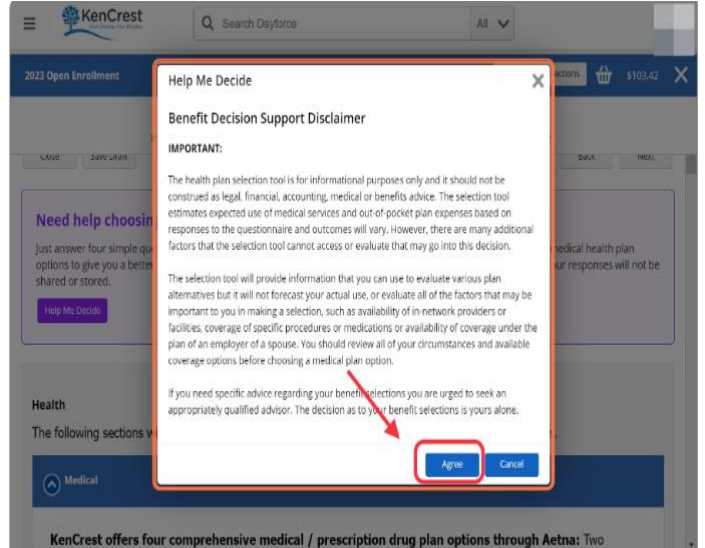
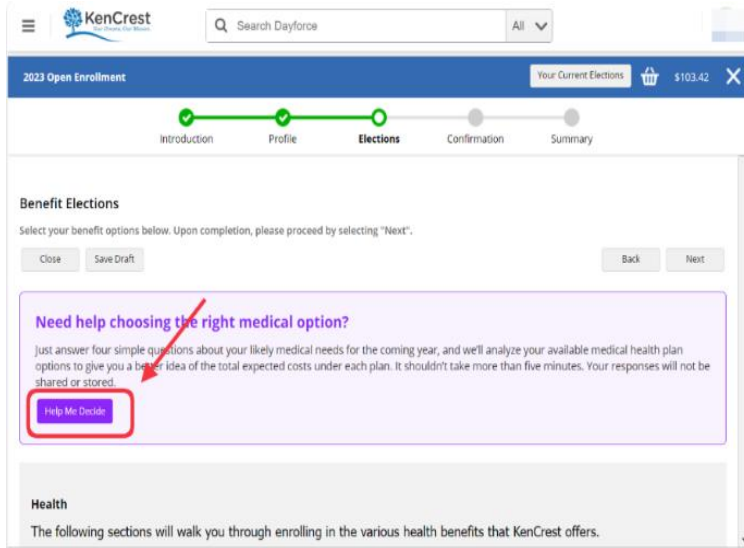


To add Beneficiaries – click on arrow, then "Add". You can select from the Dependents (existing or those you may have just added) so you do not have to re-enter, or you can add additional ones. **You will allocate your beneficiary or beneficiaries as primary or contingent and the percentage - on the life insurance screens later in the enrollment process.** (The percentage total must equal 100%). Note: you can add or change beneficiaries at any time during the year. Click **Next**



# ENROLLING/CHANGING/DROPPING BENEFITS

When you get to the Benefit Elections screen, you will see there is a **decision tool** (in purple box with purple print and button). This calculator can be helpful with comparing the cost of the plans but be aware, it is very limited with the questions it asks and the out of pocket costs it assumes (using an internal formula) seem high. You are encouraged to list how many times you see doctors, specialists, and prescription costs, use the costs based on the plans you are evaluating, and compare that to better help with your planning.



## Health Section – Medical is first:

**2023 Open Enrollment** | Your Current Elections | \$102.42

**Health**  
The following sections will walk you through enrolling in the various health benefits that KenCrest offers.

**Medical**

KenCrest offers four comprehensive medical / prescription drug plan options through Aetna: Two Qualified High Deductible Health Plans (HDHP), one POS plan, and a version of an HMO plan which serves as an open access In-Network only plan. With all plans, you can see your PCP for covered services as often as needed (you do not need to name a PCP, just use a network PCP); No referral is needed to seek care from a specialist & all Aetna plans cover preventive care at 100% for in-network services.

Preventive services include: colorectal cancer screenings, high blood pressure screenings, annual physicals, immunizations, mammograms, pap smears and osteoporosis screenings (age and frequency limitations may apply).

All plans also include Prescription drug coverage however deductibles will apply to the HDHP plans. CVS is the preferred pharmacy.  
For more details about the plans and the CVS relationship, please see the Benefits Guidebook (the link is found in the Introduction Section or ask your HR Representative for a copy).

You must elect 1 option(s) in the election set.

Option	Annual Deductible	Out-of-Pocket Maximum
<input type="checkbox"/> Aetna Choice POS 25 - Employee Start Date: 7/1/2023 Reference Attachments	\$265.77 In-Network: \$0 Out-of-Network: \$1,500	In-Network: \$3,000 Out-of-Network: \$13,000
<input checked="" type="checkbox"/> Aetna Choice POS HDHP 2000 - Employee Start Date: 7/1/2023 Reference Attachments	\$75.00 In-Network: \$2,000 Out-of-Network: \$5,000	In-Network: \$5,000 Out-of-Network: \$10,000
<input type="checkbox"/> Aetna Choice POS HDHP 3000 - Employee Start Date: 7/1/2023 Reference Attachments	\$0.00 In-Network: \$3,000 Out-of-Network: \$5,000	In-Network: \$5,000 Out-of-Network: \$10,000
<input type="checkbox"/> Aetna Select HMO 48 - Employee Start Date: 7/1/2023 Reference Attachments	\$144.68 In-Network Only: \$0	In-Network Only: \$3,000
<input type="checkbox"/> Waive Medical Start Date: 7/1/2023	\$0.00	

- Read the Information provided in the box. You will see your per pay cost beside the plan name.
- You will be provided your options based on the number of dependents you added previously. If you have no dependents, you will see only “Employee” options.
- With medical and other benefits, options you are not eligible for will be grayed out.

### Choose your medical plan.

- If you choose an option with dependents, you will be asked to select which dependents to cover under that plan.
- **Select waive if you are not electing any medical plan or wish to drop it.**

If you choose an HDHP plan, you **must** choose a Health Savings Account Option.

- For the HDHP 2000, you **must** either choose the HSA Employee or Family option and indicate how much you want deposited to the HSA , or choose “waive”.
- For the HDHP 3000 plan, if single coverage - you **must** choose HSA Employee (HDHP 3000) (*other options will be grayed out*). **You will automatically receive the KenCrest contribution to the HSA. The \$50 per pay will not appear there since it is paid for by KenCrest.** You can also contribute your own funds and you would indicate the **annual** amount you want in the box.
- For the HDHP 3000 plan, if you choose any dependent coverage tier, you **must** either choose HSA Family or “waive”.

**2023 Open Enrollment** | Your Current Elections | \$41.67

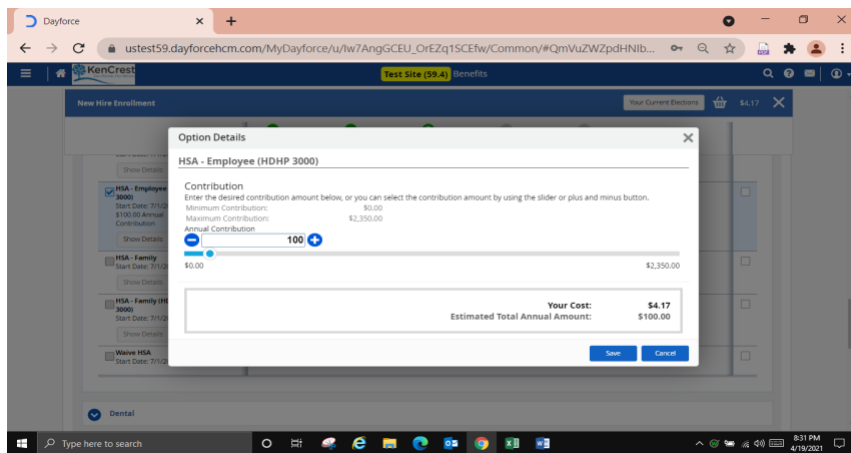
**Elections**

Option Name Ascending | Compare Selected

<input type="checkbox"/> HSA - Employee Start Date: 7/1/2023 Show Details	\$0.00	
<input checked="" type="checkbox"/> HSA - Employee (HDHP 3000) Start Date: 7/1/2023 \$350.00 Annual Contribution Show Details	\$14.58	
<input type="checkbox"/> HSA - Family Start Date: 7/1/2023 Show Details	\$0.00	
<input type="checkbox"/> Waive HSA Start Date: 7/1/2023		

- **IMPORTANT:** with both HDHP plans - when adding your *own* funds, you are electing the **annual amount**. This amount will be divided into the remaining pay periods left in the **PLAN YEAR**. (24 pays) You will be able to review that amount later on in your **CONFIRMATION**.

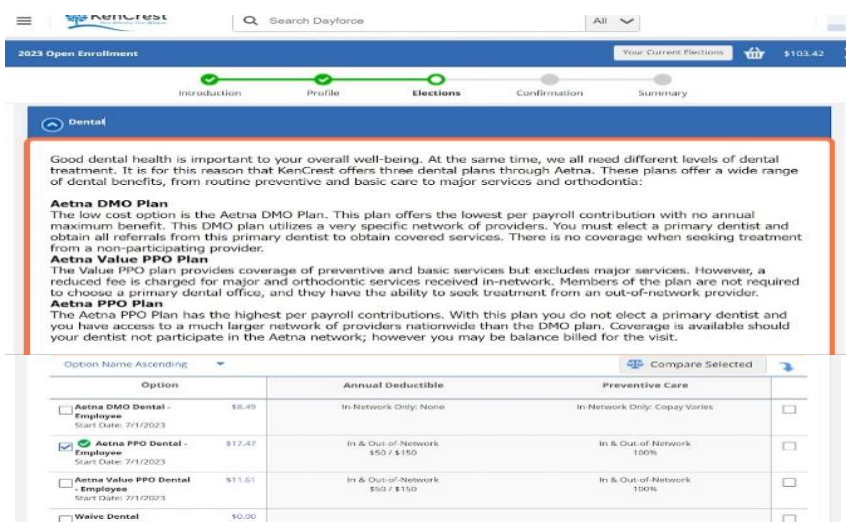
Click "Save" after confirming your HSA amount.



You will then be guided through the Dental Plans

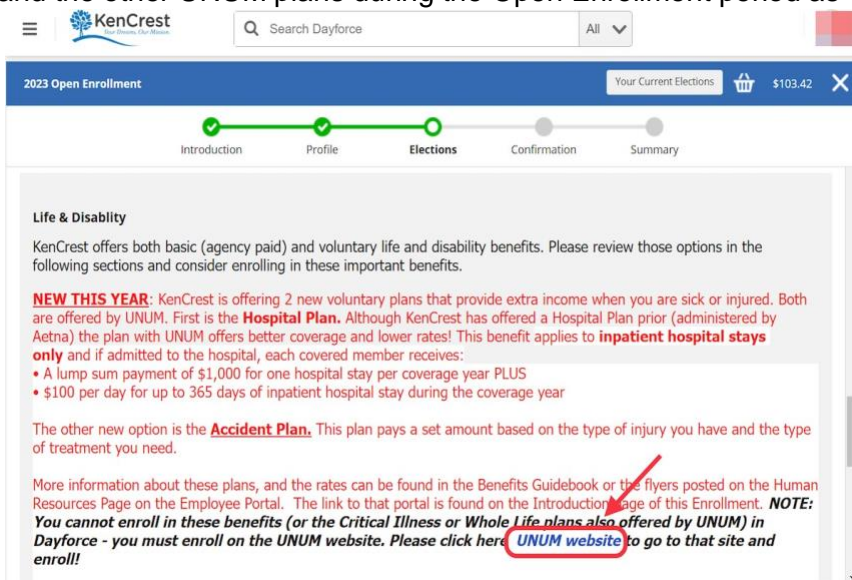
Select waive if you are not electing any dental plans or dropping it.

**\*\*For the benefits other than medical and dental, you will need to uncheck the box and select "waive" to drop the coverage.**

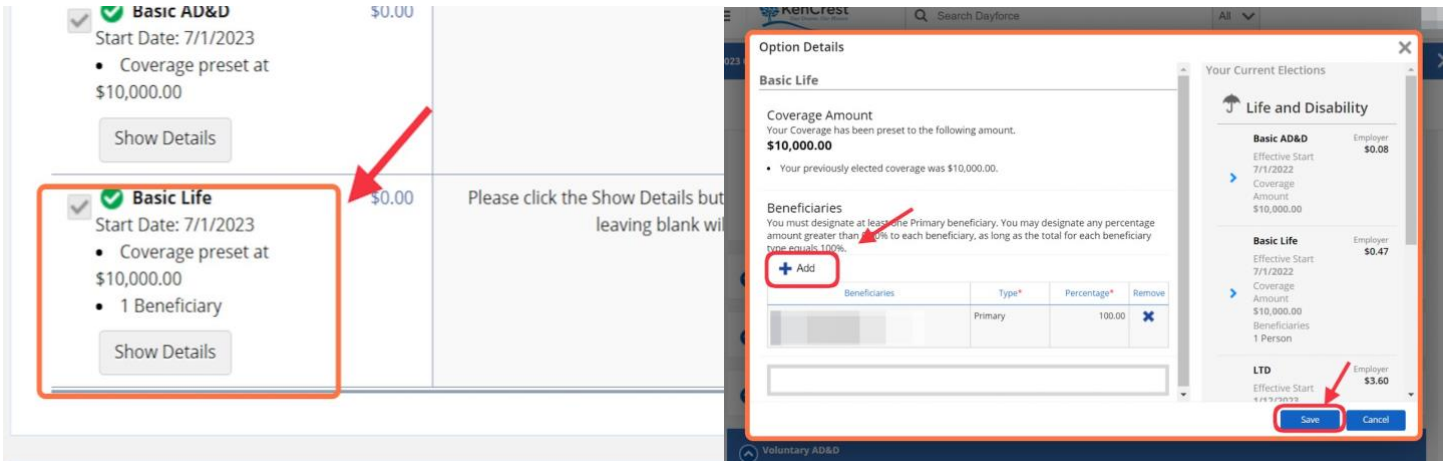


**Life and Disability Section is next:**

Please review the wording in the introduction for this section. It will provide a brief description of the Whole Life Insurance offered through UNUM. **These benefits cannot be elected in Dayforce and you must enroll on the UNUM portal.** The link to the UNUM portal is there for you if interested in this plan. You must enroll in this and the other UNUM plans during the Open Enrollment period as well.

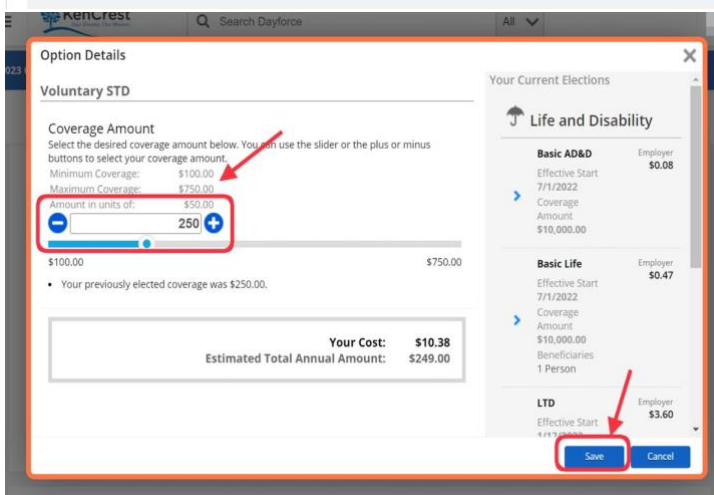
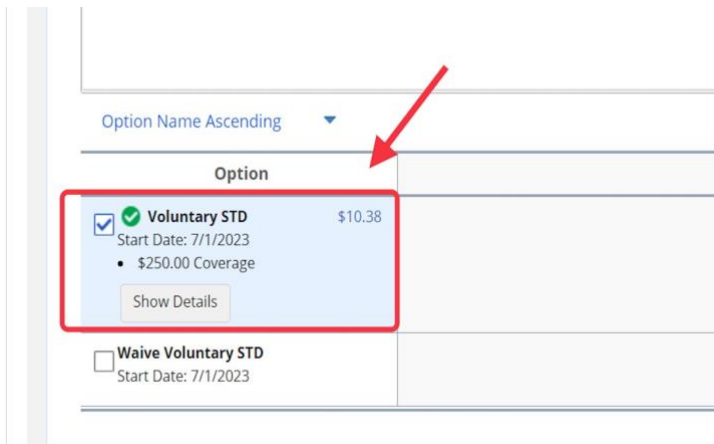


- The Basic Life, AD&D and Long Term Disability benefits will display for employees working over 30 hours per week (or otherwise listed as Full time) and are for you to view. You can read the coverage details about the benefits. *These benefits are paid by KenCrest and no cost to you.*
- No action is necessary, however for the **Basic Life** be sure to attach at least one Beneficiary.
- To attach a Beneficiary – click on the “Show details” button under the Basic Life benefit. Then click on “Add”. The names will come from the prior screen where you added Dependents and Beneficiaries. You can add more or add directly from this screen if you wish.
- If adding more than one, you will need to indicate “type”. Click on drop arrow, and indicate who is primary and who is contingent.
- Then enter the percentage. **It must equal 100%**



**Short Term Disability Section is next:**

- In the next section you can elect STD . Please read the introduction for more information about the benefit.
- Your maximum weekly benefit option will be displayed but you can also choose a lower plan.
- To change amount, click on the benefit and update. To drop, uncheck the box and select waive.



## Voluntary Life:

- You may choose to elect additional life insurance coverage.
- **IMPORTANT: although the screens appear in a different order, you MUST elect the Employee coverage first to be able to enroll correctly in the Dependent coverages.**
- When adding/increasing Employee coverage, your **maximums** will be shown. You can choose that amount or any amount less –Please note if enrolling yourself or spouse/partner for the first time you will be required to answer a medical questionnaire. Your approved amount vs. pending amount will display for your information.
- To Add Beneficiaries following same process as with Basic Life.
- Next add Spouse Life coverage, if applicable, then Child Life, if applicable. Be sure to attach the correct dependents to the coverage.
- To drop coverage uncheck the box and select waive.

2023 Open Enrollment

Your Current Elections \$103.42

Introduction Profile **Elections** Confirmation Summary

Dependent children up to age 25 can be enrolled in Voluntary life, starting at \$2,000 – in \$2000 increments – up to \$10,000. The rate includes all children. There is no EOI required for child(ren).  
**Reminder- If not approved, you will not be enrolled. The EOI will be sent to you directly from the Hartford via email so please look for it.**

You may elect in a maximum of 3 option(s) in this election set.

Option Name Ascending Compare Selected

Option	Information
<input checked="" type="checkbox"/> Voluntary Life - Employee Start Date: 7/1/2023 • \$20,000.00 Coverage Show Details	\$0.57
<input type="checkbox"/> Waive Voluntary Life - Child Start Date: 7/1/2023	

**Option Details: Voluntary Life - Employee**

Coverage Amount  
 Select the desired coverage amount below. You can use the slider or the plus or minus buttons to select your coverage amount.  
 Minimum Coverage: \$10,000.00  
 Maximum Coverage: \$330,000.00  
 Amount in units of: \$10,000.00  
 20,000

Beneficiaries  
 You must designate at least one Primary beneficiary. You may designate any percentage amount greater than 0.00% to each beneficiary, as long as the total for each beneficiary type equals 100%.

Save Cancel

## Voluntary AD&D:

- **You must enroll in the Life Insurance coverage first,** and go through these screens in the same order as the Life Insurance. (Employee, Spouse, Child(ren)).

2023 Open Enrollment

Your Current Elections \$103.42

Introduction Profile **Elections** Confirmation Summary

Option Name Ascending Compare Selected

Option	Information
<input type="checkbox"/> Voluntary AD&D - Employee Start Date: 7/1/2023 Show Details	\$0.00 You are required to enroll in Voluntary Life Insurance for yourself before you can elect Voluntary AD&D insurance for yourself.
<input type="checkbox"/> Waive Voluntary AD&D - Child Start Date: 7/1/2023	
<input type="checkbox"/> Waive Voluntary AD&D - Employee Start Date: 7/1/2023	
<input type="checkbox"/> Waive Voluntary AD&D - Spouse Start Date: 7/1/2023	

**Option Details: Voluntary AD&D - Employee**

Coverage Amount  
 Select the desired coverage amount below. You can use the slider or the plus or minus buttons to select your coverage amount.  
 Minimum Coverage: \$10,000.00  
 Maximum Coverage: \$20,000.00  
 Amount in units of: \$10,000.00  
 10,000

Selected coverage exceeds the Guaranteed Amount and requires Evidence of Insurability. Your coverage will be \$0.00 until approved. If approved, your cost for the requested coverage of \$10,000.00 will be \$0.15.

Save Cancel

## Reimbursement Section:

- If you choose to enroll in a Flexible Spending Account (Medical or Dependent) this works in the same way as the Health Savings Account where you need to choose your **annual amount** for the rest of the PLAN YEAR. See that section for more details on how to calculate annual amount.

the minimum annual contribution is \$100.

Option Name Ascending Compare Selected

Option	
<input type="checkbox"/> Dependent Care FSA Start Date: 7/1/2023 \$100.00 Annual Contribution	\$4.17
<a href="#">Show Details</a>	

Limited Purpose FSA

Close Save Draft Back Next

Option Details

Dependent Care FSA

Contribution  
Enter the desired contribution amount below. you can select the contribution amount by using the slider or plus and minus button

Minimum Contribution: \$100.00  
Maximum Contribution: \$5,000.00

Annual Contribution: 100

\$100.00 \$5,000.00

Your Cost: \$4.17  
Estimated Total Annual Amount: \$100.00

Save Cancel

- If you are enrolled in a Health Savings Account, you can only choose the *Limited Purpose FSA*. However it makes more sense to add your funds to the HSA instead of setting up another account since you never lose your HSA funds, all of your funds are together, and you have the use of a debit card. You should only elect a LPA if you have maxed out your HSA contributions!
- You can enroll in the Transit Account here. Note that this benefit is not tied to Open Enrollment and you can add it or stop contributions at any time, on a monthly basis. After Open Enrollment, you will see a "Transit Enrollment" available when you click on the Benefits icon.

2023 Open Enrollment Your Current Elections \$103.42

Introduction Profile Elections Confirmation Summary

Limited Purpose FSA

If you enroll in the HDHP with the HSA, and you wish to enroll in a FSA as well, you may enroll in the "Limited Purpose FSA." **You will be able to use your "Limited Purpose FSA" for dental, vision and hearing expenses only.** You may not use the FSA for medical expenses when you are enrolled in a HSA. Note: it may make more sense to simply put extra funds into the Health Savings Account instead of having a separate FSA. With the HSA you do not lose your funds and you have the use of a debit card. The Limited Purpose FSA should only be elected if you are contributing the maximum to your HSA.

Option Name Ascending Compare Selected

Option	
<input type="checkbox"/> Limited Purpose FSA Start Date: 7/1/2023 \$100.00 Annual Contribution	\$4.17
<a href="#">Show Details</a>	

Close Save Draft Back Next

Option Details

Limited Purpose FSA

Contribution  
Enter the desired contribution amount below. you can select the contribution amount by using the slider or plus and minus button

Minimum Contribution: \$100.00  
Maximum Contribution: \$3,050.00

Annual Contribution: 100

\$100.00 \$3,050.00

Your Cost: \$4.17  
Estimated Total Annual Amount: \$100.00

Save Cancel

2023 Open Enrollment Your Current Elections \$103.42

Introduction Profile Elections Confirmation Summary

Limited Purpose FSA

If you enroll in the HDHP with the HSA, and you wish to enroll in a FSA as well, you may enroll in the "Limited Purpose FSA." **You will be able to use your "Limited Purpose FSA" for dental, vision and hearing expenses only.** You may not use the FSA for medical expenses when you are enrolled in a HSA. Note: it may make more sense to simply put extra funds into the Health Savings Account instead of having a separate FSA. With the HSA you do not lose your funds and you have the use of a debit card. The Limited Purpose FSA should only be elected if you are contributing the maximum to your HSA.

Option Name Ascending Compare Selected

Option	
<input type="checkbox"/> Limited Purpose FSA Start Date: 7/1/2023 \$100.00 Annual Contribution	\$4.17
<a href="#">Show Details</a>	

Close Save Draft Back Next

Please Confirm

You have not selected any option in the following sections. If you intended to enroll, please hit "Cancel" and make your selection.

- Voluntary AD&D
- Healthcare Flexible Spending Account
- Dependent Care Flexible Spending Account
- Limited Purpose FSA

Ok Cancel



## Other Voluntary Benefits Section:

- You will see an introduction about the NEW Allstate Identity Protection plan, as well as information on the 3 additional Voluntary plans offered by UNUM (Hospital Plan, Critical Illness Plan and Accident Plan). **These UNUM benefits cannot be elected in Dayforce and you must enroll on the UNUM portal.** The link to the UNUM portal is there for you if interested in these plans. You can also access the link any time and can do this after completing your Dayforce enrollment, until the end of the Open Enrollment period on 6/7.
- The next screen will be the Allstate enrollment screen. Choose if you wish to enroll in the Employee only or Family coverage or select “waive” if you do not wish to elect this benefit. **NOTE: This does not fully enroll you in the plan. Allstate will be sent the information that you are electing this benefit, and will send you a text, email and letter on how to complete your enrollment on their secure site.**
- **Click “Next”**
- You will get a pop up box indicating the benefit options you did not choose. It is simply making sure you did NOT wish to choose them. If correct, hit “OK”.

## Confirmation Page:

- Please review your elections. Be sure everything is correct! You can go back and edit if needed. **You will get an error if anything was missed or incorrect. The incorrect areas will display in red.**
- You can also save the draft and come back to it.

KenCrest  
The Home Care Mission

Search Dayforce All

2023 Open Enrollment Your Current Elections \$103.42

Introduction Profile Elections Confirmation Summary

**Voluntary Short Term Disability**

Voluntary STD  
Effective From 7/1/2023  
\$250.00 in coverage  
**Your Cost: \$10.38**  
1st & 2nd Pays of Month

**Voluntary Life**

Voluntary Life - Employee  
Effective From 7/1/2023  
\$20,000.00 in coverage  
**Your Cost: \$0.57**  
1st & 2nd Pays of Month

**Your Cost: \$103.42**  
Estimated Total Annual Amount: \$2,481.84

Close Save Draft Back Print Submit Enrollment

**Click “Submit Enrollment”.** **IMPORTANT: Once you have submitted, you can go back and make changes until June 7 but your benefits will reset and you need to start over.** If you have made an error, or have an unexpected change, please contact Kim Smith, Director of Benefits, for assistance. **You should print your elections/deductions page for your records.**