


Life Event Enrollment Instructions

Please refer to "Change Benefit Reasons and Life Event Breakdown" if you have questions on which type of event to select or contact benefits@maryfreebed.com.

The example below is for birth/placement of a child, but the process is similar for all events!

Created By Alex Drabik	Updated May 27, 2026	View latest Open in Tango 
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Login to Workday [↗](#)

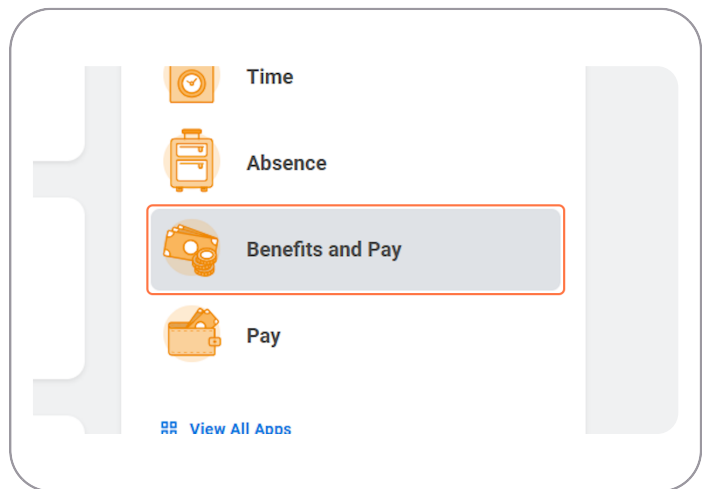
Submitting and Starting your Enrollment

9 Steps

1

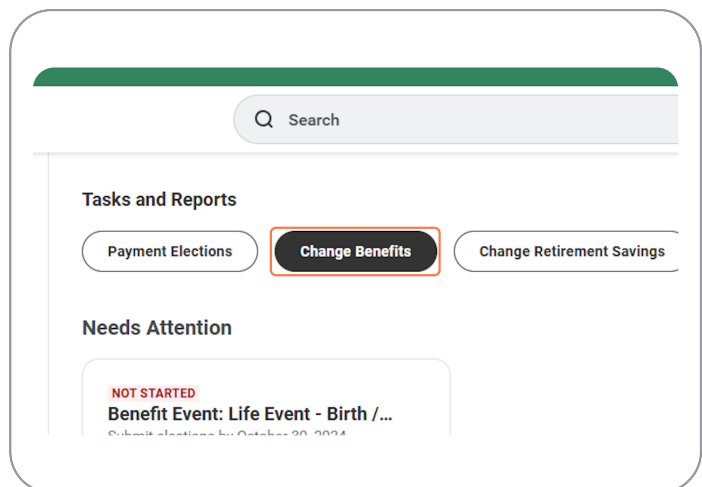
Navigate to your "Apps" and click on "Benefits and Pay" App

Note: you may need to click on "View All Apps" if you do not have this app saved as one of your favorites.



2

Click on Change Benefits



3

Select the appropriate Life Event (for this example we'll use Birth/Placement of a Child)

Note! Most qualifying life events require supporting documentation. You will be asked for the document before submitting your event. If you do not have documentation at this time, you will not be able to proceed. Documentation is needed to submit your event. Please remember you only have 30 days from the date of event to submit documentation and complete enrollment. See below for a list of acceptable documents. If you have questions about the benefit plans or acceptable documentation or do not have documentation, please contact the Benefits Department: benefits@maryfreebed.com

- **Marriage/Domestic Partnership – Marriage Certificate or License,**
- **Birth/Adoption of Child – Birth Certificate, Hospital Records, Certificate of Live Birth, Adoption Records**
- **Death of Child/Spouse – Death Certificate**
- **Divorce– Divorce Decree, Legal Separation Documentation**
- **Employee or Dependent Gains/Loses Other Coverage – Proof of New Coverage or Loss of Coverage**

Note! Before initiating a Divorce/Dissolution of Domestic Partnership, update your dependent's relationship to Ex-Spouse or Ex-Domestic Partner. Return to your Benefits application on your home page and under the Change section, select Dependents and then edit the appropriate dependent.

The image shows a screenshot of a web form. On the left, there is a label 'Change Reason' followed by a red asterisk. To the right of the label is a dropdown menu. The dropdown menu is currently open, showing a list of options. The top option is 'select one' with a downward arrow. Below it is another 'select one' option. The next three options are 'Add/Update Beneficiary', 'Cafeteria Plan Enrollment', and 'HSA Enrollment'. The option 'Life Event - Birth / Placement of Child' is highlighted with a blue background and a red border. Below it are 'Life Event - Death of a Dependent', 'Life Event - Dependent Gain or loss of Medicare', 'Life Event - Divorce', 'Life Event - Employee/Dependent Gains or Loses Other Coverage', and 'Life Event - Employee Gain or loss of'.

4 Enter the date of birth, marriage, divorce or other event date like loss or gain of coverage.

REMINDER: You only have 30 days from any qualifying life event to submit/complete enrollment with the exception of gain/loss of Medicaid in which you have 60 days.

Alexis Brandenburg

Change Reason * Life Event - Birth / Placement of Child ▼

Date of Birth * MM/DD/YYYY

Submit Elections By (empty)

5 Click on Select files to add your necessary documentation.

- **Marriage/Domestic Partnership – Marriage Certificate or License,**
- **Birth/Adoption of Child – Birth Certificate, Hospital Records, Certificate of Live Birth, Adoption Records**
- **Death of Child/Spouse – Death Certificate**
- **Divorce– Divorce Decree, Legal Separation Documentation**
- **Employee or Dependent Gains/Loses Other Coverage – Proof of New Coverage or Loss of Coverage**

nents

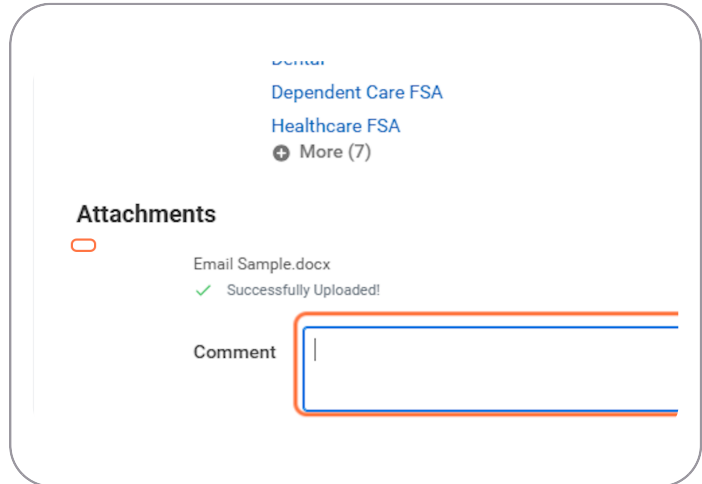
Drop files here

or

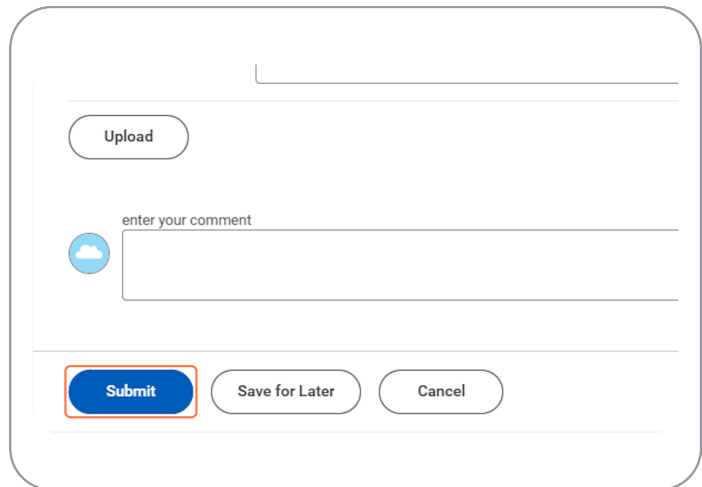
Select files

Enter your comment

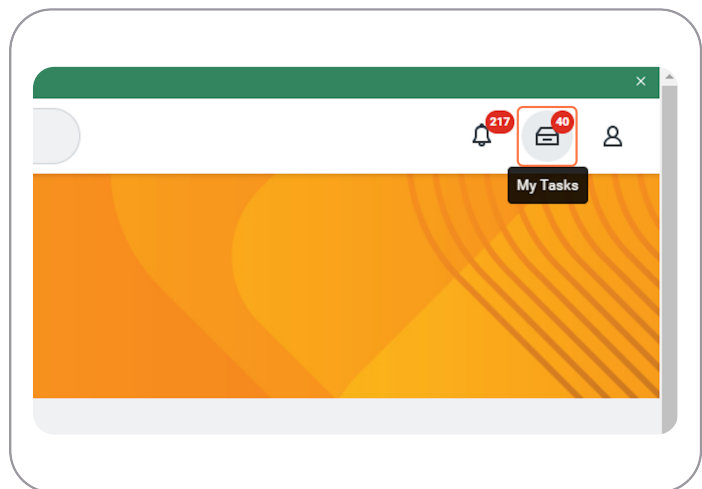
6 Verify that your documents have uploaded correctly, you should see a green check mark.



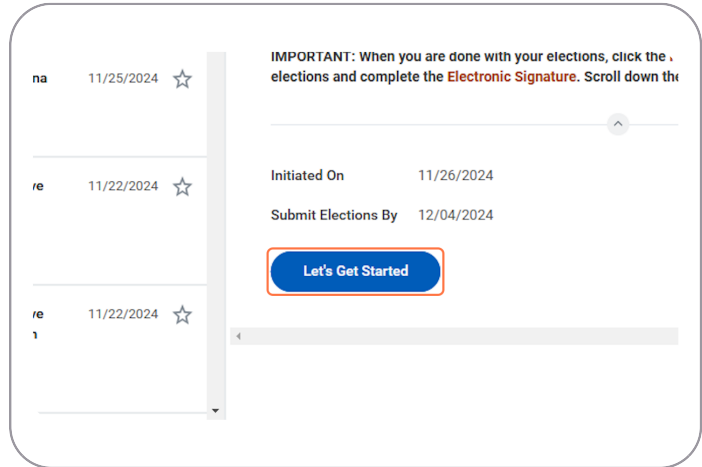
7 Click Submit



8 A pop-up box should appear that says 'Open' you can click on this to start your enrollment OR you can navigate to your inbox, pictured below.



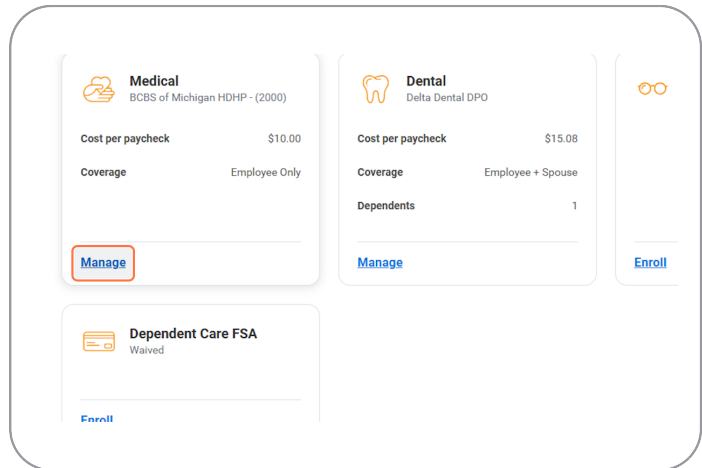
9 Then Click on Let's Get Started on the correct task in your inbox to start your enrollment.



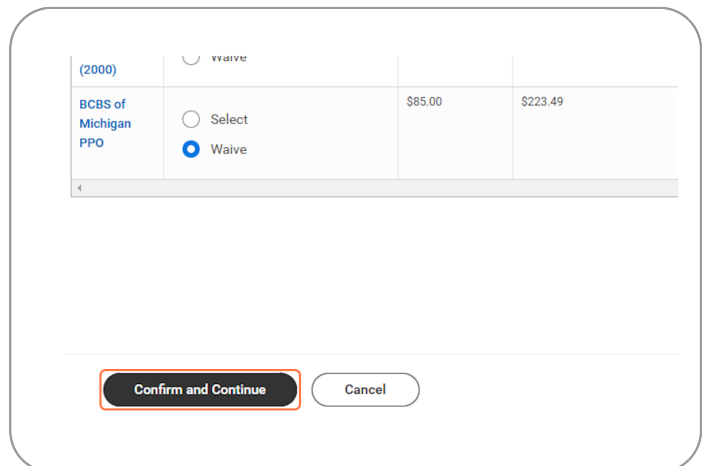
Healthcare Coverage Enrollments

4 Steps

10 Click on Manage or Enroll on the Coverage Tile you wish to update or enroll in.



11 Click on Confirm and Continue



12 Add or remove dependents as appropriate for your Qualifying Life Event.

You will see your existing/previously added dependents listed here, if you have already added your new dependent you select the check box next to their name. If you are adding a dependent for the first time you will click "Add New Dependent" (see following section on adding a new dependent).

As you select or de-select dependents you should notice your "Coverage" changes to the appropriate coverage target and your plan cost per check adjusts based on these coverage targets.

IMPORTANT: When adding new dependents you will be required to provide a social security number unless they are newborns in which case you can provide the social security number at a later date.

Coverage * Employee Only ←

Plan cost per paycheck \$10.00 ←

[Add New Dependent](#)

2 items

Select	Dependent	Relationship	Date of Birth
<input type="checkbox"/>	Tl...burg	Spouse	(...)
<input type="checkbox"/>	Gronkowski Brandenburg	Child/Step-Child	10...

13 Click on Manage or Enroll on all other Health Care Coverage tiles that you wish to, ensuring to select, de-select (drop) or add new dependents as needed and as applicable to your qualifying life event.

Employee + Family

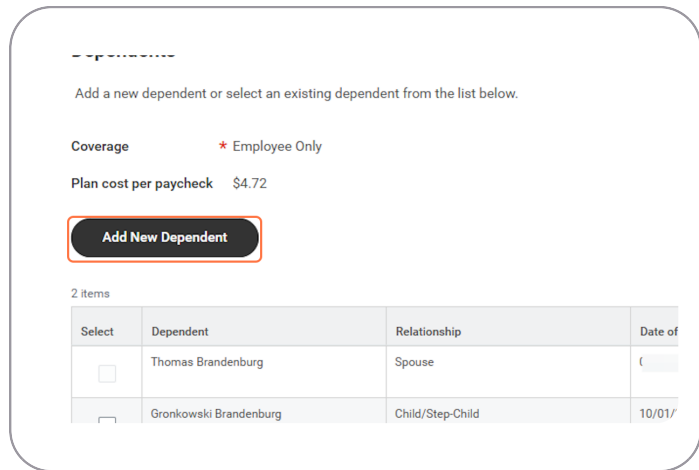
2

[Enroll](#)

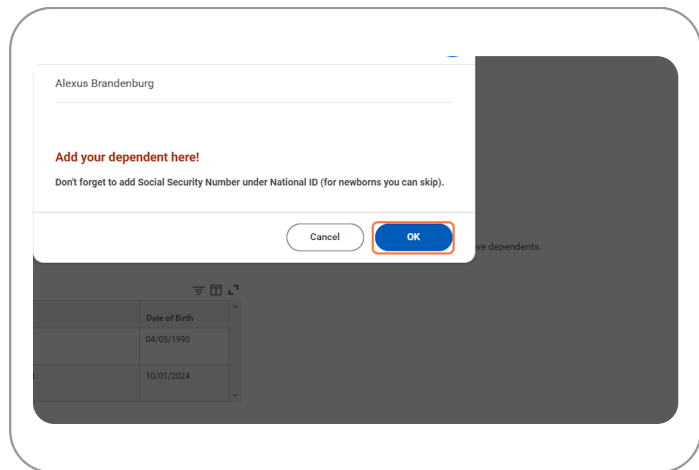
Adding a New Dependent

10 Steps

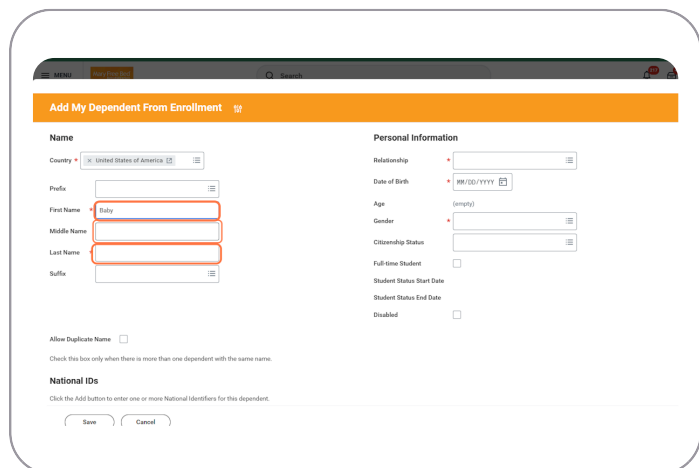
14 Click on Add New Dependent



15 Click on OK



16 Enter the dependent's first and last name, middle name is optional.



- 17 Select the appropriate relationship for the dependent you are adding.
Note: Those with legal guardianship over a child should select "Child/Step-child"

The screenshot shows a form titled "Personal Information" with several fields. The "Relationship" field is a dropdown menu with a search bar and three options: "Ex-Spouse", "Child/Step-Child", and "Spouse". The "Child/Step-Child" option is highlighted with a red border. Other fields include "Date of Birth", "Gender", "Citizenship Status", "Full-time Student" (checkbox), "Student Status Start Date", "Student Status End Date", and "Disabled" (checkbox).

- 18 Complete the rest of the dependent's personal information
Date of Birth and Gender are required fields for a dependent.
If your child/step-child is a Full Time college student, please indicate by checking the Full-Time Student box.
If your dependent is fully disabled as defined by state and federal regulations please check the 'disabled' box.

The screenshot shows the "Personal Information" form with the following fields and values: "Relationship" is set to "Child/Step-Child"; "Date of Birth" is a date input field with a calendar icon; "Age" is "(empty)"; "Gender" is a dropdown menu; "Citizenship Status" is a dropdown menu; "Full-time Student" is checked; "Student Status Start Date" and "Student Status End Date" are empty; "Disabled" is checked.

19

Next you will need to add your dependent's social security number (SSN)

Note: A SSN is not required for newborns if you have not received one from the SSA to complete enrollment, however this must be added at a later date.

This screenshot shows the 'National IDs' section of the enrollment form. At the top, there is a checkbox labeled 'Check this box only when there is more than one dependent with the same name.' Below this, the text reads 'National IDs' and 'Click the Add button to enter one or more National Identifiers for this dependent.' A prominent red box highlights the 'Add' button. Below the button are fields for 'Address' and 'Phone & Email'. The 'Address' section includes a 'Use Existing Address' dropdown, a 'Country' dropdown set to 'United States of America', and an 'Address Line 1' field. The 'Phone & Email' section includes a 'Use Existing Phone' dropdown, a 'Country Phone Code' dropdown, and fields for 'Phone Number' and 'Phone Extension'.

20

Complete all information necessary for adding National ID (SSN)

Country will typically USA; National ID type will typically be SSN; then enter the SSN in the add/edit id field. Note, you do not need to add issued or expiration date.

****DO NOT CLICK SAVE UNTIL YOU COMPLETE THE REST OF THE INFORMATION IN THE REMAINING SECTIONS****

This screenshot shows the 'National IDs' section with a red box highlighting the 'Add/Edit ID' field. The 'Country' dropdown is set to 'United States of America (US)'. The 'National ID Type' dropdown is set to 'Social Security Number (SSN)'. The 'Add/Edit ID' field contains the SSN '123-45-6789'. Other fields include 'Current ID' (empty), 'Issued Date' (MM/DD/YYYY), 'Expiration Date' (MM/DD/YYYY), 'Issued By', 'Series', and 'Verification Date' (11/26/2024). Buttons for 'Remove', 'Add', 'Save', and 'Cancel' are visible at the bottom.

21

Complete Contact Information

TIP: you can use your existing addresses and phone numbers if your dependents reside with you, or you may enter manually.

This screenshot shows the 'Address' and 'Phone & Email' sections of the enrollment form. The 'Address' section includes a 'Use Existing Address' dropdown, a 'Country' dropdown set to 'United States of America', and fields for 'Address Line 1', 'Address Line 2', 'City', 'State' (set to Michigan), and 'Postal Code'. The 'Phone & Email' section includes a 'Use Existing Phone' dropdown, a 'Country Phone Code' dropdown set to 'United States of America (+1)', and fields for 'Phone Number', 'Phone Extension', and 'Email Address'. Buttons for 'Save' and 'Cancel' are visible at the bottom.

22 Click on Save to complete adding/editing your new dependent.

Phone & Email

Use Existing Phone

Country Phone Code United States of America (+1)

Phone Number

Phone Extension

Email Address

23 For Newborns Only: If you did not add the social security number in the 'add dependent process'; you may select 'reason SSN is not available', and enter a comment. Please update your dependent's SSN once you receive the new number from SSA.

Select	Dependent	Relationship	Date of Birth
<input type="checkbox"/>	Thomas Brandenburg	Spouse	04/05/1990
<input checked="" type="checkbox"/>	Gronkowski Brandenburg	Child/Step-Child	10/01/2024

You have dependents covered under your health care plan without a Social Security Number. Enter their Social Security Number (SSN) or Reason SSN is Not Available if you don't have access to their number at this time.

Dependent Social Security Numbers 1 item

Dependent: Gronkowski Brandenburg

*Social Security Number

Social Security Number (SSN)

Reason SSN is Not Available

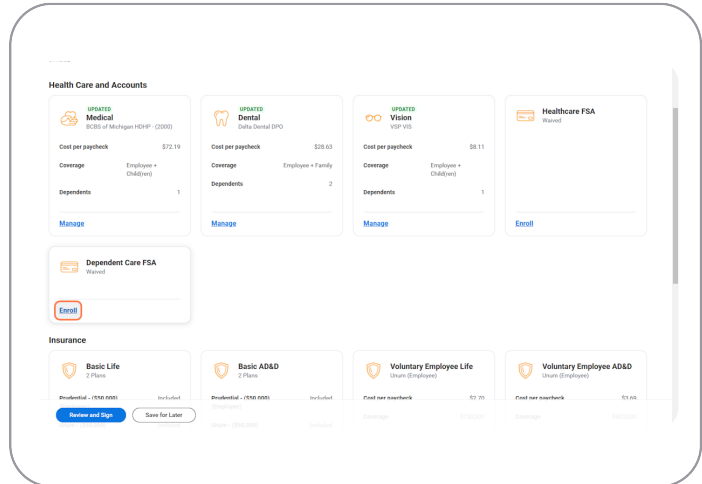
Save Cancel

Spending Account Enrollments

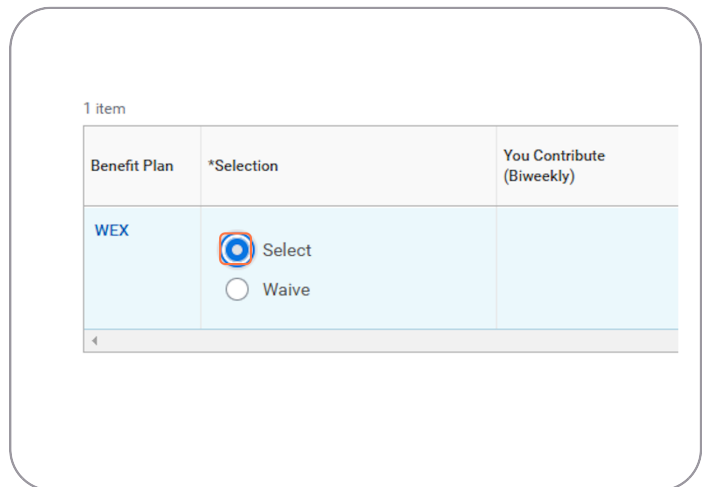
5 Steps

24 Click on Enroll or Manage on any tile you are eligible to update or change.

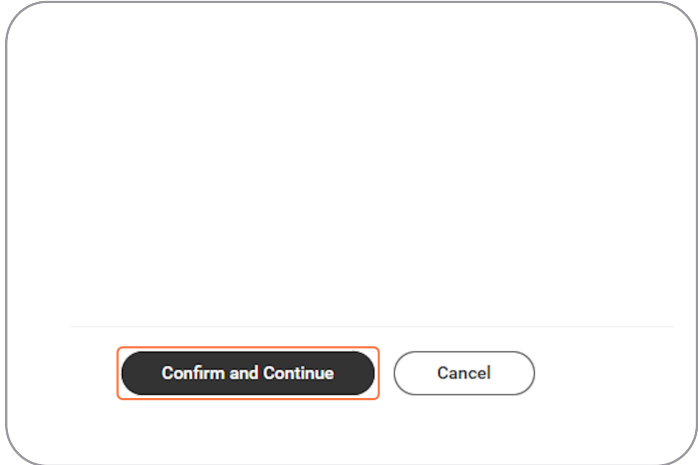
NOTE: You are only eligible to enroll in the Healthcare FSA if you are NOT enrolled in the HDHP 200 plan. HSA (Health savings account) is for those enrolled in the HDHP 2000 plan. **If you are currently enrolled in an HSA account, you will need to re-enroll.** HSA contributions are a separate enrollment event that can be changed/requested at any time. See separate instructions on how to enroll/change your contribution for an HSA account.



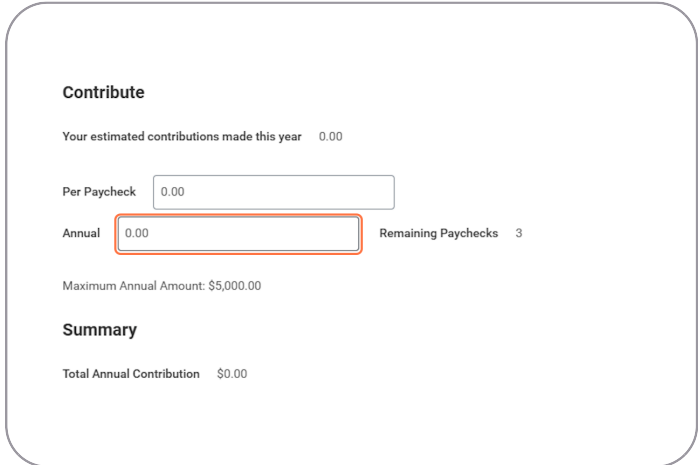
25 Select or Waive



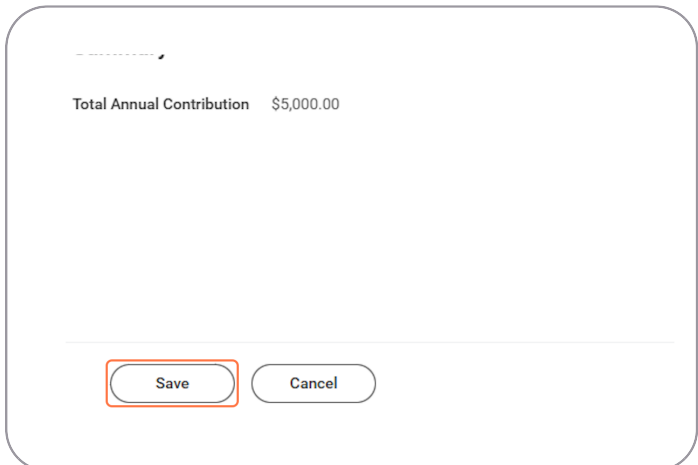
26 Click on Confirm and Continue



27 For FSA accounts you may enter the annual amount or the amount per paycheck you'd like to elect, the system will calculate the other field automatically.

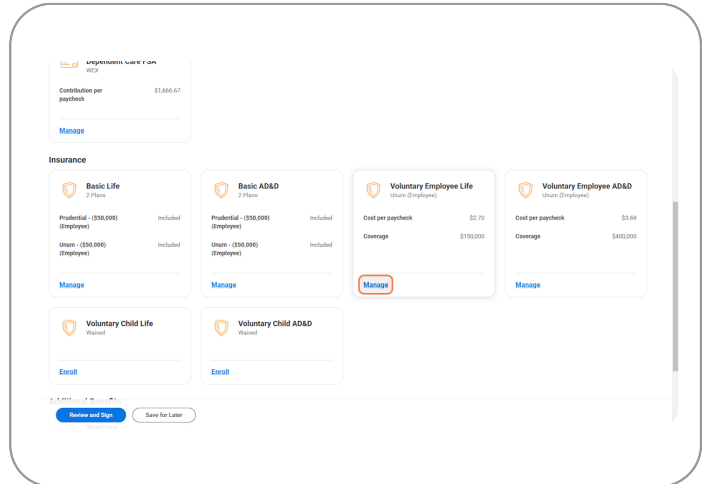


28 Click on Save



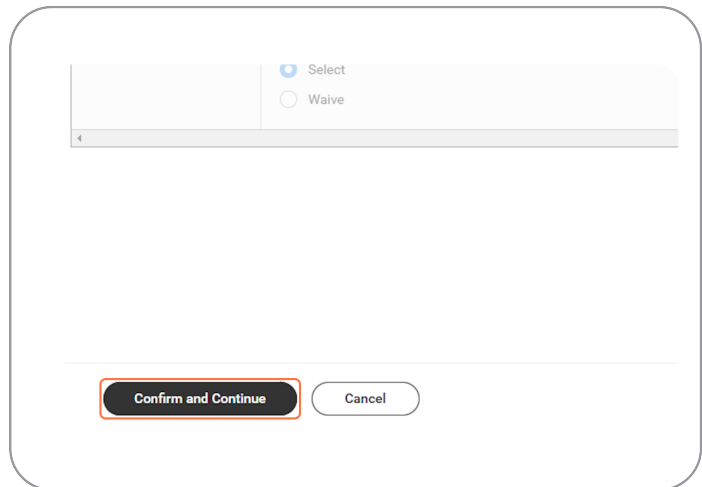
29

Select Manage or Enroll on the Insurance coverage tile you would like to update or enroll in as applicable to your qualifying event.



30

Click on Confirm and Continue

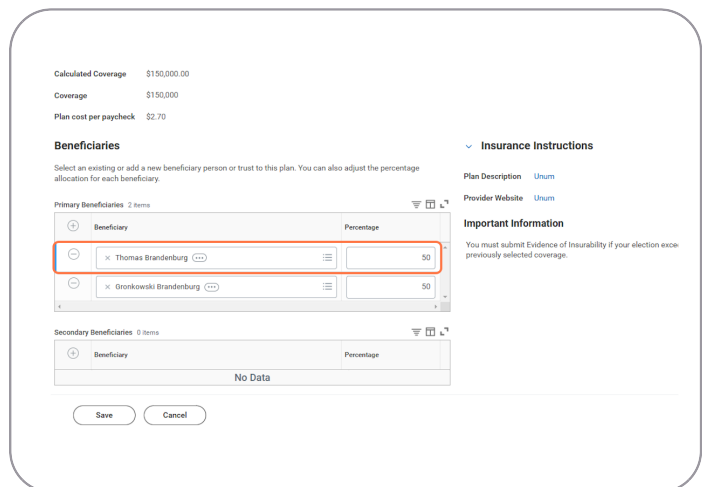


31

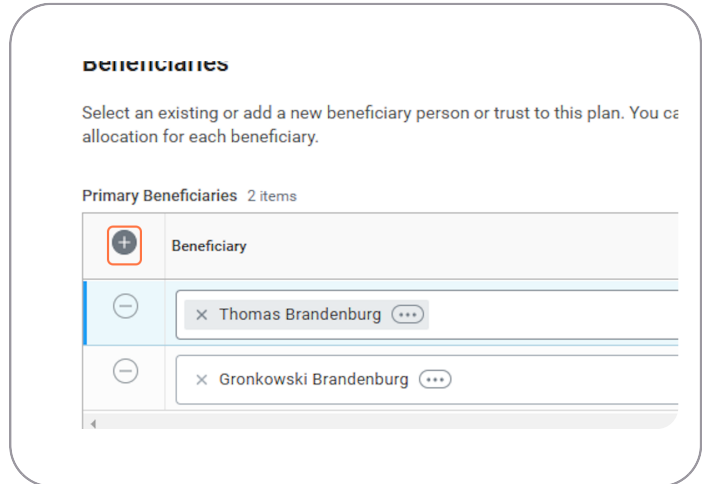
Update Coverage and/or Beneficiary allocation

To update current allocations, simply adjust the percentages, or add rows to primary/secondary to move beneficiaries as needed. Note percentage for primary MUST equal 100% total.

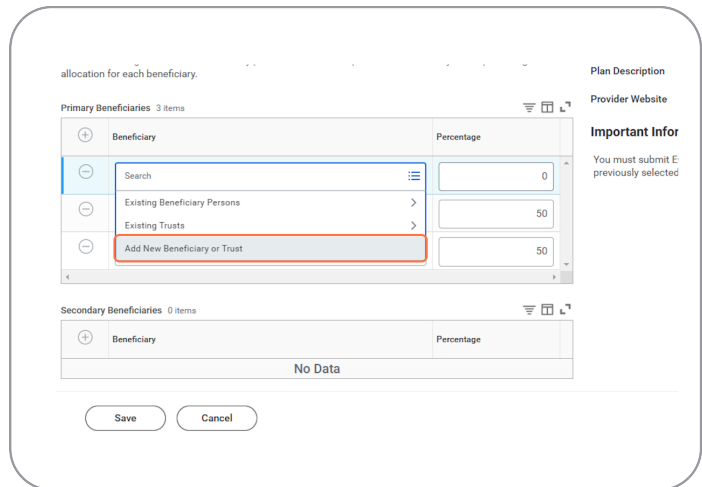
Note: in some qualifying events you will be eligible to add coverage or increase coverage, in other qualifying events you will only be able to update beneficiaries.



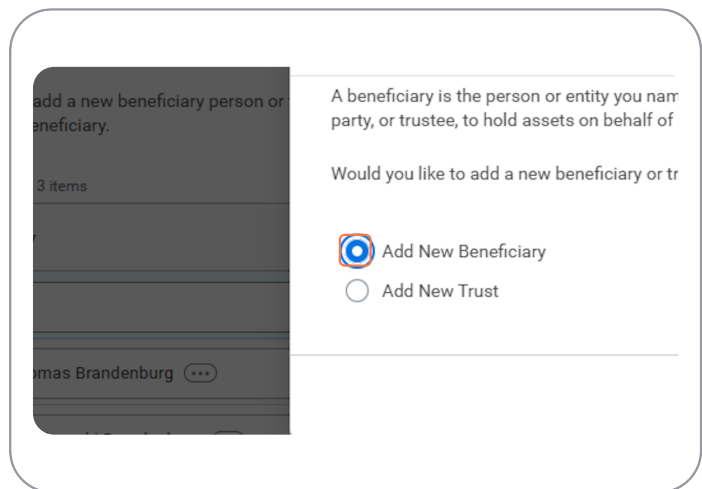
- 32 Add a new Beneficiary
Click the '+' to add a new row.



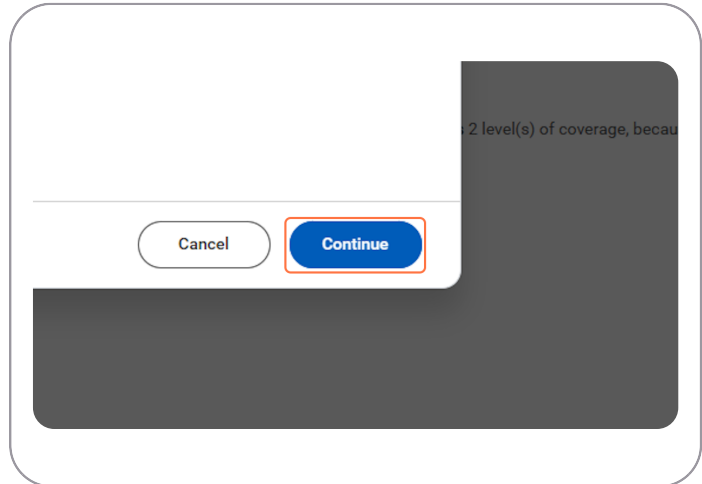
- 33 Click in the blank text box to either search for a current beneficiary or select 'add new beneficiary or trust'



- 34 Select Add New Beneficiary or Add New Trust



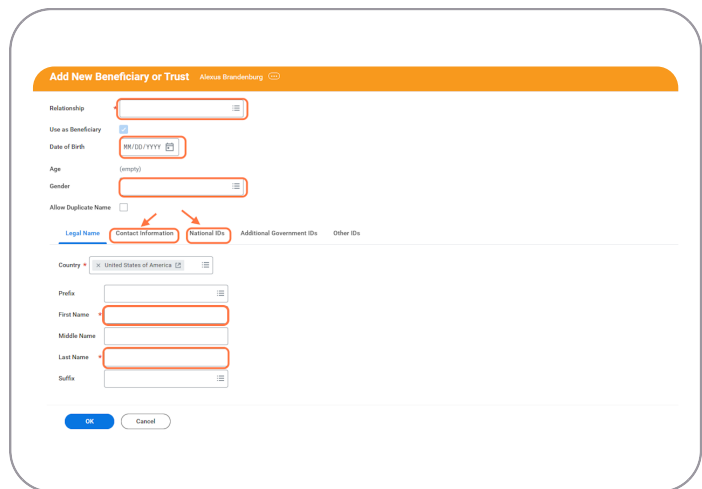
35 Click on Continue



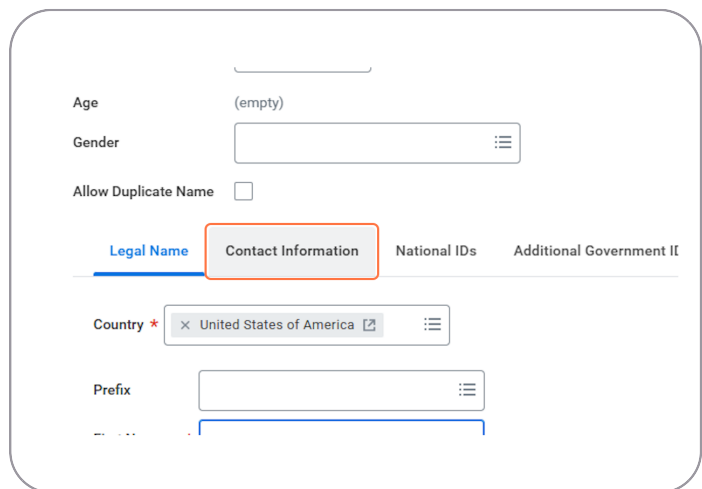
36 Complete all Beneficiary or Trust information

Enter Relationship, Date of Birth, Gender, First/Last name AND navigate to the contact information and national ids tab to complete those sets of information.

IMPORTANT: do not click save until you have completed the 'contact information' and 'National IDs' tabs as well.



37 Click on Contact Information and complete at least one contact field, HR recommends you complete phone number and address for beneficiaries.



38

Click on National IDs tab to complete adding the SSN for your beneficiary. This is required for any beneficiary!

A screenshot of a web form with several tabs: "Legal Name", "Contact Information", "National IDs", and "Additional Government IDs". The "National IDs" tab is selected and highlighted with a red box. Above the tabs, there is a "Name" field with a dropdown arrow. Below the tabs, there are several empty input fields for data entry.

39

Click on Add Row

A screenshot of the "National IDs" section of the form. It shows a table with the heading "National IDs 0 items". The first row of the table has a red box around a plus sign icon in a square, which is the "Add Row" button. The rest of the row contains a field labeled "*Country".

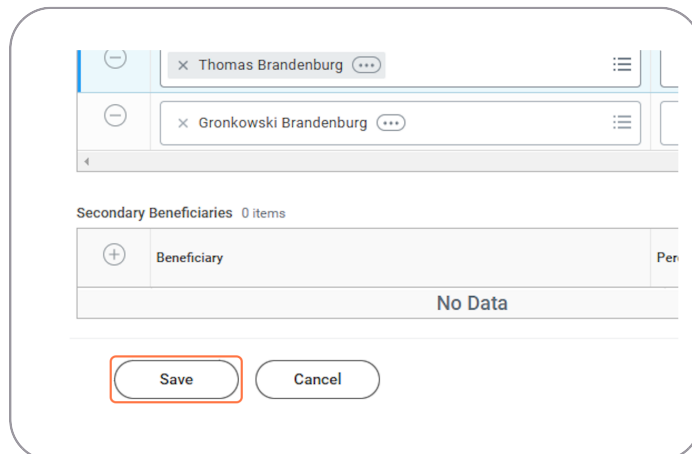
40

Enter Country, ID Type, and ID.

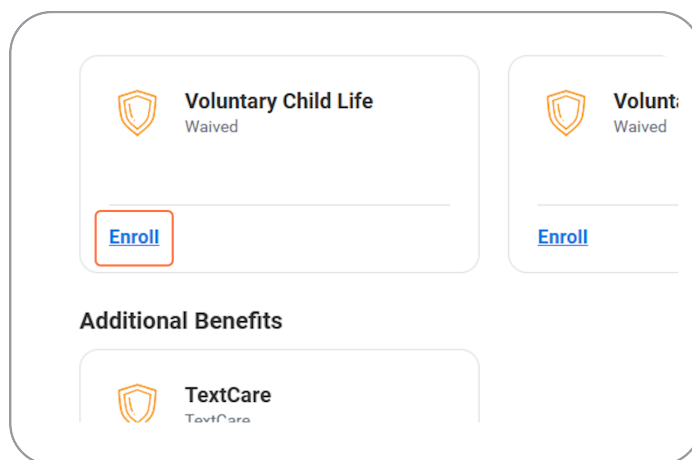
Once Legal Name, Contact Information, and National ID are complete you can click the blue 'Okay' button to save your new Beneficiary or Trust.

A screenshot of the "Add New Beneficiary or Trust" form. The top bar is orange and says "Add New Beneficiary or Trust" with "Almaaz Brandenburg" next to it. Below the bar are fields for "Relationship", "Use as Beneficiary" (checked), "Date of Birth" (MM/DD/YYYY), "Age" (length), and "Gender". There is also a checkbox for "Allow Duplicate Name". Below these fields are tabs for "Legal Name", "Contact Information", "National IDs", "Additional Government IDs", and "Other IDs". The "National IDs" tab is active, showing a table with columns: "Country", "National ID Type", "Current ID / Asset ID", "Issued Date", "Expiration Date", and "Issued By". The first row of the table has red boxes around the "Country", "National ID Type", and "Current ID / Asset ID" fields. At the bottom of the form are "OK" and "Cancel" buttons.

41 Once you have allocated your beneficiaries and selected appropriate coverage amounts you may click 'save'.



42 Click on Enroll or Manage on any other Insurance tiles you wish to add/update.



i Dependent on your Insurance elections you may be required to complete an Evidence of Insurability (EOI) through the Life/Disability vendor prior to your coverage taking effect. This information will be called out during the enrollment and you will receive a task to complete your EOI as needed. Contact benefits@maryfreebed.com for more information or questions on the EOI process.


Submitting your Enrollments

3 Steps

i **IMPORTANT:** Enrollments are not submitted until you complete the steps below. You may leave the enrollment task and come back anytime during your enrollment window dates to complete your enrollments. But you must complete the steps below for your elections to take place.

43 Click on Review and Sign

Additional Benefits

 **TextCare**
TextCare

Cost per paycheck Included

[Manage](#)

Review and Sign Save for Later

44 Review and accept the legal notice.

Electronic Signature

Benefit Electronic Signature Test

Legal Notice: Please Read

Your name and Password are considered your "Electronic Signature" and will serve as your confirmation of the accuracy of the information being submitted. When you check the "I Agree" checkbox, you are certifying that you understand and approve the enrollment as indicated above. You hereby authorize the company to deduct from your earnings the amount of your premiums or other contributions (if any) for the benefit options elected above. You understand and acknowledge that under the Internal Revenue Code regulations rules, you may not change your benefit elections during the calendar year unless you experience a qualified change in status. You understand that you will not pay income tax or FICA tax on my medical, dental, vision, and Flexible Spending Account contributions. These benefits are paid through the Flexible Benefits Plan on a pre-tax basis. Company provided life insurance that exceeds \$50,000 may be subject to imputed income.

Each year, during the annual enrollment period, you will have the option to change certain coverages whether or not you have had a qualified change in status event during the calendar year.

If you decline medical insurance enrollment for yourself or your dependents, including your spouse, because of other medical insurance coverage, you may in the future be able to enroll yourself or your dependents in this plan, provided you request enrollment within 30 days after your other coverage ends. In addition, if you have a new spouse or dependent as a result of marriage, birth, or adoption, you may be able to enroll yourself, your spouse and your dependents, provided you request enrollment within 30 days after the marriage, birth or adoption.

Accept

enter your comment




Process History

- Alexis Brandenburg Change Benefits for Life Event- On Hold 28 minutes ago
- Alexis Brandenburg Change Benefits for Life Event- Resumed 27 minutes ago

Submit Save for Later Cancel

45 Click on Submit

Process History

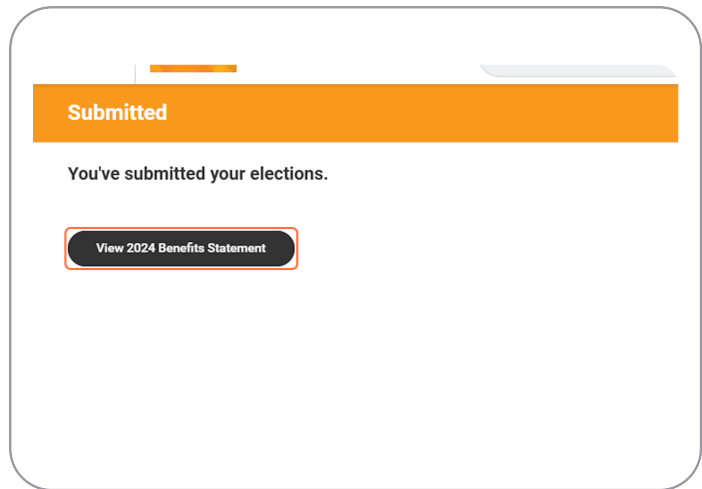
-  **Alexis Brandenburg**
Change Benefits for Life Event- On Hold
-  **Alexis Brandenburg**
Change Benefits for Life Event- Resumed
-  **Alexis Brandenburg**
Change Benefits for Life Event- Awaiting Action

Submit Save for Later Cancel

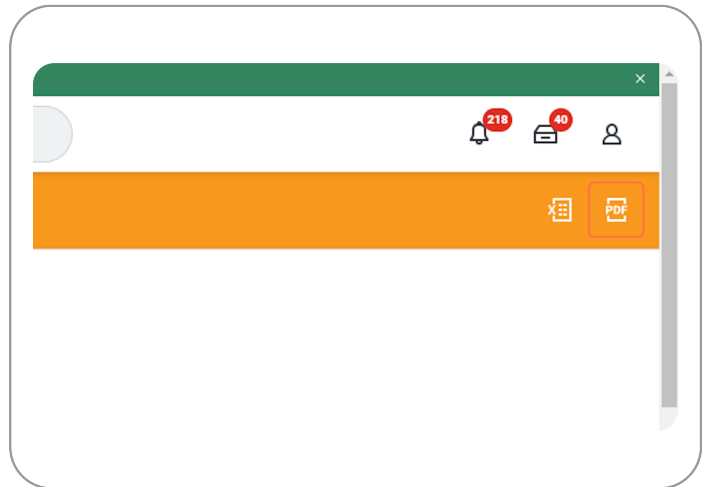
Print/View your Elections

3 Steps

46 Click on View 2024 Benefits Statement



47 Click on View printable version (PDF)



48 Click on Download
This will download a Printable PDF of your elections. However you can also navigate to your employee profile or to the Benefits and Pay Hub to view your current enrollments.

