

Use this Benefits eForm to submit a Life Event. This example demonstrates how the Benefits eForm recognizes a Late Enrollment, when the date of the Life Event is outside of the Period of Initial Eligibility (PIE)

## Menu Navigation:

Forms Library > Access Forms > **Benefits eForms: Submit New Form** 

Detailed information and guides for UC Benefits Plans is available on UCnet: https://ucnet.universityofcalifornia.edu/compensation-and-benefits/index.html

**Note:** This example uses sample images as seen on a computer. Sample images appear differently on a tablet or smartphone, but the steps remain the same.

Step	Action
1.	<b>Event Date</b> : The <b>Event Date</b> for a Life Event must be in the past. A benefits change for a future dated Life Event cannot be processed prior to the event date.
	Late Enrollment: The Benefits eForms recognize if the Event Date is outside of the Period of Initial Eligibility (PIE) for the requested Life Event benefits enrollment.
	The example used in this simulation demonstrates how this form recognizes a late enrollment.

bigail Lacayo		UCPath Q B 600	okmar
ry Title: NER 3			
ployee ID: 1003152			sk UC
rvice Date: 3/14/1996			
ashboard		+ Add Enrollment Changes: Benefits Information Form ID: 7215	56
opleSoft Menu	>	Highlights Enabled     Original Version     Current Versi	on
orklist			
ookmarks		Reason for Request	
ployee Actions	>	Event Date *	
anager Actions	>	MM/DD/YYYY 📴	
erformance Workcenter		Reason For Request *	
ecruiting Workcenter		~	
orms Library	>		
uicklinks	>		
elp / FAQ	>	Employee Contact Information	
		Please provide your preferred contact information.	
Edit profile		Telephone Employee Contact Email	
Log out		UCPATH.Tester@universityofcalifornia.edu	



Step	Action
2.	Click in the <b>Event Date</b> field.
	MM/DD/YYYY
3.	Enter the desired information into the <b>Event Date</b> field. For this example, enter "09/25/2021".
4.	Click the button to the right of the <b>Reason For Request</b> field.

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tle: R 3	
loyee ID: 103152	
rvice Date: 8/14/1996	// 🗩
ashboard	
eopleSoft Menu	>
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Bookmarks	
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lanager Actions	>
Performance Workcenter	r
Recruiting Workcenter	
Forms Library	>
Quicklinks	>
Help / FAQ	>
Edit profile	
Dog out	

Step	Action
5.	Click the <b>Reason For Request</b> list item.
	Qualifying Life Event
6.	Click the button to the right of the Life Event Reason field.
	~



Abigail Lacayo	UCPath	Q 😡 Bookmark 🕒 Log ou
Primary Title: TRAINER 3 Employee ID:		
10003152		Ask UCPath Center
Service Date: 03/14/1996		
Dashboard	+ Add Enrollment Changes: Benefits Information	Form ID: 72156
PeopleSoft Menu >	Highlights Enabled	Original Version Current Version
Worklist		
Bookmarks	Addr Change Plan Service Area	
Employee Actions >	Birth / Adoption Death of Dependent	
Manager Actions >	Dependents Relocating to US Divorce/Legal Separation/Annul	
Performance Workcenter	Domestic Partnership Invol Loss of Non-UC Coverage	
Recruiting Workcenter	Marriage	
Forms Library >	Other Remove Overage Dependent	
Quicklinks >	Term of Domestic Partnership	
Help / FAQ >	ľ – – – – – – – – – – – – – – – – – – –	
🕗 Edit profile		
🔁 Log out	Employee Contact Information Please provide your preferred contact information.	

Step	Action
7.	Click the <b>Birth / Adoption</b> list item.
	Birth / Adoption

Abigail Lacayo	WINDOWN UCPath	Q 🛛 😡 Bookmark 🕑 Log o
Primary Title: FRAINER 3		
Employee ID: 10003152		Ask UCPath Center
Service Date: 03/14/1996		
Dashboard	+ Add Enrollment Changes: Benefits Information	Form ID: 72156
PeopleSoft Menu	Highlights Enabled	
Worklist		Original Version Current Version
Bookmarks	Reason for Request	
Employee Actions	Event Date *	
Manager Actions	09/25/2021	
Performance Workcenter	Reason For Request *	
Recruiting Workcenter	Qualifying Life Event 🗸	
Forms Library	Life Event Reason *	
Quicklinks		
Help / FAQ		
🖉 Edit profile		
E Log out	Employee Contact Information	
Jog out	Please provide your preferred contact information.	

Step	Action
8.	Click the scrollbar.



Abigail Lacayo Primary Title: TRAINER 3 Employee ID:		Employee Contact Information Please provide your preferred contact information.
10003152 Service Date: 03/14/1996		Telephone Employee Contact Email UCPATH.Tester@universityofcalifornia.edu
Dashboard PeopleSoft Menu Worklist	>	Late Enrollment
Bookmarks Employee Actions	>	Note: Your selection indicates this is a late enrollment request. Completion of this form does not guarantee enrollment into the requested benefit plans. All requests are subject to approval by the UC Office of the President.
Manager Actions Performance Workcenter Recruiting Workcenter	>	UCPath Center at (855) 982-7284 if you have questions regarding supporting documentation requirements
Forms Library	>	Reason For Late Enrollment Request *
Quicklinks Help / FAQ	>	
🥏 Edit profile		
🕞 Log out		90-Day Waiting Period for Medical Coverage: Per UC policy, an eligible employee who is not enrolled in any medical plan may

Step	Action
9.	Enter your preferred contact information if needed.
10.	The Late Enrollment section appears when the Event Date is outside of the PIE for the Qualifying Life Event. Enter comments in the Reason For Late Enrollment Request text box below. Supporting document(s) can be attached at the end of the eForm.
11.	Click in the Reason For Late Enrollment Request field.
12.	Enter the desired information into the field. Enter "I'm enrolling late and I have the birth certificate to attach.".
13.	Click the scrollbar.

Abigail Lacayo		Reason For Late Enrollment Request *	
Primary Title: TRAINER 3		I'm enrolling late and I have the birth certificate to attach.	
Employee ID: 10003152			
Service Date: 03/14/1996			
Dashboard			
PeopleSoft Menu	>	90-Day Waiting Period for Medical Coverage: Per UC policy, an eligible employee who is not enrolled in any medical plan may elect medical coverage outside of a Period of Initial Eligibility (PIE) or Open Enrollment Period (OEP), following a 90-day waiting	
Worklist		period. Premiums for the medical plan will be paid on an after-tax basis.	
Bookmarks		If your late enrollment request is denied, do you want to be enrolled in a medical plan subject to the 90-day waiting period?	
Employee Actions	>	Please answer Yes below if you want to be enrolled in a medical plan subject to the 90-day waiting period. Please answer No below if you want to decline medical coverage.	
Manager Actions	>		
Performance Workcenter		Select Response *	
Recruiting Workcenter		· · ·	
Forms Library	>		
Quicklinks	>	Next Save For Later	
Help / FAQ	>		
🖉 Edit profile			
🔁 Log out		Privacy Statement Terms of Use University of C	alifornia



Step	Action
14.	If a late enrollment request is denied you may choose to decline medical coverage or enroll in a medical plan after a 90-day waiting period.
15.	Click the button to the right of the Select Response field.
	~

Abigail Lacayo	Reason For Late Enrollment Request *	
Primary Title: TRAINER 3	I'm enrolling late and I have the birth certificate to attach.	
Employee ID: 10003152		
Service Date: 03/14/1996		
Dashboard		
PeopleSoft Menu >	90-Day Waiting Period for Medical Coverage: Per UC policy, an eligible employee who is not enrolled in any medical plan may elect medical coverage outside of a Period of Initial Eligibility (PIE) or Open Enrollment Period (OEP), following a 30-day waiting	
Worklist	period. Premiums for the medical plan will be paid on an after-tax basis.	
Bookmarks	If your late enrollment request is denied, do you want to be enrolled in a medical plan subject to the 90-day walting period?	
Employee Actions >	Please answer Yes below if you want to be enrolled in a medical plan subject to the 90-day waiting period.	
Manager Actions >	Please answer No below if you want to decline medical coverage.	
Performance Workcenter	Select Response *	
Recruiting Workcenter	· · · · · · · · · · · · · · · · · · ·	
Forms Library >	No Yes	
Quicklinks >	Next Save For Later	
Help / FAQ >		
Edit profile		
Eog out	Privacy Statement Terms of Use Unit	versity of California

Step	Action
16.	For this example, click the <b>Yes</b> list item.
	Yes
17.	The Save For Later button is available on every page of the eForm.
18.	Click the Next button.

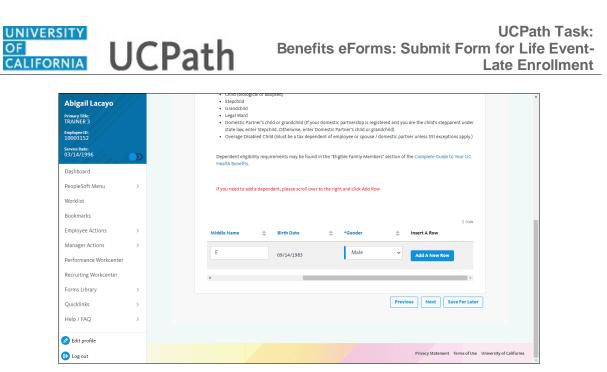


Abigail Lacayo Primary Title: TRAINER 3 Employee ID: 10003152	+ Add Enrollment Changes: Dependents Form ID: 72156  Highlights Enabled Original Version Current Version	
Service Date: 03/14/1996	Dependents	
Dashboard		
PeopleSoft Menu >	Please list each dependent and enter his or her personal details. You must complete the following section for all dependents. You may only enroll family members into plans in which you are enrolled.	
Worklist		
Bookmarks	The Affordable Care Act (ACA) requires employers to obtain Social Security numbers for employees, spouses, domestic partners and dependents.	
Employee Actions >		
Manager Actions >	Valid Relationship Codes:	
Performance Workcenter	Spouse     Registered Domestic Partner / Not Registered Domestic Partner	
Recruiting Workcenter	Child (biological or adopted)     Stepchild	
Forms Library >	Grandchild Legal Ward	
Quicklinks >	<ul> <li>Domestic Partner's child or grandchild (if your domestic partnership is registered and you are the child's stepparent under state law, enter Stepchild. Otherwise, enter Domestic Partner's child or grandchild)</li> </ul>	
Help / FAQ >	Overage Disabled Child (Must be a tax dependent of employee or spouse / domestic partner unless SSI exceptions apply.)	
Dedit profile	Dependent eligibility requirements may be found in the "Eligible Family Members" section of the Complete Guide to Your UC Health Benefits.	
Dog out		

Step	Action
19.	The Dependents page appears. Review dependent information and add new dependent(s) as applicable.
20.	Click the scrollbar.

Abigail Lacayo Primary Title: TRAINER 3 Employee ID: 10003152 Service Date: 03/14/1996	
Dashboard PeopleSoft Menu Worklist	>
Bookmarks Employee Actions	>
Manager Actions Performance Workcente	> er
Recruiting Workcenter	
Forms Library Quicklinks	>
Help / FAQ	>
🧭 Edit profile	
🔁 Log out	

Step	Action
21.	Click the scrollbar to see additional information or to add a new dependent.
	►



Step	Action
22.	Click the Add A New Row button to add new dependent information.
	Add A New Row

Dashboard	>			E	state law, • Overage I Pependent eli Realth Benefit	d d Partner's enter Ste Disabled gibility re s.	s child or ş spchild. O Child (Mu equiremen	grandchild (If y therwise, ente st be a tax dep nts may be fou	r Domesti endent of nd in the '	c Partner employe	ership is regist 's child or grane e or spouse / di amily Members click Add Row.	dchild) omestic pa	irtner u	nless SSI ei	ceptions a	ipply.)
Bookmarks															2	rows
Employee Actions	>				*First Nam						Middle Nam			Birth Da		
Manager Actions	>				"First Nam	e	÷	*Last Nam	e	÷	Middle Nam	e	÷	Birth Da	ite	
Performance Workcenter				1	Manny			Lacayo			E			09/14/1	983	
Recruiting Workcenter																
Forms Library	>			2										MM	DD/YYY	Y
Quicklinks	>															
Help / FAQ	>			4												•
Edit profile												Pre	vious	Next	Save F	or Later
Dog out																

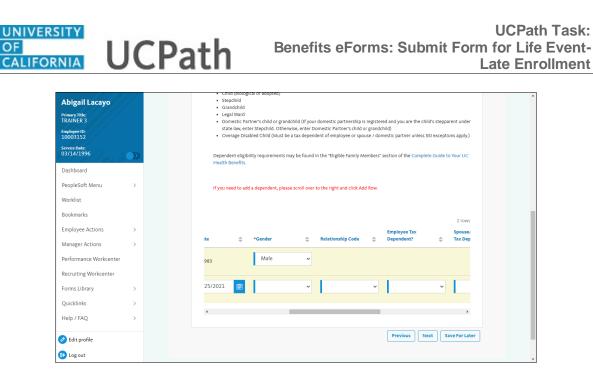
Step	Action
23.	Click in the <b>First Name</b> field.
24.	Enter the desired information into the <b>First Name</b> field. For this example, enter " <b>Sylvia</b> ".



Step	Action
25.	Click in the Last Name field.
26.	Enter the desired information into the Last Name field. Enter "Lacayo".
27.	Click in the Middle Name field.
28.	Enter the dependent's middle name or initial into the optional <b>Middle Name</b> field. For this example, enter " <b>S</b> ".

Abigail Lacayo Primery Title: TRAINER 3 Employee 10: 10003152 Service Date: 03/14/1996 Dashboard PeopleSoft Menu	>		De	state law, enter Step Overage Disabled C pendent eligibility rec alth Benefits.	child or ş ichild. O hild (Mu quiremen	grandchild (If your dome therwise, enter Domest st be a tax dependent o	ic Partner f employe "Eligible F	's child or grandchi e or spouse / dome amily Members" se	ld) estic partner u	the child's stepparent under nless 551 exceptions apply.) omplete Guide to Your UC
Worklist										
Bookmarks										2 rows
Employee Actions	>									
Manager Actions	>			*First Name	÷	*Last Name	÷	Middle Name	÷	Birth Date
Performance Workcenter			1	Manny		Lacayo		E		09/14/1983
Recruiting Workcenter										
Forms Library	>		2	Sylvia		Lacayo		S		MM/DD/YYYY
Quicklinks	>									
Help / FAQ	>		4							•
🖉 Edit profile									Previous	Next Save For Late
🕞 Log out										

Step	Action
29.	Click in the <b>Birth Date</b> field.
	MM/DD/YYYY
30.	Enter the desired information into the <b>Birth Date</b> field. Enter "09/25/2021".
31.	Click the scrollbar.



Step	Action
32.	Click the button to the right of the Gender field.
	~

Abigail Lacayo		• Step	child	cal of adopted)						
Primary Title: TRAINER 3		Gran     Lega	Ward		4.06					
Employee ID:		state	e law, ente	er Stepchild. Otherwise	, enter D	domestic partnership is omestic Partner's child o	r grando	hild)		
10003152		Over	rage Disa	bled Child (Must be a ta	ax depen	dent of employee or spor	ise / dor	nestic partner unless SSI	exception	ons apply.)
Service Date: 03/14/1996		Depende Health B		ility requirements may t	oe found	in the "Eligible Family Me	mbers"	section of the Complete	Guide t	o Your UC
Dashboard										
PeopleSoft Menu	>	If you ne	ed to add	l a dependent, please so	roll over	to the right and click Ad	i Row.			
Worklist										
Bookmarks										2 rows
Employee Actions	>							Employee Tax		Spouse/
Manager Actions	>	te	\$	*Gender	\$	Relationship Code	÷	Dependent?	÷	Tax Dep
Performance Workcenter		983		Male	~					
Recruiting Workcenter										
Forms Library	>	25/2021	÷		~		~		~	
Quicklinks	>			Female						
Help / FAQ	>	4		Male Unknown						Þ
🖉 Edit profile								Previous	t S:	ave For Later
😥 Log out										

Step	Action
33.	Click the Gender list item.
	Female
34.	Click the button to the right of the <b>Relationship Code</b> field.



	1	Child (biological of adopted)				
Abigail Lacayo		Stepchild				
		Grandchild     Legal Ward				
Primary Title: TRAINER 3		<ul> <li>Legal ward</li> <li>Domestic Partner's child or grandchild (If your domestic partnership is registered and you are the child's stepparent under</li> </ul>				
Employee ID:		state law, enter Stepchild. Otherwise, enter Domestic Partner's child or grandchild)				
10003152		Overage Disabled Child (Must be a tax dependent of employee or spouse / domestic partner unless SSI exceptions apply.)				
Service Date: 03/14/1996 Dashboard	>	Dependent eligibility requirements may be found in the "Eligible Family Members" section of the Complete Guide to Your UC Health Benefits.				
PeopleSoft Menu	>	If you need to add a dependent, please scroll over to the right and click Add Row.				
Worklist						
Bookmarks		2 (0)/5				
Employee Actions	>	Child (Biological or Adopted) Domestic Partner yee Tax Spouse/				
Manager Actions	>	.te     *Gender     Grand Child / Step Grand Child     *dent?     Tax Dep       Legal ward     Legal ward				
Performance Workcenter		983 Male V Overage Disabled Child Spouse				
Recruiting Workcenter		Spouse Step Child				
Forms Library	>	25/2021 🛱 Female 🗸 🗸				
Quicklinks	>					
Help / FAQ	>	۰				
🤌 Edit profile		Previous Next Save For Later				
😥 Log out						

Step	Action
35.	Click in the Child (Biological or Adopted) field.
	Child (Biological or Adopted)
36.	Click the button to the right of the <b>Employee Tax Dependent?</b> field.
	~

		<ul> <li>Child (biolog</li> </ul>	ical of adopted)					
Abigail Lacayo		<ul> <li>Stepchild</li> </ul>						
and accure		<ul> <li>Grandchild</li> </ul>						
Primary Title:		<ul> <li>Legal Ward</li> </ul>						
TRAINER 3							red and you are the child's s	tepparent under
Employee ID:					omestic Partner's child o			
10003152		<ul> <li>Overage Disa</li> </ul>	abled Child (Must be a 1	ax depend	lent of employee or spor	use / doi	mestic partner unless SSI ex	ceptions apply.)
Service Date: 03/14/1996		Dependent eligib Health Benefits.	ility requirements may	be found i	n the "Eligible Family M	embers"	section of the Complete Gu	ide to Your UC
Dashboard								
PeopleSoft Menu	>	If you need to add	d a dependent, please s	croll over t	to the right and click Ad	d Row.		
Worklist								
Bookmarks								_
								2 rows
Employee Actions	>						Employee Tax	Spouse/
Manager Actions	>	te ≑	*Gender	÷	Relationship Code	÷	Dependent?	🗢 Tax Dep
Performance Workcenter			Male	~				
Performance workcenter		983	Mule					
Recruiting Workcenter								
need an english of Recifical			1		1			
Forms Library	>	25/2021 🛗	Female	~	Child (Biologica	li v		~
Quicklinks	>						No	
		4					Yes	•
Help / FAQ	>							
🖉 Edit profile							Previous Next	Save For Later
🕞 Log out								

Step	Action
37.	Click the <b>Yes</b> list item.
	Yes
	Yes



Step	Action
38.	Click the scrollbar.

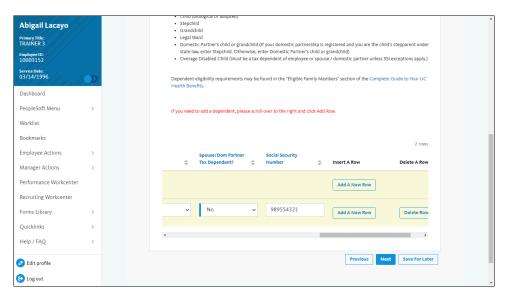
	////	Child (biological of adopted)			
Abigail Lacayo		Stepchild     Grandchild			
Primary Title: TRAINER 3		Legal Ward     Domestic Partner's child or gra	andchild (If your domestic partner	rship is registered and you are	the child's stepparent under
Employee ID: 10003152			nerwise, enter Domestic Partner's	child or grandchild)	
Service Date: 03/14/1996		Dependent eligibility requirements Health Benefits.	s may be found in the "Eligible Far	mily Members" section of the G	Complete Guide to Your UC
Dashboard					
PeopleSoft Menu	>	If you need to add a dependent, ple	ease scroll over to the right and cl	lick Add Row.	
Worklist					
Bookmarks					2 rows
Employee Actions	>	Spouse/Dom Partner	Social Security		
Manager Actions	>	💠 Tax Dependent? 💠	Number 🌲	Insert A Row	Delete A Row
Performance Workcenter				Add A New Row	
Recruiting Workcenter					
Forms Library	>	v v		Add A New Row	Delete Row
Quicklinks	>				
Help / FAQ	>	4			•
🖉 Edit profile				Previous	Next Save For Later
🕞 Log out					

Step	Action
39.	Click the button to the right of the <b>Spouse/Dom Partner Tax Dependent?</b> field.
	~

Abigail Lacayo • Stepchild	
Grandchild	
Primary Title:     Legal Ward	
TRAINER 3 • Domestic Partner's child or grandchild (If your domestic partnership is registered and you are the child's stepparent	under
Employee ID: state law, enter Stepchild. Otherwise, enter Domestic Partner's child or grandchild)	
Overage Disabled Child (Must be a tax dependent of employee or spouse / domestic partner unless SSI exceptions a	pply.)
Service Date:	
03/14/1996 Dependent eligibility requirements may be found in the "Eligible Family Members" section of the Complete Guide to You	ir UC
Health Benefits.	
Dashboard Dashboard	
PeopleSoft Menu > If you need to add a dependent, please scroll over to the right and click Add Row.	
Worklist	
Bookmarks and a second s	
	2 rows
Employee Actions > Spouse/Dom Partner Social Security	
Manager Actions >	
Performance Workcenter Add A New Row	
Recruiting Workcenter	
Forms Library > Y Y Add A New Row Delete Row	
Quicklinks > No	
4 Yes	- F
Help / FAQ >	
Previous Next Save F	orLater
Edit profile	orLater
Edit profile Previous Next Save P	or Later



Step	Action
40.	Click the <b>No</b> list item.
	Νο
41.	Click in the Social Security Number field.
42.	Enter the desired information into the <b>Social Security Number</b> field. Enter "989554321".



Step	Action
43.	Click the <b>Next</b> button.
	Next



Abigail Lacayo		+ Add Enrollment Changes: Medical Plan Form ID: 72156
Primary Title: FRAINER 3		Highlights Enabled
Employee ID: 10003152		Original Version Current Version
Service Date: 03/14/1996		Medical Plan
Dashboard		
PeopleSoft Menu	>	Here are your available options for Medical plan enrollment.
Worklist		Not sure which plan is best for you? Review the Quick Reference Guide to UC's Medical Plans for general information.
Bookmarks		Medical Plan*
Employee Actions	>	Enroll in Medical
Manager Actions	>	PPO Plans:
Performance Workcenter		
Recruiting Workcenter		UC Care (administered by Anthem Blue Cross), a PPO
Forms Library	>	plan created just for UC with access to UC doctors and medical centers as well as the entire Anthem PPO
Quicklinks	>	network
Help / FAQ	>	CORE (administered by Anthem Blue Cross), a high- deductible PPO plan offered at no cost to eligible faculty and staff
🖉 Edit profile		UC Health Savings Plan (administered by Anthem Blue Cross), a PPO with a Health Savings Account (HSA)
🔁 Log out		that allows you to contribute tax-free

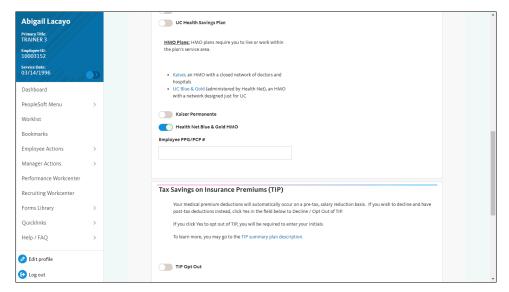
Step	Action
44.	The <b>Medical Plan</b> enrollment page appears. You have the option to change plans at the time of a Life Event. Click the <b>Quick Reference Guide to UC's Medical Plans</b> link to UCnet for medical plan information.
45.	Your current benefits enrollments default to the form. For this example, accept the default of <b>Enroll in Medical</b> .
46.	Click the scrollbar.

Abigail Lacayo	Medical Plan *	
	Enroll in Medical 🗸	
Primary Title: TRAINER 3		
Employee ID: 10003152	PPO Plans:	
Service Date: 03/14/1996		
Dashboard	UC Care (administered by Anthem Blue Cross), a PPO     plan created just for UC with access to UC doctors and     medical centers as well as the entire Anthem PPO	
PeopleSoft Menu >	network	
Worklist	CORE (administered by Anthem Blue Cross), a high- deductible PPO plan offered at no cost to eligible	
Bookmarks	faculty and staff	
Employee Actions >	UC Health Savings Plan (administered by Anthem Blue     Cross), a PPO with a Health Savings Account (HSA)     that allows you to contribute tar-free	
Manager Actions >		
Performance Workcenter		
Recruiting Workcenter	UC Care	
Forms Library >	Core	
	UC Health Savings Plan	
Quicklinks >		
Help / FAQ >	HMO Plans: HMO plans require you to live or work within the plan's service area.	
🧭 Edit profile	Kaiser, an HMO with a closed network of doctors and	
🕞 Log out	hospitals U(CRue & Cold (administered by Health Net) an HMO	

Step	Action
47.	There are three <b>PPO Plans</b> and two <b>HMO Plans</b> to choose from.
	Blue text throughout the Benefits eForms provide links to additional information. For example, click the blue plan names on this page to access details for each plan.



Step	Action
48.	Click the scrollbar.



Step	Action
49.	For this example, accept the default selection of <b>Health Net Blue &amp; Gold HMO</b> . If you know the primary physician group (PPG) or primary care physician (PCP) you'd like to select or change to, find the 10-digit code on the plan website and enter it in the <b>Employee PPG/PCP</b> # field.
50.	Select the TIP Opt Out option to pay your medical plan employee contribution as an after-tax deduction
51.	Click the scrollbar.

l Lacayo		Т	ax Savings on Insurance	Premi	ums (TIP)			
imary Title: RAINER 3 nployee ID: 0003152 rvice Date: 3/14/1996	∕⊃>	Your medical premium deductions will automatically occur on a pre-tax, salary reduction basis. If you wish to decline and have post-tax deductions instead, click Yes in the field below to Decline / Opt Out of TIP. If you click Yes to opt out of TIP, you will be required to enter your initials. To learn more, you may go to the TIP summary plan description.						
ashboard eopleSoft Menu	>		TIP Opt Out					
/orklist			Dependents Plans					
Bookmarks								
mployee Actions	>		Dependent Name		*Medical	۵	PPG/PCP#	2 rows
ianager Actions	>		oup and the Maine	Ŧ		*		•
erformance Workcenter			1 Lacayo,Manny E		Enroll	*		
Recruiting Workcenter								
orms Library	>		2 Lacayo,Sylvia S			~		
uicklinks	>							
elp / FAQ	>						Previous	Next Save For Later
Edit profile								
Log out								



Step	Action
52.	Dependents must be enrolled individually for each plan.
53.	Click the button to the right of the <b>Medical</b> field.

Abigail Lacayo		Tax Savings on Insurance Premiums (TIP)	
Primary Title: TRAINER 3		Your medical premium deductions will automatically occur on a pre-tax, salary reduction basi post-tax deductions instead, click Yes in the field below to Decline / Opt Out of TIP.	s. If you wish to decline and have
Employee ID: 10003152		If you click Yes to opt out of TIP, you will be required to enter your initials.	
Service Date: 03/14/1996		To learn more, you may go to the TIP summary plan description.	
Dashboard			
PeopleSoft Menu	>	TIP Opt Out	
Worklist		Dependents Plans	
Bookmarks		Dependents hans	
Employee Actions	>		2 rows
Manager Actions	>	Dependent Name 💠 *Medical 🌩 PPG/PCP #	\$
Performance Workcenter		1 Lacayo,Manny E Enroll 🗸	
Recruiting Workcenter			
Forms Library	>	2 Lacayo,Sylvia S	
Quicklinks	>	Enroll Waive	
Help / FAQ	>	waive	
		Previ	ous Next Save For Later
🖉 Edit profile			
🕒 Log out			

Step	Action
54.	Click the <b>Enroll</b> list item.
	Enroll

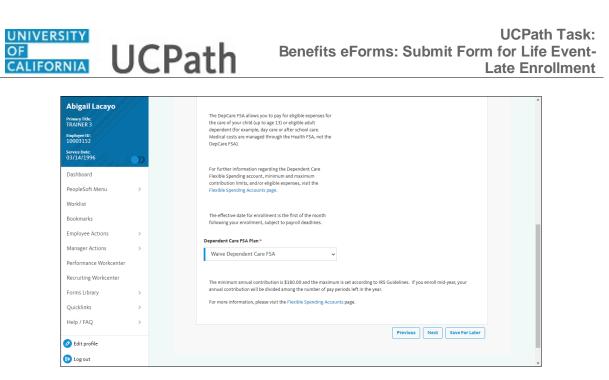
Abigail Lacayo			Tax Sa	vings on Insurance	Premi	ums (TIP)			
Primary Title: TRAINER 3				ur medical premium deduct st-tax deductions instead, c					ou wish to decline and have
Employee ID: 10003152			If	rou click Yes to opt out of T	IP, you wil	l be required to enter	your initials.		
Service Date: 03/14/1996			То	learn more, you may go to	the TIP su	mmary plan descriptio	n.		
Dashboard									
PeopleSoft Menu	>		Т	IP Opt Out					
Worklist			Donor	dents Plans					
Bookmarks			Debeu	dents Plans					
Employee Actions	>								2 rows
Manager Actions	>			Dependent Name	÷	*Medical	÷	PPG/PCP #	÷
Performance Workcenter			1	Lacayo,Manny E		Enroll	~		
Recruiting Workcenter									
Forms Library	>		2	Lacayo,Sylvia S		Enroll	~		
Quicklinks	>								
Help / FAQ	>							Previous	Next Save For Late
🖉 Edit profile									
🕞 Log out									



Step	Action
55.	Click the <b>Next</b> button.
	Next

Abigail Lacayo Primary Title: TRAINER 3 Employee ID: 10003152		+ Add Enrollment Changes: Flexible Sp  Highlights Enabled	ending Accounts (FSA)	Form ID: 7215
Service Date: 03/14/1996	// >>	Flexible Spending Accounts (FSA)		
Dashboard PeopleSoft Menu	>	The Health FSA allows you to pay for eligible medical expenses for you and your eligible family members.		
Worklist Bookmarks Employee Actions	>	For further information regarding the Health Flexible Spending account, minimum and maximum contribution limits, and/or eligible expenses, visit the Flexible Spending Accounts page.		
Manager Actions Performance Workcenter	> r	The effective date for enrollment is the first of the month following your enrollment, subject to payroll deadlines.		
Recruiting Workcenter		Health FSA Plan *	Annual Health Contrib	ution Amount *
Forms Library	>	Enroll in Health FSA	✓ \$550.00	
Quicklinks	>			
Help / FAQ	>	The DepCare FSA allows you to pay for eligible expenses for the care of your child (up to age 13) or eligible adult	or	
🤌 Edit profile		dependent (for example, day care or after school care. Medical costs are managed through the Health FSA, not th	e	
🕞 Log out		DepCare FSA).		

Step	Action
56.	The Flexible Spending Accounts (FSA) page appears.
	Current enrollment information for the <b>Health FSA Plan</b> and the <b>Annual Health Contribution Amount</b> default into these fields.
	For this example, accept the defaults and scroll down the page to enroll in the <b>Dependent Care FSA Plan</b> and add a contribution amount.
57.	Click the scrollbar.



Step	Action
58.	For this example, change the <b>Dependent Care FSA Plan</b> enrollment from <b>Waive</b> to <b>Enroll</b> and add a contribution amount.
59.	Click the button to the right of the <b>Dependent Care FSA Plan</b> field.

Abigail Lacayo	
Primary Title: TRAINER 3	The DepCare FSA allows you to pay for eligible expenses for the care of your child (up to age 13) or eligible adult
Employee ID: 10003152	dependent (for example, day care or after school care. Medical costs are managed through the Health FSA, not the DepCare FSA).
Service Date: 03/14/1996	
Dashboard	For further information regarding the Dependent Care Flexible Spending account, minimum and maximum
PeopleSoft Menu >	contribution limits, and/or eligible expenses, visit the Flexible Spending Accounts page.
Worklist	
Bookmarks	The effective date for enrollment is the first of the month following your enrollment, subject to payroll deadlines.
Employee Actions >	Dependent Care FSA Plan *
Manager Actions >	Waive Dependent Care FSA 🗸
Performance Workcenter	Enroll Dependent Care FSA
Recruiting Workcenter	Waive Dependent Care FSA n is set according to IRS Guidelines. If you enroll mid-year, your
Forms Library >	annual contribution will be divided among the number of pay periods left in the year.
Quicklinks >	For more information, please visit the Flexible Spending Accounts page.
Help / FAQ >	
🕗 Edit profile	Previous Next Save For Later
🔁 Log out	

Action	
Click the Enroll Dependent Care FSA list item.	
Enroll Dependent Care FSA	
С	-



Step	Action		
61.	Click in the Annual Dep Care Contribution Amount field.		
	\$		
62.	Enter the desired information into the <b>Annual Dep Care Contribution</b> <b>Amount</b> field. For this example, enter "500.00".		

Abigail Lacayo Primary Title: TRAINER 3 Employee ID: 10003152 Service Date: 03/14/1996		The DepCare FSA allows you to pay for eligible expenses for the care of your full (up to age 13) or eligible adult dependent (for example, day care or after school care. Medical costs are managed through the Health FSA, not the DepCare FSA).
Dashboard PeopleSoft Menu	>	For further information regarding the Dependent Care Flexible Spending account, minimum and maximum contribution limits, and/or eligible expenses, visit the Flexible Spending Accounts page.
Worklist Bookmarks		The effective date for enrollment is the first of the month following your enrollment, subject to payroll deadlines.
Employee Actions Manager Actions Performance Workcenter	> >	Dependent Care FSA Plan*     Annual Dep Care Contribution Amount*       Enroll Dependent Care FSA     \$500.00
Recruiting Workcenter Forms Library Quicklinks	>	The minimum annual contribution is \$180.00 and the maximum is set according to IRS Guidelines. If you enroll mid-year, your annual contribution will be divided among the number of pay periods left in the year. For more information, please visit the Flexible Spending Accounts page.
Help / FAQ	>	Previous Next Save For Later
<ul> <li>Edit profile</li> <li>Log out</li> </ul>		

Step	Action
63.	Click the <b>Next</b> button.
	Next

Abigail Lacayo	+ Add Enrollment Changes: Dental Plan Form ID: 72156	1
Primary Title: TRAINER 3	Highlights Enabled     Original Version     Current Version	
Employee ID: 10003152		
Service Date: 03/14/1996	Dental Plan	
Dashboard	UC provides two dental plan options, the Delta Dental PPO plan and the DeltaCare USA HMO. Prior to completing enrollment,	
PeopleSoft Menu >	verify that your preferred dentist is in the network of the plan you choose.	
Worklist	For more information, please visit the Dental plans page.	
Bookmarks	For more information, prease visit the Dental plans page.	
Employee Actions >	Dental Plan*	
Manager Actions >	Denta Pian *	
Performance Workcenter		
Recruiting Workcenter		
Forms Library >	Dependents Plans	
Quicklinks >	2 rows	
Help / FAQ >	Dependent Name 🔶 *Dental 🔶	
🖉 Edit profile	1 Lacayo,Manny E Enroll	
🔁 Log out		



Step	Action
64.	The <b>Dental Plan</b> page appears. For this example, accept the defaulted benefit selection.
65.	Click the scrollbar.

bigail Lacayo		For	more information, please visit the	Dental plans page.			
Primary Title: TRAINER 3 Employee ID: 10003152 Service Date: 03/14/1996	// 🔊	Dental Pla	n* Dental PPO	~			
shboard opleSoft Menu	>	Depend	dents Plans				
Worklist							2 rows
Bookmarks			Dependent Name	\$	*Dental		\$
Employee Actions	>	1	Lacayo,Manny E		Enroll		~
Manager Actions	>						
Performance Workcente		2	Lacayo,Sylvia S				~
ecruiting Workcenter							
orms Library	>						
Quicklinks	>					Previous Next Save	For Later
Help / FAQ	>						
Edit profile							
Log out						Privacy Statement Te	erms of Use L

Step	Action					
66.	Remember to enroll dependents for coverage in each plan as needed.					
	Click the button to the right of the <b>Dental</b> field.					

Abigail Lacayo		For more information, please visit the Denta	il plans page.			
Primary Title: TRAINER 3						
Employee ID: 10003152		Dental Plan *				
Service Date: 03/14/1996	//>>	Delta Dental PPO	~			
Dashboard						
PeopleSoft Menu	>	Dependents Plans				
Worklist					2 rows	
Bookmarks		Dependent Name	≑ *Dent	al	÷	
Employee Actions	>	1 Lacayo, Manny E	En	ıroll	~	
Manager Actions	>					
Performance Workcent	er	2 Lacayo,Sylvia S			~	
Recruiting Workcenter			En			
Forms Library	>		Wa	ive		
Quicklinks	>			Previous Next	Save For Later	
Help / FAQ	>					
🖉 Edit profile						
🕞 Log out				Privacy State	ment Terms of Use University of C	aliforni



Step	Action	
67.	Click the <b>Enroll</b> list item.	
	Enroll	

bigail Lacayo		For	r more information, please visit the l	Dental plans page.			
AINER 3 Noyee ID: 003152 rice Date: /14/1996		Dental Pla Delta	an* Dental PPO	~			
oard 2Soft Menu	>	Depen	dents Plans				
ist							2 rows
narks			Dependent Name	\$	*Dental		\$
yee Actions	>	1	Lacayo,Manny E		Enroll		~
er Actions	>						
ance Workcenter		2	Lacayo,Sylvia S		Enroll		~
ing Workcenter							
Library	>						
inks	>					Previous Next	Save For Later
/ FAQ	>						
dit profile							
gout						Privacy Statem	ent Terms of Use U

Step	Action
68.	Click the <b>Next</b> button.
	Next

Abigail Lacayo		+ Add Enrollment Changes: Vision Plan	Form ID: 72156
Primary Title: TRAINER 3		Highlights Enabled	
Employee ID: 10003152			Original Version Current Version
Service Date: 03/14/1996	// _>>	Vision Plan	
Dashboard		The Vision Service Plan provides coverage for you and your eligible fa	mile manufactor for chains and the second state of
PeopleSoft Menu	>	ine vision service Plan provides coverage for you and your eligible fai contact lenses, frames and other materials, through a nationwide net	
Worklist		For more information, please visit the Vision plans page.	
Bookmarks			
Employee Actions	>	Vision Plan *	
Manager Actions	>	Enroll Vision Service Plan-VSP 🗸	
Performance Workcenter	r		
Recruiting Workcenter		Dependents Plans	
Forms Library	>		2 rows
Quicklinks	>	Dependent Name 🔶 *N	Vision 🔶
Help / FAQ	>		
<b>•</b> •••••		1 Lacayo,Manny E	Enroll
🖉 Edit profile			
🕞 Log out		2 Lacayo,Sylvia S	~



Step	Action
69.	The <b>Vision Plan</b> page appears. For this example, accept the defaulted benefit selection.
70.	Click the scrollbar.

Abigail Lacayo	[]//
Primary Title: TRAINER 3	
Employee ID: 10003152	
Service Date: 03/14/1996	// _>>
Dashboard	
PeopleSoft Menu	>
Worklist	
Bookmarks	
Employee Actions	>
Manager Actions	>
Performance Workcent	er
Recruiting Workcenter	
Forms Library	>
Quicklinks	>
Help / FAQ	>
Edit profile	
🔁 Log out	

Step	Action
71.	Click the button to the right of the <b>Vision</b> field.
	~

bigail Lacayo		For more information, please visit the	/ision plans page.		
Primary Title: TRAINER 3 Employee ID:		Vision Plan*			
10003152 Service Date: 03/14/1996	// >>>	Enroll Vision Service Plan-VSP	~		
Dashboard		Demondante Diana			
PeopleSoft Menu	>	Dependents Plans			
Worklist					2 rows
Bookmarks		Dependent Name	\$ *Vis	iion	\$
Employee Actions	>	1 Lacayo,Manny E	E	Enroll	*
Manager Actions	>				
Performance Workcenter	r	2 Lacayo,Sylvia S			~
Recruiting Workcenter				nroll	
orms Library	>		W	Vaive	
Quicklinks	>			Previous Next	Save For Later
Help / FAQ	>				
Edit profile					
Dog out				Privacy Sta	tement Terms of Use Univ



Step	Action
72.	Click the <b>Enroll</b> list item.
	Enroll
73.	Click the <b>Next</b> button.
	Next

Abigail Lacayo	UCPath	Bookmark 🕒 Log out
Primary Title: TRAINER 3		
Employee ID: 10003152		Ask UCPath Center
Service Date: 03/14/1996		
Dashboard	+ Add Enrollment Changes: Legal Plan Form ID: 7	2156
PeopleSoft Menu >	Highlights Enabled     Original Version     Curren	t Version
Worklist		
Bookmarks	Legal Plan	
Employee Actions >		
Manager Actions >	The legal plan, provided by ARAG, gives you access to personal legal assistance. The plan provides online, over-the-phone person access to attorneys for a wide range of legal services.	or in-
Performance Workcenter		
Recruiting Workcenter	For more information, please visit the Legal Insurance page.	
Forms Library >		
Quicklinks >	Legal Plan *	
Help / FAQ >	Enroll in Legal Plan 🗸	
🧭 Edit profile		
🕞 Log out	Dependents Plans	_

Step	Action
74.	The <b>Legal Plan</b> page appears. For this example, accept the defaulted benefit selection.
75.	Click the scrollbar.

igail Lacayo	//	For more	information, please visit the	e Legal Insurance page			
mary Title: AINER 3							
mployee ID: .0003152		Legal Plan *					
Service Date: 03/14/1996		Enroll in Le	gal Plan	~			
Dashboard							
PeopleSoft Menu	>	Dependen	ts Plans				
Worklist							2 rows
Bookmarks			ependent Name		\$ *Legal		\$
Employee Actions	>	1 1	acayo,Manny E		Enroll		~
Manager Actions	>						
Performance Workcenter		2 L	acayo,Sylvia S				~
Recruiting Workcenter							
Forms Library	>						
Quicklinks	>					Previous Next	Save For Later
Help / FAQ	>						
Ø Edit profile							
🕞 Log out						Privacy State	ement Terms of Use



Step	Action
76.	Click the button to the right of the Legal field.
	~

Abigail Lacayo		Fo	r more information, please visit the Le	gal Insurance page.			
Primary Title: FRAINER 3							
Employee ID: 10003152		Legal Pla					
Service Date: 03/14/1996		Enrol	l in Legal Plan	~			
Dashboard							
PeopleSoft Menu	>	Depen	idents Plans				
Worklist						2 rows	
Bookmarks			Dependent Name	÷	*Legal	\$	
Employee Actions	>	1	Lacayo,Manny E		Enroll	~	
Manager Actions	>						
Performance Workcenter		2	Lacayo,Sylvia S			~	
Recruiting Workcenter					Enroll		
Forms Library	>				Waive		
Quicklinks	>					Previous Next Save For Later	
Help / FAQ	>						
🖉 Edit profile							
E Log out						Privacy Statement Terms of Use University of (	Californi

Step	Action
77.	Click the Waive list item.
	Waive
78.	Click the <b>Next</b> button.
	Next



Abigail Lacayo	
Primary Title: TRAINER 3 Employee ID:	+ Add Enrollment Changes: Accidental Death & Dismemberment Form ID: 72156 (AD&D)
10003152	Highlights Enabled     Original Version     Current Version
Service Date: 03/14/1996	
Dashboard	Accidental Death & Dismemberment (AD&D)
PeopleSoft Menu >	
Worklist	UC offers the Accidental Death and Dismemberment (AD&D) plan to help protect you and your family from the unforeseen financial hardship of a serious accident that causes death or dismemberment.
Bookmarks	
Employee Actions >	For more information, please visit the Accidental Death and Dismemberment plan page.
Manager Actions >	
Performance Workcenter	AD&D Enroll *
Recruiting Workcenter	Enroll in AD&D 🗸
Forms Library >	AD&D Amount *
Quicklinks >	14.\$200,000 🗸
Help / FAQ >	
🖉 Edit profile	Dependents Plans
🕒 Log out	2 rows

Step	Action
79.	The Accidental Death & Dismemberment (AD&D) page appears. For this example, increase the defaulted AD&D Amount.
80.	Click the button to the right of the <b>AD&amp;D</b> Amount field.

Abigail Lacayo					
Primary Title: TRAINER 3		+ Add Enrollment Changes: Accidental Death & Dismemberment (AD&D)	Form	ID: 72156	
Employee ID: 10003152		Highlights Enabled			
Service Date: 03/14/1996			nal Version	Current Version	
Dashboard		01.\$10,000 02.\$20,000			
PeopleSoft Menu	>	03.\$30,000 04.\$40,000			
Worklist		05.\$50,000 06.\$60,000			
Bookmarks		07.\$70,000 08.\$80,000			
Employee Actions	>	09,\$90,000 10.\$100,000			
Manager Actions	>	11.\$125,000			
Performance Workcenter		13. \$175,000			
Recruiting Workcenter		14. \$200,000 15. \$300,000			
Forms Library	>	16.\$400,000 17.\$500,000			
Quicklinks	>			~	
Help / FAQ	>				
🖉 Edit profile		Dependents Plans			
🕞 Log out				2 rows	

Step	Action
81.	For this example, increase the <b>AD&amp;D</b> Amount to \$300,000.
	Click the <b>15. \$300,000</b> list item.
82.	Click the scrollbar.

UNIVERSITY OF CALIFORNIA	UCPath Task: Benefits eForms: Submit Form for Life Event- Late Enrollment
Abigail Lacayo Primuy Title: TRAINER 3 Employee ID: 10003152 Servec bolte: 03/14/1996	AD&D Enroll * Enroll in AD&D * AD&D Amount * 15. \$300,000 *
Dashboard PeopleSoft Menu > Worklist Bookmarks Employee Actions > Manager Actions > Performance Workcenter	Dependents Plans     2 rows       Dependent Name     * AD&D       1     Lacayo,Manny E       2     Lacayo,Sylvia S
Recruiting Workcenter       Forms Library       Quicklinks       Help / FAQ       2       Edit profile       (a) Log out	Previous Next Save For Later

Step	Action
83.	Click the button to the right of the <b>AD&amp;D</b> field.

Abigail Lacayo	
Primary Title: TRAINER 3	
Employee ID:	
10003152 Service Date:	
03/14/1996	// >>
Dashboard	
PeopleSoft Menu	>
Worklist	
Bookmarks	
Employee Actions	>
Manager Actions	>
Performance Workcente	
Recruiting Workcenter	
Forms Library	>
Quicklinks	>
Help / FAQ	>
🤌 Edit profile	
🕞 Log out	

Step	Action
84.	Click the Waive list item.
	Waive
85.	Click the <b>Next</b> button.
	Next

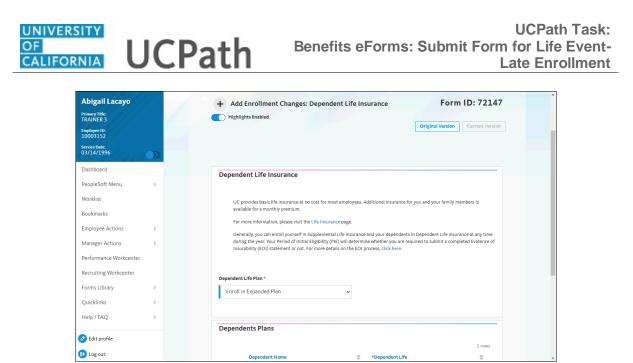


Abigail Lacayo	+ Add Enrollment Changes: Supplemental Life Insurance Form ID: 72156
Primary Title: TRAINER 3	Highlights Enabled
Employee ID: 10003152	Original Version Current Version
Service Date: 03/14/1996	Supplemental Life Insurance
Dashboard	
PeopleSoft Menu >	UC provides basic life insurance at no cost for most employees. Additional insurance for you and your family members is available for a monthly premium.
Worklist	For more information, please visit the Life Insurance page.
Bookmarks	Generally, you can enroll yourself in Supplemental Life insurance and your dependents in Dependent Life insurance at any time during the year. Your Period of Initial Eligibility (PIE) will determine whether you are required to submit a completed Evidence of
Employee Actions >	Insurability (EOI) statement or not. For more details on the EOI process, click here.
Manager Actions >	
Performance Workcenter	Supplemental Life Plan *
Recruiting Workcenter	2X Annual Salary 🗸
Forms Library >	
Quicklinks >	Previous Next Save For Later
Help / FAQ >	
🖉 Edit profile	
🕞 Log out	Privacy Statement Terms of Use University of California

Step	Action
86.	The <b>Supplemental Life Insurance</b> page appears. For this example, accept the defaulted benefit selection.
87.	Click the <b>Next</b> button.
	Next

Abigail Lacayo		+ Add Enrollment Changes: Dependent Life Insurance	Form ID: 72156
Primary Title: TRAINER 3		Highlights Enabled	
Employee ID: 10003152			Original Version Current Version
Service Date: 03/14/1996			
Dashboard		Dependent Life Insurance	
PeopleSoft Menu	>		
Worklist		UC provides basic life insurance at no cost for most employees. Additional insurance f	or you and your family members is
Bookmarks		available for a monthly premium.	
Employee Actions	>	For more information, please visit the Life Insurance page. Generally, you can enroll yourself in Supplemental Life insurance and your dependent	in Dependent Life insurance at any time
Manager Actions	>	during the year. Your Period of Initial Eligibility (PIE) will determine whether you are re Insurability (EOI) statement or not. For more details on the EOI process, click here.	
Performance Workcenter			
Recruiting Workcenter		Dependent Life Plan *	
Forms Library	>	Enroll in Expanded Plan	
Quicklinks	>		
Help / FAQ	>		
Edit profile		Dependents Plans	
			2 rows
🕞 Log out		Dependent Name 🔶 *Dependent Life	\$

Step	Action
88.	The <b>Dependent Life Insurance</b> page appears. For this example, accept the defaulted benefit selection.



Step	Action
89.	Click the scrollbar.

Abigail Lacayo Primary Title: TRAINER 3			r. Your Period of Initial Eligi DI) statement or not. For m			e required to submit a completed Evidence
nyee ID: 03152 se Date: 14/1996	//•••	Dependent Life Plan Enroll in Expand		~		
board leSoft Menu	>	Dependents Pl	ans			
/orklist pokmarks		Depen	dent Name	÷	*AD&D	2 rows
oloyee Actions	>	1 Lacayo	,Manny E		Enroll	~
ormance Workcente		2 Lacayo	,Sylvia S			~
iting Workcenter Library	>					
nks FAQ	>					Previous Next Save For La
Edit profile						
Log out						Privacy Statement Terms of U

Step	Action
90.	Click the button to the right of the <b>Dependent Life</b> field.
	~



		during the year. Your Period of Initial Eligib	ility (PIE) will determine whether you are	required to submit a completed Evidence of	_
Abigail Lacayo		Insurability (EOI) statement or not. For mo	re details on the EOI process, click here.		
Primary Title: TRAINER 3					
TRAINER 3					
Employee ID: 10003152		Dependent Life Plan *			
Service Date:		Enroll in Expanded Plan	~		
03/14/1996	<i>%</i> D				
Dashboard					
PeopleSoft Menu	>	Dependents Plans			
Worklist				2 rows	
		Dependent Name		\$	
Bookmarks			· ····		
Employee Actions	>	1 Lacayo,Manny E	Enroll	v	
		1 Lacayo, Mariny E			
Manager Actions	>				
Performance Workcente	er	2 Lacayo,Sylvia S		~	
0					
Recruiting Workcenter			Enroll Waiye		
Forms Library	>		vvalve		
Quicklinks	>			Previous Next Save For Later	
Help / FAQ	>				
Edit profile					
Log out				Privacy Statement Terms of Use University of Californi	a
- Log out					

Step	Action
91.	Click the Waive list item.
	Waive
92.	Click the <b>Next</b> button.
	Next

gail Lacayo ny Title: NER 3 yee ID: 13152		+	Add Enrollment Changes: Volur Highlights Enabled	tary Disability		Form ID:	72156
Date: 1/1996		Vol	untary Disability Insurance				_
hboard pleSoft Menu	>		UC's basic employer-paid disability insurance UC's Voluntary Disability Insurance replaces (				ecurity,
klist kmarks vlovee Actions	>		Enrollment after your initial eligibility period available during Open Enrollment. Please con			ility Insurance is not ty	pically
ager Actions	>		For more information, please visit the Basic a	ıd Voluntary Disabili	ty page.		
ormance Workcenter ruiting Workcenter ns Library	>		Note: University of California does not partic worked at UC for less than 18 months may ha			gh employees who have	•
cklinks	>	Shor	t Term Disability (VSTD) *	Lo	ng Term Disability (VLTD) *		
p / FAQ	>	E	nroll in Short-Term (VSTD)	*	Enroll in Long-Term (VLTD)	1	~
lit profile							
out					Previous	Next Save F	or Later

Step	Action
93.	The Voluntary Disability Insurance page appears. For this example, accept the defaulted benefit selections for Short Term Disability (VSTD) and Long Term Disability (VLTD).



Step	Action
94.	Click the <b>Next</b> button.
	Next

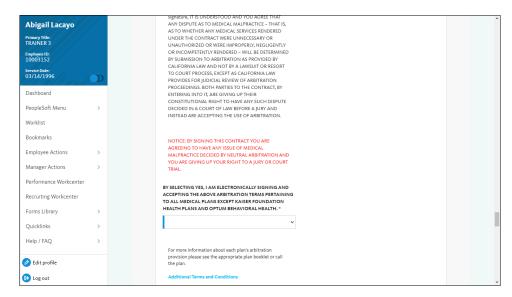
Abigail Lacayo Primary Title: TRAINER 3 Employee 10:	+ Add Enrollment Changes: Participation Terms and Conditions Form ID: 72156  Highlights Enabled Original Version Current Version
0003152 rvice Date: 3/14/1996	Participation Terms and Conditions
Dashboard DeopleSoft Menu >	Your Social Security number, and that of your enrolled family members, is required for purposes of benefit plan administration, for financial reporting, to verify your identity, and for legally required reporting purposes all in compliance with federal and state laws.
Worklist Bookmarks	If you are confirmed as eligible for participation in UC-sponsored plans, you are subject to the following terms and conditions:
Employee Actions > Manager Actions > Performance Workcenter Recruiting Workcenter	<ol> <li>With the exception of benefits provided or administered by Optum Behavioral Health, UC sponsored medical plans require resolution of disputes through arbitration. With regard to each plan, by your written or electronic signature, IT IS UNDERSTOOD AND YOU AGREE THAT ANY DISPUTE AS TO MEDICAL MALPRACTICE - THAT IS, AS TO WHETHER ANY MEDICAL SERVICES RENOERED UNDER THE CONTRACT WREE UNNECESSARY OR UNAUTHORIZED OR WREE IMPORTERY, IN REQUISITIVT OR INCOMPETINITY RENDERED - WILL BE DETERMINED BY SUBMISSION TO ARBITRATION AS PROVIDED BY CALIFORNIA LAW AND NOT BY A LAWSUT OR RESORT OC COURT PROCESS, EXCERT AS CALIFORNIA LAW PROVIDES FOR [UNCLAR, LEVEND FY A LAWSUT OR RESORT OF COURT PROCESS, EXCERT AS CALIFORNIA LAW PROVIDES FOR JUNCICAL REVIEW OF</li> </ol>
Forms Library	ABITERATION PROCEEDINGS. BOTH PARTIES TO THE CONTRACT, BY ENTERING INTO IT, ARE GIVING UP HIRE CONSTITUTIONAL RIGHT TO HAVE ANY SUCH DISPUTE DECIDED IN A COURT OF LAW BEFORE A JURY AND INSTEAD ARE ACCEPTING THE USE OF ABRITERITON. For more information about each plan's arbitration provision please see the appropriate plan bookder or all the plan.
Quicklinks >	2. UC and UC health and welfare plan vendors comply with federal/state regulations related to the privacy of personal/confidential information including the Health insurance Portability and Accountability Act of
Help / FAQ >	1996 (HIPAA) as applicable. To fulfill the responsibilities and perform the service required under contracts with UC, health plans and associated service vendors may share UC member health information between and among each other within the limits established by HIPAA and federal/state regulations for purposes of health care operations, payment, and treatment. A member's requested restriction on the sharing of specified protected health information for health care operations, payment, and treatment will
🔁 Log out	be honored as required by HIPAA.

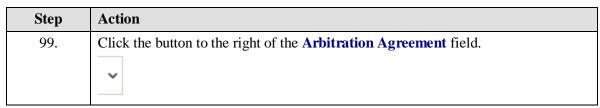
Step	Action
95.	<ul><li>Read all of the <b>Participation Terms and Conditions</b> sections as you scroll down this page.</li><li><b>Note:</b> This simulation does not show all of the page content and skips to the next action item.</li></ul>
96.	Click the scrollbar.

	ARBITRATION		
	require resolution or disputes through arbitration.		
>			
	With regard to each plan, by your written or electronic		
	ANY DISPUTE AS TO MEDICAL MALPRACTICE – THAT IS,		
	AS TO WHETHER ANY MEDICAL SERVICES RENDERED		
>	UNDER THE CONTRACT WERE UNNECESSARY OR		
	UNAUTHORIZED OR WERE IMPROPERLY, NEGLIGENTLY		
>	OR INCOMPETENTLY RENDERED – WILL BE DETERMINED		
	BY SUBMISSION TO ARBITRATION AS PROVIDED BY		
	CALIFORNIA LAW AND NOT BY A LAWSUIT OR RESORT		
	TO COURT PROCESS, EXCEPT AS CALIFORNIA LAW		
>			
>	INSTEAD ARE ACCEPTING THE USE OF ARBITRATION.		
>			
	NOTICE: BY SIGNING THIS CONTRACT YOU ARE		
	>	With regard to each plan, by your written or electronic signature, IT IS UNDERSTOOD AND YOU AGREE THAT ANY DISPUTE AS TO MEDICAL MALERACTICE - THAT IS, A ST OW HETHER ANY MEDICAL SERVICES RENDERED UNDER THE CONTRACT WERE UNNECESSARY OR UNAUTHORIZED OF WRIEN RENDERED - WILL BE DETERMINED O'R INCOMPETENTLY RENDERED - WILL BE DETERMINED BY SUBMISSION TO ABRITATION AS PROVIDED BY CALIFORNIA LAW AND NOT BY A LAWSUIT OR RESORT TO COURT PROCESS, DICEPT ACALIFORNIA LAW PROVIDES FOR JUDICAL REVIEW OF ARMITRATION PROCEEDINGS. BOTH PRAFILS TO THE CONTRACT, BY ENTERING INTO THAR EQUIVED BY UNAUTHORIZED OF UNDERSTORE DEVICE CONSTITUTIONAL RIGHT TO HAVE ANY SUCH DISPUTE CONSTITUTIONAL RIGHT TO HAVE ANY SUCH DISPUTE DECIDED IN A COURT OF LAW ENDER SULVEY OF ARBITRATION.	>     Optim Behavioral Health, UC-sponsed medical plans       require resolution of disputes through arbitration.       >       With regard to each plan, by your written or electronic signature, ITS UNDERSTOOD AND YOU AGEE THAT ANY DISPUTE AS TO MEDICAL MARPARCTIC = THAT IS, AS TO WHETHER ANY MEDICAL SERVICES REVORED UNDER THE CONTRACT WERE UNNECESSARY OR UNAUTHORIZED OR WERE IMPROPERLY, NEGLIGENTY OR INCOMFETENTLY REPORTED HILL BE OFTENINED BY SUBMISSION TO ARBITRATION AS PROVIDED BY CALIFORNIA LWA RDN OFTB YA LWSDIT OR RESORT TO COURT PROCESS, EXCEPT AS CALIFORNIA LWM PROVIDES FOR JUDICAL REVIEW OF ARBITRATION PROCEEDINGS BOTH PARTIES TO THE CONTRACT, BY ENTERING INTO IT, ARE GUINNED UTHER CONSTITUTIONAL RIGHT TO HAVE ANY SUCH DISPUTE DECIDED IN A COURT OF LAW BEFORE ALL BURY AND INSTEAD ARE ACCEPTING THE USE OF ARBITRATION.       >     OTTCE: BY SIGNING THIS CONTRACT YOU ARE AGREEING TO HAVE ANY ISSUE OF MIDICAL MALPRACTICE DECIDED BY NEUTRAL ARBITRATION AND YOU ARE ADVIDER OR TO HAVE AND AND YOU ARE ADVIDED BY NEUTRAL ARBITRATION AND YOU ARE ACCEPTING REGULAR LAWRING AND THIS CONTRACT YOU ARE AGREEING TO HAVE ANY ISSUE OF MIDICAL MALPRACTICE DEVICED BY NEUTRAL ARBITRATION AND YOU ARE ADVIDE BY NEUTRAL ARBITRATION AND YOU ARE ADVIDE BY NEUTRAL ARBITRATION AND YOU ARE ADVIDED BY NEUTRAL ARBITRATION AND



Step	Action
97.	The <b>ARBITRATION</b> section requires an electronic signature.
98.	Click the scrollbar.

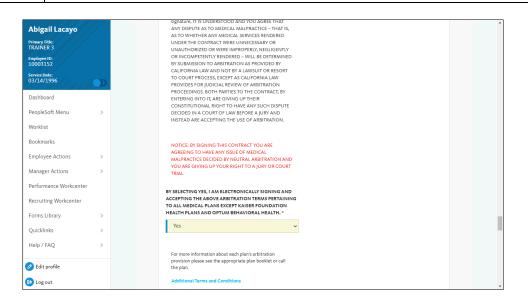




	SIGNATURE, IT IS UNDERSTOOD AND YOU AGREE THAT	
	ANY DISPUTE AS TO MEDICAL MALPRACTICE – THAT IS,	
	AS TO WHETHER ANY MEDICAL SERVICES RENDERED	
	UNDER THE CONTRACT WERE UNNECESSARY OR	
	UNAUTHORIZED OR WERE IMPROPERLY, NEGLIGENTLY	
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	CONSTITUTIONAL RIGHT TO HAVE ANY SUCH DISPUTE	
>	DECIDED IN A COURT OF LAW BEFORE A JURY AND	
	INSTEAD ARE ACCEPTING THE USE OF ARBITRATION.	
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	Additional Terms and Conditions	
	>	AS TO WHITHER ANY MEDICAL SERVICES RENDERD     UNAUTHORIZED OF WEEK IMPROPERLY, MEDIDERD     UNAUTHORIZED OF WEEK IMPROPERLY, MEDIDERD     OF WITHOUT AND TO A SUBJECT AND UNLESS DETERMINED     PROJECT OF UNLESS AND OF TAX LAURS UT OR RESORT     TO COURT PROCESS, EXCEPT AS CALIFORNIA LAW     PROJECTS PROJECT AS CALIFORNIA LAW     PROJECT OF UNLICAL RESULT OF ABRITATION     PROJECTS PROJECT AS CALIFORNIA LAW     PROJECT OF UNLICAL RESULT OF ABRITATION     PROJECTS PROJECTS OF UNLICAL RESULT OF ABRITATION     PROJECTS PROJECT OF UNLICAL RESULT OF ABRITATION     PROJECT OF UNLICAL RESULT OF ABRITATION     PROJECT OF UNLICAL RESULT OF ADDITION     NOTICE: BY SIGNING THIS CONTRACT YOU ARE     AGREEINS TO HAVE ANY ISSUE OF MEDICAL     MAIPRACTICE DECIDED BY NEUTRAL ABRITATION AND     YOU ARE GIVING UP YOUR RIGHT TO A JURY OR COURT     TRAL      PY SELECTING YES, I AM ELECTRONICALLY SIGNING AND     ACCEPTING THE USE OF ABRITATION     PROJECTING YEARS RECENTINING     OL AL MEDICAL FLANS EXCEPT MASER FOUNDATION     HALTH PLANS AND OPTUM BEHAVIORAL HEALTH.*      YES     For more Information about each plan's arbitration     provision plages as eth appropriate plan booklet or cali     the plan.



Step	Action
100.	Click the <b>Yes</b> list item.
	Yes
	Yes



Step	Action
101.	Click the scrollbar.

bigail Lacayo mary Title: AINER 3 ployme ID: 003152 vice Date: /14/1996		with relevant protected authorizing the health p information to the Univ 10. Actions you take during effective the following Janua	Ian to release such ersity representative. Open Enrollment will be ary 1 unless otherwise stated and form transactions have y and submitted timely.			
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Worklist						
Bookmarks		File Attachments				
Employee Actions	>					Add
Manager Actions	>					1 row
Performance Workcenter		Status	Action	Description	File Name	
Recruiting Workcenter		1	Upload		~	
Forms Library	>					
Quicklinks	>	4				÷
Help / FAQ	>					
🖉 Edit profile		Action Items				1 row
🕞 Log out		Acknowledgement				



Step	Action
102.	Click the button to the right of the <b>By selecting Yes, I accept the above Terms</b> and Conditions field.

Abigail Lacayo rimary Tibe: RAINER 3 mployee ID: 0003152 eveke Date: 3/14/1996 Dashboard PeopleSoft Menu	, <b>D</b>	with relevant protect authorizing the heal information to the L 10. Actions you take dur effective the following ju - provided all electr been completed pro	ng UC to provide the health plan teel health information or the health information or hiversity representative. Information of the state of the numary 1 unless otherwise stated numary 2 unless otherwise stated number 2 unless otherwise stated numary 2 unless other			
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Performance Workcente	er	Status	Action	Description	File Name	
Recruiting Workcenter		1	Upload		~	
Forms Library	>					
Quicklinks	>	<				Þ
Help / FAQ	>					
		Action Items				
Edit profile						1 row
🔁 Log out		Acknowledgeme	ent			

Step	Action
103.	Click the <b>Yes</b> list item.
	Yes
104.	<ul> <li>Use the File Attachments section to upload supporting documentation.</li> <li>Use the Upload button to add one file at a time.</li> <li>Use the Add button to create new rows to add additional files if needed.</li> </ul>
105.	Click the Upload button.



imary Title: RAINER 3 Iployee ID: 2003152		File Attachment	
iervice Date: )3/14/1996		You may attach up to 1 file(s) to upload	
Dashboard		🗘 Upload File	
PeopleSoft Menu	>		
Worklist		Cancel Upload	
Bookmarks			
Employee Actions	>		
Manager Actions	>		
Performance Workcent	er		
Recruiting Workcenter			
Forms Library	>		
Quicklinks	>		
Help / FAQ	>		
🖉 Edit profile			
🔁 Log out		Privacy Statement Terms of Use	University of California

Step	Action
106.	Click the Upload File button.
	다 Upload File

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Irganize 🔻 New fold	ler				EE •		
Quick access	^	Name	Date modified	Туре	Size		
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Downloads	<u></u>		10/28/2021 4:03 PM	Microsoft Word Doc	12 KB		
Documents			10/27/2021 3:06 PM 6/2/2021 10:41 AM	Shortcut Internet Shortcut	3 KB 1 KB		
Fictures	<u> </u>		6/2/2021 10:41 AM 12/22/2020 10:22 AM	Shortcut	2 KB		
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ms Library	>						

Step	Action
107.	Double-click the <b>TEST_BirthCertificate</b> file link.
	TEST_BirthCertificate.pdf
108.	Click the <b>Open</b> button.



bigail Lacayo	
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Step	Action
109.	Click the Upload object.
	Upload

bigail Lacayo							
nary Title: AINER 3		File Attachments					_
yee ID: 13152						Add	
: Date: 4/1996	200					1 ro	v
pard		Attachment Uploaded	Action	Description	\$ File	Name	
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ance Workcenter		Acknowledgement					
iting Workcenter			My signature below	indicates I have read and unders	tand the "Terms	and Conditions"	
Library	>			page as well as the eligibility re d. I declare under penalty of per			
cs	>	1		o the best of my knowledge. I us the same as waiving and I will not			
FAQ	>			to check my earnings statements			
rofile							
out		Comments					>

Step	Action
110.	Click the button to the right of the <b>Description</b> field.
	~



Abigail Lacayo	
Primary Title: TRAINER 3	File Attachments
Employee ID: 10003152	Add
Service Date: 03/14/1996	l row Attachment Uploaded Action Description 🕁 File Name
Dashboard	
PeopleSoft Menu >	1 View TEST_BirthCertificate.pd
Worklist	Supporting Documentation
Bookmarks	
Employee Actions >	Action Items
Manager Actions >	1 row
Performance Workcenter	Acknowledgement
Recruiting Workcenter	My signature below indicates I have read and understand the "Terms and Conditions"
Forms Library >	provided in the prior page as well as the eligibility requirements of the benefit plans in which have enrolled. I declare under penalty of perium that all of the above
Quicklinks >	1 Information is true to the best of my knowledge. I understand that if I left a plan section blank, it is the same as waiving and I will not be enrolled in that plan. I agree it
Help / FAQ >	is my responsibility to check my earnings statements to verify my current benefits enrollments and deductions.
🖉 Edit profile	
Dog out	Comments >>

Step	Action
111.	Click the Supporting Documentation list item.
	Supporting Documentation
112.	Click the scrollbar.
	•

Abigail Lacayo		
Primary Title: TRAINER 3		File Attachments
Employee ID: 10003152		Add
ervice Date: 3/14/1996	<b>%</b> D	1 row
Dashboard		Description 💠 Description 💠 File Name 💠 Delete
PeopleSoft Menu	>	Supporting Docur V Supporting Documen TEST_BirthCertificate.pdf Delete
Worklist		4
Bookmarks		
Employee Actions	>	Action Items
Manager Actions	>	1 гом
erformance Workcenter		Acknowledgement
Recruiting Workcenter		My signature below indicates I have read and understand the "Terms and Conditions"
orms Library	>	provided in the prior page as well as the eligibility requirements of the benefit plans in which I have enrolled. I declare under penalty of perjury that all of the above
uicklinks	>	1 Information is true to the best of my knowledge. I understand that if I left a plan section blank, it is the same as waiving and I will not be enrolled in that plan. I agree it
lelp / FAQ	>	is my responsibility to check my earnings statements to verify my current benefits enrollments and deductions.
Edit profile		
Log out		Comments >>

Step	Action
113.	Use the Add button to create new rows to upload additional files if needed.



Step	Action
114.	Click the scrollbar.
	•

Abigail Lacayo	File Attachments
Primary Title: TRAINER 3	Add
Employee ID: 10003152	l row
Service Date: 03/14/1996	Description - Description - File Name - Delete
Dashboard	Supporting Docur v Supporting Documen TEST_BirthCertificate.pdf Delete
PeopleSoft Menu >	4
Worklist	
Bookmarks	Action Items
Employee Actions >	1 row
Manager Actions >	Acknowledgement
Performance Workcenter	My signature below indicates I have read and understand the "Terms and Conditions"
Recruiting Workcenter	provided in the prior page as well as the eligibility requirements of the benefit plans in which I have enrolled. I declare under penalty of perjury that all of the above
Forms Library >	1 information is true to the best of my knowledge. I understand that if I left a plan section blank, it is the same as waiving and I will not be enrolled in that plan. I agree it is my responsibility to check my earnings statements to verify my current benefits
Quicklinks >	is my responsibility to check my earnings statements to verify my current benefits enrollments and deductions.
Help / FAQ >	
Zedit profile	Comments >
Dog out	Previous Save For Later Submit

Step	Action
115.	Click the Acknowledgement button.
	0
116.	Click the button to the right of the <b>Comments</b> field to open the comments text box.



Abigail Lacayo			lrow
Primary Title: TRAINER 3		Acknowledgement	
Employee ID: 10003152			My signature below indicates I have read and understand the "Terms and Conditions" provided in the prior page as well as the eligibility requirements of the benefit plans in
Service Date: 03/14/1996		1	which I have enrolled. I declare under penalty of payiny that all of the above information is true to the best of my knowledge. I understand that If I fef a plan section blank, it is the same as waiving and I will not be enrolled in that plan. Tagre it is my responsibility to check my earnings statements to verify my current benefits
Dashboard			enrollments and deductions.
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Employee Actions	>		
Manager Actions	>		
Performance Workcenter			
Recruiting Workcenter			
Forms Library	>		
Quicklinks	>		Previous Save For Later Submit
Help / FAQ	>		
🖉 Edit profile			
🕀 Log out			Privacy Statement Terms of Use University of California

Step	Action					
117.	If needed, add comments to the form prior to submitting.					
118.	Click the <b>Submit</b> button.					
	Submit					

Abigail Lacayo								
Primary Title: TRAINER 3		+ Add Enrollment Changes: Results Form ID: 72156					5	
Employee ID: 10003152					- shanges nesares			
Service Date: 03/14/1996			Acti	on Item Log				
Dashboard							1 row	
PeopleSoft Menu	>			Acknowledgement	Description	User	Time Stamp	
Worklist					My signature below indicates I have read and understand the "Terms and Conditions" provided in the prior page as well as			
Bookmarks			1	Yes	the eligibility requirements of the benefit plans in which I have enrolled. I declare under penalty of perjury that all of the above information is true to the best of my knowledge. I	10003152	11/04/21	
Employee Actions	>		-		understand that if I left a plan section blank, it is the same as waiving and I will not be enrolled in that plan. I agree it is my	20003232	3:08:13.000000PM	
Manager Actions	>				responsibility to check my earnings statements to verify my current benefits enrollments and deductions.			
Performance Workcenter					carriero cherto chomeno ano deductions.			
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Step	Action
119.	The Action Item Log provides a Time Stamp confirmation.
	Use the <b>Print</b> button to create a PDF of the submitted form to keep for your records.



Step	Action
120.	You have completed a Benefits eForm for a Life Event submitted as a Late Enrollment. End of Procedure.