



# Qualifying Life Event

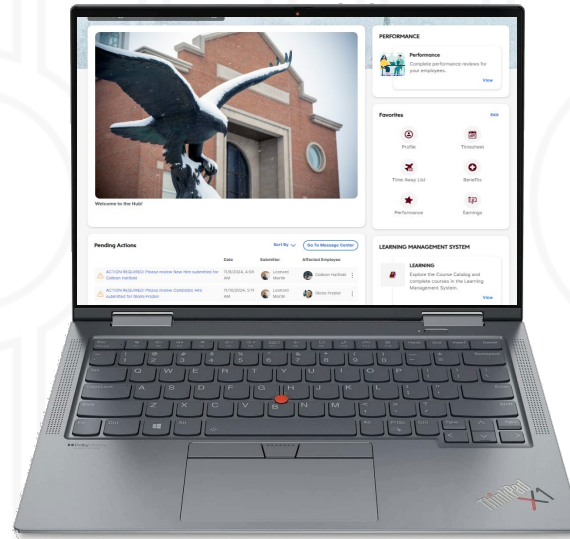
## How to - Life Event Declaration and Enrollment

Updating your  
benefits in *Dayforce*

# Qualifying Life Events

You will sign into Dayforce on a computer through Culver MyApps to complete your Life Event Declaration Form and Life Event Enrollment.

*\*Enrollment is NOT available on the mobile app.*



**\*You will be required to provide evidence of the Life Event to Human Resources.**

[www.culver.org/myapps](http://www.culver.org/myapps) to access Dayforce

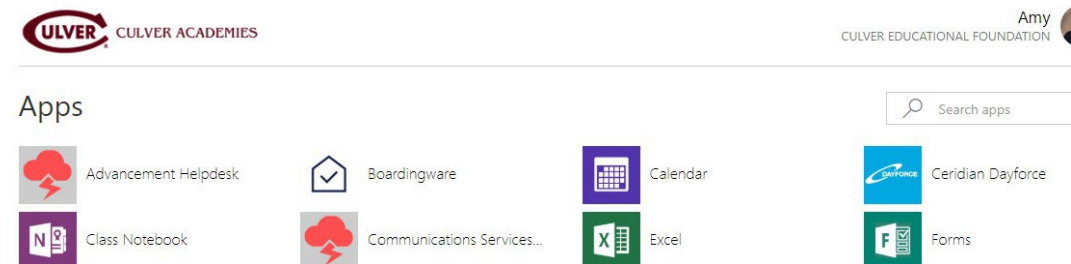
# Life Event Enrollment

Benefit elections in Dayforce cannot be done from the mobile app, but there are several convenient ways to access Dayforce from a computer.

If you have an Academy issued laptop, log into your computer using your standard credentials and click the MyApps icon.

OR

If you are using a shared campus computer or your home computer, you can access Dayforce by logging in at [culver.org/myapps](https://culver.org/myapps) and then selecting the Dayforce icon.



# Life Event Enrollment

The first step is complete a Life Event Declaration form.

To access the Life Event Declaration form, you can either click on the *Forms* icon on your Dayforce home screen, or, if you do not have the icon, you can access your forms by clicking on the *Profile* link in the **Quick Links** sections on your Dayforce home screen, and then clicking on the *Forms* tab located there.

The image displays two screenshots from the Dayforce system. The left screenshot shows a 'Favorites' panel with icons for Benefits, Calendar, Earnings, Forms, and Time Away List. A blue arrow points to the 'Forms' icon. The right screenshot shows the 'Quick Links' section with a 'Profile' link highlighted by a blue arrow. Below the 'Quick Links' is a user profile card for Amy D Coplen (ID: 10004738), and at the bottom, a navigation bar with 'Forms' highlighted by a blue box.

# Life Event Enrollment

In *Forms*, the *Life Event Declaration* form is located in the *Benefits* sections.

Click on the form to open it.

The screenshot displays a web interface for managing forms. At the top, there is a 'Forms' header and a 'My Form Submissions' section with a refresh icon. Below this is an 'Available Forms' section featuring a search bar with 'Search Forms' text, a 'Search' button, and a 'Reset' button. The search results are organized into two expandable categories: 'General Forms (1)' and 'Benefits (3)'. Under 'General Forms (1)', there is one form titled 'COVID-19 Report Work Location'. Under 'Benefits (3)', there are three forms: 'Current Beneficiary Information', 'Current Dependent Information', and 'Life Event Declaration', which is highlighted with a yellow background.

# Life Event Enrollment

The screenshot shows a web browser window titled "Life Event Declaration" for employee Amy D Coplen (ID 10004738). The form includes fields for "Event Date" (set to 1/1/2020) and "Life Event" (with a dropdown menu open showing options like "Birth or Adoption of a Child", "Court Ordered", "Divorce or Legal Separation", etc.). There is also a "Supporting Documents" section and a "Comment" box. At the bottom, there are buttons for "Save Draft", "Submit", "Cancel", and "Print".

The *Life Event Declaration* form will open as a pop-out.

Enter the date of the event in the *Event Date*, then choose the type of event from the dropdown menu under *Life Event*.

It may be helpful to add a note about the event in the *Comment* box.

You can provide your evidence documents to Human Resources in person or by email.

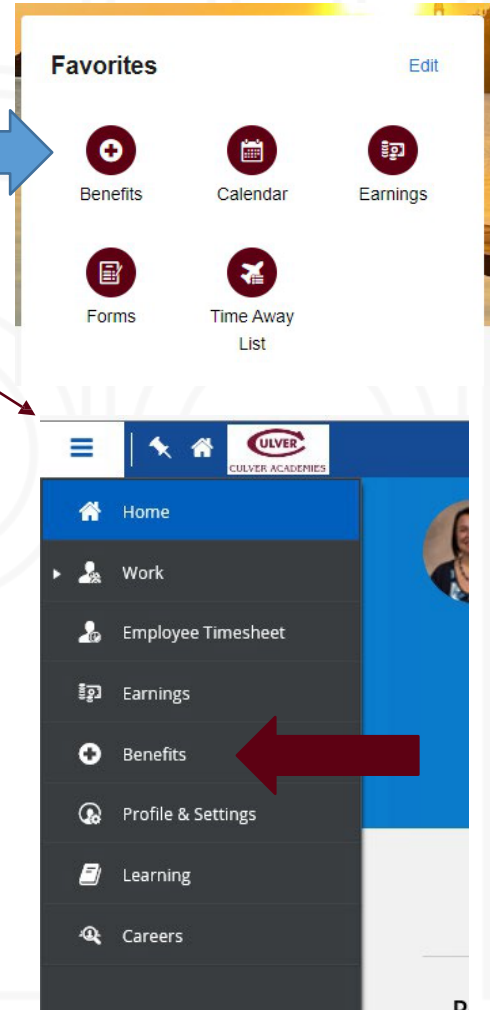
Once you have submitted this form and provided your evidence to Human Resources, you will have the ability to enroll in or update your benefits beginning the date of the event or immediately, if the date has already passed.

**You have 30 days from the Event Date to complete your enrollment.**

# Life Event Enrollment

Once your Life Event Declaration form and evidence of event have been submitted...

You can access your benefits page by either clicking on the *Benefits* icon in your favorites bar...



...or by choosing *Benefits* in your expanded menu.

# Life Event Enrollment

Overview Current Elections Forms History

## Enrollments

Refresh

Below is a listing of available Enrollments. To access an Enrollment select "Start/Continue Enrollment"



**Life Event Enrollment** Due in 28 day(s)

Pending

Start Enrollment

**403B Contribution Change Form**

Available

Start Enrollment

**Employee Association Enrollment/Change**

Available

Start Enrollment

**HSA Employee Payroll Deduction 2024 Election**

Available

Start Enrollment

When you click on *Benefits*, the benefits overview page will open. Here you can see the enrollments that are available to you. The enrollment form you will select is titled ***Life Event Enrollment***.



# Life Event Enrollment

You will be taken to the introduction screen.  
This page contains a list of the benefits in  
which you can enroll.

Click the *Next* button.

The screenshot shows a web application interface for "Life Event Enrollment". At the top, there is a blue header bar with the title "Life Event Enrollment" on the left and "Your Current Elections" with a shopping cart icon and "\$101.12" on the right. Below the header is a progress bar with five steps: "Introduction" (highlighted with a green circle), "Profile", "Elections", "Confirmation", and "Summary". The main content area has a blue background with a family photo. On the left, there is a clipboard icon and the text "Life Event Enrollment" with a subtext "Due in 28 day(s) - 12/31/2024". Below this is a white box containing a list of enrollment options. The list is organized into three sections: "Enrollment", "Health", and "Life and AD&D". The "Enrollment" section includes "Medical", "Dental", and "Vision". The "Health" section includes "Basic Life and AD&D - Employee", "Basic Life and AD&D - Dependents", "Voluntary Life and AD&D - Employee", "Voluntary Life and AD&D - Spouse", and "Voluntary Life and AD&D - Children". The "Life and AD&D" section includes "Medical Flexible Spending Account - Pairs with HRA", "Limited Use Flexible Spending Account - Pairs with HSA", and "Dependent Care Flexible Spending Account". There are "Close" buttons in the top-left and bottom-left corners of the white box, and "Next" buttons in the top-right and bottom-right corners.

# Life Event Enrollment

Life Event Enrollment Your Current Elections

Introduction **Profile** Elections Confirmation Summary

**Profile Forms**

Please review and confirm the profile information below. Upon completion, please proceed by selecting "Next".

Close Save Draft Back

Current Dependent Information

Current Beneficiary Information

**Initial COBRA General Notice**

[Initial COBRA General Notice To New Enrollees in Benefits](#)

On this screen, you will

- add/remove dependents on this screen. **You will need social security numbers for any dependent over the age of 5 years.**
- add/remove your beneficiaries for your life insurance. Please make sure you have the correct information here as you cannot complete your elections for life insurance without at least one beneficiary.
- Acknowledge a COBRA General Notice

# Life Event Enrollment

Introduction Profile Elections Confirmation Summary

Add New Dependent

**Personal Information** \* Required Field

First Name\* Baby  
Middle Name Squeakers  
Last Name\* Mouse  
Gender\* Male  
Relationship\* Child  
Birth Date\* 1/1/2019  
SSN  
Tobacco/Smoker No  
Date last used Tobacco/Smoked  
Student Select an Option...  
Disabled Select an Option...  
Marital Status Select an Option...

**Primary Address** + Add  
Your address will be used as the dependent's primary address, unless a new address is entered.

**Other Address** + Add

**Phone Number** + Add  
Currently does not have a phone number.

Continue Cancel

To enter a dependent, click on the *Add* button. This creates a pop-out window where you will provide your dependent's information. After entering the information, click the *Continue* button. Do this for each dependent you wish to enter.

\*This is the same process for beneficiaries.

To remove a dependent, click the Remove button on the line of the dependent you wish to remove.

Current Dependent Information

View/Edit

Remove

+ Add

Below is the list of your current dependents. You have the ability to Add

Name	Relationship	Birth Date	View/Edit	Remove
Barney Dinosaur	Child	1/1/2021	View/Edit	Remove

# Life Event Enrollment

**You MUST make a selection in each category in order to complete and submit your enrollment.**

Medical

Vision

Dental

Basic Life and AD&D-Employee

Basic Life and AD&D - Dependents (if applicable)

Voluntary Life and AD&D - Employee

Voluntary Life and AD&D - Spouse (if applicable)

Voluntary Life and AD&D - Dependents (if applicable)

Long Term Disability

Medical Flexible Spending Account (Can be selected if choosing HRA)

Limited Use Flexible Spending Account (Can be selected if choosing HSA)

Dependent Care Flexible Spending Account

The screenshot shows the 'Life Event Enrollment' web application interface. At the top, there is a progress bar with five steps: Introduction, Profile, Elections, Confirmation, and Summary. The 'Elections' step is currently active. Below the progress bar, the 'Benefit Elections' section is displayed. It includes a 'Close' button, a 'Save Draft' button, and 'Back' and 'Next' buttons. The 'Health' section contains three expandable options: Medical, Dental, and Vision. The 'Life and AD&D' section has a heading 'Life insurance coverages are provided through the Hartford.' and a note 'You MUST choose a plan or waive it.' Below this are six expandable options: Basic Life and AD&D - Employee, Basic Life and AD&D - Dependents, Voluntary Life and AD&D - Employee, Voluntary Life and AD&D - Spouse, and Voluntary Life and AD&D - Children. The 'Reimbursement' section has a heading 'Reimbursement' and a note 'Flexible Spending can be viewed as a limited purpose loan that is good for one calendar year. Yearly maximum election limits are set annually by the IRS, as are allowable rollover maximums.' Below this are three expandable options: Medical Flexible Spending Account - Pairs with HRA, Limited Use Flexible Spending Account - Pairs with HSA, and Dependent Care Flexible Spending Account. At the bottom, there are 'Close', 'Save Draft', 'Back', and 'Next' buttons.

# Life Event Enrollment

## Benefit Elections

Select your benefit options below. Upon completion, please proceed by selecting "Next".

Close

Save Draft

Back

Next

### Health

The information below is not all inclusive of the benefits offered. Please see the plan summaries for more details.

By clicking on the arrow next to each option at the left you will see the list of each benefit available under that plan.

#### Medical

Medical coverage is available through Anthem Blue Cross and Blue Shield. You can choose the HRA plan (high deductible, Health Reimbursement Account) or HSA plan (high deductible, Health Savings Account).

Under HRA plans, the individual deductible is embedded in family coverage. Network and Non-Network deductibles are combined. Employer contribution for 2024: Single: up to \$1,400 or Family: up to \$2,800. Coinsurance applies after the deductible is met, until out-of-pocket maximum is reached.

Under HSA plans, the single deductible is embedded in family coverage. Single maximum contribution to a health savings account for 2024 is \$4,150 and Family (one or more covered dependents) maximum contribution is \$8,300. These totals include any amount provided by Culver. There is an additional \$1,000.00 "catch-up," if you are age 55 or older. There is a **tax-free benefit** with money going in, money growing and withdrawals for qualified medical expenses. Employer contribution for 2024: Single: up to \$1,400 or Family: up to \$2,800. Coinsurance applies after the deductible is met, until out-of-pocket maximum is reached. **If you have any parts of Medicare you do not qualify for the HSA. If you will be signing up for Medicare within the next year, please contact Amy Coplen in HR to discuss special considerations for the HSA. If you are covered under another medical plan (spouse, parent, etc.) that is not an HSA qualifying HDHP, you are not eligible to receive HSA contributions or to contribute to an HSA.**

You MUST choose a plan or waive coverage.

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

Option Name Ascending

Compare Selected

Option	Deductible	Prescriptions	Office Visits	Urgent Care	Sele...
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Each section of the election screen provides instructions and additional information about that benefit.

# Life Event Enrollment

All options for which you qualify are listed for each benefit. It includes information on the cost to you per pay period (blue) and the cost to Culver (black). You can also view which dependents qualify. Some basic information about each option is also displayed. To choose the plan, you click in the check box on the left-hand side of the screen in the *Option* column.

Life Event Enrollment

Introduction Profile Elections Confirmation Summary

Option Name Ascending

Option	Deductible	Prescriptions	Office Visits
<input type="checkbox"/> Employee & Children-Anthem Blue Access HRA \$880.29 \$81.78 Start Date: 12/1/2024 <a href="#">Show Details</a>	\$6,000 Once the deductible is met then you have prescription co-pays and a medical co-insurance of 20% to the \$8,000 out-of-pocket max	Once the \$6,000 deductible is met then you have prescription co-pays on the HRA Plan.	Plan pays 80% after deductible In-Network or 70% Out-of-Network.
<input type="checkbox"/> Employee & Children-Anthem Blue Access HSA \$666.41 \$58.74 Start Date: 12/1/2024 <a href="#">Show Details</a>	\$6,000 Once the deductible is met then you have prescription co-pays and a medical co-insurance of 20% to the \$8,000 out-of-pocket max	You can pay for prescriptions out-of-pocket or use your HSA debit card. Prescriptions are subject to a tiered co-pay system after deductible.	You can pay for the office visit out-of-pocket or use your HSA debit card for office visits. Plan pays 80% after deductible In-Network or 50% Out-of-Network.
<input type="checkbox"/> Employee & Family-Anthem Blue Access HRA \$881.10 \$113.37 Start Date: 12/1/2024 <a href="#">Show Details</a>	\$6,000 Once the deductible is met then you have prescription co-pays and a medical co-insurance of 20% to the \$8,000 out-of-pocket max	Once the \$6,000 deductible is met then you have prescription co-pays on the HRA Plan.	Plan pays 80% after deductible In-Network or 70% Out-of-Network.
<input checked="" type="checkbox"/> Employee & Family-Anthem Blue Access HSA \$668.61 \$80.95 Start Date: 12/1/2024 • 2 Dependents <a href="#">Show Details</a>	\$6,000 Once the deductible is met then you have prescription co-pays and a medical co-insurance of 20% to the \$8,000 out-of-pocket max	You can pay for prescriptions out-of-pocket or use your HSA debit card. Prescriptions are subject to a tiered co-pay system after deductible.	You can pay for the office visit out-of-pocket or use your HSA debit card for office visits. Plan pays 80% after deductible In-Network or 50% Out-of-Network.
<input type="checkbox"/> Employee & Spouse-Anthem Blue Access HRA \$871.64 \$90.44 Start Date: 12/1/2024 <a href="#">Show Details</a>	\$6,000 Once the deductible is met then you have prescription co-pays and a medical co-insurance of 20% to the \$8,000 out-of-pocket max	Once the \$6,000 deductible is met then you have prescription co-pays on the HRA Plan.	Plan pays 80% after deductible In-Network or 70% Out-of-Network.
<input type="checkbox"/> Employee & Spouse-Anthem Blue Access HSA \$660.60 \$64.54 Start Date: 12/1/2024 <a href="#">Show Details</a>	\$6,000 Once the deductible is met then you have prescription co-pays and a medical co-insurance of 20% to the \$8,000 out-of-pocket max	You can pay for prescriptions out-of-pocket or use your HSA debit card. Prescriptions are subject to a tiered co-pay system after deductible.	You can pay for the office visit out-of-pocket or use your HSA debit card for office visits. Plan pays 80% after deductible In-Network or 50% Out-of-Network.
<input type="checkbox"/> Employee Only-Anthem Blue Access HRA \$231.45 \$24.86 Start Date: 12/1/2024 <a href="#">Show Details</a>	\$3,200 Once the deductible is met then you have prescription co-pays and a medical co-insurance of 20% to the \$4,000 out-of-pocket max	Once the \$3,200 deductible is met then you have prescription co-pays on the HRA Plan.	Plan pays 80% after deductible In-Network or 70% Out-of-Network.
<input type="checkbox"/> Employee Only-Anthem Blue Access HSA \$175.42 \$17.78 Start Date: 12/1/2024 <a href="#">Show Details</a>	\$3,200 Once the deductible is met then you have prescription co-pays and a medical co-insurance of 20% to the \$4,000 out-of-pocket max	You can pay for prescriptions out-of-pocket or use your HSA debit card. Prescriptions are subject to a tiered co-pay system after deductible.	You can pay for the office visit out-of-pocket or use your HSA debit card for office visits. Plan pays 80% after deductible In-Network or 50% Out-of-Network.
<input type="checkbox"/> Waive Medical Coverage Start Date: 12/1/2024 <a href="#">Show Details</a>			

# Life Event Enrollment

## Life and Disability

### Basic Life and AD&D - Employee

#### Life/AD&D are covered with OneAmerica.

- You must elect 1 option(s) in the election set
- The option "Basic Life Employee" may be su

Option Name Ascending

#### Option

- Basic Life Employee** \$3.67  
Start Date: 1/1/2020 \$0.66  
• Coverage  
• 2 Beneficiaries
- Basic AD&D Employee** \$0.69  
Start Date: 1/1/2020 \$0.00  
• Coverage  
• 2 Beneficiaries

Show Details

- Waive Basic Employee Life**  
Start Date: 1/1/2020

In each of the Life and AD&D plans, when you click in the box to elect the coverage, you will receive a pop-up box to select beneficiaries (these are the ones you entered on the previous screen).

#### Option Details

##### 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%.

+ Add

Beneficiaries	Type*	Percentage*	Remove
	Contingent	100.00	
	Primary	100.00	

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

#### Basic AD&D Employee

##### Coverage Amount

Your Coverage has been preset to the following amount.

Your previously elected coverage was !

##### 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%.

+ Add

Beneficiaries	Type*	Percentage*	Remove
	Contingent	100.00	
	Primary	100.00	

# Life Event Enrollment

**New Hire Benefits Enrollment** Your Current Elections \$0.00

Introduction Profile **Elections** Confirmation Summary

Option Name Ascending Compare

Option	Voluntary Life cover	Option Details												
<input checked="" type="checkbox"/> <b>Voluntary AD&amp;D Employee</b> \$0.01 Start Date: 8/14/2023 * • \$60,000.00 Coverage * • 2 Beneficiaries <input checked="" type="checkbox"/> <b>Voluntary Life Employee</b> \$3.09 Start Date: 8/14/2023 * • \$60,000.00 Coverage * • 2 Beneficiaries <a href="#">Show Details</a>	An eligible employee full-time permanent employee authorized work and reside in the United States. Eligible employees must work or more hours per week and cannot be considered part-time, temporary seasonal employee. If eligible employee is not actively at work on the individual effective date group insurance coverage for the employee will exist until he/she returns to full-time active work.  A flat amount in \$10,000 increments with a Minimum of \$10,000 and a Maximum of \$500,000 to exceed 5 times your annual base salary, rounded to the next higher \$10,000.	<b>Voluntary AD&amp;D Employee</b>  Coverage Amount Select the desired coverage amount below. You may use the slider or the buttons to select your coverage amount. Minimum Coverage: \$10,000.00 Maximum Coverage: \$270,000.00 Amount in units of: \$10,000.00 <input type="text" value="60,000"/> \$10,000.00 <span style="float: right;">\$270,000.00</span> • Your previously elected coverage was \$60,000.00.  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%. + Add <table border="1"> <thead> <tr> <th>Beneficiaries</th> <th>Type*</th> <th>Percentage*</th> <th>Remove</th> </tr> </thead> <tbody> <tr> <td></td> <td>Primary</td> <td>50.00</td> <td></td> </tr> <tr> <td></td> <td>Primary</td> <td>50.00</td> <td></td> </tr> </tbody> </table>	Beneficiaries	Type*	Percentage*	Remove		Primary	50.00			Primary	50.00	
Beneficiaries	Type*	Percentage*	Remove											
	Primary	50.00												
	Primary	50.00												
<input type="checkbox"/> <b>Waive Voluntary Life and AD&amp;D Employee</b> Start Date: 8/14/2023	No Coverage.	No Coverage.												

**Your Current Elections**

- Life and Disability**
  - Basic AD&D Employee** Employer \$1.06
    - Effective Start: 7/1/2023
    - Coverage Amount: \$106,000.00
    - Beneficiaries: 2 People
  - Basic Life and AD&D Dependent** You \$0.34, Employer \$0.59
    - Effective Start: 1/1/2022
    - Coverage Amount: \$5,000.00
    - Dependents: 2 People
  - Basic Life Employee** You \$1.01, Employer \$5.62
    - Effective Start: 7/1/2023

[Save](#) [Cancel](#)

\*The coverage amount on the Voluntary AD&D election must match the amount on the Voluntary Life election.

If you do not make them the same amount, HR will reset your Voluntary AD&D coverage to match whatever you chose on the Voluntary Life election.



# Life Event Enrollment

**New Hire Benefits Enrollment** Your Current Elections \$0.00

Introduction **Profile** Elections Confirmation Summary

Option Name Ascending

**Option**

- Voluntary AD&D Employee**
  - Start Date: 8/14/2023
  - \$60,000.00 Coverage
  - 2 Beneficiaries
- Voluntary Life Employee**
  - Start Date: 8/14/2023
  - \$60,000.00 Coverage
  - 2 Beneficiaries

Show Details

**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: \$270,000.00  
Amount in units of: \$10,000.00  
60,000  
\$10,000.00 \$270,000.00  
• Your previously elected coverage was \$60,000.00.

**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%.

Beneficiaries	Type*	Percentage*	Remove

+ Add

to exceed 3 times your annual base salary, rounded to the next higher \$10,000.

**Waive Voluntary Life and AD&D Employee**  
Start Date: 8/14/2023

No Coverage. No Coverage. No Coverage. No Coverage. No Coverage.

To view the per pay cost at different coverage amounts, you will need to make the change on the Voluntary Life Employee election.

If you do not have existing Voluntary Employee Life and AD&D, and you newly elect it, you will be required to complete an Evidence of Insurability (EOI) questionnaire. Coverage will be subject to approval by the Hartford.

**\*The same applies to newly elected Voluntary Spouse coverage.**

If you elect more than a \$10,000 increase on existing Voluntary Employee Life and AD&D, you will be required to complete an EOI questionnaire. Coverage increase will be subject to approval by the Hartford.

**\*Applies to increases over \$5,000 for existing Voluntary Spouse coverage.**

# Life Event Enrollment

## Reimbursement

Flexible Spending can be viewed as a limited purpose loan that is good for one calendar year.

Yearly maximum election limits are set annually by the IRS, as are allowable rollover maximums.

- ✓ Medical Flexible Spending Account - Pairs with HRA
- ✓ Limited Use Flexible Spending Account - Pairs with HSA
- ✓ Dependent Care Flexible Spending Account

## Reminder:

**Medical Flexible Spending can only be elected by those enrolled in the HRA.**

**Limited Use Flexible Spending is available to those who elect the HSA.**

# Life Event Enrollment

Once you have completed your elections, you will hit the *NEXT* button at the bottom of the screen. You will be brought to the *Confirmation* page. This page will show you the elections you have made, which, if any, dependents the election applies to, and both the employer and your cost for each election. This page is to review your elections prior to submitting your enrollment.

Your enrollment is NOT complete or submitted yet!!!!

**New Hire Benefits Enrollment** Your Current Elections

Introduction  Profile  Elections  **Confirmation**  Summary

**Confirmation**  
Please review the summary of your elections. You are not enrolled until you click the 'Submit Enrollment' button and your choices are approved.

**Health**

**Medical**

<b>Employee &amp; Children-Anthem Blue Access HRA</b> Effective From 7/12/2019	<b>Dependents:</b> Mouse, Baby S	Employer Cost: \$600.10 <b>Your Cost: \$52.64</b> Every Regular Run
<b>Medical Plan HRA - Family</b> Effective From 7/12/2019 \$0.00 Annual Contribution		Employer Cost: \$200.00 <b>Your Cost: \$0.00</b>

**Dental**

<b>Employee &amp; Children-Anthem Dental Complete</b> Effective From 7/12/2019	<b>Dependents:</b> Mouse, Baby S	Employer Cost: \$32.36 <b>Your Cost: \$4.07</b> Every Regular Run
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**Vision**

<b>Employee &amp; Children-Anthem Blue Vision</b> Effective From 7/12/2019	<b>Dependents:</b> Mouse, Baby S	Employer Cost: \$5.71 <b>Your Cost: \$0.55</b> Every Regular Run
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**Life and AD&D**

**Basic Life and AD&D - Employee**

<b>Basic AD&amp;D Employee</b> Effective From 7/12/2019 \$84,000.00 in coverage	<b>Beneficiaries</b> (Primary) 100.00% Mouse, Baby S	Employer Cost: \$0.78 <b>Your Cost: \$0.00</b>
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# Life Event Enrollment

The screenshot shows a web form for Life Event Enrollment. It contains several sections for selecting or waiving benefits:

- Waive Limited Use FSA**  
Effective From 10/28/2024  
\$0.00 Annual Contribution  
Your Cost: \$0.00
- Dependent Care Flexible Spending Account**
- Waive Dependent Care FSA**  
Effective From 10/28/2024  
\$0.00 Annual Contribution  
Your Cost: \$0.00

At the bottom of the form, there is a summary section with a large empty box and the text "Estimated Total Annual Amount: \$". Below this are four buttons: "Close", "Save Draft", "Back", and "Submit Enrollment". The "Submit Enrollment" button is circled in red. Two large red arrows point towards this button, one from above and one from below.

**Your elections are NOT submitted until you push the *Submit Enrollment* button.**

# Life Event Enrollment

When you see this screen, your enrollment is complete.

Life Event Enrollment Your Current Elections

Introduction Profile Elections Confirmation Summary

Congratulations! Your enrollment has been submitted.

Print Return to Benefits

**Next Steps**

**Remember** to go to the [TIAA website \(www.tiaa-cref.org\)](http://www.tiaa-cref.org) and list your **beneficiaries**.

**Check** your **personal and emergency contact** information.

**Open Enrollment** is the month of November each year to make your benefit changes. The changes are effective on January 1st. You **must** sign up for a Flexible Spending account **each year** if you want an account.

**Lifestyle Changes** will allow you to make benefit changes during the year. You will need to provide us with the **documents**: marriage certificate, divorce decree, birth certificate and loss of coverage under another plan.

**Wellness Screenings** are provided by Culver each October and November for employees and spouses on the Culver health plans. This is something that **you need to complete each year**.

# Life Event Enrollment

**For questions or assistance, please  
contact Amy Coplen, HR Generalist  
Ext. 8313**

[amy.coplen@culver.org](mailto:amy.coplen@culver.org)