Open Enrollment Instructions

1. When logging in to Dayforce, you will select the "Employee with WFM" or "Employee with WFM Clock" role, whichever is designated for you and click Next.



2. Next you will navigate to the Menu at the top left of the screen.



3. From your menu, please click on Benefits.



4. Once in Benefits, you will need to select your enrollment type. You will select Open Enrollment and click "Start Enrollment"



5. From there you will see an introduction screen to begin enrollment. Click Next.

Open Enrollment					Your Current Elections 🗰 \$0.00 🗙			
	O	Profile	Elections	Confirmation	Summary			
Ê	Open Enrollment Due in 14 day(s) - 11/15/2022							
Close					Next			
Welcome to Open Enrollment.			Enrollment					
					Secondary Coverage Acknowledgement			
					Secondary Coverage Acknowledgement			
					Health			
					Medical			
					Dental			
					Vision			
					Life & Disability			
					Basic Life Basic AD&D			
					Long Term Disability			
					Voluntary Short Term Disability			
					Voluntary Life and AD&D Insurance			
					Reimbursements			
					Healthcare Flexible Spending Account (FSA)			
					Dependent Care Flexible Spending Account (FSA)			
					Limited Purpose FSA			
Close					Next			

6. First you will be prompted to add any beneficiaries or dependents. If you are enrolling anyone else to be covered by any of the coverage options, you will add them as a dependent. For life insurance, you will need to add at least one beneficiary. If the person added will be both a dependent and a beneficiary, please add them to each section.

Open Enrollment						Your Current Elections	쓦	\$0.00	×
	Introduction	Profile	Elections	Confirmation	Summary				
Profile Forms									
Please review and confirm the profil	le information below. Upon com	pletion, please proce	ed by selecting "Nex	rt".					
Close Save Draft						Bac	:k	Next	
	mation								
	mation								
Current	Beneficiary(s)								
Below is the	e list of your current beneficiary(s)	. You have the ability	to Add or Remove a	beneficiary. Limited edit	ting is also available.				
🕂 Add	X Remove								
	Beneficiary	Relationship		Birth Date	Vie	ew/Edit			
					1 V	/iew/Edit			
					/ V	/iew/Edit			
					/ V	/iew/Edit			
오 Current Dependent Infor	mation								
Close Save Draft						Bac	:k	Next	

7. You will then begin your enrollment. On each screen you will be prompted to either enroll or waive coverage. Once all elections are made you can review and submit your benefit enrollment.

Open Enrollment						Your Current Elections	ŵ	\$34.96	×
									
	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.									
Close Save Draft						Back Print	Sub	mit Enrollm	ent