



Shepherd  
Center

## Submit Elections Confirmation

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06/25/2021

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New Hire for Jessica Gilliam

Initiated On: 06/21/2021

Submit Elections By: 07/21/2021

Event Date: 06/21/2021

Total Employee Cost/Credit

\$35.07 Biweekly Cost

You may choose to **Print** a copy of your confirmation or you can view your benefit elections at any time in the Workday App or on your Workday Desktop.

### Elected Coverages

Benefit Plan	Coverage Begin Date	Deduction Begin Date	Coverage	Calculated Coverage	Dependents	Beneficiaries	Employee Cost (Biweekly)	Employer Contribution (Biweekly)
Medical - Cigna HDHP Choice QHP	07/21/2021	07/21/2021	Employee Only				\$25.00	\$305.86
Dental - Cigna DPO No Ortho	07/21/2021	07/21/2021	Employee Only				\$7.50	\$10.39
Vision - EyeMed VIS Base Plan	07/21/2021	07/21/2021	Employee Only				\$2.57	
Short Term Disability (STD) - UNUM (Employee)	07/21/2021	07/21/2021	60% of Salary					\$18.67
Long Term Disability (LTD) - UNUM (Employee)	07/21/2021	07/21/2021	60% of Salary					\$4.83
Basic Life & AD&D - UNUM (Employee)	07/21/2021	07/21/2021	\$50,000	\$50,000.00		Jeff Gilliam Tonya Gilliam		\$1.64
Total:							\$35.07	\$341.39

### Waived Coverages

Plan Type
Accident Policy
Hospital Indemnity
Health Savings Account
Healthcare FSA
Dependent Care FSA
Limited Purpose FSA
Supplemental Life and AD&D
Spouse Life & AD&D
Child Life and AD&D
Critical Illness
ID Shield
Legal Shield Plan
ID / Legal Shield Combined Family Plan
Commuter Savings Account



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Plan Type			
ID / Legal Shield Combined Employee Plan			
Beneficiary Designations			
Benefit Plan	Requires Beneficiary	Beneficiaries	
		Beneficiary	Primary Percentage / Contingent Percentage
Basic Life & AD&D - UNUM (Employee)	Yes	Jeff Gilliam	Primary Percentage 50
		Tonya Gilliam	Primary Percentage 50

Electronic Signature

### Legal Notice: Please Read

Your name and Password are considered your "Electronic Signature" and will serve as your confirmation of the accuracy of the information being submitted. When you check the "I Agree" checkbox, you are certifying that:

- You understand and approve the enrollment as indicated above. You hereby authorize the company to deduct from your earnings the amount of your premiums or other contributions (if any) for the benefit options elected above.
- You understand and acknowledge that under the Internal Revenue Code regulations rules, you may not change your benefit elections during the calendar year unless you experience a qualified change in status.
- You understand that you will not pay income tax or FICA tax on your medical, dental, vision, and Flexible Spending Account contributions. These benefits are paid through the Flexible Benefits Plan on a pre-tax basis.
- Each year, during the annual enrollment period, you will have the option to change certain coverages whether or not you have had a qualified change in status event during the calendar year.
- If you decline medical insurance enrollment for yourself or your dependents, including your spouse, because of other medical insurance coverage, you may in the future be able to enroll yourself or your dependents in this plan, provided you request enrollment within 31 days after your other coverage ends. In addition, if you have a new spouse or dependent as a result of marriage, birth, or adoption, you may be able to enroll yourself, your spouse and your dependents, provided you request enrollment within 31 days after the marriage, birth or adoption.
- If you have enrolled a Spouse in the Medical plan benefits, you are certifying that your spouse is not eligible for coverage through his/her employer.
- If your spouse later becomes eligible for coverage through his/her employer, you are responsible for notifying HR within 31 days. At that time, your spouse will be removed from your medical plan coverage.
- You understand that if it is found that you are covering or have covered a spouse who is not eligible for coverage under Shepherd's medical plan, then you will be legally responsible for reimbursing benefits provider(s) for claims paid on your

spouse's behalf, as well as the employer portion of premiums for the amount of time they were covered but not eligible for coverage, without further action in a court of competent jurisdiction.

**Signed By** Jessica Gilliam  
**Date** 06/25/2021