

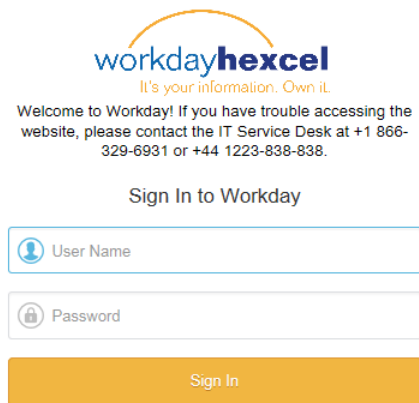
Hexcel's Workday User Manual

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ADD OR CHANGE BENEFICIARY

At any time during the year, you may change your Beneficiary for life insurance or accidental death and dismemberment (AD&D).

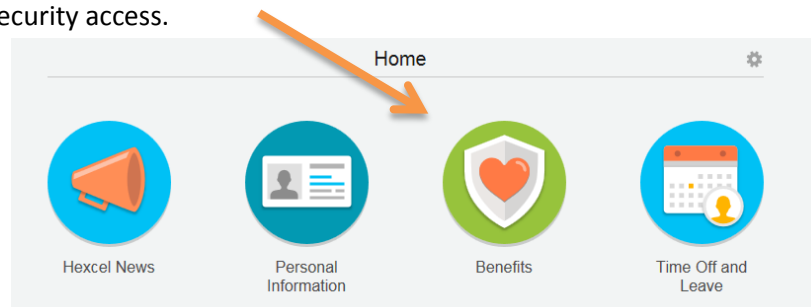
Note: To update or change your Beneficiary designation for the Hexcel 401(k) plan, go directly to the Fidelity website at www.401k.com



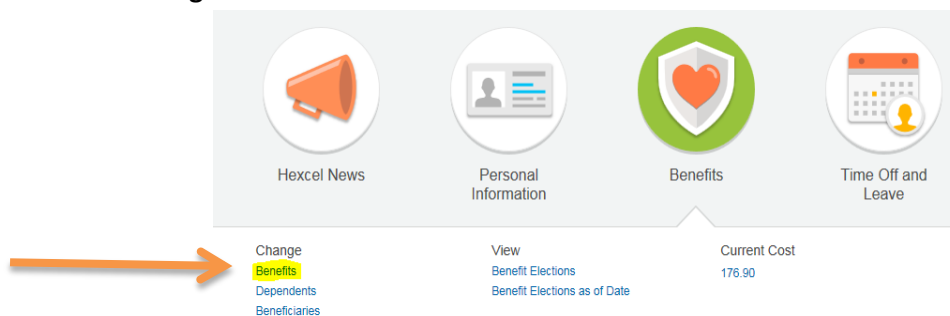
1. Sign in to Workday

2. Click the **Benefits** Worklet

Note: The home page configuration may differ from the one shown depending on the requestor's security access.



3. Click the **Change Benefits** link below



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4. Click **Update Beneficiaries** and enter the **Benefit Event Date**. Since this Employee is enrolled in Basic AD&D, Basic Group Life, Supplemental Life and Voluntary AD&D, she'll be able to make Beneficiary changes to those plans.

Change Benefits [blurred]

Welcome to your Hexcel Benefits Enrollment. You reported [blurred]. Please contact your local HR team if you have questions: [blurred]. Supporting documentation is required for life events of B[blurred].

Benefit Event Type * Birth/Adoption
 Divorce/Legal Separation
 Marriage
 Medicare Eligibility Change
 Update Beneficiaries
 Update Spousal Surcharge


Benefit Event Date * 06/29/2014

Submit Elections By 07/03/2014

Enrollment Offering Types Basic AD&D
Basic Group Life
Supplemental Life
Voluntary AD&D EE


Attachments


+ Attachment

5. An attachment is not required. Enter any comments you may have and click  Submit
6. This next screen confirms that you have submitted your **Benefit Event**. If you click **Open** on this page, you will land on the first step of the process where you will update your Beneficiary.


You have submitted **Benefit Event:** [blurred] on 06/29/2014

Up Next Do Another

 [blurred]
Change Benefit Elections
Due Date 07/01/2014

 Open Change Benefits

Details and Process

 Done

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7. If you wish to complete the task at a later date or time, click **Done**
8. The task will be saved and the Employee will have an action item in their mail box the next time they sign in.
9. You're now on the **Change Benefit Elections – Update Beneficiaries** page. There are 3 steps. Here, you'll be allowed to add, delete or modify your Beneficiary information.
 - The first step is displaying the insurance options you are currently enrolled in. Click **Continue** to proceed.



Note: The page will not allow you to make a change to the coverage amount.

Change Benefit Elections Update Beneficiaries for [Employee Name] - Step 1 of 3 ...

Event Date 06/29/2014
Initiated On 06/29/2014
Submit Elections By 07/03/2014

Health Information

Have you used tobacco in any form in the past 12 months?

Yes
 No

Insurance Plan Dependencies and Coverage Limitations

Insurance Elections 4 items

Benefit Plan	*Elect / Waive	Coverage Level	Covers Dependents	Calculated Coverage
Basic Group Life - Reliance (max \$50k) (Employee)	<input checked="" type="radio"/> Elect <input type="radio"/> Waive	1 X Salary		\$50,000.00
Supplemental Life - Reliance (Employee)	<input checked="" type="radio"/> Elect <input type="radio"/> Waive	5 X Salary		\$275,000.00
Basic AD&D - Reliance (\$50k max) (Employee)	<input checked="" type="radio"/> Elect <input type="radio"/> Waive	1 X Salary		\$50,000.00
Voluntary AD&D EE - Reliance (Employee)	<input type="radio"/> Elect <input checked="" type="radio"/> Waive			

Continue **Save for Later** **Cancel**

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10. In this next step, you can add or remove a Beneficiary by clicking on the **+** or **-** sign

Change Benefit Elections Update Beneficiaries for [Employee Name] - Step 2 of 3

Event Date: 06/29/2014
Initiated On: 06/29/2014
Submit Elections By: 07/03/2014

Total Cost: **\$25.26 Bi-weekly Cost**
Total Credits: **\$0.00 Bi-weekly**

A primary beneficiary receives a benefit if you die. A contingent beneficiary receives a benefit only if your primary beneficiary (ies) are deceased. Total Primary must equal 100%. Total Contingent must equal 100%.

If naming a Trust or Estate, provide the full name of the Estate and Trust. If designating a non-profit, charitable organization, include the full address. If the beneficiary is not an eligible dependent under our health plans, provide the SSN (if available) and address. If the beneficiary is an eligible dependent under our health plans, you will need to provide the SSN. If you want to irrevocably transfer all ownership rights and privileges under this life and/or AD&D insurance policy, see Human Resources for an Absolute Assignment form.

You do not need to enter anything if you do not want to make any changes to your beneficiary designation. However, the designation you submit will replace all previous beneficiary designations for Hexcel Corporation's Life and AD&D insurance.

Beneficiary Designations 3 items

Benefit Plan	Requires Beneficiary	Beneficiaries	
		*Beneficiary	*Primary Percentage / Contingent Percentage
Basic Group Life - Reliance (max \$50k) (Employee)	<input checked="" type="checkbox"/>	<input style="background-color: yellow;" type="button" value="+"/>	<input type="text" value=""/> <input checked="" type="radio"/> Primary Percentage <input type="text" value="100"/> <input type="radio"/> Contingent Percentage <input type="text" value="0"/>
Basic AD&D - Reliance (\$50k max) (Employee)	<input checked="" type="checkbox"/>	<input style="background-color: #ccc;" type="button" value="+"/>	<input type="text" value=""/> <input checked="" type="radio"/> Primary Percentage <input type="text" value="100"/> <input type="radio"/> Contingent Percentage <input type="text" value="0"/>
Supplemental Life - Reliance (Employee)	<input checked="" type="checkbox"/>	<input style="background-color: #ccc;" type="button" value="+"/>	<input type="text" value="Bobb, Bobby"/> <input checked="" type="radio"/> Primary Percentage <input type="text" value="100"/> <input type="radio"/> Contingent Percentage <input type="text" value="0"/>

11. To add a Beneficiary click **+**, then **📄** and click on the option to **Create**. If the Beneficiary has already been created in Workday, then click on **Beneficiary Persons** and a list of your beneficiaries will display.

search

- Beneficiary Persons
- Trusts
- Create**

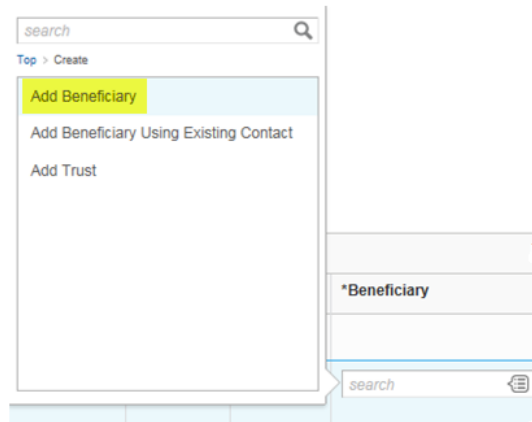
*Beneficiary

search

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12. Then click **Add Beneficiary**



13. Complete the categories highlighted in yellow and click the next tab and continue filling out the required information



Do not click  until all tabs have been completed

Add Beneficiary Group: Health Plan (700022) ...

Enter your beneficiary information.

Relationship * Sibling

Use as Beneficiary

Date of Birth 08/01/1975

Age (empty)

Gender x Female

Uses Tobacco

Full-time Student

Student Status Start Date

Student Status End Date

Disabled

Allow Duplicate Name

Legal Name | Contact Information | National IDs | Additional Government IDs

Country * United States of America


Prefix search

First Name * [Redacted]

Middle Name

Last Name * [Redacted]

Suffix search

 **Cancel**

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14. In the tab labeled **Contact Information** enter any field that has a * next to it. Continue to the next tab, called National IDs

Legal Name **Contact Information** National IDs Additional Government IDs

Phone

Address

Use Existing Address

Country *

Address Line 1 *

Address Line 2

City *

State *

Postal Code *

County

Usage

Type *
 Home

Primary Work

Primary Home

Use For
 Mailing
 Street Address

Visibility

Comments


Email

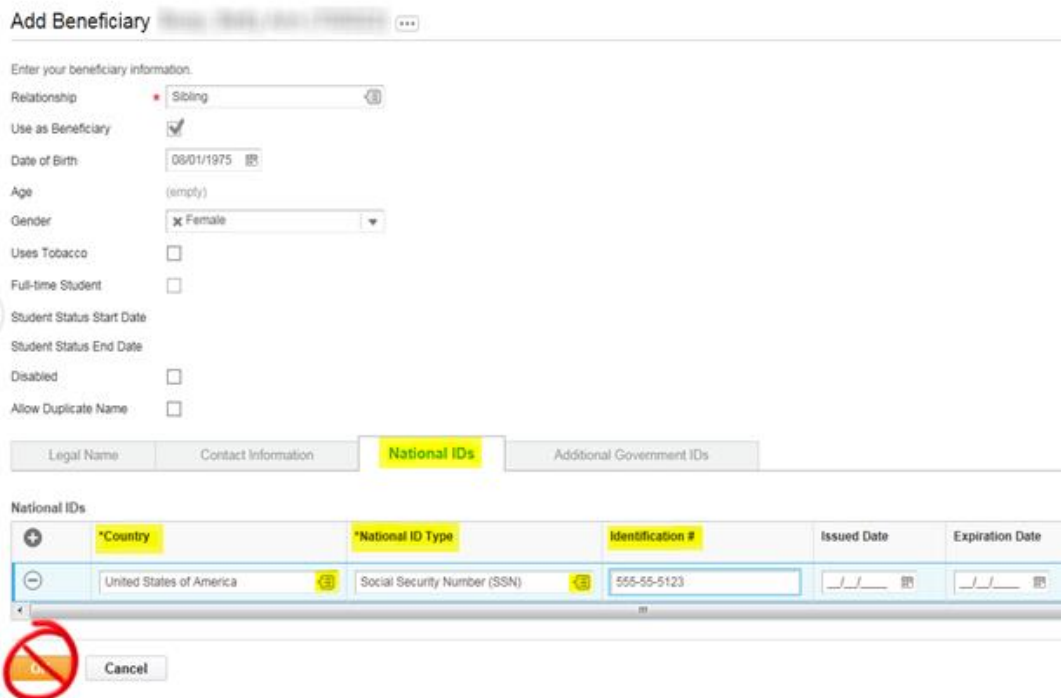
Instant Messenger

Web Address

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15. In the **National IDs** tab, enter the Country, National ID type and Social Security Number. A drop down list appears if you click on .
16. Continue to next tab if there are any additional government IDs you wish to add
17. Once all tabs are completed, now click OK to proceed.




Add Beneficiary Cancel OK ...


Enter your beneficiary information.

Relationship ▾ Sibling 

Use as Beneficiary

Date of Birth 

Age (empty)

Gender ▾ Female 

Uses Tobacco

Full-time Student

Student Status Start Date




Student Status End Date


Disabled

Allow Duplicate Name

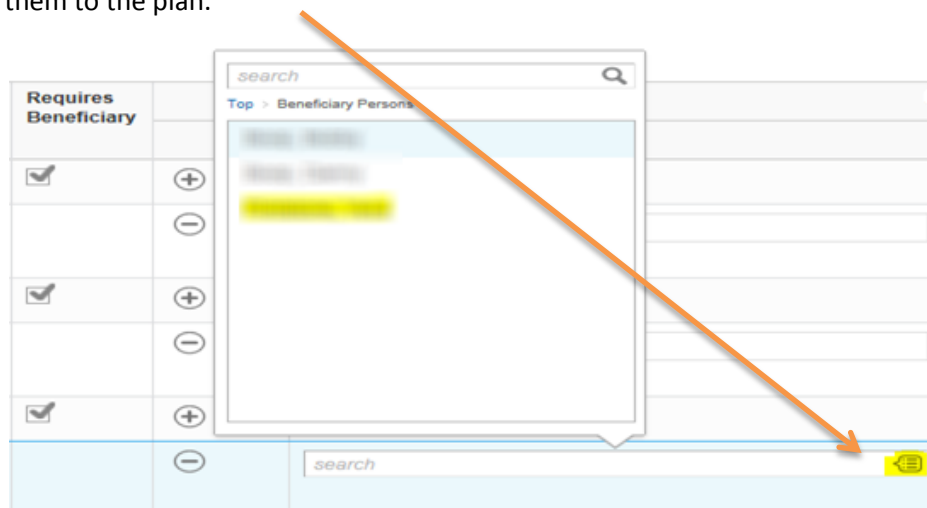
Legal Name | Contact Information | **National IDs** | Additional Government IDs








National IDs

	*Country	*National ID Type	Identification #	Issued Date	Expiration Date
	United States of America 	Social Security Number (SSN) 	555-55-5123	<input type="text" value=""/>	<input type="text" value=""/>

 Cancel


18. Now that the Beneficiary has been added, you can now attach it to one or all of the insurance plans. Click on the **Prompt** icon to see a drop down list of your dependents and double click to attach them to the plan.



Requires Beneficiary		
<input checked="" type="checkbox"/>		
<input type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input type="checkbox"/>		<input type="text" value="search"/> 

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20. The final step displays the insurance plan and the name of the Beneficiary. Verify the information is correct. To view and verify waived coverages and beneficiary designations, hit the arrow key to expand the section.
21. Once all information is correct, hit 

Change Benefit Elections Benefit Elections Review for Update Beneficiaries - **Step 3 of 3** ...

Worker [View Details \(1/1/2014\)](#)

Event Date 06/29/2014
Initiated On 06/29/2014
Submit Elections By 07/03/2014

Evidence of Insurability
Important: You have Evidence of Insurability pending for a previous enrollment. Your insurance elections may be affected based on that process.

Elected Coverages 3 items


Benefit Plan	Coverage Begin Date	Deduction Begin Date	Coverage	Calculated Coverage	Dependents	Beneficiaries
Basic Group Life - Reliance (max \$50k) (Employee)	05/01/2014	05/01/2014	1 X Salary	\$50,000.00		View Details
Supplemental Life - Reliance (Employee)	05/01/2014	05/01/2014	5 X Salary	\$275,000.00		View Details
Basic AD&D - Reliance (\$50k max) (Employee)	05/01/2014	05/01/2014	1 X Salary	\$50,000.00		View Details

Waived Coverages

Beneficiary Designations

Attachments

Attachment	Comment	File
No Data		



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22. Click  on the **Submit Elections Confirmation** page.

Submit Elections Confirmation Update Beneficiaries for [Employee Name] [Employee ID]

Initiated On 05/29/2014
 Submit Elections By 07/03/2014
 Event Date 05/29/2014

You have successfully submitted your benefits enrollment. Select Print to launch a printable version of this summary for your records.

Evidence of Insurability
 Important: You have Evidence of Insurability pending for a previous enrollment. Your insurance elections may be affected based on that process.

Elected Coverages 3 items




Benefit Plan	Coverage Begin Date	Deduction Begin Date	Coverage	Calculated Coverage	Dependents	Beneficiaries	Employee Cost (Bi-weekly)	Employer
Basic Group Life - Reliance (max \$50k) (Employee)	05/01/2014	05/01/2014	1 X Salary	\$50,000.00		[Redacted]		
Supplemental Life - Reliance (Employee)	05/01/2014	05/01/2014	5 X Salary	\$275,000.00		[Redacted]	\$25.26	
Basic AD&D - Reliance (\$50k max) (Employee)	05/01/2014	05/01/2014	1 X Salary	\$50,000.00		[Redacted]		
Total:							\$25.26	

Waived Coverages


Plan Type
 Voluntary AD&D EE

Beneficiary Designations 3 items

Benefit Plan	Requires Beneficiary	Beneficiaries	
		Beneficiary	Primary Percentage / Contingent Perce
Basic Group Life - Reliance (max \$50k) (Employee)	Yes	[Redacted]	<input checked="" type="radio"/> Primary Percentage 100 <input type="radio"/> Contingent Percentage
Basic AD&D - Reliance (\$50k max) (Employee)	Yes	[Redacted]	<input checked="" type="radio"/> Primary Percentage 100 <input type="radio"/> Contingent Percentage
Supplemental Life - Reliance (Employee)	Yes	[Redacted]	<input checked="" type="radio"/> Primary Percentage 100

23. You may print for your records

24. Hit  to go back to the home screen.



Note: Until the Benefit Partner approves the Employee's benefit change, the change(s) are not effective. The Benefit Partner will be notified via an action item in their email box.

Date	Content Modified
15 April 2015	Added new sign in graphic and modified screen snips to blur out employee names & information...DLB