Dependent Tuition Assistance
Workday Benefits Enrollment Process
Human Resources, Benefits Administration
Dependent Tuition Assistance Enrollment

Log into Workday at workday.osu.edu

Click Menu
Dependent Tuition Assistance Enrollment

Click Benefits and Pay Hub
Dependent Tuition Assistance Enrollment

Under Tasks and Reports click Change Benefits
Dependent Tuition Assistance Enrollment

In the Change Reason field, select the Dependent Tuition Assistance Enrollment.
Dependent Tuition Assistance Enrollment

Enter today’s date in the Benefit Event Date Field

Click Submit
Dependent Tuition Assistance Enrollment

Click Open
Dependent Tuition Assistance Enrollment

Click
Let’s Get Started
Dependent Tuition Assistance Enrollment

Click Manage
Dependent Tuition Assistance Enrollment

There are two items review and select:

The **first** is to elect the semester you are enrolling your dependent(s)

The **second** is to declare if enrolled dependents can be claimed as tax dependents.
Dependent Tuition Assistance Enrollment

Click **Confirm and Continue**
Dependent Tuition Assistance Enrollment

If enrolling a new dependent

Click Add New Dependent and populate the required fields
Dependent Tuition Assistance Enrollment

Select the box next to each dependent that is to receive the benefit.

Click Save.
Dependent Tuition Assistance Enrollment

- Select the box next to each tax dependent
- Click Save
Dependent Tuition Assistance Enrollment
You will be redirected to the main Dependent Tuition Assistance Enrollment screen

Click Review and Sign
Dependent Tuition Assistance Enrollment

Review the elections for accuracy and scroll down to the Electronic Signature section.
Electronic Signature

I have had the opportunity to review The Ohio State University benefit plan documents, programs and policies at \texttt{tr.ossu.edu/benefits}. I authorize the University to deduct contributions for my elected benefits from my pay on a pretax or aftertax basis as provided in plan documents and guidelines at \texttt{tr.ossu.edu/benefits}. 

I certify that:

- The information I have provided in this enrollment process is complete and correct.
- Any individual for whom I am electing dependent health coverage meets the definition of an eligible dependent under guidelines at \texttt{tr.ossu.edu/benefits/dependent-eligibility}.
- I understand that fabrication of enrollment information, an intentional misrepresentation of a material fact or fraud may subject me to termination of benefits (in some cases, retroactively) and/or disciplinary action up to and including termination of employment.
- I understand and agree that:
  - Implementation of my elections may be contingent on the University's approval of consistency with plan terms and IRS rules and, if requested, submission of supporting documentation.
  - My elections cannot be changed or voluntarily cancelled during the calendar year unless I experience a qualifying status change. I notify the Office of Human Resources within 30 days (60 days for certain Medicaid events) to the University's approval of the request for change. See basic life insurance, voluntary life insurance and short-term disability benefit plan documents for certain exceptions.
  - I will be billed directly for employee contributions for elected benefits (other than FSA) in the event my University pay is not sufficient to cover the required contributions or if I go on an unpaid leave of absence. If I fail to make timely contributions, my benefits will be terminated for lack of payment and I will be responsible for employee contributions missed prior to my coverage termination data. FSA contribution arrears will be deducted from future pay.
  - Any funds remaining in my FSA at the close of the calendar year and the grace period (if applicable) will be forfeited.
  - For tuition assistance, it is my responsibility to pay the full amount of tuition assistance in the event I or my dependent is not eligible under guidelines at \texttt{tr.ossu.edu/benefits/tuition-assistance/faculty-staff} and \texttt{tr.ossu.edu/benefits/tuition-assistance/dependent}.
  - If tuition assistance is taxable under IRS rules, I am responsible for the tax liability.
  - For employee life insurance, the effective date of coverage (or an increase in coverage) is subject to active work and non-enrollment requirements.
  - Employee life insurance in excess of any guaranteed issue amounts is contingent on the insurability of evidence of insurability.
  - Retiree Group Term Life Insurance (RGTLI) may be continued until age 70 if premiums are submitted as required on or before the date the employee would have turned 70. Employee life insurance is subject to change. RGTLI may also be cancelled for nonpayment of premiums, or at my election at any time with 30 days written notice.
  - Any person who, with intent to deceive or knowing that he or she is fabricating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.
  - For life insurance, if I named a new beneficiary or beneficiaries, any previous beneficiary designations are revoked.
  - Availability of benefits is based on plan terms and subject to future changes. By enrolling in any University benefit plan, I am agreeing to all of the terms of that benefit plan.
Dependent Tuition Assistance Enrollment

To verify you have completed the enrollment process in workday click benefits under your worker profile.
Questions

HR Connection Portal:
HRConnection.osu.edu

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614-247-6947

Email:
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