- 1. Navigate to the Oracle Cloud system. https://ejko.login.us2.oraclecloud.com/
- 2. Select Company Single Sign-On.

Sign I Orac	n le Applications Cloud	
	Company Single Sign-On or User ID Password Forgot Password Sign In English	

3. Under the Me section, select the **Benefits** icon.



4. Select Make Changes.

2023 Open Enrollment is happening now! Click 'Ma	ke Changes' below to review/edit your 2023 benefit elections
M	ike Changes
	Make Changes Until

5. To cover eligible dependents in benefits, add them now before you enroll by selecting Add under People to Cover. If a dependent you'd like to be covered under your benefits or designate as a beneficiary is already listed, do not add them again.

**Note:** In addition to the required fields marked with an asterisk, **gender**, **date of birth** and the **social security number** are also required to complete enrollment. You will also want to add beneficiaries in this section <u>if they are not already listed</u>. The social security number is not required for beneficiaries.

Information To cover family and others in benefits, add them now before you enroll.	
People to Cover	+ Add

6. Add any applicable Beneficiary Organizations (ex. charity, association, organization, trust) you wish to designate, select **Continue** in the upper right-hand corner.

**Note**: Beneficiaries who are not organizations should be added under the People to Cover section and not the Beneficiary Organizations section. The Beneficiary Organization section is only for charities, associations, and trusts.

Beneficiary Organizations	+ Add

7. Select Edit across from Company Provided and Voluntary Products to make changes to your beneficiaries.

Company Provided and Voluntary Products

💉 Edit

8. To add or update your beneficiary for Group Term Life selecting the edit pencil button.

Grou	p Term Life		
Group	Term Life - 4X Salary		
<b>V</b>	Group Term Life - 4X Salary		/
	Coverage Amount 400,000.00	Employer Biweekly Cost 44.31	

9. Type in the percentage you'd like to allocate for each beneficiary. Select **Ok**.

**Note**: A beneficiary cannot be designated as both a primary and contingent beneficiary.

Group Term Life - 4X Salary			OK <u>Cancel</u>
Coverage Amount 400,000.00		Employer Biweekly Cost 44.31	
Primary Beneficiaries James Lawson Akeelah Jones	%	Contingent Beneficiaries James Lawson Akeelah Jones	%

## 10. Select Submit.



## **Updating Beneficiaries in Open Enrollment**

11. A confirmation will appear that your elections were saved.

jram	
Your benefit elections were saved. You can make changes until 11:59 PM EST, 11/29/2022.	
Currency in USD	
Your Total Cost Each Pay Period	3.92
ealth Plans	
Simply Blue HSA \$1500 Employee Only	0.00
Who's covered? You	~
Who's covered? You BWell Employee Only	~
Who's covered? You BWell Employee Only Who's covered? You	~
Who's covered? You BWell Employee Only Who's covered? You Exclusive Dental Employee Only	2.00
Who's covered? You BWell Employee Only Who's covered? You Exclusive Dental Employee Only Who's covered? You	2.00
Who's covered? You BWell Employee Only Who's covered? You Exclusive Dental Employee Only Who's covered? You Blue Vision VSP Employee Only	2.00