**Benefits: Manage an MBTA Election**

Within Workday, benefit-eligible employees can change their MBTA Elections at any time during the year. However, since Simmons must submit monthly pass orders to the MBTA by a certain date, you must make elections for the upcoming month by the 10th day of the current month.

For example, if it is May and you want to change your MBTA pass for June, you must make the change no later than May 10th. If later, you would not be able to receive that new pass until July, since the deadline for June would have already passed.

**ADDING AN MBTA ELECTION**

From the Benefits application:

1. Click the **Benefits** button under Change.
2. Select **MBTA Election** from the **Change Reason** pull-down.
3. Click the **calendar** icon to enter the date of the benefit event.
4. Click **Submit**, then click **Done**. A task will route to your Inbox.
5. Click the **Benefit Change** task.
6. Click **Enroll** on the Commuter Pass card.

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7. Choose the MBTA pass type in the Coverage pull-down and review the monthly cost.

8. Complete and continue through all required screens to Save your election.

9. Click Review and Sign after reviewing your selection.

10. Check I Accept in the Electronic Signature and Submit.

Electronic Signature

- I hereby apply for myself and any dependents listed on this Election Form for the coverage indicated. I understand that if processing applications for coverage indicated above (if any), I also understand I may get follow-up Workday items for further processing.
- I understand that coverage is subject to the exclusions and all other provisions contained in the benefit plan.
- I agree to pay the current and future premiums for the benefits I have elected to participate in, as long as I remain in a benefit plan.
- If I choose to participate in the Health Care or Dependent Care Flexible Spending Accounts, I understand that if I elect to participate in the Plan(s), I will need to complete an election form for each Plan.
- I have read this Election Form, Summary of Benefits provided to me and made available on the Benefits & Payroll intranet.
- I understand that these elections cannot be changed until the next open enrollment period unless I experience a qualifying event.
- Information provided on this form will be shared with the respective benefit provider including my address, phone number, and beneficiary information.

I Accept [ ]

Submit | Save for Later | Cancel

11. Click Done to return to the Home screen or click View Benefits Statement to review and print a summary of your benefits.