

OPEN ENROLLMENT FAQ



2025 Open Enrollment is November 11–22, 2024

What is Open Enrollment?

Open Enrollment is the annual period during which employees can make changes to their health insurance and other benefit plans. It's the only time, aside from qualifying life events, that you can enroll in, drop, or change coverage.

When is Open Enrollment?

Open Enrollment typically happens once a year. Sundt's Open Enrollment is November 11-22, 2024. It's important to make any changes during this period as it won't be available again until the next year, unless you have a qualifying life event.

What happens if I don't enroll or make changes during Open Enrollment?

Our Open Enrollment is passive which means that if you don't make any changes, your current elections will rollover to the next plan year. However, Flexible Spending Accounts require re-enrollment each year, even if you want to maintain the same contribution amount.

What is a Qualifying Life Event (QLE)?

A QLE is a significant life event that allows you to make changes to your benefits outside of the Open Enrollment period. Common examples include marriage, divorce, birth or adoption of a child, or loss of other coverage elsewhere.

Can I add or remove dependents during Open Enrollment?

Yes, during Open Enrollment, you can add or remove dependents from your benefits plans. You will be required to provide supporting documentation, such as a marriage or birth certificate to our third-party vendor, Consova.

Can I enroll in vision coverage?

No, vision is included with all three medical plans.

What types of benefits can I change during Open Enrollment?

Typically, you can make changes to:

- Health insurance (medical/Vision and dental)
- Life insurance
- Flexible Spending Accounts (FSA)
- Health Savings Accounts (HSA)
- Voluntary benefits (e.g., accident insurance, critical illness insurance)

How do I know which plan is right for me?

It's important to review the plan details, including coverage, out-of-pocket costs, premiums, and provider networks. Comparing your expected healthcare needs, preferred doctors, and prescription costs can help guide your decision. You can also attend any employer-provided informational sessions or consult with Cigna Once Guide at 800.244.6224.

What is a High Deductible Plan (HDHP), and should I choose one?

An HDHP is a health insurance plan with a higher deductible and lower premiums. If you expect minimal medical expenses, an HDHP combined with a Health Savings Account (HSA) might save you money. Review your expected healthcare needs and financial situation before deciding.

What happens if I have an issue with my coverage after Open Enrollment?

Once Open Enrollment ends, you cannot make changes unless you experience a Qualifying Life Event. If you encounter any issues, contact Cigna One Guide at 888.806.5042 or benefits@sundt.com as soon as possible to address them.



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What is the difference between an HSA and FSA?

- **HSA** (Health Savings Account) is available with high-deductible health plans and allows you to save pre-tax money for medical expenses. Unused funds roll over year to year.
- **FSA** (Flexible Spending Account) allows you to set aside pre-tax dollars for eligible medical expenses. FSAs are generally "use-it-or-lose-it" within the plan year, though our plan allows a small carryover when you enroll in the plan for the new plan year.

What are pending action items?

Pending action items indicate missing information from HCM that is required to complete the enrollment process. Contact benefits@sundt.com or can now text your questions to 844.816.2132.

How can I confirm that my affidavit form was received and that I can get the credit for the 2025 plan year?

You will receive a confirmation email from the Benefits Department once your form is received. You will also receive a confirmation email once your appointment is validated with Cigna.

What's a deductible, coinsurance, copay, and our of pocket maximum?

Deductible: The amount you're responsible for paying in care expenses before your plan starts paying deductible-eligible expenses. Know what the deductible applies to. Look for items with 'DED then you pay...' language in your benefit guide. If you have a HDHP medical plan with HSA, all non-preventive care is subject to a deductible.

Coinsurance: After you've met your deductible, you're sometimes responsible for a percentage of the cost for the medical or dental care or prescription medication received. This percentage is coinsurance.

Copay: A flat fee you pay each time you receive a copay-eligible medical, dental, or vision service or prescription medication.

Out-of-pocket maximum: The most you'll pay for covered in-network medical care and prescription drugs in a year. This includes your deductible, coinsurance, and copays, but does not include your premium (cost for coverage).

What if I miss the Open Enrollment Deadline?

If you miss the deadline, you may have to wait until the next Open Enrollment period to make changes to your benefits. Make sure you act within the enrollment window to avoid being locked into your current coverage for another year.

Do I have to do anything if I want to WAIVE Benefits?

Yes, you will need to login to hcm.sundt.com and select the waive option.

When will the elections I made during Open Enrollment start?

Benefits will start 1/1/2025.

How do I enroll and/or make changes?

Visit hcm.sundt.com and click on Company Single Sign-On. You will be directed to a second page to enter your credentials.

Craft login instructions:

Username: <EmployeeNumber>@sundt.com
(example: 123456@sundt.com)
Password: sundt\$dateofbirth
(example: sundt\$10021976 for 10/02/1976)

If you have a Sundt computer, please use your existing credentials.

If you have issues logging in, please contact IT at IT@sundt.com or 520.750.4799.

Note: It is crucial that you save a copy of your benefit elections for your records. This step ensures you have a reference for your choices and can quickly resolve any issues or discrepancies.