Open Enrollment Frequently Asked Questions

2027 U.S. Open Enrollment

What is Open Enrollment?

Open Enrollment is your once-a-year opportunity to enroll in benefits, add or drop dependents, or make changes to any of your insurance plans.

When is Open Enrollment?

Open Enrollment will be held from October 26th – November 13th. All benefit changes submitted during this time will be live beginning January 1st, 2027.

How do I learn more about each of our insurance plans?

There are many opportunities this Open Enrollment season:

- Attend your local Benefits. Click here to find yours!
- Attend an education session with the Benefits team or our benefit vendors!
- Explore MyFIRewards.com to learn about all our generous benefits!

How do I make changes to my benefits during Open Enrollment?

All Open Enrollment changes are made in Workday. Go to your Workday inbox and look for the Open Enrollment notification. Click here for detailed instructions.

What's New for January 2027:

- HSA contribution limits are increasing to $4,500 for individuals and $9,000 for families!

Do I have to re-enroll in benefits?

If you're happy with your current medical coverage, then no. We'll automatically re-enroll you. For HSAs and DCFSAs, you will need to re-enroll to continue contributing.

What is Evidence of Insurability (EOI) and why do I need to complete this for my life and disability insurance changes? How will I be notified to complete the EOI?

EOI is an application process where you provide your, or your spouse's, health information to be considered for life and/or disability insurance. You will receive an email between the end of December and early January with instructions on how to complete the EOI. If the EOI is not completed in a timely manner, your life and disability changes will be cancelled.

When do the benefits I choose during Open Enrollment go into effect?

Elections for healthcare, dental, and vision insurance, HSA, and dependent care FSA will go into effect on January 1st, 2027. New enrollments for short-term and long-term disability, life, and accidental death and dismemberment (AD&D) insurance will require additional information and approval from The Standard before going into effect.

Who can be enrolled in my benefits?
Only your spouse, state-registered domestic partner, and child(ren) up to the age of 26 can be enrolled in our benefit plans. A marriage certificate or state-issued domestic partner certificate is required.

Can I make changes outside of Open Enrollment?
Your insurance plans will be effective through the end of the calendar year. You cannot make changes to your coverage unless you have a qualifying life event, which includes but is not limited to events such as marriage, divorce, birth/adoption, loss of coverage on a group plan, and relocation to a different coverage area. All changes must be submitted through Workday within 31 days of the life-changing event.

I was hired last month and already made my benefit elections. Do I need to re-elect for 2027?
No, unless you want to change what you've already elected. If you are happy with the benefits you chose, leave them as-is and we'll get you re-enrolled for 2027. However, if you are enrolled in an HSA or Dependent Care FSA, you will need to elect your contributions for 2027. Follow these instructions to do so.

How will I know which health plan option is best for me?
The key difference between our plans is the network of hospitals, doctors, and how much you'll pay for services throughout the year. Consider how much you're willing to spend, how much flexibility you need, and the network of doctors you prefer to see. For instance, would you rather pay higher copays and deductibles for a medical plan that covers in-network and some out-of-network services (*more medical provider flexibility*), or pay as little as possible for medical care — even if that means a much narrower network of doctors and hospitals? Check out the Medical Plan Comparison Chart for details on each of the plans in your area.

What's a Health Savings Account (HSA)?
An HSA is an account that lets you set aside money on a pre-tax basis to pay for qualified medical expenses. With an HSA, you contribute to your account through automatic payroll deductions and receive a dollar-for-dollar match of up to 50% of your annual deductible. The funds can be used to pay for eligible health care expenses (*tax-free*), saved to an interest-bearing debit card, or invested in the market! **An HSA is only available with a High-Deductible medical plan.** All the money in your HSA rolls over year after year and is yours to keep. Click here to learn more.

What's a Dependent Care Flexible Spending Account (DCFSA)?
The Dependent Care Flexible Spending Account is a way for you to put aside pre-tax dollars towards eligible dependent care expenses (day care, nanny, au pair, etc.). Click here to learn more about eligibility and plan guidelines for the DCFSA plan.

**For employee policies only. All policies above $250,000 are subject to an evidence of insurability review.*
***For employees earning less than $160k in 2025. Anyone earning $160k or above is limited to a $2,000 contribution.*