Get ready to enroll in your employee benefits



2026 Benefits Enrollment – Frequently Asked Questions

Updated October 2025

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A. General

1) What is 2026 Benefits Enrollment?

Benefits Enrollment is the time each year when you are allowed to enroll, waive or change your benefit elections for coverage effective Jan. 1, 2026.

2) When is 2026 Benefits Enrollment?

Benefits Enrollment occurs from Monday, Nov. 3, 2025, through Monday, Nov. 17, 2025.

3) Will my current benefit elections carry over for plan year 2026? Do I have to submit my enrollment in Workday?

If you do not submit your Workday enrollment, most current elections will roll over into 2026, **except** for the following benefits:

- Flexible Spending Accounts (Health Care FSA, Limited Purpose FSA and Dependent Care FSA)
- PTO Purchase (if eligible).

You must re-enroll in the benefits listed above to have coverage in 2026.

4) Can I make changes to my benefit elections outside of the Benefits Enrollment period?

No, you cannot make changes to your benefits outside of the Benefits Enrollment period unless you experience a qualified life event, such as but not limited to:

- Change in legal marital status. Includes marriage, divorce, legal separation and annulment.
- Change in number of dependents. Includes any event that changes the number of an employee's dependents (e.g., adoption, birth child).
- Loss or gain of other health care coverage (e.g., through a spouse's employer).

5) Who is eligible to participate in 2026 Benefits Enrollment?

Benefits eligible employees of Allina Health.

• If you are on a paid leave of absence, you are required to submit your enrollment by the Nov. 17, 2025, deadline.

• If you are on an unpaid leave of absence, you will be required to complete your enrollment upon your return from leave.

6) What if my spouse's employer's annual benefits enrollment period is different than Allina Health's annual enrollment period, what are my options?

If your spouse gains other medical coverage on Jan. 1 (or any other time during the year), you may remove them from your medical plan in Workday within 30 days of them gaining other medical coverage. If your spouse loses other medical coverage on Jan. 1 (or any other time during the year), you may add them to your medical plan in Workday within 30 days of them gaining other medical coverage.

7) Where do I enroll in benefits during 2026 Benefits Enrollment?

Enrollment is in <u>Workday</u>. Go directly to your Inbox in Workday to complete and submit your enrollment.

8) Can I change my elections after I submit my enrollment in Workday?

Yes, you may change your 2026 Benefits Enrollment elections after you submit your enrollment but before the 2026 Benefits Enrollment deadline, Monday, Nov. 17. Log in to Workday, select 'Menu' in the upper left corner, select the 'Benefits and Pay' application and then select 'Edit' under 'Benefit Event: Open Enrollment.' This will bring you to your enrollment again. After you click on 'Edit,' be sure to submit your enrollment again.

9) I submitted my enrollment in Workday. Where can I access what I submitted?

Go directly to your Inbox in Workday. Click on the tab titled "Archive." Then, click on the event titled, "Open Enrollment Change: (Your name) on 01/01/2026." Your elections will be located there.

10) I was recently hired at Allina Health. I submitted my benefits enrollment as a new hire for 2025. Do I have to submit another benefits enrollment for 2026?

Yes. If your start date is prior to Monday, Dec. 2, 2025, you are required to submit two enrollments:

- 1. First, submit your new hire enrollment for 2025 benefits.
- 2. Next, you will receive another enrollment to complete in your Workday inbox for 2026 benefits.

Complete both events to ensure you are enrolled in the benefits of your choice for 2025 and 2026.

11) The Coverage Begin Date and Deduction Begin Date within my 2026 Benefits Statement shows a different date than 1/1/2026 for some of my benefits. Is this correct?

Yes. If you did not change your enrollment, your Coverage Begin Date and Deduction Begin date will reflect the date you entered the plan originally. If you made changes to your enrollment, your Coverage Begin Date and Deduction Begin Date will reflect 1/1/2026.

B. Medical

1) Are the medical plans changing for 2026?

- The Select Health Savings Plan in-network individual deductible is increasing to \$2,000 (up from \$1,650) and the out-of-network individual deductible is increasing to \$4,000 (up from \$3,200).
- The Select Health Savings Plan in-network family deductible is increasing to \$4,000 (up from \$3,300) and the out-of-network family deductible is increasing to \$8,000 (up from \$6,400).

• The Select Health Savings Plan, Allina First Plan and the Allina First (Alt) Plan member coinsurance is increasing by 10%. Pharmacy benefit coinsurance is not increasing and remains the same.

2) I am age 65+ and would like to enroll in the Premier Health Savings plan but am unable to submit my enrollment. How do I submit my enrollment?

Please submit an *HRConnect* ticket by no later than Monday, Nov. 17, 2025, and request enrollment in the Premier Health Savings Plan.

3) Which medical plans are offered?

View the <u>plan comparison chart</u> or <u>plan comparison chart for SEIU-represented employees</u>. Access the ALEX plan comparison tool on *allinahealth.org/2026enrollment*.

4) Who administers the medical plans and which networks are available?

- **Network:** The facilities, providers and suppliers the medical plan has contracted with to provide health care services.
- **Administrator:** Handles claims processing, pays providers and manages other functions related to the operation of your health insurance.

Medical plan name	Networks included in plan	Third-party plan administrator
Premier Health Savings Plan	Allina Elevate Network	
Allina First Plan	Allina First Network	
	Extended Network	Blue Cross Blue Shield of MN
Select Health Savings Plan	Allina First Network	
	Extended Network	
Allina Elevate Plan	Allina Elevate Network	Allina Health Aetna

5) Are out-of-network emergency department care and transportation services covered?

Yes, out-of-network emergency and transportation services are covered as in-network. Please see the Summary Plan Description for limitations.

6) Where can I see the premiums for the medical plans?

Rates are available in:

- **HRConnect**: Log in to **HRConnect** from the AKN homepage and search by medical plan name to review current and 2026 rates.
- ALEX: Access the ALEX plan comparison tool at <u>allinahealth.org/2026enrollment</u>.
 Note: ALEX is not intended for SEIU-represented employees.
- Workday: Nov. 3 -17, go directly to your Workday Inbox and then select Manage or Enroll
 within the medical tile. Upon adding or removing dependents, your biweekly premium will
 populate within the field "Plan cost per paycheck."

7) When selecting a medical plan in the Workday enrollment tool, which medical plan name should I select?

Medical plan name	Name in the Workday	
	enrollment tool	

Allina Elevate Plan	Allina Aetna EPO Elevate
Premier Health Savings Plan	BCBS HDHP Premier
Select Health Savings Plan	BCBS HDHP Select
Allina First Plan	BCBS PPO First

8) Who can I cover under my medical plan?

You may cover your legal spouse and child(ren) up to the age of 26.

9) How can I find out what is considered in-network coverage under the Allina First, Select Health and the Premier Health Savings plans?

You can search for network coverage including specialties, primary care, hospitals and other facilities and providers by visiting <u>bluecrossmn.com/allina</u>. You may also call BCBS of MN at 800-509-5310, option 1 for inquiries related to medical benefits and network coverage.

10) How can I find out what is considered in-network coverage under the Allina Elevate Plan?

You can search for network coverage including specialties, primary care, hospitals and other facilities and providers by visiting <u>ah.allinahealthaetna.com</u>. You may also call Aetna at 800-343-9264 for inquiries related to medical benefits and network coverage.

11) How do I find out if a prescription drug is covered or get pricing for a medication?

Our pharmacy benefits are administered through Express Scripts. You may visit Express Scripts site at <u>express-scripts.com/frontend/open-enrollment/allinahealth</u> or call 800-509-5310, option 2 or 800-343-9264, option 2, to obtain information related to medication prices, network pharmacies, preferred formulary exclusion and standard preventive medication lists.

12) Where can I access the Summary of Benefit Coverage (SBC) or the detailed Summary Plan Description (SPD) for information related to medical benefits, covered procedures and other information?

Visit BCBS website at bluecrossmn.com/allina or Allina Health|Aetna website at ah.allinahealthaetna.com/. Both the SBCs and SPDs are viewable on the websites. You can also access SBCs in HRConnect, under each plan's article.

13) I need help understanding insurance related terms like network, deductible, copay, coinsurance and out-of-pocket maximum. Where can I learn more about what these mean?

Our <u>Health Plan 101 video</u> (<u>view transcript</u>) is a helpful tool that explains what these terms mean and how they impact your medical plan.

- C. Elevate Network (narrow network option)
 - 1) What providers are in network for the Premier Health Savings Plan and the Allina Elevate Plan? Review Who Provides Care in the Allina Elevate Network.
 - 2) Is emergency care covered under these two plans for emergencies out of network in another state? Yes, if the event you or a covered dependent experience an unforeseeable medical emergency the emergency care (e.g., hospitalizations, urgent surgery, ambulance) will be covered by your insurance and expenses will apply toward your in-network deductible and in-network out-of-pocket maximum.

3) Where can I fill prescriptions under these plans?

The first fill of any medication can be filled at any <u>Express Scripts network pharmacy</u> which includes CVS (excludes Walgreens); however, any subsequent fills would need to go through <u>Allina Health</u> <u>pharmacies</u>. There is no out-of-network pharmacy coverage.

4) What out-of-network care is available?

Urgent care expenses are the only allowable expense covered out of network. All other types of outof-network care are not covered except for out of network medical care for unforeseen medical emergencies.

5) Can I access urgent care out of the network under these plans (e.g., getting a strep test while on vacation in Florida)?

Out-of-network urgent care is covered, and expenses apply toward your out-of-pocket deductible and out-of-pocket maximum.

6) If I cover a dependent on the Premier Health Savings plan, does the \$2,000 individual deductible apply to the first covered dependent who meets the \$2,000 deductible?

The \$2,000 individual deductible only applies to single-only coverage. If you are covering more than yourself, it only takes one covered individual to meet the \$4,000 deductible/out-of-pocket maximum.

D. Dental

1) Where can I see the rates for the dental plan?

Rates are available in Workday. Go directly to your Workday inbox and then select 'Manage or Enroll' within the Dental tile. Upon adding or removing dependents, your biweekly premium will populate within the field "Plan cost per paycheck." Rates are also available on *HRConnect*.

2) Who administers Allina Health's dental plan and how can I find an in-network provider? Delta Dental of Minnesota is the plan administrator. Visit the Delta Dental website at deltadentalmn.org/allina-health-members or you may call Delta Dental Customer Service at 651-4065916 or toll free at 800-553-9536.

3) I am covered under more than one dental plan. How does the claim process work?

If you have questions regarding coordination of benefits, please contact Delta Dental Customer Service at 651-406-5916 or toll free at 800-553-9536.

4) Where can I view the detailed Summary Plan Description (SPD) to access information related to dental benefits, covered procedures and other information?

Visit HRConnect and use search word "Dental." The Dental SPD is viewable within the Dental article.

E. Health Savings Account (HSA)

1) What is a Health Savings Account?

A Health Savings Account (HSA) allows you to save pre-tax dollars for health care costs. An HSA is an individual trust account designed to help you pay for medical expenses. You can only spend the funds that have been contributed to your account

2) Do HSA dollars rollover year to year?

Yes, HSA dollars rollover year to year.

3) Will I receive a debit card in the mail?

If you newly elect an HSA, you will receive one Visa debit card to use when paying for eligible expenses. Additional cards may be ordered online or by calling Optum Financial 24/7 at 1-844-400-5723 upon the accountholder's request, for spouses and dependents also enrolled in the plan.

4) Can I change my HSA contributions later?

Yes, you can start, stop or change your HSA contributions at any time in Workday. Select 'Menu' in the upper left corner, then select the 'Benefits and Pay' application, select 'Change Benefits 'and then select 'Health Savings Account Change.' Contribution changes are effective at the first of the month following the change request.

5) Which medical plans are compatible with an HSA?

The Select Health Savings Plan and the Premier Health Savings Plan. The Allina Elevate Plan and the Allina First Plan are not compatible with an HSA.

6) Does Allina Health contribute to my HSA?

Only the Premier Health Savings plan has an Allina Health HSA contribution. Allina Health will contribute \$600 if you are just covering yourself or \$1,200 for all other coverage tiers. The employer contribution will be applied on the first paycheck issued of the year.

7) I enrolled in the Premier Health Savings Plan. Do I have to enroll in the HSA?

Yes, you are required to enroll in the HSA if you enroll in the Premier Health Savings Plan, as Allina Health contributes to this account. You are not required to contribute yourself – simply enter your contributions to \$0.00 in Workday if you do not wish to contribute pre-tax dollars. If you have secondary coverage through your spouse and you are ineligible for a HSA, please contact the HRConnect Service Center and we can waive Allina Health's HSA contribution.

8) How much am I allowed to contribute to my HSA in 2026?

Both the employee and Allina Health contributions combined are subject to Internal Revenue Service (IRS) annual limits. The IRS annual limit for 2026 is:

Self-only coverage: \$4,400

All other coverage levels: \$8,750

Catch-up for age 55+: \$1,000 above the limits listed.

F. Flexible Spending Accounts (FSAs)

1) What types of FSAs are offered?

- Health Care FSA: Put pre-tax money aside in an account to pay for eligible health care
 expenses incurred by you and your eligible dependents that cannot be covered by any other
 benefit plan.
- **Limited Purpose FSA:** Put pre-tax money aside in an account to pay for eligible health care expenses incurred by you and your eligible dependents that cannot be covered by any other benefit plan. Eligible expenses are limited to certain dental, vision, and over-the-counter item expenses.
- **Dependent Care FSA:** Put money aside on a pre-tax basis so that you can pay someone to care for your eligible dependents while you and your spouse (if you are married) work, look for work or go to school.

2) Which medical plans are compatible with a Health Care FSA?

The Allina First and the Allina Elevate plans are compatible, or if you waive health care coverage. The Premier Health Savings and the Select Health Savings plans are not compatible with a Health Care FSA.

3) Which medical plans are compatible with the Limited Purpose FSA?

The Select Health Savings Plan and the Premier Health Savings Plan are compatible. The Allina Elevate and the Allina First plans are not compatible with a Limited Purpose FSA.

4) How much am I able to contribute in 2026 to the Health Care FSA or the Limited Purpose FSA? The 2026 IRS limit is \$3,400. The minimum contribution is \$100.

5) When can I access the funds within the Health Care FSA or Limited Purpose FSA?

The full amount you elected will become available on Jan. 1.

6) Do Health Care FSA or Limited Purpose FSA dollars roll over year to year?

If you elect an FSA for the following year, you can roll over funds, up to the current IRS limit of \$660. If you do not re-enroll in the FSA, you will lose any funds left after March 31 of the next calendar year. Eligible expenses must be incurred prior to year end to be eligible for reimbursement.

For example: If you have an FSA in 2025 and elect an FSA for 2026, you may carry over up to \$660 of your 2025 balance into the 2026 benefit year. If you don't elect an FSA for 2026, you will lose any contributions left in your account after March 31, 2026. A rollover limit of \$660 will apply for 2026 contributions and 2026 enrollment. If your eligibility ends for the benefit, you will lose any contributions left after 90 days from the date you lose eligibility.

7) Do Dependent Care FSA dollars rollover year to year?

You will lose any 2026 contributions left in your account after March 31, 2027. Eligible expenses must be incurred prior to Jan. 1, 2027.

8) How much am I able to contribute to my Dependent Care FSA (DCFSA)?

- Highly compensated employees may contribute up to \$5,000 per year.
- Non-highly compensated employees may contribute up to \$7,500 per year.

The Internal Revenue Code Section 129 requires that DCFSAs pass nondiscrimination tests each year. These tests ensure that the benefits available under the DCFSA do not disproportionately favor highly compensated employees. An employee with an annual salary that exceeds \$160,000 (for 2025, as indexed) is considered a highly compensated employee. Allina Health will perform nondiscrimination testing during the calendar year. Depending on the results of the testing, Allina Health may need to take corrective action. This may include stopping or reducing highly compensated employee contributions mid-year or applying imputed income to a highly compensated employee's W-2 at year end.

9) Will I receive a debit card in the mail?

If you newly elect a Health Care or Limited Purpose FSA, you will receive one Visa debit card to use when paying for eligible expenses. Additional cards may be ordered online or by calling Optum Financial 24/7 at 1-844-400-5723 upon the accountholder's request, for spouses and dependents also enrolled in the plan.

G. Supplemental Life Insurance

1) What is evidence of insurability (EOI)?

EOI provides proof of good health. This includes an application process where you provide information on the condition of your health or your spouse's health to get approved for the additional life insurance coverage you elected.

2) How much life insurance can I elect for myself, spouse or child without submitting evidence of EOI? Your Workday benefit enrollment is programmed to indicate if EOI is required based on the level of coverage you select. You will see a message under "Coverage" if EOI is required.

3) If my coverage requires EOI, how do I submit my EOI form?

Securian Financial, Allina Health's life insurance carrier, will contact you directly in the next few weeks with instructions on how to submit EOI forms. You do not submit EOI to Allina Health.

4) How much life insurance should I elect?

Use the Securian Financial <u>life insurance decision tool</u> to get started. By answering a few simple questions about your family and finances, you can determine the coverage that meets your needs and budget.

5) Who can I cover under my Spouse or Child Life Policy?

- Your legal spouse who is not legally separated from you.
- You or your spouse's child, legally adopted or stepchildren who are less than 26 years old.
 Children over 26 or older are also eligible if they are physically or mentally incapable of self-support, incapable of self-support prior to age 26 and are financially dependent on you for more than one-half of their support and maintenance.

6) Where can I view the rates for supplemental life insurance?

In Workday, go directly to your Inbox and select 'Change Benefits for Open Enrollment' and then 'Let's Get Started.' Select the Supplemental Life, Spouse Life or Child Life tiles, then view the coverage options and rates by clicking on the plan under 'Benefit Plan Details.'

7) Do I need to re-enroll supplemental life insurance for myself, my spouse and child for 2026? No. Your 2025 Supplemental Life, Spouse Life, and Child Life coverage amounts will carry over to 2026.

H. Voluntary Benefits

1) If I had voluntary benefits before, do I need to reenroll?

Your 2025 voluntary benefit elections will carry over to 2026. Voluntary benefits include:

- Voluntary Life for spouse or child
- Vision
- Identity Theft
- Hospital Indemnity
- Critical Illness
- Accident Insurance
- Legal Plan.

2) When can I buy PTO hours?

Eligible employees can purchase PTO hours during Benefits Enrollment. PTO purchase election is not allowed outside of that period. If an employee becomes newly eligible for PTO purchase (as a new hire or because of a job change) during the year, they must wait until Benefits Enrollment to purchase PTO.

3) Where can I find more information on PTO purchase and how to use purchased PTO?

Information on Purchase PTO can be found in the PTO Purchase PTO Purchase FAQ on HRConnect.