



2027 OPEN ENROLLMENT

FREQUENTLY ASKED QUESTIONS

Open Enrollment is from Monday, October 26, 2026 to Monday, November 16, 2026 at 5 p.m.



WHAT IS OPEN ENROLLMENT?

Open Enrollment is your one opportunity to enroll or make changes to your medical, dental, Flexible Spending, HSA, Critical Illness, Additional Life Insurance, Long-Term Disability, and/or Legal plan, or add/drop eligible dependents without a qualifying event.



WHAT IF I DON'T WANT TO MAKE ANY CHANGES TO MY BENEFITS?

If you are not making changes, are not enrolling in an FSA or HSA plan and are not opting out of medical insurance then you don't need to submit a request. We will keep you and your dependents continued on the same medical and dental plans.



ARE THERE ANY CHANGES I SHOULD KNOW ABOUT?

All benefit plans will have a rate increase for the upcoming plan year. Don't forget to check out the **new Blue Shield Trio HMO 40 plan!**

New voluntary plans will be available during Open Enrollment. These options include Accident, Hospital Indemnity, and Short-Term Disability coverage, providing employees with additional protection.

Important: Voluntary Short-Term Disability is intended exclusively for employees in the unrepresented group. All voluntary plans are employee-paid.



HOW DO I SUBMIT MY CHANGES FOR OPEN ENROLLMENT?

You can begin submitting your requests on Monday, October 26, 2026 on [Employee Online](#) up until Monday, November 16, 2026 at 5 p.m.



DO I NEED TO SUBMIT ANYTHING IF I OPT OUT OF HEALTH INSURANCE?

Yes. Health opt-out will **NOT** carry over automatically, you must re-elect this option (found under medical plans) and provide new verification of alternate coverage.

Failure to submit a new health opt-out request and proof of alternate coverage will impact your eligibility for the annual stipend.



WHEN DO THE BENEFITS I CHOOSE DURING OPEN ENROLLMENT BEGIN?

Elections for Flexible Spending Accounts (FSAs), Health Savings Account (HSA), medical, and dental insurance are effective Friday, January 1, 2027.

Effective dates for Critical Illness, Additional Life, and Long-Term Disability insurance are determined by The Standard and may be subject to medical underwriting.

Legal insurance enrollment is effective the first of the month following the request. If coverage is canceled, termination is effective the first of the month following 30 days from the cancellation request date. Employees who cancel coverage will not be eligible to re-enroll until the following calendar year.



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WHAT IF I MISS THE DEADLINE TO SUBMIT MY CHANGE?

After Monday, November 16 at 5 p.m. you will no longer be able to make any changes until next year's open enrollment, unless you experience a qualifying event.



WHAT IF I HAVE A QUALIFYING EVENT AND NEED TO MAKE CHANGES DURING OPEN ENROLLMENT?

If you experience a qualifying event during open enrollment please reach out to the benefits team to have your request processed, email CityBenefits@RiversideCA.gov.

Examples of the most common qualifying events are: dependent status change, marriage, and birth of child. Please review the Qualifying Event Guide & Checklist for additional information and requirements.



CAN I MAKE CHANGES AFTER SUBMITTING MY OPEN ENROLLMENT REQUEST?

Yes, you can make changes to your elections in [Employee Online](#) during the open enrollment window, as long as you have your final elections in by Monday, November 16, 2026 at 4:59 p.m. To make changes in Employee Online, after submitting your initial request, simply go back to the Benefits Selection page, click on the benefit and select "Delete this Request," you will then be able to submit a new request.



IF I CHANGE MY MIND AFTER OPEN ENROLLMENT, CAN I CHANGE MY HEALTH PLAN SELECTION?

No. After the Open Enrollment deadline, you cannot change your elections, unless you experience a new "qualifying life event" (such as getting married or having a baby). Consider your choices carefully; changes and corrections are not permitted except during Open Enrollment or within 30 days of a qualifying life event.

IMPORTANT NOTES

- Employees enrolled in Health Opt Out must re-enroll and submit proof of coverage in Employee Online during every Open Enrollment
- Employees enrolled in the Blue Shield HDHP are eligible for an HSA, but IRS rules do not allow enrollment in both an HSA and a medical FSA. HSA participants must also re-enroll each year and select their contribution amount for the following calendar year. Unused HSA funds do not expire and will remain in your account and carry over.
- Employees enrolled/enrolling in a Flexible Spending Account (FSA) must re-enroll, each year.
- New Voluntary Benefit Plans Are Available During Open Enrollment – Voluntary Accident Plan, Hospital Indemnity Coverage and Voluntary Short-Term Disability.
- **IMPORTANT:** Voluntary Short-Term Disability coverage is intended exclusively for unrepresented City of Riverside employees. This coverage is employee-paid.

Please contact the Human Resources Benefits Division for any questions or for additional information at:

CityBenefits@RiversideCA.gov or call (951) 826-5639