



2026 Open Enrollment

October 6 – 30, 2025

Elections are effective January 1 – December 31, 2026



Open Enrollment FAQs

What's New for the 2026 Plan Year?

Open Enrollment Help

- Attend a [Virtual Open Enrollment Seminar](#) live with the insurance carriers, or view a recording of the presentation later.
- [Open Enrollment PeopleSoft Navigation](#) help will be available virtually.
 - Attend a group session for assistance navigating through the Open Enrollment system

Flex Credits

- Flex Credits are increasing by 5 - 6%.

Plan Rates

- [Click here to view 2026 plan rates.](#)

Medical Plans

- The County of San Diego is offering a new medical plan option with Kaiser Permanente, check out the [Virtual Open Enrollment Seminar](#) schedule to attend one of Kaiser's seminars and learn more!
- You will see an increase in some premiums for medical coverage.
- The IRS has increased the minimum deductibles for HDHPs and you'll see the following limits:

Coverage	Kaiser HDHP	UHC Harmony HDHP
Employee only	\$1,700	\$2,700
Individual within a Family	\$3,400	\$3,400
Family	\$3,400	\$3,400

Vision Plan

- Premiums will decrease by 10%.

Spending Accounts

- The maximum amounts you can contribute to the HSA, HCFSAs, and DCFSAs are increasing:
 - Health Savings Account (HSA) — Individual coverage: \$4,400; family coverage: \$8,750.
 - Health Care Flexible Spending Account (HCFSAs) — \$3,300
 - The Dependent Care Flexible Spending Account (DCFSAs) — \$7,500
- The rollover amount is increasing from \$640 to \$660

- This is a combined maximum from your 2025 HCFSAs and Health Reimbursement Account (HRA) balances
- There is no rollover amount for remaining Dependent Care FSAs.
- You have until March 31, 2026 to submit claims for eligible expenses incurred in 2025.

Is Open Enrollment Required for all County Employees?

All Employees should review their benefit elections annually. Check out the [Open Enrollment Guide](#) and/or visit the [Open Enrollment Website](#) to help you choose the right benefits for you and see 2026 updates.

Action is REQUIRED for the following situations:

- **Waiving Medical Coverage** – If you waived your medical coverage in 2025 and want to continue to waive in 2026, *you are required to participate in Open Enrollment*. If you do not make an election in PeopleSoft Employee Self Service to waive coverage for 2026, your medical election will automatically be defaulted to the Kaiser HMO employee only plan. Excess Flex Credits, if any, will be deposited into a Health Reimbursement Account.
- **Spending Accounts** – You must re-enroll annually. This includes the Health Care FSA, Dependent Care FSA and the Health Savings Account. Funds will not be contributed into a spending account for 2026 if no election during Open Enrollment is made.

What Do I Need to Do if I Waive Medical Coverage?

You must complete Open Enrollment by electing your waiver reason and submitting your elections. The County requires that you indicate your reason for waiving medical coverage every year so that the system will apply your excess Flex Credits to the appropriate spending account. The IRS has specific guidelines related to which type of spending account you are eligible for, based on your medical coverage.

- When waiving medical coverage, you are eligible for up to the employee-only level of flex credits.
- Flex credits cannot be paid as cash, so any unused flex credits will be forfeited.
- Proof of other coverage is not required.

[Click here to view Waiving County Medical Coverage FAQs.](#)

How Do I Add or Update Life Insurance Beneficiaries During Open Enrollment?

Access the MetLife website anytime of the year to designate your life insurance beneficiaries at www.metlife.com/mybenefits. The group name is County of San Diego. If you have not previously registered your account with MetLife, you will be prompted to create a username and password.

What are Flex Credits and How Can They be Used?

The County of San Diego's flexible benefit program provides you with a pay period allowance known as your Flex Credit. These are credits that you can use toward your benefit premiums. Flex Credits can be applied toward the cost of your health care plans, various supplemental insurances, and Spending Accounts.

How many Benefit Flex Credits do I get?

To see your Flex Credits and benefit plans, visit the [Benefit Plan Summaries by Union Code page](#).

What should I know about Flex Credits?

- They carry no cash value.
- Flex Credit amounts are based on your medical selection and job classification. If you choose waive medical or elect employee-only medical coverage, your Flex Credits will be up to the employee-only Flex Credit amount
- Flex Credits are applied to your premiums in the order of the elections listed in PeopleSoft.
- Remaining premiums/cost that exceed your Flex Credit amount is your out-of-pocket expense.

Where Do Excess Flex Credits Go If I Waive Medical Coverage?

- Flex Credits will first be applied to any benefit plans that you do elect.
- If you have eligible daycare expenses, you may want to consider electing a [Dependent Care FSA](#).
- Any remaining Flex Credits will be directed to the respective spending account based on your waive reason, up to the IRS plan maximums.
- Remaining Flex Credits less than \$5 per pay period and \$120 per calendar year will be forfeited.

[Click here to view Flex Credit FAQs.](#)

What are Spending Accounts and How do They Work?

During Open Enrollment re-enrollment is always required for Flexible Spending Accounts (FSAs) and Health Savings Account (HSAs).

When you enroll in an FSA or HSA, you decide how much you want to contribute annually, up to the IRS plan limits. The money you contribute is deducted from your paycheck, on a pre-tax basis, over 24 pay periods. By using pre-taxed dollars to pay for deductibles, copayments, coinsurance, and some other expenses, you may be able to lower your overall health care costs.

Here's how they work:

- Estimate your expenses for the upcoming year.
- Elect a Spending Account during open enrollment.
- Use the funds directly on eligible expenses during the covered period or pay out of pocket and request reimbursement.
 - HSAs with Optum Bank will have a debit card for your use.
 - FSA and HRA accounts with ASIFlex do not have a debit card, employees will submit a claim for reimbursement.

Can I contribute to a Health Reimbursement Account?

- HRAs are funded by County Excess Flex Credit contributions. If you have excess Flex Credits, they will automatically be allocated to the appropriate reimbursement account, based on your medical election.

Health Savings Accounts (HSA)

- HSAs are available if you enroll in a High Deductible Health Plan (HDHP) or waive the County's medical plan because you are enrolled in an HDHP elsewhere.

- HSA funds roll over from year to year and you own the account.
- HSA contributions can be changed at any time.
- If your spouse also contributes to an HSA, you will need to make sure you aren't exceeding the IRS family maximum. If your excess Flex Credits are funding an HSA and you need to have it reduced, please email Employee Benefits: DHRBenefits.FGG@sdcounty.ca.gov

Reminders:

- If you currently have an HCFSAs in 2025 and elect a High Deductible Health Plan (HDHP) and HSA during 2026 Open Enrollment, rollover FSA funds will be directed into a Limited Purpose FSA (dental and vision purposes only).
- If you currently have an HRA in 2025 and elect an HDHP and HSA during 2026 Open Enrollment, you will not be eligible for HRA rollover.
- Claims for eligible expenses incurred in 2025 are due to ASIFlex by March 31, 2026.

[Click here to view Spending Account FAQs.](#)

What is a High Deductible Health Plan (HDHP)?

HDHPs are medical plans that put you in control of your health care spending. They offer two main components:

- Under an HDHP, premiums are usually lower, but you have a high deductible that you must pay before the insurance company starts to pay its share.
- Health Savings Account (HSA): This is a type of savings account that lets you set aside money on a before-tax basis to pay for qualified medical, dental and vision expenses. By using pre-taxed dollars to pay for deductibles, copayments, coinsurance, and other eligible expenses, you may be able to lower your overall health care costs.

To be eligible for an HSA, you must meet the following requirements:

- You are covered under a high deductible health plan (HDHP).
- You have no other health coverage.
- You aren't enrolled in Medicare, Tricare or considered active-duty military.
- You can't be claimed as a dependent on someone else's tax return.

What if I am Newly Hired or have a Qualifying Life Event During Open Enrollment?

If you are a new employee hired during the County's Open Enrollment period, you must complete your New Hire elections first.

If you waive medical coverage or wish to continue a spending account in 2026, you must ensure that both your new 2025 elections and your 2026 Open Enrollment elections reflect this.

Please reach out to Employee Benefits at DHRBenefits.FGG@sdcounty.ca.gov for assistance during this time.

[Click here to learn more.](#)

Do I Need to Submit Paperwork for Changes Made During Open Enrollment?

If you are waiving your medical plan, you are required to complete Open Enrollment in Employee Self Service to indicate that you are waiving medical coverage. *No other proof of coverage is required.*

If you are enrolling a dependent in one of the County health plans (medical, dental, vision and/or critical illness) for the first time, you will need to provide proof of relationship:

- Marriage certificate for a spouse;
- Birth certificate(s), adoption paperwork, or legal guardianship documents for children;
- [Affidavit of domestic partnership](#) or certificate of registered domestic partnership for a domestic partner.

Please Note: Although you may have previously created a profile for your dependent(s), that does not mean you have previously provided your required supporting documentation. You can review your Dependent Profiles in PeopleSoft to see who has supporting documentation on file.

Documents can be submitted through the PeopleSoft – Employee Self Service “Document Upload” feature or by sending an email to the Employee Benefits Division at DHRBenefits.FGG@sdcounty.ca.gov.

Designation of a Primary Care Physician (PCP)

UnitedHealthcare – HMO and HDHP Members

UHC will automatically assign a Primary Care Provider (PCP) for newly enrolled UHC HMO and HDHP members.

- To designate your PCP effective January 1, 2026, contact UnitedHealthcare at (888) 586-6365 between December 18 -31, 2025. Otherwise, you can change your PCP at any time throughout the plan year.

If you are continuing your current medical plan with no changes, your provider will remain the same.

Delta Dental – DeltaCare DHMO Members

Schedule a visit with a DHMO network licensed provider. Upon your first visit, they will be assigned as your Primary Care Dentist (PCD)

Delta Dental PPO and VSP Members

Members do not need to designate a primary care provider and will not receive ID cards. These plans require the primary member’s social security number and date of birth. The provider’s office will contact the carriers directly for verification of enrollment.

Who Should I Contact with Questions about Open Enrollment?

[Benefits Ambassadors](#) are available throughout the County to assist with questions about Open Enrollment. If your department does not have a designated Benefits Ambassador, please reach out to another Benefits Ambassador from your group.

For more information, please visit the [Open Enrollment Website](#) or contact the Employee Benefits Division by phone at 888-550-2203 or email DHRBenefits.FGG@sdcounty.ca.gov.

How Can I Make Changes to my Open Enrollment elections?

Open Enrollment is available from October 6th through October 30th, 2025. You can access your enrollment as many times as you like to change your elections for plan year 2026, **just make sure that you confirm your final change is correct.**

Additional changes cannot be made after October 30th unless you experience a [Qualifying Life Event](#) outside of Open Enrollment.

Reminder: after you submit your final elections, print a copy of your confirmation page for your records. A confirmation will not be emailed to you.

How can I confirm my elections were submitted?

To confirm your elections have been submitted:

- Access PeopleSoft Employee Self Service where you made your elections
- Click on the Open Enrollment Tile
- Click on the Open Enrollment Summary tab (on the left)
- Review and print your Open Enrollment Summary for accuracy. This summary will show you your:
 - Plan elections and coverage level
 - Flex Credits and premium
 - **Employee Out of Pocket** cost in the right column
 - Covered dependents
- **You will not receive a confirmation email**

Please Note: Employee Benefits cannot confirm if you did your elections correctly as all employees and their dependents have different needs. Please review your summary for accuracy and save for your records.

You can make changes and new elections as many times as you like while Open Enrollment is available from October 6th through October 30th, 2025.