

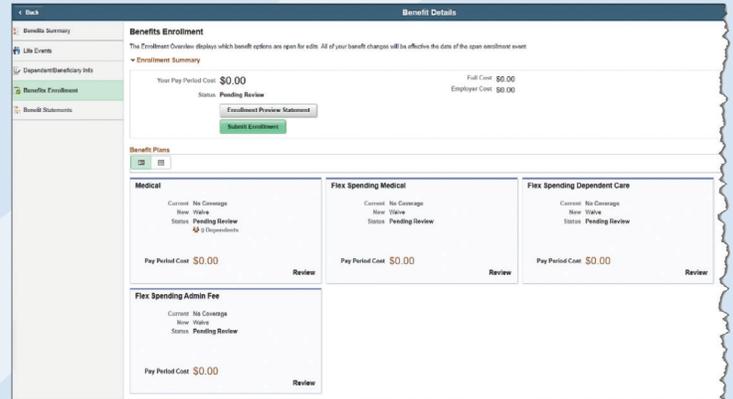
SUBMITTING YOUR OPEN ENROLLMENT ELECTIONS IN CARDINAL



You will use Cardinal HCM to make your online Open Enrollment elections.

- Access Cardinal before the Open Enrollment period begins by visiting <https://my.cardinal.virginia.gov/>. Be sure to validate or update your phone number, email and home address.
- Once in Cardinal **beginning May 2**, select **Cardinal HCM**.
- Click on the **Benefit Details** tile.
- Once the **Benefit Details** page displays, click the **Benefits Enrollment** list item on the left-hand side of the screen.
- When on the **Benefits Enrollment** page, click the **Start** button.
- The **Benefits Enrollment** page refreshes with the **Open Enrollment Benefits** displaying.
- Click the **Review** link within the **Medical** tile to begin the Open Enrollment process.

For detailed instructions, visit <https://www.cardinalproject.virginia.gov/sites/default/files/2022-02/ESS%20Open%20Enrollment.pdf>.



If you decide to make changes to your benefits enrollment **during the Open Enrollment period**, you can click on the **Benefit Details** tile > **Benefits Enrollment** and click on the **Re-Elect** button next to the Open Enrollment event. After Open Enrollment has ended, any changes to benefits elections need to be assessed and completed by your Benefits Administrator.

Questions? Contact your Benefits Administrator.

QUESTIONS AND ANSWERS ON YOUR HEALTH BENEFITS AND FSAs

Q. Do I need to do anything during the Open Enrollment period?

A. No election is required if you have no health plan coverage changes, and are not participating in Premium Rewards. You will need to take action to enroll in a flexible spending account (FSA) or to access or continue the Premium Reward for the 2022-2023 plan year. Please see page 2 for more information.

Q. How do I complete a health assessment during Open Enrollment if I make a plan change?

A. When making a plan change during Open Enrollment from one Premium Reward eligible plan to another (COVA Care/COVA HealthAware), employees must complete a health assessment with their **current** plan administrator between May 2 and May 16, 2022, for a Premium Reward effective

July 1, 2022. Employees should continue to update and complete a health assessment with their current vendor through June 30, 2022. Employees and/or spouses enrolling in COVA Care or COVA HealthAware during Open Enrollment may have to wait until July 1, 2022, to complete a health assessment.

Q. What do I need to do if I receive an error message when attempting to complete my health assessment?

A. Participants are typically receiving an error when using a state issued computer due to the system administrator limitations. These settings cannot be changed. Please attempt to access your health assessment by using your personal device to login to the plan's website or mobile app. Please see page 7 for information about how to access the health assessment.

Q. I typically make a Dependent Care FSA election during Open Enrollment to offset the cost of child care. What happens if dependent care centers are closed or have limited enrollments in the next plan year?

A. It is not recommended that you make an Open Enrollment election for the Dependent Care FSA in **anticipation** of enrolling your dependent into a valid childcare program in the fall. You are allowed to make a prospective election change during the plan year if services become available based on a dependent care cost or coverage change. You may also reduce or cancel your Dependent Care FSA if your services are reduced or cancelled. You must notify your Benefits Administrator to assist you with the mid-year election change within 60 days of the change.

Q. What should I do if I missed the Open Enrollment deadline?

A. The last day to make an Open Enrollment election, including FSA elections, is May 16, 2022. We are unable to accept health plan coverage changes or FSA election requests after the deadline. Your next opportunity will be at Open Enrollment 2023 or with a consistent qualifying mid-year event. Your health plan elections will remain as designated now if you did not make any changes. Since members must re-enroll every year for FSAs, you will not be enrolled in an FSA for the new plan year.

Q. What do I need to do if I am participating in a Health and Wellness program with my current plan and make an Open Enrollment election for a different health plan?

A. You will receive a letter from your new health plan providing you with guidance to continue engagement in the program(s). Typically, letters are mailed out after July 1. Also, you are encouraged to contact your new plan after July 1 for additional information.

Q. What if I want to add an eligible dependent to my health plan but I do not currently have the required documentation?

A. You need to make your election request on or before May 16. Do not miss the Open Enrollment deadline. The documentation can be submitted later.

Be Sure to Use Your Health and Wellness Programs

State and regional health plans offer employees and covered family members many types of health and wellness programs, from healthy lifestyle coaching to disease and maternity management. For details, visit <https://www.dhrm.virginia.gov/employeebenefits/health-benefits/active-employees>, Health and Incentive Programs, or consult your health plan brochure or plan website.

You also can take advantage of other wellness resources, such as WW and virtual and onsite sessions, through the CommonHealth workplace wellness program. Visit <https://commonhealth.virginia.gov/commonhealthvirginia.htm> or contact wellness@dhrm.virginia.gov.



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*As low as: price reflects WW Digital plan for Commonwealth of Virginia employees. Monthly payment required in advance. You'll be automatically charged each month in accordance with company pricing until you cancel, your employment with your organization terminates or the agreement between your employer & WW terminates. Offer available in participating areas only.

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Your Member Handbook is Online!

Health plan member handbooks are posted on the DHRM website at www.dhrm.virginia.gov/employeebenefits/health-benefits. Be sure to review your plan's member handbook and associated amendments for more details on recent changes to your plan. Members enrolled in a regional HMO can obtain their Evidence of Coverage from their health plan's website.

