2027 Open Enrollment FAQs

For eligible exempt and non-exempt employees (excluding SCA, union, and Davis-Bacon employees)

AT A GLANCE	
Coverage effective	January 1, 2027
Forms & presentation	www.chugachbenefits.org
Submit forms to	Your HR representative (CGS employees: also enroll in Dayforce)
New administrators	WEX (FSAs, HSA, commuter) • Lincoln Financial (voluntary accident, critical illness, hospital indemnity)

Topics in this FAQ

- Information and Enrollment Forms Q1–5
- Medical Coverage Q6–9
- Comparing Medical Plans and Understanding Rates Q10–12
- Dental Coverage Q13–16
- Vision Coverage Q17–22
- Healthcare FSA Q23–30
- Dependent Care FSA Q31–34
- Health Savings Account (HSA) Q35–39
- Commuter Benefits Q40
- Lincoln Life and Voluntary Benefits Q41–42
- Medicare Q43

Information and Enrollment Forms

Q1. What are the new benefits for 2027?

WEX will administer healthcare and dependent care flexible spending accounts (FSAs), health savings accounts (HSAs), and commuter benefits for transit and parking. Lincoln Financial will provide voluntary group accident, critical illness, and hospital indemnity insurance.

Q2. If I enroll, when is coverage effective?

The effective date for these benefits is January 1, 2027.

Q3. Where can I find the forms, and where should I submit them?

Forms are available at www.chugachbenefits.org. Submit completed forms to your HR representative, following your employer's instructions. CGS employees should also follow the Dayforce instructions to enroll in benefits.

Q4. Will a presentation or recording be available?

Yes. A presentation covering 2027 benefits is available at www.chugachbenefits.org.

Q5. What do I need to complete to remove dependents or change medical coverage?

- **CAC/CCH:** Use SF 2809 for FEHB medical changes. If you are also removing dependents from dental or vision, complete the Chugach enrollment form for those changes.
- **CGS:** Complete benefit changes in Dayforce, and complete SF 2809 for FEHB medical.

Medical Coverage

Q6. Can I enroll in FEHB if I already have other coverage, such as TRICARE?

Generally, yes, depending on the circumstances. Contact TRICARE, or your other carrier, to confirm coordination of benefits and which coverage pays first.

Q7. If both spouses work for Chugach, can one remain covered under the other spouse's medical plan?

Both spouses should enroll separately in employee-only FEHB coverage.

Q8. What happens when a dependent child turns 26?

FEHB coverage ends 31 days after the child's 26th birthday.

Q9. If I lose TRICARE after leaving the military, can I enroll during the year?

Loss of TRICARE can be a qualifying life event for an employee who is eligible for FEHB. Contact HR before coverage ends to confirm the required documentation, filing window, and effective date. OPM generally allows enrollment from 31 days before through 60 days after the loss of other group coverage. Eligibility and effective-date rules still apply.

Comparing Medical Plans and Understanding Rates

Q10. Can I compare my current 2026 plan with the 2027 options?

Yes. Use the FEHB Plan Comparison Tool on opm.gov: enter your ZIP code, select the tribal employee option, and identify your current plan by name or number. You can compare it with up to three options. Note: some discontinued Mail Handlers options may not appear on the website.

Q11. How can I identify my current health plan?

Check your insurance ID card or your payroll/benefits system. If the plan is not listed there, ask your HR representative for more information.

Q12. What does the TCC rate mean, and is it the employee premium amount?

Temporary Continuation of Coverage (TCC) is the federal program's counterpart to COBRA for continuing coverage after leaving employment. The TCC column shows the continuation coverage rate; it is not an active employee's share of the premium.

Dental Coverage

Q13. Is the dental benefit based on the calendar year?

Yes. The dental benefit year runs from January 1 through December 31.

Q14. How do FEHB dental benefits coordinate with MetLife dental?

Coverage and coordination depend on the specific FEHB and MetLife plans. Confirm with your carrier how claims should be submitted and how benefits coordinate; do not assume MetLife will pay the remaining balance.

Q15. Do MetLife dental cleanings have to be exactly six months apart?

Up to two cleanings are available per year, and an exact six-month interval may not be required.

Q16. Is periodontal preventive or maintenance care covered, including four visits rather than two?

Yes, it is covered at 80%. Contact Customer Service for limits and requirements.

Vision Coverage

Q17. What if there are no in-network vision providers in Guam?

Out-of-network benefits may apply, subject to the plan's reimbursement limits. An eligible healthcare FSA may help pay unreimbursed qualifying vision expenses.

Q18. Are vision benefits based on the calendar year or the date of the last service?

Vision benefits are measured from the date of the last service.

Q19. Why is the frame benefit lower at Costco, and does the independent eye doctor there have the same network status?

The lower warehouse-store allowance reflects existing discounts and the provider's contracting arrangements; the frame maximum at the Costco eyewear counter is $220. Independent eye doctors at those locations may have separate contracts and may not be in network. Confirm the individual doctor's preferred-provider status before your exam.

Q20. Does the vision surgery benefit include cataract surgery?

The benefit covers corrective procedures such as LASIK. Cataracts are treated as a medical condition, so cataract surgery falls under medical coverage rather than the vision plan.

Q21. Are Neurolens or specialized progressive lenses covered?

Standard single-vision, bifocal, trifocal, and certain lenticular lenses are covered in full. Specialized lenses may have an additional cost or may not be covered. Your provider can submit the specific billing codes to the vision carrier to confirm coverage and pricing.

Q22. Can I use $400 toward contacts and an additional $220 toward Costco frames?

Yes, provided these are two separate transactions: the first using the first-pair benefit, and the second using the second-pair benefit.

Healthcare FSA

Q23. Who administers the FSA?

WEX administers the healthcare FSA and the dependent care FSA.

Q24. Must I enroll in Chugach medical, dental, or vision coverage to elect an FSA?

No. Enrollment in a Chugach medical, dental, or vision plan is not required, provided you meet the FSA plan's eligibility requirements. However, a general-purpose healthcare FSA can affect HSA contribution eligibility for you, or for a spouse whose expenses it covers. A dependent care FSA is separate and does not by itself prevent HSA contributions.

Q25. Can I enroll in a healthcare FSA while enrolled in FEHB?

Yes, if you are not enrolled in a qualified high-deductible health plan. Coverage connected with an HSA or HRA can affect eligibility or compatibility.

Q26. Must I enroll in Chugach medical coverage to elect the healthcare FSA?

No. The FSA can be elected on its own. Coverage under a spouse's high-deductible plan and related accounts may affect your or your spouse's ability to contribute to an HSA or other account.

Q27. What happens to an FSA balance from a previous employer?

Contact the previous employer or its FSA administrator. An existing FSA balance does not automatically transfer to Chugach's new plan. Claims for eligible expenses incurred while that coverage was active may still be submitted within that plan's claim-submission period; coverage and continuation rules depend on the plan.

Q28. How does the healthcare FSA "use it or lose it" rule work?

Unused healthcare FSA money is generally forfeited unless the plan permits a carryover or grace period. This plan has a $500 carryover. The carryover does not apply to the dependent care FSA.

Q29. Can I use 2027 healthcare FSA funds to pay unpaid 2026 medical bills?

No. Eligibility is based on when the medical care was provided, not when the bill is paid. Expenses must fall within the applicable coverage period and plan rules.

Q30. Why is unused healthcare FSA money forfeited, and where does it go?

A healthcare FSA provides tax advantages under rules that generally require unused funds to be forfeited, subject to the plan's permitted carryover or grace period. Forfeited funds remain with the employer's plan and are handled under applicable rules. Estimate your expected expenses conservatively.

Dependent Care FSA

Q31. My husband's employer also offers a Dependent Care FSA (DCFSA). What is the maximum we can contribute?

The annual maximum is $7,500 per household, not per employer. You cannot both enroll for the full amount, and contributions above $7,500 to a DCFSA cannot be claimed as tax-free.

Q32. Can I have both a dependent care FSA and an HSA?

Yes. A dependent care FSA does not by itself affect HSA contribution eligibility, but you must still meet the HSA's other eligibility requirements. A general-purpose healthcare FSA is different and generally prevents HSA contributions while it covers you.

Q33. How do dependent care reimbursements work, and can I use the debit card?

- A debit card is not available for dependent care.
- After services have been provided, obtain a receipt showing the provider's tax ID or Social Security number, and submit the claim to WEX through the app, online, or by fax. Turnaround is usually about five days.
- Recurring expenses may qualify for automatic reimbursement with documentation from the provider.
- A private caregiver must report the income.

Q34. Can I claim dependent care expenses above the $7,500 FSA limit on my federal tax return?

You cannot use the same expenses for both tax-free dependent care benefits and the child and dependent care credit. Tax-free benefits reduce the expense limit used to calculate that credit. If you exclude the full $7,500, no expense limit remains for an additional federal child and dependent care credit under the current $3,000/$6,000 limits. If you use less, a credit may still be available, depending on your circumstances. The dependent care exclusion limit is $3,750 for married filing separately. Use IRS Form 2441 or consult your tax advisor.

Health Savings Account (HSA)

Q35. Is the HSA rollover limited to $500 per year?

No. The $500 amount relates to the healthcare FSA carryover, not the HSA. Unused HSA balances remain in the account from year to year. Annual contribution limits still apply.

Q36. Does Chugach match employee HSA contributions?

No. There is no employer HSA match. The account is funded by employee payroll contributions.

Q37. Who administers the HSA?

WEX will administer the HSA.

Q38. Do I have to transfer my existing HSA bank account to WEX?

No. An existing HSA may remain open. You may open a WEX HSA and contribute to it, or move your existing HSA balance to WEX. The WEX account is required for payroll contributions.

Q39. Can I make a one-time HSA contribution, or must contributions be spread over the year?

HSA contributions generally do not have to be spread evenly over the year. Eligible direct contributions made with after-tax dollars may be deductible on your federal tax return. Payroll options depend on your employer's setup. All contributions count toward the applicable annual limit.

Commuter Benefits

Q40. Is airport parking covered for a North Slope employee who parks their car to catch a flight to work?

Qualified parking generally means parking at or near the workplace, or at an eligible location used to continue a qualifying commute.

Lincoln Life and Voluntary Benefits

Q41. How do I cancel voluntary Lincoln coverage, and can I cancel during the year?

Voluntary Lincoln Financial benefits are paid with after-tax dollars and can be canceled at any time. Contact HR for the correct procedure.

Q42. Why do I see a beneficiary, but not my spouse's name, under optional spouse life coverage in Dayforce?

Your optional spouse life coverage is in place. Spouse information, including date of birth, is tied to the coverage. For CGS, Lincoln life/disability elections no longer use a paper form. Beneficiaries can be updated in Dayforce at any time.

Medicare

Q43. I will be eligible for Medicare soon. Which plan pays first: TRICARE, Medicare, or FEHB?

Direct Medicare questions to your carrier, your military/TRICARE benefits office, or our Medicare advisor partner, Angela Jurkovich, at (425) 448-2955. Identify yourself as a Chugach-affiliated employee with FEHB benefits. She can also help if you want to understand how your current coverage would work with Medicare.

Still have questions? Contact your HR representative, or visit www.chugachbenefits.org for forms and the 2027 benefits presentation.