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Open Enrollment Frequently Asked Questions

What is an active Open Enrollment?

An active open enrollment means that everyone must log in and make enrollment elections because your current health benefit elections will not rollover to the next plan year. This means that if you do not log in during open enrollment your current benefits will end on 12/31/2023.

When do I enroll for benefits?

You must complete your open enrollment elections between 10/02 - 10/23 to ensure you have health benefits coverage on January 1, 2024.

How to I enroll?

Paycom app or at Paycom.com

Enter your standard Centurion single sign-on (SSO) login credentials: your company email address and unique password that you use to access your Centurion-issued computer, Team Centurion email, and other SSO-enabled systems. Need to complete this answer with the steps in Paycom to enroll.

From the Notification Center, tap on 2024 Benefit Enrollment, review the instructions and tap "Start Enrollment". You will pre-enrollment questions, such as adding new dependents or beneficiaries. Then you will select if you review the benefit choices and select enroll or decline.

PASSWORD HELP: To self-reset your password, visit change.teamcenturion.com. For further password help, contact the 24/7 IT Help Desk at 800-305-0468 or helpdesk@teamcenturion.com.

What happens if I miss open enrollment?

Your current benefits will end as of 12/31/2023, except for company provided benefits (Short Term Disability and Group Term Life Insurance); Voluntary Life insurance, if you have previously enrolled; and pet insurance, if you have previously enrolled.

I made some changes to my benefits during Open Enrollment, when will they be effective? All new benefit coverage elections will be effective on January 1, 2024. All elections will be effective for the entire plan year, unless you experience a qualifying life event.

When will I see new benefit deductions?

Benefit deductions for the new plan year begin with the 1/5/24 paycheck.

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If I don't plan to enroll in benefits do I still need to complete Open enrollment?

Even if you do not plan to enroll please log in and waive the benefits you do not wish to enroll in. This will allow you to view all benefit plan options, and select your beneficiary for your company paid group term life insurance.

I want to keep my same benefits; do I still need to enroll?

Yes, because this is an active enrollment your current benefit elections will not rollover. This means you must log in and make health benefit elections or you will not have health benefits for the 2024 plan year.

What benefits will remain in place if I do not log in?

The only benefits that will rollover to next year if you do not complete your enrollment are your company provided short term disability and group term life insurance coverage, voluntary life insurance coverage, and pet insurance. Your 401(k) also will remain unchanged, as this is not included in open enrollment. All other benefits will end as of 12/31/2023 if you do not log in and complete enrollment.

Can I still call the benefit support center and have them enroll in my benefits for me?

No, with the transition to Paycom we have made it easier then ever to enroll in your benefits. You will still be able to call the support center to ask benefit questions, and they walk you through the enrollment process, but they will not have access to complete your enrollment for you.

Do I need to verify my dependents?

During open enrollment you will not be asked to verify your dependents. We've imported the dependent verification documentation received from the annual Consova audits, so if you have already completed our annual dependent audit in the past, you will not need to submit documentation again. If you have not been part of the annual dependent audit process, you will be asked to provide verifying documentation during our next Consova audit. Starting January 1, 2024 all **new** plan participants will need to provide dependent verification documentation at the time of enrollment.

What is the Working Spouse Surcharge on medical plans? How does it work?

Current law requires most employers to offer medical coverage to their full-time employees. This means many spouses have medical coverage available at their own place of work. When Centurion provides coverage to working spouses who have other coverage available, this creates higher costs for employees and Centurion alike. We want to make sure coverage is available to those who need it most.

Centurion adds a \$75.00 per month (\$34.62 bi-weekly) spousal surcharge to as a separate deduction when your spouse can enroll in his or her employer's medical plan, but chooses to

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enroll in our plan. You'll want to compare coverage and total costs together with your spouse to see which plans make sense for your family.

Who can I contact for Help:

- Benefits Call Center: 833-782-7404 8a-8p ET Mon-Fri
- Visit: employeeconnects.com/centurion to schedule an appointment with a benefits counselor.
- Email: <u>Benefits@teamcenturion.com</u>

Where can I find more information?

- https://cc.teamcenturion.com/Benefits/Pages/MHMDepartment.aspx (Lets update this to a link to OE Page once available)
- https://www.employeeconnects.com/centurion/
- https://app.smartsheet.com/b/publish?EQBCT=4cfac536e7d14c44ac764ac678aa6a04

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