

Open Enrollment Frequently Asked Questions (FAQs)

1. When is Open Enrollment?

Open Enrollment runs from **April 27 through May 15, 2026**. All changes must be completed within this timeframe.

2. When do my benefit changes take effect?

All elections and changes made during Open Enrollment will become effective **July 1, 2026**.

3. Do I need to take action this year?

Yes. All employees are required to make elections for:

- **Dental coverage**
- **Gym benefit**
- **Flexible Spending Accounts (FSA)**

If you do not enroll, you may lose coverage or not be enrolled in these benefits for the new plan year.

4. What happens if I don't complete Open Enrollment?

If you do not take action:

- You will **not be enrolled in dental, gym, or FSA benefits**
 - You may lose access to certain benefits for the plan year
 - Default or prior elections may not carry over
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5. What dental changes should I be aware of?

- You must choose between **Blue Care Dental** and **Delta Dental**
- Delta Dental is a new option with slightly higher premiums
- **Active enrollment is required**—you must select a plan

6. Do I need to re-enroll in the gym benefit?

Yes. You must sign up again this year to continue participation.

- Cost is now a **\$5 monthly payroll deduction**
- You can continue using the same gym facilities

7. What are the updates to Flexible Spending Accounts (FSA)?

- Medical FSA maximum: **\$3,400**
- Rollover limit: **\$680**
- Dependent Care FSA maximum: **\$7,500**

You must actively enroll to participate.

8. Can I add or remove dependents during Open Enrollment?

Yes. You may add or remove eligible dependents during Open Enrollment.

9. Do I need to provide documentation for dependents?

Yes. If you are adding dependents, you must provide **proof of relationship** (such as a marriage certificate or birth certificate).

Failure to provide documentation may result in your dependent being denied coverage.

10. How much are medical premiums increasing?

Medical premiums will increase by approximately **10%**.

- Single coverage: about **\$4.44 more per paycheck**
 - Family coverage: about **\$13 more per paycheck**
 - Refer to Rate sheet on CABQ webpage.
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11. Are there any pharmacy changes?

Yes. **GLP-1 medications for weight loss will no longer be covered** under the plan.

12. Where can I get help or learn more about my options?

You can:




- Attend an Open Enrollment meeting – employees are given 2 Hours PLO to attend.
 - Visit the Open Enrollment Fair on **May 7, 2026 (7:00 AM – 2:00 PM at the Convention Center)**
 - Access resources on the City’s website and eweb
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13. How do I make changes to my benefits?

All changes must be completed through **Employee Self Service (ESS)** during the Open Enrollment period. Refer to Open Enrollment Job Aide.

14. What if I have trouble accessing or using Employee Self Service (ESS)?

If you experience issues accessing ESS, help is available depending on the situation:

-  **Password Reset / Login Issues:**
Please contact the **IT Help Desk at 505-768-2930** for assistance with password resets or login problems.
 -  **Issues Submitting During Open Enrollment:**
If you are actively completing your Open Enrollment and have trouble submitting your elections, please contact the Insurance & Benefits office for assistance.
 -  **Benefits Questions or Enrollment Help:**
Call **505-768-3700** or email **employeebenefits@cabq.gov** for help with benefit options or enrollment questions.
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15. What should I do after July 1?

You are strongly encouraged to **review your paycheck after July 1, 2026** to ensure your benefit elections and deductions are correct.

16. What if I notice an error with my benefits or deductions?

If you identify any issues, please contact the Insurance & Benefits team immediately:

 **employeebenefits@cabq.gov**

Prompt reporting helps ensure corrections can be made as quickly as possible.