2026 Open Enrollment Frequently Asked Questions

Table of Contents

General Open Enrollment Questions

When is Open Enrollment?

2026 Benefits Open Enrollment will take place between Wednesday, November 5 and Wednesday, November 19, 2025. If you do not take any action by the November 19th deadline, you will not be able to make changes to your benefits until the next Open Enrollment period, unless you experience a Qualified Life Event during the 2026 Plan Year.

When do changes made during Open Enrollment go into effect?

Changes made during Open Enrollment take effect on January 1, 2026. All 2026 benefit plan contributions begin with your first paycheck in January.

Where do I enroll in benefits?

To enroll or make changes to your benefit plans or covered dependents, visit www.gpcbenefits.com, enter your site code (contact your HR representative for your site code), and select "Click Here to Get Started" on the Open Enrollment banner. Once you have reviewed the benefits information and are ready to enroll, click "Enroll Now" to go to the Graham Benefits Portal (enrollment site). If you do not have access to a computer or smart device, contact the Graham Benefits Center at 877.878.9898 between 8 am and 5 pm CT between November 5 and November 19, 2025.

How will I know if I successfully completed the enrollment process?

After you submit your elections, you will see a confirmation page that you can either print or save as a PDF. A confirmation number is included on the page, and you should refer to this number in the event you need to contact the Graham Benefits Center after enrollment to correct your coverage.

I don't want to make any changes to my current benefits coverage. Do I have to enroll to ensure I have the same benefits for the new plan year?

You do not have to re-enroll in your benefits coverage during Open Enrollment. If you choose not to take action, current 2025 Plan elections as well as responses to the tobacco/nicotine pledge and spouse access to other medical coverage (if applicable) will remain in place and rollover to 2026. **However, if you want to contribute to a Flexible Spending Account (healthcare/combination/dependent day care) and/or a Health Savings account, you must make a new election during Open Enrollment to continue participating in the New Year.**

I am a new hire. Will I have to enroll twice?

Yes, if you are eligible for benefits prior to January 1, 2026, you will need to complete your new hire elections and then complete your elections for the 2026 Plan Year. After you make your elections for 2025 and click 'submit' and 'accept', you will be prompted to make your elections for 2026.

What do I do if I have a qualified life event after I enroll/make changes to my coverage during Open Enrollment?

If you experience a qualified life event change after you have submitted your Open Enrollment elections, you can make applicable benefit plan changes online by clicking "Change Your Current Benefits" and selecting the Family Status Change event that is right for your situation. You will be prompted to enter the date of the qualified life status change (which can be no more than 31 days in the past) and then move on to make your 2025 changes. These changes may require you to revise your 2026 election; and if you need to, the system will prompt you to do so after you complete your event change.

What supporting documentation is required to add a dependent during Open Enrollment?

Visit www.gpcbenefits.com, on the left side click "Open Enrollment" and then you will see "Dependent Verification Documents" link to view the documentation needed to add a dependent during Open Enrollment.

My spouse also works for GPC. Are there any limits to what benefits I can elect for my spouse?
If you have a spouse or dependent child who works for GPC you may cover these dependents under your medical, dental and vision coverage as long as they do not elect coverage for themselves. These same rules apply to optional employee and spouse life and accidental death and dismemberment, accident insurance, hospital indemnity, critical illness and group universal life.

Healthcare Questions

Are the costs for medical, dental, and vision plans changing for 2026?
Rates for all benefit plans are subject to change each year, but for 2026, per your union contract, your weekly medical, dental and vision plan rates will remain the same. Rates for all benefit plans are in the 2026 Benefits Guide. If you do not make any changes to your coverage during Open Enrollment, you will remain in the same plans (except elections to an FSA or HSA you made in 2025) for the 2026 Plan Year and the new rates will apply effective January 1, 2026.

How can I choose or compare the available medical plans?
You can access the plan comparison in the 2026 Benefits Guide found on GPC Benefits website under the "Open Enrollment" page. You can also review the medical Summary Plan Documents (SPDs) from this website. Note these are the 2025 SPDs. The 2026 documents will be available by end of Q1 2065.

I and/or my spouse no longer use tobacco. How do I remove the surcharge from my medical coverage?
During Open Enrollment, you can update your responses to the tobacco/nicotine pledge questions by going to the Graham Benefits Portal (enrollment site) through www.gpcbenefits.com under "Open Enrollment" and click "Enroll Now". You option to call the Graham Benefits Center at 877.878.9898 and a representative will be able to make the update.

I am interested in quitting tobacco use. Is there a program available to assist me with my goal?
Yes, the HealthyGuidance Tobacco Cessation Program is available through our EAP provider, ComPsych. The program is designed to help you quit and to "stay quit". If you are currently enrolled in the medical plan and paying the tobacco surcharge, you can eliminate the surcharge if you complete the HealthyGuidance program. For more information about the program go to www.guidanceresources.com or call 866.511.3359.

Do I still have time to complete the requirements in order to receive the wellness credits in 2026?
Yes, you have until October 31, 2025 to complete activities to earn wellness credits for the 2026 plan year. To complete activities and check your wellness credit total, visit www.gpcbenefits.com, click "Well-Being" from the left side, and click the link from this page to access the wellness portal. Your wellness credit total as of 10/31/2025, is what you will earn for the 2026 plan year.

How does the deductible work under each medical plan if I am electing coverage for my family?
If you are enrolled in the PPO I or PPO II coverage begins for an individual member as soon his or her individual deductible is met. Once the family deductible is met, everyone in the family is covered even if their individual deductibles are not met. If you are enrolled in the PPO with HSA plan and elected to cover at least one dependent, you and your dependents are subject to the family deductible. Coverage will not begin until all family members' expenses add up to the family deductible.

Savings & Spending Accounts (FSA/HSA) Questions

Will any of my 2025 FSA balances roll over into the new year?
Yes, a minimum of $50 up to the applicable IRS limit of $680 will carry over to the 2026 Plan Year. Please note: the carryover amount for the healthcare and combination FSA will not be available until mid - April, 2026. Your dependent day care FSA balance will not roll over – your expenses must be incurred by December 31, 2025 and all receipts for expenses incurred during 2025 must be submitted by March 31, 2026, or you will lose your remaining account balance.

How long do I have to submit 2025 expenses to my Healthcare FSA?
You have until March 31, 2026 to submit all eligible healthcare expenses for reimbursement incurred through 12/31/2025.

I am enrolled in the PPO with HSA medical plan and don't want to make any benefit changes. Will I still receive the Company funding for 2026?
Yes, there is no action required to receive the Company contribution to your HSA Bank account if you are enrolled in the PPO + HSA plan for 2026. If you are not eligible to receive the Company contribution, ie: you are enrolled in Medicare or Tri-Care, in another plan outside of GPC or you are claimed as a dependent on your parent's tax return, you will have to contact the Graham Benefits Center to opt out of the Company contribution. If you would like to make your own contributions via payroll deduction to the HSA in addition to receiving the Company funding, you will be required to make this election in the enrollment system. You can access the enrollment system through a link at www.gpcbenefits.com. You may enroll or change employee contribution elections at any time during the plan year, but elections do not rollover from one plan year to the next.

If I change my medical plan election during Open Enrollment from the PPO I or PPO II plan to the PPO plus HSA plan for 2026 can I still use the rollover amount from my healthcare flexible spending account?
Any balance between $50 up to the applicable IRS limit of $680 in your Healthcare Flexible Spending account (FSA) will be automatically rolled over mid-April 2026 into a Combination Flexible Spending Account for use in the new plan year if you are enrolled in the PPO + HSA plan for 2026. This is required per IRS rules because you are not permitted to receive contributions (including Company funding) into a Heath Savings Account (HSA) if you have a balance in a Healthcare FSA. Funds in the Combination FSA can only be used for eligible dental and vision expenses until you reach the IRS medical deductible. Once you reach the IRS medical deductible, you must complete the FSA Deductible Verification form on gpcbenefits.com and submit to WEX. Once processed by WEX, you may use these funds for eligible medical and prescription expenses. Rollover rules will apply to the Combination FSA but will remain in this type of account until all funds have been used or your balance is below $50 and subject to plan rules as noted above.