



2026 Open Enrollment FAQs

What is Open Enrollment?

Open Enrollment occurs once per year when eligible employees can review, enroll in, or make changes to their benefits for the coming year. It's an opportunity to ensure they have the right coverage for themselves and their families. Once the enrollment window closes, changes cannot be made unless there's a Qualifying Life Event. This is an active enrollment cycle, so every eligible U.S. employee must select or decline coverage options.

What is a Qualifying Life Event?

A Qualifying Life Event is a change in your personal life that may impact you or your dependent's eligibility for benefits. Examples include:

- Change of Legal Marital Status (i.e. marriage, divorce, death of spouse, legal separation)
- Change in Number of Dependents (i.e. birth, adoption, death of dependent, ineligibility due to age)
- Change in Employment or Job Status (spouse loses job, etc.)

If you experience a Qualifying Life Event, please get in touch with your HR Business Partner, who should then connect with the [Benefits team](#).

When is Open Enrollment this year?

Open Enrollment opens on Nov. 5, and eligible employees must complete all actions before 11:59 p.m. MT on Nov. 21 to ensure their preferred coverage selections start Jan. 1, 2026.

What are the key highlights for 2026?

- Premium costs, both employee and employer paid, have been rebalanced to better reflect the Plan type and cost of coverage. Verra Mobility will continue to cover between 60-100% of premium costs.
- We will continue to offer an employee only and employee plus children election with a zero-dollar employee premium contribution.
- We continue to offer [Nayya](#)! Nayya is a decision support tool that will help you select the best healthcare options for you and your family.
- For Medical, the Enhanced High-Deductible Health Plan has an increased out-of-pocket maximum, and the cost of in-network medical services has changed to a copay schedule after the deductible is met.
- The Identity Theft Protection benefit is now a voluntary benefit with an employee-paid premium. This change allows for an Employee + Family coverage level.

How can I access Open Enrollment information?

You can access all open enrollment information, including the Benefits Guide



and plan summaries, on the Open Enrollment page of the [Total Rewards Website](#).

What if I miss the Open Enrollment deadline?

If you do not make elections by the deadline, you will forfeit benefits for the coming year. Changes outside of Open Enrollment are only allowed if there is a Qualifying Life Event, such as marriage, birth, or a change in employment status.

Are there options to cover family members or dependents?

Yes, you can add eligible dependents, such as spouses and children, to your health, dental, and vision plans. It's important to review the dependent eligibility requirements outlined in the 2026 Benefits Guide.

Where do I make changes and elections to my benefits?

Changes and elections should be completed in [Workday](#). Instructions and links are provided on the Open Enrollment page of the [Total Rewards Website](#).

How do I confirm my enrollment selection?

After completing enrollment, you will receive a confirmation on the screen and can email your Benefits Confirmation Statement to your work or personal email address.

Can I make changes after submitting my elections?

After submitting in [Workday](#), you cannot make changes in the system. You should contact the [Benefits team](#) who can assist with changes until the deadline on Nov. 22.

What if I have trouble accessing the benefits elections/portal in [Workday](#) or need technical support?

Please reach out to the [Benefits team](#) email address and we can help coordinate with the HRIS team to determine the issue.

Who can I contact with specific questions about my benefits?

You should start with the Benefits Resource Center (BRC). There are 2 ways to contact the BRC:

1. Call: 888-336-7463 (8 a.m. to 5 p.m. PST Monday through Friday)
2. Email: BRCCA@usi.com

Why did my monthly contribution increase?

There are several reasons why medical insurance costs are increasing. The costs of medical services, prescriptions, and treatments continue to rise, along with advancements in technology and the introduction of specialized procedures. When the overall cost of care increases, insurance premiums also rise to cover these expenses.

Additionally, as more people seek healthcare services, the demand for these service increases, which directly impacts their costs. The rising prevalence of chronic diseases and lifestyle factors leads to more frequent treatments, further driving up expenses. New prescriptions—especially those without generic alternatives—often come at a high price.

Moreover, changes in policies and regulations can affect what services insurers are required to cover, including coverage for individuals with pre-existing conditions.

These factors are just a few examples of what contributes to rising insurance costs.



For 2025, premium costs, both employee and employer paid, have been rebalanced to better reflect the Plan type and cost of coverage. Verra Mobility will continue to cover between 60-100% of premium costs. We also have several premium contributions that have decreased for employees this year as well, specifically in the HDHP options.

How do I know if my doctor or pharmacy is in-network for the new plan or if I'm considering the narrow network option?

You can access a directory of in-network providers. Links are provided on the Open Enrollment page of the [Total Rewards Website](#) to search the directory for your doctor or pharmacy. You can also call the Benefit Resource Center (BRC) for assistance.

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What happens if I go on a Leave of Absence during open enrollment?

The Benefits team will contact employees on a leave of absence via personal email and provide a link to MyVerraMobility, which can be accessed without VPN. If there is no response or you are unable to take action, the Benefits team will carefully manage the situation to ensure you enroll in or decline coverage.

Does a new hire need to enroll or decline coverage for 2025 and 2026 benefits during the open enrollment period?

Yes, the new hire benefit enrollment period lasts for 30 days from date of hire. New hires are required to elect or decline for benefits. Since 2026 is active enrollment, elections will not automatically rollover and they will also need to enroll or decline coverage for 2026. All elections should be completed in [Workday](#).

How do I update my 401k contribution?

Empower is our partner that manages the 401k retirement program. You must login to [Empower](#) to view or make changes to your 401k contribution. This cannot be done through MyVerraMobility.

If I have questions about taxes, how should they be addressed?

You are encouraged to speak to your financial adviser to discuss your personal situation and how decisions will impact taxes.

When are these new benefit elections effective?

Employees are currently making elections for the 2026 Plan Year. Current benefits will remain in place until December 31, 2025, and decisions made now will be in effect January 1, 2026.