

Open Enrollment for 2026 Benefits

October 20 – November 9, 2025

The 2026 open enrollment portal will open at 12:01 a.m. on October 20, 2025, and close at midnight, November 9, 2025. All changes made during open enrollment will be effective on January 1, 2026.

Prepare Now for Open Enrollment

- ✓ Login

<https://www.aflacatwork.com/williamson>

Your Employee ID is the first four letters of your last name and the last four digits of your Social Security number, or you can use your full Social Security Number (no dashes).

Your PIN is the last four digits of your Social Security Number and the last two digits of your year of birth.

- ✓ Login
- ✓ Access your 2025 benefits information and verify your email address.
 - Prior to October 20th, review your current coverage and make sure your correct email address is in the benefits portal.
 - All communication regarding open enrollment will be emailed to you at the email address you provide.
- ✓ You can find benefit information under “Find a document or form” in the upper right corner



- ✓ Consider your Options. During open enrollment, you have the option to:
 - Choose one of the new dental benefit options.
 - Update spousal information.
 - Review per pay period cost for coverage effective 1/1/2026.
 - Add or drop any medical, dental, or voluntary benefits.
 - Add or drop any dependent.
 - Make Flexible Spending Account election. You must make a new election to continue this benefit or enroll for the first time in 2026.
 - Make an election to contribute to a Health Savings Account (HSA). You must make a new election to continue this benefit or enroll for the first time for 2026.
 - Update beneficiaries for your life insurance policies.

Complete the Process October 20 – November 9, 2025

The Open Enrollment Benefits Portal will open at 12:01 a.m. on October 20, 2025

The online benefits system is easy to use, and will walk you through all of the benefits available, giving you the option to make changes or keep your benefits the same for 2026. Please complete the entire enrollment process in order to ensure your benefit choices are processed correctly upon submission.

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Your PIN is the last four digits of your Social Security Number and the last two digits of your year of birth.

- ✓ Sign, Print and Review
 - After making your benefit selections, sign with your PIN, and print the benefits confirmation. After printing your benefit confirmation, verify that your benefit choices are accurate for 2026.

2026 Open Enrollment Overview

This summary of benefit changes for 2026 will help you prepare for open enrollment. Plan documents, plan summaries, per pay period cost and other helpful information is provided in the benefits portal, under "Find a document or form".

<u>MEDICAL PLANS</u>	<p>In network out of pocket change. After deductible is met, employee's responsibility 20%.</p> <p>Medical plans with OAP network (Options 1 and 2) have a per pay period cost increase.</p> <p>If you do not submit a new election for 2026 by the deadline, your medical coverage will continue with the current network and at the same coverage level (i.e., no coverage, employee only, employee +1, family) for 2026.</p>
<u>DENTAL PLAN</u>	<p>Williamson County is offering 2 new dental insurance options that will be replacing the current dental plans. The current dental benefits with Delta Dental will end on 12/31/2025.</p> <p>Complete the open enrollment process, review the plan choices, per pay period cost, and choose a new dental plan that best meets your needs.</p> <p>If you do not submit a new election for 2026 by the deadline, your dental coverage will continue with same coverage level (i.e., no coverage, employee only, employee +1, family) for 2026.</p> <ul style="list-style-type: none">• Standard Enrollment will roll to DHMO Access Plus Network• Enhanced Enrollment will roll to the DPPO Total Network
<u>SPOUSAL SURCHARGE</u>	<p>Enrollment in the medical plan will prompt you to complete the Spousal Surcharge question regardless of marital status or adding a spouse on the medical plan. It is mandatory that you complete the online process and spousal verification questions.</p> <p>If you do not complete the open enrollment process or provide the required spousal information, you will automatically be charged the Non-Refundable Spousal Surcharge effective 1/1/2026.</p>
<u>H.S.A PARTICIPATION</u>	Your Health Savings Account remains active; however, to continue contributing to your HSA through pre-tax payroll deductions, you must complete the online process and make a new election for 2026.
<u>F.S.A. PARTICIPATION</u>	Your participation for 2025 will end on December 31, 2025. To continue contributing to the medical flexible spending account, dependent care flexible spending account or the limited purpose flexible spending account (LPFSA), you must complete the online process and elect your contribution for 2026.
<u>VOLUNTARY SUPPLEMENTAL BENEFITS</u>	<p>If you do not submit a new election for any of your voluntary benefits, your current election(s) will continue without interruption. It is important you complete the online process so that you are aware of any changes to your per pay period premium amount for 2026.</p> <p>Supplemental Life Insurance premiums are based on age. Long Term Disability premiums are based on age and income.</p>
<u>IS IT MANDATORY?</u>	Employees need to complete the online process and either enroll or decline each benefit available to them. By completing this process, you are made aware of all benefit programs, your enrollment options, and any changes in their per pay period cost for 2026.
<u>DO I HAVE TO COMPLETE THE OPEN ENROLLMENT ONLINE PROCESS?</u>	If you do not complete the online process, you will not lose benefits that do not require reenrollment for 2026.
<u>QUESTIONS ABOUT OPEN ENROLLMENT</u>	Submit open enrollment questions through the Benefits Communication System .



2026 Dental Insurance Options

Williamson County is offering 2 new dental insurance options that will be replacing the current dental plans. Current dental benefits with Delta Dental will end on 12/31/2025. You must complete the open enrollment process and choose a new dental plan that will be effective 1/1/2026. Below is a snapshot of the new dental options effective 1/1/2026.

DHMO Access Plus Network administered by Cigna	DPPO Total Network administered by Cigna
<ul style="list-style-type: none"> There is no deductible to meet, no annual maximum for services and no waiting periods. You Pay copays for services, which are found in the <u>Patient Charges Schedule</u>. You will also be responsible for paying lab fees for certain services. <p>Teledentistry</p> <ul style="list-style-type: none"> Teledentistry is available to members at a \$0 copay with no frequency limit. <p>Routine exams and cleanings</p> <ul style="list-style-type: none"> Oral evaluations are limited to a combined total of 4 of the following during a 12 consecutive month period. <ul style="list-style-type: none"> Periodic oral evaluations Comprehensive oral evaluations, and Comprehensive periodontal evaluations Cleaning-limit 2 per calendar year: can add 2 additional per year at copay of \$45 <p>Orthodontics</p> <ul style="list-style-type: none"> \$2,040 (\$85 per month for 24 months) children-up to 19th birthday for treatment fee only. \$2,376 (\$99 per month for 24 months) Adults for treatment fee only. Members pay full charge after 24 months No age limit <p>Waiting periods</p> <ul style="list-style-type: none"> There are no waiting periods. <p>Providers/Network</p> <ul style="list-style-type: none"> PRIOR TO AN APPOINTMENT WITH A GENERAL DENTIST, you must select and use a Cigna network general dentist from the DHMO list for the County's dental plan and let Cigna know of your choice. You may select a network pediatric dentist for your child under age 13; the dentist will be considered a specialist. Before enrolling, carefully check the network for your location. DHMO coverage is In-Network only Find a DHMO network dentist. 	<p>Deductible</p> <ul style="list-style-type: none"> In-network: \$50 single: \$100 family, per plan year Out of network: \$50 single: \$100 family, per year \$1,500 plan benefit maximum per person per calendar year <p>Cost</p> <ul style="list-style-type: none"> You pay deductible and coinsurance for services Provider negotiated fee (PNF), or maximum plan allowance, is the highest dollar amount of reimbursement for specific dental procedures provided by CIGNA DPPO in-network providers. The in-network dentist has agreed to not charge members or the plan more than the PNF. <p>Member coinsurance breakdown for in-network</p> <ul style="list-style-type: none"> Preventive: 0% Basic Restoration: services 20% after deductible Major Restoration: services 50% after deductible <p>Routine exams and cleanings</p> <ul style="list-style-type: none"> 2 routine office exams per calendar year <p>Orthodontics</p> <ul style="list-style-type: none"> \$1,500 lifetime plan benefit maximum per person No ortho deductible; 50% coinsurance Orthodontic services 50% <p>Waiting Periods</p> <ul style="list-style-type: none"> See summary of coverage for limitations and exclusions. <p>Provider/Network</p> <ul style="list-style-type: none"> You can use any dentist, but you'll save money and receive maximum benefits when visiting an in-network CIGNA DPPO dental plan. Find a DPPO Total network dentist.

	Monthly Cost	Per Pay Period WCG - 26	Per Pay Period BOE - 20	Per Pay Period BOE-22	Per Pay Period BOE-24	Submit open enrollment questions through the Benefits Communication System.
DHMO						
Employee	0.00	0.00	0.00	0.00	0.00	
EE+1	4.88	2.25	2.93	2.66	2.44	
Family	11.53	5.32	6.93	6.29	5.78	
DPPO						
Employee	\$6.23	\$2.87	\$3.74	\$3.40	\$3.11	
EE+1	\$14.45	\$6.67	\$8.67	\$7.89	\$7.23	
Family	\$28.28	\$13.05	\$16.97	\$15.42	\$14.14	