

2026 Employee Health Insurance Frequently Asked Questions

Nye Health Services offers you and your family comprehensive health insurance options via a dedicated, platform-based on direct access to the numerous options available in the individual medical insurance marketplace. The platform will allow you to compare plans and choose the coverage that best suits you and your family.

1. WHAT IS THE “INDIVIDUAL INSURANCE MARKETPLACE”?

- In every state across the country private insurance carriers offer individual medical insurance plans directly to consumers in most cases, also through the state-based public exchanges. We have partnered with benefitbay, a dedicated private exchange platform through which employees can compare, analyze and enroll in plans.

2. IS THIS BETTER THAN RENEWING OUR CURRENT GROUP INSURANCE PLANS?

- Yes. With respect to cost, this is a far better option than the unsustainable increases for our current group health plan offering. With respect to coverage, all employees will have exponentially more plans to choose from than today. The ability to compare multiple plans across several different insurance carriers provides a better opportunity for individuals and families to select a plan that best suits their specific needs.

3. HOW MUCH IS BEING CONTRIBUTED PER PERSON TOWARDS THE PREMIUMS FOR PLANS AND HOW WILL THE CONTRIBUTION BE PROVIDED?

- Eligible employees who select individual medical insurance coverage will receive a premium contribution. The premium contribution will be based on your age and location, which is consistent with how the premiums are determined in the individual insurance marketplace.
- We will be setting up Individual Coverage Health Reimbursement Accounts (ICHRA) for each eligible employee into which the monthly premium contributions will be made. Premiums for elected coverage will then be paid by us from the ICHRA. Employees will continue to have their portion of the plan premium deducted on a per-pay-period basis via payroll.
- Our age-based premium contributions for 2026’s goal is to set contributions at a level that allows most employees to secure substantially similar coverage to what they have access to today under our group insurance arrangement, for the same or less cost.

4. CAN I BE DENIED COVERAGE IN THE INDIVIDUAL MARKETPLACE FOR A PRE-EXISTING CONDITION?

- No. Individuals cannot be denied coverage for pre-existing conditions regardless of when they are enrolling.

5. CAN I CONTINUE TO CONTRIBUTE TO MY FLEXIBLE SPENDING ACCOUNT “FSA” AND DEPENDENT CARE ACCOUNT “DCA”?

- Yes. There will be no changes to the FSA and DCA options. As a reminder, these pre-tax savings vehicles are “use it or lose it” calendar year elections deducted from your paycheck in equal installments throughout the year and can only be used for eligible expenses. Please see our benefit internet site for full information on FSA enrollments for 2026.

6. WILL I HAVE HELP UTILIZING THE BENEFITBAY PLATFORM?

- Yes. The platform is from our strategic partner, benefitbay and is a user-friendly tool for comparing plans and making decisions. Your benefitbay account will be pre-populated with your home address, demographic information, dependent information (if already enrolled for coverage with our group health plan and the corresponding employer premium contribution. With this information pre-loaded you will be able to navigate the benefitbay platform and contact benefitbay's chat tool for support during the hours of 8 am to 7 pm EST., Monday through Friday. We will also have onsite support team members to assist!

7. CAN I GET HELP IF NEEDED WHEN I COMPARE INDIVIDUAL MEDICAL PLANS?

- Yes. There is a robust tool in the benefitbay system when you want to compare plans that are available during enrollment. You will have the option to call, email or chat with a benefitbay representative if you have questions. Additionally, if you would like to schedule a specific time to meet with an enrollment specialist, that option will be available through the benefitbay portal as well as in person during open enrollment.

8. IF I HAVE CLAIM ISSUES OR COVERAGE QUESTIONS DURING THE YEAR WHEN I USE MY HEALTH PLAN, WHERE CAN I GO TO SEEK ASSISTANCE?

- There are two resources for assistance after you enroll in a plan. First is through member services at your health insurance carrier. Their contact information will be on the back of your ID card. There is also the benefitbay Support email at Support@benefitbay.com .

9. WILL THERE BE ANYONE AT OUR ORGANIZATION TO HELP ME NAVIGATE THE TOOLS IN BENEFITBAY?

- We are committed to providing the information, education and support necessary for you to feel informed and confident in your decision making. In addition to the resources through benefitbay, we will be supplementing open enrollment through multiple education meetings, recorded videos and several onsite meeting locations. In the end, only you can decide which plan is best for you and your family, and we are here to help guide you through your decision tools.

10. WILL I NEED TO PAY THE PREMIUM UPFRONT FOR THE PLAN I SELECT? HOW WILL THIS WORK?

- The only premium payment you need to personally make is through payroll deduction just as we do with the current group health plan.
- Premiums are paid in advance for the subsequent month, just like today. As referenced in question #3 above, We will pre-fund your ICHRA account and pay your plan premium out of that same account. As an example, during June, we will pre-pay your July individual insurance premium. During July, your portion of the premium will be deducted on a pre-tax basis via payroll. We will continue to pre-fund your ICHRA account and pre-pay your monthly premiums while you are actively employed and eligible for coverage.
- benefitbay will set up your payments on your behalf, please watch for any communications from benefitbay as they may need your assistance with the carrier.
 - **DO NOT ENTER YOUR PERSONAL CHECKING INFORMATION.**

11. IF I ALSO ELECT TO COVER MY SPOUSE ON A MARKETPLACE PLAN AND HE/SHE IS IN A DIFFERENT AGE BRACKET THAN MYSELF, HOW IS MY PREMIUM CONTRIBUTION DETERMINED?

The premium contribution for each dependent is based on the allowed employer defined contribution based on enrollment tier

12. HOW MANY MARKETPLACE PLANS CAN I CHOOSE FOR MY FAMILY?

- You have multiple options. If you choose, you have the ability to select different options for the adult members of your family. For example, if you and your spouse have different healthcare needs, you could select one plan for yourself, and enroll your spouse in an entirely different option.

13. IN GENERAL, HOW ARE THE PREMIUM CONTRIBUTIONS GOING TO TREND BY AGE CATEGORY?

- In recognition of the fact that health insurance plans cost more the older you get, we will be scaling our premium contributions accordingly. In other words, the older an employee is, or based on the number of dependents covered, the higher the employer contribution. This provides the same buying power to all.

14. WHAT IF I HAVE A QUALIFIED LIFE EVENT DURING THE COURSE OF THE YEAR AND NEED TO LOOK AT DIFFERENT HEALTH PLAN OPTIONS?

- Some examples of a qualified life events include getting married, having a baby, moving to a different state, getting a divorce or your spouse losing coverage under their employer's plan. If you experience a life event you will need to login to your benefitbay portal and process the life event to update your coverage.

15. DO THE PLANS ON THE MARKETPLACE MEET ACA MINIMUM ESSENTIAL COVERAGE REQUIREMENTS?

- Yes. All individual health insurance plans offered meet this requirement.

16. WILL A PREMIUM CONTRIBUTION ALSO BE AVAILABLE FOR EMPLOYEES AND DEPENDENTS AGE 65+ WHO HAVE TO GO ON MEDICARE?

- Yes. The premium contribution for employees and eligible dependents will increase by age band, including for those at or beyond age 65.

17. WHAT IF I TURN AGE 65 DURING THE 2026 YEAR?

- If you turn 65 during the calendar year of 2026, it will be considered a qualified life event and you will need to enroll in in a Medicare plan. The individual marketplace does not offer plans for individuals who are age 65 or older. To assist our Medicare eligible employees, we have contract with Doctor's Choice. Doctor's Choice helps individuals approaching Medicare either due to age or disability navigate the complexities of the Medicare system. You will be notified approximately 120 days prior to your birthdate or at open enrollment. At that time, you can use your benefitbay portal to access Doctor's Choice, or you can use our custom site <https://medicarecheckup.com> to set up a meeting with a qualified specialist to discuss your Medicare plan options.

18. CAN I CHOOSE NOT TO ELECT A HEALTH INSURANCE PLAN ON THE MARKETPLACE AND INSTEAD USE THE PREMIUM CONTRIBUTION TO PAY QUALIFIED MEDICAL EXPENSES?

- No. Much like today, contributions to the health insurance premiums are only available for employees enrolled in coverage. The ICHRA premium contribution is a federally legislated vehicle through which and employer can fund your health insurance plan.

19. IF I CHOOSE TO REMAIN ENROLLED ON MY SPOUSE'S PLAN AT ANOTHER EMPLOYER, WILL I RECEIVE A CONTRIBUTION AN EMPLOYER CONTRIBUTION TOWARD THAT PREMIUM?

- No. Much like today, contributions toward the cost of health insurance are only made available when enrolled in our plan.

20. WHAT IF I AM CURRENTLY ENROLLED IN MEDICAID PREMIUM ASSISTANCE?

- If you are currently enrolled in premium assistance through Medicaid, you will need to contact their office and advise them that your employer is no longer offering a group health plan after 07/01/2026. Discuss with Medicaid the options for you and your family.
- If you are eligible for Medicaid you can compare their premium options with the plans and premium options available through the benefitbay platform before making any final enrollment decisions.

21. HOW DOES INDIVIDUALIZED HEALTH INSURANCE ON THE MARKETPLACE WORK FOR A FAMILY OF THREE VS. A FAMILY OF FIVE, AND HOW WILL THE PREMIUM SUBSIDY CONTRIBUTION DIFFER?

- As you've read, the cost for individual health insurance plans are age and location based. Likewise, so will the premium contributions. Currently, all individual marketplaces cap the cost for a family at four enrolled members and the cost is based on the four oldest covered members. So, if you have (3) eligible family members enrolled your cost of coverage will be based on their (3) ages. If you have (6) eligible family members enrolled your cost of coverage will be based on the (4) oldest. The age-based premium contributions will mirror each scenario.

22. WHAT IF I AM NOT INTERESTED IN THE ICHRA PLAN OFFERED?

- If you are not interested in enrolling in ICHRA and selecting an individual insurance plan we have offered, you must go into the benefitbay system, via the link sent to your designated email address, and WAIVE/DECLINE the offer of coverage.

23. WHAT SHOULD I DO WHEN I RECEIVE CORRESPONDENCE FROM MY NEW INDIVIDUAL HEALTH INSURANCE PLAN AFTER ENROLLMENT?

- **DO NOT IGNORE IT.** You now have an individual insurance plan. You will be the only one receiving information from your chosen health insurance carrier. You will likely receive a welcome email from your new health plan once you are enrolled. We strongly encourage each enrolled employee to set up a username and password for your new carrier's member portal. This portal will provide important information regarding claims, coverage options and additional benefits available through your new health insurance plan.

IMPORTANT: Some health insurance carriers allow the initial payment of premium, and automatic monthly insurance payments to be set up with benefitbay during your initial enrollment. There are also carriers that require members to be enrolled first, and then they send an email after your enrollment had been processed, to set up payment. If you receive this communication, please contact support@benefitbay.com for assistance.