

2026 Open Enrollment Frequently Asked Questions

Open Enrollment for 2026 Benefits Sept. 29 – Oct. 10, 2025

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Enrollment Questions

1. When is Open Enrollment?

Open Enrollment begins Sept. 29 and runs through Oct. 10, 2025.

2. Who should enroll in benefits?

All benefits-eligible cares, including new hires, individuals on a leave of absence, severance, and COBRA are strongly encouraged to enroll in benefits. COBRA enrollment will take place Oct. 6-22.

3. What happens if I don't enroll?

Re-enrollment is required for savings/spending accounts this year. If you do not enroll in these programs, you will not have coverage for 2026. All other benefits will carry forward.

4. How do I enroll?

To enroll, access the Bswift enrollment platform by visiting Inside Premier > All Quick Links > Employee Resources > "My Benefits". Bswift can also be accessed via the link in the References section on the homepage of the [Caregiver Experience Center](#).

5. Do I need to be connected to the Premier Health network to access the enrollment website?

No, if you are not at work or are not connected to the network, you may login directly by visiting www.premierhealth.bswift.com.

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6. What is my user ID and password to access the Bswift enrollment platform if I am enrolling outside of the Premier Health network?

Your user ID is your employee ID number; your password is the last four digits of your social security number. Please note, passwords are reset each year ahead of Open Enrollment.

For Fidelity Health Caregivers:

Log in with your employee number (this is located on your ADP page as position ID) – do not put in the G4L or any leading zeros. For example: for Position ID G4L012345, only put in 12345 as your ID.

7. I cannot access the Bswift enrollment platform using my Premier Health credentials. What should I do?

If you have trouble logging in, click on the Forgot Password link to reset. If you are still unable to log in, contact Bswift at 1-866-524-5063. Representatives are available Monday – Friday, from 9 a.m. to 7 p.m. ET. If customer service cannot assist, enter a case through the Caregiver Experience Center and a benefits team member will assist you.

8. How can I enroll if I don't have a personal computer or mobile device or am having troubles enrolling through the website?

Benefit counselors will be available on-site this year. They are also available virtually or by phone to assist caregivers with enrolling in their benefits. You may [schedule an appointment online](#) or by calling 888-361-3942, Monday – Friday, from 7 a.m. to 7 p.m. ET.

9. What is the best internet browser to access the Bswift enrollment platform?

If you are connected through Premier Health's network, you will not have any browser issues. If you are connecting through a personal device, the enrollment site works best with the most recent versions of Microsoft Edge, Firefox, Chrome, and Safari.

10. When viewing my profile, I noticed that my personal information is incorrect. How do I make updates?

If you notice an issue with your personal information, please continue with your enrollment. Afterwards, immediately visit the Caregiver Experience Center and click on "My Profile" to view the information currently on file with Premier Health. If a change is necessary, please submit an [Employee Profile Update](#) request.

11. Can I make changes to my enrollment if I change my mind after Open Enrollment?

You may go in and out of the enrollment platform as often as you'd like during Open Enrollment. Should you need to make changes after this period, you must have a qualifying life event.

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12. My spouse's enrollment is after Premier Health's Open Enrollment. What should I do?

It is recommended that you complete your Premier Health enrollment during the election window. If it is determined that you would like to enroll in your spouse's insurance, contact the Benefits team by submitting a [benefits inquiry in the Caregiver Experience Center](#) and a member of our team will provide further instructions.

13. I am considering enrolling in Medicare for 2026. What should I be aware of going into Open Enrollment?

If you are considering enrolling in Medicare for 2026, it's important to understand that as soon as you elect or sign up for any part of Medicare, your eligibility to participate in an HSA ends.

Additionally, if you decide to maintain your Premier Health medical coverage and enroll in Medicare, your Medicare coverage will pay secondary. A helpful resource to review is the [Medicare and You Brochure](#). If you have questions about Medicare, please contact Health Advocate.

14. I am a new hire. Do I need to complete Open Enrollment?

Yes, but you must first complete your enrollment for benefits for the remainder of the calendar year. From there, you will need to complete the 2026 enrollment. This is the one opportunity (outside of a qualifying life event) for you to elect new plan options and update your savings or spending account values for the year ahead.

15. If I elect an HSA account, is it automatically activated?

No. If you elect to participate in an HSA account, you must activate your account separately by logging onto www.netbenefits.com/atwork or calling Fidelity Investments HSA at 800-343-0860.

16. If I elect a Limited Purpose HRA (LPHRA), how soon will I see funds appear in my account?

If you have a balance remaining in the traditional HRA program as of Dec. 31, 2025, those funds will be transferred to your new LPHRA account by mid-February 2026. [View the LPHRA FAQs](#) for more information.

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17. I completed the biometric screening, health risk assessment and annual physical/well woman exam to qualify for the premium discount. When will it reflect on my enrollment?

You will not see the wellness rate immediately reflected when you complete Open Enrollment. If you completed the requirements for the premium discount, an acknowledgement will appear in the Bravo portal, indicating you've completed the required tasks. The wellness premium rate will be reflected on your first paycheck of the new year. You are encouraged to review your pay statement to ensure the change has occurred. If you find a discrepancy, please submit an [Caregiver Experience Center](#) case and a member of the Premier Healthy Living team will respond to your inquiry.

18. When will I see the Premier Healthy Living Incentive of \$500/\$1,000 deposited into my HSA or HRA account?

You will see the deposits to your account no later than the last pay period in January 2026.

19. If I leave Premier Health, will I be able to take my FSA, HRA, LPHRA, or HSA balances with me?

It depends. You will not be able to roll over any accumulated funds from the Health Reimbursement Arrangement (HRA) or Limited Purpose HRA, as those accounts are owned by Premier Health.

The Health Savings Account (HSA) and its accumulated balances are caregiver-owned and are transferrable to another employer's HSA program.

Flexible Spending Accounts (FSA) have a use-it-or-lose-it provision and are not transferrable. You can however, elect the COBRA option to utilize any remaining balances for the current year in which you separate.

20. How do I take advantage of the free Calm Membership?

All caregivers are eligible for this benefit! You may sign up for a Calm Premium subscription by visiting Premier Health's unique employer registration link. [View these detailed FAQs](#) for more information on the free Calm membership.

21. How do I enroll in AblePay Health to get discounts on my provider bills?

AblePay is a no-cost program that provides savings and flexible payment options, a convenient payment portal, and billing support for your out-of-pocket medical expenses. You can sign up by going to <https://enroll.ablepayhealth.com/apply>.

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Medical Questions

- 1. If my spouse has health insurance through their employer, are they allowed to participate in the Premier Health medical plan?**

No. If your spouse has access to health insurance through their own employer, they are not eligible for enrollment in a medical plan. They are, however, eligible for other coverages such as dental, vision, etc.

- 2. My spouse is self-employed. Are they allowed to participate in the Premier Health medical plan?**

Yes. If your spouse is self-employed and does not have access to health insurance, they may be enrolled into the medical plan of your choosing.

- 3. I am on my spouse's insurance. Can I get a stipend since I do not enroll in Premier Health's insurance plan?**

Unfortunately, Premier Health does not offer a stipend for caregivers who choose not to enroll in our health insurance plan. Our goal is to encourage participation in our health plan to ensure that all caregivers have access to comprehensive health care coverage.

Even though you are not enrolled in our health insurance programs, you *do* have company-paid access to life insurance and AD&D coverage, our Employee Assistance Program, a free Calm Mindfulness app subscription, free back-up child and adult care giver support, and other benefits outside of health insurance.

- 4. My dependent is currently 25 but will be turning 26 in 2026. Can I enroll them in Premier Health insurance?**

Yes, your dependent will have access to coverage until the end of the month in which they turn 26.

- 5. I am adding new dependents to my insurance this year. Does Premier Health have a dependent verification process?**

Yes. As part of our ongoing effort to spend our medical plan dollars wisely, we want to make sure that everyone enrolled in our plans is truly eligible. Your dependent elections will "pend" until our benefits enrollment administrator receives the requested documentation. To view a list of eligible dependents and acceptable documents, [click here](#).

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6. Will I receive new health insurance cards for 2026?

No, Anthem is moving to digital cards effective Jan. 1, 2026. Member ID cards and other documents (Explanations of Benefits, plan letters, legal information) will be delivered digitally through email, the Sydney app, or the Anthem.com website.

7. How can I confirm my provider is in Anthem's networks?

Go to anthem.com/find-care. Search as a Guest > Select Medical for Plan Type/Network > Select State > Select Medical (Employer-Sponsored) > Select Blue Connection (BlueHPN), Premier Health Blue Access (Ohio caregivers only), or National BlueCard PPO (out-of-state caregivers).

Pharmacy Coverage and Savings

1. How do I verify that my prescription is covered through the pharmacy program?

If you are not currently enrolled in a Premier Health medical plan, you may contact a pharmacy member advocate at 844-257-1955 to confirm prescription coverage.

2. I thought we had Anthem insurance – who is TrueScripts?

Anthem is the administrator for Premier Health medical benefits (doctor visits, hospital stays, etc.). TrueScripts is the Pharmacy Benefit Manager for the Premier Health insurance plan. TrueScripts works with Premier Health benefits and pharmacies to bring you the most affordable prescription program possible.

3. How is Premier Health's insurance able to keep my prescriptions so affordable?

The Premier Health Total Rewards Benefits Team works with TrueScripts to develop programs that help control the high costs associated with prescription services. By leveraging usage of the Premier Health pharmacy, we can pass those savings on to you. Our goal is to always offer the most affordable prescription options available.

4. How do I save money on my prescriptions?

Being the preferred network pharmacy, Premier Health's pharmacy offers the lowest copay/coinsurance options for Premier Health insurance members and can also offer 90 day fills at a reduced rate. Premier Health's pharmacy and TrueScripts work together to further maximize your savings by helping you enroll in other pharmacy savings programs (often offered by the drug manufacturer) when available.

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5. What kind of savings can I expect?

Below are two examples of commonly used medications:

	Pharmacy	Day Supply	Copay	Annual Cost	Annual Savings
Generic Inhaler: Budesonide/ formoterol	External	30 days	\$35	\$420	None
		90 days	Not applicable		
	Premier Health	30 days	\$15	\$180	\$240
		90 days	\$37	\$150	\$270
Brand Drug: Eliquis	External	30 days	\$70	\$840	None
		90 days	Not applicable		
	Premier Health Pharmacy	30 days	\$10 (with manufacturer coupon)	\$120	\$720
		30 days	\$45	\$540	\$300
		90 days	\$112.50	\$450	\$390

These are just examples. Costs and savings will vary based on medication, insurance plan, and availability of manufacturer copay programs. But as you can see, the Premier Health pharmacy can help you achieve savings on your medications. In addition, by offering 90-day fills, you do not have to go to the pharmacy as many times as you normally would.

Diabetic Prescriptions and Supplies

1. I heard something about FREE generic diabetic medications and supplies. Can you tell me more?

Diabetic medications that are considered preventative glucose lowering agents or insulin will qualify for the \$0 Premier Health Diabetic Pharmacy Tier. [Click here for a list of medications that qualify.](#) If your medication is not listed, contact a Premier Health pharmacy to confirm if the medication has been updated after the date of this publication.

Members of the plan benefit from:

- Generic diabetic medications filled at a Premier Health pharmacy available for \$0.
- Diabetic supplies such as continuous glucose monitors (e.g., Libres, Dexcoms, etc), glucose meters, test strips, lancets and pens obtained at a Premier Health Pharmacy available for \$0.

Note: Diabetic pumps and pump supplies are not included in this offer and are not available by the Premier Health pharmacy. Contact TrueScripts and/or Anthem to confirm where you would be able to purchase these types of equipment.

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2. What about brand name diabetic medications? Can I save on those too?

Yes, brand name diabetic medications that are considered preventative glucose lowering agents are available at no cost to enrolled health plan participants, however, an additional step is needed to obtain the brand name medications for free.

3. What are examples of brand name diabetic medications that are available at no cost through the Specialty Pharmacy?

Brand name diabetic medications (such as Mounjaro™, Ozempic™, Trulicity™, Jardiance™, and many others) will qualify for no caregiver cost share if EACH of the following requirements are met:

1. The brand name drug is considered a preventative glucose lowering agent;
2. Member has an annual consultation with a Premier Health diabetic pharmacist;
3. Prescription is filled and delivery is arranged by the Premier Health pharmacy; AND
4. Member's prescriber participates in the Premier Health Diabetic Pharmacy Program and has a working agreement with the Premier Health diabetic pharmacy staff.
 - **Note:** Premier Health's specialty pharmacy can confirm if an agreement is in place with a member's provider. Simply contact the Premier Health Diabetes Program at 937-438-3711 or the Premier Health specialty pharmacy at 937-208-0330 to inquire about the program.

4. What is a consultation with a Premier Health diabetic pharmacist?

This consultation is designed to help members get answers to their questions about diabetes and the medications used to treat it. Our diabetic pharmacists are specially trained in diabetes and will spend time discussing your condition and will ask questions to help determine the optimal therapy for the member. Consultations can take place in person or by phone, and will be arranged at your convenience by the pharmacist. Members may schedule additional consultations, as needed, to ask additional questions or get updates on their treatment process.

Note: Brand name prescriptions are expected to require a consultation. A consultation is required for dependents who are participating in the program to use brand name medications, even if the dependent is a child.

5. What if I do not fill my diabetic medications at a Premier Health pharmacy?

Any fills of diabetic medications and supplies outside of Premier Health pharmacies are subject to retail plan copays or coinsurance after deductibles have been met.

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6. Who should I contact with questions about the new Premier Health Diabetic Pharmacy Tier?

Premier Health Specialty Pharmacy
3170 Kettering Blvd., Building B
Moraine, OH 45439

Phone: (937) 208-0330
Fax: (937) 641-2722
Email: phspecialtypharmacy@premierhealth.com

Premier Health Pharmacies

1. Where are the Premier Health pharmacies located?

There is a pharmacy located at each Premier Health hospital and on the Fidelity Health Care campus in Moraine. Hours of operation vary, so check with the pharmacy location most convenient for you.

Premier Health Pharmacy Location	Phone
Atrium Medical Center	513-974-5045
Fidelity Health Care	937-208-7966
Miami Valley Hospital	937-208-4848
Miami Valley Hospital North	937-734-5834
Miami Valley Hospital South	937-438-6630
Upper Valley Medical Center	937-440-4262

2. How do I transfer my prescription to a Premier Health pharmacy?

Contact the Premier Health pharmacy most convenient for you and ask them to have your prescriptions transferred from another pharmacy. Please have the following information available when you call:

- Name and location of your current pharmacy
- Where the prescription is being held
- Medication name or prescription number

3. Can I pay for my prescription drugs through payroll deduction if they are filled at a Premier Health pharmacy?

Applicable charges for prescriptions may be paid by payroll deduction, cash, or credit card at any of the Premier Health pharmacies.

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4. **None of the Premier Health pharmacies are convenient for me to use. Can I still take advantage of the savings?**

Caregivers enrolled in a Premier Health medical plan are eligible for free delivery utilizing the concierge delivery program.

Concierge Delivery Program

1. **What is the concierge delivery program and who is eligible?**

This program is for Premier Health caregivers and family members on the Premier Health Plan. Deliveries are made in-person to a location that works best for you, including your home or work site.

You are eligible if you meet any of the following requirements:

1. You do not work at a hospital where a Premier Health pharmacy is located;
2. You work 2nd or 3rd shift at a Premier Health hospital*; OR
3. You have special circumstances that prohibit access to a Premier Health pharmacy.

* If you work 2nd or 3rd shift, you have the option to set up delivery service or arrange for pick up during your shift at an inpatient Premier Health pharmacy.

2. **Is there an additional charge for the concierge delivery program?**

The concierge delivery program is FREE to qualifying members of the Premier Health Prescription Plan.

3. **What is the service delivery area for the concierge delivery program?**

Deliveries will occur between 9 a.m. and 5 p.m., Monday – Friday. The service delivery area boundaries are Sidney to the north, the Indiana border to the west, Springfield to the east, and Northern Cincinnati/Hamilton to the south. Caregivers living in Ohio, but outside this area, may have prescriptions delivered by mail.

4. **Who should I contact with questions or to sign up for the Premier Health concierge delivery program?**

Contact Premier Health pharmacy's Fidelity location at 937-208-7966 between the hours of 9 a.m. and 5 p.m., Monday – Friday or email

FidelityRetailPharmacy@premierhealth.com

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5. I had a doctor's appointment this morning and I am supposed to start a new medication. Can I get that delivered today?

The concierge delivery program is not designed to do same-day or next-day deliveries. The delivery service is for maintenance medications that are normally taken for an extended duration. The concierge delivery program will work with you to make timely and convenient deliveries.

If you get a prescription for a medication that needs to be started same-day or next-day (for example, an antibiotic), please request the prescription to be sent to a pharmacy that is most convenient for you. In-network pharmacies include CVS, Walgreens, Walmart, and Kroger. These pharmacies can do a one-time fill for a new 30-day prescription for the same copay as the Premier Health pharmacy. This allows members on the plan the convenience of obtaining new prescriptions to avoid a delay in therapy without additional costs.

Limited Purpose HRA

1. What is a Limited Purpose HRA?

A limited purpose health reimbursement arrangement (HRA) is a reimbursement account that can be used for qualified dental and vision expenses. This type of account is the only type of HRA that can be paired with a Health Savings Account under Premier Health's Medical Plans.

2. Which Premier Health plans does a Limited Purpose HRA pair with?

The LPHRA is available to caregivers who enroll in a High Deductible Health Plan (Blue Connection HDHP or Blue Access HDHP). You must enroll in this plan during annual Open Enrollment.

3. Can I contribute to the Limited Purpose HRA plan?

No, HRAs – either the traditional or limited purpose – cannot be contributed to; they are funded by Healthy Living dollars. If you enroll in an HDHP plan, Healthy Living dollars will be loaded into an HSA. Your old HRA dollars will roll into the LPHRA. If you have no HRA balance remaining, you will be unable to utilize the LPHRA.

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4. In 2025, if I qualified for the Premier Healthy Living Incentive of \$500/\$1,000, will these deposits appear in my Limited Purpose HRA, or will they appear in my new HSA account?

If you transition to an HDHP medical plan for 2026, you must enroll in the LPHRA if you have an existing balance. For any future contributions that would be provided under the Premier Healthy Living Program, you must enroll in the HSA so that employer deposits can be made.

5. What are some additional benefits to enrolling in the Blue Connection HDHP or Blue Access HDHP to qualify to participate in the Limited Purpose HRA?

There are several benefits of enrolling in the LPHRA if you are considering switching to an HDHP medical plan for 2026. Switching plans means you'll be able to contribute to an HSA. This is beneficial because it allows you to defer tax-free dollars towards qualified medical or retiree medical expenses (even after employment ends). An additional positive is that accumulated HRA balances can be transferred to the LPHRA so that they are not immediately forfeited, allowing you to use every last dollar for qualified vision and dental expenses.

6. If I leave Premier Health, will I be able to take my Limited Purpose HRA balance with me?

No. Like the traditional HRA program, funds accumulated into an LPHRA account are employer-owned and are forfeited by the caregiver upon separation of employment.

7. I am currently enrolled in a copay plan. Do I qualify to have a Limited Purpose HRA?

No, only existing HRA account holders who have a transferrable balance may participate in the LPHRA.

8. Will I lose my HRA balance if I switch to the Blue Connection HDHP or Blue Access HDHP?

If you have a transferrable balance in the traditional HRA program, you may enroll in an HDHP plan option. In this case, you would *also* need to elect to participate in both the Limited Purpose HRA *and* HSA programs if you wish to receive employer deposits for wellness incentives through the Premier Healthy Living Program. **Note:** You do not have to contribute to the HSA program. However, you must elect to open the account to receive employer deposits.

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9. If I decide to return to a copay-based plan in 2026, what happens to my balance in the Limited Purpose HRA?

Should you decide to transition back to a plan paired with a traditional HRA medical program, your LPHRA balance would be forfeited, and you would resume participating under any new eligibility requirements for the copay-based plan option.

10. What types of expenses can I use the Limited Purpose HRA for?

LPHRA funds can be used for any qualified dental and vision expenses. Examples include prescription eyeglasses, contact lenses, and dental procedures like cleanings, crowns, and implants.

11. Will I be provided with an LPHRA card separate from my HSA card?

You'll receive a NetBenefits AccessCard®, which is used for *both* your LPHRA and HSA balances. The NetBenefits AccessCard® is a special-purpose Visa® card that provides an easy, automatic way to pay for qualified medical expenses. The card provides electronic access to the amounts set aside in your respective benefit accounts such as HSAs and LPHRAs. Please note that if you have an LPHRA, it can only be used for vision and dental expenses at eye doctor and dentist offices or merchants that sell eyeglasses. You will not be able to use your card for over-the-counter vision and dental expenses.

You can also use another form of payment, such as a personal debit or credit card or cash, and submit the receipt for reimbursement of qualified over-the-counter items.

12. When will I see my LPHRA balance reflected on the Fidelity Investment Portal?

You'll be able to see your balance by mid- to late-February. Balances will reflect claims that have been submitted to Anthem by Dec. 31, 2025.

13. How do I get reimbursed for out-of-pocket dental/vision expenses during the transitional period?

You can submit a claim for directly on NetBenefits via the claims and expenses tab. You can also submit a manual claim for reimbursement request using a form found at the bottom of the submit a claim page under the forms and information icon section of NetBenefits. Once the claim has been approved, funds will be issued directly to you via check or direct deposit, depending on your linked accounts and preferences. Should your claim be denied, you will receive a notification advising what further information is needed.

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14. Can I use my Limited Purpose HRA for medical plan expenses?

Yes, but only once you've met the statutory deductible limit (\$1,700 (single) or \$3,400 (family)) for the plan year *and* have submitted the appropriate request to Fidelity Investments to convert your LPHRA to a general purpose HRA.

15. Will I have to substantiate any dental or vision claims when using a Limited Purpose LPHRA or HSA?

It depends. We currently have carrier file integrations set-up to submit claims information to substantiate your dental or vision claims through Superior Dental and VSP. If more information is needed to substantiate your claim, you will receive notification directly from Fidelity Investments.

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