



Open Enrollment Best Practices

This checklist highlights best practices
for navigating the open enrollment period.

Open enrollment is an annual window of time when employees are provided the option to enroll, waive, or change participation in their employer's benefit plan.

Employer benefit plans may consist of health, dental, vision, disability, and life insurance, plus a variety of other types of benefits specific to each employer's business needs.

The open enrollment period typically occurs several weeks before the health plan's renewal date and after the employer has reviewed and updated their benefits offerings with their insurance professional. These are strategies and best practices for each stage.

Planning Stage

A successful open enrollment period requires strategic planning several months in advance of the open enrollment period. Employers must define the company's goals and outcomes for open enrollment. Here are a few questions to consider during the planning process:

- ☐ **Have we reviewed a census of all eligible employees?**
 - The [Affordable Care Act](#) (ACA) requirements, for applicable large employers, determine benefit eligibility based on [hours of service](#) if an employee is not classified as full time.
 - Employee age ranges may be useful to help determine the best variety of benefits.
- ☐ **Should we review claims data from prior years?**
 - Reviewing claims data may be useful if an employer is considering a self-funded benefits strategy.
- ☐ **Has an [employee survey](#) been conducted to determine the employees' levels of satisfaction with past benefits offerings?**
 - Employees place a high value on an employer's benefits package. Seeking employee input on future offerings and feedback on past offerings can provide valuable insight to employers when selecting which plans to replace, remove, or add.
- ☐ **Have we reviewed employee participation metrics for all plans offered?**
 - The insurance professional or carrier may be able to provide a report outlining which benefits received the greatest and least enrollment.
- ☐ **Is there a need for greater participation in any of the benefit options?**
 - Some insurance carriers require certain percentages of participation to avoid the risk of losing access to a benefit. The insurance professional may be able to provide information regarding participation requirements.

- ☐ **Are we providing enough education to help employees understand what is offered?**
 - Employees should feel confident they are making the best decisions when selecting benefits that suit their needs.
- ☐ **Have we coordinated an open enrollment event or meeting with our insurance professional?**
 - Your insurance professional is a great resource for employee questions about coverage. Many insurance professionals prefer to be present and assist with employer open enrollment meetings.
- ☐ **Are we providing advance communications to prepare employees for open enrollment?**
 - Providing ample communication to employees in advance allows them time to consider their needs and discuss them with others in their household.
 - Communicating the open enrollment start and end dates helps avoid late enrollments.
- ☐ **Are we prepared to provide all required notices and documents during open enrollment?**
 - Aside from traditional open enrollment materials, various governmental agencies require certain [notices](#) to be distributed to employees during open enrollment.



Planning Stage (continued)

- ☐ **Are we equipped to administer open enrollment suitable for our remote, hybrid, and on-site employees?**
 - Many employers have remote and hybrid workplaces that may require additional technology systems and support for employees.
- ☐ **Do we have resources to support employees with online enrollment technology?**
 - During the open enrollment process, employers that use a benefits enrollment platform may ask the vendor to assist with technology issues and questions. Allowing employees to directly consult with the vendor may result in fewer questions asked of the employer.
- ☐ **Do we have the documents needed for paper enrollments, [coverage waivers](#), and/or [cash in lieu of](#) benefits?**
 - Some employees may not have access to a computer to perform online enrollment and will require paper documents. Consider having open enrollment packets prepared in advance.



Pre-Open Enrollment Activities

Once the planning stage is complete, establish a timeline of pre-open enrollment steps. Use the following timeline when planning a 30-day open enrollment period:

- ☐ **Approximately four months prior to the plan renewal date:**
 - Prepare an employee census, including employee demographics, age, and tobacco usage.
 - Provide the census to your insurance professional for review, recommendations, and proposal requests. A summarization of an employee survey may help the insurance professional make recommendations.
- ☐ **Approximately three months prior to the plan renewal date:**
 - Meet with your insurance professional to discuss their recommendations, pricing, and options for other supportive tools and resources. Finalizing the benefits package may take up to several weeks.
- ☐ **Approximately two months prior to the plan renewal date:**
 - Once the benefits package has been finalized, begin sending communications to employees, including timelines and expectations. Prior to open enrollment, consider multiple communications to highlight different benefits in separate messages to avoid overwhelming or confusing employees.
 - Send invitations for any planned open enrollment meetings using multiple channels, e.g., emails, posters, benefits portals.
 - Coordinate meetings with other vendors providing services during open enrollment.
 - Prepare open enrollment materials, including all required documents and notices. Your insurance professional may be able to provide educational materials and instructional documents.
- ☐ **Approximately six weeks prior to the start of the open enrollment window:**
 - Send an open enrollment reminder to employees. Provide the dates and times of planned meetings and the start and end dates of open enrollment. Include descriptive information before and during open enrollment so employees know they will not be able to enroll later unless they experience a qualifying event.

Open Enrollment

Despite an employer's planning efforts, expect employees to have questions during open enrollment. Some best practices and options include:

- ☐ Provide all required notices and documents and retain proof of distribution.
- ☐ Clearly communicate major benefit changes.
- ☐ Show the total cost of benefits along with the employee's expected contribution.
- ☐ Offer online comparison and decision-support tools to help employees make informed decisions.
- ☐ Prepare and distribute internal and external contact information to employees.
- ☐ Require employees who are not enrolling in any offered coverage to sign a [waiver](#) either electronically through an enrollment platform or on paper.
- ☐ When providing required notices to employees electronically, collect signed [consent forms](#) in advance.
- ☐ Provide multilingual support if necessary.
- ☐ If employees still have questions, meet with them individually.
- ☐ Consider an employee survey to capture feedback regarding the open enrollment process.

Open Enrollment Results

Ideally, all the preparation made before open enrollment will result in the following:

- ☐ Employees were prepared for open enrollment.
- ☐ Employees felt educated about the benefits offered, whether dependents could be enrolled, and the cost for each benefit available.
- ☐ Employees were provided with internal and external contact information and resources to support their enrollment process.
- ☐ Open enrollment was successfully completed within the designated timeline.
- ☐ All enrollments and waivers of coverage were recorded and retained.

More Resources

[Timeline of Benefit Notices for Group Health Plans](#)

[ERISA: An Introduction](#)

[ERISA: Electronic Distribution of Health Plan Notices](#)

[Cafeteria Plans: An Introduction](#)