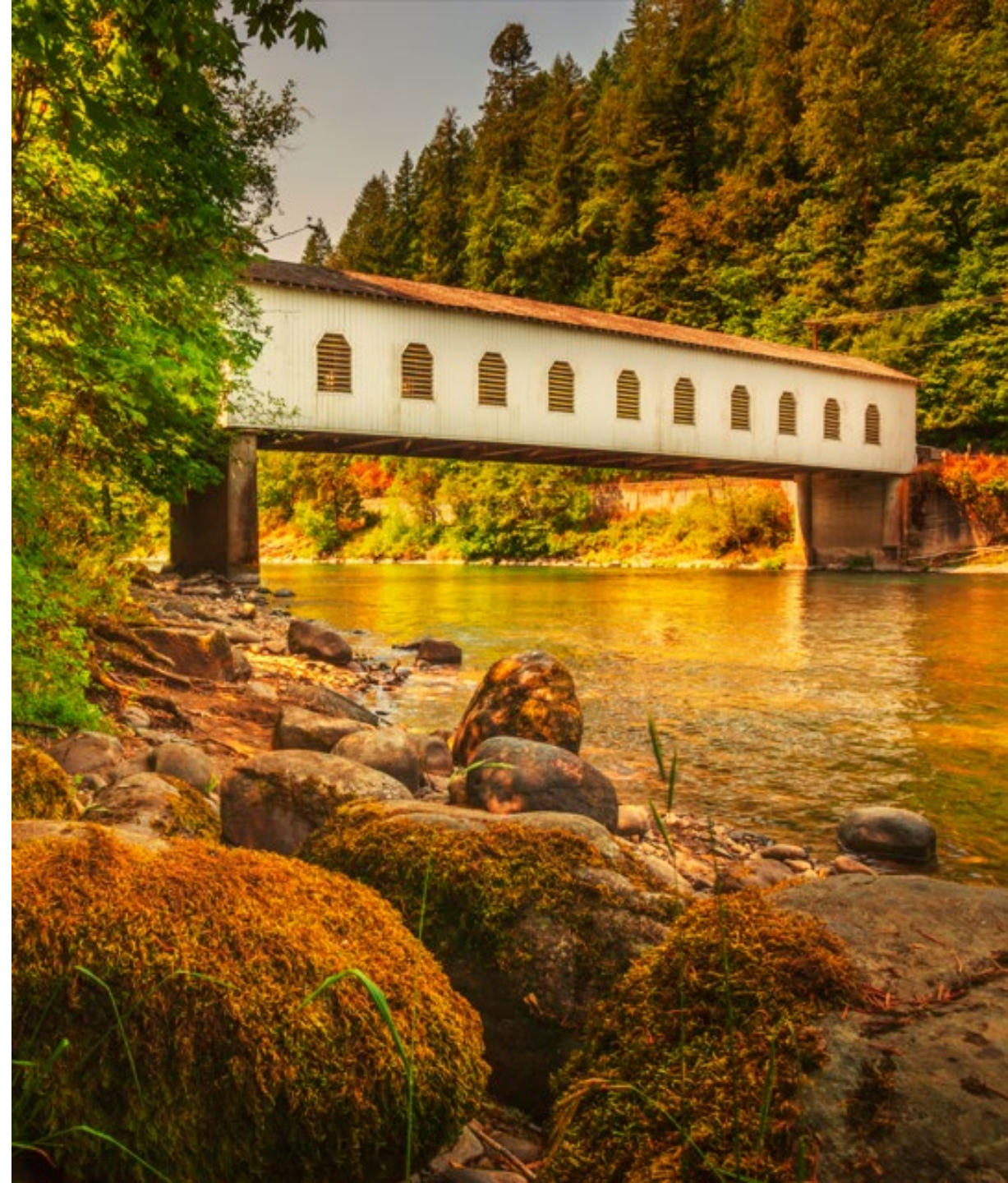


PEBB Information Exchange (PIE)

Agency Open
Enrollment Training for
Plan Year 2027



Webinar Tips

Note: If you're not hearing the webinar, click the "gear" icon and check your audio settings. 1

Ask questions.

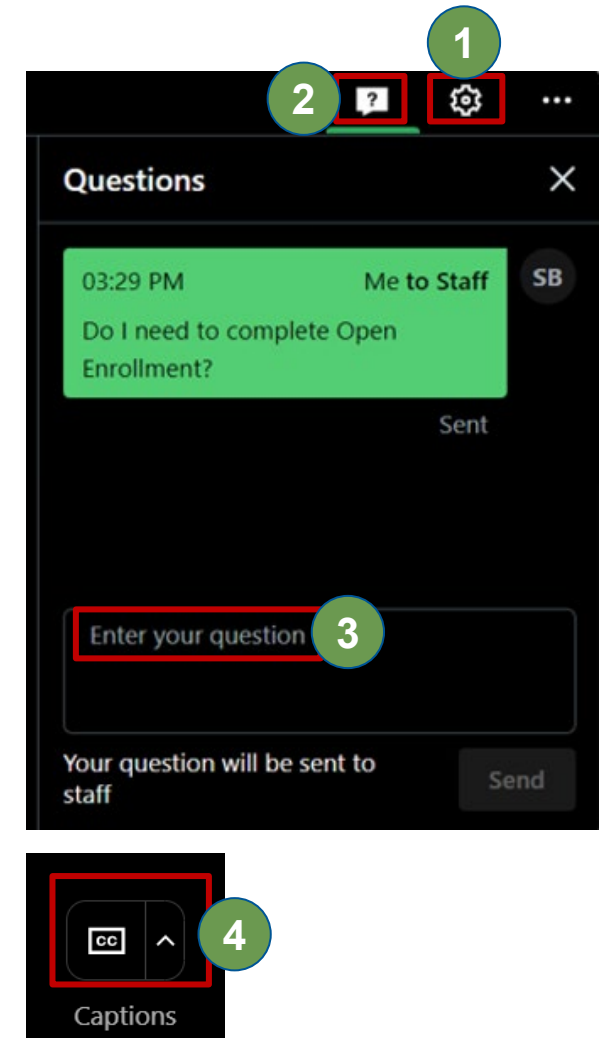
- Click on the question mark icon. 2
- Type in your questions. 3
- Staff will answer questions directly through the Questions panel and out loud during the presentation.

Watch or read the presentation.

- Click the Captions button to turn on closed captions during the webinar. 4
- You'll receive a follow-up email when the recording and slides are available.
- Captions are included in the recording.

Review additional benefits information.

- Go to the Benefits Information page at PEBBinfo.com.



Agenda

- Required Open Enrollment
- Plan Updates and Reminders
- OE Communications Timeline
- Correction Period Timeline
- Benefit Education Resources
- OE Agency Training System Updates

2027 Required Open Enrollment



**Open Enrollment
is required
this year.**

Everyone must log into PEBBenroll.com starting Oct. 1 and make their selections during Open Enrollment.

This includes:

- Selecting a new medical plan and confirming vision and dental plan elections.
- Enrolling or re-enrolling in a Health Care or Dependent Care Flexible Spending Account (FSA).
- Enrolling as a new hire.
- Adding or dropping a dependent.
- Answering surcharge questions.
- Updating your personal information and beneficiaries.



PEBB's Open Enrollment is Oct. 1–31, 2026.

Remember, Open Enrollment is the one time each year you can make changes to your plans or dependents without a [Qualified Status Change \(QSC\)](#).

2027 Required Open Enrollment



Log in beginning Oct. 1
to make your
2027 benefit selections.

PEBBenroll.com



If you don't complete Open Enrollment by Oct. 31, 2026:

- **You will not have PEBB medical coverage in 2027.**
- Your dental and vision coverage will stay the same.
- **You will not be allowed to make changes during the correction period.**
- All applicable PEBB surcharges will be deducted from your paycheck throughout 2027.
- You won't be able to contribute to a Flexible Spending Account (FSA). You must enroll or re-enroll each year during Open Enrollment to participate in an FSA. **FSA enrollments do not roll over to the next plan year.**

Opting Out/Declining Coverage

Opt out of coverage: You can opt out of (not enroll in) a PEBB medical plan if you're covered under another group medical plan. You'll receive part of your employer's premium contribution ("opt out incentive") if you opt out.

Decline coverage: You may also decline core benefits, where you choose not to take part in any PEBB benefit. You also decline your employer's premium share for core benefits.

Learn more: <https://www.oregon.gov/oha/PEBB/Documents/Opt-out-Denial.pdf>.



Important!

If you opted out or declined in 2026 and take no action during Open Enrollment, your status will be changed to "medical not enrolled" and your opt out incentive will end. This is only correctable prospectively.

2027 Medical Plan Options

- The Board asked several insurance companies to submit bids for PEBB's 2027 medical plans.
- The Board chose Moda Health and Kaiser Permanente for 2027.
- Providence Health Plan medical plans will not be offered in 2027.
- Here are the 2027 medical plans for full-time and part-time members:
 - **Moda PPO**—Offered in Oregon and across the U.S.; Judi Rx provides prescription coverage; replaces the Providence Statewide PPO plan.
 - **Moda Coordinated Care**—Offered in Oregon and surrounding areas; Judi Rx provides prescription coverage; replaces the Providence Choice and Moda Synergy plans.
 - **Kaiser Traditional**—Available to those who live or work in Kaiser Permanente service areas; same as the current Kaiser Traditional plan, with some plan changes.
 - **Kaiser Deductible**—Available to those who live or work in Kaiser Permanente service areas; same as the current Kaiser Deductible plan.

Other Plan Changes

- **Dental:** Delta Dental plans will have a few minor changes and improvements. There are no changes to other dental plans.
- **Flexible Spending Accounts (FSA):**
 - **Health Care FSA:** In 2027, you can contribute up to \$3,400/year. You must re-enroll each year to participate in this plan.
 - **Dependent Care FSA:** The annual limit will stay at \$7,500/year if you're married and filing jointly and \$3,750/year if you're single or married and filing separately. You must re-enroll each year to participate in this plan.
- **Life insurance:** Rates will go down.
- **Canopy Everyday Assistance Plan:** Canopy is changing its name to "Revive." Mental health assistance, counseling, coaching, financial, and legal help will stay the same.

Review the [Summary of Changes](#) for more details.

FSAs: Important Reminders



Be sure to understand the rules about contributing to and using an FSA.

- **Enroll each year.** You must enroll (or re-enroll) in an FSA each year during Open Enrollment.
- **Pay for eligible expenses only.** You can only use your FSA to cover eligible expenses. Go to <https://asiflex.com/orpebb/Default.aspx> to see a complete list of eligible expenses.
 - Health Care FSA: Covers medical, dental, and vision expenses for you and your dependents.
 - Dependent Care FSA: Covers childcare for children up to age 13 and care for dependent elders.
- **Save your receipts.** You should keep itemized receipts and other documentation to verify the eligibility of your claims.
- **Use it or lose it.** Unused funds are forfeited at the end of the year.

This does not include Transportation and/or Parking Accounts.
Members can contribute \$340 per month to commuter accounts.

Long-Term Care (LTC) Coverage Ending

Long-term care (LTC) coverage will not be offered in 2027.

- Unum stopped accepting new applications for LTC coverage in Feb. 2026.
- Because of Unum's decision, the PEBB Board decided to no longer offer LTC coverage starting in 2027.
- If you wish to keep LTC coverage, you must transition to direct billing with Unum by Feb. 28, 2027.
 - Coverage costs will remain the same as of Jan. 1, 2027.
- PEBB will provide details via email and mail about how to move to direct billing and how to change or cancel your coverage.
- PEBB will also host a webinar for members currently enrolled in LTC coverage.

Unum LTC Webinar

Oct. 13, 2026; 10-11 am PT

Register now: <https://attendee.gotowebinar.com/register/1976411089047803231>

Open Enrollment Communications

Aug. –Sept.

Late Aug.

Save the date postcard arrives at member homes

- OE dates, required enrollment.
- You need to pay attention, do research, and choose.
- Details/resources will be available mid-Sept.

Sept. 9

OE “Sneak Peek” email to members, including:

- 2027 medical plan options.
- New Moda Health/Judi Rx plans and how they work (links to plan summaries).
- Garner incentive.
- Other 2027 changes
- Resources; how to enroll.

Sept. 1

On-demand posters available

Sept. 9

PEBB website and most tools will be updated and available. Others will be posted as they’re completed:

- Plan comparisons (online and PDF).
- Premium estimator.
- Benefit summaries at a glance.
- ***New***
- Things to consider. ***New***
- Wellness Central website. ***New***
- Enrollment Guide
- Explore Your Benefits.

Sept. 22 (2:30–4:30pm)

PEBB’s enrollment webinar #1 (featuring staff and vendor partners)

Sept. 28

OE reminder postcard arrives at homes

- OE dates, required enrollment.
- You need to pay attention, do research, and choose.
- Information resources.

Open Enrollment Communications

Oct.—Open Enrollment	Nov. and Dec.
Oct. 1 “OE starts today” email Throughout OE • Weekly reminder emails • Medical Plan Vendor Webinars ○ Moda Health plans (hosted by Moda). *New* ○ Kaiser Permanente plan (hosted by Kaiser). *New* ○ Judi Rx (hosted by Judi Rx). *New* Oct. 7, 1–3pm PEBB’s enrollment webinar #2 (featuring staff and vendor partners) Oct. 13, 10–11am Unum Direct Billing webinar (for members currently enrolled in LTC coverage) Oct. 22, 11 am–12pm PEBB’s FSA webinar #1	Nov. 10, 2:30–3:30pm PEBB’s FSA webinar #2 Week of Dec. 7 Email to members about new plans *New* • New medical plans begin Jan. 1. • What to expect. • Where to go with questions.

Correction Period Timeline

- FSA corrections due by Friday, December 11, 2026.
- All other Open Enrollment corrections are due by February 28, 2027, including:
 - Plan corrections
 - Dependent corrections
 - Tobacco surcharge
 - Other coverage surcharge

Review [OAR Division 20: Correcting Enrollment Errors and Open Enrollment Errors](#) for details.

Contact Us

PEBB Member Services

pebb.benefits@odhsoha.oregon.gov

503-373-1102

PEBBinfo.com

Monday–Friday; 8 am–5 pm

Benefit Resources



Webinars

Register for a webinar at PEBBinfo.com

PEBB, Moda Health, Judi Rx, and Kaiser Permanente will host webinars before and during Open Enrollment.

Webinars will be recorded and posted online.

PEBB Staff and Vendor Partners (Two sessions)

- Changes to all your 2027 plans.
- Where to learn about your benefits.
- How and when to enroll.

Moda Health (Multiple sessions)

- Moda Health's 2027 plan options.
- Benefits and perks available to members.

Judi Rx (Multiple sessions)

- Prescription drug benefits included with Moda Health's 2027 medical plan options.

Kaiser Permanente (Multiple sessions)

- Kaiser's 2027 plan options.
- Benefits and perks available to members.

PEBBinfo.com



PEBB's website is the primary resource for members.



All Open Enrollment and benefits information will be posted on PEBB's website.



Links to other digital education tools are easy to find (e.g., premium estimator, online plan comparison tool, Explore Your Benefits).

The screenshot displays the PEBBinfo.com website. The top navigation bar includes links for About OHA, Programs and Services, Oregon Health Plan, Health System Reform, Licenses and Certificates, Public Health, and Jobs. The main content area is titled "Benefits Information" and features a sidebar with links for Login - Member Account, PEBB Home, Benefit Information, Board Overview, Board Meetings, Contact Information, Retiree, COBRA, Self-Pay, SB551 Members, and RELATED SITES. The main content area provides information for the 2027 (Upcoming Plan Year) and 2026 (Current Plan Year), including Open Enrollment dates and Plan Updates. The bottom section of the screenshot shows the "Public Employees' Benefit Board" page, which includes a Welcome message, a sidebar with links for Login - Member Account, PEBB Home, and RELATED SITES, and a main content area with sections for Benefits, Resources, and Plan Information.

Online Plan Comparison Tool



Use this tool to see the medical, dental, and vision plans available to you side by side.



You can also compare specific services by plan.



This includes copays, deductibles, and coinsurance.



Print your customized comparison if you want a hard copy!

www.comparepebbplans.com

 **Compare Your PEBB Plan Options**
Compare sus opciones de planes PEBB

English Version:
2027 Plan Year
Use this information to prepare for the 2027 plan year.
[Visit the 2027 plan comparison tool](#)

Versión en español:
Plan para el año 2027
Utilice esta información para prepararse para el año del plan 2027.
[Visite la herramienta del plan de comparación 2027](#)

Premium Estimator Tool

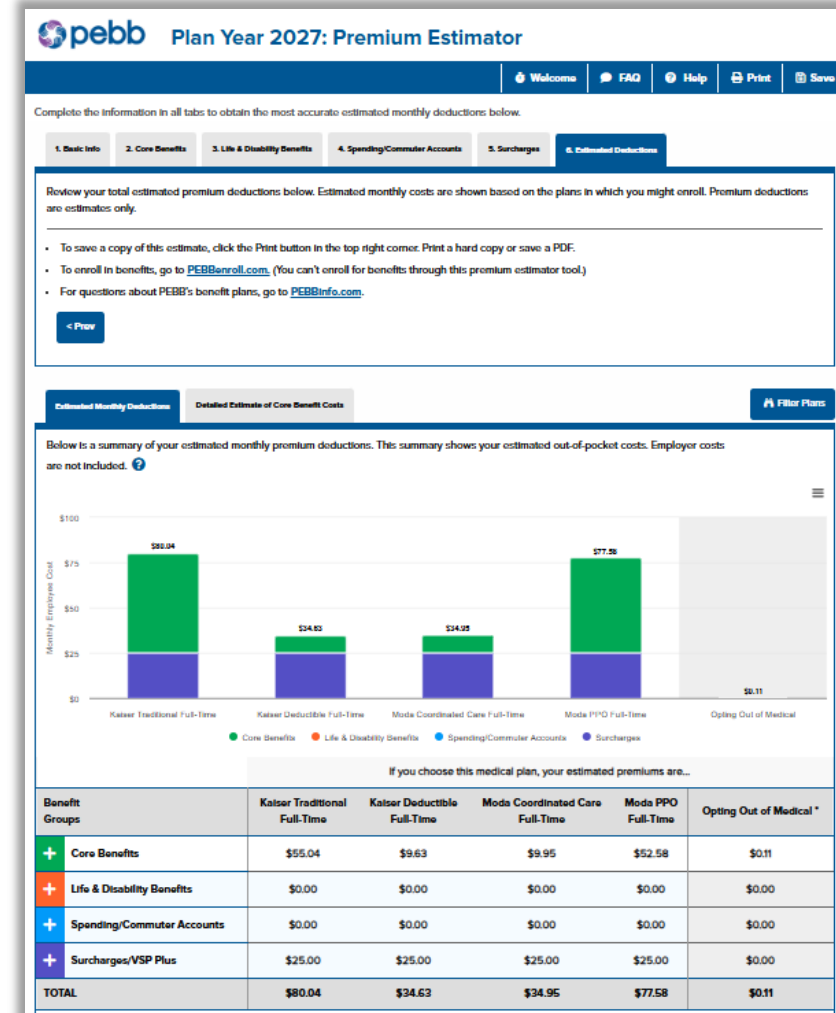


Use this estimator tool to determine your monthly deductions for all your 2027 PEBB benefits



Select your desired benefits, location, work status, and if you are a state or university employee.

pebbpremiumestimator.com



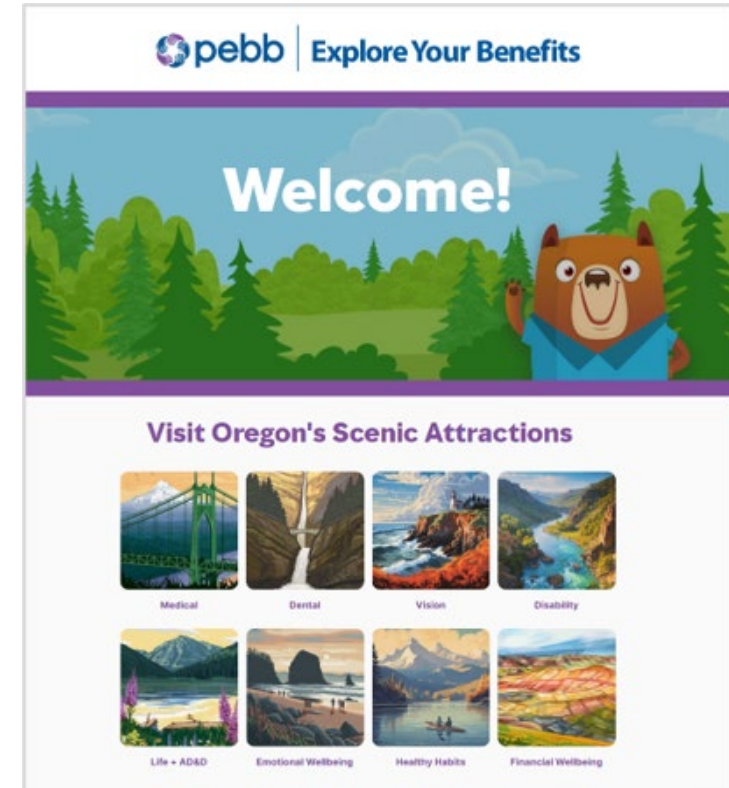
Explore Your Benefits



Make learning about your PEBB benefits fun!

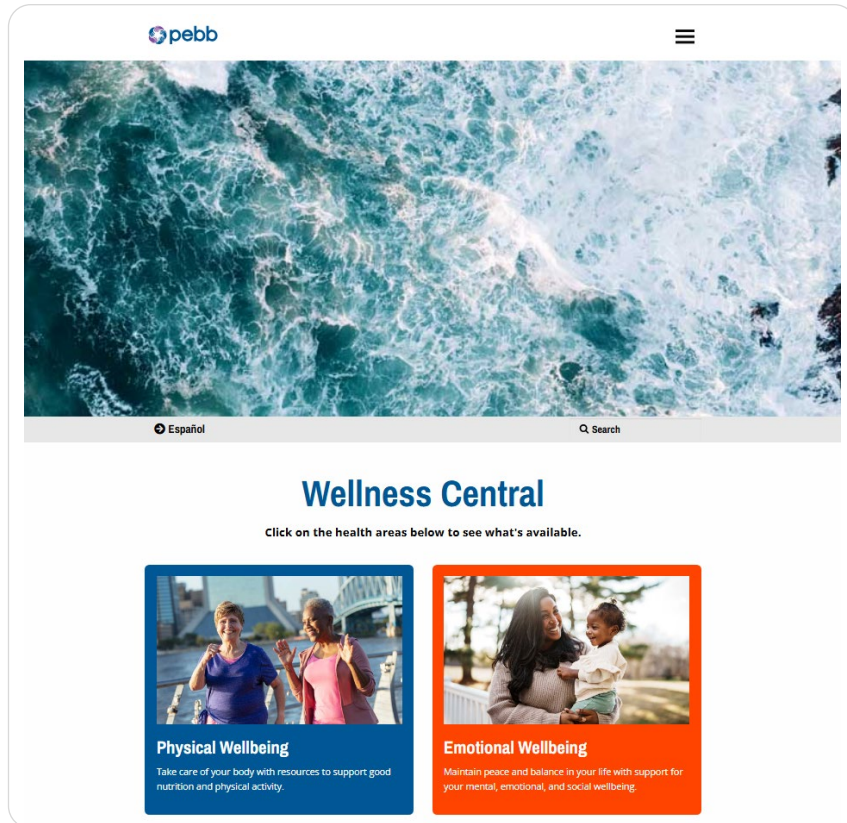


Use this award-winning interactive learning tool to watch videos, test your benefits knowledge, and earn wellness badges for smart wellbeing actions.



pebbexploreyourbenefits.com/2027

Wellness Central Website



- You have access to dozens of wellness programs as a PEBB member.
- With everything from personalized coaching to resource libraries, we're empowering you to take charge of your health.
- Take your physical, emotional, and financial health to the next level.
- Visit the Wellness Central website to see the wellness resources available to you through PEBB's plans.

<https://pebbwellnesscentral.com>

OE Agency Training System Updates

PUBLIC EMPLOYEES' BENEFIT BOARD

September 8, 2026

www.PEBBenroll.com



Open enrollment important dates

	
9/29/26	(At 5:30pm): PEBB system (PDB) closes to run all Pre-OE jobs. Notification will go out to all admins.
9/29/26	(After 6pm): Run Pre-OE jobs. Email will be sent to agency admins of detailed information of what Pre-OE jobs were processed.
9/30/26	Clear pending coverage requests for Optional life and LTC through 6/30/26.
10/1/26	Open Enrollment begins for members and admin users.
10/31/26	Open Enrollment closes for members (member module).
11/6/26	(End of day): Open Enrollment closes for admin users (Agencies, Universities, BHS and PEBB).
11/7/26	Affidavits due for newly added individuals by affidavit. Admins need to monitor home page alert.
11/9/26	(At 5:30pm): PEBB system (PDB) closes to run all Post-OE jobs. Notification will go out to all admins.

	
11/9/26	(After 6pm): Run all Post-OE jobs. Email will be sent to agency admins of detailed information of what Post-OE jobs will be processed each day.
11/10/26	(At 5:30pm): PEBB system (PDB) closes to compile payroll files. Notification will go out to all admins.
11/13/26	All payroll files will be ready with all 1/1/27 dates.
11/14/26	All plans will receive the OE files (Exception is Kaiser who will receive their first OE file on 12/5).
11/17/26	Local Governments will receive enrollment reports for the new year.
12/1/26	Admins need to run report to identify current IRS Tax dependents to re-submit forms for new tax year (In Reports section of PDB).
12/11/26	Last day for FSA corrections (Health care and Dependent care).
2/28/27	Last day for all other OE corrections. Please make sure all forms are date stamped when received by member.

Dependent SSN collection

Member Module

Members can enter SSN's for Dependents in the Dependents page. This is not a requirement and if they do not want to provide one, they are not required to. They can simply click the "OK/continue" in the pop-up message.

Dependent Information

[1. Personal Information |](#) [2. Dependents](#) | [3. Core Benefits |](#) [4. Optional Benefits |](#) [5. Beneficiaries |](#) [6. Benefit Statement](#)

This page does not enroll your dependent, it lists only the eligible dependents you input. Continue to the 'Summary of my core benefits' page, for enrollment.

Please review dependent information carefully. To correct or update your dependents information, please contact [your agency or benefits office](#).

SSNs

- PEBB is required to request SSNs for dependents for Affordable Care Act (ACA) reporting and filing with the IRS.
- To provide SSNs, enter your dependent's ssn under SSN, and re-enter the SSN under Re-enter SSN for confirmation purposes.
- If you choose not to provide at this time, click save and continue and then click OK to the alert message.

Under "Is Dependent Address same as subscriber?":

- Select **N** from the drop-down menu to update the address.
- Select **Y** from the drop-down menu if the contact address is the same as yours.

Under New Dependents, select **Yes** if you want to add an eligible dependent to the list.

Select **Save and Continue** to start the enrollment process or **Back** to return to the previous page.

The first day of every month, coverage for children who turn 26 will be terminated at the end of the month in which they turned 26. COBRA notices will go out preceding the processing of the termination.

Eligible Dependent Information							
Member Number	Name	Relationship	SSN	Re-enter SSN	Birth Date	Gender	Is Dependent Address same as subscriber?
	Dolquist, Trytan	Child	*****			Male	N
	Sebaitre, Lourdes	Child				Female	Y
P20410167	Sebaitre, Omar	Spouse				Male	Y

New Dependents

If you would like to add a newly eligible dependent or a dependent you previously covered in your PEBB plans, select **Yes** below. It's important you take time to review each dependent you choose to enroll to make sure they meet the eligibility definitions and satisfy PEBB Administrative rules. Any dependents you enroll in PEBB benefit coverage will be subject to a dependent eligibility review and when contacted will require the submission of documentation to prove dependent eligibility. Failure to provide sufficient documentation will result in PEBB ending coverage for your dependent(s).

Do you want to add additional [eligible dependents](#) to your record?

☐ Yes

[Back](#) [Save and Continue](#)

Dependent eligibility verification (DEV)

The DEV indicator will be removed (reset to blank) so members will be required to select “Yes” or “No” to each dependent they have listed on their PEBB record **AND** check a box that they have read the eligibility requirements in order to continue the enrollment process.

- This will be required each year.
- This will be required each time the member goes through the OE process.

Important

This verification screen provides an important opportunity for you to confirm whether the dependents you have enrolled in the plan meet eligibility requirements and it is important you take time to review each dependent you choose to enroll to make sure they meet plan definitions and satisfy PEBB Administrative Rules. You should also understand any dependents you enroll in the plan may be subject to a dependent eligibility verification review at any time which will require the submission of documentation to prove dependent eligibility and failure to provide sufficient documentation may result in PEBB ending coverage for your dependents. I have read and understand OAR-Division 10 concerning definitions and can find this OAR at:

[PEBB OAR-Division 10](#)

Additionally, I understand that if it is determined I enrolled or continued enrollment of an ineligible dependent, myself and my eligible dependents may lose coverage. Also, an ineligible dependent may be retroactively terminated to the date the individual is determined to have no longer been eligible, or the effective date of coverage if eligibility was never met. I have read and understand OAR-Division 15, Sections 101-015-0030, 101-015-0035, 101-015-0040, 101-015-0045 and 101-015-0050 concerning Eligibility Policy Term Violations and can find this OAR at:

[PEBB OAR-Division 15](#)

Subscriber/Dependents						
Benefit #	Name	Relationship	Birthdate	Gender	Expiration Date	Eligible Dependent
						Yes ▼
						Yes ▼
						Yes ▼
						Yes ▼
						No ▼

☐ I have read the above OARs on Eligibility Definitions and Policy Terms Violations.

[Back](#) [Save and Continue](#)

Dependent eligibility verification (DEV)

01

If the members selects “Yes” to any dependents, the dependents will be eligible to be enrolled or continue coverage for 1/1/27.

02

If the member selects “No” to any dependents, the dependents will not be eligible to be enrolled in coverage for 1/1/27. They will automatically be removed from current coverage (if applicable) ending 12/31/26 and will be expired as a dependent. The member **WILL NOT** be able to re-add dependents with a “No” status unless the DEV status is changed to “Yes”.

03

Only eligible dependents marked with “Yes” to DEV will show up in the Core benefits page to be included when re-enrolling for 2027.

04

PEBB has access to lock and unlock dependent records. Members with one or more dependents that are locked due to the DEV process, will not be allowed to add any additional dependents during OE.

DEV reminder on benefit statement

- A message in **red** font will display in the core benefit section on the benefit statement, of any member who marks one or more dependents as “N” on the DEV eligibility page.
- Dependents marked as “N” will show **“No”** to coverage for each plan the dependent was enrolled:

*Plan Enrollments were last updated by **Miriam Sierra** on **08-24-2026***

				Dependents
Plan	Coverage Tier	Effect. Date	End Date	Andre

During the enrollment process you selected that one or more of your dependents are not eligible for PEBB benefits. If a dependent is listed 'No' for coverage, their current coverage for them will end 12/31/26 and they will not have coverage effective 1/1/27. In the future if you want to add the dependent(s) coverage back, you will be required to provide documentation that they are eligible for PEBB benefits.

CORE Benefits Page – All members are required to re-enroll in a Medical Plan

- > We will be processing a Pre-OE job that will term all CORE benefits 12/31/26.
- > All PEBB medical plans (excludes opt out) will be enrolled as Medical Waive (no medical coverage). This will require all members to re-enroll in a Medical plan for 2027.
- > Dental and vision plans will reinstate the previous coverage for 1/1/27.

Summary for employee of agency 44300 Oregon Health Authority (Open)				
Action	Plan Type/Plan Name	Coverage Tier	Coverage Eff. Date	End Date
Change Medical Opt Out	Medical Medical Waive	No Coverage	01-01-2027	
Change Waive	Vision VSP (Vision Service Plan)	Employee Only	01-01-2027	
Change Waive	Dental Delta Dental Premier	Employee Only	01-01-2027	
	Basic Life Standard Insurance - Basic Life	Employee Only \$10K	01-01-2027	
If you receive a state contribution for core benefits, premiums for these benefits will automatically be deducted from your pay on a pre-tax basis.				
Summary for employee of agency 44300 Oregon Health Authority (Plan Year 2026)				
	Plan Type/Plan Name	Coverage Tier	Coverage Eff. Date	End Date
	Medical Providence Choice	Employee & Children	09-01-2026	12-31-2026
	Vision VSP PLUS Plan (includes VSP Vision Service Plan)	Employee Only	05-01-2026	12-31-2026
	Dental Delta Dental Premier	Employee Only	05-01-2026	12-31-2026
	Basic Life Standard Insurance - Basic Life	Employee Only \$10K	01-01-2026	12-31-2026

CORE Benefits Detail page -

- > When a member clicks “Enroll” or the “Change” button in the core benefits page (medical, vision and dental), they will be directed to the detail page for that plan.
- > The detail page will show a list of their eligible plans (based on live or work zip codes in the system) as well as a tier selection.
- > Providence plans (Choice/Statewide) are no longer offered in 2027.
- > Moda will have a new plan that will replace the Providence Statewide plan: Moda PPO Plan
- > Moda will have a name change to the existing Moda Synergy plan and will be now called: Moda Coordinated Care Plan
- > The system will display all eligible dependents, if any, for the member to either select them all for coverage or individually.

Summary for employee of agency 44300 Oregon Health Authority (Open)

Current Plan: Medical Waive (No Coverage)

Select Plan:

- ☐ Kaiser Deductible Plan
- ☐ Kaiser Traditional (HMO) Plan
- ☐ Moda PPO Plan
- ☐ Moda Coordinated Care Plan

☒ Sierra, Miriam F (Self)

Please select additional family members to be covered

☒ I am not covering any dependents (Self-Only Coverage)

There are no eligible dependents

Back

Save and Continue

CORE Benefits Page– Member Module

> If a member selects the “Waive” button for vision or dental, then the system will automatically enroll them as:

- Vision Waive or Dental Waive – as the plan name
- No coverage – as the coverage tier

> If member enrolls in “Waive” coverage, they will see a “change” button they can select to change and enroll in a plan.

Summary for employee of agency 44300 Oregon Health Authority (Open)				
Action	Plan Type/Plan Name	Coverage Tier	Coverage Eff. Date	End Date
Change	Medical Moda Coordinated Care Plan	Employee Only	01-01-2027	
Medical Opt Out				
Change	Vision VSP (Vision Service Plan)	Employee Only	01-01-2027	
Waive				
Change	Dental Delta Dental Premier	Employee Only	01-01-2027	
Waive				
	Basic Life Standard Insurance - Basic Life	Employee Only \$10K	01-01-2027	
If you receive a state contribution for core benefits, premiums for these benefits will automatically be deducted from your pay on a pre-tax				
Summary for employee of agency 44300 Oregon Health Authority (Plan Year 2026)				
	Plan Type/Plan Name	Coverage Tier	Coverage Eff. Date	End Date
	Medical Providence Choice	Employee & Children	09-01-2026	12-31-2026
	Vision VSP PLUS Plan (includes VSP Vision Service Plan)	Employee Only	05-01-2026	12-31-2026
	Dental Delta Dental Premier	Employee Only	05-01-2026	12-31-2026
	Basic Life Standard Insurance - Basic Life	Employee Only \$10K	01-01-2026	12-31-2026

Medical Opt Out

01

All active Opt Out enrollments will be required to re-attest during OE. They will show Opt Out status for 2027, but the indicator will be reset and require members to re-attest in Opt Out which will direct them to the attestation page to attest for 2027.

Medical Opt Out

In order to Opt Out you must enroll and attest to essential minimum coverage each plan year. You do not need to provide proof of medical coverage. Click [here](#) for more information. You will receive a monthly cash amount in lieu of enrollment in a PEBB medical plan. Opting Out is conditioned upon my understanding and attesting that the following statements are true:

- I and all other individuals for whom I reasonably expect to claim a personal tax exemption deduction for, have or will have minimum essential coverage through an employer sponsored medical plan for the taxable year (2027). The following coverages are not eligible for Opt Out against: Oregon Health Plan/Medicaid, Student Health, and individual market coverage.
- I understand my employer will not pay the monthly opt-out payment to me if my employer knows or has reason to know that myself or any other member of my expected tax family does not have or will not have the alternative coverage.
- I understand that I must renew this attestation each plan year and applicable tax year for which I want the opt out to apply.

By checking this box, I verify the above statements are true.

☐ I Verify

Cancel I Agree

- Members will be required to re-attest for 2027.
- If members do not actively re-attest, they will be defaulted (Post OE job) to a Medical Waive plan and are not eligible to receive a cash incentive. (This is a correctable action - prospectively)

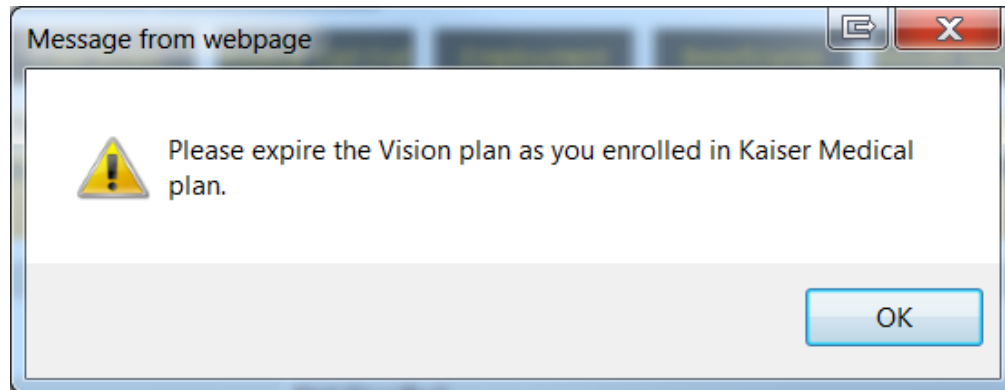
02

Members who are currently enrolled in Decline status for 2026 and want to enroll in active benefits for 2027, can enroll online during OE.

Reminder: Vision (VSP)

Agency Module

The system will not allow you to save a record if you move a member from a medical plan that was eligible for vision (member enrolled in vision, even if “waived”) and moves to a Kaiser Full-time medical plan. You must cancel the vision plan in order to save the record.



Member Module

Members must enroll in a medical plan (or Opt out) to be eligible for vision coverage. Members enrolling in a medical plan (excludes Kaiser Full-Time plans) can choose to “waive” vision, however the member must make a vision coverage selection in order to save the record and continue.

UNUM LTC Page

01

UNUM Long term care is no longer offered through PEBB effective 1/1/27. All currently enrolled members in a UNUM plan will show coverage ending 12/31/26.

02

The Unum Long-term care (LTC) page will only be displayed to those members who have active coverage through 12/31/26.

03

New acknowledgement box on the UNUM page that informs members of the coverage ending and direct bill pay options through UNUM.

04

Members will be required to check the acknowledgement box before moving to the next page.

The screenshot shows a web browser window with the URL <https://pebbtest.oha.oregon.gov/bmstest12c/pb.main>. The page is titled "Optional Benefits Summary - Long Term Care" and is for a member named "Serena, Minion". The page is divided into several sections:

- 1. Personal Information**: Contains a message stating that UNUM is no longer accepting new enrollments in Long Term Care and that PEBB is discontinuing Long Term Care Benefits through UNUM. It also states that members may continue coverage directly with UNUM and pay them directly, at the same rate they currently pay under PEBB.
- 2. Dependents**: Contains a table titled "Summary for employee of 44200 Oregon Health Authority (Open)".
- 3. Core Benefits**: Contains a table with the following data:

Action	Plan Type/Plan Name	Coverage Tier	Cov. Eff. Date	End Date
	Employee Long Term Care	Employee only, duration 3 years, facility amount \$1,000, age 47	01-01-2026	12-31-2026
	UnumProvident - Plan 1			
	Employee Long Term Care			
	Spouse/Partner Long Term Care			

- 4. Optional Benefits**: Contains a section titled "Important information to continue your Long Term Care benefit:".
- 5. Beneficiaries**: Contains a message stating that if a member wishes to continue their Unum Long Term Care Insurance coverage, they must act now to convert their coverage to direct pay with UNUM. It also provides a link to the "Election to Continue Your Long Term Care Insurance Coverage form" and lists the steps to complete the form.
- 6. Benefit Statement**: Contains a message stating that completed forms must be returned to Unum by February 27, 2027, and that payroll deductions will end effective December 1, 2026. It also states that employees who elect to continue Long Term Care coverage must submit the form and pay premiums directly to Unum beginning January 2027.

At the bottom of the page, there is an acknowledgement box with the following text:

☐ I acknowledge that I am responsible for completing and submitting the required sections of the election form to Unum for myself and, if applicable, for my spouse/domestic partner.
☐ I also acknowledge that I am responsible for paying premiums directly to Unum beginning January 2027.

Buttons: Back, Save and Continue

Flex spending and commuter accounts

- If a member is an academic employee and has the option to 9, 10, 11 or 12 paychecks a year;
 - **NEW** enrollments for 2027 (never had any for 2026) - will be required in the system to select the #of paychecks and have the same number of contributions in both FSA (DC/HC) and commuter accounts (if applicable) enrollments for 2027. The system will check and alert the member if there is a difference.
 - **HAD/HAS** enrollments for 2026 and wants to re-enroll for 2027 – will NOT be able to change the #of paychecks and will have to continue with what was originally selected for 2026. This can be manually adjusted by agency or PEBB admin if incorrect.
- HealthCare FSA annual max amount for 2027 is \$3400.
- Dependent Care FSA annual max amount for 2027 is \$7500.
- Parking and Transportation monthly max for 2027 is \$340.
- PEBB will be running a daily job to terminate any 2026 FSA that was reinstated by a QSC or through the daily files (employment changes sent to PEBB).
- Members must actively select “Enroll” or “Waive” to both Flex spending and commuter account pages in order to continue through the OE process

Dependent care and Health care FSA

Requirements



If the member selects to “Enroll” in Dependent or Health Care FSA, the member will be required to check a box of acknowledgement, confirming they know what they are signing up for



The FSA pages for Dependent and Health Care will have specific images on the page when enrolling to help members identify what the difference is between the plans.



We want to ensure that members are selecting the correct FSA plan in which they intended to enroll in.

System OE Message

- Starting on the Core Benefits page in the member module, a message will display that “**Open Enrollment is not completed, please continue through the process.**” until the member clicks the “save and continue” button from the Beneficiaries page. Once they have reached the benefit summary page and if they go back through the process, the message will no longer display on each page.

Summary of My Core Benefits

1. Personal Information |

2. Dependents |

3. Core Benefits

| 4. Optional Benefits |

5. Beneficiaries |

Open Enrollment is not completed, please continue through the process.

This page shows your current core benefit selections and your Open Enrollment options. You can choose to continue your current selections or make new ones. You can also add or remove coverage for dependents.

- A message in both the member and admin modules will show when a member has completed Open Enrollment.
- When a member completes OE and logs back into their member record, they will see on their home page “**OE Completed**” in green. Agency admin will also see this “**OE Completed**” in the Agency module.

Member Module

Open Enrollment

OE Completed

Hello, Miriam

Follow these steps to enroll for 2027 benefits. Open Enrollment is mandatory for all subscribers. Enrollments are irrevocable for the plan year, unless a qualified Midyear change event occurs.

Agency Module:

Enrollments

OE Completed

Quick Search

System OE Message – benefit statement

- Members who complete OE will see on the benefit statement a completion message.
- There is also a text box below the completion message that alerts members about what dates they may see on their benefit statement. Some members may expect that they would need to see all new start dates for all coverage's 1/1/27, however this is not the case. If there is no end date (12/31/26) shown next to a benefit, then the benefit will continue through 2027 plan year.



Benefit Summary as of 08-24-2026

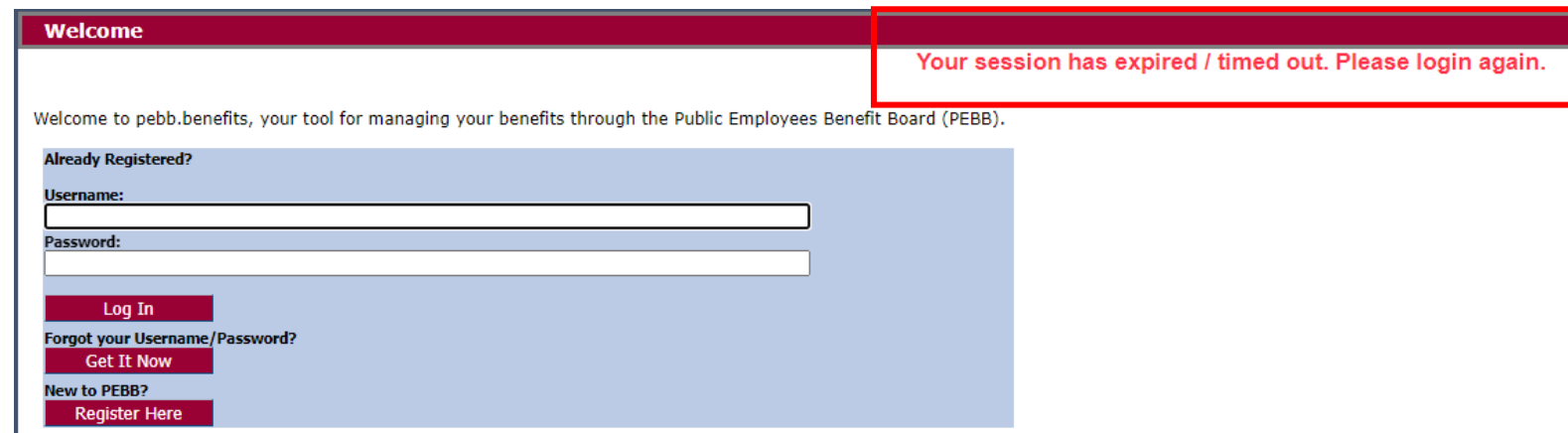
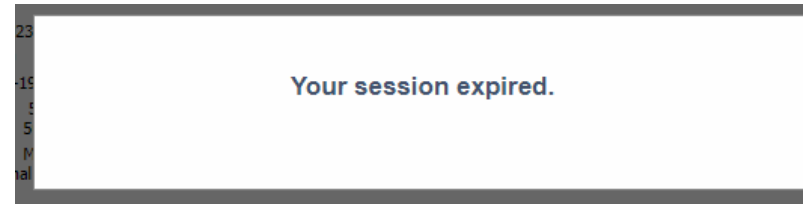
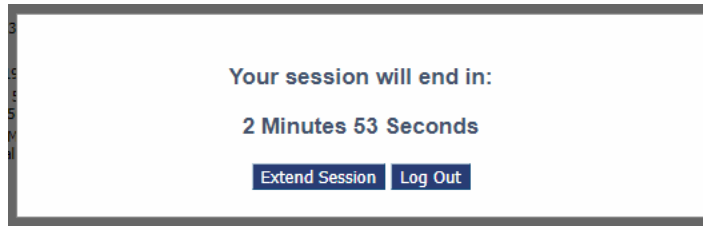
Congratulations.
You successfully completed the Open Enrollment process on
08/24/2026.

You may see some enrollment dates that are **not effective 01/01/27** and that is ok. If there is no end date, then your coverage **will continue through 2027.**

Timeout Warning

Member Module

- Member module has a 30-minute timeout for inactive session.
- New time out warning for members in the member module will show 5 minutes before they are timed out and logged out of their session.



Default process



Members with active employment and are actively enrolled **must** complete the Open Enrollment process by 10/31/26. Agencies have until 11/6/26 (end of day) to input any OE forms received no later than 10/31/26. Please make sure the forms are date stamped.



Members who do not **actively enroll** during Open Enrollment:

- And have optional life insurance will be moved to the “Tobacco” user optional life plan tier for both employee and/or spouse/domestic partner.
 - Will stay in a Medical Waive plan with no active medical coverage for 2027
-



Employees who are enrolled in ***Decline*** for 2026 and intend to continue for 2027 do not need to complete the Open Enrollment process. These members will not be part of the default process.



Members with active employment and are actively enrolled **must** complete the Open Enrollment process by 10/31/26. Agencies have until 11/6/26 (end of day) to input any OE forms received no later than 10/31/26. Please make sure the forms are date stamped.

Agency reminders

- **Agency un-enrolls reports** –find out who still has not completed Open Enrollment. PEBB will run un-enroll reports for your agency weekly for the first couple weeks, then more frequently the last week of OE. These reports will be uploaded to your agencies folders in document management, and you will be notified. Each agency has their own folder and requires special user access to see it. Please check within your agency to find out who has this access.
- **How to help members online** – On the Enrollment Management page there is a “Member Module” button that will allow you to view the member’s enrollment “live” as they are currently enrolling. This is a very helpful tool in case a member is stuck on a page or has a question, you can click this button and move to the page in which the member is asking about. There is no save buttons so you cannot save anything for the member, but you will be able to see the members selections and you can see what they are looking at.

Enrollments

Quick Search

ID Last Name First Name

Save Reset Active History History Detail OE History

Member IDs Member Info Dependents Case Notes Oth-Group Cov. Employment Beneficiaries Benefit Summary Standard Ins. Email Notifications Health Activity HEM for next plan year

Member Module SC Events Reinstatement All Term All

Agency reminders

- During Open Enrollment, you will have **two sections on the Enrollment page**. The upper portion of the page is the “Current” enrollments. The lower portion of the page is the “Open” enrollment section. You will see that in the “Open” section, all the links are open to click on. You **DO NOT need a QSC for Open Enrollment changes** when Open Enrollment is active. Depending on the members’ record, you may or may not see selections for the new plan year effective 1/1/27. You can terminate current coverage 12/31/26 or change or add coverage in the “Open” section. **Please always review the record before making any changes.**
- To Enroll, click on the plan link in the “Open” Section
- To Cancel a current existing optional enrollment, click on the red **“X”** on the far right of the plan in which the member wants to cancel 12/31. Once clicked, you will see the 12/31 end date appear in the upper “current” section of the page.
- If no red **“X”** is showing by the plan you want to delete, click on the plan link and select the “Delete” button.
- Enrollments without end dates in the “Current” section will continue through 2027. There is no requirement to re-enroll all plans to show the new 1/1/27 begin dates.

Summary as member of 44300 OREGON HEALTH AUTHORITY (Current)

If you receive a state contribution, premiums for medical, dental, and employee life coverage (up to \$50,000) will be AUTOMATICALLY deducted on a before-tax basis. If you DO NOT want premiums deducted on a before-tax basis, check here ☐

Plan Type/Plan Name	Plan Tier	Enr Type	Cov. Eff. Date	Enr Date	Andre
Medical	Employee & Children	OPEN	09-01-2026	12-31-2026	☒
Medical	Employee Only	OPEN	05-01-2026	08-31-2026	☐
Medical	Employee Only	OPEN	05-01-2026	12-31-2026	☐
Dental	Employee Only	OPEN	05-01-2026	12-31-2026	☐
Basic Life	Employee Only \$10K	OPEN	01-01-2026	12-31-2026	☐
Employee Optional Life	Non-Tobacco-Employee Only, Age 45 to 49, Amount \$160,00	OPEN	01-01-2026		☐
Accidental Death & Dismemberment	Employee Only - \$50,000	OPEN	05-01-2026		☐
Dependent Care Flexible Spending	No Coverage	OPEN	01-01-2026	12-31-2026	☐
Health Care Flexible Spending	Family Plan, Amount \$100, 12 Months	OPEN	01-01-2026	12-31-2026	☐
Employee Long Term Care	Employee only, duration 3 years, facility amount \$1,000	OPEN	01-01-2026	12-31-2026	☐
Transportation	No Coverage	OPEN	01-01-2026	12-31-2026	☐
Parking	No Coverage	OPEN	01-01-2026	12-31-2026	☐
Tobacco	I currently do not use tobacco	OPEN	01-01-2023	12-31-2026	☐
Other Employer Group Coverage	I do not cover a spouse or partner	OPEN	01-01-2023	12-31-2026	☐
Surcharge	No, I do not cover a spouse or dependent that is enrolled	OPEN	09-01-2026	12-31-2026	☐
Surcharge	No, I do not cover a spouse or dependent that is enrolled	OPEN	01-01-2026	08-31-2026	☐

Summary as member of 44300 OREGON HEALTH AUTHORITY (Open)

If you receive a state contribution, premiums for medical, dental, and employee life coverage (up to \$50,000) will be AUTOMATICALLY deducted on a before-tax basis. If you DO NOT want premiums deducted on a before-tax basis, check here ☐

Plan Type/Plan Name	Plan Tier	Enr Type	Cov. Eff. Date	Enr Date	Andre
Medical	Employee & Children	OPEN	01-01-2027		☒
Medical	Employee Only	OPEN	01-01-2027		☐
Dental	Employee Only	OPEN	01-01-2027		☐
Basic Life	Employee Only \$10K	OPEN	01-01-2027		☐
Dependent Care Flexible Spending	No Coverage	OPEN	01-01-2027		☐
Health Care Flexible Spending	No Coverage	OPEN	01-01-2027		☐
Transportation	No Coverage	OPEN	01-01-2027		☐
Parking	No Coverage	OPEN	01-01-2027		☐
Tobacco	I currently do not use tobacco	OPEN	01-01-2027		☐
Other Employer Group Coverage	I do not cover a spouse or partner	OPEN	01-01-2027		☐
Surcharge	No, I do not cover a spouse or dependent that is enrolled	OPEN	01-01-2027		☐
Employee Optional Life					☐
Spouse/Partner Optional Life					☐
Dependent Life					☐
Accidental Death & Dismemberment					☐
Long Term Disability					☐
Short Term Disability					☐
Decline					☐

Save Reset Active History History Detail

Agency FAQs



When can a member enroll or not enroll online during OE?

- If a member's coverage shows a coverage end date in PDB, the member **will not** be able to enroll online.
- If a member has active coverage through 10/31/26 or later, but the employment status in PDB shows "Terminated", the member **will not** be able to enroll online.



What type of members can or can't enroll online during OE?

- COBRA – **NO**
- Retiree and Self-pay - **YES**
- Active Employees (includes ACA eligible temps, Seasonal, Plan B Judges and SB551) - **YES**

NOTE: Members must have active employment status and active enrollments in PDB to be eligible to enroll online.

System resources list

handouts will be provided separately via email



2027 DP Imputed
Values



How to process OE
forms for 2027 plan
year



Reset passwords
and unlocking
member records



Midyear changes
during and after OE

Contact us – System assistance or issues

**Need System
Assistance?
Contact us**



**System assistance
email:**

[pdb.administration@odhs
oha.oregon.gov](mailto:pdb.administration@odhs.oha.oregon.gov)

**System assistance
phone:**

(503) 378-4868

PEBB Fax:

(503) 373-1654



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Senior System Analyst

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Mobile: (503) 983-5309

Thank you!

PEBB Member Services

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