



OPEN ENROLLMENT – January 1, 2026

October 13 – November 6, 2025

Open Enrollment is here! Open Enrollment is your annual opportunity to review and update your benefits for the upcoming year. Any changes you make during this period will take effect on **January 1, 2026**. Outside of Open Enrollment, benefit changes are only allowed if you experience a **Qualifying Life Event**.

Now is the perfect time to explore your options and make informed choices for yourself and your family. Review the available plans and premium contributions carefully to select the coverage that best supports your needs. Healthcare decisions are some of the most important you'll make to protect your well-being and maintain your quality of life. As you consider your options, think about any life changes over the past year—or those you anticipate in the year ahead. For example:

- Did you get married or welcome a new child?
- Are you or a family member managing a new or ongoing health condition?

If so, it may be time to adjust your benefit elections.

👉 Your plan information can be found at

<https://epcschools.org/health-benefits/districts/grant-ctc>

Let's Get Enrolled!

Medical • Dental • Vision • Life

Open Enrollment is your time to make benefit elections for the upcoming year. All elections will be completed in **Benelogic**, EPC's online enrollment system. While you're there, you can also review and update your **life insurance beneficiaries**.

🔗 Access Benelogic here: <https://epc-online.benelogic.com/>

Need help? Check out this resource: [How to Use Benelogic for Open Enrollment](#)

If you need assistance with your username or password, contact someone in your Treasurer's Office.

My Life Changed!

During the plan year, you may experience a **Qualifying Life Event** that allows you to make changes to your current benefit elections. These changes must be made **within 31 days** of the event. Details about your special enrollment rights can be found in the *General Health Notices – Special Enrollment Rights*. Some of the Qualifying Events are listed below:

Marriage Divorce Birth/Adoption Death Loss of coverage

Who Can You Cover On Your Plans?

- **Spouse** – Legally married, not separated or divorced.
- **Children** – Natural, adopted, or legally placed child, up to age 26.
- **Disabled Children 26+** – Mentally or physically disabled and fully dependent on you for support.

What Documentation Do I Need For My Dependents?

Documentation is required to enroll **new** dependents in your benefit plans and must be submitted **within 31 days** of the enrollment event. All dependents must be enrolled under their legal name and include their Social Security Number and date of birth. *Coverage will be terminated if required documents are not received.*

Required Documentation:

- **Spouse** – Court-stamped/filed marriage certificate (not the license) **AND** the first page of your most recent 1040 Tax Return (with financial details redacted).

Spousal Coordination of Benefits Form – Complete if your spouse will be taking our insurance, either primary or secondary. If your spouse is eligible for insurance through his/her workplace or retirement system, they must take that insurance and will be covered under our insurance as secondary, if you so choose. This is a CCIC (Clermont County Insurance Consortium) rule, not a district rule.

- **Children** – Birth certificate, adoption decree, or legal guardianship paperwork from the courts (if applicable).
- **Disabled Children** – Contact your HR/Treasurer’s Office for specific documentation requirements.

What if I’m getting close to retirement?

It’s never too early to start planning for a **happy and healthy retirement**. We encourage you to register for a **free retirement planning webinar with [RetireMed](#)**, where you’ll learn about:

- Retirement health plan options
- STRS and SERS benefits
- What to consider as you prepare for the future

 Remember: **Medicare eligibility** should be reviewed at least **six months before your 65th birthday**, no matter when you plan to retire.

HSA Limits & Eligibility

A **Health Savings Account (HSA)** allows you to set aside pre-tax dollars to pay for qualified medical expenses. HSAs provide triple tax advantages: contributions are tax-free, funds grow tax-free, and withdrawals for qualified expenses are tax-free. If enrolled in this option, Grant contributes \$600 for single plans and \$1,200 for family plans to your Health Savings Account each January.

2026 Contribution Limits

- **Individual Coverage:** \$4,400
- **Family Coverage:** \$8,750
- **Catch-Up Contribution (age 55+):** Additional \$1,000

Eligibility Requirements

To contribute to an HSA, you must:

- Be enrolled in a qualified **High-Deductible Health Plan (HDHP)**
- Not enrolled in **Medicare**
- Not be covered by another non-HDHP health plan (including a spouse’s plan)
- Not be claimed as a dependent on someone else’s tax return

 Your HSA funds are yours to keep — they roll over each year and remain with you even if you change jobs or retire.

 Need more information about HSA accounts? Click on the [HSA Information Link](#).

Required Notifications

- General Health Notices - Includes GINA, Special Enrollment Rights, WHCRA
- Medicare Part D Notice
- CHIPS Model Notice
- EPC Privacy Notice
- No Surprise Billing Notice

Wellness Opportunities

EPC offers a variety of wellness benefits **at no cost** to employees and districts through the [EPC Wellness Plan](#). Take advantage of these programs designed to support your overall health and well-being:

- [Lark Diabetes Prevention Program](#) (*Anthem members, spouses & adult dependents*)
Lark is a digital, AI-powered health coach that offers personalized support for weight management, nutrition, physical activity, and stress. It provides real-time feedback, integrates with health devices and apps, and helps users track progress toward healthier habits.
- [Employee Assistance Program \(EAP\)](#) (*available to all EPC Plan districts*)
Provides confidential support for mental, emotional, and personal well-being. Services include 24/7 crisis counseling, financial and legal consulting, and child/elder care resources. Offered through Anthem EAP and available to all UHC districts as well.
- [Hello Heart](#) (*medical plan members, spouses & adult dependents*)
A digital platform that supports heart health through monitoring, healthy habits, and personalized insights. Eligible members receive an app-connected blood pressure monitor with real-time feedback and tracking.
- [Hinge Health](#) (*medical plan members, spouses & adult dependents*)
Digital support for musculoskeletal (MSK) conditions such as chronic back, knee, hip, shoulder, or neck pain. Combines technology with human coaching to reduce pain, improve mobility, and avoid unnecessary surgeries or medications. Accessible anytime, anywhere through the app.

 *Districts may also receive additional grant funding to support wellness programming.*

If you have questions about open enrollment, please ask. Start reviewing your benefit plan materials today and make your elections before the enrollment period ends!

2026 Monthly Insurance Rates

Medical Plan

Anthem HDHP

Single: \$152.63
Family: \$418.99

Anthem PPO

Single: \$166.51
Family: \$457.10

Dental Plan

Delta Dental

Single: \$17.81
Family: \$17.81

Vision Plan

VSP Option 1

Single: \$7.89
Family: \$18.36

VSP Option 2

Single: \$10.02
Family: \$23.44