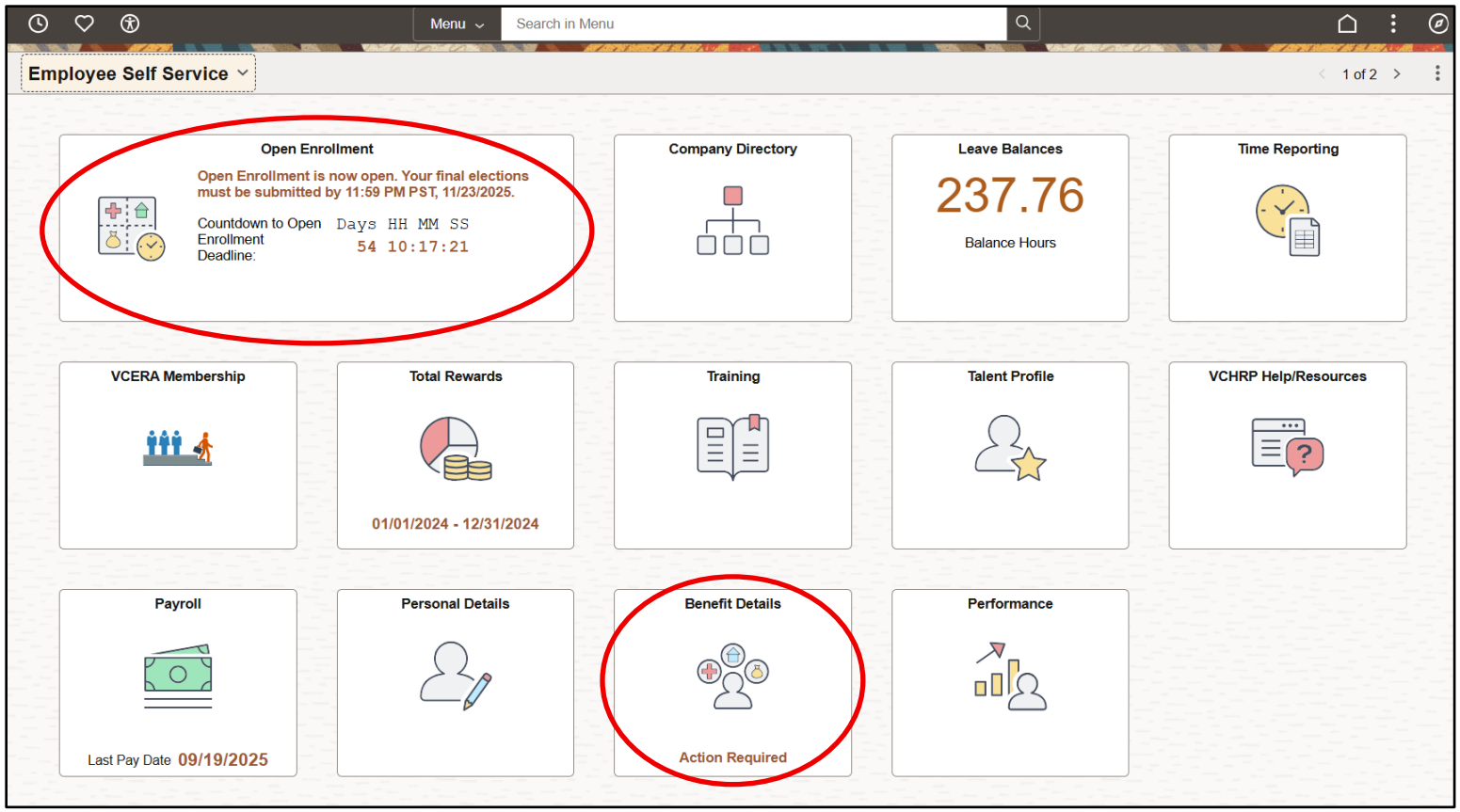
2026 VCHRP Open Enrollment User Guide

Read this guide in its entirety if you have any questions about completing open enrollment.

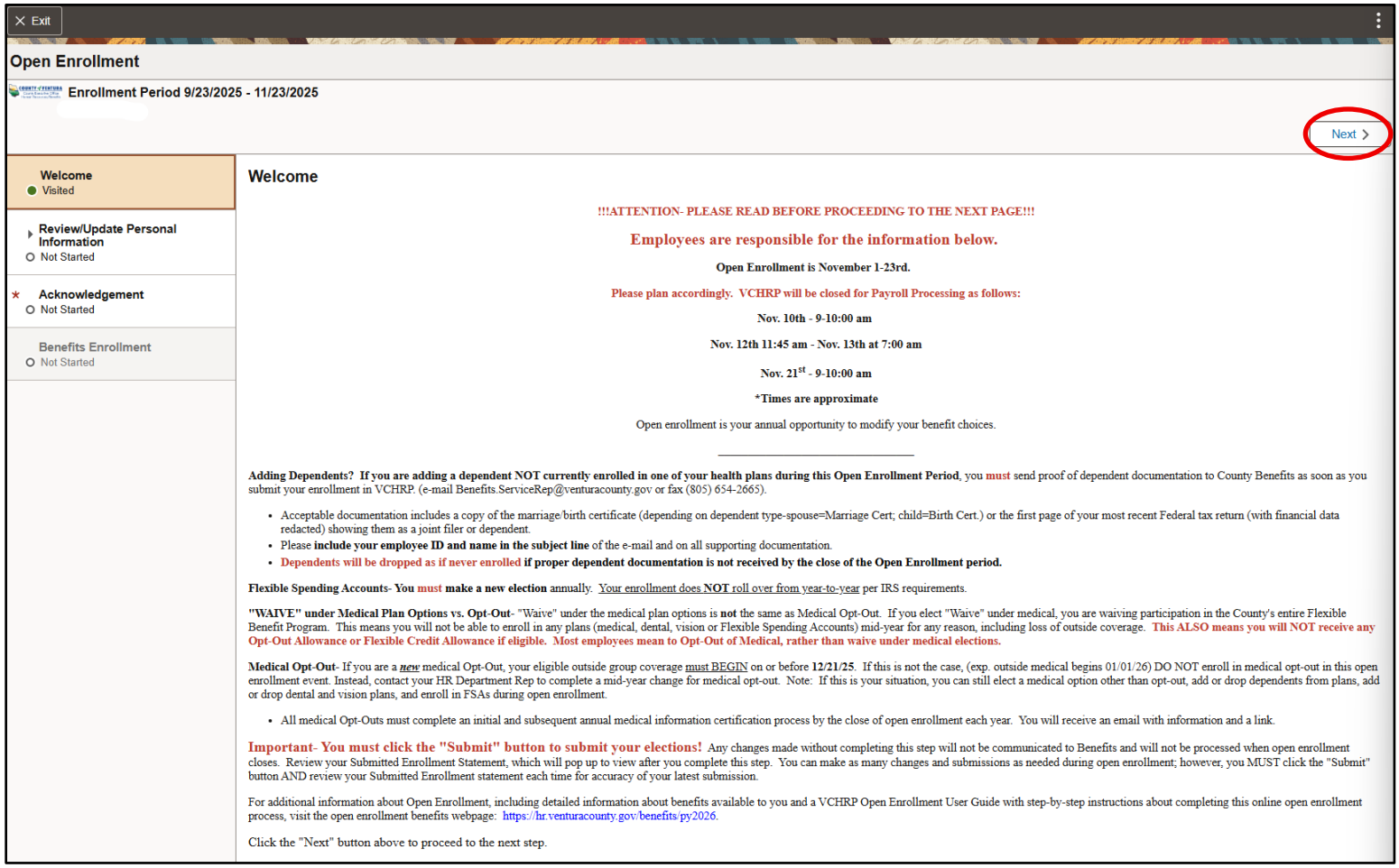
Note: If you do not need to make any medical, dental or vision changes and do NOT want to be enrolled in any Flexible Spending Accounts (FSAs) for the 2026 plan year, no action is required. FSA's do not rollover from year-to-year.

Once Open Enrollment begins, your tile will become accessible and display a countdown indicating the time remaining until the close of the enrollment period. To ensure your elections or changes are valid for the 2026 plan year, all updates must be completed during the Open Enrollment window and submitted using the "Submit" button. Please note that the red "Action Required" message on the Benefit Details tile simply signifies that you have an open life event—your Open Enrollment. This message will remain visible until the enrollment period officially ends.

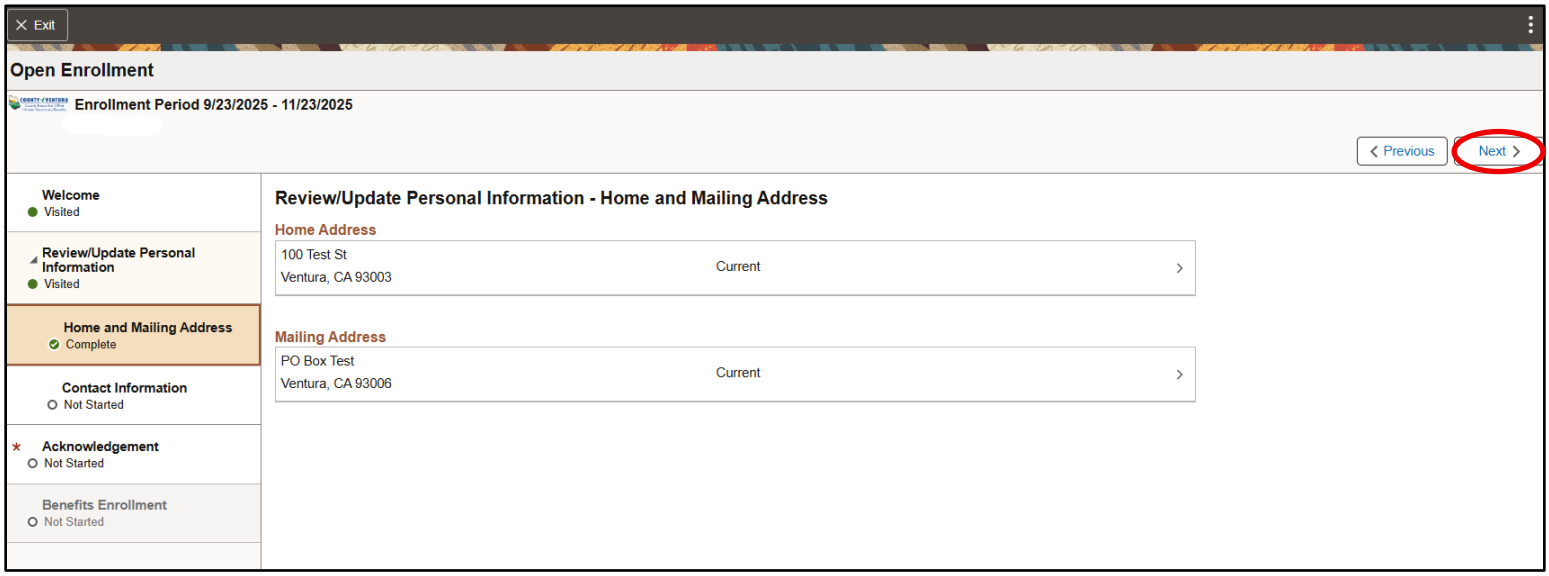
Click the *Open Enrollment* tile to begin your event.



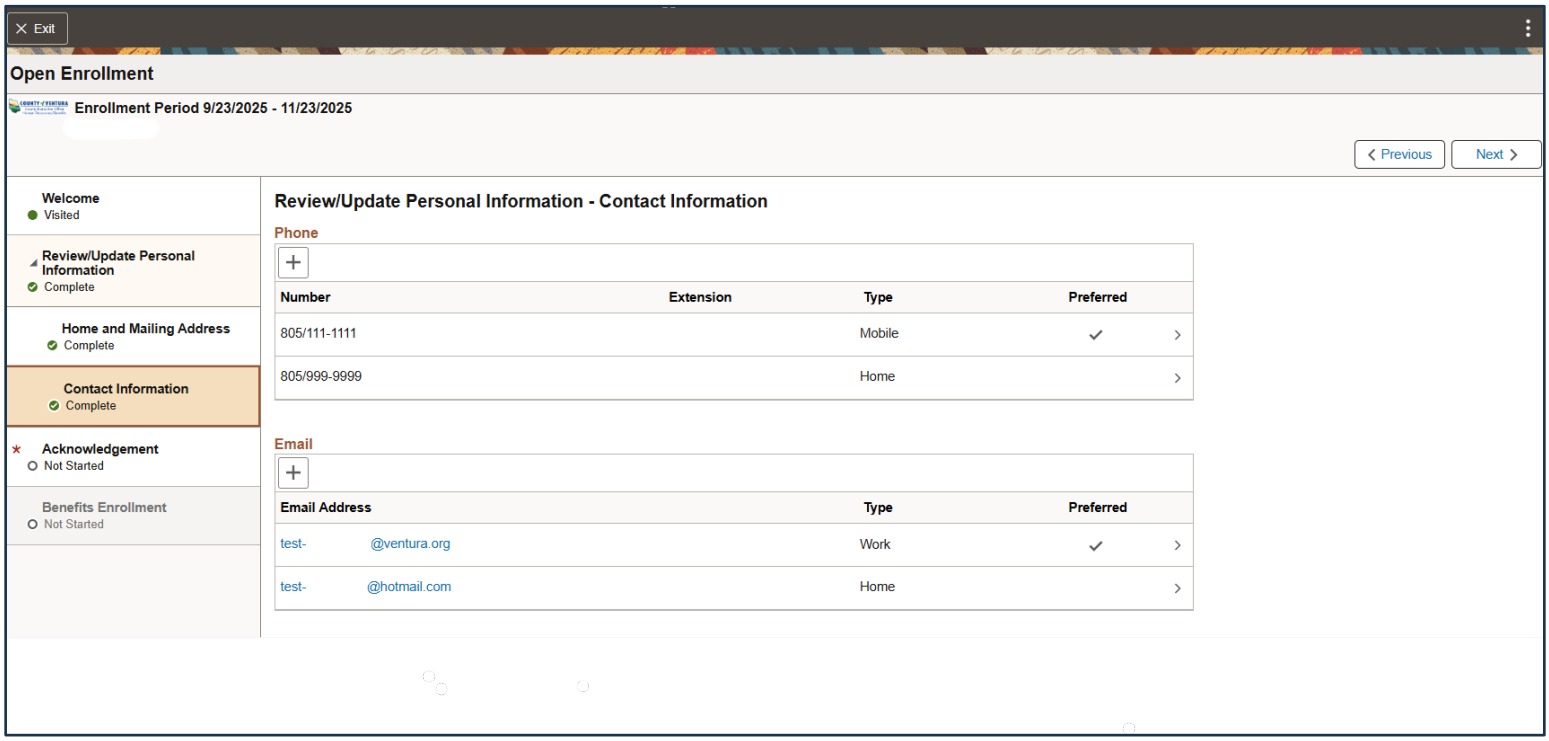
Welcome Screen- Employees are responsible for reading and understanding the Welcome screen presented at the start of their Open Enrollment event. This screen contains important information regarding the enrollment process and any applicable changes. Failure to properly complete Open Enrollment may result in the loss of any intended benefit updates or elections for the upcoming plan year.



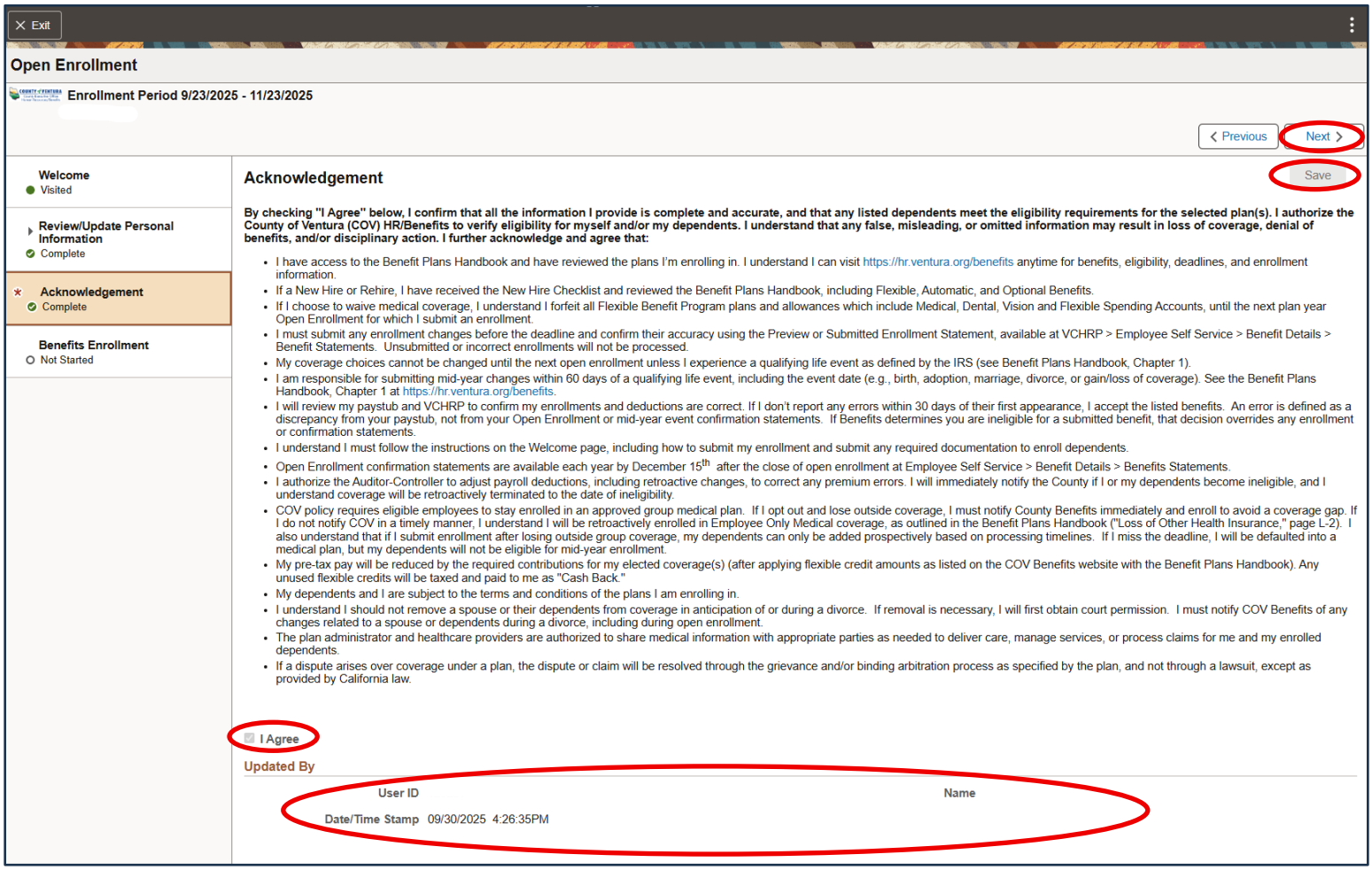
Home and Mailing Address- During Open Enrollment, employees should carefully review their Home and Mailing Address information and make any necessary updates. After reviewing, click the "Next" button to proceed to the Contact Information page. If you need to change your address while Open Enrollment is active, it is important to update both in this open enrollment event & Self-Service > Benefit Details > Addresses. Changes made in the Self Service Addresses tile during open enrollment, but not reflected here, will revert to the outdated information listed in the Open Enrollment event once the enrollment period closes.



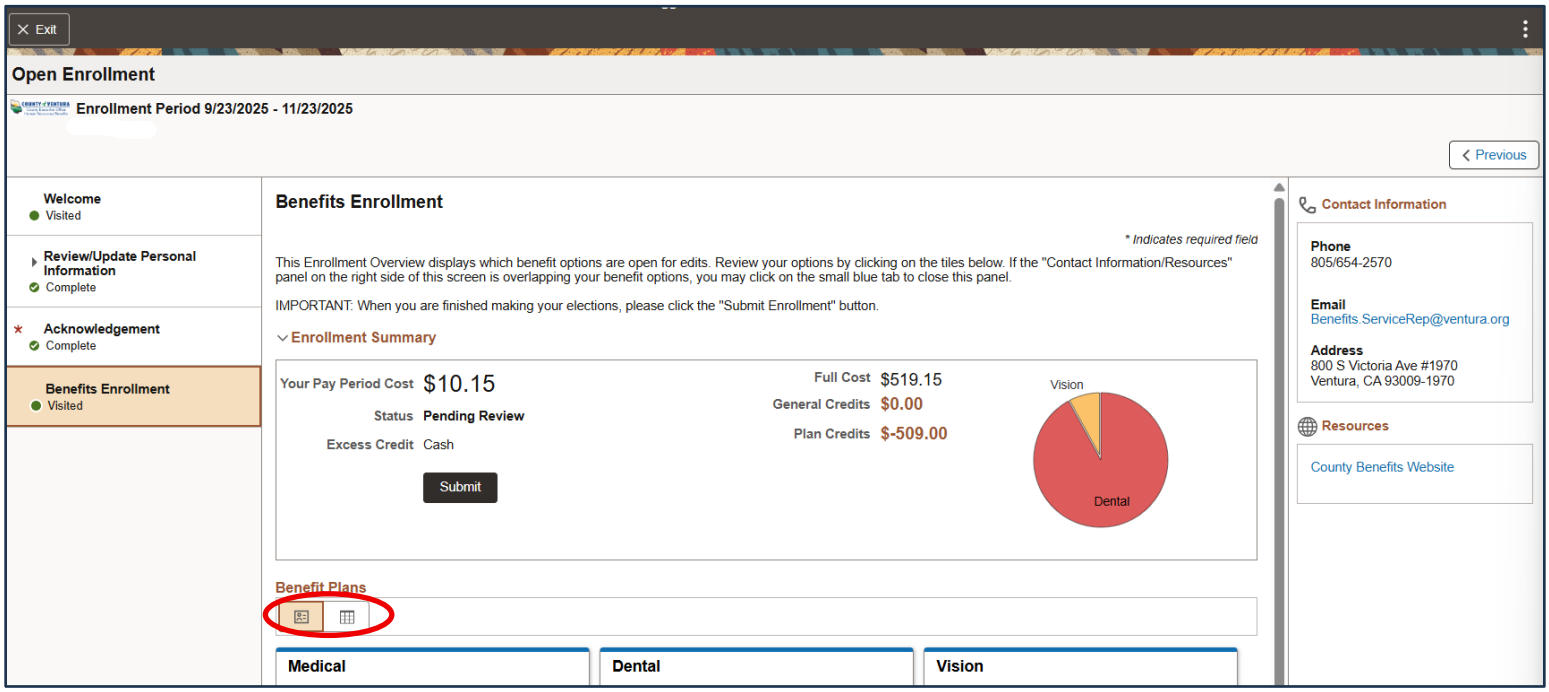
Contact Information Page- Review and make any needed changes. Click the "Next" button to proceed to the Acknowledgement page. The same thing applies to contact information as addresses above. If you need to change this information to be effective during the Open Enrollment period, you should change both outside the Open Enrollment event in VCHRP Employee Self Service > Personal Details > Contact Details , as well as in this open enrollment event (page shown below).



Acknowledgement Page- To proceed, carefully read the information provided on this page and acknowledge your understanding by checking the "I Agree" box. Then, click the "Save" button. This action will activate the "Next" button at the top of the page, allowing you to continue. Once both the "I Agree" and "Save" boxes are selected, your User ID, name, and a date stamp will appear in the "Updated By" section as confirmation. After completing this step, allow a moment for the "Next" button to populate. If it does not appear, exit the Open Enrollment event and re-open it to continue with your elections and enrollments. You may then proceed to the "Benefits Enrollment" page.



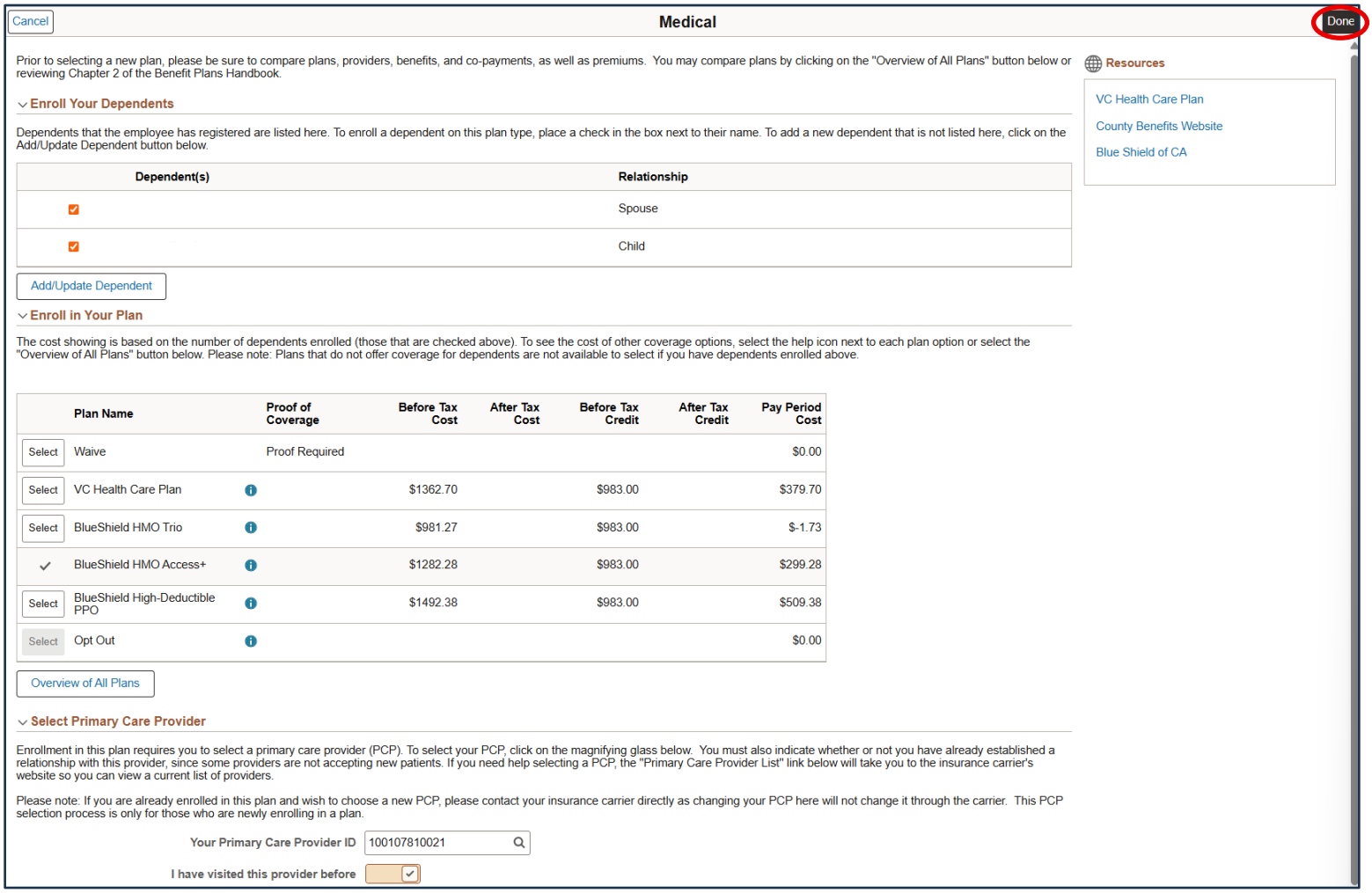
Benefits Enrollment Page- This page allows you to make your Open Enrollment election changes. Benefit Plans are displayed in tile format by default when the page opens, providing a visual overview of available options. If you prefer a more streamlined layout, you can switch to the list view by clicking the icons located beneath the “Benefit Plans” section. This flexibility ensures you can navigate and review your benefit options in the format that works best for you.



Adding Dependents- To review or make changes to your benefits, click on each Benefit Plan Type individually. If you wish to add new dependent information, you may do so within the medical, dental, or vision plan sections. However, to successfully add or remove dependents, you must access and elect enrollment in each specific plan type by checking or unchecking the box next to each dependent's name. Simply entering dependent information without selecting enrollment will not enroll them in any plan.

All newly added dependents must be verified by CEO/HR-Benefits. For new Dependents, you must provide proof using the Upload Dependent Proof instructions section of this user guide.

Click Done after you have selected your plan and have enrolled any dependents.



PCP Elections!!! Important Please Read: When selecting an HMO plan on the medical page, the system will require you to enter a Primary Care Physician (PCP) for yourself and each covered dependent. Even if you're staying on your current plan but explore other options, these fields must be completed before you can proceed. However, PCP information entered will only be transmitted to the medical provider if you are changing plans or adding a new dependent. For example, if you are enrolled in Blue Shield Trio and click on Blue Shield Access+ but ultimately remain with Trio, the PCP details you entered will not be sent. If you switch from Blue Shield Trio to Blue Shield Access+ or VCHCP, your PCP selections will be transmitted to the new plan. Similarly, if you add a new dependent to your existing VCHCP plan, only that dependent's PCP information will be sent—existing members' PCPs will not be updated. To change a PCP for yourself or any dependent outside of a plan change or new enrollment, you must contact the medical plan directly; PCP-only updates cannot be made through this system.

Medical Opt-Out- If you are opting out of medical coverage during Open Enrollment, you must verify your eligibility by providing documentation of your outside group plan. Once you make your medical opt-out election, you will receive an email with instructions to complete the medical opt-out certification in VCHRP and upload the required documentation. It is important to follow the steps outlined in the email promptly, as failure to do so may result in continued enrollment in your current medical plan. For new medical opt-out participants, **your outside coverage must begin on or before December 21, 2025**, to qualify for opt-out during Open Enrollment. If your outside coverage does not meet this requirement, do not elect medical opt-out during Open Enrollment. You will be defaulted back into your current medical plan and coverage level. Instead, contact your Department HR Representative to initiate a mid-year election change.

• Medical "Opt-Out" is not the same as selecting "Waive" under the medical plans section of Open Enrollment. Choosing "Waive" means you are declining participation in the County's Flexible Benefit Program, and if eligible, you will not receive any Flex Credit or Opt-Out Allowance. Be sure to make your medical enrollment selections carefully. If you have any questions, reach out to your Department HR Representative for guidance.

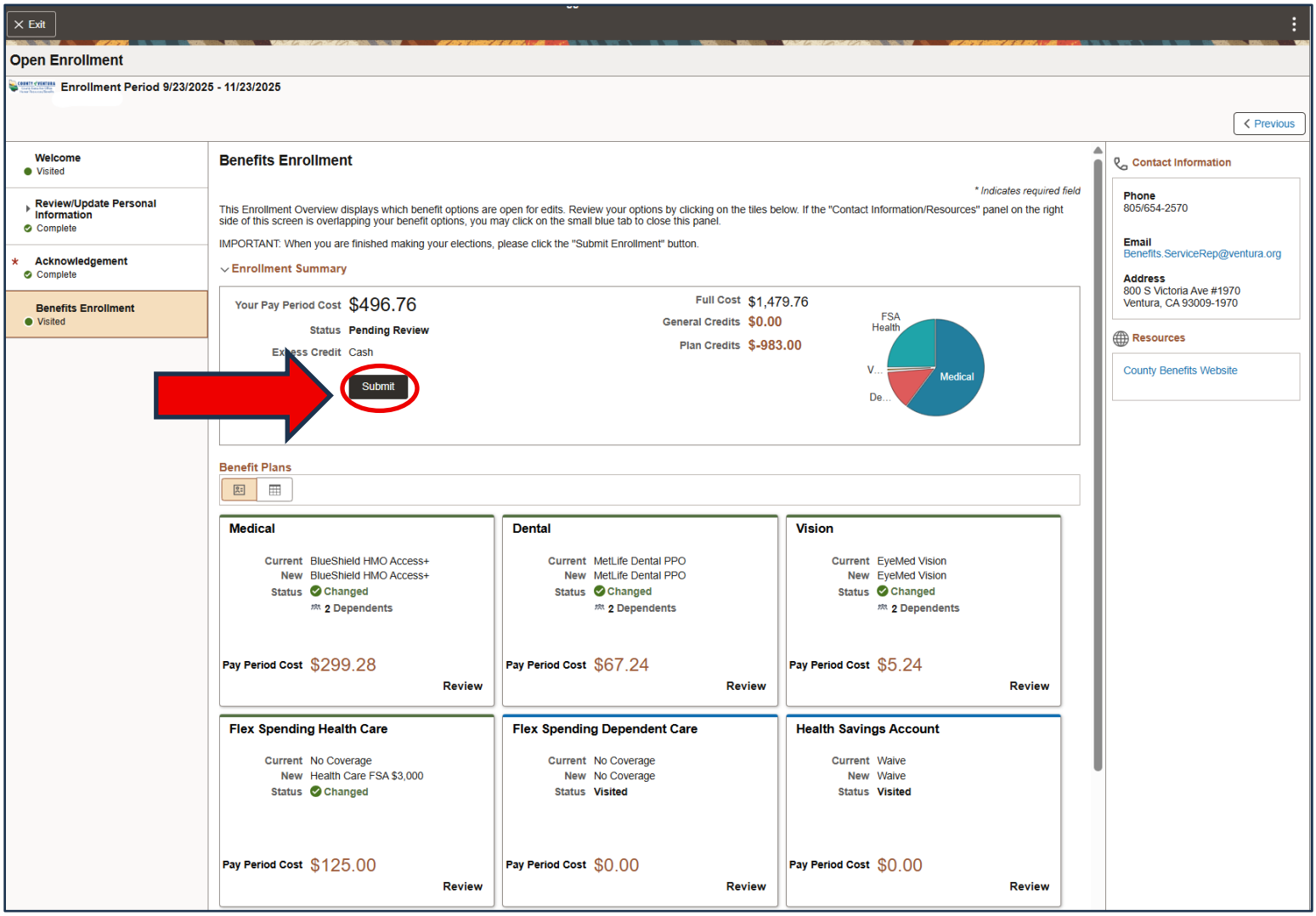
Dental and Vision Plans – If you do not wish to participate in County-sponsored dental or vision options, the correct selection is "Waive."

Flexible Spending Accounts – To enroll in Health Care or Dependent Care Flexible Spending Accounts, you must make a new election each year during Open Enrollment. These elections do not carry over year-to-year.

Health Savings Account – Enrollment in a Health Savings Account (HSA) does carry over annually, as long as you remain enrolled in an eligible HDHP PPO plan. You may also choose to enroll or make changes to your HSA at any time during the year. Only employees enrolled in an HSA are eligible to enroll in a Limited Purpose HealthCare FSA. If you wish to enroll in a Limited Purpose HealthCare FSA, you must elect it each year during Open Enrollment, as it does not roll over. Since HSAs offer greater flexibility than FSAs, it is recommended that you maximize your HSA contributions before considering enrollment in a Limited Purpose HealthCare FSA.

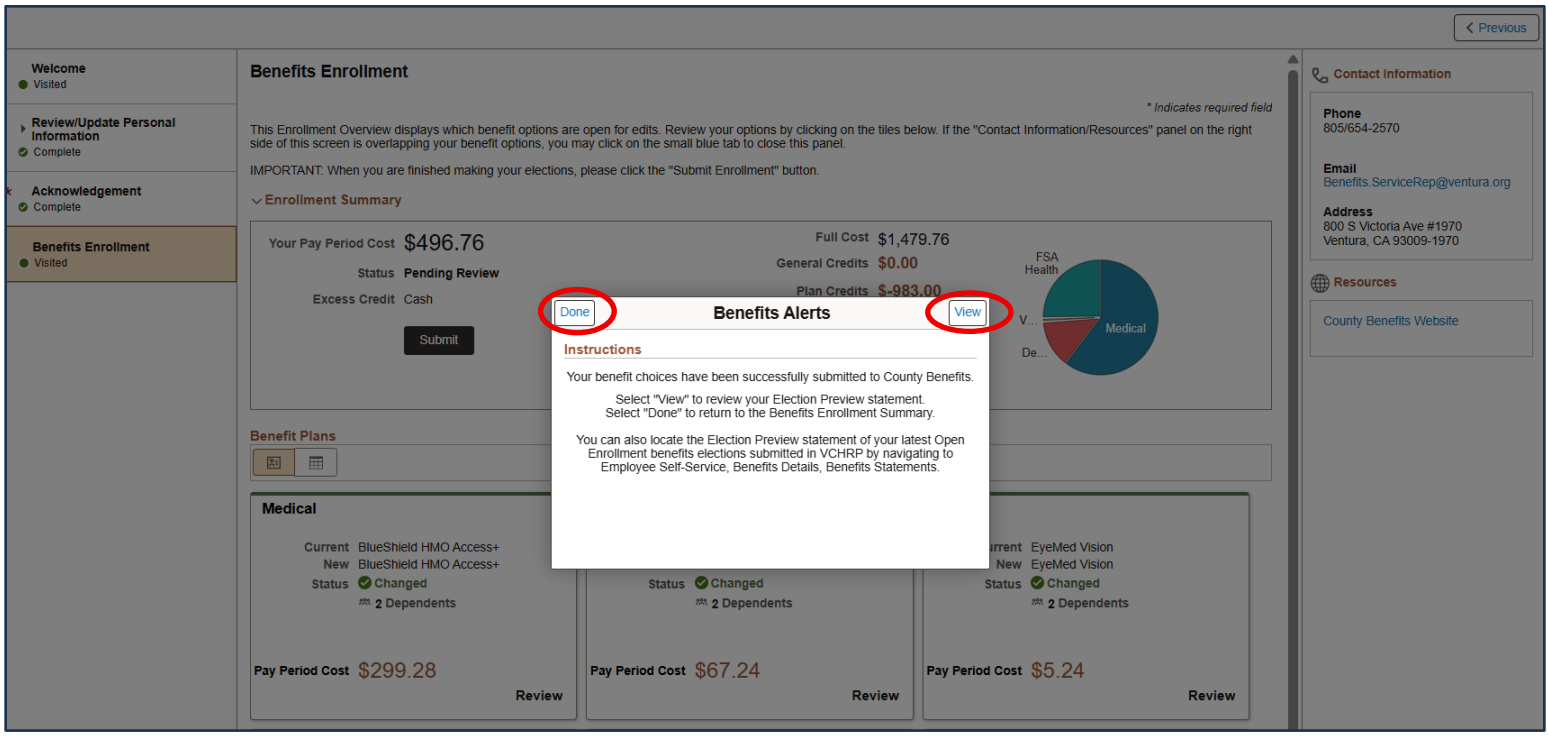
SUBMITT YOUR ENROLLMENT- Once you've made any enrollment or election changes during Open Enrollment, you must click the black "Submit" button to ensure your changes are processed. If you do not complete this step, any pending updates will not be saved and will be lost once Open Enrollment closes. Think of it like placing items in your Amazon cart but never completing the purchase—after the deadline, those options are no longer available to you.

You may revise your Open Enrollment elections as many times as needed during the enrollment period. However, each time you make a change, you must click the black "Submit" button again to confirm and save your updates. If you fail to do so, those changes will not be applied to your 2026 plan year elections and will be discarded once Open Enrollment ends.

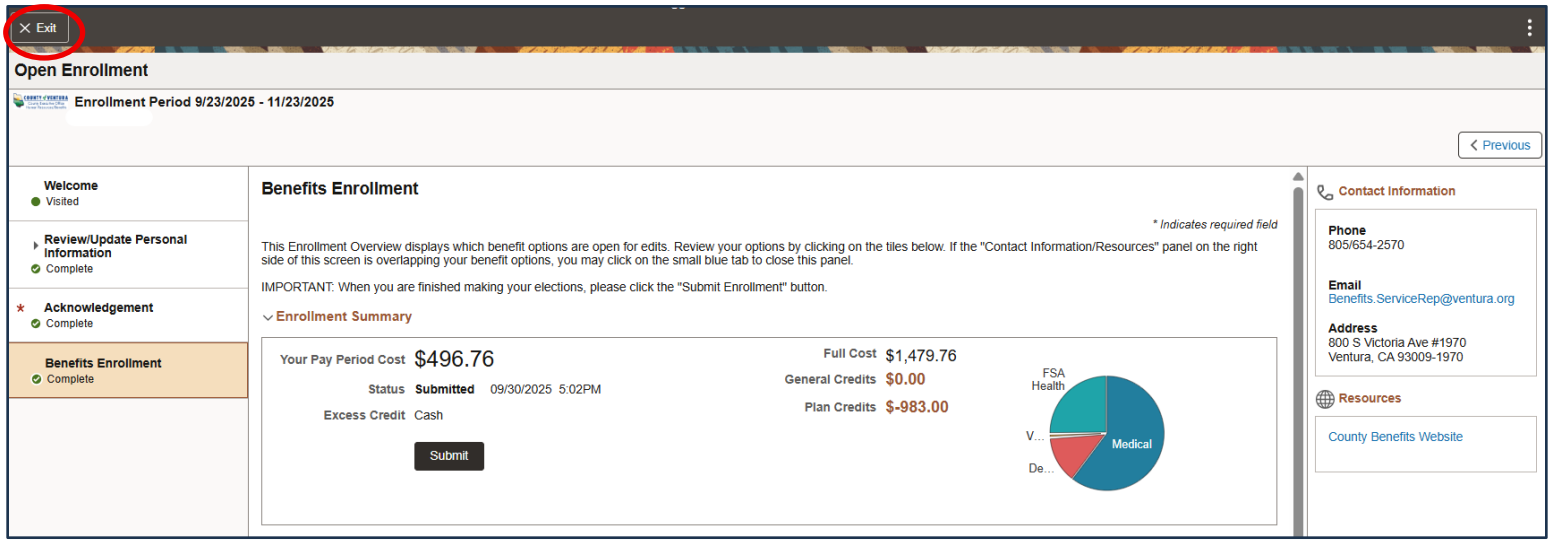


After clicking the "Submit" button, a benefits Alert message will immediately pop up. Select View to review your Elections

Preview Statement. Your statement will open in a separate web browser window. Take a moment to verify that your submitted changes reflect your intended elections. If they do not, simply repeat the process until your selections are correct. Select Done to return to the Benefits Enrollment event summary page.



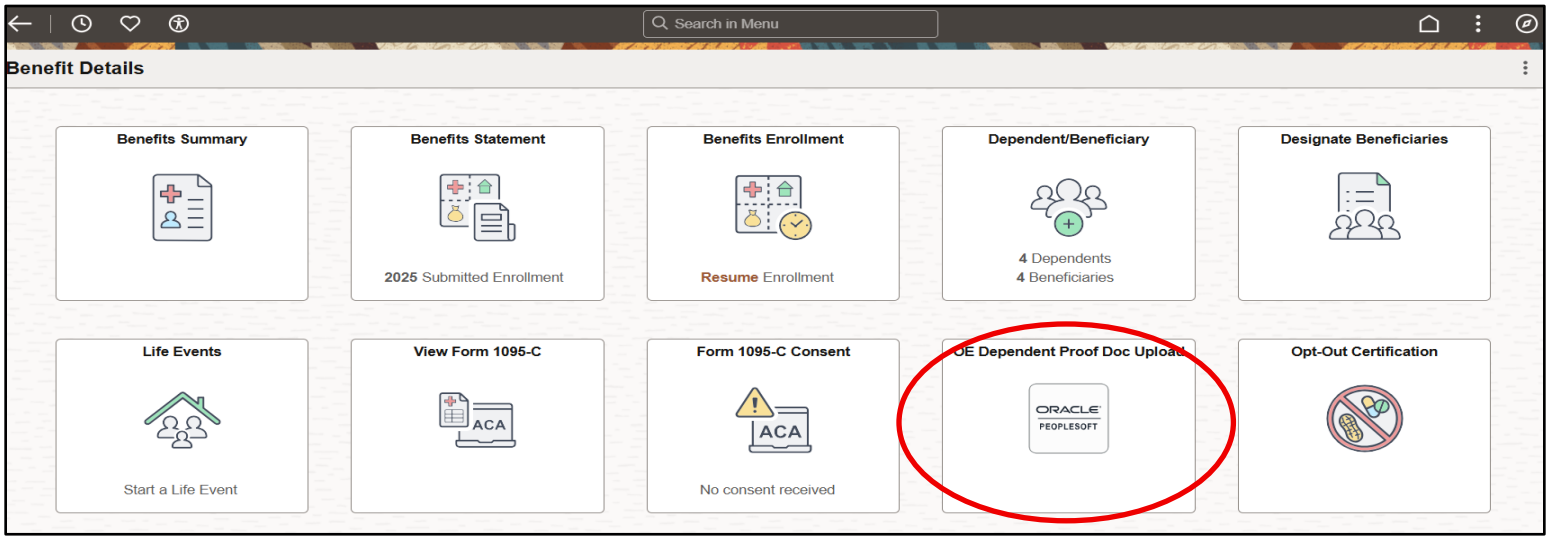
Congratulations! You have successfully submitted your Open Enrollment event for the year. You may now select Exit to return to the Employee Self Service home page. You will receive a warning message requiring you to confirm that you wish to exit and reminding you that you **must click the Submit button** for your elections to be transmitted to CEO- Benefits.

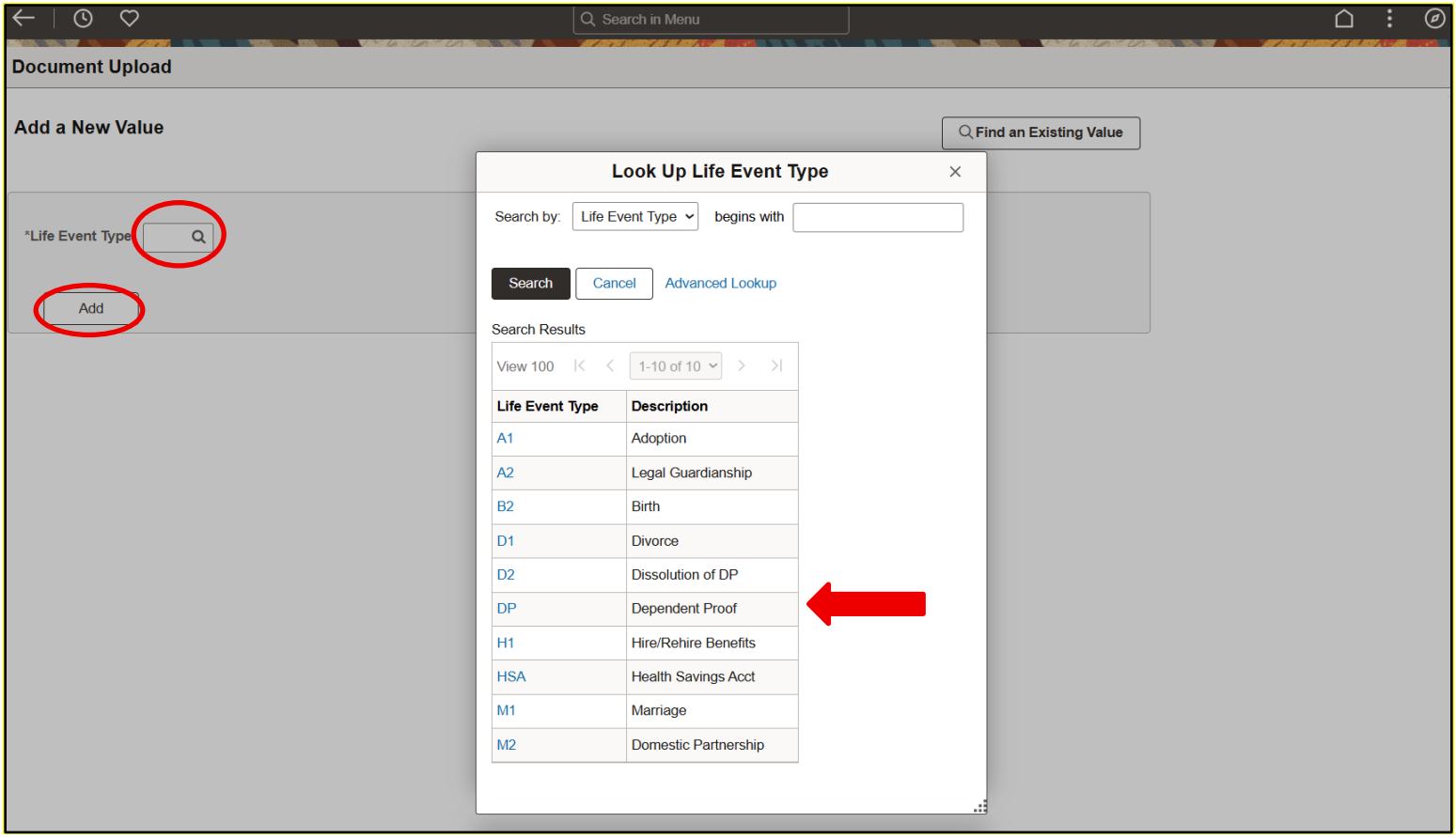


If required, proceed with the next steps to upload proof for newly enrolled dependents.

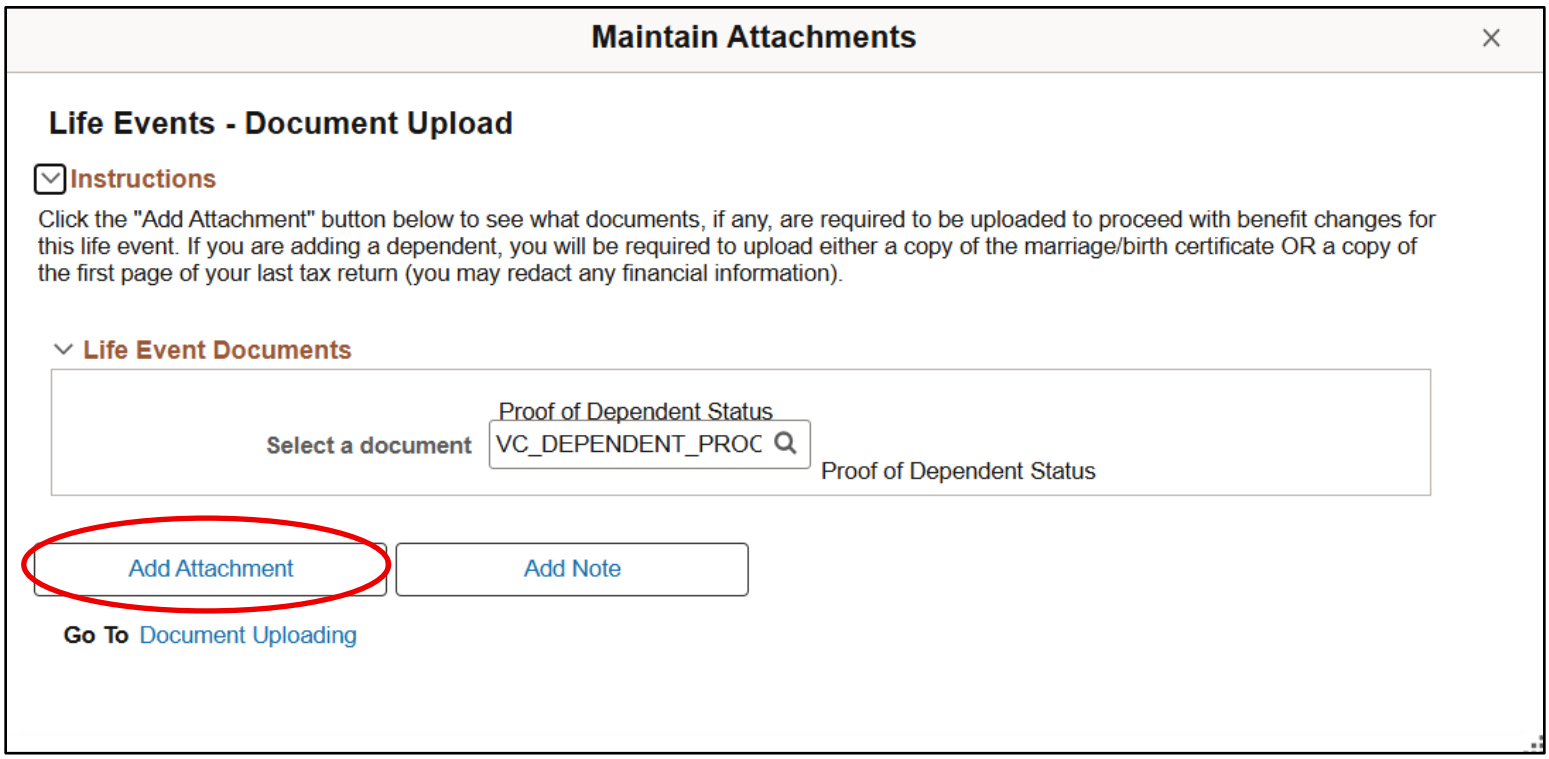
Uploading Dependent Proof- Once you have completed and submitted your enrollment, you must upload dependent proof

(marriage cert, birth cert, adoption decree, most recent year's Federal tax return). After you have submitted your enrollment, reviewed your preview statement for accuracy, and have clicked the Exit button, you will be returned to the Employee Self Service home page. **Click on the *Benefit Details* tile and then click the *OE Dependent Proof Doc Upload* tile.**

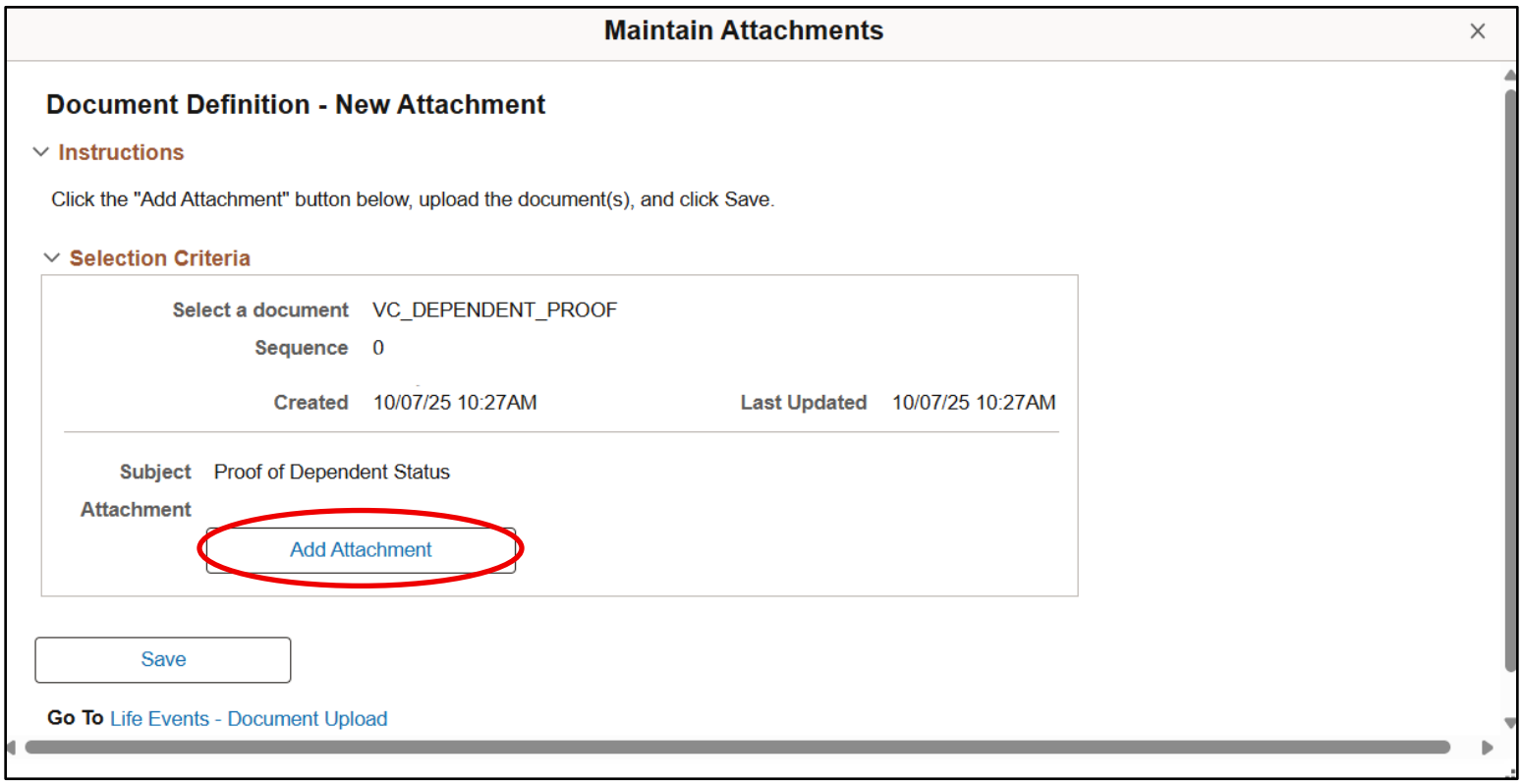




On the Document Upload page, click the magnifying glass icon and select the **Life Event Type for *DP – Dependent Proof*.** The event type of DP will be populated into the field for you. **Now, click on *Add*.**

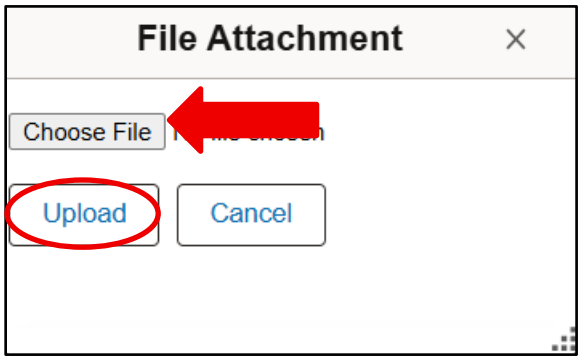


On the Life Events – Document upload window that pops up, **click the *Add Attachment* option.**

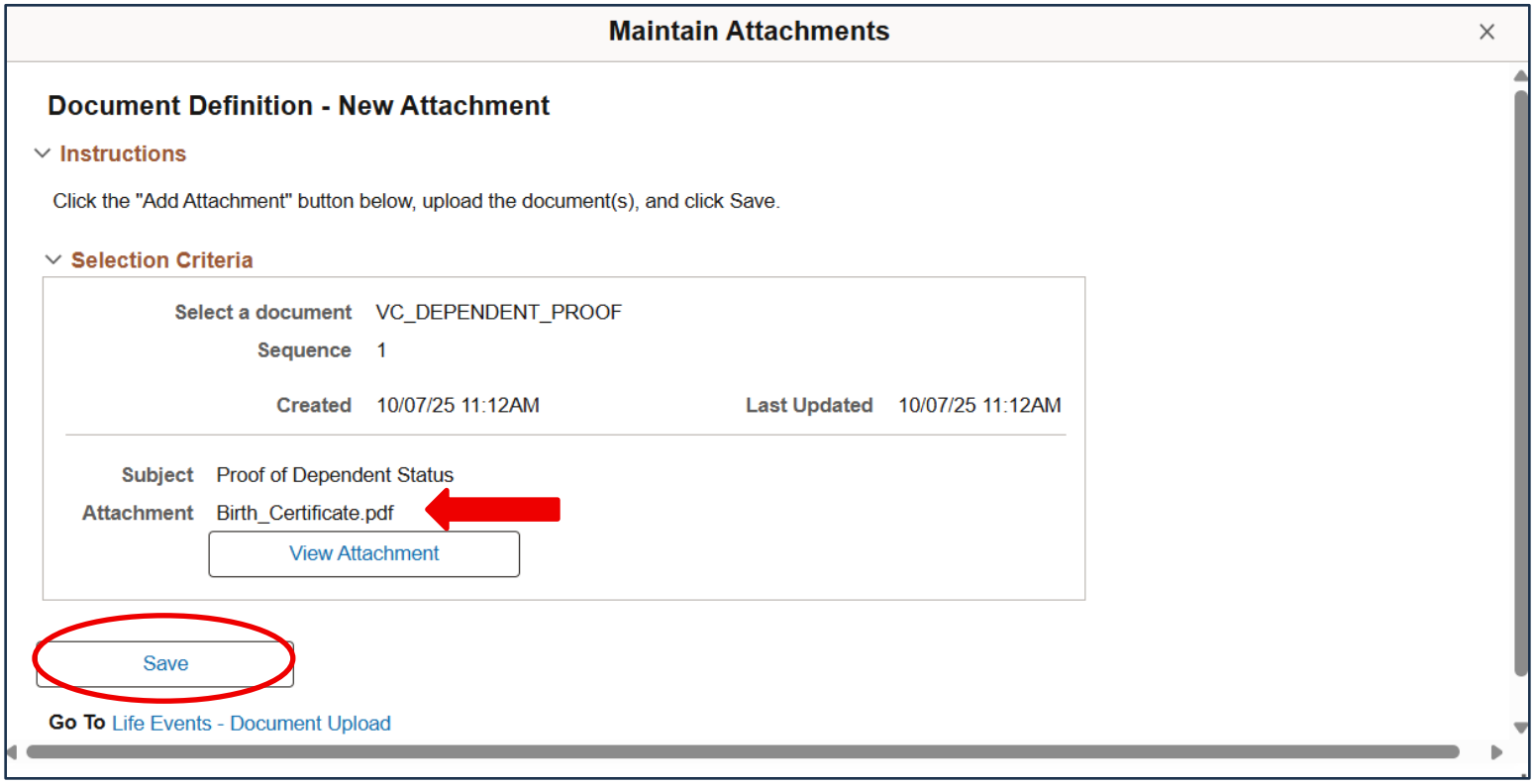


On the Document Definition – New Attachment window, **click on *Add Attachment*.**

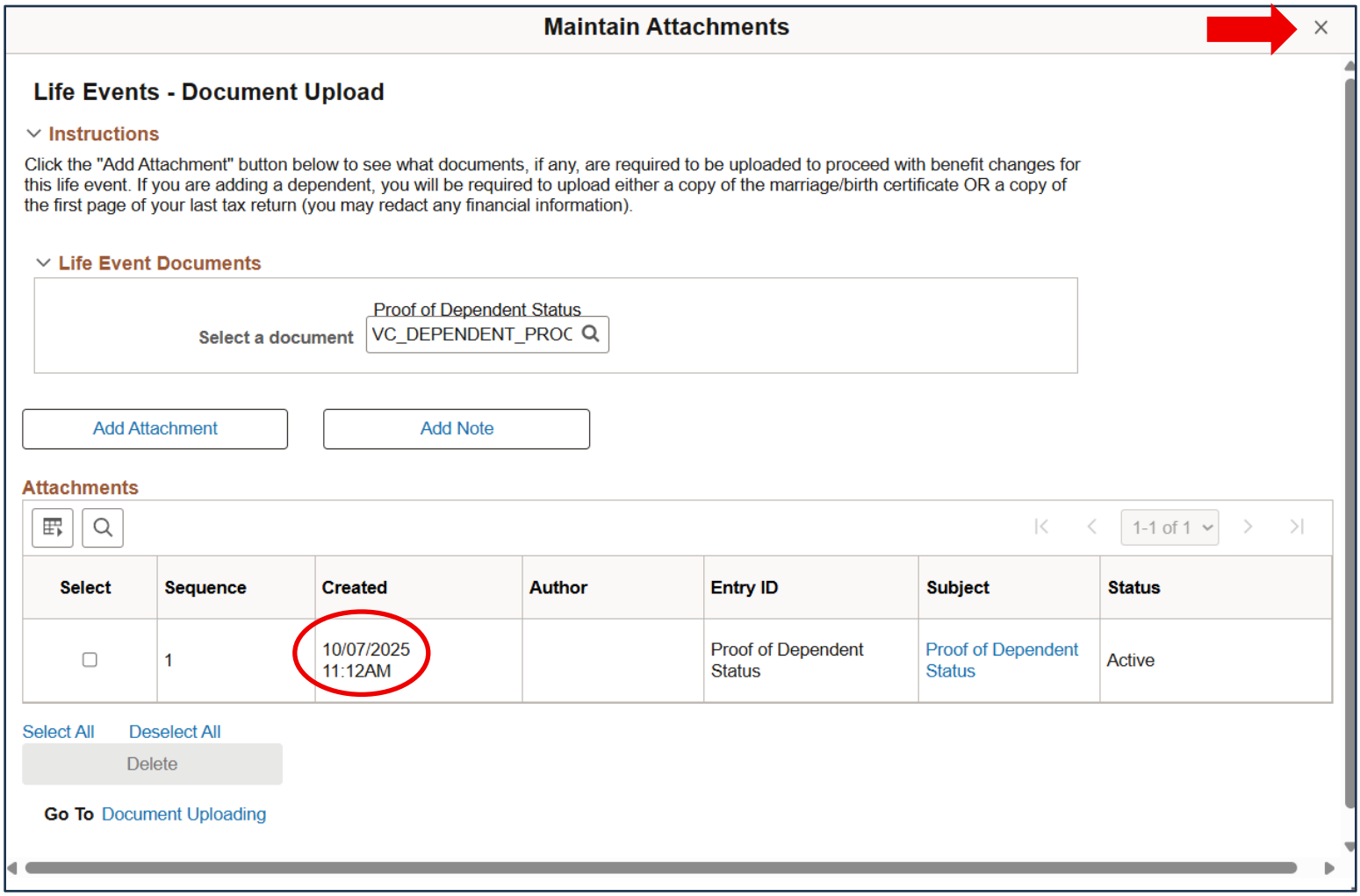
A File Attachment window will pop up and you need to choose the file you want to submit as proof and click the *Upload* button.



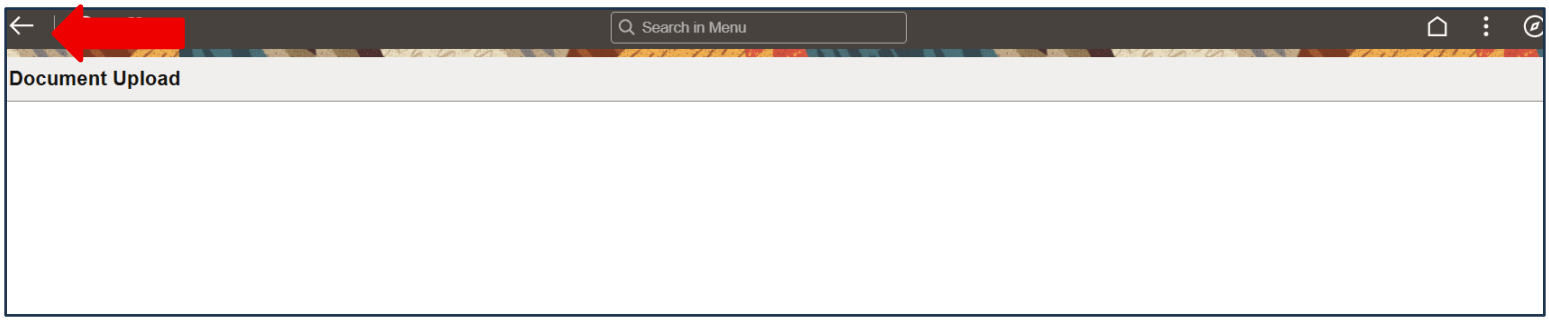
You will be returned to the Document Definition – New Attachment window. Check that your attachment was uploaded by verifying your document name is reflected in the Attachment field and click the ***Save*** button. You must click save for the document proof to be sent to CEO/HR – Benefits for review and approval. **If this step is not followed, your dependents may not be verified and enrolled in the plans you elected.**



The Life Events – Document Upload pop up window will be displayed with your attachment details including the date and time submitted. If you do not see the below screen, your proof was not submitted to CEO/HR – Benefits and you must re-upload the proof. Click the X in the upper right corner of the pop up to exit.



You will be returned to the Document Upload page, which will be blank. To return to the Employee Self-Service homepage, click the back arrow in the upper left corner of the page.



What to Expect- You've successfully uploaded the required dependent documentation for your selected benefits. If any additional information is needed, a member of the CEO/HR – Benefits team will reach out to you with further instructions. As long as you've uploaded your proof, confirmed the document name and timestamp, and saved your submission, no further action is needed unless we contact you. Once everything is verified, your dependents will be enrolled. You will not be contacted by us unless there is an issue, or additional documentation or clarification is needed.

IMPORTANT- Please ensure you allow yourself sufficient time to complete your Open Enrollment event. We strongly advise against waiting until the last minute, as technical issues, confusion with the process, or indecision are not considered valid reasons for making changes or requesting exceptions outside of the annual Open Enrollment period. According to the County's Plan Document, which adheres to IRS guidelines, Open Enrollment is the designated time for employees to make changes to their flexible benefit program without a qualifying mid-year event.

If you have questions about specific benefit plans, please refer to Chapters 2–4 of the Benefit Plans Handbook or contact the individual plan providers directly. Use the "Who Do I Call" on the Benefits Page by plan year. (https://hr.venturacounty.org/benefits/py2026)

You can access the handbook, rate sheets, vendor websites, VCHRP login link, and other resources at: https://hr.venturacounty.org/benefits/py2026.

For assistance accessing VCHRP, contact your agency's HR or IT Department. You may also email Benefits.ServiceRep@venturacounty.gov or call the Benefits Service Representative line at 805-654-2570. Please note that this email and phone line serve all County of Ventura agencies, so response times may be longer than those from your agency's dedicated representatives.