# SUBMITTING YOUR OPEN ENROLLMENT ELECTIONS IN CARDINAL

Make changes related to your health plan coverage and flexible spending accounts (FSA) during the upcoming Open Enrollment (OE) period from Friday, May 16, 2025 to Friday, May 30, 2025. You will use Cardinal HCM to make your online OE elections. First time in Cardinal? Forgot your Cardinal password? Visit <a href="https://www.cardinalproject.virginia.gov/login-help">www.cardinalproject.virginia.gov/login-help</a> for log-in tips and assistance.

- 1. Visit https://my.cardinal.virginia.gov to log in.
- 2. Once in Cardinal, click on the **Human Capital** Management (HCM) link.
- 3. Click on the Benefit Details tile.
- **4.** Click the **Benefits Enrollment** list item (left-hand side of the screen).
- **5.** Click the **Start** (or **Re-Elect**) button to begin the OE process.
- **6.** Click the Medical tile to select or update your health plan.
- Review your existing dependents covered under your health plan to determine if changes are needed. If you do not need to add a dependent, skip to Step 29.

#### **ADD A DEPENDENT**

- 8. Click the Add Dependent button.
- 9. Click the Add Individual button.
- 10. Click the Add Name button.
- **11.** Enter your dependent's name information.
- 12. Click the Done button.
- 13. Input your dependent's **Date of Birth** and **Gender**.
- **14.** Select "Child" or "Spouse" in the **Relationship to Employee**.
- **15.** Select your dependent's marital status using the **Marital Status** dropdown button.
- **16.** The **Student** field defaults to "No". This field is not tracked in Cardinal nor transmitted to the Health Benefits Vendor.
- **17.** The **Disabled** field defaults to "No" and cannot be changed.
- **18.** The **Smoker** field defaults to "Non-smoker". This field is not tracked in Cardinal nor transmitted to the Health Benefits Vendor.
- 19. If your dependent has the same address as you do, verify that the Address section is set to "Same as mine". Note: If your dependent has a different address than you, edit accordingly.



Scan the QR Code to watch the Cardinal Open Enrollment tutorial video!

Need additional information? Visit <u>www.cardinalproject.</u> <u>virginia.gov/OE</u>.



- 20. Click the Add National ID button.
- 21. Complete the Country, National ID Type, and National ID (SSN) fields for the dependent.
- 22. Click the Done button.
- **23.** Skip the **Add Phone/Add Email** buttons, this information is not required for dependents.
- 24. Click the Save button in the top right-hand corner. Note: If you don't have an SSN for your dependent, you can still save. Your agency Benefits Administrator will contact you later to obtain the SSN.
- **25.** A **Saved Successfully** message displays in a pop-up window.
- **26.** Click the **OK** button.
- 27. Repeat Steps 8 26 as required until all dependents are added.
- **28.** After all dependents are added, click the **Close (X)** icon in the upper right-hand corner.

### **ENROLL IN HEALTH PLAN**

- 29. Under the Enroll Your Dependents section, choose the blue Enroll checkbox option for the appropriate dependent(s) who should receive coverage. Note: If you uncheck the dependent, you are removing that dependent from coverage.
- **30.** Under the **Enroll in Your Plan** section, click the **Select** button to select the applicable Benefits Plan.
- **31.** Click the **Done** button in the upper right-hand corner.
- 32. The Medical tile now displays the coverage selected, the number of dependents enrolled, the Pay Period Cost (or Annual Cost, depending on your agency), and the Status field is updated to "Changed".

## **ELECT FLEXIBLE SPENDING ACCOUNTS**

- 33. If you are not enrolling in a Flexible Spending Account (FSA), skip to Step 36.
- **34.** Two Flexible Spending Accounts are available: Flex Spending Medical and Flex Spending Dependent Care. Note: If you use these plans, you must re-elect each year! Repeat this step to elect both FSAs.
  - Click the Flex Spending Medical tile (or the Flex Spending Dependent Care tile).
  - Click the **Select** button to elect Flex Spending Medical (or Flex Spending Dependent Care).
  - Enter the amount in the **Annual Pledge** field. The amount entered must be the amount you want to come out of your pay for the entire plan year.
  - Click the **Done** button in the upper right-hand
- 35. Skip the Flex Spending Admin Fee tile, this is automatically elected and will show the admin fee associated with your FSA.

#### **FINAL STEPS**

- 36. Confirm your elections by checking the following items:
  - Enrollment Summary: Total Pay Period Cost
  - Medical tile: Plan and total dependents enrolled match your coverage elections
  - FSA tiles: Plan and Pay period cost match your elections

37. Click the **Submit Enrollment** button to complete **Open Enrollment!** 



# **DO NOT MISS YOUR** OPEN ENROLLMENT **DEADLINE!**

**Submit your online elections in Cardinal** beginning May 16 and no later than 11:59 pm EDT on May 30, 2025.

## **REVIEW YOUR HEALTH BENEFITS CONFIRMATION** STATEMENT

After your elections are submitted, an automated email will be sent overnight from Cardinal with the subject line of "Your Health Benefits" Confirmation Statement - Now Available Online". You will receive this email whether you or your Benefits Administrator entered your elections. Log in to Cardinal and review your Confirmation Statement to ensure your elections are correct! After Open Enrollment, all eligible participants will receive a confirmation statement, even if you did not make any elections during the Open Enrollment period. This ensures that all participants have a record of their current benefit status.

#### **Questions?**

Contact your agency Benefits Administrator.

# **DON'T WAIT TO GET INTO CARDINAL!**

If it's near the end of the Open Enrollment period (and you haven't tried to access Cardinal) submit a paper enrollment form to your agency Benefits Administrator before the deadline. OHB cannot accept Open Enrollment health plan coverage changes or FSA election requests after the May 30 deadline. See instructions below for submitting a paper form.

# **SUBMITTING YOUR OPEN ENROLLMENT ELECTION USING** PAPER ENROLLMENT **FORM**

Complete the fillable form on the DHRM website at https://www.dhrm.virginia.gov/employeebenefits/ open-enrollment-2025-26.

Print, sign and submit to your Benefits Administrator by the close of business on May 30, 2025!

Remember to complete all appliable sections of the enrollment form.