

FAQs Frequently Asked Questions: Open Enrollment for 2026 Employee Benefits

Q. When can I sign up for my 2026 Benefits Package?

A. Open enrollment runs November 1-15th, 2025. This is the one time of year that you can change your benefits without a qualifying event.

Q. Where can I find information about the Benefits offered?

A. The best resources for all things benefits is the Aldine website: Aldinebenefits.org

Q. When can I start using the benefits that I select during Open Enrollment?

A. January 1, 2026

Q. Can I obtain assistance enrolling at the Wellness Fair on 11/4 @ MOC?

A. Yes. You can visit all healthcare vendors at the fair and ask questions to help make informed choices. Members of the benefits team and call center will be onsite to help you enroll.

Q. Is there really a medical plan offered for \$28 per paycheck?

A. Yes. The Kelsey Base plan is \$28.50 per paycheck. This plan provides most preventive care (Physical, Well woman, Colonoscopy, Bloodwork and more) with no out of pocket expenses.

Q. What changes will I experience in 2026?

A. 9 Plans went out for bid in the Spring of 2025. This resulted in a change to our vendors for Legal, ID Theft, Cancer, Hospital, Critical Illness, Vision and Dental Plans. The new plans offered include "Best in Class" vendors with more competitive rates.

Q. How can I obtain more information on our new plans that are effective on 1/1/26?

A. Attend the Wellness Fair on 11/4 and meet our new vendors. You can also view plan information on aldinebenefits.org

Q. Why should I attend the Wellness Fair?

A. The campus or department with the greatest attendance can win a day of Chair Massages! Meet with all of our vendors, enter to win over 50 different raffle prizes, complete healthcare services on-site! Learn something new at our Change Management class....and register to

win a mountain bike by attending.

Q. Can I go to the Emergency Room for any medical service?

A. No. Our medical coverage has changed and only covers life threatening services at the emergency room. This includes services for heart attack, stroke, profuse bleeding, gunshot wounds, severe burns and other life-threatening medical situations.

Q. I don't want to enroll on any Aldine Benefits, do I still need to complete my enrollment record?

A. Yes. While the enrollment is passive and will default to plans that you had in 2025, we encourage you to review your information to make sure that you have everything that you need. Please make sure that you have listed beneficiary information on the free life insurance plan that is provided to you at no cost. In 2026, we will have many new vendors including; Metlife, Compsych and Guardian. This is the perfect time to review the new plans that are offered.

Q. What if I need to make a change after the Open Enrollment Deadline?

A. Once the deadline (11/15) has passed, all changes are final. During the year, you can only make changes to your benefits when you have a qualifying life event Ex.) Marriage, Divorce, Loss of other coverage, Dependent losing coverage at age 26, Medicare eligibility. Contact the Benefits Hotline for assistance. Contact the Benefits Hotline for more information 1-855-474-9494.

Q. Am I required to provide documentation to add dependents to my coverage?

A. Yes. You must provide legal documentation to prove that anyone added to your benefits are legal dependents. Documentation includes; marriage certificate, birth certificate, adoption paperwork, court orders. This information must be submitted within the limited timeframe provided.

Q. How do I complete my enrollment record to select or decline benefits?

A. Website: myaldinebenefits.com
Phone: 1-855-474-9494
My choice Mobile App:





Q. When are the benefits effective that I select during Open Enrollment?

A. Most benefits become effective and able to be used on January 1, 2026. The two exceptions are; Pumpkin Pet insurance which can start earlier and changes to your Retirement plans accounts (403b and 457b) which can be made at any time during the year.

Q. What is the best medical plan for me and my family?

A. When choosing a plan that best suits your needs, consider the following:

- How do you expect to use the plan? Do you use insurance a lot or do you only use it for preventive physicals and lab work?
- Do you have any surgeries or procedures planned in 2026?
- How many times will you see your physician and/or a specialist?
- What is your maximum exposure in a catastrophic event?
- Do you want to set money aside in an HSA account for use towards medical expenses or accessed at retirement time?

Now compare the cost of these services on all plans.

Consider the price that you will pay out of your paycheck to have the insurance.

Calculate the cost over 24 paychecks.

If you only use your medical insurance for preventive physicals and lab work, then choose the least expensive plan. All plans cover these services at 100%, with no out of pocket dollars.

The TMN HDHP plan will provide you with an account (HSA) loaded with \$150 to help you pay any out of pocket expenses. You can also deposit funds on a pretax basis in this account that you can use for healthcare expenses or save, invest and use at retirement time.

If you are a heavy user of healthcare and you see a lot of doctors and specialists and you use a number of prescriptions, then consider the Kelsey Enhanced plan for lower copays, but keep in mind that you will be paying more in premiums.

If you like the freedom of seeing any doctor and do not want to be restricted to a Kelsey doctor network, then consider the Texas Medical Neighborhood HDHP.

Q. How can I save money on my prescriptions?

A. Ask the drug manufacturer for a discount card. You can do this by searching by the drug name on Google. Check the manufacturers website for discount cards or email them to request a discount card. Join a drug card program through your local pharmacy, Costco, Sams club or grocery store. If it's a specialty drug, then check the price through Prudent RX. Ask your pharmacist for the GoodRX price.

Q. How can I save money when I need to seek care?

A. Use Telemedicine, CVS Minute Clinic, or Urgent Care. Only go to the hospital for life threatening issues such as a heart attack, stroke, major accident, etc.

Q.Is Minute Clinic covered on all four medical plans?

A.MinuteClinic is a covered benefit under all four plans. See below for details.

KelseyCare plans, both Enhanced and Base, coverage is 100% after the applicable PCP copay.

Enhanced: \$35 copay Base: \$50 copay

Memorial Hermann: MinuteClinic is a designated Walk-In clinic and is covered at 100% no deductible and no copay.

TMN HDHP: with this plan being changed for 2023 to the HDHP coverage for the MinuteClinic as a designated walk in clinic is 100% after the deductible has been met.

Q. How much does RediMD cost on the four health plans?

A. Telemedicine is a free service with no copay on all four plans.

Q. What is Aldine's company key code?

A.The key code is ALDINE all caps

Q. Where can I obtain labwork on the TMN HDHP plan?

A.Quest Diagnostics LabCorp Clinical Pathology Labs

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Q. Where can I get treated for an earache, cold, sore throat, allergies?

A. Telemedicine offered by Redi MD is the best and lowest cost option. This is free (\$0) for anyone enrolled on ALDINE ISD benefits and a \$35 copayment for uninsured employees. CALL 1-866-989-CURE.

Q: Is there a healthcare resource available for all employees to improve their overall health and wellness?

A.Yes. Contact our Health Navigator, Angela Castilla to schedule a no cost appointment.