

FAQs for Hawaii Colleagues

If you have a specific question, see if it's in the list below, and click on the link to be taken directly to the answer you're looking for. Otherwise, feel free to browse and scan the FAQs at your own pace.

Your B	Benefits Marketplace	1
1.	What is your benefits marketplace?	1
2.	Where can I get more information?	1
Enrollr	Enrollment 2	
3.	What will I need to do?	2
4.	What happens if I don't enroll?	2
5.	How do I create my user ID and password for UPoint?	2
6.	How do I reset my password for UPoint?	3
My Opt	tions	3
7.	What are my options for medical and prescription drug coverage?	3
8.	Am I required to designate a primary care physician?	3
9.	Where can I learn more about the medical insurance carriers?	3
10.	Will I be able to use the same providers as I do today?	3
11.	How should I choose a medical insurance carrier if my dependents and I live in different states?	4
12.	How do I decide which medical option is right for me?	4
13.	Can I waive medical coverage?	4
14.	Will pre-existing conditions be covered?	4
15.	How will my prescription drugs be covered?	4
16.	What is "prior review" and when is it required?	5
17.	Will I receive a new ID card for medical and prescription drug coverage?	5
18.	What do I need to know about dental networks?	5
19.	What do I need to know about vision networks?	5
20.	What other benefit options are available to me?	6
21.	What else is available to me?	6
22.	Do I have to enroll in group discount options when first eligible?	6
23.	What is accident insurance?	6
24.	What is critical illness insurance?	7
25.	What is hospital indemnity insurance?	7
Paying	for Coverage	7
26.	When will I find out the cost of coverage?	7
27.	Do I get to keep the Aon credit if I don't enroll in coverage?	7

Your Benefits Marketplace

1. What is your benefits marketplace?

Your benefits marketplace is a way for you to get medical, dental, vision and other coverage. It is a way for you to shop for coverage from health insurance carriers who are competing for your business.

Your enrollment is designed to be easy to navigate and, just like other online stores, you'll be able to see all your options and sort by the features that are most important to you. By the time you complete your enrollment, you should feel confident that you've selected the right coverage options for your circumstances and budget.

2. Where can I get more information?

There are resources available to help before, during and after enrollment.

Before and during enrollment:

- Make It Yours website (first available with 2026 information on October 15, 2025)—Visit
 <u>aon.makeityoursource.com/hawaii</u> to learn about your coverage options and choosing the right
 coverage for you and your family.
- Your Carrier Connection (available through the Make It Yours website)—Visit each carrier's
 preview site to get up to speed on provider networks, prescription drug information and other
 carrier resources.
- UPoint® and Alight Mobile app—When it's time to enroll, log on to UPoint, Aon's HR portal, at upoint.aon.com or the Alight Mobile app (available through the Apple App Store or Google Play) to compare your options and prices, use helpful decision support tools like Help Me Choose and enroll.

Questions? Once logged on to UPoint, look for the "Need Help?" icon to ask the virtual assistant any questions you may have. It can also connect you with a representative and other helpful resources. You can also call the Aon HR Service Center at **1.855.625.5500** from 8:00 a.m. to 4:30 p.m. CT, Monday through Friday.

Managing your benefits beginning January 1:

- Your Carrier Connection (available through the Make It Yours website)—Take advantage of the tools, resources and information offered through your insurance carrier. Register and log on to the medical insurance carrier's primary and secure website for personalized information. For questions about your coverage, always start with your carrier. They know their plans best and have the final authority on all claims, billing disputes, etc.
- Your carrier's mobile app and member website—All carriers have mobile apps and member websites that connect you to a host of tools and resources including virtual care, mental health and wellbeing programs, and tools to look up potential costs for care.
- UPoint and Alight Mobile app—Access your personalized coverage details and manage your benefits throughout the year.
- Additional support—Included Health is Aon's health benefits navigation resource, available to support the health care needs of colleagues enrolled in medical coverage. Reach out to an Included Health care coordinator any time you need help finding a doctor or specialist, getting answers about your health care and benefits, and receiving guidance in navigating your benefits. Download the Included Health app at includedhealth.com/aon and/or call 1.833.938.9952. Bill negotiation representatives can help review and negotiate out-of-network medical bills. And, expert second opinion with 2nd.MD makes it easy to get a virtual second opinion from nationally recognized doctors.

Enrollment

3. What will I need to do?

From **November 6 – 20, 2025**, you should enroll to get the medical and prescription drug, dental and vision coverage you want next year! Not only could your needs have changed, but other things could have changed too—including your options and prices, the network of doctors and how your prescription drugs are covered. It's very important to double-check, even if you choose exactly what you have today.

To enroll, log on to UPoint at <u>upoint.aon.com</u> during the enrollment period. Over the course of the enrollment process, you'll need to:

- Enroll the eligible dependents you want to cover in 2026. Dependent verification is required.
- Choose the insurance carriers and coverage levels you want for your medical, dental and vision benefits.
- Enroll in the rest of your benefits.

4. What happens if I don't enroll?

If you are currently enrolled in **medical** coverage and do not take action by November 20, your current coverage will continue at 2026 prices next year unless it is no longer available to you. If you do not want coverage for 2026, you must elect "No Medical Coverage" during enrollment and return the Hawaii Form HC-5, which will be mailed to you. If you are not currently enrolled in medical coverage and do not intend to enroll for 2026, you must submit the Hawaii Form HC-5 you receive in the mail or you'll be covered by the lowest cost Gold medical option in 2026. Please send a copy of your completed Hawaii Form HC-5 to the Aon HR Service Center at the address provided.

If you are currently enrolled in **dental** or **vision** coverage and do not take action by November 20, your current coverage will continue at 2026 prices. If you are not currently enrolled in coverage and do not enroll, you will have no coverage next year.

You must also enroll if you want to participate in the Health Care or Dependent Care Flexible Spending Accounts (FSAs) for 2026.

Your coverages for supplemental and dependent life insurance, supplemental and dependent AD&D insurance, legal services and identity protection will continue at 2026 prices.

5. How do I create my user ID and password for UPoint?

If you are a new user, you will need to set up your user ID and password, which are needed to access your account through the Alight Mobile app (available through the Apple App Store or Google Play).

- Go to UPoint and select New User?;
- Enter the last four digits of your Social Security number and your date of birth to authenticate your account;
- Create your user ID and password; and
- Create answers to security questions to verify your identity if you forget your user ID or password in the future.

6. How do I reset my password for UPoint?

To reset your password, go to UPoint, click **Forgot User ID or Password?** and follow the prompts to reset your password. You will need your user ID and password to access your account on the Alight Mobile app (available through the <u>Apple App Store</u> or <u>Google Play</u>).

My Options

7. What are my options for medical and prescription drug coverage?

You have several options to choose from, including HMSA Gold, Kaiser Gold, HMSA Platinum and Kaiser Platinum. When you enroll, you'll be able to compare benefits and features across your medical options.

8. Am I required to designate a primary care physician?

You must designate a primary care physician to coordinate your medical care under the Kaiser Gold and Platinum options.

9. Where can I learn more about the medical insurance carriers?

Before you're a member, you can visit specially designed carrier sites to give you a "preview" of their services, networks and more. You should check out the carrier preview sites to get a closer look at the carriers you're considering. You can get to the carrier preview sites through the Make It Yours website by going to aon.makeityoursource.com/hawaii. Once you enroll and become a member of a carrier, you'll be able to register and log on to the carrier's main website for personalized information via UPoint at upoint.aon.com.

10. Will I be able to use the same providers as I do today?

It depends. Each insurance carrier has its own network of preferred providers (e.g., doctors, specialists, hospitals). If you want to keep seeing your current doctors, select an insurance carrier that includes your preferred providers in its network. If you are comfortable changing doctors, select an insurance carrier whose network includes providers critical to your care.

Even if you keep your current insurance carrier, the provider network could be different and can change, so **always** check the provider directories before making a decision.

Do not rely on your provider's office to know the carriers' network(s). To see whether your doctor is in-network:

- Check out the insurance carrier preview sites.
- When you enroll, check the networks of each insurance carrier you're considering on UPoint. You can access this information by using the Help Me Choose tool's provider search or clicking **Find Doctors** when you're selecting your medical plan. For the best results:
 - Search for your provider by name—not medical practice.
 - Check only the office location(s) you are willing to visit.
 - When searching for a facility, use the complete facility name and confirm whether the specialty of the facility is covered in-network.

Important! If you have **any** uncertainty (for instance, covering out-of-area dependents) or you need the network name, you need to call the <u>insurance carrier</u>.

11. How should I choose a medical insurance carrier if my dependents and I live in different states?

Because you and your dependents must enroll in the same option, you need to take a close look at your options. The HMSA options offer access to a national provider network so that your dependents can get care from in-network providers in most locations. The Kaiser Permanente options offer limited coverage for dependent students who are temporarily out of the area.

Do not rely on your provider's office to know the carriers' network(s). You need to call the <u>insurance carrier</u> to confirm whether an out-of-area provider participates in a carrier's network.

12. How do I decide which medical option is right for me?

Aon has provided a number of resources to help you make smart decisions. You should start by visiting the Make It Yours website by going to aon.makeityoursource.com/hawaii for details about your options and more.

During enrollment, you'll find tools—such as the Help Me Choose tool on UPoint—that give you a personalized suggestion based on your preferences, doctors and any prescriptions you may take.

If you need additional help, once logged on to UPoint, look for the "Need Help?" icon to ask the virtual assistant any questions you may have. This virtual assistant can also connect you with a web chat representative and other helpful resources. You can also visit the insurance carriers' sites or call them with specific questions about the options they offer. You can also call the Aon HR Service Center at **1.855.625.5500** from 8:00 a.m. to 4:30 p.m. CT, Monday through Friday.

13. Can I waive medical coverage?

If you elect "no medical coverage" for next plan year, the state of Hawaii requires that you complete and submit a Hawaii medical coverage waiver form (HC-5). A copy of this form will be sent to you through the U.S. mail after enrollment. By completing this form, you claim to be exempt from coverage requirements under the Prepaid Health Care Act. After completing it, please return it to the Aon HR Service Center at the address provided.

Note: Even if you elect "no medical coverage," you will be enrolled in medical coverage under the lowest cost Gold option until the form is received by the Aon HR Service Center.

14. Will pre-existing conditions be covered?

Yes. When you enroll in medical coverage through Aon, coverage is guaranteed, regardless of whether you and/or your eligible dependents have pre-existing conditions.

15. How will my prescription drugs be covered?

Your prescription drug coverage will be provided through your medical insurance carrier's pharmacy benefit manager—which could be a separate prescription drug company. Each pharmacy benefit manager has its own rules about how prescription drugs are covered. That's why you need to do your homework to determine how your medications will be covered before choosing an insurance carrier.

If you or a covered family member regularly takes medication, we strongly recommend that you call the medical insurance carrier before you enroll to better understand how your particular prescription drug(s) will be covered. Do not assume that your generic or brand name medication will be covered the same way by each medical insurance carrier each year. See the Make It Yours website by going to aon.makeityoursource.com/hawaii for a list of questions to ask. When you enroll, you can use the prescription drug search tool to look up your medication and see how it will be covered.

16. What is "prior review" and when is it required?

Before getting certain types of care, you and your doctor may be required to run it by your insurance carrier first. Getting "prior review" (also referred to as prior authorization or precertification) allows the carrier to make sure you're eligible for the services, ensure you're getting care that makes sense for your condition and confirm how the bill is going to be paid.

- When you stay in-network, your doctor usually completes the process on your behalf when it's required. But you should always confirm with your doctor to be sure he or she is handling it.
- If you go out-of-network, you are usually responsible for completing the process. You may have to work with your doctor or directly with your insurance carrier to fill out paperwork and receive the appropriate approval before getting care.

When prior review is required and you don't get preapproved, you could get stuck paying most or **all** of the bill or a penalty. That's why it's always in your best interest to ask your doctor whether you need to do anything in advance and confirm that services you need will be covered by your insurance carrier.

17. Will I receive a new ID card for medical and prescription drug coverage?

It depends. You'll only receive a new ID card, in the mail or electronically via the carrier's member site or mobile app, when you enroll for the first time or change insurance carriers or coverage levels. You'll use your ID card for medical and prescription drug needs. If issued, you should receive ID cards before your benefits take effect. If you need an ID card immediately, go to your insurance carrier's website, register online and print a temporary ID card.

Note: If you enroll in Cigna medical coverage, you will not receive ID cards in the mail. You will need to access digital ID cards via the carrier's member website or app for when you or a covered family member needs care.

18. What do I need to know about dental networks?

Just like the medical insurance carriers, each dental carrier has its own provider networks that can vary by the coverage level you choose. If it's important that you continue using the same dentist, you should check to see whether your dentist is in the network before you choose a carrier.

Do not rely on your provider's office to know the carriers' network(s). To see whether your dentist is in-network, check out the <u>insurance carrier</u> preview sites or check the networks of each insurance carrier you're considering when you enroll on UPoint.

Important note, if you are considering a Platinum dental option:

- It may cost less than some of the other options, but you **must** get care from a dentist who participates in the insurance carrier's DHMO network. **The network could be considerably smaller**, so be sure to check the availability of local in-network dentists before you enroll.
- The Platinum dental option does **not** provide out-of-network benefits. So if you don't use a network dentist, you'll pay for the full cost of services.

19. What do I need to know about vision networks?

Each vision insurance carrier has its own provider networks. If it's important that you continue using the same eye doctor or retail store, you should check to see whether your eye doctor or retail store is in the network before you choose a carrier.

Do not rely on your provider's office to know the carriers' network(s). To see whether your eye doctor or retail store is in-network, check out the <u>insurance carrier</u> preview sites or check the networks of each insurance carrier you're considering when you enroll on UPoint.

20. What other benefit options are available to me?

You can choose to enroll in:

- Supplemental and dependent life insurance: Protects your family financially in the event of a death.
- Supplemental and dependent accidental death and dismemberment (AD&D) insurance: Protects your family financially in the event of a tragic accident.
- **Legal services:** Covers attorney fees for things like divorce and separation, real estate matters, will preparation and more.
- Identity theft protection: Monitors your personal information and takes steps to protect you from fraud.

You can get more details on the <u>North America Benefits page</u> on Aon Avenue and the Make It Yours website at <u>aon.makeityoursource.com/hawaii</u>.

21. What else is available to me?

We are able to take advantage of group negotiated discounts for:

- Auto and home insurance: Offers you special group rates and policy discounts on auto and home insurance.
- Pet insurance: Helps pay veterinary expenses for your sick or injured pet.

You also have access to other services:

- **Expert second opinion with 2nd.MD:** Makes it easy to get a virtual second opinion from nationally recognized doctors. To get started, simply visit 2nd.MD/aon or call 1.866.887.0712. You must be enrolled in an Aon-sponsored medical plan to access this service.
- Bill negotiation services: Offers assistance reviewing out-of-network medical bills, negotiating medical bill costs with doctors and hospitals and creating a payment plan for medical-related expenses.

You can get more details on the <u>North America Benefits page</u> on Aon Avenue and the Make It Yours website at <u>aon.makeityoursource.com/hawaii</u>.

22. Do I have to enroll in group discount options when first eligible?

No. Unlike your other options, you can apply for or drop auto and home insurance and pet insurance coverage at any time. You can get more information about these benefits on the Make It Yours website by going to aon.makeityoursource.com/hawaii.

23. What is accident insurance?

Accident insurance pays a benefit directly to you if you or an eligible dependent suffer a covered injury. This benefit can help cover out-of-pocket expenses related to these injuries—such as hospitalization, physical therapy, transportation and more. There are no health questions or physical exams required. Learn more by going to aonbenefits.com/link and clicking the Voluntary Benefits tile.

24. What is critical illness insurance?

Critical illness insurance reduces the financial impact of a major illness, such as a heart attack, stroke or cancer. The policy pays a lump sum benefit directly to you once you or a covered family member is diagnosed with a covered condition. This coverage applies to you and your covered dependents. You can elect up to a maximum of \$40,000 in supplemental coverage. Learn more by going to aonbenefits.com/link and clicking the **Voluntary Benefits** tile.

25. What is hospital indemnity insurance?

Hospital indemnity insurance pays you a single lump-sum benefit in the event you or a family member covered under this plan is hospitalized. The benefit is based on the type of hospital stay. Learn more by going to **aonbenefits.com/link** and clicking the **Voluntary Benefits** tile.

Paying for Coverage

26. When will I find out the cost of coverage?

You'll be able to see the credit amount from Aon and your price options on UPoint at <u>upoint.aon.com</u> during the enrollment window.

27. Do I get to keep the Aon credit if I don't enroll in coverage?

No. The credit you get from Aon is for the medical/prescription drug and dental coverage you purchase. A cash refund or credit for other benefits is not available.

Information contained herein is not intended as legal, tax or other professional advice. You should not act upon any such information without first seeking a qualified professional on your specific matter.

Terms and conditions of policies may change. Please consult policy documents to confirm availability of benefits.

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