

2027 Benefits: Frequently Asked Questions

Open Enrollment runs November 3–17, 2026. New benefits start January 1, 2027.

Action required: Your 2026 elections end December 31, 2026, and **will not be carried forward**. Every teammate must select or decline coverage in Paycom by **November 17, 2026** — even if you want to keep exactly what you have today.

ENROLLING FOR 2027..... 2

WHAT’S CHANGING FOR 2027..... 3

CHOOSING A MEDICAL PLAN 4

USING YOUR BENEFITS..... 5

MAKING CHANGES DURING THE YEAR 6

HELP AND RESOURCES..... 7

ENROLLING FOR 2027

1. Do I need to enroll if I want to keep the same coverage?

Yes. This is an active enrollment year; your 2026 benefits will not roll over. You must review, select and finalize your 2027 benefits in Paycom by **November 17, 2026**.

2. What happens if I don't take action during open enrollment?

If you **do not finalize** your elections by the deadline:

- Your medical, dental, vision, and other coverage **ends December 31, 2026**.
- No 2027 coverage is chosen for you automatically.
- Your HSA and FSA payroll contributions **reset to \$0**. Any remaining 2026 Medical FSA balance not eligible for rollover will be forfeited in accordance with the IRS use-it-or-lose-it rule.
- **You will not be able to enroll again until next open enrollment unless you have a qualifying life event.**

3. Where and when do I enroll?

In **Paycom**, under the Benefits section, between **November 3 and November 17, 2026**. You will receive a Paycom notification and an email at the work email address we have on file in Paycom, when enrollment opens, with step-by-step instructions.

4. How do I know if my enrollment is complete?

After you make your elections, you must **sign and finalize** them in Paycom. Elections that are not finalized are not saved. Save or print your confirmation for your records. You will continue to receive alerts until Open Enrollment closes, even if you complete your elections. **If at any point, you log back into Paycom and review or change your elections, you must sign and re-finalize your elections again for them to be saved.**

5. I made a mistake after I finalized my enrollment. Can I change it before November 17?

Yes. You can reopen your open enrollment event in Paycom and change your elections through November 17, 2026. Be sure to **sign and finalize** your elections again after making changes. **After November 17, you can only make changes if you experience a qualifying life event (see Question 43).**

6. When do my new benefits start?

January 1, 2027, as long as you finalize your enrollment by **November 17, 2026**.

7. When will I see my new paycheck deductions?

Your 2027 deductions will begin with your January 8, 2027, paycheck. Review the exact per-paycheck cost in Paycom before finalizing your elections. **After open enrollment ends on November 17, 2026, you can only make changes if you experience a qualifying life event.**

8. Who do I contact if I have trouble logging into Paycom?

For login or access issues, email **HRSupport@sun.auto**. For questions about your benefit choices, contact the Benefits team (see Question 46).

9. I'm a new hire starting around open enrollment. Do I need to enroll twice?

Yes, you must complete your new hire enrollment event for benefits effective in 2026 and your open enrollment event for benefits effective January 1, 2027, if you start prior to November 2nd. Completing one event does not complete the other.

10. What is the difference between a Dependent and a Beneficiary?

A dependent is an eligible spouse or child you enroll in a benefit plan so they can receive coverage and use the plan's services. A beneficiary is the person or entity you designate to receive a benefit, such as life insurance proceeds, if you pass away. A dependent is not automatically your beneficiary, and a beneficiary does not need to be enrolled in your benefits.

WHAT'S CHANGING FOR 2027

11. Why are my benefit costs going up?

Health care is getting more expensive. People are using more care, more people are managing ongoing health conditions, and prescription drugs, especially newer specialty drugs, keep rising in price. Employers across the country are facing the steepest health cost increases in more than 20 years.

12. What is changing with the medical plans?

Your medical coverage will continue to be administered by **Blue Cross Blue Shield of Arizona**.

For 2027, there are plan design changes, including updates to deductibles, out-of-pocket maximums, and copays, along with premium increases for the Base PPO and Buy-Up PPO plans. The High-Deductible Health Plan (HDHP) premiums stay the same for 2027 (no premium increase!).

13. Will my doctor change?

No. Medical coverage stays with Blue Cross Blue Shield of Arizona and the same network. It is still a good idea to confirm your doctors are in network before you enroll (see Question 33).

14. Will I get a new medical ID card?

Yes. Everyone enrolled in a Sun Auto medical plan will receive a new medical ID card with updated prescription information, including a new Rx BIN number. Begin using your new card for medical and pharmacy services on January 1, 2027.

15. What is changing with prescription drug coverage?

Sun Auto is still using OptumRx to manage the pharmacy network. Starting January 1, 2027, your medical and prescription benefit information will be available together through Blue Cross Blue Shield of Arizona.

Some PPO prescription copays are changing. Check your medication on the 2027 drug list to confirm its tier.

16. Will my current prior authorizations carry over?

Yes. Existing prior authorizations will remain in effect through their current approval period. When an authorization expires, your provider will need to submit a new request with the required documentation.

17. Will I need to provide my new ID card for current prescriptions & refills?

Yes. Beginning January 1, 2027, retail pharmacies will need to process your prescriptions and refills using the information on your new 2027 medical ID card.

18. What is changing with telehealth?

On the HDHP/HSA, AZ Blue Telehealth visits cost **\$10 for medical** and **\$20 for counseling or psychiatry**, even before you meet your deductible. You can see a board-certified doctor, counselor, or psychiatrist from your phone, tablet, or computer.

19. What is changing with dental?

Dental coverage moves from **MetLife to Ameritas** on January 1, 2027. The yearly maximums and deductibles stay the same, and Ameritas has more dentists in network.

Two changes to the **Low Plan**:

- It **no longer covers orthodontia (braces)**. The High Plan still covers braces for children up to age 19, at 50% up to a \$2,000 lifetime maximum.
- If you see an out-of-network dentist, the plan pays from a set price list (Maximum Allowable Cost). If your dentist charges more, you pay the difference.

Check whether your dentist is in-network at ameritas.com/sign-in.

20. I have dental work in progress, like a crown or root canal. Will Ameritas cover it?

Yes. Ameritas has a takeover provision that may cover dental services already in progress, such as crowns. Ask your dentist to confirm how Ameritas will process your specific treatment and any amounts already paid by MetLife.

21. My child has braces, and we're on the Low Plan. What happens?

If your child needs braces coverage in 2027, consider the High Plan during open enrollment. The Low Plan will not include orthodontia coverage in 2027.

22. My accident, critical illness or hospital plan is with Symetra. What happens?

There are no changes to the plan design for 2027. Beginning January 1, 2027, coverage will be administered by Lincoln Financial Group rather than Symetra.

23. What is Hinge Health?

Hinge Health is new for 2027. It provides virtual physical therapy and support for back, knee, shoulder, and other joint or muscle pain. Eligible members can participate from home without traveling to appointments. The program is available at no cost to Sun Auto medical plan members aged 18 and older. Sign up at hinge.health.

24. Can my spouse or adult child use Hinge Health?

Yes, if they are **18 or older** and enrolled in a Sun Auto medical plan. Each person signs up for their own account.

CHOOSING A MEDICAL PLAN

25. How do I decide which medical plan is right for me?

Consider your expected healthcare needs, the family members you plan to cover, and the amount you could afford to pay out of pocket if an unexpected illness or injury occurs. Your [2027 Open Enrollment Guide on mysunu.com](https://mysunu.com) provides cost examples to help you compare all three plans. Do not just roll over what you had — the plan that fit last year may not fit next year.

26. I chose the High Deductible Health Plan (HDHP/HSA). Why was I charged the full price at my doctor or pharmacy?

With the HDHP/HSA, you generally pay the plan's discounted cost for medical care and prescriptions until you meet your deductible. After you meet the deductible, you pay 25% coinsurance until you reach the out-of-pocket maximum.

27. How do I get Sun Auto's Health Savings Account (HSA) contribution?

Sun Auto contributes **\$400** a year if you cover yourself, or **\$800** if you cover yourself and dependents. To receive it, you must do all three:

- Choose the HDHP/HSA medical plan.
- Enroll in the HSA in Paycom.
- **Contribute your own money** from your paycheck. If you do not contribute, Sun Auto **does not contribute**.

Lively will open your HSA and send you an email to register your account. You must register to access your funds.

28. How much can I put in my HSA for 2027?

The total 2027 IRS contribution limit is \$4,500 for self-only coverage or \$9,000 for family coverage. If you are aged 55 or older, you may contribute an additional \$1,000. Sun Auto's contribution and all contributions you make count toward the annual limit. An HSA offers tax savings: contributions are made with pre-tax dollars, earnings grow tax-free, and withdrawals are tax-free when used for qualified medical expenses. Money you do not spend rolls over every year and stays with you if you leave Sun Auto.

29. Can I have an HSA and a Healthcare FSA at the same time?

No, if you or your spouse has a General-Purpose Healthcare FSA (including through your spouse's employer), you cannot contribute to an HSA because it acts as first-dollar medical coverage. A Dependent Care FSA does not affect HSA eligibility.

30. I'm moving from a PPO to the HDHP/HSA. What happens to my 2026 Healthcare FSA balance?

You can continue to use your **2026 Healthcare FSA funds** for eligible expenses incurred between **January 1 and December 31, 2026**, and you have until **March 31, 2027** to submit those claims. Filing claims during the runout period will **not** delay your ability to contribute to an HSA in 2027.

While the FSA plan normally allows up to **\$680** of unused Healthcare FSA funds to carry over to the next year, that carryover is **not available** if you enroll in the **HDHP/HSA for 2027**. Any 2026 FSA balance remaining after the March 31, 2027 runout period will be **forfeited**. This allows you to remain eligible to contribute to an HSA beginning January 1, 2027.

31. If I leave the HDHP/HSA, what happens to my HSA?

The money is still yours! Your HSA funds belong to you permanently, roll over indefinitely, and can continue to be spent tax-free on qualified medical, dental, and vision expenses. You simply cannot make new contributions to the account unless you are actively enrolled in an HSA-eligible High-Deductible Health Plan (HDHP).

32. I'm eligible for Medicare. Can I still enroll in Sun Auto coverage?

Yes. You can enroll in Sun Auto's plans, or enroll in Medicare and still choose dental, vision and other benefits through Sun Auto.

Important: If you are enrolled in **any part of Medicare, including Part A**, you cannot contribute to an HSA. Talk with **SmartConnect** before you decide – they will help you navigate the process to determine what is best for your situation; their flier is on the intranet.

USING YOUR BENEFITS

33. How do I check if my doctor is in network with Blue Cross Blue Shield of Arizona?

- Go to [azblue.com](https://www.azblue.com) and select **Find care**.
- Choose Coverage Year **2026** (or **2027** starting in January), Type of Coverage **Employer**, and Network **Statewide/National PPO**.
- Search by doctor's name, specialty or facility near your ZIP code.

You can also call BCBS of Arizona at **800-232-2345**.

34. Does my deductible and out-of-pocket maximum start over on January 1?

Yes. Deductibles and out-of-pocket maximums reset every January 1. The amounts you paid in 2026 do not count toward 2027, even if you stay on the same plan.

35. What is considered free preventive care?

On all three plans, in-network preventive care is free, even on the HDHP/HSA before you meet your deductible. This includes your yearly checkup, routine screenings, standard preventive lab work, and recommended immunizations. Here is a link to preventive care services: <https://www.healthcare.gov/coverage/preventive-care-benefits/>

If your doctor finds something and orders follow-up tests or treatment, that care is **not** preventive, and your normal costs apply.

36. Where should I go for care?

Choosing the right place can save you money:

- **AZ Blue Telehealth:** \$10 medical or \$20 counseling or psychiatry copays on all three plans. Good for colds, rashes, and minor illnesses.
- **Your regular doctor:** \$25 on both PPOs. On the HDHP/HSA you pay the discounted price until your deductible is met.
- **Urgent care:** \$75 on the Base PPO and \$50 on the Buy-Up PPO. Use it when you need same-day care that is not an emergency.
- **Emergency room:** \$400 on the Base PPO and \$350 on the Buy-Up PPO, then deductible and coinsurance. Use the ER for true emergencies.

37. How do I get a new ID card?

Everyone will automatically get new medical and dental cards for 2027 which will be mailed to their home in early January.

- **Medical (BCBS of Arizona):** Call **800-232-2345** or create an account at **azblue.com** to request a card. Group number **101674**.
- **Dental (Ameritas):** After January 1, 2027 you can contact Ameritas at **800-487-5553** or create an account at **ameritas.com/sign-in** to view or print your card. Our group number is **010-351321**.
- **Vision (EyeMed):** You do not need a card to get care. You or your eye doctor can call EyeMed at **866-939-3633** using group number **1052895** (Base Plan) or **1052897** (Safety Glasses).

38. Can I decline medical and still enroll in other benefits?

Yes. Each benefit is chosen separately, so you can enroll in dental, vision or other plans without medical.

39. Can I enroll my spouse or children if I don't enroll myself?

No. You must be enrolled in a plan to cover your dependents on that plan.

40. How long can my children stay on my plan?

Children can stay on your medical and dental plan until the date they turn 26 and can stay on your vision plan through the end of the month in which they turn 26, whether or not they are married, in school or living with you.

41. How do I update my life insurance beneficiary?

In Paycom, under the Benefits section. Review your beneficiary during open enrollment to make sure it is current. Beneficiaries can also be updated at any time during the year.

42. Will I get a new debit card for my FSA?

If you are currently enrolled and re-enroll for 2027, keep your existing FSA debit card. Your card remains active through the expiration date printed on the card. New cards are issued to first-time participants and when an existing card expires. If your card is lost or stolen, cancel it and request a replacement through your Lively dashboard at support.livelyme.com or by calling Lively at 888-576-4837.

MAKING CHANGES DURING THE YEAR

43. Can I change my benefits after open enrollment?

Once open enrollment is over (November 17), you can only change your benefits if you have a **qualifying life event**, such as marriage, divorce, birth, adoption, death of a spouse or covered tax dependent, or gaining or losing other coverage. Otherwise, your elections stay in place for all of 2027.

- Report the event in **Paycom within 31 days** of the date it happened.
- Upload supporting documentation from an official source showing the name of each person affected and the date of the event. Examples include birth certificate, marriage license or divorce decree.
- The Benefits team generally reviews life event requests within five business days. If additional information is needed, you will receive a Paycom alert and an email from benefits@sun.auto.
- If you do not notify us of your qualifying life event or complete your qualifying life event within the timeframe, your request to change coverage may be denied.

44. Can I add or remove dependents at any time?

No. You can add or remove dependents only during open enrollment or within 31 days of a qualifying life event (see Question 43).

45. Can I change my HSA or FSA contributions during the year?

HSA: Yes, you can change your contribution at any time in Paycom.

FSA: In general, no. Any elections during open enrollment will continue for the whole year. However, if you have a qualifying life event you are allowed to make an FSA change.

HELP AND RESOURCES

46. How do I reach the Sun Auto Benefits team?

Monday–Friday, 8 AM–5 PM Eastern. Response times may be longer during open enrollment.

- Phone: **844-728-7457** (Option 2, then Option 6)
- Email: **benefits@sun.auto**
- Online: **mysunu.com/benefits**

47. Is the Employee Assistance Program still available?

Yes. The Employee Assistance Program provides confidential support for mental health, legal and financial concerns at no cost to you and **family** members, whether or not you are enrolled in a Sun Auto medical plan.

Phone: 800-338-4015

Website: GuidanceResources.com

Username: LFGSupport

Password: LFGSupport

Resource	Where to find it
2027 Open Enrollment Information	Open Enrollment 2027 – My Sun U
Carrier phone numbers and websites	2027 Open Enrollment Guide, page 41-42
Summary Plan Descriptions (SPDs)	Paycom: Benefits → Documents & Links
SBCs and coverage certificates	Paycom: Benefits → Documents & Links

This FAQ is a summary. If anything here differs from the official plan documents, insurance certificates or Summary Plan Description, the official documents govern.