



2026 Benefits Open Enrollment FAQs

How to Elect Your Benefits: Employee Navigator, Making Elections, Canceling/Waiving Coverage, Adding/Removing Dependents

Q: What is Employee Navigator?

A: [Employee Navigator](#) is an online tool for Puget Sound employees to make and review benefits elections, submit benefits changes due to a qualifying life event, and streamline the benefits enrollment experience.

Q: How do I create an Employee Navigator account?

A: To create an Employee Navigator account:

1. Access [Employee Navigator](#) by visiting www.employeenavigator.com or by signing in to your [My Apps Dashboard](#) and selecting Employee Navigator – HR Benefits Portal.
2. Select “Log-In” in the upper corner of the webpage and then “Register as a new user.”
3. For the first time that you register, you will be asked to enter the last four digits of your Social Security Number and the Company Identifier, which is **University of Puget Sound**.
4. Create a username and password to finalize account creation.
5. After signing in, you will see a message indicating that you should complete Open Enrollment.

Please note that a unique code will be sent to your Puget Sound email address each time you sign into Employee Navigator as part of the multi-factor authentication process.

Q: Who can I contact with questions about account creation or if I experience log-in issues?

A: Synergy provides technical support for Employee Navigator. They may be contacted at enrollment@synergyenrollment.com or by phone at 858-282-0660 with availability Monday through Friday 8:00 a.m. to 5:00 p.m. (except on holidays).

Q: Who do I contact if I notice a discrepancy in my Employee Navigator profile?

A: Please contact Puget Sound Benefits at benefits@pugetsound.edu for questions about benefits elections, listed dependents, or any other benefits-related items.

Q: What if I do not submit 2026 Open Enrollment elections in Employee Navigator?

A: If you do not participate in open enrollment and elect coverage in Employee Navigator, you will not be enrolled in medical, dental, vision or FSA benefits for the 2026 calendar year. You will not be able to adjust your elections after Open Enrollment closes, except in the case of a Qualifying Life Event.

Q: How do I cancel existing coverage or continue waiving coverage for 2026?

A: Complete the 2026 Open Enrollment elections process in Employee Navigator and waive coverage on each applicable plan using the “Don’t want this benefit?” selection option.

Q: How do I add or remove a dependent to any of my healthcare plans?

A: When completing the Open Enrollment process, you will be prompted by Employee Navigator to add or confirm your dependents. When electing benefits, you will have the option to add, remove, or confirm coverages for all qualifying dependents listed in Employee Navigator. Please note you will need to make these elections for each plan you are confirming and/or making changes to (i.e. medical, dental, vision, etc.).

Q: How do I know that I have successfully completed my enrollment in Employee Navigator?

A: If there is any incomplete information that is required, Employee Navigator will highlight this and prompt you to complete it before you submit your benefits elections. Prior to submitting your final elections, Employee Navigator will ask for your online signature. You will then receive a confirmation within Employee Navigator. As a best practice, HR recommends that you print this page and save it for your records.

Flexible Spending Accounts (FSAs)

Q: Will Health Care and Dependent Care FSA contributions carry over into the 2026 plan year if I do not submit an annual contribution election during Open Enrollment?

A: No. All FSA contributions will be reverted to \$0.00 for 2026 if you do not submit an annual contribution amount during Open Enrollment.

Q: What are the 2026 contribution limits for Health Care and Dependent Care FSAs?

A: The maximum contribution per calendar year is \$3,400 for a Health Care FSA and \$7,500 (or \$3,750 if married and filing separately) for a Dependent Care FSA.

Q: If I have a balance on my Health Care or Dependent Care FSA accounts at the end of the calendar year, what is the maximum balance I can carry over based on IRS guidelines?

A: For a Health Care FSA, there is a \$660 maximum carryover from 2025 to use for 2026 services. Any dollars in excess of this amount remaining in your account will be forfeited. For a Dependent Care FSA, there is no allowed carryover from 2025 to use for 2026 services. Any dollars remaining in your Dependent Care FSA at the end of the applicable calendar year may not be carried over. There is a 90-day grace period for submitting 2025 expenses for reimbursement.

Please contact WEX, our FSA account administrator, for details regarding your account balance.

Q: What about Life and AD&D Coverage?

A: The University offers all benefits-eligible employees \$25,000 in Life and AD&D coverages at no cost to you. Current coverage will carry over into 2026.

Please update your beneficiaries for all life and AD&D coverages that you have through the university. This is a requirement to submit your benefits elections in Employee Navigator.

Q: What about Voluntary Life Employee Coverage? Will I need to provide Evidence of Insurability (EOI) to be approved for coverage?

A: Current coverage elections will carry over into 2026. You may increase voluntary life benefit amounts for yourself by \$10,000 without providing Evidence of Insurability (EOI) if you haven't previously been denied coverage, except as noted below.

If you increase your total voluntary life benefit by more than \$10,000 or if your total election amount exceeds the guaranteed issue amount (\$180,000), you will need to provide an EOI. Please see the 2026 Benefits Guide for more details.

Q: What about Voluntary Life Spousal or Domestic Partner Coverage? Will I need to provide EOI to be approved for coverage?

A: Current coverage elections will carry over into 2026. You may increase your spousal or domestic partner voluntary life benefit coverage by \$5,000 without providing Evidence of Insurability (EOI) if you haven't previously been denied coverage.

If you increase your total voluntary life benefit by more than \$5,000 or if your total election amount exceeds the guaranteed issue amount (\$50,000), you will need to provide EOI to be approved for coverage. Please see the 2026 Benefits Guide for more details.

Q: What about other Voluntary Insurance Benefits?

A: Current AD&D and accident and critical illness coverage elections will carry over into 2026. Please see the 2026 Benefits Guide for more details.