General Open Enrollment Questions

Q. When is Open Enrollment?

A. Monday, November 9th – Friday, November 20th, 2026.

Q. How do I access Open Enrollment?

A. Go to https://sso.dayforcehcm.com/ and click on Benefits. Next to 2027 Open Enrollment, click on Start Enrollment.

Q. If I don't want to make any changes to my current enrollments, do I need to re-enroll for 2027?

A. If you are currently enrolled in the Medical Flexible Spending Account, the Dependent Care Flexible Spending Account, or the Health Savings Account (HSA), and would like to keep that benefit for 2027, you will need to go through the enrollment. **Flexible Spending Account and HSA contribution elections do not rollover, and you will need to enroll every year.** HSA elections will no longer carry over automatically. All other coverage will rollover to next year.

Q. I am a new employee (Hired on or after 10/1/26); do I need to complete Open Enrollment?

A. Human Resources will send you information on how you will need to enroll in benefits.

Biometrics

A health biometric screening is a required part of your wellness discount for open enrollment, and it can be completed in one of three ways:

- By completing an annual physical with your doctor
- By registering for a lab screening at your local LabCorp through eHealth
- By ordering and completing an at-home test kit through eHealth

If you are covering your spouse under your medical plan, they will also need to complete a biometric screening in order to be eligible for the wellness discount.

How much money will I be saving?

If you complete the wellness requirements, you will receive a 20% discount off your medical premiums in 2027.

Is a biometric screening mandatory to enroll in coverage?

If you do not complete a biometric screening, you are still eligible to enroll in benefits, but you will not be eligible for the wellness discount.

What is included in the test?

The biometric screening involves completing a basic blood lipid panel. Tests include your total cholesterol, HDL, LDL, triglycerides, glucose, blood pressure, height, weight, waist circumference, and BMI. This service is covered at 100% under your medical plan. If you are not currently enrolled in medical insurance, you can complete your screening at no cost through LabCorp or by ordering an at-home test kit through the eHealth website.

Is my eligibility for the discount based on my results?

No, in order to qualify for the discount, you just need to participate. M/I Homes does not have access to view your results, and your results will not disqualify you from receiving the discount.

How do I register?

For instructions on how to complete your biometric screening, click here: eHealth Screening Instructions.

My LabCorp form is password protected and I cannot access it. How do I access the form?

This password is different from your eHealth password. There are instructions on how to access the form in the email with the form attached. You will need to use your eight-digit birth date to open the LabCorp form (i.e. if you were born September 5, 1972, you would enter 09051972).

How do I access the physician's form?

There is no physician's form this year. If you are currently enrolled in M/I Homes's medical plan, you can simply visit your doctor for your annual preventive care appointment, and we will receive a report from UHC confirming you've completed your health screening. We do not receive any private health information on this report. If you've already had your annual physical this year, you may have already satisfied the requirement, and should receive an email from Benefits confirming that your screening was completed.

If you are not currently enrolled in the M/I Homes medical plan, and you want to complete the biometric screening by having an annual physical with your provider, please have your provider sign and return the Wellness Premium Discount Affidavit, which can be requested by emailing benefits@mihomes.com.

How do I access the LabCorp form?

You need to login or create an account with eHealth to download the form and make your appointment.

When is the deadline to get my biometrics completed?

Biometrics must be completed (either at the onsite clinic, by your doctor, or at a LabCorp facility) and submitted by the end of the day on **Friday, November 20th**. Results must be received by eHealth by the following Friday, November 27th.

Is my spouse required to complete a biometric screening?

If your spouse is enrolled (or going to be enrolled) in M/I Homes' medical plan, they will also need to complete the biometric screening to qualify for the discounted wellness rate. Dependent children do not need to complete a biometric screening.

I was hired on or after October 1st, 2026. Do I still need to complete a biometric screening?

No. If you choose to participate in our medical plan, you will be automatically enrolled into the wellness rates for 2027. However, to keep the wellness rates for 2028, you will have to complete your biometric screening during next year's open enrollment.

Do I need to fast before my appointment?

Fasting (no food) for 9 hours before your appointment is recommended but not required. Please drink plenty of water. Black coffee is permitted. Continue to take any prescription medications. If you are diabetic, please consult your physician before fasting.

Who do I contact with questions?

If you would like to schedule by phone or have any questions, please call EHS Customer Service at 888-708-8807, ext. 1, Monday - Friday 7:00am - 6:00pm CST.

If you have additional questions on your benefits, please contact Human Resources at benefits@mihomes.com.

2027 Affidavits

Q. Do I have to complete any affidavits if I am <u>not</u> enrolled in medical coverage?

A. No, affidavits are only required if you are on our medical plan. If you are enrolled in Employee Only or Employee and Child(ren) coverage, you will only need to complete the Non-Tobacco Affidavit. If you are enrolled in Employee and Spouse or Family Coverage, you will need to complete the Non-Tobacco Affidavit for you and your covered spouse, and you will also need to complete the Spouse Group Coverage Certification.

Q. Where do I go to print the affidavits and who do I email them to after completion?

We have gone paperless, so you no longer have to print the documents and email. Now you can complete the affidavits by scanning the QR Code or clicking the links below:

- Non-Tobacco Affidavit

- Spouse Group Coverage Certification

Q. Do I need to send you a confirmation of the completed affidavits?

A. No, we receive a report that has all the names of the individuals that completed the affidavits.

Q. When is the deadline to complete the affidavit(s)?

A. November 20th, 2026.

Q: What happens if I am (or my covered spouse is) a tobacco-user?

A: Unless you (and your spouse if applicable) completes a reasonable alternative standard as described in the next question, you will be charged a flat tobacco surcharge of $78.46 per paycheck.

Q: Can I (or my covered spouse) avoid the tobacco surcharge?

A: If you or a spouse are a tobacco user, you can avoid the tobacco surcharge if the tobacco users each complete a reasonable alternative standard. Contact benefits@mihomes.com and we will work with you or your covered spouse (and if you wish, your or your covered spouse's doctor) to establish a reasonable alternative standard that is right for you or your covered spouse in light of your or your covered spouse's health status. Establishing and satisfying any reasonable alternative standard will not cost you and/or your spouse any money. Upon completion of the reasonable alternative standard by you and/or your spouse, you will be refunded for the increased premium amount you paid during the year and the tobacco surcharge will be waived for the remainder of the plan year. You and/or your covered spouse do not need to cease tobacco use to avoid the tobacco surcharge so long as you complete an acceptable alternative standard. Eligibility for the premium discount is evaluated annually. An employee and/or covered spouse that continues to use tobacco will be required to satisfy a reasonable alternative standard annually if they want to avoid the tobacco surcharge.