



## Preparing for Open Enrollment: Guiding Clients Through 2025's New Rules and Realities

### Q4 CRUNCH TIME: MASTERING OPEN ENROLLMENT WITH CONFIDENCE

Open enrollment season is here, and Q4 brings with it the familiar mix of urgency and opportunity. Brokers and advisors know the stakes: employees making high-impact decisions, employers juggling compliance requirements, and carriers adjusting rates and designs. This season comes with additional weight. With new legislation like the One Big Beautiful Bill Act (OBBBA), shifting affordability thresholds, and heightened compliance enforcement, this year calls for proactive guidance, clear communication, and trusted expertise.

**Six short weeks can determine an  
entire year of coverage decisions.**



### KEY DATES AND TIMELINES

The federal health insurance marketplace open enrollment period runs from November 1 through December 15, 2025. While some states with their own exchanges, including California, Massachusetts, New Jersey, and the District of Columbia, extend their deadlines, the majority align with the federal calendar.

These six weeks may sound sufficient, but they pass quickly, especially when employers are finalizing budgets and employees are weighing new benefit choices. Now is the time to check in, confirm clients' readiness, and prepare to answer the inevitable last-minute questions.



Signed into law on July 4, 2025, the One Big Beautiful Bill Act (OBBBA) is already reshaping benefits conversations. Brokers should be prepared to explain its key provisions:

- ◉ **Telehealth Permanency for HSAs**

Employees enrolled in high-deductible health plans (HDHPs) paired with HSAs can now permanently access pre-deductible telehealth visits. This change removes barriers to virtual care and enhances the value of HSAs.

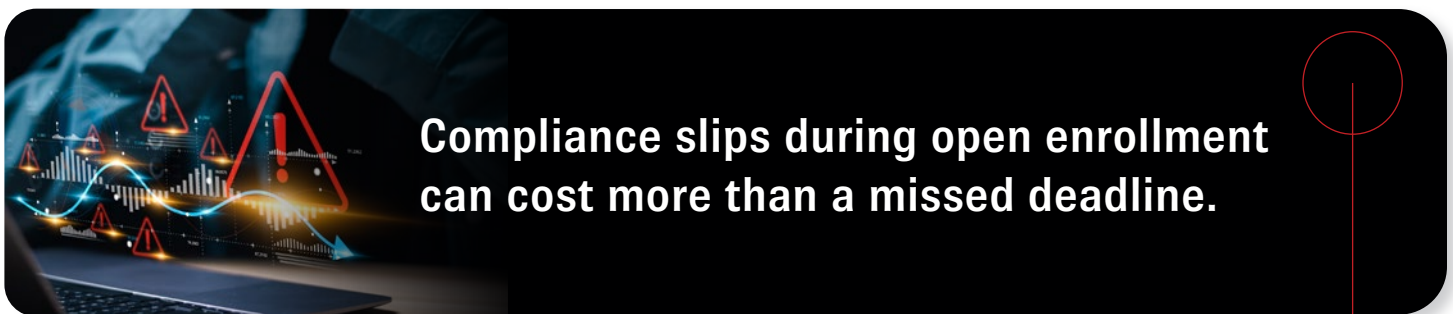
- ◉ **Expanded Dependent Care FSA Limits**

Beginning with 2026 plan years, the dependent care FSA contribution cap rises to \$7,500 for individuals and joint filers. While the increase does not apply this year, employers and employees should prepare for the adjustment.

- ◉ **Trump Accounts for Minors**

New tax-advantaged "Trump Accounts" allow parents or guardians to contribute up to \$5,000 annually for children under 18. While implementation details are still being finalized, this new option will generate interest during benefit conversations.

Employers may not fully understand how these provisions tie into their benefits strategy, and employees may have questions about how the updates fit alongside their current choices. Education is critical to helping both groups make informed decisions.



## OTHER LEGISLATION AND COMPLIANCE FACTORS AFFECTING OEP

Beyond OBBBA, other regulatory developments directly influence this year's open enrollment:

- **ACA Affordability Threshold**

For 2026, the IRS set the affordability threshold at 9.96% of household income. Employers must confirm their lowest-cost, self-only coverage meets this standard to avoid penalties.<sup>1</sup>

- **Transparency in Coverage (TiC) Enforcement**

Carriers and employers are expected to maintain machine-readable files and provide price comparison tools. Employees can now shop and compare medical services more easily, which may influence plan selection.

- **ERISA and SPD Compliance**

The Department of Labor has increased audits and penalties around Summary Plan Descriptions (SPDs) and Summary of Benefits and Coverage (SBCs). Employers must ensure employees receive accurate, timely documentation.

- **State Individual Mandates**

Although the federal mandate was repealed, states including California, Massachusetts, New Jersey, Rhode Island, and the District of Columbia continue to enforce their own requirements. Employers with multistate workforces must account for these variations.<sup>2</sup>

- **COBRA Notices and Administration**

With workforce turnover remaining elevated, COBRA compliance is more important than ever. Employers with 20 or more employees must provide timely and accurate notices to avoid penalties.

## GUIDING THE UNINSURED AND UNDERINSURED

Not every employer offers health coverage, and not every employee qualifies for or elects employer-provided insurance. Many turn to the federal or state marketplaces.

### Your role is pivotal:

- Remind employees that open enrollment runs November 1 through December 15 for the federal marketplace. Missing this deadline means waiting until the following year unless a qualifying life event occurs.
- Educate employees on premium tax credits and cost-sharing reductions, which remain income-dependent and can significantly reduce costs for lower-income households.
- Clarify Medicaid and CHIP eligibility, which remain critical options for many families.

Providing this guidance strengthens employer relationships by ensuring all employees, insured or not, have access to coverage pathways.

**When employees understand  
their benefits, employers gain a  
competitive edge.**



## KEEPING THE ALREADY-INSURED INFORMED

For employers offering coverage, communication is essential. Employees need clarity on:

- ◉ **Premium and deductible adjustments**
- ◉ **Network changes**
- ◉ **Wellness incentives and ancillary benefits**
- ◉ **HSA and FSA contribution limits**

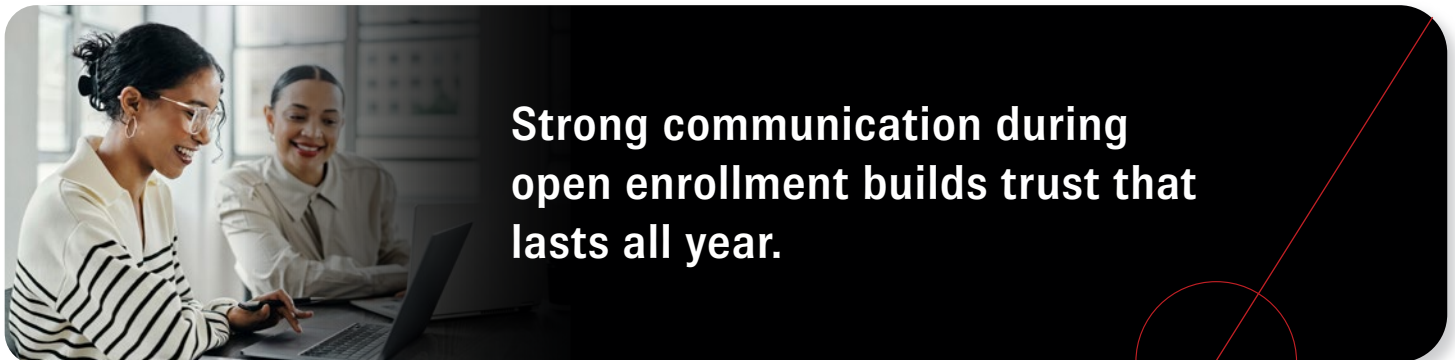
Clear understanding drives retention. According to MetLife's 2024 Workforce Study, 73% of employees who understand their benefits are more likely to stay with their employer.<sup>3</sup> Guidance in this area directly supports recruitment and retention strategies.

## AVOIDING COMPLIANCE CHAOS: YOUR OPEN ENROLLMENT CHECKLIST

Help clients stay compliant with this quick checklist:

- ◉ **ACA Reporting**  
Ensure accurate 1095-C forms are distributed and filed.
- ◉ **ERISA/SPD Requirements**  
Confirm employees receive compliant plan documentation within 90 days of coverage.
- ◉ **State Regulations**  
Review state-specific mandates for employers with cross-state operations.
- ◉ **COBRA Notices**  
Verify timely and accurate distribution to all eligible former employees.

Even small oversights can lead to costly penalties, but with the right preparation, they are preventable.



**Strong communication during  
open enrollment builds trust that  
lasts all year.**

## SETTING THE STAGE FOR SUCCESS

Open enrollment is not just about forms and deadlines. It is about helping employees feel supported and employers feel confident in their choices. Successful brokers use this season to double down on communication:

- ◉ **Host interactive workshops or webinars**
- ◉ **Share simple guides comparing plan options**
- ◉ **Highlight underutilized tools like HSAs, FSAs, and wellness resources**

## BOTTOM LINE

Open enrollment this year carries unique challenges, from OBBA provisions to affordability thresholds and increased compliance oversight. Brokers who address these updates early and with clarity position themselves as trusted partners.

CRC Benefits is here to provide the expertise, tools, and compliance support you need. From quoting technology to guidance on ACA, ERISA, COBRA, and state-specific regulations, our team is committed to helping you deliver a seamless open enrollment season.

## CONTRIBUTORS

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## END NOTES

1. IRS May 2025 "Minimum value and affordability"  
<https://www.irs.gov/affordable-care-act/employers/minimum-value-and-affordability>
2. National Conference of State Legislatures January 2024 "Commercial Health Insurance Mandates: State and Federal Roles"  
<https://www.ncsl.org/health/commercial-health-insurance-mandates-state-and-federal-roles>
3. MetLife "MetLife's 2025 Employee Benefits Trends Study"  
<https://www.metlife.com/workforce-insights/employee-benefit-trends/>