

November 6, 2025

Last Chance to Enroll in 2026 State Plan Benefits

Retiree Open Enrollment Closes November 8, 2025

Start 2026 Open Enrollment

This email is sent to all eligible State Plan members. If you have already completed your Open Enrollment, ignore the prompt to start again.

Start Open Enrollment

Go to benefits.mt.gov, then select the "Start Open Enrollment" button.

You can also enroll using the MyChoice Mobile App. Once downloaded, log in to benefits.mt.gov to receive your access code.

You should have received a Retiree Open Enrollment Election Form in the mail as an alternative to completing your election(s) online. If completing the printed election form, it must be returned to HCBD by November 8, 2025. Only complete one Open Enrollment Election, either online, via a mobile device, or by returning the form.

Open Enrollment Reminders

Live Life Well Incentive

- If you completed the Live Life Incentive before October 1, 2025, the Incentive credit will appear in the enrollment system when you complete Open Enrollment.
- If you completed your Incentive between October 1 - October 31, 2025, you will still receive the Incentive credit, however, it may not show in the enrollment system when you complete Open Enrollment. You can check your Incentive status by logging into your MediKeeper account at benefits.mt.gov/incentive.
- If you did not complete your Incentive Activities by October 31, 2025, you are not eligible to earn the Live Life Well Incentive in 2026.

Adding Dependents

- If you add dependents to your 2026 State Plan benefits, you must submit

dependent verification documentation by December 19, 2025, for coverage to be effective January 1, 2026. Learn more about dependent verification documentation requirements at benefits.mt.gov/eligibility.

- Submit dependent verification documentation to HCBD at BenefitsQuestions@mt.gov or fax (406) 444-1421.

Congrats to the Second Round of Prize Winners!

Everyone who completed Open Enrollment by 12 pm MDT on November 5, 2025 was automatically entered to win the drawing. Winners will receive a separate email from HCBD to coordinate delivery of their prizes.

M.R.

P.S.

J.M

I.N.

N.G.

G.W.

M.Y.

P.W.

E.M.

R.G.

Winners identified by initials for privacy purposes.

You need to complete Open Enrollment by November 8 to enroll in 2026 State Plan benefits.

STATE OF MONTANA HEALTH CARE & BENEFITS DIVISION

(406) 444-7462 | TTY (406) 444-1421 | Toll Free (800) 287-8266

125 N. Roberts St. Room 104 | PO Box 200130 | Helena, MT 59620-0130 | BenefitsQuestions@mt.gov

Non-Discrimination Notice: The State of Montana Benefit Plan complies with applicable Federal civil rights laws, state and local laws, rules, policies and executive orders and does not discriminate on the basis of race, color, sex, pregnancy, childbirth or medical conditions related to pregnancy or childbirth, political or religious affiliation or ideas, culture, creed, social origin or condition, genetic information, sexual orientation, gender identity or expression, national origin, ancestry, age, disability, military service or veteran status or marital status. 45 C.F.R. § 92.8(b)(1) and (d)(1)

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-270-3877 (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-270-3877 (TTY: 711).

This service is provided to you at no charge by [State of Montana Health Care & Benefits Division](https://benefits.mt.gov).