THE GUIDE

The Flex Re-Enrollment Guide

Running a smooth annual flex re-enrollment, from a Canadian benefits administrator's point of view.

For administrators

Ask an administrator what makes flex re-enrollment hard and you will not hear "the calendar." You will hear about the same three things going wrong, year after year: the data was off before the window opened, employees could not make sense of their choices, and the loose ends dragged on for months after the window closed.

Most re-enrollment advice hands you a timeline. This guide does something different. It starts from the three places re-enrollment actually breaks, because when you get these right, the timeline takes care of itself.

Failure point one: the data is wrong before you start.

Nearly every enrollment mess traces back to data that was already wrong when the window opened. A member record out of sync with a carrier. A rate that was never updated. A coverage detail that quietly drifted over the year.

In a Canadian multi-carrier plan, this is harder than most guides admit. The same employee's information has to agree across every carrier at once. A change that reached one carrier but not another does not just create a discrepancy, it creates a coverage or billing error that surfaces at the worst possible moment.

Warning signs you have a data problem

- Last year's enrollment produced a wave of billing corrections in the months that followed.
- Member counts do not match between your records and a carrier's.
- You are not fully confident the rates loaded for this year are the final approved rates.
- Terminations or status changes from earlier in the year may not have reached every carrier.

How to get ahead of it

- Reconcile your member, coverage, and rate data across every carrier before you open the window, not after.
- Treat rate and plan verification as its own step. Confirm the current approved rates and plan details are loaded correctly before any employee sees them.
- Resolve discrepancies while there is still time. A mismatch found in planning is an easy fix; the same mismatch found mid-enrollment is a scramble.

→ *Use the **Multi-Carrier Data Reconciliation Checklist** and the **Rate & Plan Verification Worksheet** to work through this.*

Failure point two: employees cannot make a good decision.

Most employees do not understand their benefits well enough to choose with confidence. When re-enrollment is confusing, you get three predictable results: wrong elections, enrollment regret, and a flood of the same questions landing on your desk.

A generic plan-comparison chart does not fix this. What works is meeting employees where they are, showing them their options in terms of situations they actually recognize, and making the trade-offs in coverage and cost genuinely clear.

This is also where Canadian specifics trip people up. Employees ask what actually counts as an eligible expense, what happens to coverage that crosses the non-evidence maximum, and how their choices affect their pay. If they cannot get clear answers, they default to whatever they picked last year, whether or not it still fits.

! Warning signs employees are struggling to choose

- A high share of employees simply carry forward last year's elections without engaging.
- Your inbox fills with the same handful of questions during the window.
- Employees express surprise, after the fact, at what they are paying or what they are covered for.

✓ How to get ahead of it

- Explain options through recognizable scenarios, not a grid. Most people can find themselves in "single, keeping costs low" or "growing family" faster than they can read a benefits table.
- Communicate in plain language, more than once, and say clearly what is changing, what the employee needs to do, and by when.
- Give employees a simple way to see coverage and cost side by side, and a clear answer on eligibility questions.

→ *Use the **Employee Scenario Guide** and the **Plain-Language Communication Kit**.*

Failure point three: the loose ends outlast the window.

Closing the window is not finishing. The elections still have to reach every carrier, payroll deductions have to be right, coverage effective dates have to line up, and the follow-ups have to actually happen.

In the Canadian context, two follow-ups matter most and are the most often missed. First, any coverage an employee elected above the non-evidence maximum needs evidence of insurability before it takes effect, and someone has to prompt and track that. Second, employees who missed the window entirely need a clear path forward. This is the phase generic kits forget, and it is exactly where coverage gaps are quietly created.

Warning signs the close-out is slipping

- Elections are "done" but you have not confirmed they reached every carrier.
- Payroll deductions for the new year have not been checked against the new elections.
- There is no list of who elected coverage above the non-evidence maximum and whether their evidence of insurability is complete.
- Employees who missed the window have not been contacted.

How to close it cleanly

- Confirm every election reached every carrier, and verify effective dates.
- Reconcile the new payroll deductions against the new elections before the first pay of the year.
- Track every above-NEM election through to completed evidence of insurability.
- Give anyone who missed the window a clear explanation of their options.

→ *Use the **Re-Enrollment Close-Out & Follow-Up Tracker** and the **Missed the Window Guide**.*

The shortcut: don't run the gauntlet at all.

Everything in this guide is work you can do well by hand, and these resources will help. But it is worth naming the obvious: the three things that break re-enrollment are the three things a modern administration platform is built to prevent.

On Effortless, member and rate data stay reconciled across carriers, so the data is right before the window opens. Employees compare their real options and costs as they enroll, so the decision is clear. And the follow-ups, from non-evidence maximum prompts to payroll deduction sync, run automatically, so nothing outlasts the window. The annual gauntlet becomes a managed, largely automated process.

THE EFFORTLESS WAY

See what a managed re-enrollment looks like on your own plan.

The three failure points, prevented by design — reconciled data, clear employee choices, and automated follow-ups.

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