

Viasat Open Enrollment Instructions

Dear Valued COBRA Participant,

We are excited to present you with information regarding your COBRA Open Enrollment opportunity through Viasat, effective May 1, 2026. This guide is designed to facilitate your understanding of the open enrollment process, ensuring that you are well-prepared to make informed decisions about your health coverage.

Key Information:

- **Eligibility Reminder:** If your COBRA start date is **after the open enrollment effective date**, this notice does not apply to you. You can disregard this notice as you will not be subject to open enrollment rights.
- **Pending COBRA Election:** If you have been offered COBRA coverage but have not yet elected it, you are required to submit your standard COBRA election form **alongside or before** submitting your open enrollment elections. This requirement is applicable regardless of the timing of your COBRA effective date.

Important Open Enrollment Deadline

- **Deadline to submit changes: May 31, 2026**
It is crucial that all open enrollment forms are submitted to Igoe by this date. Unfortunately, late submissions cannot be accepted under any circumstances. If you are mailing your forms in, please ensure they are postmarked by this deadline.

Your Comprehensive Open Enrollment Kit

To assist you in navigating your COBRA open enrollment, we have assembled a variety of resources. Below is a detailed overview of the materials available to you:

1. **Open Enrollment Kit:** This kit has been compiled to provide you with all necessary benefit forms and plan descriptions. These resources are essential for making informed decisions for the upcoming plan year.
2. **Rate Sheet:** This important document outlines the costs associated with your monthly COBRA coverage. If your rates are influenced by geographic or demographic factors (such as age, state or zip code), additional instructions for calculating your specific rate will be included.
3. **COBRA Continuation Change Form:** This form allows you to notify us if you wish to remove a dependent or cancel your coverage for the upcoming benefit year. Please note that this form is **not** intended for electing a new plan.
4. **COBRA Continuation Enrollment Form:** Use this form if you wish to enroll in a new plan or in a plan you were not previously enrolled in. This form should be used along with any specific carrier form included in your Open Enrollment Kit.



Understanding Your Open Enrollment Categories

- **Terminating Plan:** If the plan you were enrolled in during the previous year is no longer available, you **must** make a new election to continue your coverage. Please review the available benefit plans to determine your options.
- **No Rate Changes:** If your coverage rates remain unchanged, you do not need to take any action to maintain your current coverage.
- **Rate Change:** If the plan is available but the rates have changed, we encourage you to review the new rates to ensure the plan still meets your needs.
- **New Plan:** Some plans offered during the previous benefit year may not be available this year. If you were enrolled in one of those plans, you will need to elect a new plan to maintain coverage.

Step One: Explore Your Plan Options

Before making your enrollment decisions, it's important to familiarize yourself with your current and potential plan options. Below, you'll find an overview of the available plans along with their corresponding open enrollment categories. This will help you identify whether any action is needed on your part.

Medical Coverage

Plan Name:

Anthem BC CA PPO Medical
Anthem BC CDHP Medical CA Only
Anthem BC CDHP Medical DC Only
Anthem BC CDHP Medical FL Only
Anthem BC CDHP Medical GA Only
Anthem BC CDHP Medical Out Of State
Anthem BC PPO Medical DC Only
Anthem BC PPO Medical FL Only
Anthem BC PPO Medical GA Only
Anthem BC PPO Medical Non CA
Anthem BlueHPN EPO Medical CA Only
Anthem BlueHPN EPO Medical Non CA

Open Enrollment Category: **Rate Change**

Dental Coverage

Plan Name:

Delta PPO Base Dental - RigNet
Delta PPO Base Dental - Snappi
Delta PPO Base Dental - Viasat
Delta PPO Buy Up Dental - RigNet
Delta PPO Buy Up Dental - Snappi



Delta PPO Buy Up Dental - Viasat
Open Enrollment Category: Rate Change

Vision Coverage

Plan Name:

Vision Service Plan - RigNet

Vision Service Plan - Snappi

Vision Service Plan - Viasat

Open Enrollment Category: No Rate Change

Employee Assistance Plan Coverage

Plan Name:

Employee Assistance Program (EAP) - Lyra

Open Enrollment Category: New Plan

Step Two: Communicate Your Enrollment Choices

With your plan category in mind, please follow the guidelines below to communicate your enrollment decisions effectively:

If There Are No Changes:

- **Keep Current Coverage:** No action is required on your part. Your coverage will automatically continue at the current rates.
- **Change Plans or Add a Dependent:** If you wish to enroll in a different plan or add a dependent, please complete the enrollment form with your new open enrollment election(s) and dependent information.
- **Drop a Dependent or Cancel Coverage:** Complete the COBRA Continuation Change Form to initiate this change. Once processed, you will receive confirmation and updated COBRA premium coupons.

If There is a Rate Change:

- **Keep Current Coverage at New Rate:** No action is necessary; you will automatically receive new premium coupons reflecting the updated rate.
- **Change Plans:** If you decide to switch to a different plan, complete the appropriate enrollment form for your chosen plan.
- **Add a Dependent:** Complete the enrollment form included in your Open Enrollment Kit.
- **Drop a Dependent or Cancel Coverage:** Complete the COBRA Continuation Change Form to submit your request.



If There is a New or Terminated Plan:

- **Enroll in a New Plan:** Fill out the enrollment form(s) included in your Open Enrollment Kit. If no specific form is available, you may use the generic Igoe COBRA enrollment form.
- **Terminated Plan:** A new election **must** be made in order to continue coverage under this plan type unless instructed otherwise.

Important Payment Information

Upon receipt of your enrollment or change forms, you will be issued new premium coupons that reflect any changes. Please note that you are responsible for any premium rate increases and must ensure that your payment is received within the standard **30-day payment grace period**.

Special Note for Automated Recurring Payments: If you are currently enrolled in Igoe's automatic recurring payment option, please be aware that any outstanding premium balances for current or past months must be paid separately via check or one-time online payment. Igoe will not draft your bank account for any past due premiums. Additionally, your account must be fully paid up to date in order for Igoe to draft for the next month's COBRA premium.

Submission Instructions

To submit your enrollment forms and any necessary payments, please send them to:

Email: cobra@goigoe.com

Fax: 858-430-5896

The Igoe COBRA/Direct Bill Portal will be unavailable between April 7 through April 20. During this period, online access will be unavailable. Any changes you wish to make to your account, including payment, must be sent manually to the mailing address listed below. Automatic payments will not be drafted from your bank account

WHAT YOU SHOULD DO NOW

- ✓ If you mail payments, update your mailing records immediately
- ✓ Allow extra mailing time during the blackout period
- ✓ Ensure payments mailed after **April 20** go to the new address only
- ✓ If you are set up on automatic bill payment with your bank, you will need to notify them to update the mailing address. Please include your name and former employer in the check memo section



WHAT YOU SHOULD DO ON OR AFTER APRIL 20

- ✓ Go to the new portal and register - <https://goigoe.wealthcarecobra.com>
- ✓ Set up free recurring payments
- ✓ Begin sending physical payments to the new address as listed below

HELPFUL TIPS:

- ✓ Visit our COBRA & Direct Bill Member Resource Page at <https://www.goigoe.com/cobra/>
- ✓ Visit our general center at <https://www.goigoe.com/resources/> and scroll down to the COBRA/Direct Premium Billing – Setting Up a Recurring Payment Guide if you need help setting up a recurring payment.
- ✓ Contact our Member Services team via email at cobra@goigoe.com with questions as hold times will likely be higher during this transition period.

NEW PAYMENT MAILING ADDRESS

Beginning **April 20**, all payments must be mailed to the new PO Box address listed below for processing:

Igoe Administrative Services

Dept 37

P.O. Box 981044

Boston, MA 02298

Important: ALL payments mailed to the old PO Box in Omaha on or after **April 7** will be destroyed for your security and will **NOT** be processed. This could result in late payment status or loss of coverage. If you sent a payment to the Omaha PO Box in error and receive a termination notice, contact our Member Services team immediately

Coverage Activation

After Igoe receives your enrollment decisions, we will relay them to the appropriate insurance carrier. Please allow up to **two weeks** for your coverage to be activated. If you do not receive your insurance cards or any confirmation from your carrier within this timeframe, please contact us for assistance. We will be happy to reach out to your carrier on your behalf.



Questions?

Our Participant Services representatives can assist you with any questions you may have. They can be reached Monday through Friday between the hours of 8:00 a.m. - 5:00 p.m. PST. Their contact information is as follows:

Phone: 800-633-8818, option 2

Email: cobra@goigoe.com

Fax: 800.975.7296

We are here to support you every step of the way!

Thank you for your attention and we wish you the best as you navigate your health coverage options.

