



2025 BENEFITS OPEN ENROLLMENT FREQUENTLY ASKED QUESTIONS



What's new or changing for 2025?

Rakuten is committed to providing benefits designed to support your needs, no matter your stage in life. In 2025, we will continue to offer market-leading comprehensive coverage. Read on to learn more about new benefits and changes coming in 2025.

- **Your monthly contributions for medical plans will increase slightly** – Despite health care cost increases being at their highest in 13 years, Rakuten is pleased to continue the current program with no plan design changes at marginally higher rates. Employee costs are increasing proportionate to the overall medical renewal increase. Rakuten continues to offer highly competitive, affordable plans including a free plan.
- **Aetna HDHP individual deductible for family plans will increase to \$3,300** (up from \$3,200) due to IRS-mandated regulations.
- **The HSA contribution limits are increasing** – You can contribute \$4,300 for individual coverage (up from \$4,150 in 2024) or \$8,550 for family coverage (up from \$8,300 in 2024) into an HSA. Team members who will be 55 or older by the end of the 2025 calendar year can contribute an additional \$1,000 a year. These limits include the employer contribution.

How does Rakuten's plan stack up with our competitors?

Each year, Rakuten International benchmarks our plans and rates against other tech employers to ensure you are covered with comprehensive benefits at a competitive price point. The result is our market-leading programs, including our well-being point solutions, to help you live happy and healthy.

What is Open Enrollment?

Open Enrollment is your annual opportunity to make changes to your benefits. During Open Enrollment you can switch to a different medical plan, enroll in a new plan, add or drop dependents and beneficiaries, and re-enroll in the Healthcare, Dependent Care, and Limited Purpose FSA plans. If you're in the High Deductible Health Plan, this is also a good time to review your Health Savings Account and make sure your contributions are set to the right level for the coming year.

Once Open Enrollment is over, you are not allowed to make changes to your benefits unless you have a qualifying life event such as getting married or adding a new child to your family.

When is Open Enrollment?

Open Enrollment begins on Monday, October 28th and will run through Friday, November 8th. Be sure to get your elections in during this time!



For which time period do Open Enrollment elections apply?

Any changes you make during Open Enrollment are for the 2025 calendar year and will take effect on January 1, 2025. Your new premiums will begin on your first paycheck received in January.

What if I miss the Open Enrollment period for benefits?

If you miss the Open Enrollment period, you will not be able to enroll or make changes until the next annual Open Enrollment period — unless you experience a qualifying life event that permits you to make benefits changes under IRS rules at the time the event occurs.

How do I enroll in benefits?

Log into your Workday portal and click on the Open Enrollment task located in **My Tasks** to get started. A step-by-step walkthrough on how to complete your Open Enrollment task in Workday is available on the [MyBenefits.Life](#) Benefits Portal.

Can I complete Open Enrollment on my mobile device?

YES! The new Open Enrollment layout easily allows you to complete the Open Enrollment process from a mobile device. Download the Workday app and use Organization ID: rakuten.

I don't plan on making changes to my benefits for 2025, do I have to do anything?

If you won't be making any changes to your benefits you do not need to act for 2025, your benefits and covered dependents will automatically roll over. The only exception is the health care, limited purpose, and dependent care flexible spending accounts, which do require you to make an active election each year.

You are strongly encouraged to review and submit your Open Enrollment elections. Any changes to your Open Enrollment elections will not be allowed after November 8th.

My elections have an effective date that is not 1/1/2025. Instead, I see 1/1/2019, 1/1/2020, etc. What does that mean?

If you re-elected a plan from the prior year meaning you did not make any changes to the plan, coverage level, or enrolled dependents from the previous year, then your plan will retain the original effective date. This simply means there is no break in coverage across plan years.

I am finished with my elections, but I would like to make a change, how can I do that?

You can make changes to your completed Open Enrollment elections by clicking on the Benefits, Pay and Compensation app located on your Workday homepage. Click Edit on the submitted Open Enrollment event to make any changes. **Any changes to your Open Enrollment elections will not be allowed after November 8th.**



I was just hired and recently completed my new hire benefits enrollment event.

Do I need to complete the Open Enrollment task?

YES! Your new hire enrollment are your elections for the 2024 calendar year. Recently hired employees do need to complete the Open Enrollment task to elect benefits for the 2025 calendar year.

Is there a recording of the 2025 changes that I can watch?

YES! An informational video will be available on your [MyBenefits.Life](https://mybenefits.life) Benefits Portal.

Who can help me pick a plan that is best for me?

If you have questions about your benefit plans, or need help enrolling, you can get help from an Alliant Benefit Advocate. Advocates are benefits experts who are familiar with your benefit plans. They can answer questions about how your coverage works; assist you with determining if family members are eligible; help you make coverage changes; direct you to network providers; and in certain circumstances, help resolve claim or billing issues. Benefit Advocates are available by email at rakutenbenefits@alliant.com or by phone at (877) 408-6430.

Where can I find information about the benefits (deductible, coinsurance, copays, etc.)?

Go to you [MyBenefits.Life](https://mybenefits.life) Benefits Portal to view the Benefits Guide, additional plan documents, forms, and required notices.

Will I automatically be enrolled in the Accident plan if I am enrolled in the Aetna HDHP medical plan?

No, you will not automatically be enrolled due to Workday limitations. While making your plan elections in Workday, please elect the employer paid voluntary Accident plan with the same coverage tier and enrolled dependents as you have on the HDHP medical plan.



Can I add my domestic partner to my insurance plans?

YES! A domestic partner is an eligible dependent. You may add your domestic partner, and his/her children, to your insurance plans if you complete and notarize the Domestic Partner Affidavit and provide two proofs of dependency. If you add a domestic partner to your insurance, you will receive the affidavit form from the Benefits team shortly following Open Enrollment.

Why are there different tiers for domestic partners versus spouses?

Domestic partners do not qualify for tax-favored benefits under section 106 of the federal tax code; therefore, the Company's contribution towards an employee's domestic partner coverage will be taxable to the employee as imputed income. The imputed income is the total premium rate for domestic partner coverage, paid for by both the Company and the employee.

Can I drop my spouse from coverage if they get a new job mid-year?

Yes. A spouse obtaining new coverage from their employer would be considered a qualifying event which would allow you to drop them provided you notified Rakuten's HRS team within 30-days of their new offer of coverage.

What is the new HSA annual limits for the 2025 plan year?

The HSA contribution limits for the 2025 plan year have increased. You can contribute \$4,300 for individual coverage, up from \$4,150 for 2024, or \$8,550 for family coverage, up from \$8,300 for 2024 into an HSA. If you're 55 or older, you can contribute an additional \$1,000 a year. These limits include the employer contribution.

Why is my Flexible Spending Account (FSA) plan showing as waived for 2025?

Every year, per IRS regulations, employees are required to re-elect the FSA plans for the upcoming plan year. This includes the Healthcare, Dependent Care, and Limited Purpose FSA plans. You will need to actively enroll in the FSA plans with the annual amount you want for the 2025 calendar year.

What is the new FSA annual limits for the 2025 plan year?

The FSA contribution limits have increased for the Healthcare FSA and Limited Purpose FSA for the 2025 plan year. You can contribute \$3,300 into a Healthcare FSA or Limited Purpose FSA (up from \$3,200 in 2024). The Dependent Care FSA contribution will remain at \$5,000.

During Open Enrollment, you will elect the annual amount you want to contribute to your Flexible Spending Account. It is very important that you make this election carefully based on what you expect to spend during the plan year. Any money left in the account at the end of the annual grace period will be forfeited. For the Healthcare and Limited Purpose FSA, the amount you elect for the year is available to use on January 1st and you will be issued a debit card for use in paying for covered expenses at most pharmacies and physician's offices.



Where can I find a list of qualified FSA medical expenses?

The Healthcare FSA is an FSA account for out-of-pocket medical, dental, and vision expenses for yourself and your eligible dependents. Visit [IRS Publication 502](#) for a list of eligible Healthcare FSA expenses.

Used in conjunction with a Health Savings Account (HSA), the Limited Purpose FSA is an FSA account for out-of-pocket dental and vision expenses for yourself and your eligible dependents.

Can I participate in the Limited Purpose FSA if I am enrolled in the HSA in 2025?

YES! Used in conjunction with a Health Savings Account (HSA), the Limited Purpose FSA is an FSA account for out-of-pocket dental and vision expenses for yourself and your eligible dependents.

What is the Dependent Care FSA, and can I use it to cover the health care needs of my dependents?

The Dependent Care FSA is an FSA account for daycare, preschool, or elderly care expenses. Qualified dependents include children under 13 and/or physically or mentally handicapped dependents. You cannot use the Dependent Care FSA to pay for health care related expenses. Visit [IRS Publication 503](#) for a list of eligible Dependent Care FSA expenses.

Can I participate in the Dependent Care FSA (daycare) if I am enrolled in the HSA in 2025?

YES! You may participate in the Dependent Care FSA if you are participating in the Health Savings Account in 2025. However, you cannot participate in the Healthcare FSA.

Does the Dependent Care FSA include K-12 Private School as well?

Standard private school tuition is not a qualifying dependent care expense; however, fees paid for before/after school care are considered a qualifying expense. Proof of payment should itemize the costs between tuition and before/after school care.

Dependent Care FSA contributions were reduced for some employees in mid-year in 2024. Will this happen again in 2025?

Rakuten complies with annual non-discrimination testing. If you are a highly compensated employee, you may be impacted in 2025 once our non-discrimination testing has been completed for the 2025 plan year. Please take this into consideration when electing your plans for 2025. We recommend that you consult with a tax advisor as there may be other dependent care options for you via your tax filing outside of Rakuten's FSA dependent care plan.

Where can I find what drugs are covered on Aetna's Formulary?

You can review Aetna's formulary by clicking [here](#).



What is the difference between the PPO and EPO?

Under the PPO plan, you are covered regardless of if you seek care in-network or out-of-network. Under the EPO, you are only covered if you receive services from an in-network provider. We would encourage you to review the benefit details on the portal or brochure for a line-by-line comparison of the plans.

If you switch from HDHP with an HSA to the PPO, do you still have access to previous funds in the HSA?

Yes. You are still eligible to spend your existing HSA funds even if you've switched to the PPO.

Can I use HSA funds to pay for eligible expenses for my spouse or dependent(s) not enrolled on my Rakuten HDHP medical plan?

Yes, you can spend your HSA dollars on your spouse or dependent(s) not covered by a Rakuten medical plan.

Can HSA funds be used to cover mental health services?

Yes! You can use your HSA funds to pay for any eligible medical, dental or vision services.

Does California tax Employer HSA contributions?

Yes. Contributions made to your HSA are required to be treated as taxable income in California at the state level.

Does New Jersey tax Employer HSA contributions?

Yes. Contributions made to your HSA are required to be treated as taxable income in New Jersey at the state level.

When does Rakuten's contributions hit my HSA account?

If you enroll in the HSA during Open Enrollment your HSA contributions will be added to your account at the beginning of the calendar year.

Does the HSA allow for daycare reimbursement?

No, daycare reimbursements are not allowed on the HSA. For a pre-tax daycare benefit, we offer the FSA Dependent Care plan which you can enroll in, in addition to the HSA plan.

Does Rakuten's contributions to my HSA count towards my annual limit?

Yes. The amount that Rakuten contributes to your HSA does count toward the annual IRS limit. If you would like to elect that maximum contribution for 2025, please reduce your annual election by the amount that Rakuten will contribute to your account.



Is there time limit to submit health claims against HSA?

There is no time limit in which you must submit claims against your HSA account. Please note this differs from the FSA plan which required all claims be submitted by March of the following plan year (i.e. March 2025 for the 2025 plan year)

Does Rakuten offer fertility benefits?

Yes! We would encourage employees who are interested in our fertility benefits to review the “Family Planning” section of the benefits guide for more details. If you have additional questions about what fertility benefits are available to you and your family, please reach out to your benefit advocate at rakutenbenefits@alliant.com.

What's difference between annual deductible and annual out-of-pocket? What are examples of costs that are not deductible but ARE out-of-pocket costs?

A deductible is what you pay first for your health care. For each calendar year, you'll pay the full cost of doctors and treatments until your total spending reaches the deductible amount. Then you'll pay a portion of your health care costs as defined by your plan (copay or coinsurance) until you reach your out-of-pocket maximum. The out-of-pocket maximum is the most that you will pay in a calendar year, and after your spending reaches this amount, the insurance company will pay all costs for covered health care services. The amount you pay in premiums each month does not count towards the deductible or out-of-pocket maximum.

Is the dental orthodontia lifetime maximum per family or person?

The limit is per person.

Is LASIK covered under vision insurance?

LASIK is not covered under our vision plan. However, the VSP plan does offer discounts for LASIK to members.

How does privacy work with Modern Health? Do they let Rakuten know if someone schedules therapy through them?

No, Rakuten is not privy to who uses Modern Health and/or why.

What's the difference between Modern Health Coaching and Therapy?

Great question! [Click here](#) for an overview of Coaching vs Therapy services with Modern Health.



What happens if we use all 12 therapy visits before the end of the year and we want to meet again?

Members can continue to receive therapy services through Modern Health after using the 12 visits however employees will pay the full cost of each visit. Please reach out to your benefit advocate at rakutenbenefits@alliant.com if you would like more information on the cost of the additional services, and how to set those additional sessions up. If you are enrolled in a medical plan with out of network benefits (Aetna HDHP or PPO) you can submit Modern Health expenses to be covered under your health plan.

How does the Well-being Reimbursement with HealthEquity work?

Once claims are submitted and approved by HealthEquity, you should see the reimbursement via your paycheck the following month.

Does the Well-being Reimbursement cover athletic apparel?

Yes!

Is the Well-being Reimbursement Program a total of up to \$350 for each category (i.e. \$350 for fitness and \$350 for financial planning)? Or is \$350 in total?

You can expense up to \$350 in total for the calendar year.

What is the cost of the tutoring through Care.com?

The on-demand tutoring benefit that was announced is a virtual tutoring service that is free of charge to employees (max of 3 hours per month). If you are looking for an in-person tutor you can also source that support through the Care.com membership, but you would be required for paying the tutor directly. Tutoring costs through the Care.com marketplace vary by tutor.

The benefits brochure shows there are 24 payroll deductions. There are 26 pay periods each year, so is this accurate?

Yes, 24 payroll deductions is accurate. Although we have 26 pay periods, we only deduct premiums over 24 pay periods. There are two months with a third paycheck where no benefit premiums or contributions are deducted.

What are all eligible expenses the pre-tax commuter benefits can be used for?

Eligible Commuter expenses can be found [here](#).

I did not see an option to enroll in the 401(k) plan.

The 401(k) plan is open to monthly enrollments and is not part of the Open Enrollment process. Employees can enroll in the 401(k) plan at any time during the year via their Fidelity account at www.401k.com. More information about the 401(k) plan is available on the [HR pages of R-Space](#).



Where do I confirm or update my beneficiary information?

- For Life and AD&D insurance, visit your Workday portal and navigate to the Benefits, Pay and Compensation app > Benefits > Beneficiaries.
- For your HSA account, visit your HealthEquity portal and navigate to Manage Account > Beneficiaries.
- For your 401(k) account, visit your Fidelity portal and navigate to Profile & Settings > Beneficiaries.

Who should I contact if I still have questions about Open Enrollment?

If you have questions about your benefit plans, or need help enrolling, you can get help from an Alliant Benefit Advocate. Advocates are benefits experts who are familiar with your benefit plans. They can answer questions about how your coverage works; assist you with determining if family members are eligible; help you make coverage changes; direct you to network providers; and in certain circumstances, help resolve claim or billing issues. Benefit Advocates are available by email at rakutenbenefits@alliant.com or by phone at (877) 408-6430.

Don't forget, you can always find benefits-related information on the [HR pages of R-Space](#).