

## **Annual Open Enrollment Information for Plan Year 2022**

### **Group Insurance Benefits**

#### 2022

Open enrollment, the annual event when you can make changes to your group insurance benefits, will be offered as follows:

- Oct 18 Oct 21 --- Virtual meetings & In Person meetings BCC employees
- Oct 26 Nov 8 --- MyBenefits system is available for your elections

There will be two in person meetings, observing COVID-19 safety protocols and social distancing guidelines. Additional enrollment meetings will be online and offered through WebEx.

#### What's new for 2022?

Resources:

Contact your Group Insurance office for any assistance with your group insurance elections:

#### **Risk Management**

Tel: 561-233-5400 Fax: 561-242-7184

#### Email:

BCCMyBenefits@pbcgov.org

MyBenefits system access: www.pbcgov.com/mybenefits

Cigna on-site service representatives:

Peggy Lacroix Tel: 561-233-5474 Peggy.Lacroix@Cigna.com

Monica Kates
Tel: 561-233-5463
Monica.Kates@cigna.com

**Group Insurance** coverage will be offered by the following providers:

Medical – Cigna

Dental – Solstice Benefits, Inc. --- **NEW!!!** Two new dental plan options will be offered Disability – **The Standard** --- **NEW Carrier!!!** 

Life insurance - Securian Financial

Voluntary, supplemental benefits - Washington National

FLEX – P&A (employees must re-enroll to participate in the benefit for 2022) Opt-Out (employees must re-submit proof of other coverage for 2022)

#### **Premium Rates and Changes/Updates:**

#### **Medical coverage:**

Medical coverage will continue with Cigna with no change in benefits or premiums.

#### **Dental insurance:**

Following a competitive solicitation, the County is renewing the dental program with Solstice Benefits, Inc. A number of enhancements to the existing plans and two additional dental plans (an Enhanced DHMO and a Premier PPO) will be offered. Dental premiums are unchanged for the basic DHMO and the low PPO. A 4% premium increase will apply to the high PPO.

Additional information can be found in the 2022 Dental Program FAQs.

**Disability insurance: For Plan Year 2022**, long-term and short-term disability coverage will be offered by The Standard. The same coverage structure currently offered will be maintained with the new vendor. Premiums will be as follows:

- LTD Basic (employer paid) premiums are decreasing
- LTD Buy-Up (partially employee paid); LTD Buy-up employee premiums are decreasing by 5%. However, as the basic LTD premium is decreasing this will impact the employer funded credit towards Buy-Up. It will change from \$2.30 to \$2.00 per month. An average premium savings for a member with Buy-up premiums is estimated at \$1.17 per month
- LTD Voluntary (employee paid); premiums are decreasing by 5%
- STD premiums are decreasing by 25%

The Standard is providing an annual enrollment period for employees not currently enrolled in short term disability or upgraded or voluntary long-term disability without requiring Evidence of Insurability (without answering health questions). If you currently do not participate in the STD or LTD program and wish to enroll — or wish to upgrade your LTD benefit to a higher plan — The Standard disability will accept your application during open enrollment without any medical underwriting requirement.

Pre-existing condition limitations in accordance with the long-term disability policy continue to apply.

Your existing LTD and STD elections will be automatically updated from the prior carrier to The Standard, as follows unless you take action during Open Enrollments:

Current Enrollment PY 2021	Default Enrollment for PY	Action Required:
	2022	
New York Life Basic LTD	The Standard – Basic LTD	No action is required, if
New York Life Upgraded/Buy-	The Standard – <b>Upgraded</b>	you are satisfied with the
up LTD (you must participate	Buy-up LTD	default enrollment for LTD
in HMO or OAPIN medical		and STD enrollment.
plan?		
New York Life Voluntary LTD	The Standard – Voluntary LTD	If you wish to change,
(you participate in POS		elect, or stop participation
medical, or Opt-Out of the		in the disability plans,
Cigna medical plan)		please make your change
New York Life <b>STD</b>	The Standard <b>STD</b>	in MyBenefits between
New York Life STD/LTD	The Standard STD/LTD	Oct 26 – Nov 8. Basic LTD
Waived	Waived	will continue for anyone
		who has county Cigna
		medical HMO/OAPIN.

#### Life insurance:

Life insurance will continue with Securian Financial with no change in benefits or premiums.

**Life insurance beneficiary management has transitioned to the carrier, Securian Financial**. If you have not done so already, please visit <u>LifeBenefits.com</u> to designate your beneficiary now. For assistance, contact 877-494-1754.

If you have not designated your beneficiaries <u>directly with</u> Securian Financial, benefits will be paid according to the policy contract.

FLEX: The health care FSA annual limit will remain at \$2,750.

**Opt-Out credit** will continue to be offered at \$1,000/annually or \$38.46 per pay. Employees must submit their proof of other coverage (in their name) to their Group Insurance office by Nov 8.

Voluntary, Supplemental Benefits - Supplemental Accident, Cancer and Hospital benefits are offered by Washington National. Available policies include benefits for Hospital stays, emergency room or urgent care visits; Doctor appointments, surgeries, lab tests, and more...; Accidental injuries; Cancer diagnosis and treatment, depending on the plan selected. Coverage can be extended to include a spouse and children. Additionally, coverage includes a Return of Premium benefit that returns up to 100% of premiums, less claims

Reach out to Washington National representative for information about the coverage Email: WashingtonNationalPBC@gmail.com or Phone: 561-223-9481

**Legal Plan:** Employees will continue to **use <u>MyBenefits</u> for ARAG legal plan open enrollment elections or changes**. Questions about ARAG? Contact HR at 616-6884 or retirement@pbcgov.org

# Employee Open Enrollment Responsibilities

Employees are responsible for:

- Ensuring personal information such as addresses are up-to-date in HRIS.
- Fully participating in the Open Enrollment process and contacting group insurance during open enrollment with any questions, concerns, or for assistance with elections.
- Starting Oct 26, take the time to visit <a href="MyBenefits">MyBenefits</a>; review your current benefits elections, confirm your covered dependents ensuring that they are still eligible to be covered under your plans.
- Finalize your elections in MyBenefits by Nov 8.
- Thoroughly reviewing choices and elections during open enrollment and submitting them in MyBenefits by the stated deadline.
- Ensuring dependent and beneficiary information is complete and correct. Social Security numbers are required for all medical dependents.
- Providing required documentation, including dependent verification documents for newly added dependents, and annual proof of other coverage (in employee's name) - if participating in the Opt-Out program - to the group insurance office by Nov 8.
- Actively re-electing the FLEX program for Plan Year 2022, as it will terminate otherwise.
- Reviewing the confirmation statement that will be mailed to employees in late Nov/early Dec and notifying the group insurance office of any errors by Dec 15.
- Closely reviewing the paycheck of Jan 7, 2022, to ensure Opt-Out credit is included and notify Risk Management immediately with any issues.

#### **Open Enrollment Information**

Open enrollment information can be obtained in a number of ways:

- •Virtual meetings offered by WebEx BCC Employees are invited to attend a meeting via WebEx the week of Oct 18. The meetings are scheduled for approximately two (2) hours at various dates and times the week of Oct 18. Please register your attendance in TED by October 15th so we may provide you with the WebEx link.
- •A recorded session available on the web. A taped recording of an Open Enrollment info session will be posted on MyBenefits following the WebEx meetings. The recorded session allows you to view the information on demand, at a time and location that is convenient for you and share it with your family.
- •In Person Meetings BCC Employees are invited to attend an In Person session the week of Oct 18. The meetings are scheduled for approximately two (2) hours at two locations. COVID-19 safety protocol, including social distancing, face coverings and other requirements outlined by County Administration, will be observed. For any assistance with scheduling your attendance of a virtual WebEx or in person meeting in TED contact Group Insurance.

The 2022 Group Insurance Information guide will be posted on MyBenefits by Oct 18.

# Processing Open Enrollment changes

#### **Online Enrollment - MyBenefits**

Use MyBenefits from work, home, or elsewhere starting October 26 through November 8 to make your elections.

Examples of open enrollment changes are switching your medical or dental plan election, adding or deleting dependents, electing or terminating coverage, enrolling or re-enrolling in FLEX program, confirming your Opt-Out benefit program participation; and use MyBenefits to elect/change legal plan enrollment by Nov 8.

Even if you do not wish to make *any* changes to your current medical, dental, life and disability elections and you are not re-electing FLEX or Opt-Out for 2022, take a few minutes to enter MyBenefits and review your Group Insurance records to make sure everything is in order.

#### **Action Items**

- → FLEX does not automatically continue from year to year. To *continue* your participation in the FLEX program (health care, dependent care Flexible Spending Accounts) for 2022 you MUST actively re-enroll in MyBenefits by Nov 8.
- →Opt-Out Program To enroll or continue in the medical plan Opt-Out program, 1) confirm your medical coverage is "waived" in MyBenefits AND 2) forward proof of your other coverage (in your name) to your Group Insurance office by Nov 8 AND 3) check the Jan 7, 2022 check for Opt-Out credit and notify Risk Management of any issues immediately.

**Dependent Verification** Submit your required dependent verification documents for dependents you are adding to coverage to your Group Insurance office no later than Nov 8. Social Security numbers must be entered by you in MyBenefits, for any newly added dependents to your medical coverage. To avoid delays in your dependent coverage for newly added family members, please review dependent verification requirements in <a href="PPM CW-P-023">PPM CW-P-023</a> and submit the required documents to group insurance by Nov 8. Your dependent coverage will not go into effect unless the required documentation is received. If the documentation is not received by Dec 31,

	your dependents will not be enrolled in your plans. Such dependents will not be eligible for coverage until the next applicable Open Enrollment period, except in the case of a mid-year qualified family status change.  ➡Email Opt-Out proof and dependent documents to BCCMyBenefits@pbcgov.org or fax to 561-242-7184.
Confirmation Statements	Printed confirmation statements will be mailed to employees in late Nov/early Dec. Please notify your group insurance office IMMEDIATELY and no later than Dec 15, 2021 of any errors or discrepancies that you notice on your confirmation statement. Contact your Group Insurance office before Dec 15, if you are a benefits eligible employee and did not receive a confirmation statement so that you can process any corrections by the deadline.
Evidence of Insurability (Life coverage)	Employees who elect group term life coverage in excess of the guaranteed issue amounts will be required to successfully complete the Evidence of Insurability (EOI) process:  • Securian Financial will mail the EOI form and materials directly to individuals subject to EOI. Contact Securian Financial at 800-872-2214 for questions about life EOI process.  Please complete and return the required forms to Securian Financial as soon as possible. If the required documentation is not received by Securian Financial, the carrier will be unable to proceed with the medical underwriting process and coverage subject to EOI or in excess of guaranteed issue amounts will not be considered for approval.

10/12/2021