

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

United Healthcare Contacts:

Evelyn Giraldo

Evelyn_Giraldo@uhc.com

Tel: 561-233-5474

Leslie Smalley

Leslie_Smalley@uhc.com

Tel: 561-233-5463

FLEX: The health care Flexible Spending Account (FSA) annual limit for Plan Year 2024 is \$3,050.

Opt-Out credit will continue to be offered at \$1,000/annually or \$38.46 per pay period. Employees must submit their proof of other coverage (in their name) to their Group Insurance office by Nov 6.

Life insurance – Important Beneficiary Reminder:

Life insurance beneficiary management was transitioned to Securian Financial. If you have not done so already, please visit LifeBenefits.com to designate your beneficiary now. For assistance, contact 877-494-1754.

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

Voluntary, Supplemental Benefits - Supplemental **Accident, Cancer** and **Hospital** benefits are offered by Washington National. Available policies include benefits for accidental injuries; cancer diagnosis and treatment, and hospitalizations 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.

Washington National can be reached at:

Michael.hogan@optavise.com or Phone: 561-889-0482.

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

Processing Open Enrollment changes online

Use MyBenefits from work, home, or elsewhere starting **October 24 through November 6** to make your elections.

Examples of open enrollment actions are changing your medical or dental plan election, deleting or adding eligible dependents, electing or terminating coverage, enrolling or re-enrolling in FLEX program, confirming your Opt-Out benefit program participation; and using MyBenefits to elect/change legal plan enrollment by Nov 6.

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 2024, 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 2024 you **MUST** actively re-enroll in MyBenefits by Nov 6.

➔ **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 6 **AND** 3) check the Jan 5, 2024 paycheck for Opt-Out credit. It is imperative that employees 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 [PPM CW-P-023](#) and submit the required documents to group insurance by Nov 6. Your dependent coverage will not go into effect unless the required documentation is received. If the documentation is not received by Dec 31, 2023 your dependents will not be enrolled in the group insurance plans. You will not be able to enroll such dependents for coverage until the next applicable Open Enrollment period, except in the case of a mid-year qualified family status change; and only if the required dependent verification is submitted at that time.

➔Email **Opt-Out proof** and **dependent documents** to BCCMyBenefits@pbcgov.org or fax to 561-242-7184.

Confirmation of Benefits 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, 2023** 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 do not receive a confirmation statement so that you can review your statement and 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 **800-843-7979** 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.

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 – BCCMyBenefits@pbcgov.org or call 561-233-5400.
- **Starting Oct 24**, visit [MyBenefits](#); review your current benefits elections, confirm your covered dependents – ensuring that they are still eligible to be covered under your plans.
- Finalizing your elections in MyBenefits by Nov 6.
- 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. *Employees are reminded that individuals who are eligible for group insurance coverage as “Employees” may not be covered as “Dependents”.*
- Providing required documentation to the group insurance office **by Nov 6**, 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.
- Actively re-electing the FLEX program for Plan Year 2024, as it will terminate otherwise.
- Reviewing the confirmation statement that will be mailed to employees in late Nov/early Dec and notifying Risk Management of any errors by Dec 15.
- Closely reviewing the paycheck of Jan 5, 2024, to ensure Opt-Out credit is included, if applicable, and notify Risk Management immediately with any issues.

10/03/2023