



OPEN ENROLLMENT - 2023

Open Enrollment begins Monday, May 8, 2023 and ends on Friday, June 2, 2023. All changes are effective July 1, 2023.

Your benefits should complement your life! During Open Enrollment, reflect upon how your life has changed over the past year and consider how it may be different next year. Then, participate in Open Enrollment and choose benefits that will serve you in 2023/24.

Remember, Open Enrollment is generally your one time of the year to make changes to your benefits, and you'll need to participate if you want to:

- Make changes to your medical, dental, vision, voluntary life, and/or Aflac coverage for next year.
- Contribute to a Health Care and/or Dependent Care Flexible Spending Account (FSA). Please see below for additional information on these plan options.
Remember, you must re-enroll each year in November!

Please be sure to submit your enrollment forms/changes to the City **no later than Friday, June 2, 2023 at 5:00 p.m.** Changes may be submitted in person by visiting City Hall, via inter-office mail, or by Direct Scanning your forms to Human Resources via any City copy machine. *Please do not email social security numbers!*

If you do wish to make any changes to your benefits, including re-enrollment in the FSA options – NO action is required!

What's New in 2023/24?

Your medical plan choices have expanded! This year, the City is pleased to offer a **NEW Kaiser High Deductible Health Plan** option! This plan is **ZERO COST** to all employees and their dependents! In fact, because the monthly premiums are lower than the City's Maximum Contribution, the City will contribute a fixed dollar amount into each participating employee's affiliated Health Savings Account (HSA). Please see the City's Employee [Benefits Webpage](#) for detailed information.

The Health Insurance premiums for all plans have increased this year. The City's Medical Premium Chart can be found [here](#).

Enrollment

To enroll for the first time or to make changes to your Medical, Dental, or Vision Plans – please complete the [HealthComp Open Enrollment Change Form](#).

If you have selected a new High Deductible Health Plan (HDHP), please ensure that you are also

enroll in the affiliated Health Savings Account (HSA). All enrollment forms can be found on the City's Employee [Benefits Webpage](#) as well as the City's Intranet/SharePoint 2023-24 Open Enrollment folder.

Medical Plan Options

The City's Medical Plan options include:

- Kaiser \$20 Co-Pay Plan (High)
- Kaiser \$40 Co-Pay Plan (Mid)
- Kaiser HDHP/HSA \$1,400 (Low)
- Kaiser HDHP/HSA \$2,500 (Zero Cost) ****NEW****

- REMIF EPO \$250
- REMIF EPO \$500
- REMIF PPO \$500
- REMIF HDHP/HSA \$1,400

- Sutter \$25
- Sutter \$500
- Sutter HDHP/HSA \$1,500

Information about each plan can be found on the City's website at [Employee Benefits](#).

Other Health and Welfare Benefits

Alternate Benefit Program. This benefit is for Active Employees who have alternative group health coverage and choose to “opt out” of the City's medical plans. If two employees are employed by the City and one employee carries health benefits for the couple/family, the other is eligible for the Alternate Benefit Program. The monthly benefit amount, payable to the Employee, is \$400.00.

***SPECIAL NOTE for Alternate Benefit Program/Kaiser/Sutter Participants who intend to retire during this Plan Year:** The REMIF plan does not allow a Retiree to come onto the plan at the time of retirement. If you plan on retiring during the 2022-2023 Plan Year and you wish to subscribe to the **REMIF Plan as a RETIREE**, you will need to enroll in the REMIF plan during this Open Enrollment period, and be enrolled for a minimum of one year prior to retiring.*

Delta Dental PPO and Vision Service Plan (VSP) coverage remains the same for the 2023-24 Plan Year. The City pays the actual costs plus an administrative fee for you and your eligible dependents. We encourage you to maximize your benefits by utilizing Delta Dental PPO/VSP providers.

Dependent Care Flexible Spending Account (FSA). This program allows employees to set aside a maximum dollar amount per calendar year, as desired by the Internal Revenue Service, of before tax wages for child/adult care expenses as authorized by the Internal Revenue Service and the California Franchise Tax Board. **Employees must make an irrevocable election each year to participate in this plan.** Employees are eligible to make a section for 2024 during the FSA Open Enrollment period: November 1 – November 30).

Employee Assistance Program (EAP). This program is offered through Aetna. The City pays \$2.84 per month for you and your eligible dependents.

Health Care Flexible Spending Account (FSA). This program allows employees to set aside a maximum dollar amount per calendar year, as desired by the Internal Revenue Service, of before tax wages for medical premiums, co-payments, or out of pocket medical costs, as authorized by the Internal Revenue Service and the California Franchise Tax Board. **Employees must make an irrevocable election each year to participate in this plan.** Employees are eligible to make a section for 2024 during the FSA Open Enrollment period: November 1 – November 30).

Voluntary Life Insurance. Employees are eligible to participate in Voluntary Life Insurance and/or add additional coverage. In order to enroll or make a change to your current benefit amount, please visit the City's Intranet/Sharepoint.

Miscellaneous Information

COBRA Rates are 102% of the applicable premium(s). These are the rates charged to continue on the group health insurance plan(s) in the event an employee loses coverage due to a qualifying event.

Dependent Eligibility. Your eligible dependents generally include:

- Your spouse (as defined by applicable state law)
- Your State-Registered domestic partner (Certificate of Registration is required);
- Your children up to age 26. Children include:
 - Biological and adopted children, (including those placed in your home for adoption);
 - Stepchildren and domestic partner's children;
 - Children for whom you are responsible to provide health coverage under a qualified medical child support order.
 - Your child of any age if chiefly dependent upon you for support and maintenance because of physical or mental disability.

Under no circumstances are you allowed to keep dependents (spouses and/or children) on your benefits if they are no longer eligible. Failure to notify the City of ineligibility within sixty (60) days will result in the forfeiture of COBRA rights.

If it is discovered that a dependent was kept on the benefits while no longer eligible, they will be

terminated retroactively to the date of ineligibility and any claims incurred by them after that date will be the responsibility of the employee. The employee will also not be reimbursed for any premium contribution made on behalf of the ineligible dependent(s).

If is VERY important for you ensure that Human Resources has accurate and up to date information for all health benefit affected plans. This includes, addresses, dependent eligibility, beneficiary information, and emergency contact information.

Qualifying Events/Life Changes.

Examples of qualified change-in-status events include:

- Change in marital status (marriage, divorce or legal separation, registered domestic partnership)
- Change in number of dependents (birth, adoption or placement for adoption of a child; death of spouse or child)
- Change in dependent eligibility (dependent child loses eligibility due to age)
- Change in other coverage (spouse or child gains or loses eligibility for coverage under another plan, such as through spouse's employment)
- Change in residence resulting in loss of eligibility (such as moving out of the EPO service area)

If you experience a qualified change-in-status event, you have 30 days to report the event and request an enrollment change that is consistent with the type of event. For instance, if the event is marriage, you may request an enrollment change to add your new spouse to your coverage. Enrollment changes due to qualified change-in-status events generally are effective the first of the month following the event, provided that you requested the enrollment change by the 30-day deadline. Coverage for a new child due to birth, adoption or placement of adoption generally is effective on the date of the event.

The plan's official documents govern how and when you can make enrollment changes during the plan year and may allow qualified change-in-status events in addition to those listed above.



For any questions, please contact Cassandra Quilala-Nickel at cnickel@rpcity.org or (707) 588-2215.