

# **Annual Open Enrollment Information for Plan Year 2024**

# **Group Insurance Benefits**

#### 2024

Open enrollment is the annual event when you can make changes to your group insurance benefits.

Changes are processed in MyBenefits between Oct 24-Nov 6, 2023

- Week of Oct 16 --- <u>Virtual meetings & In Person meetings</u> BCC employees
- Oct 24 Nov 6 --- MyBenefits system is available for your elections

A recording of a virtual meeting will be posted on MyBenefits for employees to view at a time that works with your schedule. Please register in TED in advance of attending a virtual or in-person meeting.

# Dependent Audit is Coming in Early 2024!

A dependent audit will be performed in 2024. Please review your covered dependents carefully during this open enrollment period and make any coverage adjustments in MyBenefits by Nov 6. If it is determined during the audit that employees have ineligible dependents enrolled in coverage, the County reserves the right to require the return of all County-paid premiums, any associated claims costs paid on behalf of the ineligible dependent, and will pursue any and all other remedies available under the law. The employee may also be subject to disciplinary action, up to and including termination.

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit is guilty of a crime and may be subject to fines and/or prosecution.

Please refer to PPM <u>CW-P-023</u> for additional details. If you have any questions regarding the upcoming dependent audit, or your covered dependents, please contact Risk Management at <u>BCCMyBenefits@pbcgov.org</u> or call 561-233-5400.

# What's new for 2024?

Coverages will continue to be offered by the current group insurance vendors with no changes to benefits.

**United Healthcare Medical Plan** — Premiums for <u>active</u> employees will not increase (except for overage dependent premiums and employees who pay 100% of the premiums due to being on an unpaid leave of absence). The County portion of medical premiums will increase, as well as retiree premiums.

**Securian Life Insurance program.** Premiums will increase by 9% for basic life (employer paid), as well as employee paid supplemental life and Accidental Death & Dismemberment (AD&D); spouse life and AD&D; and child life premiums. Retiree life premiums will not increase.

Please see the 2024 Premium Rate Sheet for details.

Group Insurance carriers – no changes:

Medical – United Healthcare

Dental – Solstice Benefits, Inc.

Disability – The Standard

Life insurance - Securian Financial

Voluntary, supplemental benefits – Washington National

FLEX – P&A (employees must re-enroll to participate in the benefit for 2024)

Opt-Out (employees must re-submit proof of other coverage for 2024)

#### **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 <u>Leslie Smalley@uhc.com</u> 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 <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.

**Voluntary, Supplemental Benefits** - Supplemental <u>Accident, Cancer</u> and <u>Hospital</u> 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 <u>MyBenefits</u> 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.
- **Deproof** 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.

In the event of a conflict between this summary and the applicable Group Insurance policy and/or certificate, the policy and/or certificate shall dictate the insurance and coverage provisions, exclusions, all limitations and terms of coverage. In accordance with the provisions of the ADA, this document may be requested in an alternative format. If you have any questions or would like to receive additional benefit plan materials, please contact your Group Insurance office/representative.

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 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 <u>BCCMyBenefits@pbcgov.org</u> 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 <a href="mailto:BCCMyBenefits@pbcgov.org">BCCMyBenefits@pbcgov.org</a> 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