Department of Personnel Services



**Employee Benefits Office** 

## **County of Sacramento**

September 2022

TO: All Active Employees

Open Enrollment for 2023 **begins October 3**, **2022 and ends October 28**, **2022**. Open Enrollment is the time of year all employees have the opportunity to make health plan changes without a qualifying event.

For 2023, there will be modest increases to the Tier B medical subsidy amounts and changes to most 2023 medical premium deductions. Deductible limits on the High Deductible Health plans have increased slightly to the new IRS minimum of \$1,500/\$3,000. The annual Health Savings Account (HSA) maximum has increased slightly. All other benefit premium rates are unchanged.

There are no carrier changes for 2023, so the benefit providers you have come to know will be providing coverage to employees next year for all benefit plans. You should carefully compare the annual difference in payroll deductions between Traditional HMO and High Deductible HMO plans to determine which plan type makes sense, as well as review the benefits of an HSA for long term financial health benefit cost protection.

The 2023 Medical Contribution and Cashback Matrix is on page 4 of this letter detailing the medical deductions for 2023, if any. We encourage you to review the enclosed information thoroughly to provide enough time for you to ask questions, attend virtual events and select the coverage you prefer for 2023.

# As a reminder, if you are satisfied with your current coverage, you do not need to take any action this Open Enrollment.

#### Exceptions: Each of the below situations require you to take action for 2023.

- <u>Increasing your Health Savings Account (HSA) contribution</u> amounts to the 2023 limits with the ability to select an annual auto increase function,
- <u>Re-enrolling in a Flexible Spending Account</u> (FSA Medical and/or Dependent Care). Re-enrollment is required every year for Flexible Spending Accounts (FSA). The 2 1/2 month grace period and deadline for any 2022 claims remains the same for expenses incurred through 3/15/2023 and claims paperwork filed by 4/30/2023,
- Continuing to receive cashback when waiving County medical coverage.

#### THINGS TO KNOW

- The **deadline to make Open Enrollment changes** is October 28 at 11:59 PM and all supporting documentation must be in our office by November 4 at 5:00 PM.
- The **2023 MyBenefits Summary** is a valuable resource and can answer many of your benefits questions. The **MyBenefits Summary** can be found online at <a href="https://personnel.saccounty.gov/Benefits">https://personnel.saccounty.gov/Benefits</a>. Plan coverage details, creditable/non creditable coverage notice, CHIP notice, and marketplace coverage notice are also available online. A printed copy is available by request from the Employee Benefits Office.
- All benefit changes must be made online using BenefitBridge at www.benefitbridge.com/saccounty at work or at home. Instructions for logging in to BenefitBridge and navigating through the system are available at https://personnel.saccounty.gov/Benefits and we encourage you to review your coverage selections thoroughly before submitting them for approval. Again, for simplicity, if your only change is to increase your HSA contribution amounts, you can do so without moving through all of your other benefit elections.
- If you are adding a dependent to your coverage, the enrollment is not complete until you submit the required dependent documentation (birth certificate, marriage certificate, etc.). Your dependent documentation must be submitted to our office by November 4 at 5:00 PM. Failure to submit the required documentation by the deadline will result in your dependent not being enrolled, and your enrollment request may be denied.
- If you are currently enrolled in County medical plan and are **waiving your medical coverage for 2023**, after making your online election to waive, you must submit proof of your other group coverage by November 4 at 5:00 PM. An affidavit will not be acceptable when waiving in this situation. Other group coverage generally means coverage from another employer group or retiree plan; an individual plan or on the Exchange is not considered group coverage for purposes of waiving the County sponsored medical benefit.
- Annual re-certification of those employees who receive any cash payment when waiving County medical coverage continues for 2023. If you are currently receiving any Cashback or Plan Selection Incentive (PSI) while waiving County provided medical coverage, annual re-certification continues due to IRS regulations as a result of the Affordable Care Act. This re-certification does not require you to show proof of other group sponsored coverage which would still apply during a Qualified Life Event or at Open Enrollment when waiving medical.

Failure to submit an affidavit will suspend eligibility for Cashback/PSI until the affidavit is received. Cashback/PSI is only restored prospectively for the duration of the calendar year. The affidavit can be found on our website at https://personnel.saccounty.gov/Benefits and the affidavit must <u>be returned to the Employee Benefits Office by December 16, 2022</u> <u>at 5:00 PM.</u>

• <u>Submit supporting/affidavit documents to the Employee Benefits Office by fax</u> (916) 874-4621 or email MyBenefits@saccounty.gov.

## Virtual Open Enrollment

As a part of everyone's commitment to social distancing, we are not scheduling any physical Open Enrollment events. This year's Open Enrollment events (activities, vendor days and contests) will again be presented using a virtual website at: https://personnel.saccounty.gov/Benefits/Pages/Open-Enrollment.aspx.

The virtual event website contains great resources that can be viewed and shared when it's convenient for you and your family. Information will include links to carrier websites, videos, flyers and detailed information about all of your benefits.

We'll also have scheduled specific Vendor days that allow you (and your dependents) to participate in information sessions that include a presentation by the carrier and then a questions and answer session. The vendor days calendar can be viewed at: https://personnel.saccounty.gov/Benefits/Pages/Training.aspx.

## HOW TO GET HELP

- Employee Benefits Office website—https://personnel.saccounty.gov/Benefits
- Carrier Resources—You can find information to contact the carriers directly to get your questions answered at: https://personnel.saccounty.gov/Benefits/Pages/ContactsandLinks.aspx
- If you need personal assistance you may contact the Benefits staff Monday– Friday 8am-5pm by email at MyBenefits@saccounty.gov or by calling 916-874-

2020. Due to the high volume of inquiries please allow 48 hours for a response.

Sincerely,

Employee Benefits

# DISCLAIMER

Information contained in this mailing is confirmed as of the date of print. We strive to provide you accurate information as timely as possible. Benefits are subject to the schedule of covered services and exclusions as prescribed in the applicable Evidence of Coverage (EOC) from the applicable carriers.

#### **2023 MEDICAL PREMIUM COSTS**

The following chart provides details on the costs of the benefits, based on your medical benefit Tier and your Recognized Employee Organization (REO).

		Tier B			ee Organizati/ <b>Tier A2 (</b> 1					Tier A	1 (Froz	en)	
2023 Rates A		All Units Hired After 12/31/2006		Units 003, 006, 017, 019, 030					All Other Units				
Cashback If Waiving Coverage		N/A		Cashback \$894.52		No Cashback \$0.00		:k	Cashback \$535.00		No Cashback (PSI) \$150.00		
Plan \$1 Monthly Premium \$1 Single Monthly		Kaiser 5 HMO	Kaise HDHP H		Sutter \$15 HMO	Sutter HDHP H				/HA HMO H		WHA HDHP HMO	
		990.50	\$713.06 \$1,823.44 Kaiser HDHP HMO		\$909.86	Sutter		00	\$824.76 \$2,111.42		\$630.00 \$1,612.80		
		,532.90			\$2,328.22			20					
		Kaiser \$15 HMO			Sutter \$15 HMO			WHA \$15 HMO		WHA HDHP HMO		Monthly Cashback If Waiving Coverage	
Employee Deduction Per Pay Period*/Year** Single		(\$165.35)/ (\$3,968.40)	(\$26.6) (\$639.7	-	(\$125.03)/ (\$3,000.72)		(\$5.10)/ \$122.40)		32.48)/ 979.52)	\$0.00		N/A	
Employee Deduction Per Pay Period*/Year** Family		(\$421.88)/ (\$10,125.12)	(\$67.1) ) (\$1,611		(\$319.54)/ (\$7,668.96)		\$13.03)/ \$312.72)			\$0.00		N/A	
Tier A2 (Units 003, 006, 017, 019, 030) Monthly Single and Family Subsidy: \$1,148.80		Kaiser \$15 HMO			Sutter \$15 HMO	Sut	ter HDHP HMO			WHA НДНР НМО		Monthly Cashback If Waiving Coverage	
Employee Deduction Per Pay	Cashback	\$0.00	\$84.28/ \$2,022.72		\$0.00		5104.28/ 2,502.72	,		32.40/ \$1. 777.60 \$2,		\$894.52	
Period*/ Year** Single	No Cashback	\$0.00	\$0.00		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00	
Employee Deduction Per Pay Period*/Year** Family		(\$692.05)/ (\$16,609.20	· · · ·		(\$589.71)/ (\$14,153.04)		283.20)/ 6,796.80)		(\$481.31)/ (\$11,551.44)		32.00)/ 568.00)	N/A	
Tier A1 (All Other Units) Monthly Single and Family Subsidy: \$826.90		Kaiser \$15 HMO	Kaiser H HM(		Sutter \$15 HMO	Sutter HDHP HMO		WHA \$15 HMO		WHA НДНР НМО		Monthly Cashback If Waiving Coverage	
Employee Deduction Per Pay	Cashback	back (\$81.80)/	***	(\$41.48)/			40.00		to 00		\$535.00		
Period*/ Year** Single	No Cashback	(\$1,963.20)	\$0.00		(\$995.52)		\$0.00		\$0.00		0.00	\$150.00	
Employee Deduction Per Pay Period*/Year** Family		(\$853.00)/ (\$498. (\$20,472.00) (\$11,95			(\$750.66)/ (\$18,015.84)				42.26)/ (\$392.95 ,414.24) (\$9,430.8			N/A	