Important changes to your 2020 benefits

**Premium Rates**

Effective January 1, 2020, the monthly benefits allowance will increase to help offset the monthly premium rate increases for the medical plans and the Delta Dental PPO plan. There will be a decrease in the monthly premium rates for the Optional Group Term Life insurance. You can find the premium rates for the new Plan Year on the Personalized Enrollment Worksheet you received with this summary.

**Taxable Cash Cap**

You are given a monthly allowance to “spend” on benefits. When you do not spend all of it, the unused amount (taxable cash) is added to your monthly pay as income. The County and your Union regularly review your benefits plan to make sure it follows the U.S. Department of Labor guidelines. To meet these guidelines, starting in the 2020 Plan Year, there will be a monthly taxable cash cap of $325. You won’t receive any unused benefits allowance above the cap.

**UHC Harmony HMO**

The County will offer a new medical plan for 2020: The UnitedHealthcare (UHC) Harmony HMO. It has the same plan design as the UHC HMO, but with a smaller network of providers and facilities. If you’re eligible for this plan, it will appear on your Personalized Enrollment Worksheet. See the enclosed comparison chart for details.

**Kaiser Vision and Hearing Aid Benefits**

- You now have a $150 allowance to spend on eyeglass frames with prescription lenses every 24 months — or contact lenses in lieu of eyeglasses every 12 months — at a Kaiser Vision Essentials optical center. One pair of regular eyeglass lenses will be covered at no cost every 12 months.
- You now have a $5,000 benefit allowance to spend on a hearing device from Kaiser or another vendor (one device per hearing-impaired ear every 36 months).

**Spending Accounts**

If you want to contribute tax-free money to a Health Care or Dependent Care Spending Account, you must enroll each year during annual benefits enrollment. See page 6 of the Enrollment Highlights Guide.

If you do not participate during annual benefits enrollment...

Your current benefits will continue (new 2020 premium rates will apply) except for Health Care and Dependent Care Spending Accounts and waiving/declining medical coverage. If you do not elect to waive/decline and submit new or updated information, or if your form is not approved, you will be automatically enrolled in the lowest-cost medical plan you are eligible for in 2020; you will not be able to waive or decline again until 2021.

After October 31, 2019, you may not change your benefits unless you experience a qualified change in status (life event) or until the next annual benefits enrollment period.

Waiving or Declining Medical Coverage

If you have other qualified medical coverage, you may choose to waive or decline Options medical coverage. You MUST provide proof of other medical coverage each year during annual benefits enrollment. See page 3 of the Enrollment Highlights Guide.

Qualified Life Events in October, November, and December

You can make changes outside annual benefits enrollment only if you have a life event, such as marriage, divorce, or birth. You have 90 days from the date of the event to complete your enrollment at mylacountybenefits.com and submit required documents.

If you make a life event change between October 1 and December 31, you must complete two enrollments: One for your 2019 benefits, and another for 2020. That’s because life event changes you make in the last three months of the year do not roll over to the next year.

Important: When you complete your 2019 life event enrollment and reach the “Thank You” page, you must click the yellow “Continue” button to complete your 2020 enrollment.

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enroll October 1 through October 31, 2019

How to Enroll or Make Changes
Use your computer, smartphone, or tablet!

1. Review your enrollment materials and Personalized Enrollment Worksheet, then consider the benefit changes you want to make for 2020.
2. Open a web browser on your computer or mobile device and enter mylacountybenefits.com.
3. Log on using your employee number and PIN. (See your Personalized Enrollment Worksheet for your PIN.)
4. Click on the “Enroll or Make Changes” button to access your Enrollment Homepage and Annual Enrollment link to start your enrollment.
5. Select your benefits and determine if you need to add or drop dependents from coverage. See below for more information on submitting any required documentation.
6. Click the yellow confirmation button. Don’t forget to print or save your confirmation statement before logging off. If using a smartphone or tablet, write down or take a photo of your confirmation number shown on the “Thank You” page.

Submitting Required Documentation
Provide all required documentation to the County Benefits Plan Administrator within 10 calendar days from the date you enroll to guarantee coverage.

If you add a dependent, write your name, employee number, and your dependent’s Social Security number (SSN) on each document or certificate. Submit your documents by:

• Document upload: Use the “Upload” link in the “Documentation Required” section of your Enrollment Homepage
• Email: Attach scanned documents to an email and send to documents@mylacountybenefits.com
• Fax: 310-788-8775
• Mail: County of Los Angeles Benefits Plan Administrator, P.O. Box 5102, Cherry Hill, NJ 08034

Important Enrollment Reminders

<table>
<thead>
<tr>
<th>IF YOU...</th>
<th>THEN YOU MUST...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Switch medical plans</td>
<td>Provide SSNs for all eligible family members.</td>
</tr>
<tr>
<td>Add eligible family members</td>
<td>Provide SSNs and required documents (e.g., certificates for birth, adoption, marriage). See page 2 of the Enrollment Highlights Guide.</td>
</tr>
<tr>
<td>Have dependents no longer eligible for coverage</td>
<td>Remove them from your medical and dental coverage, including an ex-spouse/domestic partner and any other ineligible family members.</td>
</tr>
</tbody>
</table>

If you do not submit the required documents by the deadline, your dependents will not have coverage for 2020.

Unable To Enroll Online?
You may enroll by phone. Call 888-822-0487 and follow the recorded instructions. Do not hang up until you hear “Your benefit elections have been confirmed and recorded,” and have written down your confirmation number.

Review the confirmation statement you will receive by mail. If you do not receive your confirmation statement within seven days from the date you enroll, call the Benefits Hotline at 213-388-9982.

The County reserves the right to take appropriate action against anyone who knowingly presents a false or fraudulent claim under the Plan, or who otherwise attempts to fraud the Plan, including (but not limited to) termination from participation in the Plan and from employment.

This summary is not an official Options Summary Plan Description (SPD) or an official plan document. If you need a copy of an official plan document, contact the Plan’s customer service department directly. Contact information can be found on the back page of the Medical and Dental Plans Comparison Chart you received with this summary. If there is a difference between what you read in this summary and what you read in an official plan document, the official plan document will rule.