

choices

South El Monte

You are a part of what makes the County of Los Angeles a great place to live and work — one of over 100,000 employees dedicated to serving the people of the County of Los Angeles. Your union, through the Coalition of County Unions (CCU), negotiates on your behalf for your benefits plan. With equal representation, a joint labor-management team governs the administration of the *Choices* Plan, giving you the freedom to focus on what matters most at work and at home.

Important changes to your 2021 benefits

2021 Taxable Cash-back Limit will be \$244

The County gives you a monthly benefits allowance to “spend” on benefits. If the cost of your benefits is less than your allowance, the unused amount — taxable cash-back — is added to your monthly paycheck.

The 2021 taxable cash-back limit will be \$244 (was \$325 in 2020).

EXAMPLE: TAXABLE CASH-BACK UNDER LIMIT¹

Monthly benefits allowance	\$1,835.44
Monthly cost of your benefits	-\$1,696.56
Taxable cash-back you receive	\$138.88

Because your unused benefits allowance amount is less than the \$244 taxable cash-back limit, \$138.88 will be added to your monthly pay.

EXAMPLE: TAXABLE CASH-BACK OVER LIMIT¹

Monthly benefits allowance	\$1,835.44
Monthly cost of your benefits	-\$1,385.33
Unused benefits allowance	\$450.11
Monthly benefits allowance loss	-\$206.11
Taxable cash-back you receive	\$244.00

Because your unused benefits allowance is more than the \$244 taxable cash-back limit, only \$244 will be added to your monthly pay. To make the most of your monthly benefits allowance, you may consider enrolling in or increasing other benefits such as optional life insurance or spending accounts.

¹ The figures in this table are for example purposes only.

ALADS Vision Enhancements

Annual in-network eye exams are covered at 100% and will include retinal imaging. The frame/elective contact lens allowance will increase from \$120 to \$150. You will be able to replace your lenses and frames, or contact lenses every 12 months instead of 24 months.

CAPE Vision Enhancements and New Dental Benefits

Vision — Under VSP, the in-network allowance for frames will increase from \$120 to \$130-\$150.

Dental – CAPE medical insurance will now cover these per-person out-of-pocket dental expenses:

- Adult and children’s orthodontia — Up to \$2,000 lifetime maximum
- Dental implants — 60%, up to \$1,000 per calendar year

New Cigna Chiropractic and Acupuncture Coverage

Cigna Network HMO and Cigna Select Network HMO now provide chiropractic and acupuncture coverage. Cigna POS will also provide in-network care in 2021.

You will be allowed 20 visits per calendar year and will not need a referral from your Primary Care Physician (PCP).

Buy More With Your Health Care Spending Account

The carryover amount for Health Care Spending Accounts (HCSA) will increase by \$50 to \$550. As of March 2020, HCSA funds can buy over-the-counter medications without a prescription and menstrual care products.

WageWorks Name Changing to HealthEquity

On January 1, 2021, WageWorks, the County’s spending account administrator, will change its name to HealthEquity. This will not affect your spending accounts, the service you receive, or how you will submit reimbursement requests.

Stay on track for 2021

Life Event Changes During October, November, or December

If you have a qualified life event like marriage, divorce, or birth between October 1 and December 31, you need to complete **two life event enrollments**: One for your 2020 benefits, and another for 2021. Why? Because life event changes you make in the last three months of the year do not roll over to the next year.

Example: Marcia has a baby on October 20, 2020, and wants to add her baby to her County benefits. She has 90 days to complete two life event enrollments and submit the required documentation:

STEP 1	Add Baby to 2020 Benefits: Marcia must do this before she can add her baby to 2021 benefits
	<ul style="list-style-type: none">• Marcia logs on to mylacountybenefits.com• Clicks “Enroll or Make Changes” button• Clicks “Life Event” link• Follows instructions <p>When done with enrollment, Marcia gets to the “Thank You” page:</p> <ul style="list-style-type: none">• Clicks “Continue” button to enroll her baby in 2021 benefits
STEP 2	Add Baby to 2021 Benefits: Marcia must do this because her change to 2020 benefits will not carry over to 2021 benefits
	<ul style="list-style-type: none">• She follows the same steps she took for 2020 enrollment• Confirms changes• On “Thank You” page, views list of documents she needs to provide
STEP 3	Check Confirmation Statements
	Marcia reviews both confirmation statements to make sure her baby was added to her benefits for the 2020 and 2021 Plan Years.
STEP 4	Submit Required Documentation
	Marcia submits required documentation within 90 days of the life event.

If you have questions, call the Benefits Hotline, **213-388-9982**.

Itemized Receipts: The Key to HCSA Reimbursement

If you enroll in a Health Care Spending Account (HCSA), you must submit itemized receipts to be reimbursed by HealthEquity. Receipts must show:

- | | | |
|--------------------|--------------------|-----------------------|
| 1. Patient's name | 3. Date of service | 5. Out-of-pocket cost |
| 2. Provider's name | 4. Type of service | |

HealthEquity will not process claims submitted with only credit card receipts. You must submit an itemized receipt from your provider.

Do You Waive or Decline Medical Coverage?

You must provide information on your other medical coverage each year during annual benefits enrollment. If you do not submit new or updated information, or if your form is not approved, you will be automatically enrolled in a medical plan for 2021. You will not be able to waive or decline again until the next annual benefits enrollment. More information will be available in your annual benefits enrollment packet.

Get ready

October 1 – October 31, 2020 mylacountybenefits.com

Annual benefits enrollment is your one time each year to review and make changes to the benefits negotiated by the CCU, known as *Choices*. Through the hard work of your union and our labor-management collaboration, you have the security of knowing we have you covered. During this time, you can:



Enroll in or change plans:

- ✓ Medical
- ✓ Dental
- ✓ Optional insurance: long-term disability health, life, and accidental death & dismemberment



Add or drop coverage for family members. You must remove ineligible family members from your coverage. See page 3.



Waive or decline medical coverage if you have other coverage. If you choose to waive or decline, you must provide proof of coverage each year. See the bottom of this page.



Enroll or re-enroll in Health Care and Dependent Care Spending Accounts.

Don't Miss the Deadline

After October 31, you won't be able to enroll or make changes until the next annual benefits enrollment unless you have a qualified life event. Your current benefit elections will continue as long as you are eligible (new 2021 premium rates will apply), **except** for spending accounts and waiving/declining medical coverage.

Eligibility reminders

Eligible Family Members

Eligible family members you may add to your *Choices* medical and dental plans¹ include:

- Your spouse or domestic partner
- Your children, children legally adopted by you, children awaiting finalization of adoption by you, stepchildren, children for whom you are the legal guardian, children you support because of a valid court order, and children of your domestic partner:
 - Under age 26
 - Age 26 and older if your child became disabled before the limiting age and is approved by your health plan (check with your health plan to determine the limiting age)
 - Under age 18 for legal guardianship

Loss of Eligibility

You **MUST** remove an ex-spouse, ex-domestic partner, ex-stepchildren, and any other ineligible family members from your health care coverage. Such situations include divorce or the end of a domestic partnership.

Even if your divorce decree requires you to maintain health care coverage for your ex-spouse, you may not keep your ex-spouse or ex-stepchildren enrolled in your *Choices* benefits.

Social Security Numbers Required

All medical plans are required to gather Social Security numbers (SSNs) to comply with federal reporting requirements. If you enroll in a new medical plan, or change plans, you must provide the SSN of each family member you enroll.

If you do not provide SSNs and any other required documentation within 10 calendar days from the date you enroll, your family member will not have coverage in 2021.

¹ The dependent term life, accidental death and dismemberment plans, and spending accounts have different dependent eligibility requirements. See your *Choices* Summary Plan Description (SPD) on mylacountybenefits.com for details.

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* Offered to *Choices* union member employees whose union is part of the Coalition of County Unions

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Your benefits program, the *Choices Plan*, is negotiated with the County by your union through the CCU and is the foundation of your Fringe Benefit contract. The *Choices* benefits are jointly administered by labor and management through the Employee Benefits Advisory Committee (EBAC), giving you the security of knowing we've got you covered — so you have the freedom to focus on what matters most at work and at home.

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**Look inside for news
about *Choices* benefits!**

Annual benefits enrollment is
October 1 – October 31, 2020.

- **Important changes for 2021** – page 1
- **Life events and annual benefits enrollment** – page 2
- **The key to HCSA reimbursement** – page 2
- **Waiving and declining medical coverage** – page 2
- **Eligibility reminders** – page 3



Enroll online

Use your computer, tablet, or smartphone

Whether you want to enroll, make changes, or review your options, you can do it all from your computer, tablet, or smartphone. And, you don't have to call anyone to complete your enrollment. Just log on to mylacountybenefits.com and take control from there.

Advantages of Enrolling Online During Annual Benefits Enrollment

- Enroll** or make benefit changes quickly.
- View** your monthly benefits allowance and cost of benefits.
- Access** your enrollment confirmation statement immediately.
- Add** dependents' Social Security numbers.
- Upload** supporting documentation to the enrollment homepage.
- Link** to your health plans' websites.



Coming late September: Your *Choices* benefits enrollment packet

If you don't receive your packet by October 9, log on to mylacountybenefits.com and go to "Additional Resources" to download the materials.

Do You Have a New Mailing Address or Phone Number?

If so, let us know so you get your enrollment packet on time. We'll also send your updated information to your medical and dental plan carriers. To update your information:

- ✓ **Use** a County computer — visit mylacounty.gov > Employee Self Service, or
- ✓ **Contact** your Departmental Personnel Office.

Benefits Hotline

213-388-9982

Monday – Friday, 8 a.m. to 4 p.m.

Extended hours during annual enrollment, 8 a.m. to 5 p.m.; Saturday, October 31, 8 a.m. to 3 p.m.