



quick start summary 2022 annual benefits enrollment

Annual benefits enrollment is October 1 through October 31. Benefits elections take effect January 1, 2022.

2022 benefits: changes and reminders

Premium Rates

There are no changes to the monthly premium rates for the UnitedHealthcare (UHC) HMO and UHC Harmony HMO medical plans. There will be increases in the monthly premium rates for the Kaiser Permanente and UHC Select Plus PPO medical plans. The monthly premium rates for all dental plans have decreased. See your Personalized Enrollment Worksheet for all 2022 monthly premium rates.



Changes to the *Options* monthly benefits allowance and premium rates are subject to approval by the Board of Supervisors.

Taxable Cash Cap

The 2022 monthly taxable cash cap remains at \$244. If you do not spend all your *Options* monthly benefits allowance, you may receive up to \$244 of the unused amount in your monthly pay.



Spending Accounts

In early 2021, Congress passed a stimulus relief law allowing temporary changes to the Health Care Spending Account (HCSA) and Dependent Care Spending Account (DCSA), that includes unlimited carryover of unused funds from Plan Years 2020 and 2021.



Any funds remaining at the end of Plan Year 2021 will automatically carry over to the next Plan Year.

Spending accounts for 2022 – Be sure to adjust your contributions for 2022 based on whether you have carryover HCSA and DCSA funds from Plan Years 2020 and 2021. Keep in mind, the carryover of unused funds in the DCSA is not ongoing.

If you are an active participant in an HCSA and have unused funds at the end of Plan Year 2022, you may carry over up to \$550 of unused funds to Plan Year 2023.

If you are enrolled in a DCSA in Plan Year 2022, you must submit eligible expenses for 2022 by June 30, 2023, or risk losing all unused funds.

New HCSA expenses – Effective January 1, 2020, HCSA funds can be used to buy CDC-approved masks, hand sanitizer, and hand sanitizing wipes.

Life and AD&D Insurance

Cigna Life has changed its name to New York Life Group Benefit Solutions. This will not affect your life or AD&D insurance benefits, beneficiaries, or coverage. Annual benefits enrollment is a good time to review the coverage amounts you have elected for you and your dependents.



If You Do Not Participate During Annual Benefits Enrollment...

Your current benefits will continue at the new premium rates **except** for Health Care and Dependent Care Spending Accounts and waiving or declining medical coverage.

After October 31, 2021, you may not change your benefits until the next annual benefits enrollment period unless you experience a qualified life event.

Waive or Decline Medical Coverage

You **MUST** provide proof of other medical coverage each year during annual benefits enrollment. If you do not submit new or updated information, or your form is not approved, you will be automatically enrolled in the lowest-cost medical plan you are eligible for in 2022; you will not be able to waive or decline until 2023. See page 3 of the *Enrollment Highlights Guide*.

Qualified Life Events in October, November, and December

You can make changes to your benefits outside annual benefits enrollment if you have a life event such as marriage, divorce, or birth. See page 7 in the *Enrollment Highlights Guide*.

If you make a life event change between October 1 and December 31, you must complete two enrollments: One for 2021 benefits and another for 2022.

If you add dependents in November and December through the marriage or birth/adoption life event, but do not complete the 2022 life event enrollment, only the medical and dental coverage you elect for your new dependent automatically carries over to 2022. You must complete the 2022 life event enrollment for all other benefits.

Important: When you complete your 2021 life event enrollment and reach the “Thank You” page, you must click the yellow “Continue” button to complete your 2022 enrollment.

enroll October 1 through October 31, 2021

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 2022.
- 2. Go to mylacountybenefits.com.**
- 3. Log on** using your employee number and PIN that is on your Personalized Enrollment Worksheet.
- 4. Click** on the “Enroll or Make Changes” button to access your Enrollment Homepage, then click the Annual Enrollment link to start your enrollment.
- 5. Choose** your benefits. If you need to add or drop dependents, 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 screenshot of your confirmation number shown on the “Thank You” page.

Submitting Required Documentation



To guarantee coverage, you must submit all required documentation to the County Benefits Plan Administrator within **10 calendar days** from the date you enroll.

If you add a dependent, write your name, employee number, and your dependent’s Social Security number (SSN) on each document or certificate. Submit required documentation 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! Send *copies* of original documents only. Submitted documents will not be returned.

Important Enrollment Reminders

IF YOU...

THEN YOU MUST...

Switch medical plans

Provide SSNs for all eligible family members.

Add eligible family members

Provide SSNs and required documentation (e.g., certificates for birth, adoption, marriage). See page 2 of the *Enrollment Highlights Guide*.

Have dependents no longer eligible for coverage

Remove them from your medical and dental coverage, including an ex-spouse/domestic partner, ex-stepchildren, and any other ineligible family members.

If you do not submit the required documentation by the deadline, your dependents will not have coverage for 2022.

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 benefits 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 defraud 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.