

2025 OPEN ENROLLMENT

WATER LETTERA

Presented by Tacha Merritt | Acrisure November 13, 2024 & November 14, 2024 For the 2025 plan year, the Alliance will be keeping all current health carriers in place, with a slight change to the cost sharing for medical coverage.

- Benefits for 2025:
 - Medical coverage will remain with Anthem Blue Cross
 - Increase in employer HSA funding amount
 - Addition of health benefit stipend for eligible employees

Dental, vision, life insurance, disability, and flexible spending account benefits will remain the same as well.
 Implementation of Sonic Boom Wellness program

KEY TERMS REVIEW

Deductible

The amount you pay each year before your plan starts to pay



Copay

A flat fee you pay for covered services like doctor visits



Coinsurance

Your share of health plan costs (a percentage of total cost) after meeting your deductible



Out-of-pocket maximum

The most you have to pay out-of-pocket each year for health care services. Check your plan details to see if your deductible is part of your Out-of-Pocket maximum



Premium

The amount you pay via payroll deduction to belong to a health plan



HMO vs. PPO REVIEW

HMO

Health maintenance organization

Choosing a Primary Care Physician is one of the keys to using an HMO Plan.

Access covered services through a network directed by your Personal Physician. Coverage is available only when using an HMO provider.*

May be a good choice for those seeking comprehensive benefits with predictable outof-pocket costs.

PPO

Preferred provider organization

Allows you to receive covered services from any physician and hospital within the plan's network, and outside of the network for a higher share of cost.

Out-of-pocket expense may be higher than an HMO plan. Can control costs better by using network providers.

May be a good choice for those who prefer greater flexibility and freedom with how they seek care.



MEDICAL INSURANCE CARRIER

Anthem 🚳



HOW TO FIND AN IN-NETWORK PROVIDER

- Go to <u>Anthem.com/ca</u> and select "Find Care" on the top right corner
- Network Names
 - If enrolling in the HMO plan option, available to California residents, you will utilize the "CACare HMO" network.
 - All other plan options utilize the "Prudent Buyer" network.
 - If enrolling as an out of state employee, the network name for your access would be "National PPO BlueCard".
- If a provider is new to you, be sure to make sure that PCP is accepting new patients



ANTHEM HMO PLAN PROVISIONS

Plan Provision	Anthem HMO
Network	Traditional CACare HMO
Calendar Year Deductible	None
Calendar Year OOP Max	\$2,000/\$4,000
Primary Care Office Visit	\$20
Specialist Office Visit	\$40
Hospital Stay	\$250 copay per admission
Chiropractic	\$40; up to 30 visits
Acupuncture	\$40; up to 30 visits
Urgent Care	\$45
Emergency	\$100 copay per visit
Retail Rx	\$10/\$25/\$40
Mail Order Rx	\$20/\$50/\$80



ANTHEM PPO PLAN PROVISIONS

Plan Provision	Anthem PPO	
	In-Network	Out-of-Network
Network	Prudent Buyer	N/A
Calendar Year Deductible	\$250/\$750	\$750/\$2,250
Calendar Year OOP Max	\$2,500/\$5,000	\$7,500/\$15,000
Primary Care Office Visit	\$20	40% after deductible
Specialist Office Visit	\$20	40% after deductible
Hospital Stay	20% after deductible	40% after deductible
Chiropractic	\$20; up to 30 visits	40% after deductible; up to 30 visits
Acupuncture	\$20; up to 20 visits	Not covered
Urgent Care	\$25	40% after deductible
Emergency	\$150 copay per admission + 20%	\$150 copay per admission + 20%
Retail Rx	\$10/\$25/\$40	Not covered
Mail Order Rx	\$30/\$75/\$120	Not covered 8

ANTHEM PPO W/ HSA PLAN PROVISIONS

Plan Provision	Anthem PPO with HSA		
	In-Network	Out-of-Network	
Network	Prudent Buyer	N/A	
Health Savings Account Funding	\$750.00 or \$1,500.00 per quart	er (\$3,000 / \$6,000 annually)	
Calendar Year Deductible	\$3,000/\$6,000	\$3,000/\$6,000	
Calendar Year OOP Max	\$5,500/\$11,000	\$10,000/\$20,000	
Primary Care Office Visit	20% after deductible	40% after deductible	
Specialist Office Visit	20% after deductible	40% after deductible	
Hospital Stay	20% after deductible	40% after deductible	
Chiropractic	20% after deductible up to 20 visits	40% after deductible up to 20 visits	
Acupuncture	20% after deductible up to 20 visits	Not covered	
Urgent Care	20% after deductible	40% after deductible	
Emergency	\$150 + 20% after deductible	\$150 + 20% after deductible	
Retail Rx	Copay after deductible of \$10/\$25/\$40	50% after deductible	
Mail Order Rx	Copay after deductible \$30/\$75/\$120	Not Covered	



WHO IS ELIGIBLE FOR THE HSA PLAN?

- You must be enrolled in the Anthem PPO with HSA a qualified high deductible health plan
- Must not be claimed as a dependent on another person's tax return
- Must not be enrolled in Medicare
- Must not be enrolled in a Health Care Flexible Spending Account, but may enroll in a Limited Purpose FSA
- Family members must be tax-dependents to be eligible to use HSA funds



BENEFITS OF THE HSA PLAN

- Lower monthly premiums than traditional HMO and PPO
- HSA contributions are exempt from Federal income tax
- Unused funds remain in your account from year to year
- HSA funds are 100% portable if you leave the Alliance
- Funded by the employer (\$3,000/\$6,000) and employee (optional)
- Combined funding can't exceed \$4,300/\$8,550 for 2025
- Employees age 55 or older may contribute an additional \$1,000
- Use the HSA debit card to pay for eligible medical expenses, including deductible, coinsurance, dental, and vision
- You will be sent tax 1099 form and 5498 form for tax purposes



2025 EMPLOYEE COSTS PER PAY PERIOD – MEDICAL

Anthem Blue Cross HSA	Employee Pays Bi-Weekly
Employee Only	\$0.00
Employee + Spouse/DP	\$136.46
Employee + Child(ren)	\$111.69
Employee + Family	\$192.36
Anthem Blue Cross HMO	Employee Pays Bi-Weekly
Employee Only	\$23.75
Employee + Spouse/DP	\$208.97
Employee + Child(ren)	\$170.89
Employee + Family	\$294.46
Anthem Blue Cross PPO	Employee Pays Bi-Weekly
Employee Only	\$51.17
Employee + Spouse/DP	\$304.58
Employee + Child(ren)	\$249.20
Employee + Family	\$429.17

 Employee premiums paid over 26 pay-periods

 Employee premiums are pre-tax, except for nontax qualified domestic partner coverage



S Health Plan Credit for Eligible Employees in HMO

As part of our commitment to equity at the Alliance, we are providing a new Health Plan Credit for eligible employees enrolled in our HMO plan, which is our most popular and utilized mid-level insurance option.

Eligibility for the monthly credit is based on annualized base wages:

- Zone 1 below \$80,000.00
- Zone 2 below \$73,394.50
- Zone 3 below \$69,565.22

Health Plan Credit Amounts:

- Employee Only Coverage: \$50 Monthly HMO Health Credit
- Employee + Dependents: \$100 Monthly HMO Health Credit





• Employees <u>covered by other health insurance</u> are eligible for \$50 per pay period when opting out of the Alliance's medical coverage.

• Employees may still enroll in dental and vision coverage.



DENTAL INSURANCE CARRIER

DIRECT DENTAL ADMINISTRATORS, LLC



DENTAL INSURANCE PLAN PROVISIONS

Plan Provision	Direct Dental	
	In-Network	Out-of-Network
Preventative Care	100% 3 cleanings per year	
Basic Care	90% after deductible	80% after deductible
Major Care	60% after deductible	50% after deductible
Orthodontia	50% after deductible (Adult and Children)	
Deductible	\$50 per person, \$150 per family	
Maximum Benefits	\$3,000 per calendar year, per member	
Orthodontia Maximum Benefit	\$1,500 lifetime maximum, per member	



DIRECT DENTAL PPO NETWORK



- You may see any dentist that you wish with your Direct Dental Plan
- You can stretch your benefit dollars and reduce your out-ofpocket expenses by searching for a DHA network dentist:
 - DHA network dentists offer discounted rates for services
- Navigate to https://www.directdentalplans.com/ and select "Find a Dentist" to find a DHA provider near you
- Out of Network Benefits are paid according to the 90% Usual, Customary and Reasonable (UCR) Fees for the treating dental office zip code



VISION INSURANCE CARRIER





VISION INSURANCE PLAN PROVISIONS

Plan Provision	Vision Service Plan	
	In-Network	Out-of-Network
Well Vision Exam Copay	\$10	Plan pays up to \$50
Well Vision Exam Frequency	EVERY 12	2 MONTHS
Prescription Glasses Copay	\$25	N/A
Lens Replacement Frequency	EVERY 12	2 MONTHS
Single Vision	100% after copay Plan pays up to \$50	
Bifocal	100% after copay Plan pays up to \$75	
Trifocal	100% after copay	Plan pays up to \$100
Frame Replacement Frequency	EVERY 12 MONTHS	
Frame Allowance	Plan pays up to \$140	Included in lens allowance
Featured Frame Brands	Plan pays up to \$160	
Frame Discounts	20% discount above allowance	
Contacts Frequency	EVERY 12 MONTHS	
Contact Allowance	\$140	Plan pays up to \$105



2025 EMPLOYEE COSTS PER PAY PERIOD – DENTAL AND VISION

Direct Dental	Employee Pays Bi-Weekly
Employee Only	\$6.59
Employee + Spouse/DP	\$12.10
Employee + Child(ren)	\$14.86
Employee + Family	\$18.03
VSP	Employee Pays Bi-Weekly
Employee Only	\$0.00
Employee + 1	\$2.53

- Employee premiums paid over 26 pay-periods
- Employee premiums are pretax, except for nontax qualified domestic partner coverage



2025 FLEXIBLE SPENDING ACCOUNTS

- Pay for out-of-pocket health care and dependent day care expenses with pre-tax dollars
- You can save significantly on taxes as these amounts are deducted from your salary before tax withholdings are calculated
- All participants receive a debit card to conveniently pay for your eligible expenses throughout the year
- Three types of accounts: health care, limited purpose, and dependent care



benefit solutions

2025 FLEXIBLE SPENDING ACCOUNTS benefit solutions

Annual contribution limits are determined by the IRS:

- Health Care FSA maximum contribution is \$3,300 •
- Dependent Care FSA maximum contribution is \$5,000 •
- Limited Purpose FSA maximum contribution is \$3,300 •
 - For HSA Plan participants only
 - For dental and vision expenses only



2025 FSA RULES



- Requires an active election for each plan year
- If you currently participate, you must enroll again if you want to contribute to an account in 2025
- You must claim the dependent on your tax return for their expenses to be eligible
- "Use it or lose it rule"

2025 Plan Year	Health Care & Limited Purpose	Dependent Care
Rollover amount	\$660	\$0
Use it by	December 31, 2025	December 31, 2025
Claim it by	March 31, 2026	March 31, 2026



2025 FSA – ACCOUNT ACCESS







- Convenient on-line access to your account information at www.naviabenefits.com
- Order additional debit cards, update bank and address information, and see the details of your benefits.
- Navia Mobile App allows you to simply snap a photo and submit for reimbursement directly from your mobile device!





LONG TERM DISABILITY

- Elimination Period: 90 days
- Monthly benefit: 60% of your monthly earnings, up to \$12,000
- EAP and Travel Assistance Programs

LIFE AND AD&D

- 1.5x your base salary, up to \$215,000
- Life plan doubles if you pass away as a result of an accident
- Life planning and financial and legal resources





VOLUNTARY LIFE INSURANCE

- Employee Benefit
 - Minimum | \$25,000
 - Maximum | 5x annual salary up to \$150,000
 - Guarantee Issue | 5x annual salary up to \$150,000
- Spouse Benefit
 - Minimum | \$25,000
 - Maximum | 100% of the employees' benefit, up to \$50,000
 - Guarantee Issue | 100% of the employees' benefit, up to \$50,000
- Children Benefit
 - Minimum | \$10,000
 - Maximum | 100% of the employees' benefit, up to \$10,000
 - Guarantee Issue | 100% of the employees' benefit, up to \$10,000

EOI Required





VOLUNTARY SHORT TERM DISABILITY INSURANCE

- Additional 20% of weekly earnings, up to \$2,500
- 7 day elimination period
- Maximum benefit period of 12 weeks





VOLUNTARY ACCIDENT INSURANCE

- Provides a lump-sum cash benefit for injuries that you or an insured family member sustain as a result of an accident.
- \$50 health screening benefit per calendar year
- "Off the Job" coverage only
- Benefit Maximum: \$10,000 annually
- Sample Benefit Payments:
 - Emergency Room | \$200
 - Ambulance | Up to \$1,500
 - Hospital Admission | \$1,500
 - Hospital Confinement | \$300 per day
 - Physician Follow-Up Visit | \$75; up to 6 per incident
- Portability Option





VOLUNTARY CRITICAL ILLNESS INSURANCE

- Provides a lump-sum cash benefit upon diagnosis of a critical illness
- \$50 health screening benefit per calendar year
- Benefit Maximums:
 - Employee | \$10,000
 - Spouse | \$10,000
 - Child(ren) | \$3,000
- Guarantee Issue Amounts:
 - Employee | \$10,000
 - Spouse | Up to 100% of employees elected amount
 - Child(ren) | Up to 25% of the employees elected amount
- Sample Benefit Payments:
 - Heart Attack | 100% of elected amount
 - Major Organ Transplant | 100% of elected amount
 - Cancer | 100% of elected amount
 - Bone Marrow Transplant | 50% of elected amount
 - Benign Brain Tumor | 25% of elected amount



HEADSPACE

IN-THE-MOMENT CARE FOR EVERY EMOTION

 Headspace provides the world's first integrated mental healthcare system where coaches, therapists, and psychiatrists work to coordinate the best, personalized care right from your smartphone.





- Employee discount program
- Web and Mobile App
- Savings on everyday items, travel, and more:



EMPLOYEES SAVE UP TO 50% ON:

This is in addition to Working Advantage!







For the sheer joy of living a healthier life. Get ready for an experience that's all about celebrating health in every aspect of your life. Keep an eye out for something special coming your way.

- Earn Rewards
- Health Risk Intervention- personalized strategy for lifestyle change and proactive prevention to transform employees' health
- Participate in **Daily Challenges** Each challenge combines an "a-ha!" educational moment with a relevant and specific call-to-action.
- Caught Ya- Self-catches are among our most popular posts!
- Create or join **Contests-** who doesn't love a little competition.



Do you know the benefits of a Roth 457 Deferred Compensation Plan?



 Beginning on December 1st, 2024, Roth contributions will be available as a deferral option in your CCAH 457 Plan.

• There are great benefits to contributing to a Roth 457 plan! Learn about these benefits and how easy it is to make Roth contributions into the same 457 plan you already have.

 Education session will be held on December 17 at 1:00 PM.

 For more information on this topic, visit the Benefits Site on ACE.



Open Enrollment Next Steps





• Login to Paycom Employee Self-Service

If you do not remember your Paycom password:

1.Use the Forgot Password option 2.If you continue to run into issues, email ListHRRepresentatives@ccahalliance.org

 Under Benefits, click 2025 Benefits Enrollment, then click Continue Enrollment



2025



\$0.00 \$18.03 \$6.69 \$0.00

\$0.00

\$7.87 \$18.69 \$6.23 \$0.92

Eligible Years	BUFFET, PHOEBE (0007)	ACTIONS -	2025 Benefit Enrollment
2025 Enrollment	Eligibility Profile Preview Date Enrollment Year California 11/13/2024 2025 Employees 30+ Hrs/Wk (CAF)		\$58.43 Total Cost Per Pay Period
	To complete enrollment, press Finalize then Sign and Submit.		Contact Information Dependents and Beneficiaries
	Hello Phoebe, Here are tips for enrollment.		Medical
	Make sure you have all dependent and beneficiary information necessary. If you have not entered dep need their social security number and date of birth.	endents before, you will	✓ Vision Flexible Spending Account - Health Care
	2 To get started, click Start Enrollment.		FSA Dependent Care
	3 You also can choose an enrollment section in the progress bar to jump to that particular section.		✓ Basic Life and AD&D
		INUE ENROLLMENT	 Basic Long Term Disability Voluntary Short Term Disability
			Voluntary Term Life and AD&D
			✓ Voluntary Spousal Term Life and AD&D
			Voluntary Child Term Life and AD&D
			Voluntary Critical Illness - Employee Voluntary Accident Insurance
			REVIEW





PERSONAL INFORMATION

Review your personal information to ensure accuracy

• If a change is needed, click Edit and follow the prompt

Employee Name	Birth Date
BUFFET, PHOEBE	01/01/1980
Primary Phone	
+1 (831) 430-5500	
Street address	Apt/Suite/Other
1600 GREEN HILLS RD, STI	101
City	State
SCOTTS VALLEY	CALIFORNIA
Zip Code	Personal Email
95066	smellycat@gmail.com
ſ	
	PREVIOUS EDIT NEXT





DEPENDENTS AND BENEFICIARIES

Before electing individual benefits you will be given the opportunity to add or edit dependents and beneficiaries

<u>Dependent</u>: An individual who will be covered under your health insurance benefits

Review Policy #101-1008 - Health Insurance Dependent Eligibility

<u>Beneficiary:</u> An individual who will receive Life and AD&D Insurance payment

All employees must designate a beneficiary within Paycom





SUMMARY PAGE

- Shows a snapshot of your current enrollment by plan
- Option to Enroll/Decline benefits

If you know you do not want to enroll in a specific benefit, you can decline on this page





BENEFITS ENROLLMENT



- On each benefit enrollment page, there is a link to view Plan Documents, as well as a grey box that expands to give more information about each benefit offering
- Be sure to select the check-box next to the plan that you are choosing, or next to Decline Coverage if you would not like that type of insurance







BENEFITS ENROLLMENT

 As you enroll in benefits, your total cost per pay period will update automatically

📕 📕 paycom®

- You can click back into each benefit from this side bar to make changes
- Ensure each line has a or x
 before hitting Finalize





FINAL SUMMARY PAGE

- Once you enroll/decline each benefit, you will be taken to a summary page; carefully review your benefit choices
- If you are satisfied with your enrollment, click Finalize then Sign and Submit to complete enrollment





THINGS TO KNOW

- Open enrollment is from November 13 November 27, 2023
 - Everyone is required to go through the enrollment process in the Paycom portal to elect benefits for 2025
 - A qualifying event will be needed to make changes once coverage is finalized, signed and submitted
- Coverage will begin on January 1, 2025 and continue through December 31, 2025



Questions?

