

**OPEN ENROLLMENT – January 1st, 2023**

October 10th, 2022 – November 4th, 2022

Open Enrollment has begun! The 2022 Open Enrollment period allows you to make changes to your benefits that will take effect on **January 1st, 2023**. Open enrollment is the only time each year you can change your benefit elections without a reason. Outside of open enrollment, you must have a Qualifying Event to make changes to your benefits. More information on Qualifying Events is included below.

Now is the time to review your plan options so you can make informed benefit decisions. Review the plan offerings and premium contributions, then select the options that are right for you and your family. Decisions regarding healthcare are among the most important choices you will make to maintain your quality of life.

Think about anything that’s changed in the past year and changes that you are anticipating for the next year. Did you get married or are you expecting a baby? Have you or anyone in your family developed a chronic health condition? If so, you might need to make some changes to your current plans.

Your plan information can be found at:

<https://epcschools.org/health-benefits/districts/grant-ctc>

**See last page for list of monthly insurance premiums.**

**Let’s Get Enrolled!**

During open enrollment you will make your benefit elections in Benelogic, the EPC‘s online enrollment system. You can also review or update your life insurance beneficiaries.

The Benelogic site is <https://epc-online.benelogic.com/>

For help with Benelogic go to [How to use Benelogic for Open Enrollment](https://epcschools.org/health-benefits/benelogic)

Once you have submitted your benefit elections and the enrollment deadline has passed, you will not be able to make changes until the next Open Enrollment period unless you have a Qualifying Event.

**My Life Changed!**

During the plan year, you may experience a Qualifying Event that allows you to make changes to your current elections. The change must be made **within 31 days of the event**. Information regarding your special enrollment rights is contained in the General Health Notices-Special Enrollment Rights. Some of the Qualifying Events are listed below:

Marriage Divorce Birth/Adoption Death Loss of coverage

**Who can I cover on my health plan?**

**Spouse** - Your legally married (including same sex) spouse, not legally separated or divorced. **If covering your spouse, you are required to recertify at open enrollment by completing the Spousal COB form.** For a copy of the form, go to <https://epcschools.org/wp-content/uploads/2021/09/Clermont-County-Insurance-Consortium-Health-Plan-Spousal-Form-6-1.docx> *Please also include a copy of your spouse’s ID card if they are covered under another plan. Return this form to the Treasurer’s Office.*

**Children** - Your or your spouse’s natural or adopted child and/or a child for whom you are the legal guardian up to age 26.

**Disabled Child Aged 26 or Older:** Children who are mentally or physically disabled and totally dependent on the Employee for support, regardless of age. Additional paperwork may be required.

**What documentation do I need for my dependents?**

Documentation is required to enroll **new** dependents on your benefit plans. These documents need to be submitted **within 31 days** of the enrollment event. All dependents must be enrolled with their legal name and have an SSN and date of birth. *Coverage for new dependents will be terminated if the required documents are not submitted.*

**Spouse** – marriage certificate **AND** front page of most recent 1040 tax return (black out financial data).

**Children** – birth certificate and adoption decree or legal guardianship paperwork from the courts (if applicable)

**Disabled Children** – please see your HR/Treasurer’s office for required document

**What if I’m getting close to retirement?**

It’s never too early to start planning for a happy and healthy retirement. Please register for a free retirement planning webinar with [RetireMed](https://www.retiremed.com/b5). They will inform you about retirement health plan options, including STRS and SERS. Medicare eligibility should be researched at least six months *prior* to turning age 65, regardless of when you plan to retire.

**HSA Eligibility**

If you have an HSA account and want to continue contributing and receiving any Board contribution, you cannot be covered by any other healthcare plan, including Medicare Part A, unless the other healthcare plan is another HSA plan. Contact your Treasurer’s Office if you have any questions.

**What’s new this year?**

**Dental**

There are additional cleanings for certain diseases when that disease does not allow the patient to complete the full cleaning at one sitting. Ask your dentist for more details.

**Vision**

There is a separate benefit for contact fitting exams. The exam no longer applies to the contact allowance but is covered under a separate benefit.

Walmart, Sam’s and Costco are now in-network.

**[Required Notifications](http://www.epcschools.org/Districts.html)**

General Health Notices - Includes GINA, Special Enrollment Rights, WHCRA

Medicare Part D Notice

CHIPS Model Notice

EPC Privacy Notice

**Employee Monthly Insurance Premium (20%)**

**Medical - Anthem**

**HDHP PPO**

Single $134.46 Single $145.98

Family $369.12 Family $400.74

**Dental – Delta Dental**

Single $17.54 Family $17.54

**Vision – VSP**

**Option 1 Option 2**

Single $7.77 Single $9.87

Family $18.09 Family $23.09

If you have questions about open enrollment, please ask. Start reviewing your benefit plan materials today and make your elections before the enrollment period ends!