

OPEN ENROLLMENT – January 1, 2024

October 16 – October 31, 2023

Open Enrollment is here! The Open Enrollment period allows you to make changes to your benefits that will take effect on January 1, 2024. 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 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 HERE

Let's Get Enrolled!

Medical-Dental-Vision-Life-Voluntary Life

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 <u>https://epc-online.benelogic.com/</u>

For help with Benelogic go to How to use Benelogic for Open Enrollment

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.

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 <u>new</u> 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. (Documents can be uploaded into your File Cabinet in Benelogic.) *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 documentation

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 <u>RetireMed</u>. 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 Limits & Eligibility

If you are enrolled in an HSA plan you will need to update your HSA payroll deductions. If you are enrolling in an HSA for the first time you will need to open the HSA account.

\$4,150 single \$8,300 family \$1,000 over age 55 catch-up

If you are enrolled in an HSA plan and want to continue contributions to your HSA account (including 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.

More information about HSA accounts can be found HERE

What's new this year?

Medical

There are no changes to the medical plan.

Pharmacy

As of January 2024, CVS/Caremark will collaborate with GoodRx for a GENERIC drug. When you fill a generic prescription, CVS will automatically check the cost under GoodRx, and if the Good Rx price is less than the CVS price, the GoodRx price will apply. You will not have to choose, and you will not have to file any additional claim form for the Good Rx pricing. This does not apply to brand name drugs. If you want to use GoodRx pricing on brand name drugs you will have to file a paper claim with CVS/Caremark for that drug to be covered under the plan.

Dental

There are no changes to the dental plan.

Vision

There are no changes to the dental plan.

WELLNESS

EPC offers wellness benefits through the <u>EPC Wellness Plan</u> at no cost to employees or the district:

- Lark for Anthem members, along with spouses and adult dependents. Lark is an Alpowered health coach that provides personalized support for various wellness goals, including weight management, nutrition, physical activity, and stress management. It offers real-time feedback and guidance to help users make positive lifestyle changes.
- **Employee Assistance Program** This is available to all EPC Plan districts. No cost crisis counseling 24/7, financial, legal consulting, child, and elder resources. This is provided through Anthem, but it is available to all UHC districts as well.
- **Hello Heart** For all members enrolled in the medical plan, as well as spouses and adult dependents. This is a digital support program for members with high blood pressure and comes with a blood pressure monitor that connects to the app on your phone.

Additional grant money is available to the district to support more wellness programming.

Required Notifications

- General Health Notices Includes GINA, Special Enrollment Rights, WHCRA
- Medicare Part D Notice
- CHIPS Model Notice
- EPC Privacy Notice
- No Surprise Billing Notice

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!