Human Resources Department

Open Enrollment

2024 Plan Year



Everyone Must Take Action!

Even if you are not changing any benefits, you must make benefit elections for the 2024 plan year.

You will have to go to Employee Self Service (ESS), review your benefits and select:

- Decline benefit
- No change
- Make New Election

You must submit your choices even if you are not changing your benefits.

Open Enrollment

- Open enrollment will be Oct. 30 Nov. 15, 2023
 - There is a change to employee coinsurance costs. The new cost will be \$95 for Employee Only and \$116 for Employee + Dependents for 2024
- This is the time to make changes to your benefits
 - Renew/start flexible spending accounts
 - Add/drop eligible dependents
 - Opt-out of health or dental coverage
 - Review/change current voluntary benefit elections
 - Life and ADD insurance, Aflac, LegalShield
- Some changes are "always available"
 - Many voluntary benefits can be changed any time during the year
 - Life and ADD insurance, post tax Aflac, Deferred Compensation



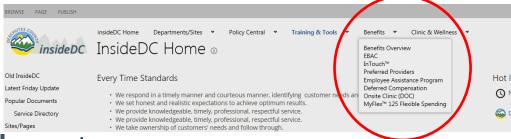
Open Enrollment Resources

- insideDC Benefits tab
 - Viewable from any County computer year round

Detailed benefits information including plan documents, forms and

reference materials

Available year round



- Deschutes.org Open Enrollment page
 - Viewable from any computer with an internet connection
 - Under the Human Resources department tab
 - Detailed instructions for the 2024 plan year open enrollment
 - Supporting documents for open enrollment



Flexible Spending Accounts (FSA)

- Must reenroll every year in FSA's
- You will enroll through ESS. No paper forms.
- Limit for the HRE will increase for 2024.
 - \$3,050/year (\$254.16/month) for Health Related Expenses (HRE)
 - \$5000/year (\$416.66/month) for Dependent Care Expenses (DCE)
- IRS allows up to \$610 rollover on HRE accounts
 - Must reenroll to have a place for the rollover to go



PacificSource Services

InTouch for Members

- Look up coverage information in your member handbook/policy or read benefit summaries.
- Look up claims.
- View explanations of benefits.
- Review your family's enrollment history.

- Check your deductible and out-of-pocket status.
- Track prior authorizations.
- Look up your share of your family's healthcare expenses.
- Estimate healthcare costs using our Treatment Cost Navigator.

myPacificSource Mobile App

- www.PacificSource.com/mobile
- Deschutes County Landing Page
 - www.PacificSource.com/DeschutesCounty



Livongo Diabetic Management

- Livongo: A New Approach to Diabetic Management
 - Available free to health plan members diagnosed with type 1 or type 2 diabetes.
 - This is a pilot program implemented January 2023
 - Our benefits consultant has provided a review of the pilot program and recommends continuations for another year
- Livongo Member Site
 - https://www.livongo.com



Other Insurance Services

- Found on insideDC under Human Resources > Employee Resources > Other Insurance Services tab
- Aflac
- Group Life, Accident and LTD Certificates
- New York Life (free) Value Added Programs
 - Secure Advantage (Money Coaching, Identity Theft, Will Preparation)
 - Secure Travel Program
 - Financial-Legal Support
- LegalShield



Retirement Planning

Deferred Compensation (457 Plan)

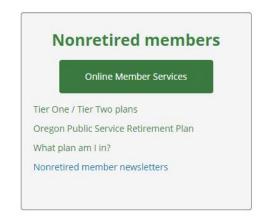
- Contact the account representative anytime during the year to establish a deferred compensation account or for questions regarding your existing account.
 - MissionSquare Retirement www.missionsq.org (800) 669-7400
 - Empower Retirement <u>www.empower.com</u> (866) 816-4400
 - Nationwide Retirement Plans <u>www.nrsforu.com</u> (888) 401-5272
- Once you have an established account you can make changes any time through ESS.



Retirement Planning

PERS

- Go to the PERS website to view more information about your PERS retirement benefits www.Oregon.gov/PERS
 - Online Member Services:
 - Prepare online estimates
 - Other links:
 - Enroll in PERS education sessions
 - Step-by-step retirement application instructions
 - Answers to many PERS questions





National Provider Network - Aetna

- PacificSource has moved their entire book of business to the Aetna network for services outside of the regional 4-state Navigator Network.
- This allows for continued in-network coverage throughout the United States.
 - * Previous national network was First Health

Medical Plan Copays

- The first three visits per plan year combined for Professional Service Office visits, Telehealth visits, and Mental health and Substance Use Disorder Services office visits will be \$5.00 each.
- Subsequent visits will follow normal cost share guidelines. Currently \$25.00
 - * Copays at the doc and doc wellness are and will remain \$0.00



Diagnostic Breast Examinations

- A mammogram, MRI, and ultrasound for Diagnostic Breast Examinations or Supplemental Breast Examination are paid at no cost share when provided by an In or Out-of-Network Provider
- This expands preventative coverage beyond mammograms and now includes MRI and ultrasounds for diagnostic and/or supplemental breast exams

Mental health and Substance Use Disorders

- Amended plan language in all sections that cover Mental Health and Substance
 Use Disorders to clarify and align plan language with state legislation and
 guidance for mental and behavioral health benefits.
- This aligns our plan with the current Behavioral Health Parity rules.



Pediatric Hearing Aids

- The plan will cover pediatric hearing aids (ages 18 and younger or 19-25 if enrolled in secondary school or an accredited education institution) limited to one hearing aid per ear every 24 months.
- The cost share is 20% for in-network and 40% for out-of-network. No deductible applies

Remove Benefit Exclusion - Abortion

- Remove the plan exclusion for abortion
- PacificSource identifies this as a State mandated covered benefit and recommended removing the exclusion for these services to be in compliance.
 DC legal is of the opinion the abortion coverage may not be excluded from the upcoming health benefits plan year

- PacificSource did recommend language changes to help clarify our plan documents
 - Language changes do not cause any changes to coverage on the Medical or Dental plans.
 - Recommended changes can be found in the Recommended plan changes sheet on the Open Enrollment webpage.
- Employee health benefit cost share and tiers
 - Establish a two-tier cost share structure for employees:
 - Employee (EE Only) \$95/month (\$90 med/vis/Rx and \$5 dental)
 - EE + Dependents \$116/month (\$111 med/vis/Rx) and \$5 dental)
 - This aligns with the recent 29% increase to department charges effective 7/1/2023.
 - Employee rates have not increased in the past 10 years.



PY 2024 DEFFERED COMPENSATION

Changes Made During Open Enrollment

- Changes made during open enrollment are effective Jan. 1, 2024
- You can make changes for December 2023 through the regular process.
 - * Reminder that changes must be submitted through ESS the month prior to the effective date. If no further change is received, a December change will carry forward into 2024 until you make a new change.

Submitting Changes – New for 2024

- Beginning in 2024 you will be able to submit changes in the month you want the change made.
- You will no longer need to submit changes the month prior.



PY 2024 Voluntary Life & AD&D

Rates

 The Voluntary Life and ADD&D rates will not change for the 2024 plan year.

Increasing Coverage Amounts

- The only voluntary life insurance increase that is not subject to medical underwriting during open enrollment is up to \$20,000 increase to Employee and/or Spouse Voluntary Life, and only if your current coverage amount is less than \$100,000 for employee or \$30,000 for spouse.
- All other increases or new coverage requests for an employee and/or a spouse will require medical underwriting by NYL to determine insurability. Medical underwriting will occur after open enrollment is complete.

PY 2024 Voluntary Life Reminder

Voluntary Life Guaranteed Issue During Open Enrollment

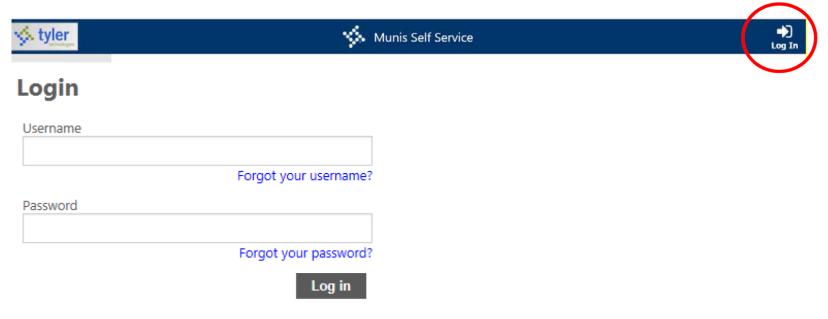
Adding the ability for employees and/or spouse to add or increase coverage up to 2 units (\$20,000) without evidence of insurability up to \$100,000 for employee or \$30,000 for spouse.

- Each year at open enrollment, all eligible employees can elect or increase their coverage and/or their spouses coverage up to 2 units (\$20k) without medical evidence of insurability (medical questionnaire).
- This applies to employee and/or spouse voluntary life only.
- Amount can be increased year over year at \$20,000 increments up to the maximum guaranteed issue amount of \$100,000 for employee or \$30,000 for spouse without medical evidence of insurability.

- As a reminder, this is the employee portal to the Munis system
- Ability to view all of your personal employee information in one spot
- Will be able to request changes to personal and demographic information, benefits and tax elections
- Ability to submit "life event" changes
- We will be using the ESS portal for 2023 open enrollment



In preparation for Open Enrollment, be sure you can login to your ESS: https://selfservice.deschutes.org/ess/

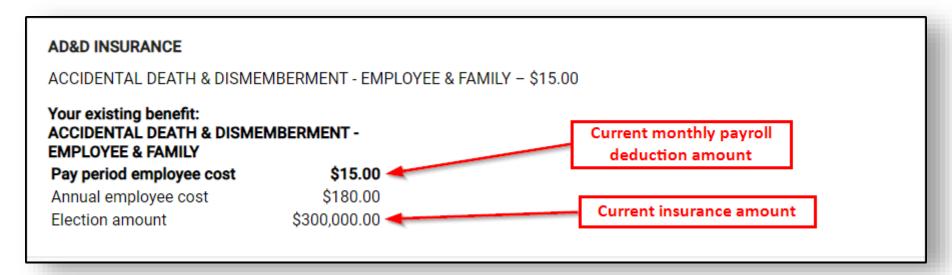


Your Username is your 4-digit employee ID

Refer to the ESS user guide if you need help logging in

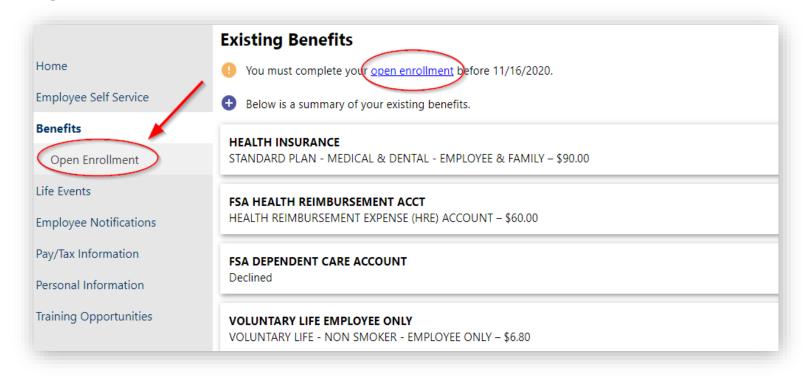


Once you are logged in, navigate to the Benefits tab and review your current benefits elections.



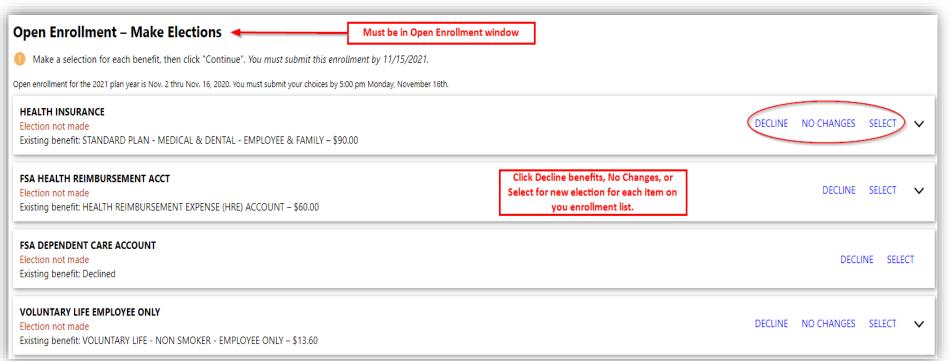


Once you are logged in, navigate to the Benefits tab and click on the Open Enrollment link.



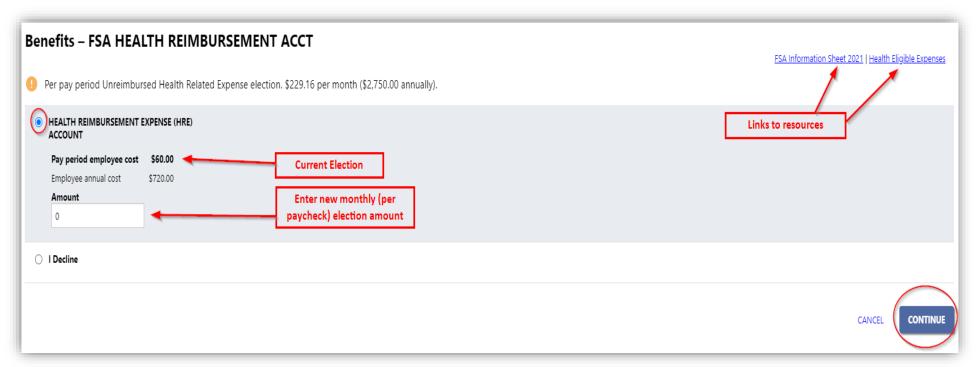


Select DECLINE benefit, NO CHANGES or SELECT to make new election for each item then click continue.



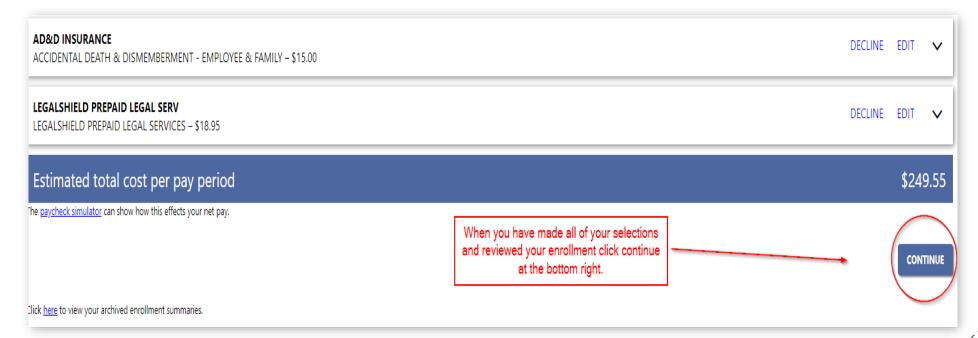


Each benefit will have its own election page. Make your election and click continue. Note that elections will have maximum amounts.

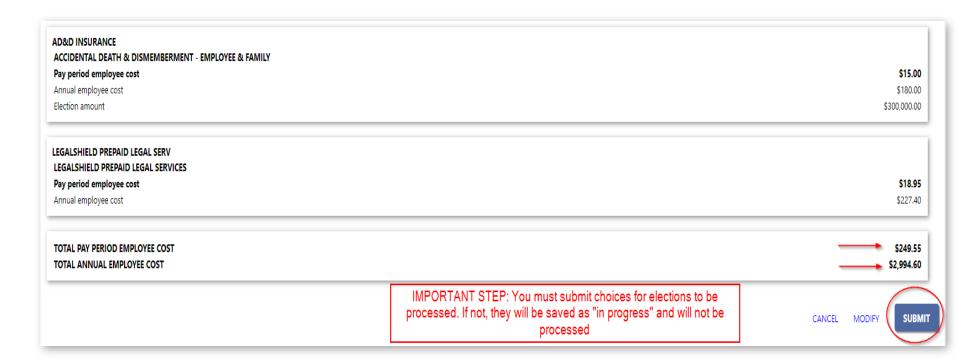




Review enrollment and submit choices. Modify if necessary.



Submit choices to Human Resources for processing.





Be sure you receive the Confirmation notice. You can make changes to submitted elections until 5 pm on Wednesday, November 15th.

