



San Joaquin
COUNTY
Greatness grows here.

Welcome To
Benefits Orientation



SJC Human Resources
Employee Benefits Office



Benefits Information:

Hotline: (209) 468-9987
Fax: (209) 468-9734
Info: www.sjgov.org/department/hr/benefits
Email: employeebenefits@sjgov.org
Address: 44 N. San Joaquin Street, Suite 330

Contact us for assistance with your benefits!

County Benefits for Full Time and Part Time Employees	
Full Time Employees	Part Time Employees
Medical, Dental, Vision Eligible as soon as 2-weeks after hire date if all necessary paperwork is submitted timely	Medical Only: After 1-year anniversary, if requirements are met for hours worked
Employee Assistance Program (EAP): Available to all upon date of hire	
Basic Life Insurance	
Voluntary Life Insurance Access to additional life insurance at employee's expense	

County Benefits for Part Time Employees	
Average Hours Worked/Week (25-29.9 Over Lookback Period)	Average Hours Worked/Week (30-39.9 Over Lookback Period)
Plan C* San Joaquin General Hospital Only	All Plans that are available to FT Select Select-Exclusive Premier Kaiser (HMO and HDHP) Sutter Health Plus (HMO & HDHP)
County pays up to 80% of premium for employee-only coverage	
No spousal coverage	
Dependent children can be enrolled, however at employee's expense	

County Paid Premiums for Employee Medical Coverage	
The County pays a majority portion of premiums:	
Medical:	Up to 80%; <i>Premier Plan enrollees pay more</i>
Dental:	100% employee-only for Core and Standard Plan; Employee pays for dependents
Vision:	100% employee-only for Base Plan; Employee pays for dependents
Summary Plan Descriptions and premiums are available at: sjgov.org/departments/hr/benefits	

County Paid Premiums for Dependent Medical Coverage	
Select, Kaiser, and Sutter Health Plus Plans:	
County pays 80% of medical premiums Employee pays 20% of premiums	
Premier Plan: County pays the corresponding Select Plan premium, and the employee pays difference	
Example:	
Select Family Tier:	Total Premium = \$1,933.69 County portion= <u>\$1,546.95</u> Employee biweekly cost= <u>\$ 386.74</u>
Premier Family Tier:	Total Premium= \$2,096.04 County portion= <u>\$1,546.95</u> Employee biweekly cost= <u>\$ 549.09</u>

County Offered Benefit Options

7 Medical Plan Options:

Select Exclusive

- Health Care Services Only (San Joaquin General Hospital)

Select

- Anthem Prudent Buyer Network limited to 3 Counties: San Joaquin, Sacramento, and Stanislaus

Premier


- Anthem Prudent Buyer Network

Kaiser

- HMO
- High Deductible Health Plan

Sutter Health Plus

- HMO
- High Deductible Health Plan



Select Plan Highlights

- Administered by Lucent Health
- Member Services (877) 789-8488
- Members must choose a Primary Care Physician from the Anthem Prudent Buyer network, and providers are limited to three (3) Counties: Sacramento, San Joaquin, or Stanislaus
- Deductible \$250 per person, maximum \$500 per family per plan year

Select-Exclusive Plan Highlights

- Administered by Lucent Health
- Member Services (877) 789-8488 for claims questions
- Members must choose a Primary Care Physician from the Health Care Services
- Deductible \$125 per person, maximum \$250 per family per plan year
- Contact Member Services to change your PCP, any time
- PCP authorizes referrals to specialists
- One yearly OB-GYN appointment w/out referral

Select Plans Co-Payments

Office Visits	\$ 10
Office Visit (SJGH*)	\$ 5
ER Visits	\$100
ER Visits (SJGH*)	\$ 40



*San Joaquin General Hospital (SJGH)
Employee Health Services

Select Plans Rx Co-payments

Generic Drug	\$ 5
Brand Name Drug	\$ 15
Non-Formulary is not covered	



Premier Plan Highlights

Larger coverage area – Anthem Prudent Buyer Network;
◦ Anthem Blue card for out-of-state services

Deductible \$125 per person/\$250 per family

Rx co-pays is \$5 generic/\$10 brand/\$30 non-formulary

Office Visit co-pay is \$5

Kaiser Permanente

HMO Highlights

Office visit co-payments is \$10

Prescription co-pay, \$10 generic/\$20 brand


Emergency Room visit co-pay is \$100

Members must use Kaiser facilities

Contracted with Dignity Health -St Joseph's



KAISER PERMANENTE®



KAISER PERMANENTE®

Kaiser Permanente

HDHP Highlights

Deductible is \$1,500/individual and \$3,000/family

Max out-of-pocket is \$3,000/individual and \$6,000/family

Doctor visits: 10% coinsurance after deductible is met

Inpatient Hospital and Emergency room: 10% coinsurance after deductible is met

Prescriptions: \$10/generic; \$30 preferred; 10% specialty

Sutter Health Plus


HMO Highlights

Office visit co-payments is \$10

Prescription co-pay:
\$10 tier 1 / \$20 tier 2 / \$40 tier 3 & 4

Emergency Room visit co-pay is \$50

Members must use Sutter Health facilities



Sutter Health Plus
Your Health Plan



Sutter Health Plus HDHP Highlights

Deductible is \$1,500/individual and \$3,000/family

Max out-of-pocket is \$3,000/individual and \$6,000/family

Doctor visits: 10% coinsurance after deductible is met

Inpatient Hospital and Emergency room: 10% coinsurance after deductible is met

Prescriptions: \$10/generic; \$30 preferred; \$60 non-preferred;
and 10%/specialty

Health Savings Account (HSA)

Can only participate in an HSA if you are enrolled in a HDHP

The County will contribute \$700/year for a single employee, and \$1,400/year for an employee with dependents, into an HSA account established in your name. Contributions are prorated over 26 pay periods.

An HSA is a tax-advantaged savings account that allows enrollees to pull funds out tax-free when used for approved medical expenses.

The IRS establishes the maximum amount that can be tax deferred into an HSA each year. For 2022, it is \$3,650 for a single, and \$7,300 for a family.

Dental Plan Options

The County has 4 Different Dental Plan Options

- **United Healthcare Dental**
Dental Health Maintenance Organization (DHMO)

- **Delta Dental:**

- Standard
- Core
- Buy-Up





Delta Dental

Standard



Percentage Plan

- 80% Paid by Plan for most services
- 50% Bridges, Partials & Dentures

\$3,000 Max Per Family Member-Per Calendar Year


Each member of your family may choose their own individual dentist

Large network of providers to choose from

Children Orthodontia under 18 (50%, \$1,200 lifetime max)


May change providers without contacting Delta Dental

Member's SSN/Group # is ID; no ID cards



Delta Dental

Core & Buy-Up



Benefits same as Standard with these differences:

Core (only differences between Standard Plan):

- Orthodontia is not covered for any enrollee
- Dental implants is available to all enrollees (at 50%)

Buy-Up (only differences between Standard Plan):

- Orthodontia is available to all enrollees
- Dental implants are available to all enrollees (at 50%)

All Delta Dental plans do not have a Member ID Card



Vision Service Plan - Base

One eye exam every 12 months

- Co-Pay for eye exam, \$10

Lenses/frames and contacts every 24 months

- Co-Pay for lenses & frames, \$25
- Allowance for frames, \$150
- Featured brand names, \$170 (up to)

Laser surgery Discount Plan

- Contact V.S.P. for details

No Member ID Cards





Vision Service Plan Buy-Up


Same benefits as Base Plan, except:

- Lenses and frames every 12 months
- Allowance for frames/contacts, \$200
- Sunglasses option, \$200



Who are Eligible Dependents?

- **Legal Spouse**
- **Registered Domestic Partners**
 - Certification must be from the State of California
- **Natural/Step/legally adopted children, and domestic partner's children (up to age 26)**
- **Any other child for whom a Court has issued a Qualified Medical Child Support Order**
- **Children with a qualifying disability may remain on the plan beyond age 26 (disability verified)**



What is Required for Enrollment?

Marriage Certificate

Certificate of Domestic Partnership from State of CA

Birth Certificate/Adoption/Legal guardianship papers

Social Security number (per ACA law)



**Required documentation MUST
be provided before enrollment forms
can be processed!**

When Can You Make Changes?

**You can make changes outside of open enrollment
when one of the following life events occurs:**

- Marriage; Registered Domestic Partnership
- Divorce; Termination of Registered Domestic Partnership
- Birth of a child / Adoption / Comply with a Qualified Medical Child Support Order issued by the courts (only if dependent is qualified)
- Gain/Loss of other coverage for dependents
- Death
- Dependent no longer eligible



- Late/retroactive changes not allowed based on IRS requirements
- Enrollment forms & supporting docs are required for any changes
- All changes have to be received within 60 days of event

San Joaquin County Basic Life Insurance

**The County pays for basic life insurance coverage for
employees only, based on years of service:**

Service and Coverage Level:

1 year	\$ 1,000
3-4 years	\$ 3,000
5-10 years	\$ 5,000
10+ years	\$10,000



Additional and Supplemental Term Life Insurance and AD&D Coverage

Employees may purchase additional term life insurance, offered at group rates, in increments of \$25,000, to a max of \$200,000.

Additional life insurance is guaranteed issuance up to \$100,000, if enrolled within first 31 days of hire.

Employees in Exempt, Senior/Middle/Sheriff's Management, Sergeants, and Confidential units also receive supplemental life insurance in accordance with their respective MOU/Resolution.

Additional Term Life Insurance and AD&D Coverage

In effect for duration of employment, if premiums continue to be paid.

Is portable or convertible after separation from San Joaquin County.

Spouse/dependents cannot be enrolled but, can be listed as beneficiaries.

Please ensure to keep your beneficiary information UP-TO-DATE!

Voluntary Insurance Products Offered

Chimienti	American Fidelity
Life Insurance: Universal, Term, or Whole	Short & Long Term Disability Insurance (Guaranteed issuance for new hires up to \$4,000 monthly benefit)
Critical Illness	Critical Illness
Cancer Plan	Accident Insurance
	Hospital Indemnity

For more information, please contact the County's vendors at:

Chimienti & Associates (877) 733-1670; or
American Fidelity (800) 450-3506, ext 8661

State Disability Insurance (SDI)


CA SDI program provides short-term disability insurance and paid family leave wage replacement benefits to eligible workers.

You receive approximately 60% of your income

All non-safety employees (with the exception of Department Heads and Elected Officials) participate in the state's short term disability program.

1% is deducted from your paycheck to fund the benefit

Use for your own non-work related illness, injury, pregnancy, baby bonding, or to care for a seriously ill family member.



Employee Assistance Program (EAP)

Provided free of charge to employees & dependents

First five visits are at no cost

Assessment and Counseling

Family Relationships

Alcohol or Chemical Dependency

Contact MHN at: members.mhn.com
(800) 242-6220; County Code: sanjoaquin
Available 24/7



Section 125 Flex Plans

An IRS Regulated Plan

Decreases your taxable income via pre-tax deductions

There are 3 ways to participate:

Premium Conversion: Medical, Dental & Vision premiums are automatically deducted from your paycheck on a pre-tax basis.

Dependent Day Care: Up to \$5,000/year of pre-tax money can be used for eligible dependent care costs.

***Flexible Spending:** 2022: Up to \$2,850 of pre-tax money can be used to pay eligible out of pocket medical/dental/vision expenses. (Amount is pro-rated if enrolling as a new hire.)

Claims are filed through **American Fidelity:** Website: americanfidelity.com
Phone: 800-662-1113


*You cannot participate in the medical flex Account if you are enrolled in a Health Savings Account.

The County's Section 125 benefit is based on a fiscal year.

Section 125 Flex Plan

Dependent Care Reimbursement for Children up to 13 or Dependents Incapable of Self-Care

- Dependent care costs, up to \$5,000 maximum per plan year, may be deducted from bi-weekly paychecks on a pre-tax basis (24 equal installments).
- Plan Year is July – June
- Pre-tax dollars are put into a Flex Account
- No changes to elections unless there is a qualifying event
- Employee submits a completed reimbursement form & is reimbursed with tax-free funds from Flex Account



ANY UNCLAIMED BALANCE IS FORFEITED!

Section 125 Flex Plan

Flexible Spending Account

(You cannot participate in the medical flex plan if you are enrolled in the Health Savings Account benefit)

Pay for eligible out-of-pocket medical, dental & vision expenses with pre-tax money deducted from your paycheck (24 equal installments)

Debit card issued with full amount available immediately


For 2022/2023, up to \$2,850 a year can be elected*

Up to \$570 can carry over to the next plan year

Plan Year is July – June

Includes prescription/office visit co-pays & deductibles, dental and vision out-of-pocket costs for employees and dependents.

Newly hired employees can elect at time of hire based on a prorated amount




*The County's Section 125 benefit is on a fiscal year so any IRS authorized increase will start in July.

Separating from San Joaquin County

COBRA for Employee & Dependents

- If eligible, you and/or your dependents may continue health coverage for up to 18 months.
- Possible extension up to 36 months.
- Cost is the full premium (County's + employee's premiums) plus additional 2% administrative fee which is all paid by the employee.
- COBRA administration is handled by a Third Party Administrator, Lucent Health.



Notification of COBRA rights is required for new hires

Wrap Up

What is needed to complete your enrollment?

- Completed, signed & dated forms for your plan elections
- Appropriate supporting documents for eligible dependents
 - Marriage/domestic partner certificate
 - Court documents as applicable
 - Birth certificates
 - Social Security cards

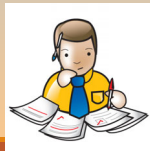


Wrap Up

- Forms are processed every other week
- Submit all paperwork (including supporting documents) no later than noon on Friday for effective date beginning next pay period
- Must submit enrollment forms within 60 days of hire
- No retroactive enrollments

Paperwork may be submitted via:

- Fax: (209) 468-9734
- Email: employeebenefits@sjgov.org
- Interoffice mail or regular mail
- In person: 3rd floor in the HR office



AGAIN...WELCOME!

Thank You for Attending the Employee Benefits
Presentation Portion of New Employee Orientation