2024-25 Open Enrollment



Human Resources

Employee Benefits & Services

June 1, 2024 - June 21, 2024

IMPORTANT DATES

JUNE				JULY				AUGUST												
S	М	Т	W	Th	F	S	S	M	T	W	Th	F	S	S	М	Т	W	Th	F	S
					EE 1	MGR 2	DTA 3	+Holiday	H 5	6					DTA **Accrued Holiday	H 2	3			
		EE MGR		DTA H	_		_		Р	Pay Day		En		_	_	Р	Pay Day	_	End PP17	
2	3	4	5	6	7	8	7	8	9	10	11	12	13	4	5	6	7	8	9	10
	P		Pay Day		End PP13				EE MGR		DTA	н				EE MGR		DTA	н	
9	10	11	12	13	14	15	14	15	16	17	18	19	20	11	12	13	14	15	16	17
		EE MGR	+Holiday	DTA H					P	Pay Day		End PP16				Р	Pay Day		End PP18	
16	17	18	19	20	21	22	21	22	23	24	25	26	27	18	19	20	21	22	23	24
	P		Pay Day		End PP14				EE MGR							EE MGR		DTA	н	
23	24	25	26	27	28	29	28	29	30	31				25	26	27	28	29	30	31
2nd Quarter Ends PP13 (7–13) 30																				

June 1, 2024 - Open Enrollment begins

June 21, 2024 - Open Enrollment ends

July 12, 2024 - Support documentation for adding dependents or opt-out/waive due July 27, 2024 - Benefits become effective August 7, 2024 - Election changes reflected on paycheck

August 21, 2024 - FSA elections reflected on paycheck

OPEN ENROLLMENT EVENTS

Explore your benefit options at our in-person Benefit Expos or online OE Webinars

- In-person expos will feature vendors from both County and Teamsters Local 1932 Health and Welfare Trust.
- Webinars will feature 10-minute presentations from the County carriers and the Teamsters Local 1932 Health and Welfare Trust will share information on their open enrollment webinars.
- Attend an OE Webinar to learn about our benefits for a chance to win one of our amazing prizes.





OPEN ENROLLMENT MEETING SCHEDULE

Open Enrollment Dates:



WEBINARS

MONDAY 6/3/24 2:30pm

TUESDAY 6/18/24 3:00pm

THURSDAY 6/20/24 9:00am

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CITY	DATE	DAY	TIME	LOCATION
Colton	6/5/2024	W	2 SESSIONS 8:30-11-30 AM 1:30-3:30 PM	ARMC - HOSPITAL (Oak Room) 400 N Pepper Ave
San Bernardino	6/12/2024	W	10:00 - 1:00 PM	GOVERNMENT CENTER (Rotunda) 385 N. Arrowhead Ave
Victorville	6/13/2024	TH	10:00 - 1:00 PM	CFS - VICTORVILLE (Conference Room 1) 15020 Palmdale Road
Rancho Cucamonga	6/17/2024	M	10:00 - 1:00 PM	AGING AND ADULT SERVICES - RANCHO CUCAMONGA (Haven Room) 9445 Fairway View PL Suite 105

VISIT the Employee Benefits web pages
CONTACT your department payroll specialist
ATTEND one of the open enrollment meetings
CONTACT Employee Benefits at ebsd@hr.sbcounty.gov

View the Employee Benefits



Plan Year 2024-25 Highlights



Flexible Spending Account (FSA)

Don't forget to take advantage of your pre-tax dollars to purchase useful items with your Flexible Spending Account. The maximum contribution amount has been increased to \$3,200 and the 2024-25 rollover amount is \$640.



NEW Chiropractic Benefits Now Available

The County is excited to announce newly added Chiropractic benefits to both the Blue Shield Signature HMO and Kaiser Traditional HMO plans. Employees can access up to 20 medical diagnosis or necessity required visits annually.



Wellness Works Here

Join the Steps to Success Challenge on the Wellable platform and mobile app! Stop by and check out the Roadmap to Health checklist on the webiste along with information on Wellness webinars and other resources for employees.

FLEXIBLE SPENDING ACCOUNT

OVERVIEW

- Voluntary Participation
- Convenient pre-tax payroll contributions
- Elections must be made every year (Must Re-Enroll)
- Easy to use payment options
- Pay for qualified medical expenses

Enroll Now!



Open Enrollment: June

Plan Year: July-July

Max Election: \$3,200

Rollover: \$640







Blue Shield of California

OUR CARRIERS

- Blue Shield Trio HMO
- Blue Shield Access+ HMO
- Blue Shield Signature HMO
- Blue Shield PPO
- Blue Shield Needles PPO
- Blue Shield Virtual Blue Needles PPO



Kaiser Permanente

- Kaiser Virtual Complete
- Kaiser Choice HMO
- Kaiser Traditional HMO



Delta Dental

- DeltaCare USA DHMO
- Delta Dental PPO





EyeMed

EyeMed Vision



blue 🗑 of california

NEW LOWER
PREMIUM
MEDICAL COST
PLAN OPTION
FOR NEEDLES
EMPLOYEES





BLUE SHIELD VIRTUAL BLUE PPO

- \$0 unlimited virtual visits
- \$40 office visits/no deductible for in-network
- In-person care through Virtual
 Blue in-person network
- 24/7 Urgent care access
- No referral required for specialty care
- Mental health coaches, clinical social workers, therapists, and health coaches

BENEFIT PLAN CHANGES



- Kaiser Traditional HMO
 Chiropractic care \$15/visit,
 20 visits max annually, medical diagnosis/necessity required
- Kaiser Traditional HMO
 Emergency Room copays
 increased to \$75



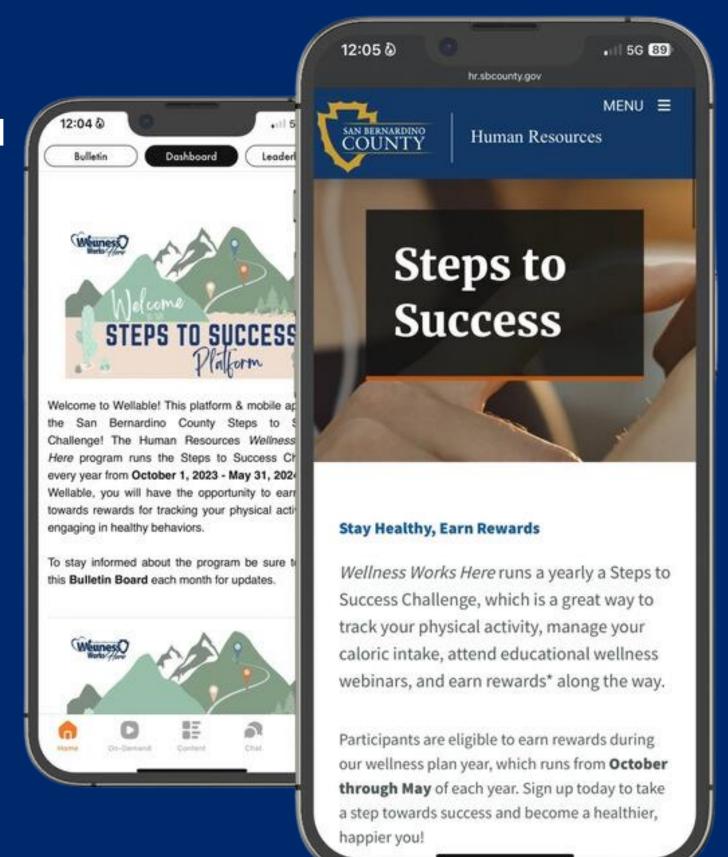


- Blue Shield Signature HMO
 Chiropractic care \$10/visit,
 20 visits max annually, medical diagnosis/necessity required
- Blue Shield Signature HMO Emergency Room copays increased to \$75

STEPS TO SUCCESS

WELLABLE IS OUR WELLNESS PLATFORM FOR THE STEPS TO SUCCESS PROGRAM

- Designed to help employees achieve health and fitness goals
- Loaded with on-demand health content and interactive features
- Track physical activity to earn rewards and incentives
- Connect to your apps and sync up to wearable devices to log progress





Username: COSB

Password:

Wellness1



SAN BERNARDINO COUNTY WELLNESS APP

The Mobile app has been developed to provide wellness resources to all County employees, retirees, and their families with 24/7 access to critical resources and wellness tools.

- Wellness Toolkit
- Self Assessment
- Fitness Exercises
- Nutrition Advice
- Mindfulness and Relaxation Resources
- Links to County Benefit Resources
- And More!



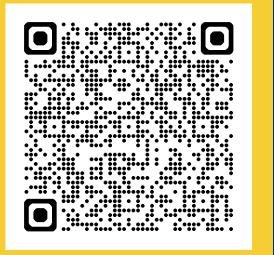
2024-2025 New Rates

Plan	Coverage Type	2024-2025 Published Bi-Weekly Rates	2023-2024 Published Bi-Weekly Rates	Dollar Change	Percentage (% Change	
Kaiser	Employee Only	\$375.56	\$347.92	\$27.64	7.94%	
	Employee + 1	\$749.11	\$693.84	\$55.27	7.97%	
	Employee + 2	\$1,059.16	\$980.93	\$78.23	7.98%	
Kaiser Choice HMO	Employee Only	\$320.10	\$296.56	\$23.54	7.94%	
	Employee + 1	\$638.19	\$591.12	\$47.07	7.96%	
	Employee + 2	\$902.20	\$835.62	\$66.58	7.97%	
Kaiser Virtual Complete HMO	Employee Only	\$294.10	\$272.49	\$21.61	7.93%	
	Employee + 1	\$586.19	\$542.97	\$43.22	7.96%	
	Employee + 2	\$828.62	\$767.47	\$61.15	7.97%	
Blue Shield Signature HMO	Employee Only	\$352.47	\$334.38	\$18.09	5.41%	
	Employee + 1	\$702.94	\$666.77	\$36.17	5.42%	
	Employee + 2	\$993.83	\$942.65	\$51.18	5.43%	
Blue Shield Access + HMO	Employee Only	\$306.15	\$290.45	\$15.70	5.41%	
	Employee + 1	\$610.31	\$578.93	\$31.38	5.42%	
	Employee + 2	\$862.79	\$818.37	\$44.42	5.43%	
Blue Shield HMO Gold Trio	Employee Only	\$287.32	\$272.60	\$14.72 5.40		
	Employee + 1	\$572.67	\$543.22	\$29.45	5.42%	
	Employee + 2	\$809.50	\$767.84	\$41.66	5.43%	
Blue Shield	Employee Only	\$655.06	\$621.36	\$33.70	5.42%	
PPO	Employee + 1	\$1,332.93	\$1,264.25	\$68.68	5.43%	
	Employee + 2	\$2,067.79	\$1,961.19	\$106.60	5.44%	
Blue Shield	Employee Only	\$739.38	\$701.33	\$38.05	5.43%	
Needles PPO	Employee + 1	\$1,503.97	\$1,426.46	\$77.51	5.43%	
	Employee + 2	\$2,329.31	\$2,209.21	\$120.10	5.44%	
Blue Shield Virtual Blue	Employee Only	\$670.06	N/A	N/A	N/A	
Needles PPO	Employee + 1	\$1,362.78	N/A	N/A	N/A	
	Employee + 2	\$2,110.53	N/A	N/A	N/A	
Blue Shield	Employee Only	\$189.42	\$179.75	\$9.67	5.38%	
Bronze PPO	Employee + 1	\$376.83	\$357.49	\$19.34	5.41%	
	Employee + 2	\$532.38	\$505.01	\$27.37	5.42%	
Delta Dental PPO	Employee Only	\$21.91	\$22.54	(\$0.63) -2.80%		
	Employee + 1	\$40.70	\$41.91	(\$1.21)	-2.89%	
	Employee + 2	\$69.52	\$71.63	(\$2.11)	-2.95%	
DeltaCare USA DHMO	Employee Only	\$9.88	\$9.88	\$0.00	0.00%	
	Employee + 1	\$15.94	\$15.94	\$0.00	0.00%	
	Employee + 2	\$20.77	\$20.77	\$0.00	0.00%	

2024-25 BI-WEEKLY PREMIUM RATE TABLE

Rates Effective July 13, 2024 Coverage Effective July 27, 2024

Benefits Guide:



Benefits Calculator:



Additional Benefits

About Us 🗸

Contact Us







What We Do

Human Resources

The Employee Benefits and Services Division (EBSD) provides comprehensive benefits and services to eligible employees, retirees and their dependents through strategic planning, negotiation and implementation of County benefit programs.

MODIFIED BENEFIT OPTION (MBO)

The MBO provides full-time employees in eligible classifications (job/title) the opportunity to convert from a position with traditional benefits to a position with modified benefits.

- Based on classification and bargaining unit
- Medical, Dental, Vision, FSA, and Life Insurance elections can be done through EMACS self-service
- Only form required by an employee during Open Enrollment is the enrollment/disenrollment form





COMBINED GIVING

Your help is needed now more than ever! Every donation, no matter the amount, is vital in helping these organizations continue to be able to provide charitable services.







EMPLOYEE ASSISTANCE PROGRAM (EAP)



The EAP is designed to address short-term challenges and to identify resources and referrals for emergency and long-term challenges.

Professionally trained advisors are available to assist with family problems, marital concerns, financial and legal matters, stress, depression, and other challenges that may be affecting your personal life.

Advisors are available to help 24 hours a day, 7 days a week, 365 days a year.



EAP TOLL FREE (800) 234-2939

How to Review the Benefits the County Offers

2024 OPEN ENROLLMENT BENEFIT GUIDE

Open Enrollment Guide



REACH NEW HEIGHTS IN HEALTH ENROLL AND THRIVE

OPEN ENROLLMENT DATES: JUNE 1 – JUNE 21, 2024





Benefits by Occupational Unit (BbOU)





Human Resources Employee Benefits & Services

Bargaining Units Listed Here

MOU Contract 2019-2023

The County pays a large portion of your healthcare premiums. To determine your out-of-pocket costs. use our online Benefits Calculator.



MEDICAL PREMIUM SUBSIDY

Employee-Only \$100.00 \$200.00 Employee +1 Employee +2 or more \$300.00

MEDICAL OPT-OUT/WAIVE

If you have other employersponsored group coverage and do not enroll in the County's medical plans, you will receive an extra \$40 per pay period.



DENTAL PREMIUM SUBSIDY

\$9.46 (requires enrollment in a County medical plan)



VISION

No Cost for Employee-Only Coverage.

Benefit rates listed for full-time employees (61-80 hours) per biweekly pay period unless otherwise noted.

LEAVE PROVISIONS

Sick

Vacation	80-160 hours per year Cash-out option up to 60 hours per year if 80 hours of vacation used in previous year
5/40 Set (1985)	ACCOMPANY OF THE PROPERTY OF T

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Holiday	14 + 1 floating per year
Admin	80 hours/year MGMT ONLY
	AD become times ONE ONE V

3.39 hours per pay period

40 hours/year - SUP ONLY Cash-out option

40 hours/year - SUP ONLY Annual No Cash-out (use it or lose it)

40 hours/year - ATTORNEYS ONLY Attorney No Cash-out (use it or lose it)

Bereavement 2 days per occurrence (3 if traveling >1,000 miles)

Perfect Up to 16 hours PAL or annual gym membership Attendance reimbursement up to \$299 Leave (PAL)



SHORT-TERM DISABILITY

COUNTY-PAID BENEFITS

Receive 55% of pay, up to \$1,540/week for up to one year

BASIC TERM LIFE INSURANCE

\$50,000 for ADM & MGMT \$35,000 for SUP & TI \$20,000 for CLK & CLT

RETIREMENT

SBCERA Retirement Formulas

Reciprocity provisions may apply

Tier I 2.0% AT AGE 55 Hired PRIOR to Jan 1, 2013

Tier II 2.5% at age 67

Hired ON or AFTER Jan 1, 2013

457(b) Deferred Compensation

Auto-enrolled upon hire at 1% contribution of base salary. County will match half of your contribution up to 0.5% of your base salary after one year of continuous service.

Retirement Medical Trust (RMT)

County Contribution

(Based on continuous years of service):

10-14 years = 1.5% of biweekly base salary 15-19 years = 2.0% of biweekly base salary 20+ years = 2.5% of biweekly base salary

Sick Leave Conversion

Upon separation, eligible to convert a portion of your sick leave into the RMT upon attaining 10+ years of participation with SBCERA and/or other public retirement.

VOLUNTARY PARTICIPATION PROGRAMS

Supplemental Term Life Insurance	Have financial security with extra term life coverage for yourself and your family with coverage up to \$700,000.						
AD&D Insurance	Additional insurance in the event of accidental death or serious injury, with coverage options up to \$250,000.						
FSA	Pre-tax account for qualified health care expenses up to \$2,850 annually. "Gold" level plan enrollees are eligible for a match up to \$10 per pay period.						
DCAP	Pre-tax account for qualified dependent care expenses up to \$5,000 annually.						
529 Savings Plan	Invest for future educational expenses with tax-free earnings. Contact Voya to enroll.						
Combined	link.sbcounty.gov/CombinedGiving						
Giving	Give back to the community via one- time or ongoing payroll deductions.						
Commuter	link.sbcounty.gov/rideshare						
Services	Help the environment, reduce traffic, save money and earn rewards with you commute.						
Employee	fink.sbcounty.gov/EmployeeDiscount						
Discounts	Save big at hundreds of national and						

link.sbcounty.gov/wellness Wellness Information, resources and rewards to

local merchants.

support your healthy lifestyle.

Employee Assistance Program (EAP)

Program

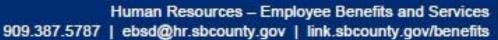
link.sbcounty.gov/eap

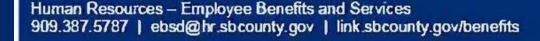
Confidential expert support and resources available at any time, at no cost to you.

MODIFIED BENEFIT OPTION (MBO)

Certain eligible job classifications have the option to elect the MBO in lieu of the traditional benefit option; refer to your Memorandum of Understanding (MOU) for details.

Plan Year 2022-23 Revised Date





Representation: **Union Listed Here**

What can you change during Open Enrollment?

CHANGES THAT CAN BE MADE DURING OPEN ENROLLMENT

Health Insurance

Medical Dental Vision Tax Savings Plans

Flexible
Spending
Accounts
(FSA)

Life Insurance

Supplemental AD&D GUL Modified Benefit Option

Enhanced Wage Option Flexibility of Choice

BENEFITS

Dependents

Add or Remove Dependents Opt-out/ Waive

Opt-out or Waive from Medical and/or Dental Coverage Tax Elections

Elect Before or After Tax Deductions Update EMACS Information

Update
EMACS
contact info
and
beneficiaries

SUPPORTING DOCUMENTATION

Proof of eligibility for all newly added dependents and opt-out/waive elections must be submitted to EBSD by 5:00 pm on Friday, July 12, 2024



Marriage certificate, domestic partnership certification, birth certificate, adoption orders

Opt-out/ Waive

Proof of spouse/domestic partner/parent's employer sponsored coverage that includes the effective date of coverage

Disabled Dependent (OAD)

Disabled Dependent Certification and birth certificate is required for dependents who are over the age of 26 and permanently disabled

STAY CONNECTED

Updating your Contact Details in EMACS to add your preferred email address and phone number will allow the County to rapidly facilitate important communications to you such as:

- Pay Warrant Information
- Benefit Updates
- EMACS Changes
- Payroll Specialist Communications
- Department Updates



Contact Us



(909) 387-5787



hr.sbcounty.gov/employee-benefits/



ebsd@hr.sbcounty.gov



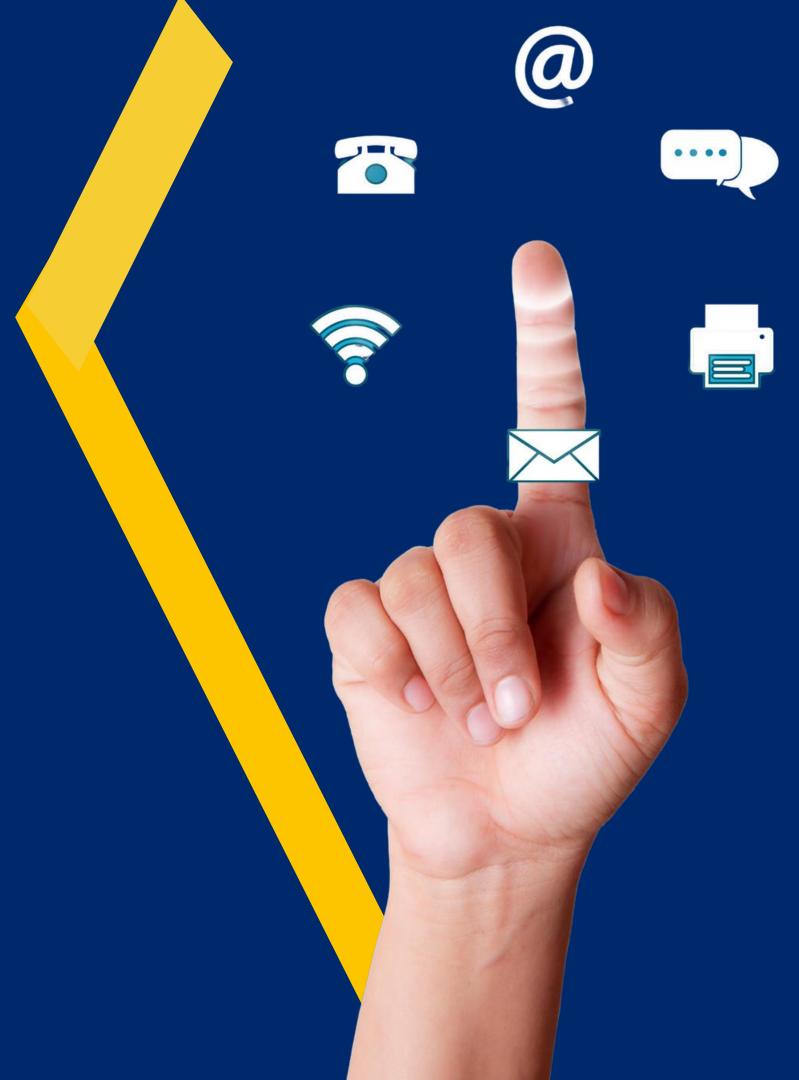
175 W. Fifth Street, First Floor San Bernardino, CA 92415

Additional Contact Information and Resources











Thank You

UPCOMING PRESENTATIONS



- Blue Shield Open Enrollment Presentation
- Kaiser Open Enrollment Presentation
- Delta Dental Open Enrollment Presentation
- EyeMed Open Enrollment Presentation
- VOYA Open Enrollment Presentation
- Teamsters Local 1932 Health& Welfare Trust