



Choose Your
County of Riverside
Benefit Options

ANNUAL BENEFITS ENROLLMENT FOR SEIU, LIUNA, PHYSICIAN AND PHARMACY RESIDENTS

RIVERSIDE COUNTY ANNUAL ENROLLMENT:

September 9–27, 2019

Includes: medical, dental, vision
and Flexible Spending Accounts
(Health Care and Dependent Care).



HELP IS JUST A PHONE CALL AWAY

We understand the complexities of the health care system, and we want you to have the support you need, when you need it. See page 5 for details about the Advocacy Services program and how it can help you.

YOUR OPPORTUNITY HAS ARRIVED!

Annual Enrollment for County employees begins September 9.

Take advantage of this once-a-year opportunity to confirm your benefits coverage continues to meet your needs. The deadline to enroll or make changes is **midnight on September 27.**

Use this guide to get started. It includes information about the County's plans, rates for the new year and how to enroll online. For further details, visit <http://benefits.rc-hr.com> and refer to the *Your Benefits* guide available on September 9.

WHAT YOU NEED TO KNOW

The maximum amount you can contribute to a Health Care Flexible Spending Account is increasing to \$2,700*.

All other benefits and coverage we currently offer will remain the same. For a comparison of our medical plan options, visit <http://benefits.rc-hr.com> and click "Employee Benefits." There you'll find "Benefit Documents," which includes everything you need to help you make the right choice. Remember, if you need help, call an Advocate or attend an enrollment fair. See page 5 for details.



**Alternative formats available upon request.
Contact the Benefits Information Line at
(951) 955-4981, option 1 as soon as possible.**

**Subject to change due to government regulations.*



YOUR OPTIONS DURING ANNUAL ENROLLMENT

Annual Enrollment is your opportunity to:

- Change your medical, dental and/or vision elections;
- Add/remove dependents;
- Enroll or re-enroll in a Flexible Spending Account (FSA) for the 2020 plan year; or
- Participate in the County's Medical Waiver option, which allows you to decline County-sponsored medical coverage and receive reduced flexible benefit credits in the form of cash. You must meet the eligibility requirements described in the Memorandum of Understanding that governs your bargaining or employee unit, and you must provide information about your other **group** coverage to qualify for the Medical Waiver option.

The benefit elections you make during Annual Enrollment will remain in effect for the entire 2020 plan year (if you remain eligible for benefits). After Annual Enrollment ends, you can make changes to your elections only if they are due to and consistent with a qualified change of status, as defined by the IRS.

HOW TO ENROLL

Online enrollment. To enroll or make changes during Annual Enrollment:

- **Access** the online enrollment system from a County computer or any computer with Web/Internet access at <http://benefits.rc-hr.com> and click "Employee Self Service."
- **Log in** using your six-digit employee ID and password. This is the same ID and password you use to access your payroll information online.
- **Complete** the enrollment process to make plan changes, add/remove dependents and waive coverage (including providing proof of other group insurance coverage). **If you do not want to make changes to your benefits, you do not need to do anything now; your current elections will continue for 2020. However, if you participate in the Health Care and/or Dependent Care FSA, you must enroll and elect FSA coverage each year.**

IMPORTANT REMINDER

The Dependent Care FSA is for child care expenses while you work. It is NOT for health care expenses for your dependents. Use the Health Care FSA for all your family's health care expenses.

IMPORTANT INFORMATION ABOUT PRIMARY CARE PROVIDERS:

If you enroll in the UnitedHealthcare (UHC) SignatureValue Alliance HMO or the Exclusive Care plan, you'll be asked to designate a primary care physician (PCP). Talk to your current PCP and confirm whether he or she is part of the UHC or Exclusive Care network. If not, visit www.cor.welcometouhc.com or www.exclusivecare.com to locate a primary care physician in your area. Note: If you enroll in the UnitedHealthcare plan, you'll be asked to provide a 10-digit PCP ID number which can be found within the provider search at www.cor.welcometouhc.com. If you don't designate a PCP when you enroll, a PCP will be auto-assigned, and you'll need to complete the process to change your provider and receive a new ID card by contacting UnitedHealthcare directly at (800) 624-8822.

Under the UnitedHealthcare PPO, you have the freedom to visit any doctor you choose; however, you'll save on out-of-pocket expenses when you visit a doctor within the plan's network. Visit www.cor.welcometouhc.com to confirm whether your current providers are within the network. If not, you can continue under their care, but keep in mind that you'll receive out-of-network coverage, which may cost you more.

Remember, if you're currently enrolled in an FSA and you want to continue participating in 2020, you must re-enroll and designate your annual election during Annual Enrollment. Your participation in the FSA will not carry over.

NOTE ABOUT DEPENDENT CARE (DAY CARE) CONTRIBUTIONS

Dependent Care (Day Care) Flexible Spending Accounts are subject to non-discrimination testing each year to ensure the plan does not provide an unfair advantage to highly compensated employees. The testing compares the dependent care contributions of highly compensated employees with the dependent care contributions of all other employees. Depending on the results of this testing, contributions of certain employees may be limited, reduced or returned. You will be notified if this affects you.

JOIN US AT AN ENROLLMENT FAIR

The following services will be available to you at the fairs:

- Representatives from each medical, dental and vision plan will be available to answer your questions and help you make your 2020 benefit elections.
- Additional information, such as carrier specific material and provider directories, will also be available.

2020 ENROLLMENT FAIR SCHEDULE			
Facility	Date	Time	Address
Riverside County Administrative Center (CAC) Rooms 2A and 2B	9/10/19	11:00 – 1:00	4080 Lemon Street Riverside, CA 92503
DPSS/GAIN Large Conference Room	9/11/19	11:00 – 1:00	541 N. San Jacinto Ave Hemet, CA 92543
Riverside County Administrative Center Conference Room/Lunch Room	9/18/19	11:00 – 1:00	260 N. Broadway Blythe, CA 92225
Riverside University Health System Magnolia Rooms A-D	9/19/19	11:00 – 1:00	265156 Cactus Ave. Moreno Valley, CA 92555
Workforce Development Room 402	9/25/19	11:00 – 1:00	44199 Monroe St. Indio, CA 92201
Flood Control Large Conference Room	9/26/19	1:00 – 4:00	1995 Market St. Riverside, CA 92501



READY ENROLL

To add or change your additional life insurance coverage or update your beneficiary information, use *Ready Enroll* at <http://bit.ly/rivcoenroll>. The Group Number for Evidence of Insurability (EOI) is 641685.

Logging in to *Ready Enroll* for the first time?

Know your...

1. Username is your six-digit employee number
2. PIN is the last four digits of your Social Security number and the last two digits of your birth year

What you should do

1. Log in to *Ready Enroll* and review your basic life insurance benefits and additional life coverage elections, if applicable. This is a great time to apply for additional coverage for yourself and your eligible dependents. Coverage you elect during this Annual Enrollment period will be effective January 1, 2020 or upon underwriting approval.
2. *Ready Enroll* will maintain employee life insurance elections and all **beneficiary designations**. *Ready Enroll* will replace your previous beneficiary designations you made on a paper form. Therefore, you are required to enter beneficiary designations if you have not already done so. You will have access to your information 24/7 to maintain your enrollment and beneficiary information. Beneficiary designations you make in *Ready Enroll* are effective immediately.

CONSIDER YOUR ADDITIONAL LIFE INSURANCE OPTIONS

While the County provides basic life insurance coverage at no cost, you may purchase group additional life insurance through Standard Insurance Company for yourself, your spouse/domestic partner and your eligible dependents. Deductions for additional life insurance coverage are taken on an after-tax basis.

During the additional life insurance open enrollment period, you can increase coverage up to the guaranteed amount without providing Evidence of Insurability (EOI), as governed by the open enrollment rules.

READY ENROLL ONLINE APPLICATION

The County of Riverside has partnered with The Standard to provide a secure, web-based system, known as ***Ready Enroll***, for enrolling in life insurance coverage and managing beneficiaries through The Standard's Additional Life program. This online application will provide a secure gateway and paperless process for enrolling and managing life insurance provided by The Standard, including:

- Access to benefit plan details and other tools to help you make informed decisions on life insurance coverage
- Enroll, cancel or change coverage
- Print a benefits confirmation or summary
- Edit personal information and update beneficiary information, if applicable
- View your out-of-pocket premium amount

This site is available 24/7 to assist you with your life insurance needs.

WHEN IS EVIDENCE OF INSURABILITY REQUIRED?

The chart below shows the coverage amounts you may elect without providing proof of good health or EOI.

Enrolling during Annual Enrollment (you do not currently have coverage and you are beyond the initial eligibility period)		
Employee Additional Life	Spouse/Domestic Partner Additional Life	Dependent Child Additional Life
EOI required	EOI required	No EOI required
Increasing coverage during Annual Enrollment (you currently have coverage and you are requesting additional coverage)		
Employee Additional Life	Spouse/Domestic Partner Additional Life	Dependent Child Additional Life
You may increase your coverage by one \$10,000 increment without EOI if currently enrolled for less than \$600,000	You may increase your spouse's/domestic partner's coverage by one \$5,000 increment without EOI if currently enrolled for less than \$100,000	No EOI required

WHEN YOU NEED A HAND, ADVOCACY SERVICES CAN HELP

The County offers Advocacy Services as an extra level of assistance for our employees. You can use Advocacy Services to:

- Understand and use your benefits
- Resolve health care billing and insurance claim disputes
- Locate doctors, hospitals and other health care providers
- Be an informed, effective health care consumer
- Receive information on medical diagnoses and treatments
- Research and locate treatments and medications
- Get second opinions, when necessary
- Navigate the Medicare system

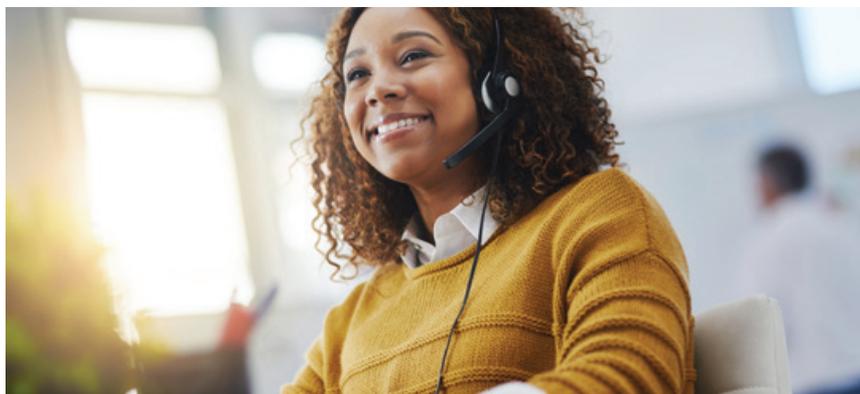
Health Pros have the experience needed to help you overcome the most challenging medical and benefit issues. They will work with your medical insurance carrier, doctors and whomever else it takes to resolve your and your family members' problems and concerns. To reach Advocacy Services, simply call **(888) 622-1200** or **(951) 955-4981 (option 3)**. Health Pros are available Monday through Friday, 5 a.m. – 4 p.m. Pacific Time.

HOW ADVOCACY HELPS YOU

Using Advocacy Services allows you to:

- **Get back to what matters.** The average issue takes an experienced Health Pro more than four hours to resolve. With their help, you can focus on other concerns, knowing a Health Pro is working on your behalf.
- **Reduce headaches.** Health Pros work directly with health plans, providers and other parties until the issue is resolved. No more runaround!
- **Be confident they're getting the right answers.** On average, Health Pros determine that 70% of issues submitted require correction.

Manage your health effectively with the help of a Health Pro. Learn more at www.alight.com/advocacy or call **(888) 622-1200** or **(951) 955-4981 (option 3)**.



YOUR QUESTIONS ANSWERED

1. Can a Health Pro help me with all of my benefits?

Yes. Your Health Pro is an expert on all your health benefit plans and can answer any questions you have regarding medical, dental and vision plans, flexible spending accounts, disability, life insurance and more.

2. How much does it cost me to use Advocacy Services?

The advice and assistance provided by Advocacy Services are **free**; however, some actions recommended by a Health Pro may have costs (e.g., obtaining a second opinion from another doctor).

3. If I can't get answers, how will my Health Pro?

Your Health Pro has an advantage. Only individuals with extensive benefits experience, advanced problem-solving skills and a demonstrated commitment to customer service are selected as Health Pros. They are experts on our company's benefit plans, insurance billing procedures and claims resolution. Health Pros also have designated contacts, whom you may not have access to, for escalated issues.

4. How can I contact Advocacy Services?

It's easy. To reach Advocacy Services, simply call **(888) 622-1200** or **(951) 955-4981 (option 3)** Monday through Friday, 5 a.m. – 4 p.m. Pacific Time to be connected to a Health Pro.

5. Can my dependents use Advocacy Services?

Yes. Advocacy Services are available for you and your family members, at no cost.

WAIVING COUNTY MEDICAL COVERAGE

If you are eligible for the County’s Medical Waiver option, you can waive County-sponsored medical coverage and receive reduced flexible benefit credits. In order to qualify for the medical waiver option, you must do ALL of the following:

1. Meet the criteria, based on your last hire date, described in the most recent Memorandum of Understanding or Resolution that governs your current bargaining unit or employee group.
2. Elect the “Medical Waiver” (MEDWAV) option when completing your online enrollment. This is an important step. DO NOT select the option labeled “Waive,” or you will lose your flexible benefit credits. The “Waive” option means you are declining coverage and participation in the Cafeteria Plan and waiving flexible benefit credits.
3. Complete a “Decline Coverage Acknowledgment Form” acknowledging that the County has offered affordable coverage under the Affordable Care Act but that you have declined coverage.
4. Provide proof that you are covered by other **group** medical coverage (for example, your spouse’s medical plan). **Note: Coverage under the Covered California™ exchange is not group coverage and therefore does not meet the requirement for the Medical Waiver option.**

Rules and requirements for medical waiver eligibility are discussed in the full enrollment guide. **If you elect to waive (decline) medical coverage but do not meet the criteria above, you will not receive flexible benefit credits.**

PAYING FOR COVERAGE

Flexible Benefit Credits. To help you with the cost of benefits, the County of Riverside provides flexible benefit credits. You may also qualify for a premium subsidy if you are in an eligible bargaining unit and elect to enroll one or more dependents. The flexible benefit credits you receive and your eligibility for a premium subsidy are determined by the applicable Memorandum of Understanding or Resolution that governs your bargaining unit or employee group. See the tables below for the flexible benefit credits and premium subsidy you may receive, starting with pay period 25/2019 (paid to you on the December 4, 2019 pay warrant, for January 2020 premiums).

2020 FLEXIBLE BENEFIT CREDITS				
Employee/Bargaining Unit	Monthly Flex Credit	Semimonthly Flex Credit	Monthly Flex Credit	Semimonthly Flex Credit
	Enrolled in County Health Plan		Not Enrolled in County Health Plan (MEDWAV)	
LIUNA	\$823.00	\$411.50	\$425.40	\$212.70
SEIU	\$823.00	\$411.50	\$465.00	\$232.50
Resident Physicians/ Pharmacy Residents	\$751.28	\$375.64	\$312.50	\$156.25

Premium Subsidy. Employees in the SEIU and LIUNA bargaining units are currently eligible for a premium subsidy as provided in the applicable Memorandum of Understanding (MOU). The medical premium shown on your personalized enrollment statement has been reduced to reflect this additional employer-paid contribution. If you are in either of these two bargaining units, please see the table below for the premium subsidy contribution provided as a reduction to your 2020 medical plan premiums.

2020 PREMIUM SUBSIDY FOR SEIU AND LIUNA				
	Monthly Premium Subsidy	Semimonthly Premium Subsidy	Monthly Premium Subsidy	Semimonthly Premium Subsidy
	Family Coverage		Two-Party Coverage	
SEIU	\$100.00	\$50.00	\$25.00	\$12.50
LIUNA	\$200.00	\$100.00	\$50.00	\$25.00

Health Care Premiums for 2020. Premiums are deducted semimonthly (twice a month), which means deductions are taken from your paycheck for 24 pay periods each calendar year. When you receive a third check in a month (the “free” pay period), it will not include a flexible benefit credit or a deduction for your health plans, unless you owe for uncollected premiums. To see your net out-of-pocket cost for health care coverage, remember to subtract your flex credit (shown above) from the premiums shown below. These rates DO NOT reflect the premium subsidy for SEIU and LIUNA members. Your bargaining unit or employee group determines which medical plans you may choose.

MEDICAL PLAN ELIGIBILITY	
Eligible for County Medical Plans	
SEIU Represented Employees	Resident Physicians
LIUNA Represented Employees	Pharmacy Residents

COUNTY PLANS – MEDICAL		
	Monthly	Semimonthly
Exclusive Care EPO		
Employee	\$587.76	\$293.88
Two-Party	\$1,189.76	\$594.88
Family	\$1,493.76	\$746.88
UnitedHealthcare SignatureValue Alliance HMO		
Employee	\$711.18	\$355.59
Two-Party	\$1,445.56	\$722.75
Family	\$1,875.40	\$937.77
UnitedHealthcare SignatureValue Traditional (Full) Network		
Employee	\$1,127.74	\$563.87
Two-Party	\$2,295.20	\$1,147.60
Family	\$2,978.52	\$1,489.26
Kaiser Permanente HMO		
Employee	\$733.60	\$366.80
Two-Party	\$1,458.70	\$729.35
Family	\$1,896.34	\$948.17
UnitedHealthcare PPO		
Employee	\$2,245.66	\$1,123.33
Two-Party	\$4,461.58	\$2,230.79
Family	\$5,791.12	\$2,895.56

COUNTY PLANS – DENTAL		
	Monthly	Semimonthly
Local Advantage – Plus		
Employee	\$44.00	\$22.00
Two-Party	\$83.00	\$41.50
Family	\$122.00	\$61.00
Local Advantage – Blythe		
Employee	\$31.00	\$15.50
Two-Party	\$54.00	\$27.00
Family	\$83.00	\$41.50
DeltaCare USA DHMO – High Option Plan (10A)		
Employee	\$22.84	\$11.42
Two-Party	\$33.80	\$16.90
Family	\$52.00	\$26.00
Delta Dental PPO		
Employee	\$48.00	\$24.00
Two-Party	\$82.00	\$41.00
Family	\$120.00	\$60.00

COUNTY PLANS – VISION		
	Monthly	Semimonthly
Medical Eye Services Plan 1		
Single	\$9.24	\$4.62
Two-Party	\$13.96	\$6.98
Family	\$18.88	\$9.44
Medical Eye Services Plan 2		
Single	\$7.80	\$3.90
Two-Party	\$12.42	\$6.21
Family	\$17.14	\$8.57

For more information, visit the benefits website at <http://benefits.rc-hr.com>. This website is a great resource for County plan participants. You can also contact the carriers directly at the phone numbers and websites listed below.

CONTACT INFORMATION		
Plan	Telephone	Website
UnitedHealthcare SignatureValue (HMO)	(800) 624-8822	www.cor.welcometouhc.com
UnitedHealthcare Select Plus (PPO)	(866) 633-2446	www.myuhc.com
Exclusive Care (EPO)	(800) 962-1133	www.exclusivecare.com
Kaiser Permanente (HMO)	(800) 464-4000	https://my.kp.org/countyofriverside/
Culture of Health Program		
Culture of Health Program	(951) 955-3597	http://cultureofhealth.rc-hr.com
Dental		
DeltaCare USA (HMO)	(800) 422-4234	www.deltadentalins.com
Delta Dental (PPO)	(800) 765-6003	www.deltadentalins.com
Local Advantage (EPO)	(800) 331-5301	http://benefits.rc-hr.com
Vision		
Vision Service Plan (VSP)	(800) 877-7195	www.vsp.com
Medical Eye Services (MES)	(800) 877-6372	www.mesvision.com
Life Insurance		
The Standard	(800) 628-8600	http://bit.ly/rivcoenroll
Employee Assistance Services (EAS)		
Employee Assistance Services	(951) 778-3970 or (760) 328-6863	www.rc-hr.com/eas/
Other Benefits and County Resources		
eBenefits Online Enrollment System Entry	Call the Benefits Information Line for assistance at (951) 955-4981	http://benefits.rc-hr.com
Riverside County Human Resources Benefits Information Line	(951) 955-4981 TTY: 711 Fax: (951) 955-3490	http://benefits.rc-hr.com or http://intranet.co.riverside.ca.us Email: benefits@rivco.org
FSA Claims Administrator (ASIFlex)	(800) 659-3035	www.asiflex.com
Advocacy Services	(888) 622-1200 or (951) 955-4981, option 3	www.alight.com/advocacy
Retirement		
Riverside County Human Resources Retirement Unit	(951) 955-4981, option 2 Fax: (951) 955-8538	Email: retirement@rivco.org
Nationwide • Nationwide Retirement Solutions	(877) 677-3678	www.nationwide.com
VALIC • VALIC Client Care Center	(800) 448-2542	www.valic.com
Disability		
Sedgwick (Short-Term Disability)	(800) 845-7739	www.claimlookup.com
The Standard (Long-Term Disability) • Insurance Claims	(800) 368-1135 (800) 378-2395	http://benefits.rc-hr.com/OtherBenefits/DisabilityInsurance