2023 Benefits Enrollment: Active Employees



September 12 – 23, 2022

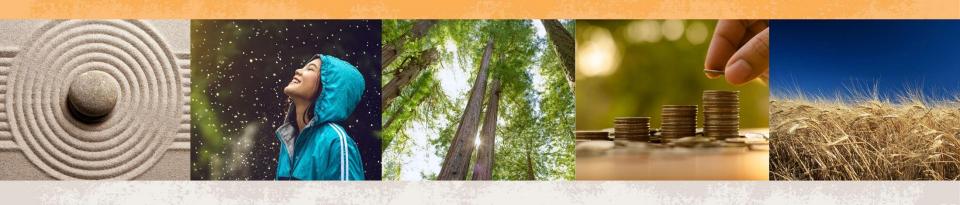




Agenda

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Open Enrollment Overview





Open Enrollment for Active employees is September 12-23, 2022.

Passive Enrollment

This year's Open Enrollment is passive: Most of your City of Dallas benefit elections will carry over for 2023 if no action is taken during this time.

- If you want to change your current elections, add or drop dependents, participate in a Flexible Spending Account or Dependent Care Account, contribute to a Health Savings Account, or change your beneficiary designations for 2023, you MUST complete the enrollment process by <u>September 23</u>.
- Benefit elections will take effect January 1, 2023.



Update the Payroll Beneficiary Form

- This form allows you to designate the beneficiary who would receive your final check and personal belongings in the unfortunate event of your passing during employment with the City of Dallas.
- You MUST update the Payroll Beneficiary Designation Form during Open Enrollment by logging into https://standard.benselect.com/cityofdallas.
- If you are unable to update this form online, please call the Enrollment Center at (214) 556-0971 for assistance.



This is the only time during the year you can make changes to your coverage unless you experience a qualifying life event.

- Example: Marriage, divorce, etc.
- Any changes to your benefit elections must be made within 31 days of the qualifying event.

How Do I Enroll or Make Changes?



Online: https://standard.benselect.com/cityofdallas

Log in with your username: first name.last name and your 4-digit birth year.

• For example: John Smith born in 1966 would be *john.smith1966*

Your PIN is 6 digits, composed of the last 4 digits of your Social Security Number (SSN) and the last two digits of your birth year.

- For example: If the last 4 digits of your SSN are 1234 and you were born in 1966, your PIN would be *123466*
- You will be asked to change your PIN after you log in for the first time. Be sure to make note of your new password for future use.



Online (continued): https://standard.benselect.com/cityofdallas

If you have logged in previously, you will use the credentials you created.

 Having trouble accessing the system? Contact the Enrollment Center at (214) 556-0971.

By phone with a Benefit Specialist

Call (214) 556-0971 Monday-Friday, 8:15 a.m. – 5:15 p.m.

• Benefit Specialists will be available starting September 12th.

What Do I Need to Enroll or Make Changes?



Supporting documentation required

If you add an eligible dependent who is not currently enrolled, you must provide supporting documentation (marriage license, birth certificate, etc.)

- Upload it from your computer during the online enrollment process (follow the on-screen instructions)
- Send it from your Smartphone with the My Selerix app
- Email it to <u>yourenrollment@ebcoh.com</u>
- Fax it to (513) 371-5559

Questions about or assistance with enrollment? Call (214) 556-0971 Monday-Friday, 8:15 a.m. – 5:15 p.m.

• Benefit Specialists will be available starting September 12th



Medical & Pharmacy Coverage

Blue Cross Blue Shield of Texas (BCBSTX)





There are no changes to current plan designs or coverage costs for 2023!

Medical costs continue to rise across the country, and the City of Dallas' plans are no exception.

However, this benefit year, the City of Dallas has decided to absorb these cost increases rather than pass them on to you!

Remember, many of the City's health benefits are self-insured, which means claims are paid with premiums from you *and* the City. Making smart choices about our medical care and personal health now can help reduce everyone's health care costs in the future.

We are all in this together!

Blue Essentials PCP Plan



Network	Blue Essentials (In-Network Only	
Annual Deductible		
Individual	\$1,500	
Family	\$3,000	
Annual Out-of-Pocket Max		
Individual	\$6,350	
Family	\$12,700	
Preventive Care	\$O	
Primary Care Physician	\$25 copay	
Specialist	\$50 copay	
X-Ray and Lab Work*	\$25 copay / \$50 copay	
Urgent Care	\$40 copay	
Emorran av Doom	\$300 copay plus 20% after	
Emergency Room	deductible	
Inpatient Hospital Care	20% after deductible	
Outpatient Surgery	20% after deductible	

*For these services to be covered under your office visit copay, the lab or X-ray must be performed in and billed by your physician's office.

PCP Plan Highlights

- Copays for multiple services.
- PCP must be selected to access benefits.
- Must reside in a Texas Blue Essentials network area.

Blue Choice Copay Plan

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Network	Blue Choice (In-Network Only)	
Annual Deductible		
Individual	\$1,500	
Family	\$3,000	
Annual Out-of-Pocket Max		
Individual	\$6,350	
Family	\$12,700	
Preventive Care	\$0	
Primary Care Physician	\$25 copay	
Specialist	\$50 copay	
X-Ray and Lab Work*	\$25 copay / \$50 copay	
Urgent Care	\$40 copay	
	\$300 copay plus 20% after	
Emergency Room	deductible	
Inpatient Hospital Care	20% after deductible	
Outpatient Surgery	20% after deductible	

*For these services to be covered under your office visit copay, the lab or X-ray must be performed in and billed by your physician's office.

Copay Plan Highlights

- Copays for multiple services.
- Enhanced network option.
- No out-of-network benefits available.

Blue Choice HSA Plan



Network	Blue Choice (In-Network Only)	
Annual Deductible		
Individual	\$3,000	
Family	\$6,000	
Annual Out-of-Pocket Max		
Individual	\$6,350	
Family	\$12,700	
Preventive Care	\$0	
Primary Care Physician	20% after deductible	
Specialist	20% after deductible	
X-Ray and Lab Work	20% after deductible	
Urgent Care	20% after deductible	
Emergency Room	20% after deductible	
Inpatient Hospital Care	20% after deductible	
Outpatient Surgery	20% after deductible	

HSA Plan Highlights

- You can open a Health Savings Account (HSA).
- Contribution from the City of Dallas:
 - Up to \$700 for individual coverage
 - Up to \$1,700 for family coverage
- You pay all costs for care until your deductible is met.

Network Options



Blue Choice Copay and HSA plans include the enhanced benefit tier option

- Regular BCBS in-network facility: Plan pays 80% of your facility charges (after deductible).
- Enhanced benefit facility: Plan pays 90% of your facility charges at Baylor or Methodist Health Systems (after deductible).

Network	Blue Choice	Blue Essentials	Is your Doctor in the
Network Description	Blue Choice provides a broad network of providers and covers 80% of your eligible expenses after you have met the deductible. Out-of-network services are not covered.	Blue Essentials is a targeted, narrow network , with an emphasis on the most high-quality and cost- effective physicians. Out-of- network services are not covered.	 BCBS Network? Go to <u>www.bcbstx.com</u> and click on the blue <i>Find a Doctor</i> box. Click on the Search as <i>Guest</i> box. Click on Search In- Network Providers and
Medical Plan	Copay & HSA Plan	PCP Plan	answer the on-screen questions.

Medical Coverage – Active Employee Contributions



	Full-Time Employee				
Medical Plan BI-MONTHLY* EMPLOYEE CONTRIBUTIONS	UNDER \$44,000 ANNUAL PAY	\$44,000 – \$66,000 ANNUAL PAY	\$66,001+ ANNUAL PAY	Regular Part-Time Employee	
Blue Essentials PCP Plan					
Employee Only	\$15.00	\$20.00	\$25.00	\$57.00	
Employee + Spouse	\$209.00	\$221.50	\$234.00	\$240.00	
Employee + Child(ren)	\$65.50	\$75.50	\$85.50	\$156.00	
Employee + Family	\$229.00	\$244.00	\$259.00	\$269.00	
Blue Choice Premium Copay Plan					
Employee Only	\$32.50	\$37.50	\$42.50	\$123.50	
Employee + Spouse	\$244.00	\$256.50	\$269.00	\$268.40	
Employee + Child(ren)	\$100.50	\$110.50	\$120.50	\$240.00	
Employee + Family	\$274.00	\$289.00	\$304.00	\$325.00	
Blue Choise HSA Plan					
Employee Only		\$15.00		\$57.00	
Employee + Spouse		\$209.00		\$240.00	
Employee + Child(ren)		\$65.50		\$156.00	
Employee + Family		\$229.00		\$269.00	

* Per paycheck (24 out of 26)

Pending Council approval



There are no changes to the pharmacy plan design.

30 Day Retail	Blue Essentials PCP Plan	Blue Choice Copay Plan	Blue Choice HSA Plan
Generic Medications	\$15 copay	\$15 copay	You pay 20% after medical deductible is met
Preferred Brand-Name Medications	\$40 copay	\$40 copay	You pay 20% after medical deductible is met
Non-Preferred Brand-Name Medications (Includes Specialty Drug Formulary)	\$75 copay	\$75 copay	You pay 20% after medical deductible is met

Additional Pharmacy Discounts

- Free diabetes and hypertension medications for certain drug classes.
 - Available to **Blue Essentials PCP** and **Blue Choice Copay** plan members.
- Preventive Therapy Drug List (PTDL) also available for Blue Choice HSA plan members.
- The Mail Service Pharmacy can help you save on the cost of long-term (maintenance) medications.

BCBS Discount Programs





Blue365 offers **premier health and wellness discounts** and is **free to join for medical plan members**. Members have access to discount programs in:

- Apparel & Footwear
- Fitness
- Hearing & Vision
- Home & Family
- Nutrition
- Personal Care

How to access? Visit https://www.blue365deals.com/BCBSTX/



A program administered by Sapphire Digital that offers cash rewards when a lower-cost, quality provider is selected.

How does it work?

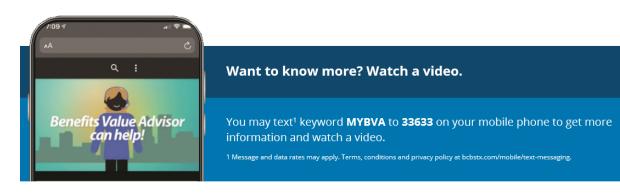
- When a doctor recommends treatment, call a Benefits Value Advisor at the number on the back of your member ID card, or log into Blue Access for MembersSM at <u>www.bcbstx.com</u> and click the *Doctors and Hospitals* tab – then on *Find a Doctor or Hospital.*
- Choose a Member Rewards-eligible location, and you may earn a cash reward!
- Complete your procedure and, once verified, you will receive a check within 4 to 6 weeks.
- Questions? Call the number on the back of your member ID card.



BVAs can help you save money on health procedures and tests. They can also help you understand and use your benefits more wisely.

You'll get guidance for all your health plan benefits so you only need one call to get support. BVAs can help you:

- Maximize your benefits to get better value
- Get cost estimates for various providers and procedures
- Schedule appointments
- Find a doctor or facility
- Set up preauthorization



One call can help you get the most from your benefits. Call the number on the back of your member ID card before your next procedure.



Pre-Tax Savings Accounts Health Savings Account (HSA)

Flexible Spending Accounts (FSA)



Health Savings Account (HSA) – Blue Choice HSA Plan Only



- The Health Savings Account (HSA) maximum annual contribution amounts will increase to \$3,850 for individual coverage and \$7,750 for family coverage.
- If you would like to participate in the HSA in 2023, you MUST actively enroll during Open Enrollment. Otherwise, your current HSA elections will end on December 31, 2022.
 - You do not have to contribute to your HSA to receive the City's contribution.
 - You can change your contribution amount at any time.

Coverage Level	Annual IRS Contribution Maximum	City Annual Contribution	Employee Contribution Maximum
Employee Only	\$3,850	\$700	\$3,150
Employee + Dependent(s)	\$7,750	\$1,700	\$6,050
Catch-Up (age 55+)	\$1,000		\$1,000

Funds are fully vested. Penalties apply if used for non-qualified expenses.

Health Savings Account (HSA) – Blue Choice HSA Plan Only



To be eligible for an HSA:

- You must participate in an IRS-qualifying high deductible health plan (HDHP).
- You cannot be entitled to benefits under Medicare or "double covered" under any other medical plan.
- You or your spouse cannot be enrolled in a Medical Spending FSA.
- You cannot be claimed as a dependent on another person's tax return.

Notes:

- While you cannot participate in the City Medical Spending FSA, you can participate in the Limited Purpose FSA, which covers dental and vision expenses only.
- If you are currently enrolled in the Medical Spending FSA, all funds must be completely exhausted by December 31st to be eligible for a 2023 HSA.

Flexible Spending Accounts – HSA Bank



2023 Limited Purpose FSA

- Set aside pre-tax dollars for eligible dental and vision expenses only
 - Medical expenses are NOT eligible for reimbursement under a Limited Purpose FSA
- Contribute up to \$2,850 per year (\$100 increase over last year!)
- Members with an HSA are eligible for a Limited Purpose FSA

Eligible Expenses

- Dental expenses not covered by insurance (deductible, coinsurance)
- Vision expenses not covered by insurance (copays, contacts, eyeglasses)

Notes

- Funds will not rollover year to year
- Must use 2023 funds by 03/15/24 grace period end date

To participate in 2023, you **MUST** actively enroll during Open Enrollment. Otherwise, your current FSA elections will end on December 31, 2022.

Flexible Spending Accounts – HSA Bank



2023 Medical FSA

- Pre-tax dollars for eligible medical expenses
- Contribute up to \$2,850 per year (\$100 increase over last year!)
- Those with an HSA are not eligible

Eligible expenses

- Prescriptions
- Deductibles, co-payments, coinsurance
- Over-the-counter items with a doctor's prescription

Notes

- Funds will not rollover year to year
- Must use 2023 funds by 03/15/24* grace period end date

*Unless you are switching to the Blue Choice HSA plan in 2024, in which case you must use all funds by 12/31/23.

To participate in 2023, you **MUST** actively enroll during Open Enrollment. Otherwise, your current FSA elections will end on December 31, 2022.



2023 Dependent Care FSA (DCFSA)

- Pre-tax dollars to pay for daycare and elder care expenses.
- Contribute up to \$5,000 per year (or \$2,500 if married filing separate returns).
- Pay for certain expenses to care for dependents that live with you.
- Covers childcare for children under age 13.
- Can also be used for adult daycare for senior citizen dependents that live with you, such as parents.
- Excludes summer camps or long-term care for parents that live elsewhere, such as in a nursing home.
- Funds will not roll over year to year must use 2023 funds by 12/31/23.
- If you have an HSA, you **are** also eligible for a Dependent Care FSA.
- Must submit online or claim form for reimbursements.

To participate in 2023, you **MUST** actively enroll during Open Enrollment. Otherwise, your current HSA elections will end on December 31, 2022.



Family Support Benefits

Paid Parental Leave

Child Care Subsidy Program





Paid Parental Leave

The City of Dallas is proud to offer <u>up to 6 weeks</u> of Paid Parental Leave to eligible employees!

- Occurs in conjunction with Family Medical Leave Act (FMLA).
- Available to eligible City of Dallas employees who have given birth, need to care for, adopted, or received placement of a child aged 12 years or younger.
- For questions or to request Paid Parental Leave, please e-mail <u>CODemployeepaidleave@dallascityhall.com</u>.

Please see the Enrollment Guide for more details, or view the Paid Parental Leave FAQ online at <u>www.cityofdallasbenefits.org</u>.



Child Care Subsidy Program

Provides a one-time subsidy of \$2,000 to assist eligible employees enrolled in the DCFSA with child-care expenses.

- Child(ren) age 12 and under.
- If you enroll in the DCFSA after January 1 due to a qualifying life event, subsidy will be prorated.

Eligible employees must:

- Receive a salary of \$66,000 or below.
- Cover their child(ren) age 12 and under on one of the City's medical plans.
 - Must be in the Employee + Child(ren) or Employee + Family coverage tier.
- Enroll in the DCFSA and call EBC (our enrollment vendor) at (214) 556-0971 to request the subsidy.
- Be a current resident of Dallas with a Dallas address on file in the system.

Please see the Enrollment Guide for more details, or view the Child Care Subsidy Program FAQ online at <u>www.cityofdallasbenefits.org</u>.



Dental Coverage Delta Dental





There are no changes to current plan designs or coverage costs for 2023!

Dental Plan BI-MONTHLY EMPLOYEE CONTRIBUTIONS			
	Dental PPO	Dental HMO	
Employee Only	\$22.27	\$6.17	
Employee + Spouse	\$40.97	\$11.35	
Employee + Child(ren)	\$41.50	\$11.41	
Employee + Family	\$57.89	\$16.05	

Dental Coverage



In-Network Benefits	Dental PPO (DPPO)	Dental HMO (DHMO)	
Network	Plus Premier	DHMO Managed Care	
Calendar Year Maximum			
(Does not apply to Diagnostic	\$1,750	Unlimited	
& Preventive Services)			
Deductible	¢EQ por porcop;		
(Applies to Basic and Major	\$50 per person;	None	
Services Only)	\$150 per family		
Preventive Services			
(Cleanings, Exams, Flouride, X-	100%	\$5 exam copay	
Rays)			
Basic Services			
(Filling, Extractions,	80% after deductible	Der consu schodulo	
Anesthesia, Non-Surgical	ou% after deductible	Per copay schedule	
Periodontics)			
Major Services			
(Crowns, Dentures, Bridges,	50% after deductible	Davi as very a slove dude	
Endodontics, Surgical	50% after deductible	Per copay schedule	
Periodontics)			
Orthodontia (Adult &	50%	Dor consu schodulo	
Child)	50%	Per copay schedule	
Orthodontia Maximum	¢1.7E0	¢1.7E0	
(Adult & Child)	\$1,750	\$1,750	

DPPO Plan Highlights

 If you use an out-ofnetwork dentist, you are responsible for 100% of the amount the dentist charges that exceeds Delta Dental's networknegotiated fee.

DHMO Plan Highlights

 You MUST select a primary dental office to begin using your benefits.

Locate a Provider

https://www1.deltadental ins.com/individuals/finda-dentist.html



Vision Coverage

Davis Vision by MetLife





Coverage costs will increase slightly for 2023.

However, current plan designs will remain unchanged.

Vision Plan			
BI-WEEKLY EMPLOYEE CONTRIBUTIONS			
	High Plan	Low Plan	
Employee Only	\$4.90	\$2.78	
Employee + Spouse	\$8.96	\$5.08	
Employee + Child(ren)	\$9.39	\$5.33	
Employee + Family	\$14.43	\$8.19	
		Pending Council approval	

Pending Council approval

Plan Highlights

- FREE frames at all Visionworks stores (excludes Maui Jim).
- In-network benefits online at glasses.com, 1-800-Contacts, and Befitting.
- Go to <u>www.mybenefits.metlife.com</u> to find providers in your network.

Vision Coverage



Plan Feature	High Plan (2-Pair Benefit)	Low Plan (iDEALChoice)
Benefits	2 pairs mix or match	Glasses or Contacts
Eye Exam Retinal Imaging	\$10 copay \$39 copay	\$10 copay \$39 copay
Frame Allowance OR Davis Vision Collection Frames	\$150 allowance plus 20% off balance OR covered-in-full frames at Visionworks locations	\$140 allowance plus 20% off balance OR covered-in-full frames at Visionworks locations
Lens Benefit		
Single Vision	Covered in full after \$10 copay	Covered in full after \$20 copay
Bifocal	Covered in full after \$10 copay	Covered in full after \$20 copay
Trifocal Lenticular	Covered in full after \$10 copay	Covered in full after \$20 copay
Contact Allowance		
Davis Vision Collection	\$10 copay, then covered in full up to 8 boxes	\$20 copay, then covered in full up to 4 boxes
Retail	\$130 allowance plus 15% off balance	\$130 allowance plus 15% off balance
Frequency Guidelines		
Exams	Once every January 1	Once every January 1
Frames	Once every January 1	Once every other January 1
Contacts or Lenses	Once every January 1	Once every January 1



Value-Added Benefits

No Cost to You!



EAP - Magellan

Your life's journey—made easier

No matter where you are on your journey, there are times when a little help can go a long way. From checking off daily tasks to working on more complex issues, your program offers a variety of resources, tools and services available to you and your household members.

Key Features:

- Provided at no cost
- Confidential service provided by a third party
- Available 24/7/365

Here's how to get started



- Give us a call and we will connect you with the
- right resource or professional.

1-800-424-1729

Visit MagellanAscend.com to browse all of the services available.



CareATC Clinics

City Hall Onsite Clinic

Blue Essentials PCP and Blue Choice Copay plan members

 Free office visits (sick and preventive), onsite-dispensed medications, and onsite lab work

Blue Choice HSA plan members

- Free preventive office visits
- \$25 fee for sick visits, onsitedispensed medications, and onsite lab work
 - Fee reduced to \$5 once the deductible has been met and \$0 once the out-of-pocket maximum has been met

CareATC is currently by appointment only! To schedule yours, call 1-800-993-8244, visit <u>www.careatc.com</u>, or use the CareATC mobile app.

	SERVICE	EXAMPLE
	Acute Care (Treatment of common illnesses and minor injuries)	FluSinus infections,Sprains
	Chronic Disease Evaluation, Monitoring and Care Management	HypertensionDiabetesAsthma
	Minor Procedures and Wound Care	Simple biopsiesSkin tag/mole removal
	Preventive Care and Comprehensive Physical Exams	 Age appropriate physicals Routine gynecological exams prostate exams kids sports/camp physicals,
	Diagnostic Testing and Screenings	On-site lab workEKGs





Diabetes management supplies and support program ALSO SUPPORTS HYPERTENSION AND CARDIOVASCULAR RISK

You receive:

- Free glucometer and testing supplies delivered to your doorstep
 - Option for a traditional glucometer or a smartphone-based glucometer
- Dedicated, certified diabetes coach to help you self-manage your condition
- Personalized action plan
- Free blood pressure cuff (hypertension support)

Talk to a Kannact representative today or sign up at:

855-722-5513, <u>support@kannact.com</u>, or <u>www.kannact.com/cityofdallas</u>



Disability Benefits



Disability Benefits



Short-Term Disability

There are no changes to current plan designs or coverage costs for 2023!

Overview of Your Short-Term Disability Benefits		
Monthly Benefit Amount	60% of the first \$2,500 of your weekly insured pre- disability earnings, reduced by deductible income.	
Monthly Benefit Mix/Max	\$15 minimum\$1,500 maximum	
Benefit Waiting Period	14 days*	
Maximum Benefit Period	90 days	

*If you elect coverage after your initial eligibility period, an extended benefit waiting period of 60 days will apply for the first 12 months of coverage.

Disability Benefits



Long-Term Disability

There are no changes to current plan designs or coverage costs for 2023!

	Overview of Your Long-Term Disability Benefits		
	VOLUNTARY PLAN (LESS THAN 12 MONTHS OF EMPLOYMENT)	EMPLOYER-PAID PLAN (12+ MONTHS OF EMPLOYMENT)	
Monthly Benefit Amount	60% of the first \$8,333 of your insured pre- disability earnings, reduced by deductible income.	60% of the first \$12,500 of monthly pre-disability earnings, reduced by deductible income.	
Monthly Benefit Min/Max	 \$100 minimum \$5,000 maximum 	 \$100 minimum \$7,500 maximum 	
Benefit Waiting Period	90 days	90 days	
Maximum Benefit Period	 If you become disabled before age 62, LTD benefits may continue until age 65 or to SSNRA, or 3 years 6 months, whichever is longest. If you become disabled at age 62 or older, the benefit duration is determined by the age when disability begins. 	 If you become disabled before age 61, LTD benefits may continue until age 65 or to SSNRA, or 3 years 6 months, whichever is longest. If you become disabled at age 62 or older, the benefit duration is determined by the age when disability begins. 	

Please note: Evidence of Insurability (EOI) may be required if you elect coverage after your initial enrollment period.



Life and AD&D Benefits



Life and AD&D



Basic Life Coverage

• Full-time employees: \$75,000 benefit paid for by the City

Supplemental Life Coverage

- Must have employee coverage to elect dependent coverage
- Employees who previously elected supplemental life can increase their amount by one increment up to the Guarantee Issue without answering Evidence of Insurability

Election Limits

- Employee 1x, 2x, or 3x annual salary up to \$500,000
- Spouse \$15,000 or \$25,000
- Child \$5,000 or \$10,000

Remember to update your beneficiary information!

Accidental Death & Dismemberment (AD&D)



Voluntary AD&D

- Must have employee coverage to elect dependent coverage
- Election limits
 - Employee \$25,000 increments up to \$250,000
 - Cannot exceed 10x annual salary
 - Spouse Only 60% of employee coverage
 - Child Only 20% of employee coverage up to \$50,000 per child
 - Spouse and Child
 - Spouse 50% of employee coverage
 - Child 15% of employee coverage

Remember to update your beneficiary information!



Other Voluntary Benefits



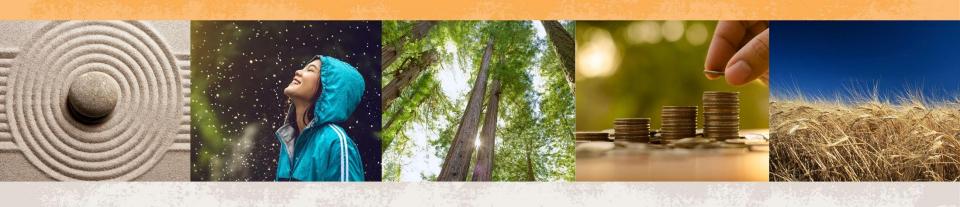


Voluntary Benefit Plan Highlights – Benefits Paid Directly to You!		
NEW! Employee Perks	 Enjoy private discounts and corporate rates on a variety of activities and travel! Register at <u>https://cityofdallas.employeeperks.com/GO</u> 	
<mark>NEW!</mark> PNC Bank	 Learn how to make your money work harder for you through seminars, workshops 	
<mark>NEW!</mark> Legal Plan MetLife	 You have two plan options: Legal Plan and Legal Plan Plus LifeStages Premium Identity Protection and Restoration. Both plans provide legal guidance for popular legal matters, including traffic and criminal matters, civil lawsuits, family and personal, estate planning, home and real estate, money matters, and elder-care issues. 	
NEW! Pet Insurance MetLife	 Coverage is available for dogs and cats. Helps cover the cost of unexpected vet expenses due to covered accidents or illnesses. 	



Voluntary Benefit Plan Highlights – Benefits Paid Directly to You!		
Accident Insurance	 In the event of a covered benefit, this benefit will assist in paying your deductible, copays, and other medical bills or your daily expenses while you recover Health screening benefit of \$75 	
Critical Illness Insurance	 Includes cancer care Higher guarantee issue (GI) amounts and ongoing GI for future life events and future annual enrollments Waived pre-existing conditions limitation New \$50 health maintenance screening benefit 	
Hospital Indemnity Insurance	 Covers unexpected out-of-pocket expenses when you end up in the hospital New \$50 health maintenance screening benefit Guarantee Issue (GI) for employees and dependents during the 2020 enrollment and ongoing GI for future life events and future annual enrollments Waived pre-existing condition limitation 	

- No evidence of insurability (EOI) required for most first-time elections during Open Enrollment only.
- Critical Illness insurance elections over \$30,000 will still require EOI.
- After Open Enrollment, EOI may be required for all elections regardless of coverage level.



Next Steps



What Do I Need to Do for 2023 Enrollment?



Enrollment

You only need to complete the enrollment process if you want to:

- Participate in a Medical Spending or Limited Purpose Flexible Spending Account (FSA)
- Participate in the Dependent Care Flexible Spending Account (HSA)
- Contribute to a Health Savings Account
- Make changes to your current benefit elections
- Add or drop a dependent
- Update your beneficiary designations

If you don't complete the enrollment process, your current City of Dallas benefit elections – excluding FSA and HSA elections – will carry over for 2023.

Payroll Beneficiary Form

Everyone MUST update the Payroll Beneficiary Form during Open Enrollment.

- Log in to <u>https://standard.benselect.com/cityofdallas</u> to complete it.
- If you are unable to complete the form online, call (214) 556-0971 for assistance.

Enrollment Reminder



Online: https://standard.benselect.com/cityofdallas



Having trouble accessing the system?

• Contact the Enrollment Center at (214) 556-0971.

By phone with a Benefit Specialist

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• Benefit Specialists will be available starting September 12th.





Contact the Enrollment Center

- Call (214) 556-0971
- E-mail <u>yourenrollment@ebcoh.com</u>

View our Benefit Materials and FAQ documents

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