



FREQUENTLY ASKED QUESTIONS

1. What is Open Enrollment?

Open Enrollment is the one time of year when you can make changes to your benefit choices for the upcoming calendar year. During Open Enrollment, you can:

- Keep, change, newly enroll in or waive coverage for medical, dental and vision benefit plans
- Enroll in Flexible Spending Accounts for Health Care and/or Dependent Care anticipated expenses
- Elect Cash Out Vacation hours
- Designate Excess Management Benefit distribution (if applicable).

2. When does open enrollment start and end?

This year, Open Enrollment starts on **September 21, 2020** and ends on **October 16, 2020**.

3. When do Open Enrollment changes take effect?

Changes and elections made during Open Enrollment take effect on January 1, 2021.

4. Will there be a Benefit Fair this year?

Yes, the Open Enrollment Benefit Fair will be held virtually starting on Thursday September 21 through October 16, 2020. Provider representatives from our various benefit plans will be available to answer employee questions.

5. Do I have to make a change if I want the same benefits as last year?

Your 2020 Medical/Dental/Vision benefits will roll over into 2021 if you do not make any changes during Open Enrollment. Benefit Elections related to Healthcare Flexible Spending accounts, Daycare Flexible Spending accounts, Vacation Cash-out elections and Excess Management elections do NOT rollover which means you have to complete Open Enrollment in order to have these benefits in 2021. In any case, we encourage you to log-in to the Employee Self Service (ESS) Open Enrollment portal to review the accuracy of your current benefits and dependent coverage.

6. What are the major changes effecting Medical Plans in 2021?

- Employee premium costs are either remaining the same or increasing (please review rate sheet for deductions per pay period)
- Health Plans that are staying at the same cost per pay period for employees are Kaiser, PORAC (only for Police & Fire), PERS Select, and Western Health Advantage.
- Plans that are increasing include: Anthem HMO Traditional, HealthNet SmartCare, PERS Care, and PERS Choice.

7. Which health plans does Sutter Health Palo Alto Medical Foundation (PAMF) accept?

For information on plans accepted by Sutter Health PAMF, please visit the link below

<http://www.pamf.org/physicians/healthplans.html>

Sutter Health PAMF accepts the following plans from our plan offerings: PERS Choice, PERSCare, PORAC (Safety employees only) and Anthem Traditional HMO Bay Area. If you plan on remaining with your PAMF physician, please verify acceptance of these plans with your physician's billing department.

8. How can I find out which doctors are under a particular plan?

Please visit the [CalPERS Health Benefit page \(https://www.calpers.ca.gov/page/active-members/health-benefits/plans-and-rates\)](https://www.calpers.ca.gov/page/active-members/health-benefits/plans-and-rates) to compare different plans, determine out of pocket costs, look up doctors plus much more.



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9. What if a health plan is not available in my residential area?

Active employees can select a health plan using either their residential zip code or the City's work zip code. For more information on plans available by zip code please visit the [CalPERS Health Plan Search by Zip Code](https://calpers.ca.gov/page/active-members/health-benefits/plans-and-rates/zip-search) (calpers.ca.gov/page/active-members/health-benefits/plans-and-rates/zip-search) tool.

10. Can I choose to opt-out of Medical insurance entirely?

Yes. The City has an Alternate Medical Program that compensates employees who opt-out of medical insurance. Please refer to your MOA or Compensation Plan to learn more about this benefit. To sign up for the Alternate Medical Program, submit a hard copy of the [waiver form](#) to Human Resources. You will also be required to submit proof of outside medical coverage along with the waiver form.

11. What are the maximum contributions I can make towards my Flexible Spending account(s)?

Health Flexible Spending account: Per IRS limits, the maximum amount you can contribute towards your Health FSA is \$2,750 per plan year.

Dependent Care Flexible Spending account: Per IRS limits, the maximum amount you can contribute towards your Dependent Care FSA is 5,000 for qualifying individuals and those who are married and file a joint return and \$2,500 for those who are married and file separate returns.

12. Can I make changes to my Flexible Spending account after Open Enrollment?

Flexible Spending elections can only be made during the Open Enrollment period or if you have a qualifying life event during the year. Please make your elections wisely as these are the only opportunities to make these changes.

13. What are the maximum contributions towards my 457- Deferred Compensation account?

The normal contribution limit for elective deferrals to a 457 deferred compensation plan remains unchanged at \$19,500 in 2021. Employees age 50 or older may contribute up to an additional \$6,500, for a total of \$26,000. Employees taking advantage of the special pre-retirement catch-up may be eligible to contribute up to double the normal limit, for a total of \$39,000.

14. Can I make changes to my 457 elections after Open Enrollment?

Yes. You may make changes to your 457 elections at any time during the year. However, 457 election changes will take effect the month following the date the City's HR department receives your completed change form.

15. Will I receive a confirmation after I've made my online Benefit elections?

Yes, once you have completed your Open Enrollment on ESS, you will receive an email notification to your work email with your benefit confirmation attached. If you do not receive the email, then please log into ESS again to complete Open Enrollment and ensure you hit "save" to complete Open Enrollment.