



City of Anaheim Employee Benefits

Open Enrollment 2018 is October 11 through October 27, 2017

Welcome to Open Enrollment for your City of Anaheim Benefits

Open Enrollment is your once-a-year opportunity to change your benefit plan elections. It's the only time during the year that you can make changes (unless you have a qualified life event such as a change in marital status) so be sure to review the contents to ensure you have the right benefits for you and your family in 2018. Check out the benefits website for more information. Go to www.myanaheimbenefits.com.

What You Need to Know

There are no plan changes for 2018, but there will be some cost changes. See your 2018 Rate Sheet on page 4 for details.

WHAT'S IN THIS PACKET

- This flyer, which includes 2018 medical and dental rates
- The *2018 Employee Benefits Summary Comparison Chart*, which provides a side-by-side look at each plan
- A personalized form showing your current elections and coverage levels

What You Need to Do

You only need to take action during Open Enrollment if you want to:

- Change your current benefit elections
- Change the dependents you cover
- Contribute to a Flexible Spending Account (FSA) for 2018

If you want to make changes or enroll in an FSA, you must complete online enrollment by October 27, 2017.

If you DON'T take action during Open Enrollment, your 2017 benefit elections – except FSAs – will continue for 2018. You will not have FSAs for 2018.

MARK YOUR CALENDAR!

OCTOBER 11: Annual Health and Lifestyle Expo

Get answers to your benefit questions, meet representatives from our wellness partner The Vitality Group, and talk with benefits providers.

When: 9 a.m. to 2 p.m.

Where: Anaheim Downtown Youth Center
225 S. Philadelphia St. Anaheim, CA 92805

OCTOBER 11: Open Enrollment begins

OCTOBER 27: Open Enrollment ends



Any elections and/or changes made during Open Enrollment will be effective January 1 through December 31, 2018. If you don't take action during Open Enrollment, you won't be able to make any changes to your benefit elections until next year's Open Enrollment. If you have a qualified life event during the year (such as a change in marital status), you will have 30 days from the date of the event to notify Human Resources of your enrollment changes.

For more benefits information, check out the website! Go to www.myanaheimbenefits.com.





How to Enroll

Go to the City's Employee Self-Service (ESS) Benefit Enrollment Wizard and log-in using:

- **User Name:** Your six-digit Employee ID found at the top of your paycheck stub.
- **Password:** Your current ESS password. If you forgot your password, click "forgot your password" and it will be emailed to you.

You Can Enroll at City Hall!

For your convenience, the City is offering you the opportunity to enroll on City computers.

When: 11 a.m. to 1 p.m. on:

- Tuesdays: October 17 and October 24
- Thursdays: October 12 and October 19

Where: City Hall Building, Ground Floor Technology Training Room

If You Add Dependents



When you enroll a dependent for the first time, you must provide documentation that proves their eligibility for benefits, such as a marriage license or birth certificate. If you enroll a new dependent during Open Enrollment, you must provide documentation to the Benefits Department by November 30, 2017 or they will not be covered in 2018.

Don't Forget about Teladoc: Anytime, Anywhere Access to Health Care



If you're in an Aetna medical plan, you have 24/7 access to doctors through Teladoc. Just call any time you need to talk to a doctor about a non-emergency medical condition, and within a half hour you'll be connected. It's all available for a small copay! Go to www.teladoc.com/Aetna to use Teladoc. You can also call the Informed Health Line at 800-556-1555.

If you're in a Kaiser medical plan, you can use the "Contact a Professional" feature to send a confidential health question to a Kaiser health professional. Visit www.kp.org for more information.

Vitality Wellness

More than a third of your colleagues have participated in Vitality to both improve their health and win some Vitality Bucks, which can be used to purchase health-related products in the Vitality Store. What are you waiting for? Be part of the next challenge! Watch for information via email and from your Department Wellness Champions.

Gaining Momentum ...

We've got some amazing participation already with our new wellness partner. Check out these impressive statistics:

- Number of verified workouts reported to date: More than 45,000
- 421 Vitality Health Review Completions
- More than 1,500 educational activities

Join the Movement

Visit www.powerofvitality.com to get started today!

What people are saying about Vitality ...

"Vitality really makes it easy to engage in wellness activities. I love Vitality!"

— Feedback from our wellness survey



Aetna HSA OAMC: A Different Type of Plan

The Aetna HSA OAMC is a unique medical plan that works differently from the other plans offered by the City. It is made up of two components:

Part 1: Medical Plan	+	Part 2: Health Savings Account (HSA)	=	Aetna HSA OAMC Plan
The same OAMC network of providers and comprehensive coverage you're used to. An annual deductible that works a little differently than with other plans.		A way to save money tax-free to use for health care expenses now or in the future.		

Important! This plan has a higher deductible. However, it also lower per-pay-period contributions than the Aetna OAMC Plan. If you put the money you save on contributions into the HSA, you can use tax-advantaged funds to help meet the deductible. Together, these components give you comprehensive medical coverage and complete control over what health services you buy and how you spend your money on health care.

Medical Coverage and the HSA: How They Work Together

HEALTH SAVINGS ACCOUNT (HSA)			
Your contributions to the HSA can help pay your deductible and coinsurance. Any money you don't use this year carries over into next year.			
Preventive Care	Deductible	Coinsurance	Out-of-Pocket Maximum
Plan pays 100% when in-network; no deductible required	You pay 100% of costs for care until deductible is met. Then, coinsurance kicks in.	When you receive care, you pay a percentage of the costs; you pay a copay for prescription drugs, with no deductible required.	Once your expenses reach this amount, the plan pays 100% of covered expenses for the rest of the year. There is an unlimited lifetime maximum benefit.

Your Health Savings Account (HSA)

The unique feature of the Aetna HSA OAMC Plan is the opportunity to open an HSA. You may open your HSA with the City's administrator PayFlex, or with any other qualified financial institution. You may make before-tax contributions each paycheck, and you can make additional contributions (up to IRS limits) on an after-tax basis directly into your HSA. You own the HSA and can use your account balance to pay for current or future health care expenses.

START IT!	GROW IT!	USE IT!
<ul style="list-style-type: none"> ▪ If you enroll in the Aetna HSA OAMC Plan, you'll be contacted by Human Resources to complete enrollment in an HSA. ▪ If you're enrolled in Medicare Part A and/or Part B you cannot open an HSA. 	<ul style="list-style-type: none"> ▪ Make pre-tax contributions through payroll deductions. Make additional after-tax contributions directly to your HSA. For 2018, you may contribute a total of \$3,450 if you have individual coverage or \$6,900 if you cover dependents. ▪ Once your HSA equals \$1,000 you may invest it in mutual funds. 	<ul style="list-style-type: none"> ▪ Use the money in your HSA to pay for covered health care expenses. All withdrawals are tax-free! ▪ Any money you don't use in 2018 will be available for you to use in the future. ▪ You need to save your receipts for tax purposes.

Be sure to review details in Your 2018 Benefits Guide at www.myanaheimbenefits.com.



2018 Rate Sheet

The following charts show your per-pay-period contributions for medical and dental coverage. Vision coverage and costs are bundled with medical coverage.

Medical Plan Costs

	Total Monthly Cost	Amount City Pays (Per Month)	Amount You Pay (Per Month)	Amount You Pay Per-Pay-Period
Kaiser HMO				
Single	\$564.39	\$503.87	\$60.52	\$30.26
Two-Party	\$1,128.76	\$1,007.64	\$121.12	\$60.56
Family	\$1,597.20	\$1,425.84	\$171.36	\$85.68
Aetna HMO				
Single	\$818.14	\$707.76	\$110.38	\$55.19
Two-Party	\$1,639.69	\$1,422.97	\$216.72	\$108.36
Family	\$2,319.15	\$2,004.21	\$314.94	\$157.47
Aetna OAMC Plan				
Single	\$1,375.19	\$1,050.95	\$324.24	\$162.12
Two-Party	\$2,750.41	\$2,094.69	\$655.72	\$327.86
Family	\$3,891.82	\$2,949.52	\$942.30	\$471.15
Aetna HSA OAMC Plan				
Single	\$1,159.73	\$917.87	\$241.86	\$120.93
Two-Party	\$2,319.43	\$1,830.35	\$489.08	\$244.54
Family	\$3,282.01	\$2,577.23	\$704.78	\$352.39

Dental Plan Costs

	Total Monthly Cost	Amount City Pays (Per Month)	Amount You Pay (Per Month)	Amount You Pay Per-Pay-Period
DeltaCare USA DHMO Plan				
Single	\$17.39	\$17.39	\$0.00	\$0.00
Two-Party	\$28.75	\$28.75	\$0.00	\$0.00
Family	\$42.50	\$42.50	\$0.00	\$0.00
Delta Dental PPO Plan				
Single	\$ 57.72	\$ 24.99	\$ 32.73	\$ 16.37
Two-Party	\$ 98.14	\$ 38.89	\$ 59.25	\$ 29.63
Family	\$ 150.07	\$ 56.03	\$ 94.04	\$ 47.02