

# Annual Employee Benefit Open Enrollment October 9 – November 3, 2023

For January 1, 2024 – December 31, 2024, plan year \*Please allow until December 1, 2023, to receive your enrollment approval email\*

### To All Benefit-Eligible Employees – 2024 Benefit Plan Announcement:

Open Enrollment is your annual opportunity to review and make changes to your benefits. It is the **only** time each year that you may make changes to your benefits unless you have a qualifying life event, which is defined as marriage, divorce, birth/adoption of a child, change of dependent eligibility, or change in employment status.

During Open Enrollment you may:

- Enroll in or change your current health plans (medical/dental/vision plans)
- Add or remove eligible dependents to your plan(s)
- Renew or enroll in waiver of medical coverage to receive \$125 per month cash in lieu of benefits (DOCUMENTATION OF ALTERNATIVE COVERAGE IS REQUIRED)
- Renew or enroll in a Section 125 reimbursement account for dependent care and/or medical expenses

#### **2024 Medical Plans:**

Kaiser Permanente (KP), Sutter Health Plus (SHP), and Western Health Advantage (WHA) will continue to provide medical plan coverage in 2024. EGUSD will continue to pay 80% of the average premium cost and employees will pay the difference between the premium total and the District's 80% share. The new compensation deduction amount will begin with your paycheck ending January 2024. The District will continue to provide vision coverage through VSP and dental coverage through Delta Dental at no cost to employees.

#### **Compensation Deductions Effective January 2024**

Standard Plan Rates:

|                  | EMPLOYEE MONTHLY SHARE |          |            | EMPLOYER MONTHLY SHARE |            |            | TOTAL MONTHLY PREMIUM |            |            |
|------------------|------------------------|----------|------------|------------------------|------------|------------|-----------------------|------------|------------|
|                  | Employee               | Employee | Employee   | Employee               | Employee   | Employee   | Employee              | Employee   | Employee   |
| Carrier          | Only                   | +1       | +2 or more | Only                   | +1         | +2 or more | Only                  | +1         | +2 or more |
| KP               | \$218.88               | \$437.84 | \$619.49   | \$597.54               | \$1,195.00 | \$1,690.97 | \$816.42              | \$1,632.84 | \$2,310.46 |
| SHP & TruHearing | \$168.66               | \$337.02 | \$476.70   | \$597.54               | \$1,195.00 | \$1,690.97 | \$766.20              | \$1,532.02 | \$2,167.67 |
| WHA              | \$60.60                | \$121.40 | \$172.02   | \$597.54               | \$1,195.00 | \$1,690.97 | \$658.14              | \$1,316.40 | \$1,862.99 |
| VSP Vision       | \$0.00                 | \$0.00   | \$0.00     | \$7.02                 | \$14.04    | \$19.87    | \$7.02                | \$14.04    | \$19.87    |
| Delta Dental     | \$0.00                 | \$0.00   | \$0.00     | \$62.54                | \$125.08   | \$176.99   | \$62.54               | \$125.08   | \$176.99   |

Refer to the EGUSD website for Voluntary Plan rates available to benefit eligible AFSCME, CSEA, NUHW, PSWA, and EGTEAMS employees.

| 2024 Employee Monthly Cost/(Savings) when changing standard plans |               |             |                     |  |  |  |  |  |
|---|---------------|-------------|---------------------|--|--|--|--|--|
| Carrier   | Employee Only | Employee +1 | Employee +2 or more |  |  |  |  |  |
| KP to KP  | \$48.22       | \$96.47     | \$136.57            |  |  |  |  |  |
| KP to SHP   | (\$2.00)      | (\$4.35)    | (\$6.22)            |  |  |  |  |  |
| KP to WHA   | (\$110.06)    | (\$219.97)  | (\$310.90)          |  |  |  |  |  |
| SHP to SHP  | \$37.32       | \$74.57     | \$105.29            |  |  |  |  |  |
| SHP to KP   | \$87.54       | \$175.39    | \$248.08            |  |  |  |  |  |
| SHP to WHA  | (\$70.74)     | (\$141.05)  | (\$199.39)          |  |  |  |  |  |
| WHA to WHA  | (\$48.88)     | (\$97.73)   | (\$138.21)          |  |  |  |  |  |
| WHA to KP   | \$109.40      | \$218.71    | \$309.26            |  |  |  |  |  |
| WHA to SHP  | \$59.18       | \$117.89    | \$166.47            |  |  |  |  |  |

## **Wellness Rebate Amount and Requirements:**

EGUSD will continue to offer a 5% rebate of your paid premium upon completion of a Wellness Rebate Certification form.

| 5% Rebate             | Employee Only | Employee +1 | Employee +2 |
|-----------------------|---------------|-------------|-------------|
| Monthly               | \$37.35       | \$74.69     | \$105.68    |
| Annual Maximum Rebate | \$448.20      | \$896.28    | \$1,268.16  |

## Need more information about options and/or enrollment changes?

Throughout the Open Enrollment period, information will be emailed to all District employees with links to BenefitBridge, the online enrollment portal. All information will be posted to the EGUSD Benefits website.

Scan for more
Open
Enrollment
information on
EGUSD's website

EGUSD is hosting a Benefits Fair on October 24, 2023, 2-7:30 pm, at Laguna Creek High School Gym, and an ongoing virtual Benefits Fair available online. More info to come.