

Issue Date: October 21, 2011

To: Personnel Liaisons, Attendance Clerks, Supervisors, and Managers

Subject: **2011 OPEN ENROLLMENT; ADDITIONAL DENTAL, FLEXELECT, COBEN,
AND VISION BENEFIT INFORMATION**

PLEASE ENSURE THAT THIS INFORMATION IS SHARED WITH YOUR EMPLOYEES.

Purpose of document This memo provides important information on the 2011 Open Enrollment for the Dental, FlexElect, and CoBen Programs, 2012 Dental and Vision plan premiums, and 2012 CoBen allowance. Please refer to HR Memo 11-029a for specific information regarding open enrollment for health.

Open enrollment Open enrollment is from October 10, 2011 through November 4, 2011. The effective date of all open enrollment transactions is January 1, 2012.

During open enrollment, eligible employees may enroll, change, add or delete family members in health and dental plans and enroll or cancel their flex-elect participation. For FlexElect and CoBen, eligible employees may enroll, cancel, or change their current options. No action is necessary for currently enrolled employees who don't want to change their FlexElect Cash Option, CoBen Cash Option, and/or dental enrollment. However, Permanent Intermittent (PI) employees must re-enroll in the FlexElect/CoBen Cash Option during open enrollment if they want to remain in the program next year. Additionally, employees who want to continue enrollment next year in a FlexElect Reimbursement Account must re-enroll during open enrollment.

Dental Plan Options and Contact Information The Department of Personnel Administration (DPA) contracts with Delta Dental, DeltaCare USA, Premier Access, SafeGuard, and Western Dental to provide the following dental insurance plans for eligible rank and file employees (except those in Bargaining Unit 6), excluded employees, and retirees/annuitants:

**Dental Plan
Options and
Contact
Information
(cont'd)**

- Delta Dental Premiere Basic (Represented employees)
1-800-225-3368
- Delta Dental Premiere Enhanced (Excluded employees)
1-800-225-3368
- Delta Dental Preferred Provider Option (PPO)
1-800-225-3368
- SafeGuard Standard
1-800-880-1800
- SafeGuard Enhanced
1-800-880-1800
- DeltaCare USA
1-800-422-4234
- Premiere Access
1-888-534-3466
- Western Dental
1-866-859-7525

The California Association of Highway Patrolmen (CAHP) offers its own indemnity dental plan to BU 5 employees who are CAHP members, but its members may opt to enroll in a State-sponsored prepaid plan. The California Correctional Peace Officers Association (CCPOA) provides dental insurance to BU 6 employees who are CCPOA dues paying members. Represented employees in BU 5 and 6 are advised to contact their Benefit Trust for information regarding their union-sponsored dental plan premiums and benefits.

**State
Sponsored
Dental Plan
Premium
Rates and
Employer
Contribution
Amounts**

The premiums shown on the next page are effective January 1, 2012. They don't include the administrative fee of \$1.69 per month. For employees under CoBen, the total premium is deducted from the CoBen benefit allowance.

**State
Sponsored**

Delta Dental Premier Basic Plan for Represented Employees

Dental Plan Premium Rates and Employer Contribution Amounts (con'td)

Coverage	2012 Total Premium	State Contribution	Employee Share
Employee only	\$54.28	\$40.71	\$13.57
Employee plus 1 dependent	\$96.48	\$72.36	\$24.12
Employee plus 2 or more dependents	\$140.48	\$105.36	\$35.12

Delta Dental Premier Enhanced Plan for Excluded Employees

Coverage	2012 Total Premium
Employee only	\$56.55
Employee plus 1 dependent	\$113.53
Employee plus 2 or more dependents	\$160.40

Delta Dental Preferred Provider Option (PPO) for Excluded and Represented Employees

Coverage	2012 Total Premium	State Contribution	Employee Share
Employee only	\$46.09	\$34.57	\$11.52
Employee plus 1 dependent	\$91.39	\$68.54	\$22.85
Employee plus 2 or more dependents	\$138.46	\$103.85	\$34.61

Prepaid Dental Plan 2012 Premiums

Premiums for DeltaCare USA, SafeGuard, Premier Access, and Western Dental will remain the same for 2012. The State will continue to pay 100% of the premium for employees not in CoBen. For employees in CoBen, the State's share and employee's share do not apply. Therefore, the total dental premium will be deducted from the monthly CoBen allowance on their January 1, 2012, pay warrants (December 2011 pay period). Prepaid dental plans' premiums are listed on the next page.

State Sponsored Dental Plan

Coverage	SafeGuard Standard	SafeGuard Enhanced	DeltaCare USA	Premiere Access	Western Dental
Employee					

Premium Rates and Employer Contribution Amounts (con'td)

only	\$16.58	\$16.92	\$17.72	\$16.63	\$14.72
Employee plus 1 dependent	\$26.86	\$28.63	\$29.07	\$26.94	\$24.29
Employee plus 2 or more dependents	\$37.62	\$35.27	\$40.21	\$37.73	\$34.46

Union Sponsored Dental Plan Rates and Contribution Amounts

Employees may contact their respective Union for dental plan information, including rates and contribution amounts. You may also access the rates and contribution amounts for the Union sponsored dental plans at the following link: [Union Sponsored Dental Plan Rates](#)

Employees Off Active Pay Status

Eligible employees, who are off active pay status during the entire open enrollment period, may contact their personnel office during the open enrollment period to make changes in their dental enrollment or may wait and make changes within 60 days after returning to active pay status.

Restrictions on Enrollment in Delta Dental Plans

Except as noted below, employees must enroll in a State-sponsored prepaid dental plan during their first 24 months of State service. At the end of this 24-month period, employees who wish to enroll in the Delta Dental Premier or Delta Dental Preferred Provider Option (PPO) plan have 60 days to do so. Those employees who choose not to enroll in a prepaid plan may elect a Delta Dental plan within 60 days after completing the restriction period, unless they enrolled in the FlexElect or CoBen Cash Option for dental. This enrollment is available outside the open enrollment period.

The following employees are **not** subject to the 24-month restriction:

- represented employees in BU's 2, 7, 8, 16, 17, 18, and 19;
- excluded employees;
- employees who were previously State employees for 24 consecutive months without a permanent break in service during the 24 months.

Restrictions on Enrollment

CAHP Dental Plan Restriction

Employees in BU 5 who are restricted to a State-sponsored prepaid dental

**in Delta
Dental Plans
(cont'd)**

plan must complete 24 months of State service before they are allowed to enroll in the union-sponsored indemnity Blue Cross Dental Plan. At the end of this 24-month period, employees have 60 days to enroll in their union-sponsored Blue Cross Dental plan if they choose to do so. This enrollment is available outside of the open enrollment period.

CCPOA Dental Plan Restriction

Employees in BU 6 who are restricted to the union-sponsored prepaid plan, Western Dental, must complete 12 months in the prepaid plan before they are allowed to enroll in the union-sponsored indemnity dental plan, Primary Dental. At the end of this 12-month period, employees have 60 days to enroll in the union-sponsored indemnity dental plan if they choose to do so. This enrollment is available outside of the open enrollment period.

CCPOA Dental Plan Eligibility

Under agreement between the Department of Personnel Administration (DPA) and the CCPOA Benefits Trust, employees with the California Department of Corrections and Rehabilitation in supervisory (S06), managerial (M06), excluded (E06), or confidential (C06) classifications will now have the option to elect CCPOA Benefit Trust Fund (BTF) dental plans as well as State sponsored dental plans. With this change, rank and file employees in BU 6 who promote will now have the option to remain in their CCPOA plan, or change to one of the excluded classifications designated under BU 6.

Employees in these classifications wanting to change their enrollment into a CCPOA BTF dental plan may do so during the scheduled 2011 open enrollment period occurring October 10 through November 4, 2011.

Questions regarding the CCPOA dental plans, including coverage and benefits questions, must be directed to the CCPOA at 1-800-468-6486.

These provisions do not change the new BU 6 agreement recently approved by the Legislature, which requires non-dues paying BU 6 officers be placed in Fair Share. Because of this change, BU 6 officers are no longer eligible to maintain enrollment in a State-sponsored dental plan and must enroll into one of the CCPOA Benefit Trust, union-sponsored dental plans. Additional details of this new process will be forthcoming under a separate PML.

**Affidavit for
Domestic
Partners
(DPA 680)**

As a reminder, the Affidavit for Domestic Partners or same-sex spouses being claimed as economic dependents (DPA 680 form) must be completed and retained in the employee's personnel file for employees who enroll domestic partners as dependents on their State dental and/or

health plans. Dental enrollment forms must note the DPA 680 is on file to advise the State Controller of this status. The value of the additional benefits received by a domestic partner will be added to an employee's taxable income.

Dental Plan Permitting Events

You must complete a Dental Plan Enrollment Authorization form (STD692) if making any changes, starting new, or discontinuing your dental coverage. Select one of the permitting event reasons below and enter in box #18 of the STD692 form.

- New Enrollment
- Addition/deletion of dependent(s) (may use 1 form)
- Change of dental plan
- Change of plan and addition/deletion of dependent(s) (may use 1 form)

Completing form STD692

The table below will assist you with completing the STD692 form:

Box	Item Description	Enter the following:
Section A		
1	Type of Action	Mark appropriate box
2	Demographic Info	Complete as requested
3	Permanent Intermittent	Mark if applicable
4	Marital Status	Mark appropriate box
5	Sex	Mark appropriate box
6	SS #	Complete as requested
Section B		
1	Name of dental plan	Complete with new plan name if changing; with same plan name if no change
2	Provider/Facility #	Leave Blank
3	Persons on plan	Complete with information for all persons to be included on the plan
Section C		
1	Prior plan name	Complete for plan changes if different than B1 and cancellations only
Section D		
1	Action requested	Mark appropriate box
2	Signature	Original signature required
3	Date Signed	Date document signed

Completing form STD692 (cont'd)

Section E		
1 - 17	Personnel Use Only	Leave Blank

18	Remarks	Complete with permitting event reason per chart above
19, 20	Personnel Use Only	Leave Blank

FlexElect

The 2012 FlexElect handbook is available and can be downloaded from DPA's website at www.dpa.ca.gov (click on Publications).

When an employee wants to cancel his/her Cash Option enrollment and re-enroll in dental and/or medical coverage, a Cash Option cancellation form (STD 701C) must be attached to the dental and/or medical enrollment form.

DPA mails an open enrollment notification to the homes of employees currently enrolled in a FlexElect Reimbursement Account, as a reminder that they must re-enroll (STD 701R) during open enrollment if they want to participate in a reimbursement account in 2012.

Employees who enroll in or make changes to their FlexElect election during the open enrollment period and employees, who are automatically reenrolled into the cash option, are allowed by Internal Revenue Code 125 to cancel or change their elections until 12/31/11. A new STD. 701C, STD. 701R, or STD 702 must be completed and signed by the employee by 12/31/11.

Once the new plan year begins, employees may not cancel or change their FlexElect/CoBen enrollment unless they experience a valid change in status.

*Reminder:

Effective January 1, 2011, State employees, who are dependents on their parent's benefits, if their parent is a State employee, are **eligible to receive the Flex cash or CoBen cash in lieu of coverage**. This is a change from previous years and will bring the State into compliance with the new federal health care reform requirements. Elections for CoBen Cash Option may be done during any open enrollment period.

CoBen

When an employee wants to cancel his/her cash option enrollment and re-enroll in dental and/or medical coverage, a CoBen cash option cancellation form (STD 702) must be attached to the dental and/or medical enrollment form for SCO processing.

Employees who enroll in CoBen Cash Option during the open enrollment

period and employees who are automatically re-enrolled in CoBen Cash Option have until December 31, 2012, to cancel their enrollment or make changes.

The 2012 CoBen handbook is available for download from DPA's website at www.dpa.ca.gov (click on Publications). Please refer to the BAM Section 1600 for information regarding CoBen and processing instructions for open enrollment forms.

CoBen Calculator

The CoBen Calculator on DPA's website will help employees determine how much will be deducted from their paycheck, or added to it, based on the health and dental plans chosen. Employees simply click on their health and dental plan choices, and select how many dependents will be covered.

The calculator automatically computes the total cost of the benefits selected and subtracts the amount from the CoBen allowance. The result shows whether the employee will have a monthly benefit deduction or receive extra cash. The CoBen calculator is located at www.dpa.ca.gov (click on Benefits and then click on Consolidated Benefits).

Vision Plan

The premium paid to Vision Service Plan (VSP) for vision benefits for active employees will remain the same at the rate of \$8.64 and will continue to be fully paid by the State. State employees' vision coverage is automatically established for employees and their eligible dependents, and no form is required to enroll, add, or delete dependents during open enrollment. Therefore, employees need to continue to ensure that only eligible dependents are provided services under their State-sponsored vision plan.

Deadline

Submit all Open Enrollment transactions as they are received. All documents must be completed and signed by the employee by **November 4, 2011** and received in OHR **no later than November 7, 2011**.

Questions

If you have any questions, please contact your Personnel Specialist.

/s/
TERRI HAMILTON, Chief

Office of Human Resources

TH/jal

Attachments

cc: Personnel Transactions
Personnel Analysts