

County of Sonoma
Annual Enrollment for Eligible Extra Help Employees

Monday, March 23, 2015 through Friday, April 10, 2015
Effective date of coverage is June 1, 2015

Mandatory Benefit Changes

Starting in 2015, for the Kaiser Permanente plans, outpatient drugs provided by Kaiser Permanente pharmacy services will accumulate toward the Kaiser Permanente medical calendar year out-of-pocket maximum in compliance with the Affordable Care Act.

You Now Have a Choice in Health Plans!

Currently, the County offers a Kaiser Permanente Traditional HMO (\$10 Copay) plan to regular and eligible extra employees. The County is pleased to announce the addition of two new, lower premium cost, Kaiser Permanente plan options: Hospital Services DHMO (Deductible HMO) and Deductible First DHMO (Deductible HMO). These new plans and the current Kaiser Permanents Traditional HMO (\$10 Copay) plan are available to extra-help employees during the 2015 Annual Enrollment. Any coverage elected during the Annual Enrollment period will be in effect for the 2015/2016 plan year, which begins June 1, 2015.

Kaiser Permanente Plan Options (HMO & DHMO)

The Kaiser Permanente plans require you to live or work within the plan's respective California service area and to receive care from Kaiser Permanente providers, except in an emergency. Eligible Extra-Help Employees may elect to enroll in *one* of the following Kaiser Permanente plan options:

Kaiser Permanente HMO Plan.

You share in the cost of your care through co-payments, and, in some cases, coinsurance.

- Most preventative services, such as routine physicals, mammograms, and routine preventative screenings are covered at no cost.
- Most doctor's office visits, radiology services, lab tests and prescriptions are available for a copay or coinsurance amount.
- Hospitalizations, in-patient, and out-patient surgeries are available for a copay.
- The calendar year out-of-pocket maximum caps the cost paid by the member. The out-of-pocket maximum includes copayments and coinsurance.

Kaiser Permanente Hospital Services DHMO (Deductible HMO) Plan.

You share in the cost of your care through co-payments, coinsurance and deductibles.

- Most preventative services, such as routine physicals, mammograms, and routine preventative screenings are covered at no cost and are not subject to the calendar year deductible.
- Most doctor's office visits, radiology services, lab tests and prescriptions are available for a copay or coinsurance amount, even before you have reached the calendar year deductible.
- **Hospitalizations, in-patient, and out-patient surgeries are subject to the calendar year deductible before plan benefits will be paid.**

- This plan has a calendar year out-of-pocket maximum, capping the cost paid by the member. The out-of-pocket maximum includes the calendar year deductible, copayments and coinsurance.



Kaiser Permanente Deductible First DHMO Plan.

You share in the cost of your care through co-payments, coinsurance and deductibles.

- Most preventative services, such as routine physicals, mammograms, and routine preventative screenings are covered at no cost and are not subject to the calendar year deductible.
- For any service other than preventative services, **a member must meet the calendar year deductible FIRST before ANY plan benefits will be paid.** A member will pay 100% of the doctor office visits, radiology services, lab tests, prescriptions, hospitalizations, etc., until the calendar year deductible is met.
- Once the deductible is satisfied, covered medical, hospital and prescription benefits will be provided for a copayment or coinsurance amount. While this plan does require a member to meet the deductible first, members who anticipate a hospital stay (such as a scheduled surgery) may find this plan offers a lower total out-of-pocket cost than the new Hospital Services DHMO plan.
- The calendar year out-of-pocket maximum includes calendar year deductibles, copayments and coinsurance.

See the Medical Plan Comparison Chart for more information on deductibles, out-of-pocket maximums and plan benefits.

Members can use Kaiser Permanente’s online Cost Estimate Tool to obtain a personalized estimate of medical care costs for common tests and procedures at www.kp.org/memberestimates. This tool is helpful in planning for your coinsurance and/or deductible amount.

Summary of Benefits and Coverage

You may view Summary of Benefits and Coverage (SBC) information for the County’s medical plans online at: <http://hr.sonoma-county.org/content.aspx?sid=1024&id=1412>.

Need More Medical Plan Information to Make a Decision?

Kaiser Permanente representatives will be giving presentations and answering employee questions about the new DHMO plans, Hospital Services DHMO and Deductible First DHMO during the Annual Enrollment meetings. See the enclosed Annual Enrollment Meeting Schedule for date, time and location of these informational sessions. If you are unable to attend an Annual Enrollment meeting and/or have plan questions after reviewing this information, please call CareCounsel, your personal, confidential, healthcare advocate service, at 888-227-3334. CareCounsel can assist you in evaluating the new plans related to your specific medical needs.

Social Security Numbers for Your Dependents are Required!

This Annual Enrollment Period is your opportunity to add and/or drop dependents and to ensure that our records accurately reflect your benefit elections. If an eligible dependent is not listed in Employee Self-Service at the close of Annual Enrollment, April 10, 2015, your dependent(s) will not be covered and will not be able to access benefits when seeking medical plan services.

As part of the enrollment process, you will be required to provide a Social Security number or a Federal Tax Identification number for your dependent(s) when you enroll them in a County-sponsored medical plan. The County needs this information to comply with the Mandatory Insurer Reporting Law (Section 111 of Public Law 110-173). This law requires group health plan insurers, third-party administrators, and group health plan administrators to report information that the Department of Health and Human Services requires for purposes of coordination of benefits. Further information about the mandatory reporting requirements under this law is available at <http://www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Mandatory-Insurer-Reporting-For-Group-Health-Plans/Overview.html>

Using Your Benefits Wisely

You can take these simple actions to improve your health and manage your out-of-pocket costs.

- **Seek preventive care.** Be sure to complete your annual physical or health screenings — this is key to identifying possible health issues and obtaining appropriate treatments early, which in turn, may help to improve your health and keep costs down over the longer run.
- **Use the emergency room only in the event of a life-threatening emergency.** An emergency room visit may be required for life-threatening events such as chest pain, heart attack or stroke, severe burns, deep cuts, visibly broken bones, uncontrollable bleeding, loss of consciousness, shortness of breath, and life threatening allergic reactions. In non-emergency situations (e.g., for colds and flu, sprains and minor cuts), you should visit your physician or contact the 24 hour nurse line see below. Doing so can help to keep your out-of-pocket costs down and manage medical premium cost inflation from year-to-year. If you are unsure if you should visit your physician or an urgent care clinic, call the number on your medical insurance card for assistance and guidance.

Phone numbers:

- Advice (24 hours): 707-393-4044
 - Consejos (24 horas): 707-393-2482 (707-393-CITA)
 - California Relay Service: 711 (TTY for the hearing/speech impaired)
- **Make healthy lifestyle choices.** Quitting smoking, regular exercise and good nutrition can help you to avoid costly lifestyle-driven health problems and in doing so, reduce your costs over time. Resources are available to help you at:

<http://healthyhabits.sonoma-county.org/>

<https://healthy.kaiserpermanente.org/>

- **Actively manage a chronic health issue.** For example, if you have diabetes, asthma, chronic obstructive pulmonary disease (COPD) or lower back pain, work with your doctor to understand the care you need on an ongoing basis.
- **Watch for opportunities to save on prescription drug costs.** You can save money by refilling or obtaining prescription drugs at your local Kaiser pharmacy *before* traveling or taking vacations.

Medical Plan Comparison Chart – Extra Help Employees

The following chart provides information on benefits available June 1, 2015:

MEDICAL PLAN COMPARISON	Kaiser Permanente HMO Group # 602484-0005	Kaiser Permanente Hospital Services DHMO Group # 602484-0008	Kaiser Permanente Deductible First DHMO Group # 602484-0011
Calendar Year Deductible	None	\$1,500 Self-Only Enrollment \$1,500 Any one member in a family of two or more \$3,000 Family of two or more	\$1,300 Self-Only Enrollment \$2,600 Any one member in a family of two or more \$2,600 Family of two or more
Calendar Year Out of Pocket Maximum (Including Deductibles, Copays, and Coinsurance)	\$1,500 Self-Only Enrollment \$1,500 Any one member in a family of two or more \$3,000 Family of two or more	\$4,000 Self-Only Enrollment \$4,000 Any one member in a family of two or more \$8,000 Family of two or more	\$3,000 Self-Only Enrollment \$6,000 Any one member in a family of two or more \$6,000 Family of two or more
Coinsurance (the Plan pays)	None	Varies	Varies
Lifetime Maximum	None	None	None
Dependent Children Eligibility	Any Dependent child under age 26 Disabled: No age limit	Any Dependent child under age 26 Disabled: No age limit	Any Dependent child under age 26 Disabled: No age limit
Office Visits and Professional Services			
Physician & Specialist	\$10 co-pay	\$20 co-pay, no deductible	\$20 co-pay after deductible
Preventive Care Birth to Age 18	No charge	No charge, no deductible	No charge, no deductible
Preventive Care Adult Routine Care	No charge	No charge, no deductible	No charge, no deductible
Preventive Care Adult Routine OB/GYN	No charge	No charge, no deductible	No charge, no deductible
Diagnostic Lab and X-ray	No Charge	\$10 per encounter, no deductible	\$10 per encounter after deductible
Physical Therapy (medically necessary treatment only)	\$10 co-pay medically necessary treatment only	\$20 co-pay, no deductible	\$20 co-pay after deductible
Chiropractic	Discounted rates through Kaiser Choose Healthy	Discounted rates through Kaiser Choose Healthy	Discounted rates through Kaiser Choose Healthy
Mental Health & Substance Abuse (Outpatient)	\$10 co-pay individual \$5 co-pay group	\$20 co-pay individual/\$10 co-pay group; no deductible	\$20 co-pay after deductible
Surgical and Hospital Services			
Inpatient Hospital and Physician Services	No charge	20% Coinsurance after deductible	\$250 co-pay per admission after deductible
Outpatient Surgery	\$10 co-pay	20% Coinsurance after deductible	\$150 co-pay per procedure after deductible
Maternity	No charge	20% Coinsurance after deductible	\$250 co-pay per admission after deductible
Emergency Room	\$50 co-pay	20% Coinsurance after deductible	\$100 co-pay after deductible

Medical Plan Comparison Chart – Extra Help Employees (continued)

MEDICAL PLAN COMPARISON – CONTINUED	Kaiser Permanente HMO Group # 602484-0003	Kaiser Permanente Hospital Services DHMO Group # 602484-0006	Kaiser Permanente Deductible First DHMO Group # 602484-0009
Ambulance	\$50 per trip	\$150 per trip, no deductible	\$100 co-pay per trip after deductible
Mental Health & Substance Abuse (Inpatient)	No charge	20% Coinsurance after deductible	\$250 co-pay per admission after deductible
Skilled Nursing Facility	No charge Up to 100 days per benefit period	20% Coinsurance, no deductible Up to 100 days per benefit period	\$250 co-pay per admission after deductible
Home Health	No charge 100 days per year	No charge (deductible doesn't apply) 100 days per year	No charge after deductible 100 days per year
Prescription Drugs			
Generic or Tier 1	\$5 co-pay 100 day supply	\$10 co-pay 30 day supply, no deductible	\$10 co-pay 30 day supply after deductible
Formulary Brand or Tier 2	\$10 co-pay 100 day supply	\$30 co-pay 30 day supply, no deductible	\$30 co-pay 30 day supply after deductible
Mail Order Benefit Generic or Tier 1	Same as retail	\$20 co-pay 100 day supply, no deductible	\$20 co-pay 100 day supply after deductible
Mail Order Benefit Formulary Brand or Tier 2	Same as retail	\$60 co-pay 100 day supply, no deductible	\$60 co-pay 100 day supply after deductible
Mandatory Mail Order	No	No	No
Mandatory Generic Program	N/A	N/A	N/A

2015/2016 Premium Rate Chart – Extra-Help Employees

Premium deductions for coverage elected during annual enrollment begin May 6, 2015 for coverage effective June 1, 2015. Premiums are collected in the month prior to coverage. Premiums for the plan will be paid in advance on the first two pay dates of the month prior to the coverage effective date and on the first two pay dates of every month thereafter. When payment has been made in full, coverage will take effect on the first of the month following payment and shall end on the last day of the same month. Coverage will be month to month and is dependent on full payment of premiums and subject to continued eligibility. The employee premiums shall be paid through pre-tax payroll deduction as allowed by IRS Code Section 125.

For employees working 40 hours or more biweekly, the County contributes up to \$400 per month towards the premium cost for coverage is as follows.

Bi-Monthly Premiums For Coverage Effective June 1, 2015 through May 31, 2016			
Plan	Total Premium Cost	County Contribution	Employee Contribution
Kaiser Permanente HMO			
Self	\$334.35	\$200.00	\$134.35
Self and 1 dependent	\$668.70	\$200.00	\$468.70
Self and 2 or more dependents	\$946.21	\$200.00	\$746.21
Kaiser Permanente Hospital Services DHMO Plan			
Self	\$269.21	\$200.00	\$69.21
Self and 1 dependent	\$538.41	\$200.00	\$338.41
Self and 2 or more dependents	\$761.86	\$200.00	\$561.86
Kaiser Permanente Deductible First DHMO Plan			
Self	\$249.81	\$200.00	\$49.81
Self and 1 dependent	\$499.62	\$200.00	\$299.62
Self and 2 or more dependents	\$706.97	\$200.00	\$506.97

County Contribution – Extra Help Employees

Effective with the first premium due, the County contribution shall be up to four hundred dollars (\$400) per month. Pro-ration shall be as follows:

- (1) For each pay period in which the extra-help employees work forty (40) or more hours, the full County contribution will be paid.

- (2) For each pay period in which the extra-help employee works more than twenty (20) but fewer than forty (40) hours, the above amounts shall be prorated in proportion to the number of hours worked in the pay period.
- (3) For each pay period in which the extra-help employee works fewer than twenty (20) hours, no County contribution will be made.

Extra-Help Employees: Continued Coverage and Conditions for Regaining Eligibility for Medical Plan

An extra-help employee who is enrolled in the medical plan who fails to work at least twenty (20) hours in any pay period in which a premium deduction was due, will be eligible to contribute toward the medical coverage by paying the full amount of the premiums by payroll deduction if sufficient funds are available to fully cover the deduction. Premium payments not paid by payroll deduction will be due in the ACTTC's Payroll Office by the last day of the pay period in which there were insufficient hours worked.

Please reference the Sonoma County Salary Resolution and each individual Bargaining Unit Memorandum of Understanding for additional information about Extra-Help benefits and stipulations.

Submitting Annual Enrollment Period Elections

Benefit elections and/or changes to your existing benefits are made online through the County's Employee Self-Service (ESS) system. A link will be e-mailed to you on the first day of the Annual Enrollment Period. Save the e-mail until you are ready to make your benefit elections.

ESS is also accessible via the link  on the [County of Sonoma Intranet](#) (located under the "What's New" column on the right side of the [Intranet home page](#)) or under [Employee Resources](#) on the County's internet home page (located on the bottom of the page in the blue bar.) From the Employee Resources Internet page, select "HRMS Employee Self-Service" on the left sidebar menu.

Log into the [Employee Self-Service \(ESS\) system](#) using your ESS password. Forgot your password? Manage your password using the link on the bottom of the ESS page.

To begin the benefit enrollment/changes process, select Annual Enrollment located under Benefits on the lower left side of the Employee Self-Service home page (after logging in). All ESS Benefit elections and changes must be submitted to the Human Resources Benefits Unit by midnight on Friday, April 10, 2015. Benefits staff will be available to help you make your online elections at the Employee Self-Service Help Sessions. Dates and times of the Employee Self-Service Help Sessions is enclosed.

If you are unable to access eP Employee Self-Service, a paper form is available online. The form is located on the County of Sonoma Human Resources website <http://hr.sonoma-county.org/foremployees.htm>. Paper forms are due by 5:00 p.m., Friday, April 10, 2015, in the Human Resources Benefits Unit office.

Deadline for Enrolling

All benefit elections and changes made through Employee Self-Service (ESS) must be completed and submitted by midnight on **Friday, April 10, 2015. Paper enrollment forms are due by 5:00 p.m. on Friday, April 10, 2014** and must be received by the Human Resources Benefits Unit. Submit paper forms to:

County of Sonoma Human Resources Benefits Unit
575 Administration Dr. Ste. 116C
Santa Rosa, CA, 95403

County-Offered Plan Contact Information

Kaiser Permanente Summary of Benefits and Coverage (SBC)	800-464-4000	www.kp.org http://hr.sonoma-county.org/content.aspx?sid=1024&id=12
CareCounsel Understanding the medical plan benefits asking questions about how the plan works and assistance in deciding which plan best suits your needs	888-227-3334	www.carecounsel.com
Sonoma County Human Resources- Benefits Eligibility and Enrollment information	707-565-2900	http://hr.sonoma-county.org/content.aspx?sid=1024&id=1412
Affordable Care Act Information and Assistance	877 699-6868	Health Care Reform
Employee Assistance Program (EAP) SEIU only <i>Administered through Managed Health Network (MHN)</i>	800-227-1060	members.mhn.com Company code: sonomacounty
 County Wellness Program	707-565-2900	http://healthyhabits.sonoma-county.org
Sonoma County HIPAA Privacy Practices	707-565-4999	sonoma-county.org/privacy/privacy.htm

Please see the County of Sonoma Human Resources Extra Help web page for all required legal notices:
<http://hr.sonoma-county.org/documents/2015-2016-Extra-Help-Legal-Notices.pdf>

2015 Annual Enrollment Meeting Schedule

Benefits are an important part of your total compensation package. Take advantage of this opportunity to review your benefit plan options. **Please allow up to 1½ hours per session.***

* You may attend these meetings on County-paid time with supervisory approval.

MARCH 23	DEPT/LOCATION	STREET ADDRESS	ROOM
10:30 A.M. – 12:00 P.M.	Department of Transportation And Public Works (TPW)	2300 County Center Dr., Suite B100 Santa Rosa	Main Conference Room
MARCH 24	DEPT/LOCATION	STREET ADDRESS	ROOM
8:00 A.M. – 9:30 A.M.	Sonoma County Water Agency	404 Aviation Blvd., Santa Rosa	Redwood Room
10:00 A.M. – 11:30 A.M.	Community Development Commission (CDC)	1440 Guerneville Rd., Santa Rosa	Hearing Room
2:30 P.M. – 4:00 P.M.	Permit & Resource Management Dept. (PRMD)	2550 Ventura Ave., Santa Rosa	PRMD Hearing Room
MARCH 25	DEPT/LOCATION	STREET ADDRESS	ROOM
10:00 A.M. – 11:30 A.M.	Human Resources & County Administration	575 Administration Dr., Suite 113A Santa Rosa	CAO Community Government Affairs Room
2:30 P.M. – 4:00 P.M.	Open Space District (OSD)	747 Mendocino Ave., Santa Rosa	Large Conference Room
MARCH 26	DEPT/LOCATION	STREET ADDRESS	ROOM
8:00 A.M. – 9:30 A.M.	Department of Transportation And Public Works (TPW)	2175 Airport Blvd., Santa Rosa Road Maintenance Meeting La Plaza	Conference Room
MARCH 31	DEPT/LOCATION	STREET ADDRESS	ROOM
2:00 P.M. – 3:30 P.M.	Human Resources & County Administration	575 Administration Dr., Suite 113A Santa Rosa	CAO Community Government Affairs Room
APRIL 1	DEPT/LOCATION	STREET ADDRESS	ROOM
8:00 A.M. – 9:30 A.M.	Sonoma County Sheriff's Office	2796 Ventura Ave., Santa Rosa	Sheriff Main Office, Training Room
10:30 A.M. – 12:00 P.M.	Human Services Department (HSD)	2227 Capricorn, Suite 100, Santa Rosa	Santa Rosa Conference Room
2:00 P.M. – 3:30 P.M.	Sonoma County Sheriff's Office	2796 Ventura Ave., Santa Rosa	Sheriff Main Office, Training Room
APRIL 2	DEPT/LOCATION	STREET ADDRESS	ROOM
10:00 A.M. – 11:30 A.M.	Sonoma County Fairgrounds	1350 Bennett Valley Rd., Santa Rosa	Showcase Room
1:30 P.M. – 3:00 P.M.	Juvenile Justice Center	7425 Rancho Los Guilicos Rd., Santa Rosa	Lobby Conference Room
APRIL 7	DEPT/LOCATION	STREET ADDRESS	ROOM
9:00 A.M. – 10:30 A.M.	Human Services Department (HSD)	3600 Westwind Blvd., Santa Rosa	Wright Brothers Conference Room
10:30 A.M. – 12:00 P.M.	Economic Development Board (EDB)	141 Stony Cir., Suite 110 Santa Rosa	Large Conference Room (Board Room)
2:00 P.M. – 3:30 P.M.	Department of Child Support Services (DCSS)	3725 Westwind Blvd., Suite 200, Santa Rosa	Conference Room C
APRIL 8	DEPT/LOCATION	STREET ADDRESS	ROOM
8:30 A.M. – 10:00 A.M.	Department of Health Services (DHS)	3313 Chanate Rd., Santa Rosa	Rotunda Room
10:30 A.M. – 12:00 P.M.	Permit & Resource Management Dept. (PRMD)	2550 Ventura Ave., Santa Rosa	PRMD Hearing Room
2:30 P.M. – 4:00 P.M.	SCERA	433 Aviation Blvd., Suite 100 Santa Rosa	Board Room
APRIL 9	DEPT/LOCATION	STREET ADDRESS	ROOM
9:00 A.M. – 10:30 A.M.	FY&C	1202 Apollo Way, Santa Rosa	Annadel Room (Badges Required)
1:30 P.M. – 3:00 P.M.	Juvenile Justice Center	7425 Rancho Los Guilicos Rd., Santa Rosa	Lobby Conference Room

Employee Self-Service Help Sessions

Need assistance with Employee Self-Service (ESS)?

Have questions related to submitting your annual enrollment elections online? Computers will be available for you to enter your Annual Enrollment elections electronically in Employee Self-Service.

LOCATION	DATE	DROP-IN HOURS
DCSS	Tuesday, March 24	10:30 a.m. - 2:30 p.m.
EOC Training Room	Monday, March 30	8:30 a.m. - 5:00 p.m.
FY&C	Tuesday, March 31	1:00 p.m. - 4:30 p.m.
FY&C	Wednesday, April 1	9:00 a.m. - 1:00 p.m.
EOC Training Room	Wednesday, April 1	3:00 p.m. - 5:00 p.m.
EOC Training Room	Thursday, April 2	8:30 a.m. - 12:00 p.m.
DCSS	Thursday, April 2	2:00 p.m. - 4:30 p.m.
EOC Training Room	Friday, April 3	8:30 a.m. - 5:00 p.m.
EOC Training Room	Tuesday, April 7	8:30 a.m. - 5:00 p.m.
FY&C	Wednesday, April 8	1:00 p.m. - 4:30 p.m.
DCSS	Thursday, April 9	8:00 a.m. - 1:00 p.m.
EOC Training Room	Thursday, April 9	3:00 p.m. - 5:00 p.m.
EOC Training Room	Friday, April 10	12:30 p.m. - 4:30 p.m.

Locations: **EOC Training Room (across from the Adult Detention Center)**
 600 Administration Dr., Santa Rosa
 (The EOC is the single story building with the large radio tower on top.)
Entrance is located on the North side of the building.

DCSS (Department of Child Support Services)
 3725 Westwind Blvd., Suite 200 (upstairs), Santa Rosa
Important: Check-in at the reception desk. County I.D. required.

FY&C (Family, Youth and Children's Services)
 1202 Apollo Way, Santa Rosa
Important: Check-in at the reception desk. County I.D. required.