

2023 Open Enrollment FAQ

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2023 Open Enrollment General Questions

Q: What is changing with Open Enrollment this year?

A:

- The 2023 Open Enrollment period is *active* rather than *passive*. This means you
 must take action to elect or waive benefit coverage through the UKG system
 during the open enrollment window. You will <u>not</u> be re-enrolled in current
 elections as you may have been in years past. If you do not take action during the
 open enrollment period, you will not be enrolled in benefits for the 2023 year.
- Dental insurance will be through Delta Dental starting January 1, 2023. All other coverage will remain with Medical Mutual. If you enroll in Medical and Prescription and/or Vision and Hearing, you will receive an ID card from Medical Mutual. If you enroll in Dental coverage, you will receive a separate ID card from Delta Dental.

*Please note that the change to Delta Dental insurance does not affect AFSCME employees.

Q: I forgot my UKG password and cannot login. Who should I contact?

A: You can contact the Helpdesk at x6888 or by emailing <u>helpdesk@neorsd.org</u>.

Q: How can I view my current benefit elections?

A: Log into UKG and navigate to Menu > Myself > Benefits > Benefit Summary.

Q: How do I make my benefit elections during Open Enrollment?

A: Log into UKG and navigate to Menu > Myself > Open Enrollment. Enrollment in UKG must be done in Google Chrome or Firefox on either a desktop or an iPad. Please refer to the job aids for step-by-step enrollment instructions: <u>Non-Union | AFSCME | 18-S |</u> <u>OPBA | Interns & GNA</u>

Q: Can I make changes to my benefit plans outside of the Open Enrollment period?

A: Changes to benefit plans can only be made outside of the Open Enrollment period if an employee experiences a qualifying life event (QLE). More information on QLEs can be found in the 2023 Benefit Guides or Section 200.17 of the Employee Handbook: <u>Non-</u> <u>Union | AFSCME | 18-S | OPBA | Employee Handbook</u>

Q: Which family members/dependents can I cover on my health insurance?

A: Eligible dependents include the policyholder's spouse and unmarried children under the dependent age limit (age 26 in Ohio), including:

- Natural children of the policyholder
- Children placed in the policyholder's home for adoption
- Children the policyholder or spouse is the legal guardian for
- Children the policyholder or spouse has been ordered to provide health coverage for by a court
- Stepchildren (if the natural parent is also listed as a dependent of the policyholder)
- Disabled dependents* if they are:
- Unmarried and under the dependent age limit
- Primarily dependent on the policyholder for support
- A dependent as defined by IRS income tax code

*Incapacity must have begun before reaching the dependent age limit and must be medically certified by a physician.

Proper proof of relationship documentation (Marriage license, birth certificate, etc.) is required if you are adding a new dependent(s) to your coverage.

Q: What documentation is needed if I am adding a new dependent(s) to my insurance? Do I need documentation for my dependent(s) if I am newly enrolling in a 2023 plan?

A: To add a new dependent(s) to your benefit plan, proper proof of relationship is required (Marriage license, birth certificate, etc.). The dependent's social security number, date of birth and gender will also be needed to enroll. If you are a new enrollee in a 2023 benefit plan, the same documentation is needed if you are covering any dependents.

Q: Can I enroll my dependents on our benefit plans without enrolling myself?

A: No, employees must be enrolled in our benefit plans in order to enroll any dependents.

Q: Will my current benefits rollover if I do not make any elections during Open Enrollment?

A: No^{**}, Open Enrollment this year is *active* rather than *passive*. This means you must take action to elect or waive benefit coverage through the UKG system during the open enrollment window. You will <u>not</u> be re-enrolled in current selections as you may have

been in years past. <u>If you do not take action during the open enrollment period, you will</u> <u>not be enrolled in benefits for the 2023 year.</u>

The following chart demonstrates the benefit plans that require an election versus automatic rollover:

Benefit	Election Required	Automatic Enrollment
Medical/Rx or Medical Buyout	\checkmark	
Dental*	\checkmark	
Vision/Hearing*	\checkmark	
Flexible Spending Account (FSA)	\checkmark	
DIPPO	\checkmark	
Group Life/AD&D		\checkmark
Voluntary Life/AD&D**		\checkmark
Short-Term Disability		✓

*Excludes AFSCME employees

**Automatic enrollment if already enrolled for 2022. If not already enrolled or for requests to increase coverage,, elections must be made on a separate form outside of UKG

Q: On the final summary page of Open Enrollment, why are there more benefits listed under "Current Benefits" than "New Benefits?"

A: "Current Benefits" lists all current benefits *and* deductions (ex. Charity Choice, union dues, STD, Voluntary Life, etc.), whereas "New Benefits" only lists open enrollment electable benefits (see chart above).

Q: Do I need to submit proof of other credible coverage if I was enrolled in the Healthcare Buyout in2022?

A: Yes, this year all employees electing the Healthcare Buyout are required to (re)certify eligibility.

Q: What happens if I do not make elections during Open Enrollment?

A: Any current medical, dental, vision, DIPPO and/or FSA benefits will terminate effective 12/31/2022. You will then not be able to enroll in our benefits for 2023 unless you experience a qualifying life event (QLE) or until next year's Open Enrollment period. Non-Union | AFSCME | 18-S | OPBA

Q: When is the latest I can make changes to my benefit elections during Open Enrollment?

A: Open enrollment closes at 11:59pm on Friday, November 18, 2022. You cannot make elections after this time.

Q: If I decline DIPPO during Open Enrollment, can I elect it later if I have a qualifying life event?

A: No, DIPPO can only be elected as a new hire or during Open Enrollment each year.

Q: When can I expect to receive my ID cards?

A: You can expect to receive your ID cards in the mail in January. If you do not receive your card in the mail by January 1, 2023, email HR Direct at <u>HRDirect@neorsd.org</u> to request a temporary card.

Delta Dental

Q: How can I determine if my dentist is covered under Dental Dental's network?

A: Employees can visit <u>www.deltadental.com</u> and search for dentists using the "Find a dentist" feature. You can also call your dentist's office and confirm that your dentist accepts Delta insurance. If your dentist does not accept Delta Dental insurance, you can refer them to Delta Dental by visiting <u>www.deltadentaloh.com</u> and completing the "Refer Your Dentist" form by contacting Customer Service.

Flexible Spending Account (FSA)

Q: Do I need to be enrolled in NEORSD's medical insurance to participate in the FSA?

A: No, employees and their dependents do not need to be enrolled in our medical insurance to participate in the FSA.

Q: What is the difference between FSA Health and FSA Dependent Care?

A: FSA Health allows employees to use pre-tax dollars to pay for eligible medical, dental and vision expenses for themselves and any covered dependents. FSA Dependent Care is a separate account that allows employees to use pre-tax dollars to pay for eligible

childcare and/or eldercare services. Please visit <u>Chard Snyder's website</u> for more information.

Q: Can I elect both a Health and Dependent Care FSA?

A: Yes, employees may elect to participate in both FSAs simultaneously.

Q: What are the maximum election amounts for each FSA plan?

A: The maximum annual election for FSA Health is \$3,050. The maximum annual election for FSA Dependent Care is \$5,000. Please visit <u>Chard Snyder's website</u> for more information.

Q: Can unused FSA funds carry over to the next year?

A: No, any unused funds will be forfeited at the end of the plan year. While unused funds do not carryover into the new plan year, the FSA Health does have a 2.5 month "grace period." This means that if you have money left in your 2023 Health FSA after December 31, 2023, you will have until March 15, 2024 to use any remaining funds. <u>All claims for reimbursement for your 2023 Health FSA must be sent to Chard Snyder no later than March 31, 2024.</u> The Dependent Care FSA does not have a grace period.

Voluntary Life/AD&D

Q: Can I make changes to my Voluntary Life/AD&D coverage during open enrollment?

A: MedMutual Life is providing a one-time opportunity for employees to elect Voluntary Life/AD&D insurance up to the guaranteed issue amounts during Open Enrollment. Requests for increased amounts or new elections must be made outside of UKG using a paper enrollment application. <u>Highlight Sheet | Enrollment App</u>

Q: Can I change my Life/AD&D beneficiaries?

A: Yes. Beneficiary changes for **Group** Life/AD&D can be made during open enrollment via UKG. Beneficiary changes for **Voluntary** life/AD&D can be made at any time by contacting <u>HRDirect@neorsd.org</u>.

Q: What are the guaranteed issue amounts for the Voluntary Life/AD&D insurance?

A: Guaranteed issue amounts are the maximum dollar amounts of voluntary life insurance employees can elect without having to complete the Evidence of Insurability (EOI) form. See below for 2023 guaranteed issue amounts.

Employee	\$100,000
Spouse	\$25,000
Child	\$5,000 or \$10,000

Retirement Savings

Q: Can I make changes to VOYA and/or Ohio Deferred Compensation through open enrollment?

A: No, you must contact VOYA or Ohio Deferred Compensation directly if you want to start/stop/change your contributions. You may also request changes by creating/logging into your online account with Voya or Ohio Deferred Compensation. You can find their contact information in the 2023 Benefits Guide. <u>Non-Union | AFSCME | 18-S | OPBA</u>