Benefits Transition/ Open Enrollment
Frequently Asked Questions (FAQs)

Open Enrollment

Q1. If I already enrolled in my plan of choice in September for an October 1, 2020 effective date do I need to submit any paperwork?

Yes, you must submit a new enrollment form in order to be covered by a MCOE medical plan. You may compare your current plan to the new plans available to you with the SISC plan comparisons (hyperlinked here)¹, which go into effect December 1, 2020, and the previous plan comparisons (hyperlinked here)², which are currently in effect until November 30, 2020.

Q2. If I am happy with my current plan, what do I need to do?

Submit an enrollment form for the new plan that most closely reflects your current coverage and/or cost. The new Kaiser Permanente plans were selected to be close to either coverage or cost, so be sure to review the SISC plan comparisons (hyperlinked here)¹, including the plan summaries of benefits coverage (middle of the webpage)³ to find a plan that works for your personal situation.

Q3. How can I learn more about the plans?

MCOE/SISC will be holding three (3) information sessions to share more about the plans:

1. Monday, October 19, 2020: Review of SISC Plans
2. Thursday, October 22, 2020: Review of Health Savings Accounts and eligible plans
3. Wednesday, October 28, 2020: Review of frequently asked questions

You can access the trainings via Zoom: https://us02web.zoom.us/j/8310426185

³ Plan Summaries of Benefits Coverage link: https://www.marinschools.org/Page/4046
Meeting ID: 831 042 6185

One tap mobile: +16699006833,,8310426185# US (San Jose)
Dial by your location +1 669 900 6833 US (San Jose) or +1 408 638 0968 US (San Jose)

Meeting ID: 831 042 6185

The trainings will be recorded and posted to our benefits section of the employee resources webpage (hyperlinked here)4.

Q4. Does this open enrollment involve dental and vision plans?

No. The benefit transition to SISC only involves medical plans, not dental and vision.

Enrollment Forms

Q5. Are digital signatures accepted on the forms or do I need to submit a hard copy of the form with a “wet” signature?

Digital signatures sent in an Adobe PDF fillable copy of the enrollment forms is accepted.

Q6. Do I have to fill in the group information and my date of hire if I don’t have the information?

No- Personnel will complete all group information and your date of hire.

Q7. What is the qualifying date I should enter on the form?

Select new open enrollment and the qualifying date should be 12/1/2020.

Q8. If I am joining an Anthem PPO plan and do not yet have a Primary Care Physician identified, can I leave that section blank?

Yes- you may leave that section blank. Those that do have an in-network provider (click here to search providers) may submit that information. After 12/1/2020 you may call Anthem Member Services at 1-800-825-5541 to designate or change your Primary Care Physician.

Deductibles

Q9. Are plan deductibles effective for the plan year or calendar year?

Deductibles are effective for the calendar year, and there is no “fourth quarter carry over.” This means that your accumulated deductible and out-of-pocket costs reset each January. Included below is a table with the individual and family deductibles for the new SISC Kaiser Permanente and Anthem Blue Cross PPO plans, effective December 1st, 2020.

<table>
<thead>
<tr>
<th>Plan</th>
<th>Individual Deductible</th>
<th>Family Deductible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaiser Health Plan Traditional</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Kaiser Health Plan Deductible</td>
<td>$1,000</td>
<td>$2,000</td>
</tr>
</tbody>
</table>

4 Benefits section of Employee Resources webpages link: [https://www.marinschools.org/Page/4046](https://www.marinschools.org/Page/4046)
Kaiser Health Plan HSA Individual $1,500 N/A
Kaiser Health Plan HSA Family $2,800 $3,000
Anthem PPO 100% $100 $300
Anthem PPO Deductible $500 $1,000
Anthem PPO HSA $3,000 $5,200

Q10. If an employee is also covered under a spouse’s plan, how does that impact the deductible? Does it matter if the spouse’s plan is similar to our traditional plan and the employee is on an HSA plan with MCOE?

*Please reach out to your plans’ provider(s) for information on deductibles, copays, coinsurances, and out-of-pocket maximums for those with secondary coverage.*

Health Savings Accounts (HSA)

Q11. If I am currently enrolled in, or I am considering enrolling in, the HSA plan, am I required to enroll in the HSA plan for a December 1st effective date, where I will then be responsible for the entire annual deductible?

*We discourage employees who are considering, or who currently enrolled in, the HSA plan to enroll in December and have coordinated with SISC and Kaiser Permanente/Anthem Blue Cross to allow you to enroll in a HMO/PPO plan for the month of December and to then enroll in an HSA plan for a January 1st effective date. You must submit both enrollment forms for the HMO/PPO plan for the month of December and the HSA plan effective January 1st by October 29, 2020. This accommodation was granted due to the large increase in deductible amounts from our current HSA plans ending November 30th to the new plans beginning December 1st.*

Dependents

Q12. If I have my spouse/domestic partner on my plan and want to keep them on my plan after December 1, 2020, what do I need to submit?

*If your spouse/domestic partner is currently enrolled on your plan currently and you want to continue their coverage, you must submit a completed enrollment form listing them as a dependent and:

Spouse: the first page of your 2019 Federal Tax filing that shows you are married with financial information redacted.

Domestic Partner: a certificate of registered domestic partnership issued by the state of California.

See Dependent Eligibility Chart at the end of this document for additional information.*

Q13. What if I married in 2020 and we do not yet have a tax filing-what do I submit?

*A marriage certificate reflecting a 2020 marriage date is accepted for those recently married.*
Q14. If I have my child(ren) on my plan and want to keep them on my plan after December 1, 2020, what do I need to submit?

For children under age 26, you must submit an enrollment form reflecting your child(ren) as dependents and provide a copy of their birth certificate. You must also supply legal adoption documentation for adopted child(ren) under age 26. Those with legal guardianship must supply both a birth certificate and court documents establishing legal guardianship for child(ren) under age 18.

See Dependent Eligibility Chart at the end of this document for additional information.

Q15. What if my child is a disabled dependent over the age of 26—can they remain on my medical plan?

Yes. Your disabled dependent child(ren) may remain on your plan. You must submit an enrollment form along with the documents identified in the Dependent Eligibility Chart below to enroll them on your new plan effective December 1st, 2020.

Q16. If my dependents are only covered on my dental and vision plans at this time, do I need to submit any paperwork to continue their coverage?

No, there is no paperwork to submit because this transition and open enrollment does not impact dental and vision coverage.

Q17. Am I able to submit a copy of the documentation for my dependents? Or do I need to submit an original?

You may submit a copy of the documentation to Personnel with the enrollment form. Please ensure that the copy is legible to avoid any delays.

Cards
Q18. Will we receive new cards?

Current and former Kaiser Permanente members will retain their medical record numbers. New Kaiser Permanente members will receive a new ID card. Current Kaiser Permanente members will only receive a new ID card if Kaiser Permanente has not issued a card within the last 395 days. New Anthem Blue Cross members will receive new ID cards. Cards are not automatically issued to dependent children but may be requested by calling 1-800-825-5541.

Employee Assistance Program
Q19. I understand that all employees will now be covered under an Employee Assistance Program (EAP) effective December 1. How do I access it?

An employee may call 1-800-999-7222 24/7 or may visit online at www.anthemeap.com (Company Code: SISC) to access Anthem EAP.
Dependent Eligibility Document Chart

The following verification documents are required to enroll a dependent in health benefit plans. SISC requires the Social Security Numbers for all dependents to be covered on the plans and reserves the right to request additional documentation to substantiate eligibility.

<table>
<thead>
<tr>
<th>Dependent Type</th>
<th>Required Documentation</th>
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| **Spouse**     | • Prior year’s Federal Tax Form that shows the couple was married (financial information may be blocked out).  
                 • For newly married couples where prior year tax return is not available a marriage certificate will be accepted. |
| **Domestic Partner** | • Certificate of Registered Domestic Partnership issued by State of California 
                          (Enrolling a Domestic Partner may cause the employer contribution to become taxable) |
| **Children, Stepchildren, and/or Adopted Children up to age 26** | • Legal Birth Certificate or Hospital Birth Certificate (to include full name of child, parent(s) name, and child’s DOB)  
                                                                            • Legal Adoption Documentation |
| **Legal Guardianship up to age 18** | • Legal U.S. Court Documentation establishing Guardianship |
| **Disabled Dependents over age 26** | **Anthem Blue Cross** *(All items listed below are required)*  
                                           • Legal Birth Certificate or Hospital Birth Certificate (to include full name of child, parent(s) name and child’s DOB)  
                                           • Prior year’s Federal Tax Form that shows child is claimed as an IRS dependent (income information may be blocked out)  
                                           • Proof of 6 months prior creditable coverage  
                                           • Completed Anthem Disabled Dependent Certification Form  
                                           **Kaiser Permanente** *(All items listed below are required)*  
                                           • Legal Birth Certificate or Hospital Birth Certificate (to include full name of child, parent(s) name and child’s DOB)  
                                           • Prior year’s Federal Tax Form that shows child is claimed as an IRS dependent (income information may be blocked out)  
                                           • Proof of 6 months prior creditable coverage  
                                           • Completed Disabled Dependent Enrollment Application  
                                           • Most recent Kaiser Certification notice (if available) |