

**DATE**            **September 17, 2020**

**TO:**              **All Benefit-Eligible Employees**

**FROM:**          **Human Resources, Benefit Services**

**RE:**              **Important Information for 2021 Open Enrollment: Oct. 5 – Oct. 30, 2020**

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The 2021 Open Enrollment period is Monday, October 5, 2020, through Friday, October 30, 2020. Open Enrollment is the one time during the calendar year you can enroll in, change, or drop medical, dental, or vision plans, or add or remove covered dependents, without a Qualifying Life Event. It is also the time you must re-enroll in the Flexible Spending Account or Dependent Care Assistance programs if you wish to have these benefits again in the new year (2021).

For 2021, there are no plan changes to the City’s health plans and all benefit providers remain the same. Medical plan premiums for active employees are decreasing for 2021, and dental and vision premiums remain the same as they are in 2020.

**Due to COVID-19, all team members in Benefit Services are primarily working from home and the office is closed to walk-in customers.** To receive assistance with your Open Enrollment questions, please choose from the following options:

- Email your questions to [openenrollment@cityofsacramento.org](mailto:openenrollment@cityofsacramento.org)
- Schedule a one-on-one web session with a Benefit Services team member by visiting the [Benefit Services webpage](#) and clicking the link: *Schedule an appointment with a Benefit Services team member*
- Contact the Benefit Services team member [assigned to your department](#) by email, telephone, or MS Teams.

To make changes to your benefits for the 2021 plan year, go to <https://eCAPS.cityofsacramento.org> between Monday, October 5, through Friday, October 30, 2020. Changes cannot be accepted after Open Enrollment closes. Enrollments and changes for the 2021 plan year will be effective January 1, 2021, and premiums associated with benefit enrollments will be reflected on the January 12, 2021 paycheck.

**Should I do anything if I am not making any changes to my benefits? Yes!** To start, please read this entire memo as it contains important information about your benefits. Open Enrollment is the perfect time to review the benefits available to you. You should review your beneficiaries to ensure they are current, re-enroll in your Flexible Spending Account (FSA) or Dependent Care Assistance Program (DCAP) if you currently participate and wish to continue, and review the 2021 rate sheet so you know the amount you will be paying for benefits if enrolled.

**Know your eCAPS username and password!** Be sure you know your eCAPS username and password if you plan to make changes to your benefits during Open Enrollment. For assistance logging into eCAPS, contact the IT Helpdesk at (916) 808-7111.

**Verify your email address and mailing address are up to date in eCAPS.** Please make sure both addresses are current in eCAPS to receive important information about your benefits including notices about Open Enrollment and approaching deadlines.

## **UPDATES FOR JANUARY 1, 2021**

### **Premiums**

Premiums are decreasing for all medical plans, and all other rates remain the same as in 2020. The 2021 rate charts and the 2021 Employee Benefits Handbook are available on the [Benefit Services webpage](#). Please refer to the 2021 Employee Benefits Handbook for a summary of all benefits available to benefit-eligible employees.

### **Health Savings Account (HSA) Annual Limit for 2021**

The 2021 IRS limits for contributions to a Health Savings Account are:

- \$3,600 for employee-only coverage
- \$7,200 for employee +1 or more coverage
- If you are age 55 or older, you may contribute an additional \$1,000.

If you contributed to an HSA during the 2020 plan year and you remain enrolled in the same Account Based Health Plan (ABHP) medical plan for 2021, your 2020 contribution amount will automatically roll over for 2021, if you make no changes. If you want to increase your HSA contributions to the new 2021 limits, you must make this change in eCAPS during Open Enrollment. HSA contributions can be changed at any time during the plan year and do not require a Qualifying Life Event to make changes outside of Open Enrollment. You must be enrolled in an ABHP medical plan and meet other eligibility criteria, to contribute to an HSA.

If you select a different ABHP medical plan for 2021, you must enroll in the corresponding HSA plan that matches your ABHP medical plan provider.

### **Flexible Spending Account (FSA) and Dependent Care Assistance Program (DCAP) Elections**

If you want to enroll in an FSA account or the Dependent Care Assistance Program (DCAP), you must make a new election each year.

- FSA and DCAP elections must be made during Open Enrollment if you would like to continue contributing to your FSA/DCAP in 2021.
- Per IRS rules, your FSA/DCAP election made in 2020 cannot roll over to 2021.
- You cannot make changes to your FSA/DCAP election outside of Open Enrollment without a Qualifying Life Event.
- DCAP is used for paying for qualified childcare expenses for children under the age of 13 or for adult dependents who are incapable of caring for themselves. DCAP is not dependent life insurance.

## Life Insurance Beneficiaries – Review and Update

Open Enrollment is a great time to review your beneficiaries especially if you have experienced any family changes. When you log into eCAPS for Open Enrollment, you can see your current beneficiaries and make updates if needed. Please note you cannot remove historical data related to beneficiaries.

## 457(b) Deferred Compensation Changes

To change your 457(b) contribution, you must do so via your [online account](#) with Nationwide and not in eCAPS. If you need assistance with how to change your contribution amount for the 1st paycheck in January 2021, please contact Benefit Services no later than December 4, 2020. Changes to beneficiaries for the City's 401(a) or 457(b) plans are made by logging into your Nationwide online account. The City does not maintain this information.

## Dependent Eligibility Verification & Proof of Other Group Medical Coverage

- [Additional documentation](#) is required if you are newly enrolling a dependent on a City health plan or you are newly waiving City medical coverage.
- For new dependents, this documentation will prove the dependent's eligibility to be enrolled in a City plan.
- To waive medical insurance, you must provide proof of other *group* medical coverage obtained through a spouse or other employer.
- Documentation must be submitted to Benefit Services no later than 5:00 p.m., on Friday, November 13, 2020.
- Documentation may be sent using the following methods:
  - Scan and email documents to [openenrollment@cityofsacramento.org](mailto:openenrollment@cityofsacramento.org). Your scanned document must be legible when printed or you will be required to re-submit your documents
  - Mail paper copies of your documents to Benefit Services, 915 I Street, Plaza Level, Sacramento, CA 95814, postmarked by November 13, 2020.
  - Send your documents in a sealed envelope via interoffice mail to mailstop 9800
- [Acceptable dependent documentation](#) includes, but is not limited to, the following documents: birth certificate, marriage certificate, State of California registration of domestic partnership, or court order or decree.
- Proof of other *group* medical coverage, used to waive your City medical coverage, must illustrate that it is currently in effect for 2020 or your effective date of coverage will begin 1/1/2021, and contain the carrier name and group number. A medical card cannot be accepted as proof of current coverage. Be sure to request this documentation well in advance of the due date from the other employer where you will have coverage. No proof is required to drop dental and/or vision insurance.
- If Benefit Services does not receive your proof documentation by 5:00 p.m. on Friday, November 13, 2020, your requested 2021 medical enrollment changes or newly waiving medical for 2021 cannot be accepted, and you will remain in your current medical plan.

## Submitting your Open Enrollment Changes in eCAPS Prior to Close of Open Enrollment

It is important to complete your desired changes in eCAPS prior to the end of Open Enrollment.

- It is each employee's responsibility to make sure the Open Enrollment process is completed in eCAPS and required documentation is sent to Benefit Services by the stated deadlines.
- After submitting your changes in eCAPS, it is recommended that you exit and log back into eCAPS to double check you see your changes were recorded.
- If your changes were successfully submitted, you will see them in bold under your current benefit elections.
- If you do not see the changes, you did not accurately complete the process, and you must go through the process again.
- After Open Enrollment closes on October 30, you will not be permitted to make changes to your benefits without a Qualifying Life Event per the [City's IRC Section 125 Cafeteria Plan](#).
- Benefit Services cannot verify for you if you accurately made your changes during the Open Enrollment processing period. Complete the steps above for self-verification in eCAPS. You are encouraged to print the screens for your records.

### **Additional Information**

For detailed information on available benefit options, as well as a copy of communications sent during Open Enrollment, visit the [Benefit Services webpage](#) on the City's website. If you need additional information not included in any Open Enrollment materials, you are encouraged to [contact the provider directly](#).

For additional questions regarding Open Enrollment, please email [openenrollment@cityofsacramento.org](mailto:openenrollment@cityofsacramento.org) or contact the Benefit Services team member [assigned to your department](#) by email, telephone, or MS Teams.

If you call the main Benefit Services telephone line at (916) 808-5665 or your assigned Benefit Services team member, please leave a detailed message including your first and last name, telephone number, your employee ID, and the type of assistance needed. Be sure to speak clearly and slowly. A team member will return your call.