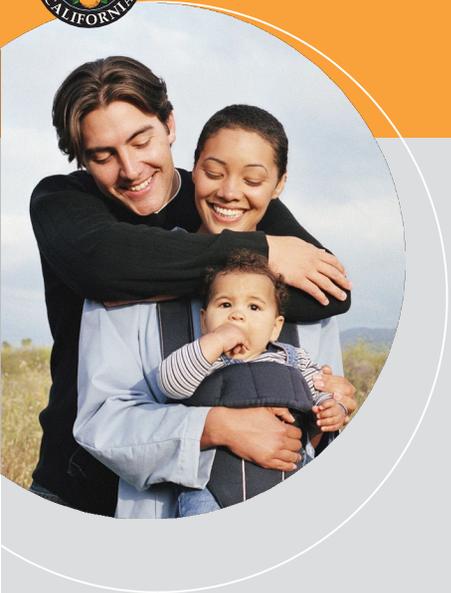




Leave of Absence Checklist

We want to ensure your leave of absence goes smoothly. This checklist will help you before and during your leave, and when you return to work.



Carefully consider any decision to waive coverage.

If you waive County health coverage during your leave and separate from the County before returning to work in an active status, you cannot apply for COBRA coverage.

Pay attention to your email!

You will continue to receive critical and time sensitive benefits information from the County. Ignoring or deleting these emails without reading them may lead to you being dropped from coverage.

Before Starting Your Leave

- Speak with your supervisor or Human Resource Services (HRS) representative about your intent to take a leave of absence.
- Once you have exhausted your leave balances (i.e., paid time off and/or sick time) as required under your County Memorandum of Understanding (MOU), check with your union or MOU to see if you are eligible for Short-Term Disability (STD) benefits.
- Verify your home mailing and work email addresses with your HRS representative. You can add/update your personal email address on **My OC Benefits™**.
- Add **CountyofOrange@alight.com** to your contact list to ensure that any email related to your leave doesn't end up in your spam folder.
- Complete and return any necessary HRS forms.
- If you have an outstanding loan from your DC plan, call Empower at **1-866-457-2254** to transition to direct payments while on unpaid leave to avoid defaulting on your loan.

Once Your Leave Starts

- Call the **Benefits Service Center** at **1-833-476-2347** once your leave has been processed. The representative will go over the cost to maintain your benefits and the payment method.
- Review notices that are sent by the **Benefits Service Center**, as they will include important coverage information. If you are moving between leave statuses there may be automatic coverage changes and/or opportunities for you to actively make changes.
- If, while on leave, you need to register a birth, marriage or divorce, you can model these Qualified Life Events (QLEs) on **My OC Benefits™** to see the changes you can make.
- Call the **Benefits Service Center** if you want to add a dependent (e.g. spouse, newborn or adopted child) while on leave. Dependent Verification Services will contact you for any required documents (e.g., a birth or marriage certificate). Be sure to submit your documents by the deadline provided.
- Pay your premium invoices in a timely manner. You can set up direct debit payments on **My OC Benefits™** by providing your bank account number and routing number, which you can find on a blank check.

Continuing Your Benefits While on Leave of Absence



General Benefits Information

Each time you start an unpaid leave, you have the opportunity to:

- Drop your benefits
- Change your health plan
- Add or drop dependents

If you do nothing, you will remain in your current benefits.

Coverage cost while on leave may increase and is based on the type and/or length of your leave.

- Premiums will not change as long as you have paid time off to cover your costs while on leave.
- If you are on an unpaid Family Medical Leave Act (FMLA) leave, you will be invoiced for your portion of the total costs. The County will continue to pay its portion.
- If you are on an unpaid non-FMLA leave, you will be invoiced the full cost of your benefits.
- If your invoices are not paid in a timely manner, your coverage could be dropped until the first of the month following your return to work.
- If you were on an unpaid leave and chose “No coverage” and then transitioned to a paid leave, you will continue the “No coverage” option.



HCRA

- If you are on an unpaid leave, you can choose to continue to make post-tax contributions through direct billing and submit Health Care Reimbursement Account (HCRA) claims.
- If you choose not to contribute and your HCRA is dropped while on leave, you cannot submit claims for any expenses incurred during your leave.
- If you fund your HCRA through the Optional Benefit Plan, you can continue to submit claims during your leave.

DCRA

Based on IRS guidelines, you are ineligible to continue your Dependent Care Reimbursement Account (DCRA) while on leave. Contributions and access to DCRA will automatically end while on leave. You will have the opportunity to enroll back into DCRA when you return to work.



Other Benefits

- You may continue to access the Employee Assistance Program (EAP) during your leave.
- STD coverage, if you are eligible, will continue while you are on a state-mandated family or medical leave. Under some MOUs, STD ends after the first 30 days of paid military leave. If you later go on Long-Term Disability (LTD) leave, STD coverage will end on the first day of your LTD leave.
- Continuation of County-provided Life Insurance coverage, if you are eligible, while on leave depends on the type of leave; it may continue for the duration of your leave, or for three or 12 months from the date your original leave began. If you anticipate that you will be on a medical leave for more than a year, you can apply for a waiver of premium. If you are on a nonmedical leave, this coverage will end after three months.

More Information on Your Leave of Absence

County Couples

- If your spouse/domestic partner works for the County and you participate in the Employee Married to Employee (EME) Program, going on unpaid non-FMLA leave automatically dissolves the EME. The employee on leave will be added as a dependent under the working employee's coverage at regular health plan premiums.
- If you participate in the Retiree Married to Employee (RME) Program and the employee goes on unpaid leave AND waives health coverage, you will automatically be removed from the RME Program. The retiree spouse/domestic partner will be offered an opportunity to enroll in retiree health benefits as an individual.
- You will need to re-establish your EME or RME relationship as soon as you become eligible again.

Catastrophic Leave Donations

Through catastrophic leave donations, County employees can donate some of their leave balances for other employees to use if needed. If you are on a catastrophic leave as of the first of the month, you will pay your normal employee biweekly health plan premium.

Catastrophic leave can be complicated. Please call the Employee Benefits information line at 1-714-834-6282 for assistance.



Resources

Contact the **Benefits Service Center** at 1-833-476-2347 between 8 a.m. and 6 p.m. Pacific Time, Monday through Friday for support.

For questions about what leave types you are eligible for or when your eligible leave may change or will end, please contact your agency HRS.

Returning to Work

- Contact your agency HRS before your return date.
- Once your agency has returned you to an active work status, you will receive a solicitation from the **Benefits Service Center**. You will have a 30-day election window to make changes to your benefits.
 - If you waived coverage, or if your health coverage lapsed due to nonpayment, you can re-enroll in a health plan.
 - If you wish to remain in "No Coverage" you will need to elect "No Coverage" and agree to the attestation during the election window. Shortly after confirming elections, you will be solicited to provide information of your coverage elsewhere.
 - If you do not submit the requested information within 30 days of the solicitation, you will be automatically enrolled in Wellwise Choice PPO if you are a full-time employee or in Sharewell Choice PPO if you are a part-time employee.
 - If any benefits were dropped while you were on leave, you will need to re-enroll during the election window.
 - You may add or re-enroll dependents upon your return to work. Complete the Dependent Verification process for new dependents on **My OC Benefits™** and submit required documents no later than the specified deadline.
 - Although you have returned to work, you may have outstanding invoices from when you were on an unpaid leave. Be sure to continue payments to avoid coverages being retroactively dropped.