

WHAT TO KNOW GUIDE

— 2027 —

My OC Benefits™

Let's get started

Your What to Know Guide

Use this guide to learn more about County benefits, find helpful resources and explore the benefits enrollment process. You can find even more information on your benefits at the My OC Benefits™ website. Visit the site to see your current coverage, available health plan options, Summaries of Benefits and Coverage (SBCs) and more.

Time to Decide

You may be eligible to enroll or change your benefits if:

- It's time for Open Enrollment.
- You're a new employee.
- You experience a Qualified Life Event (QLE). See page 12.
- You're a current employee and you experience a change in employment status that impacts your benefits (e.g., promotion, full-time to part-time, transfer).
- You've moved out of your health plan's coverage area.
- You begin or end a leave of absence.

Notes for 2027

- Beginning in early October 2026, you will have an opportunity to visit the Virtual Benefits Fair! This is an online, self-guided tool that you can join at any time and that will remain available year-round to provide resources regarding health benefits and retirement (**Username**: COO2027; **Password**: Benefits2027). More information will be shared through your work email.
- If you do not actively make a change, you will default to your current medical coverage, including Health, Dental and Vision (if eligible) elections. However, you **must actively make a change** to your previous elections for the Health Care Flexible Spending Account (HCFSA), the Dependent Care Flexible Spending Account (DCFSA), and the Optional Benefit Plan (OBP) (if eligible). Your previous 2026 elections and contributions do not carry over to 2027.
- To provide another way to save for qualified health care expenses in 2027 and beyond, the County is implementing a **Health Savings Account (HSA)** with Blue Shield of California and HealthEquity. You are eligible to elect the HSA if you are enrolled in the Sharewell Choice PPO (HDHP). You may elect to allocate your OBP to your HSA.
- The IRS will announce the 2027 annual maximum limit for HCFSA sometime after the County's Open Enrollment period. The maximum HCFSA carryover limit from 2026 to 2027 is $680. If you do not make an active election for your 2027 HCFSA, any unused funds from 2026 will not carry over.

  The maximum allowable contribution to the DCFSA remains $7,500 per household ($3,750 each if married and filing separately). You must ensure that you and your spouse limit your individual elections to total no more than $7,500 combined. Any unused 2026 DCFSA funds are forfeited and do not carry over.
- The Cigna Choice HMO, Cigna Select HMO, and Kaiser Choice HMO plans will now cover acupuncture. To learn more about this new covered benefit, go to the Health Plan Comparison Chart on the Employee Benefits website under Health Plan Summaries.
- For retirees, the Sharewell Medicare Plan will no longer be available as an option in 2027. Participants who do not make an active election will default to Wellwise Retiree Medicare PPO Plan in 2027.

  If you are enrolled in Sharewell Choice and you are or become Medicare-eligible while an active employee, it is strongly recommended that you enroll in Medicare Part D to avoid a Medicare penalty. To learn more, review the Attaining Medicare Summary.
- A limited number of employees will be affected by a life insurance restructuring. This group will receive additional information specific to their options.
- The County will provide the information you need for 2027 Open Enrollment through emails and mailings.

Managing Your Benefits

The My OC Benefits™ website and the Benefits Service Center team are here to help you manage your benefits. Wherever you are, it's easy to reach us:

Offsite?
Access the **My OC Benefits™** website by logging on to **mybenefits.ocgov.com**.

In the office?
Click the **"My OC Benefits™"** link on **IntraOC** from your work computer.

On the go?
Use the **Alight Mobile app** on your mobile device once you've registered on the website.

Need more help or have questions?
You can use the chat feature on the website or app to connect with a representative (see **Benefits on the Go** below on the right).

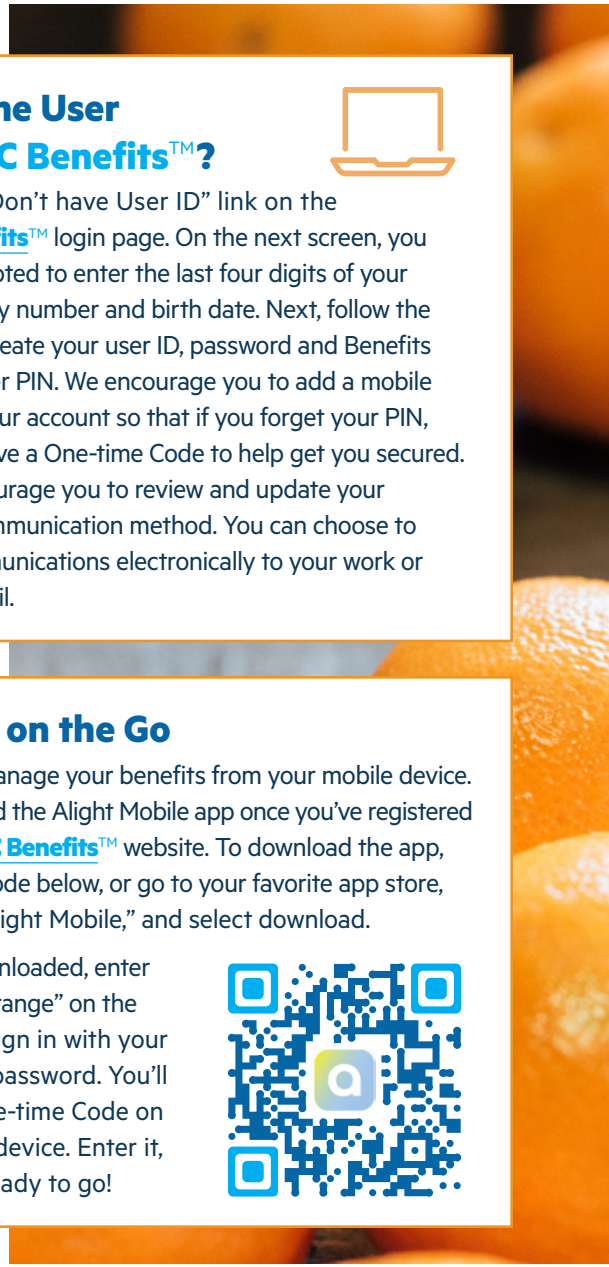
Benefits Service Center

If you have questions about your County benefits, you can reach out to the experts in the Benefits Service Center in one of three ways:

- On the My OC Benefits™ website, you can interact with the intelligent virtual assistant (IVA). Look for the blue "Need Help?" button at the lower right of every page. Click the button and the IVA will search a library of frequently asked questions to help you. If the IVA cannot resolve your question, it will connect you with a Benefits Service Center representative.
- To start a live chat with a Benefits Service Center representative, click "Contact Us" from the links at the bottom of any My OC Benefits™ website page, then "General Information."
- Still need help? Call the Benefits Service Center at **1-833-476-2347** between 8 a.m. and 6 p.m. Pacific Time, Monday through Friday, and you can speak to a representative. Make sure you have the personal identification number (PIN) you created when you set up your account.

If you do not have a valid PIN when your account is set up you'll receive a temporary PIN by mail. Call the automated system and enter your temporary PIN. You'll then be asked to create a permanent PIN. Once your new PIN is created, you'll be connected to the Benefits Service Center.

You can also check out the Plan Information page on the My OC Benefits™ website. It is a great resource for benefits information.



First-Time User on My OC Benefits™?

Select the "Don't have User ID" link on the My OC Benefits™ login page. On the next screen, you will be prompted to enter the last four digits of your Social Security number and birth date. Next, follow the prompts to create your user ID, password and Benefits Service Center PIN. We encourage you to add a mobile number to your account so that if you forget your PIN, you can receive a One-time Code to help get you secured. We also encourage you to review and update your preferred communication method. You can choose to receive communications electronically to your work or personal email.

Benefits on the Go

It's easy to manage your benefits from your mobile device. Just download the Alight Mobile app once you've registered on the My OC Benefits™ website. To download the app, use the QR code below, or go to your favorite app store, search for "Alight Mobile," and select download.

Once it's downloaded, enter "County of Orange" on the search line. Sign in with your user ID and password. You'll receive a One-time Code on your mobile device. Enter it, and you're ready to go!

Health Plan Options

Who Is Eligible for Benefits?

In general, you, your spouse/domestic partner and your dependents (including your spouse's/domestic partner's children) are eligible for coverage. Find detailed dependent eligibility information on the Employee Benefits website under the Tools section.

Health Plan Coverage Options

- Cigna Choice HMO
- Cigna Select HMO
- Kaiser Choice HMO
- Wellwise Choice PPO*
- Sharewell Choice PPO*
- No Coverage

If You Are Newly Eligible and Don't Enroll, You Will Have Automatic Coverage

Full-Time Employees:
Wellwise Choice PPO
(You Only coverage)

Part-Time Employees:
Sharewell Choice PPO
(You Only coverage)

Which Plan Is Right for Me?

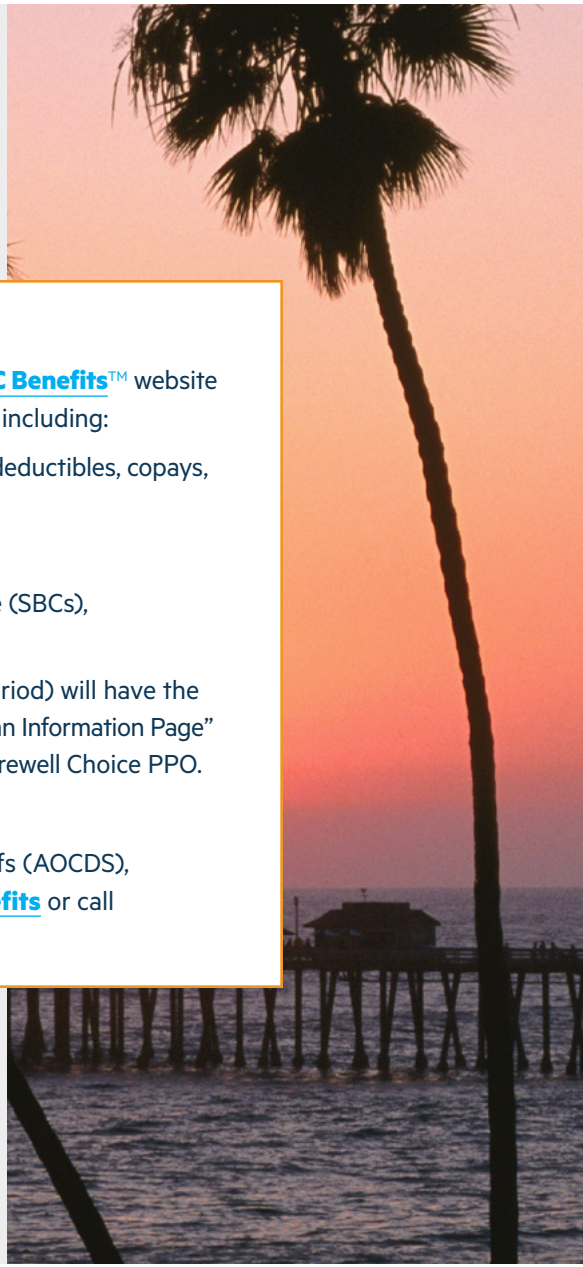
Are you a new employee? Not sure which plan to choose? Visit the My OC Benefits™ website for resources and tools that can help, based on your personal situation, including:

- **Health Plan Comparison Charts:** Use these charts to compare plans, deductibles, copays, coinsurance and more.
- **Find a Doctor:** Use this tool to find out if a doctor is in your network.
- **Plan Information Page:** Review Summaries of Benefits and Coverage (SBCs), 2027 health plan rates, and the 2027 Health Plan Comparison Charts.

Extra Help employees (scheduled to work ongoing 60 hours per pay period) will have the option to elect to enroll in the Sharewell Choice PPO health plan. Select "Plan Information Page" on the My OC Benefits™ website home page to learn more about the Sharewell Choice PPO. If you don't make an election, you will not be covered.

If you're affiliated with the Association of Orange County Deputy Sheriffs (AOCDS), your health plans will be offered through AOCDS. Visit aocds.org/benefits or call **1-714-285-9900** for more information.

*Wellwise Choice PPO and Sharewell Choice PPO are County plans administered by Blue Shield of California. Prescription drug benefits are administered by Optum Rx.



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Health Plan Options *(continued)*

To Help You Decide — HMO and PPO Medical Plan Comparison

Feature	HMO (Health Maintenance Organization)	PPO (Preferred Provider Organization)
Primary Care Physician (PCP)	Required. PCP must be selected (or assigned automatically).	Not required.
Specialist Visits	Typically coordinated through the PCP. Referrals are required.	Can see specialists directly without referral.
Provider Choice	Must use in-network providers for most covered services.	Can use both in-network and out-of-network providers.
Out-of-Network Coverage	Generally not covered except emergencies.	Covered at a lower level; member pays more.
Cost at Time of Service	Predictable copays for many services.	Deductible and coinsurance typically apply.
Monthly Cost	Click the link to view the **2027 Medical Plan Rate Chart** to compare.	Click the link to view the **2027 Medical Plan Rate Chart** to compare.
Deductible	Typically low or none for many services In-network.	Annual deductible applies.
Coinsurance	Usually limited due to copay only arrangement.	Common after deductible is met.
Flexibility	Less flexibility in provider selection.	More flexibility to choose providers.
Best For	Members who prefer low, predictable costs at the time of care.	Members who value provider choice and flexibility.
Preventive Care	Covered at 100% regardless of the plan you choose.	In-network covered at 100% regardless of the plan you choose.
Emergency Care	Covered regardless of network status.	Covered regardless of network status.
Ease of Use	Simple and predictable costs.	Greater responsibility for employees and dependents to manage provider selection, network status, and cost-sharing rules.

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Health Plan Options *(continued)*

Weighing Your Options

When making your medical plan elections, be sure to consider:

- Your total health care cost, including premiums and out-of-pocket costs for services.
- You and your covered dependents' health status — how much do you use health care?
- Any specific health care needs you know you'll have next year.

Highlights

You might consider an HMO if:

- **You want more predictable health care costs.**
- **You primarily use in-network providers.**
- **You don't mind coordinating care through a PCP.**

You might consider a PPO if:

- **You want maximum flexibility and provider choice.**
- **You prefer direct access to specialists.**
- **You may use out-of-network providers.**

To learn more about the County of Orange HMO and PPO plans, select "Plan Information Page" on the **My OC Benefits™** website home page to access the Summaries of Benefits and Coverage (SBCs).



Health Plan Options *(continued)*

County Couples Program

County employees or retirees who are married to or registered as domestic partners with other County employees or retirees (including those enrolled in an Association of Orange County Deputy Sheriffs (AOCDS) health plan) are eligible for special programs. The County contributes more toward the employee health plan premium if they have established an Employee Married to Employee (EME) relationship and are enrolled as an EME.

Do you have a spouse or registered domestic partner who is also a County employee?
You're eligible for the EME Program, if:

- You're both full-time County employees in a regular or limited-term status.
- Both the subscribing employee and their spouse or registered domestic partner attest to the EME Program requirements prior to enrollment.
- You are both enrolled in the same County/AOCDS health plan.

Do you have a spouse or registered domestic partner who is a County retiree?
You're eligible for the Retiree Married to Employee (RME) Program, if:

- You're a regular or limited-term employee and your spouse/domestic partner is a County retiree.
- You are enrolled in a County/AOCDS active health plan.
- Your spouse or domestic partner hasn't permanently disenrolled from retiree health coverage.
- Both of you attest to the RME Program requirements during enrollment.

Call the Benefits Service Center at **1-833-476-2347** for information on how to attest online and upload any required documents. If you're in an AOCDS health plan and want to subscribe, call AOCDS at **1-714-285-9900**.

To learn more about the County Couples Program, select "Plan Information Page" on the **My OC Benefits**™ website home page, then click on the "Dependent Eligibility" and follow the prompts.

Waiving Health Coverage

You can elect to waive County health coverage during the annual Open Enrollment period or if you experience a Qualified Life Event (QLE), such as having a child or getting married, but you must attest that you have other qualifying health coverage to meet the Affordable Care Act (ACA) requirements. You'll receive a notice electronically and/or via mail that includes instructions on providing information to confirm your alternative health coverage within 30 days of your election.

If you don't complete the online attestation by the deadline, you'll be automatically enrolled in the following coverage:

- **Full-Time Employees:** **Wellwise Choice PPO** (You Only coverage)
- **Part-Time Employees:** **Sharewell Choice PPO** (You Only coverage)

If you're already on waived coverage and wish to continue, there are no additional steps you need to take. If you take no action, your waived coverage will automatically carry over into the next plan year.

NOTE: If you retain Sharewell health care coverage, in order to receive the County of Orange payroll credit, Sharewell will be your primary provider, with an annual deductible of $5,000. Your health care expenses will go first to Sharewell, as your primary coverage.

Flexible Spending Accounts (FSAs)

What Are Health Care and Dependent Care Flexible Spending Accounts?

The County offers two Flexible Spending Accounts (FSAs) that serve very different purposes: the **Health Care Flexible Spending Account (HCFSA)** and the **Dependent Care Flexible Spending Account (DCFSA)**.

An **HCFSA** lets you pay for eligible health care expenses, and a **DCFSA** lets you pay for eligible dependent care expenses, for example, childcare. You can fund one or both accounts with contributions from your paycheck before federal and state taxes are calculated, which can reduce your taxable income.

Think of it this way: Your DCFSA is for caregiving costs, while your HCFSA is for medical-related expenses. They're separate accounts with separate contribution limits and cannot be used interchangeably. You can find the full list of eligible FSA expenses at **fsafeds.gov/support/eligibleexpenses**.

HCFSA

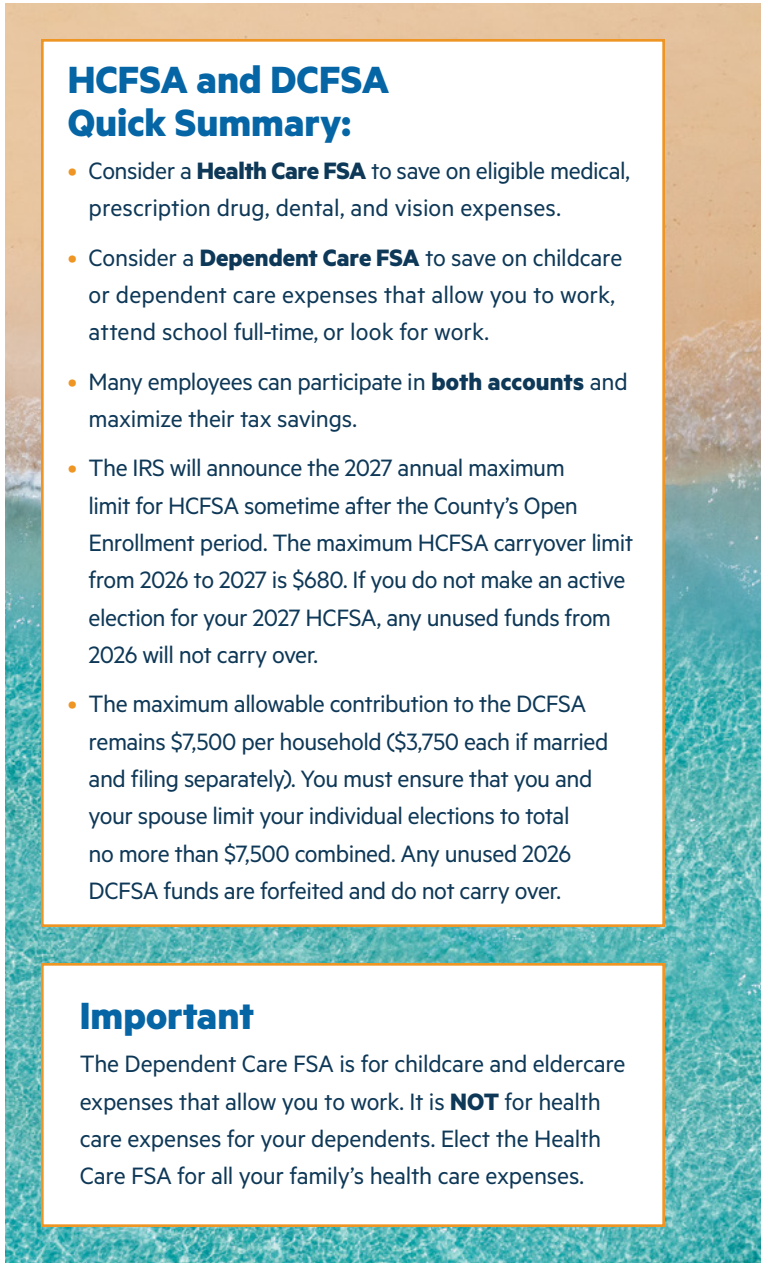
You can use the HCFSA for out-of-pocket health care expenses for you, your spouse and your dependents. For example: An employee expects $2,000 in medical expenses that are not reimbursed by insurance. They can contribute that amount to the HCFSA and use it tax-free throughout the year.

DCFSA

You can use the DCFSA for expenses related to the caregiving of your dependents (including elders) while you work. A helpful example is an employee who pays $7,500 annually for daycare for their two-year-old child. They can contribute that amount to the DCFSA without paying taxes. **Note:** Services for a dependent child are eligible for reimbursement only **until the child's 13th birthday**. However, expenses incurred before the child's 13th birthday may still be submitted during the plan's applicable run-out period. A dependent of any age who is incapable of self-care may also qualify for reimbursement under IRS rules.

The HCFSA Automax feature is designed to make it easier for you to increase your yearly contributions. If you choose Automax during your enrollment, your contribution will automatically increase to the new maximum if the IRS raises the allowable limit for the HCFSA.

If you go on unpaid leave, you can still make after-tax (not pre-tax) contributions through direct billing and submit HCFSA claims. If you don't contribute to your HCFSA while on leave, you can't submit claims for any expenses incurred during your leave. If you fund your HCFSA through the Optional Benefit Plan, you can continue to submit claims during your leave. Visit **irs.gov/pub/irs-pdf/p502.pdf** for more information.



HCFSA and DCFSA Quick Summary:

- Consider a **Health Care FSA** to save on eligible medical, prescription drug, dental, and vision expenses.
- Consider a **Dependent Care FSA** to save on childcare or dependent care expenses that allow you to work, attend school full-time, or look for work.
- Many employees can participate in **both accounts** and maximize their tax savings.
- The IRS will announce the 2027 annual maximum limit for HCFSA sometime after the County's Open Enrollment period. The maximum HCFSA carryover limit from 2026 to 2027 is $680. If you do not make an active election for your 2027 HCFSA, any unused funds from 2026 will not carry over.
- The maximum allowable contribution to the DCFSA remains $7,500 per household ($3,750 each if married and filing separately). You must ensure that you and your spouse limit your individual elections to total no more than $7,500 combined. Any unused 2026 DCFSA funds are forfeited and do not carry over.

Important

The Dependent Care FSA is for childcare and eldercare expenses that allow you to work. It is **NOT** for health care expenses for your dependents. Elect the Health Care FSA for all your family's health care expenses.

Health Savings Accounts (HSAs)

New in 2027 — Health Savings Account (HSA)

To provide another way to save for qualified health care expenses in 2027 and beyond, the County is implementing a Health Savings Account (HSA) with Blue Shield of California and HealthEquity. You are eligible to elect the HSA if you are enrolled in the Sharewell Choice PPO High Deductible Health Plan (HDHP).

Note: *You cannot have a Health Care Flexible Spending Account (HCFSA) and a Health Savings Account. If you have an HCFSA, you should use all of the funds in your account by December 31.*

What Is an HSA?

Distinct from either of the two flexible *spending* accounts, a Health Savings Account (HSA) is a tax-advantaged *savings* account that helps eligible employees pay for qualified health care expenses now and in the future. Employees enrolled in a high-deductible health plan, such as the Sharewell Choice PPO (HDHP), can contribute pre-tax money to their HSA and use those funds to pay for eligible medical, prescription drug, dental, and vision expenses.

Again, unlike with other spending accounts, HSA funds belong to you and remain in your account year after year. Unused funds roll over automatically, and the account can continue to grow through future contributions and potential investment earnings. HSAs offer a unique triple federal tax advantage: Contributions on federal earnings grow tax-free, and withdrawals for qualified health care expenses are tax-free. State of California taxes apply.

Visit **HealthEquity** for additional information.

HSA Quick Summary:

- Save money on taxes through pre-tax contributions.
- Pay for eligible health care expenses with tax-free funds.
- Keep unused funds from year to year with no “use-it-or-lose-it” rule.
- Take the account with you if you change jobs or retire.
- Build savings for future health care expenses, including those in retirement.
- You may choose to direct all or part of your OBP into your HSA instead of receiving it as taxable pay.

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Compare: Health Savings Account, Health Care Flexible Spending Account, and Dependent Care Flexible Spending Account[1]

Feature	Health Savings Account (HSA)	Health Care Flexible Spending Account (HCFSA)	Dependent Care Flexible Spending Account (DCFSA)
Purpose	Pay for qualified health care expenses and save for future health care costs.	Pay for qualified health care expenses.	Pay for eligible dependent care expenses, such as daycare, so you can work or attend school.
Eligibility	Must be enrolled in an HSA-qualified high-deductible health plan (HDHP) like the Sharewell Choice PPO (HDHP) and meet other IRS requirements.[1]	Generally available regardless of medical plan enrollment.	Available to employees with children under the age of 13 or disabled dependents.
Federal Tax Advantages	Pre-tax contributions, tax-free growth, and tax-free withdrawals for qualified expenses.[4]	Pre-tax contributions and tax-free reimbursements for qualified expenses.	Pre-tax contributions and tax-free reimbursements for qualified dependent care expenses.
Rollover of Unused Funds	Yes, all unused funds carry over indefinitely.	Although an FSA is typically subject to use-it-or-lose-it rules, County of Orange offers limited carryover.	Generally use-it-or-lose-it.
Portability	Account stays with the employee when changing jobs or retiring.	Generally ends when employment ends.	Generally ends when employment ends.
Investment Opportunity	Yes, your HSA allows investing once your account balance reaches $1,000.	No.	No.
Common Eligible Expenses[2]	Medical, prescription, dental, vision and other IRS-qualified health care expenses.[2]	Medical, prescription, dental, vision and other IRS-qualified health care expenses.[3]	IRS-qualified daycare, preschool, before- and after-school care, summer day camps, and care for eligible adult dependents.[3]
Can Funds Be Used for Retirement Health Care Costs?	Yes.	No.	No.
Annual IRS Contribution Limits	Subject to annual IRS limits.	Subject to annual IRS limits.	Subject to annual IRS limits.
Best For	Employees enrolled in the Sharewell Choice PPO (HDHP) who want to save for both current and future health care expenses.	Employees with predictable health care expenses during the plan year.	Employees who incur dependent care expenses while working.

[1] You cannot have a Health Care Flexible Spending Account (HCFSA) and a Health Savings Account (HSA).

[2] To review a list of eligible HSA expenses, visit **irs.gov/pub/irs-pdf/p502.pdf**.

[3] To review a list of eligible HCFSA and DCFSA expenses, visit **fsafeds.gov/explore**.

[4] State of California taxes apply.

Check with your financial advisor to understand the benefits and tax savings associated with HCFSAs, DCFSAs, and HSAs.

Health Reimbursement Arrangement (HRA)

The Health Reimbursement Arrangement (HRA) is a medical expense reimbursement program that helps you pay for future health care costs. Your HRA funds are only available once you are no longer employed by the County. Your HRA is meant to support you after leaving County service. This is different from the County's Health Care Flexible Spending Account (HCFSA), which is for active employees only.

Employees in eligible bargaining units receive biweekly HRA contributions into a HRA account, administered through Gallagher HealthInvest HRA. Eligible employees continue to receive HRA contributions every other week until separation from County service.

HRA account funds are invested and can grow over time, subject to market conditions. You may change your investment options at any time. The HRA receives a triple tax benefit, because contributions are pre-tax, investment earnings are tax-free, and reimbursements from the HRA are also tax-free. For more information about the County's HRA program, including a list of qualified medical expenses, investment options or a plan overview, visit **countyoforange.healthinvesthra.com**. For questions about the HRA, contact the Gallagher HealthInvest HRA's customer care team listed under the "Contact Us" tab.



Changing Elections

You have three opportunities to make or change benefit elections: when you first become eligible for coverage, during Open Enrollment, or if you have a Qualified Life Event (QLE). A QLE doesn't usually allow you to change your health plan, but you may be able to add or remove dependent coverage and change Flexible Spending Account elections. The IRS determines QLE rules. See the "Life Changes" section of the My OC Benefits™ website for details.

If You Have a QLE

You'll need to report your QLE within 30 calendar days after the event occurs. You can report your QLE by:

- Visiting the "Life Changes" section of the My OC Benefits™ website.
  - — Selecting the QLE you're reporting.
  - — Making any applicable changes for dependents and/or Flexible Spending Accounts, as well as other My OC Benefits™.
- Calling the Benefits Service Center at **1-833-476-2347**.

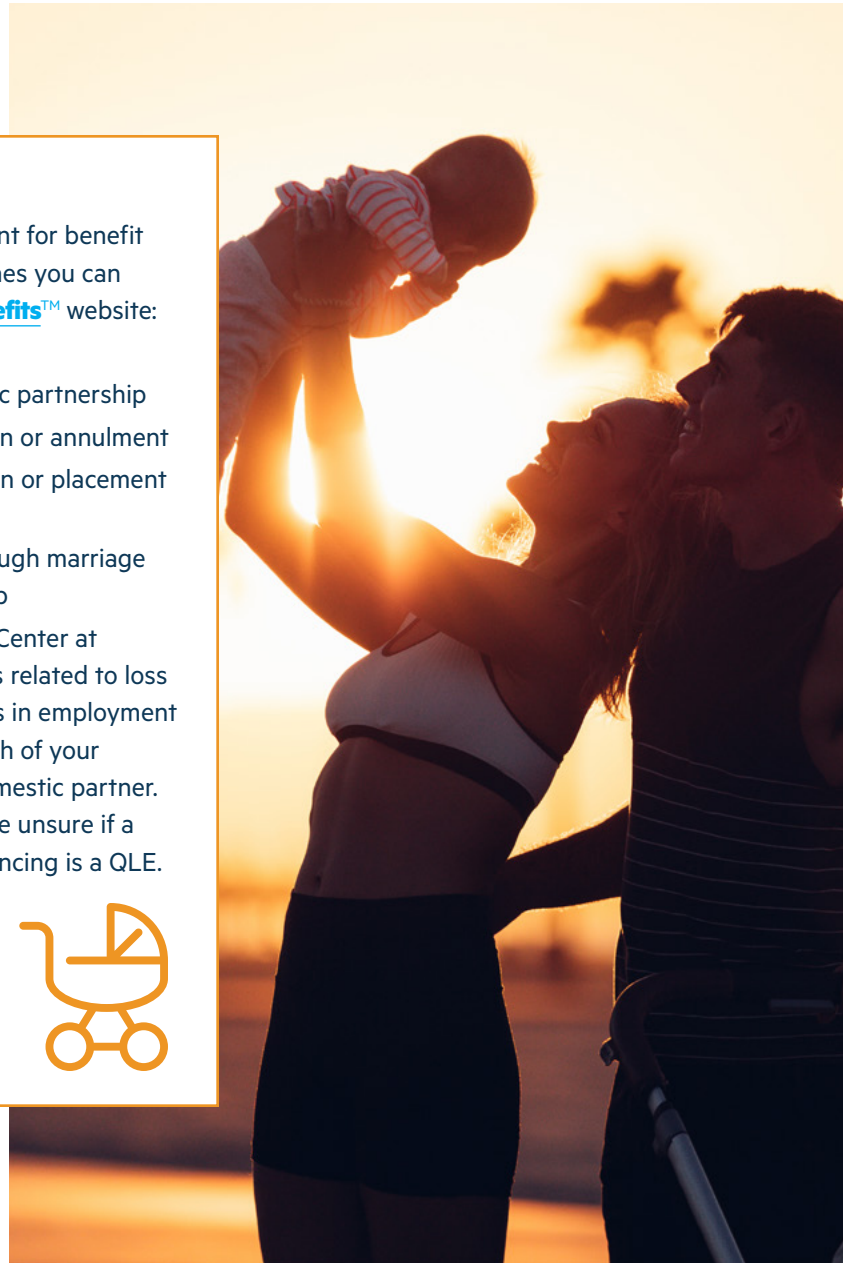
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QLE Examples

Not sure which QLEs count for benefit changes? Here are the ones you can report on the My OC Benefits™ website:

- Marriage
- Start or end of domestic partnership
- Divorce, legal separation or annulment
- Birth of a child, adoption or placement for adoption
- Addition of a child through marriage or domestic partnership

Call the Benefits Service Center at **1-833-476-2347** for QLEs related to loss of plan eligibility, changes in employment status, relocation, or death of your dependent or spouse/domestic partner. You can also call if you are unsure if a life event you are experiencing is a QLE.



Changing Elections *(continued)*

If You Have a QLE *(continued)*

If you don't report your QLE within 30 calendar days (60 calendar days for QLEs such as divorce, domestic partnership end, dependent loss of eligibility or gain or loss of CHIP or Medicaid coverage), you will not be able to make coverage changes until the next Open Enrollment period or until you experience another QLE.

Ineligible dependents need to be removed within 30 calendar days or you may be responsible for the cost of their premiums or services. If you add new dependents, you need to upload dependent verification and other required documents (like a birth or marriage certificate) through the My OC Benefits™ website by the deadline in your Message Center Alert, otherwise your new dependents will be terminated from coverage. The link in the Message Center Alert will direct you to where you can upload your verification documents. To find your Message Center Alerts, click on the bell icon in the top right of your My OC Benefits™ home page.

Important!
Changes related to a divorce become effective the first of the month following the event. Past premiums won't be refunded if it's reported outside the 60-day window.

In the Event of Your Death

If you have existing coverage, your spouse/domestic partner and covered dependent children may receive County health plan coverage under the Consolidated Omnibus Budget Reconciliation Act (COBRA). The Benefits Service Center at **1-833-476-2347** provides COBRA assistance and referrals to the Life/AD&D administrator.

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Changing Elections *(continued)*

Taking a Leave of Absence

Taking a leave of absence? First, speak with your supervisor and/or Human Resource Services (HRS) representative. Then, go to the My OC Benefits™ website home page, select "Plan Information Page," then "Other Resources," and open the "Leave of Absence Checklist" for additional steps you need to take before, during and as your leave is coming to a close. Whether you're on leave or returning from leave, you'll continue to receive critical and time-sensitive benefits information from the Benefits Service Center. Don't ignore it — you don't want to be dropped from coverage. That's why it is so important to make sure your current address is on file. Service providers will mail need-to-know information to your home, and we will also send your tax forms.
Note: There are different types of leave. Depending on the type of leave you take, your health care may be covered, not covered or partially covered by the employer contribution, and your cost for coverage may be paid through payroll or through monthly direct billing.

Also, if you have an outstanding 457(b) loan when you go out on leave, please contact Empower Retirement (**1-866-457-2254**) to make arrangements to continue your loan payments while on leave so that your 457(b) loan does not go into default.

If You Move

Make sure you contact your agency's Human Resource Services (HRS) to update your address once you've moved, and update any other County of Orange organization you're affiliated with. If your move makes you ineligible for your current health plan option, we'll send you a Confirmation of Benefits (COB). Contact the Benefits Service Center at **1-833-476-2347** within 30 days to make changes. Your new plan will become effective on the first of the month following your address change.



Annual Open Enrollment — How to Enroll

Open Enrollment takes place each fall and gives you the opportunity to review and make changes to your benefits coverage for the upcoming plan year. Any changes you make will take effect on January 1 and remain in place through December 31 of the same plan year.

If you're satisfied with your current benefits, you generally do not need to take any action. However, it's a good idea to review your coverage annually for any plan or cost changes.

Action Required for Flexible Spending Accounts and the Optional Benefit Plan

To participate in a Spending Account or the Optional Benefit Plan, you must enroll each year during Annual Enrollment:

- **Health Care Flexible Spending Account (HCFSA)** has a rollover option that requires you to make an election for 2027.
- **Dependent Care Flexible Spending Account (DCFSA)** elections do not carry over into the next plan year. Unused funds are forfeited at the end of the year.
- **Optional Benefit Plan (OBP)** elections do not automatically carry over into the following year and must be renewed during Open Enrollment.

Making Changes

You may update your benefit elections at any time during the Open Enrollment period. After Open Enrollment ends, you can make corrections during the designated Open Enrollment correction period.

Once the correction period closes, the coverage shown on your Confirmation of Benefits will remain in effect until the next Open Enrollment period, or you experience a **Qualified Life Event**, such as:

- Marriage
- Divorce
- Birth or adoption of a child
- Other qualifying events permitted under the plan

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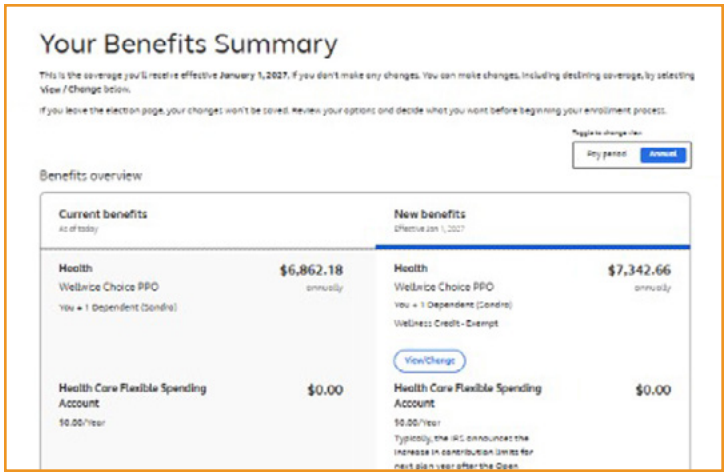
How to Enroll *(continued)*

Enrolling on the My OC Benefits™ Website

To get started, go to the My OC Benefits™ website or visit mybenefits.ocgov.com. If you're a new employee, you'll receive a notification directing you to enroll in your benefits. If you don't see a notification, visit the Message Center for a link.

To start enrollment:

1. Once you're logged in to your account, click "Enroll Now" to begin the enrollment process.
2. On the next page, click "Research and Enroll."
3. Select "View/Change" to see your options and review the Health Plan Comparison Charts, then choose which dependents you want covered by the health, dental and vision (if eligible) plans. (If you need to add a dependent, you'll need to provide supporting documentation. You can also waive health coverage for you and your dependents.)
4. Follow the steps to choose any additional benefits you're eligible for. Once you make your selection, you'll return to the "Your Benefits Summary" screen.
5. Satisfied with your choices? Great! Select "Confirm."



Important!

Check with the Benefits Service Center or in your My OC Benefits™ Message Center for information on other actions needed to complete your enrollment. You may also have this information mailed to you.

Enrollment Confirmation

Once you've completed enrollment, print your confirmation for your records. You will also receive your Confirmation of Benefits (COB) via email unless you do not have an email on file. If you do not have an email on file, you won't receive a separate COB. You will only be able to print your enrollment confirmation page once you've completed your enrollment.

New Dependents?

If you add new dependents, you'll need to upload dependent verification and other required documents, such as a birth or marriage certificate. You can do this through the My OC Benefits™ website and/or fax by the deadline in the Dependent Verification Services (DVS) notification initially sent to your home address. You can access the dependent verification link from the My OC Benefits™ Message Center to upload your documents.

Enrolling Through the Benefits Service Center

Need more support for your enrollment? You can start a web chat with a Benefits Service Center representative through the My OC Benefits™ website. Or you can call the Benefits Service Center at **1-833-476-2347** between 8 a.m. and 6 p.m. Pacific Time, Monday through Friday. If you enroll through the Benefits Service Center, we'll send you a Confirmation of Benefits (COB).



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How to Enroll *(continued)*

Thinking About Retiring?

If you're thinking about retiring, there are steps you can take now. For more information, check out the **What to Know Guide for Retirees** or go to the "Plan Information" page on the **My OC Benefits**™ website to review **the Intent to Retire** summary in the "Thinking About Retiring" section.

Plan Ahead Now

Do not wait until the last day of Open Enrollment to access your account. If you cannot get into your account for some reason, PIN/password resets can only be provided to you via postal mail. To reset your PIN/password, see below.

Make sure you know your PIN for the phone system:

Call the Benefits Service Center at **1-833-476-2347**:

- **If you have a PIN on hand:** Use it to authenticate through the system.
- **If you need to create a PIN:** When your account is set up, you'll receive a temporary PIN by mail. Call the automated system and enter your temporary PIN. You'll then be asked to create a permanent PIN. Once your new PIN is created, you'll be connected to the Benefits Service Center.

Important note!

Only County of Orange employees can call using a PIN. A family member is not allowed to use your employee PIN.

Make sure you know your password for your online account:

Go to **My OC Benefits**™ and log in using your user ID and password:

- **First-time users:** Click "Don't have User ID" link on the login page and follow the prompts to set up your credentials.
- **Current users:** Enter your User ID and then click the "Forgot Password" option to reset your information.

While online, review your contact information and communication preference:

- From your home page, go to the upper right corner and click the user profile icon.
- Select "Personal Information." If corrections are needed, please contact your agency's Human Resource Services for assistance.



Other Benefits

Health isn't just about medical care. That's why the County also offers emotional, financial and other wellness benefits for you and your family.

Benefit: Not all employees are eligible for all the plans listed below	**Automatic Benefit:** You're eligible even if you don't enroll
Employee Assistance Program: Aetna Resources for Living is a County-sponsored program, available at no cost. For more information, visit **the EAP resource page**.	Available to all employees and their household members, including dependent children up to age 26, whether or not they live at home.
Defined Contribution Plan: The County provides you with a simple, flexible way to save for retirement. Go to the Empower Retirement website for more information: **countyoforangedcplan.com**.	You must enroll to participate, unless you are in a bargaining unit that has adopted automatic enrollment. Those newly hired employees eligible for automatic enrollment will receive a notice in the mail with more information from Empower Retirement.
Health Reimbursement Arrangement (HRA): The HRA is a medical expense reimbursement program that helps you pay for future health care costs after separating from County service. Employees in eligible bargaining units receive biweekly HRA contributions into a HRA account, administered through Gallagher HealthInvest HRA. For more information, visit **countyoforange.healthinvesthra.com**.	Eligible employees are automatically enrolled. Quarterly statements are provided by Gallagher HealthInvest HRA. Check your Memorandum of Understanding for eligibility and contribution rates.
The County provides **Basic Life Insurance* and Basic Accidental Death and Dismemberment (AD&D)** coverage. You may purchase additional voluntary **Life Insurance and AD&D** coverage for yourself and your family. In some cases, evidence of insurability (EOI) may be required.[1]	You'll receive Basic Life and Basic AD&D coverage at the amount required by your Memorandum of Understanding.[2]
The County offers **Short- and Long-Term Disability** at 60 percent of your salary. Review the plan and online information for further details.[1]	60 percent of salary with some limitations/exclusions.
County of Orange Dental Plan: The County provides basic and major dental coverage with an annual benefit maximum of $2,000 per person. Dependent enrollment is available to full-time employees at no additional cost for dependents up to 26 years of age.[1]	**Full-Time Employees:** You Only coverage. **Part-Time Employees:** No coverage.
County of Orange Vision Plan: The County provides vision coverage. Dependent enrollment is available to full-time employees at a cost for dependents up to 26 years of age.[1]	**Full-Time Employees:** You Only coverage. **Part-Time Employees:** No coverage.
Optional Benefit Plan (OBP): The OBP[1] is an annual County-provided benefit that can be taken in the form of taxable cash or used tax-free in ways like contributing to an HSA, an HCFSA, or your 457(b) Defined Contribution Plan. The annual amount varies based upon job title and part-time or full-time status.[1]	If no election is made, your OBP will be paid in one taxable cash lump sum.
Judges' PERS Medical Claims Reimbursement Program: This program supplements your CalPERS plan by making up the difference of what CalPERS covers and what is left for you to pay. Eligible expenses would be the out-of-pocket amount that you would have to pay after your CalPERS health plan is applied, such as copayments, coinsurance and deductibles.[1]	All Orange County Superior Court Judges appointed or elected prior to December 10, 2013, are eligible for the program.

Your union may also offer supplemental benefits. Contact your union representative and/or check your Memorandum of Understanding for more information.

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[1]Not all employees are eligible for this benefit.

[2]The IRS requires that you pay federal tax on the value of certain life insurance coverage and/or contributions made by you and/or the County toward benefits coverage for domestic partners. This imputed income amount will be added to your biweekly pay as taxable earnings and included in your W-2 earnings at year end. You must pay taxes on this amount.

Other Benefits *(continued)*

Your Pathway to Wellness — helping you reach your wellness goals

Your Pathway to Wellness, the County of Orange Wellness Program, has tools and resources that support physical, emotional, financial, environmental and social health. The program can help you determine where you are on your health journey, and the steps you need to take to get to where you want to be. As a bonus, if you participate in the annual Wellness Credit program (typically mid-May through August), you'll get a 5 percent contribution from the County toward your health plan costs next year, saving you hundreds of dollars over the plan year. Learn more by visiting **webmdhealth.com/countyoforange**. In addition, there are many resources and voluntary opportunities for employees to set and achieve personal health and wellness goals. For more information, visit the **Employee Benefits** website.

WebMD protects the confidentiality of your personal health information in accordance with applicable federal laws. WebMD is not affiliated with the County of Orange, and your personal health information, medical conditions and health results are not shared with the County. WebMD provides the County with aggregate data, but this information cannot be tracked back to any individual.



Contacts

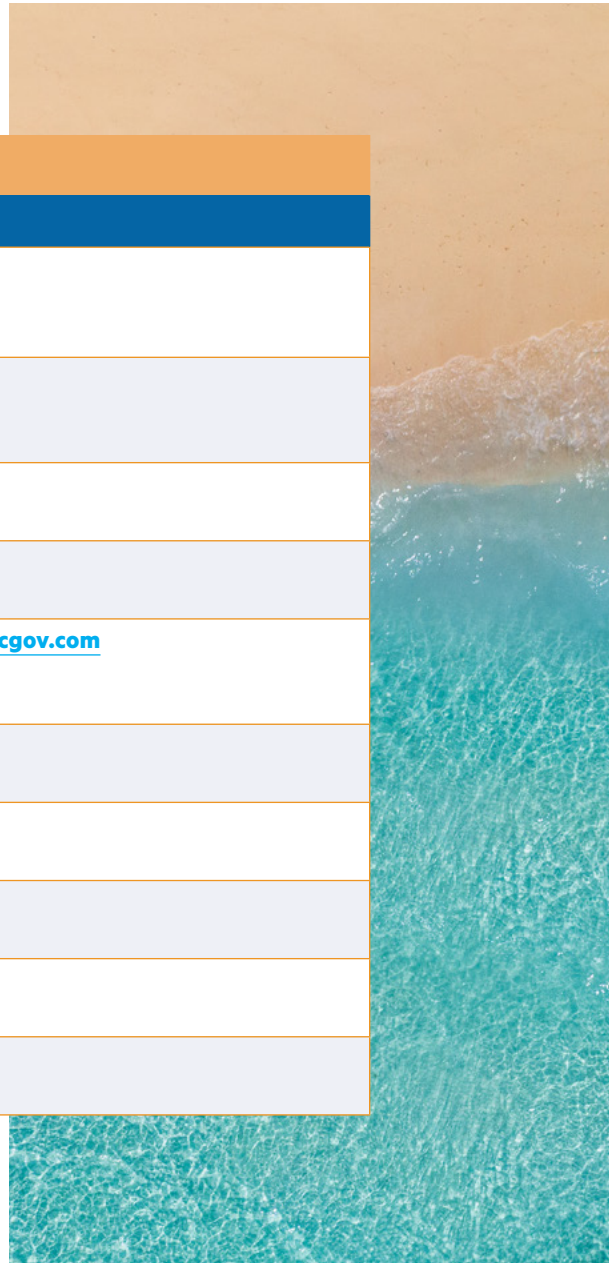
For Questions About...	Click or Call...
Benefits and Enrolling, COBRA and Direct Billing	
My OC Benefits™	mybenefits.ocgov.com Or go to the site directly from IntraOC once you've logged on to your computer at work. **1-833-476-2347**
Payment Options and Direct Billing (if you're on a leave of absence)	mybenefits.ocgov.com **1-833-476-2347**
Dependent Verification	mybenefits.ocgov.com Click on the link in your Message Center **1-833-476-2347** Fax: **1-877-965-9555**
COBRA	mybenefits.ocgov.com **1-833-476-2347**
Health Plans	
Cigna Choice and Select HMO Plans	cigna.com/countyoforange/enrollment **1-800-244-6224**
Wellwise Choice and Sharewell Choice PPO Plans (Blue Shield of California medical claims administrator and provider network)	blueshieldca.com/oc **1-888-235-1767**
Wellwise Choice and Sharewell Choice PPO Plans (Optum Rx pharmacy benefit manager)	optumrx.com **1-800-573-3583**
Kaiser Choice HMO Plan	my.kp.org/oc **1-800-464-4000**
County of Orange Dental Plan (Blue Shield of California)	blueshieldca.com/group/oc/dental **1-877-403-2273**
County of Orange Vision Plan (EyeMed)	eyemed.com **1-844-409-3401**

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Contacts *(continued)*

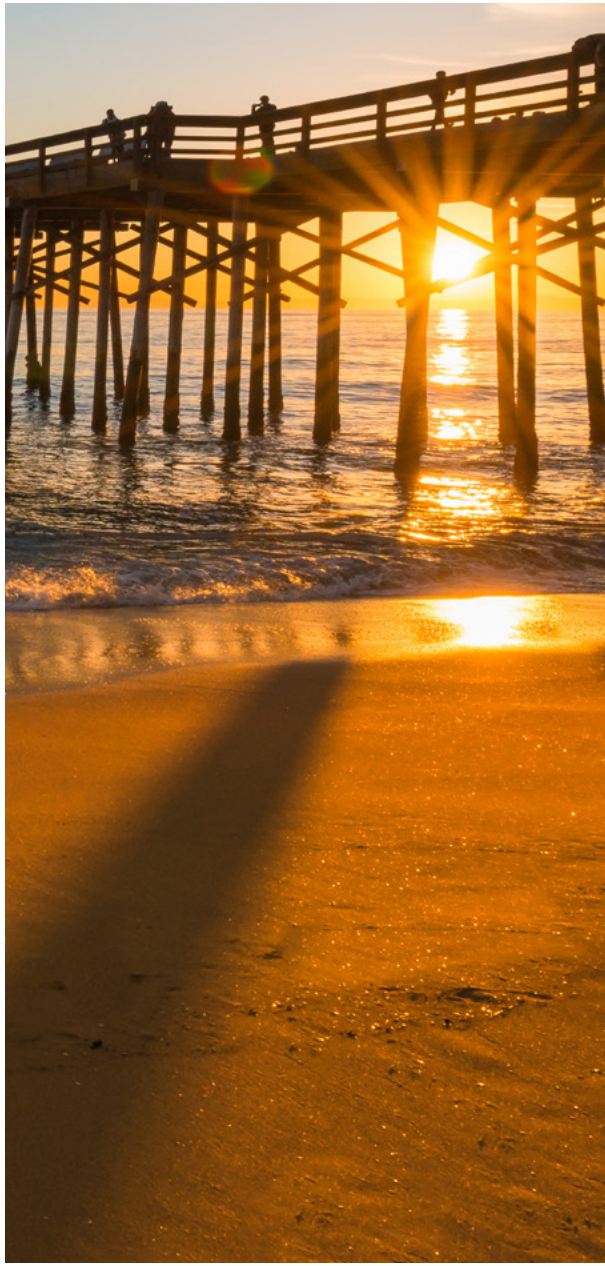
For Questions About...	Click or Call...
Supplemental and Other Benefits	
Employee Assistance Program	resourcesforliving.com Username: Orange County ca; Password: eap **1-800-221-0945**
Employee Benefits Website (General information only; visit the My OC Benefits™ website for the most up-to-date information specific to you)	hrs.oc.gov/employeebenefits
Defined Contribution Plans (Empower Retirement)	countyoforangedcplan.com **1-866-457-2254**
Health Saving Account (HSA) (HealthEquity)	healthequity.com/learn/partners/countyoforange **1-877-857-6810**
Health Care Flexible Spending Account (HCFSA) or Dependent Care Flexible Spending Account (DCFSA) (Flexible Spending Accounts)	Smart-Choice Accounts website through mybenefits.ocgov.com **1-833-476-2347**
Health Reimbursement Arrangement (HRA) (Gallagher HealthInvest HRA)	countyoforange.healthinvesthra.com **1-833-382-2617**
Retirement Pension (OCERS)	ocers.org **1-714-558-6200**
Life Insurance and Accidental Death and Dismemberment (The Hartford)	thehartford.com **1-800-523-2233**
Short- and Long-Term Disability (The Standard Insurance Company)	standard.com **1-833-786-5639**
Your Pathway to Wellness Program (WebMD)	webmdhealth.com/countyoforange **1-800-492-9812**

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Contacts *(continued)*

For Questions About...	Click or Call...
Unions	
ACLEM Association of County Law Enforcement Management	**1-714-569-2044**
AFSCME American Federation of State, County and Municipal Employees	**www.afscme36.org** **1-844-533-2956** **1-213-487-9887**
AOCDS Association of Orange County Deputy Sheriffs	**www.aocds.org** **1-714-285-2800**
IUOE International Union of Operating Engineers	**www.local501.org** **1-213-385-1561**
OCAA Orange County Attorneys Association	**www.ocaa.net** **1-714-973-1914** **1-714-907-7178**
OCEA Orange County Employees Association	**www.ocea.org** **1-714-835-3355**
OCMA Orange County Managers Association	**ocmanagers.com** **1-714-953-6262**
Teamsters Local 952 Teamsters	**www.teamsters952.org** **1-714-740-6200**



About This Guide

This Guide is only an overview of the benefit plans available to you. The plan documents and insurance policies for each plan provide the detailed, legal information about your coverage. If there is any difference between this Guide and the plan documents or insurance policies, the plan documents and insurance policies will govern.

Alight's Commitment to Protecting Personal Information

Alight Solutions has implemented various technical, administrative and organizational security measures to protect the confidentiality of the personal information we process. We have policies, procedures and controls to reduce the risk of unauthorized or accidental use, disclosure or destruction of your personal information, and we train our employees on data security.

If you are a California resident, California law provides you with certain rights. If you are an employee of the County of Orange receiving services from Alight, Alight receives your information solely for the purposes of completing a business purpose of our clients and does not use or disclose your information except as necessary to accomplish the business purpose for which we received your information. Sometimes the County of Orange may possess some of your information, and we may redirect a query to the County of Orange to gain this information. The information will only be used for completing our business purposes.

California Civil Code Section 1798.83 permits you to opt-out of the disclosure of your personal information by Alight to third parties for the third parties' direct-marketing purposes. We do not disclose your personal information to third parties for the third parties' direct-marketing purposes. If this policy were to change, we would inform you in writing. You can opt-out of such disclosures by sending us an email to **privacy.info@alight.com** or writing to Alight Solutions, ATTN: Chief Privacy Officer, Legal Department, 320 South Canal Street, 50th Floor, Suite 5000, Chicago, Illinois 60606.

If you have any questions about security on our website, you can contact us at **privacy.info@alight.com**.

Alight Smart-Choice Accounts is a registered trademark of Alight Solutions LLC.

