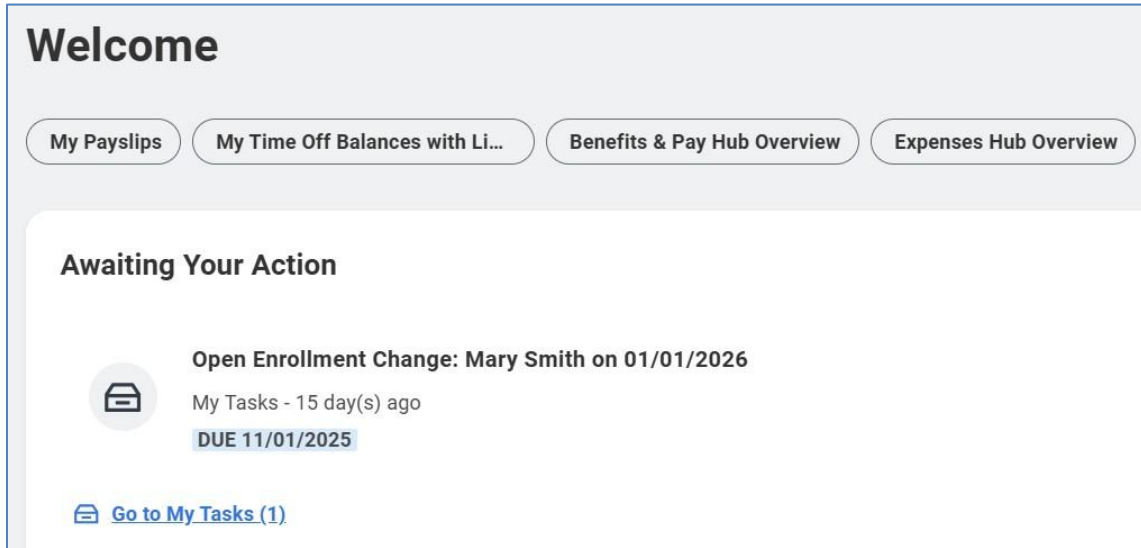


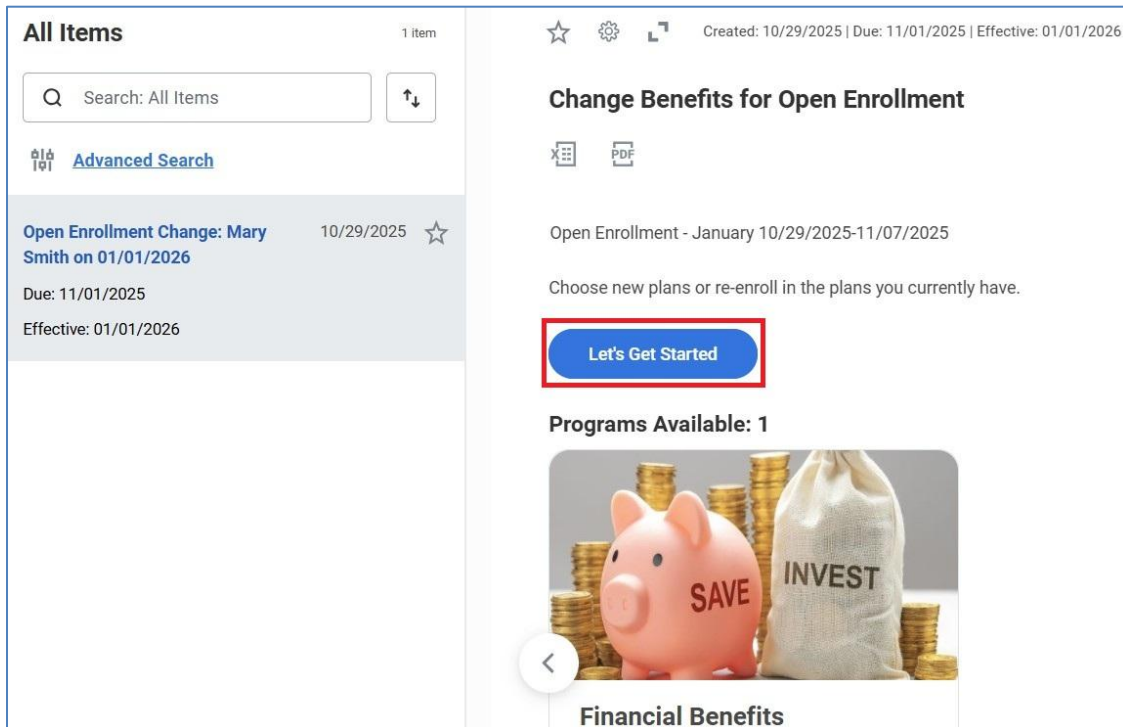
Selecting Your Benefits

When it is time for open enrollment, you will receive an Open Enrollment task in your Workday Inbox. To complete your open enrollment:

1. Go to your Workday homepage and click on your **Open Enrollment** in your inbox.



2. Click on **Let's Get Started**



Open Enrollment Instructions



- Each benefit type is listed separately. Click on **Manage** to change an existing benefit or add a dependent, Click on **Enroll** to elect or re-enroll for the next benefit year. Please note that Health Savings Accounts, Flexible Spending and Dependent Care reset to zero every year.

Health Care and Accounts

Medical
Kaiser Permanente HMO SMC

Cost (Monthly)
Coverage

\$102.78
Employee

Manage

Dental
Delta Dental DHMO

Cost (Monthly)
Coverage

\$4.50
Employee

Manage

Vision
Vision Service Plan

Cost (Monthly)
Coverage

Included
Employee

Manage

Health Savings Account
Waived

Enroll

- Modify your level of coverage as needed on any eligible plan by clicking on **Manage/Enroll**.

Adding Dependents

From the Benefit Plan:

- Click the appropriate benefit plan you wish to add/remove a dependent (see step 4 above).
- Select the new plan or click **Confirm & Continue** to remain with the current Blue Shield/Kaiser plan.

Plans Available

Select a plan or Waive to opt out of Medical. The displayed cost of waived plans assumes coverage for Employee.

6 items

*Selection	Benefit Plan Details	You Pay (Monthly)	Company Contribution (Monthly)
☐ Select ☒ Waive	Aetna HDHP SMC	Included	\$0.00
☐ Select ☒ Waive	Aetna HMO AVN - SMC	Included	\$0.00
☒ Select ☐ Waive	Aetna HMO SMC	Included	\$0.00
☐ Select	Aetna PPO	Included	\$0.00

Confirm and Continue

Cancel

Health Care Instructions

General Instructions

It's that time of year again - Open Enrollment! For a short time, you'll be able to make changes to your benefits, add or remove dependents and sign up for new programs. It's also the time when the County announces changes to the current plans for the upcoming year.

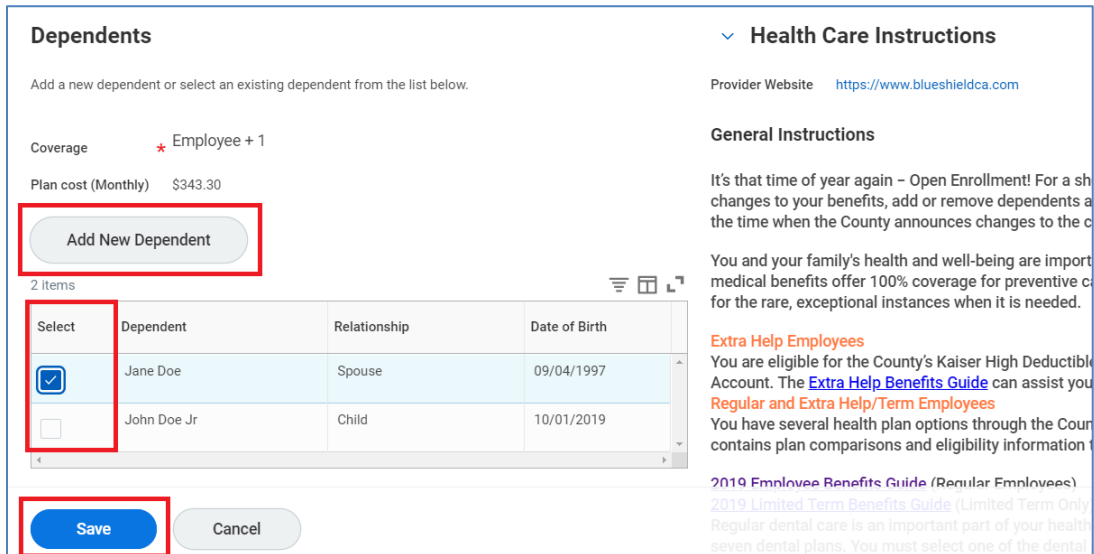
Aetna is Replacing Blue Shield of California
Beginning January 1, 2023, the County of San Mateo will replace Blue Shield with **Aetna** as a medical carrier/provider. We will no longer offer any Blue Shield medical plans. We will continue to offer all current Kaiser Permanente plans.

For information on Kaiser and Aetna, please visit the informational sites provided.

- [Kaiser HMO](#)
- [Kaiser HDHP](#)
- [Aetna](#) (HMO, PPO, HDHP)

All of your medical plan options provide access to quality care and cover a similar list of procedures. It's the details of how you share the cost of care - your bi-weekly contribution amount, and your co-payments and coinsurance - that differ. For detailed information please review the Employee Benefits Guides

7. Select the name of the dependent you wish to include or click the **Add New Dependent** icon to create a new dependent.



Dependents

Add a new dependent or select an existing dependent from the list below.

Coverage * Employee + 1

Plan cost (Monthly) \$343.30

Add New Dependent

2 items

Select	Dependent	Relationship	Date of Birth
☒	Jane Doe	Spouse	09/04/1997
☐	John Doe Jr	Child	10/01/2019

Save **Cancel**

Health Care Instructions

Provider Website <https://www.blueshieldca.com>

General Instructions

It's that time of year again – Open Enrollment! For a sh... changes to your benefits, add or remove dependents a... the time when the County announces changes to the c...

You and your family's health and well-being are import... medical benefits offer 100% coverage for preventive c... for the rare, exceptional instances when it is needed.

Extra Help Employees

You are eligible for the County's Kaiser High Deductible Account. The [Extra Help Benefits Guide](#) can assist you

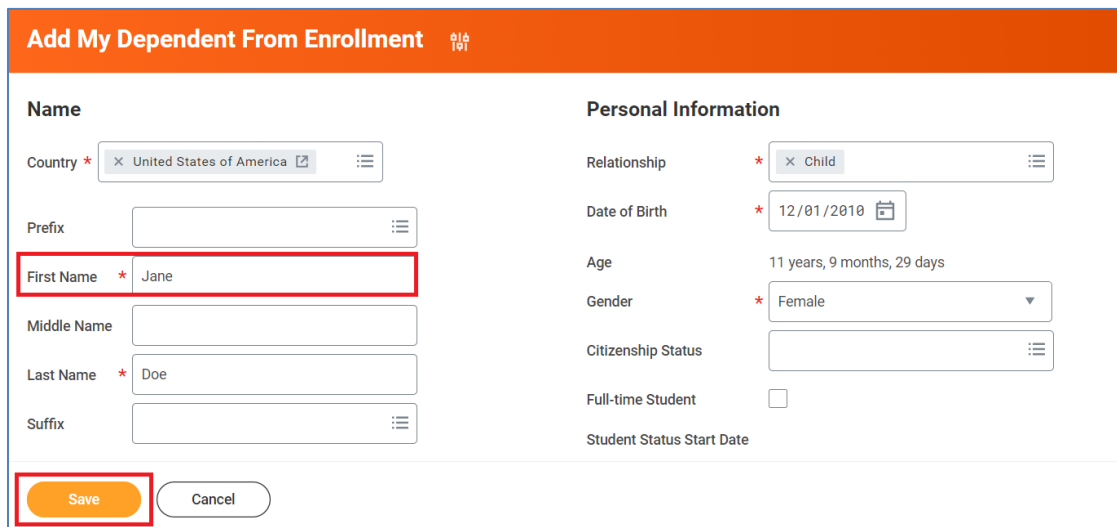
Regular and Extra Help/Term Employees

You have several health plan options through the Cour... contains plan comparisons and eligibility information t...

[2019 Employee Benefits Guide \(Regular Employees\)](#)
[2019 Limited Term Benefits Guide \(Limited Term Only\)](#)
Regular dental care is an important part of your health... seven dental plans. You must select one of the dental...

8. Complete all required fields for your new dependent and click **Save**.

If you add new dependents, you need to attach proof of eligibility before submitting your enrollment. See instructions on [Attaching Supporting Documents](#).



Add My Dependent From Enrollment

Name

Country *

Prefix

First Name *

Middle Name

Last Name *

Suffix

Personal Information

Relationship *

Date of Birth *

Age 11 years, 9 months, 29 days

Gender *

Citizenship Status

Full-time Student ☐

Student Status Start Date

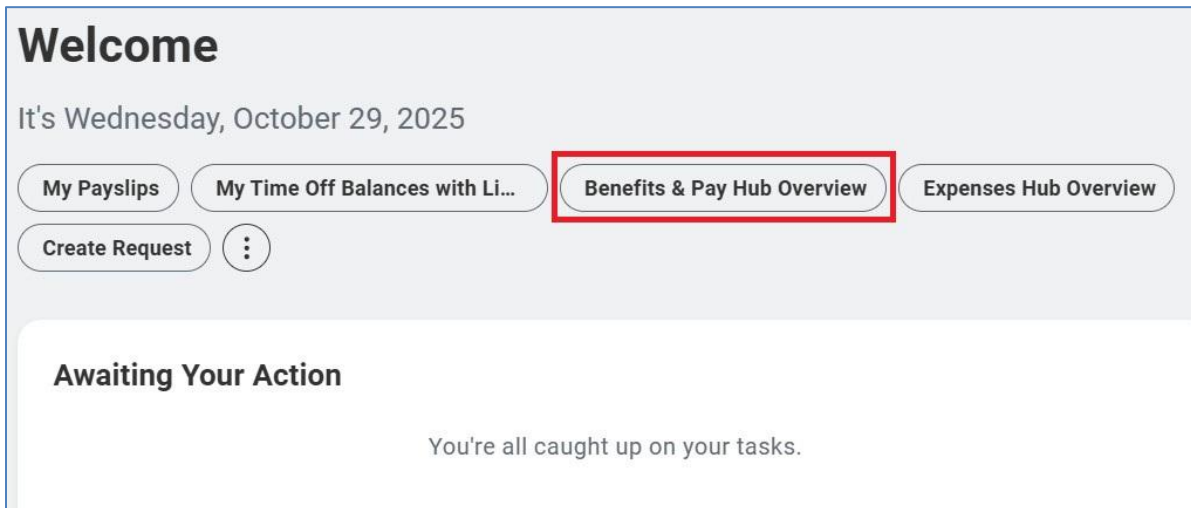
Save **Cancel**

Open Enrollment Instructions

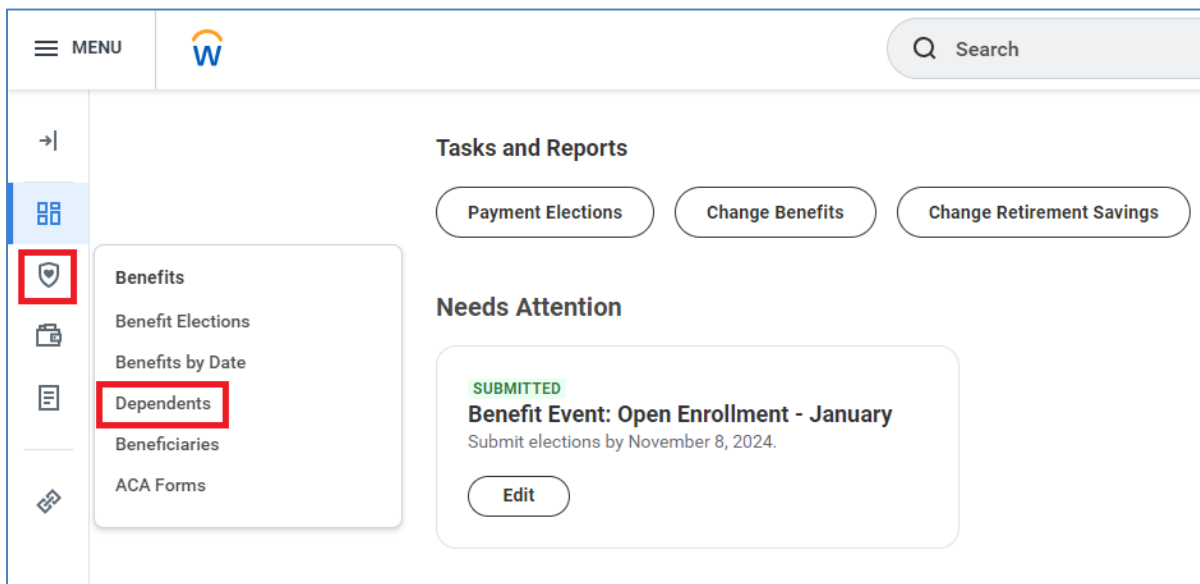


Modifying Dependents

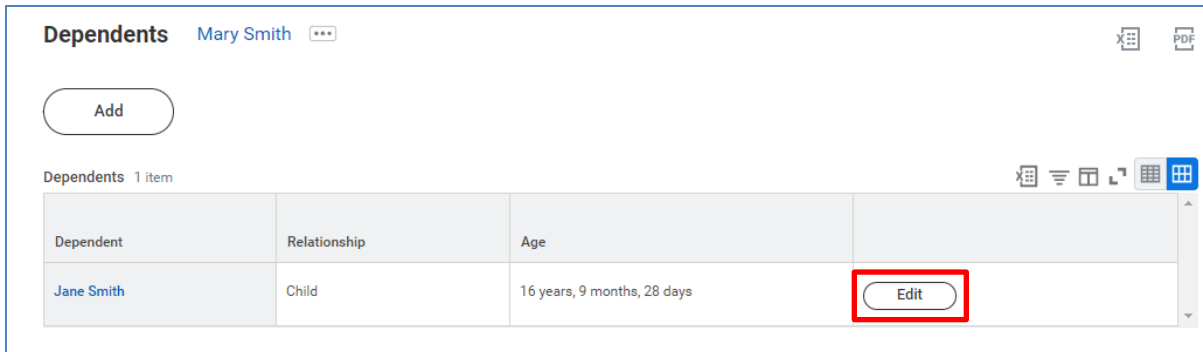
1. Click on the **Benefits and Pay Icon** 



2. Click on the **Benefits Icon**  then click on **Dependents**



- Click on **Edit** next to the dependent you wish to update. (Please note this is to update demographic data for existing dependents. Please follow the proper process to add/create new dependents).



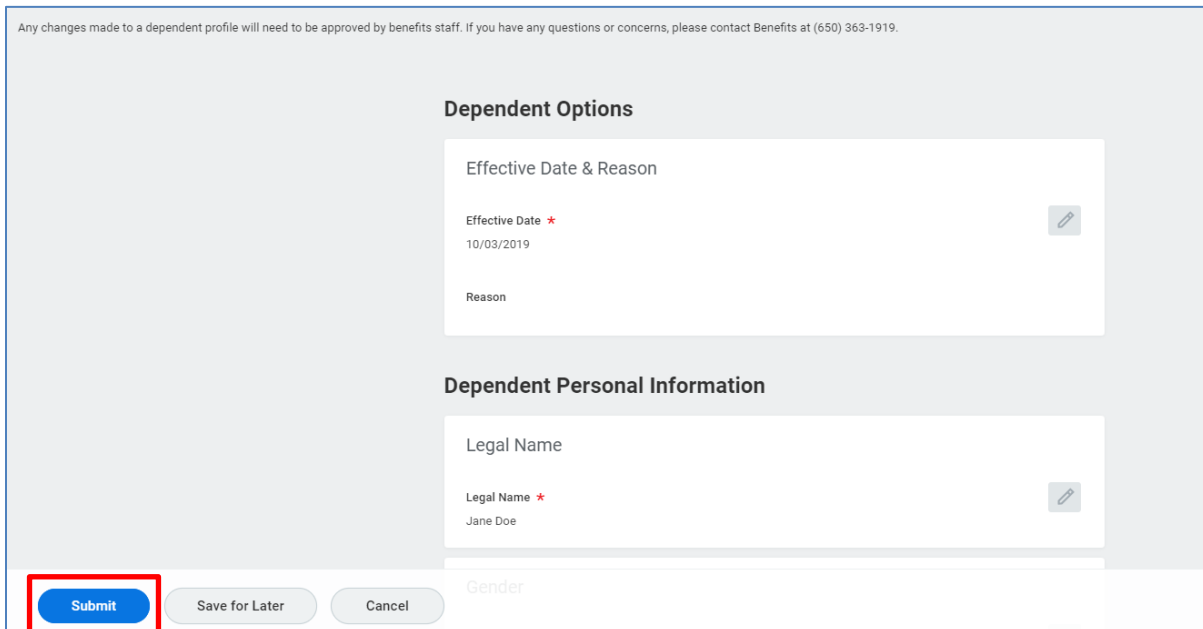
Dependents Mary Smith ***

Add

Dependents 1 item

Dependent	Relationship	Age	
Jane Smith	Child	16 years, 9 months, 28 days	Edit

- Update the necessary fields and click **Submit**.



Any changes made to a dependent profile will need to be approved by benefits staff. If you have any questions or concerns, please contact Benefits at (650) 363-1919.

Dependent Options

Effective Date & Reason

Effective Date *
10/03/2019

Reason

Dependent Personal Information

Legal Name

Legal Name *
Jane Doe

Submit Save for Later Cancel

Open Enrollment Instructions



Adding the Health Savings Election

Click on **Enroll** on the Health Savings Election tile/icon. Depending on your elections from the previous screen, you may or may not be eligible for this plan. To be eligible, you need to be enrolled in a High Deductible Health Plan.

1. Click on **Select** to enroll and click **Confirm & Continue**.

Health Savings Account

Projected Total Cost (Monthly)
\$530.92

Plans Available

Select a plan or Waive to opt out of Health Savings Account.

1 item

*Selection	Benefit Plan Details	You Contribute (Monthly)	Company Contribution (Monthly)
☒ Select ☐ Waive	Benefit Coordinators Corporation		

Confirm and Continue **Cancel**

Health Savings Account Instructions

General Instructions

If you chose an HDHP medical plan, you can elect to make contributions into a Health Savings Account (HSA). The IRS establishes the annual limits that can be deposited into your HSA based on individual or family coverage. The maximum contribution shown below includes the amount the County will deposit into your account. Contributions are made over 26 pay periods. If you're 55 or older as of December 31, 2022, you can contribute an additional \$1,000 catch-up contribution. For detailed information, please review the HSA section of the [Benefits Guide](#).

2022 maximum contributions:

- \$3,650 employee-only coverage
- \$7,300 Family coverage
- 55+ Catch-up: \$1,000

What is the HSA referenced under the High Deductible Health Plan (HDHP) options?

- A tax-favored account that works in conjunction with the High Deductible Health Plan (HDHP)
- Pre-tax dollars to pay for current and future eligible expenses
- Employee health contributions

2. Enter in the annual or per paycheck amount you wish to have deducted and click **Save**.

Health Savings Account - Benefit Coordinators Corporation

Projected Total Cost (Monthly)
\$739.25

Contribute

Per Paycheck
Annual Total Paychecks 26

Maximum Annual Amount: \$3,850.00

Summary

Contribution (Monthly)	\$208.33
Annual Company Contribution	\$750.00
Total Annual HSA Contribution	\$3,250.00

Save **Cancel**

Health Savings Account Instructions

Provider Website [My BCC](#)

General Instructions

If you chose an HDHP medical plan, you can elect to make contributions into a Health Savings Account (HSA). The IRS establishes the annual limits that can be deposited into your HSA based on individual or family coverage. The maximum contribution shown below includes the amount the County will deposit into your account. Contributions are made over 26 pay periods. If you're 55 or older as of December 31, 2022, you can contribute an additional \$1,000 catch-up contribution. For detailed information, please review the HSA section of the [Benefits Guide](#).

2022 maximum contributions:

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- \$7,300 Family coverage
- 55+ Catch-up: \$1,000

What is the HSA referenced under the High Deductible Health Plan (HDHP) options?

- A tax-favored account that works in conjunction with the High Deductible

Open Enrollment Instructions



Adding a Flexible Spending Account

Click on **Enroll** on the Health Care FSA or Dependent Care tile/icon. To be eligible for the limited Health Flexible Spending Plan, you need to be enrolled in a High Deductible Health Plan. Dependent Care does not require enrollment in a Medical plan.

1. Click **Select** for the plan you wish to enroll in and click on **Confirm & Continue**.

Health Care FSA

Projected Total Cost (Monthly)
\$94.83

Plans Available

Select a plan or Waive to opt out of Health Care FSA.

2 Items

*Selection	Benefit Plan Details	You Contribute (Monthly)	Company Contribution (Monthly)
☐ Select ☐ Waive	Benefit Coordinators Corporation Limited		
☒ Select ☐ Waive	Benefit Coordinators Corporation Traditional	\$83.33	

Confirm and Continue **Cancel**

Spending Account Instructions

General Instructions

A Medical Flexible Spending Account (FSA) allows you to make pre-tax contributions into reimbursement accounts. Money from these accounts is then used to pay eligible expenses. There are two health FSAs available, Traditional and Limited. For more information please review the FSA section of the [Benefit Guide](#).

- The **Traditional** FSA plan is available if you are **NOT** enrolled in an HDHP health plan and spending account funds can be used for medical, dental and vision care related expenses. You may elect up to \$2,850 for 2023.
- The **Limited** FSA plan is only available if you **ARE** enrolled in an HDHP health plan and spending account funds can be used for dental and vision care related expenses. You may elect up to \$2,850 for 2023.

2. Enter in the annual or per paycheck amount you wish to have deducted and click **Save**

Health Care FSA - Benefit Coordinators Corporation Traditional

Projected Total Cost (Monthly)
\$94.83

Contribute

Per Paycheck
Annual Total Paychecks 26

Minimum Annual Amount: \$26.00
Maximum Annual Amount: \$2,850.00

Summary

Contribution (Monthly) \$83.33
Total Annual Contribution \$1,000.00

Save **Cancel**

Spending Account Instructions

Provider Website [My BCC](#)

General Instructions

A Medical Flexible Spending Account (FSA) allows you to make pre-tax contributions into reimbursement accounts. Money from these accounts is then used to pay eligible expenses. There are two health FSAs available, Traditional and Limited. For more information please review the FSA section of the [Benefit Guide](#).

- The **Traditional** FSA plan is available if you are **NOT** enrolled in an HDHP health plan and spending account funds can be used for medical, dental and vision care related expenses. You may elect up to \$2,850 for 2023.
- The **Limited** FSA plan is only available if you **ARE** enrolled in an HDHP health plan and spending account funds can be used for dental and vision care related expenses. You may elect up to \$2,850 for 2023.

Open Enrollment Instructions



Adding Group Life Insurance

If you enroll or increase any of your Additional Life Insurance Coverage, you are required to complete a physical examination and submit it directly to The Standard.

Click on the Additional Life tile/icon

1. Click on **Manage/Enroll** on the **Additional Life** tile/icon
2. Choose either **Select** or **Waive** coverage and click **Confirm & Continue**.

Additional Life

Projected Total Cost (Monthly)
\$739.25

Plans Available
Select a plan or Waive to opt out of Additional Life.

1 item

*Selection	Benefit Plan Details	You Pay (Monthly)	Company Contribution (Monthly)
☒ Select ☐ Waive	The Standard (Employee)	\$20.00	

Confirm and Continue **Cancel**

Insurance Instructions
When you select Additional Life - The Standard (Employee), you can also select Dependent Additional Life - The Standard (Dependent(s)), Spouse/Domestic Partner Additional Life - The Standard (Spouse/Dom Partner). If you waive any of these: Additional Life - The Standard (Employee), Workday automatically waives any of these: Dependent Additional Life - The Standard (Dependent(s)), Spouse/Domestic Partner Additional Life - The Standard (Spouse/Dom Partner).

General Instructions
Life insurance can be an important building block in your family's financial security. The County provides basic employee and dependent life insurance as well as accidental death and dismemberment (AD&D) employee coverage at no cost to you. You also have the option of purchasing additional life insurance for you and your dependents. The cost of the additional employee and spouse/domestic partner coverage is based on the amount of coverage selected and current age. Child additional life is a flat amount regardless of the number of dependents covered. If you select any additional life insurance...

3. Click on the dropdown menu icon  to view available coverage. Click on the coverage amount you would like to request then select a beneficiary.

Additional Life - The Standard (Employee)

Projected Total Cost (Monthly)
\$739.25

Coverage
Calculated Coverage \$250,000.00
Coverage * 

Plan cost (Monthly)

Beneficiaries
Select an existing or add a new beneficiary.

Primary Beneficiaries 0/1

Beneficiary	Percentage
☐ \$50,000	
☐ \$60,000	
☐ \$70,000	
☐ \$80,000	
☐ \$90,000	
☐ \$100,000	
☐ \$110,000	
☐ \$120,000	
☐ \$130,000	
☐ \$140,000	
☒ \$150,000	
☐ \$160,000	
☐ \$170,000	

Secondary Beneficiaries 0/1

Beneficiary	Percentage
☐ \$50,000	
☐ \$60,000	
☐ \$70,000	
☐ \$80,000	
☐ \$90,000	
☐ \$100,000	
☐ \$110,000	
☐ \$120,000	
☐ \$130,000	
☐ \$140,000	
☐ \$150,000	
☐ \$160,000	
☐ \$170,000	

Save **Cancel**

Insurance Instructions
Provider Website <https://www.standard.com/>

General Instructions
Life insurance can be an important building block in your family's financial security. The County provides basic employee and dependent life insurance as well as accidental death and dismemberment (AD&D) employee coverage at no cost to you. You also have the option of purchasing additional life insurance for you and your dependents. The cost of the additional employee and spouse/domestic partner coverage is based on the amount of coverage selected and current age. Child additional life is a flat amount regardless of the number of dependents covered. If you elect additional life insurance, you pay the premium through bi-weekly payroll deductions. For additional information, see the [Benefits Guide](#).

For 2022, there is a \$250,000 Employee ONLY- Additional Life Insurance-Special Enrollment Period.

- Employees with less than \$250,000 Additional Life Insurance can take advantage of the Special Enrollment Period.

1. Click the **+ sign** under primary beneficiary to add a new beneficiary or the **- sign** to remove a beneficiary. Click on the percentage amounts and update the allocation and click Save to complete the request. Please note all beneficiary changes made in Open Enrollment will not be effective until January 1, 2023.

Additional Life - The Standard (Employee)

Projected Total Cost (Monthly)
\$47.50

Coverage

Your guaranteed coverage amount for Additional Life - The Standard (Employee) is \$1. Submit your Evidence of Insurability to The Standard to be considered for the coverage amount of \$150,000.

Calculated Coverage \$150,000.00

Coverage *

Plan cost (Monthly) \$36.00

Beneficiaries

Select an existing or add a new beneficiary person or trust to this plan. You can also adjust the percentage allocation for each beneficiary.

Primary Beneficiaries 2 items

	Beneficiary	Percentage
	x Michael Smith	50
	x Jane Smith	50

Save

Cancel

Insurance Instructions

Provider Website <https://www.standard.com/>

General Instructions

Life insurance can be an important building block in your financial plan. The Standard provides a variety of life insurance products to help you protect your family and dependent life insurance as well as accidental death and dismemberment insurance. You also have the option of purchasing additional life insurance coverage for your employee and spouse/domestic partner coverage is based on the employee's salary. Additional life is a flat amount regardless of the number of dependent lives. To receive your additional life benefits, you pay the premium through bi-weekly payroll deduction. For more information, see the section of the [Benefits Guide](#).

For 2022, there is a \$250,000 Employee ONLY- Additional Life coverage limit.

To Enroll or change your existing 457 Deferred Compensation election click on **Manage** on the 457 tile/icon

1. **Select** Deferred Compensation plan you wish to enroll into or change and click **Confirm & Continue**.

457

Projected Total Cost (Monthly)

\$47.50

Plans Available

Select a plan or Waive to opt out of 457.

2 items

*Selection	Benefit Plan Details	You Contribute (Monthly)	Company Contribution (Monthly)
☐ Select ☒ Waive	Empower Roth (Post-Tax)		
☒ Select ☐ Waive	Empower Traditional (Pre-Tax)		

Retirement Savings Instructions

General Instructions

Please not that any retirement savings change through December 31st, will not reflect on your changes to be reflect after January 1st, please ate a Retirement Savings change with an effective date of 1/1/2025.

The County's 457 Deferred Compensation Plan offers employees a plan with a variety of investment options, investment education, two voluntary Deferred Compensation plans to choose from, and the ability to make withdrawals. Please consult with your financial advisor to determine if this plan meets your individual needs and should be made in consultation with your financial advisor. If you choose to opt out of the plan, you will not be able to participate in the plan. If you choose to opt out of the plan, it's up to you. However, your contributions will be refunded to you.

The Traditional 457 Plan
Savings deductions are made on a **pre-tax basis**, earnings and distributions are taxed only as you received distributions.

The Roth 457 Plan
Savings deductions are made on an **after-tax basis**, earnings and distributions are tax-free.

Confirm and Continue

Cancel

Open Enrollment Instructions



- Click on the arrow under Contribution Type to designate deduction type, a percentage or flat \$ amount. Then enter the amount you wish to elect and click **Save**. Please note all changes are effective January 1, 2023.

457 - Empower Traditional (Pre-Tax)

Projected Total Cost (Monthly)
\$47.50

Contribute

Enter how much you want to contribute as an amount or a percentage.

Contribution Type *

select one

select one

Amount

Percentage

Retirement Savings Instructions

Provider Website <http://www.massmutual.com/>

General Instructions

Please not that any retirement savings changes you make from January 1st through December 31st, will not reflect on your pay until January 1, 2022. For changes to be reflect after January 1, 2022, you must complete your Open Enrollment or create a Retirement Savings plan by the effective date of January 2nd.

The County's 457 Deferred Compensation Plan offers employees an employer-sponsored savings plan with a variety of investment options, investment related services. There are two voluntary Deferred Compensation plans.

Save

Cancel

Adding Additional Benefits

The additional benefits section is where you can elect to enroll in Remotiv (formerly Financial Soundings.)

- Click **Enroll** on the Remotiv (formerly Financial Soundings) icon/tile.

Additional Benefits

Employee Assistance Program

Claremont

Manage

Remotiv (formerly Financial Soundings)

Waived

Enroll

Review and Sign

Save for Later

- Click **Select** to enroll then click on **Confirm & Continue**.

Retirement Readiness

Projected Total Cost (Monthly)
\$739.25

Plans Available

Select a plan or Waive to opt out of Retirement Readiness.

1 item

*Selection	Benefit Plan Details
☒ Select ☐ Waive	San Mateo County - Remotiv

Confirm and Continue **Cancel**

Additional Benefits Instructions

General Instructions

Retirement Readiness

This is a retirement readiness program which provides a personalized assessment of your estimated retirement benefits, taking into account your SamCERA pension and the County's Deferred Compensation Plan with Mass Mutual to help you determine how to best prepare for retirement by showing you:

- Where you are today
- Where you want to be in the future
- What steps to take to get you closer to your goals

Each report is personalized based on your individual situation. Reports are mailed out the second quarter of the new benefit plan year.

- Click **Save** to return to the main Open Enrollment Screen.

Retirement Readiness - San Mateo County - Remotiv

Projected Total Cost (Monthly)
\$739.25

Coverage

You will be enrolled in this plan.

Save **Cancel**

Additional Benefits Instructions

General Instructions

Retirement Readiness

This is a retirement readiness program which provides a personalized assessment of your estimated retirement benefits, taking into account your SamCERA pension and the County's Deferred Compensation Plan with Mass Mutual to help you determine how to best prepare for retirement by showing you:

- Where you are today
- Where you want to be in the future
- What steps to take to get you closer to your goals

Each report is personalized based on your individual situation. Reports are mailed out the second quarter of the new benefit plan year.

Open Enrollment Instructions



Completing Your Enrollment

Benefit changes will not be reflected unless they are reviewed and finalized.

1. Click on Review & Sign at the bottom of the election screen.

Open Enrollment - January

Projected Total Cost (Monthly)
\$739.25

Your Retirement Readiness changes have been updated, but not submitted
Next steps: Update another plan, or click Review and Sign once you're ready to submit your changes.

Health Care and Accounts

Plan	Cost (Monthly)	Coverage	Dependents
Medical Kaiser Permanente HDHP SMC	\$82.92	Employee	5
Dental Cigna PPO Management w/ \$4000 Orthodontia	\$104.64	Employee + Family	5
Vision Vision Service Plan Buy-Up	\$15.98	Employee + Family	5

Review and Sign **Save for Later**

2. Scroll down to the bottom of the review page to attach any supporting documentation and check the **I Agree** checkbox to complete your electronic signature. Supporting documentation may include marriage or birth certificates for newly added dependents.

Attachments

Drop files here

or

Select files

Electronic Signature

LEGAL NOTICE: Please Read

When you check the "I AGREE" checkbox, you acknowledge and agree to be legally bound to the following:

1. You have carefully read and reviewed the above listed benefit selections and each one is accurate.
2. You understand that your benefit elections are legal and binding transactions and that your benefit elections come at the price indicated when you made your selection. You further understand that you your pay and you authorize your employer to make such deductions. If for any reason your employer is unable to or inadvertently fails to make the correct deductions, you acknowledge you are still liable for your share of the cost of the premium.
3. You understand that if you are married, your dependent Spousal Coverage Elsewhere selection is legally binding.
4. You understand that all benefits are contingent upon your enrollment and acceptance by your HR representative and by your insurance carriers or benefit providers.

I Accept ☐

Submit **Save for Later** **Cancel**