

Department of Finance Benefits Management Office www.cityofchicagobenefits.org

877-299-5111

BENEFITS BULLETIN

February 2015

IMPORTANT BENEFIT REMINDERS FOR THE NEW YEAR

OPEN ENROLLMENT DOCUMENTS ARE DUE BY FEBRUARY 27TH

Did you add your spouse and / or eligible child dependent for benefit coverage during the open enrollment that ended November 18, 2014?

If you did not submit a certified marriage license for your spouse, certified birth certificate for your child, or other requested proof of dependency documentation, the enrollment process for that person is not complete.

The deadline to submit certified documents is Friday, February 27, 2015. If Benefits Management does not <u>receive</u> satisfactory proof of dependency before that date, there will be no benefit coverage for the person you tried to add to your plan.

You must bring documents to the Benefits Management Office by 4 pm on Friday, February 27, 2015 or mail them postmarked by February 27, 2015. The Benefits Management Office is located at 333 South State Street, Room 400, Chicago, IL 60604-3978.

If satisfactory proof of dependency is received by the deadline, benefit coverage is retroactive to January 1, 2015. PPO Plan members can submit or resubmit a claim form along with proof of payment to Blue Cross Blue Shield for eligible reimbursement if your spouse or child dependent(s) received medical services during January or February of this year.

FSA 2014 – USE IT OR LOSE IT

Healthcare FSA. If you participated in the City's healthcare FSA plan last year, you need to use all the money designated for 2014 in your account before March 15, 2015. You need to submit the claims by March 31, 2015. Any funds remaining in your account after March 31, 2015 will be forfeited.

Dependent Care FSA. If you participated in the City's Dependent Care FSA last year, you have until March 31, 2015 to submit your claims for reimbursement. Services must have been incurred between January 1, 2014 and December 31, 2014. Any funds remaining in your account after March 31, 2015 will be forfeited. As a reminder, sworn police officers below the rank of Sergeant represented by the Fraternal Order of Police are not eligible to participate in the Dependent Care FSA.

For a list of eligible healthcare expenses, visit the PayFlex website at HealthHub.com or call PayFlex 1-800-284-4885. Monday to Friday 7am – 7pm and Saturday 9am – 2pm.

NEW BABY? NEWLY MARRIED? DIVORCED? DEATH IN FAMILY?

You can make plan changes during the year for certain family status changes without waiting for the annual open enrollment period. You can make changes for these events:

- marriage or divorce (for a spouse or civil union partner), or domestic partner adds or drops
- birth or adoption of a child
- death of a spouse or covered dependent
- a covered dependent reaching the limiting age
- a change in employment status that causes a loss of other health coverage or significant increase in cost.

First Step. Call the Benefits Service Center at 1-877-299-5111 within **30 days** of the change in family status. Explain the situation and request the change in your coverage. When you speak to the Benefits Service Center, be sure to ask what documentation is needed for the next step below.

(Example: Mary gets married on February 15. On February 25, Mary calls the Benefits Service Center and requests that her new spouse be added to the health plan.)

Second Step. Within another 60 days*, submit the proper documentation to the Benefits Management Office / 333 S. State Street, Room 400, Chicago IL 60604-3978. In most cases the documentation will need to be a certified official document and must be an original (not a photocopy).

(Example: After Mary calls the Benefits Service Center on February 25, she must submit an original certified marriage certificate by April 16. Mary submits this document by March 31 and her spouse is added to the plan, retroactive to the February 15 date of marriage.)

*For the birth of a child, the deadline is 180 days from the date of birth.

<u>Failure to Meet Deadlines or Follow Procedures</u>. The Plan will not recognize changes in family status if plan guidelines are not followed. Your next opportunity to make desired changes will be during open enrollment in the fall of 2015.

• (Example: You get married but you don't notify the Benefits Service Center for six months. Since you didn't request coverage for your spouse within 30 days of your marriage and you failed to submit certified proof of dependency within 60 days of your marriage, you will have to wait until the next open enrollment period to add your new spouse.)

Here are some examples of events **NOT** considered qualified family status changes:

- You decide that you no longer want coverage for your dependent(s). If a qualifying family status change has not occurred, you will have to wait until the next open enrollment period to delete your dependent(s).
- You want to add your spouse or eligible domestic partner before you retire, but the marriage or partnership is not new. You will have to wait until the next open enrollment period to add your spouse or eligible domestic partner.