2026 Open Enrollment

All Staff Update





Today's webinar is led by your Benefits Team



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Zoom Webinar

- Submit your questions using the
 Q&A at the bottom of your screen
- Questions can be asked throughout the presentation



Q&A

Welcome to Q&A

Questions you ask the host and panelists will show up here

Type your question here...

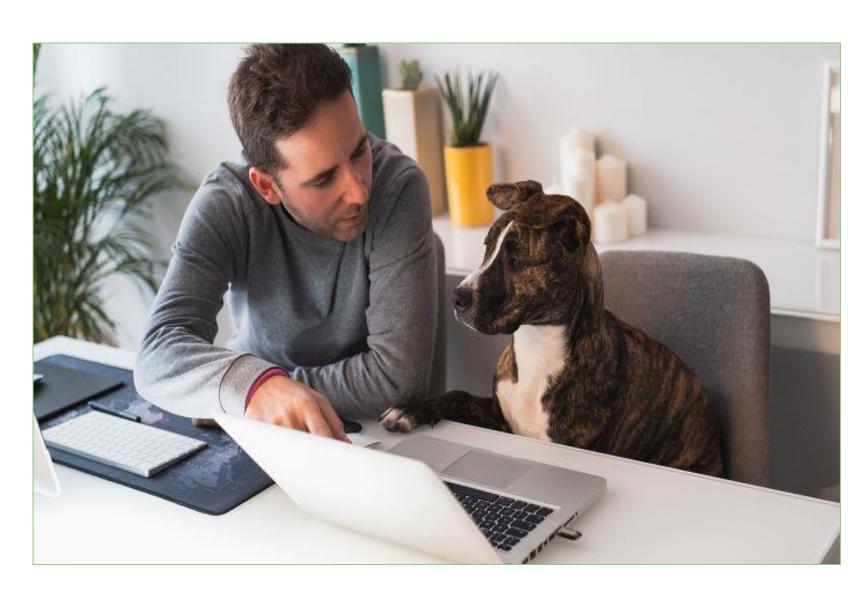
& Who can see your questions?

Agenda

- 1. Rates & Premiums
- 2. Medical & Pharmacy Benefits
- 3. 2026 Changes
- 4. Enrollment Reminders



Rates & Premiums



2026 Renewal Rates

Medical plans: 14%

Delta Dental: 5.9%

Aetna Dental: 2.4%

- VSP vision rates remain unchanged
- No medical plan design changes
- No rate changes to ancillary plans

2026 Cafeteria

- Most employee associations have cafeteria increases for 2026
- Employee + 1 and Employee + Family Cafeteria includes a 12% increase for all contracted employee associations*
- Cafeteria updates live on our webpage: slocounty.ca.gov/premiums

* SLOCEA and DSA employee associations are currently in MOU negotiations.

2026 Medical Premiums

	Employee Only		Employee + 1		Family	
Plan Name	Per Pay Period	Monthly	Per Pay Period	Monthly	Per Pay Period	Monthly
Blue Shield HDHP*	\$449.63	\$899.25	\$889.13	\$1,778.25	\$1,158.13	\$2,316.25
Blue Shield Tandem PPO	\$455.50	\$911.00	\$898.50	\$1,797.00	\$1,170.00	\$2,340.00
Blue Shield Choice PPO	\$517.50	\$1,035.00	\$1,023.50	\$2,047.00	\$1,334.00	\$2,668.00
Blue Shield Care PPO	\$558.50	\$1,117.00	\$1,108.50	\$2,217.00	\$1,445.50	\$2,891.00
Blue Shield EPO	\$633.50	\$1,267.00	\$1,260.50	\$2,521.00	\$1,647.50	\$3,295.00

^{*}HSA Admin fee of 2.25 included

slocounty.ca.gov/premiums

2026 Dental & Vision Premiums

	Employee Only		Employee +1		Family	
Plan Name	Per Pay Period	Monthly	Per Pay Period	Monthly	Per Pay Period	Monthly
Aetna Dental DMO	\$16.90	\$33.79	\$27.94	\$55.88	\$41.27	\$82.54
Delta Dental PPO	\$25.13	\$50.26	\$42.72	\$85.43	\$65.33	\$130.65
VSP Vision	\$4.77	\$9.54	\$7.27	\$14.54	\$11.76	\$23.52

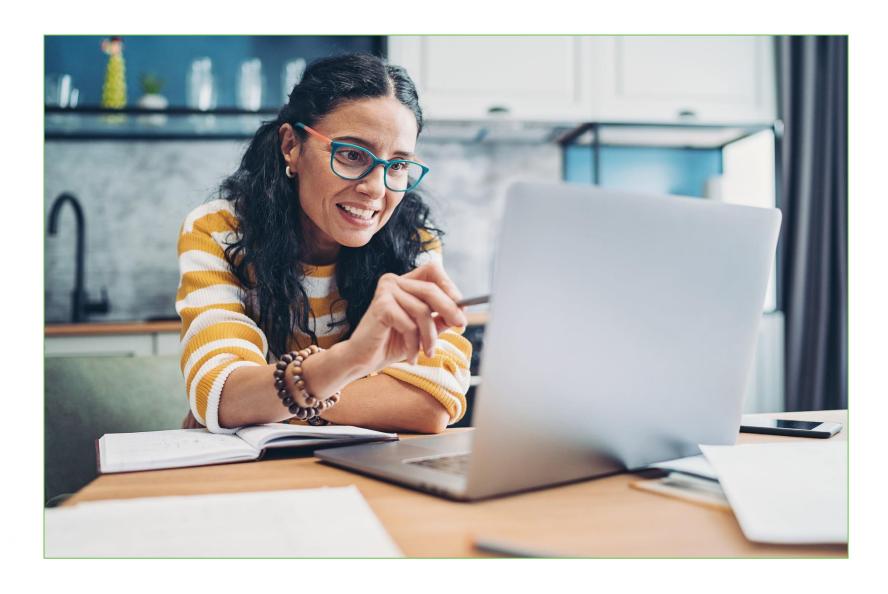
slocounty.ca.gov/premiums

Medical Plan Considerations

Plan Name	Annual Deductible (Individual/ Family)	Co- Pays	Co- Insurance	OOPM (Individual/ Family)	Premium Cost (Monthly)	Who enrolls in this plan?
Blue Shield HDHP	\$2,000 / \$6,000 (In and Out)	N/A	20%	\$6,350/ \$12,700	\$	 Healthy individuals getting annual in-network preventative care Lowest premium plan Funding HSA for future medical expenses
Blue Shield Tandem PPO	\$1250 / \$2500 (In and Out)	\$35	25%	\$3,000 / \$6,000	\$	Lowest PPO monthly premiumComfortable using a narrower provider network
Blue Shield Choice PPO	\$1000 / \$2000 (In and Out)	\$35	20%	\$3,000 / \$6,000	\$\$	Middle of the road PPOLarger provider network vs TandemLower premiums vs Care
Blue Shield Care PPO	\$500 / \$1000 (In and Out)	\$20	10%	\$2,000 / \$4,000	\$\$	Anticipate frequent medical needsLarge NetworkConsidering family planning
Blue Shield EPO	\$250 / \$750	\$25	N/A	\$1,500 / \$3,000	\$\$\$	 Predictable, low out-of-pockets costs (copays) for most services Comfortable with in-network providers as out-of-network not covered by this plan

What's Changing For 2026





Navitus Pharmacy Benefit Manager

- Navitus will be replacing Express Scripts for pharmacy starting 01/01/26
- All medical plans will utilize Navitus as their Pharmacy Benefit Manager, including HDHP members
- New pharmacy cards will be sent to members by December 2026
- Navitus provides access to Costco Mail Order program for medications
- Customer Support Phone line available after September 15 (844) 268-9789

Find out more on their website at Navitus.com

2026 New Benefit! Digbi Health

- Digbi Health is a new program for weight and chronic disease management
- Offers personalized support, including gut and gene testing, glucose monitoring and health coaching
- Includes a new weight management GLP-1 track for all members who qualify*
- Exclusive prescriber for weight loss GLP-1 for all health plans

*Employees must receive prior authorization with new criteria for GLP-1 weight loss medication.

Website: digbihealth.com/prism

2026 Tax Savings Accounts

	Flexible Spending Account (FSA)	Dependent Care FSA (DCFSA)	Health Savings Account (HSA)
2026 Maximums	\$3,300/ calendar year	\$7,500/ calendar year per household	\$4,400/individual \$8,750/family
Rollovers	\$660	No Rollover	All funds

HSA Employer Contribution*				
Employee Only	Employee + 1 or Family			
\$1k max per year / \$38.86 per pay period	\$2k max per year / \$76.92 per pay period			

* SLOCEA and DSA employee associations are currently in MOU negotiations.

Ending December 31, 2025

Blue Shield Teledoc Service

All member can still use Accolade Care for telehealth at \$0 copay

Livongo Diabetes program ending

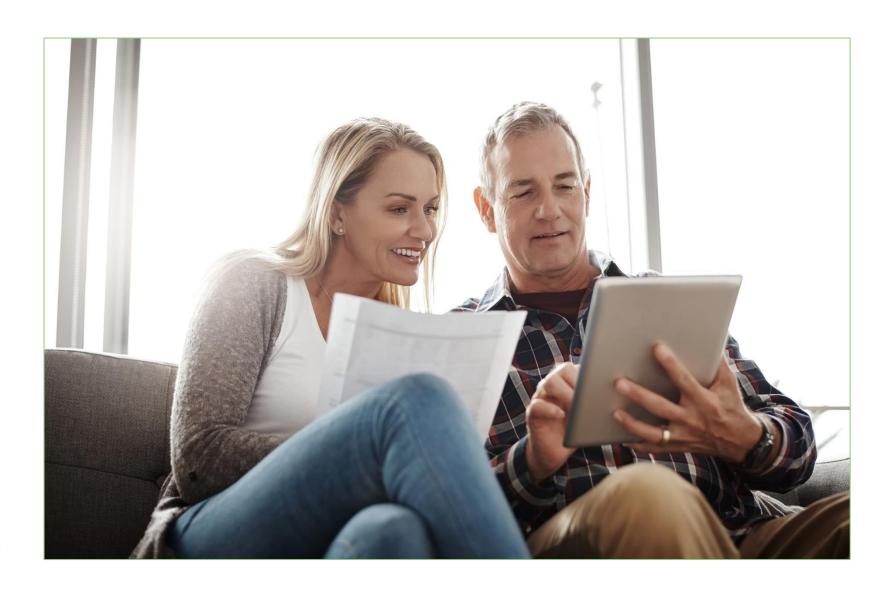
Digbi Health will offer Diabetes and pre-diabetes support

Express Script Pharmacy Benefit Manager ending

All members will have Navitus as their PBM

Enrollment Reminders





Enroll With SSO!

The Easiest Way to Access BenXcel: Use Single Sign on!





Mandatory Actions

Action is required to elect contribution amounts for:

- Opt out of Medical with Proof of Other Coverage
- Healthcare Flexible Spending Account (FSA)
- Dependent Care Flexible Spending Account (DCFSA)
- Health Savings Account (HSA)
- Limited Purpose Flexible Spending Account (LPFSA)

If you do not wish to change your health plan or fund a tax savings account, you do not need to take action in Benxcel

No DUAL Coverage for Medical, Voya Life Insurance, or Aflac plans

Medical Waiver Questionnaire

nstructions	
oof of other group medic	Insurance is required to waive County medical insurance. Document must be uploaded within 31 days of a life event, or before the end of the Open Enrollment period.
THE PROPERTY OF THE PROPERTY OF	elections, you must upload your proof of other coverage document. Acceptable proof of other coverage documents should include: the medical insurance carrier name, group or employer name, member name, plan effective date and covered dependent names if ptable documents include:
A copy of a valid med	cal insurance ID card (both front and back of card)
 Letter from your med 	cal insurance carrier stating you are a covered dependent
	se, domestic partner or parent's employer that states you are enrolled
 Open enrollment or o 	
TRICARE Proof of Co	erage.
waive County sponsorer	medical insurance please complete the following questions:
	other group medical insurance?:
Other Employ	er Sponsor Medical Plan (ex. On Spouse or Domestic Partner or Parents Employer Insurance)
	r Sponsor Medical Plan (ex. On Spouse or Domestic Partner or Parents Employer Insurance). Employer Sponsored Medical Plan (ex. Employee's Spouse or Domestic Partner is the Subscriber)
O County of SLC	
County of SLC	Employer Sponsored Medical Plan (ex. Employee's Spouse or Domestic Partner is the Subscriber)
County of SLC TRICARE Medicald (Me	Employer Sponsored Medical Plan (ex. Employee's Spouse or Domestic Partner is the Subscriber) Individual Plan (ex. Purchased through Covered California or Insurance Broker)

HDHP Questions

Health Savings Account (HSA) Eligibility Questions

If you enroll in the Blue Shield High Deductible Health Plan (HDHP) medical plan, you have the option to open a Health Savings Account (HSA) If you meet IRS requirements. A Health Savings Account (HSA) allows employees to pay for current health expenses and save for future qualified medical expenses on a pre-tax basis. To determine if you are eligible for the HSA, please answer the following:

1. Are you claimed as someone else's tax dependent other than a spouse?

2. Are you enrolled in any of the following:

- Any non-qualified HDHP health plan; you cannot have other health coverage except what is permitted by IRS (refer to IRS HSA qualifying requirements)
- . Medicare Parts A and B, C (Medicare Advantage) or D (prescription drug plan)

3. Are you eligible to receive benefits from any of the following:

- A general purpose Flexible Spending Account (FSA) or Health Savings Account (HSA), including your spouse's FSA or HSA. Note: This excludes your current County HSA or another HSA that is no longer funded, and will not be funded in this or next calendar year.
- Medicaid (Includes Medi-Cal/Cen-Cal)
- * TRICARE

4. Have you received or will you expect to receive benefits in October, November, or December of this year from any of the following:

- · Veterans Benefits
- · Indian Health Services Benefits

If you answered yes to any of the following questions, you are **not eligible** to participate in an HSA. If you are not eligible for an HSA and wish to change from the HDHP medical plan to another plan, you can return to the beginning of your Open Enrollment/Qualifying Event election screen to select a different medical plan.

Anyone who elects an HSA. G is later determined that they are not eligible, could have IRS tax ramifications. If you are not eligible for an HSA, you will not get the County HSA contribution.

If you answered No to all of the above, you are eligible for a Health Savings Account (HSA).

**Answer:

YES I have answered yes to one or more of the questions above:

NO none of the above applies to me

Uploading Documentation

For newly added dependent(s), dependent verification documentation is required:

- Spouse: Official Marriage Certificate
- Child: Official Birth Certificate (footprints/hospital live birth doc invalid)

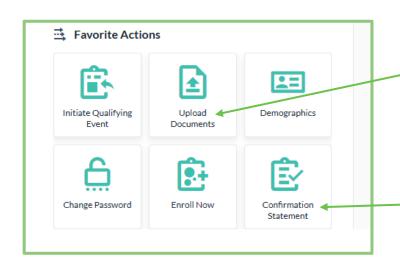
To waive medical, Proof of Other Group coverage is required:

- Medical ID card, front and back
- Letter from insurance carrier showing name and date of coverage

You or your Dept HR person (PYC) can:

- Upload documentation in BenXcel
- Confirm documentation is uploaded

BenXcel Dashboard



Upload Documents

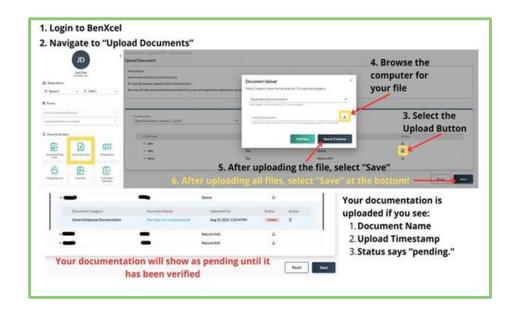
Clearly label documents

Confirmation Statement

 Shows Current and Future Enrollment

Documentation Uploads

- Upload your Dependent Documentation or Proof of other Coverage
- Know document status: Listed as 'pending' until approved by County Benefits Team





Employee Resources



Webinars

Tax Savings Account Webinar - September 18, 12:00 PM

 If you have questions about FSA, DCFSA, or HSA accounts, this webinar will be a great opportunity to learn more. Sign up here!

Digbi Health Webinars - September 25, October 7 & 22, November 6

 Learn more about Digbi for weight and chronic disease management by joining a webinar. Sign up here!

Navitus PBM Webinars – October 1, October 27

 Learn more about our new pharmacy benefit manager and how to prepare for this change in the new year. Sign up here!

Accolade Webinar - October 6, 12:00 PM

 Review the Accolade App and services available through Accolade. Sign up here!

Upcoming Events

Benefits Fair - September 23, 11:00 AM - 2:00 PM

- Join us to speak to vendors, learn about benefits, and enjoy free massages, coffee, and screenings.
- Location: Veteran's Memorial Building 801 Grand Ave, San Luis Obispo

Biometric Health Screenings and Flu Vaccinations at DSS & HA!

- Appts for finger stick biometric health screenings and flu vaccinations (without billing your insurance). The County Benefit Team will be at the SLO locations to answer your Open Enrollment questions.
- Sign up <u>here!</u> Registration Code: slocounty25

Department of Social Services September 30	Health Agency Cotober 1
↑ 1086 Grand Ave, Arroyo Grande Room 128 •• 10:00 AM – 12:00PM	♀ 2191 Johnson Ave, San Luis Obispo Aqua Room • 10:00 AM – 12:00PM
♀ 3433 S. Higuera St, San Luis Obispo Room 101 • 2:00 PM – 4:00PM	№ 805 4th Street, Paso RoblesOak Room② 2:00 PM – 4:00PM

Additional Support

1:1 Appointments – September 17, 22, & 29

 Need support completing Open Enrollment elections? teams. Sign up here!

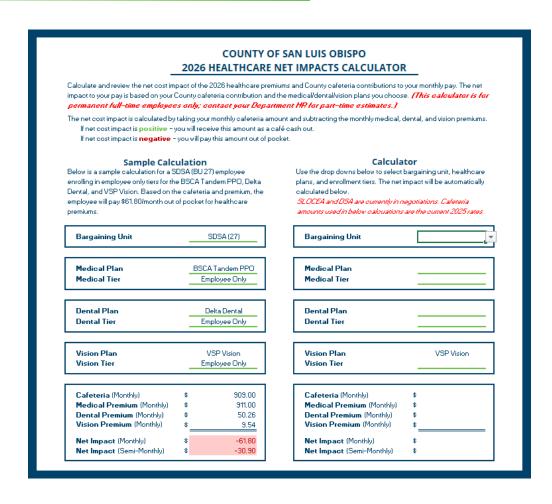
BenXcel Workshops – October 14 & 20, 9:00 AM – 12:00 PM; 1:00 PM – 4:00 PM

 Need support completing Open Enrollment elections? The benefits team will be available at the Kimball Computer Lab to help. Sign up here!

Visit **slocounty.ca.gov/oe**

Benefit Calculator

- Tool to determine out-ofpocket costs based on 2026 cafeteria contribution and medical, dental, and vision*
- Updated calculator at: slocounty.ca.gov/OE



*Excludes SLOCEA and DSA employee associations due to MOU negotiations

Open Enrollment Window: Oct. 3-22



Update Demographic Info

- o Cell Phone
- Mailing and email address

Add/Drop Dependents

- Only time outside of a qualifying life event
- Upload required documentation

Opt-out of County Medical

- Answer requires Opt-out Form
- Upload required documentation

Re-elect Tax Savings Account

- o FSA & DC FSA
- Employee HSA Contribution

Add/Drop Ancillary Coverage

- Life Insurance
- o Aflac Plans

Resources

- Benefits Webpage: **slocounty.ca.gov/benefits**
- 2026 Employee Benefits coming soon!
- Accolade Health Assistants
- Monthly Newsletters

Contacts

- Your Dept HR/Payroll Coordinator
- Email: <u>hrbenefits@co.slo.ca.us</u>





Questions?

