



2023

Benefits Summary



Full-Time



Part-Time
Civil Service
Employees

January 1 to
December 31, 2023

Important information to know about open enrollment

Open enrollment changes will be effective January 1, 2023

Benefit Changes: All benefit changes for 2023 will be completed online through BenefitBridge. Please see page 11 for detailed instructions on logging on to BenefitBridge: www.BenefitBridge.com/Santa-Ana. For questions or assistance, please contact BenefitBridge Customer Care at 800-814-1862; Monday—Friday, 8:00 am—5:00 pm, PST or email benefitbridge@keenan.com

BenefitBridge: Through our online portal, eligible employees have access to their benefits information 24/7 from any computer with Internet access. The system includes educational resources about benefits and allows side by side comparisons of benefit plans enabling employees to make informed decisions. BenefitBridge provides access to health and wellness library, in addition to direct links for all CalPERS insurance providers. For questions or assistance, please contact BenefitBridge Customer Care at 800-814-1862; Monday—Friday, 8:00 am—5:00 pm, PST or email benefitbridge@keenan.com www.benefitbridge.com/santa-ana

Flexible Spending Account (FSA) Enrollment: Flexible Spending Accounts enrollments for 2023 are available during the regular Open Enrollment period. Employees can enroll in any of the available plans through BenefitBridge. FSA plan information available on BenefitBridge.*Employees currently enrolled in any of the available accounts **MUST RE-ENROLL** to participate in 2023.

Waiver of Medical and/or Dental Insurance: Based on bargaining units, eligible employees may elect to waive their medical and/or dental to receive payment in lieu of City sponsored benefits. This applies if employees have other group insurance coverage. *Note: Proof of other group insurance coverage is required annually or requests will not be approved, and “proof of loss of insurability” may be required to re-enroll in a City-sponsored insurance plan.

Affordable Care Act (ACA): Dependent children are eligible for medical, dental, and vision coverage up to the age of 26. They are eligible even if they are married, do not live

with the employee, or are not students.

All Eligible employees should log on to BenefitBridge to verify their information even if they are NOT making any changes. **IF NO CHANGES ARE MADE** insurance plans will remain the same next year. However, employees must re-enroll in FSA in order to participate in 2023.

All employees should check their first January paycheck to verify the accuracy of insurance premium deductions.

The information listed in this booklet does not, in any way, supersede the information stipulated in each employee memorandum of understanding.

2023 City Contribution

Towards Health Insurance

**SAMA/CMM/CAM/
PMA/UCE/CASA/
SEIU/EM:**

Employee Only: \$804.00
Employee +1: \$1,457.00
Employee 2+: \$1,850.00

**PART-TIME CIVIL
SERVICE (PTCS):**

The City will contribute 75% or full premium amount to an individual employee's selection of CalPERS medical and/or dental, whichever amount is less of the City contribution allotted to full-time SEIU, CASA, and SAMA members for health and/or dental insurance premium costs for the employee and any dependents. PTCS employees are eligible for 75% of the cash in-lieu payment for waiving medical insurance; employees must submit proof of coverage.

City contributions subject to change based on MOU.

Benefitbridge registration instructions can be found on page 11. For help logging on or help with election enrollment and questions on plans and coverages, please contact the BenefitBridge support
HOTLINE AT (800) 814-1862 OR EMAIL BENEFITBRIDGE@KEENAN.COM
www.benefitbridge.com/santa-ana

**2023 CALPERS MEDICAL RATES - ALL UNITS EXCEPT POA
EFFECTIVE JANUARY 1, 2023**

California Region 2 Rates: Orange

Plan	Coverage	CalPERS Total Monthly Premiums	SAMA, CMM, CAM, PMA, CASA, UCE, SEIU, EM
Anthem Select (HMO)	Employee Only	\$765.37	\$0.00
	Employee + 1	\$1,530.74	\$73.74
	Employee +2 or more	\$1,989.96	\$139.96
Anthem Traditional (HMO)	Employee Only	\$935.12	\$131.12
	Employee + 1	\$1,870.24	\$413.24
	Employee +2 or more	\$2,431.31	\$581.31
Blue Shield Access+ (HMO)	Employee Only	\$842.61	\$38.61
	Employee + 1	\$1,685.22	\$228.22
	Employee +2 or more	\$2,190.79	\$340.79
Blue Shield Trio	Employee Only	\$760.71	\$0.00
	Employee + 1	\$1,521.42	\$64.42
	Employee +2 or more	\$1,977.85	\$127.85
Health Net Salud y Mas (HMO)	Employee Only	\$698.91	\$0.00
	Employee + 1	\$1,397.82	\$0.00
	Employee +2 or more	\$1,817.17	\$0.00
Health Net SmartCare (HMO)	Employee Only	\$834.65	\$30.65
	Employee + 1	\$1,669.30	\$212.30
	Employee +2 or more	\$2,170.09	\$320.09
Kaiser (HMO)	Employee Only	\$756.21	\$0.00
	Employee + 1	\$1,512.42	\$55.42
	Employee +2 or more	\$1,966.15	\$116.15
Sharp (HMO)	Employee Only	\$764.96	\$0.00
	Employee + 1	\$1,529.92	\$72.92
	Employee +2 or more	\$1,988.90	\$138.90
United Healthcare SignatureValue Alliance (HMO)	Employee Only	\$793.63	\$0.00
	Employee + 1	\$1,587.26	\$130.26
	Employee +2 or more	\$2,063.44	\$213.44
United Healthcare SignatureValue Harmony (HMO)	Employee Only	\$781.58	\$0.00
	Employee + 1	\$1,563.16	\$106.16
	Employee +2 or more	\$2,032.11	\$182.11
PERS Platinum (PPO)	Employee Only	\$1,014.80	\$210.80
	Employee + 1	\$2,029.60	\$572.60
	Employee +2 or more	\$2,638.48	\$788.48
PERS Gold (PPO)	Employee Only	\$695.93	\$0.00
	Employee + 1	\$1,391.86	\$0.00
	Employee +2 or more	\$1,809.42	\$0.00
PORAC (PPO) Safety Members Only	Employee Only	\$820.00	\$16.00
	Employee + 1	\$1,650.00	\$193.00
	Employee +2 or more	\$2,100.00	\$250.00

**2023 CALPERS MEDICAL RATES - ALL UNITS EXCEPT POA
EFFECTIVE JANUARY 1, 2023**

California Region 3 Rates: Los Angeles, Riverside, San Bernardino

Plan	Coverage	CalPERS Total Monthly Premiums	SAMA, CMM, CAM, PMA, CASA, UCE, SEIU, EM
Anthem Select (HMO)	Employee Only	\$737.91	\$0.00
	Employee + 1	\$1,475.82	\$18.82
	Employee +2 or more	\$1,918.57	\$68.57
Anthem Traditional (HMO)	Employee Only	\$942.73	\$138.73
	Employee + 1	\$1,885.46	\$428.46
	Employee +2 or more	\$2,451.10	\$601.10
Blue Shield Access+ (HMO)	Employee Only	\$738.29	\$0.00
	Employee + 1	\$1,476.58	\$19.58
	Employee +2 or more	\$1,919.55	\$69.55
Blue Shield Trio (HMO)	Employee Only	\$661.49	\$0.00
	Employee + 1	\$1,322.98	\$0.00
	Employee +2 or more	\$1,719.87	\$0.00
Health Net Salud y Mas (HMO)	Employee Only	\$606.34	\$0.00
	Employee + 1	\$1,212.68	\$0.00
	Employee +2 or more	\$1,576.48	\$0.00
Health Net SmartCare (HMO)	Employee Only	\$755.29	\$0.00
	Employee + 1	\$1,510.58	\$53.58
	Employee +2 or more	\$1,963.75	\$113.75
Kaiser (HMO)	Employee Only	\$754.64	\$0.00
	Employee + 1	\$1,509.28	\$52.28
	Employee +2 or more	\$1,962.06	\$112.06
United Healthcare Alliance (HMO)	Employee Only	\$790.46	\$0.00
	Employee + 1	\$1,580.92	\$123.92
	Employee +2 or more	\$2,055.20	\$205.20
United Healthcare Harmony (HMO)	Employee Only	\$713.55	\$0.00
	Employee + 1	\$1,427.10	\$0.00
	Employee +2 or more	\$1,855.23	\$5.23
PERS Platinum (PPO)	Employee Only	\$992.59	\$188.59
	Employee + 1	\$1,985.18	\$528.18
	Employee +2 or more	\$2,580.73	\$730.73
PERS Gold (PPO)	Employee Only	\$680.37	\$0.00
	Employee + 1	\$1,360.74	\$0.00
	Employee +2 or more	\$1,768.96	\$0.00
PORAC (PPO) Safety Members Only	Employee Only	\$820.00	\$16.00
	Employee + 1	\$1,600.00	\$143.00
	Employee +2 or more	\$2,100.00	\$250.00

Dental Rates
ALL UNITS EXCEPT POA
Effective January 1, 2023

City's Contribution towards Dental Insurance:
 CASA/UCE/SEIU: \$110 per month
 SAMA/EM/CMM/CAM/PMA: \$130 per month

Plan	Coverage	Total Monthly Premium	CASA/UCE/SEIU City Monthly Contribution**	Employee Contribution
MetLife (HMO)	Single	\$29.10	\$29.10	\$0.00
	Family	\$49.74	\$49.74	\$0.00
Delta (PPO)	Single	\$63.17	\$63.17	\$0.00
	Family	\$155.56	\$110.00	\$45.56

Plan	Coverage	Total Monthly Premium	SAMA/EM/CMM/CAM/PMA City Monthly Contribution**	Employee Contribution
MetLife (HMO)	Single	\$29.10	\$29.10	\$0.00
	Family	\$49.74	\$49.74	\$0.00
Delta (PPO)	Single	\$63.17	\$63.17	\$0.00
	Family	\$155.56	\$130.00	\$25.56

NOTE: Both dental plans provide orthodontia services.

**Part-Time Civil Service - The City will contribute 75% or depending on the individual employees' selection of dental insurance, the entire premium, whichever is less, of the City contribution allotted to full time SEIU and CASA members for dental insurance premium costs for the employee and any eligible dependents.

EyeMed Vision Rates
ALL UNITS
Effective January 1, 2023

Coverage	Total Monthly Premium	City Monthly Contribution	Employee Contribution
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Employee Only	\$8.29	\$0.00	\$8.29
Employee +1	\$15.75	\$0.00	\$15.75
Employee +2 or more	\$23.15	\$0.00	\$23.15

*Plan design provides an allowance for Eye Exam, Frames, and Lenses every 12 months.

**POA also offers their own vision insurances for their members

**The Hartford Life Insurance
Effective January 1, 2023**

Life Insurance:

The City provides all employees with Basic Life and Accidental Death & Personal Loss coverage. The amount of coverage available to employees is based on their bargaining unit. Changes to beneficiaries can be made through Benefit Bridge.

Voluntary Supplemental Life Insurance:

Employees not currently enrolled in Voluntary Supplemental Life Insurance may apply for Coverage. Employees enrolled have the opportunity to increase their existing coverage by completing an Evidence of Insurability form also referred to as a Statement of Health. All new enrollments and applications to increase coverage are subject to the approval of the insurance carrier.

**City of Santa Ana
Supplemental Life**

Payroll Deduction Worksheet
The Hartford—Supplemental Employee Life

**Cost Factor per Month per \$1,000 of Coverage
Current Age**

Under 30	\$0.055
30-34	\$0.083
35-39	\$0.110
40-44	\$0.166
45-49	\$0.294
50-54	\$0.552
55-59	\$0.672
60-64	\$1.095
65-69	\$1.978
70-74	\$1.978
75 and over	\$1.978

**Supplemental Accidental Death and
Dismemberment
Cost Factor per Month****

City of Santa Ana

**Supplemental Life and Accidental Death
and Dismemberment Coverages**

Payroll Deduction Worksheet

The Hartford—Supplemental Employee Life

**Cost Factor per Month per \$1,000 of Coverage
Current Age**

Employee Only	\$0.030
Employee and Dependents	\$0.030

Dependent Life

Coverage amount/ Payroll Deduction
Amount per Month

Voluntary Spouse cost factors per \$1,000
of Coverage based on current Age of Employee

Under 30	\$0.055
30-34	\$0.083
35-39	\$0.110
40-44	\$0.166
45-49	\$0.294
50-54	\$0.552
55-59	\$0.672
60-64	\$1.095
65-69	\$1.978
70-74	\$1.978
75 and over	\$1.978

Maximum coverage of \$50,000.

Child(ren): \$0.10 per \$1,000 unit

\$2,500	\$0.25
\$5,000	\$0.50
\$7,500	\$0.75
\$10,000	\$1.00

**Total payroll deduction is calculated on employee supplemental insurance amount.

*Part-Time SEIU Civil Service employees are eligible to enroll and are responsible for paying the total monthly premium.

*CASA and SAMA PTCS are responsible for 25% of premium.



**The Hartford Long Term Disability
ALL UNITS EXCEPT POA
Effective January 1, 2023**

Long Term Disability Insurance:
The City provides all employees with long term disability insurance to protect against loss of income due to a disability, illness or injury and are unable to work.

Plan	Total Monthly Premium	City Monthly Contribution*	Employee Contribution
A. AM, MM, CASA, CMM, CAM, UCE, EM, PMA, CASA PTCS			
	\$0.369	\$0.369	\$0.00
Per \$100 covered payroll 60 Day Elimination Period			
B. SEIU Basic Plan			
	\$0.369	\$0.369	\$0.00
Per \$100 covered payroll 60 Day Elimination Period			

*SEIU Part-Time Civil Service employees are eligible to enroll and are responsible for paying the total monthly premium see MOU.

**Flexible Spending
ALL UNITS
Effective January 1, 2023**

Plan	Maximum Allowance	Monthly Deduction
Medical Care FSA	\$3,050 / year	Annual Election ÷ 24 pay periods
Dependent Care FSA	\$5,000 / year	Annual Election ÷ 24 pay periods
Transportation FSA	\$300 / month	Annual Election ÷ 24 pay periods
Parking Fringe Benefit Account	\$300 / month	Annual Election ÷ 24 pay periods

NOTE: Employees should use their entire election by December 31, 2023 or risk forfeiting their elected amount.

**EMPLOYEE ASSISTANCE PROGRAM
All FT and PT Employees**

- *Relationships: Family, Marital, Child
- *Emotional: Depression, Anxiety, Stress
- *Addiction, Substance Abuse, Sex, Internet
- *Workplace: Co-worker, Stress
- *Legal: Family, Personal Injury, Criminal
- *Financial: Credit, Retirement, Budgeting
- *Career: Vocational Guidance
- *Elder Care: Retirement, Care Support
- *Parenting: Single, Step, Foster, Child Care
- *Pet Care: Adoption, loss



1-800-273-5273

**www.reachline.com
Member Password: reach**

**IDShield Rates
ALL UNITS
Effective January 1, 2023**

Plan	Coverage	Total Monthly Premium	City Monthly Contribution	Employee Contribution
3 Bureau Credit Monitoring	Employee Only	\$7.45	\$0.00	\$7.45
	Family	\$14.05	\$0.00	\$14.05

**United Pet Care
ALL UNITS
Effective January 1, 2023**

Coverage	Total Monthly Premium	City Monthly Contribution	Employee Contribution
1 Pet	\$12.50	\$0.00	\$12.50
2 Pets	\$24.20	\$0.00	\$24.20
3 Pets	\$35.60	\$0.00	\$35.60
Each additional Pet	\$11.30	\$0.00	\$11.30

*No exclusions for age, pre-existing conditions or breed-specific conditions

**FUNEX
EMPLOYEE DISCOUNTS TO THEME PARKS, MOVIES, THEATERS, HOTELS, AND MORE!
ALL FT AND PT EMPLOYEES**

STEP 1
Visit FunEx.com or
use QR code below

STEP 2
Click on "Sign Up" on the top
of the page and select
"Create an Account for Myself"

STEP 3
Enter full name & email and use
your employee access code (EAC)
seen below to complete registration

Employee Access Code (EAC)

12-28477



Scan the QR Code or use your
EAC code for discount tickets
at www.FunEx.com

City of Santa Ana Online Benefits Enrollment is easy with BenefitBridge!

Need Help?

For all questions related to your benefits, please contact your employer's benefits administrator. For BenefitBridge technical assistance **only**, please contact BenefitBridge Customer Care at 800.814.1862; Mon – Fri, 8:00 AM – 5:00 PM, PST or email benefitbridge@keenan.com.

Here's what you can do on BenefitBridge:

- View Current Plan Year Benefits
- Compare Plan Options
- Enroll in Benefits
- Resource Center: Health Insurance Basics, Medicare, Glossary, Media Resources
- Add or Remove Dependents/Beneficiaries
- Message Center
- Update My Account Info
- Available 24/7 via the Internet

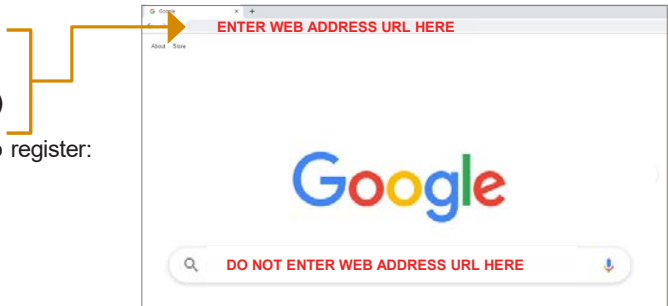
Registration and Login

Already have login credentials?

1. Login to **BenefitBridge** at www.benefitbridge.com/santa-ana
2. Forgot your Username or Password? Click on “**Forgot Username/Password?**”
3. Please add or update your email address to receive an email confirmation of your enrollment approval.

Need to create login credentials?

1. In the **address bar**, type www.benefitbridge.com/santa-ana (Not in the Bing, Google, Yahoo search engine field)
2. Click the **Enter** key, then follow the instructions below to register:
 - **STEP 1:** Select “**Register**” to **Create an Account**
 - **STEP 2:** Create a **Username** and **Password**
 - **STEP 3:** Select “**Continue**” to access **BenefitBridge**



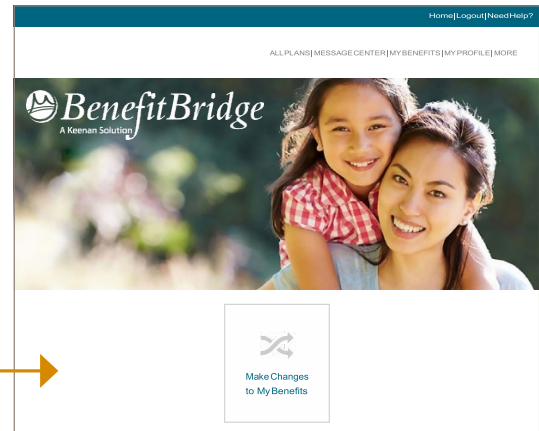
Enrolling in Benefits

Access your enrollment via the “**Make Changes to My Benefits**” button

For BenefitBridge technical assistance only, please contact BenefitBridge Customer Care at


800.814.1862

Monday - Friday, 8:00 AM - 5:00 PM, PST
or email benefitbridge@keenan.com.



Here's what you can do on the BenefitBridge App

- View Current Plan Year Benefits
- View Covered Dependents
- View Plan Details
- Upload and View ID Cards
- Maintain Provider Contacts

- Search for "BenefitBridge" in the Google Play store on your device and install "BenefitBridge" mobile app.
- This icon  will display on your mobile device.

App Installation

To download and install the mobile app follow one of the options listed below:

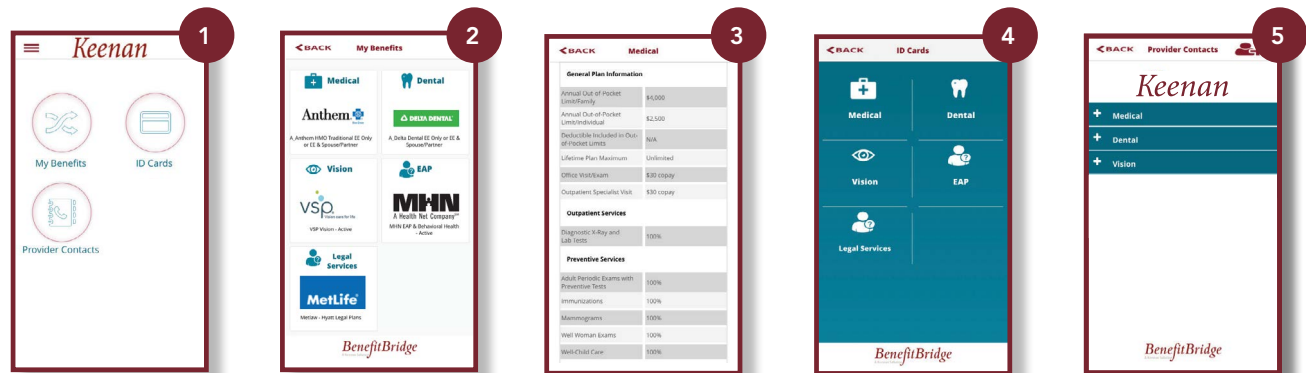
- Search for "BenefitBridge" in the Apple store on your device and install "BenefitBridge" mobile app.

Logging In

- Launch the BenefitBridge mobile app on your device.
- Enter your "Employer" code.
- You will be prompted for your Username and Password which you created at registration.
- You're ready to go!

Features

1. Home screen with My Benefits, ID Cards, and Provider Contacts.
2. A snapshot of all of your benefits, with access to the details on these valuable plans.
3. Quick review of your Dependents and Benefits Coverage.
4. ID card storage, so you always have your IDs with you.
5. Convenient access to your provider's contact information.



Need Help?

For BenefitBridge technical assistance only, contact BenefitBridge Customer Care at 800.814.1862; Mon-Fri, 8:00 AM-5:00 PM, PST or email benefitbridge@keenan.com.



For detailed information or further assistance please contact [BenefitBridge](#) at 800-814-1862 or email benefitbridge@keenan.com or visit our website at citydesk/hr/benefits/



Employee Benefits (714) 647-5299

HRBenefits@santa-ana.org