



# 2023 Benefits Open Enrollment Frequently Asked Questions

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## When is Open Enrollment?

November 1<sup>st</sup> through November 15<sup>th</sup>, 2022.

## How do I make changes during Open Enrollment?

To continue to maintain the security of personal employee information, [Employee Self Service \(ESS\)](#) must be accessed on either a computer connected to the City network, or via VPN using the RapidIdentity application. If you do not have VPN access to ESS, please submit a T-Ticket to the IT Department with your request or call them at (253) 591-2057.

If you need to make changes to your benefits during Open Enrollment, please log on to ESS through [TacomaHub](#) or [Unet](#), or by visiting [cityoftacoma.org/ESS](http://cityoftacoma.org/ESS) on a computer connected to the City of Tacoma network. If you have City of Tacoma VPN access, you can also log in to ESS outside a City work location. Step-by-step instructions are available [here](#).

Please contact the Benefits Office via email at [benefits@cityoftacoma.org](mailto:benefits@cityoftacoma.org) or by phone at (253) 573-2345 for additional guidance, if necessary. All changes will be effective as of **January 1, 2023**.

## Important Dates to Remember:

- Tuesday, November 1: Open Enrollment Begins
- Thursday, November 3rd: Virtual Vendor Q&A Sessions, 9:00 am – 10:00 am, and 2:00 pm – 3:00 pm (to ask specific questions to vendors)
- Tuesday, November 15: Open Enrollment Ends at 11:59 pm

## Where can I learn about changes to the 2023 benefits plans?

All active employees were mailed a Benefits Open Enrollment newsletter to their address on file. An electronic version of the newsletter is available [here](#). Please note, some Rail employees have a separate newsletter. Kari Louie, Assistant Human Resources Director, and Shannon Carmody, Wellness Coordinator, also made a recording of the 2023 changes and other important information regarding Benefits and Wellness, which is available on the [Open Enrollment website](#).

## What if I don't have a computer?

**You must use a computer within the City of Tacoma Network to access ESS or have VPN access.** If you do not have a computer, please contact the Benefits office and we will find the best way to assist you.

## Which benefits require re-election?

Flexible Spending Account (FSA) plans are the only benefit plans that require re-election each year if you want to participate. You may elect to enroll-in and make voluntary pre-tax contributions to a Health Care FSA to reimburse yourself for out-of-pocket eligible health care expenses for you and your family and to a Dependent Care FSA to reimburse yourself for out-of-pocket eligible daycare and eldercare expenses. You must enroll each year via [ESS](#) if you would like to participate. After Open Enrollment, you cannot change or revoke a flexible spending election during the plan year, unless a qualifying life event occurs (e.g., birth of a child, divorce, marriage, loss of coverage). The event must be consistent with the change being requested.

## Are there any special temporary Health Care FSA provisions for 2023?

In December 2020, the Consolidated Appropriations Act, 2021 (CAA) COVID-relief bill was signed into law. This legislation includes several temporary special rules for Health and Dependent Care Flexible Spending Accounts (FSAs) to allow for flexibility with mid-year elections and alleviate the impact of the use-it or-lose-it provisions. The legislation expires December 31, 2022. See the [Open Enrollment Newsletter](#) for more details.

## I want to switch to a High Deductible Health (HDHP) Plan with Health Savings Account (HSA) for 2023. What should I know?

While HDHPs are great for some employees and their families, they are not for everyone, and you may not be eligible for the HSA. If you are considering this plan, we encourage you to visit the [Benefits website](#) to review the resources there, including the [HDHP FAQ](#).

In addition, if you are currently enrolled in the City's Healthcare FSA, you MUST have spent down and been reimbursed for your eligible expenses prior to December 31, 2022. If you have ANY funds left in your FSA account on December 31, 2022, and sign up for the HDHP, you will not be eligible to make or receive any contributions to your 2023 HSA until April 2023.

## How can I learn more about the benefit plans available?

Visit the Benefits webpage at [www.cityoftacoma.org/benefits](http://www.cityoftacoma.org/benefits).

## Which dependents are currently covered on my plans?

You can review which dependents are covered on each plan by logging into ESS and reviewing your current elections. Make sure to review each benefit plan option since you may be covering different dependents on each plan.

**PLEASE NOTE: if you switch plan options during Open Enrollment, your dependents need to be "re-checked" to add them to your new plan selection.**

## How do I add a dependent during Open Enrollment?

- You can make your changes online through ESS at [cityoftacoma.org/ESS](http://cityoftacoma.org/ESS) using your City of Tacoma login information. Follow the instructions listed in the above question "How do I make changes during Open Enrollment?" on how to access ESS.
- Add your dependent under the **Dependents and Beneficiaries** section.
- Edit the appropriate benefit plans and be sure to check the box next to each dependent you want to add to each of your medical, dental, and vision plans.
- Make sure to **Review** and **SAVE** your elections at the end of the process.
- We recommend printing a benefits summary for your records.

If you added a new dependent(s) to your plan(s), you'll need to submit a [Dependent Eligibility Verification Form](#) to the Benefits Office via email or interoffice mail along with appropriate supporting documentation once you add your dependent (e.g., legal marriage certificate for spouse, legal birth certificate for child, etc.). This verification must be submitted by November 15, 2022. If documentation is not received, coverage elections for unverified dependents will not be effective January 1, 2023, and you will need to wait until the next open enrollment period to add your dependent. Please contact the Benefits Office via email at [benefits@cityoftacoma.org](mailto:benefits@cityoftacoma.org) or phone at (253) 573-2345 for guidance if necessary.

## Who is considered an eligible dependent?

The following dependents are eligible for coverage on your benefit plans. When you request to enroll a new dependent on your plan(s), you will be required to provide a dependent eligibility verification form and supporting documentation. Please refer to the back side of the [Dependent Eligibility Verification Form](#) for guidance on the required supporting documentation.

- **Spouse:** Your current legal spouse.
- **Domestic Partner:** Your grandfathered domestic partner who met the requirements of the City of Tacoma Affidavit of Domestic Partnership and was registered and on file with the City of Tacoma as of December 31, 2016; OR, after January 1, 2017, is registered with the State of Washington under chapter 26.60.030 RCW.
- **Child under age 26:** Your children up to age 26 may include: a natural child, adopted child, or a child legally placed with you for adoption, including a child for whom you have assumed a total or partial legal obligation for support in anticipation of adoption, a stepchild or domestic partner's child, or a child for whom you have legal guardianship or court-ordered custody.

- **Child age 26 and over:** Your, your spouse's, or your domestic partner's otherwise eligible child who is age 26 or over and incapable of self-support because of physical, mental, or developmental disability that prevents the child from establishing or maintaining consistent employment or independence that began before their 26th birthday, if you complete and submit the affidavit of dependent eligibility form, with written evidence of the child's incapacity, within 30 days of the later of the child's 26th birthday or your effective date and either:
  - They are a dependent immediately before their 26th birthday; or
  - Their 26th birthday preceded your effective date and he or she has been continuously covered as your dependent on group, individual, or other insurance plan (including public programs) coverage since that birthday.
  - Newly hired employees wishing to enroll an eligible dependent must also be able to demonstrate that the dependent child has been covered on a group, individual, or other insurance plan (including public programs) immediately prior to enrollment on this plan.

Information regarding registering a domestic partnership with the State of Washington can be found at <https://www.sos.wa.gov/>. Notification of State-registered domestic partnership dissolutions and/or terminations must be provided to the City of Tacoma within 30 calendar days of the dissolution/termination.

The City will continue to recognize City-registered domestic partnerships on file with the City Benefits Office as of December 31, 2016, until either the employee's separation from employment, or the termination of the existing domestic partnership, whichever occurs first. Upon termination of the domestic partnership, the City employee must complete and submit a notarized Affidavit of Termination of Domestic Partnership and the Dependent Eligibility Verification Form to the Benefits Office within 30 calendar days of the termination.

Please contact the Benefits Office at 253-573-2345 for further information.

### **Who is not considered an eligible dependent?**

- A former spouse or domestic partner is not eligible
- A child of a former spouse or domestic partner whom you did not adopt or do not have legal documentation of custody, is not eligible
- Grandchildren or other family members are not eligible without a court order granting guardianship
- Parents or family members you are caretakers for are not eligible even if they are a tax dependent
- Any children over the age of 26, who do not qualify as disabled.

**Note:** You are required to contact the Benefits Office immediately to report any dependents on your plans that no longer meet the above definitions.

### **What is a Qualifying Event?**

A qualifying life event allows for a special enrollment period when dependents can be added and removed from your benefit elections. Any change in election must be on account of, and consistent with, the qualifying life event. Examples of qualifying life events include:

- Marriage or establishment of a domestic partner relationship
- Birth, adoption, or placement for adoption of a child
- Change in spouse's/domestic partner's employment or benefit plans
- Loss of other coverage
- Divorce or termination of domestic partner relationship
- Death of a dependent
- Child loses or gains eligibility
- Change in status of employment

## What is the deadline to make Qualifying Event changes?

The deadline to make a qualifying life event change varies by the type of event as well as the date the change can go into effect. Failure to make a qualifying life event change in a timely manner will result in having to wait until the next annual Open Enrollment period to make the changes (which will be effective at the start of the following calendar year). This can lead to very serious consequences, such as a new baby or spouse being left without health coverage for possibly several months.

**You must make benefit election changes within 30 days of the event.** Dependents added are covered as of the first day of the calendar month following the qualifying life event and dependents dropped from coverage will remain covered through the last day of the calendar month in which the qualifying life event took place.

**In the case of births, adoptions, or court-ordered legal guardianships,** election changes must be made within **60 days** of the event and are effective on the date of birth, or placement for adoption, and on the first day of the month following legal guardianship.

**In cases of divorce or dissolution of a domestic partnership,** you must remove your spouse/domestic partner and stepchildren, within 30 days of the date of divorce or dissolution, as they will no longer meet the City's dependent eligibility requirements.

## What else should I think about when I have a Qualifying Event?

Other changes you may want to consider making, depending on the type of qualifying life event involved include:

- Enrolling in other benefit programs
- Changing your beneficiaries for your various benefit programs
- Increasing or decreasing your health or dependent care Flexible Spending Account (FSA) election(s)
- Changing your emergency contact information via Employee Self Service (ESS)
- Changing your Health Savings Accounts (HSA) election via ESS
- Completing a new W-4 (contact your timekeeper or update via ESS)

**NOTE: IF YOU EXPERIENCE A QUALIFYING LIFE EVENT DURING THE OPEN ENROLLMENT PERIOD (MARRIAGE, BIRTH OF A CHILD, ETC.), CONTACT THE BENEFITS OFFICE IMMEDIATELY FOR ASSISTANCE. THESE CHANGES WILL NEED TO BE MADE FOR THE CURRENT YEAR AND FOR NEXT CALENDAR YEAR. IF YOU ONLY MAKE THE CHANGE IN ESS DURING OPEN ENROLLMENT, YOUR DEPENDENT COULD HAVE A GAP IN COVERAGE.**

## I want to add a dependent during Open Enrollment, but I can't find the required supporting documents for dependent eligibility. What can I do?

An official certificate of every birth, death, marriage, and divorce should be on file in the locality (state, city, or county) where the event occurred. You may also visit the Centers for Disease Control and Prevention's vital records page at <http://www.cdc.gov/nchs/w2w.htm> to request specific documents by state and obtain information on the approximate costs and time of delivery.

## What information must be included on birth and/or marriage certificates in order for them to be considered acceptable supporting documents?

Birth certificates must include the child's name and must list the name of the employee, employee's spouse, or the employee's domestic partner as a parent of the child. While some states issue a birth record or "short form" document for identity purposes, each state also offers the full certificate which includes the child's parents' names. The birth record or "short form" will not be accepted because this document does not list the child's parents' names.

All marriage certificates must be presently valid and include the date of marriage. Additionally, legal marriage certificates must show that the marriage has been recorded by the appropriate county or state agency.

## Can I make changes after I submit my initial benefit plan changes through ESS?

If you need to make a correction to any elections you made during Open Enrollment, you will be able to go back into ESS and make benefit plan changes through November 15, 2022, at 11:59 p.m.

### What if I don't want to make changes?

Technically, you do not have to take any action during Open Enrollment if you are not making changes to your medical, dental, or vision plans, or the dependents that you are currently covering on your plans. We strongly encourage you to log into ESS and review your plan options, covered dependents, and the tools and resources that are available to you and your covered family members.

**REMEMBER, you must re-enroll in health care and/or dependent care flexible spending plans every plan year via ESS if you want to participate for the coming year.**

It's also a good time to review and update your personal information including addresses, emergency contacts, and designated life insurance beneficiaries.

### My spouse and I (or my parent and I) both work for the City. Can we dual cover each other?

No, effective **January 1, 2017**, no employee or eligible dependent may be insured under more than one City medical, dental, or vision insurance plan. Employees who have dependents that are also employed by the City of Tacoma will need to follow the chart below:

SPOUSES / DOMESTIC PARTNERS WHO ARE CITY EMPLOYEES	ADULT CHILDREN UP TO AGE 26 WHO ARE CITY EMPLOYEES
<b>Elect the Same Medical/Dental/Vision Plans</b>	<b>Elect Your Own Coverage</b>
One employee must elect family medical, dental, or vision coverage paying the family premium (if applicable) and cover the other City employee as a dependent on that benefit plan. The other employee must elect to waive that medical, dental or vision benefit plan.	You may elect your own medical, dental, or vision coverage, and pay the appropriate employee only or family premium contribution (if applicable). Your parent(s) may not enroll you as a dependent on their City medical, dental, or vision plan.
<b>Elect Different Medical/Dental/Vision Plans</b>	<b>Enroll as a Dependent on Your Parent's Plan</b>
Each employee will elect a different medical, dental or vision plan and pay the appropriate premium (if applicable) depending on whether they enroll dependent children on the plan. You may not provide coverage to your City employee spouse/domestic partner on your medical, dental, or vision plan. NOTE: Eligible dependent children may also <u>only</u> be covered on one City medical, dental, or vision plan.	If you want to be enrolled as a dependent on your parent's City medical, dental, or vision plan, you must elect to waive City medical, dental, or vision coverage and your parent must enroll you as a dependent under their City medical, dental, or vision plan.

*Note: If an employee has a spouse/domestic partner or adult child under the age of 26 working for the City, and each participates in the Wellness program, each employee will receive the Wellness Credit. The credit is applied to the primary employee providing the medical coverage.*

### Can I Opt-Out of the City plans if I have other coverage?

Effective January 1, 2017, City of Tacoma full-time employees will be allowed to opt-out or "waive" City provided medical, dental, and/or vision insurance. In order to opt-out of the City benefit/s, **an employee must provide proof of enrollment in alternative coverage to the City's Benefits Office.** Additionally, if an employee loses their alternative coverage, they must notify and submit valid paperwork to the City of Tacoma Benefits Office within 30 days of that loss of other coverage so that they can enroll on the City benefit plan/s.

If you wish to waive your coverage on a City benefit plan for 2023, you can do so in Employee Self Service (ESS) during Open Enrollment. If you choose to make such an election during Open Enrollment, you must provide written proof of alternative coverage along with the Benefits Waiver Form to the Benefits Office no later than November 15, 2022, in order for this change in coverage to be made. If you have questions about the type of proof needed, please contact the Benefits Office.

## What if I miss the Benefits Open Enrollment deadline of November 15, 2022?

If you miss the Open Enrollment deadline to submit changes to your medical, dental, vision or Flexible Spending plans, you will need to wait until next year's Benefits Open Enrollment period to make these changes, unless you experience a qualifying life event.

## Who do I contact if I have questions regarding Open Enrollment or my benefit plans?

Please contact Benefits via email at [benefits@cityoftacoma.org](mailto:benefits@cityoftacoma.org) or phone at (253) 573-2345 with additional questions.

## Who do I contact if I have problems logging into ESS or to get VPN access?

Please contact the IT Service Desk at (253) 591-2057 Monday – Friday, 7:30 a.m. – 5:30 p.m. for assistance with log-in, password, and VPN issues.

## OTHER BENEFIT QUESTIONS

### Deferred Compensation

#### How do I make a deferral election change during Open Enrollment?

Effective November 1, 2022, employees must work directly with our deferred compensation plan vendors to enroll in the plan and make changes to their contribution elections. This change eliminates the need for paper forms\*, is quick, convenient, and secure. Access options include the vendors' website, mobile app, or by calling the vendor customer service line. Staff from the Benefits Office will process enrollment information and changes from the vendor websites to coordinate payroll contributions for the plan.

\*Note: Special activities like pre-retirement catch-up enrollment/calculations, employee separation and retirements, and leaves of absence issues will still be coordinated directly with the Benefits Office.

For complete details on how to enroll or make changes to your contribution elections with MissionSquare or Nationwide, please refer to the City of Tacoma benefits website at [cityoftacoma.org/benefits](http://cityoftacoma.org/benefits) under [Plan Information](#) and [Deferred Compensation](#). If you have questions about these changes, please contact the Benefits Office at [benefits@cityoftacoma.org](mailto:benefits@cityoftacoma.org) or (253) 573-2345 or contact your representative at MissionSquare or Nationwide:

<b>Mission Square:</b>	Keith Penewit	<a href="mailto:kpenewit@missionsq.org">kpenewit@missionsq.org</a>	(202) 759-7015 Cell – (202) 430-3932
<b>Nationwide:</b>	Mike Ferguson	<a href="mailto:m.ferguson@nationwide.com">m.ferguson@nationwide.com</a>	(509) 385-7825 (Fire Local 31 only)

#### What are the 2023 contribution limits?

For all employees:

- Regular Deferral: \$22,500
- Age 50+ Catch-Up: \$30,000
- Pre-Retirement Catch-Up: \$45,000

### Health Savings and Flexible Savings Accounts

#### What are the eligibility requirements for the HSA?

The Internal Revenue Service has established rules for health savings accounts (HSAs) that restrict who can establish an account and make contributions:

- You must be enrolled in a qualified high-deductible health plan (HDHP)
- You cannot be covered by another health insurance plan (such as a spouse's plan), unless it is a qualified HDHP
- You cannot be covered by any other health insurance through Medicare, TRICARE, or Indian Health Services
- You cannot be claimed as a dependent on someone else's tax return. You can be listed as a spouse filing jointly.
- You cannot be enrolled in a general-purpose flexible spending account (FSA) or have coverage through a spouse's FSA\*
- You cannot be enrolled in a health reimbursement arrangement (HRA) or have coverage through a spouse's HRA\*

*\*Individuals can be enrolled in or covered through a spouse's limited purpose FSA or HRA. The City of Tacoma currently offers a general-purpose FSA. Employees who sign up for one of the HDHPs will not be able to sign up for the Health Care FSA benefit. However, you can still participate in the Dependent Care FSA.*

### **I signed up for the Regence HDHP with HSA, where and how do I make contributions to that account?**

Because the City will provide contributions to an HSA for any employee who enrolls in a HDHP, and that amount will vary based on whether the employee earned the 2023 Wellness Incentive, the HSA benefit will not be listed in ESS during Open Enrollment since you are not currently participating in the HDHP. After Open Enrollment is completed, if you elected an HDHP, the Benefits Office will update your account with the proper City contribution to the HSA. The City contributions will not show in ESS, but it will show on your 2023 pay advices. Any time after January 1, 2023, you can go into ESS and make your HSA contribution through the Allowable Midyear Benefits Changes option.

### **I have a Health Care FSA now and want to switch to a HDHP with HSA for the 2023 plan year. What do I need to do?**

If you are currently signed up for the Health Care FSA through the City and want to sign up for the Regence High-Deductible Health Plan (HDHP) with an HSA for 2023, you will need to spend down your FSA funds to zero and submit your claims to Trusteed Plans and be processed prior to December 31, 2022. This is due to the design of the City's Health FSA plan, which has a grace period and allows an employee to incur health claims in the new plan year (January 1st – March 15<sup>th</sup>) which can be applied toward the prior year's FSA funds. This would mean that although you are signed up for an HDHP, you would not be able to accumulate City contributions or employee voluntary HSA contributions until April of 2023.

### **What is the difference between a Health Care FSA and a Dependent Care FSA?**

A Health Care FSA is used to reimburse qualifying out of pocket healthcare expenses, such as medical care, dental and vision expenses, and prescriptions costs. There is a **\$3,050** annual individual maximum for the 2023 plan year, and funds can be used for IRS qualified dependent health care expenses. It can NOT be used with a Health Savings Account. Funds deducted for this plan must be used by the end of the grace period or they will be forfeited to the City of Tacoma to offset plan operating expenses. **Debit cards will be automatically sent to all new participants enrolled in the Health Care FSA.**

A Dependent Care FSA is used to reimburse qualifying expenses related to care for your child, disabled spouse, elderly parent, or other dependent who is physically or mentally incapable of self-care, so you can work, or if you're married, for your spouse to work, look for work, or attend school full time. There is a **\$5,000\*** annual household limit and must be taken in lieu of the dependent care tax credit. Funds deducted for this plan must be used by the end of the calendar year or they will be forfeited to the City of Tacoma to offset plan operating expenses. You cannot use the FSA debit card for the Dependent Care FSA, only the Health Care FSA.

### **What is the Difference between an HSA and a Health Care FSA?**

Even though a health savings account (HSA) and a Health Care FSA serve a similar purpose, to help pay for qualified health care expenses with tax-free dollars, an HSA is restricted to individuals enrolled in a high-deductible health plan (HDHP). HSAs allow for a much higher annual contribution limit, which varies for employee only or family coverage and allows for catch-up contributions for individuals age 55 - 65. Additionally, HSAs are individual savings accounts which roll over from year-to-year, are portable, and earn tax-free interest and investment income to pay for current and future medical expenses. An FSA is subject to the "use-it-or-lose-it rule" and funds are forfeited if not used by the plan's deadline. With a Health Care FSA, once the coverage starts, the full annual elected amount is available for access immediately, even if the funds have not been contributed to your account. The opposite is true of an HSA, which will only allow you to use the money that has been deposited into your account.

## **Basic Life Insurance**

### **What is the Life Insurance benefit offered by the City?**

The City currently pays 100% of the premium to provide basic life insurance and accidental death and dismemberment

insurance to employees. The benefit is equal to your annual base salary rounded up to the next highest thousand. In cases of an accidental death, the benefit would be doubled. Please make sure you list a life insurance beneficiary for this coverage through Employee Self Service (ESS).

*\*Note: This benefit is not available to temporary employees, full-time members of the Armed Services, or employees of the Tacoma Public Library. Employees of the Tacoma Public Library should refer to the Human Resources Department at the Library for details on their life insurance plan benefits.*

### **How do I change my Life Insurance beneficiary?**

You must go through ESS to update or change your life insurance beneficiary. There is a how-to document available on the Benefits website that walks through each step of this process available [here](#).

### **Can I select more than one beneficiary?**

Yes, you must designate the percentage that will be provided to each beneficiary. If you leave the percentage at zero, this is considered as no beneficiary designated, and any disbursement upon your death will go to your estate.

### **What is a contingent beneficiary?**

This is a secondary beneficiary in the event the primary beneficiary passes away before a life insurance claim is paid out.

### **How often should I update my beneficiary?**

You may change your beneficiary as often as needed. You may wish to update your beneficiary if you have a marriage, divorce, or death of a beneficiary.

### **Are there other beneficiaries I need to change?**

Many of the plans offered through the City have their own beneficiary designation. For details on making beneficiary changes to other plans, for example, retirement and deferred compensation, please see the [Beneficiary Change Guide](#) located on the [Benefits website](#).

## **Additional Life Insurance – Voluntary**

### **How do I apply for voluntary additional life insurance?**

New hires may elect to pay for additional life insurance in increments of \$10,000 up to \$300,000 with a guarantee-issue of \$50,000 in additional life insurance. If you would like to apply for a coverage amount greater than \$50,000, you are required to complete a medical history statement and submit it to the Benefits Office. The history statement will be forwarded to the insurance carrier for review. You may be asked to complete a health physical.

If you would like to select additional life insurance after you have been employed for more than 30 days, you will need to complete a medical history statement and submit it to the Benefits Office regardless of the amount of coverage desired. The history statement will be forwarded on to the insurance carrier for review. You **may be** asked to complete a health physical.

*\*Note: This benefit is not available to temporary employees, full-time members of the Armed Services, or employees of the Tacoma Public Library. Employees of the Tacoma Public Library should contact the Human Resources Department at the Library for details on their life insurance plan benefits.*

### **Can I select different beneficiaries for my basic and additional life insurance plans?**

No, your beneficiary for additional life insurance is the same as your basic life insurance.



## **Spousal Life Insurance – Voluntary**

### **How do I apply for voluntary additional life insurance for my spouse/domestic partner?**

Coverage is half the employee's annual earnings, rounded to the next lower \$1,000, to a maximum of \$100,000, not to exceed 50% of the employee's life insurance (basic and additional combined). There is a guarantee-issue of \$25,000. If you would like to apply for a coverage amount greater than \$25,000, your spouse will be required to complete a medical history statement and submit it to the Benefits Office. The history statement will be forwarded on to the insurance carrier for review. Your spouse/domestic partner may be asked to complete a health physical.

After 30 days of employment, all employees who would like to elect spousal life insurance, no matter the benefit amount, will need to complete a medical history statement and submit it to the Benefits Office. The history statement will be forwarded on to the insurance carrier for review. Your spouse/domestic partner may be asked to complete a health physical. However, in the event of marriage, you will have 30 days from the date of marriage to elect this benefit up to the guaranteed limit of \$25,000. Amounts of coverage over \$25,000 require a health statement be completed.

*\*Note: This benefit is not available to temporary employees, full-time members of the Armed Services, or employees of the Tacoma Public Library. Employees of the Tacoma Public Library should contact the Human Resources Department at the Library for details on their life insurance plan benefits.*

## **Dependent Life Insurance – Voluntary**

### **How do I apply for the dependent life insurance benefit?**

Newly hired employees may elect to pay for dependent life insurance, which provides a flat life insurance benefit for your spouse/domestic partner of \$5,000 and \$2,000 for each dependent child, in the event of their death.

After 30 days of employment, employees who would like to elect to pay for dependent life insurance will need to complete a medical history statement for those dependents. The history statement will be forwarded on to the insurance carrier for review. However, with a qualifying life event such as a marriage or a birth/adoption of a child, you will have 30 days from the life event to elect this benefit.

*\*Note: This benefit is not available to temporary employees, full-time members of the Armed Services, or employees of the Tacoma Public Library. Employees of the Tacoma Public Library should contact the Human Resources Department at the Library for details on their life insurance plan benefits.*

## **Basic Long-Term Disability (LTD) Insurance**

### **What is the LTD benefit offered by the City?**

The City pays 100% of the premium to provide employees with basic LTD, which provides a monthly benefit equal to 60% of your pre-disability earnings, reduced by deductible income. The maximum benefit is up to \$900 per month and benefits are paid after 180 days of disability.

*\*Note: This benefit is not available to temporary employees, full-time members of the Armed Services, or employees of the Tacoma Public Library. Employees of the Tacoma Public Library should contact the Human Resources Department at the Library for details on their life insurance plan benefits.*

## **Additional Long-Term Disability Insurance (LTD) – Voluntary**

### **How do I apply for the additional LTD insurance?**

Newly hired employees can apply for the additional LTD benefit guarantee issue. This voluntary, self-paid insurance plan provides 60% income replacement of the first \$6,833 in monthly pre-disability earnings in excess of \$1,500, reduced by deductible income. You have the options to select a 90 or 180-day elimination period. The maximum LTD benefit across

both the basic LTD and the additional LTD benefits combined is 60% of \$8,333 in monthly pre-disability earnings, up to \$5,000, reduced by deductible income.

After 30 days of employment, employees who would like to elect the additional LTD benefit will need to complete a medical history statement. The history statement will be forwarded on to the insurance carrier for review. You may be asked to complete a health physical.

*\*Note: This benefit is not available to temporary employees, full-time members of the Armed Services, or employees of the Tacoma Public Library. Employees of the Tacoma Public Library should contact the Human Resources Department at the Library for details on their life insurance plan benefits.*

## **Short Term Disability Insurance (STD) – Voluntary**

### **How do I apply for the STD insurance?**

Newly hired employees can apply for the voluntary STD benefit guarantee issue. This voluntary, self-paid insurance provides \$212 per week for illness or injury not job-related. The payments will begin on the first day of disability for an injury, with a 26-week limitation, and the eighth day of a disability for an illness or pregnancy, with a 13-week limitation. (In cases involving pregnancy, this is six weeks after delivery). After 30 days of hire, all employees who would like to apply for STD will be required to complete a medical history statement and submit it to the Benefits Office. The application will be forwarded on to the insurance carrier for review. You may be asked to complete a health physical.

*NOTE: Short- and Long-Term Disability benefits are not available to Temporary Employees, emergency personnel employees, or Full-time members of the Armed Services. Long Term Disability benefits are not available to employees of the Tacoma Public Library. Public Safety employees (other than a Fire Chief or Police Chief) are provided long-term disability benefits through their union affiliation. Library Employees are provided a different long-term disability insurance benefit and should refer to the Human Resources Department at the Tacoma Public Library for details on this plan offering.*

## **Personal Time Off (PTO) Conversion**

### **What are my options for converting my leave accruals?**

Non-represented City employees currently accruing vacation and sick leave, and employees represented by a union agreement that includes a PTO conversion option, are invited to make a choice between keeping their current Vacation and Sick Leave plans or converting to the City's PTO plan.

Employees electing to convert to Personal Time Off during this open enrollment period will accrue Personal Time Off hours with the pay period beginning December 5, 2022.

To review more detailed information on converting to the PTO plan, such as how the conversion works, what the benefit levels are, and how to make a conversion election during Open Enrollment, please visit the [Benefits webpage](#) and go to the [Open Enrollment](#) section.

Questions can also be directed to the Human Resources Department:

- Kathy Emerson at [kemerson@cityoftacoma.org](mailto:kemerson@cityoftacoma.org) or (253) 591-5407
- Athena Meisenheimer at [ameisenheim@cityoftacoma.org](mailto:ameisenheim@cityoftacoma.org) or (253) 573-2482

## **Employee Assistance Program (EAP)**

### **What is the EAP benefit?**

First Choice Health Employee Assistance Program (EAP) provides free, convenient, and confidential counseling and referral services with a licensed behavioral health provider to you, your spouse or domestic partner, and children up to age 26. The EAP can help with a variety of family, relationship, emotional, behavioral, mental health, or chemical dependency concerns.

A confidential referral service is available for employees seeking assistance. Contact First Choice Health (toll free inside Washington) at 1-800-777-4114. Visit First Choice on the internet at <https://www.FirstChoiceEAP.com>.

**Username:** cityoftacoma

*The City provides this benefit automatically to all employees and no enrollment is required.*

*Note: Library employees are provided a different EAP benefit. Refer to the Human Resources Department at the Tacoma Public Library for details on this plan offering.*