

HUMAN RESOURCES MEMORANDUM 16-009		DATE ISSUED: 3/25/16
SUBJECT:	2016 Group Legal Services Insurance Plan Open Enrollment	REFERENCE: PML 2016-004
TO:	All DGS Employees	SUPERCEDES: <i>HR Memo 15-006</i>

PLEASE ENSURE THIS INFORMATION IS SHARED WITH YOUR EMPLOYEES

Purpose The purpose of this HR Memo is to inform employees of the annual open enrollment for the State's Group Legal Services Insurance Plan (PLAN).

Open Enrollment Period Open enrollment for the Plan is **March 2 through April 30, 2016**.
During this enrollment period, eligible employees may enroll in the Plan and current enrollees can change their coverage plan from single to family or family to single, and add/delete eligible dependents. Employees already enrolled are not required to re-enroll to maintain coverage.

No Changes for 2016 The monthly premium rates will remain the same.

- Individual Coverage - \$10.19
- Family/Registered Domestic Partner Coverage - \$17.74

Eligibility Criteria Employees eligible to enroll in the Plan during this open enrollment period include:

- Permanent or probationary employees with a time base of half-time or more, who are designated rank and file, managerial, supervisory, confidential, or excluded/exempt;
- Permanent-intermittent employees who worked a minimum of 480 paid hours during the last control period from July 1 through December 31; and,
- Employees in a limited-term assignment who have return rights to a permanent position that meets the eligibility criteria. A newly hired employee appointed to a limited-term assignment who does not have return rights to a permanent position must have an appointment of six months or more, and a time base of half-time or more to be eligible to enroll.

**Eligibility
Criteria
(continued)**

Employees off work or on a leave of absence cannot enroll until they return to active status. However, if an employee is on military leave and is not available during the specified enrollment period, their spouse/domestic partner (with power of attorney) may enroll during the open enrollment period on their behalf.

**Dependent
Eligibility**

Eligible dependents are defined as:

- A lawful spouse or registered domestic partner;
- Any dependent child, who has never been married under the age of 26;
 - a) Children include natural, stepchildren, adopted children, or children for whom the employee is the legal guardian, and children of the domestic partner; and
 - b) Any economically dependent child 26 years of age or older, if he/she is incapable of self-support because of a physical disability or mental incapacity who has never been married and is chiefly dependent on the eligible employee for support and maintenance.

Family members not eligible include the eligible employee's parents and grandparents, children under the age of 26 who are married, or who have been married, and children over the age of 26, unless disabled as specified above. Employees should be reminded that they are responsible for notifying their department's personnel office and completing the necessary paperwork when a dependent child loses eligibility.

**Employee
Communi-
cations**

Eligible employees not enrolled in the Plan will receive an enrollment packet with a Plan letter, a detailed flyer, enrollment instructions, and an enrollment authorization form.

**Effective
Dates of
Coverage**

The employee's effective date of coverage will begin on the first day of the pay period following the first premium (payroll) deduction.

SCO receives Plan enrollment by:	Employee's Plan coverage will begin effective:
March 10, 2016	April 1, 2016
March 11 – April 10, 2016	May 1, 2016
April 11 – April 30, 2016*	June 1, 2016

*Enrollment forms signed, dated, and received by Office of Human Resources (OHR) by April 30, 2016, will be processed by SCO through May 10 with an effective date of June 1, 2016.

If the enrollment form was submitted timely by the employee but was not processed accurately or was rejected by SCO, you may submit an appeal to CalHR.

**Completion
of the
Enrollment
Form**

Enrollees are required to complete Sections A and B of the Plan enrollment authorization form. Employees can complete the form online, print it, sign it, and submit it to OHR. This form **must** have an original signature or SCO will not process it.

A fill and print enrollment authorization form is available on ARAG's website at www.araglegalcenter.com (use Access Code 10202soc) or visit CalHR's website at www.calhr.ca.gov.

Questions

If you have questions about the plan or service, visit ARAG's dedicated website www.araglegalcenter.com (Access Code 10202soc) or call the toll-free customer service line at 1-866-762-0972 or TTY 1-800-383-4184, or 711 to reach a relay operator.

For general questions about form completion and effective dates, please contact your assigned Personnel Specialist.

LISA YORK, Personnel Officer
Office of Human Resources

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