

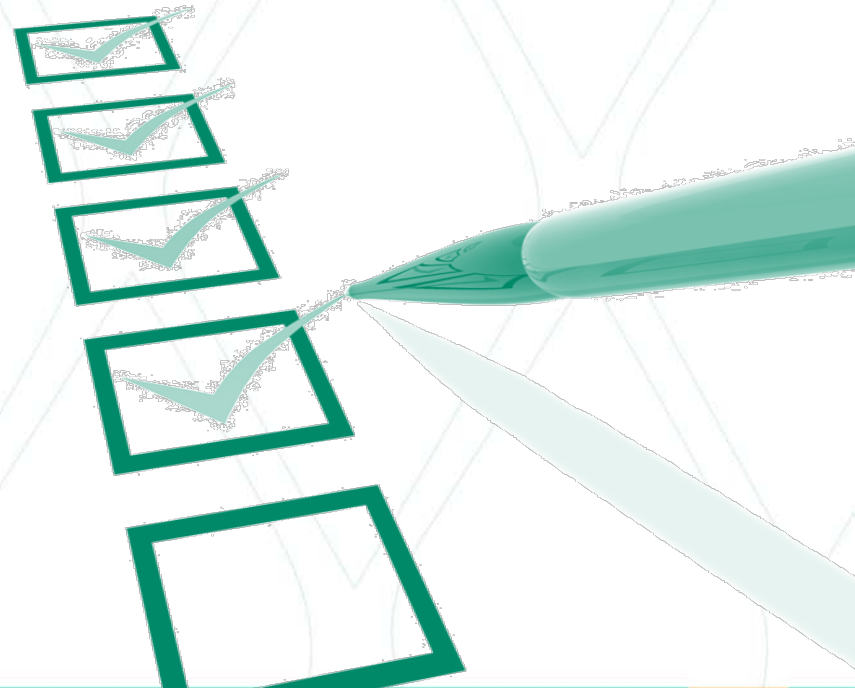


# 2022 Benefits Open Enrollment

Active Employees  
Benefits Effective January 1, 2022

# Agenda

- ❑ **Open Enrollment Overview**
- ❑ **How Do I Enroll?**
- ❑ **What Do I Need to Enroll?**
- ❑ **Benefits Overview**
  - Medical and Pharmacy
  - Pre-Tax Savings Accounts
  - Dental
  - Vision
  - Value-Added Benefits
  - Disability
  - Life and AD&D
  - Other Voluntary Benefits
- ❑ **What Do I Need to Do for 2022 Enrollment?**
- ❑ **Enrollment Reminder**
- ❑ **Questions?**



# Open Enrollment Overview

Open Enrollment for Active employees is September 13-24, 2021.

## Passive Enrollment

This year's Open Enrollment is passive: Most of your City of Dallas benefit elections will carry over for 2022 if no action is taken during this time.

- If you want to change your current elections, add or drop dependents, participate in a Flexible Spending Account or Dependent Care Account, or contribute to a Health Savings Account in 2022, you **MUST complete** the enrollment process by September 24.

# Open Enrollment Overview

## Complete the New Payroll Beneficiary Form

- This form allows you to designate the beneficiary who would receive your final check and personal belongings in the unfortunate event of your passing during employment with the City of Dallas.
- You **MUST complete** the new Payroll Beneficiary Designation Form during Open Enrollment by logging into <https://standard.benselect.com/cityofdallas>.
- If you are unable to complete this form online, please call the Enrollment Center at (214) 556-0971 for assistance.

# Open Enrollment Overview

**This is the only time during the year you can make changes to your coverage unless you experience a qualifying life event.**

- Example: Marriage, divorce, etc.
- Any changes to your benefit elections must be made within 31 days of the qualifying event.



# How Do I Enroll or Make Changes?

Online: <https://standard.benselect.com/cityofdallas>

Must enter exact address  
to access site.

**Log in with your user name: first name.last name and your 4-digit birth year.**

- For example: John Smith born in 1966 would be *john.smith1966*

**Your PIN is 6 digits, composed of the last 4 digits of your Social Security Number and the last two digits of your birth year.**

- For example: If the last 4 digits of your SSN are 1234 and you were born in 1966, your PIN would be 123466
- You will be asked to change your PIN after you log in for the first time. Be sure to make note of your new password for future use.

# How Do I Enroll or Make Changes?

Online (continued): <https://standard.benselect.com/cityofdallas>

**If you have logged in previously, you will use the credentials you created.**

- Having trouble accessing the system? Contact the Enrollment Center at (214) 556-0971.

**By phone with a Benefit Specialist**

**Call (214) 556-0971 Monday-Friday, 8:15 a.m. – 5:15 p.m.**

- Benefit Specialists will be available starting September 13<sup>th</sup>.

# What Do I Need to Enroll or Make Changes?

## Supporting documentation required

If you add an eligible dependent who is not currently enrolled, you must provide supporting documentation (marriage license, birth certificate, etc.)

- Upload it from your computer during the online enrollment process (follow the on-screen instructions)
- Send it from your Smartphone with the My Selerix app
- Email it to [yourenrollment@ebcoh.com](mailto:yourenrollment@ebcoh.com)
- Fax it to (513) 371-5559

## Questions about or assistance with enrollment?

Call (214) 556-0971 Monday-Friday, 8:15 a.m. – 5:15 p.m.

- Benefit Specialists will be available starting September 13th





# Medical and Pharmacy Coverage

**Blue Cross Blue Shield of Texas  
(BCBSTX)**



# Medical Coverage

**There are no changes to current plan designs or coverage costs for 2022!**

**While several of our medical plans require cost increases, the City of Dallas has decided to absorb those increases on your behalf. This last year has been challenging for everyone, and the City wants to do what we can to help make your life a little easier.**

# Blue Essentials PCP Plan

Network	Blue Essentials (In-Network Only)
<b>Annual Deductible</b>	
Individual	\$1,500
Family	\$3,000
<b>Annual Out-of-Pocket Max</b>	
Individual	\$6,350
Family	\$12,700
<b>Preventive Care</b>	\$0
<b>Primary Care Physician</b>	\$25 copay
<b>Specialist</b>	\$50 copay
<b>X-Ray and Lab Work*</b>	\$25 copay / \$50 copay
<b>Urgent Care</b>	\$40 copay
<b>Emergency Room</b>	\$300 copay plus 20% after deductible
<b>Inpatient Hospital Care</b>	20% after deductible
<b>Outpatient Surgery</b>	20% after deductible

## PCP Plan Highlights

- Copays for multiple services.
- PCP must be selected to access benefits.
- Must be a Texas resident in a Blue Essentials network area.

\*For these services to be covered under your office visit copay, the lab or X-ray must be performed in and billed by your physician's office.

# Blue Choice Copay Plan

Network	Blue Choice (In-Network Only)
<b>Annual Deductible</b>	
Individual	\$1,500
Family	\$3,000
<b>Annual Out-of-Pocket Max</b>	
Individual	\$6,350
Family	\$12,700
<b>Preventive Care</b>	\$0
<b>Primary Care Physician</b>	\$25 copay
<b>Specialist</b>	\$50 copay
<b>X-Ray and Lab Work*</b>	\$25 copay / \$50 copay
<b>Urgent Care</b>	\$40 copay
<b>Emergency Room</b>	\$300 copay plus 20% after deductible
<b>Inpatient Hospital Care</b>	20% after deductible
<b>Outpatient Surgery</b>	20% after deductible

## Copay Plan Highlights

- Copays for multiple services.
- Enhanced network option.

\*For these services to be covered under your office visit copay, the lab or X-ray must be performed in and billed by your physician's office.

# Blue Choice HSA Plan

Network	Blue Choice (In-Network Only)
<b>Annual Deductible</b>	
Individual	\$3,000
Family	\$6,000
<b>Annual Out-of-Pocket Max</b>	
Individual	\$6,350
Family	\$12,700
<b>Preventive Care</b>	\$0
<b>Primary Care Physician</b>	20% after deductible
<b>Specialist</b>	20% after deductible
<b>X-Ray and Lab Work</b>	20% after deductible
<b>Urgent Care</b>	20% after deductible
<b>Emergency Room</b>	20% after deductible
<b>Inpatient Hospital Care</b>	20% after deductible
<b>Outpatient Surgery</b>	20% after deductible

## HSA Plan Highlights

- You can open a Health Savings Account (HSA).
- Contribution from the City of Dallas:
  - Up to \$700 for individual coverage
  - Up to \$1,700 for family coverage
- You pay all costs for care until your deductible is met.



# Network Options

**Blue Choice Copay and HSA plans include the enhanced benefit tier option.**

- Regular BCBS in-network facility: Plan pays **80%** of your facility charges (after deductible).
- Enhanced benefit facility: Plan pays **90%** of your facility charges at Baylor or Methodist Health Systems (after deductible).

Network	Blue Choice	Blue Essentials
<b>Network Description</b>	Blue Choice provides a <b>broad network</b> of providers and covers 80% of your eligible expenses after you have met the deductible. <b>Out-of-network services are not covered.</b>	Blue Essentials is a targeted, <b>narrow network</b> , with an emphasis on the most high-quality and cost-effective physicians. <b>Out-of-network services are not covered.</b>
<b>Medical Plan</b>	Copay & HSA Plan	PCP Plan

## Is your Doctor in the BCBS Network?

1. Go to [www.bcbstx.com](http://www.bcbstx.com) and click on the blue *Find a Doctor* box.
2. Click on the *Search as Guest* box.
3. Click on *Search In-Network Providers* and answer the on-screen questions.

# Medical Coverage – Active Employee Contributions

Medical Plan BI-MONTHLY* EMPLOYEE CONTRIBUTIONS	Full-Time Employee			Regular Part-Time Employee
	UNDER \$44,000 ANNUAL PAY	\$44,000 – \$66,000 ANNUAL PAY	\$66,001+ ANNUAL PAY	
<b>Blue Essentials PCP Plan</b>				
Employee Only	\$15.00	\$20.00	\$25.00	\$57.00
Employee + Spouse	\$209.00	\$221.50	\$234.00	\$240.00
Employee + Child(ren)	\$65.50	\$75.50	\$85.50	\$156.00
Employee + Family	\$229.00	\$244.00	\$259.00	\$269.00
<b>Blue Choice Premium Copay Plan</b>				
Employee Only	\$32.50	\$37.50	\$42.50	\$123.50
Employee + Spouse	\$244.00	\$256.50	\$269.00	\$268.40
Employee + Child(ren)	\$100.50	\$110.50	\$120.50	\$240.00
Employee + Family	\$274.00	\$289.00	\$304.00	\$325.00
<b>Blue Choise HSA Plan</b>				
Employee Only		\$15.00		\$57.00
Employee + Spouse		\$209.00		\$240.00
Employee + Child(ren)		\$65.50		\$156.00
Employee + Family		\$229.00		\$269.00

\* Per paycheck (24 out of 26)

Pending Council approval

# Pharmacy Coverage

There are no changes to the pharmacy plan design.

30 Day Retail	Blue Essentials PCP Plan	Blue Choice Copay Plan	Blue Choice HSA Plan
Generic Medications	\$15 copay	\$15 copay	You pay 20% after medical deductible is met
Preferred Brand-Name Medications	\$40 copay	\$40 copay	You pay 20% after medical deductible is met
Non-Preferred Brand-Name Medications (Includes Specialty Drug Formulary)	\$75 copay	\$75 copay	You pay 20% after medical deductible is met

## Additional Pharmacy Discounts

- Free diabetes and hypertension medications for certain drug classes.
  - Available to **Blue Essentials PCP** and **Blue Choice Copay** plan members.
- Preventive Therapy Drug List (PTDL) also available for Blue Choice HSA plan members.



# Pre-Tax Savings Accounts

**Health Savings Account (HSA)**

**Flexible Spending Accounts (FSA)**



# Health Savings Account (HSA) – Blue Choice HSA Plan Only

Coverage Level	Annual IRS Contribution Maximum	City Annual Contribution	Employee Contribution Maximum
Employee Only	\$3,650	\$700	\$2,950
Employee + Dependent(s)	\$7,300	\$1,700	\$5,600
Catch-Up (age 55+)	\$1,000	--	\$1,000

- The Health Savings Account (HSA) maximum annual contribution amounts will increase to \$3,650 for individual coverage and \$7,300 for family coverage.
- If you would like to contribute to the HSA in 2022, you **MUST** actively enroll during Open Enrollment. Otherwise, your current HSA elections will end on December 31, 2021.

Funds are fully vested. Penalties apply if used for non-qualified expenses.



# Health Savings Account (HSA) – Blue Choice HSA Plan Only

## To be eligible for an HSA:

- You must participate in an IRS-qualifying high deductible health plan (HDHP).
- You cannot be entitled to benefits under Medicare or “double covered” under any other medical plan.
- You or your spouse cannot be enrolled in a Medical Spending FSA.
- You cannot be claimed as a dependent on another person’s tax return.

## Notes:

- While you cannot participate in the City Medical Spending FSA, you *can* participate in the Limited Purpose FSA, which covers dental and vision expenses only.
- If you are currently enrolled in the Medical Spending FSA, all funds must be completely exhausted by December 31st to be eligible for a 2022 HSA.

# Flexible Spending Accounts – HSA Bank

## 2022 Limited Purpose FSA

- Set aside pre-tax dollars for eligible dental and vision expenses only
- Contribute up to \$2,750 per year
- Members with an HSA are eligible for a Limited Purpose FSA

### Eligible Expenses

- Dental expenses not covered by insurance (deductible, coinsurance)
- Vision expenses not covered by insurance (copays, contacts, eyeglasses)

### Notes

- Funds will not rollover year to year
- Must use 2022 funds by 03/15/23 grace period end date

## 2022 Medical FSA

- Pre-tax dollars for eligible medical expenses
- Contribute up to \$2,750 per year
- Those with an HSA are not eligible

### Eligible expenses

- Prescriptions
- Deductibles, co-payments, coinsurance
- Over-the-counter items with a doctor's prescription

### Notes

- Funds will not rollover year to year
- Must use 2022 funds by 03/15/23\* grace period end date

\*Unless you are switching to the Blue Choice HSA plan, in which case you must use all funds by 12/31/22.

To participate in 2022, you **MUST** actively enroll during Open Enrollment. Otherwise, your current FSA elections will end on December 31, 2021.

# Flexible Spending Accounts – HSA Bank

## 2022 Dependent Care FSA

- Pre-tax dollars to pay for daycare and elder care expenses.
- Contribute up to \$5,000 per year (or \$2,500 if married filing separate returns).
- Pay for certain expenses to care for dependents that live with you.
- Covers childcare for children under age 13.
- Can also be used for adult daycare for senior citizen dependents that live with you, such as parents.
- Excludes summer camps or long-term care for parents that live elsewhere, such as in a nursing home.
- Funds will not roll over year to year – must use 2022 funds by 12/31/22.
- If you have an HSA, you **are** also eligible for a Dependent Care FSA.
- Must submit online or claim form for reimbursements.

To participate in 2022, you **MUST** actively enroll during Open Enrollment.  
Otherwise, your current HSA elections will end on December 31, 2021.



# Dental Coverage

**Delta Dental**



# Dental Coverage

**There are no changes to current plan designs or coverage costs for 2022!**

<b>Dental Plan</b>		
BI-MONTHLY EMPLOYEE CONTRIBUTIONS		
	<b>Dental PPO</b>	<b>Dental HMO</b>
<b>Employee Only</b>	\$22.27	\$6.17
<b>Employee + Spouse</b>	\$40.97	\$11.35
<b>Employee + Child(ren)</b>	\$41.50	\$11.41
<b>Employee + Family</b>	\$57.89	\$16.05

Pending Council approval



# Dental Coverage

In-Network Benefits	Dental PPO (DPPO)	Dental HMO (DHMO)
Network	Plus Premier	DHMO Managed Care
<b>Calendar Year Maximum</b> (Does not apply to Diagnostic & Preventive Services)	\$1,750	Unlimited
<b>Deductible</b> (Applies to Basic and Major Services Only)	\$50 per person; \$150 per family	None
<b>Preventive Services</b> (Cleanings, Exams, Flouride, X-Rays)	100%	\$5 exam copay
<b>Basic Services</b> (Filling, Extractions, Anesthesia, Non-Surgical Periodontics)	80% after deductible	Per copay schedule
<b>Major Services</b> (Crowns, Dentures, Bridges, Endodontics, Surgical Periodontics)	50% after deductible	Per copay schedule
<b>Orthodontia (Adult &amp; Child)</b>	50%	Per copay schedule
<b>Orthodontia Maximum (Adult &amp; Child)</b>	\$1,750	\$1,750

## DPPO Plan Highlights

- If you use an out-of-network dentist, you are responsible for 100% of the amount the dentist charges that exceeds Delta Dental's network-negotiated fee.

## DHMO Plan Highlights

- You MUST select a primary dental office to begin using your benefits.

## Locate a Provider

- <https://www1.deltadentalins.com/individuals/find-a-dentist.html>



# Vision Coverage

**Davis Vision**



# Vision Coverage

Coverage costs will increase slightly for 2022. However, current plan designs will remain unchanged.

Vision Plan		
BI-WEEKLY EMPLOYEE CONTRIBUTIONS		
	High Plan	Low Plan
Employee Only	\$4.03	\$2.68
Employee + Spouse	\$7.38	\$4.89
Employee + Child(ren)	\$7.74	\$5.13
Employee + Family	\$11.88	\$7.88

Pending Council approval



Say hello to our  
mobile app



# Vision Coverage

Plan Feature	High Plan (2-Pair Benefit)	Low Plan (iDEALChoice)
<b>Benefits</b>	2 pairs mix or match	Glasses or Contacts
Eye Exam   Retinal Imaging	\$10 copay   \$39 copay	\$10 copay   \$39 copay
<b>Frame Allowance OR Davis Vision Collection Frames</b>	\$150 allowance plus 20% off balance OR covered-in-full frames at Visionworks locations	\$140 allowance plus 20% off balance OR covered-in-full frames at Visionworks locations
<b>Lens Benefit</b>		
Single Vision	Covered in full after \$10 copay	Covered in full after \$20 copay
Bifocal	Covered in full after \$10 copay	Covered in full after \$20 copay
Trifocal   Lenticular	Covered in full after \$10 copay	Covered in full after \$20 copay
<b>Contact Allowance</b>		
Davis Vision Collection	\$10 copay, then covered in full up to 8 boxes	\$20 copay, then covered in full up to 4 boxes
Retail	\$130 allowance plus 15% off balance	\$130 allowance plus 15% off balance
<b>Frequency Guidelines</b>		
Exams	Once every January 1	Once every January 1
Frames	Once every January 1	Once every other January 1
Contacts or Lenses	Once every January 1	Once every January 1

## Plan Highlights

- FREE frames at all Visionworks stores (excludes Maui Jim).
- In-network benefits online at glasses.com, 1-800-Contacts, and Befitting.
- Go to [www.davisvision.com](http://www.davisvision.com) to find providers in your network (use client code 7955 for the High Plan or 9573 for the Low Plan).



# Value-Added Benefits

**No Cost to You!**





# BCBS Discount Programs



BlueCross BlueShield  
of Texas

# Blue365

Blue365 offers **premier health and wellness discounts** and is **free to join for medical plan members**. Members have access to discount programs in:

- Apparel & Footwear
- Fitness
- Hearing & Vision
- Home & Family
- Nutrition
- Personal Care

**How to access? Visit**

<https://www.blue365deals.com/BCBSTX/>

# BCBS Member Rewards Program

A program administered by Sapphire Digital that offers cash rewards when a lower-cost, quality provider is selected from several options.

## How does it work?

- When a doctor recommends treatment, call a Benefits Value Advisor at the number on the back of your member ID card, or log into Blue Access for Members<sup>SM</sup> at [www.bcbstx.com](http://www.bcbstx.com) and click the *Doctors and Hospitals* tab – then on *Find a Doctor or Hospital*.
- Choose a Member Rewards-eligible location, and you may earn a cash reward!
- Complete your procedure and, once verified, you will receive a check within 4 to 6 weeks.
- Questions? Call the number on the back of your member ID card.

# Benefit Value Advisor

**BVAs can help you save money on health procedures and tests. They can also help you understand and use your benefits more wisely.**

**You'll get guidance for all your health plan benefits so you only need one call to get support. BVAs can help you:**

- Maximize your benefits to get better value
- Get cost estimates for various providers and procedures
- Schedule appointments
- Find a doctor or facility
- Set up preauthorization



**Want to know more? Watch a video.**

You may text! keyword **MYBVA** to **33633** on your mobile phone to get more information and watch a video.

1 Message and data rates may apply. Terms, conditions and privacy policy at [bcbstx.com/mobile/text-messaging](http://bcbstx.com/mobile/text-messaging).

One call can help you get the most from your benefits.

Call the number on the back of your member ID card before your next procedure.

## Your life's journey—made easier

No matter where you are on your journey, there are times when a little help can go a long way. From checking off daily tasks to working on more complex issues, your program offers a variety of resources, tools and services available to you and your household members.

### Key Features:

- Provided at no cost
- Confidential service provided by a third party
- Available 24/7/365

### Here's how to get started



Give us a call and we will connect you with the right resource or professional.

**1-800-424-1729**



Visit [MagellanAscend.com](https://MagellanAscend.com) to browse all of the services available.

# CareATC Clinics – Closed Until City Hall Re-Opens

## City Hall Onsite Clinic

### Blue Essentials PCP and Blue Choice Copay plan members

- Free office visits (sick and preventive), onsite-dispensed medications, and onsite lab work

### Blue Choice HSA plan members

- Free preventive office visits
- \$25 fee for sick visits, onsite-dispensed medications, and onsite lab work
  - **Fee reduced to \$5 once the deductible has been met and \$0 once the out-of-pocket maximum has been met**

SERVICE	EXAMPLE
<b>Acute Care</b> (Treatment of common illnesses and minor injuries)	<ul style="list-style-type: none"><li>• Flu</li><li>• Sinus infections,</li><li>• Sprains</li></ul>
<b>Chronic Disease Evaluation, Monitoring and Care Management</b>	<ul style="list-style-type: none"><li>• Hypertension</li><li>• Diabetes</li><li>• Asthma</li></ul>
<b>Minor Procedures and Wound Care</b>	<ul style="list-style-type: none"><li>• Simple biopsies</li><li>• Skin tag/mole removal</li></ul>
<b>Preventive Care and Comprehensive Physical Exams</b>	<ul style="list-style-type: none"><li>• Age appropriate physicals</li><li>• Routine gynecological exams</li><li>• prostate exams</li><li>• kids sports/camp physicals,</li></ul>
<b>Diagnostic Testing and Screenings</b>	<ul style="list-style-type: none"><li>• On-site lab work</li><li>• EKGs</li></ul>

To make an appointment, call 1-800-993-8244, visit [www.careatc.com](http://www.careatc.com), or use the CareATC mobile app.

# Kannact Diabetes Management

## Diabetes management supplies and support program

**ALSO SUPPORTS HYPERTENSION AND CARDIOVASCULAR RISK**

### You receive:

- **Free glucometer and testing supplies delivered to your doorstep**
  - Option for a traditional glucometer or a smartphone-based glucometer
- **Dedicated, certified diabetes coach to help you self-manage your condition**
- **Personalized action plan**
- **Free blood pressure cuff (hypertension support)**

**Talk to a Kannact representative today or sign up at:**

**855-722-5513, [support@kannact.com](mailto:support@kannact.com), or [www.kannact.com/cityofdallas](http://www.kannact.com/cityofdallas)**





# Disability Benefits



# Disability Benefits

**There are no changes to current plan designs or coverage costs for 2022!**

## Short-Term Disability

<b>Benefit Amount</b>	Your weekly STD benefit is 60 percent of the first \$2,500 of your weekly insured pre-disability earnings, reduced by deductible income. Your minimum weekly benefit is \$15.
<b>Maximum Benefit Period</b>	180 days minus the length of the benefit waiting period.

## Long-Term Disability

<b>Benefit Amount</b>	Your monthly benefit is 60 percent of the first \$8,333 of your insured pre-disability earnings reduced by deductible income. Your minimum monthly benefit is \$100.
<b>Maximum Benefit Period</b>	If you become disabled before age 62, LTD benefits may continue during disability until age 65 or to the Social Security Normal Retirement Age (SSNRA) or 3 years and 6 months, whichever is longer. If you become disabled at age 62 or older, the benefit is based on a schedule.



# Life and AD&D Benefits



# Life and AD&D

## Basic Life Coverage

- **Full-time employees: \$75,000 benefit paid for by the City**

## Supplemental Life Coverage

- **Must have employee coverage to elect dependent coverage**
- **Employees who previously elected supplemental life can increase their amount by one increment up to the Guarantee Issue without answering Evidence of Insurability**
- **Election Limits**
  - Employee – 1x, 2x, or 3x annual salary up to \$500,000
  - Spouse - \$15,000 or \$25,000
  - Child - \$5,000 or \$10,000

**Remember to update  
your beneficiary  
information!**

# Accidental Death & Dismemberment (AD&D)

## Voluntary AD&D

- **Must have employee coverage to elect dependent coverage**
- **Election limits**
  - Employee - \$25,000 increments up to \$250,000
    - **Cannot exceed 10x annual salary**
  - Spouse Only – 60% of employee coverage
  - Child Only – 20% of employee coverage up to \$50,000 per child
  - Spouse and Child
    - **Spouse - 50% of employee coverage**
    - **Child - 15% of employee coverage**

**Remember to update  
your beneficiary  
information!**





# Other Voluntary Benefits





# Voluntary Benefits

## Voluntary Benefit Plan Highlights- Benefits Paid Directly to You!

<b>Accident Insurance</b>	<ul style="list-style-type: none"><li>• In the event of a covered benefit, this benefit will assist in paying your deductible, copays, and other medical bills or your daily expenses while you recover</li><li>• Health screening benefit of \$75</li></ul>
<b>Critical Illness Insurance</b>	<ul style="list-style-type: none"><li>• Includes cancer care</li><li>• Higher guarantee issue (GI) amounts and ongoing GI for future life events and future annual enrollments</li><li>• Waived pre-existing conditions limitation</li><li>• New \$50 health maintenance screening benefit</li></ul>
<b>Hospital Indemnity Insurance</b>	<ul style="list-style-type: none"><li>• Covers unexpected out-of-pocket expenses when you end up in the hospital</li><li>• New \$50 health maintenance screening benefit</li><li>• Guarantee Issue (GI) for employees and dependents during the 2020 enrollment and ongoing GI for future life events and future annual enrollments</li><li>• Waived pre-existing condition limitation</li></ul>

# Voluntary Benefits

## Accident, Critical Illness, and Hospital Indemnity Insurance

- No evidence of insurability (EOI) required for most first-time elections during Open Enrollment only.
- Critical Illness insurance elections over \$30,000 will still require EOI.
- After Open Enrollment, EOI may be required for all elections regardless of coverage level.

# What Do I Need to Do for 2022 Enrollment?

## Enrollment

**You only need to complete the enrollment process if you want to:**

- Participate in a Health Care or Limited Purpose Flexible Spending Account (FSA)
- Participate in the Dependent Care Flexible Spending Account (HSA)
- Contribute to a Health Savings Account
- Make changes to your current benefit elections
- Add or drop a dependent
- Update your beneficiary designations

**If you don't complete the enrollment process, your current City of Dallas benefit elections – excluding FSA and HSA elections – will carry over for 2022.**

## Payroll Beneficiary Form

**Everyone **MUST complete** the new Payroll Beneficiary Form during Open Enrollment.**

- Log in to <https://standard.benselect.com/cityofdallas> to complete it.
- If you are unable to complete the form online, call (214) 556-0971 for assistance.

# Enrollment Reminder

Online: <https://standard.benselect.com/cityofdallas>

Must enter exact address to access site.

## Having trouble accessing the system?

- Contact the Enrollment Center at (214) 556-0971.

## By phone with a Benefit Specialist

**Call (214) 556-0971 Monday-Friday, 8:15 a.m. – 5:15 p.m.**

- Benefit Specialists will be available starting September 13<sup>th</sup>.

# Questions?

## Contact the Enrollment Center

- Call (214) 556-0971
- E-mail [yourenrollment@ebcoh.com](mailto:yourenrollment@ebcoh.com)

**Open Enrollment**  
September 13 – 24, 2021