

1100 North Grand Avenue Walnut, CA 91789-1399

909-274-7500 www.mtsac.edu

IMPORTANT OPEN ENROLLMENT NOTICE – PLEASE READ

July 8, 2020

RE: 2020-21 Benefits Open Enrollment July 13, 2020 through August 14, 2020

Welcome to the 2020-2021 Open Enrollment! We are committed to providing you with benefits that promote your health and well-being as well as making the process as easy as possible for you. The upcoming 2020-2021 Open Enrollment period will begin on July 13, 2020 and continue through August 14, 2020. The Open Enrollment period is the **ONLY** opportunity to enroll or make changes to your medical, dental^{*}, and vision^{*} benefit offerings. **Your election will be effective October 1, 2020 and continue through September 30, 2021**.

2020-21 Open Enrollment Highlights

- ✓ If you take no action during the open enrollment period, your current 2020 Health Benefits plans will remain in effect for the 2020-21 plan year.
- If you would like to make a change to your current medical, dental, and/or vision plans during the open enrollment period, you may do so either by completing and submitting the information described below.
- ✓ If you are enrolling any dependents on your benefit plans, you must provide proof of dependent eligibility (see Dependent Verification section below).

2020-21 Open Enrollment Schedule

A Benefits Specialist is available to assist you through open enrollment to answer any questions you may have regarding this process by phone at 909-274-5419 or email <u>healthandwelfare@mtsac.edu</u>

During the Open Enrollment period (July 13, 2020 through August 14, 2020), if you would want to make a change to your plan, you must complete the attached enrollment forms, submit required documentation (if applicable), and return to Human Resources by either:

- Mail to: Mt. San Antonio College Attention: Human Resources 1100 N. Grand Avenue Walnut, CA 91789
- Email to: <u>healthandwelfare@mtsac.edu</u> (please do not include social security or date of birth on enrollment form, this will be completed by the Benefit Specialist.)

Enrollment Forms & Dependent Verification Documents

If you would like to make a change to your current medical, dental, and/or vision plans during the open enrollment period, you may do so by completing and submitting the information described below.

SISC Elected Plan	Forms to Complete for Enrollment
Kaiser Permanente \$15	California Region Kaiser Permanente Group
	Enrollment Form and Mt. SAC Plan Election Form
Kaiser Permanente \$0	California Region Kaiser Permanente Group
	Enrollment Form and Mt. SAC Plan Election Form
Blue Shield Trio Network	SISC III Enrollment Form and Mt. SAC Plan
	Election Form
Blue Shield Full Network	SISC III Enrollment Form and Mt. SAC Plan
	Election Form
Blue Shield 90G	SISC III Enrollment Form and Mt. SAC Plan
	Election Form
Blue Shield 100A	SISC III Enrollment Form and Mt. SAC Plan
	Election Form

Dependent Verification must be provided at the time the enrollment form is submitted for any new dependent added during this enrollment period.

• Dependent Verification documents for adding spouse or domestic partner include; Filed Tax return showing joint filing.

If you have any additional questions about the plan designs for our medical, dental, and vision coverage, feel free to contact our Benefits Specialist at <u>healthandwelfare@mtsac.edu</u> to review the available plans.

Sincerely,

Alexis Carter Director, Human Resources & Employee Services

Plan information can be found at www.mtsac.edu/hr/benefits or available upon request.

Enclosed: Election Form Enrollment Forms