Open Enrollment for Plan Year 2022

Dear City of Newport Beach Retiree,

Open Enrollment is just around the corner! Please read carefully, as the process for submitting your paperwork has changed:

- Open Enrollment is **September 20 through October 15, 2021**, with changes effective January 1, 2022.

- You must contact CalPERS directly (telephone or online) for changes to your CalPERS health plan enrollment(s), including adding or deleting coverage for yourself and eligible dependents, by October 15, 2021.

- The 2022 CalPERS health plan contribution is $149, which is paid directly to CalPERS on your behalf and applied towards the cost of your medical insurance premium. Hybrid Retiree Health Savings (RHS) plan participants receive the remaining balance of the monthly City contribution into their RHS account.

- The City’s dental and vision plans will continue with MetLife with no premium or plan changes for 2022. Enrollment changes to dental and vision plans can only be made if you are a current member of either plan. Please review the enclosed benefit charts for MetLife plan information.

- The City’s annual Health and Wellness Retiree Corner will be available virtually beginning Monday, September 20, 2021 on the City of Newport Beach website. Please visit the Retiree Corner at: [https://www.newportbeachca.gov/government/departments/human-resources/virtual-health-fair](https://www.newportbeachca.gov/government/departments/human-resources/virtual-health-fair) for important plan information, helpful resources and a fillable Retiree Open Enrollment form.

- You must complete and submit the enclosed City of Newport Beach Retiree Election Form directly to Benefits Coordinator Corporation (BCC) by **no later than October 15, 2021. Do not submit your form to the City.** A fillable form can also be found in the Retiree Corner located at [https://www.newportbeachca.gov/government/departments/human-resources/virtual-health-fair](https://www.newportbeachca.gov/government/departments/human-resources/virtual-health-fair). Fillable forms must be completed and submitted directly to Benefit Coordinators Corporation (BCC).

If you have any questions regarding medical plans, please contact CalPERS directly at 888-225-7377. Additional information regarding CalPERS Medical plans can be found at [www.calpers.ca.gov](http://www.calpers.ca.gov). If you have questions regarding your dental, vision, or retiree health savings plans, please contact Human Resources at 949-644-3294 or HRBenefit@newportbeachca.gov.

Sincerely,

Jill Ortiz
Human Resources Analyst

Note: Enrollment Reference Guide on Reverse Side
## Reference Guide Regarding Enrollment for 2022

<table>
<thead>
<tr>
<th>I want to...</th>
<th>CalPERS Medical Plans</th>
<th>Dental</th>
<th>Vision</th>
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</table>
| Enroll       | Contact CalPERS directly.  
Phone: 888-225-7377 or [www.calpers.ca.gov](http://www.calpers.ca.gov). | New enrollment or re-enrollment is **not available** if dental coverage was previously canceled. | New enrollment or re-enrollment is **not available** if vision coverage was previously canceled. |
| Change / Cancel a Plan or Add/Cancel Dependents | Contact CalPERS directly.  
Phone: 888-225-7377 [www.calpers.ca.gov](http://www.calpers.ca.gov).  
If declining CalPERS medical insurance, mark the “declining” box on the enclosed Election form & return to BCC (address below). | Complete & return the enclosed Election form to Benefit Coordinators Corporation (BCC) (address below) | Complete & return the enclosed Election form to Benefit Coordinators Corporation (BCC) (address below) |
| No Changes   | Check the “I am Continuing” Option in the Medical Election portion of the enclosed Election form & return to BCC (address below) | Check the appropriate coverage tier option in the Dental Election portion of the enclosed Election form & return to BCC. (address below) | Check the appropriate coverage tier option in the Vision Election portion of the enclosed Election form & return to BCC. (address below) |

**Please remember to complete and submit the enclosed City of Newport Beach Retiree Election Form to Benefits Coordinators Corporation**


Fillable forms will need to be printed, signed and submitted via mail, fax or email to Benefit Coordinators Corporation (BCC).

**Address:** Benefit Coordinators Corporation (BCC)  
Two Robinson Plaza, Suite 200  
Pittsburgh PA, 15205

**Email:** [Customersupport@benxcel.com](mailto:Customersupport@benxcel.com)

**Fax:** (412) 276-6650 / **Phone:** (800) 685-6100