

# ENTO EMPLOYEE BENEFITS DIRECTORY

## Department of Human Resources

## CONTACT US FOR QUESTIONS ABOUT

- New Hires/Rehires
- Benefits Orientation
- ♣ Insurance Enrollment/Changes
- Benefit Eligibility

- Life Insurance
- Life Events
- Open Enrollment
- ♣ COBRA

- Flexible Spending Accounts
- ♣ CalPERS General Information
- Deferred Compensation
- STD/LTD Claims

## BENEFIT SERVICES CONTACT INFORMATION

Visit us at https://www.cityofsacramento.gov/HR/employee-retiree-benefits/.

Department of Human Resources Benefit Services Division 915 I Street, Historic City Hall Sacramento, CA 95814 Phone: 916-808-5665 Fax: 916-808-7326

BenefitServices@cityofsacramento.org

## MEDICAL, DENTAL, & VISION INSURANCE

## MEDICAL

#### **KAISER**

#### www.kaiserpermanente.org

Customer Service: 800-464-4000 HMO \$25 **Group # 1880-4** HMO \$40 **Group # 1880-40** ABHP/HSA **Group # 1880-6** COBRA sub-accounts: -5004 (\$25), -5006 (ABHP), -5040 (\$40)

#### **SUTTER HEALTH PLAN**

#### www.sutterhealthplan.org

Customer Service: 855-315-5800 HMO \$25 **Group # 046103-000002** HMO \$40 **Group # 046103-000001** ABHP/HSA **Group # 046103-000006** 

#### **WESTERN HEALTH ADVANTAGE**

#### www.westernhealth.com

Customer Service: 916-563-2250 HMO \$25 **Group # 107500-A000-2** HMO \$40 **Group # 107500-A000-3** ABHP/HSA

Group # 107500-WCSS (Single)

Group # 107500-WCSS (Single) Group # 107500-WCSF (Family)

#### DENTAL

## **DELTA DENTAL PPO**

## www.deltadentalins.com/plans Customer Service: 800-765-6003

Group # 09505-2001

## **DELTA CARE—DMO/PMI**

# www.deltadentalins.com/plans

Customer Service: 800-422-4234

Group # 75500-0001

## VISION

## **VISION SERVICE PLAN—VSP**

## www.vsp.com

Customer Service: 800-877-7195 Basic **Group # 12178539-009** Enhanced **Group # 12178539-015** 

## **DISABILITY & LIFE INSURANCE**

## THE STANDARD INSURANCE COMPANY

www.standard.com

#### **SHORT TERM DISABILITY**

Customer Service: 800-368-2859 Claims Fax: 800-378-6053

Group # 646066

#### LONG TERM DISABILITY

Customer Service: 800-368-1135

Group # 610399

#### **LIFE INSURANCE**

Customer Service: 800-628-8600

Group # 647504

## RETIREMENT & DEFERRED COMPENSATION

#### RETIREMENT

#### **CalPERS**

www.calpers.ca.gov

Customer Service: 888-225-7377

#### **SCERS**

Pension: 916-808-1936 Health Benefits: 916-808-5665

#### **DEFERRED COMPENSATION**

#### 401(a) and 457(b)

#### **NATIONWIDE**

www.cityofsacretplan.com

Customer Service: 877-677-3678

Fax: 877-677-4329

Refer to Labor Agreement for required enrollment in a 401(a) plan and the required employer/employee contributions.

Enrollment in the 457(b) plan is voluntary and available to Career employees.

## Retiree Health Savings Account (RHSA)

#### MissionSquare Retirement

https://www.missionsq.org/

Customer Service: 800-669-7400

Fax: 202-682-6439

Refer to Labor Agreement for required enrollment in an RHSA plan and the required employee contribution.

## ADDITIONAL/VOLUNTARY BENEFITS

#### **AFLAC**

Group hospital indemnity, critical illness, and accident insurance

www.aflacgroupinsurance.com Customer Service: 800-433-3036 Email: sacramento@us.aflac.com

Group # 18429

## **BANK OF AMERICA**

Health Savings Account (HSA)
www.myhealth.bankofamerica.com
Customer Service: 866-791-0250

#### P & A Group

Flexible spending accounts for healthcare, dependent care, and transportation
www.padmin.com

Customer Service: (800) 688-2611 Claims Fax: (877) 855-7105

#### **LEGALSHIELD**

Group legal and identify theft services www.Legalshield.com/info/cityofsacramentoinfo

Customer Service: 916-849-3963 Email: <a href="mailto:cheryl@cherylcobbin.com">cheryl@cherylcobbin.com</a>

#### **CONCERN**

Employee Assistance Program (EAP)

https://employees.concernhealth.com/employee-portal

Access code: cityofsacramento Phone: 800-344-4222

## OTHER CONTACTS

#### **RECOGNIZED EMPLOYEE ORGANIZATIONS**

Visit the link below for contact information for Recognized Employee Organizations

SACRAMENTO RETIRED CITY EMPLOYEES ASSOCIATION (SRCEA)

srcea.email@gmail.com

https://www.cityofsacramento.gov/HR/labor-agreements

## WHEN CAN I MAKE CHANGES TO MY BENEFITS?

A: One of the following **QUALIFYING EVENTS** must occur to make changes to most of your benefits outside of the annual **OPEN ENROLLMENT.** You have <u>30 days from the date of the event</u> to contact Benefit Services and provide supporting documents as proof.

- Birth (60 days)
- Adoption (60 days)
- Guardianship of a child (60 days)
- Marriage
- Legal separation/divorce
- Registering/terminating a domestic partnership
- Approved leave of absence
- Over-age dependent children (no longer eligible at age 26)
- Spouse employment status changes
  - → Open enrollment
  - Dependents eligibility changed
  - → Loss of employment
  - → Gain/loss of coverage
- Court Orders
- Judgments
- Decrees
- Death of dependent
- Eligibility changes due to employment

Rev 2/8/2025