## EMPLOYEE BENEFITS DIRECTORY

### 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


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](http://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 PLUS**

- [www.sutterhealthplus.org](http://www.sutterhealthplus.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](http://www.westernhealth.com)  
  Customer Service: 916-563-2250  
  HMO $25 Group # 107500-A000-2  
  HMO $40 Group # 107500-A000-3  
  Group # 107500-WCSS (Single)  
  Group # 107500-WCSF (Family)

#### DENTAL

**DELTA DENTAL PPO**

- [www.deltadentalins.com/plans](http://www.deltadentalins.com/plans)  
  Customer Service: 800-765-6003  
  Group # 09505-2001

**DELTA CARE—DMO/PMI**

- [www.deltadentalins.com/plans](http://www.deltadentalins.com/plans)  
  Customer Service: 800-422-4234  
  Group # 75500-0001

#### VISION

**VISION SERVICE PLAN—VSP**

- [www.vsp.com](http://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](http://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](http://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.

**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: benefits@donnakramer.com
memberservices@legalshieldcorp.com

**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

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

**SACRAMENTO RETIRED CITY EMPLOYEES ASSOCIATION (SRCEA)**

srcea.email@gmail.com

**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 30 days from the date of the event 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

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