

Frequently Asked Questions

General

Q: What is the cut off date for Open Enrollment changes?

A: Open Enrollment ends on Friday, September 6th.

Q: When will our newly elected benefits be effective?

A: October 1, 2024 through September 30, 2025.

Q: If I don't want any changes, do I have to go into Paychex Flex?

A: Yes. All Full-Time Benefit Eligible Employees must log into Paychex Flex to complete their Open Enrollment, even if you are waiving all benefits or keeping everything the same. Everyone must select a beneficiary for the life insurance benefit.

Q: Where can I find more information about plan details?

A: Visit www.atibenefits.benefitsmap.com username: atibenefits / password: benefits to access plan documents, summaries, links to carrier sites, and much more.

Medical

Q: What happens to my current HSA if I want to change plans?

A: Your current HSA is your personal bank account, so it will stay with you, and it is not “use it or lose it”. The ability to continue contributing pre-tax dollars into it depends on if you remain enrolled in a Qualifying High Deductible Health Plan (HDHP).

Q: How do I search if my provider is in network?

A: Are you looking for Blue Shield or Kaiser?

1. Blue Shield – go to www.blueshieldca.com/fad to look up your doctor/facility
 - Trio HMO – use “TRIO ACO HMO”
 - Full HMO – use “Access+ HMO”
 - PPO – use “PPO”

2. Kaiser – while selecting a Primary Care Physician is not required, you may only utilize Kaiser contracted physicians on any Kaiser plan. You must use the Kaiser facilities, labs, and hospitals. Go to kp.org to find locations.

Q: If I am enrolled on an HMO, what do I do if I need medical care while traveling out of the area?

A: Go to the nearest emergency room if the situation is life-threatening. Emergency Care is required to be covered (regardless of insurance plan or network) at the emergency room in a true emergency. Once you are stabilized, you will be transferred to a hospital within your network, if possible. For non-emergent care, you can utilize your telehealth benefit. Visiting an urgent care, however may not be covered under your plan.

Dental

Q: Is there a dental roll over?

A: Yes. If you enroll on either of our dental plans, you may have some of your annual maximum benefit carried over into the next year. To qualify, you must have had a dental service performed within the calendar year and used less than the maximum threshold. The threshold is equal to the lesser of 50% of the out-of-network maximum benefit or \$1,000. If the qualification is met, 50% of the threshold is carried over to next year's maximum benefit. You can accumulate no more than 4 times the carry over amount. The entire accumulation amount will be forfeited if no dental service is submitted within a calendar year.

Vision

Q: Can I go to Sam's Club, Walmart, or Costco for my frames?

A: Yes, however, be aware that the frame allowance is lower at these stores at \$80 (compared to \$150 at a retail location). Not all providers at every location are participating providers.

Voluntary Plans (Life insurance, short-term and long-term disability, critical illness, hospital, accident)

Q: If I enroll in any of the voluntary plans (critical illness, hospital, accident), can I use it right away?

A: You should be aware of the pre-existing condition clause.

1. **Critical Illness plan** – You may qualify for a benefit if you have not been treated for this illness (including being seen by a doctor) in the 6 months prior to your coverage effective date or you've had coverage for 12 consecutive months.
2. **Hospital plan** – You may qualify for a benefit if you have not been treated for this sickness (including being seen by a doctor or taking medication) in the 6 months prior to your coverage effective date or you have had coverage for 12 consecutive months. This would include pregnancy as an illness.
3. **Accident plan** – there is no pre-existing condition for this plan.

Q: Is there a pre-existing condition clause for Short-Term or Long-Term Disability?

A: You should be aware of the pre-existing condition clause.

1. **Short-Term Disability** – You may qualify for a benefit if you have not been seen by a doctor or prescribed medication for an injury or sickness in the last 3 months or if your disability happens after 12 consecutive months of coverage.
2. **Long-Term Disability** – You may qualify for a benefit if you had symptoms or conditions which would cause a reasonable person to seek a diagnosis, care or treatment. You may qualify for a benefit if you have not been seen by a doctor or prescribed medication for an injury or sickness in the last 12 months or if your disability happens after 12 consecutive months of coverage.

Q: Does the Critical Illness plan cover COVID-19?

A: Yes, there is a 25% benefit for infectious diseases (including COVID-19) if you are confined to a hospital for at least 3 days.

Norton/Met Pet/Met Legal

Q: Does Pet Insurance through Met Life cover my exotic pet?

A: At this time, Met Life is only approved in the state of CA to cover cats and dogs.