



Introduction to Humboldt County Employee Benefits

Please assess this document on the [Risk Management webpage](#) to ensure you are viewing most current information.

Updated 03/2025

Contents

BENEFIT QUESTIONS ANSWERED	3
HEALTH INSURANCE.....	3
DENTAL INSURANCE	4
VISION INSURANCE.....	5
LIFE INSURANCE	5
VOLUNTARY BENEFITS	6
HEALTH, DENTAL AND VISION COVERAGE DETAILS	7
HEALTH INSURANCE.....	7
HEALTH INSURANCE APPOINTMENT CHECKLIST	7
DENTAL INSURANCE	8
VISION INSURANCE.....	9
RETIREMENT	9
MAKING CHANGES TO YOUR BENEFITS	11
CALPERS.....	12
EMPLOYEE BENEFIT PROVIDER CONTACT INFORMATION	13
ENROLLMENT FORMS.....	13
BENEFIT FLYERS	13

Humboldt County Benefit Information

Benefit Questions Answered

HEALTH INSURANCE

Who can enroll?

As an employee on a regular position, or extra help employee who meets certain criteria, you are eligible to enroll yourself and eligible dependents if you choose.

When do I enroll?

You have 60 days from your date of hire to enroll without a waiting period.

When does coverage begin?

If you sign up within 60 days of your first day, your coverage will begin the first of the month following your enrollment appointment. If your first day is July 10 and you sign up during July, your coverage will begin on August 1.

If you wait more than 60 days from your first day to sign up, you will have a 90-day waiting period. Coverage will begin the first of the month following the 90 days. If your first day is July 10 and you sign up on September 15 your coverage will begin January 1.

Coverage always begins on the first of the month and ends on the last day of the month.

Where do I sign up?

After you have reviewed and chosen a plan (available plan descriptions on the [Risk Management website](#)), call Risk Management at 707-268-3669 to schedule an appointment. You will be asked for your plan choice as well as the names, dates of birth and social security numbers of any dependents you are enrolling. The appointment takes about 30 minutes.

Who is a dependent?

- ❖ Spouse
- ❖ Child or stepchild (up to age 26)
- ❖ Registered domestic partner
- ❖ Other dependents who meet specific criteria

Specific documents and information for different dependents are required. See the **Health Insurance Appointment Checklist** in this booklet for additional information.

What does health insurance cost?

The County contribution toward health insurance is negotiated and set based on bargaining unit. The contribution changes annually. Please see the rate sheet on [our webpage](#) for specific monthly cost.

When do I pay for health insurance?

The County participates in the CalPERS Health Benefits Program which requires health insurance premiums be paid one month in advance. Premiums are deducted from the first two paychecks of the month; half of the full amount is taken from each paycheck.

What does each plan cover?

Breakdowns of what each plan cover can be found on the Humboldt County intranet site. Go to Departments > Human Resources > Risk Management > Health.

I have another group insurance and would like to Opt-Out of coverage

If you have group health insurance from another source (other than Medi-Cal or an individual plan purchased on the Marketplace, aka "Covered California"), you may be eligible to receive a monthly Opt-Out payment. To qualify for the Opt-Out differential payment, you will need to provide specific documents and information to Risk Management. For information on what documents are needed and to schedule an appointment, please call Risk Management at 268-3669.

Like health insurance premiums, the Opt-Out payment varies from year to year and depends on your bargaining unit. Please see the rate sheet on our webpage for current year amounts.

DENTAL INSURANCE

Who can enroll?

You must be working in a regular position (not extra-help) and work at least 20 hours per week to be eligible for dental insurance.

When do I enroll?

You can enroll as soon as you begin working.

When does coverage begin?

Coverage begins the first of the month following Risk Management's receipt of the completed Ameritas Dental enrollment form.

Where do I sign up?

An enrollment form is included in this booklet. Additional copies of the form are available on the Human Resources, [Risk Management webpage](#). Navigate to Human Resources, Risk Management then to Dental. Forms should be submitted directly to Risk Management. There is no need to schedule an appointment.

Who is a dependent?

- Spouse
- Child (up to age 26)
- Registered Domestic Partner
- Stepchild (up at age 26)

Dependents do not have to be on your health insurance to be covered by your dental plan.

What does dental insurance cost?

The County pays the full cost of dental insurance. This includes the cost for your dependents. You pay nothing toward your dental insurance premium no matter how many dependents you enroll.

VISION INSURANCE

Who can enroll?

As an employee in a regular position you are automatically enrolled. Dependents who are covered on your health insurance will also be enrolled in vision coverage.

When do I enroll?

Enrollment for you as the employee will be done using your new hire paperwork. Coverage for dependents will be processed after your health insurance appointment.

When does coverage begin?

You will be enrolled in vision insurance the first of the month after your first day of work. Vision insurance for dependents will have the same effective date as their health insurance.

Where do I sign up?

There is no form to be filled out for vision insurance. Your coverage is automatic and your dependents are enrolled from the health insurance enrollment form.

Who is a dependent?

Dependents on your vision plan are the same as those enrolled on your health insurance.

What does vision insurance cost?

The County pays the full cost of vision insurance. You pay nothing toward your vision insurance premium no matter how many dependents are enrolled.

What if I don't sign up for health insurance?

If you do not enroll in a County health insurance plan, only you will have vision insurance. If you receive the Opt-Out payment, you cannot enroll dependents in vision insurance.

LIFE INSURANCE

Who can enroll?

An employee in a regular position who works 20 hours a week or more.

When do I enroll?

Enrollment in basic coverage is automatic, but you should designate a beneficiary as soon as you start working.

Where to enroll?

An enrollment form is included in this booklet. Additional copies of the form are available on the Human Resources, [Risk Management webpage](#). Navigate to Human Resources, Risk Management then to Life Insurance. Forms should be submitted directly to Risk Management. You do not need to make an appointment.

When does coverage begin?

Your life insurance is effective the first of the month after your first day of work.

What does life insurance cost?

The County pays the cost of your monthly basic life insurance premium. You do not pay for life insurance unless you choose to purchase supplemental coverage.

What is supplemental life insurance coverage?

Supplemental life insurance is an extra life insurance policy you can purchase on yourself or dependents. You can purchase up to \$500,000 for yourself and your spouse and \$10,000 for your children. During the first 60 days of your employment, you have a guaranteed issuance of \$125,000 for yourself and \$30,000 for your spouse. Monthly premiums for supplemental life insurance are based on your age and are deducted from your paychecks. See the Life Insurance section of this booklet for more information.

VOLUNTARY BENEFITS

Who can enroll?

An employee in a regular position who works 30 hours or more per week.

What are voluntary benefits?

Additional insurance and other plans which give you the chance to have coverages which you chose, Flexible Spending Accounts and a Deferred Compensation Accounts. Some voluntary benefit options are:

- Permanent Life Insurance
- Medical Flexible Spending Account (FSA)
- Dependent Flexible Spending Account (FDC)
- Home Buying Assistance
- Funeral Planning, Will Preparation and Concierge Services

Where do I get more information or sign up?

Visit the Risk Management webpage and navigate to Voluntary Benefits.

What does it cost, and how do I pay for any of the voluntary benefits?

Each of the benefit plans have different costs so it depends on which benefits you choose. The cost of the benefit is deducted from your paycheck.

Who is the administrator for voluntary benefits?

The County works with several companies to administer your benefits, please see contact info below and additional benefit information in this booklet.

American Benefits (Amben)

800-499-3539

Empower

800-695-4952

www.empower.com

Golden State Finance

Authority

855-740-8422

www.gsfaHome.org

Anthem

833-954-1067

www.AnthemEAP.com

Voya

Multiple phone numbers and websites for services. Please refer to the Risk Management page for information.

Benefits Coverage Details

HEALTH INSURANCE

New hires have 60 days to enroll in the health plan of their choosing. If a health plan is not selected in 60 days, a plan can still be selected, but with a 90-day wait period for coverage to begin.

Risk Management is not staffed with insurance specialists and cannot advise which plans are best for you. Please review rate sheets and summaries of coverage for all our plans on the Risk Management webpage.

HEALTH INSURANCE APPOINTMENT CHECKLIST

Be Prepared

Before you call to make your appointment, you will need to choose the plan which is right for you and your dependents. To review the available plans, see the Risk Management webpage and choose Health. Once you have chosen your plan, please call Risk Management at 707-268-3669 and have the following information available:

- Name of plan you have chosen.
- Legal names, dates of birth and social security numbers for all eligible dependents you wish to enroll.

Documents Needed to Enroll Dependents at Your Enrollment Appointment

The following documents are required for enrollment of dependents:

- Spouse – copy of certified marriage certificate.
- Registered Domestic Partner – copy of Secretary of State Registration.
- Children – copy of certified birth certificate, any legal custody documents (speak with Risk Management when you make your appointment for specifics).

Opt-Out

The documents required to receive the Opt-Out differential can vary by individual circumstance. Please call Risk Management at 707-268-3669 to discuss your coverage and the documents required. In general, requirements include:

- Proof of current group coverage to certify that you and your eligible tax dependents are covered.
- Proof will include name of each covered individual, effective date of coverage and contact phone number for the insurance plan or employer which provides the coverage.
- Proof of coverage can be a letter from the HR department of the employer which provides coverage, or a certificate of coverage from the insurance company—talk to Risk Management prior to your appointment for specifics.

DENTAL INSURANCE

Your Dental Insurance is separate from your health insurance. The County pays the entire monthly premium cost for you and your enrolled dependents.

Dental Insurance Effective Date

Enrollment begins the first of the month after Risk Management's receipt of your completed Ameritas enrollment form.

Eligible Dependents

- Legal spouse or registered domestic partner
- Dependent children until their 26th birthday*
 - Dependent children include stepchildren, adopted children, children placed for adoption, foster children and grandchildren if guardianship has been established.
 - A dependent child or stepchild can be enrolled without requirements. They do not have to be in school, live in your house, or still be single to be covered by the employee's dental plan.
 - A dependent child age 26 or older who is incapable of self-support because of a physical or mental disability that occurred before the child turned 26.
 - Proof of the disability must be submitted to Risk Management once a year after the child has turned 26. Documentation may be faxed to 268-2546, emailed to riskmgmt@co.humboldt.ca.us, or mailed to Humboldt County Human Resources Risk Management, 825 5th Street, Room 100, Eureka, CA 95501.

Updating Your Dependents

- New dependents should be enrolled as soon as they become dependents. For example, birth of a child, new guardianship, marriage, etc.
- The effective date of a new dependent's dental coverage is the first of the month after Risk Management receives the completed enrollment form.
- All changes must be completed on the Ameritas enrollment form found on the Risk Management webpage.

Benefit ID Cards

Ameritas does not automatically send out ID cards. If you would like one, you can log into the Ameritas website and print one out. You can also download the Ameritas app for your cell phone and utilize virtual benefit cards.

DENTAL INSURANCE COVERAGE IS NOT AUTOMATIC, YOU MUST COMPLETE AN ENROLLMENT FORM TO BE COVERED.

Send your completed Ameritas Dental Enrollment Form to:

Human Resources – Risk Management 825 5th Street, Room 100, Eureka, CA 95501

Interoffice Mail to "Human Resources"

Scan and email to riskmgmt@co.humboldt.ca.us

VISION INSURANCE

Your vision insurance is separate from your health insurance. The County pays the entire monthly premium for you and any eligible dependents.

Vision Insurance Effective Date

- Your coverage begins effective the first of the month following your first day of work.
- Your dependents are covered on the same day their health insurance begins.
- If you delay enrollment in health insurance, your coverage still begins this first of the month following your date of hire, but your dependents will not have coverage until they are enrolled in your health coverage.

Eligible Dependents

Dependents who you cover on your health insurance. If you choose not to participate in the County's health plan or opt out, you as the employee will still receive the vision benefit.

Using Your Vision Insurance

- Most vision care providers in the area will accept County of Humboldt Vision Care Plan (VSP) and bill for services provided to you. The office will bill VSP and VSP will pay the office up to the maximum benefit amount allowed for an exam and eyewear each calendar year (see attached benefit summary for more information).
- If you choose to go to a vendor who does not accept VSP, you can pay out of pocket, retain your receipt then complete a claim form and upload the receipt at www.vsp.com.

Benefit ID Cards

VSP does not automatically send out ID cards. If you would like one, you can log into the VSP website at www.vsp.com. You can also call VSP at 800-877-7195 and ask for a card to be mailed to you. Please note, most optometrists' offices will not require a card.

RETIREMENT

Human Resources Risk Management partners with CalPERS to meet your retirement needs and you will complete your retirement application with them by calling or through your MyCalPERS account. CalPERS is knowledgeable and a highly resourceful point of contact to engage with and move forward retirement requests and consultation. You can conduct a retirement estimator from your MyCalPERS account or speak with them to provide those figures. They have access to the necessary information to provide you information and will be able to provide answers to the question(s) in which you may have. They can walk you through the process in completing your application.

We recommend you contact them directly:

Hours: Monday – Friday, 8:00 a.m. to 5:00 p.m.

Phone: 888 CalPERS (or 888-225-7377)

TTY: (877) 249-7442

Fax: (800) 959-6545

Risk Management can review cobra coverage including rates and eligibility time frames with you as well as the separation process. Please call Risk Management if you would like to schedule a retirement appointment. CalPERS and County of Humboldt have some valuable resources for your reference:

- Retirement Planning Guide: [New Employee Benefits & Retirement Planning Guide \(humboldt.gov\)](https://www.humboldt.gov/retirement-planning)
- CalPERS Medi-Care enrollment guide: [CalPERS Medicare Enrollment Guide](https://www.calpers.ca.gov/medi-care)

For questions or assistance navigating the Medi-Care enrollment process, contact:

Area 1 Agency on Aging
333 J Street, Eureka, CA 95501
(707) 442-3763

Making Changes to Your Benefits

When certain circumstances in your life change, you may wish to make changes to one or more of your benefit plans. Other circumstances require changes to be made to your benefit enrollments. Changes include marriage, divorce, separation, deaths, births, adoptions or moves. See below for specifics on how to change your benefits.

HEALTH INSURANCE

Marriage, divorce, births and deaths may require you to make changes to your health insurance. If you need to add or remove dependents from your health insurance, please call Risk Management at 707-268-3669 to find out about required documents depending on your situation and to set up an appointment to complete the change. Changes made to your health insurance will affect your dependent's coverage on the vision benefit.

DENTAL INSURANCE

All changes to your dental benefit require completion of an enrollment form (see Risk Management website). It is recommended that you add all eligible dependents, including newborns. In the case of divorce or death, please complete the enrollment form indicating you wish to remove a dependent.

VISION

Your covered dependents mirror your health insurance; when changes are made to your health insurance, your vision will be updated for you.

LIFE INSURANCE

Your life insurance beneficiary will not change unless you complete a Beneficiary Designation Request form and return it to Risk Management. The required form is on the Risk Management webpage.

If you would like to cancel your supplemental life insurance, please call Risk Management for instructions (707) 268-366.

VOLUNTARY BENEFITS

If you need to make changes to any of your voluntary benefits, please contact the administrator of that benefit:

American Benefits (Amben)

800-499-3539

www.AnthemEAP.com

Empower

800-695-4952

www.empower.com

Golden State Finance Authority

855-740-8422

www.gsfahome.org

Anthem

833-954-1067

www.AnthemEAP.com

Voya

Multiple phone numbers and websites for services. Please refer to the Risk Management page for information.

Last Check Designation

County employees will always receive their last paycheck. The purpose of the Last Check Designation form is to designate someone to receive your last check if you should die while an active employee. After designated, the person who will receive your last paycheck will not change unless you complete the another Last Check Designation Form which is available on the Personnel Website. Your last paycheck will include a payout of accumulated benefit time – holiday, sick, vacation, comp time and your last hours worked.

W-4

If you have changed your name, you must complete a new W-4 form with your new legal name and show payroll your new social security card. To change your name in the employee database, you need to notify your department. When payroll receives notification from your department of the change, Payroll will update your name in CalPERS. To change your Federal payroll tax withholding, please complete a new W-4 and return to payroll. To update your state payroll tax withholding, you will need to complete a DE 4 and return to payroll.

CalPERS

CalPERS Death Benefit

If you do not name a death beneficiary, an automatic beneficiary will be named for you. The automatic beneficiary is:

1. Your surviving spouse or registered domestic partner(whether or not you were still together at the time of your death); or if you do not have a surviving spouse,
2. Your natural born and adopted children, an equal share for each; or if none,
3. Parents, an equal share for each; or if none,
4. Brothers and sisters, an equal share for each; or if none,
5. Probated estate; or if not,
6. Stepchildren, an equal share for each; or if none,
7. Grandchildren, including step-grandchildren, and equal share for each; or if none,
8. Nieces and nephews, an equal share for each; or if none,
9. Great-grandchildren, an equal share for each; or if none,
10. Cousins, an equal share for each.

If you would like to name or change your automatic beneficiary, you can get the CalPERS form STD 241 from the [Personnel webpage](#) or login to the CalPERS website to complete the process. After you name a beneficiary, it will be revoked automatically by any of the following: marriage; dissolution or annulment of marriage; or birth or adoption of a child.

Employee Benefit Provider Contact Information

American Benefits

[Website](#)

(800) 499-3539

Ameritas Dental

[Website](#)

(800) 487-5553

Anthem Blue Cross – EAP

[Website](#)

(833) 954-1067

Anthem Traditional HMO

[Website](#)

(855) 839-4524

Blue Shield HMO

[Website](#)

(800) 334-5847

Blue shield PPO (PersGold & Platinum)

[Website](#)

(855) 633-4436

CalPERS

[Website](#)

(888) 225-7377

Empower

[Website](#)

(866) 816-4400

Golden State Finance Authority

[Website](#)

(855) 740-8422

OptumRX Prescription Plan

[Website](#)

Phone Number:

PORAC (Peace Officers Research Association of CA)

[Website](#)

(800) 937-6722

Western Health Advantage

[Website](#)

(888) 942- 7377

VSP – Vision

[Website](#)

(800) 877-7195

Voya

EAP

[Website](#)

(877) 533-2363

Will Prep & Funeral Planning

[Website](#)

(800) 913-8318

Travel Assistance

[Website](#)

(800) 859-2821

Enrollment Forms

[Dental](#)

[Life and Accidental Death & Dismemberment](#)

Benefit Flyers

[American Benefits - FSA](#)

[American Benefits - DCA](#)

[Ameritas Dental](#)

[Anthem Blue Cross – EAP](#)

[CalPERS](#)

[Empower](#)

[Golden State Finance Authority](#)

[VSP – Vision](#)

[Voya EAP](#)

[Will Prep & Funeral Planning](#)

[Travel Assistance](#)