

**California Department of Human Resources  
Memorandum**

**TO: Personnel Management Liaisons (PML)**

<b>SUBJECT:</b> 2016 Group Legal Services Insurance Plan Open Enrollment	<b>REFERENCE NUMBER:</b> 2016-004
<b>DATE ISSUED:</b> February 24, 2016	<b>SUPERSEDES:</b>

This memorandum should be forwarded to:

**Personnel Officers  
Personnel Transaction Supervisors  
Personnel Transaction Staff**

**FROM:** California Department of Human Resources  
Benefits Division

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This memorandum provides information for the annual open enrollment for the state's Group Legal Services Insurance Plan (Plan).

**NO CHANGES FOR 2016**

The monthly premium rates will remain the same.

- Individual Coverage - \$10.19
- Family/Registered Domestic Partner Coverage - \$17.74

**OPEN ENROLLMENT**

Open enrollment for the Plan is **March 2 through April 30, 2016**. During this enrollment period, eligible employees may enroll in the Plan and current enrollees can change their coverage plan from single to family or family to single, and add/delete eligible dependents. Employees already enrolled are not required to re-enroll to maintain coverage. Coverage is provided by ARAG Insurance Company.

**ELIGIBILITY CRITERIA**

Employees eligible to enroll in the Plan during this open enrollment period include:

- Permanent or probationary employees with a time base of half-time or more, who are designated rank and file, managerial, supervisory, confidential, or excluded/exempt;
- Permanent-intermittent employees who worked a minimum of 480 paid hours during the last control period from July 1 through December 31; and,

- Employees in a limited-term assignment who have return rights to a permanent position that meets the eligibility criteria. A newly hired employee appointed to a limited-term assignment who does not have return rights to a permanent position must have an appointment of six months or more, and a time base of half-time or more to be eligible to enroll.

Employees off work or on a leave of absence cannot enroll until they return to active status. However, if an employee is on military leave and is not available during the specified enrollment period, their spouse/domestic partner (with power of attorney) may enroll during the open enrollment period on their behalf.

## **DEPENDENT ELIGIBILITY**

### ***Eligible dependents are defined as:***

- A lawful spouse or registered domestic partner;
- Any dependent child, who has never been married under the age of 26;
  - a. Children include natural, stepchildren, adopted children, or children for whom the employee is the legal guardian, and children of the domestic partner; and
  - b. Any economically dependent child 26 years of age or older, if he/she is incapable of self-support because of a physical disability or mental incapacity who has never been married and is chiefly dependent on the eligible employee for support and maintenance.

Family members not eligible include the eligible employee's parents and grandparents, children under the age of 26 who are married, or who have been married, and children over the age of 26, unless disabled as specified above. Employees should be reminded that they are responsible for notifying their department's personnel office and completing the necessary paperwork when a dependent child loses eligibility.

## **EMPLOYEE COMMUNICATIONS**

Eligible employees not enrolled in the Plan will receive an enrollment packet with a Plan letter, a detailed flyer, enrollment instructions, and an enrollment authorization form.

## **COMPLETION OF THE PLAN'S ENROLLMENT AUTHORIZATION FORM**

Enrollees are required to complete Sections A and B of the Plan enrollment authorization form and submit the form to their departmental personnel office.

When personnel offices receive the enrollment form, they are responsible for verifying that the information is completed correctly in Section A and B, completing Section C, and submitting the enrollment form to the State Controller's Office (SCO) by the dates indicated below.

## EFFECTIVE DATES OF COVERAGE

The employee's effective date of coverage will begin on the first day of the pay period following the first premium (payroll) deduction.

SCO receives Plan enrollment form by:	Employee's Plan coverage will begin effective:
March 10, 2016	April 1, 2016
March 11 – April 10, 2016	May 1, 2016
April 11 – April 30, 2016*	June 1, 2016
*Enrollment forms signed, dated, and received by the personnel office by April 30, 2016, will be processed by SCO through May 10 with an effective date of June 1, 2016.	

If the enrollment form was submitted timely by the employee but was not processed accurately or was rejected by SCO, you may submit an appeal to CalHR.

## ORDERING ENROLLMENT KITS

Personnel offices should always maintain an adequate supply of the current marketing and enrollment materials during the annual open enrollment, for employees who become newly eligible to enroll throughout the year, or for an employee who may wish to cancel the Plan coverage. **CalHR does not maintain these materials for distribution to departments.** Please order supplies directly from ARAG Insurance Company by:

- Calling the Material Ordering Service for State of California Group Legal Plan at 1-800-888-4184, Extension 259, or
- E-mail your request to: [printdistribution@ARAGlegal.com](mailto:printdistribution@ARAGlegal.com)

Your request must include your department name, name of contact person, the actual physical street address with zip code, room number or mail station, telephone number and extension, and the quantity of enrollment kits needed. ARAG ships via UPS ground delivery and supplies are not deliverable to a P. O. Box (allow five to ten business days for delivery).

## FILL AND PRINT ENROLLMENT AUTHORIZATION FORM

A fill and print enrollment authorization form is available on ARAG's website at [www.araglegalcenter.com](http://www.araglegalcenter.com) (use Access Code 10202soc) or visit CalHR's website at [www.calhr.ca.gov](http://www.calhr.ca.gov). Employees can complete the form online, print it, sign it, and give it to their personnel office. This form must have an original signature or SCO will not process it.

Please refer to the Benefits Administration Manual (BAM) Section 1500 for the Group Legal Service Insurance Plan information and processing instructions: [BAM Section 1500](#).

If employees have questions you cannot answer, please direct them to ARAG's dedicated website at [www.araglegalcenter.com](http://www.araglegalcenter.com) (use Access Code 10202soc) or the toll-free customer service line at 1-866-762-0972 or TTY 1-800-383-4184, or 711 to reach a relay operator.

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If you have any questions related to this PML, please contact Patty Rosales-Abila at (916) 324-5553 or [patty.rosalesabila@calhr.ca.gov](mailto:patty.rosalesabila@calhr.ca.gov).

/s/Belinda Collins

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