

The Benefits Service Center will solicit you to make an election for your retiree health care coverage and provide 30 days to make your election.

## **Medicare Eligibile?**

If you or your covered dependent are Medicare eligibile, you will need to apply for Medicare Part B through the Social Security Administration.

They will require a Request for Employment
Information form (CMS L564). Email
AskEmployeeBenefits@ocgov.com to obtain this form.

## **RESOURCES**

- What to Know Guide for Retirees
- Intent to Retire Summary
- Attaining Medicare Summary
- Retiree Health Plan Rate Tables Retiree
- Medical Plan Benefit Summaries Retiree
- Permanent Disenrollment Notice Retiree
- Temp Opt Out Terms and Conditions

## **BENEFITS SERVICE CENTER**

Call: 1-833-476-2347 Monday - Friday 8 AM - 6 PM Visit: mybenefits.ocgov.com

## **HEALTH CARE OPTIONS**

- Enroll in a County Retiree Health Plan
  - You will have 30 days to select a health plan for yourself and any eligible dependents
    - Medicare eligible individuals will need to provide card numbers and effective dates to enroll
  - Applicable Medical Grants and HRA funds can be used to offset costs of retiree health plan
- Temporarily Opt Out
  - Attest to maintaining continuous coverage in a non-County retiree health plan.
  - Any applicable Medical Grants will be placed on hold during your temp opt out period.
  - You can exercise a one-time opt-in during future
     Annual Open Enrollment windows, Qualified Life Events
     or when you become Medicare Eligible.
- Permanent Disenrollment
  - If you have coverage elsewhere and you do not want County Retiree Health Coverage, you can disenroll.
  - The decision is permanent and you cannot re-enroll in the future for any reason.
  - Applicable Medical Grants
    - Can be used as Medicare Part B Reimbursement
    - Forfeited if ineligible to Medicare