

September 8, 2022

Summary of Proposed Policy Changes Health Service System Rules: Plan Year 2023

The section and page numbers in this document refer to the draft rules document- "2023 HSS Member Rules Draft" located behind this summary.

Throughout the document changes are made to dates to reflect that the Rules be updated for the 2023 Plan Year. In addition, minor modifications to the document have been made to improve the documents readability, including removal of duplicative information, updating of terms, and adjustment of section numbering. All substantive policy changes are listed below.

Section	Policy Change	Rationale
Section H	Removal of prohibition of certain School Term Employees from making changes during the annual open enrollment period.	Operational – practice is no longer applicable. Higher premiums are deducted in the spring semester to cover their summer premiums thus allowing benefits to remain active year- round.
Section H	Language added to require non- Medicare family members to be enrolled in a HSS UnitedHealthcare medical plan if one or more Medicare-eligible family members is enrolled in the HSS UnitedHealthcare MAPD plan.	Reflects new Operational policy that transitions all non-Medicare family members of Medicare Split Families from Blue Shield medical plans to new UnitedHealthcare plans.
Section N	Removal of language that delays enrollment of a dependent if the individual is hospital confined.	Operational - practice is no longer applicable.
Section P8	Removal of \$50 reinstatement charge.	Operational - practice is no longer applicable.



Affordable, Quality Benefits & Well-Being

Summary of Proposed Policy Changes for the Cafeteria Plan Document: Plan Year 2023

The section and page numbers in this document refer to the draft cafeteria plan document for 2023.

Throughout the document changes are made to dates to reflect that the Cafeteria Plan Document is be amended and restated for the 2023 Plan Year. In addition, minor modifications to the document have been made to improve the documents readability, including removal of duplicative information, adding of new definitions, updating of terms, and adjustment of section numbering. All substantive policy changes are listed below.

Section	Policy Change	Rationale
Appendix B	Removed exclusion for "non-	The CARES Act of March 2020
Section B2	prescribed drugs" from the	expanded the benefits of FSAs by
	definitions of "Medical Expense"	removing the prescription requirement
	and Qualifying Medical Expense".	for several OTC drugs and medicines,
		and by adding feminine hygiene
		products to the list of expenses eligible
A		for reimbursement.
Appendix B	Updated to reflect increase the	In Revenue Procedure 2021-45, the
Section B3	FSA limits to \$2,850 per year, up	Internal Revenue Service (IRS)
	from \$2,750 in 2021, and increase	released updated flexible spending
	the carryover amounts to \$570 per	account (FSA) limits for 2022.
	year, up from \$550.	
Appendix D	Updated 2023 Flexible Credits	2023 Benefit Program Update due to
Section D4.2	dollar values for CCSF and	M.O.U. compliance.
	Superior Court employees.	
Appendix E	Updated to reflect 2023 benefit	2022 Benefit program update
	offerings.	