

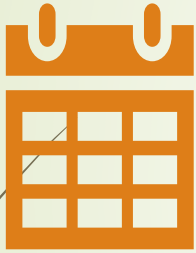


Open Enrollment 2026

Benefits, it's your choice



2026 Open Enrollment



2026 Open Enrollment
October 1st - October 14th



Passive Enrollment,
what does this
mean?

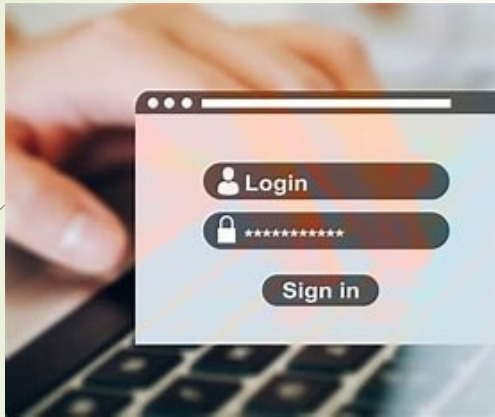


www.ocfl.net/openenrollment



myOCPortal - CLICK
SUBMIT!

Open Enrollment Reminders



**Log in to the
myOCPortal**



**Review your mailing
address, email, and
phone number**



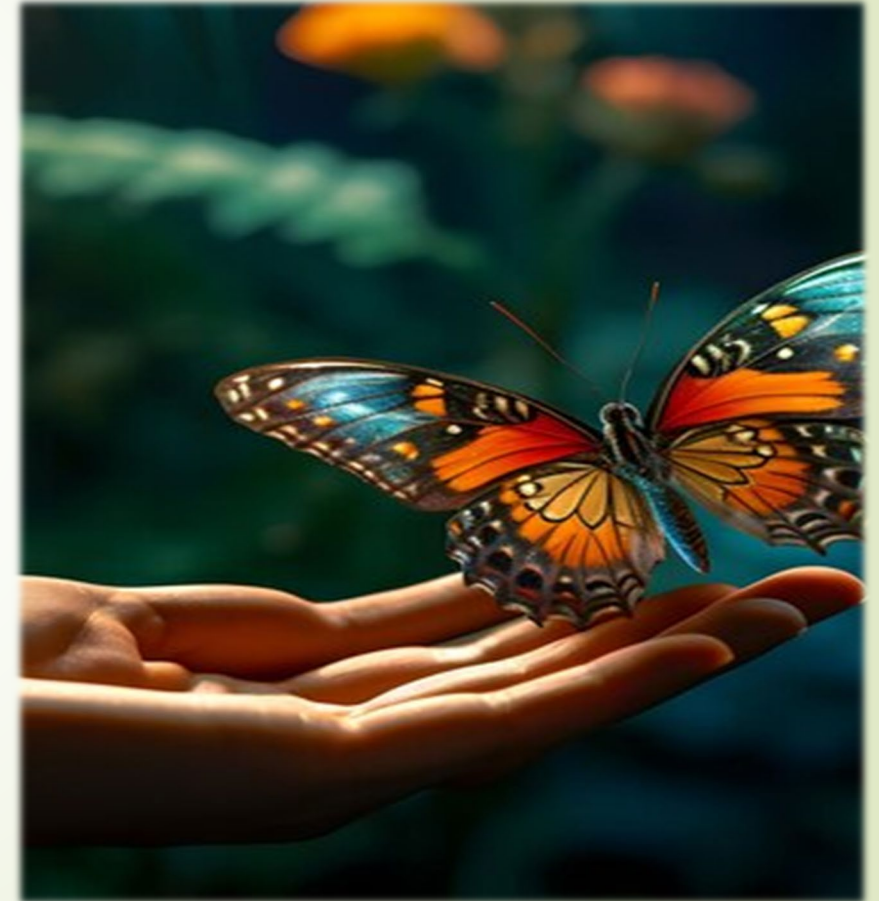
**Opt in for important
messages**

Agenda

- 
- 
- What's Changing
 - MDLive
 - Cigna Easy Choice Tool
 - Cigna ID Cards
 - Medical Plan Overview
 - Dental
 - Vision
 - Spending Accounts
 - Additional Life and Disability
 - ComPsych
 - Webinars
 - Additional Help

What's Changing

- **OrangePrime Plus Increased deductibles:**
 - Individual Deductible - \$1,700 (was \$1,650)
 - Family Deductible - \$3,400 (was \$3,300)
- **HSA Plan Limits:**
 - Individual Limits - \$4,400 (was \$4,300)
 - Family Limits - \$8,750 (was \$8,550)
- **Health Care Flexible Spending Account:**
 - \$3,300 (was \$3,200)
- **Limited Purpose Spending Account:**
 - \$3,300 (was \$3,200)
- **Dependent Care Spending Account:**
 - \$7,500 (was \$5,000)
- **Life and Disability - EOI**
- **MDLive - \$10 copay**



MDLive Virtual Care

- \$10 copay, and plan pays 100%
- Provides services by dedicated virtual providers through audio, video, and secure internet-based technologies.



CHOOSING A HEALTH PLAN JUST GOT EASIER

The Cigna Easy Choice tool gives you personalized guidance to help you find your best fit medical and dental plan



Best Fit	Next Best Fit	Good Fit
LDHP Cigna Health and Life Insurance Company	HSA Cigna Health and Life Insurance Company	Surefit Cigna Health and Life Insurance Company
You pay Monthly	You pay Monthly	You pay Monthly
\$84.18 after employer contribution	\$50.52 after employer contribution	\$0.00 after employer contribution
Annual Estimated Health Care Cost ⓘ Enter some additional information, and we'll estimate the annual costs for each plan. ⇒ START ESTIMATE	Annual Estimated Health Care Cost ⓘ Enter some additional information, and we'll estimate the annual costs for each plan. ⇒ START ESTIMATE	Annual Estimated Health Care Cost ⓘ Enter some additional information, and we'll estimate the annual costs for each plan. ⇒ START ESTIMATE
	Your employer is contributing \$1,000.00 to your HSA.	

Employee Access Code: **24X3L9UK**

<https://decisionsupport.cigna.com/login>

**HSA is the OrangePrime Plus High Deductible Health Plan



Cigna now has Digital ID cards



Customer Login

Username [Forgot Username?](#)

Password [Forgot Password?](#)

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Not registered on
myCigna yet? It's
quick and easy.



Medical Plan Comparison

	OrangePrime Plus HDHP w/HSA	OrangePrime LDHP	SureFit
BENEFITS	In-Network	In-Network	In-Network
DEDUCTIBLE Individual/Family	\$1,700/\$3,400	\$1,500/\$3,000	\$1,500/\$3,000
EMPLOYER HSA CONTRIBUTION Individual/Family	Up to \$1,000/\$1550 (Proration Applies)	Not HSA Eligible	Not HSA Eligible
OUT-OF-POCKET MAX Individual/Family	\$3,000/\$6,000	\$3,000/\$6,000	\$3,000/\$6,000
Preventative Care	\$0	\$0	\$0
Primary Care	\$30 after Deductible	\$30 Co-Pay	\$30 Co-Pay
Specialist	\$50 after Deductible	\$50 Co-Pay	\$50 Co-Pay
Inpatient Hospital Admission	20% after Deductible	20% after Deductible	20% after Deductible
Outpatient Surgery (Non-Hospital)	20% after Deductible	\$150 Co-Pay	\$150 Co-Pay
Advance Imaging (Hospital)	20% after Deductible	20% after Deductible	20% after Deductible
Advance Imaging (Non-Hospital)	20% after Deductible	\$150 Co-Pay	\$150 Co-Pay
Urgent Care	20% after Deductible	\$50 Co-Pay	\$50 Co-Pay
Emergency Room	20% after Deductible	20% after Deductible	20% after Deductible
Short-Term Rehabilitation Therapy	20% after Deductible	20% after Deductible	20% after Deductible
Mental Health	20% after Deductible	20% after Deductible	20% after Deductible

2026 Premium Comparison Chart

Medical and Pharmacy Premiums			<i>Bi-Weekly Rates</i>
Cigna	Total Premium	Employee Contribution	County Contribution
HDHP Employee only	\$482.88	\$23.32	\$459.56
HDHP Employee + spouse	\$1008.25	\$150.71	\$857.54
HDHP Employee + child(ren)	\$912.06	\$119.34	\$792.72
HDHP Employee + family	\$1330.03	\$266.15	\$1063.88
LDHP Employee only	\$525.18	\$38.85	\$486.33
LDHP Employee + spouse	\$1074.49	\$180.71	\$893.78
LDHP Employee + child(ren)	\$979.61	\$147.17	\$832.44
LDHP Employee + family	\$1419.87	\$310.24	\$1109.63
SureFit Employee only	\$464.79	\$0	\$464.79
SureFit Employee + spouse	\$950.92	\$138.45	\$812.47
SureFit Employee + child(ren)	\$866.95	\$92.30	\$774.65
SureFit Employee + family	\$1,256.58	\$230.76	\$1,025.82

Dental Plan Options

Low Plan

Benefits	Low Plan
Annual Maximum paid by Insurance	\$1,000 per person per calendar year
Progressive Maximum	\$250 per year up to \$1,750
Calendar Year Deductible	\$50 per individual \$150 per family
Preventative Services Oral exams, cleanings, routine x-rays, fluoride	100% - no deductible
Basic Services Sealants, fillings, oral surgery, root canals, repairs to dentures, bridges, and crowns	Employee pays 40% after deductible has been met
Major Services Periodontics, dentures, bridges, crowns, inlays, onlays	Employee pays 70% after deductible has been met
Orthodontia	Not Covered
Coverage for eligible children only up to age 19	Select network orthodontists provide a 15% discount for adults. Contact your provider for more details

Middle Plan

Benefits	Middle Plan
Annual Maximum paid by Insurance	\$1,000 per person per calendar year
Progressive Maximum	\$250 per year up to \$1,750
Calendar Year Deductible	\$50 per individual \$150 per family
Preventative Services Oral exams, cleanings, routine x-rays, fluoride	100% - no deductible
Basic Services Sealants, fillings, oral surgery, root canals, repairs to dentures, bridges, and crowns	Employee pays 30% after deductible has been met
Major Services Periodontics, dentures, bridges, crowns, inlays, onlays	Employee pays 60% after deductible has been met
Orthodontia	Employee pays 60%, no deductible
Coverage for eligible children only up to age 19	Select network orthodontists provide a 15% discount for adults. Contact your provider for more details

High Plan

Benefits	High Plan
Annual Maximum paid by Insurance	\$1,500 per person per calendar year
Progressive Maximum	\$250 per year up to \$2,250
Calendar Year Deductible	\$50 per individual \$150 per family
Preventative Services Oral exams, cleanings, routine x-rays, fluoride	100% - no deductible
Basic Services Sealants, fillings, oral surgery, root canals, repairs to dentures, bridges, and crowns	Employee pays 20% after deductible has been met
Major Services Periodontics, dentures, bridges, crowns, inlays, onlays	Employee pays 50% after deductible has been met
Orthodontia	Employee pays 50%, no deductible
Coverage for eligible children only up to age 19	Lifetime limit of \$1,000 Select network orthodontists provide a 15% discount for adults. Contact your provider for more details

Cigna Dental Coverage

No changes to the benefits or premium contributions for the 3 Cigna Dental Plans

Dental Premiums			Bi-Weekly Rates
Cigna Low Plan	Total Premium	Employee Contribution	County Contribution
Low Employee only	\$7.10	\$7.10	\$0
Low Employee + 1	\$14.49	\$14.49	\$0
Low Employee + 2 or more	\$26.48	\$26.48	\$0
Cigna Middle Plan	Total Premium	Employee Contribution	County Contribution
Middle Employee only	\$10.88	\$10.88	\$0
Middle Employee + 1	\$22.53	\$22.53	\$0
Middle Employee + 2 or more	\$42.36	\$42.36	\$0
Cigna High Plan	Total Premium	Employee Contribution	County Contribution
High Employee only	\$17.71	\$17.71	\$0
High Employee +1	\$36.07	\$36.07	\$0
High Employee + 2 or more	\$65.55	\$65.55	\$0

Vision Plan Options

Vision Services	In-Network
Exam Copay	\$5
Materials Copay	\$15
Frames	\$175-\$200 (after copay)
Standard Plastic Lens Per Pair	\$15
Conventional Contact Lens (materials) when elective	\$30
Disposable Contact Lenses (materials) when elective	\$175 allowance
Contact Lenses (materials) medically	Covered in full, with prior authorization when necessary
Contact Lens Fitting & Follow-up (Standard Fit)	Covered in full after \$30 Co-pay
Contact Lens Fitting & Follow-up (Specialty Fit)	Covered in full after \$30 Co-pay

MetLife Vision Coverage

Warby Parker is now covered as a in-network provider under the Superior Vision Network

What are the benefits?

Plan Frequencies:

- Exams every 12 months
- Lenses every 12 months
- Frames every 24 months
- Contacts every 12 months

What are the In-Network copayments?

- Vision Examination: \$5
- Materials: \$15
- Standard Progressive Lenses: \$15
- Tiers 1-3 Progressive Lenses: \$110-\$225
- Frames \$175-\$200 allowance*
- Contacts \$175 allowance

Vision Premiums			Bi-Weekly Rates
MetLife	Total Premium	Employee Contribution	County Contribution
Employee only	\$2.20	\$2.20	\$0
Employee + 1	\$4.40	\$4.40	\$0
Employee + 2 or more	\$6.46	\$6.46	\$0

2026 Spending Accounts



Health Savings Account

HSA

Employer Contribution

- Employee Only Coverage - Up to \$1,000 contribution
- Employee plus Dependent(s) - Up to \$1,550 contribution

Individual and Family Contributions

Elected at Open Enrollment and as a New Hire

Limits

Individual \$4,400

Family \$8,750

Eligibility: OrangePrime Plus HSA (HDHP)

Eligible Expenses: Medical, RX, Dental, Vision, Durable Medical Equipment

Availability: Funded through payroll deductions

Forfeitures: None

Health Care Flexible Spending Account

HCFSA

Maximum \$3,300

Eligibility: Enrollment not required on any plan

Eligible Expenses: Medical, RX, Dental, Vision, Durable Medical Equipment

Availability: Front Loaded

Forfeitures: March 15, 2027

Limited Purpose Flexible Spending Account

LPFSA

Maximum \$3,300

Eligibility: OrangePrime Plus

To be paired with the Health Savings Account (HSA)

Eligible Expenses: Dental, Vision, and Preventative Care not covered by your health plan

Availability: Front Loaded

Forfeitures: March 15, 2027

Dependent Care Spending Account

DCSA

Maximum \$7,500

Eligibility: Enrollment not required on any plan

Eligible Expenses: Dependent Care Services

Availability: Funded through payroll deductions

Forfeitures: March 15, 2027

Additional Life and AD&D



Basic Employee Life with AD&D Insurance

- Employer paid benefit
- All employees receive 1x Salary of Basic Life and AD&D Insurance (max \$200,000)

Additional Employee Life with AD&D Insurance

- Employee Paid / aged based rates (up to a max of 5x your salary not to exceed \$300,000)
- Increase up to \$20,000 - medical underwriting not required, if not previously denied as of 1/1/2025

Spouse Life with AD&D Insurance

- Employee Paid / aged based rates (up to a max of \$250,000 not to exceed Employee coverage)
- Increase up to \$20,000 - medical underwriting not required, if not previously denied as of 1/1/2025

Child Life Insurance

- Employee Paid
- \$5,000 or \$10,000 (coverage ends on 26th birthday)

Disability



Short-Term Disability

- Employees have the option of enrolling in and paying premiums for an STD plan. The STD plan pays employees an amount up to 60% of their pre-disability salary to a weekly maximum of \$2,500
- STD premiums are deducted from employee pay after taxes, so STD benefits paid to employees are non-taxable
- STD benefits begin once you have exhausted all County paid sick, term, personal, and vacation leave and have met the required waiting period

Benefit Waiting Period

120 day waiting
90 day waiting
60 day waiting
30 day waiting
15 day waiting

Maximum Benefit Period

9 weeks
13 weeks
18 weeks
22 weeks
24 weeks

Long-Term Disability

The County provides this benefit at no cost to you. The LTD plan pays an amount equal to 60% of your salary to a monthly maximum of \$10,000 (reduced by Deductible Income) upon completion of a 180-day waiting period. LTD premiums are paid by the County; the LTD benefits paid to employees are considered taxable.



Life and Disability Insurance

- **Additional Life Insurance**

- If you make an election subject to Evidence of Insurability (EOI) you will receive an email from the Standard with further instructions after the close of annual enrollment.
- Check your Orange County email for an invitation from securemedicalhistory@ssc.standard.com with your custom link to complete your election.
- EOI is not required for amounts up to \$20,000 unless previously denied after 01/01/2025.

- **Short Term Disability**

- Any request to decrease your waiting period by more than one tier will require medical underwriting.

ComPsych Employee Assistance Program

- All services are confidential
- Receive 8 sessions per topic/situation
- Cognitive behavioral therapy
- In-person or virtual appointments
- Speaks English & Spanish
- Members can call 1-855-221-8925 to make an appointment
- www.guidanceresources.com
- Organizational Web ID: ORANGECOUNTY



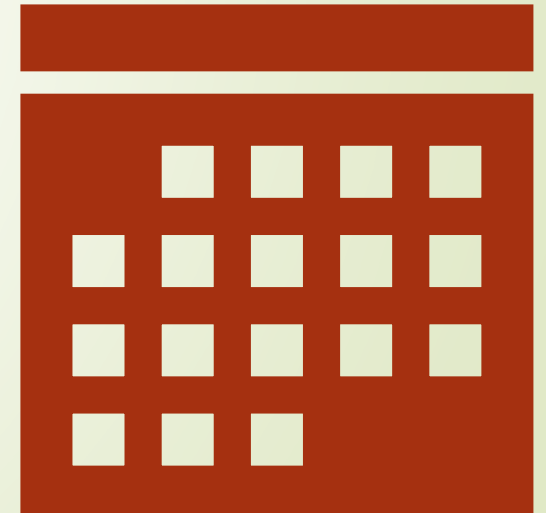
EAP Counselor
Janelle Carbone- Rodriguez MSW, LCSW

Open Enrollment Webinars

- **09/30/2025 10:00am –11:00am Open Enrollment Overview (Virtual)**
- **09/30/2025 3:00pm –4:00pm Open Enrollment Overview (Virtual)**
- **10/07/2025 10:00am –11:00am Open Enrollment Overview (Virtual)**
- **10/07/2025 3:00pm –4:00pm Open Enrollment Overview (Virtual)**

We will host sessions virtually and a recorded session will be posted to the Open Enrollment Website for employees to view at their leisure.

Mark Your Calendars



How Do I Complete Open Enrollment?

myOCPortal 
Self-Service Employee Information

User ID

Password

Important Notice: Access to this system is restricted to authorized users only. Inappropriate use of this system is prohibited and could be subject to disciplinary action. All records, reports and data generated by or residing upon this system are the property of Orange County.

[Sign In](#)

 **LOG IN**

1.

Main Menu



[CLICK](#)

2.

Click SUBMIT!

Open Enrollment

Starts now until . Your final enrollment must be submitted by 11:59 PM EST, . [Click this tile to make your elections.](#)



Countdown to Open Enrollment Deadline: **Days HH MM SS**
70 17:14:09

[CLICK](#)

3.

Need Additional Help?

► Open Enrollment Benefits Presentations will be hosted in-person and virtually this year. Additional information can be found online on myOCPortal on the “Benefits Presentation” tab.

► If you have questions or need assistance, please call 407-836-5661 or email Benefits@ocfl.net

Cigna

Michael Bradley

407-403-8108

OCRep@Cigna.com

MetLife

800-333-9372

www.metlife.com/ocbocc

ChardSnyder, a Wex Company

800-982-7715

AskPenny@wexinc.com

The Standard

Donna McCann

971-321-7429

OCLifeAndDisability@Standard.com





Post Open Enrollment Reminders

- **Dependent Verification Documentation Deadline:**
 - October 28, 2025, 11:59 p.m. EST
- **The Standard Medical Underwriting Deadline:**
 - November 30, 2025, 11:59 p.m. EST
- **Open your Health Savings Account (HSA) by:**
 - October 28, 2025, 11:59 p.m. EST

Open Enrollment 2026



www.ocfl.net/openenrollment

HR Benefits – Benefits@ocfl.net

myOCHR – 407-836-5661

HumanResources@ocfl.net