

Open enrollment worksheet for retirees, survivors, COBRA subscribers and former spouses

OPEN ENROLLMENT

READY. SET. ELECT!

Use this worksheet to plan your elections for 2022. Visit peba.sc.gov/oe to learn about what changes you can make. This is not an election of benefits; you must follow the applicable steps listed on the open enrollment webpage to enroll for 2022.

Health plan

- Medicare Supplemental Plan, if eligible for Medicare
- Standard Plan¹
- Savings Plan
- TRICARE Supplement Plan

Coverage level

- Employee
- Employee/spouse
- Employee/children
- Full family

¹The Standard Plan is the Carve-out Plan for Medicare primary members.

Dental plan

- Dental Plus
- Basic Dental

Coverage level

- Employee
- Employee/spouse
- Employee/children
- Full family

Changes to existing dental coverage can be made during open enrollment in odd-numbered years only. If you don't make changes this year, your next opportunity to make a change will be in October 2023.

Vision coverage

Coverage level

- Employee
- Employee/spouse
- Employee/children
- Full family



MoneyPlus worksheet



Use the worksheet below to calculate the amount you may wish to contribute to an MSA or a DCSA. Be sure to include the amounts you listed on Pages 3, 5 and 6 of the 2022 *Insurance Summary* in the worksheet. Be conservative in your planning. Remember that any unclaimed funds cannot be returned to you. You can, however, carry over up to \$550 of unused MSA funds into the 2023 plan year. You cannot carry over DCSA funds, and you cannot transfer funds between flexible spending accounts. Refer to Page 10 of the *Insurance Summary* for annual contribution limits.

Medical Spending Account

Estimate your eligible out-of-pocket medical expenses for the plan year.

Medical expenses

Health insurance deductible	\$
Copayments and coinsurance	\$
Prescription drugs	\$
Dental care	\$
Vision care	\$
Travel costs for medical care	\$
Other eligible expenses	\$
Annual contribution	\$

Dependent Care Spending Account

Estimate your eligible dependent care expenses for the plan year.

Child care expenses

Day care services	\$
In-home care/au pair services	\$
Nursery/preschool	\$
After-school care	\$
Summer day camps	\$

Elder care expenses

Day care center services	\$
In-home care services	\$
Annual contribution	\$

