

Confirming RCUH 2020 Open Enrollment

Please log in to Employee Self-Service (ESS) to review your Benefits Summary for the upcoming plan year effective 07/01/2020 (Inclusive of changes/new elections).

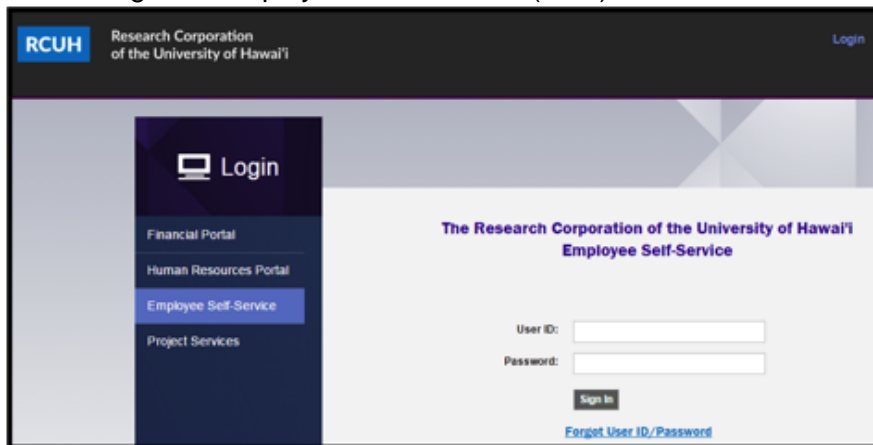
The following OE Benefits and updated rates are currently viewable on the Benefits Summary for changes effective 7/1/20:

- Medical Enrollment Changes/Cancellation
- Dental Enrollment Changes/Cancellation
- Flex Spending Enrollments: Healthcare and/or Dependent Care only

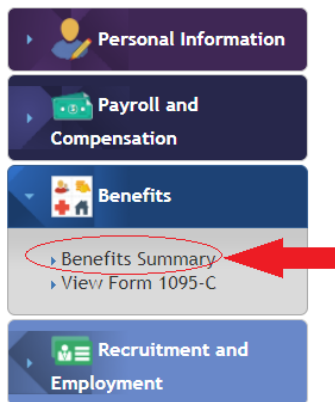
Please note that the following non-OE Benefits changes with an effective date of 7/1 will NOT be viewable until on or after 7/13/20:

- SRA Elections
- Flex Spending Enrollments: Parking and Transit Expense Reimbursement
- Supplemental LTC Rate Changes if applicable (effective July 1)

1. Log in to Employee Self -Service (ESS) from the RCUH Homepage (www.rcuh.com)



2. View your Benefits Summary on Employee Self-Service (ESS)
 ○ Self Service > Benefits > Benefits Summary





- In the Effective Date field, enter: "07/01/2020" and click "Go" to view your changes or new elections of benefits. You may also enter today's date to view your current benefit elections.

**Please carefully review the following Open Enrollment benefits:

- Medical Enrollment Changes/Cancellation
- Dental Enrollment Changes/Cancellation
- Flex Spending Enrollments: Healthcare and/or Dependent Care only

Benefits Summary

Benefits Summary is only for regular-status employees who are 50% FTE and above. If you have any questions, please contact rcuh_benefits@rcuh.com.

To view your benefits as of another date, enter the date and select Go.

Effective Date:

The benefits displayed below are current as of (July 01)

*Benefits changes/enrollments can only be made during the Open Enrollment Period. Mid-year changes can be made due to a qualifying event.

Benefits Summary			
Type of Benefit	Plan Description	Employee Paid	Employer Paid
* Medical, Vision & Drug PreTax	Kaiser - Plan A	\$195.42 Per Month	\$293.14 Per Month
* Dental PreTax	Hawaii Dental Service	\$28.24 Per Month	\$42.36 Per Month
* Flex Spending Health - U.S.	Medical Expense Reimb.	Waived	
* Flex Spending Dependent Care	Dependent Care Expense Reimb.	Waived	
Flex Spending Parking	Parking Reimbursement	Waived	
Flex Spending Transit	Transit Passes	Waived	
GRA (TIAA)	Group Retirement Annuity		10% Ann. Income PP
* Life and AD and D	Group Life - Class 2 (\$600k)		Covered
Long-Term Disability	Group LTD		Covered
Long-Term Care	Group LTC		Covered
Vacation	Vacation Plan B: 89.00 Hours		
Sick	297.00 Hours		

If you notice any discrepancies/errors to your originally submitted Open Enrollment documents, please contact **RCUH Employee Benefits** right away at: rcuh_benefits@rcuh.com or (808) 956-2326 or (808) 956-3100.

If you are having difficulty logging in to ESS or accessing the Benefits Summary page, please contact **RCUH HR Information Systems** at: rcuh_hris@rcuh.com.