

ANSWERS TO FREQUENTLY ASKED QUESTIONS ABOUT THE SAN FRANCISCO HEALTH PLAN

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Q1. WHAT IS THE SAN FRANCISCO HEALTH CARE SECURITY ORDINANCE (HCSO)?

A. San Francisco requires employers to either contribute to the SF City Option or make health care expenditures for each employee that meets the San Francisco Health Care Security Ordinance (HCSO) requirements. Robert Half provides qualified contract professionals, like you, the San Francisco Health Plan through The American Worker. Robert Half pays the full cost for the Plan, and you can cover your eligible dependents (spouse/ domestic partner, child) at no cost to you.

Q2. WHAT IS THE SAN FRANCISCO HEALTH PLAN?

A. The San Francisco Health Plan is a supplemental plan that provides supplemental coverage for certain healthcare services, such as doctor’s office visits, diagnostic X-rays and lab work, preventive care, hospital stays and surgical procedures. It helps offset out-of-pocket healthcare expenses, such as deductibles and coinsurance. The plan is not designed to replace comprehensive medical coverage. You can use

any provider for service but have access to the First Health Network, which provides discounts at in-network physicians and hospitals. The San Francisco Health Plan also includes Teladoc (on-demand medical experts by phone or video) and the AWP Value Rx prescription drug discount program. **While you are enrolled in this plan, Robert Half will not contribute to the SF City Option on your behalf.**

Beginning January 1, 2022, this plan will include coverage for preventive care and certain prescription drugs. New benefits include:

- Full coverage for preventive care services when using an in-network provider. This plan does not include coverage for medical services that are not considered preventive in nature, such as emergency room care, hospital stays or doctor’s office visits to obtain medical services that are not considered preventive in nature.
- Copays of \$5, \$10 or \$15 available for preferred generic drugs at in-network pharmacies (limited to the formulary drug list).

Q3. HOW DO I BECOME A “QUALIFIED CONTRACT PROFESSIONAL?”

A. You are eligible if you have worked for Robert Half for 90 days and work an average of eight hours per week in San Francisco. You will continue to be enrolled every month in which you work an average of eight or more hours per week, or at least 32 hours, in San Francisco during the prior month.

Q4. WHAT HAPPENS IF I BECOME A QUALIFIED CONTRACT PROFESSIONAL AND AM ENROLLED IN OTHER PLANS THROUGH THE AMERICAN WORKER?

A. If you are currently enrolled in the Preventive Care Plus Plan or the Group Hospital Indemnity Plan, then your coverage in those plans will be terminated and you will no longer have deductions taken from your paycheck. **You will be auto-enrolled in the San Francisco Health Plan, which provides greater coverage through the same carrier at no charge to you, if and when you meet the hours requirement to be eligible for the San Francisco Health Plan!** If you lose eligibility in the San Francisco Health Plan, you may re-enroll in the Preventive Care Plus Plan and/or the Group Hospital Indemnity Plan. See Q9 to the right for more information. While you are enrolled in the San Francisco Health Plan, Robert Half will not contribute to the SF City Option on your behalf.

If you are currently enrolled in voluntary coverage provided through The American Worker other than the Preventive Care Plus Plan or a Group Hospital Indemnity Plan, your coverage will continue without interruption.

If you are currently enrolled in the High-Deductible Medical Plan, you will not be enrolled in the San Francisco Health Plan.

If you choose to opt out of the San Francisco Health Plan, then Robert Half will make a contribution on your behalf to the SF City Option. See Q14 for information on opting out.

If you choose to voluntarily waive Robert Half's obligation to make an expenditure on your behalf, then Robert Half will not make a contribution on your behalf to the SF City Option and you will also not be enrolled in Robert Half's San Francisco Health Plan. You must fill out and submit a San Francisco Health Care Security Ordinance Waiver Form each calendar year if you wish to voluntarily waive contributions on your behalf. See Q15 for information on the voluntary waiver.

Q5. HOW DO I ENROLL IN THE SAN FRANCISCO HEALTH PLAN?

A. If you are a qualified San Francisco employee, you will be automatically enrolled. You will receive an email with information about your new coverage and instructions how to enroll eligible dependents (spouse/domestic partner, child).

While you are enrolled in the San Francisco Health Plan, Robert Half will not contribute to the SF City Option on your behalf.

Q6. HOW DO I ENROLL DEPENDENTS IN THE SAN FRANCISCO HEALTH PLAN?

A. If you and your dependents are currently enrolled in the Preventive Care Plus Plan or Group Hospital Indemnity Plan, you and your dependents will be automatically enrolled in the San Francisco Health Plan.

You can also enroll your dependents in the San Francisco Health Plan by using the **dependent form**, found on **roberthalf.gobenefits.net**. You will need the dependent's name, Social Security number, date of birth and gender. There is no cost for dependent coverage.

Q7. DO I HAVE TO DESIGNATE A PRIMARY CARE PROVIDER?

A. No. You have access to the First Health Network, which provides discounts with in-network physicians and hospitals. To find a provider, visit **www.FirstHealthLBP.com**. You also have the option to use a primary care provider of your choice that is not listed in the First Health Network; however, your out-of-pocket costs will be higher outside the network.

Q8. WHAT PHARMACIES CAN I GO TO?

A. To find drug pricing or locate a network pharmacy, visit **www.AWPValueRx.com**.

Q9. WILL I BE ABLE TO KEEP MY OTHER BENEFITS WHEN I AM ENROLLED IN THE SAN FRANCISCO HEALTH PLAN?

A. If you are enrolled in any other benefit plans with Robert Half, your coverage under those plans will not change. However, if you are currently enrolled in the Preventive Care Plus Plan or Group Hospital Indemnity Plan, your coverage under those plans will automatically end shortly after your San Francisco Health Plan benefits become effective and premium payments for those plans will no longer be deducted from your paycheck. See Q4 for more details.

Q10. I CURRENTLY HAVE A MEDICAL REIMBURSEMENT ACCOUNT (MRA) BASED ON RH'S PREVIOUS CONTRIBUTIONS TO THE SF CITY OPTION. WILL I STILL HAVE ACCESS TO MY MRA FUNDS?

A. Yes, you will still have access to your MRA. However, no new contributions will be made into your account, unless you opt out of the San Francisco Health Plan. Also, if you submit a voluntary waiver, no contributions will be made to your account.

Q11. HOW MUCH DOES THE SAN FRANCISCO HEALTH PLAN COST?

A. Robert Half pays the full cost of your San Francisco Health Plan for you and your enrolled eligible dependents. While you are enrolled in this plan, Robert Half will not contribute to the SF City Option on your behalf.

Q12. WHEN WILL MY COVERAGE THROUGH THE SAN FRANCISCO HEALTH PLAN TERMINATE?

A. The San Francisco Health Plan will terminate at the end of the month in which you do not meet the qualifying hours criteria—see Q3 for details. If you lose eligibility under the San Francisco Health Plan and wish to continue this coverage, you may enroll in the Preventive Care Plus Plan, Group Hospital Indemnity Plan or both, offered through The American Worker, or you may elect to continue the San Francisco Health Plan through COBRA. For more details about your continued coverage options, contact The American Worker at 1.855.495.1192.

Q13. WHAT HAPPENS IF I QUALIFY AGAIN?

A. If you meet the qualifying criteria in the month after which your San Francisco Health Plan coverage terminates, you will be re-enrolled. See Q4 for your options.

Q14. CAN I OPT OUT OF THE SAN FRANCISCO HEALTH PLAN AND ENROLL IN THE SF CITY OPTION?

A. You may opt out of the San Francisco Health Plan using the **Opt-out of Indemnity Health Plan Form**. By completing this form, you are opting out of the Plan and choosing to have Robert Half contribute to the SF City Option on your behalf.

Q15. CAN I WAIVE COVERAGE UNDER THE SAN FRANCISCO HEALTH CARE SECURITY ORDINANCE (HCSO)?

A. You can waive enrollment in the SF City Option by completing the **Health Care Security Ordinance Employee Voluntary Waiver Form**. By completing the form, Robert Half will not make the required HCSO contributions on your behalf to either the Robert Half San Francisco Health Plan or the SF City Option. Each year, you will be required to reaffirm your choice to voluntarily waive participation in the HCSO again by completing and submitting this form. You can revoke your voluntary waiver at any time.