

October 21, 2024

Dear Retiree,

Open Enrollment is your opportunity to consider whether your current benefit plans are the right choices for you and your family for the upcoming calendar year. During this time, you can enroll in, change or drop your current health plans.

Open Enrollment will begin Monday, October 21 and will end on Friday, November 1, 2024.

Enclosed are your 2025 Open Enrollment materials. Carefully review the information provided and decide if you want to make any changes to your benefits. Elections you make become effective on January 1, 2025 and remain in effect for the entire calendar year, unless you experience a qualifying life or family status change. **If you are making changes, the enrollment form must be received by Friday, November 8, 2024.**

Your current coverage will automatically continue for at the new rates for calendar year 2025. To enroll in, change or drop medical, dental and vision benefit plans, simply complete the Health Insurance enrollment form included in your packet. **PLEASE NOTE:** Dental and vision plans are only offered during the first ten years of retiree medical eligibility.

In an effort to ensure that our records are up-to-date, you will also find some additional forms. Please complete any of the following documents if you have experienced a recent change or feel that our information may not be current:

Health Insurance Enrollment Form – Please complete this form *only if* you are enrolling or changing your plan and/or your covered dependents.

Retiree Demographic Change Form – Please complete this form *only if* you need to notify us of a change to your name, address, phone, email address, etc. ***If you need to change your demographic information with SURS, you will need to contact them directly at 1-800-275-7877.***

Life Insurance Beneficiary Form – Please complete this form *only if* you would like to change your designated beneficiary or if you are not sure who you designated. *(This form is not included in your packet if you are no longer eligible for Retiree Life Insurance.)*

Your signed Health Insurance Enrollment Forms must be [received by Friday, November 8, 2024](#)
[and can be sent to:](#)

[City Colleges of Chicago](#)
[Office of Human Resources, Benefits Division](#)
[3901 South State Street](#)
[Chicago, IL 60609](#)
[Email: benefits@ccc.edu](mailto:benefits@ccc.edu)

Additional Information

The Centers for Medicare & Medicaid Services (CMS) requires employer to notify individuals eligible for Medicare Part D of whether or not the employer's prescription drug coverage is creditable. CMS defines "creditable coverage" as coverage which at minimum has the equivalent actuarial value of the Medicare Part D alternative. Please read the Creditable Coverage notice carefully and keep it where you could find it. This notice has information about your current prescription drug coverage with City Colleges of Chicago and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan.

If you have any additional questions, email the CCC Benefits Department at benefits@ccc.edu or call (312) 553-2895.

Regards,

City Colleges of Chicago
Benefits Division