

# Open Enrollment Instructions for 2023-2024

1. If you **DO NOT** wish to make any changes **NO** action is required, and all current benefits will continue as is.
2. If you wish to switch your dental plan please complete the dental form included, **sign, date** and scan & email/mail in as soon as possible.
3. If you wish to switch from any **Blue Shield Plan to Kaiser** please complete the Kaiser Enrollment Form, **sign, date**, scan & email/mail in as soon as possible.
4. If you wish to switch from **Kaiser to Blue Shield HMO or PPO** plans please complete the SISC Enrollment Form, **sign, date**, scan & email/mail in as soon as possible.  
**Please note on top of form what your current medical plan is and the plan you wish to switch to. (i.e. KP to BS PPO 90 C Plan)**
5. If you want to **switch between Blue Shield Plans** please send me the SISC Enrollment form **signed and dated** with ONLY the employee section completed and a note on top of the form stating which plan your currently on and which plan you'd like to switch to. (i.e. *BS PPO 90 C Plan to BS PPO 80 E Plan*). There is NO need to complete the rest of the form.
6. Mutual of Omaha Life Insurance Form (Please complete only if you'd like to update your beneficiary).

\*\*\*Additional Health & Welfare Benefit Resources and updated plan documents can be found on our website:

[www.rioschools.org](http://www.rioschools.org)

\* Departments

\*Human Resources Department

\*Employee Benefits

**Any questions or concerns please feel free to contact Maria G Ramirez via email at [mramirez@rioschools.org](mailto:mramirez@rioschools.org) or at 805-485-3111 x2136**