



Employee Health Benefits

Newsletter

Fall 2014

Attend a Benefits Workshop or CalPERS Webinar

LACCD will host workshops to present information on the benefit plans for employees at the times and locations listed below. Providers from the medical, dental, vision, life insurance, and EAP program will be available. The East LA session will be video archived for later playback after the September 25 live event. (The archived video link will be found on the LACCD Health Benefits website under **ACTIVES: Open Enrollment.**)

For details on the medical plans CalPERS offers, you can attend a prerecorded Health Plan Webinar at any time on the CalPERS website.

Benefits Workshops:

Thursday, September 18
11 a.m. – 2 p.m.
L.A. Valley College – Monarch Hill

Thursday, September 25
11 a.m. – 2 p.m.
East LA College – Recital Hall

Wednesday, October 1
11 a.m. – 2 p.m.
L.A. Harbor College – Technology Building
Room 110

2015 CalPERS Webinar

The 2015 Webinar on Health Plan Design, Rate, and Benefit Changes for plan year 2015 will be available to view online anytime in early September. Members may go to www.calpers.ca.gov and select the “Watch Videos and Web Events” shortcut. Next, select “Videos”, then “Health Benefits” to find **Presenting the 2015 CalPERS Health Plans.**

Learn, Decide, Act

LACCD OPEN ENROLLMENT: SEPTEMBER 15— OCTOBER 10, 2014

The time to reconsider your benefit choices and enroll for next year is fast approaching. Be sure to follow these steps to ensure you make informed enrollment decisions.

Learn

- Start by carefully reviewing this newsletter.
- For more detailed information on your District benefits, visit www.laccd.edu/Departments/BusinessServices/Benefits/Pages/default.aspx 24 hours a day. Be sure to click on your eligible group (active employees, adjunct faculty, or retirees) to learn about the plans that apply to you.
- If you have coverage questions, we encourage you to call your plan’s Member Services (see contact information on page 7).

Decide

- The CalPERS open enrollment packet was sent in late August to all active employees presently enrolled in medical plans. Review the information carefully. If you are keeping your present plans, you do not need to take any action.
- It is advisable to go to the SAP ESS Portal and review your choices on-line to confirm that your dependents and plans are as you wish them to be. Please print a confirmation for 2015!
- Review on the LACCD website your choices for dental plans and what is covered on vision.

Act

- Enroll from September 15 through October 10, 2014 using LACCD’s Employee Self-Service (SAP ESS) Portal (see page 6).

What do I need to do?

FULL-TIME ACTIVE EMPLOYEES — You do not need to enroll unless you want to change your benefit elections, participate in a Flexible Spending Account, or update your dependent information, life insurance beneficiaries, or address or warrant recipient designation (for where to send the last paycheck of deceased employee).

ADJUNCT FACULTY — If you do not cancel your health benefits plan during annual open enrollment, you will automatically stay in the same plan unless you lose eligibility. You will not be able to drop the plan until after you have been in it for another full calendar year, January 1 – December 31, 2015.

ABOUT HEALTH CARE REFORM

The District is in compliance with the Health Care Reform Affordable Care Act (HCR/ACA) and continues to provide you with affordable and comprehensive coverage to meet your health care needs. The Health Care Reform Affordable Care Act has several provisions which the District has already implemented, including:

- Essential health benefits, such as preventive care and immunizations
- No annual limits on essential health benefits
- Dependent children may be covered for health, vision and dental benefits to age 26
- Individual mandates that require most Americans to have health insurance or pay a penalty
- New Health Insurance Marketplace (Covered California)

About the Individual Mandate

Effective January 1, 2014, the individual mandate requires legal U.S. residents to buy a minimum level of health insurance coverage or pay a penalty for each month of non-compliance. The penalty equals the greater of \$95 per adult and \$47.50 per child (up to \$285 per family), or 1% of your family income. The penalty will increase significantly in 2015 and 2016. Some people will be exempt from the mandate and penalty due to religious, financial or other reasons, while others may be given financial assistance to help pay the cost of their coverage.

IMPORTANT INFORMATION FOR 2015

- Reference pricing is ONLY for Anthem Blue Cross PPO plans. This allows employees to be savvy consumers to compare out-of-pocket costs for many services (urgent but elective surgeries, for example). Since our basic PPO plans require a co-insurance of 20% for each service, it is important to shop for not only good surgeons, but hospitals with more reasonable costs.
- There is a [new website](#) where Anthem Blue Cross PPO consumers can sign up for CalPERS | Compare which will allow you to explore reference pricing on line. Please register at: www.calperscompare.com and click on the "Get Started Now" button on the upper right corner.
- Maximum-Out-Of-Pocket (MOOP) costs have been set by the Affordable Care Act as \$6,600/\$13,200 for individual/family for medical and pharmacy benefits COMBINED.
- The MOOP is the most you could pay in a coverage period (usually one year) for your share of the cost of covered services with participating providers in your PPO plan—presently \$3,000/\$6,000. But there was no MOOP for out-of-network providers and now there is!
- There is an addition of a MOOP limit on pharmaceuticals to be ACA compliant for HMO plans. HMO members previously had a \$1,500/\$3,000 limit on medical and no limit on the cost sharing they are subject to for pharmacy benefits. A cost sharing limit of \$5,100/\$10,200 now applies to pharmacy benefits.
- CalPERS annual open enrollment runs September 15 – October 10, 2014.
- Please keep in mind that children up to the end of the month of age 26 are eligible for CalPERS health benefits.

CalPERS MEDICAL PLAN CHOICES

The Los Angeles Community College District provides a generous and comprehensive benefits package to help you care for yourself and for your family. Medical care coverage is offered under the CalPERS health plans. Active employees and retirees under age 65 may choose from the medical choices listed below.

Your HMO Choices

The following HMO choices are available:

- Anthem HMO Select
- Anthem HMO Traditional
- Blue Shield Access+ HMO
- Health Net Salud y Mas
- Health Net SmartCare
- Kaiser HMO
- UnitedHealthcare
- Blue Shield NetValue HMO, which offers the same benefits as the Blue Shield Access + HMO but requires members to use providers in a smaller network of medical groups.

Your PPO Choices

- PERS Choice
- PERS Select
- PERSCare (Note: The cost of this coverage for full-time actives is not fully paid by the District.)

Important Consideration for PPO Plans: The PPO choices differ from each other mainly in their deductible, coinsurance percentage, out-of-pocket maximum and, in some cases, provider networks. (See the glossary on page 3 for a brief definition of these terms.) To find a plan physician or hospital, visit <http://www.calpers.ca.gov> and type in "Our Health Plans Online" in the search box.

- If you're an active employee or a retiree under age 65, the District will pay the full cost of HMO or PERS Choice PPO coverage for you and your eligible dependents.
- The premium for the PERSCare plan is higher and LACCD does not pay all the premium and the premium is higher than last year. For example, a single person will pay approximately an additional \$63.91 per month for the 90/10 plan.

YOUR DENTAL PLAN CHOICES

LACCD offers two dental plans: Delta Dental PPO and SafeGuard HMO.

■ **Delta Dental PPO dental plan** gives you the option of choosing any licensed provider. If you select a dentist who is a member of Delta Dental's PPO network, you have access to the PPO provider's discounted rates and reduce your out-of-pocket costs. Maximum allowances are based upon the number of years served. (Adjuncts have a maximum of \$1,000 regardless of number of semesters/years of work):

- Less than 5 years \$1,000
- 5 plus, but less than 10 years \$1,500
- 10 plus, but less than 15 years \$2,000
- 15 plus, but less than 20 years \$2,500
- 20 or more years \$3,000

■ **SafeGuard HMO** dentists provide services at little or no cost when you go to a dentist who is a SafeGuard HMO network member. The plan requires all enrolled dependents to select a primary care dentist to coordinate your care. Unlike the Delta Dental PPO, you cannot select out-of-network dentists.

YOUR VISION PLAN

LACCD offers vision coverage through VSP Vision Care (VSP), the nation's largest provider of eye care coverage. You can choose between VSP preferred providers and out-of-network providers. With VSP providers you have access to thousands of doctors across the country and receive higher level of benefits. Also, when you go to a VSP provider, you have the convenience of a lower payment at the time of service and no claim forms to fill out. You can find a VSP provider by going to www.vsp.com or by calling (800) 877-7195. Your provider will be able to access your membership information and bill you accordingly.

DEPENDENT ELIGIBILITY VERIFICATION PROJECT BEGINS IN DECEMBER

We know health care coverage is important to you and your family. To help control costs, CalPERS is conducting a project to ensure dependents enrolled in our health benefits program meet eligibility guidelines so that only eligible dependents are covered. Therefore, it is important to validate that your dependents meet CalPERS eligibility criteria and that you make necessary enrollment changes in a timely manner.

CalPERS has contracted with **HMS Employer Solutions** to manage this project and you will receive letters from them starting in the spring semester. There is a separate and concurrent on-going annual process of re-certification of the parent-child relationship for any individual acting in lieu of the natural or adopted parent. CalPERS will alert you before the one-year anniversary that coverage must be re-certified with the Parent-Child Relationship and sent to the LACCD with the necessary verification documentation..

Glossary of Health Plan Terms

80/20 and 90/10 plans — This is the ratio that the insurance will pay for your PPO coinsurance costs. As an example, if your minor surgery costs an allowable fee of \$1,000, on a PERSCochoice and PERSSelect plan the insurance company will pay \$800 and you will pay \$200 (80/20); on the PERSCare plan, the insurance company will pay \$900 and you will pay \$100 (90/10).

Deductible — This is the amount you must pay each calendar year before the plan will pay benefits.

Coinsurance — This is the percentage of your covered medical expenses you pay after meeting your deductible.

Copayment — This is a flat dollar amount you pay for medical services, such as the payment you make for a doctor's office visit.

Out-of-Pocket Maximum (MOOP) — MOOP costs have been set by the Affordable Care Act as \$6,600/\$13,200 for individual/family for medical and pharmacy benefits COMBINED. The MOOP is the most you could pay in a coverage period (usually one year) for your share of the cost of covered services with participating providers in your PPO plan—presently \$3,000/\$6,000. But there was no MOOP for out of network providers and now there is!

There is an addition of a MOOP limit on pharmaceuticals to be ACA compliant for HMO plans. HMO members previously had a \$1,500/\$3,000 limit on medical and no limit on the cost sharing they are subject to for pharmacy benefits and now have \$5,100/\$10,200 pharmacy limit.

Explanation of Benefits (EOB)— The EOB lists the service charges on a health care claim, how much your plan pays for and how much you must pay.

- When you go to see a PPO network doctor or have a prescription filled at one of the plan's participating pharmacies, you will pay a flat copayment and nothing else. If you visit a non-network doctor your costs will be higher (you pay deductible plus coinsurance instead of the flat copayment).
- Your coinsurance and out-of-pocket costs are lower when you go to PPO network providers.

HIPAA (Health Insurance Portability and Accountability Act) — This is the Federal Privacy law that gives you rights over your health information and sets rules and limits on who looks at and receives your health information.



YOUR HRA AND FSA BENEFITS

Health Reimbursement Account (HRA)

An HRA is a benefit plan that reimburses eligible active employees for qualified out-of-pocket expenses with tax-free dollars. The 2015 HRA is contingent upon Negotiations and Board of Trustee Agreement.

Log in to web portal regularly for HRA status update:

<https://portal.laccd.edu:50001/irj/portal>

Money in your HRA can be used to pay for qualified health expenses (deductibles, coinsurance, copayments, orthodontia, prescription eyeglasses and sunglasses, and contact lenses). You can also use your HRA to pay for long-term care insurance. Unused balances may be carried over from year to year up to IRS limits.

You will receive an HRA card that works much like a debit card except all expenses must be validated after swiping. You use the card to pay for eligible health care expenses at the doctor's office, pharmacy, or other retail establishments, including dental and vision. (The debit card draws from your health care FSA automatically once the HRA is used up.) The HRA is funded entirely with employer contributions. This means the District funds your HRA and you are not allowed to contribute your own money.

Flexible Spending Accounts (FSA)

A Flexible Spending Account is a benefit plan that allows eligible employees to withhold funds from their payroll before taxes are deducted. These funds are deducted on a tenths basis. The benefit of an FSA is that you can set funds aside on a pre-tax basis, which saves you money on eligible expenses.

There are two types of FSAs: a Health Care Account and a Dependent Care Account. Both accounts function separately.

- Health Care FSA , with a \$2,500 contribution maximum, allows you to pay for the same types of expenses that you use your HRA to pay (such as deductibles, coinsurance, copayments, orthodontia, prescription eyeglasses and sunglasses, and contact lenses).
- Dependent Care FSA , with a \$5,000 contribution maximum, is used to pay for child-care or care of an adult who has been declared disabled. Expenses must be necessary to allow the eligible employee to work (e.g. a single parent who pays for day care or a babysitter; or spouse who must pay for adult day care).

An eligible employee can choose both the Health Care FSA and Dependent Care FSA if needed. You can learn more about Health Care and Dependent Care FSAs, as well as eligible expenses at www.laccd.edu.

HOW THE HRA AND FSA WORK TOGETHER

When you have eligible expenses, you must use your HRA before any money can be withdrawn from your FSA. So, if you want to use both accounts, here's what you need to do:

1. Estimate your annual expenses.
2. If you expect to spend less than your HRA balance (\$1,500 + your prior years' balance), do not contribute to your Health Care FSA.
3. If you expect to spend more than your HRA balance, then it's a good idea to contribute to your FSA.
4. Use your debit card to pay for eligible expenses. Once your accumulated HRA balance is exhausted, accumulated funds will be withdrawn from your Health Care FSA.

If you plan carefully, the two accounts are easy to use together and you can drastically reduce your out-of-pocket health care costs!

YOUR OTHER INSURANCE BENEFITS

All active full-time employees are automatically covered by the basic life insurance and basic accidental death and dismemberment (AD&D) insurance plans. LACCD pays the full cost of these plans. Here is your basic employee coverage:

- **Basic life insurance** — If you die while covered by the plan, your beneficiary will receive a basic life insurance benefit of \$50,000.
- **Basic AD&D insurance** — If you die as a result of a covered accident, your beneficiary will receive an additional \$50,000. Benefits are also payable for certain severe injuries suffered in an accident.

Voluntary Life Insurance

In addition, you may purchase voluntary life insurance coverage for you and your family. Optional life insurance is available in \$10,000 increments, up to a maximum benefit of five times your annual earnings, or \$500,000, whichever is less. After your initial eligibility, if you enroll for the first time or choose to increase your coverage, you will be required to give satisfactory evidence of good health before the coverage over that amount will take effect. You pay the full cost of this coverage through after-tax payroll deductions.

Coverage for Your Family

If you purchase voluntary life insurance for yourself, you may also purchase coverage for your spouse/domestic partner and your dependent children.

- **Spouse/domestic partner** — Coverage is available in \$5,000 increments, up to a maximum benefit of 50% of your voluntary life insurance amount.
- **Children** — You may purchase \$1,000, \$5,000, or \$10,000 worth of coverage for your dependent children. (The benefit amount is \$100 for children less than six months old.)

OTHER VOLUNTARY BENEFITS THROUGH PAYROLL DEDUCTIONS

Transamerica—Whole Life with Long Term Care

The Transamerica whole life insurance benefit provides you with additional coverage during prime working years, but more importantly, its coverage that can follow you into retirement. This multifaceted benefit plan accumulates cash value, includes a terminal illness benefit, and a long term care benefit. You can borrow from the cash value or use it to elect a reduced paid-up policy with no more premiums due. **This is a one time opportunity to sign up with no physical exam or medical questions answered**, for employees up to \$100,000 and spouses up to a maximum of \$15,000. Benefit counselors be advise you on-line during open enrollment. More information on how to sign up is coming soon.



PET ASSURE

Pet Assure is the nation's largest Veterinary Discount Plan. For \$8 a month, you will save on all in-house medical services—including office visits, shots, X-rays, surgical procedures and dental care. Pet Assure covers every type of pet with absolutely no exclusions or medical underwriting. There are no claim forms, deductibles or waiting for reimbursements. Members enjoy unlimited discount usage.

- **Veterinary Care:** 25% savings on all medical services at participating veterinarians
- **Retail Savings:** 5% to 35% savings on pet products and supplies
- **Service Savings:** 10% to 35% savings on pet services such as boarding, grooming and training.
- **PALS:** A unique and highly successful 24/7/365 lost pet recovery service

How to Enroll in Pet Assure

Go to www.petassure.com

- Check online to see if your veterinary is in their discount network
- Go to SAP ESS Portal and enroll





HOW TO ENROLL ON THE SAP ESS PORTAL

Log on to the SAP ESS Portal

1. From a computer connected to the District Intranet, launch your Internet browser.
2. Go to www.laccd.edu (home page), and click the Faculty & Staff Resources link at the top of the page, then click on the Intranet (District Network Only) link on the lower left-hand side and click on the SAP ESS Portal (NEW) link on the top right side.
3. Enter your User ID. The SAP ESS User ID has been changed to a name-based account that uses the local part of your email address. For example, if your email is Smithj@email.laccd.edu, Smithj, which is the local part of your email address, is your SAP ESS User ID.
4. Enter your portal password:
 - a. If you already have an SAP ESS Portal account, your password will be the same as your SAP ESS password.
 - b. If you have an SAP ESS Portal account, you can use a temporary password to access the system using this formula:
 - Your 2-digit birth month (e.g., June = 06) +
 - The first letter of your last name +
 - The last 4 digits of your Social Security number.

Note: Because the District SAP ESS system changes passwords by AUTOMATICALLY expiring them every 60 days, you will need to follow the instructions indicated above in #4b.

Start Your Annual Enrollment

Once you're in the SAP ESS Portal, get started by clicking the Start Your Annual Enrollment button. You will be guided through a series of six steps.

At the end of the enrollment process, active full-time employees will have an opportunity to enroll in an FSA for 2015.

CONTACT INFORMATION

MEDICAL PLANS

CalPERS Health Benefit Program

(888) 225-7377

Monday—Friday, 8:00 a.m.— 5:00 p.m.

TTY (916) 795-3240

(for speech and hearing impaired)

www.calpers.ca.gov

DENTAL PLANS

Delta Dental

P.O. Box 997330, Sacramento, CA 95899

(800) 765-6003

www.deltadentalins.com

SafeGuard

P.O. Box 3594, Laguna Hills, CA 92654

(800) 880-1800

www.safeguard.net (plan code: 0150-d)

VISION PLAN

VSP

P.O. Box 997100

Sacramento, CA 95899-7105

(800) 877-7195

www.vsp.com

EMPLOYEE ASSISTANCE PROGRAM (EAP)

Managed Health Network (MHN)

(800) 327-0449 or online at

mhn.advantageengagement.com

login code: laccd

OTHER BENEFITS & COBRA INFORMATION

LACCD Health Benefits Unit

770 Wilshire Blvd.

Los Angeles, CA 90017

(888) 428-2980

Monday—Friday, 9:00 a.m.— 4:00 p.m.

[www.laccd.edu/Departments/](http://www.laccd.edu/Departments/BusinessServices/Benefits/Pages/default.aspx)

[BusinessServices/Benefits/Pages/default.aspx](http://www.laccd.edu/Departments/BusinessServices/Benefits/Pages/default.aspx)

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