

## **F.A.Q.**

### FREQUENTLY ASKED QUESTIONS BY ADJUNCT FACULTY REGARDING THE LACCD HEALTH BENEFITS PROGRAM

An Adjunct or Limited-Term faculty member employed with the District may purchase subsidized LACCD Health Benefits by paying the premiums via the Premium-Only Plan (POP) for medical, dental and/or vision coverage.

#### **Premium-Only Plan (POP)**

There are important features to the LACCD Health Benefits Program for adjunct faculty, known as the Premium-Only Plan:

- 1) the LACCD medical plans are group plans, so there is no age-rating (higher cost for older enrollees).
- 2) the program allows employees to have their insurance premiums deducted from their paycheck before taxes; and
- 3) the District contributes towards the cost of the medical premium and in some cases the dental and vision coverage, as well.
- 4) adjunct employees may choose to purchase dental and/or vision coverage without enrolling in the District's CalPERS medical plans.

#### **Who may enroll?**

An Adjunct or Limited-Term faculty member who has taught 3 semesters out of the previous 8 consecutive semesters with at least a .2 Full-Time Equivalent (FTE) load and who currently is assigned a .33 (or higher) FTE load may enroll in the CalPERS medical, District's dental and vision plans.

#### **What if I am eligible to enroll in other health insurance through another employer, Covered California, or my spouse's employer?**

If you meet the above eligibility requirements, you are entitled to enroll in the District's Health Plans regardless of your access to health coverage elsewhere. You may wish to compare the plan benefits, provider networks, and costs to decide which insurance plan(s) are best for you.

### **Where can I find information on the medical plans available and monthly cost?**

The District offers over 10 different medical insurance plans (administered by CalPERS). While many of these plans have names that may be familiar to you, from health insurance programs found in the open market (e.g. Anthem Blue Cross, Blue Shield, Kaiser), the benefits co-pays, maximum out-of-pocket, and provider networks may vary considerably. A group plan product may be different than an individual, private network plan, or a Covered California plan even if they are provided by the same company (e.g. Anthem Blue Cross). You can find information on the LACCD District Plans including dental and vision at: [www.laccd.edu](http://www.laccd.edu), click on Faculty and Staff, click on Health Benefits (the left side tab), and then click on the new website.

You can also read about and access the **CalPERS online comparison tool** of the 10 plans by going to: <https://calpers2016.chooser2.pbgh.org/>

Be sure to click on “Contracting Agency Employee” to get the correct cost information. The monthly “employer contribution amount” can be found at the top of the District’s premium rate sheets. Keep in mind that payroll deduction will be in “tenthly” (not monthly) amounts, since they are taken out of our ten paychecks.

### **What options are available for Dental & Vision coverage?**

The District provides a choice of two dental insurance programs for adjunct faculty:

- The MetLife (formerly Safeguard) plan is an HMO with in-network providers and more limited co-pay costs for enrollees.
- The Delta Dental is a PPO and has a larger network of providers who accept agreed-upon pricing. Enrollees may also use of out-of-network providers. Adjunct faculty have an annual maximum benefit of \$1,000/year.

For vision the District uses VSP.

There is no requirement to be enrolled in a medical plan to enroll in a dental or vision plan. Other family members may be enrolled under the employee’s plan.

### **Does the District contribute to the dental or vision premiums?**

- For Dental, the District contributes half of the individual premium cost for those adjunct faculty who are assigned an FTE of .50 or above. You must pay the remaining cost for you and your dependents.
- If you have an FTE load of .50 or above, you are also eligible to have District [full-premium] paid individual Vision coverage for yourself; you must pay for your dependents.
- If you drop below .50 FTE load at any time (but remain above .33 FTE load), then you will be required to pay the premium for your dental and/or vision plans, including dependents, until the end of the plan year, December 31<sup>st</sup>. You will be permitted to drop the coverage during the next annual Open Enrollment.

### **If I enroll do I get to continue in all the plans? What if I wish to change due to changes in my earnings?**

If your eligibility status changes because your assignment load goes below the minimum .33 FTE at any point during a plan year, your participation in the Premium-Only Plan will end. You will be offered COBRA, which permits continuation of benefits for 18 months; however, you will be responsible for all premiums plus an administrative charge of up to 2%. There is no District contribution.

Health benefits plans follow a calendar year (or plan year) January 1<sup>st</sup> to December 31<sup>st</sup> which differs from our academic year. Annual Open Enrollment for the upcoming plan year takes place from mid-September to mid-October of the previous fall (e.g. Open Enrollment for plan year 2017 takes place during fall 2016). Unless you cancel or change your plan choices for the following year, during annual Open Enrollment, you will be automatically enrolled in the same plan(s) for another year [e.g. 2017]. The LACCD has a policy of automatic roll-over for adjunct faculty during Open Enrollment. This **Open Enrollment period is your only opportunity to withdraw from, or change any of your benefit plans.**

Should your assignment level drop at some point during the plan year but yet, remain above .33 FTE load, you will be required to stay in the plan you

chose (IRS requirement).

***What if I become eligible mid-semester or I have a change in family circumstances that requires changing my plan(s)?***

You may become eligible mid-semester to enroll in the District's health benefit programs for a variety of reasons. You may also need to alter your coverage during a semester. These changes may be the result of receiving a late-start assignment during a semester (however intersessions do not count toward eligibility), losing coverage from a spouse, a birth or adoption, change in domicile for yourself or a family member. The full list of

***Qualifying Life Events*** that are covered can be found at:

<http://laccd.edu/Departments/BusinessServices/Benefits/Documents/Qualified-Life-Events.pdf>

You must contact the District's Health Benefits Unit (HBU) within 60 days of the ***Qualifying Life Event***, in order to receive District benefits under your eligibility.

NOTE: Loss of assignments or income is not considered a Qualifying Life Event and does not allow you to change your coverage level during a plan year.