Dear Faculty Retiree or Survivor:

LACCD has joined the CalPERS Health Benefit Program. Both CalPERS and CalSTRS retirees are eligible to enroll. You will receive an enrollment kit from CalPERS in the mail this week. Because the CalPERS Enrollment kit contains a great deal of information, there are some important things we want to highlight:

- LACCD will cover the entire cost of the premium, except for one plan for retirees and dependents under age 65 discussed on the next pages. Although many of the Frequently Asked Questions in the Kit discuss deductions from your pension checks, remember that CalPERS insures many agencies in which retirees contribute to the health insurance premium.
- There are SEVERAL items on the enrollment form that may be confusing.
 - ----The form asks for your bargaining unit- this is the unit you retired from i.e. faculty.
 - ---- The enrollment effective date is Jan. 1 2010.
 - ---- only fill in the name of the primary care physician if you are enrolling in the Blue Shield HMO.
- You must return your <u>CalPERS Health Benefits Retiree Enrollment Form</u> and the <u>Certification of Medicare Status</u> (if applicable) to CalPERS at the address provided on the form by October 31, 2009. Do not send it to the District.
- The District is still administering your dental and vision coverage. There is no need to complete any paperwork regarding this coverage, unless you wish to change your dental plan or change your dependents. If you wish to make a change to your dental plan call 888-428-2980.
- If you were unable to attend the CalPERS information sessions this summer, there is a video of that presentation posted at www.laccd.edu/health.

REMEMBER: Your Medicare status determines what plans you can enroll in.

RETIREES AND SURVIVORS UNDER AGE 65

You will be choosing one of six CalPERS "Basic" Plans. The faculty Guild recommends that you choose one of the following basic plans:

- PersCHOICE PPO
- Kaiser
- Blue Shield Access + HMO.

* IMPORTANT EXCEPTION, READ CAREFULLY:

If you are not enrolled in Medicare, and you choose the PersCARE PPO, you will be responsible for over \$3,800 of premium cost annually!! Although you are not eligible for Medicare, you may have a dependent who is. He or she will be enrolled in the Medicare version of the plan you choose. For example, if you choose the PersCHOICE PPO, your dependent will be enrolled in the PersCHOICE Medicare Supplement.

Health Reimbursement Accounts (HRAs)

All LACCD active employees and non-Medicare retirees will have access to Health Reimbursement Accounts. The purpose of these accounts is to offset qualified health expenses, such as deductibles and coinsurance, that are now a feature of some non-Medicare plans. You will receive more information about the HRA before January 1, 2010.

MEDICARE RETIREES AND SURVIVORS

You will be choosing one of the CalPERS Medicare Plans.

LACCD will cover the full cost of any of the CalPERS Medicare plans for retirees and survivors who are enrolled in Medicare Parts A and B.

If you wish to enroll in a PPO, and both you and your dependents are enrolled in Medicare, the District will pay the full cost of PersCARE PPO. The District will also pay the full cost of Kaiser Senior Advantage.

Keep in mind that the HMO plans are not available in all locations, so if you have a dependent who does not live with you—for instance, a child attending college in another state—make sure that coverage is available in his or her area.

IMPORTANT EXCEPTION, READ CAREFULLY:

If you elect the PersCARE Supplement to Medicare Plan, your dependents who are not Medicare-eligible will be enrolled in the Basic PersCARE PPO plan—and you will have to pay their premium. If you prefer a PPO plan and do not want to pay for your dependents' coverage, consider enrolling in the PersCHOICE Supplement to Medicare Plan.