

**A Brief Summary of
San Jose·Evergreen Community College District's
Health & Welfare Benefits**

ANTHEM BLUE CROSS (PPO) *Effective 07/01/2018*

Calendar Year Deductible - \$100/member; maximum of \$300/family

Provides 100% for covered expense incurred for treatment of illness, injury and condition, doctor's office visits, emergency and outpatient when services are provided by contracted Prudent Buyer (PPO) providers including but not limited to physicians and hospitals, less applicable co-payment/deductible. Office Visit co-payment is \$10.00 per visit. Services by non-PPO providers are not covered or up to the fee schedule only. Member must pay difference. Preventative Care does not require a co-payment. Ambulance co-payment is \$100. Emergency Room co-payment is \$100 per visit but waived if admitted directly from ER beyond observation. Some chiropractic and acupuncture services are covered. *Blue Distinction+* facility is required for hip, knee & spine surgeries; no out-of-network lab coverage. Navitus is the Rx provider: prescription drugs are \$5/\$20 co-payment for 30-day supply; if generic is available and brand is requested you pay copay + difference in cost; most generics are free at Costco. Mail order is available through Costco (90 day supply: generics free, \$50 brand). Coverage is nationwide. Eligible children can be covered to age 26 regardless of student or dependent status.

KAISER PERMANENTE (HMO)

No annual deductible

Provides diagnostic, surgical, and all emergency and prescribed hospital care, eye exams, physical exams and mental health care, less applicable co-payment. Office Visit co-payment is \$10.00 per visit, including outpatient surgery. \$10 copay for prescriptions (up to 100 day supply). Preventative care does not require a co-payment. Emergency Room co-payment is \$100 per visit but waived if admitted directly from ER beyond observation. Ambulance co-payment of \$50. All services must be performed at Kaiser Facilities and by Kaiser Physicians (exception – emergencies). Chiropractic and Acupuncture coverage through ASH Network (30 combined visits per year). Eligible children can be covered to age 26 regardless of student or dependent status.

DELTA DENTAL (SISC Dental) – eff 10/01/2018

No annual deductible

In this incentive plan Delta Dental pays 70% of contract allowance for covered basic services and major services during 1st year of eligibility and increases by 10% each year (to max of 100%) for each enrollee that visits a dentist once per year. The maximum benefit paid per calendar year is unlimited per person for services by PPO or Premier dentist. Prosthodontics (bridges, dentures) covered at 50%. Implants covered at 50% up to \$2,000 per year. Orthodontia covered at 100% up to \$3,000 lifetime maximum. Eligible children can be covered to age 26 regardless of student or dependent status.

VSP (SISC Vision) – eff 10/01/2018

Pays 100% of cost for contracted VSP ophthalmologists and dispensing opticians for eye exams every 12 months and glasses/contact lenses every 24 months. Plan pays for standard lenses and up to \$150.00 toward frames (\$80 at Costco). Plan pays minimal allowance of fees scheduled for non-contracted optometrists and opticians for services, lenses, frames and contact lenses. This plan does not cover medical treatment for eyes, i.e., cataracts; emergency or surgical eye care or lost/broken glasses. Eligible children can be covered to age 26 regardless of student or dependent status.

ANTHEM•EAP (Employee Assistance Plan for ALL Anthem and Kaiser covered employees) – eff 10/01/2018

Provides up to 6 visits per episode and unlimited telephonic consultations of confidential outpatient help/services for a wide range of personal and work-related concerns including referrals to licensed behavioral health professionals for counseling sessions, dependency and/or assistance in identifying appropriate community resources. Legal, Financial Planning, and discounted ticket/services also available. Eligible children can be covered to age 26 regardless of student or dependent status. Anyone residing in the employee's household may access these benefits.

LONG TERM DISABILITY INSURANCE

Please note: As a district employee, you do not pay into State Disability Insurance, nor does the District on your behalf.

Provides a monthly income benefit after 90-day waiting period or the end of paid leave, whichever comes last, if employee becomes medically disabled (as determined by physician) as a result of accident or illness occurring on or off the job. This pro-rated benefit pays up to two-thirds of monthly salary to a maximum determined by your classification (\$5,000 per month maximum for administrators, supervisors, confidential employees and full time faculty; \$2000 per month maximum for CSEA unit members).

BASIC LIFE, ACCIDENTAL DEATH & DISMEMBERMENT, AND DEPENDENT LIFE INSURANCE

This is a declining term life insurance policy. Pays a lump sum benefit in the event of loss of life, limb or sight. Amount of insurance benefit is based upon annual salary and age of employee. Spouse/Domestic Partner*, and dependent children from age 6 months to 21 (23, if full time student) maximum benefit amount is \$1,500.

Additional coverage (Supplemental Life) is available for purchase on a voluntary basis.

FLEXIBLE SPENDING ACCOUNTS (IRS Code Section 125)

Annual Medical Care Reimbursement Accounts allow you to be reimbursed for expenses like deductibles, co-pays for office visits, dental or vision expenses with pre-tax dollars (automatic carry over up to \$500 of unspent medical funds to the following plan year). Flex cards are available for payment. Dependent Care Reimbursement Accounts allow you to accumulate pre-tax funds to reimburse yourself for childcare or day care expenses for a dependent while you work. A Transportation Fringe Benefit Plan is designed for reimbursement on a pre-tax basis for expenses such as transportation in a commuter vehicle (special requirements must be met) or Transit passes.

EXPERT MEDICAL OPINIONS – Advance Medical

Advance Medical matches patients to doctors who are the leading experts on their specific conditions. Their doctors work with you to get the right diagnosis, and recommend the best path for treatment at no cost.

DEPENDENT ELIGIBILITY DOCUMENTATION

- Spouse –
 - Prior year's federal tax form that shows the couple was married (financial info may be redacted)
 - Marriage certificate for newly married couple where tax return is not available
- Domestic Partner -
 - Certificate of Registered Domestic Partnership issued by State of California.
- Children, Stepchildren, and/or Adopted Children up to age 26 –
 - Legal birth certificate or hospital birth certificate
 - Legal adoption documentation
- Legal Guardianship up to age 18 –
 - Legal Court Documentation establishing guardianship
- Disabled Dependents over age 26 –
 - Legal or hospital birth certificate; prior year's federal tax form that shows child is claimed as an IRS dependent; proof of 6 months prior creditable coverage; completed Disabled Dependent Enrollment Application

This summary is a brief review of benefits. Any discrepancies between the information contained in this document and the plan's Evidence of Coverage (EOC), the EOC shall prevail.