



RETIREE BENEFIT AT-A-GLANCE INFO For All Employee Types

(Not an Official Document or Contract or Employment Agreement)

This summary is intended for comparison and ease-of use purposes only and is NOT a guarantee of coverage. Please refer your Employment Agreement/Contract. Please also see the end of this document for helpful information.

FACULTY: AT-A-GLANCE BENEFITS

<u>GROUP A</u> <u>Hired Pre Sept 1, 1989</u>	<u>GROUP B</u> <u>Hired September 1, 1989</u> <u>through July 1, 2001</u>	<u>GROUP C</u> <u>Hired Post July 1, 2001 to</u> <u>Present</u>
Medical Plan: District pays full insurance premium for retiree and dependents enrolled at the time of retirement (i.e., cannot add a spouse after retirement)	Medical Plan: District pays up to the \$847 medical cap for the retiree and dependents enrolled at the time of retirement. Retiree pays for cost, if any, above medical cap.	Medical Plan: District pays up to the \$500 medical cap for the retiree and dependents enrolled at the time of retirement. Retiree pays for cost, if any, above medical cap.
For Medicare: Retiree must sign up for Part A and B through Medicare when they become eligible. Must show proof of Medicare to Human Resources. <ul style="list-style-type: none"> Part A - Paid by CalSTRS Part B - Paid by District up to the Standard Premium cost for retiree and eligible dependents. Must provide Payroll with Medicare form showing the cost then Payroll reimburses them quarterly. 	For Medicare: Retiree must sign up for Part A and B through Medicare when they become eligible. Must show proof of Medicare to Human Resources. <ul style="list-style-type: none"> Part A – CalSTRS may pay, Retiree to contact CalSTRS Part B – Paid by Retiree 	Medical Plan Expiration: Benefits are payable for the lesser of ten years, Medicare eligibility, or the death of the retiree. If the retiree dies while eligible for medical, dental and vision coverage, the District shall continue to provide such coverage for eligible dependents for six (6) months after the death of the retiree.
For Dental/Vision: <ul style="list-style-type: none"> Retiree must elect at the time of retirement. Cannot elect these benefits at a later date. Retiree pays the full cost. 	For Dental/Vision: <ul style="list-style-type: none"> Retiree must elect at the time of retirement. Cannot elect these benefits at a later date. Retiree pays the full cost. 	For Dental/Vision: <ul style="list-style-type: none"> Retiree must elect at the time of retirement. Cannot elect these benefits at a later date Retiree pays the full cost. Retiree and dependent(s) are dropped from dental/vision when they become ineligible for medical benefits.
Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.

CLASSIFIED: AT-A-GLANCE BENEFITS

<u>GROUP A</u> <u>Retired Pre July 1, 1999</u>	<u>GROUP B</u> <u>Hired Before June 30, 2001 and Retire Post July 1, 1999</u>	<u>GROUP C</u> <u>Hired Post July 1, 2001</u>
Medical Plan: District pays full insurance premium for retiree and dependents enrolled at the time of retirement (i.e, cannot add a spouse after retirement)	Medical Plan: District pays up to the \$847 medical cap for the retiree and dependents enrolled at the time of retirement. Retiree pays for cost, if any, above medical cap.	Medical Plan: District pays up to the \$500 medical cap for the retiree and dependents enrolled at the time of retirement. Retiree pays for cost, if any, above medical cap.
For Medicare: Retiree must sign up for Part A and B through Medicare when they become eligible. Must show proof of Medicare to Human Resources. <ul style="list-style-type: none"> • Part A – Paid by Retiree • Part B – Paid by Retiree 	For Medicare: Retiree must sign up for Part A and B through Medicare when they become eligible. Must show proof of Medicare to Human Resources. <ul style="list-style-type: none"> • Part A – Paid by Retiree • Part B – Paid by Retiree 	Medical Plan Expiration: Benefits are payable until Medicare eligibility or the death of the retiree. If a retiree dies while eligible for medical, dental, and vision coverage, the District shall continue to provide such coverage for eligible dependents for the retiree's remaining period of eligibility, not to exceed six (6) months.
For Dental/Vision: <ul style="list-style-type: none"> • Retiree must elect at the time of retirement. • Cannot elect these benefits at a later date • Retiree pays the full cost. 	For Dental/Vision: <ul style="list-style-type: none"> • Retiree must elect at the time of retirement. • Cannot elect these benefits at a later date • Retiree pays the full cost. 	For Dental/Vision: <ul style="list-style-type: none"> • Retiree must elect at the time of retirement. • Cannot elect these benefits at a later date • Retiree pays the full cost. • Retiree and dependent(s) are dropped from dental/vision when they become ineligible for medical benefits.
Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.

CONFIDENTIAL: AT-A-GLANCE BENEFITS

<u>GROUP A</u> <u>Retired Pre July 1, 1999</u>	<u>GROUP B</u> <u>Hired Before June 30, 2001 and Retire Post July 1, 1999</u>	<u>GROUP C</u> <u>Hired Post July 1, 2001</u>
Medical Plan: District pays full insurance premium for retiree and dependents enrolled at the time of retirement (i.e, cannot add a spouse after retirement)	Medical Plan: District pays up to the \$847 medical cap for the retiree and dependents enrolled at the time of retirement. Retiree pays for cost, if any, above medical cap.	Medical Plan: District pays up to the \$500 medical cap for the retiree and dependents enrolled at the time of retirement. Retiree pays for cost, if any, above medical cap.
For Medicare: Retiree must sign up for Part A and B through Medicare when they become eligible. Must show proof of Medicare to Human Resources. <ul style="list-style-type: none"> • Part A – Paid by Retiree • Part B – Paid by Retiree 	For Medicare: Retiree must sign up for Part A and B through Medicare when they become eligible. Must show proof of Medicare to Human Resources. <ul style="list-style-type: none"> • Part A – Paid by Retiree • Part B – Paid by Retiree 	Medical Plan Expiration: Benefits are payable until Medicare eligibility or the death of the retiree. If a retiree dies while eligible for medical, dental, and vision coverage, the District shall continue to provide such coverage for eligible dependents for the retiree's remaining period of eligibility, not to exceed six (6) months.
For Dental/Vision: <ul style="list-style-type: none"> • Retiree has option to self-pay for the active Confidential dental plan. • Retiree must elect at the time of retirement. • Cannot elect these benefits at a later date • Retiree pays the full cost. 	For Dental/Vision: <ul style="list-style-type: none"> • Retiree has option to self-pay for the active Confidential dental plan. • Retiree must elect at the time of retirement. • Cannot elect these benefits at a later date • Retiree pays the full cost. 	For Dental/Vision: <ul style="list-style-type: none"> • Retiree has option to self-pay for the active Confidential dental plan. • Retiree must elect at the time of retirement. • Cannot elect these benefits at a later date • Retiree pays the full cost. • Retiree and dependent(s) are dropped from dental/vision when they become ineligible for medical benefits.
Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.

BOARD MEMBERS: AT-A-GLANCE BENEFITS

<u>GROUP A</u> <u>Began After January 1, 1982 and Before January 1, 1995:</u>	<u>GROUP B</u> <u>Began After January 1, 1995</u>
Medical Plan: District pays full insurance premium for retiree and dependents enrolled at the time of retirement (i.e, cannot add a spouse after retirement).	The District shall not pay the health insurance premiums for this group or his/her dependents. All such former Board Members may continue to participate in the District's health benefits programs on a self-pay basis.
For Medicare: Retiree must sign up for Part A and B through Medicare when they become eligible. Must show proof of Medicare to Human Resources. <ul style="list-style-type: none"> • Part A - Paid by Retiree • Part B - Paid by Retiree 	
For Dental/Vision: <ul style="list-style-type: none"> • Retiree must elect at the time of retirement. • Cannot elect these benefits at a later date. • Retiree pays the full cost. 	For Dental/Vision: <ul style="list-style-type: none"> • Retiree must elect at the time of retirement. • Cannot elect these benefits at a later date. • Retiree pays the full cost.
Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.

ADMINISTRATOR: AT-A-GLANCE BENEFITS* (Rev 7/1/17)

GROUP A Hired Pre Sept 1, 1989	GROUP B-1 Hired September 1, 1989 through June 30, 1997	GROUP B-2 Hired After July 1, 1997	GROUP C Hired on or After January 1, 2014
Medical Plan: District pays full insurance premium for retiree and dependents enrolled at the time of retirement (i.e., cannot add a spouse after retirement).	Medical Plan: District pays up to the \$847 medical cap for the Retiree. Dependents enrolled at the time of retirement can remain on retiree's plan.	Medical Plan: District pays up to \$847 for retiree and dependents enrolled at the time of retirement. Coverage shall continue during retirement month-to-month based on one-year of medical benefits for each year of past service to District but no longer than the retiree's Medicare Age, whichever comes first.	Medical Plan: None. New employees to the District under this classification who are hired on or after January 1, 2014, will no longer receive any monetary contribution from the District for post-employment health benefits. Employees will be offered COBRA if eligible at the time of retirement/resignation.
For Medicare: Retiree must sign up for Part A and B through Medicare when they become eligible. Must show proof of Medicare to Human Resources. <ul style="list-style-type: none"> Part A - Paid by CalSTRS Part B - Paid by District up to the Standard Premium cost. Must provide Payroll with Medicare form showing the cost then Payroll reimburses them quarterly. 	For Medicare: Retiree must sign up for Part A and B through Medicare when they become eligible. Must show proof of Medicare to Human Resources. <ul style="list-style-type: none"> Part A – CalSTRS may pay, Retiree to contact CalSTRS if CalSTRS member. Part B – Paid by Retiree 	For Medicare: Dropped from our plans when Medicare eligible.	
For Dental/Vision: <ul style="list-style-type: none"> Retiree must elect at the time of retirement. Cannot elect these benefits at a later date. Retiree pays the full cost. 	For Dental/Vision: <ul style="list-style-type: none"> Retiree must elect at the time of retirement. Cannot elect these benefits at a later date. Retiree pays the full cost. 	For Dental/Vision: <ul style="list-style-type: none"> Retiree must elect at the time of retirement. Cannot elect these benefits at a later date. Retiree pays the full cost. Retiree and dependent(s) are dropped from dental/vision when they become ineligible for medical benefits. 	
Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.	Note: For all categories, retiree must meet other contract and/or Administrative Procedure eligibility requirements, such as required years of service/age, etc. Refer to contract/employment agreement or administrative procedure. This intended only as a helpful chart and is not an agreement.

* Administrators who previously served in non-administrative District employment shall, at their time of retirement, make a one-time election to select either (1) post-retirement health benefits they are eligible to receive by virtue of their administrative employment; or (2) post-retirement health benefits they are eligible

to receive by virtue of their prior non-administrative District employment, provided they satisfy all applicable terms and conditions to receipt of such benefits (crediting both years served in such capacity and years served in an administrative capacity). 1) An employee's date of hire is their first date of employment in a position qualifying for District-paid health insurance regardless of position classification; and (2) an employee's years of service shall be calculated on the basis of years served in a position qualifying for District-paid health insurance.

End of At-A Glance Chart

Medicare Definitions:

Medicare Part A (Hospital Insurance)

Part A covers inpatient hospital stays, care in a skilled nursing facility, hospice care, and some home health care.

Medicare Part B (Medical Insurance)

Part B covers certain doctors' services, outpatient care, medical supplies, and preventive services.

Medicare Part C (Medicare Advantage Plans)

A Medicare Advantage Plan is a type of Medicare health plan offered by a private company that contracts with Medicare to provide you with all your Part A and Part B benefits. Medicare Advantage Plans include Health Maintenance Organizations, Preferred Provider Organizations, Private Fee-for-Service Plans, Special Needs Plans, and Medicare Medical Savings Account Plans. If you're enrolled in a Medicare Advantage Plan, Medicare services are covered through the plan and aren't paid for under Original Medicare. Most Medicare Advantage Plans offer prescription drug coverage.

Medicare Part D (Prescription Drug Coverage)

Part D adds prescription drug coverage to Original Medicare, some Medicare Cost Plans, some Medicare Private-Fee-for-Service Plans, and Medicare Medical Savings Account Plans. These plans are offered by insurance companies and other private companies approved by Medicare. Medicare Advantage Plans may also offer prescription drug coverage that follows the same rules as Medicare Prescription Drug Plans. *Beginning January 1, 2016 the District offered retiree plans include non-Part D prescription coverage.*

Notes:

- Enrollment in retiree benefits waives any future opportunity for Cobra benefits.
- If a retiree chooses retiree benefits and drops any dependents from coverage upon retirement, that is a qualifying event for the dependents and the dependents must be offered Cobra.
- While employees are working, they are primary under Anthem Blue Cross, even if they are eligible for Medicare. The same is true for his/her spouse. Once an employee retires and is over 65, he/she will then become primary on Medicare and secondary on Anthem

Blue Cross. If a dependent is over 65, he/she will also become primary on Medicare and secondary on Anthem Blue Cross once the employee retires.

- Before their 65th birthday, the retiree will receive a notice from SISC that they need to enroll in Medicare Part A and B. Each Medicare eligible enrolled on the medical plan will need to enroll in Medicare Part A and B when they are eligible and will need to submit a copy of their Medicare card to the Human Resources office.
- For all retiree groups, the language in employment agreements regarding the rendering of a certain number of years of full-time or equivalent service to be eligible for retiree benefits refers to only time/service rendered as a medically benefitted/eligible employee, i.e., part-time service where an employee did not receive medical benefits does not count towards the years of service.