Benefits Guide 2023



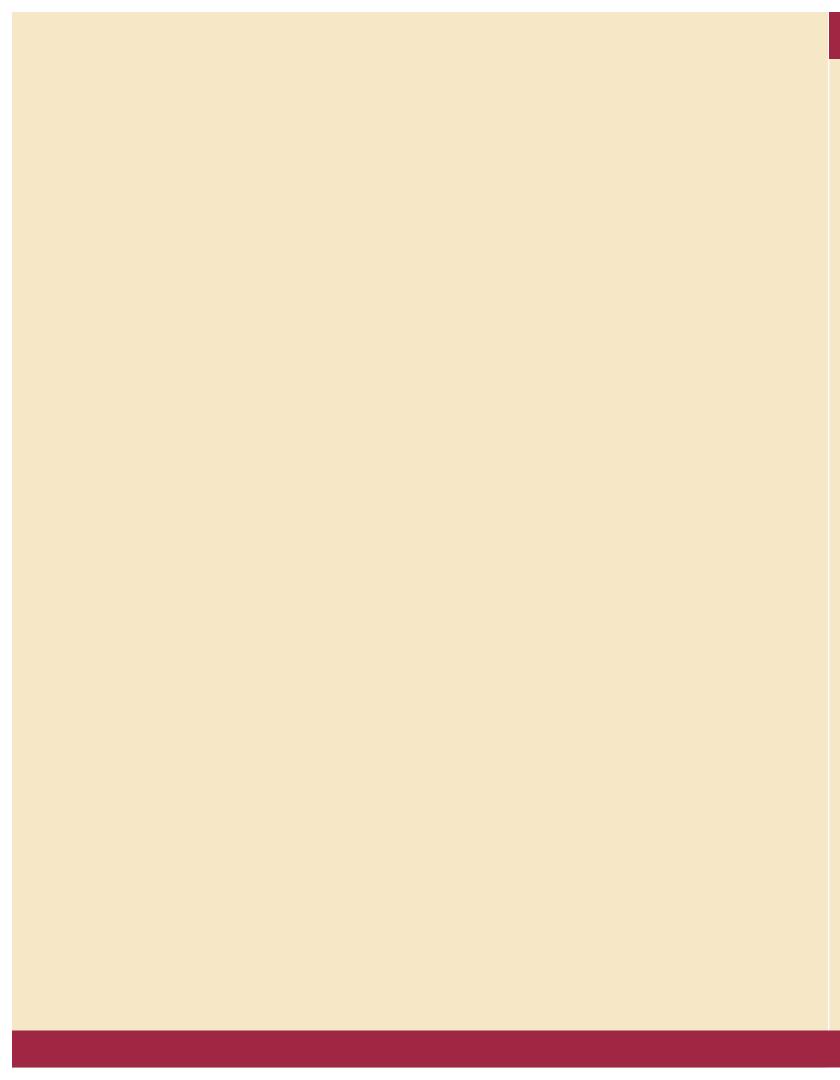


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2023 Open Enrollment

This guide is designed to give you an overview of the health and welfare benefits available to you and your family to help you understand your benefits. Please review the guide carefully and make sure to ask about any important issues not addressed. Each employee's benefits are personal to them and their situation. It is our goal to make sure you are getting the most from your benefit options.

The Benefits in this summary are effective: January 1, 2023 - December 31, 2023

Important Information about Your Benefits

- The District will provide the following contribution depending on your tier selection: 100% paid Kaiser Employee only coverage, pay 90% of the two-person and family, or pay the cost for United Healthcare Network #1 Employee only except for \$50 per month assuming your Full-time Equivalency (FTE) is 100%. Please see payroll deduction grid on Page 5 for your cost per month. If you were hired at a lower FTE, these amounts will be prorated to fit your work load.
- These funds will be directly applied to the benefits that you choose here at Southwestern College. If you are an Academic employee hired after January 1, 2005 or a Classified Employee hired after January 1, 2002, any funds not used for your benefits will be kept by the district.
- The items listed on the front of your Health and Welfare Selection form are benefits that can be covered under your cafeteria plan entitlement and can only be applied for or changed during an open enrollment period. Items listed on the back of the Selection form are voluntary deductions.
- Flexible Spending Accounts (FSA) are also available. To continue this benefit, you must re-enroll every year during the FSA open enrollment. Please visit American Fidelity to schedule an appointment.

How and When to Enroll

Open Enrollment runs from November 1, 2022 through November 15, 2022. This is your opportunity to make changes to your benefits selections without a qualifying event. **Changes can be made through ServiceNow.**

Enrollment for Part-time Faculty will take place in January and August.

Benefit coverages are governed by IRS guidelines. It is important to notify the Benefits Department right away if you have a qualifying event. You have 30 days to make the following changes:

- Birth, adoption, guardianship or custody orders
- Marriage, divorce, legal separation or termination of domestic partnership
- Death of spouse, child or other qualified dependent
- Changes in employment for employee, spouse or domestic partner that affects benefits coverage and/or loss of other coverage

Who is Eligible?

As a full time employee, you are eligible to enroll in the benefits outlined in this guide. You are able to enroll the following family members in your medical, dental and vision plans

- Your spouse (the person who you are legally married to under state law, including a same-sex spouse.)
- Your domestic partner (upon completion of a Domestic Partner Affidavit)
- Your children (including your domestic partner's children) who are:
 - Under the age of 26. They do not have to be living with you or currently attending school. They can be married and/or living on their own.
 - Over 26 years old ONLY if they are incapacitated due to a disability and primarily dependent on you for support.
 - Named in a Qualified Medical Child Support Order (QMCSO) as defined by federal law.
 - Court ordered legal guardian.

Adding a dependent to your plan requires dependent verification. You are required to provide the following documentation when you add an eligible dependent to your plan.

Who is Ineligible?

The following is a list of people who are not eligible for coverage (including but not limited to):

- Parents, grandparents, and/or siblings
- Residents of your household who are not listed above as an eligible dependent regardless of the fact that you claim them as a dependent on your taxes

Adding a dependent to your plan requires dependent verification. You are required to provide the following documentation when you add an eligible dependent to your plan.

Required Documentation

PLEASE SUBMIT COPIES ONLY & BLACK OUT ALL SOCIAL SECURITY NUMBERS & FINANCIAL INFORMATION. For your privacy and protection, any documents received will be destroyed.

Eligible Dependent Type

Legal Spouse

Eligible Dependent Definition

Legally married spouse

Required Documentation for Proof of Eligibility

- If "married filing jointly" first page Federal Tax Return form (1040, 1040A, 1040EZ, 8879 or 4868 - Extension Request)
 - If "married filing separately"
 first page Federal Tax
 Return form (1040, 1040A,
 1040EZ, 8879 or 4868)
 - Extension Request
- If married within the past two years - government-issued marriage certificate
- Note: Forms must be filed within the past two years, list names of both employee, AND spouse. If they do not, please contact us.

Eligible Dependent Type	Eligible Dependent Definition	Eligibility
Domestic Partner	Partner as defined by the Domestic Part- ner Affadavit	 Government-issued Certificate of Domestic Partnership Declaration of Domestic Partnership AND supporting documents to establish joint residence AND financial interdependence
Child - Biological	Biological child under the age of 26	 Government-issued Birth Certificate Consular Report of Birth Abroad (CRBA)
Child - Step	Biological child from a spouse's prior family under the age of 26	 Child documentation (biological/ adopted/guardianship/disabled) AND legal spouse documentation
Child - Adopted	Child under the age of 18 for whom you have legal guardianship	 Court Order of Legal Guardianship AND First page of Federal Tax Return form filed within the past two years
Child - Disabled	Disabled child over the age of 26 for whom you have the legal responsibility to care	 Letter from health care provider or doctor specifying the diagnosis and how the condition prevents the dependent from working/attending school full-time AND Child documentation (biological/step/adopted/guardianship)- Notice of disability determination from the Social Security Administration AND Child documentation (biological/step/adopted/guardianship)

Eligible Dependent Definition

Eligible Dependent Type

Required Documentation for Proof of

What if I have Other Coverage?

Mandatory Coverages

The District offers two mandatory coverages for all employees and are listed below:

- 1. Hartford Group Life Insurance Classified, Academic, Administrative, and Confidential employees receive\$50,000 in term life insurance.
- 2. Hartford Group Life Insurance Administrators receive \$75,000 in term life insurance.
- 3. Dental Insurance you have two choices (MetLife Dental or Delta Dental). You must elect one of the plans whether you have other coverage or not.
 - MetLife HMO or
 - Delta Dental PPO

If you have other medical coverage, you can choose to waive coverage with the District. You will be required to submit a waiver form.

There are no payroll deductions for these mandatory coverages.

The Hartford coverage provided by the District provides Estate Guidance. Go to the Benefits webpage to find more information on this added benefit.



Dental Insurance Options

MetLife Dental HMO

- Must choose a MetLife dentist.
- Coverage is based on a schedule of benefits where a co-pay is listed for each service that is intended.
- Specialty care handled through a referral process.
- Covers Orthodontic treatments (braces).
- Monthly premium is supercomposite, meaningit will cover the employee plus family for one low rate.

Delta Dental PPO

- Ability to choose any Dentist
- Coverage for most procedures is at 70% of thedelta dentist's fee for employee and any family members covered. This percentage increase each year (maximum 100%) for each enrolled, provided each see the dentist at least once a year. Otherwise the percentage remains the same.
- \$25 per person deductible per calendar year.
- Orthodontic treatment is NOT covered.
- Monthly premium is 3 tier. There is one rate for employee only, one for employee+1, and one for employee+2 or more dependents.

Dental ID cards are no longer issued by either insurance carrier however, if you would like to print a generic paper ID card please see below.

For your convenience.

An identification card is not necessary to access benefits, but you will receive a personalized DHMO ID card shortly after your enrollment has been processed. In the meantime, if you choose to enroll, this temporary ID Card can be used if you see your dentist after the effective date of the program, but before your card arrives.

▼ Cut along dotted line		
MetLife Temporary Identification Card for Dental Ben	SafeGuard DHMO efits	Ifyou have a dentale mergency, you should first contact your selected Safe Guard General Dentist for an immediate appointment. If your Dentist is not available, contact Customer
SubscriberName	Plan Name	Servicefor as sistance. If our office is closed, you can receive emergency dental carefrom any licensed dentist without prior authorization from Safe Guard. Please refer to your Evidence of Coverage for specific emergency care coverage.
Group	Group Effective	This card does not guarantee eligibility.
Dependent Coverage:		TDD/TTY for the hearing impaired: 1-800-880-3165
Customer Service: 1-800-880-1800 Benefits provided by SafeGuard Health Pla	ns, Inc., a MetLife company.	www.metlife.com/mybenefits
When prin	ting, please make sure you	ur page scaling is adjusted to "None." SafeGuard Health Flanc. 95 Enterprise, Sec. 200, Also Viejo, CA 92656

△ DELTA DENTAL **Enrollee Name:** SOUTHWESTERN COMM. COLLEGE DIS Group Number: 00912-00001 This card is for informational purposes and is not a guarantee of coverage. Please contact Delta Dental of California to confirm eligibility at the time of your appointment. Submit claims to: Delta Dental of California PO Box 997330 Sacramento, CA 95899-7330 Web Site: http://deltadentalins.com For Additional Information Please Call: 866-499-3001

Medical Insurance Options

The District will continue to offer Kaiser HMO, United Healthcare Performance HMO Networks #1, UHC Harmony, Alliance HMO, and United Healthcare Select Plus PPO. Contribution levels from the District for medical coverage will continue the same as last year. Payroll deductions are as follows:

PAYROLL DEDUCTIONS FOR BENEFIT PERIOD JANUARY 1, 2023 - DECEMBER 31, 2023

	10 month employees*					
	United HealthCare		re			
Coverage	Kaiser	UHC Harmony HMO	Network #1 HMO	Alliance 20/30 HMO	SignatureValue Alliance HMO	PPO
Employee Only	\$0	\$0	\$60.00	\$129.00	\$191.00	\$1,340.00
Employee + 1 dep.	\$172.40	\$218.40	\$365.40	\$479.40	\$530.40	\$2,880.40
Employee + 2 or more	\$243.10	\$298.10	\$503.10	\$658.10	\$719.10	\$4,034.10

	12 month employees*					
		United HealthCare				
Coverage	Kaiser	UHC Harnony HMO	Network #1 HMO	Alliance 20/30 HMO	SignatureValue Alliance HMO	PPO
Employee Only	\$0	\$0	\$50.00	\$107.50	\$158.00	\$1,116.00
Employee + 1 dep.	\$143.60	\$182.60	\$304.60	\$400.60	\$442.60	\$2,401.60
Employee + 2 or more	\$202.50	\$248.50	\$420.50	\$549.50	\$600.50	\$3,362.50

^{*}These payroll deductions will pay for medical, dental and life insurance coverages for full-time contracted employees (if you have less than a full-time contract, your share will be greater).

VISION- EyeMed				
Coverage 10 month employee 12 month employee				
Employee Only	\$9.83	\$8.19		
Employee+ 1 dep.	\$19.58	\$16.32		
Employee + 2 or more	\$29.58	\$24.58		

^{*****}These payroll deductions will begin on the December 16, 2022 paycheck for January coverage.



Southwestern Community College District 2023 HMO Plans

Effective Period: January 1, 2023 - December 31, 2023

Plan design changes highlighted in red

	NEW! UHC Harmony HMO	UHC Performance HMO B,	UHC Performance HMO B,	UHC Alliance HMO
Benefit Summary	\$10/100%	Network 1, \$10/100%	Network 2, \$20/\$500A	\$20/\$30/\$500A
	What You Pay	What You Pay	What You Pay	What You Pay
Medical Deductible (individual/family)	None	None	None	None
Medical Out-of-Pocket Maximum (individual/family)	\$1,500 / \$3,000	\$1,500 / \$3,000	\$5,000 / \$10,000	\$3,000 / \$6,000
Health Account	None	None	None	None
PCP Office Visit	\$10 copay	\$10 copay	\$20 copay	\$20 copay
Specialist Office Visit	\$10 copay	\$10 copay	\$20 copay	\$30 copay
Preventive Care	No charge	No charge	No charge	No charge
Inpatient Hospital Care	No charge	No charge	\$500 admit copay	\$500 admit copay
Mental Health Services (outpatient/inpatient)	\$10 copay / No charge	\$10 copay / No charge	\$20 copay / \$500 copay	\$20 copay / \$500 admit copay
Substance Abuse Services (outpatient/inpatient)	No charge	No charge	No charge	No charge
Outpatient Diagnostic Laboratory and Radiology (standard procedures)	No charge	No charge	No charge	No charge
Complex Radiology (PET & MRI)	No charge	No charge	No charge	\$200 copay
Outpatient Surgery	No charge	No charge	\$250 copay	\$250 copay
Outpatient Physical/Rehabilitation Therapy (Office Visit)	\$10 copay	\$10 copay	\$20 copay	\$20 copay
Chiropractic and Acupuncture Services*	\$10 copay	\$10 copay	\$20 copay	\$20 copay
Urgent Care (Office Visit only)	\$10 copay	\$10 copay	\$20 copay	\$20 copay
Emergency Room (Copay waived if admitted)	\$100 copay	\$100 copay	\$200 copay	\$150 copay
Rx Deductible (individual/family)	None	None	None	None
Rx Out-of-Pocket Maximum (individual/family)	\$3,000 / \$6,000	\$3,000 / \$6,000	\$1,600 / \$3,200	\$1,600 / \$3,200
Rx Formulary List	National Preferred	National Preferred	National Preferred	National Preferred
Rx Pharmacy Network	Express Advantage Network**	Express Advantage Network**	Express Advantage Network**	Express Advantage Network**
Short-Term Prescription Drugs*** (up to 30-day supply)	\$5 Generic \$25 PB 50% \$40 min \$175 max NPB	\$5 Generic \$25 PB 50% \$40 min \$175 max NPB	\$15 Generic \$30 PB 50% \$40 min \$175 max NPB	\$10 Generic \$30 PB 50% \$40 min \$175 max NPB
Long-Term Prescription Drugs*** (up to 90-day supply)	\$10 Generic \$50 PB 50% \$80 min \$350 max NPB	\$10 Generic \$50 PB 50% \$80 min \$350 max NPB	\$30 Generic \$60 PB 50% \$80 min \$350 max NPB	\$20 Generic \$60 PB 50% \$80 min \$350 max NPB
Available Medical Groups	Sharp Community Medical Group, Sharp Rees-Stealy Medical Group, UC San Diego Medical Group	Optum - Formerly Primary Care Associates, Rady Children's Health Network, Sharp Community Medical Group, SCMG - Arch Health Partners, Sharp Rees-Stealy Medical Group	Greater Tri-Cities IPA, Mercy Physicians Medical Group, Rady Children's Health Network, Scripps Physician Medical Group	Optum - Formerly Primary Care Associates, Rady Children's Health Network, Scripps Clinic, Scripps Coastal, Scripps Physician MG, UC San Diego Medical Group

Infertility services are excluded/not covered under non-Kaiser HMO plans and are included/covered under Kaiser HMO (excluding Kaiser Bronze) plans, please see your policies for details.

Disclaimer: Prepared by Gallagher Benefit Services, Inc. on behalf of VEBA.

This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all the terms, coverages, exclusions, limitations, and conditions of the actual contract language. The policies themselves must be read for those details. The intent of this document is to provide you with general information about your employee benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be directed to your Human Resources/Benefits Department.

^{*}Chiropractic services have no annual visit maximums, must be medically necessary and may be subject to prior authorization from OptumHealth. This also applies to Acupuncture services if elected by your employer, as it is optional.

^{**}Pay standard copays if you fill your prescription at an EAN Pharmacy (EAN Pharmacies include Rite Aid, Costco, Ralphs, Kmart, Vons, Haggen, Safeway, SuperValue, WinnDixie, Walmart, and many independent pharmacies) visit www.Express-scripts.com for a complete list of EAN pharmacies.

^{**}Pay standard copays plus \$5/prescription if you fill your prescription at a non-EAN Pharmacy (Non-EAN Pharmacies include CVS, Walgreens, and certain independent pharmacies).

^{**}You will pay the Retail Refill Allowance (RRA) penalty (equal to 2 times short-term medication copay for 30-day supply) if you fill long-term prescriptions at a network pharmacy other than Smart90.

^{**}Copays waived for preferred generic hypertension, hypoglycemic, and cholesterol medications purchased at mail or Smart 90. This does not include normal retail use or brand drugs.

^{***}G = Generic, P = Preferred, B = Brand, PB = Preferred Brand, NPB = Non-preferred Brand, S = Specialty



Southwestern Community College District 2023 HMO Plans

Effective Period: January 1, 2023 - December 31, 2023

Plan design changes highlighted in red

	UHC Alliance HMO	Kaiser HMO \$10,
Benefit Summary	\$1,200 HRA	Rx: \$10 / \$10 100-day
	What You Pay	What You Pay
Medical Deductible (individual/family)	\$2,000 / \$2,000	None
Medical Out-of-Pocket Maximum (individual/family)	\$3,000 / \$6,000	\$1,500 / \$3,000
Health Account	OptumBank HRA \$1,200	None
PCP Office Visit	\$35 copay	\$10 copay
Specialist Office Visit	\$50 copay	\$10 copay
Preventive Care	No charge	No charge
Inpatient Hospital Care	20% coinsurance (after deductible)	No charge
Mental Health Services (outpatient/inpatient)	\$40 copay / 20% coinsurance (after deductible)	\$10 copay / No charge
Substance Abuse Services (outpatient/inpatient)	No charge	\$10 copay / No charge
Outpatient Diagnostic Laboratory and Radiology (standard procedures)	No charge	No charge
Complex Radiology (PET & MRI)	20% coinsurance (after deductible)	No charge
Outpatient Surgery	20% coinsurance (after deductible)	\$10 copay
Outpatient Physical/Rehabilitation Therapy (Office Visit)	\$35 copay	\$10 copay
Chiropractic and Acupuncture Services*	\$30 copay	\$10 copay
Urgent Care (Office Visit only)	\$35 copay	\$10 copay
Emergency Room (Copay waived if admitted)	\$300 copay (after deductible)	\$50 copay
Rx Deductible (individual/family)	None	None
Rx Out-of-Pocket Maximum (individual/family)	\$1,600 / \$3,200	N/A
Rx Formulary List	National Preferred	Kaiser
Rx Pharmacy Network	Express Advantage Network** Kaiser	
Short-Term Prescription Drugs*** (up to 30-day supply)	\$10 Generic G / B: \$10 copay \$30 PB (up to a 100-day sup) 50% \$40 min \$175 max NPB	
Long-Term Prescription Drugs*** (up to 90-day supply)	\$20 Generic	
Available Medical Groups	Optum - Formerly Primary Care Associates, Rady Children's Health Network, Scripps Clinic, Scripps Coastal, Scripps Physician MG, UC San Diego Medical Group	Kaiser

Infertility services are excluded/not covered under non-Kaiser HMO plans and are included/covered under Kaiser HMO (excluding Kaiser Bronze) plans, please see your policies for details.

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^{**}You will pay the Retail Refill Allowance (RRA) penalty (equal to 2 times short-term medication copay for 30-day supply) if you fill long-term prescriptions at a network pharmacy other than Smart90.

^{**}Copays waived for preferred generic hypertension, hypoglycemic, and cholesterol medications purchased at mail or Smart 90. This does not include normal retail use or brand drugs.

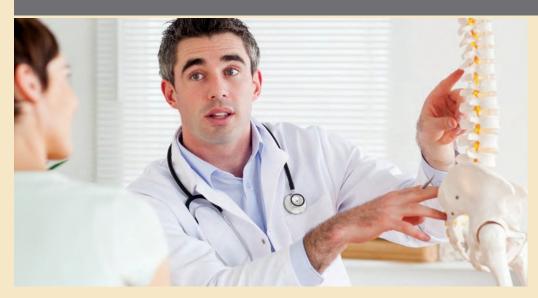
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Physical Health of California

VEBA Chiropractic/Acupuncture CaliforniaMember Benefits





As part of VEBA, your eceive chiropractic and/or acupuncture benefits as long as you receive care from participating OptumHealth Physical Health of California (Optum) providers. Your benefits include:

- Unlimited visits (subject to medical necessity)
- Copays that align with your PCP office visit copay
- · X-rays as authorized
- 100% coverage for durable medical equipment up to \$50

If your PCP copay is:	Your Chiropractic/Acupuncture copay is:
\$0, \$5, or \$10	\$10
\$15, \$20, or \$25	\$20
\$30, \$35, or \$40	\$30

Only Optum chiropractors and acupuncturists are eligible for reimbursement under the plan. So, before you receive services, please verify that your chiropractor or acupuncturist still participates with Optum.

Three ways to find a provider.

Yourhealth plan coverage gives you access to more than 3,000 network providers in California. Here are three easy ways to find a contracted provider near you:

- 1. Go to the Provider Locator search at www.myoptumhealthphysicalhealthofca.com a. To identify a participating provider, look for "VEBA" in the list in the column headed "Participating Provider for:"
- 2. **Call Optum Member Services at 1.800.428.6337** (5 a.m. to 5 p.m., Pacific Time, Monday Friday) for the most current and up to dateinformation.
- 3. **Call the provider directly** to schedule an appointment, and verify they are part of the Optum network for VEBA.



What is California Schools VEBA?

When you enroll in a medical plan you are automatically a member of California Schools VEBA. Below is a snapshot of what VEBA offers:



THINGS TO KNOW ABOUT YOUR VEBA BENEFITS

MOBILE BENEFITS

Make your health care interactive



Log on to VEBAonline.com and check out our new look! The refreshed site features a personalized member experience and improved functionality.

Go to: VEBAonline.com



Take your health care on the go! Your one-stop shop for all of your benefit information. Get personalized reminders, contact favorite providers and track your upcoming health events.

Download now:







Virtual Visits (UHC members)

A virtual visit lets you see and talk to a doctor from your mobile device or computer. Cost share will vary depending on your plan.

Visit: doctorondemand.com amwell.com

Kaiser Telehealth (Kaiser members)

Schedule a phone or video appointment to connect to a doctor at your convenience. Your regular office copay will apply. Call anytime to receive clinical care in the moment.

Visit: **kp.org/getcare**

HEALTH BENEFITS

Be the best you can be



Call your doctor to schedule your free wellness visit. Keep track of the screenings you need. Call your health plan for benefits information.

Kaiser Members: **800-464-4000**

UnitedHealthcare Members: **888-586-6365**



Get convenient care from Kaiser staff. No appointment necessary and non-Kaiser members are welcome.

Visit: kp.org/scal/targetclinic

Out of network urgent care facility for non-Kaiser members.



Access more benefits information by visiting **VEBAonline.com**

ADVOCACY BENEFITS

Work together



When your doctor or health plan can't help you, call VEBA's Advocacy Office. They'll help you resolve benefit issues and find ways to get more timely appointments.

Call: **888-276-0250** or email: **VEBAadvocacy@mcgregorinc.com**



Get through life's challenges with counseling, budgeting and legal advice, child and eldercare support, and more.

Call: **888-625-4809** or visit: **LiveAndWorkWell.com** (access code: VEBA)



Expert second opinion service to ensure members receive the right treatment at no cost. Oncology Insight with Watson is a new offering from Best Doctors that partners leading oncologists with the most advanced in cognitive technology.

Call: **866-904-0910** or visit: **members.bestdoctors.com**

WELL-BEING BENEFITS

Treat your mind, body and spirit



Take advantage of the most comprehensive body composition testing on the market with our SECA machine. Assess your health risks and learn about wellness solutions. Contact your district to see if the machine is coming your way or schedule a personal screening by emailing VEBA directly.

 ${\bf Email: VEBAwellness@mcgregorinc.com}$



The VRC offers comprehensive well-being care by addressing emotional, social, financial and physical health. Services include holistic care, yoga, cooking classes, health coaching and more.

Email: VRC@mcgregorinc.com

Vision Insurance

EyeMed

- Most of the medical plans offers discounted vision insurances, but if you are looking for a more comprehensive plan, EyeMed is the right choice.
- EyeMed monthly premiums are three-tiered and are listed on the Health and Welfare Selection form.

BENEFITS

- Ability to use the frame and contact lens allowances in the same benefit year worth up to an extra \$125.
- Separate contact lens fit & follow-up coverage (leaving the entire allowance for materials).

Voluntary Benefits

Accident, Cancer, and Personal Accident

Accident Plan Cancer Care Hospital/Sickness Indemnity

Accident Indemnity Plans are designed to provide funds to help cover the extra expenses associated with an accident: accident emergency treatment, accident follow-ups, accident hospitalization and specific injuries. Each plan pays you directly in addition to any other insurance that you may have.

Cancer care plans assist with out-ofpocket costs often associated with a covered cancer diagnosis. Coverage is available for you and any eligible dependent. The plans pay in addition to your health insurance and pay depending upon different plan levels. Preventative "wellness" benefits are also a part of most plans. Hospital/Sickness Indemnity plans are designed to provide funds to cover the extra expenses associated with a hospital stay or illness. The plan pays in addition to your health insurance. Difference levels of coverage are available depending on your needs.

Offered by:

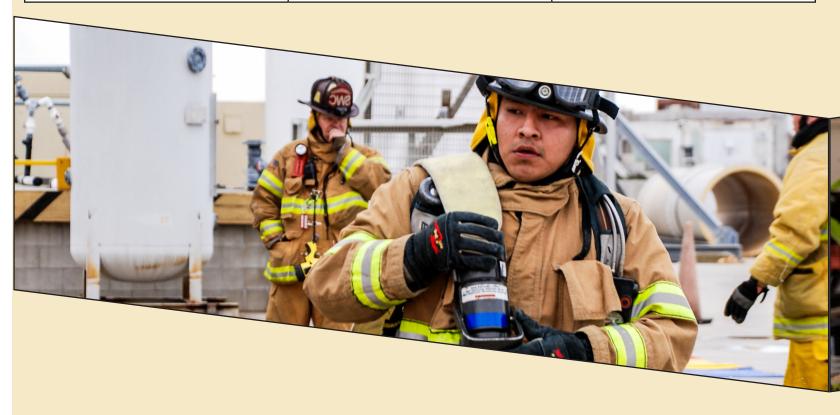
- AFLAC
- American Fidelity

Offered by:

- AFLAC
- American Fidelity
- Pacific Educators

Offered by:

AFLAC



Disability Insurance

Your income is a very important asset. Disability insurance will provide you the income protection that you may need in the event that you are not able to work due to accident or illness. You may review these plans and choose one that works for you or decide not to elect one at this time.

AFLAC

- Create a plan design specific to your individual needs by selecting a monthly benefit amount up to \$5,000.
- Waiting period of 0 or 7 days from date of disability.
- Renewable coverage to age 75.
- May not exceed 60% of average earnings per month.
- Short-term period of 6 months.
- Combined payout could be 100% or above salary when all disability insurances are considered (differential pay, extended sick leave)

American Fidelity

- Create a plan design specific to your individual needs by selecting a monthly benefit amount up to \$6,000.
- Choose from a waiting period of 15, 30, or 60 days from date of disability.
- Renewable coverage to age 70.
- May not exceed 60% of your monthly wage or salary.

Pacific Educators

- Tailor made personal coverage based on choice of monthly benefits and how long you would want your benefits to continue.
- May not exceed 60% of your monthly wage or salary (up to \$3,500 per month).
- Combined payout could be 100% or above salary when all disability insurances are considered (differential pay, extended sick leave, S.T.R.S., disability)



Supplemental Life Insurance

In addition to the mandatory life insurance, you can also purchase supplemental life insurance, above and beyond the mandatory amount. Enrollment forms and pricing can be found online on the <u>Benefits Department website</u> under Life Insurance.

Hartford MetLife American Fidelity

- Amount decreases with age, but premium remains the same.
- Will reduce at age 70 to 50% of the insurance amount and age 75 it will reduce to 30% of amount.
- For all benefit amounts, a health questionnaire or medical examination must be approved.
- 3 unit maximum per employee, not to exceed \$250,000.

- Amount stays the same but premium increases with age in January of each year.
- For all benefit amounts, a health questionnaire must be filled out.
- May not exceed \$500,000 or 5 times higher than annual salary. Spouse is entitled is 50% of employee's insurance.
- Whole and term life for employee and spouse.
- Amounts and premiums stay the same.
- Minimum health questions.
- Must meet with an AFA representative to enroll.



Accidental Death and Dismemberment Insurance (AD&D)

Accident insurance can help you pay expenses if you and your spouse are seriously injured or killed in a covered accident.

American Fidelity

- Family plan insures spouse 50% and children are entitled to 20% of the employee's amount.
- Choose from one of four different plan designs.
- Renewable up to age 70.
- Subject to exclusions and limitations.

MetLife

- Coverage available up to \$500,000, not to exceed 10 times your annual salary.
- Family plan insurance 50-60%, depending on if children are covered. Children are entitled to 10% of employee's amount.
- Subject to exclusions and limitations.



Long-Term Care Insurance

- Offers long-term care to employee and employee's family members (spouse, parents (in law), and grandparents (in law), iin case of chronic illness, injury, or advancing age.
- Eligible family members must complete medical questionnaire and in some cases, a face-to-face assessment.
- Waiting period of 90 days before benefits become payable.
- You can choose from Long-Term Care/Nursing Facility and Assisted Living Facility. LTC/Nursing Home Facility can be \$1,000 \$6,000. Assisted Living Facility is 60% of LTC Facility monthly amount.
- Individual cost of insurance depends on age and options that you can choose.

Please see the following link for: information regarding long-term care, UNUM policy details, and UNUM enrollment materials: www.unuminfo.com/consortium

Tax-Sheltered Annuities (TSA's)

- You are also given the opportunity to participate in 403b and 457 plans.
- TSA's offer you the ability to defer money, tax-free from your paycheck to begin saving for retirement.
- The forms are available in the <u>Benefits Department website</u>. Once you have the forms you can give them to your broker and/or financial consultant to fill out. If you do not have a broker/financial consultant, we have a district representative, for the Empower Fringe Benefits Consortium plan (FBC). You can set up a virtual appointment with Empower to help answer any questions and get a plan started for you.
- If you would like to contact our FBC representative, Anna Bernardo, please call (619) 417-4122 or set your Virtual Appointment by clicking on the link fbc_ab_virtual.empowermytime.com

Changes to your TSA can be made at any time not just during open enrollment. If making changes to your current 403(b) and/or 457 please submit a Salary Reduction Agreement (SRA) to the Benefits Department.

All SRAs must be submitted by the first of the month in which you are requesting the change.

You can now submit changes online by going into pa.schoolsfirstfcu.org.

The 2023 Maximum contribution for TSA's is \$22,500 per year. If you are over the age of 50, you may contribute up to \$30,000 per year. Please visit www.fbcretire.com to learn more about these plans.



Flexible Spending Accounts (FSA)

The District will continue to offer an FSA plan through American Fidelity. You will need to re-enroll on an annual basis during open enrollment to continue this benefit. Any election you make during this open enrollment will take place January 1, 2023.

What is a Health Care Flexible Spending Account?

HealthCare FSAs allow you to contribute pre-tax dollars to pay for qualified health care related expenses. Simply choose the amount you would like to be deducted, and the funds are set aside to be used for eligible expenses throughout the year. The maximum amount you may contribute for 2023 is \$3,050.

Dependent Daycare Account FSAs can save you money by allowing you to set aside part of your pay, on a pre-tax basis, to reimburse yourself for incurred eligible dependent care expenses. Because your money goes into the account before income taxes are withheld you pay less in taxes. The maximum amount you may contribute for 2023 is \$5,000.

If you are interested in enrolling in either account you can schedule your appointment online at American Fidelity.

Please keep in mind that if you do not file claims for reimbursement, you may lose the unused amount remaining in your account at the end of the plan year. This is often referred to as the "use-it-or-lose" rule. You will have a grace period of 90 days after the plan year ends to submit claims to American Fidelity.



Employee Assistance Program (EAP)

Southwestern College offers Employee Assistance Program (EAP) through OPTUM for (employees enrolled in the medical plan) and Aetna (for those employees who are not enrolled in a medical plan with the district). Both EAP plans are designed to assist with short-term counseling needs, as well as tools to manage the challenges of everyday life. EAP offers quick and easy access to confidential, professional relationships, substance abuse, legal and financial concerns.

You and everyone who lives in your household, regardless of their relationship to you, are eligible to utilize their service. You may be entitled to face-to-face or telephonic consultations for a wide range of emotional health, family, and work issues including:

- Alcohol and drug dependency
- Depression
- Domestic violence
- Grief and loss
- Marriage, relationship and family problems
- Stress and anxiety

In addition, the EAP Plans provides the telephonic consultation on the following work and life services:

- Childcare and eldercare assistance
- Daily living services
- Financial services
- Identity theft recovery services
- legal services

All services are confidential and in accordance with professional ethics and federal and state laws.

Online Member Services

EAP information and tools are available online.

OPTUM EAP plan

(For employees enrolled in the districts medical plan)
CALL TOLL -FREE ,24 HOURS A DAY, SEVEN DAYS A WEEK
1-888-625-4809

OR

Logon to: liveandworkwell.com

Access Code: VEBA

AETNA EAP Plan

(For employees <u>NOT</u> enrolled in the districts medical plan) CALL TOLL-FREE, 24 HOURS A DAY, SEVEN DAYS A WEEK (800)342-8111, TTY: 711

OR

Visit: resoucesforliving.com
Username: SWC and Password: EAP





Announcing – New Voluntary Legal Service Benefit Program

The MetLife Legal Plan & MetLife Legal Plan Plus Parents

As a benefit eligible employee of *Southwestern Community College District*, you are eligible to participate in a newly offered pre-paid legal plan available through MetLife Legal Plans.

MetLife Legal Plans, a MetLife company, is the nation's leading provider of group legal plans. A MetLife legal plan is now available at over 3,000 organizations in the U.S. including over 200 Fortune 500® companies.

The plan includes unlimited telephone advice and office consultation with a local attorney. By using a Participating Attorney, there are no claims forms or out-of-pocket expenses for the attorney's fees. Please refer to the attached flyer for services.

If you elect to enroll, you must remain enrolled in the plan for a minimum of one full plan year (12 months).

To pick up information or to sign up, please stop by the Open Enrollment Kick Off Event on October 31 between 11:00 – 2:00 and visit with the representative at the MetLife Legal table.

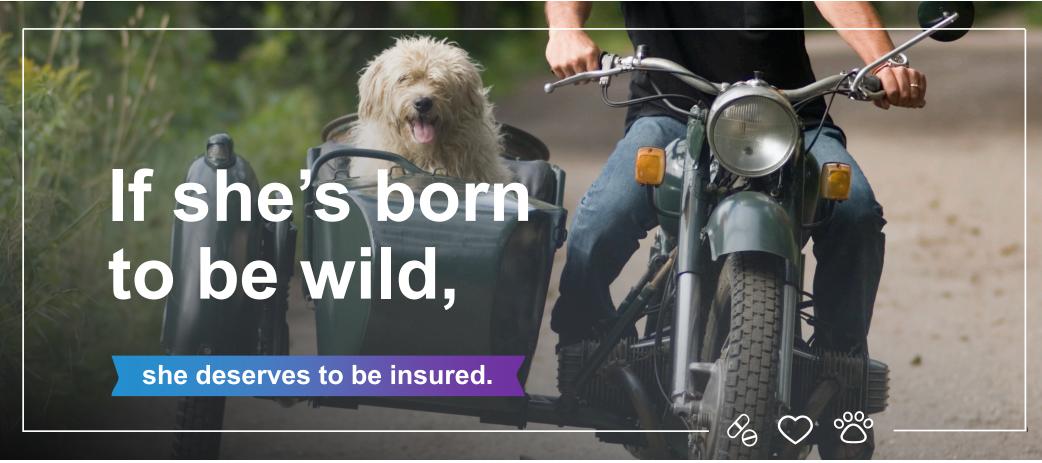
Or

Enroll during Open Enrollment through ServiceNow starting November 1, 2022-November 15, 2022.

Portability Option:

- Members who leave the district for reasons other than retirement can call MetLife's Client Service Center and advise the representative that he/she wishes to continue coverage on an individual basis. Individual plan coverage is good for 12-month maximum.
- Retirees can continue coverage through the Fringe Benefits Consortium on a yearly basis.





Southwestern College cares about all of your dependents — even the four-legged ones. As part of your Southwestern College benefits, you can access MetLife Pet Insurance.¹

Key Benefits



Flexible product offerings with straightforward pricing and options, group discounts,² customizable limits, and deductible savings³



Quick 3-step enrollment and hassle-free claims experience with most claims processed within 10 days⁴



An experienced team of pet advocates and multi-channel support options

You may be able to cover up to 100%⁵ of covered veterinary expenses at any licensed veterinarian, specialist or emergency clinic in the U.S.

Get a quote or enroll today.

Visit [www.metlife.com/getpetquote]

Call [1-800-GET-MET8]

Scan the QR code



- 1. Pet Insurance offered by MetLife Pet Insurance Solutions LLC is underwritten by Independence American Insurance Company ("IAIC"), a Delaware insurance company, headquartered at 485 Madison Avenue, NY, NY 10022, and Metropolitan General Insurance Company ("MetGen"), a Rhode Island insurance company, headquartered at 700 Quaker Lane, Warwick, RI 02886, in those states where MetGen's policies are available. Application is subject to underwriting review and approval. Like most insurance policies, insurance policies issued by IAIC and MetGen contain certain deductibles, co-insurance, exclusions, exceptions, reductions, limitations, and terms for keeping them in force. For costs, complete details of coverage and exclusions, and a listing of approved states, please contact MetLife Pet Insurance Solutions LLC. MetLife Pet Insurance Solutions LLC is the policy administrator authorized by IAIC and MetGen to offer and administer pet insurance policies. MetLife Pet Insurance Solutions LLC was previously known as PetFirst Healthcare, LLC and in some states continues to operate under that name pending approval of its application for a name change. The entity may operate under an alternate, assumed, and/or fictitious name in certain jurisdictions as approved by certain jurisdictions.
- 2. This discount is not available in MN or TN. This discount is only available to individuals who are eligible members or employees of an entity that has arranged for MetLife to offer pet insurance to its population. (For IAIC underwritten policies, the discount is 10% for Groups > 1000 lives and 5% for Groups 51–999 lives. For MetGen underwritten policies, this discount is 10% for Employer Groups of all sizes and 5% for Associations of all sizes.)
- 3. Your pet's deductible automatically decreases by \$25 (for IAIC underwritten policies) or \$50 (for MetGen underwritten policies) each policy year that you don't receive a claim reimbursement. May not be available in all states.
- 4. 80% of claims are processed within 10 days or less.
- 5. Reimbursement options include: 70%, 80%, 90% and 100%. In addition, there is also a 50% option for MetGen underwritten policies only and a 65% option for IAIC underwritten policies only.

Questions and Answers

When does Open Enrollment end?

 All forms must be submitted by November 15, 2022.

When will the changes I make during open enrollment take effect?

 All changes made during open enrollment become effective January 1, 2023.

What forms must be completed?

- You will have to log in to Myswc and go to ServiceNow Human Resources Benefits to review your current benefits and make any necessary updates along with any enrollment or termination forms.
- ServiceNow will have detailed instructions on how to process your updates.
- If adding an eligible dependent please provide the correct dependent documentation.

When are my forms due?

• Open Enrollment forms must be turned in by November 15, 2022.



- ServiceNow will also include forms in each plan section.
- If waiving medical, submit a waiver form.

Carrier Contact Information

Madical Incomes				
Medical Insurance				
Kaiser Customer Service	(900) 464 4000			
	(800) 464-4000	www.kp.org		
San Diego Appointment Center	(800) 290-5000			
United Healthcare (UHC) Customer Service	(000) 506 6365			
	(888) 586-6365	www.myuhc.com		
Express Scripts	(000) 040 0044			
Customer Service	(800) 918-8011	www.express-scripts.com		
Optum Health Acupuncture/Chiro	_ (aaa) .aa			
Customer Service	(800) 428-6337	www.myoptumhealthphysicalhealthofca.com		
VEBA Services				
Advocacy Services	(888) 276-0250	email: advocacy@mcgregorinc.com		
Employee Well-being	(619) 278-0221	email: VEBAwellness@mcgregorinc.com		
VEBA Resource Center	(619) 278-0221	email: VR@mcgregorinc.com		
Best Doctors	(866) 904-0910	www.members.bestdoctors.com		
	Dental Ins	urance		
Delta Dental of California				
Customer Service	(866) 499-3001	www.deltadentalins.com		
MetLife Dental				
Customer Service	(800) 942-0854	www.mybenefits.metlife.com		
	Vision Inst	ırance		
EyeMed				
Customer Services	(800) 988-4221	www.eyemed.com_		
Tax Sheltered Annuities (TSA)				
Fringe Benefit Consortium (FBC)				
Information		www.fbcretire.com		
FBC/Empower 403(b)/457 plan				
Anna Bernardo	(619) 417-4122	email: anna.bernardo@empower-retirement.com		
Schools First Credit Union				
Third Party Administration	(800) 462-8328 x4727	www.rpa@schoolsfirstfcu.org		
	Voluntary In	surance		
AFLAC				
Customer Service	(619) 504-1754	www.aflac.com		
American Fidelity (AFA)	·			
Customer Service	(800) 662-1113	www.americanfidelity.com		
Pacific Educators	, 			
Customer Service	(800) 722-3365	www.peinsurance.com		
	Pension/Retire			
APPLE	(800) 634-1178	www.mymidamerica.com		
CalPERS	(888) 225-7377	www.calper.ca.gov		
CalSTRS	(800) 228-5453	www.calstrs.com		
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