

SOUTHWESTERN COLLEGE
**BENEFITS
GUIDE**



TABLE OF CONTENTS



2027 Open Enrollment	3
Important Information About Your Benefits	3
How and When to Enroll.....	4
Who Is Eligible?	5
Who Is Ineligible?	5
Required Documentation.....	6
Mandatory Coverages	7
What if I have Other Coverage?	7
Dental Insurance Options	8
Medical Insurance Options	10
Medical Insurance Comparisons	12–14
VEBA Chiropractic/Acupuncture California Member Benefits.....	15
Kindbody & California Schools VEBA	16
Kindbody & California Schools VEBA Male Infertility.....	17
CalVEBA Members Benefits & Resources	18–20
Vision Insurance	21
Disability Insurance.....	22
Voluntary Benefits	23
Supplemental Life Insurance	24
Accidental Death and Dismemberment Insurance (AD&D)	25
Tax-sheltered Annuities (TSA's)	26
Flexible Spending Accounts (FSA)	27
Employee Assistance Program (EAP)	28
MetLife Legal Plans.....	29
JAWS: Jaguars Aquatics, Wellness & Sports.....	30
MetLife Pet Insurance.....	31
Accessing Your Digital Health and Welfare Benefit ID Cards.....	32–33
Separation of Employment with Southwestern College	34
Benefits Department Contact Information	35
Carrier Contact Information.....	36

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2027 OPEN ENROLLMENT

This guide is designed to give you an overview of the health and welfare benefits available to you and your family. 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, 2027–DECEMBER 31, 2027

IMPORTANT INFORMATION ABOUT YOUR BENEFITS

The District provides 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 VEBA Direct HMO Employee less \$50 per month.

Please see the payroll deduction grid on page 11 for your monthly cost.

- These funds will be directly applied to the benefits that you choose. 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.
- 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 PERIOD

OCTOBER 14, 2026 THROUGH **OCTOBER 28, 2026.**

This is your opportunity to make changes to your benefits selections without a qualifying life event. Online Open Enrollment changes can be made through Self-Service.

Enrollment for **Part-time Faculty** will take place in **JANUARY AND AUGUST.**

QUALIFYING LIFE EVENT

As with most benefits, once you make your benefit elections, those choices remain in effect for the entire plan year unless you experience a Qualifying Life Event. If you experience a Qualifying Life Event, you may be eligible to add, change, or drop coverage for yourself or your eligible dependents.

Please refer to the chart below for the deadline to notify the Benefits Department of your Qualifying Life Event and submit any required documentation.

Examples of a Qualifying Life Event include, but are not limited to:

ADDING COVERAGE DUE TO	DEADLINE TO MAKE CHANGES	REQUIRED DOCUMENTATION
Marriage/Divorce	30 Days	Marriage Certificate / Divorce Decree / Common Law Marriage Court-Certified Affidavit
Birth/Adoption	30 Days	Birth Certificate / Court Documents
Death of	30 Days	Death Certificate
Gain/Loss of Other Coverage	30 Days	Enrollment Confirmation or Loss of Coverage Letter with effective date
Court Appointed Custody/Medical Support Order	30 Days	Court documents signed by judge
Change in Employment Status	30 Days	Letter from former employer indicating when coverage ends.



WHO IS ELIGIBLE?

As a full-time or part-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 to whom you are legally married 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.

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 as an eligible dependent regardless of the fact that you claim them as a dependent on your taxes.

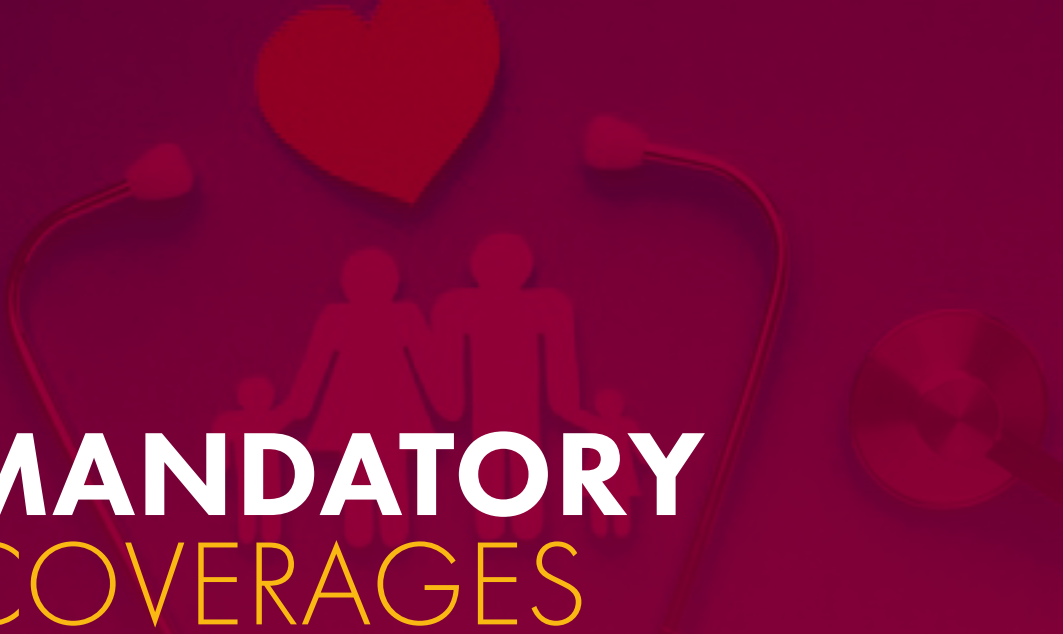
Adding a dependent to your plan requires dependent verification. You are required to provide the following documentation when you add an eligible dependent to your plan.
Refer to next page.

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	ELIGIBLE DEPENDENT DEFINITION	REQUIRED DOCUMENTATION FOR PROOF OF ELIGIBILITY
Legal Spouse	Legally Married Spouse	• IF "MARRIED FILING JOINTLY": Main page of 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 and list the names of both the employee, and spouse. If they do not, please contact us.
Domestic Partner	Partner as defined by the Domestic Partner Affidavit	• 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 or domestic partner 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 TaxReturn 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 of.	• 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 • Child documentation(biological/ step/adopted/ guardianship)



MANDATORY COVERAGES

The District provides the following required coverages to all contract employees at no cost:

1. **HARTFORD GROUP LIFE INSURANCE:** Academic and Confidential employees receive \$50,000 in term life insurance.
2. **HARTFORD GROUP LIFE INSURANCE:** Administrators and Classified employees 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

WHAT IF I HAVE OTHER COVERAGE?

With the exception of Life and dental, you can choose to waive coverage with the District. If you have other medical, 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.
Visit the benefits webpage at swccd.edu/Benefits to find more information on this added benefit.

DENTAL INSURANCE OPTIONS

MetLife Dental HMO	Delta Dental PPO
• 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). To find a provider click on the link below: • MetLife Dental	• Ability to choose any Dentist • Coverage for most procedures is at 70% of the Delta 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 tiers. There is one rate for employee only, one for employee+1, and one for employee+2 or more dependents. To find an in-network dentist, click on the link below: • Delta Dental



MEDICAL INSURANCE OPTIONS

The District currently offers Kaiser HMO, VEBA Direct HMO, Harmony HMO, 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 listed on the **following page**:



MONTHLY PAYROLL DEDUCTIONS FOR PLAN YEAR JANUARY 1, 2027–DECEMBER 31, 2027*

10-MONTH EMPLOYEES					
	Kaiser	Harmony HMO	VEBA Direct HMO	Alliance 20/30 HMO	PPO
Employee Only	\$0	\$0	\$60.00	\$225.00	\$1,621.00
Employee + 1 dep.	\$242.10	\$316.10	\$366.10	\$523.10	\$3,431.10
Employee + 2 or more	\$341.20	\$428.20	\$503.20	\$710.20	\$4,797.20

12-MONTH EMPLOYEES					
	Kaiser	Harmony HMO	VEBA Direct HMO	Alliance 20/30 HMO	PPO
Employee Only	\$0	\$0	\$50.00	\$188.00	\$1,351.00
Employee + 1 dep.	\$201.80	\$262.80	\$304.80	\$435.80	\$2,858.80
Employee + 2 or more	\$284.30	\$357.30	\$419.30	\$592.30	\$3,998.30

To find a United Health Care provider go to: <https://www.whyuhc.com/csveba/health-plans>

***These payroll deductions will begin on the December 18, 2026 paycheck.**

MEDICAL BENEFITS

PLAN OPTIONS & COMPARISONS



Southwestern Community College District

Effective Period: January 1, 2027 - December 31, 2027

No plan design changes for 2027

Benefit Summary	VEBA Direct HMO \$10/100% What You Pay	UHC Harmony HMO \$10/100% What You Pay	UHC CS VEBA Alliance HMO \$20/\$30/\$500A What You Pay	Kaiser HMO \$10, Rx: \$10 / \$10 100-day 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	\$3,000 / \$6,000	\$1,500 / \$3,000
Health Account	None	None	None	None
PCP Office Visit	\$10 copay	\$10 copay	\$20 copay	\$10 copay
Specialist Office Visit	\$10 copay	\$10 copay	\$30 copay	\$10 copay
Preventive Care	No charge	No charge	No charge	No charge
Inpatient Hospital Care	No charge	No charge	\$500 admit copay	No charge
Mental Health Services (outpatient/inpatient)	\$10 copay / No charge	\$10 copay / No charge	\$20 copay / \$500 admit copay	\$10 copay / No charge
Substance Abuse Services (outpatient/inpatient)	No charge	No charge	No charge	\$10 copay / 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	\$200 copay	No charge
Outpatient Surgery	No charge	No charge	\$250 copay	\$10 copay
Outpatient Physical/Rehabilitation Therapy (Office Visit)	\$10 copay	\$10 copay	\$20 copay	\$10 copay
Chiropractic and Acupuncture Services*	\$10 copay	\$10 copay	\$20 copay	\$10 copay
Urgent Care (Office Visit only)	\$10 copay	\$10 copay	\$20 copay	\$10 copay
Emergency Room (Copay waived if admitted)	\$100 copay	\$100 copay	\$150 copay	\$100 copay
Rx Deductible (individual/family)	None	None	None	None
Rx Out-of-Pocket Maximum (individual/family)	Combined with medical	Combined with medical	Combined with medical	N/A
Rx Formulary List	National Preferred	National Preferred	National Preferred	Kaiser
Rx Pharmacy Network	Express Advantage Network**	Express Advantage Network**	Express Advantage Network**	Kaiser
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	\$10 Generic \$30 PB 50% \$40 min \$175 max NPB	G / B: \$10 copay (up to a 100-day supply)
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	\$20 Generic \$60 PB 50% \$80 min \$350 max NPB	G / B: \$10 copay (up to a 100-day supply)

*Chiropractic and Acupuncture services have no annual visit maximums, must be medically necessary and may be subject to prior authorization from OptumHealth.

**Pay standard copays if you fill your prescription at an EAN Pharmacy (EAN Pharmacies include Costco, 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 (Costco and Sharp Rees-Stealy pharmacies).

**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

Disclaimer: Prepared by RPA San Diego on behalf of CS 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.

Plan Comparison



Southwestern Community College District

Effective Period: January 1, 2027 - December 31, 2027

No plan design changes for 2027

Benefit Summary	UMR NexusACO PPO		
	In Network Tier 1 What You Pay	In Network Tier 2 What You Pay	Out of Network Tier 3 What You Pay
Medical Deductible (individual/family)	\$1,000 / \$2,000	\$2,000 / \$4,000	\$4,000 / \$8,000
Medical Out-of-Pocket Maximum (individual/family)	\$2,500 / \$5,000	\$5,000 / \$10,000	\$7,500 / \$14,000
Health Account	None		
PCP Office Visit	\$30 copay	20% coinsurance (after deductible)	50% coinsurance (after deductible)
Specialist Office Visit	\$50 copay	20% coinsurance (after deductible)	50% coinsurance (after deductible)
Preventive Care	No charge	No charge	No coverage for non-network services
Inpatient Hospital Care	20% coinsurance (after deductible)	40% coinsurance (after deductible)	50% coinsurance with Prior Authorization (after deductible)
Mental Health Services (outpatient/inpatient)	\$30 copay / 20% coinsurance (after deductible)	20% coinsurance (after deductible)	50% coinsurance (after deductible)
Substance Abuse Services (outpatient/inpatient)	\$30 copay / 20% coinsurance (after deductible)	20% coinsurance (after deductible)	50% coinsurance (after deductible)
Outpatient Diagnostic Laboratory and Radiology (standard procedures) Freestanding Facility or Physician Office OR	No charge	20% coinsurance (deductible does not apply)	50% coinsurance (after deductible)
Hospital-based Lab or Radiology	20% coinsurance (deductible does not apply)	40% coinsurance (deductible does not apply)	
Complex Radiology (PET & MRI) Freestanding Facility or Physician Office OR Hospital-based Complex Radiology	20% coinsurance (after deductible)	40% coinsurance (after deductible)	50% coinsurance (after deductible)
Outpatient Surgery Ambulatory Surgery Center or Physician's Office	20% coinsurance (after deductible)	40% coinsurance (after deductible)	50% coinsurance with Prior Authorization (after deductible)
OR Outpatient Hospital-based Surgical Center	20% coinsurance (after deductible) and \$100 copayment	40% coinsurance (after deductible) and \$100 copayment	
Outpatient Physical/Rehabilitation Therapy (Office Visit)	\$30 copay	20% coinsurance (after deductible)	50% coinsurance (after deductible)
Chiropractic and Acupuncture Services*	\$30 copay	\$30 copay	50% coinsurance (after deductible)
Urgent Care (Office Visit only)	\$50 copay	\$50 copay	50% coinsurance (after deductible)
Emergency Room (Copay waived if admitted)	\$100 copay	\$100 copay	\$100 copay
Rx Deductible (individual/family)	None		
Rx Out-of-Pocket Maximum (individual/family)	Combined with medical		
Rx Formulary List	National Preferred		
Rx Pharmacy Network	Express Advantage Network**		
Short-Term Prescription Drugs*** (up to 30-day supply)	\$10 Generic \$30 PB 50% \$40 min \$175 max NPB		Retail: with submission of a paper claim, member will be reimbursed at the rate the Plan would have paid had the member used an in-network pharmacy less the member's copay.
Long-Term Prescription Drugs*** (up to 90-day supply)	\$20 Generic \$60 PB 50% \$80 min \$350 max NPB		No coverage for non-network pharmacy

PPO medical and prescription drug plans exclude coverage for infertility services, but have access to Kindbody Fertility Solutions for applicable covered benefits.

*Chiropractic and Acupuncture services have no annual visit maximums, must be medically necessary and may be subject to prior authorization from UMR.

**Pay standard copays if you fill your prescription at an EAN Pharmacy (EAN Pharmacies include Costco, 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 (Costco and Sharp Rees-Stealy pharmacies).

**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

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HMO NETWORK COMPARISON BY MEDICAL GROUP

San Diego County – provider medical group availability by network, including VEBA Direct (effective 1/1/2027)

Provider Medical Group	UHC Harmony	UHC CS VEBA Alliance	VEBA Direct
Greater Tri Cities IPA		✓	
Mercy Physicians Medical Group / Scripps Care		✓	
Optum Care Network - North County	✓	✓	
Optum Care Network - SD Physicians (fmr. Scripps)		✓	
Rady Children's Spec of San Diego		✓	✓
Scripps Clinic		✓	
Scripps Coastal Medical Center (SCMC)		✓	
Sharp Community Medical Group	✓		✓
Sharp Community Medical Group - Chula Vista	✓		✓
Sharp Community Medical Group - Coronado	✓		✓
Sharp Community Medical Group - Graybill N. Coastal	✓		
Sharp Community Medical Group - Grossmont	✓		✓
Sharp Community Medical Group - Inland North	✓		
Sharp Community Medical Group - Palomar Health	✓		
Sharp Rees Stealy (SRS)	✓		✓
UCSD Medical Group		✓	✓
UCSD Affiliates		✓	✓

Note: Not all medical groups are shown. Please check your plan documents for details. Network availability varies by district and is subject to contracting and renewal.

VEBA CHIROPRACTIC/ ACUPUNCTURE CALIFORNIA MEMBER BENEFITS

As part of VEBA, you receive 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

APPLIES TO PLANS:

- **UHC:** Use your digital UHC member ID card
- **Kaiser:** Call Optum Member Services to request your member ID number.

Only Optum chiropractors and acupuncturists are eligible for reimbursement under the plan. Verify that your chiropractor or acupuncturist still participates with Optum prior to receiving services.

THREE WAYS TO FIND A PROVIDER.

As part of VEBA, you receive chiropractic and/or acupuncture benefits through participating OptumHealth Physical Health of California (Optum) providers. Your benefits include:

1. Online at:
www.myoptumhealthphysicalhealthofca.com
 - a. To identify a participating provider, look for "VEBA" in the list in the column headed "Participating Provider for:"
2. For the most up-to-date information, call Optum Member Services at (800) 428-6337, Monday through Friday, from 5:00 a.m. to 5:00 p.m. Pacific Time.
3. Call a provider directly to schedule an appointment, and to verify they are part of the Optum network for VEBA.



kindbody +



California Schools VEBA offers Kindbody as your fertility, family-building, and menopause benefit

If you are looking to grow your family or need assistance in your post-reproductive years, there is support. Kindbody provides end-to-end fertility services, as well as menopause support through dedicated Kindbody care navigation, clinical guidance, digital tools, and education to help you maneuver through these reproductive health stages. You can take comfort in knowing the full spectrum of benefits are provided in a safe, welcoming, and confidential environment.

Employees and spouses/partners who are enrolled on the California Schools VEBA-sponsored Cigna, UHC, UMR or SIMNSA plans are eligible for the Kindbody benefit.

Your Kindbody Benefit Includes

- Up to 1 full KindCycle including in vitro fertilization (IVF), intrauterine insemination (IUI) with fertility medication through KindbodyRx
- Conception, fertility, and male assessments to help you learn more about your fertility
- 6 sessions of virtual holistic health services; support includes menopause, mental well-being, nutrition, doula/birth coaches, lactation support, back-to-work care, and more
- Access to Kindbody's menopause program offering specialty providers who will support women experiencing menopause; services include lifestyle assessment, hormone testing, and virtual holistic sessions
- Dedicated Kindbody Care Navigation Team
- Access to Kindbody's full suite of services and network of partner clinics
- Access to Kindbody's library of resources, videos, events, and support groups
- A personalized patient portal

Note: Employees and spouses/partners enrolled on the California Schools VEBA-sponsored Kaiser plan will have access to VEBA discounted rates at Kindbody Signature clinics. Additionally, VEBA members seeking services for fertility preservation (i.e., egg freezing) will have access to discounted rates at Kindbody Signature clinics. These direct discounts are offered directly by Kindbody and not through the California Schools VEBA benefit program.

How to Get Started with Kindbody

- 1 Head to **kindbody.com/activate**
- 2 Create your Kindbody account using your first name and last name as it appears in your employer's system and any email address
- 3 Confirm eligibility by entering your Access Code: **KINDCSVEBA** and Unique User ID as follows:
 - Employee: First Name + Last Name + -E + last four digit of your social security number (Example: JaneDoe-E1234)
 - Spouse/domestic partner: First Name + Last Name + -D + last four digit of the spouse/domestic partner's social security number (Example: JonDoe-D5678)

For more information, or if you have any questions, email
employeebenefits@kindbody.com

Male Infertility



Male Infertility is common, treatable, and rarely discussed.

No matter where you are in your journey towards conception, it is important to take the step of getting a male assessment.

The process is easy: a Male Fertility Assessment includes a semen analysis and a consultation with a male fertility specialist. From there, we will make expert recommendations on your next steps.

Did You know? Infertility occurs equally between both males and females. If you and your partner are trying to conceive, it's important to be aware of male infertility factors that elevate your risk and how they can affect your chances of successful conception.



Kindman Coverage (effective 1/1/2026)

- Abnormal Semen Analysis Follow-up Consult, includes male hormone panel and DNA fragmentation testing
- IUI Diagnostic Workup (Epigenetic Sperm Quality Testing + Results Consult) to determine if IUI is the most appropriate treatment plan
- Testicular Sperm Extraction (TESE) and Percutaneous Epididymal Sperm Aspiration (PESA) procedures

Note: Kindman provides coverage for services otherwise not covered under your medical plan (initial semen analysis is covered under your medical plan)

How to Get Started with Kindbody

- 1 Head to kindbody.com/activate and create your Kindbody account using any email address
- 2 Confirm eligibility by entering access code **KINDCSVEBA** and your unique user ID as follows:
 - *Employee:* First Name + Last Name + -E + last four digit of your social security number (Example: JaneDoe-E1234)
 - *Spouse/domestic partner:* First Name + Last Name + -D + last four digit of the spouse/domestic partner's social security number (Example: JonDoe-D5678)

Eligibility: Employees and spouses/partners who are enrolled on the California Schools VEBA - sponsored Cigna, UHC, UMR, Surest or SIMNSA plan

CalVEBA Members Benefits & Resources

Our goal is to make health care better for you and your family. By continually evaluating needs, we are committed to providing accessible, diverse resources to ensure our members can take an active role in their health and wellness journey.

Benefit & What it Offers	Availability & How to Access
Advocacy Team Health care can be confusing. That's why we have a dedicated team of experts at hand ready to assist. Think of us as your healthcare concierge. We are here to help you with: • Benefits questions • Finding a doctor/choosing a doctor • Connecting with your carrier • Helping you understand your bill • Helping you navigate the system	Benefits questions? Support is just a call or click away. Monday-Friday, 8 am – 5 pm Call 888-276-0250 Visit VEBAOnline.com/Contact to submit a request
Care Navigation Partner with a Care Navigator, a holistic nurse, for support, guidance, and resources to create a customized plan for your overall health and well-being goals. The program also includes a health and well-being assessment and follow-up appointments.	Free, confidential service For CalVEBA members Visit VEBAResourceCenter.com/Care-Navigation to schedule an appointment
Teladoc Medical Experts When facing significant medical decisions, having expert medical advice can make all the difference. Get access to 50,000+ world-renowned doctors for a second opinion on a diagnosis or treatment plan.	Free service For you and your eligible dependents Visit Teladochealth.com/MedicalExperts
Whole Health Coaching Based on the Eight Dimensions of Wellness, this program offers multiple sessions with a coach to guide goal setting and develop a personalized wellness plan that is practical, flexible, and sustainable. Receive guidance and support for attainable health goals like: • Stress management • Enhancing sleep quality • Healthy eating/weight control • Coping with aging, life transitions, and chronic conditions	Free program for CalVEBA members Schedule a consultation with a Care Navigator, a holistic Registered Nurse to get started Visit VEBAResourceCenter.com/Whole-Health-Coaching to learn more

Benefit & What it Offers	Availability & How to Access
Kindbody: Fertility and Menopause Support If you are looking to grow your family or need assistance in your post-reproductive years, there is support. Through dedicated Kindbody care navigation, Kindbody provides: • Fertility services • Menopause support • NEW: KindMan • NEW: Kind Doula • NEW: Fertility preservation	Applies to Plans: • UMR PPO • UHC, VEBA Direct, and Kaiser plans: Employees and spouses/partners enrolled in these plans will have access to CalVEBA discounted rates at Kindbody Signature clinics. • Visit Kindbody.com/VEBA
InsideRx Pets By leveraging pooled purchasing power, we reduce costs for your pet expenses. • Save on human medications often prescribed for pets. • Members save an average of 75% for generics and 15% for brands	Free and simple to use Use the card or mobile app Offers access to affordable brand and generic medications at 60,000 retail pharmacies across the U.S. Visit Insiderx.com/Pets
My VEBA App & Portal This online portal is full of great resources for members. • Log in during Open Enrollment to view your current plan, explore your plan options, search for a provider, and more. • You can also explore fitness, cooking, or mindfulness classes, healthy recipes, on-demand content, and upcoming events.	Free for members Available via app or on desktop Visit MyVEBA.org to get started

Expanded Resource Access

Wellness, Wherever You Are

Flexible Access: Virtual, On-Demand, and In-Person

- ▶ **On-Demand Workout/Wellness Videos:** VEBAResourceCenter.com/Video-library
- ▶ **Cooking & Nutrition Classes:** VEBAResourceCenter.com/Cooking-nutrition
- ▶ **Stress Management:** Acupuncture and acupressure, meditation, yoga, and group counseling. Sign up at VEBAResourceCenter.com/Calendar
- ▶ **Movement:** Take classes such as strength training, dance fitness, HIIT cardio, and more. Sign up at VEBAResourceCenter.com/Calendar

ONLINE EDUCATION HUBS

Get the guidance, information, and resources you need to navigate your health and well-being journey. These hubs offer downloadable toolkits and practical insights to support your unique goals.

OPEN ENROLLMENT HUB:

Visit VEBAResourceCenter.com/Open-enrollment/

Make informed decisions to ensure you have the right coverage. This one-stop resource has everything you need to know about Open Enrollment and your CalVEBA benefits.

MENTAL WELL-BEING HUB:

Visit VEBAResourceCenter.com/Mental-wellbeing/

Get tools, resources, and advice to manage daily stress, including Daily Affirmations, a Home/Office Declutter Guide, and Calendar with five-minute activities to alleviate anxiety.

COOKING & NUTRITION HUB:

Visit VEBAResourceCenter.com/Cooking-nutrition/

Improve your diet and learn practical cooking skills with a Gut Health Toolkit, Better Breakfast Guide, Kid-Approved/Family-Friendly Recipes, classes, articles, and more.

HEALTHY LIFE HUB:

Visit VEBAResourceCenter.com/Healthy-life/

Discover how CalVEBA services, wellness toolkits (including Appointment Ready: Your Doctor's Visit Prep Guide) and programs can help you achieve a happier, healthier you.

VISION INSURANCE

EYEMED

- Most of the medical plans offer discounted vision coverage, 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).

Click on [EyeMed](#) to find an in-network doctor.



MONTHLY PAYROLL DEDUCTIONS FOR PLAN YEAR JANUARY 1, 2027–DECEMBER 31, 2027 *

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

To find an in-network EyeMed doctor go to: <https://eyedoclocator.eyemedvisioncare.com/member>

*These payroll deductions will begin on the December 18, 2026 paycheck.

DISABILITY INSURANCE

Your income is a very important asset. Disability insurance can provide 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	AMERICAN FIDELITY	PACIFIC EDUCATORS
• 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)	• 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.	• 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)



OTHER VOLUNTARY BENEFITS

ACCIDENT, CANCER AND PERSONAL ACCIDENT

IMPORTANT: This is a fixed indemnity policy, NOT health insurance.

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much the policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.

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-of-pocket 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

SUPPLEMENTAL LIFE INSURANCE

In addition to the District covered mandatory life insurance, you can also purchase supplemental life insurance. Enrollment forms and pricing can be found online on the Benefits Department (need to link to our website) website under Life Insurance.

HARTFORD	MADISON NATIONAL LIFE	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. • Health questionnaire or medical examination is required. • 3 unit maximum per employee, not to exceed \$250,000.	• Amount stays the same but premium increases with age in January of each year. • Health questionnaire is required. • 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. • Minimal 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/or your spouse are seriously injured or killed in a covered accident.

AMERICAN FIDELITY	MADISON NATIONAL LIFE
• 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.	• 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.

TAX-SHELTERED ANNUITIES (TSAs)

- You have the opportunity to participate in 403b and 457 plans.
- TSAs offers you the ability to defer money, tax-free, from your paycheck to save for retirement.
- Forms are available in the Benefits department website and can be provided to your broker or financial consultant to complete. If you do not have a broker or financial consultant, the Fringe Benefits Consortium (FBC) Plan Member Services team is available to assist, answer questions, and help you start a plan.
- If you would like to contact Plan Member Services, please call (833) 752-6322 or email FBCsupport@planmember.com or visit www.fbcmodelplan.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 via ServiceNow under [Document Dropbox for Human Resources](#). Then under Document Type, select Benefits.

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

The 2026 Maximum contribution for TSAs is \$24,500 per year. If you are over the age of 50, you may contribute up to \$32,500 per year. Please click on [Fringe Benefit Consortium](#) to learn more about these plans.

(DISCLAIMER: 2027 Maximum Limits Pending)



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, 2025.

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 2027 is **\$3,400.**

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 2027 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)

The Optum Emotional Well-Being Solutions and AETNA EAP 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 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.

AETNA EAP Plan

(For employees **NOT** enrolled in the districts medical plan)

CALL TOLL-FREE, 24 HOURS A DAY, SEVEN DAYS A WEEK 1 (800) 342-8111, TTY: 711 **OR**

Visit: resourcesforliving.com

Username: SWC and **Password:** EAP

OPTUM Emotional Well Being Solutions (EWS) 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**

Log on to: liveandworkwell.com

Access Code: VEBA

MetLife LEGAL PLANS



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 pre- paid legal plan available through MetLife Legal Plans.

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)

Monthly Payroll Deductions for Plan Year
January 1, 2027–December 31, 2027

METLIFE LEGAL PLAN		
Coverage	10-month employee	12-month employee
Employee Only	\$27.60	\$23.00
Employee with Plus Parents	\$33.60	\$28.00

Plan sponsored by SDCOE/San Diego & Imperial County Schools
FBC Insurance Services, LLC



#0D87958

JAWS

JAGUAR AQUATICS, WELLNESS & SPORTS

Southwestern College
students, faculty, and staff,
our goal is to help our
members pursue a life of
fitness and wellness.

JOIN US!

MEMBERSHIP IS **FREE** FOR
FULL TIME FACULTY AND
SOUTHWESTERN COLLEGE
STAFF

SIGN UP!

www.swcjaws.com



GET ACTIVE. LIVE LIFE.
OPEN TO THE PUBLIC

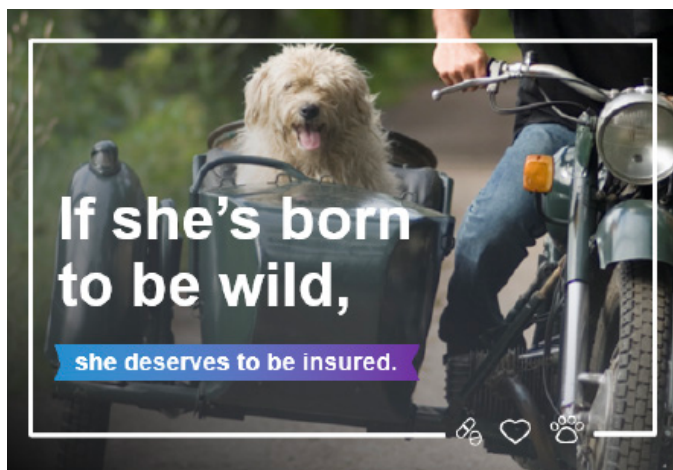


MetLife PET INSURANCE¹

Whether your pets want to be on your lap at all times or prefer their own space on the sofa, their unpredictable antics enhance your family dynamic. However, when the unexpected happens to them, you may need coverage that can help ease the burden of veterinary expenses. With MetLife Pet Insurance¹, you can help protect their health and well-being.

We believe that every individual and their pet have unique needs – enjoy benefits like flexible coverage with up to 100% reimbursement and the freedom to visit and U.S. licensed vet, optional Preventive Care coverage, 24/7 access to Telehealth Concierge Services, and discounts and offers on pet care. Plus, with the MetLife Pet mobile app, you can manage your pet's health and wellness and submit and track claims.

Get a quote or enroll by visiting www.metlife.com/getpetquote or calling (800)-GET-MET8.



LEARN MORE



Disclaimer:

1. Coverage underwritten and issued by Independence American Insurance Company ("IAIC"), a Delaware insurance company, and Metropolitan General Insurance Company ("MetGen"), a Rhode Island insurance company, in those states where MetGen's policies are available. Coverage subject to restrictions, exclusions and limitations. See policy or contact MetLife Pet Insurance Solutions LLC for complete details. MetLife Pet Insurance Solutions LLC is the authorized policy administrator for this coverage.
2. 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.
3. Can be purchased at an additional cost. For IAIC underwritten policies, optional Preventive Care coverage is based on a Schedule of Benefits. For MetGen underwritten policies, optional Preventive Care coverage is included in the annual limit.
4. May not be available in all states.

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ACCESSING YOUR DIGITAL HEALTH AND WELFARE BENEFIT ID CARDS

**Guide to access your medical, dental, and vision ID cards digitally.
Follow the instructions below to access and download your ID cards from each provider.**

MEDICAL ID CARD

KAISER PERMANENTE

To view/print your member information, follow these steps:

Online:

- Visit <https://kp.org>
- Click "Sign In" to enter your username and password
- Click "Member Information"
- On the "Benefits pop-up window," click "View Plan and ID"
- View/Print your member ID

Don't have a username and password yet?

- Click "Register"
- Click "Create my account"
- Enter your name and birth date

Questions or trouble accessing your account? Call Kaiser Permanente Member Services: (800) 464-4000

UNITED HEALTHCARE (UHC)

To view/print your digital ID card, follow these steps:

Online:

- Visit <https://member.uhc.com/myuhc>
- Click "Sign In" to enter your username and password
- Click "View ID Card"
- View/Print your member ID

Don't have a username and password yet?

- Click "Register"
- Enter your name, birth date, and Social Security Number to create an account

Questions or trouble accessing your account? Call UnitedHealthcare Customer Service: (888) 586-6365

UMR-PPO PLANS

To view/print your digital ID card, follow these steps:

Online:

- Visit <https://www.umar.com>
- Click "Log in/Register"
- Select "Member" from the drop-down menu
- Click "Log in/Register with HealthSafe ID"
- Click "Sign in" to enter your HealthSafe ID username and password
- From the myMenu dashboard, click "ID Card"
- View/Print your member ID

Questions or trouble accessing your account? Call UMR's HealthSafe ID Member Services: (800) 826-9781

DENTAL ID CARD

DELTA DENTAL

- Visit: www1.deltadentalins.com
- Click "Log In" to enter your username and password
- Click on "Print ID Card"

Don't have a username and password yet?

- Click "Log In" at the top of the page
- Click "Create an Account" button
- Identify your user type by selecting "Enrollee/Adult Dependent" from the drop-down list
- Enter your personal information
- Create your username and password and enter your email address

Questions or trouble accessing your account? Call Delta Dental: (866) 499-3001 for PPO dental plans

METLIFE DENTAL (HMO)

STEP 1: PROVIDE YOUR GROUP NAME

Access MyBenefits at: www.metlife.com/mybenefits and enter the employer name and click to select it and then click 'Next.'

STEP 2: THE LOGIN SCREEN

Click on 'Log In' at the top-middle of the page and on the next screen select 'Create New Account' and complete the registration process.

STEP 3: ENTER AUTHENTICATION INFORMATION

Begin by entering your information to confirm your identity. You will then receive a code via email that you will need to enter to continue the registration process. Upon validation, you will be prompted to provide your SSN, first and last name, and date of birth.

STEP 4: ESTABLISH ACCOUNT CREDENTIALS

You will need to create a unique user name and password for future access to MyBenefits.

Questions or trouble accessing your account? Call MetLife Dental: 1(800) 880-1800

VISION PLAN

EYEMED

Visit: <https://eyemed.com/en-us>

- Click "Log In" and select "Member" to enter your username and password
- Click on "Print ID Card"

Don't have a username and password yet?

- Click "Log In" at the top of the page and select "Member"
- Click "Need to register"
- Fill out the member web registration information.
- Click on "Create an Account"
- Create your username and password and enter your email address

Customer Care Center
(844) 409-3401 Network: Insight
Locate in-network providers and speak to a customer service representative.

If you need further assistance, please email the Benefits Office at: swcBenefits@swccd.edu or call (619) 421-6700, ext. 5174 or 5225

SEPARATION OF EMPLOYMENT WITH SOUTHWESTERN COLLEGE

Upon submission of your resignation or retirement, your benefits will continue through the end of the month following your last day of employment.

MEDICAL, DENTAL, AND VISION PLANS:

A COBRA notice will be mailed to you outlining your options for continuing coverage under these plans. COBRA allows you to maintain the same coverage you had as an active employee; however, you will be responsible for paying the full premium cost.

HARTFORD LIFE INSURANCE:

You may have the option to convert your group life insurance coverage to an individual policy. To obtain a conversion quote, please contact The Hartford directly using the information and forms provided in your COBRA packet.

VOLUNTARY PLANS:

Individual conversion options for voluntary plans may be available directly through the insurance carrier. To inquire about converting coverage, please contact the carrier's customer service department within thirty (30) days after your coverage ends. These plans are not eligible for continuation under COBRA; therefore, all conversion inquiries must be directed to the carrier and not to Southwestern Community College District.



BENEFITS DEPARTMENT CONTACT INFORMATION

Contact Information

Southwestern Community College District Benefits Department
Room 46A-165

Email: swcbenefits@swccd.edu

Fax: (619) 482-6387

SHELLEY CARBAJAL

Benefits Specialist

(619) 421-6700, ext. 5174

scarbajal@swccd.edu

GABBY ESQUIVEL

Benefits Specialist

(619) 421-6700, ext. 5225

gesquivel@swccd.edu



CARRIER CONTACT INFORMATION

MEDICAL INSURANCE		
Kaiser		
Customer Service	(800) 464-4000	My.kp.org/veba
San Diego Appointment Center	(800) 290-5000	
United Healthcare (UHC)		
Customer Service	(888) 586-6365	Whyuhc.com/csveba
Express Scripts		
Customer Service	(800) 918-8011	www.express-scripts.com
Optum Health Acupuncture/Chiro		
Customer Service	(800) 428-6337	www.myoptumhealthphysicalhealthofca.com
VEBA Services		
Advocacy Services	(888) 276-0250	www.vebaonline.com/contact/
Employee Well-being	(619) 398-4230	wellbeing@vebaonline.com
VEBA Resource Center	(619) 398-4220	vrc@vebaonline.com
DENTAL INSURANCE		
Delta Dental of California		
Customer Service	(866) 499-3001	www1.deltadentalins.com
MetLife Dental		
Customer Service	(800) 942-0854	www.mybenefits.metlife.com
VISION INSURANCE		
EyeMed		
Customer Services	(800) 988-4221	www.eyemed.com
TAX SHELTERED ANNUITIES (TSA)		
Fringe Benefit Consortium (FBC)		
Information		support@fbmodelplan.com
FBC/Empower 403(b)/457 plan		
Plan Member Services	(833) 752-6322	support@fbmodelplan.com
Schools First Credit Union		
Third Party Administration Schools First	(800) 462-8328 x4727	www.rpa@schoolsfirstfcu.org
VOLUNTARY INSURANCE		
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/RETIREMENT PLANS		
APPLE	(800) 634-1178	www.mymidamerica.com
CalPERS	(888) 225-7377	www.calpers.ca.gov
CalSTRS	(800) 228-5453	www.calstrs.com



SOUTHWESTERN COLLEGE BENEFITS DEPARTMENT

900 Otay Lakes Road
Room 46A-165
Chula Vista, CA 91910
swccd.edu/Benefits

