



## Confidential Retiree Benefits

Assuming you were hired prior to January 1, 2004, have completed a minimum of 10 years satisfactory service to the District and have reached the age of 55 in the year of application

1. Your benefit as a retiree is lifetime continuation of paid Medical and Dental insurance (as annually provided by the District's H&W program). You must be enrolled in a plan for at least one year prior to retirement.
2. Medical, dental and vision plans can be continued under the District. Any life, disability, accident, long term care, or cancer care insurances may be converted, at your own expense, to individual plans depending on whether that specific carrier offers a conversion plan.
3. If you qualify for Medicare and assign the Medicare coverage to the District's plan, your Medicare Part B cost will be reimbursed. So long as there is a premium cost savings on the chosen plan.
4. If you choose not to participate in the District's plans, you will not be able to reinstate your coverage at a later date.
5. You may elect to continue dependent coverage at your own expense.
6. If you move out of state or service area, you will be reimbursed up to the current average District cost upon verification of cost.
7. Based on your choices, you will either receive an invoice from the District for the remaining balance or receive a reimbursement from the District. Invoices are issued biannually or annually if desired. Reimbursement checks are issued biannually. Several examples of retiree choices and their impact are described on the back of this page.
8. Every October/November, you will continue to have the opportunity to participate in Open Enrollment in which you will be able to change your benefit selection. You are **not** able to purchase additional coverages. You will receive the new benefit information in the mail.

9. If you have a change of address or will be turning 65 years old, you must contact the Benefits Specialist at (619) 421-6700 ext. 5174 or 5225. In the same instance, if you decide to move out of state you will need to contact the District as soon as possible.

Examples of different scenarios:

**Elect our District Medical & Dental plan:**

- Johnny Jaguar decides at his retirement to carry both Kaiser and Delta Dental. The District currently pays 100% of the Kaiser cost. Your benefits will be paid 100% by the District.
- Jane elects to take the Kaiser and Delta Dental benefit for both her and her spouse. Jane will receive invoices twice a year for the cost of her spouse's coverage.

**Moves out of the Medical Service**

- Michael moves out of state. He signs up for individual health care coverage in his new home town. By the end of November, he sends the District's Benefits Specialist copies of all the payments that were made **on his portion** of his medical premiums for the timeframe from July 1<sup>st</sup> thru December 31<sup>st</sup>. He will receive a check from the District for the amount of medical premiums he paid up to the current average at the end of December. He will repeat this process in May/June. He can elect to continue Dental with our PPO plan or be reimburse for a Dental plan he pays for.

**Turns 65 and enrolled in a District plan**

- Sam is enrolled in the United Healthcare Network #1 plan. She is turning 65 and elects to continue her United Healthcare Medicare supplement plan with the District. The District will continue paying 100% of her medical cost. In addition, the District will reimburse her Medicare Part B cost. Sam will send documentation to the District's Benefit Specialist of her Medicare Part B cost when she receives them and the District will reimburse this cost twice a year – June and December.

**Those who do not qualify for the above benefit, have completed a minimum of 10 years of full-time satisfactory service to the District and have reached the age of 50 in the year of application**

1. Your benefit as a retiree is paid medical premium of District plan (shall not exceed the District maximum health and welfare benefits support program) until the age of 65. After 65 you will receive \$1,000.00 annual reimbursement for any major medical coverage including Medicare.
2. Medical and dental plans can be continued through the District. Any life, disability, accident, long term care, or cancer care insurances may be converted, at your own expense, to individual plans depending on whether that specific carrier offers a conversion plan.

3. If you move out of state or service area, you will be reimbursed up to the current average District cost, until the age of 65 (limited to verified medical costs paid by you).
4. If you choose not to participate in the District's health plan, you will not be able to reinstate your coverage.
5. Based on your choices, you will either owe the District money or you will be eligible for a reimbursement from the District. If you owe the District payment for insurances, you will receive an invoice for payment biannually or annually if desired.
6. Every October/November, you will continue to have the opportunity to participate in Open Enrollment in which you will be able to change your benefit selection. You are not able to purchase additional coverages. You will receive the new benefit information in the mail.
7. If you are not enrolled in a medical plan with the District at the time of retirement you will be reimbursed up to \$1,000 annually upon verification of medical cost.
8. If you have a change of address, move out of state or will be reaching the age of 65, you must contact the Benefits Department at (619) 421-6700 ext. 5260.

Retiree Health & Welfare Cost Sheet\*

\*The monthly premiums below do not reflect the District portion towards benefits. If you are applying for retiree benefits through AB528 please add 2% to the cost below.

**MEDICAL**

<b>Retire Under 65 Year of Age</b>			
	<b>Retiree Only</b>	<b>Retiree + 1</b>	<b>Retiree + Family</b>
<b>Kaiser</b>	\$673	\$1,331	\$1,877
<b>UHC HMO #1</b>	\$767	\$1,502	\$2,109
<b>UHC HMO #2</b>	\$1,012	\$1,988	\$2,793
<b>UHC Alliance 20/30</b>	\$811	\$1,583	\$2,216
<b>UHC Alliance 1200</b>	\$866	\$1,633	\$2,278
<b>UHC PPO</b>	\$1,753	\$3,448	\$4,838

<b>Retiree Over 65 Years of Age</b>				
	<b>Retiree Only</b>	<b>Retiree &amp; Spouse</b>	<b>One under 65 &amp; one 65 or older</b>	<b>Retiree 65 &amp; Family under 65</b>
<b>Kaiser Senior Advantage</b>	\$252	\$488	\$910	\$1,456
<b>UHC Medicare Advantage HMO</b>	\$421	\$827		
<b>w/ dependents UHC Network #1</b>			\$1,173	2 dep. - \$1,908
<b>UHC Medicare Advantage PPO</b>	\$466	\$912		

**DENTAL**

	<b>Academic</b>			<b>Classified</b>		
	<b>Retiree Only</b>	<b>Retiree +1</b>	<b>Retiree + Family</b>	<b>Retiree Only</b>	<b>Retiree + 1</b>	<b>Retiree + Family</b>
<b>Delta Dental</b>	\$65.12	\$132.27	\$186.41	\$53.04	\$107.93	\$152.16
<b>MetLife HMO</b>	\$30.52	\$30.52	\$30.52	\$30.52	\$30.52	\$30.52

**VISION (Medical Eye Services)**

<b>Retiree</b>	<b>Retiree + 1</b>	<b>Retiree + Family</b>
\$8.19	\$16.32	\$24.57

