

LOS RIOS COMMUNITY COLLEGE DISTRICT
RETIREE GUIDE
July 1, 2021 to June 30, 2022

MONETARY TRANSACTIONS

All monetary transactions relating to retiree health care benefits and the District contribution will be made via electronic transfer, utilizing the retiree's selected financial institution. Insurance premiums for Los Rios insurance plans are paid to the carrier by the District, on your behalf (you are responsible for making any payments to Medicare). The District will electronically deduct the portion of the premiums that are the retiree's responsibility.

It is the retiree's responsibility to make sure funds are available for deduction or to notify the District of any account changes. Note that notifying PERS/STRS of an account change does not update your account for District transactions. Two insufficient funds or unsuccessful attempts to make transactions to the retiree's account will result in the cancellation of the retiree's insurance or cancelation of District contribution deposits. If the retiree's insurance is cancelled the retiree will be unable to re-enroll in a District plan. Deposit of the District contribution will begin prospectively once proof of premium is received.

DISTRICT CONTRIBUTION

Contributions of up to **\$334** per month shall be made toward the premium cost of medical insurance for the **retiree only** who meets the eligibility criteria of their bargaining agreement. **Spouses of retirees are not eligible for a District contribution**, but they may be covered under the retiree's plan (Surviving Spouses are permitted to stay in a Los Rios Sponsored plan at their cost). If a retiree is incurring a cost for medical insurance which is less than \$334 per month, the District will also consider the retiree's cost for Medicare Parts A, B & D in computing the appropriate District contribution.

INSURANCE OUTSIDE LOS RIOS

If the retiring employee elects coverage by a health plan other than a District plan, the established monthly District contribution level shall still apply. However, the District contribution cannot exceed the retiree's actual cost for medical insurance (including Medicare Parts A, B and D).

Retirees will receive an annual request to provide the District with verification of insurance cost. This must be provided for the District to continue the contribution. If proof is not received by the deadline date, the District contribution will be stopped. Once proof is received, the District contribution will be reactivated prospectively

Re-Enrollment in a District Plan

Retirees will have only one "Special Enrollment Period" to enroll in a District group health plan. The retiree must provide evidence of continued coverage from the date of retirement to age 65 or

Medicare enrollment and provide evidence of enrollment in Medicare. **This does not apply to dental insurance.**

The retiree must elect a District medical plan upon turning 65, or otherwise becoming Medicare eligible. The retiree will have a seven month window to contact the Employee Benefits Department to obtain the appropriate enrollment forms and return them. The seven month period includes the three months prior to the 65th birthday, the month of the birthday, and the three months after the 65th birthday. *For retirees who become Medicare eligible prior to age 65, the seven month window is the three months before, the month of and the three months after the Medicare eligibility date, not the 65th birthday. A second window will NOT be given when the retiree reached age 65. It is the retiree's responsibility to contact the Employee Benefits Department within the specified time frame if they wish to enroll in a District sponsored health plan.*

MEDICARE

If you and/or your dependent are age 65 at retirement, you will need to request an Employer Verification form from Employee Benefits to submit to Social Security upon enrollment in Medicare. If you are under age 65 at retirement, you will need to apply for Medicare two to three months prior to your 65th birthday.

If you are retired and do not enroll in Medicare, upon becoming eligible, you may have higher medical insurance premiums. In most cases, if you don't sign up for Part B when you're first eligible, you'll have to pay a late enrollment penalty. The penalty is 10% for each 12 month period you could have had Part B, but did not sign up. This is a lifetime penalty.

You will also need to contact the Employee Benefits Department to obtain enrollment forms for your Medicare plan if you wish to continue or obtain a District sponsored plan. **DO NOT** complete any enrollment forms sent to you by an insurance carrier, if you wish to have a District sponsored plan.

The standard premium for 2021 is \$148.50. Some retirees may be charged an Income Related Monthly Adjustment Amount (IRMAA) resulting in higher premiums, depending on the retiree's income. Annual verification of your premium amount is required for reimbursement.

****IMPORTANT MEDICARE PART D INFORMATION****

By enrolling in a Los Rios sponsored Medicare plan, you are enrolling in Medicare Part D. Your prescription drug coverage is incorporated into the plan and the premium. If you have a Los Rios sponsored plan and enroll in prescription coverage outside of the District plan, you will jeopardize your District sponsored plan.

It is important to know that if you are being charged the IRMAA on Medicare Part B, you will also have IRMAA on Part D. If you fail to pay, the Center for Medicare and Medicaid Services will instruct your health insurance carrier to cancel your insurance coverage.

LOS RIOS HEALTH INSURANCE PLANS & MONTHLY PREMIUMS

Kaiser:

HMO	W/O District Contribution	With District Contribution
RETIREE	\$1,377.78	(\$1,377.78 - \$334) = \$1,043.78
DEPENDENT	\$1,377.78	\$1,377.78
RETIREE & DEPENDENT	\$2,755.56	\$2,421.56

DHMO	W/O District Contribution	With District Contribution
RETIREE	\$1,340.08	(\$1,340.08 - \$334) = \$1,006.08
DEPENDENT	\$1,340.08	\$1,340.08
RETIREE & DEPENDENT	\$2,680.16	\$2,346.16

HDHP	W/O District Contribution	With District Contribution
RETIREE	\$ 998.67	(\$998.67 - \$334) = \$ 664.67
DEPENDENT	\$ 998.67	\$ 998.67
RETIREE & DEPENDENT	\$1,997.34	\$1,663.34

SENIOR ADVANTAGE (Requires Medicare A & B)	W/O District Contribution	With District Contribution
RETIREE	\$250.97	(\$250.97 - \$334) = \$ -83.03
DEPENDENT	\$250.97	\$250.97
RETIREE & DEPENDENT	\$501.94	\$167.94

For each month that you or your dependent is Medicare eligible and not enrolled in Senior Advantage, enrollment will continue in the plan previously enrolled (HMO, DHMO, HDHP). The monthly premium will be between \$1,900 - \$2,100 (minus the District contribution, if eligible), depending on the plan.

Sutter Health Plus (SHP):

SHP is for retirees or dependents without Medicare. There is not an SHP Medicare plan. For retirees covering dependents (where one individual is Medicare eligible and one is not), the individual without Medicare would remain in SHP, while the individual with Medicare would choose between the UHC Medicare Advantage HMO or PPO plans.

HMO	W/O District Contribution	With District Contribution
RETIREE	\$ 726.10	$(\$726.10 - \$334) = \$ 392.10$
DEPENDENT	\$ 726.10	\$ 726.10
RETIREE & DEPENDENT	\$1,452.20	\$1,118.20

HDHP	W/O District Contribution	With District Contribution
RETIREE	\$ 597.40	$(\$597.40 - \$334) = \$263.40$
DEPENDENT	\$ 597.40	\$597.40
RETIREE & DEPENDENT	\$1,194.80	\$860.80

Western Health Advantage (WHA):

WHA is for retirees/dependents under the age of 65. There is not a WHA Medicare plan. For retirees covering dependents(where one individual is Medicare eligible and one is not), the individual without Medicare would remain in WHA, while the individual with Medicare would choose between the UHC Medicare Advantage HMO or PPO plans.

HMO	W/O District Contribution	With District Contribution
RETIREE	\$ 710.14	$(\$710.14 - \$334) = \$ 376.14$
DEPENDENT	\$ 710.14	\$ 710.14
RETIREE & DEPENDENT	\$1,420.28	\$1,086.28

HDHP	W/O District Contribution	With District Contribution
RETIREE	\$ 539.84	$(\$539.84 - \$334) = \$205.84$
DEPENDENT	\$ 539.84	\$539.84
RETIREE & DEPENDENT	\$1,079.68	\$745.68

United Healthcare (UHC):

United Healthcare also offers two plans for retirees and their dependents who have Medicare; United Healthcare Medicare Advantage HMO and Medicare Advantage PPO. Both plans require enrollment in Medicare Parts A & B. Both the retiree and dependent must be enrolled in the same plan.

Participants in UHC Medicare Advantage HMO must sign over their Medicare to United Healthcare. All care must go through the primary care physician.

Participants in UHC Medicare Advantage PPO may see any doctor in the continental United States who accepts Medicare.

UHC MEDICARE ADVANTAGE HMO	W/O District Contribution	With District Contribution
RETIREE	\$ 547.41	$(\$547.41 - \$334) = \$213.41$
DEPENDENT	\$ 547.71	\$547.41
RETIREE & DEPENDENT	\$1,094.82	\$760.82

UHC MEDICARE ADVANTAGE PPO	W/O District Contribution	With District Contribution
RETIREE	\$ 598.39	$(\$598.39 - \$334) = \$264.39$
DEPENDENT	\$ 598.39	\$598.39
RETIREE & DEPENDENT	\$1,196.78	\$862.78

DENTAL INSURANCE

Los Rios offers a Delta Dental HMO (DeltaCare) and a Delta Dental PPO to retirees. Election in a plan must be made at retirement or enrollment in a plan is forfeited. However, you may transfer between the two plans during an open enrollment period. The retiree and dependent must elect the same plan.

PPO: 11484-03123

With the PPO plan, you may continue with your current dentist. Your percentage as an active employee will carry into the retiree plan, as long as there is not a break in coverage (enrolling in the DeltaCare plan and subsequently re-enrolling in the PPO plan constitutes a break in coverage). Also, any services as an active employee counts toward your maximum annual coverage amount for the retiree plan.

	In Network	Out of Network
Maximum Coverage	\$1,700 per person/calendar year	\$1,500 per person/calendar year
Diagnostic & Preventative Basic	70 – 100%	70 – 100%
Crowns & Cast Restorations	70%	70%
Prosthodontics	50/50	50/50

Monthly Rates

Retiree:	\$114.77
Retiree + 1 dependent:	\$205.06
Family:	\$224.97

DeltaCare: 1691-0131

DeltaCare is an HMO plan. You must pick a dentist from a list of providers (www.deltadentalins.com). To obtain information about co-pays for specific services, contact Delta Dental Customer Service at 800-422-4234.

Description	Retiree's Cost
Cleaning every 6 months Additional Cleanings	No Cost \$45
Amalgam Fillings Resin Based Fillings Crowns, Resin-based composite	No Cost \$0-\$85 \$50
Prosthodontics	\$145-\$210

Refer to the DeltaCare brochure for full coverage details

Monthly Rates

Retiree:	\$25.72
Retiree + 1 dependent:	\$45.50
Family:	\$49.46

OPEN ENROLLMENT

Open enrollment is held annually during April/May, with a July 1st effective date. During open enrollment, a retiree may add dependents, change between Los Rios medical plans and change between Los Rios dental plans. If the retiree has cancelled their Los Rios medical plan, they will not be allowed to re-enroll during this open enrollment period but must wait until their “Special Enrollment Period.”

COBRA

Under the federal law -- the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), a retiring employee may elect to continue the same insurance plans, with the same coverage benefits they were enrolled in as an active employee. This coverage can only be extended for 18 months.

Please note that you will receive COBRA information even if you have elected retiree insurance, in compliance with Federal Law. Basic pacific will send you COBRA election information. If you elect to continue any plan under COBRA, all payments will be handled through Basic pacific on behalf of Los Rios.

Note: If a retiree elects to continue medical and/or dental insurance through COBRA/Cal COBRA instead of the Los Rios retiree plan, they will not be eligible to join the retiree plan once COBRA/Cal COBRA is exhausted; however, they are eligible to begin receiving the District contribution towards their insurance cost.

There is not a District contribution toward any COBRA or Cal COBRA plan (this includes medical).

Once a retiree becomes entitled to Medicare, they are no longer eligible for COBRA and their COBRA coverage may be canceled.

2021 – 2022 COBRA Monthly Premiums:

Delta Dental	\$	135.66
Kaiser HMO	\$	1,665.46
Kaiser DHMO	\$	1,541.05
Kaiser HDHP	\$	1,052.64
Sutter Health Plus HMO	\$	1,592.73
Sutter Health Plus HDHP	\$	1,310.49
Western Health Advantage HMO	\$	1,381.80
Western Health Advantage HDHP	\$	1,046.74
VSP Basic Plan - Single	\$	9.42
Double	\$	13.77

	Family	\$	24.68
VSP Buy Up Plan -	Single	\$	15.78
	Double	\$	22.98
	Family	\$	41.23

LIFE INSURANCE

Regular employees who had an assignment of .50 FTE or more were provided a District paid life insurance policy. At retirement, you have the option of converting both the Los Rios paid \$50,000 life insurance policy and any supplemental life insurance policy you currently hold to a “Whole Life” policy. These policies will be at your cost, without a contribution from Los Rios.

Upon retiring, you will receive a Notice of Continuation of Coverage form via email or mailed directly to your home address. If you are interested in continuing your policy, follow the directions provided in the notice.

LONG TERM CARE

At retirement, you also have the option of continuing your long term care plan through UNUM at the same rate. At this time, you would pay your premium directly to UNUM.

Upon retiring, you will receive a Long Term Care Coverage Continuation form mailed directly to your home address. If you are interested in continuing your policy, complete the form and mail it to Unum. The continuation of coverage must be elected within 60 days of the date the group coverage would otherwise end. Unum will then send bills directly to your home address, and you will submit payment directly to Unum.

If you have any questions or would like additional information, please contact Unum at 1(800) 227-4165.

ARAG LEGAL SERVICES

Upon retirement, ARAG will send you information regarding your right to convert to a conversion plan. You will have 90 days from the date of loss to enroll on a conversion plan.

VOYA

If you are enrolled in any of the VOYA voluntary benefits, accident insurance, critical illness insurance, or hospital indemnity insurance, you will be given an opportunity to convert to a conversion plan. You will receive a letter from VOYA with 90 days to opt to a conversion plan.

SICK LEAVE

STRS:

Submit the Express Benefit Form from your STRS application packet to the Employee Benefits Department. After your last absence report is processed, the Employee Benefits Department will complete the form with your unused sick leave, and send it to STRS.

PERS:

Once your last absence report is processed, the Employee Benefits Department will log into the CalPERS online system and report your unused sick leave. You should receive a letter from CalPERS indicating the amount of sick leave reported and the impact on your retirement check.

VACATION

If you accrue vacation while working for Los Rios, your unused, accrued vacation hours will be payable to you when you retire. Vacation hours for retirees age 55 and older are paid into the Special Pay Plan, which is a 403(b) retirement plan for special forms of compensation paid to employees in a tax-advantaged manner. Contributions to the Special Pay Plan permanently save payroll taxes, including 7.65% Social Security and Medicare taxes, on the money placed into the plan.

Envoy Plan Services and MidAmerica administer the Los Rios Special Pay Plan. MidAmerica will establish a 403(b) account on your behalf and will mail you a Welcome Packet with more detail. You are 100% vested in the account balance at all times. Your account balance earns a guaranteed fixed interest rate which is set each January. Assets can remain in the Special Pay Plan or you may withdraw the funds (at which point they will be subject to income tax), take multiple distributions, or rollover funds to an IRA or other retirement plan.

Once your account is established, even before you receive the welcome packet, you can log into the following site and download forms (including the Distribution Form):

www.midamerica.biz

For the first time logging in, you will need to use your SSN as the username and the last 4 digits of the SSN as the password.

For additional information on retirement benefits, please visit our website:

employees.losrios.edu/employee-groups/retirees.

If you have any questions concerning retiree health benefits, please contact Kris Kurk at 916-568-3060 or via email at retirees@losrios.edu.