

LAS LOMITAS SCHOOL DISTRICT
Open Enrollment –Health, Dental and Vision Insurance

Open Enrollment for health insurance begins on September 11, 2017 and ends on October 6, 2017.

During open enrollment employees are able to:

- Change their plan.
- Add dependents (A spouse or dependent children under age 26).
- Enroll for the first time.

Any changes made during open enrollment are effective beginning January 1, 2018.

CalPERS Medical Plan Coverage Changes:

To make changes during open enrollment a form HBD-12 must be completed. Employees may download and print the HBD-12 form [here](#). Items number 1, 2, 3, 4,6,7,9,17,19,20, and 21 must be completed. This form must be turned into **the payroll/benefits office by 5:00 p.m. on Friday, October 6, 2017.** Changes processed during open enrollment become effective January 1, 2018.

Plan rates are increasing effective January 1, 2018 as detailed below. These rates will be reflected in the employee’s December 2017 paycheck.

CalPERS Health Insurance Premiums (effective 1/1/2018)

Rates are effective January 1 through December 31.

		Employee	Employee Plus One	Employee Plus Two or More
Anthem Select HMO	Code	4541	4542	4543
	Rate	856.41	1,712.82	2,226.67
Anthem Trad HMO	Code	4501	4502	4503
	Rate	925.47	1,850.94	2,406.22
Blue Shield Access +HMO	Code	1021	1022	1023
	Rate	889.02	1,778.04	2,311.45
HealthNet SmartCare	Code	3751	3752	3753
	Rate	863.48	1,726.96	2,245.06
Kaiser	Code	1041	1042	1043
	Rate	779.86	1,559.72	2,027.64
PERS Choice PPO	Code	1061	1062	1063
	Rate	800.27	1,600.54	2,080.70
PERS Care PPO	Code	1221	1222	1223
	Rate	882.45	1,764.90	2,294.37
PERS Select PPO	Code	1261	1262	1263
	Rate	717.50	1,435.00	1,865.50
United Health Care	Code	4261	4262	4263
	Rate	1,371.84	2,743.68	3,566.78

*Not all plans are available in all areas.

The Health Program Guide can be found here: [Health Program Guide](#)

The 2018 Health Benefit Summary can be found here: [Health Benefit Summary](#)

More information on the health plans and evidence of coverage booklets can be found: [Health Plan Information](#)

Questions regarding open enrollment should be directed to Pat Flot, Payroll/Benefits at 864-6311 ext. 15.

Proof of Coverage Requirement:

All employees who are eligible for medical coverage and are not enrolled in a District sponsored medical plan will need to provide current proof of outside health coverage. This proof can be provided with a copy of your current insurance card, a letter from your current insurance carrier stating you are currently covered, or a letter from the employer that carries the other health insurance stating you are currently covered. **If you do not provide current proof of other coverage during this open enrollment period, you will lose your cash back payments effective 12/31/17. Proof must be provided no later than 5:00 p.m. on Friday, October 6, 2017.**

Delta Dental Insurance Coverage Changes:

The employee's eligibility to enroll in the Delta Dental Plan is only at the time of hire. If the employee declined coverage at the time of eligibility, the employee may not enroll as long as he/she is employed with the District, no exceptions. Additionally, if the employee drops dental coverage during his/her employment, the employee may not enroll again as long as he/she is employed with the District.

Employees currently enrolled in the dental plan may add dependents to their coverage during the open enrollment period. Dependents previously covered and dropped from coverage may only be added back onto the coverage if there has been a three year waiting period from when the dependent was dropped, unless a qualifying event exists. Qualifying dependents are: spouse, domestic partner, and children under the age of 26. Children must be added before their 4th birthday.

Employees who are not adding or dropping dependents to their dental plan coverage do not need to submit a dental change form.

Vision Service Plan (VSP) Insurance Coverage:

Employees who previously declined vision coverage may enroll during this open enrollment period with coverage beginning January 1, 2018. Employees may also add dependents to their vision coverage during the open enrollment period. Qualifying dependents are: spouse, domestic partner, and children under the age of 26. Premium deductions for January 2018 coverage are deducted in December 2017 pay checks. Employees may want to check if their medical insurance plan covers vision eye exams and glasses.

Delta Dental rates will remain the same for the 2018 plan year as specified below. VSP rates also remain unchanged.

Plan	Employee	Employee Plus One	Employee Plus One or More
Delta Dental	76.30	152.59	227.36
Vision Service Plan	11.67	24.39	35.02

Enrollment forms for these two plans are attached to this email or you may stop by the District Office to complete them.