

**2024**



# **Employee Benefits Guide**

# WELCOME TO YOUR FULLERTON JOINT UNION HIGH SCHOOL DISTRICT (FJUHSD) EMPLOYEE BENEFITS!

FJUHSD takes pride in offering a benefit program that provides flexibility for the diverse and changing needs of our employees. Employees and their family members have a full range of benefits to choose from. You choose the options that best meet your needs.

This brochure provides a summary of your benefit options and is designed to help you make choices and enroll for coverage effective October 1, 2024. For more information about any of the benefits described here, please contact Insurance, Business Services at **(714) 870-2930**.

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# ENROLLMENT INFORMATION

## Who May Enroll

All active employees regularly scheduled to work a minimum of 20 hours per week, 75% or more of a school year and their eligible dependents may participate in FJUHSD's benefits program. FSTO employees must work no less than a 60% assignment to be eligible to participate. Eligible dependents include:

- Your legally married spouse
- Your registered domestic partner (as defined by the state of California)
- Your children, stepchildren or children of your registered domestic partner to age 26, regardless of marital or student status
- Any children for whom you are required to provide coverage under a Qualified Medical Child Support Order
- Your unmarried children, step-children or children of your registered domestic partner of any age, if they are incapable of self-care due to a physical or mental disability

## When You Can Enroll

As an eligible employee, you may enroll at the following times:

- As a new hire, you may enroll in benefits on the first day of the month following your date of hire.
- During annual open enrollment.
- Within 31 days of a qualified change in family status as defined by the IRS – see Changes to Enrollment for details.

## Paying for Your Coverage

You and FJUHSD share in the cost of the Health and Welfare benefits you elect. Your contributions are deducted before taxes are withheld which saves you tax dollars. Paying for benefits before-tax means that your share of the costs is deducted before taxes are determined, resulting in more take-home pay for you. As a result, the IRS requires that your elections remain in effect for the entire year. You cannot drop or change coverage unless you experience a status change.



# ENROLLMENT INFORMATION

## Changes to Enrollment

During our annual open enrollment period, you may make new benefit elections for the following October 1 effective date.

### Qualifying Event

Once you make your benefit elections, you cannot change them throughout the year unless you experience a qualifying event as defined by the IRS.

Examples include, but are not limited to:



Marriage, divorce, legal separation, or annulment



Birth, adoption, or death of a child or spouse



Qualified Medical Child Support Order (QMCSO)



Change in your dependent's eligibility status



Loss of coverage from another health plan



Change in your residence or workplace (if your benefit options change)



Loss of coverage through Medicaid or Children's Health Insurance Program (CHIP)



Eligibility for a federal or state premium assistance program under Medicare, Medicaid, or CHIP

### Important!

**Coverage for a new dependent is not automatic.** If you experience a qualifying event, you have 30 days to update your coverage. Please contact Insurance, Business Services immediately following a qualifying event to complete the appropriate election forms as needed. If you do not update your coverage within 30 days of the qualifying event, you must wait until the next annual open enrollment period to update your coverage.



# ENROLLMENT INFORMATION

## How to Enroll Online

To enroll online, go to [www.afenroll.com/enroll](http://www.afenroll.com/enroll) (compatible with Safari, Edge, and Chrome). You can log in using the following information:

- Type in your **user ID**: Your Social Security Number (SSN)
- Type in your **PIN**: Your Personal Identification Number is the last 4 digits of your SSN and last 2 digits of your birth year. Once you log in, you will be prompted to setup a new unique PIN. (Please contact American Fidelity at **951-600-0122** if you need your PIN reset.)
- Click the **Log On** button.

## Video on How to Enroll

To view a step-by-step video on how to enroll using AFenroll®, please visit [americanfidelity.com/howtoenroll](http://americanfidelity.com/howtoenroll).

## Helpful Tips

- **Log Out**: If you leave the site in the middle of the process, click the 'Log Out' button to save your selections.
- **Print Confirmation**: Be sure to print your confirmation. Once you confirm your enrollment, you may click on the confirmation link at the bottom of the 'Sign/Submit Complete' to print your confirmation statement.
- **Re-Enter/Make Changes**: You may re-enter the enrollment site (including to 'View Only' your original selections) to make changes at any time during your enrollment period. Please note: Before you exit the system, you must re-confirm with your PIN or your enrollment will not be valid.
- **Opting Out**: If you choose not to select benefits, you must enter each product module and make that choice.
- **Required**: Social Security Numbers and Dates of Birth are required for all employees and their dependents.
- **Adding Dependent**: If you are adding a dependent as a beneficiary, their Social Security Number is required.
- **Physician Codes**: Have your Primary Care Physician (PCP) codes available.
- **Signature**: You will use your PIN to confirm applications and your enrollment confirmation.

## Important Items to Consider When You Enroll

- Review your beneficiaries/dependents.
- Review all available benefit options, including portable insurance plans that you may keep, even if you change jobs.

## What You Need to Enroll

- Driver's license
- Bank account information (may be required for FSA account setup if signing up for direct deposit)
- Spouse and children's dates of birth and Social Security Numbers
- Beneficiary information

# HEALTH PLAN CONTRIBUTIONS FOR FULL TIME EMPLOYEES (1.00 FTE)

Plan	Ten Monthly Contributions via Payroll Deduction*
<b>Kaiser-HMO \$20 Co-pay</b>	
Single	No cost—FJUHSD pays the full premium
Two-Party	No cost—FJUHSD pays the full premium
Family	No cost—FJUHSD pays the full premium
<b>Anthem Blue Cross Vivity HMO</b>	
Single	No cost—FJUHSD pays the full premium
Two-Party	No cost—FJUHSD pays the full premium
Family	No cost—FJUHSD pays the full premium
<b>Anthem Blue Cross HMO</b>	
Single	No cost—FJUHSD pays the full premium
Two-Party	No cost—FJUHSD pays the full premium
Family	No cost—FJUHSD pays the full premium
<b>Anthem Blue Cross PPO 100-G</b>	
Single	\$153.75
Two-Party	\$327.54
Family	\$456.49
<b>Anthem Blue Cross PPO 90-E</b>	
Single	\$147.08
Two-Party	\$312.91
Family	\$435.66
<b>Anthem Blue Cross PPO 80-G</b>	
Single	\$134.04
Two-Party	\$284.29
Family	\$395.43
<b>Delta Dental PPO</b>	
Single	No cost—FJUHSD pays the full premium
Two-Party	No cost—FJUHSD pays the full premium
Family	No cost—FJUHSD pays the full premium
<b>Vision Service Plan (VSP)</b>	
Single	No cost—FJUHSD pays the full premium
Two-Party	No cost—FJUHSD pays the full premium
Family	No cost—FJUHSD pays the full premium

\*FTE more than or equal to .6 (Certificated) or .5 (Classified) but less than 1.00—see Insurance, Business Services for rates.

# MEDICAL AND PRESCRIPTION DRUG BENEFITS

## Medical Plan Options

FJUHSD offers employees five medical plans to choose from through SISC. There are two HMO plans available through Kaiser Permanente and Anthem Blue Cross. There are also three PPO plans available through Anthem Blue Cross. Medical plan costs are shown on the previous page. Highlights of the medical plans follow. All health plans come with additional perks which are described on pages 13 – 18.

### Kaiser Permanente HMO Medical Plan

With the Kaiser Health Maintenance Organization (HMO) plan, services must be obtained at a Kaiser facility. Kaiser integrates all elements of healthcare such as physicians, medical centers, pharmacy and administration in one convenient facility.

#### Highlights of the Kaiser Permanente HMO Plan include:

- To be eligible for this plan, you must reside in the Kaiser Southern California service area.
- There is no deductible and no claim forms to file.
- Services are only covered when you use Kaiser providers and facilities, except in the case of emergency.
- Kaiser offers the convenience of doctors, pharmacies and labs under one roof.
- Kaiser does not require that you choose a primary care physician until after you enroll in the plan.
- Kaiser offers online tools, so you can email your doctor's office, make appointments, refill prescriptions, and more.

### Anthem Blue Cross HMO Medical Plan

With the Anthem Blue Cross Health Maintenance Organization (HMO) plan, you must choose a Primary Care Physician (PCP) or medical group. All of your care must be directed through your PCP or medical group. Any specialty care you need will be coordinated through your PCP and will generally require a referral or authorization. You will receive benefits only if you use the doctors, clinics and hospitals that belong to the medical group in which you are enrolled, except in the case of an emergency.

#### Highlights of the Anthem Blue Cross HMO plan includes:

- To be eligible for these plans, you must reside in the Anthem Blue Cross of California HMO service area.
- There are no deductibles and no claim forms to file.
- You must select a PCP from the Anthem Blue Cross pre-approved list of healthcare providers.
- If you need specialist care, you'll need a referral from your PCP.
- Each family member may choose his or her own Anthem Blue Cross HMO network PCP.
- Non-network benefits are not covered.
- Prescription drug coverage is provided through Navitus.

### Find an In-Network HMO Medical Provider:

- **Kaiser Permanente:** Go to [www.kaiserpermanente.org](http://www.kaiserpermanente.org) or call (800) 464-4000 to find a Kaiser Permanente provider near you.
- **Anthem Blue Cross:** Go to [www.anthem.com/ca/sisc](http://www.anthem.com/ca/sisc) or call (800) 825-5541 to find a Anthem Blue Cross network provider near you. HMO participants should refer to the HMO (Full Network).

### Chiropractic and Acupuncture for Anthem Blue Cross Health Plan Members

HMO members can access their chiropractic and acupuncture benefits through their medical group with a referral from their Primary Care Provider, or they can self-refer and go directly to a provider in the American Specialty Health (ASH) Network. To find providers, visit [www.anthem.com/ca/sisc](http://www.anthem.com/ca/sisc), select **Find Care**, and then select **HMO Chiropractic and Acupuncture Network**.

PPO members can search the PPO network for contracted chiropractors and acupuncturists. To find contracted chiropractors and acupuncturists, visit <https://www.anthem.com/ca/sisc/find-care/>

# MEDICAL AND PRESCRIPTION DRUG BENEFITS

## Anthem Blue Cross PPO Plans

You have the option of choosing between three Anthem Blue Cross Preferred Provider Organization (PPO) plans. With these plans, you have the freedom to choose your doctor without using a Primary Care Physician (PCP) and you may self-refer to specialists. You may use a PPO provider whose negotiated rates provide richer levels of benefits with claim forms filed by the providers. You have the option to obtain services using a non-network provider; however, you will be responsible for the difference between the covered amount and the actual charges and you may be responsible for filing claims.

### Highlights of the Anthem Blue Cross PPO plans include:

- You are not required to select a PCP.
- As a PPO member, you may use a PPO provider outside of the PPO plan network, but you will pay more out-of-pocket and may be responsible for filing claims. If you visit a non-network provider or health care facility, the plan will pay benefits only up to the “allowed amount,” which is based on a limited fee schedule. You will have to pay any charges above the allowed amount (in addition to your regular co-insurance).
- Prescription drug coverage is provided through Navitus.

### Find an In-Network Anthem Blue Cross PPO Medical Provider:

Go to [www.anthem.com/ca/sisc](http://www.anthem.com/ca/sisc) or call (800) 825-5541 to find a Anthem Blue Cross network provider near you. PPO participants should refer to the PPO network.



## SISC Health Plan Perk: Teladoc Expert Medical Opinions

SISC offers a valuable expert second opinion service through Teladoc Expert Medical Opinions. The service is free, easy and 100% confidential. Get answers to your health care questions and take advantage of medical opinions from world-leading experts. For more information, visit [teladoc.com/sisc](http://teladoc.com/sisc) or call (800) 835-2362.

# HMO MEDICAL AND PRESCRIPTION DRUGS

	Kaiser-HMO \$20 Co-pay	Anthem Blue Cross Vivity HMO	Anthem Blue Cross HMO
	In-Network Only	In-Network Only	In-Network Only
Lifetime Maximum Benefit	Unlimited	Unlimited	Unlimited
Co-Insurance (Plan Pays)	100%	100%	100%
Calendar Year Deductible	Not applicable	Not applicable	Not applicable
Calendar Year Out-of-Pocket Maximum	Individual: \$1,500 Family: \$3,000	Individual: \$1,000 Family: \$2,000	Individual: \$1,000 Family: \$2,000
<b>Covered Services</b>	<b>You Pay</b>	<b>You Pay</b>	<b>You Pay</b>
Office Visit	\$20	\$10	\$10
Telemedicine	No charge	\$10 through MDLive	\$10 through MDLive
Urgent Care	\$20	\$10	\$10
Preventive Care	No charge	No charge	No charge
X-Ray/Lab	No charge	No charge	No charge
Complex Imaging	No charge	\$100	\$100
Emergency Room Facility	\$100 (waived if admitted)	\$100 (waived if admitted)	\$100 (waived if admitted)
Inpatient Hospital (Preauthorization Required; Limits May Apply)	No charge	No charge	No charge
Outpatient Hospital	\$20	No charge	No charge
Outpatient Surgery	\$20	No charge	No charge
Ambulance (Ground or Air)	\$50	\$100	\$100
Acupuncture / Chiropractic	\$10 (limited to 30 visits)	\$10 (limited to 20 visits)	\$10 (limited to 30 visits)
Physical and Occupational Therapy	\$20	\$10	\$10
<b>Prescription Drugs</b>	<b>You Pay</b>	<b>You Pay</b>	<b>You Pay</b>
Separate Rx Calendar Year Out-of-Pocket Maximum	Not applicable	Individual: \$1,500 Family: \$2,500	Individual: \$1,500 Family: \$2,500
Pharmacy Benefit Manager	Kaiser Permanente	Navitus	Navitus
Retail Pharmacy	100-Day Supply	30-Day Supply	30-Day Supply
– Generic: Costco	Not applicable	No charge	No charge
– Generic: Network Pharmacy	\$10	\$7	\$7
– Brand	\$20	\$25	\$25
– Specialty	\$20 (30-Day Supply)	\$25 (Navitus Mail only)	\$25 (Navitus Mail only)
Mail Order	100-Day Supply	90-Day Supply: Costco	90-Day Supply: Costco
– Generic	\$10	No charge	No charge
– Brand	\$20	\$60	\$60

# PPO MEDICAL AND PRESCRIPTION DRUGS

	Anthem Blue Cross PPO 100-G	Anthem Blue Cross PPO 90-E	Anthem Blue Cross PPO 80-G
	In-Network	In-Network	In-Network
Lifetime Maximum Benefit	Unlimited	Unlimited	Unlimited
Co-Insurance (Plan Pays)	100%	90%	80%
Calendar Year Deductible	Individual: \$500 Family: \$1,000	Individual: \$300 Family: \$600	Individual: \$500 Family: \$1,000
Calendar Year Out-of-Pocket Maximum	Individual: \$1,000 Family: \$3,000	Individual: \$1,000 Family: \$3,000	Individual: \$2,000 Family: \$4,000
<b>Covered Services</b>	<b>You Pay</b>	<b>You Pay</b>	<b>You Pay</b>
Office Visit (No charge for first 3 visits)	After 3 visits: \$20	After 3 visits: \$20	After 3 visits: \$20
Telemedicine	\$10 through MDLive	\$10 through MDLive	\$10 through MDLive
Urgent Care	\$20	\$20	\$20
Preventive Care	No charge	No charge	No charge
X-Ray/Lab	No charge after deductible	10% after deductible	20% after deductible
Complex Imaging	No charge after deductible	10% after deductible	20% after deductible
Emergency Room Facility	No charge after deductible, plus \$100 (waived if admitted)	10% after deductible, plus \$100 (waived if admitted)	20% after deductible, plus \$100 (waived if admitted)
Inpatient Hospital (Preauthorization Required; Limits May Apply)	No charge after deductible	10% after deductible	20% after deductible
Outpatient Hospital	No charge after deductible	10% after deductible	20% after deductible
Outpatient Surgery	No charge after deductible	10% after deductible	20% after deductible
Ambulance (Ground or Air)	No charge after deductible, plus \$100	10% after deductible	20% after deductible
Acupuncture / Chiropractic	No charge after deductible	10% after deductible	20% after deductible
Physical and Occupational Therapy	No charge after deductible	10% after deductible	20% after deductible
<b>Prescription Drugs</b>	<b>You Pay</b>	<b>You Pay</b>	<b>You Pay</b>
Separate Rx Calendar Year Out-of-Pocket Maximum	Individual: \$2,500 Family: \$3,500	Individual: \$2,500 Family: \$3,500	Individual: \$2,500 Family: \$3,500
Pharmacy Benefit Manager	Navitus	Navitus	Navitus
Retail Pharmacy	30-Day Supply	30-Day Supply	30-Day Supply
– Generic: Costco	No charge	No charge	No charge
– Generic: Network Pharmacy	\$9	\$9	\$9
– Brand	\$35	\$35	\$35
– Specialty	\$35 (Navitus Mail only)	\$35 (Navitus Mail only)	\$35 (Navitus Mail only)
Mail Order	90-Day Supply	90-Day Supply	90-Day Supply
– Generic	No charge	No charge	No charge
– Brand	\$90	\$90	\$90

# MENTAL HEALTH BENEFITS

## Mental Health Benefits Available through the FJUHSD Medical Plans

	Kaiser-HMO \$20 Co-pay	Anthem Blue Cross HMO	Anthem Blue Cross PPO 100-G	Anthem Blue Cross PPO 90-E	Anthem Blue Cross PPO 80-G
	In-Network Only	In-Network Only	In-Network	In-Network	In-Network
Covered Services	You Pay	You Pay	You Pay	You Pay	You Pay
Virtual Visits	No charge	\$10 (MDLive)	\$10 (MDLive)	\$10 (MDLive)	\$10 (MDLive)
Outpatient Visits	\$20	No charge	No charge after deductible	10% after deductible	20% after deductible
Inpatient Visits	No charge	No charge	No charge after deductible	10% after deductible	20% after deductible

### Kaiser Mental Wellbeing and Wellness Apps

Kaiser members have access to three free apps to support mental wellness: Calm, myStrength, and Ginger. See page 16 for details.



# MENTAL HEALTH BENEFITS

## Anthem Employee Assistance Program

FJUHSD is pleased to provide employees and their household with the Anthem Employee Assistance Program (EAP) through SISC. This program is available 24/7/365, is completely confidential, and provides significant support in a wide variety of areas.

### Support and Counseling

The EAP provides confidential support in balancing a wide array of challenges in areas such as:

- Relationship difficulties
- Managing change and stress
- Legal and financial problems
- Marriage, family or parenting concerns
- And more

The EAP provides you with to 6 counselling sessions per issue per benefit year

### Identity Monitoring and Theft Resolution

- Free identity monitoring and theft resolution services through IDnotify. The customer care team is available 24/7/365, with robust knowledge in both credit and non-credit restoration, with CTRMS (Certified Identity Theft Risk Management Specialist), FCRA, and FACTA certifications.
- Your IDnotify specialist will help you determine if an identity theft event has occurred and guide you through any necessary restoration activities.

### Legal and Financial Resources

- **Legal Assist:** A library of articles on legal topics and issues
- **Legal Forms:** 100 legal forms for a variety of family and consumer situations
- **State Specific Legal Forms:** Advanced directives and instructions for each state
- **Estate Planning:** Articles and resources to address estate planning questions
- **Financial Calculators:** Will allow you to get answers and explore different options regarding home and personal financing, investing, and retirement
- **PocketSmith Discount:** PocketSmith Personal Financial Manager is an online tool that uses an innovative calendar-based approach to help employees quickly and easily manage their personal finances.

### myStrength App

- Helps you learn to reduce stress, anxiety, depression or substance abuse
- Helps keep you motivated with engaging activities that help you learn new ideas

### Seminars and Articles

- Online resources for a wide array of topics, including both a library of articles and on-demand seminars

### Savings Center

- Discount shopping program that is provided through Perks At Work
- Discounts of up to 25% on name brand, practical, and luxury items

## How to Access EAP Benefits

- Call **(800) 999-7222**
- Visit [anthemEAP.com](https://anthemEAP.com) (to log in, enter SISC as the program name).
- Sign up for an account to access all EAP benefits

# VOLUNTARY HEALTH BENEFITS

All employees and enrolled family members receive the following benefits when enrolled in a FJUHS medical plan (through SISC).

## Telemedicine Benefits

Phone and/or video visits are an excellent option for convenient, accessible care when you don't need a doctor to see you in person. They are also a good choice when away from home or if you need short term prescription drug refills. FJUHS provides telemedicine coverage with all medical plans.

### Kaiser Members: Phone and Video Visits

Log in to your Kaiser account at [www.kp.org](http://www.kp.org) to make a free phone or video appointment with your doctor or call (800) 464-4000

- For phone visits, the doctor will call you at the time of the appointment
- For video visits, go to <https://mydoctor.kaiserpermanente.org/ncal/videovisit/#>, click Join your visit and log in
- There is no copay for phone or video visits

### Anthem Blue Cross Members: MDLIVE

MDLIVE gives you access to doctors 24/7 via phone or secure video for non-emergency medical conditions.

The copay will be \$10 per visit starting 10/1/2024.

- MDLIVE doctors have 15 years experience practicing medicine on average.
- Pediatricians are on call.
- You can access behavioral health therapy and psychiatrist visits through MDLive
- Access MDLIVE at (888) 632-2738, visit [mdlive.com/sisc](http://mdlive.com/sisc) or download the app from the App Store or Google Play

## Common Conditions Treated With Telemedicine

General Care			Pediatric Care
Allergies	Fever	Respiratory Infections	Cold & Flu
Asthma	Headache	Sinus Infections	Constipation
Bronchitis	Infections	Skin Infections	Ear Infections
Cold & Flu	Insect Bites	Sore Throat	Nausea
Diarrhea	Joint Aches	Urinary Tract Infections	Pink Eye
Ear Infections	Rashes	And More!	And More!

## Nurse Support

FJUHS provides 24/7/365 Nurse support with all medical plans at no cost to you. Nurses can help:

- Determine if you need to see a doctor either in-person or via telemedicine
- Recommend home health care when appropriate
- Get the answer to health questions for you and your family

### Kaiser: Advice Nurse

Call (800) 464-4000 to speak to a Kaiser Advice Nurse at any time

### Anthem Blue Cross: 24-Hour Nurse Helpline

Call (800) 700-9184 to speak to a registered nurse or to access the Anthem AudioHealth Library

# HEALTH PLAN PERKS: ALL MEDICAL PLAN MEMBERS

All employees and enrolled family members receive the following benefits when enrolled in a FJUHSD medical plan (through SISC).

## Teladoc Medical Experts (Second Opinion)

- A free, 100% confidential benefit available to all FJUHSD health plan members
- Access expert guidance. Connect with a physician who guides you through every step in the process and coordinates your review with a team of specialists and your existing physician
- Receive collaborative care. Our team of doctors works with you to develop and deliver a clear diagnosis and treatment plan that's right for you
- Start a case, Submit your request [online](#), in the Teladoc mobile app or by calling (800) 835-2362.

## Health Smarts Program

- Free annual flu shot clinic
- Free, annual confidential health screening event for total cholesterol, HDL cholesterol, blood glucose, blood pressure and other key ratios—with each participant receiving a \$25 Amazon gift award code

## Discounted Gym Memberships

With the Active & Fit Direct program, you can choose from over 9,000 participating fitness centers and YMCAs nationwide for a much lower cost than you would pay on your own

- Use the online fitness tracking feature, which uses a variety of wearable devices and apps
- You pay only \$28 a month (plus \$25 enrollment fee and taxes)

## Kaiser Members

Visit [kp.org/choosehealthy](http://kp.org/choosehealthy)

Select either Northern or Southern California

Click "Choose Healthy"

Click "learn more" near the ASH Active & Fit logo at the bottom of the page

## Anthem Blue Cross Members

Log into [www.anthem.com/ca/sisc](http://www.anthem.com/ca/sisc)

Click "Discounts"

Visit "Special Offers"



# HEALTH PLAN PERKS: KAISER PLAN MEMBERS

Employees and enrolled dependents receive the following benefits when enrolled in the FJUHSD **Kaiser Permanente HMO** plan (through SISC).

## Healthy Lifestyle Programs

You have access to an array of free programs designed to support you in cultivating good health, fitness and well being. To learn more and/or join any of them, go to [kp.org/healthylifestyles](https://kp.org/healthylifestyles).

## Healthy Lifestyle Programs for Chronic Conditions

These programs are designed to support people living with chronic conditions or health issues. Go to [kp.org/healthylifestyles](https://kp.org/healthylifestyles) to join them.

- **Care for Diabetes:** Receive support in managing diabetes to help you lead a healthier, more satisfying life.
- **Care for Your Health:** A customized plan to help you handle medications and treatments, and deal with daily challenges
- **Care for Pain:** A personalized pain management plan can help you enjoy life to the fullest while dealing effectively with your chronic pain.

## Wellness Coaching

Partner with a wellness coach (available in both English and Spanish) at no cost to you. Programs are available to help you:

- Manage your weight
- Quit tobacco
- Reduce stress
- Increase activity
- Eat healthier

Call **(866) 862-4295** to get started.

## ChooseHealthy Discounts

This program offers a directory of complementary care, an online store, fitness club discounts, savings on health products and services, and more.

When you register for ChooseHealthy, you'll also receive a free annual Premium Membership (a \$69.95 value). This membership gives you access to online resources and tools to help you achieve your health and fitness goals. You can develop a personalized exercise or meal plan, track your progress, and more.

To get started, go to [kp.org/choosehealthy](https://kp.org/choosehealthy) or call **(877) 335-2746**.



# HEALTH PLAN PERKS: KAISER PLAN MEMBERS

Employees and enrolled dependents receive the following benefits when enrolled in the FJUHSD **Kaiser Permanente HMO** plan (through SISC).

## Mental Wellbeing and Wellness Apps

Kaiser Permanente offers three apps to help support your mental/emotional wellbeing at <https://kp.org/selfcareapps>.

- **Calm** is the #1 app for meditation, mental resilience, and sleep — designed to help lower stress, reduce anxiety, and more.

Kaiser Permanente members can access all the great features of Calm at no cost, including:

The Daily Calm, exploring a fresh mindful theme each day

More than 100 guided meditations

Sleep Stories to soothe you into deeper and better sleep

Video lessons on mindful movement and gentle stretching

- The **myStrength** app is a personalized program that helps you improve your awareness and change behaviors. Kaiser Permanente members can explore interactive activities, in-the-moment coping tools, community support, and more at no cost.

Mindfulness and meditation activities

Tailored programs for managing depression, stress, anxiety, and more

Tools for setting goals and preferences, tracking current emotional states and ongoing life events, and viewing your progress

- **Ginger** is available to all Kaiser members at no cost for up to 90 days. The Ginger app offers immediate 1 on 1 support for coping with many common challenges such anxiety, stress, low mood, issues with work or relationships and more. With Ginger, you can:

Text with a coach anytime, anywhere, 24/7

Discuss goals, share challenges, and create an action plan with your coach

Get personalized, interactive skill-building tools from a library of more than 200 activities

View recaps from each texting session, track progress, and work your coach to adjust you action plans



# HEALTH PLAN PERKS: ANTHEM BLUE CROSS PLAN MEMBERS



Employees and enrolled dependents receive the following benefits when enrolled in a FJUHSD **Anthem Blue Cross** medical plan (through SISC).

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## Time Well Spent

Anthem provides you with a large variety of wellness resources, designed to help you be healthier and more productive. To access Time Well Spent, visit <https://timewellspent-ca.anthem.com>

## Condition Care

- Free support to better understand and manage specific chronic health conditions and improve your overall quality of life
- Current, accurate data about Asthma, Diabetes, Congestive Heart Failure (CHF), Coronary Artery Disease (CAD) and Chronic Obstructive Pulmonary Disease (COPD) plus education to help you better manage and monitor your condition. ConditionCare also provides depression screening

## Costco Prescription Discounts

- Anthem plan members can receive free generic medications at Costco in addition to standard Costco discount pricing on other prescription drugs (narcotics, pain relievers and cough syrup with pain reliever are not eligible for the free generic medication offer)
- 90 day supplies of free generic medications are available through the Costco mail order program
- Costco membership is not required

## Hip, Knee, and Spine Surgical Benefits—Carrum Health (Anthem Blue Cross PPO Members Only)

Carrum Health is a special surgery benefit that provides exclusive access to “Centers of Excellence.” These hospitals and doctors provide for an improved patient experience and top quality, more affordable care. Eligible procedures include; hip replacement, knee replacement, cervical spinal fusion and lumbar spinal fusion. **This benefit is exclusive to Scripps Hospital and must be accessed through Carrum Health. This is only for PPO plans.**

- Access top-quality surgeons at Scripps with no out-of-pocket cost through Carrum Health.
- All medical bills, including deductibles, coinsurance and even travel expenses are covered
- To learn more, call Carrum Health at **(888) 855-7806**

## Anthem Blue Cross Discounts

- Anthem offers discounts on a wide array of different kinds of services and products
  - Explore the many discounts available by logging into [www.anthem.com/ca](http://www.anthem.com/ca) and selecting **Discounts**
-

# HEALTH PLAN PERKS: ANTHEM BLUE CROSS PLAN MEMBERS

Employees and enrolled dependents receive the following benefits when enrolled in a FJUHSD **Anthem Blue Cross** medical plan (through SISC).

## Enhanced Cancer Benefit—Contigo Health (Anthem Blue Cross PPO members only)

- If you receive a cancer diagnosis, this benefit provides an in-person evaluation with confirmation of diagnosis and development of a customized treatment plan at no charge.
- To access, call (877) 220-3556 or go to [contigohealth.com/sisc](https://contigohealth.com/sisc)

## Personal Health Coaching App—Vida Health

- Get one-on-one health coaching, therapy, digital programs and other tools and resources via online or mobile access. The program helps prevent, manage or reverse conditions such as pre-diabetes, diabetes, hypertension, obesity, depression, anxiety, etc.
- To access call (855) 442-5885 or visit <https://vida.com/sisc>

## Physical Therapy for Back or Joint Paid—Hinge Health (Anthem Blue Cross PPO members only)

- Get access to free wearable sensors and monitoring devices, unlimited one-on-one coaching and personalized exercise therapy.
- To access call (855) 902-2777 or visit <https://hingehealth.com/sisc>.

## 24/7 Access to Virtual Maternity & Postpartum Support—Maven (Anthem Blue Cross PPO members only)

- Consult with a care advocate who connect you with trustworthy content delivered by doctors, specialists coaches and other maternity providers to help deal with pregnancy and postpartum concerns.
- To access a Maven visit <https://mavenclinic.com/join/sisc>.



# TIPS ON USING YOUR MEDICAL BENEFITS

## 1 Ask Questions

If you are having a procedure or planning an upcoming procedure, make sure you know how the procedure will be covered and what your out-of-pocket cost will be, if any.

## 2 Utilize your Free Preventive Care Benefits to Stay Healthy

Preventive care benefits are covered at no charge to you (in-network only for the PPO plan). Regular preventive care can reduce the risk of disease, detect health problems early, protect you from higher costs down the road, and most importantly... potentially save your life! Take advantage of these no cost benefits now to hopefully avoid major illnesses and costs in the future.

## 3 Get the Right Health Care and Save Money

Choosing the right care for your medical situation will help save you money out-of-pocket:

- **Doctor's Office Visit:** This is the best choice for non-urgent medical issues that need to be seen in person.
- **Urgent Care:** This is the best choice for non-life threatening medical issues that require immediate care when you can't get an appointment for a Doctor's Office Visit.
- **Emergency Room:** You should use the Emergency Room for life threatening emergencies, or for other issues that require immediate medical care outside Urgent Care hours.

## 4 Use Generic Drugs When Available

The best way to save on prescriptions is to use generic medications as opposed to brand name drugs. When you use generic medications, you will pay the lowest copay.

Generic drug companies do not have to develop a medication from scratch, so the costs are significantly less to bring the drug to the market. Once a generic medication is approved, several companies can produce and sell the drug. This competition helps lower prices. In addition, many generic drugs are well-established, frequently used medications that do not require expensive advertising.

Generic drugs must use the same active ingredients as the brand name version of the drug. A generic drug must also meet the same quality and safety standards.

## 5 Use the Mail-Order Prescription Drug Benefit for Maintenance Medications

If you take medications on a long term basis, the mail order prescription drug benefit can save you money. As a Kaiser Permanente or Anthem Blue Cross member, you will receive discounts when you purchase maintenance medications through the mail-order pharmacy. In addition, your medications will be delivered to your home.

### Medical Plan Terms Video

Medical plan terms, such as deductibles, copays, coinsurance and out-of-pocket maximums, can sometimes be confusing. For a quick video that shows how these work, visit <http://video.burnhambenefits.com/terms>.

### Summary of Benefits and Coverage (SBC)

Health insurance issuers and group health plans are required to provide you with an easy-to-understand summary about your health plan's benefits and coverage. This regulation is designed to help you better understand and evaluate your health insurance choices. Summaries of Benefits and Coverage are available from Human Resources.

# DENTAL BENEFITS

## Delta Dental PPO

FJUHSD provides employees with dental coverage through the Delta Dental PPO plan.

- You may visit a PPO dentist and benefit from the negotiated rate or visit a non-network dentist. When you utilize a PPO dentist, your out-of-pocket expenses will be less.
- As a PPO member, you may use a PPO dentist outside of the PPO plan network, but you will pay more out-of-pocket and may be responsible for filing claims. Reimbursement is based on PPO contracted fees for PPO dentists, Premier contracted fees for Premier dentists and the program allowance for non-Delta Dental dentists. If you are balance billed by a dentist, you may be able to negotiate a lower payment directly with the dental office.

Plan Features	Delta Dental PPO	
	Delta Dental PPO dentists	Non-Delta Dental PPO dentists
Calendar Year Maximum	\$2,200	\$2,000
Deductible (Annual)	None	None
Preventive (Plan Pays) (exams, cleanings & x-rays)	70 - 100%	70 - 100%
Basic Services (Plan Pays) (fillings, posterior composites & sealants)	70 - 100%	70 - 100%
Endodontics (root canals)	70 - 100%	70 - 100%
Periodontics (gum treatment)	70 - 100%	70 - 100%
Major Services (Plan Pays) (crowns, inlays, onlays & cast restorations)	70 - 100%	70 - 100%
Prosthodontics (Plan Pays) (bridges, dentures & implants)	50%	50%
Orthodontia - Child(ren) to Age 19	50% to \$500 Lifetime Maximum	
Dental Accident Benefits	100% (separate \$1,000 maximum per person per calendar year)	

### Find an In-Network Dental Provider:

Go to [www.deltadentalins.com](http://www.deltadentalins.com), or call 888-335-8227 (PPO) to find a Delta Dental network provider near you.

### Note:

We strongly recommend you ask your dentist for a predetermination if total charges are expected to exceed \$300.

Predetermination enables you and your dentist to know in advance what the payment will be for any service that may be in question.

# VISION BENEFITS

## Vision Service Plan

FJUHSD provides employees with vision coverage through Vision Service Plan (VSP).

- VSP provides professional vision care and high quality lenses and frames through a broad network of optical specialists
- You will receive greater benefits if you utilize a network provider
- If you utilize an out-of-network provider, you will be responsible for paying all charges at the time of your appointment and will be required to file an itemized claim with VSP

	VSP Vision Plan	
	In-Network	Out-of-Network
Vision Care	You Pay	You Pay
Exam (Once Every 12 Months)	\$20	Amount over \$45 allowance
Retinal Screening (as part of exam)	\$39	Not covered
Eyeglasses (In Lieu of Contact Lenses)	You Pay	You Pay
Frames (Once Every 24 Months)	\$20 copay + amount over the \$200 allowance (\$170 allowance for featured brands); 20% discount on costs above allowance	Amount over \$70 allowance
Lenses (Once Every 12 Months)		
– Single Vision	No charge	Amount over \$30 allowance
– Lined Bifocals	No charge	Amount over \$50 allowance
– Lined Trifocals	No charge	Amount over \$65 allowance
– Lenticular	No charge	Amount over \$100 allowance
Contact Lenses (In lieu of Eyeglasses)	You Pay	
Contact Lenses (Once Every 12 Months)	Amount over \$200	Amount over \$200 allowance
Exam (Fitting and Evaluation)	You receive 15% discount	Full amount
Discounts	In-Network Only	
Eyeglasses/Sunglasses	Extra \$20 on featured frame brands; 20% savings on additional eyeglasses/sunglasses within 12 months of last exam	
Laser Vision Correction	15% average discount or 5% off promotional price for PRK, LASIK, and Custom LASIK	

<sup>1</sup> Supplemental coverage for non-surgical medical eye conditions, such as pink eye and other urgent eyecare - \$20 copay per visit.

## Finding an In-Network Vision Provider:

- To find in-network providers, visit [www.vsp.com](http://www.vsp.com) and search the **VSP Choice** provider network or call **800-877-7195**

# TAX SAVINGS BENEFITS

## Flexible Spending Accounts

The FSA plans, offered through American Fidelity allow you to set aside money before taxes are deducted to pay for certain health and dependent care expenses, lowering your taxable income and increasing your take home pay. Only expenses for services incurred during the plan year are eligible for reimbursement from your accounts.

FSA plan highlights include:

- Your contributions will be in effect for the entire plan year. Employees cannot stop or change your Health Care FSA contributions during the plan year, and changes to the Dependent Care FSA are only allowed if you have a qualified status change, such as marriage, divorce, or birth or adoption of a child.
- Money cannot be transferred between the Health Care and Dependent Care FSA.
- A new enrollment is required each year, even if you do not plan to change the amount(s) set aside. The open enrollment for the Flexible Spending Accounts (FSA) is held each year in August.

### Note:

Please remember that you must save your receipts, just in case American Fidelity needs a copy for verification. Also, all receipts should be itemized to reflect what product or service was purchased. Credit card receipts are not sufficient per IRS guidelines. For additional information, call **800-662-1113** or go to [www.americanfidelity.com](http://www.americanfidelity.com).

## Health Care Flexible Spending Account

This plan is used to pay for expenses not covered under your health plans, such as deductibles, coinsurance, copays and expenses that exceed plan limits. You can also use it to pay for over-the-counter medicines, menstrual supplies, and COVID-19 PPE. Employees may defer up to \$3,200 pre-tax per year.

## Dependent Care Assistance Plan

This plan is used to pay for eligible expenses you incur for child care, or for the care of a disabled dependent, while you work. Employees may defer up to \$5,000 pre-tax per year (\$2,500 if you are married and file a separate tax return). Your total Dependent Assistance Plan election amount is deducted from your paycheck in equal amounts throughout the year. **Please note you can only seek reimbursement from your Dependent Care Assistance plans from the funds in your account at the time you submit your claim.**

## Flexible Spending Account Rules

- You must designate how much money you wish to contribute annually to each account at the beginning of the Plan Year. Money set aside for one account cannot be moved to another account.
- You may change your annual contributions only if you experience a qualifying “change in family status,” such as marriage, divorce, addition or loss of a dependent or a change in your spouse’s employment.
- The Healthcare FSA features a carryover provision. If you have not used all your funds by September 30, you may be able to carry over up to \$610 of unused Healthcare FSA contributions to the next plan year.
- It is important to carefully review your estimated expenses before enrolling. Unspent funds over the maximum carry over of \$610 remaining in the FSAs after September 30 will be forfeited – referred to as the “Use It or Lose It Rule.”

## FSA Video

Learn more about how an FSA can help you save money with this quick video: <http://video.burnhambenefits.com/fsa>

# FINANCIAL WELLNESS BENEFITS

## Reliance Standard Basic Life and Accident Insurance

FJUHSd gives you the ability to financially protect your family/beneficiaries with Life and Accidental Death & Dismemberment (AD&D) insurance.

- Life insurance provides a tax-free cash payout to your beneficiaries in the event of your death.
- AD&D insurance provides an additional benefit equal to your life insurance if your death is caused by a covered accident. You can also receive a portion of your AD&D benefit if you experience dismemberment caused by a covered accident.

Eligible employees receive coverage through Reliance Standard in the amount of \$50,000. You have the option to supplement the company-provided plan with life insurance for family members and additional coverage for yourself through Voluntary Life Insurance.

Your Basic Life and Accident insurance includes two added value benefits:

- Bereavement Counseling Service
- Travel Accident Insurance

## Reliance Standard Voluntary Life Insurance

### Coverage Amounts Available

#### Employee:

You can purchase life insurance coverage for yourself in increments of \$10,000 to a maximum of \$500,000.

#### Spouse/Domestic Partner

You can purchase life insurance coverage for your spouse/domestic partner in increments of \$10,000 to a maximum of \$500,000.

#### Child

You can purchase life and AD&D coverage for your child(ren) in the following amounts:

- 14 Days to 6 months: \$1,000
- Age 6 months to 20 years of age: \$2,500, \$5,000; \$7,500 or \$10,000

### Proof of Good Health

#### Employee

Coverage amounts over \$100,000 require proof of good health and approval by Reliance Standard

#### Spouse/Domestic Partner

Coverage amounts over \$50,000 require proof of good health and approval by Reliance Standard

#### Child

You are not required to provide proof of good health when purchasing coverage for your child(ren)

### Portability

Your life insurance coverage is portable. This means you can convert your coverage to an individual policy if you leave FJUHSd.

## Important Facts About Beneficiaries

Beneficiaries are individuals or entities that you select to receive benefits from your policy. If you do not have a beneficiary, benefits are paid to your estate. Here's what you need to know about beneficiaries:

- You can change your beneficiary designation at any time
- You may designate a sole beneficiary or multiple beneficiaries to receive payment in the percentage(s) allocated
- To select or change your Life Insurance beneficiary, contact Insurance, Business Services

# VOLUNTARY BENEFITS

You may purchase additional insurance from American Fidelity that will help to cover additional out-of-pocket health expenses. These policies offer direct-to-the-policyholder cash payouts to help cover what other insurance doesn't. Your premiums are paid through payroll deductions on an after-tax basis. These American Fidelity policies are portable, which means that you can keep them should you change jobs or retire.

	Accident Insurance	Critical Illness Insurance	Cancer Insurance
<b>Plan Differences</b>			
How It Works	Pays you benefits to help cover out-of-pocket medical and other costs in case of an on- or off-the-job accident	Helps you protect yourself and your family from the unexpected cost of fighting a life-threatening illness	If you or a family member are diagnosed with cancer, this plan may help ease the impact on your finances
Covered Conditions	Ambulance, ER visits, Fractures, Dislocations, Major Diagnostic Exams, PT, and more	Heart Attack, Stroke, Cancer, Progressive Diseases, Organ Failure and more	Cancer treatment, transportation, hospitalization and more
Wellness Benefit	Yes	Yes	Yes

## American Fidelity Term Life Insurance

Term life insurance is an affordable way to leave your loved ones money when you die. They can use it to help pay for housing and other expenses, including your final arrangements. American Fidelity Term Life Insurance provides protection for a 10-, 20-, or 30-year period. Rates are based on issue age and are guaranteed to remain level during the initial term period you choose.

## Voluntary Whole Life Insurance

Whole life insurance can pay money to your loved ones when you die, but it offers additional value as well. This plan features a "living" benefit. If you are diagnosed with a terminal illness with life expectancy of one year or less, you can request that some or all of the death benefit be paid to you while you are living.

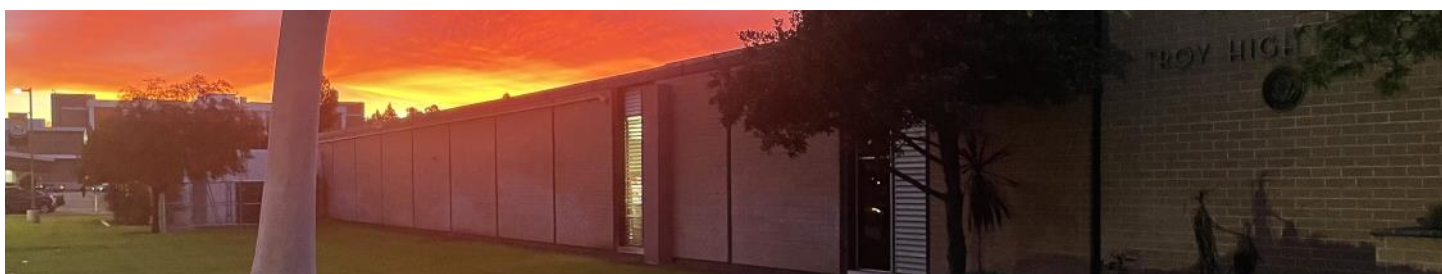
With whole life insurance, your policy can build cash value over time. You can use this cash value later in life to buy a smaller, "paid-up" policy with no more premiums due.

## Voluntary Disability Insurance

This plan pays a monthly benefit amount based on a percentage of your gross income if you can't work due to a disability or illness. You can choose from several waiting periods (how long before disability benefits begin) and premiums are not required while you are disabled, based on the length of your disability.

### Learn More

To learn more about the Voluntary financial wellness plans, call American Fidelity at **800-365-9180**, email [AFES-WildomarBranch@americanfidelity.com](mailto:AFES-WildomarBranch@americanfidelity.com) or visit [www.americanfidelity.com](http://www.americanfidelity.com).



# RESOURCES AND CONTACTS

Below is a list of insurance carrier contacts should you require assistance with your benefit questions following open enrollment. If you are unable to resolve your issues or questions with the insurance carriers, please contact Insurance, Business Services at **(714) 870-2930**.

## How to Navigate the SISC Website for Specific Carrier Information

- Go to <https://sisc.kern.org>
- Select **Health Benefits**
- Select **Member Resources**
- Select the **Logo** of the **Insurance Carrier/Vendor**

Benefit Plan	Phone	Website
<b>Medical, Prescription Drug, and Mental Health Benefits</b>		
Kaiser Permanente HMO	(800) 464-4000	<a href="http://www.kp.org/sisc">www.kp.org/sisc</a>
Kaiser Chiropractic/Acupuncture provided by American Specialty Health (ASH)	(800) 678-9133	<a href="http://www.ashlink.com/ash/kp">www.ashlink.com/ash/kp</a>
Anthem Blue Cross Health Plans	(800) 825-5541	<a href="http://www.anthem.com/ca/sisc">www.anthem.com/ca/sisc</a>
Anthem Blue Cross Vivity HMO Concierge	(844) 484-8489	<a href="http://www.vivityhealth.com/members">www.vivityhealth.com/members</a>
Navitus Prescription Drugs (For Anthem Blue Cross Plans)	(866) 333-2757	<a href="http://www.navitus.com">www.navitus.com</a>
MDLive	(888) 632-2738	<a href="http://mdlive.com/sisc">mdlive.com/sisc</a>
SISC: Teladoc Expert Medical Opinions	(800) 835-2362	<a href="http://teladoc.com/sisc">teladoc.com/sisc</a>
Anthem Employee Assistance Program	(800) 999-7222	<a href="http://www.anthemeap.com">www.anthemeap.com</a>   Password: SISC
<b>Voluntary Health Benefits</b>		
American Fidelity Accident Insurance	(800) 365-9180	<a href="https://enroll.americanfidelity.com/7E5AD8D7">https://enroll.americanfidelity.com/7E5AD8D7</a>
American Fidelity Limited Benefit Cancer Insurance	(800) 365-9180	<a href="https://enroll.americanfidelity.com/7E5AD8D7">https://enroll.americanfidelity.com/7E5AD8D7</a>
<b>Dental Benefits</b>		
Delta Dental PPO	(888) 335-8227	<a href="http://www.deltadentalins.com">www.deltadentalins.com</a>
<b>Vision Benefits</b>		
Vision Service Plan (VSP)	(800) 877-7195	<a href="http://www.vsp.com">www.vsp.com</a>
<b>Tax Savings Benefits</b>		
American Fidelity Flexible Spending Accounts	(800) 365-9180	<a href="https://enroll.americanfidelity.com/7E5AD8D7">https://enroll.americanfidelity.com/7E5AD8D7</a>
<b>Financial Wellness Benefits</b>		
Reliance Standard Basic Life and Accident Insurance	(800) 351-7500	<a href="http://www.reliancestandard.com">www.reliancestandard.com</a>
Reliance Standard Voluntary Life and Accident Insurance	(800) 351-7500	<a href="http://www.reliancestandard.com">www.reliancestandard.com</a>
American Fidelity Term Life Insurance	(800) 365-9180	<a href="https://enroll.americanfidelity.com/7E5AD8D7">https://enroll.americanfidelity.com/7E5AD8D7</a>
American Fidelity Whole Life Insurance	(800) 365-9180	<a href="https://enroll.americanfidelity.com/7E5AD8D7">https://enroll.americanfidelity.com/7E5AD8D7</a>
American Fidelity Disability Insurance	(800) 365-9180	<a href="https://enroll.americanfidelity.com/7E5AD8D7">https://enroll.americanfidelity.com/7E5AD8D7</a>

# IMPORTANT INFORMATION

## The Affordable Care Act and You

Even though the Affordable Care Act (ACA)'s penalty for not having health coverage (known as the individual mandate) has been reduced to zero, if you are a taxpayer in California, you will still be required to have health coverage (unless you qualify for an exemption) or pay a penalty for the 2024 tax year. In addition, several other states, including Massachusetts, New Jersey, and Vermont, as well as the District of Columbia, have reinstated an individual mandate requirement, and others are considering doing so. You may consider these options below to satisfy this requirement:

- Enroll in a medical plan offered by FJUHSD or another group medical plan meeting the requirements for minimum essential coverage;
- Purchase coverage through a health insurance marketplace;
- Enroll in coverage through a government-sponsored program if eligible.

However, if you choose to purchase coverage through the marketplace, because FJUHSD's medical plans are considered affordable and meet minimum value under the Affordable Care Act, you may not be eligible for a subsidy, and you may not see lower premiums or out-of-pocket costs through the marketplace. In addition, employer contributions to your medical benefits will be lost and your portion of medical premiums will no longer be paid via payroll deductions on a pre-tax basis

For more information, go to [www.healthcare.gov](http://www.healthcare.gov).

## Annual Notices

ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. FJUHSD will distribute all federally required annual notices upon hire and during each annual open enrollment period. Annual notices will also be posted on our website for you to download and read at your convenience.

Annual notices include:

- **Medicare Part D Notice of Creditable Coverage:** Plans are required to provide each covered participant and dependent a Certificate of Creditable Coverage to qualify for enrollment in Medicare Part D prescription drug coverage when qualified without a penalty. This notice also provides a written procedure for individuals to request and receive Certificates of Creditable Coverage.
- **HIPAA Notice of Privacy Practices:** This notice is intended to inform employees of the privacy practices followed by FJUHSD's group health plan. It also explains the federal privacy rights afforded to you and the members of your family as plan participants covered under a group plan.
- **Women's Health and Cancer Rights Act (WHCRA):** The Women's Health and Cancer Rights Act (WHCRA) contains important protections for breast cancer patients who choose breast reconstruction with a mastectomy. The U.S. Departments of Labor and Health and Human Services are in charge of this act of law which applies to group health plans if the plans or coverage provide medical and surgical benefits for a mastectomy.
- **Newborns' and Mothers' Health Protection Act:** The Newborns' and Mothers' Health Protection Act of 1996 (NMHPA) affects the amount of time a mother and her newborn child are covered for a hospital stay following childbirth.
- **Special Enrollment Rights:** Plan participants are entitled to certain special enrollment rights outside of FJUHSD's open enrollment period. This notice provides information on special enrollment periods for loss of prior coverage or the addition of a new dependent.
- **Medicaid & Children's Health Insurance Program:** Some states offer premium assistance programs for those who are eligible for health coverage from their employers, but are unable to afford the premiums. This notice provides information on how to determine if your state offers a premium assistance program.
- **Summary of Benefits and Coverage (SBC):** Health insurance issuers and group health plans are required to provide you with an easy-to-understand summary about your health plan's benefits and coverage. The new regulation is designed to help you better understand and evaluate your health insurance choices.

## NOTES

Plan Arranged By:



2211 Michelson Drive, Suite 1200, Irvine, CA 92612 / Telephone: (949) 833-2983 / Fax: (949) 833-9549  
[www.burnhambenefits.com](http://www.burnhambenefits.com)

This brochure provides an overview of some of your benefit plan choices. It is for informational purposes only. It is not intended to be an agreement for continued employment. Neither is it a legal plan document. If there is a disagreement between this guide and the plan documents, the plan documents will govern.

In addition, the plans described in this brochure are subject to change without notice. Continuation of any benefit plan or coverage is at the company's discretion and in accordance with federal and state laws. If you need additional information or have any questions about the benefit program, please contact the Benefits Office.