

Community College District



SUGGESTED ACTION PLAN



Up to 12 Months Before Retirement Date

- > Contact your pension plan understand your pension benefit and confirm what steps to take to retire in STRS or PERS
- > Decide on your retirement date



3 to 6 Months Before Retirement Date

- > Notify the District of your intent to retire
- > Start the process to retire with STRS or PERS
 - > Your STRS or PERS retirement date must be the day after your separation date from the District
- > Consider options for dependents who are not eligible to continue coverage under your plan
 - > Have your spouse explore coverage that may be available through their employer
 - > Explore Medicare options if your spouse is age 65+
 - > Explore the marketplace through Covered California



1 to 3 Months Before Retirement Date

- > Submit the Medicare Bridge Program Intent to Participate form
- > Update contact information with the District if moving

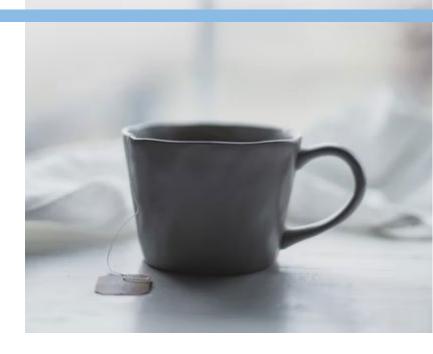


Retirement Day

> Congratulations! Thank you for your service to the District. Enjoy your well-deserved retirement.

RETIREE BENEFITS

West Valley - Mission Community College District is pleased to offer comprehensive medical and dental benefits for qualified retirees and their dependents through the Medicare Bridge **Program**. This guide was created with you in mind to help navigate through important decisions to make and tasks you need to complete to be ready for retirement. We wish for your transition in this next phase in your life to be as smooth as possible so that you can enjoy your retirement from day one!



Contents

Eligibility	4
Benefit Plan Information	5
Plan Cost and Reimbursement	6
Enrollment Events	7
Other Health and Welfare Plans	8
Retirement and After	9
Contacts	10

The benefits provided under this plan shall remain subject to alteration or termination by any future agreement negotiated between the District and the union representative. Retirees will continue to be offered the same medical and dental benefit plans as active District employees and the District shall pay a benefit equal to 100% of the premiums until the retiree becomes eligible for Medicare. The plan is intended to be in effect for 10 years starting with fiscal year 2022-2023 through 2032-2033. The District will evaluate its fiscal condition and investment trust fund prior to extending the plan beyond fiscal year 2032-2033.

ELIGIBILITY

Employee

To qualify for retiree benefits through the District, the employee must meet the following requirements:

- retire from the State Teachers Retirement System (STRS) or the Public Employees Retirement System (PERS)
 - o your retirement date must be the day after your separation date
- be a minimum age of 55 prior to the first day of retirement
- have at least 10 years of service with the District in a full-time permanent position or be a regular full-time contract faculty member or be a regular classified percentage employee (50%+)
- · have no break in service during the ten years immediately preceding retirement
- be enrolled in the District medical and/or dental benefits program at the time of retirement
- have provided service to the District immediately preceding retirement

Dependent

A spouse, registered domestic partner or dependent child is eligible if they meet the following:

- is a qualified dependent of the employee who is retiring
- is enrolled in the District medical and/or dental benefits program at the time of the employee's retirement
- is not enrolled in medical and dental benefits elsewhere

In addition, the age* of the dependent must be:

- spouse/domestic partner under age 65
- child under age 26 or age 26+ if certified as disabled by the medical plan

If the spouse/domestic partner is age 65 or older at the time of the employee's retirement, coverage may continue but the District will not cover the cost for the dependent.

*any future change regarding the maximum age to cover a child or a change in age for Medicare eligibility in federal and state regulations will prevail

Eligibility Ends

Employee (Retiree)*

 the earlier of attaining age 65 or eligibility for Medicare

Spouse/Domestic Partner*

 the earlier of the employee losing eligibility or the spouse/domestic partner attaining age 65 or eligibility for Medicare

Child*

- the earlier of the employee losing eligibility or when the child turns age 26 if not certified as disabled by the medical plan

Eligibility will also cease if the retiree or dependent obtains other medical or dental coverage.

Once a participant in the Medicare Bridge Program opts-out, they become ineligible permanently thereafter and cannot rejoin at a future date.

BENEFIT PLAN INFORMATION

Medical

Once your request to retire has been submitted to the District and approved, notification will be sent to CalPERS to transition you from the active division to the retiree division for your medical plan.

This will be effective the first of the month following the end of one full calendar month after your separation date. For example, with a June separation date, you will remain in the active medical division through July 31 and move to the retiree division on August 1.

You are also required to apply for retirement with your pension plan (i.e., STRS, PERS) with a retirement date that is the next day following your separation date.

Please note that CalPERS may take up to 30 days to review and approve the request to transfer you to the retiree division. This may be dependent on where you are at with your application process to retire from your pension plan. It is recommended that you start your application process to retire from your pension plan in a timely manner.

A medical enrollment form is not required. However, you will need to complete the District's Medicare Bridge Program Intent to Participate form.

Insurance Card

Upon retirement, if you stay in the same plan under Kaiser or Blue Shield, you will not receive new medical insurance cards. Please continue to keep the card you were previously issued.

If your plan is with Anthem, HealthNet or you are on the PERS PPO plans, new cards will be issued to you.

If You Move

If you move while enrolled in a retiree medical plan, you will need to contact the District and CalPERS within 60 days of your move to ensure that your medical plan will still provide coverage in your new area of residence.

When you live outside the service area of your plan, only emergencies are covered. Enroll in a new plan on time!

Dental

As a qualified retiree, you can continue to be enrolled in the same dental plan. A dental enrollment form is not required.

Dental insurance cards are not issued. You can continue to access this benefit by providing the plan name to your dental provider who will look up your coverage with the dental carrier. You may also print a card by accessing your online account with Delta Dental.

If you are enrolled in the DeltaCare HMO dental plan and you move out of state, contact the District within 30 days of your move. The dental HMO plan is only available in California.



PLAN COST AND REIMBURSEMENT

Cost

The District will pay a benefit equal to 100% of the premium of the medical and dental plans offered under the District benefits program for employees who were in a full-time permanent position or a regular full-time contract faculty position. Regular classified percentage employees (50%+) will have a portion of their coverage paid for by the District.

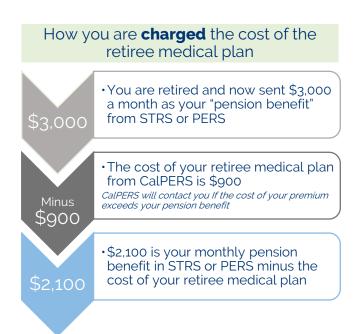
Reimbursement

Medical Plan

Your retiree medical plan is with CalPERS. CalPERS requires that the cost of the medical plan be deducted from your retirement check on a monthly basis. This cost is referred to as the "premium". The District has engaged with a third-party administrator, **P&A Group**, to reimburse you the premium cost.

Please review this scenario to better understand how you are charged and reimbursed.

All items below are illustrative and do not reflect any actual plan costs or pension benefits.



How you are **reimbursed** for the retiree medical plan

In this illustrative scenario, the cost of your retiree medical plan is \$900.

Reimbursement is typically sent by the <u>first of the</u> <u>month</u> in which you were charged for the retiree medical plan.

Your first reimbursement will be on a physical check and mailed to your home address on file with the District. You have an option to arrange for direct deposit to receive future reimbursements. You may choose to set up direct deposit at any time.

The administrator that handles your reimbursement is **P&A Group**.

Dental Plan

The monthly premium for the cost of your dental plan will be paid directly to the dental carrier by the District.

You will not be charged for the dental plan. Reimbursement for the premium is not applicable as the cost of the plan is not deducted from your pension benefit check.



ENROLLMENT EVENTS

Open Enrollment

You will receive communication from both the District and CalPERS in the fall each year about your opportunity to make changes to your medical or dental plan. Changes are effective the following January 1st. Once open enrollment ends, your enrollment remains the same and cannot be changed unless you experience a qualifying life event.

Each year, you and your enrolled dependents will be required to certify with the District that you are not covered for medical or dental benefits elsewhere.

Qualifying Life Event

If you experience a qualifying event while enrolled in the retiree medical and dental plan, please contact CalPERS directly within 60 days and the District within 30 days of that event. Examples of qualifying life events are marriage, divorce or attainment of other coverage. Your event may allow for a change in plans or the addition or removal of a qualified dependent. As a reminder, if you were not enrolled in a medical or dental plan at the time of your retirement, you will not be allowed to join even if you experience a qualifying event.

Adding a new qualified dependent that was not enrolled in your plan at retirement will require that you contribute to the cost of the coverage for your newly added dependent. Contact the District for more information.

Surviving Dependent Clause

If a participating retiree dies prior to age 65, their surviving dependents enrolled at the time of the retiree's death will be eligible to continue participation in the plan under the original terms at the time of the retiree's participation/eligibility. It is the responsibility of the surviving dependent to contact CalPERS to move their status from dependent to primary subscriber.

Coverage ends for the surviving spouse/registered domestic partner at the earlier of when the retiree would have lost eligibility, attaining eligibility for Medicare or coverage under another plan outside of the District.

Coverage for a surviving dependent child ends at the earlier of when the retiree would have lost eligibility, the child reaching age 26 or coverage under another plan outside of the District.

COBRA Notification Letters

When you retire, you will receive two different COBRA notifications. Below is a summary of both and what action is required.

COBRA notification from CalPERS

Upon retirement, you will receive a required notification from CalPERS informing you of your eligibility to continue your medical coverage through COBRA. As you are continuing coverage under the retiree medical plan, you may disregard this notice for yourself.

COBRA notification from EBC

Upon retirement, coverage under the vision plan for you and any enrolled dependents will end. Please review the EBC notice for you and any dependent that is losing this coverage as an option to continue coverage for the vision plan but at 100% of the cost. This notice also allows you to continue dental through COBRA. You may disregard the dental portion as your dental coverage for yourself and your eligible dependents will continue under the Medicare Bridge Program.

Spouse/Domestic Partner (Age 65 or Older)

Your spouse/domestic partner may continue to be enrolled in your medical and dental plans. However, the cost of their coverage will not be paid for by the District and is the full cost of the plan. The COBRA notices from CalPERS and EBC is a short-term option to consider to continue their coverage which is the full cost plus a 2% administrative fee when on COBRA.

OTHER HEALTH AND WELFARE PLANS

Vision

If enrolled in vision coverage, this plan will end the last day of the month in which you separate your employment from the District.

You will be offered the opportunity to continue coverage in vision along with any dependents enrolled at the time of your retirement. This continuation is through COBRA. A notification letter will be sent via mail from EBC on how to elect continuation coverage.

Enrollment is optional and you will be responsible for 100% of the cost. Coverage is up to 18 months.

VSP (800) 877-7195 <u>www.vsp.com</u>



If you are currently participating in a flexible spending account, your final contribution will be deducted on your last check.

Your debit card will be inactivated upon separation from the District.

You will have 90 days to submit for reimbursement from your FSA if the balance of your funds does not exceed what you have contributed year-to-date.

EBC (800) 346-2126 www.ebcflex.com

Retirement Savings Plan

You may be currently contributing or have contributed in the past to a 403(b) plan or a 457 plan through the District. Please contact Alta Montclair or Voya Financial to discuss how to access your plan funds after retirement.

403(b) and 457

Alta Montclair (Third-party Administrator) (866) 474-1144 www.altamontclair.org

457 CalPERS Voya

Voya Financial (888) 713-8244 https://calpers.voya.com



Basic Life Insurance

You may be eligible to take the Basic Life insurance with you. The District will stop paying the premium at the end of the month in which you separate employment.

You will have 31 days to make your coverage an individual policy. Please contact Guardian or MetLife as soon as possible if you are interested in keeping your plan.

Guardian (retirements prior to 01/01/2023) (888) 600-1600 www.guardian anytime.com MetLife (800) 438-6388 www.metlife.com

Voluntary Life/AD&D Insurance

If you are enrolled and contributing for a voluntary life and/or voluntary AD&D insurance plan through MetLife, you may be eligible to take your coverage with you.

You will have 31 days to make your coverage an individual policy. Please contact MetLife as soon as possible if you are interested in keeping your plan.

MetLife (800) 638-6420 www.metlife.com

RETIREMENT AND AFTER

Keep In Touch!

Remember to contact the District any time you have a change in address. This will ensure that you receive important communications.

When You Turn 65

When you near age 65, keep in mind the following:

- The month before you turn 65 will be the final month that the District will reimburse you for the cost of your medical plan and will be the final month the District pays for the premium for the dental plan.
- To continue coverage in medical through CalPERS, you will be required to enroll in Medicare. Contact CalPERS to learn about costs and what action you need to take to transition in a timely manner.

CalPERS (888) 225-73777 www.calpers.ca.gov



Medicare and You

We anticipate that you will have many questions as you are transitioning off the District Medicare Bridge Program. Below is information and resources for you to help smooth this process.



www.medicare.gov



(800) 633-4227



Social Security Office Room 244 2nd Floor 280 S First Street San Jose, CA 95113 (866) 331-2235 You should contact Medicare within your initial enrollment period window to understand your options.

Any delay may have a potential financial penalty.

7-Month Initial Enrollment Period Window

3 Months Before You Turn 65

Your Birthday Month 3 Months After You Turn 65

As a reminder, your spouse/domestic partner should contact Medicare as they near age 65 regardless of enrollment in your medical plan.

CONTACTS

District Office Human Resources

Email: medicarebridge@wvm.edu

14000 Fruitvale Avenue, Saratoga, CA 95070

Phone: (408) 741-2168

RETIREMENT				
PERS		STRS		
www.calpers.ca.gov	(888) 225-7377	www.calstrs.com	(800) 228-5453	
Medicare		Social Security		
www.medicare.gov	(800) 633-4227	www.ssa.gov	(800) 772-1213	

BENEFITS				
CalPERS Medical		P&A Group		
www.calpers.ca.gov	(888) 225-7377	www.padmin.com	(800) 688-2611	
Delta Dental PPO		DeltaCare HMO Dental		
www.deltadentalins.com	(866) 499-3001	www.deltadentalins.com	(800) 422-4234	
VSP Vision		Employee Benefits Corporation (EBC)		
www.vsp.com	(800) 877-7195	www.ebcflex.com	(800) 346-2126	
Guardian Basic Life Insurance		MetLife Voluntary Life/AD&D Insurance		
www.guardiananytime.com	(888) 600-1600	<u>www.metlife.com</u>	(800) 438-6388	
403(b) and 457		457 CalPERS Voya		
www.altamontclair.org	(866) 474-1144	https://calpers.voya.com	(888) 713-8244	



FREQUENTLY ASKED QUESTIONS

Am I eligible if I am not enrolled in the District medical or dental plans?

In addition to meeting the eligibility for age and service, you must also be enrolled in a District medical and/or dental plan at the time of your retirement to have coverage continue under the Medicare Bridge Program. If you are currently not enrolled, you should consider enrolling in a District plan during Open Enrollment so that you are covered in a plan when you retire. Keep in mind that changes made during the fall open enrollment are in effect the following January 1st.

If I lose coverage elsewhere, can I enroll in a District plan while in the Medicare Bridge Program?

If you have coverage elsewhere (medical or dental) and lose that coverage while participating in the Medicare Bridge Program, you will not be able to enroll to replace that coverage. This is not a qualifying event that will allow you to enroll in a medical or dental District plan. For example, you are participating in a District medical plan as a retiree but have dental coverage elsewhere. You lose this coverage and now wish to enroll through the District. Because you were not enrolled in a District dental plan at the time of your retirement, you are not eligible to enroll in dental through the District even with proof of the loss of coverage.

If I am a participant in the Medicare Bridge Program and leave coverage, can I come back to be enrolled?

As a reminder, once you leave the Medicare Bridge Program to enroll in coverage elsewhere, you are permanently ineligible going forward for that coverage in the Medicare Bridge Program.

Medical: If you are enrolled in medical under the Medicare Bridge Program and decide to drop the medical plan, CalPERS will allow you to enroll back in their plans. However, you will pay the full cost of the coverage as you will not be eligible to return to the Medicare Bridge Program with the District because you permanently opted-out when you dropped the medical plan.

Dental: Once you leave the dental plan under the Medicare Bridge Program because of coverage elsewhere, you will have permanently opted-out of the Medical Bridge Program and will not be allowed to enroll back in dental in the future, even if you are willing to pay the full cost.

Can my dependents remain enrolled in my coverage?

A dependent that was enrolled in your plan at the time of your retirement may remain enrolled if they continue to meet the eligibility requirements. Please see page 4 for eligibility requirements for dependents.

Once you as the retiree are no longer eligible, all dependents enrolled in your plan will also lose coverage at the same time. The exception to this is the surviving dependent clause found on page 7.

What date is used to determine my number of years of service with the District?

This date is the date you were hired on a full-time regular basis. Contact the HR Specialist who is responsible for employees in your employment classification if you have questions on your service years.

Can I use vacation time near my projected retirement date to stop working earlier and still be eligible? If you are interested in doing this, you should discuss your plan with your supervisor. All vacation requests are subject to your supervisor's approval. You will be paid out for your unused vacation days in your final paycheck.

Who should I speak to regarding my sick time balance?

Contact the HR Specialist who is responsible for employees in your employment classification.

Revised September 2022 PREPARED BY:



The information in this Retirement Guide is presented for illustrative purposes and is based on information provided by the employer and the insurance companies. While every effort was taken to accurately report your information, discrepancies or errors are always possible. In case of a discrepancy between the Retirement Guide and the actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about this summary, contact Human Resources.