



PERALTA BENEFITS – EVERYONE

Published by the PCCD Benefits Office

IN THIS ISSUE:

July/August 2011

1. HEALTH CARE REFORM-
COVER DEPENDENTS TO AGE 26, RE-
ENROLL NOW FOR 9/1/11 COVERAGE
2. CHANGE OF EMPLOYEE
ASSISTANCE PROGRAM PARTNER
3. MEDICARE COORDINATION FOR
PCCD RETIREES

4. SAVE THESE DATES:

- 8/17/11 & 8/18/11
WELCOME BACK ACTIVITIES @Merri
College & the District
- 8/15 /11– 9/16/ 11
ADJUNCT OPEN ENROLLMENT
- 9/1/11
OVERAGE DEPENDENTS EFFECTIVE
- 10/1-10/31/11
OPEN ENROLLMENT WINDOW for
benefit-eligible employees
- 10/6/11
OPEN ENROLLMENT BENEFITS FAIR
- 1/1/12
OPEN ENROLLMENT CHANGES
EFFECTIVE

DISTRICT RESOURCES

www.peralta.edu

www.peralta.pswbenefits.net

Ph. # 510.466.7229 & 510.587.7838

(PSW Benefit Resources)

877.866.2623

IMPORTANT CHANGES EFFECTIVE SEPTEMBER 1, 2011:

Health Care Reform & Over-age Dependents

Dependent children can remain as a dependent on a Peralta-sponsored plan until the end of the month in which the dependent turns 26, (formerly covered to age 25). Upon reaching age 26, the dependent will be offered the opportunity to continue coverage under COBRA for a thirty six month period (36). Under COBRA, a dependent who loses eligibility can continue coverage at their own expense based on the-current benefits rates. Download forms from the peralta benefits website: www.peralta.pswbenefits.net

One-Time Special Enrollment ends 8/15/11 for 9/1/11 reinstatement

If you have a dependent who was previously enrolled on a Peralta plan but was dropped from the plan due to eligibility issue and the dependent is now eligible, you can re-enroll the dependent for a September 1, 2011 effective date. Should you not enroll your overage dependent during this special enrollment period and later wish to do so, you will need to wait until the official open enrollment period that occurs in October 2011 for an effective date of January 2012 or experience a life changing event (for example, marriage, birth, adoption) and enroll within 30 days of experiencing the event. Download forms from the Peralta benefits website: www.peralta.pswbenefits.net

New Employee Assistance Plan (EAP) Vendor

Our new Employee Assistance Plan provider will be Mental Health Management (MHN). MHN has 35+ years of providing managed behavioral health and substance abuse support. They offer over 46,000 providers nationwide with 8,700 of those providers in California alone! Benefits include 7 sessions per person per month of short term clinical counseling (face to face), telephonic consultations and web-video consultations; work & life services; legal consultation, financial consultation, identity theft assistance, dependent care assistance, daily living assistance. We now are able to offer outplacement and career counseling services through the MHN EAP. To contact MHN after 9/1/11, call them 24 hours a day, 7 days a week at 800.227.1060 or log onto their website at www.mhn.com (access code Peralta). Benefit-eligible employees can continue to use our current Employee Assistance Plan (Anthem Blue Cross) through August 31, 2011.



Join the PCCD Benefits Office, Staples and Financial Planners for
Professional Development Day & Welcome Back Activities

8/17 at Merritt College Campus-R Building Noon – 1:00pm

Featuring Staples Office Supplies & Free office supplies,
give-a-ways & more!



8/18 Financial Planners Available & Workshops Sponsored by the District Benefits Office 9-2

- Adjunct Benefits, An overview (9-10am)
- Careers in Transition, Citibank (10-11am)
- Tax-deferred planning with the 403(b) & 457 Plans: Are you contributing? Are you fiscally fit? (11-Noon)
- What every retiree and survivor should know about Peralta medical benefits (Noon – 1pm)

*Financial Planners available 11 – 2 in the PCCD Atrium
Invited participants: ZUK Financial Services,
Chase Bank, Citibank-at-Work, Colonial, AFLAC & More!*

News for Retirees and/or Eligible Dependents who are over age 65 – Medicare A & B Participation Required by July 1, 2012 to ensure continuous “wrap around” medical coverage

In keeping with the provisions of our Collective Bargaining Agreements between the District and its employees/retirees, we will take action to ensure compliance to provide **wrap around** medical coverage. The Agreements indicate that retirees shall enroll in Medicare A & B in order for the District to provide **wrap around** medical coverage.

What does this mean to the over age 65 retiree or dependent of a Peralta retiree?

Retirees who participate in Medicare A & B save the District money and support our ability to sustain the benefits to which our retirees are accustomed. District goals are to:

1. Achieve 100% coordination with the federal Medicare A & B programs among our Medicare-eligible population.
2. Provide the necessary support to our retirees before the Medicare enrollment window opens, during the 2012 Medicare enrollment window for calendar year 2012 which begins on January 1, 2012 and ends March 31, 2012 for a coverage effective date of July 1, 2012.
3. Reduce our financial exposure for paying claims otherwise covered by other entities.

A personal notification will be sent to those identified as not currently participating with Medicare A & B and who may need assistance in navigating the Medicare system. The District has engaged its customer service team at PSW Benefits Resources to provide personal assistance in navigating through the Medicare enrollment process and the premium reimbursement process in a timely fashion. PSW Benefits Resources has served as our agent for over five years in assisting employees and retirees of Peralta. We also engage the Peralta Retiree’s Organization (PRO) to support telephone outreach efforts which we expect to recur in January 2012.

Timelines for ensuring Medicare A & B participation by July 1, 2012 to avoid interruption to retiree medical coverage

In addition to **monthly mailings** from July 2011 – March 2012, PCCD will implement the following action plan:

| | |
|---|---|
| October 2011 | Special informational workshop to address benefits of Medicare A & B coordination and consequence of non-participation. |
| January 2012 Medicare Enrollment window begins January 1, 2012 | Informational workshop to address benefits of Medicare A & B participation and to address consequence of non-participation. Telephone outreach begins in collaboration with the Peralta Retirees Organization (PRO) |
| March 2012 Medicare Enrollment window ends March 31, 2012 | Annual workshop sponsored by the PCCD Benefits Office to provide personal on-site assistance from Kaiser, Benefit Dynamics & the Benefits Office |
| April – June 2012 | We will require copy of retiree’s Medicare A & B Card |
| July 2012 | Claims/Services denied or delayed if rendered after July 1, 2012 and retiree is not actively participating in Medicare A & B Programs |

Consequences in effect on July 1, 2012

CORESOURCE members and their Medicare eligible dependents:

- **If** you are age 65 or over and not already enrolled in Medicare, when CoreSource receives a claim, **then** we will require that CoreSource consistently asks for the Medicare **Explanation of Benefits** (EOB) before payment is made.
- **If** the requested EOB is not provided to CoreSource, **then** the claim will be denied pending receipt of the EOB.
- **If** an EOB is provided to CoreSource, **then** the claim will be paid per prevailing Benefits Office.

KAISER members and their Medicare-eligible dependents:

- **If** you are age 65 or over and not already enrolled in the Kaiser Senior Advantage Plan or Kaiser Out-Of-Area plan, **then** your Kaiser coverage will be terminated on June 30, 2012. Peralta will reinstate coverage as Medicare eligibility is established on a case-by-case basis. **Why not enroll in Kaiser Permanent Senior Advantage, after all it comes with access to dental insurance, eyewear coverage and hearing aid allowance...**

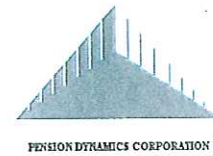
Act Now-to establish Medicare eligibility on or before July 1, 2012.

1. Contact Medicare at 800 722 1213 to find out enrollment deadlines which apply to your circumstances.
2. Enroll & pay premium to Medicare, Center for Medicare and Medicaid Services (CMS).
3. Complete the Peralta Medicare Premium Reimbursement Claim form and submit it to Benefit Dynamics for processing of reimbursements.

Peralta will reimburse Medicare A & B premiums including late-enrollment penalties assessed by Medicare. 2



Medicare Premium Claim Form
Request for Reimbursement
This form must accompany reimbursements processed on
or after January 1, 2011
Complete sections B & C



Name of Claimant _____
 Medicare or SSN Number of Claimant _____
 Daytime Phone _____
 Address _____
 City, State, Zip _____

Relationship to PCCD Retiree _____

A. FREQUENTLY ASKED QUESTIONS

Where shall I send my annual verification?

Attach documentation this form and send both to :

Benefit Dynamics
C/o Pension Dynamics
2300 Contra Costa Blvd, Suite 400
Pleasant Hill, CA 94523-3955

Why can't the District obtain Medicare B premium amounts directly from the SSA or Medicare?

Due to privacy regulations, PCCD district personnel cannot obtain information without authorization from the benefactor. SSA provides an annual benefits statement directly to you confirming premium amounts. They will also provide verification upon request by calling 800-772-1213.

Isn't the amount the same for all retirees?

No. The premium amount is determined by Medicare and varies based on each individual taxpayer's eligibility.

When are forms due?

Medicare Premium Claim Form and documentation should be submitted no later than **March 30** after the end of the calendar year.

B. DOCUMENTATION REQUIREMENT

| Type of Documentation Attached Check One | What type of documentation is required/acceptable? | How often is documentation required? |
|--|---|---|
| | Medicare quarterly billing statement and proof of payment | Documentation is required <u>quarterly</u> . Generally, those who choose to pay premiums by check or charge are billed by CMS, a Medicare agent. |
| | Monthly STRS statement | Upon attainment of age 65 and <u>once a year thereafter</u> . If your amount changes, you are expected to notify us within 30 days of the effective date. |
| | The Social Security Statement to verify the deduction amount | Upon attainment age 65 and <u>once a year thereafter</u> . Your premium amount is announced by the SSA/Medicare in December to affect January premium. If your amount changes, you are expected to send us notification within 30 days of the effective date. |
| | Federal Tax form 1098 (issued annually by the Social Security Administration) | Annually, but not later than March 30 following the claim year. |

C. DIRECT DEPOSIT AUTHORIZATION/PROOF OF PAYMENT & ELIGIBILITY CRITERIA

- I prefer the direct deposit of my reimbursement; my completed Direct Deposit Authorization Form is attached.
- I do not prefer direct deposit of my reimbursement.

CHECK the appropriately /SIGN below/ATTACH this form to proof of payment

I am retired from the Peralta Community College District or am the spouse or domestic partner of a Peralta Community College District retiree.

I am not reimbursed from another employer's plan -all expenses reimbursed to me under this program will not be reimbursed to me or my dependents by any other means, per Internal Revenue Code 105.

I am attaching proof of expense to this form.

CHECK one of the following based on your Peralta medical coverage

I am enrolled in the District's Self-Funded insurance plan (currently administered by CoreSource).

or

I am a current member of the Kaiser Permanente Senior Advantage Plan through Peralta.

I certify that the above is correct and complete and that reimbursements are scheduled at the end of each quarter (April, July, October, & January). I further understand that my participation is subject to audit.

Signature _____

Date _____

Attach Proof of Expense and Send or Fax Completed Medical Premium Claim Form To:

Benefit Dynamics C/O Pension Dynamics Corporation

2300 Contra Costa Blvd. Suite 400, Pleasant Hill, CA 94523-3955 ** Phone (925) 956-0514 ** Fax (866)320-1931

Rate Chart Matrix – Fall 2011

Other PCCD Benefit Costs

Active employee cost for group insurance plan participation is determined by classification and appointment. Full time employees receive full District contribution towards the insurance premium cost.

| Group Insurance Plans (monthly rates) | Single | Two Party | Three or More |
|--|----------|------------|---------------|
| Kaiser (rate in effect through 6/30/12) | \$560.93 | \$1,121.86 | \$1,587.43 |
| CoreSource (rate in effect through 6/30/12) | \$622.78 | \$1,391.46 | \$2,090.42 |
| Delta Dental (rate in effect through 6/30/12) | \$70.60 | \$120.03 | \$183.58 |
| United HealthCare Dental (rate in effect through 6/30/12) | \$27.46 | \$49.93 | \$66.94 |

The District's contribution for other benefit-eligible employees (classified and confidential) is based on the assigned FTE for the position. These rates are the basis of COBRA continuation benefit rates.

| Benefit Plan | Employee Cost | Employer Cost |
|---|---|----------------------------|
| Basic Life & AD&D | \$0.000 | \$.221 / \$1,000 of salary |
| Long Term Disability | \$0.000 | \$.17 / \$100 of salary |
| Dependent Life Insurance | \$0.000 | \$.350 per dependent unit |
| Employee Assistance Plan Effective 9/1/11 | \$0.000 | \$2.12 per family unit |
| State Teacher Retirement System (mandatory retirement plan) | Contributions based as a percentage of salary | |
| 10 Month Academic Appointment | 9.600 | 8.250 |
| 11 Month Academic Appointment | 8.727 | 8.250 |
| 12 Month Academic Appointment | 8.000 | 8.250 |
| Cash Balance Plan (retirement plan for part-time faculty) | 4.000 | 4.000 |
| Public Employees Retirement System (PERS) | 7.000 | 10.707 |
| Accumulation Program for Part-time and Limited Service Employees (APPLE); managed by Mid-America | 3.750 | 3.750 |
| Social Security (for first \$106,800 in PCCD wages) | 4.200 | 6.200 |
| Medicare | 1.450 | 1.450 |
| Other Post Employment Benefits | \$0.00 | 12.90 |
| Workers Compensation | \$0.00 | 1.20 |