



## **HUMAN RESOURCES DEVELOPMENT AND PERSONNEL SERVICES**

### **BENEFITS - FREQUENTLY ASKED QUESTIONS**

- **When will my insurance coverage begin?**
- **How soon after I submit my paperwork will I get my insurance card(s)?**
- **What will my shared cost be?**
- **What if I have dependents and what information should I provide to you in order to add them to my insurance?**
- **What information do I have to provide if I acquire additional dependent(s)?**
- **I acquired an additional dependent, but it has been more than 30 days, what do I need to do to add them?**
- **Can I buy up to another plan?**
- **Do I have to take any of the plans offered?**
- **Are there any other options for me?**
- **What if I am buying up, but notice that there will be an increase and I don't want to pay any additional amount?**
- **If a member changes medical Plans on July 1st, what happens to the Deductible and Co-insurance applied under the previous Plan?**
- **I decided to buy up and I noticed that my first paycheck already has a deduction, why?**
- **I have received my cards, but my name is on both of the cards?**
- **I lost my card, can I get another one?**
- **I have only received one card won't my dentist or optometrist need another card?**
- **When completing the form, I realized that I do not have my dependent's social security number, is this something that is required?**
- **What is a Deductible?**
- **What is Co-insurance?**
- **What are co-pays?**
- **When do the Deductible and Co-insurance begin?**
- **Are there any pre-existing limitations?**

- Q. When will my insurance coverage begin?**
- A.** Your insurance coverage will begin the 1<sup>st</sup> of the month following your hire date, i.e. if you begin work on July 15<sup>th</sup>, your insurance coverage will begin on August 1<sup>st</sup>.
- Q. How soon after I submit my paperwork will I get my insurance card(s)?**
- A.** You will receive your cards, 4-6 weeks after your insurance is effective. If you or your dependents, must see a doctor prior to receiving your card, please call our office, we will contact Tri-County Schools Insurance Group and check to see if an ID number has been assigned to you. If one has been assigned, we will forward it to you.
- Q. What will my shared cost be?**
- A.** Currently the District pays for all medical, dental, vision and life insurance premiums, none of our employees have any out of pocket expenses for the plan that was offered upon being hired. CSEA has just negotiated a cap in benefits - the cap is \$1225. If the premium amount of the health plans increase, the cost of the increase, should it exceed \$1225 per month will be split between the employee and the District, 50/50.
- Q. What if I have dependents and what information should I provide to you in order to add them to my insurance?**
- A.** The District currently pays for all medical, dental, vision and life insurance premiums for you and all of your eligible dependents. You must provide our office with copies of the marriage certificate/certificate of domestic partnership and/or birth certificate(s) within 30 days of your hire date.
- Q. What information do I have to provide if I acquire additional dependent(s)?**
- A.** If you have a baby, we will need a copy of the birth certificate and an updated TCSIG Enrollment form, submitted within 31 days of the birth. If you get married, we will need a copy of the marriage certificate/certificate of domestic partnership, submitted within 31 days of the marriage. **Coverage will begin the date of the birth and/or marriage.** If you get divorced, we will need to know the date the divorce was finalized. This will prompt our office to complete a Qualifying Event form, the form is then forwarded to TCSIG, they turn around and send the COBRA information to the employee/dependents who have been affected.

**Q. I acquired an additional dependent, but it has been more than 30 days, what do I need to do to add them?**

**A.** If you acquired new dependents and you did not notify this office within 30 days, you can complete the paperwork to add you dependent, however the change won't go into effect until our annual Open Enrollment period (April thru May) and your dependent will be added Effective July 1<sup>st</sup>.

**Q. Can I buy up to another plan?**

**A.** Yes, you may, the District currently offers all new employees hired after, July 1, 2003, the Premier Plan. If you decide to stay on the Premier Plan, you will have no out of pocket monthly expenses, other than your deductible and co-insurance. If you decide to buy up to the Premier Plus plan, your monthly out of pocket expense will be \$153.00. If you opt for the Kaiser Hi plan, your monthly out of pocket expense will be \$124.00.

**Q. Do I have to take any of the plans offered?**

**A.** No, you do not. We have to pay benefits on the position regardless of whether or not you elect to take the benefits. Should you wish to not participate, you will be asked to complete the TCSIG Enrollment form and mark the Waiver box found on the bottom of the form. This will exclude you from our medical, dental and vision plans. This will not affect your life insurance plan(s). If you wish to participate at a later date, you must wait until our annual Open Enrollment period which begins in April and continues through May of each year. You would then complete the enrollment form, submit any additional documents required, and make sure it is in our office no later than the deadline. Any changes will be made effective July 1<sup>st</sup> of the new fiscal year.

**Q. Are there any other options for me?**

**A.** Yes, if you have double coverage and would like to take advantage of our 403b plans, you can elect to take any of our two lower plans, Standard and Basic, and have 75% of the savings for the District, put into a District sponsored 403(b) plan. You also have the option of taking one of the three High Deductible Health Plans available. 75 % savings will then go into a Health Savings Account. To be eligible you must not be enrolled in another health plan.

- Q. What if I am buying up, and am notified during Open Enrollment that there will be an increase and I don't want to continue paying?**
- A.** As mentioned above, we have our annual Open Enrollment period and you have the option during that time to make a change, (April-May). Changes will be made effective July 1<sup>st</sup>, the forms can be found in our office.
- Q. If a member changes medical Plans on July 1st, what happens to the deductible and co-insurance applied under the previous Plan?**
- A.** Any deductible or co-insurance applied between January 1st and June 30th is credited to the new Plan.
- Q. I decided to buy up and I noticed that my first paycheck already has a deduction, why?**
- A.** We pay our insurance a month ahead, the check dated June 30<sup>th</sup> will pay for July's benefits, therefore we have to take the first deduction the month before.
- Q. I have received my cards, but my name is on both of the cards?**
- A.** Your name will be the only name on the card(s), all information is based on your name, and Social Security number. Your card(s) will not have your Social Security number on them, everyone is assigned a unique ID number.
- Q. I lost my card, can I get another one?**
- A.** Yes, please email me at [mgaytan@yccd.edu](mailto:mgaytan@yccd.edu) and I will forward your request to TCSIG. You should receive cards within two weeks of the day requested.
- Q. I have only received one card, won't my dentist or optometrist need another card?**
- A.** No, any doctor you visit will have all of the information they need on the front or back of the card.
- Q. When completing the form, I realized that I do not have my dependent's social security number, is this something that is required?**
- A.** Although we would like to have it, it is not required for the initial sign up, please complete your paperwork as best as you can and if something is missing, we will let you know.

**Q. What is a Deductible?**

**A.** The accumulated amount of covered expenses incurred throughout the calendar year which the covered person must pay before any benefit percentage (co-insurance) applies.

**Q. What is Co-insurance?**

**A.** The percentage payable by either, the plan and the covered person for covered benefits that are provided under the plan. The co-insurance is applied to covered expenses after the deductible has been met. For example, the Premier Plus plan, after the \$75 Deductible has been met, the Plan pays 80% of the covered expenses and the individual is responsible for 20%.

**Q. What are co-pays?**

**A.** A cost sharing arrangement whereby a covered person pays a set amount for a specific service or supply at the time that service or supply is provided. For example a \$10 office visit co-pay. Co-pays do not apply toward a covered person's deductible or co-insurance.

**Q. When do the Deductible and Co-insurance begin?**

**A.** The deductible and co-insurance are based on a calendar year from January 1 through December 31.

**Q. Are there any pre-existing limitations?**

**A.** No, there are no pre-existing limitations for you or any of your dependents.