



FOOTHILL-DE ANZA
Community College District

2013 CalPERS Health Benefits

January – December 2013

Open Enrollment Retirees

This is a summary presentation only.

In the event of discrepancies, health plan Evidence of Coverage documents and /or Insurance Certificates will prevail.

Visit <http://hr.fhda.edu/benefits/>
For complete information.



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Agenda

- Summary of CalPERS Changes
- Plan Period: January – December 2013
- Benefit Plan Options – Carrier/Plan Choices
- Open Enrollment Process for 2013
- Reimbursements/Billing

Special Issues:

- Combination Enrollments
- PERS Select v PERS Choice for Medicare Members
- Medicare Benefits Assignment
- Survivors/COBRA benefits:
- Medicare Status and Dependent Verification



Transitioning to CalPERS Health

- **CalPERS Transition 2012:**
 - ✓ So many challenges
 - ✓ Many, many, many thanks for your patience and understanding!

- **Remember why we moved to CalPERS**
 - ✓ Best plan for cost
 - ✓ Increased plan options
 - ✓ Continuation of coverage for qualified retirees





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Benefit Plan Options

6 Plan Options

CaIPERS HMO Plans

Kaiser

Blue Shield Access+

Blue Shield NetValue

CaIPERS PPO Plans

PERS Select: Anthem Blue Cross **Select**

PERS Choice: Anthem Blue Cross **Prudent Buyer** (#CB050K)

PERS Care: Anthem Blue Cross **Prudent Buyer** (#KB050K)



Summary of CalPERS Changes

Benefit Plan Changes:

- PERS Select: None
- PERS Choice: None
- PERS Care: None
- Kaiser: None
- Blue Shield: None

Service Area Changes

- PERS Select: includes all CA Counties (not available outside CA)
- Blue Shield NetValue: includes Marin, Sonoma, Humboldt and Stanislaus Counties
- Blue Shield 65+: includes more zip codes in Contra Costa County





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Open Enrollment 2013

Your Path to Success

IF...you have *no* changes

You are currently enrolled: AND

You have no dependent changes: AND

You have no plan changes...

You do not have to do anything further.

Your plan election and coverage for you and your dependents will continue in 2013.





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Open Enrollment 2013

Your Path to Success

IF...

You need to enroll:

OR...

You have dependent changes:

OR...

You want to change your plan...



You must complete all required enrollment steps during Open Enrollment.



Steps to Success

1. If you need to enroll, change dependents or change plans:

a) Gather Your Documents

- a) Medicare eligibility
- b) Marriage certificate – if covering a spouse
- c) Domestic Partner certificate/affidavit – if covering a domestic partner
- d) Parent-child status – if covering a child/dependent
- e) Disabled child status – if covering a disabled adult child

b) Complete the Required CalPERS Enrollment Forms

- a) HBD-30 or HDB-30 PA

c) Double-check Required Documentation for Enrolled Dependents

d) Submit Completed Enrollment Package Directly to **Secova:**

**RETIREES SUPPORTING SERVICES
5000 BIRCH STREET, WEST TOWER, SUITE 1400
NEWPORT BEACH, CA 92660**





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Open Enrollment 2013

Secova Verification:

- ✓ **Secova will mail or email confirmation of receipt within 72 hours.**
- ✓ **Wait one more day...if not received, you may**
- ✓ **Call Secova at: 1-866-364-2594**





Reimbursements and Billing 2013

Electronic Fund Transfer (EFT) (Required for all District Transactions)

1. If you already have EFT setup for District Transactions
 - *Your current EFT will continue*
2. If you have a bank* change (at any time)
 - *You will need to submit a Completed EFT Authorization form*
3. If you are enrolling for the first time
 - *You will need to submit a Complete EFT Authorization form*
4. If you are newly eligible for Medicare Part B Reimbursement and do not have an EFT on file.
 - *You will need to submit a Completed EFT Authorization form*





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Reimbursements and Billing 2013

Your Retiree Warrant and Your Designated EFT Account

- Deduction From Retiree Warrant (retirement check)
 - ✓ CalPERS Health deducts full premium from warrant
 - ✓ Report of CalPERS full premium deduction is sent to FHDA
 - ✓ FHDA calculates difference between CalPERS deduction amount and your required Monthly Contribution Amount
 - ✓ FHDA refunds the difference to your EFT Account





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Reimbursements and Billing 2013

Your Retiree Warrant and Your Designated EFT Account

- Retiree Required Monthly Contribution
 - ✓ PERS Select and Kaiser = most affordable
 - ✓ Ranges:
 - LEAST = \$70 Per Month for PERS Select – Retiree Only
 - MOST = \$1371 Per Month for PERS Care – Retiree + Family





Reimbursements and Billing 2013

2013

CaIPERS PLAN*	Per Month Contribution
PERS Care	
E	\$457
E+1	\$914
E+ family	\$1,371
PERS Choice	
E	\$125
E+1	\$250
E+ family	\$376
PERS Select	
E	\$70
E+1	\$140
E+ family	\$210
Blue Shield Access+	
E	\$257
E+1	\$514
E+ family	\$771
Blue Shield NetValue	
E	\$174
E+1	\$348
E+ family	\$522
Kaiser CA	
E	\$78
E+1	\$156
E+ family	\$234



* Includes corresponding Medicare plan (e.g. PERS Care-Medicare, PERS Choice-Medicare, etc.).



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Reimbursements and Billing 2013

Your Retiree Warrant and Your Designated EFT Account

If Warrant is Insufficient to Cover CalPERS Premium Deduction

- ✓ PERS Retirees: CalPERS will take amount available and bill retiree for the balance
- ✓ STRS Retirees: CalPERS will take no deduction and bill retiree for entire premium amount



So, let's work through some examples...



Reimbursements and Billing 2013

Your Retiree Warrant and Your Designated EFT Account

Example A: (Pre '97 Retiree)

		EFT Account Action
Retirement Warrant Received From: PERS		
Medicare: Eligible		
CalPERS Health Plan: PERS Select		
Tier: EE Only		
Retiree Warrant Amount	\$ 3,205.80	
CalPERS Premium (Bay Area)	\$ 325.74	
CalPERS Deduction from Warrant	\$ 325.74	
FHDA Retiree Required Monthly Contribution	\$ 70.00	
Amount Reimbursed/Billed	\$ 255.74	Deposit via EFT





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Reimbursements and Billing 2013

Your Retiree Warrant and Your Designated EFT Account

Example: B (Insufficient PERS Warrant)
Pre '97 Retiree

Retirement Warrant Received From: PERS		EFT Account Action
Medicare: Not Eligible (Basic Rate)		
CalPERS Health Plan: Blue Shield NetValue		
Tier: EE + 1		
Retiree Warrant Amount	\$ 865.50	
CalPERS Premium	\$ 1,340.42	
CalPERS Deduction from Warrant	\$ 865.50	
CalPERS Billed to the Retiree	\$ 474.92	
FHDA Retiree Required Monthly Contribution	\$ 348.00	
Amount Reimbursed/Billed by FHDA to Retiree	\$ 992.42	Deposit via EFT





Reimbursements and Billing 2013

Your Retiree Warrant and Your Designated EFT Account

Example: C (Insufficient STRS Warrant)
Pre '97 Retiree

Retirement Warrant Received From: STRS		EFT Account Action
Medicare: Not Eligible (Basic Rate)		
CalPERS Health Plan: Kaiser		
Tier: EE + 1		
Retiree Warrant Amount	\$ 936.45	
CalPERS Premium	\$ 1,337.26	
CalPERS Deduction from Warrant	\$ -	
CalPERS Billed to Retiree	\$ 1,337.26	
FHDA Retiree Required Monthly Contribution	\$ 156.00	
Amount Reimbursed/Billed	\$ 1,181.26	Deposit via EFT





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Reimbursements and Billing 2013

Your Retiree Warrant and Your Designated EFT Account

Example: D (Combination Premium)
Pre '97 Retiree

Retirement Warrant Received From: PERS		EFT Account Action
Medicare: Combination -Eligible Retiree/Non-Eligible(Basic Rate) Dependent		
CalPERS Health Plan: Kaiser		
Tier: EE + 1		
Retiree Warrant Amount	\$ 3,215.46	
CalPERS Premium	\$ 957.00	
CalPERS Deduction from Warrant	\$ 957.00	
FHDA Retiree Required Monthly Contribution	\$ 156.00	
Amount Reimbursed/Billed	\$ 801.00	Deposit via EFT





Combination Enrollments

- ✓ Dependent follows the Retiree plan election
 - *Whatever plan the Retiree chooses, all dependents are on the same plan.*

- ✓ CalPERS premium is based on Combination Rate
 - *(Medicare Supplement or Basic Rate as applicable)*

- ✓ *Can only be under one CalPERS plan; no dual enrollment*





PERS Select or PERS Choice? Special Consideration for Medicare Eligible Retirees

If Retiree Only ...OR ...Retiree + 1

- ✓ (Both) Medicare eligible and (both) live in CA:
 - *Same coverage – See Benefits Summary Booklet, p. 25-31*
 - *Elect “Select” for smaller monthly contribution*
 - *Medicare-contracted providers only*



If Retiree + 1

- ✓ If one party is NOT Medicare eligible
 - *Elect plan that provides coverage at level needed for non-Medicare eligible participant*
- ✓ If one party is Out-of-State
 - *Elect plan that provides coverage at level needed for Out-of-State participant*



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Related Topics

Dental/Vision Coverage

- Dental & Vision included with medical plan
- Dental & Vision not available without medical plan
- Coverage provisions unchanged from current plans



✓ *If you have no changes to your Medical plan election, you do not need to do anything for 2013.*



Medicare Benefits Assignment

- If you are enrolling for first time, or
- At the time you become Medicare eligible for the first time during the Plan Year
 - ✓ *Must show Medicare status and assign Medicare benefits*
 - Complete a Certification of Medicare Status
 - Complete a “*Medicare assignment form*” (*names differ depending on plan selected*)



*URGENT: must complete forms in timely fashion or risk CalPERS
cancellation of coverage*



Medicare Benefits Assignment

- If you are changing plans and already Medicare-eligible:
 - ✓ *Complete a HBD-30 form to change plans (see page 55 of Guide)*

- Next steps differ depending on:
 - ✓ The plan you are leaving
 - ✓ The plan you are going to

- See chart: may be required to dis-enroll and re-enroll your Medicare benefits assignment



URGENT: must complete forms in timely fashion or risk CalPERS cancellation of coverage



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Related Topics

Other Miscellaneous Topics

- COBRA: Special instructions; please contact FHDA Benefits Unit
- Medicare Status and Dependent Verification: for assistance with forms please contact the FHDA Benefits Unit





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Questions?