



**FOOTHILL-DE ANZA**  
**Community College District**

Office of Human Resources and Equal Opportunity

<b>Retiree Health Plan Contributions Policy</b>
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Beginning July 1, 2011, Foothill-De Anza Community College District will require that medical plan contributions for the retirees must be made by direct withdrawal from the retiree's checking or savings account via **Automated Clearing House (ACH)** Payment, also known as Electronic Fund Transfer (EFT) Process.

**Required Form:** The form that initiates this direct withdrawal for self-funded plans (EPO, PPO, Out-of-Area) and Kaiser is located on the FHDA website at: <http://hr.fhda.edu/benefits/billing>. If you cannot print this form yourself, you may obtain one by contacting the Benefits Unit at **650-949-6224** or email to **[MyBenefits@fhda.edu](mailto:MyBenefits@fhda.edu)**.

*You will be required to attach a voided check to the ACH Authorization Form when you initiate the process.*

**Contribution Withdrawal:** Contribution is due by the first of each month, e.g. July premium is due July 1st. UnitedHealthcare (UHC) will debit your account on that day, or the first banking day of the month if the 1<sup>st</sup> falls on a weekend or holiday.

Automatic withdrawals will continue as the premiums come due until you cancel this agreement by submitting the request in writing to *UnitedHealthcare Benefit Services, P. O. Box 221709, Louisville, KY 40252*. *When changing banks, you must notify UHC accordingly. Personal Check is not permitted. All payment transactions must be completed via ACH process.*

**Insufficient Funds:** If the automatic withdrawal is rejected by your bank due to insufficient funds or other circumstances, UnitedHealthcare will resubmit the automatic withdrawal one more time at the end of the 30 day grace period.

**Notice of Insufficient Funds:** If an adequate withdrawal cannot be made at or near the 1st of each month, UHC will send out a notice of insufficient funds reminding you of the grace period. You will have 30 days from the date the premium was originally due to fund your account. For example, if premium was due on July 1st, the grace period expires on July 30<sup>th</sup>.

**Important Notice: If a second instance of insufficient funds occurs within the same plan year, the grace period will not apply, and your coverage will be terminated immediately.**

**Reinstatements:** If your retiree coverage is terminated due to insufficient fund balances, you will not be permitted to re-enroll in the plan until 12 months after the date of termination. For example, if your coverage is terminated for insufficient funds on September 30, 2011, reinstated coverage will not begin until October 1, 2012. You will need to contact the Benefits Unit to process this special re-enrollment.

**Reinstatement will not be available to any retiree following a second termination from the plan. Thereafter, you will be permanently removed from all district-paid benefits as a retiree.**

**Reinstatement Appeal Process:** If you can provide sufficient proof of extenuating circumstances leading up to your termination from the plan, those circumstances will be reviewed by the FHDA Benefits Staff for a “special circumstances” reinstatement. Such reinstatement will only be allowed when either a bank error has occurred, or you have been unable to adequately fund your account due to your own hospitalization during the time funds were due and found to be insufficient.