

Annual Benefits Online Open Enrollment is May 1, 2024 through May 17, 2024

Mt. San Jacinto Community College is committed to providing a comprehensive benefit package to our employees at an affordable cost. Our package includes health, dental, vision, life insurance, wellness programs and voluntary plans to help meet the diverse needs of our employees and their families. Employees will have the opportunity to decide what plans are best for you during our Open Enrollment beginning May 1, 2024, and will continue through May 17, 2024. Any changes made to your benefits during this Open Enrollment period will go into effect July 1, 2024. The information in this package highlights important updates regarding the current benefits being offered. It is crucial you take the time to read through this information to determine how it will affect your benefits and whether you will need to make changes.

IMPORTANT: We are asking all benefit eligible employees to login into *BenefitBridge* to review your current benefit elections and beneficiaries, EVEN IF YOU ARE NOT MAKING ANY CHANGES. **REMEMBER TO UPDATE YOUR BENEFICIARY!** A beneficiary is the person or persons who will be paid if you should pass away while covered under the life plan(s). A person becomes your beneficiary only if you have named them when you enrolled, or changed the beneficiary at a later date. You may change your beneficiary at any time by logging into *BenefitBridge*.

How to Enroll or Make Changes

All benefit eligible employees must login to the online benefits portal **BenefitBridge** at <u>www.benefitbridge.com/msjc</u> during the Open Enrollment period. A flyer on how to navigate **BenefitBridge** is included in this package. If you need assistance working the online enrollment portal, call the **BenefitBridge** Customer Care hotline at (800) 814-1862 Monday-Friday 8:00 am to 5:00 pm. We also encourage you to visit the Resource Center in **BenefitBridge** for additional detailed information about our benefits package.

Date	Time	Event & Location	
Wednesday, May 1, 2024	9:00 am – 12:00 pm	Keenan & American Fidelity Workshop	
		Room: ADM 200	
		1499 N. State Street	
		San Jacinto, CA 92583	
Tuesday, May 7, 2024	10:00 am – 2:00 pm	Health Fair, Room: TA 301	
		41888 Motor Car Pkwy	
		Temecula, CA 92591	
Monday, May 13, 2024	2:00 pm – 5:00 pm	Keenan & American Fidelity Workshop	
		Room: 3026	
		28237 La Piedra Road	
		Menifee, CA 92584	

Learn About Your Benefits! Carriers will be Available to Answer Questions!

If you are unable to attend one of these events, all benefit questions should be directed to the District Benefits Office at <u>benefits@msjc.edu</u> The deadline to make any changes is May 17, 2024!







The following tables summarize what is included in your core benefit package and the voluntary plans eligible employees can enroll in. By clicking on each link you can pull the benefit summary, and also click here for the <u>RATE SHEETS</u> Detailed benefit information is provided in *BenefitBridge*.

Core Benefits					
Medical	Dental	Vision	Other		
Anthem HMO20	Anthem PPO	EyeMed Vision (closed to new enrollment)	Group Life w/AD&D		
Anthem HMO30	Delta Dental PPO	VSP Vision	Anthem EAP		
Anthem DHMO500	Delta Dental Incentive Plan (closed to new enrollment)				
Anthem PPO500	MetLife DHMO (aka Safe Guard) Dental Plan (closed to CTA)				
Anthem PPO750					
Anthem PPO1250 Essentials					
Anthem HSA1600					
Anthem Minimum Value Pla					
Kaiser HMO20					
Kaiser DHMO500					
Kaiser HSA HMO					
Kaiser Minimum Value Plan					
CompleteCare					

Voluntary Benefits					
MetLife Voluntary Life	MetLife Voluntary AD&D	Colonial Medical Bridge	MetLife Legal		
American Fidelity Products	ID Theft Protector	Nationwide Pet Insurance			







2024 Benefit Updates & Policy Changes

Once again, the REEP JPA has been hard at work, acting to implement plans and benefit enhancements designed to provide the REEP member districts with more options and reduce overall costs. Below is an overview of the updates and policy changes for the 2024-2025 plan year.

New REEP Health Center for Anthem PPO, HSA and MVP Members

Great news for REEP Anthem **PPO, HSA and MVP members**! REEP is partnering with Everside Health and recently opened a Health Center in Murrieta, at 25395 Hancock Ave. Suite 200, Murrieta CA 92562. Everside Health Center covers up to 90% of your comprehensive and primary care needs with virtually no out-of-pocket costs (\$0 copay for all preventive services for PPO and HSA plan participants. \$0 copay for non-preventive services for PPO members and only a \$10 copay for HSA plan participants). REEP participating school district/college employees and dependents on **PPO, HSA or MVP** plans can access Everside Health services including virtual care and 24/7 access to your provider for emergencies. Everside providers are dedicated to your healthcare and are easy to reach by phone or video. Services include, but are not limited to:

- Annual physical exams
- Chronic condition management
- Full-scope family medicine
- Men's and women's health
- Mental health screenings
- No cost onsite lab work
- School and sports physicals
- Select onsite medications at little to no cost
- Sick and urgent care
- Same and next day appointments
- 24/7 phone access to your care team for urgent needs

To learn more, visit www.eversidehealth.com





Express Scripts (ESI) Prescription Drugs

- IMPORTANT MESSAGE for Anthem Blue Cross Members

The prescription drugs for ALL Anthem Blue Cross members are provided through Express Scripts (ESI). When enrolled in Anthem Blue Cross, the member will receive an Anthem Blue Cross Identification Card (ID) and, in separate mail, will receive an ESI ID card. Anthem Blue Cross members must use their ESI ID card when purchasing prescriptions at the pharmacy. If a member tries to use their Anthem Blue Cross ID, the member will be advised they do not have prescription coverage.

It is beneficial to all Anthem Blue Cross members to purchase their maintenance prescriptions through the ESI mail order program. By purchasing your maintenance drugs through the ESI mail order program, you will receive a three-month supply for two copays. Please refer to the ESI benefit summary available at the district benefits office.

UPDATE: Effective July 1, 2024, if an enrolled HMO member is unable to receive a vaccination at your primary care physician's (PCP) office due to the vaccine being unavailable through the PCP, you will be able to get your vaccination at a pharmacy and have it covered under the ESI prescription benefit. Please refer to the benefit summary for vaccinations included in this benefit.

Anthem Medical

As a result of updated legislation, the current Health Savings Account, HSA1500 plan, will **change the deductible from \$1,500 individual/\$3,000 family to \$1,600 individual/\$3,200 family effective July 1, 2024**. Therefore, the HSA1500 plan will now be referred to as the HSA1600 plan.

Kaiser Permanente Medical

As a result of updated legislation, the current Health Savings Account plan (Kaiser HSA), will **change the deductible from \$1,500 individual/\$3,000 family to \$1,600 individual/\$3,200 family effective July 1, 2024**.

Employee Assistance Program (EAP) for Anthem Blue Cross, Kaiser and Non-Benefit Eligible Employees

The REEP Employee Assistance Program (EAP) is provided through Anthem Blue Cross to <u>all employees</u> of the district and all immediate family members living in the employee's household. The benefits of this program are available to Anthem Blue Cross members, Kaiser members and employees who may not be eligible for benefits.

NOTE: the Anthem EAP benefits are separate from the mental health and substance abuse benefits included in the Anthem and Kaiser medical plans. The REEP EAP provides a maximum of five (5) face-to-face counseling visits per incident. This now includes the use of TalkSpace, if you would prefer to use a text/chat-based service. For information on how to access this benefit, please refer to the EAP flyer provided by the district benefits office.





REEP Wellness Program – Omada Health

REEP has renewed the Omada Health wellness program services for 2024 - 2025. Omada Health program is focused on diabetes/hypertension and weight management and is offered to REEP employees enrolled in either Anthem or Kaiser Permanente who qualify to participate. This year, REEP is offering a **\$150 one-time reward** in the form of a cash card for REEP members who apply for and (if eligible) enroll in an Omada condition management program for diabetes, hypertension, diabetes+hypertension, or joint/muscle health, to boost member participation in those programs. The goal of this program is to help REEP members:

- Lose weight (and keep it off) with small, sustainable lifestyle changes
- Build strategies for healthy eating, activity, sleep and stress management
- Reduce the risk of developing type 2 diabetes, heart disease and stroke
- Hypertension Specialized Coaching
- Best in class musculoskeletal program
- Expert Physical Therapists anytime, anywhere

More information is available at the district benefits office.

Anthem Dental Plan Enhancement

Faculty/CTA: Anthem Dental is being eliminated and will no longer be available to Faculty/CTA employees. All unit members will need to transition to the Delta Dental PPO plan effective July 1, 2024.

All other benefit-eligible employees: We are pleased to be including an additional \$500 orthodontic lifetime maximum to this plan. Orthodontia coverage will be increased from 50% to \$1,500 for adults and children lifetime maximum to 50% to \$2,000 for adults and children lifetime maximum effective July 1, 2024. NOTE: this will not be available to those who previously exhausted their lifetime orthodontia maximum.

Delta Dental Plan Enhancements

We are very pleased to be able to include an orthodontia benefit on our Delta Dental plan effective July 1, 2024. Orthodontia will now be included for adults and children at 50% up to a \$500 lifetime maximum benefit.

We are also very pleased to advise the Delta Dental PPO plans will **now include a mouthguard benefit with a \$500 lifetime maximum benefit.**

Additionally, **teeth whitening will be included in the Delta Dental PPO plans, covering one treatment every 24 months.** Benefits will be paid under the basic benefit level and will apply towards the annual maximum. The teeth whitening benefit for an incentive plan will we paid at the incentive level. Non-incentive plans will be paid at the percentage appropriate for that plan. As a reminder, the Delta Dental incentive plan is closed to new enrollment.





MetLife Dental – IMPORTANT INFORMATION

Faculty/CTA: MetLife Dental DHMO is being eliminated and will no longer be available to Faculty/CTA employees. All unit members will need to transition to the Delta Dental PPO plan effective July 1, 2024.

EyeMed and Vision Service Plan (VSP) – IMPORTANT UPDATE

Classified Employees/CSEA: All Classified unit members hired on or after July 1, 2024 will be offered VSP only as their vision benefit option. Current unit members enrolled in EyeMed will continue EyeMed enrollment unless you change to VSP during Open Enrollment. If you change from EyeMed to VSP, you will not be able to enroll in EyeMed at a later date.

Faculty/CTA: EyeMed will no longer be available to Faculty/CTA employees effective July 1, 2024. All unit members will need to enroll in the VSP plan for an effective date of July 1, 2024.

REEP Value Added Benefits

TruHearing Discount Program

All REEP members have access to hearing aids at a far reduced price through the TruHearing Discount Program. REEP members can shop state of the art hearing aid technology at a savings between 30% to 60% off. Call TruHearing at (844) 524-3976 Monday through Friday, 8am – 8pm, For TTY, dial 711.

Colonial Medical Bridge (Hospital Indemnity)

There are four (4) Hospital Indemnity plans to choose from which could help pay for out-of-pocket medical expenses, such as deductibles, co-payments and other expenses, and will also reimburse you for some preventive screenings. You can view the details of the available plans and/or elect to enroll in a Hospital Indemnity plan online through *BenefitBridge*.

Identify TheftPROTECTOR

REEP offers the most comprehensive and affordable identity fraud and resolution service available today. For just \$12.00 tenthly you can protect your entire family against identity theft and fraud. Information on this valuable benefit option is available on *BenefitBridge*.





Transcarent for Anthem PPO/HSA/Minimum Value Plan members

This program incentivizes the use of Centers of Excellence for elective surgeries such as cardiac, general, joint replacement, orthopedic, spinal, women's health, etc. If PPO/HSA/MVP members are referred for surgery, you can contact Transcarent at (844) 643-0606 to be guided to facilities and providers who are performing in the top 25% for that specific surgery.

- If you opt to use the Transcarent program for your surgery, PPO/MVP members will have your deductible and coinsurance waived. HSA members will be subject to the deductible, however your coinsurance will be waived and you will receive a "care allowance" of \$1,600.
- If you are traveling to a facility over 100 miles away, travel expenses are covered for the member and a companion to travel with you (includes airfare, lodging, incidentals).
- Members can call and receive a second opinion at no charge, and you can decide not to move forward if you would rather pursue a different course of action (This is a great benefit of the program).
- Members must call to begin the process; there is no outreach.
- Bundled contracts cover all costs from pre-op to post-op. Note this includes anesthesiology, so this removes the surprise bill that comes from non-contracted anesthesiologists.

Additional Voluntary Benefits

Voluntary Pet Insurance through Nationwide

Another popular voluntary plan offered is Pet Insurance through Nationwide. Nationwide's My Pet Protection pet insurance helps cover veterinary expenses providing your pets with the best care protection. All enrollments are done by logging into Nationwide's link below. Premiums are paid direct to Nationwide and not payroll deducted.

Easy enrollment:

There are two simple ways for employees to sign up for this plan:

- 1. Go directly to the dedicated URL: <u>http://benefits.petinsurance.com/msjc</u>
- 2. Call 877-738-7874 and mention you are an employee of Mt. San Jacinto Community College to receive preferred pricing.





MetLife Voluntary Life Insurance

During Open Enrollment, you may elect additional life insurance or increase your existing coverage for yourself and your eligible dependents. If you're enrolling in life coverage, you may apply for spousal life coverage up to 100% of your amount of coverage, not to exceed \$500,000 or 5 times the employee's annual salary. The coverage must be in increments of \$10,000. You may also apply for supplemental life coverage for your child(ren) to a maximum of \$10,000 only if you are also covered.

Election of additional life insurance will require the completion of a MetLife Statement of Health (SOH) form. You will be prompted in on **BenefitBridge** to download the SOH form. The completed SOH form should be returned to the Benefits Office for forwarding to MetLife for approval.

If you wish to enroll in any of the MetLife plans, and if an employee and spouse are both eligible employees, the following options are available: a) they may each be insured as an employee, or b) one may be insured as an employee and insure the other as a spouse. Children may be covered by either the employee or the spouse, but not both.

Please Note: When applying, if you do not complete the required Statement of Health Form (SOH), you and/or your dependents will not be approved and will not be enrolled in Voluntary Life insurance coverage.

MetLife Voluntary Accidental Death & Dismemberment (AD&D) Insurance

Accidental Death & Dismemberment (AD&D) insurance provides an extra layer of protection if you die or become dismembered in an accident. You can also purchase Voluntary AD&D for your eligible dependents such as your spouse and child(ren).

You may elect this insurance or increase your current benefit, not to exceed 10 times your annual income, at an affordable cost. Should you decide you do not wish to purchase additional Voluntary AD&D coverage, you are encouraged to still name a beneficiary as you will be provided with a "no cost" \$2,000 benefit as long as you enroll online.

If you wish to enroll in any of the MetLife plans, and if an employee and spouse are both eligible employees, the following options are available: a) they may each be insured as an employee, or b) one may be insured as an employee and insure the other as a spouse. Children may be covered by either the employee or the spouse, but not both.

Remember to Update Your Beneficiary!

A beneficiary is the person or persons who will be paid if you should pass away while covered by the plan. A person becomes your beneficiary only if you have named them when you enrolled. It is important to keep this information current. You may change your beneficiary at any time by logging in **BenefitBridge**.





Flexible Spending Accounts (FSA)

Medical FSA and Dependent Care FSA will require you to complete your enrollment for the new plan year – **even if you are electing the same dollar amount, you must re-enroll in the FSA each year.** To do this, you will need to schedule an in-person or virtual meetings by calling American Fidelity (800) 365-9180.

Qualifying Life Events

Once the open enrollment deadline is past, your choices are binding until the next open enrollment period. Mid-year cancelation and/or plan changes are not permitted unless you experience a qualifying life event. Completed enrollment forms and documentation of qualifying life events will be required within 31 days of the event.

A list of possible qualifying life events and supporting documentation include:

- Marriage Copy of a certified marriage certificate
- Divorce Copy of the legal divorce decree
- Newly Eligible Dependent Child(ren) Up to Age 26 Birth certificate or adoption certificate
- Disabled Dependent Children (age 26 and over) See Benefits Office for required filing
- Loss of Coverage for a Spouse Letter from the spouse's insurance provider stating you and any dependents is no longer covered by their insurance plan

Important Reminders:

- 1. Governmental regulations require all employees carry medical insurance. Therefore, any employee who declines group medical insurance **MUST** denote on **BenefitBridge** that you are waiving medical insurance, electing not to enroll in the plan(s) offered by the district.
- 2. Once you make your plan elections, you cannot change to a different plan until the next open enrollment period without a qualifying event. A loss or change of provider is <u>not</u> considered a qualifying event. If your physician is no longer an eligible provider for the plan you have chosen, you must choose a new participating provider, or the carrier will select one on your behalf.
- 3. Eligible dependents include your spouse, registered domestic partner, and your children up to their 26th birthday (or your dependent child(ren) of any age who is totally disabled prior to age 26). This includes natural children, step-children, adopted children and children for whom you are a court appointed guardian. This also includes any child for whom you are required to provide coverage under a Qualified Medical Child Support Order (QMCSD).
- 4. If you wish to enroll in any of the MetLife plans, and if an employee and spouse are both eligible employees, the following options are available: a) they may each be insured as an employee, or b) one may be insured as an employee and insure the other as a spouse. Children may be covered by either the employee or spouse, but not both.

