



JOINT LABOR MANAGEMENT BENEFITS COMMITTEE

RETIREE



Los Angeles Community College District – Newsletter

SPRING 2025

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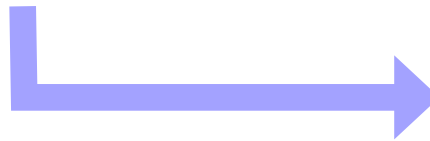
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Highlighted Article of the Spring 2025 Edition

The Employee Assistance Program (EAP)

Our provider TELUS Health (formerly LifeWorks) can help address challenges at work and at home. You can access the TELUS Health re- sources multiple ways to support specific needs. Learn more on [page 3](#).



-  Video counseling
-  Live online chat with counselor
-  Text messaging with counselor
-  Motivational messaging programs
-  Online self-assessments
-  Award-winning My EAP app

Other Important Items

- **NEW: The VSP Vision** plan now includes Light Care for all members. This service offers blue light protective lenses without requiring a prescription. All members will still also have access to blue light protective lenses with a prescription if they so choose.
- **Mental Health:** If you are feeling stress, grief, or anxiety during this time, you are not alone. Find ideas for what could help on [page 4](#) or get the help you need, anytime, anywhere with **CareNow** - our new online EAP programs at one.telushealth.com.
- **Dental Insurance:** You are offered dental insurance from the District. Read some reasons why you should consider dental insurance on [page 10](#).
- **Retirement:** No one is too young to save for retirement. Understand how you can start saving for your future, today.
- **Medicare:** There are important things to know regarding Medicare at any age such as what are the Medicare options and how to get started.
- **Report the Birth of a Child:** The Health Benefits Unit in collaboration with the Information Technology Programmers have released a New and Improved way to report the birth of a child. As with the previous method, you **MUST** have a copy of the birth certificate or hospital birth record (first 60 days) and a copy of the social security card. NOTE: The SS card can be submitted within 90 days. The report is either approved or rejected and you will receive an email. If rejected, you will receive a short note explaining the reason for the rejection. Go to your portal profile: myportal.laccd.edu to start the process.

Injured at Work? Know your Options



What is Workers' Compensation? Under California law, employers provide restorative benefits to employees injured at work. The main qualifying question to consider when determining whether an employee's injury is workers' compensation eligible is "Did the injury/illness arise out of the employment and within the course and scope of the employment?"

What should you do? The first point of contact for all employee injuries is Company Nurse (855.602.5264). Company Nurse provides the initial intake and assessment and will provide appropriate information and direction (including referral to a medical facility if necessary). Be sure to make note of the date and time you called, with whom you spoke, and what was discussed.

In order to file a claim, three forms are completed —the Supervisor's Report of Injury or Illness form, the Employee's Claim for Workers' Compensation Benefits form, and the Employer's Report of Occupational Injury or Illness form. The forms can be obtained at the Sheriff's office at your campus. They can then be sent to:

DOWorkersCompSpecialisthelp@laccd.edu

The Claims Process. If a claim is not witnessed, is reported late, requires medical treatment before filing, stems from a short work history, does not provide specific incident information or the claimant suffers from cardio/pulmonary/stress injuries or illnesses, has a history of disciplinary actions, or is a part-time employee, the claim will likely require additional documentation. Claims requiring additional documentation are allowed a 90-day delay period of investigation to gather and verify facts, obtain any prior medical records, schedule a medical exam, obtain statements, and investigate any prior claims.

Pre-Designation of a Preferred Physician. If you would prefer to designate a specific physician to be your eligible workers' compensations claims doctor should you need to file a claim, be sure to do so prior to any potential claim for injury. You can find the designation form by going to laccd.edu and selecting Departments > Business Services > Risk Management > Workers Compensation > Forms, and selecting the form at the bottom of the page titled "Statement of Employee's Pre-Designated Physician and Employee Consent Form."

Additional Questions? Communication during the workers' compensation claims process is key. If you have any further questions about the process, please reach out to DOWorkersCompSpecialisthelp@laccd.edu.



EAP: Get the Help You Need



The Employee Assistance Program (EAP) is a confidential service provided by LACCD that offers help with personal and work-related issues. TELUS Health, the district's EAP provider, is an innovative wellbeing solution that provides employees and their family members with an easy-to-use online platform and app with all the tools you'll need to be healthy and happy. TELUS Health makes it easier to access a confidential employee assistance program (EAP) and connect with your workplace community. **Take a minute and join today! (Go to the email invitation sent monthly from TELUS Health and click JOIN NOW.)**

Why you should join TELUS Health

1. Feel supported 24/7, 365 days a year with a confidential support service for all of life's stresses, whether you're expecting a baby, going through a divorce, feeling lonely or feeling overwhelmed at work.
2. Choose Snackable Wellbeing topics from leading experts you're most interested in improving.
3. Stay connected with what's happening across the organization.

Getting started using TELUS Health Online

Getting started with TELUS Health is easy.

1. Check your email inbox for an invitation or email walkerkc@laccd.edu to request access. Sign up by clicking the JOIN NOW link in the email.
2. Create a password.
3. Download the TELUS Health app to easily access a wealth of online resources!

Support for your immediate family members!

Under "Profile", invite up to five (5) dependents to join you on the TELUS Health platform!

Contact your EAP any time, 24/7
 800.581.1485
 - OR -
one.telushealth.com
 - OR -
 Download the TELUS Health App






TELUS Health offers support with mental, financial, physical and emotional wellbeing				
Life	Family	Health	Work	Money
Retirement	Parenting	Mental Health	Time Management	Savings
Midlife	Couples	Addictions	Career Development	Investing
Student Life	Separation/Divorce	Fitness	Work relationships	Budgeting
Legal	Older relatives	Managing Stress	Work Stress	Manage Debt
Relationships	Adoption	Nutrition	Managing People	Home buying
Disabilities	Death/Loss	Sleep	Shift Work	Renting
Crisis	Child Care	Smoking Cessation	Coping with Change	Estate Planning
Personal Issues	Education	Alternative Health	Communication	Bankruptcy

Calming Strategies to Manage Anxiety

Nearly 20% of adults in the U.S. experience anxiety, with most developing symptoms before the age of 20. The exact cause of anxiety is unknown, but experts believe there are both genetic and environmental components.

People experience anxiety differently, but the common thread is a persistent, excessive fear or panic in everyday situations. Challenging life circumstances often precede anxiety. Changing jobs, dealing with a health problem, moving, and being a caregiver are all common triggers. Symptoms of anxiety can range from feelings of restlessness to intense physical symptoms like nausea, sweating, and shortness of breath.

Learning how to manage anxiety can help reduce the intensity and frequency of your symptoms. Try these calming strategies the next time you feel anxious:

- **Phone a friend.** Connect with a trusted friend or mentor who is a good listener. Sometimes venting your feelings and emotions is all you need to release intense emotions.
- **Avoid alcohol.** Alcohol intensifies emotional responses and interrupts sleep quality, which can make anxiety worse.
- **Avoid caffeine.** For some people, caffeine amplifies physical symptoms of anxiety, leading to increased heart rate and shortness of breath.
- **Prioritize restful sleep.** Since physical and mental exhaustion can worsen anxiety symptoms, try to get at least 7 hours of restful sleep each night.
- **Try deep breathing.** Use deep breathing, also known as belly breathing, as soon as anxiety symptoms appear. Deep breathing lowers your heart rate and blood pressure, which can help you feel calmer and more relaxed.

» **How to do it:** Lie down or sit up straight and place your hands on your belly. Close your mouth and to a count of 4, take a slow, deep breath through your nose. As you breathe in, push out with your stomach and allow your belly to expand as if you were filling a balloon. To a longer count of 6, breathe out fully through your mouth as if you were blowing bubbles, while at the same time letting your belly fall back down. Repeat for five to 10 minutes until you feel relaxed.

- **Keep a journal.** Record details about your anxiety symptoms in a journal, and note the people, situations, or other factors that may have played a role. These clues can help you and your healthcare team predict when anxiety might occur in the future.

Equipped with the right self-care tools, you can learn to manage anxiety when symptoms first appear. However, if your attempts to self-manage are not effective, contact your healthcare provider or a mental health professional to discuss other treatment options.



Financial Wellness

10 Tips to Improved Financial Wellness

Financial wellness is not just for those who are planning for retirement; it is equally important for those who are already retired. Managing your finances during retirement can help ensure that you have enough funds to sustain your lifestyle and meet your needs. Here are some tips to help you achieve financial wellness during your retirement years:

1. **Review your budget:** A budget will help you differentiate between needs and wants, identify unneeded spending, and plan for short- and long-term goals.
2. **Minimize unnecessary expenses:** Identify areas where you can cut back on expenses without compromising your quality of life. This could include reducing dining out, shopping for discounts, or downsizing your living arrangements.
3. **Stay informed about tax strategies:** Understand the tax implications of your retirement income and explore strategies to minimize your tax liability. Consult with a tax professional to ensure that you are taking advantage of all available deductions and credits.
4. **Monitor your investments:** Keep a close eye on your investment portfolio. Review your asset allocation and make any necessary adjustments to ensure that your investments are aligned with your risk tolerance and financial goals.
5. **Consider downsizing:** If you find that your current home is too large or expensive to maintain, downsizing can be a smart financial move. Selling your home and moving to a smaller, more affordable property can free up funds for other expenses.
6. **Seek professional advice:** Consider consulting with a financial advisor who specializes in retirement planning. They can provide personalized guidance and help you navigate the complexities of managing your finances during retirement.
7. **Protect against fraud:** Unfortunately, retirees are often targeted by scammers. Stay vigilant and protect yourself against fraud by being cautious with your personal information and regularly monitoring your financial accounts.
8. **Consider part-time work:** If you find that you need additional income during retirement, consider part-time work or freelancing. This can help supplement your retirement savings and provide a sense of purpose.
9. **Explore healthcare options:** Healthcare costs can be a significant burden during retirement. Research and compare different healthcare plans to ensure that you have adequate coverage at the most affordable price.
10. **Enjoy your retirement:** While it's important to be financially responsible, don't forget to enjoy your retirement. Find a balance between saving and spending, allowing yourself to indulge in activities and experiences that bring you joy.



Another resource that can assist with your financial wellness 24/7, 365 days a year is your Employee Assistance Program (EAP). Download the TELUS Health One app, visit one.telushealth.com on a web browser or call [800.581.1485](tel:800.581.1485) anytime (see [page 3](#)).

Plant-Forward Eating Styles

Plant-forward eating styles and plant-based diets focus more on foods that come from plants and less on foods of animal origin. In general, plant-forward meal patterns typically include larger amounts of fruits, vegetables, whole grains, seeds, nuts, and legumes (beans).

The American Heart Association describes plant-forward eating as a style that “emphasizes plant-based foods but is not strictly limited to them.” Unlike vegan diets, which exclude all animal foods, plant-forward diets often include small portions of meat, poultry, seafood, and dairy.

A number of health benefits have been tied to eating more plants. For one, plants contain a wide variety of antioxidants and phytonutrients that support healthy immune function and protect against illness. In addition, research suggests that plant-forward eating styles may promote weight loss and help maintain those losses. Eating less meat has been linked to lower risks of developing conditions like heart disease, stroke, type 2 diabetes, high blood pressure, and cancer.

Examples of plant-forward diets include:

- **Lacto-Vegetarian:** includes milk
- **Ovo-Vegetarian:** includes eggs
- **Pesco-Vegetarian:** includes fish
- **Pollo-Vegetarian:** includes chicken
- **Vegetarian:** a generic term that usually excludes some or all animal-based foods
- **Flexitarian:** includes some meat, but in fewer quantities

Shifting to a plant-forward eating style requires a shift in mindset. An easy place to start is to relabel meat as a side dish rather than the main course. Try limiting animal-based foods to just 25% of your plate, or planning a meatless meal one or more days each week.

It is important to remember that when you restrict certain foods or food groups, it may be more challenging to meet your nutritional needs. As you make small adjustments to become more plant forward, be sure to include a variety of foods that contain essential vitamins, minerals, and protein. Keeping a food journal or meeting with a registered dietitian can help you identify and fill nutrient gaps.



8 Ways to Get Better Sleep

It is easy to take sleep for granted if you have never struggled with insomnia (the inability to sleep), but not getting enough sleep can disrupt your physical, emotional, and mental wellbeing.

Prioritizing sleep helps ensure your body gets the rest it needs to keep you functioning at your best.



Here are 8 ways to get better sleep:

1. **Keep a sleep diary.** Record insights about your sleep patterns in a journal. Pay particular attention to how you feel at different times of the day, how caffeine or other foods affect your sleep, and any other recurring themes you notice.
2. **Stick to a schedule.** Experiment with different sleep schedules to see which one results in the best sleep quality. A consistent sleep schedule supports your body's natural rhythms.
3. **Track your sleep.** Wearable devices help track your movement and detect rest and non-rest activities. This feedback can be used to better understand your sleep patterns, and help you pinpoint where to focus your efforts to get better sleep.
4. **Protect quiet time.** Noise disrupts brain function and makes it more difficult to fall and stay asleep. Loud noise may even disrupt your heart rhythms, which can increase the risk of blood clots, stroke, and heart failure. Adjusting the lighting and room temperature may also help improve your sleep.
5. **Avoid stimulants.** Stimulants like caffeine and tobacco disrupt sleep and cause other health problems, so it may be helpful to make small adjustments to your daily routines. For example, try avoiding stimulants after noon and see how it affects your sleep.
6. **End all screen time well before bedtime.** Screens emit blue light. This can suppress your body's melatonin production, which can disrupt your sleep cycle. To prevent this, avoid extended screen time in the two hours before you want to sleep.
7. **Boost your physical activity.** Consistent physical activity helps maintain your circadian rhythms, which can help you to get better sleep.
8. **Try a sleep aid.** Over-the-counter sleep aids may help you fall and stay asleep. Some of these products can interfere with other medications, so be sure to check with your doctor before taking a sleep aid or supplement. If you are unable to find relief using self-care strategies, talk with your doctor about other treatment options or testing that may be needed to assess your symptoms.

Aging Gracefully



While aging is inevitable, it can be embraced positively by staying open to new experiences, maintaining health through diet, exercise, and regular medical check-ups, and staying socially active.

Aging gracefully helps maintain a positive self-image and focus on meaningful aspects, of life, such as relationships and experiences. It also involves maintaining a healthy mindset and being kind to oneself.

The following are some steps that anyone can do to age gracefully:

1. **Maintain a positive attitude:** Embrace the aging process and focus on the positive aspects of growing older, such as wisdom and experience.
2. **Stay active:** Engage in regular physical activity to maintain strength, flexibility, and mobility. This can include walking, swimming, yoga, or other activities you enjoy.
3. **Eat a healthy diet:** Maintain a balanced diet rich in fruits, vegetables, whole grains, and lean proteins. Limit processed foods, sugary snacks, and excessive alcohol consumption.
4. **Stay socially connected:** Maintain relationships with friends and family members. Join clubs, volunteer, or participate in community activities to stay connected and engaged.
5. **Keep learning:** Stay mentally active by learning new skills, taking up hobbies, or engaging in activities that challenge your mind.
6. **Practice gratitude:** Focus on the things you are grateful for and cultivate a sense of appreciation for the life you have lived.
7. **Take care of your body:** Get regular check-ups with your healthcare provider and address any health concerns promptly. Practice good hygiene and skincare habits.
8. **Manage stress:** Practice stress-reducing techniques such as meditation, deep breathing, or yoga. Engage in activities that help you relax and unwind.
9. **Embrace change:** Accept that change is a natural part of life and embrace the opportunities that come with each stage of life. Change is a natural part of life and embrace the opportunities that come with each stage of life.

It is important to remember that aging is a journey, and maintaining a positive attitude and taking care of your health makes it that much easier to live a fulfilling life. It is a journey that requires patience, self-love, and a willingness to adapt. As the saying goes, “age is just a number,” and how we navigate this journey can greatly impact our overall happiness and well-being.

The Benefits of a Healthy Habits Tracker and How to Use It

In today's fast-paced world, maintaining a healthy lifestyle can often feel like a daunting task. With numerous responsibilities and distractions, it's easy to lose track of our health goals. This is where a healthy habits tracker comes into play. A healthy habits tracker is a tool designed to help individuals monitor and maintain their daily health routines, ultimately leading to improved well-being and productivity. Here, we explore the benefits of using a healthy habits tracker and provide guidance on how to effectively incorporate it into your daily life.

Benefits of a Healthy Habits Tracker

- 1. Increased Awareness and Accountability:** One of the primary benefits of using a habits tracker is the heightened awareness it brings to your daily routines. By logging your activities, you become more conscious of your habits, both good and bad. This awareness is the first step towards making positive changes. Additionally, tracking your habits holds you accountable, as you can clearly see your progress over time.
- 2. Motivation and Goal Setting:** A habits tracker serves as a visual representation of your goals and progress. Seeing your achievements, no matter how small, can be incredibly motivating. It encourages you to set realistic goals and provides a sense of accomplishment as you reach them. This motivation can be a powerful driver in maintaining long-term healthy habits.
- 3. Identifying Patterns and Making Adjustments:** By consistently tracking your habits, you can identify patterns in your behavior. This insight allows you to pinpoint areas that need improvement and make necessary adjustments. For instance, if you notice that you consistently skip workouts on certain days, you can explore the reasons behind it and find solutions to overcome these obstacles.
- 4. Stress Reduction and Improved Mental Health:** Keeping track of healthy habits such as exercise, sleep, and mindfulness practices can significantly reduce stress levels and improve mental health. A habits tracker can remind you to take breaks, practice gratitude, or engage in relaxation techniques, contributing to a more balanced and fulfilling life.

How to Use a Healthy Habits Tracker

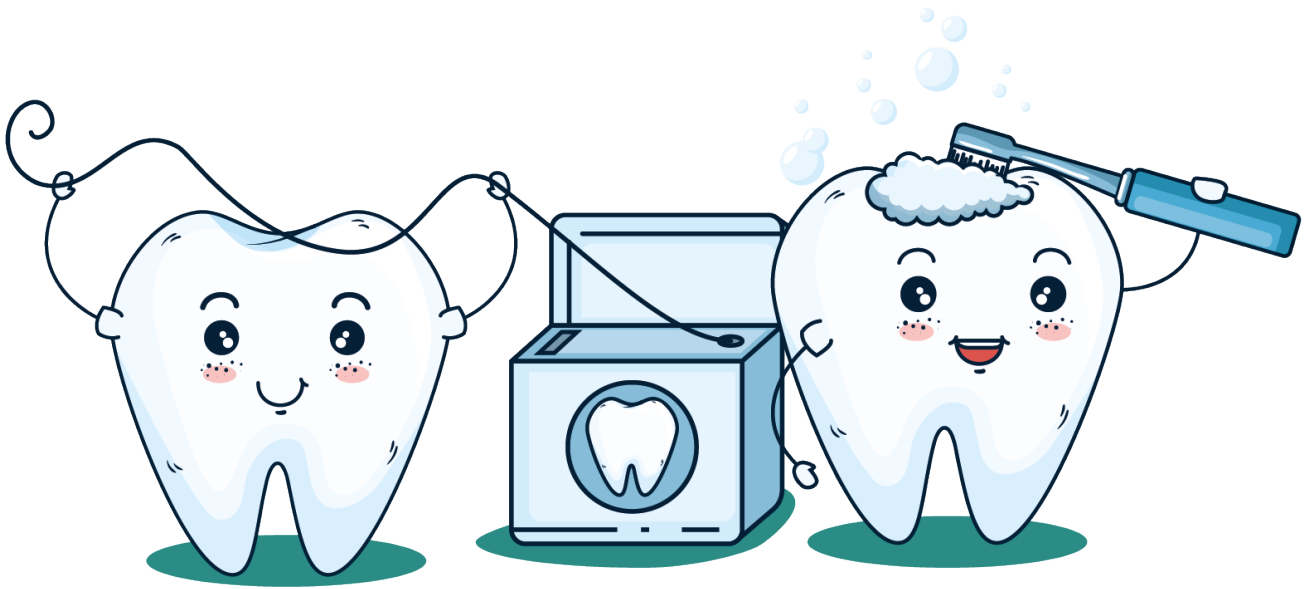
- 1. Choose the Right Tool:** There are various habits tracking tools available, from traditional paper journals to digital apps. Choose one that suits your lifestyle and preferences. Digital apps often offer additional features such as reminders, analytics, and community support. There is a simple tracker shown below if you are looking for an easy place to start.
- 2. Define Your Habits:** Start by identifying the habits you want to track. These could include physical activities, dietary choices, sleep patterns, hydration, or mindfulness practices. Be specific about what you want to achieve with each habit.
- 3. Set Realistic Goals:** Establish achievable goals for each habit. It's important to start small and gradually increase the difficulty as you build consistency. For example, if you're tracking exercise, begin with a goal of 15 minutes a day and gradually increase it.
- 4. Track Consistently:** Make it a daily routine to log your habits. Consistency is key to forming lasting habits. Set aside a specific time each day to update your tracker, whether it's in the morning or before bed.
- 5. Review and Reflect:** Regularly review your progress and reflect on your achievements and challenges. Use this reflection to adjust your goals and strategies as needed. Celebrate your successes and learn from any setbacks.

Healthy Habit Tracker							
Habit	Su	M	T	W	Th	F	S

What's the Value of Dental Insurance?

85% of Americans believe oral health is very or extremely important to their overall health and about 78% have dental coverage¹. When you consider the overall value of dental insurance, it's easy to understand why. LACCD has enhanced the Delta Dental plan in the following ways: Preventative services (exams, cleanings, x-rays) are now covered at 100%, anterior and posterior porcelain crowns are now covered and pin hole gum surgery is now covered.

1. It makes dental care more affordable.
2. You are more likely to avoid future dental problems.
3. You are more likely to get the care you need.
4. It can help you save time.
5. It's good for your overall health.



Dental Plan Choices:

LACCD offers two dental plans—Delta Dental PPO and SafeGuard (MetLife) Dental HMO

Delta Dental PPO:

- The PPO offers you the option of choosing any licensed provider, though it is always recommended to stay within the Delta Network.
- If you select a dentist who is a member of Delta Dental's network, you have access to the PPO provider's discounted rates which will reduce your out-of-pocket costs.

SafeGuard (MetLife) Dental HMO:

- On this plan, dentists provide services at little or no cost when you go to a dentist who is a SafeGuard Dental HMO network member.
- The plan requires all enrolled dependents to select a primary care dentist to coordinate their care.
- Unlike the Delta Dental PPO, you cannot select out-of-network dentists.

To make a change to your dental plan, you must make it during open enrollment or during a Qualifying Event.

¹ <https://www.deltadental.com/us/en/about-us/press-center/2018/americans-still-wish-they-saw-their-dentist-more.html> & 2018 National Association of Dental Plans Dental Benefits Report

Medicare: Important Things to Know at Any Age

What are the parts of Medicare?



Part A (Hospital Insurance)

Helps cover:

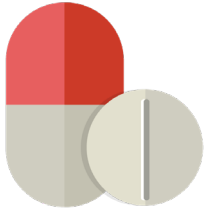
- Inpatient care in hospitals
- Skilled nursing facility care
- Hospice care
- Home healthcare



Part B (Medical Insurance)

Helps cover:

- Services from doctors and other healthcare providers
- Outpatient care
- Home healthcare
- Durable medical equipment (like wheelchairs, walkers, hospital beds, and other equipment)
- Many prevention services (like screenings, shots or vaccines, and yearly “Wellness” visits)



Part D (Drug Coverage)

Medicare Part D can be a standalone plan, but as offered by CalPERS drug coverage is included in an existing health plan. In general, these pharmacy plans are comparable or better than those offered by Medicare Part D stand-alone plans.

Medicare Advantage and Supplement Plans Offered by LACCD (through CalPERS)

Medicare Advantage plans (also known as Medicare Part C) are offered by private insurance companies as an alternative to Original Medicare (Part A and Part B). These plans provide all the benefits of Original Medicare and often include additional coverage such as prescription drugs, dental, vision, and hearing services. There are multiple options from CalPERS for Medicare Advantage plans, each with its own set of features and differences.

LACCD Options

1. Health Maintenance Organization (HMO) Plans: HMO plans typically require you to choose a primary care physician (PCP) who will coordinate your healthcare. In most cases, you need a referral from your PCP to see a specialist. HMO plans usually have a network of doctors and hospitals, and you may be required to receive care within this network, except in emergencies.
 - a. Kaiser Permanente Senior Advantage Summit (HMO)
 - b. Kaiser Permanente Senior Advantage Summit with Dental (HMO)*
2. Preferred Provider Organization (PPO) Plans: PPO plans offer more flexibility in choosing healthcare providers. You can see any doctor or specialist without a referral, but you'll generally pay less if you use providers within the plan's network. PPO plans also cover out-of-network care, but at a higher cost.
 - a. UnitedHealthcare Group Medicare Advantage (PPO)
 - b. UnitedHealthcare Group Medicare Advantage with Dental/Vision (PPO)

*Not required to purchase: LACCD Retirees are provided Dental and Vision coverage as a District benefit.

Medicare Supplement plans (also known as Medigap) are a private form of medical insurance that covers out-of-pocket costs not covered by Original Medicare, such as deductibles, copayments, and coinsurance. For example, if Medicare pays a healthcare provider 80% of its Medicare approved charge for the covered service, the Supplement Plan will pay the remaining 20%. With a Medicare Supplement Plan, you can go to any doctor in the U.S. that accepts Medicare. It's important to know that when you select a Supplement plan you retain original Medicare Parts A & B. The availability of these plans may vary depending on your location.

- a. PERS Gold Medicare (PPO) Supplement
- b. PERS Platinum (PPO) Supplement

When choosing a Medicare Advantage or Supplement plan, consider plan features such as size of provider network, any geographical limits to the network, copayments, coinsurance, procedures that require prior authorization, your specific healthcare needs, and your preferred providers. Generally, you can only make changes to your plan during the annual Fall CalPERS Open Enrollment Period. It is important to note that if you choose a Medicare Advantage Plan, you will no longer have access to Original Medicare Parts A & B, the process to transition back to Parts A & B and a Medicare Supplement plan is not automatic and could require that you undergo medical underwriting by Medicare and is in no way a guarantee that you can return.

Combination Plans

If you are an early retiree (retiring before age 65), you and your dependents will remain enrolled in the basic health plans. Once you or your spouse turns 65, you will fall into the combination plans, as the 65 year old will be in the CalPERS retirement healthcare plan and those under 65 will still be in the basic healthcare plans. After retiring at 65, you will move to the Medicare plans offered by CalPERS.

Medicare Part B Reimbursement

The District will begin accepting reimbursement requests for calendar year 2024 for retirees' Medicare Part B premiums beginning January 1, 2025 through March 31, 2025.

Reimbursement Manager?

The District's FSA/HRA/Medicare Part B vendor, ASIFlex, will continue to manage the reimbursement process. If you have an existing HRA account you will continue to use that to submit your requests. If no longer have an active ASIFlex account, you will need to set up a username, password, and security image with ASIFlex: Go to www.asiflex.com, click on "Employee Login" and then "Create an Account"

Who Is Eligible?

Eligible retirees and spouses as covered in the Master Benefits Agreement (MBA) III. B. – G.

Surviving spouses are also eligible.

What Documentation Do I Need To Provide?

For Medicare part B reimbursement retirees do not have submit proof of payment. You need to submit your copy of the "Notice of Medical Insurance Enrollment and Premium Deduction" that was sent to you in December of 2023, or "Proof of Income" letter from the Department of Health and Human Services (HHS)." You may also submit your SSA-1099 statement for 2024 reimbursement, which should arrive in late January 2025.

Do I Need To Be Vested For District Benefits To Receive Reimbursement?

Eligibility and amounts for the Medicare reimbursement follow the same vesting schedule as the District's vesting for contributions to retiree healthcare premiums:

- Members that retired prior to July 1, 1998 and met the vesting requirement at that time remain eligible and are not impacted by subsequent changes to vesting times or amounts.
- Current amount for the Medicare reimbursement follows the same vesting schedule as the District's vesting for contributions to retiree healthcare premiums:
- Eligible retirees with less than 10 years of service at time of retirement are not eligible for any reimbursement.
- Eligible retirees with 10-15 years of service will receive 50% reimbursement.
- Eligible retirees with 15-20 years of service will receive 75% reimbursement.
- Eligible retirees with 20+ years of service will receive 100% reimbursement.

How Much Will I Be Reimbursed?

Your reimbursement amount depends on your District vesting for benefits and when you retired.

When Can I Expect To See My Reimbursement?

ASIFlex will accept reimbursement requests between 1/1/2025 and 3/31/25. Reimbursement checks or direct deposit (if you provided the necessary banking information) will be processed within 2 weeks of all applicable documentation being received by ASIFlex.

Can I Submit Reimbursements For Prior Years, Or After The Deadline?

Reimbursement of earlier years' premiums is not permitted. You may submit a request for reimbursement only for the prior year's premiums paid, not for premiums paid more than one year earlier. You must submit reimbursement requests by the deadline of March 31, 2025. Late requests cannot be honored.

Medicare: Coordination of Benefits

Tell Medicare if your other health or drug coverage changes

Call the [800.633.4227](tel:800.633.4227) and let the Benefits Coordination & Recovery Center (BCRC) know:

- Your name
- Your policy number
- The name and address of your plan
- The date coverage was added, changed, or stopped, and why

Also, tell your doctor and other healthcare providers about your health or drug coverage changes the next time you get care.

Remember these important facts

- The insurance that pays first (primary payer) pays up to the limits of its coverage.
- The one that pays second (secondary payer) only pays if there are costs the first payer didn't cover.
- The secondary payer (which could be Medicare) might not pay all of the uncovered costs.
- If Medicare is the primary payer and your employer is the secondary payer, your Medicare Part B (Medical Insurance) will pay first before your employer insurance will pay for Part B services.

Tell your insurance company or employer benefits administrator about changes

Tell your insurance company if you or your spouse's current work status changes, or if your Medicare coverage changes. Tell your employer benefits administrator if you have changes to your health insurance coverage. Insurance companies are required to tell Medicare about insurance coverage they offer people with Medicare to help coordinate benefits.

Your insurance company or your employer may ask you for your name, date of birth, gender, and Medicare Number (located on your red, white, and blue Medicare card) so they can give updates to Medicare about your other insurance. It's appropriate to give this personal information to your insurance company or employer to coordinate benefits. Giving this information timely will help make sure your claims are paid correctly.

If you have questions about Medicare, contact Medicare at [800.633.4227](tel:800.633.4227).

If you have questions specific to the coordination of benefits, contact [855.798.2627](tel:855.798.2627).

More information is also available at [Medicare.gov/supplements-other-insurance/how-medicare-works-with-other-insurance](https://www.medicare.gov/supplements-other-insurance/how-medicare-works-with-other-insurance).

Know who pays first

If you have retiree insurance (insurance from former employment)...	Medicare pays first.
If you're 65 or older, have group health plan coverage based on your or your spouse's current employment, and the employer has 20 or more employees...	Your group health plan pays first.
If you're 65 or older, have group health plan coverage based on your or your spouse's current employment, and the employer has fewer than 20 employees...	Medicare pays first.
If you're under 65 and have a disability, have group health plan coverage based on your or a family member's current employment, and the employer has 100 or more employees.	Your group health plan pays first.
If you're under 65 and have a disability, have group health plan coverage based on your or a family member's current employment, and the employer has less than 100 employees.	Medicare pays first.
If you have group health plan coverage based on your or a family member's current employment, and you're eligible for Medicare because of End-Stage Renal Disease (ESRD) (permanent kidney failure requiring dialysis or a kidney transplant)...	Your group health plan will pay first for the first 30 months after you become eligible to join Medicare. Medicare will pay first after this 30-month period.

If you are enrolled in an LACCD Medicare advantage plan and have no other benefits, you can disregard this page.

HRA Accounts with LACCD

FSA and HRA Accounts in Retirement

While working for the District, funds have been contributed to your HRA account for you to use for qualified health expenses. Here is some information to consider:

- If the District agrees to future contributions for active employees, you will continue to receive that money no matter your age.
- If you are 65 and still working, you will continue to receive the HRA contributions while still you are on active status; however, as soon as you retire, you will no longer get any further contributions.
- After retirement, you will still have access to all the unspent funds previously deposited. The District does not have a “use it before you retire or lose it” policy for HRAs.
- The HRA is NOT portable. If you leave the District prior to retiring (quit or get fired) you will lose the funds in the account.
- If you have a Flexible Spending Account, known as an FSA, a “use it or lose it” policy does apply. You can only roll over a maximum of \$500 from year to year, but if you do not spend that money before retirement, it will be forfeited.

What are Eligible Healthcare Expenses?

Only expenses authorized under the IRS Code section 213 (d) shall be reimbursed. This list is changed from time to time, however here are some of the most common reimbursements, as well as non-eligible expenses. For a full list, go to: <https://www.asiflex.com>

Qualified Expenses:

- Deductibles
- Copayments
- Coinsurance
- Prescription drug expenses
- Dental care (for non-cosmetic purposes, including sealants)
- Vision Care
- Over-the-counter drugs

Non-Qualified Expenses:

- Cosmetic procedures, surgery, drugs or products
- Insurance policy premiums
- Teeth bleaching or whitening
- Marriage counseling
- Late payment or no show fees charged by healthcare provider

When to submit for reimbursement?

You must submit reimbursement for any claims incurred during the plan year, within 90 days of the end of the plan year. After that, claims may be denied. A Healthcare Expense is incurred at the time the healthcare service is delivered, not when you are formally billed or charged for the expense. Expenses incurred before you are a participant in the plan do not qualify.

What is required for reimbursement?

You may use your HRA debit card or submit itemized receipts directly to ASI Flex in order to pay for eligible expenses. However, even if you use your debit card for a qualified expense, you may still need to provide an itemized receipt, which breaks down every service or expense incurred. A receipt only showing the total amount charged will NOT be accepted.

For dental or vision reimbursements, you can usually expect requests for itemized receipts. These doctor's offices have a number of non-qualified procedures so they often require substantiation.

Important: ASI Flex does not issue cards in spouses or dependents' names, only in the name of the FSA/HRA participant. Spouses and dependents can sign the back of the debit card that is sent and utilize it. For spouses and dependents of deceased participants, the cards will always be issued in the actual participant's name. The surviving spouse/dependent can sign the back of the card and use it.

CalPERS Medical Resources

Find below links to various CalPERS resources:

Verify Your Plan

CalPERS is contracted to administer health benefits. Consequently, although your pension may be administered by CalSTRS, your health benefits are administered by CalPERS. We encourage all adjunct to create a CalPERS Account to review current selections, address, and dependent information. Log in or create an account at my.calpers.ca.gov



View Plans

1. To find your full plan details, click the following link: <https://www.calpers.ca.gov/page/active-members/health-benefits/plans-and-rates>
2. Scroll down to "Health Plans" table, look under the "Plan Name" column to find your plan. Then click the hyperlink found under the "Administrator" column
3. Scroll down to "Medical Plans Details" and select the "+" to the right of your plan
4. Here you will find documents outlining the various aspects of your coverage



View Rates

1. To find rate information: Click the following link: <https://www.calpers.ca.gov/page/active-members/health-benefits/plans-and-rates>
2. Click the link and scroll down to the "Rates and Employer Contributions" section.
3. Click the "+" next to the type of member you are.
4. The drop down menu includes PDFs containing rates and contributions information. Select the PDF that applies to you to view your 2025 rates and contributions.



Learn Changes

CalPERS frequently updates their plans by adding, removing, consolidating plans. In addition, the increase and contract plan service areas. You may see if there are changes to your plan by going to [calpers.ca.gov](https://www.calpers.ca.gov) > Active Members > Health Benefits > Plans & Rates or the following link: <https://www.calpers.ca.gov/page/active-members/health-benefits/plans-and-rates/annual-health-plan-changes>



Find a Health Plan by Zip Code

To find a health plan with service by zip code click on the following link: <https://www.calpers.ca.gov/page/active-members/health-benefits/plans-and-rates/zip-search>

Important Reminders

Public Service Loan Forgiveness Program

LACCD is a Public Service Loan Forgiveness (“PSLF”) eligible employer! Full-time and part-time employees are eligible to apply for the PSLF program. The Supreme Court’s recent ruling on the Biden Administration’s student loan debt cancellation does not impact PSLF.

Income-driven repayment (IDR) plans are repayment plans that base your monthly payment on your adjusted gross income and family size rather than how much you owe. Your payments through these plans can be as low as \$0 a month, and these plans can even cancel your remaining student debt in as soon as 10 years and after no more than 25 years, regardless of where you work. Remember, you must recertify your income at least once every year.

Second, any time your income declines, and any time your family size increases, you should recertify your income immediately, so you have the extra financial flexibility you need and qualify for a lower student loan payment. You don’t need to wait a whole year to recertify for a lower payment.

If you don’t recertify your income before your annual deadline, you will be charged what you would be paying in the 10-year Standard Repayment Plan. This is the least favorable repayment plan and will cost you more leaving you nothing to forgive after making 10 years of payments.

You do not need to make 120 payments or have 10 years of service to apply for PSLF.

Filing is free and easy. To learn more information about PSLF, visit the **Federal Student Aid website** to access the PSLF Help Tool. For LACCD, submit your PSLF Employment Certification Form, attention Mary VanGinkle or Brenda Morán-Mendoza via email to ESC-PSLF@laccd.edu.



Important Contact Information for Your Benefits

****PHISHING ALERT—These are the ONLY vendors the district officially contracts with. If you receive communications from any other vendor, please be cautious, as they may NOT be working with the district to offer you the best plans and prices.**

Medical Plans

CalPERS Health Benefit Program

Contact information: 888.225.7377
Monday – Friday, 8:00 am – 5:00 pm
TTY (for speech and hearing impaired): 916.795.3240
www.calpers.ca.gov

Anthem Blue Cross

- Select HMO – 855.839.4524
- Traditional HMO – 855.839.4524

Blue Shield of California (HMO)

- Blue Shield Access+ HMO – 800.334.5847
- Blue Shield Trio HMO – 800.334.5847

Health Net of California (HMO)

- Salud y Más HMO – 888.926.4921
- SmartCare HMO – 888.926.4921

Kaiser (HMO): 800.305.1220

PERS Platinum (PPO): 877.737.7776

PERS Gold (PPO): 855.995.5004

Sharp: 855.995.5004

UnitedHealthcare Alliance/Harmony: 877.359.3714

Western Health Advantage: 888.942.7377

Dental Plans

Delta Dental

Contact information: 800.765.6003
P.O. Box 997330
Sacramento, CA 95899
www.deltadentalins.com

MetLife/SafeGuard

Contact information: 800.880.1800
P.O. Box 3594
Laguna Hills, CA 92654
www.safeguard.net (plan code: SGC1028)

Employee Assistance Program (EAP)

TELUS Health

Contact information: 800.581.1485
one.telushealth.com

Vision Plan

VSP

Contact information: 800.877.7195
P.O. Box 997100
Sacramento, CA 95899-7105
www.vsp.com

FSA / HRA Accounts

ASIFlex

Website: asiflex.com
Contact information: 800.659.3035
M-F: 5:00 am – 5:00 pm, Sat: 7:00 am – 11:00 am

Other Benefits & COBRA Information

LACCD Health Benefits Unit

Contact information: HealthBenefits@email.laccd.edu
<http://www.laccd.edu/Departments/HumanResources/healthbenefits/Pages/default.aspx>

OptumRx

Basic Members: 855.505.8110
Medicare Part D Members: 855.505.8106
Members needing TTY service: please dial 711
<https://www.calpers.ca.gov/members/health-benefits/plans-and-rates/optumrx-pharmacy-benefits>

OptumRx administers the prescription drug benefits for those enrolled in PERS Select, PERS Choice, and PERSCare PPO plans, as well as those in Anthem Blue Cross, Health Net, Sharp, and UnitedHealthcare HMO plans.

Pet Discount Programs

PetAssure

Contact information: 888.789.7387
Monday-Friday: 5:00 am – 3:00 pm
www.petassure.com

PETplus

Contact information: 866.893.0306
M-F: 6am – 3pm, Sat.: 6am – 2pm, Sun: 6am – 12pm
info@petplus.com
www.petplus.com

District Contacts

JOINT LABOR/MANAGEMENT BENEFITS COMMITTEE		
<u>MEMBERS</u>	<u>ALTERNATES</u>	<u>BOARD OF TRUSTEES</u>
William Elarton-Selig Chair, JLMBC WDElarton@aft1521.ord	No Alternate	Nichelle Henderson President
James Bradley President SEIU Local 99	Kathleen J Becket SEIU Local 99	Kelsey K. Iino, Ed.D. 1st Vice President
Bruce Hicks President SEIU Local 721	Colonda Hawkins SEIU 721	Sarah Hernandez, J.D. 2nd Vice President
Luis Dorado President Los Angeles Harbor College, Admin Rep	Dr. Teyanna Williams Vice Chancellor of HR	Gabriel Buelna, Esq.
James McKeever President Los Angeles College Faculty Guild AFT, Local 1521	Dr. Jessica Saint-Paul Los Angeles College Faculty Guild, Local AFT 1521	David Vela
Dr. Deborah Harrington President Teamsters Local 911	Dr. Celena Burkhardt Teamsters Local 911	Steven F. Veres
Andrea Edwards President AFT Local 1521A	Priscilla Lopez Teamsters Local 911	Amber Baham Student Trustee
Chad Boggio LA/OC Building & Construction Trades Council	Melinda Ung AFT Local 1521A	DISTRICT ADMINISTRATION
	Vacant	Alberto Roman, DPA Interim Chancellor
		Kathleen Burke, Ed.D. Interim Deputy Chancellor
		Nicole Albo-Lopez, Ed.D. Vice Chancellor of Educational Programs and Institutional Effectiveness
		Teyanna Williams, J.D. Vice Chancellor for Human Resources
		Carmen V. Lidz, MS Vice Chancellor / Chief Information Officer
		Jeanette L. Gordon Vice Chancellor / Chief Financial Officer
		Jeffrey Prieto, J.D. General Counsel
		Leigh Sata Interim Vice Chancellor / Chief Facilities Executive
		Jim Lancaster, Ed.D. Vice Chancellor, Workforce Development
RESOURCES TO THE JLMBC		
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Laurie Green Retiree glsgreen1@aol.com		Fay Dea, Retiree, AFT 1521 deafs57@gmail.com

This benefits guide prepared by



Gallagher

Insurance | Risk Management | Consulting

This document is an outline of the coverage provided under your employer's benefit plans based on information provided by your company. It does not include all the terms, coverage, exclusions, limitations, and conditions contained in the official Plan Document, applicable insurance policies and contracts (collectively, the "plan documents"). The plan documents themselves must be read for those details. The intent of this document is to provide you with general information about your employer's benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. To the extent that any of the information contained in this document is inconsistent with the plan documents, the provisions set forth in the plan documents will govern in all cases. If you wish to review the plan documents or you have questions regarding specific issues or plan provisions, you should contact your Human Resources/Benefits Department.