



LOS ANGELES UNIFIED SCHOOL DISTRICT
Division of Risk Management and Insurance Services
Benefits Administration

RETIREE HEALTH BENEFITS

PLANNING TO RETIRE?

If you are planning to retire, it is important to plan ahead. You must contact CalSTRS or CalPERS and Benefits Administration at least **three (3) months before your retirement date**.

HOW DO I OBTAIN MY RETIREMENT BENEFITS?

In order to receive retiree health benefits you must take the following steps:

1. Apply for retirement through your retirement system, CalPERS or CalSTRS.
2. Complete the *Application for Continuation of Health Benefits (HI-22)* and return it to: Benefits Administration, P.O. Box 513307, Los Angeles, CA 90051-1307.
3. Send a copy of your "Notice of Benefit Approval" (CalPERS) or "Award Letter" (CalSTRS) to Benefits Administration to verify the effective date of your retirement (this notice will be mailed to you by CalPERS or CalSTRS).
4. Submit a resignation form to Certificated HR (for Certificated employees) or Personnel Commission (for Classified employees) with your retirement effective date. Retirement/resignation date from the District must be the same date as retirement date from CalPERS or CalSTRS.

The Application for Continuation of Health Benefits (HI-22) form can be obtained from the Benefits Administration website at <http://benefits.lausd.net>.

Inquiries regarding eligibility for retiree health benefits should be sent in writing with the employee's name, employee number and anticipated retirement date to:
Benefits Administration, P.O. Box 513307, Los Angeles, CA 90051-1307

WHO IS ELIGIBLE?

To receive coverage as a retired employee you must meet the following requirements:

1. On your retirement date, you must be enrolled in District-paid health benefits and be in paid status. If you are not currently enrolled contact Benefits Administration regarding enrollment procedures prior to your retirement date.
2. You must retire from District service in accordance with the rules of your retirement system (this includes disability allowance under CalSTRS or CalPERS).
3. You must retire and receive a monthly payment from your retirement system, CalPERS or CalSTRS.
4. **For employees hired prior to March 11, 1984**, five (5) consecutive years of qualifying service immediately prior to retirement shall be required in order to qualify for retiree health benefits for the life of the retiree.

For employees hired on or after March 11, 1984, but prior to July 1, 1987, ten (10) consecutive years of qualifying service immediately prior to retirement shall be required in order to qualify for retiree health benefits for the life of the retiree.

For employees hired on or after July 1, 1987, but prior to June 1, 1992, fifteen (15) consecutive years of qualifying service immediately prior to retirement shall be required, or ten (10) consecutive years immediately prior to retirement plus an additional ten (10) years which are not consecutive.

For employees hired on or after June 1, 1992, but prior to March 1, 2007, years of qualifying service and age must total at least eighty (80) in order to qualify for retiree health benefits. For employees who have a break in service, this must include at least ten (10) consecutive years immediately prior to retirement.

Any employee hired on or after March 1, 2007, but prior to April 1, 2009, shall be required to have a minimum of fifteen (15) consecutive years of service with the District immediately prior to retirement, in concert with the “Rule of 80” eligibility requirement to receive employee and dependents’ health and welfare benefits (medical, dental and vision) upon retirement as provided for in this agreement.

For employees hired on or after April 1, 2009, years of qualifying service and age must total at least eighty-five (85) in order to qualify for retiree health benefits. This must include a minimum of twenty-five (25) consecutive years of service with the District immediately prior to retirement.

For School Police (sworn personnel), if you were hired on or after April 1, 2009, to qualify for District-paid benefits at retirement, the employee’s age plus the number of consecutive qualifying years of service, when added together, must equal 80 and you must have twenty (20) consecutive years of qualifying service* immediately prior to retirement.

**Qualifying years of service consist of fiscal years in which you were in “paid status” for at least 100 full days and eligible for district-paid health benefits coverage.*

If you meet the requirements, you are eligible for District-paid benefits for you and your eligible dependents. If you take a deferred retirement (that is, leave funds on deposit with the retirement system for withdrawal at a later date) or a lump sum distribution **you are not eligible for District-paid retiree health benefits.** If you stop your monthly payments you will lose your District-paid benefits.

WHAT ARE MY RETIREMENT BENEFITS?

The medical, dental and vision plans are similar to those received by active employees, with the exception that Medicare enrollment is required when eligible, usually upon reaching age 65. (See Medicare section below for important information).

WHAT HAPPENS TO MY ACTIVE BENEFITS?

Your active health benefits will terminate on the last day of the month in which you retire. The District is required to mail a COBRA packet to you and your dependents. You do not need to take any action if you are eligible and enrolled in District-paid retiree health benefits.

MEDICARE

If you or your spouse/domestic partner are 65 or older at the time of retirement, you must contact the Social Security Administration to enroll in Medicare Parts A and B. Medicare is the national health insurance program for individuals age 65 or older. Once you and/or your dependent reach age 65, Medicare becomes the primary provider and the District becomes your secondary provider. You and/or your dependent must enroll and maintain enrollment in Medicare Parts A and B in order to retain your District-paid medical benefits. (Please note that all Medicare-eligible individuals who retire and want to enroll or remain enrolled in Secure Horizons, Health Net Seniority Plus or Kaiser Senior Advantage are required to complete a Medicare Advantage application. Please contact the plans for the application.)

If you do not enroll in Medicare prior to the first of the month in which you turn 65, you will lose your District-paid medical benefits. Once you enroll in Medicare Parts A and B, these benefits will be restored. To enroll in Medicare and maintain your District-paid medical benefits, contact the nearest Social Security office ***three months before you or your eligible dependent reach age 65.*** Once you have enrolled, send a photocopy of your Medicare card, along with your name and Social Security number, to the District’s Benefits Administration.

Medicare requirement (effective January 1, 2010):

- If you and/or your dependent reach/are age 65 or older you must enroll and remain enrolled in Medicare Part B.
- If you and/or your dependent are eligible for Medicare Part A premium-free from the Centers of Medicare and Medicaid Services (CMS), you must enroll and remain enrolled in Medicare A.
- If you are not eligible for Medicare Part A premium-free and you are a member of CalSTRS, you may be eligible for premium reimbursements by CalSTRS, for more information you can contact CalSTRS.
- If you are not eligible for Medicare Part A premium-free from CMS or premium reimbursement from CalSTRS, you must verify ineligibility by providing LAUSD Benefits Administration with confirmation letters from CMS and CalSTRS.

If you do not enroll and remain enrolled in Medicare Parts A & B you will lose your health benefits until proof of enrollment is submitted.

In addition, you might have a premium for Medicare Part D if your income is above \$85,000 as a single person or \$170,000 for a couple. Contact the Social Security Administration for more information.

MEDICARE PART D

To keep your current medical benefits, do not join a Medicare Prescription Drug Plan (PDP) outside of your current prescription drug plan. Joining a Medicare PDP outside of your current prescription drug plan will automatically cancel your LAUSD prescription drug plan, **and** medical plan. Joining a Medicare PDP will not affect your dental and vision plans.

WILL MY DEPENDENT CHILDREN STILL BE COVERED?

<i>Benefits Eligibility For Dependent Children</i>			
Dependent child	Medical	Dental	Vision
Up to age 26 without student verification	Yes	No	No
Up to age 25 with student verification	Yes	Yes	Yes
Up to age 19	Yes	Yes	Yes

Note: If you are enrolled in Kaiser Senior Advantage or Health Net Seniority Plus plans, your child dependent is not eligible to enroll under your plan without student verification. Dependent children are not eligible to enroll into the Secure Horizons plan.

CONTINUED COVERAGE UNDER COBRA

If you do not meet the requirements for District-paid retiree health benefits, you may be eligible to continue coverage at your own expense through COBRA/AB528. The District will notify the COBRA/AB528 administrator, FBMC, and an enrollment packet will be mailed to you.

MAY I CHANGE PLANS?

You may change plans at the time of retirement. New plans will be effective the first of the following month after your retirement date. After your retirement, you may only change your plans during the Annual Benefits Open Enrollment period which is usually held in November. Elections are effective January 1st of the following year. In addition, plan changes may be approved if there is a major life event or if you move out of the providers’ service area.

WHAT HAPPENS IF I MOVE OUT OF CALIFORNIA?

If you move out of California, you must contact Benefits Administration for benefit plan availability in your new area.

ARE THERE ANY SURVIVOR BENEFITS?

In the event of a retiree’s death, the District will not pay for the health plan coverage of a surviving spouse or

other dependents. Surviving spouses may continue coverage at their own expense under the District's AB528 Continuation Plan, and may also be eligible for COBRA coverage for a limited time. Other dependents, however, are eligible for COBRA only. Your surviving spouse or dependent(s) must notify the District of your death within 60 days. The District will notify the COBRA/AB528 administrator, FBMC, to mail an enrollment packet to your surviving spouse/dependent(s). Failure to notify the District of a retiree's death may cause the surviving spouse and dependent(s) to forfeit their COBRA/AB528 rights.

WHAT ABOUT THE LIFE INSURANCE PROGRAM?

Conversion plans are available for both the basic (District-paid) and optional (employee-paid) life insurance plans at your expense. If you are enrolled in optional life insurance when you retire, you will be eligible to enroll in a special "decreasing term" policy. Your coverage will equal 50% of the amount of your active employee coverage. This amount decreases each year by 10% of your original coverage amount and the minimum coverage amount will never be less than \$5,000. If you would like to continue or cancel this coverage or need more information, contact MetLife at (866) 492-6983.

WHAT ABOUT THE FLEXIBLE SPENDING ACCOUNT?

Flexible Spending Accounts cease to receive funding upon retirement. A member can receive reimbursements after he/she retires however, the claim service date must be within the time the member was active. A member cannot receive reimbursement for services rendered after he/she retires. Funds not used are forfeited at the end of the plan year.

WHO CAN ANSWER MY QUESTIONS?

If you have questions regarding your health insurance coverage, would like to add or remove dependents, update your address or obtain benefit information, contact Benefits Administration at (213) 241-4262, or write to Benefits Administration P.O. Box 513307, Los Angeles, CA 90051-1307. For additional information regarding your benefits, call your plan.

MEDICAL PLANS

Anthem Blue Cross (800) 700-3739
 CVS Caremark
 (Prescription Drug Services) (888) 752-7229
 Kaiser Permanente and
 Kaiser Senior Advantage (800) 464-4000
 Health Net HMO (800) 654-9821
 Health Net Seniority Plus (800) 275-4737

DENTAL PLANS

MetLife PDP (PPO) (866) 576-9121
 MetLife DHMO (866) 576-9121
 Western Dental (866) 901-4416
 (Centers Only and Plan Plus)

Secure Horizons (888) 867-5548
 by UnitedHealthcare

VISION PLANS

EyeMed (866) 723-0514
 VSP (800) 877-7195

LIFE INSURANCE

MetLife Insurance Company (866) 492-6983

COBRA/AB528 ADMINISTRATOR

FBMC (800) 342-8017

ADDITIONAL RESOURCES

Social Security Administration (800) 772-1213
 Medicare Service Center (800) 633-4227

ADDRESS CHANGES

You must notify Benefits Administration of any change to your permanent address or you may not receive important benefits information. Failure to receive and to respond to Benefits Administration could result in the disruption of your District-paid retiree health benefits. Therefore, it is important to update your address.