

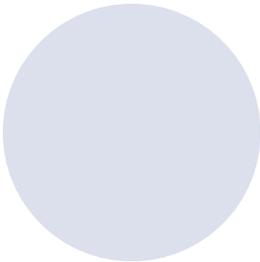
Full-Time Employees

# Benefits

Guide 2021



Cosumnes Community  
Services District



Welcome to your Cosumnes Community Services District Employee Benefits Guide. The purpose of the Benefits Guide is to provide you with a comprehensive resource to help you make the most of employee benefits offered by the District.

The District is pleased to provide a wide range of competitive benefits as a vital part of your total compensation. We strive to offer a benefits package that will provide you peace of mind regarding your health and that of your family. We are convinced these options allow you the most flexibility, without compromising value.

Please review this guide carefully to make sure you understand the benefits available to you and your family. If you have any questions, please contact Human Resources.

At the Cosumnes Community Services District, we know that employees are our most valuable asset. The District is committed to providing competitive employee benefits and coverage to meet your diverse needs. We know employee benefits are an important aspect in your decision in choosing where to work.

Thank you for your service to the District, our communities, and for all you do to make this a wonderful place to work.

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# WELCOME TO THE EMPLOYEE BENEFITS GUIDE - FULL TIME EMPLOYEES

At **Cosumnes Community Services District**, we value our talented, committed employees for helping us carry out our mission. We offer a comprehensive benefits package that provides employees with financial support and encourages wellness. This guide provides a summary of your benefit options and is designed to help you make choices and enroll for coverage. If you would like more information about any of the benefits described here, please contact Human Resources.

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## Online Benefit Resources

Take advantage of the online resources available through our insurance carriers. You can locate network providers, manage your claims, obtain health and wellness information, and much more.

Insurance carrier website addresses are located on page 26 of this guide.



# ENROLLMENT INFORMATION

## Who May Enroll

**Regular Employees:** Active, full-time employees working at least 40 hours per week and their eligible dependents and part-time employees working at least 20 hours and their dependents may participate in Cosumnes CSD benefits program.

Your eligible dependents include:

- Legally married spouse
- Domestic Partner (income taxes may apply, see Human Resources for details)
- Children under age 26 regardless of student or marital status or employment. Children includes biological children, stepchildren, children covered under a child support order, your adopted children, children placed with you for adoption and your domestic partner's children.
- Disabled unmarried children who have reached the maximum age and who are (or become) physically or mentally incapable of self-support and rely on you for support and maintenance (medical certification required).

## When You Can Enroll

Eligible employees may enroll at the following times:

- As a new hire, working at least 40 hours per week, your coverage begins on the first day of the month following date of employment.
- Each year, during open enrollment.
- Within 30 days of a qualifying event as defined by the IRS (see Changes To Enrollment on the next page).

## Waiving Medical Coverage

Full-Time employees choosing to waive enrollment in the Cosumnes CSD medical plans must be enrolled in another group medical plan in order to qualify for Cash in Lieu.



# ENROLLMENT INFORMATION

## Changes To Enrollment

Our benefit plans are effective January 1 through December 31 of each year. There is an annual open enrollment period each year, during which you can make new benefit elections for the following January 1 effective date. Once you make your benefit elections, you cannot change them during the year unless you experience a qualifying event as defined by the IRS. Please note you will need to provide documentation to Human Resources on your qualifying event. Examples of qualifying events include, but are not limited to the following:

- Marriage, divorce, legal separation or annulment
- Birth or adoption of a child
- A qualified medical child support order
- Death of a spouse or child
- A change in your dependent's eligibility status
- Loss of coverage from another group health plan
- Change in your residence or workplace (if your benefit options change)
- Loss of coverage through Medicaid or Children's Health Insurance Program (CHIP)
- Becoming eligible for a state's premium assistance program under Medicaid or CHIP



### Important Note:

Coverage for a new dependent is not automatic. If you experience a qualifying event, you have 30 days to update your coverage. Please contact Human Resources **immediately** to complete the appropriate elections as needed. If you do not update your coverage within 30 days from the qualifying event, you must wait until the next annual open enrollment period to update your coverage.

## Important Tax Information About Domestic Partners: Imputed Income

If an employee is covering a Domestic Partner or a Domestic Partner's children under any of the plans (medical, dental or vision), the IRS does not allow the premiums paid by the employee or by the employer to be free of income taxes.

IRS regulations require Cosumnes CSD to deduct any employee contributions associated with a Domestic Partner or their children on a Post-Tax basis. In addition, the IRS requires Cosumnes CSD to impute the premiums paid on behalf of the employee as income, resulting in taxation of Cosumnes CSD's contribution to a Domestic Partner and their children.

## When Coverage Ends

If your employment with Cosumnes CSD ends, your coverage for medical will end on the last day of the second month following termination. Dental and vision will end on the last day of the month in which you terminate. Coverage for Life Insurance, Disability Insurance and FSA Benefits will terminate on the last day of employment. Depending on the circumstances of your termination, you may be able to continue coverage under COBRA for health insurance or convert/port your coverage for life insurance.

# MEDICAL BENEFITS

## Medical Plan Options

Cosumnes CSD provides regular, full time and part time (50% with at least 20 hours) employees access to CalPERS with fourteen medical plans to choose from. See the following pages for highlights for each plan. Rates associated with each plan can be found when enrolling with Human Resources. Employees are eligible to enroll on the first of the month following their date of employment. Employees have 30 days from their date of hire in which to enroll. Cosumnes CSD contribution toward benefits is based on hours compensated the last two pay periods prior to the month premiums are collected.

## About HMO Plans

With the HMO plans, Blue Shield Access+, Blue Shield Trio, Health net SmartCare, Kaiser, United Healthcare and Western Health Advantage, you must select a Primary Care Physician (PCP). The PCP coordinates and manages your health care services by providing your routine care and refers you to specialists when necessary. You may choose a different PCP and Medical Group for each family member.

## About PPO Plans

Preferred Provider Organization (PPO) plans utilize a PPO network. A PPO plan provides for both in-network and out-of-network benefits. Employees and their dependents can choose, at time of care, whether to use in-network or out-of-network providers.

### The Benefits of Using In-Network Providers for the PPO Plans

There are significant advantages to using in-network providers for your medical care, such as negotiated rates (up to 30% – 40% discounts), no balance billing, self-referrals to in-network specialists and no claim forms required.

#### How to Locate In-Network Providers

CalPERS Plans: To locate Anthem Blue Cross providers, visit [www.anthem.com/ca/calpers](http://www.anthem.com/ca/calpers). For Blue Shield providers, visit [www.blueshieldca.com/calpers](http://www.blueshieldca.com/calpers).



### Benefit Videos – Medical Plan Terms

Medical plan terms, such as deductibles, copays, coinsurance and out-of-pocket maximums, can sometimes be confusing. For a quick video that shows how these work, visit <http://video.burnhambenefits.com/terms>.

# MEDICAL BENEFITS

## BENEFIT TERMS

### Deductible

The set dollar amount a member must pay before insurance coverage for medical or dental expenses can begin. Usually, services that are subject to a copayment are not subject to the deductible.

### Copayment (Copay)

The flat fee paid by the member when a medical or dental service is received. This is usually associated with doctor's office visits, prescription drugs or certain dental services under the HMO or PPO program.

### Coinsurance

The percentage of the charges the member is required to pay for a medical or dental service in a plan. For example, on the PERSCare PPO Plan, Anthem will pay 90% of the covered claim and the member will pay 10% of the remaining amount after the deductible has been met.

### Out-of-Pocket Maximum

The maximum amount the member will have to pay in a calendar year for eligible expenses in the medical plan. After reaching the Out-of-Pocket Maximum, the plan pays 100% of the allowable charges for covered services for the remainder of the calendar year.

### Network Provider

A network provider is a hospital, doctor, medical group, dentist or other healthcare provider contracted to provide services to members at a contracted or discounted rate. Network providers are not allowed to "balance bill" members.

### Reasonable Charges

Medical and Dental insurance companies determine if charges for a particular service are "reasonable" based on how much the average provider for a particular geographic area charges for a service.

### Balance Bill

Out-of-Network (Non-Contracted) Providers can charge any amount they wish for a service. However, if that amount is higher than what the insurance company says is reasonable, the member may be responsible to pay the difference. Before seeking care with an Out-of-Network Provider, find out what their charges are and confirm the insurance company considers them "reasonable."

### Calendar Year Maximum

Under the Dental Plan, the Calendar Year Maximum is the total amount the insurance company will pay in a calendar year for services. Once a member has reached their Calendar Year Maximum, no further benefits will be paid until the next Calendar Year.

# MEDICAL BENEFITS—CALPERS

## HMO MEDICAL BENEFIT SUMMARIES

	Anthem Select HMO (Anthem Select HMO Network) & Anthem Traditional HMO (Anthem California Care HMO Network)	Blue Shield Access+ HMO (Blue Shield Access+ Network) & Blue Shield HMO Trio (Blue Shield TRIO Network)
	Care must be accessed through the applicable Anthem network	Care must be accessed through the applicable Blue Shield network
<b>Health Benefits</b>		
<b>Deductible (Annual)</b>		
– Single	None	None
– Family	None	None
<b>Out-of-Pocket Maximum</b>		
– Medical	Individual: \$1,500; Family \$3,000	Individual: \$1,500; Family \$3,000
– Pharmacy	Individual: \$7,050; Family \$14,100	Individual: \$7,050; Family \$14,100
<b>Lifetime Maximum Benefit</b>	Unlimited	Unlimited
<b>Office Visit Copay</b>		
– Primary Care Physician (PCP)	\$15	\$15
– Specialist Office Visit	\$15	\$15 (PCP Referred) \$30 (Access+ Specialist)
<b>Telemedicine Visits</b>	<a href="http://www.livehealthonline.com">www.livehealthonline.com</a>	<a href="http://www.teladoc.com/bsc">www.teladoc.com/bsc</a>
<b>Preventive Care</b>	No charge	No charge
<b>Urgent Care</b> (when more than 15-miles or 30-minutes from your PCP)	\$15	\$15
<b>Hospital</b>		
– Inpatient	No charge	No charge
– Outpatient Surgery	No charge	No charge
<b>Diagnostic Lab and X-Ray</b>	No charge	No charge
<b>Chiropractic &amp; Acupuncture</b> 20 visits/Calendar Year Combined	\$15	\$15
<b>Emergency</b>	\$50	\$50
<b>Pharmacy Benefits</b>		
<b>Retail Pharmacy*</b>		
– Generic	\$5	\$5
– Brand - Formulary	\$20	\$20
– Brand Non-Formulary	\$50	\$50
– Supply Limit	30 day supply	30 day supply
<b>Mail Order Pharmacy*</b>		
– Generic	\$10	\$10
– Brand - Formulary	\$40	\$40
– Brand Non-Formulary	\$100	\$100
– Supply Limit	90 day supply	90 day supply

\* Specialty Medication Pharmacy/Specialty Drugs may be subject to a coinsurance percentage and contain certain limitations.

# MEDICAL BENEFITS—CALPERS

## HMO MEDICAL BENEFIT SUMMARIES

	United Healthcare HMO	Kaiser HMO	Western Health Advantage HMO
	United Healthcare Signature Value Network	Kaiser Network	Western Health Advantage Network
<b>Health Benefits</b>			
<b>Deductible (Annual)</b>			
– Single	None	None	None
– Family	None	None	None
<b>Out-of-Pocket Maximum</b>			
– Medical	Individual: \$1,500; Family \$3,000	Individual: \$1,500; Family \$3,000	Individual: \$1,500; Family \$3,000
– Pharmacy	Individual: \$7,050; Family \$14,100	Individual: \$7,050; Family \$14,100	Individual: \$7,050; Family \$14,100
<b>Lifetime Maximum Benefit</b>	Unlimited	Unlimited	Unlimited
<b>Office Visit Copay</b>			
– Primary Care Physician	\$15	\$15	\$15
– Specialist Office Visit	\$15	\$15	\$15
<b>Telemedicine Visits</b>	uhc.com/virtual visits	www.kp.org	See medical group for details
<b>Preventive Care</b>	No charge	No charge	No charge
<b>Urgent Care</b>	\$15	\$15	\$15
<b>Hospital</b>			
– Inpatient	No charge	No charge	No charge
– Outpatient Surgery	No charge	\$15	No charge
<b>Diagnostic Lab and X-Ray</b>	No charge	No charge	No charge
<b>Chiropractic &amp; Acupuncture</b> 20 visits/Calendar Year Combined	\$15	\$15	\$15
<b>Emergency</b>	\$50	\$50	\$50
<b>Pharmacy Benefits</b>			
<b>Retail Pharmacy*</b>			
– Generic	\$5 (\$10 after 2nd fill)	\$5	\$5
– Brand - Formulary	\$20 (\$40 after 2nd fill)	\$20	\$20
– Brand Non-Formulary	\$50 (\$100 after 2nd fill)	\$20	\$50
– Supply Limit	30 day supply	30 day supply	30 day supply
<b>Mail Order Pharmacy*</b>			
– Generic	\$10	\$10	\$10
– Brand - Formulary	\$40	\$40	\$40
– Brand Non-Formulary	\$100	\$40	\$100
– Supply Limit	90 day supply	90 day supply	90-100 day supply

\* Specialty Medication Pharmacy/Specialty Drugs may be subject to a coinsurance percentage and contain certain limitations.

# MEDICAL BENEFITS—CALPERS

## PPO MEDICAL BENEFIT SUMMARIES

	<b>PERSCare Basic PPO</b> Utilizes the Full Anthem Prudent Buyer PPO Network	
	In-Network	Out-of-Network
<b>Health Benefits</b>	Reviewed	
<b>Deductible (Annual)</b>		
– Individual		\$500
– Family		\$1,000
<b>Out-of-Pocket Maximum</b>		
– Coinsurance	Individual: \$2,000; Family \$4,000	Unlimited
– Medical (copays, coinsurance, deductible)	Individual: \$6,550; Family \$13,100	Unlimited
– Pharmacy	Individual: \$2,000; Family \$4,000	Unlimited
<b>Lifetime Maximum Benefit</b>	Unlimited	
<b>Office Visit Copay</b>		
– Primary Care Physician	\$20	40% after deductible
– Specialist Office Visit	\$35	40% after deductible
<b>Telemedicine/Virtual Visits</b>	<a href="http://www.livehealthonline.com">www.livehealthonline.com</a>	Not covered
<b>Preventive Care</b>	No charge	40% after deductible
<b>Urgent Care</b>	\$35	40% after deductible
<b>Hospital</b>		
– Inpatient	10% after deductible and additional \$250 per admission deductible	40% after deductible and additional \$250 per admission deductible
– Outpatient Surgery	10% after deductible	40% after deductible
<b>Lab and X-Ray</b> (except preventive)	10% after deductible	40% after deductible
<b>Chiropractic/Acupuncture</b> 20 visits/Calendar Year Combined	\$15	40% after deductible
<b>Emergency</b>	\$50 for ER Charges + 10% after deductible for physician, x-ray, lab	
<b>Pharmacy Benefits</b>		
<b>Retail Pharmacy</b>		
– Generic	\$5	Not covered
– Preferred	\$20	
– Non-Preferred	\$50	
– Supply Limit	30 day supply	
<b>Mail Order Pharmacy</b>		
– Generic	\$10	Not covered
– Preferred	\$40	
– Non-Preferred	\$100	
– Supply Limit	90 day supply	

# MEDICAL BENEFITS—CALPERS

## PPO MEDICAL BENEFIT SUMMARIES

	PERS Choice Basic PPO Utilizes the Full Anthem Prudent Buyer PPO Network	
	In-Network	Out-of-Network
<b>Health Benefits</b>	Reviewed	
<b>Deductible (Annual)</b> – Individual – Family		\$500 \$1,000
<b>Out-of-Pocket Maximum</b> – Coinsurance – Medical (copays, coinsurance, deductible) – Pharmacy	Individual: \$2,000; Family \$4,000 Individual: \$6,550; Family \$13,100 Individual: \$2,000; Family \$4,000	Unlimited Unlimited Unlimited
<b>Lifetime Maximum Benefit</b>	Unlimited	Unlimited
<b>Office Visit Copay</b> – Primary Care Physician – Specialist Office Visit	\$20 \$35	40% after deductible 40% after deductible
<b>Telemedicine/Virtual Visits</b>	<a href="http://www.livehealthonline.com">www.livehealthonline.com</a>	Not covered
<b>Preventive Care</b>	No charge	40% after deductible
<b>Urgent Care</b>	\$35	40% after deductible
<b>Hospital</b> – Inpatient – Outpatient Surgery	20% after deductible 20% after deductible	40% after deductible 40% after deductible
<b>Lab and X-Ray</b> (except preventive)	20% after deductible	40% after deductible
<b>Chiropractic/Acupuncture</b> 20 visits/Calendar Year Combined	\$15	40% after deductible
<b>Emergency</b>	\$50 for ER Charges + 20% after deductible for physician, x-ray, lab	
<b>Pharmacy Benefits</b>		
<b>Retail Pharmacy</b> – Generic – Preferred – Non-Preferred – Supply Limit	\$5 \$20 \$50 30 day supply	Not covered
<b>Mail Order Pharmacy</b> – Generic – Preferred – Non-Preferred – Supply Limit	\$10 \$40 \$100 90 day supply	Not covered

# MEDICAL BENEFITS—CALPERS

## PPO MEDICAL BENEFIT SUMMARIES

	PERS Select PPO Utilizes the Limited Anthem Select PPO Network	
	In-Network	Out-of-Network
<b>Health Benefits</b>	Reviewed	
<b>Deductible (Annual)</b>	Adult: Individual: \$1,000; Family: \$2,000; Children:\$500 (see page 13 for ways to reduce your deductible)	
<b>Out-of-Pocket Maximum</b> – Coinsurance – Medical (copays, coinsurance, deductible) – Pharmacy	Individual: \$2,000; Family \$4,000 Individual: \$6,550; Family \$13,100 Individual: \$2,000; Family \$4,000	Unlimited Unlimited Unlimited
<b>Lifetime Maximum Benefit</b>	Unlimited	Unlimited
<b>Office Visit Copay</b> – Personal Doctor Visit – Non-Personal Doctor and Specialist	\$10 \$35	40% after deductible 40% after deductible
<b>Telemedicine/Virtual Visits</b>	<a href="http://www.livehealthonline.com">www.livehealthonline.com</a>	Not covered
<b>Preventive Care</b>	No charge	40% after deductible
<b>Urgent Care</b>	\$35	40% after deductible
<b>Hospital</b> – Inpatient – Outpatient Surgery	20% after deductible 20% after deductible	40% after deductible 40% after deductible
<b>Lab and X-Ray</b> except preventive	20% after deductible	40% after deductible
<b>Chiropractic/Acupuncture</b> 20 visits/Calendar Year Combined	\$15	40% after deductible
<b>Emergency</b>	\$50 for ER Charges + 20% after deductible for physician, x-ray, lab	
<b>Pharmacy Benefits</b>		
<b>Retail Pharmacy</b> – Generic – Preferred – Non-Preferred – Supply Limit	\$5 \$20 \$50 30 day supply	Not covered
<b>Mail Order Pharmacy</b> – Generic – Preferred – Non-Preferred – Supply Limit	\$10 \$40 \$100 90 day supply	Not covered

## MEDICAL BENEFITS—CALPERS

### WAYS TO LOWER YOUR CALPERS SELECT DEDUCTIBLE

With the CalPERS Select PPO plan, members have the ability to "earn back" up to \$500 per adult covered on the plan through Deductible Credits. You may lower your deductible by up to \$500 by completing the following:

#### Flu Shot

To receive a \$100 credit to your deductible, simply get your annual flu shot at your doctor's office or a participating pharmacy. Certain verification/documentation will be required.

#### Smoking

If you are a non-smoker, this is an easy \$100 in your pocket. Members will be given access to a Health Risk Assessment through Anthem's mobile app. During the Health Risk Assessment, you will be asked if you currently smoke. By checking "no", you automatically knock \$100 off your deductible. If you are a smoker and have a desire to quit and earn a \$100 credit toward your deductible, you can do that by enrolling (and completing) in a smoking cessation program through Anthem.

#### Biometric Screening

Another \$100 deductible credit can be earned by obtaining your biometric results. This can be done at your primary care physician's office during your annual routine physical or at one of 2,200 Quest Diagnostic facilities across the U.S. If you live too far away from a Quest facility, you may qualify for an "at home" test kit.

#### Virtual Second Opinion

Members will be required to obtain a second opinion through Anthem's virtual second opinion program or a Select plan doctor for non-urgent or non-emergency surgeries. If you fail to obtain this second opinion, you will be required to meet the extra \$100 in your deductible.

Not having surgery? Don't worry, Anthem won't charge you the extra \$100 deductible for other services received during the year.

#### Condition Care Certification

Take part in the Condition Care Program if you have Asthma, Diabetes, Chronic Obstructive Pulmonary Disease (COPD), Heart Failure or Coronary Artery or Vascular Disease. If you are diagnosed with any of these conditions throughout the year, Anthem will reach out to you to participate in their Condition Care program. If you choose not to enroll in the Anthem program, your annual deductible will increase by \$100.

2020 Deductible Credits	
Annual Flu Shot at an in-network pharmacy or your doctor's office	\$100
Non-smoking certification or commitment to a quit smoking program	\$100
Bio-metric screening during your annual physical or at a Quest facility	\$100
Virtual Second Opinion	\$100
Condition Care Certification: Asthma, COPD, Diabetes, Heart Failure, Coronary Artery or Vascular disease	\$100

#### Opportunity to Lower Office Visit Copay

With the CalPERS Select Basic PPO plan, when you visit an in-network doctor, your copay is \$35. However, when you select an in-network Personal Doctor, your doctor's office visit copay is just \$10 when visiting that physician, a \$25 savings per doctor's visit.

# MEDICAL BENEFITS

## TIPS ON HEALTH BENEFITS

### Tips on Getting the Most from Your Health Benefits

#### 1 Ask Questions

If you are having a procedure or planning an upcoming procedure, make sure you know how the procedure will be covered and what your out-of-pocket cost will be, if any.

#### 2 Utilize your Free Preventive Care Benefits to Stay Healthy.

Preventive care benefits are covered at no charge to you (in-network only). Regular preventive care can reduce the risk of disease, detect health problems early, protect you from higher costs down the road, and most importantly... potentially save your life! Take advantage of these no cost benefits now to hopefully avoid major illnesses and costs in the future.

#### 3 Get the Right Health Care and Save Money

Choosing the right care for your medical situation will help save you money out-of-pocket:

- **Doctor's Office Visit:** This is the best choice for non-urgent medical issues.
- **Urgent Care:** This is the best choice for non-life threatening medical issues that require immediate care when you can't get an appointment for a Doctor's Office Visit.
- **Emergency Room:** You should use the Emergency Room for life threatening emergencies, or for other issues that require immediate medical care outside Urgent Care hours.

#### 4 Use Generic Drugs When Available

The best way to save on prescriptions is to use generic medications as opposed to brand name drugs. When you use generic medications, you will pay the lowest copay.

Generic drugs must use the same active ingredients as the brand name version of the drug. A generic drug must also meet the same quality and safety standards.

#### 5 Use the Mail-Order Prescription Drug Benefit for Maintenance Medications

If you take medications on a long term basis, the mail order prescription drug benefit can save you money.



# DENTAL BENEFITS

## Delta Dental PPO Plans through Dublin Insurance

Cosumnes CSD offers you three dental options through the Delta Dental PPO Dental Plan, with the Base Plan paid 100% by Cosumnes CSD. When you obtain services from participating PPO dentists, your out-of-pocket costs are lower. PPO dentists agree to discount their charges and benefit payments are based on the discounted fees. When you obtain services from dentists who do not participate in the PPO network, eligible expenses are paid based on Usual Reasonable and Customary (UCR) fees, and your annual maximum is reduced, which can be significant. Since the expenses are not discounted, your out-of-pocket expenses may be greater.

You can locate Delta Dental providers at [www.deltadentalins.com](http://www.deltadentalins.com) or by calling 800-765-6003.

Dental Benefits	Delta Dental PPO Base Plan (4215-0022)		
	In-Network Only	Out-of-Network	
	PPO Dentist	DeltaPremier Dentist	Non-Delta Dentist
<b>Calendar Year Maximum</b>	\$1,500	\$1,500	\$1,500
<b>Annual Deductible</b> – Per Member	\$25	\$25	\$25
<b>Preventive</b> Exams, Cleanings (2x per year), X-Rays	No charge	No charge	You pay costs above 100% of R&C fees
<b>Basic Services</b> Space Maintainers, Restorations, Oral Surgery, Sealants, Repairs	10%	20%	20% + any costs above R&C fees
<b>Major Services</b> Inlays, Crowns, Dentures, Endodontics, Periodontics	50%	50%	50% + any costs above R&C fees
<b>Orthodontia</b> – Covered Members – Coinsurance	Adult & Child 50%	Adult & Child 50%	Adult & Child 50% + any costs above R&C fees
– Lifetime Maximum	\$2,000 Lifetime Maximum	\$2,000 Lifetime Maximum	\$2,000 Lifetime Maximum

Important Note: We strongly recommend you ask your dentist for a predetermination if total charges are expected to exceed \$300. Predetermination enables you and your dentist to know in advance what the payment will be for any service that you may be unsure of coverage levels.



### To Find Network Providers:

Delta Dental PPO Network: Call 800-765-6003 or visit [www.deltadentalins.com](http://www.deltadentalins.com)

# DENTAL BENEFITS

## Delta Dental Low Plan

Employees have the option to pay a small monthly payroll contribution to enroll in the Low Plan offered by Delta Dental. The difference between the Base plan and this Low Plan are bolded below and include an increase to the Calendar Year Maximum, lower member coinsurance for Major Services and an increase in the Orthodontic Lifetime Maximum.

Dental Benefits	Delta Dental PPO Low Plan (4215-0029)		
	In-Network Only	Out-of-Network	
	PPO Dentist	DeltaPremier Dentist	Non-Delta Dentist
<b>Calendar Year Maximum</b>	<b>\$2,500</b>	<b>\$2,500</b>	<b>\$2,500</b>
<b>Annual Deductible</b> – Per Member	\$25	\$25	\$25
<b>Preventive</b> Exams, Cleanings ( <b>3x per year</b> ), X-Rays	No charge	No charge	You pay costs above 100% of R&C fees
<b>Basic Services</b> Space Maintainers, Restorations, Oral Surgery, Sealants, Repairs	10%	20%	20% + any costs above R&C fees
<b>Major Services</b> Inlays, Crowns, Dentures, Endodontics, Periodontics	<b>40%</b>	50%	50% + any costs above R&C fees
<b>Orthodontia</b> – Covered Members – Coinsurance	Adult & Child 50%	Adult & Child 50%	Adult & Child 50% + any costs above R&C fees
– Lifetime Maximum	<b>\$2,500 Lifetime Maximum</b>	<b>\$2,500 Lifetime Maximum</b>	<b>\$2,500 Lifetime Maximum</b>

Important Note: We strongly recommend you ask your dentist for a predetermination if total charges are expected to exceed \$300. Predetermination enables you and your dentist to know in advance what the payment will be for any service that you may be unsure of coverage levels.



### To Find Network Providers:

Delta Dental PPO Network: Call 800-765-6003 or visit [www.deltadentalins.com](http://www.deltadentalins.com)

# DENTAL BENEFITS

## Delta Dental High Plan

Employees have the option to pay a little higher monthly payroll contribution to enroll in the High Plan offered by Delta Dental. The difference between the Base plan and this Low Plan are bolded below and include an increase to the Calendar Year Maximum, lower member coinsurance for Major Services and an increase in the Orthodontic Lifetime Maximum. The benefit of the High Plan versus the Low Plan is an even lower coinsurance responsibility for Major Services.

Dental Benefits	Delta Dental PPO High Plan (4215-0030)		
	In-Network Only	Out-of-Network	
	PPO Dentist	DeltaPremier Dentist	Non-Delta Dentist
<b>Calendar Year Maximum</b>	<b>\$2,500</b>	<b>\$2,500</b>	<b>\$2,500</b>
<b>Annual Deductible</b> – Per Member	\$25	\$25	\$25
<b>Preventive</b> Exams, Cleanings ( <b>3x per year</b> ), X-Rays	No charge	No charge	You pay costs above 100% of R&C fees
<b>Basic Services</b> Space Maintainers, Restorations, Oral Surgery, Sealants, Repairs	10%	20%	20% + any costs above R&C fees
<b>Major Services</b> Inlays, Crowns, Dentures, Endodontics, Periodontics	<b>20%</b> Implant—50%	50%	50% + any costs above R&C fees
<b>Orthodontia</b> – Covered Members – Coinsurance	Adult & Child 50%	Adult & Child 50%	Adult & Child 50% + any costs above R&C fees
– Lifetime Maximum	<b>\$2,500 Lifetime Maximum</b>	<b>\$2,500 Lifetime Maximum</b>	<b>\$2,500 Lifetime Maximum</b>

Important Note: We strongly recommend you ask your dentist for a predetermination if total charges are expected to exceed \$300. Predetermination enables you and your dentist to know in advance what the payment will be for any service that you may be unsure of coverage levels.



### To Find Network Providers:

Delta Dental PPO Network: Call 800-765-6003 or visit [www.deltadentalins.com](http://www.deltadentalins.com)

# VISION BENEFITS

## Vision Service Plan (VSP) through Dublin Insurance

Cosumnes CSD offers you vision care coverage through Vision Service Plan (VSP.) When you receive vision care services, glasses and frames through the VSP network, a broad network of optical specialists, you will receive richer benefits. If you utilize an out-of-network provider, you will be responsible to pay all charges at the time of your appointment and will be required to file an itemized claim with VSP.

Vision Benefits	VSP Base		VSP Buy Up	
	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Copay</b> – Examination – Materials	\$25		\$25	
<b>Examination</b> (once every 12 months)	100%	\$50 allowance	100%	\$50 allowance
<b>Lenses</b> (once every 12 months) – Single Vision – Bifocal – Trifocal	100% 100% 100%	\$50 allowance \$75 allowance \$100 allowance	100% 100% 100%	\$50 allowance \$75 allowance \$100 allowance
<b>Frames</b> (once every 12 months)	\$130 allowance Costco—\$70 allowance	\$70 allowance	<b>\$210</b> allowance Costco— <b>\$115</b> allowance	\$70 allowance
<b>Contact Lenses</b> (In lieu of Frames & Lenses) – Medically Necessary – Cosmetic / Elective	100% \$130 allowance	\$210 allowance \$105 allowance	100% <b>\$210</b> allowance	\$210 allowance \$105 allowance

## Vision Care and Services at Costco

If you are receiving an exam at Costco, please make sure the provider is a VSP provider. Lenses/Contacts obtained at Costco are covered at regular benefit levels. Frames obtained at Costco have a \$70 or \$115 frame allowance due to Costco's wholesale pricing.

### Discounts

Discounts are available for cosmetic extras, such as tints, coatings and other add-on charges to standard lenses, after covered services are rendered. The discount may be applied to charges for the frame or contact lenses (except disposable or replacement contact lenses) over the stated allowances. Discounts also apply to additional pairs of glasses and/or pairs of standard contact lenses. To determine whether a provider offers discounts, visit [www.vsp.com](http://www.vsp.com).



### To Find Network Providers:

Call 800-877-7195 or visit [www.vsp.com](http://www.vsp.com)

# INCOME PROTECTION BENEFITS

## Basic Life and AD&D Insurance

Cosumnes CSD provides employees with Basic Life and Accidental Death & Dismemberment Insurance (AD&D) through The Standard for all Full-Time employees. There is no cost to you for this benefit.

If your death occurs while you are covered under the plan, your beneficiary will receive a benefit amount based on the category listed in the table below. If you are

diagnosed with a terminal illness with a life expectancy of less than 12 months, you can request up to 75% of your group term life benefit and voluntary life to be paid in advance. In the event of your accidental death, a benefit amount equal to your life Insurance amount will be paid to your beneficiary. Partial benefits are payable to you in the event of an accident that results in serious injury (e.g., loss of limbs or eyesight).

	Description	Benefit Amount
Class 1	All Full Time Employees typically classified as FLSA Exempt, excluding those identified in Class 2-4	\$50,000
Class 2	All Full Time Employees that do not fall into Class 1, 3 or 4	\$20,000
Class 3	All Full Time Employees including Fire Marshals, Deputy Fire Chiefs, Battalion Chiefs and Assist Fire Chiefs	\$50,000
Class 4	All Full Time Employees typically classified as FLSA Non-Exempt, except those that are Class 3	\$20,000

## Voluntary Life Insurance

Cosumnes CSD provides employees with the option to purchase additional Life and AD&D insurance in multiples of salary up to 6 times your annual income or \$500,000, whichever is less. You may also purchase coverage for your spouse up to \$100,000, not to exceed 50% of the amount elected for yourself. In addition, you may cover your children up to \$10,000 at a rate of \$1.75 per month for all children. All coverage is offered on a guarantee issue basis at open enrollment up to \$100,000 for yourself and \$25,000 for your spouse. Age reductions apply after age 65, please see policy for details.

If you are enrolled for less than \$100,000 and wish to increase your election during Open Enrollment, you may increase by \$10,000 or \$20,000 for yourself and \$5,000 or \$10,000 for your spouse.

	Rate per \$1,000 of coverage
<b>Age (as of January 1st)</b>	
29 & Under	\$0.127
30-34	\$0.152
35-39	\$0.174
40-44	\$0.209
45-49	\$0.302
50-54	\$0.473
55-59	\$0.774
60-64	\$1.143
65-69	\$2.048
70+	\$3.55

## Long Term Disability Insurance

Cosumnes CSD provides you with Long Term Disability (LTD) Insurance at no cost to you through The Standard. This plan provides you with income protection in the event of a disability. The plan pays 66-2/3% of your salary up to a maximum monthly benefit of \$5,000. LTD benefits for Safety Personnel is provided separately through CAPF.

If you are eligible for income from other sources, such as Social Security and/or Worker's Compensation, LTD benefits are adjusted so that the maximum monthly benefit you receive from all sources does not exceed 66-2/3% of pre-disability earnings. The benefits will begin after you have been disabled for 30 days. Benefits will be paid up to Age 65 or Social Security Normal Retirement Age, whichever is later.

## EMPLOYEE ASSISTANCE BENEFITS

### Concern Employee Assistance Program

Concern is a free benefit, available to you as well as to your spouse/domestic partner and children to age 26. If you need assistance balancing life's demands or need help with personal or family issues, you can contact Concern for confidential assistance any day, any time.

To access your Concern benefits, visit [employees.concernhealth.com](https://employees.concernhealth.com) and log in with company code **yourcsd** or call 800-344-4222.

**Counseling** - Concern offers assessment, crisis intervention, referrals, and confidential short-term counseling for help with personal or family issues. Up to 5 visits, per problem, per year with a skilled Concern counselor. Counseling is provided by phone, video, chat or text therapy or face-to-face.

### Life Balance Solutions

- **Legal Consultations** – Be connected to an attorney in person or over the phone for a free 30-minute consultation on any area of law not related to employment. You will receive a 25% reduction in standard fees if you decide to hire the attorney after your consultation
- **Financial Coaching** – Get sound financial guidance to help you manage money wisely and develop long-term financial security. Referral includes up to two 30-minute telephone consultations.
- **Adult Care Resources** – Receive help to find the most appropriate resources to help you care for an elderly or disabled relative. Complimentary copy of *How to Care for Aging Parents* is also available.
- **Parenting & Childcare** – Referrals to resources including daycare, preschools, after school programs, school age and college assistance. Complimentary new baby kit available.

## BENEFIT HUB DISCOUNT MARKETPLACE

Cosumnes CSD offers you a way to save on a wide range of discounts and perks through our BenefitHub Discount Marketplace. BenefitHub is free, easy-to-use, and offers a full-range of benefits and rewards.

- **Discounts:** Receive exclusive discounts on a wide array of top brands in categories such as travel, auto, electronics, apparel, entertainment (movies/ events), restaurants, health/wellness, and much more!
- **Cash Back:** Earn cash back on everything you buy from thousands of brands. Simply make your purchases through BenefitHub, and redeem your cash back. It's easy and a great way to save money.

To get started, go to [csd.benefithub.com](https://csd.benefithub.com) and register with your Cosumnes CSD email address. Refer to code "YFZ43A" when prompted.



## OTHER PROGRAMS AND PERKS

### Prepaid Legal

LegalShield offers employees the ability to purchase a pre-paid legal program for \$25.90 per month that covers all family members. The program includes telephone consultations, letters or phone calls to third parties, document review, Will preparation and updates, traffic defense, IRS audit representation, Law Suit defense, 24 hour emergency access, and much more, all with one of the top ten law firms in California and in the other 49 states.



### Family Fitness Membership

Employees can take advantage of discounted rates through CalFit. Sign ups are taken at the Laguna Blvd gym with your employee ID or paystub. Membership dues are deducted directly from payroll. See Human Resources for enrollment forms.

### Paid Time Off

Cosumnes CSD recognizes the value of taking time away from work to recharge on vacation, enjoy time at the holidays and take care of yourself when you are sick. To determine how many days you are eligible for, please refer to the employee handbook or applicable bargaining agreement.



# TAX SAVINGS BENEFITS

## Flexible Spending Accounts

Cosumnes CSD offers two flexible spending accounts (FSAs) through American Fidelity. These accounts allow you to use pre-tax dollars to pay for certain health and dependent care expenses. Each year, you decide how much to contribute on a pre-tax basis. The annual amount you elect is deducted from your paycheck in equal amounts each pay period. As you incur eligible expenses during the year, you can request reimbursement with your untaxed money from the appropriate account.

You can access claim forms, lists of eligible and ineligible expenses, and your personal account information online at [www.americanfidelity.com](http://www.americanfidelity.com).

### Health Care Spending Account (FSA) - \$2,750 Annual Limit

The Health Care Spending Account allows you to pay for certain health care expenses that are not covered or only partially covered by your health care plans (medical, dental, vision and prescription drug, including over the counter medications). Examples of eligible expenses include copays for office visits and prescription drugs, coinsurance, deductibles, and fees for acupuncture, chiropractic care, laser eye surgery, orthodontia, aspirin or cold medications. Eligible expenses can be incurred by you or any of your eligible tax dependents.

### Dependent Care Spending Account (FSA) - \$5,000 Annual Household Limit

The Dependent Care Spending Account is designed for people who need dependent care so that they can work. You are eligible to participate if you are single or married. However, if you are married, in order for you to use the Dependent Care Spending Account, your spouse must either work, go to school full time or be unable to care for your dependents due to a disability. Dependent care can be for your children under the age of 13, spouse or parents. Dependents must live with you and be eligible to be claimed as a dependent on your federal income tax return.

### Important IRS Rules

- Plan carefully! Flexible Spending Accounts have a “Use It or Lose It” rule.
  - ◇ Health Care: You have a grace period which provides you an additional 2.5 months in which to incur claims against the prior year FSA balance. Any funds remaining after the 2.5 months (March 15) will be forfeited, per the IRS requirements.
  - ◇ Dependent Care: Any FSA money that has not been used by December 31 will be forfeited.
- You cannot change or stop your FSA contributions during the year unless you have a qualifying change in status.
- Money cannot be transferred between accounts. For example, you cannot use your Dependent Care FSA to reimburse yourself for health care expenses and vice versa.



### Video – Flexible Spending Accounts

Watch this quick video to better understand how the Flexible Spending Accounts work:

<http://video.burnhambenefits.com/fsa>.



## AMERICAN FIDELITY VOLUNTARY PLANS

### Accident

American Fidelity's Accident Benefit provides coverage for you and your family to help with those unforeseen accident expenses. A lump sum for a variety of life's accidents will be paid out. Some examples of the types of covered incidents are dislocations, concussion, burns, internal injuries, etc. In addition to these examples, you can receive a benefit for your annual routine physical exam, including immunizations and preventative testing.

### Cancer

Increased health screenings have made detection of cancer more prominent. The Cancer Benefit can fill the gaps to help you cover expenses if you are diagnosed. Benefits are payable directly to the employee to be used for whatever needs may arise. Employees can choose between three levels, basic, enhanced, or enhanced plus. Spouses and dependent children may also be covered. An annual wellness screening benefit is included depending on the level enrolled on.

### Critical Illness (no Cancer)

Beyond covering the basics of gaps in medical coverage, a Critical Illness Benefit can fill the gaps during a stressful time to help you pay your mortgage payments, college tuition, hire household help, or pay for treatment not covered by a medical plan. Benefits are payable directly to the employee to be used for whatever needs may arise. Employees can choose to be covered for \$10,000, \$12,000 or \$30,000. Spouses can be enrolled for up to 50% of the amount of the employee's benefit. An annual wellness screening benefit of \$50 is included for the covered employee and covered spouse.

### Short Term Disability

Being unable to work due to an injury or sickness can be both a physical and emotional drain. The short-term disability income insurance plan can help protect your income while you are unable to work. Benefits can begin on the 8th, 15th, or 31st day depending on the plan selection. Benefits are payable for a covered injury or sickness up to 90 days, 180 days or 1 year. Your disability benefit will not exceed 25% of your gross monthly compensation.

### Term Life Insurance

Beyond the basic life coverage, employees have the option to select voluntary term life. Employees choose from 10, 20, or 30 year term. A few health questions are required to issue coverage prior to the policy being issued. The coverage will remain active for the selected term period as long as premiums are paid.

### Whole Life Insurance

Employees also have the option to select voluntary whole life. Employees choose the coverage amount and have the flexibility to adjust the benefits when needed. Cash value will accumulate within the policy, providing financial assistance when needed.

## AFLAC PLANS—SAFETY PERSONNEL ONLY

In addition to the American Fidelity Plans, AFLAC plans are offered to the Safety Personnel. The Cancer Care is subsidized by Cosumnes CSD. All other plans and options are available for employee purchase for both themselves and their dependents.

### Cancer Care

Cosumnes CSD provides Safety Employees with an employer paid Cancer Care plan. The plan covers the following:

- Initial Diagnosis options from \$1,000 to \$6,000
- Benefits for radiation and chemotherapy
- Daily Hospital Benefit
- Yearly Wellness Benefit
- Optional Spouse and Dependent Coverage available for employee purchase

### Accident Advantage

- Covers you and your family 24/7
- At work, sports, school, home and commuting
- Pays \$1000 to \$1500 initial hospitalization
- First visit pays \$125 to \$205
- Pays \$250 to \$300 per day hospitalization
- Pays a \$60 annual wellness benefit

### Aflac Hospital Choice

- \$500 to \$2000 for the first 24 hours
- Emergency Room & Short Stay benefits
- Rehabilitation Facility Benefit
- Optional Riders for: Physician Visits, Laboratory, Imaging, Hospital Stay, Surgical Care, etc.



# RETIREMENT PLANS

## 457 Retirement Savings (Pre-Tax)

The 457 plan provides employees with the opportunity to build savings to meet long-term financial goals such as retirement. The plan gives you to set aside money on a pre-tax basis that grows tax-free.

457 Retirement Savings Plan	
Tax Advantages	Your contributions are tax-free and lower your taxable income now
Contributions	You may contribute via payroll deduction.
Annual Contribution Limit	Up to 100% of eligible earnings up to the annual IRS maximum IRS annual maximum contribution for 2020 is 19,500; once you reach age 50, you can make additional annual contributions up to \$6,000
Plan Investments	Self-directed through Nationwide, AIG Valic, and CalPERS
Rollovers	You have the option to rollover other qualified retirement plans or certain IRAs into the 457 plan
Loans	You may borrow from your 457 plan at an interest rate of Prime + 1%. The minimum amount you can borrow is \$1,000 and the maximum is 50% of your account balance up to \$50,000. You cannot take more than one loan at a time. The maximum repayment period is five years, except for the purchase of a primary residence. Please note that loan payments are made with after-tax money, and when you withdraw funds during retirement, they will be subject to tax again at that time.

## 457 Retirement Savings (Post-Tax)

The Roth Plan is a voluntary after-tax contribution option offered through Nationwide, AIG Valic and the CalPERS 457 Plans. You can elect to make designated Roth contributions of money from your paycheck that has already been taxed. This helps build a nest egg of tax-free income in retirement. Your qualified distributions of contributions and their earnings, if any, then come out tax-free. Less tax on plan distributions could mean higher net distributions in retirement.

## Post-Employment Health Plan (PEHP) - Miscellaneous Employees Only

Employees who are a Qualified Participant (as defined by CalPERS) and enrolled in a CalPERS health plan through Cosumnes CSD may eligible to participate in PEHP (for more information about eligibility and participation rules, please contact Human Resources). Employees who opt out of health coverage through Cosumnes CSD and are receiving a health stipend, are not eligible to participate.

Employees who are enrolled in the PEHP may choose to change their investment funds, update contact and login information, or view statements and other important documents at [www.NRSFORU.com](http://www.NRSFORU.com). To access account information, call 877-677-3678. Specialist are available Monday through Friday 8am - 11pm (EST).

## RESOURCES AND CONTACTS

Below is a list of insurance carrier contacts should you require assistance with your benefit questions following open enrollment. If you are unable to resolve your issues or questions with our insurance carriers, please contact Human Resources.

	Group Number	Phone	Website
<b>Health/Dental/Vision Benefits</b>			
<b>Medical Plans</b>			
– CalPERS		888-225-7377	<a href="http://www.calpers.ca.gov">www.calpers.ca.gov</a>
Anthem Blue Cross of California		877-737-7776	<a href="http://www.anthem.com/ca/calpers">www.anthem.com/ca/calpers</a>
Blue Shield of California		800-334-5847	<a href="http://www.blueshieldca.com/calpers">www.blueshieldca.com/calpers</a>
Kaiser Permanente		800-278-3296	<a href="http://www.kp.org/calpers">www.kp.org/calpers</a>
United HealthCare		877-359-3714	<a href="http://www.calpers.welcometouhc.com">www.calpers.welcometouhc.com</a>
Western Health Advantage		888-942-7377	<a href="http://www.westernhealth.com/calpers">www.westernhealth.com/calpers</a>
<b>Dental Plans</b>			
– Delta Dental	4215-0022 4215-0029 4215-0030	800-765-6003	<a href="http://www.deltadentalins.com">www.deltadentalins.com</a>
<b>Vision Service Plan (VSP)</b>			
		800-877-7195	<a href="http://www.vsp.com">www.vsp.com</a>
<b>Income Protection Benefits</b>			
<b>Standard</b>			
– Basic Life and AD&D Insurance			<a href="http://www.standard.com">www.standard.com</a>
– Long Term Disability Insurance			
<b>Employee Assistance Benefits</b>			
<b>Concern Employee Assistance Plan</b>			
		800-344-4222	<a href="http://employees.concernhealth.com">employees.concernhealth.com</a> Log-in Code: yourcsd
<b>Tax Savings Benefits</b>			
<b>American Fidelity</b>			
- Flexible Spending Accounts	G-905/R1		<a href="http://www.americanfidelity.com">www.americanfidelity.com</a>
<b>457</b>			
Nationwide	Paul Menard	916-541-7032	<a href="http://www.nrsforu.com">www.nrsforu.com</a>
AIG Valic	Doug Kryro	916-780-6022	<a href="http://www.valic.com">www.valic.com</a>
CalPERS Voya	Darren Wagerman	888-713-8244 ext. 5	<a href="http://www.calpers457.com">www.calpers457.com</a>
<b>Human Resources</b>			
Joe Ambrosini, Director of Human Resources			
Sheena Newman, Human Resources Analyst			
Sonia Roman, Human Resources Specialist		916-405-7190	
Jennifer Warson, Human Resources Specialist			
Christine Nicula, Human Resources Specialist			

# IMPORTANT INFORMATION

## Annual Notices

Various state and federal laws require that employers provide disclosure and annual notices to their plan participants. Cosumnes CSD posts all federally required annual notices on our intranet site for you to download and read at your convenience. Cosumnes CSD distributes all federally required annual notices upon hire and during each annual open enrollment period.

Annual notices include the following:

- Medicare Part D Notice of Creditable Coverage
- HIPAA Notice of Privacy Practices
- Women's Health and Cancer Rights Act (WHCRA)
- Newborns' and Mothers' Health Protection Act
- Special Enrollment Rights
- Medicaid & Children's Health Insurance Program
- Summary of Benefits and Coverage

## The Affordable Care Act and You

Even though the Affordable Care Act (ACA)'s penalty for not having health coverage (known as the individual mandate) has been reduced to zero, if you are a taxpayer in California, you will still be required to have health coverage (unless you qualify for an exemption) or pay a penalty for the 2020 tax year. In addition, several other states, including Massachusetts, New Jersey, and Vermont, as well as the District of Columbia, have reinstated an individual mandate requirement, and others are considering doing so. You may consider these options below to satisfy this requirement:

- Enroll in a medical plan offered by Cosumnes Service District or another group medical plan meeting the requirements for minimum essential coverage;
- Purchase coverage through a health insurance marketplace;
- Enroll in coverage through a government-sponsored program if eligible.

However, if you choose to purchase coverage through the marketplace, because Cosumnes CSD's medical plans are considered affordable and meet minimum value under the Affordable Care Act, you may not be eligible for a subsidy, and you may not see lower premiums or out-of-pocket costs through the marketplace. In addition, employer contributions to your medical benefits will be lost and your portion of medical premiums will no longer be paid via payroll deductions on a pre-tax basis

For more information on your coverage options, please visit [www.healthcare.gov](http://www.healthcare.gov).

## Summary of Benefits and Coverage (SBC)

Health insurance issuers and group health plans are required to provide you with an easy-to-understand summary about your health plan's benefits and coverage, referred to as a Summary of Benefits and Coverage (SBC). This guide is designed to help you understand the medical plan options offered to you by Cosumnes CSD. Please refer to the SBCs and carrier contracts provided by our health plan carriers for additional plan details.



Learn more at [www.burnhambenefits.com](http://www.burnhambenefits.com)

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This brochure provides an overview of some of your benefit plan choices. It is for informational purposes only. It is not intended to be an agreement for continued employment. Neither is it a legal plan document. If there is a disagreement between this guide and the plan documents, the plan documents will govern.

In addition, the plans described in this brochure are subject to change without notice. Continuation of any benefit plan or coverage is at the company's discretion and in accordance with federal and state laws. If you need additional information or have any questions about the benefit program, please contact Human Resources.

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