



2019-2020
Open Enrollment
May 6 to May 31, 2019
Plan year 7/1/2019-6/30/2020

To: All Benefit Eligible Employees

Perris Union High School District's annual health benefits open enrollment is just around the corner!

Open Enrollment is the time of year when you can make changes to your benefit plans. There are many choices to make and we want you to be as informed as possible. This guide presents the highlights of your benefit options.

During Open Enrollment, you will have the opportunity to:

- Add or make changes to your medical, dental, vision and voluntary plans
- Add or delete dependents from coverage
- Enroll in or continue the Flexible Spending Account (FSA) and Dependent Day Care (DDC) plans.
- Update your beneficiary(ies)

Online Open Enrollment - BenefitBridge

Benefit eligible employees may log in to our online benefits portal through **BenefitBridge** at www.benefitbridge.com/puhsd during this time to review or change your plan elections for the 2019-2020 plan year. **Changes are effective 7/1/2019-6/30/2020**

If you are not making any changes, you do not need to log in. Instructions on how to access BenefitBridge are provided with this announcement package. Please note, open enrollment ends at 4 p.m. on May 31st and you will no longer be able to make changes after this time.

Health & Safety Fair

The annual Health & Safety Fair will be held on:

Thursday, May 16, 2019 from 2:00 – 5:30 pm

Heritage High School Gymnasium

26001 Briggs Road

Menifee, CA 92585

Representatives will be available to provide information and answer questions about our plans. **Come learn about the full array of benefits available to you and how you can best take advantage of our programs. Door prizes, benefits updates, health screenings, massages, giveaways, Kaiser mobile unit, and more will be available at the event. Come join us for some fun!**

Rate Calculator

Rates for 2019-20 medical, dental and vision plans can be viewed on the District website at <https://www.puhsd.org/pages/2019-2020-rate-calculators>

Medical, Dental & Vision Plan Offerings – Classified Employees (CSEA)

- For the plan year beginning July 1, 2019, Anthem Blue Cross HMO30 plan will no longer include Chiropractic care.
 - If you are enrolled in this plan, chiropractic care will be automatically removed.
- **IMPORTANT** – Your medical plan election is valid from July 1, 2019 to June 30, 2020. If you are considering the “Anthem HMO30 Select” or “Anthem HMO40” plan, it is important to know Anthem Blue Cross may “refresh” their narrow network providers on January 1 each year. Changes can occur in the network of providers on January 1. If your provider leaves the “Select” network, on or before January 1, you will be required to select a new medical provider, however you cannot change your medical plan until the next open enrollment.
 - To determine if your HMO medical group is in the Anthem Select network, visit the Anthem website at www.anthem.com/ca/findadoctor. An instruction flyer detailing how to find providers in the different networks (HMO and HMO Select) is included in this packet.
- Plan details are available on the District website <http://www.puhsd.org/pages/employee-benefits>
- There are no changes to dental or vision plan benefits

Medical, Dental & Vision Plan Offerings – Certificated Employees (PSEA)

- **New:** PSEA has elected to add an implant rider to the Delta Dental PPO. The benefit is 50% coinsurance up to \$1,500 per calendar year maximum. The implant Annual Maximum is separate from and in addition to the traditional Annual Maximum for all other services. Information on this benefit will be available at the Health Fair or can be viewed on BenefitBridge.
 - This change applies to Delta PPO only and does not affect Delta PPO Premier/Incentive or Anthem Dental
- Plan details are available on the District website <http://www.puhsd.org/pages/employee-benefits>
- There are no changes to medical or vision plan benefits

Medical, Dental & Vision Plan Offerings – Management/Confidential/Board Members

- **New:** Management/Confidential/Board has elected to add an implant rider to the Delta Dental PPO. The benefit is 50% coinsurance up to \$1,500 per calendar year maximum. The implant Annual Maximum is separate from and in addition to the traditional Annual Maximum for all other services. Information on this benefit will be available at the Health Fair or can be viewed on BenefitBridge.
 - This change applies to Delta PPO only and does not affect Delta PPO Premier/Incentive or Anthem Dental
- Plan details are available on the District website <http://www.puhsd.org/pages/employee-benefits>
- There are no changes to medical or vision plan benefits



Medical, Dental & Vision Plan Offerings – CMI

- There are no changes to medical, dental or vision plan benefits
- Plan details are available on the District website <http://www.puhsd.org/pages/employee-benefits>



Kaiser and Anthem Blue Cross Plan Name Changes

Anthem Blue Cross – NAME CHANGE ONLY

Plan name changes to REEP Anthem HMO40 (Deductible HMO)

- Anthem HMO 40 will be renamed Anthem DHMO 40 Select (D for deductible 40 is the copay)

This is a name change only / there is no benefit change to this plan

Kaiser – NAME CHANGE ONLY

Plan name changes to Kaiser High and Kaiser Low:

- Kaiser High will be renamed Kaiser HMO20 (20 is the copay)
- Kaiser Low will be renamed Kaiser DHMO500 (D for deductible / \$500 for the amount of the deductible)

This is a name change only / there are no benefit changes to these plans

REEP Voluntary Plans

Colonial Life Medical Bridge

Colonial will be offering the Medical Bridge Plan once again this year. This plan could help pay for out-of-pocket medical expenses, such as deductibles, co-payments and other expenses. You can elect to enroll in one of the Medical Bridge plans online through BenefitBridge during open enrollment.

Identity TheftPROTECTOR Plan

REEP is offering the most comprehensive and affordable identity fraud and resolution service available today. For \$10.00 per month (\$12.00 tenthly) you can protect your entire family against identity theft and fraud. The **REEP ID TheftPROTECTOR** plan is available to you and your family during Open Enrollment. You can enroll in Identity Theft online through BenefitBridge during open enrollment.

METLAW (formerly Hyatt Legal)

Finding an affordable lawyer to represent you when you have trouble with purchased goods, creditors, buying or selling your home, or even preparing your will can be a challenge. MetLaw, administered by Hyatt Legal Plans, is a smart, simple, affordable solution for you. MetLaw is a legal services plan that provides legal representation for you, your spouse and dependent children at a price of \$22.20 tenthly. Information on this plan option will be available at the Health & Safety Fair. You can enroll in METLAW online through BenefitBridge during open enrollment.

MetLife – Voluntary Life

MetLife – Accidental Death & Dismemberment

To enroll in, or increase your current voluntary life or voluntary AD&D coverage, you can do so online through BenefitBridge. All employees currently enrolled in the voluntary life or voluntary AD&D plans are encouraged to review their beneficiary(ies) designation in BenefitBridge and update if needed.

Additional Voluntary Plans

American Fidelity - Flexible Spending Accounts (FSA)

Medical FSA and Dependent Care FSA require you to enroll every plan year – even if you are electing the same dollar amount, you must re-enroll in the FSA each year. To do this, visit with an American Fidelity Assurance (AFA) representative at the Health Fair, or contact AFA at (800) 662-1113. Representatives will also visit sites throughout open enrollment.

American Fidelity also offers disability, cancer, life and accident and critical care insurance.

The Standard

The Standard offers life and disability insurance to certificated staff members (CTA). Visit with The Standard representative at the Health Fair or call customer service at (888) 937-4783

Keenan & Associates and the carriers will be available with details on all the plan offerings at the Health & Safety Fair. If you are unable to attend and have questions, please contact the District Benefits Office at 951-943-6369, or Keenan & Associates at 800-654-8347 ext. 1168 or 1171.

REEP Wellness Programs

[Anthem Blue Cross Subscribers](#)

Anthem Blue Cross subscribers can earn one \$125 gift card after completing all of the identified wellness steps and challenges. More detailed information on this program is included in this packet and a REEP Wellness representative will be available at the Health Fair.

[Kaiser Permanente Subscribers](#)

The 2019-20 REEP Kaiser Wellness Program has been revitalized to incentivize members to make lasting lifestyle changes. By completing all required activities of the program, Kaiser subscribers can earn one \$125 gift card. More detailed information on this program is included in this packet and will a REEP Wellness representative be available at the Health Fair.

***Please note:** Gift cards earned through the Wellness programs are considered taxable income by the IRS and will be reported to the IRS at the end of the calendar year.

REEP Preventing Diabetes Programs (NEW)

[Anthem Blue Cross Subscribers](#)

REEP Employees covered under the Anthem medical plan who successfully complete the program can earn a Fitbit Flex 2, and Wireless Scale. All REEP Anthem Members are encouraged to complete the survey and see if they qualify for the program.

<https://www.solera4me.com/REEP>

[Kaiser Permanente Subscribers](#)

The first 250 REEP Employees covered under the Kaiser medical plan who successfully complete the program can earn a \$125 Gift Card. While only REEP Employees are eligible for the \$125 gift card, all REEP Members are encouraged to complete the survey and see if they qualify for the program.

<https://thrive.kaiserpermanente.org/center-for-healthy-living>

***Please note:** Gift cards earned through the REEP Preventing Diabetes Programs are considered taxable income by the IRS and will be reported to the IRS at the end of the calendar year.

New-BridgeHealth Program for PPO/HSA/MVP Members Only

Effective July 1, 2019, REEP is including the BridgeHealth program for Anthem HSA, PPO, and MVP members. This program incentivizes the use of Centers of Excellence for Elective Surgeries such as Cardiac, General, Joint Replacement, Orthopedic, Spinal, Women's Health, etc. If PPO/HSA/MVP members are referred for surgery, they can contact BridgeHealth to be guided to facilities and providers who are performing in the top 25% for that specific surgery.

If the member opts to use the BridgeHealth program for their surgery, PPO/MVP members will have their deductible and coinsurance waived. HSA members will be subject to their deductible, but their coinsurance will be waived, and they will receive a Care Allowance. The care allowance is an incentive remitted to the member if they choose to have the surgery through BridgeHealth. The care allowance amounts are for HSA members, and are based on the plan you are on:

- HSA 1 Care Allowance: \$1,500
- HSA 2 Care Allowance: \$3,000

If traveling to a facility over 100 miles away, travel expenses are covered for member and a companion to travel with them (includes airfare, lodging, incidentals)

Members can call and receive the second opinion at no charge, and can decide not to move forward if they would rather pursue a different course of action (This is a great benefit of the program)

Members must call to begin the process, there is no outreach

Important Reminders

1. Once you make your plan elections, you cannot change to a different plan until the next open enrollment period without a qualifying event. A loss or change of provider is not considered a qualifying event.
2. Qualifying events allow you to make changes to your benefits during the plan year rather than waiting for the next annual open enrollment period. If you experience a special enrollment circumstance or change in family status such as birth of a child, marriage or divorce, please contact the Benefits Office to discuss. It is important to note, you must make this change within 30 days of the qualifying event.
3. If your physician is no longer an eligible provider for the plan you have chosen, you must choose a new participating provider, or the carrier will select one on your behalf.
4. Eligible dependents include your spouse, registered domestic partner, and your children up to their 26th birthday. This includes natural children, step children, adopted children and children for whom you are a court appointed guardian. This also includes any child for whom you are required to provide coverage under a Qualified Medical Child Support Order (QMCSO).
5. It is recommended that employees enrolled in one of the Voluntary Life or Voluntary AD&D plans should log on to BenefitBridge and update your beneficiary information to ensure your designated beneficiary(ies) is/are current.
6. You must remain enrolled in your selected plan until July 1, 2020. Changes to medical plans or insurance carriers are not allowed outside open enrollment.

What Should I do Next?

1. Review your insurance benefits and decide what is best for you and your family.
2. Log on to BenefitBridge at www.benefitbridge.com/puhsd to elect the plans of your choice, update your beneficiary(ies) on the life plan(s), and verify your elections are accurate. A flyer on how to navigate BenefitBridge is included in this enrollment guide.

If you have questions, please contact the District Benefits Office at 951-943-6369 ext. 80283 or Keenan & Associates at 800-654-8347 ext. 1168 or 1171.