

**All Personnel**

AR 4154(a)  
4254  
4354

**HEALTH AND WELFARE BENEFITS**

**Retired Certificated and Classified Employees**

A retired certificated or classified employee or surviving spouse/domestic partner shall be allowed to enroll in health and/or dental care benefit plan within 30 days of losing active employee coverage and subject to negotiated employee agreements. (Education Code 7000)

If a retired certificated employee or surviving spouse/domestic partner fails to enroll during the initial enrollment period, further opportunity to do so shall be denied. A person who has previously received but then voluntarily terminated coverage also shall be excluded from obtaining further coverage.

Retirees who wish to enroll in the District's health plan must remit post-dated checks with their application sufficient to pay for coverage through next June. Each check should cover one month's dues and be made payable to Oroville City Elementary School District. Sometime in May of each year, these retirees will be advised by the District of the monthly health plan dues for the following contract year (July through June) so that twelve more post-dated checks can be provided. Should a retiree not hear from the District by July 1, it is his/her responsibility to inquire.

If the District is forced to remove a retiree from the plan due to lack of advance payment of monthly dues, the JPA will not permit the District to reenroll that person in the District's plan. Because of this, it must be expressly understood that it is the sole responsibility of the retiree to keep a supply of post-dated checks in the School District business office at all times. Further, all retirees participating in this arrangement must agree to hold the District free of any responsibility other than to forward said checks to the carrier at the appropriate time.

**Retired Management, Supervisory and Confidential Employees**

A retired management, supervisory or confidential employee or surviving spouse/domestic partner shall be allowed to enroll in the health and/or dental care benefit plan within 30 days of losing active employee coverage if they meet the criteria below:

The employee is at least 55 years of age at the date of his/her retirement and has a total of not less than 15 years of total service credit in the State Teachers' Retirement System and/or Public Employees' Retirement System at the time of the retirement. The employee must also qualify for retirement in the Public Employees' Retirement System and/or State Teachers' Retirement System.

Additional conditions for all eligible employees include:

**HEALTH AND WELFARE BENEFITS** (continued)

1. Must be employed by the District at the time of retirement and must be an active participant in the District-offered health insurance program at the time of retirement;
2. The District contribution for the health benefit will be capped at the dollar amount for the fringe benefit package, which includes family coverage, during the last year of the retiree's employment with the District, with the retiree to pay the difference;
3. Coverage of this program of District-paid health benefits will cease at age 65 and the employee will be allowed to continue the health insurance coverage provided he/she pays the existing premium rate;
4. In the event the employee precedes the spouse in death, the spouse may continue coverage at own expense for an unlimited time.

**Continuation of Coverage**

Qualified District employees, their spouses/domestic partners, and/or their dependent children shall be offered the opportunity to continue health insurance coverage when they otherwise would lose coverage due to one of the following qualifying events: (Health and Safety Code 1366.23; Insurance Code 10128.53; 26 USC 4980B; 26 CFR 54.4980B-4)

1. The death of the covered employee;
2. The termination, other than by reason of the employee's gross misconduct or reduction in hours, of the covered employee's employment;

(cf. 4117.4 - Dismissal)

(cf. 4218 - Dismissal/Suspension/Disciplinary Action)

3. The divorce or legal separation of the covered employee;
4. The covered employee's becoming entitled to Medicare benefits;
5. A dependent child ceasing to be a dependent child of the covered employee.

Continuation health coverage shall be the same as provided to similarly situated individuals under the group benefit plan. (Health and Safety Code 1366.23; Insurance Code 10128.53; 26 USC 4980B)

**HEALTH AND WELFARE BENEFITS** (continued)

The Superintendent or designee shall notify the health care service plan administrator of a qualifying event listed in item #1, 2 or 4 above, within 30 days of the event. A qualified beneficiary shall notify the service plan administrator of a qualifying event listed in item #3 or 5 above within 60 days of the event or of the date that the beneficiary would lose coverage, whichever is later. (26 USC 4980B; 29 USC 1163)

Continuation coverage shall be terminated in accordance with the District's insurance plan and in accordance with 26 USC 4980B and 26 CFR 54.4980B-6.

However, a former employee who, prior to January 1, 2005, worked for the District for at least five years and who was age 60 or older on the date employment ended, or his/her spouse/domestic partner or former spouse/domestic partner, may continue benefits until the earlier of any of the following events: (Health and Safety Code 1373.621; Insurance Code 10116.5)

1. The date the individual reaches age 65;
2. The date the individual is covered under any other group health plan, regardless of whether that coverage is less valuable;
3. The date the individual becomes entitled to Medicare benefits;
4. For a spouse/domestic partner, five years from the date on which continuation coverage was scheduled to end for the spouse/domestic partner;
5. The date on which the District terminates its agreement with the health service plan and ceases to provide coverage for any active employees through that plan, in which case the former employee and/or his/her spouse/domestic partner shall have a right to a conversion plan.

The Superintendent or designee shall notify qualified beneficiaries of the availability of conversion and continuation coverage. This notification shall include the statement in Labor Code 2800.2 encouraging individuals to examine their options carefully before declining such coverage. (Labor Code 2800.2)

(cf. 4112.9/4212.9/4312.9 - Employee Notifications)

**HEALTH AND WELFARE BENEFITS** (continued)

**Disability Insurance**

The Superintendent or designee shall give notice of disability insurance rights and benefits to each new employee and each employee leaving work due to pregnancy, nonoccupational illness or injury, the need to provide care for any sick or injured family member, or the need to bond with a minor child within the first year of the child's birth or placement in connection with foster care or adoption. (Unemployment Insurance Code 2613)

(cf. 4157.1/4257.1/4357.1 - Work-Related Injuries)

(cf. 4161/4261/4361 - Leaves)

(cf. 4161.1/4361.1 - Personal Illness/Injury Leave)

(cf. 4161.8/4261.8/4361.8 - Family Care and Medical Leave)

(cf. 4261.1 - Personal Illness and Injury Leave)

When disabled by an injury resulting from a violent act sustained while performing his/her job duties, a certificated or classified employee may continue in the District health and dental care plans upon meeting criteria specified by law. The employee shall pay all employer and employee premiums and related administrative costs. (Education Code 7008)