2013–2014
OPEN ENROLLMENT FOR ACTIVE EMPLOYEES IS COMING!

THIS YEAR’S OPEN ENROLLMENT TAKES PLACE
Monday, May 13 thru Friday, May 31, 2013

Joy TAKE ACTION Joy
If you would like to enroll, change plans, add or remove dependents from your Long Beach Community College District benefits plan, you must come by the Benefits Office (T1026) to complete the appropriate forms no later than Friday, May 31, 2013 for an effective date of July 1, 2013.

DO NOTHING
If you are NOT making changes to any of your CURRENT plans, there is NOTHING you need to do at this time. Your benefits will remain the same as they are now.

EMPLOYEE * CONTRIBUTION * RATES
Employee contribution rates will be at 4% (single), 6% (2party), and 8% (family) of the total health and welfare premium for the current plan year 2013-14. Current rates can be found in the Benefit Summary attached and/or on the LBCC intranet at: http://www.lbcc.edu/HumanResources/formsbenefits.cfm

PRE-TAX OR POST-TAX OPTION
Employee insurance premium contributions will AUTOMATICALLY default to the pre-tax option for next fiscal year unless you complete and return the Election of Pre-tax or Post-tax Deductions for Employee Benefit Contributions form located on the last page of your Benefit Summary booklet. Most employees elect the pre-tax option. To verify the current option you elected, review your paystub and look at your before tax or after tax deductions.

CHOICES FOR “OPTING OUT” OF BENEFITS
Employees have 3 options for “Opting Out” of Benefits:

- Employees may opt-out of all health and welfare plans (medical, dental, behavioral health and vision) for themselves and their dependents, if any – no H&W coverage.
- Employees may opt out of dental, and vision benefits for themselves and their dependents, if any but keep the medical and behavioral health insurance for themselves and their dependents.
- Employees may opt-out of medical for themselves and their dependents but keep all the other plans (vision, behavioral health and dental). for themselves and their dependents

Employee can’t choose just VSP or just MHN or just Delta and opt-out of the others. When choosing “all others” (VSP, MHN, Delta), coverage level must be the same for all plans. Example: employee has spouse and 2 children = family coverage for dental, mental health, and vision. He can’t just choose to have single coverage for vision, 2 party coverage for mental health and family coverage for dental.

Employees opting-out of medical insurance must provide proof of other medical insurance coverage. There is no cash in lieu of benefits. If you’re electing any of the 3 “opt outs”, completion of a Declaration of Benefits form and appropriate insurance forms must be completed and returned to the Benefits Office no later than May 31, 2013.