



Benefits At-A-Glance

Introduction

Community Action Partnership of Orange County is pleased to present this overview of our Benefits Program.

We offer a comprehensive package of benefits that help you take good care of yourself and your family. Your benefits are a valuable part of your compensation; we encourage you to learn how your plans work so you can get the most out of them.

Some of our over-riding objectives in selecting the benefits program include:

- Meeting the diverse needs of our employees by offering flexible benefit choices
- Positioning our benefits program as a competitive tool to attract and retain a quality workforce
- Promoting and enhancing employees' understanding of all benefits offered and costs associated with the plan
- Providing programs that promote a culture of wellness, with easy access to a variety of health resources

Community Action Partnership of Orange County pays the full monthly premium for the following plans:

Medical: Blue Shield Trio Network HMO - Employee Only
Dental: Cigna DHMO - Employee Only
Basic Life and AD&D Insurance - Employee Only

Eligibility and Enrollment

You may enroll in our benefits program if you are an active, full-time regular employee working a minimum of 30 hours per week. Your benefit eligibility begins on the first of the month following 30 days of active employment.

As you become eligible for benefits, so do your eligible dependents. In general, eligible dependents include your spouse/domestic partner and children.

Each year, Community Action Partnership of Orange County holds Open Enrollment, generally in July. Our plan year runs from August 1st through July 31st of each year.

Making Changes to Your Coverage

Once you choose your benefits, you may not change or cancel your coverage until the next open enrollment period unless you have what the IRS calls a "qualified status change". If you experience a qualified status change, you must notify Human Resources to change your coverage within 31 days of the change.

Qualified Status Changes Include:

- Change of domestic partner status, participant's legal marital status, including marriage, death of spouse, divorce, legal separation, or annulment.
- Change in the number of employee's dependents due to birth, adoption and placement for adoption, or death.
- Termination or commencement of employment by the participant, spouse/domestic partner, or dependent.
- A reduction or increase in hours of employment by participant, spouse/domestic partner, or dependent, including a switch between part-time and full-time status, strike or lockout, or commencement of or return from an unpaid leave of absence.
- An event that causes the participant's dependent to satisfy or cease to satisfy the requirements for coverage due to attainment of age.
- A change in the place of residence (out of plan's service area) of participant, spouse/ domestic partner, or dependent.
- Financial hardship is NOT considered a qualifying event.

Benefits At-A-Glance

Medical Plan Comparison

Community Action Partnership of Orange County has three different medical plans that you may choose from. Please refer to the charts below or access the Benefit Summary plan descriptions for more details.

Blue Shield HMO Medical Plan Options

Benefits	Trio Network HMO	Access+ Full Network HMO
Deductible	None	None
Out-of-Pocket Maximum	\$2,000/Individual; \$4,000/Family	\$2,000/Individual; \$4,000/Family
Preventive Services	No charge	No charge
Office Visit (Primary Care and Specialists)	\$20 copay	\$20 copay
Chiropractic & Acupuncture Services (limited to 30 visits, combined, per calendar year)	\$10 copay	\$10 copay
Hospitalization	\$500 per admission	\$500 per admission
Emergency Room Services (copay waived if admitted)	\$100 copay per visit	\$100 copay per visit
Urgent Care	\$20 copay	\$20 copay
Prescriptions - Retail (30-day supply)		
Tier 1 drugs	\$10 copay	\$10 copay
Tier 2 drugs	\$25 copay	\$25 copay
Tier 3 drugs	\$40 copay	\$40 copay
Tier 4 drugs (excluding Specialty drugs)	20% (\$200 max copay)	20% (\$200 max copay)
Specialty Pharmacies	20% (\$200 max copay)	20% (\$200 max copay)
Mail Order (90-day supply)		
Tier 1 drugs	\$20 copay	\$20 copay
Tier 2 drugs	\$50 copay	\$50 copay
Tier 3 drugs	\$80 copay	\$80 copay
Tier 4 drugs (excluding Specialty drugs)	20% (\$400 max copay)	20% (\$400 max copay)
Specialty Pharmacies	Not covered	Not covered

Blue Shield PPO Medical Plan Option

Benefits	Full PPO Split Deductible	
Network	In-Network	Out-of-Network
Deductible	\$500/Individual; \$1,000/Family	\$1,000/Individual; \$2,000/Family
Out-of-Pocket Maximum	\$2,500/Individual; \$5,000/Family	\$5,000/Individual; \$10,000/Family
Preventive Services	Covered 100% (<i>deductible waived</i>)	Not covered
Office Visit (Primary Care and Specialists)	\$20 copay (<i>deductible waived</i>)	40%, after deductible
Chiropractic Services (limit of 12 visits per cal year)	\$25 copay	40%, after deductible
Acupuncture Services (limit of 20 visits per cal year)	\$25 copay	40%, after deductible
Hospitalization	\$100 per admission + 20%	40%, after deductible
Emergency (copay waived if admitted)	\$100 copay per visit + 20% (<i>deductible waived</i>)	
Urgent Care	\$20 copay (<i>deductible waived</i>)	40%, after deductible
Prescriptions—Retail (30-day supply)		
Tier 1 drugs	\$10 copay	25% + retail copay
Tier 2 drugs	\$25 copay	
Tier 3 drugs	\$40 copay	
Tier 4 drugs (excluding Specialty drugs)	30% (\$200 max copay)	
Specialty Pharmacies	30% (\$200 max copay)	
Mail Order (90-day supply)		
Tier 1 drugs	\$20 copay	Not covered
Tier 2 drugs	\$50 copay	
Tier 3 drugs	\$80 copay	
Tier 4 drugs (excluding Specialty drugs)	30% (\$400 max copay)	
Specialty Pharmacies	Not covered	

Benefits At-A-Glance

Dental Plans

You and your eligible dependents have the opportunity to enroll in dental plans through Cigna. We offer a choice of a DHMO and a DPPO.

Cigna Dental Plan Options				
Feature or Service	DHMO Network Only	DPPO		
		Advantage Network	DPPO Network	Out-of-Network
Deductible (ind/fam)	None	\$50/individual; \$150/family		
Ded waived on Preventive?	N/A	Yes	No	No
Annual Max	None	\$1,500/individual		
Preventive Services	No charge	No charge (deductible waived)	20%, after deductible	20%, after deductible
Basic Services	Per copay schedule	20%, after deductible	20%, after deductible	20%, after deductible
Major Services	Per copay schedule	50%, after deductible	50%, after deductible	50%, after deductible
Orthodontia		50% to \$1,500		
Child (to age 19)	\$1,608	Lifetime maximum		
Adult	\$1,800			

Voluntary Vision Plan

You may elect vision coverage through VSP for your eyewear and eye care needs.

VSP Voluntary Vision Plan		
Benefits	Network	Non-Network
Exam (Every 12 months)	\$10 copay	Plan pays up to \$45
Lenses (Every 12 months)	\$25 copay	Plan pays \$30-\$100
Frames (Every 24 months)	Plan pays up to \$130	Plan pays up to \$70
Contact Lenses* Fit & Follow Up Exams Elective Medically Necessary	Up to \$60 copay Plan pays up to \$130 Covered in full	No benefit Plan pays up to \$105 Plan pays up to \$210

*Contacts are available in lieu of frames and lenses

Vision Discounts

VSP Member Vision Care Savings Program

As a VSP member, you can save up to 20% off additional prescription eye glasses. Members can choose from private practitioners or leading retailers such as Lens Crafters, Target Optical, JC Penny Optical and most Pearle Vision locations.

Flexible Spending Accounts (FSA)

If you have out-of-pocket medical, dental, voluntary vision or dependent care (including elder care, if an IRS dependent) expenses, you may decrease taxes and increase your spendable income by enrolling in a Flexible Spending Account (FSA). SHDR, our FSA Administrator, offers two types of FSAs: a Health Care Account and a Dependent Care Account.

If interested, contact Human Resources for additional information.

Basic Life and AD&D Insurance

Community Action Partnership of Orange County provides employer-paid life and accidental death and dismemberment (AD&D) coverage in the amount of \$15,000. Your AD&D beneficiary(ies) for loss of life is the same beneficiary(ies) you choose for Basic Life Insurance.

Your Basic Life and AD&D benefit will reduce to 65% at age 65 and to 50% at age 70.

Basic Life and AD&D Example

Should you lose your life as the result of an accident, AD&D coverage would pay an additional benefit equal to \$15,000. Combined with your Basic Life benefit, your beneficiary would receive \$30,000.

Optional Life Insurance

You may purchase additional life insurance coverage for yourself, as well as for your spouse/domestic partner and/or child(ren) through Unum. You must elect this coverage in order to elect coverage for your dependents. Because this coverage is paid with after-tax dollars, beneficiaries will receive a non-taxable benefit. Refer to the Benefits Election Form for plan details and rates.

Coverage Type	Coverage Amounts
Employee	<ul style="list-style-type: none"> • Increments of \$10,000 • 1-5 times annual salary to maximum of \$500,000 • Guarantee Issue \$70,000
Spouse/Domestic Partner	<ul style="list-style-type: none"> • Increments of \$5,000 • Maximum benefit is the lesser of: 100% of employee-elected amount; or \$500,000 • Guarantee Issue \$25,000
Children (to age 26)	<ul style="list-style-type: none"> • Increments of \$10,000 • Children live birth to six months: \$1,000 • 6 months to 26 years: benefit is the lesser of 100% of employee-elected amount; or \$10,000 • Guarantee Issue: \$10,000
Age Reduction Schedule (benefit reduces from original amount at specified age)	<ul style="list-style-type: none"> • To 65% at age 65 • To 50% at age 70 • Benefits terminate at retirement

Voluntary Products

Community Action Partnership of Orange County provides an opportunity for you to purchase additional voluntary products on an individual basis through Colonial.

The options are: Accident Coverage, Cancer Wellness/ Security Insurance, Critical Illness Coverage, Term Life Insurance, Universal Life Insurance (Long-Term Care rider available with purchase of this plan)

Premiums for all of these plans except the Medical Bridge Coverage will be payroll deducted on an after-tax (post-tax) basis so that the benefit is not taxed.

If interested, contact our Colonial representative (contact information listed on next page). All communication following enrollment will be handled directly with Colonial on an individual basis.

Benefits At-A-Glance

Helpful Contacts

Plan Type	Group Numbers	Telephone Numbers	Website or Email Address
Medical - Blue Shield Trio Network HMO	W0064865	855.829.3566	www.blueshieldca.com
Medical - Blue Shield Full Network HMO	W0064865	888.256.1915	www.blueshieldca.com
Medical - Blue Shield PPO	W0064865	888.256.1915	www.blueshieldca.com
Dental - Cigna DHMO	3334955	800.244.6224	www.cigna.com
Dental - Cigna DPPO	3334955	800.244.6224	www.cigna.com
Voluntary Vision - VSP	010-40915	800.877.7195	www.vsp.com
Life Insurance - Unum	Basic: 631152-001 Optional: 635113-001	800.421.0344	www.unum.com
Flexible Spending Accounts - SHDR	N/A	800.768.4873 or 800.930.2441	www.SHDR.com
Voluntary Products - Colonial	N/A	949.679.4415	Email: drackliffe@cox.net

Other Helpful Websites

Agency for Healthcare Research & Quality	www.ahrq.gov
American Medical Association	www.ama-assn.org
Medi-Cal	www.medi-cal.ca.gov
Merck Manual of Medical Information	www.merck.com
National Institutes of Health	www.nih.gov
National Library of Medicine	www.nlm.nih.gov
Covered CA	www.coveredca.com



Please contact the Human Resources department with any questions regarding completion of the enrollment or change forms or any plan questions you may have.

Complete benefit program information is always available through the Human Resources department at ext. 3617. Or, reference the share drive under HRShare in the Benefits Insurance Information folder.