

☀ **Summary of Benefits Program**

MiraCosta College offers an array of benefits to employees working 20 or more hours per week in a benefit eligible position. The benefits program provides 100% district paid medical, dental and vision premiums for all eligible employees/retirees and their eligible dependents.

Kaiser health plan option includes a \$250 monthly benefit allowance.
PPO health plan option includes a \$75 monthly benefit allowance.

Employees may use the benefit allowance to purchase voluntary benefit elections and/or allocate the funds to a Section 125 flexible spending account (health care and/or dependent daycare expense reimbursement).

☀ **Medical Benefits**

Employees must elect medical coverage; dependent coverage is optional. Eligible dependents are: spouse, domestic partner* and children to age 26.

There are two health plans to choose from. **Please review the Health Plan Comparison for more details.**

Kaiser - HMO

\$10 Office visit co-pay
\$10 Prescription co-pay

Consortium Health Plan - PPO

Plan offers two levels of coverage based on doctor of choice.

PPO Provider Network:

Plan Pays 80%, Employee Pays 20%
\$25 Office visit co-pay
Annual Deductible: \$300 Individual / \$900 Family
PPO Provider Network: www.cigna.com (Cigna Provider Network)

Non-member Provider Coverage:

Plan Pays: 60%** , Employee Pays: 40%
Annual Deductible: \$550 Individual / \$1,650 Family

Annual Out-of-Pocket Maximums:

\$3,000/member or \$6,000/family for in-network services***
\$6,000/member or \$12,000/family for out-of-network services***

Prescriptions: (30-day supply)

\$10 Prescription co-pay (generic meds)
\$25 Prescription co-pay (preferred meds)
\$40 Prescription co-pay (non-preferred meds)

* See Human Resources for Domestic Partner Eligibility Criteria

** Based on Usual Customary Reasonable Charges for Services

**** Out-of-Pocket Maximums include Office Visit Co-pays, Deductibles and 20% / 40% Co-insurance

☀ **Dental Benefits**

Employees must elect dental coverage; dependent coverage is optional. Eligible dependents are: spouse, domestic partner* and children to age 26.

Delta Dental PPO

80-90-100% (increasing 10% every year you receive services), \$2,500 annual maximum and two cleanings per person per year. Orthodontic services up to 50% or \$2,000 maximum per covered member. Can choose any dentist.

DeltaCare

Must use a DeltaCare dentist. No co-pays for office visits and no annual maximum. Other out-of-pocket expenses may apply depending on services. Coverage includes orthodontic services; cost varies depending on services used.

VOLUNTARY BENEFIT ELECTIONS

☀ **Vision Care**

Eligible dependents are: spouse, domestic partner* and children to age 26.

Vision Service Plan

\$15 Office co-pay
An eye exam, glasses or contacts every 12 months. Can choose member or non-member providers.

☀ **Life & Accidental Insurance**

Hartford

District pays for employee only \$100,000 group term life insurance policy. Employees may elect additional, voluntary life insurance (employee only) and/or accidental insurance (dependent coverage available).

☀ **Section 125 Flexible Spending Account**

National Benefit Services

Employees can elect to allocate pre-tax dollars through payroll deduction and/or a portion of their District benefit allowance to a flexible spending account to be used for the reimbursement of medical and/or dental out-of-pocket expenses and/or dependent daycare expense.

☀ **Other Voluntary Benefits**

MetLaw Legal Plan
Short-term & Long Term Disability Income Protection
AFLAC Cancer Indemnity Plan
Employee Assistance Plan (EASE Program)
Liberty Mutual Group Savings Program
UNUM Long Term Care Program