

All Personnel

HEALTH & WELFARE BENEFITS

Continuation of Coverage

Qualified District employees, their spouses, and/or their dependent children shall be offered the opportunity to continue health and disability 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
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)

A qualified beneficiary shall notify the District 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 or former spouse, may continue benefits until the earlier of any of the following events: (Health and Safety Code 1373.621; Insurance Code 10116.5)

HEALTH & WELFARE BENEFITS (continued)

Continuation of Coverage (continued)

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, five years from the date on which continuation coverage was scheduled to end for the spouse
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 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)

Disability Applicants

When disabled by an injury resulting from a violent act sustained while performing their job duties, certificated and classified employees 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)

Retired Certificated Employees

Any former certificated employee who retired from the District under any public retirement system and his/her spouse/registered domestic partner shall be permitted to enroll in the health and welfare and/or dental care benefit plan currently provided for certificated employees. The plan also shall be available to any surviving spouse/registered domestic partner of a former certificated employee who either retired from the District or was, at the time of death, employed by the District and a member of the State Teachers' Retirement System. (Education Code 7000)

AR 4154(c)  
AR 4254(c)  
AR 4354(c)

HEALTH & WELFARE BENEFITS (continued)

Retired Certificated Employees (continued)

A retired certificated employee or surviving spouse/registered domestic partner shall be allowed to enroll in the coverage within 30 days prior to losing the District's active employee coverage. (Education Code 7000)

If a retired certificated employee or surviving spouse/registered 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.