Los Rios Employee Benefits New Hire Enrollment Guide

LOS RIOS COMMUNITY COLLEGE DISTRICT

ARC AMERICAN RIVER COLLEGE

EST. 1970 COSUMNES RIVER COLLEGE

FOLSOM LAKE COLLEGE

EST. 1916 SACRAMENTO CITY COLLEGE

Welcome to Los Rios!

At Los Rios, we truly appreciate the contributions our employees make to cultivate a community of learning and success.

That's why we strive to provide a comprehensive, competitive benefits package that offers you and your family flexibility and security each year.

This presentation will walk you through the benefits available to you and provide directions on how to enroll in coverage.

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Terms to Know

- **Premium:** The amount of money that's paid for your health insurance every month. Los Rios pays a portion of this amount and you pay the rest.
- **Deductible:** The amount of money you need to pay out-of-pocket before your insurance begins contributing money to your health care costs.
- **Network:** A group of doctors, hospitals, labs and other providers that your health insurance contracts with so you can make visits at a pre-negotiated (and often discounted) rate.
- **Copay:** A predetermined dollar amount you pay for visits to the doctor, precriptions and other health care (as specified by your plan).
- **Coinsurance:** The percentage you pay for the cost of covered health care services after you've met your deductible. For example, if the coinsurance under your plan is 10%, you would pay 10% of the cost of the service and your insurance would pay the remaining 90%.
- **Out-of-Pocket Maximum:** The cap on your out-of-pocket costs for the plan year. Once you've reached this amount, your plan will cover 100% of your qualified medical expenses for the plan year.

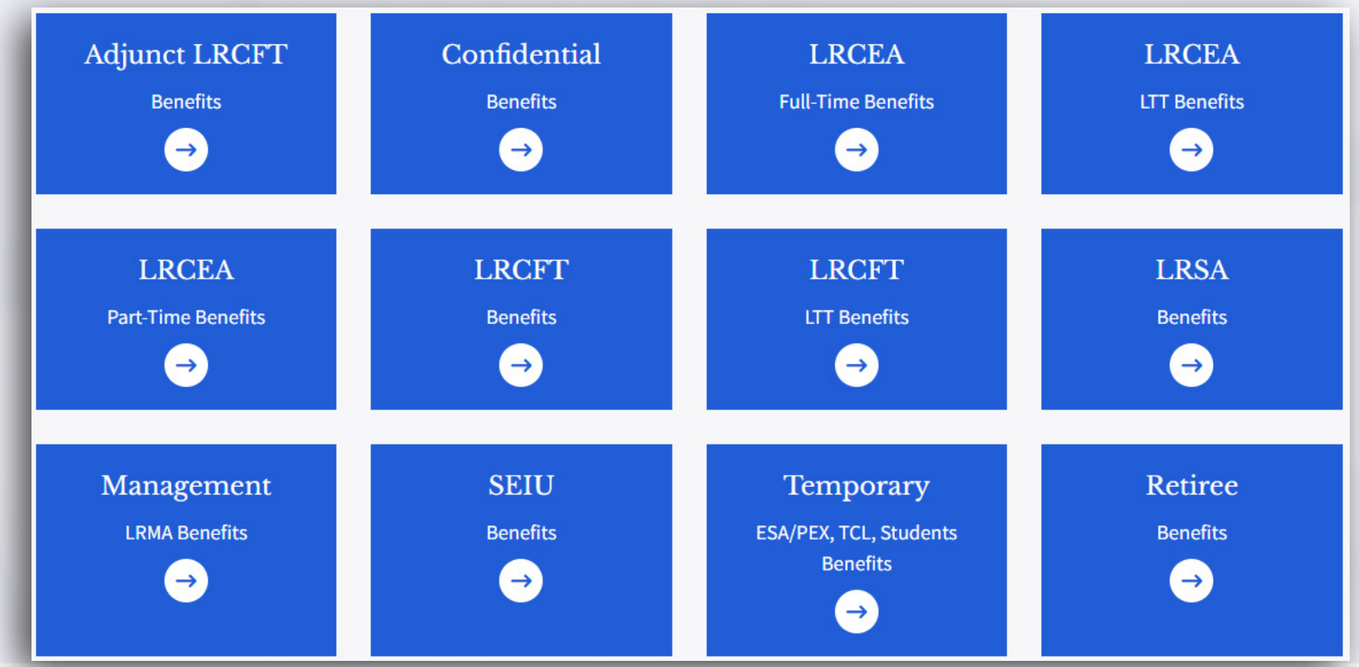
Employee Benefits Online

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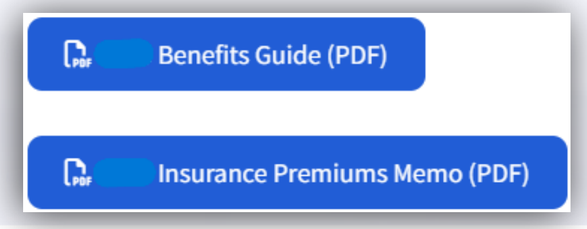
To learn more about the benefits offered to Los Rios employees, please visit the Benefits website at https://employees.losrios.edu/benefits

As an employee of the District, you are required to either enroll or waive medical and dental coverage. This is all done through the **Benefits Supersite.** All other benefits are available only upon enrollment, unless it is District paid and an automatic benefit.

Once you navigate to our Benefits website, select your employee group to learn more about the benefits available to you.



At the top of each page, you will find the Employee Benefits Guide. This guide is published for each fiscal/benefit year includes detailed information on all benefits available to our employees and their eligible dependents.



Benefits Counseling

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The District offers 30-minute virtual appointments with a Synergy Benefits Counselor who can help guide you through your new-hire enrollment and answer questions related to the differences in health plans.

To make an appointment with a Synergy Benefits Counselor, please visit https://synenrollment.com/LosRiosnewhire

To prepare for your appointment, please be sure you have your beneficiary and dependent information ready including names, dates of birth, and social security numbers. You are welcome to bring your spouse to your appointment as well.



SYNERGY ENROLLMENT & BENEFITS

Benefits Help Desk

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Staffed by caring professional who know your insurance plans, the Benefits Help Desk is designed to be your personal benefits answer and support service for a wide range of insurance-related questions or issues throughout the year.

Benefits Support

- For general inquiries regarding ID cards, enrollment eligibility and provider network information, you will receive a prompt response.
- For complex benefits issues involving claims, the Benefits Help Desk will contact the insurance carrier on your behalf and require that you complete a HIPAA authorization form. Then, the Benefits Help Desk will work with you directly until the issue is resolved.

Free and Confidential

- Spouses and family members are invited to use the Benefits Help Desk as well. Additionally, we have Spanish-speaking staff and access to the AT&T Language Line, which provides assistance in over 170 languages.

Contact the Benefits Help Desk

Phone: (877) 373-6535
from 5am-5pm PST, Monday - Friday

Email: epichelpdesk@epicbrokers.com

Eligibility

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As a permanent employee with an assignment of 0.50 FTE or greater, you and your dependents are eligible for benefits.
If you are a part-time employee, the District contribution for your medical benefits will be prorated based on your percentage to full-time.

Eligible dependents include your:

- Spouse or domestic partner
- Unmarried children to age 25 for dental insurance, regardless of student status
- Children to age 26, regardless of marital or student status for all other plans
- Unmarried children of any age if they are incapable of self-support due to mental or physical disability

You are required to provide proof of dependent eligibility at the time of enrollment such as a Marriage Certificate/Domestic Partnership Decree and a Birth/Adoption Certificate. If your dependent becomes ineligible for coverage, then you must contact the Employee Benefits Department within 31 days.

Due to Federal and State tax regulations, benefits provided to Domestic Partners are generally taxable and therefore deducted from your pay on an after-tax basis. Additionally, any premium contributions made by Los Rios on behalf of your domestic partner are generally considered taxable income to you. Please reference **Domestic Partner Policies and Procedures** for more information.

Premium Deductions

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Benefits premiums are paid through payroll deductions. Monthly premiums are paid a month in advance. For example, May payroll deductions pay for June coverage.

Nine and ten-month employees do not have deductions taken during the summer months. Because of this the annual amount is divided over ten months instead of twelve, this is referred to as the 10thly amount versus the monthly amount.



Because premiums are paid in advance, your first pay warrant with deductions could be duplicate or even triplicate depending on your hire date, when you enroll and when payroll closes for the month.

For example: If your hire date is April 30th and you do not enroll in coverage until May 29th, then you would have missed the April and May payroll dates and therefore your June pay would have triplicate deductions for May, June and July coverage.

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As a New Hire

Each new employee has 31 calendar days from their date of hire to enroll in benefits.

If you do not enroll within the 31-day window, you will not be able to enroll in benefits until the following open enrollment period.*

The effective date of benefits is the 1st of the following month after the date of hire. For example, if your hire date is May 5th, then your benefits will become effective on June 1st.

The exception to this is if your hire date falls on the 1st business day of the month. Then, your benefits will be effective retroactive to the 1st of the current month.

For example, if your hire date is July 1st, then your benefits will be effective as of July 1st.



***This is an IRS regulation; exceptions cannot be made for missed deadlines.**

During Open Enrollment

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Each year during open enrollment, held in the fall, you can enroll in or make changes to your benefits effective January 1st to December 31st.

It is recommended that you visit the benefits site and review and update your information even if you are not making any changes to your current elections. Doing so allows you to review and/or update the following:

- Monthly costs for coverages for the upcoming plan year
- Dependent details such as date of birth and social security numbers
- Beneficiary details for Life Insurance

If you are satisfied with your elections and do not wish to make any changes you do not need to take any action during open enrollment.

However, please note that premium amounts are negotiated annually and are subject to change. If you do not make changes during open enrollment, your benefits will simply roll over to the new plan year and the new premium amounts will be reflected on the first paycheck of the calendar year.

****Voluntary coverages such as Flexible Spending Account do NOT roll over automatically and MUST be elected each year during open enrollment.***

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Qualifying Life Event

Your benefits elections will remain in effect throughout the plan year unless you experience a change in status that affects eligibility for benefits or another qualified status change event (in accordance with Internal Revenue Code rules.)

If you do not make changes during the open enrollment period, your next opportunity to do so would be during next year's open enrollment unless you experience a Qualifying Life Event.

Examples of qualified life events include (but are not limited to) a change in the following:

- **Marital Status:** including marriage, death of a spouse, divorce, annulment or legal separation
- **Domestic Partnership Status:** including establishment or termination of the partnership
- **Number of Your Eligible Children:** including by birth, adoption, placement for adoption, or death
- **Change in Eligibility Status:** including aging out of coverage or a change of address

******You must log into the benefits supersite and complete the applicable enrollment changes and provide the required documentation within 31 days of the event***

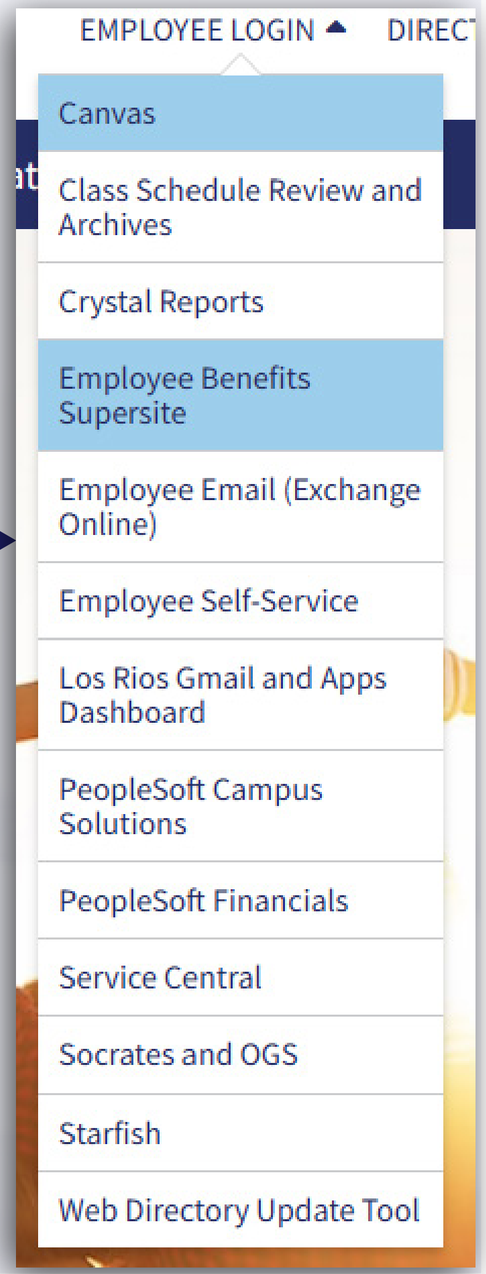
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Benefits Supersite

Regular employees with a permanent assignment of 0.5 FTE or greater can now manage their benefits 100% online!

Visit www.mybenesite.com/losrios for direct access OR you can access the Benefits Supersite through the Employee Login drop-down menu. Once there, you can view the following:

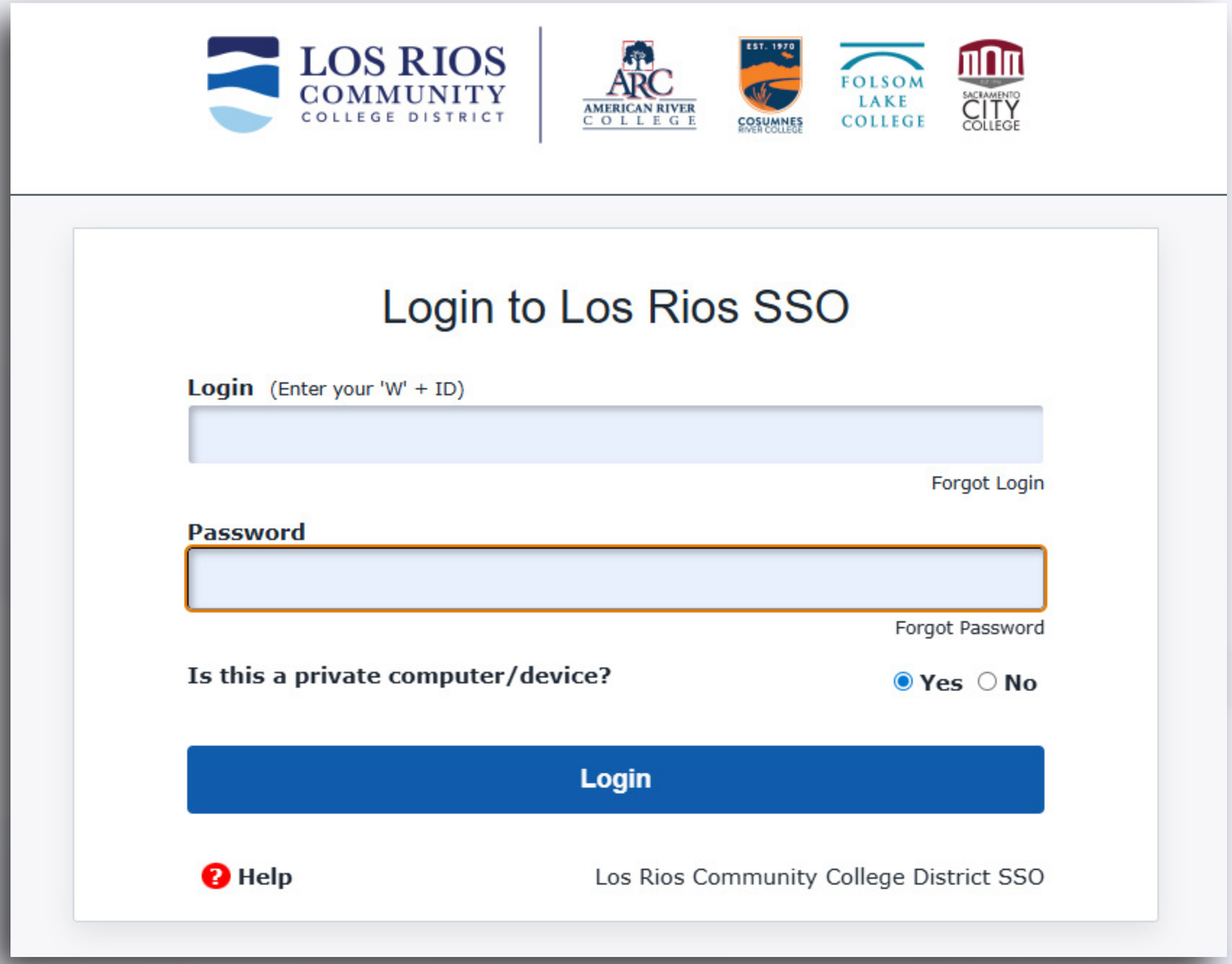
- Step-by-step enrollment guidance
- Cost per paycheck displayed for each elected benefit
- Add and manage covered dependents
- Update beneficiaries
- Review and submit final benefit elections
- Benefit summaries and proof of insurance for you and your dependents
- Insurance carrier information
- Member service information
- Provider search directories
- Forms and plan documents



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Logging In

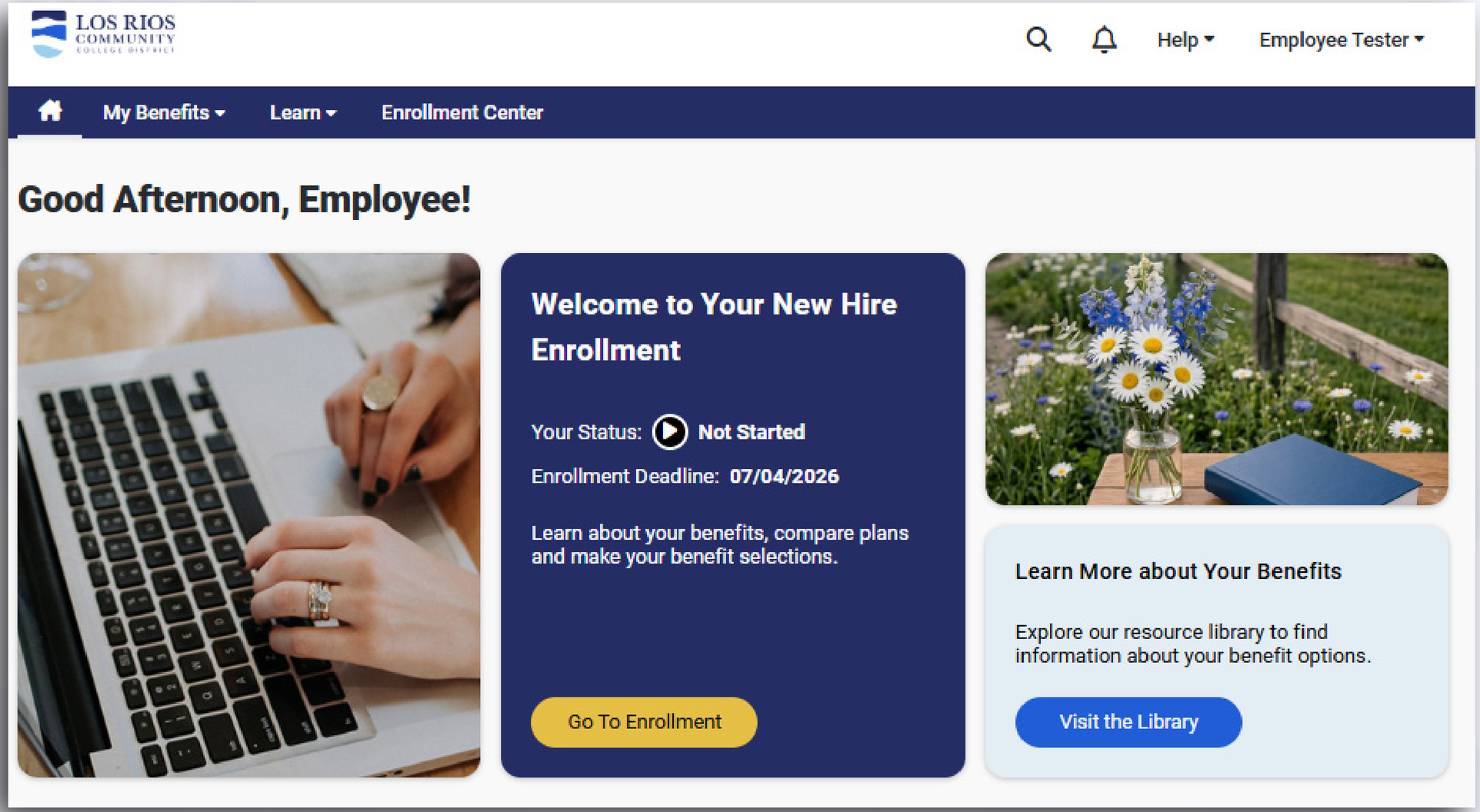
The Supersite uses a single sign on, so you will need your LRCCD employee ID (W number) and your password.



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Employee Dashboard

Once logged in, you can click on 'My Benefits' to navigate to your Benefits Summary or click on **'Enrollment Center'** to start an enrollment.

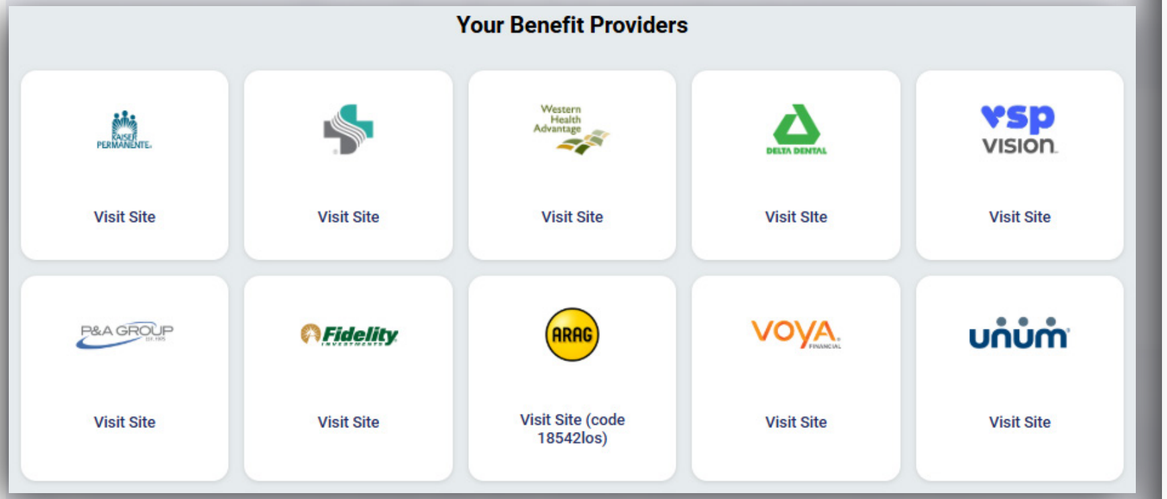


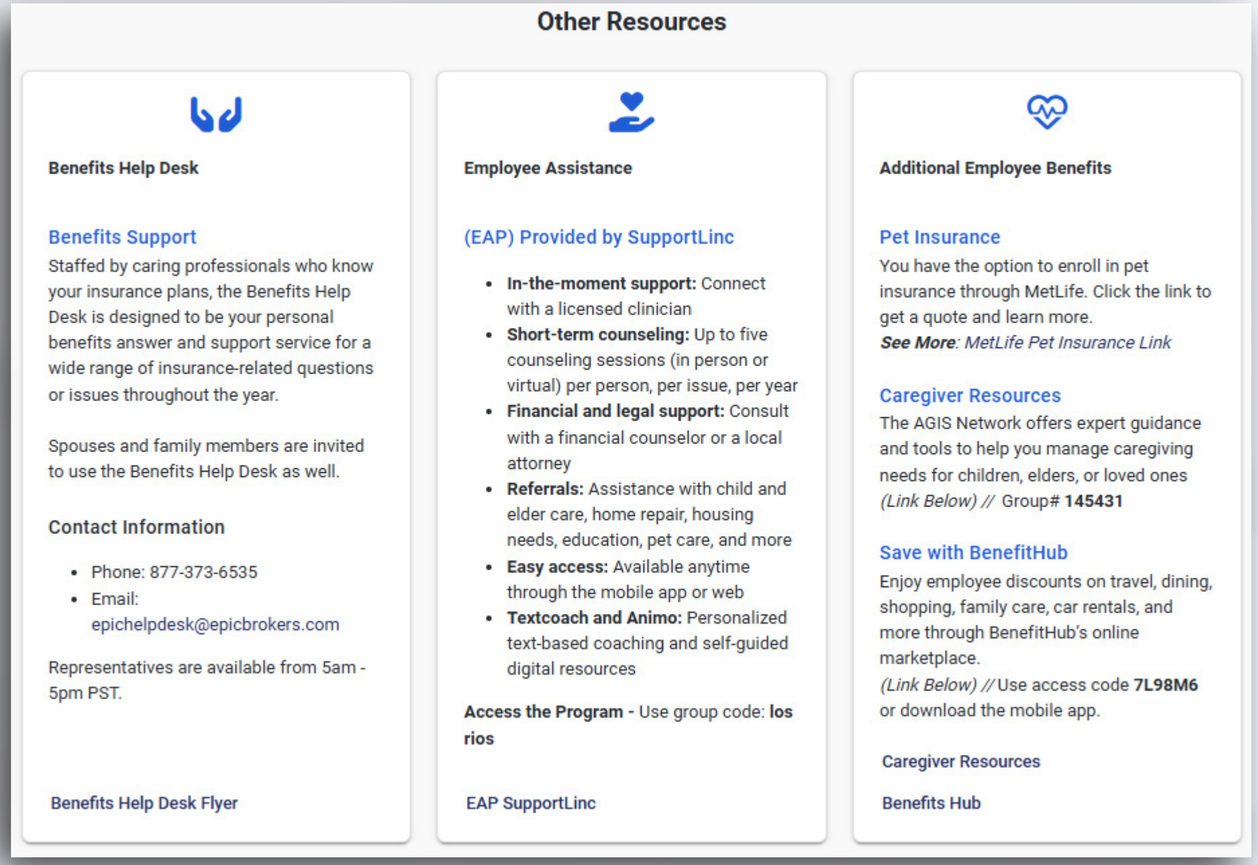
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Benefits Homepage

On the Benefits Homepage you can find Common Action tiles which will take you directly to the information listed on the tile. You can also find links to other helpful resources and information from our Benefits Providers.



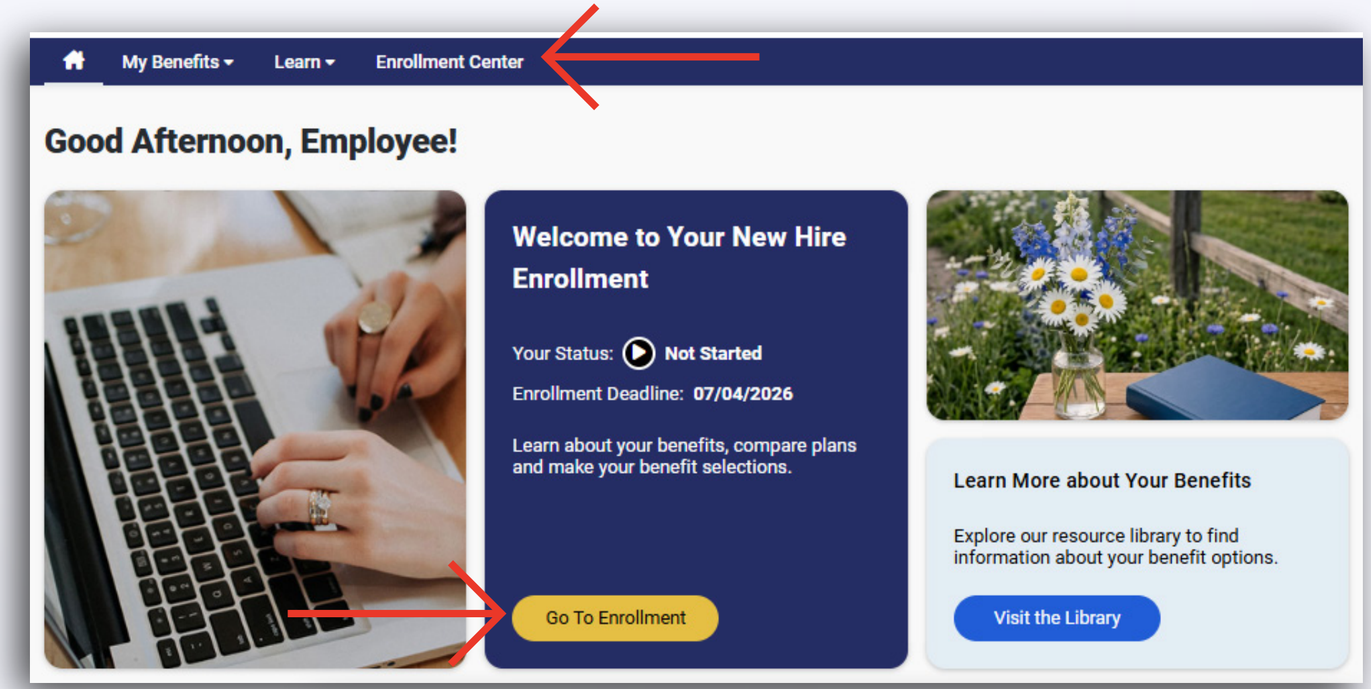


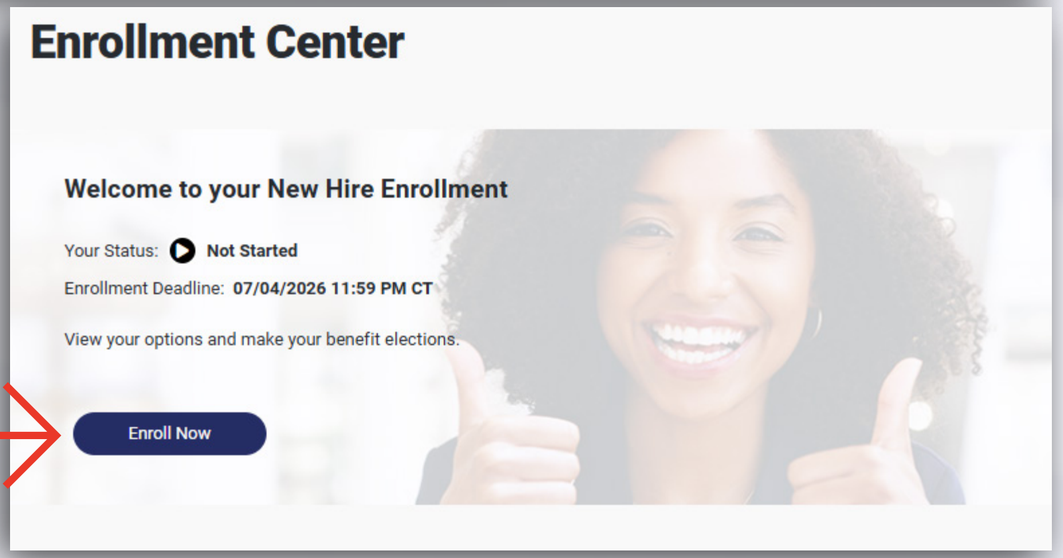


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Enrolling in Benefits

To start an enrollment, click on the yellow button on the Enrollment tile, or click the tab for **'Enrollment Center'**. Once in the Enrollment Center, click **'Enroll Now'**.



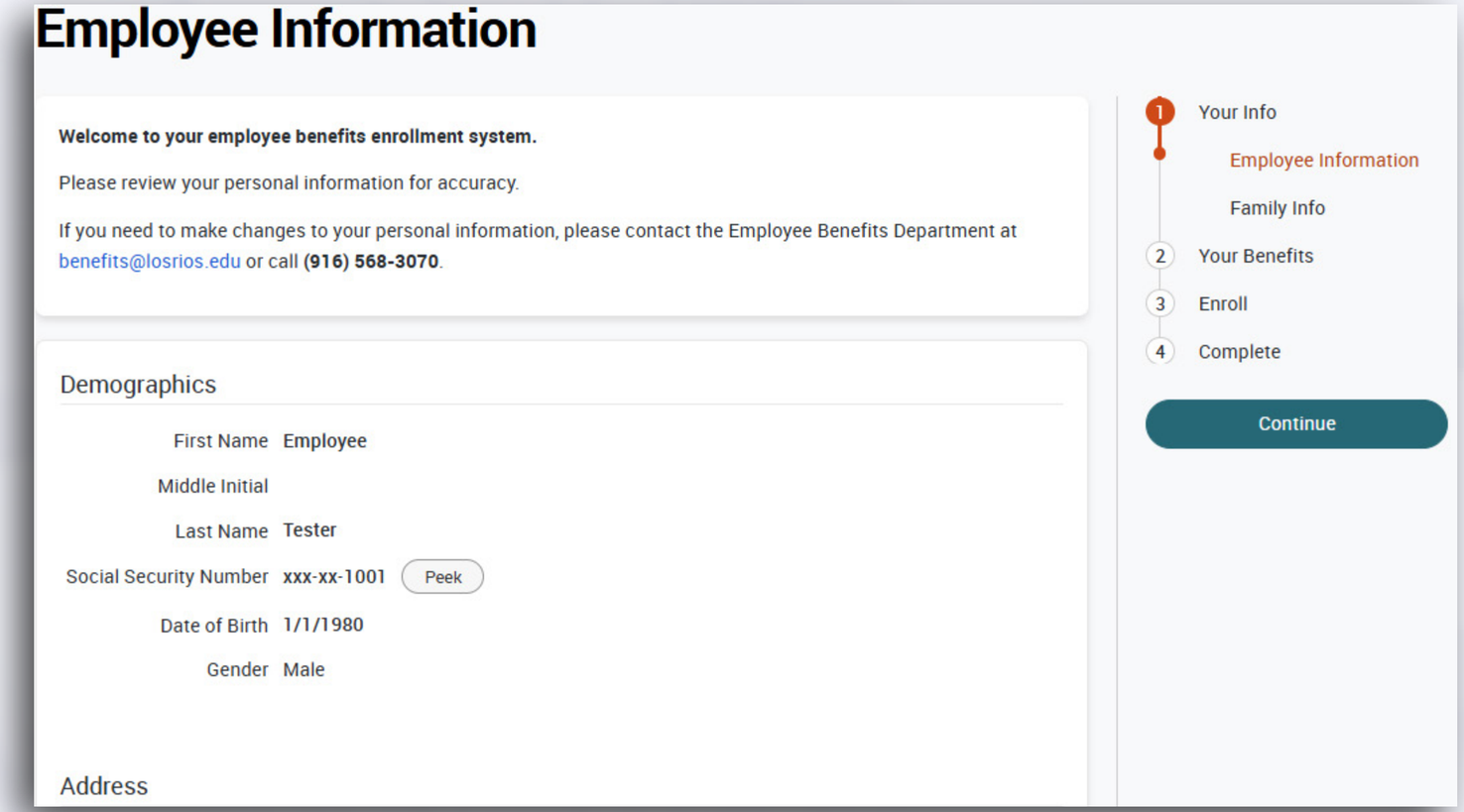


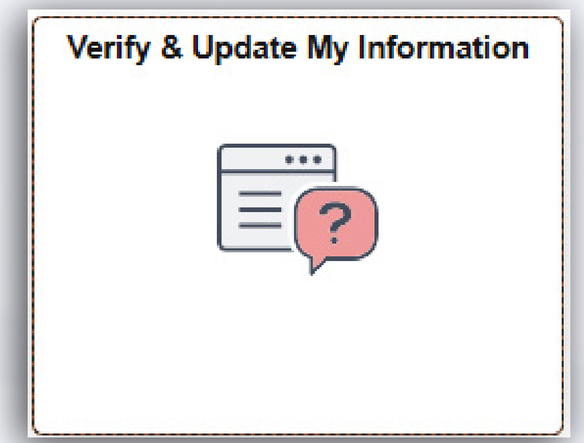
***Once you start an enrollment, you must complete the entire enrollment in one sitting. If you close your browser or lose your internet connection, your changes will not be saved.*

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Employee Information

Please review your personal information as this is what is on file with the District. You can edit your phone number and email address, but all other changes need to go through the Employee Self Service (ESS) at: ps.losrios.edu/psc/ess under "Verify & Update My Information". Or by using the p-113c form.



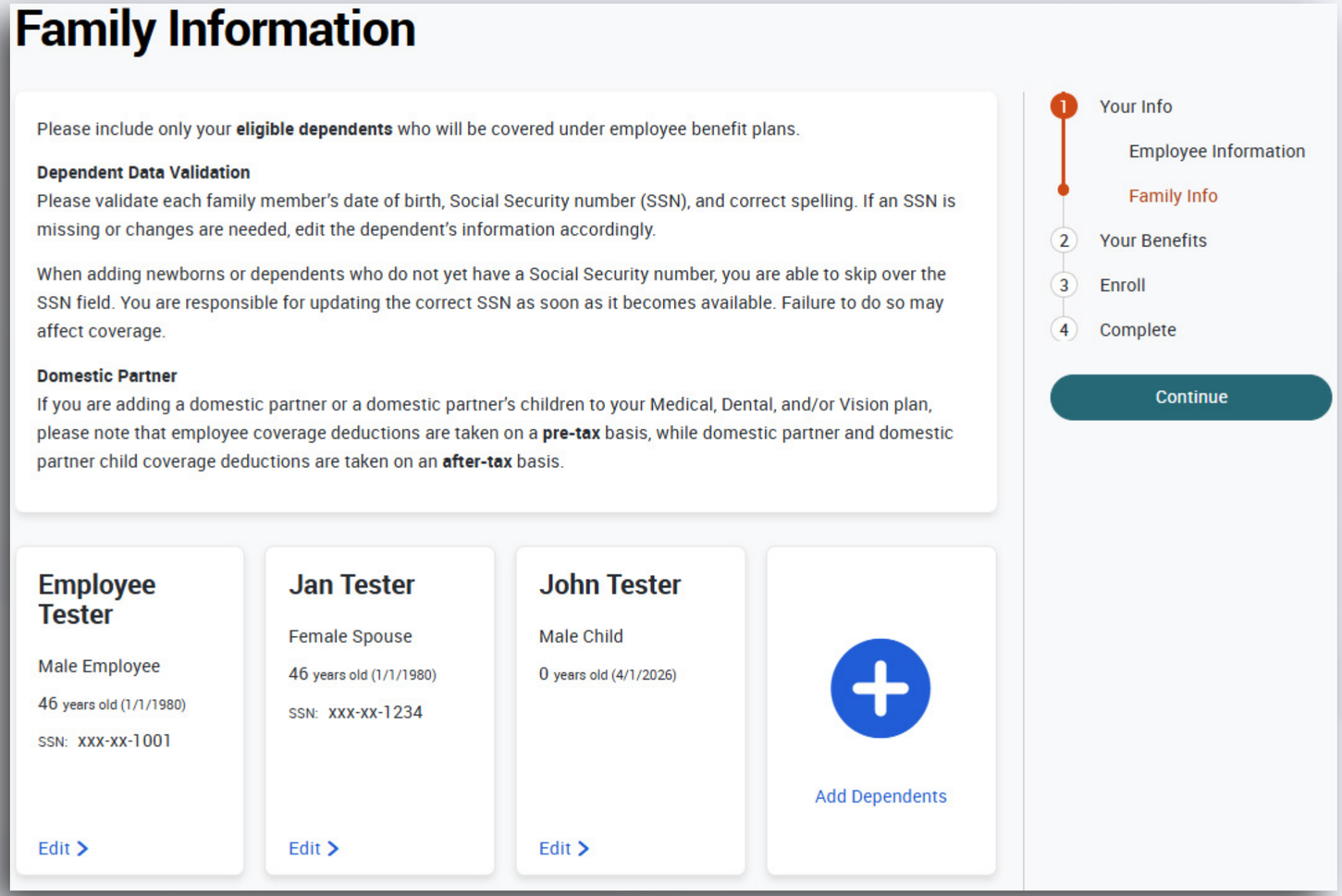


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Adding Eligible Dependents

Eligible Dependents include your:

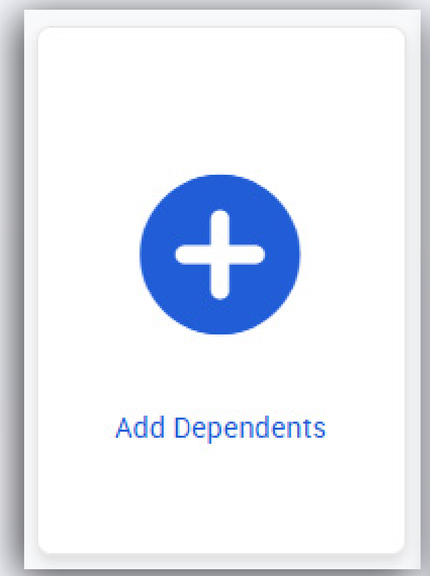
- Spouse or Domestic Partner
- Unmarried children under the age of 25 for dental insurance, regardless of student status
- Children under the age of 26, regardless of marital or student status for all other plans
- Unmarried children of any age if they are incapable of self-support due to mental or physical disability

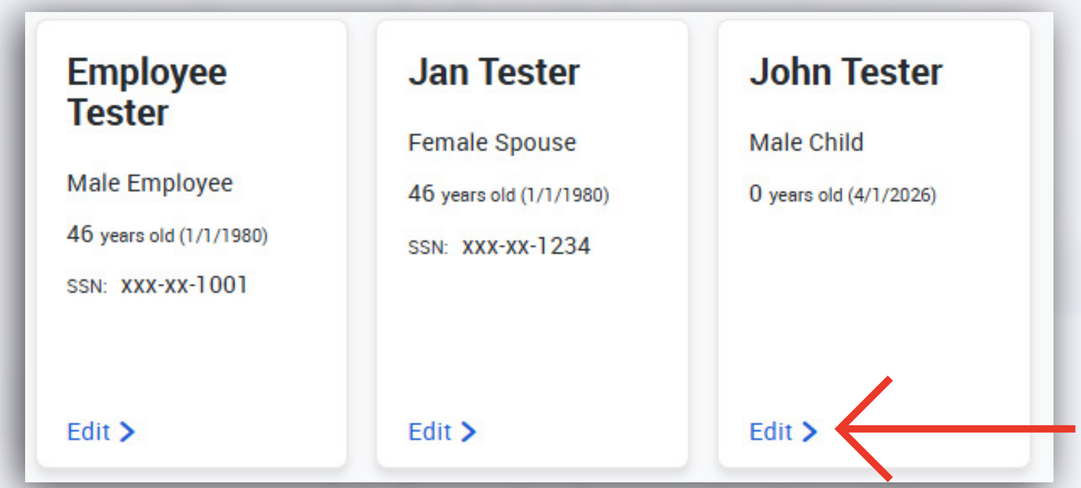


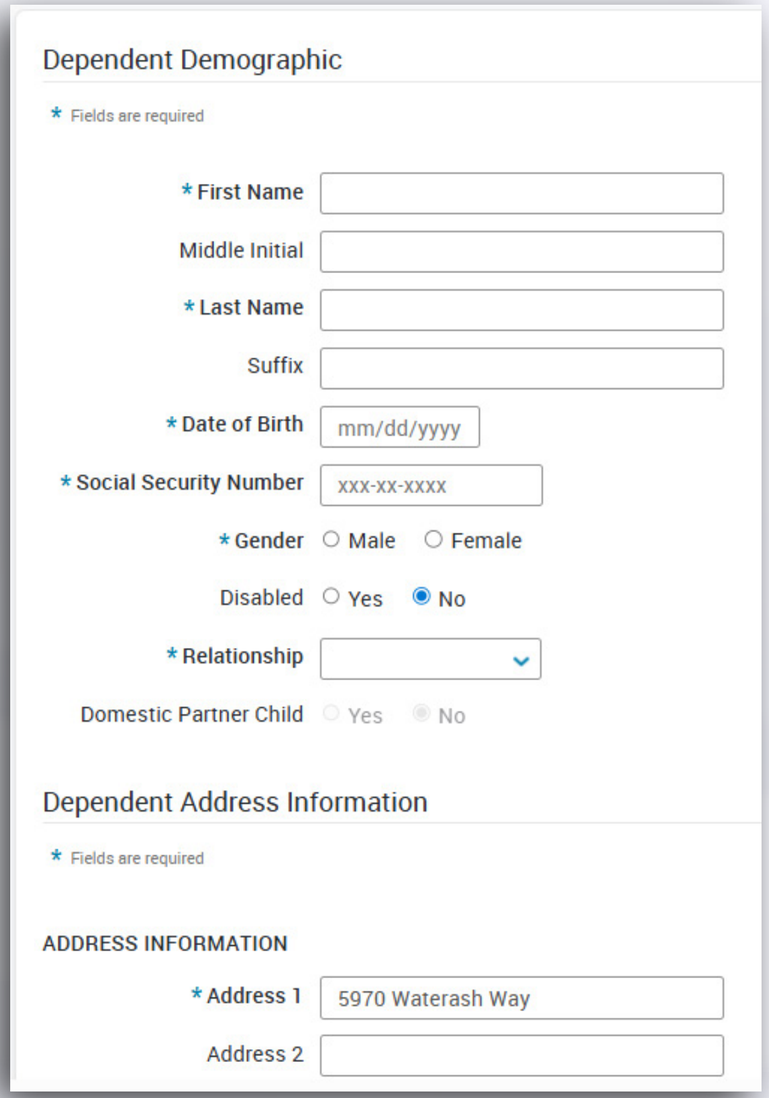
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Adding Eligible Dependents

To add a Dependent, click on **'Add Dependents'** then complete the required information under **'Dependent Demographic'**







Be sure to check each dependent's date of birth, Social Security Number (SSN) and correct spelling.

To make edits to an existing dependent, click 'Edit'

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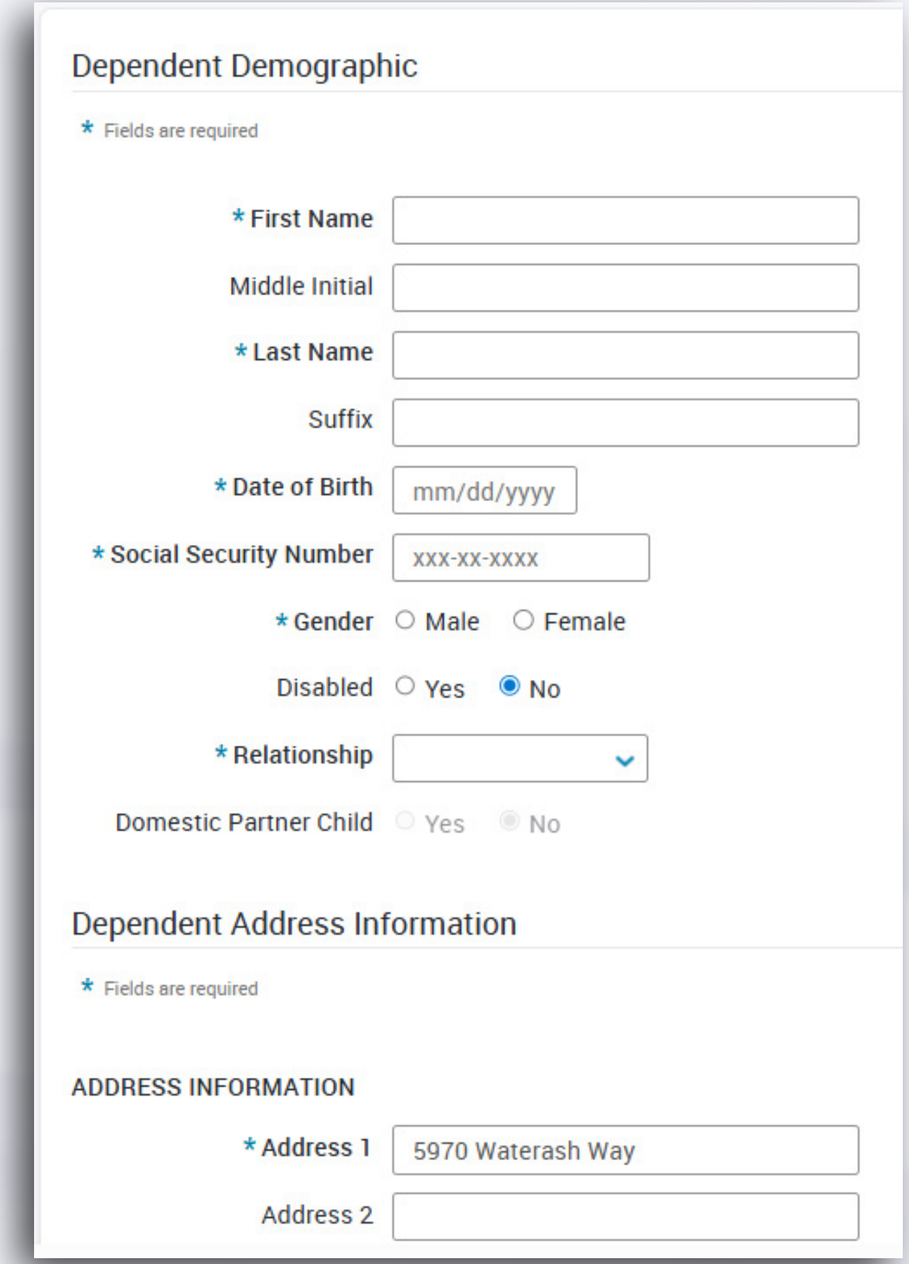
Adding a Spouse

When adding dependents, all fields with a blue asterisk (*) must be completed, including their Date of Birth and Social Security Number (SSN). Failure to enter all information will affect coverage and eligibility.

You must indicate the relationship, whether the dependent is a Spouse or a Domestic Partner.

*Please note that if adding a Domestic Partner, it is important to understand that your coverage will be deducted as ***pre-tax*** and your Domestic Partner's is deducted as ***after-tax*.**

Please see Domestic Partner Policies and Procedures for more information.



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Adding a Child

When adding dependents, all fields with a blue asterisk (*) must be completed. Failure to enter all information will affect coverage and eligibility.

You must indicate the relationship, whether it is your child or the child of a Domestic Partner.

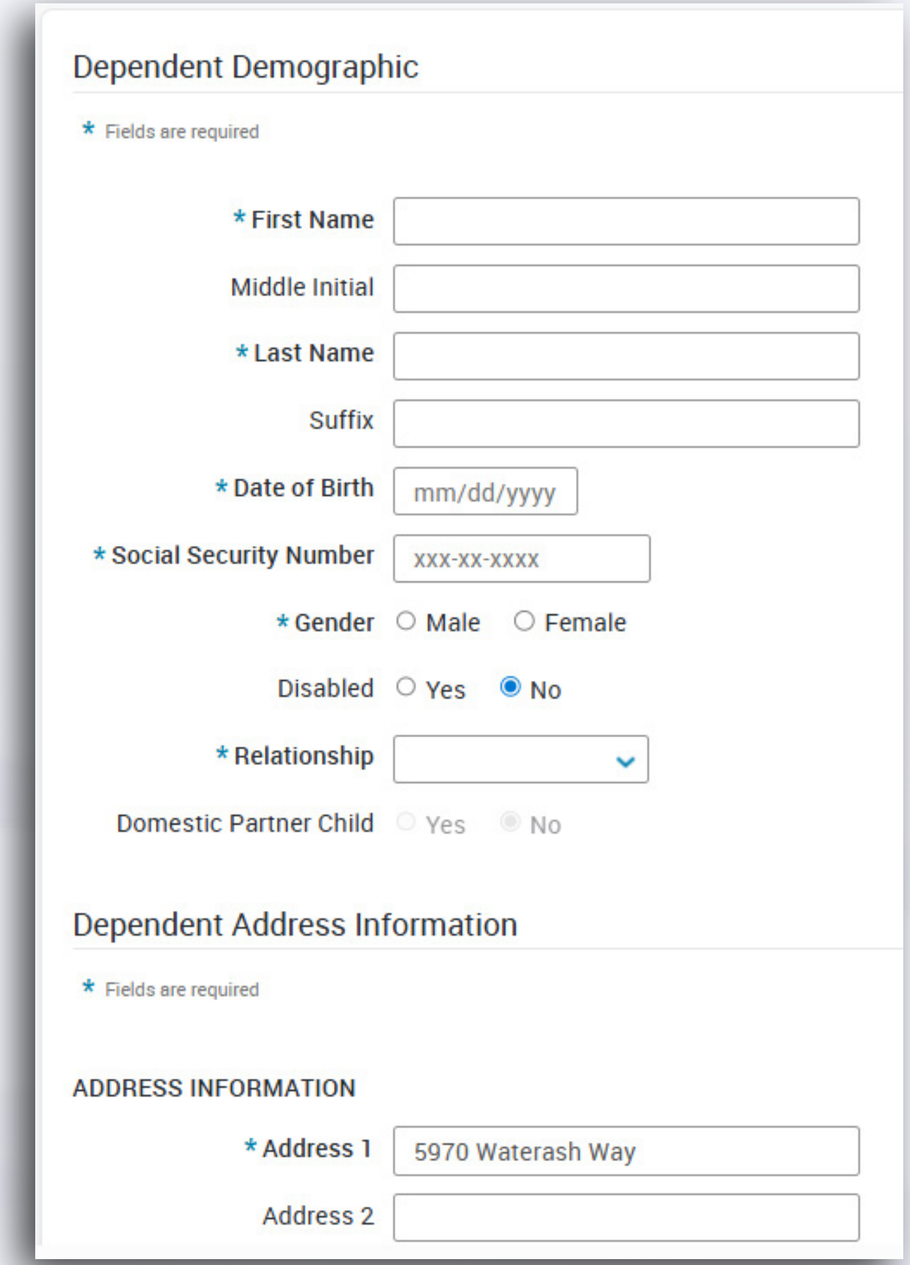
You will also need to indicate the Type of Dependent:

- Dependent Child
- Dependent Grandchild**
- Disabled Dependent

When adding newborns or dependents who do not have a Social Security Number (SSN) yet, please enter 000-00-0000 to save them and move onto the next step.

***Please note that you are responsible for updating the correct SSN as soon as it is available. Failure to do so may affect coverage.**

***Only Kaiser offers coverage for grandchildren as long as the parent of the child is also eligible and covered as your dependent as well.*



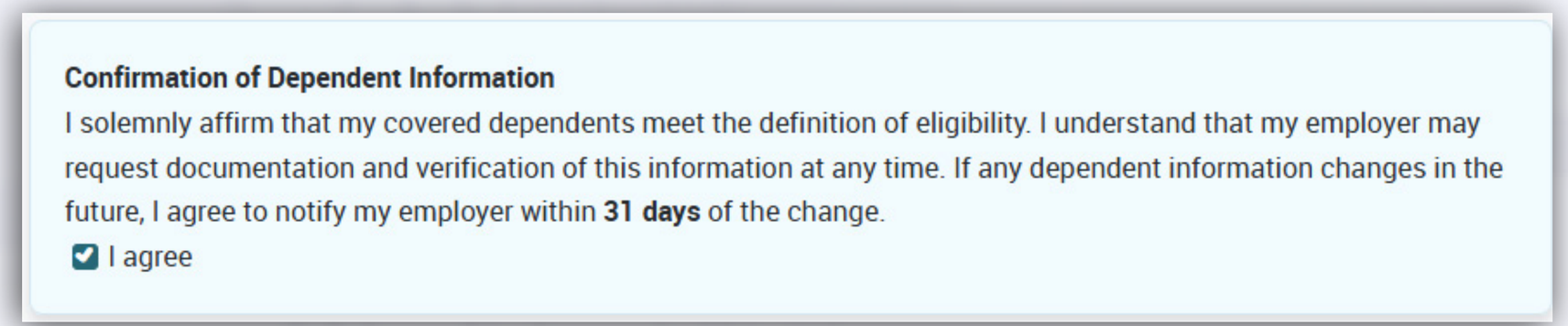
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Dependent Documentation

When enrolling dependents in coverage, you must provide the required documentation. Documentation is required at the time of enrollment and without it we are not able to approve coverage for your dependents.

If documentation is not provided within 31 days of your enrollment, your dependents will not be added to your coverage and your next opportunity to enroll would be during the following year's open enrollment period.

Documentation can be emailed directly to the Employee Benefits Department at benefits@losrios.edu or uploaded directly in Bswift. Please see the following slides for directions on uploading documents.



***Examples of acceptable eligibility documents include:*

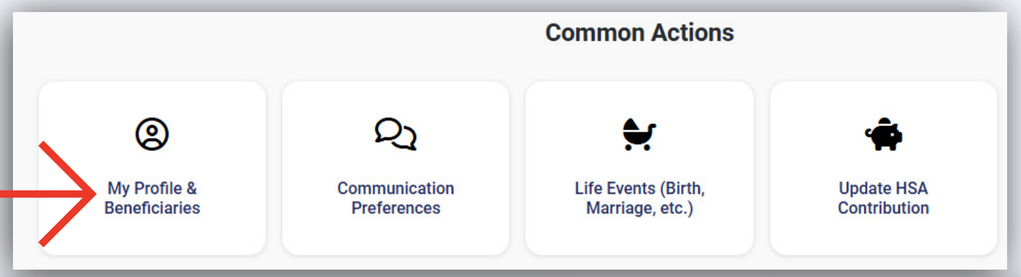
- *Marriage Certificate*
- *Domestic Partnership Decree*
- *Birth Certificate (if new born, a document from the hospital confirming the birth will suffice)*
- *Adoption Certificate*

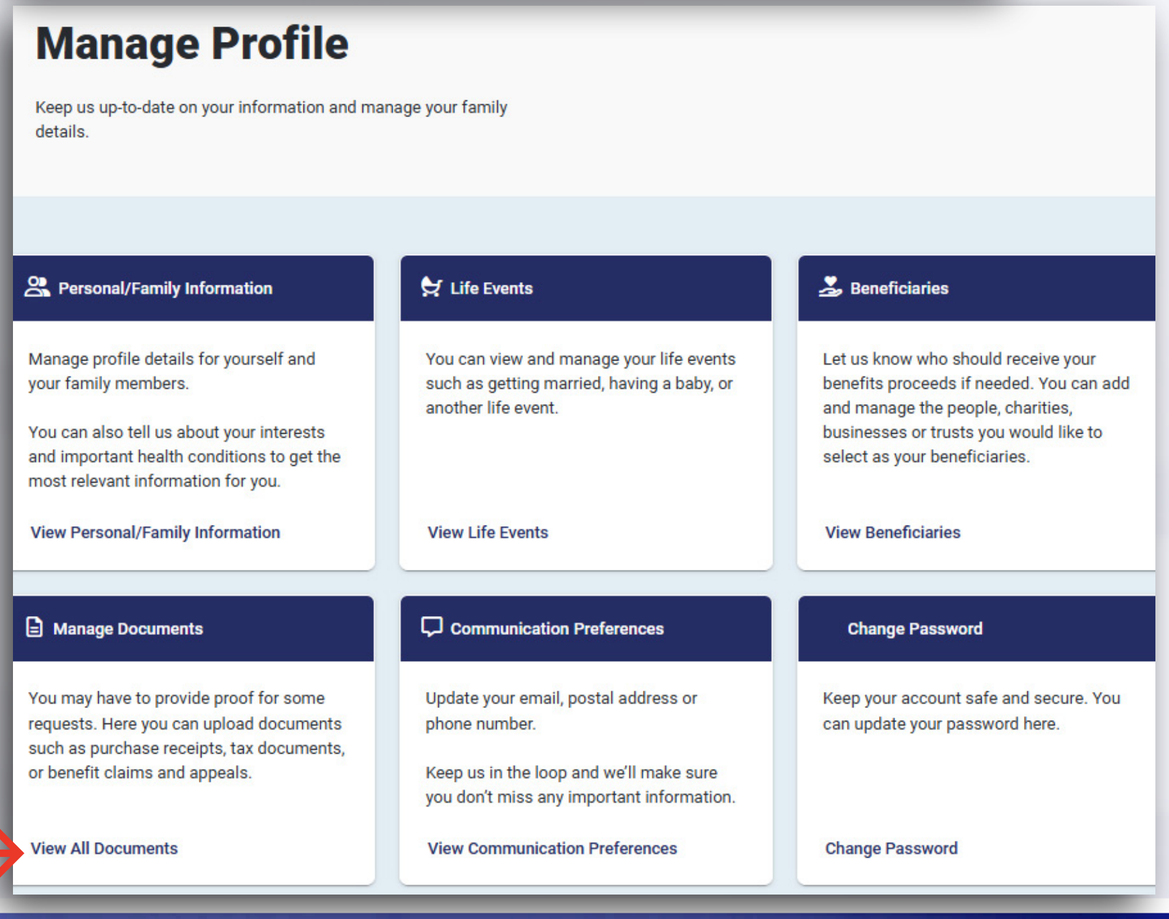
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Uploading Dependent Documents

From your Benefits Homepage, click on the **'My Profile and Beneficiaries'** tile

Next, click on '**View All Documents**' on the **'Manage Documents'** tile





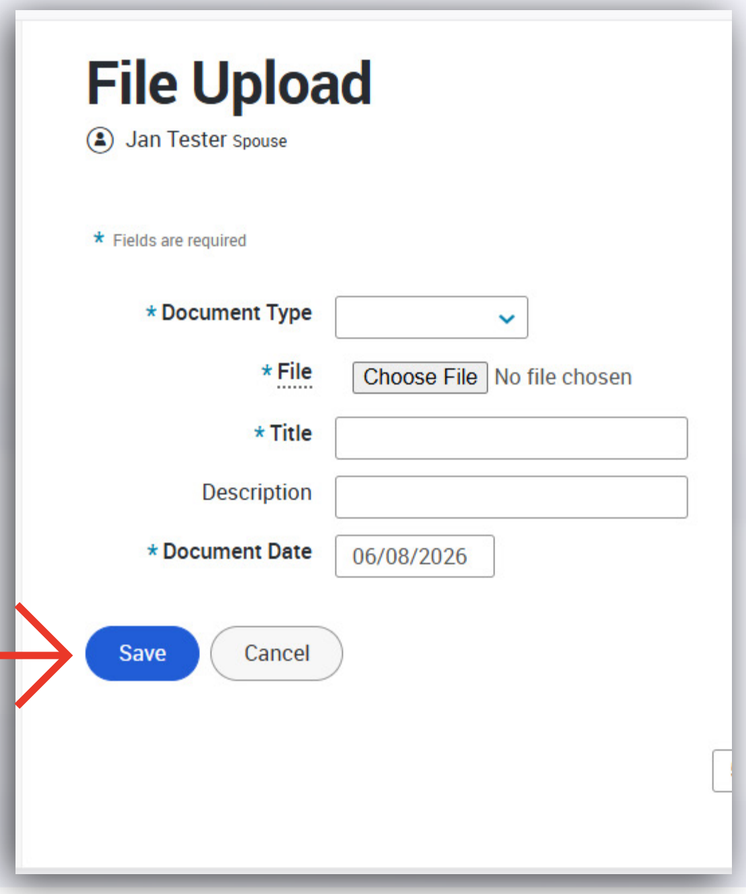
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Uploading Dependent Documents

From your **'Employee File'**, click on the dependent's documents you would like to view

Then, upload and save your document





If you are not able to upload your documents, please email them directly to benefits@losrios.edu.

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Medical Plans

Los Rios Community College District offers comprehensive medical and prescription plans. Your cost per paycheck is based on your plan choice and employee group. Los Rios has contracts with Kaiser Permanente, Sutter Health Plus and Western Health Advantage to provide medical coverage to employees who live and/or work within the Northern California service area.

The Los Rios Insurance Review Committee (IRC) meets with the insurance providers annually to negotiate the rates and services provided. The IRC includes a representative from each bargaining unit and works with EPIC, our insurance broker, who negotiates on our behalf.

All three providers offer both an HMO and a HDHP option. Kaiser also offers a DHMO plan.

KAISER PERMANENTE®

Sutter Health™

Western Health Advantage

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What is an HMO?

Key features of an HMO or Health Maintenance Organization plan are:

- Higher monthly premiums but no annual deductible
- Services provided for a flat fee (co-pay)
- Lower out of pocket limits
- Eligible to contribute to a Flexible Spending Account (FSA)
- *NOT* eligible to contribute to a Health Savings Account (HSA)

**For more information about covered services and estimated costs for our HMO plans, please click on the corresponding benefits summaries below:*

Kaiser Summary of Benefits and Coverage - Traditional HMO

Sutter Health Plus Summary of Benefits and Coverage - HMO

Western Health Advantage Summary of Benefits and Coverage - Premier (HMO)

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What is a DHMO?

Key features of a DHMO or Deductible Health Maintenance Organization plan are:

- Lower monthly premiums but with an annual deductible
- Some services provided for a flat fee (co-pay)
- Lower out of pocket limits
- Eligible to contribute to a Flexible Spending Account (FSA)
- Co-pays may be waived with double coverage
- *NOT* eligible to contribute to a Health Savings Account (HSA)

**Only Kaiser offers a DHMO plan. For more information about covered services and estimated costs for the DHMO plan, please click on the benefits summary below:*

Kaiser Summary of Benefits and Coverage - DHMO

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What is a HDHP?

Key features of a HDHP or High Deductible Health Plan are:

- Low or no monthly premium
- You pay up front for services until you reach the high deductible amount
- Eligible to contribute to a Health Savings Account (HSA)
  - Depending on the provider, the district or your bargaining unit may also contribute to your HSA
- Eligible to contribute to a Limited Purpose and Dependent Care Flexible Savings Account
  - CANNOT contribute to a Medical Flexible Savings Account

**For more information about covered services and estimated costs for our HDHP plans, please click on the corresponding benefits summaries below:*

Kaiser Summary of Benefits and Coverage - HDHP

Sutter Health Plus Summary of Benefits and Coverage - HDHP

Western Health Advantage Summary of Benefits and Coverage - HDHP Family

Western Health Advantage Summary of Benefits and Coverage - HDHP Self

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HMO vs HDHP - How to Decide

An HMO might be a better choice if:

- You have a family with young children
- You're planning to have a baby soon
- You have a chronic condition that needs ongoing treatment
- You take several prescription medications or one pricey drug
- You or your children engage in high-risk sports or hobbies
- You can't afford to pay a high deductible up front before your health plan starts paying for non-preventative services

A HDHP can make sense for you if:

- You're healthy and rarely get sick or injured
- You have no existing medical conditions
- You can afford to pay the high deductible out of pocket if an unexpected medical expense arises
- You want to be eligible for the tax advantages of an HSA

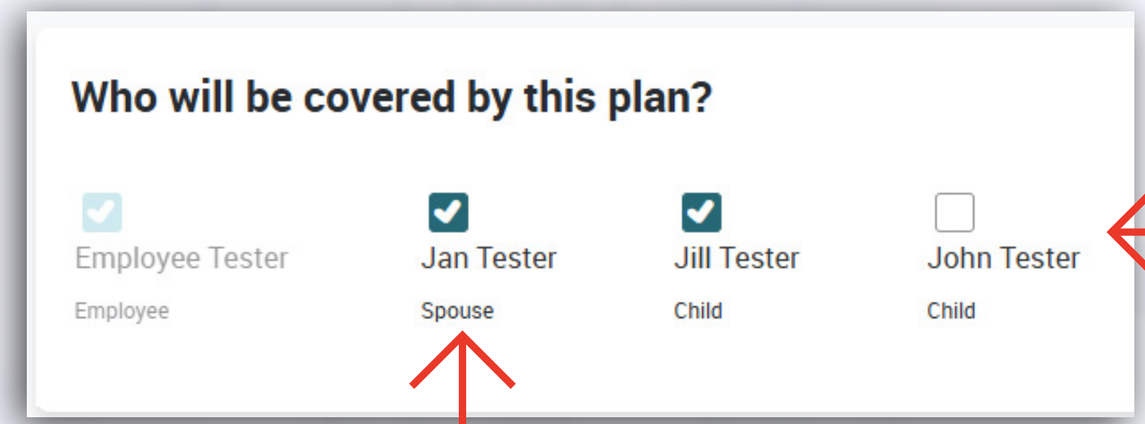
**For more information about HDHP and HSA, please visit our website: HDHP and HSA Information*

Selecting Covered Members

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On the medical page you will need to select the members (employee and dependents) you wish to have coverage. Employees must be enrolled for a dependent to be enrolled as well.

Please carefully review your options to ensure that the dependent(s) you wish to enroll and selected by checking the box next to their name. Your next opportunity to make changes to benefits, including dependents, will be during the next open enrollment period or within 31 days of a qualifying life event.



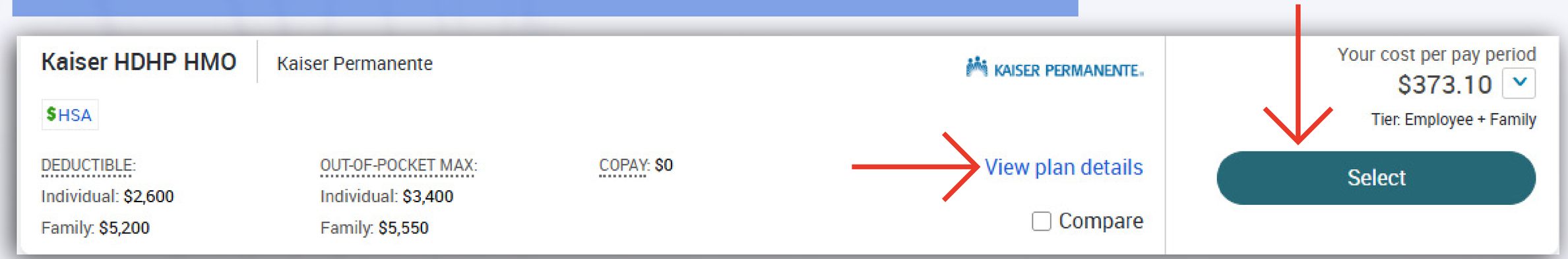
Name is ***NOT*** checked, so they will ***NOT*** have coverage

Name is checked, so they will have coverage

Selecting A Medical Plan

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As an employee, you are required to either enroll or waive medical and dental coverage. If you choose to enroll in medical, under the plan of your choice click the 'Select' button.



Under each plan choice, you can also click on 'View plan details' sections for additional plan information such as:

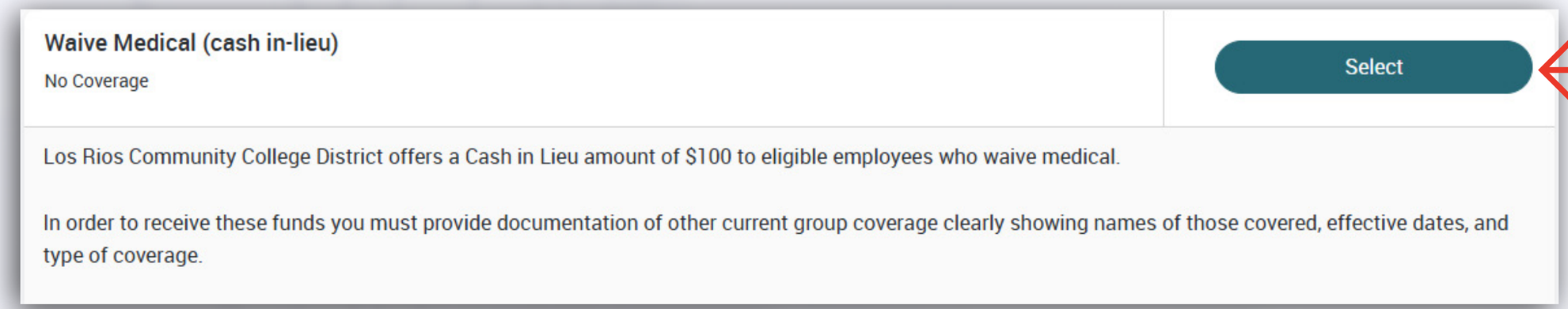
- Benefits summaries
- Provider Search Directories
- Form and Documents
- Links to Provider websites

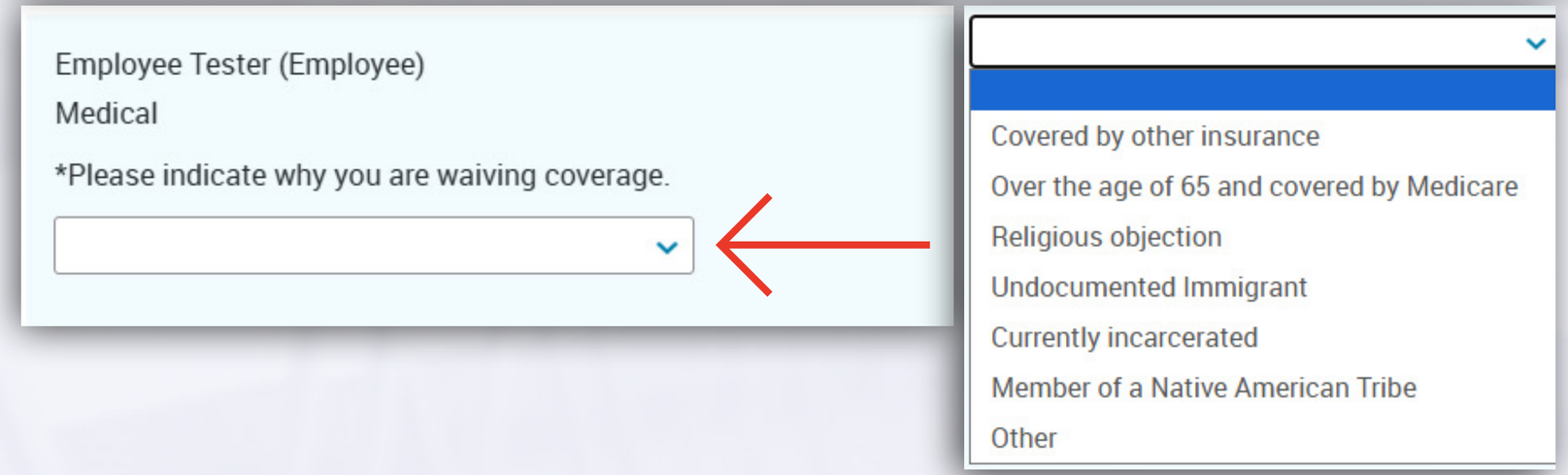
Waiving Medical Coverage

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If you choose to waive medical coverage, you will need to provide a reason for waiving and proof of other coverage.

Select the 'Waive Medical' option. A new screen will open with a set of options asking you to provide your reason for waiving.



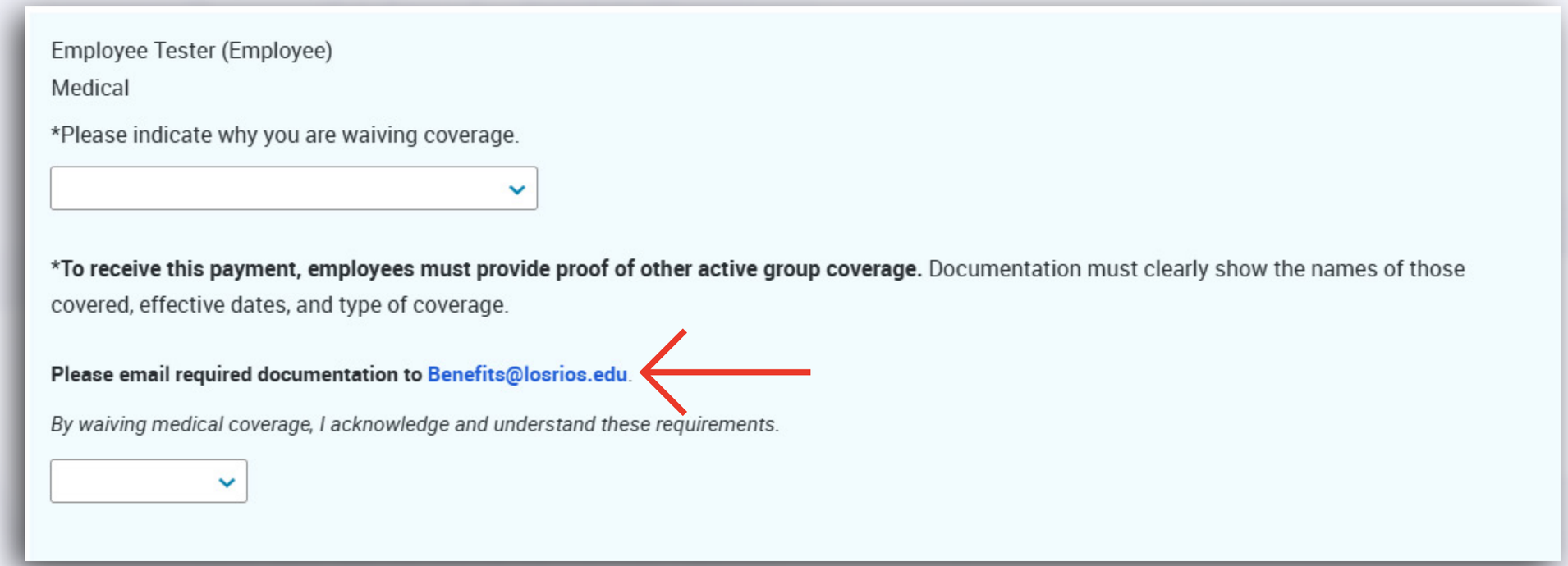


Waiving Medical Coverage

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You will also need to upload documentation or proof of other coverage. Please reference the 'Uploading Documents' slides. Documentation can include:

- A copy of your membership card
- Letter on an employer's/group's letterhead, dated and signed by a company official within the last 30 days
- Medicare coverage: A copy of your membership card showing both Medicare parts A and B effective dates
- Medicaid: Official Medicaid letter dated within the last 30 days.



***Depending on your bargaining unit, you may also participate in the Cash-in-Lieu Program when you waive medical benefits.*

Cash-in-Lieu Program

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Participating Bargaining Units: LRCFT*, Confidential, LRCEA (FT), LRMA, SEIU, Contract Managers, Board Members

LTT and Adjunct employees are not eligible for cash-in-lieu

Receive cash-in-lieu in the form of $100 in taxable monthly income if you waive medical coverage and provide documentation of other coverage.

To participate you must:

- Waive medical coverage through the Benefits Supersite
- Provide proof of other coverage either by uploading to the Benefits Supersite or submitting via email to benefits@losrios.edu
  - Documentation must clearly show the names of those covered, effective dates of coverage and the type of coverage.
  - If you are a covered dependent of another Los Rios Employee (i.e. Spouse) you can download a Benefits Confirmation Statement from the Benefits Supersite to submit as proof.

***Must Resubmit Documentation Annually**

***Cash-in-Lieu is NOT retro-active**

***Cash-in-Lieu payments begin with the payroll following submission of proof of other coverage**

Health Insurance Marketplace

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Even if you are offered health coverage through your employment, you may have other coverage options through the Health Insurance Marketplace.

What is the Health Insurance Marketplace?

- The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. It offers "one-stop shopping" to find and compare private health insurance options in your geographic area.

Can I Save Money on my Health Insurance Premiums in the Marketplace?

- You may qualify to save money, but only if your employer does not offer coverage, or offers coverage that is not considered affordable for you and doesn't meet certain minimum value standards. The savings you're eligible for depends on your household income.

Does Employment-Based Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

- Yes. If you have an offer of health coverage from your employer that is considered affordable for you and meets certain minimum value standards, you may not be eligible for Marketplace coverage

***For more information please visit HealthCare.gov and read the document listed below.*

Learn More: Health Insurance Marketplace Coverage Options and Your Health Coverage

Health Savings Account (HSA)

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If you select a HDHP for your medical coverage, then you may be eligible to open and contribute to an HSA account.

Why choose a HDHP and an HSA?

HSA Triple Tax Advantage

- *Contributions are pre-tax or tax-deductible*
- *Investment earnings grow tax-free*
- *Withdrawals for qualified medical expenses are tax-free*

You Own the HSA

- *Your HSA rolls over each year - no use-it-or-lose-it rule*
- *The account stays with you if you change jobs or retire*
- *You can invest the balance for long-term growth*

Use it for More than Medical

HSA funds can be used for a wide range of IRS-approved medical, dental and vision expenses including:

- *Health plan deductibles and coinsurance*
- *Prescriptions and over-the-counter medications*
- *Dental cleanings and procedures*
- *Vision care, glasses and contacts*

HSA Eligibility

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In order to open and contribute to an HSA account, you must meet several IRS eligibility requirements. It is your responsibility to determine if you are eligible

HSA Eligibility Criteria:

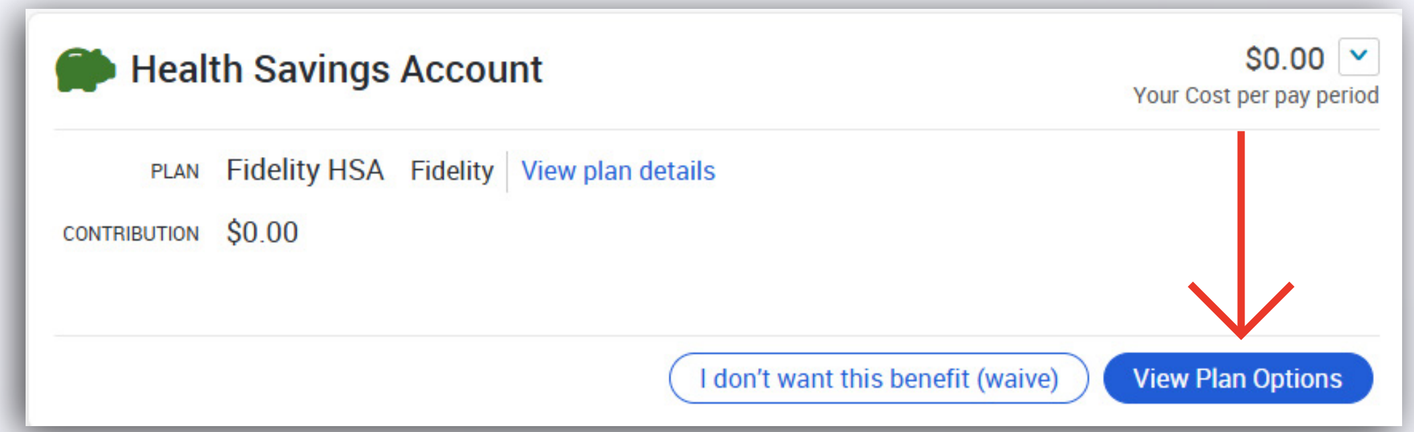
- *You must be enrolled in a High Deductible Health Plan (HDHP)*
- *You have no other non-HDHP medical coverage (such as a traditional HMO or a dependent on a Spouse's plan)*
- *You are not enrolled in Medicare, including Part A*
- *You cannot be claimed as a dependent on someone else's tax return*
- *You do not participate in a medical flexible spending account (FSA) - excluding a limited FSA for dental and vision expenses only*

If you open an HSA account and do not meet the above criteria, your contributions, any investment earnings, and distributions may be subject to income taxes, penalties and/or excise taxes. Additionally, in order to open and contribute to a Fidelity HSA, you must have a valid U.S. address

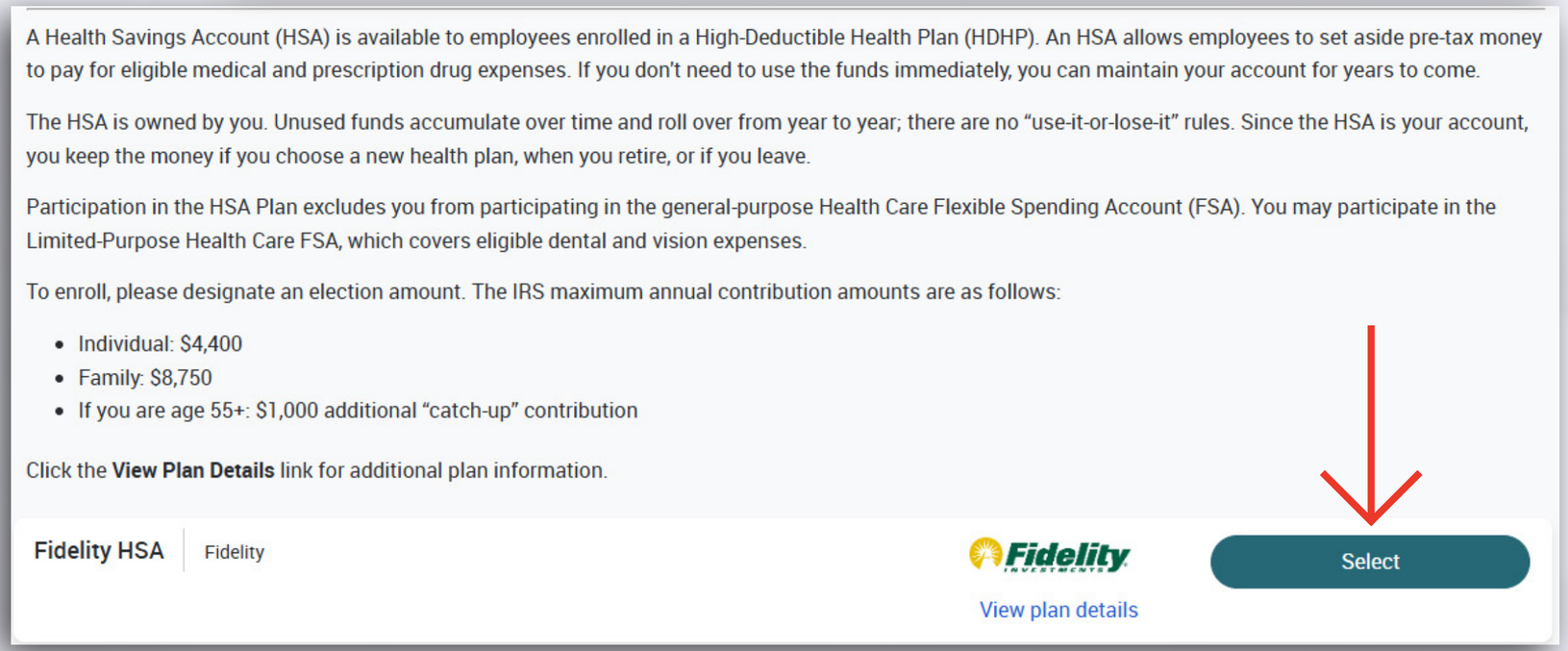
Enrolling in an HSA

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If you select a HDHP plan for your medical coverage you are eligible to contribute to an HSA plan.



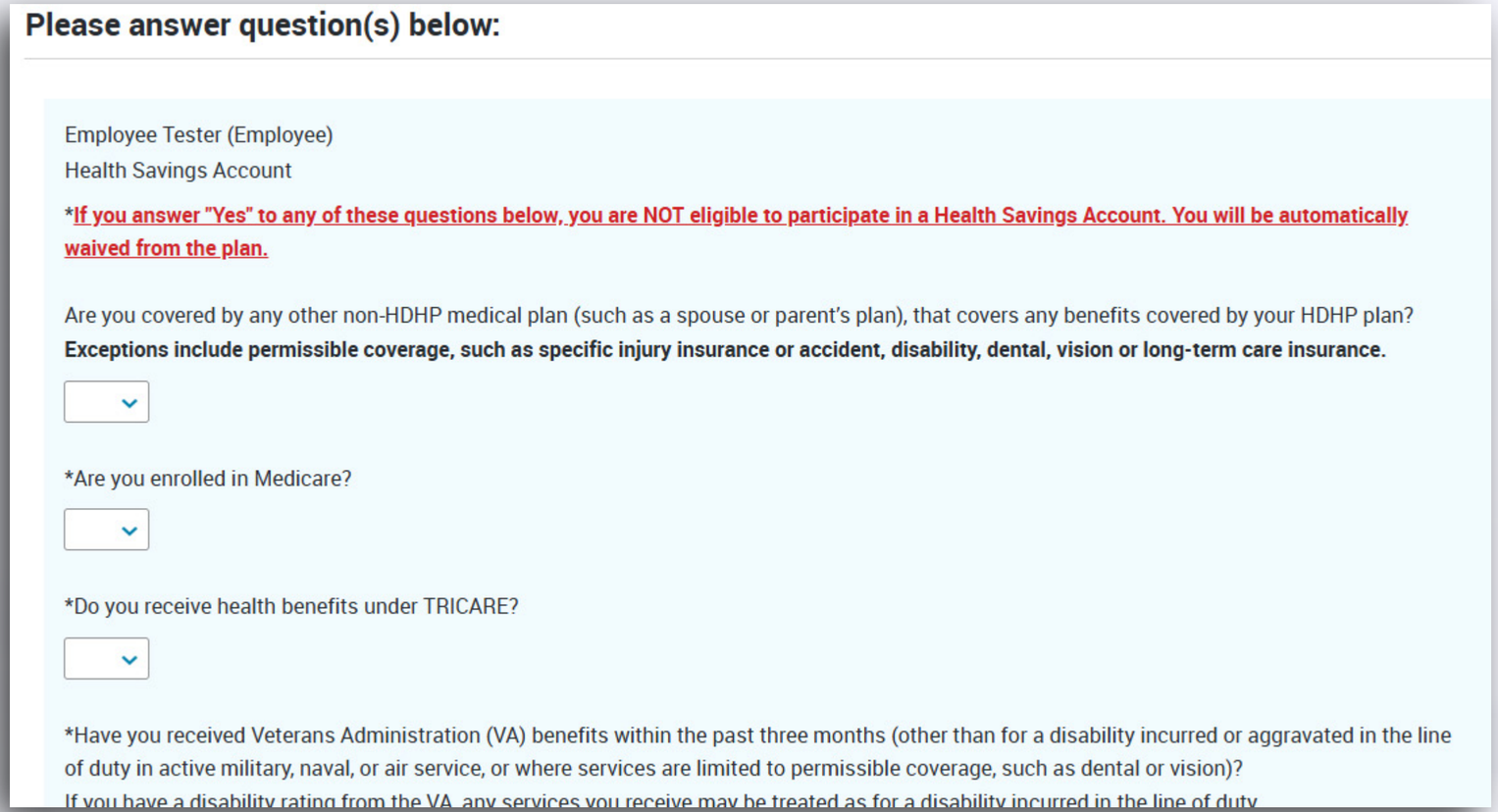
If you wish to enroll and contribute to an HSA, select 'View Plan Options' from the enrollment page. Then, click 'Select' for the Fidelity HSA

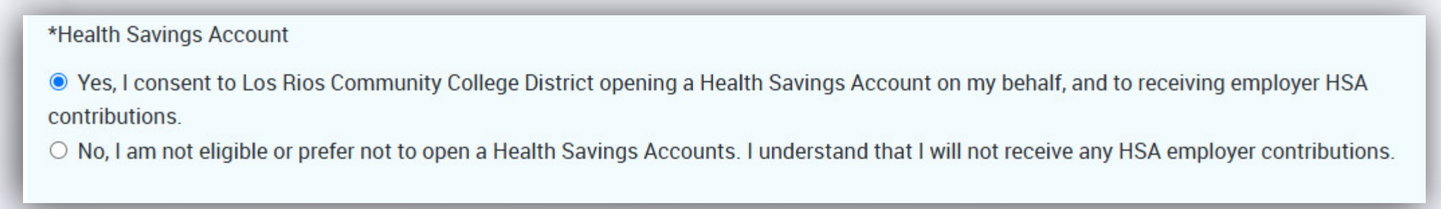


Enrolling in an HSA

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You will then be prompted to answer the eligibility questions. If you answer "Yes" to any of the eligibility questions, then you are **NOT** eligible to participate in a Health Savings Account.



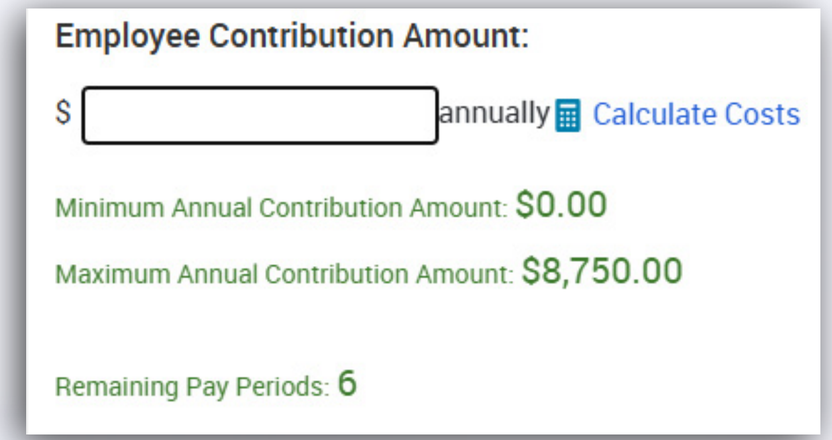


Setting Your HSA Contribution

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Once you have confirmed your eligibility, then you will be able to set your annual contribution amount.

You will set your contribution as an annual amount. Each payroll, PeopleSoft reviews this amount in the context of the number of paychecks remaining in the calendar year and computes the per paycheck value to ensure you meet your annual goal. Because of this, your per paycheck amount may fluctuate slightly.



2026 IRS Limits

For tax year 2026, the IRS allows the following HSA contribution maximums:

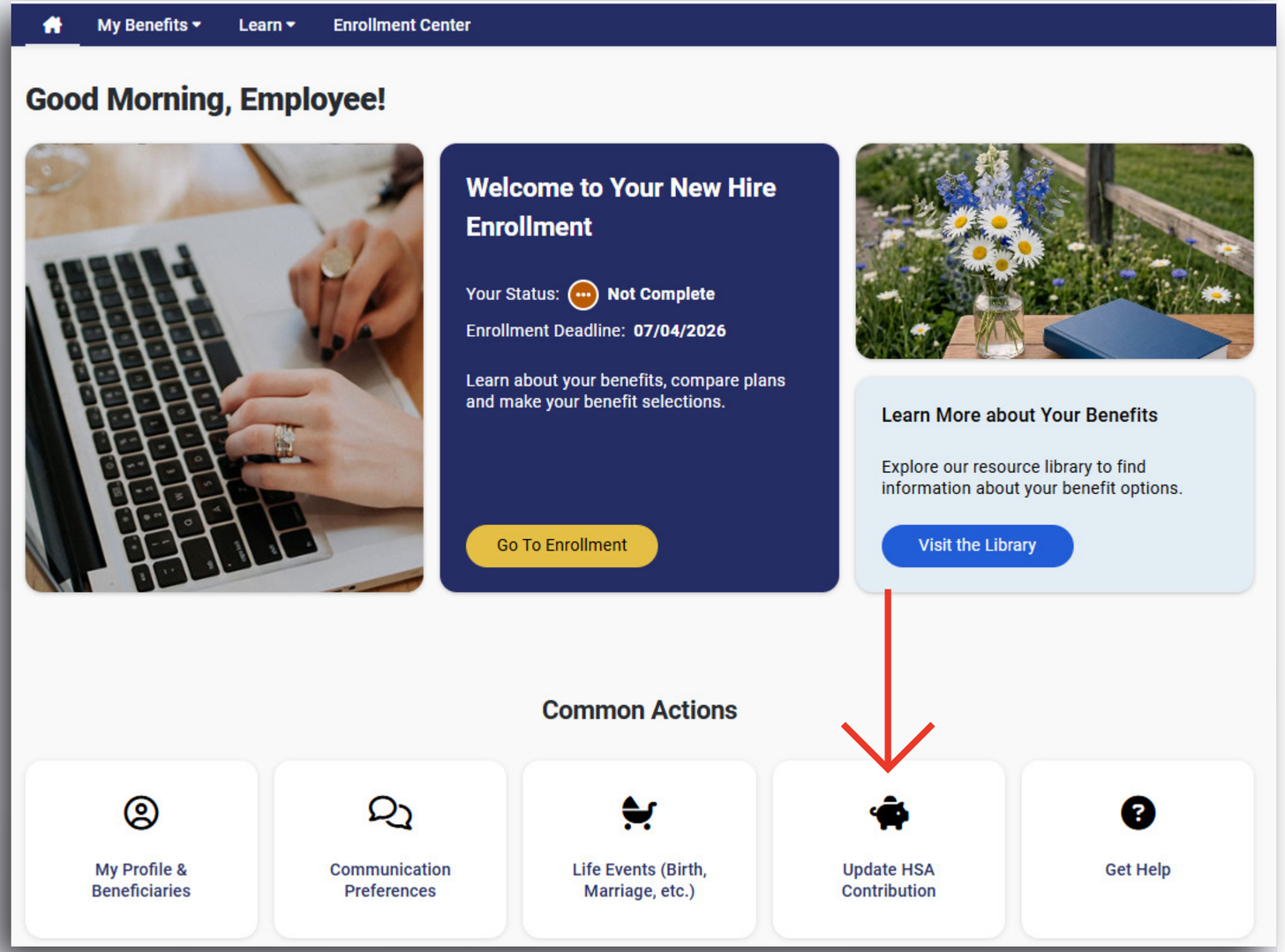
- Self-only: $4,400
- Family: $8,750
- Catch-up (age 55+): additional $1,000

Changing Your HSA Contribution

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Contribution amounts can be changed at any time throughout the year.

To change your HSA contribution, click on the **'Update HSA Contribution'** tile on your benefits homepage. Then, follow the prompts to set your new annual amount.



Setting up Your Fidelity HSA Account

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Once you complete your HSA enrollment on the Benefits Supersite, you will then need to open your account with Fidelity. Please follow the directions below.

If you are *NEW* to Fidelity, please follow these directions:

1. Visit the Fidelity NetBenefits website here: https://netbenefits.fidelity.com/
2. From the log in page, click on **'Register as a New User'** below the Log In button. Follow the prompts to set up your account and create your username and password.
3. Once you have successfully logged in, on your accounts homepage you will see your **'Health Savings Account'**. Under the **'Health Savings Account'** click on **'Open an HSA'.**
4. Follow the steps to open your HSA account. Once you have completed all the steps you will see an **'Account Under Review'** page. Navigate back to your account homepage.
5. Once you are back on your account homepage, you will see an account number under your Health Savings Account.

***If you need help setting up your account, please reach out to Fidelity at (800) 343-0860**

Setting up Your Fidelity HSA Account

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Once you complete your HSA enrollment on the Benefits Supersite, you will then need to open your account with Fidelity. Please follow the directions below.

If you have an existing Fidelity account, please follow these directions:

1. Log in with your Fidelity username and password.
2. From your account homepage, you will see your accounts listed. Under the **'Health Savings Account'** click on **'Open an HSA'.**
3. Follow the steps to open your HSA account. Once you have completed all the steps you will see an **'Account Under Review'** page. Navigate back to your account homepage.
4. Once you are back on your account homepage, you will see an account number under your Health Savings Account.

***If you need help setting up your account, please reach out to Fidelity at (800) 343-0860*

The Hartford Voluntary Benefits

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Los Rios offers additional voluntary benefits through The Hartford for you and your eligible dependents. These benefits can help pay for you out-of-pocket expenses related to a hospital stay, accident, illness and/or injury. You pay the full cost of these plans on a post tax basis.

CRITICAL ILLNESS INSURANCE

Critical illness insurance pays a lump-sum benefit if you or a family member are diagnosed with a critical illness while covered by the plan.

ACCIDENT INSURANCE

Accident insurance pays you cash benefits for specific injuries and events resulting from a covered off-the-job accident. You can use this money however you like.

HOSPITAL INDEMNITY INSURANCE

Hospital indemnity insurance pays a daily benefit for a covered stay in a hospital. Can be used to help cover the medical plan deductible or to offset non-medical expenses.

If you enroll in the accident or critical insurance, you have access to a Wellness Benefit. The annual benefit is easy to earn by getting your health screening test. The wellness Benefit is designed to encourage you to maintain a healthy lifestyle, since the tests screen for a wide range of potential illnesses and diseases.

The Hartford

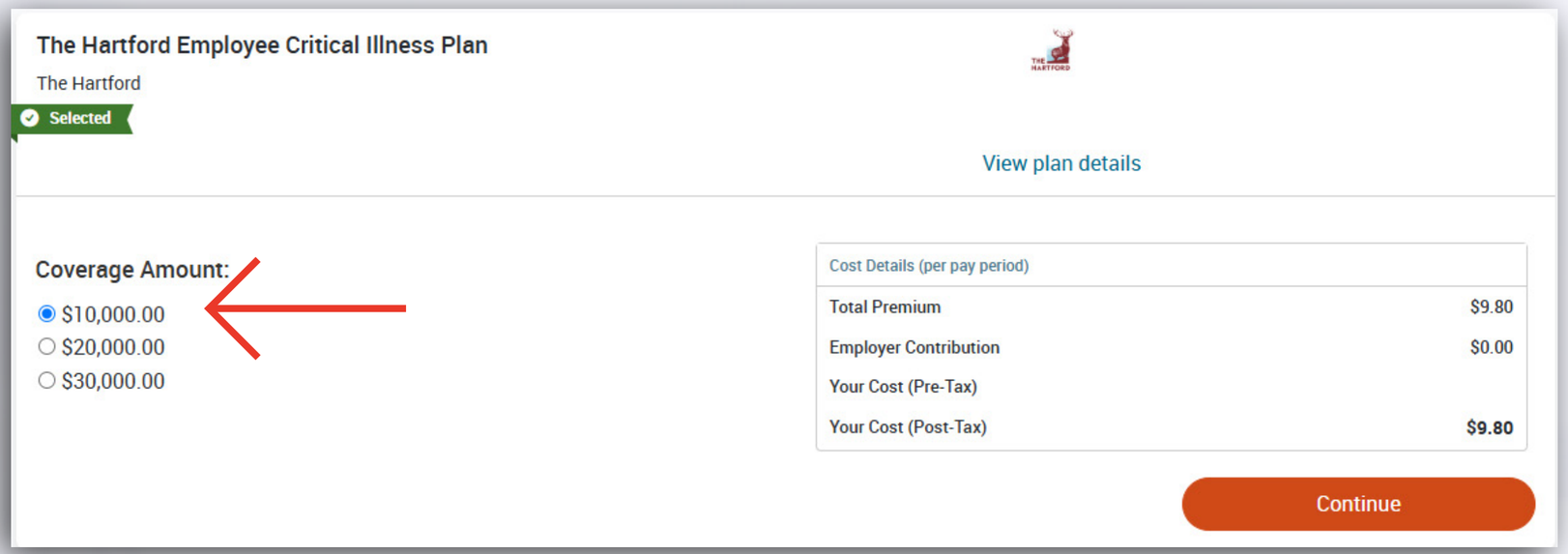
Critical Illness Insurance

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Critical illness insurance pays a lump-sum, benefit if you or a family member are diagnosed with a critical illness while covered by the plan. Covered conditions can include heart attack, stroke, invasive cancer, benign brain tumor, skin cancer and many others.

You have the option of purchasing $10,000, $20,000 or $30,000 with no medical questions asked and there are no Pre-existing conditions limitations.

To enroll, choose the coverage amount you would like for yourself.



***The Hartford premiums are deducted from your paycheck on a post-tax basis*

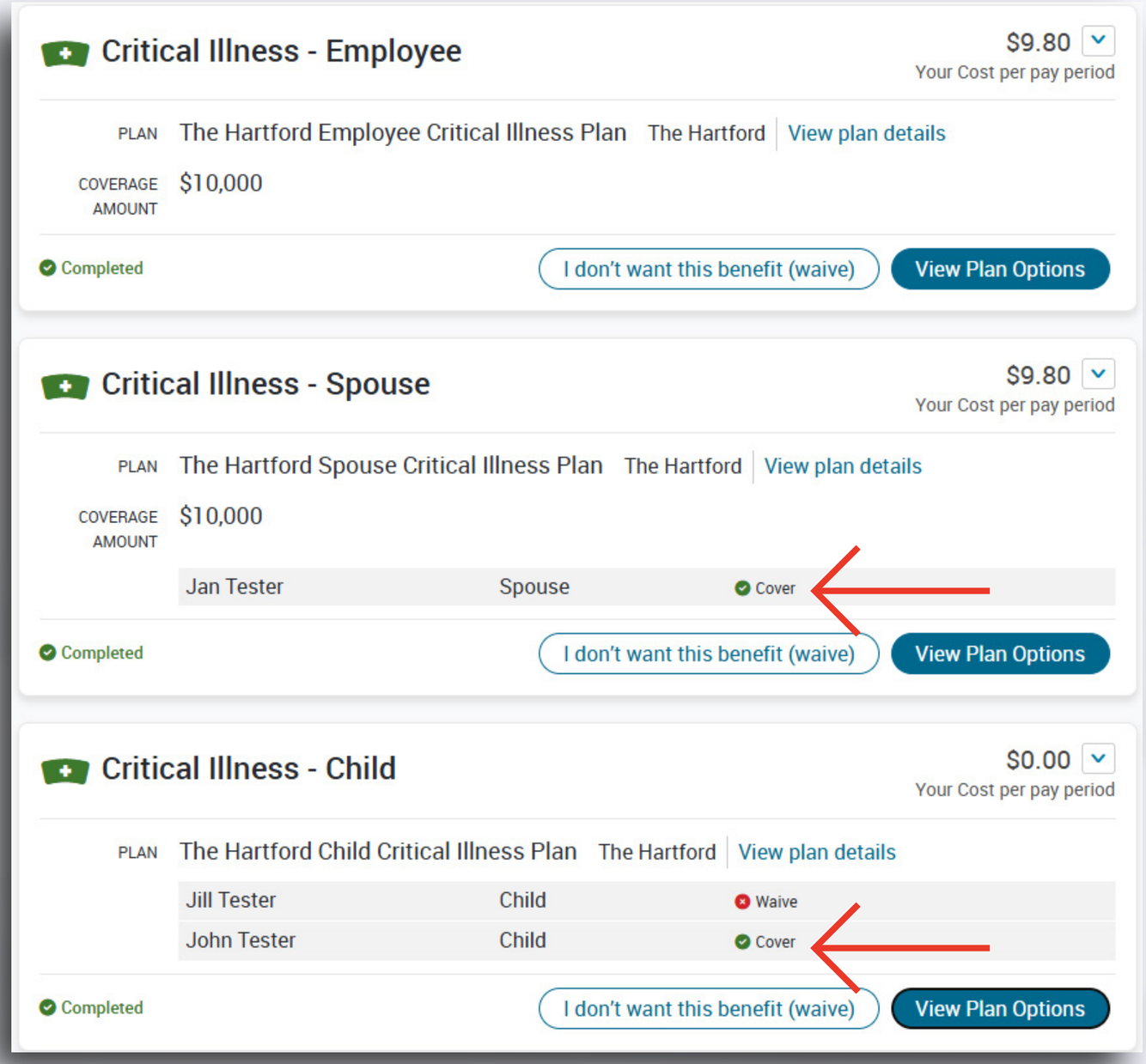
Learn More: Critical Illness Insurance Brochure

Critical Illness Insurance

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To enroll eligible dependents in Critical Illness Insurance, you must also select the coverage amount for your spouse/domestic partner and your children.

You can see who is covered because they will have a green check mark next to their name.

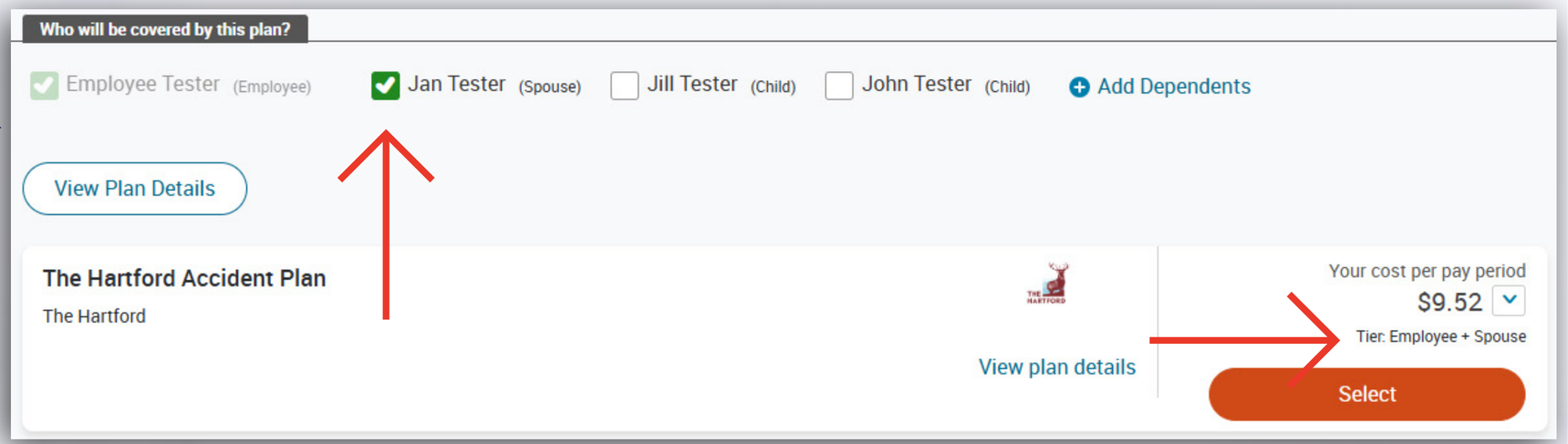


Accident Insurance

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Accident insurance pays you cash benefits for specific injuries and events resulting from a covered off-the-job accident on or after your coverage effective date. You can use this money however you like, including to pay for deductibles, childcare, housecleaning, groceries or utilities.

When selecting Accident Insurance, be sure to click which dependents you would like to cover.



***The Hartford premiums are deducted from your paycheck on a post-tax basis*

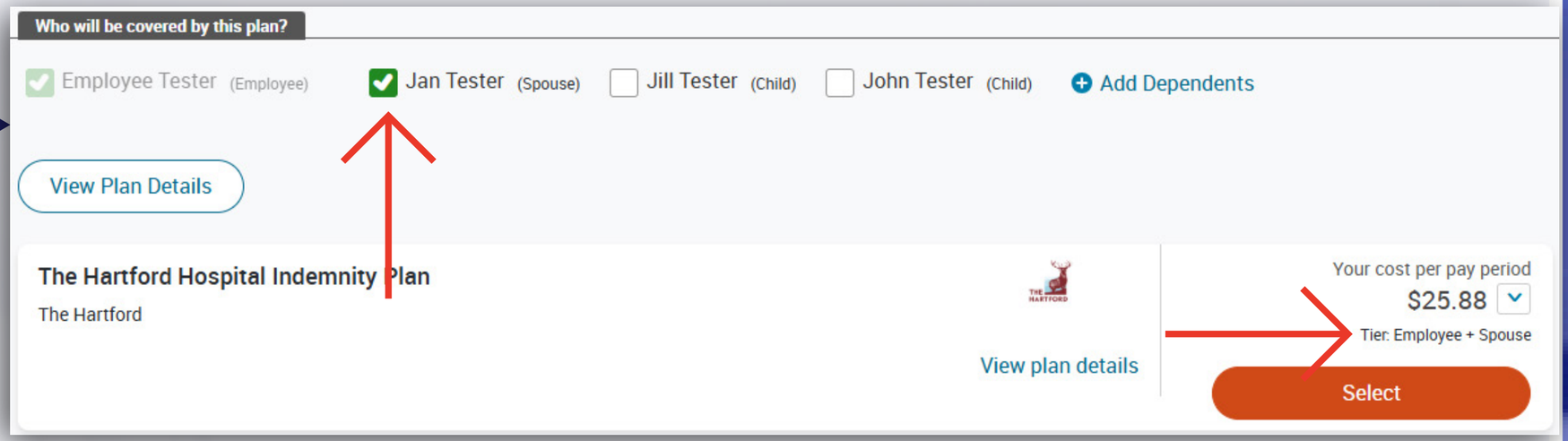
Learn More: Accident Insurance Brochure

Hospital Indemnity Insurance

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Hospital indemnity insurance pays a daily benefit for a covered stay in a hospital, critical care unit or rehabilitation facility, on or after your coverage effective date. This coverage can be used to supplement medical insurance to help cover the medical plan deductible and coinsurance or to offset non-medical expense, such as childcare or any of your regular household expenses.

When selecting Hospital indemnity Insurance, be sure to click which dependents you would like to cover.



***The Hartford premiums are deducted from your paycheck on a post-tax basis*

Learn More: Hospital Indemnity Brochure

Dental Benefits

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Los Rios offers dental coverage through Delta Dental. This is a PPO plan and currently does not have a monthly premium cost for Full Time employees.

- In this incentive plan, Delta Dental pays 70% of the PPO contract allowance for covered diagnostic, preventative and basic services during the first year of eligibility.
- The coinsurance percentage will increase by 10% each year (to a maximum of 100%) for each enrollee if that person visits the dentist at least once during the year.
- If an enrollee does not use the plan during the calendar year, the percentage remains at the level attained the previous year.
- If an enrollee becomes ineligible for benefits and later regains eligibility, the percentage will drop back to 70%.

There is a 2-year commitment with this plan. You cannot cancel during that time, unless you have a qualified status change. If you cancel for any reason, there is also a 24-month waiting period to re-enroll and the benefit level starts over at 70% (unless you're continuously enrolled under a different Delta Dental incentive plan).

Learn More: Delta Dental Plan Design Highlights

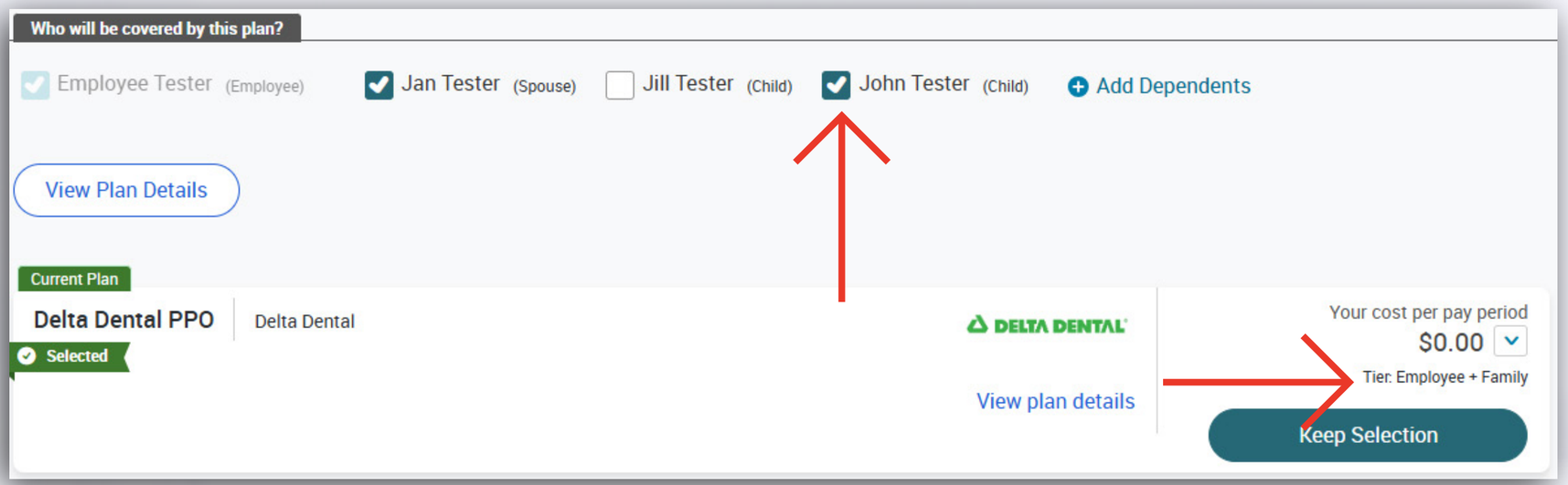
Delta Dental

Return to Table of Contents

Employees can elect both Medical and Dental coverage, choose to enroll in one and waive the other, or waive both coverages. Medical and Dental benefits are not dependent on each other.

However, employees MUST have coverage for dependents to be covered.

Please carefully review your selections to ensure the dependent(s) you wish to enroll are selected.



***Please note that Delta Dental does not send out Insurance ID cards. Coverage is verified using the members Social Security Number. You can also create an account online at deltadentalins.com.*

Vision Benefits

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As a Los Rios Employee, you have access to two voluntary vision plans through VSP. They give you the freedom to see any vision provider you choose, but you'll typically save money at an in-network provider.

VSP Basic Plan

- $150 allowance for frames or $120 for contact lenses every other year
- $10 well vision exam co-pay and $20 prescription glasses co-pay
- Up to $60 co-pay for contact lens exam

Learn More: VSP Base Plan Summary

VSP Buy-Up Plan

- $200 allowance for frames or $150 for contact lenses every year
- $25 well vision exam co-pay includes prescription glasses co-pay
- Up to $60 co-pay for contact lens exam

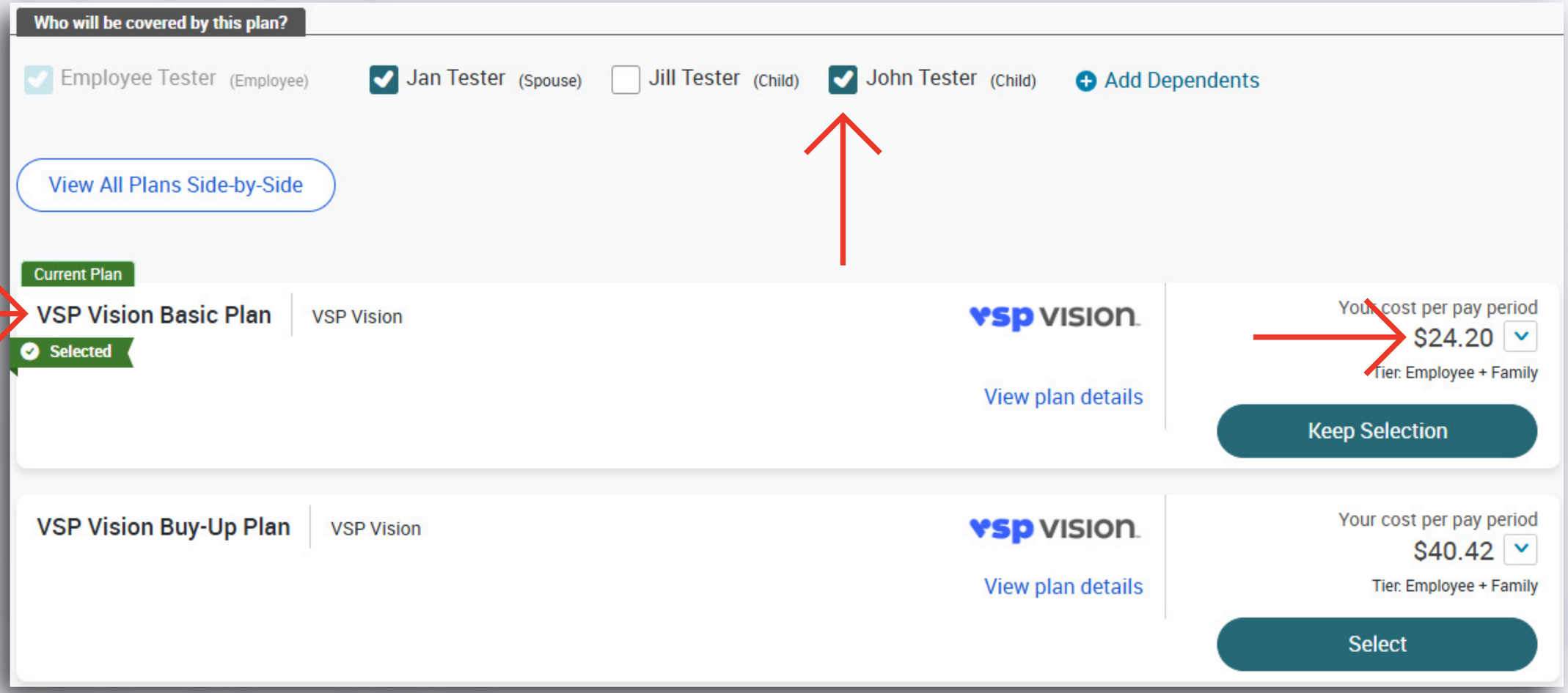
Learn More: VSP Buy-Up Plan Summary

***Please note that your premium amount is based on your plan choice and enrolled dependents.*

vsp vision care

VSP

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Please carefully review your selections to ensure the dependent(s) you wish to enroll are selected, as well as the correct plan.

Employee Assistance Program (EAP)

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Los Rios recognizes that personal and family problems can impact your life both at home and at work. When you face challenges and need help balancing work, home, personal, or family issues, your Employee Assistance Program is available to you 24 hours a day, 7 days a week, 365 days a year at no cost to you.

This 100% confidential plan can help you and your family with a wide array of resources, including:

- **In-the-moment support** - Reach a licensed clinician by phone 24/7/365 for immediate assistance
- **Short-term counseling** - Access up to 5 no-cost counseling sessions, in-person or via video, to resolve stress, depression, anxiety, work-related pressures, relationship issues or substance abuse
- **Financial and Legal expertise** - Consultation with a financial counselor or local attorney
- **Convenience Resources** - Referrals for child and elder care, home repair, housing needs, education, pet care and so much more
- **On-the-go support** - Access personalized coaching, self-guided resources and group support sessions from your phone

supportlinc
EMPLOYEE ASSISTANCE

Employee Assistance Program (EAP)

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To access your EAP resources, contact Supportlinc using the resources below:

Phone: (888) 881-5462

Online: supportlinc.com

Group Code: *losrios*

Informational Flyer: EAP flyer

Watch the Supportlinc Orientation Video

Visit Wellbeing Place

Download the mobile app today!

***Start with Navigator - Visit your web portal or mobile app to complete the short Mental Health Navigator survey. You'll immediately receive personalized guidance to access support and resources.*

supportlinc
EMPLOYEE ASSISTANCE

Flexible Spending Accounts (FSA)

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FSA's are a pre-tax benefit plan that enables you to save up to 40% on eligible expenses. By enrolling in a FSA, you save on state, federal and FICA taxes. Common expenses include orthodontics, laser eye surgery, prescription drugs and medical equipment.

MEDICAL FSA

Get reimbursed for eligible medical, dental and vision out-of-pocket expenses like deductibles, copays, and prescription drugs as well as other qualified medical expenses that aren't covered by your health plan

LIMITED PURPOSE FSA

If you're enrolled in one of our HDHP plans with an HSA, you are only eligible for the limited purpose FSA, which can be used to pay for qualified dental and vision expenses.

DEPENDENT CARE FSA

Get reimbursed for eligible child and elder care expenses (such as day care) while you work, regardless of the medical plan you are enrolled in.

All FSA funds must be used within the plan year. Unused funds will be forfeited. For important dates and deadlines, or to use funds and submit claims, please contact P&A Group at (716) 852-2611 or visit www.padmin.com

Learn More: FSA Brochure

HSA vs FSA

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Be sure to carefully review your options and enroll in the best one for you and your family.

Health Savings Account (HSA)

- Requires enrollment in a High-Deductible Health Plan (HDHP)
- Funds become available as you contribute
- Unused funds roll over from year to year and then stay with you for life, even into retirement
- Change your annual contribution amount at any time throughout the plan year
- Use your HSA funds for qualified medical, dental and vision expenses

Flexible Spending Account (FSA)

- Requires annual enrollment
- Full amount of funding is available as of January 1st
  - DCAP funds available as you contribute
- Unused funds are forfeited at the end of the plan year
- You **cannot** change your annual contribution throughout the plan year
- Only a limited-use FSA can be used with an HSA to cover dental and vision expenses only

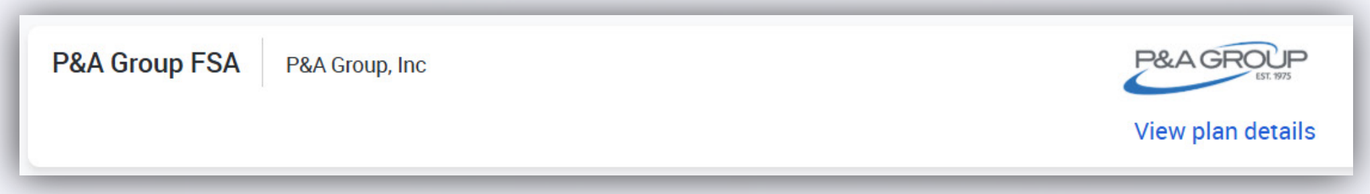
Medical FSA

Return to Table of Contents

You can choose to open a Medical FSA to save money on medical, dental and vision expenses that are only partially covered or not covered at all by insurance. Common eligible expenses include braces, eyeglasses/prescription sunglasses, insurance deductibles, and over-the-counter medications.

Important Details:

- FSA contributions **DO NOT** roll over from year to year.
- All funds must be used within the plan year. ***Unused funds will be forfeited.***
- A new election must be made each year during Open Enrollment to continue to participate
- You may not stop or change your contribution amount during the plan year unless you experience a qualifying life event.



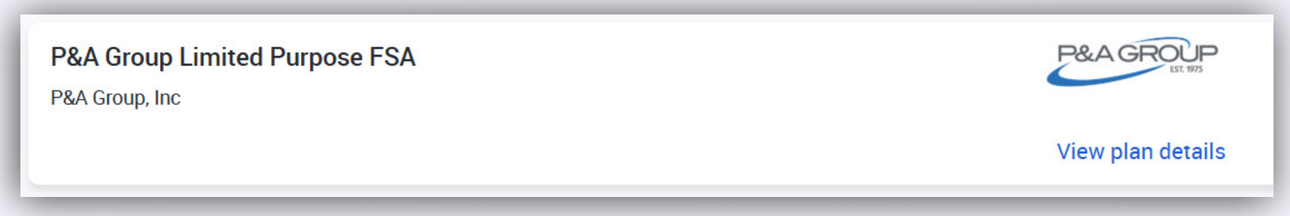
Limited Purpose FSA

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You can choose to open a Limited Purpose FSA if you are enrolled in a HDHP with a HSA or are enrolling in one during the current open enrollment period. These plans allow you to set aside money on a pre-tax basis for *dental* and *vision* expenses that are not covered under a traditional plan. Common expenses include orthodontics, laser eye surgery, eyeglasses and contacts.

Important Details:

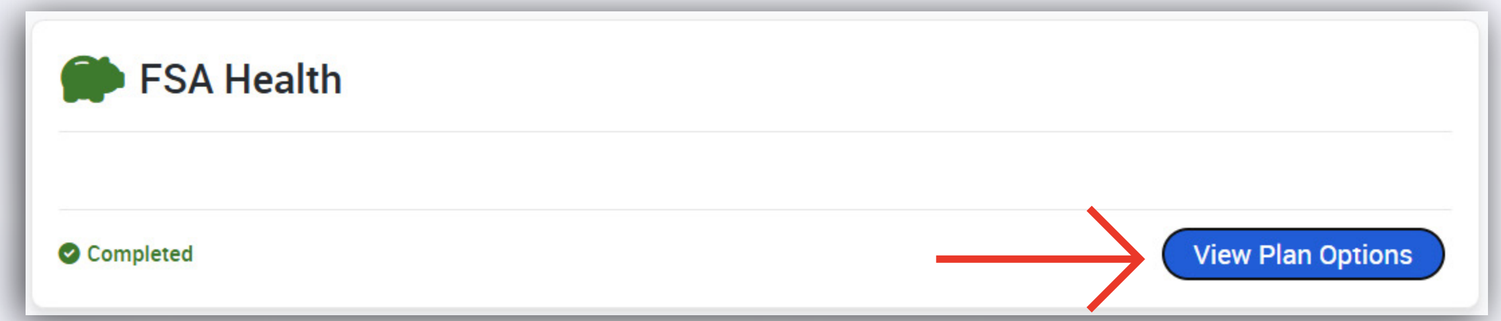
- FSA contributions **DO NOT** roll over from year to year.
- All funds must be used within the plan year. ***Unused funds will be forfeited.***
- A new election must be made each year during Open Enrollment to continue to participate
- You may not stop or change your contribution amount during the plan year unless you experience a qualifying life event.



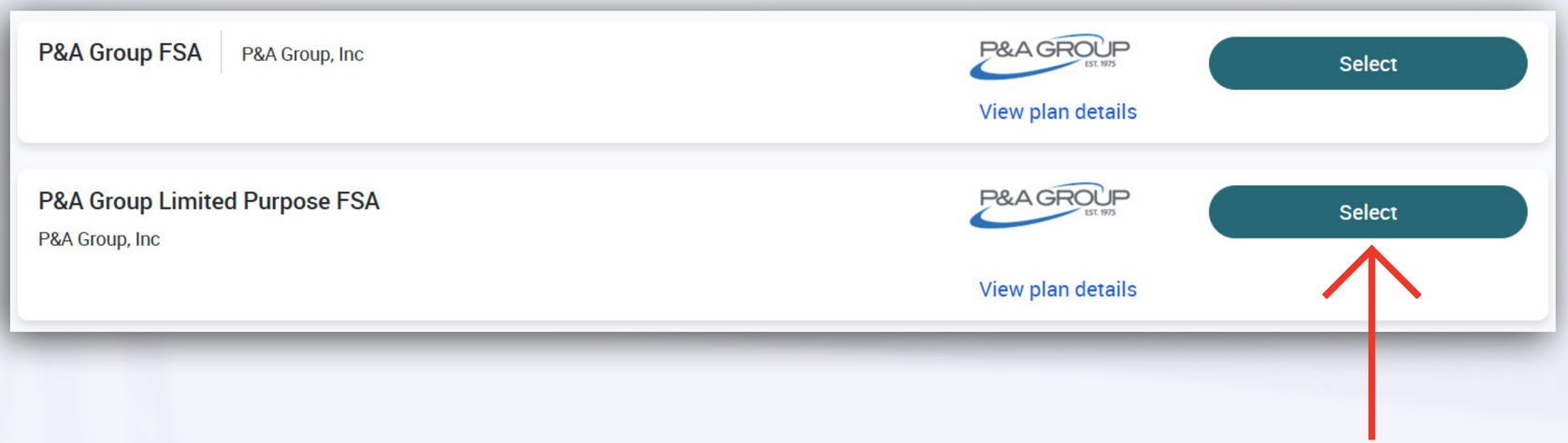
Enroll in a Medical FSA

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To enroll in a Medical FSA, click on **'View Plan Options'** under FSA Health



Then, choose **'P&A Group FSA'** for the classic FSA option. Or choose **'P&A Group Limited Purpose FSA'** for the limited-use FSA option

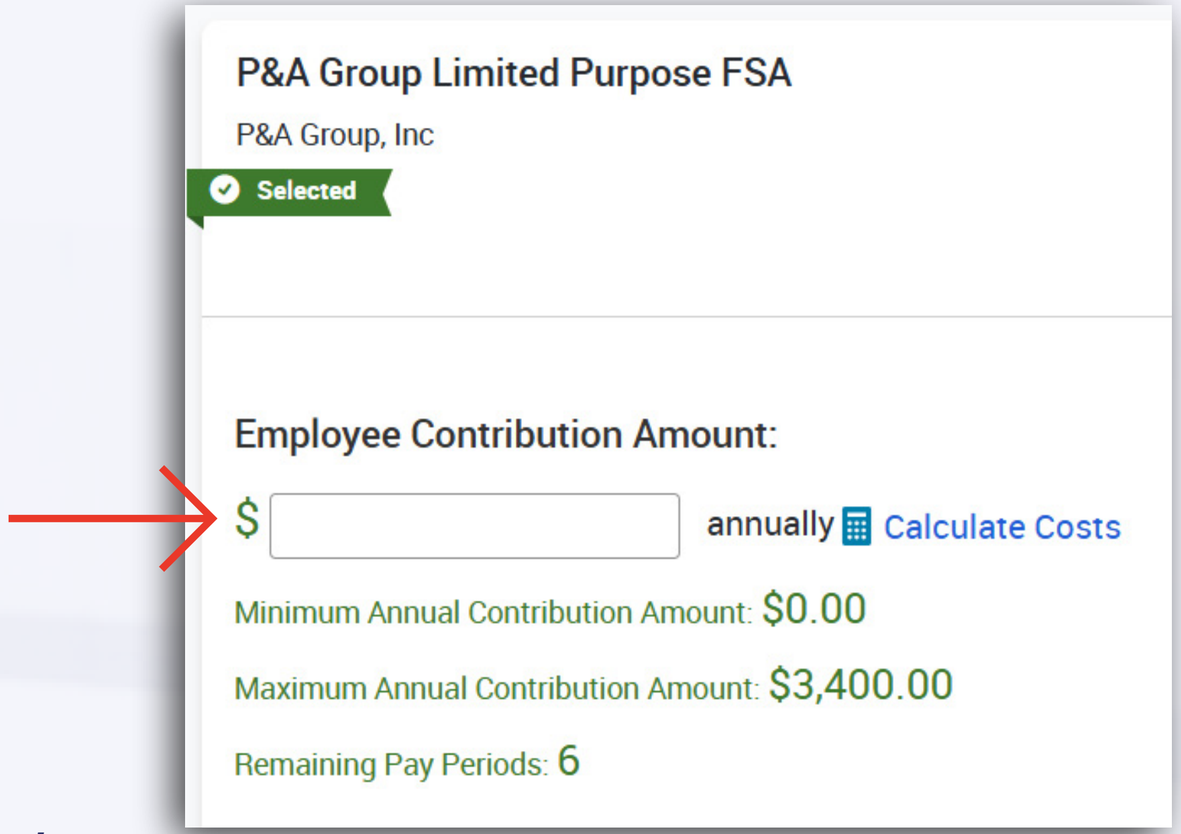


***Please note that dependents will not be displayed on these screens, even though they are eligible for this benefit.*

Enroll in a Medical FSA

Return to Table of Contents

Once you select the option you would like, you will set your annual contribution amount.



***Remember that you cannot change your annual contribution amount during the plan year*

Dependent Care FSA

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You can choose to open a Dependent Care FSA to set aside money to pay for daycare expenses for your eligible dependents. Childcare expenses are only eligible until the date your dependent child turns 13. Eligible expenses include after school programs, babysitters, caregivers/eldercare, and daycare centers.

Important Details:

- This benefit is for dependent care expenses only **NOT** medical expenses.
- You can contribute to a Dependent Care FSA regardless of what Medical Plan you choose.
- FSA contributions **DO NOT** roll over from year to year.
- All funds must be used within the plan year. ***Unused funds will be forfeited.***
- A new election must be made each year during Open Enrollment to continue to participate
- You may not stop or change your contribution amount during the plan year unless you experience a qualifying life event.

***Expenditures that are prohibited for reimbursement include the following:*

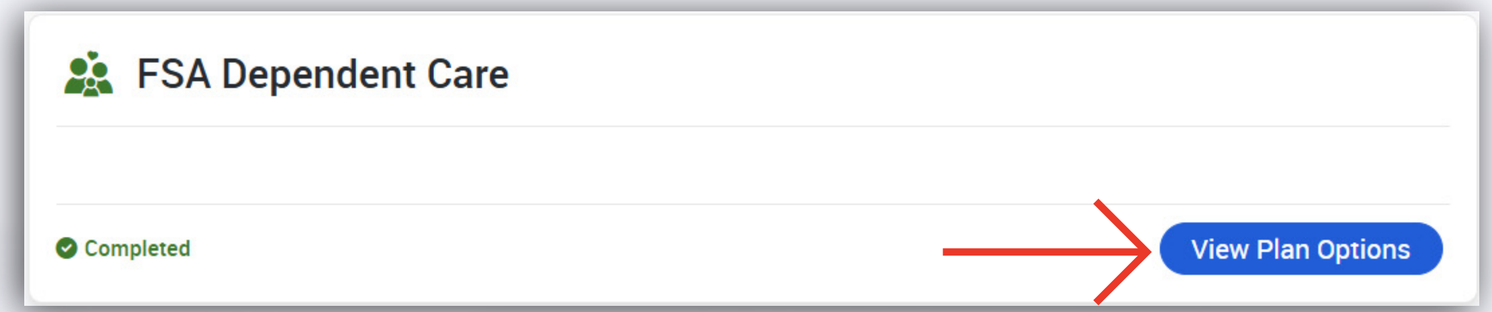
- *Babysitting for social events*
- *Educational expenses*
- *Charges for overnight camp*
- *Expenses that you will take as a childcare tax credit on your income tax return*
- *Expenses for services provided by your spouse, a parent of your under-age-13 qualifying child or by a person for whom you or your spouse is entitled to claim a personal exemption on a federal income tax return*

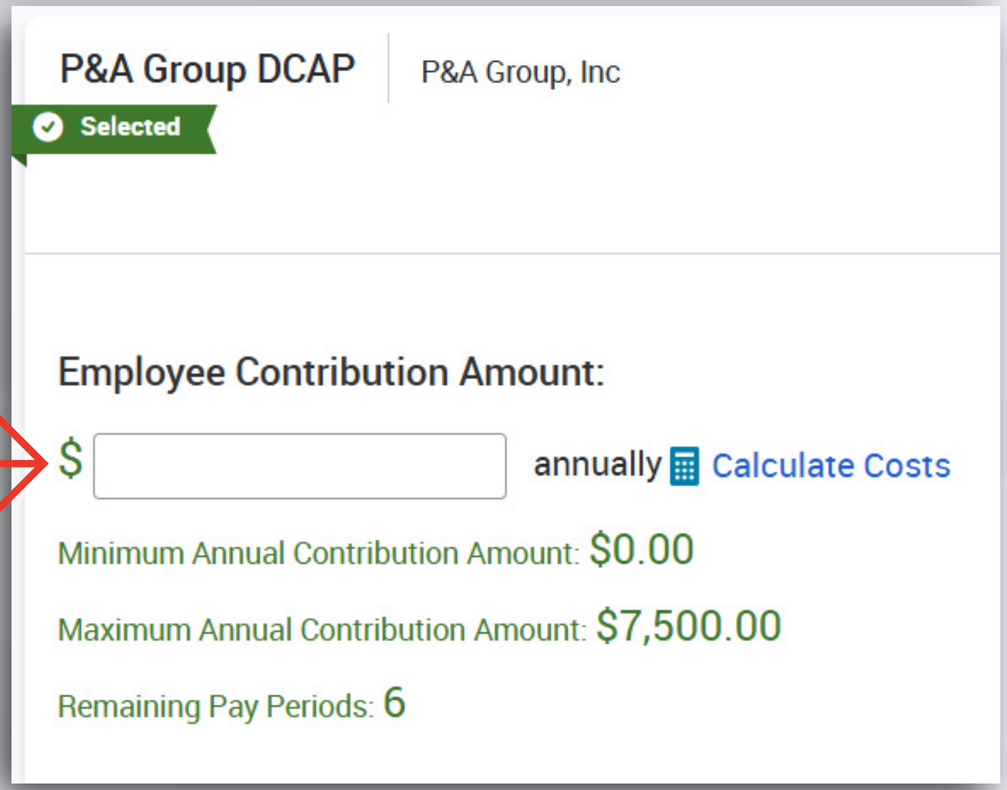
Enroll in a Dependent Care FSA

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To enroll in a Dependent Care FSA, click on **'View Plan Options'** under FSA Dependent Care

Then, select the P&A Group DCAP tile and set your annual contribution amount





***Please note that dependents will not be displayed on these screens, even though they are eligible for this benefit.*

***Eligible dependents are children under the age of 13 or elder care for qualified individuals*

***Funds are for dependent care expenses and NOT medical expenses*

Learn More: Dependent Care FSA Flyer

The Hartford Basic Life and AD&D

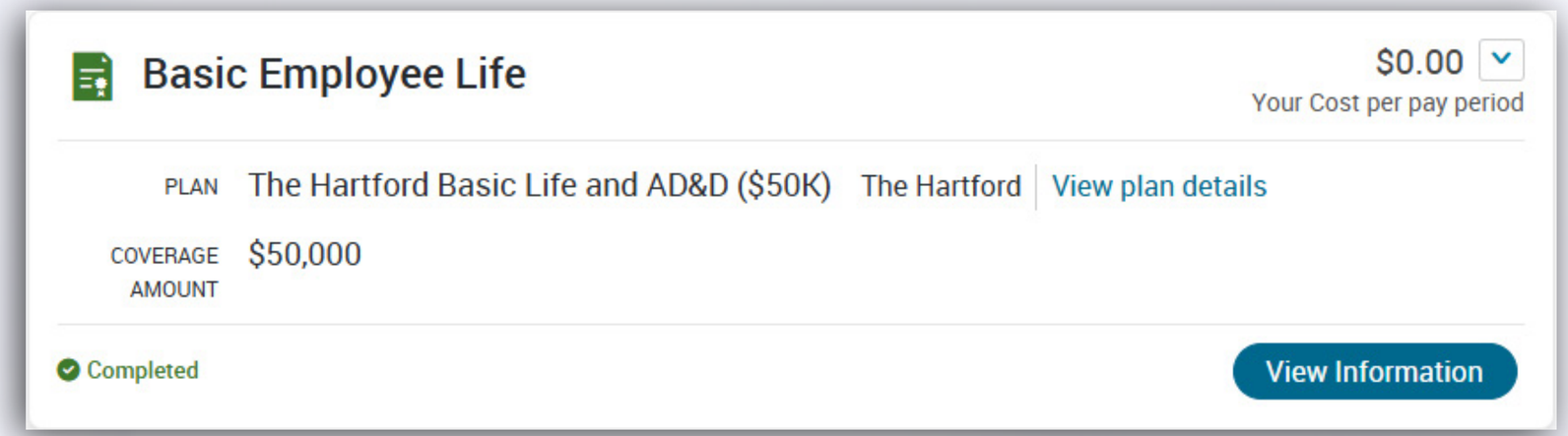
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Los Rios provides you with Basic Life and Accidental Death and Dismemberment (AD&D) insurance through The Hartford at no cost to you. This coverage provides financial security for your beneficiaries should you pass away. Basic coverage is provided at $50,000 automatically upon initial eligibility as a new hire.

Benefit Reductions

The basic and voluntary life and AD&D benefits are reduced at:

- Age 70 - reduced by 35%
- Age 75 - reduced by 50%
- Retirement - benefits terminate with a conversion option available



Learn More: Life and Accidental Death & Dismemberment Insurance Coverage Highlights

The Hartford Voluntary Life and AD&D

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Additional life insurance coverage may be purchased for you and your family at low group rates.

Employee: $10,000 increments up to $750,000 (not to exceed 5 times your annual salary). If you enroll when initially eligible, evidence of insurability (EOI) is only required for coverage over $300,000. If you enroll at any other time, all amounts are subject to EOI. Once you're enrolled, you may increase your coverage by $20,000 at each annual open enrollment without EOI, up to $350,000.

Spouse/Domestic Partner: $5,000 increments up to $150,000 (not to exceed 100% of your personal amount). If your spouse enrolls when initially eligible, EOI is only required for coverage over $50,000. If enrolled at any other time, all amounts are subject to EOI.

Child: (Birth to 6 months) - $1,000 total

Child: (Age 6 months to 26 years) - $10,000 total

- The amount of life insurance you may elect is displayed with the cost per paycheck
- Premiums are deducted from your paycheck on a post-tax basis
- Life insurance proceeds are not taxable
- For children under 6 months of age, benefits may be subject to reductions or restrictions
- For employees and spouses age 65 and older, benefits may be subject to reductions

Learn More: Voluntary Term Life Insurance and AD&D Coverage Highlights

You and your family member may only be covered once under life and AD&D insurance. If you and your spouse and/or child both work for Los Rios, be sure to coordinate your life insurance coverage so no one if covered more than once.

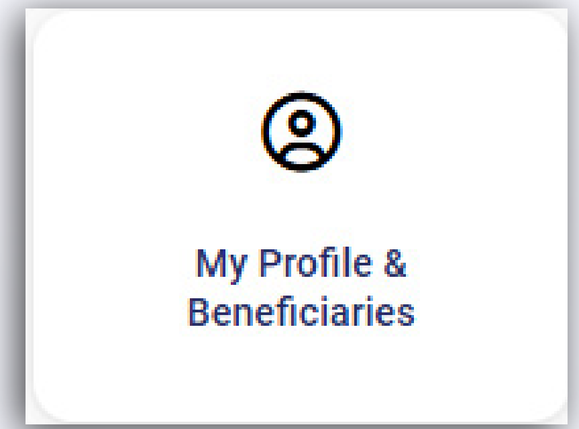
Adding a Beneficiary

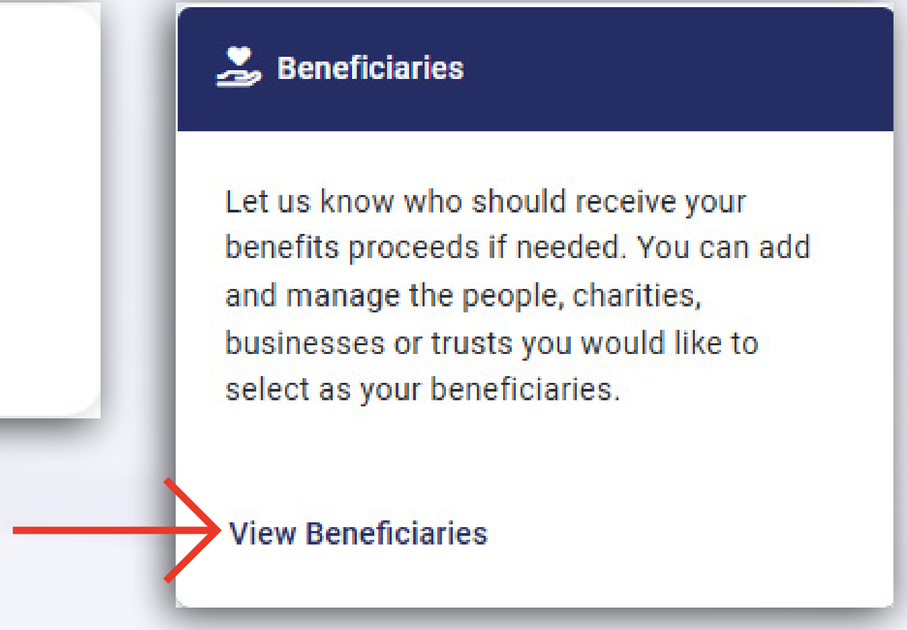
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A life insurance beneficiary is the person or entity that will receive the money from your policy's death benefit when you pass away. It is important to keep your beneficiary information up to date.

To add or update your beneficiaries, click on the **'My Profile & Beneficiaries'** tile from your Home Page

Then, click on **'View Beneficiaries'** on the Beneficiaries tile





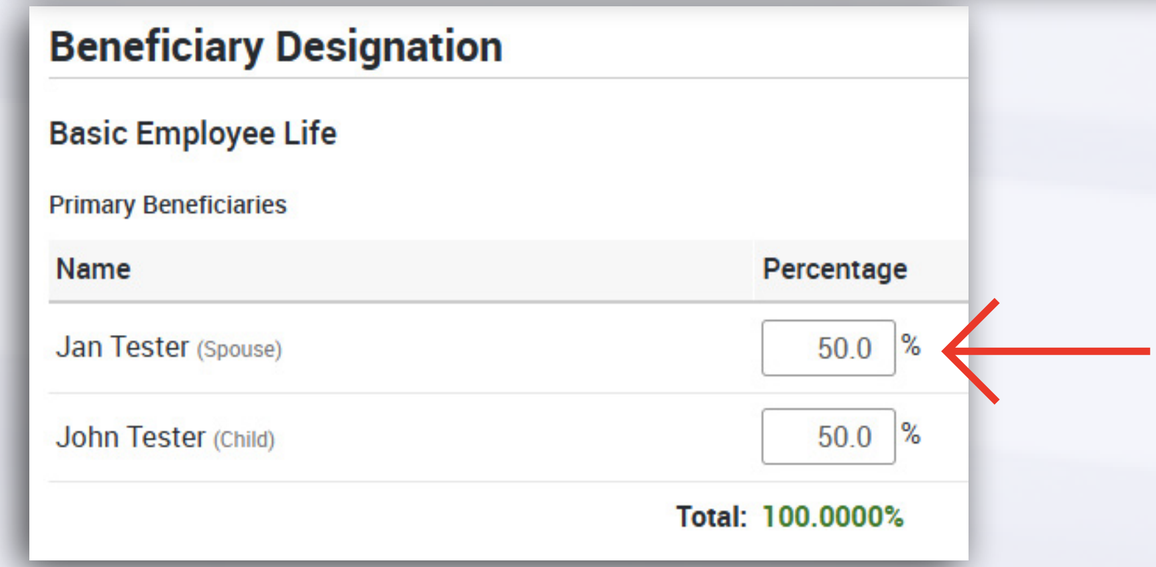
Beneficiary Designation

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Once you are on your Beneficiaries page, you can view your current beneficiaries as well as add additional ones.



Once all of your beneficiaries are added, then you will designate what percentage of your insurance that each beneficiary is entitled to.



***Please note that the total percentages must equal 100%*

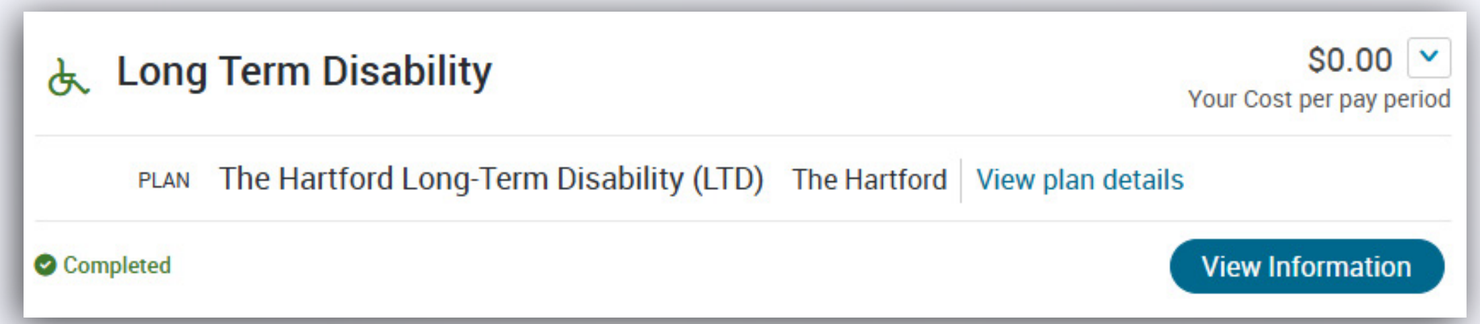
The Hartford Long Term Disability

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Los Rios provides eligible employees Long Term Disability (LTD) insurance at no cost to you. This coverage offers you and your family protection if you become disabled and are unable to work for an extended period of time. LTD is an automatic benefit, you do not need to take any action to enroll in coverage.

This benefit is for non-work related illnesses/injuries and begins either 90 days after the onset of the illness/injury, or after the exhaustion of 100% paid leave, whichever is greater.

LTD insurance pays you up to 66.67% of your monthly salary, not to exceed $12,000 per month. It pays for up to 2 years or until you reach the Social Security normal retirement age.



Learn More: [Long Term Disability Insurance Coverage Highlights]

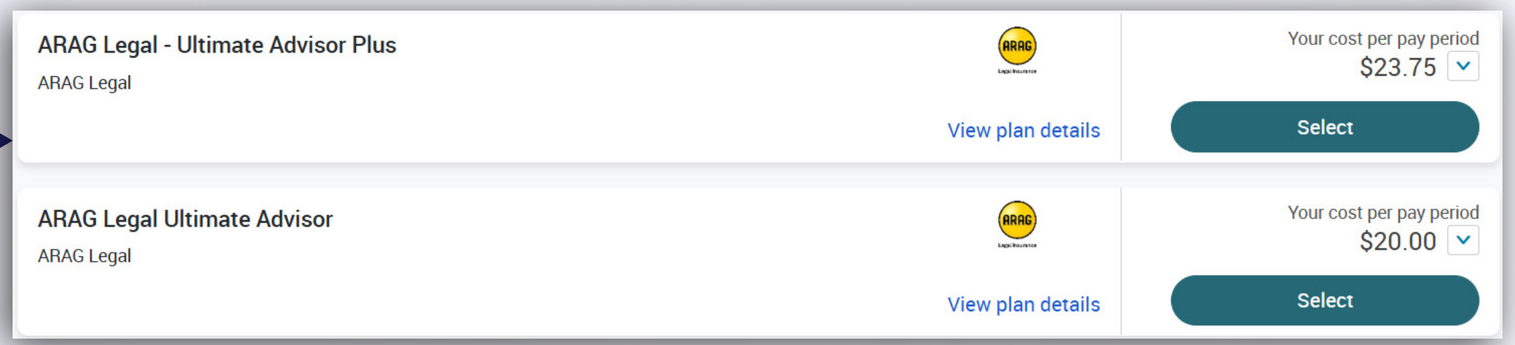
ARAG Legal Insurance

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Everything in your life is connected by legal. Some legal situations are planned, like creating a will, and others are more unexpected, like dealing with a traffic ticket. ARAG's insurance plans offer network attorney fees that are 100% paid-in-full for most covered matters.

What does legal cover?

- Wills and estate planning
- Real estate and home ownership
- Traffic tickets and license suspension
- Disputes with landlord
- Family law matters
- Small claims court
- Student loan debt
- And more!



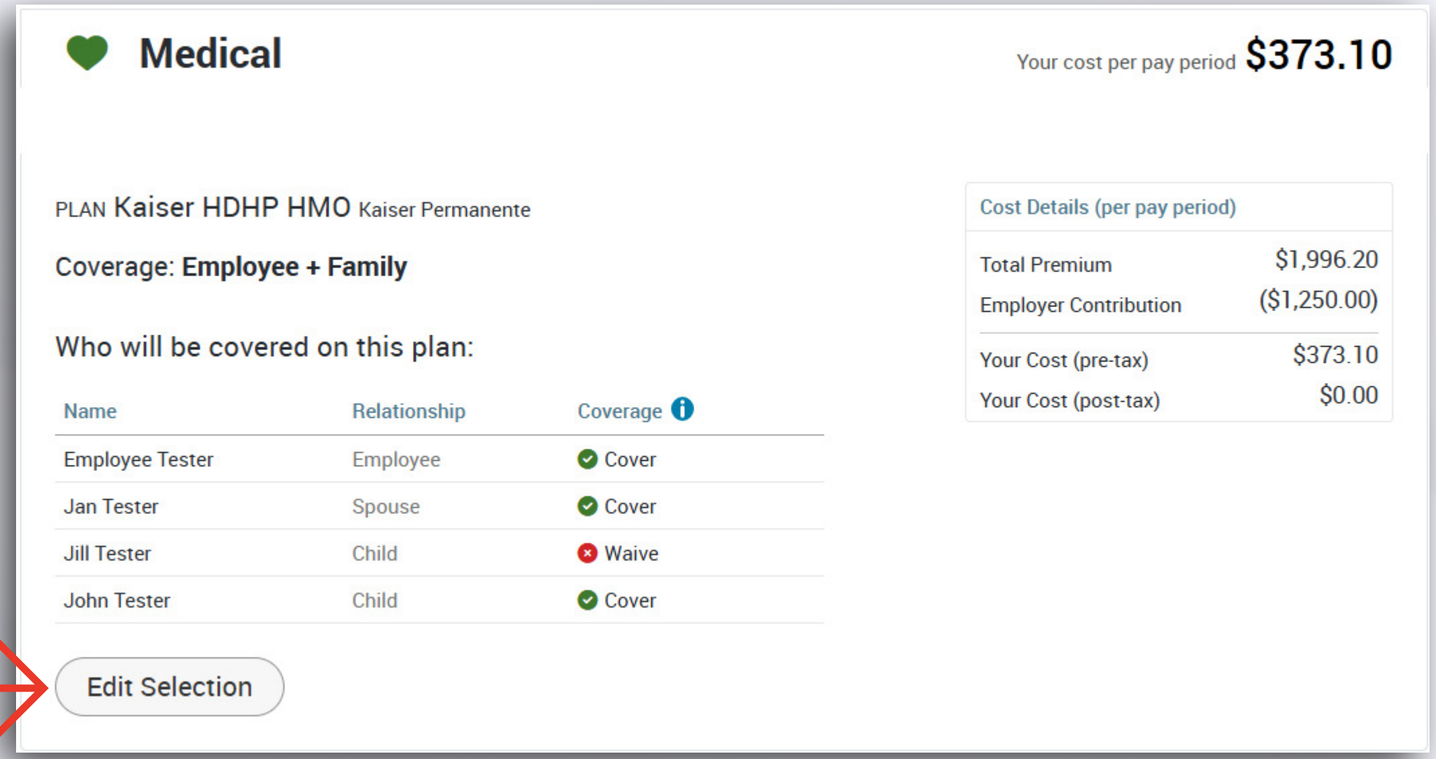
To learn the differences between the two plans and choose which one is right for you, learn more here: ARAG Plan Information

Final Review

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Please carefully review your final benefits elections ensuring that any dependent(s) you wish to enroll are selected under the appropriate coverages. If you need to make any edits, be sure to do that before completing your enrollment. Your next opportunity to make changes will be during the next open enrollment period or within 31 days of a qualifying life event.

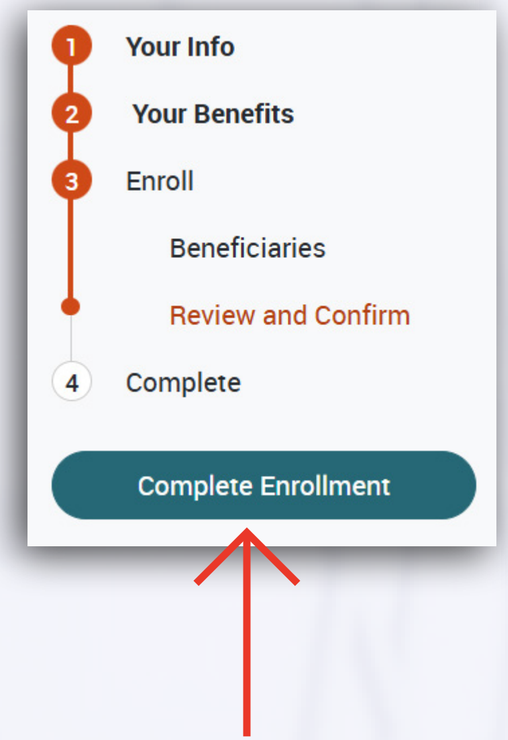
To make changes to any of your elections, simply click the **'Edit Selection'** button under the corresponding coverage

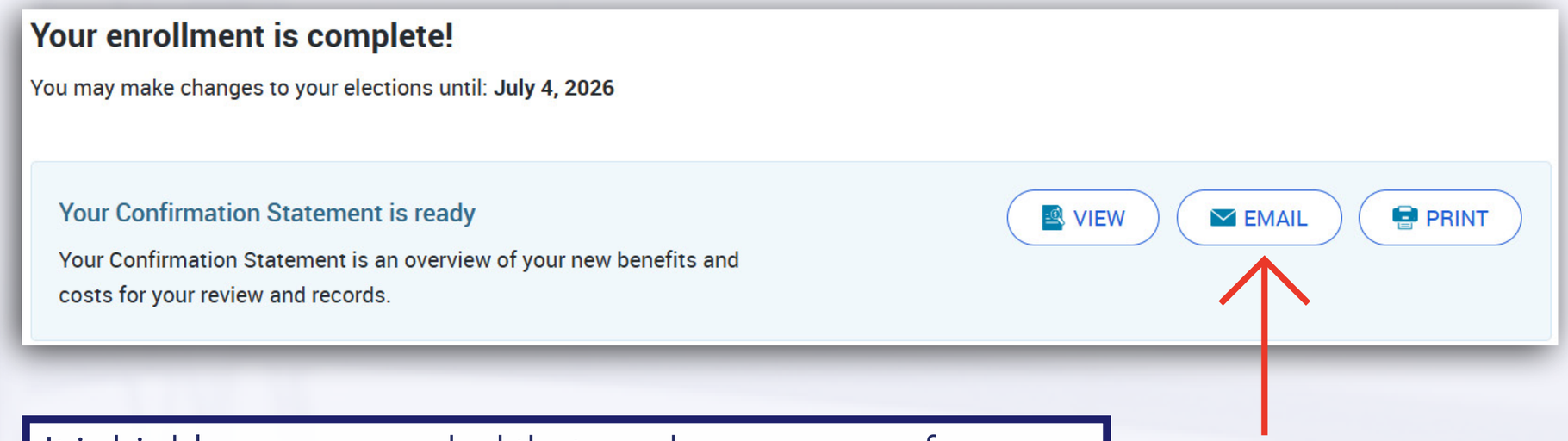


Complete Your Enrollment

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Once you have double-checked your benefit elections are correct, then click the 'Complete Enrollment' button. Once your enrollment is complete, you will have the option to view, email or print your benefits confirmation statement.





It is highly recommended that you keep a copy of your benefits confirmation statement for your records.

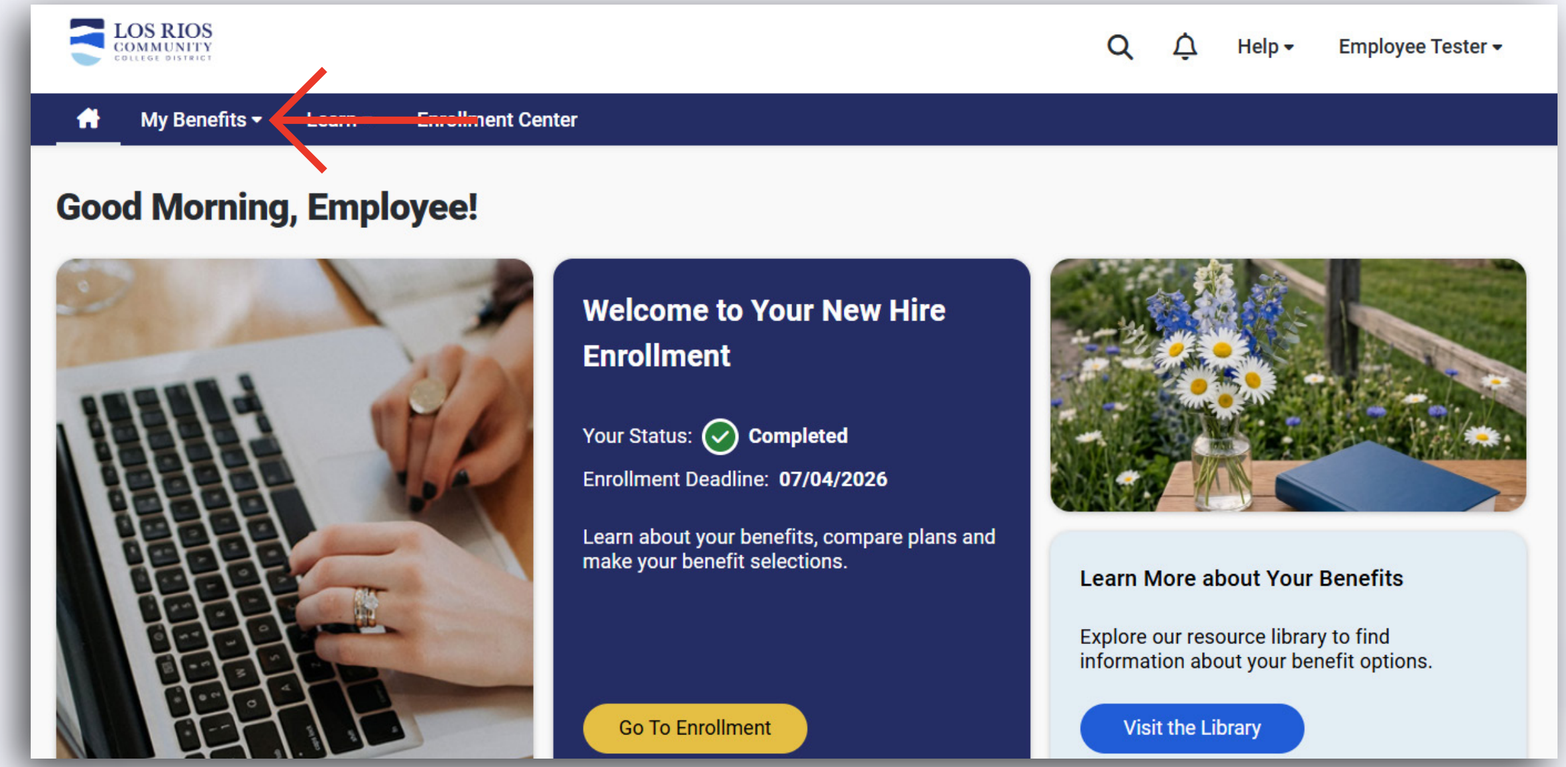
To view, email, or print your benefits confirmation statement, simply click the corresponding button.

Benefits Confirmation Statement

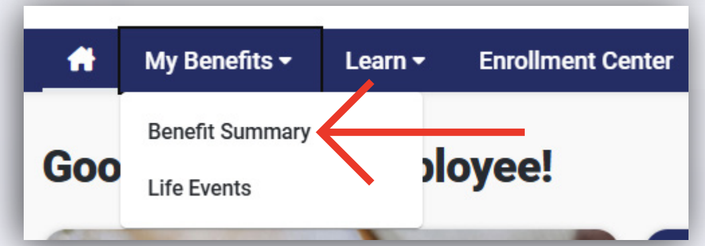
Return to Table of Contents

You can view or print your benefits confirmation at any time from your benefits homepage.

From your benefits homepage, click the dropdown menu next to **'My Benefits'**



Then, click on **'Benefit Summary'**

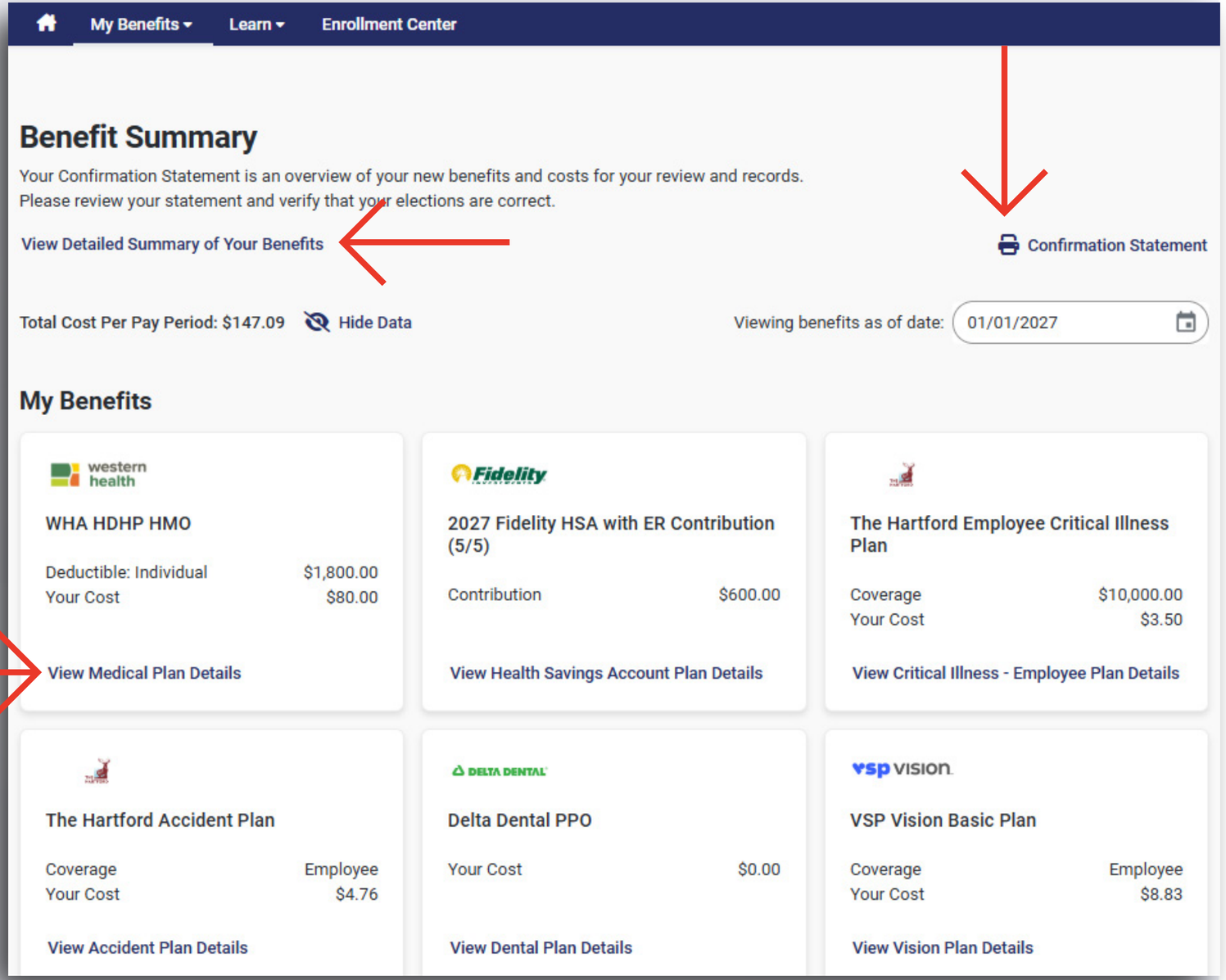


Benefits Confirmation Statement

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Once you are on the Benefit Summary page, you have several options.

1. Click on **'View Detailed Summary of Your Benefits'** to view a detailed page of your benefits elections that includes your dependent(s) under each corresponding coverage. This can be emailed or printed.
2. Click on **'Confirmation Statement'** next to the print icon to quickly print an overview of your benefits not including your dependent(s).
3. Click on **'View Plan Details'** on any tile to review your dependent(s) and cost breakdown.



Pet Insurance

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Get pet insurance for your fur family provided by MetLife. Enrolling in pet insurance through Los Rios will give you access to preferred pricing and reimbursement for covered vet visits, accidents, illness and more. This coverage can be purchased at any time throughout the year directly through MetLife's website.

How much will it cost?

The premium will be unique based on the age, breed, location, and coverage amount that you select. There is no age requirement or breed restrictions associated with starting coverage for your pet.

All costs will be paid by the employee directly to MetLife

MetLife | Pet Insurance



How to use this benefit

- To enroll, contact MetLife directly at (800) 438-6388 or visit quote.metlifepetinsurance.com/pet
- Download the MetLife Pet Mobile App to manage your policy, access health records and locate nearby services.
- Take your pet to receive care, then submit any claims using the mobile app and receive your reimbursement via check or direct deposit from MetLife.

BenefitHub Discount Marketplace

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This benefit - which is exclusive for you - allows you to access thousands of amazing discounts that you cannot find anywhere else. You will find deals on travel, restaurants, shopping, family care, car rentals, your favorite local establishments, financial wellness tools and much more! All through an easy-to-use online marketplace.

How to use this benefit

- Go to https://losrios.benefithub.com/app/home
- Enter the access code: **7L98M6**
- Create your account and start saving!

Scan the code

Google Play Mobile App

Apple Mobile App

BenefitHub™



Discount Marketplace

- Travel
- Tickets
- Benefits+
- 4th of July Deals
- Daily Deals

***Questions? Call (866) 664-4621 or email customercare@benefithub.com*

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Retirement Planning with 403(b) & 457 Savings Plans

As an employee of an educational institution, you may participate in a tax-deffered retirement savings plan as authorized by Sections 403(b) and 457 of the Internal Revenue Code. Through these programs, you can save a portion of your pay before federal and state income taxes. Funds are only taxed when withdrawn (usually at retirement - you may face penalties for early withdrawals). There is risk associated with a 403(b) and 457 plan, as funds are not insured and are subject to earnings or losses based on investment choices and market performance.

How to Enroll

1. Pick Your Investment Provider - choose an investment provider from the approved list of vendors. You can find this list included in the **403(b) and 457 Account Information and How to Enroll (PDF)**.

2. Establish Your Account - once you select a provider, ask for their 403(b) and 457 plan information and complete their provided application for the plan(s) you wish to establish.

3. Complete the Salary Reduction Agreement (SRA) - Once your account is established, complete the SRA through the Envoy website here **https://envoy.tsacg.com/index.php?e=3835**. This form provides the necessary information for Los Rios to initiate your payroll deductions. Keep copies of your SRA confirmation for your records. You may change your deduction at any time by submitting a new SRA.

***Please note that enrollment and deduction transactions are subject to month-to-month cutoff dates to meet specific IRS and payroll deadlines.*

Learn More: 403(b) and 457 Account Information and How to Enroll (PDF)

Vacation & Sick Leave Accruals

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Each Bargaining Unit has their own guidelines regarding paid leaves and how you accrue them. Please click on your corresponding bargaining unit below to view your summary of paid leaves.

- Confidential
- LRCEA
- LRSA
- Management
- Faculty as Interim Management
- SEIU

Other Important Leave Documents:

- Reporting Absences for Classified Staff
- Parental Leave Guide for Classified Staff & Management
- Effect of Unpaid Leave on Benefits

Learn More: Benefits Forms for Active Employees

Sick Leave Transfers

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If you have accrued, unused sick leave from a California public school district, community college district or county office of education, then you can transfer that sick leave to your Los Rios balance. Per the California Education Code, a sick leave transfer to Los Rios can only be accepted if the transferring California employer is a public school district, community college district or county office of education. Sick Leave transfers will comply with California Education Code (87782, 87783 and 88202, Los Rios Community College District collective bargaining agreements, and Los Rios Board Policies.

How to Transfer Unused Sick Leave

- Complete the top portion of the **Los Rios Sick Leave Transfer Form.**
- Send the form to your former district to complete, then email the completed form to benefits@losrios.edu.
- The Benefits Department will let you know once the transferred sick leave is reflected in your Los Rios totals.

Contact the Employee Benefits Department

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Hours:

Monday through Friday
8:00am - 4:30pm

Location: We are located inside the Employee Benefits Building at the District Office

1919 Spanos Court
Sacramento, CA 95825

Email: Benefits@losrios.edu

Phone: (916) 568-3070

Nicole Keller
Employee Benefits Supervisor
kellern@losrios.edu
(916) 568-3197

Gina de la Torre
Employee Benefits Specialist
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