

Article V

HEALTH AND WELFARE BENEFITS

The District and Association ~~will maintain the~~ agreed upon health and welfare benefit coverages through CalPERS, ASCIP (~~Alliance of Schools for Cooperative Insurance Programs~~). These include a choice of the ~~a 90/10 Anthem Prudent Buyer PPO, 80/20 PPO, Anthem California Care HMO, or the Kaiser Health Plan (including vision care)~~. Vision coverage for ~~non-Kaiser both Anthem~~ plans is through VSP. ~~The Dental coverage plan for all three medical plans is provided through Delta Dental Service Plan. All plans will include coverages for the unit member and his/her eligible dependents.~~

Booklets and Summaries for all medical/dental/vision plans are available at the District web site: www.simivalleyusd.org under Benefits Information. User ID: SVUSD and Password: **benefits1**

Unit members who work at least 0.5 FTE are eligible for these benefits unless they are in a position that specifically excludes benefits.

Retirees and dependents shall have the opportunity to take part in the Health & Welfare benefit area as the law allows. (See Article IX)

For the duration of this contract, July 1, 2015 through June 30, 2018, the District and SEA agree to pursue the cost savings in the current medical plans. The primary changes agreed to are listed below:

- Bargaining Unit Members will be charged a monthly fee (11 months/year) toward the cost of medical benefits. See the chart below for Employee Contribution Amounts.
- Spouses/Domestic Partners of Bargaining Unit Members who are eligible for medical benefits through the employer of the Spouse/Domestic Partners and/or a retirement plan, at a cost less than or equal to \$250 per month, will not be provided primary medical benefits through our District. However, they may remain on our plan for secondary coverage and be charged the Spouse rate (see chart).
- Spouses/Domestic Partners who are both employees of the District may elect to have one medical plan and, if so, the District agrees to waive the employee monthly fee for medical benefits and the office visit co-pay fees.

Effective January 1, 2015 there is no longer a requirement to fill maintenance medications via mail order, although mail order continues to be an available option.

- SVUSD uses the language from the California Secretary of State for domestic partners. Same sex couples who have a Domestic Partnership registered with the State of California qualify for all of our medical plans. In the case of opposite sex couples, one person must be 62 years of age or older to qualify.

~~Medical changes made as a result of the move to ASCIP remain in place. Open Enrollment will occur in the fall prior to the effective date of January 1 of the following year.~~

- Open Enrollment will occur each October. Employees will have the opportunity to evaluate the offered CalPERS plans and be able to change coverage with an effective date of January 1 of the following year.
- Beginning 7/1/2011, a tiered monthly fee will be in place for all SVUSD employees.
- Refer to the chart below for contributions effective 7/1/2014
- Beginning 1/01/2018 the following tiered monthly medical contribution structure will be in effect.

	HIGH COST PLANS	MEDIUM COST PLANS	NO COST/LOW COST PLANS
	PERS Care PPO 90/10 Anthem HMO Select Anthem Trad. HMO	Kaiser PERS Choice PPO, 80/20	Blue Shield Access HMO PERS Select PPO HealthNet SmartCare HealthNet Salud y Mas United HealthCare
Employee Only	\$750	\$375	\$0
Employee and one child	\$1500	\$750	\$0
Employee and two or more children	\$2250	\$1125	\$0
Employee and Spouse	\$2250	\$1125	\$0
Employee/Spouse/Child	\$3000	\$1500	\$0
Employee/Spouse/Children	\$3750	\$1875	\$0

On an annual basis the District and SEA will meet after the medical benefit rates are released to determine no cost/low cost, medium cost and high cost plans.

When the cost of medical benefits to the District equals 18% of certificated salaries, the two parties shall negotiate a solution for medical benefit cost containment for the District. In September the parties will evaluate the impact of medical benefit costs for the subsequent year based on:

Prior year's unaudited actuals.

Prior year's medical benefit increase.

(i.e. In September 2017 the two parties will convene to determine if the 18% threshold has been or will be met in 2018/2019 using the 2016/2017 unaudited actuals and the 2017 benefit year increase.)

When the threshold has been met or appears that it will be met in the subsequent year, the parties will come back to the table between November 1 and March 1. If a resolution is not reached the District and SEA will go to impasse.

If progress is being made, both parties may agree to add additional sessions before impasse is declared

Compensation Bargaining Language

The District and Association (SEA) recognize that certificated employees are compensated by the District for service by way of salary, health and welfare benefits, and statutory benefits that include STRS (retirement), Medicare and life insurance. The District and Association also recognize that any future compensation percentage increase impacts all compensation mentioned above.

Coverage Type	Monthly Employee Contribution Amount		
	10-month	11-month	12-month
Employee only	\$75	\$68.28	\$62.50
Employee and one child	\$150	\$136.36	\$125.00
Employee and two or more children	\$225	\$204.54	\$187.50
Spouse add-on	\$150	\$136.36	\$125.00