



San Joaquin Valley College, Inc.
Employee Healthcare & Insurance Benefits

Plan Year: 2019 – 2020

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INTRODUCTION

San Joaquin Valley College, Inc. (SJVCI) strives to provide you and your family with a comprehensive and valuable benefits package. The role of this enrollment guide is to aid you in maximizing your benefits. This guide will outline the health and wellness benefits SJVCI offers, so you can identify which offerings are best for you and your family.

Elections you make during enrollment will become effective the first of the month following 60-days of employment. If you have questions about any of your benefits, please do not hesitate to reach out to askHR@embered.com.

Who is eligible?

If you work an average of 30 or more hours a week, you are eligible to enroll in the benefits outlined in this guide. In addition, the following family members are eligible for medical, dental and vision coverage: Legal Spouse, Domestic Partner, and Children to age 26 (regardless of student status.)

How to enroll

You will need to enroll on our self-service benefits website at <http://SJVC.bswift.com>. The username is your full first and last names; an example is that Mike Smith will need to enter michaelsmith (without a space between the first and last names). The initial password is the last 4 digits of your Social Security number and you will then be prompted to change it. You will need to input the birthdates and social security numbers for any dependents that you enroll in our benefit plans. To save time, please have that information available.

When to enroll

You will be notified via a work email from bswift, our automated benefits website, when you can enroll. The benefits you choose during enrollment are effective through June 30, 2020.

How to make changes

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period. Examples of qualifying events include:

Marriage, divorce or legal separation

Birth or adoption of a child

Change in child's dependent status

Death of a spouse, child or other qualified dependent

Change in residence

Change in employment status or a change in coverage under another employer-sponsored plan

MEDICAL AND PHARMACY

Our medical plans are through UMR, a United HealthCare company. The below chart summarizes our medical plan options for In-network benefits. Details on out-of-network medical benefits are on the bswift website.

COVERAGE	PPO 500	PPO 2000	HSA 2500
Deductible (Individual/Family)	\$500/\$1,000	\$2,000/\$4,000	\$2,500/\$5,000 (No one member will have more than \$2,700 per individual if enrolled as family.)
Calendar Out-of-Pocket Maximum (Individual/Family) Includes medical deductible, coinsurance, and medical copays.	\$3,000/\$6,000	\$3,500/\$7,000	\$5,000/\$10,000 (No one member will have more than \$5,000 per individual if enrolled as family.)
Preventive Care	Covered in Full	Covered in Full	Covered in Full
Office Visits (Primary and Specialists)	\$35 Copay (Deductible Waived)	\$35 Copay (Deductible Waived)	Deductible, then 20%
Office Visits (Teladoc/Retail Health)	\$0/\$20 Copay (Deductible Waived)	\$0/\$20 Copay (Deductible Waived)	Deductible, then 20%
Hospital Stay	Deductible, then 20%	Deductible, then 20%	Deductible, then 20%
Outpatient Surgery	Deductible, then \$125/Surgery + 20%	Deductible, then \$125/Surgery + 20%	Deductible, then 20%
Emergency Room	Deductible then \$100/Visit + 20%	Deductible, then \$100/Visit + 20%	Deductible, then 20%
Urgent Care	\$35 Copay (Deductible Waived)	\$35 Copay (Deductible Waived)	Deductible, then 20%
Lab Work	Deductible, then 20%	Deductible, then 20%	Deductible, then 20%
X-ray	Deductible, then 20%	Deductible, then 20%	Deductible, then 20%
MRI and CT Scans	Deductible, then 20%	Deductible, then 20%	Deductible, then 20%

COVERAGE	PPO 500	PPO 2000	HSA 2500
Acupuncture and Chiropractic	\$25 Copay, 12 Visits per year (after Deductible)	\$25 Copay, 12 Visits per year (After Deductible)	Deductible, then 20%
RX – Through Optum			
Out-of-pocket Maximum (Individual/Family)	\$3,600/\$4,200	\$3,850/\$7,700	Applies towards medical deductible and out of pocket maximum.
Generic (Tier 1)	\$10 Copay	\$10 Copay	Deductible, then 20%
Brand Deductible	\$150	\$150	Deductible, then 20%
Preferred Brand (Tier 2)	\$20 Copay	\$20 Copay	Deductible, then 20%
Non-Preferred Brand (Tier 3)	\$35 Copay	\$35 Copay	Deductible, then 20%
Specialty	30% to \$150 Max	30% to \$150 Max.	Deductible, then 20%
Mail order	2 copays/ 90 day supply	2 copays/ 90 day supply	Deductible, then 20%

All plans utilize a UHC Network.

- United Healthcare Select Plus (for California Residents).
- United Healthcare Choice Plus Network (outside of California.)

Things to keep in mind while using an out of network provider:

- Out of network costs are higher
 - A separate out of network deductible and out-of-pocket maximum with higher coinsurance.
- You will be charged for anything that is over the contracted in network rate.
 - Also known as balance billing.

To find a provider:

- www.umar.com and select **Find a Provider**.
- Then enter UnitedHealthcare Select Plus (for California residents) or UnitedHealthcare Choice Plus (outside of California) and start your search.

VISION INSURANCE

Driving to work, reading a news article, and watching TV are all activities you likely perform every day. Your ability to do all these activities depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

Our vision insurance is embedded in each our medical plans at no additional cost. Our policy covers routine eye exams and other procedures, and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses. Offered through MES Vision. Visit www.mesvision.com to find a provider.

No ID card is required or provided for Vision

- Benefits: (In Network)
 - Eye Exam: One every 12 months – Covered in Full
 - Lenses: One Pair every 24 months – Covered in Full
 - Frames: One frame every 24 months – Up to a max. of \$75
 - Contact Lenses: One pair every 24 months – Allowance up to \$100.
 - \$15 Materials Copay

YOUR COST IN 2019-20: MEDICAL/RX/VISION

Your cost per paycheck- Wellness Participant (please see page 14 for a summary of our Wellness Program)

	PPO 500/RX/Vision	PPO 2000/RX/Vision	HSA 2500/RX/Vision
Employee Only	\$100	\$60	\$35
Employee + Spouse	\$240	\$200	\$145
Employee + Children	\$230	\$185	\$140
Employee + Family	\$340	\$285	\$210

Your cost per paycheck- Non-Wellness Participant:

	PPO 500/RX/Vision	PPO 2000/RX/Vision	HSA 2500/RX/Vision
Employee Only	\$118	\$78	\$53
Employee + Spouse	\$258	\$218	\$163
Employee + Children	\$248	\$203	\$158
Employee + Family	\$358	\$303	\$228

DENTAL INSURANCE

In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings and x-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart. Regular dental care can protect you and your family from the high cost of dental disease and surgery. Premier Access is our dental provider.

The following chart outlines the dental benefits we offer.

Base Plan:

Plan Pays Calendar Year	PCN Network Provider	PPO Network Provider	Non-Network Coverage - Based on Premier's Maximum Allowable Charge (MAC) Rates.
Deductible (waived for preventive)	\$25	\$50	\$50
Annual Maximum	\$1,500	\$1,500	\$1,500
Preventive	100%	100%	100%
Basic	90%	80%	80%
Major	60%	50%	50%
Orthodontia	50% to \$1,000	50% to \$1,000	50% to \$1,000

Cost per paycheck:

	Base - Dental Plan with Ortho
Employee Only	\$11
Employee + One	\$21
Employee + Two or more	\$32

Buy Up Plan:

Plan Pays Calendar Year	PCN Network Provider	PPO Network Provider	Non-Network Coverage based on the UCR amount at the 90 th percentile
Deductible (waived for preventive)	\$25	\$50	\$50
Annual Maximum	\$1,500	\$1,500	\$1,500
Preventive	100%	100%	100%
Basic	90%	80%	80%
Major	60%	50%	50%
Orthodontia	50% to \$1,000	50% to \$1,000	50% to \$1,000

Cost per paycheck:

	Buy Up - Dental Plan with Ortho
Employee Only	\$14
Employee + One	\$28
Employee + Two or more	\$43

DISABILITY INCOME BENEFITS

Our organization provides full-time employees with short- and long-term disability income benefits to protect you and your family during times of extended illness. Short-term disability insurance is provided at no cost to you—meaning you have no out of pocket premium costs.

Long-term disability has been highly requested by many employees and is now available to you. This is a voluntary benefit, whereby employees are responsible for the cost of premiums.

Long-term Disability:

- Offered through Guardian Insurance
- Monthly benefit of 60% of monthly salary to a maximum benefit of \$7,000.
- Coverage begins after 90 days of disability.
- Duration to Social Security Normal Retirement Age.
- Employee specific premium will be calculated for you on bswift where you can review your enrollment options.

BASIC LIFE INSURANCE

Life insurance can help provide for your loved ones in the event of your premature death. We provide all full-time employees at least \$15,000 of group life and accidental death and dismemberment (AD&D) insurance. Employees are not responsible for paying monthly premiums.

VOLUNTARY LIFE INSURANCE

In addition to the company-sponsored basic life, employees may want to purchase additional coverage. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future (for example, college tuition for your child)? Depending on your needs, you may want to consider buying supplemental coverage.

With voluntary life insurance, you are responsible for paying the full cost of coverage through biweekly payroll deductions. You can purchase coverage for yourself in \$10,000 increments. The maximum is five (5) times your annual earnings or \$500,000, whichever is less. Purchasing supplemental life enables you to purchase up to 50% of your coverage level for your spouse. For example, if an employee purchases \$50,000 in supplemental life, the spouse is eligible for \$25,000 of coverage. The guarantee issue amount for the employee is \$100,000; for the spouse it is \$30,000. This means that no evidence of insurability is required. Child life is available in increments of \$1,000 up to a maximum of \$10,000.

FLEXIBLE SPENDING ACCOUNTS

Paying for healthcare can be costly. We offer a flexible spending account (FSA) to help manage healthcare expenses.

What are the Benefits of an FSA?

There are several benefits of using an FSA, such as:

It saves you money. Allows you to put aside money tax-free that can be used for qualified medical expenses.

It is a tax-saver. Since your taxable income is decreased by your contributions, you will pay less in taxes.

It is flexible. You can use your FSA funds at any time during the plan year, even if it is the beginning of the year.

Medical FSA only available to those not electing the HSA option.

You cannot stockpile money in your FSA. **If you do not use it, you lose it.** You should only contribute the amount of money you expect to pay out of pocket that year.

What is Dependent Care FSA?

Dependent Care FSAs allow you to contribute pre-tax dollars to qualified dependent care. The maximum amount you may contribute each year is \$5,000 (or \$2,500 if married and filing separately).

How Do I Enroll?

FSA Enrollment must be performed through bswift during benefits enrollment. **You are ineligible to participate in the medical FSA if you are enrolled on the HSA 2500.**

FSA Case Study

FSAs provide you with an important tax advantage that can help you pay for healthcare expenses on a pre-tax basis. Due to the personal tax savings you incur, your spendable income will increase. The example that follows illustrates how an FSA can save money.

Bob and Jane's live in Texas and have a combined annual gross income of \$45,000. They are married and file their income taxes jointly. Since Bob and Jane expect to spend \$3,000 in eligible medical expenses in the next plan year, they decide to direct a total of \$2,000 (the maximum allowed amount per individual, for that taxable year) into their FSAs. The table demonstrates their savings.

	Without FSA	With FSA
Gross income	\$45,000	\$45,000
FSA contributions	\$0	(-\$2,000)
Gross income	\$45,000	\$43,000
Estimated taxes	(-\$5,532)*	(-\$4,999)*
After-tax earnings	\$39,468	\$38,001
Eligible out-of-pocket expenses	(-\$3,000)	(-\$1000)
Remaining spendable income	\$36,468	\$37,001
Spendable income increase	--	\$533

HEALTH SAVINGS ACCOUNTS

If you enroll in the HSA 2500 plan, you will be automatically enrolled in a Health Savings Account (HSA). HSAs are a great way to save money and budget for qualified medical expenses. HSAs are tax-advantaged savings accounts that accompany high deductible health plans (HDHPs).

What are the Benefits of an HSA?

There are many benefits of using an HSA, such as:

It saves you money. HDHPs have lower monthly premiums, meaning less money is being taken out of your paycheck.

It is portable. The money in your HSA is carried over from year to year and is yours to keep, even if you leave the company.

It is a tax-saver—HSA contributions are made with pre-tax dollars. Since your taxable income is decreased by your contributions, you will pay less in taxes.

If participating in the HSA you cannot contribute to and medical FSA.

The maximum amount that you can contribute to an HSA in 2019 is \$3,500 for individual coverage and \$7,000 for family coverage.

Additionally, if you are age 55 or older, you may make an additional “catch-up” contribution of \$1,000. You may change your contribution amount at any time throughout the year as long as you do not exceed the annual maximum.

SJVC will contribute per pay period:

Single: \$13.47 per pay period/\$350 annually

Family: \$30.77 per pay period/\$800 annually

HSA Case study

Justin is a healthy 28-year-old single man who contributes \$1,000 each year to his HSA. His plan’s annual deductible is \$2,500 for individual coverage. Here is a look at the first two years of Justin’s HSA plan, assuming the use of in-network providers. (This example only includes HSA contribution amounts and does not reflect any investment earnings.)

Year 1	
HSA Balance	\$1,000
Total Expenses:	
- Prescription drugs: \$150	(-\$150)
HSA Rollover to Year 2	\$850
Since Justin did not spend all of his HSA dollars, he did not need to pay any additional amounts out-of-pocket this year.	



Year 2	
HSA Balance	\$1,850
Total Expenses:	
- Office visits: \$100	
- Prescription drugs: \$200	(-\$300)
- Preventive care services: \$0 (covered by insurance)	
HSA Rollover to Year 3	\$1,550
Once again, since Justin did not spend all of his HSA dollars, he did not need to pay any additional amounts out-of-pocket this year.	

401(k) RETIREMENT PLAN

Our 401(K) plan provides you the opportunity to create a retirement saving plan and enable it to grow through various investment options. Our plan administrator is The Standard (www.standard.com/retirement).

Eligibility

The 401(k) plan is an Automatic Enrollment Plan. You will be automatically enrolled the first day of the month coinciding with or next following the date after completion of two (2) months of service.

Upon meeting eligibility and being automatically enrolled in the plan you will begin participating by contributing 3% of your salary to the retirement plan. You can opt out or change your contribution percentages anytime by logging onto your account online. Additionally, you will have 90 days after your automatic enrollment date to opt out and request a refund of your automatic contributions.

Pre-Tax Employee Contributions

Employees that participate in the company 401(k) plan are limited to how much they can contribute to the plan. Most employees will be able to contribute up to the maximum amount listed on the chart below. If you are considered a Highly Compensated Employee, your annual maximum contribution may be limited depending on the result of the annual discrimination test. The plan may be required to return some of your plan contributions.

Employees may increase or decrease their contribution and stop making contributions at any time.

** You may be eligible for a tax credit of 10% to 50% of the first \$2,000 you defer, depending on your adjusted gross income – the lower your income, the higher your credit rate. Please see your tax advisor for additional details.*

IRS Maximum Pre-Tax Contributions

Year	Under 50 yrs old on 12/31	Over 50 yrs old by 12/31
2019	\$19,000	\$25,000

Company Contributions

The company may make a discretionary matching contribution to the plan. The company may also make a discretionary profit sharing contribution to the plan on behalf of all eligible employees.

Employer Matching Contributions and Employer Profit Sharing Contributions

You will be eligible to participate the first day of the Plan Year quarter coinciding with or next following the date after completion of one (1) year of service.

Rollover Contributions

You may roll over your Plan account balance from a prior qualified retirement plan at any time.

Vesting

Employee contributions are always 100% vested. Any money you roll over into the Plan is always 100% vested. Effective November 1, 2012, all employer matching and profit sharing contributions are 100% vested.

Loans

You may take out a loan as long as you have a vested Plan account balance. The minimum loan amount is \$1,000 and the maximum loan amount is \$50,000. You may have a maximum of 1 outstanding loan at any time. An application fee for \$100 will be charged for online loan processing.

Withdrawals

If you meet the definition of hardship, you may withdrawal from the Plan while you are still employed, to request a hardship withdrawal, contact The Standard at **(800) 858-5420**.

If you leave for any reason (including retirement after age 65), you may withdraw your vested account balance. While you are still employed, you may make limited withdrawals from your account if you experience a severe financial hardship (as defined by the IRS).

1. Plan contributions may be withdrawn only in the event of:

- Retirement
- Death
- Disability
- Termination of service
- After age 59 1/2 while still employed

2. Options at Termination:

- Rollover to IRA
- Rollover to another 401(k)
- Personal Check to employee

**A 10% federal tax penalty and additional state taxes may apply. Loans must be taken before financial hardships.*

529 COLLEGE SAVINGS PLAN

529 Plan provided by American Funds College America

For more information contact: Phil or Marty Pigott

Customer Service Number: (800) 319-9592

The purpose of a 529 College Savings Plan is to help save money for a beneficiary's college expenses. Contributions to a 529 College Savings Plan are made on an after-tax basis and will be made by establishing automatic payments from your checking or savings account. Contributions to a 529 College Savings Plan is allowed to grow tax free*. The initial contribution plus earnings can be withdrawn tax free if used to pay for eligible college expenses (tuition, books, room and board, etc.). If money is withdrawn for reason other than to pay eligible college expenses, the investment earnings on that withdrawal will be taxed and will receive a 10% penalty from the IRS.

A 529 can be established for any living beneficiary (related or unrelated) and beneficiaries can be changed at the owner's discretion. Contributions can be made to a future unborn child's college fund by assigning you (the owner) as the beneficiary then subsequently replacing the child as the beneficiary upon birth.

Contributions are invested in American Funds 529 E-Share Mutual Funds which have no sales load (up front or deferred) and have relatively low average annual expense ratios of around 1.25%. There are 22 funds to choose from which range in investment objective and risk. American Funds has established a \$25 minimum per fund for each automatic purchase through your banking account. Investors in 529 plans can only change their investment election once per year.

**While contributions grow tax free, distributions for anything other than eligible college expenses will be taxed (only the investment gain) and incur a 10% penalty from the IRS.*

TUITION ASSISTANCE

Family Tuition Assistance

The Family Tuition Assistance benefit offers full-time employees with one year of service tuition assistance for spouses and qualified dependents to attend SJVC or CC programs. The employee must be the parent or legal guardian of the dependent.

The amount of tuition assistance is tiered based on length of service. The year one benefit is 20% of the total program cost. This amount increases by 20% each subsequent year, up to a maximum 100% discount at five or more years of service.

Employee Tuition Assistance

Full-time employees with one year of service are eligible for a one-time tuition assistance benefit to attend an SJVC or CC program, provided that the commitment to classes and study does not interfere with the employee's ability to perform his/her regular job duties. This benefit targets employees interested in making a career change by attending our colleges.

The amount of tuition assistance is tiered based on length of service. The year one benefit is 10% of the total program cost. This amount increases by 10% each subsequent year, up to a maximum 50% discount at five or more years of service.

There may be occasions where the organization identifies certain employees to attend our colleges to facilitate professional growth and meet our organizational objectives. In these cases, both the length of service requirement and amount of Employee Tuition Assistance will be considered on a case-by-case basis.

EMPLOYEE SCHOLARSHIP

Full-time employees with one year of service may be eligible for scholarship support to pursue higher education at other colleges or universities. Employee Scholarship applications are considered individually. Award decisions are based on the employee's role in the institution, and the direct relationship between the academic program and the employee's increased value and productivity in their assigned duties.

Recipients for all of our tuition assistance programs must meet applicable College and program entrance requirements.

EMPLOYEE ASSISTANCE PROGRAM

Our Employee Assistance Program (EAP) is called "WorkLifeMatters" and is available through Integrated Behavioral Health (IBH). They are a partner of Guardian, who is our disability insurance and leave management provider. This program provides you and your family members with confidential, personal and web-based support on a wide variety of important and relevant topics such as stress management, dependent and elder care, nutrition, fitness and legal and financial issues.

This employee assistance program includes:

- Telephonic Counseling – Unlimited, 24/7 consultations with master's and doctoral-level counselors.
- Face-to-face Counseling - Up to 3 visits per employee/household per year.
- Bereavement Support
- Tobacco Cessation Coaching
- Legal Consultation
- Financial Consultation
- ID Theft resolution and education
- Will Prep
- Online Self-Service Documents: Including but not limited to: Living Trust, Will, Power of Attorney, Deeds.

We encourage you to log into the website www.ibhworklife.com to find basic information on a number of valuable services and/or review the attached program summary.

Employee Login: **Matters**

Password: wlm70101

The phone number to this service is 800.386.7055. They are available 24 hours a day, 7 days a week.

HOLIDAYS

All eligible employees in full-time positions (including temporary full-time positions) will be entitled to receive holiday pay for:

New Year’s Day	Veterans’ Day
Martin Luther King Day	Thanksgiving Day
Presidents’ Day	Day after Thanksgiving Day
Memorial Day	Christmas Eve
Independence Day	Christmas Day
Labor Day	

If one of these holidays occurs on a weekend, the holiday will be observed either the Friday before or the Monday after. Non-exempt employees scheduled to work less than eight hours on any of these holidays will be paid only for the hours normally scheduled. Employees working an alternative workweek schedule will be paid for the hours normally scheduled.

VACATION

Vacation time is accrued based on length of service. Regular employees—those working an average of 20 hours per week—are eligible for vacation time. Employees working fewer than 20 hours per week are not eligible for vacation. Time-off for exempt employees is reflected in days and time-off for non-exempt employees is reflected in hours. Vacation time must be approved by a manager in advance and may only be taken if the time is accrued. Unused vacation will rollover to the following year but will be capped at 175%.

Type	Work Hours/Week	0-5 Years Service	6-12 Years Service	13-19 Years Service	20+ Years Service	Rollover	Cap
Full-time	40	10 days (80 hours)	15 days (120 hours)	20 days (160 hours)	25 days (200 hours)	Yes	175%
Full-time	35 – 39	9 days (72 hours)	14 days (108 hours)	18 days (144 hours)	23 days (180 hours)	Yes	175%
Full-time	30 - 34	8 days (64 hours)	12 days (96 hours)	16 days (128 hours)	20 days (160 hours)	Yes	175%
Part-time	20 - 29	5 days (40 hours)	8 days (60 hours)	10 days (80 hours)	15 days (120 hours)	Yes	175%

SICK LEAVE

Sick leave should be used when an employee is unable to attend work due to illness. Full-time, regular employees accrue 40 hours (5 days) of sick leave per year. Full-time, non-exempt employees earn leave in hour increments; whereas full-time, exempt employees earn leave in day increments. All part-time employees will accrue 1 sick hour for every 30 hours worked.

Unused time will rollover to the following year but will be capped as outlined below:

Type	Exempt Employees			Non-Exempt Employees		
	Accrual	Rollover	Cap	Accrual	Rollover	Cap
Full-time	5 days	Yes	10 days	40 hours	Yes	80 hours
Part-time	1 hour per 30 hours worked	Yes	48 hours	1 hour per 30 hours worked	Yes	48 hours