



# Human Resources Department

## SAN LUIS OBISPO COUNTY

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DATE: September 12, 2016

TO: San Luis Obispo County Retiree

FROM: Cecilia Fontes, Benefits Manager

SUBJECT: OPEN ENROLLMENT - COUNTY HEALTH, DENTAL AND VISION PLANS

Open enrollment provides you with the opportunity to enroll in health, dental and vision plans, change health plans and add or delete dependents from your coverage. The open enrollment period **starts September 12, 2016 and ends October 7, 2016**. **The selections you make during open enrollment will be effective January 1, 2017.**

- ***Attention All Retirees: It is very important that you inform Pension Trust of any changes you make directly with CalPERS so that your records will accurately reflect what coverage you have selected and that proper premiums are being deducted from your monthly benefit.***
- If you are not making any changes to your health, dental or vision plans, ***you do not need to do anything during open enrollment.***
- **Planning to move?** Before you move don't forget to give Pension Trust your new address.

Retirees currently enrolled in a CalPERS health plan should have already received the "Open Enrollment News" from CalPERS. Open Enrollment publications are available online at: [www.calpers.ca.gov](http://www.calpers.ca.gov) or [http://www.slocounty.ca.gov/hr/employeebenefits/Health\\_\\_Dental\\_\\_Vision.htm](http://www.slocounty.ca.gov/hr/employeebenefits/Health__Dental__Vision.htm)

**OPEN ENROLLMENT FAIR**  
**THURSDAY, SEPTEMBER 22, 2016 from 9:00 – 2:00**  
**Veteran's Hall 801 Grand Ave, San Luis Obispo**  
**This is your opportunity to talk to representatives from United Healthcare,**  
**Blue Shield HMO, Anthem, Aetna Dental, and VSP**

### INFORMATIONAL MEETINGS AT PENSION TRUST

Retirees can call Pension Trust 781-5465 to schedule an appointment with County Benefits Manager to discuss 2017 benefit plan options. Appointments available September 13, from 9:00 am – 12:00 pm, September 23, from 10:00 am – 1:00 pm and September 27, from 9:00 am – 12:00 pm.

## **Attention Blue Shield NetValue Members**

Blue Shield NetValue will not be available starting in January 2017.

- If you are currently enrolled in Blue Shield NetValue and ***DO NOT*** make a plan change during Open Enrollment you will automatically be moved to Blue Shield Access+.

## **2017 HIGHLIGHTS**

- CalPERS 2017 Health Plan Rates
  - Blue Shield Access+ HMO 18.87% increase
  - Anthem Traditional HMO 12.43% increase
  - PERS Select PPO 1.32% increase
  - PERS Choice PPO 4.49% increase
  - PERS Care PPO 5.35% increase
  - PORAC PPO 8.0% increase
- New United Healthcare HMO
- New United Healthcare Combo Plans
- Aetna Dental 5% increase
- VSP Vision - no change in rates – increase in frame and contact lenses allowance

## **HOW TO ENROLL IN HEALTH, DENTAL AND VISION PLANS**

During Open Enrollment, retirees can make health plan changes online at [my.calpers.ca.gov](http://my.calpers.ca.gov), by calling CalPERS toll free at 888-225-7377 or by writing to CalPERS Health Account Services PO Box 942715, Sacramento, CA 94229-2715.

- **Please inform the Pension Trust of any changes you make with CalPERS in order to accurately reflect what coverage you have selected and that the proper premium is being deducted from your monthly benefit.**

To enroll in dental or vision please contact Pension Trust (781-5465) to obtain enrollment information. Completed enrollment forms must be returned to Pension Trust before October 7, 2016. Your coverage will be effective January 1, 2017.

- You must provide a copy of your Marriage Certificate/Declaration of Domestic Partnership or an Affidavit of Marriage and dependents social security number when adding a spouse/domestic partner to your health plan.
- You must provide a copy of the birth certificate and social security number when adding a dependent child to your health plan.

## **VSP (Vision Service Plan)**

You may use any licensed eye care professional but you will receive a higher level of benefits if you use a VSP contracting provider. You are responsible for any charges exceeding the VSP schedule of benefits. Before seeing a non-VSP provider, it is recommended that you call VSP 800-877-7195 for more details or visit the VSP website at [VSP.com](http://VSP.com).

- VSP benefits provide one eye examination and lenses in a 12-month period.
- Frames in a 24-month period – 2017 increased allowance \$175.00 from \$150.00
- Contact lenses 2017 increased allowance \$150.00 from \$140.00
- \$10.00 deductible for the exam and a \$25.00 deductible for frames and lenses.

Retirees enrolled in supplement to Medicare or Managed Medicare Plans should review the vision care benefits provided in their health plan before enrolling in the County's VSP plan.

<b>VSP (Vision Service Plan) PREMIUMS - EFFECTIVE JANUARY 1, 2017</b>			
<b>Monthly Premium</b>	<b>Single - \$9.54</b>	<b>2-Party - \$14.54</b>	<b>Family - \$23.52</b>

**Aetna Dental DMO**

**This is only a partial listing of plan benefits. Refer to the AETNA contract for exact terms and conditions.**

<b>PROVIDERS</b>	Member must select one panel dentist. Please refer to the list of local AETNA providers at the bottom of this page. For a list of providers throughout California contact AETNA at www.aetna.com				
<b>MAXIMUM COVERAGE</b>	Unlimited				
<b>OUT OF AREA EMERGENCY</b>	Member may receive treatment from any dentist that is more than 50 miles from assigned panel dentist. Member will receive up to \$100 reimbursement per emergency, less any applicable co-payment during any twelve-month period.				
<b>COVERED SERVICES</b>	<ol style="list-style-type: none"> <li>1. You pay nothing for many dental services, including office visits, x-rays and cleanings.</li> <li>2. You pay a co-payment at time of service for the following procedures: <ol style="list-style-type: none"> <li>a. Amalgam Fillings - no cost,</li> <li>b. Crown porcelain/ceramic \$185 each *</li> <li>c. Soft Tissue Extraction - no cost</li> <li>d. Partial Bony Extraction - \$45 (each tooth)</li> <li>e. Full Bony Extraction - \$60 (each tooth)</li> <li>f. Subgingival Curettage - \$40 (each quadrant)</li> <li>g. Gingivectomy - \$75 (each quadrant)</li> <li>h. Mucco-Osseou Surgery - \$250 (each quadrant)</li> <li>i. Full Denture - \$300 (each)</li> <li>j. Partial Denture – upper or lower \$300</li> <li>k. Repair Complete Denture - \$35</li> <li>l. Space Maintainer - no cost</li> </ol> </li> </ol> <p>* Base or noble metal is the benefit.</p> <ol style="list-style-type: none"> <li>3. Orthodontics - comprehensive: (Must use a panel Orthodontist)</li> </ol> <p>Enrollee pays:</p> <table style="margin-left: 20px;"> <tr> <td>Dependent children to age 19</td> <td style="text-align: right;">\$2,000</td> </tr> <tr> <td>Adults &amp; Full-time students</td> <td style="text-align: right;">\$2,000</td> </tr> </table> <p>NOTE: The above procedures are subject to the limitations, exclusions, and governing administrative policies of the plan.</p>	Dependent children to age 19	\$2,000	Adults & Full-time students	\$2,000
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**AETNA DENTAL PLAN MONTHLY PREMIUMS EFFECTIVE JANUARY 1, 2017**

<b>Single - \$31.88</b>	<b>2- Party - \$52.72</b>	<b>Family - \$77.88</b>
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**Aetna Dental DMO PROVIDERS Located in San Luis Obispo County**

<p><b>Provider ID: 790264</b>  <b>R &amp; R Dental Care – GP</b>  <b>Flores, Robert, DMD</b>  <b>Flores, Robyn, DMD</b>  <b>Goldschmidt, Eugene, DDS</b>  236 South Halcyon Road  Arroyo Grande CA 93420  (805) 489-1495</p> <p><b>Provider ID: 416657</b>  <b>Muenter, Stanley Laurence, DDS</b>  4555 El Camino Real Suite F  Atascadero CA 93422  (805) 461-3147</p>	<p><b>Provider ID: 437926</b>  <b>SLO Dental Practice</b>  <b>Mansilla, Disbel Rebeca, DDS</b>  <b>Echeverry, Alejandro, DSS</b>  1551 Bishop, Suite 420 D  San Luis Obispo, CA 93401  (805) 547-7010</p> <p><b>Provider ID: 699179</b>  <b>Latta, Alan Richard, DDS</b>  <b>Wells, Robert Richard, DDS</b>  <b>Poblacion, Byron Christopher, DDS</b>  1250 Peach Street  San Luis Obispo, CA 93401  (805) 544-1877</p>	<p><b>Provider ID: 416228</b>  <b>R &amp; R Dental Care – GP</b>  <b>Flores, Robert, DMD</b>  878 Boysen Ave  San Luis Obispo CA 93405  (805) 544-9440</p> <p><b>Provider ID: 680483</b>  <b>Zevallos Miguel Arturo, DDS</b>  4251 South Higuera Street Ste 502  San Luis Obispo CA 93401  (805) 540-525</p> <p><b>Provider ID: 460288</b>  <b>Krill, Charles David, DDS</b>  1920 Creston Rd Suite B  Paso Robles, CA 93446  (805) 239-2146</p>
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**2017 HEALTH PLAN PREMIUMS FOR “OTHER SOUTHERN CALIFORNIA REGION”  
EFFECTIVE JANUARY 1, 2017**

The following monthly premiums apply to retirees with residence zip codes in the following counties: San Luis Obispo, Santa Barbara, Fresno, Imperial, Inyo, Kern, Kings, Madera, Riverside, Orange, San Diego and Tulare.

**If your zip code is not within one of the counties listed above please refer to your CalPERS Open Enrollment booklet for the premiums that apply to your region.**

**« STOP » Read the above paragraph first**

Basic Coverage	Blue Shield Access+ HMO	United Healthcare HMO	Anthem Traditional HMO	PERS Choice PPO	PERS Select PPO	PERS Care PPO	PORAC PPO
Single	\$778.45	\$549.76	\$799.15	\$714.43	\$633.46	\$802.24	\$699.00
2-Party	\$1,556.90	\$1,099.52	\$1,598.30	\$1,428.86	\$1,266.92	\$1,604.48	\$1,467.00
Family	\$2,023.97	\$1,429.38	\$2,077.79	\$1,857.52	\$1,647.00	\$2,085.82	\$1,876.00

Supplement to Medicare (SM) Coverage	United Healthcare*	PERS Choice PPO	PERS Select PPO	PERS Care PPO	PORAC PPO
Single	\$324.21	\$353.63	\$353.63	\$389.76	\$464.00
2-Party	\$648.42	\$707.26	\$707.26	\$779.52	\$924.00
Family	\$972.63	\$1,060.89	\$1,060.89	\$1,169.28	\$1,477.00

\*Dental and Vision coverage is an additional \$27.47 per member, per month premium. United Healthcare will bill you directly for this amount.

Combination Basic & Supplement	UHC HMO/ Medicare Advantage	PERS Choice PPO	PERS Select PPO	PERS Care PPO	PORAC PPO
Retiree (SM) & 1 dep (B)	\$873.97	\$1,068.06	\$987.09	\$1,192.00	\$1,232.00
Retiree (SM) & 2+ dep (B)	\$1,203.83	\$1,496.72	\$1,367.17	\$1,673.34	\$1,641.00
Retiree & 1 dep (SM), & 1+ dep (B)	\$978.28	\$1,135.92	\$1,087.34	\$1,260.86	\$1,333.00
Retiree (B) & 1 dep (SM)	\$873.97	\$1,068.06	\$987.09	\$1,192.00	\$1,159.00
Retiree (B), & 2 dep (SM)	\$1,198.18	\$1,421.69	\$1,340.72	\$1,581.76	\$1,712.00
Retiree & 1+ dep (B), & 1 dep (SM)	\$1,203.83	\$1,496.72	\$1,367.17	\$1,673.34	\$1,568.00

**NOTE:** The County contribution **has not been** subtracted from these rates. Effective January 1, 2017 the County contribution will increase from \$125.00 to \$128.00 per month for the majority of retirees. Retirees from Management/Confidential and Attorney classifications will continue to receive the County contribution of \$139.00 per month.