# Culvercity

# City of Culver City Summary of Benefits



**MEDICAL** 

**DENTAL** 

**VISION** 

LIFE/AD&D

ACTIVE EMPLOYEES
2019 Plan Year Effective
January 1, 2019

# **Medical - CalPERS**

НМО		
Anthem Blue Cross HMO Select	Health Net SmartCare	
Anthem Blue Cross HMO Traditional	Kaiser	
Blue Shield Access+	Sharp (Other Southern California Area)	
Health Net Salud y Mas	United Healthcare	

PPO	
PERS Select	PERS Care
PERS Choice	PORAC (Safety)

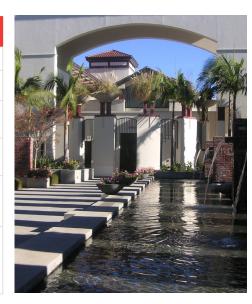
For information on CalPERS medical, please contact the Administrative Services Department.

#### **Dental - Delta Dental**

You may choose one of the Delta PPO plans (similar to a PPO medical plan) or the DeltaCare USA Plan (similar to an HMO medical plan). Dependents are eligible to age 26 regardless of student status.

Benefit	Delta Dental (PPO Plan A) City pays full premium for Plan A		Delta Dental (PPO Plan B) Employee pays difference in premium between Plan A and Plan B	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Deductible	\$40/Individual \$80/Family	\$50/Individual \$100/Family	\$40/Individual \$80/Family	\$50/Individual \$100/Family
Annual Benefit Maximum	\$1,000		\$1,000	
Diagnostic & Preventive Services (exams, x-rays, cleanings)	100% (deductible waived)		100% (deductible waived)	
Basic Services (fillings, oral surgery, extractions)	80%		80%	
Major Services (crowns, dentures, bridges)	50%		50%	
Orthodontia	Not covered			and Children) ne maximum

Benefit	DeltaCare USA (Prepaid Plan)
Annual Deductible	None
Annual Benefit Maximum	Unlimited
Diagnostic & Preventive Services (exams, x-rays, cleanings)	No co-payment
Basic Services (fillings, oral surgery, extractions)	Scheduled co-payment amounts (See DeltaCare USA brochure)
Major Services (crowns, dentures, bridges)	Scheduled co-payment amounts (See DeltaCare USA brochure)
Orthodontia	\$350 start-up fee \$1,800 co-pay (Adults) \$1,600 co-pay (Children)



## Vision - Vision Service Plan (VSP)

All eligible employees of the City and their dependents are eligible for vision coverage through VSP. Dependents are eligible to age 23 regardless of student status.

Benefit	VSP
Exam	Every 12 months
Lenses	Every 12 months
Frames	Every 12 months
Exam Deductible	\$0
Cosmetic Contact Lenses (in lieu of glasses)	\$130 allowance
Frame Allowance	\$150 allowance

If a non-participating provider is used, member is reimbursed based on allowances. Please see the Administrative Services Department for a list of allowances. To receive your vision benefits simply make an appointment with a participating VSP doctor. The provider's office will verify your eligibility.

#### Life Insurance - Standard Insurance Company

All active, benefited employees of the City working at least 20 hours per week are eligible for life coverage through Standard Insurance Company. Please be sure to update your beneficiary information, as claims will only be paid according to what is currently on file.

All Eligible Employees	\$50,000

## **Dependent Life Insurance - Standard Insurance Company**

Spouse	\$1,000
Children (to age 21 or 25 if a full-time student at an accredited college)	\$1,000

This coverage is paid for by the employee at a rate of 12 cents per pay period. Enrollees must complete a payroll deduction form which is available from Administrative Services.

# Accidental Death & Dismemberment (AD&D) Coverage - Standard Insurance Co.

All active, benefited employees of the City working at least 20 hours per week are eligible for AD&D coverage through Standard Insurance Company. (Dependents are not eligible for AD&D coverage.) The coverage amount is the same as the life insurance coverage listed above. Premiums for both life and AD&D are paid in full by the City.

#### Cafeteria Plan

Unit employees shall receive a monthly flex dollar allowance to purchase benefits offered under the full flex cafeteria plan (medical, dental, vision and life). The monthly dollar allowance is as follows:

	Miscellaneous	Safety
Employee Only / Opt Out	\$765	\$765
Employee + 1	\$1,339	\$1,339
Family	\$1,673	\$1,673

<sup>\*</sup>Please refer to your respective MOU for detailed information.

# **Contact Information**

ADMINSTRATIVE SERVICES		
Administrative Services	(310) 253-5640	
MEDICAL – CalPERS		
CalPERS Enrollment Changes	Administrative Services	
CalPERS Plan Coverage Questions	Administrative Services	
DENTAL – Delta Dental		
Delta Dental PPO	(888) 335-8227 www.deltadentalca.org	
DeltaCare USA	(800) 422-4234 www.deltadentalca.org	
VISION – Vision Service Plan (VSP)		
VSP	(800) 877-7195 www.vsp.com	
Standard Life Insurance Co.		
Standard Life Insurance Co.	(800) 628-8600 www.standard.com	



THIS PAMPHLET IS MERELY AN OUTLINE OF YOUR COVERAGE AND DOES NOT CONSTITUTE A CERTIFICATE BOOKLET. BOOKLETS AND CERTIFICATES DESCRIBING YOUR COVERAGE IN DETAIL WILL BE PROVIDED BY YOUR INSURANCE CARRIERS.



Plan arranged by USI Insurance Services 21250 Hawthorne Boulevard, Suite 600 Torrance, CA 90503

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