Culvercity

# **City of Culver City Summary of Benefits**



MEDICAL DENTAL VISION LIFE/AD&D

ACTIVE EMPLOYEES 2022 Plan Year Effective January 1, 2022

## **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)	
Blue Shield Trio (LA Area Only)	UnitedHealthcare Signature Harmony	
Health Net Salud y Mas	UnitedHealthcare Signature Alliance	
PPO		
PERS Platinum	PORAC (Safety)	
PERS Gold		

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 paysfull 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	\$50/Individual	\$40/Individual	\$50/Individual
	\$80/Family	\$100/Family	\$80/Family	\$100/Family
Annual Benefit Maximum	\$1,000		\$1,000	
Diagnostic & Preventive Services	100%		100%	
(exams, x-rays, cleanings)	(deductible waived)		(deductible waived)	
Basic Services	80%		80	0%
(fillings, oral surgery, extractions)			0078	
Major Services	50%		50%	
(crowns, dentures, bridges)	50%		J70	
Orthodontia	Not covered		,	and Children) me 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	\$130 allowance	
(in lieu of glasses)	\$100 dilowance	
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 payperiod. 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	\$825	\$825
Employee + 1	\$1,452	\$1,452
Family	\$1,817	\$1,817

\*Please refer to your respective MOU for detailed information.

### **Contact Information**

ADMINISTRATIVE 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	
¥ 51	<u>www.vsp.com</u>	
Standard Life Insurance Co.		
Standard Life Insurance Co.	(800) 628-8600	
	<u>www.standard.com</u>	



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 Haw thorne Boulevard, Suite 380 Torrance, CA 90503

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Products and services are underwritten by unaffiliated insurance companies except crop and flood insurance, which may be underwritten by an affiliate, Rural Community Insurance Com pany. Some services require additional fees and may be offered directly through third-party providers. Banking and insurance decisions are made independently and do not influence each other.