

SCHOOLS SELF INSURANCE OF CONTRA COSTA COUNTY

DENTAL/VISION ELIGIBILITY RULES

Eligibility Criteria

- 1. Eligible Primary Employees
 - a. Classified
 - b. Certificated
 - c. Administration
 - d. Confidential
 - e. District superintendent and his/her certificated assistants *
 - f. Members of Governing Board *
 - g. Retirees *
 - h. Part-time *
 - * May not be applicable to all districts. Eligibility classifications vary by district.
- 2. Eligible Dependents
 - a. Legal spouse of a primary enrollee
 - b. Domestic Partner of a primary enrollee A California domestic partnership is a legal relationship available to all same-sex couples and to those opposite-sex couples where at least one party is age 62 or older; or as determined by a district's bargaining agreements.

Update (October 2019)

California SB30 effective January 1, 2020, (signed July 30, 2019) eliminates the limitations on who may form domestic partnerships. This law now allows opposite-sex couples under the age of 62 to be eligible to form domestic partnerships.

- c. Update (July 2019). Unmarried dependent children from birth to age 26. A child includes a legally adopted child from the moment of placement for adoption with the enrollee, or a child that has been placed into the enrollee's care by the court for support and maintenance.
- d. Unmarried children, 26 years or older, if they are incapable of self-support because of a physical handicap or mental incapacity. The handicap or incapacity must begin before the child reached age 26.

Eligibility Requirements

- 1. Employees and dependents must be enrolled **upon hire or when they become eligible**.
- 2. Dependent children up to four years old may be enrolled at the beginning of any contract year including the contract year immediately following their fourth birthday.
- 3. Employees and/or their newly acquired dependents must enroll in the dental and/or vision plans within 60 days of a qualifying event. Qualifying events include, but are not limited to:
 - a. Marriage or divorce
 - b. Birth
 - c. Death
 - d. Classification or status change (move from non-benefited position) a benefited position)
 - e. Loss of Coverage (for spouse or dependents only)

Update (July 2019)

NOTE: When there is a newly eligible dependent to an account with a composite or family rate, it is recommended the dependent be added without any delay. This is due to the rate not being affected by the additional member and could prevent service issues going forward.

- 4. If a dependent child or spouse/domestic partner dis-enrolls from the plan(s) for any reason, they may only re-enroll on the plan due to a qualifying event.
 - Re-enrollment will require confirmation of the qualifying event.
- 5. Open enrollment does not apply to dental/vision participants unless there is another dental or vision plan offered by the District.

Update (January 2021)

Districts with two (2) or more dental or vision plans may allow employees to change plans during their annual open enrollment period. It is recommended districts require employees to remain in the higher or buy-up plan(s) for a minimum of two (2)-years. This will ensure the program collects premiums to cover the additional claims utilization incurred in the higher plans.

6. A primary enrollee's eligibility ends on the last day of the month in which full-time employment ends.

Update (July 2019)

NOTE: If an employee leaves the district and gains coverage under another incentive dental plan, explain that to maintain their existing incentive level there must not be a lapse in coverage for more than 30 days. This would be deemed a "break in coverage" and the incentive level would return to 70% under the new plan. The employee should consider continuing the dental coverage under COBRA as needed.

- 7. Enrollees on an approved leave of absence have the option of continuing their eligibility to a maximum period of 12 months from the effective date of the leave.
- 8. Married employees within the same district have the options to be covered individually or one spouse to be covered as a dependent.
- 9. Districts have the option to perform a dependent audit once every five (5) years, beginning in 2015 and occurring in years ending in 0 or 5. If districts have composite rates for their plans, they would be required to convert to a 3-tier rating structure. This will allow districts to ensure all dependents are appropriately enrolled and the JPA is revenue neutral.

Update (October 2019)

- a. The Dependent Enrollment Audit may be completed during the open enrollment period for years ending in 0 or 5. For example, the open enrollment period in 2019 for the effective date of 1/1/2020. Or
- b. The Dependent Enrollment Audit may be completed during the year ending in 0 or 5 for the effective date of the year ending in 1 or 6 (the following year). For example, during the year 2020 for an effective date of 1/1/2021.

REVISION DATES

Drafted October 1, 2015
Adopted May 26, 2016
Revision 1 July 1, 2019
Revision 2 October 1, 2019
Revision 3 January 21, 2021