

All Personnel

AR 4154
4254
4354

HEALTH AND WELFARE BENEFITS

If they so choose, District employees may retain health insurance coverage when they retire, reduce their working hours, or are released from employment. Continued coverage through the District shall also be made available to an employee's spouse and dependents upon the employee's death, separation or divorce, eligibility for Medicare or upon termination of a child's dependent status under the District health insurance program. Employees who are fired for gross misconduct may not retain health insurance coverage.

Persons who choose to retain health insurance coverage shall be charged the full costs of coverage within legal limits. Those who have reduced their working hours or who have been released from employment may retain the coverage for no more than 18 months. All other qualifying persons may retain the coverage for no more than 36 months. Coverage will end if the employee or beneficiary 1) fails to pay the insurance premium; 2) secures health insurance coverage through subsequent employment or remarriage; or 3) becomes eligible for Medicare benefits.

Disability Applicants

Notice of state disability insurance rights and benefits shall be given to each new employee and to each employee leaving work due to pregnancy or nonoccupational sickness or injury. (Unemployment Insurance Code 2613)

When disabled by an injury resulting from a violent act sustained while performing their job duties, certificated and classified employees may continue in the District health and dental care plans upon meeting criteria specified by law. The employee shall pay all employer and employee premiums and related administrative costs. (Education Code 7008)

INSURANCE/ HEALTH AND WELFARE BENEFITS

	<u>Responsibility</u>	<u>Timeline</u>
Plan Administrator	Provide written notice to all employees of coverage under COBRA	At commencement of coverage
District	Notify Plan Administrator of employee death, Termination, retirement, Medicare eligibility or reduction in hours	Within 30 days of event
Plan Administrator	Notify employee/beneficiary of option to elect continued health coverage	Within 14 days
Employee/Beneficiary	Elect to accept or refuse continuation coverage	60 days
Employee/Beneficiary	Notify Plan Administrator of a divorce, legal separation or termination of a child's dependent status	Upon occurrence