

McCLOUD COMMUNITY SERVICES DISTRICT
Policy and Procedure Manual

POLICY TITLE: Health and Welfare Benefits
POLICY NUMBER: 2110
ADOPTED: November 25, 2002
REVIEWED: October 14, 2020, November 09, 2020
REVISED: January 12, 2015, 11/09/20

2110.10 Medical Expense Insurance

Accident, health and hospital insurance to cover non-occupational injuries and sickness for regular full-time employees and their eligible dependents, including probationary employees, in all job classifications, and their dependents, shall be provided by the District. The scope of coverage and the payment of premiums are subject to availability and periodic review and revision by the Board of Directors.

2110.20 Workers' Compensation Insurance

All District employees will be insured against injuries received while on the job as required by state law.

2110.30 Retirement Plan

Regular full-time employees shall be enrolled in the District's *PERS* employee retirement plan.

2110.40 Vision Insurance

The District shall provide a vision care insurance plan to all regular full-time employees, including probationary employees, in all job classifications, and their dependents. The scope of coverage and the payment of premiums are subject to availability of coverage, periodic review and revision by the Board of Directors

2110.50 Dental Care Benefit

The District shall provide a dental care benefit plan to all regular full-time employees. As of the date of this policy, the District shall self-insure and manage said benefit and shall not utilize commercial insurance policies. The District's self insurance shall cover the dental services shown in the Plan Provisions, Attachment A to this policy.

2110.51 A Dental Care Account shall be established and maintained for each regular full-time employee and their eligible dependents. The District will reimburse an employee from the account for expenses related to dental care (up to the limit set forth below), or will pay such expenses directly to the provider. Reimbursement or payment shall be authorized after submission by the employee of a receipt or invoice for dental care expenses.

2110.52 Reimbursements or payments from the Dental Care Account may not exceed \$1,500.00 per eligible employee and \$1,500.00 for each of the eligible employee's dependants annually. If dental care expenses exceed the account's balance, the employee will be responsible for the difference.

2110.53 The District will reimburse or pay dental care expenses, as specified above, for regular full-time employees and their dependents. The annual payment limitation set forth herein applies to all expenses incurred by the regular full-time employee and their dependents. Qualified dependents of an employee are detailed in Attachment A to this policy.

2110.54 Because Dental Care Account funds may be used only for expenses related to dental care as specified in 2110.51 above, unused funds will not be paid to employees upon termination of employment, nor will unused amounts accumulate from year to year.

2110.60 Life Insurance

The District, at its expense, provides to all regular full-time employee's term life insurance in the amount of \$15,000, which coverage terminates upon termination of employment.

2110.70 Deferred Compensation Plan

All regular full-time employees are eligible to participate in the District's deferred compensation plan.

2110.80 Social Security

Coverage for employees is provided by the District pursuant to Title II of the Federal Social Security Act.

ATTACHMENT A - PLAN PROVISIONS

Effective Date for Insurance: If you are in an eligible status, you will be eligible on the first day of the first calendar month coinciding with or following the date you complete 30 days in continuous eligible status.

Dependents Eligibility Date: The dependent becomes eligible on the latest of (1) your eligibility date, (2) the date you acquire your first dependent, or (3) the date on which Dependents Insurance is made available under the policy. A legally married spouse acquired while in this plan or newborn children must be enrolled by application within 31 days of marriage or birth; otherwise, evidence of good dental health will be required at the subscriber's expense.

Definition of Dependent: Dependent means only (1) your legally married spouse, significant other or (2) your unmarried child, including a legally adopted child or any stepchild residing in your household, who is less than 26 years of age, and confirms with Obama care.

Termination of Insurance: Your insurance will terminate on the earliest of the following dates (1) the date the policy terminates, (2) the date of the expiration of the period for which the last premium payment is made by the policyholder on account of your insurance, (3) the date on which you enter the military service, or (4) the date you cease to be in an eligible status under the policy.

DENTAL CARE BENEFITS

Dental Insurance benefits are provided to all regular, full-time employees and their eligible dependents through an MCSD funded program administered by MCSD. The Dental benefit limit is \$1500 per fiscal year, any portion of which may be used towards the payment of cosmetic dental work.

Coordination of Benefits: The standard coordination of benefits between other plans applies. The plan of the parent with the earliest birthdate in the year is primary for dependent children.

Your Group Dental Insurance Plan is totally underwritten and funded by your employer.

Send all claims to: McCloud Community Services District
P.O. Box 640
McCloud, CA 96057