



JOINT LABOR MANAGEMENT BENEFITS COMMITTEE RETIREES



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Five Things You Need to Know

- **Update Your Contact Information:** COVID-19 has created an increased need to immediately get in touch with or communicate information to all members of our community. Please keep an eye out for a separate mailer that will provide instructions on how to update your **cell phone number** and **email address**.
- **Medicare Reimbursement.** Find out how the District is reimbursing your Medicare Part B expenses.
- **CalPERS New Plans Reminder.** Note that mandatory plan changes took place within the CalPERS offerings during the 2022 Open Enrollment. Those formerly enrolled in the PERSCare or PERS Choice Plans were automatically enrolled in the new PERS Platinum Plan. Those formerly enrolled in the PERS Select Plan were automatically enrolled in the PERS Gold Plan. If you wanted to make a different selection than the automatic rollover mentioned here, you had to log on to the SAP Employee Self Service Portal to make an election during the open enrollment period.
- **HRA—** Make sure you know how to properly use your HRA funds that have carried with you into retirement.
- **The Employee Assistance Program (EAP):** Mental health is even more important now during this time of uncertainty and COVID-19. Find out how to deal with stress and to contact our new EAP provider, LifeWorks on page 8

5 THINGS
YOU
NEED
TO
KNOW

Injured at Work? Know your Options



What is Workers' Compensation? Under California law, employers provide restorative benefits to employees injured at work. The main qualifying question to consider when determining whether an employee's injury is workers' compensation eligible is "Did the injury/illness arise out of the employment and within the course and scope of the employment?"

Why would Worker's Compensation apply to you in retirement? You may have retired but if you return to work on a limited or part-time assignment or volunteer at the district you may still be covered by worker's compensation.

What should you do? The first point of contact for all employee injuries is Company Nurse (855-602-5264). Company Nurse provides the initial intake and assessment and will provide appropriate information and direction (including referral to a medical facility if necessary). Be sure to make note of the date and time you called, with whom you spoke, and what was discussed.

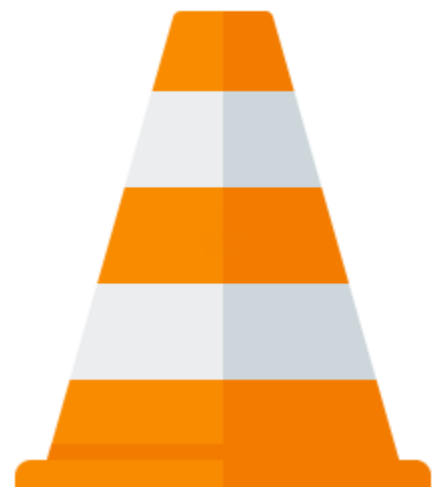
In order to file a claim, three forms are completed—the **Supervisor's Report of Injury or Illness** form, the **Employee's Claim for Workers' Compensation**

Benefits form, and the **Employer's Report of Occupational Injury or Illness** form. The forms can be obtained at the Sheriff's office at your campus. They can then be sent to Ross Lee at LeeRG@laccd.edu.

The Claims Process. If a claim is not witnessed, is reported late, requires medical treatment before filing, stems from a short work history, does not provide specific incident information or the claimant suffers from cardio/pulmonary/stress injuries or illnesses, has a history of disciplinary actions, or is a part-time employee, the claim will likely require additional documentation. Claims requiring additional documentation are allowed a 90-day delay period of investigation to gather and verify facts, obtain any prior medical records, schedule a medical exam, obtain statements, and investigate any prior claims.

Pre-Designation of a Preferred Physician. If you would prefer to designate a specific physician to be your eligible workers' compensations claims doctor should you need to file a claim, be sure to do so prior to any potential claim for injury. You can find the designation form by going to laccd.edu and selecting Departments > Business Services > Risk Management > Workers Compensation > Forms, and selecting the form at the bottom of the page titled "Statement of Employee's Pre-Designated Physician and Employee Consent Form."

Additional Questions? Communication during the workers' compensation claims process is key. If you have any further questions about the process, please reach out to the Risk Management team at CostanL@email.laccd.edu.



Mental Health & Wellbeing



Mental Health

1 in 5 American adults is currently living with a mental health condition.¹

3 in 4 employees have struggled with an issue that affected their mental health



Substance Use

1 in 7 people will develop a substance use disorder at some point in their lives.²

3 in 4 people living with a substance use disorder are in the workforce

When employee mental health suffers, everyone pays the price

Mental health conditions are:

- **The single greatest cause of worker disability claims¹**
- **Attributed to 62% of missed workdays²**



Employees with untreated mental health conditions have **higher heart attack and stroke risk.**³



Employees with severe mental illness are **2x more likely to develop type 2 diabetes.**⁴

Untreated depression costs employers an extra \$15,702 per employee, per year in health care costs, absenteeism, and lost productivity.⁵

1. "Mental Health by the Numbers," National Alliance on Mental Illness, nami.org/mhstats, accessed March 19, 2021. 2. "Surgeon General Issues Landmark Report on Alcohol, Drugs, and Health," National Institute on Alcohol Abuse and Alcoholism, November 17, 2016. 3. "Mental Health: A Workforce Crisis," American Heart Association CEO Roundtable, 2019. 4. Eric Goplerud et al., "A Substance Use Cost Calculator for US Employers with an Emphasis on Prescription Pain Medication Misuse," *Journal of Occupational and Environmental Medicine*, November 2017.

1. "Bad for Business: The Business Case for Overcoming Mental Illness Stigma in the Workplace," National Alliance on Mental Illness of Massachusetts, 2015. 2. See note 1. 3. "Anxiety and Depression Boost Heart Attack and Stroke Risk," American College of Cardiology, September 19, 2018. 4. Mangurian et al., "Diabetes and Prediabetes Prevalence by Race and Ethnicity Among People With Severe Mental Illness," *Diabetes Care*, July 2018. 5. Garen Staglin, "Understanding the Evidence: Transforming How Employers Make the Case for Mental Health," *Forbes*, April 4, 2019; "Mental Health: A Workforce Crisis," American Heart Association CEO Roundtable, 2019.

HRA Accounts with LACCD

HRA Accounts in Retirement

While you were working for the District as a full-time employee, funds were contributed to your HRA account for you to use for qualified health expenses. Here is some information to consider:

- If the District agrees to any future contributions for active employees and you have taken an early retirement (retired but not yet 65), you will also benefit from those contributions. As an early retiree, however, at age 65 you will no longer receive any additional contributions.
- As a retiree, you will still have access to all the unspent funds previously deposited.
- The district does not have a “use it before you retire or lose it” policy.

If you have any questions or issues, please contact the LACCD Health Benefits Unit for assistance at healthbenefits@email.laccd.edu.

What are Eligible Health Care Expenses?

Only expenses authorized under the IRS Code section 213 (d) shall be reimbursed. This list is changed from time to time, however here are some of the most common reimbursements, as well as non-eligible expenses. For a full list, go to: <https://www.asiflex.com>

Qualified Expenses:

- Deductibles
- Copayments
- Coinsurance
- Prescription drug expenses
- Dental care (for non-cosmetic purposes, including sealants)
- Vision Care
- Over-the-counter drugs

Non-Qualified Expenses:

- Cosmetic procedures, surgery, drugs or products
- Insurance policy premiums
- Teeth bleaching or whitening
- Marriage counseling
- Late payment or no show fees charged by healthcare provider

When to submit for reimbursement?

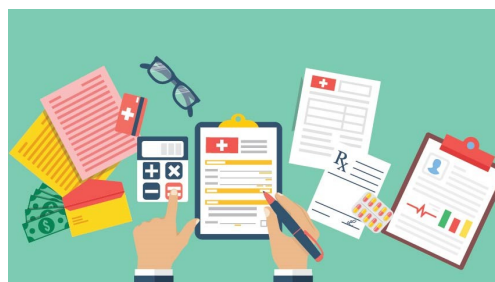
You must submit reimbursement for any claims incurred during the plan year, within 90 days of the end of the plan year. After that, claims may be denied. A Health Care Expense is incurred at the time the health care service is delivered, not when you are formally billed or charged for the expense.

What is required for reimbursement?

You may use your HRA debit card or submit itemized receipts directly to ASI Flex, in order to pay for eligible expenses. However, even if you use your debit card for a qualified expense, you may still need to provide an itemized receipt, which breaks down every service or expense incurred. A receipt only showing the total amount charged will NOT be accepted.

For dental or vision reimbursements, you can usually expect requests for itemized receipts. These doctor’s offices have a number of non-qualified procedures so they often require substantiation.

Important: ASI Flex does not issue cards in spouses or dependents' names, only in the name of the FSA/HRA participant. Spouses and dependents can sign the back of the debit card that is sent and utilize it. For spouses and dependents of deceased participants, the cards will always be issued in the actual participant's name. The surviving spouse/dependent can sign the back of the card and use it.



Retirement Basics

What are the different parts of Medicare?

Part A: Provides Medicare benefits and coverage for hospital care. This would include services such as:

- ⇒ Inpatient hospital care
- ⇒ Inpatient stays in most skilled nursing facilities
- ⇒ Hospice and home health services

Part B: This covers services that may be categorized as an office visit. Some examples would include:

- ⇒ Doctor and clinical lab services
- ⇒ Outpatient and preventive care
- ⇒ Home health care
- ⇒ Screenings, surgical fees, and supplies
- ⇒ Physical and occupational therapy

Part C: This is a different way of getting Medicare Part A and B coverage.

Part D: The Prescription Drug Plan (PDP) can be a stand-alone plan or it may be combined with a Medicare Advantage Plan. This plan helps with the following:

- ⇒ Cover the cost of prescription drugs
- ⇒ May help lower prescription drug costs and protect against higher costs in the future

Combination Plans. If you are an early retiree, you and your dependents will remain enrolled in the basic health plans. Once you or your spouse turns 65, you will fall into the combination plans, as the 65 year old will be in the CalPERS retirement health care plan and those under 65 will still be in the basic health care plans. After retiring at 65, you will move to the Medicare plans offered by CalPERS.



In general, the pharmacy plans offered by CalPERS are comparable or better than that offered by Medicare Part D. To see what Medicare Part D offers in order to compare to your plan, visit:

<https://www.medicare.gov/drug-coverage-part-d/what-medicare-part-d-drug-plans-cover>

Please Note: In retirement, Your pharmacy card may say “Medicare Part D” but you are still covered by the OptumRx pharmacy plan.

Medicare Part B Reimbursement

The District will begin accepting reimbursement requests for retirees' Medicare B premiums in late January 2022 through April 30, 2022.

This initial period is for reimbursement of Medicare B premiums paid from 7/1/2020 to 12/31/2020 and 1/1/2021 to 12/31/2021. Please review the FAQs below; further instructions will be going out in late January.

WHO IS MANAGING THE REIMBURSEMENT?

The District's FSA/HRA vendor, ASIFlex, will be managing the reimbursement process. If you have an existing HRA account with ASIFlex, you do not need to do anything at this time. If you exhausted your HRA prior to retirement and no longer have an active HRA, you will need to set up a username, password, and security image with ASIFlex:

Go to www.asiflex.com, click on "Employee Login" and then "Create an Account"

WHO IS ELIGIBLE?

Eligible retirees and spouses as covered in the Master Benefits Agreement (MBA) III. B. – G.

Surviving spouses are also eligible.

WHAT DOCUMENTATION DO I NEED TO PROVIDE?

For Medicare part B reimbursement retirees do not have submit proof of payment. You need to submit your copy of the "Notice of Medical Insurance Enrollment and Premium Deduction", or "Proof of Income" letter from the Department of Health and Human Services (HHS)." You may also submit your their SSA-1099 statement for reimbursement.

DO I NEED TO BE VESTED FOR DISTRICT BENEFITS TO RECEIVE REIMBURSEMENT?

Eligibility and amounts for the Medicare reimbursement follows the same vesting schedule as the District's vesting for contributions to retiree health care premiums:

Eligible retirees with less than 10 years of service at time of retirement are not eligible for any reimbursement.

- Eligible retirees with 10-15 years of service will receive 50% reimbursement.
- Eligible retirees with 15-20 years of service will receive 75% reimbursement.
- Eligible retirees with 20+ years of service will receive 100% reimbursement.

HOW MUCH WILL I BE REIMBURSED?

Your reimbursement amount depends on your District vesting for benefits and when you retired. Because the agreement was effective 7/1/2020, you will receive only 50% of premiums you paid in 2020, subject to your vesting percentage.

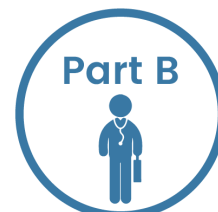
WHEN CAN I EXPECT TO SEE MY REIMBURSEMENT CHECK?

The initial period to submit a reimbursement request of Medicare B premiums that you paid from 7/1/2020 to 12/31/2020 and 1/1/2021 to 12/31/2021 begins in January 2022 and ends on April 30, 2022. Checks will be issued in early May 2022.

In 2023 and going forward, ASIFlex will accept reimbursement requests between 1/1/2023 and 3/31/23. Reimbursement checks will be processed within 2 weeks of all applicable documentation being received by ASIFlex.

CAN I SUBMIT REIMBURSEMENTS FOR PRIOR YEARS, OR AFTER THE DEADLINE?

Reimbursement of earlier years' premiums is not permitted. You may submit a request for reimbursement only for the prior year's premiums paid, not for premiums paid more than one year earlier. You must submit reimbursement requests by the deadline (For 2022, April 30; for 2023 and going forward, March 31). Late requests cannot be honored.



Four Pillars of Mental Health

We all know the importance of physical fitness in keeping us healthy and vibrant throughout our lives. What you may not know is that mental fitness is equally important. In fact, the two are intertwined. Neglecting your mental health can make you less resilient to life's ups and downs, leaving you more likely to make poor lifestyle choices. You can only achieve mental fitness if your body is functioning well.

What is mental fitness?

Just as there are four components to physical fitness—cardiovascular endurance, strength, flexibility, and a healthy weight—there are four components to mental fitness. These are:

1) Emotional. This includes self-acceptance, self-esteem, resilience, and the ability to manage strong emotions.



2) Social. Friends are important because they bring companionship, support and enrichment to our lives. According to the Mayo Clinic, people who have friends are generally physically and emotionally healthier and enjoy a better quality of life.



3) Financial. According to a 2018 study, more than half of Americans experience anxiety due to money issues. Financial wellness is not about having a certain amount of money at your disposal; it's about feeling in control of your finances, being able to handle financial setbacks, and being on track to achieve your financial and life goals.



4) Physical. Mental and physical fitness and health are intertwined. You can improve both through a healthy diet, regular exercise, and enough sleep. You can also reduce your risk of developing chronic illnesses such as diabetes, cardiovascular disease, and depression.



Taking steps to build your mental fitness enhances our ability to cope with stress and improves your physical health, productivity at work, relationships, and overall happiness. If you would like more support as you work to build your mental fitness, call your employee assistance program (EAP) at 1-800-581-1485.

EAP: Get the Help You Need



LifeWorks isn't just an app – it's an innovative wellbeing solution in an easy-to-use **online platform and app** with all the tools you need to be healthy and happy. LifeWorks makes it easier to access a confidential employee assistance program (EAP) and your workplace community. **Take a minute and join today!**

Why you should join LifeWorks

1. Feel supported 24/7, 365 days a year with a confidential support service for all of life's stresses, whether you're expecting a baby, going through a divorce, feeling lonely or feeling overwhelmed at work.
2. Choose Snackable Wellbeing topics from leading experts you're most interested in improving.
3. Stay connected with what's happening across the organization.

Get started using LifeWorks online

Accessing LifeWorks online is easy as 1-2-3!

1. Check your email inbox for an invitation. Sign up by following the link in the email.
2. Create your LifeWorks account.
3. Download the LifeWorks app to easily access a wealth of online resources!

Support for your immediate family members! Under "Profile", invite up to five dependents to join you on the LifeWorks platform!

For technical support, visit help.lifeworks.com, and

Contact your EAP any time, 24/7

1-800-581-1485

- OR -

login.lifeworks.com

- OR -

Download the LifeWorks App

LifeWorks offers support with mental, financial, physical and emotional wellbeing

Life	Family	Health	Work	Money
Retirement	Parenting	Mental Health	Time Management	Savings
Midlife	Couples	Addictions	Career Development	Investing
Student Life	Separation/Divorce	Fitness	Work relationships	Budgeting
Legal	Older relatives	Managing Stress	Work Stress	Manage Debt
Relationships	Adoption	Nutrition	Managing People	Home buying
Disabilities	Death/Loss	Sleep	Shift Work	Renting
Crisis	Child Care	Smoking Cessation	Coping with Change	Estate Planning
Personal Issues	Education	Alternative Health	Communication	Bankruptcy

Support Systems

How to Ask for Help

Asking for help seems to come naturally for some, but for others, it is anything but easy. The need to feel independent is a highly valued virtue, especially in professional settings.

Even so, trying to do it all alone seldom produces the best outcomes. When you are chronically exhausted and overwhelmed, you are unable to deliver your best work, so knowing how to ask for help is vital.

To ask for help, you first need to know how to recognize when you need it. This may require you to pay more attention to how you respond in certain situations. How do you respond to stress? How do you know when you have reached your limit? The answers can help you understand when you need help. Getting comfortable with asking for help can take time, but it can make your life a whole lot easier.

Here are some tips for when you need to ask for help:

Recognize when you need help

Know your limits and manage your energy wisely. When it comes to asking for help, the earlier the better.

Be clear about what you need

When you do ask for help, explain exactly how the other person can help you. What specifically do you need help with?

Ask the right person

Seek help from someone who possesses the specific skills needed for the task at hand. Otherwise, you might end up further behind.

Be helpful in return

Extend help to others when you see them struggling. Just remember to always get permission first. Your help may not be as needed or wanted as you think it is. Jumping in to “fix” other people’s problems for them without their permission can backfire.

Building Community Consciousness

People who feel connected to a community are generally healthier and happier. That is because having strong support systems makes it easier to move through life’s challenging moments. Feeling a sense of belonging is an integral component of wellbeing.

Communities are typically comprised of people with shared interests and values. Most likely, your community includes your family, neighbors, and a few others you interact with frequently. As you consider your own community, ask yourself this question: How connected are you?

One study conducted by the Pew Research Center¹ found that only about 30% of Americans know all or most of their neighbors. Community consciousness, which is defined as a community’s “level of awareness of its current social, economic, and environmental situations,” requires a willingness to branch out and become more aware of what is happening beyond your own family and inner circle. It requires acknowledging and accepting the diversity among members of your community, and it involves actively seeking common ground.

One way to expand your community consciousness is through volunteerism. Volunteering enables you to connect more deeply with others in your community. Having conversations with people outside your usual networks can expand your perspectives and give you more insight into the challenges that others face.

In connected communities, everyone benefits. The more connected you feel, the more support you can give to others—and the more support you will receive in return.



Important Contact Information for your Benefits

Medical Plans

CalPERS Health Benefit Program

Contact information: (888) 225-7377

Monday—Friday, 8:00 am—5:00 pm

TTY (for speech and hearing impaired): (916) 795-3240

www.calpers.ca.gov

Vision Plan

VSP

Contact information: (800) 877-7195

P.O. Box 997100

Sacramento, CA 95899-7105

www.vsp.com

Dental Plans

Delta Dental

Contact information: (800) 765-6003

P.O. Box 997330

Sacramento, CA 95899

www.deltadentalins.com

MetLife/SafeGuard

Contact information: (800) 880-1800

P.O. Box 3594

Laguna Hills, CA 92654

www.safeguard.net (plan code: SGC1028)

Employee Assistance Program (EAP)

Lifeworks

Contact information: 1-800-581-1485

Lifeworks.com

Health Reimbursement Account (HRA)

ASI Flex

Website: asiflex.com

Other Benefits & COBRA Information

LACCD Health Benefits Unit

Contact information: healthbenefits@email.laccd.edu

*Due to changes within the HBU, please initiate all communications via email.

<http://laccd.edu/Departments/HumanResources/HealthBenefits>

Optum Rx

Basic Members: 1-855-505-8110

Medicare Part D Members: 1-855-505-8106

Members needing TTY service: please dial 711

OptumRx.com/CalPERS

OptumRx administers the prescription drug benefits for those enrolled in PERS Select, PERS Choice, and PERSCare PPO plans, as well as those in Anthem Blue Cross, Health Net, Sharp, and UnitedHealthcare HMO plans.

Pet Discount Programs

PetAssure

Contact information: (888) 789-7387

Monday-Friday: 5:00 am—3:00 pm

www.petassure.com

PETplus

Contact information: (866) 893-0306

M-F: 6am-3pm, Sat.: 6am—2pm, Sun: 6am—12pm

info@petplus.com

www.petplus.com

****PHISHING ALERT—These are the ONLY vendors the district officially contracts with. If you receive communications from any other vendor, please be cautious, as they may NOT be working with the district to offer you the best plans and prices.**

District Contacts

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