

4554 Health and Welfare Benefits

The district shall provide health and welfare benefits for certificated, classified, confidential, and management employees in accordance with state and federal law, board policy and subject to negotiated employee agreements.

Eligible employees who elect district health benefits agree, as a condition of continued employment and receipt of benefits, to pay the balance of the premium not covered by the district's contribution, when applicable.

For purposes of granting benefits, a registered domestic partner and his/her child shall have the same rights, protections, and benefits as a spouse and spouse's child. (Family Code 297.5, 300)

The district shall offer full-time employees who work an average of 30 hours or more per week and their dependents up to age 26 years a health insurance plan that includes coverage for essential health benefits, pays at least 60 percent of the medical expenses covered under the terms of the plan, and meets all other requirements of the federal Patient Protection and Affordable Care Act.

Employee Coverage

Employees who work an average of thirty (30) hours or more per week, shall be eligible for health benefits as provided by the district. Employees working less than an average of forty (40) hours per week based on the position's work calendar and additional work weeks shall be eligible for health benefits with the district's contribution adjusted to a pro rata amount in the same proportion as their position bears to full-time.

Eligible employees shall qualify for health benefits after they have been actively employed for the minimum period required by the applicable benefit plan, providing that the employee has completed proper enrollment and registration forms and payroll deduction authorizations, and complied with the general rules and requirements of the district and the benefit providers. Employees with dates of employment from the first (1st) through the fifteenth (15th) day of the month shall be eligible for coverage effective on the first (1st) day of the month following the first day of employment. Employees with dates of employment after the fifteenth (15th) of the month shall be eligible on the first (1st) day of the second month following the first day of employment.

Effective July 1, 2014, benefit eligible employees shall be required to enroll in, at a minimum, family dental, family vision and employee only life insurance.

Benefit eligible employees employed prior to July 1, 2004, who do not utilize the full District contribution toward health and welfare benefit premiums and opt out of medical coverage shall be limited to a maximum annual benefit of \$5,900.00.

Benefit eligible employees electing to opt out of medical coverage must provide proof satisfactory to the District of other comparable current group coverage by August 15, of that year. If comparable coverage is not provided by August 15, the District will enroll the benefit eligible employee in the least cost medical coverage available that year. Comparable group coverage is defined as medical coverage that meets or exceeds the Affordable Care Act (ACA) standards. Current coverage is defined as coverage that will be in effect at the time of renewal on or after July 1, of that calendar year.

Dependent Coverage

The District shall provide health and welfare benefits for eligible dependents of employees, up to the maximum annual District contributions established for each unit of employees. Eligible dependents include

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spouses, registered domestic partners, minor children, stepchildren, or children of a domestic partner. Effective July 1, 2005, employees must provide proof of their dependents' eligibility for benefits. The District reserves the right to periodically confirm eligibility for coverage by requesting verification as provided in this section. Registration with the Secretary of State as a domestic partnership, valid marriage certificates or joint tax returns, or children's birth certificates or valid guardianship orders constitute proof of eligibility. No other forms of proof will be accepted.

(Family Code Section 297; Government Code section 12940; Labor Code section 2122.1)

Retired Employee Coverage

Retired employees and other qualified persons may continue to participate in the district's group health and welfare benefit plan and dental care benefit plan in accordance with state and federal law. The Superintendent or designee shall advise all employees of their rights and responsibilities related to continuing their health insurance benefits when their eligibility changes.

To receive continuation coverage under this program, the qualified beneficiary shall pay the premiums, dues and other charges, including any increases in premiums or dues.

Certificated Employee Retiree

The district shall provide retiree-only, medical only, insurance to a certificated employee who retires at 55 years of age or older until the retiree reaches age 65 or is eligible for Medicare or other federal or state supported medical coverage, whichever occurs first. Dependent medical coverage may be purchased during the retiree's eligibility period at no cost to the district. The annual contribution by the district for the retiree's medical insurance shall not exceed the annual district contribution less premiums for the least expensive family composite dental, vision, and life insurance for active certificated employees as indicated in the collective bargaining agreement with the exclusive certificated representative. The retiree shall pay any premium cost in excess of the district contribution. To be eligible for this retiree coverage the certificated employee must fulfill the following requirements:

The retiree must have reached age 55 prior to the effective date of retirement.

The certificated employee must have worked in the District for a period of 15 years. The combination of partial service years (i.e., job shares) is defined in the Collective Bargaining Agreement with the Etiwanda Teacher Association.

The certificated employee must be employed in the Etiwanda School District on the effective date of retirement.

The certificated employee must be enrolled with the District's medical care provider, during the annual open enrollment period, prior to the effective day of retirement. Should the certificated employee not be enrolled, the certificated employee will not qualify for retirement health benefits.

Certificated Management Retiree

The district shall provide retiree-only, medical only, insurance to a certificated management employee who retires at 55 years of age or older until the retiree reaches age 65 or is eligible for Medicare or other federal or state supported medical coverage, whichever occurs first. Dependent medical coverage may be purchased during the retiree's eligibility period at no cost to the district.

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The annual contribution by the district for the retiree's medical insurance shall not exceed the annual district contribution less premiums for the least expensive family composite dental, vision, and life insurance for active certificated employees as indicated in the collective bargaining agreement with the exclusive certificated representative. The retiree shall pay any premium cost in excess of the district contribution. To be eligible for this retiree coverage the certificated employee must fulfill the following requirements:

1. The retiree must have reached age 55 as of the effective date of retirement.
2. The certificated employee must have worked in the district for a period of 7 years or more.
3. The certificated employee must be employed in the Etiwanda School District on the effective date of retirement.
4. The employee must be covered under the District's health plan as of the date of retirement.

Classified, Management, Supervisory and Confidential Retiree

The district shall provide retiree-only, medical only, coverage to a full-time classified, management, supervisory and confidential employee who retires at 55 years of age or older until the retiree reaches age 65 or is eligible for Medicare or other federal or state supported medical coverage, whichever occurs first. Dependent medical coverage may be purchased during the retiree's eligibility period at no cost to the district. The annual contribution by the district for the retiree's medical insurance shall not exceed the annual district contribution for active employees, less premiums for the least expensive family composite dental, vision, and life insurance nor shall it exceed the percentage of participation level for which the employee qualified at the time of retirement.

The employee shall pay any premium cost in excess of the district contribution. To be eligible for this retiree benefit, the employee must fulfill the following requirements.

1. The employee must be eligible for medical insurance at the time of retirement.
2. The employee must have reached age 55 as of the effective date of retirement.
3. The employee must be covered under the District's health plan as of the date of retirement.
4. The employee must have worked full-time equivalent in the district for a period of fifteen (15) years.
5. Full-time equivalent service is defined as working eight (8) hours per day in a twelve (12) month position, which equates to thirty-one thousand two hundred (31,200) hours in paid status.
6. Employees working less than twelve (12) months or less than eight (8) hours per day will be eligible when they have attained the equivalent of 31,200 hours in paid status.
7. The employee must be employed in the Etiwanda School District on the effective date of retirement.
8. The medical-only insurance shall continue until the employee is eligible for Medicare or other federal or state programs, but in no event shall the district's contribution continue past the sixty-fifth (65th) birthday of the employee.

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COBRA/Cal-COBRA Continuation Coverage

Covered district employees and their qualified beneficiaries shall be offered the opportunity to continue health and disability insurance coverage when they otherwise would lose coverage due to one of the following qualifying events.

1. Death of the covered employee.
2. Termination or reduction in hours of the covered employee's employment, other than termination by reason of the employee's gross misconduct.
3. Divorce or legal separation of the covered employee.
4. Covered employee's becoming entitled to Medicare benefits.
5. A dependent child ceasing to be a dependent child of the covered employee.

Continuation health coverage shall be the same as provided to similarly situated individuals under the group benefit plan.

Confidentiality

The Superintendent or designee shall not use or disclose any employee's medical information the district possesses without the employee's authorization obtained in accordance with Civil Code 56.21, except for the purpose of administering and maintaining employee benefit plans and for other purposes specified in law. (Civil Code 56.20)

Board Approved:

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