



2024 – 2025

EMPLOYEE

BENEFITS

GUIDE

CONTENTS



CONTENTS

3 Welcome to Your Benefits	19 Rates for 2024 - 2025: Certificated
4 Eligibility & Enrollment	21 Rates for 2024 - 2025: Classified
6 Medical Benefits: Overview	23 Tax Savings Benefits: Health Savings Account
7 Medical Benefits: Plan Highlights	24 Tax Savings Benefits: Flexible Spending Accounts
9 Tips on Prescription Drugs	25 Income Protection Benefits: Life & AD&D
10 Tips on Medical Care Options	26 Voluntary Benefits
11 Benefit Extras: All Medical Plan Members	27 Retirement Benefits
14 Benefit Extras: Anthem Plan Members Only	28 Benefit Contacts
17 Dental Benefits	29 Important Information
18 Vision Benefits	

WELCOME TO YOUR BENEFITS

Whether you're enrolling in benefits for the first time, nearing retirement, or somewhere in between, the Santa Barbara Unified School District supports you with benefit programs and resources to help you thrive today and prepare for tomorrow.

We offer programs that protect your health, your money, your family, and help you find balance between your concerns at work and at home. We also know the value of understanding your coverage so that you know how to get care and when you need it. With the tools and information in this booklet, and related resources, we hope to help you be well today and work towards a healthy and secure future.

The District understands that comparing benefit plans, features, and costs can be complicated. This booklet provides information that will help simplify your decision-making process. It is a summary of your benefits and does not provide a complete description of all benefit provisions. For more detailed information, please refer to your Evidence of Coverage documents (EOCs). The Evidence of Coverage documents determine how all benefits are paid.

2024 - 2025 BENEFITS

**Open Enrollment Period:
August 5th through August 30th**

**The benefits in this summary are effective
October 1, 2024 through September 30, 2025**

Important Employee Responsibilities

- Munis Employee Self Service (ESS) will not be used for this year's open enrollment!
- This year's Open Enrollment will be an Active one. This means that all benefit-eligible employees should meet with an American Fidelity (AF) representative to submit your benefit elections, even if you do not wish to make any changes to your current benefits for 2024-2025.
- To schedule an appointment, go to: enroll.americanfidelity.com/62C2A7E2.

ELIGIBILITY & ENROLLMENT

WHO MAY ENROLL

Santa Barbara Unified School District Employees Benefit-Eligible Classifications

- Certificated employees working at least FTE of 50%
- Classified employees working at least 30 hours per week

Dependents

- Your legally married spouse
- Your registered domestic partner (as defined by the state of California)
- Your children, stepchildren, or children of your registered domestic partner to age 26, regardless of marital or student status
- Any children for whom you are required to provide coverage under a Qualified Medical Child Support Order
- Your unmarried children, step-children, or children of your registered domestic partner of any age, if they are incapable of self-care due to a physical or mental disability

Your spouse/domestic partner and children can be enrolled in our Medical, Dental, and Vision plans.

Important Enrollment Information

- All benefit-eligible employees should meet with an American Fidelity (AF) representative to submit your benefit elections
- If adding/deleting dependents, a SISC Change Form must be completed and returned to Human Resources along with appropriate documents (i.e., birth certificate, marriage certificate).
- If waiving insurance coverage, you MUST decline when meeting with an AF rep or complete an Insurance Waiver Form, which can be found online at <https://www.sbunified.org/departments/humanresources/benefits>
- All forms and information can be found at <https://www.sbunified.org/departments/humanresources/benefits>
- All online enrollment must be completed, and all forms must be received by Human Resources by **Friday, August 30.**



WHEN YOU MAY ENROLL

- As a new hire, you may participate in the district's benefits on the first day of the month following the completion of 30 days of full-time employment
- Each year, during open enrollment
- Within 30 days of a qualifying event as defined by the IRS

ELIGIBILITY & ENROLLMENT

CHANGES TO ENROLLMENT

Open Enrollment

During our annual open enrollment period, you may make new benefit elections for the following October 1st effective date.

Qualifying Event

Once you make your benefit elections, you **cannot** change them throughout the year unless you experience a qualifying event as defined by the IRS.

Examples of qualifying events include, but are not limited to:

- Marriage, divorce, legal separation, or annulment
- Birth, adoption, or death of a child or spouse
- Qualified Medical Child Support Order (QMCSO)
- Change in your dependent's eligibility status
- Loss of coverage from another health plan
- Change in your residence or workplace (if your benefit options change)
- Loss of coverage through Medicaid or Children's Health Insurance Program (CHIP)
- Eligibility for a federal or state premium assistance program under Medicare, Medicaid, or CHIP

Coverage for a new dependent is not automatic. If you experience a qualifying event, you have **30 days** to update your coverage. Please contact HR Benefits at hrbenefits@sbunified.org or by calling (805) 963-4338 x6242 or Gaby Leon at x6240 to add coverage for a new dependent. If you do not update your coverage within **30 days** of the qualifying event, you must wait until the next annual open enrollment period to update your coverage.

How Can I Enroll in Benefits?

- During Open Enrollment, make sure to meet with American Fidelity. To schedule an appointment, go to: enroll.americanfidelity.com/62C2A7E2.
- New hires should contact HR Benefits at hrbenefits@sbunified.org or by calling (805) 963-4338 x6242 or Gaby Leon at x6240 to complete benefits enrollment paperwork during their onboarding.

NOTICE ON DEPENDENT TERMINATIONS

It is the employee's responsibility to notify the district of any changes in eligibility status for their spouse, domestic partner or dependent(s) at the end of the month of one of the following:

- For **Spouse**: event of death OR final divorce decree is reached;
- For **Domestic Partner**: event of death, OR the Notice of Termination of Domestic Partnership, OR nullity of the domestic partnership is complete, OR if a domestic partner no longer qualifies as a domestic partner because of qualifying as a dependent;
- For **Dependent**: event of death, OR final divorce is reached in which stepchild OR legal guardianship is terminated, OR when dependents reach age 26, unless they have a disabled certification.

MEDICAL BENEFITS: OVERVIEW

SANTA BARBARA UNIFIED SCHOOL DISTRICT MEDICAL PLANS

Anthem Blue Cross PPO Plans

- There are four Anthem Blue Cross PPO plans:
 - Anthem Blue Cross 80-E PPO
 - Anthem Blue Cross 80-G PPO
 - Anthem Blue Cross 80-K PPO (*New for 2024—2025*)
 - Anthem Blue Cross 80-M PPO
- The PPO plans allows you to direct your own care.
- If you receive care from a physician who is a member of the network, a greater percentage of the cost will be paid by the insurance plan. However, you are not limited to the physicians within the network and you may self-refer to specialists.

Using Out-of-Network Providers

If you obtain services from an out-of-network provider, any out-of-network charges above allowed coinsurance amounts are called balance billing. If incurred, balance billing charges are your responsibility and do not apply to the Annual Out-of-Pocket Maximum. For more detailed information, please refer to the plan documents.

Anthem Blue Cross HDHP Plan With HSA

- Everything shown above for the PPO plans above also applies to the Anthem Blue Cross High Deductible Health Plan (HDHP) with Health Savings Account (HSA).
- The HDHP is linked to a special, tax-qualified Health Savings Account (HSA). You can contribute tax-free money to your HSA, up to annual IRS maximums.
- You can use the money in your HSA to pay for current healthcare expenses - or you can save toward future healthcare expenses. More details about the HSA are located on page 23.

Kaiser Permanente HMO Plan (Available only to residents of Ventura County)

- With the Kaiser Permanente Health Maintenance Organization (HMO) plan, you must access all care and services through Kaiser facilities and providers.
- Care and services accessed outside of Kaiser are not covered, except in the case of an emergency.

Which Medical Plan Is Right for You?

Deciding on the best medical plan depends on your healthcare needs, favorite doctors, and budget. Here are some questions to consider when deciding:

Do you prefer specific doctors or hospitals? If you want to stay with your favorite doctors and facilities, check whether they are in the plan's network. If they are not, but you are comfortable paying a bit more to see them, consider a plan with both in-network and out-of-network benefits.

What are your usual healthcare needs? Do you have frequent doctor or urgent care visits? Do you have a condition that requires a specialist? Do you take prescription medications? Compare how each plan covers the services you need most often.

Consider the bottom line. How much is the monthly payroll deduction? Do you have to meet a deductible? What is the out-of-pocket maximum? How much of the cost is covered by the plan? How much are any copayments for office visits, prescriptions, etc? All of these factors together affect your total cost for healthcare.

Quick Video: Understanding Medical Plan Terms

Learn more about how the medical plans work: <https://info.burnhambenefits.com/videos/terms>.

MEDICAL BENEFITS: PLAN HIGHLIGHTS

	Anthem Blue Cross 80-E PPO In-Network	Anthem Blue Cross 80-G PPO In-Network	Anthem Blue Cross 80-K PPO In-Network
Cost Factors			
Annual Deductible	\$300/Individual \$600/Family	\$500/Individual \$1,000/Family	\$1,000/Individual \$2,000/Family
Annual Out-of-Pocket Maximum	\$1,000/Individual \$3,000/Family	\$2,000/Individual \$4,000/Family	\$3,000/Individual \$6,000/Family
Lifetime Max	Unlimited	Unlimited	Unlimited
Office Visits	You Pay	You Pay	You Pay
Primary Doctor/Specialist	\$20 copay (deductible waived) ¹	\$30 copay (deductible waived) ¹	\$30 copay (deductible waived) ¹
Preventive Care	No charge	No charge	No charge
Urgent Care	\$20 copay (deductible waived)	\$30 copay (deductible waived)	\$30 copay (deductible waived)
Chiropractic	20%, after ded	20%, after ded	20%, after ded
Acupuncture	20%, after ded Up to 12 visits/year	20%, after ded Up to 12 visits/year	20%, after ded Up to 12 visits/year
Other Services	You Pay	You Pay	You Pay
Inpatient Hospitalization	20%, after ded	20%, after ded	20%, after ded
Outpatient Surgery Hospital	20%, after ded	20%, after ded	20%, after ded
Lab and X-Ray: Diagnostic/ Complex Imaging	20%, after ded	20%, after ded	20%, after ded
Emergency Facility (copay waived if admitted)	\$100 copay, then 20% after ded	\$100 copay, then 20% after ded	\$100 copay, then 20% after ded
Ambulance	\$100 copay, then 20% after ded	\$100 copay, then 20% after ded	\$100 copay, then 20% after ded
Prescription Drugs			
Brand Name Drugs: Annual Deductible	\$200/Individual \$500/Family	\$200/Individual \$500/Family	\$200/Individual \$500/Family
Annual Out-of-Pocket Maximum	\$2,500/Individual \$3,500/Family	\$2,500/Individual \$3,500/Family	\$2,500/Individual \$3,500/Family
Retail Pharmacy	You Pay	You Pay	You Pay
Navitus 30-Day Supply	Generic: \$10 Brand: \$35	Generic: \$10 Brand: \$35	Generic: \$10 Brand: \$35
Costco Pharmacy 30-Day Supply	Generic: \$0 Brand: \$35	Generic: \$0 Brand: \$35	Generic: \$0 Brand: \$35
Mail Order Pharmacy	You Pay	You Pay	You Pay
Navitus 90-Day Supply	\$35 Specialty	\$35 Specialty	\$35 Specialty
Costco 90-Day Supply	Generic: \$0 Brand: \$90	Generic: \$0 Brand: \$90	Generic: \$0 Brand: \$90

¹ \$0 copay per visit for first three visits

MEDICAL BENEFITS: PLAN HIGHLIGHTS

	Anthem Blue Cross 80-M PPO	Anthem Blue Cross HDHP with HSA	Kaiser Permanente HMO Traditional Plan
	In-Network	In-Network	Kaiser Providers Only
Cost Factors			Must live in Ventura County
Annual Deductible	\$3,00/Individual \$6,000/Family	\$3,400/Individual \$6,800/Family	None None
Annual Out-of-Pocket Maximum	\$4,000/Individual \$8,000/Family	\$6,000/Individual \$12,000/Family	\$1,500/Individual \$3,000/Family
Lifetime Max	Unlimited	Unlimited	Unlimited
Office Visits	You Pay	You Pay	You Pay
Primary Doctor/Specialist	\$40 copay (deductible waived)	10%, after ded	\$30 copay
Preventive Care	No charge	No charge	No charge
Urgent Care	\$40 copay (deductible waived)	10%, after ded	\$30 copay
Chiropractic	20%, after ded	10%, after ded	\$10 copay; 30 visits/year combined chiropractic and acupuncture
Acupuncture	20%, after ded Up to 12 visits/year	10%, after ded Limits apply	
Other Services	You Pay	You Pay	You Pay
Inpatient Hospitalization	20%, after ded	10%, after ded	No charge
Outpatient Surgery Hospital	20%, after ded	10%, after ded	\$30 per procedure
Lab and X-Ray: Diagnostic/ Complex Imaging	20%, after ded	10%, after ded	No charge
Emergency Facility (copay waived if admitted)	\$100 copay, then 20% after ded	\$100 copay, then 10% after ded	\$100 copay
Ambulance	\$100 copay, then 20% after ded	\$100 copay, then 10% after ded	\$50 copay
Prescription Drugs			
Brand Name Drugs: Annual Deductible	\$200/Individual \$500/Family	Combined with Medical	None
Annual Out-of-Pocket Maximum	\$2,500/Individual \$3,500/Family		None
Retail Pharmacy	You Pay	You Pay	You Pay
Navitus 30-Day Supply Kaiser 100-Day Supply	Generic: \$10 Brand: \$35	Generic: \$9 Brand: \$35	Generic: \$10 Brand: \$30
Costco Pharmacy 30-Day Supply	Generic: \$0 Brand: \$35	Generic: \$0 Brand: \$35	N/A
Mail Order Pharmacy	You Pay	You Pay	You Pay
Navitus 30-Day Supply Kaiser 100-Day Supply	\$35 Specialty	N/A	Generic: \$10 Brand: \$30
Costco 90-Day Supply	Generic: \$0 Brand: \$90	Generic: \$0 Brand: \$90	N/A

¹ \$0 copay per visit for first three visits

TIPS ON PRESCRIPTION DRUGS

CHECK OUT THESE TIPS TO SAVE MONEY ON YOUR PRESCRIPTION DRUGS!

Your plan's formulary drug tiers determine how much you pay out of pocket:

\$	Generic Drug
\$\$	Brand Name Drug
\$\$\$	Specialty Drug

Understanding The Formulary Can Save You Money

If your doctor prescribes medicine, especially for an ongoing condition, don't forget to check your health plan's drug formulary. It's a powerful tool that can help you make informed decisions about your medication options and identify the lowest cost selection.

What Is A Formulary?

A drug formulary is a list of prescription drugs covered by your medical plan. Most prescription drug formularies separate the medications they cover into four or five drug categories, or "tiers." These groupings range from least expensive to most expensive cost to you. "Preferred" drugs generally cost you less than "non-preferred" drugs.

GET THE MOST FROM YOUR COVERAGE WITH NAVITUS AND COSTCO!

Take advantage of your SISC benefits to help you save on prescription costs!

Navitus: Specialty Medications for Anthem Plan Members

Specialty medications are high-cost injectable, infused, oral, or inhaled medications that generally require special handling and may be subject to special rules such as quantity limits, prior authorization and/or step therapy.

These medications have become a vital part of the treatment for chronic illnesses and complex diseases such as multiple sclerosis, rheumatoid arthritis and cancer. Some medications may involve special delivery and instructions that not all pharmacies can easily provide. These medications require personalized coordination between the member, the prescriber, and pharmacy. Navitus Specialty helps patients stay on track with treatment while offering the highest standard of compassionate care through personalized support, free delivery, and refill reminders.

Most medications classified as Specialty can be found on the SISC Drug List located on Navitus' secure member website Navi-Gate for Members at www.navitus.com.




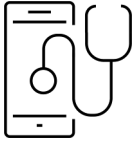


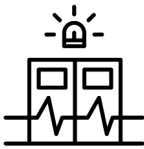
Costco: Generic Prescriptions for Anthem Plan Members

\$0 copay for most generic prescriptions! Costco membership is NOT required and you can receive a 30 or 90-day supply of most generics. Some narcotic pain and cough medications are not included in the Costco Free Generic or 90-day supply programs. This program is available to all Anthem PPO members.

Find a Costco location by calling (800) 774-2678 (press 1) or visit www.costco.com.

TIPS ON MEDICAL CARE OPTIONS

Where and how you choose to access medical care can have a significant impact on the cost. Here's a quick guide to help you know where to go, based on your condition, budget, and time.

Visit Type	Best For	Examples	Access	Cost
Nurseline 	Quick answers from a trained nurse	<ul style="list-style-type: none"> Identifying symptoms Decide if immediate care is needed Home treatment options and advice 	24/7	\$0
Virtual Visit 	Many non-emergency health concerns	<ul style="list-style-type: none"> Cold, flu, allergies Headache, migraine Skin conditions, rashes Minor injuries Mental health concerns 	24/7	\$
Office Visit 	Routine medical care and overall health management	<ul style="list-style-type: none"> Preventive care Illnesses, injuries Managing existing conditions 	Office hours	\$\$
Urgent Care / Walk-in Clinic 	Non-life threatening conditions requiring prompt attention	<ul style="list-style-type: none"> Stitches Sprains Animal bites Ear nose throat infections 	Office hours or up to 24/7	\$\$\$
Emergency Room 	Life-threatening conditions requiring immediate medical expertise	<ul style="list-style-type: none"> Suspected heart attack or stroke Major bone breaks Excessive bleeding Severe pain Difficulty breathing 	24/7	\$\$\$\$

CHECK OUT THESE VIDEOS:



**Primary Care vs
Urgent Care vs ER**



Telehealth

BENEFIT EXTRAS: ALL MEDICAL PLAN MEMBERS

NEW FOR 2024! QUEST WELLNESS SCREENING

All SISC medical plan members are eligible for a free wellness screening through Quest Diagnostics. This biometric screening can provide important insights into your health risks. When you complete this screening, you will know your health numbers and can connect with your doctor to help manage health risks and prevent chronic disease.



Quest Diagnostics has more than 2,250 Patient Service Centers nationwide where you can get your screening. Here's how to schedule an appointment:

- Go to My.QuestForHealth.com.
- Use Registration Key: SISC2024.
- In the **Wellness Screening** section, under Patient Service Center, select **Schedule a Screening**.
- If you schedule as a walk-in, you may be required to make an appointment upon check-in.
- You will receive an email when your results are ready to view online.

If you'd like to speak with Quest, you can reach them at (855) 623-9355.

Please note, any member awards will be distributed to the email used at registration within 30 days of the completed appointment.

TELADOC EXPERT SECOND OPINION

This benefit provides all SISC medical plan members with free support for making clear, informed medical decisions from leading medical experts. Teladoc can help answer medical questions, double-check a diagnosis, provide help when deciding on a treatment plan, or give guidance about surgery. Benefits include:



- Unlimited access to a top physician if you or a family member receive a difficult diagnosis.
- Your Physician Case Manager is backed by a team of leading doctors around the world, and the team collaborates to determine/confirm the correct diagnosis and the optimal plan for treatment.
- Your Physician Case Manager helps navigate the ins and outs of the healthcare system, making care more efficient and helping ease stress.
- Receive on-demand support in understanding the course of treatment, what to expect, and what the likely results are.
- You can access Teladoc at (855) 201-9925 or by visiting teladoc.com/SISC.

ACTIVE & FIT DIRECT DISCOUNTED GYM MEMBERSHIPS

Active and Fit Direct allows all SISC medical plan members to enroll in 12,000+ participating fitness centers and YMCAs nationwide for only \$28/month (plus \$28 enrollment fee and taxes). There are no annual fees or long-term contracts, and you can switch gyms at any time. In addition:



- You have access to 9,300+ On-Demand Fitness videos.
- 5,700+ Premium Gym Options at exercise studios, outdoor experiences, and others, with 20% - 70% discounts at most locations.
- Use the online fitness tracking feature, which uses a variety of wearable devices and apps.
- To learn more:, visit <https://www.anthem.com/ca/sisc/health-wellness>.

BENEFIT EXTRAS: ALL MEDICAL PLAN MEMBERS

ANTHEM EMPLOYEE ASSISTANCE PROGRAM

The District provides employees with support for a wide variety of challenges through the SISC Anthem Employee Assistance Program (EAP). If you or a family member need assistance with personal, family or work-life balance issues, you can contact the EAP for confidential assistance. You can access the EAP by calling (800) 999-7222 or by visiting www.anthemEAP.com (to log in, enter SISC as the program name). EAP benefits include the following:

Support and Counseling

The Employee Assistance Program (EAP) provides confidential support in balancing a wide array of challenges with up to 6 free counseling sessions per issue per benefit year, plus unlimited phone support for:

- Relationship difficulties
- Marriage, family or parenting concerns
- Managing change and stress
- Depression and anxiety
- Addiction and recovery
- Grief and loss
- Work/life balance
- Personal growth
- And more

You have the option to access your six free counseling sessions through Talkspace. You can also have unlimited messaging with a counselor, including text, voice, and video message. Talkspace's clinical network includes thousands of licensed counselors specializing in stress, anxiety, depression, eating disorders, substance use, sleep, identity struggles, chronic issues, trauma, grief, relationships, healthy living, and more. Self-guided exercises such as journaling and meditation are available to supplement counseling.

To access Talkspace, call the Anthem EAP at (800) 999-7222 or visit talkspace.com/associatecare and use "SISC" as your organization name. You can download the Talkspace app on your mobile phone or access it on your desktop computer using a Chrome, Firefox, Safari, or Edge browser.

Identity Monitoring and Theft Resolution

- 24/7/265 free identity monitoring and theft resolution services through IDnotify.
- Your IDnotify specialist will help you determine if an identity theft event has occurred and guide you through any necessary restoration activities.
- Access this resource by going to: <https://www.anthemeap.com/sisc/plan-finances>.

Legal and Financial Resources

- A library of articles on legal topics and issues.
- 100 legal forms for a variety of family and consumer situations, plus state-specific legal forms.
- Articles and resources that address estate planning questions.
- Financial calculators that help you to get answers and explore different options regarding home and personal financing, investing, and retirement.
- Access these resources by going to: <https://www.anthemeap.com/sisc/find-legal-support>.

Learn to Live Wellbeing Support

- Access free, customized online programs based on proven principals of Cognitive Behavioral Therapy (CBT) to manage stress, depression, anxiety, substance use and sleep issues. Go to: <https://www.anthemeap.com/sisc/emotional-wellness/seminars>.

Seminars and Articles

- Online resources for a wide array of topics, including both a library of articles and on-demand seminars. Go to: <https://www.anthemeap.com/sisc/emotional-wellness/seminars>.

Savings Center

- Access the discount shopping program provided through Perks At Work, with discounts of up to 25% on name brand, practical, and luxury items. Go to: <https://www.anthemeap.com/sisc/work-life-resources>.

BENEFIT EXTRAS: ALL EMPLOYEES

SAVE EMPLOYEE ASSISTANCE PROGRAM (EAP)

All Santa Barbara Unified School District employees are covered, even if not participating in District insurance, under the SAVE Employee Assistance Program (EAP). This benefit gives you and members of your household free, confidential, round-the-clock support in handling a wide variety of issues. Professional counselors are available 24/7 to support you with:

- **Counseling Benefits:** Difficulty with relationships, emotional distress, job stress, communication/conflict issues, alcohol or drug problems, loss and death, and more
- **Parenting & Childcare:** Referrals to quality providers, family day care homes, infant centers and preschools, before/after school care 4-hour care
- **Eldercare Resources:** Help with finding appropriate resources to care for an elderly or disabled relative
- **Financial Coaching:** Money management, debt management, identity theft resolution, tax issues
- **Legal Consultation:** Referral to a local attorney, family issues (marital, child custody, adoption), estate planning, landlord/tenant, immigration, personal injury, consumer protection, real estate, bankruptcy and more

To access your SAVE EAP benefits, call (805) 962-5387 or visit www.save-eap.org.



BENEFIT EXTRAS: ANTHEM PLAN MEMBERS ONLY

VIDA THERAPY AND HEALTH COACHING

- All Anthem plan members have free access to Vida. This virtual care platform can help with nutrition, weight loss, building healthy habits, mental health, and overall wellbeing.
- With Vida, your coach or therapist will personalize a plan for you, and help guide you every step of the way.
- To learn more, call (855) 442-5885 or visit vida.com/sisc.



MDLIVE

All Anthem plan members have access to MDLIVE visits for a \$10 copay. This telemedicine service provides convenient 24/7 access to board certified doctors, pediatricians, and licensed therapists via online video, phone or secure email. You can use MDLive:

- When you'd like to access mental health support and resources.
- If you're considering a visit to an emergency room or urgent care center for a non-emergency medical issue.
- When your primary care doctor is not available.
- When you are traveling and in need of medical care.
- During or after normal business hours, nights, weekends and holidays.
- To request prescription drugs or to get refills.



To access MDLive, visit www.mdlive.com/sisc or call (888) 632-2738. Be prepared to provide your name, the patient's name, your member identification number and your phone number.



BENEFIT EXTRAS: ANTHEM PLAN MEMBERS ONLY

EDEN HEALTH APP

All Anthem PPO plan members have free, 24/7 access to a Care Team who works together to offer you primary care, mental health support, and answers to follow-up care questions through the Eden Health app. The app is available to you and your dependents at no cost. You can receive help with:

- Diagnoses and treatments
- Prescription refills
- Scheduled video visits or live chat with a primary care physician
- Special referrals
- Mental health support

Simply download the Eden Health app from the App Store or Google Play and register.



The App Store



Google Play

CONTIGO HEALTH — ENHANCED CANCER BENEFIT

- All Anthem PPO plan members can access the highest level of cancer specialists and obtain expert comprehensive care throughout the process.
- Benefit includes care coordination services with at home provider, transportation, and more.
- To access your Enhanced Cancer Benefit, call (877) 220-3556 or visit sisc.contigohealth.com.



VALUE BASED SITE OF CARE BENEFIT

- Reference pricing for five common procedures that can be performed safely at an Ambulatory Surgery Center (ASC) at costs significantly lower than at a hospital are listed below.
- If you choose to have your procedure at an in-network outpatient facility, only the amounts below will be paid for the procedure. You will be responsible for paying the remaining amount in full.
- There is no benefit limit when you obtain these procedures at an in-network Ambulatory Service Center.
- For questions, please contact the customer service number on your medical ID card.

Value Based Purchasing	Maximum Benefit at an in-network outpatient hospital facility	There is no limit at an in-network Ambulatory Service Center (ASC)
	In-Network	ASC Facility
Arthroscopy	\$4,500	n/a
Cataract Surgery	\$2,000	n/a
Colonoscopy	\$1,500	n/a
Upper GI Endoscopy with Biopsy	\$1,250	n/a
Upper GI Endoscopy without Biopsy	\$1,000	n/a

BENEFIT EXTRAS: ANTHEM PLAN MEMBERS ONLY

HINGE HEALTH — PHYSICAL THERAPY FOR BACK AND JOINT PAIN

- All Anthem PPO plan members can receive free, personalized, digitally delivered therapy for back and joint pain.
- Get access to free wearable sensors and monitoring devices, unlimited one-on-one coaching, and personalized exercise therapy.
- Reduce your back and joint pain in just 15 minutes a day.
- To access your Hinge Health benefit, call (855) 902-2777 or visit hingehealth.com/sisc.



CARRUM HEALTH — NO-COST HIP, KNEE, AND SPINE SURGICAL OPTIONS

- All Anthem PPO plan members can access top-quality surgeons at Scripps with no out-of-pocket cost through Carrum Health.
- All medical bills, including deductibles, coinsurance and even travel expenses are covered.
- To learn more, call Carrum Health at (888) 855-7806 or visit info.carrumhealth.com/sisc.



LARK DIABETES PREVENTION PROGRAM

Anthem Blue Cross partners with Lark to offer a diabetes prevention program that can help Anthem plan members determine if you're at risk for prediabetes and if needed, take steps to address it.

- You can participate in this program at no extra cost as part of your SISC health plan.
- Track your progress, check in with your coach, and learn more about prediabetes right in Lark's free mobile app. This program is flexible, convenient, and follows guidelines from the Centers for Disease Control and Prevention (CDC) to help you make small changes that can improve your health and decrease your risk over time.
- As part of the program, you will also receive a wireless scale that uploads your information to the app automatically so you can easily track your progress and share it with your coach.
- Lark will also send you a personal activity tracker, as long as you stay active in the program.
- Go to www.lark.com/anthemBC and take a quick one-minute survey to see if you could benefit from Lark's diabetes prevention program.



MAVEN MATERNITY AND POSTPARTUM SUPPORT

All Anthem PPO plan members can access virtual care for pregnancy and postpartum support through Maven at no cost. Use Maven for unlimited, on-demand care from doctors, specialists, and coaches.

- Consult with a care advocate who connects you with trustworthy content delivered by doctors, specialists, coaches and other maternity providers to help deal with pregnancy and postpartum concerns.
- Maven provides comprehensive support through pregnancy, postpartum, return-to-work transitions, and potential miscarriage.
- Video chat or message with 30+ types of providers at no charge, from OB-GYNs and Pediatricians to Lactation Consultants and Infant Sleep Coaches.
- Free 6-month diaper subscription when you:
 1. Enroll during the first or second trimester
 2. Have an intro call with a Care Advocate
 3. Have two appointments with Maven providers during pregnancy
 4. Complete the exit survey after your baby is born



To activate your membership, download the Maven Clinic app or visit mavenclinic.com/join/SISC.

DENTAL BENEFITS

METLIFE PPO PLANS (New for 2024!)

SB Unified is pleased to offer best-in-class dental insurance through MetLife. With the MetLife Dental PPO plans, you continue to have the freedom to visit the dentist of your choice, in or out of network. Additionally, the plans were customized and designed to provide you and your dependents with access to the full dental benefit allowance, whether your dentist is in or out of the MetLife network. However, your costs are typically less when you utilize a network provider because benefits for in-network covered services are based on a percentage of the Negotiated Fee—the fee that participating dentists have agreed to accept as payment in full (subject to the deductible, coinsurance and benefit maximum). If you utilize a non-network provider who does not participate in the MetLife network, your out of pocket costs may be greater because benefits paid are based on a percentage of the Reasonable and Customary (R&C) charge.

	MetLife PDP Plus \$2,000 With \$1,500 Ortho		MetLife PDP Plus \$3,000 With \$3,000 Ortho	
	In-Network ¹	Out-of-Network	In-Network ¹	Out-of-Network
Maximum benefit	\$2,000	\$2,000	\$3,000	\$3,000
Deductible				
- Individual	\$25	\$25	\$25	\$25
- Family	\$75	\$75	\$75	\$75
- Deductible waived for preventive	Yes	Yes	Yes	Yes
Preventive services	100%	100% (UCR) ²	100%	100% (UCR) ²
Basic services	100%	100% (UCR) ²	100%	100% (UCR) ²
Major services	50%	50% (UCR) ²	50%	50% (UCR) ²
Services per category				
- Exams / cleanings / X-rays	Preventive	Preventive	Preventive	Preventive
- Extractions & fillings	Basic	Basic	Basic	Basic
- Endodontics	Basic	Basic	Basic	Basic
- Periodontics	Basic	Basic	Basic	Basic
- Oral surgery	Basic	Basic	Basic	Basic
- Crowns / inlays / onlays	Basic	Basic	Basic	Basic
- Bridges / dentures / implants	Major	Major	Major	Major
Orthodontia				
- Covered Members	Adult & Children	Adult & Children	Adult & Children	Adult & Children
- Coinsurance	50%	50% (UCR) ²	50%	50% (UCR) ²
- Lifetime Benefit Maximum	\$1,500	\$1,500	\$3,000	\$3,000

1.Network benefits are paid based on Negotiated Fee.

2.Non-network benefits are paid based on the Reasonable and Customary (R&C) charges based on the 90th percentile.

For More Information On Your Dental Benefits

- Go to www.mybenefits.metlife.com and register for an online account
- Download the MetLife Mobile App to manage your benefits anywhere, anytime
- Call (800) GET-MET8 or (800) 438-6388.

VISION BENEFITS

VSP VISION PLAN

Routine vision exams are important, not only for correcting vision, but because they can detect other serious health conditions. Santa Barbara Unified School District provides vision coverage through VSP.

- You can see a VSP in-network provider or an out-of-network provider, however, your costs will be lower if you visit an in-network provider.
- If you visit an in-network provider you will be responsible for a copay at the time of your service.
- If you receive services from an out-of-network doctor, you will pay all costs at the time of service and submit a claim for reimbursement.

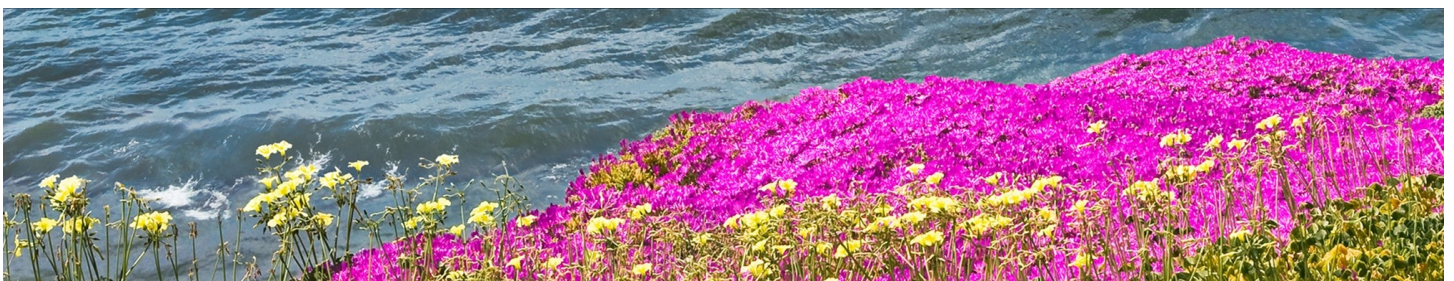
Vision Care	Vision Service Plan (VSP)	
	In-Network	Out-of-Network
	You Pay	
Vision Exam (Once Every 12 Months)	\$5 copay	Any charge above \$35 allowance
Eyeglass Lenses (Once Every 12 Months) – Single Vision – Bifocal – Trifocal	No charge No charge No charge	Any charge above \$25 allowance Any charge above \$40 allowance Any charge above \$50 allowance
Frames (Once Every 24 Months)	Any charge above \$150 allowance	Any charge above \$30 allowance
Elective Contact Lenses (Once Every 12 Months in Lieu of Frames and Lenses)	Any charge above \$150 allowance for Contact Lenses/ Contact Lens Exam	Any charge above \$90 allowance for Contact Lenses/Contact Lens Exam

Find Vision Network Providers

Go to www.vsp.com or call (800) 877 7195.

Additional Discounts Available

- LASIK and PRK Benefit: You are entitled to a 15% discount on the usual and customary fees for LASIK and PRK procedures, or a 5% discount on any promotional pricing, whichever is the greater benefit, through the US Laser Network.
- Continued Eyewear Savings: After your initial visits have been utilized, you are able to receive ongoing discounts on additional eye wear purchases at a network provider, which result in discounts up to 40% off the retail price of eye wear and accessories.



RATES FOR 2024 - 2025: CERTIFICATED

TENTHLY CONTRIBUTIONS FOR MEDICAL/DENTAL/VISION PLANS

The amount that you pay for your coverage is outlined below and depends on the plan you elect and whether you cover dependents. Note that all premium amounts shown are **tenthly**.

Certificated Employees	Employee Pays (Tenthly)	District Contribution (Tenthly)
Anthem Blue Cross 80-E PPO		
Employee Only	\$313.20	\$939.60
Employee + 1 Dependent	\$615.90	\$1,847.70
Employee + 2 or More Dependents	\$868.50	\$2,605.50
Anthem Blue Cross 80-G PPO		
Employee Only	\$291.00	\$873.00
Employee + 1 Dependent	\$572.10	\$1,716.30
Employee + 2 or More Dependents	\$805.80	\$2,417.40
Anthem Blue Cross 80-K PPO (NEW)		
Employee Only	\$279.30	\$837.90
Employee + 1 Dependent	\$548.70	\$1,646.10
Employee + 2 or More Dependents	\$772.20	\$2,316.60
Anthem Blue Cross 80-M PPO		
Employee Only	\$228.60	\$685.80
Employee + 1 Dependent	\$447.00	\$1,341.00
Employee + 2 or More Dependents	\$627.60	\$1,882.80
Anthem Blue Cross HDHP with HSA		
Employee Only	\$223.20	\$669.60
Employee + 1 Dependent	\$435.30	\$1,305.90
Employee + 2 or More Dependents	\$610.20	\$1,830.60
Kaiser Permanente HMO Traditional Plan		
Employee Only	\$234.90	\$704.70
Employee + 1 Dependent	\$457.80	\$1,373.40
Employee + 2 or More Dependents	\$645.90	\$1,937.70

RATES FOR 2024 - 2025: CERTIFICATED

TENTHLY CONTRIBUTIONS FOR MEDICAL/DENTAL/VISION PLANS

The amount that you pay for your coverage is outlined below and depends on the plan you elect and whether you cover dependents. Note that all premium amounts shown are **tenthly**.

Certificated Employees	Employee Pays (Tenthly)	District Contribution (Tenthly)
MetLife PDP Plus \$2,000 PPO (NEW)		
Employee Only	\$33.76	\$41.87
Employee + 1 Dependent	\$115.96	\$42.08
Employee + 2 or More Dependents	\$190.11	\$42.27
MetLife PDP Plus \$3,000 PPO (NEW)		
Employee Only	\$40.80	\$41.94
Employee + 1 Dependent	\$130.68	\$42.23
Employee + 2 or More Dependents	\$211.75	\$42.49
Vision Service Plan (VSP)		
Employee Only	\$0.00	\$9.72
Employee + 1 Dependent	\$5.12	\$14.32
Employee + 2 or More Dependents	\$14.84	\$14.32



RATES FOR 2024 - 2025: CLASSIFIED

TENTHLY CONTRIBUTIONS FOR MEDICAL/DENTAL/VISION PLANS

The amount that you pay for your coverage is outlined below and depends on the plan you elect and whether you cover dependents. Note that all premium amounts shown are **tenthly**. *Note: Plan rates are pending CSEA ratification and Board approval of the tentative agreement for Article 40 Health and Welfare Benefits.*

Classified Employees	Employee Pays (Tenthly)	District Contribution (Tenthly)
Anthem Blue Cross 80-E PPO		
Employee Only	\$313.20	\$939.60
Employee + 1 Dependent	\$615.90	\$1,847.70
Employee + 2 or More Dependents	\$868.50	\$2,605.50
Anthem Blue Cross 80-G PPO		
Employee Only	\$291.00	\$873.00
Employee + 1 Dependent	\$572.10	\$1,716.30
Employee + 2 or More Dependents	\$805.80	\$2,417.40
Anthem Blue Cross 80-K PPO (NEW)		
Employee Only	\$279.30	\$837.90
Employee + 1 Dependent	\$548.70	\$1,646.10
Employee + 2 or More Dependents	\$772.20	\$2,316.60
Anthem Blue Cross 80-M PPO		
Employee Only	\$137.16	\$777.24
Employee + 1 Dependent	\$447.00	\$1,341.00
Employee + 2 or More Dependents	\$627.60	\$1,882.80
Anthem Blue Cross HDHP with HSA		
Employee Only	\$223.20	\$669.60
Employee + 1 Dependent	\$435.30	\$1,305.90
Employee + 2 or More Dependents	\$610.20	\$1,830.60
Kaiser Permanente HMO Traditional Plan		
Employee Only	\$234.90	\$704.70
Employee + 1 Dependent	\$457.80	\$1,373.40
Employee + 2 or More Dependents	\$645.90	\$1,937.70



RATES FOR 2024 - 2025: CLASSIFIED

TENTHLY CONTRIBUTIONS FOR MEDICAL/DENTAL/VISION PLANS

The amount that you pay for your coverage is outlined below and depends on the plan you elect and whether you cover dependents. Note that all premium amounts shown are **tenthly**. *Note: Plan rates are pending CSEA ratification and Board approval of the tentative agreement for Article 40 Health and Welfare Benefits.*

Classified Employees	Employee Pays (Tenthly)	District Contribution (Tenthly)
MetLife PDP Plus \$2,000 PPO (NEW)		
Employee Only	\$18.91	\$56.73
Employee + 1 Dependent	\$39.51	\$118.53
Employee + 2 or More Dependents	\$58.10	\$174.29
MetLife PDP Plus \$3,000 PPO (NEW)		
Employee Only	\$20.69	\$62.06
Employee + 1 Dependent	\$43.23	\$129.68
Employee + 2 or More Dependents	\$63.56	\$190.68
Vision Service Plan (VSP)		
Employee Only	\$0.00	\$9.72
Employee + 1 Dependent	\$5.12	\$14.32
Employee + 2 or More Dependents	\$14.84	\$14.32

TAX SAVINGS BENEFITS: HEALTH SAVINGS ACCOUNT

STERLING ADMINISTRATION HEALTH SAVINGS ACCOUNT (HSA)

The opportunity to establish and contribute to a Health Savings Account is available when you elect the Anthem HDHP with HSA medical plan option. It's like a personal, tax-free savings account for health care expenses that earns interest. Any unused money rolls over from year to year.

The portion of your paycheck that you contribute to your HSA will be taken out before you pay federal income taxes, Social Security taxes and most state taxes (excluding state taxes in CA and NJ). Any contributions you make can be increased or decreased over the course of the year.

The money in your HSA is yours to save and spend on eligible health care expenses whenever you need it, whether in this plan year or in future plan years. Your account balance earns interest and the unused balance rolls-over from year to year. The money is yours to keep even if you leave Santa Barbara Unified School District, no longer participate in a high deductible health plan (like the Anthem HDHP with HSA), or retire.

	2024 IRS Annual Contribution Limit for HSAs
Employee Only	\$4,150
Employee + 1 Dependent	\$8,300
Family + 2 or More Dependents	\$8,300
Catch Up Contribution for Age 55 and Over	\$1,000

Note for Employees Residing in California

Subject to state tax law, contributions, earned interest, or investment gains related to an HSA bank account are not exempt from state taxes.

For More Information On Your HSA Benefits

- Go to <https://www.sterlinghsa.com/Accounts/Login/> and register for an online account
- Find answers to commonly asked questions: <https://www.sterlingadministration.com/faqs/hsa-faq/>
- Find HSA Forms here: <https://www.sterlingadministration.com/forms/individual/hsa/>
- Call (800) 617-4729 or email customer.service@sterlingadministration.com



TAX SAVINGS BENEFITS: FLEXIBLE SPENDING ACCOUNTS

FLEXIBLE SPENDING ACCOUNTS

You can set aside money in a Flexible Spending Account (FSA) before taxes are deducted to pay for certain health and dependent care expenses, lowering your taxable income and increasing your take home pay. Only expenses for services incurred during the plan year are eligible for reimbursement from your accounts. You choose how you want to receive reimbursements for your eligible expenses. You may use a debit card provided by **American Fidelity**, sign up for direct deposit to your bank account or you may have a check sent to your home.

Please remember that if you are using your debit card, you must save your receipts, just in case American Fidelity needs a copy for verification. Also, all receipts should be itemized to reflect what product or service was purchased. Credit card receipts are not sufficient, per IRS guidelines.

Health Care Spending Account

This plan is used to pay for expenses not covered under your health plans, such as deductibles, coinsurance, copays and expenses that exceed plan limits. You may also use this plan to pay for over-the-counter medications, menstrual supplies, and personal protective equipment (PPE) used for the primary purpose of preventing the spread of COVID-19. Employees may defer up to **\$3,200** pre-tax for the 2024 plan year.

Dependent Care Assistance Plan

This plan is used to pay for eligible expenses you incur for child care, or for the care of a disabled dependent, while you work. Employees may defer up to **\$5,000** pre-tax for the 2024 plan year.

FSAs offer sizable tax advantages. The trade-off is that these accounts are subject to strict IRS regulations, including the use-it-or-lose-it rule. According to this rule, you must forfeit any money left in your account(s) after your expenses for the year have been reimbursed. The IRS does not allow the return of unused account balances at the end of the plan year, and remaining balances cannot be carried forward to a future plan year. If you are unable to estimate your health care and dependent care expenses accurately, it is better to be conservative and underestimate rather than overestimate your expenses.

How You Can Save Money with an FSA

Example

	Without the Health Care FSA	With the Health Care FSA
Gross Annual Pay	\$45,000	\$45,000
Pre-Tax Health Care FSA	Not Elected	\$1,200
Taxable Gross Income	\$45,000	\$43,800
Payroll Taxes (at 30%)	\$13,500	\$13,140
Health Care Cost	\$1,200	\$0
Net Pay	\$30,300	\$30,660
Annual Net Pay Increase	\$0	\$360

HealthCare FSA Carryover

The IRS allows you to carry over up to \$610 to the following plan year for your Health Care FSA. Any unused amount over \$610 at the end of the plan year will be forfeited.

Important Reminders

- If you enroll in the SISC/Anthem HSA medical plan, you may participate in the Health Care FSA. However, you may not have a Health Savings Account at the same time, as the IRS does not allow enrollment in both plans.
- You must re-enroll in FSA each year if you wish to participate in an FSA for that year. Your FSA benefit will not automatically roll over into next year.

INCOME PROTECTION BENEFITS: LIFE AND AD&D

Life insurance is an important resource to help protect your loved ones in the event of your death. Things like funeral expenses, debt, and the cost of living, can all add up. Life insurance can help lessen the financial burden and provide coverage to help pay for these types of expenses.

New York Life Basic Life and AD&D Insurance

Santa Barbara Unified School District provides you with Basic Life insurance coverage in the following amounts:

- Certificated and Classified Employee: \$30,000
- Management / Confidential Employee: \$100,000
- Spouse: \$1,500
- Children (6 months to age 19, or age 25 if full-time student): \$1,500
- Child(ren): Birth to 6 months: \$500

This coverage protects your family or other beneficiaries in the event of your death while you are actively employed with the company.

Accidental Death and Dismemberment (AD&D) coverage provides an additional benefit to your beneficiary if your death is due to a covered accident or injury.

Life benefits will reduce by certain percentages as you age, and will terminate when you leave the company or retire. When you reach age 65, benefits will be reduced to 65%; at age 70, your benefits will be reduced to 40%; at age 75, your benefits will reduce to 25%.

Important Facts About Beneficiaries

Beneficiaries are individuals or entities that you select to receive benefits from your policy. If you do not have a beneficiary, benefits are paid to your estate. Here's what you need to know about beneficiaries:

- You can change your beneficiary designation at any time
- You may designate a sole beneficiary or multiple beneficiaries to receive payment in the percentage(s) allocated
- To select or change your Life Insurance beneficiary, go to Employee Self Service (ESS) at <https://selfservice.sbunified.org>



AMERICAN FIDELITY VOLUNTARY BENEFITS

AMERICAN FIDELITY VOLUNTARY PLANS

The District provides you with the opportunity to customize your financial protection coverage through American Fidelity voluntary plans. These plans can help protect your income, assets and family security in the event of an injury or illness.

POST TAX BENEFITS

Disability Income Insurance

This plan pays a monthly benefit amount based on a percentage of your gross income if you are unable to work due to a disability or illness. You pay for coverage on an after-tax basis and you can choose from several waiting periods (how long before disability benefits begin). Premiums are not required while you are disabled, based on the length of your disability.

Whole Life Insurance

Whole life insurance can pay money to your loved ones when you pass away, but it offers additional value as well. This plan features a "living" benefit. This means that if you are diagnosed with a terminal illness with a life expectancy of one year or less, you can request that some or all of the death benefit be paid to you while you are living. With whole life insurance, your policy can build cash value over time. You can use this cash value later in life to buy a smaller "paid-up" policy with no more premiums due.

Term Life Insurance

Term life insurance is an affordable way to leave your loved ones money when you pass away. They can use it to help pay for housing and other expenses, including your final arrangements. This plan also includes the Accidental Death & Dismemberment (AD&D) benefit. With this benefit, the policy pays additional benefits if your death was due to a covered accident. If you survive a serious accident, the benefit can pay you money for certain severe injuries, such as loss of vision, hearing and limbs.

PRETAX BENEFITS

Cancer Insurance

If you or a family member are diagnosed with cancer, this plan may help ease the impact on your finances. Benefit payments are made directly to you. You choose the coverage option that is the best fit for you. There are more than 25 plan benefits available for cancer treatment, including wellness and early detection. Radiation, chemotherapy and hormone therapy are covered, as is treatment related to transportation and lodging.

Accident Only Insurance

This limited Benefit Accident Only Insurance plan can help pay for expenses that can result from a covered accident. The plan provides for 24-hour coverage for accidents that occur both on and off the job and can help offset your medical expenses. With over 30 plan benefits available, you have the opportunity to choose the plan that best fits you and your family.

403(b) Plan

Participating in a 403(b) plan allows you to prepare for your retirement so that you can enjoy things you may not have been able to during your working years. It allows you to put pretax contribution which reduces your federal taxable income. The money is automatically taken out from your paycheck and you have the flexibility to change your contribution, as allowed by your plan.

For more information regarding any of these plans, contact (909) 941-1175 x 326 or visit americanfidelity.com.

RETIREMENT BENEFITS



403(B) AND 457(B) RETIREMENT DEFERRED COMPENSATION PLANS

You have the opportunity to save for retirement and other long-term financial needs through the TSA Consulting Group (TSACG) 403(b) and 457(b) Deferred Compensations plans.

If you enroll in one or both of these plans, your tax-deferred contributions are made via convenient payroll deductions. This reduces your current taxable income and the money in the plan(s) grow untaxed until you withdraw it after retirement.

The IRS regulates the contribution limits you can contribute annually to tax-advantaged retirement plans and imposes penalties if you violate the limits. You can contribute up to \$23,000 for each plan for the 2024 plan year. Employees over age 50 can make an additional catch-up contribution up to \$1,000 for each plan.

TSACG monitors 403 (b) contributions and notifies the district in an event of an excess contribution.

Additional plan features include:

- 403 (b) and 457 (b) Plan Loans –you may be eligible to borrow against your plan.
- Rollovers –you may move funds from one qualified plan to another qualified plan.
- Hardship Withdrawals –you may be able to withdraw in the event of an immediate or heavy financial need.
- Unforeseen Financial Emergency Withdrawal –You may be able to withdraw money in the event of a severe financial hardship.

How to Get Started

To start, stop or change a 403 (b) or 457 (b) salary reduction, login into the TSACG website. You will find a list of all authorized Investment Provider on this website.

- Go to www.tsacg.com
- Click on the “Individual” tab, scroll down to “Employers”
- Select “California”, then “Santa Barbara Unified School District”
- Make sure an account with the vendor of your choice is set up prior to starting deductions

If you have questions, please call TSACG Customer Service at (888) 796-3786.

BENEFIT CONTACTS

Benefit Plan Contacts		
Name	Phone	Website/Email
Santa Barbara Unified School District		
Human Resources/Benefits	(805) 963-4338 Benefits Office Ext. 6242 Gaby Leon Ext. 6240	hrbenefits@sbunified.org
Medical		
Anthem Blue Cross of California	(800) 322-5709	www.anthem.com/ca/sisc
Navitus Health Solutions (Anthem PPO Plans)	(866) 333-2757	www.navitus.com
MDLive (Anthem PPO Plans)	(888) 632-2738	www.mdlive.com/sisc
Kaiser Permanente HMO	(800) 464-4000	www.kp.org
Mental Health		
SAVE EAP (All Employees)	(805) 962-5387	www.save-eap.org
Anthem EAP (SISC)	(800) 999-7222	www.anthemEAP.com
Vida Therapy and Health Coaching	(855) 442-5885	vida.com/sisc
Dental		
MetLife	(800) 438-6388	www.mybenefits.metlife.com
Vision		
Vision Service Plan (VSP)	(800) 877-7195	www.vsp.com
Life and AD&D Insurance		
New York Life and AD&D Insurance	(888) 842-4462	https://www.mynylgbs.com/auth/employee-benefits/login
Retirement Savings Plans		
TSA Consulting Group (TSACG) 403 (b) and 457 (b) Plans	(888) 796-3786	www.tsacg.com
Health Savings Account		
Sterling Administration HSA	(888) 892-7494	www.sterlinghsa.com
Flexible Spending Accounts		
American Fidelity	1-800-365-9180	AmericanFidelity.com
Voluntary Benefits		
American Fidelity AFLAC*	1-800-365-9180 1-877 924-3967	AmericanFidelity.com Stephen_Hardy@us.aflac.com

District Mailing Address:

720 Santa Barbara Street
Santa Barbara, CA 93101

*AFLAC policies are being grandfathered in for payroll deductions, however no new policies can be enrolled at this time.

IMPORTANT INFORMATION

ANNUAL NOTICES

ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. Santa Barbara Unified School District distributes these notices each year during Open Enrollment. You may also request a copy by contacting the Human Resources Department, or download a copy at <https://www.sbunified.org/departments/humanresources/benefits>.

- Medicare Part D Notice of Creditable Coverage
- HIPAA Notice of Privacy Practices
- Women's Health and Cancer Rights Act (WHCRA)
- Newborns' and Mothers' Health Protection Act
- Special Enrollment Rights
- Medicaid & Children's Health Insurance Program
- Summary of Benefits and Coverage (SBC)



PLAN DOCUMENTS

Important documents for our plans are available on our benefits website at www.sbunified.org and include:

- **Evidence of Coverage (EOCs):** An Evidence of Coverage, or EOC, is the legal document for describing benefits provided under the plan as well as plan rights and obligations to participants and beneficiaries.
- **Summary of Benefits and Coverage (SBCs):** A Summary of Benefits and Coverage (SBC) is a document required by the Affordable Care Act (ACA) that presents benefit plan features in a standardized format. All plan SBCs are available on our benefits website, <https://www.sbunified.org/departments/humanresources/benefits>.

Paper copies of these documents and notices are available if requested. If you would like a paper copy, please contact Human Resources at (805) 963-4338, Ext 6242 or via email at hrbenefits@sbunified.org.



2211 Michelson Drive, Suite 1200 | Irvine, California 92612
Telephone: (949) 833-2983 | Fax: (949) 833-9549

Learn more at www.burnhambenefits.com

This Employee Benefits Guide provides an overview of some of your benefit plan choices. It is for informational purposes only. It is not intended to be an agreement for continued employment. Neither is it a legal plan document. If there is a disagreement between this guide and the plan documents, the plan documents will govern.

In addition, the plans described in this guide are subject to change without notice. Continuation of any benefit plan or coverage is at the company's discretion and in accordance with federal and state laws. If you need additional information or have any questions about the benefit program, please contact the Human Resources Department.

Copyright © Burnham Benefits Insurance Services, A BRP Company - all rights reserved