



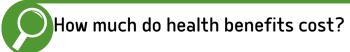
# Question & Answer with SDTA President Edith Salvatore

Do I have to do Open Enrollment?

**YES**. The entire District is moving from CalPERS to SISC and you **MUST** enroll with SISC for benefits during this fall's Open Enrollment period.

# Do I have to meet with American Fidelity to complete my Open Enrollment?

**YES**. An email went out from "SUHSD Human Resources" on September 16 with a lot of information, and more will be coming out. The 9/16 email included a link to the <u>American Fidelity scheduler</u>. You can use that to sign up for appointments. *We are hopeful that virtual appointments will be available soon*.



That same 9/16 email from Human Resources included documents describing the various plans offered and the costs for each plan. Your SDTA Contract provides that the District pays the full premium for single, two-party, or family coverage up to the cost of the most expensive HMO option offered for all full-time SDTA bargaining unit members. This means that for the 2023 benefit year, the only plan that will require an out-of-pocket payment for full-time employees is the Anthem PPO ( $\frac{6}{510}/\frac{14}{514}$  per month).

If you are a part-time employee, the District covers the same percentage of your premiums that you work – so a 60% employee has 60% of their premium covered and is responsible to pay for the remaining 40% of that premium.

# Do I have to provide documentation for my spouse/domestic partner/child/dependent?

**YES**. SISC requires this information to be provided once at enrollment. You will do this during your appointment with American Fidelity. The American Fidelity rep will not take your documents – if you bring originals OR copies of the documents (first page of tax filing/marriage certificate for spouse/domestic partner, birth certificate for children), the AF rep will scan the document. If you have electronic copies, you will be given a link that will allow you to upload that document directly to the American Fidelity system.

> What happens to my documents once my dependents are verified?

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Once the Open Enrollment period is over, the District Benefits department, with support from American Fidelity, will move the electronic files of your dependent verification documents to SISC's database, where it will stay until that person is no longer covered as your dependent. American Fidelity will not maintain a copy of your records.



# Do I have to purchase any other American Fidelity products during the appointment?

**NO**. American Fidelity is also the District's provider for IRC-125 plans (Flexible Spending plans for medical or childcare expenses) and this will be your opportunity to sign up for or continue those plans. If you are interested in other products that American Fidelity offers, you can discuss those during your meeting. But if you are not interested, simply tell the rep that you are only interested in Open Enrollment or that you're only interested in Open Enrollment.

# What if I decline benefits and take "cash back"?

SISC maintains low premium costs by requiring all employees in affiliated Districts to take benefits. **This means that once we have shifted to SISC in 2023, cash back will not be an option for any new enrollments**. However, if you currently have health benefits through a spouse/domestic partner or parent, you will be able to complete paperwork to continue taking the cash back option moving forward. You must show proof of coverage and complete the application form and present these at your appointment with American Fidelity. If you do not complete the process before the end of 2022, you will not have access to the cash back option moving forward.

# What if my spouse/domestic partner and I both work for the District?

Unlike with CalPERS, **SISC allows both employees to enroll in benefits**. If you and your spouse/domestic partner both work for the District, you have the option to elect to have one partner take benefits and cover you both while the other elects the cash back option (see above) **OR** you and your partner could each elect to choose coverage - this can be advantageous if you utilize your benefits a lot and can use double coverage to cover co-pays or other costs, or if you are a hybrid Kaiser/Anthem family - nobody has to "give up" their doctor! This is YOUR decision and you should do your homework to determine which option (cash back or double coverage) will support your family more as you will not have the option to go back and elect cash back after this year.

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