



Irvine Unified School District

2021 RETIREE BENEFIT REFERENCE GUIDE

Certificated Employees

Eligible when retired after reaching age 55, provided employee served a minimum of fifteen (15) full time or equivalent years (last five (5) years to be consecutive) in the District and ITA bargaining unit prior to retirement (refer to ITA contract). Medical, dental, and vision will continue until you are eligible for Medicare (age 65 in most cases) or until you accept other employment, which provides medical, dental and vision benefits (per ITA Contract Section 18.7.1.).

Classified Employees

Eligible when retired after reaching age 55, provided employee served a minimum of ten (10) consecutive years with the District prior to retirement (refer to CSEA contract). Medical, dental, and vision coverage will continue until you are eligible for Medicare (age 65 in most cases).

Human Resources verifies eligibility and notifies the Insurance Department with a Change of Status. Certificated Staff contact Amber Crespi and Classified Staff contact Kathy Baum in Human Resources with eligibility questions.

If you retire in the months of September through May, Retiree benefits begin the 1st of the following month. If you retire in June through August, Retiree benefits begin September 1st. You will receive a communication from the Insurance Department upon your retirement. New medical cards will be mailed to your home (dental and vision cards not provided.)

Dependent Eligibility

A dependent of a retiree is eligible for medical, dental and vision benefits only during the initial (retirement) enrollment period provided the dependent was on the employee's medical, dental and vision plans at time of retirement. Dependent premiums are the responsibility of the retiree and are payable monthly to Discovery Benefits. Dependents are not eligible to reenroll once dropped from medical, dental and vision plans.

An eligible Dependent for Medical Coverage is defined as follows:

- A retiree's lawful spouse/domestic partner;
- A retiree's biological child up to the age of 26;
- A retiree's step-child from marriage to the biological parent of child up to age 26;
- A retiree's legally adopted child up to age 26;
- A retiree's child from a court appointed guardianship up to age 26;
- A child for whom a Qualified Medical Support Order has been issued up to age 26;

An eligible Dependent for Dental Coverage is defined as follows:

- A retiree's lawful spouse/domestic partner;
- A retiree's biological child up to age 24, when child is enrolled as a full time student, (12 or more units) beginning at age 19;
- A retiree's step-child from marriage to the biological parent of child up to age 24, when step-child is enrolled as a full time student, (12 or more units) beginning at age 19;
- A retiree's legally adopted child up to age 24, when child is enrolled as a full time student, (12 or more units) beginning at age 19;

- A retiree's child from a court appointed guardianship up to age 24, when child is enrolled as a full time student, (12 or more units) beginning at age 19;
- A child for whom a Qualified Medical Support Order has been issued up to age 24.

An eligible Dependent for Vision Coverage is defined as follows:

- A retiree's lawful spouse/domestic partner;
- A retiree's biological child up to the age of 26;
- A retiree's step-child from marriage to the biological parent of child up to age 26;
- A retiree's legally adopted child up to age 26;
- A retiree's child from a court appointed guardianship up to age 26;
- A child for whom a Qualified Medical Support Order has been issued up to age 26;

COBRA Continuation Coverage

You also have the option to decline the District's retirement benefits and elect COBRA coverage (up to 18 months) at your own expense. If you elect COBRA for yourself at the time of early retirement, then District retirement benefits are forfeited. It is important you evaluate your options carefully to determine how your selection can impact you and your family's future medical, dental, and vision coverage. You and your eligible dependent(s) will be given the opportunity again to enroll in COBRA upon termination from District paid retirement benefits. COBRA communications will be mailed to your home from Discovery Benefits, IUSD's COBRA Administrator.

Retiree and COBRA premiums are effective January 1, 2021 which are **subject to change annually**.

Retiree Monthly Rates - Effective 1/1/21				
Coverage Level	Blue Shield PPO	Blue Shield HMO	Delta Dental PPO	VSP or MES Vision
Retiree Only	\$41.67	\$41.67	\$0	\$0
Retiree + One Dependent	\$932.06	\$875.70	\$44.76	\$16.33
Retiree + Two Dependents	\$1,822.44	\$1,709.72	\$89.51	\$27.00
Three or More Dependents	\$2,908.70	\$2,727.25	\$144.10	\$35.78

COBRA Monthly Rates - Effective 1/1/21				
Coverage Level	Blue Shield PPO	Blue Shield HMO	Delta Dental PPO	VSP or MES Vision
Single	\$580.51	\$523.85	\$39.69	\$7.19
Two Party	\$1,161.02	\$1,047.73	\$79.41	\$15.52
Family	\$1,869.22	\$1,686.84	\$127.79	\$25.67