

Date: August 1, 2023

To: Temporary Credit and Non-Credit Unit Members

From: Ron Owen, Senior Benefits Analyst

Re: Kaiser Health Coverage

4.2 Health Coverage: Temporary Credit and Non-Credit Unit Members. (a) Effective June 1, 2020, the District shall provide a maximum contribution of \$2,050 per month for a Kaiser Traditional or Kaiser Deductible medical plan for qualifying temporary (credit or non-credit) unit members. Part-time unit members who choose health coverage which exceeds the maximum District contribution shall pay the additional employee premium contribution through a monthly payroll deduction. For Spring semester (coverage months February to August), if unit members do not have a summer assignment to cover the employee premium contribution from their payroll check, then the total July and August employee premium contribution will be paid by personal check to the District payroll department by the fifth business day of the month of coverage. Unit members who do not expect to have a summer assignment may increase their payroll deduction for their April and/or May paychecks.

(c) Qualifying temporary credit and noncredit unit members are those who are currently employed part-time, teach twelve (12) credit or noncredit units or more in an academic year, excluding summer term, and who teach at least six (6) credit or noncredit units in the Fall semester (coverage months September to January). The six (6) units in the Fall semester may include a late-start course. If any course is cancelled or the unit member's assignment drops below six (6) units in the Fall or below twelve (12) for the academic year in the Spring, the unit member's District provided coverage will be terminated the first of the month after the course cancellation/reduction in units and the unit member will repay the District for the health coverage strictly already provided. The unit member may continue coverage at their own cost under COBRA.

The Monthly Premiums, District and Employee contributions are as follows:

PT Faculty	Renewal Rates Effective 10/01/2023 (monthly)		
	Total Premium	District Contribution	Employee Contribution
Kaiser Permanente Traditional Plan			
Employee Only	\$1,103.00	\$1,103.00	\$0.00
Employee + 1	\$2,156.00	\$2,050.00	\$106.00
Family	\$3,034.00	\$2,050.00	\$984.00
Kaiser Permanente Deductible Plan			
Employee Only	\$982.00	\$982.00	\$0.00
Employee + 1	\$1,921.00	\$1,921.00	\$0.00
Family	\$2,703.00	\$2,050.00	\$653.00
Kaiser - High Deductible/Health Saving \$1,500 90%			
Employee	\$870.00	\$870.00	\$0.00
Employee + 1	\$1,701.00	\$1,701.00	\$0.00
Family	\$2,393.00	\$2,050.00	\$343.00

If you are currently enrolled in a Kaiser plan and you have no changes, there is no further action required

To enroll, please complete and submit to the Benefits office no later than two weeks from your date of hire. Coverage will be effective on the 1st of the month following hire:

- [Kaiser Enrollment Form](#)

Proof of eligibility for dependents

- [Required Documentation](#)

Any changes to an existing enrollment, please complete:

- [SISC Membership Change Form](#)

The fall semester coverage period is September 1 – January 31.

The spring semester coverage period is February 1 – August 31.