Elgin Community College

Bright Choice. Bright Future.

Benefit Reference Guide
Frequently Asked Questions & Answers

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Enrollment Periods

Most insurance benefits will become effective on your first day of employment provided you **return your enrollment forms within thirty (30) days of your hire date**. The effective date for the dental HMO and/or vision plans is the first of the month following your hire date. The effective date for Voluntary Life/AD&D insurance and Voluntary Long Term Disability Insurance is the latter of date of eligibility or approval date of application.

Benefit choices remain in effect from your hire date until the next open enrollment period or during a Special Enrollment if you experience a qualifying event such as a marital status change (e.g.-marriage/divorce), birth/adoption, death of spouse, and/or involuntary loss of other coverage. **You must notify HR-Benefits and make changes within 30 days of the qualifying event.**

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Medical Insurance: Blue Cross/Blue Shield (BCBS)

What is an HMO?

A health maintenance organization (HMO) contracts with health care professionals and facilities to create a "provider network."

If you sign up for this plan, you must choose a primary care provider (PCP) and a medical group to coordinate your care. If your current physician is not in the plan, you will have to find another doctor, or pay to see your current physician.

This plan will not pay for non-emergency care if it's performed by an out-of-network physician or facility. You'll also need a referral from your PCP to see a specialist.

Why choose the HMO?: In general, HMOs offer you the lowest out-of-pocket costs for your care as long as you stay in the network.

Why not to choose the HMO?: The tradeoff is that your access to care outside the network is extremely limited.

What is a PPO?

A preferred provider organization (PPO) also enters into contractual agreements with health care providers and creates a "provider network." But unlike the HMO plan, the PPO health insurance will cover some – but not all – of the cost of care administered by out-of-network providers.

Why choose the PPO?: If you select a PPO, you will have low co-pays as long as you see in-network physicians. Another advantage of PPO insurance is that unlike an HMO, you do not need a primary care physician's permission to see a specialist (as long as the specialist is in network).

Why not to choose the PPO?: PPOs have a few disadvantages. Going out of network has a higher co-insurance. However, unlike the HMO plan, the PPO plan generally will pick up at least some of the cost of out-of-network care.

In summary, PPO health insurance offers a wider range of access than HMO insurance, but your out-of-pocket costs tend to be higher than your in-network ones.

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Medical Insurance-Questions

How do I know if my doctors/hospitals are in network or not?

Visit www.bcbsil.com and click on “Find a Doctor” or use this link:
http://www.bcbsil.com/providers/index.htm?WT.svl=h2

Then, you may search by Name or by Specialty
Simply choose either the HMO or the PPO option from the drop down box.

How do I find doctors or hospitals out of state?

Click on the state drop down menu and change it to the state you would like to search.

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Dental Insurance: Delta Dental

Like BCBS, Delta Dental offers a choice between an HMO and a PPO plan.

On the enrollment form, indicate your preference

Our group number is #8380.

To find a dentist in your chosen plan, first go to www.deltadentalil.com and then click on “Dentist Search”

http://www.deltadental.com/DentistSearch/DentistSearchController.ccl?DView=DentistDentistSearch

Search under “Deltacare” for the HMO plan or under “Delta Dental Premier” or “Delta Dental PPO” for the PPO plan.

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Vision Insurance: Davis Vision and VSP

Through the BlueCross BlueShield medical plan, a no-cost vision program called Davis Vision offers discounts for exams, lenses and frames.

Additional coverage can be purchased through the College's voluntary vision plan provider, VSP.

To locate a VSP provider, call 1-877-7195 or visit www.vsp.com

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Flexible Spending Account (FSA)

What is a Flexible Spending Account (FSA)? A FSA allows you to tax shelter certain health and dependent care expenses that are not covered by the insurance.

There is a calendar year maximum for health reimbursement and a calendar year maximum for dependent care reimbursement.

Funds for health reimbursement may be used right away; while, funds for dependent care may only be used as they are accrued.

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COBRA and HIPAA

The **Consolidated Omnibus Budget Reconciliation Act (COBRA)** allows those who would otherwise lose their insurance coverage to continue the coverage at their own expense; typically for 18-36 months after they would otherwise lose the coverage depending on the qualifying event. For example, events such as job loss, loss of coverage (divorce), resignations and terminations allow for 18 months of continuation and events such as death of the insured and/or loss of eligibility for dependent status allow for the dependent to have access to 36 months of continuation. New employees receive an initial COBRA notification and severed employees receive information about their COBRA rights when they leave the College.

The **Health Insurance Portability and Accountability Act (HIPAA)** has two primary purposes.

- 1. It allows for **portability** of insurance-In the past, employees who became ill could be denied raises or other incentives and were unable to quit for fear they would not have access to healthcare elsewhere. HIPAA ensures that if you were to leave employment, you would be able to enroll in a plan somewhere else with proof of prior creditable coverage.
- 2. It makes employers **accountable** to protect the **privacy** of personal health information (PHI)-We keep all insurance records separate from other personnel records and limit access to those who have a right to know such as our insurance carriers and third-party administrators (TPAs). Additionally, all billing is password protected in order to protect privacy and confidentiality.

FMLA/ADA/Sick Pool

The Family Medical Leave Act (FMLA) protects your job for up to 12 weeks of unpaid leave in a 12 month period due to your own or a family member's illness. This time can be taken consecutively or intermittently and you are eligible if you have worked 1,250 hours during the past 12 months. During FMLA time, benefits continue at your normal contribution and your job is protected.

The Americans with Disabilities Act (ADA) provides additional short-term leave time if you are unable to return after FMLA has been exhausted. To be eligible for this additional ADA time, there must be a reason to believe you will be able to return to work in less than six months. ADA protects your employment but not necessarily your specific current position. ADA can also protect you if you need some reasonable accommodations for your work connected to your disability, with a physician's note.

Sick Pool: In addition to your own personal accrued sick time, ECC offers a sick pool that you can donate to and borrow from. In the event that you need to be out of work due to your own illness, you may use your accumulated sick time as well as the sick pool in order to be paid when away from work. (See your specific union contract or Administrative procedure for more details.)

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Retirement and Disability

Instead of Social Security, ECC employees pay into the State University Retirement System (SURS). SURS provides retirement, disability, death and survivors' benefits to eligible SURS participants and annuitants.

Provided you meet the eligibility requirements set forth by SURS, the Disability benefit offered by SURS replaces 50% of your income if you were to suffer a long-term disability up to 50% of your total SURS earnings.

For more information, please contact SURS by calling 800-ASK-SURS or by visiting www.SURS.org.

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403(b)/457(b)

ECC offers a 403(b) tax-sheltered annuity plan in which you can participate. There are four approved vendors that you may choose to invest with:

AXA Equitable

First Investors Funds distributed by Foresters Financial

Lincoln Investment Planning

The Variable Annuity Life Insurance Company (VALIC)

ECC also offers a 457(b) deferred compensation plan through Lincoln Investment Planning.

Both plans are a great way to start saving for retirement on a pre-tax basis.

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Life Insurance

Group term life and accidental death and dismemberment (AD&D) is provided at the College's expense for each full time employee. The benefit amount is two (2) times the employee's annual base salary or $100,000 whichever is greater, with a maximum amount of $350,000.

You may elect additional insurance for yourself, your spouse and/or your children at your expense. The premiums are based on your age bracket and desired coverage level (generally in $10,000 increments).

There is a guarantee issue on yourself for $200,000 (not to exceed 7 times annual salary); your spouse for $100,000 and your children for $10,000. *A*s a new employee, guarantee issued amounts for optional life do not require proof of health. If you choose to request optional life at any other time, proof of health may be necessary. *Exceptions: There is no guarantee issue for employee coverage if you are 75 and older and no guarantee issue on spouse if you are 60 and older.*

Beneficiary information must be provided to include either the social security number or the date of birth for your recipients.

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Long-term Disability (LTD)

What is Long-Term Disability insurance: Long-term disability is intended to protect your income if you are unable to work due to disability and meet certain eligibility requirements set forth by the Long-Term Disability Provider which includes, but is not limited to the depletion of benefit time.

If eligible, the Long-Term Disability insurance program can replace up to 65% of your income (or 15% more than SURS). You can be awarded benefits through both SURS and the Voluntary Long-Term Disability program, however, they will offset each other. (In other words, they will supplement, but not duplicate one another).

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Employee Assistance Program (EAP)

Bensinger, DuPont and Associates provides no-cost, **confidential** assistance for you and members of your household. By calling the EAP, you can identify solutions to assist with depression, marital or family difficulties, addictions, stress, legal or financial problems. You can also participate in one of their Coaching programs such as “Quit Tobacco”, “Lose Weight”, “Manage Stress”, etc.

Simply call (800) 272-2727. Professional, master’s degreed BDA Counselors are available to help 24 hours a day, seven days a week. You can also visit them online at www.bdaeap.com, ECC employee password is **ecceap**

Also, watch e-net for special webinars and lunch time learning opportunities presented by Bensinger, DuPont and Associates.

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Other Benefits

Annual Flu Shot Clinic

Benefit/Wellness Fair

On-Site Blood Drives

Box office Discount to the Visual & Performing Arts Center

Use of the ECC Fitness Center

Tuition Reimbursement

Sick Bank Program

ECC Employee Wellness Committee Programs

Eligible to join the Kane County Teacher's Credit Union

Fine Dining at ECC's own Spartan Terrace

On-Site Day Care

Area business discounts: Be sure to ask!

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Questions?

If you have additional questions, you may contact:

ECC Benefits Department

Ph: 847-214-7988 or 847-214-7125

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