MEDICAL BENEFIT TRANSITION TO RETIREMENT CHECKLIST

If you are 65+ (and/or if your dependent is 65+), apply for Medicare three months before you retire by contacting SSA at (800) 772-1213 or ONLINE AT www.ssa.gov.

Enroll in Medicare Part A and B.
DO NOT enroll in Medicare Part D

What do I need to complete and return to LACCD?

1. Application for Retiree Health Benefits

2. CalSTRS/CalPERS Award Letter

3. Health Benefits Plan Enrollment for Retirees (form HBD30), You need to complete this form if you are changing health plans i.e. PersChoice to PersCare Medicare Supplement, Perschoice to Kaiser etc.

4. A copy of Medicare Card for you and/or any dependent over age 65.

? If you are currently enrolled in PersChoice, and wish to continue in an Anthem Blue Cross plan after you are retired and over age 65, to avoid paying part of the plan cost, you should enroll in:

• PersCare Medicare Supplement if you have no dependents under age 65.

• PersChoice Medicare Supplement if you have dependents under age 65.
REMEmber:

✓ In order to provide LACCD health benefits to your survivor, you must choose a CalSTRS option so that your survivor is an annuitant.

✓ If you take your CalSTRS/CalPERS pension as a lump sum, you forfeit LACCD retiree health benefits.

✓ Your LACCD life insurance benefit expires with your retirement. For conversion information, call the LACCD CALL CENTER 888-428-2980.

✓ Retirees under age 65 continue to receive annual HRA contribution.

CalPERS Health Benefits Contact Information

Online: For more information on health benefits and programs, visit CalPERS at www.calpers.ca.gov

By Phone: Call CalPERS toll free at 888 CalPERS or (888-225-7377) Monday through Friday, 8:00 a.m. to 5:00 p.m.

In Person:

Glendale Regional Office
655 North Central Avenue, Suite 1400
Glendale, CA 91203

Orange Regional Office
500 North State College Boulevard, Suite 750
Orange, CA 92868

San Bernardino Regional Office
650 East Hospitality Lane, Suite 330
San Bernardino, CA 92408

San Diego Regional Office
7676 Hazard Center Drive, Suite 350
San Diego, CA 92108

LACCD Health Benefits Contact Information

LACCD HEALTH BENEFITS UNIT
770 Wilshire Blvd., 6th Floor
Los Angeles, CA 90017

Phone: 888-428-2980
Fax: 213-891-2008