



SAN JOAQUIN COUNTY OFFICE OF EDUCATION
Troy A. Brown, Ed.D., County Superintendent of Schools

P.O. Box 213030
Stockton, CA 95213-9030
(209) 468-4800
www.sjcoe.org

Date: July 21, 2023
To: SJCOE CTA Retirees
From: Jenny Barros, Program Manager, Payroll Services
Subject: **CVT 2023-2024 Open Enrollment – Changes Effective October 1, 2023**

The CVT Health & Welfare Open Enrollment period begins NOW and **ends on Monday, August 21, 2023 at 5:00 pm.** **Payroll Services will be hosting the annual Health Benefits Fair on August 9, 2023 from 3:00 pm-5:00 pm** located in the Nelson Center Auditorium, 2922 Transworld Drive, Stockton. Employees with CVT coverage are required to make plan changes via the **MyCVT Online Member Portal**. Additional information on the MyCVT Online Member Portal is below. Also, if you are making a plan change, you must complete a **SJCOE Plan Selection Form**, email SJCOEPayroll@sjcoe.net to request the electronic form.

Benefit Cap Increase - Effective July 1, 2023

- The benefit cap increased to \$1,175.00 per month and is pro-rated based on employees FTE.

CVT Health Benefit Updates 2023/2024

- Medical Benefit Updates:
 - Total Health, Total You will help you take care of your health, work on lifestyle changes, and connect with specialized health professionals — no matter where you are. The dedicated, caring Health Guides are your single point of contact, helping you make the most of your benefits so you can feel confident about taking care of your health.
 - Beacon Health Options, your Employee Assistance Program (EAP) name has changed to Carelon Behavioral Health. There are no changes to your benefits just to the name.
- Delta Dental Updates:
 - SmileWay Wellness Plan provides enhanced coverage for higher-risk members. Members who visit the Delta Dental website to opt-in will receive the following benefits:
 - 100% coverage for deep cleaning below the gum line.
 - One periodontal scaling and root planing procedure per quadrant.
 - 100% coverage for the following:
 - Teeth cleaning for an adult or child: Prophylaxis
 - Treatment for inflammation or infection: Periodontal maintenance procedure
 - Plaque removal: Scaling in presence of moderate or severe gingival inflammation

Retirees and Medicare

Three months prior to your 65th birthday under age 65 retirees and their dependents should meet with a Social Security retirement planner to ensure that they will not experience a delay in receiving their Medicare coverage. When meeting with the Social Security planner be sure to advise them that you or your spouse will soon be losing coverage under the County Office's medical plan. Providing this information when you first meet with Social Security will ensure that you are not charged a penalty. Medicare must be effective the first day following your loss of County Office coverage. If your County coverage ends September 30th your Medicare effective date must be October 1st.

MyCVT Online Member Portal

MyCVT is a web-based portal where you can make coverage changes, add/delete dependents or change your address. Please refer to the "*MyCVT Online Member Portal*"-*Quick steps to make a change to your insurance* flyer included in this packet. All changes must be made through the MyCVT portal. For assistance with this procedure if needed, please email SJCOEPayroll@sjcoe.net.

You may access the packet electronically by visiting the following link: <http://sjcoe.org>. (under *Departments* select *Business Services, Payroll Services, Health Benefits*). **You must make plan changes via MyCVT by the deadline, Monday, August 21, 2023 (no exceptions).** Any changes made during the Open Enrollment period will be effective October 1, 2023 through September 30, 2024. If you are not making any changes to your medical, dental and/or vision coverage, no action is required. If you have any questions, please contact Payroll Services at SJCOEPayroll@sjcoe.net.

Attachments

EDUCATE • INNOVATE • INSPIRE

San Joaquin County Office of Education - RETIREE RATES-CVT

Medical Rates 2023-2024	PPO Plan 3B	PPO Plan 6B	PPO Plan 10B	PPO Bronze Plan	Kaiser 1	Kaiser 5 Plan	Kaiser 7 Plan	Kaiser Bronze Plan
Retiree Only - (under 65) no Medicare	\$ 1,672.00	\$ 1,488.00	\$ 1,062.00	\$ 790.00	\$ 1,593.00	\$ 1,450.00	\$ 1,408.00	\$ 861.00
Retiree + One - (both under 65) no Medicare	\$ 2,876.00	\$ 2,560.00	\$ 1,827.00	\$ 1,358.00	\$ 2,740.00	\$ 2,491.00	\$ 2,419.00	\$ 1,478.00
Retiree + Family - (all under 65) no Medicare	\$ 3,628.00	\$ 3,229.00	\$ 2,304.00	\$ 1,714.00	\$ 3,454.00	\$ 3,143.00	\$ 3,052.00	\$ 1,864.00
Retiree + One - Dep with Medicare/Ret without	\$ 2,199.00	\$ 1,983.00	\$ 1,482.00	N/A	\$ 1,917.00	\$ 1,709.00	\$ 1,659.00	N/A

Dental / Vision Rates 2023-2024	Delta Dental Plan	Delta Dental DPO-70/30	VSP Vision Plan C 406A
Retiree Only	\$ 54.15	\$ 32.31	\$ 13.49
Retiree + One	\$ 98.08	\$ 58.51	\$ 25.06
Retiree + Family	\$ 141.00	\$ 84.12	\$ 38.59

Estimate your over-cap monthly amount due	
Medical Plan	\$
Dental Plan	\$
Vision Plan	\$
Total Premium	\$
Insurance Cap	\$ -\$1,175.00
Monthly Amount Due	\$

CVT PPO Health Plans with Anthem Blue Cross and CVS/caremark

San Joaquin COE - Certificated District Paid Retiree

October 1, 2023 - September 30, 2024

BENEFIT	PPO 3, Rx B	PPO 6, Rx B	PPO 10, Rx B	PPO Bronze
Calendar Year Deductible	Individual: \$100 Family: \$200	Individual: \$250 Family: \$500	Individual: \$2,000 Family: \$4,000	Individual: \$5,000 Family: \$10,000
Coinsurance	Paid at 100%* after deductible is met	Paid at 80%* after deductible is met	Paid at 80%* after deductible is met	Paid at 70%* after deductible is met
Calendar Year Out of Pocket Maximum (includes medical/pharmacy deductible, coinsurance, and copays) ⁽²⁾	Individual: \$1,250 ⁽²⁾ Family: \$2,500 ⁽²⁾	Individual: \$2,000 ⁽²⁾ Family: \$4,000 ⁽²⁾	Individual: \$6,350 ⁽²⁾ Family: \$12,700 ⁽²⁾	Individual: \$6,350 Family: \$12,700
Doctor Visits	Primary Care Physician - \$20 Copay Specialty Physician - \$20 Copay	Primary Care Physician - \$20 Copay Specialty Physician - \$20 Copay	Paid at 80%* after deductible is met	Primary Care Physician - First 3 visits covered in full after \$60 copay per visit; Remaining visits - Paid at 70%* after deductible is met Specialty Physician - Subject to deductible then \$70 copay
Preventive Care / Immunizations	Paid at 100%*	Paid at 100%*	Paid at 100%*	Paid at 100%*
Outpatient Laboratory	Non-Hospital - Paid at 100%* after deductible is met Hospital - After deductible is met, \$50 copay then paid at 100%*	Non-Hospital - Paid at 80%* after deductible is met Hospital - After deductible is met, \$50 copay then paid at 80%*	Non-Hospital - Paid at 80%* after deductible is met Hospital - After deductible is met, \$50 copay then paid at 80%*	Paid at 70%* after deductible is met
Outpatient Radiology	Non-Hospital - Paid at 100%* after deductible is met Hospital - After deductible is met, \$75 copay then paid at 100%*	Non-Hospital - Paid at 80%* after deductible is met Hospital - After deductible is met, \$75 copay then paid at 80%*	Non-Hospital - Paid at 80%* after deductible is met Hospital - After deductible is met, \$75 copay then paid at 80%*	Paid at 70%* after deductible is met
Durable Medical Equipment	Paid at 100%* after deductible is met	Paid at 80%* after deductible is met	Paid at 80%* after deductible is met	Paid at 70%* after deductible is met
Ambulance - Ground / Air	Paid at 100%* after deductible is met	Paid at 80%* after deductible is met	Paid at 80%* after deductible is met	Paid at 70%* after deductible is met
Physical Therapy	Paid at 100% ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 80% ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 80% ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 70% ⁽¹⁾ after deductible is met
Chiropractic	Paid at 100% ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 80% ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 80% ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 70% ⁽¹⁾ after deductible is met
Acupuncture	Paid at 100%* after deductible is met (Copay, if applicable) Maximum of 12 visits per calendar year	Paid at 80%* after deductible is met (Copay, if applicable) Maximum of 12 visits per calendar year	Paid at 80%* after deductible is met (Copay, if applicable) Maximum of 12 visits per calendar year	Paid at 70%* after deductible is met Maximum of 12 visits per calendar year
Outpatient Surgery	Non-Hospital - Paid at 100%* after deductible is met Hospital - After deductible is met, \$250 copay then paid at 100%*	Non-Hospital - Paid at 80%* after deductible is met Hospital - After deductible is met, \$250 copay then paid at 80%*	Non-Hospital - Paid at 80%* after deductible is met Hospital - After deductible is met, \$250 copay then paid at 80%*	Paid at 70%* after deductible is met
Hospital Inpatient	Paid at 100%* after deductible is met; Unlimited days, Semi-private room	Paid at 80%* after deductible is met; Unlimited days, Semi-private room	Paid at 80%* after deductible is met; Unlimited days, Semi-private room	Paid at 70%* after deductible is met; Unlimited days, Semi-private room
Hospital Emergency Room	\$100 Emergent Copay; \$175 Non-Emergent Copay (Copay waived if admitted as inpatient) After deductible is met, copay then paid at 100%*	\$100 Emergent Copay; \$175 Non-Emergent Copay (Copay waived if admitted as inpatient) After deductible is met, copay then paid at 80%*	\$100 Emergent Copay; \$175 Non-Emergent Copay (Copay waived if admitted as inpatient) After deductible is met, copay then paid at 80%*	Subject to Deductible, then \$250 Copay (copay waived if admitted as in-patient)
Urgent Care	\$20 Copay	\$20 Copay	Paid at 80%* after deductible is met	Subject to deductible, then \$120 Copay

BENEFIT	PPO 3, Rx B		PPO 6, Rx B		PPO 10, Rx B		PPO Bronze	
Home Health Care	Paid at 100%* after deductible is met Limited to 100 visits per calendar year		Paid at 80%* after deductible is met Limited to 100 visits per calendar year		Paid at 80%* after deductible is met; Limited to 100 visits per calendar year		Paid at 70%* after deductible is met; Limited to 100 visits per calendar year	
Telehealth	MDLIVE - Paid at 100%* for non-emergency medical, dermatology and behavioral health consultations. ⁽²⁾ Call 1-888-632-2738 or visit www.mdlive.com/CVT		MDLIVE - Paid at 100%* for non-emergency medical, dermatology and behavioral health consultations. ⁽²⁾ Call 1-888-632-2738 or visit www.mdlive.com/CVT		MDLIVE - Paid at 100%* for non-emergency medical, dermatology and behavioral health consultations. ⁽²⁾ Call 1-888-632-2738 or visit www.mdlive.com/CVT		MDLIVE - Paid at 100%* for non-emergency medical, dermatology and behavioral health consultations. Call 1-888-632-2738 or visit www.mdlive.com/CVT	
Medical Decision Support	Alight - My Medical Ally Call 1-888-361-3944 or visit mymedicalally.alight.com for expert medical guidance		Alight - My Medical Ally Call 1-888-361-3944 or visit mymedicalally.alight.com for expert medical guidance		Alight - My Medical Ally Call 1-888-361-3944 or visit mymedicalally.alight.com for expert medical guidance		Alight - My Medical Ally Call 1-888-361-3944 or visit mymedicalally.alight.com for expert medical guidance	
Employee Assistance Program (EAP) through Carelon	Paid at 100% - Visit www.achievesolutions.net/cvt or call 1-877-397-1032 to access benefit ⁽³⁾		Paid at 100% - Visit www.achievesolutions.net/cvt or call 1-877-397-1032 to access benefit ⁽³⁾		Paid at 100% - Visit www.achievesolutions.net/cvt or call 1-877-397-1032 to access benefit ⁽³⁾		Paid at 100% - Visit www.achievesolutions.net/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	
Prescription Drugs	Retail⁽⁴⁾ \$7 Generic \$15 Preferred \$30 Non-Preferred (30-Day Supply)	Mail Order⁽⁴⁾ \$15 Generic \$35 Preferred \$70 Non-Preferred (90-Day Supply)	Retail⁽⁴⁾ \$7 Generic \$15 Preferred \$30 Non-Preferred (30-Day Supply)	Mail Order⁽⁴⁾ \$15 Generic \$35 Preferred \$70 Non-Preferred (90-Day Supply)	Retail⁽⁴⁾ \$7 Generic \$15 Preferred \$30 Non-Preferred (30-Day Supply)	Mail Order⁽⁴⁾ \$15 Generic \$35 Preferred \$70 Non-Preferred (90-Day Supply)	Retail Subject to deductible, then \$25 Generic Copay \$50 Brand Copay (30-Day Supply)	Mail Order Subject to deductible, then \$50 Generic Copay \$100 Brand Copay (90-Day Supply)

PPO Plans:
* For Covered Expenses Only: When using Non-PPO & Other Health Care Providers, members are responsible for any difference between the covered expense and actual charges, as well as any deductible & percentage copay. All percentages are based on payments to preferred hospitals, physicians and other network providers.
(1) Non-Par Providers limited to a combined maximum of 13 visits per year.
(2) Retired members enrolled in Medicare: (1) MDLIVE Behavioral Health and Alight visits are excluded (2) Pharmacy copayments cost share will not apply to out of pocket maximums (3) CVT PPO Plans 1-10 pay according to non-duplication of Medicare benefits therefore those plan designs are inclusive of Medicare's payment.
(3) EAP - Up to 6 counseling sessions per covered member, per benefit year (max 2 episodes/courses of treatment).
(4) Copays for certain specialty medications may be set to available manufacturer-funded copay assistance for prescription plans A, B, C (includes Wellness), D and ValuRx
This summary is for comparison purposes only. Please refer to the actual benefit booklet for complete benefits at www.cvtrust.org/plan-documents.

**CVT HMO Health Plans with Kaiser Permanente
San Joaquin COE – Certificated District Paid Retiree**

October 1, 2023 - September 30, 2024

BENEFIT	HMO 1	HMO 5	HMO 7	HMO Bronze
Calendar Year Deductible	\$0	\$0	\$0	Individual: \$4,500 Family: \$9,000
Coinsurance	Paid at 100%*	Paid at 100%*	Paid at 100%*	Paid at 60%*
Calendar Year Out of Pocket Maximum (includes medical/pharmacy deductible, coinsurance, and copays) ⁽²⁾	Individual: \$1,500 Family: \$3,000	Individual: \$1,500 Family: \$3,000	Individual: \$1,500 Family: \$3,000	Individual: \$6,000 Family: \$12,000
Doctor Visits	Primary Care Physician - \$10 Copay Specialty Physician - \$10 Copay	Primary Care Physician - \$35 Copay Specialty Physician - \$35 Copay	Primary Care Physician - \$35 Copay Specialty Physician - \$35 Copay	Primary Care Physician - Paid at 60%* after deductible is met Specialty Physician - Paid at 60%* after deductible is met
Preventive Care / Immunizations	Paid at 100%*	Paid at 100%*	Paid at 100%*	Paid at 100%*
Outpatient Laboratory	Most tests paid at 100%*	Most tests paid at 100%*	Most tests paid at 100%*	Most tests paid at 60%* after deductible is met
Outpatient Radiology	Most services paid at 100%*	Most services paid at 100%*	Most services paid at 100%*	Most services paid at 100%, No deductible
Durable Medical Equipment	Paid at 100%*	Paid at 100%*	Paid at 80%*	Paid at 60%*, deductible does not apply (Most DME is not covered)
Ambulance - Ground / Air	Paid at 100%* If Medically Necessary	Paid at 100%* If Medically Necessary	\$100 Per Trip If Medically Necessary	Paid at 60%* after deductible is met
Physical Therapy	\$10 Copay	\$35 Copay	\$35 Copay	Paid at 60%* after deductible is met
Chiropractic	Not Covered	Not Covered	Not Covered	Not Covered
Acupuncture	\$10 Copay Referral by Plan Physician	\$35 Copay Referral by Plan Physician	\$35 Copay Referral by Plan Physician	Paid at 60%* after deductible is met Referral by plan physician
Outpatient Surgery	\$10 Copay	\$35 Copay	\$250 Copay	Paid at 60%* after deductible is met
Hospital Inpatient	Paid at 100%*	Paid at 100%*	\$250 Copay	Paid at 60%* after deductible is met
Hospital Emergency Room	\$100 Copay Copay waived if admitted as in-patient	\$100 Copay Copay waived if admitted as in-patient	\$100 Copay Copay waived if admitted as in-patient	Paid at 60%* after deductible is met
Urgent Care	\$10 Copay	\$35 Copay	\$35 Copay	Paid at 60%* after deductible is met
Home Health Care	Paid at 100%* (Limits)	Paid at 100%* (Limits)	Paid at 100%* (Limits)	Paid at 100%*, deductible does not apply (Limits)
Telehealth	For after-hours advice, call 1-888-576-6225	For after-hours advice, call 1-888-576-6225	For after-hours advice, call 1-888-576-6225	For after-hours advice, call 1-888-576-6225
Medical Decision Support	N/A	N/A	N/A	N/A
Employee Assistance Program (EAP) through Carelon	Paid at 100% - Visit www.achievesolutions.net/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	Paid at 100% - Visit www.achievesolutions.net/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	Paid at 100% - Visit www.achievesolutions.net/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	Paid at 100% - Visit www.achievesolutions.net/cvt or call 1-877-397-1032 to access benefit ⁽³⁾

BENEFIT	HMO 1		HMO 5		HMO 7		HMO Bronze
Prescription Drugs	Retail		Retail		Retail		Generic
	\$5 Generic		\$10 Generic		\$10 Generic		Paid at 70%*
	\$10 Brand (Up to 30 Day Supply)	Mail Order	\$20 Brand (Up to 30 Day Supply)	Mail Order	\$30 Brand (Up to 30 Day Supply)	Mail Order	(Not to exceed \$50)
	\$10 Generic	\$5 Generic	\$20 Generic	\$10 Generic	\$20 Generic	\$10 Generic	100-day supply
	\$20 Brand (31-60 Day Supply)	\$10 Brand (30 Day Supply)	\$40 Brand (31-60 Day Supply)	\$20 Brand (30 Day Supply)	\$60 Brand (31-60 Day Supply)	\$30 Brand (30 Day Supply)	Deductible does not apply
	\$15 Generic	\$10 Generic	\$30 Generic	\$20 Generic	\$30 Generic	\$20 Generic	Brand**
	\$30 Brand (61-100 Day Supply)	\$20 Brand (31-100 Day Supply)	\$60 Brand (61-100 Day Supply)	\$40 Brand (31-100 Day Supply)	\$90 Brand (61-100 Day Supply)	\$60 Brand (31-100 Day Supply)	Paid at 60%*
							(Not to exceed \$100)
							100-day Supply
							Deductible does not apply
							**Certain brand name drugs have a \$250 deductible

Kaiser Permanente Plans:

*** For Covered Expenses Only**

(2) The pharmacy copayments will not apply to out of pocket maximums for retirees enrolled in Medicare

NOTES: Copays for Infertility: Plans 1 - \$10 Copay; Plan 2 - \$15 Copay; Plan 3 - 50% Copay; Plan 4 - \$30 Copay; Plan 5 - \$35 Copay; Plans 6-8 & Wellness - 50% Copay.

Copays for Allergy Injections: Plans 1-5 - No Charge; Plans 6-7 & Wellness - \$5 Per Visit; Plan 8 - No Charge.

Plan 6 - \$175 allowance for lenses, frames & contacts every 24 months

(3) EAP - Up to 6 counseling sessions per covered member, per benefit year (max 2 episodes/courses of treatment).

This summary is for comparison purposes only. Please refer to the actual benefit booklet for complete benefits at www.cvtrust.org/plan-documents.

Delta Dental PPO Incentive Plan Summary of Benefits

Effective October 1, 2023 to September 30, 2024

Benefits and Covered Services*	PPO Network **	Premier Network and Out of Network **
Calendar Year Deductible	None	None
Calendar Year Maximum Benefit	\$1,900	\$1,500
Diagnostic & Preventive (D&P) Services Note: D & P does not count towards calendar year maximum. Oral Examinations: 2 Annual Cleanings: 2 X-rays	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Basic Services Fillings Posterior Composite Restorations Sealants	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Periodontics (gum treatment) Covered Under Basic Services	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Endodontics (root canals)	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Oral Surgery (extraction) Covered Under Basic Services	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Major Services Crowns, Inlays, Onlays & Cast Restorations	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Prosthodontics Bridges Dentures Implants	Paid at: 50% *	Paid at: 50% *
Dental Accident Benefits	Paid at: 100% * (\$1,000 maximum per enrollee each calendar year)	Paid at: 100% * (\$1,000 maximum per enrollee each calendar year)

* This summary is for comparison purposes only. The Evidence of Coverage should be consulted for a detailed description of the covered benefits and is available at www.cvtrust.org/plandocuments.

** See back for additional details

What are my Delta Dental Network options?

The Delta Dental PPO plan allows you the option to visit any licensed dentist. You will usually save more on your out-of-pocket costs when you visit a **Delta Dental PPO** dentist. The **Delta Dental Premier** network also provides cost-saving features and is the next best option when you can't find a PPO dentist. Non-Delta Dental (Out of Network) dentists have no fee agreements with Delta Dental, so you will usually have the highest out-of-pocket costs when you visit a non-Delta Dental dentist. You are responsible for the difference between what Delta Dental pays and the dentist's fee.

How do I find a Delta Dental dentist?

To locate a Delta Dental dentist near you, check the dentist directory on the Delta Dental website (**deltadentalins.com**), which also provides a map to the dental office. Or, to hear or receive a faxed listing of dentists in your area, call **866-499-3001**. Follow the automated instructions to search for a dentist.

How does my Delta Dental incentive plan work?

Your dental benefit incentive plan is designed to encourage regular visits to the dentist to keep your teeth and gums healthy. Here is an example of how an incentive plan works. (This is the most common incentive plan. Check your benefits information for details of your particular incentive plan.)

First Year	Second Year	Third Year	Fourth Year
70%	80%	90%	100%
Percentage paid for certain benefits as long as you visit the dentist each year.			

What are my online resources?

The full Delta Dental website is a one-stop-shop for plan and oral health information. Also available in Spanish: **es.deltadentalins.com**.

Create a free Online Services account at **deltadentalins.com** to:

- Locate a Delta Dental dentist
- Check benefits, eligibility, and claim status
- Opt for paperless statements
- View or print your ID card
- Check average dental costs in your area

Check out **Your Dental Plan Support Guide** for money-saving tips and treatment information. And, don't miss **mysmileway.com** – a great resource for oral health-related tools and tips.

Mobile? Get the information you need on the go. Bookmark or add a shortcut to the mobile site to return in just one tap from your phone. Download the free, convenient smartphone Delta Dental app from the App Store or Google Play.



**California's
Valued Trust**

Healthcare Benefits for the Education Community

**San Joaquin COE
Certificated**

Delta Dental PPO 70/30 Plan Summary of Benefits

Effective October 1, 2023 to September 30, 2024

Benefits and Covered Services*	PPO Network **	Premier Network and Out of Network **
Calendar Year Deductible	None	\$25 per person / \$75 per family per calendar year
Calendar Year Maximum Benefit	\$1,000	\$1,000
Diagnostic & Preventive (D&P) Services Note: D & P does not count towards calendar year maximum. Oral Examinations: 2 Annual Cleanings: 2 X-rays	Paid at: 100% *	Paid at: 70% *
Basic Services Fillings Posterior Composite Restorations Sealants	Paid at: 80% *	Paid at: 60% *
Periodontics (gum treatment) Covered Under Basic Services	Paid at: 80% *	Paid at: 60% *
Endodontics (root canals)	Paid at: 80% *	Paid at: 60% *
Oral Surgery (extraction) Covered Under Basic Services	Paid at: 80% *	Paid at: 60% *
Major Services Crowns, Inlays, Onlays & Cast Restorations	Paid at: 60% *	Paid at: 50% *
Prosthodontics Bridges Dentures Implants	Paid at: 60% *	Paid at: 50% *
Dental Accident Benefits	Paid at: 100% * (\$1,000 maximum per enrollee each calendar year)	Paid at: 100% * (\$1,000 maximum per enrollee each calendar year)

* This summary is for comparison purposes only. The Evidence of Coverage should be consulted for a detailed description of the covered benefits and is available at www.cvtrust.org/plandocuments.

** See back for additional details

What are my Delta Dental network options?

The Delta Dental PPO plan allows you the option to visit any licensed dentist. You will usually save more on your out-of-pocket costs when you visit a **Delta Dental PPO** dentist. The **Delta Dental Premier** network also provides cost-saving features and is the next best option when you can't find a PPO dentist.

<i>Most potential savings with Delta Dental PPO dentists</i>	<i>Some savings with Delta Dental Premier dentists</i>	<i>No savings with non-Delta Dental dentists</i>
<ul style="list-style-type: none">➤ Delta Dental PPO dentists agree to accept Delta Dental PPO contracted fees as full payment.➤ You'll usually pay less when you visit a Delta Dental PPO dentist.➤ When you visit your dentist, you should ask specifically if he or she is a contracted Delta Dental PPO dentist.	<ul style="list-style-type: none">➤ Premier dentists' contracted fees are usually slightly higher than PPO dentists' contracted fees.➤ Premier dentists will not bill you above their contracted fees, so you still receive some cost protections not available with a non-Delta Dental dentist.	<ul style="list-style-type: none">➤ Non-Delta Dental dentists have no fee agreements with Delta Dental, so you will usually have the highest out-of-pocket costs when you visit a non-Delta Dental dentist.➤ You are responsible for the difference between what Delta Dental pays and the dentist's fee.

How do I find a Delta Dental dentist?

To locate a Delta Dental dentist near you, check the dentist directory on the Delta Dental website (deltadentalins.com), which also provides a map to the dental office. Or, to hear or receive a faxed listing of dentists in your area, call **866-499-3001**. Follow the automated instructions to search for a dentist.

What are my online resources?

The full Delta Dental website is a one-stop-shop for plan and oral health information. Also available in Spanish: es.deltadentalins.com.

Create a free Online Services account at deltadentalins.com to:

- Locate a Delta Dental dentist
- Check benefits, eligibility, and claim status
- Opt for paperless statements
- View or print your ID card
- Check average dental costs in your area

Check out **Your Dental Plan Support Guide** for money-saving tips and treatment information. And, don't miss mysmileway.com – a great resource for oral health-related tools and tips.

Mobile? Get the information you need on the go. Bookmark or add a shortcut to the mobile site to return in just one tap from your phone. Download the free, convenient smartphone Delta Dental app from the App Store or Google Play.

A Look at Your VSP Vision Coverage

With VSP and CALIFORNIA'S VALUED TRUST - Plan C \$10 Copay, your health comes first.



Enroll in VSP® Vision Care to get access to savings and personalized vision care from a VSP network doctor for you and your family.

Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling over \$3,000 in savings.

Provider choices you want.

Maximize your benefits at a Premier Program location, including thousands of private practice doctors and over 700 Visionworks retail locations nationwide.

	Preferred private practice and retail in-network choices
	 

Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

Using your benefit is easy!

Create an account on vsp.com to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.



More Ways to Save

**Extra
\$20
to spend on
Featured Brands†**

bebe CALVIN KLEIN
COLE HAAN DRAGON.
FLEXON LACOSTE
NIKE and more

See all brands and offers at vsp.com/offers.

+

**Up to
40%
Savings on
lens enhancements‡**

Enroll through your employer today.
Contact us: **800.877.7195** or vsp.com

Your VSP Vision Benefits Summary
 2023-2024
 San Joaquin COE - Certificated



PROVIDER NETWORK: VSP Signature

BENEFIT	DESCRIPTION	COPAY	FREQUENCY
Your Coverage with a VSP Provider			
WELLVISION EXAM	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness 	\$10 for exam and glasses	Every 12 months
PRESCRIPTION GLASSES			
FRAME*	<ul style="list-style-type: none"> \$170 featured frame brands allowance \$150 frame allowance 20% savings on the amount over your allowance \$80 Walmart®/Sam's Club®/Costco® frame allowance 	Combined with exam	Every 12 months
LENSES	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children 	Combined with exam	Every 12 months
LENS ENHANCEMENTS	<ul style="list-style-type: none"> Standard progressive lenses Tints/Light-reactive lenses Premium progressive lenses Custom progressive lenses Average savings of 40% on other lens enhancements 	\$0 \$0 \$80 - \$90 \$120 - \$160	Every 12 months
CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none"> \$120 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) 	\$0	Every 12 months
EXTRA SAVINGS	Glasses and Sunglasses <ul style="list-style-type: none"> Extra \$20 to spend on featured frame brands. Go to vsp.com/offers for details. 30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP provider on the same day as your WellVision Exam. Or get 20% from any VSP provider within 12 months of your last WellVision Exam. 		
	Routine Retinal Screening <ul style="list-style-type: none"> No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam 		
	Laser Vision Correction <ul style="list-style-type: none"> Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor 		

YOUR COVERAGE GOES FURTHER IN-NETWORK

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to vsp.com to find an in-network provider.

*Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.
 †Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.
 +Coverage with a retail chain may be different or not apply.
 VSP guarantees member satisfaction from VSP providers only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business. TruHearing is not available directly from VSP in the states of California and Washington.
 To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on vsp.com.
 ©2023 Vision Service Plan. All rights reserved.
 VSP, Eyeconic, and WellVision Exam are registered trademarks, and VSP LightCare and VSP Premier Edge are trademarks of Vision Service Plan. Flexon and Dragon are registered trademarks of Marchon Eyewear, Inc. All other brands or marks are the property of their respective owners. 102898 VCCM
 Classification: Restricted

WHO TO CONTACT

IMPORTANT TELEPHONE NUMBERS

Tangee Franco, American Fidelity	Tangee.Franco@americanfidelity.com	800-365-8306
Misha Bothe, American Fidelity	Misha.Bothe@af-group.com	800-365-8306, ext. 2686
Legal Shield	valencia@legalshieldassociate.com	707-393-0856
Tax Deferred Services (TDS) (403b)	cbailey@omni403b.com	866-446-1072

For plan information please visit the following link: <http://mycvtrust.org>

Welcome to Total Health, Total You

A personalized program that supports your overall health

Total Health, Total You was created to help you take care of your health, work on lifestyle changes, and connect with specialized health professionals — no matter where you are. Our dedicated, caring Health Guides are your single point of contact, helping you make the most of your benefits so you can feel confident about taking care of your health.

You can call or chat with Health Guides, who can:

- **Answer questions about your healthcare** and your health plan.
- **Help you take steps to improve your health**, so small issues do not become more serious.
- **Connect you to a team of high-quality health professionals**, such as nurses, social workers, dietitians, respiratory therapists, pharmacists, and exercise physiologists.

Using the **SydneySM Health** app, you can easily access your Total Health, Total You benefits, as well as other programs listed below, to help you achieve better overall health for you and your family.



24/7 NurseLine

Talk to a registered nurse for answers or advice on immediate care questions for you or your family. A nurse can also connect you to other well-being programs that are part of your plan.

Behavioral Health Resource

Extra support can make a big difference when facing issues such as anxiety, depression, eating disorders, or substance use. Our caring experts will work with you to find treatment programs and arrange confidential counseling and support services that meet your individual and family needs.

Case Management

After an illness or hospitalization, you can receive personalized support and care coordination from a team of medical professionals who can help you make decisions about your care, set up appointments, understand costs, and go through the healing process.

Emotional Well-being Resources

Digital tools can help you identify thoughts and behavior patterns that affect your emotional well-being. Through online programs and personalized coaching, you'll learn effective ways to manage stress, anxiety, depression, substance use, and sleep issues.

Inclusive Care

Our Health Guides can help you find medical doctors and behavioral healthcare professionals who are familiar with and sensitive to your needs. They can also help you locate community programs and other resources for support.

Managing specific conditions with Total Health, Total You

Autism Spectrum Disorder Program

Receive support for a covered family member with an autism spectrum disorder. A licensed behavior analyst can help you navigate the healthcare system and address unique family challenges. We focus on the whole family and work with all of you to understand and access available care.

Building Healthy Families

Your family can have expert support from preconception through the stages of pregnancy, childbirth, and early childhood. The program also features an extensive content library covering topics to support your family.

Anthem Health Guide

Health guides can connect you to a team of professionals ready to help you navigate and understand the healthcare system and your plan benefits so you have support throughout your health journey.

Sydney Health app

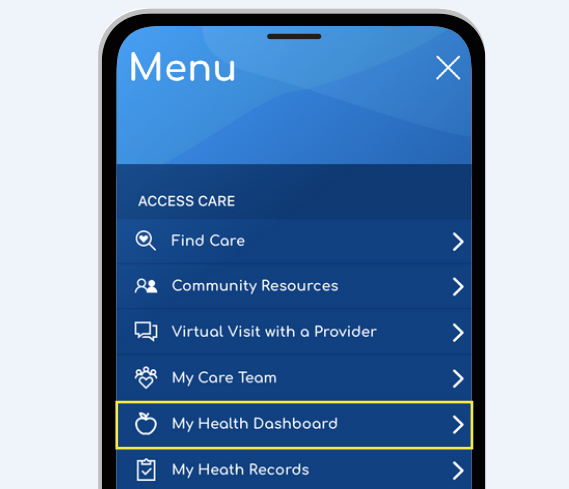
The Sydney Health mobile app works with you by guiding you to better overall health — and for you by bringing your benefits and health information together. In one convenient place, you can find care, view your benefits, plan and track your health goals, use personalized tools, and compare health costs.

If you have any questions, please call Anthem Member Services at **800-234-4333**.



Start using Total Health, Total You today

Download the Sydney Health app to start using your Total Health, Total You benefits. From your home screen, select **My Health Dashboard** and then **Programs**. If you have questions, please call the number on the back of your health plan ID card to speak to an Anthem Health Guide.



Sydney Health is offered through an arrangement with Carelon Digital Platforms, a separate company offering mobile application services on behalf of your health plan. ©2023 The Virtual Primary Care experience is offered through an arrangement with Hydrogen Health.

In addition to using a telehealth service, you can receive in-person or virtual care from your own doctor or another healthcare provider in your plan's network. If you receive care from a doctor or healthcare provider not in your plan's network, your share of the costs may be higher. You may also receive a bill for any charges not covered by your health plan.

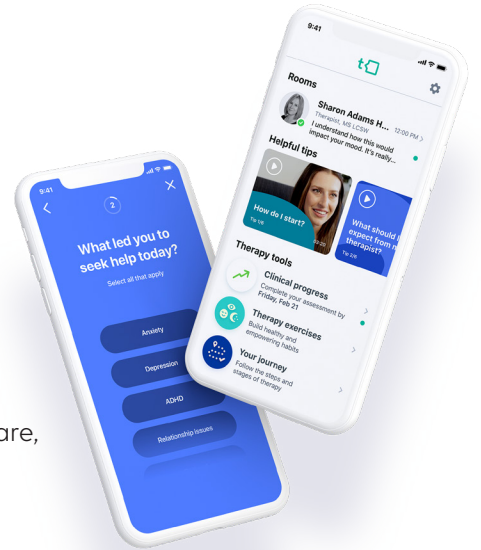
Anthem Blue Cross is the trade name of Blue Cross of California. Independent licensee of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.



Welcome to Talkspace

Taking care of your mental health helps you show up as your best, most authentic self

Over the last decade, Talkspace has supported more than 2.9 million adults, teens, and couples with counseling and therapy services. You'll be connected with a licensed counselor so you can share what's on your mind, wherever you are, from the convenience of your phone or laptop.



How it works

Review your best personal provider match based on your intake assessment and preferences. Start your therapy by sending text, voice, or video messages — messages can be as short or as detailed as you'd like. Counselors respond daily during their business hours, which often includes weekends. You can also book live sessions for real-time conversations. Your counselor stays with you throughout your Talkspace journey (but if you're not feeling the connection, it's easy to switch). Talkspace's clinical network includes thousands of licensed and verified counselors who specialize in things like:

- Stress
- Relationships
- Eating disorders
- Identity struggles
- Anxiety
- Healthy living
- Substance use
- ADHD
- Depression
- Trauma & grief
- Sleep
- and more

Ready to get started

- To register, visit talkspace.com/carelonwellbeing or your EAP website and enter your company name: CVT
- Complete our QuickMatch™ questionnaire to share your preferences and review your best personal provider match
- Start messaging in your private digital room, or book a live session

Your EAP offers **6** counseling sessions per issue per year. With Talkspace, one session generally equals one week of access and the ability to send unlimited messages to your therapist, or one completed live video session.

If you have any questions, please call **877 397-1022**



Support for chronic conditions

Your plan offers additional dental coverage to support your overall health



Chronic conditions and the medications used to treat them can impact your oral health. If you or a covered family member has been diagnosed with a chronic medical condition like diabetes, cancer or rheumatoid arthritis, you may benefit from additional teeth and gum cleanings.

Take advantage of expanded coverage to help safeguard your oral health. To qualify, you or a covered family member must be diagnosed with any of the following:

- Amyotrophic lateral sclerosis (ALS)
- Cancer
- Chronic kidney disease
- Diabetes
- Heart disease
- HIV/AIDS
- Huntington’s disease
- Joint replacement
- Lupus
- Opioid misuse and addiction
- Parkinson’s disease
- Rheumatoid arthritis
- Sjögren’s syndrome
- Stroke

SmileWay® Wellness Benefits¹

100% coverage	One periodontal scaling and root planing procedure per quadrant (D4341 or D4342) per calendar or contract year ²
Four of the following (any combination) per calendar or contract year:²	
100% coverage	Prophylaxis (teeth cleaning) (D1110 or D1120)
	Periodontal maintenance procedure (D4910)
	Scaling in presence of moderate or severe gingival inflammation (D4346)

¹ Known as SmileWay Enhanced Benefits in Texas.

² This coverage is subject to any applicable maximums and deductibles under the terms and conditions outlined in your plan’s Evidence of Coverage. Please review your plan booklet for specific details about your coverage.

Delta Dental PPO™ is underwritten by Delta Dental Insurance Company in AL, DC, FL, GA, LA, MS, MT, NV and UT and by not-for-profit dental service companies in these states: CA — Delta Dental of California; PA, MD — Delta Dental of Pennsylvania; NY — Delta Dental of New York, Inc.; DE — Delta Dental of Delaware, Inc.; WV — Delta Dental of West Virginia, Inc. In Texas, Delta Dental Insurance Company provides a dental provider organization (DPO) plan.



Opt in by visiting
www1.deltadentalins.com/smileway
 or by calling Customer Service
 Monday through Friday.



deltadentalins.com/enrollees



MyCVT Online Member Portal

Quick steps to make a change to your insurance coverage

MyCVT is a web-based portal where you can make coverage changes as a new member of California's Valued Trust (CVT), choose a plan from several options that have been selected by your district or unit and make changes to your plan such as adding dependents or a change of address.

Before you use the online member portal, you must first create your account.

Getting started

1. To access the site directly from your browser, type: <https://mycvt.cvtrust.org>.
2. You will need the following information to create your account:
 - Unique email address (you cannot use a shared or group email)
 - Social Security number (do not use dashes in the form)
 - Your district name or group identifier (you will need this to complete your registration)
 - Password (six-digits minimum)

Creating your account

1. From the MyCVT portal page, select "Create new account." Complete the requested information and click the "Create new account" button.
2. Verify your account with CVT by entering your date of birth.
3. A registration link will be sent to the unique email you submitted.
4. Your account will be activated once you click the link in your email.

Existing member change process

1. Login to your MyCVT account at <https://mycvt.cvtrust.org>.
2. Click the "Make a Change" link.
3. Select the type of change you are making (qualifying event or contact information).
4. Complete the personal information section, choose "next" to save and continue.

Add or remove dependents

1. Next, you can add any eligible dependents by clicking on the blue "Add Dependent" button at the top of the page.
2. Enter all the required dependent information and click "Save" after each dependent has been added.
3. If you need to change any information, the forms can be opened again and edited by clicking the blue name of the. Always save every edit.
4. If you need to remove a dependent, click "Terminate" to remove a dependent from coverage. Click "Remove" to remove a dependent who does not yet have coverage.

Choose your plan

1. The next step is to select your plans from the plan choice page. The plan selection will include those bargained benefits available to your unit.

2. Click the drop-down arrows and select the Medical, Dental, Vision and Life plans for your enrollment. If you are unsure about which plans to choose, consult your district office for a summary of plans and the options/costs. You can also call CVT Member Services for assistance.
3. The plan selection page allows you to compare benefits of up to four medical plans.
4. If your district does not offer one or more of these plans through CVT, the words “No Plans Available” will appear in the drop-down selection.
5. Click “I’m Ready to Review My Application” if you have completed your selections.

Submit your completed enrollment

1. If you have completed all the information and the coverage summary is correct, click the “Submit” button.
2. After submitting, the instruction screen will appear highlighting the remaining steps or documents required to complete enrollment. You may need, for example, to provide a marriage or birth certificate.
3. You can print the instructions for your records by clicking on the “Print Version” link at the top.
4. You can also print the enrollment form by clicking on the “Print your enrollment” button at the bottom left of the page.
5. Your submitted forms will be reviewed by your district and then submitted to CVT for review and approval.

Questions

If you have any questions about how to create your account, help is only a phone call away. Contact CVT Member Services at 800-288-9870 for assistance.



520 East Herndon Avenue
Fresno, CA 93720
(800) 288-9870
www.cvtrust.org

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