

A. BACKGROUND

The Central Region School Insurance Group (CRSIG) administers a self-insured vision program. Established in 1983, the vision pool provides vision services for K-12 public school districts. CRSIG utilizes the services of Vision Service Plan (VSP) in the administration of the program.

B. GUIDELINE APPLICATION

These are minimum guidelines and local school districts may adopt more stringent guidelines for use in their own districts. The CRSIG Executive Committee will be the final authority for determining the application of these guidelines. An appeal process is available to the School District and/or employee of member School District. Adherence to the Dispute Resolution Policy will occur.

C. PROGRAM MEMBERSHIP

Program Membership Entrance:

1. Groups interested in entering the CRSIG programs will be requested to provide the following underwriting information for review and analysis by CRSIG and Broker/Consultant:

- ◆ Current Census
- ◆ Current Benefit Design (Plans, deductibles)
- ◆ Geographic Location
- ◆ Demographic of population (age, gender, family content)
- ◆ Participation Of The Group
- ◆ Employer Contribution
- ◆ Claims (loss ratio and large claims)
- ◆ Known Ongoing Health Conditions
- ◆ Previous year, current year and renewal year rates (if available)

2. A formal request for consideration by CRSIG must be submitted by the group in order to initiate the underwriting process.
3. Once the underwriting information has been submitted, an underwriting analysis by the JPA and Broker/Consultant will be completed.
4. The results of the analysis will be reviewed by the Board/Executive Committee for consideration.
5. The Board/Executive Committee will make the final determination as to the acceptance of the request for program membership and compliance with JPA Bylaw Addendum IV.

Note: New members are required to make a 3-year commitment.

Program Membership Termination:

1. Refer to JPA By-Laws for withdrawal requirements
2. Withdrawing bargaining units or members must provide written notification to the Board

at least 180 days prior to the close of the program year for an effective date at the end of the year. A member may rescind its withdrawal upon providing written notice to the Board at least ninety days prior to the end of the program year.

3. No partial bargaining unit terminations are allowed, including retirees. A bargaining unit or member that withdraws also terminates coverage for any retirees
4. Terminated members or bargaining units are not eligible to re-join plan until at least 3 years have passed since termination

D. RATE SETTING

The CRSIG Board of Directors determines the rates annually. The rates will be determined on a pooled basis and will reflect claim experience, administration of claims, program administration, trend and standards. Typically, rates are released in September for a January 1st effective date.

E. MEMBER PARTICIPATION OPTIONS

1. Applying or existing member School Districts have the ability to select from all plans offered by the CRSIG. Districts must ensure that a plan and rating structure has been selected for each bargaining unit to which all employees that enroll into the CRSIG vision plan must adhere. Plan selections and rating structures can be made by the bargaining group consistent with the open enrollment schedule.

2. CRSIG Districts must notify the CRSIG in writing by June 30th of any bargaining unit plan changes or rating structure changes. All changes will be effective the following January 1st.

Plan Designs: There are three plan designs, as follows:

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|---------------|--|
| Plan A | Examination, 12 months
Lenses, 24 months
Frames, 24 months |
| Plan B | Examination, 12 months
Lenses, 12 months
Frames, 24 months |
| Plan C | Examination, 12 months
Lenses, 12 months
Frames, 12 months |

Rate-Structures: There are two (2) rate structures available;

1) 3-Rate Structure: Consists of employee only, employee plus one dependent and family coverage. School District can elect to offer specifically employee only, employee plus one, however, the rates will be consistent with the three tier. There is no participation requirement for three tier rating.

2) Composite Rate Structure: Composite rate requires 100% of the groups eligible employees to enroll. Composite rates are identical for all enrolled employees, regardless of number of dependents.

3. If CRSIG modifies or eliminates plans, bargaining units will have the option to continue the existing plan for 1 year before they must comply with the modification or elimination.

F. ELIGIBILITY

1. Employees & Dependents: Participation in the pool is open to individuals and dependents designated under Definitions, Eligible Employee. Employees and employees' dependents must enroll within thirty (30) days of employment with the School District or eligibility as a dependent. The employee and any dependents are eligible to receive benefits on the first day of the month following employment.

An employee or family member who does not enroll when first eligible or a new spouse who does not enroll within 30 days of marriage, will be subject to the special enrollment provisions, see the Late Enrollment/Special Enrollment Section.

2. Retirees: Retirees are eligible to continue vision coverage:
 - a) If they were covered under district vision insurance at the time of retirement from the district,
 - b) If a retiree elects to discontinue coverage, coverage shall not be reinstated.
3. Board Members:
 - a) Newly elected or appointed Board Members may enroll in the vision plans in force if enrollment is within 30 days of active service.
 - b) All Board Member coverage will become effective the first day of the month after installation to the School Board.

G. OPEN ENROLLMENT

An open enrollment period will be scheduled for districts or employee groups that are new to CRSIG. Beginning January 1, 2007, open enrollments for member districts or employee units will be automatically allowed every year for Plan C participants and every other year for Plan A and Plan B participants. Open enrollments allowed by CRSIG are not required to be allowed by member districts.

Open Enrollment: Open enrollment periods allow for employees to add dependents to an existing plan or to enroll in a vision plan. The open enrollment period will be in the Fall of each year for Plan C participants and odd numbered years for Plan A and Plan B participants for an effective date of January 1st.

H. LATE ENROLLMENT AND SPECIAL ENROLLMENT

1. If an eligible employee does not enroll within 30 days of their eligibility, they must wait until the next open enrollment unless they qualify for special enrollment. Special enrollment means the employee may enroll without waiting for the next open enrollment if they have met the following requirements:
 - a) They were covered under another health plan as an individual or dependent including coverage under COBRA continuation;
 - b) They certified in writing when they became eligible for coverage that they were declining because they were covered under another health plan;
 - c) They have lost coverage under the other health plan;
 - d) An application is properly filed within 30 days from the date coverage is lost.
2. Special enrollment also applies:

- a) If a court has ordered coverage be provided for a spouse or dependent child under the employee's health plan and an application is completed within 30 days from the date the court order is issued.
- b) If the eligible employee did not complete a declination form when first eligible.
- c) A change in family status occurs through either marriage or the birth or adoption of a child. A new spouse or an additional child may be added at that time, too. Enrollment must occur within 30 days of the marriage, birth or adoption.
- d) If the member is already married but the spouse is not enrolled, they may also be enrolled at the time of the birth or adoption of a child. The application must be made within 30 days of the birth or adoption.

I. VOLUNTARY/REQUIRED TERMINATION OF ELIGIBILITY

- 1. No employee terminations or dropped dependents are allowed outside open enrollment Periods unless a Section 125 qualifying event occurs.
- 2. All open enrollment terminations will take effect at the end of December 31st.

J. ADDITIONAL PROVISIONS

- 1. Leaves of absence/sabbaticals (other than leaves for the Family Medical Leave Act) employees may self-pay, outside of COBRA, for up to one year, for coverage during a leave of absence or a sabbatical. After one year of self-pay, no employee may continue to self-pay for coverage other than through COBRA. If an employee elects not to continue coverage during a leave of absence or sabbatical, then that employee will be treated as a new hire upon return to work.

K. DEFINITIONS

Dependent: The lawful spouse of the employee and unmarried dependent children from birth to age 18. Children include stepchildren, adopted children and foster children, provided such children are dependent upon the employee for support and maintenance. An unmarried child to age 25 years or over may continue to be eligible as a dependent if they meet one of the following:

- 1) The overage dependent is incapable of self-support that commenced prior to reaching age 25 due to total disability and is chiefly dependent on the employee for support and maintenance.
- 2) The overage dependent qualifies as an IRS dependent or is currently enrolled as a full-time student at a recognized educational institution. Proof may be required. Dependents in military service are not eligible.

Eligible Employees:

- 1) School employee working a minimum of 20 hours per week
- 2) **School Board Member**
- 3) District defined: School district determined exceptions must be approved by CRSIG for employees who do not fit 1) or 2).

Employee Unit: A defined employee group such as a bargaining unit. These groups will normally be certificated, classified, and management-confidential. Each

Employee Group can select as a unit, from the plans offered.

Retiree: A person who has retired from being a part time or full time school district employee in a CRSIG member district. Board members treated as retirees as of 12/31/06 will be grandfathered.

L. DOMESTIC PARTNERS

Dependents:

1. Domestic partner of the same or opposite sex may be eligible for benefits under the Plan, if the eligible employee and his or her domestic partner satisfy all of the following:
 - a) They are each over 18 years of age, and are otherwise capable of entering into a binding contract.
 - b) They are registered with the State of California.
 - c) They provide evidence of their State registration.
2. Unmarried children who meet the dependent requirements of Section K. may be enrolled.
3. When a partnership ends, no ex-partners or dependents of ex-partners may continue to be covered under the Plan other than through COBRA.