



CSU RETIREE BENEFITS

The California State University (CSU) would like to thank you for your service.

We hope you find the information provided in this booklet helpful as you transition from active to retiree benefit coverage.

CSU RETIREE BENEFITS

This brochure is intended to provide a brief overview of the California State University (CSU) sponsored benefits available to you if you retire from the CSU under the California Public Employees' Retirement System (CalPERS) and meet the eligibility requirements specific to each benefit. You also may visit the CSU's retiree website at <http://csuretirees.calstate.edu/> for additional details.

AVAILABLE RETIREE BENEFITS

- CalPERS Health (Basic and Supplemental)
- Delta Dental (Basic and Enhanced)
- Vision Service Plan (Basic and Premier)
- The Standard Life Insurance
- The Standard Accident Insurance
- The Standard Voluntary Supplemental Life Insurance
- The Standard Critical Illness
- MetLife Legal Plan
- California Casualty Auto & Home Insurance
- Nationwide Pet Insurance

ELIGIBILITY

In general, CSU retiree health, dental, vision, the legal plan, and pet insurance benefits are available to you (and your eligible dependents) if you retire within 120 days from the date of your separation from CSU employment. The other benefits listed above may be continued into retirement or separation. These benefits can only be continued if you are enrolled at the time of retirement or separation.

CSU RETIREE HEALTH AND DENTAL VESTING REQUIREMENTS

Service retirement is a lifetime benefit. Employees can retire as early as age 50 with five years of CalPERS pensionable service credit. However, if all service is earned on or after January 1, 2013, then you must be at least age 52 to retire. Most employees* only need to be able to retire to be vested for retiree health and dental benefits. If you were hired on or after certain dates shown below, or became a CalPERS member after these dates, you may be subject to a new 10-year vesting period for retiree health and dental benefits. Service credit from a reciprocal agency such as the University of California or County of Los Angeles is not a factor in determining initial eligibility or count towards service credit for retiree health and dental vesting. However, once you reach 10 years of creditable service credit, you are fully vested and qualify for 100 percent of the state's contribution towards your health premium.

New 10-year Health and Dental Vesting Period:

New employees hired by the CSU for the first time and who first become CalPERS members on or after the following dates are subject to the 10-year vesting period for health and dental benefits.

- Collective Bargaining Unit 3 – July 1, 2017
- Collective Bargaining Units 1, 2, 4, 5, 6, 7, 9 and 10 – July 1, 2018.
- Non-Represented Employees (Executives, Management, Confidential, Excluded) – July 1, 2018
- Collective Bargaining Unit 11 (Teaching Associates) – July 1, 2019

RETIREE HEALTH BENEFITS

CalPERS administers health insurance coverage for CSU retirees and their eligible dependents. Retirees can choose from a broad range of health insurance plans. In general, you can change your health plan and/or add/delete dependents during Open Enrollment in the fall or within 60 days of a qualifying life event. Your health premiums are deducted from your retirement check.

The state pays a portion of your health insurance premium. You must pay the difference between the state contribution amount and the premium for the health plan in which you are enrolled.



State Health Contribution Rates for 2022

- One-Party: \$816
- Two-Party: \$1,548
- Family: \$1,983

For further information regarding health plans, coverage and premiums, visit the CalPERS website at www.calpers.ca.gov.

Transitioning from Active to Retired Health Coverage

If you are enrolled in a CalPERS health plan as an active employee, your health coverage generally continues automatically into retirement if your permanent separation date and retirement date are within 30 days of each other.

If you are benefits eligible, but not enrolled in the health benefits at the time of retirement, you have the option to enroll in coverage at retirement, within 60 days of retirement, or during any future Open Enrollment period. This also applies if you are enrolled in FlexCash at the time of retirement. However, in this case, coverage will be established on a prospective basis.

To obtain information regarding coordination of your CalPERS health coverage with Medicare, you should review the CalPERS Medicare Enrollment Guide publication.

DENTAL BENEFITS

The CSU pays 100 percent of the monthly premium cost for dental coverage for all eligible retirees and their eligible dependents, which includes a spouse or registered domestic partner and/or children up to age 26.

Delta Dental offers a preferred provider organization (PPO) in addition to a dental health maintenance organization (DHMO) plan; DeltaCare USA. The Delta Dental PPO and DeltaCare USA plans both offer comprehensive dental coverage, quality care and excellent customer service.

You can contact the Delta Dental PPO plan dedicated phone line at (800) 626-3108 or the DeltaCare USA DHMO plan at (844) 519-8751.

CSU Retiree Enhanced Dental Rates Coverage Effective January 1, 2022				
Dental Plan Name		Gross Premium	Employer Share	Retiree Cost
Delta Dental PPO Voluntary Enhanced II	Retiree Only	\$46.15	\$30.45	\$15.70
	Retiree + One	\$86.82	\$57.52	\$29.30
	Retiree + Family	\$169.33	\$115.49	\$53.84
DeltaCare USA Voluntary Enhanced	Retiree Only	\$25.34	\$18.85	\$6.49
	Retiree + One	\$41.63	\$31.08	\$10.55
	Retiree + Family	\$61.62	\$45.97	\$15.45

The CSU pays 100 percent of the monthly premium cost for the Basic Plan dental coverage for all retirees and their eligible dependents, which includes a spouse or registered domestic partner and/or children up to age 26.

CalPERS maintains and is responsible for:

- The dental benefit enrollment records for all eligible CSU retirees and processing retirees’ dental enrollments.
- The contact information for all retiree dental communications.

You can confirm your enrollment upon retirement by logging in to My|CalPERS. If you are enrolled, the plan name will be listed. Remember, there is no monthly deduction for the basic plan; CSU pays the monthly premium for coverage.

Transitioning from Active to Retired Dental Coverage

If you are enrolled in a CSU Delta Dental plan, your dental coverage generally continues automatically into retirement if your permanent separation date and retirement date are within 30 days of each other. If you are enrolled in the Delta Dental enhanced level coverage as an active employee, you will have the option to continue enhanced coverage for a monthly fee or be covered at the basic level at no cost to you. You must reach out to your campus benefits office to select enhanced coverage into retirement; otherwise, you will be placed in basic retiree dental coverage. You may enroll in enhanced coverage within 60 days of retirement or during the next open enrollment period if you are unable to notify your campus benefits office of your selection.

If you are benefits eligible, but not enrolled in the dental benefits at the time of retirement, you have the option to enroll in coverage at retirement, within 60 days of retirement, or during any future Open Enrollment period. This also applies if you are enrolled in FlexCash at the time of retirement. However, in this case, coverage will be established on a prospective basis.

Plan Level Eligibility and Comparison of Basic Dental Plans for CSU Retirees

CSU Employees that retire from a benefits eligible position within 120 days of separation are eligible for basic dental plan coverage for the duration of their retirement.

Plan Benefit:	DeltaCare USA (must reside in CA) Group Plan #: 72034-0004 Basic Plan Charges	DeltaCare USA (must reside in CA) Group Plan#: 72034-10004 Enhanced Plan Charges	Delta Dental PPO Group Plan #: 4018-2071 Basic Plan Pays*	Delta Dental PPO- Voluntary Enhanced II Group Plan#: 4018-12071 Enhanced Level II Plan Pays*
Preventive and Diagnostic Dentistry	(No Deductible)	(No Deductible)	(No Deductible)	(No Deductible)
Prophylaxis (cleaning) & Oral Exams	No charge – limit 2 per calendar year	No charge-limit 2 per calendar year	75% – limit 2 per calendar year*	100%- limit 2 per calendar year*
Emergency Office Visits	No charge	No charge	75%	100%
X-rays	No charge	No charge	75%	100%
Basic Dentistry	(No Deductible)	(Deductible)	(Deductible)	(Deductible)
Fillings	No charge for amalgam	No charge for amalgam	75%	75%
Anesthesia	Local – no charge; General – not covered	Local- no charge; General – covered for extraction only and only when medically necessary	75% – limited to oral surgery and select endodontic and periodontic procedures.	80%-limited to oral surgery and select endodontic and periodontics procedures
Extractions	Uncomplicated – no charge \$15-\$25 for bony impactions (not covered for orthodontia)	No charge	75%	80%
Oral Surgery	No charge	No charge	75%	80%
Endodontics	Root canal – \$20 anterior, \$40 bicuspid, \$60 molars	No charge	75%	80%
Periodontics	\$10 per quadrant for Scaling/Root Planning (limit 4 in a 12 month period) \$80 –Osseous surgery per quadrant	No charge	75%	80%
Denture Relining	Office – no charge; Lab – \$15	No charge	75%	80%
Prosthetic Dentistry	(No Deductible)	(No Deductible)	(Deductible)	(Deductible)
Crowns and Bridges	\$35-\$50 per unit; plus additional cost for precious metals and porcelain on molars	No charge; however, additional cost for precious metals and porcelain on molars is applicable	50%	80%
Prosthetic Appliance Repair	Up to \$15	No charge	50%	80%
Dentures	Full – \$60 each; Partials – \$70 each	No charge	50%	80%
Implants	Not covered	Not covered	50%	80%
Maximum Benefit for Preventive, Basic and Prosthetic Dentistry	No maximum	No maximum	\$1,500 per calendar year per person	\$2,000 per calendar year per person
Deductible	\$0 Deductible	\$0 deductible	\$50 per calendar year per person; Maximum \$150 per family per calendar year	\$50 per calendar year per person; Maximum \$150 per family per calendar year

The preceding information is not all inclusive. The information is offered only as a brief description of your dental program, what Delta Dental pays for services covered under the program and is not intended for use as a summary plan description nor is it designed to serve as an Evidence of Coverage for the program. If you have specific questions regarding benefit structure, limitations or exclusions consult your Evidence of Coverage or call Delta Dental PPO at (800) 626-3108 or Delta Care USA at (844) 519-8751.

* When visiting a PPO dentist, diagnostic and preventative services (like cleanings and exams) will not count against your annual maximum. Also, once you have opted in to the SmileWay Wellness Benefit, higher risk retirees with specific diagnosed conditions that contribute to gum disease, may benefit from additional periodontal cleanings covered at 100%.

VISION BENEFITS

The Vision Service Plan (VSP) is a voluntary plan which is fully paid by the retiree. Retirees have up to 60 days after their retirement date to enroll in VSP. You can enroll yourself and your eligible dependents either in the Basic or Premier Plan. The Premier Plan offers a higher level of benefits for lenses, contacts and frames and the monthly cost is slightly higher than the Basic Plan. If you enroll in the Premier Plan, you will be required to remain in the plan for a minimum of 12 months.

The 2022 monthly costs for the Basic and Premier coverage are as follows:

BASIC Plan (# 30059425)	PREMIER Plan (# 30078083)
Retiree Only \$5.13	Retiree Only \$15.03
Retiree + One \$9.40	Retiree + One \$28.09
Retiree + Family \$10.08	Retiree + Family \$30.14

Transitioning from Active to Retired Vision Coverage

If you were enrolled in VSP vision coverage as an active employee and elect to continue coverage after you transition from active to retiree status, you must complete a VSP enrollment form. The VSP enrollment form can be found on VSP's website located at <https://csuretirees.vspforme.com/> and must be mailed to VSP within 60 days of retirement or during any future Open Enrollment period. Upon initial enrollment as a retiree, VSP will bill you directly for the first three months. After this period, the premium cost will be deducted from your retirement check.

You can confirm your enrollment by reviewing your monthly retirement check, by registering on VSP's retiree website at <http://csuretirees.vspforme.com> or by calling VSP at (800) 400-4569.

Your 2022 VSP 2022 Vision Benefits Summary – VSP Vision Care for CSU Retirees

VSP Provider Network: VSP Advantage - **Basic Plan**

Benefit	Description	Copay
WellVision Exam	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness Every calendar year 	\$10
Prescription Glasses		\$0
Frame	<ul style="list-style-type: none"> \$110 allowance for a wide selection of frames \$130 allowance for featured frame brands 20% savings on the amount over your allowance Every other calendar year 	Included in Prescription Glasses
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children Every other calendar year* 	Included in Prescription Glasses
Lens Enhancements	Standard progressive lenses	\$0
	Premium progressive lenses	\$55
	Custom progressive lenses	\$95 - \$105
	Average 20-25% savings on other lens enhancements	\$150 - \$175
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) Every other calendar year 	\$0

VSP Provider Network: VSP Choice - **Premier Plan** (Enhanced Coverage)

Benefit	Description	Copay
WellVision Exam	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness Every calendar year 	\$10
Prescription Glasses		\$0
Frame	<ul style="list-style-type: none"> \$210 allowance for a wide selection of frames \$230 allowance for featured frame brands 20% savings on the amount over your allowance \$115 allowance at Costco® Every calendar year 	Included in Prescription Glasses
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children Every calendar year 	Included in Prescription Glasses
Lens Enhancements	UV protection	\$0
	Tinted lenses	\$0
	Standard progressive lenses	\$0
	Premium progressive lenses	\$95-\$105
	Custom progressive lenses	\$150-\$175
Contacts (instead of glasses)	<ul style="list-style-type: none"> Average savings of 30% on other lens enhancements Every calendar year 	
Contacts (instead of glasses)	<ul style="list-style-type: none"> \$200 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) Every calendar year 	\$0
Extra Savings	Retinal Screening <ul style="list-style-type: none"> Pay no more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam 	

Extra Savings	
Glasses and Sunglasses	<ul style="list-style-type: none"> Extra \$20 to spend on featured frame brands. Go to vsp.com/specialoffers for details. 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last 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 at contracted facilities.
Retinal Screening	<ul style="list-style-type: none"> Pay no more than \$39 for a routine retinal screening as an enhancement to your WellVision Exam.

Your Coverage with Out-of-Network Providers

Get the most out of your benefits and greater savings with a VSP network doctor. Call Member Services for out-of-network plan details.

Coverage with a retail chain may be different or not apply. Log in to vsp.com to check your benefits for eligibility and to confirm in-network locations based on your plan type. VSP guarantees coverage from VSP network 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.

VOLUNTARY BENEFITS

Auto & Home Insurance (California Casualty)

As a retiree, you may choose to continue your auto and home coverage with California Casualty. Beginning in 2021 you are able to elect coverage anytime throughout the year. If you were enrolled in coverage prior to retirement and would like to continue coverage without a lapse, you must enroll in the plan for your benefits to continue. You can learn more about California Casualty by visiting <https://www.calcas.com/CSURetirees> (PLEASE HYPERLINK) or by calling 866-680-5143.

Life Insurance (The Standard)

As a retiree, you may be eligible to take your Basic Life Insurance coverage (coverage which you were automatically enrolled in and paid for by the CSU) with you. If you elect to continue this coverage, you must apply in writing to The Standard Insurance Company and pay your first premium within 60 days of retiring from the CSU. Your coverage will not automatically continue into retirement. For additional information regarding premium costs and coverage, contact The Standard Insurance Company at (800) 378-5745.

Voluntary Supplemental Life Insurance (The Standard)

If you retired from the CSU and you were previously enrolled in the Voluntary Life Insurance plan offered by The Standard Insurance Company, you may be eligible to continue coverage through the Portability Provision. Under the Portability Provision, you must apply in writing to The Standard Insurance Company and pay your first premium within 60 days of retiring from the CSU. The cost will be the same as if you were an active employee. Your coverage will not automatically continue into retirement. You must enroll in the plan for your benefits to continue.

For additional information regarding premium costs and coverage, contact The Standard Insurance Company at (800) 378-5745.

Group Critical Illness (The Standard)

As a retiree you may be eligible to continue your Voluntary Group Critical Care Illness coverage offered through The Standard Insurance Company if you were enrolled in and paid for coverage prior to retiring from the CSU.

If you elect to continue your coverage under this plan, you must pay your first premium within 60 days of retiring from CSU. The cost to you will be the same as if you were an active employee. Your coverage will not automatically continue into retirement. You must enroll in the plan for your benefits to continue. For additional information regarding premium costs and coverage, contact The Standard at (800) 378-5745.

Accident Insurance (The Standard)

As a retiree you may be eligible to continue your Voluntary Group Accident Insurance coverage offered through The Standard Insurance Company if you were enrolled in and paid for coverage prior to retiring from the CSU.

If you elect to continue your coverage under this plan, you must pay your first premium within 60 days of retiring from CSU. The cost to you will be the same as if you were an active employee. Your coverage will not automatically continue into retirement. You must enroll in the plan for your benefits to continue. For additional information regarding premium costs and coverage, contact The Standard at (800) 378-5745.

Legal Plan (MetLife)

As a retiree, you may choose to continue your legal coverage with MetLife. Legal coverage must be elected or canceled during Open Enrollment. If you were enrolled in coverage prior to retirement and would like to continue coverage without a lapse, you must enroll in the plan for your benefits to continue.

If you wish to add legal coverage in retirement, you are able to do so within 31 days of separation. Coverage is available for 12 months, paid in full, for a total of \$260.40 a year. Please note that no refunds will be given if you decide to cancel your coverage.

Additional information is available by contacting MetLife directly at (800) 438-6388 or by visiting their website at <https://mybenefits.metlife.com>.

Pet Insurance (Nationwide)

Nationwide offers a variety of benefit options for your pets. This insurance can cover your pet's accidents, illness and even preventive care and wellness services. Plans are available for dogs, cats, birds, small mammals and exotics (such as reptiles). Coverage will not automatically continue into retirement. You must contact Nationwide to continue coverage via direct pay. Retirees also may enroll at any time without having been enrolled as an active employee. To learn more about this plan and/or to enroll, visit <http://www.petinsurance.com/calstateretirees> or call (877) 738-7874.

ADDITIONAL CSU BENEFIT INFORMATION

Open Enrollment

Open Enrollment occurs every year usually in early September and ends in early October.

Open Enrollment is the time of year retirees should evaluate their existing benefit options as well any new changes that may occur in the upcoming year and determine the best benefit options for yourself and your eligible family members.

It is important to note that every year the CSU reviews the benefit plans sponsored by the CSU and offered to our retirees and their eligible dependents. CSU will continue to work to provide a benefit that not only meets the long-term institutional obligations of the CSU but also is a sustainable option for our retirees.

CALPERS DEPENDENT ELIGIBILITY VERIFICATION (DEV)

CalPERS must verify the eligibility of your dependents enrolled in health and dental benefits once every three years. The verification cycle is based on the retiree's birth month. The chart below represents the schedule dates requesting verification.

Year of Verification	2022	2023	2024	2025	2026	2027
Subscriber Birth Month	February May August November	March June September December	January April July October	February May August November	March June September December	January April July October

Verifying Family Members

Ninety (90) calendar days before the retiree's birth month, CalPERS will send you a letter with the verification due date, a list of the enrolled family members you must verify, and the acceptable verification documents. You are to promptly provide verification documents to CalPERS. CalPERS will verify the same family members for dental benefits.

Your family members may lose their health and/or dental coverage if you delay providing the required verification documents to CalPERS.

For additional information regarding CalPERS verification schedule and required documents, you can visit the CalPERS website www.calpers.ca.gov. Click the "Retiree" tab, then go to "Health & Medicare" tab.

CARRIER CONTACT INFORMATION FOR ALL PLANS

HEALTH

Administered by: CalPERS

Phone: (888) 225-7377

Website: www.calpers.ca.gov

DENTAL

Administered by: Delta Dental

Phone: CSU PPO plan (800) 626-3108

Phone: CSU HMO plan (844) 519-8751

Website: <https://www.deltadentalins.com/csu/>

VISION

Administered by: Vision Service Plan (VSP)

Phone: (800) 400-4569

Website: <http://csuretirees.vspforme.com/>

LIFE INSURANCE, GROUP CRITICAL ILLNESS AND ACCIDENT INSURANCE

Administered by: The Standard

Phone: (800) 378-5745

Website: <https://www.standard.com/mybenefits/csu/>

LEGAL PLAN

Administered by: MetLife

Phone: (800) 438-6388

Website: <https://mybenefits.metlife.com>

AUTO & HOME INSURANCE

Administered by: California Casualty

Phone: (800) 866-5142

Website: <https://www.calcas.com/CSURetirees>

PET INSURANCE

Administered by: Nationwide

Phone: (877) 738-7874

Website: <http://www.petinsurance.com/calstateretirees>



CSU RETIREE WEBSITE: www.csuretires.calstate.edu