

CITY OF SAN FERNANDO
Benefit Offerings

LIFE/AD&D – THE STANDARD

The City Administrator of the City of San Fernando is eligible for Life and AD&D coverage through The Standard. Premiums for both Life and AD&D are paid in full by the City. Supplemental Life coverage for employees and their dependents is paid for by the employee.

City paid insurance amount:	\$500,000 Life	\$500,000 AD&D
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DISABILITY – THE STANDARD

All active Management, Department Heads, Lieutenants, Sergeants, and Sworn Police employees of the City of San Fernando working 30 hours or more per week are eligible for Disability coverage through The Standard. Premiums for Disability are paid in full by the City.

Short Term Disability (STD)

Elimination Period	30 days
Duration	180 days
Benefit	66 ² / ₃ %
Weekly Maximum Benefit (Sworn Police)	\$1,385
Weekly Maximum Benefit (Management)	\$1,850

Long Term Disability (LTD)

Elimination Period	180 days
Benefit	66 ² / ₃ %
Maximum Monthly Benefit (Sworn Police)	\$6,000
Maximum Monthly Benefit (Management)	\$8,000
Duration	To age 65 or Social Security normal retirement age
Conversion	Included
Survivor Benefit	6 Month Lump Sum

MEDICAL – CalPERS

For information on CalPERS medical, please contact your Personnel Office.

DENTAL – DELTA DENTAL	PPO PLAN	DELTACARE USA PREPAID PLAN
Annual Deductible In-Network Out-of-Network	\$15 Ind. / \$45 family \$25 Ind. / \$75 family	None
Annual Benefit Maximum	\$1,500	Unlimited
Diagnostic & Preventive Services (Oral Exams, Cleanings, X-Rays)	100% (Deductible waived)	No co-pay
Basic Services (Extractions Fillings, Root Canals)	80%	Scheduled co-pays (See Deltacare/Prepaid brochure)
Major Services (Crowns, Jackets & Other Cast Restorations)	50%	Scheduled co-pays (See Deltacare/Prepaid brochure)
Prosthetic Services (Bridges, Dentures)	50%	Scheduled co-pays (See Deltacare/Prepaid brochure)
Orthodontics – (adults and children up to age 24 only for PPO)	50% \$2,000 Lifetime max	\$350 Start-up fee \$1,800 Adult co-pay \$1,600 Child co-pay
VISION – VSP		
All eligible employees of the City and their eligible dependents are eligible for vision coverage through VSP. (If a non-participating provider is used, member is reimbursed based on allowances.) Please see the Personnel Office for a list of allowances. To receive your vision benefits simply make an appointment with a participating VSP doctor or with a non-participating provider. The provider's office will verify your eligibility.		
Exam Deductible		\$10
Exam		Every 12 months
Lenses		Every 12 months
Frames		Every 24 months
Cosmetic Contact Lens Allowance (in lieu of glasses)		\$130
IMPORTANT PHONE NUMBERS		
San Fernando Personnel Office		818 – 898 – 1220
CalPERS		Contact City Personnel Office
Delta Dental Customer Service/Claims (PPO)		888 – 335 – 8227
Delta Dental Customer Service/Claims (Prepaid)		800 – 422 – 4234
Delta Dental Website		www.deltadental.org
VSP Customer Service		800 – 877 – 7195
VSP Website		www.vsp.com
The Standard Customer Service (Life/AD&D)		800 – 628 – 8600
The Standard Customer Service (Disability)		800 – 368 – 1135

This is merely a brief outline of benefits and does not constitute a contract or policy. Please refer to your plan certificate booklet for complete details and provisions.



SUMMARY OF BENEFITS

**EFFECTIVE
JANUARY 1, 2009**

PROVIDED BY:



ABD Insurance & Financial Services, Inc.
21250 Hawthorne Boulevard, Suite 600
Torrance, CA 90503

CITY ADMINISTRATOR