

**HEALTH COVERAGE FOR RETIRED MANAGEMENT EMPLOYEES**

1. The Benefits Department will notify management employees who are eligible for insurance benefits under Board Policy Section 4354.
  - a. Management employees with ten (10) or more years of benefited eligible district service, will receive the equivalent of the cost of the least expensive medical, dental, and vision coverage for use toward Health and Welfare premiums for themselves from the time of STRS/PERS retirement from the District until age 65, unless otherwise specified for a position held by an employment contract agreement.
2. Each October the Benefits Department will notify participants of any changes in District insurance coverage.
3. Insurance premiums are to be paid in full (100%) by the participant according to semi-annual or quarterly payment schedules.
4. Changes in carriers, coverage for self, or dependent coverage may be made only during open enrollment or if a mid-year qualifying event occurs such as: death, divorce, or when a dependent becomes ineligible for coverage.
5. Ninety (90) days in advance of the effective date, participants covered by this plan shall provide the Benefits Department with the following:
  - a. The date on which they will attain the age of sixty-five (65).
  - b. The date on which they will become eligible for other National or Governmental Agency coverage, including Medicare or National Health Insurance.
6. If health insurance coverage is allowed to lapse, the coverage may not be reinstated the following year or any year thereafter.