

**LBCCD-LBCCE/AFT
Memorandum of Understanding
Behavioral Health & Substance Abuse Benefits**

This following Memorandum of Understanding (“Agreement”) is made by and between the Long Beach Community College District (“District”) and the Long Beach City College Council of Classified Employees (LBCCE/AFT) Where appropriate, The District and LBCCE/AFT will collectively be referred to as “parties.” This Memorandum of Understanding shall supersede any other agreement, either oral or written, previously agreed to by the parties related to the following:

1. The parties agree to the following changes to Health and Welfare benefits offered by the District to those employees and retirees covered in the collective bargaining agreement per Article 11:
 - The behavioral health and substance abuse coverage currently offered through MHN shall cease as of December 31, 2020.
 - Behavioral health and substance abuse coverage shall be added to the Anthem HMO and Anthem PPO plans effective January 1, 2021.
 - The current Kaiser plan contains behavioral health and substance abuse coverage and no changes are being made to that plan.
 - The Employee Assistance Program “EAP” shall be transitioned from MHN to Anthem effective January 1, 2021.
2. Employee contributions shall continue as defined in Article 11.2 of the collective bargaining agreement.
3. The District will continue to consult with LBCCE/AFT should it be necessary to make any other changes to Health and Welfare benefits.
4. As a reference, the attached July 1, 2020 renewal costs are incorporated for information purposes only.
5. Any future changes to rates will be presented to the Health and Welfare Committee as an information item in line with our usual practice and implemented on the dates new rates may become effective.

For the District:


Gene Durand (Nov 5, 2020 13:12 PST)

Gene Durand
Vice President, Human Resources

Date Nov 5, 2020

For Long Beach City College Council of
Classified Employees:



Robert Remeta
President

Date Nov 5, 2020

**Long Beach Community College District
Medical Renewal and MH/SA - HMO/PPO
July 1, 2020**



	MHN - MH/SA (HMO/PPO)		Kaiser - HMO	Anthem Blue Cross - HMO	Anthem Blue Cross - PPO	
	Current		Proposed	Proposed	Proposed	
	In-Network	Non-Network	In-Network (no out-of-network)	In-Network (no out-of-network)	In-Network	Non-Network
Deductible						
Individual	n/a	n/a	n/a	n/a	Waived for MH/SA	
Family	n/a	n/a	n/a	n/a	Waived for MH/SA	
Out of pocket maximum			OOP Max combined w/Medical/Rx	OOP Max combined w/Medical/Rx	OOP Max combined w/Medical/Rx	
Individual	n/a	\$1,286	\$1,500	\$500	\$683	\$1,636
Two-Individuals	n/a	n/a	n/a	n/a	\$1,366	\$3,272
Family	n/a	n/a	\$3,000	\$1,500	\$2,049	\$4,908
Emergency Services						
Emergency Room Professional		\$0	\$0	\$0	0%	0%
Emergency Room Facility		\$0	\$100 copay (waived if admitted)	\$0	0%	0%
Ambulance Cost Share		20%	\$0	\$0	\$0 copay first \$50 of expenses; thereafter 20%	
Laboratory Services						
Laboratory services		n/a	\$0	\$0	0%	30%
Participating Practitioner Visits to Home (if available)						
Participating Practitioner Visits to Home (Any number of visits in one day treated as one visit)	\$0	30%	\$20 copay	\$0 copay	\$0 copay	30%
Severe Mental Illnesses						
Outpatient						
Outpatient consultation	\$0	30%	\$20 copay	\$0 copay	\$0 copay	30%
Group therapy session	\$0	30%	\$10 copay	\$0 copay	\$0 copay	30%
Inpatient						
Inpatient care in a hospital, excluding residential treatment centers	\$0 Per Day	30% Per Day	\$0 copay	\$0 copay	0%	30%
Residential treatment centers	\$0 Per Day	30% Per Day	\$0 copay	\$0 copay	0%	30%
Inpatient physician visits	\$0	30%	\$0 copay	\$0 copay	0%	30%
Alternate Care						
Partial hospitalization/Day treatment/Intensive outpatient program	\$0 Per Day	30% Per Day	\$0 copay	\$0 copay	0%	30%
Other Mental Illnesses						
Outpatient						
Outpatient consultation	\$0	30%	\$20 copay	\$0 copay	\$0 copay	30%
Group therapy session	\$0	30%	\$10 copay	\$0 copay	\$0 copay	30%
Inpatient						
Inpatient care in a hospital, excluding residential treatment centers	\$0 Per Day	30% Per Day	\$0 copay	\$0 copay	0%	30%
Residential treatment centers	\$0 Per Day	30% Per Day	\$0 copay	\$0 copay	0%	30%
Inpatient physician visits	\$0	30%	\$0 copay	\$0 copay	0%	30%
Alternate Care						
Partial hospitalization/Day treatment/Intensive outpatient program	\$0 Per Day	30% Per Day	\$0 copay	\$0 copay	0%	30%
Substance Abuse / Detoxification / Rehabilitation						
Outpatient						
Outpatient consultation	\$0	30%	\$20 copay	\$0 copay	\$0 copay	30%
Group therapy session	\$0	30%	\$5 copay	\$0 copay	\$0 copay	30%
Inpatient						
Inpatient care in a hospital, excluding residential treatment centers	\$0 Per Day	30% Per Day	\$0 copay	\$0 copay	0%	30%
Residential treatment centers	\$0 Per Day	30% Per Day	\$0 copay	\$0 copay	0%	30%
Inpatient physician visits	\$0	30%	\$0 copay	\$0 copay	0%	30%
Alternate Care						
Partial hospitalization/Day treatment/Intensive outpatient program	\$0 Per Day	30% Per Day	\$0 copay	\$0 copay	0%	30%