

Autumn 2012

Ventura County Community College District Retirees' Association

# The Monitor

## 'La Fiesta' is 2012 social event *Mexican food buffet highlights Sept. 27 function*

The VCCCD Retirees' Association's Social Committee has announced that the annual social activity will be held Sept. 27.

Dubbed "*La Fiesta*," the event will have a Latin flavor this year, according to Social Committee chair Pat Gage.

The Fiesta will take place from 1 to 5 p.m. at the Ventura TowneHouse, 4900 Telegraph Rd. in Ventura. The location is across the street from Ventura College.

Appetizers will be served from 1 to 2 p.m. and will include chips, salsa, and guacamole. Besides water and soft drinks, beer and wine will also be available.

The Mexican buffet will be served from 2 to 4 p.m. and will feature enchiladas, fajitas, tostadas,

beans, rice, salad and dessert.

Ample free parking will be available on the premises.

This event is being coordinated by the Social Committee in cooperation with the Ventura TowneHouse management.

Members of the Social Committee include Patricia Gage, Marie Soo Hoo, Tanya Burke, Norma Frisby, Marta Garza, Teri Lara, Doris MacTague, Sharon Newman, Bob Reeves, and Betty Saho-ta. Special assistance for *La Fiesta* has been provided by Kay Faulconer-Boger.

Advance reservations are required at \$15 per person, and participants may include up to four (4) guests.

To reserve your spot, please fill

out the bottom portion of the reservation form (included in this newsletter), clip it off and send it in with your check made payable to VCCCD Retirees' Association.

Mail your reservation and check in time to Patricia Gage, 427 Fernwood Drive, Oxnard, CA 93030.

Reservations must be received by Sept. 17, Gage said.

*La Fiesta* is this year's key fundraising and social event for the VCCCDRA, according to association President Harry Culotta.

When you sign up for *La Fiesta*, you are not only getting a chance to spend the afternoon with old friends and colleagues, but you are also keeping the annual and lifetime dues affordable longer for your fellow retired colleagues.

## Incumbents, challengers vie for board seats

Four candidates, including two incumbents, will vie for seats on the VCCCD Board of Trustees in the November election.

Larry Miller, a member of the VCCCDRA, is seeking a third term on the board.

He represents Area 3, which includes Camarillo, Ojai, Santa Pau-

la, and Fillmore.

Miller will be opposed by Larry Kennedy, who teaches business at Oxnard College. Kennedy ran unsuccessfully against Miller eight years ago.

Bernardo Perez, who was appointed to the board following the resignation of Bob Huber, is seek-

ing a full term.

Perez, a manager for the Cabrillo Economic Development Corp., represents Area 4, which includes Moorpark and Simi Valley.

He is opposed by Ash Givargis, who is an Information Technology supervisor at the Youth Correctional Facility in Camarillo.



# Bienvenidos a la Fiesta!!

## SECOND ANNUAL VCCCD RETIREES' ASSOCIATION RETIREES' SOCIAL EVENT

**WHERE:** Ventura Towne House, 4900 Telegraph Road, Ventura (across the street from Ventura College). Ample **Free Valet** or Self Parking available on the grounds.



**WHEN:** Thursday, **September 27, 2012**

**TIME:** 1:00 p.m. – 5:00 p.m.

*Happy hour* - 1:00 — 2:00 p.m. Wine & Beer, chips, salsa and guacamole. Coffee, tea and water also available.

**MENU:** *Mexican Buffet* - 2:00 p.m. – 4:00 p.m. Chicken and cheese enchiladas, beef fajitas, tostadas, Spanish rice and beans, fiesta salad, delicious flan for dessert.

**COST:** \$15.00 Minimum Donation. **Early reservations are encouraged. Seating is limited.**

**DEADLINE FOR RESERVATIONS: September 17, 2012**

*Shine up those "huaraches", dust off those "sombreros" and "salsa" on down to join your friends, colleagues and fellow retirees for an afternoon of fun, festivities, music and dancing at the Fiesta...Olé*

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**CUT OFF AND RETURN THIS RESERVATION FORM WITH YOUR CHECK**

Retiree's Name: \_\_\_\_\_ Add name(s) of guest(s) below:

Guest \_\_\_\_\_ Guest \_\_\_\_\_

Guest \_\_\_\_\_ Guest \_\_\_\_\_

**Please Make checks payable to: VCCCD RETIREES' ASSOCIATION**

\$15 per person x \_\_\_\_\_ persons = \$ \_\_\_\_\_ total amount of your check

**Mail completed reservation form and check to: Patricia Gage**  
427 Fernwood Dr., Oxnard, CA 93030-4032

**RESERVATIONS MUST BE RECEIVED BY SEPTEMBER 17, 2012**

*For more information, call Pat Gage: (805) 983-2525*



VCCCD Retiree Application for  
Reimbursement of Medical Costs Above Baseline Plan

| Retiree Information  |         |          | Dependent Information<br>(if claim(s) submitted)   |          |
|--|---------|----------|--|----------|
| Retiree Social Security #<br>Retiree Date of Birth:<br>Age 75-79 <input type="checkbox"/> 80 or over: <input type="checkbox"/> |         |          | Last Name, First Name  |          |
| Last Name, First Name  |         |          | Relationship to Subscriber:<br>Spouse/Domestic Partner <input type="checkbox"/> Child <input type="checkbox"/> |          |
| Address  |         |          | Last Name, First Name  |          |
| City   | State   | Zip Code | Relationship to Subscriber:<br>Spouse/Domestic Partner <input type="checkbox"/> Child <input type="checkbox"/> |          |
| Grand Total for Amount Above Baseline Plan<br>\$   |         |          | Retiree Phone Number<br>( )  |          |
| Retiree's Signature  |         |          | Date   |          |
| Designee (In the event of retiree's death prior to payment)  |         |          |  |          |
| Name   | Address | City     | State  | Zip Code |

**Instructions**

1. Complete application form.
2. Proof of payment of costs above baseline plan **must** be included for reimbursement
3. Only one reimbursement form may be filed per health benefit year (July 1 – June 30)
4. Keep copies of all for your file, and return the application and proof of payment on or before **September 30th** of the immediate preceding health benefit year (July 1 – June 30) to:

Ventura County Community College District  
Employee Benefits  
255 W. Stanley Ave., Suite 150  
Ventura, CA 93001

**(Complete back of form and attach proof of payment)**

## Inventory of Medical/Prescription Costs Above Baseline Plan

USE A SEPARATE INVENTORY PAGE FOR EACH MEMBER OF THE FAMILY SUBMITTING A REQUEST FOR REIMBURSEMENT; USE ADDITIONAL PAGES FOR EACH MEMBER IF NECESSARY

PAGE \_\_\_\_\_ OF \_\_\_\_\_

| Medical, Dental, Vision Expense                  | Retail Pharmacy Prescription   | Mail Order Prescription   |
|--|--|---|
| Copy of Explanation of Benefits must be attached | Copy of prescription co-pay invoice that includes the patient name must be attached<br>(Cash register receipt only will not be accepted) | Copy of prescription co-pay invoice that includes the patient name must be attached |
| Patient Name:                                    | Patient Name:  | Patient Name:   |
| Date of Service:                                 | Date of Service:   | Date of Service:  |
| Amount Paid Above Baseline:                      | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Service Performed:                               | Patient Name:  | Patient Name:   |
| Patient Name:                                    | Date of Service:   | Date of Service:  |
| Date of Service:                                 | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Amount Paid Above Baseline:                      | Patient Name:  | Patient Name:   |
| Service Performed:                               | Date of Service:   | Date of Service:  |
| Patient Name:                                    | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Date of Service:                                 | Patient Name:  | Patient Name:   |
| Amount Paid Above Baseline:                      | Date of Service:   | Date of Service:  |
| Service Performed:                               | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Patient Name:                                    | Patient Name:  | Patient Name:   |
| Date of Service:                                 | Date of Service:   | Date of Service:  |
| Amount Paid Above Baseline:                      | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Service Performed:                               | Patient Name:  | Patient Name:   |
| Patient Name:                                    | Date of Service:   | Date of Service:  |
| Date of Service:                                 | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Amount Paid Above Baseline:                      | Patient Name:  | Patient Name:   |
| Service Performed:                               | Date of Service:   | Date of Service:  |
| Patient Name:                                    | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Date of Service:                                 | Patient Name:  | Patient Name:   |
| Amount Paid Above Baseline:                      | Date of Service:   | Date of Service:  |
| Service Performed:                               | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Patient Name:                                    | Patient Name:  | Patient Name:   |
| Date of Service:                                 | Date of Service:   | Date of Service:  |
| Amount Paid Above Baseline:                      | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Service Performed:                               | Patient Name:  | Patient Name:   |
| Patient Name:                                    | Date of Service:   | Date of Service:  |
| Date of Service:                                 | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Amount Paid Above Baseline:                      | Patient Name:  | Patient Name:   |
| Service Performed:                               | Date of Service:   | Date of Service:  |
| Patient Name:                                    | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| Date of Service:                                 | Patient Name:  | Patient Name:   |
| Amount Paid Above Baseline:                      | Date of Service:   | Date of Service:  |
| Service Performed:                               | Co-Pay Above Baseline:   | Co-Pay Above Baseline:  |
| <b>Total Medical \$ _____</b>                    | <b>Total Retail Pharmacy \$ _____</b>  | <b>Total Mail Order Rx \$ _____</b>   |

~ Employer Use Only ~

\$ \_\_\_\_\_  
 Amount Approved for Reimbursement      Date \_\_\_\_\_      Signature of Authorized Person \_\_\_\_\_

Notes:

# File your reimbursement claim now

by Harry Culotta

## Introduction

Between July 1 and September 30, 2012, about 430 of the nearly 700 full-time VCCCD retirees and their dependents are eligible, under certain circumstances, to file with the Ventura County Community College District an application to claim reimbursement of excess costs incurred for medical services and prescription drugs during the period July 1, 2011 and June 30, 2012. Those who are eligible and specifically named have been mailed a copy of the Settlement Agreement that was approved in January 2010 in Ventura County Superior Court.

## Filing Requirements

**Who can file:** Classified, confidential, supervisory, and management retirees who are specifically named in the Settlement Agreement, plus eligible dependents (generally spouses or domestic partners), who were enrolled in Anthem Blue Cross during 2011-12 are eligible to file.

**What can be claimed:** (1) During 2011-12, if you paid the \$100 co-pay for one or more emergency room visits that did not result in being admitted to the hospital, you may claim \$100 for each such emergency room visit. (2) In 2011-12, if you were at least 80 prior to July 1, 2009, when the prescription deductible was raised from \$50 to \$100, you may claim the amount spent over \$50, up to a maximum of \$50.

**How to claim:** Fill out the front and back sides of the VCCCD Retiree Application for Reimbursement of Medical Costs Above Baseline Plan and attach copies of receipts for each item claimed. Be sure to insert individual amounts in the correct column on the back of the form. If you are also filing for an eligible dependent (spouse or domestic partner), you must also list his/her name and other required information and attach copies of receipts for each item claimed. A copy of the application form appears on pages 2 and 3 of this newsletter. Mail or hand-carry the completed application to Ventura County Community College District, ATTN: Employee Benefits, 255 W. Stanley Ave., Suite 150, Ventura, CA 93001, no later than Sept. 30. Because Sept. 30 falls on Sunday this year, you should file your claim and supporting documentation by Friday, Sept. 28.

## Filing and Related Deadlines

Please note these important deadlines as you prepare your reimbursement application:

- Sept. 30 – Deadline for submission of reimbursement application to the District
- Oct. 31 – Deadline for the District to acknowledge receipt of reimbursement application
- Nov. 30 – Deadline to submit a written objection to District if he/she has not received acknowledgment of reimbursement application by Nov. 15 or if he/she objects to the anticipated reimbursement amount
- Jan. 31, 2013 – Deadline for the District to pay the non-disputed reimbursement amount

## Ineligible Persons or Plans

Please note these current limitations on filing eligibility:

(1) Faulty retirees named in the Settlement Agreement are not eligible to file a reimbursement application, as no benefit reductions have occurred in the Anthem Blue Cross plan or in the dental or vision plans, since the 2007-08 fiscal year on which the Settlement Agreement is based. (2) No retirees named in the Settlement Agreement are presently eligible to file a reimbursement application for any expenses associated with Delta Dental, Medical Eye Services, or VSP vision plans, since no benefit reductions have occurred in those plans since 2007-08.

**Join us for *La Fiesta* on  
Sept. 27! Reservation  
form on Page 2.**

**Look for us on the Web at  
<http://www.vcccdra.org>**

**2012-2013 Executive Board**

**Harry Culotta, President**

**René G. Rodriguez, Past President**

**Marie Soo Hoo, Secretary**

**Pat Gage, Treasurer**

**Don Medley, Membership Committee Chair**

**Gary Johnson, Benefits Committee Chair**

**Larry Manson, Political Committee Chair**

**VCCCD Retirees' Association  
P.O. Box 6216  
Ventura, CA 93006-6216**

Place  
postage  
here