



## **Results of the Employee Input to the RSCCD Health Benefit Program March 2023**

The Rancho Santiago Community College District (RSCCD) Joint Benefits Committee (JBC) periodically reviews the District's health benefits program to ensure we are offering high quality benefits to our employees while maintaining costs for the district. In February, the Committee sent out an online survey seeking employees' opinion (members of the CSEA 579, CSEA 888, FARSCCD, and management) on our current benefit offerings to ensure the District continues to offer the benefits employees want. Three hundred eighty (380) employees responded, and the following is their feedback.

Respondent's primary employment group:

- 47% CSEA 579
- 4% CSEA 888
- 34% FARSCCD
- 15% Management

Respondent's enrollment in the following medical plan:

- 32% Blue Cross PPO
- 46% Blues Cross HMO
- 22% Kaiser Permanente

Respondent has the following health coverage:

- 24% Single Coverage
- 27% 2-Party Coverage
- 49% Family Coverage

**There is good availability of participating physicians for my health plan in my geographic area.**

- 38% Strongly Agree
- 51% Agree
- 7% Neither Agree nor Disagree
- 5% Disagree
- 1% Strongly Disagree

- Many of the physicians are not taking new patients so it is difficult to replace your PCP if your current one leaves.♦♦
- There seems to be a huge lack of dieticians when I try to find them.
- Most are not accepting new patients.
- HMO is ok. It seems like more and more doctors are not accepting it anymore.

- There isn't quality doctors as they are always changing my PCP, as doctors keep leaving.
- Trying to find a family psychologist and the list does not have good doctors.
- Available doctors do not mean good doctors available.
- not applicable. I have coverage under my wife's plan.
- Very hard to find a doctor willing to take on new patients.
- HMO limits physicians to its network. At times my family has been unable to see a particular specialist unless I pay out of pocket
- They need more endocrinologist. I have to wait up to 2 months for appt.
- I don't know. I have not looked for a physician for years.
- I am very happy with Kaiser.
- Providence (St. Joseph) has excellent doctors which are local to our area.
- Nurses and nurse practitioners are being used a lot more. MDs are less available. Sometimes you have to wait 3 months to see your provider.
- There is a good availability, but the quality isn't great.

**The district's current medical co-pays, co-insurance and deductibles are manageable.**

35% Strongly Agree

51% Agree

8% Neither Agree nor Disagree

5% Disagree

1% Strongly Disagree

- Family PPO is too expensive! It is not equitable for 2-party and single party to pay zero while families have to pay much more.
- It's unfortunate they are so high.
- insurance does not cover both contacts and glasses, had to pay for classes full price.
- The ER co-pay is just a little high.
- The medical office billed insurance and medical group with different codes that I have to pay \$20.00 instead of \$10.00
- EXCEPT FOR ER
- Our benefits are among the best and people need to appreciate this.
- not applicable. I have coverage under my wife's plan.
- Except they always deny coverage for blood work, and we pay out of pocket.
- chapter 888 needs to close a gap in health care coverage compared to other groups.
- I work at the child development center and I feel it is not fair that our teacher do not have the same health benefits as the rest of the RSCCD employees
- would be great to have zero co-pay.
- If those co-pays were lower, they would have to be free.
- Premiums for family is too high in comparison to single and dual PPO at zero.
- I used to pay \$5 copay at the Coast CCD for Medical. But \$10 is still okay.
- ASCIP puts unreasonable review requirements on treatments like physical therapy, which I end up paying out of pocket for because I need long-term rehabilitation.

### **Respondent's ability to obtain the prescriptions he/she need at a reasonable price.**

39% Strongly Agree

42% Agree

12% Neither Agree nor Disagree

5% Disagree

2% Strongly Disagree

- Some meds are not covered and even when the Dr. justifies the need, the insurance will not cover it. Symbicort
- The insurance does not want to cover the medicine that is more appropriate for our body issues.
- I have not had to purchase any medication.
- Most new medications are rejected even if the doctor says they are best for your condition.
- Insurance used to only cover name brands; now they only cover generic.
- My husband's eyedrops were not covered by insurance.
- the co-pay for non-generic prescriptions is too high.
- I have not used this service yet. 2023 is the first year I'm using the benefits.
- Navitus refuses our prescriptions. Doctors hate them and the amount of paperwork they need to fill out so patients receive the PROPER medication that they actually need
- my migraine specialty medications are not covered, never had this problem before.
- not applicable. I have coverage under my wife's plan.
- although some medications are not covered
- In some prescriptions are not reasonable price.
- It is inconvenient and limiting to only be able to use Costco pharmacy for free generic medication as simple as the flu shot. I'd like access to free generics at CVS, Rite Aid, Walgreens, etc. I should be able to walk into the closest pharmacy and receive a free flu shot, but this is not the case. The only option for a free flu shot at a pharmacy is Costco.
- The prescription/pharmacy part of HMO is a HUGE roadblock. It took four months from letter from my dermatologist to approve Dupixent.
- Insurance keeps turning down my doctor's prescriptions. When my doctor's officer informs them that it's the medication I, they still won't fill it.
- as of February 1, 2023, our coverage no longer includes the brand name of one of our medications. For this medication, there is a recognized difference between the brand name and generic form.
- It is rare that the FIRST medication my doctor prescribes is covered by our insurance. Sometimes, it's the third or fourth choice. Our formulary is ridiculously limited.
- Yes, prescription drug prices are very reasonable.
- Generics are not the only meds that should be covered.
- My family has not needed prescriptions often.
- Pharmacy medications that were once covered are now being offered in generic form. However, some prescriptions are not covered and I must pay out of pocket for them.

- One medication id back-ordered and difficult to find.
- Recent changes required generic med instead of the prescribed daily medication.
- Some medications are not part of our formulary, and the formulary does not really seem to be of the same quality as the health insurance plan.
- I do take a drug that is difficult to get approved. It's legitimately a lifesaving drug for me, and our health insurance company gives me a hard time renewing it every year. The drug is called Fasenra, and I can't breathe without it.
- Price is fine but was very surprised they changed my husband's Insulin Rx. He used to be daily injections and they made him change to once/week med. We are exploring this with doctor.

**I am enrolled in the following dental plan:**

67% MetLife PPO

33% Delta HMO

**Our dental co-pays, co-insurance and deductibles are manageable.**

15% Strongly Agree

43% Agree

24% Neither Agree nor Disagree

13% Disagree

5% Strongly Disagree

- Co-pays for necessary major procedures such as wisdom teeth extraction or root canals are still significant in cost.
- The cost of the issues we need to have taken care of is outrageous.
- Too expensive; very limited coverage
- Some things are manageable, but anything like a root canal is hugely expensive.
- Most are out of network.
- My dentist for many doesn't take HMOs, so I won't be able to use Delta HMO.
- New Employee have not used Dental Plan
- I would like to see Delta PPO or other dental PPO option that includes orthodontics.
- I have to pay out of pocket quite a bit for anything beyond cleaning and x-rays.
- The limit is horrible.
- It's tough because most of the new dental care isn't covered by insurance, such as fillings, deep cleaning, and interval of cleanings.
- I can obtain better and cheaper coverage through my husband's employer. I would like to have the option of declining dental coverage.
- Dental co-pays are too high.
- Even with PPO Dental considerable out of pocket is still paid to dental office.
- I have not used this service yet. 2023 is the first year I'm using the benefits.
- We have very good coverage.
- Need better coverage. Basically, just covers a teeth cleaning.
- I paid \$400 out of pocket for a recent crown. I will be \$2500 of \$3000 dental procedure for my special needs daughter next month.

- Reduction from \$4000 to \$2000. How is that good??
- not applicable. I have coverage under my wife's plan.
- Whenever something goes wrong with my teeth, it seems like I pay so much. Nothing like my medical HMO
- I always pay some extra
- I was disappointed braces was not covered.
- For any new crowns or replacements, the costs are in the thousands of dollars out of pocket.
- co-pays for dental coverage are high or they don't cover anything at all.
- I don't need dental insurance but am forced to pay \$550/year for it. I select Delta HMO because it is the least expensive option.
- Co-pays are great, the level of coverage is poor. We spend thousands of dollars annually on things that aren't covered.
- They are manageable now but will be difficult after retirement.
- There are very few dentists in my area who accept HMO. Our options are very limited.
- I am forcing to buy dental insurance for my family even though we don't need it. We have PPO dental insurance through my husband's company for a fraction of the cost of our district HMO dental. I wish I have an option to pick which coverage I need ( medical coverage and/or dental) without being forced into buy HMO dental insurance.
- We could get lower co-pays.
- Prior plan had ortho. MetLife did not.
- I was disappointed to find that the plan doesn't cover orthodontics.
- All good.
- I am very disappointed that there are no orthodontic benefits through MetLife PPO.
- Out of pocket costs for any dental work is expensive.
- Would like to have the option for more coverage even if it's out of pocket.
- It covers almost nothing. Coverage prior to the change was much better.
- Dental co-pays are high if dental work is needed, I've had to travel abroad for dental work, as it was a fraction of the cost even with MetLife PPO.
- it is way too expensive.
- Dental should be covered the same as medical. If you have dental problems, it affects your overall health.
- I agree, as I have been with my dentist's office since before the current dentist and there typically are no issues with coverage. However, I was disappointed to lose "not offered anymore" Delta Plan.
- Our Dental coverage is very limited and needs to be improved.
- I have not used the dental plan yet.
- High deductibles - not a lot of items covered.
- The new MetLife PPO offers lower coverage than the Delta PPO offered previously.
- Dental PPO does not cover orthodontic care.
- lackluster coverage for my implants

**Respondent's overall benefits provided by the District meet my (and my family's) needs.**

28% Strongly Agree

52% Agree

11% Neither Agree nor Disagree

7% Disagree

2% Strongly Disagree

- Better coverage in dental PPO would be nice.
- Too many procedural denials and the Blue Cross appeal process is unfair.
- Need orthodontics. Need more access to Psych MD
- Yes, most of the benefits.
- It my first-time using HMO medical and dental coverage, and it hasn't been a good experience so far.
- My kids and family needs therapy and not enough coverage.
- Absolutely!!
- My dentist no longer covers my dental plan, and several doctors are no longer accepting Anthem BC. Is Blue Shield a better option?
- MetLife is terrible. Covers very little. I have to appeal most of the time just to get them to cover what the plan describes.
- Our benefits are reduced every year.
- not applicable. I have coverage under my wife's plan.
- I have been an employee for the district for over 25 years and I do not pay the same as a new employee in another CSEA bargaining unit. I think that's wrong!!!!
- dental and vision could be better.
- Every day I am afraid you will come up with a reason to take away our medical benefits like you did to the retirees....
- Out of pocket maximum is too high for both in and out of network. This is especially true for all care related to pregnancy. If pregnancy takes place September to April (2 calendar years), out of pocket cost is \$6000 since credible ob-gyns in OC bill out-of-network.
- covers only the basics. large copays added for other things.
- We better wellness care options (Psychology - Chiropractor - Holistic)
- My household includes a member who is neither my spouse nor my child. I would like the option to cover in lieu of a spouse.
- With the exception of my prescriptions being consistently turned down. They want to make me take whatever meds they approve, and not what I doctor prescribed.
- it could be better.
- Please don't get any ideas, but I am very happy with the benefits package provided by the District.
- The medical PPO is so expensive because we also have to pay for Dental PPO. The dental PPO is free if we have HMO medical.
- The premium is too high.
- Yes, for health but no for dental.

- My family can't afford the deductibles from MetLife PPO. For emergency work, we've had to travel to Tijuana.
- my current needs are met but I am worried about the inferior supplemental package I will have to utilize after I retire and turn 65. We all have friends that have retired and are seeing the impact of working with a "for profit" entity. Very sad.
- The district provides very good insurance and I feel lucky.
- The maximum benefit really needs to be increased to keep up with the increasing costs at dentists.
- Problems with retiree benefits
- I would like access to a more affordable PPO plan.
- Please provide some kind of incentive for public transit or ridesharing.

**I know who to call if I have an issue with my benefits.**

24% Strongly Agree

45% Agree

14% Neither Agree nor Disagree

12% Disagree

5% Strongly Disagree

**Additional Comments Respondents Shared about our Current Medical and/or Dental Plans:**

- My family and me hate the hospital that we are sent every time there is an emergency. They don't know how to take care of people with disabilities in the emergency room.
- Better dental PPO
- \* 90-day prescription refills of daily medications at Costco and other brick-n-mortar pharmacies charged at the 30-day prescription copay amount so that we do not have to make multiple trips to the pharmacy on a monthly basis. The pharmacies want to process the refills for 90-days, but we have to have them changed to 30-day supplies because insurance won't cover the larger refill volume. I believe that Online prescription refills of 90-day supplies may be permitted, but I am not comfortable with the accuracy and safety of Online mailed medications. \* Higher annual maximum benefit for dental expenses to allow for the cost associated with major necessary dental procedures such as Wisdom Teeth Extraction or Root Canals that only occur rarely but push the individual beyond their benefit maximum in the years when they do occur. Procedures that are determined to be necessary for medical/health reasons (non-cosmetic) should be fully covered.
- Two-party and Family coverage prices
- Ketamine clinics for treatment of PTSD, depression, etc. This is a newer field, backed by evidence-based, scientific, and peer reviewed studies. The efficacy of ketamine treatment for these diseases or conditions have been far better than life-long consumption of SSRIs and other conventional medications.
- Premium costs and appeal process.
- I am concerned about recent loss of medical coverage (thru district) after retirement.

- A more options to choose plans.
- Our vision plan has dropped in quality in terms of product choices. It is as if we continued to pay the same amount, but the district decided to go for the cheapest option.
- Please DO NOT change the medical nor dental plan. The only thing I would like for dental is to have braces covered for adults if possible.
- Delta PPO for dental
- Dental plan does not offer much coverage.
- Add an HSA
- I would have more transparency about who to call for specialized needs, including gender affirming care and psychological/psychiatric care. Trying to find information or get in touch with a specialist is a daunting process. You can get a list of specialists who presumably take your insurance, but it's difficult to fully narrow down the list and you have to make tons of calls to find one that actually takes your insurance (many times, those on the list don't return calls/provide the care you need/take your insurance even though the list says they do). It's a mess.
- I feel extremely grateful for the benefits that I receive. Thank you!
- better prescription coverage (specialized medicine such as biologics), better physical therapy coverage.
- Just the copay on the ER visits is high. I am the bread winner in my family and there three of us and I pay for each one. Just this year I need two visits. I would have gone three times, but the wait was going to be better to wait the next day and visit the urgent care, so I did. Thank God I had old med that work for that night.
- Lower deductible on ER and MRI
- Honor the policy I was hired under. Full coverage until age 70. NOT supplemental Medicare.
- Surely there is a better dental plan out there with greater coverage. The annual coverage amount with the PPO plan is not enough.
- No deductibles, and no penalties for having multiple plans (spouse working in different district)
- Preferred delta dental PPO. Need better vision and animal insurance.
- The dental benefits are terrible. The minimum that is covers is not the suggested plan of treatment.
- I wish I could afford PPO benefits for my family. HMO benefits should allow members to schedule appointments with doctors from different medical groups. Why do we have to limit our choices to the doctors of the same group? If you tried to schedule an appointment with a great doctor from a medical group, they inform you the next available appointment is in 4 or 5 months forcing you to schedule an appointment with whoever is available because you cannot go to another medical group unless I change my primary doctor. That would mean spending more time on the phone again. Not effective neither efficient.
- Make it easier to find psychological services.

- Rehabilitation needs, such as occupational or physical therapy, should not be contracted out to a third party. Preventative healthcare should be accessible without having to navigate through third parties to screen whether therapy is necessary for the individual. In the long run, preventative measures would lessen the need for extensive severe medical care.
- Being able to order drugs for three months. I am a narcoleptic, and I must renew this drug each month . It would be easier for me If I could get a 3-month supply, so I do not have problem when I travel. I will always need this drug to be awake. Legally, I cannot drive without this, so I must not drive many days before I go on a trip so I will have enough medicine when I am out of town.
- Would like to see Delta Dental PPO option; or other dental PPO option that includes orthodontics.
- I'd like to make sure we can have good insurance after retirement.
- Coverage for preventative measures, such as supplements and vitamins. Don't cap me off at \$2k for dental. I must limit the work I get done and need much more.
- I'm a new hire and have not used my benefit yet.
- I would like better ortho coverage.
- Higher limit greater dental coverage
- Please let my disabled adult child go back on the benefits as I had for years you do a wonderful job with providing the benefits thank you very much but it's very difficult not having any coverage for my adult disabled son
- I would change the ER co-pay.
- Having larger amount of coverage for orthodontics services.
- Offer high deductible plans and offer/contribute to employee's HSA.
- This is of a criticism of the insurance as a system. Specifically, dental procedures and what is covered vs what is even offered.
- Dental PPO to include orthodontia or be able to decline dental coverage.
- lower our co-pays but do not lower the benefits.
- Adding Ortho options
- More dental offices are available to accept the PPO plan and more coverage for crowns and bridges. These are still costly expenses even with PPO dental insurance coverage.
- Add orthodontist coverage.
- weight loss treatments
- naturopathic care
- Adding vision care
- I would like to be part of the CalPERS medical plan so that health benefits extend into retirement.
- Lasik coverage would be great as well as lifetime benefits.
- Please shop for expanded/low-cost dental plans and prescriptions.
- Get rid of the MetLife! Previous dental plan was fine. MetLife is terrible.
- Have dental with ortho available.
- Get rid of Navitus. Go back to \$4000 allowance for dental. Keep this confidential.
- more prescription coverage for specialty medications

- Higher deductible. Has good coverage but wish it had more. Since the pandemic, everything has gone up. Very hard to keep up.
- I would prefer pharmacy insurance that covered both brand name and generic options. My wife has a medical condition, and her primary prefers a name brand medication that Navitus Pharmacy Services apparently will not cover, or so I was told at my last visit to our pharmacy.
- To be able to access alternative medical products and services.
- No changes please. The plans are perfect for my situation. Thank you.
- More providers available in my area; however, it is not your fault. You cannot manage that, as it is outside your scope.
- There used to be no monthly payment for Kaiser HMO until last year. I wish to go back to that plan, employee not paying for the premium for Kaiser HMO.
- To be treated like all employees at RSCCD!!!!
- Add orthodontics.
- Not paying height monthly insurance plan
- Lower prices on dental treatment
- Affordable health care insurance
- Add more coverage to cover braces to our plan.
- More brand medicine available
- Adding a way to purchase a supplemental long-term care policy.
- Lower the Dental Copays & extra costs.
- Lower prices for PPO plans and family coverage.
- Supportive of preventative care.
- Cover some or all of crown costs with the dental plan.
- Dental could be less expensive, also add orthodontics coverage! Vision insurance could be improved.
- Restore the promise made to retirees and truly look for medical and dental plans that benefit all of us not just a few.
- Overall, I am happy with my coverage for my family and me. Dental seems too always be expensive but manageable. :-)
- For Medical (Kaiser) to be able to see a doctor sooner than later. For Dental: better coverage less cost in co-pays.
- Lower deductibles, lower out-of-pocket maximums, more preventative care coverage such as physical therapy, acupuncture, and chiropractic care. Currently physical therapy and chiropractic care is covered only if it is "medically necessary." The organization that reviews whether care is medically necessary has approved for very little to no coverage. I'd like to see our coverage provide 36 visits per calendar year for physical therapy with more visits covered if medically necessary. Hinge Health does not replace physical therapy treatments that requires frequent visits.
- I would like to go back with Delta Dental PPO. I hope that the district will offer this again. I do like Met Life PPO, yet I liked Delta Dental PPO much better when it was offered. Overall, I am very thankful for the benefits we receive, and I am happy with them.
- Remove the requirement of having to select dental insurance. I don't need it but have to pay \$550/year for it. Thank you.

- The FSA process is incredibly difficult. They make you jump through some many hoops to authorize claims, even when receipts are sent. We have spoken with other colleagues outside the district who use other carriers for FSA and they don't seem to have the level of problems we do. Dental coverage is very limited with both MetLife and Delta. We have the highest plan, yet still have to spend thousands of dollars per year on things that aren't covered.
- Provide affordable PPO for family coverage. It's ridiculous that for a family one needs to pay over \$500 per month for PPO.
- Please do not change from Anthem Blue Cross.
- Coverage for Psychology, Chiropractic, and Holistic practices without having to first explain everything to your Primary and hope for a referral.
- More orthodontics coverage.
- The dental plans deductible is expensive. Especial when you need a filling or necessary work done.
- Those without spouses could assign an adult living in the household the role of other and cover that individual.
- Raise the PPO Dental Annual Max. It's been sitting at \$2,000 too long.
- I would like to have more provider options with Delta HMO dental plan.
- 90-day medication instead of 30-day supply.
- Delta PPO for dental plan.
- Add massage therapy benefits. Long hours of sitting and in front of a computer lead to issues with hips, neck, hands, etc.
- I would add a hearing aid rider to our medical insurance. More and more employees need this benefit.
- I'm happy with the current coverage and benefit that the District is offering. I hope it will stay like this in the future as well.
- That the lifesaving prescriptions prescribed by my doctor, do not get denied. And the ability to speak to someone that can listen to me and/or my doctor as to why we are asking for the medication prescribed to be covered.
- More choices of doctors for HMO's
- Cosmetic dental
- I am forcing to buy dental insurance for my family even though we don't need it. We have PPO dental insurance through my husband's company for a fraction of the cost of our district HMO dental. I wish I have an option to pick which coverage I need ( medical coverage and/or dental) without being forced into buy HMO dental insurance.
- **SINCE WE WORK FOR THE STATE, WE SHOULD HAVE OUR MEDICAL AND DENTAL PLANS COVERED ALL!!!**
- no co-pay and lower deductibles
- Wish it covered braces. That was a big expense for the kid... but I think the rest has been good and copays are very reasonable. No complaints
- Add orthodontics coverage for dental plan.
- I wish dental insurance would cover ARESTIN antibiotic.
- I chose to decline health coverage and receive the subsidy.
- Better formulary and coverage until we are 70 once we retire, like it used to be.

- Continued coverage for a longer period of time (age)
- Make PPO plan more affordable for Families of 3 or more.
- With Kaiser, it takes a while to get an appointment with a specialized doctor after I receive a referral. Other than that, it's all good. Thank you!
- Better coverage for medications.
- Everything is excellent to me.
- I love that we can have HMO medical and PPO dental. I hope that continues to be an option. Please don't take that option away.
- Return to Delta Dental
- It is impossible to get any type of care with an HMO. I have not been able to see a doctor when needed and an MRI can take up to 6-8 weeks to get. I would like to have a PPO without it costing so much out of pocket. HMOs post pandemic are not health care.
- Add more dental PPO options.
- Dental PPO should be the same price if we have medical HMO or medical PPO.
- Orthodontic benefits for PPO
- Vision insurance
- Better dental coverage.
- More coverage for dental insurance. Availability of a pediatric urgent care (not covered currently through my medical group's HMO).
- Please change the premiums for the PPO. Please add orthodontist coverage and increase dental to \$3000+. We cover hearing aids and other benefits for the over 50+ crowd but do not cover the needs of those with families and children. Please address this.
- More coverage for dental would be helpful as costs have skyrocketed.
- I would add additional coverage to the dental plan.
- If a medical provider/facility is listed as 'In Network' all fees should be associated as being within the network. Although we are using 'In Network' physicians, someone as part of the treatment is not in the network and additional fees are charged.
- I would like the dental plan to be lower in the monthly cost that we pay out of payroll.
- Return the benefits to the retirees.
- Improved/increased dental coverage, decreased copay for ER visit.
- Better Dental Coverage or back to the coverage we had before Delta and MetLife.
- I would like the dental coverage for the MetLife PPO to be increased; this would allow families to make plan better for the type of dental work that is needed.
- I cannot think of anything pertaining to medical or dental at this time. I would like to say I am thankful for the plans we have, as well as the Hyatt Legal Plan, the American Fidelity Plans, and for the pet insurance option.
- I would love to be able to add my niece (18) to my plan. She is under my care now.
- I'm happy with my HMO. Would like to see a lesser copay for hospitalization, ER visits and CT Scans and MRIs
- Find a different company outside of Anthem BlueCross. More MD availability is a must.
- more affordable dentist. I have so many problems with my mouth and can't afford it.
- More transparency about year of year changes in benefits when keeping the same plan.
- Dental should cover more. I haven't really had to pay a lot for me, but my husband has more problems. Vision should be paid as well.
- Have a better selection of providers.

- I no longer trust the district operates in the best interest of employees. They left CSEA retirees without insurance benefits that they gave up raises to obtain.
- Higher cap on dental benefits. For two years, I've had to postpone getting dental work (crowns) because I had reached my limit. Costs have increased significantly but our dental plan has remained the same. Please review. Also, if you could please consider covering the cost of our vision plans, that would be helpful too. Thanks!
- Higher dental PPO maximum and stronger formulary. When I started in RSCCD, the maximum for dental PPO was 5K, but we only have 2K now even though costs have increased.
- Health coverage is good, but Dental coverage needs improvement.
- For the dental plan to cover orthodontist services
- I would not change anything I am happy with the converge.
- Bad changes to retiree benefits.
- Lower deductibles for dental work and higher max allowed annually.
- Better orthodontic coverage
- Better PPO dental coverage.
- Increase dental coverage per year.
- Please add orthodontic coverage to the MetLife Dental PPO plan.
- reduce copay and have insurance pay more.
- I would like to access a more affordable PPO plan. I have a chronic illness and I need to see a specialist. I must get the referral approved every time and I have lost access to some doctors because of my network. An affordable PPO would resolve this issue.
- A broader network of providers for the Dental HMO.
- Homeopathic options such as massage, acupuncture without a referral (like chiropractic).
- Lower copays for common dental needs (fillings, crowns, etc.)
- Include orthodontic care on PPO Dental Plan
- The cost of the PPO penalizes employees and their families who have medical conditions that need the care of specialists. Because I have their autoimmune disorders -- diseases that primarily affect women of color -- I need to be able to self-refer to specialists. It is frustrating that I must pay substantially more money for a PPO to manage conditions with which I was born.
- Increase benefits to be able to afford PPO medical.
- Go back to Delta Dental plans.
- I would like an app or a summarized list of my health plan choices with contact numbers and additional resources. It would be great to learn things that are benefits in a workshop during Flex Week.
- Dental: 4 cleaning maintenance/year - preventative Medical/Prescription: allow all prescriptions to be funded especially if primary care physician has prescribed - insurance should be able to override doctor's orders.
- Satisfied with Health benefits, thank you!
- Vision coverage at Kaiser Permanente
- Orthodontia coverage. I've also noticed less and less medical practices accepting BlueCross BlueShield, including my primary care doctor who fired me as a patient when the insurance dropped her.
- Better coverage for non-generic prescriptions and better dental coverage overall