



EAA

2025 OPEN ENROLLMENT

Open Enrollment is from October 1 - October 31, 2024 and is your opportunity to enroll in the enhanced dental plans that are negotiated and offered by your union, EAA! Changes made during Open Enrollment will be effective January 1, 2025.

EAA OFFERS THREE COMPREHENSIVE DENTAL PLANS (IN LIEU OF THE CITY OF LA PLANS) THAT INCLUDE ACCIDENT BENEFITS!

All EAA dental plans include the EXCLUSIVE MetLife Accident plan NOT available in any of the City of LA plans.

2025 OPEN ENROLLMENT - DENTAL HIGHLIGHTS

1. United Concordia (UCCI) Dental HMO:

- a. No deductibles and copays vary based on the procedure
- b. Includes adult and child orthodontia!
- c. No change to benefits, increase to semi-monthly deductions

2. United Concordia (UCCI) Basic PPO:

- a. \$50 single/\$150 family annual deductible
- b. \$1,500 annual maximum
- c. \$1,000 orthodontia lifetime maximum for children up to age 19
- d. No changes to benefits or semi-monthly deductions

3. United Concordia (UCCI) High Option PPO:

- a. \$25 single/\$75 family annual deductible
- b. \$2,000 in-network annual maximum (**\$500 higher benefit than the City of LA Delta Dental plan***)
- c. \$2,000 in-network orthodontia lifetime maximum for children up to age 19 (**higher benefit than the City of LA Delta Dental plan***)
- d. No changes to benefits or semi-monthly deductions

**City of LA Delta Dental plan benefits based off 1/1/25 information available on the LA Well website*

2025 MONTHLY COSTS - EFFECTIVE JANUARY 1ST, 2025

| Tier | Total Monthly Premium* | City Pays | Semi-Monthly Member Deductions |
|------------------------|------------------------|-----------|--------------------------------|
| HMO | | | |
| Member | \$53.97 | \$42.93 | \$5.53 |
| Member +1 | \$53.97 | \$42.93 | \$5.53 |
| Family | \$53.97 | \$42.93 | \$5.53 |
| Basic PPO | | | |
| Member | \$70.62 | \$42.93 | \$13.85 |
| Member +1 | \$123.98 | \$42.93 | \$40.53 |
| Family | \$199.10 | \$42.93 | \$78.09 |
| High Option PPO | | | |
| Member | \$86.53 | \$42.93 | \$21.80 |
| Member +1 | \$153.81 | \$42.93 | \$55.44 |
| Family | \$248.55 | \$42.93 | \$102.81 |

**Total Monthly Premium includes all coverage: UCCI Dental and MetLife Accident rates.*

MetLife Voluntary Life Plan

MetLife Voluntary Life plan gives members the opportunity to enroll in up to \$100,000 of Life insurance coverage! Additionally, members can also enroll their spouse in \$20,000 of Life insurance coverage, and their child(ren) in \$5,000 of Life insurance coverage!

Open Enrollment will be the only opportunity for enrollment with guaranteed coverage up to \$100,000; no medical questions or exam required!

MetLife Voluntary Legal Plan

The MetLife Voluntary Legal plan gives members and their eligible dependents access to additional benefits not included in the MetLife Basic Legal plan, such as:

- Consumer Protection
- Landlord/Tenant Matters
- Tax Matters
- 4-hours of Service for Non-Covered Matters
- Debt-Related Matters
- Real Estate Matters
- Divorce Contested

EAA BENEFITS SUMMARY

UNITED CONCORDIA DENTAL PLANS

| Benefit | DHMO | Basic PPO In-Network/ Out-of-Network | High Option PPO In-Network/ Out-of-Network |
|-------------------------------------|--------------|--|--|
| Calendar Year Deductible* | N/A | \$50 Single / \$150 Family | \$25 Single / \$75 Family |
| Calendar Year Maximum | N/A | \$1,500 (Excludes Orthodontia) | \$2,000 / \$1,500 (Excludes Orthodontia) |
| Class I - Preventive | Copay Varies | 100% / 100% | 100% / 80% |
| Class II - Basic | Copay Varies | 90% / 80% | 100% / 80% |
| Class III - Major | Copay Varies | 60% / 50% | 80% / 50% |
| Orthodontia (Children up to Age 19) | Copay Varies | 50% / 50% | 50% / 50% |
| Orthodontia Lifetime Maximum | N/A | \$1,000 | \$2,000 / \$1,500 |

*Excludes Class I & Orthodontics

METLIFE ACCIDENT PLAN

- Exclusive benefit included in all EAA dental plans
 - Lump-sum benefit for covered injuries and services resulting from an accident
 - Unlimited benefits for covered services resulting from an accident which include, but are not limited to, fractures, hospital admissions, ER visits, and more!

EAA METLIFE ACCIDENT PLAN

Examples of Covered Injuries/Services

| Coverage | Benefit |
|-------------------------|----------------|
| Fractures (Open/Closed) | Up to \$8,000 |
| Burns | Up to \$10,000 |
| Concussion | \$250 |
| Laceration | Up to \$400 |
| Broken Tooth | Up to \$200 |
| Eye Injury | \$300 |
| Ground/Air Ambulance | \$300/\$1,000 |
| Emergency Care | Up to \$150 |
| Therapy Services | Up to \$75 |
| Medical Appliance | Up to \$750 |
| Surgery | Up to \$1,500 |

ENROLLMENT INFORMATION

If you currently belong to one of the City Dental Plans and wish to enroll in one of the EAA plans:

1. Contact benefits@eaaunion.org at the EAA office to confirm your eligibility
2. Complete your online enrollment by October 31, 2024 by visiting www.eaaunionbenefits.org
 - To register, please use your SSN or Employee ID (EID). **If you experience any issues using your SSN, please enter your EID using the following format to ensure the ID is 9 digits in length.** If your EID is 12345, it should be entered as 000-01-2345.
3. Contact Teresa Rubio at (213) 972-8179 or per.empbenefits@lacity.org between October 1 and October 31, 2024 to cancel your City of LA Delta Dental coverage.

Please note: The benefits listed above are a summary only. For a complete list of benefits, exclusions, and limitations, please view the complete schedule of benefits.

Questions? Contact the EAA Benefits Center at 888-610-1088 or email benefits@eaaunion.org for more information.