



EMPLOYEE  
**BENEFITS GUIDE**

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2026



## **WELCOME**

Welcome to Kern Medical! This guide is designed to provide you with an overview of your benefit options. Your benefits are an important part of your overall compensation at Kern Medical. We are pleased to offer a comprehensive array of quality benefits to protect your health, your family, and your way of life. Please carefully review and consider the information provided. Should you have any questions, please contact Human Resources at 661-862-7564.

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## EMPLOYEE HEALTH BENEFIT PLANS

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## Health Benefits Administration

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Kern Medical has partnered with the County of Kern to provide a robust employee benefit package. While Kern Medical employees are not County Employees, we are able to take advantage of their exclusive benefit offering.

### **Health Benefits Administered by:**

Kern County Health Benefits  
1115 Truxtun Ave, 1st Floor  
Bakersfield, CA 93301  
(661) 868-3182

Email:

[healthbenefits@kerncounty.com](mailto:healthbenefits@kerncounty.com)

Website:

[www.kerncountyhealthbenefits.com](http://www.kerncountyhealthbenefits.com)

## How to enroll or make changes

To enroll into a health plan, visit [www.kerncountyhealthbenefits.com](http://www.kerncountyhealthbenefits.com).

- Select the option on the left in the middle of the screen that says “New Hire Benefits Information”.
- Under the enrollment form section, select the link labeled “New Hire Health Plan Enrollment Packet”
- Follow the prompts on the screen.
- If you are declining benefits due to having other employer group coverage, select the link labeled "Declination of Coverage Packet"

\*DON'T FORGET TO ATTACH ELECTRONIC COPIES OF SUPPORTING DOCUMENTATION

In order to enroll into the health plan, you will need to have the following information:

- Your Employee ID number
- Social security numbers & dates of birth for all eligible dependents
- Electronic copies (e.g. PDF or JPEG file) of supporting documents needed to enroll eligible dependents (e.g. marriage certificate, birth certificate(s), guardianship document(s), adoption documents)
- County Department Name on enrollment form will be "Kern Medical Hosp Auth 9460"

**IMPORTANT:** Your completed enrollment or declination form and ALL required documents must be submitted on [www.kerncountyhealthbenefits.com](http://www.kerncountyhealthbenefits.com) by the due date you received during benefits orientation. Benefits are effective the 1st day of the bi-weekly pay period following a month of continuous service.



## How to make mid-year changes to benefits

Typically, employees may only make changes to benefit elections during open enrollment each year. However, if you experience a mid-year qualifying event, you may add or decrease coverage at a time other than open enrollment. Qualifying events include:

- Marriage
- Divorce
- Birth of a newborn
- Loss of coverage from another employer plan
- Coverage for a dependent ceases under Medi-Cal or Healthy Families (If the loss was involuntary)
- Death of a dependent
- Coverage beginning under another employer plan

If you need to make a change to your health benefits due to a qualifying life event, come to HR to complete a benefit change form. You will need to provide the appropriate documents for the event (for example: commemorative birth certificate for a newborn baby or a marriage certificate to add on a spouse).

If you want to change plans, you can make changes during open enrollment. Open Enrollment occurs in October-November every year. Changes made during open enrollment will be effective January 1st.

**IMPORTANT:** You must submit your completed forms and ALL required documents within 30 days of your permitting life event. The only exception is 60 days for adding a newborn.



**MEDICAL HEALTH PLANS FOR ACTIVE EMPLOYEES**

**SUMMARY OF BENEFITS – COMPARISON CHART**



PLAN YEAR <b>2026</b>	KERN LEGACY <b>SHARE SELECT</b> 1-855-308-5547		KERN LEGACY <b>NETWORK PLUS</b> 1-855-308-5547	
	Select Benefit with Deductible	EPO Benefit Tier	Plus Benefit Tier	
Type of Plan/Benefit Level				
Who Directs Your Care	Kern Health Care Network Provider	Kern Health Care Network Provider		
Annual Deductible	\$2,000 member \$4,000 family (non-embedded)	\$0	\$250 member \$500 family	
Calendar Year Out-of-Pocket Max (Once the maximum is paid by the member, the plan pays a higher amount - up to 100% coverage)	Combined Medical/Pharmacy: \$6,000/member \$12,000/family	Medical: \$1,000/member; \$2,000/family Pharmacy: \$1,600/member; \$3,200/family	Medical \$4,000/member 8,000/family	
Primary Physician Visit	\$10 copay <sup>1</sup>	\$10 copay	n/a	
Specialist Physician Visits	\$20 copay <sup>1</sup>	\$20 copay	20% coinsurance <sup>1</sup>	
Behavioral Health Visits	\$10 copay <sup>1</sup>	\$10 copay	n/a	
Well Baby Care (up to age 2)	\$0 copay (deductible waived)	\$0 copay	n/a	
Adult Periodic Health Evals <sup>2</sup>	\$0 copay (deductible waived)	\$0 copay	n/a	
Outpatient Surgery/ Procedure	\$0 copay Kern Medical/Adventist Health <sup>1</sup> ; \$50 copay surgery center <sup>1</sup> ; \$150 copay outlying hospitals <sup>1</sup>	\$0 copay Kern Medical/Adventist Health; \$50 copay surgery center; \$150 copay outlying hospital	20% coinsurance <sup>1</sup>	
Inpatient Hospitalization	\$100 copay/day, up to \$500 per admission <sup>4</sup> <sup>1</sup>	\$0 copay at Kern Medical/ Adventist Health <sup>4</sup> \$100 copay/day, up to \$500 per admission at outlying Hospitals <sup>3</sup> 20% coinsurance at Mercy SW for deliveries only <sup>1</sup> <sup>3</sup>		
Emergency Room	\$150 copay (waived if admitted) <sup>1</sup>	\$150 copay (waived if admitted)		
Urgent Care	\$15 copay <sup>1</sup>	\$15 copay	Not a Plus Benefit	
Mammogram & Pap Smear	\$0 copay (deductible waived)	\$0 copay	20% coinsurance <sup>1</sup>	
Immunizations (Office visit copay applies)	\$0 copay (deductible waived)	\$0 copay	20% coinsurance <sup>1</sup>	
Diagnostic Lab/X-Ray	\$0 copay <sup>1</sup>	\$0 copay	20% coinsurance <sup>1</sup>	
Imaging (CAT/PET scans/MRI)	\$25 copay at Kern Medical <sup>1</sup> \$50 copay at other contracted facilities <sup>1</sup>	\$25 copay	20% coinsurance <sup>1</sup>	
Physical, Speech and Occupational Therapy	\$0 copay <sup>1</sup>	\$0 copay (max 60 visits/yr combined)	20% coinsurance <sup>1</sup> (max 60 visits/yr combined)	
Prescription Coverage	HDHP* Preventive Drugs: \$0 (deductible waived)  CVS, Kroger & Costco Pharmacies or CVS Mail Order (up to 90-day) <sup>1</sup> : Tier 1: \$0   Tier 2: \$25   Tier 3: \$50  Retail Pharmacy (Up to 30-day) <sup>1</sup> : Tier 1: \$5   Tier 2: \$50   Tier 3: \$90  Specialty Medications <sup>1</sup> : Tier 1: \$50   Tier 2: \$90   Tier 3: \$120	CVS, Kroger & Costco Pharmacies or CVS Mail Order (up to 90-day): Tier 1: \$0   Tier 2: \$15   Tier 3: \$35  Retail Pharmacy (Up to 30-day): Tier 1: \$5   Tier 2: \$30   Tier 3: \$60		

KERN LEGACY <b>MAX CHOICE</b> 1-855-537-6767	KERN LEGACY <b>CLASSIC CHOICE</b> 1-855-537-6767		KAISER PERMANENTE 1-800-464-4000
	Exclusive Provider Organization	In-Network	
Anthem Blue Cross Provider	Anthem Blue Cross Provider	Member (some services require prior authorization)	Kaiser Permanente Providers
\$250 member \$500 family	\$0	\$200 member \$400 family (2 mbrs)	\$0
Medical: \$5,000/member; \$10,000/ family Pharmacy: \$1,000/member; \$3,000/ family	Medical: \$1,000/member; \$3,000/family Pharmacy: \$5,600/member; \$10,200/family	Medical: \$2,000/member; \$4,000/ family Pharmacy: \$5,600/member; \$10,200/family	<b>Combined Medical/Pharmacy:</b> \$1,500/member; \$3,000/ family
\$10 copay <sup>1</sup>	\$15 copay	70% coverage R&C <sup>1</sup>	\$10 copay
20% coinsurance <sup>1</sup> \$20 copay Kern Medical <sup>1</sup>	\$25 copay	70% coverage R&C <sup>1</sup>	\$10 copay
\$10 copay <sup>1</sup>	\$15 copay	70% coverage R&C <sup>1</sup>	\$10 copay
\$0 copay (deductible waived)	\$0 copay	70% coverage R&C <sup>1</sup>	\$0 copay
\$0 copay (deductible waived)	\$0 copay	Not Covered	\$0 copay
20% coinsurance <sup>1</sup> \$50 copay Kern Medical <sup>1</sup>	\$0 copay Kern Medical \$100 copay	70% coverage R&C <sup>1</sup>	\$10 copay per procedure
20% coinsurance <sup>1</sup> \$100 copay/day at Kern Medical (up to \$2500 per admission) <sup>1</sup>	\$0 copay Kern Medical \$150 copay/day, up to \$750	70% coverage R&C <sup>1</sup>	\$250 copay per admission
\$150 copay <sup>1</sup> (waived if admitted)	\$75 copay (waived if admitted)		\$75 copay (waived if admitted)
\$15 copay <sup>1</sup>	\$15 copay	70% coverage R&C <sup>1</sup>	\$10 copay
\$0 copay (deductible waived)	\$0 copay	Not Covered	\$0 copay
\$0 copay (deductible waived)	\$0 copay	70% coverage R&C <sup>1</sup>	\$0 copay
\$0 copay <sup>1</sup>	\$0 copay	70% coverage R&C <sup>1</sup>	\$0 copay
20% coinsurance <sup>1</sup>	\$0 copay	70% coverage R&C <sup>1</sup>	\$0 copay
20% coinsurance <sup>1</sup> (max 60 visits/year combined)	\$0 copay (max. 60 visits/year combined)	70% coverage R&C <sup>1</sup> (max. 60 visits/year combined)	\$10 copay
After \$100 prescription deductible: CVS, Kroger & Costco Pharmacies or CVS Mail Order (up to 90-day): Tier 1: \$0   Tier 2: \$25   Tier 3: \$50 <sup>5</sup>  Retail Pharmacy (Up to 30-day): Tier 1: \$5   Tier 2: \$50   Tier 3: \$90 <sup>5</sup>  Specialty Medications: Tier 1: \$50   Tier 2: \$90   Tier 3: \$120	CVS, Kroger & Costco Pharmacies or CVS Mail Order (up to 90-day): Tier 1: \$0   Tier 2: \$15   Tier 3: \$30 <sup>5</sup>  Retail Pharmacy (Up to 30-day): Tier 1: \$5   Tier 2: \$15   Tier 3: \$30 <sup>5</sup>	Up to 100-day: Generic: \$5 Brand: \$15  Up to 100-day: Generic: \$5 Brand: \$15	

<sup>1</sup> After deductible has been met. <sup>2</sup> Over 2 years old <sup>3</sup> Requires prior Plan approval from Plan  
<sup>4</sup> Kern Medical & Adventist Health are the ONLY in-network EPO hospitals within Kern County, except for certain outlying hospitals with prior Plan approval. <sup>5</sup> If no generic available. Higher cost if generic is available. \* HDHP: High-Deductible Health Plan

This is a summary of the most frequently asked-about benefits. This chart does not explain benefits, out of pocket maximums, exclusion or limitations, nor does it list all benefits. For a complete explanation, please refer to the County of Kern Plan Document describing the Kern Legacy Health Plans.

# Dental Plan Comparison Summary

PLAN YEAR 2026

	LIBERTY DENTAL INDEPENDENCE PPO		LIBERTY DENTAL COBALT PLUS DHMO	
COVERED SERVICES	IN-NETWORK PLAN PAYS	OUT-OF- NETWORK PLAN PAYS	IN-NETWORK PLAN PAYS	OUT-OF-NETWORK PLAN PAYS
<b>Annual Maximum (per person)</b>	\$2,500.00		None	N/A
<b>Deductible (per calendar year)</b>				
Individual	\$ 50.00		\$0.00	N/A
Family	\$150.00		\$0.00	N/A
<b>Preventive Services</b>				
<i>Prophylaxis</i>	100% <sup>1,4</sup>	70% <sup>2,4</sup>	100% <sup>3</sup>	No benefit
<i>X-Rays</i>	100% <sup>1</sup>	70% <sup>2</sup>	100% <sup>3</sup>	
<b>Other Services - Restorative</b> <i>(Amalgam, plastic, acrylic filling of cavities)</i>	90% <sup>1</sup>	70% <sup>2</sup>	100% <sup>3</sup>	No benefit
<b>Endodontic</b> <i>(Pulpal therapy and root canals)</i>	90% <sup>1</sup>	70% <sup>2</sup>	100% <sup>3</sup>	No benefit
<b>Periodontics</b> <i>(Treatment of gums and bones supporting teeth)</i>	90% <sup>1</sup>	70% <sup>2</sup>	100% <sup>3</sup>	No benefit
<b>Prosthodontics</b> <i>(Partial and complete dentures)</i>	90% <sup>1</sup>	70% <sup>2</sup>	Patient pays: <sup>3</sup> \$55.00 - dentures \$25.00 - partial	No benefit
<b>Crowns</b>	90% <sup>1</sup>	70% <sup>2</sup>	Patient pays: <sup>3</sup> \$45.00 to \$90.00	No benefit
<b>Implants</b>	90% <sup>1</sup>	70% <sup>2</sup>	Consult Benefit Schedule	No benefit
<b>Orthodontia</b> <i>Adults and Children</i>	50% \$1,500 Lifetime Maximum	50% \$1,500 Lifetime Maximum	Contact LIBERTY Customer Service	No benefit

<sup>1</sup> Of negotiated/contracted fees.    <sup>2</sup> Of reasonable and customary charge.    <sup>3</sup> Procedure must be listed in the schedule of benefits to be covered at 100%. Many other services are offered with a specified co-payment.    <sup>4</sup> Deductible waived.

This document provides a summary of the plan's benefits only. For a complete description of benefits, limitations and exclusions, refer to the plan's documents.



Your VSP Vision Benefits Summary  
 COUNTY OF KERN and VSP provide you with an affordable vision plan.

**PROVIDER NETWORK:**

VSP Signature

**EFFECTIVE DATE:**

01/01/2026



BENEFIT	DESCRIPTION	COPAY	FREQUENCY
<b>Your Coverage with a VSP Provider</b>			
<b>WELLVISION EXAM</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Routine retinal screening</li> </ul>	\$20 Up to \$39	Every 12 months
<b>ESSENTIAL MEDICAL EYE CARE</b>	<ul style="list-style-type: none"> <li>Retinal imaging for members with diabetes covered-in-full</li> <li>Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more.</li> <li>Coordination with your medical coverage may apply. Ask your VSP network doctor for details.</li> </ul>	\$20 per exam	Available as needed
<b>PRESCRIPTION GLASSES</b>		<b>\$20</b>	See frame and lenses
<b>FRAME*</b>	<ul style="list-style-type: none"> <li>\$170 Featured Frame Brands allowance</li> <li>\$150 frame allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$80 Walmart/Sam's Club/Costco frame allowance</li> </ul>	Included in Prescription Glasses	Every 24 months
<b>LENSES</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> </ul>	Included in Prescription Glasses	Every 24 months
<b>LENS ENHANCEMENTS</b>	<ul style="list-style-type: none"> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Anti-glare coating</li> <li>Tints/Light-reactive lenses</li> <li>Impact-resistant lenses</li> <li>UV protection</li> <li>Average savings of 40% on other lens enhancements</li> </ul>	\$50 \$50 \$50 \$35 \$0 \$0 \$0	Every 24 months
<b>CONTACTS (INSTEAD OF GLASSES)</b>	<ul style="list-style-type: none"> <li>\$150 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> </ul>	Up to \$40	Every 24 months
<b>ADDITIONAL SAVINGS</b>	<p><b>Glasses and Sunglasses</b></p> <ul style="list-style-type: none"> <li>Discover all current eyewear offers and savings at <a href="http://vsp.com/offers">vsp.com/offers</a>.</li> <li>30% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from the same VSP provider on the same day as your WellVision Exam. Or get 20% savings from a VSP provider within 12 months of your last WellVision Exam.</li> </ul> <p><b>Laser Vision Correction</b></p> <ul style="list-style-type: none"> <li>Average of 15% off the regular price; discounts available at contracted facilities.</li> <li>After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor</li> </ul> <p><b>Exclusive Member Extras for VSP Members</b></p> <ul style="list-style-type: none"> <li>Contact lens rebates, lens satisfaction guarantees, and more offers at <a href="http://vsp.com/offers">vsp.com/offers</a>.</li> <li>Save up to 60% on digital hearing aids with TruHearing<sup>®</sup>. Visit <a href="http://vsp.com/offers/special-offers/hearing-aids">vsp.com/offers/special-offers/hearing-aids</a> for details.</li> <li>Enjoy everyday savings on health, wellness, and more with VSP Simple Values.</li> </ul>		
<b>COVERAGE WITH AN OUT-OF-NETWORK PROVIDER</b>			
With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to <a href="http://vsp.com">vsp.com</a> to find an in-network provider. Your plan provides the following out-of-network reimbursements:			
Exam .....	up to \$35	Lined Bifocal Lenses .....	up to \$40
Frame .....	up to \$50	Lined Trifocal Lenses .....	up to \$50
Single Vision Lenses .....	up to \$25	Progressive Lenses .....	up to \$50
		Contacts .....	up to \$100

\*Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.  
 †Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.  
 ‡Coverage with a retail chain may be different or not apply.  
 VSP guarantees member satisfaction from VSP providers only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business. TruHearing is not available directly from VSP in the states of California and Washington. Premier Edge is not available for some members in the state of Texas.  
 To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on [vsp.com](http://vsp.com).  
 ©2024 Vision Service Plan. All rights reserved.  
 VSP, Eyeconic, and WellVision Exam are registered trademarks, and VSP LightCare and VSP Premier Edge are trademarks of Vision Service Plan. Flexon and Dragon are registered trademarks of Marchon Eyewear, Inc. All other brands or marks are the property of their respective owners. 102898 VCCM  
 Classification: Restricted

# Active Employees Health Benefits

## BIWEEKLY PREMIUMS

### PLAN YEAR 2026

Health Benefits package for Active Employees includes medical/prescription, dental and vision coverage. Bi-weekly premiums listed below will go into effect on January 1, 2026, and will be reflected beginning on January 6, 2026 pay day.

	<b>KERN LEGACY SHARE SELECT</b>		<b>KERN LEGACY NETWORK PLUS</b>		<b>KERN LEGACY MAX CHOICE</b>		<b>KERN LEGACY CLASSIC CHOICE</b>		<b>KAISER PERMANENTE</b>	
	Uses Kern Medical and Adventist Health Bakersfield hospital and County-owned, Kern Health Care Network providers and contracted facilities.		Uses Kern Medical and Adventist Health Bakersfield hospital and County-owned, Kern Health Care Network providers for both EPO and Plus.		Uses Anthem Blue Cross contracted providers and facilities.		Uses Anthem Blue Cross contracted providers and facilities.		Uses Kaiser Permanente contracted physicians and facilities including Adventist Health Bakersfield.	
	DHMO Dental	PPO Dental	DHMO Dental	PPO Dental	DHMO Dental	PPO Dental	DHMO Dental	PPO Dental	DHMO Dental	PPO Dental
	Vision included		Vision included		Vision included		Vision included		Vision included	
BI-WEEKLY PREMIUM		BI-WEEKLY PREMIUM		BI-WEEKLY PREMIUM		BI-WEEKLY PREMIUM		BI-WEEKLY PREMIUM		
<b>Employee only</b>										
BIWEEKLY	\$ 0	\$ 0	\$ 49	\$ 52	\$ 67	\$ 70	\$121	\$124	\$ 76	\$ 79
ANNUAL	\$ 0	\$ 0	\$1,274	\$1,352	\$1,742	\$1,820	\$3,146	\$3,224	\$1,976	\$2,054
<b>Employee + 1</b>										
BIWEEKLY	\$ 21	\$ 25	\$ 94	\$ 98	\$120	\$124	\$219	\$223	\$146	\$150
ANNUAL	\$546	\$650	\$2,444	\$2,548	\$3,120	\$3,224	\$5,694	\$5,798	\$3,796	\$3,900
<b>Family</b>										
BIWEEKLY	\$ 51	\$ 56	\$139	\$144	\$173	\$178	\$316	\$321	\$207	\$212
ANNUAL	\$1,326	\$1,456	\$3,614	\$3,744	\$4,498	\$4,628	\$8,216	\$8,346	\$5,382	\$5,512

All Kern County's Self Insured health plans are part of Kern Legacy Health Plans, including Kern County's dental and vision plans:



**KERN LEGACY  
HEALTH PLANS**

- **KERN LEGACY SHARE SELECT** - High Deductible EPO Health Plan
- **KERN LEGACY NETWORK PLUS** - Exclusive Network Health Plan
- **KERN LEGACY MAX CHOICE** - Anthem Network EPO Health Plan
- **KERN LEGACY CLASSIC CHOICE** - Anthem Network POS Health Plan
- **LIBERTY DENTAL – INDEPENDENCE PPO**
- **VISION SERVICE PLAN - VSP**

## Benefit ID Cards

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You will receive your benefit cards 2-3 weeks after your effective date. Should you need to go to the doctor prior to receiving your card, you can contact the plan directly to get your identification number. Sample ID cards are available on the plans website, which includes the Networks information. You can call the appropriate plan to retrieve that information. Refer to the important contacts page at the end of this guide.



# VOLUNTARY BENEFITS

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Kern Medical has many additional benefits and programs available through voluntary payroll deduction. You will have 30 days from your hire date to enroll in voluntary benefits. Benefits will become active on the first day of the month following 30 days of employment.

## HOW TO ENROLL

Please contact our partner Chimienti & Associates to enroll in the following plans, or self-enroll by visiting <https://app.thebeaconselect.com/enroll/Login.aspx?Path=KernMedical>

- Flexible Spending Accounts
- Supplemental Life
- Hospital Confinement
- Critical Illness
- Cancer Plan
- Prepaid Legal
- Accident Insurance
- Pet Insurance

### US Chimienti & Associates

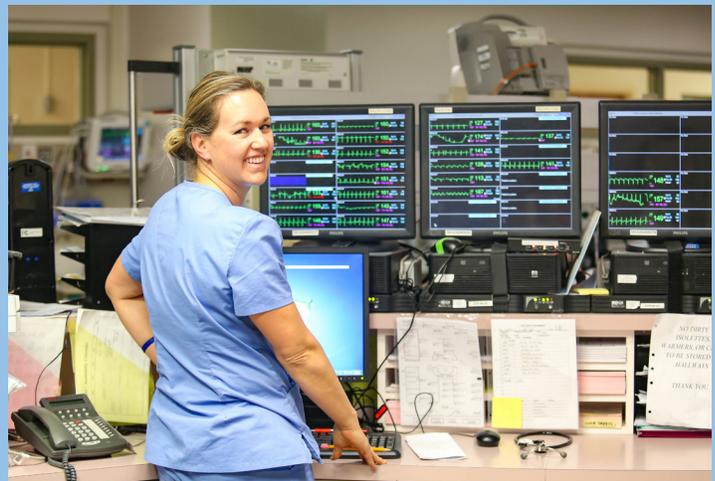
3400 W. Mineral King Ave Ste. B  
Visalia, CA 93291  
559-733-1670  
License #0C36832

Please contact our partner American Fidelity to enroll in the following plans.

- Short-term & Long-term Disability Insurance
- Health Savings Accounts

### Gaby Hemphill, District Manager

9000 Cameron Parkway  
Oklahoma City, OK 73114  
800-654-8489, Ext. 8661  
Gaby.Hemphill@americanfidelity.com  
License #OK57332



### **Section 125 Flexing Spending Accounts (FSA)**

Flexible spending accounts allows you to benefit from tax savings throughout the year by using pre-tax dollars to pay for out of pocket medical and child care expenses for you and your family. Eliminate filing claims and waiting for reimbursement by choosing an FSA debit card at no cost to you.

### **Health Savings Accounts (HSA) - American Fidelity**

Health savings accounts lets you set money aside before taxes for eligible medical expenses when you have a qualified High Deductible Health Plan (HDHP). HSAs can be used to pay for both current and future plan year expenses.

### **Short-term Disability - American Fidelity**

This program allows employees to protect up to 25 % of their gross monthly income in the event of a covered disability. There is a 14 day waiting period before you receive benefits. Depending on the plan you select, benefits will pay up to 12 or 24 months. As a newly hired employee, this plan offers you a one-time guarantee issue with no health history questions asked. Benefits are paid in addition to state disability. Coverage is available for employees only.

### **Long-term Disability - American Fidelity**

This program allows you to protect up to 60 % of your income in the event of a Long Term Disability. Benefits begin on the 91st or the 366th day (if you are enrolled in STD to avoid overlap in coverage) of disability. Benefit covers employees to normal social security retirement age. Rate does not increase in future years due to changes in age. As a newly hired employee, you will be offered a one-time guarantee issue underwriting offer with no medical questions asked.

### **Voluntary Group Term Life Insurance - Voya**

This life insurance plan provides the most benefit for premium dollar. Because this is a term plan, it does not build cash value. As a newly hired employee, you will be offered a guarantee issue with no medical questions asked. Coverage is available for employee and family.

### **Accident Plan – Voya**

This plan pays a lump sum benefit directly to you in the event of an on-or-off-the-job covered accident. This benefit is paid in addition to any other insurance coverage you may have. Coverage is available for employee and family.

### **Critical Illness Plan - Voya**

This plan pays a lump sum benefit directly to you following the diagnosis of a covered critical illness. Examples of covered illnesses include heart attack, invasive cancer, and a major organ transplant surgery. This plan also includes an additional diagnosis benefit

and a re-occurrence benefit. Coverage is available for the employee and family members. As a newly hired employee, there is a guarantee issue with no medical questions asked.

### **Universal Life Insurance - Trustmark**

This flexible permanent life insurance plan is portable. The plan provides you with a life insurance and a long-term care benefit with death benefit restoration. The long-term care benefit allows you to collect 4% of your death benefit for 25 months. As a newly hired employee, there is a guarantee issue with no medical questions asked.

### **Cancer Plan - Transamerica**

This program helps you with the out-of-pocket costs of treating cancer. Benefits include payment for cancer screening tests, hospital confinement, chemotherapy, and many of the other costs associated with cancer treatment. Pre-existing conditions apply to this program. Coverage is available for employee and family.

### **Hospital Confinement Plan – Voya**

This plan provides a daily benefit if you have a covered stay in the hospital, critical care unit or rehabilitation facility. The benefit amount determined is based on the type of facility. There is a guarantee issue for newly hired employees and family members.

### **Legal Guard Plan – LegalEase**

This plan offers employees a variety of legal services at a discounted price. Examples of covered legal services include estate planning, family law, and identity theft assistance. Prices are located on the enrollment page.

### **Pet Insurance - PetPartners**

Take the stress out of unexpected vet bills. Pet Insurance reimburses you for the cost of accidents and illnesses. Coverage includes medication, laboratory services, treatment, and more. This plan has an annual deductible of \$300. Once the deductible has been met, services are paid at 70% up to a maximum of \$6,000.

### **LifeTime Benefit Term with Long Term Care - Chubb**

The life insurance plan provides money to your family at death, and while you are living too, if you need home health care, assisted living or nursing care. While the policy is in force, the death benefit is 100% guaranteed for the longer of 25 years or age 70. Even after age 70, the full death benefits is designated to last through age 99. As a newly hired employee, you will be offered a guarantee issue with no medical questions asked.

# RETIREMENT PLANS

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- Kern County Employees' Retirement Association "KCERA" (SEIU Members)
- Deferred Compensation 457(b)
- Defined Contribution Plan (MMC Employees only)
- Physician Pension Plan (through TIAA)



## Represented Employees

### Kern County Employees' Retirement Association (KCERA)

Membership begins automatically upon your appointment to a permanent position of 50% or more of the regular stand hours required. Some types of employment are not eligible for membership in KCERA, these include management/mid-management/confidential (hired on or after Nov 24th 2018), extra-help, per-diem, contract & part-time positions working less than 50% of the regular, scheduled hours required. Members are required to make contributions to KCERA through biweekly pre-tax payroll deductions. Your contribution amount is based on a percentage of your base pay plus any special pays considered compensation that are included in determination of your final average compensation.

This plan provides you with retirement, disability and death benefits. Once you have five years of retirement service credit, you will be fully vested in the plan. Vesting means you are entitled to a monthly benefit at retirement. For employees hired on or after October 27, 2007, you will be enrolled in General Tier II PEPR, which provides a benefit formula of 1.62% at 65. Your total monthly retirement benefit upon retirement will be based on the following factors: your age at retirement, your total years of retirement service credit, your final average monthly compensation & your benefit tier. Visit the new employee orientation tab at [www.kcera.org/resource-center/publications](http://www.kcera.org/resource-center/publications) to learn more.

### Deferred Compensation 457(b) Plan

Enrollment into the 457(b) deferred compensation plan is available to you immediately upon your appointment to a permanent position with Kern Medical. When you chose to defer pre-tax dollars into your 457(b) retirement plan, Kern Medical will match your contribution at 100% up to 6% of your compensation. Your and Kern Medical's contributions to the plan and any earnings they generate are

always 100% vested. Matching contributions and any earnings on those contributions are tax-deferred until the money is withdrawn. To enroll, visit [www.kerncounty457.com](http://www.kerncounty457.com) or go online to learn more.

## Management, Mid-Management, and Confidential (MMC) Employees

### Deferred Compensation Plan

Enrollment into the deferred compensation plan is available to you immediately upon your appointment to a management, mid-management, or confidential position with Kern Medical. Your contributions to the plan and any earnings they generate are always 100% vested. Contributions and any earnings on those contributions are tax-deferred until the money is withdrawn.

When you choose to defer pre-tax dollars into the deferred comp plan, all employer match dollars will be placed into the deferred comp 401(a) retirement plan. Kern Medical will match your contribution at 100% up to 6% of your compensation, plus an additional 50% match on the next 6% of your pay for the same biweekly pay period. Therefore, if you contribute at least 12% of your pay, you will receive the total available match of 9% of your pay. Matching contributions and any earnings on those contributions are tax deferred until the money is withdrawn. Distributions are subject to ordinary income tax. You vest in Kern Medical's employer matching contributions over a 5-year period with a 20% vesting each year. Enroll online at [www.kerncounty457.com](http://www.kerncounty457.com).

## Employed Physicians

### Physicians' Pension Plan

Membership with the Kern County Hospital Authority Defined Contribution Plan for Employed Physicians begins automatically upon your appointment to an eligible position. Funding of this plan occurs exclusively through a combination of employer and mandatory employee contributions on a pre-tax basis. Contributions are at a set rate, meaning you may not elect to change the amount that is deducted each bi-weekly pay period.

## Employed Physicians (cont.)

Kern Medical will establish and maintain an account for each employed physician. Visit [www.tiaa.org](http://www.tiaa.org) to learn more.

### Deferred Compensation 457(b)

Enrollment into the 457(b) deferred compensation plan is available to you immediately upon your appointment to an eligible position. Your contributions to the plan and any earnings they generate are always 100% vested. Contributions and any earnings on those contributions are tax-deferred until the money is withdrawn. Employed physicians are not eligible for an employer match. To enroll, visit [www.kerncounty457.com](http://www.kerncounty457.com) or go online to learn more.

## Employed Residents

### Deferred Compensation 457(b)

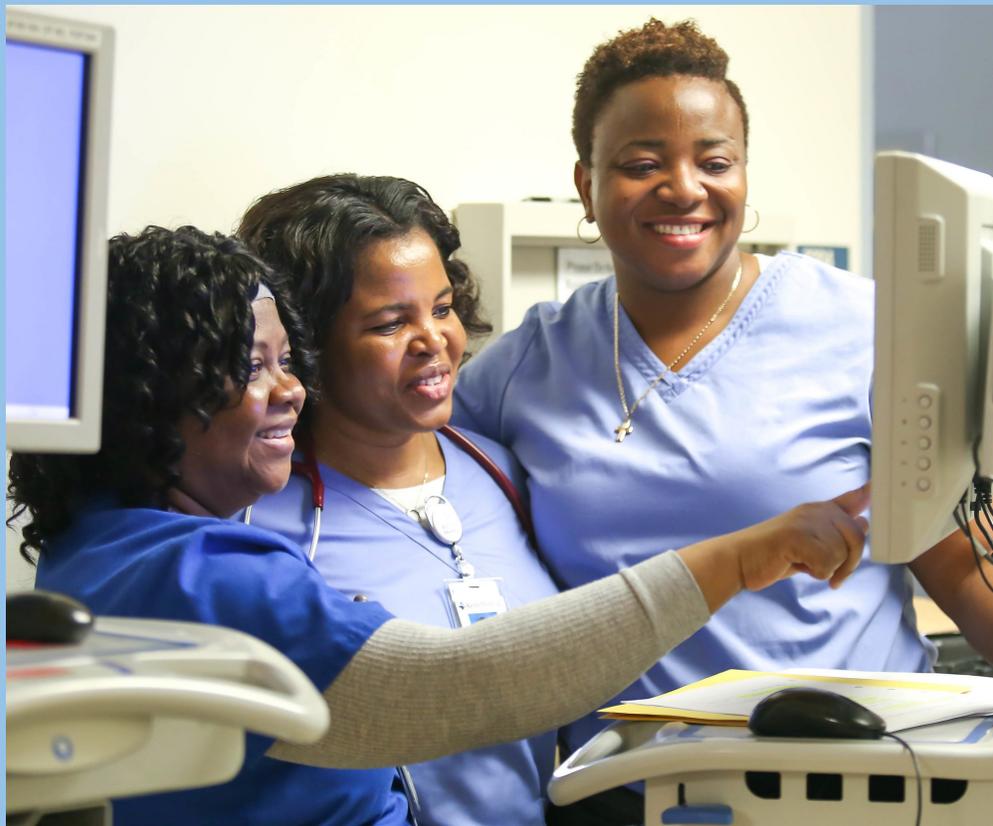
Enrollment into the 457(b) deferred compensation plan is available to you immediately upon your appointment to an eligible position. Your contributions to the plan and any earnings they generate are always 100% vested. Contributions and any earnings on those contributions are tax-deferred until the money is withdrawn. Employed residents are not eligible for an employer match. To enroll, visit [www.kerncounty457.com](http://www.kerncounty457.com) or go online to learn more.



# ADDITIONAL BENEFITS

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- Time Off
- Holidays
- Perks at Work
- New Employee Premium Pay
- Employee Assistance Program
- Kern Medical Paid Life Insurance
- Loan Forgiveness
- Length of Service Recognition Awards
- Extended Illness





## Paid Time Off (PTO)

Regular and Part-Time employees are entitled to Paid Time Off (PTO). PTO is accrued under the following schedule:

Years Of Service	PTO Hours
0-4	144 hours
5-9	184 hours
10-14	224 hours
15+	263 hours
PTO is prorated based on hours worked.	

## Perks at work

As a Kern Medical employee, you will have access to a free perks platform offering over 30,000 unique discounts on a variety of products and services you use every day. Save on travel, entertainment, electronics, apparel, fitness, and more. In order to get started, visit [www.Perksatwork.com](http://www.Perksatwork.com) and register for free with your Kern Medical email address.

## Holidays

Kern Medical observes eight holidays.

New Year's Day

Martin Luther King's Birthday

Memorial Day

Independence Day

Thanksgiving Day

Day after Thanksgiving

Christmas Eve

Christmas Day

## New Employee Premium Pay

Permanent employees are eligible for a New Employee Premium Pay equal to 6% of your base salary. Employees are encouraged to contribute all or part of their 6% New Employee Premium Pay to the deferred compensation 457 (b) plan. Saving for your retirement ensures your financial security in the future.

\* The six percent biweekly premium pay is calculated by multiplying your hourly rate times the amount of hours you are paid during the pay period, including hours worked and PTO but excluding overtime.

\* Most employees hired after October 27th, 2007 are eligible.

## Employee Assistance Program (EAP)

Provided through Anthem Blue Cross, Kern Medical's Employee Assistance Program (EAP) is designed to help you meet the challenges of modern life. The EAP offers confidential information, support, and referral service tools. Areas frequently addressed include: child care & elder care resources, budgeting tools, legal assistance, car and home buying advice, career advice, & college planning tips. In addition, three free counseling sessions, per incident are also available to you. Check out the web page at [www.anthemead.com](http://www.anthemead.com). The password is "Kern".

## Kern Medical Employer Paid Life Insurance

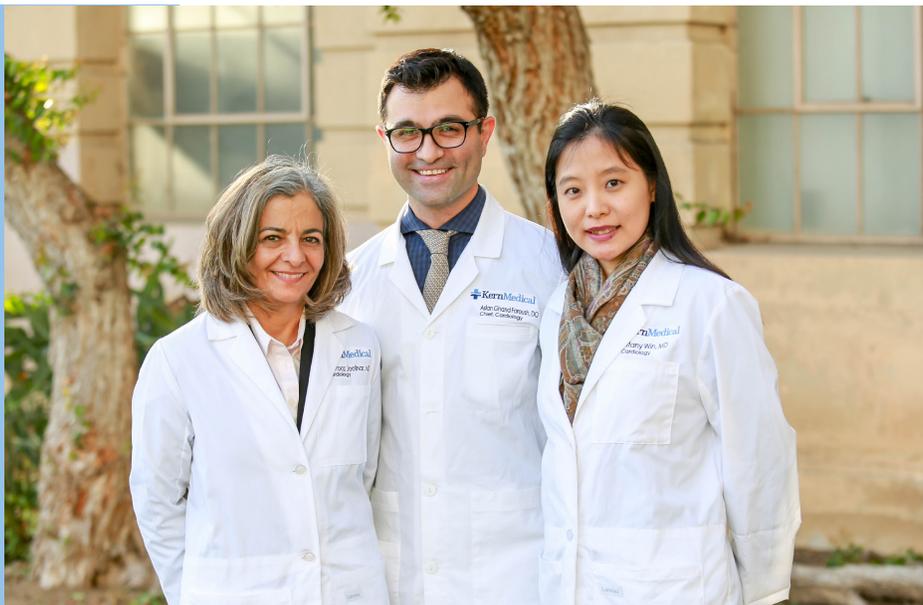
The plan provides life insurance to employees in certain job categories. Kern Medical pays the full cost for your coverage. Benefits are payable to your designated beneficiary under the plan.

SEIU Represented	\$10,000
Confidential	\$50,000
Management	\$100,000

## Extended Illness Bank (EIB)

Regular & Part-Time employees are entitled to an Extended Illness Bank (EIB). EIB is designed for situations where you need to be absent for four or more consecutive shifts or have met other illness criteria. EIB is accrued under the following schedule

Years of Service	EIB Hours
0 - 5	55 hours
6+	80 hours
EIB is prorated based on hours worked.	



## Loan Forgiveness

Kern Medical is a federally designated Health Professional Shortage Area (HPSA). You may be eligible for loan repayments. Contact Kern Medical's Human Resources department to speak with a representative for more details.



## Length of Service Recognition Awards

Upon reaching a specified number of years of service, employees are eligible to receive an award which is symbolic of their achievement and which demonstrates Kern Medical's appreciation for their service. This program will provide awards for active employees who achieve 10 years, 20 years, 25 years, 30 years, and 35 years of service. Employees will be eligible to choose from a variety of awards selected from a catalog provided by the Authority.



# RESOURCES

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[Health Benefits FAQ](#)

[Important Contacts](#)



# Benefits FAQ

## When are my benefits effective?

For benefit eligible employees, benefits are effective the first day of the pay period following one month of continuous service.

## How many hours must I work in a biweekly period to remain benefits eligible?

Permanent employees must maintain 40 hours per biweekly period in order to remain benefits eligible.

## When will I receive my insurance cards?

Medical and dental benefit cards are mailed to your home address within 2-3 weeks after the benefit effective date. Vision has no benefit card.

## How do I change my Primary Care Physician (PCP)?

Employees may visit their plan website for information on how to make a PCP change.

## What if I need to visit the doctor before receiving my benefit cards?

Providers may call the customer service numbers to verify eligibility over the phone. If employee pays out of pocket for the expenses while covered, a claim for reimbursements may be submitted.

## When can I make changes to my plans?

Benefit changes can only be made during open enrollment or with a qualifying life event. You must submit an applicable life event for benefit changes within 30 days following the life event occurrence. A life event includes marriage, divorce, adoption, loss of other coverage, gain of other coverage, newborn, death, etc.

## Will I be automatically enrolled in a plan if I do not turn in my forms?

Automatic enrollment only applies to employees who are represented by a bargaining unit whose MOU requires participation in medical benefits.

## When will my benefits end?

When separating from employment, group health coverage will end effective at midnight of the last day of the biweekly payroll period during which the employee terminated employment. Benefits will also end if you fall below 40 hours paid time in any biweekly payroll period.

# IMPORTANT CONTACTS FOR EMPLOYEES

## Contact Human Resources to:

Enroll in benefits or add/remove a dependent due to a Qualifying Event

Questions regarding benefit deductions (661) 862-7564

## Kern Legacy Network Plus & Share Select

[www.kernlegacyhp.com](http://www.kernlegacyhp.com)

Customer Service toll-free (855) 308-5547

Customer Service local number (661) 868-3280

## Kern Legacy Classic Choice

[www.kernpos.com](http://www.kernpos.com)

Customer Service toll-free

(855) 537-6767

Customer Service local number

(661) 868-3166

## Kern Legacy Max Choice

[www.kernlegacyhp.com](http://www.kernlegacyhp.com)

## Health Plan

Kaiser Permanente

[my.kp.org](http://my.kp.org)

(800) 464-4000

## Dental Plan

Liberty Dental

[libertydentalplan.com](http://libertydentalplan.com)

(888) 273-3179

## Vision Plan

Vision Service Plan (VSP)

[www.vsp.com](http://www.vsp.com)

(800) 877-7195

## Voluntary Benefits

Chimienti & Associates

[www.chimienti.com](http://www.chimienti.com)

(877) 733-1670

New York Life Insurance

[www.newyorklife.com](http://www.newyorklife.com)

(661) 324-1772

American Fidelity

[www.americanfidelity.com](http://www.americanfidelity.com)

(800) 654-8489

## Flexible Spending Accounts

Navia Benefit Solutions

[www.naviabenefits.com](http://www.naviabenefits.com)

(866) 777-1320

## Employee Assistance Program (EAP)

Anthem Blue Cross

[www.anthemep.com](http://www.anthemep.com)

(844) 416-6386

## Retirement

KCERA

[www.kcera.org](http://www.kcera.org)

(661) 381-7700

## Deferred Compensation Plan

Administered by Voya

[www.kerncounty457.com](http://www.kerncounty457.com)

(661) 868-3467

## Physicians' Pension Plan

TIAA/CREF

[www.tiaa.org](http://www.tiaa.org)

(800) 842-2252

## COBRA

Kern County Health Benefits

[www.kerncountyhealthbenefits.com](http://www.kerncountyhealthbenefits.com) (661) 868-3182



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**W** : [www.kernmedical.com](http://www.kernmedical.com)