

CITY COLLEGES OF CHICAGO

2019 BENEFITS GUIDE  
Part-Time Employee

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Local 3506  
Educators and Coordinators



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## Eligibility

You maybe eligible to participate in the CCC Benefits Programs outlined in this guide. If you enroll in the following CCC Benefits Programs, your legal dependents also are eligible to participate in these programs: medical, dental, vision. Please review your union contract as there may be differences.

If you want your legal dependent(s) to participate in any of the CCC Benefits listed above, the dependents must meet the criteria for eligible dependents and you must **attest on the online enrollment portal your dependents meet the requirements for eligibility**. If you are a new hire, you have 31 days from your first day of employment or if you experience a qualifying event during the calendar year, you have 31 days from the day a qualifying event occurs to submit your updated dependent coverage information. Otherwise, you will not be able to enroll your dependents in any of the CCC Benefits Programs that your legal dependents are eligible to participate due to your employment with CCC until the next Open Enrollment period.

### Eligible Dependents include:

- Legal Spouse, Civil Union Spouse, or Same-Gender Domestic Partner
- Eligible Child(ren) until age 26 (or until age 30 for military dependents)
- Natural Children
- Step-Children
- Legally Adopted Children
- Children under Employee's Legal Guardianship
- Physically or mentally handicapped children (regardless of age), who have been added prior to age 26

**If you have a family status change before your next opportunity to enroll, you can enroll eligible dependents in the CCC health plans (medical, dental, and vision) within 31 days of the family status change. Below is the list of events that qualify as a change in family status:**

- Voluntary or involuntary termination of a covered employee's employment for reasons other than gross misconduct
- Reduced hours of work for a covered employee
- Marriage
- Birth of a child
- Adoption of a child
- Covered employee becoming entitled to Medicare
- Divorce or legal separation of a covered employee
- Death of a covered employee
- Loss of status as a dependent child under plan rules

# CCC Employer-Sponsored Benefits Programs

## Medical Plans

The purpose of City Colleges of Chicago's medical plans through Blue Cross Blue Shield (BCBS) is to provide plan participants affordable protection from catastrophic out-of-pocket medical expenses.

### BlueAdvantage HMO

The BlueAdvantage HMO Plan offers you medical care from one of the largest HMO networks in Illinois. You are required to select a contracting medical group and primary care physician (PCP) to provide your care and must obtain a referral from your PCP to see a specialist. You can select a different PCP for each family member or change your PCP within the same medical group at any time. You will need a referral from your PCP to see a specialist.

**It is important to note that if you receive care from another source without prior authorization from the HMO, your services will not be covered.**

When a medical emergency occurs, call your PCP. Your medical group is available 24 hours a day, seven days a week to accept phone calls. If you are unable to call your PCP, go directly to the nearest hospital emergency room and notify your PCP as soon as possible. If you are admitted, someone must call your PCP immediately upon admission. Emergency care benefits are limited to the initial emergency treatment. To receive additional benefits, your PCP must provide or coordinate follow-up care.

To see if your current doctor is part of the BlueAdvantage HMO Plan network (Provider Finder®), or change to a new PCP in a different medical group, simply call (800) 892-2803 or visit [www.bcbsil.com](http://www.bcbsil.com).

### PPO Plan

The PPO Plan gives you freedom of choice and greater flexibility than the HMO Plan. You are not required to choose a primary care physician and do not need a referral to see a specialist. PPO members have access to care anywhere they live, work or travel, across the country and around the world.

When you use network providers, your benefits are paid at a higher level and your out-of-pocket expenses are lower due to the provider discounts negotiated by BlueCross and BlueShield. The plan requires payment of deductibles and coinsurance until you satisfy the out-of-pocket maximum each calendar year. To find a doctor in the network, use the Provider Finder® at [www.bcbsil.com](http://www.bcbsil.com).

You must call the Medical Services Advisory (MSA) at BCBS at least one business day prior to a non-emergency hospital admission and within two business days of an emergency or maternity hospital admission. Otherwise, you will be charged an additional \$500 copay. The MSA is a unit of health care professionals who work closely with the Plan to coordinate your benefits to determine the most appropriate and cost-effective way to meet your healthcare needs.

## Personal Care Payments

To enroll in Personal Care Payments, you must select the medical plan with the Personal Care Payment (“PC”) name attached to the plan. If you enroll in a Personal Care Payment option and you are not eligible, you will be notified. Please review your contract for details on eligibility for Personal Care Payments.

When enrolling in PeopleSoft Self Service, please note the following abbreviated descriptions next to the plan names:

**DB - Direct Bill**

**PC- Personal Care**

**DBPC - Direct Bill Personal Care**

## Medical Benefits

Medical Benefit Highlights	HMO BlueAdvantage Plan	PPO Plan In-Network	PPO Plan Out-of-Network
<b>Annual Deductible</b>			
Individual	None	\$500	\$1,000
Family	None	\$900	\$3,000
<b>Annual Out-of-Pocket Maximum</b>			
Individual	\$1,500	\$2,500 (including deductible)	\$3,000 (including deductible)
Family	\$3,000	\$4,000 (including deductible)	\$9,000 (including deductible)
<b>Lifetime Maximum Benefit</b> (per person)			
	Unlimited	Unlimited	
<b>Preventive Care Services</b> (No co-payment, deductible or co-insurance)			
	100%	100%	
<b>Physician Services</b>			
Office Visit – Primary Care Physician	100% (after \$25 copay)	80% (after \$10 copay)	70%
Office Visit – Specialist Physician	100% (after \$35 copay)	80% (after \$20 copay)	
<b>Hospital Services*</b>			
Inpatient or Outpatient	100% (after \$300 copay)**	80% (after \$100 copay)	70% (after \$100 copay)
Emergency Room Visit	100% (after \$200 copay)	80% (after \$175 copay)	80% (after \$175 copay)
<p>*PPO members must contact the Medical Services Advisory (MSA) at least 1 business day prior to a non-emergency hospital admission and within 2 business days of an emergency or maternity hospital admission; otherwise, an additional \$500 copay applies.</p> <p>**There is no copay for outpatient preventive endoscopic surgical procedures such as colonoscopies.</p>			
<b>Mental Health Services</b>			
Inpatient	100% (after \$300 copay)	80%	70%
Outpatient	100% (after \$25 copay)	80% (after \$10 copay)	70%
<b>Chemical Dependency Services</b>			
Inpatient	100% (after \$300 copay)	80%	70%
Outpatient	100% (after \$25 copay)	80%	70%
<b>Other Covered Services</b> (e.g., physical therapy, home health care)			
	100% (after \$25 copay/visit)	80%	70%
<b>Prescription Drugs Retail</b> (30 day supply)			
Generic Copay	\$20	\$10	Reimbursed at 75% of network rate minus \$10 copay
Brand Formulary Copay	\$30	\$20	Reimbursed at 75% of network rate minus \$20 copay
Brand Non-Formulary Copay	\$45*	\$40*	Reimbursed at 75% of network rate minus \$40 copay
<b>Mail-Order</b> (90 day supply)			
Generic Copay	\$40	\$20	Reimbursed at 75% of network rate minus \$20 copay
Brand Formulary Copay	\$60	\$40	Reimbursed at 75% of network rate minus \$40 copay
Brand Non-Formulary Copay	\$90*	\$80*	Reimbursed at 75% of network rate minus \$80 copay

\*If you choose a non-formulary drug when a generic is available, you pay the cost difference between them in addition to the copay.

**This sheet only highlights the benefit plans. For additional information, contact the District Office of Human Resources, Benefits Division.**

## Dental Plan

The purpose of City Colleges of Chicago's dental plan is to provide affordable protection from large out-of-pocket dental expenses and encourage preventive care. CCC pays approximately 85% of your monthly premium for dental plan coverage. You may go to the dentist of your choice or to a provider in the BCBS Blue Care dental network. To see if your current dentist is in the BlueCross BlueShield Blue Care Dental network or to find a network dentist, search the Provider Locator at [www.bcbsil.com](http://www.bcbsil.com), or call (855) 557-5488. You may choose different dental providers for each family member.

Program Basics	Contracting Provider*	Non-Contracting Provider*
<b>Benefit Period Maximum</b>		\$1,500 per calendar year
<b>Deductible</b> Applies to all covered dental services, except for Oral Exams, Cleanings, and X-Rays		\$10 per person per calendar year
<b>Dependent Coverage</b>		Up to age 26
Services	Contracting Provider*	Non-Contracting Provider*
<b>Diagnostic &amp; Preventive Services</b> Dental exams Cleanings (2 visits per calendar year) X-rays	100% of Maximum Allowance No Deductible	100% of Usual and Customary No Deductible
<b>Miscellaneous Services</b> Fluoride treatment Space maintainers Sealants for children up to age 19 Emergency Care (Relief of pain)	100% of Maximum Allowance No Deductible	100% of Usual and Customary No Deductible
<b>Restorative Services</b> Routine fillings (amalgams and resins) Pin retention Simple extractions	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
<b>General Services</b> Intravenous sedation General anesthesia Reline/rebase of dentures Repair of bridges and dentures	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
<b>Endodontic Services</b> Root canals Pulp caps Apicoectomy/apexification	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
<b>Periodontic Services</b> Scaling and root planing Gingivectomy/gingivoplasty Osseous surgery	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
<b>Oral Surgery Services</b> Surgical extractions, including complete bony impactions Alveoloplasty Vestibuloplasty	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
<b>Crowns, Veneers, Inlays/Onlays Services</b> Dental implants Crowns, including stainless steel inlays/onlays Repairs and replacement of Veneers after 60 months Prefabricated posts and cores Repair and recementation of crown, inlays/onlays	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
<b>Prosthetic Services</b> Bridges, dentures Addition of tooth or clasp	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
<b>Orthodontics</b> Coverage for adults and for eligible dependent children to age 26	50% Orthodontia – Separate Lifetime Maximum of \$2,000 for Adults and Children	50% Orthodontia – Separate Lifetime Maximum of \$2,000 for Adults and Children

\* **Schedule of Maximum Allowances:** Contracting providers have agreed to accept the Schedule of Maximum Allowances as payment in full for covered services. Non-contracting providers do not accept the Schedule of Maximum Allowances as payment in full. For services received from a non-contracting provider, member will be liable for the difference between the dentist's charge and covered benefits.

For more info, visit [bcbsil.com](http://bcbsil.com) or contact Customers Service Center, toll free at (855) 557-5488, Monday through Friday, 8 a.m. to 6 p.m.  
A Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association.

## Vision Plan

The purpose of City Colleges of Chicago's vision plan is to provide affordable protection from large out-of-pocket vision expenses and encourage preventive care. CCC pays approximately 85% of your monthly premium for vision plan coverage. The Vision Service Plan (VSP) offers you flexibility in choosing your vision provider. You may choose between a VSP provider or an out-of-network provider. Benefits are better if you select a VSP in-network provider. The plan benefits include examinations and lenses every 12 months, and frames every 24 months. There is an individual \$10 copayment each calendar year for all covered services.

Benefit	Description	Copay
<b>Your Coverage with a VSP Doctor</b>		
<b>WellVision Exam</b>	<ul style="list-style-type: none"> <li>• Focuses on your eyes and overall wellness</li> <li>• Every 12 months</li> </ul>	\$10 for exam and glasses
<b>Prescription Glasses</b>		
<b>Frame</b>	<ul style="list-style-type: none"> <li>• \$120 allowance for a wide selection of frames</li> <li>• 20% off amount over your allowance</li> <li>• Every 24 months</li> </ul>	Combined with Exam
<b>Lenses</b>	<ul style="list-style-type: none"> <li>• Single vision, lined bifocal, and lined trifocal lenses</li> <li>• Polycarbonate lenses for dependent children</li> <li>• Every 12 months</li> </ul>	Combined with Exam
<b>Lens Options</b>	<ul style="list-style-type: none"> <li>• Tints/Photochromic lenses</li> <li>• Standard progressive lenses</li> <li>• Premium progressive lenses</li> <li>• Custom progressive lenses</li> <li>• Average 35-40% off other lens options</li> <li>• Every 12 months</li> </ul>	\$0 \$50 \$80 - \$90 \$120 - \$160
<b>Contacts</b> (Instead of Glasses)	<ul style="list-style-type: none"> <li>• \$300 allowance for contacts and contact lens exam (fitting and evaluation)</li> <li>• 15% off contact lens exam (fitting and evaluation)</li> <li>• Every 12 months</li> </ul>	\$0
<b>Additional Coverage</b>	<ul style="list-style-type: none"> <li>• Diabetic Eyecare Plus Program</li> </ul>	
<b>Extra Savings and Discounts</b>	<p><b>Glasses and Sunglasses</b></p> <ul style="list-style-type: none"> <li>• 30% off additional glasses and sunglasses, including lens options, from the same VSP doctor on the same day as your WellVision Exam. Or get 20% off from any VSP doctor 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 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities.</li> </ul>	

### Your Coverage with Other Providers

Visit [vsp.com](http://vsp.com) for details if you plan to see a provider other than a VSP doctor.

Exam – Up to \$35  
 Frame – Up to \$40  
 Single Vision Lenses – Up to \$30  
 Lined Bifocal Lenses – Up to \$40

Lined Trifocal Lenses – Up to \$50  
 Progressive Lenses – Up to \$50  
 Contacts – Up to \$105  
 Tints – Up to \$5

VSP guarantees coverage from VSP doctors 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.



## 2019 Rates - 3506 Part Time Adult Educators & Coordinators

	Employee Per Pay Period Contribution	Employee Monthly Contribution
<b>BCBS PPO</b>		
Employee Only	\$ 385.38	\$ 770.75
Employee + Spouse	\$ 703.71	\$ 1,407.42
Employee + Child(ren)	\$ 641.56	\$ 1,283.11
Family	\$ 982.64	\$ 1,965.27
<b>BCBS Blue Advantage HMO</b>		
Employee Only	\$ 264.81	\$ 529.61
Employee + Spouse	\$ 628.94	\$ 1,257.87
Employee + Child(ren)	\$ 603.56	\$ 1,207.12
Family	\$ 933.81	\$ 1,867.62
<b>Dental</b>		
Employee Only	\$ 18.95	\$ 37.90
Employee + Spouse	\$ 36.62	\$ 73.24
Employee + Child(ren)	\$ 35.15	\$ 70.30
Family	\$ 54.37	\$ 108.74
<b>Vision</b>		
Employee Only	\$ 3.49	\$ 6.98
Employee + Spouse	\$ 6.98	\$ 13.95
Employee + Child(ren)	\$ 7.47	\$ 14.93
Family	\$ 11.94	\$ 23.87

## Employee Assistance Program (EAP)

City Colleges of Chicago offers a free Employee Assistance Program (EAP) to Non-Bargained For employees and their families. EAP services include consultation and support for everyday challenges of life that may affect your health, family life, or desire to excel at work. Below is a summary of services available:

### Employee Assistance

- Toll-free telephone assessments and consultations
- Work and Life Services – Childcare and Eldercare, Financial, Legal and Identity Theft Prevention and Recovery
- Valuable Member Website

### Consultation and Support

- 3 or 5 telephonic or web-video consultations per incident, per person, with a licensed clinician. EAP Services Available 24/7 through website or toll-free line.

Website: [guidanceresources.com](http://guidanceresources.com)

Company Web ID: **MGR311**

Company Name: **BOARD**

Toll-free Line: **1-800-311-4327**

- Research-based well-being assessment
- Assessments for depression and alcohol/substance abuse
- Articles and tools for health and wellness
- Work-life resource and referral directory, online tools (interactive tools for taxes, personal finance, retirement, etc.)
- Articles and tips on a wide range of behavioral and emotional health issues, including anger management, grief and loss and family and relationships
- “Member Matters” – monthly e-newsletter
- Ask Our Expert
- Interactive e-learning versions of many of our popular training programs

**To learn more about the Employee Assistance Program offered through ComPsych, please refer to the EAP section of the Benefits Department Website.**

## CCC Voluntary Employee-Paid Benefit Programs

### Flexible Spending Accounts (Employee-paid)

The Health and Dependent Care Flexible Spending Account Plans (FSA) help you save money on your out-of-pocket family health and child care expenses. FSA accounts are exempt from federal income taxes, state income taxes and Medicare taxes. When you use the money in your FSA accounts, you avoid paying taxes on those dollars. As a result, you gain substantial tax savings by using the FSA accounts.

Please be advised that the IRS requires that any unused year-end account balances must be forfeited. However, FSA expenses incurred during the 2-1/2 month “grace period” following the plan year can be reimbursed from your previous year’s FSA balances. The deadline for submitting 2018 claims will be March 31, 2019. Claims for the 2018 plan year must be incurred by March 15, 2019 and submitted by March 31, 2019.

Determine your annual Health and Dependent Care FSA account contributions by calculating your expected expenses. The maximum contributions you can elect are \$2,650 for the Health FSA and \$5,000 for the Dependent Care FSA. Your contribution amounts will be divided by the number of pay periods in the plan year and will be deducted on a pre-tax basis in equal amounts each pay period.

**Benefit Express Debit Card:** You can use a debit card for all of your eligible health care expenses. The Benefit Express Debit Card makes it easy for you to spend the money in your tax-advantaged FSA by enabling you to pay for eligible health care expenses directly. Make sure you keep a record of your purchases in the event that Benefit Express needs additional information about a purchase.

For more information about the FSA Plan or for a listing of eligible expenses and worksheets to help you calculate your contribution amounts, visit [www.myfsaexpress.com](http://www.myfsaexpress.com) or contact Benefit Express toll free at (877)837-5017.

## CCC Voluntary Employee-Paid Benefit Programs

### Transit Benefits (Employee-paid)

#### Metra Card Program

The Regional Transportation Authority (RTA) METRA Prepaid MasterCard allows employees to use pre-tax dollars for commuting expenses for transportation on the METRA, CTA, Pace, South Shore Railroad, certain Amtrak routes and Chicago Water Taxi. Visit the RTA website for details. The IRS maximum amount is currently \$260/month.

All transit payroll deductions are pre-tax and the amount elected will be deducted from the first payroll check of each month. Your RTA Transit Benefit Prepaid MasterCard will be delivered to your home and your monthly pre-tax deduction amount will be loaded onto your card each month. You must activate your card online or by phone with the RTA prior to use.

#### CTA Ventra Card Program

All payroll deductions are pre-tax. The amount elected will be deducted from the first payroll check of each month. Amounts will be forwarded to Ventra and will be available for use on the 1st day of the following month. There are two enrollment options for the program:

- **Pay-Per-Use** – Choose from the following amounts: \$30, \$45, \$60, or \$80
- **30 Day Pass** – Get unlimited rides for 30 days for \$100

Your Ventra transit card has a balance that you maintain in an online account in the Ventra system. Fare transactions are deducted from your account each time the card is used on all CTA fare machines. If you lose your card, your account balance remains secure. Alert Ventra if your card is lost or stolen and order another card. For additional transit information and current fare rates, visit the Ventra website at [www.ventrachicago.com](http://www.ventrachicago.com).

The maximum amount allowed by the IRS for pre-tax commuting expenses is \$260 per month. If you are participating in multiple transit programs, your combined deductions cannot exceed the \$260 monthly contribution. For additional information and current fare rates visit RTA at [www.rtachicago.org](http://www.rtachicago.org), CTA at [www.transitchicago.com](http://www.transitchicago.com) or Metra at [www.metrarail.com](http://www.metrarail.com).

## CCC Voluntary Employee-Paid Benefit Programs

### 403(B) and 457(B) Retirement Savings Plans (Employee-paid Contributions)

CCC offers voluntary 403(b) and 457(b) retirement plans which are valuable tax-advantaged retirement savings plans. The salary deferrals you elect to contribute to the Plan are made before income tax is paid. Your contributions are allowed to grow tax-deferred until the money is withdrawn from the Plan. Once withdrawn, your contributions are taxable to you upon receipt. You select which investment provider you want your money invested in from the CCC 403(b)/457(b) investment providers.

If you elect to participate immediately in this Plan, your 403(b)/457(b) Salary Reduction Authorization Form must be mailed to TSA Consulting Group, the plan administrator. A copy of your signed 403(b)/457(b) account application must be attached to your authorization form that indicates that you have opened an account with one of the CCC investment providers.

You have the option to increase, decrease, discontinue or resume your salary deferral contributions to the Plan at any time. Investment provider changes may be made at any time.

Refer to the Retirement Savings Plans section of the Benefits Department Website for investment options.

## 2019 City Colleges of Chicago (CCC) 403(b) & 457(b) Plans Comparison

403(b) and 457(b) Retirement Plans Same Plan Features	403(b) Plan and 457 Plan	
<b>Eligibility</b>	All full and part-time employees except student employees and work study employees.	
<b>Contributions</b>	You can contribute a specific dollar amount or up to 75% of your salary each pay period through bi-weekly pre-tax salary deferrals. You can contribute to both plans concurrently or to either plan individually in any order.	
<b>Basic Annual Contribution Limit</b>	\$18,500 per plan and \$37,000 for both plans combined. (The IRS determines the limit each calendar year.)	
<b>Age 50 Additional Annual Contribution Limit</b>	\$6,000 per plan and \$12,000 for both plans combined for employees who are over 50 years old or attain the age of 50 by December 31, 2018. (The IRS determines the limit each calendar year.)	
<b>Total Annual Basic and Age 50 Contribution Limits</b>	\$24,000 per plan and \$48,000 for both plans combined. (The IRS determines the limit each calendar year.)	
<b>Contribution Changes</b>	As a new participant, you can enroll in the Plan at any time. Your contributions will begin the first payroll after an account has been established with a CCC investment provider. If you are a current participant you can increase, decrease, resume or discontinue your contributions at any time.	
<b>Investment Provider Changes</b>	You can change your investment provider at any time. You can also transfer your account balance to another investment provider or change the allocation of your contributions among the investment options offered by your investment provider.	
403(b) and 457(b) Retirement Plans Different Plan Features	403(b) Plan	457(b) Plan
<b>Service-Based Catch-up Contributions</b>	<p>Employees with at least 15 years of consecutive service with City Colleges can contribute up to \$3,000 per year to a lifetime maximum of \$15,000. (Prior year contributions may limit this amount.)</p> <p>Employees can make this contribution and the age 50 additional contribution in the same year.</p>	<p>Employees within 3 years of Normal Retirement Age 65 can contribute up to 2 times the basic annual contribution limit, or up to \$37,000 for 2018. (Prior year contributions may limit this amount.)</p> <p>Employees can make the greater of this contribution or the age 50 additional contribution, but cannot do both in the same year.</p>
<b>Investment Providers</b>	You can invest your contributions with one of 7 investment providers shown on the next page.	You can invest your contributions with one of 4 investment providers shown on the next page.

## 403(b) Investment Providers

Provider	Plan	New Participants	Current Participants
<b>AIG/VALIC</b>	#01195	<a href="http://valic.com">valic.com</a>   Customer Service (800) 448-2542 Khai Le (312) 214-5496   Khai.Le@valic.com	<a href="http://valic.com">valic.com</a>   Customer Service (800) 448-2542 Khai Le (312) 214-5496   Khai.Le@valic.com
<b>Fidelity</b>	#50075	<a href="http://fidelity.com/atwork">fidelity.com/atwork</a>   Click on “resources” tab for forms Customer Service (800) 343-0860	<a href="http://fidelity.com/atwork">fidelity.com/atwork</a>   Click on “resources” tab for forms Customer Service (800) 343-0860
<b>Great American</b>	#OTC094	Charles Woodhouse (800) 556-0098 <a href="mailto:cwoodhouse@appreciationfinancial.com">cwoodhouse@appreciationfinancial.com</a>	Eddie Ruffin (773) 710-9464 <a href="mailto:Ebr5@sbcglobal.net">Ebr5@sbcglobal.net</a>
<b>Voya Financial</b>	#VT5590	<a href="http://ingretirementplans.com/enrollment">ingretirementplans.com/enrollment</a>	<a href="http://ingretirementplans.com">ingretirementplans.com</a> Customer Service (800) 873-9150 Jim Molster (630) 245-4038 James.Molster@voyafa.com
<b>MetLife Resources</b>	#1002017	Michael R. Miller Office: (630) 441-1016	Michael Bina Office: (630) 441-1008   Cell: (630) 991-6130
<b>The Legend Group</b>		<a href="http://legendgroup.com">legendgroup.com</a>   Customer Service (800) 835-2158 Don Wade, CFP (630) 586-9430 <a href="mailto:donaldwade@legendequities.com">donaldwade@legendequities.com</a>	<a href="http://legendgroup.com">legendgroup.com</a>   Customer Service (800) 835-2158 Don Wade, CFP (630) 586-9430 <a href="mailto:donaldwade@legendequities.com">donaldwade@legendequities.com</a>
<b>TIAA-CREF</b>	#365797	<a href="http://ttaa-cref.org">ttaa-cref.org</a>   Click on “Products and Services” Customer Service (800) 842-2888 or (800) 842-2273 Press 2 for new participants	<a href="http://ttaa-cref.org">ttaa-cref.org</a>   Click on “Products and Services” Customer Service (800) 842-2888 or (800) 842-2273 Press 1 for current participants

## 457(b) Investment Providers

Provider	Plan	New Participants	Current Participants
<b>AIG/VALIC</b>	#01195	<a href="http://valic.com">valic.com</a>   Customer Service (800) 448-2542 Khai Le (312) 214-5496   Khai.Le@valic.com	<a href="http://valic.com">valic.com</a>   Customer Service (800) 448-2542 Khai Le (312) 214-5496   Khai.Le@valic.com
<b>Fidelity</b>	#84758	<a href="http://fidelity.com/atwork">fidelity.com/atwork</a>   Click on “resources” tab for forms Customer Service (800) 343-0860	<a href="http://fidelity.com/atwork">fidelity.com/atwork</a>   Click on “resources” tab for forms Customer Service (800) 343-0860
<b>The Legend Group</b>		<a href="http://legendgroup.com">legendgroup.com</a>   Customer Service (800) 835-2158 Don Wade, CFP (630) 586-9430 <a href="mailto:donaldwade@legendequities.com">donaldwade@legendequities.com</a>	<a href="http://legendgroup.com">legendgroup.com</a>   Customer Service (800) 835-2158 Don Wade, CFP (630) 586-9430 <a href="mailto:donaldwade@legendequities.com">donaldwade@legendequities.com</a>
<b>TIAA-CREF</b>	#403542	<a href="http://ttaa-cref.org">ttaa-cref.org</a>   Click on “Products and Services” Customer Service (800) 842-2888 or (800) 842-2273 Press 2 for new participants	<a href="http://ttaa-cref.org">ttaa-cref.org</a>   Click on “Products and Services” Customer Service (800) 842-2888 or (800) 842-2273 Press 1 for current participants

Administrative services for the 403(b) and 457(b) Plans are provided by TSA Consulting Group (TSACG). For plan details, read the 403(b) Plan Information and/or 457(b) Plan Information. To help decide which plan might be right for you based on your personal savings goals and objectives, read this side-by-side comparison chart. You can contribute to either plan individually or both plans concurrently.

## CCC Mandatory Benefit Program

### State University Retirement System of Illinois (SURS) (Mandatory Participation)

The State Universities Retirement System of Illinois (SURS) provides retirement, disability, death, and survivor plans to eligible SURS participants and annuitants.

CCC employees will not pay into Social Security and are not eligible for Social Security coverage based on their employment while at City Colleges.

New members of SURS must choose from 3 retirement plans within the 6 months of the date SURS receives your employment certification. If you do not make a plan choice within this time frame, you will automatically be permanently enrolled in the Traditional Benefit Plan. Your plan choice is an irrevocable, one-time decision that cannot be changed at a later date.

If you have at least 5 years of service, you qualify to receive your retirement benefit in the form of an annuity. If you have less than 5 years of service, you always are vested in your employee contributions made to SURS. SURS will send you your SURS Enrollment kit soon after your first day of employment.

For additional information, you may contact SURS at 800-275-7877 or [www.surs.org](http://www.surs.org)



## Contact Information

### Employee Benefits Contact Information

If you need assistance please contact the District Office of Human Resources, Benefits Division:

Phone	Email	Address
(312) 553-2895	<a href="mailto:benefits@ccc.edu">benefits@ccc.edu</a>	3901 South State Street, Chicago, Illinois 60609

### Benefits Contact information

Plan	Customer Service Number	Address	Website
<b>Blue Cross BlueShield Blue Advantage HMO</b>	Medical: (800) 892-2803 Rx: (800)423-1973	BCBS of Illinois PO Box 805107 Chicago, IL 60680	<a href="http://www.bcbsil.com">www.bcbsil.com</a>
<b>BlueCross BlueShield PPO Medical</b>	(800) 772-6895	BCBS of Illinois PO Box 805107 Chicago, IL 60680	<a href="http://www.bcbsil.com">www.bcbsil.com</a>
<b>CVS Caremark PPO Prescription</b>	(877) 542-0285	CVS Caremark PO Box 94467 Palatine, IL 60094	<a href="http://www.caremark.com">www.caremark.com</a>
<b>BCBS Blue Care Dental</b>	(855) 557-5488	BCBS Blue Care Claims Processing PO Box 23059 Belleville, IL 62223-0059	<a href="http://www.bcbsil.com">www.bcbsil.com</a>
<b>Vision Service Plan (VSP)</b>	(800) 877-7195	VSP P.O. Box 997100 Sacramento, CA 95899	<a href="http://www.vsp.com">www.vsp.com</a>
<b>ComPsych (EAP)</b>	(800)311-4327 24 hours a day 7 days a week		<a href="http://www.guidanceresources.com">www.guidanceresources.com</a> <a href="#">Organization Web ID - MGR311</a> <a href="#">Company Name - Board</a>
<b>Benefit Express (FSA)</b>	(877) 837-5017 (253)793-3766 fax	Benefitexpress P. O. Box 189 Arlington Heights, IL 60006	<a href="http://myfsaexpress.com">myfsaexpress.com</a>
<b>State University Retirement System (SURS)</b>	(800) 275-7877 Toll-Free (217) 378-8800 Direct Dial	SURS P.O. Box 2710 Champaign, IL 61825-2710	<a href="http://www.SURS.org">www.SURS.org</a>
<b>TSA Retirement Investments</b>	(888) 796-3786	TSA Consulting Group P.O. Box 4037 Ft. Walton Beach, FL 32549	<a href="http://www.tsacg.com">www.tsacg.com</a>