



Orange County Attorneys Association

2026 Benefits Guide

Benefits Begin January 1, 2026



**Open Enrollment Ends
November 14, 2025**

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Open Enrollment ends November 14, 2025.

Coverages begin January 1, 2026.

**If you have a question that was not answered in this guide,
please contact us at
(800) 511-9065 or OCAA@pgagencies.com.**

**Please do NOT call OCAA, HR, or the County with questions about
the plans detailed in this guide. They will be unable to help you.**



Benefits Available Exclusively for Orange County Attorneys Association Members

Dear Member:

The Orange County Attorneys Association (OCAA) is the sole entity recognized by the Orange County Board of Supervisors to bargain for and represent attorney in the offices of District Attorney, Child Support Services, Public Defender, Alternate Defender, Associate Defender and County Counsel. One of the benefits of OCAA membership is access to many exclusive group benefit plans. These plans are detailed in this Benefits Guide. All the plans listed in this guide are administered by Pacific Group Agencies and available exclusively to OCAA members.

The Open Enrollment period for these benefit plans is upon us. This is your once-a-year opportunity to add or make changes to your coverages. Whether you're looking to add dental coverage or add a spouse to your vision coverage, now is the time to do it.

Please take a moment to review all the benefits that are available to you. There is a supplemental dental plan that provides a generous \$2,500 annual benefit maximum and has coverage for implants and child orthodontics. Other benefits available to members include a high benefit VSP vision plan, legal protection, identity theft protection, pet care, travel insurance, and much more.

If electing to enroll in any of the benefit plans, please complete the enclosed enrollment form on page 3 of this booklet. If you are currently enrolled in one of these benefits, there is no need to re-enroll. Your coverage will continue without interruption. **The Open Enrollment period ends November 14th.**

OCAA provides all members and their family \$25,000 Personal Accident coverage at no cost to the member. To take advantage of this benefit, make sure you fill out the enclosed enrollment form and under the Personal Accident box, fill in a benefit amount of \$25,000 and your beneficiary information.

If you should have any questions on the benefit plans in this guide, please direct them to our Benefit Plans Administrator, Pacific Group, at (800) 511-9065 or OCAA@pgagencies.com. **Please do NOT contact OCAA, your employer, HR, or Orange County with questions about these plans. They will be unable to help you.**

Sincerely,

OCAA Board of Directors

How To Enroll

You can enroll in the **Dental, Vision, and Personal Accident** plans using the attached enrollment form (on page 3 of this booklet). A postage paid envelope is attached for your convenience. If you do not have the return envelope, please mail the form to:

Pacific Group Agencies
25876 The Old Road #11
Santa Clarita, CA 91381

You may also fax the form to: (800) 549-0059.

An online form is available at: www.pgagencies.com/oaca

You can enroll in the **Pet plans** by calling the carrier direct or visiting their website. If calling, remember to mention you are an OCAA member, so you get special discounted rates.

- Nationwide Pet Insurance (Premiums are credit card billed)
Visit www.petinsurance.com/oaca or call (877) 738-7874.
- United Pet Care
Visit www.unitedpetcare.com/oaca or call (877) 872-8800.

Emergency Assistance Plus is purchased (credit card billed) on an annual basis.
Visit www.emergencyassistanceplus.com/pedit or call (877) 883-1935.



Orange County Attorneys Association Enrollment Form

For Office Use Only
Received
Effective Date

Step 1: Provide your information and authorize deduction. PLEASE PRINT CLEARLY.

Last Name		First Name		Employee ID	Full Social Security Number Required
Male/Female	Date of Birth	Telephone ()		E-mail Address	
Home Address					
City			State	Zip	
By signing this form, I hereby authorize Orange County to deduct from my paycheck the current premiums and pay that amount to Pacific Group Agencies. Such deduction will continue until I notify Pacific Group Agencies in writing. I understand that there is a minimum one year commitment to the dental and vision plans. Sign Here → _____ Date _____					

Step 2: If selecting spouse / domestic partner / family coverage, provide their information.

Spouse / Domestic Partner Name	Date of Birth	M / F	Full Social Security Number Required
Child Name (Please note child coverage age limits. If disabled, please provide proof with enrollment.)	Date of Birth	M / F	Full Social Security Number Required

Step 3: To enroll in the voluntary benefit plans, select the coverages that are right for you.

Supplemental Dental		Vision	
Who is covered (Select one):		Who is covered (Select one):	
☐ Member Only	☐ Member + Child	☐ Member Only	☐ Member + Child
☐ Member + Spouse	☐ Member + Family	☐ Member + Spouse	☐ Member + Family
Personal Accident			
Who is covered (Select one):	Select AD&D Benefit Amount:	Provide beneficiary information:	
☐ Member Only	☐ \$25,000 (Provided Free by OCAA)	Beneficiary:	
☐ Member + Family	☐ \$100,000	_____	
	☐ \$250,000	Relationship:	
	☐ \$500,000	_____	

Aflac, Pet Care, and Emergency Assistance Plus

Please refer to the Benefits Guide for information on enrolling in these plans.
If you need assistance, please call our Administrator, Pacific Group Agencies, at (800) 511-9065

**If you have questions or need assistance in filling out this form, please
call the Plan Administrator, Pacific Group Agencies at (800) 511-9065
Return this form to: Pacific Group Agencies - 25876 The Old Road #11, Santa Clarita, CA 91381**

Ameritas PPO - High Plan

\$2,500 Annual Supplement to Your County PPO Plan

Ameritas Dental Monthly Premium	
Member Only	\$39.95
Member + Spouse / Domestic Partner <u>or</u> Child	\$79.90
Member + Family	\$118.50

Dental work becomes more expensive every day and as many discover, as you get older, you require more major dental work. What used to require a filling, now requires a crown or implant. While your County-provided dental plan pays a portion of the cost, many people quickly learn there are still a lot of out-of-pocket costs.

This **supplemental** dental plan coordinates with your County-provided PPO plan and is designed so you should have little-to-no out-of-pocket costs for covered dental procedures. Should your spouse or children not be covered by your County dental plan or another dental plan, this plan can be used as a full-service, standalone plan. Members and dependents each receive a robust **\$2,500 calendar year benefit**.

Dental Rewards® is included in this plan. This feature allows qualifying plan members to carryover part of their unused annual maximum. A member earns dental rewards by submitting at least one claim for dental expenses incurred during the benefit year, while staying at or under the threshold amount for benefits received for that year.

Benefit Threshold Annual	\$750	Dental benefits received for the year cannot exceed this amount
Carryover Amount	up to \$400	Dental Rewards amount is added to the following year's maximum
Maximum Carryover	\$1,000	Maximum possible accumulation for Dental Rewards

There is **no waiting period** for any covered service. However, child orthodontics requires the child be enrolled 12 months prior to starting treatment and must start treatment before age 17. Like all dental insurance, this plan will not cover replacement of a missing tooth.

You are **free to see any dentist** and while some plans pay a nebulous percentage of some allowable cost, this plan pays a set dollar benefit for each procedure regardless of which dentist you see. Over 360 dental procedures are covered, from cleanings to crowns and implants. The following is a sample list of generic procedure types and your maximum benefit.

Coverage is available for the member, and you may also insure your spouse/domestic partner, and/or your children up to age 26. Children aged 26 and older are eligible if they are permanently disabled and you list them as a dependent on your tax return.

Dental Supplement Benefits

Description	Network Dentist	Non-Network Dentist*
Calendar Year Benefit	\$2,500	
Dental Rewards	\$400 / Year	\$250 / Year
Calendar Year Deductible (<i>Waived for Preventative</i>)	\$50 / Person	\$75 / Person
Common Procedure Type	Benefit Maximum*	
Implant - Surgical Placement	\$1,007	
Implant - Abutment	\$1,532	
Porcelain Crown	\$730	
Porcelain Inlay	\$601	
Porcelain Onlay	\$681	
Scaling and Root Planing	\$123	
Prophylaxis (Cleaning)	\$69	
Periodontal Maintenance	\$69	
Teeth Whitening.	\$183	
X-Rays	\$52	
Resin Filling	\$201	
Root Canal	\$677	
Extraction of Impacted Tooth	\$165	
Biopsy	\$184	
Anesthesia	\$119	
Gingivectomy	\$379	
Excision of Lesion or Cyst	\$267	
Child Orthodontics**	\$1,500	

*Dental procedures have specific American Dental Association (ADA) codes. Your specific procedure may use a code that provides a different benefit. Consult your dental office before starting any work.

**Child Orthodontics requires your child to be enrolled in the plan for a minimum of 12 months before starting orthodontic treatment. Your child must be age 17 or younger at the time the treatment starts. Benefits are paid out at \$250 per quarter.

Dental PPO - Low Plan

Low-cost Alternative - Same Great Network

Ameritas Dental Monthly Premium	
Member Only	\$37
Member + One (Spouse/Domestic Partner <u>or</u> Child)	\$79
Member + Family	\$123

Similarly to the High Plan, this comprehensive dental plan covers over 360 procedures, from routine cleanings to major items including crowns, dentures, and implants. Whether you need routine care or something more extensive, this plan will have you covered.

Members and dependents each receive **\$1,000 annual network benefit**. This plan allows you to maintain your dental health by seeing a dentist every six months for your preventative care. A healthy mouth leads to better overall health.

Dental Rewards® is included in this plan. This feature allows qualifying plan members to carryover part of their unused annual maximum. A member earns dental rewards by submitting at least one claim for dental expenses incurred during the benefit year, while staying at or under the threshold amount for benefits received for that year.

Benefit Threshold Annual	\$500	Dental benefits received for the year cannot exceed this amount
Carryover Amount	\$250	Dental Rewards amount is added to the following year's maximum
Maximum Carryover	\$1,000	Maximum possible accumulation for Dental Rewards

This PPO plan allows you to use any dentist. Your dentist does not need to be part of any network. However, if your dentist is an Ameritas Network dentist, you will receive significantly reduced prices. Ameritas Network Dentists have agreed to charge significantly reduced prices, typically saving you around 25-50% off their regular rates. Ameritas has the largest dental network nationwide with over 325,000 providers, so there is a good chance your dentist belongs.

**Find Ameritas “Classic PPO & Plus” Network providers
in your area at: <https://dentalnetwork.ameritas.com/>**

Coverage is available for the member, and you may also insure your spouse/domestic partner, and/or your dependent children up to age 26. Children aged 26 and older are eligible if they are permanently disabled and the member lists them as a dependent on their tax return. Grandchildren are only eligible if you have full legal custody.

Dental PPO - Low Plan Benefits

Description	Network Dentist	Non-Network Dentist [*]
Calendar Year Benefit	\$1,000	
Dental Rewards	\$250 / Year	
Deductible	\$25 / Visit	
Preventative Services		
Cleaning, Oral Exam, Bitewings, Panoramic X-rays, Periapical X-rays, Sealants (16 and Under), Space Maintainers	100%	
Basic Services		
Fillings, Restorative Composites (Anterior and Posterior), Endodontics (Surgical and Nonsurgical), Periodontics (Surgical and Nonsurgical), Simple and Complex Extractions, Denture Repair, Anesthesia	50%	
Major Services		
Onlays, Crowns, Crown Repair, Prosthodontics (Fixed Bridges, Removable Complete/Partial Dentures)	50%	

*Benefit levels are based on the Maximum Allowable Charge (MAC) for services.

Vision by VSP

Vision Monthly Premium	
Member Only	\$11
Member + Spouse / Domestic Partner <u>or</u> Child	\$22
Member + Family	\$33

This comprehensive vision plan has coverage for exams and lenses (annually) and frames (every 2 years). Our “Featured Frame” benefit provides an additional \$50 coverage for many name brands. These brands may include Salvatore Ferragamo, Calvin Klein, Chloé, Nike, Nine West, Anne Klein, bebe, and more.

This plan allows you to use any eye care provider but choosing a VSP Choice Network provider will give you the highest benefits and lowest out-of-pocket costs. **Find local providers at: www.VSP.com**

Benefit	VSP Choice Provider	Non-Network Provider
Eye Exam	Covered in Full	\$45
Lenses		
Single Vision	Covered in Full	\$30
Bifocal	Covered in Full	\$50
Trifocal	Covered in Full	\$65
Lenticular	Covered in Full	\$100
Progressive (Standard)	Covered in Full	N/A
Contacts		
Fit & Follow-Up Exam	\$60 Co-Pay	Not Covered
Medically Necessary	Covered in Full	\$210
Elective	\$200	\$105
Frames	\$200	\$70
Featured Frame Benefit	Extra \$50 Coverage	N/A
Deductible	Exam: \$10 / Material: \$25	

Lens Options at VSP Providers	Member Co-Pay
Progressive Lenses (<i>Premium & Custom</i>)	\$40
Polycarbonate (<i>Standard</i>)	Child: \$0 / Adult: \$33
Dye (Plastic Gradient / Solid Plastic)	\$15 - \$17
Photochromatic Lenses	\$31 - \$82
Scratch Resistant Coating	\$17 - \$33
Anti-Reflective Coating	\$43 - \$85
Ultraviolet Coating	\$16

Aflac

OCAA members have access to individually tailored group Aflac policies that cover exactly what you find important. Policies are owned by you and fully portable should you change employment. Aflac cash benefits are paid directly to you, so you decide how that money is best used. Policies available include:

Short-Term Disability - How would you pay bills if you're disabled and can't work? An Aflac short-term disability policy provides cash benefits while you concentrate on getting better. The policy covers both total and partial disabilities and benefit amounts, and coverage periods can be customized to meet your needs.

Accident - When a covered accident happens to you, our accident insurance policy pays you cash benefits to help with the unexpected medical and everyday expenses that begin to add up almost immediately.

Even with medical insurance, there may be significant out-of-pocket expenses to pay. Aflac cash benefits can provide for the initial doctor, urgent care, or ER visits. Cash benefits are also available for follow-up treatments, hospitalization, intensive care confinement and specific injuries (e.g., fractures, burns).

Cancer - Aflac's cancer/specified-disease insurance policy can help you and your family better cope financially if a positive diagnosis of cancer ever occurs.

Men have around a 1 in 2 lifetime risk of developing cancer, while women have around a 1 in 3 risk. Major medical may not cover the cost of things like deductibles, co-pays, lost work time, or even travel. Aflac pays cash benefits directly to you to help with cancer-associated costs. Aflac also pays a benefit for early detection and preventative care like mammograms, PSA blood tests, and many other cancer screenings.

Hospital Confinement - Hospital stays are expensive. An Aflac hospital confinement indemnity insurance policy can help ease the financial burden of hospital stays by providing cash benefits.

Any illness or injury that requires hospital confinement, treatment, or surgery can place a large economic burden on you and your family. Aflac's Hospital Confinement policy pays cash benefits for covered hospital expenses like ER visits, hospital confinement, medical diagnostic and imaging, ambulance, and surgeries.

Critical Care - An Aflac specified health event insurance policy is designed to help with the costs of treatment if you experience a covered health event. Health emergencies are not only life-altering events but also financially devastating. Aflac provides a lump sum payment upon diagnosis of a covered event, with additional benefits to be paid for hospital or ICU confinement, ambulance, transportation, and therapy.

AFLAC Policies

Aflac policies are tailored to your specific needs and benefit levels desired. Therefore, rates will vary. For more info or to enroll, please contact the dedicated OCAA Aflac representative **John Christensen at (909) 767-1401** or email your contact information to aflac@pgagencies.com.

Pet Insurance by Nationwide

Available for Dogs, Cats, Birds, & Exotic Animals

Our cuddly companions are part of the family, and we strive to provide them with the best care, but sometimes costs make decisions difficult. Pet insurance removes costs from the decision process and allows you to focus on the best course of treatment for your loved ones.

Nationwide Pet Insurance offers multiple plans to meet your needs. They offer both defined benefit plans that pay a set dollar amount for each covered procedure. They also offer percentage reimbursement style plans that pay a percentage (50% and 70% levels available) of the procedure cost.

All plans allow you to use any vet, including specialty and ER, of your choosing. Plans may include coverages for:

- Veterinary Exams
- Wellness Exams
- Vaccinations
- Prescription Medicine
- Hospitalization
- Surgeries
- Injuries
- Illnesses
- Cancer
- Specialty Vets
- Emergency Vets
- Hereditary Condition
- Chronic Condition
- X-Ray, MRI, CT Scan, Ultrasound
- Prescribed Therapeutic Diets
- Prescribed Nutritional Supplements
- Dental Diseases
- Congenital Conditions
- Blood Disorders
- Eye Disorders
- Musculoskeletal Disorders
- Respiratory Conditions
- Behavioral Exam & Treatment
- Flea & Heartworm Prevention
- Blood Work
- Urinalysis
- Diagnostic Testing
- 24/7 *vethelpline*

Monthly Premiums (Paid Directly to Nationwide)

Premiums vary based on your desired coverage level and factors such as pet type, breed, and age.

For a quote, to enroll, or for more information, visit www.petinsurance.com/ocaa or call Nationwide at (877) 738-7874 and mention OCAA for the special discounted rates.



United Pet Care Benefits Summary

United Pet Care is the affordable pet health savings plan that works for all pets.

For less than \$20/month per pet, **save 20-50% on every visit to an in-network primary care vet**, without the red-tape that comes with the other pet insurance providers (like higher rates as your pet ages, mandatory deductibles, or exclusions on pre-existing conditions, breed, or age).

To learn more, visit unitedpetcare.com/members and enroll to save **for the lifetime of your pet**, not just while you're with your employer!

What's Included

When you become a UPC member, you'll gain lifetime access to:

- 20-50% savings at an in-network primary care veterinarian
- Free 24/7 virtual care for off-hour questions and concerns
- **NEW:** \$500, 0%-interest Fido Vet Spending Card, powered by medZERO*
 - Can be used at any vet in the U.S., including those outside UPC's network
- Up to 87% savings on prescriptions with a human equivalent
- Savings on mobile care, testing kits, training, and more!

UPC Monthly Rates	
First Pet	\$17.50
Each Additional Pet	\$16.50

Enroll Today!

To start saving on your pet's healthcare, follow these 5 simple steps:

1. **Enter your information** at unitedpetcare.com/enroll
2. **Check "Yes"** when asked if you're enrolling through a benefits plan and **select your employer/group**.
3. **Review** your plan rates and select your Primary Care Vet using the search tool.
4. **Finalize your information** and add your pet information in your UPC member portal.
5. **Save your ID card from the portal** and show it at your selected vet to start saving!



Visit unitedpetcare.com/enroll to enroll today!

Questions? Email info@unitedpetcare.com, call 877-872-8800, or visit unitedpetcare.com/members.

*Fido by medZERO is administered by medZERO, Inc., with financing provided by its lending partners. United Pet Care (UPC) members are provided access to this program but UPC is not involved in lending decisions, program administration or operations. No credit checks are required. Most members will qualify; however, in some cases, additional eligibility verification may be required, and individual approval results may vary. medZERO loans are issued at 0.0% APR with no interest or fees. This is not a loan offer. All loans are subject to review and approval by medZERO's lending partners. Please refer to your medZERO Loan Agreement for full terms. Refer to <https://get.medzero.com/fidoupc> for details.

Emergency Assistance Plus

Emergency Assistance Plus <u>Annual</u> Premium	
Member Only	\$139
Member + Family*	\$199
*Family coverage includes Spouse and Dependent Children • Through age 18 • Through age 22, if unmarried and a full-time student • Adult children or grandchildren who are solely dependent on the member for support due to mental or physical disabilities.	
To enroll: www.myeaplust.com/pedit or call: (877) 883-1935.	

Emergency Assistance Plus (EA+) is a crucial safety net that protects you when you travel. Whether you're traveling across the state or across the world, this annual membership program protects you.

If facing a medical emergency, EA+ automatically steps in to help you with more than 20 emergency and medical services, so you can focus on your recovery and not on the costs. You'll feel confident knowing that if the hospital you're admitted to can't properly treat your condition, EA+ will transport you to the nearest appropriate hospital. Once you're stable, EA+ will arrange your transportation home.

EA+ services include:

Medical Evacuation

- Emergency medical monitoring by an EA+ medical expert.
- Air ambulance or emergency medical evacuation from an inadequate facility to the nearest appropriate facility.
- A medical specialist is sent to you to assist in determining your medical condition and travel suitability.
- Continuous updates to your designated family member or physician.

Medical Assistance

- Transferring your insurance information to medical providers to ensure your medical care is not delayed or denied.
- Cash advance for medical payments against a valid credit card.
- Prescription replacement assistance.
- Worldwide 24-hour doctor/ER/dentist/attorney locator.

Transportation Home

- Transportation home after hospitalization.
- A nurse escort during your trip home, if deemed necessary.
- Return of deceased remains.
- Vehicle returned home.

Assistance for Companions

- One round-trip economy-class airline ticket to bring a loved one to your hospital bedside if you're traveling alone.
- Airfare home for dependent children or grandchildren who are left unattended due to your hospitalization.
- Emergency message forwarding assistance.
- Pet care and return home assistance.
- Ticket home for a traveling companion if you are evacuated, transported home or pass away while away from home.

Vital Travel Assistance

- Intelligence regarding weather, travel, health, inoculations, travel restrictions, & special events.
- Real-time security intelligence on political unrest, social instability, weather, & health hazards.
- Emergency cash transfer assistance against a valid credit card.
- Lost luggage assistance.
- Document replacement assistance.
- Language interpretation assistance.
- Assistance in making flight arrangements, securing visas, and with other logistics if you need to leave a threatening situation.

EA+ has been exclusively offered by Worldwide Rescue & Security (WRS) for over 20 years. WRS is a leading provider of emergency travel, rescue and security products to members of affinity clubs, loyalty groups, alumni associations, professional organizations, auto clubs and airline loyalty programs. WRS partners with top medical assistance companies to provide emergency related services to members.

With EA+, you will have access to:

- Customized medical, security and travel assistance 24 x 7, 365 days a year,
- Access to a network of 32 medical assistance companies located over 5 continents,
- 53 response centers throughout the world,
- Access to over 1500 air ambulances worldwide,
- Medical teams responsible for continual monitoring of travelers around the world receiving medical attention,
- Expert staff fluent in 70+ languages and in-depth knowledge of local cultures and procedures,

Personal Accident

All Benefit Levels Include Secure Travel Rider

Accidental Death Benefit Amount	Member Monthly Premium	Member & Family Monthly Premium
\$25,000	FREE	FREE
\$100,000	\$3.82	\$5.02
\$250,000	\$11.47	\$15.07
\$500,000	\$24.22	\$31.82
Spouse / Domestic Partner benefit is 50% of member benefit (40% if child is covered). Child benefit is 10% of member benefit, max \$30,000. Age reduction applies: Age 70: 65%; Age 75: 45%; Age 80: 30%		

This low-cost policy protects you and your loved ones in case of serious injury or death in an accident. Coverage is guaranteed - no medical questions and all ages are covered! Coverage is also available for your spouse/domestic partner and your child(ren) up to age 26.

The Personal Accident portion of this plan is a **cash benefit**. If you or your covered loved one is seriously injured or killed in an accident, a cash benefit will be paid out. Member benefit levels range from \$100,000 to \$500,000.

Additional benefits included at no additional cost are:

- ✓ Up to an additional \$25,000 for home alteration & vehicle modification.
- ✓ Up to an additional \$10,000 for rehabilitation expenses.
- ✓ Up to an additional \$37,500 for wearing a seatbelt & having a functioning airbag.

The **Secure Travel** rider is included with all benefit levels. It provides special benefits any time you travel more than 100 miles from your home. Use of these benefits does not reduce payment level you have selected for Personal Accident. These benefits are completely independent.

- ✓ Emergency Medical Evacuation
- ✓ Repatriation of remains
- ✓ Prescription refill services
- ✓ Assistance with lost or stolen items
- ✓ Translation and interpretation services
- ✓ If traveling alone, transportation for a loved one if you're going to be hospitalized for 10+ days.
- ✓ Return travel for companion who is delayed due to your emergency.
- ✓ Return travel for dependent child (<16) who is left unattended because of your emergency.
- ✓ Up to \$10,000 upfront guarantee of payment for needed medical expenses so you can get the necessary care you need. You are responsible for repaying these funds to Secure Travel.
- ✓ Emergency Cash Advance - Up to \$1,500
- ✓ Pre-trip planning services
- ✓ Emergency message relay
- ✓ Medical / Dental referrals
- ✓ Legal, Embassy, & Consulate referrals

Frequently Asked Questions

When does the Open Enrollment period end?

Forms must be postmarked by November 14, 2025. We strongly recommend you submit your form as early as possible, so we may address any issues and make sure you receive an ID card before your coverage(s) start.

When do the coverages begin?

Coverages will begin January 1, 2026.

I'm not making any changes; do I have to do anything?

No! If you are not making any changes to your current coverages, you do not need to submit an enrollment form. Your current coverages will continue.

Can I add my spouse/domestic partner or dependent child to my coverage?

Yes. To add a dependent to your coverages, complete the enrollment form and select the appropriate Member + [Dependent] box. Please make sure to provide all the dependent information.

How do I cancel a benefit I'm currently enrolled in?

If you wish to cancel a benefit, please write cancel across the benefit box. *Leaving the box unchecked will not cancel that benefit.* You may also send an email to cancel@pgagencies.com stating your name, date of birth, and which benefit plan you wish to cancel. Please note, we cannot cancel your membership in the retiree association. You must contact the association for membership changes.

Who do I contact with questions?

With regards to *any benefit plan listed in this booklet*, please contact Pacific Group Agencies, the Benefit Plans Administrator, at 800-511-9065 or OCAA@pgagencies.com.

Do NOT contact OCAA, HR, or Orange County about these plans. They will be unable to help you.

I have coverages with the County, do I have to cancel their plan if I enroll in yours?

Enrolling in these plans will not affect your enrollment in other plans. If you wish to cancel a County plan, you must contact them directly.

Notes

Disclaimer & Member Requirements

In promoting the health, well-being, happiness, and continuing productivity of its members, OCAA members have access to voluntary benefits offered through Pacific Group Agencies (PGA). OCAA itself does not endorse, provide, or administer these benefits, but rather makes them available to members. OCAA may receive compensation from PGA for administrative assistance and member access.

This guide contains summaries and highlights. Certain wording has been shortened or changed into “plain English”. Exclusions, limitations, and eligibility requirements may apply. While every effort has been made to ensure this information is accurate and fairly represents the coverage offered, mistakes can occur. This is not a Certificate of Insurance (COI) and nothing written or implied will change the COI terms.

An individual cannot assume they have effective coverage, even if they submitted an enrollment form, until the carrier has sent the proposed insured verification of coverage including effective date.

Insurance carriers have the right at any time to change: the rules, regulations, terms of coverage, availability, guidelines placed on the application, policies, enrollment, rates, and offering of products. While infrequent, without warning providers may discontinue their affiliation with an insurance company. There is no guarantee that a provider will remain affiliated with an insurance company.

Some plans have a minimum commitment. Should you cancel coverage by any action, including stopping payment, before the commitment is up, PGA, at its sole discretion, reserves the right to retroactively cancel your insurance to the original effective date and refund your premiums paid. You acknowledge responsibility for any outstanding or paid claims and discounts received by utilizing a network provider.

Coverage may be terminated without warning should payment stop for any reason or your OCAA membership lapses.

Cancellations:

- Cancellations must be received by the 5th of the month for processing for the next following month.
- **We do not accept phone cancellations.** Cancellations must be in writing to PGA, by email (cancel@pgagencies.com), mail, or fax (800-549-0059). Cancellations sent to the insurance carrier, retirement system, or OCAA, may not be processed and under no circumstance is PGA liable to refund premiums taken due to us not receiving proper or timely notice. PGA may adjust your cancellation date to match deductions received.
- Payment cancellation may result in monies being owed to PGA for premiums advanced. You agree to reimburse PGA all monies owed, and costs associated with collection of these monies.
- Retroactive cancellation requests will not be honored.

It is the responsibility of the member to:

- Report to PGA changes that affect insurability or eligibility of dependents, including children becoming over-age. We do not track the age of your children. Notifying the retirement system or OCAA will not suffice as privacy laws prevent the relay of this information. Premiums are considered earned and cannot be refunded should you fail to notify us.
- Confirm you are enrolled in the correct and suitable plan.
- Maintain OCAA membership while enrolled in the benefits.
- Provide address changes to PGA.

For questions on the plans or the enrollment process, please contact the plan administrator, Pacific Group Agencies, CA License 0078489, at: (800) 511-9065 or OCAA@pgagencies.com.

Beautiful landscape of Laguna Beach ocean
coastline with palm trees in Treasure Island Park,
Orange County, California.
Photo Courtesy Adobe Stock Images.



PACIFIC GROUP AGENCIES, INC.

Tel: (800) 511-9065 • Fax: (800) 549-0059 • OCAA@pgagencies.com
Monday - Friday 7AM - 4PM

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