

Affiliate:

 **PACIFIC GROUP AGENCIES**



Benefits Available Exclusively for Members of Association of Mendocino County Retired Employees



These plans are offered exclusively to AMCRE members and are independent of any plan offered by Mendocino County.

Your enrollment in any of these plans does not affect any plans you may have through the county.

Dear Retiree:

AMCRE is an officially recognized, member-supported, non-profit, non-partisan organization representing Mendocino County retirees. Members enjoy exclusive resources and events, including health, wellness and fairs, luncheons, and the AMCRE newsletter, as well as access to voluntary group insurance plans administered by Pacific Group Agencies and described in this Benefits Package.

To strengthen our organization and become an AMCRE member, please complete the membership enrollment form below. If you wish to enroll in any benefit plans, complete the Benefits Enrollment Form on the reverse. There are no waiting periods when you enroll. Simply review the materials, select your plans, and return the form to Pacific Group Agencies.

This booklet highlights only a selection of the benefits available to you. To explore your full range of benefit options, including AMBA Passport, our member discount program, please visit our website at www.pgagencies.com/AMCRE.

For questions about the plans in this guide, please contact Pacific Group Agencies, the Benefit Plans Administrator, at (800) 511-9065 or AMCRE@pgagencies.com. **Please do not contact AMCRE, MCERA, or the County regarding these plans, as they are unable to assist.**

Sincerely,
AMCRE Board of Directors

Last Name		First Name	
Mailing Address			Telephone
City	State	Zip	Email Address
Department Retired From		Date Retired	Years of Service
I hereby authorize MCERA to deduct the AMCRE monthly dues (currently \$2) from my monthly retirement benefits for payment of membership dues to the Association of Mendocino County Retired Employees (AMCRE). I understand that this authorization will be in effect until revoked by myself, my surviving spouse and/or beneficiary, or another person that I have designated in writing to do so.			
Sign Here 		Date _____	



Benefit Plan Enrollment Form

For Office Use Only
Received
Effective Date

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

Last Name		First Name		Full SSN (Required)	
Male/Female	Date of Birth	Telephone	Email Address		
Home Address					
City			State	Zip	
I hereby authorize MCERA to deduct from my retirement benefit 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 and I acknowledge that I have read the Member Requirements and Disclaimers in the benefit package. Sign Here → _____ Date _____					

Step 2: If selecting dependent coverage, provide their information.

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

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

Dental		Vision		ID Shield
<i>Select Plan (Select one):</i> ☐ PPO High Plan (Ameritas) ☐ PPO Low Plan (Ameritas)	<i>Who is covered (Select one):</i> ☐ Member ☐ Member + Spouse ☐ Member + Child ☐ Member + Family	<i>Who is covered (Select one):</i> ☐ Member ☐ Member + Spouse ☐ Member + Child ☐ Member + Family	<i>Who is covered (Select one):</i> ☐ Member ☐ Member + Spouse <i>This plan requires an email address.</i>	
Personal Accident			Legal Shield	
<i>Who is covered (Select one):</i> ☐ Member ☐ Member + Spouse	<i>Select AD&D Benefit Amount:</i> ☐ \$100,000 ☐ \$200,000 ☐ \$300,000 ☐ \$400,000 ☐ \$500,000	<i>Provide beneficiary information:</i> <i>Beneficiary(ies):</i> _____ <i>Relationship:</i> _____		<i>Plan covers member & family.</i> ☐ Member + Family <i>This plan requires an email address.</i>
United Pet Care		Life Insurance		
☐ Number of pets: _____		☐ If you are interested in applying for life insurance, please check here.		

How To Enroll

By Mail: Complete the member and benefit plan enrollment forms and return in the postage paid envelope provided.

Online: An online form is available at www.pgagencies.com/AMCRE which is submitted to us automatically upon completion.

Email: Send a scanned copy of your completed forms to AMCRE@pgagencies.com

Fax: Send the completed forms to (800) 549-0059.

Pacific Group Agencies
25101 The Old Road #150
Stevenson Ranch, CA 91381-9901

Ameritas Dental High Plan

Finding a Provider

Ameritas PPO Plans:

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

Need assistance? Contact our office at 800-511-9065
 or email AMCRE@pgagencies.com

Dental work becomes more expensive every day and as too many people find out, going without dental insurance can be a very costly mistake. 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.

This PPO plan lets you see any dentist — no network required! However, if you choose an Ameritas Network dentist, you’ll save significantly, typically 25–50% off regular rates. With over 325,000 providers nationwide, there’s a strong chance your dentist is in the Ameritas network.

Dental Rewards® is included in this plan. This feature allows members to carry over part of their unused annual maximum by submitting at least one claim during the year and staying below the benefit threshold. Maximum possible accumulation is \$1,000.

Ameritas Dental PPO - High Plan Monthly Premium	
Member Only	\$53.90
Member + Spouse or Child	\$107.80
Member + Family	\$148.50
<i>Child coverage available until age 26 unless they are a disabled adult dependent.</i>	

Description	Network Dentist	Non-Network Dentist*
Calendar Year Benefit	\$1,500	
Dental Rewards Applied when a claim is filed and benefits received do not exceed \$750 annually	\$400/year	\$250/year
Calendar Year Deductible Waived for Preventative	\$50/person	\$75/person
Preventative Services		
Cleaning, Oral Exam, Bitewings	100%	80%
Basic Services		
Filling, Simple Extraction, Panoramic X-Ray, Denture Repair & Reline, Recement, Biopsy, Emergency Pain Relief	75% - Year 1	75%
	80% - Year 2	
	85% - Year 3	
Major Services		
Crown, Implant, Periodontics, Endodontic, Root Canal, Bridge, Denture, Extractions, Anesthesia, Bone Augmentation, Inlay and Onlay Restoration, Bridge Repair, Space Maintainer	50%	50%
<i>*Benefit Levels are based on the Maximum Allowable Charge (MAC) for Services</i>		

Ameritas Dental Low Plan

Ameritas Dental PPO - Low Plan Monthly Premium	
Member Only	\$40.70
Member + Spouse or Child	\$86.90
Member + Family	\$135.30
<i>Child coverage available until age 26 unless they are a disabled adult dependent.</i>	

This plan offers the same great Ameritas coverage and service at a more affordable price point - perfect for those who need coverage primarily for routine visits and preventative care. Though we know that unexpected dental care can appear quickly - this comprehensive dental plan covers over 360 procedures, from routine cleanings to major items including crowns and dentures.

This PPO plan lets you see any dentist — no network required! Plan benefits are not reduced by visiting an out-of-network provider so it is perfect for those who already have established care with a provider they love.

Dental Rewards® is included in this plan. This feature allows members to carry over part of their unused annual maximum by submitting at least one claim during the year and staying below the benefit threshold. Maximum possible accumulation is \$1,000.

Description	Network Dentist	Non-Network Dentist*
Calendar Year Benefit	\$1,000	
Dental Rewards Applied when a claim is filed and benefits received do not exceed \$500 annually	\$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 and Major Services		
Fillings, Restorative Composites (Anterior and Posterior), Endodontics (Surgical and Nonsurgical), Periodontics (Surgical and Nonsurgical), Simple and Complex Extractions, Denture Repair, Anesthesia, Onlays, Crowns, Crown Repair, Prosthodontics (Fixed Bridges, Removable Complete/Partial Dentures)	50%	
*Benefit Levels are based on the Maximum Allowable Charge (MAC) for Services		

VSP Vision

VSP Vision Monthly Premium	
Member Only	\$13.02
Member + Spouse or Child	\$26.04
Member + Family	\$38.44

Eyecare is vital to your overall wellbeing. Eye exams not only can detect signs of potentially blinding conditions like glaucoma, diabetic eye disease, and macular degeneration, but they can also detect signs of cardiovascular disease, hypertension, diabetes, and high cholesterol that may go unnoticed.

This VSP PPO vision plan allows you to use any eye care provider, but choosing a VSP Choice Network provider provides you the highest benefits and lowest out-of-pocket costs.

Local VSP “Choice Network” providers can be found 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
Elective	\$200	\$105
Frames	\$200	\$70
Deductible	Exam: \$10 / Material: \$25	
Frequency (Months)	Exam: 12 / Lens: 12 / Frame: 24	
Lens Options at VSP Providers	Member Co-Pay	
Progressive Lenses (Premium & Custom)	\$40	
Polycarbonate (Standard)	Child: \$0 / Adult: \$33	
Dye (Plastic Gradient / Solid Plastic)	\$15 - \$17	
Photochromatic Lenses	\$31 - \$81	
Anti-Reflective Coating	\$17 - \$33	
Scratch Resistant Coating	\$43 - \$85	
Ultraviolet Coating	\$16	

Personal Accident (AD&D) with Secure Travel

Personal Accident (AD&D) with Secure Travel		
Benefit Level	Member Monthly Premium	Member + Family Monthly Premium
\$100,000	\$4.90	\$6.60
\$200,000	\$9.80	\$13.20
\$300,000	\$14.70	\$19.80
\$400,000	\$19.60	\$26.40
\$500,000	\$24.50	\$33.00
<i>Age reduction applies: Age 70: 65%; Age 75: 45%; Age 80: 30%</i> <i>Spouse / Domestic Partner benefit is 50% of member benefit (40% if child is also covered).</i> <i>Child benefit is 10% of member benefit (max \$30,000).</i>		

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 children 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 extra cost include Cash benefit towards home alteration, vehicle modification, and rehabilitation expenses

A **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 from the AD&D benefit.

- Emergency medical evacuation & repatriation
- Medical, dental, legal & embassy referrals
- Prescription refill & translation assistance
- Emergency cash advance (up to \$1,500)
- Travel support for companions or dependents during emergencies
- Up to \$10,000 medical expense payment guarantee (repayable)

For full plan coverage info, please contact us at 800-511-9065 or email AMCRE@pgagencies.com

United Pet Care

United Pet Care Monthly Premium	
First Pet	\$17.50
Each Additional Pet	\$16.50

**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. Individual approval results may vary. This is not a loan offer. All loans are subject to review and approval by medZERO's lending partners. Refer to <https://get.medzero.com/fidoupc> for details.*

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

For less than \$20 per 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 for pre-existing conditions, breed, or age.)

• 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!

LegalShield

Monthly Premium	\$15.95
Spouse / Domestic Partner coverage is automatically included.	
Child coverage applies if child is: • Under 18. • Under 21 (23 if full-time student) and they live at home and have never been married. • Any age, mentally or physically disabled, and a dependent of the member.	
This plan requires an email address.	

Everyone deserves affordable legal protection – including you.

With LegalShield's legal protection plan, you will have the power to access legal advice and services when you need them.

Plan benefits include:

- 24/7 Emergency Access
- Advice and Consultation
- Letters/Phone Calls - Personal and Business
- Document Review - Personal and Business
- Civil & Criminal Trial Defense
- Will Preparation
- Power of Attorney
- Income Tax Audit Services

Expected and unexpected legal matters arise every day. With LegalShield on your side, you get access to advice and counsel on an unlimited number of personal legal matters from an experienced attorney. Services are just a phone call away.

Please visit <https://shieldbenefits.com/peditrust/legal> for additional plan details.

IDShield

Member Only	\$8.45
Member + Family: (Children up to age 18)	\$15.95
Save \$3/month when bundled with LegalShield for you and your family.	
This plan requires an email address.	

Protect your identity and privacy. With IDShield, you will receive monitoring of your personal information, credit, social media accounts, and more. If your identity is compromised, it will be restored on your behalf by licensed private investigators.

- Monitors and detects:
 - Address Changes
 - Dark Web Activity
 - Public Records
 - Court Records
 - Payday Loan Activity
 - Personally Identifiable Information
- Continuous Experian Monitoring
 - (3 Bureau upgrade Available)
- Full-Service Restoration
 - Members have unlimited access to identity consultation services. An investigator will advise you on best practices tailored to the specific situation and can open a case for restoration. IDShield will do whatever it takes, for as long as it takes, to restore your identity to its pre-theft status.
- Credit Inquiry and Threat Alerts
- Credit Freeze Assistance
- Data Breach Notifications
- Identity Theft Alerts
- Live Member Support
- 24/7 Access

Please visit <https://shieldbenefits.com/peditrust/idshield> for additional plan details

Frequently Asked Questions

How do I enroll in benefits?

To enroll in a benefit plan, please complete and return the attached Membership Enrollment and Benefits Enrollment Forms to Pacific Group Agencies by mail, fax, email or online submission.

How are the premiums paid?

Premiums are paid via automatic deduction from your retirement system pension. You will see a deduction on your monthly earning statement reflecting the amount deducted.

When do coverages begin?

Coverages will begin on a 1st of the month basis. We must receive enrollment information from you before the 5th of the preceding month to ensure enrollment and deductions changes can be submitted.

Can I enroll at any time?

Yes! Enrollment in all plans is available year-round. Effective dates will be determined by the date we receive your enrollment form.

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.

If I'm not making any changes; do I need 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.

Is this the benefit guide for my county sponsored benefits?

No. This book is for voluntary supplemental benefits available to members of AMCRE. They are separate and apart from any benefits you may have through the county retirement system.

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.

If I don't send in a form, will that cancel my current enrollment?

No! 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 the plans listed in this book, please contact Pacific Group Agencies, the Benefit Plans Administrator, at 800-511-9065 or AMCRE@pgagencies.com.

Do not contact AMCRE, MCERA, or the County about these plans. They will be unable to help you.

If you have payroll questions, or questions about other benefits, you may reach out to the relevant parties.

Disclaimer & Member Requirements

AMCRE members have access voluntary benefits offered through Pacific Group Agencies (PGA) as a membership perk. AMCRE does not endorse, provide, or administer these benefits but makes them available to members and may receive compensation from PGA for administrative assistance and member access.

This guide contains summaries and highlights written in simplified language. Exclusions, limitations, and eligibility requirements may apply. While efforts are made to ensure accuracy, errors may occur. This document is not a Certificate of Insurance (COI), and nothing herein changes the terms of the official COI. Coverage is not effective until the insurance carrier provides written verification, including the effective date.

Insurance carriers may change rules, coverage terms, rates, enrollment guidelines, or product availability at any time. Providers may also discontinue participation with insurers without notice.

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 also terminate without notice if payments stop or AMCRE 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 AMCRE, will 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 advanced premiums. 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 AMCRE 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 AMCRE 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 at: (800) 511-9065 or AMCRE@pgagencies.com.

Pacific Group Agencies, in California, DBA:
Association Member Benefits & Insurance Agency
CA LIC 0I96562, Arkansas LIC 100114462