



**SEVENTH-DAY ADVENTIST CHURCH**  
**Southeastern California Conference**  
**UNDERSTANDING YOUR HEALTH CARE ASSISTANCE PLAN**

**WHO IS ELIGIBLE?**

You are eligible to participate in the Health Care Assistance Plan (HCAP) if you are currently employed on a full-time basis. You are also eligible to participate if you are currently a seminary student who is being sponsored by your conference. Your spouse and dependent children may be covered by the Plan if they meet the eligibility requirements. However, no person may be covered at the same time both as an employee and dependent. To determine your eligibility please contact the Plan Administrator to review the complete eligibility rules and participation requirements outlined in the current Plan document.

**WHAT ELSE SHOULD I KNOW?**

Please note that this is a summary of the benefits as covered under HCAP effective January 1, 2001. This bulletin should answer most of your questions about the Plan. However, this bulletin does not fully describe all of the benefits of the SECC HCAP plan, limitations, and exclusions. For more specific details or to obtain further information, contact the HR Department to examine the current Plan document.

<b>PLAN BENEFITS</b>	
Hearing Care (hearing aids only)	<ul style="list-style-type: none"> <li>• Paid at 80% of charges</li> <li>• \$3,200 Maximum Payable per Plan Year</li> <li>• NOTE: PacifiCare members have \$5,000 allowance every two years; PacifiCare coverage will be Primary coverage for hearing aids.</li> </ul>
Refractive Eye Surgery 	<ul style="list-style-type: none"> <li>• Paid at 80% of charges</li> <li>• \$2,400 maximum payable lifetime</li> </ul>
Vision Care 	Necessary vision care may be provided for Refractive eye examinations; prescription eye glasses; prescription eye glass frames; contact lenses <ul style="list-style-type: none"> <li>• Paid at 80% of charges 80% of \$700</li> <li>• \$560 Maximum Payable per Plan Year</li> </ul>
Dental Care	<ul style="list-style-type: none"> <li>• Coverage by Delta Dental effective 1/1/2011</li> <li>• <a href="http://www.deltadentalins.com">www.deltadentalins.com</a></li> </ul>
Orthodontic Care	<ul style="list-style-type: none"> <li>• Coverage by Delta Dental effective 1/1/2011</li> </ul>