## AFA HEALTH AND WELFARE BENEFITS SURVEY Spring 2010



**Results Overview** 

Date: 5/7/2010 10:42 AM PST Responses: Completes Filter: No filter applied

#	Response
1	As a "regular" faculty member, it is hard to know what's best. I trust AFA to closely examine all the angles and not "give away the farm" now, for when the economy improves faculty will have to live with the decisions made for a long time to come.
2	I am confident that AFA negotiators will attempt to constrain these new costs for faculty to the lowest possible for next year.
3	If both proposals are adopted, it will decrease my salary by ~\$1500. It includes a lower qualiaty/higher cost plan and adds out-of-pocket expenses. Can either of these be part of the cafeteria plan? Sweet deal for the district.
1	I am currently on Pre-retirement Reduction. You didn't have a category for that in #11.
5	I am assuming that if option 2 on medical benefits "wins" there will be no other changes to the benefits as they are now - i.e. no general or Rx plan deductibles and no increases in Rx co-pays.
5	Good luck to you negotiating on our behalf during such difficult economic times. I know we have to pay more to preserve our "cadillac plan" but I surely hope we don't have to give up the pre-retirement option at age 55. Even though I don't know whether or not I'll use it I'm SO glad it's there as an option. Thanks for all your hard work!!!
7	If they are going to start cutting into our health benifits, give us a set amount in cash to buy what we want. This also would increase our salary in retirement. The Gov't is going to start taxing this benifit soon anyway.
3	If I choose the Pre-retirement Reduction in Workload, will my benefits still be covered if the proposed changes are made?
Ð	I think a 3 year transition to the proposed change in eligibility (60 years old instead of 55 years old) is too short. I generally support ERO recipients paying a greater portion of their healthcare premiums.
10	I'm already on the pre-retirement plan.
1	I would rather the cost savings come from salary rather than benefits.
12	It is impossible for me to support proposal 1 with the phrase "not available at this time". Does that mean that a plan with a deductible is not available? Or does that mean that the deductible could be anywhere between \$1 and \$10000? It makes a HUGE difference! I'm also not totally clear on what "10-month cost sharing" means. Is that \$50 per month or total for the year?
13	Is there no either/or option! That is, agree to Proposal 1 and not to Proposal 2 OR agree to Proposal 2 and not to Proposal 1. I understand that the District wants BOTH, but what if WE don't want both???
14	I hope to retire next year after 30 years of full-time teaching, unfortunately, I have not spent all 30 years in one place, e.g., at SRJC. That means that I will lose paid health benefits when I retire (and I won't yet be eligible for Medicare). There's something wrong with any system that ends up with this result. Do something about health care!
15	Please don't negotiate away the step increase. It is the only thing that somewhat ameliorates the raw deal we in the middle steps got a few years ago.
16	I strongly urge AFA to consider "donating" the two wasted flex days that are currently scheduled to help the district defray costs. Temporary elimination of the district's staff development budget must result in substantial savings. If that is not palatable, at least eliminate both flex days, if not all four PDA days, while maintaining (to what purpose, other than to keep people employed? Admittedly, none) the current staffing in Staff Development.
17	Currently I am not enrolled in the Districts health plan. I receive medical benefits from my spouse's plan and receive the Flex Cash benefit. I do however rely on the Vision and Dental plans offered by SRJC.
.8	I am currently participating in the Pre-retirement workload reduction.
.9	It is encouraging to note your shift of focus from the part time issue to these substantive work related issues. Nice job!
20	Thank you for this very clear, informational survey.
21	While I oppose cost sharing of benefits, I trust AFA to do their best in negotiations, and I am forever grateful for the work that each AFA officer does on behalf of the faculty no matter what the outcome of negotiations.
22	A question about if it boiled down that one of the above proposals had to be implemented indicate the preference and the degree of support. I suspect that a lot of people will strongly oppose both. That will tell you nothing. A question that assigns a total of 10 points where one assigns part of the 10 to proposal 1 and the rest of the points to proposal 2 would probably provide useful info in a year were tough choices will be made.
23	best of luckI know how hard you are workingtough job. Thanks!
24	The unknown deductible amount in the Kaiser Plan is a major deciding factor for me for proposal #1. I am new faculty who chose to leave a higher paying, in demand profession for the SRJC. If the financial compensation (directly or indirectly) changes significantly I will need to abandon the SRJC and return to clinical practice.
25	I have no attachment to early retirement or reduced load benefits at all, and I would be in favor of eliminating them entirely if it would save the district money. I'm tired of these whining, aging slackers.