



North Orange County Community College District  
Anaheim Campus – Benefits Office  
1830 West Romneya Drive □ Anaheim, CA 92801-1819

## INTRADISTRICT MEMO

To: Adjunct Faculty Members  
From: Tyler Noland/Benefits Specialist  
Date: October 1, 2015  
Subject: Adjunct Faculty Health Insurance Premium Reimbursement

The Health Insurance Premium Reimbursement Forms for the 2015 Fall Trimester/ Semester, 2016 Winter Trimester, and 2016 Spring Trimester/ Semester, are enclosed for your convenience. Reimbursement forms Part I and II must be returned to the District Benefits Office no later than:

Fall Trimester 2015 (Non Credit Classes)	December 4, 2015
Fall Semester 2015 (Credit Classes)	December 12, 2015
Winter Trimester 2016 (Non Credit)	April 1, 2016
Spring Semester 2016 (Credit Classes)	May 28, 2016
Spring Trimester 2016 (Non Credit)	June 24, 2016

Proof of insurance premium payment is also required. Any of the following are acceptable forms of proof of payment:

- Copy of canceled check.
- Copy of bank statement showing that the check has cleared.  
(Black out all confidential information on statement)
- Receipt from the health insurance company.

Fall Semester 2015 includes proof of payment for the months of August through December  
Fall Trimester 2015 includes proof of payment for the months of September through December  
Winter Trimester 2016 includes proof of payment for the months of January through March  
Spring Semester 2016 includes proof of payment for the months of January through May  
Spring Trimester 2016 includes proof of payment for the months of April through June

Reimbursement Forms Part I and II with all proof of payments **must** be returned no later than the appropriate date stated above.

No partial reimbursements will be distributed. Reimbursements will be for the full allowable amount or the maximum qualified amount only based on the proofs received. Only 1 (one) check per term will be issued. Please submit the Reimbursement Forms along with all proof of payments *together* to max out your reimbursement.

If you have any questions, please feel free to contact me at 714-808-4806 or [tnoland@nocccd.edu](mailto:tnoland@nocccd.edu).