

HELP CONTACTS

Revised September 19, 2008

If you have questions about a specific **Anthem Blue Cross Medical Claim**, you can call **(661)327-7581 or 1(800)322-5709**, the **Foundation for Medical Care**, where claims are actually processed. **Deanna Haulman, the District Insurance Specialist, is not involved in this process.** To replace **Health cards** call the number listed above. For verification of dependent coverage, call Foundation at the number listed above.

MedCall Program, a 24-hour, 7-days a week health information line staffed by nurses with access to a database of health information to help you answer your question @ **1(800)977-0027**.

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Questions regarding **Delta Dental Premier or Delta Preferred Option (DPO)** coverage can be answered by contacting your dentist or by calling **Delta's direct line @ 1(866)499-3001**.

Questions regarding **VSP Vision Plan (VSP)** can be answered by calling **1(800)877-7195**.

Questions regarding **Pacificare Behavioral Health** can be answered by calling **1(800)999-9585**. **Pre-Approval is required.**

Questions regarding **Standard Life Insurance Claims** can be answered by contacting Standard's Customer Service @ **1(971)321-3523 or (1(800)522-0406**. General questions call the **Kern High School District Insurance Office @ (661)827-3162 or (661)827-3164**

Questions regarding **Prescriptions** can be answered by calling **Medco @ 1(800)987-5241**. Your prescription card is part of your Blue Cross card.

Questions regarding **Workers' Compensation Claims** can be answered by contacting **Barbara Sachs in the District Office Personnel Department @ (661)827-3322**.

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If you have any questions regarding enrollment or termination of programs, adding dependents or making changes, call **Deanna Haulman @ (661)827-3162 or Virgie Bloodworth @ (661)827-3164**.

If you have any questions regarding **COBRA** accounts, contact **SISC @ (661)636-4410**.

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It is the employee's responsibility to be familiar with their payroll deductions and scrutinize their pay warrant stubs monthly for any discrepancies. If you find errors, contact **Deanna Haulman at (661)827-3162 or Virgie Bloodworth (661)827-3164**.

All fulltime employees **MUST** sign up for Benefits, it is **NOT** Optional.

Remember, you have **45 days** to sign up for your insurance coverage. If you fail to do so, it will only be available the month of September during Open Enrollment, **Effective October 1**, unless there is a change in your status during the school.

INSURANCE INFORMATION

- I. FOUNDATION FOR MEDICAL CARE OF KERN COUNTY - (661)327-7581 or 1(800)322-5709**
The Foundation for Medical Care of Kern County provides a list of Anthem Blue Cross Prudent Buyer Providers who have agreed to accept fees for medical services that are reasonable and customary. The District's health insurance carrier has set these fees (SISC – Self Insured Schools of California), and they have been accepted by the providers. A list of providers is included in this packet. Your School Office Supervisor will always have a current list and claim forms available in the office.

Please be aware that as of October 1, 1995 the employee is responsible for payment of 20% of agreed upon fees.

For medical problems that need immediate attention, but are not life threatening, SISC has an agreement with Catholic Healthcare West of Central California to provide emergency medical care at reasonable fees with the employee again responsible for 20%. Website: www.anthem.com/ca

- II. DENTAL (DELTA) – 1(866)499-3001**

Individuals who have no dentist in the Bakersfield area by calling the number listed above can obtain dental Services. Website: www.deltadentalins.com

Kern County Dental Society (Referrals & Emergencies) – 327-2666 (24 hours a day). This is a no cost service for employees covered by the District Dental Plan. All dentists are members of the Kern County, California and American Dental Societies. This means that they are covered with liability insurance and participate in “Peer Review” procedures for client problems and complaints. Most area dentists are members. If you use non-member dentists, your out of pocket expenses may be higher.

- III. VISION CARE PLAN VSP (Vision Service Plan) - 1(800)877-7192**

This is a no cost service for employees covered by the District's Vision Plan with \$5.00 deductible for classified staff and \$20.00 deductible for employees in the following groups: certificated, confidential, supervisory, classified management and skilled trades. This plan is designed to cover your visual needs rather than cosmetic materials. It normally covers eye exams, spectacle lenses and frames with limited coverage for contact lenses. The procedure to follow when making an eye appointment requires that the doctor's office verify eligibility by calling VSP. Once the approval is granted, the employee can set up an appointment. To see if a doctor is a VSP provider use the same number or a list is available on the VSP website: www.vsp.com

- IV. PRESCRIPTION SERVICE FOR MAINTENANCE MEDICATION - 1(800)987-5241**

Your Prescription Plan has co-pay; it cannot be used in conjunction with another plan. The information is on your Blue Cross medical card.

Website: www.medcohealth.com

A summary of benefits follows: 10/1/04 the plan has changed to a (2) Tier Plan.

Retail Prescriptions (30-day supply at a walk-in pharmacy)

	<u>Co-pay</u>
Generic Drugs	\$ 7.00
Brand Name Drugs	25.00

As of July 1, 2005, Costco will provide a 30-Day supply of a generic prescription at no cost (no co-pay). Costco membership is not necessary for this service. Exception: generic prescription that contains a pain medication is not available at no cost.

Mail Order Prescriptions (90-day supply from the Medco Health Mail Order Service)

Generic Drugs	\$ 14.00
Brand Name Drugs	60.00

V. **PACIFICARE BEHAVIORAL HEALTH** – 1(800)999-9585

Pacificare Behavioral Health is a licensed, behavioral health care plan providing professional and confidential mental health care services to assist employees and dependents resolve personal, emotional, psychiatric and drug and alcohol dependency problems. **Prior approval is necessary.** Varying fees are based on the number of visits and type of session recommended. You can contact the District Insurance Office for further information @ (661)827-3162. A brochure for more information is included in your packet and extras are available in the Insurance office in Personnel. A list of providers can be found on the website: www.pbhi.com

SISC: Self Insured Schools of California **Provisions of the Plan:**

- District-paid coverage for fulltime employees and all dependents. Four to seven hour classified employees are offered insurance with partial employee payment and part time certificated with at least one period a day, five days a week. Rates are determined using a percentage chart based on hours worked.
- Dependent children are covered until age. From age, 19 until their birth month in their 25th year, if they can legally be claimed as a tax dependent by one of their parents or are enrolled in school as a fulltime student they can remain in the plan.
- New dependents (spouses & newborns) are not automatically covered; the employee must complete a change form that is available in the Insurance Office.
- As of October 1, 2004, same sex domestic partners can be added to the plan. Opposite sex can be added once the partners are 62.
- Be sure to complete forms in case of a divorce or when a dependent child marries or no longer qualifies as a dependent, in order to have them removed from your insurance. Failure to remove will result in reimbursement of paid out claims and are the responsibility of the policyholder.
- \$200.00 deductible, per year, per person/\$500 per family, per year.
- If Prudent Buyer Provider Doctors are used, 80% of the fees will be paid.
- If Prudent Buyer Provider Hospitals are used, 80% of fees will be paid on in-house treatment or surgery. They will charge “reasonable and customary” fees.

- See your School Office Supervisor or the District Office Insurance Specialist for a list of doctors and hospitals.
- If non-providers are used the fees will be substantially higher.

KERN HIGH SCHOOL DISTRICT EMPLOYEE DENTAL INSURANCE – Delta Dental Plan

SISC: Self Insured Schools of California

How to use the plan:

A list of Delta Plan Dentist is available at the Kern High School District Insurance Office and should be posted at the various sites throughout the District. Dental cards are NOT issued; only the employee's social security number will be required.

You will not need to pay for services at the time of your appointment. The dentist office will submit the claim forms for payment.

How the plan pays: This is a decreasing co-payment plan.

1st year plan is used: The plan pays 70% of the total billed.

2nd year plan is used: The plan pays 80% of the total amount.

3rd year plan is used: The plan pays 90% of the amount.

Thereafter: The plan pays 100%.

Consecutive years of usage are not a requirement of this plan, there may be breaks in service without loss of current percentage.

The percentage only changes as the plan is used, it will only change one percentage level in a calendar year. Once the 100% level has been reached, consecutive appointments are not necessary to keep the 100% payment.

The maximum payable in any one calendar year is \$1,000, per person.

Exclusion: Orthodontic Services (Only available under the Delta Preferred Option Plan).

IF YOU HAVE ANY QUESTIONS, PLEASE CALL DEANNA HAULMAN @ (661)827-3162

DELTA DENTAL CAN BE REACHED @ 1(866)499-3001 (TOLL FREE)

WEBSITE: www@deltadentalins.com

PACKETS WITH DETAILED INFORMATION ARE AVAILABLE IN THE INSURANCE OFFICE LOCATED ON SUNDALE AV.

ALTERNATE CHOICE IS THE DPO PLAN – DELTA PREFERRED OPTION.

KERN HIGH SCHOOL DISTRICT
Delta Dental Preferred Option (DPO)

	In-Network	Out-of-Network
<u>Annual Deductible</u>	None	\$25 per individual \$75 per family
		Services
Diagnostic & Preventative	100%	50%
Crowns	100%	50%
Other Basic Services	100%	50%
Prosthodontic	50%	50%
Annual Maximum	\$1,500	\$1,000
Orthodontic (Adult & Dependent Children)		
Plan Pays	75%	75%

NOT TO EXCEED LIFETIME MAXIMUM OF \$1500

Lifetime Maximum	\$1,500	\$1,500
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OUT OF NETWORK:

- BE SURE WHEN SELECTING THE DPO PLAN THAT YOUR PRIMARY DENTIST IS A DPO DENTIST.
- CHECK THE WEBSITE OR CALL THE NUMBER BELOW TO CONFIRM THE DENTAL PLAN.
- THE LIST OF PROVIDERS AT YOUR SITE IS ALL INCLUSIVE. DPO DENTISTS MUST HAVE AN ASTERISK IN FRONT OF THEIR NAME.

OPEN ENROLLMENT IS THE MONTH OF SEPTEMBER.

THE EFFECTIVE DATE OF CHANGE IS OCTOBER 1ST.

IT TAKES APPROXIMATELY (1) MONTH FOR THE CHANGE TO BE PLACED IN THE SISC SYSTEM.

TOLL FREE: 1(866)499-3001

WEBSITE: www.deltadentalins.com

KERN HIGH SCHOOL DISTRICT
EMPLOYEE VISION INSURANCE – VSP

SISC: Self Insured Schools of California

How to use the plan:

When you are ready to obtain vision care services, call your VSP participating doctor. They will only need the employee's social security number to access eligibility. They will call VSP and determine benefits and then will set up an appointment that is convenient to your schedule.

The doctor's office will submit the claim forms. The co-pay can be paid at the time of the exam or at the time, the product is delivered. This depends on the doctor's office policy.

Plan provides:

Examination, lenses and frames are provided each calendar year. There is a \$5.00 deductible for Classified and a \$20.00 deductible for Certificated.

If you prefer contact lens, the company will pay \$105.00 toward that cost.

IF YOU HAVE ANY QUESTIONS, PLEASE CALL DEANNA HAULMAN @ 827-3162

VSP CAN BE REACHED @ 1(800)877-7195

Website: www.vsp.com