



# VCCCDRA

## Benefits Meeting

July 26, 2024



# Content

## Agenda

1. Introductions
2. Panelists
3. Open Enrollment Timeline
4. Medical Benefits
5. SISC Value Added Programs Reminders
6. Retiree Issues & Concerns
7. Q & A

# Panelists

- **VCCCD Benefits** – Katy Lyon, Janice Endo
- **SISC** – Lola Nickell, Frank Impastato
- **Navitus** – Jeff Bogardus
- **Burnham Benefits** – Maggie Lepore, Sheridan Eaddy, Danny Rodriguez

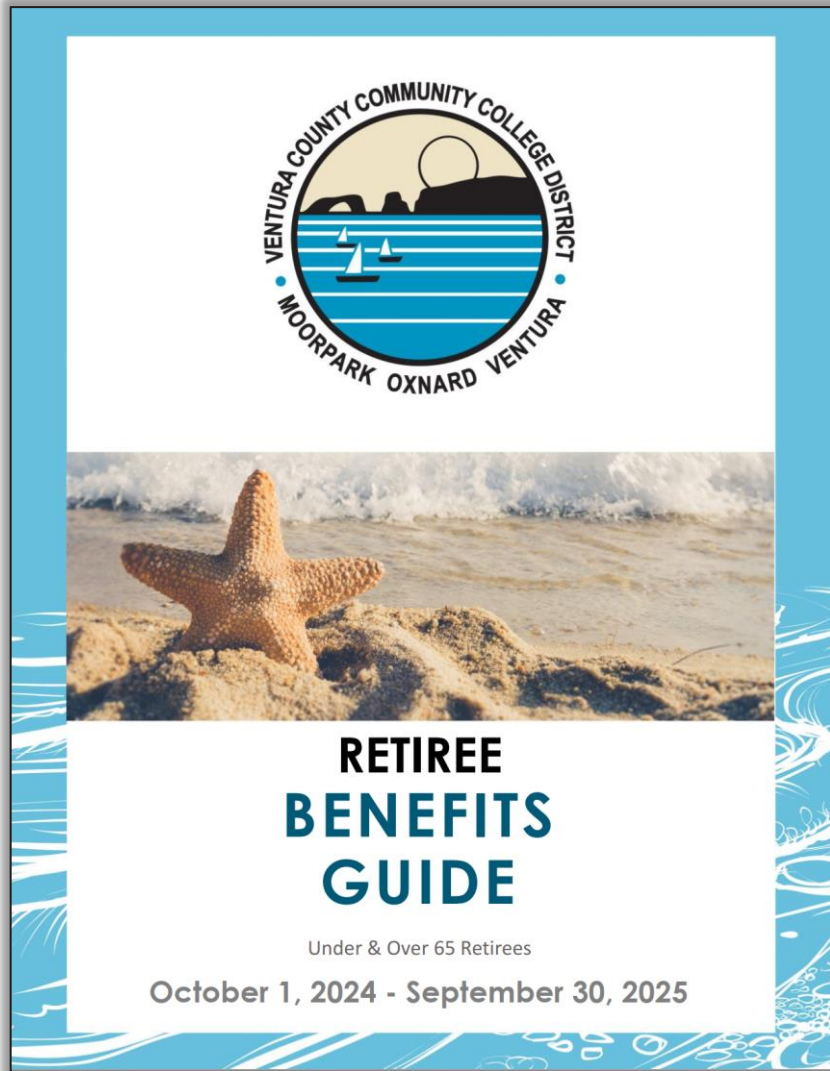
# 2024-2025 Open Enrollment Timeline

## Open Enrollment Timeline

**SISC's Plan Year runs from October 1, 2024 – September 30, 2025**

- **July 15<sup>th</sup> - August 13<sup>th</sup>** - Open Enrollment
- **July 16<sup>th</sup>** - Retiree Q&A Sessions held
- **August 13<sup>th</sup>** - All Open Enrollment changes due to the District
- **September 1<sup>st</sup>** - All Open Enrollment changes due to SISC
- **October 1<sup>st</sup>** - New plan year starts
- **October** - Open enrollment for dental and vision

# Benefits Guide



Benefits Overview



Resources and Contacts

# Options for Retirees & Dependents

	Retiree Under 65 Plans available if anyone enrolled is under age 65	Retiree Over 65 Plans available if <u>everyone</u> enrolled is over age 65
<b>Medical Benefits</b>		
SISC Anthem PPO 90-C \$20 5/20 RX Plan	Eligible	N/A
SISC Anthem PPO 80-G \$20 5/20 RX Plan	Eligible	N/A
SISC Kaiser Traditional HMO \$10 10 RX Plan	Eligible	N/A
SISC Anthem HMO Premier Full Network 10 5/20 RX	Eligible	N/A
SISC Anthem HMO Premier Select Network 10 5/20 RX	Eligible	N/A
SISC Anthem Blue Cross PPO 100-A Plan 0/20 RX	N/A	Eligible
Kaiser Permanente Senior Advantage (KPSA)	N/A	Eligible
CompanionCare Medicare Supplement Plan	N/A	Eligible
<b>Dental Benefits</b>		
Delta Dental PPO Plus Premier	Eligible	Eligible
Delta Dental HMO	Eligible	Eligible
<b>Vision Benefits</b>		
EyeMed Vision Plan	Eligible	Eligible

# Medical Plan Comparison



## Under 65

	<b>Anthem Blue Cross HMO</b> Full (California Care) Network Only	<b>Anthem Blue Cross HMO</b> Select HMO In-Network Only	<b>Kaiser HMO</b> Kaiser In-Network Only
Calendar Year Deductible - Individual - Family	None None	None None	None None
Calendar Year Out-of-Pocket Max - Individual - Family	\$1,000 \$2,000	\$1,000 \$2,000	\$1,500 \$3,000
Office Visits - PCP - Specialist - Urgent Care	\$10 Copay \$10 Copay \$10 Copay	\$10 Copay \$10 Copay \$10 Copay	\$10 Copay \$10 Copay \$10 Copay
Hospitalization -Inpatient / Outpatient	No Charge / \$10 Copay	No Charge / \$10 Copay	No Charge / \$10 Copay
Emergency Room Waived if Admitted	\$100 Copay	\$100 Copay	\$100 Copay
Prescription Drugs Generic/Brand/Specialty	\$5 / \$20 / \$20	\$5 / \$20 / \$20	\$10 / \$10 / \$10

# Medical Plan Comparison



## Under 65

	Anthem Blue Cross 90-C PPO		Anthem Blue Cross 80-G PPO	
	Prudent Buyer	Non-Network	Prudent Buyer	Non-Network
Calendar Year Deductible - Individual - Family	\$200 \$500		\$500 \$1,000	
Calendar Year Out-of-Pocket Maximum - Individual - Family	\$1,000 \$3,000	No limit No limit	\$2,000 \$4,000	No limit No limit
Office Visits - PCP - Specialist - Urgent Care	\$20 Copay \$20 Copay \$20 Copay	All billed amounts exceeding the maximum allowed amount.	\$20 Copay \$20 Copay \$20 Copay	All billed amounts exceeding the maximum allowed amount
Hospitalization	Ded, 90%		Ded, 80%	
Emergency Room Waived if Admitted	\$100 Copay + Ded then 10%		\$100 Copay + Ded then 20%	
Prescription Drugs Generic/Brand/Specialty	\$5 / \$20 / \$20	Copay + 50%	\$5 / \$20 / \$20	Copay + 50%



# Medical Plan Comparison



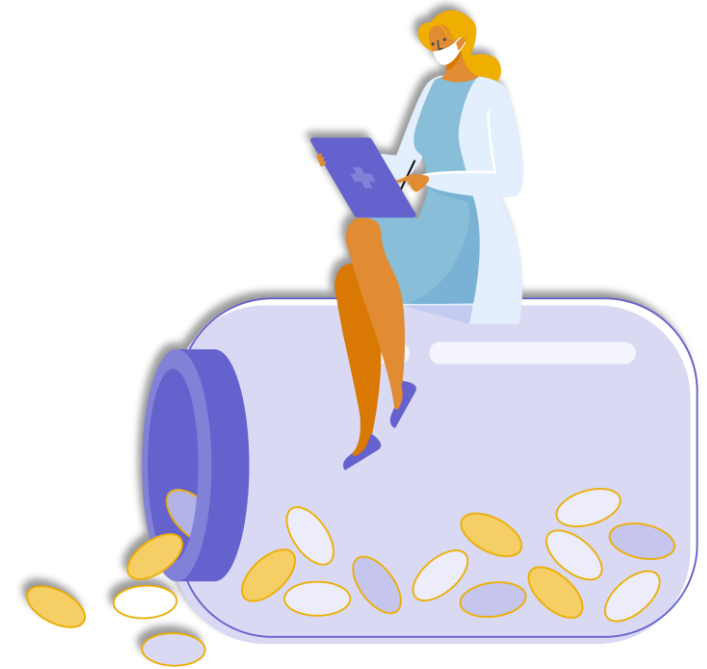
65+

	Anthem PPO 100-A \$0	Anthem COMPANIONCARE	Kaiser Senior Advantage \$10 KPSA
	In-Network	In-Network	In-Network
<b>Calendar Year Deductible</b>			
- Individual	\$0	\$0	\$0
- Family	\$0	\$0	\$0
<b>Calendar Year Out-of-Pocket Maximum</b>			
- Individual	\$1,000	\$0	\$1,000 per individual
- Family	\$3,000	\$0	
<b>Office Visits</b>			
- PCP	\$0 copay	\$0 copay	\$10 copay
- Specialist	\$0 copay	\$0 copay	\$10 copay
- Urgent Care	\$0 copay	\$0 copay	\$10 copay
<b>Inpatient Hospital</b>	Covered 100%	Covered 100%	Covered 100%
<b>Emergency Room</b>			
Waived if Admitted	\$100 copay	\$0 copay	\$50 copay
<b>Prescription Drugs - Retail</b>			
Generic/Brand	\$0 / \$20 / \$20	\$9 / \$35	\$10 / \$20 / \$20

**Enrollment in Medicare Parts A & B is REQUIRED**

# Medical – Prescriptions for PPO Plans

- The Pharmacy Benefit Manager for SISC PPO plans is Navitus Health Solutions
- Mail Order is through Costco Mail Order
- Most pharmacies are in-network, with the exception of Walgreen's
- Kaiser members will use Kaiser Pharmacies
- Members may use the mail order pharmacy for their maintenance medications. A member can order a 90-day supply and have the convenience of having the medications shipped directly to their home (or alternate address).



# SISC Value Added Programs



# SISC

## Value Added Programs



CompanionCare and Kaiser KPSA

### Silver & Fit Flexible Fitness Programs

Flexible options to support any healthy aging journey, you can exercise at a fitness center, join classes and events from home, and access personalized resources to enhance your well-being.

- Questionnaire to pinpoint interests
- Free daily workout classes on Facebook Live and YouTube every Monday-Friday.

Classes include cardio, yoga, strength training, and more

# SISC

## Value Added Programs



Under 65 Anthem HMO / PPO and Kaiser  
Over 65-Anthem 100-A

### Active & Fit Discount Gym Memberships

Choose from over 11,000+ participating fitness centers and YMCAs nationwide for a much lower cost than you would pay on your own. Use the online fitness tracking feature, which uses a variety of wearable devices and apps. You pay only \$28 a month (plus \$28 enrollment fee and taxes). Find more information at [anthem.com/ca/sisc](https://anthem.com/ca/sisc). Kaiser Permanente members are also eligible for the Active & Fit program and can access the program at [kp.org/choosehealthy](https://kp.org/choosehealthy).



### 4<sup>th</sup> Quarter Deductible Carryover *(Under 65 Anthem PPO Retirees)*

The SISC PPO medical and Rx plans have 4th quarter deductible carryover. This plan feature allows amounts credited toward the deductible in the 4th quarter of the calendar year (Oct–Dec) to carry over and apply to the deductible for the following calendar year. The 4th quarter carryover does not apply to copays or coinsurance.

Any deductible amounts for your 2024 plan year that are for dates of service between October 2024 through December 2024, will rollover to your 2025 plan year.

# Retiree Concerns Addressed

## Issues & Questions raised by Retirees

- Rx Prior Authorizations
- EOC Discrepancies
- Medicare Deductible
- Silver Sneakers/Silver & Fit
- Hearing Aid Coverage
- Plan Year vs. Benefit Period
  - Plan Year runs 10/1-9/30
  - Benefit Period is calendar year (Deductibles, Out-of-pocket maximums)

# Questions?

