

**Personal.  
Connected.  
Accessible.**

**Retiree Open Enrollment 2022**



MyOC Benefits™

# About This Presentation



My OC Benefits™

- This is an overview of benefits available to you
- Plan documents and insurance policies for each plan provide detailed, legal information about your coverage
- If there is any difference between this presentation and the plan documents or insurance policies, plan documents and insurance policies will govern

# Open Enrollment Agenda



My OC Benefits™

- Open Enrollment 2022
- What is New
- 2022 Health Plan Rates
- Steps to Enrollment
- 2022 Retiree Medical Grant
- Important Information about Medicare
- 2022 Medical Plan Options
- What Else You Should Know

Agenda!

Open Enrollment 2022

**October 20 – November 9, 2021**  
**Open Enrollment 2022**



MyOC Benefits™

# Open Enrollment 2022



My OC Benefits™

- **mybenefits.ocgov.com** – To access resources and/or make your benefits elections
- **Benefits Service Center** – To call and get answers to your questions or have a representative take your elections
- **Manage Your Communication Preferences** – By setting your communications preferences, you can be notified by email or having notifications sent to your home address
- **Open Enrollment solicitation notice** – prior to the start of Open Enrollment, make sure you check for limited home mailings, information posted on-line and where you designated your communications preferences, to home mailing or email addresses
- **Partner with REAOC** – to present a Virtual Open Enrollment Presentation on October 5



### Take a Tour of My OC Benefits™

#### Your Personalized Dashboard

Like the dashboard of your car, everything you need to get you where you need to go starts here.

#### You've Got Mail

The **My OC Benefits™** Message Center is the place you'll receive alerts and messages about your benefits. To access your private and secure Message Center, click the orange circle at the top right of the home page. The Message Center has two folders:

- **Alerts:** These are action items and reminders sent from the **Benefits Service Center** to you. You'll receive an email at your preferred address when you have an alert to view. Depending on the circumstance, those without an email address may receive an alert by mail. Be sure to update your profile with your preferred email address.
- **Secure Mailbox:** Here's where you'll find follow-up chat or **Benefits Service Center** responses. These messages are personalized for you. If you've chosen email as your communication preference, you'll receive an email whenever you have a message to view.

#### All About You

Your personal profile contains your dependent and beneficiary information. Verify that your dependents and beneficiaries, if applicable, are up to date. If not, follow the prompts to add them as needed. You can manage your communication preferences too — postal or electronic mail — as well as update your phone and email address.

You're never far from home. Go back any time to start over.

Want more than a high-level look? Select either of these.



#### Let's Chat

There are two ways to connect virtually from **My OC Benefits™** with the **Benefits Service Center**. Lisa is your virtual assistant. Lisa is ready to address most common questions, and she has lots of answers. Ask Lisa by clicking the green "Need Help?" button. If Lisa can't answer your question, you can initiate a live chat with a **Benefits Service Center** representative by selecting "Contact Us" in the lower section of the page. Representatives are available between 8 a.m. and 6 p.m. Pacific Time, Monday through Friday.



Get all the details about your health plan coverage.

#### Life Changes

If you have a **Qualified Life Event** or **QLE** (e.g., you get married, have a baby or adopt a child), select the "Life Changes" link on the home page. You'll be guided to enter any necessary information. Once you have, you can submit your changes. You can make changes at any time during the year as long as it's within 30 days of the QLE, with some exceptions. You can make any other changes to your coverage during the County of Orange Open Enrollment period held each fall.



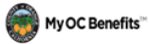
**Please note:** This is just an example of what you might see on your **My OC Benefits™** home page. Retirees can see a sample of their home page on the next page. The information you see on the site is particular to you, including your current coverage and whether you're a County employee, a retiree or covered under COBRA.

## Quick Reference Guide:

- Road map on how to navigate the **My OC Benefits™** website
- Located on the landing page



## Setting Your Communication Preferences



Health & Insurance ▾ Life Changes

### Manage Communications

Choose how you want to be contacted about your benefits. For the fastest service, consider email and text messaging.

#### Preferred Contact Information

Text <sup>1</sup>	-Not on File-	<a href="#">Change</a>
Email	Jane.Doe@alight.com	<a href="#">Change</a>
Postal Mail	101 Main Street Villa Park, CA 92861 United States of America	<a href="#">Change</a>

Delivery Preference  
See why you might c  
delivery or postal m  
[Learn More](#)

#### Delivery Preference

You can choose to receive information by email, postal mail, or text messaging.

Communication	Delivery	
<b>Benefits Information</b> <ul style="list-style-type: none"><li>Timely notifications</li><li>Confirmations</li><li>Plan information and account statements</li></ul>	Email	<a href="#">Change</a>

### Delivery Preference

You can choose to receive information by email or postal mail.

Communication

Delivery

#### Benefits Information

- Timely notifications
- Confirmations
- Plan information and account statements

Email

Postal Mail

[Complete List](#)

Note: Some information may still be delivered by postal mail.

[Save](#) [Cancel](#)

# Open Enrollment 2022



My OC Benefits™

During Open Enrollment you can:

- Change your health plan coverage
- Add and/or remove dependents

If your coverage is working for you, take a moment to review your current coverage to ensure you have what you need in place for you and/or your family, consider all your options



# What is New for 2022?



My OC Benefits™

- Visit **My OC Benefits™** Prepare to Make Your Benefit Choices page as early as October 13
  - Check health plan rates and compare health plans, review the One Page Retiree Health Plan Summaries
  - View short educational videos that make understanding benefits easier
  - Plan Information page – review helpful plan resources
  - If you wish to confirm your 2022 Grant, (if applicable):
    - You can call the Benefits Service Center and speak to a representative as early as October 13



## Prepare to Make Your Benefits Choices page

**My OC Benefits™** Home Health & Insurance ~ 1

**Get Ready to Enroll** Come back to enroll between Oct 20–Nov 9, 2021

Jane, Open Enrollment is just around the corner.

**TO DO...**

**Learn About Your Retiree Benefits**  
See information on your offered plans.  
[Learn More](#)

**Review Your Retiree Health Options**

- Review your current coverage
- Review all retiree health plans and rates
- Open Enrollment begins October 20

**What's New for 2022?**

Your estimated grant is \$321.73 for the new plan year. [Click here for more information.](#)

**Helpful Videos About Benefits**

**2022 Open Enrollment Presentation**

[Need Help?](#)



## Plan Information

You can download and save a file on your computer for future reference or printing.

**Note:** You'll need a PDF reader.

[Expand All](#) | [Collapse All](#)

+ [Other Resources](#)

+ [Current year's General Retiree Benefit Information](#)

+ [Current year's Retiree Health Plan Information](#)

+ [Current year's Retiree Health Plan Rates](#)

+ [Dependent Eligibility](#)

# 2022 Health Plan Rates



My OC Benefits™

- Although the cost of medical treatment and prescription drugs continue to rise each year, this is known as “trend,” the impact of COVID-19 resulted in some lower utilization in certain areas and some lower cost treatment options such as telehealth because of the pandemic
- That being said, Premium changes for 2022 vary greatly by plan, enrollment category, and Medicare status and range from 13 percent reductions in some plans, to 33% increases in other plans

# 2022 Health Plan Rates



My OC Benefits™

Your actual rates by plan will be available online starting Oct.13 and will be sent with your Open Enrollment solicitation notice. The overall rate changes fall within the following ranges and averages.

- The Countys' self-funded PPO health plans will be increasing an average of six percent.
- Kaiser rates are decreasing in ranges from 1.8 percent to 13 percent.
- Anthem Blue Cross plan rate increases range from zero to five percent
- SCAN rates will not change for 2022

# Steps for Enrollment



My OC Benefits™

## How to Make your Elections



**Mybenefits.ocgov.com**

October 20 through November 9, 2021

# Benefits Service Center – Your Source for Open Enrollment



My OC Benefits™

## My OC Benefits™

- Go to [mybenefits.ocgov.com](https://mybenefits.ocgov.com) only using Chrome, Edge or Firefox from anywhere you have Internet access. Enter your user ID and password, and you're in!

## First Time on logging on to My OC Benefits™?

- At the login page, select "New User?" Enter the last four digits of your Social Security Number (SSN) and your date of birth (MM-DD-YYYY)
- Next, follow the prompts to create your user ID and password. You can also set up a PIN which you will use when you call the **Benefits Service Center** for information or to help you enroll
- Go paperless: Register your email for your Secure Mailbox and mobile phone for text messaging

# Benefits Service Center – Your Source for Open Enrollment



My OC Benefits™

## My OC Benefits™

There are two additional ways to connect virtually from **My OC Benefits™** with the **Benefits Service Center**

- “Lisa” is your virtual assistant. Lisa is ready to address most common questions, and she has lots of answers. Ask Lisa by clicking the green **“Need Help?”** button in the lower right corner of the page
- If Lisa can’t answer your question, you can initiate a live chat with a Benefits Service Center representative by selecting **“Contact Us”** in the lower section of your screen





## Benefits Service Center

- Call 1-833-476-2347 and be ready with the PIN created when you first logged on to **My OC Benefits™** or when you called the Benefits Service Center the first time
- Representatives are available from 8 a.m. to 6 p.m. Monday through Friday PT
  - During Open Enrollment hours are **extended to 8 p.m.**
  - If there's a wait, you can schedule a call-back at a time convenient for you

## Mobile App - Accessing your benefits on the go

- To access **My OC Benefits™**, go to your favorite app store, search for "Alight Mobile," and download the app. For final steps to set up, refer to the Quick Reference Guide found on the home page

# Adding a New Dependent?



My OC Benefits™

If you add a new dependent, you will need to provide required documentation. If you do not meet the deadline that is stated on the Dependent Verification notice sent you from the Dependent Verification Center:

- Dependents will not be on your coverage as of **January 1, 2022** even if you have received a health plan ID card
- Dependents **cannot** be enrolled until next Open Enrollment except for a Qualified Life Event
- There will be no refund of the dependent premiums you pay during the period of ineligibility
- You must pay for any medical expenses for dependents not covered as of January 1, 2022



## County Couples – Employee Married Retiree (RME), Retiree Married to Retiree (RMR)

- To enroll for the first time as RME/RMR, both participants must enroll by either speaking to a representative at the Benefits Service Center or you can both enroll on **My OC Benefits™**
- Any change to existing RME/RMR arrangement, switching or dissolving would be completed by a representative only
  - Any dependent added to an account where the dependent is a current County dependent –by a representative
- You are required to provide documentation if requested to complete this process

# 2022 Retiree Medical Grant



My OC Benefits™

- 2022 Retiree Medical Grant: \$24.63/month for each year of County service, up to 25 years
  - May be adjusted based on retirement date and/or Medicare status
- Grant amount adjusted annually based on average increase or decrease in retiree health plan premiums
- Average increase for 2022: One half a percent

# 2022 Retiree Medical Grant



My OC Benefits™

- Grant will be automatically adjusted on your January 2022 OCERS pension check
- If your OCERS pension can't support your monthly health plan rate, you will receive a monthly direct billing invoice
- Retiree Medical Grant program is not a vested or guaranteed benefit
- Copy of Retiree Medical Plan Document is available on **My OC Benefits™** located on the Plan Information page

# Important Information about Medicare



My OC Benefits™

For retirees and/or covered dependents who are not yet Medicare eligible:

When you and/or a covered dependent approaches age 65:

- You'll have different health plan options when you and/or your spouse become Medicare-eligible
- Activating your Medicare is key in this process, you will need your Medicare Identifier Number (MBI #) to make your elections
- Watch for the Attaining Medicare solicitation that will be sent to you 120 calendar days before your 65th birthday
- Attaining Medicare Summary is a great resource found on the Plan Information page online

# Important Information about Medicare



My OC Benefits™

- When you turn age 65 or become Medicare eligible, it is your responsibility to enroll, maintain and continue payment for Medicare Part A (if at no cost) and Part B
- Otherwise:
  - Grant will be suspended
  - Higher non-Medicare rates will apply
  - You may be responsible for repayment for medical services received
  - You may lose eligibility for your elected health plan (if Medicare Advantage)

# Medicare Enrollment Documentation Requirements



My OC Benefits™

County requires documentation of Medicare coverage for you and any eligible dependents once you become Medicare-eligible or age 65

- **New retirees age 65 or older or retirees turning age 65:**
  - Submit copy of Medicare card(s)
  - Proof of Medicare premium
    - Obtain from [www.socialsecurity.gov](http://www.socialsecurity.gov)

You have 60 days from the date you made your elections to submit this required documentation to the Benefits Service Center



# Medicare Part D Prescription Drug Coverage



My OC Benefits™

- Creditable and Non-Creditable Coverage letters were mailed by the Benefits Service Center to home addresses of eligible participants around October 7, 2021
- ***Do NOT enroll in any Medicare Part D plan outside your County health plan, unless you are enrolled in a Sharewell PPO plan***
  - It is strongly recommended that Medicare-eligible **Sharewell PPO** participants enroll in a Medicare Part D plan; otherwise you may be subject to late enrollment penalties if you enroll in another retiree health plan later

# 2022 Medicare Advantage Plan Options



My OC Benefits™

- Most Medicare Advantage plans required you and your covered dependents to have Medicare A&B
  - Anthem Blue Cross Senior Secure HMO
  - Anthem Blue Cross Custom and Standard PPOs
  - SCAN HMO
  - Kaiser Permanente Senior Advantage HMO
    - Kaiser will accept Medicare A&B or B only enrollees

# Medicare Assignment



My OC Benefits™

- When you enroll in a Medicare Advantage plan, you “assign” your benefits to that plan and must use doctors and facilities in its network
- Plan receives reimbursement for paying benefits from Centers for Medicare and Medicaid Services (CMS)
- You pay any deductibles or copays
- If you are not comfortable with assigning your benefits, you can select either Wellwise Retiree or the Sharewell Retiree PPO plan

**Never assign your Medicare benefits to another health plan (including an individual prescription drug plan). This could cause you to be enrolled in the Wellwise or Sharewell Retiree PPO plan with significantly higher premiums.**

# Medicare Advantage Plan Enrollment



My OC Benefits™

- CMS must approve your enrollment in the Medicare Advantage plan
- To enroll, **My OC Benefits™** or a Benefits Service Center website representative will collect your Medicare data
  - If not provided already, upload or mail copy of your and/or your dependents current Medicare ID cards
  - Must be continuously enrolled in Medicare Part A (if at no cost) and Part B
  - Proof of what you pay for Medicare Part B, premium statement
- If not approved by CMS, you/your dependents will be automatically enrolled in Wellwise Retiree PPO until the following Open Enrollment
  - You can expect to receive an updated Confirmation of Benefits reflecting the plan you will be enrolled in for plan year 2022.

# Medicare Part B Reimbursement



My OC Benefits™

- Your Medicare Part B Reimbursement is capped to the lesser of either the maximum Grant monthly allocation or your Medicare Part B monthly cost
- If you currently receive a Medicare Part B Reimbursement, this will continue through the end of 2021
- Effective January 1, 2022, you will receive reimbursement for the hold harmless Medicare Part B premium based on the 2022 Medicare Part B Premium schedule as announced by the Centers for Medicare & Medicaid Services (CMS)
- However, if you are notified by the Social Security Administration that your cost will be different than the hold harmless Medicare Part B premium, you will need to provide a copy of your statement to the Benefits Service Center in order to receive the higher Medicare Part B Reimbursement

# Medicare Part B Reimbursement



My OC Benefits™

- If required documentation is provided to the Benefits Service Center on or before **December 31, 2021**, you will receive the updated Part B Reimbursement amount on your February 2022 pension along with an adjustment for the January 2022 Part B Reimbursement (difference between the hold harmless Part B premium and what you are paying)
- If required documentation is provided to the Benefits Service Center on or after **January 1, 2022**, the updated Part B Reimbursement will be effective the first of the month following submission of required documentation
- We will not go back retroactively and adjust your prior pension check

# 2022 Health Plan Options



MyOC Benefits™



Open Enrollment 2022

# 2022 Medicare Health Plan Options



My OC Benefits™

## **Medicare Part A & B (Subscriber & Dependents)**

- Wellwise Retiree PPO
- Sharewell Retiree PPO
- SCAN HMO
- Kaiser Senior Advantage HMO
- Anthem Blue Cross Senior Secure HMO
- Anthem Blue Cross Custom PPO
- Anthem Blue Cross Standard PPO



# 2022 Medicare Health Plan Options



My OC Benefits™

## **Medicare Part B-Only (Subscriber & Dependents)**

- Wellwise Retiree PPO
- Sharewell Retiree PPO
- Kaiser Senior Advantage HMO
- Anthem Blue Cross Traditional HMO
- Anthem Blue Cross Select HMO

# 2022 Mixed Medicare Health Plan Options



My OC Benefits™

## Mixed Medicare Eligible

Participant with Medicare A&B	Participant without Medicare
Kaiser Senior Advantage HMO	Kaiser Traditional HMO
Anthem Blue Cross Senior Secure HMO	Anthem Blue Cross Traditional HMO
Anthem Blue Cross Custom PPO	Anthem Blue Cross Traditional PPO
Wellwise Retiree PPO	Wellwise Retiree PPO
Sharewell Retiree PPO	Sharewell Retiree PPO

# 2022 Mixed Medicare Health Plan Options



My OC Benefits™

## Mixed Medicare Eligible

Participant with Medicare B Only	Participant without Medicare
Kaiser Senior Advantage HMO	Kaiser Traditional HMO
Anthem Blue Cross Traditional HMO	Anthem Blue Cross Traditional HMO
Anthem Blue Cross Select HMO	Anthem Blue Cross Select HMO
Wellwise Retiree PPO	Wellwise Retiree PPO
Sharewell Retiree PPO	Sharewell Retiree PPO

# 2022 Non-Medicare Health Plan Options



My OC Benefits™

## **Retiree Non-Medicare (Subscriber & Dependents)**

- Wellwise Retiree PPO
- Sharewell Retiree PPO
- Kaiser HMO
- Anthem Blue Cross Traditional HMO
- Anthem Blue Cross Select HMO

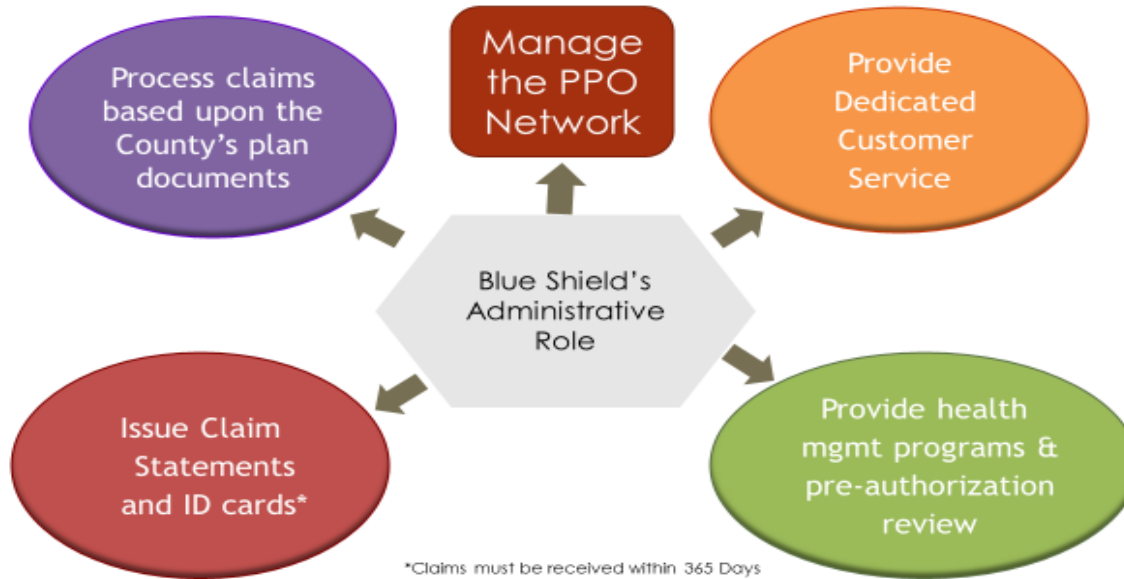


Open Enrollment 2022  
County of Orange Retirees





# Blue Shield- PPO Plan Administrator



# PPO Plans - Wellwise Retiree and Sharewell Retiree



**A good choice if you'd like...**

**Access to our largest provider network and the flexibility to choose any doctor or specialist.**

- Visit any physician or hospital in the PPO network, or go outside the network for a higher share of cost
- NurseHelp 24/7
- Teladoc 24/7 phone/video doctor visits for low coinsurance (\$4.50) once deductible is met
- Access to retail health clinics (CVS Minute Clinics)
- Digitally enabled wellness programs and member support, including treatment cost estimator
- Covered urgent and emergency care while traveling



# BlueCard® Network

Traveling, or reside outside of California?



Coverage outside of California  
**BlueCard® Network**

To find a provider, go to  
[blueshieldca.com](https://blueshieldca.com)



click on **Find a Doctor**



select the **Providers Outside of the USA**



or, call BlueCard Access at  
**(800) 810-BLUE (2583)**



# Wellwise and Sharewell Retiree plans coordinate with **Medicare**



- Both the Wellwise Retiree PPO plan and the Sharewell Retiree PPO plans will coordinate with Medicare.
- Medicare will pay as the primary plan, the County of Orange PPO plan will pay secondary to Medicare for retiree participants.
- This type of plan is known as a Coordination of Benefits (COB) plan.
- The amount that Medicare allows will go toward meeting your deductible and out of pocket maximum

# Wellwise Retiree PPO Plan



	Preferred providers	Non-preferred providers**
<b>Annual deductible</b>	\$500 per member/ \$1,000 per family	\$750 per member/ \$1,500 per family
<b>Calendar-year out-of-pocket maximum (separate OOPM for prescription drugs)</b>	\$2,500 per member/ \$5,000 per family	\$5,000 per member/ \$10,000 per family
<b>Office visits</b>	10%	30%
<b>Preventive Care</b>	No charge: Plan pays 100% for services listed in Health Plan Document	Plan pays 100% of usual, reasonable, and customary amount for services listed in Health Plan Document
<b>Inpatient Care</b>	10%	30%
<b>Ambulatory Surgery Center</b>	10%	30% (plan max of \$1,500 per day)
<b>Diagnostic lab &amp; Radiology</b>	10%	30%
<b>Emergency room</b>	10%	10%
<b>Prescription Drugs</b>	Covered by OptumRx	
<b>Chiropractic/acupuncture services*</b>	10%	30%

This chart is intended to provide a high level summary of plan benefits. The 2020 Wellwise Retiree Health Plan Document should be consulted for a complete description of plan benefits and coverage

\*25 visits for Chiropractic and 25 visits for Acupuncture services per calendar year

\*\*Members are responsible for charges above the allowed amount for any out of network services, including but not limited to out of network physician at in-network facility and emergency room physicians

# Sharewell Retiree PPO Plan



	Preferred providers	Non-preferred providers**
<b>Annual deductible</b>	\$5,000 per family	
<b>Calendar-year out-of-pocket maximum</b>	\$6,000 per family	\$12,000 per family
<b>Office visits</b>	10%	30%
<b>Preventive Care</b>	No charge: Plan pays 100% for services listed in Health Plan Document	Plan pays 100% of usual, reasonable, and customary charge for services listed in Health Plan Document
<b>Inpatient Care</b>	10%	30%
<b>Ambulatory Surgery Center</b>	10%	30% (plan max of \$1,500 per day)
<b>Diagnostic lab &amp; Radiology</b>	10%	30%
<b>Emergency room</b>	10%	10%
<b>Drug coinsurance</b>	Covered by OptumRx	
<b>Chiropractic/acupuncture services*</b>	10%	30%

This chart is intended to provide a high level summary of plan benefits. The 2020 Sharewell Retiree Health Plan Document should be consulted for a complete description of plan benefits and coverage

\*25 visits for Chiropractic and 25 visits for Acupuncture services per calendar year

\*\*Members are responsible for charges above the allowed amount for any out of network services, including but not limited to out of network physician at in-network facility and emergency room physicians



# blueshieldca.com

## A simpler digital experience for you



blue california

myblueshield - Be Well - Find a Doctor - Shop Plans

Welcome, Jane!

Member ID: XECAL000000

3 Unread Messages

MONTHLY PREMIUM CLAIMS DEDUCTIBLE COINSURANCE HSA

Claims This Year From Jan 1, 2017

\$2,100	\$1,128	\$900
Blue Shield Paid	Network Savings	You Paid

View Claims

Popular Tasks

- VIEW ID CARD
- DOWNLOAD FORMS
- REQUEST COST ESTIMATOR
- MANAGE FAMILY ACCESS
- ADD PEOPLE
- WELLNESS ASSESSMENT

Get Help

Health Condition? Get advice from the experts in our help & support area. [Get help](#)

Urgent Care If this is an emergency call 911. Or get help from a doctor in your network. [Get Urgent help](#)

My Physician Looks like you haven't selected a primary care provider. [Manage Health Team](#)

We're always here to help you. Manage your health and get help you need with the Shield of California. [Download](#)

blue california

MEDICAL DENTAL VISION PHARMACY

### Your Medical Benefits

Custom Benefits General Exclusions Benefit Maximums

Expand All Benefit Categories

- Access+ Self Referral
- Chiropractic and Acupuncture
- Dental Medical Treatment
- Diabetes Care
- Emergencies & Urgent Care
- Family Planning
- Home Care
- Hospital Care

blue california

### Your Recent Medical Claims

Download

FILTER

2017

May 17	JOHNATHAN Brown, Adam MD Sutter Med Foundat...
	Pending May 18
May 17	JOHNATHAN Huang, Jillian MD



Imagine this:

“My daughter cut her leg and she might need stitches.”

Make a free call to NurseHelp 24/7<sup>SM</sup>

#### Online chat:

- How to take medications safely
- Men's, women's, & children's health general questions
- Topics to discuss with your doctor
- Illness prevention guidance
- Nutrition and fitness tips

#### Telephone:

- Minor injuries
- Common illnesses
- Help to understand diagnoses and chronic conditions
- Choosing appropriate medical care (911/ER, physician office visit, urgent care center, home care)
- Self-care tips and treatment options



Imagine this:

“I feel like I have the flu, but I don’t want to wait in the ER on a Friday night.”

## Contact Teladoc



### Step 1 Contact Teladoc

Log in to your Teladoc account or call Teladoc, 24/7/365, to request a phone or online video consultation for primary care services.



### Step 2 Talk with a doctor

A board-certified doctor reviews your Electronic Health Record (EHR) and consults with you, just like an in-person visit.



### Step 3 Resolve the issue

The doctor recommends a treatment for your medical issue. If a prescription is needed, it's sent electronically to the pharmacy of your choice.



### Step 4 Settle up

- \$45 consultation fee until deductible is met then \$4.50 copay.



### Step 5 Smile

Your medical issue gets resolved, and you save time and money!

<10 Minutes  
Average  
Wait Time



## Retail clinics expand your options



Convenient, affordable, non-emergency health care for PPO plan members at CVS MinuteClinics and Target Clinics across California

- Seven-day a week access—no appointment needed
- Same copay as an office visit (*after deductible's been met*)
- Treatment for non-emergency conditions such as allergies, minor wounds, abrasions, joint sprains, infections (ear, nose, throat, and bladder), bronchitis, coughs, flu-like symptoms, and more
- Staffed by board-certified nurse practitioners



## “How can I get the most out of my healthcare dollars?”

- Treatment Cost Estimator – Compare Provider Costs (PPO)
- Stand Alone Ambulatory Surgical Centers will save you vs accessing a hospital surgical Center
- Urgent Care centers can be cost saving and time saving vs utilizing the ER
- Take advantage of preventive care services
- Wellness Discount Programs
- Utilize Health Advocacy programs to help manage chronic diseases





# Treatment cost estimator (TCE)

Helps members understand what to expect over the course of a treatment in time and dollars.

## Members can:

- Estimate total treatment cost and out-of-pocket expenses for more than 1,600 common medical treatments and services
- Compare treatment options and alternatives with total costs for each phase of care
- Compare detailed out-of-pocket costs for treatments and procedures at different facilities and in different locations
- View the number of Blue Shield members treated
- Identify Blue Distinction Centers
- [blueshieldca.com/tce](https://blueshieldca.com/tce)

Out-of-pocket estimate

If [redacted] has a/an Vaginal Delivery at Medical Ctr at Ucsf.

Details More details Benefits to date

This is an estimate of what you will pay after insurance based on the average price\* charged to our members at this location. Please note some services and procedures such as radiology require prior authorization.

You pay	Insurance Pays
\$4,034	\$19,087

\$23,121  
Average Price

Your copay applied to this service	\$0
Your deductible applied to this service	\$1,034
Your share of the cost (co-insurance)	+ \$3,000
Your estimated out-of-pocket cost	\$4,034

Average Price	\$23,121
Your estimated out-of-pocket cost	-\$4,034

**Blue  
Distinction®  
Center**

Blue Distinction Centers® are hospitals and providers recognized for their proven expertise in delivering specialty care.



## Ambulatory surgery and urgent care centers save you time and money



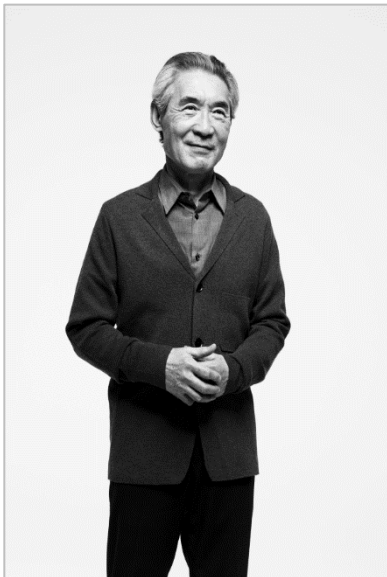
Network ambulatory surgery centers (ASCs) may cost you less for outpatient procedures than a network hospital.

Urgent care centers can be a cost- and time-saving alternative to the ER.



Compare your OOP costs by checking your *Evidence of Coverage (EOC)*, *Certificate of Insurance (COI)* or call the customer service number listed on the back of your member ID card.

# Take advantage of covered screenings



Take advantage of covered annual screenings at no charge, including:

- Routine physical exam
- Immunizations/screenings according to age schedule

Covered health screenings can help you:

- Understand what your health risks are
- Develop a plan to maintain and improve your health
- Detect illness early and halt disease progression



# Wellness discount programs

## Alternative care

Save on alternative healthcare services from participating practitioners.

25% or more off usual and customary fees for:

- Acupuncture
- Massage therapy
- Chiropractic services

Discounts also available for health and wellness products like vitamins and supplements.

## Fitness and exercise

Enroll in one of the most flexible gym membership programs to stay committed to your health goals.

- Work out at any facility within our wide network of more than 10,000 national fitness locations.
- Work out as often as you need while tracking progress to your goals online.

## Weight management programs

Lose those extra pounds and keep them off with nationally recognized lifestyle change programs.

- Enroll in weight management programs at no additional charge through our **Wellvolution® Diabetes Prevention Program**.
- Save on **Weight Watchers** with special rates on three- and 12-month subscriptions. Monthly pass is also available for unlimited local meetings each month, plus free eTools.

## Vision discounts

Save on eye services at participating providers whether or not you have vision care benefits.

**Discount Provider Network** – Save 20% on eye exams, frames and lenses, contacts, and more.

**MESVision Optics** – Competitive prices on contacts, glasses and eye care accessories.

**QualSight LASIK** – Save on LASIK surgery at more than 45 surgery centers in California.

**NVISION Laser Eye Centers** – Get a 15% discount for laser services.



# Support to manage your health



Programs designed to help you better support your health:

Nurse support, education and self-management tools for members with:



- Asthma
- Diabetes
- Coronary artery disease
- Heart failure
- Chronic obstructive pulmonary disease



## Support to manage your health



Health Advocate- Registered Nurses who provide clinical Advice and support:



- Provide answers on treatment options, hospitalization or dealing with a diagnosis or chronic illness
- Identify potential healthcare needs, may recommend participation in a Disease Management program
- Participation is optional and confidential
- For information, contact the Health Advocate team by calling 1-866-596-7557 or email them at [healthadvocate@blueshieldca.com](mailto:healthadvocate@blueshieldca.com)



## We are here to help you:

- Blue Shield of California Plan Administrators
  - Benefits, preferred providers, hospital information
  - [www.blueshieldca.com/oc](http://www.blueshieldca.com/oc)
  - Phone: 1-888-235-1767
- OptumRx
- Prescription drug information
  - [OptumRx.com](http://OptumRx.com)
  - Phone: 1-800-573-3583

# Expect More with OptumRx



## OUR MISSION

Helping people live healthier lives and helping make the health system work better for everyone





# 2022 Open Enrollment – Coinsurance



## Wellwise

- Deductible: None
- 20% Tier 1: Generic drugs (*mostly*)
- 25% Tier 2: Preferred Brand drugs
- 30% Tier 3: Non-Preferred Brand drugs
- Specialty: \$150 maximum coinsurance
  - ❖ Restricted to a 30 days supply

## Sharewell

- Deductible: \$5,000
  - ❖ Combined medical & pharmacy
  - ❖ Members pay 100% coinsurance until the annual deductible amount is satisfied
- 20% Tier 1: Generic drugs (*mostly*)
- 20% Tier 2: Preferred Brand drugs
- 20% Tier 3: Non-Preferred Brand drugs
- Specialty: 20% coinsurance
  - ❖ All specialty drugs must be fulfilled by Optum Specialty Pharmacy
  - ❖ Restricted to a 30 days supply

**Important Note:** If you choose a brand drug when a generic drug equivalent is available, then you will pay 20% of the generic drug cost plus the cost differential between the generic drug and brand drug cost. The cost differential does not accumulate towards the out-of-pocket maximum amount.

# 2022 Open Enrollment – Out of Pocket Maximum



## Wellwise

Members have a separate pharmacy only annual out-of-pocket maximum (OOPM) limit.

- Individual Amount: \$4,100
- Family Amount: \$8,200

## Sharewell

Members have a combined medical and pharmacy annual out-of-pocket maximum (OOPM) limit.

- Network Amount: \$6,000 / Family
- Non-Network Amount: \$12,000 / Family

**Important Note:** Members will pay the applicable coinsurance, based on the medication's formulary placement tier as shown on the previous slide, up until their annual out-of-pocket maximum limit.

Once the annual out-of-pocket maximum is satisfied, the plan will pay the eligible covered costs of medications for the remainder of the year.

# 2022 Open Enrollment – Formulary



A formulary is a preferred medication list designed to garner cost savings to members by:

- Encouraging use of clinically appropriate, less expensive products
- Moving members to preferred alternatives in the same therapeutic class
  - ❖ Every therapeutic class (condition) will have a clinically effective covered medication available
- Excluding some products and making them not covered by the plan

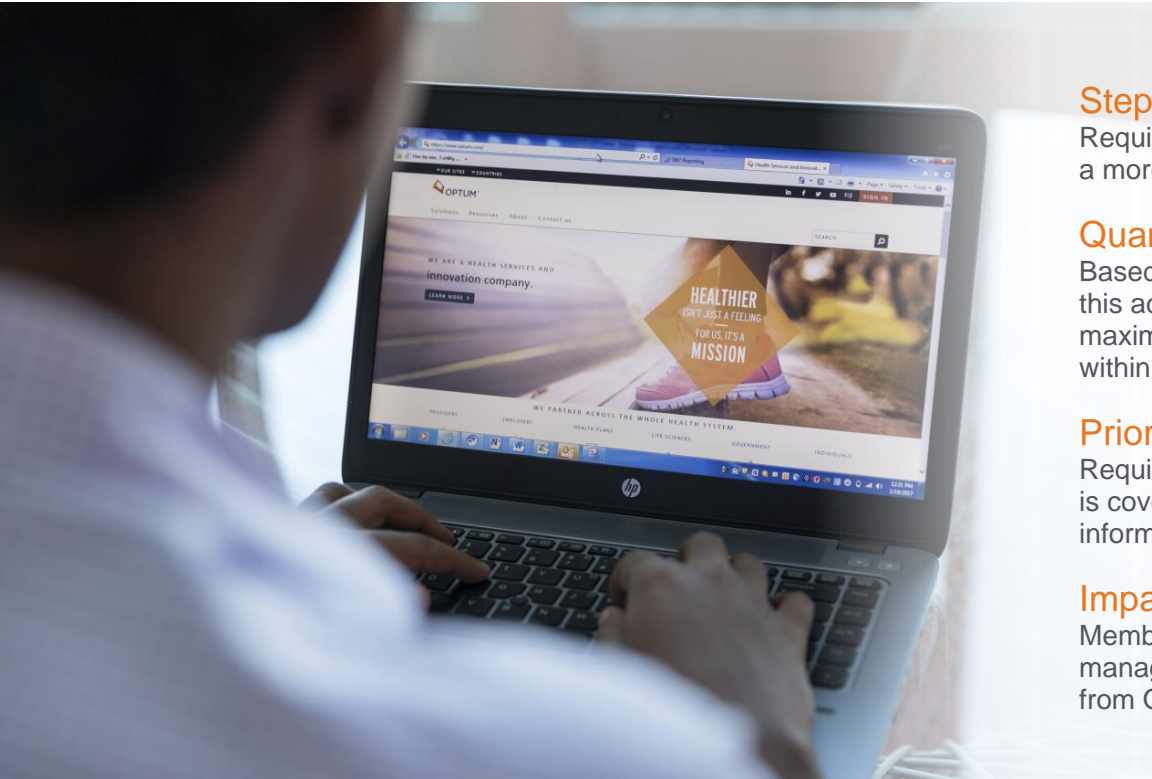
For additional details regarding your specific formulary benefit plan; check drug coverage on the OptumRx Member Portal and/or Open Enrollment Website

Current Members: [www.optumrx.com](http://www.optumrx.com)

Prospective Members: [https://www.optumrx.com/oe\\_countyoforange/landing](https://www.optumrx.com/oe_countyoforange/landing)



# 2022 Open Enrollment – Utilization Management



## Step Therapy:

Requires members to try less expensive alternatives before a more expensive medication is covered.

## Quantity Limits:

Based on FDA and manufacturer dosing recommendations, this additional benefit coverage consideration establishes the maximum quantity of a drug that is covered per copayment, within in a specific timeframe or age limitations.

## Prior Authorization:

Requires members to obtain approval before a medication is covered. Physicians must provide additional clinical information to verify benefit coverage.

## Impact Notification:

Members who are impacted by formulary and/or utilization management changes will be notified in advance by letter from OptumRx.

# 2022 Open Enrollment – Brand w/ Generic Equivalent



Generic drugs have the same active ingredient as brand drugs and can help you save money because in many cases, they cost less than brand drugs.

Pricing sample for a 3-month (90 days supply);  
actual savings may vary

	Generic Drug	Brand Drug
<b>Total Drug Cost</b>	\$25	\$100
<b>Cost Differential</b>	N/A	\$75 <i>(\$100 brand drug cost minus the \$25 generic drug cost)</i>
<b>Plan Pays</b>	\$20	\$20
<b>Member Pays</b>	\$5 <i>(20% of the generic drug cost)</i>	\$80 <i>(20% of the generic drug cost [\$5] PLUS cost differential [\$75])</i>

**Important Note:** You are not required to use a generic drug, but if you choose to utilize a brand drug when a generic equivalent is available, you could pay significantly more for your medication. The cost differential does not accumulate towards the out-of-pocket maximum amount and is not an eligible covered cost of the plan.

# 2022 Open Enrollment – Medication Synchronization



Medication Synchronization aligns prescription refill dates at the retail pharmacy for many common medications used to treat chronic conditions.

Retail pharmacists receive a point of service message for qualifying drugs directing them to:

- Override the early fill
- Prorate the member's cost share accordingly
- Align qualifying medications to the same refill date moving forward, reducing trips to and from the retail pharmacy

❖ *Participation in this program is optional*



# 2022 Open Enrollment – Enhanced Savings Program



Enhanced Savings Program is a free pharmacy discount service integrated into the existing funded benefit, providing members access to discounts on medications and diabetic supplies not covered by the plan and on over-the-counter (OTC) medications with a valid prescription.



Free Program



Same Card Used



Plan Integrated

**Important Note:** Medications filled through the Enhanced Savings Program will not apply towards your annual deductible and/or out-of-pocket maximum.



## PreCheck MyScript delivers better outcomes



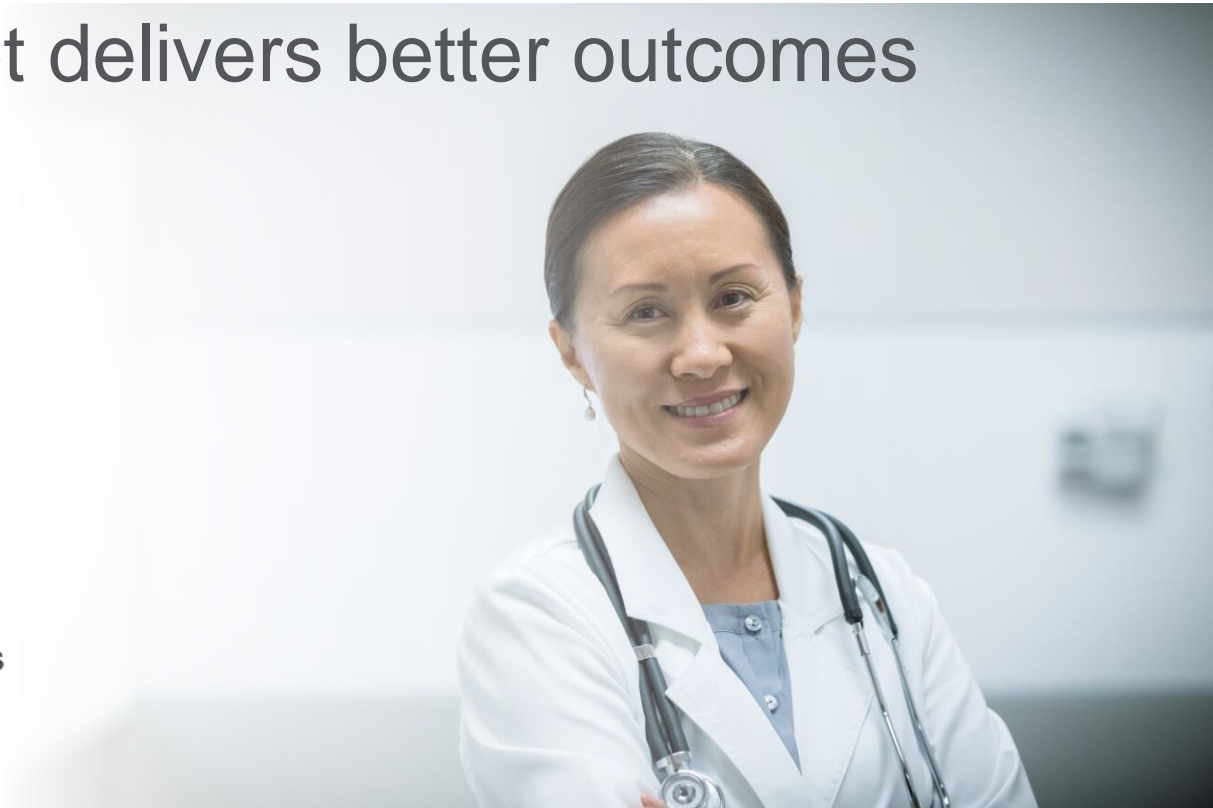
### Real-time:

Alternative medications

Authorizations

Accurate patient cost by pharmacy

Benefit coverage and clinical alerts





# 2022 Open Enrollment – Retail Network



County of Orange participants will continue to have a broad pharmacy network of options.

## OptumRx Home Delivery

Home delivery drug provider for maintenance medications and diabetic testing supplies. You may use this option for maintenance medications with a days supply in excess of 30 days.

## Retail-90 Program

Provides the option for you to obtain a 90 days supply of maintenance medications at select retail locations.

- ❖ *Diabetic testing supplies are considered to be maintenance*



# OptumRx Specialty Pharmacy



OptumRx offers specialty medication support through Optum Specialty Pharmacy. Optum Specialty Pharmacy provides the resources and personalized support to help you with your condition. We also offer in-home medication infusion support through Optum Infusion Pharmacy.



For more information, visit [specialty.optumrx.com](https://specialty.optumrx.com) or call **1-855-427-4682**



# Diabetes Management Program



- Retrospective Drug Utilization Review (RDUR) Gaps in Care
- Medication Adherence
- High Risk One-on-one Counseling

Certified Diabetes Care and Education Specialists drive personalized consultations.



Personalized care and ongoing monitoring are key to improving diabetes health

## Automation drives better health outcomes

- Compares A1C levels with standard medication ranges
- Scans for gaps in care, safety and adherence across all diseases
- Stores profile information for a complete member snapshot
- Engages providers for clinical concerns

## OptumRx Consumer Portal empowers members to become informed advocates of their own health

### Household Access:

Ability to manage prescriptions on behalf of your family members

### Drug Pricing:

View and compare drug coverage, pricing and lower cost alternatives for up to 5 pharmacies

### My Medicine Cabinet:

Displays at-a-glance actions a member needs to take for all medication prescriptions on record

### Order Status:

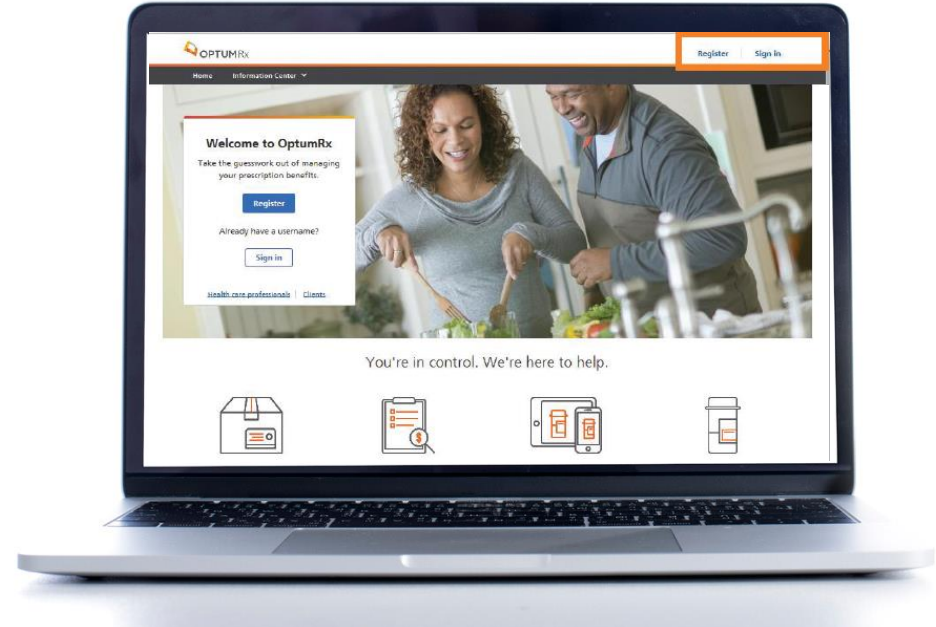
View and track order progress in real-time

### Member Tools:

Provides easy access to the most commonly used member tools available throughout the site

### Proactive Savings Messaging:

Advocates for the member by providing proactive ways to save



# OptumRx App – Mobile Experience

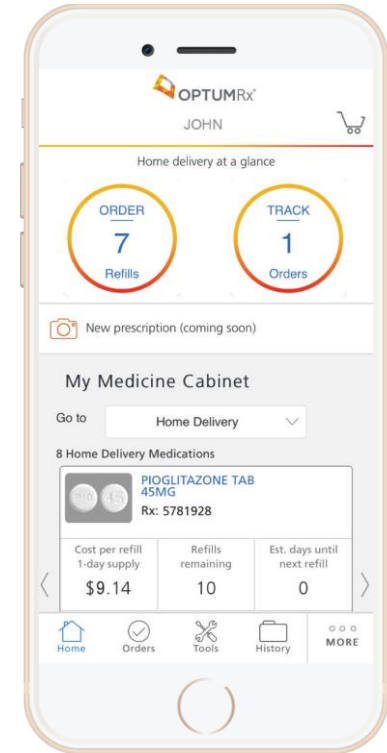


The OptumRx App makes the online pharmacy experience as simple as possible.

You can easily:

- Search drug prices at multiple pharmacies
- Locate a network pharmacy
- Manage medication reminders
- Track the status of your order in real-time
- Refill and/or renew prescriptions
- Transfer a retail prescription to home delivery
- View prescription claims history
- Set up refill reminders/push notifications

Download the OptumRx App now



# Prescription Reimbursement Requests



OptumRx processes all prescription reimbursement requests for County of Orange PPO Plans.

Types of manual claims reimbursement requests available:

- Direct member claims
- Manual coordination of benefits (COB) claims
- Out-of-Network claims
- Foreign claims

**Important Note:** Manual claims are subject to formulary and utilization management rules and guidelines located within your benefit plan documents.

Claim forms are located on the OptumRx Consumer Portal: [www.optumrx.com](http://www.optumrx.com)

# OptumRx Web Access



While evaluating your benefit plan options for the coming year, feel free to log into the OptumRx Consumer Portal or Open Enrollment Website to research details on the following:

- Contact Information
- Home Delivery Program details
- Pharmacy Network
- Prescription Drug Coverage and Pricing
- How-to Videos
- Request forms

Current Members: [www.optumrx.com](http://www.optumrx.com)

Prospective Members: [https://www.optumrx.com/oe\\_countyoforange/landing](https://www.optumrx.com/oe_countyoforange/landing)



# OptumRx Customer Service



Our dedicated OptumRx customer service representatives are available to answer your questions 24-hours a day, seven days a week.

Current Members: 1-800-573-3583

Prospective Members: 1-844-880-0759





2022 Open Enrollment  
County of Orange – Non-Medicare Retirees

Find your healthy place

With care designed to help you thrive

## Quality care with you at the center

Your doctor will build a care plan based on your needs and work with your care team to deliver high-quality, personalized care.



**Preventive care to keep you healthy**



**Specialty care when you need it**

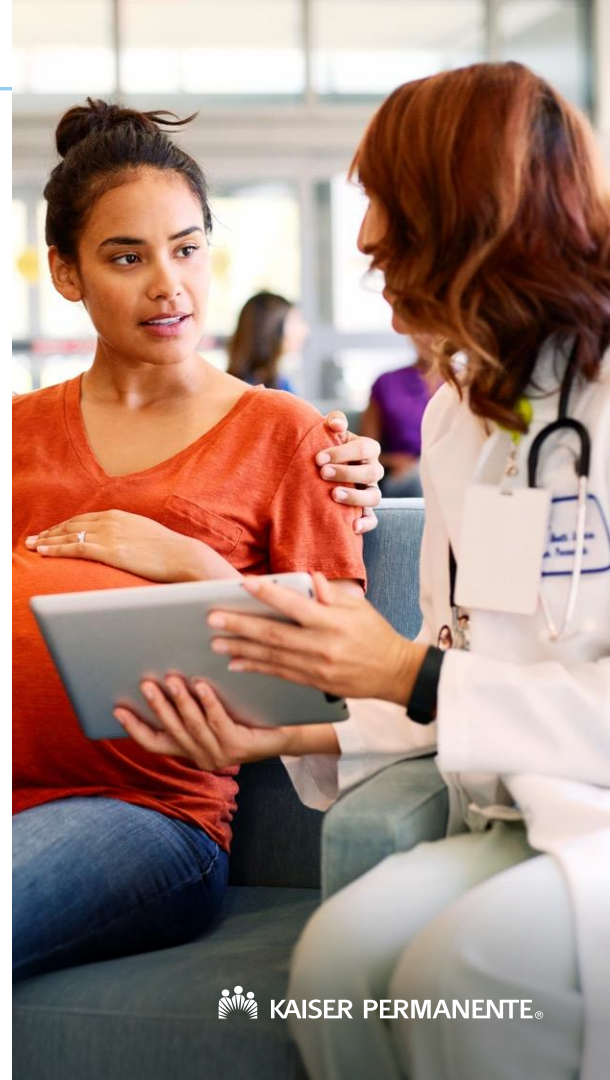


**Support for ongoing conditions**

**Get care in your language** — with multilingual doctors and phone interpretation in more than 150 languages.

Search doctors at [kp.org/searchdoctors](https://kp.org/searchdoctors)

We've helped deliver millions of COVID-19 vaccines to our members, communities, and underserved areas. Visit [kp.org/covidvaccine](https://kp.org/covidvaccine) to search vaccine appointments.



# Accessing Care



# Convenient ways to get what you need

You have flexible options to get care beyond the doctor's office — and you can manage your care anytime with the Kaiser Permanente app or at kp.org.



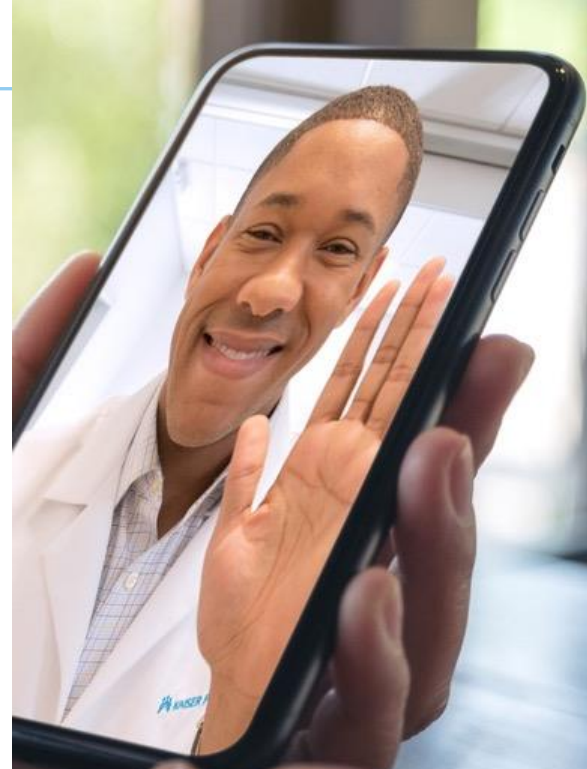
## Getting care

- Talk with a Kaiser Permanente clinician by video or phone for the same high-quality care as an in-person visit.<sup>1</sup>
- Get 24/7 care advice by phone or online.
- Email your doctor's office with nonurgent questions.<sup>2</sup>
- E-Visit



## Managing your health<sup>2</sup>

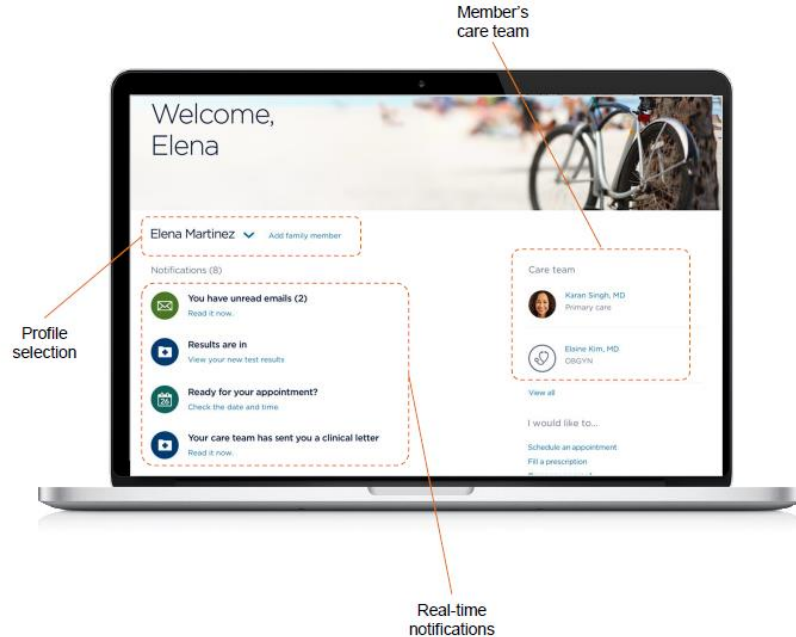
- Schedule or cancel routine appointments.
- Fill most prescriptions for home delivery or same-day pickup.
- Check your health records and pay bills.



**Telehealth services aren't an add-on — they've helped us deliver personalized care for years.**

1. When appropriate and available. 2. Available when you get care from Kaiser Permanente facilities.

# More ways to get care at your fingertips



## Personalized Welcome page

- See tools to manage your care
- Quickly access your care team
- Choose your language preference
- Review notifications
- Manage a family member's health care with profile selections<sup>1</sup>

## At kp.org or with the Kaiser Permanente app, you can stay on top of your care 24/7

- Schedule and cancel routine appointments
- Email your Kaiser Permanente doctor's office with nonurgent questions on any of your devices
- Try an E-visit for a quick online evaluation of your symptoms<sup>1</sup>
- View most lab results

*1. Online features change when children reach age 12. Teens are entitled to additional privacy protection under state laws. When your child turns 12 years old, you will still be able to manage care for your teen, with modified access to certain features*

# Mental health services — care for the whole you

Your thoughts and feelings affect your overall well-being. We're committed to helping you achieve and maintain optimal health for your mind, body, and spirit.

- Get support for a wide range of conditions, like anxiety, depression, substance use disorder, and autism spectrum disorders.
- Find care with psychiatrists, psychologists, marriage and family therapists, and more.
- Make an appointment for therapy within Kaiser Permanente without a referral.
- Use a wide range of online self-care resources at any time to help you relieve stress, improve sleep, practice mindfulness, and more.

Learn more at: [kp.org/mentalhealth](https://kp.org/mentalhealth).





- Self-referral
- Doctors and specialists
- Mental health advice call center
- 24/7 care advice by phone
- Emergency department

### Rapid intake and triage

Accelerates treatment to give members the right care at right time (when appropriate and available)



Self-care

Primary care

Specialty care

# how to access mental health care

At Kaiser Permanente, getting care starts with a conversation. Members can easily connect with us — online, over the phone, during a visit, or just by walking in. From there, a mental health team member will guide the you toward the right care, at the right time.

# Mental Health Classes

Programs taught by therapists and trained instructors to support stress, strengthen relationships, and more

## **In-person classes**

These health education classes, seminars, and programs offer face-to-face interactions that will empower you to take small steps toward healthy changes.

## **Therapy and support groups**

You can learn and connect with others in a safe and supportive environment, exchange information, experiences, and help people dealing with similar conditions or challenges.

## **Individual counseling sessions**

You can get direct support and counseling from a member of our care team.





# Benefits & Locations

# Summary of Benefits – Non-Medicare Retirees

\*This table shows an example of some of your group’s benefits.

<b>Yearly deductible</b>	None
<b>Maximum yearly out-of-pocket costs</b>	\$1,500 individual/\$3,000 family
<b>Covered service</b>	<b>You pay</b>
<b>Preventive care</b>	No charge
<b>Doctor’s office visit</b>	\$20 copay
<b>Telephone and Video visits</b>	No charge
<b>Lab tests and radiology</b>	No charge
<b>Outpatient surgery</b>	\$20 copay
<b>Hospitalization</b>	\$100 copay
<b>Emergency care</b>	\$50 copay
<b>Prescribed medications (up to 100-day supply)</b>	\$10 copay (generic medication)/\$30 copay (brand-name medication)
<b>Eyewear (every 24 months)</b>	\$100 frame allowance
<b>Chiropractic Services</b>	\$15 copay / up to 30 visits per calendar year

\*This is a summary of some benefits and their copays and coinsurance. For specific information about your covered health plan benefits, limitations, and exclusions, including those not listed in this summary, please see your *Evidence of Coverage*.

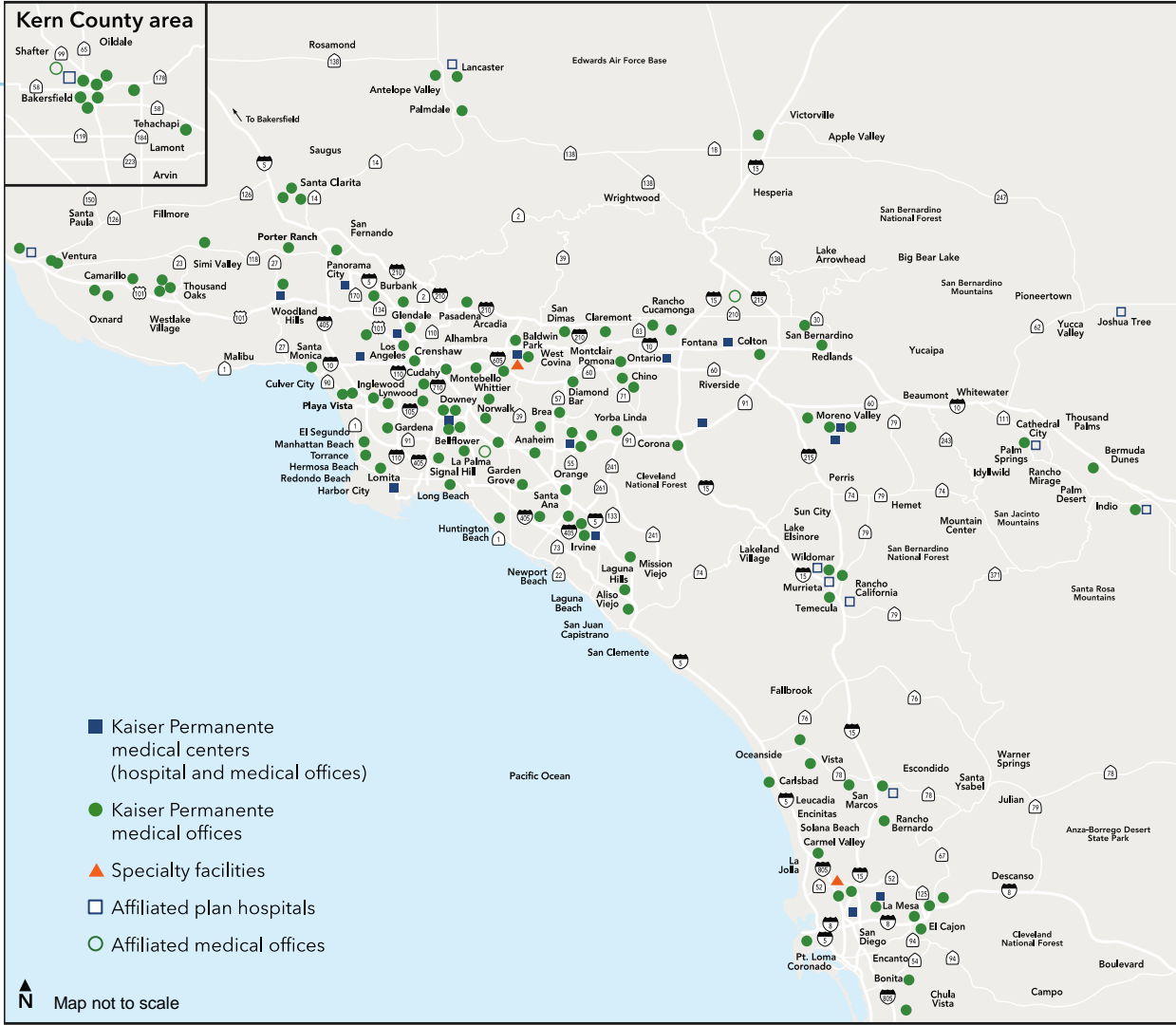
# Southern California

15 medical centers

125 medical offices

10 affiliated hospitals

4 affiliated medical offices



# SCAL Target Clinics – open with limited services



- Staffed with KP nurse practitioners & licensed vocational nurses
- More than 85 different services available
- Integrated with members' electronic health record
- 31 locations throughout Southern California
- Learn more at: [kptargetclinic.org](http://kptargetclinic.org)
- Hours: M-F 9am-7pm, Sat-Sun 11am-4pm; Closed for lunch 2-2:30pm

## Los Angeles County

- Burbank
- Compton
- Eagle Rock
- Hawthorne
- Inglewood
- Northridge
- Norwalk
- Pico Rivera
- Redondo Beach
- Rosemead
- Santa Clarita East
- West Covina South
- Westlake Village

## Orange County

- Irvine North
- San Clemente
- West Fullerton

## Riverside County

- Hemet
- Lake Elsinore
- Menifee
- Norco
- Palm Desert
- Riverside Arlington

## San Diego County

- Chula Vista
- Encinitas
- SD Mission Valley
- Santee
- Vista

## San Bernardino County

- Apple Valley
- Fontana North
- Montclair
- Redlands



# Access from anywhere – Travel line

Members can always connect to care - gives them the peace of mind that they're covered anywhere



## **Away from Home Travel Line: 951-268-3900**

- 24/7 support while traveling
- Get immunization information from our travel clinic
- Find care in another Kaiser Permanente service area
- Assistance with claims reimbursement



## **Appointment and Advice Line**

Get clinical care 24/7 by talking to a clinician. No need for an appointment. Phone numbers vary by service area.





## **MinuteClinic and Concentra urgent care**

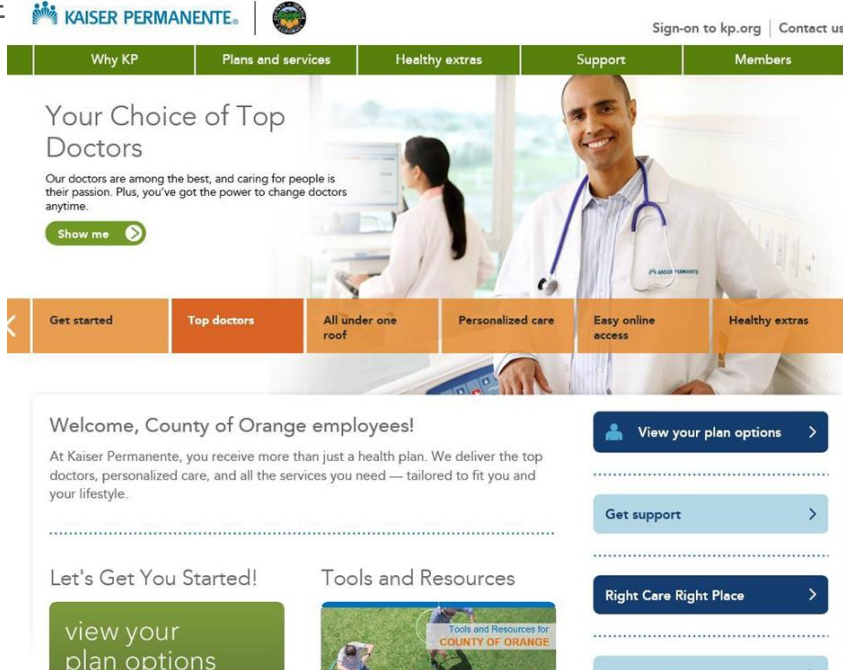
Get care outside of our service area at MinuteClinic ([minuteclinic.com](http://minuteclinic.com)) or at a Concentra urgent care center ([concentra.com/patients/urgent-care](http://concentra.com/patients/urgent-care)).



# Tools & Resources

# Dedicated microsite

- Convenient location that houses frequently used flyers, including:
- HMO & DHMO benefit summaries
- E  | 



Sign-on to kp.org | Contact us

Why KP | Plans and services | Healthy extras | Support | Members

## Your Choice of Top Doctors

Our doctors are among the best, and caring for people is their passion. Plus, you've got the power to change doctors anytime.

[Show me](#)

Get started | Top doctors | All under one roof | Personalized care | Easy online access | Healthy extras

Welcome, County of Orange employees!

At Kaiser Permanente, you receive more than just a health plan. We deliver the top doctors, personalized care, and all the services you need — tailored to fit you and your lifestyle.

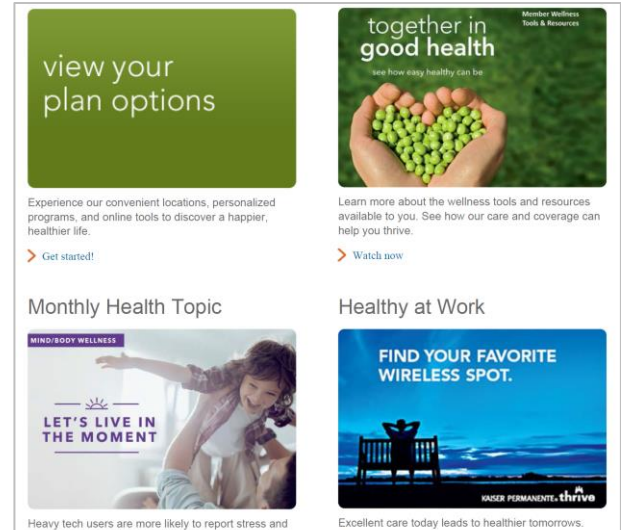
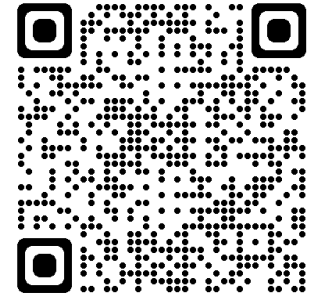
Let's Get You Started! | Tools and Resources

[view your plan options](#)

[Get support](#)

[Right Care Right Place](#)

To learn more, visit: [my.kp.org/oc](https://my.kp.org/oc)



**view your plan options**

Experience our convenient locations, personalized programs, and online tools to discover a happier, healthier life.

[Get started!](#)

**together in good health**

Member Wellness Tools & Resources

Learn more about the wellness tools and resources available to you. See how our care and coverage can help you thrive.

[Watch now](#)

**Monthly Health Topic**

MIND/BODY WELLNESS

LET'S LIVE IN THE MOMENT

Heavy tech users are more likely to report stress and

**Healthy at Work**

FIND YOUR FAVORITE WIRELESS SPOT.

Excellent care today leads to healthier tomorrows.

# Digital Self-Care Tools

An online collection of tools, resources, and information — entirely on demand



## Calm app

Calm uses meditation and mindfulness to help lower stress, reduce anxiety, and improve sleep quality. Available at no cost to adult members.

- A new 10-minute Daily Calm meditation every day
- Guided meditations for anxiety, stress, gratitude, and more
- Sleep Stories (soothing bedtime tales for grown-ups)



## myStrength app

myStrength is designed to navigate life's challenges, make positive changes and support your overall well-being. Available at no cost to adult members.

- Interactive activities
- Daily health trackers to monitor your progress
- In the moment coping tools and more
- New First Responder module

For information visit: [kp.org/selfcareapps](https://kp.org/selfcareapps)



# Health Education Classes

With all kinds of health classes and support groups offered at our facilities, there's something for everyone. Classes vary at each location, and some may require a fee. Learn what you can do to improve your health.



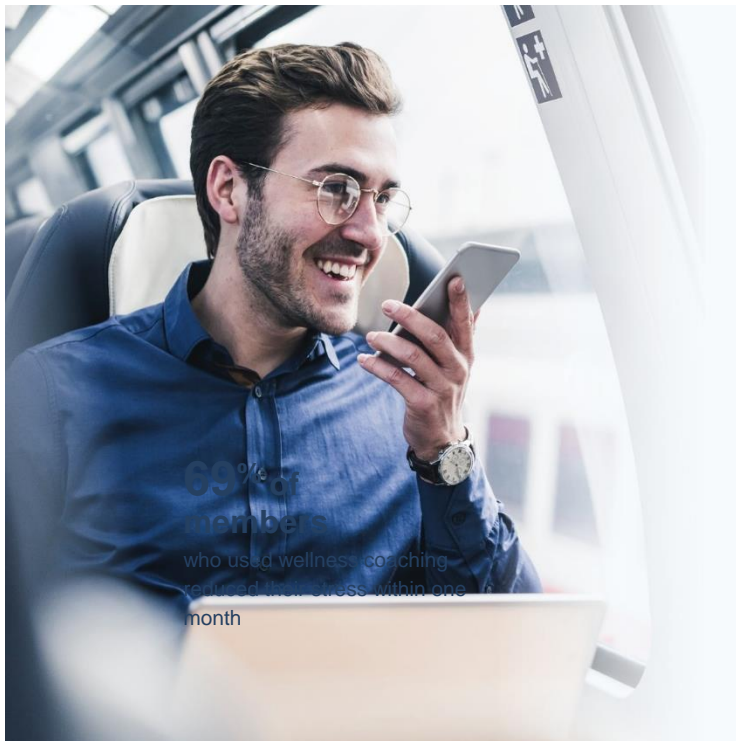
## **Our Health Education Department offers:**

- Health Classes and Resources
- Health Nutrition and Counseling
- Patient Education Videos
- Online Health tools

Learn more at: [kp.org/classes](https://kp.org/classes)

# Wellness Coaching by Phone

Convenient, ongoing support from a specially trained health professional at no extra cost.



## Many areas of focus

Whether you want less stress or better sleep, wellness coaches can help. They're not mental health care providers, but they can set up an action plan to keep you motivated toward your health goals.

## Convenient scheduling

Phone sessions are available 5 days a week and typically last 20 minutes.

## A dedicated partner in health

The same coach will get to know you over multiple sessions — providing tailored guidance at whatever time and frequency works best for you.

Learn more at:

[kp.org/coaching](https://kp.org/coaching) or 1-866-862-4295

# Healthy Lifestyle Programs

No cost, online health guidance and action items to help build and reach health goals

## Total Health assessment

A quick, 10-minute survey will help us assess your health and medical history.

## Goal setting

Based on your answers, we'll help you choose some goals to focus on, like improving your mood, keeping stress in check, and sleeping better.

## Activity recommendations

We'll help you form better habits by suggesting a handful of activities you can fit into your daily or weekly routines.

Learn more at:

[kp.org/healthylifestyles](https://kp.org/healthylifestyles)



# New workouts for your total health

## ClassPass workouts

Get moving with fitness options that fit your schedule and lifestyle, including Pilates, dance, boxing, cardio, strength training, and yoga.

- **Online video workouts at no cost** — 4,000+ on-demand fitness classes
- **Reduced rates on fitness classes** — Take real-time online and in-person classes from top fitness studios

Learn more at:

[kp.org/exercise](https://kp.org/exercise)

## CLASSPASS

**HIIT, OUTDOOR**  
**HIIT Circuit**  
★★★★★ 4.8 (1,896)

**STRENGTH TRAINING, VIDEO** 20:00  
**Total Body**  
★★★★★ 4.8 (1,895)

**STRENGTH TRAINING, E**  
**Classic Barre**  
★★★★★ 4.8 (1,724)

**CARDIO, HIIT, VIDEO** 15:00  
**Body Conditioning**  
★★★★★ 4.8 (1,964)

**YOGA, LIVESTREAM** LIVE  
**Vinyasa Flow**  
★★★★★ 4.8 (2,728)

**BARRE, OUTDOOR**  
**Barre + Sculpt**  
★★★★★ 4.8 (1,522)

**BOXING, STRENGTH TRAINING**  
**Boxing 101: Ringwork**  
★★★★★ 4.8 (847)

**START TIME** 6:00 AM - 8:00 AM

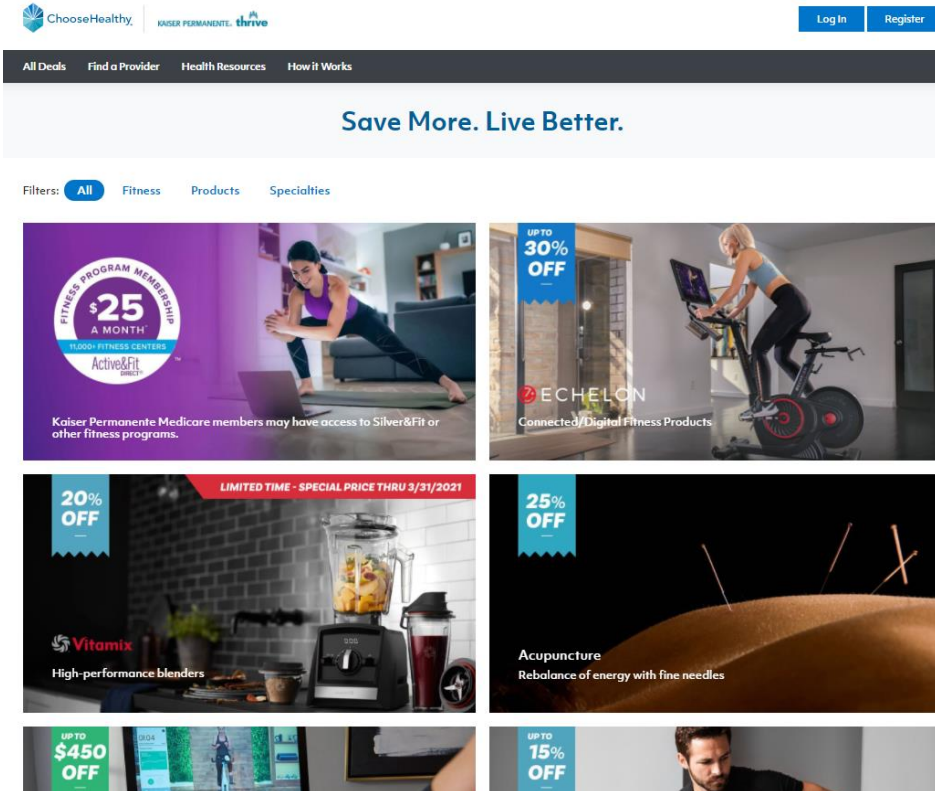
**DISTANCE**  
1/2 mi | 1 mi | 2 mi | 5 mi | 10 mi

**AMENITIES**  
Showers | Parking | Lockers

**LEVEL**

**MEDITATION**  
**Breathwork Medi**  
★★★★★ 4.7 (1,167)

# Choose Healthy Program – member rates



Get reduced rates on many extra products and services through ChooseHealthy™.\*

- Get discounts up to 55% or more on popular health and fitness brands
- Enroll in the Active&Fit Direct™ program, and choose from 10,000+ fitness centers for \$25 a month (see reverse for details)
- Save up to 25% on services from specialty health care practitioners
- Learn from evidence-based, online health classes and articles offered at no extra cost

**For more information:**

Visit: [kp.org/choosehealthy](https://kp.org/choosehealthy)

Call: 877-335-2746

# Food for Health Resources

Find easy and delicious healthy recipes! We make it easy to cook and eat wholesome food for a healthier life.

## Recipe library

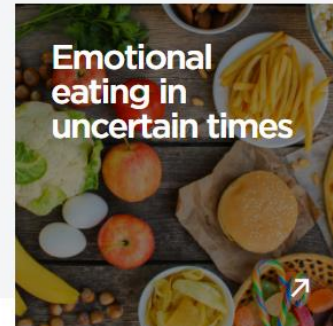
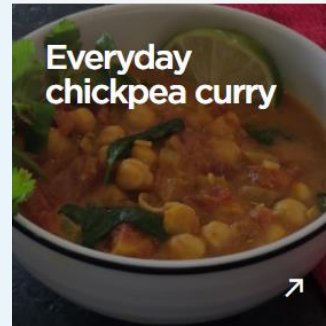
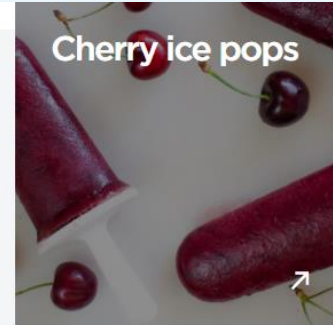
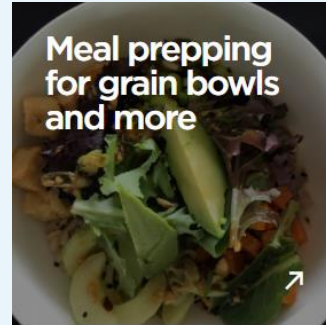
- 700+ Healthy Recipes
- Browse by season, appetizer, meals, and more

## Need nutrition advice?

- Meal Prepping
- Plant Based / Vegetarian Diet
- Nutrition when it comes to total health

**Start cooking healthy today!**

[kp.org/FoodforHealth](https://kp.org/FoodforHealth)



# A better experience from the start

We guide you through each step of joining Kaiser Permanente, so you can start getting the care you need from day one.



## Personalized onboarding

- A welcome call to answer your questions
- A member guide to get you started



## 3 easy steps to a healthy change

- Choose your new doctor
- Transition your care and prescriptions seamlessly
- Get care on your schedule

Learn more at:

[kp.org/newmember](https://kp.org/newmember)



# Want to learn more?

Choosing a health plan is a big decision — so we're here to answer any of your questions.



## Ask about the essentials

- Where to get care
- Specialty care services
- How our doctors, hospitals, and health plan work together to make your life easier

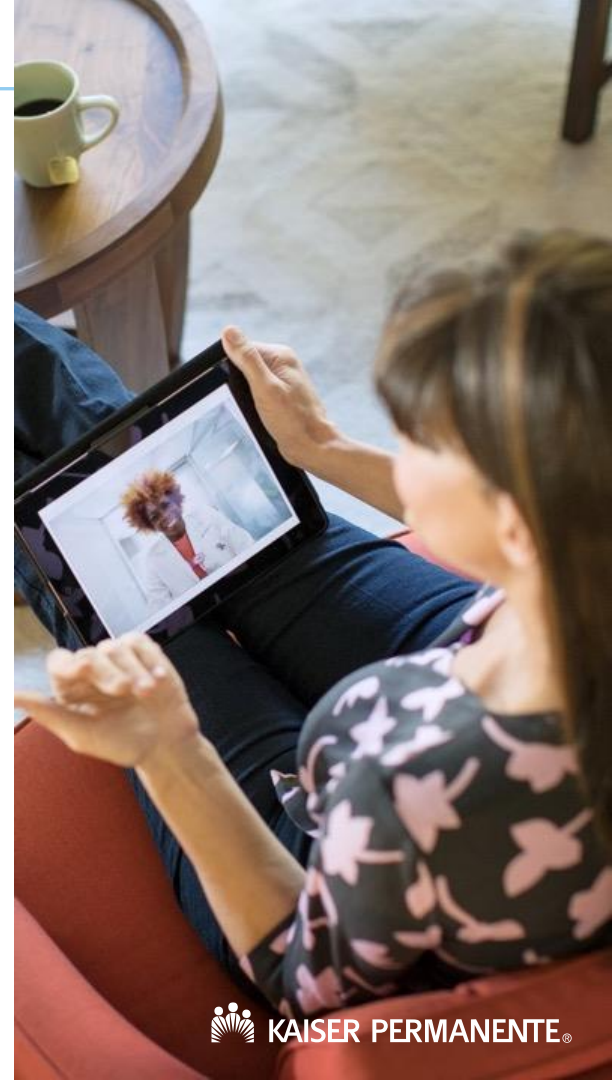


## Or about our extra features

- Video visits\* and other convenient ways to get care
- Apps, podcasts, and other self-care resources available to you at no additional cost

Call **1-800-514-0985** (TTY 711), Monday through Friday, 7 a.m. to 6 p.m. Pacific time.

*\*When appropriate and available.*





# Questions?

- Call our **Member Service Call Center at 1-800-464-4000 or TTY 711.**
  - Open 7 days a week, 24 hours a day. Closed holidays.
  - Closed at 10pm the day after Thanksgiving, Christmas Eve, and New Year's Eve.
- Prospective Members call **1-800-514-0985 (TTY 711)**, Monday through Friday, 7am to 6pm for questions on where to get care, our specialty services, or support for ongoing chronic conditions.
- New Members can visit: **[kp.org/newmember](https://kp.org/newmember)** to learn more about our onboarding process.
- Dedicated Microsite: **[my.kp.org/oc](https://my.kp.org/oc)**

2022 Open Enrollment  
County of Orange – Medicare Retirees

Find your healthy place

With care designed to help you thrive

# High Medicare star quality ratings you can depend on\*

---

## MEDICARE STAR RATINGS

### Feel confident with Star quality

For peace of mind knowing you're getting a quality plan, check out how highly rated\* our 2021 Medicare health plans are at [kp.org/medicarestars](https://kp.org/medicarestars).

# Quality care with you at the center

Your doctor will build a care plan based on your needs and work with your care team to deliver high-quality, personalized care.



**Preventive care to keep you healthy**



**Specialty care when you need it**

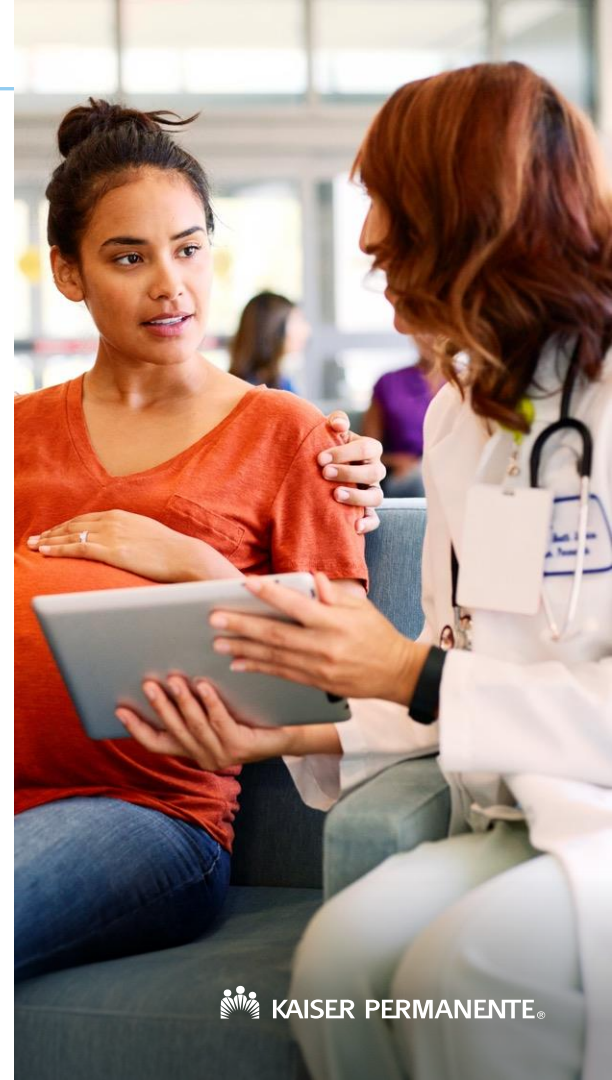


**Support for ongoing conditions**

**Get care in your language** — with multilingual doctors and phone interpretation in more than 150 languages.

Search doctors at [kp.org/searchdoctors](https://kp.org/searchdoctors)

We've helped deliver millions of COVID-19 vaccines to our members, communities, and underserved areas. Visit [kp.org/covidvaccine](https://kp.org/covidvaccine) to search vaccine appointments.



# Accessing Care



# Convenient ways to get what you need

You have flexible options to get care beyond the doctor's office — and you can manage your care anytime with the Kaiser Permanente app or at kp.org.



## Getting care

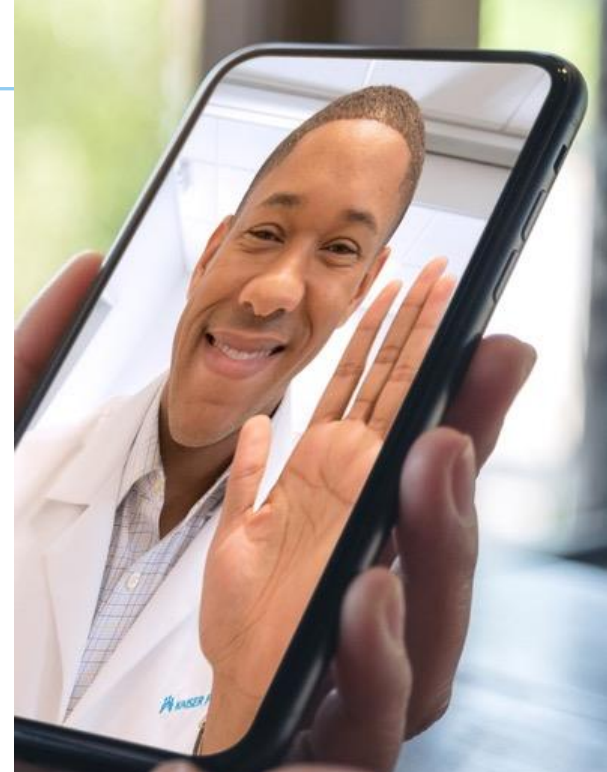
- Talk with a Kaiser Permanente clinician by video or phone for the same high-quality care as an in-person visit.<sup>1</sup>
- Get 24/7 care advice by phone or online.
- Email your doctor's office with nonurgent questions.<sup>2</sup>
- E-Visit



## Managing your health<sup>2</sup>

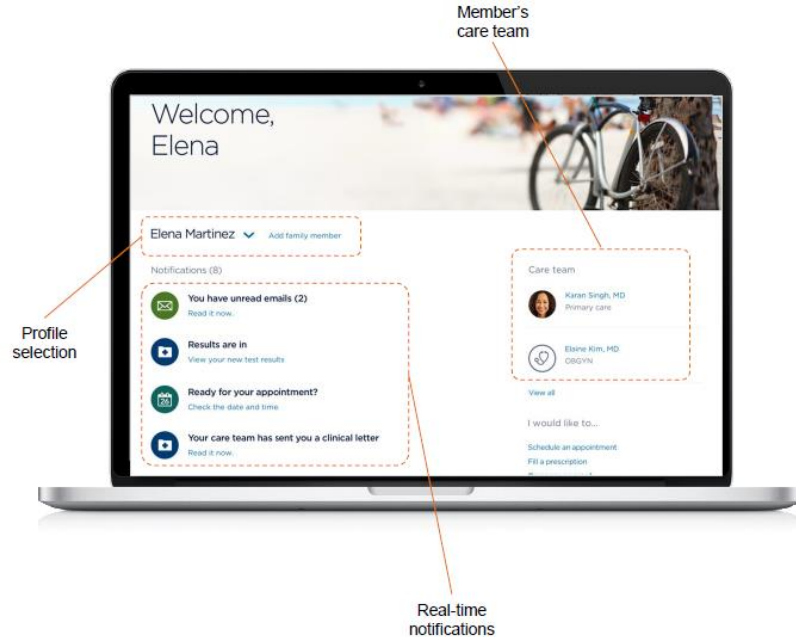
- Schedule or cancel routine appointments.
- Fill most prescriptions for home delivery or same-day pickup.
- Check your health records and pay bills.

1. When appropriate and available. 2. Available when you get care from Kaiser Permanente facilities.



**Telehealth services aren't an add-on — they've helped us deliver personalized care for years.**

# More ways to get care at your fingertips



## Personalized Welcome page

- See tools to manage your care
- Quickly access your care team
- Choose your language preference
- Review notifications
- Manage a family member's health care with profile selections<sup>1</sup>

## At kp.org or with the Kaiser Permanente app, you can stay on top of your care 24/7

- Schedule and cancel routine appointments
- Email your Kaiser Permanente doctor's office with nonurgent questions on any of your devices
- Try an E-visit for a quick online evaluation of your symptoms<sup>1</sup>
- View most lab results

*1. Online features change when children reach age 12. Teens are entitled to additional privacy protection under state laws. When your child turns 12 years old, you will still be able to manage care for your teen, with modified access to certain features*

# Mental health services — care for the whole you

Your thoughts and feelings affect your overall well-being. We're committed to helping you achieve and maintain optimal health for your mind, body, and spirit.

- Get support for a wide range of conditions, like anxiety, depression, substance use disorder, and autism spectrum disorders.
- Find care with psychiatrists, psychologists, marriage and family therapists, and more.
- Make an appointment for therapy within Kaiser Permanente without a referral.
- Use a wide range of online self-care resources at any time to help you relieve stress, improve sleep, practice mindfulness, and more.

Learn more at: [kp.org/mentalhealth](https://kp.org/mentalhealth).







**Self-referral**

**Doctors and specialists**

**Mental health advice call center**

**24/7 care advice by phone**

**Emergency department**

### **Rapid intake and triage**

Accelerates treatment to give members the right care at right time (when appropriate and available)



**Self-care**



**Primary care**



**Specialty care**

# how to access mental health care

At Kaiser Permanente, getting care starts with a conversation. Members can easily connect with us — online, over the phone, during a visit, or just by walking in. From there, a mental health team member will guide the you toward the right care, at the right time.

# Mental Health Classes

Programs taught by therapists and trained instructors to support stress, strengthen relationships, and more

## **In-person classes**

These health education classes, seminars, and programs offer face-to-face interactions that will empower you to take small steps toward healthy changes.

## **Therapy and support groups**

You can learn and connect with others in a safe and supportive environment, exchange information, experiences, and help people dealing with similar conditions or challenges.

## **Individual counseling sessions**

You can get direct support and counseling from a member of our care team.



# Benefits & Locations

# Summary of Benefits – Medicare Retirees

\*This table shows an example of some of your group’s benefits.

<b>Yearly deductible</b>	None
<b>Maximum yearly out-of-pocket costs</b>	\$1,500 individual/\$3,000 family
<b>Covered service</b>	<b>You pay</b>
<b>Preventive care</b>	No charge
<b>Doctor’s office visit</b>	\$20 copay
<b>Telephone and Video visits</b>	No charge
<b>Lab tests and radiology</b>	No charge
<b>Outpatient surgery</b>	\$20 copay
<b>Hospitalization</b>	\$100 copay
<b>Emergency care</b>	\$50 copay
<b>Prescribed medications (up to 100-day supply)</b>	\$10 copay (generic medication)/\$35 copay (brand-name medication)
<b>Eyewear (every 24 months)</b>	\$150 frame and lens allowance
<b>Chiropractic Services</b>	\$15 copay / up to 30 visits per calendar year

\*This is a summary of some benefits and their copays and coinsurance. For specific information about your covered health plan benefits, limitations, and exclusions, including those not listed in this summary, please see your *Evidence of Coverage*.

## Silver&Fit Exercise and Healthy Aging Program

Now available for Kaiser Permanente Senior Advantage (HMO) plan members

The Silver&Fit Exercise and Healthy Aging Program\* can help you stay active and thrive, **at no additional cost.** Choose the exercise plan that best matches your lifestyle:



### FITNESS FACILITY MEMBERSHIP

Select a fitness facility from Silver&Fit's broad network of participating fitness facilities. Where available, you can:

- ▶ Work out with cardiovascular and strength-training equipment
- ▶ Access features such as saunas, pools, and whirlpools†
- ▶ Attend Silver&Fit classes, including yoga, swimming, strength and cardio training, and more
- ▶ Get Healthy Aging materials to help you find the right exercise program



### HOME FITNESS PROGRAM

We make it easy to fit fitness into your day—right where you're most comfortable. With the home fitness program, you'll get:

- ▶ Up to 2 home fitness kits each benefit year
- ▶ A choice of fitness styles, such as Pilates, stress management, and Chair Dancing
- ▶ Healthy Aging materials to help you find the right exercise program

# Silver&Fit Exercise and Healthy Aging Program

## How to get started with the Silver&Fit program

Once you're a Kaiser Permanente Senior Advantage member, follow these steps:

- Go to **SilverandFit.com**
- Register to use the site.
- Choose a participating fitness facility or sign up for the Home Fitness Program
- Print out your fitness card, take it to the fitness facility, and start exercising.

---

**Learn more at [SilverandFit.com](https://SilverandFit.com)**  
**Or call 1-877-427-4788 (TTY/TDD 1-877-710-2746)**

- The Silver&Fit program is provided by American Specialty Health Fitness, Inc. (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH). The Silver&Fit program is available to current members of participating Kaiser Permanente Group Medicare health plans.
- All programs and services are not available in all areas. Silver&Fit and The Silver Slate are federally registered trademarks of ASH. Other names and logos may be trademarks of their respective owners.  
†Any additional fees not included.

## Transportation – Need a ride to the doctor?

You can now get a ride to and from your doctor visits at no charge. As a Kaiser Permanente Medicare health plan member, you can get a ride to and from your appointments at no cost. Your plan covers up to 24 one-way trips (50 miles per trip) per calendar year.

**To use this service, you must:  
Be a County of Orange KPSA member  
and be going to a medical service  
covered by the plan.**

- You can get a ride to and from your medical related appointments at no cost
- Your plan covers up to 24 one-way trips (50 miles per trip) per calendar year
- You can get rides for: doctor appointments, medical services such as lab or X-ray and picking up medications or medical equipment

**To schedule a ride:**

- For rideshare, taxi, or private transportation service call: 1-877-930-1477 (TTY 711)
- Wheelchair van or gurney van service, request the service through your KP doctor
- Request your ride at least 3 business days (Monday through Friday) before your appointment

## Meals – Fresh, nutritious delivery

As a Kaiser Permanente Medicare health plan member, you can get fresh, healthy meals delivered to your home immediately following an inpatient stay at a hospital or skilled nursing facility at no cost.

### How does the meal plan work?

- Upon discharge from an inpatient stay at a hospital or skilled nursing facility, your care team will refer you for meal delivery to your home.
- A representative from the meal provider will call you to talk about available menu options and to schedule delivery.
- You can get 3 meals per day for up to 4 weeks, for a total of 84 meals.

### Who can use this service?

Every meal is:

- You must be a Kaiser Permanente Medicare health plan member covered under County of Orange KPSA plan.
- You receive a referral from your care team upon discharge from a hospital or skilled nursing facility.
- You are discharged to go home and not to another inpatient or skilled nursing facility.

*Meal service is only available once per calendar year. Meals can be delivered to any home in your Kaiser Permanente service area. Menus are subject to change. Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal. You must reside in the Kaiser Permanente Medicare health plan service area in which you enroll.*



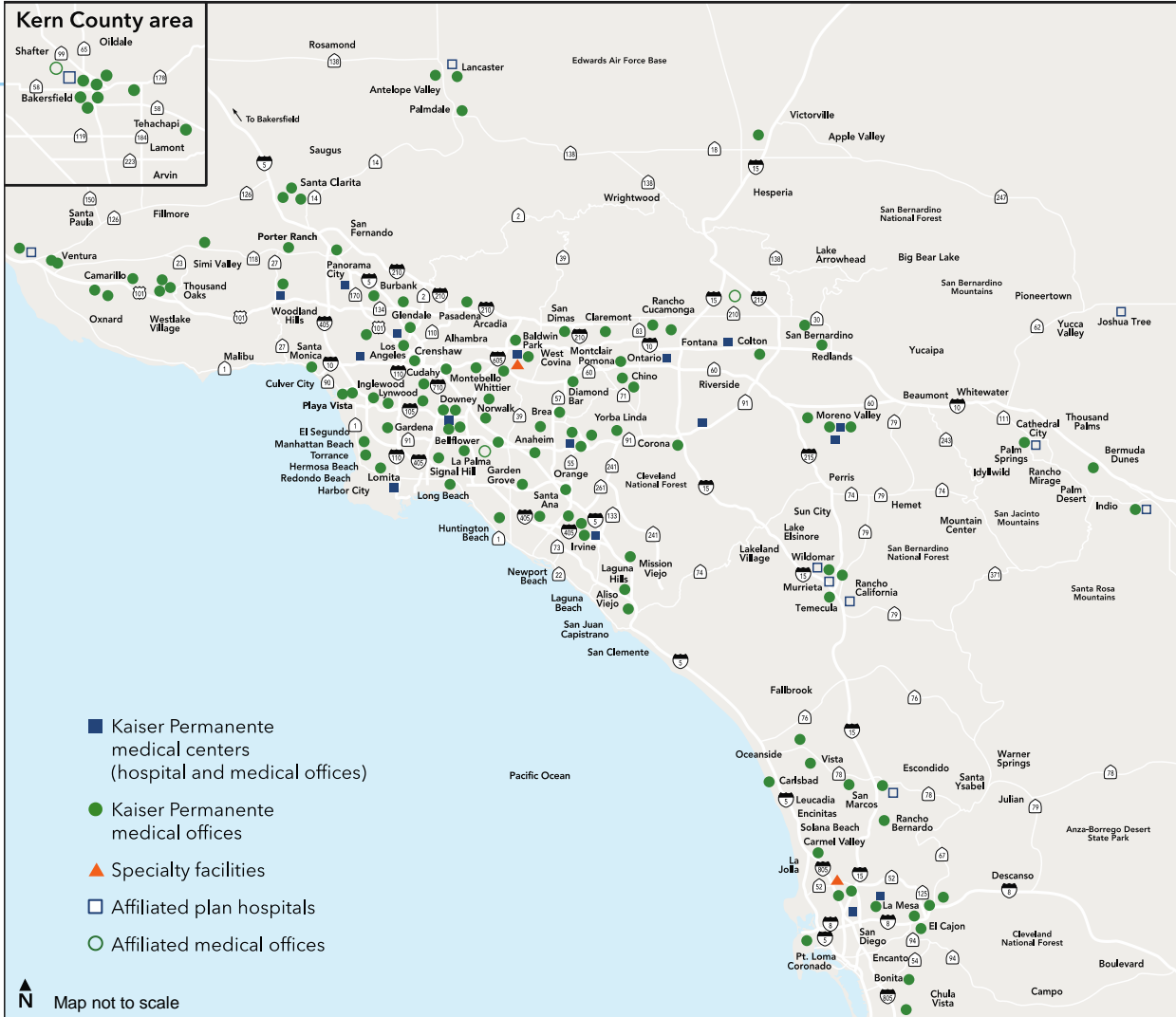
# Southern California

15 medical centers

125 medical offices

10 affiliated hospitals

4 affiliated medical offices



# SCAL Target Clinics – open with limited services



- Staffed with KP nurse practitioners & licensed vocational nurses
- More than 85 different services available
- Integrated with members' electronic health record
- 31 locations throughout Southern California
- Learn more at: [kptargetclinic.org](http://kptargetclinic.org)
- Hours: M-F 9am-7pm, Sat-Sun 11am-4pm; Closed for lunch 2-2:30pm

## Los Angeles County

- Burbank
- Compton
- Eagle Rock
- Hawthorne
- Inglewood
- Northridge
- Norwalk
- Pico Rivera
- Redondo Beach
- Rosemead
- Santa Clarita East
- West Covina South
- Westlake Village

## Orange County

- Irvine North
- San Clemente
- West Fullerton

## Riverside County

- Hemet
- Lake Elsinore
- Menifee
- Norco
- Palm Desert
- Riverside Arlington

## San Diego County

- Chula Vista
- Encinitas
- SD Mission Valley
- Santee
- Vista

## San Bernardino County

- Apple Valley
- Fontana North
- Montclair
- Redlands



# Access from anywhere – Travel line

Members can always connect to care - gives them the peace of mind that they're covered anywhere



## **Away from Home Travel Line: 951-268-3900**

- 24/7 support while traveling
- Get immunization information from our travel clinic
- Find care in another Kaiser Permanente service area
- Assistance with claims reimbursement



## **Appointment and Advice Line**

Get clinical care 24/7 by talking to a clinician. No need for an appointment. Phone numbers vary by service area.





## **MinuteClinic and Concentra urgent care**

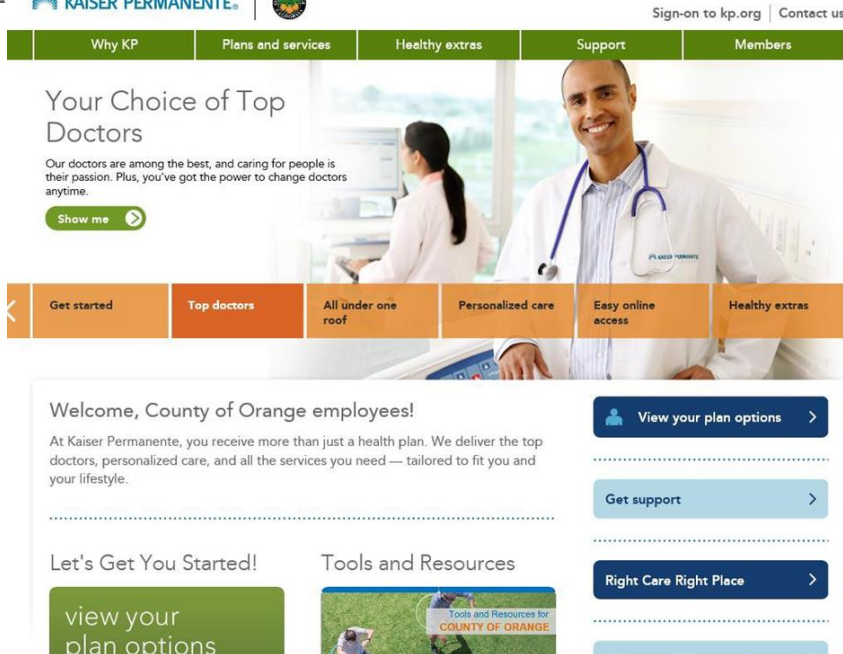
Get care outside of our service area at MinuteClinic ([minuteclinic.com](https://www.minuteclinic.com)) or at a Concentra urgent care center ([concentra.com/patients/urgent-care](https://www.concentra.com/patients/urgent-care)).



# Tools & Resources

# Dedicated microsite

- Convenient location that houses frequently used flyers, including:
- HMO & DHMO benefit summaries
- E  | 



Sign-on to kp.org | Contact us

Why KP | Plans and services | Healthy extras | Support | Members

### Your Choice of Top Doctors

Our doctors are among the best, and caring for people is their passion. Plus, you've got the power to change doctors anytime.

[Show me](#)

Get started | Top doctors | All under one roof | Personalized care | Easy online access | Healthy extras

Welcome, County of Orange employees!

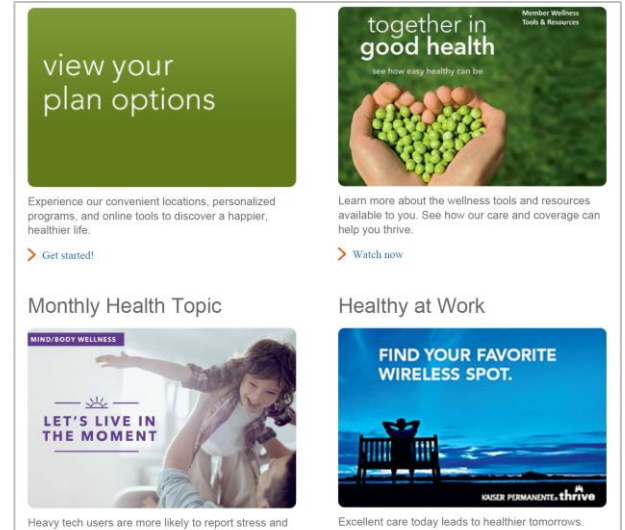
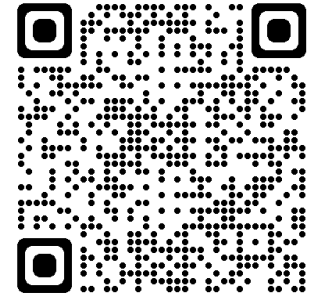
At Kaiser Permanente, you receive more than just a health plan. We deliver the top doctors, personalized care, and all the services you need — tailored to fit you and your lifestyle.

Let's Get You Started! | Tools and Resources

[view your plan options](#)

[Right Care Right Place](#)

To learn more, visit: [my.kp.org/oc](https://my.kp.org/oc)



view your plan options

together in good health  
see how easy healthy can be

Member Wellness Tools & Resources

Experience our convenient locations, personalized programs, and online tools to discover a happier, healthier life.

Learn more about the wellness tools and resources available to you. See how our care and coverage can help you thrive.

Monthly Health Topic

MIND/BODY WELLNESS

LET'S LIVE IN THE MOMENT

Healthy at Work

FIND YOUR FAVORITE WIRELESS SPOT.

HEAVY tech users are more likely to report stress and

Excellent care today leads to healthier tomorrows.

# Digital Self-Care Tools

An online collection of tools, resources, and information — entirely on demand



## Calm app

Calm uses meditation and mindfulness to help lower stress, reduce anxiety, and improve sleep quality. Available at no cost to adult members.

- A new 10-minute Daily Calm meditation every day
- Guided meditations for anxiety, stress, gratitude, and more
- Sleep Stories (soothing bedtime tales for grown-ups)



## myStrength app

myStrength is designed to navigate life's challenges, make positive changes and support your overall well-being. Available at no cost to adult members.

- Interactive activities
- Daily health trackers to monitor your progress
- In the moment coping tools and more
- New First Responder module

For information visit: [kp.org/selfcareapps](https://kp.org/selfcareapps)

# Wellness Coaching by Phone

Convenient, ongoing support from a specially trained health professional at no extra cost.



69% of members who used wellness coaching reduced their stress within one month

## Many areas of focus

Whether you want less stress or better sleep, wellness coaches can help. They're not mental health care providers, but they can set up an action plan to keep you motivated toward your health goals.

## Convenient scheduling

Phone sessions are available 5 days a week and typically last 20 minutes.

## A dedicated partner in health

The same coach will get to know you over multiple sessions — providing tailored guidance at whatever time and frequency works best for you.

Learn more at:

[kp.org/coaching](https://kp.org/coaching) or 1-866-862-4295

# New workouts for your total health

## ClassPass workouts

Get moving with fitness options that fit your schedule and lifestyle, including Pilates, dance, boxing, cardio, strength training, and yoga.

- **Online video workouts at no cost** — 4,000+ on-demand fitness classes
- **Reduced rates on fitness classes** — Take real-time online and in-person classes from top fitness studios

Learn more at:

[kp.org/exercise](https://kp.org/exercise)

## CLASSPASS

The collage features several fitness class cards and a mobile app interface. The cards include:

- HIIT, OUTDOOR HIIT Circuit**: 4.8 (1,896)
- STRENGTH TRAINING, VIDEO Total Body**: 4.8 (1,895)
- STRENGTH TRAINING, E Classic Barre**: 4.8 (1,724)
- CARDIO, HIIT, VIDEO Body Conditioning**: 4.8 (1,964)
- YOGA, LIVESTREAM Vinyasa Flow**: 4.8 (2,728)
- BARRE, OUTDOOR Barre + Sculpt**: 4.8 (1,522)
- BOXING, STRENGTH TRAINING Boxing 101: Ringwork**: 4.8 (847)
- MEDITATION Breathwork Medi**: 4.7 (1,167)

The mobile app interface shows filters for:

- START TIME**: 6:00 AM - 8:00 AM
- DISTANCE**: 1/2 mi, 1 mi, 2 mi, 5 mi, 10 mi
- AMENITIES**: Showers, Parking, Lockers
- LEVEL**



# Choose Healthy Program – member rates

The screenshot shows the ChooseHealthy website interface. At the top, there are navigation links for "All Deals", "Find a Provider", "Health Resources", and "How it Works". A prominent banner reads "Save More. Live Better." Below this, there are filter tabs for "All", "Fitness", "Products", and "Specialties". The main content area features several promotional tiles:

- Fitness Program Membership:** A circular badge indicates "\$25 A MONTH" for "1,000+ FITNESS CENTERS" through the "Active&Fit" program. Text below states: "Kaiser Permanente Medicare members may have access to Silver&Fit or other fitness programs."
- Echelon:** A woman is shown on a stationary bike. A badge says "UP TO 30% OFF". Text below: "Echelon Connected/Digital Fitness Products".
- Vitamix:** A high-performance blender is shown. A badge says "20% OFF". Text below: "Vitamix High-performance blenders". A red banner at the top of the tile says "LIMITED TIME - SPECIAL PRICE THRU 3/31/2021".
- Acupuncture:** A close-up of acupuncture needles. A badge says "25% OFF". Text below: "Acupuncture Rebalance of energy with fine needles".
- Other Offers:** Two more tiles are partially visible at the bottom, one with a "\$450 OFF" badge and another with a "15% OFF" badge.

Get reduced rates on many extra products and services through ChooseHealthy™.\*

- Get discounts up to 55% or more on popular health and fitness brands
- Enroll in the Active&Fit Direct™ program, and choose from 10,000+ fitness centers for \$25 a month (see reverse for details)
- Save up to 25% on services from specialty health care practitioners
- Learn from evidence-based, online health classes and articles offered at no extra cost

**For more information:**

Visit: [kp.org/choosehealthy](https://kp.org/choosehealthy)

Call: 877-335-2746

# Food for Health Resources

Find easy and delicious healthy recipes! We make it easy to cook and eat wholesome food for a healthier life.

## Recipe library

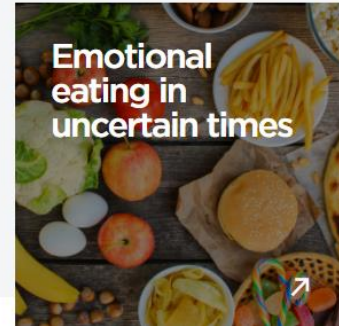
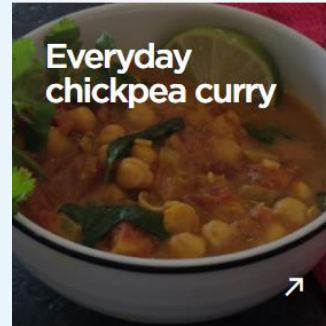
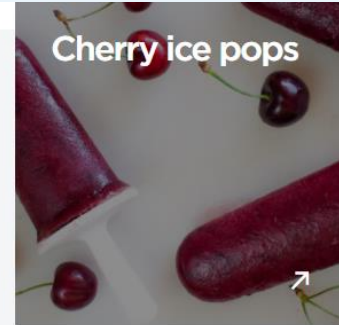
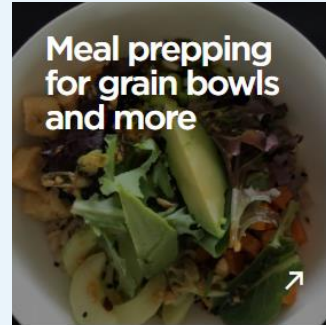
- 700+ Healthy Recipes
- Browse by season, appetizer, meals, and more

## Need nutrition advice?

- Meal Prepping
- Plant Based / Vegetarian Diet
- Nutrition when it comes to total health

**Start cooking healthy today!**

[kp.org/FoodforHealth](https://kp.org/FoodforHealth)



# A better experience from the start

We guide you through each step of joining Kaiser Permanente, so you can start getting the care you need from day one.



## Personalized onboarding

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## 3 easy steps to a healthy change

- Choose your new doctor
- Transition your care and prescriptions seamlessly
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# Want to learn more?

Choosing a health plan is a big decision — so we're here to answer any of your questions.



## Ask about the essentials

- Where to get care
- Specialty care services
- How our doctors, hospitals, and health plan work together to make your life easier

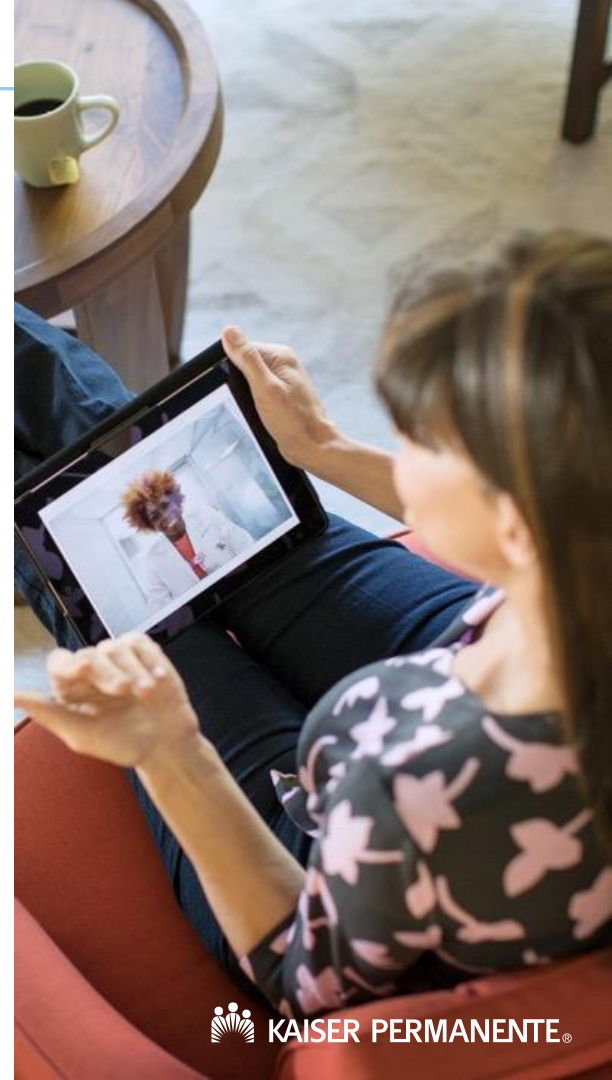


## Or about our extra features

- Video visits\* and other convenient ways to get care
- Apps, podcasts, and other self-care resources available to you at no additional cost

Call **1-800-514-0985** (TTY 711), Monday through Friday, 7 a.m. to 6 p.m. Pacific time.

*\*When appropriate and available.*



## Next steps

- Enrolling into Kaiser Permanente Senior Advantage allows you to continue with your current Kaiser Permanente personal physician.
- Make your Open Enrollment election through **My OC Benefits™** or over the phone with a Benefits Service Center representative.
- Kaiser Permanente and CMS will process your application.
- County of Orange Benefits Service Center will notify you if your application has been denied, you will receive an updated Confirmation of Benefits.
- If you are a new member and Kaiser Permanente is not in receipt of your enrollment by the deadline or your application was not approved, you will be enrolled into the Wellwise Retiree PPO health plan effective 1/1/2022 (unless you are in the Sharewell Retiree PPO plan, then you would remain there).

# Questions?

- Call our **Member Service Call Center at 1-800-464-4000 or TTY 711.**
  - Open 7 days a week, 24 hours a day. Closed holidays.
  - Closed at 10pm the day after Thanksgiving, Christmas Eve, and New Year's Eve.

Call our **Medicare Member Service Call Center at 1-800-443-0815 or TTY 711.**

- Open 7 days a week from 8am to 8pm.
- Prospective Members call **1-800-514-0985 (TTY 711)**, Monday through Friday, 7am to 6pm for questions on where to get care, our specialty services, or support for ongoing chronic conditions.
- New Members can visit: **[kp.org/newmember](https://kp.org/newmember)** to learn more about our onboarding process.
- Dedicated Microsite: **[my.kp.org/oc](https://my.kp.org/oc)**

# Choosing and using your Anthem plan



Your guide to open  
enrollment and making  
the most of your benefits





## Before choosing a plan

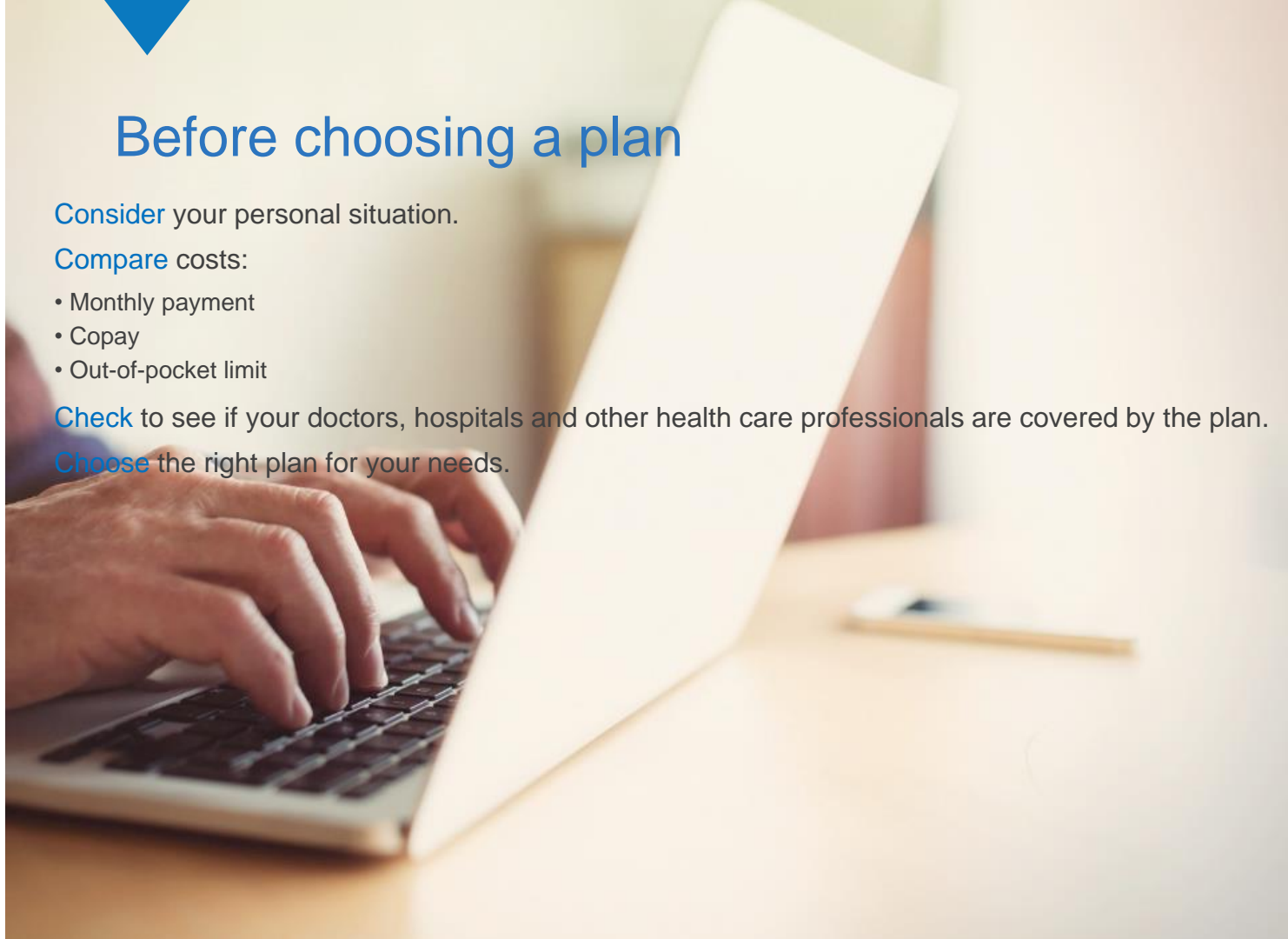
**Consider** your personal situation.

**Compare** costs:

- Monthly payment
- Copay
- Out-of-pocket limit

**Check** to see if your doctors, hospitals and other health care professionals are covered by the plan.

**Choose** the right plan for your needs.







## Plans at a glance

### All plans include:

- Access to one of the nation's largest networks of doctors and hospitals.
- Coverage for preventive care, like regular checkups, screenings and shots.
- A prescription drug plan with a convenient home delivery.
- Benefits for urgent and emergency care wherever you are.
- Health and wellness tools that help you stay healthy and reach your health goals.





## Traditional HMO Benefits

Covered Medical Benefits	You Pay
Yearly Deductible	None
Max Yearly Out of Pocket	None
Preventive Care	No Charge
Primary Care Visit	\$20 copay per visit
Specialist Care Visit	\$20 copay per visit
LiveHealth Online Visit	\$20 copay per visit
Emergency Room Visit <i>(copay waived if admitted)</i>	\$50 copay per visit
Outpatient Surgery	No Copay
Hospitalization	\$100 copay per admission
Covered Pharmacy Benefits	You Pay
RX Deductible	None
Generic	Level 1: \$5 copay per prescription Level 2: \$10 copay per prescription
Brand	Level 1: \$25 copay per prescription Level 2: \$30 copay per prescription
Non-Formulary	Level 1: \$45 copay per prescription Level 2: \$50 copay per prescription
Self-Administered (Injectable Drugs)	20% of prescription drug maximum allowed amount (maximum \$100 copay)



## Select HMO Benefits

Covered Medical Benefits	You Pay
Yearly Deductible	None
Max Yearly Out of Pocket	None
Preventive Care	No Charge
Primary Care Visit	\$20 copay per visit
Specialist Care Visit	\$40 copay per visit
LiveHealth Online Visit	\$20 copay per visit
Emergency Room Visit (copay waived if admitted)	\$100 copay per visit
Outpatient Surgery	No Copay
Hospitalization	No Copay
Covered Pharmacy Benefits	You Pay
RX Deductible	\$100/ individual Maximum of three separate deductibles per family (Brand Name & Self- Administered Injectable Drugs Only)
Generic	Level 1: \$5 copay per prescription Level 2: \$10 copay per prescription ( <i>deductible waived</i> )
Brand	Level 1: \$25 copay per prescription Level 2: \$30 copay per prescription
Non-Formulary	Level 1: \$45 copay per prescription Level 2: \$50 copay per prescription
Self-Administered (Injectable Drugs)	20% of prescription drug maximum allowed amount (maximum \$100 copay)

# RX Choice Tiered Network

## How do you use the Rx Choice Tiered Network?

### Level 1:

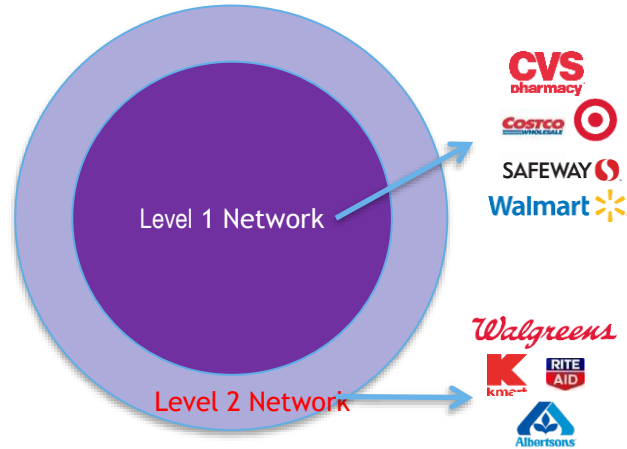
Nearly 25,000 pharmacies in the Rx Choice Tiered Network

Employee pays only their standard cost share.

### Level 2:

Visit one of the remaining 50,000 National Plus network pharmacies.

Employee pays cost share *plus* \$10 or 10% of drug cost, depending on benefit design.



## HMO Basics

### **Primary Care Physician- PCP**

Select from Anthem HMO Providers

- Family Practice/Internal Medicine/General Practice
- Provides and coordinates routine checkups, treatment of medical problems, and other health care services

### **Predictable Health Care Costs**

- No Deductibles
- Set Co-Pay amounts
- Preventive Care covered at 100%
- Flu Shots – Medical Office and In Network
- 24/7 NurseLine
- Live Health Online





## HMO Basics



### Primary Care Physician Referral Only

Your doctor can give you a referral to certain kinds of specialists, hospitals, and laboratories/x-ray facilities in your medical group.



### Direct Access

You can go directly (self-refer) to dermatologists; ear, nose and throat (ENT) doctors, OB/GYNs, mental health and allergists in your medical group, without a referral from your doctor. Direct Access is not available in all medical groups.

\*If you are less than 20 miles from your Medical Group or IPA you cannot self-refer. Call your doctor. If you are more than 20 miles from your Medical Group or IPA then go to the nearest Urgent Care or emergency facility.



## HMO Care While Traveling

HMO Customer Service 1-833-913-2236

Pharmacy Customer Service 1-800-700-2541

[www.anthem.com/ca/countyoforange/](http://www.anthem.com/ca/countyoforange/)

### **Outside of California**

Urgent Care or Follow-Up Care: Call 800-810-BLUE (2583) for the names and phone numbers of health care providers near your destination

### **Outside of the United States**

Emergency Care - Get the care you need at the closest facility

- ❖ Request an itemized bill for services received
- ❖ Submit the bill with the International Claim Form to Anthem Blue Cross for reimbursement

## Care and Cost Finder

Find quality care at a price that's right for you, with **anthem.com** and our Sydney Health app.

The Care and Cost Finder:

- Integrates your plan details for a true cost estimate.
- Searches across doctors, facilities, specialty providers, and urgent care.
- Compares provider and facility costs for 400 of the most common procedures.
- Recognizes everyday, natural language searches based on top provider and health service types.
- Gives you the ability to rate providers and review ratings from other members.





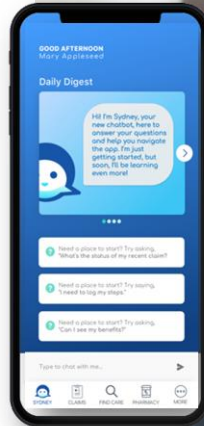


## Sydney Health mobile app

Download Sydney Health app and register on the app to take full advantage of your Anthem plan.

You can see your:

- Medical benefits and spending accounts.
- Integrated pharmacy benefits.
- Integrated dental, vision, life and disability benefits.
- Integrated clinical programs along with well-being tools and resources.
- Care providers in one location through the My Care Team feature.





See a doctor anytime at home or on the go

## LiveHealth<sup>®</sup> ONLINE

- Have a private video appointment with a doctor on your mobile phone, tablet or computer with a webcam.
- Doctors are available 24/7 for advice, treatment and prescriptions, if needed.
- See a licensed therapist or psychiatrist. Appointments are available 7 days a week and usually cost the same as an in-person visit.

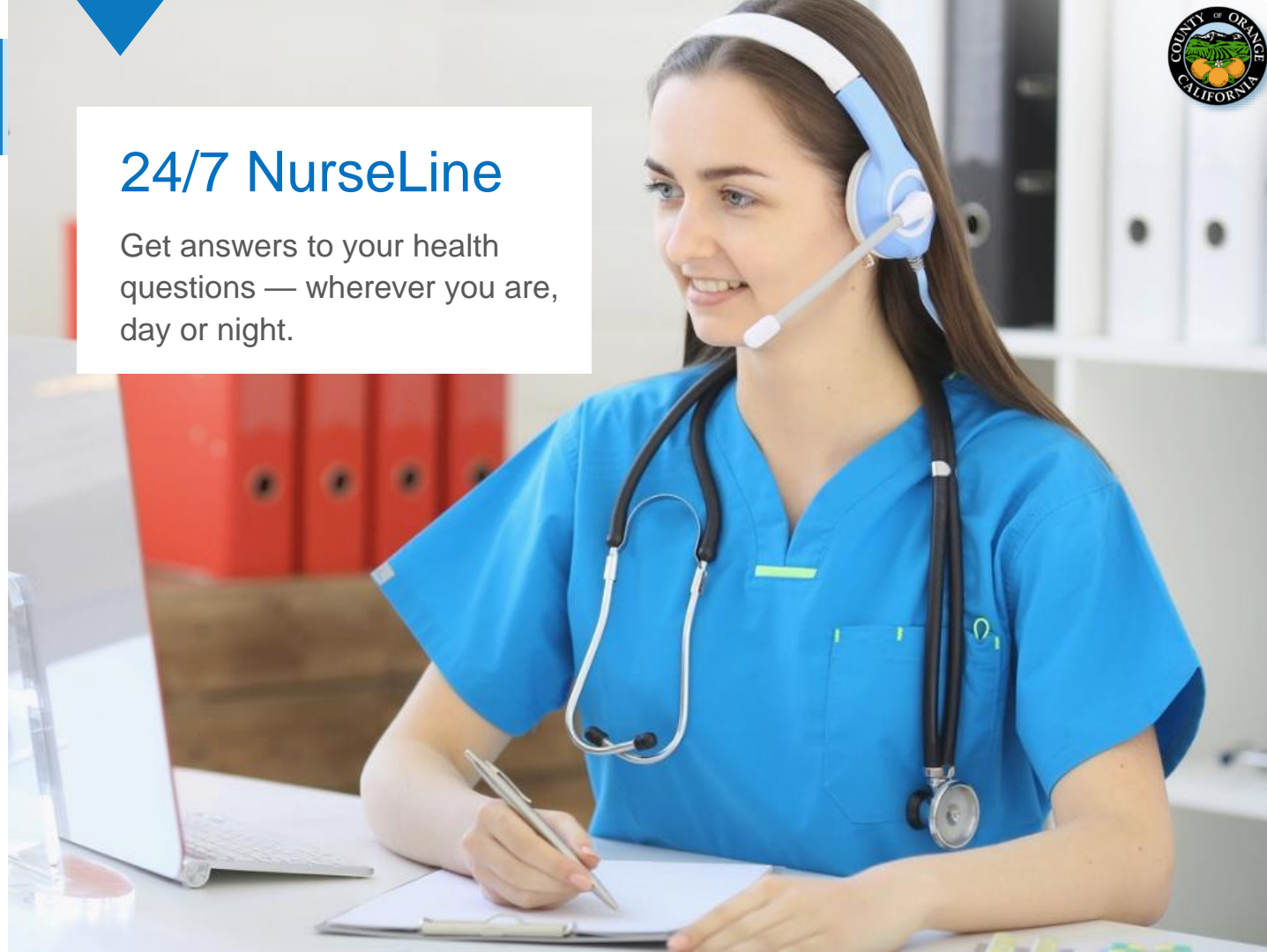
Sign up at [livehealthonline.com](https://livehealthonline.com) today or download the free app.





## 24/7 NurseLine

Get answers to your health questions — wherever you are, day or night.





## ConditionCare

**Get support from a dedicated nurse team if you have:**



Asthma



Diabetes



Heart disease / heart failure



Chronic obstructive pulmonary disease (COPD)

- Work with dietitians, health educators and pharmacists.



## Health and wellness programs



Become more engaged in your health.



Make better healthcare decisions.



Reach your health goals.



Save money on health-related products and services.

After your benefits start, go to [anthem.com/ca](https://www.anthem.com/ca) website or call the Member Services number on your member ID card or mobile app to take part in our programs.



## Online Wellness Toolkit

Set and achieve your unique health goals with:

- A health assessment to identify your health risks.
- A Health Assistant to help you lower your risks and meet your health goals.
- Trackers and wellness challenges to keep you motivated.



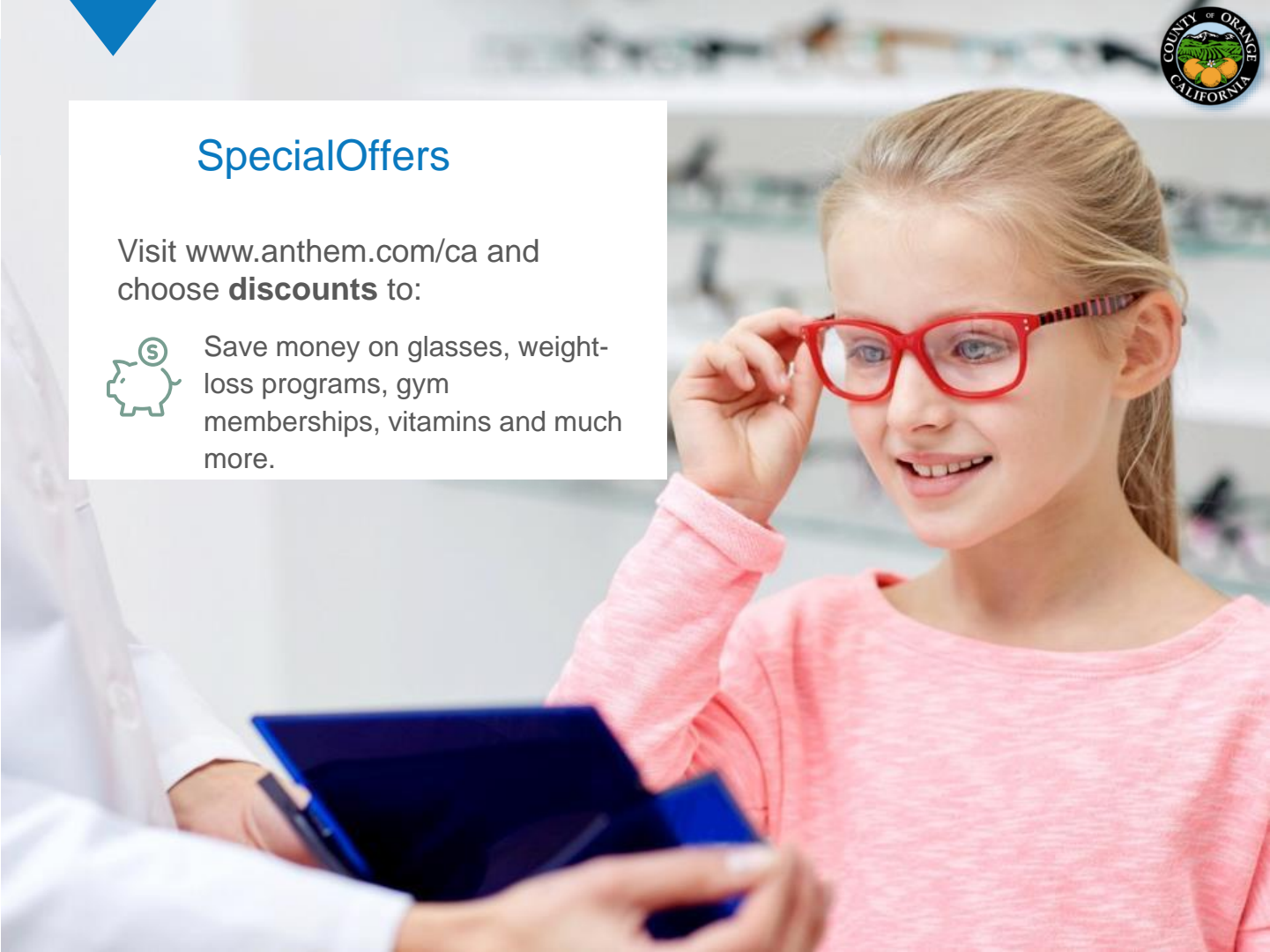


## Special Offers

Visit [www.anthem.com/ca](http://www.anthem.com/ca) and choose **discounts** to:



Save money on glasses, weight-loss programs, gym memberships, vitamins and much more.





## We're here to help

- **By phone:** call the Member Services number on your ID card.
- **Online:** register at [www.anthem.com/ca](http://www.anthem.com/ca) or download the mobile app to chat with a team member.



Anthem 



# Anthem Group Retiree Solutions

County of Orange

January 1, 2022





# Today's discussion

A few basics: Medicare 101

Your medical and prescription drug benefits

Simplify staying healthy

How to enroll

Questions











## Why choosing Medicare Advantage makes sense





# Members have a simpler, richer experience, compared to Original Medicare

Original Medicare	Medicare Advantage with Part D
 <p><b>Part A</b> Hospital insurance</p>  <p><b>Part B</b> Medical insurance</p>	 <p><b>Part A</b> Hospital insurance</p> <p>+</p>  <p><b>Part B</b> Medical insurance</p> <p>+</p>  <p><b>Part D</b> Prescription drug coverage</p>
<p>Plans sponsors can choose to offer:</p>  <p><b>Part D</b> Prescription drug coverage</p>  <p><b>Medicare Supplement</b> (Coordination of Benefits, Wrap)</p>	 <p>Plan sponsor control + better member experience + holistic care benefits + comprehensive support + outstanding quality metrics and results</p>

- Single member ID card
- Simpler member experience
- Custom benefit match
- National network platform
- SilverSneakers® fitness program
- Routine vision care
- Routine hearing services
- No-charge telemedicine
- Routine foot care
- Additional annual physical exam
- Plan sponsor control
- Comprehensive support
- Outstanding quality metrics and results

# What is a Medicare Advantage preferred provider organization PPO plan?



## Cost management

Copays allow you to know your out-of-pocket cost upfront.



## Additional benefits

It includes health services offered by Medicare, and your Medicare Part D drug benefits, plus additional preventive screening services and benefits not provided by Medicare.



## Emergency and urgent services

Worldwide emergency and urgent care are covered.



## Physician services

You have access to a large network of providers as well as out-of-network providers who accept Medicare.

# What is a Medicare Advantage health maintenance organization HMO plan?



## Cost management

Copays allow you to know your out-of-pocket cost upfront.



## Additional benefits

It includes health services offered by Medicare, and your Medicare Part D drug benefits, plus additional preventive screening services and benefits not provided by Medicare.



## Emergency and urgent services

Emergency and urgent care are covered from out-of-network providers if an in-network provider is not available or accessible.



## Physician services

You have access to primary care doctors who can help guide your care.\*

\* CA HMO plans referrals may apply.



# Additional benefits of Anthem's Medicare Advantage plan

## First Impressions



Customer service line dedicated to you

## LiveHealth Online



Talk to doctors from your computer or smartphone

## SilverSneakers



Participate in fitness classes designed for seniors

## International coverage



ER and urgent care coverage when traveling

## 24/7 NurseLine



24/7 access to nurses to answer any health questions

## Extra benefits



- > Preventive services
- > Access to urgent care



**Network of quality  
doctors and hospitals,  
so you can feel confident  
you will have continued  
access to trusted  
providers**







## Your PPO plan includes access to two types of providers: *in-network* and *out-of-network* providers

### In-network providers

- ✓ Providers who participate in our network

### Out-of-network providers

- ✓ Providers who do *not* participate in our network

- 
- ✓ Members can continue to see current doctor, and doctor will continue to file claims
  - ✓ Members have freedom to see any provider that accepts Medicare and the plan
  - ✓ No referrals needed
  - ✓ Freedom to choose either in- or out-of-network providers (cost shares are the same)
  - ✓ Limits disruption to members

**Note:** This plan can only pay providers who accept Medicare. Members should check with their provider to see if they accept Medicare. The plan cannot pay a claim if the provider is not a Medicare provider.



# Your HMO plan includes access to in-network providers

## In-network providers

- ✓ Providers who participate in our network and accept Anthem's payment and member's cost share amount as payment in full.

## Out-of-network providers

- ✓ Not covered by your plan. You would be responsible for payment in full, except in emergencies. Emergency and urgent care are covered from out-of-network providers if an in-network provider is not available or accessible.

## Seeing your doctor for your HMO plan



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> You must choose a primary care doctor.



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> Choose a primary care doctor by using the provider directory or checking our website; many local doctors participate in this plan.



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> See your primary care doctor first for most of your routine healthcare. If you need to see a specialist, your primary care doctor will assist in referring you to a specialist in your plan's network.

# 3 ways Anthem makes it easier to find a doctor

Multiple ways to find doctors in your provider network



## [anthem.com](https://www.anthem.com)

Visit “Find Care” at **anthem.com** to find a Medicare Advantage PPO or HMO provider



## Customer Service

Call our toll-free Customer Service number on your membership card



## Call 800-810-BLUE

Call 800-810-BLUE to ask for help finding your doctor

## Will I need a preapproval or a referral for the PPO plan?

- Some services will need preapprovals; in-network providers will obtain the approval from the plan for the member. Services that require a preapproval are marked with an asterisk(\*) in your benefits chart in the *Evidence of Coverage* document.
- We also encourage out-of-network providers to seek approval from the plan for the member.
- No referrals needed.



## Will I need a preapproval or a referral for the HMO plan?

- Some services will need a preapproval; in-network providers will obtain the approval from the plan for the member. Services that require a preapproval are marked with an asterisk(\*) in your benefits chart in the *Evidence of Coverage* document.
- In addition to a preapproval, some services will require a referral from your primary care doctor. These services are noted in the member's benefit chart.





# Anthem Blue Cross Custom PPO medical benefits summary with Senior Rx Plus

Summary of benefits		
Covered services	In network	Out of network
<b>Deductible</b>	\$0	\$0
<b>Physician services, including doctor's office visits (Medicare-covered services):</b>		
• Physician visits	\$20 copay	\$20 copay
• Specialist visits	\$20 copay	\$20 copay
<b>Inpatient hospital care</b> Hospital days are unlimited. Covered services include, but are not limited to, a semiprivate room (or a private room if medically necessary).	\$100 copay per admission	\$0 copay per admission
<b>Emergency outpatient care</b> (waived if admitted within 72 hours)	\$50 copay	\$50 copay
<b>Preventive care and screenings</b>	Covered by plan at 100%	Covered by plan at 100%
• Bone mass measurement	\$0 copay	\$0 copay
• Colorectal screening	\$0 copay	\$0 copay
• Cardiovascular screening	\$0 copay	\$0 copay
• Diabetes screening	\$0 copay	\$0 copay
• Mammogram screening	\$0 copay	\$0 copay
• Prostate screening	\$0 copay	\$0 copay
• Physical exam	\$0 copay	\$0 copay
• Annual wellness visit	\$0 copay	\$0 copay
<b>Out-of-pocket maximum (Combined in and out of network)</b>	\$3,250	\$3,250

# Anthem Blue Cross Custom PPO Hearing/Vision medical benefits summary with Senior Rx Plus

Summary of rates		
Covered services	In network	Out of network
<p><b>Routine hearing services:</b></p> <ul style="list-style-type: none"> <li>Routine exams <i>Maximum benefit \$70 per calendar year</i></li> </ul> <p><b>Vision care:</b></p> <ul style="list-style-type: none"> <li>Routine exams <i>Maximum benefit \$70 per calendar year</i></li> <li><i>Eyewear</i> <i>Maximum benefit \$150 every two calendar years</i></li> </ul>	<p>\$0 copay</p> <p>\$0 copay</p>	<p>\$0 copay</p> <p>\$0 copay</p>



# Anthem Blue Cross Standard PPO medical benefits summary with Senior Rx Plus

Summary of benefits		
Covered services	In network	Out of network
<b>Deductible</b>	\$300	\$300
<b>Physician services, including doctor's office visits (Medicare-covered services):</b>		
• Physician visits	\$25 copay	30% copay
• Specialist visits	\$40 copay	30% copay
<b>Inpatient hospital care</b> Hospital days are unlimited. Covered services include, but are not limited to, a semiprivate room (or a private room if medically necessary).	\$200 copay per day for day 1-5	30% per admission
<b>Emergency outpatient care</b> (waived if admitted within 72 hours)	\$65 copay	\$65 copay
<b>Preventive care and screenings</b>	Covered by plan at 100%	Covered by plan at 100%
• Bone mass measurement	\$0 copay	\$0 copay
• Colorectal screening	\$0 copay	\$0 copay
• Cardiovascular screening	\$0 copay	\$0 copay
• Diabetes screening	\$0 copay	\$0 copay
• Mammogram screening	\$0 copay	\$0 copay
• Prostate screening	\$0 copay	\$0 copay
• Physical exam	\$0 copay	\$0 copay
• Annual wellness visit	\$0 copay	\$0 copay
<b>Out-of-pocket maximum (Combined in and out of network)</b>	\$3,400	\$3,400

# Anthem Blue Cross Standard PPO

## Hearing/Vision medical benefits summary with Senior Rx Plus

Summary of rates		
Covered services	In network	Out of network
<p><b>Routine hearing services:</b></p> <ul style="list-style-type: none"> <li>Routine exams <i>Maximum benefit \$70 per calendar year</i></li> </ul> <p><b>Vision care:</b></p> <ul style="list-style-type: none"> <li>Routine exams <i>Maximum benefit \$70 per calendar year</i></li> <li><i>Eyewear</i> <i>Maximum benefit \$100 every two calendar years</i></li> </ul>	<p>\$0 copay</p> <p>\$25 copay</p>	<p>\$0 copay</p> <p>30% copay</p>

# Anthem Blue Cross Senior Secure HMO medical benefits summary with Senior Rx Plus

Summary of benefits	
Covered services	In network
<b>Deductible</b>	\$0
<b>Physician services, including doctor's office visits (Medicare-covered services):</b>	
• Physician visits	\$20 copay
• Specialist visits	\$20 copay
<b>Inpatient hospital care</b> Hospital days are unlimited. Covered services include, but are not limited to, a semiprivate room (or a private room if medically necessary).	\$100 copay per admit, \$300 inpatient maximum out-of-pocket per year
<b>Emergency outpatient care</b> (waived if admitted within 72 hours)	\$50 copay
<b>Preventive care and screenings</b>	Covered by plan at 100%
• Bone mass measurement	\$0 copay
• Colorectal screening	\$0 copay
• Cardiovascular screening	\$0 copay
• Diabetes screening	\$0 copay
• Mammogram screening	\$0 copay
• Prostate screening	\$0 copay
• Physical exam	\$0 copay
• Annual wellness visit	\$0 copay
<b>Out-of-pocket maximum</b>	\$3,000

# Anthem Blue Cross Senior Secure HMO Hearing/Vision medical benefits summary with Senior Rx Plus

Summary of rates	
Covered services	In network
<b>Routine hearing services:</b> <ul style="list-style-type: none"><li>• Routine exams</li></ul>	\$20 copay
<b>Vision care:</b> <ul style="list-style-type: none"><li>• Routine exams</li><li>• Blue View Vision/eyewear</li></ul> <i>Maximum benefit \$100 per 24 months</i>	\$20 copay

# Anthem Blue Cross Custom PPO/Senior Secure HMO

## Summary of your cost for covered drugs

Summary of rates		
Retail services (30 day supply)	Preferred pharmacy	Standard pharmacy
Preferred generics	\$0 copay	\$0 copay
Select generics	\$5 copay	\$10 copay
Generics	\$25 copay	\$30 copay
Preferred brands	\$45 copay	\$50 copay
Nonpreferred drugs including specialty drugs		
Mail-order services (90 day supply)	Mail pharmacy	
Select generics	\$0 copay	
Generics	\$20 copay	
Preferred brands	\$60 copay	
Nonpreferred drugs including specialty drugs	\$100 copay	

# Anthem Blue Cross Standard PPO

## Summary of your cost for covered drugs

Summary of rates		
Retail services (30 day supply)	Preferred pharmacy	Standard pharmacy
Deductible	\$200	\$200
Preferred generics		\$0 copay
Select generics (deductible waived)	\$0 copay	
Generics	\$10 copay	\$15 copay
Preferred brands	\$40 copay	\$45 copay
Nonpreferred drugs including specialty drugs	\$40 copay	\$45 copay
<hr/>		
Select generics (deductible waived)	\$0 copay	
Generics	\$30 copay	
Preferred brands	\$90 copay	
Nonpreferred drugs	\$90 copay	
Specialty drugs	\$45 copay	

# Your drug plan includes select generic benefits



Select generic drugs are offered at no or low cost to you  
These are specific drugs with a proven track record of effectiveness and value.

## Select generic examples

Category	Drugs	
Cardiovascular	Atenolol tablet Benazepril hcl tablet Bisoprolol-hydrochlorothiazide tablet Carvedilol tablet Chlorthalidone tablet Enalapril maleate tablet	Furosemide tablet Hydrochlorothiazide capsule/tablet Lisinopril tablet Losartan potassium tablet Metoprolol tartrate tablet Ramipril tablet
Cholesterol	Atorvastatin tablet  Lovastatin tablet	Pravastatin sodium tablet  Simvastatin tablet
Diabetes	Glimepiride tablet	Metformin tablet

These are examples of some of the drug categories and drugs covered under your select generics benefit. Please see your drug list for a full list of select generics. Not all generic drugs within a drug category are included in your <\$X> copay select generics benefit. Note: If your plan has a deductible, the deductible is waived on select generics. 167

# Our network of preferred pharmacies can help keep your prescription drug costs lower

Access over 28,000 preferred pharmacies nationwide



- > There are many independent pharmacies.
- > Not all pharmacy chains listed above are located in every state.
- > The list of preferred pharmacies may change each January.

## Standard network pharmacies

Our broader Part D network includes access to over 65,000 pharmacies. Your drugs will be covered, but the cost may be higher than if you went to a preferred pharmacy. For higher savings, preferred pharmacies are your best option.





# How to use a mail-order pharmacy

Often costs are lower when using a mail-order pharmacy

## Step 1

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+ You will receive a patient order form in your post-enrollment materials. You also may contact Customer Service to receive an order form.

## Step 2

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+ Complete the form, including your prescription information.

## Step 3

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+ Return the form and prescriptions to the address listed on the form.

## Step 4

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+ Once you are registered, you may order medications online at [anthem.com](https://www.anthem.com) or by calling the Customer Service toll-free number.

# First Impressions welcome team

As you transition to your plan, our team can help you feel more confident

**Call 1-833-848-8729**  
**Monday to Friday**  
**5 a.m. to 6 p.m. PT**



## **Preenrollment support**

- Interactive voice response (IVR)–free experience
- Senior sensitivity certified
- Support comparing existing and potential new plan



## **Enrollment support**

- Single point of contact for implementation-related questions
- Help answering retiree-specific questions about network and benefits



## **Guidance and medical continuity**

- Trained to address questions about prescriptions and network
- Available to assist members with questions about their doctors and coverage under our plan





## Helping members stay healthy

Retirees have access to a broad spectrum of programs and services to help them manage a health issue or stay as healthy as possible. Examples include:

- › No-cost flu and pneumonia vaccines
- › Annual routine physical] [Annual wellness visit] and hearing exams
- › Discounts on vitamins and weight-loss programs
- › SilverSneakers fitness program
- › Doctors and therapists available anytime, anywhere with LiveHealth Online

## Medicare home lab kit

We are offering no-cost home test kits to eligible members who are overdue for one or more preventive screenings, as a way to complete the screening in the comfort and privacy of your own home.

You may receive multiple kits, such as:

- FIT (fecal immunochemical test), a colon cancer screening test.
- Microalbumin (urine) test kit, for monitoring your kidney health.
- A1C (blood) test kit, to measure your average blood sugar over the past two to three months.

Simply take the tests and return in the postage-paid envelope. Lab test results will be mailed to each member within two to three weeks. A copy can also be mailed to your primary care doctor.





# House Call program

The House Call program offers a personalized visit, in your home, that can lead to a care plan tailored for you.\*

The House Call program is available at no additional cost for members.

During the visit, the clinician will:

- Chat about any health questions and concerns.
- Give basic health screenings.
- Take notes on the health discussion and record assessment results.
- Share the assessment results with you and your personal doctors.

\* House Call program is administered by an independent vendor. It is available to members who qualify.





# Supplemental benefits

## Additional services beyond Original Medicare

Your retirees have access to programs and tools that can further support their health goals. Our supplemental programs include:



**SilverSneakers®** is a program designed exclusively for retirees and offers physical activity, health education, and social events, including access to fitness equipment and group exercise classes at more than 16,000 SilverSneakers® locations across the nation. Retirees can access live online fitness activities and on-demand online workout videos from home.



**Medicare Community Resource Support** helps identify needs, leverage resources, and coordinate services for members by providing specific medical or health-related information/education. The program leverages community-based services and support programs locally available to the member.



**Community Care Coordination** assists members with high inpatient utilization or known gaps in social determinants of health. Members are paired with a community health worker, who will help them maximize their health benefits by identifying gaps in care, scheduling follow-up appointments, and helping the member adhere to discharge instructions.



**24/7 NurseLine** allows members to ask registered nurses a variety of questions, including how to choose the right level of care. Choosing the most appropriate treatment option for each unique situation can mean cost savings for you.

# Supplemental benefits



**Healthy Meals** is a program that provides nutritious meals to members upon discharge of an inpatient stay, or in support of improving the health of members with a body mass index (BMI) of 25 or more, 18.5 or less, or an A1C level greater than nine.



**Healthy Pantry** helps eligible members with chronic illnesses manage their health conditions by providing nutritional guidance. Eligible members will receive monthly nutritional counseling sessions via phone and a monthly home delivery of healthy nonperishable pantry items. The nutritional consultations, combined with the monthly pantry items, help members try recommended dietary changes and build the basics for a healthy pantry.



**LiveHealth Online** gives members the ability to engage with their choice of board-certified medical and behavioral physicians through two-way live video from anywhere, using their smartphone, tablet, or computer with a camera. Doctors are available 24/7, usually with less than a 10-minute wait to help with common illnesses, such as colds, allergies, or flu. [livehealthonline.com](https://www.livehealthonline.com).

# Healthy Meals

Our Healthy Meals program delivers nutritionally balanced meals to the homes of eligible members — at no cost.

This benefit is available to a member if they have been discharged from the hospital or if they meet one or more of the following conditions:

- A1C > 9 (diabetic)
- BMI ≥ 25 (overweight) or BMI ≤ 18.5 (underweight)

The amount of meals covered will vary depending on the plan. Prior approval based on the conditions is required.





## Healthy Pantry

Our Healthy Pantry benefit helps eligible members with chronic illnesses manage their health conditions by providing nutritional guidance — at no cost to the member.

Eligible members receive monthly:

- Nutritional counseling sessions via phone.
- Home delivery of healthy nonperishable pantry items.

The nutritional consultations, combined with the monthly pantry items help members try recommended dietary changes and build the basics for a healthy pantry.



# Personalized care management

## Clinical concept

- › Treat the member, not the disease
- › Outcomes-based, 100% engagement solution

## Team model

- › Analytics-driven, personalized clinical connection

## Member facing

- › Joint goal setting and partnership to completion

## Monitoring

- › Member experience and outcomes



## Innovation for members

Living in a digital age gives us new tools to help people feel closer to their healthcare.

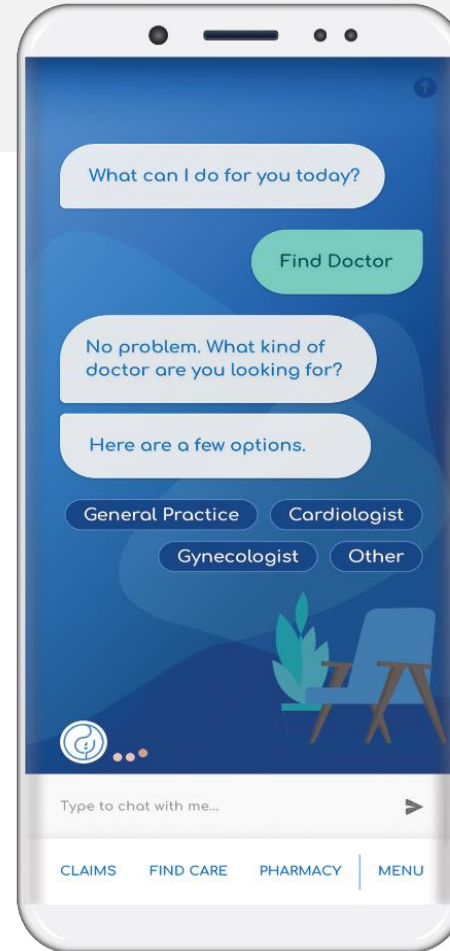


# Sydney Health app

A partner in health in the palm of your hand

The Sydney Health<sup>SM</sup> app centers around the member. With all of their information in one convenient place, they are better able to make the most of their benefits and stay connected to their health plan anytime, anywhere.

- › Tools to help find care, view costs, online appointment scheduling, and one-click access to LiveHealth Online and **anthem.com**.
- › A personalized dashboard based on identified health topics and wellness goals.
- › Timely, insight-driven push messages based on the employee's health profile using clinical and claims data.
- › Medical record information available anytime, which can be shared with anyone (family, caregivers).





## Enrollment Information

- Make your Open Enrollment election through **My OC Benefits™** or over the phone with a Benefits Service Center representative.
- Anthem Blue Cross and CMS will process your application.
- County of Orange Benefits Service Center will notify you if your application has been denied, you will receive an updated Confirmation of Benefits.
- If you are not approved, you will be enrolled into the Wellwise Retiree PPO health plan effective 1/1/2022 (unless you are in the Sharewell Retiree PPO health plan, then you would remain there).
  - County of Orange Benefits Service Center will notify you if your application has been denied, you will receive an updated Confirmation of Benefits.



# Orange County 2022 Open Enrollment

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SCAN Health Plan confidential :

# Table of Contents

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- Introduction of SCAN Health Plan
- Service Area
- Medical Benefit Highlights
- Benefits beyond Original Medicare
- Who is eligible to enroll with SCAN
- SCAN Contact Information

# The SCAN Brand: Quality, Service and Expertise

## QUALITY



### 4.5 Stars

Quality care & service  
*Four years in a row!*



### 90% Satisfaction

*(Medicare & You, 2020)*  
*Three years in a row!*

## SERVICE



### Award-winning Service

2021 Stevies for  
Customer Service



### Great Place To Work

93% of employees  
are proud to tell  
others they work  
here!

## EXPERTISE



**3rd Largest in U.S.**  
Not-for-profit MAPD



**"Best" MAPD in CA**  
*Three years in a row!*



# Medicare Advantage Prescription Drug Plan

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- Contract with private doctors, medical groups and hospitals
- Part D (prescription coverage) is included at no additional cost
- Urgent and Emergency care, including hospitalization, is covered worldwide
- Benefits beyond Original Medicare
- SCAN Health Plan is an HMO

## Service Area - Growing Footprint in 2022

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### Counties:

- Los Angeles
- Orange
- Riverside
- San Bernardino
- San Diego
- Ventura
- Santa Clara
- San Francisco
- Napa
- Sonoma
- Stanislaus
- *New - Alameda*
- *New - San Mateo*

In 2022, SCAN will serve Medicare beneficiaries in more counties than ever:

- **6 counties** in Southern California
- **7 counties** in Northern California
  - Including **2 NEW**

# Medical Benefit Highlights

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- Primary Care Physician/Specialist \$15 copay
- Hospital Admission \$100 copay per admission
- Emergency \$50 copay
- Urgent Care \$15 copay

## Prescription Drugs

- Generic \$10 copay
- Brand \$20 copay

100 days supply is available at retail pharmacies or mail order (ESI), 50% discount on many generic drugs when using our preferred pharmacy network.

And More... for a complete list of benefits review the SCAN County of Orange Summary of Benefits book.

# Benefits Beyond Original Medicare

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*Services and programs that help members lead healthier, more independent lives.*



## VISION

SCAN offers a routine vision care, this benefit includes an eye exam \$15 copay every 12 months; frame allowance \$100 or \$130 contacts, coverage for eyewear every 24 months. EyeMed is our service provider 1-800-226-2850 or go to [www.eyemedvisioncare.com/locator](http://www.eyemedvisioncare.com/locator).



## HEARING

\$15 copay for exam; \$600 allowance for one hearing aid or two every two years.

TruHearing is our service provider.

1-844-255-7148 or go to: [www.truhearing.co](http://www.truhearing.co)



## TRANSPORTATION

This benefit provides unlimited transportation to medical appointments, pharmacies and dentists. A taxi, wheelchair van and other modes to meet members' physical needs are also available.

\$0 copay (75-miles maximum per ride)

To schedule a ride 1-844-714-2218



## CHIROPRACTIC

\$15 copay with 20 self-referred visits

Access to routine chiropractic services• Large network of providers• Call a participating provider to schedule an initial examination.

American Specialty Health (ASH) is our service provider. 1-800-678-9133 or go to [www.ashlink.com/ash/SCAN](http://www.ashlink.com/ash/SCAN)



## SCAN TRAVEL ASSURANCE

SCAN coverage travels with members even when out of the country. Travel Assurance provides worldwide emergency and urgent care, and helps facilitate claims reimbursement.



# Independent Living Power Services®

Benefits beyond Original Medicare



# Independent Living Power (ILP) Services

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- *\$650 Monthly Allowance*
- Personal Care Coordination \$0
- Homemaking \$15 per visit
- Personal Care \$15 per visit
- Home-Delivered Meals \$0
- Adult Day Care \$15 per visit
- *Emergency Response System* \$0 per month
- Caregiver Relief \$15 per visit
- Inpatient Custodial Care \$0 up to 5 days
- Inpatient Respite \$0 up to 5 days
- *Bathroom Durable Medical Equipment* \$0
- Community Resources \$0

Note:

ILP services available only in the following Counties: Los Angeles, Orange, Riverside, San Bernardino and San Diego Counties.)

# Solutions For Virtual Care Access

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*Benefits that enable our members to receive timely access to health care services and supports.*



## **SCAN HEALTH***tech*

SCAN's technology support line helps members use a computer, tablet or smartphone to access healthcare—and health-related information. A few areas where **HEALTH***tech* can help include:

Skype/Zoom/FaceTime training for doctor visits, telehealth visit overview, setup on personal equipment (phone, tablet, or computer), prescription delivery setup and more.



**NEW!**

## **ABRIDGE (Health Conversations App)**

Abridge - health conversations app is a smartphone app that helps members understand and follow through on their doctor's advice. Members can record health conversations, get an interactive summary and share it with caregivers.



## **MD LIVE - TELEHEALTH**

This convenient option to urgent care lets members talk to a board-certified physician from the comfort of their home 24 hours a day, 7 days a week, 365 days a year for \$0.

# Solutions For Healthy Living

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*Benefits that support a healthy and active lifestyle.*



## **SilverSneakers Fitness**

A health and fitness program that provides gym access, fitness classes and programs, on-demand workouts and other online resources.



## **BRAINHQ**

BrainHQ provides online exercises that enhance memory, brain speed and other functions to boost brain health. BrainHQ is designed specifically for older adults and is offered at no cost to SCAN members.

*Features with this benefit include:*

- Mental games that focus on attention, memory, brain speed, intelligence, navigation, and people skills exercises.
- A useful and meaningful workout tailored to a member's unique brain. Using a special method, each exercise adapts in difficulty as the member continues to use it so they are always working at an optimum level to improve performance.



# Solutions For Caregivers

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*Benefits that offer support for members who are caregiving or receiving caregiving services.*



## **CAREGIVER TRAINING**

A series of classes that provide information, skills training and support for caregivers.



## **CHRONIC CONDITION MEALS**

Helping members manage chronic health conditions includes ensuring they have proper nutrition. This benefit provides \$0 home-delivered meals.

# Solutions For Togetherness

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*Benefits that help members get connected, feel less alone and improve health.*



## **SCAN LEARNING COMMUNITIES**

SCAN Learning Communities bring like-minded people together for in-person health education classes to maintain good mental and physical health.



## **HEADSPACE**

Headspace is a mindfulness and meditation app that can help counteract the negative side effects of loneliness, stress and anxiety.

# Telehealth

## Telehealth - MDLive



When it's not an emergency, you don't have an appointment to see your primary care physician (PCP) or when you just want a convenient alternative to an urgent care center, your telehealth benefit offers care 24 hours a day, 7 days a week, 365 days a year.

- The doctor can diagnose your non-emergency symptoms and send medically necessary prescriptions to your SCAN network pharmacy
- Speak with a Board Certified medical doctor in the comfort of your own home for non-life-threatening conditions
- The visit can be conducted either by telephone or secure video capabilities from your computer or smart phone

**Request a telehealth visit today.**

**Call 1-888-993-4087  
(TTY: 1-800-770-5531),**

24 hours a day, 7 days a week.

Or go to:

**[www.mdlive.com/](http://www.mdlive.com/)  
[scanhealthplan.com](http://scanhealthplan.com)**

**MDLIVE<sup>®</sup>**



Members who are travelling outside of SCAN's service area can receive urgent care services through MinuteClinic locations in 38 states at the standard urgent care copay.

States **not available** in: Alabama, Alaska, Arkansas, California, Colorado, Delaware, Idaho, Iowa, Mississippi, Montana, North Dakota, Oregon, South Dakota, Utah, Vermont, Washington, West Virginia, Wyoming

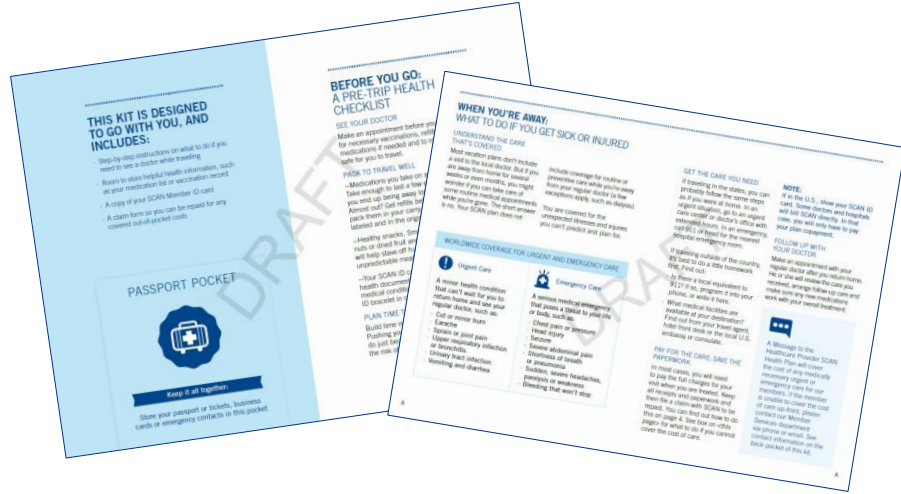
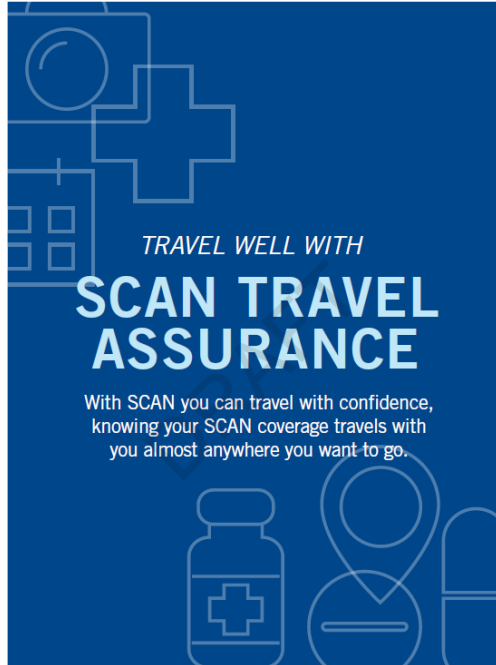


## Retirees Travel with Confidence

TRAVEL WELL WITH

# SCAN TRAVEL ASSURANCE

With SCAN you can travel with confidence, knowing your SCAN coverage travels with you almost anywhere you want to go.



# worldwide

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## COVERAGE

## Who is eligible to Enroll with SCAN?

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- Retirees:
  - Medicare Parts A and B entitlements
  - Reside in SCAN Health Plan Service Area

## Enrollment Information

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- You will make your election by My OC Benefits or through a Benefits Service Center representative.
- SCAN and CMS will process your election.
- If you are not approved, you will be enrolled into the Wellwise Retiree PPO health plan effective 1/1/2022 (unless you are in the Sharewell Retiree PPO health plan, then you would remain there).
  - County of Orange Benefits Service Center will notify you if your application has been denied, you will receive an updated Confirmation of Benefits.

# SCAN Contact Information

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- Visit our website for the following:
  - SCAN County of Orange Summary of Benefits
  - Find a doctor or prescription drugs look up
  - Service Area

[www.scanhealthplan.com/countyoforange](http://www.scanhealthplan.com/countyoforange)

- SCAN Telesales – Prospective members
  - 1-877-212-7654 from 8:00 a.m. to 8:00 p.m.

To speak to a live person and learn more about your plan call SCAN Telesales

- SCAN Member Services (for existing plan members)
  - 1-800-559-3500 from 8:00a.m. to 8:00 p.m.

October 1 to March 31: 8 a.m. to 8 p.m., 7 days a week

April 1 to September 30: 8 a.m. to 8 p.m., Monday through Friday

(For both Telesales and Member Services)

# Thank you... It's a pleasure to serve you!

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As you consider different Medicare options, we invite you to take a closer look at SCAN, a Medicare Advantage Prescription Drug Plan focused on our Mission to

**Keep retirees Healthy and Independent**







## What Else You Should Know

# Open Enrollment Reminders



My OC Benefits™

- Enroll by **November 9, 2021**
- Correction period: Changes can be made between **November 10 through November 19, 2021**
- Submit dependent documentation by the deadline outlined on your Dependent Verification Solicitation notice
  - Without required documentation, dependent(s) not covered in 2022
- If your newly added dependent is Medicare eligible, be sure to submit copy of Medicare card and required Medicare documentation **60 days** from the date you made your election
- If you are eligible for Medicare Pt B Reimbursement, provide required documentation by **December 31, 2021**
- Contact the Benefits Service Center, and OCERS to report address/email updates



- Retiree Medical Plan One Page Benefits Summaries
- 2022 Rates
- Quick Reference Guide
- What to Know Guide for Retirees
- Intent to Retire Summary
- Attaining Medicare Summary
- Dependent Eligibility Definitions and Required Documents
- County Couples Flyer

# Health Plan ID Cards



My OC Benefits™

- If you choose a new health plan for 2022, or retirees who are currently enrolled in Wellwise or Sharewell PPO will automatically receive new ID cards as part of a required update
- If you don't receive card, contact health plan
- Contact Benefits Service Center if you need an immediate verification of coverage



# Benefits Service Center: Your Source for Open Enrollment



My OC Benefits™

- Visit **My OC Benefits™**: [mybenefits.ocgov.com](https://mybenefits.ocgov.com)
  - Ask Lisa
  - Start a Web Chat
  - Set a scheduled appointment to discuss your questions
- **Benefits Service Center:**
  - Call **1-833-476-2347**, 8 a.m. to 6 p.m. Monday through Friday PT, except holidays
    - Take advantage of extend hours up to 8 p.m.
  - Long hold time – arrange a call back convenient for you

# Benefits Service Center: Your Source for Open Enrollment



My OC Benefits™

## Medicare documentation and Pt B Reimbursement documentation:

Fax and mailing address:

County of Orange Benefits Service Center

P.O. Box 661162

Dallas, TX 75266-1162

Fax: 1-224-607-3465

# Employee Benefits Website



My OC Benefits™

Visit [hrs.ocgov.com/employee-benefits](https://hrs.ocgov.com/employee-benefits) for:

- What to Know Guide
- Retiree Medical Plan One Page Benefits Summaries
- 2022 Retiree Rates
- Retiree Medical Plan Document
- Health Plan Contact Information

# Other Contact Information



My OC Benefits™

Benefit	Provider	Online	By Phone
Benefits Service Center	Alight	<b>My OC Benefits™ @</b> <a href="http://mybenefits.ocgov.com">mybenefits.ocgov.com</a>	<b>1-833-476-2347</b> <b>FAX: 1-224-607-3465</b>
Dependent Verification Center	Alight	Dependent Verification Center PO Box 7114 Rantoul IL 61866-7114	<b>1-833-476-2347</b> <b><a href="http://mybenefits.ocoov.com">mybenefits.ocoov.com</a></b> <b>Fax: 1-877-965-9555</b>
Wellwise & Sharewell Retiree Plans Medical Claims Administrator	Blue Shield of California	<a href="http://www.blueshieldca.com/oc">www.blueshieldca.com/oc</a>	<b>1-888-235-1767</b>
Wellwise & Sharewell Retiree Plans Prescription Drug Program	OptumRx	<b>Current Members:</b> <a href="http://www.optumrx.com">www.optumrx.com</a> <b>Prospective Members:</b> <a href="https://www.optumrx.com/oe_countyo_forange/landing">https://www.optumrx.com/oe_countyo_forange/landing</a>	<b>Current Members:</b> 1-800-573-3583 <b>Prospective Members:</b> 1-844-880-0759
Kaiser Traditional HMO	Kaiser	<a href="http://www.kp.org/ca/oc">www.kp.org/ca/oc</a>	<b>1-800-464-4000</b>
Kaiser Senior Advantage HMO	Kaiser	<a href="http://www.kp.org/ca/oc">www.kp.org/ca/oc</a>	<b>1-800-443-0815</b>



# Other Contact Information



My OC Benefits™

Benefit	Provider	Online	By Phone
Anthem Blue Cross Traditional & Select HMOs	Anthem Blue Cross	<a href="http://www.anthem.com/ca/countyoforange">www.anthem.com/ca/countyoforange</a>	Current Members: <b>1-877-826-1831</b>  Prospective Members: <b>1-888-831-2238</b>
Anthem Blue Cross Custom & Standard PPOs	Anthem Blue Cross	<a href="http://www.anthem.com/ca/countyoforange">www.anthem.com/ca/countyoforange</a>	Current Members: <b>1-877-411-1640</b>  Prospective Members: <b>1-877-411-1647</b>
Anthem Blue Cross Senior Secure HMO	Anthem Blue Cross	<a href="http://www.anthem.com/ca/countyoforange">www.anthem.com/ca/countyoforange</a>	Current Members: <b>1-877-411-1640</b>  Prospective Members: <b>1-877-826-1831</b>
SCAN HMO	SCAN Health Plan	<a href="http://www.scanhealthplan.com/countyoforange">www.scanhealthplan.com/countyoforange</a>	<b>1-877-212-7654</b>

Thank you



MyOC Benefits™