



County of Orange

Human Resource Services – Employee Benefits

January 27, 2017

Dear County of Orange Retiree:

On January 1st the County of Orange changed our Benefits Center Administrator to Secova as a result of the County's standard contracting process. This was an across-the-board change requiring complete reprogramming by Secova. Although the County planned in advance for a complex implementation, a variety of unexpected problems occurred and the transition has not gone as smoothly and successfully as the County anticipated. Although most retirees experienced no issues at all, many of you have been significantly affected. For that we extend our sincerest apologies. We want to assure you that we are working diligently and meeting with Secova on a daily basis to identify and correct the deficiencies and resolve individual retiree issues.

The Employee Benefits program management and customer service teams have been working directly with retirees to correct retiree reported issues as quickly as possible and we are working with Secova to fix any remaining problems. To facilitate corrective action, Employee Benefits, not Secova, will process new retiree benefit elections and those of retirees who become newly eligible for Medicare directly through a paper form process. **Retirees who have current coverage and need to make dependent changes or corrections to current coverage should continue to work through the Benefits Center.**

If you have not received a response on your issue or you have a new issue to report – We need your help! A large volume of issues were reported in recent weeks and there may still be existing or newly identified issues that require immediate attention. If you have already reported an issue to the County or the Benefits Center and are receiving updates on the progress, we thank you for your patience. Nothing is required at this time and your issue should be resolved very soon.

If you have already reported an issue and have not been contacted by anyone or you were told the issue was resolved but are still experiencing problems, or if you identify a new issue in the weeks ahead, we encourage you to contact the County of Orange HRS/Employee Benefits directly by calling our message line at (714) 834-6282. Although this is a message line, capacity has been increased and dedicated staff are retrieving these messages throughout the day and routing them to the appropriate County program manager. If you leave a message, you will receive a call within one business day.

Medicare Verification is *not* required for retirees who provided it prior to or during 2016

If you provided copies of your Medicare card to the prior administrator during 2016 or in prior years, that information has been sent to the new Benefits Center and you are not required to do it again. You are only required to return the Medicare Verification Form and proof of Medicare if 1) you are a new retiree 2) you or your spouse recently turned age 65 3) you added a spouse as dependent who is over age 65 during Open Enrollment.

What to do if you are having immediate access to coverage or prescription issues after hours or while your issue is being resolved?

Once your issue has been escalated to the County and/or the Secova Benefits Center, work will begin to resolve it as quickly as possible. However, if you need to fill a prescription or seek medical services immediately and your provider is not able to verify your coverage you have options.

Kaiser:

Kaiser has a "Believe Me" policy which allows for members to obtain the services they need from their effective date onwards even if coverage cannot be verified or the enrollment has not yet entered the Kaiser system. Any co-payments or charges would be billed according to plan. Mention this policy and ask to continue with scheduling your appointment.

Other Plans:

Medical Providers: Rather than turn you away, your medical provider will most likely provide the necessary treatment, however you may be required to sign a financial responsibility form that protects the provider and allows them to bill you in the event you did not actually have coverage in place at the time of services. Coverage verification can usually be resolved during the next several business days prior to any billing.

Pharmacies: Many pharmacies will provide you with a one or two day supply of your medication to allow your treatment to proceed until the next business day when health plan member services and the Benefits Center can resolve any coverage issues so your prescription may be filled in its entirety. You may be required to pay for the one or two day supply however you may contact your health plan member services department directly about filing a claim for reimbursement for any cost above your prescription copayment.

Who to call if you need to make changes or have an issue to be resolved?

Benefits Center (Secova) 1-800-858-7266 – 1) to make changes to current coverage 2) report a new issue with your coverage.

County of Orange Message Line (714) 834-6282 – 1) to report urgent issues for the first time 2) notify the County of urgent issues previously reported that are still not resolved or 3) if you already reported an issue to the Benefits Center but never received a call back and 4) if you are a new retiree or recently turned age 65 and did not make your elections before December 31, 2016.

Be assured we are working diligently to resolve any and all issues. We sincerely thank you for your patience.

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Cc: Orange County Employee Retirement System (OCERS)
Retired Employees Association of Orange County (REAOC)