Yours to Choose – New Medical Insurance Plans: Q’s & A’s

The District has recently made some changes to the way they purchase medical insurance, with some very positive results. Read the Q’s & A’s that follow to find out about these changes, how enrollment in the medical plans will be implemented during the Open Enrollment period to be held during the month of October, and what your responsibility is for enrolling in the plan of your choice.

There will be several forums held on both campuses during the week of October 1 – 5, at which time you will be able to find out additional information about the two plans, and pick up informational packets and enrollment forms. AFA encourages you to attend one of the presentations by Blue Shield and Kaiser representatives on Friday, October 5, and/or one of the “Here’s to Your Health” Conviviality Week events hosted by AFA from 5:00 – 7:00 p.m. on October 1 through 4 (see boxes below for more details).

Why join a Joint Powers Authority (JPA) group to purchase medical insurance?
A JPA is an organization of public entities that join together to maximize their purchasing power through strength of numbers. This is particularly important in medical insurance because having a bigger group also spreads the risk out over a larger population base and effectively diminishes the risk for any single group participant. SRJC has now joined a JPA called SISC.

What is SISC?
SISC, Self-Insured Schools of California (www.kern.org/sisc), is a Joint Powers Authority (JPA) administered by the West Kern County Office of Education. SISC administers health benefits for over 344 school districts, approximately one third of all school districts in California. Because they provide insurance for over 220,000 lives, the pooled risk is much more beneficial to SRJC than purchasing insurance on our own as we have in the past.

What medical plans will be offered to faculty at SRJC?
Beginning January 1, 2008, SRJC will offer two plans: the existing Kaiser HMO Plan and a new Blue Shield PPO Plan 100A30. Coverage under the Health Net Plan 28Q will end December 31, 2007. The Blue Shield plan is not the same as the existing Health Net plan. Some of the major differences are outlined on the reverse side of this Update.

When does the SISC coverage begin?
For existing employees, coverage will begin on January 1, 2008. New employees are eligible for coverage the first of the month following their date of hire. They will have 30 days from their date of hire to enroll in either of the two plans.

(continued on the reverse)
Medical Plan Q’s & A’s (cont. from page 1)

Does SISC offer other kinds of benefits?
Yes, but at this time, SRJC is only participating in the medical benefits program.

Will SRJC’s change to SISC require me to complete any additional paperwork, beyond the enrollment forms, to continue coverage for my domestic partner under the plan?
No, SISC will grandfather in all existing employees’ domestic partners and their eligible dependents who currently have coverage under the existing plans. Any employee wishing to newly enroll a domestic partner needs the partnership to be registered with the State of California before medical coverage can be obtained through SISC.

MAKING THE CHOICE: Kaiser or Blue Shield – Health Net is NOT an option

What do I need to do to select the Kaiser Plan?
If you are currently enrolled in the Kaiser HMO Plan, you do not need to do anything. Your coverage under that Kaiser plan will automatically continue. If you are currently covered under Health Net and want to switch to Kaiser, you will need to complete the Kaiser Group Enrollment Form during the open enrollment period, October 1 through October 31, 2007, and return it to the Human Resources Department by Wednesday, October 31, 2007.

What do I need to do to select the Blue Shield PPO Plan?
Everyone who wishes to select the Blue Shield Plan must complete the SISC Enrollment Form during the open enrollment period, October 1 through October 31, 2007, and return it to the Human Resources Department by Wednesday, October 31, 2007. Note: Coverage under the Health Net Plan will end December 31, 2007.

Where can I find the enrollment forms?
Informational packets and enrollment forms will be available at the October 5 presentations and the AFA Conviviality Week events on October 1 – 4 (see the boxes on the front of this Update for more details). If you are unable to attend any of these events, you can pick up the materials at the Human Resources Department. Completed enrollment forms must be returned to the Human Resources Department by Wednesday, October 31, 2007.

Early Retirement Option (ERO) Faculty:
Faculty who are enjoying ERO benefit coverage must also make a choice following the guidelines identified above.

THE BLUE SHIELD PLAN

What’s different about the Blue Shield plan compared to the Health Net plan?

Self-referral to a specialist: You may self-refer to any specialist on the Blue Shield provider list. Your physician is no longer a gate-keeper under this plan.

Portability: This plan may be used outside Sonoma County and outside of California anywhere in the U.S. In addition, coverage outside of the U.S. is provided through the Blue Cross/Blue Shield “Blue Card Worldwide Program.”

Co-payments: For seeing a preferred provider within the Blue Shield network, office visits require a $30 co-payment. For seeing a provider who is not part of the Blue Shield network, office visits require a 50% co-payment. Co-payments for in-patient and out-patient hospitalization services vary. For example, there is no co-payment for non-emergency inpatient or outpatient services performed at a facility within the Blue Shield network of preferred providers. There is a range of co-payments for those services performed at a facility outside of the Blue Shield network of preferred providers.

Prescription Drugs: For a 30-day supply, prescription drug co-payments are $7.00 for generic drugs and $25.00 for preferred brand name drugs; however, if you order by mail, you will receive a 90-day supply for $14.00 for generics and $60.00 for preferred brands. In addition, many generic medications are available for free ($0 co-payment) by presenting the prescription and your insurance card to a Costco pharmacy. (Note: you do not have to be a member of Costco to use their prescription pharmacy services.)

If I choose Blue Shield, will I be able to keep my Health Net doctor(s)?
Blue Shield’s PPO network of providers is much larger in Sonoma County than the Health Net network of providers. Blue Shield Provider Directories will be available at the October 5 presentation. Or, you can consult the most recent list of providers at www.blueshieldca.com (click on the Find a Provider Tab, sign in as a Guest, click on Blue Shield PPO and continue at the bottom of the screen, then click on Physicians & Medical Groups.)

Is there a benefit for Psychiatric and Substance Abuse problems?
Yes. This program is administered by PacifiCare POS, but you must call 1-800-999-9585 for a referral prior to receiving services in order to be covered under the SISC Plan.

Where can I find more details about the SISC Blue Shield PPO Plan 100A30?
Come to one of the October 5 presentations or one of the AFA Conviviality Week events on October 1 – 4 (see the boxes on the front of this Update for more details). For general information, you can log onto the Blue Shield Web site at: www.blueshieldca.com.

THE KAISER PLAN

If I remain in or switch to Kaiser, will the plan change from the one that is currently offered?
The Kaiser HMO Plan remains the same, except that the $500 co-payment for inpatient hospitalization has been eliminated.

Where can I find more details about the Kaiser HMO Plan?
Come to one of the October 5 presentations or one of the AFA Conviviality Week events on October 1 – 4 (see the boxes on the front of this Update for more details). Or, for general information, you can log onto the Kaiser Web site at: www.kaiserpermanente.org.