Common Insurance Terms

Plan Year– October 1 through September 30.

Co-Insurance - After annual deductible is met, member pays a percent of billed services until they have reached their co-insurance amount (Individual/family). For example, an 80% plan, "co-insurance" share is the remaining 20%. Once the deductible and co-insurance max are met, the plan will pay 100% of charges for the remainder of the calendar year.

Co-Pay - A fixed amount that a patient must pay out of pocket. Often associated with office and ER visits.

Deductible - The initial amount the member must pay before the plan begins to pay for covered services at the designated percentage. Deductibles renew on a calendar-year basis; January 1 through December 31.

Last-Quarter Carryover - Any amount of the deductible satisfied in the 4th quarter (Oct-Dec) will carry over and be credited toward the following year's deductible. This applies to medical and prescription deductibles. Out of pocket maximum, co-insurance and office copays do not have a last quarter carry over.

In-Network Providers - A group of doctors, hospitals, pharmacies, and other health care experts hired by a health plan to administer services to its members.

Out Of Pocket (OOP) Maximum - The maximum amount the member will pay out of pocket within a calendar year. The amount is a combination of the member's deductible , office visit co-pays and co-insurance amounts. Once this amount is met, the plan will pay 100% of all services for the remainder of the calendar year.

Eligibility – All full time employees are required to participate in health insurance options offered by the District with the District contributing a portion of the cost of the benefits as defined by employee contract.

Classified employees who work more than 66% full time and Certificated employees who work more than 50% full time are eligible for insurance plans that cover spouse and dependent(s) and include a pro-rata District contribution.

Other part-time, variable hour, temporary, and seasonal employees who work less than the minimum hours required for District contribution insurance are eligible to enroll in the SISC Two-Tiered Anchor Bronze PPO medical plan. This plan excludes coverage for dental and vision insurance. The two tiers are Employee Only and Employee plus Child(ren). Spouses and Domestic Partners are not eligible for this plan. Two-Tier plans are 100% self pay. The District does not contribute to Two-Tier plans.

SISC
SELF-INSURED SCHOOLS OF CALIFORNIA
Schools Helping Schools

Coast Unified School District is a member if Self-Insured Schools of California.
SISC was established in 1979. SISC operates as a public school Joint Powers Authority (JPA) administered by the Kern County Superintendent of Schools Office. Staff is comprised of certificated and classified public school employees.

SISC is a non-profit organization; they do not receive sales commissions.

Website: http://sisc.kern.org

Phone: (661) 636-4410
Fax: (661) 636-4893

COAST
UNIFIED SCHOOL DISTRICT

Tomorrow's Leaders—Today

CUSD Health Insurance Quick Reference Guide

CONTACT:
Carolyn Meadows
e-mail: c.meadows@coastusd.org
805-924-2925 Fax 805-927-0312

Coast Unified School District Office
1350 Main Street
Cambria , CA 93428
805-927-3880 805-927-7105

Health & Welfare Benefits Provider Contact Information

Medical

Website: www.anthem.com/ca/sisc

Member Services: 1-800-564-7475

Claims & Inquiries:
PO Box 80308
Salinas, CA 93912

24/7 MDLIVE: 1-888-632-2738
On-demand access to board-certified physicians via on-line video, phone or secure email for a $5 co-pay regardless of your plan's usual office co-pay. Available 24 hours/day, 7 days/week. including holidays. Perfect for non-urgent issue when Primary Care Physician is not available.

Employee Assistance Program:
(Counseling / Psychiatric Care)
1-800-999-7222
www.anthemeap.com; Program name: SISC

Six brief counseling sessions per incident at no cost. If additional visits are necessary, terms of plan apply (i.e. co-pay, deductible, etc.).

Health Smarts is SISC's health improvement program for members and dependents on the member's plan. Customized resources and information in areas such as nutrition, fitness and preventative care are available to help you take charge of your health. Health Smarts is associated with the following SISC services:

- Free on-site flu shot clinics
- Personalized on-line health coaching

Website: http://sischealthsmarts.com

Vision

Vision Service Plan

No card is provided for vision services. Your eye care office will look up coverage information by using Subscriber's Social Security number.

Website: www.vsp.com

Member Services: 1-800-877-7195
Mon-Fri 5am-8pm PST; Sat-Sun 7am-7pm PST

Prescriptions

Provide your Anthem medical card to your pharmacist to obtain prescription plan information.

Website: https://members.navitus.com

Member Services: 1-866-333-2757
Available 24/7 (closed Thanksgiving & Christmas)

Walk –in or Mail Order

Costco is contracted by Navitus to provide mail-order and walk–in services. Registration is required for on-line mail order services.

Website: pharmacy.costco.com

Member Services: 1-800-607-6861
Fax: 1-800-633-0334
Mon-Fri 5am-7pm PST; Sat 9:30am-2pm PST

Orders by mail:
215 Denlinger Circle
Corona, CA 92880-9911

Most Generic Drugs are free at Costco!

Dental

No card is provided for dental services. Your dental office will look up coverage information by subscriber's Social Security number.

Website: www.deltadentalins.com

Member Services: 1-866-499-3001
Mon-Fri 5am-5pm PST

Inquiries:
Delta Dental Customer Service
PO Box 997330
Sacramento, CA 95899-7330

AF is a qualified cafeteria plan under IRS Code Section 125 offering pre-tax benefits. AF Flex is divided into three parts:

- **Premium Only Plan (POP):** Employee paid health insurance premium can be made on a pre-tax basis through this plan. **ONE-TIME ELECTION**
- **Health Care Expense Account:** Employee-elected, pre-tax payroll deduction deposited to Flex Account to pay medical, dental and vision expenses not covered by the insurance plan (i.e. co-pays, deductibles, etc.) as allowed by the plan.
  ANNUAL ELECTION REQUIRED
- **Dependent Care Expense Account:** Employee-elected pre-tax payroll deduction deposited to Flex Account to pay dependent care costs as allowed by the plan.
  ANNUAL ELECTION REQUIRED

Website: americanfidelity.com

Account Manager:
Richard Tipton 559-381-2692
Email:
Richard.Tipton@americanfidelity.com