

SISC Medicare Information 2021



Oxnard School District Retirees 65+ Plan Comparison & Summary

2021-2022	Anthem PPO	Anthem	Valanu
2021-2022			Kaiser
Plan Type	PPO w/EGWP Coordinates with Medicare	Medicare Supplement Supplements on Medicare allowed services	Medicare Advantage Medicare is assigned to HMO
SISC PLAN NAME	100-A \$0	COMPANIONCARE	KPSA \$25
MEDICAL - CALENDAR YEAR Deductibles & Maximums	Member Pays	Member Pays	Member Pays
Individual/Family Deductibles	\$0	\$0	\$0
Individual/Family Out-of-Pocket (OOP) Max	\$1,000/\$2,000	\$0	\$1.500
(includes medical deductibles, co-insurance and co-pays)	\$1,000/\$3,000	ŞU	\$1,500
PROFESSIONAL SERVICES			
Office Visit (OV); Urgent Care, Specialists co-pay	\$0	\$0	\$25
Scans: CT, CAT, MRI, PET etc.	\$0	\$0	\$0 OV copay may apply if part of visit
Diagnostic X-ray & Laboratory Procedures	\$0	\$0	\$0 OV copay may apply if part of visit
Preventive Care (includes physical exams & screenings)	Deductible waived \$0	Not covered	\$0
HOSPITAL & SKILLED NURSING FACILITY SERVICES			
Emergency Room visit (co-pay waived if admitted)	\$100 co-pay	\$0	\$50 co-pay
Immunizations (Includes flu injections and all Medicare approved immunizations)	\$0	\$0	\$0 OV copay may apply if part of visit
Inpatient Hospital (preauthorization required) - limits may apply	\$0	\$0	\$500 per admission
Outpatient Hospital	\$0	\$0	\$25
Surgery, Outpatient (performed in Surgery Center)	\$0	\$0	\$25
Surgery, Outpatient (performed in a Hospital) - limits may apply	\$0	\$0	\$25
Skilled Nursing Facility-increased to 150 day 10/1/2021	Covered in full for 100 days	Covered in full for 100 days	Covered in full for 100 days
and combined with Inpatient Rehab day limit	per benefit period	per benefit period	per benefit period
Must be approved by Medicare	per benefit period	per beliefft period	per benefit period
Hospice		Covered under Medicare Part	4
MENTAL HEALTH & SUBSTANCE ABUSE TREATMENT			
INPATIENT: Facility Based Care (preauth required)	\$0	\$0	\$500 per admission
OUTPATIENT: Facility Based Care (preauth required)	\$0	\$0	\$25 copay individual
OTHER SERVICES			
Acupuncture - Limits apply	\$0	Not covered	\$10 copay 30 visits combined with Chiro
Ambulance (Ground or Air)	\$100 co-pay	\$0	\$150 per trip
Chiropractic - Limits apply	\$0	\$0	\$10 copay 30 visits combined with Acu
Durable Medical Equipment (DME)	\$0	\$0	20% - Kaiser DME guidelines apply
Hearing Aid	Amount in excess of \$700 allowance every 24 months	Not covered	Amount in excess of \$500 allowance every 36 months
Laboratory Services	\$0	\$0	\$0
Physical and Occupational Therapy - Limits apply	\$0	\$0	\$25



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	PPO w/EGWP	Medicare Supplement	Medicare Advantage	
Plan Type	Coordinates with Medicare	Supplements on Medicare allowed services	Medicare is assigned to HMO	
SISC PLAN NAME	100-A \$0	COMPANIONCARE	KPSA \$25	
MEDICAL - CALENDAR YEAR Deductibles & Maximums	Member Pays	Member Pays	Member Pays	
PHARMACY BENEFITS	0-35 EGWP	9-35	\$10-\$25 (30 day fill)	
Pharmacy Benefit Manager	Navitus	Navitus	Kaiser	
Individual/Family Brand & Specialty Rx Deductibles	none	none	none	
Individual/Family Rx Out-of-Pocket (OOP) Max (includes Rx deductibles and co-pays)	\$5,100	\$5,100	combined with medical	
Generic co-pay/30 days supply	\$0	\$9	\$10 (30 day supply)	
Brand co-pay/30 days supply	\$35	\$35	\$25 (30 day supply)	
Specialty co-pay/up to 30 days supply	\$35 Must Use Navitus Mail	\$35 Must use Navitus Mail	\$25 (30 day supply)	
Mail Order (Generic/Brand)	\$0-\$90	\$18-\$90	\$10 /\$30 (30 day supply)	
Mail Order Pharmacy	Costco Mail Order Pharmacy	Costco Mail Order Pharmacy	Kaiser Mail Order	
Monthly Premium for	Single Contract and 2-	Party Contract		
2020-2021 Monthly Premium Single Contract		\$402.00	\$173.00	
2020-2021 Monthly Premium 2-Party Contract 2020-2021 Monthly Premium 2-Party Contract		\$804.00	\$346.00	
2021-2022 Monthly Premium Single Contract	\$526.00	\$378.00	\$146.00	
2021-2022 Monthly Premium 2-Party Contract	\$1,052.00	\$756.00	\$292.00	

IMPORTANT:

Enrollment in Medicare Part A&B is REQUIRED.

SISC will automatically enroll retiree into Medicare Part D (Drugs)

Retiree's must have Medicare Part A&B the first of the month prior to their 65th birthday to avoid a "Missing Medicare" penalty

Medicare	
www.medicare.gov	

Social Security
www.ssa.gov

Enrollment in these plans requires a 45 day advance notice and special enrollment form to be completed and submitted to SISC.