



# RETIREE BENEFITS GUIDE

2024 – 2025

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**Our benefits are effective** October 1 through September 30 of each plan year



# WELCOME TO YOUR RETIREE BENEFITS

Whether you're enrolling in benefits for the first time, getting ready for retirement, or somewhere in between, the Santa Barbara Unified School District supports you with benefit programs and resources to help you thrive today and prepare for tomorrow.

We are providing you with this overview to help you understand the benefits that are available to you and how to best use them. Please review it carefully and make sure to ask about any important issues that are not addressed here. A list of plan contacts is provided at the back of this summary.

While we've made every effort to make sure that this guide is comprehensive, it cannot provide a complete description of all benefit provisions. For more detailed information, please refer to your plan benefit booklets or evidence of coverage (EOCs). The plan benefit booklets determine how all benefits are paid.



## 2024 - 2025 BENEFITS

**Open Enrollment Period:  
July 22 to August 9, 2024**

**The benefits in this summary are effective  
October 1, 2024 through September 30, 2025**

# OPEN ENROLLMENT / WHAT'S NEW

## OPEN ENROLLMENT

There are a few changes this year that affect benefits provided by Santa Barbara Unified School District.

### Open Enrollment Information Sessions

Santa Barbara Unified will be holding a general open enrollment information session via Zoom on July 19th from 2:00pm-5:00pm. Access the Zoom session by clicking on this link: <https://burnhambenefits.zoom.us/j/96604871556?from=addon>. Those who do not have access to technology may view this Zoom information session in the District Office Board Room on July 19th beginning at 2:00pm.

Additional one-on-one appointments are available with United Healthcare for our over 65 population. To schedule an appointment, go to: [https://calendly.com/retiree\\_burnhambenefits\\_assistance/30min](https://calendly.com/retiree_burnhambenefits_assistance/30min).

Zoom	<a href="#">Click here for link</a>	In Person	720 Santa Barbara Street Santa Barbara, CA 93101
July 19 <sup>th</sup>	2 PM—5 PM	July 19 <sup>th</sup>	Available for users without access to technology.
Zoom Dial In: Meeting ID:	1-669-444-9171 966 0487 1556	July 31 <sup>st</sup>	2 PM—5 PM

### Important!

If you would like to make changes to your plan(s), you will need to submit an Enrollment Form to the HR department by no later than **August 9, 2024**.



## WHAT'S NEW

Here are highlights for your 2024—2025 benefits:

### Medical

**IMPORTANT!** Health Net plans will no longer be available. For current Health Net subscribers: the United Healthcare plan is your only replacement option. If you wish to enroll in the United Healthcare plan, you must complete the enclosed enrollment form and return to HR.

### Dental

We are changing our dental carrier from Delta Dental to MetLife.

### Vision

Effective 1/1/24, SISC VSP members will be able to access the full \$150 frame allowance when purchasing frames at Walmart, Sam's Club, or Costco.

### SISC Value Added Programs

NEW! Eden Health virtual primary care for SISC Anthem PPO members. This new smart phone app helps encourage members to stay in touch and establish a relationship with a primary care provider.

# RETIREE BENEFITS OVERVIEW



## RETIREE BENEFITS FOR THE 2024 - 2025 PLAN YEAR

The District will continue to offer the following benefit plans for the 2024-2025 plan year with no plan changes:

### Retiree Health Benefit Plans

#### For Retirees Under 65

- Anthem Blue Cross 80-G PPO
- Anthem Blue Cross 80-M PPO
- MetLife PDP Plus \$2,000
- MetLife PDP Plus \$3,000
- VSP vision plan –Enhanced Benefits under the Primary Eyecare Plan

To obtain additional benefit information on this plan, please refer to pages 6-7.

#### For Retirees Over 65 with Medicare Parts A & B

- United Healthcare –New Renew Active available for UHC members
- Anthem Blue Cross Companion Care
- MetLife PDP Plus \$2,000
- MetLife PDP Plus \$3,000
- VSP vision plan –Enhanced Benefits under the Primary Eyecare Plan

Refer to pages 10-13 for detailed benefit information on the Medicare medical plans.

#### For Retirees Over 65 with No Medicare

- Anthem Blue Cross 80-G PPO
- MetLife PDP Plus \$2,000
- MetLife PDP Plus \$3,000
- VSP vision plan–Enhanced Benefits under the Primary Eyecare Plan

To obtain additional benefit information on this plan, please refer to pages 8-9.



# MEDICAL: RETIREES UNDER 65

	Anthem 80-G PPO Plan -#40447J		Anthem 80-M PPO Plan -#40447N	
	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Cost Factors</b>				
Annual Deductible	\$500/Individual \$1,000/Family		\$3,000/Individual \$6,000/Family	
Annual Out-of-Pocket Maximum	\$2,000/Individual \$4,000/Family		\$4,000/Individual \$8,000/Family	
Lifetime Max	Unlimited		Unlimited	
<b>Office Visits</b>	<b>You Pay</b>		<b>You Pay</b>	
Primary Doctor	\$30 copay (deductible waived)	All charges above fee schedule	\$40 copay <sup>1</sup> (deductible waived)	All charges above fee schedule
Specialist	\$30 copay <sup>1</sup> (deductible waived)	All charges above fee schedule	\$40 copay <sup>1</sup> (deductible waived)	All charges above fee schedule
Preventive Care	No charge	Not covered	No charge	Not covered
Urgent Care	\$30 copay	All charges above fee schedule	\$40 copay <sup>1</sup>	All charges above fee schedule
Chiropractic	20%	Not covered	20%	Not covered
Acupuncture (Limited to 12 visits/year)	20% up to \$50/visit	50% of allowed amount	20% up to \$50/visit	50% of allowed amount
<b>Other Services</b>	<b>You Pay</b>		<b>You Pay</b>	
Inpatient Hospitalization	20%	All charges over \$600/day	20%	All charges over \$600/day
Outpatient Surgery Hospital (5 Surgeries Subject to Limits <sup>2</sup> )	20%	50% of allowed amount	20%	50% of allowed amount
Outpatient Surgery: Ambulatory Surgery Centers	20%	All charges over \$350/day	20%	All charges over \$350/day
Lab and X-Ray Diagnostic Complex (MRI/PET)	20%	Not covered	20%	Not covered
Emergency Facility (copay waived if admitted)	\$100 copay, then 20%	\$100 copay, then 20% for true emergency	\$100 copay, then 20%	\$100 copay, then 20% for true emergency
Ambulance	\$100 copay, then 20%	\$100 copay, then 20% of allowed amount	\$100 copay, then 20%	\$100 copay, then 20% of allowed amount

<sup>1</sup> The dollar copay applies only to the visit itself. An additional 20% copay applies for any services performed in the office.

<sup>2</sup> Surgeries subject to benefit limits if performed in an outpatient hospital: Arthroscopy (\$4,500 max), Cataract (\$2,000 max), Colonoscopy (\$1,500 max), Upper GI Endoscopy (\$1,000 max) and Upper GI Endoscopy w Biopsy (\$1,250 max)

# PRESCRIPTION DRUGS: RETIREES UNDER 65

Prescription drug coverage provides a benefit that is important to your overall health, whether you need a prescription for a short-term health issue like bronchitis or an ongoing condition like high blood pressure. If you enroll in medical coverage, you will automatically receive coverage for prescription drugs.

	Anthem 80-G PPO Plan -#40447J		Anthem 80-M PPO Plan -#40447N	
	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Cost Factors</b>				
Brand Name Drugs: Annual Deductible	\$200/Individual \$500/Family		\$200/Individual \$500/Family	
Annual Out-of-Pocket Maximum	\$2,500/Individual \$3,500/Family		\$2,500/Individual \$3,500/Family	
<b>Pharmacy</b>	<b>You Pay</b>		<b>You Pay</b>	
Retail: 30-Day Supply	Generic: \$10 Brand: \$35	Generic: \$10 Brand: \$35	Generic: \$10 Brand: \$35	Generic: \$10 Brand: \$35
Costco Pharmacy: – 30-Day Supply	Generic: \$0 Brand: \$35	N/A	Generic: \$0 Brand: \$35	N/A
Costco Pharmacy: – 90-Day Supply	Generic: \$0 Brand: \$90	N/A	Generic: \$0 Brand: \$90	N/A
<b>Mail Order</b>	<b>You Pay</b>		<b>You Pay</b>	
Pharmacy: 90-Day Supply (Navitus)	\$35 Specialty from Navitus	Not covered	\$35 Specialty from Navitus	Not covered
Costco: 90-Day Supply	Generic: \$0 Brand: \$90	N/A	Generic: \$0 Brand: \$90	N/A

If you purchase a brand-name drug when a generic alternative is available, you will pay the generic copay plus the difference in cost even if your doctor writes, “dispense as written.”

For Costco Pharmacy only- pain medication and cough syrup with medication does not qualify for \$0 copay; members pay Brand or Generic copays.

## Pharmacy Tips

### Use generic and over the counter drugs when available.

The best way to save on prescriptions is to use generic or over the counter medications as opposed to brand name drugs. Generic drugs must use the same active ingredients as the brand name version of the drug. A generic drug must also meet the same quality and safety standards.

### When to Use a Retail Pharmacy

Use a retail pharmacy to fill prescriptions for acute conditions (conditions that do not require the medication to be taken on a regular basis). At a participating pharmacy, you will receive up to a 30 day supply of your prescriptions.

### Use the Mail Order Benefit for Maintenance Medications

To save money and time, consider using the mail order pharmacy to fill your maintenance medications.

# MEDICAL: NON-MEDICARE RETIREES OVER 65

The following Anthem Blue Cross plan is a non-Medicare medical plan.

	Anthem 80-G PPO Plan - #40447Y	
	In-Network	Out-of-Network
Cost Factors		
Annual Deductible	\$500/Individual \$1,000/Family	
Annual Out-of-Pocket Maximum	\$2,000/Individual \$4,000/Family	
Lifetime Max	Unlimited	
Office Visits	You Pay	
Primary Doctor	\$30 copay (deductible waived)	All charges above fee schedule
Specialist	\$30 copay (deductible waived)	All charges above fee schedule
Preventive Care	No charge	Not covered
Urgent Care	\$30 copay (deductible waived)	All charges above fee schedule
Chiropractic	20%	Not covered
Acupuncture (Limited to 12 visits/year)	20% up to \$50/visit	50% of allowed amount
Other Services	You Pay	
Inpatient Hospitalization	20%	All charges over \$600/day
Outpatient Surgery Hospital (5 Surgeries Subject to Limits <sup>2</sup> )	20%	50% of allowed amount
Outpatient Surgery: Ambulatory Surgery Centers	No charge	All charges over \$350/day
Lab and X-Ray Diagnostic Complex (MRI/PET)	20%	Not covered
Emergency Facility (copay waived if admitted)	\$100 copay, then 20%	\$100 copay, then 20% for true emergency
Ambulance	\$100 copay, then 20%	\$100 copay, then 20% of allowed amount for true emergency

<sup>1</sup> The dollar copay applies only to the visit itself. An additional 20% copay applies for any services performed in the office.

<sup>2</sup> Surgeries subject to benefit limits if performed in an outpatient hospital: Arthroscopy (\$4,500 max), Cataract (\$2,000 max), Colonoscopy (\$1,500 max), Upper GI Endoscopy (\$1,000 max) and Upper GI Endoscopy w Biopsy (\$1,250 max)





# PRESCRIPTION DRUGS: NON-MEDICARE RETIREES OVER 65

Prescription drug coverage provides a benefit that is important to your overall health, whether you need a prescription for a short-term health issue like bronchitis or an ongoing condition like high blood pressure. If you enroll in medical coverage, you will automatically receive coverage for prescription drugs.

Anthem 80-G PPO Plan - #40447Y		
	In-Network	Out-of-Network
<b>Cost Factors</b>		
Brand Name Drugs: Annual Deductible	\$200/Individual \$500/Family	
Annual Out-of-Pocket Maximum	\$2,500/Individual \$3,500/Family	
<b>Pharmacy</b>	<b>You Pay</b>	
Retail: 30-Day Supply	Generic: \$10 Brand: \$35	Generic: \$10 Brand: \$35
Costco Pharmacy: – 30-Day Supply	Generic: \$0 Brand: \$35	N/A
Costco Pharmacy: – 90-Day Supply	Generic: \$0 Brand: \$90	N/A
<b>Mail Order</b>	<b>You Pay</b>	
Pharmacy: 90-Day Supply (Navitus)	\$35 Specialty from Navitus	Not covered
Costco: 90-Day Supply	Generic: \$0 Brand: \$90	N/A



## Pharmacy Tips

### Use generic and over the counter drugs when available.

The best way to save on prescriptions is to use generic or over the counter medications as opposed to brand name drugs. Generic drugs must use the same active ingredients as the brand name version of the drug. A generic drug must also meet the same quality and safety standards.

### When to Use a Retail Pharmacy

Use a retail pharmacy to fill prescriptions for acute conditions (conditions that do not require the medication to be taken on a regular basis). At a participating pharmacy, you will receive up to a 30 day supply of your prescriptions.

### Use the Mail Order Benefit for Maintenance Medications

To save money and time, consider using the mail order pharmacy to fill your maintenance medications.

# MEDICAL:

## MEDICARE PARTS A & B-ELIGIBLE RETIREES

	United Healthcare Group Medicare Advantage HMO 521004
	In-Network Only
<b>Cost Factors</b>	
Annual Out-of-Pocket Maximum	\$1,500
<b>Doctor Visits</b>	<b>You Pay</b>
Primary Care Physician	\$10
Specialist	\$15
Preventive Care	No charge
Telemedicine/Virtual Visit	No charge
Outpatient Mental Health/ Substance Abuse	\$15
<b>Other Services</b>	<b>You Pay</b>
Inpatient Hospitalization	\$50 copay per admission
Inpatient Mental Health	\$50 copay per admission
Skilled Nursing Care	Days 1-20: no charge; Days 21-100: \$25 day; 100-day max
Home Health Care	No charge
Hospice	Covered by Medicare
<b>Prescription Drugs: Retail (30-Day Supply)</b>	<b>You Pay</b>
Tier 1	\$5
Tier 2	\$15
Tier 3	\$30
Tier 4	\$30
Tier 5	N/A
<b>Prescription Drugs: Mail Order (90-Day Supply)</b>	<b>You Pay</b>
Tier 1	\$10
Tier 2	\$30
Tier 3	\$60
Tier 4	\$60
Tier 5	N/A

**1** Subject to the coverage gap, i.e., the donut hole. (The donut hole means once your total drug cost (what you and the plan pays) reaches this amount, you will then be responsible for a percentage of the cost of the drugs. **This amount for 2024 is \$4,660.**)

PLAN SUMMARIES CONTINUED ON NEXT PAGE

# MEDICAL:

## MEDICARE PARTS A & B-ELIGIBLE RETIREES

	United Healthcare Group Medicare Advantage HMO 521004
	In-Network Only
Preventive Care	You Pay
Bone Mass Measurement Colorectal Screening Immunizations Mammogram Pap Smears Prostate Screening Routine Physical (1 per year)	No charge
Copays for Outpatient Services	You Pay
Clinical/Diagnostic/ Therapeutic Radiological Lab Services CT/MRI/Pet Scans Nuclear Medicine	No charge
Surgery-Ambulatory Surgery Center (ASC)	\$25
Surgery-Outpatient at Hospital (no overnight stay)	\$25
Comprehensive Outpatient Rehabilitation Facility (CORF), Physical Therapy (PT), Occupational Therapy (OT) Speech, & Cardiac Rehabilitation	No charge
Ambulance	\$50
Emergency Care	\$50 (waived if admitted within 24 hours)
Urgent Care	\$35 in-network –waived if admitted within 24 hrs
Durable Medical Equipment (DME) Prosthetics/Medical Supplies	20%

PLAN SUMMARIES CONTINUED ON NEXT PAGE



# MEDICAL:

## MEDICARE PARTS A & B-ELIGIBLE RETIREES

	<b>United Healthcare</b> <b>Group Medicare</b> <b>Advantage HMO</b> <b>521004</b>
	<b>In-Network Only</b>
<b>Podiatry</b>	
Medicare Covered Copay	\$15
Routine Copay	\$15; 6 visits/calendar year max
<b>Diabetes</b>	<b>You Pay</b>
Self-monitoring Training & Medical Nutrition Therapy	No charge
Diabetic Supplies	20%
Dialysis	20%
<b>Hearing</b>	<b>You Pay</b>
Medicare Covered-Exams	\$15
Routine Tests	No charge (1 per year)
Hearing Aids	\$500 allowance every 24 months (combined for both ears)
<b>Vision Services</b>	<b>You Pay</b>
Medicare-covered Eye Exams	\$15
Medicare-covered Eyewear	No charge for Medicare-covered eyewear (one pair of eyeglasses or contact lenses after each cataract surgery)
<b>Dental Services</b>	<b>You Pay</b>
Medicare-covered Dental Services	\$15
Non-Medicare Dental Services	Not covered
<b>Chiropractic Services</b>	
Routine Care	\$5 (12 visits/year)
Medicare-covered Visit	50%

# MEDICAL:

## MEDICARE PARTS A & B-ELIGIBLE RETIREES

### COMPANION CARE/MEDICARE SUPPLEMENTAL PLAN—40003A: SOUTHERN REGION

	Medicare 2024 Benefits	Companion Care Based on Medicare 2024 Benefits
	In-Network Only	In-Network Only
Inpatient Hospital (Part A)	<ul style="list-style-type: none"> <li>• Pays all but first <b>\$1,632</b> for 1st 60 days</li> <li>• Pays all but <b>\$408</b> a day for the 61st to 90th day</li> <li>• Pays all but <b>\$816</b> a day</li> <li>• Lifetime Reserve for 91st to 150th day</li> <li>• Pays nothing after Lifetime Reserve is used (refer to Evidence of Coverage)</li> </ul>	<ul style="list-style-type: none"> <li>• Pays <b>\$1,632</b></li> <li>• Pays <b>\$408</b> a day</li> <li>• Pays <b>\$816</b> a day</li> <li>• Pays 100% after Medicare and Lifetime reserve are exhausted up to 365 days per lifetime</li> </ul>
Skilled Nursing Facilities (Must Be Approved By Medicare)	<ul style="list-style-type: none"> <li>• Pays 100% for 1st 20 days</li> <li>• Pays all but <b>\$204</b> a day for 21st to 100th day</li> <li>• Pays nothing after 100th day</li> </ul>	<ul style="list-style-type: none"> <li>• Pays nothing</li> <li>• Pays \$204 a day for 21st to 100th day</li> <li>• Pays nothing after 100th day</li> </ul>
Deductible (Part B)	<b>\$240</b> Part B deductible per year	Pays <b>\$240</b>
Basis of Payment (Part B)	80% Medicare Approved (MA) charges after Part B deductible	20% MA charges including 100% of Medicare Part B deductible
Medical Services (Part B) (Doctor, X-ray, Appliances, and Lab)	80% MA charges 100% MA charges	20% MA charges Pays nothing
Physical/Speech Therapy (Part B)	80% MA charges up to the Medicare annual benefit amount	80% MA charges up to the Medicare annual benefit amount (Physical/Speech therapy combined)
Blood (Part B)	80% MA charges after 3 pints	Pays first 3 pints unreplaced blood and 20% MA charges
Travel Coverage	Not covered	80% MA charges Pays 80% inpatient hospital, surgery, anesthetist and in-hospital visits for medically necessary services for 90 days of treatment per lifetime. For details call Anthem customer service at 800-825-5541

COMPANION CARE SUMMARY CONTINUED ON NEXT PAGE

# MEDICAL:

## MEDICARE PARTS A & B-ELIGIBLE RETIREES

### COMPANION CARE/MEDICARE SUPPLEMENTAL PLAN—40003A: SOUTHERN REGION

	Medicare 2024 Benefits	Companion Care Based on Medicare 2024 Benefits
	In-Network Only	In-Network Only
Outpatient Prescription Drugs	Medicare Part D Prescription Drug Plan Through Navitus Health Solutions	
Retail Pharmacy Mail Order	30-day supply \$9 Generic copay, \$35 Brand copay 90-day supply \$18 Generic copay, \$90 Brand copay	
Accessing Prescription Drug Benefits	Pharmacy benefits are administered through Navitus Health Solutions Medicare Rx using a Medicare D formulary. Some exclusions and prior authorizations may apply.  Members that have questions regarding their medication coverage can call Navitus Health Solutions Medicare Rx at <b>866-270-3877</b> or TTY users please call 711.	

Companion Care is a Medicare Supplement plan that pays for medically necessary services and procedures that are considered a Medicare Approved Expense.

SISC will automatically enroll Companion Care Members into Medicare Part D. No additional premium required. SISC plans are NOT subject to the 'doughnut hole'.

**Eligibility:** Member must be retired and enrolled in Medicare Part A (hospital) and Medicare Part B (medical coverage). Retiree under age 65 with Medicare for the disabled (Parts A&B) may enroll in Companion Care.

**Enrollment:** Enrollment forms and a copy of the Medicare card must be received by SISC 45 days in advance of requested effective date NO exceptions. SISC will automatically enroll members in Medicare Part D for outpatient prescription medications. Members already enrolled in non SISC Medicare Part D plans will be automatically disenrolled from those plans.

**Disenrollment:** Disenrollment throughout the year requires submission of a disenrollment form to SISC with a 45 calendar day advance notice of requested effective date. During the annual Med Part D Open Enrollment members can enroll into Medicare Part D plans outside of SISC with a January 1 effective date. Enrollment in a Med Part D plan outside of SISC will terminate the SISC medical and Rx benefits.

**Provider Network:** Physicians who accept Medicare Assignment.

For additional **Medicare** benefit information, please go to [www.medicare.gov](http://www.medicare.gov) or call **800-medicare (800-633-4227)**.

For additional **Navitus Medicare RX** prescription drug information, please go to [www.navitus.com](http://www.navitus.com) or call **866-270-3877**.



# MEDICAL: MENTAL WELLNESS RESOURCES

## MEDICAL PLAN IN-NETWORK MENTAL HEALTH BENEFITS\*

Our medical insurance provider is ready to help you get the support you need. With our plan providers's networks of Behavioral Health providers (therapists, psychologists, psychiatrists), you can access your covered mental health benefits for short or long-term issues.

Medical Plan	Inpatient	Outpatient Visits	Virtual Mental Health Visits
Anthem 80-G PPO Plan -#40447J	Deductible, 20%	\$30 copay (Deductible waived)	Available through MDLive at <a href="http://www.mdlive.com/sisc">www.mdlive.com/sisc</a> (or call (888) 632-2738).
Anthem 80-M PPO Plan -#40447N	Deductible, 20%	\$40 copay (Deductible waived)	
Anthem 80-G PPO Plan - #40447Y	Deductible, X%	\$X Copay	
United Healthcare Group Medicare Advantage HMO 521004	See the plan booklet for details		
COMPANION CARE/ Medicare Supplemental Plan— 40003A	See the plan booklet for details		

\* Out-of-network mental health benefits are also available for Under Age 65 PPO plans Refer to the SBCs for details.

### Learn More About Mental Health

This video can help give you a better understanding about mental health and resources for treating it:

<https://flimp.live/Mental-Health-FAQ>



# MEDICAL: MENTAL WELLNESS RESOURCES

## MENTAL HEALTH RESOURCES FOR ANTHEM NON-MEDICARE RETIREES UNDER AGE 65

### Anthem EAP Counseling Benefits

Anthem Non-Medicare Retirees under age 65 have access to confidential mental health resources through the SISC Anthem Employee Assistance Program (EAP). More details on the Anthem EAP can be found on page 20. Receive up to 6 free counseling sessions per issue per benefit year, plus unlimited phone support for:

- Relationship difficulties
- Marriage, family or parenting concerns
- Managing change and stress
- Depression and anxiety
- Addiction and recovery
- Grief and loss
- Work/life balance
- Personal growth
- And more

To access your Anthem EAP counseling benefits, call (800) 999-7222 or visit [www.anthemEAP.com](http://www.anthemEAP.com) (to log in, enter SISC as the program name).

### Talkspace

You have the option to access your Anthem EAP six free counseling sessions through Talkspace. You can also have unlimited messaging with a counselor, including text, voice, and video message. Talkspace's clinical network includes thousands of licensed counselors specializing in stress, anxiety, depression, eating disorders, substance use, sleep, identity struggles, chronic issues, trauma, grief, relationships, healthy living, and more. Self-guided exercises such as journaling and meditation are available to supplement counseling.

To access Talkspace, call the Anthem EAP at 800-999-7222 or visit [talkspace.com/associatecare](http://talkspace.com/associatecare) and use "SISC" as your organization name. You can download the Talkspace app on your mobile phone or access it on your desktop computer using a Chrome, Firefox, Safari, or Edge browser.

### Learn to Live Wellbeing Support

The Anthem EAP also gives you access to free, customized online programs based on proven principals of Cognitive Behavioral Therapy (CBT) to manage stress, depression, anxiety, substance use and sleep issues. Learn to Live includes:

- Personalized, one-on-one coaching –team up with an experienced coach who can provide support and encouragement by email, text, or phone.
- Build a Support Team –add friends or family members as "Teammates". They can help you stay motivated and accountable while you work through the programs.
- Practice mindfulness on the go –receive weekly text messages filled with positivity, quick tips, and exercises to improve your mood.
- Live and on-demand webinars –Learn how to Improve mental well-being with useful tips and advice from experts.

To access your Anthem EAP Learn to Live program, call (800) 999-7222 or visit [www.anthemEAP.com](http://www.anthemEAP.com) (to log in, enter SISC as the program name).

### Vida Therapy and Health Coaching

Vida helps with a number of wellness topics, including mental health. Use the virtual care platform to access a therapist who will help you in your journey toward mental wellness.

To learn more, call (855) 442-5885 or visit [vida.com/sisc](http://vida.com/sisc).

# TIPS ON PRESCRIPTION DRUGS

## CHECK OUT THESE TIPS TO SAVE MONEY ON YOUR PRESCRIPTION DRUGS!

### Your plan's formulary drug tiers determine how much you pay out of pocket:

\$	Generic Drug
\$\$	Brand Name Drug
\$\$\$	Specialty Drug

### Understanding The Formulary Can Save You Money

If your doctor prescribes medicine, especially for an ongoing condition, don't forget to check your health plan's drug formulary. It's a powerful tool that can help you make informed decisions about your medication options and identify the lowest cost selection.

#### What Is A Formulary?

A drug formulary is a list of prescription drugs covered by your medical plan. Most prescription drug formularies separate the medications they cover into four or five drug categories, or "tiers." These groupings range from least expensive to most expensive cost to you. "Preferred" drugs generally cost you less than "non-preferred" drugs.

## GET THE MOST FROM YOUR COVERAGE WITH NAVITUS AND COSTCO!

Take advantage of your SISC benefits to help you save on prescription costs!

### Navitus: Specialty Medications for Non-Medicare Anthem Plan Members

Specialty medications are high-cost injectable, infused, oral, or inhaled medications that generally require special handling and may be subject to special rules such as quantity limits, prior authorization and/or step therapy.

These medications have become a vital part of the treatment for chronic illnesses and complex diseases such as multiple sclerosis, rheumatoid arthritis and cancer. Some medications may involve special delivery and instructions that not all pharmacies can easily provide. These medications require personalized coordination between the member, the prescriber and pharmacy. Navitus Specialty helps patients stay on track with treatment while offering the highest standard of compassionate care through personalized support, free delivery and refill reminders.

Most medications classified as Specialty can be found on the SISC Drug List located on Navitus' secure member website Navi-Gate for Members at [www.navitus.com](http://www.navitus.com). Not available to Medicare members.



### Costco: Generic Prescriptions for Anthem Plan Members


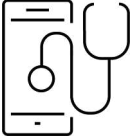


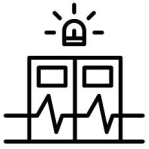
\$0 copay for most generic prescriptions! Costco membership is NOT required. 30 or 90-day supplies of most generics. Some narcotic pain and cough medications are not included in the Costco Free Generic or 90-day supply programs. This program is available to all Anthem PPO and HMO plans.

Find a Costco location by calling 800-774-2678 (press 1) or visit [www.costco.com](http://www.costco.com).



# TIPS ON MEDICAL CARE OPTIONS

Where you choose to access medical care from can have a significant impact on the cost. Here's a quick guide to help you know where to go, based on your condition, budget, and time.

Visit Type	Best For	Examples	Access	Cost
<b>Nurseline</b> 	Quick answers from a trained nurse	<ul style="list-style-type: none"> <li>Identifying symptoms</li> <li>Decide if immediate care is needed</li> <li>Home treatment options and advice</li> </ul>	24/7	\$0
<b>Virtual Visit</b> 	Many non-emergency health concerns	<ul style="list-style-type: none"> <li>Cold, flu, allergies</li> <li>Headache, migraine</li> <li>Skin conditions, rashes</li> <li>Minor injuries</li> <li>Mental health concerns</li> </ul>	24/7	\$
<b>Office Visit</b> 	Routine medical care and overall health management	<ul style="list-style-type: none"> <li>Preventive care</li> <li>Illnesses, injuries</li> <li>Managing existing conditions</li> </ul>	Office hours	\$\$
<b>Urgent Care / Walk-in Clinic</b> 	Non-life threatening conditions requiring prompt attention	<ul style="list-style-type: none"> <li>Stitches</li> <li>Sprains</li> <li>Animal bites</li> <li>Ear nose throat infections</li> </ul>	Office hours or up to 24/7	\$\$\$
<b>Emergency Room</b> 	Life-threatening conditions requiring immediate medical expertise	<ul style="list-style-type: none"> <li>Suspected heart attack or stroke</li> <li>Major bone breaks</li> <li>Excessive bleeding</li> <li>Severe pain</li> <li>Difficulty breathing</li> </ul>	24/7	\$\$\$\$

**CHECK OUT THESE VIDEOS:**



**Primary Care vs  
Urgent Care vs ER**



**Telehealth**

# SISC BENEFITS FOR NON-MEDICARE ANTHEM PLAN MEMBERS

## NEW FOR 2024! QUEST WELLNESS SCREENING

All non-Medicare Anthem Plan medical plan members are eligible for a free wellness screening through Quest Diagnostics. This biometric screening can provide important insights into your health risks. When you complete this screening, you will know your health numbers and can connect with your doctor to help manage health risks and prevent chronic disease.



Quest Diagnostics has more than 2,250 Patient Service Centers nationwide where you can get your screening. Here's how to schedule an appointment:

- Go to [My.QuestForHealth.com](https://My.QuestForHealth.com).
- Use Registration Key: SISC2024.
- In the **Wellness Screening** section, under Patient Service Center, select **Schedule a Screening**.
- If you schedule as a walk-in, you may be required to make an appointment upon check-in.
- You will receive an email when your results are ready to view online.

If you'd like to speak with Quest, you can reach them at (855) 623-9355.

*Please note, any member awards will be distributed to the email used at registration within 30 days of the completed appointment.*

## TELADOC EXPERT SECOND OPINION

This benefit provides all non-Medicare Anthem plan members with free support for making clear, informed medical decisions from leading medical experts. Teladoc can help answer medical questions, double-check a diagnosis, provide when help deciding on a treatment plan, or give guidance about surgery. Benefits include:



- Unlimited access to a top physician if you or a family member receive a difficult diagnosis.
- Your Physician Case Manager is backed by a team of leading doctors around the world, and the team collaborates to determine/confirm the correct diagnosis and the optimal plan for treatment.
- Your Physician Case Manager helps navigate the ins and outs of the healthcare system, making care more efficient and helping ease stress.
- Receive on-demand support in understanding the course of treatment, what to expect, and what the likely results are.
- You can access Teladoc at (855) 201-9925 or by visiting [teladoc.com/SISC](https://teladoc.com/SISC).

## LARK DIABETES PREVENTION PROGRAM

Anthem Blue Cross has partnered with Lark to offer a diabetes prevention program that can help non-Medicare Anthem plan members determine if you're at risk for prediabetes and if needed, take steps to address it.



- You can participate in this program at no extra cost as part of your SISC health plan.
- Track your progress, check in with your coach, and learn more about prediabetes right in Lark's free mobile app. This program is flexible, convenient, and follows guidelines from the Centers for Disease Control and Prevention (CDC) to help you make small changes that can improve your health and decrease your risk over time.
- As part of the program, you will also receive a wireless scale that uploads your information to the app automatically so you can easily track your progress and share it with your coach.
- Lark will also send you a personal activity tracker, as long as you stay active in the program.
- Go to [www.lark.com/anthemBC](https://www.lark.com/anthemBC) and take a quick one-minute survey to see if you could benefit from Lark's diabetes prevention program.

# SISC BENEFITS FOR NON-MEDICARE ANTHEM PLAN MEMBERS

## ANTHEM EMPLOYEE ASSISTANCE PROGRAM

The District provides retirees with support for a wide variety of challenges through the SISC Anthem Employee Assistance Program (EAP). It is available at no cost to retirees who are enrolled in one of the district's retiree medical plans. If you or a family member needs assistance with personal, family or work-life balance issues, you can contact the EAP for confidential assistance. You can access the EAP by calling (800) 999-7222 or by visiting [www.anthemEAP.com](http://www.anthemEAP.com) (to log in, enter SISC as the program name).



### Support and Counseling

The Employee Assistance Program (EAP) provides confidential support in balancing a wide array of challenges with up to 6 free counseling sessions per issue per benefit year, plus unlimited phone support for:

- Relationship difficulties
- Depression and anxiety
- Work/life balance
- Marriage, family or parenting concerns
- Addiction and recovery
- Personal growth
- Managing change and stress
- Grief and loss
- And more

You have the option to access your six free counseling sessions through Talkspace. You can also have unlimited messaging with a counselor, including text, voice, and video message. Talkspace's clinical network includes thousands of licensed counselors specializing in stress, anxiety, depression, eating disorders, substance use, sleep, identity struggles, chronic issues, trauma, grief, relationships, healthy living, and more. Self-guided exercises such as journaling and meditation are available to supplement counseling.

To access Talkspace, call the Anthem EAP at 800-999-7222 or visit [talkspace.com/associatecare](http://talkspace.com/associatecare) and use "SISC" as your organization name. You can download the Talkspace app on your mobile phone or access it on your desktop computer using a Chrome, Firefox, Safari, or Edge browser.

### Identity Monitoring and Theft Resolution

- 24/7/265 free identity monitoring and theft resolution services through IDnotify.
- Your IDnotify specialist will help you determine if an identity theft event has occurred and guide you through any necessary restoration activities.

### Legal and Financial Resources

- A library of articles on legal topics and issues.
- 100 legal forms for a variety of family and consumer situations, plus State-specific legal forms.
- Articles and resources that address estate planning questions.
- Financial Calculators that help you to get answers and explore different options regarding home and personal financing, investing, and retirement.

### Learn to Live Wellbeing Support

- Access free, customized online programs based on proven principals of Cognitive Behavioral Therapy (CBT) to manage stress, depression, anxiety, substance use and sleep issues

### Seminars and Articles

- Online resources for a wide array of topics, including both a library of articles and on-demand seminars.

### Savings Center

- Discount shopping program provided through Perks At Work, with discounts of up to 25% on name brand, practical, and luxury items.



# SISC BENEFITS FOR NON-MEDICARE ANTHEM PLAN MEMBERS

## VIDA THERAPY AND HEALTH COACHING

- Non-Medicare Anthem plan members have free access to Vida. This virtual care platform can help with nutrition, weight loss, building healthy habits, mental health, and overall wellbeing.
- With Vida, your coach or therapist will personalize a plan for you, and help guide you every step of the way.
- To learn more, call 855-442-5885 or visit [vida.com/sisc](https://vida.com/sisc).



## MDLIVE

Non-Medicare Anthem plan members have access to MDLIVE visits for a \$10 copay. This telemedicine service provides convenient 24/7 access to board certified doctors, pediatricians, and licensed therapists via online video, phone or secure email. You can use MDLive:

- When you'd like to access mental health support and resources.
- If you're considering a visit to an emergency room or urgent care center for a non-emergency medical issue.
- When your primary care doctor is not available.
- When you are traveling and in need of medical care.
- During or after normal business hours, nights, weekends and holidays.
- To request prescription drugs or to get refills.



To access MDLive, visit [www.mdlive.com/sisc](https://www.mdlive.com/sisc) or call (888) 632-2738. Be prepared to provide your name, the patient's name, your member identification number and your phone number.



## ACTIVE & FIT DIRECT DISCOUNTED GYM MEMBERSHIPS

Active and Fit Direct allows non-Medicare Anthem plan members to enroll in 12,000+ participating fitness centers and YMCAs nationwide for only \$25/month (plus \$25 enrollment fee and taxes). There are no annual fees or long-term contracts, and you can switch gyms at any time. In addition:

- You have access to 9,300+ On-Demand Fitness videos.
- 5,700+ Premium Gym Options at exercise studios, outdoor experiences, and others, with 20% - 70% discounts at most locations.
- Use the online fitness tracking feature, which uses a variety of wearable devices and apps.
- To learn more, visit <https://www.anthem.com/ca/sisc/health-wellness>.



# SISC BENEFITS FOR NON-MEDICARE ANTHEM PPO PLAN MEMBERS

## EDEN HEALTH APP

Non-Medicare Anthem PPO plan members have free, 24/7 access to a Care Team who works together to offer you primary care, mental health support, and answers to follow-up care questions through the Eden Health app. The app is available to you and your dependents at no cost. You can receive help with:

- Diagnoses and treatments
- Prescription refills
- Scheduled video visits or live chat with a primary care physician
- Special referrals
- Mental health support

Simply download the Eden Health app from the App Store or Google Play and register.



The App Store



Google Play

## CONTIGO HEALTH — ENHANCED CANCER BENEFIT

- Non-Medicare Anthem PPO plan members can access the highest level of cancer specialists and obtain expert comprehensive care throughout the process.
- Benefit includes care coordination services with at home provider, transportation, and more.
- To access your Enhanced Cancer Benefit, call (877) 220-3556 or visit [sisc.contigohealth.com](https://sisc.contigohealth.com).



## VALUE BASED SITE OF CARE BENEFIT

- Reference pricing for five common procedures that can be performed safely at an Ambulatory Surgery Center (ASC) at costs significantly lower than at a hospital are listed below.
- If you choose to have your procedure at an in-network outpatient facility, only the amounts below will be paid for the procedure. You will be responsible for paying the remaining amount in full.
- There is no benefit limit when you obtain these procedures at an in-network Ambulatory Service Center.
- For questions, please contact the customer service number on your medical ID card.

Value Based Purchasing	Maximum Benefit at an in-network outpatient hospital facility	There is no limit at an in-network Ambulatory Service Center (ASC)
	In-Network	ASC Facility
Arthroscopy	\$4,500	n/a
Cataract Surgery	\$2,000	n/a
Colonoscopy	\$1,500	n/a
Upper GI Endoscopy with Biopsy	\$1,250	n/a
Upper GI Endoscopy without Biopsy	\$1,000	n/a

# SISC BENEFITS FOR NON-MEDICARE ANTHEM PPO PLAN MEMBERS

## HINGE HEALTH — PHYSICAL THERAPY FOR BACK AND JOINT PAIN

- Non-Medicare Anthem PPO plan members can receive free, personalized, digitally delivered therapy for back and joint pain.
- Get access to free wearable sensors and monitoring devices, unlimited one-on-one coaching, and personalized exercise therapy.
- Reduce your back and joint pain in just 15 minutes a day.
- To access your Hinge Health benefit, call (855) 902-2777 or visit [hingehealth.com/sisc](https://hingehealth.com/sisc).



## CARRUM HEALTH — NO-COST HIP, KNEE, AND SPINE SURGICAL OPTIONS

- Non-Medicare Anthem PPO plan members can access top-quality surgeons at Scripps with no out-of-pocket cost through Carrum Health.
- All medical bills, including deductibles, coinsurance and even travel expenses are covered.
- To learn more, call Carrum Health at (888) 855-7806 or visit [info.carrumhealth.com/sisc](https://info.carrumhealth.com/sisc).



## MAVEN MATERNITY AND POSTPARTUM SUPPORT

Non-Medicare Anthem PPO plan members can access virtual care for pregnancy and postpartum support through Maven at no cost. Use Maven for unlimited, on-demand care from doctors, specialists, and coaches.

- Consult with a care advocate who connects you with trustworthy content delivered by doctors, specialists, coaches and other maternity providers to help deal with pregnancy and postpartum concerns.
- Maven provides comprehensive support through pregnancy, postpartum, return-to-work transitions, and potential miscarriage.
- Video chat or message with 30+ types of providers at no charge, from OB-GYNs and Pediatricians to Lactation Consultants and Infant Sleep Coaches.
- Free 6-month diaper subscription when you:
  1. Enroll during the first or second trimester
  2. Have an intro call with a Care Advocate
  3. Have two appointments with Maven providers during pregnancy
  4. Complete the exit survey after your baby is born



To activate your membership, download the Maven Clinic app or visit [mavenclinic.com/join/SISC](https://mavenclinic.com/join/SISC).

# RENEW ACTIVE FOR UNITED HEALTHCARE MEMBERS

## RENEW ACTIVE

Renew Active is the gold standard in Medicare fitness programs for body and mind. And it's available with your **United Healthcare Medicare Advantage plan** at no additional cost.

### Stay Fit

- Work out where you want, whether that's at a gym or fitness location or from your home.
- A free gym membership.
- Access to our extensive, nationwide network of gyms and fitness locations. It's the largest of all Medicare fitness programs\*.
- A personalized fitness plan.
- Allows you to bring your caregiver to the gym with you, at no additional cost.
- Access to thousands of workout videos with Fitbit Premium—no Fitbit® device is needed.

### Stay Focused

- An online brain health program from AARP Staying Sharp with exclusive content for Renew Active members.
- Online brain health assessment
- Brain health content and tools
- The Brain Health Staycation and Find Your Calm guides

### Stay Connected

- Connect with other health-minded members.
- Social activities at local health and wellness classes and events
- Step challenges with other members through the Fitbit Community for Renew Active —no Fitbit device is needed

### Living Healthier with Renew

Renew Active is a key part of Renew, which offers a wide variety of health and wellness resources and activities that help inspire you to take charge of your health every day. Renew includes brain games, healthy recipes, learning courses, fitness activities, Renew magazine and more.



### How to Access in Renew Active

#### Your Code is Key

Every Renew Active member has a unique confirmation code. Write it down and use it to access your gym membership, create an account on AARP Staying Sharp, join the Fitbit® Community for Renew Active and gain access to Fitbit Premium.

#### How to find your unique Renew Active confirmation code:

1. Sign into your plan website.
2. Click Health & Wellness in the upper right hand corner.
3. Look for Renew Active on the right side of the page.
4. Your Renew Active Confirmation Code will start with a letter, followed by 9 digits. You will see it at the bottom of the screen.
5. If you have any questions or to get your confirmation code, please call Customer Service at the number on the back of your member ID card.



# SILVER & FIT FOR COMPANION CARE MEMBERS



## SILVER&FIT

### Companion Care Retirees Age 65+ Only

The Silver&Fit HealthyAging and Exercise program is available to all Companion Care retirees age 65+. You may participate in any of the following at no cost to you (unless specified otherwise):

- **Get Started Program:** Answer a few online questions about your fitness level and goals to receive a personal exercise plan, including suggested workout videos.
- **8,000+ Digital Workout Videos:** Go to [www.SilverandFit.com](http://www.SilverandFit.com) or download the Silver&Fit mobile app to view workout videos, perfect for all fitness levels.
- **Standard and Premium Fitness Network Choices:** participating fitness centers or select YMCAs, many with exercise classes for older adults. You also have access to 4,000+ Premium locations including fitness centers, studios, and unique fitness experiences for a buy-up price.
- **Healthy Aging Coaching:** Coaches will help you meet your fitness, nutrition, and lifestyle goals during scheduled phone sessions. You can create your own Healthy Aging Life Plan, choose areas to focus on, set goals and stay motivated!
- **Home Fitness Kits:** Pick your favorite kit once every benefit year (note: once selected, Home Fitness Kits cannot be exchanged)).
  - Fitbit Wearable Fitness Tracker Kit
  - Garmin Wearable Fitness Tracker Kit
  - Pilates Kit
  - Beginner Strength Kit
  - Intermediate Strength Kit
  - Advanced Strength Kit
  - Beginner Swim Kit
  - Advanced Swim Kit
  - Beginner Yoga Kit
  - Intermediate/Advanced Yoga Kit

To get started with Silver&Fit, visit [www.silverandfit.com](http://www.silverandfit.com) or call (877) 427-4788.

# DENTAL

## METLIFE PPO PLANS (NEW FOR 2024!)

Santa Barbara Unified School District is pleased to offer best-in-class dental insurance through MetLife.

With the MetLife Dental PPO plans, you have the freedom to visit the dentist of your choice, in or out of network. The plans are designed to provide you and your dependents with access to the full dental benefit allowance whether your dentist is in or out of the MetLife network.

Your costs are typically less when you utilize a network provider because benefits for in-network covered services are based on a percentage of the Negotiated Fee—the fee that participating dentists have agreed to accept as payment in full (subject to the deductible, coinsurance and benefit maximum).

If you utilize a non-network provider who does not participate in the MetLife network, your out of pocket costs may be greater because benefits paid are based on a percentage of the Reasonable and Customary (R&C) charge.

	MetLife PDP Plus \$2,000		MetLife PDP Plus \$3,000	
	In-Network <sup>1</sup>	Out-of-Network	In-Network <sup>1</sup>	Out-of-Network
<b>Dental Care</b>				
Annual Maximum Benefit	\$2,000	\$2,000	\$3,000	\$3,000
Deductible	\$25/Individual \$75/Family	\$25/Individual \$75/Family	\$25/Individual \$75/Family	\$25/Individual \$75/Family
Deductible waived for preventive	Yes	Yes	Yes	Yes
Preventive services	100%	100% (UCR) <sup>2</sup>	100%	100% (UCR) <sup>2</sup>
Basic services	100%	100% (UCR) <sup>2</sup>	100%	100% (UCR) <sup>2</sup>
Major services	50%	50% (UCR) <sup>2</sup>	50%	50% (UCR) <sup>2</sup>
<b>Services per category</b>				
- Exams / cleanings / X-rays	Preventive	Preventive	Preventive	Preventive
- Extractions & fillings	Basic	Basic	Basic	Basic
- Endodontics	Basic	Basic	Basic	Basic
- Periodontics	Basic	Basic	Basic	Basic
- Oral surgery	Basic	Basic	Basic	Basic
- Crowns / inlays / onlays	Basic	Basic	Basic	Basic
- Bridges / dentures / implants	Major	Major	Major	Major

<sup>1</sup> Network benefits are paid based on Negotiated Fee.

<sup>2</sup> Non-network benefits are paid based on the Reasonable and Customary (R&C) charges based on the 90th percentile.

### For More Information On Your Dental Benefits

- Go to [www.mybenefits.metlife.com](http://www.mybenefits.metlife.com) and register for an online account
- Download the MetLife Mobile App to manage your benefits anywhere, anytime
- Call (800) GET-MET8 or (800) 438-6388.

# VISION

## VSP VISION PLAN

Routine vision exams are important, not only for correcting vision but because they can detect other serious health condition. Santa Barbara Unified School District provides vision coverage through VSP.

- You can see a VSP in-network provider or an out-of-network provider, however, your costs will be lower if you visit an in-network provider.
- If you visit an in-network provider you will be responsible for a copay at the time of your service. I
- If you receive services from an out-of-network doctor, you will pay all costs at the time of service and submit a claim for reimbursement.

Vision Care	Vision Service Plan (VSP)	
	In-Network	Out-of-Network
	You Pay	
Vision Exam (Once Every 12 Months)	\$5	Any charge above \$35 allowance
Eyeglass Lenses (Once Every 12 Months) – Single Vision – Bifocal – Trifocal	No charge No charge No charge	Any charge above \$25 allowance Any charge above \$40 allowance Any charge above \$50 allowance
Frames (Once Every 24 Months)	Any charge above \$150 allowance	Any charge above \$30 allowance
Elective Contact Lenses (Once Every 12 Months in Lieu of Frames and Lenses)	Any charge above \$150 allowance for Contact Lenses/ Contact Lens Exam	Any charge above \$90 allowance for Contact Lenses/Contact Lens Exam

### Find Vision Network Providers

Go to [www.vsp.com](http://www.vsp.com) or call (800) 877 7195.

### Additional Discounts Available

- LASIK and PRK Benefit: You are entitled to a 15% discount on the usual and customary fees for LASIK and PRK procedures, or a 5% discount on any promotional pricing, whichever is the greater benefit, through the US Laser Network.
- Continued Eyewear Savings: After your initial visits have been utilized, you are able to receive ongoing discounts on additional eye wear purchases at a network provider, which result in discounts up to 40% off the retail price of eye wear and accessories.

# BENEFIT CONTACTS



Benefit Plan Contacts		
Name	Phone	Website/Email
<b>Santa Barbara Unified School District</b>		
Human Resources/Benefits	(805) 963-4338, Benefits Office Ext. 6242 Gaby Leon Ext. 6240	<a href="mailto:hrbenefits@sbunified.org">hrbenefits@sbunified.org</a>
<b>Medical</b>		
Anthem Blue Cross of California	(800) 322-5709	<a href="http://www.anthem.com/ca/sisc">www.anthem.com/ca/sisc</a>
United Healthcare	(888) 867-5548	<a href="https://retiree.uhc.com">https://retiree.uhc.com</a>
Anthem Blue Cross Companion Care	(800) 972-1727	<a href="http://www.anthem.com/ca/sisc">www.anthem.com/ca/sisc</a>
<b>SISC Benefits for Anthem Members</b>		
Teladoc Medical Experts	(808) 835-2362	<a href="http://www.teladoc.com/sisc">http://www.teladoc.com/sisc</a>
MDLive	(888) 632-2738	<a href="http://www.mdlive.com/sisc">www.mdlive.com/sisc</a>
<b>Dental</b>		
MetLife	(800) 438-6388	<a href="http://www.mybenefits.metlife.com">www.mybenefits.metlife.com</a>
<b>Vision</b>		
Vision Service Plan (VSP)	(800) 877-7195	<a href="http://www.vsp.com">www.vsp.com</a>

## District Mailing Address:

720 Santa Barbara Street  
Santa Barbara, CA 93101



# COST OF COVERAGE

## MONTHLY CONTRIBUTIONS FOR MEDICAL/DENTAL/VISION PLANS

The monthly amount that you pay for your coverage is outlined below and depends on the plan you elect and whether you cover dependents.

	Retiree	Retiree + Spouse	Retiree + Family
<b>Medical: Retirees Under 65</b>			
Anthem Blue Cross PPO 80 G 40447J	\$1,453.00	\$2,873.00	\$3,650.00
Anthem Blue Cross PPO 80 M 40447N	\$1,126.00	\$2,219.00	\$2,819.00
<b>Medical: Non-Medicare Retirees Over 65</b>			
Anthem Blue Cross PPO 80 G 40447Y	\$1,964.00	\$3,928.00	\$4,273.00
<b>Medical: Medicare Parts A &amp; B-Eligible Retirees</b>			
United Healthcare 521004	\$530.59	\$1,061.18	N/A
Anthem Blue Cross Companion Care 40003A	\$419.00	\$838.00	N/A
<b>Dental</b>			
MetLife \$2,000 PPO	\$77.79	\$157.17	\$220.47
MetLife \$3,000 PPO	\$83.22	\$168.15	\$235.88
<b>Vision</b>			
Vision Service Plan (VSP)	\$10.10	\$20.20	\$30.30



# FREQUENTLY ASKED QUESTIONS

- 1 I am switching plans and insurance providers, what do I do?**  
In addition to returning your Retiree Insurance Selection Plan Form, you must also complete a carrier enrollment form for your new carrier selection to be processed. Current Health Net subscribers who wish to enroll in the United Healthcare replacement plan will need to complete the enclosed enrollment form. Forms are also available online at <https://www.sbunified.org/departments/humanresources/benefits> or available in Human Resources.
- 2 I will be turning 65 and become eligible for Medicare, what will I need to do?**  
Upon reaching age 65, you will be eligible to select one of the two Medicare plans through United Healthcare, and Anthem Blue Cross. You must be enrolled in Medicare Part A and B in order to participate in these Medicare plans.
- 3 I am over the age 65, however I am not Medicare eligible, what plans may I elect?**  
The PPO plan (Plan 80 G Group # 40447Y ) offered through Anthem Blue Cross.
- 4 I am the surviving spouse of a retired district employee, will I remain eligible for insurance through SBUSD's group plans?**  
Yes, for surviving spouse.
- 5 If I remarry, am I able to enroll my spouse?**  
New spouses are eligible to be added as long as they are enrolled within thirty (30) days of the qualifying event.
- 6 If I leave a District offered plan and purchase private insurance coverage, am I able to come back to a District plan in the future?**  
Once you terminate and leave the District offered insurance, you will not be able to come back to a District plan in the future.
- 7 If I cancel my District medical coverage, may I keep my dental and vision insurance only?**  
You may not have only dental and vision coverage with the District. You must be enrolled in a District medical plan.





# IMPORTANT INFORMATION

## ANNUAL NOTICES

ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. Santa Barbara Unified School District distributes these notices each year during open enrollment. You may also request a copy by contacting the Human Resources Department, or download a copy at <https://www.sbunified.org/departments/humanresources/benefits>.

- Medicare Part D Notice of Creditable Coverage
- HIPAA Notice of Privacy Practices
- Women's Health and Cancer Rights Act (WHCRA)
- Newborns' and Mothers' Health Protection Act
- Special Enrollment Rights
- Medicaid & Children's Health Insurance Program
- Summary of Benefits and Coverage (SBC)



## PLAN DOCUMENTS

Important documents for our retirement plans available on our benefits website, [www.sbunified.org/benefits](http://www.sbunified.org/benefits) and include:

- **Evidence of Coverage (EOCs):** An Evidence of Coverage, or EOC, is the legal document for describing benefits provided under the plan as well as plan rights and obligations to participants and beneficiaries.
- **Summary of Benefits and Coverage (SBCs):** A Summary of Benefits and Coverage (SBC) is a document required by the Affordable Care Act (ACA) that presents benefit plan features in a standardized format. All plan SBCs are available on our benefits website, <https://www.sbunified.org/departments/humanresources/benefits>

Paper copies of these documents and notices are available upon request. Contact Human Resources at (805) 963-4338, Ext: 6242 or via email at [hrbenefits@sbunified.org](mailto:hrbenefits@sbunified.org).



2211 Michelson Drive, Suite 1200 | Irvine, California 92612  
Telephone: (949) 833-2983 | Fax: (949) 833-9549

Learn more at [www.burnhambenefits.com](http://www.burnhambenefits.com)

This Employee Benefits Guide provides an overview of some of your benefit plan choices. It is for informational purposes only. It is not intended to be an agreement for continued employment. Neither is it a legal plan document. If there is a disagreement between this guide and the plan documents, the plan documents will govern.

In addition, the plans described in this guide are subject to change without notice. Continuation of any benefit plan or coverage is at the company's discretion and in accordance with federal and state laws. If you need additional information or have any questions about the benefit program, please contact the Human Resources Department.

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