

April 28, 2025









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Important Update:

1. **Changes: REQUIRED Surgery Pre-authorization and Coordination with Transcarent**
2. **Transition to Delta Health Systems (DHS) for claims**

New Requirement: Beginning July 1, 2025, members are required to contact Transcarent for all elective surgeries and cancer care coordination. (see below for details)

Effective July 1, 2025, MCSIG is transitioning the claims administration of its medical plan to Delta Health Systems (DHS). This important decision was made by the MCSIG Board to better manage the plan and to redirect members to providers that deliver high-quality care, while achieving cost savings for both members and MCSIG. **You will continue to use the Blue Shield of California PPO network, and your pharmacy benefits will remain with Express Scripts.**

-  There is no cost to members for surgery when coordinated through [Transcarent](#).
-  Continuity of Care will be honored for members currently receiving cancer treatment.
-  Members must verify with [Transcarent](#) that their surgery is eligible for no-cost coverage.
-  **Members who do not use [Transcarent](#) for their eligible services will have their claim denied in full, as required by the plan. To avoid this, members must contact [Transcarent](#) in advance to confirm eligibility and coordinate their care.**
-  Any member receiving authorization for surgery prior to July 1, 2025, will be allowed to continue with their current surgery care plan. All surgeries must be completed by September 30, 2025, to be grandfathered.
-  If a surgery is not eligible through [Transcarent](#), but is a covered benefit under the medical plan, it will be processed under the member's Blue Shield coverage, subject to applicable deductibles, copayments, and coinsurance.

What's Changing – and What's Not

Area	Details
Health Plan Provider	No change – MCSIG remains your health plan provider.
Provider Network	No change – Continue using the Blue Shield PPO network.
Eligibility	No change – MCSIG continues to manage eligibility and enrollment.
Customer Service	No change – MCSIG remains the contact for benefit questions and support.
Pharmacy Benefits	No change – Express Scripts remains your pharmacy benefit provider.
Claims Administration	Change – Starting July 1, 2025, DHS will process medical claims. Members will need to access the DHS website (www.deltahealthsystems.com) to view Explanation of Benefits (EOBs) and benefit information. Members can continue to access EOBs for services through June 30, 2025, via their Blue Shield account.
Surgery & Cancer Care Requirement	New – Members must contact Transcarent at (855) 586-2744 for elective surgery and cancer care. Members must verify with Transcarent that their surgery is eligible.
New ID Cards	You'll receive a new ID card from DHS in mid-June 2025. Use it beginning July 1, 2025.

CompleteCare, Kaiser, & Trio Plans	You are not eligible for Transcarent , so none of this applies to your coverage.
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Key Contact Information

Service Area	Contact	Website
Customer Service & Eligibility	MCSIG: (831) 755-8055 or (800) 287-1442	www.mcsig.com
Explanation of Benefits (after 7/1/25)	Delta Health Systems	www.deltahealthsystems.com
Surgery & Cancer Care Coordination	Transcarent (855) 586-2744	https://experience.transcarent.com/mcsig/
Provider Network	Blue Shield of Ca. PPO (800) 541-6652	www.blueshieldca.com/networkPPO

Frequently Asked Questions

What does the transition to Delta Health Systems mean to me?

DHS is your new Third-Party Administrator and is responsible for claims processing. You must provide a new health care identification card to your medical providers. Your identification card is scheduled for delivery on or around the week of 6/16/2025.

Why is my new Health Care Identification Card and DHS Healthcare ID# important to me?

Very important! The new health care identification card contains important medical group numbers that your providers require for billing. Failure to provide the necessary information to your medical providers for claim submission may result in a delay in the processing of your claim.

Why do I need a new ID card?

The DHS-issued card includes updated claims information. It must be used starting July 1, 2025.

Who do I call if I don't receive my new identification card by July 1, 2025?

Call MCSIG Customer Service at (831) 755-8055 or (800) 287-1442.

Will I still see the same doctors?

Yes. The Blue Shield PPO network remains unchanged.

What's changing for surgery and cancer care?

Beginning July 1, 2025, you must contact [Transcarent](#) at (855) 586-2744 for all elective surgeries and cancer care.

What is an Elective Surgery?

An elective surgery is a non-emergency procedure that is medically necessary but scheduled in advance. These include a wide range of procedures that improve quality of life or treat medical conditions that are not immediately life-threatening. Examples of included elective surgeries may fall under the following categories:

- General Surgery
- Neurological
- Cardiac
- Bariatric
- Orthopedic
- Women's Health
- Vascular
- Spine
- Cancer

To ensure your surgery is eligible for coverage at **no cost through Transcarent**, we strongly recommend calling in advance. **Transcarent** will confirm whether your procedure qualifies under the program.

What is the Cancer Care Program through Transcarent?

Transcarent Cancer Care Program is a dedicated support service for members diagnosed with cancer. It connects members with experienced oncology nurses and care coordinators who help guide them through every step of their treatment journey. This includes:

- Helping members understand their diagnosis and treatment options
- Ensuring access to **high-quality**, in-network cancer care providers
- Assisting with appointment scheduling and referrals
- Providing emotional and logistical support

How do I view EOBs for care received before July 1, 2025?

Members can view their Explanation of Benefits (EOBs) for services prior to July 1, 2025 by logging into their Blue Shield of California account.

How do I view EOBs and benefits information after July 1, 2025?

Members can visit www.deltahealthsystems.com to access Explanation of Benefits (EOBs) and view benefit details.

Will my prescriptions change?

No. Prescription benefits through Express Scripts remain unchanged.

Who handles authorizations?

Blue Shield will continue to manage pre-authorizations for all services outside of Transcarent requirements, and utilization review.

What if my provider can't verify eligibility?

MCSIG continues to manage eligibility. Please have your provider contact MCSIG at (831) 755-8055 or (800) 287-1442 for assistance.

Availability of Summary of Benefits and Coverage (SBC):

As required by the Affordable Care Act, MCSIG provides a Summary of Benefits and Coverage (SBC) to help members understand and compare medical plan benefits. Copies of the SBC are available on the MCSIG website at www.mcsig.com. A paper copy is also available, free of charge, by calling MCSIG Member Services at (831) 755-8055 or (800) 287-1442, or by submitting a written request to:

MCSIG

Attn: Joanne Hilario, Deputy Executive Director
76 Stephanie Dr.
Salinas, CA 93901

We're here to support you every step of the way during this transition. Please don't hesitate to contact us with questions.