



**DISTRICT COUNCIL 16**  
**Northern California Health and Welfare Trust Fund**



**QUICK REFERENCE CHART**

Information Needed	Whom to Contact
<p><b>Trust Fund Office</b></p> <ul style="list-style-type: none"> <li>• Claim Forms (Medical)</li> <li>• Medical Plan Claims and Appeals</li> <li>• Disability Claims and Appeals (<i>effective April 1, 2018</i>)</li> <li>• Eligibility for Coverage</li> <li>• Plan Benefit Information</li> <li>• Summary of Benefits and Coverage</li> <li>• Medicare Part D Notice of Creditable Coverage</li> <li>• COBRA administration including information about COBRA coverage</li> <li>• Cost of COBRA Continuation Coverage</li> <li>• COBRA Premium payments</li> <li>• Second Qualifying Event and Disability Notification during COBRA</li> <li>• Administration of Employee and Retiree Death Benefit</li> <li>• Initial Enrollment in and continued eligibility for the Smart Choices/Healthy Rewards Program</li> </ul>	<p><b>Health Services &amp; Benefit Administrators, Inc. (“HS&amp;BA”)</b>            4160 Dublin Boulevard, Suite 400            Dublin, CA 94568-7756</p> <p>Toll Free Telephone: 1-800-922-9902</p> <p>Fax: 1-925-833-7301</p> <p>E-mail: <a href="mailto:dc16info@hsba.com">dc16info@hsba.com</a></p> <p>Website: <a href="http://www.dc16trustfund.org">www.dc16trustfund.org</a></p> <p>Mail self-payments to:            DC16 H&amp;W Trust Fund            P.O. Box 4816            Hayward, CA 94540</p> <p>If you need a copy of the Smart Choices Enrollment Booklet, please call the Fund Office at the number above or go online at <a href="http://www.dc16trustfund.org">www.dc16trustfund.org</a> and select “Forms &amp; Notices” to download a copy of the Booklet.</p>
<p><b><u>Utilization Review for Inpatient Hospitalizations, and PPO Network for the Medical Plan</u></b></p> <p><b>(for Active Employees, Retirees who are not eligible for Medicare and eligible Dependents enrolled in the Blue Cross Network (PPO) or the Blue Cross Advantage Network (APPO))</b></p> <ul style="list-style-type: none"> <li>• Provides prior authorization for <u>inpatient Hospital admissions</u> (except routine childbirth or emergency) for eligible Participants</li> <li>• Additions/Deletions of Network Providers (Always check with the Network before you visit a provider to be sure they are still contracted and will give you the discounted price)</li> <li>• Compare the costs charged by different Anthem Blue Cross Network providers at <a href="http://www.anthem.com/ca">www.anthem.com/ca</a></li> </ul> <p><b>This PPO network is not available to Medicare eligible Retirees or their Dependents that are eligible for Medicare.</b></p>	<p><b>Anthem Blue Cross</b>            21555 Oxnard Street            Woodland Hills, CA 91367            1-800-274-7767</p> <p>For help finding network providers (PPO Physician, specialist, hospital or other Health Care Practitioner), see <a href="http://www.anthem.com/ca">www.anthem.com/ca</a> (or call the Trust Fund Office). Be sure to choose “Large Group Plan” under “plan type” and Blue Cross PPO (Prudent Buyer)” under “select a plan.</p> <p><b>CAUTION:</b> Use of a <b>non-PPO</b> network hospital, facility or Health Care Practitioner could result in you having to pay a substantial balance on the provider’s billing (see definition of “Balance Billing” in the Definition chapter of this document).</p>

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Information Needed	Whom to Contact
<p><b>Medical Plan Networks</b></p> <ul style="list-style-type: none"> <li>• Medical Network Provider Directory</li> <li>• Additions/Deletions of Network Providers</li> </ul> <p><b>Blue Card</b> (for indemnity medical Plan Participants outside of California)</p> <ul style="list-style-type: none"> <li>• Help finding contracted Blue Card providers</li> <li>• Preauthorization for hospital admissions or surgery</li> </ul>	<p><b>Anthem Blue Cross</b></p> <p>1-800-810-2583</p> <p>Web Site: <a href="http://www.bluecares.com">www.bluecares.com</a></p> <p>Use the following directions:</p> <p>There are certain states/geographic areas where selecting a “PPO” provider is not an option. If that occurs, please choose “Traditional” and follow the prompts. Although “Traditional” providers do not participate in a Blue Card network, they have agreed to perform services at special discounted rates for Blue Card members. You should go to a “Traditional” provider <u>only</u> if there are no Blue Card <b>PPO</b> providers in your area.</p>
<ul style="list-style-type: none"> <li>• To access Anthem’s <b><u>Advantage Provider Network:</u></b></li> </ul>	<ol style="list-style-type: none"> <li>1. Log in to <a href="http://anthem.com">anthem.com</a> (Note: If you log in as a member, your personal information will be shown including physicians and facilities within your chosen network).</li> <li>2. If you do not have your user information or log in as a member on the <a href="http://anthem.com">anthem.com</a> homepage, go to <i>Useful Tools</i> on the right, and select <b>Find a Doctor</b>.</li> <li>3. Under Search as a Guest, click on <b>Search by selecting a plan/network</b>.</li> <li>4. In the <b>Find a Doctor</b> section, click on your preferred choices (type of doctor, state and select plan/network, which is <b>Advantage PPO</b>).</li> <li>5. Advantage PPO will be shown under the heading <b>Medical (Employer-Sponsored)</b> and listed as <b>Advantage PPO</b> (Note: You will have to scroll down through many network options).</li> <li>6. When you are within the <b>Advantage PPO</b> area you will be asked for various categories (doctor, hospital, physician name etc.) so enter those tabs accordingly, add your location and press search.</li> </ol> <p>Either a list of providers will populate on the screen for you to choose from or your specific choice will be shown as in or out of the network.</p>
<ul style="list-style-type: none"> <li>• To access Anthem’s <b><u>Prudent Buyer Provider Network:</u></b></li> </ul>	<ol style="list-style-type: none"> <li>1. Log in to <a href="http://anthem.com">anthem.com</a> (Note: If you log in as a member, your personal information will be shown including physicians and facilities within your chosen network).</li> <li>2. If you do not have your user information or log in as a member on the <a href="http://anthem.com">anthem.com</a> homepage, go to <i>Useful Tools</i> on the right, and select <b>Find a Doctor</b>.</li> <li>3. Under Search as a Guest, click on <b>Search by selecting a plan/network</b>.</li> <li>4. In the <b>Find a Doctor</b> section, click on your preferred choices (type of doctor, state and select plan/network, which is <b>Blue Cross PPO (Prudent Buyer) – Large Group</b>).</li> <li>5. Advantage PPO will be shown under the heading <b>Medical (Employer-Sponsored)</b> and listed as <b>Blue Cross PPO (Prudent Buyer) – Large Group</b> (Note: You will have to scroll down through many network options).</li> <li>6. When you are within the <b>Blue Cross PPO (Prudent Buyer) – Large Group</b> area you will be asked for various categories (doctor, hospital, physician name etc.) so enter those tabs accordingly, add your location and press search.</li> </ol> <p>Either a list of providers will populate on the screen for you to choose from or your specific choice will be shown as in or out of the network.</p>

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<p><b>Care Counseling Service and Utilization Review for certain <u>Outpatient Procedures</u></b></p> <ul style="list-style-type: none"> <li>• Outpatient Utilization Review for <u>non-emergency care outside of your Physician's office</u>;</li> <li>• Channeling of participants to the most cost effective provider;</li> <li>• Patient advocate services (Care Counseling);</li> <li>• Information about the costs for your treatment plan;</li> <li>• Answer any questions you may have about your illness or injury; and</li> <li>• Smart Choices/Healthy Rewards Health Risk Questionnaire for Participants in the Advantage (APPO) Plan</li> </ul>	<p><b>MedExpert</b></p> <p>Toll Free: 1-800-999-1999 7:00 AM to 7:00 P.M. (PST)</p> <p>Health Risk Questionnaire: <a href="https://smartchoice.medexpertthehealth.com/">https://smartchoice.medexpertthehealth.com/</a></p>
<p><b>Smart Choices/Healthy Rewards-Program Biometric Testing</b></p> <ul style="list-style-type: none"> <li>• Blueprint for Wellness biometric screenings for Active Participants in the Indemnity PPO Plan.</li> <li>• Physician Result Form.</li> </ul>	<p><b>Quest Diagnostics Patient Service Center (PSC)</b></p> <p>Toll Free: 1-866-908-9440 Monday-Friday 7:00 AM to 8:30 P.M. (CST) Saturday 7:30AM to 4:00 PM (CST) Web Site: <a href="http://www.My.BlueprintForWellness.com">www.My.BlueprintForWellness.com</a></p> <p><b>Note:</b> When you go online to the Quest Diagnostics Blueprint for Wellness scheduling tool, you will need to enter the registration key: DC16. Your Unique ID # is your last name plus the last four digits of your Social Security Number (for example, johnson1234). Your Spouse's/Domestic Partner's Unique ID is your last name + last four digits of your Social Security Number + an "S" (for example, johnson1234S). Then follow the steps to register and schedule your screening at a nearby Quest Diagnostics PSC. Be sure to print your confirmation page when you are finished and take it with you to your appointment.</p>
<p><b>Prescription Drug Plan</b> <b>(for Active/Retired Participants and eligible Dependents enrolled in the Blue Cross Network (PPO) or the Blue Cross Advantage Network (APPO))</b></p> <ul style="list-style-type: none"> <li>• ID Cards</li> <li>• Retail Network Pharmacies</li> <li>• Mail Order (Home Delivery) Pharmacy</li> <li>• Prescription Drug Information</li> <li>• Formulary of Preferred Drugs (custom formulary is not applicable to Medicare Retirees)</li> <li>• Compare your costs for formulary vs. non-formulary drugs</li> <li>• Specialty Drug Program: Prior authorization and Ordering</li> </ul>	<p><b>WellDyne Rx</b></p> <p>PO Box 4517 Englewood, Colorado 80155-4517</p> <p>Toll Free: 1-888-479-2000, option 5 <a href="http://www.welldyneRx.com">www.welldyneRx.com</a></p> <ul style="list-style-type: none"> <li>• Find a formulary list at <a href="http://www.welldyneRx.com">www.welldyneRx.com</a> or request a copy at 1-888-479-2000, option 5</li> <li>• To request an exception for a medication that is not on the formulary list, you or your Physician should call WellDyne Rx.</li> </ul>
<p><b>Mental Health and Chemical Dependency Benefits</b> <b>(for Active/Retired participants and eligible Dependents enrolled in the Blue Cross Network (PPO), Blue Cross Advantage Network (APPO); and also for Active participants and eligible dependents enrolled in the Kaiser (HMO) and the Kaiser/Smart Choices (HMO))</b></p> <ul style="list-style-type: none"> <li>• Referrals and prior authorization</li> <li>• Mental Health and Chemical Dependence Providers</li> <li>• Behavioral Health Claims and Appeals</li> </ul>	<p><b>Beat It!</b></p> <p>P.O. Box 20896 San Jose, CA 95160</p> <p>Toll Free: 1-800-828-3939</p> <p>This program provides benefits for the Blue Cross Network (PPO), Blue Cross Advantage Network (APPO), the Kaiser (HMO) and the Kaiser/Smart Choices (HMO) (and their Dependents). However, if you and/or your family are in Kaiser, you also have the option of using your HMO benefits.</p>

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Information Needed	Whom to Contact
<p><b>HMO Medical Plan</b>  <b>(for Active/Retired participants and eligible Dependents who live in the Kaiser service area and are enrolled in the Kaiser (HMO) or the Kaiser/Smart Choices (HMO))</b></p> <ul style="list-style-type: none"> <li>• ID Cards</li> <li>• Retail Network Pharmacies</li> <li>• Mail Order (Home Delivery) Pharmacy</li> <li>• Prescription Drug Information</li> <li>• Referrals and prior authorizations</li> <li>• Mental Health and Chemical Dependence Providers</li> <li>• Claims and Appeals</li> <li>• Smart Choices/Healthy Rewards Program Educational Requirements for Kaiser Participants</li> </ul>	<p><b>Kaiser Permanente (Group #602697)</b>                      Northern California Region                      1950 Franklin Street                      Oakland, CA 94612</p> <p>Toll Free: 1-800-464-4000</p> <p>Web Site: <a href="http://www.kp.org">www.kp.org</a></p> <p>Smart Choices/Healthy Rewards Educational Requirements:  <a href="http://www.kp.org/healthylifestyles">www.kp.org/healthylifestyles</a></p>
<p><b>Indemnity Dental Plan</b>  <b>(for all Active and Retired Employees and eligible Dependents not enrolled in a Prepaid Dental Plan)</b></p> <ul style="list-style-type: none"> <li>• Dental Network Provider Directory</li> <li>• Dental Claims and Appeals</li> <li>• Prior authorization for dental services</li> </ul>	<p><b>Delta Dental (Group # 0308)</b>                      P.O. Box 7736                      San Francisco, CA 94120                      Toll Free: 1-800-765-6003</p> <p>Web Site: <a href="http://www.deltadentalins.org">www.deltadentalins.org</a></p> <p><b>Important note to Retirees:</b> Retirees who elect to enroll in a dental Plan must pay the full cost of the coverage.</p>
<p><b>Fully Insured Prepaid Dental Plan #1 for California residents only</b>  <b>(for all Active and Retired Employees and eligible Dependents not enrolled in the indemnity dental plan)</b></p> <ul style="list-style-type: none"> <li>• Dental Network Provider Directory</li> <li>• Dental Claims and Appeals</li> <li>• Prior authorization for dental services</li> </ul>	<p><b>DeltaCare USA (Group #6123)</b>                      Department 64936                      El Monte, CA 91735                      Toll Free: 1- 800-422-4234                      Web Site: <a href="http://www.deltadentalins.com">www.deltadentalins.com</a></p> <p><b>Important note to Retirees:</b> Retirees who elect to enroll in a dental Plan must pay the full cost of the coverage.</p>
<p><b>Fully Insured Prepaid Dental Plan #2</b>  <b>(for all Active and Retired Employees and eligible Dependents not enrolled in the indemnity dental plan)</b></p> <ul style="list-style-type: none"> <li>• Dental Network Provider Directory</li> <li>• Dental Claims and Appeals</li> <li>• Prior authorization for dental services</li> </ul>	<p><b>UHC Dental (Group # 712019)</b>                      Toll Free: 1- 877-816-3596                      Web Site: <a href="http://www.myuhcdental.com">www.myuhcdental.com</a></p> <p><b>Important note to Retirees:</b> Retirees who elect to enroll in a dental Plan must pay the full cost of the coverage.</p>
<p><b>Vision Plan</b>  <b>(for all Active and Retired Employees and their eligible Dependents)</b></p> <ul style="list-style-type: none"> <li>• Vision Network and Provider Directory</li> <li>• Vision Claims and Appeals</li> </ul>	<p><b>Vision Service Plan (VSP)</b>                      3333 Quality Drive                      Rancho Cordova, CA 95670                      Toll Free: 1- 800-877-7195                      Web Site: <a href="http://www.vsp.com">www.vsp.com</a></p> <p>To file a Non-PPO Claim for reimbursement, send it to the following address:                      Vision Service Plan (VSP)                      Attn: Out-of-Network Provider Claims                      P.O. Box 997105                      Sacramento, CA 95899-7105</p>

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Information Needed	Whom to Contact
<p><b>HIPAA Privacy Officer and HIPAA Security Officer</b></p> <ul style="list-style-type: none"><li>• HIPAA Notice of Privacy Practice</li></ul>	<p><b>The Privacy Officer</b> Phone: 1-800-922-9902 Fax: 1-925-833-7301</p> <p>Health Services &amp; Benefit Administrators, Inc. 4160 Dublin Boulevard, Suite 400 Dublin, CA 94568-7756</p>
<p><b>Civil Rights Coordinator</b></p> <ul style="list-style-type: none"><li>• Notice of Nondiscrimination</li><li>• File a Grievance</li></ul>	<p><b>Coleen Christophersen Civil Rights Coordinator</b></p> <p>Toll Free: 1-800-922-9902 Fax: 1-925-833-7301 E-mail: <a href="mailto:dc16info@hsba.com">dc16info@hsba.com</a></p> <p>Health Services &amp; Benefit Administrators, Inc. 4160 Dublin Boulevard, Suite 400 Dublin, CA 94568-7756</p>

