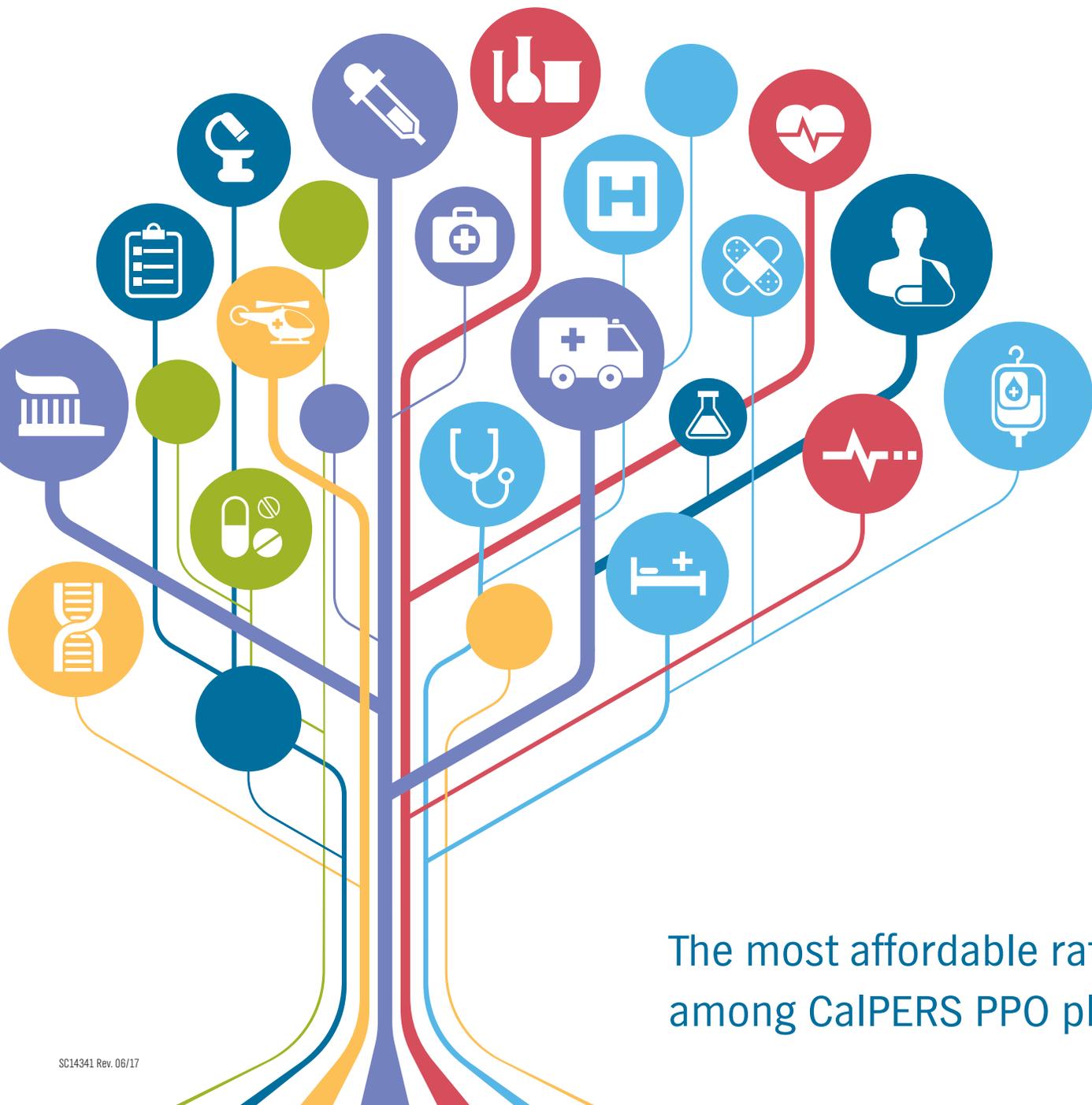


PERS Select

2018 Freedom to Select

Benefit guide



The most affordable rates
among CalPERS PPO plans



Welcome

PERS Select offers a unique plan design and access to an exclusive and efficient physician network; this combination provides our members with access to quality, affordable health care.



How does the PERS Select health plan work?

Anthem Blue Cross (Anthem) has contracted with a network of doctors, hospitals and other health care professionals to offer health care services to those covered under the **PERS Select** plan.

Anthem selects doctors to be part of the **PERS Select PPO** plan who demonstrate efficient practice patterns and achieve cost savings. Doctor practice patterns are reviewed using broadly accepted quality measurement standards to ensure that doctors who are part of the **PERS Select PPO** plan offer quality care. The high-efficiency network will give members access to high-quality, cost-effective doctors at a lower premium. **The 2018 premium is lower than PERS Choice.** The network of doctors consists of primary care physicians, including family practice, internal medicine, pediatrics, general practice or obstetrics/gynecology, and specialists. In addition, the **PERS Select** hospital network is designed for members to achieve more out-of-pocket savings by selecting Tier One facilities for routine services.

PERS Select is available in all 58 California counties. A **PERS Select Supplement to Original Medicare** plan is also available.



What is the PERS Select hospital network?

PERS Select combines the financial value of efficient care with the freedom of choice associated with a PPO plan design. The network features only cost-efficient doctors and hospitals, resulting in substantial savings for you.

To help address the differences in PPO hospital-billed charges and to steer you to less-costly hospitals, Anthem uses a three-tier inpatient and outpatient hospital benefit for the **PERS Select** plan. Anthem has identified a large number of hospitals from its PPO network that have lower negotiated hospital reimbursement rates. This part of the Anthem acute care hospital network constitutes the Tier One network. The remaining Anthem PPO hospitals constitute Tier Two. Hospital organizations that decline to participate in the PPO Select hospital network design and out-of-network hospitals constitute Tier Three.



What is the PERS Select hospital network benefit tier design?

For Tier One hospital non-emergency inpatient services, your PPO percentage of the cost is staying at 20%. If you use Tier Two hospitals, the PPO coinsurance is 30%. The elective use of out-of-network hospitals will remain at 40% coinsurance with no maximum out-of-pocket plan provision application. For more information, please visit anthem.com/ca/CalPERS.



What is the Value-Based Purchasing Design program?

The Value-Based Purchasing Design program can help you save money on care and, at the same time, give you access to quality care.

Here's how it works. If you need a procedure such as knee surgery (arthroscopy) or a colonoscopy, you can pay less by going to an ambulatory surgery center (ASC) rather than a hospital.

According to a National Survey of Ambulatory Surgery, hospitals may charge up to three times more for the same procedure performed at a surgery center.

CalPERS and Anthem have designated more than 50 facilities in California where hip and knee joint replacement surgeries can be performed. As a **PERS Select** plan member, you have the option to choose any facility. When you use a surgery center that's part of the Value-Based Purchasing Design program, you'll have little to no out-of-pocket costs above the plan's deductible and your percentage of the cost.

Other procedures that are part of the program include gall bladder removal, sigmoidoscopy, hernia repair and nasal or sinus corrective surgery. For more information, see your *Evidence of Coverage* booklet. You can also call Customer Service at the number on your ID card to verify that a surgery center is part of the Value-Based Purchasing Design program.

CalPERS 2018 Health Premiums – State Only

Basic Premium Rates	Single	2-Party	Family
PERS Select	\$661.29	\$1,322.58	\$1,719.35

CalPERS 2018 Health Premiums – Regional Contracting Agencies Only

Basic Premium Rates	Single	2-Party	Family
Bay Area Alameda, Amador, Contra Costa, Marin, Napa, Nevada, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma, Sutter and Yuba			
PERS Select	\$717.50	\$1,435.00	\$1,865.50
Sacramento El Dorado, Placer, Sacramento and Yolo			
PERS Select	\$684.90	\$1,369.80	\$1,780.74
Los Angeles Area Los Angeles, San Bernardino and Ventura			
PERS Select	\$573.21	\$1,146.42	\$1,490.35
Other Southern California Fresno, Imperial, Inyo, Kern, Kings, Madera, Riverside, Orange, San Diego, San Luis Obispo, Santa Barbara and Tulare			
PERS Select	\$654.74	\$1,309.48	\$1,702.32
Other Northern California Alpine, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Plumas, San Benito, Shasta, Sierra, Siskiyou, Stanislaus, Tehama, Trinity and Tuolumne			
PERS Select	\$691.78	\$1,383.56	\$1,798.63
Out of State			
PERS Select	NOT AVAILABLE		

For more information, please call us at: **1-877-PERSPPPO (1-877-737-7776)**

2018 PERS Select Basic Plan Benefit Summary

Deductibles/Maximum Benefits:	PERS Select
Calendar-year Deductible	
Individual	\$500
Family	\$1,000

Hospital Inpatient and Outpatient Services	Tier One Hospitals	Tier Two Hospitals	Non-PPO Hospitals
Hospital – Inpatient and Outpatient	20%	30%	40%

Medical Services	PERS Select Physician Network	Non-PERS Select Physician Network
Maximum Calendar-year Copay and Coinsurance (Combined with hospital maximum calendar year coinsurance)¹		
Individual	\$3,000	None
Family	\$6,000	None
Doctor Inpatient Hospital Visit	20%	40%
Doctor Office Visits and Urgent Care Visits	\$20 copay ²	40%
Preventive Care (Immunizations and periodic health exams)	No charge ²	40%
Other Doctor Services	20%	40%
Diagnostic X-ray and Laboratory	20%	40%
Hearing Aid Services (Benefits are limited to a maximum payment of \$1,000 per Member once every 36 months)	20%	40%
Ambulance Services	20%	20%
Emergency Services (\$50 deductible per visit for covered ER charges)	20%	20%
Chiropractic/Acupuncture Services (20 combined visits per calendar year)	\$15 copay ²	40%
Speech Therapy	20% ³	40%
Durable Medical Equipment (Precertification required)	20%	40%
Hospice Care	20%	20%
Physical Therapy	20%	40%
Occupational Therapy	20%	20%

Note: Other than physicians (M.D. and D.O.), hospitals, and the Hip and Knee Joint Replacement Network, PERS Select uses the same network of participating doctors available with PERS Choice and PERSCare.

PERS Select

Medical Benefits (Continued)	PERS Select Physician Network	Non-PERS Select Physician Network
Mental Health (Includes mental health parity provisions) Inpatient (precertification required)	20%	40%
Outpatient (precertification required at first visit – for facility-based care)	20%	40%
Substance Abuse		
Inpatient (precertification required)	20%	40%
Outpatient (precertification required at first visit – for facility-based care)	20%	40%
Home Health Care (precertification required)	20%	40%
Skilled Nursing Facility (precertification required)		
First 10 days	20% ³	40%
Next 90 days	30% ³	40%
Hip and knee joint replacement surgery	20% ⁴	40%

Note: PERS Select uses part of the Anthem PPO physician network available under PERS Choice. About half of the Anthem physician network participates in the smaller Select network. A PERS Select member should check to see if a doctor is participating in the PERS Select network before services are provided. If non-emergency physician services are provided by a non-PERS Select doctor, even a doctor who participates in the regular Anthem PPO network, the member will be responsible for paying more.

Prescription Drug Benefits	Generic	Preferred Brand	Nonpreferred Brand
Retail Pharmacy (short-term use)	\$5	\$20	\$50 (\$40 if partial copay waiver is approved)
OptumRx [®] Select90 Saver for OptumRx home delivery or Walgreens [®] pharmacies* (up to a 90-day supply of maintenance medications, which are taken longer than 60 days to treat a chronic condition) <small>*A \$1,000 maximum copay per person per calendar year applies (only includes generic and preferred brands).</small>	\$10	\$40	\$100 (\$70 if partial copay waiver is approved)
"Member Pays the Difference" Brand-name medications that have generic equivalents	Difference in cost of the brand-name drug and generic drug + applicable copay		
50% coinsurance for erectile or sexual dysfunction drugs applies to both retail and mail order (refer to EOC for details)			

Please refer to the plan's *Evidence of Coverage* booklet for the exact terms and conditions of coverage. Deductibles and copays will not carry over from one plan to the other.

- Covered expense (copays/coinsurance) for hospital services provided by a Tier One or Tier Two maximum calendar-year copay amounts. The Maximum Calendar-year copays for hospital services and physician services will be combined.
- Services received from a PERS Select doctor are not subject to the calendar-year deductible.
- PPO and out-of-area doctors.
- Hip and knee joint replacement surgery provided by a Non-Value-Based Purchasing Center. The **allowable** amount will be limited to \$30,000 per procedure. Members will be responsible for the difference.

Note:

- Cardiac and pulmonary rehab precertification is not required.
- Reimbursement for non-PERS Select professional charges will be at 60% of the Anthem Prudent Buyer fee schedule.
- Services received from a doctor who is in the Anthem PPO network, but is not in the PERS Select subset network, will be considered out of network.
- This is only a summary of benefits offered by PERS Select. Please refer to the *Evidence of Coverage* booklet for more information.



May I choose my own doctor?

Yes, you have the freedom to access any licensed doctor in the **PERS Select** plan. This plan includes about 39,000 primary care and specialist doctors and 370 hospitals. Doctors who aren't part of the **PERS Select** plan, including doctors in the Anthem PPO network, can bill whatever charges they wish. You're responsible for paying the difference between their fees and Anthem's payment. You'll pay more if you go to a doctor who is not part of the **PERS Select** plan. It's easy to keep your costs to a minimum; simply choose a quality doctor in the **PERS Select** plan.

A member should check to see if a doctor is part of the **PERS Select** plan before getting care by visiting anthem.com/ca/CalPERS. Select **Find a Doctor, Hospital or Urgent Care** and choose **Search using Anthem Blue Cross PPO (PERS Select Providers)**.

You can get help finding a doctor by calling Anthem Customer Service at **1-877-737-7776**. If that doctor is not a part of your plan, you'll be responsible for paying more as the doctor will be considered outside of the plan.

Important reminder: A doctor may be part of the Anthem PPO network, available with PERS Choice and PERSCare, but may not be part of the PERS Select plan.



Will I have to always fill out a claim form?

No, you don't have to fill out a claim form when you visit a doctor who is part of the **PERS Select** plan.



Can I get health information around the clock?

Yes, the **PERS Select** plan offers a 24-hour service called 24/7 NurseLine that connects you to a registered nurse by calling **1-800-700-9185**. This number is also on your member ID card. 24/7 NurseLine provides you with a medical professional's insight and guidance to help you make decisions about your health care. Members can also take advantage of the audio library, which contains hundreds of recordings that provide information on self- and preventive care, as well as other health-related issues.



Anthem Care Comparison helps you save money on your care

Anthem Care Comparison is an online tool that lets you compare the cost of more than 120 common medical procedures from doctors and facilities.

Different health care facilities can charge different prices for the same service. That's a big deal if you're sharing the cost. Anthem Care Comparison clearly lists what those price ranges are — right down to the procedure and facility.



Will I have access to health care services nationwide?

Yes. **PERS Select** gives you access to the BlueCard® program, which lets you to see Blue Cross and Blue Shield PPO doctors nationwide. With BlueCard, no matter where you travel, you have access to the largest health care networks in the country. More than 96% of hospitals and 93% of doctors contract with Blue Cross and/or Blue Shield across the country.¹ You'll save money and have no claim forms to complete when you see doctors who are part of the BlueCard program. What's more, BlueCard Worldwide® gives you access to participating hospitals in certain countries around the world.



How can I be sure I'll have coverage when I need it?

PERS Select helps pay for a wide range of benefits, including periodic health exams, emergency care, well-baby care, chiropractic services and home health care. This coverage follows you statewide, nationwide and worldwide. Please refer to the plan's *Evidence of Coverage* booklet for more information.



What are the prescription drug benefits?

With **PERS Select**, you pay \$5 for up to a one-month supply of generic drugs, \$20 for preferred brand-name drugs, and \$50 for nonpreferred brand-name drugs when using an OptumRx participating retail pharmacy.

When you use home delivery by OptumRx or a Walgreens retail pharmacy, you can receive up to a 90-day supply of maintenance medications and pay \$10 for generic drugs, \$40 for preferred brand-name drugs, and \$100 for nonpreferred brand-name drugs.

Maintenance medications are drugs that your doctor prescribes to treat a long-term condition or a chronic condition, such as asthma, diabetes or high blood pressure. This includes medications that usually don't need a lot of changes in the dosage. Drugs classified as specialty, even if taken long term, are not considered maintenance.



Why should I use OptumRx home delivery for maintenance medications?

OptumRx home delivery pharmacy service is safe, convenient and ensures privacy. Every prescription is inspected for safety by a registered pharmacist and delivered to your home or a location of your choice in confidential, tamper-proof, and, when applicable, temperature-sensitive packaging.

Pharmacists are available 24/7 to answer questions about your medication. They are familiar with your plan, so they may also suggest options that could save you money.

If you need more information regarding home delivery for maintenance medications, please call OptumRx toll free at **1-855-505-8110**, or visit optumrx.com/CalPERS.



What is the OptumRx Step Therapy Program?

The OptumRx Step Therapy Program helps you and your doctor choose a lower-cost medication as the first step in treating your health condition.²

Just because a medication costs more doesn't mean it works better. Some health conditions have many treatment options that vary in cost. Step therapy helps make sure the medications that are effective and priced right are used first.² Remember, lower cost does not mean lower quality.



Visit with a doctor or therapist from the comfort of home

If you're feeling under the weather, have a video visit 24/7 with a board-certified doctor in minutes using **LiveHealth Online**. All you need is a smartphone, tablet or computer with a webcam. You can visit with a doctor if you have the flu, pinkeye, a sinus infection, a cold, the flu or other health problems. Online visits with a doctor using LiveHealth Online are a covered benefit and are \$15 per visit with the **PERS Select PPO** plan.

Feeling anxious or having trouble coping on your own?

You can make an appointment with a therapist by calling **1-844-784-8409** and have a video visit in four days or less.³ Appointments are available seven days a week and usually cost about the same as an office therapy visit.

Get started today by going to livehealthonline.com or downloading the free app and registering.

Online counseling is not appropriate for all kinds of problems. If you are in crisis or have suicidal thoughts, it's important that you seek help immediately. Please call 1-800-784-2433 (National Suicide Prevention Lifeline) or 911 and ask for help. If your issue is an emergency, call 911 or go to your nearest emergency room. LiveHealth Online does not offer emergency services.



Where can I get more information about my coverage?

Once you're enrolled and have a member ID card, you can use anthem.com/ca/CalPERS to verify family enrollment, review your benefits, check your claims, get additional member ID cards, find a **PERS Select** doctor and communicate with the CalPERS dedicated Anthem Customer Service staff. You may also call us toll free at **1-877-PERSPPPO (1-877-737-7776)**.

For information about your pharmacy benefits, call **OptumRx** toll free at **1-855-505-8110** or log on to optumrx.com/CalPERS.



Improve your health and earn a reward

You have access to tools and resources that can help you live a healthier lifestyle — at no extra cost.

Any CalPERS member enrolled in the **PERS Select** program on January 1, 2018, who completes the online Health Risk Assessment will be provided a \$100 debit card. The debit card is spent like cash and can be used at any location that accepts debit cards. The debit card will be limited to one per family

1 Blue Cross and Blue Shield Association website: *The Blue Cross and Blue Shield System* (accessed June 2017): bcbs.com/about-us/blue-cross-blue-shield-system.

2 Lower-cost options are generally generic medicines.

3. Appointment is subject to availability of a psychologist or therapist.



PERS Select offers a combination that's hard to beat — the freedom to select your own doctor and coverage that will be there when you need it.



Manage your benefits online — and on the go

As an Anthem member, you can register at [anthem.com/ca/CalPERS](https://www.anthem.com/ca/CalPERS) and download the Anthem Anywhere app. You can use our website and app to access your ID card and find urgent care facilities.



For more information, please call us at:
1-877-PERSPPO (1-877-737-7776)



Or reach us at: [anthem.com/ca/CalPERS](https://www.anthem.com/ca/CalPERS). We offer you:

- Superior customer service
- Hassle-free access to quality doctors and specialists
- Nationwide coverage
- Online services

For more information about your pharmacy benefits, please call OptumRx toll free at **1-855-505-8110**, or visit [optumrx.com/CalPERS](https://www.optumrx.com/CalPERS).

PERS *Select*

LiveHealth Online is the trade name of Health Management Corporation, a separate company providing telehealth services on behalf of Anthem Blue Cross.

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