

## **Dignity Health Medical Plans – Central Coast 2018 Medical Plan Administrative Changes Frequently Asked Questions**

Dignity Health has selected a new medical and dental plans administrator for 2018. While the medical/dental plan provisions and the provider networks for the plans shown below, remain unchanged, effective January 1, 2018, Benefit & Risk Management Services, Inc. (BRMS), will replace Health Services of the Pacific Central Coast (HSPCC) and Managed Care Systems (MCS) as the administrators of these Dignity Health medical and dental plans.

- Dignity Health Central Coast EPO
- Dignity Health Central Coast EPO 2
- Dignity Health Central Coast EPO 2 R
- Dignity Health Central Coast Dental

Dignity Health is working very closely with BRMS and HSPCC/MCS to ensure a smooth transition of medical plan members on January 1, 2018.

Plan provisions, including covered services and out-of-pocket costs will not change. However, we're sharing the following frequently asked questions to help you understand how the change from HSPCC/MCS to BRMS will affect you and your covered dependents.

### **Plan Overview**

- 1. Q. Will the Dignity Health Central Coast EPO, Dignity Health Central Coast EPO 2, Dignity Health Central Coast EPO 2 R and the Dignity Health Central Coast Dental plans maintain their current names?**
  - A. Yes. The medical and dental plan names will not change.

### **Provider Networks/Plan Provisions**

- 2. Q. Will the medical or dental plan network providers change?**
  - A. No. The provider networks for the Dignity Health Central Coast EPO and Dignity Health Central Coast Dental plans will remain the same. If you need to locate a network provider and are currently enrolled in one of the Dignity Health Central Coast plans, you may continue to access the provider network PDFs. If you currently waive medical or dental coverage and are interested in looking at the network providers, beginning October 23, 2017, you can use the BRMS website at [www.brmsonline.com/dignityhealth](http://www.brmsonline.com/dignityhealth).

Note: The Anthem PPO Network will replace the Avante Behavioral Health Network. If you currently see a behavioral health provider, you can call BRMS at 1.866.755.6974 to confirm your current provider is in the Anthem PPO Network.

**3. Q. I have been enrolled in the Dignity Health Central Coast EPO for years and see my PCP regularly. Do I need to designate a PCP during Open Enrollment, or will that information be provided to BRMS by HSPCC/MCS?**

- A. If you are already enrolled in the Dignity Health Central Coast EPO, your PCP information will be provided to BRMS by HSPCC/MSC, so no PCP designation is needed during Open Enrollment. If you want to change your PCP prior to 2018, contact HSPCC/MCS at the number on the back of your Dignity Health Central Coast EPO medical plan ID card.

If you are enrolling in the Dignity Health Central Coast EPO for the 1<sup>st</sup> time, you will need to designate a PCP during Open Enrollment, through the Dignity Health Total Rewards Portal.

Beginning January 1, 2018 you should contact BRMS at 1.866.755.6974 if you want to make a change to your PCP.

**4. Q. Will any of the medical plan provisions change, like copayments or coverage?**

- A. There are no changes to covered services and out-of-pocket costs.

**5. Q. How do I get a detailed list of services that are covered under the plans?**

- A. You can access the Facility Specific Benefits Information (FSBI) document on the Dignity Health Total Rewards Portal. If you have questions about covered services in 2017, you may contact HSPCC/MCS at the number on the back of your Dignity Health Central Coast EPO medical plan ID card. For any questions related to your 2018 medical plans and how services are covered, contact BRMS at 1.866.755.6974.

**Prescription Drug Program**

**6. Q. Will the Prescription Drug Program change in 2018?**

- A. No. BRMS partners with Express Scripts (ESI), Inc., just as Dignity Health does, so you will see no changes in your copayments and out-of-pocket maximums as a result of the administrator change to BRMS.

**7. Q. What if I am currently taking a medication that requires Prior Authorization (PA), will I have to start over and get a new PA?**

- A. Dignity Health is working with ESI and BRMS to ensure a smooth transition. ESI will have all of your medication, PA and program compliance history. If you are prescribed a new medication after January 1, 2018 that requires PA, you will need to have your provider's office contact ESI after January 1, 2018 to generate an authorization.

**8. Q. How do I transfer my open mail order refills from HSPCC/MCS to BRMS?**

- A. Since ESI will continue to manage the Prescription Drug Program, your prescriptions will be in ESI's system and no transfer is required. However, should your current medication no longer have any remaining refills, a PA has expired, or your doctor prescribes a new medication that you want filled through Mail Order, you will need to contact ESI after January 1, 2018.

**Other Important Information**

**9. Q. Will I get a new medical plan identification (ID) card?**

- A. Yes. BRMS will issue a new medical plan ID card effective January 1, 2018. As a covered employee, you will receive a new ID card and additional ID cards for your covered dependents (if applicable). Your new medical plan ID card will provide you with your new member ID number, plan name, group information, and important phone numbers to access BRMS's Member Services, 24/7 NurseLine, and Pre-Authorization line. Show your new ID card to your doctor's office, pharmacy and any other health care providers during your first visit in 2018 so they can update their records.

Beginning January 1, 2018, you will have access to your ID card at all times from your mobile device by downloading the BRMS Mobile app. For information on the Mobile app, or to print a copy of your ID card or to request additional ID cards, log on to [www.brmsonline.com/dignityhealth](http://www.brmsonline.com/dignityhealth). During Open Enrollment, please ensure that Dignity Health has your current home address on file, so your new ID card can be delivered to you on time.

**10. Q. Will I get a new dental plan identification (ID) card because of this change?**

- A. Yes. If you are a Dignity Health Central Coast Dental plan member for 2018, you will receive a dental plan ID card issued by BRMS.

**11. Q. I cover my husband and children under the Dignity Health Central Coast EPO plan and in the past have had to let HSPCC/MCS know if they are covered under any other medical plan. Will I be required to provide that same information to BRMS?**

- A. Yes. The medical plan requires that employees, who enroll dependents under the medical plan, provide information to let the plan administer know if the dependents are enrolled under other medical plans. To provide other coverage information for your dependents, log on to [www.brmsonline.com/dignityhealth](http://www.brmsonline.com/dignityhealth) beginning January 1, 2018. If you do not let BRMS know whether or not your dependents have other coverage, any claims received for your dependents may be delayed. If you have questions about providing other coverage information, call BRMS at 1.866.755.6974.

- 12. Q. Does BRMS have a website and if so, what information will my covered dependents and I have access to it?**
- A. BRMS has a robust member portal, and beginning October 23, 2017 you can log on to [www.brmsonline.com/dignityhealth](http://www.brmsonline.com/dignityhealth) to access important and valuable information. Beginning January 1, 2018, you will be able to register as a medical plan member through this website, so you can order duplicate ID cards, check on the status of claims and much more. You may also link to the BRMS website through Dignity Health's Total Rewards Portal at <https://employee.dignityhealth.org/totalrewards>.
- 13. Q. Who do I call if I have any questions about how a claim was processed in 2017?**
- A. You will continue to contact HSPCC/MCS for any 2017 claims questions.
- 14. Q. If I'm having a procedure that requires prior authorization, who will manage that?**
- A. Your provider will continue to contact HSPCC/MCS for any procedures you're having done in 2017 that require prior authorization. If you're scheduling a procedure after December 31, 2017 that requires prior authorization your provider will call BRMS Care Management at 1.866.755.6974.
- 15. Q. Who do I call if I have questions about the medical plan for 2018?**
- A. Beginning October 23, if you have specific questions about the 2018 medical plan you can call BRMS's Member Service Center at 1.866.755.6974, 7:00 a.m. – 6:00 p.m. PT, Monday through Friday. Remember that if you have questions about any of your Dignity Health benefits, you should call the Dignity Health HR Service Center at 1.855.475.4747, option 1 for benefits.
- 16. Q. Beginning on January 1, 2018, will I call BRMS for all my claims questions?**
- A. No. You will call either HSPCC/MCS or BRMS depending on the date of your claim(s). If you received services:
- Prior to January 1, 2018: Medical claims will continue to be processed by HSPCC/MCS. If you have questions about these claims, contact HSPCC/MCS at the number on the back of your Dignity Health Central Coast EPO medical plan ID card.
  - After December 31, 2017: Medical claims for services incurred on and after January 1, 2018 will be processed by BRMS. If you have questions about these claims, contact BRMS's Member Service Center at 1.866.755.6974, 7:00 a.m. – 6:00 p.m. PT, Monday through Friday.