When you need information, please check this document first. If you need further help, call the people listed in the following Quick Reference Chart:

QUICK REFERENCE CHART	
Information Needed	Whom to Contact
<b>Trust Fund Office</b>	Health Services & Benefit Administrators,
<ul> <li>Claim Forms (Medical)</li> <li>Medical Plan Claims and Appeals</li> <li>Disability Claims and Appeals (effective April 1, 2018)</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</li> </ul>	Inc. ("HS&BA") 4160 Dublin Boulevard, Suite 400 Dublin, CA 94568-7756  Toll Free Telephone: 1-800-922-9902  Fax: 1-925-833-7301  E-mail: dc16info@hsba.com  Web Site: www.dc16trustfund.org  Mail self-payments to:     DC16 H&W Trust Fund     c/o Fremont Bank     P.O. Box 4816     Hayward, CA 94540  If you need a copy of the Smart Choices Enrollment Booklet,     please call the Fund Office at the number above or go online at
the Smart Choices/Healthy Rewards Program	www.dc16trustfund.org and select the "Forms & Notices" to download a copy of the Booklet.
Utilization Review for Inpatient	Anthem Blue Cross
Hospitalizations, and PPO Network for the Medical Plan	21555 Oxnard Street Woodland Hills, CA 91367
(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))  • Provides prior authorization for inpatient Hospital	1-800-274-7767  For help finding network providers (PPO Physician, specialist, hospital or other Health Care Practitioner), see <a href="https://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.
admissions (except routine childbirth or emergency) for eligible Participants  • 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)  • Compare the costs charged by different Anthem Blue Cross Network providers at <a href="https://www.anthem.com/ca">www.anthem.com/ca</a>	<b>CAUTION:</b> Use of a <b>non</b> -PPO 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).
This PPO network is not available to Medicare eligible Retirees or their Dependents that are eligible for Medicare.	

QUICK REFERENCE CHART		
Information Needed		
<ul> <li>Medical Plan Networks</li> <li>Medical Network Provider Directory</li> <li>Additions/Deletions of Network Providers</li> </ul>	Anthem Blue Cross 1-800-810-2583 Web Site: www.bluecares.com	
Blue Card (for indemnity medical Plan Participants outside of California)  Help finding contracted Blue Card providers Preauthorization for hospital admissions or surgery	Use the following directions:  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 only if there are no Blue Card PPO providers in your area.	
To access Anthem's Advantage Provider Network:	Log in to anthem.com (Note: If you log in as a member, your personal information will be shown including physicians and facilities within your chosen network).  2. If you do not have your user information or log in as a member on the anthem.com homepage, select Menu and then below Care, select Find a Doctor.  3. Under Search as a Guest, click on Search by selecting a	
	<ul> <li>plan/network.</li> <li>4. In the Find a Doctor section, click on your preferred choices (type of doctor, state and select plan/network, which is Advantage PPO).</li> <li>5. Advantage PPO will be shown under the heading Medical (Employer-Sponsored) and listed as Advantage PPO (Note: You will have to scroll down through many network options).</li> <li>6. When you are within the Advantage PPO area you will be asked for various categories (doctor, hospital, physician</li> </ul>	
	name etc.) so enter those tabs accordingly, add your location and press search.  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.	
To access Anthem's Prudent Buyer Provider Network:	Log in to anthem.com (Note: If you log in as a member, your personal information will be shown including physicians and facilities within your chosen network).  2. If you do not have your user information or log in as a member on the anthem.com homepage, select Menu and then below Care, select <i>Find a Doctor</i> .	
	<ol> <li>3. Under Search as a Guest, click on Search by selecting a plan/network.</li> <li>4. In the Find a Doctor section, click on your preferred choices (type of doctor, state and select plan/network, which is Blue Cross PPO (Prudent Buyer) – Large Group).</li> <li>5. Prudent Buyer PPO will be shown under the heading Medical (Employer-Sponsored) and listed as Blue Cross PPO (Prudent Buyer) – Large Group (Note: You will have to scroll down through many network options).</li> <li>6. When you are within the Blue Cross PPO (Prudent Buyer) – Large Group 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>	
	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.	

QUICK REFERENCE CHART		
Information Needed	Whom to Contact	
Care Counseling Service and Utilization Review for certain Outpatient Procedures	MedExpert	
Outpatient Utilization Review for non-emergency care outside of your Physician's office;	Toll Free: 1-800-999-1999 7:00 AM to 8:00 P.M. (PST)	
<ul> <li>Channeling of participants to the most cost effective in- network provider;</li> </ul>	Fax: 1-650-326-6700	
<ul> <li>Patient advocate services (Care Counseling);</li> </ul>	Health Risk Questionnaire: https://smartchoice.medexperthealth.com/	
<ul> <li>Answer any questions you may have about your illness or injury;</li> </ul>	https://smartenoice.medexpertneatur.com/	
Smart Choices/Healthy Rewards Health Risk Questionnaire for Participants in the Advantage (APPO) Plan; and		
• \$20 copay reimbursement		
Smart Choices/Healthy Rewards Program Biometric Testing	Quest Diagnostics Patient Service Center (PSC) Toll Free: 1-855-623-9355	
Blueprint for Wellness biometric screenings for	Monday-Friday 7:00 AM to 8:30 P.M. (CST) Saturday 7:30AM to 4:00 PM (CST)	
Active Participants in the Indemnity PPO Plan.  • Physician Result Form.	Web Site: My.QuestForHealth.com	
	Note: 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 DCF plus your Indemnity PPO Plan ID number. 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.	
Prescription Drug Plan	CarelonRx	
(for Active/Retired Participants and eligible Dependents enrolled in the Blue Cross Network (PPO) or the Blue Cross Advantage Network (APPO))	Phone: 833-923-0115 <a href="https://www.carelonrx.com/manage-prescriptions">https://www.carelonrx.com/manage-prescriptions</a>	
Retail Network Pharmacies		
Mail Order (Home Delivery) Pharmacy		
Prescription Drug Information		
<ul> <li>Formulary of Preferred Drugs (custom formulary is not applicable to Medicare Retirees)</li> </ul>		
<ul> <li>Specialty Drug Program: Prior authorization and Ordering</li> </ul>		
and Ordering  Mental Health and Chemical Dependency	D4 I41	
Benefits	Beat It! P.O. Box 20896	
(for Active/Retired participants and eligible Dependents enrolled in the Blue Cross Network	San Jose, CA 95160	
(PPO), Blue Cross Advantage Network (APPO); and also for Active participants and eligible dependents	Toll Free: 1-800-828-3939	
enrolled in the Kaiser (HMO) and the Kaiser/Smart Choices (HMO))	This program provides benefits for the Blue Cross Network (PPO), Blue Cross Advantage Network (APPO), the Kaiser (HMO) and	
Referrals and prior authorization	the Kaiser/Smart Choices (HMO) (and their Dependents).	
<ul> <li>Mental Health and Chemical Dependence Providers</li> <li>Behavioral Health Claims and Appeals</li> </ul>	However, if you and/or your family are in Kaiser, you also have the option of using your HMO benefits.	
- Bonavioral Treatur Claims and Appeals		

QUICK REFERENCE CHART	
Information Needed	Whom to Contact
HMO Medical Plan (for Active/Retired participants and eligible Dependents who live in the Kaiser service area and	Kaiser Permanente (Group #602697) NuturCifiriRgin 198TrakhtSteOkhnt/CA9612
are enrolled in the Kaiser (HMO) or the Kaiser/Smart Choices (HMO))	Toll Free: 1-800-464-4000
<ul> <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> <li>Total Health Assessment (THA): The THA is an online health risk assessment integrated with online behavior change programs. This questionnaire helps participants examine what is affecting their overall health and prioritize lifestyle changes based on their confidence, readiness and motivation to change.</li> <li>Healthy Lifestyle Programs: In addition to the THA, Kaiser Permanente offers a complementary suite of healthy lifestyle programs. Each program begins with an initial online assessment with follow up surveys. Programs include:         <ul> <li>Balance</li> <li>Breathe</li> <li>Care for Diabetes</li> <li>Care for Depression</li> </ul> </li> </ul>	Web Site: www.kp.org  Smart Choices/Healthy Rewards Educational Requirements:  www.kp.org/tha  www.kp.org/healthylifestyles
<ul> <li>Care for Pain</li> <li>Dream</li> <li>Nourish</li> <li>Relax</li> </ul>	
PPO Dental Plan	Delta Dental (Group # 00308)
<ul> <li>(for all Active and Retired Employees and eligible Dependents not enrolled in a Prepaid Dental Plan)</li> <li>Dental Network Provider Directory</li> <li>Dental Claims and Appeals</li> <li>Prior authorization for dental services</li> </ul>	Claims Address:  P.O. Box 997330 Sacramento, CA 95899-7330 Toll Free: 1-800-765-6003  Web Site: deltadentalins.com  Important note to Retirees: Retirees who elect to enroll in a dental Plan must pay the full cost of the coverage.

QUICK REFERENCE CHART		
Information Needed	Whom to Contact	
Fully Insured Prepaid Dental Plan #1 for California residents only (for all Active and Retired Employees and eligible Dependents not enrolled in the indemnity dental plan)	DeltaCare USA (Group #76123) Claims Address: P.O. Box 1810 Alpharetta, GA 30023 Toll Free: 1- 800-422-4234	
<ul> <li>Dental Network Provider Directory</li> <li>Dental Claims and Appeals</li> <li>Prior authorization for dental services</li> </ul>	Web Site: deltadentalins.com  Important note to Retirees: Retirees who elect to enroll in a dental Plan must pay the full cost of the coverage.	
Fully Insured Prepaid Dental Plan #2 (for all Active and Retired Employees and eligible Dependents not enrolled in the indemnity dental plan)  Dental Network Provider Directory  Dental Claims and Appeals  Prior authorization for dental services	UHC Dental Direct Compensation (Group # 712019) Toll Free: 1- 800-999-3367 Web Site: www.myuhc.com  The network that you will want to search is called CA Select Managed Care Direct Compensation.  Where to File a Prior Authorization/Pre-Determination Request or Dental Claim (Dental Office Submits to UHC): P.O. Box 30567 Salt Lake City, UT 84130-0567  Where to File a Dental Appeal: Attn: Appeals/Grievances P.O. Box 30569 Salt Lake City, UT 84130-0569  Important note to Retirees: Retirees who elect to enroll in a dental Plan must pay the full cost of the coverage.	
Vision Plan (for all Active and Retired Employees and their eligible Dependents)  • Vision Network and Provider Directory  • Vision Claims and Appeals	Vision Service Plan (VSP)  3333 Quality Drive Rancho Cordova, CA 95670 Toll Free: 1- 800-877-7195 Web Site: www.vsp.com  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 385018 Birmingham, AL 35238	
HIPAA Privacy Officer and HIPAA Security Officer  • HIPAA Notice of Privacy Practice	The Privacy Officer Phone: 1-800-922-9902 Fax: 1-925-833-7301  Health Services & Benefit Administrators, Inc. 4160 Dublin Boulevard, Suite 400 Dublin, CA 94568-7756	

QUICK REFERENCE CHART		
Information Needed	Whom to Contact	
Civil Rights Coordinator	Coleen Christophersen Civil Rights Coordinator	
Notice of Nondiscrimination	Toll Free: 1-800-922-9902	
File a Grievance	Fax: 1-925-833-7301	
	E-mail: dc16info@hsba.com	
	Health Services & Benefit Administrators, Inc. 4160 Dublin Boulevard, Suite 400 Dublin, CA 94568-7756	