

FRESNO UNIFIED SCHOOL DISTRICT

TO: PARTICIPANTS OF THE FRESNO UNIFIED SCHOOL DISTRICT EMPLOYEE HEALTH CARE PLAN
FROM: JOINT HEALTH MANAGEMENT BOARD
SUBJECT: EMPLOYEE HEALTH CARE PLAN AMENDMENT 2018-4 | EFFECTIVE JANUARY 1, 2018
 PLANNED SURGERY BENEFIT
DATE: JANUARY 15, 2018

This notice defines changes to the Fresno Unified School District Employee Health Care Plan **EFFECTIVE JANUARY 1, 2018**. The Joint Health Management Board of the Fresno Unified School District has modified the Medical Plan Schedule of Benefits for **Option A and Option B**, as described below.

MEDICAL PLAN SCHEDULE OF BENEFITS OPTION A (STANDARD PLAN) AND OPTION B (ALTERNATE PLAN)

COVERAGE FEATURES	Option Plan 'A' Standard Plan (Default)	Option Plan 'B' Alternate Plan
Planned Surgery Benefit Program through BridgeHealth (Plan Deductible Waived)		
<p>Episode of Care Episode of Care includes preoperative surgeon appointment; surgery (all facility, anesthesia, surgical staff and surgeon charges); inpatient services (room, meals, medications, physical therapy, durable medical equipment); postoperative surgeon appointment</p> <p>Travel, Lodging and Meals Only covered if travel 100 miles or more (one way) from primary residence is required.</p>	<p>BridgeHealth Provider: 100% of the BridgeHealth Case Rate No Charge for Patient</p> <ul style="list-style-type: none"> • All Travel and lodging during Episode of Care are covered at 100%. • Meals <ul style="list-style-type: none"> – <u>Patient</u>: \$50 per day meal allowance and \$125 per week after 15 days when not admitted. – <u>Companion</u>: \$50 per day meal allowance and \$125 per week after 15 days. <p>Note: Coverage available for patient and one companion. Travel and lodging must be arranged by BridgeHealth. Coverage includes coach airfare and one double-occupancy hotel room. Receipts for meals are not required for reimbursement.</p>	<p>BridgeHealth Provider: 100% of the BridgeHealth Case Rate No Charge for Patient</p> <ul style="list-style-type: none"> • All Travel and lodging during Episode of Care are covered at 100%. • Meals <ul style="list-style-type: none"> – <u>Patient</u>: \$50 per day meal allowance and \$125 per week after 15 days when not admitted. – <u>Companion</u>: \$50 per day meal allowance and \$125 per week after 15 days. <p>Note: Coverage available for patient and one companion. Travel and lodging must be arranged by BridgeHealth. Coverage includes coach airfare and one double-occupancy hotel room. Receipts for meals are not required for reimbursement.</p>

1. **Must utilize a BridgeHealth Provider and BridgeHealth must arrange all care and services.**
2. Medical expenses, such as imaging, medical clearance exam, prescriptions, durable medical equipment and physical therapy, that occur before the preoperative surgeon appointment and after the postoperative appointment are covered by the standard benefits and subject to plan guidelines, provisions, and cost-sharing requirements.

For more information on the Planned Surgery Benefit Program, contact BridgeHealth at (844) 567-2970, or visit their website, www.bridgehealth.com. Register with the company code, **FUSD2**, for full access to the website.