

2021

**CSURMA AORMA
Benefit Plan Administration
Quick Reference Guide**

CSURMA AORMA Benefit Plan Administration Quick Reference Guide

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CSURMA AORMA Benefit Plan Administration Quick Reference Guide

Important Administrative Resources

The purpose of this guide is to serve as a consolidated resource to help you identify where to find additional information. The CSURMA AORMA medical, pharmacy, dental and vision plans are purchased through PRISM. PRISM is a member-directed risk sharing pool of public agencies. PRISM includes specific carrier partners. Third Party Administrators (TPAs) provide their propriety systems to help you manage enrollment and billing data for these plans. CSURMA AORMA currently participates with PRISM for the following programs:

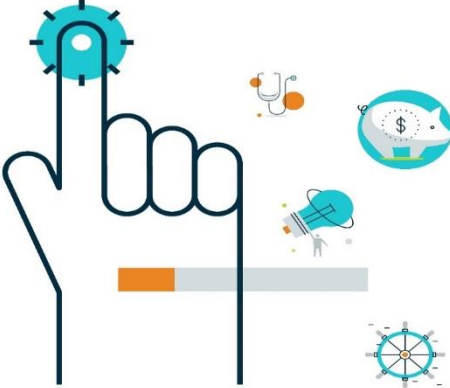
- Anthem Medical
- Kaiser Medical
- Express Scripts (ESI) Pharmacy
- Delta Dental
- VSP Vision

PRISM has their own program rules. PRISM also partners with third party administrators and carriers. PRISM and their partners have their own detailed rules and procedures that CSURMA AORMA is required to follow. In this guide we have identified a quick reference for the day to day processes and where to find the comprehensive guides for all of the CSURMA AORMA benefit plan vendors.

BCC (Benxcel) is our Benefit Administration System for the PRISM plans. BCC also administers Cobra and FSA plans for the organizations that have selected this option. Members who offer Medical through PRISM would enter enrollment for Medical, Pharmacy, Dental, Vision, FSA and Cobra into the BCC system and BCC will feed this information to carriers/TPAs accordingly.

PBIA (Preferred Benefit Insurance Administrators) is the third party administrator (TPA) of the PRISM Dental and Vision plans. PBIA manages eligibility, enrollment and billing for these plans. For members who offer Medical through PRISM, BCC will be your main contact, there will be no direct involvement with PBIA. Members who offer dental and/or vision only will use the PBIA system to manage eligibility (enrollments, terminations, changes).

Hartford provides our Life, Supplemental Life and Disability plans. The Hartford plan is self-billed and not integrated with BCC.




CSURMA-AORMA Benefit Options

Carrier	Benefit Type	Group Number
PRISM:		
Anthem	Medical PPO, HMO & HDHP	175075
Express Scripts (ESI)	Pharmacy Anthem PPO	175075
	Medicare Part D Pharmacy	EIAEGWPBCCSTD
Kaiser	Medical HMO	Northern Region: 605957
		Southern Region: 233977
Delta Dental	Dental HMO	79085
	Dental PPO	19859
VSP	Vision PPO	12137687
Hartford	Basic Life, AD&D, STD, LTD, Supplemental Life and AD&D	402909
	Standalone supplemental AD&D	S08219
BCC	Healthcare and Dependent Flexible Spending Account	Not applicable
BCC	Cobra administration	Not applicable

Access to Administrative Guides

Click on each resources
to access the



Partner Name	Partner Role	Guide Resources
Alliant Insurance Services	Benefit Consultant	CSURMA Medical Group Carrier Contact Sheet CSURMA Non-Medical Group Carrier Contact Sheet
		CSURMA-AORMA Benefit Website
PRISM	PRISM Health program (Benefit Pool) is a member-directed risk sharing pool of public agencies that uses the concept of pooling in order to reduce healthcare premiums for its members.	PRISM Guidelines and Processes
		Active Employee Qualifying Life Event Rules
		Retiree Qualifying Life Event Rules
		Medicare Retiree KPSA Process
		Medicare Retiree KPSA Process Checklist
		Medicare Retiree Anthem PPO EGWP Process
BCC	<p>Third Party Administrator Medical, Dental, Vision, FSA and Cobra.</p> <p>BCC provides our Benefit Administration System. Plan administrators will interact with BCC to manage eligibility, access reports and bills.</p>	Technology Platform Guide
		Recorded BCC Admin Training
		How to pull reports
		Recorded BCC Report Training
		Cobra Admin Guide
PBIA	Third Party Administrator of the PRISM Dental and Vision Plans. PBIA handles eligibility, enrollment and billing for these plans. PBIA also manages their own online eligibility portal for groups that offer dental and vision, but not medical through our program. These entities would use PBIA's system for enrollment purposes. <i>This applies only</i>	PBIA VSP Admin Guide
		PBIA Delta Dental Admin Guide

	<u><i>for groups with dental and vision coverage.</i></u>	
Hartford	Carrier Direct	Self-Bill Admin Guide

All of these administrative guides and documents can also be found on the [2021 CSURMA document bookshelf](#).

Administrative Medical, Dental, Vision, Life and Disability Contacts

It is important to understand who your organization should contact and for what purpose. Below, we have identified resources that **HR administrators** should contact.

Groups with Medical Coverage: Contact BCC Enterprise Team

enterpriseservice@benxcel.com:

- Urgent enrollment updates (when a member needs care prior to a Monday morning Carrier File Feed)
- Assistance with life events and other changes in the Benxcel portal
- Billing questions
- Changes to your administrative contacts
- Assistance with running reports in Benxcel

Groups with Dental and/or Vision Coverage Only: Contact PBIA (Refer to Administrative Guides below):

- Billing
- Enrollment / Termination (including urgent processing)

[Delta Dental Administrative & Member Contacts](#)

[VSP Administrative & Member Contacts](#)

All Groups:

Contact Hartford (Refer to Administrative Guide):

- Billing
- Claims Administration

[Hartford Administrative & Member Contacts](#)

Contact Alliant: aormabenefits@alliant.com:

- Employee and dependent issues that cannot be handled directly by the member with the carrier
- Escalated service issues (including any challenges with BCC)
- Changes to your administrative contacts
- Plan documents and materials
- Compliance questions
- Anything else you are uncertain about. We may not be able to answer every question, but we can certainly point you in the right direction!
- PRISM guidelines & exceptions to retroactivity rules

Member Services

Below, we have identified resources that **Employees** should contact.

Anthem Medical Member Services:

- (800) 967-3015
- <https://www.anthem.com/ca/ms/prism/home.html/>

Kaiser Medical Member Services:

- (800) 464-4000
- <https://my.kp.org/csaceia/>

Express Scripts (ESI) Pharmacy (Anthem PPO) Member Services:

- (877) 554-3091
- <https://www.express-scripts.com/>

Delta Dental Member Customer Service

- (888) 335-8227
- <https://www.deltadentalins.com/>

VSP Member Services:

- (800) 877-7195
- <https://www.vsp.com/member>

ID Cards

- Anthem Medical HMO - One ID card per member
- Anthem Medical HDHP – One ID card per member
- Anthem Medical PPO – Two ID cards per member
 - Medical card from Anthem- one card per covered member
 - Usually arrives within 7 – 10 business days of request / enrollment
 - Pharmacy Card from Express Scripts (Anthem PPO) - all cards are in subscriber's name
 - Usually SHIPS within 7 – 10 days of request / enrollment, and arrives within 14-20 days
- Kaiser Medical- One ID card per member
 - Usually received in 7 – 10 business days
- Delta Dental DHMO – One ID card per member
 - Member can register on Delta Dental's portal to access ID card
- Delta Dental DPPO – ID cards are not automatically sent out
 - Enrollment driven by employee SSN
 - Members who register their accounts online will be issued a Non-SSN ID number which will appear on the optional electronic ID card
- VSP Vision:
 - VSP does not issue ID cards
 - Member can access care using employee name, DOB, and last 4 of SSN
 - Member can register on VSP's portal to access ID card

Replacing ID Cards:

- Best and fastest way for a member to get a NEW ID card is to use the carrier's online portal
 - Login to the member portal to print a copy of your ID card
- Second best option is for member to CALL Anthem / Kaiser / Express Scripts / Delta and provide your group number to request a new ID card.

BCC File Feeds and Billing (For Groups with Medical)

File feeds sent to carriers:

- Sent very early every Monday morning
 - MEDICAL & Rx updates are usually made within 24-48 hours of receiving the file
 - Dental / Vision updates can take up to 7 days to load to Delta / VSP
 - **Note:** Weekly feeds are the industry standard. If you have an urgent enrollment or change contact BCC for expedited enrollment at:
enterpriseservice@benxcel.com

File Feed Schedule:

Benefit	Carrier	Date
Medical	Kaiser & Anthem	BCC sends files on every Monday at 4am EST.
Dental	Delta Dental	BCC sends files to PBIA every Monday at 4am EST <i>Note: 5-7 day lag to update from PBIA to Delta Dental</i>
Vision	VSP	BCC sends files to PBIA on every Monday at 4am EST <i>Note: 5-7 day lag to update from PBIA to VSP</i>
Life/AD&D, Supplemental Life & Disability	Hartford	No feed, CSURMA is self-billed
Flexible Spending Accounts (FSA)	BCC (if elected)	BCC is the administrator no feed necessary
Cobra Administration	BCC (if elected)	BCC is the administrator no feed necessary

Urgent Updates– bypassing the file feed timeline

- If you are concerned about the timing of an enrollment, you can request an urgent update
- E-mail enterpriseservice@benxcel.com with the words “URGENT CARRIER UPDATE REQUEST” in the subject of your email
 - Include member name, carrier(s) that need to be updated, and the reason the update cannot wait for the next file feed
 - If the request is so urgent that the change cannot wait 24-48 hours, copy the Alliant service team on your e-mail request

Billing

Bills are released close to the middle of each month:

- You are notified via email that the bill is ready for download in the BCC portal
- There are two documents available in the portal:
 - PDF summary that breaks out total premium by line of coverage
 - Excel worksheet that lists each covered employee with enrollment tier and premium by plan

Please pay as billed and look for adjustments on the next statement. Be sure to Audit your data to ensure employees and dependents are enrolled accurately. You can run medical, dental, and vision enrollment reports in BCC employer portal to audit.

Medicare Retirees

Medicare Retirees (Please review the PRISM Guidelines for more detailed information)

Anthem/Express Scripts Medicare Retirees:

- Retiree must be enrolled in Parts A & B
- HR is responsible for obtaining the completed EGWP form from the retiree and keeping it in the employer files for 9 years
- Medicare is the primary payer for retiree coverage

Kaiser Permanente Senior Advantage Medicare Retirees:

- Retiree must be enrolled in Parts A & B
- Member must complete the current year KPSA enrollment form
- Hard copy original must be mailed to Kaiser at the address on the form
- Member should NOT be moved to KPSA plan until the enrollment is approved by Kaiser
- Alliant will notify you when KPSA forms have been approved so you can move your member to KPSA in the BCC portal
- KPSA is the primary payer - detailed process is available, see page 4