Welcome

USC PPO Plan

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Welcome to the USC PPO Plan

The USC PPO Plan is a self-funded medical benefit program provided by the University of Southern California. As a Participant/Covered Person of the USC PPO Plan, benefits are administered by the university with HealthComp, Anthem Blue Cross and MedImpact, each providing certain administrative services. The USC PPO Plan is a Preferred Provider Organization (PPO) that includes two tiers of In-Network providers (Tier 1 and Tier 2) and Non-Network providers (Tier 3).

While you don’t have to choose a primary care physician (PCP), your PCP office visit copay with Tiers 1 and 2 providers will be reduced by $10 after you do designate one. To designate a PCP for you and your covered dependents, register at hconline.healthcomp.com/usc. Changes made on or before the 15th day of the month will be effective on the 1st of the following month.

TIER 1 PROVIDERS
To ensure you receive the highest level of benefits, access Tier 1 providers—USC Care Medical Group, Keck Hospital of USC, USC Norris Cancer Hospital and USC Verdugo Hills Hospital. The USC PPO Plan pays Tier 1 benefits to Tier 2 providers when services are rendered to Covered Persons under age 19.

To find Tier 1 (Keck Medicine) providers call Keck at (833) KECK.USC/(833) 532.5872 or visit keckmedicine.org.

TIER 2 PROVIDERS
Anthem Blue Cross maintains the Tier 2 provider network (Anthem Blue Cross Prudent Buyer providers in California and BlueCard® program providers outside of California).

To find Tier 2 providers anywhere in the U.S., call (800) 888.8288 or visit anthem.com/ca. To find participating providers outside of the U.S., contact Blue Cross Blue Shield Global® Core at (800) 810.2583 or visit bcbsglobalcore.com.

You can also access Tier 2 primary care providers from the comfort of your home via your own computer or mobile device. LiveHealth Online physicians are available year round, seven days a week, 24 hours a day. Please refer to page 9 for additional details about LiveHealth Online.

TIER 3 PROVIDERS
You may also access Non-Network Tier 3 providers for medically necessary covered services. You’ll receive the lowest level of benefits and your out-of-pocket costs will be higher than if you accessed care through Tier 1 or Tier 2 In-Network providers.

PRIOR AUTHORIZATIONS
Anthem Blue Cross provides Prior Authorization for all scheduled hospitalizations, outpatient surgical procedures and certain medical health services. Physical and occupational therapy require Prior Authorization after the first 12 visits of the calendar year.

HealthComp Administrators
HealthComp is a Third Party Administrator (TPA) responsible for processing all medical claims, maintaining eligibility, generating Plan ID cards, and providing customer service for members of the USC PPO Plan.

Contact information for HealthComp is shown below and is also printed on the front of your Plan ID card. Information on where to submit medical claims is printed on the back of your Plan ID card.

Present your ID card each time you receive medical care or purchase prescription drugs to ensure all claims are filed correctly. See pages 3 and 4 in this brochure for a description of the information included on the front and back of your ID Card.

For questions about benefits, eligibility or claims, or to request additional or replacement plan ID cards, contact:

HEALTHCOMP CUSTOMER SERVICE
Telephone (toll free): (855) SC.PLANS/(855) 727.5267
Monday-Friday, 6:00 a.m. to 5:00 p.m. (PST)

HCONLINE
You can also access HCONline (HealthComp’s secure web portal) to access claims history, view electronic Explanation of Benefits (EOBs), review benefits and eligibility information and more. See Page 10 for information on how to access HCONline and set up a member account.
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Understanding Your Plan ID Card

All Participants enrolled in the USC PPO Plan receive an ID card. Two ID cards are initially mailed out if you cover one or more dependents, but you can request additional cards. Present your ID card each time you receive medical care or purchase prescription drugs.

You can also receive a digital ID card that can be viewed on your computer or any mobile device. To access the digital ID card, set up your member account on the HealthComp website at hconline.healthcomp.com/usc. If you need assistance, please contact HealthComp’s member service team at (855) 727.5267.

CALIFORNIA RESIDENT ID CARD—FRONT

USC University of Southern California

1. Anthem Blue Cross

PPO PLAN

Subscriber Name: John Doe
Subscriber ID, TRU: NP1234567

Anthem Group Number: 276727M001
Plan Code: 040

MEDICAL
Eligibility • Claims • Customer Service
HealthComp (TPA)
855-SC-PLANS (855-727-5267)
www.healthcomp.com

PRESCRIPTION DRUGS
Rx Bin: 003595
RxB PCN: ASPROM1
4Rx Group: USC01
844-401-2054
mph.healthcomp.com

PRUDENT BUYER PLAN

CALIFORNIA RESIDENT ID CARD—BACK

Anthem Blue Cross

Prior-authorization: To obtain prior authorization, call 800-274-7767.

1. Submit California medical claims to: Prudent Buyer Plan • PO Box 60007 • Los Angeles, CA 90060-0007

2. Medical claims outside of CA: Submit to your local Blue Cross and/or Blue Shield plan in the state where services are rendered. To ensure prompt claims processing, include the 3 digit alpha prefix (TRJ) that precedes the patient’s ID number

3. HOW TO LOCATE A NETWORK PROVIDER

Tier 1 (USC Providers): www.keckmedicine.org Or call (833) KEOK-USC (833-532-5872)
Tier 2 (Anthem Providers): www.anthem.com/ca - Choose: Blue Cross PPO (Prudent Buyer) - Large Group

Anthem Blue Cross Life & Health Insurance Company provides administrative services only and does not assume any financial risk or obligation with respect to claims. Blue Cross of California, using the trade name Anthem Blue Cross, administers claims on behalf of Anthem Blue Cross Life and Health Insurance Company, and is not liable for any benefits payable. Independent licensees of the Blue Cross Association.

Anthem Blue Cross Prudent Buyer Providers Only

4. For claim inquiries, call: 800-688-3828

Understanding Your Plan ID Card—Reference

1. Anthem Blue Cross logo identifies USC’s contracted Tier 2 provider network.
2. This is the name of the primary subscriber (employee). All ID cards are issued with the subscriber’s name.
3. Subscriber ID is the number which should be used for identifying the subscriber eligibility record.
4. Anthem Group Number is the Anthem Blue Cross assigned group number.
5. Plan Code 040 is a code used by Anthem Blue Cross to identify the USC plan.
6. HealthComp Group Number is used by HealthComp to identify the USC account. You may be asked for this number when contacting HealthComp.
7. HealthComp is USC’s Third Party Administrator (TPA). Contact HealthComp with member service, eligibility and benefit-related questions.
8. MedImpact is your prescription benefit manager. Contact MedImpact if you have prescription related questions. The Rx Bin, Rx PCN and 4Rx Group numbers are used by your pharmacy when processing your prescription drug claim.
9. Prudent Buyer Plan is the name of the Anthem Blue Cross PPO provider network.
10. PPO suitcase logo indicates you have access to Anthem Blue Cross PPO providers nationwide.
11. Most common prior authorization requirements are listed here. It is important to adhere to all prior authorization requirements.
12. Mailing address for all medical claims incurred in California, if not submitting electronically to Anthem.
13. Blue Cross/Blue Shield note to providers, reminding them to use the TRJ prefix when submitting claims incurred outside of California to their local Blue Cross/Blue Shield plan.
14. Web addresses used to locate Tier 1 (Keck Medicine) and Tier 2 (Anthem) providers.
15. Phone number to call when requiring medical prior authorization.
16. Phone number Anthem Blue Cross Prudent Buyer providers use for claims inquiries.
17. Anthem Blue Cross is legally required to include this disclaimer on ID cards accessing their names and logos.
How to Read Your Explanation of Benefits (EOB)

An Explanation of Benefits (EOB) is important because it verifies that a claim was received by your insurance, documents payment and/or reason(s) for denial and patient responsibility. It also provides the “Covered Amount” Tier 1 and Tier 2 providers have agreed to accept as plan payment and clearly specifies your patient responsibility.

FIELD DESCRIPTIONS INCLUDED ON AN EOB:

A. Claim #: The claim number that was assigned by HealthComp.

B. Patient: The plan member who received the services.

C. Member ID: Your member ID number that is on your Plan ID card as Subscriber ID number.

D. Service Details: A description of the service that was received.

E. Total Charge: The amount that the provider charged for the service received.

F. Plan Rate: The allowable charges under the Plan or the amount your provider has agreed to accept for services rendered.

G. Plan Paid: The amount paid by the Plan.

H. Paid by Other Insurance: A portion of the Total Charge may have been covered by another source (e.g. other health insurance, automobile insurance).

I. Not Covered: The amount that was not covered by the Plan, such as “over usual and customary fees” or exclusions by the Plan.

J. For Your Deductible: The amount you must pay for services before the Plan will pay.

K. Co-pay: The set amount that you pay for certain services (such as office visits). You may have already paid for your co-pay at the provider’s office.

L. Co-insurance: The percentage amount you pay for certain services (such as labs and x-rays).

M. Total: The total amount you owe to the provider for the service received.

N. (%): Percentage: The percentage of the covered amount that was paid by the Plan, after any applicable deductible and/or co-pays.

O. Reason Codes: HealthComp’s reason code for charges that were not covered or require further explanation.

P. Other Credits or Adjustments: Any final adjustments that were made to the amount that you owe.

Q. Your Total Responsibility: The total amount that you owe for all services listed in the claim. This may include co-pays that you already paid at the provider’s office.

R. Provider: The provider/facility that rendered the service(s).

S. Reason Code Description: A description of the Reason Codes in section N.

T. Payment Distribution: Identifies the name of the payee, payment amount and check number of each payment that HealthComp issued for services listed in the EOB.

U. Messages: Shows additional information related to the EOB.
Using Your Prescription Drug Benefits

When you enroll in the USC PPO Plan, you automatically receive prescription drug coverage administered by MedImpact. If prescriptions are filled at a Network Pharmacy, the amount you pay for up to a 30-day supply is shown below.

### PRESCRIPTION DRUG BENEFITS

<table>
<thead>
<tr>
<th>Drug Type</th>
<th>Network Pharmacy (Retail and Mail) (Up to 30-day supply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$5 copay</td>
</tr>
<tr>
<td>Brand Name (No Generic Available)</td>
<td>$25 copay</td>
</tr>
<tr>
<td>Brand Name (Generic Available)</td>
<td>$70 copay</td>
</tr>
<tr>
<td>Specialty Medications (Brand Only)</td>
<td>$125 copay</td>
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**NETWORK PHARMACIES INCLUDE:**

- USC Health Center Pharmacy—UPC
- USC Pharmacy—UPC
- USC Medical Plaza Pharmacy—HSC
- USC Verdugo Hills Professional Pharmacy
- CVS
- Rite Aid
- Costco
- And many more independent pharmacies

To find Network pharmacies in your area, call MedImpact at (844) 401.2054 or visit mp.medimpact.com/usc.

If a Prescription is Filled at a Non-Network Pharmacy, the Plan will reimburse you 50% of the Plan’s National MedImpact Value rate (not 50% of the cost). Your reimbursement request must be received within 60 days of the fill in order for the Plan to consider for reimbursement.

**MAIL ORDER PROGRAM**

For your convenience, MedImpact offers a mail order program. Copays through mail order are the same as filling at a retail pharmacy (see page 7 for copays).

**HOW TO USE THE MAIL ORDER PROGRAM**

- Have your physician write the prescription.
- Complete a Mail Service Order Form from medimpactdirect.com. Click on the Getting Started tab from the top NAV bar. The form is available for download and print. Mail your completed form along with your original prescription to:

  **MedImpact Direct**
  P.O. Box 51580
  Phoenix, AZ 85076-1580

Allow up to 10 days for delivery from the date MedImpact Direct receives your order in the mail. Once you are established with the mail order pharmacy and you request a refill through MedImpact Direct, refill orders often ship the same business day but can take up to 10 days for delivery.

For questions regarding your prescription drug benefits, call MedImpact at (844) 401.2054.

**Livongo for Diabetes Program**

Livongo for Diabetes program makes living with diabetes easier by providing you with a connected meter, unlimited strips, and coaching at no cost. If you enroll in the program, your diabetes medication is covered at 100% by your health plan.

Here are some of the benefits of this program:

- **More Than a Standard Meter:** The meter is connected and provides real-time tips and automatically uploads your blood glucose readings.
- **Unlimited Free Strips and Lancets:** When you are about to run out, Livongo ships more supplies, right to your door.
- **Coaching Anytime and Anywhere:** Certified Diabetes Educators are available anytime via phone, text, and the mobile app to give you guidance on your nutrition and lifestyle questions.
- **Medication at no cost:** Get your diabetes medication covered at 100% by your USC health plan each month you continue to check your blood glucose on your Livongo meter.

To learn more about the program or join, visit join.livongo.com/USCTROJANS/register or call (800) 945.4355 and mention registration code USCTROJANS.
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Easy, fast primary care physician visits. All from the comfort of your home via your own computer or mobile device. LiveHealth Online physicians can answer questions, make a diagnosis, and even prescribe basic medications when needed and as legally permitted in certain states*. They are available year round, seven days a week, 24 hours a day. A transcript of the LiveHealth Online consultation will be sent to your primary care physician upon request.

You may access this service by visiting [livehealthonline.com](http://livehealthonline.com). Make sure you set up your account with LiveHealth Online before having to use their services. It is recommended that you set up your account using a computer (not your mobile phone), but once your account is set up you can access LiveHealth Online via any supported mobile device.

**TIER 2 PROVIDER**

**LiveHealth Online Consultations**

Plan pays 100% after Copay. You pay $20 Copay if the patient is less than 19 years of age. You pay $30 Copay if the patient is 19 years of age and older.

*(Copay is reduced by $10 if you have designated a Primary Care Physician)*

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**Lyra Health**

Lyra makes it easy for you and your dependents to get high-quality, personalized care for your mental and emotional health, so you can be your best at work or at home. With therapy and coaching programs, Lyra can help with stress, anxiety, depression, and other common behavioral health issues.

**With Lyra you get:**

- **Easy sign-up**—create an account in the secure online tool or by calling the care team.
- **Convenient options**—meet with coaches and therapists in-person or via live video.
- **Quick scheduling**—Lyra providers have available appointments within the next two weeks.
- **No cost to you**—the PPO Plan covers the cost of care, up to 25 sessions per year per covered member.

Get started at [usc.lyrahealth.com](http://usc.lyrahealth.com) or at (844) 495.7094.

**Questions?** Contact Lyra’s care team 24/7 at (844) 495.7094 or by email at care@lyrahealth.com.

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**HealthComp Online (HConline)**

You have access to a variety of tools and resources for your USC PPO Plan benefits through HealthComp’s secure web portal called HConline. With HConline you can:

- View enrollment information
- Review benefit information
- Access claims history and inquire about claims
- View and print Explanation of Benefits (EOBs)
- Download frequently used forms
- Submit online forms
- Order an ID Card

**ACCESSING HCONLINE**

To access HConline, please go to:

1. [hconline.healthcomp.com/usc](http://hconline.healthcomp.com/usc)
2. Click on **Sign Up**, located in the top right-hand corner, then choose **Member (Employee or Dependent)**
3. Complete **New User Registration**
   - **Verification**
     - Enter your Social Security Number (omit dashes)
     - Date of Birth (MM/DD/YYYY)
     - Home Zip Code (#####)
   - **User Account**
     - Enter email address, Username and Password
     - HealthComp Group Number (found on ID card)
     - Select and answer security question
     - Click **Create New User**
   - Go to your email to confirm your registration
   - Add hconline@healthcomp.com to your address book to ensure delivery of email notifications

**HCOnline mobile application** enables members and providers to access HCOnline from their smart phone or tablet.

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You may access this service by visiting livehealthonline.com. Make sure you set up your account with LiveHealth Online before having to use their services. It is recommended that you set up your account using a computer (not your mobile phone), but once your account is set up you can access LiveHealth Online via any supported mobile device.

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3) Complete New User Registration
   - **Verification**
     - Enter your Social Security Number (omit dashes)
     - Date of Birth (MM/DD/YYYY)
     - Home Zip Code (#####)
   - **User Account**
     - Enter email address, Username and Password
     - HealthComp Group Number (found on ID card)
     - Select and answer security question
     - Click Create New User
   - Go to your email to confirm your registration
   - Add [hconline@healthcomp.com](mailto:hconline@healthcomp.com) to your address book to ensure delivery of email notifications

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