USC PPO Plan

Effective January 1, 2025

USC University of
Southern California

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 Personify Health, Anthem Blue Cross and Optum Rx, 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 Arcadia Hospital, 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 20 visits of the calendar year.

Personify Health Administrators

Personify Health 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 Personify Health 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:

PERSONIFY HEALTH 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** (Personify Health'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.

Understanding Your Plan ID Card

All Participants enrolled in the USC PPO Plan receive an ID card. Present your ID card each time you receive medical care or fill 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 Personify Health website at **hconline.healthcomp.com/usc**. If you need assistance, please contact Personify Health's member service team at **(855) 727-5267**.

ID CARD—FRONT

USC University of Southern California

1 Anthem

USC PPO PLAN

Subscriber Name: **2**
John Doe
Subscriber ID: **3**
TRJ **NP1234567**

Dependent Name: **4**
John Doe

Anthem Group Number: 276727M002 **5**
Plan Code: 040 **6**
Personify Health Group Number: SC1 **7**

THIS CARD IS FOR IDENTIFICATION ONLY.
POSSESSION CONFERS NOT RIGHT TO BENEFITS
OR GUARANTEE OF COVERAGE

MEDICAL
Eligibility • Claims • Customer Service
Personify Health (TPA)
855-SC-PLANS (855-727-5267) **8**
hconline.healthcomp.com/usc

PRESCRIPTION DRUGS
Rx Bin: 610011
Rx PCN: IRX
Rx Group: USCRX **Optum** Rx® **9**

855-205-3931
optumrx.com
PRUDENT BUYER PLAN **10** PPO

ID CARD—BACK

Anthem www.anthem.com/ca **USC** employees.usc.edu/ppo

11 **Prior-authorization:** To obtain prior authorization, call 800-274-7767. **15**
Prior-authorization is required for scheduled hospitalizations, outpatient surgical procedures and certain mental health services. Physical & occupational therapy require prior-authorization after the first 20 visits of the calendar year. Notification of an emergency admission must be made within 48 hours.

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

13 **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

14 **HOW TO LOCATE A NETWORK PROVIDER**
Tier 1 (USC Providers): www.keckmedicine.org Or call (833) KECK-USC (833-532-5872)
Tier 2 (Anthem Providers): www.anthem.com/ca - Choose: Blue Cross PPO (Prudent Buyer) - Large Group

Anthem Blue Cross Prudent Buyer Providers Only
For claim inquiries, call:
800-688-3828 **16**

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 benefits payable. Independent licensees of the Blue Cross Association. **17**

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).

3 Subscriber ID is the number which should be used for identifying the subscriber eligibility record.

4 This is the name of the subscriber's dependent (if any is being covered).

5 Anthem Group Number is the Anthem Blue Cross assigned group number.

6 Plan Code 040 is a code used by Anthem Blue Cross to identify the USC plan.

7 Personify Health Group Number is used by Personify Health to identify the USC account. You may be asked for this number when contacting Personify Health.

8 Personify Health is USC's Third Party Administrator (TPA). Contact Personify Health with member service, eligibility and benefit-related questions.

9 Optum Rx is your prescription benefits manager. Contact Optum Rx if you have prescription related questions. The Rx Bin, Rx PCN and Rx Group numbers are used by your pharmacy when processing your prescription drug claim.

10 Prudent Buyer Plan and PPO suitcase logo identify the Anthem Blue Cross PPO provider network.

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.

(A) Claim #: 36670368-01
(B) Patient: Amanda Forester
(C) Member ID: 461611

(D) Service Details	(E) Total Charge	(F) Plan Rate	(G) Plan Paid	(H) Paid by Other Insurance	(I) Not Covered	(J) For Your Deductible	(K) Co-pay/ Coinsurance	(L) Total	(M) %	(N) Reason Codes	(O) Service Codes
Date: 1/10/2018 A) Physician - Office Visit	$280.00	$151.73	$131.73	$0.00	$0.00	$0.00	$20.00 $0.00	$20.00	100	JA, 02	410
Date: 1/10/2018 A) Surgical Services	$337.00	$151.50	$68.50	$0.00	$0.00	$83.00	$0.00 $0.00	$83.00	100	JA	412
Totals	$617.00	$303.23	$200.23	$0.00	$0.00	$83.00	$20.00	$103.00			

Covered by Your Plan — Your Responsibility

(R) Provider: Dr. Joseph Forbes
ABC Medical Group
260 Main Street, Suite 300
Cityville, CA 10000

(P) Other Credits or Adjustments: $0.00
(Q) Your Total Responsibility: $103.00

(S) Reason Code Description
JA-Discount. Patient not liable.
02-Copayment was taken on this service

(T) Payment Distribution

Code:	Claim #	Paid To:	Check No.	Amount
A)	36670368-01	ABC Medical Group	01053445	$200.23

(U) Messages

Claim #	Message:
36670368-01	Payment will be remitted by local carrier.

FIELD DESCRIPTIONS INCLUDED ON AN EOB

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

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 and the date that it 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.

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

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

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

N Reason Codes: Personify Health's reason code for charges that were not covered or require further explanation.

O Service Codes: Personify Health's code for the service that was received.

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 Personify Health 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 Optum Rx. The amount you pay for up to a 30-day supply is shown below.

PRESCRIPTION DRUG BENEFITS

Drug Type	Network Pharmacy (Retail and Mail) (Up to 30-day supply)
Generic	$5 copay
Preferred Brand	$25 copay
Non-Preferred Brand	$70 copay
Specialty Medications (Brand Only)	$125 copay

NETWORK PHARMACIES INCLUDE:

• 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 Optum Rx at **(855) 205-3931** or visit **optumrx.**

If a Prescription is Filled at a Non-Network Pharmacy, the Plan will reimburse you 50% of the Optum Rx contracted 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.

HOME DELIVERY SERVICE

For your convenience, Optum Rx offers home delivery through Optum Rx Home Delivery Pharmacy. Copays through home delivery are the same as filling at a retail pharmacy (see page 7 for copays).

HOW TO USE THE HOME DELIVERY SERVICE

• Have your physician send an electronic prescription to Optum Home Delivery.
• Setup your online account at **optumx.com**. Complete registration and setup billing and shipping information for each member in your family who wants to use home delivery.

Allow up to 14 days for delivery from the date Optum Home Delivery receives your order.

For questions regarding your prescription drug benefits or home delivery, call Optum Rx at **(855) 205-3931**.

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**.

LiveHealth Online

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 permittedin 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**. 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 $25 Copay if the patient is less than 19 years of age. Otherwise, you pay a $40 Copay. **Copay is reduced by $10 if you have designated a Primary Care Physician)**

* To discover where LiveHealth Online is available, visit **livehealthonline. com/availability.html**. California residents are able to obtain prescriptions from a LiveHealth Online physician as appropriate

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 using Lyra's secure and confidential online website or app.

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.

Benefit—the PPO Plan covers the cost of care, up to 25 sessions per year per covered member.

Get started at **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**.

USC PPO Plan Member Login
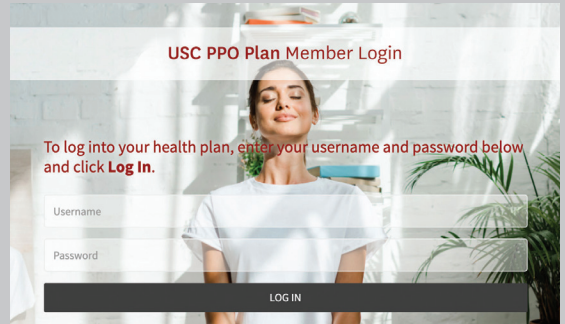
Personify Health Online (HCOnline)

You have access to a variety of tools and resources for your USC PPO Plan benefits through Personify Health'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**
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
     - Personify Health 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.

NEED ASSISTANCE?

If you need assistance setting up your member account or have questions, call Personify Health's online support toll-free at **(855) SC-PLANS/(855) 727-5267** (M-F, 6:00 a.m.–5:00 p.m. –PST) or send an email to **hconline@healthcomp.com**.