



KENAI PENINSULA BOROUGH SCHOOL DISTRICT HEALTH PLAN

DID YOU KNOW?

Do you wish you could get PAID to catch other people's mistakes? Me too!

Great news! You may be eligible to get PAID if you find a provider billing error on your Health Plan claims!



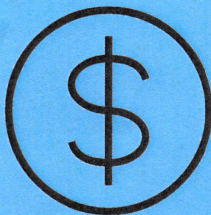
1

CAREFULLY REVIEW YOUR CLAIMS

2

DID YOU FIND AN ERROR?

Such as treatment or supplies billed but not received, or incorrect amount billed?



3

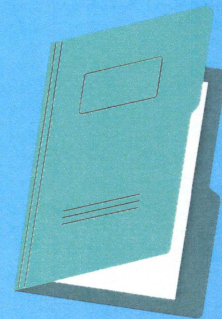
DID THE ERROR RESULT ON AN OVERCHARGE?

If the error resulted in an overcharge to the Health Plan, submit the bill with the error noted to Stacey Vinson, Employee Benefits Manager, and you could be eligible to receive 50% of the overpayment recovered by the Health Plan, up to a maximum of \$500!

Claim Self Audit

Your employer wants you to carefully review your health claims. If you find an error such as treatment billed but not received, incorrect arithmetic, drugs or supplies not received, and the error results in an overcharge, submit a copy of the bill with the error noted. If you find an error on a bill that has been paid by the Claims Administrator, you will be reimbursed 50% of the overpayment recovered by the Plan, up to a maximum of \$500.

Please refer to page 38 of the KPBSD Health Plan online at:
<https://employees.kpbsd.org/wp-content/uploads/health-care-plan/KPBSD-Summary-Plan-Description-FINAL.pdf>



Kenai Peninsula Borough School District

www.kpbsd.k12.ak.us

svinson@kpbsd.k12.ak.us

907-714-8879



Kenai Peninsula Borough School District Health Plan

Teladoc - DID YOU KNOW?

If you are enrolled in the KPBSD Health Plan, you and your eligible dependents have access to a doctor 24/7 through Teladoc!

YOUR AVAILABLE BENEFITS

HSA PLAN

HRA PLAN



General Medical

\$49

\$0

Treatment for flu, allergies, bronchitis & more

Mental Health

Therapist, Psychologist \$85

\$0

Psychiatrist (initial visit) \$190

\$0

Psychiatrist (ongoing visit) \$95

\$0



*Teladoc Mental Health is available to eligible individuals ages 13+**

**Limited to therapy only for eligible members ages 13+. Teladoc does not provide psychiatric services or mental health medication management to adolescents*

Be proactive and pre-register your Teladoc account via web or app before you need it!



www.Teladoc.com

Questions? Call 1-800-Teladoc (835-2362)

Kenai Peninsula Borough School District

www.kpbsd.k12.ak.us

svinson@kpbsd.k12.ak.us

907-714-8879

WHAT IS UCR?



UCR stands for **Usual, Customary & Reasonable**, and represents the maximum charge for physician services that will be allowed by the Plan.

How will I know if the services I need are within the UCR allowance?

If you have an upcoming procedure, you should:

1. Ask your doctor what services will be performed.

- What is the CPT* code of each procedure?
- What will your doctor charge for each CPT code?
- What is the zip code where services will be rendered and approximate date of service?

2. Call Rehn & Associates at **800-872-8979** and ask whether your doctor's charge for each CPT code is within the UCR allowance. They will contact Aetna and provide you with an answer within 24-48 hours.

Although your doctor may not want to provide this information, you have the right to request it. After all, if the charges are above UCR, your doctor may ask you to pay the amount not covered by the KPBSD Health Plan.

*CPT stands for Current Procedural Terminology and is a 5-digit code that identifies the services that will be performed.

How can I avoid charges above the UCR allowance?

Use preferred providers. Preferred providers have agreed to accept negotiated rates, and UCR does not apply to these providers' charges. KPBSD has PPO agreements with the following Alaska Facilities: Alaska Regional, Surgery Center of Anchorage, Alaska Surgery Center, Alpine Surgery Center, CPH, and South Peninsula Hospital. Go to www.aetna.com/docfind for a list of preferred physicians and other providers.

What if I've already had the services performed?

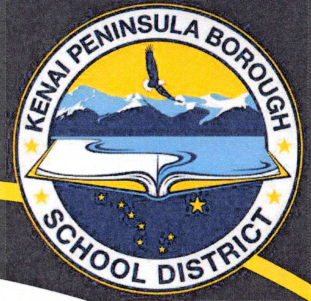
If you have already had the services performed and you discover your doctor's charges are in excess of the UCR allowable amounts, you should ask your provider to write off the amount not paid by the Health Plan.

How is UCR Calculated?

The Preferred Provider (PPO) Network, Aetna, uses an independent third party database to calculate UCR. The UCR rates are calculated for Alaska and are based upon charges and fees for services billed by providers. The UCR may also include the value of the particular service or category of services relative to other services based on published schedules and relative value studies as well as other factors. The Plan's UCR is based on the 90th percentile of charges.

This is a brief summary. For more information about Health Plan benefits, please see your [Summary Plan Description](#). Questions: Contact Stacey Vinson, Employee Benefits Manager at (907) 714-8879 or svinson@kpbsd.k12.ak.us.

PREVENTIVE CARE



DID YOU KNOW?

The KPBSD Health Plan covers Preventive Care at 100% (not subject to Deductible, coinsurance, or copays) for both the HRA and HSA Plans!

Click the links below to view which Preventive Services are covered at 100%:

- [For All Adults](#)
- [For Women](#)
- [For Children](#)
- [Medications & Immunizations through CVS Caremark](#)



5 REASONS TO GET PREVENTIVE CARE

It can save you money.

Preventive services are covered at 100%. Plus, finding problems early can help you avoid costly medical bills later.

It can stop you from getting sick.

Sometimes, Preventive care can keep health problems from developing altogether.

It can help you be there for the people that matter the most.

Because sometimes, taking care of yourself is the best way to care for the people you love.

It can save your life.

Preventive services like cancer screenings can find problems before you have symptoms - so you can tackle them while they're easier to treat.

It can give you peace of mind.

Regular checkups give you the chance to share concerns, ask questions about your health and get the support you deserve.

PREVENTIVE CARE VS. DIAGNOSTIC CARE

Preventive care is provided when you are symptom free. Preventive care includes services such as a routine physical, cancer screenings such as a mammogram, a diabetes screening, or immunizations such as a flu shot.

Diagnostic care is what you receive when you have symptoms or risk factors and your physician wants to diagnose them, or you have a diagnosed condition that your physician wants to monitor. Diagnostic care includes services such as radiology, ultrasound, or laboratory tests. If you have high cholesterol, diabetes, or another medical condition for which you have periodic blood work done, these tests would be considered diagnostic.

For many Preventive services you won't need to pay anything, while diagnostic services will be subject to your Deductible and Coinsurance. Understanding the difference between Preventive and Diagnostic care will help you understand how your benefits will be paid.

For questions, please contact Rehn & Associates at (800) 872-8979.

