



June 5, 2024

**IMPORTANT INFORMATION REGARDING YOUR
2024 BLUE SHIELD EPO/PPO MEDICAL BENEFITS**

Dear Fire Risk Management Services (FRMS) Participant:

We are excited to share some important news regarding your Blue Shield 2024 EPO/PPO medical benefits. Starting July 1, 2024, Keenan Employee Benefits Third Party Administrator (EB TPA) will be your new medical benefit administrator. Keenan EB TPA will handle all aspects of your EPO/PPO medical claims, including processing, eligibility, customer service, and ID cards. This letter provides you with important information to ensure a smooth transition, help expedite proper payment of your claims, and assist with any customer service needs you may have. If you have any questions after reading this letter, the Keenan Member Advocacy Call Center can be reached at (877) 313-1335.

With this change, rest assured that there will be no benefit changes to your EPO/PPO Medical and Prescription Drug Plan. Your coverage and provider network will remain the same.

*****NEW ID CARD – IMPORTANT INFORMATION*****

New medical ID cards will be issued to both the employee and dependents before July 1, 2024. The ID card will serve as your key to accessing both your EPO/PPO medical services AND your prescription drug benefits.

Here are the essential details:

1. **Effective Date:** On July 1, 2024, begin using your new medical ID card to access your medical and prescription drug services. Your current ID card will only be valid through June 30, 2024.
2. **Physician Visits and Prescriptions:**
 - When visiting your physician or filling a prescription for the first time on or after July 1, 2024, please present your new ID card. Your physician or pharmacy will make a copy for their records.
 - In case you forget your card, don't worry! Keenan Member Advocacy Call Center can verify your eligibility by calling (877) 313-1335. Simply provide your name and date of birth.
 - If you don't provide your doctor's office with your new ID Card, there may be a delay in processing your medical claims.
3. **Transition Period:**
 - For services incurred on or before June 30, 2024, please continue to use your existing ID cards.



Prescription Services

Effective July 1, 2024, EmpiRx will continue to provide your prescription drug services. However, you will have a new member ID#, which will be included on your new medical ID card. To ensure a smooth transition of your new prescriptions or refills under your new member ID#, please take note of the following steps:

1. New ID Card:
 - Please present your new medical ID card to the pharmacist when filling prescriptions.
 - The pharmacy will record the necessary processing information from your card to facilitate prescription fulfillment.
2. Retail/Mail Order Pharmacy:
 - For open refills at retail/mail order pharmacies, you will not need a new prescription.
 - Your existing prescriptions with refills will move to your new member ID#.
 - Simply show your ID card, and the pharmacy staff will assist you in processing the prescription.

For any questions related to the prescription drug program, please call the EmpiRx Customer Service/Pharmacist inquiries at (877) 323-0599. You can also visit the EmpiRx website at www.myemprixhealth.com.

Accessing the Blue Shield PPO Network

To maximize your medical benefits and minimize your out-of-pocket costs under your EPO/PPO medical plans, select a provider from the Blue Shield PPO network. To find a Blue Shield PPO provider, simply go online at www.blueshieldca.com/networkppo and search for a provider by:

1. Provider name and address
or
2. Provider category

If you are traveling out of state, go to www.provider.bcbs.com, and complete the following steps:

1. Click on Choose a plan
2. Scroll to the bottom and click on Browse a list of plan
3. Select: California, Blue Shield
4. Click: Confirm Selection
5. Select the provider type

If you need assistance finding a provider, the Keenan Member Advocacy Call Center will be happy to assist.



[Keenan's Member Advocacy Call Center and Keenan Benefits-Claims Portal](#)

Keenan's dedicated Member Advocacy Call Center number for FRMS is (877) 313-1335. The Member Advocacy Call Center will serve as an extension of your Benefits Department and will assist with questions regarding all types of benefit coverage. Keenan's Member Advocacy Call Center is available from 6:00 a.m. to 5:00 p.m. PST, Monday through Friday.

****Important Notice**** Effective July 1, 2024, the explanation of benefits (EOB) will be paperless. You will not receive your explanation of benefits in the mail for services on and after July 1, 2024. You will continue to receive your explanation of benefits in the mail for services prior to July 1, 2024.

For added convenience, your healthcare information is available through our benefits claims portal. You have 24/7 access to your benefit plan summaries, claims, eligibility status, and to review your explanation of benefits (EOB) and ID card. You may review your Explanation of Benefits (EOBs) for services received on or after July 1, 2024. Attached is a sample guide "How to Read Your EOB."

Once you receive your new ID card, you will be able to register at <https://www.tpabenefits.keenan.com> - please follow the prompts. Should you need assistance, the Login Requests Team can be reached via email at LoginRequests@Keenan.com, or you may call (877) 313-1335 during our regular business hours 6:00 a.m. to 5:00 p.m. PST, Monday through Friday.

We look forward to serving you!

Sincerely,

Keenan Employee Benefits TPA



Frequently Asked Questions

FRMS will have a Benefits Administrator change – Effective: July 1, 2024

1. Will there be an Open Enrollment?

This is a mid-year Benefits Administrator change from HealthNow to Keenan Employee Benefits TPA only. This is not an open enrollment, and you are not required to take any action at this time.

2. What is the maximum age that dependent children are eligible for medical benefits?

Dependent children are covered to age 26.

3. Will I get a new ID card?

Yes, new ID cards will be mailed issued to you and your dependents and also available on the Keenan Benefits Claims online portal. Access to the portal is addressed below.

Your new ID card will be used to access services for both your medical and prescription services on or after 7/1/2024. Be sure to provide your physician(s) and pharmacy with your new ID card. Destroy your old ID card after 7/1/2024.

For services prior to 7/1/2024, continue to use your existing Medical/Prescription Drug ID card.

4. Will there be changes to the medical and prescription drug benefits due to the change in the Benefits Administrator effective July 1, 2024?

No, there will be no benefit changes to the medical and prescription benefits effective July 1, 2024.

5. Will Teladoc continue to be offered?

Yes, the Teladoc service will continue to be offered to enrollees. The cost for a Teladoc visit is dependent on the plan you are enrolled in.

6. Will my medical and Rx benefit accumulators (i.e., deductibles, out-of-pocket maximums, etc.) be rolled over/transitioned to the new Benefits Administrator?

Yes, all 2024 plan year accumulators will be carried over as of July 1, 2024. However, please note that claims submitted at the end of June may take additional time to process and may not be reflected on July 1st.

7. Who should I contact if I have questions regarding my FMRS medical and Rx benefits after July 1, 2024

Contact Keenan Member Advocacy Call Center at (877) 313-1335.



8. Will I be able to access my FRMS medical benefit information through a new online portal?

Yes, you will have 24/7 access to the Keenan Benefits-Claims online portal to access your medical benefit summary, eligibility, claim status as well as review the explanation of benefits (EOB) and print an ID card.

****Important Notice** Effective July 1,2024, the explanation of benefits (EOB) will be paperless. You will not receive your explanation of benefits in the mail for services on and after July 1, 2024.**

Once you receive your new ID card, to register go to <https://www.tpabenefits.keenan.com> and follow the prompts. If you need assistance, the Login Requests team can be reached via email at LoginRequests@Keenan.com or you may call the Keenan Member Advocacy Call Center at (877) 313-1335, Monday – Friday from 6:00 a.m. to 5:00 p.m. PST.

9. Will I be required to have my providers submit new prior authorization to Blue Shield?

No, all authorizations submitted and approved by Blue Shield prior to July 1, 2024, will be moved under your new member ID number with Blue Shield.

10. How do I find a provider for my current FRMS EPO/PPO plans in the Blue Shield PPO network?

To maximize your benefits and minimize your out-of-pockets costs under the medical plan, select a provider in the Blue Shield PPO network, simply go online at www.blueshieldca.com/networkkppo and search for a provider by:

1. Provider name and address
or
2. Provider category

If you are traveling out of state, go to www.provider.bcbs.com, and complete the following steps:

1. Click on Choose a plan
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3. Select: California, Blue Shield
4. Click: Confirm Selection
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If you need assistance finding a provider, the Keenan Member Advocacy Call Center will be happy to assist.

11. Will the change in FRMS Benefits Administrator change my current Pharmacy benefits?

No, the pharmacy benefits will continue to be administered through EmpiRx with no plan benefits changes.

****Be sure to provide your physician(s) and pharmacy with your new ID card upon receipt.****
Destroy your old ID card after 7/1/2024.