

OPEN ENROLLMENT 2026

Together in Health



BUTTE SCHOOLS
SELF-FUNDED PROGRAMS





UNDERSTANDING HEALTHCARE COSTS

Serving schools and employees since 1982

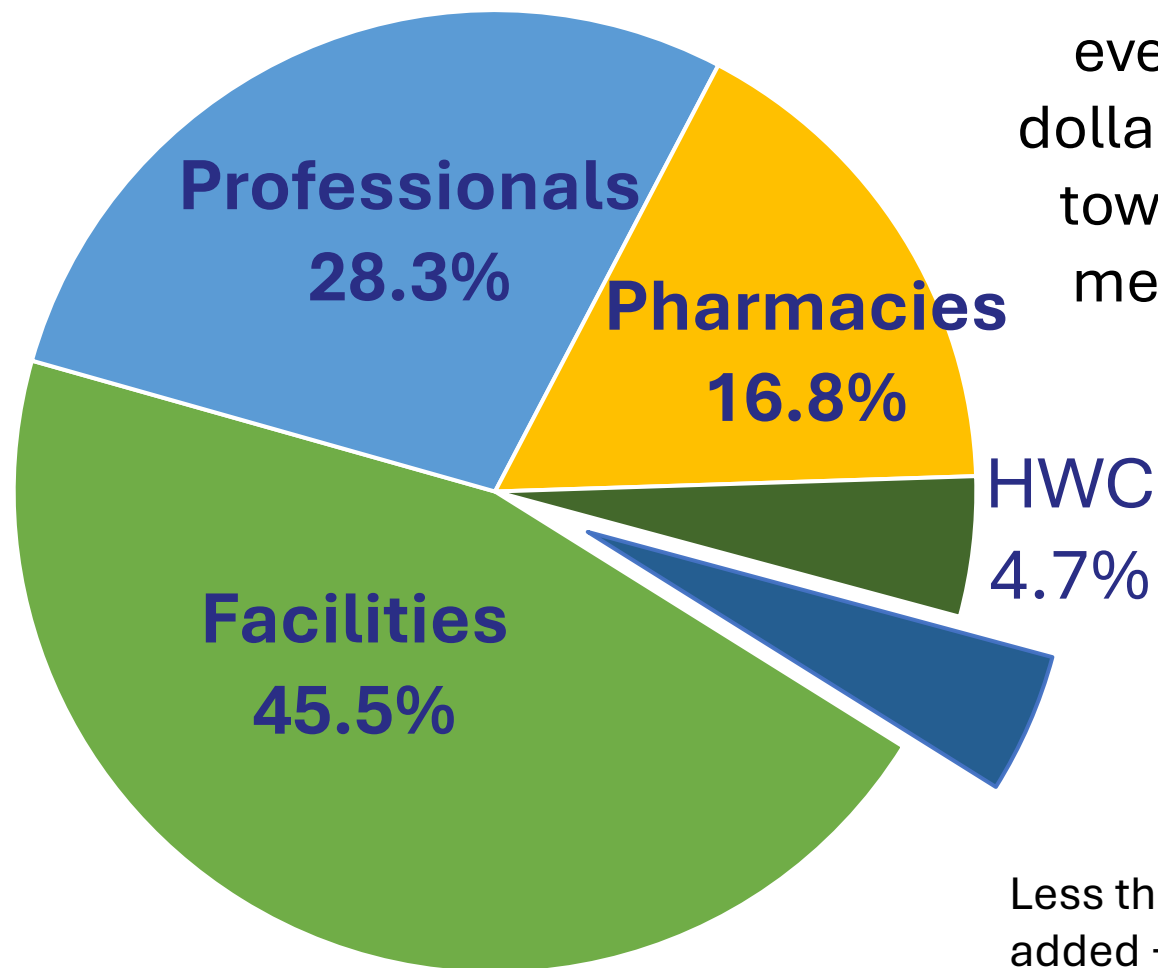


WHERE DO BSSP+SISC PREMIUMS GO?

Strength in Numbers

With the combined power of 475 California school districts, BSSP is part of a stronger, more stable health system.

By pooling risk for over 423,896 employees and their families, BSSP and SISC deliver greater value, lower costs, and peace of mind.



More than 95% of every premium dollar goes directly toward covering members' care

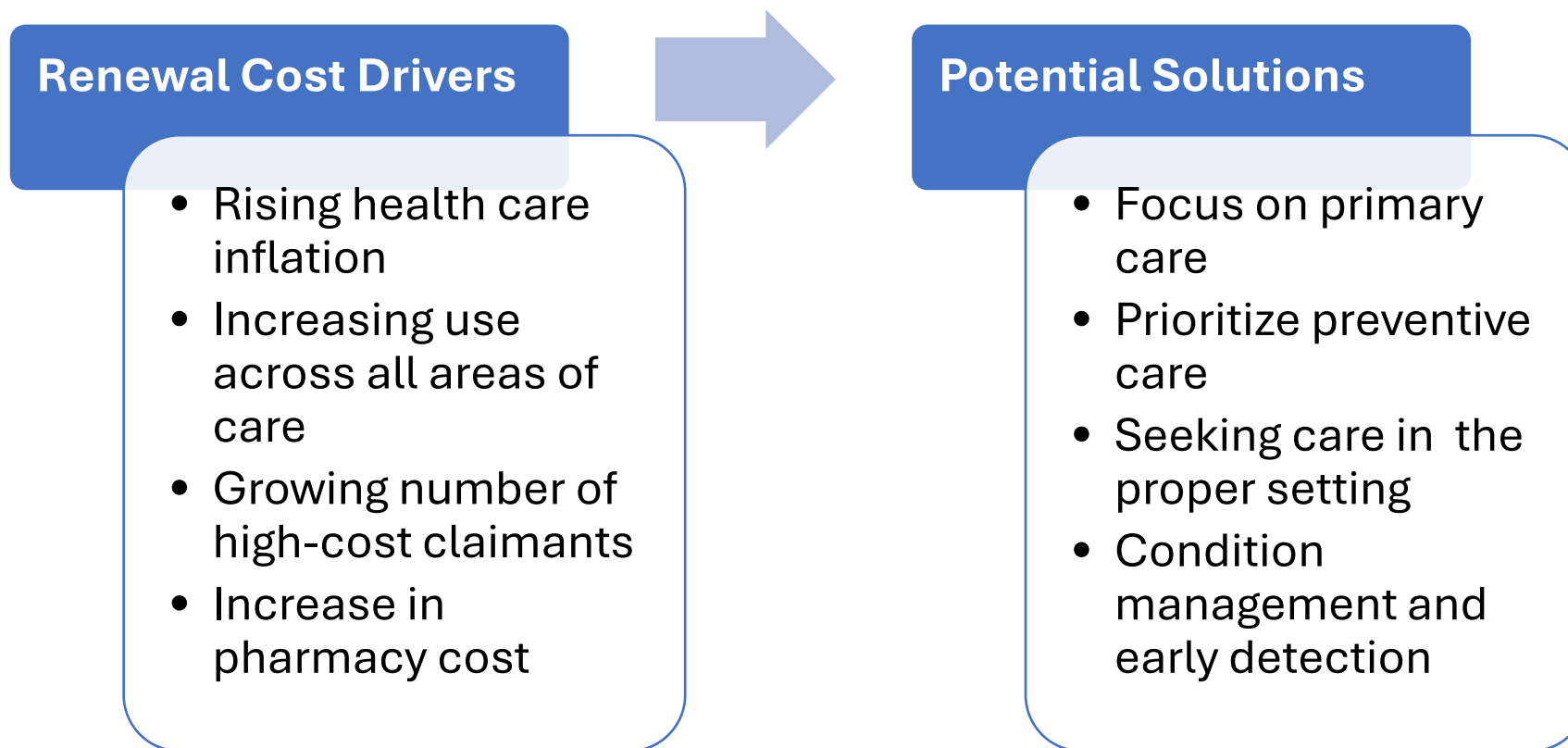
HWC
4.7%

Less than 5% is value-added + administration



MEDICAL RENEWAL BACKGROUND

SISC continues to manage costs more effectively than the broader healthcare market; however, healthcare inflation remains significant.



BSSP's Health and Wellness Centers address many of the potential solutions!



MEDICAL RENEWAL BACKGROUND

High-Cost Claimants Continue to Grow

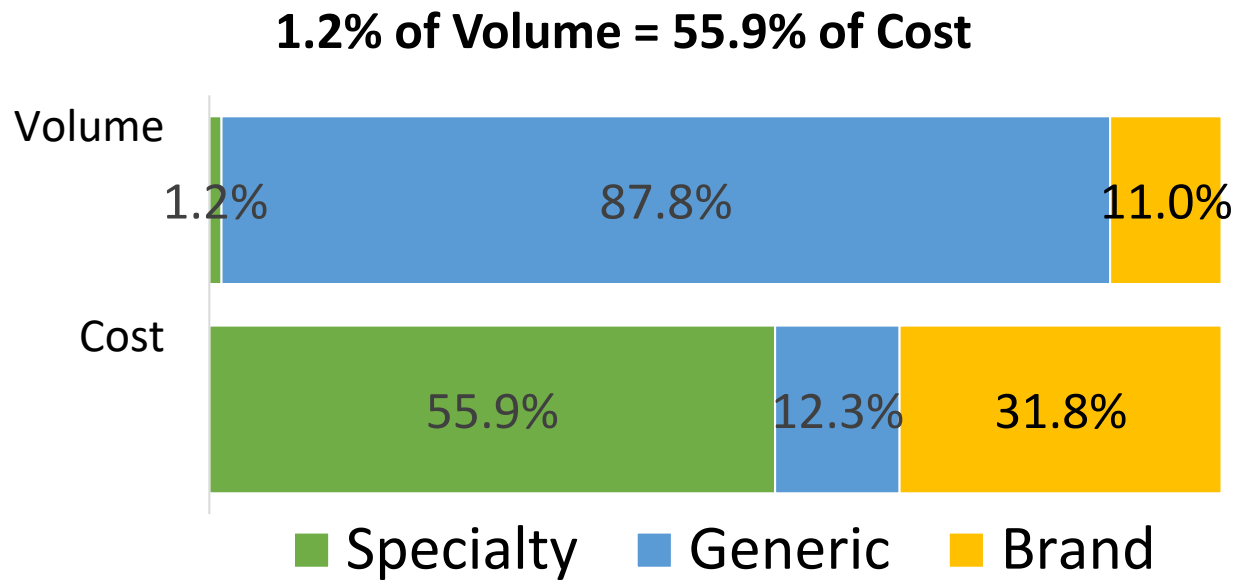
		2023	2024	2025
\$1.3M+	# of Claimants	19	41	47
	\$ Paid	\$43,100,868	\$99,493,912	\$99,673,511
\$500K to \$1.3M	# of Claimants	208	223	237
	\$ Paid	\$154,892,946	\$162,959,095	\$175,049,149
\$300K to \$500K	# of Claimants	272	347	365
	\$ Paid	\$102,982,388	\$133,013,613	\$138,914,970
Totals	# of Claimants	499	611	649
	\$ Paid	\$300,976,203	\$395,466,620	\$413,637,630

High-cost claimants are members who experience serious or complex health conditions that require extensive medical care, resulting in **more than \$300,000 in paid healthcare claims within a single year.**



PHARMACY RENEWAL BACKGROUND

The High Cost of Pharmacy is Due to a Small Percentage of Drugs



Average Cost per 30-day Supply

	2024	2025
Brand	\$309	\$341
Generic	\$13	\$16
Specialty	\$4,764	\$5,350



BENEFIT PLAN REVIEW

**Medical, Dental, Vision, Life & Discount
Program**



MEDICAL & PRESCRIPTION PLANS

For BSSP, premiums increase an average of 10.5% across all plans.

	2018	2019	2020	2021	2022	2023	2024	2025	2026	9 Year Average
BSSP Renewal	1.00%	7.50%	2.50%	5.00%	8.00%	6.10%	4.90%	11.50%	10.50%	6.3%
SISC State-Wide Renewal	0.70%	5.60%	1.90%	2.60%	3.90%	7.50%	4.40%	8.60%	9.60%	5.0%

- MDLive: \$0 copay for physical and behavioral health
- WellTheory: No-cost personalized support for autoimmune and inflammatory conditions – including labs
- Midi Health: Virtual menopause clinic where members can access expert care for perimenopause and menopause (visits subject to office visit copay/deductible)



TYPES OF MEDICAL PLANS

NON-HSA

aka TRADITIONAL PPO



- Flat-dollar copays for office visits and prescriptions
- Deductible and/or coinsurance for other services
- Optional Flexible Spending Account (FSA)

HSA/MEC aka HIGH-DEDUCTIBLE HEALTH PLAN*



- 100% of cost of medical and Rx claims until deductible is met
- Coinsurance and Rx copays apply after deductible
- Optional Health Savings Account (HSA)

**MEC 9000 plan is not HSA-eligible.*



MEDICAL PLANS

HSA/MEC Plans

Non-HSA Plans

Active Employee (w/ Deps)	80% G \$30	80% J \$30	80% L \$30	80% M \$40	HSA \$1700 ²	HSA \$5000 ²	MEC \$9000
MEDICAL	\$2,307	\$2,120	\$1,927	\$1,732	\$2,010	\$1,457	\$1,378
Calendar Year Out-of-Pocket Limit¹ Individual / Family	\$2,000 / \$4,000	\$3,000 / \$6,000	\$4,000 / \$8,000	\$4,000 / \$8,000	\$3,400 / \$6,800	\$6,350 / \$12,700	\$9,000 / \$18,000
Calendar Year Deductible Individual / Family	\$500 / \$1,000	\$750 / \$1,500	\$2,000 / \$4,000	\$3,000 / \$6,000	\$1,700 Single \$3,400 Ind / Fam	\$5,000 / \$10,000	\$9,000 / \$18,000
4th Q Carryover	Yes				No		
Office Visits							
HWC	\$0	\$0	\$0	\$0	\$25	\$25	\$25
PCP and Urgent Care	\$30 ³	\$30 ³	\$30 ³	\$40 ³	10% after deductible	30% after deductible	0% after deductible
Specialists	\$30	\$30	\$30	\$40	10% after deductible	30% after deductible	0% after deductible
MDLive Virtual Visit	\$0	\$0	\$0	\$0	\$0		
Preventive Exam	\$0				\$0		
Diagnostic Services							
Labs	20% after deductible				10% after deductible	30% after deductible	0% after deductible
X-rays / Advanced Imaging							
Therapeutic Services							
Physical or Occupational	20% after deductible				10% after deductible	30% after deductible	0% after deductible
Chiropractic							
Facility Services							
Emergency Room ⁴	20% after deductible + \$100				10% after deductible + \$100	30% after deductible + \$100	0% after deductible + \$100
Outpatient Surgery ⁵							
Office Visit (Hospital-based Facility)	20% after deductible				10% after deductible	30% after deductible	0% after deductible
Hospitalization							
PRESCRIPTION							
Calendar Year Out-of-Pocket Limit¹	\$2,500 / \$3,500				OOP Limit applies to both medical and pharmacy benefits		
Calendar Year Deductible (Brand)	\$200 / \$500				Deductible applies to both medical and pharmacy benefits		
Costco (Retail or Mail Order)	Up to 90-day supply: \$0 generic / \$90 brand after deductible				\$0 generic / \$90 brand after deductible ⁶		\$0 generic / brand after deductible ⁶
Other Retail Pharmacy	Up to 30-day supply: \$10 generic / \$35 brand after deductible				\$9 generic / \$35 brand after deductible ⁶		
Specialty	Up to 30-day supply: \$35 after deductible				Up to 30-day supply: \$35 after deductible ⁶		



HSA vs FSA

Health Savings Account

- Bank account owned and funded by you
- Contribution can be changed anytime, up to IRS annual limits based on single or family coverage
- Funds rollover each year; are portable to another employer or at retirement; no "use or lose" provision
- Must be exclusively covered under an HSA-eligible medical plan

Flexible Spending Account

- Employer-sponsored account
- Contribution set each plan year based on anticipated expenses
- "Use or lose" accounts
- Maximum of \$660 may rollover to the next plan year. Additional unused funds are forfeited to your employer

ATTENTION EMPLOYEES WITH AN FSA!

IF you're considering an HSA-eligible plan for October 1, spend down your FSA to \$0 by September 30, so you can open and begin contributing to an HSA effective October 1





HOW TO CHOOSE YOUR MEDICAL PLAN



Things that are the same:

- ✓ Network Providers/Facilities
- ✓ Preventive care claims w/ network provider paid @ 100%
- ✓ Covered procedures
- ✓ Prior authorization criteria
- ✓ Coverage away from home
- ✓ Prescription drug formulary

Things that are different:



- ✓ Monthly Premiums - payroll deduction or rebate
- ✓ The amount you pay when claims are incurred
- ✓ On HSA/MEC plans, you pay 100% of the cost of care, including prescriptions, until your deductible is met

***FOCUS ON THE DIFFERENCES BETWEEN PLANS
WHEN EVALUATING WHICH PLAN IS THE BEST FOR YOU.***



HOW TO CHOOSE YOUR MEDICAL PLAN

Questions to consider...

1. How often do you have medical and prescription claims?
2. Can you save some of the premium difference by selecting a lower-cost plan?
3. What other ways can you reduce your out-of-pocket costs for medical services?





HOW TO CHOOSE YOUR MEDICAL PLAN

Using the Plan Cost Estimator

What You'll Need Before You Start:

1. Your employer's contribution – Open Enrollment email/letter
2. Your current medical plan election – [MyHealthBenefits](#) portal.

Understanding the Calculator's Tabs

- Summary Results: Shows your estimated payroll deduction (if the number is negative) or cash back and does *not* include amounts paid out-of-pocket for claims.
- Scenario Input: Use this tab to input the number of office visits, other services and prescriptions for each of your covered family members.
- Scenario Results: The Results box lists the plans with the highest net savings (or lowest net cost, including both payroll and out-of-pocket costs) for the Preventive Care, the care Scenario you input, and the Maximum Use scenarios.

www.bssppa.org/medical-plan-cost-estimator

Medical Plan Cost Estimator
For the Plan Year Beginning October 1, 2026

Complete the boxes below to see your estimated plan costs.

1 Use the drop-down menu to select your employer (and bargaining unit).

2 Use the drop down menu to indicate your employment status.

3 Enter your district's monthly contribution (based on a 12 month schedule). If you're part time, enter pro rated amount on a 12-month basis.

4 If your district's contribution is greater than the cost of your plan, are you eligible for cash-in-lieu?

5 Use the drop-down menu to select the plan under which you are currently covered through BSSP.

6 Who else is covered under your medical plan?

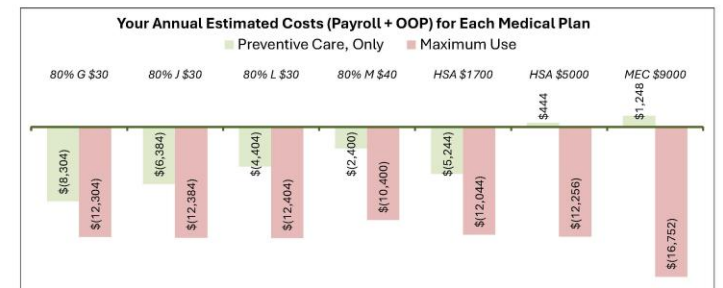
Spouse/ RDP	Child 1	Child 2	Child 3	Child 4
<input type="text" value="Yes"/>	<input type="text" value="Yes"/>	<input type="text" value="Yes"/>	<input type="text" value="Yes"/>	<input type="text" value="Yes"/>

RESULT: If you stay with your current medical plan, this is your estimated cash in lieu (or payroll deduction) for the 12 months beginning October 1st: \$ 444

If you are considering a change in medical plan, these plans provide the greatest savings (or lowest cost) in the best case (preventive care, only) and worse case (maximum use) scenarios considering the impact to your payroll and out-of-pocket (OOP) expenses.

	Plan	Payroll	OOP	Total
Preventive Care, only: wellness exams, vaccinations and screenings	MEC \$9000	\$ 1,248	\$ -	\$ 1,248
Maximum Use: individual and/or family out-of-pocket maximums are met	80% M \$40	\$ (2,400)	\$ (8,000)	\$ (10,400)

This chart helps you compare each plan by showing estimated results for Preventive Care, only and for Maximum Use. The payroll and OOP costs are included for each plan.



This is not a determination of benefits and provides an estimate of your Net Cost or Savings for coverage and care based on the information you entered. Actual costs may vary. For full benefit details download the Summary Plan Description at www.bssppa.org/medical-rx-plans.



DENTAL PLANS

✓ No rate changes

SmileWay® Wellness Benefits

If you or a covered family member has been diagnosed with certain chronic medical conditions, the following teeth and gum cleaning procedures are covered each calendar:

- Deep cleaning below the gum line

You can also choose up to four of the following procedures (any combination) each calendar year:

- Teeth cleaning
- Treatment for inflammation or infection
- Plaque removal.

Opt-in by visiting deltadentalins.com/smileway or by calling Customer Service at 800-765-6003.



Assignment of Benefits (AOB)

Delta Dental will honor Assignment of Benefits (AOB) for non-network providers, allowing plan payments to be sent directly to the provider to reduce upfront costs for members. *Provider must agree to accept AOB.*



TYPES OF DENTAL PLANS

Incentive Plans

- Plans 8, 10 and 12
- All services subject to incentive percentage payments
- Coverage begins at 70%
- Each year plan is used, member earns 10% the following January 1st
- No annual deductible
- Incentive percentage will continue unless there is a break in coverage
- PPO and Premier Providers

Standard Plan

- Plan 1, only
- D & P Services always covered at 100%
- Coverage for Basic Services covered at 80%, Major Services covered at 50%
- Annual deductible (waived for D&P)
- Enrollment in Plan 1 considered a break in coverage from incentive-style plan
- Good option for double coverage
- PPO Providers, only



DENTAL PLANS



Monthly Rate	Plan 1 \$69	Plan 8 \$115	Plan 10 \$124	Plan 12 \$145
In-Network Benefits	PPO Network	Premier + PPO Network	Plan 8 plus 100% up to \$2,000 lifetime Orthodontia Benefit per covered family member	Plan 10 with
Calendar Year Benefit	\$1,200 PPO \$1,000 non-network	\$2,200 PPO \$2,000 Premier and non-network		\$3,000 Calendar Year Benefit for PPO + Premier
Cal Year Deductible	\$50 / \$150	None		\$2,000 Calendar Year Benefit for non-network
Cleanings	3	3		100% up to \$2,500 lifetime Orthodontia Benefit per covered family member
Preventive Care	Plan pays 100%	Plan pays 70-100%		
Fillings, etc.	Plan pays 80%			
Crowns, etc.	Plan pays 50%	Plan pays 50%		
Bridges/ implants	Plan pays 50%	Plan pays 50% up to \$750		
Night Guard	Plan pays 50% up to \$750	Not Applicable		
Orthodontia	Not Applicable			



VISION PLANS

- ✓ No rate changes this year, and a polarized lens benefit is added to all plans.

Online Eyewear Retailer

Eyeconic® seamlessly connects your eyewear, your insurance coverage, and the VSP® doctor network.

Online shoppers will love:

- A huge selection of contact lenses and designer frames 24/7—and the Virtual Try-On tool.
- Free frame adjustment or contact lens consultation.
- Verification of your prescriptions and the 25-point inspection process to ensure your eyewear is just right.

Check out [Eyeconic.com](https://www.eyeconic.com) and browse the frame brands you love. You can connect to your VSP benefits, upload your prescription, and order your glasses following your exam.



Member Tip

Members with the Covered Contact Lens Benefit (Plan 4X and 8X) must order their contact lenses through the eye doctor's office instead of Costco to receive the \$50 copay for the fitting exam and 12-month supply of contacts.



TYPES OF VISION PLANS

Base Plans

- Plans 4 and 8
- Exams and materials covered every 12 months from last date of service
- Plan 4 – frames covered every 24 months
- Plan 8 – frames covered every 12 months
- Contact lenses available *in lieu of frames* every 12 months

Covered Contact Lens Plans

- Plans 4x and 8x
- Exams and materials covered every 12 months from last date of service
- Plan 4x – frames covered every 24 months
- Plan 8x – frames covered every 12 months
- Contact lenses available frames every 12 months, in addition to frame coverage



VISION PLANS



Monthly Rate	Plan 4 \$19	Plan 4X \$32	Plan 8 \$29	Plan 8X \$42
Eye Exam	Every 12 months	Plan 4 <i>plus</i> Annual supply of contacts at \$50 with no impact to allowance for glasses	Plan 4 <i>with</i> Frames every 12 months	Plan 4 <i>with</i> Frames every 12 months + Annual supply of contacts at \$50 with no impact to allowance for glasses
Copay	\$10			
Eyeglass Lenses	Every 12 months			
Frames	Every 24 months			
Frame Allowance	\$250			
Costco/Walmart/Sam's Club Frame Allowance	\$135			
Computer Vision Care	✓			
Contact Lenses	Every 12 months			
Contact Lens Exam Copay	\$60 (instead of glasses)			



GROUP LIFE AND AD&D INSURANCE

- No changes to plan benefits or premiums

Group Life

- \$50,000
- Includes accidental death and dismemberment (AD&D)

Voluntary Life

- Employee: \$10K-\$300K @ \$2.30/\$10K
 - ✓ Guarantee issue amount up to \$100,000 – **no medical questions required**
- Spouse: \$5K-\$100K @ \$1.15/\$5K
 - ✓ Minimum \$10K Employee Supplemental required
 - ✓ Guarantee issue amount up to \$30,000 – **no medical questions required**
- Child(ren): \$10K/CH @ \$0.90/EE
 - ✓ Minimum \$10K Employee Supplemental required

STOP!
Don't miss the
chance to
increase life
insurance without
medical
questions!





DISCOUNT PROGRAM



BSSP members now have access to a complete wellbeing benefit through the LifeBalance Program!

<https://bssp.lifebalanceprogram.com/>

Popular Discount Offers!

- Disneyland Resort: Exclusive pricing on select tickets
- Apple: Up to 10% off select purchases
- Cabela's: Up to \$45 off select purchases
- Anytime Fitness: 50% off standard enrollment fees, 10% off monthly dues and more
- PetMeds: \$15 off orders of \$49 or more
- Factor_: 50% off initial box, 10% off the next 12 boxes and a free add-on
- Expedia: Save on hotel stays, cruises, car rentals, flights, and more



Cabela's



FACTOR_





BENEFIT PLAN REVIEW

Voluntary Benefits

Serving schools and employers since 1982



UNIVERSAL LIFE WITH LONG TERM CARE

Program Highlights

- Active employees enrolled in a BSSP medical, dental and/or vision plan are eligible to apply
- Coverage for yourself, your spouse, and your child(ren)
- LTC benefit: up to 4% of the selected life benefit for up to 25 months
- LTC does not reduce death benefit
- The plan is portable, meaning you can take this with you, at the same rate, if you change jobs or retire.

Why Act Now?

- Premiums are based on age - the younger you are when you enroll, the more benefit you receive for the same premium
- If you're applying for the first time, you can elect up to \$100,000 for yourself only without underwriting during *this enrollment period*.

Enrollment period June 15 – June 26

Virtual appointments with an EOI Benefits Counselor





PET INSURANCE



Voluntary pet insurance provides peace of mind by reimbursing you for veterinary bills.

- Multiple plans and levels of coverage to meet the future medical needs of your four-legged family member and your budget
- EEs and retirees already participating in a BSSP medical, dental, vision or life benefit are eligible to enroll





LEGAL BENEFIT



Missed the special open enrollment? No worries!

Voluntary legal benefit is available to all active employees and retirees participating in BSSP's medical, dental, vision and/or life insurance program for just \$19.60 per month.

Plan Highlights...

- Home buying and consumer matters
- Financial matters
- Auto and traffic matters
- Family law services
- Estate planning and wills for your family *and* elderly parents

Attorney Matching Options

- **Concierge 800 Service:** Call **(888) 416-4313** to speak with a Member Services Advocate to connect you with the right attorney. Typical connection time is 48 Hours.
- **LAMP (Member Access Portal):** Members who prefer to navigate online, register at <https://legalcorner.legaleaseplan.com> and open a case for legal assistance in 5 easy steps.
- **Legal Corner:** Online Attorney Directory - Directory available to search for an attorney at your convenience.



AMBULANCE COST REIMBURSEMENT



- Reimburses deductible, copayment and coinsurance paid for emergency ground and air ambulance
- Covers all family members eligible for your medical plan
- Transportation anywhere in US and Canada
- \$14/month for any EE or non-Medicare retiree already participating in a BSSP medical, dental, vision or life benefit





ADDITIONAL VOLUNTARY BENEFITS



Comprehensive voluntary benefits to compliment BSSP's core benefits.

- ✓ 1:1 OE and voluntary benefit counseling with AF counselor trained in BSSP benefits by BSSP
- ✓ In-person, telephone and virtual appointments available
- ✓ Required for **new** pre-tax premium election
- ✓ Required for Health FSA, Dependent Care FSA, new HSA account, add or term other voluntary benefits



3 W's OF OPEN ENROLLMENT

What...Who...When

Serving schools and employees since 1982



WHAT IS OPEN ENROLLMENT?

The one time each year you can make changes for any reason



Add or drop dependents



Switch to a different plan



Re-enroll in flexible spending accounts (FSAs)



Add or drop voluntary coverages



MyHealthBenefits Portal

www.myhealthbenefits.com





WHO IS ELIGIBLE & WHO NEEDS TO PARTICIPATE?

Who is eligible to participate...

- Active Employees
- COBRA Beneficiaries
- Retirees



Do you need to participate?

- If you don't make any changes, your current benefits will roll over automatically—except for FSAs, which must be renewed every year.
- BUT...now is a great time to review the Benefits Guidebook and make sure your coverage still meets your needs.



WHO IS ELIGIBLE & WHO NEEDS TO PARTICIPATE?

Making Dependent Changes - NEW PROCESS!

Good news! Adding dependents is easier this year -- you can now do it directly in [MyHealthBenefits](#), without a paper form.

Adding a Dependent

- Enter your dependent's information in the portal.
- Select the benefits you want them enrolled in by checking the box next to their name under each benefit.
- Upload the [required documentation](#) in the [MyHealthBenefits portal](#).

Removing a Dependent

- Simply uncheck their name under the applicable benefit plan.
- If removing a spouse due to divorce, upload a copy of the divorce decree in your [MyHealthBenefits portal](#).

The screenshot shows the 'Add New Dependent' form. At the top left is a header with a person icon and the text 'Add New Dependent'. Below this is a photo of a family. To the right of the photo are 'Instructions' and a note: '*Proof of dependent status is required for enrollment. Complete the following required fields and then click on the "Save" button. To cancel this card, click on the "Cancel" button. Fields marked with an * are required.' The form contains several input fields: 'First Name *', 'Middle Name', 'Last Name *', 'Social Security No', 'Relationship *' (a dropdown menu), 'Gender *' (a dropdown menu), 'Birth Date *' (with a placeholder 'mm/dd/yyyy'), 'Date Became Legal Dependent *' (with a placeholder 'mm/dd/yyyy'), 'Full-Time College Student *' (a dropdown menu), and 'Disabled Child *' (a dropdown menu). At the bottom of the form are three buttons: 'Reset', 'Save' (highlighted in green), and 'Cancel'.



WHO IS ELIGIBLE & WHO NEEDS TO PARTICIPATE?

Uploading Required Documents

- Under Profile, click My Documents from the drop-down menu
- In the My Documents section, click Add New
- Choose the file you are uploading
- From the Type drop-down menu select the document type that corresponds with the document you uploaded. NOTE for Tax Forms, select “Other”
- Click Save

All dependent changes are reviewed for completeness and accuracy.

Incomplete or missing documentation cannot be approved.

You'll receive an email from alerts@myhealthbenefits.com once your documents are reviewed. If a document is denied, you'll find next steps in the My Documents section of the [MyHealthBenefits portal](#).



WHEN IS OPEN ENROLLMENT?

Open Enrollment for...

- Medical, Dental Vision
- Voluntary Life with The Hartford
- Voluntary Legal Benefit
- Voluntary Ambulance Reimbursement

...must be completed in the MyHealthBenefits Portal

www.myhealthbenefits.com and **ends Wednesday, July 15th at 3pm!**



*Don't miss the
guarantee issue
opportunity for
The Hartford
Voluntary Life
Insurance!*



WHEN IS OPEN ENROLLMENT?

Open Enrollment for...

- Voluntary Pet Insurance
...must be completed online at www.petsbest.com/bsspets
- American Fidelity
 - Flexible Spending Accounts (Health & Dependent Care)
 - **New** pre-tax premium election
 - Other American Fidelity Voluntary Benefits...must be completed by appointment at www.americanfidelity.com/bssp
and **ends Wednesday, July 15th at 3pm!**

Open Enrollment for...

- Voluntary Universal Life with Long Term Care
...must be completed by appointment at <https://benefitsconcierge.schedapple.com/>
with code “BUT” between **JUNE 15 – JUNE 26 ONLY**



*Don't miss
the guarantee
issue
opportunity
for Universal
Life w/LTC!*



OPEN ENROLLMENT RESOURCES

<https://www.bsspjpa.org/open-enrollment-2026>



BSSP

- ✓ www.bsspjpa.org
- ✓ 530-879-7438
- ✓ bssp@bsspjpa.org



Benefits Counseling

- ✓ BSSP 1-on-1
- ✓ American Fidelity
- ✓ EOI for Long Term Care



Other Resources

- ✓ District Benefits Staff
- ✓ Videos On Demand

The screenshot shows the BSSP website's Open Enrollment 2026 page. At the top, there is a navigation bar with links for Home, Health and Wellness Center, Members, Districts, Administration, and Contact Us. A search box is located in the top right corner. The main heading is "Open Enrollment 2026". Below this is a banner image with the text "OPEN ENROLLMENT 2026 Together is Healthier". The page states that Open Enrollment is happening now and ends on Wednesday, July 15, 2026 at 3:00pm. It also mentions that all benefit elections are effective October 1, 2026. A list of election options includes enrolling in benefits, adding/removing dependents, and reviewing options for the new plan year. A "CLICK TO WATCH THE VIDEO" button is visible. On the right side, there are two sidebar widgets: "MyHealthBenefits" with a "Benefit Elections" section and a "MYHEALTHBENEFITS PORTAL" button, and another "MYHEALTHBENEFITS DOCUMENT UPLOAD TUTORIAL" section with a "CLICK TO WATCH THE VIDEO" button. The Butte Schools logo is at the bottom right.



ADDED VALUE BENEFITS

Serving schools and employees since 1982



HEALTH AND WELLNESS CENTERS

Preventive, primary and acute care as well as care coordination



Onsite lab draws and dispensary



Convenient, extended hours and locations



BUTTE SCHOOLS
HEALTH AND WELLNESS CENTER



\$0 on non-HSA/MEC plans; meds dispensed are \$5 or \$10
\$25 on HSA/MEC plans. Med refills w/out appt are \$5 or \$10 for HSA/MEC plans.



Provider may consult with panel of specialists to provide you specialized care



Telephone appointments, when appropriate, for your maximum convenience



MENTAL HEALTH SUPPORT

BENEFIT HIGHLIGHTS

24/7 Help with Personal Concerns

Anthem EAP



Confidential resources when you or a family member need help with stress, emotional, marital, addiction, legal and financial issues.

Online Therapy

Talkspace



Regularly send text, audio, and video messages to a dedicated licensed therapist anytime, anywhere for ages 13+. Live sessions via chat, audio and video are also available.

Please enter the letters "EAP", a space, and your company code, SISC, in the "Organization Name" field to access services.

Emotional Well-Being Resource

Learn to Live



Self-guided digital Cognitive Behavioral Therapy (CBT) programs for employees and their families. Personalized care modules to promote skill-building, resiliency and mindfulness.

WHO IS ELIGIBLE & HOW TO GET STARTED

ALL employees of a BSSP district

Call 800-999-7222

Visit anthemeap.com Code: SISC

ALL employees of a BSSP district

Visit anthemeap.com Code: SISC

Click the Get Started button in the Find a Counselor block to be directed to the "Talkspace" option.


Click the "Visit Portal" link to be taken to the Talkspace registration page.

ALL employees of a BSSP district

Call 800-999-7222

Visit anthemeap.com Code: SISC

Scroll down to Self-Paced Courses and Resources.

Click the  next to Emotional Well-being Resources to be directed to the Learn to Live registration page.



ADDED VALUE BENEFITS

Benefit Highlight	Benefit Provider	All EEs	All Medical Plans
Employee Assistance Plan	Anthem EAP	\$0	
Emotional Well-Being	Learn to Live	\$0	
24/7 Virtual Medical & Mental Health Needs	MDLive		\$0
Digital Therapy and Health Coaching	Vida Health		\$0
Expert Medical Opinion	Teladoc		\$0
Enhanced Cancer Benefit	Lantern		\$0
Virtual Maternity & Postpartum Support	Maven		\$0
Virtual Primary Care	Centivo Care		\$0
Virtual Autoimmune Care	WellTheory		\$0
Digital Therapy for Back and Joints	Hinge Health		\$0
Hip, Knee and Spine Surgical Benefit	Carrum Health		\$0 / Ded
Virtual Menopause Clinic	Midi Health		Copay / Ded



BUTTE SCHOOLS
SELF-FUNDED PROGRAMS

THANK YOU!

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