



BUTTE SCHOOLS

SELF-FUNDED PROGRAMS

Enloe Medical Center has issued contract termination notices to Anthem Blue Cross Effective November 1, 2018

Note: There will be no disruption in coverage for Medicare-eligible retirees covered under BSSP's CompanionCare plan if Anthem and Enloe do not reach an agreement.

This email contains important information following the Anthem forum held on October 11, 2018. Please be sure to read it in entirety. We will continue to distribute emails as we learn of important developments on this issue.

Here are quick links to help you navigate the most important information and frequently asked questions:

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What is the status of Anthem and Enloe negotiations?

Enloe Medical Center has issued a notice to terminate its contract with Anthem Blue Cross effective November 1, 2018. BSSP's medical benefits are provided through a partnership with Self-Insured Schools of California (SISC) and under a contract with Anthem Blue Cross. A large number of BSSP+SISC members access health care every day at Enloe Medical Center, its other facilities and specialty practices.

There is no mandate to seek care at Enloe, although in many cases there are no

alternatives for care within Chico. Your BSSP+SISC coverage is available with any Anthem network provider, including Adventist Health Feather River (Paradise) and Oroville Hospital, practices affiliated with those organizations, and other independent practices and facilities. *Only Enloe Medical Center and its practices are impacted by the notice of termination.*

Anthem and SISC representatives attended a BSSP member forum on October 11th, at which the following information was presented by Anthem:

- Enloe is requesting significant increases in rates, including some at more than 40% over a 3-year period.
- Anthem will continue to negotiate in good faith towards a new multi-year contract with Enloe, and another meeting is scheduled for the week of October 15th.
- Enloe always has the option of extending or even retracting its termination while negotiations continue, but it is too early to know if that will happen in this situation.

Members attending were also reminded that ...

- Any increase in the Enloe contract will have a direct increase on members' out of pocket costs and, ultimately, monthly premiums.
- Rate increases will not impact Anthem's profits on BSSP+SISC members.
- The contract termination affects every community member covered under Anthem through their employer or a private policy, except those covered under Medi-Cal or Medicare.
- Only care at Enloe Medical Center and its affiliated practices is impacted by the contract termination. Coverage at other area hospitals and independent practices continues without interruption. You may search for alternative network providers [here](#).
- BSSP+SISC plans are operated as a public entity. There is no profit in the monthly premiums which are set by BSSP+SISC at a rate to cover the cost of claims (about 95%) plus administration. Here's a copy of the [SISC handout](#).
- While there are alternatives to Anthem, they are subject to having the same issues as the Anthem/Enloe contract. If Anthem and Enloe do not reach contract resolution within a reasonable timeframe, then BSSP will be working with SISC to consider the cost impact and timing of a change in carriers.

While a fair and reasonable resolution prior to November 1 is in the best of interest of Anthem and Enloe and, most importantly, everyone covered by Anthem, you should prepare for Enloe Medical Center, its other facilities and practices to be out of network beginning November 1 and until a resolution is reached.

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What can I do to help Anthem and Enloe reach a resolution?

BSSP has expressed to Enloe Medical Center the urgent need for a fair and reasonable resolution to the Anthem contract. Here's a copy of the [BSSP letter](#).

You are encouraged to share your concerns with your Enloe physician. Additionally, you may reach out to Enloe Medical Center to share your concerns as well via email at mike.wiltermood@enloe.org and BoardOfTrustees@enloe.org. Below is sample content which you may copy, paste and edit, particularly those areas in **[bracketed red text]**, as you feel appropriate:

Dear Mr. Wiltermood and Trustees,

It is my understanding that Enloe has initiated the termination of Anthem's contract effective November 1, 2018 and that Enloe has proposed a new contract which

contains rate increases of more than 40% on some charges over the proposed 3-year term. As resident of the Chico community [or Butte County] and patient of Enloe Medical Center [and/or Enloe's OB-GYN Associates, Cardiology Services (or whatever Enloe specialty practice you see)], I urge you to resolve the contract with Anthem prior to the November 1 expiration date at a fair and reasonable rate increase which is well below the proposed 40%. If not resolved prior to November 1, please do what other health systems have done to relieve anxiety, confusion and disruption to your patients ... extend the current contract and delay termination while negotiations with Anthem continue.

The cost of healthcare is already unaffordable. Enloe's requested increases are not sustainable. As a community member covered under a self-funded plan, my monthly premiums will be significantly impacted as claim costs increase under the contract. Additionally, I will pay 100% of the rate increases directly for those claims applying to my deductible.

A substantial portion of your patients are covered under self-funded plans through Butte Schools Self-Funded Programs (K-12 schools, Butte County Office of Education and Butte-Glenn Community College District totaling 8700 Butte County residents), California's Valued Trust (some employees of Paradise Unified School District and Oroville Union High School District as well as employees of Thermalito Union Elementary School District) and CalPERS (state employees and those of the County of Butte, California State University, Chico and other municipalities within Butte and neighboring counties). Your increased rates will be passed on directly as increased premiums and out of pocket costs to everyone covered by these self-funded plans.

I have previously received high quality care at Enloe and would like to continue being an Enloe patient. I also appreciate Enloe's community outreach efforts. However, if an agreement with Anthem is not reached prior to the November 1 termination date imposed by Enloe, I will be forced to seek care from other Anthem network facilities and practices within Chico and neighboring communities as I cannot afford to seek care from non-network providers.

On behalf of all patients and community members covered under Anthem's commercial contracts, I urge you to resolve contract negotiations immediately.

Sincerely,

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What if I am in-patient at Enloe Medical Center on the day the contract terminates?

If you are in-patient at 11:59 PM the day before the contract terminates, then you will continue to receive uninterrupted care at Enloe Medical Center until you are discharged. In addition, your in-network benefit levels will apply for the entire in-patient stay.

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What if I need to complete a course of treatment (continuity of care) at Enloe Medical Center after the contract termination date?

If you began a course of treatment at Enloe Medical Center before the contract termination date for one of the following conditions, your physician can request continuity of care by calling Customer Service/Coastal at 800-564-7475. Continuity of care applies to:

- Members in an active course of treatment for an acute medical or behavioral health

condition

- Members in an active course of treatment for a serious chronic condition
- Members who are pregnant, regardless of trimester
- Members with a terminal illness
- Members who are newborn children between the ages of birth and 36 months
- Members with a surgery or other procedure that was authorized by Anthem Blue Cross prior to the termination date and scheduled to occur within 180 days after the termination date.

Eligibility for continuity of care depends on many factors and continuity of care/completion of covered-services will be considered by the Anthem Blue Cross Transition Assistance Department on a case-by-case basis. When a case is approved, the claim is processed at in-network benefit levels.

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What if I do not qualify for completion of covered services / continuity of care? Can I receive care from Enloe Medical Center anyway?

If you elect to receive non-emergency care at Enloe Medical Center, its other facilities or practices, you will likely be responsible for significant out of pocket expenses which are not credited to out of pocket maximums.

Network physicians that admit patients to Enloe Medical Center will be informed about the contract termination so that members will be admitted to participating network facilities following the contract's termination date. [Click here](#) to search for alternative network facilities.

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If I do not have access to an alternate participating provider or a particular service is not available elsewhere, can I receive that service from Enloe Medical Center?

Anthem Blue Cross assures you will have timely access to care. If a service is not available at an alternate participating provider, you may request an out-of-network referral by contacting Customer Service/Coastal at 800-564-7475. Requests will be reviewed on a case-by-case basis pursuant to the Anthem Blue Cross out-of-network referral policy. When an out-of-network referral is approved by Anthem Blue Cross, your in-network benefit levels will apply. However, because Enloe Medical Center will no longer participate in the Anthem Blue Cross provider network, you may be responsible for higher out of pocket expenses. Every effort will be made to assist you in understanding the potential financial consequences of the decision to seek services from a non-participating provider.

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What if I need emergency medical care at Enloe Medical Center following the contract's termination date?

A hospital's emergency medical services do not require pre-authorization, regardless of where they are delivered. Enloe Medical Center must continue to provide services for members requiring emergency care. Coverage will be provided according to the member's policy benefits.

Anthem Blue Cross encourages members to make informed decisions about when to use urgent care as opposed to emergency room care. Urgent care is appropriate when a member

needs a physician's attention for a condition that is non-life threatening. Any member needing urgent care, but whose physician or network provider is unavailable, should go to the nearest immediate or urgent care facility.

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