

Schedule of Benefits Plan 10 Peralta CCD - Local 39 Post 6/30/2012 Retirees & Eligible Dependents

Kaiser Senior Advantage HMO (SISC) HRA

Submit Eligible Expense Starting 4/1/2024

	Employee Pays	Employer Pays	
Benefits			
Emergency Room	\$35	\$15	
Ambulance	\$0	\$50	
Out of Network		Peralta would not reimburse for anything that is now out of network (only in-network reimbursements will be allowed)	
	Employee Pays	Employer Pays	
Mail Order Brand	\$30	Peralta will Reimburse Eligible Expenses	
	Additional	Additional Benefit	
Hearing Aid	Kaiser pays first \$500 per hearing aid every 36	Peralta reimburses \$1,000 per hearing aid	
	months	every 36 months	
Vision	Kaiser pays first \$150 for eyeglass frames every	Peralta reimburses \$25 for eyeglass frames	
	24 months	every 24 months	

^{*} Please refer to the Kaiser Plan document for complete details of covered benefits.

Your Navia reimbursement plan follows your Kaiser's benefits.

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