

Schedule of Benefits Plan 14 Peralta CCD - Post 6/30/2012 All Retirees & Dependents Except Local 39

Kaiser Traditional HMO (SISC) HRA

Submit Eligible Expense Starting 4/1/2024

	Employee Pays	Employer Pays
Benefits		
Emergency Room	\$35	\$65
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	\$5	Peralta will Reimburse Eligible Expenses
Mail Order Brand	\$5 Additional	<u> </u>
		<u> </u>
Mail Order Brand Hearing Aid	Additional	Benefit
	Additional Kaiser pays first \$500 per hearing aid every 36	Benefit Peralta reimburses \$1,000 per hearing aid

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

Your Navia reimbursement plan follows your Kaiser's benefits.

CA Lic. #0D35033

