

PREFERRED PROVIDER ORGANIZATION (PPO) BASIC PLAN ADDENDUM FOR 2017

This addendum contains information on the Preferred Provider Organization (PPO) Basic Plan with regards to Step 4: Administrative Appeal Process located on page 98 and page 59 Gender Reassignment of the Evidence of Coverage Booklet. We apologize that this information was not available at the time your Evidence of Coverage booklet was printed. Please put this important information with your Evidence of Coverage booklet for future reference.

STEP 4: ADMINISTRATIVE APPEAL PROCESS

Effective January 1, 2017, participants and family members covered under the CAHP Health Benefits Trust is no longer eligible to file an appeal request for a CalPERS Administrative Review.

If you remain dissatisfied after exhausting the Internal Review process for benefit decisions and the Independent External Review in cases involving Medical Judgment, you and/ or your Authorized Representative may proceed to what is now STEP 4: BINDING ARBITRATION (OR SMALL CLAIMS COURT)

The **Gender Reassignment** exclusion on page 59, under the section entitled **MEDICAL EXCLUSIONS AND LIMITATIONS**, is deleted and of no further effect.