

**Flu Shots,  
Health Fairs,  
CDL &  
Firefighter  
Physicals**

## **Annual Flu Shots**

- Any member enrolled in a CHP medical plan
- Covered at 100% up to reasonable and customary rate
- Not subject to Deductible, Copay or Coinsurance

## **Annual Health Fair**

- Enrolled in one of CHP medical plans
- Men and women over the age of 19
- Maximum reimbursement of \$40 total per year
- PSA testing covered at 100% up to reasonable and customary rate

## **DOT / CDL Physicals**

- Enrolled in one of CHP medical plans
- Member employees only & if required for job
- Covered up to \$180.00 every 24 months
- Not subject to Deductible, Copay or Coinsurance

## **Firefighter Physicals**

- Enrolled in one of CHP medical plans
- Member employees only & if required for job
- Reimbursement limit capped at the current CDL level of reimbursement
- Every 2 years

## Flu Shot Process

CHP reimburses employees and covered dependents for their annual flu shots. Employees may submit for reimbursement one of two ways.

1. Employee submits the flu shot reimbursement paperwork to Anthem.
  - Flu Shot Claim Form – **See Appendix 6.**
  - Copy of flu shot receipt.
2. Employee submits proof of flu shot to the Entity Contact. Entity Contact sends information to CHP.
  - Entity Contact submits the following to CHP:
  - Receipt from Flu Shot Administrator is REQUIRED
  - Excel spreadsheet including the following:
    - Employee /Dependent Name
    - Date of Birth
    - Dollar Amount of Flu Shot
    - Date Flu Shot was administered
  - Flu Shot HIPAA Authorization – **See Appendix 6.** The HIPAA Authorization Form is for your records only. CHP does not need a copy.
  - CHP will issue a reimbursement check to the Entity, allowing the Entity to distribute the flu shot reimbursements to the employees.

## Health Fair Process

CHP reimburses employees up to \$40 for annual health fairs.

1. Please collect the following items and send to your Benefits Administrator
  - Health Fair Claim Form – **See Appendix 6.**
  - Copy of health fair receipt.
  - HIPAA Authorization Form – **See Appendix 6.**
    - This allows the entity contact to collect the claim forms and receipts for the Health Fair and submit to CHP. The HIPAA Authorization Form is for your records only. CHP does not need a copy.
2. Your Benefits Administrator will submit the Health Fair Claims to Anthem for processing.
3. Each employee will receive a reimbursement check mailed to the address on file at CHP.
4. Or, reimburse an entity/group directly for a Health Fair for their employees by submitting a spreadsheet showing the Date of Birth, Name and total cost on each participant for the services provided. Receipt from the vendor doing the Health Fair and either a Health Fair Claim form or Health Fair HIPAA Release form on each participant.

## CDL Physical Claim Process

As an added benefit to the members of the County Health Pool, CHP offers members a CDL physical benefit covered at 100% up to reasonable and customary rates once every 24 months. Access to this benefit is available to participants for which a CDL Physical is required for employer purposes. Since this is a unique benefit, CHP has a specific claim form that is to be utilized for submission and proper adjudication of the CDL Physical Claim.

Effective May 21, 2014, motor carriers and drivers may only use medical examiners listed in the National Medical Registry to conduct physical exams of drivers. Member Entities will be responsible for checking the registry to determine if a provider appears on the list. To ease in this transition, CHP will cover both in- and out-of-network CDL Physicals up to \$180 dollars every 24 months, if required for employment. The National Medical Examiner Registry may be found at <https://nationalregistry.fmcsa.dot.gov>.

Effective 2016, members with specific medical conditions required to have a CDL physical more often than every 24 months will also be reimbursed by CHP up to the \$180.00.

CDL Physical Claims may be submitted one of two ways:

1. Provider submits the claim manually on the employee's behalf; or
2. Entity Contact submits the following items to CHP Benefits Administrator:
  - Completed CDL & Firefighter Claim Form – **See Appendix 6.**
  - Copy of provider's claim form.

## Firefighter Physical Claim Process

As an added benefit to the members of the County Health Pool, CHP offers participants a Firefighter physical benefit reimbursement limit capped at the current CDL level of reimbursement. Access to this benefit is available to participants for which a CDL Physical is required for employer purposes. Since this is a unique benefit, the County Health Pool has a specific claim form that is to be utilized for submission and proper adjudication of this claim.

Effective May 21, 2014, motor carriers and drivers may only use medical examiners listed in the National Medical Registry to conduct physical exams of drivers. Member Entities will be responsible for checking the registry to determine if a provider appears on the list. To ease in this transition, CHP will cover both in- and out-of-network CDL Physicals up to \$180 dollars every 2 years, if required for employment. The National Medical Examiner Registry may be found at <https://nationalregistry.fmcsa.dot.gov>.

Firefighter Physical Claims may be submitted one of two ways:

1. Provider submits the claim manually on the employee's behalf; or
2. Entity Contact submits the following items to CHP Benefits Administrator:
  - Completed CDL & Firefighter Claim Form – **See Appendix 6.**
  - Copy of provider's claim form