



GRAND VALLEY
STATE UNIVERSITY®

RETIREE MEDICAL BENEFITS – 2019

Presented By
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Advantage Benefits Group



AGENDA

- Under Age 65 Options (Pre-65)
- Age 65 and Older Options (Post-65) *Party Time!*
- Q&A, Examples throughout

RETIREE MEDICAL OPTIONS – PRE 65

1. GVSU Retiree Medical Plan
2. COBRA continuation coverage
3. Individual Coverage
4. Marketplace Coverage

RETIREE MEDICAL OPTIONS

I. GVSU RETIREE MEDICAL PLAN

GVSU Retiree Medical Plan

- See GVSU Health and Wellness Website for details
 - www.gvsu.edu/healthwellness/benefits-in-retirement-446.htm
- “Official Retiree” Age and Service = 75
- Pre-65 Option - Coverage similar to GVSU Standard PPO but without prescription drug coverage (discount card available)
 - 2019 Monthly Cost (20 years of service) = \$299.00
 - 2019 Monthly Cost Spouse = \$324.00

RETIREE MEDICAL OPTIONS

2. COBRA CONTINUATION COVERAGE

COBRA Continuation Coverage

- Up to 18 months or until entitled to Medicare whichever is less
- Medical & Prescription Drugs
- Dental

- **Cost (2018)**
 - GVSU Standard Single
 - \$590.69 per month
 - GVSU HDHP Single
 - \$493.22 per month
 - Dental Single
 - \$33.94 per month

RETIREE MEDICAL OPTIONS

3. INDIVIDUAL PLAN

Individual Plan

- Number of carriers:
 - Priority Health
 - Blue Cross Blue Shield
 - Molina Healthcare
 - Humana

- Cost varies based on smoker status, age, zip code and plan design

RETIREE MEDICAL OPTIONS

4. MARKETPLACE PLAN

Marketplace Plan (www.healthcare.gov)

- Advance Premium Credits (subsidies) based on household income and age
- Metal Tier Plans – Platinum, Gold, Silver, Bronze
- Multiple Carriers available (Blue Cross Blue Shield, Priority Health, Blue Care Network)

Instructions to navigate the

www.healthcare.gov site:

- 1) Click “**See Topics**” from the top ribbon on the homepage
- 2) Click “**See plans and prices**”

Open Enrollment Period:

- USUALLY November 1 – December 15th
- **Average monthly cost (age 62, non-smoker, zip: 49401, effective 1/1/19)**
 - Silver Plan for Single: \$1,000 (15 plans available) - \$366 after subsidy
 - Gold Plan for Single: \$1,335 (5 plans available) - \$701 after subsidy
 - Both plans have a subsidy of \$633 per month based on household income of \$36,000

For Plan and Cost Estimates outside of Open Enrollment, go to: www.healthsherpa.com

WILL I QUALIFY FOR LOWER COSTS ON MONTHLY PREMIUMS? – MARKETPLACE PLAN

| Savings Programs you may qualify for: | Estimated 2019 Household Income – based on number of people in your household *NOTE: Eligibility does vary based on age of applicant. | | | | | |
|---|---|---------------------|---------------------|----------------------|----------------------|----------------------|
| | 1 | 2 | 3 | 4 | 5 | 6 |
| Free or low-cost coverage through Medicaid based on income alone | Below \$16,753 | Below \$22,714 | Below \$28,676 | Below \$34,638 | Below \$40,599 | Below \$46,561 |
| A Marketplace health plan with lower monthly premiums plus savings on out of pocket costs, like deductibles and copayments | \$16,753 - \$30,350 | \$22,714 - \$41,150 | \$28,676 - \$51,950 | \$34,638 - \$62,750 | \$40,599 - \$73,550 | \$46,561 - \$84,350 |
| A Marketplace health plan with lower monthly premiums | \$30,350 - \$48,560 | \$41,150 - \$65,840 | \$51,950 - \$83,120 | \$62,750 - \$100,400 | \$73,550 - \$117,680 | \$84,350 - \$134,960 |
| You won't qualify for savings on a Marketplace insurance plan. You can buy insurance through the Marketplace at full price, or buy from other sources | Above \$48,560 | Above \$65,840 | Above \$83,120 | Above \$100,400 | Above \$117,680 | Above \$134,960 |

WHAT DOES AN AVERAGE (SILVER) PLAN COST?

COSTS APPLY FOR INDIVIDUAL OR MARKETPLACE (IF ELIGIBLE FOR SUBSIDY, IT WILL REDUCE PREMIUM)

- MyPriority Silver 3200 HMO (Priority Health)
 - Individual Premium (age 62, zip 49401) = \$1,000 per month
 - \$3,200 Single Deductible, \$7,900 Out of Pocket Maximum
 - \$30 Copay Primary Care visits. Specialist \$45 after deductible
 - \$5 Generic Drugs Before Deductible
 - \$75 after deductible-preferred brand, 50% specialty copays after deductible
 - 30% member coinsurance after deductible for most other services
- Meridian Base Silver - HMO (Meridianchoice)
 - Individual Premium (age 62, zip 49401) = \$1,003 per month
 - 3,000 Single Deductible, \$6,000 Out of Pocket Maximum
 - \$100 copay for Primary Care Physician, 25% copay after deductible for Specialist
 - 25% copay after deductible for Emergency Room
 - 25% coinsurance after deductible for most services
 - \$20 Generic Drugs Before Deductible
 - 25% after deductible for Brand Name and Specialty Drugs

RETIREE MEDICAL OPTIONS – POST 65

1. Medicare Part A, B and D
2. Medicare Advantage Plan
3. Medicare Supplemental Plan



RETIREE MEDICAL OPTIONS - MEDICARE

Post-65 GVSU Retiree Medical Stipend to help pay for Medicare Premiums

- 2019 Monthly Stipend (20 years of service/age 65) = \$52.50
- 2019 Monthly Stipend Spouse = \$27.50
- Who runs the Medicare Program?
 - The Centers for Medicare & Medicaid Services (CMS) is the Federal agency that runs Medicare. CMS is part of the U.S. Department of Health and Human Services
 - You enroll in Medicare through the Social Security Department
 - <https://www.ssa.gov/benefits/medicare/>
 - Resource sites:
 - <http://www.uspreventiveservicestaskforce.org/uspstf/uspsabrecs.htm>
 - www.medicare.gov
 - www.medicarerights.org – detailed timeline
 - www.kff.org – Kaiser Family Foundation
 - <http://offers.priorityhealth.com/medicarefordummies>

MEDICARE

Medicare Benefits

Part A:

Hospital Coverage

Part B:

Medical Coverage

Part D:

Prescription Drug Insurance

Part C (Advantage Plan):

Combines Part A, B and D into one package

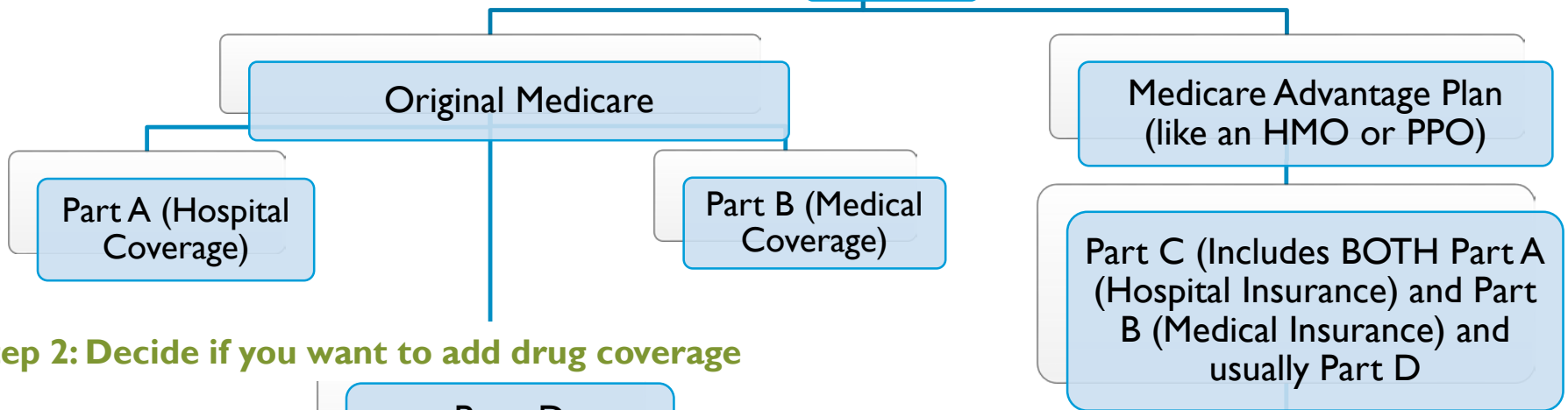
Medigap (Supplemental Plan):

Secondary to Traditional Medicare

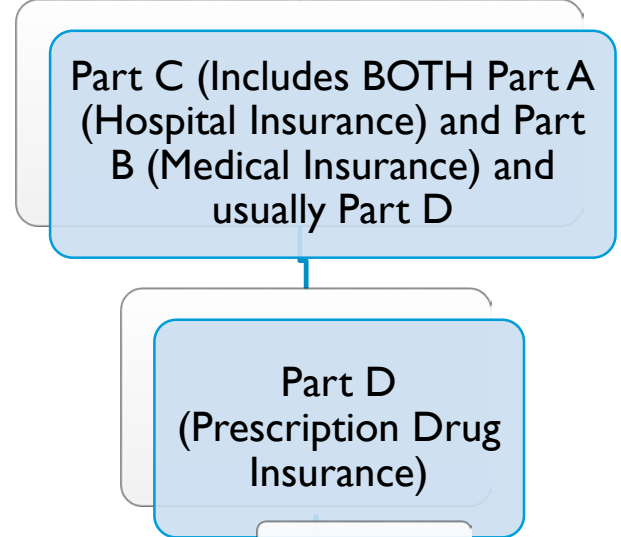
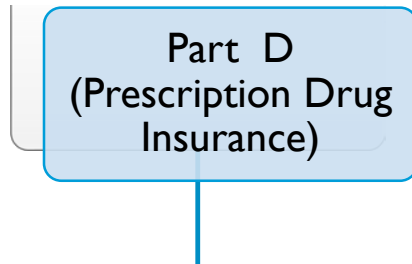
MEDICARE COVERAGE CHOICES

START

Step 1: Decide how you want to get your coverage



Step 2: Decide if you want to add drug coverage



Step 3: Decide if you want to add supplemental coverage



END

CHECKLIST: 5 THINGS TO DO WHEN YOU GET MEDICARE

1) Fill out an Authorization Form

Medicare can't give personal health information about you to anyone unless you give permission in writing first

2) Make a "Welcome to Medicare" Physical Exam Appointment

This free, one-time comprehensive exam is offered during the first 12 months you have Medicare

3) Sign up for MyMedicare.gov

MyMedicare.gov is a secure online service where you can access your personal Medicare information 24 hours a day, every day

4) Choose and Join a Medicare Drug Plan (Part D)

If you're new to Medicare, you have 7 months to join a Medicare drug plan

5) Download a Copy of "Your Medicare Benefits"

Medicare's official "Your Medicare Benefits" publication explains the rules about which health care services and supplies Medicare covers

ENROLLMENT:

- I am still working for an employer with more than 20 employees and they provide me with health insurance:
 - You do not have to sign up for Medicare. You can wait until you are done working as you can sign up at that time and have no penalty.
 - You can sign up for Part A as that does not cost anything.
 - If you are covered under a HDHP with a Health Savings Account, you will not be able to contribute to your H.S.A. if you sign up for part A. If you have a HDHP, you should not sign up for Part A until you stop working.
 - To be eligible to contribute to an HSA:
 - Have coverage under an HSA qualified high deductible health plan
 - Have no other first dollar medical coverage
 - Can't be enrolled in Medicare
 - Cannot be claimed as a dependent on someone else's tax return
 - You can wait and sign up for Part B, when you no longer are working.
 - If you sign up for Part A and Part B, they will pay after your employer plan. Most people do not sign up for part B if they are still working.

ENROLLMENT

- I am going to stop work, so how can I enroll for Medicare?
- **Special Enrollment Period:**
 - After age 65, anytime you are still covered by your employers group plan for a company with more than 20 employees or
 - You can join during the 8 month period that begins the month after employment ends or coverage based upon your employers plan, whichever happens first.
 - You are treated as a new Medicare enrollee and your coverage will begin the 1st of the month in which you enroll.
 - To avoid any gap- sign up before you stop work and provide the date you will be losing your employers plan.

MEDICARE PART A

■ Helps Pay For:

- Hospital stays (\$1,364 deductible, 1st 60 days/\$341 per day – 61 to 90 days)
- Skilled nursing facility (SNF) care
- Long-term care hospitals
- Home health care
- Hospice care
- Blood
- For information, call 1-800-MEDICARE

■ Paying for Medicare Part A:

- Most people receive Part A premium free
- People with less than 10 years of Medicare covered employment will pay a Part A premium
- For information, call the Social Security Administration (SSA)
 - 1-800-772-1213
 - -800-325-0778 for TTY users

MEDICARE PART B

Helps Pay For:

- Doctors' services
- Outpatient medical and surgical services and supplies
- Diagnostic tests
- Outpatient therapy
- Outpatient mental health services
- Preventive health care services
- Other medical services

Paying for Medicare Part B:

- Most Medicare Part B beneficiaries will pay a premium amount of \$135.50 (higher income earners may pay more) in 2019. 2019 premium based on 2017 income.
- \$185 per year deductible
- 20% coinsurance for most services
- Some programs may help cover these costs
- Addition of Preventive Care Services
 - Annual wellness exam
 - Covers all wellness services/preventive care services as outlined by the Affordable Care Act

MEDICARE PART B

Part B Premiums Based on Income

| If your yearly income in 2017 (for what you pay in 2019) was | | | You pay each month (in 2019) |
|--|---|--|------------------------------|
| File individual tax return | File joint tax return | File married & separate tax return | |
| \$85,000 or less | \$170,000 or less | \$85,000 or less | \$135.50 |
| Above \$85,000 up to \$107,000 | Above \$170,000 up to \$214,000 | Not applicable | \$189.60 |
| Above \$107,000 up to \$133,500 | Above \$214,000 up to \$267,000 | Not applicable | \$270.90 |
| Above \$133,500 up to \$160,000 | Above \$267,000 up to \$320,000 | Not applicable | \$352.20 |
| Above \$160,000 and less than \$500,000 | Above \$320,000 and less than \$750,000 | Above \$85,000 and less than \$415,000 | \$433.40 |
| \$500,000 or above | \$750,000 and above | \$415,000 and above | \$460.50 |

MEDICARE PART D

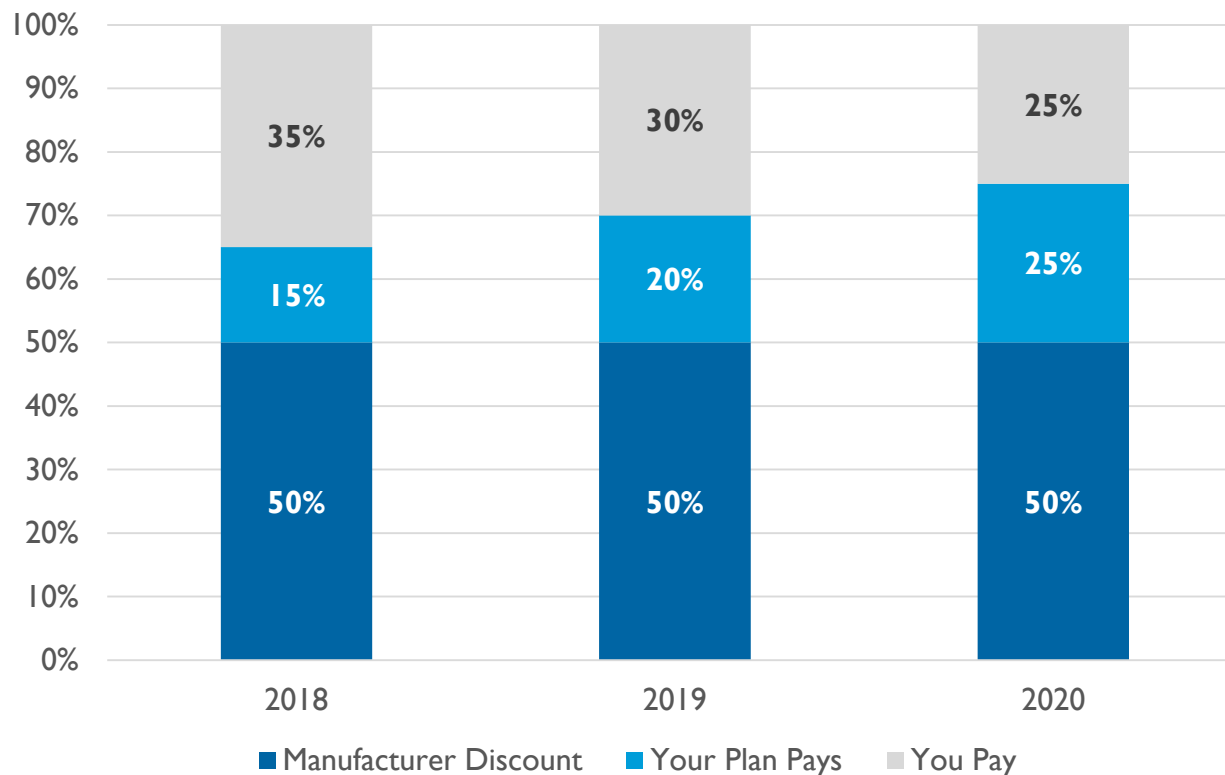
- Prescription drugs provided by Medicare Approved Prescription Drug Plans (PDP) or Medicare Advantage Plans (MA-PD). Not through Medicare – these plans are purchased from insurance companies.
- These plans offer negotiated discount prices based on a formulary with cost sharing
 - No more than 35% of cost for brand drugs, what you pay, plus 50% of discount payment, will count towards your out of pocket costs
- Always ask how drugs are covered while in the “donut hole”
 - 2019 donut hole: \$3,820 to \$5,100

Paying for Medicare Part D

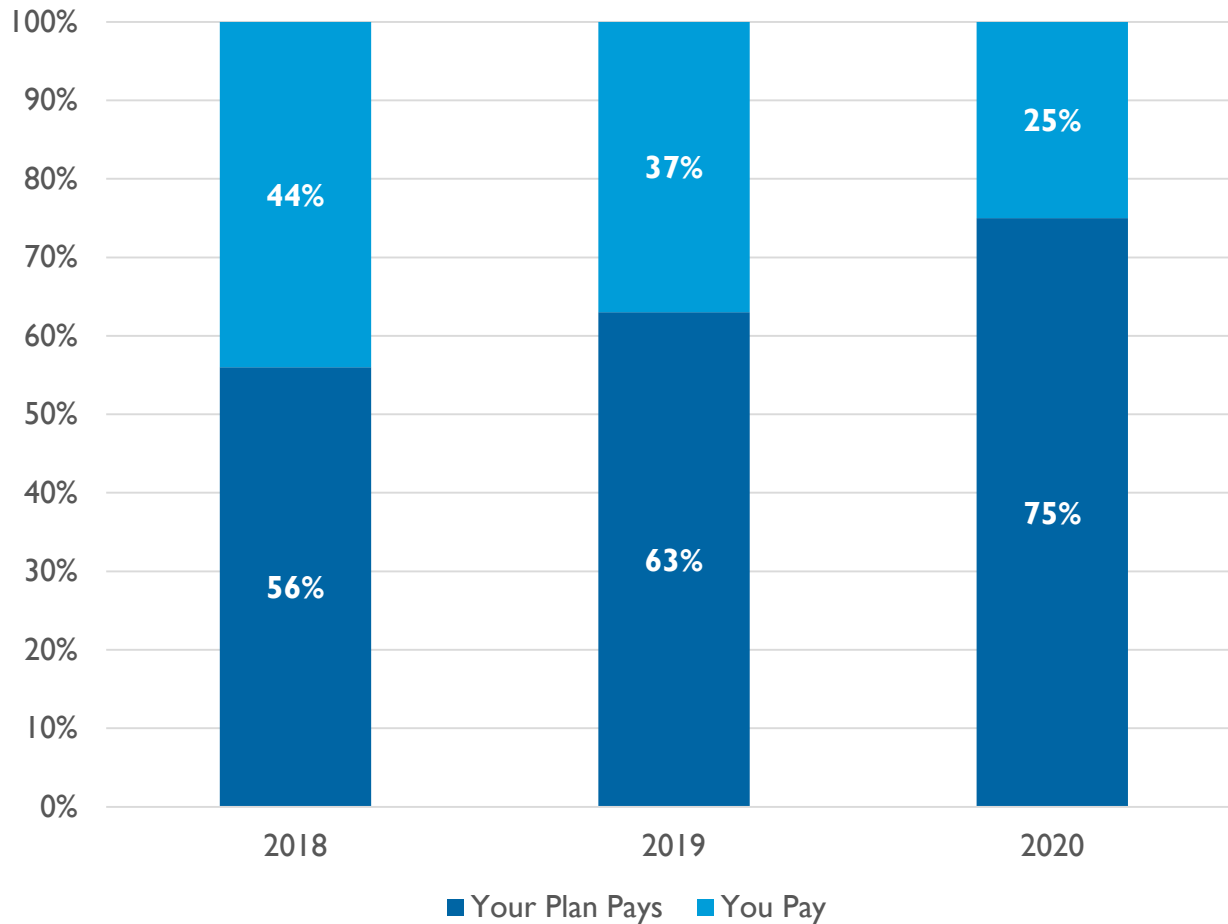
- \$0 or reduced premium, deductible and co-insurance if one qualifies for the Low Income Subsidy (LIS)
- Must meet income and asset criteria
- Eligibility determined by Social Security Administration (SSA)

THE AFFORDABLE CARE ACT – CLOSING THE DOUGHNUT HOLE - BRAND NAME DRUGS

- The ACA closes the Part D Doughnut Hole (the gap in coverage during which people with Medicare must pay the full cost of their prescriptions out of pocket).
- ACA phases this out by decreasing the beneficiary's share of drug costs during the doughnut hole until it reaches 25% in 2020 for both brand name and generic drugs



THE AFFORDABLE CARE ACT – CLOSING THE DOUGHNUT HOLE - GENERIC DRUGS



MEDICARE ADVANTAGE

- **Medicare Advantage Plans** are health plan options that are part of the Medicare program. If you join one of these plans, you generally get all your Medicare-covered health care through that plan (Parts A, B, and D). This coverage can include prescription drug coverage. Medicare Advantage Plans include:
 - Medicare Health Maintenance Organization (HMOs)
 - Preferred Provider Organizations (PPO)
 - Private Fee-for-Service Plans
 - Medicare Special Needs Plans
- When you join a Medicare Advantage Plan, you use the health insurance card that you get from the plan for your health care. In most of these plans, generally there are extra benefits and lower copayments than in the Original Medicare Plan. However, you may have to see doctors that belong to the plan or go to certain hospitals to get services

MEDICARE ADVANTAGE

- To join a Medicare Advantage Plan, you must have Medicare Part A and Part B. You will have to pay your monthly Medicare Part B premium to Medicare. In addition, you might have to pay a monthly premium to your Medicare Advantage Plan for the extra benefits that they offer.
- If you join a Medicare Advantage Plan, your Medigap policy won't work. This means it won't pay any deductibles, copayments, or other cost-sharing under your Medicare Health Plan. Therefore, you may want to drop your Medigap policy if you join a Medicare Advantage Plan. However, you have a legal right to keep the Medigap policy.

MEDICARE ADVANTAGE



Medicare

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MENU

Affordable Michigan Medicare plans

Priority Health Medicare Advantage and Medigap plans have you covered, whenever and wherever you need care. Learn more about what we offer.

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Compare plans

See the plans we offer



Medicare Learning Center

Everything you need to know about Medicare



Ready to enroll?

Enroll now



Already a member?




How to use your plan



MEDICARE ADVANTAGE

Medicare Advantage plans for Kent County

Coverage starting January 1, 2019 in ZIP code 49503 [Edit](#)

Looking for Medigap plans? Select View   

Click the ★ next to the plan to save and compare plans [Email plans](#)

| | | |
|--|--|---|
| <p>☆</p> <p>PriorityMedicare KeySM \$0 a month</p> <p>In-network deductible: \$250</p> <p>.....</p> <p>Details Enroll</p> | <p>★ Best seller</p> <p>PriorityMedicare ValueSM \$8 a month</p> <p>In-network deductible: \$0</p> <p>.....</p> <p>Details Enroll</p> | <p>☆</p> <p>PriorityMedicare IdealSM \$14 a month</p> <p>Combined in- & out-of-network deductible: \$80</p> <p>.....</p> <p>Details Enroll</p> |
| <p>☆</p> <p>PriorityMedicare MeritSM \$42 a month</p> <p>Combined in- & out-of-network deductible: \$0</p> <p>.....</p> <p>Details Enroll</p> | <p>☆</p> <p>PriorityMedicareSM \$78 a month</p> <p>In-network deductible: \$0</p> <p>.....</p> <p>Details Enroll</p> | <p>☆</p> <p>PriorityMedicare SelectSM \$137 a month</p> <p>In-network deductible: \$0</p> <p>.....</p> <p>Details Enroll</p> |

MEDICARE ADVANTAGE

☆ **PriorityMedicare Key** SM \$0
a month

| | | | |
|-------------------------------------|---------|---|----------|
| In-network deductible: | \$250 | Specialist visit: | \$45 |
| Annual out-of-pocket maximum: | \$4,200 | Inpatient hospital visit: per day, days 1-6 | \$225 |
| Primary care physician (PCP) visit: | \$20 | Tier 1/Tier 2 prescription drugs at preferred retail pharmacy | \$5/\$15 |

[Details](#) [Enroll](#)

★ **PriorityMedicare Value** SM \$8
a month

Best seller

| | | | |
|-------------------------------------|---------|---|----------|
| In-network deductible: | \$0 | Specialist visit: | \$50 |
| Annual out-of-pocket maximum: | \$4,500 | Inpatient hospital visit: per day, days 1-7 | \$250 |
| Primary care physician (PCP) visit: | \$5 | Tier 1/Tier 2 prescription drugs at preferred retail pharmacy | \$2/\$10 |

[Details](#) [Enroll](#)

☆ **PriorityMedicare Ideal** SM \$14
a month

| | | | |
|---|---------|---|----------|
| Combined in- & out-of-network deductible: | \$80 | Specialist visit: | \$50 |
| Annual out-of-pocket maximum: | \$6,000 | Inpatient hospital visit: per day, days 1-6 | \$260 |
| Primary care physician (PCP) visit: | \$20 | Tier 1/Tier 2 prescription drugs at preferred retail pharmacy | \$4/\$13 |

[Details](#) [Enroll](#)

SHOPPING FOR MEDICARE ADVANTAGE PLANS:

WWW.MEDICARE.GOV

Medicare.gov
The Official U.S. Government Site for Medicare

type search term here

[Sign Up / Change Plans](#)
[Your Medicare Costs](#)
[What Medicare Covers](#)
[Drug Coverage \(Part D\)](#)
[Supplements & Other Insurance](#)
[Claims & Appeals](#)
[Manage Your Health](#)
[Forms, Help, & Resources](#)

**Open enrollment is here.
Time to pick a plan.**

[Find out how much Medicare costs in 2019 Learn more](#)

[New Medicare cards mailing now Learn more](#)

Address change/Medicare card issue?

Information for my situation

Find someone to talk to

SHOPPING FOR MEDICARE ADVANTAGE PLANS: WWW.MEDICARE.GOV

Medicare.gov

The Official U.S. Government Site for Medicare

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- Your Medicare
Costs
- What Medicare
Covers
- Drug Coverage
(Part D)
- Supplements &
Other Insurance
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Getting started with Medicare

[How do I get Parts A & B?](#)

[Apply for Medicare online](#)

[When can I join a health or drug plan?](#)

[Types of Medicare health plans](#)

[Find health & drug plans](#)

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Getting started with Medicare

Whether you're new to Medicare, getting ready to turn 65, or preparing to retire, you'll need to make several important decisions about your health coverage. If you wait to enroll, you may have to pay a penalty, and you may have a gap in coverage. Use these steps to gather information so you can make informed decisions about your Medicare:

Step 1: Learn about the different parts of Medicare

The different parts of Medicare help cover specific services. Medicare Part A (Hospital Insurance) covers inpatient hospital stays, care in a skilled nursing facility, hospice care, and some home health care. Medicare Part B (Medical Insurance) covers certain doctors' services, outpatient care, medical supplies, and preventive services.

Step 2: Find out when you can get Medicare

There are only certain times when people can enroll in Medicare. Depending on the situation, some people may get Medicare automatically, and others need to apply for Medicare. The first time you can enroll is called your Initial Enrollment Period. Your 7-month Initial Enrollment Period usually:

- ◆ Begins 3 months before the month you turn 65
- ◆ Includes the month you turn 65
- ◆ Ends 3 months after the month you turn 65

[Get an estimate of when you can enroll in Medicare.](#)

Related Resources

- ◆ [Apply for Medicare online](#)
- ◆ [Log into MyMedicare.gov](#)
- ◆ [Medicare & You: understanding your Medicare choices](#)

Find someone to talk to

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Is my test, item, or service covered?

type your test, item, or service here

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RETIREE MEDICAL OPTIONS

- Your Personal Financial Advisor – Referral to Medicare Specialist
- Your Personal Home and Auto Insurance Agent – Referral to Medicare Specialist
- Advantage Benefits Group
 - <http://www.advantageben.com>
- Blue Cross Blue Shield of Michigan Medicare: 1-877-469-2583
 - <http://www.bcbsm.com/medicare/>
- Priority Health Medicare: 1-888-389-6676
 - <http://www.priorityhealth.com/medicare>
- Centers for Medicare and Medicaid Services
 - www.cms.hhs.gov
- The Official U.S. Government Site for People with Medicare
 - www.medicare.gov
- “Medicare and You”
 - <https://www.medicare.gov/pubs/pdf/I0050-Medicare-and-You.pdf>
- AARP
 - <http://www.aarp.org/health/medicare/>
- HealthCare.gov
 - <https://www.healthcare.gov>