

MEDICARE AND YOUR State Health Insurance

When do I enroll in Medicare?

When you turn age 65, or if you're certified as disabled by the Social Security Administration (SSA), you may become eligible for Medicare. Once you're retired and Medicare eligible, you'll want to enroll in Medicare Parts A and B.

In most cases, if you're already receiving SSA benefits, you'll be automatically enrolled in Medicare Parts A and B. If you're not yet receiving SSA benefits, you will not be automatically enrolled. You'll need to contact the SSA during your initial enrollment period and enroll in Medicare Parts A and B. You can enroll up to 90 days before your 65th birthday or after you've been certified disabled by the SSA for 24 months.

If you are currently working for a state agency or higher education institution participating in the Texas Employees Group Benefits Program (GBP), you can delay your Part B enrollment.* Remember to apply for Medicare Part B no more than 90 days before you stop working.

How do I enroll in Medicare?

Visit **www.ssa.gov** or call the Social Security Administration toll-free at (800) 772-1213, TTY: (800) 325-0778.

Do I need to enroll in Medicare Part A and Part B?

Yes. You need to enroll in both if you're Medicare eligible and no longer work for a state agency or higher education institution participating in the GBP.

Part A covers hospitalization and is free for most people.

Part B covers medical costs other than hospitalization, such as doctors' visits or lab work, and has a monthly premium. You're responsible for your Medicare premiums. If you do not enroll in Part B, you'll pay most or all of your health care out-of-pocket costs for Part B services. SSA may add a lifetime penalty to your monthly Part B premium if you are retired and do not enroll in Part B when first eligible.

How will my state health coverage change when I enroll in Medicare?

Once you have provided ERS with your Medicare information, retirees, dependents and survivors who are enrolled in Medicare Parts A and B will be enrolled in HealthSelectSM Medicare Advantage, administered by Humana.

This plan:

- lowers the monthly insurance premiums for dependents, survivors, and retirees that are subject to tiered insurance;
- · can be used at any doctor's office that accepts Medicare and
- · offers extra benefits.

*If you're covering a dependent on your health plan who is Medicare eligible, or will be Medicare eligible, the above information will also apply to your dependent.

Why is ERS offering Medicare Advantage plans?

Medicare Advantage plans allow the state to continue providing health insurance coverage for retirees at lower costs, while maintaining quality care and service. This plan achieves the state's budgetary goal of lowering costs while helping you better budget your health care costs.

What is a Medicare Advantage plan?

A Medicare Advantage plan is a different way of providing Medicare benefits. Insurance companies work with and receive payments from Medicare to manage health care costs. Participants of Medicare Advantage plans are still covered by Medicare and still pay Part B Medicare premiums, but the traditional Medicare coverage is replaced with a Medicare Advantage plan, such as HealthSelect Medicare Advantage. This plan eliminates Medicare paperwork for you by having your claims filed for you, as long as your doctor accepts Medicare.

Does HealthSelect Medicare Advantage provide the same coverage as my current plan?

HealthSelect Medicare Advantage provides comparable or better coverage than your current coverage. See the Medicare Health Plans Comparison Chart on the ERS website for more information. Services covered at 100% include:

- · doctor visits:
- · hospital stays;
- · emergency care and urgent care visits and
- · wellness programs.

Can I see my current doctor?

Yes. Contact your doctor to make sure he or she accepts Medicare and is willing to bill Humana. If he or she is not willing to bill Humana, you must pay for your services up front and submit claims to Humana for reimbursement.

Call Medicare toll-free at (800) 633-4227 to find health providers or doctors who accept Medicare or go to www.humana.com/ersmedicareadvantage.

Where can I get more information?

ERS offers Medicare Preparation seminars around Texas for active employees, retirees and dependents nearing Medicare eligibility. Please visit www.ers.texas.gov/Event-Calendars/Medicare-Preparation-Sessions to register and find a seminar near you.

SEE THE MEDICARE HEALTH PLANS COMPARISON CHART FOR PREMIUMS.

www.ers.texas.gov/PDFs/Fall-Enrollment/Medicare-Comparison-PY18.pdf

Handout 2018 MedicareBenefits 3/19/2018

Am I eligible for the KelseyCare Advantage HMO plan?

You must be enrolled in Medicare Parts A and B, ERS has your Medicare information on file, and live in one of the following counties: Brazoria, Chambers, Fort Bend, Galveston, Harris, Liberty, Montgomery or Waller. Medical coverage is provided through a network of doctors and specialists in the Kelsey-Seybold network. You must use a provider in this network; however, you do not need to designate a primary care physician (PCP) or get referrals to see a specialists. Visit www.ers.texas.gov/PDFs/RateSheet_PY18_Medicare_FINAL.pdf to view the rates for the KelseyCare Advantage HMO on the retiree rate sheet.

What if I am already enrolled in a private or other group Medicare Advantage plan?

You can only be enrolled in one Medicare Advantage plan at a time. If you enroll in a GBP Medicare Advantage plan, Medicare will cancel your enrollment in the other Medicare Advantage plan and you will remain on your health plan through the GBP.

How do I enroll in the HealthSelect Medicare Advantage Plan?

Once you are retired and Medicare eligible, you must sign up for Medicare Parts A and B. When you receive your Medicare information, contact ERS to be enrolled in HealthSelect Medicare Advantage. The process works the same way if you're retired and your dependent becomes eligible for Medicare. Once your enrollment is complete, you'll receive a Welcome Kit directly from Humana providing information on your enrollment date. If you decide you would like to stay in your current plan at the current premium rate, you'll need to sign in to your online account at www.ers.texas.gov/account-login or call ERS at (877) 275-4377 to update your Medicare options prior to your start date with HealthSelect Medicare Advantage.

Will I receive a new ID card?

Yes. You'll receive a new ID card from Humana for the HealthSelect Medicare Advantage plan shortly after you receive your Welcome Kit. If you do not receive your ID card by your start date, you can call Humana at (855) 377-0001 for your ID and group numbers to give to your provider, access services, and to request a new ID card.

Am I eligible for HealthSelect Medicare Advantage? You are eligible if you're retired and enrolled in Medicare Parts A and B and have provided your Medicare information to ERS.

Your dependents, as well as surviving spouses and surviving children, are eligible if they're:

- at least age 65 or certified as disabled by the SSA with Medicare;
- enrolled in Medicare Part A (hospital) and Part B (other medical);
- living in the United States or Puerto Rico and
- · provided their Medicare details to ERS.

A retiree and any dependents (spouse and/or disabled child) enrolled in Medicare must have the same health plan.

Who's not eligible?

- Active employees
- Dependents (even if retired or certified as disabled by the SSA with Medicare) of active employees
- Persons under 65 (unless certified as disabled by the SSA and enrolled in Medicare)

- Persons living outside the United States or Puerto Rico
- · Retirees who return to state employment
- Members and/or dependents who have ESRD and are still within their 30 month coordination period

Do I need to enroll in Medicare Part D?

No. Once you contact ERS with you Medicare information, you'll be enrolled in HealthSelectSM Medicare Rx. This is a Part D plan administered by UnitedHealthcare. Find more information at www.HSmedicareRx.com.

Do I need to pay a Part D premium?

Most people do not pay a premium for HealthSelect Medicare Rx. Based on your income level, you may have to pay a premium referred to as the Income-Related Monthly Adjustment Amount (IRMAA). SSA determines if a participant has to pay a Part D IRMAA.

Can I decline enrollment in HealthSelect Medicare Rx?

Yes, but if you decline the coverage, you lose all GBP prescription drug coverage. ERS does not offer an alternative plan. If you do not enroll in another Part D plan within 63 days of losing your GBP prescription drug coverage, Medicare will penalize you. To decline the HealthSelect Medicare Rx plan, you can call ERS toll-free at (877) 275-4377 (TTY: 711).

Please note: You could lose your GBP Medicare Advantage plan by signing up for another Part D plan.*

What happens to my dependent's prescription coverage if we are both enrolled in Medicare and I decline HealthSelect Medicare Rx?

Your dependent would lose current prescription coverage and neither of you would have any prescription drug coverage through the GBP. Both of you would need to purchase a private prescription plan.

What if I am already enrolled in a private Medicare Part D plan?

You cannot be enrolled in both HealthSelect Medicare Rx and a private Medicare Part D plan. Medicare will cancel your enrollment in the private Medicare Part D plan once you transfer to HealthSelect Medicare Rx.

Look at some of these extra benefits you get with HealthSelect Medicare Advantage:

- Well Dine® free precooked frozen meals delivered to your home after an overnight hospital stay
- HumanaFirst a toll-free nurse advice line
- QuitNet a smoking cessation program
- SilverSneakers free gym memberships at selected local fitness centers
- Go365 wellness program that rewards you with a healthier lifestyle and other perks

*If you join a group Part D plan, you can keep your ERS Medicare Advantage Plan. If you join a private Part D plan, you will lose your ERS Medicare Advantage plan.

ERS CUSTOMER SERVICE
TOLL-FREE (877) 275-4377 • WWW.ERS.TEXAS.GOV