



Teachers' Retirement Board Welcome to Medicare

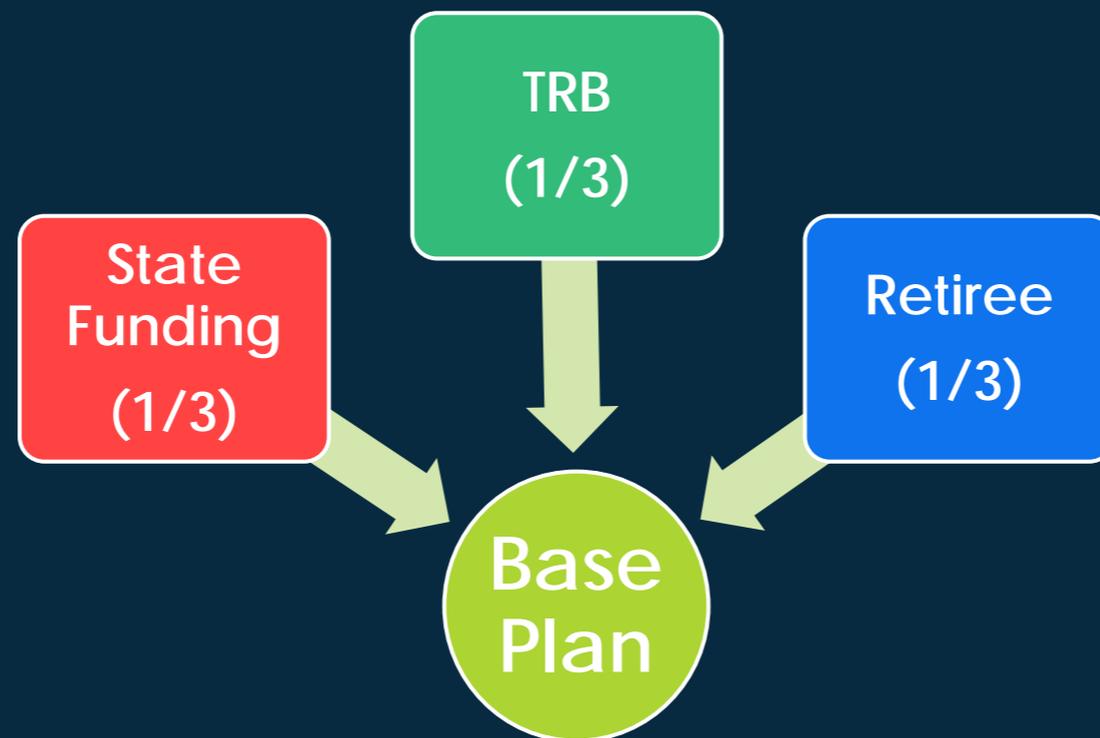


Agenda

- The CT TRB Statute
- Medicare Eligibility & Enrollment
- Medicare Basics
- TRB Medical Plan Options
- Prescription Plan
- Dental Plan
- Vision & Hearing Plan
- Premiums
- Program Assistance

The CTRB Statute

- The statute governing the TRB maintains that the State to contribute 1/3 of the "Base Plan" cost of the retiree medical plan Medicare Eligibility & Enrollment.



- The TRB statute also requires the plan not charge the retiree more than 1/3 of plan costs. The TRB has very few reserves left after the State has short funded the plan by well over \$190 million over the last decade. This has caused the Board to adopt less costly plans.

Medicare Eligibility Guidelines

You are typically eligible for Medicare at age 65 if:

- You receive or are eligible to receive Social Security
- Your living, deceased or divorced spouse is at least age 62 and is eligible to receive Social Security*
- Contact Social Security for more information regarding divorce spouse

Before age 65, you are eligible if:

- You have been entitled to Social Security disability benefits for 24 months
- You have Lou Gehrig's disease or ESRD

Health Savings Account & Medicare

If you have an HSA and you will soon be eligible for Medicare, it is important to plan ahead and understand how enrolling in Medicare will affect your HSA.

- You cannot continue to contribute to an HSA once you enroll into Medicare Part A and/or B.
- If you retire after age 65, Medicare will retro your effect date by six months. In order to avoid a penalty you should stop HSA contributions a minimum of six months prior to your retirement. Failure to do so can result in a tax penalty.

Initial Enrollment Period

- The Initial Enrollment Period begins three months prior to your 65th birthday, includes the month you turn 65 and ends three months after your 65th birthday.
- TRB requires that your application be received by the 25th of the 2nd month prior to your turning 65.
- For example if your benefit begins June 1st, the application should be sent to TRB by the 25th of April.

Enrollment months IEP	Medicare coverage starts
1	Month eligible for Medicare
2	Month eligible for Medicare
3	Month eligible for Medicare
4	One month after enrollment
5	Two months after enrollment
6	Three months after enrollment
7	Three months after enrollment

Medicare Part B & IRMMA

Income (Adjusted Gross Income plus tax-exempt interest income)		Monthly Part B Premium (per person)	Monthly Part D Premium (per person)
Single Tax Return	Married Filing Jointly		
\$85,000 or less	\$170,000 or less	\$144.60 (may be less if covered by the hold-harmless provision)	\$0.00
\$85,001 to \$107,000	\$170,001 to \$214,000	\$202.40	\$12.20
\$107,001 to \$133,500	\$214,001 to \$267,000	\$289.20	\$31.50
\$133,501 to \$160,000	\$267,001 to \$320,000	\$376.00	\$50.70
\$160,001 to \$499,999	\$320,001 to \$749,999	\$462.70	\$70.00
\$500,000 or more	\$750,000 or more	\$491.60	\$76.40

Medicare Basics

Part A & B

	Premium	Coverage
Medicare Part A In patient Hospital Insurance	Premium Free or no cost to those who paid Medicare taxes while working for at least 40 quarters or eligible for Medicare through a living, deceased or divorced spouse.	<ul style="list-style-type: none"> • Inpatient hospital care • Skilled nursing care • Home health care • Hospice care • Inpatient drugs & therapies
Medicare Part B Outpatient Medical Insurance	<p>Part B premiums are based on income</p> <p>2020 standard Part B premium is \$144.60</p>	<ul style="list-style-type: none"> • Doctors' services & outpatient care • Preventive services • Diagnostic tests and procedures • Physical and occupational therapies • Durable medical equipment • Some outpatient prescription drugs • Some home health care

Note: Medicare premiums are separate from TRB premiums

2020 Overview of Benefits

Plan Coverage	Anthem Medicare Advantage PPO	Anthem Medicare Supplement
Deductible	\$0	Part B Annual Deductible \$198 per year
Maximum OOP	\$2,000	\$2,198
Doctor Visits	\$10	\$10
Inpatient Hospital Coverage (Medicare Part A)	\$200 copay per admission	\$250 copay per admission
Out-of-Country Care (non-routine)	Covered at UC after copays	Covered at UC after copays
Prescription Wigs	Not a covered benefit	After chemotherapy covered with no dollar limit. One wig every 1 year*
Preventative Services	\$0	\$0*

Services covered by the TRB with no Medicare base coverage will remain as is other than applicable copays.

* Benefit enhanced as required by CT state mandate

2020 Overview of Benefits Cont.

Plan Coverage	Anthem Medicare Advantage	Anthem Medicare Supplement
Network Services	All Medicare participating providers	All Medicare participating providers
Emergency Care	\$100 copay	\$100 copay
Ambulance	\$100	\$100
Part B Outpatient Services diagnostic tests and therapeutic services, diabetic and DME supplies Including but not limited to radiation therapy, X-ray PET, CT, SPECT, MRI scans etc.	<ul style="list-style-type: none"> ■ \$0 for well care services ■ \$10 copay for sick medical services ■ Services may require a Prior Authorization 	\$0 copay after Part B deductible
Silver Sneakers	<ul style="list-style-type: none"> ■ All enrollees are eligible 	All enrollees are eligible

Benefit Plan Differences

What are the differences between a Medicare Advantage Plan (MAPD) and Original Medicare with a Supplement otherwise referred to as the Anthem Supplement Plan?

- MAPD- Contracted by Medicare - Anthem becomes primary, you Medicare covers all Part A and part B
- Medicare Supplement (Anthem) - Original Medicare primary, Supplement Secondary

****Benefit for each plan depends on individual need and service utilization. One plan is not more beneficial than another based on premium.***

****Both plans must cover Medicare Part A and B Services***

What is MOOP & TROOP?

Maximum Out of Pocket (MOOP) Cost for 2020 = \$3,500

MOOP is the Part D and non Part-D drug costs that a member pays.

Includes:

- The \$200 Deductible

True Out of Pocket (TROOP) Cost for 2020 = \$6,350

TROOP applies to Part D spend ONLY.

Includes:

- What you pay for prescription Part D drugs when you fill a medication
- Payment made for your drugs by any of the following programs or organizations:
 - “Extra Help” from Medicare
 - Coverage Gap Discount from Manufactures
 - Indian Health Service
 - AIDS Drug Assistance Programs
 - Most charities
 - State Pharmaceutical Assistance Programs (SPAPs)

2020 Express Scripts Prescription Drug Program

STAGE 1

**Initial Coverage Limit
\$200 Deductible**

You pay \$200 deductible. Once the deductible is met, you'll pay a coinsurance of 5% generic, 20% brand or 30% non-preferred brand.

STAGE 2

**Coverage Gap
\$3,500 - \$6,350**

As a TRB member, you will continue to pay the cost share of 5% generic, 20% brand or 30% non-preferred through the coverage gap until you reach \$3,500 MOOP.

STAGE 3

**Catastrophic Coverage
\$6,350**

Should your True Out-of-Pocket cost (TROOP) reach \$6,350, you'll be responsible for up to 5% of the cost, \$3.60 for generics, \$8.95 for brands or whichever is greater until you reach \$3,500 MOOP for drugs.

Cigna PPO Dental Plan

Network Options	In-Network Cigna DPPO Network		*Non-Network:	
Reimbursement Levels	Based on Contracted Fees		Maximum Reimbursable Charge	
Calendar Year Benefits Maximum Applies to: Class I, II & III expenses	\$2,500		\$2,500	
Calendar Year Deductible Individual	\$50		\$50	
Benefit Highlights	Plan Pays	You Pay	Plan Pays	You Pay
Class I: Diagnostic & Preventive Oral Evaluations Prophylaxis: routine cleanings X-rays: routine X-rays: non-routine Fluoride Application Sealants: per tooth Space Maintainers: non-orthodontic Emergency Care	100% After Deductible	No Charge After Deductible	100% After Deductible	No Charge After Deductible
Class II: Basic Restorative : fillings Endodontic: minor and major Periodontics: minor and major Oral Surgery: minor and major Anesthesia: general and IV sedation	80% After Deductible	20% After Deductible	80% After Deductible	20% After Deductible
Class III: Major Restorative Repairs: Bridges, Crowns and Inlays Repairs: Dentures Denture Relines, Rebases and Adjustments Inlays and Onlays Prosthesis Over Implant Crowns: prefabricated stainless steel / resin Crowns: permanent cast and porcelain Bridges and Dentures	50% After Deductible	50% After Deductible	50% After Deductible	50% After Deductible

* Non-network providers may balance bill for services.

Vision and Hearing Benefits

Vision and hearing benefits are administered by the retiree medical plan.
For example: Anthem members vision and hearing will be covered under Anthem.

Vision Benefits

- Exam including refraction \$70 allowance every 12 months;
- \$240 reimbursement for lenses, frames and contacts

Hearing Benefit

Anthem Medicare Advantage	Anthem Medicare Supplement
\$1,500 allowance every 36 months	1 hearing aid per ear every 24 months covered at 100%*

* Benefit enhanced as required by CT state mandate

2020 Monthly Rates for Members

	2020 Anthem Base Plan	2020 Anthem Medicare Supplement	2019 Anthem Base Plan	2019 Anthem Medicare Supplement
Medical	\$14	\$126	\$14	\$122
Drug	\$53	\$53	\$51	\$51
VH	\$8	\$8	\$7	\$7
Dental	\$52	\$52	\$58	\$58
Total	\$127	\$239	\$130	\$238

The Medicare Supplement plan will cost the member \$112 more per month (\$1,344 annually) than the Anthem base plan.

Program Assistance

Low Income Subsidy Program

Eligible beneficiaries who have limited income may qualify for a government program that helps pay for Medicare Part D prescription drug cost.

Medicare Savings Program

The State of Connecticut offers financial assistance to eligible Medicare enrollees through our 'Medicare Savings Programs'. These programs may help pay Medicare Part B premiums, deductibles, and co-insurance.

<https://portal.ct.gov/DSS/Health-And-Home-Care/Medicare-Savings-Program>

PAN Foundation

The Patient Access Network (PAN) Foundation is an independent, national 501(c)(3) organization dedicated to helping federally and commercially insured people living with life-threatening, chronic and rare diseases with the out-of-pocket costs for their prescribed medications.

Provider/Manufacturer Assistance

Reach out to your provider regarding assistance programs



QUESTIONS