



State of Iowa Retiree 2017 Enrollment and Change

October 17 – December 7, 2016
Important Information

The 2017 State of Iowa Retiree Enrollment and Change Period will begin October 17 and run through December 7. This packet includes the information you need to know if you would like to take this annual opportunity to make changes to your health insurance benefits.

To help you find the information you need, sections of this document are identified by the symbols below:



Information for all retirees



Information for retirees who are Medicare-eligible (age 65 or older)



Information on the Group Program F and Group Program N plans for Medicare-eligible retirees and spouses.



Information for retirees who are not Medicare-eligible (under age 65)



Packet of Information

In this Enrollment and Change packet, you will find:

- 2017 monthly health insurance premiums
- Side-by-side summary of the State's regular health insurance plans
- Notice of Creditable Coverage
- Retiree Cancellation of Health Insurance form
- Summary of Group Program F
- Summary of Group Program N
- Summary of the MedicareBlueSM Rx Plans for Program F and N



Contact Information

Kendra McCauley with the Iowa Department of Administrative Services (DAS) can answer questions as your retiree health and dental benefits specialist. The former benefit specialist, Cindy Broshous, has taken another position within DAS.

Kendra McCauley

Email stateretirees@iowa.gov

Phone **866.895.2464**

Other Contact Information

Wellmark, Blue Cross Blue Shield of Iowa Customer Service	800.622.0043
MedicareBlue SM Rx - Enrollment (Group No. 38073-IOWA)	888.299.5513
MedicareBlue SM Rx - Customer Service (already enrolled)	877.838.3827
Senior Health Insurance Information Program (SHIIP)	800.351.4664 (www.therightcalliowa.gov)

Additional information about the State of Iowa retiree benefits is available on the DAS website (<http://benefits.iowa.gov>).



2017 Enrollment and Change On-Site Presentations

Date	City	Location
October 25 10:00 – 11:30 a.m. 1:00 – 2:30 p.m.	Ames	Fire Service Training Bureau 3100 Fire Service Road (Haber Road)
October 27 10:30 a.m. – 12:00 p.m.	Waterloo	Hawkeye Community College 1501 East Orange Road Tama Hall, Room 106
November 1 10:00 – 11:30 a.m. 1:00 – 2:30 p.m.	Des Moines	Wallace State Office Building Auditorium 502 E. 9th Street
November 3 10:30 a.m. – 12:00 p.m.	Council Bluffs	Iowa School for the Deaf Lied Multipurpose Complex 3501 Harry Langdon Blvd.
November 9 10:30 a.m. – 12:00 p.m. 1:00 – 2:30 p.m.	Cedar Rapids	The Hotel at Kirkwood Center 7725 Kirkwood Blvd. S.W.
November 10 1:00 – 2:30 p.m.	Des Moines	Wallace State Office Building Auditorium 502 E. 9th Street
November 15 10:00 a.m. – 11:30 p.m.	Des Moines	Wallace State Office Building Auditorium 502 E. 9th Street

Health Insurance Information

- You are eligible for the regular health plans listed on the side-by-side comparison in your packet of information.
- Health benefit changes, if any, that will go into effect in 2017, are indicated in **red** on the side-by-side comparison.
- Please review the enclosed 2017 rates for your portion of the premium.
- Information on the Wellmark plans is available at the DAS website (https://das.iowa.gov/human-resources/employee-and-retiree-benefits/retirees/2017_retiree-e&cp).



If you drop your State of Iowa health plan for any reason, you will NOT be able to rejoin at a later date.

Benefit Elections

During the Enrollment and Change Period, you may keep, change or cancel your State health plan. Health insurance changes you make will be effective **January 1, 2017**.

Keeping the Same Health Plan for 2017

If you want your coverage to stay the same, you do not need to do anything. Your 2016 health insurance will continue into 2017.

Changing Your Health Plan for 2017

Complete a new Wellmark application, if you are:

- Changing to a regular State health insurance plan (plans offered to active employees)
- Adding or removing a dependent(s)

Evidence of insurability is not required when you change State health insurance plans.

Canceling Your State Health Plan

To cancel your health coverage, complete the **Retiree Cancellation of Health Insurance** form. It is included in the packet.

Applications and Forms

Depending on what you want to do with your benefits, you may need to complete one or more of the following forms.

- Wellmark's State of Iowa Indemnity, PPO, and Blue Access Group Application
- Wellmark's State of Iowa Blue Advantage Application
- Group Program F and Group Program N Application and Group MedicareBlueSM Rx Application
- Wellmark's Authorization for Automatic Bank Account Withdrawal
- Retiree Cancellation of Health Insurance

These forms are available by:

- Contacting Wellmark Customer Service at **800.622.0043**
- Going online at the DAS website (https://das.iowa.gov/human-resources/employee-and-retiree-benefits/retirees/2017_retiree-e&cp).

All applications and forms must be received by December 7, 2016

Where to send your applications and/or forms depends on the coverage you select and the agency you retired from. See the information below for details:

Retired from **CBC, DOT, or Regents** and State is paying a portion of your premium

- Send applications and forms to your previous agency or Regent institution.

Retired from **Central Payroll, including the Judicial and Legislative Branches**

- Send applications and forms to Kendra McCauley, DAS.

Group Program F or Group Program N Enrollment and Changes

- Send applications and forms to Kendra McCauley, DAS.

Kendra McCauley Iowa Department of Administrative Services, Human Resources Enterprise Hoover Building Level A 1305 E. Walnut St. Des Moines, IA 50319
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Medicare

You have many health care options as a Medicare-eligible individual. During this Enrollment and Change Period, examine all your health insurance options to find the plan that is right for you.



Senior Health Insurance Information Program (SHIIP)

A good resource on Medicare is the Senior Health Insurance Information Program (SHIIP). You can contact SHIIP at **800.351.4664** or at <http://www.therightcalliowa.gov>. SHIIP is a free, confidential service of the State of Iowa that helps Iowans make informed decisions about Medicare and other health coverage.



Medicare and the State's Health Insurance Plans

You can keep your current State-sponsored health coverage when you become eligible for Medicare, however, you still need to sign up for Medicare.

- Medicare will provide your primary health insurance coverage.
- After Medicare pays, the State plan pays remaining costs covered by the State plan.

If you have dependents on your insurance who are not eligible for Medicare, Wellmark will continue to provide primary coverage.



Notice of Creditable Coverage

Medicare requires the State to notify Medicare-eligible retirees whether their State prescription drug coverage is Creditable Coverage.

The State's prescription drug coverage is as good or better than the standard Medicare prescription drug coverage (Part D). This means that if you enroll in a Medicare Part D drug plan at a later date, you will not pay a higher premium (a penalty). Enclosed in your packet of information is a Notice of Creditable Coverage. Keep a copy of the notice as documentation if you decide to join another Medicare Part D drug plan.



Group MedicareBlueSM Rx Iowa

You can lower your Wellmark premium for Blue Access, Blue Advantage, Iowa Select, and Program 3 Plus by enrolling in Group MedicareBlueSM Rx Iowa, a Medicare Part D plan.

Group MedicareBlueSM Rx Iowa will be your primary coverage for prescription drugs. After Medicare pays, your Wellmark plan will pay any remaining costs that are covered by the Wellmark plan.

The Group MedicareBlueSM Rx plan (Group No. 38073-IOWA) was created specifically for the State of Iowa. It is the only Medicare Part D plan that can lower the State's Wellmark premiums. If you drop the Group MedicareBlueSM Rx plan Iowa (Group No. 38073-IOWA) and purchase another Medicare Part D, including a different MedicareBlueSM Rx plan, you will pay the higher Wellmark premium.

Advantage of Group MedicareBlueSM Rx Iowa

Buying the MedicareBlueSM Rx plan significantly reduces the amount the State Wellmark plan has to pay for prescription drug coverage. That savings is passed along to you in the form of a lower premium for your Wellmark plan coverage.

The difference in the premiums is included on the 2017 health insurance information in your packet.

2017 Group MedicareBlueSM Rx Iowa Premium

The 2017 premium for Group MedicareBlueSM Rx Iowa will be **\$90.20** per month per Medicare-eligible individual. This is a 15 percent increase from the 2016 premium because of increased prescription use and a higher unit of cost of drugs among State members enrolled in MedicareBlue RX

Enrollment in Group MedicareBlueSM Rx Iowa

If you become eligible for Medicare in 2017, you must enroll in MedicareBlueSM Rx Iowa before the month you want coverage to be effective. You enroll in Group MedicareBlueSM Rx Iowa over the phone (**no paper application**) by calling **888.299.5513** and telling them you are with the State of Iowa group **No. 38073-IOWA**. Have your Medicare card handy when you call.

Group Program F and Group Program N

Medicare Parts A and B pay for many, but not all, health care services and supplies. A Medicare Supplement Insurance policy helps pay some of the health care costs that Parts A and B don't cover, like copayments, coinsurance, and deductibles.

In addition, Group Program F and Group Program N provide extensive coverage in supplementing your Medicare coverage. The State offers both programs to Medicare-eligible retirees and their Medicare-eligible dependents. Group Program F and Group Program N are identical to the Medicare Supplement Plan F and N you can purchase individually.

Group Program F and Group Program N only cover Medicare-eligible expenses that are not paid by Medicare. As long as Medicare covers the service, it will be covered by Group Program F or Group Program N.

With Group Program F and Group Program N, there are **no network restrictions**. You can see any provider in the country as long as the provider accepts Medicare.



Group Program F and Group Program N Comparison

The table below shows basic information about the different benefits Group Program F and Group Program N policies cover. Group Program F and Group Program N offer additional coverage for travel outside the country that Medicare does not cover. If a percentage appears, the program covers that percentage of the benefit for eligible Medicare expenses. You pay the rest.

Comparison of State of Iowa Group Programs F and N		
Benefits	F Pays	N Pays
Medicare Part A coinsurance and hospital costs (up to an additional 365 days after Medicare benefits are used)	100%	100%
Medicare Part B coinsurance or copayment	100%	100%*
Blood (first 3 pints)	100%	100%
Part A hospice care coinsurance or copayment	100%	100%
Skilled nursing facility care coinsurance	100%	100%
Part A deductible	100%	100%
Part B deductible (2016 deductible was \$166 per year)	100%	0%
Part B excess charges	100%	0%
Foreign travel emergency (up to plan limits)	80%	80%

*Group Program N pays 100 percent of the Part B coinsurance, except for a copayment of up to \$20 for some office visits and up to a \$50 copayment for emergency room visits not resulting in an inpatient admission (copayment amounts from 2016).

More information about Group Programs F and N, including applications, is available by contacting Wellmark Customer Service at **800.622.0043**.



Eligibility for Group Program F and Group Program N

You are eligible to enroll in Group Program F and Group Program N if you are eligible for Medicare.

Group Program F and Group Program N are only available to individuals eligible for Medicare. If you have a spouse on your current coverage they must also be eligible for Medicare and sign up for Group Program N or Group Program F to still have health plan coverage through the State. Your spouse cannot stay on a regular State of Iowa insurance plan if you are enrolling in Group Program F or Group Program N.

Benefits of Enrolling in Group Program F and Group Program N

- Lower monthly premiums than the traditional State of Iowa plans
- Benefits align with the coverage and services that Medicare covers
- No network restrictions (you can see any provider who accepts Medicare)
- Ability to move back to the regular State of Iowa plans during the next Enrollment and Change Period
- Enroll any time during the year if you need to wait for everyone on your plan to become eligible for Medicare

Enroll in Group Program F or Group Program N

If both you and your spouse are Medicare-eligible, you and your spouse can:

- Both enroll in Group Program F, or
- Both enroll in Group Program N, or
- One enrolls in Group Program F and the other enrolls in Group Program N

Complete two applications:

- 1) **State of Iowa Employer Group Retiree Program N and F Application.** Indicate if you want to enroll in Group Program F or Group Program N.
- 2) **Group MedicareBlueSM Rx PDP Application.** Indicate if you want to enroll in Basic or Plus. Complete a new Group MedicareBlueSM Rx Application even if you are already enrolled in Group MedicareBlueSM Rx.



Your spouse will also need to complete both the *State of Iowa Employer Group Retiree Program N and F Application* and the *Group MedicareBlueSM Rx PDP application*.

Enrolled in Group Program N, but want to change to Group Program F. Complete an Employer Group Retiree Program N and F Application and indicate if you want to enroll in Group Program F.

Enrolled in Group Program N, but want to change to Group MedicareBlueSM RX Basic or Plus. Complete a Group MedicareBlueSM Rx PDP application form indicating whether Basic or Plus is your choice.



Group Program F or Group Program N and MedicareBlueSM Rx

Coupled with the Group Program F or Group Program N is a Group MedicareBlueSM Rx plan. You have the option of two MedicareBlueSM Rx plans:

- Group MedicareBlueSM Rx (Basic)
- Group MedicareBlueSM Rx (Plus)

	Basic	Plus
Tier 1: Covered Generic Drugs	\$10 copay	\$10 copay
Tier 2: Covered Preferred Brand Drugs	\$30 copay	\$25 copay
Tier 3: Covered Non-Preferred Brand Drugs	\$50 copay	\$40 copay
Covered Specialty Tier Drugs	\$50 copay	25% coinsurance
Monthly Premium	\$90.20	\$139.90

There are two main differences between the Group MedicareBlueSM Rx Basic and the Group MedicareBlueSM Rx Plus plans:

- The copayments (amounts you pay)
- The amount you pay for prescription drugs while in the coverage gap (also called the "donut hole")

What Is the Coverage Gap?

The coverage gap (also called the "donut hole") begins after you and MedicareBlueSM Rx have spent \$3,700. Once you've spent \$4,950 out-of-pocket in 2017, you're out of the coverage gap.

Group MedicareBlueSM Rx (Basic): You have coverage for generics only, in the coverage gap. Select brand name drugs are discounted, according to federal laws regulating these plans, but you will still pay about 51 percent of the cost of brand name drugs, while you are in the "donut hole."

Group MedicareBlueSM Rx (Plus): You will pay the same copays as in the initial coverage period and in the coverage gap.

Not everyone will enter the coverage gap because their drug costs won't be high enough.

If both you and your spouse enroll in the Group Program F or N, you and your spouse can:

- Both enroll in Group MedicareBlueSM Rx Basic, or
- Both enroll in Group MedicareBlueSM Rx Plus, or
- One enrolls in Group MedicareBlueSM Rx Basic, and the other enrolls in Group MedicareBlueSM Rx Plus



Group MedicareBlueSM Rx Covered Pharmaceuticals

The Group MedicareBlueSM Rx formulary is different than the Wellmark formulary for the regular plans.

Check the Group MedicareBlueSM Rx formulary to determine if your prescription drugs are covered.

The formulary is available at the DAS website (https://das.iowa.gov/human-resources/employee-and-retiree-benefits/retirees/2017_retiree-e&cp) or call MedicareBlueSM Rx customer service at **877.838.3827** for more information.



Sick Leave Insurance Program (SLIP)

The Sick Leave Insurance Program (SLIP) offers eligible State retirees an option for using their unused sick leave balance to pay the State's share of their group health insurance premiums. While using SLIP, **the retiree will still pay the share of the premium that an active State employee is paying**. Retirees can continue to use their SLIP account until the funds are exhausted or until they become eligible for Medicare (usually at age 65).



Approaching Medicare

You will no longer be eligible to use SLIP money when you become eligible for Medicare (usually by turning 65).

You will receive a letter from DAS when you are a few months away from exhaustion of your SLIP account, turning age 65, or if your spouse is turning age 65.

Medicare Parts A and B will become primary insurance for you and/or your spouse/domestic partner on the first of the month when you turn age 65. Your State health insurance will pick up coverage after Medicare Parts A and B have paid.

More information is available at the DAS website:

https://das.iowa.gov/human-resources/employee-and-retiree-benefits/retirees/2017_retiree-e&cp).