

# Hello MEDICARE



## Oklahoma Higher Education Employee Insurance Group **2014 benefit plan**



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# Welcome

Why We're Here

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Medicare Basics

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Plan Benefits

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Questions & Answers

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# Why UnitedHealthcare?

## **UnitedHealthcare is here for you.**

At UnitedHealthcare, you get help understanding how to get the most from your plan. You get connected to the care you need, when you need it. And you get the programs, resources and tools to help you live a healthier life.

# Medicare Basics

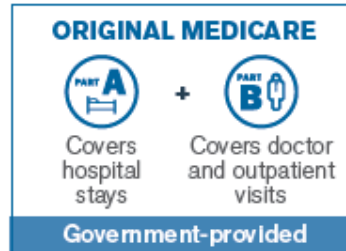


# The ABCs of Medicare

## Medicare Choices

### Step 1

Enroll in Original Medicare when you become eligible.



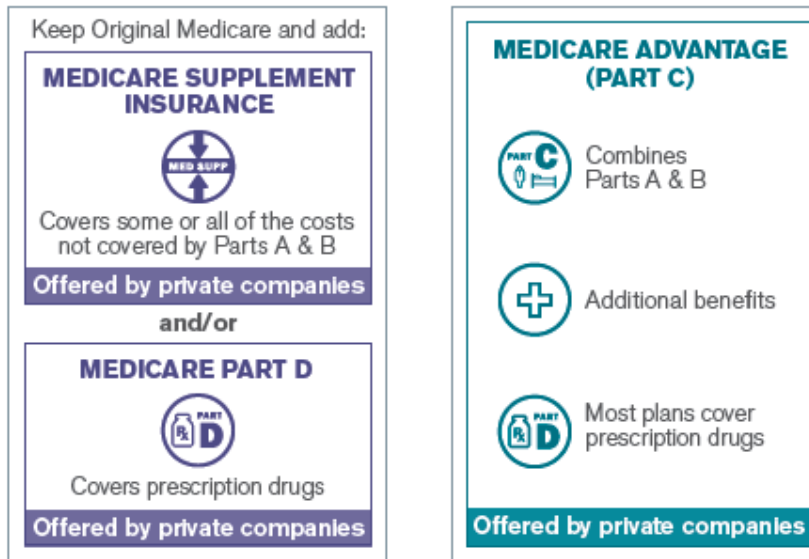
### Step 2

If you need more coverage, you have choices.

#### Option 1

or

#### Option 2



# Medicare Parts A & B (Original Medicare)

## ORIGINAL MEDICARE



Covers  
hospital  
stays

+



Covers doctor  
and outpatient  
visits

**Government-provided**

# Medicare Part C (Medicare Advantage Plans)

## MEDICARE ADVANTAGE (PART C)



Combines  
Parts A and B



Additional benefits



Most plans cover  
prescription drugs

**Offered by private companies**

# Medicare Part D (Prescription Drug Plans)

## MEDICARE PART D



Covers prescription drugs

**Offered by private companies**



# Medicare supplement insurance plans

Keep Original Medicare and add:

## MEDICARE SUPPLEMENT INSURANCE



Covers some or all of the costs not covered by Parts A and B

**Offered by private companies**

**and/or**

## MEDICARE PART D



Covers prescription drugs

**Offered by private companies**

**Note:** The Medicare supplement plan available through your plan sponsor is the UnitedHealthcare Senior Supplement plan. It is a group plan and is only available through your plan sponsor.

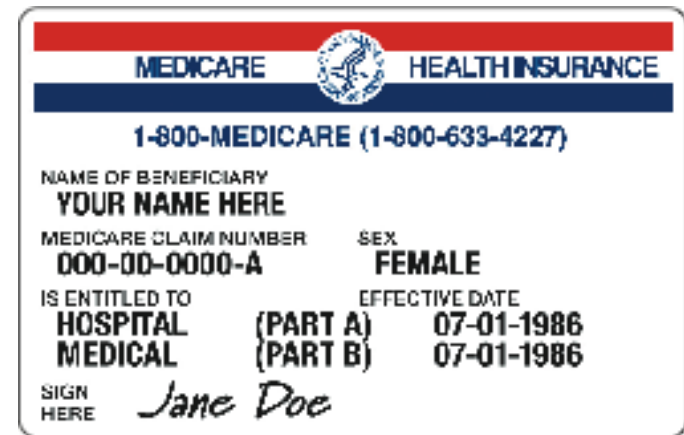
# When are you eligible for Medicare?

## You're eligible for Original Medicare (Parts A and B) if:

You're 65 years old, or you're under 65 and qualify on the basis of disability or other special situation.

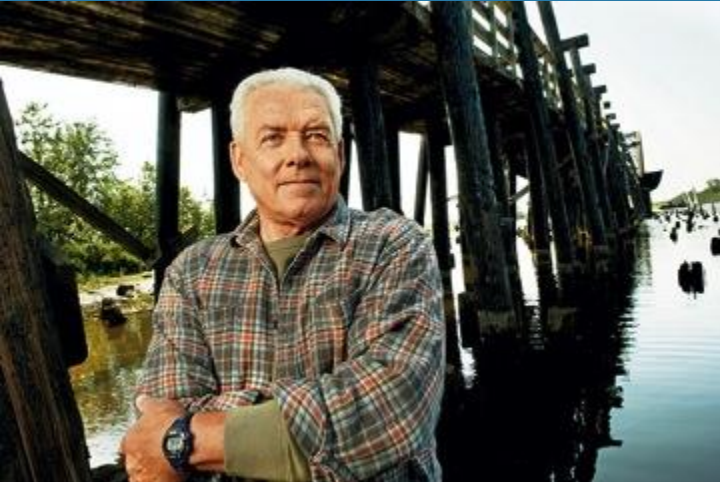
-AND-

You're a U.S. citizen or a legal resident who has lived in the United States for at least five consecutive years.



# Plan Benefits

# Your Senior Supplement plan overview



- Covers many costs Original Medicare doesn't cover.
- Almost no claim forms to file.
- No networks. You can see any doctors, specialists and hospitals who accept Medicare.
- No prior authorization needed for services covered by Medicare. You don't need a referral to see a specialist.

# Part A: What does your Senior Supplement plan cover?

Covered Services	Medicare Pays	Plan Pays	You Pay
<b>First 60 days of hospitalization</b>	All but \$1,132	\$1,132	\$0
<b>Days 61-90 of hospitalization</b>	All but \$283 p/day	\$283 p/day	\$0
<b>Day 91 and after, (while using 60 lifetime reserve days)</b>	All but \$566 p/day	\$566 p/day	\$0
<b>Days 151-365 lifetime additional reserve days</b>	\$0	100% of Medicare Eligible Expenses	\$0
<b>First 3 pints of blood</b>	\$0	100%	\$0
<b>Additional amounts of blood under Medicare Part A</b>	100%	\$0	\$0
<b>Days 1-20 in Skilled Nursing Facility</b>	All approved amounts	\$0	\$0
<b>Days 21-100 in Skilled Nursing Facility</b>	All but \$141.50 p/day	\$141.50 p/day	\$0

# Part B: What does your Senior Supplement plan cover?

Covered Services	Medicare Pays	Plan Pays	You Pay
<b>Medical Services First \$140 of Medicare Approved Amounts</b>	\$0	\$0	\$140.00 Medicare Part B Deductible
<b>Remainder of Medicare Approved Amounts</b>	Generally 80%	Generally 20%	\$0
<b>Outpatient Mental Illness-for most outpatient mental illness services</b>	55%	45%	\$0
<b>Medicare Part B Excess Charges (above Medicare Approved Amounts)</b>	\$0	100%	\$0

<sup>1</sup> Once \$147 of Medicare Approved Amounts for covered services have been paid, the Medicare Part B Deductible will have been met for the calendar year.

# Your Prescription Drug Plan (PDP)



<sup>2</sup>Drugs and prices may vary between pharmacies and are subject to change during the plan year. Prices are based on quantity filled at the pharmacy. Quantities may be limited by pharmacy based on their dispensing policy or by the plan based on Quantity Limit requirements; if prescription is in excess of a limit, copay amounts may be higher.

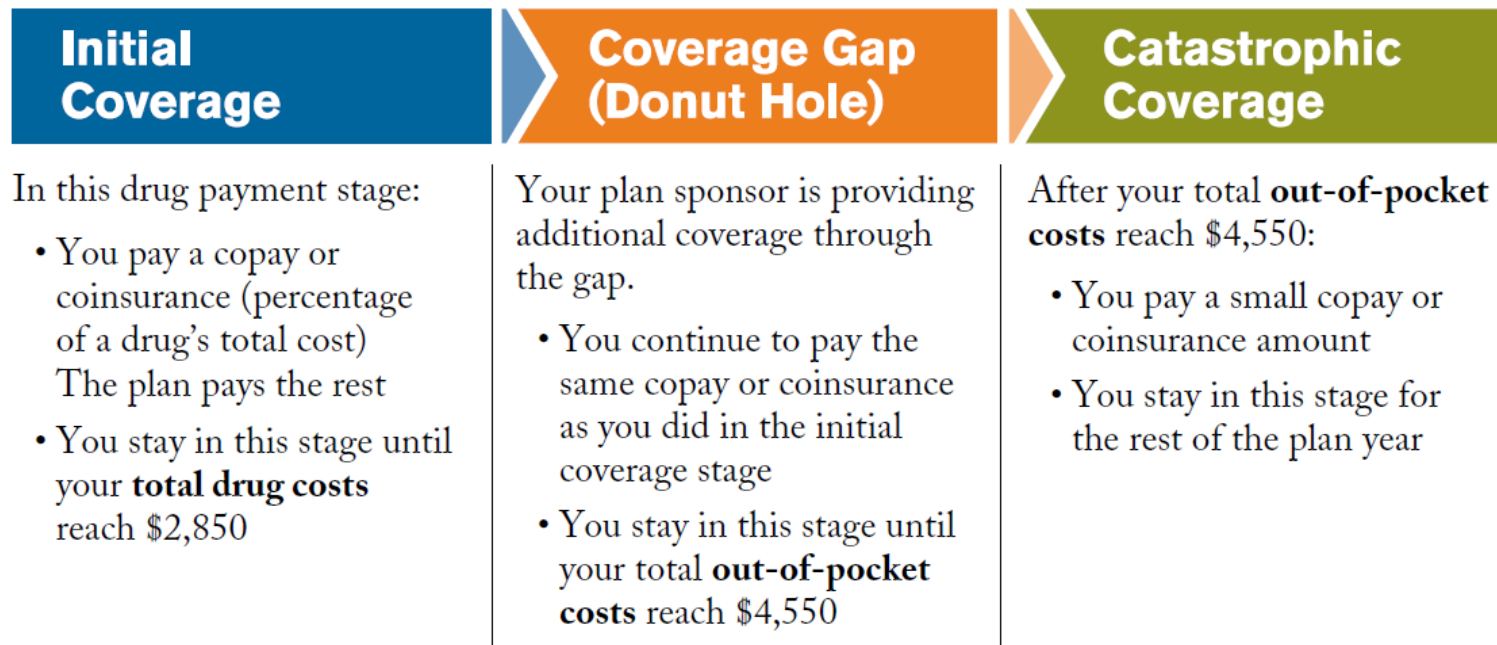
- More than 65,000 network pharmacies nationwide — most national drugstore chains and independent pharmacies, are included.
- Thousands of covered brand name and generic drugs.
- Generic drugs as low as \$2 through our Pharmacy Saver program<sup>2</sup>.
- Check your plan's drug list or call Customer Service to see if your prescription drugs are covered.

# Drug Payment Stages

## High Option plan

### Annual deductible

Your plan does not include an annual deductible. Your coverage begins in the initial coverage stage.



**Total Drug Costs:** The amount you pay (or others pay on your behalf) and the plan pays for prescription drugs [starting January 2014]. This does not include premiums.

**Out-of-Pocket Costs:** The amount you pay (or others pay on your behalf) for prescription drugs [starting January 2014]. This does not include all premiums.



# Your High Option Part D benefit highlights

Tier	Prescription Drug Type	Your Cost: Retail <u>(up to a 90 day supply)</u>	Your Cost: Preferred Mail Order
Tier 1	Generic	\$10	\$20
Tier 2	Preferred Brand and some generics	25% coinsurance / maximum of \$45	25% coinsurance / maximum of \$90
Tier 3	Non-Preferred Brand and some generics	50% coinsurance / maximum of \$95	50% coinsurance / maximum of \$190
Tier 4	Specialty Drugs	50% coinsurance / maximum of \$95	50% coinsurance / maximum of \$190

# Your High Option Part D benefit highlights

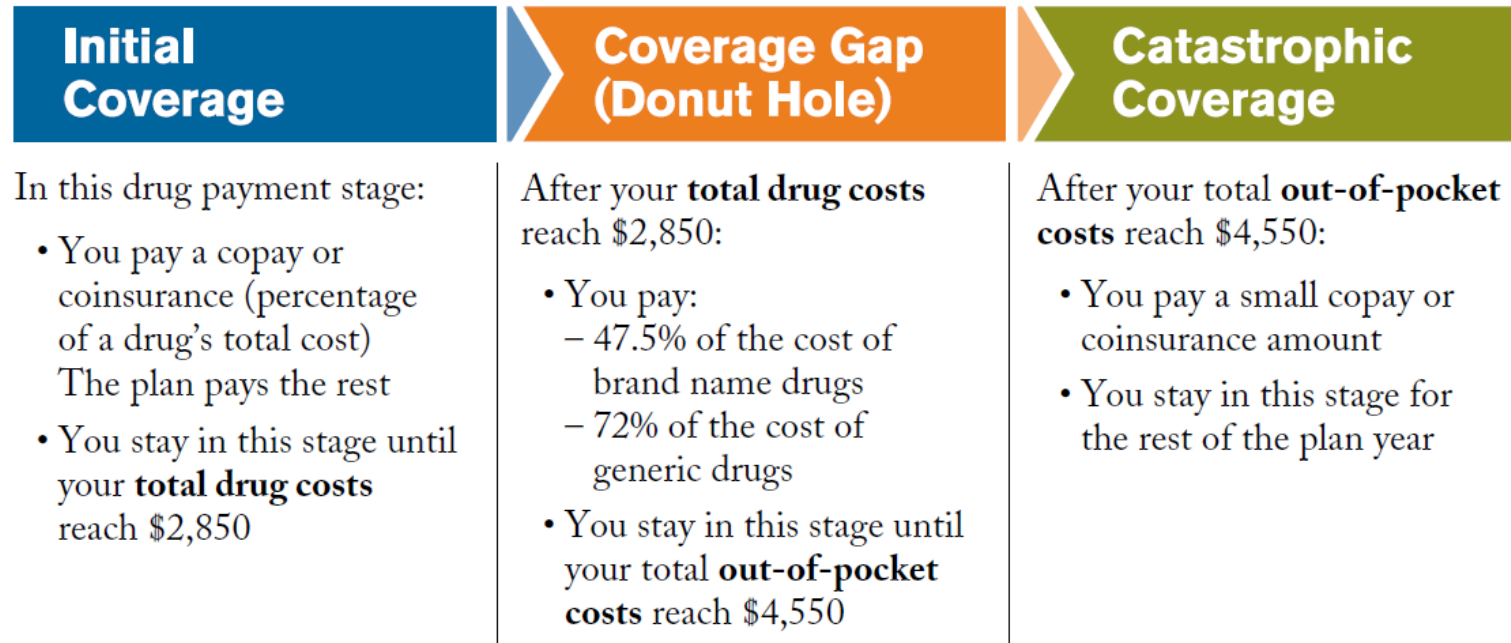
- Full coverage in the coverage gap (donut hole)
- Up to a 90 day supply for 1 retail copay at your local pharmacy

# Drug Payment Stages

## Low Option

### Annual deductible

Your annual deductible is \$310. You pay the total cost of your drugs until you reach your deductible. Then you move to the initial coverage stage.



**Total Drug Costs:** The amount you pay (or others pay on your behalf) and the plan pays for prescription drugs [starting January 2014]. This does not include premiums.

**Out-of-Pocket Costs:** The amount you pay (or others pay on your behalf) for prescription drugs [starting January 2014]. This does not include all premiums.

# Your Low Option Part D benefit highlights

Tier	Prescription Drug Type	Your Cost: Retail	Your Cost: Preferred Mail Order
Annual Deductible		<b>\$310</b>	<b>\$310</b>
Tier 1	Generic	<b>25%</b>	<b>25%</b>
Tier 2	Preferred Brand and some generics	<b>25%</b>	<b>25%</b>
Tier 3	Non-Preferred Brand and some generics	<b>25%</b>	<b>25%</b>
Tier 4	Specialty Drugs	<b>25%</b>	<b>25%</b>

# Mail Service Pharmacy



Your order enters OptumRx fulfillment system.



A pharmacist reviews your information for drug interactions, allergies and dosage.



For your security, another pharmacist reviews your medication for accuracy after it is dispensed.



OptumRx seals your medication in a tamper-evident package.



They mail your medication to you and notify you when it has been shipped.

# More ways you can save

## Review your medications.

- Review your prescription drugs with your doctor at least once a year. Ask, “Do I still need them all? Can I stop taking the ones I don’t need?”

## Use your member ID card.

- Show your member ID card at the pharmacy to get the plan’s discounted rates.

## Use participating network pharmacies.

- You’ll get the greatest benefit, if you use in-network pharmacies.

## Take advantage of our Pharmacy Saver Program

- Prescriptions as low as \$2<sup>2</sup>.

## Use mail service pharmacy.

- You’ll save time and trips to the pharmacy.

<sup>2</sup>Drugs and prices may vary between pharmacies and are subject to change during the plan year. Prices are based on quantity filled at the pharmacy. Quantities may be limited by pharmacy based on their dispensing policy or by the plan based on Quantity Limit requirements; if prescription is in excess of a limit, copay amounts may be higher.

# Fitness program



**Stay physically fit and active at no additional cost.**

**Join SilverSneakers and enjoy:**

- A basic fitness center membership at more than 11,000 locations nationwide.  
(Find the nearest location at [www.SilverSneakers.com](http://www.SilverSneakers.com)).
- Classes, cardio equipment, resistance machines, free weights and heated pools (at certain locations). Amenities may vary at each location.
- Many women-only locations, including Curves<sup>®</sup>, nationwide.
- No location near by? Exercise equipment will be mailed to your home — at no cost to you.

**Don't live near a fitness center?**

SilverSneakers Steps is a personalized fitness program for members who can't get to a SilverSneakers location. Once you enroll in Steps, you may select one of the four kits that best fits your lifestyle and fitness level—general fitness, strength, walking or yoga. The Steps wellness tools can help you be active at home or on the go.



## **You're never alone.**

Whether you have questions about a medication or have a health concern in the middle of the night, with NurseLine a nurse is only a phone call away.

### **Services include:**

Nurses answer you health questions 24 hours a day. They can:

- Help you choose a new doctor
- Provide tips on how to help control diabetes, blood pressure or high cholesterol
- Review your medication and look for generic options
- Connect you with community resources for exercise
- Provide easy ways you can add fruits and vegetable to your diet
- Provide tips to help stop smoking



# Solutions for Caregivers



## Helping you care for a loved one.

Solutions for Caregivers supports you, your family and those you care for.

### Services include:

- On-site assessment by a registered nurse
- A personalized care plan
- Connections to local resources

The products and services described above are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the UnitedHealthcare grievance process.

# Hearing program



- Hearing loss is the third most common chronic health condition among older Americans, and 40% of people age 65 or older are hearing impaired<sup>3</sup>
- Custom programmed hearing aids can address your personal hearing needs
- Batteries and ear tubes/wax guards, provided at no additional cost, that last most users six months
- 70-day no-risk trial period
- One-year manufacturer's warranty
- The convenience of delivery right to your home

**Hearing aids starting at <\$599> each,  
depending on the model you choose.**



<sup>3</sup> "Epidemiology of Hearing Loss Study" by the University of Wisconsin School of Medicine and Public Health

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# Understand Medicare's Rules

- You must keep Medicare Parts A and B and continue to pay your Medicare Part B premium.
- You can only be in one prescription drug plan at a time. Enrolling in another Part D plan will automatically disenroll you from this plan.
- You must read the Evidence of Coverage (EOC), including appeals and grievance rights.
  - The EOC also covers specific plan benefits, copays, exclusions, limitations and other terms.

**Please review the full text of the Statement of Understanding in your 2014 enrollment kit.**

# Questions & Answers

This document is available in alternative formats. If you receive full or partial subsidy for your premium from a plan sponsor (former employer, union group or trust), the amount you owe may be different than what is listed in this document. For information about the actual premium you will pay, please contact your plan sponsor's benefit administrator directly.

The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan. Limitations, copayments, and restrictions may apply. Benefits, formulary, pharmacy network, provider network, premium and/or co-payments/co-insurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium, if not otherwise paid for under Medicaid or by another third party.

Plan is insured or covered by UnitedHealthcare Insurance Company or one of its affiliates, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor.

Plans are insured or covered by UnitedHealthcare Insurance Company or one of its affiliates, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. [UnitedHealthcare Insurance Company pays royalty fees to AARP for the use of its intellectual property. These fees are used for the general purposes of AARP. AARP and its affiliates are not insurers. You do not need to be an AARP member to enroll. AARP encourages you to consider your needs when selecting products and does not make specific product recommendations for individuals.]

### **UNITEDHEALTHCARE® SENIOR SUPPLEMENT PLANS**

UnitedHealthcare Senior Supplement group retiree plans are underwritten by UnitedHealthcare Insurance Company, a private insurance company not connected with or endorsed by the U.S. Government or the federal Medicare program. UnitedHealthcare is part of the UnitedHealth Group family of companies. UnitedHealthcare Senior Supplement plans are not Medicare Supplement plans. They are employer group retiree plans and may provide coverage that is different from a Medicare Supplement plan. In New York, the plans are called UnitedHealthcare Retiree Benefit Plans and are underwritten by UnitedHealthcare Insurance Company of New York. Senior Supplement plans may not be available in all states.

### **Preferred Pharmacy Network**

Member may use any pharmacy in the network but may not receive Preferred Pharmacy pricing. Pharmacies in the Preferred Pharmacy Network may not be available in all areas. Copays apply after deductible.

**[[Solutions for Caregivers]**

Solutions for Caregivers assists in coordinating community and in-home resources. The final decision about your care arrangements must be made by you. In addition, the quality of a particular provider must be solely determined and monitored by you. Information provided to you about a particular provider does not imply and is in no way an endorsement of that particular provider by Solutions for Caregivers. The information on and the selection of a particular provider has been supplied by the provider and is subject to change without written consent of Solutions for Caregivers.]

**[[SilverSneakers]**

SilverSneakers<sup>®</sup> is a registered mark of Healthways, Inc. Consult a health care professional before beginning any exercise program. Availability of the SilverSneakers program varies by plan/market. Refer to your Evidence of Coverage for more details.]

**[[ForeverFit]**

Forever Fit is a registered mark of Healthways, Inc. Healthways, Inc., is an independent company. Consult a health care professional before beginning any exercise program.]

**[[NurseLine]**

OptumHealth<sup>SM</sup> is a health and well-being company that provides information and support as part of your health plan. NurseLine<sup>SM</sup> nurses cannot diagnose problems or recommend specific treatment and are not a substitute for your doctor's care. NurseLine<sup>SM</sup> services are not an insurance program and may be discontinued at any time.]