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October 27, 2017

TO: SHA RETIREE MEDICAL PARTICIPANTS:

Subject: City of Seattle Retiree Medical Annual Enrollment

Dear Seattle Housing Authority Retiree:

This letter contains information about the City of Seattle's Annual Enrollment for retiree medical plans. Annual Enrollment runs Wednesday, **November 1 through Wednesday, November 22, 2017**. Changes you make will go into effect on January 1, 2018.

If you want to *stay* in your current medical plan, **no action is necessary. Please note** that your 2018 premium of is due no later than Thursday, December 15, 2017 for your January 2018 coverage. If you currently participate in the automatic premium deduction with Washington State, your new premium deduction amount will automatically begin with your December 31, 2017 pension check, and you will remain on your current medical plan.

If you want to *change* medical coverage effective January 1, 2018, here's what you need to do:

- If you are changing medical plans offered through the City, you must fill out an enrollment form and submit it to Human Resources postmarked no later than Wednesday, November 22, 2017. Call our office at (206) 615-3328 to request an enrollment form to be emailed or e-mailed to you. You can also access the enrollment forms at the SHA website: https://www.seattlehousing.org/work-at-sha/employee-benefits/retirement/retiree-medical-plan. Your new coverage will go into effect January 1, 2018.
- If you want to drop/cancel your City retiree medical plan coverage effective January 1, 2018, you must notify Seattle Housing Authority (SHA), Human Resources in writing by Thursday, November 30, 2017.

Please read this letter and the enclosed information to understand your options and upcoming plan changes. The 2018 benefit comparisons, enrollment forms and rate sheets and the detailed plan booklets are also available online at SHA website: <u>https://www.seattlehousing.org/work-at-sha/employee-benefits/retirement/retiree-medical-plan</u>

Other Retiree Medical Insurance Options

The plans offered by the City are chosen to approximate coverage offered to active employees. We encourage retirees to explore all options available to them to ensure they have medical coverage that best meets their health and financial needs.

• Retirees Under Age 65 – You may have options available to you through the state Health Insurance Exchange at <u>www.wahealthplanfinder.org</u>. These plans are "guaranteed issue" – they cannot deny you coverage. The standard plan designs make it easy to compare pricing, and may better meet your financial requirements than Retiree Open Enrollment Page 2 October 27, 2017

City plans. Their Open Enrollment is November 1, 2017 – December 15, 2017.

• Retirees Age 65 and Over (Medicare-eligible retirees) – While there are no Medicare options available on the state Health Insurance Exchange, remember that you have access to many other individual Medicare plans that may be more suitable for your financial situation in addition to the City's plan. And, like the Health Insurance Exchange plans, you cannot be denied coverage, and can change plans annually during Medicare's open enrollment. We encourage you to explore these other options directly with the providers of those plans, or consult with the Statewide Health Insurance Benefits Advisors program at 800-562-6900. Contact us at (206) 615-3328 before making any changes, to ensure continued coverage for your spouse and/or dependents.

If you purchase medical coverage through a Health Insurance Exchange or obtain an individual Medicare Supplement or Medicare Advantage plan, **you will not be able to return to City coverage** in the future, because these plans are not group/employer health plans. However, as indicated above, you can change plans annually during the Medicare and Exchange open enrollments. This is your opportunity to consider what plan might be more suitable for you.

Medical Plans for Retirees and Dependents Under Age 65

The City will offer the same four medical plans as last year to retirees and dependents under age 65. See the enclosed rates and comparison charts for more information. The following are changes to the Aetna plans.

Aetna Preventive and Traditional Medical Plans

- Teladoc: Adding 24/7 medical consultation with a physician by web, phone or mobile device for selected short-term services. Ongoing consultation with behavioral health providers is also available.
- In Touch Care: Combining disease and case management services so families have a single nurse contact per episode of care.
- Rx Exclusion Drug List: Removing coverage of certain high cost convenience and combination medications which have clinically effective alternatives.
- Pharmacy Counseling: Adding Rx counseling program for chronic disease and maintenance medication by increasing pharmacy contact with members to improve medication adherence and reducing gaps in care.

Please call the medical plans directly with your specific questions:

- City of Seattle Preventive or Traditional (Aetna): 1-877-292-2480
- Kaiser Permanente Deductible: 1-888-901-4636 (Group #0961100)
- Kaiser Permanente Standard: 1-888-901-4636 (Group # 1004400)

Turning 65? To enroll in a Medicare Advantage plan offered through the City, you must provide a copy of your Medicare Parts A and B card 30 days before your 65th birthday. Apply for Medicare Parts A and B online at

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www.secure.ssa.gov/iClaim/rib/, or stop by your local Social Security Administration office.

Medicare Advantage Medical Plans: Retirees and Dependents Age 65 and Over

The City will continue to offer the same four Medicare Advantage plans to Medicare-eligible retirees and dependents in 2018. Advantage plans, sometimes referred to as Part C, cover all the services of Medicare Parts A (hospital insurance) & B (medical insurance) plus extra coverage like wellness and disease management programs. The City plans also include Medicare Part D (prescription drug coverage).

The Aetna, Kaiser Permanente (formerly Group Health) and United Healthcare plan designs are essentially the same, other than the customary drug formulary updates and any changes required by Medicare. The Aetna Medicare monthly premium has increased 19% from \$264.99 (2017) to \$316.60 (2018) for Washington State residents. The Kaiser Permanente premiums remain the same - \$402.18 (MAPD3) and \$376.33 (MAPD 4). The United Healthcare monthly premium has increased 7% from \$373.32 (2017) to \$399.45.

Where to call for questions about your Medicare Advantage Plan: For further information about any formulary changes or those required by Medicare, or to obtain information about the individual Medicare plans they offer, please contact the medical plans directly:

- Aetna Medicare Plan (PPO): 1-800-307-4830 (AE #430517)
 - o https://www.aetna.com/
- Kaiser Permanente Medicare Advantage Plans with Part D: MAPD 3 or MAPD 4: 1-888901-4636 (Group # 0335500)
 - -888901-4838 (Gloup # 03355
 - o <u>http://www.kp.org/wa</u>
- United Healthcare Medicare Complete HMO: 1-866-622-8055 (Group # 801855)
 <u>http://www.uhc.com/</u>

Again, to ensure you are enrolled in a plan that meets your specific health and financial needs, you may wish to explore options other than the City's plans. You may do that directly through the providers of those other plans – Medicare Supplement and Individual Medicare Advantage plans. If you are considering a switch to a **non-City plan**, contact the Benefits Unit to ensure continued coverage for your spouse and/or dependents.

Re-Enrollment Option Reminder

All retirees currently enrolled in a City medical plan have a drop/re-enroll option, which may be exercised at any time. You may drop your City retiree medical coverage and have the option of re-enrolling in a City plan at a future date as long as you meet these conditions.

• You must maintain continuous coverage under another *group* medical plan for the entire time you are not enrolled in a City plan. "Continuous coverage" means there are NO gaps in medical coverage. "Another group medical plan" means a plan offered through another employer, either your own employer or the employer of your spouse or domestic partner. Individual medical plans -- whether obtained through a broker, insurer, HMO, Medicaid, the

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State High Risk Pool, Health Insurance Exchanges or other entities -- DO NOT qualify as continuous group coverage, and DO NOT meet the requirements for re-enrollment.

- You may re-enroll in a City plan only if you lose eligibility for the other employer group coverage, such as due to your or your spouse's job loss or retirement, or aging out of coverage (as documented by the Human Resources staff of the other employer).
- You must re-enroll in a City Plan within 30 days of losing your other coverage.

Enrollment Process Summary

Annual Enrollment ends on <u>Wednesday</u>, <u>November 22, 2017</u>. Your completed enrollment form must be <u>postmarked</u> on or before November 22. If your forms are postmarked after November 22, 2017, changes will not be made and you will remain on your current plan in 2018. If you have questions, please call me at (206) 615-3328 or email (<u>maria.sahagun@seatthousing.org</u>). **Please note:** SHA, Human Resources staff cannot counsel you on your medical coverage choice. We are not licensed insurance agents, and we cannot offer financial advice.

We appreciate you taking the time to look at your coverage needs and making any necessary changes by the end of Annual Enrollment.

Sincerely,

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Maria Sahagun HR Benefits Administrator

Enclosures: 2018 Monthly Retiree Rates 2018 Medical Comparison 2018 Annual Notices