# Montgomery County Retired Employees' Association (MCREA) Annual Meeting June 14, 2017

Presented by

Karen Bass, Health Insurance Manager



#### **In This Presentation**

New for Retirees: Change Your Benefits at Any Time

High Option Prescription vs. Standard Prescription Plans



- Communicated this during the Annual Open Enrollment Materials
  - May Newsletter
  - Postcard
  - This annual meeting
- Why?
  - Retirees pay for insurance on a post-tax basis
  - IRS rules don't apply
  - We were allowing retirees to make changes throughout the year
  - Open the "Oracle" system
  - Created confusion, sense of urgency for no real reason.



- There will be no annual open enrollment period for retirees.
- 60-day rule still applies if you have a qualifying event
  - New baby
- Forms have to be received by the 10<sup>th</sup> of the month to be effective the 1<sup>st</sup> of the following month.
  - Example: Form received by July 10<sup>th</sup> Changes will be effective August 1<sup>st</sup>.
  - Example: Form received by July 11th Changes will be effective September 1st.



#### What will retirees receive?

- A letter in late November/early December that will outline any changes to plans.
- A rate sheet for their specific, current cost share (we did this last year).
- A confirmation of elections for 2018 plan year (January December).
- No plan changes expected for 2018 at this time.



How do you make changes?

- Complete a retiree group insurance election form.
  - Available on-line
  - Call OHR MC311 Customer Care Center (240-773-6471)
  - Stop by our office on the 7<sup>th</sup> Floor of the EOB (8 a.m. 5 p.m., Monday through Friday)
- Mail it, fax it, or drop it off.
- Adding any new dependents, be sure to include appropriate documentation.



- Both plans cover the SAME drugs.
- The difference in the plans is how you pay for them.
- High Plan = higher premium, lower copayments
  - County only contributes the premium towards the Standard Plan, retirees pay the full price difference between the plans.
  - Two Tier Plan
    - \$5 copayment = Generics
    - \$10 copayment = Brand Name Drugs



- Standard Plan = lower monthly premium, higher copayments
  - Annual \$50 deductible (family, not individual)
  - Three Tier Drug Plan
    - \$10 = Generics
    - \$20 = Formulary Drugs
    - \$35 = Brand Name Drugs



	Non-Medicare Monthly		Medicare Monthly		Split Rate Monthly	
	Savings		Savings		Savings	
Self	\$	181.41	\$	221.46	\$	375.71
Self+1	\$	335.66	\$	442.96	\$	161.07
Family	\$	521.95	\$	664.42	\$	-

	Non-Medicare		Medicare	Split Rate	
		Annual	Annual	Annual	
	Savings		Savings	Savings	
Self	\$	2,176.92	\$ 2,657.52	\$	4,508.52
Self+1	\$	4,027.92	\$ 5,315.52	\$	6,722.40
Family	\$	6,263.40	\$ 7,973.04	\$	-



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