

# Aetna Informational Meeting

Chris Olson



## Our commitment to University of Chicago retirees

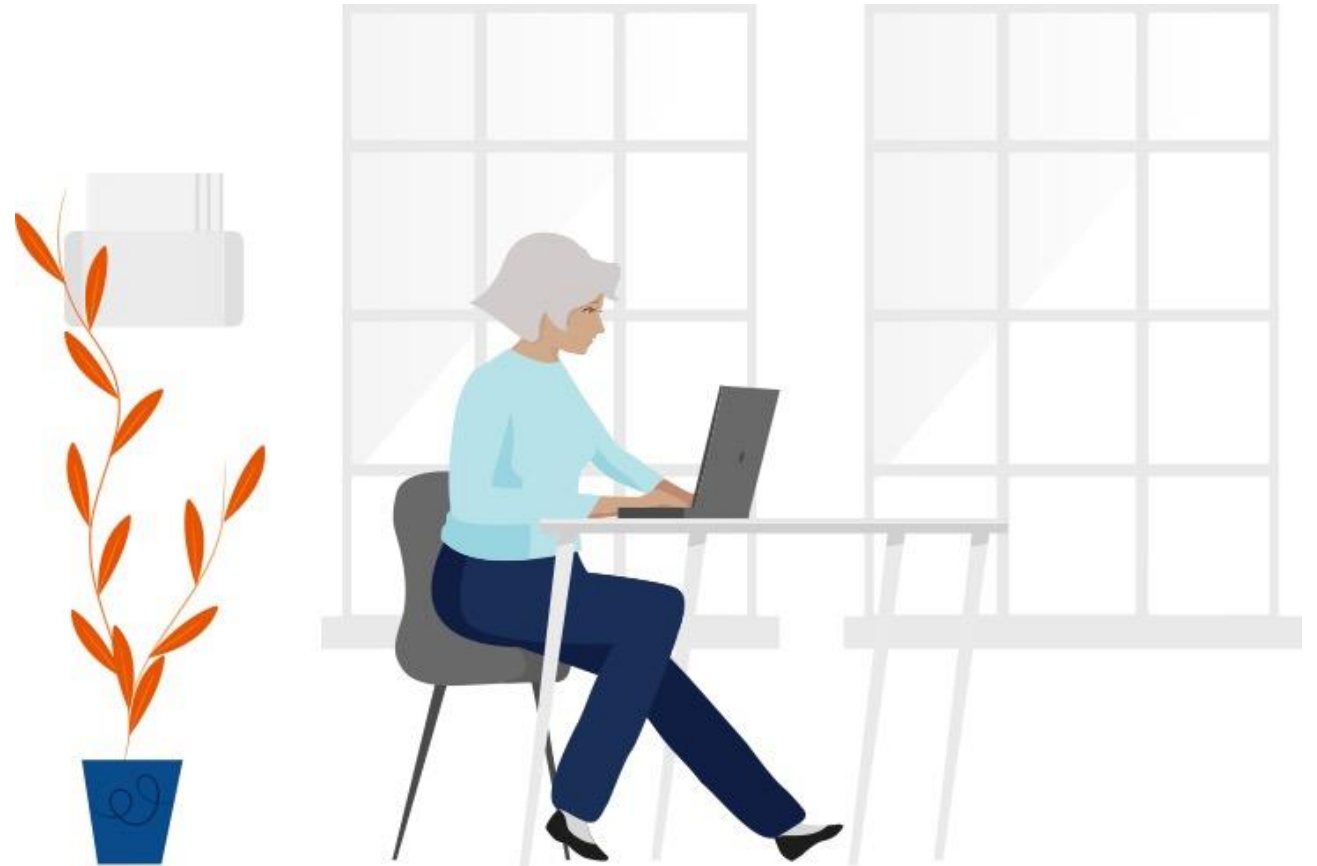
**Make health care simple,  
local and accessible to you.**

**Provide the health  
resources you need.**

**Help you achieve your best  
health however you define  
it.**

# What we'll cover

- Medicare
- Aetna Medicare Advantage
- Aetna Medicare Supplement
- SilverScript Part D
- Next Steps

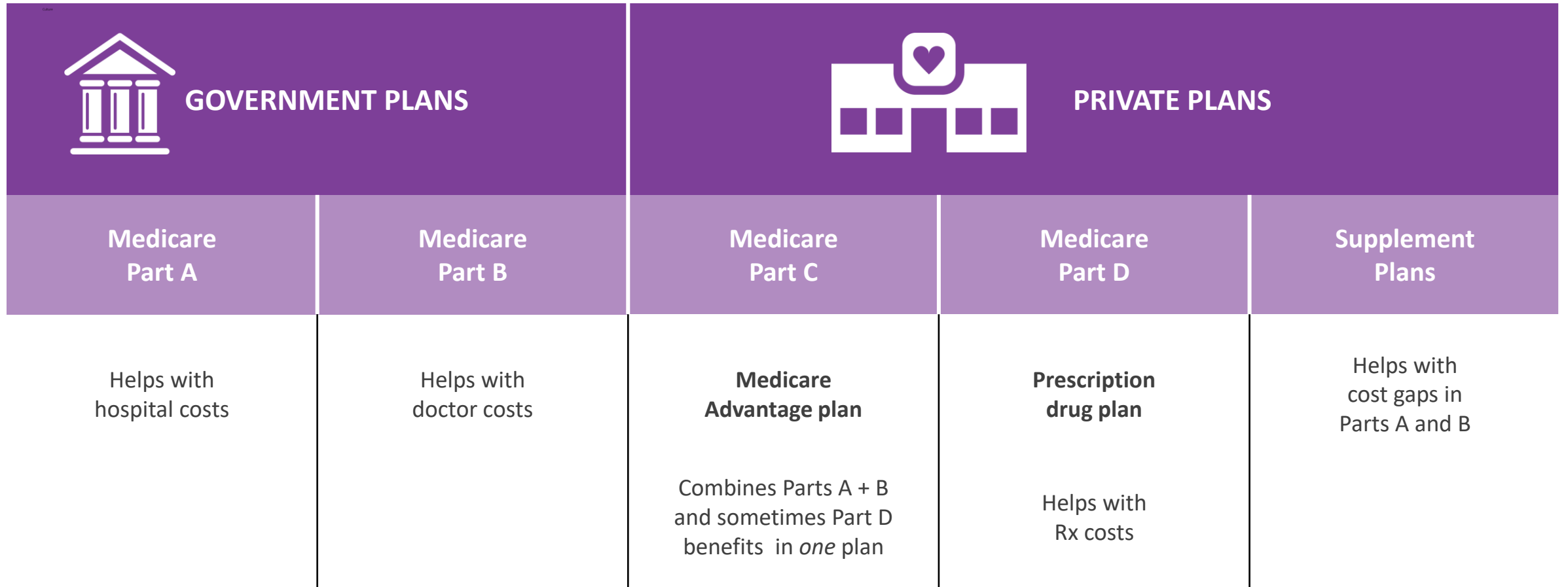


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# Medicare

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# A simple view





# UChicago Retiree benefit plan options

- ❖ **Aetna Medicare Advantage plan**
- ❖ **Aetna Medicare Supplement plan**

# Let's compare your medical benefit plan options

	Aetna Medicare Advantage Plan	Aetna Medicare Supplemental Plan
Referral requirement	None	None
Deductible*	\$150 per individual	\$300 per individual
Out-of-pocket maximum	\$1,000 per individual (includes deductible, copays and coinsurance)	\$1,750 per individual (includes deductible and coinsurance)
Preventive care**	\$0	\$0
Primary care office visit	\$10	10%
Specialty care office visit	\$30	10%
Inpatient hospital	\$250 per stay***	10% after \$250 copay***
Outpatient hospital	\$50***	10%
Emergency room**	\$100	10%
Foreign travel	Emergency coverage	Emergency coverage

\*This is the amount you have to pay out of pocket before the plan will pay, except for preventive and emergency care.

\*\*Deductible does not apply.

\*\*\*After the deductible

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**Aetna Medicare Advantage Plan  
Aetna Medicare <sup>SM</sup> Plan (PPO) with  
Extended Service Area ESA**

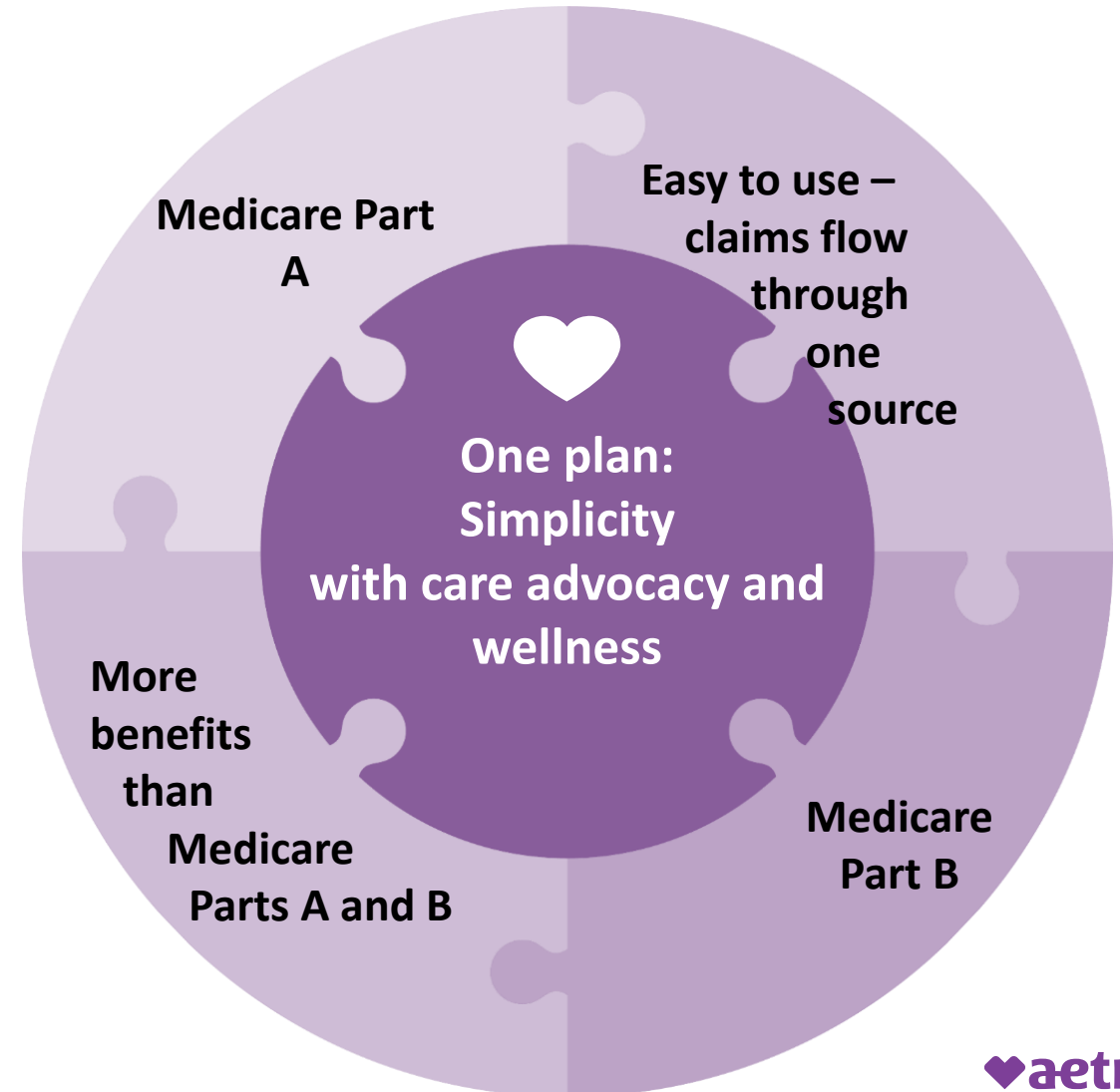
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# How the Medicare Advantage plan works

- One step for you
- One medical ID card
- One monthly Explanation of Benefits for medical services
- Extra programs to help you reach your health goals

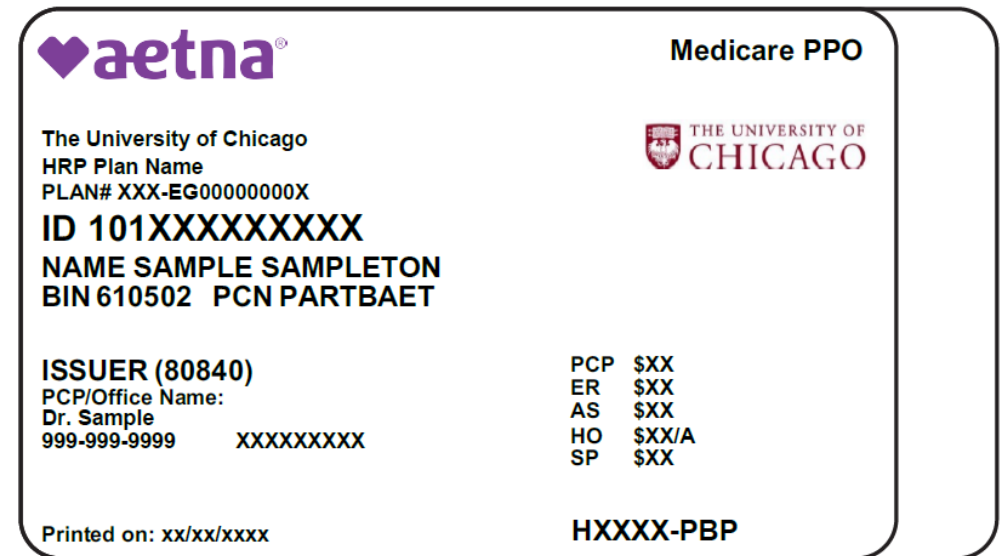
**Medicare Advantage plans must cover all Medicare-approved services**



# Medicare Advantage is an all-in-one plan

- Easy to use
- One medical ID card
- Tuck away your Original Medicare red, white and blue card
- More benefits than Original Medicare Part A and Part B
- Health Advocacy and wellness support

## Your single ID card



You will have a separate Pharmacy ID card through SilverScript

We've got you  
covered  
with freedom of access



## **Aetna Medicare Advantage Preferred Provider Organization (PPO) with Extended Service Area (ESA)**

- Access to providers nationwide
- See any doctor who is eligible to receive Medicare payment and willing to accept your Aetna MA Plan
- No referrals needed
- Covers you nationally when travelling
- Over 1,000,000 network doctors and specialists and 4,000 network hospitals
- Worldwide coverage for emergency and urgent care

# Will I still be able to see my current doctors?



Yes, you can, if your providers are:

- Eligible to receive Medicare payment
- Willing to accept your Aetna Medicare Advantage plan

Many doctors do.

Because this is a PPO ESA plan, your copays or cost-share amounts are the same for any doctor or hospital according to the costs listed on your plan benefits summary.

**Will my doctors  
accept my  
Aetna plan?**



**Find out if your doctor will accept the Aetna Medicare Advantage PPO Extended Service Area (ESA) plan**

Call us at **1-888-267-2637 (TTY: 711)** Monday through Friday, 8 AM to 9 PM ET.

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# **Additional Benefits with Aetna Medicare Advantage**

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# You can get help anywhere on your health journey with your Aetna Medicare Advantage plan



## Prevention

- Eye and hearing exams
- Annual physicals
- Flu shots and other vaccines
- Women's annual health reminder
- Cancer screening reminder



## Wellness

- Healthy Home Visits
- 24/7 Nurse Line
- Hearing Aid reimbursements
- Teladoc<sup>®</sup> /Telehealth
- SilverSneakers<sup>®</sup> Fitness Program
- Nonemergency Transportation



## Support

- Resources For Living<sup>®</sup>
- Chronic health condition support
- Readmission Avoidance Program
- Meal Home Delivery program
- Aetna Compassionate Care<sup>SM</sup>
- Healthy Aging Support program





## Meal Home Delivery program

### Helps you transition smoothly to your home from a hospital stay

- Provides 14 delicious and highly nutritious meals delivered to your home during the first 7 days following your hospital stay.
- Ability to cater to special dietary needs, including diabetic and pureed foods.
- Having your meals taken care of may help you on your journey to recovery.

**This service is provided as part of your Aetna Medicare Advantage plan at no additional cost to you.**



## Healthy Home Visits

### Get an extra layer of care in your home

Voluntary visits where a nurse comes to your home

- Home Safety Assessment
  - Talks about safety in your home
- Reviews your medications
- Offers care advocacy resources and support programs
- Activity and independence assessment
- Holistic health screening
- Shares results with your doctor

Our licensed clinicians follow all Centers for Disease Control and Prevention (CDC) guidelines and safety measures including, but not limited to, social distancing with anyone else in the household and wearing face masks and gloves.

Your plan also includes telehealth virtual provider visits.



## Nonemergency transportation benefit

### Safe, comfortable transportation to and from medical appointments

- This program helps you focus on your health and treatment plans and worry less about getting to the doctor.
- 24 annual rides are included in your plan for non-emergency trips to and from medical appointments.
- A round trip to an appointment is considered two rides.

**This voluntary program is part of your Aetna Medicare Advantage plan so there is no additional cost to you.**



## SilverSneakers® fitness benefit

## Access to fitness benefits from anywhere

### With this benefit you get:

- A membership at thousands of participating gyms and fitness centers available nationwide, at no extra cost.
- Over 200 on-demand videos and live virtual classes from the comfort of your home.
- To get started, visit **SilverSneakers.com** or call SilverSneakers Customer Service at **1-888-423-4632 (TTY: 711)**, Monday through Friday, 8 AM to 8 PM ET.





## 24-hour Nurse Line

### Get help from a registered nurse anytime

- You have toll-free, 24-hour access to nurses who can help answer your health questions. This doesn't replace care from your regular doctor.
- Talk to our registered nurses, day or night, to get help with concerns such as:
  - Deciding whether to visit a doctor or urgent care center
  - Understanding your symptoms
  - Learning about treatment options and medical procedures
- Call **1-800-556-1555 (TTY: 711)**, available 24/7.
- If you need emergency care, call 911 or go to the nearest emergency room immediately.



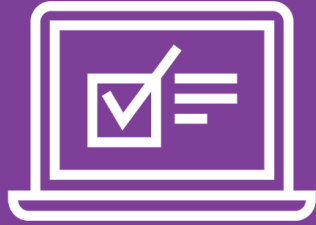
## Resources For Living<sup>®</sup>

### Support to make life easier and more enjoyable

- A Resources For Living life consultant can refer you to a wide-range of cost-effective and reliable services in your area.
- Consultants can help with resources in the following categories:
  - Help at home
  - Transportation
  - Social and recreational activities
  - Caregiver support, and more
- The program is also available to support your caregivers.

**This voluntary service is part of your Aetna Medicare Advantage plan so there is no additional cost to you. You would only pay the cost for any service you decide to use.**

To speak to a consultant, just call **1-866-370-4842 (TTY: 711)**, Monday–Friday, 8 AM–9 PM, ET.



# Telehealth Services

## Virtual care with your own doctors

With telehealth, you can access care from the comfort of your own home by speaking to a licensed doctor by web, phone or mobile app. It's a convenient way to receive care if an in-person visit isn't possible or required.

### Many options are covered, including:

- Routine care
- Urgent care
- Behavioral health services (individual and group sessions)

You should contact your doctor or local urgent care to find out how to access telehealth services.

You can also call the number on your Aetna member ID Card.

You will pay the same copay as you would for an in-person visit, Telehealth PCP visit copays are \$10





**Teladoc<sup>®</sup>**

## 24/7 access to board-certified doctors

It's a convenient and affordable option for quality care:

- If you're considering the ER or urgent care center for a nonemergency issue. For emergency care, go to the nearest ER.
- If you're on vacation or away from home
- For short-term prescription refills

**Teladoc doctors can help with many medical conditions, including:**

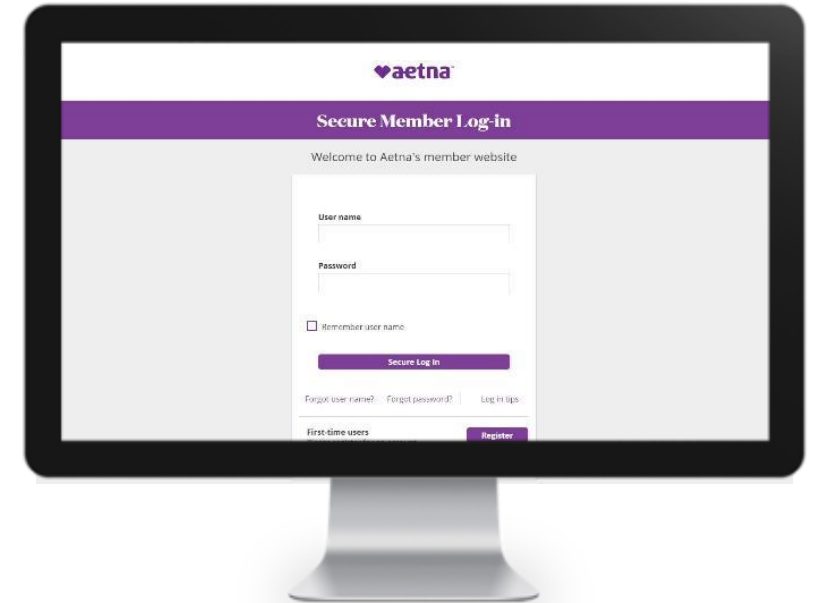
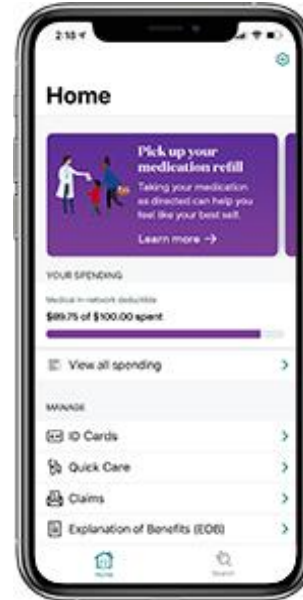
- Cold and flu symptoms
- Allergies
- Sinus problems
- Sore throat
- Respiratory infection
- Skin problems

To access Teladoc, just call **1-855-TELADOC (1-855-835-2362)**. Or visit **[Teladoc.com/Aetna](https://www.teladoc.com/Aetna)**. Teladoc is available 24/7.

# Aetna® Medicare member website

Use our **secure member website** or **Aetna Health Phone app** to:

- Connect with care
  - Find walk-in clinics
  - Search for a PCP
  - View provider ratings and reviews
- Manage your benefits
  - View plan details
  - See progress toward your deductible
  - Access your digital ID card
- Review your claims
  - Receive your Medical EOB statement
  - Get detailed cost breakdown of claims
- Stay healthy
  - Take a health assessment
  - Try health coaching
  - Start a wellness program
  - Get treatment options



[AetnaRetireePlans.com](https://www.aetna.com/retireeplans)

Log in or register for an account using your member ID.

You can also manage your benefits right from your phone with the Aetna Health<sup>SM</sup> app. You will have a separate SilverScript pharmacy member website through CVS Caremark.

**Helping you reach  
your health goals – whatever  
they may be**

98%

overall satisfaction with Aetna  
Medicare Advantage plan coverage  
and benefits\*

\*2022 Aetna Medicare Advantage group plan member satisfaction survey

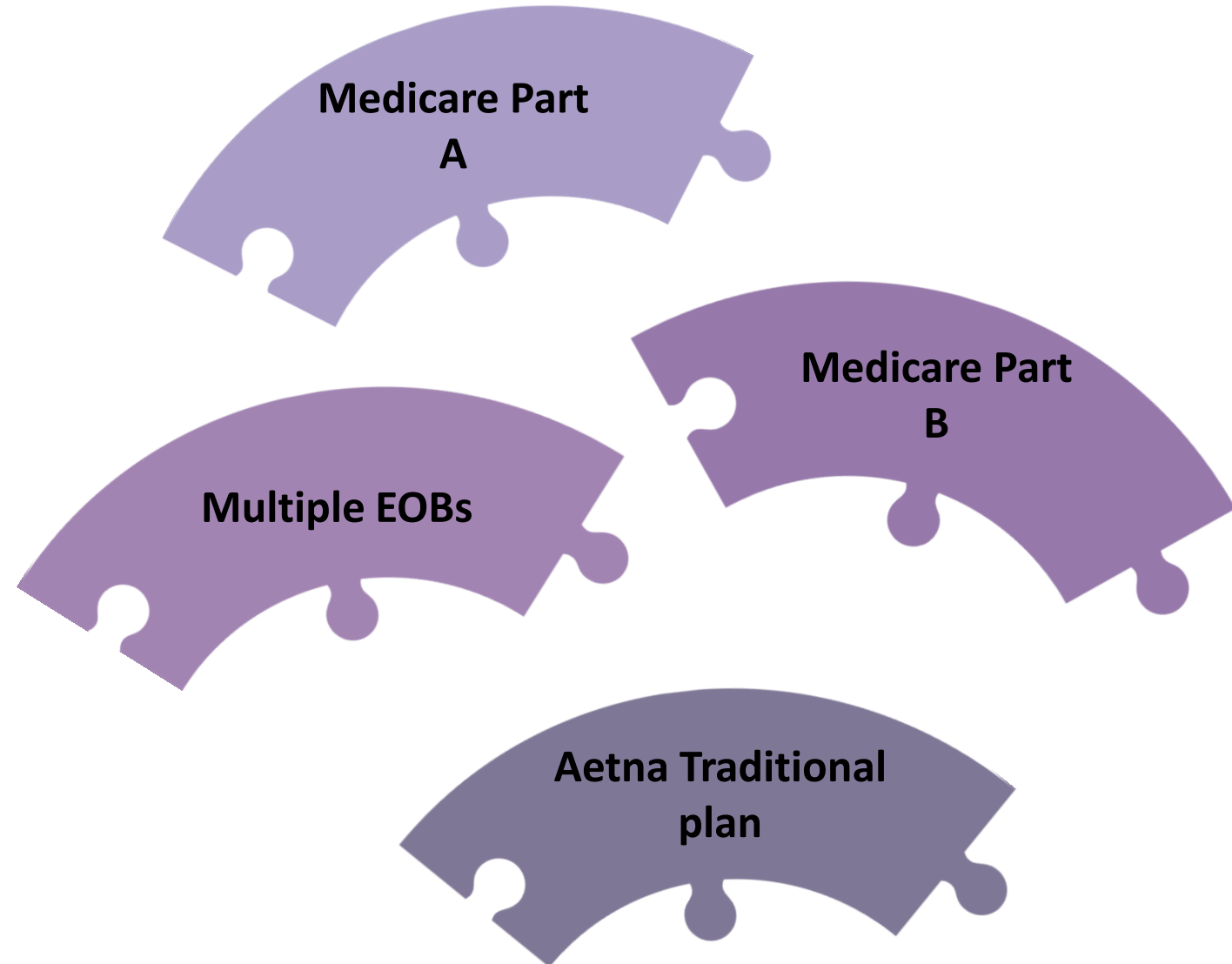
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# **Aetna Medicare Supplement Plan Traditional Choice**

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# How the Traditional plan (Medicare Supplement Plan) works

- Traditional Medicare pays first
- UChicago Aetna Plan pays second
- Two medical ID cards
  - Original Medicare card
  - Aetna ID card
- Paperwork from:
  - Health care providers
  - Medicare
  - Medical plan
- Multiple bills and Explanations of Benefits

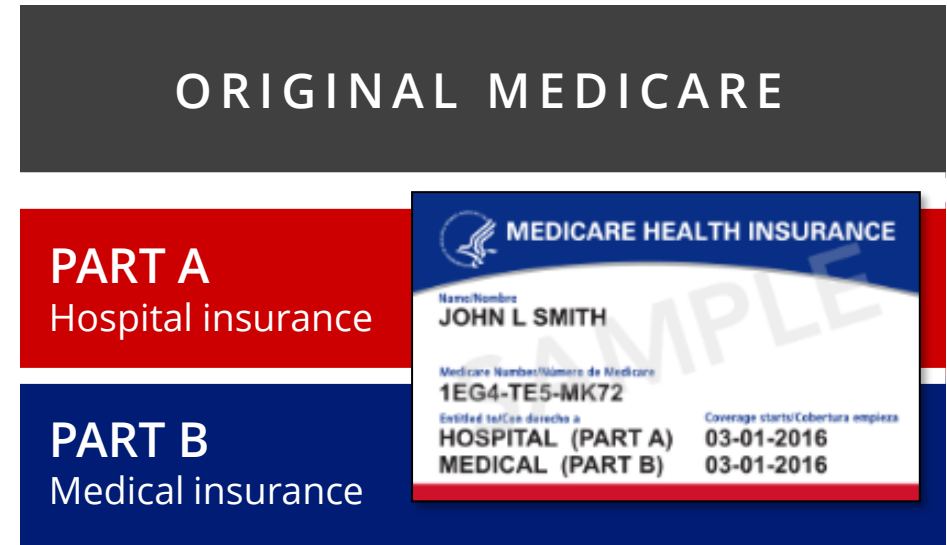


# Aetna Medicare Supplement Plan: Two Medical ID Cards

## Aetna ID Card



## Original Medicare ID Card



You will have a separate Pharmacy ID card through SilverScript

# Let's look at your Medicare Supplement Plan option

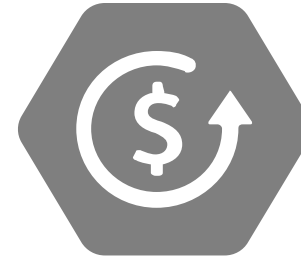


Medicare is your *primary* insurance

Medicare provides Parts A & B benefits



You use your Medicare and Aetna cards



Your costs are simplified

You pay a deductible and 10% coinsurance for most services  
The plan covers all of the benefits that Medicare covers



You get extra benefits

Automatic claim filing  
Routine hearing services  
Member discount program available providing discounts on services.

No network restrictions – providers only need to accept Medicare





**We've got  
you covered**

## Aetna Medicare Supplement Medical Plan

- Access to Medicare contracted providers nationwide
- No referral needed
- Covers you nationally
- Covers you when traveling abroad for:
  - Emergency care
  - Urgent care

# University of Chicago Retiree Plans Claim Examples

## Physician office visits

### University of Chicago Medicare Supplement Plan

Specialist Office Visit or X-ray	\$475
Medicare allows	\$285
Medicare pays 80%*	\$228

UC Medicare Supplement plan pays \$51.30

*Member owes 10% coinsurance of \$57 = \$5.70*

*\*Assumes \$300 plan deductible already met which includes the Medicare Part B deductible \$226 in 2023*

### Aetna Medicare Advantage Plan

Specialist Office Visit or X-ray	\$475
Medicare allows	\$285

Medicare Advantage plan pays\* \$255

*Member owes copay \$30*

*\*Assumes \$150 plan deductible already met*

## Hospital confinement

### University of Chicago Medicare Supplement Plan

Hospital inpatient	\$35,000
Medicare allows	\$21,000
Medicare pays*	\$19,400

UC Medicare Supplement plan pays \$ 1,190\*\*

*Member owes \$250 copay+10% of the remainder of the Part A deductible (\$1,600 in 2023); \$250 + \$160 = \$410*

*\* Member is responsible for a portion of the Medicare Part A deductible, per admission.*

*\*\*Assumes Member has not met their Med. Supp Max OOP of \$1,750.*

### Aetna Medicare Advantage Plan

Hospital inpatient	\$35,000
Medicare allows	\$21,000

Medicare Advantage plan pays\* \$20,750

*Member owes copay \$250*

*\*Assumes \$150 plan deductible already met*

# University of Chicago

2024 Part D Drug  
Coverage

SilverScript®



## Medicare Eligible Retirees:

	Retail Pharmacy (Up to a 31-Day Supply)	Home Delivery/Mail Order Pharmacy (90-Day Supply)	Retail Pharmacy
Generic Copay	You pay \$10	You pay \$20	You pay \$30
Preferred Brand Copay	You pay \$30	You pay \$60	You pay \$90
Non-Preferred Brand Copay	You pay \$50	You pay \$100	You pay \$150
Specialty Copay	You pay \$75	You pay \$150	You pay \$225

# Pharmacy terms and ways to manage your medication

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Some medications require you to take additional steps, or receive additional approvals, before they are covered under your plan.

**Quantity limit** | A limit on the amount of medications your plan will cover. You can continue to fill prescriptions after you've reached the limit, but you'll be responsible for any additional costs.

**Step therapy** | For many conditions, more than one therapeutically equivalent medication option is available, and your plan may choose one medication as the preferred option. Step therapy means you need to try the preferred option first. If it works for you, you can continue to take it and may save money. If not, non-preferred medications will be covered.

**Prior authorization** | This means we need more information on why your doctor has prescribed a specific medication for you. CVS Caremark reviews this information and determines whether or not your medication will be covered by your plan.

**Dispense as written** | If your doctor indicates "dispense as written" on your prescription, your pharmacy can't substitute a generic for a brand name medication and you may have to pay more for the brand.

**Appeals** | If we deny your or your doctor's request for coverage of a non-covered medication, you have the right to appeal that decision.

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- ▶ Find more information on these topics in your Summary Plan Description (SPD).
  - ▶ Use the Check Drug Costs & Coverage tool at Caremark.com to find out what medications are covered, if there are extra requirements for coverage, and how much they will cost.
  - ▶ Remember: Medications are only covered when you fill your prescriptions at a network pharmacy. Find pharmacies near you with the *Pharmacy Locator* at Caremark.com.



# Your prior authorization journey

## What you need to know



**You have a maintenance medication that requires a prior authorization**

▶ You receive a letter from SilverScript informing you that a maintenance medication you are taking requires a Prior Authorization.

▶ You can mail or fax your request to the address/fax number indicated on the provided form OR you can request by phone at **1-833-958-2658, TTY: 711**, 24 hours a day, 7 days a week. Your prescriber can also initiate by calling **1-855-344-0930**.

▶ Your physician is asked to provide clinical information on the medication you are taking for review by our Medicare Coverage Determinations team.

▶ You will receive a decision within 72 hours. If you or your prescriber believe that waiting 72 hours could seriously harm your health, you may request an expedited decision and we will give you a decision within 24 hours.





Ready to Retire?

SilverScript<sup>®</sup>

♥ aetna<sup>®</sup>





## Am I eligible?

- The Retiree Medical Plan is available to employees who retire from the University who are either:
- Employed prior to January 1, 2005, in a continuous benefits-eligible position and are at least age 55 when employment terminates; or
- Employed on or after January 1, 2005, are at least age 55, and have completed at least 10 years of continuous benefits-eligible service when employment terminates.

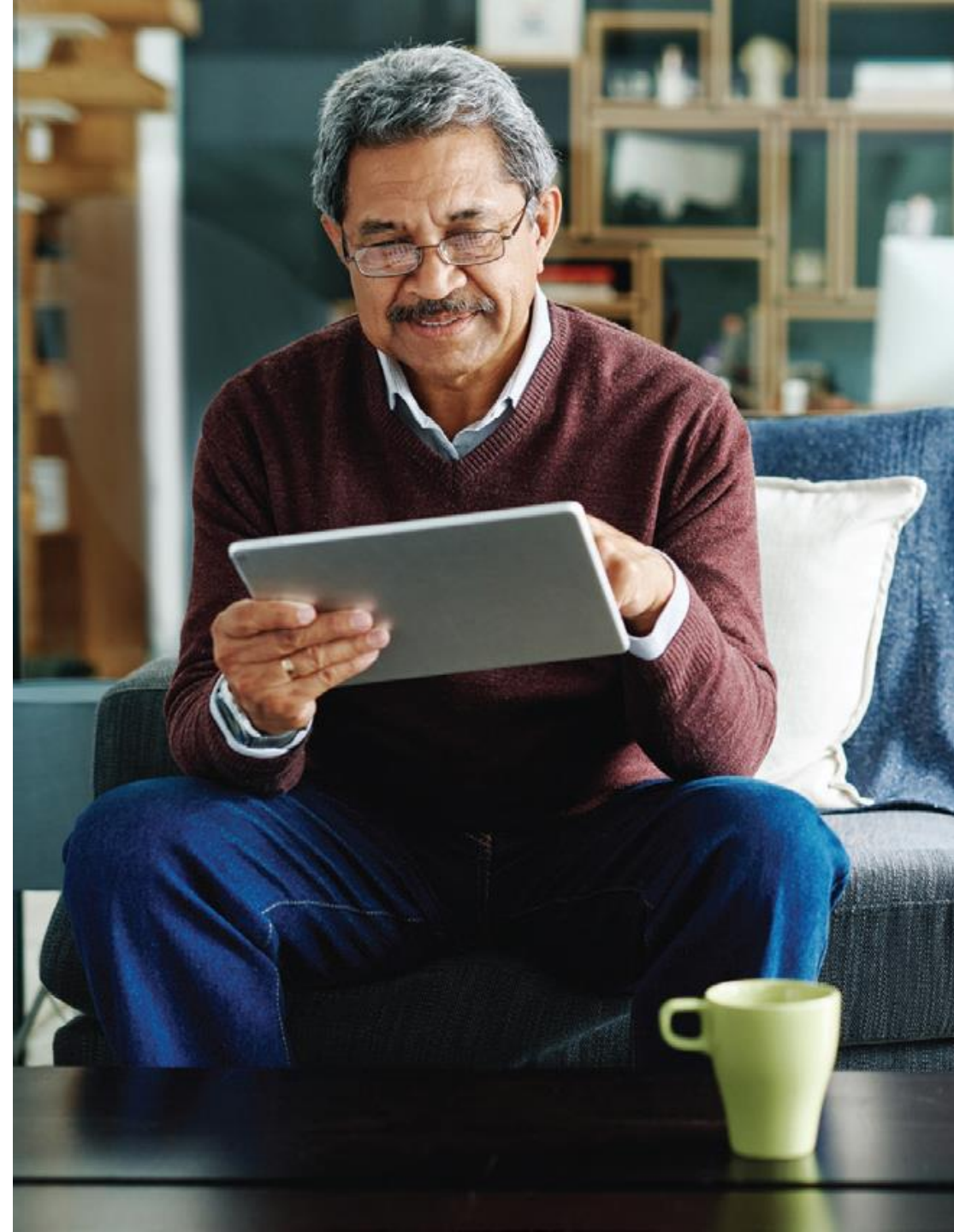


# Schedule a Retirement Meeting

Contact the Benefits Office via email at [benefits@uchicago.edu](mailto:benefits@uchicago.edu) within 60 days of your retirement date to schedule an appointment to discuss the Retiree Medical Plan.

If you are Medicare eligible, contact the Social Security Administration Office at (800)772-1213 to enroll in Medicare Part A and Part B.

**The Benefits Office cannot answer any Social Security and/or Medicare coverage questions.**





## Your Options?

### Choose a Plan

- Complete and submit the Retiree Medical Plan Enrollment Form to [benefits@uchicago.edu](mailto:benefits@uchicago.edu).

### Postpone the Retiree Medical Plan

- Choose to postpone enrollment in the Retiree Medical Plan until a later date, as long as eligibility requirements are met at retirement.
- Complete and submit the election to postpone form to [benefits@uchicago.edu](mailto:benefits@uchicago.edu) within 31 days of your termination date or retirement date (whichever occurs first).

### Terminate Coverage

Retirees cannot re-enroll into the Retiree Medical Plan if coverage is canceled.



# Important Information

## Aetna Medical Pre-Enrollment

Call Aetna at 1-800-307-4830 (TTY: 711)  
Monday through Friday, 8 AM to 9 PM ET.

## Aetna Member Services

- Aetna Medicare Advantage  $\text{æ}$   
Monday- Friday, 8 AM to 9 PM ET.  
1- 888-267-2637
- Aetna Medicare Supplemental Plan  $\text{æ}$   
24 hours a day, 7 days a week  
1-800-238-6716
- SilverScript Customer Care  
Available 24 hours a day, 7 days a week.  
833-958-2658
- CVS Specialty Pharmacy: 800-237-2767



Thank  
you





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Aetna Medicare is an HMO, PPO plan with a Medicare contract. Enrollment in our plans depends on contract renewal. Every year, Medicare evaluates plans based on a 5-star rating system. Out-of-network/non-contracted providers are under no obligation to treat Aetna members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. [Aetna Medicare’s pharmacy network includes limited lower cost, preferred pharmacies in: <applicable areas>. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, <members please call the number on your ID card, non-members please call <1-855-338-7027 (TTY: 711)> or consult the online pharmacy directory at <<http://www.aetnamedicare.com/pharmacyhelp>>.] [For mail-order, you can get prescription drugs shipped to your home through the network mail-order delivery program. Typically, mail-order drugs arrive within <x> days. You can call <phone number/TTY/hours of op> if you do not receive your mail-order drugs within this timeframe. Members may have the option to sign-up for automated mail-order delivery.]] The <formulary, pharmacy network, and> provider network may change at any time. You will receive notice when necessary. Members who get “Extra Help” are not required to fill prescriptions at preferred network pharmacies in order to get Low Income Subsidy (LIS) copays. Participating physicians, hospitals and other health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change. See Evidence of Coverage for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area. This material is for informational purposes only and is not medical advice. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professional. Contact a health care professional with any questions or concerns about specific health care needs. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna is not a provider of health care services and, therefore, cannot guarantee any results or outcomes. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to our website.

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SilverScript Employer PDP is a Prescription Drug Plan. This plan is offered by SilverScript Insurance Company, which has a Medicare contract. Enrollment depends on contract renewal. Other Pharmacies are available in our network. Out-of-network/non-contracted providers are under no obligation to treat Aetna members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. The formulary and pharmacy network may change at any time. You will receive notice when necessary. SilverScript®'s pharmacy network includes limited lower-cost, preferred pharmacies in some rural areas of the country. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, please call 1-866-812-9770 (TTY: 711) or consult the online pharmacy directory at Caremark.com. The typical number of business days after the mail order pharmacy receives an order to receive your shipment is up to 10 days. Enrollees have the option to sign up for automated mail order delivery. Members who get “Extra Help” are not required to fill prescriptions at preferred network pharmacies in order to get Low Income Subsidy (LIS) copays.

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