

**Kimberly Nelson** 

November, 2020





### Aetna policy statement

All Aetna presentation materials are confidential and proprietary and may not be copied, distributed, captured, printed or transmitted (in any form) without the written consent/authorization of Aetna, Inc.





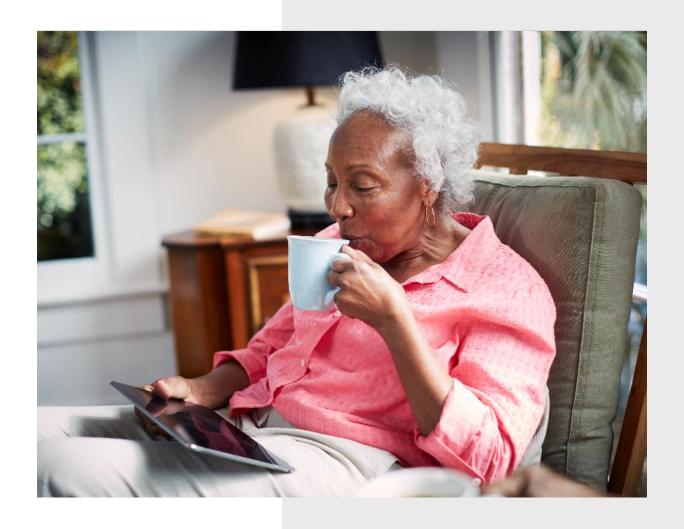
### Our commitment to you

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

Retiree benefit plan options comparison

How the University of Chicago Medicare Advantage retiree plan works

Keeping the doctors you know and trust

Extra support you'll receive with your new plan

How the Aetna Medicare Supplement plan works

What happens next?

Questions and answers





## 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	\$1,750 per individual
Preventive care**	\$0	<b>\$</b> O
Primary care office visit	\$10	10%
Specialty care office visit	\$35	10%
Inpatient hospital	\$250 per stay	10% after \$250 copay
Outpatient surgery	\$50	10%
Emergency room**	\$100 – waived if admitted	10%
Foreign travel	Emergency coverage	Emergency coverage

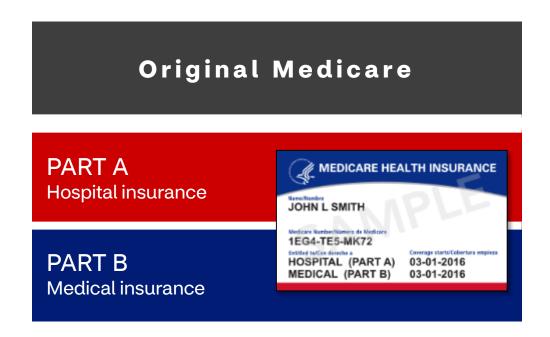
<sup>\*</sup>This is the amount you have to pay out of pocket before the plan will pay except for preventive and emergency care.



<sup>\*\*</sup>Deductible does not apply.



### The A-B-C-Ds of Medicare and supplement plans



#### **Private Plans**

PART C – Medicare Advantage plan Covers Part A and Part B and can offer additional benefits

PART D – Prescription drug plan (PDP) Helps pay for prescription drugs

### Supplement Plan

Covers Part A and Part B cost gaps

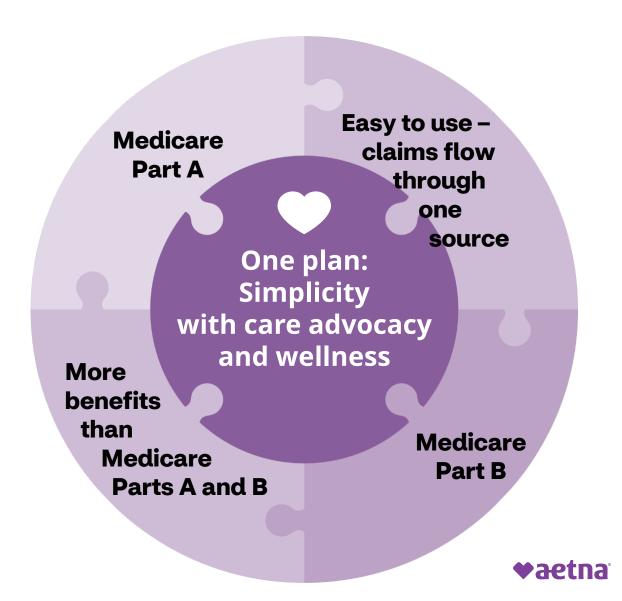
Private plans can be either Group or Individual insurance.



### How the Medicare Advantage plan works

- One step for you
- One medical ID card
- One monthly Explanation of Benefits for medical services

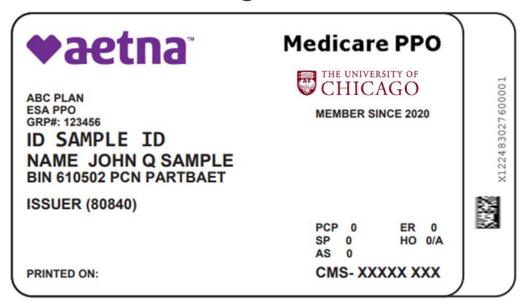
Medicare Advantage plans must cover all Medicare-approved services



### Medicare Advantage is an all-in-one plan

- Easy to use
- One ID card for all medical needs
- 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



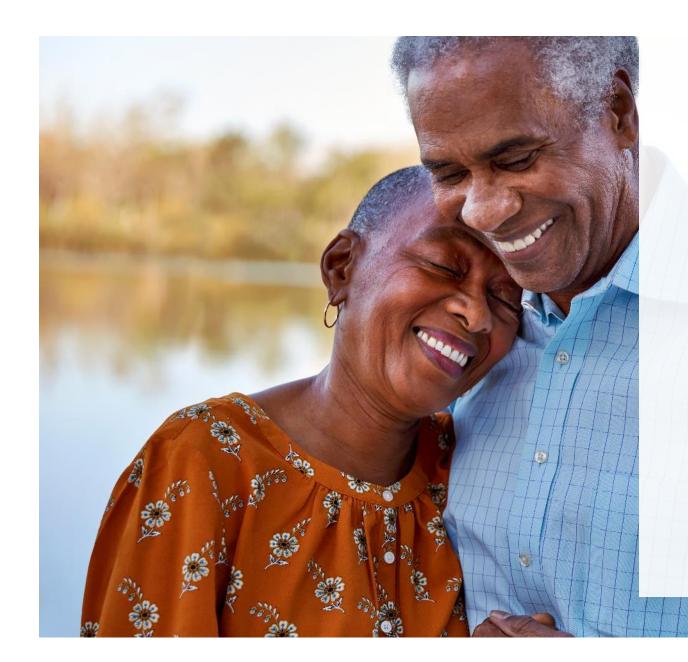


# We've got you covered with freedom of access

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

- Access to providers nationwide
- See any doctor at the same cost share, who is eligible to receive Medicare payment and accepts your plan
- No referrals needed
- Covers you nationally when travelling
- Over 800,000 network doctors and specialists and 3,500 network hospitals





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





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



#### **Prevention**

Eye and hearing exams

Annual physicals

Fall Prevention Program

Women's annual health reminder

Cancer screening reminder



#### Wellness

Healthy Home Visits

24/7 Nurse Line

Hearing aid reimbursements

Teladoc®/Telehealth

SilverSneakers® Fitness Program

Non-emergency Transportation



#### **Support**

Resources For Living®

Chronic health condition support

Readmission Avoidance Program

Aetna Compassionate Care<sup>SM</sup>





# What is a Healthy Home Visit?

# 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





# Fall Prevention Program

# Stay independent by preventing falls in your home

- Helps you understand what increases your risk of falling and how to decrease your risk of falls, including building lower body strength, checking your vision and making your home safe
- Our Healthy Home Visit can include an assessment as well as a demonstration of beneficial exercises.

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





## Resources For Living®

# Support to make life easier and more enjoyable

- A call can connect you to wide range of cost-effective and reliable local resources you may need, such as cleaning services, lawncare and home repair. You only pay the cost of the service itself.
- Life consultants can also help you find social and recreational activities.
- 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.





# 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.



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



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

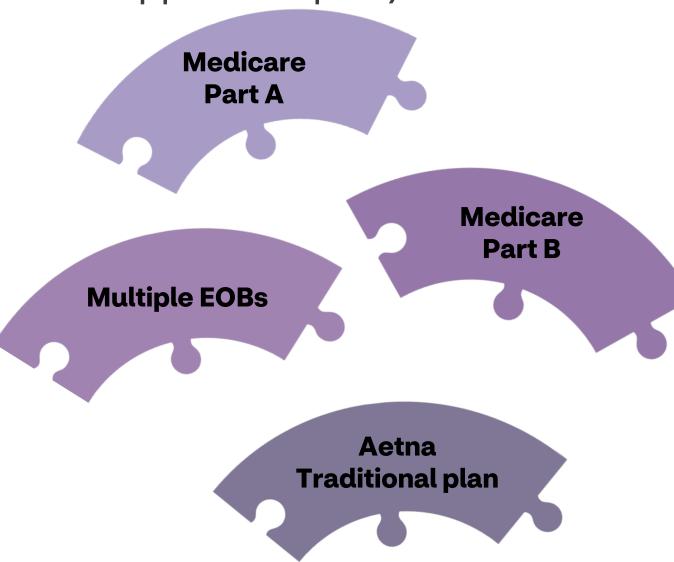
\*2019 Aetna Medicare Advantage group plan member satisfaction survey





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 Explanation of Benefits

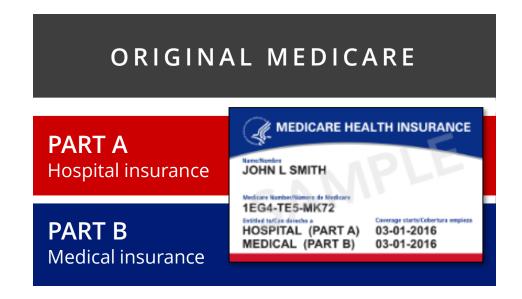


### Aetna Medicare Supplement Plan: Two Medical ID Cards

#### **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



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

Your costs are



You get extra benefits

Automatic claim filing

Discount programs for hearing and fitness 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		Aetna Medicare Advantage Plan		
Specialist Office Visit or X-ray Medicare allows Medicare pays 80%*	\$475 \$285 \$228	Specialist Office Visit or X-ray Medicare allows	\$475 \$285	
UC Medicare Supplement plan pays \$51.30		Medicare Advantage plan pays* \$250		
Member owes 10% coinsurance of \$57 = \$5.70		Member owes copay	<i>\$35</i>	
*Assumes \$300 plan deductible already met which includes the Medicare Part B deductible \$198 in 2020		*Assumes \$150 plan deductible already met		

### Hospital confinement

University of Chicago Medicare Supplement Plan		Aetna Medicare Advantage Plan		
Hospital inpatient Medicare allows Medicare pays*	\$35,000 \$21,000 \$19,592	Hospital inpatient Medicare allows	\$35,000 \$21,000	
UC Medicare Supplement plan pays \$1,042.20**		Medicare Advantage plan pays*		
Member owes \$250 copay + 10% of the remainder of the Part A deductible (\$1,408 for 2020); \$250 + \$115.80 = \$365.80		Member owes copay  *Assumes \$150 plan deductible already me	<b>\$250</b> t	

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

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



### 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 benefitseligible service when employment terminates.

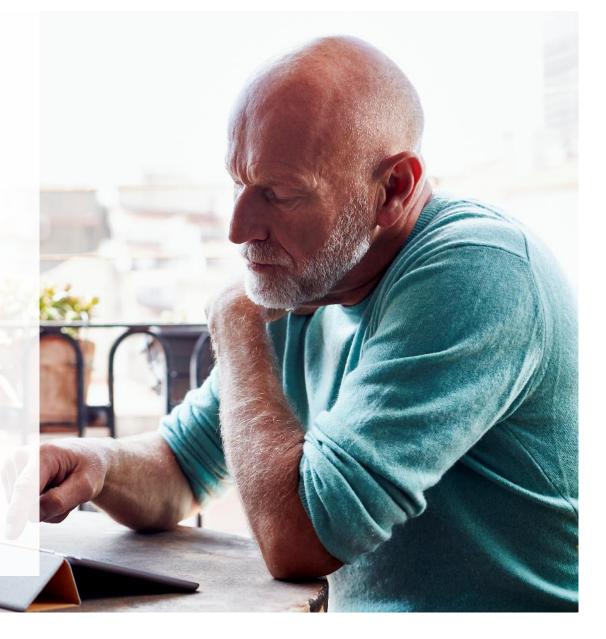
# Planning to retire? What's next?

#### **Schedule a Retirement Meeting**

Contact the Benefits Office via email at <a href="mailto:benefits@uchicago.edu">benefits@uchicago.edu</a> 60 days prior to the 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**

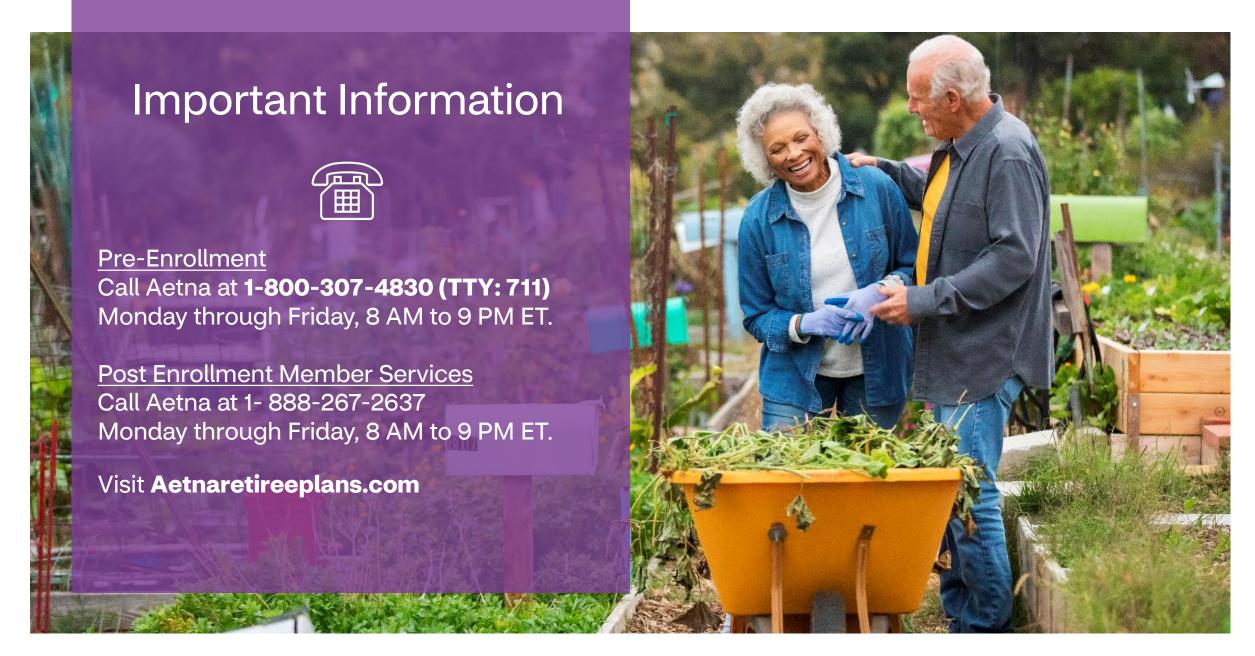
• Complete and submit the Retiree Medical Plan Enrollment Form to benefits@uchicago.edu.

#### 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 <u>benefits@uchicago.edu</u> 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.







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 upto-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 <a href="http://www.aetnamedicare.com/pharmacyhelp">http://www.aetnamedicare.com/pharmacyhelp</a>. I 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.

©2020 Aetna Inc. Y0001\_GRP\_6013\_3033\_2021\_M 58.25.304.1 B (7/20)



# Paetna®