CY2023 Retiree Benefits Bulletin

Civil Service Commission State of Michigan

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CONTACT:	TELEPHONE NUMBER:
ORS Customer Service www.mi.gov/orsmiaccount	800-381-5111 Toll-Free

Benefit Update & Insurance Rates

The Employee Benefits Division is pleased to announce that there will again be no rate increase for the State Health Plan (SHP) PPO, the State Health Plan Medicare Advantage (MA) PPO, or Dental or Vision coverage for retirees for 2023. Retirees enrolled in an HMO should review the rates as the premiums will change, with some rising significantly. Rates can be found beginning on Page 8 of this bulletin or by visiting the Employee Benefits Division website, www.mi.gov/employeebenefits, clicking the Employee Benefits drop-down menu, then selecting Insurance Rates. Premium changes will be reflected in January 2023 pension checks and payment coupons.

This document contains important updates, so please review it carefully. Plan provisions are also unchanged from 2022, except that telehealth visits under the SHP PPO are available free of charge beginning on January 1, 2023 when using the Blue Cross Blue Shield of Michigan's (Blue Cross) online vendor, currently AmWell.¹

HMO enrollment options are changing. Effective January 1, 2023, Priority Health plan will no longer be offered to state retirees, employees, and dependents. Current enrollees MUST select a new plan before November 30, 2022 to avoid a gap in coverage. Also, effective January 1, 2023, McLaren Health Plan will be available to pre-Medicare and Medicare-eligible retirees. Enrollment in this new offering will be effective at the start of the plan year if you make your election and submit any required documentation by November 30, 2022.

Watch your mailbox and email inbox for these and other important updates from insurance third-party administrators. Blue Cross will be mailing the 2023 Annual Notice of Change for MA members. OptumRx will be sending the 2023 formulary, pharmacy directory, and Evidence of Coverage documents electronically for Medicare enrollees. Members may request a hard copy of the documents by contacting the OptumRx customer service number on the back of your ID card.

Basic information about retiree insurance and eligibility is available on the Office of Retirement Services (ORS) website, www.mi.gov/ors, by selecting the State Employees Retirement System drop-down menu. To view Defined Benefit (DB) post-retirement insurance information, select Defined Benefit Plan and then Your Insurance. To view Defined Contribution post-retirement insurance information and rates, select 401(k) Defined Contribution Plan and then Forms and Publications to view the Insurance section.

HMO Rates Will Change

Retirees are encouraged to review their benefit elections every year to avoid surprises with rate changes in January. Some HMO monthly premiums will increase, effective January 1, 2023. It is important to take these changes into account. Visit the insurance comparison page online and see Page 8 for rates.

¹State Police Troopers and Sergeants retiring on or after October 1, 1987 will receive this benefit through their bargaining agreement.

Available Online Resources

Additional retiree resources are available on the Michigan Civil Service Commission (MCSC) Retiree Information webpage. Go to www.mi.gov/employeebenefits, select the Employee Benefits Division dropdown menu, and then select Retiree Information. The following resources can be accessed from the Retiree Information webpage:

- Carrier contact information
- Health, Prescription, Vision, Dental, and Life Insurance plan summaries
- Insurance rates
- Retiree Benefits Bulletins (current and archived)
- HMO ZIP code tool
- Medicare Advantage coverage maps
- Voluntary Benefit links (Benefits for Life and Long-Term Care Insurance)
- ORS information links (Pension, 401(k), newsletters, etc.)
- Michigan State Employee Retiree Association (SERA) website link
- miAccount Login

Important Message for Those Eligible for Medicare

To keep your health and prescription drug coverage, you must enroll in Medicare Part A and Part B when you are eligible. All Medicare-eligible members who timely provide their Medicare enrollment information to ORS will automatically be enrolled in the MA plan associated with their pre-Medicare plan (e.g., SHP PPO, BCN, HAP, PHP, and now, McLaren), unless you contact ORS to opt out. Information on how to opt out of the SHP MA PPO will be included in the pre-enrollment packet you will receive in the mail from Blue Cross. You may opt out of the SHP MA PPO coverage and participate in the SHP PPO Medicare Supplemental plan, provided you remain enrolled in another plan through another employer that pays claims before the SHP PPO and you continue to pay your Medicare Part B premium.

It is important to note that individuals can only be enrolled in one MA plan. If you have coverage in another MA plan, such as through a spouse's employer, you must choose which MA plan you want to keep. **Beginning January 1, 2023,** newly Medicare-eligible spouses of retirees must enroll in the same Medicare plan as the retiree.

Reminder: Schedule Your Annual Preventive Care Appointments

An annual checkup is an important opportunity to talk with your provider and identify potential concerns before they develop into actual problems. Many preventive services are offered at no cost to you, including office visits, cancer screenings, and vaccinations for serious illnesses such as pneumonia, shingles, influenza and of course, COVID-19. **The Michigan Department of Health and Human Services** is encouraging seniors to get seasonal influenza vaccines. You can find more information on their website at www.mi.gov/flu. COVID-19 is still a threat in Michigan and across the country, and it is more important than ever to stay healthy and protect yourself against preventable illnesses. You can find more information on vaccines and locations they can be received at www.vaccinefinder.org.

Currently, eight over-the-counter COVID-19 test kits are covered per month under all health plans in accordance with federal regulations. The test kits are covered under the prescription drug benefit administered by Optum Rx for SHP PPO members. Contact your provider for network information and reimbursement requirements when purchasing from out-of-network pharmacies.

Remember the importance of staying physically active and practicing healthy habits to cope with stress.

²This does not apply to State Police Troopers or Sergeants retiring on or after October 1, 1987.

Health Maintenance Organization (HMO) Changes

McLaren Health Plan will offer pre-Medicare and Medicare Advantage plans to State of Michigan retirees and their dependents beginning January 1, 2023.

Priority Health Plan will no longer offer health insurance benefits to State of Michigan retirees, employees, and their dependents. Priority Health enrollees must select a new health insurance plan offered by the State of Michigan to continue retiree health and prescription drug coverage. Your request must indicate a plan change effective date of January 1, 2023, to avoid an impact to your deductible and out of pocket maximum (OOPM) calculations.

Important timing details for Priority Health Members:

- Failure to elect a new health insurance plan by **November 30, 2022** will result in termination of health and prescription drug benefits with the State of Michigan for you and any dependents you're currently covering effective **December 31, 2022**.
- If you submit a plan change between December 1, 2022, and December 31, 2022, you will have a gap in coverage from January 1, 2023 until your election is effective February 1, 2023.
- If you submit an enrollment request between January 1, 2023, and January 31, 2023, you will lose coverage January 1, 2023, and your new election will be effective March 1, 2023.
- If you submit an enrollment request after January 31, 2023, you will have a gap in coverage, and new coverage might not take effect until six months after ORS receives your request.

For information regarding State of Michigan health insurance plans (plan summaries, insurance rates and HMO coverage areas) visit the Employee Benefits Division website at www.mi.gov/employeebenefits, click the Employee Benefits drop-down menu, and then click Retiree Information from the drop-down menu.

As a State of Michigan retiree, you can make plan changes two ways:

- Option 1: Log into your miAccount at www.michigan.gov/orsmiaccount to enroll in a new plan. Once enrolled, provide ORS confirmation of the new enrollment using one of the following methods:
 - Send a notification through the miAccount message board confirming your new election or
 - Fax your miAccount confirmation page to the ORS at 517-284-4416 or
 - Submit your miAccount confirmation page by mail to Office of Retirement Services, PO Box 30171, Lansing, MI, 48909-7671
- Option 2: Submit an Insurance Enrollment/Change Request (R0452G) to ORS and proofs for newly added dependents you wish to enroll, by fax or mail.

Demographic Information Updates

If you change your address, be sure to update ORS. You must generally have a **physical address** (not a post office box) in the US or one of its territories to be eligible for coverage under Medicare Advantage, Prescription Drug, Supplemental Plans, and state insurance. This includes a change in residential or mailing address, phone number, email address, legal name, and Medicare effective dates.

Your current information on file can be viewed and updated through your miAccount. Keeping your contact information up to date ensures that ORS can keep you informed of changes that may impact your pension, 401(k), or benefits. If ORS is notified that a retiree's name, address, or Medicare information on file is incorrect, communication will be mailed requesting you contact ORS customer service or access their miAccount to make an update.

If you do not provide response by the ORS-designated date, benefits could be terminated.

State Health Plan PPO Members

Social Security Benefits Before Age 65

Blue Cross has partnered with SSDC Services Corp. to assist members who may qualify for Social Security Disability Insurance benefits. If you or a covered dependent are between the ages of 18 and 61, SSDC will assist with filing and obtaining these benefits at no cost to you. If you receive correspondence from SSDC, please review it carefully and call SSDC at 800-374-9950 x222 if you have any questions or believe they can be of help. If they send you a questionnaire, please complete and return it. Visit their website at www.ssdcservices.com for more information.

Blue Cross Medicare Advantage Rewards

If you're a SHP MA PPO enrollee, you're eligible for a program that rewards you when you take healthy steps such as getting an annual wellness visit or flu vaccine. You can earn gift cards for local grocery stores, superstores, and gas stations. There is no cost; all you have to do is create an online account, complete a qualifying activity, and enter the details into the account.

- Examples of rewards include \$25 for an annual wellness visit; \$15 for a flu vaccine; and \$10 for monitoring your physical health.
- Members looking to participate, or those requiring assistance enrolling or logging in, can visit www.bcbsm.com/advantagerewards or call 1-866-572-0155 (TTY: 711). A list of healthy actions you can take to earn rewards is available once you enroll, and after you enter details of your activity, you can choose reward options.
- Members do not need to see a provider separately for each MA Reward; multiple health topics can be covered when seeing an appropriate provider.
- Participating in prior years does not disqualify members from participating each year.

Program for Those Living with Diabetes

The Livongo diabetes management program is offered at no cost to SHP PPO and SHP MA PPO members with diabetes. With this program, eligible members receive a connected meter that automatically uploads blood glucose readings to your secure online account and provides real-time personalized tips.

Optional family alerts can notify loved ones of dangerous glucose readings. The program also includes support from coaches when you need it. You can communicate with a coach any time about diabetes questions on nutrition or lifestyle changes. Livongo is not available to Medicare Supplemental plan members.

24-Hour Nurse Line

SHP PPO plan members can speak with a registered nurse over the phone, day or night, and get medical advice.

- When you or a loved one isn't feeling well and you're not sure if the condition may be serious, you have someone to call. Their nurses can assess your situation and help you decide if you should head to the doctor, pick up over-the-counter medicine, or simply get some rest.
- Blue Cross Members: 1-800-775-2583
- TTY users call: 711

Communication from Carriers

Blue Cross, Optum Rx, and state-offered HMOs all have programs to help maintain and improve member health. Representatives from these companies may contact you by phone, email, or regular mail to offer free or low-cost health screenings or to see if you are interested in help with managing chronic conditions or for medication management, for example. If you have questions about whether a contact is legitimate, call the number on the back of your member ID card for verification.

Enrollments and Making Changes

Retirees are not restricted to an annual benefit open enrollment period. You can make a change to your state-sponsored retiree health, prescription drug, dental, or vision insurance plans at any time. As a reminder, if you want to make a plan change to be **effective January 1st** of the upcoming year, you must initiate contact with ORS **no later than November 30th** of the current year.

Before making any change in your current state-sponsored retiree health, prescription drug, dental, or vision insurance plans, we recommend that you review the benefit coverage of all carriers that you are eligible to enroll in. This will ensure that you are making the best coverage decision for your healthcare needs.

If you are currently enrolled but want to make changes to your state-sponsored retiree health, prescription drug, dental, or vision insurance plans, go to www.mi.gov/orsmiaccount to log in to your miAccount, or use the Insurance Enrollment/Change Request form available on the ORS website at www.mi.gov/ors. Simply select your retirement system, go to the Forms and Publications page, and print the form.

Send the completed form and required proofs³ to ORS by fax at 517-284-4416 or by mail at:

Office of Retirement Services P.O. Box 30171 Lansing, MI 48909

If you are considering changing to an HMO plan, please remember that HMO plan availability is based on location. Visit the Employee Benefits Division website at www.mi.gov/employeebenefits, click the Employee Benefits drop-down menu, select Retiree Information from the drop-down menu, and then click HMO Zip Code Tool and Medicare Advantage Coverage Maps.

Enrollment Waiting Period

The effective date for plan changes can vary depending on the change being made.

New Enrollments. Changes to enrollments or new enrollments that occur later than the month you terminate employment normally take effect the first day of the sixth month after ORS receives your enrollment form and all required proofs.³

Loss of Coverage. Coverage can begin sooner when you or a dependent has an involuntary loss of other group coverage or a change in your family status (e.g., marriage, death, divorce). Be sure to send ORS your completed insurance enrollment online at www.mi.gov/orsmiaccount or an Insurance Enrollment/Change Request form, along with proof of your loss of coverage within 30 days of the event. If anyone being added has Medicare, coverage will take effect the first day of the second month after ORS receives your request and all required proofs. Otherwise, coverage will take effect the first day of the month after ORS receives your request and all required proofs.

Plan Change. To change your insurance plan, log in to www.mi.gov/orsmiaccount and click on Insurance Coverage or complete the Insurance Enrollment/Change Request form and return it to ORS along with all required proofs. If you are currently enrolled in any health insurance plan with the retirement system, you can change your enrollment to another plan regardless of your Medicare status. Your change in coverage will be effective the first day of the second month after your request and required proofs are received. For example, if ORS receives your change request and any required proofs on January 10, your coverage with the new plan will begin on March 1.

³Explanation of proofs can be found on Page 3 of the *Insurance Enrollment/Change Request* form.

Medicare Eligibility and Enrollment

Medicare eligibility impacts your State of Michigan coverage whether or not you are enrolled. As a retiree, once you, your spouse, or your dependent becomes Medicare eligible (generally at age 65), your State retiree healthcare coverage becomes your secondary insurance. You must enroll in Medicare Part A (hospital) and Part B (medical) upon becoming eligible. Your enrollment in Part D (prescription) will be automatic. Be sure to provide your Medicare Beneficiary Identifier (MBI) to ORS as soon as possible to help ensure coordination of benefits. Refer to the ORS website for details on the different ways to provide your Medicare number to ORS.

If you began receiving Social Security benefits before you become Medicare eligible, you may automatically be enrolled in Medicare Part A and Part B. If you are not receiving Social Security benefits before you become Medicare eligible, you must take action to enroll. You can enroll or confirm enrollment in Medicare Part A and Part B in the following ways:

- Online at www.socialsecurity.gov
- Call Social Security at 1-800-772-1213 (TTY users 1-800-325-0778), Monday-Friday, 7:00 a.m.-7:00 p.m.
- In person at your local Social Security office

Enrolling and Making Changes If Medicare Eligible at Age 65. If you are *already enrolled* in state-sponsored retiree health and prescription drug insurance and you, your spouse, or your dependent becomes eligible for Medicare at age 65:

- Be sure to enroll in both Medicare Parts A and B three months before turning 65. You will be contacted if your insurance carrier needs additional information.
- Tell ORS your Medicare Beneficiary Identifier (MBI) and Part A and B effective date. Doing this more than one month before the month you turn 65 will ensure no gap in coverage as you change to a Medicare compatible plan. Refer to the ORS website for details on the different ways you can get this information to ORS.

If you are *enrolling* in state-sponsored retiree health and prescription drug insurance and you, your spouse, or your dependent is also eligible for Medicare at the time of enrollment:

- Be sure to enroll in both Medicare Parts A and B three months before enrolling in retiree insurance and tell ORS your MBI and Part A and B effective date.
- Submit your completed online insurance enrollment at www.mi.gov/orsmiaccount (or submit an *Insurance Enrollment/Change Request* form by mail or fax to ORS). Coverage will begin the first day of the second month after ORS receives your request and all required proofs.³

Note: Plan changes for Medicare-eligible enrollees are always effective the first day of the second month after a request and all required proofs have been received.

Enrolling and Making Changes If Medicare Eligible Before Age 65. If you are *already enrolled* in state-sponsored retiree health and prescription-drug insurance and you, your spouse, or your dependent becomes eligible for Medicare before age 65:

- Be sure to enroll in both Medicare Parts A and B.
- Tell ORS your MBI and Part A and B effective date. Doing this will change your coverage to a Medicare-compatible plan that will take effect on the first day of the second month after ORS receives your Medicare information. Refer to the ORS website for details on the different ways you can get this information to ORS.

²This does not apply to State Police Troopers or Sergeants retiring on or after October 1, 1987.

³Explanation of proofs can be found on Page 3 of the *Insurance Enrollment/Change Request* form.

State Health Plan PPO

STATE HEALTH PLAN PPO and MEDICARE ADVANTAGE

Blue Cross Blue Shield of Michigan

800-843-4876

www.bcbsm.com/som

PRESCRIPTION DRUG PROGRAM

OptumRx

Non-Medicare Retirees: 866-633-6433

Medicare-Eligible Retirees: 866-635-5941

www.optumrx.com/som

BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDER

Blue Cross Blue Shield of Michigan

Claim & Benefit Inquiries: 800-843-4876

Referrals & Clinical Assistance:

Non-Medicare & Medicare Supplemental Retirees (New Directions): 866-503-3158

Medicare Advantage Retirees: 888-803-4960

www.bcbsm.com/som

HMOs, State Vision Plan, and State Dental Plan

BLUE CARE NETWORK (BCN) 800-662-6667 www.bcbsm.com/som	HEALTH ALLIANCE PLAN (HAP) 800-422-4641 www.hap.org
MCLAREN HEALTH PLAN (MHP) Non-Medicare Retirees: 888-327-0671 Medicare Retirees: 833-358-2404 www.mclarenhealthplan.org	PHYSICIANS HEALTH PLAN (PHP) 517-364-8500 or 800-832-9186 www.phpmichigan.com
STATE VISION PLAN EyeMed 833-279-4355 www.eyemedvisioncare.com/som	STATE DENTAL PLAN Delta Dental Plan of Michigan 800-524-0150 www.deltadentalmi.com/som

For State Employees in the Defined Contribution (DC) Plan

As a state employee in the Defined Contribution (DC) plan, you may be eligible for state-sponsored health, prescription drug, dental, and vision insurances upon terminating employment if you have vested with the equivalent of 10 years full-time state service and have met eligibility age requirements.

Your insurance benefit is either the Premium Subsidy or Personal Healthcare Fund, depending upon when you first hired, elected, transferred, or defaulted into that benefit option.

Eligible participants in both the Premium Subsidy and Personal Healthcare Fund can enroll in any state-sponsored insurance plan. However, the premium rates will vary depending on your healthcare benefit.

2023 retiree insurance rates can be found on the Employee Benefits Division's web site at:

www.mi.gov/mdcs/employeebenefits/rates