Post-65 Retiree Benefits

Calendar Year 2025

Office of Human Resources Benefits Department Nov. 7, 2024





Agenda

- Vendors in Attendance
- Benefits Overview
 - What to expect in 2025
 - Allowable plan changes and choosing a new plan
 - Old plan
- Vendor Presentations
 - Medicare/Healthcare updates UPMC/Highmark
 - Dental updates United Concordia
 - BMS presentation-retiree member portal and DDB portal websites
- Next Steps: Open Enrollment
 - o General reminders and contact information
 - Resources
- Q&A with Vendors
- Short Survey



Vendors in Attendance

- Benefit Management Services (BMS): Terri Thompson
- Davis Vision by MetLife: Bill Thomas
- Highmark: Tyler Quinn
- United Concordia: Megan Roesing
- University of Pittsburgh Benefits Department: Tammy Weaver, Kim Phillips and Brittany Turley-Frund
- **UPMC**: Patsy Maxim



What to Expect in 2025 | Benefits Overview

Defined Dollar Benefit (DDB) credits:

Remain the same (\$401 per month).

Medical Plans:

- Slight increase in premiums.
- Plan designs and copays remain mostly the same.

Prescription Drug Plan and Copayments:

- · Remain the same.
- Medicare change to Out-of-Pocket maximums for covered medication.



What to Expect in 2025 | Benefits Overview

Dental plan:

- Small increase in premium with an enhancement to the dental network.
- From \$21.07/month to \$21.70/month

Vision plan:

- No increase in premium cost or plan design.
- Rate will remain at \$7.98/month (through 2026).
- · Same plan design.



Medical Plan Premiums in 2025

Benefits Overview

University Sponsored Total Premium	DDB Plan			"Old Plan"		
Retiree Medical Plan	for Each Person Covered	University-Provided DDB Credit	Retiree Responsibility	Unused Balance/Accrual	University Contribution	Retiree Responsibility
UPMC for Life HMO	\$301.00	\$401.00	\$0.00	\$160.00	\$301.00	\$0.00
UPMC <i>for Life</i> PPO - Standard	\$309.00	\$401.00	\$0.00	\$104.00	\$309.00	\$0.00
UPMC for Life PPO - Basic	\$266.00	\$401.00	\$0.00	\$147.00	\$266.00	\$0.00
UPMC Health Plan National Complementary Plan	\$400.00	\$401.00	\$0.00	\$36.00	\$260.00	\$140.00
Highmark Freedom Blue PPO - Standard	\$301.00	\$401.00	\$0.00	\$112.00	\$301.00	\$0.00
Highmark Signature 65	\$423.36	\$401.00	\$22.36	\$ 0.00	\$275.18	\$148.18



For Retirees in the "Old Plan" Benefits Overview

"Old Plan:" Retirees who retired prior to the DDB program (July 1, 2004).

- Retirees continue to have responsibility for a cost-share for the UPMC National Complementary plan and the Highmark Signature 65 plan.
- There would be a cost-savings if the retiree switches into the DDB Plan during open enrollment.
- There is no difference in these plans when you switch.
- To switch from the "Old Plan" to the DDB plan, select "DDB program" on your OE election form or contact BMS for assistance at 1-888-499-6885.



When Can I Make Changes to My Plan? Benefits Overview

- Open Enrollment for Post-65 Retirees: Nov. 4 through Dec. 4, 2024
- You can make changes to your benefits during the plan year if you experience a life event (Qualified Status Change), such as:
 - · Addition of a spouse/domestic partner due to a loss of employer coverage
 - · Removing a spouse/domestic partner due to divorce or death
 - Change in permanent residency
- Note: Enrollment changes need to be made within 60 days of the Qualified Status Change; contact Benefit Management Services (BMS) at 1-888-499-6885 to make changes to your benefits elections



Which Plan Should I Choose?

Benefits Overview

- The plan selected should be based on your personal circumstances.
- If you live outside of Western PA, an HMO may not be the best option.
- If you have more than one primary residence, you may want to consider a PPO or Medicare Supplement plan (Signature 65 or National Complementary Plan).
- You are encouraged to check the differences between the Advantage plans vs. Supplementary plans and their available networks of doctors and facilities before deciding.
- Review all the plans, summary grids, and a plan comparison guide on the retiree website (hr.pitt.edu/retirees).



Medical Plans Comparison | Benefits Overview

Post-65 Medical Plans Comparative Summary of Key Provisions

	UPMC FOR LIFE (HMO)	UPMC FOR LIFE	- STANDARD (PPO)	UPMC FOR LIFE - BASIC (PPO)		
	IN-NETWORK	IN-NETWORK	OUT-of-NETWORK	IN-NETWORK	OUT-of-NETWORK	
Deductible	\$0	\$0	\$500	\$250	\$500	
Out-of-Pocket Max	\$3,400	\$3,400	\$5,100	\$1,000	\$3,400	
Preventive Services, Inpatient Care, C	Outpatient Care, and Suppl	ement Benefits				
Immunizations	•	\$0				
Annual Wellness Visit	\$0			\$0		
Inpatient Hospital/Mental Health Care	\$50 copay per stay	\$250 copay per stay				
Skilled Nursing Facility Days 1-100; 100 day limit	\$0	\$0 copay (days 1-20) \$25 copay (days 21-100)		10% coinsur	ance per stay	
Home Health Care	\$0	\$0		\$0		
Primary Care Physician Visits and Telehealth	\$15	\$20		\$	20	
Specialists Visits	\$20	\$20		\$	20	

Please see https://www.hr.pitt.edu/post-65-retirees-medical-comparison for a complete comparison chart.



Medical Plans Comparison | Benefits Overview

Post-65 Medical Plans Comparative Summary of Key Provisions

	HIGHMARK FREEDOM BLUE - STANDARD (PPO)			UPMC NATIONAL COMPLEMENTARY PLAN (Supplement Plan)		HIGHMARK SIGNATURE 65 WITH BLUE RX (Supplement Plan)	
	IN-NETWORK	OUT-of-NETWORK	IN-NETWORK	OUT-of-NETWORK	IN-NETWORK	OUT-OF-NETWORK	
Deductible	\$	50	n	/a		·	
Out-of-Pocket Max		rk: \$3,400 ed: \$3,400	n	n/a		Current Medicare Part B Deductible	
Preventive Services, Inpatient Care,	Outpatient Care, and Sup	plement Benefits					
Immunizations	\$	80	You pay \$100 inpatient deductible on your first hospital stay per year. UPMC pays 100% of medically necessary costs after the primary carrier has paid and the \$100 deductible has been met.		\$0 after Medicare Part B Deductible		
Annual Wellness Visit	\$	15					
Inpatient Hospital/Mental Health Care	\$	50					
Skilled Nursing Facility Days 1-100; 100 day limit	\$25 (da)	ys 16-55)	For days 1-100, UPMC pays for 100% of medically necessary costs after the primary carrier has paid. You pay all costs for days 101 and after that, per the benefit period.		\$0 days 1-150		
Home Health Care	9	50		·			
Primary Care Physician Visits and Telehealth	\$	15	UPMC pays 100% of medically necessary costs after the primary carrier has paid.		\$0 after Medicar	e Part B Deductible	
Specialists Visits	\$	20					

Please see https://www.hr.pitt.edu/post-65-retirees-medical-comparison for a complete comparison chart.





Get the health care you need, your way



MyUPMC

Schedule appointments, chat with your doctor, and track your health tests all through an easy-to-use app!¹



UPMC AnywhereCare

24/7 access to virtual urgent care for common medical conditions right from your smartphone, tablet, or computer.²



UPMC *My*Health 24/7 Nurse Line

Registered nurses give you support and advice on a wide range of health issues.³



Travel assistance

24/7 worldwide emergency assistance when you travel 100+ miles from home or to another country.



Travel Concierge

HMO members pay the same cost sharing for covered routine medical services while visiting Arizona, Florida, Georgia, North Carolina, South Carolina, and Tennessee (at a Medicare-participating provider).⁴





Your plan for better health and wellness



SilverSneakers®

Unlimited FREE gym memberships and one FREE personal training session per year.



Tools for caregivers

The Powerful Tools for Caregivers program can help you, your family, and friends learn ways to reduce feelings of loss, loneliness, or stress.



UPMC Resources for Life

Get connected to help with legal concerns and financial services.



Personal counseling

Six sessions per concern per year with a trained and licensed counselor through UPMC Resources for Life.



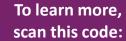
Personal care managers

We can help you understand your doctor's instructions, outline your next steps after a diagnosis, and coordinate your future care.



RxWell®

Get a personal plan to help with anxiety, stress, depression, weight loss, healthy eating, physical activity, and quitting using tobacco.







Who we are

We are proud to call Pennsylvania home. From our local doctors and hospitals, you know and trust, to our Health Care Concierge team, it's all right here.



Plan benefits review

UPMC for Life HMO Custom plan

See below for a summary of the benefits you get with the UPMC *for Life* University of Pittsburgh plan. For a detailed list of benefits, see the Summary of Benefits or Evidence of Coverage.

Plan Highlights	2025
Plan Premium	\$253
Plan deductible	\$0
Maximum Out-of-Pocket	\$3,400
Doctor visits	PCP - \$15 copay / Specialist - \$20 copay
Preventative care	\$0 copay
Annual Wellness visit	\$0 copay
Emergency Care	\$75 copay
Urgent Care	\$20 copay
Vision exam	\$20 copay
Dental exam	\$20 copay
Hearing Aids	\$690-\$1,890 copay every year plus \$1,000 allowance every 3 years
Outpatient surgery	\$50 copay
X-rays (Basic imaging)	\$0 copay

UPMC for Life PPO Custom Basic plan

See below for a summary of the benefits you get with the UPMC *for Life* University of Pittsburgh plan. For a detailed list of benefits, see the Summary of Benefits or Evidence of Coverage.

Plan Highlights	2025
Plan Premium	\$266
Plan deductible	\$250 IN/\$500 OON
Maximum Out-of-Pocket	\$1,000 IN/\$3,400 OON
Doctor visits	PCP - \$20 copay / Specialist - \$20 copay IN / 20% coinsurance OON
Preventative care	\$0 copay
Annual Wellness visit	\$0 copay
Emergency Care	\$75 copay IN/OON
Urgent Care	\$20 copay IN/OON
Vision exam	\$0 copay IN/20% coinsurance OON
Dental exam	\$20 copay IN/50% coinsurance OON
Hearing Aids \$690-\$1,890 copay every year plus \$500 allowance IN/OON every 3 years	
Outpatient surgery 10% coinsurance IN/20% coinsurance OON	
X-rays (Basic imaging)	\$0 copay IN/20% coinsurance OON

UPMC for Life PPO Custom Standard plan

See below for a summary of the benefits you get with the UPMC *for Life* University of Pittsburgh plan. For a detailed list of benefits, see the Summary of Benefits or Evidence of Coverage.

Plan Highlights	2025		
Plan Premium	\$309		
Plan deductible	\$0 IN/\$500 OON		
Maximum Out-of-Pocket	\$3,400 IN/ \$5,100 OON		
Doctor visits	PCP - \$20 copay / Specialist - \$20 copay IN / 20% coinsurance OON		
Preventative care	\$0 copay		
Annual Wellness visit	\$0 copay		
Emergency Care \$75 copay IN/OON			
Urgent Care	\$20 copay IN/OON		
Vision exam \$20 copay IN/20% coinsurance OON			
Dental exam	\$20 copay IN/50% coinsurance OON		
Hearing Aids \$690-\$1,890 copay every year plus \$500 allowance every 3 years			
Outpatient surgery \$100 copay IN/20% coinsurance OON			
X-rays (Basic imaging)	\$0 copay IN/20% coinsurance OON		



UPMC for Life prescription coverage

UPMC for Life plans with Part D prescription drug coverage have a formulary (list of covered drugs). Each formulary has five levels of drug benefits. These levels are referred to as drug tiers. The tiers range from Tier 1, with the least expensive generic and brand drugs, to Tier 5 with more expensive specialty drugs. Each tier determines the copay or coinsurance you pay.

Drug Tier	Description
1	Preferred generic
2	Generic
3	Preferred brand
4	Non-preferred
5	Specialty

Make sure your medications are covered and that you understand your cost sharing before you choose a plan. You can see our drug list online at upmchp.us/prescription-coverage or scan this code. Select 2025 Employer Group (HMO PPO) in the dropdown menu.





Initial coverage

Your plan does not have a deductible for prescription drugs. You pay a copay or coinsurance when you fill prescriptions based on the tier of your drug. You can look at your plan's formulary to find the tier your medications are on. You pay copays and coinsurance until your total yearly drug costs reach \$2,000.

	30-Day Supply		100-Day Supply			
	Retail		Retail		Mail Order	
Tier	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy
Tier 1 Preferred Generic	\$0	\$15	\$0	\$30	\$0	\$30
Tier 2 Generic	\$10	\$20	\$20	\$40	\$20	\$40
Tier 3 Preferred Brand	\$47	\$47	\$129.50	\$141	\$117.50	\$141
Tier 4 Non-Preferred (coinsurance)	\$100	\$100	\$200	\$200	\$300	\$300
Tier 5 Specialty (coinsurance)	33%	33%	n/a	n/a	n/a	n/a
Covered Insulins	\$35	\$35	\$96.25	\$105	\$87.50	\$105



Catastrophic coverage

There will no longer be a coverage gap (donut hole) in 2025. Your total yearly drug costs will be capped at \$2,000.

Once your total yearly out-of-pocket drug costs reach \$2,000, you will not pay anything for your drugs. You will stay in this stage through the end of the year.





Medicare Coverage Requests, Appeals, and Grievances

Terms to know

Coverage request

Asking us to cover a health care service or medication that is not already covered by your plan. We will review your request and give you our coverage determination. If you disagree with our determination, you can file an appeal.

Appeal

If we make a coverage determination and you are not satisfied with this determination, you can appeal the decision. An appeal is a formal way of asking us to review and change a coverage determination we have made. There are different deadlines depending on what you're appealing. See your Evidence of Coverage (EOC) for details.

Grievance

A grievance, or complaint, is a formal way of making us aware that you're unhappy with something involving your health care coverage or experience with UPMC for Life.

Contact us if you'd like to file an appeal or grievance about your medical care or Part D prescription drugs:

Call your Health Care Concierge team toll-free at **1-877-539-3080 (TTY: 711)** from Oct. 1 - March 31, seven days a week from 8 a.m. to 8 p.m. From April 1 through Sept. 30, Monday - Friday from 8 a.m. to 8 p.m. and Saturday from 9 a.m. to 3 p.m. **Fax to:** 412-454-7920

You can also submit a grievance about UPMC *for Life* directly to Medicare. To submit an online complaint to Medicare, go to medicare.gov/MedicareComplaintForm/home.aspx. Or call 1-800-MEDICARE (1-800-633-4227) 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.





University of Pittsburgh 2025 Highmark Freedom Blue PPO & Blue Rx Prescription Drug Plan

Tyler Quinn – Client Manager

Jeanie Carson – Sr. Account Support Analyst



Medicare Part D: \$2k TROOP

- True Out-of-Pocket (TrOOP)
- In 2025, as a result of the Inflation Reduction Act, Medicare Part D will place a \$2,000 cap on Medicare covered prescription drug costs.
- This \$2,000 accumulation towards the cap will be calculated based on Medicare's standard Part D benefit design, which in many cases will be greater than the member's copay.
- What does this mean to the member?
 - Members continue to pay their normal copays at their pharmacy
 - Some members may reach this \$2K threshold without paying \$2K out of their own pocket. This depends on the total cost of their covered drugs. Members are encouraged to review their monthly Part D statements from Express Scripts to monitor their progress towards the threshold.



Examples of Accumulation Towards the \$2K TROOP

Example A Accumulation/Calculation Of the \$2,000 Member out of pocket costs	
CMS Drug Cost	\$1,000
CMS Defined Standard Benefit Copay	\$250
Member Actual Copay	\$30
Out of Pocket Accumulation	\$250

Example B Accumulation/Calculation Of the \$2,000 Member out of pocket costs	
CMS Drug Cost	\$5,000
CMS Defined Standard Benefit Copay	\$1,250
Member Actual Copay	\$30
Out of Pocket Accumulation	\$1,250



New Fitness Vendor for 2025: FitOn

- Freedom Blue plans will begin utilizing FitOn as the plan's fitness vendor effective 1/1/25
- Members currently utilizing SilverSneakers will be migrated to the new vendor automatically
- Members can use non-participating gyms with FitOn, allowing for more flexibility to use to gym of choice
- FitOn also provides a library of digital/virtual content



FitOn gives you a monthly credit allowance to use for **gym memberships** and **in-person fitness classes**. You also get access to a **digital library** of content, including:



Wellness classes to help you build healthy habits.



Meal planning resources with 500+ exclusive recipes.



Educational courses for managing chronic conditions.



Mindfulness exercises to lower stress and feel better.

What makes FitOn great?

More choices. You can visit large national gyms, small local gyms, and private studios. So no matter where you are or how you exercise, you always have options. And even if your gym isn't in the FitOn network, you can still keep using it thanks to the flexible credit system.

How do FitOn credits work?

You get 32 credits in your FitOn account each month to pay for gym memberships and in-person fitness classes. Credits are replenished on the first day of the month and don't roll over. FitOn's digital content does not cost any credits.

When can I sign up?

Once your Medicare Advantage plan is effective, you can create an account at **fitonhealth.com/register** or call the FitOn team to get started at 1-855-946-4036, Monday – Friday, 8 a.m. – 9 p.m.

Visit **highmark.com/fitness** or scan the QR code to learn more.







University of Pittsburgh Retiree Webinar

November 7, 2024



2025 RETIREE DENTAL PLAN

Benefit Highlights

- > Expanded Network Elite Prime
- > Class I Services Excluded from \$750 Annual Program Maximum
- ➤ Class II Periodontal Maintenance Cleanings - 70% coinsurance
- Class III Non-surgical
 Periodontics 40% coinsurance

Periodontal Services treat gum disease

- LOW monthly premium
- NO waiting periods

Discou save! On-Covered



Dental Benefits Summary for University of Pittsburgh Retirees

Effective Date: January 1, 2025 - December 3	1, 2025 Network: Elite Prime New 1-1-202		
Benefit Category ¹	In-Network	Non-Network	
Class I – Diagnostic/Preventive Services			
Routine Preventive Exams & Cleanings			
Bitewing X-rays	100%2	100%2	
Sealants & Fluoride Treatments	100%-	100%-	
Class II – Basic Services			
Periodontal Maintenance Cleanings			
All Other X-rays			
Basic Restorative (Fillings)			
Simple Extractions	70%2	70%2	
Space Maintainers	7		
Repairs of Crowns, Inlays, Onlays, Bridges, and Dentures	7		
Palliative (Emergency) Treatment	T		
Class III - Major Services			
Non-surgical Periodontics	40%²	40%²	
Endodontics			
Surgical Periodontics	1		
Complex Oral Surgery	Member pays reduced	Not Covered	
General Anesthesia	discounted fee ³	Not Covered	
Inlays, Onlays, Crowns	Save! ①		
Prosthetics (Bridges, Dentures)			
Orthodontics (Adults and Dependents)			
Diagnostic, Active, Retention Treatment	Member pays reduced swel discounted fee ³	Not Covered	
Included Plan Features			
The College Tuition Benefit® – College Savings Program ⁴	Earn Tuition Rewards® points redeemable for tuition discounts Receive 2,000 at signup, then 2,000 points/year Each child enrolled receives a one-time bonus of 500 Tuition Repoints One Tuition Rewards point = \$1 reduction in full tuition Use Tuition Rewards points at participating private colleges and universities		
Maximums & Deductibles (cumulative of network and non-r	network)		
Annual Program Deductible (per person/per family and January - December)	\$25/\$75 Applies to Class I & Class II Services		
Annual Program Maximum	\$750		
(per person and January-December)	*Class I Services DO NOT Apply Applies to Class I & Class II Services		
Reimbursement	Maximum Allowable Charge	Maximum Allowable Char	

Representative listing of covered services - certificate of coverage provides a detailed description of benefits.

DISCOUNTS FOR NON-COVERED SERVICES



You can save money. United Concordia PPO members have access to networks that offer discounts for all services—covered or not.¹



This means you can:

- Receive non-covered services at a discount²
- Save on services above your annual maximum

How? Just visit a network dentist who has agreed to accept our allowances for all services—most of our network dentists have already done so!

To search for a dentist, use the **Find a Dentist** tool on **UnitedConcordia.com**. Just select your network and search preferences, and then look for dentists marked by the green **\$ave!** box. **\$ave!**

Don't know your network? Sign in to *MyDentalBenefits* for network information, claim status, procedure history, printable ID cards and more.

Discount arrangements are available where allowed by law, and do not apply to the Concordia Plus (DHMO) network

Non-covered services are services in which no benefit payments, including alternate benefit payments, are made by United Concordia, and may vary by plan design. Discount levels may vary by procedure and geographic area.

CONTACT US





MyDentalBenefits

<u>UnitedConcordia.com/GetMDB</u>

Find a Dentist Tool – Elite Prime Network

<u>UnitedConcordia.com/FindADentist</u>



Get your digital ID cards



Check on your plan details



Search for a dentist nearby



Track your claims



Find reliable information about oral health conditions and care



Telephone:

Toll-free Customer Service number: **1-877-**

215-3616

Monday - Friday, EST 8:00am - 6:00pm



Chat live with customer service

Connect directly to a real person. Chat live while using your *MyDental Benefits* account.

•••

COBRApoint Member Portal

PITT Retirees can use the member portal to:

*Submit Elections online

*View personalized election and billing information

Navigate to https://cobra-retiree.upmc.com/



If you have registered in the past

*Username is usually your email address

*If you have forgotten the email used to register you will need to contact member services

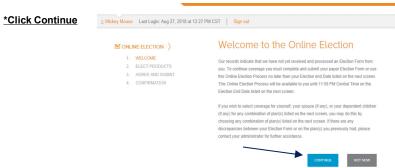


If you are a first-time user
*instructions to register are
included with your OE package

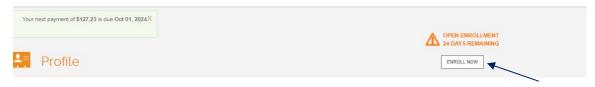
COBRApoint Member Portal

*Submitting your Elections

*If you have not submitted elections yet you will see the following screen



*If you elected for this enrollment period and are changing your elections you can click the Enroll Now selection on the top right of your screen



COBRApoint Member Portal

*Submitting your Elections cont..

- Elect your plans on Screen 2
- Agree and Submit on Screen 3
- You will be taken to a confirmation page
- BMS will receive notification of your elections.



COBRApoint Member Portal

Member Portal Overview

M PROFILE Profile Link

\$ PAYMENT INFO

 $Personal\ Info-the\ member\ will\ see\ their\ demographic\ information,$

Product Selections – The member will see their Plan Selections

Registration Info-Email Address and Username

% PREFERENCES Payment Info link

Payment Schedule

□ COMMUNICATION ACTIVITY Payment Summary

Payment History

■ MESSAGES Preferences link

Login-Shows your username, email, and password

Communication Activity

You can view/ print all of communications that BMS has sent to you including your OE form

Messages Link

helpful announcements and links

BMS Email address

Online Payment Link

Link to APPA form

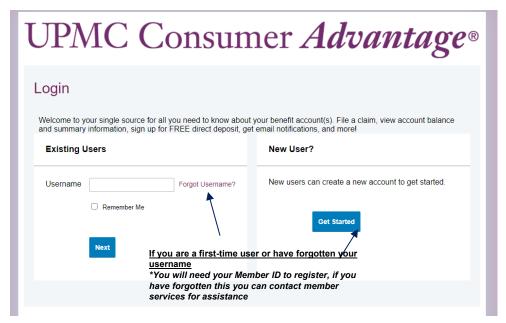
Election Link

View your current elections

Defined Dollar Benefit (DDB) Member Portal

Retirees have the ability to view their DDB account balance

Navigate to: https://upmbp.lh1ondemand.com.



*Your member ID is located on any payment coupons you would have received from BMS.

*Please also see the login instructions posted to:

https://www.hr.pitt.edu/retirees/benefit-management-services



Defined Dollar Benefit (DDB) Member Portal

Retirees can use the portal to:

Accounts Tab

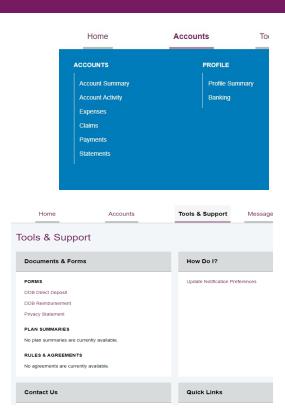
- View their DDB account balance
- View previous claims and account activity
- View their Demographic and Login Information
- Limited view of their direct deposit bank account information

Tools and Support Tab

- Print the DDB Reimbursement Claim Form
- Print the DDB Direct Deposit Form
- View the BMS contact information

*Retirees cannot make any changes to their bank accounts or submit claims online.

*This must be done by submitting the forms electronically, by email or US Postal mail.





BMS Member Services

BMS has a dedicated University of Pittsburgh Member Services Line 1-888-499-6885

- Assist with accessing the CobraPoint member portal to view communications, payment history, coupons, etc.
- Using the DDB portal to submit autopay and DDB reimbursement requests
- Provide a summary of the plans/premiums offered to retirees and their spouses
- Assist with the enrollment process
- Assist with questions related to DDB credits, reimbursement requests, etc.
- Process one-time payments or assist using the member-facing payment link
- Update demographics
- If you prefer to submit your questions or forms via email

PITTBMSdocs@upmc.edu

Next Steps

Post-65 Retiree Open Enrollment Deadlines

- Post-65 Retiree Open Enrollment: Nov. 4 Dec. 4, 2024
- If you are not making any changes to your benefits, no action is necessary. Do not submit the enrollment form.
- If you are changing medical carriers <u>or</u> enrolling in coverage for the first time, you are required to complete the medical plan application in addition to the enrollment form before **Dec. 31, 2024.**
- Changes must be submitted to BMS on the enrollment form no later than Dec. 4, 2024.
- Applications with the carriers must be completed prior to Jan. 1, 2025
- Find the Post-65 Retiree Health Care Plans Summary Guide to Benefits and additional information about medical, dental, and vision plans at hr.pitt.edu/retirees.



Resources/Reminders: Part D Credible Coverage letters

Post-65 Retiree Open Enrollment

Reminder:

- Medicare Part D credible coverage letters
 - Mailed in October annually to anyone over the age of 65 enrolled in the University coverage
 - No action is needed
 - This letter is required proof that your Rx coverage is considered credible (acceptable) within Medicare guidelines.

OMB 0938-0990

Important Notice from University of Pittsburgh About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your options under both the University of Pittsburgh and Medicare's prescription drug coverage. This information can help you decide whether you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about the University of Pittsburgh's coverage and Medicare's prescription drug coverage:

- 1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- 2. The University of Pittsburgh has determined that the prescription drug coverage offered for the following plans provides active employees (by UPMC) and retirees (by UPMC and Highmark) as well



Resources/Reminders: BMS Post-65 Retiree Open Enrollment

Benefit Management Services:

• Telephone: 1-888-499-6885

• Fax: 1-877-851-5591

• Email: <u>PITT-BMSdocs@upmc.edu</u>

Updated hours - M-F, 8 a.m. – 6 p.m.

• Find the Post-65 Retiree Health Care Plans Summary Guide to Benefits and additional information about medical, dental, and vision plans at hr-pitt.edu/retirees.



Resources/Reminders: Open Enrollment Contacts

Post-65 Retiree Open Enrollment

The Hartford

- For coverage and beneficiary information: 1-855-396-7655
- For general questions: 1-855-396-7655
- For general information, visit: hr.pitt.edu/life

TIAA is available for virtual consultations

- Schedule a one-on-one virtual consultation with TIAA by visiting <u>tiaa.org/schedulenow-pitt</u> or by telephone at 1-800-732-8353
- For general questions about retirement savings, call TIAA at 1-800-682-9139
- TIAA is available Monday through Friday 8 a.m. 10 p.m.; Saturday 9 a.m. 6 p.m.



Resources/Reminders: Open Enrollment Contacts

Post-65 Retiree Open Enrollment

- University of Pittsburgh Benefits Department
 - Submit an inquiry: <u>hr.pitt.edu/contact-ohr</u>
 - Telephone: 833-852-2210





Thank you!

