UC Retiree Medical Plans

UC Davis Health Care Facilitator Program

Presented by Guerren Solbach
—Agenda—

◆ Your Options
◆ Making Changes
◆ Medicare and UC
◆ Plan Overviews
◆ Conclusion
——Your Options——
—Your options—

◆ UC offers a menu of medical plan options
  ◦ HMO plans
  ◦ PPO plans

◆ Availability determined by zip code/county
  ◦ HMOs not available outside urban CA
  ◦ See Medical Plan Availability Tool (Excel) on HCF site
—UC medical plans—

◆ HMOs
   ◦ Kaiser Permanente/Senior Advantage
   ◦ UC Blue & Gold HMO/Health Net Seniority Plus
   ◦ Western Health Advantage

◆ PPOs
   ◦ CORE
   ◦ UC Care
   ◦ UC High Option
   ◦ UC Medicare Choice
   ◦ UC Medicare PPO
   ◦ UC Medicare PPO w/o Prescription Drugs
New retiree database, new acronym: UCRAYS
Same user name as At Your Service Online
   Choose a new password
Or, register as a new user
http://retirementatatyourservice.ucop.edu
—Medical plan premiums—

◆ 100% of UC contribution: see rate chart
◆ Graduated Eligibility:
  ◇ During OE, Log on to UCRAYS (password)
  ◇ Or, use Retiree Premium Estimator (Excel) on HCF Program site (year round)
  ◇ Or, call Customer Service at 1-800-888-UCOP
◆ % of UC contribution is printed above address stamp

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IMA RETIREE
1 SHIELDS AVE
DAVIS CA  95616-9999
—Medical plan premiums—

◆ Retirees age 65+ not eligible for Medicare
  ◇ Rates increasing for next 3 years
◆ Medicare Part B reimbursement
  ◇ Will you have a net premium to pay?
About UC medical plans—

- Preventive care generally provided at no cost
- Medical benefits can be separate from Mental Health benefits and Pharmacy benefits
- For details, see Plan Booklets (Evidence of Coverage documents)
  - ucal.us/oe
—Making Changes—
—Making changes—

Open Enrollment: Changes effective January 1
Move outside plan service area
Adding newly eligible family member
No pre-existing conditions exclusions
—Open Enrollment for 2020—

◆ Changes made on UCRAYS: ucal.us/oe
◆ Remember to get a Confirmation Number
◆ No online access? Locked out of the website? Call the Retirement Administration Service Center at 1-800-888-UCOP
◆ Additional paperwork may be required if Medicare-eligible, due 11/28/2019
Carefully consider your options

If you like what you have, or you are happy with plan substitutions, do nothing...

...except read your Open Enrollment booklet!

This includes UC Health Savings Plan members who will be 65 next year
—Medicare and UC—
—Medicare and UC—

◆ Medicare is the federal health insurance program for those over 65 and some disabled
  ◇ **Part A:** Hospital insurance (premium-free for most)
  ◇ **Part B:** Medical insurance
    ◆ **$135.50/month** if newly enrolled in 2019
      ◇ **~$130/month** for those getting SS income
    ◆ Costs more if MAGI >$85K/year ($170K for couples)
—UC’s Medicare requirements—

◆ Retirees and their family members must enroll in Medicare Part B:
  ◊ If they are enrolled in medical insurance
  ◊ If they are eligible for Part A free of charge
  ◊ Failure to comply may result in the loss of UC coverage
  ◊ Exceptions:
    ◆ Retirees who reside outside of the U.S.
    ◆ Those who retired prior to July 1, 1991
—Medicare and UC plans—

Two ways to coordinate:

1. **Original Medicare** with a plan that pays secondary, or:

2. **Medicare Advantage**
—Medicare and Anthem Blue Cross—

1. Original Medicare primary
2. Anthem Blue Cross plans are secondary
   ◆ Medicare providers must be used
     ◇ **Exception**: behavioral health providers
     ◇ Ask if accepting new Medicare patients
     ◇ ~96% of U.S. physicians participate in Medicare
     ◇ Providers that do not accept “assignment” can charge up to 15% more
—Medicare Advantage—

◆ Kaiser, UC Medicare Choice
  ◇ You must sign over your Medicare benefits to the plan (usually by form)
  ◇ If automatically transferring from Health Net Seniority Plus to UC Medicare Choice, no form is needed

◆ Use plan ID card instead of Medicare card
◆ Medicare pays a flat monthly fee to the insurance company
◆ Medicare cannot be used separately from the Medicare Advantage plan
—Medicare Part D—

◆ Subsidizes medical plan premiums
◆ UC Part D plans: no “doughnut hole”
◆ **Form** required if choosing a new plan (except automatic transfers)
—More on Part D—

◆ Duplicate Part D coverage not allowed
◆ Enrollment in a non-UC Part D plan may result in loss of coverage
  ◇ Exception: UC Medicare PPO without Rx
---Medicare “Partner Plans”---

<table>
<thead>
<tr>
<th>Non-Medicare plan</th>
<th>Medicare Partner Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE</td>
<td>UC Medicare PPO</td>
</tr>
<tr>
<td>Kaiser Permanente</td>
<td>Kaiser Permanente Senior Advantage</td>
</tr>
<tr>
<td>UC Blue &amp; Gold HMO (Health Net)</td>
<td>UC Medicare Choice (UnitedHealthcare)</td>
</tr>
<tr>
<td>UC Care</td>
<td>UC Medicare PPO</td>
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</table>
—Medicare retirees outside CA—

◆ Insurance broker (formerly OneExchange)
  ◊ Sells local Medicare supplement plans inside U.S.A.
◆ All covered family members must have Medicare
◆ Does not affect Dental/Vision/Legal coverage
◆ UC provides premium support
  ◊ Health Reimbursement Account (HRA)
  ◊ $3,000 per covered person
   ◆ Subject to graduated eligibility
◆ Use HRA money to buy Medigap or Medicare Advantage plans, pay for Medicare Parts B/D
◆ Catastrophic Coverage Special Payments for $X
HMO Plan Overview
—About HMOs—

◆ The insurance company prepays a monthly, per capita rate (capitation) to each Medical Group
  ◇ Primary Medical Group is responsible for your care that month
  ◇ Each family member can have a different PCP/group

◆ You choose a Primary Care Physician (PCP) who acts as your gatekeeper to care through the Medical Group
  ◇ Exception: emergencies covered anywhere; call 911 or go to the nearest hospital. Let PCP know ASAP.
  ◇ PCP must be within 30 miles of home
  ◇ To change PCPs, call plan
HMO coverage: Copayments

- Physician office visit: $20
- ER: $75 (Medicare: $65)
  - Emergencies covered worldwide
- Outpatient surgery: $100
- Inpatient hospitalization: $250
- Behavioral health outpatient: $20
- Behavioral health inpatient: $250
### HMO Behavioral Health

<table>
<thead>
<tr>
<th>Medical Plan</th>
<th>Behavioral Health Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaiser Permanente</td>
<td>Go through PCP and/or Optum</td>
</tr>
<tr>
<td>Kaiser Permanente Senior Advantage</td>
<td>Go through PCP</td>
</tr>
<tr>
<td>Health Net Seniority Plus</td>
<td>MHN: Managed Health Network</td>
</tr>
<tr>
<td>UC Blue &amp; Gold HMO (Health Net)</td>
<td>MHN (Managed Health Network)</td>
</tr>
<tr>
<td>Western Health Advantage</td>
<td>Optum</td>
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## Non-Medicare HMO Rx

<table>
<thead>
<tr>
<th>Rx 30-day supplies</th>
<th>UC Blue &amp; Gold HMO (Health Net)</th>
<th>Kaiser Permanente</th>
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<tbody>
<tr>
<td><strong>Tier 1</strong> (generic, formulary)</td>
<td>$5</td>
<td>$5</td>
</tr>
<tr>
<td><strong>Tier 2</strong> (brand name, formulary)</td>
<td>$25</td>
<td>$25</td>
</tr>
<tr>
<td><strong>Tier 3</strong> (non-formulary)</td>
<td>$40</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Some meds require prior authorization
—HMO $R_x$ 90-day supplies for 2 copays—

- UC pharmacies
  - Does not apply to Kaiser
- Mail-order
  - Kaiser: 100-day supply
- Local retail pharmacies
  - UC Blue & Gold HMO (Health Net): CVS
---HMO copayment maximums---

**Out-of-pocket maximum**
Includes medical, mental health, \( R_x \)

<table>
<thead>
<tr>
<th>UC Blue &amp; Gold HMO (Health Net)</th>
<th>Kaiser Permanente*</th>
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<tbody>
<tr>
<td>$1,000/person</td>
<td>$1,500/person</td>
</tr>
<tr>
<td>$3,000/family</td>
<td>$3,000/family</td>
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</tbody>
</table>

* Kaiser maximum does not include Optum copayments
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<tr>
<th>Rx 30-day supplies</th>
<th>Kaiser Senior Advantage</th>
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</thead>
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<tr>
<td>Tier 1 (generic, formulary)</td>
<td>$5</td>
</tr>
<tr>
<td>Tier 2 (brand name, formulary)</td>
<td>$25</td>
</tr>
<tr>
<td>Rx Out-of-Pocket Max</td>
<td>New: $6,350</td>
</tr>
</tbody>
</table>
- HMO Rx: Part D 90-day supplies -

- Kaiser Senior Advantage:
  - Local Kaiser pharmacies: 3 copayments
  - Mail order: 2 copayments
    - 100-day supplies
---Kaiser Senior Advantage copay limits---

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<tr>
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</thead>
<tbody>
<tr>
<td>Includes medical &amp; mental health</td>
</tr>
<tr>
<td>$1,500/person</td>
</tr>
<tr>
<td>$3,000/family</td>
</tr>
</tbody>
</table>

*Maximums do not include Rx copayments
Kaiser Permanente/Senior Advantage

- Kaiser Foundation Health Plan contracts with one large group, the Permanente Medical Group
- Members must use Permanente doctors, Kaiser pharmacies, Kaiser hospitals
- Available in most of urban California
- Clinics tend to offer pharmacies, imaging, laboratories, urgent care all at one location
Kaiser Permanente/Senior Advantage

- Advanced electronic medical records, online tools, My Health Manager mobile app
- Classes, pamphlets, videos on a wide variety of health topics
- Disease Management programs
- Rx: 30-/60-/100-day supplies at 1x/2x/3x copays
  - Must use Kaiser pharmacies
  - Mail order: 100-day supply for 2x copays
—Kaiser Permanente vs. Senior Advantage—

Kaiser Permanente

- $1,500 out of pocket limit includes $Rx
- Hearing aids: $1,000 allowance per aid per ear, every 36 months
- Eye exam: $0
- Allergy shots: $5
- + Optum behavioral health
- Acupuncture/chiropractic 24 visit limit (American Specialty network)

Senior Advantage

- $Rx out of pocket limit: $6,350
- Hearing aids: $2,500 allowance per aid per ear, every 36 months
- $150 allowance for eye glass frames and lenses every 24 months
- Eye exam $20
- No American Specialty acupuncture
- Allergy shots: $3
—UC Blue & Gold HMO—

◆ Large provider network
◆ Available in most of urban California
◆ Decision Power:
  ◇ Track your health issues/knowledge base
  ◇ Health coach (nurse, respiratory therapist, dietitian)
  ◇ 24-hour nurse line, case managers, healthy discounts
—UC Blue & Gold HMO—

◆ Disease Management programs
◆ **Omada Health** weight loss and management program (for those with diabetes and heart risks)
  ◊ *New: 2 year limit*
◆ **Quit for Life** program: Smoking cessation phone based behavioral coaching
◆ Telemedicine consults 24/7 through **Teladoc**
  ◊ No copay virtual urgent care visit
UC Blue & Gold HMO

- Hearing aids: 2 aids every 36 months; $2,000 benefit max
- Allergy shots: $20
- Pharmacy Benefit Manager: CVS/Caremark
- Be sure to specify a PCP when choosing this plan
## UC Blue & Gold HMO vs. WHA

<table>
<thead>
<tr>
<th>Provider network:</th>
<th>UC Blue &amp; Gold HMO</th>
<th>WHA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Does not include NorthBay Healthcare</td>
<td>Owned in part by NorthBay Healthcare</td>
</tr>
<tr>
<td>Behavioral health network:</td>
<td>MHN (Managed Health Network)</td>
<td>Optum</td>
</tr>
<tr>
<td>Acupuncture/Chiropractic network:</td>
<td>American Specialty</td>
<td>Landmark</td>
</tr>
<tr>
<td>Service area:</td>
<td>Most of urban California</td>
<td>Certain NorCal counties</td>
</tr>
<tr>
<td>Allergy Shots:</td>
<td>$20</td>
<td>$5</td>
</tr>
<tr>
<td>Pharmacy benefit manager:</td>
<td>CVS/Caremark</td>
<td>Express Scripts</td>
</tr>
<tr>
<td>Telemedicine:</td>
<td>Teladoc</td>
<td>N/A</td>
</tr>
<tr>
<td>Retail clinic:</td>
<td>CVS MinuteClinic</td>
<td>N/A</td>
</tr>
<tr>
<td>Travel insurance:</td>
<td>N/A</td>
<td>Assist America</td>
</tr>
</tbody>
</table>
PPO Plan Overview
—University of California PPOs—

- **Anthem**
  - CORE, UC Care
  - UC High Option, UC Medicare PPO +/- Rx

- **New: UHC**
  - UC Medicare Choice
Large Preferred Provider network:

- In California: 60,000+ Blue Cross network Anthem Preferred providers (87% of doctors) including 400+ network hospitals (90% of facilities)
- More than 96% of hospitals and 92% of physicians across the country are Blue Cross/Blue Shield (BlueCard) providers
- Preferred providers in 200+ foreign countries

ucppoplans.com/nh/find-a-provider

Medicare members: medicare.gov
◆ UC-dedicated customer service
◆ 24/7 nurse line & behavioral health resource center
◆ Pharmacy Benefit Manager: IngenioRx
  ◇ New: *Anthem Essential drug list* for CORE, UC Care
◆ Variety of online tools & mobile app
CORE Medical

- Custom PPO for UC
- No cost preventive care
- For everything else:
  “Catastrophic” coverage
—CORE coverage—

◆ **Anthem Preferred Providers**
  1. $3,000 deductible
     ◆ Per person per year
  2. 20% coinsurance
  3. $6,350 out-of-pocket limit
     ◆ Per person, per year
     ◆ $12,700 per family

◆ **Out-of-network providers**
  1. $3,000 deductible
     ◆ Per person, per year
  2. 20% coinsurance
  3. $6,350 out-of-pocket limit
     ◆ Per person, per year
     ◆ $12,700 per family
     ◆ **Balance billing**
### CORE coverage

<table>
<thead>
<tr>
<th>Self Only Coverage</th>
<th>Preferred Providers</th>
<th>Out-of-Network Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Deductible</td>
<td>$3,000 ↔ $3,000</td>
<td></td>
</tr>
<tr>
<td>2: Coinsurance</td>
<td>20%</td>
<td>20% + balance</td>
</tr>
<tr>
<td>3: Out-of-Pocket Limit</td>
<td>$6,350 ↔ $6,350</td>
<td>$6,350 + balance</td>
</tr>
</tbody>
</table>
No flat copays; covered like medical

Drug expenses apply toward your deductible/out-of-pocket limit
—CORE mental health—

◆ Behavioral health covered the same way medical and pharmacy are covered
  ◇ Coverage not “carved out”

◆ Use **Anthem Preferred** providers
—Advantages of CORE 😊—

- No monthly premium
- One deductible, out-of-pocket limit whether in-or out-of-network
- No PCP, self-refer to specialists
- Large, national preferred provider network
- Out-of-network/world-wide coverage
- **LiveHealth Online** 24/7 telemedicine
  ◇ $49/visit until deductible is met
—Limits of CORE 😞—

- **High** deductible per person & per family
- **High** out-of-pocket limit per person & per family
- No coverage for hearing aids
- Out-of-network coverage severely limited
  - Outpatient surgery @ surgery center: 80% of $350
  - Hospital: 80% of $600/day
- Chiropractic/acupuncture 24 visit limit
- **Preauthorization** required for imaging, inpatient services, in-office injections, bariatric surgery, transplants & more
—CORE: Family members w/ Medicare—

Medicare partner plan:
UC Medicare PPO
UC Care
UC Care

- Custom plan for UC
- Like a standard PPO, but with two levels of in-network providers
  - Choose regular Anthem Preferred providers and pay 20%
  - Or, access a special UC Select provider network for low copayments
—UC Care coverage—

◆ Tier 2: Anthem Preferred
   1. $250 deductible
      ◊ Per person per year
      ◊ $750 for 3 or more
   2. 20% coinsurance
   3. $6,600 out-of-pocket limit
      (includes $Rx)
      ◊ Per person, per year
      ◊ $13,200 per family

◆ Tier 3: Out-of-Network
   1. $500 deductible
      ◊ Per person, per year
      ◊ $1,500 for 3 or more
   2. 50% coinsurance
   3. $8,600 out-of-pocket limit
      (includes $Rx)
      ◊ Per person, per year
      ◊ $19,200 for 3 or more

◆ Balance billing
—UC Care Tier 1: UC Select providers—

- All UC medical centers and select other providers located near UC campuses (CA only)
- Certain services for flat copayments:
  - Physician office visit: $20
  - Urgent Care (not just UC Select): $30
  - ER (not just UC Select), ambulance: $200
  - Outpatient surgery: $100
  - Inpatient hospitalization: $250
  - LiveHealth Online 24/7 telemedicine: $20

Multiple copays can apply per service
### UC Care coverage

<table>
<thead>
<tr>
<th>Self only coverage</th>
<th>UC Select</th>
<th>Anthem Preferred</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Deductible</td>
<td>None</td>
<td>$250</td>
<td>$500</td>
</tr>
<tr>
<td>2: Coinsurance</td>
<td>Flat copayments</td>
<td>20%</td>
<td>50% + balance</td>
</tr>
<tr>
<td>3: Out-of-Pocket Limit</td>
<td>$5,100</td>
<td>$6,600</td>
<td>$8,600 + balance</td>
</tr>
</tbody>
</table>
1. **Generic:** $5/30-day supply
2. **Brand name:** $25/30-day supply
3. **Non-formulary:** $40/30-day supply
4. **Specialty Rx:** 30% up to $150/script (UC pharmacies or Accredo)

◆ **90-day supplies for 2 copays:**
  ◊ UC pharmacies
  ◊ Costco, CVS, Safeway/Vons, Walgreens
  ◊ Mail order: New: *IngenioRx*
UC Care mental health coverage

- Use Anthem Preferred providers
- Outpatient visits 1-3, no copay; additional visits $20
Advantages of UC Care

- Low copays for care from UC Select providers, network urgent care providers, and LiveHealth Online
- Low deductible for Anthem Preferred providers
- No PCP, self-refer to medical providers
- Large, national preferred provider network
- Out-of-network/world-wide coverage
- Low copayments for Rx compared to other PPOs
—Limits of UC Care 🙁—

- Highest premiums & out of pocket limits per person & per family
- Many services not available at UC Select level of coverage
- UC Select tier: Multiple copayments can apply per service
- Acupuncture/chiropractic limited to 24 visits combined
- Out-of-network coverage severely limited
  - Outpatient surgery @ surgery center: 50% of $350
  - Hospital: 50% of $600/day
- Preauthorization required for imaging, inpatient services, in-office injections, bariatric surgery, transplants & more
- Specialty drugs have especially high copays
---UC Care: Family w/ Medicare---

Medicare partner plan: 
UC Medicare PPO
—UC Medicare PPO—
About UC Medicare PPO

- Medicare pays first for covered services
- Anthem Blue Cross pays second
- You pay the balance
  - ~4% if covered by Medicare (20% of the 20% Medicare didn’t pay)
  - 20% after $100 deductible if not covered by Medicare
- LiveHealth Online telemedicine/psychology: $20
—UC Medicare PPO coverage—

◆ Medicare-covered services
1. Deductible N/A
2. 4% (20% of the 20% balance left after Medicare pays first)
3. $1,500 out-of-pocket limit
   ◆ Per person, per year

◆ Services not covered by Medicare
1. $100 deductible
   ◆ Per person, per year
2. 20% coinsurance
3. $1,500 out-of-pocket limit
   ◆ Per person, per year
---UC Medicare PPO coverage---

- Original Medicare primary, Medicare PPO secondary
- Caution: must use Medicare providers **(exception: mental health providers)** unless not covered by Medicare
- Deductible only applies if not covered by Medicare (but covered by plan)

<table>
<thead>
<tr>
<th>Self only coverage</th>
<th>Not covered by Medicare*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Deductible</td>
<td>$100</td>
</tr>
<tr>
<td>2: Coinsurance</td>
<td>20%</td>
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<td>3: Out-of-Pocket Limit</td>
<td>$1,500</td>
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Examples:
* Acupuncture
* Hearing aids
* MFTs
* Services outside U.S.A.
Generic: $10/30-day supply

Brand name: $30/30-day supply

Non-formulary: $45/30-day supply

- 90-day supplies available for 2 copays:
  - UC pharmacies
  - Costco, CVS, Safeway/Vons, Walgreens
  - Mail order: New: IngenioRx

- Some meds require prior authorization

Out-of-pocket limit: New: $6,350

Select Generics: $0
UC Medicare PPO mental health

- Behavioral health coverage not “carved out”
- Use Medicare providers for better coverage
  - Or, use non-Medicare providers (pay 20%)
Advantages of UC Medicare PPO 😊

- Use any Medicare provider for Medicare-covered services
- Use any licensed provider for behavioral health
- Low, 4% coinsurance
- Comprehensive, world-wide coverage
- Acupuncture coverage
- Hearing aid coverage at 80%
—Limits of UC Medicare PPO 😞—

✦ Acupuncture visits limited to 24 visits per year
✦ Must use Medicare providers for non-behavioral health services
✦ $6,350 Rx out-of-pocket max only helpful for expensive specialty medication
✦ Local Sutter primary care physicians (not specialists) not accepting new Medicare patients
✦ 100-day limit per benefit period in Skilled Nursing Facility, 3-day prior hospitalization required
UC High Option
—About UC High Option—

- For most services, plan pays 100% of balance after Medicare; you pay nothing
- $50 annual deductible, 20% coinsurance applies only to services not covered by Medicare
  ◊ Example: Acupuncture
- LiveHealth Online telemedicine/psychology: $20
UC High Option coverage

- Original Medicare primary, High Option secondary
- Caution: must use Medicare providers unless not covered by Medicare (exception: mental health providers)
- Deductible only applies if not covered by Medicare (but covered by plan)

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Examples:
- Acupuncture
- Hearing aids
- MFTs
- Services outside U.S.A.
UC High Option behavioral health

- Behavioral health coverage not “carved out”
- No coinsurance for services covered by Medicare
  - Use Medicare providers for better coverage
  - Or, use non-Medicare providers (pay 20%)
—UC High Option $R_x$—

1. **Generic**: $10/30$-day supply

2. **Brand name**: $30/30$-day supply

3. **Non-formulary**: $45/30$-day supply

   - 90-day supplies available for 2 copays:
     - UC pharmacies, Costco, CVS, Safeway/Vons, Walgreens
     - Mail order: New: **IngenioRx**

   - Some meds require prior authorization

   - **Out-of-pocket limit**: $1,000

   - Select Generics: $0
—Advantages of UC High Option 😊—

- Pay **nothing** for most services
- Use any Medicare provider
- Use any licensed provider for behavioral health
- Comprehensive, world-wide coverage
- Hearing aid coverage at 80%
- Acupuncture coverage
- Lowest $R_x$ out-of-pocket limit ($1,000$)
—Limits of UC High Option 😞—

- Highest monthly premium
- Must use Medicare providers for non-behavioral health services
- 24-visit annual limit on acupuncture
- Local Sutter primary care physicians (not specialists) not accepting new Medicare patients
- 100 day limit per benefit period in Skilled Nursing Facility, 3-day prior hospitalization required
—UC Medicare Choice—
—Introducing UC Medicare Choice—

- Replaces Health Net Seniority Plus
- Ultra-low premium
- Similar copays to Seniority Plus, but with greatly expanded access to doctors
- “Partner Plan” to UC Blue & Gold HMO (Health Net)
- uhcretiree.com/uc
—About UC Medicare Choice—

- Use any Medicare provider who will bill UnitedHealthcare
  - 90% of U.S. physicians contract with UnitedHealthcare
- New benefits beyond Medicare
  - SilverSneakers
  - Post-hospital-discharge meals and transportation
  - Solutions for Caregivers
—UC Medicare Choice coverage—

- Physician office visit: $20
- Virtual visits (Amwell, Doctor on Demand): $0
  - $20 for behavioral health
- ER: $65
  - Emergencies covered worldwide
- Outpatient surgery: $100
- Inpatient hospitalization: $250
- Out of Pocket Maximum: $1,500
—UC Medicare Choice behavioral health—

- Behavioral health coverage not “carved out”
- Use Medicare and non-Medicare providers
- Behavioral health outpatient: $20
- Behavioral health inpatient: $250
—UC Medicare Choice Rx—

1. **Generic:** $5/30-day supply
2. **Brand name:** $25/30-day supply
3. **Non-formulary:** $40/30-day supply

- 90-day supplies available for 2 copays:
  - UC pharmacies, Costco, CVS, Rite Aid, Safeway/Vons, Walmart, Walgreens
  - Mail order: **OptumRx**
- Some meds require prior authorization

- Select Generics: $0
- Out-of-pocket limit: $2,000
Advantages of UC Medicare Choice 😊

- Low premium
- Use any Medicare provider who will bill UHC
- Use any licensed provider for behavioral health
- Comprehensive, world-wide coverage
- Unique benefits beyond Medicare
- No 3-day hospitalization required prior to use of skilled nursing facilities, with unlimited days covered
- For current Health Net Seniority Plus members: acupuncture coverage
Limits of UC Medicare Choice 😞

- Must use Medicare providers for non-behavioral health services
- Hearing aid benefit limited to $2,000
- 24-visit annual limit on acupuncture, chiropractic
- Some doctors will not bill Medicare Advantage plans
- Prior authorization required for certain services
- For current Health Net Seniority Plus members: No eyeglass frame or lens benefit
Conclusion
—Choosing a plan—

✦ Every plan has a different drug formulary
✦ Match your priorities with the services available
✦ Do a cost/benefit analysis based on plan premiums and your expected medical, behavioral and pharmacy needs
✦ Review the Plan Booklets (Evidence of Coverage)
  ◇ ucal.us/oe
—Making a change—

- Open Enrollment is online until 5 p.m. on 11/26
  - You can request a form or make changes over the phone by calling 1-800-888-UCOP (8267)
- Remember to get a **confirmation number**
- Remember, you can always change again during the next Open Enrollment...
—Help is available—

Health Care Facilitator Program

◆ Guerren Solbach:
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◆ Erika Castillo:
  ◊ (530) 752-7840

hr.ucdavis.edu/hcf
UC Retiree Medical Plans

Presented by Guerren Solbach

UC Davis Health Care Facilitator Program