

# Time to get what you've earned



## more benefits focused on you

- CT Teachers Retirement Board (TRB)
- October 2024



# **1** 2025 Monthly Rates

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# **2025 Monthly Rates**

# Changes and Impacts to Medicare Advantage & Part D plans

## Inflation Reduction Act

- Removal of the Coverage Gap Phase for all Part D Prescription Drug Plans
- Implementation of \$2,000 True Out Of Pocket (TrOOP) maximum for Part D covered drugs
  - Methodology for TrOOP accumulation changes to the greater of the member cost share or the defined CMS standard member liability
    - Causes members to hit \$2,000 maximum before spending \$2,000
- Plan Liability in the catastrophic phase moves from 20% to 80%
- Medicare Prescription Payment Plan (M3P)



# 2025 Monthly Rates for Members

**Please note:** The Income-Related Monthly Adjustment Amount (IRMAA)\* charges for Part B and Part D are separate from TRB premiums

|   | UnitedHealthcare® Group Medicare Advantage (PPO) plan with prescription Drug Coverage | UnitedHealthcare® Senior Supplement® plan & UnitedHealthcare® Medicare Rx Plan |
|---|---|--|
| Medical/Prescription Drug – includes vision and hearing | \$94  | \$269  |
| CIGNA Dental  | \$54  | \$54   |
| <b>TOTAL</b>  | <b>\$148</b>  | <b>\$323</b>   |
| <b>Annualized Cost</b>                                  | <b>\$1,776</b>  | <b>\$3,876</b>   |
| <b>Cost Difference between Base and Sr. Supp Plan</b>   |   | <b>\$2,100</b>   |





**What is the difference  
between the two plans?**

# What is a Medicare Advantage with Prescription Drug (MAPD) Plan

- Plans offered through private insurance companies and provide the same benefits that you would receive through Original Medicare
  - Medicare Part A (inpatient hospitalization)
  - Medicare Part B (outpatient medical)
  - Medicare Part D (prescription drug)
- Private insurance companies are administering these benefits and processing/paying claims on behalf of Medicare
- You are still part of Original Medicare and still have the same rights and privileges of Original Medicare
- Private Insurance companies that offer Medicare Advantage plans receive a subsidy from Medicare for each member enrolled in their Medicare Advantage plan.
- All Medicare Advantage and Part D Prescription Drug Plans are regulated and rated by Medicare; this is referred to as the “Stars” Rating System
- The Part D Prescription Drug plan is the same under both plans



# What is a Senior Supplement with Prescription Drug plan

- The Senior Supplement plan is a plan that pays secondary to Medicare
- Medicare pays primary on all your Medicare Part A (hospitalization) and Medicare Part B (medical) claims. Then Medicare sends the remainder of the payment to the Sr. Supplement plan which pays secondary
- There is no Medicare subsidy, and no rating payment paid to the private insurance companies for these plans. This means there is no managed care benefits like the MAPD plan offers
  - Healthy at Home
  - HouseCalls
  - Managed care programs
- This results in higher premiums
- The Part D Prescription Drug plan is the same under both plans







# **Plan Benefits, Programs and Features**

# Medical Plan Design Comparison

| Medical coverage design             | UnitedHealthcare Medicare Advantage Plan                      | UnitedHealthcare Group Senior Supplement Plan   |
|-------------------------------------|---|---|
| AMOUNTS ARE WHAT YOU PAY            |   |   |
| <b>Network Services</b>             | Non-Differential PPO  | Medicare Participating providers  |
| <b>Medicare Part A</b>              |   |   |
| <b>Inpatient Hospital</b>           | \$200 copay/admission   | \$250 copay/admission   |
| <b>Skilled Nursing Facility</b>     | \$0 copay for days 1-100;<br>You pay all costs after 100 days | \$0 copay for days 1-20; \$250 copay for days 21-100; you pay all costs after 100 days; <b>requires 3-day minimum hospital stay</b> |
| <b>Medicare Part B</b>              |   |   |
| <b>Annual Deductible</b>            | \$0   | Medicare Part B Deductible (\$240)  |
| <b>Annual Out-of-Pocket Maximum</b> | \$2,000: excludes non-Medicare covered services               | \$2,000 plus the Part B deductible excludes non-Medicare covered services   |

[\*This information can also be found on your pre-enrollment site <retiree.uhc.com/xxxx> under "Coverage and benefits."]

[\*\*A copay or coinsurance may apply if you receive services that are not part of the annual physical/wellness visit.]



# Medical Plan Design Comparison

| Medical coverage design                                      | UnitedHealthcare Medicare Advantage Plan | UnitedHealthcare Group Senior Supplement Plan                                     |
|--|--|---|
| AMOUNTS ARE WHAT YOU PAY                                     |  |   |
| <b>Ambulance Services</b>                                    | \$100 copay                              | \$100 copay after deductible  |
| <b>Emergency Care<br/>Worldwide Coverage</b>                 | \$100 copay<br>Covered                   | \$100 copay after deductible<br>\$250 deductible then 20% (1 <sup>st</sup> 6 mos) |
| <b>Urgently Needed Care</b>                                  | \$10 copay                               | \$10 copay after deductible   |
| <b>Medicare Covered Continuous Glucose Monitors (CGMs) *</b> | \$0 copay                                | 100% after deductible   |

*Please note: CGMs can be obtained from several UnitedHealthcare preferred vendors such as **Byram, Edgepark or Advanced Diabetes Supply**. Please contact UnitedHealthcare for an option that meets your needs.*

[\*This information can also be found on your pre-enrollment site <retiree.uhc.com/xxxx> under "Coverage and benefits."]

[\*\*A copay or coinsurance may apply if you receive services that are not part of the annual physical/wellness visit.]



# Medical Plan Design Comparison

| Non-Medicare Covered Medical Coverage Design  | UnitedHealthcare Medicare Advantage Plan   | UnitedHealthcare Group Senior Supplement Plan                             |
|---|--|---|
| AMOUNTS ARE WHAT YOU PAY  |  |   |
| <b>Routine Vision Services (1 exam every 12 months)</b><br><b>Eyewear or contact lenses (every 24 months)</b> | \$10 copay<br><b>\$500 allowance – *NEW in 2025; increasing from \$240</b>                   | \$0 copay<br><b>\$500 allowance – *NEW in 2025; increasing from \$240</b> |
| <b>Routine Hearing Services (1 exam every 12 months)</b><br><b>Routine Hearing Aids</b>                       | \$0 copay<br>\$1,500 max benefit every 36 months<br><b>*Must use the UHC Hearing Network</b> | \$0 copay<br>\$5,000 max benefit every 24 months                          |
| <b>Routine Podiatry</b>   | \$10 copay up to 6 visits per year   | Not covered   |
| <b>Gradient Compression Stockings (includes custom-built stockings) up to 6 stockings per year</b>            | \$10 copay   | Not covered   |
| <b>Shoe insert orthotics - unlimited</b>  | \$10 copay   | Not covered   |
| <b>Wigs after chemotherapy – 1 wig per year</b>   | Not Covered  | \$0 copay   |

[\*This information can also be found on your pre-enrollment site <retiree.uhc.com/xxxxx> under "Coverage and benefits."]

[\*\*A copay or coinsurance may apply if you receive services that are not part of the annual physical/wellness visit.]



# Preventive Services

| Medical coverage design         | UnitedHealthcare Medicare Advantage Plan | UnitedHealthcare Group Senior Supplement Plan |
|---------------------------------|--|---|
| AMOUNTS ARE WHAT YOU PAY        |  |   |
| <b>Annual Physical</b>          | \$0 copay                                | \$0 copay                                     |
| <b>Annual Wellness Visit</b>    | \$0 copay                                | \$0 copay                                     |
| <b>Immunizations</b>            | \$0 copay                                | \$0 copay                                     |
| <b>Breast cancer screenings</b> | \$0 copay                                | \$0 copay                                     |
| <b>Colon cancer screenings</b>  | \$0 copay                                | \$0 copay                                     |

[\*This information can also be found on your pre-enrollment site <retiree.uhc.com/xxxx> under "Coverage and benefits."]

[\*\*A copay or coinsurance may apply if you receive services that are not part of the annual physical/wellness visit.]



# 2025 Prescription Drug Plan

Each calendar year, you will pay the full cost of your drugs until you reach the **\$200 deductible**. Once the deductible is met, you will pay a percentage of the cost of the drug (coinsurance), depending upon the type of drug you are prescribed, for the remainder of the year, or until you reach the **\$2,000 true out of pocket (TrOOP)** per calendar year:

Tier 1: 5% for Generic or,

Tier 2: 20% for Preferred Brand or,

Tier 3: 30% for Non-Preferred Brand or

Tier 4: 30% for Specialty



# How to calculate the TrOOP

**2025 TrOOP accumulation is the greater of:**

| Member's cost share in the CT TRB plan, or: | Member's expected cost share under the CMS defined standard plan |
|---|--|
|---|--|

**Once the \$2,000 TrOOP has been met, you pay \$0 copay for *Part D* prescription drugs the remainder of the year**

Mary goes to the pharmacy to pick up her drug. The cost of the drug is **\$275** and is a **Tier 2 (20%)** drug

Mary's cost share under the CT TRB plan would be **\$55**, 20% of \$275 = \$55

Mary's estimated cost share under the CMS defined standard plan would be **\$68.75**, 25% of \$275 = \$68.75

Since Mary's cost share would be greater under the **CMS defined standard plan**, **\$68.75** applies to Mary's **TrOOP**

Mary's TrOOP Accumulation: **\$68.75**

In summary, Mary paid **\$55** out of her pocket and **\$68.75** was applied to her TrOOP Accumulation

CT TRB plan

Initial coverage:

- T1: 5%
- T2: 20%**
- T3: 30%
- T4: 30%

Catastrophic: \$0

CMS defined standard plan

Initial Coverage: **25%** for all tiers

Catastrophic: \$0



# Medicare Prescription Payment Plan (M3P)

## What is it?

The Medicare Prescription Payment Plan is a new program created under the Inflation Reduction Act that allows participants to spread their covered Part D out-of-pocket spending over the remainder of the calendar year.

## Who can participate in the Medicare Prescription Payment Plan program?

All Part D enrollees in employer group plans are eligible to participate in the Medicare Prescription Payment Plan beginning on or after January 1, 2025. Information about the program is included in select plan materials.

While this program is available to anyone with Medicare Part D, enrollees with high cost-sharing earlier in the plan year are more likely to benefit from the program.

This program may not be a good fit for members who have low yearly drug costs, who are not likely to reach the \$2,000 annual out-of-pocket maximum, or who have Extra Help or another government program to help save on their prescription drug costs.

## How does it work?

- A member can opt in to the program through the plan online, over the phone or by mail
- The member pays \$0 up front for their Part D medication, and the plan pays the pharmacy for the member's cost share
- The plan sends monthly bills to the member, which can be paid online, over the phone or by opting in to autopay
- Future payments increase as the member continues to fill prescriptions throughout the year
- The member won't pay interest or fees on the amount owed even if the payment is late





# Prescription Drug Coverage – Preferred Brand Diabetic Insulin Savings for 2025

| Preferred Diabetic | Deductible | Cost Share/Copay |
|--------------------|------------|------------------|
| 31 Day Supply      | \$0        | \$25 Copay       |
| 90 Day Supply      | \$0        | \$50 Copay       |

**Humalog, Humulin, Insulin Lispro, Lantus, Levemir, Lyumjev, Toujeo and Tresiba**

## Prescription Drug Coverage- Non-Preferred Diabetic Insulin for 2025

| Preferred Diabetic | Deductible | Cost Share/Copay |
|--------------------|------------|------------------|
| 31 Day Supply      | \$0        | \$35 Copay       |
| 32 -60 Day Supply  | \$0        | \$70 Copay       |
| 61-90 Day Supply   | \$0        | \$105 Copay      |



# Testing and Monitoring Supplies to Help Manage Diabetes

When you use one of the approved meters and corresponding strips, your cost share for diabetes testing and monitoring supplies is a \$0 copay.

## These supplies also include any brand of:

- ✓ Lancet
- ✓ Lancing device
- ✓ Glucose control solution (to test the accuracy of your meter)
- ✓ Replacement batteries for your meter

### Senior Supplement Plan:

No preferred brands required. Diabetes testing and monitoring supplies will be covered at a \$0 copay.

**To switch to one of the preferred brands, you may be required to get a new prescription from your provider. A temporary supply of your current brand can be requested.**

Plus, your plan provides coverage for many of the OneTouch and ACCU-CHEK blood glucose testing strips and meters\*.

\*Other suppliers/vendors/providers are available in our network.



# Getting Vaccinated is Important to Your Health



**Vaccines work with your body's natural defenses to protect against infection and help reduce the risk of disease.**

They do this by imitating an infection without causing the disease — and getting your immune system to respond the same way it would to a real infection. This prepares your body to recognize and fight the disease in the future.

## **Check with your provider to see if these common vaccines are right for you**

### **Covered by Part B**

- ✓ Influenza (flu)
- ✓ Pneumococcal
- ✓ Hepatitis B for those at medium or high risk
- ✓ COVID-19\*

### **Covered by Part D**

- ✓ Shingles
- ✓ Tetanus, diphtheria, pertussis (Tdap)
- ✓ Hepatitis A
- ✓ Hepatitis B for those at low risk
- ✓ RSV

\*You will have \$0 cost share (copayments, deductibles or coinsurance) on FDA-authorized COVID-19 vaccines at both network and out-of-network providers.



# Well-tuned Care for Your Hearing

**With UnitedHealthcare Hearing, you can receive a hearing exam and access to one of the widest selections of prescription and non-prescription hearing aids at significant savings.**

Plus, you'll receive personalized care and follow-up support from experienced hearing providers, helping you to hear better and live life to the fullest.

- ✓ Receive friendly expert advice through our national network of 6,500+ hearing providers\* — or try virtual appointments\*\*
- ✓ Get personalized support to help you adjust to your new hearing aids
- ✓ Choose from the latest technology from popular brands including Phonak, Starkey®, Signia, ReSound, Widex® and Unitron™

Save up to  
**50%**

To get started and save up to 50% off standard industry prices^ with exclusive pricing, go online or call UnitedHealthcare Hearing.

\*Please refer to your Summary of Benefits for details on your benefit coverage.

\*\*Select products and providers.

^Based on suggested manufacturer pricing.

Benefits, features and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply. Other hearing exam providers are available in the UnitedHealthcare network.



# Take an Active Role in Your Health with Renew by UnitedHealthcare®\*

Explore our health and wellness experience that helps empower you to take charge of your well-being every day.

It provides a wide variety of useful resources and activities, including brain games, healthy recipes, learning courses, fitness activities and more. Renew can help you take a more active role in your health and wellness through:

Renew Active®

Brain games

Recipe library

Workout videos

Learning courses

Health articles and videos



\*Renew by UnitedHealthcare is not available in all plans. Resources may vary.



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# Renew Active®

**Renew Active is the gold standard in Medicare fitness programs and available at no additional cost to you.**

- ✓ Provides you the chance to stay physically fit with a free gym membership and access to our nationwide network of fitness centers
- ✓ Access to on-demand workout videos and livestreaming fitness classes if you want access to the benefit from your home
- ✓ Social activities at local health and wellness classes and events



Participation in the fitness program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. The fitness program includes standard fitness membership and other offerings. Fitness membership equipment, classes, activities and events may vary by location. Certain services, discounts, classes, activities, events and online fitness offerings are provided by affiliates of UnitedHealthcare Insurance Company or other third parties not affiliated with UnitedHealthcare. Participation in these third-party services is subject to your acceptance of their respective terms and policies. UnitedHealthcare is not responsible for the services or information provided by third parties. The information provided through these services is for informational purposes only and is not a substitute for the advice of a doctor. Gym network may vary in local market and plan.



# Get Care Anywhere with Virtual Visits

**With Virtual Visits, you can live video chat\* with a medical provider, or behavioral health specialist, from your computer, tablet or smartphone anytime, day or night.\*\***

Ask questions, get a diagnosis, or even get medication prescribed\*\*\* and sent to your pharmacy. All you need is a strong internet connection.



Find participating Virtual Visit providers by logging in to your member website

## Virtual Provider Visits may be best for:

- ✓ Allergies, bronchitis, cold/cough
- ✓ Fever, seasonal flu, sore throat
- ✓ Migraines/headaches, sinus problems, stomachaches

## Virtual Behavioral Health Visits may be best for:

- ✓ Initial evaluation
- ✓ Behavioral health medication management
- ✓ Addiction
- ✓ Depression
- ✓ Trauma and loss
- ✓ Stress or anxiety

\*The device you use must be webcam-enabled. Data rates may apply. This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room.

\*\*Benefits and availability may vary by plan and location.

\*\*\*Providers cannot prescribe medications in all states.



# Medicare Advantage Features

## ✓ Healthy at Home

- 28 home-delivered meals
- 12 one-way rides to medically related appointments and to the pharmacy
- 6 hours of in-home personal care

## ✓ Personal Emergency Response System (PERS)

- Monitoring device that provides fast and simple access to help 24 hours per day, 365 days per year with a simple push of a button

## ✓ Real Appeal<sup>®</sup>

- Real Appeal<sup>®</sup> Weight Management, an online weight management and healthy lifestyle program proven to help you achieve lifelong results
- Real Appeal<sup>®</sup> Diabetes Prevention, a CDC recognized lifestyle program for pre-diabetes and high-risk individuals

## ✓ HouseCalls

- Yearly check-ups at home to help stay up to date on your health between regular doctor's visits at no extra cost.
- HouseCalls also offers a video visit using a computer, tablet or smartphone to connect plan members with a health care practitioner. They will review your health history and current medications, discuss important health screenings, identify health risks and provide health education.

## ✓ Let's Move by UnitedHealthcare

- At no additional cost to you, Let's Move by UnitedHealthcare is here to help keep your mind, body and social life active. With simple resources, tools, fun events and personalized support, we'll help you explore ways to eat well, get fit, beat the blues and stay connected







# **How to Enroll, Change Plans or Opt Out**

# Enrolling and Changing Plans

## Enrolling and Changing Plans

- If you are already enrolled in the UnitedHealthcare® Group Medicare Advantage (PPO) plan with prescription Drug Coverage or UnitedHealthcare® Senior Supplement® plan with UnitedHealthcare® Medicare Rx, and you do not wish to make a change **no action is required**. You will be automatically re-enrolled in the same benefit plan effective **January 1, 2025**
- If you would like to choose a different plan option, please call UnitedHealthcare® toll-free at **1-866-794-3033**, TTY **711**, 8 a.m.–8 p.m. local time, Monday–Friday, 8 a.m.–8 p.m. local time. You may elect a plan change October 7 through November 22, 2024.

### • Opting Out/Cancelling Coverage

- You will have the opportunity to opt-out of this plan if you don't want to be enrolled
- If you do not wish to be enrolled in this plan, call TRB at **1-800-504-1102** or go online to [www.ct.gov/trb](http://www.ct.gov/trb) and complete the *Health Insurance Cancellation form* by **November 22, 2024**
- You must submit your cancellation form 30 days before the month you want coverage to be cancelled.
- **If you opt out, you cannot re-enroll for two years without a qualifying event.**





# What to Expect Next

## For EXISTING UnitedHealthcare Members

If you are already enrolled in the UnitedHealthcare® Group Medicare Advantage (PPO) and you do not wish to Opt Out, no action is required. You will be automatically re-enrolled in the same benefit plan effective January 1, 2025.

## For NEW UnitedHealthcare Members

**In the month of December 2024, you and any Medicare-eligible dependent who enrolled into the plan will each be receiving\*:**

**Medicare Advantage plan with Prescription Drug coverage:** a UnitedHealthcare Quick Start Guide with your member ID card affixed to the front of the guide

**Senior Supplement plan with Prescription Drug coverage:** a UnitedHealthcare Quick Start Guide for both your Senior Supplement and Prescription Drug coverage. Your prescription drug member ID card will be affixed to the front of the Quick Start Guide and a separate confirmation letter will include your Senior Supplement member ID card.

Beginning **January 1, 2025**, simply use your UnitedHealthcare member ID card each time you go to the doctor or hospital or get a prescription filled at the pharmacy

The back of your member ID card lists important phone numbers you may need throughout the year

Store this card in a safe place

Don't discard your red, white and blue Medicare card



# UnitedHealthcare Mobile App

With the UnitedHealthcare mobile app, you can stay on top of your benefits 24/7 anywhere you go.

## Find care

- Find network care options for providers, clinics and hospitals in your area
- Talk to a provider 24/7

## Manage your health plan details

- Generate and share digital health plan ID cards
- View claims [and rewards]

## Stay on top of costs

- View your copay, annual deductible and out-of-pocket expenses

## Fitness

- Find a gym location



To download the app, scan the QR code with the camera on a smartphone or tablet



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# We're Here to Help

If you have questions, give us a call toll-free:



**1-866-794-3033, TTY 711,**  
8 a.m.–8 p.m. local time, Monday–Friday



Learn more online: **[retiree.uhc.com/TRB](https://retiree.uhc.com/TRB)**





# Questions and Answers



**Thank you**



Benefits, features and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply. The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary. You must continue to pay your Medicare Part B premium [,] [if not otherwise paid for under Medicaid or by another third party. This document is available in alternative formats.

If you receive full or partial subsidy for your premium from a plan sponsor (former employer, union group or trust), the amount you owe may be different than what is listed in this document. For information about the actual premium you will pay, please contact your plan sponsor's benefit administrator directly.

<sup>1</sup>Optum Home Delivery is a service of Optum Rx pharmacy. Optum Home Delivery Pharmacy and Optum Rx are affiliates of UnitedHealthcare Insurance Company. You are not required to use Optum Home Delivery Pharmacy for a [<90- or 100-day>] supply of your maintenance medication. If you have not used Optum Home Delivery Pharmacy, you must approve the first prescription order sent directly from your doctor to the pharmacy before it can be filled. Prescriptions from the pharmacy should arrive within 5 business days after we receive the complete order. Contact Optum Rx anytime at 1-888-279-1828, TTY 711.]

[Other pharmacies are available in our network.]

[Members may use any pharmacy in the network but may not receive preferred retail pharmacy pricing. [Copays apply after deductible.]]

Out-of-network/non-contracted providers are under no obligation to treat <Plan> members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information[, including the cost-sharing that applies to out-of-network services].

The company does not discriminate on the basis of race, color, national origin, sex, age or disability in health programs and activities. We provide free services to help you communicate with us such as letters in other languages, Braille, large print, audio, or you can ask for an interpreter. Please contact Customer Service at <1-844-808-4553, TTY: 711, 8 a.m.–8 p.m. local time, 7 days a week>, for additional information.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in the plan depends on the plan's contract renewal with Medicare.

