



# Orange County CountyChoice Silver Retiree Benefits Presentation



# What Is CountyChoice Silver (CCS) ?

- A group Medicare Supplement Plan provided by United Healthcare (UHC) and offered through the Texas Association of Counties Health and Employee Benefits Pool.
- This plan will serve in conjunction with Medicare as the healthcare benefit plan for all retirees who are eligible for post-employment benefits and are age 65 or older.

# What Is a Medicare Supplement Plan?

An insurance plan that can help pay some of the health care costs that Medicare doesn't pay, like coinsurance and deductibles.

# Medicare Approved Supplement Plans

The chart below shows basic information about the different benefits that Medigap policies cover. If a percentage appears, the Medigap plan covers that percentage of the benefit, and you're responsible for the rest.

Medicare Supplement Insurance (Medigap) plans										
Benefits	A	B	C	D	F*	G	K	L	M	N
Medicare Part A coinsurance and hospital costs (up to an additional 365 days after Medicare benefits are used)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Medicare Part B coinsurance or copayment	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%**
Blood (first 3 pints)	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Part A hospice care coinsurance or copayment	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Skilled nursing facility care coinsurance			100%	100%	100%	100%	50%	75%	100%	100%
Part A deductible		100%	100%	100%	100%	100%	50%	75%	50%	100%
Part B deductible			100%		100%					
Part B excess charges					100%	100%				
Foreign travel emergency (up to plan limits)			80%	80%	80%	80%			80%	80%
							Out-of-pocket limit in 2015			
							\$4,940	\$2,470		

# Texas Counties offering County Choice Silver

Anderson County	Eastland County	Howard County	Palo Pinto County
Andrews County	Erath County	Hunt County	Polk County
Aransas County	Fannin County	Jackson County	Potter County
Armstrong County	Fayette County	Jasper County	Real County
Atascosa County	Fort Bend County	Karnes County	Refugio County
Austin County	Freestone County	Kaufman County	Robertson County
Bastrop County	Gaines County	Kenedy County	Rockwall County
Blanco County	Garza County	Kent County	Runnels County
Calhoun County	Gillespie County	Kerr County	Rusk County
Callahan County	Glasscock County	King County	Scurry County
Carson County	Goliad County	Kinney County	Stephens County
Chambers County	Gonzales County	Knox County	Sutton County
Cherokee County	Grimes County	Lamb County	Terrell County
Cochran County	Guadalupe County	Leon County	Terry County
Collin County	Hansford County	Martin County	Trinity County
Comal County	Hardeman County	McMullen County	Walker County
Concho County	Hardin County	Mitchell County	Washington County
Cooke County	Hartley County	Montgomery County	Webb County
Crockett County	Henderson County	Moore County	Wharton County
Crosby County	Hockley County	Morris County	Wilbarger County
Culberson County	Hopkins County	Navarro County	Winkler County
Dawson County	Houston County	Oldham County	Yoakum County

# Premium Cost Comparisons (2015 Rates)

<u>Monthly Premiums</u>	<u>Current TAC Group Plan</u>	<u>CountyChoice Silver*</u>
<u>Retiree Pays</u>	<u>\$0</u>	<u>\$0.00</u> ^
<u>County Pays</u>	<u>\$614.26</u>	<u>\$421.66</u>
<u>Retiree + Spouse - Retiree Pays</u>	<u>\$641.04</u>	<u>\$421.66</u>
<u>Retiree + Spouse - County Pays</u>	<u>\$614.26</u>	<u>\$421.66</u>

\*Premium for Medical with Rx plan, per retiree per month.

^ Assumes Orange County pays 100% of retiree-only premium.

# County Cost Comparisons (2015 Rates)

County Cost Comparison - Retiree Only Coverage	MONTHLY		ANNUALLY	
	Current Plan	County Choice Silver *	Current Plan	County Choice Silver *
Total Plan Cost	\$614.26	\$421.66	\$928,761.12	\$637,549.92
County Portion	\$614.26	\$421.66	\$928,761.12	\$637,549.92
Retiree Portion	\$0.00	\$0.00 ^	\$0.00	\$0.00 ^
			<b>ESTIMATED ANNUAL COUNTY SAVINGS</b> (net of \$68,000 avg RDS Subsidy):	
			<b>\$223,211.20</b>	

@ 126 RETIREES

\*Premium for Medical with Rx plan, per retiree per month.

^ Assumes Orange County pays 100% of retiree-only premium.

# How does CCS compare to your current TAC group plan?

- For Medicare-approved expenses, CCS covers most of the same things as your current plan including doctor visits, diagnostic testing, and hospitalizations.
- Many retirees find that their out-of-pocket costs are lower. This is because CCS has no deductibles, copays, or co-insurance.
- CCS offers a prescription drug coverage option.
- This is a TAC group plan, with the same great TAC service you are used to.



# Summary of Benefits Highlights

2015 Medicare Coverage Amounts\*

Covered Service	Medicare Pays	Plan Pays	Retiree Pays
<b>Medicare Part A Hospital – semi-private room and board, general nursing and miscellaneous services and supplies.</b>			
Days 1 – 60	All but \$1,260	\$1,260 (Medicare Part A Deductible)	\$0
Days 61 – 90	All but \$315 per day	\$315 per day	\$0
<b>Medical Services such as physician services, inpatient and outpatient medical and surgical services, and diagnostic tests</b>			
First \$147 of Medicare Approved Amounts	\$0	\$ 147 (Medicare Part B Deductible)	\$0
Remainder of Medicare Approved Amounts	Generally 80%	Generally 20%	\$0

\*Medicare coverage amounts are subject to change annually.

# Summary of Benefits Highlights cont'd

Covered Service	Medicare Pays	Plan Pays	Retiree Pays
<b>Preventive Healthcare</b>			
Medicare Covered	100%	Balance, if applicable	\$0
Annual Routine Physical not covered by Medicare	\$0	100%	\$0
<b>Durable Medical Equipment</b>			
First \$147 of Medicare Approved Amounts	\$0	\$ 147 (Medicare Part B Deductible)	\$0
Remainder of Medicare Approved Amounts	80%	20%	\$0

# Medical Out-Of-Pocket Cost Comparisons

(2015 rates)

Medical Out-Of-Pocket Costs	Current TAC Group Plan	CountyChoice Silver
Annual Deductible	\$2000.00	\$0.00
Office Visit Copay - PCP	\$35.00	\$0.00
Office Visit Copays	\$45.00	\$0.00
Co-Insurance %	20%	0
Co-Insurance Maximum	\$4,000.00	N/A

# Out-Of-Pocket Cost Example 1

## Medicare and Current Plan (2015 rates)

<b>Medicare (pays primary)</b>	
Total Approved Charges	\$500.00
Medicare Part B Deductible	\$147.00
Due from Plan	\$353.00
(Plan pays 80% / You pay 20%)	
Medicare Pays: Co-Insurance 80%	\$282.40
Your Responsibility: Deductible	\$147.00
Plus Co-Insurance 20%	\$70.60
<b>Your Total Responsibility:</b>	<b>\$217.60</b>

<b>Current Group Plan (pays secondary)</b>	
Total Approved Charges	\$500.00
Credited to Deductible	\$500.00
Plan Responsibility	\$0.00
<b>YOU PAY \$217.60</b>	

This example assumes that you have not paid anything toward your deductible before this claim. This claim will satisfy 100% of your Medicare Part B and \$500 toward your \$2,000 TAC/Blue Cross deductibles for the year.

# Out-Of-Pocket Cost Example 1

## Medicare and CCS (2015 rates)

<b>Medicare (pays primary)</b>	
Total Approved Charges	\$500.00
Medicare Part B Deductible	\$147.00
Balance after Deductible	\$353.00
(Plan pays 80% / You pay 20%)	
Medicare Pays: Co-Insurance 80%	\$282.40
Your Responsibility: Deductible	\$147.00
Plus Co-Insurance 20%	\$70.60
<b>Your Total Responsibility:</b>	<b>\$217.60</b>

<b>County Choice Silver (pays secondary)</b>	
Total Approved Charges	\$500.00
MEDICARE PAYS	\$282.40
PLAN PAYS	\$217.60
<b>YOU PAY</b>	<b>\$0.00</b>

This example assumes that you have not paid anything toward your deductible before this claim. This claim will satisfy 100% of your Medicare Part B deductible for the year. CCS has no deductible.

# Out-Of-Pocket Cost Example 2

## Medicare and Current Plan (2015 rates)

Medicare (pays primary)		Current Group Plan (pays secondary)	
Total Approved Charges	\$12,000.00	Total Approved Charges	\$12,000.00
Medicare Part A Deductible	\$1,260.00	Credited to Deductible	\$2,000.00
Balance after Deductible	\$10,740.00		\$10,000.00
(Plan pays 80%/ You pay 20%)		Plan Responsibility 80%:	\$8,000.00
Medicare Pays: Co-Insurance 80%	\$8,592.00	Plan Pays:	\$3,408.00
Your Responsibility: Deductible:	\$1,260.00	<b>YOU PAY</b>	<b>\$0.00</b>
Plus Co-Insurance 20%:	\$2,148.00		
Your Total Responsibility:	\$3,408.00		

This example assumes that you have not paid anything toward your deductible before this claim. This claim will satisfy 100% of your Medicare Part A and TAC/Blue Cross deductibles for the year.

# Out-Of-Pocket Cost Example 2

## Medicare and CCS (2015 rates)

Medicare (pays primary)	
Total Approved Charges	\$12,000.00
Medicare Part A Deductible	\$1,260.00
Balance after Deductible	\$10,740.00
(Plan pays 80%/ You pay 20%)	
Medicare Pays: Co-Insurance 80%	\$8,592.00
Your Responsibility: Deductible:	\$1,260.00
Plus Co-Insurance 20%:	\$2,148.00
Your Total Responsibility:	\$3,408.00

County Choice Silver (pays secondary)	
Total Approved Charges	\$12,000.00
MEDICARE PAYS	\$8,592.00
PLAN PAYS	\$3,408.00
<b>YOU PAY</b>	<b>\$0.00</b>

This example assumes that you have not paid anything toward your deductible before this claim. This claim will satisfy 100% of your Medicare Part A and TAC/Blue Cross deductibles for the year.

# How does the CCS Prescription Drug Plan Work?

- Similar to your current plan, copayment tiers are used.
- A drug formulary defines the medicines covered in each tier.
- UHC has over 65,000 national, regional and local chains as well as thousands of independent neighborhood pharmacies in its network.
- Mail-order prescription service (2 copays for a 90-day supply for Tier 1,2, and 3 drugs)



# Prescription Copays

- UHC copay tiers for a 30-day supply are:
  - Tier 1 - Generic \$5
  - Tier 2 – Preferred Brand \$25
  - Tier 3 – Non-Preferred Brand \$60
  - Tier 4 – Specialty 33% of the cost
- There is no gap in Rx coverage from \$2,960 - 4,700.
- After your yearly out-of-pocket drug costs reach \$4,700, you pay:
  - 5% of the cost, or
  - \$2.65 copay for generic / \$6.60 non-generic, whichever is greater

# Prescription Drug Out-Of-Pocket Cost Comparisons

(2015 rates)

Prescription Out-Of-Pocket Costs	Current TAC Group Plan	CountyChoice Silver
Generic Copay	\$10.00	\$5.00
Preferred Brand Name Copay	\$30.00	\$25.00
Non-Preferred Brand Name Copay	\$50.00	\$60.00
Specialty Drug Copay	\$50.00	33%

*Note: Copays are lowered when drug out-of-pocket costs exceed \$4,700*

# UHC Value Added Benefits

- ❖ Nurse Line: A 24 hour nurse line is available for retirees to answer questions about medications or any health concerns.
- ❖ Solutions for Caregivers: A service provided to retirees and their family to help care for loved ones. Case management services include an on-site assessment by a Registered Nurse, personalized care plan and connections to local resources.

# UHC Added Benefits Cont'd

- ❖ Hearing Aids: **hi HealthInnovations®** is a program that makes hearing aids more affordable. Each hearing aid is custom programmed to the retiree's unique hearing needs.
- ❖ Silver Sneakers: **SilverSneakers®** Fitness Program allows the retiree to stay active and have fun at no extra cost. Members receive a basic fitness membership and access to more than 11,000 participating locations.

# Frequently Asked Questions

**Q: Can retirees keep their existing doctors?**

Any provider who accepts Medicare will accept UHC.

Note: Retiree will need to confirm with their current provider.

# FAQ Cont'd

**Q: Which parts of Medicare do retirees have to enroll in?**

In order to participate in the program, retirees must be enrolled in Medicare Part A & B. Retirees should contact a CMS representative for enrollment assistance.

# FAQ Cont'd

**Q: If a retiree has a spouse on the plan but he/she is not 65 yet, what will happen to the spouse's coverage if the County moves to CCS?**

Dependent on the County's personnel policy.

Most counties allow the spouse to remain on the active group plan (at the retiree's expense) until he/she is eligible to switch to CCS.

# FAQ Cont'd

**Q: Will premiums go up next year if retirees have a surgery or major claim this year?**

CCS is a group plan and Orange County will be part of a pool with many members. Rates are not based on individual claims, but on the performance of the group as a whole, just like your current TAC plan.





## Helpful Links:

- The official U.S. Government site for Medicare  
[www.medicare.gov](http://www.medicare.gov)
- National Council on Aging  
[www.ncoa.org/improve-health/community-education/making-sense-of-medicare](http://www.ncoa.org/improve-health/community-education/making-sense-of-medicare)