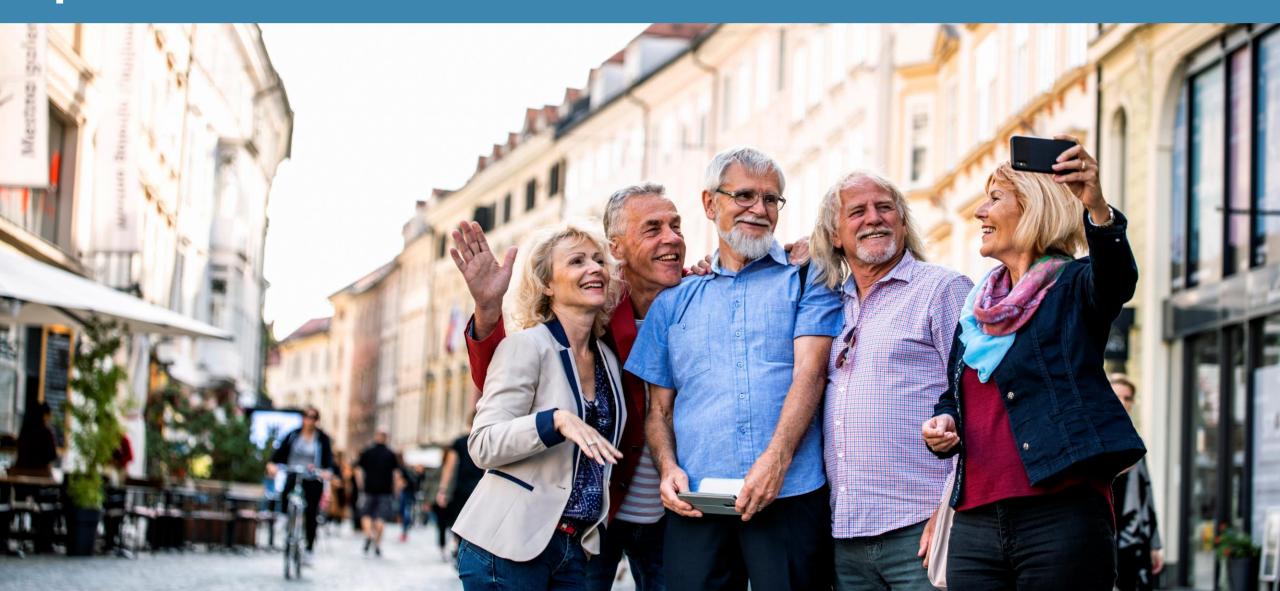
PEHP Medicare Supplement Open Enrollment 2025





Medicare Review



Medicare





Medicare is a National Health Insurance Program

Offers Individual Coverage vs. Group Coverage

Who is Eligible?





Age 65+

Certain disabilities

End Stage Renal Disease (kidney failure)

*Must be a U.S. Resident and either be a U.S. citizen, or an alien lawfully admitted for permanent residence in the U.S. for 5 continuous years prior to the month you enroll.

Medicare Alphabet



PART A

PART B

PART C

PART D









Medicare Alphabet



PART A

PART B

PART C

PART D









Inpatient Hospital

Skilled Nursing Facility

Hospice

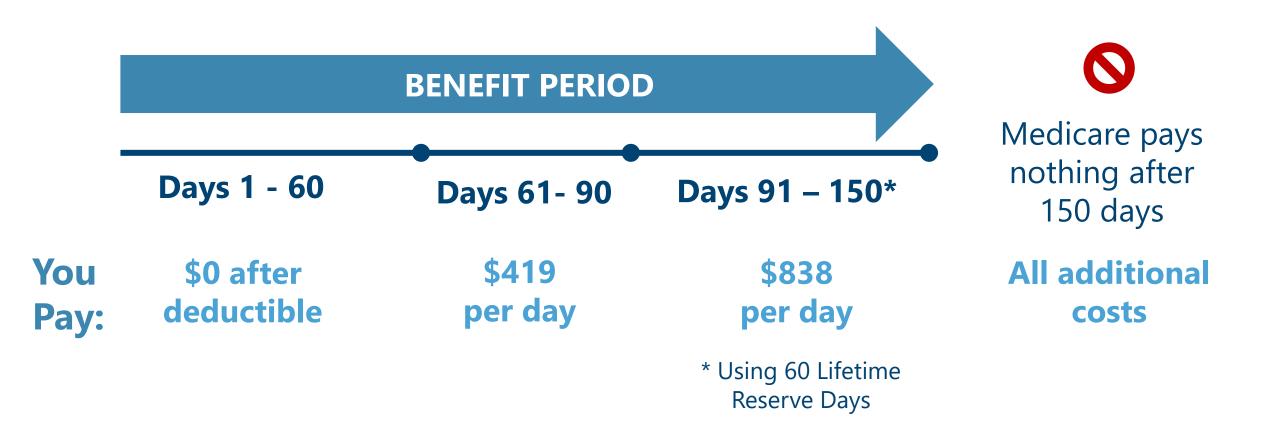
Home Health

Part A – Inpatient Hospital 2025



\$1,676 deductible per benefit period

Benefit Period: begins when admitted to the hospital, ends 60 days after discharge.



Part A - Skilled Nursing Facility 2025



\$1,676 deductible per benefit period

Benefit Period: begins when admitted to the hospital, ends 60 days after discharge.



Medicare Alphabet



PART A

PART B

PART C

PART D









Doctors & Other Physicians

Outpatient Care

Home Health*

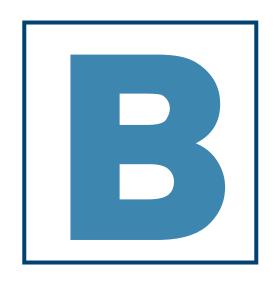
Durable Medical Equipment (DME)

Many Preventive Services

Part B



Physician & Outpatient Services 2025



- \$257 deductible per calendar year
- 20% coinsurance (usually) after deductible
- Preventive Visits covered
- Excess Fees not covered (PEHP covers them!)

Medicare Alphabet



PART A

PART B

PART C

PART D









Medicare Advantage Plans

Combines Part A, Part B, usually Part D May include Vision, Dental, etc.

Medicare Alphabet



PART A

PART B

PART C

PART D









Prescription Drug Coverage (including many shots & vaccines)

Part D plans are run by private insurance companies under Medicare rules

Standard Medicare Part D - 2024









Changes Effective 2025



- Coverage gap (donut hole) stage will be removed
- The most you pay for eligible medications is \$2,000
- Payment plans now available through your Part D Plan

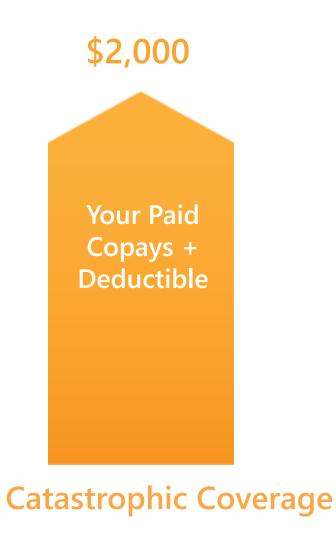


Standard Medicare Part D - 2025



NEW for 2025!





Medicare Premiums and Costs



Part A Cost 2025



Quarters you – OR – spouse paid FICA taxes while working:	Part A Premium
40 Quarters or more (10 years)	FREE
30 – 39 Quarters	\$285/month
Less than 30 Quarters	\$518/month

Part B Cost 2025



Standard Part B Premium = \$185/month

Income Related Monthly Adjustment – you pay a higher premium based on your tax return from two years ago

- Income from 2022 = Determines 2024 Premiums
- Income from 2023 = Determines 2025 Premiums

Part B IRMA 2025



File Individual	File Joint Tax	File Married & separate return	Part B Monthly Premium (per person)
\$106,000 or less	\$212,000 or less	\$106,000 or less	\$185.00
above \$106,000 - \$133,000	above \$212,000 - \$266,000	N/A	\$259.00
above \$133,000 - \$167,000	above \$266,000 - \$334,000	N/A	\$370.00
above \$167,000 - \$200,000	above \$334,000 - \$400,000	N/A	\$480.90
above \$200,000 , less than \$500,000	above \$400,000 , less than \$750,000	above \$106,000 less than \$394,000	\$591.90
\$500,000 and above	\$750,000 and above	\$394,000 and above	\$628.90

Part C Cost (Medicare Advantage)



Premium varies based on your plan and where you live (zip code).

You still pay for your Part B premium

Check with each Advantage plan for details.

Part D Cost



Premiums depend on plan and carrier

Most Advantage Plans include Part D premiums

Part D has an IRMA (like Part B) which adds on to the plan premium



Part D IRMA 2025



File Individual	File Joint Tax	File Married & separate return	Part D Monthly Premium (per person)
\$106,000 or less	\$212,000 or less	\$106,000 or less	Plan Premium
above \$106,000 - \$133,000	above \$212,000 - \$266,000	N/A	\$13.70 + Plan Premium
above \$133,000 - \$167,000	above \$266,000 - \$334,000	N/A	\$35.30 + Plan Premium
above \$167,000 - \$200,000	above \$334,000 - \$400,000	N/A	\$57.00 + Plan Premium
above \$200,000 , less than \$500,000	above \$400,000 , less than \$750,000	above \$106,000 less than \$394,000	\$78.60 + Plan Premium
\$500,000 and above	\$750,000 and above	\$394,000 and above	\$85.80 + Plan Premium

Medicare Enrollment & and Penalties





Medicare Enrollment Periods

- Initial Enrollment first time you are eligible for Medicare at 65
- **Special Enrollment** enrolling in Medicare after age 65, once you lose group health coverage
- **General Enrollment** if you didn't enroll during Initial Enrollment, and you don't qualify for Special Enrollment
- Open Enrollment enroll in a new medical or Part D plan, or switch between Original Medicare & Medicare Advantage. Enroll in PEHP's Medicare Supplement!

Late Enrollment Penalties



Medicare Part	Penalized if	Penalty	Duration
Part A	You do not qualify for <u>Premium-Free Part A</u> and did not purchase Part A when first eligible	10% added to your monthly premium	Twice the number of years you could have had Part A
Part B	You didn't enroll in Part B when first eligible	10% for each full 12- month period you didn't have it	Never goes away
Part D	 You don't have one of the following for 63 consecutive days at any time after your Initial Enrollment period: Medicare Part D Drug Plan Medicare Advantage Plan (Part C) or other Medicare health plan with prescription drug coverage Creditable Prescription Drug Coverage 	\$.33 for each full month you didn't have it	Never goes away

Working Past Age 65



Do you need to enroll at 65?



Yes, if:

- You have Individual, VA, COBRA, or Retiree Coverage
- If you plan to retire within 3 months of turning 65
- ENROLL DURING INITIAL ENROLLMENT to avoid late enrollment penalties

No, if:

 You're covered by an active group health plan, through your or your spouse's employer

Note: Employers Under 20



If your (or your spouse's) employer has less than 20 employees:

 Check with the employer to see if they require you to enroll in Medicare when first eligible.

If you are covered by an active PEHP Medical Plan:

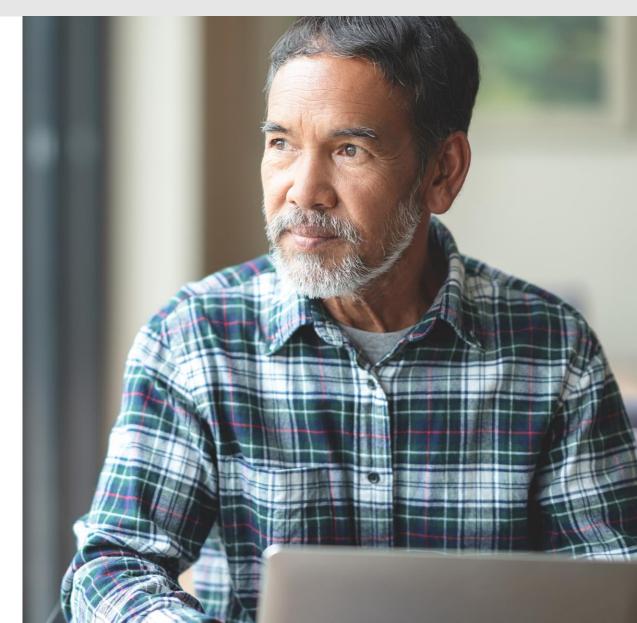
• PEHP will **not** require you to enroll in Medicare if working past age 65, nor limit your medical plan benefits if you enroll in Medicare while working

Working Beyond Age 65



You can:

- Enroll in Medicare anytime you're still covered under a group health plan
- **Delay Medicare** until leaving active employment and/or losing group health coverage



Special Enrollment



There's an 8-month Special Enrollment Period if you delayed Part A & B enrollment because you were:

- An active employee or spouse covered under a group health plan
- A disabled dependent of an active employee (employer must have 100 or more employees)



Why Enroll While Working?



1. You get Premium-Free Part A & do not have an HSA

- Enroll in Part A since there's no added cost to you
- Delay Parts B and D until losing group coverage to save in premiums

2. You need or want coverage beyond your group health plan

- Double Coverage is allowed
- Typically, Medicare will be secondary (depends on employer size)



Why <u>Delay</u> While Working?



1. To save in Medicare premiums

 You may have sufficient coverage through your group health plan - save money by delaying Part B and/or D.

2. To continue Health Savings Account (HSA) contributions

- Once enrolled in Medicare, you cannot contribute to an HSA (including from your employer)
- Does not apply to your spouse's Medicare enrollment



HSAs & Medicare



- <u>If Enrolling at 65</u>: contributions can be made up to the month you enroll
- <u>If Working Past Age 65:</u> stop all contributions 6 months before you apply for Medicare
 - Premium-Free Part A backdates coverage 6 months, but no earlier than the first of the month you turn 65
- Contact your HSA Administrator on prorating your HSA contributions



Plan Ahead



Avoid a Gap in Coverage: the first day of the month after losing group coverage, you should have Medicare in place

If only applying for Part B during your Special Enrollment Period, enroll online or fill out **CMS Form 40B**

You will need to provide documentation proving you had group health coverage

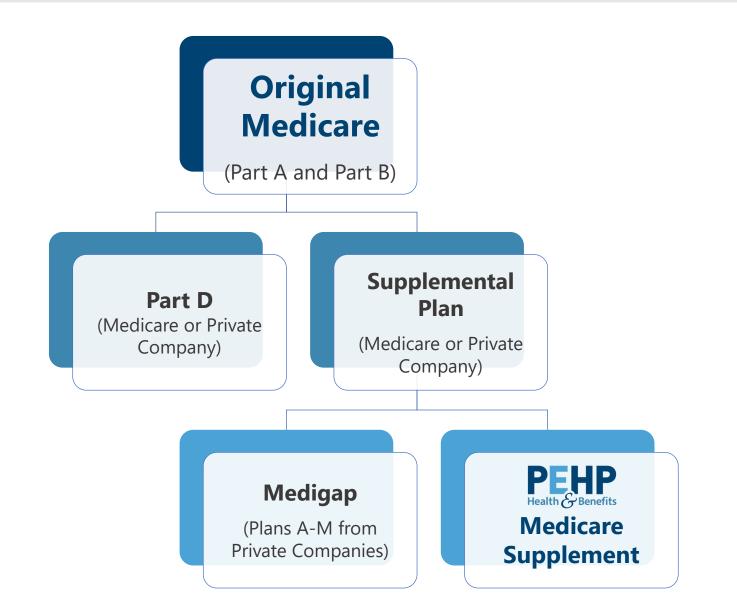


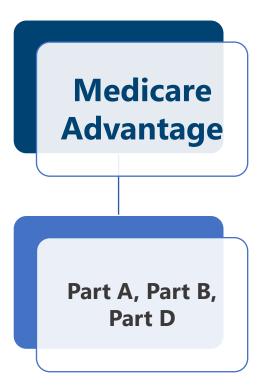
PEHP's Medicare Health Plans



Two Approaches to Medicare









Who is Eligible?





PEHP Medicare Supplement

- No Medical Questions Asked upon Enrollment
- Monthly rates are based on age, and only increase on January 1
- Health Plans cover all, or part, of the Part B Medical Deductible (no longer covered by Medigap plans), plus a Hearing Aid Benefit
- Plans include Out-of-Country Coverage
- Choose the plans that meet your needs (you and your spouse can have different plans!)



PEHP Medicare Health Plans - 2025



- See any provider nationwide who accepts Medicare!
- Plans cover a percentage of eligible services that Medicare doesn't pay for:

PEHP Plan	Coverage Level	Out of Pocket Maximum	Comparable Medigap Plan	
Plan 100	100%	None	Plan G* * Plus, the Part B Deductible	
Plan 75	75 %	\$3,530 (up from \$3,470)	Plan L	
Plan 50	50%	\$7,060 (up from \$6,940)	Plan K	

Example with PEHP Med Sup



Part A Inpatient Hospital 2025

	Medicare Pays	PEHP Pays (depending on your plan)
Part A Deductible (\$1,676)	Nothing	100% 75% 50%
Days 1-60	100% after deductible	Nothing
Days 61 – 90 (\$419/day co-pay)	Nothing	100% 75% 50%
Bonus: Additional 365 Days (after Lifetime Reserve Days)	Nothing	100% 75% 50%

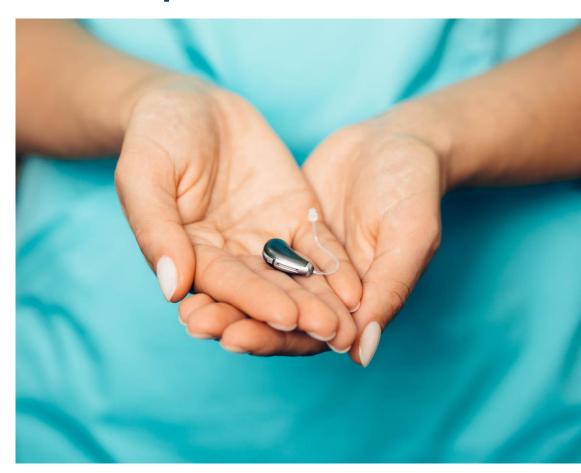
Hearing Aid Benefit



Included will all PEHP Medicare Supplement medical plans!

- Available through Amplifon
- Average savings of 66% off MSRP
- Free Hearing Exam
- Risk-free trial
- Follow up care

amplifonusa.com/lp/pehpmedsupp or call 888-670-2307



PEHP Part D Plan Updates 2025



- Consolidating to one Part D plan:
 - Enhanced Drug Plan
 - Monthly Premium: \$92.75
- Those currently on the Basic or Basic Plus Plan will get a transition credit in 2025 to help with premium cost
 - PEHP will contact you if you qualify

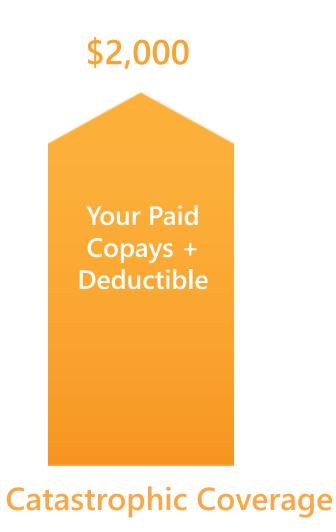


PEHP Part D - 2025



Follows Medicare Standard Part D Plans

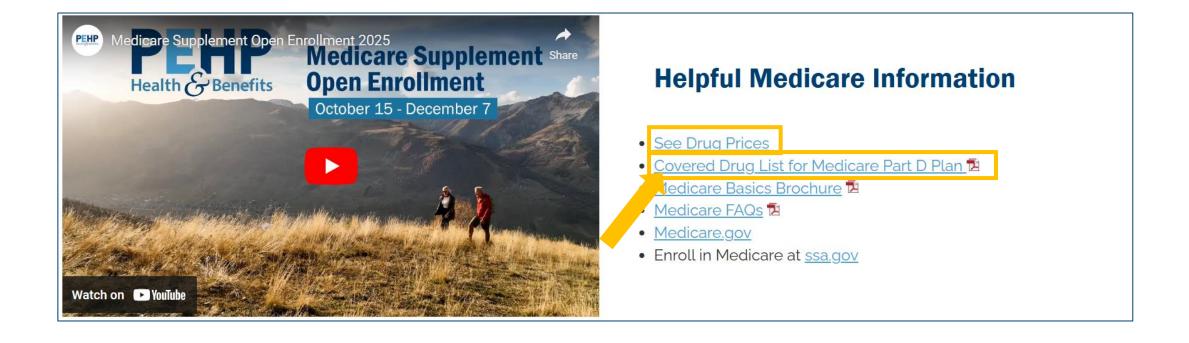




PEHP Part D Plan Reminders



- Insulin: \$35 max copay for one-month supply
- Recommended Vaccinations at \$0 cost share
- Price your medications at pehp.org/medsup



PEHP Medicare Dental Plans





Discount Dental Plan is included with all PEHP Med Sup Medical Plans (even if you don't enroll in a dental plan!)

You pay out-of-pocket for dental services but receive average savings of 40% on dental services.

If you'd like comprehensive dental benefits, enroll in one of three affordable dental plans, which use PEHP's Dental Network

See full plan details in PEHP's Medicare Supplement Open Enrollment Guide

PEHP Medicare Dental Plans 2024



Benefits	Plan 1500	Plan 1000	Basic Dental Plan
Deductible	None	\$50	\$50
Annual Maximum	\$1500	\$1000	\$500
Preventive	No Charge	20%	No Charge
Restorative	20%	20%	50%
Prosthodontics	50%	50%	Not Covered
Monthly Rate	\$41.98	\$26.91	\$16.95

Implant and prosthodontic services are not eligible for six months from the date of PEHP coverage, unless you provide proof that you had other dental coverage in place for at least six consecutive months prior to enrolling.

PEHP Vision Plans



Two Carriers to Choose From

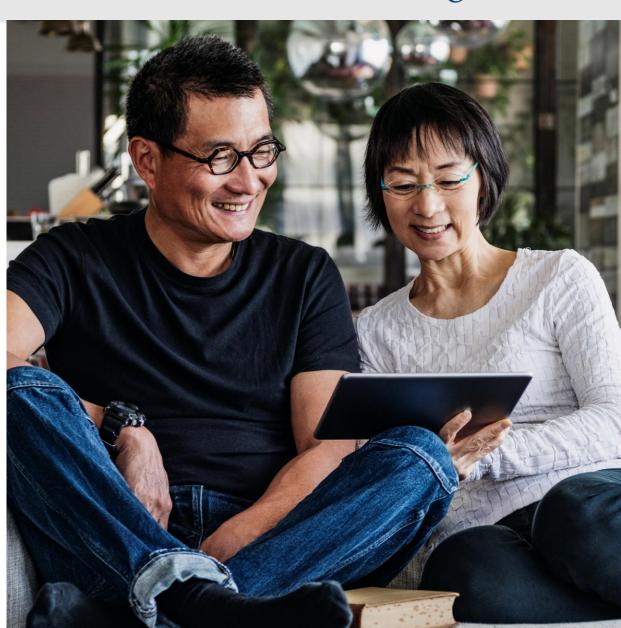
Opticare Vision Services

EyeMed

Each Carrier Offers Two Plans

- 1. Full Plan (with eye exam)
- 2. Eyewear Only Plan

See full plan details in PEHP's Medicare Supplement Open Enrollment Guide



PEHP AgeWell Rebate



Participate with PEHP Wellness to receive two \$50 rebates each year!

Choose wellness programs like:

- health coaching
- webinars
- wellness challenges



Learn more at pehp.org/agewell

PEHPplus Discounts



Discounts on non-covered health & wellness products or services including:

Gyms & Fitness Classes

LASIK

Hearing Aids

Acupuncture

Massages

Home Medical Supplies

Pet Insurance and more!



PEHP Open Enrollment



October 15TH - December 7TH Coverage Effective January 1, 2025

No action needed if you want to keep your current benefits

*New Medicare Enrollees can enroll midyear, once enrolled in Medicare Part A and B



How to Enroll

- New Members
 - pehp.org/US/enrollmedsup
- Existing Members
 - Pehp.org/forms
 - Fill out the Medicare Supplement Enrollment Form
 - Send that to us in your PEHP Account Message Center or by Mail
 - OR call us at 801-366-7499 to change/enroll

pehp.org/medsup



Enroll In or Change Coverage, Access Benefit Materials, Forms, Documents, and Presentation Slides



Considerationsand Resources



Consider Your Health & Budget





Consider Your Medications





Consider Your Retirement Plans





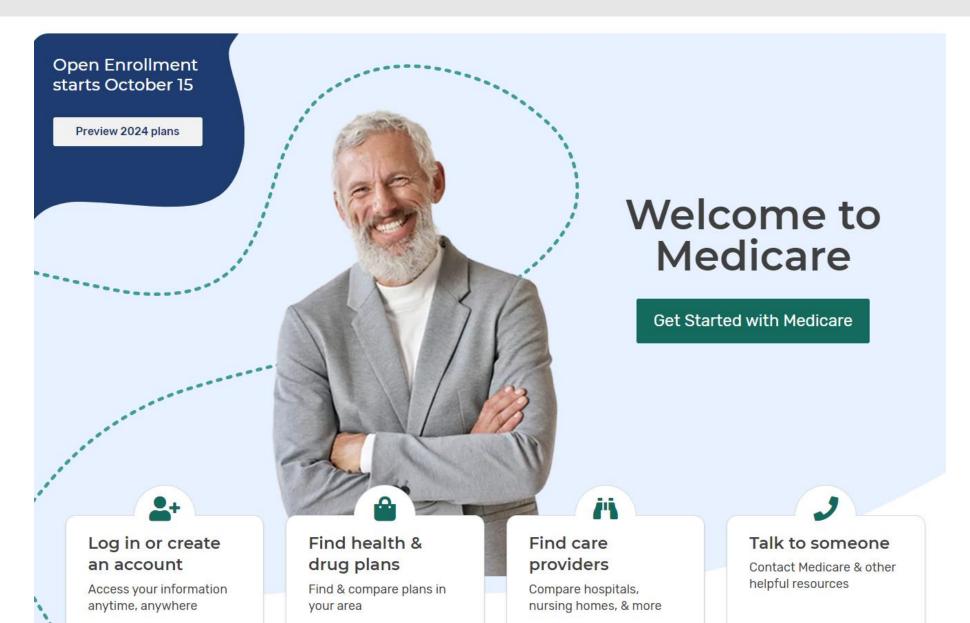
Consider Your Financial Goals





Medicare.gov





eedback

Medicare.gov/coverage



Q Search



Home > Your Medicare Coverage

Your Medicare Coverage

Is my test, item, or service covered?

Type your test, item, or service here

Q

Didn't find what you're looking for?

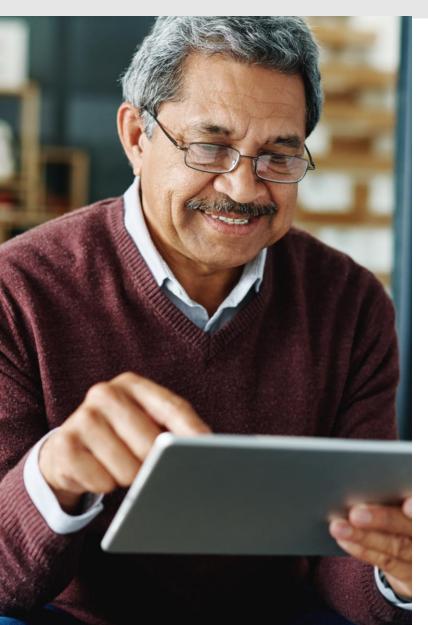
- <u>Use this list if you're a person with Medicare, family member or caregiver.</u> Medicare coverage for many tests, items and services depends on where you live. This list only includes tests, items and services (both covered and non-covered) if coverage is the same no matter where you live.
- If your test, item or service isn't listed, talk to your doctor or other health care
 provider about why you need certain tests, items or services. Ask if Medicare will
 cover them.
- Use this list if you're a Medicare contractor, provider or other health care industry
 professional. This list includes the ability to search by procedure codes (CPT/HCPCS
 codes).

Find out who to call about Medicare options, claims and more.

Talk to Someone

Where to Go For Help





- 24/7 Medicare help 1-800-MEDICARE
- Centers for Medicare & Medicaid Services
 (CMS)
- Medicare.gov
- State Health Insurance Assistance Programs
- Adult & Aging Services in your County

Contact PEHP



Customer Service 801-366-7555

Pharmacy 801-366-7551

Retiree Health 801-366-7499 **Insurance Counselors**

Secure Emails through Message Center (under the *Contact Us* menu)

Contact or Refer to Medicare for detailed Medicare information

Thank You!

