

# 2016 State Health Benefit Plan Retiree Option Change Period (ROCP)



*Presentation to Retired Employees*

# Agenda

- 2015 Retiree Option Change Period Dates
- Retiree Option Change Period and Your Responsibilities
- When You Retire
- Medicare Advantage (MA) Preferred Provider Organization Plan Options
- Non-MA Plan Options

# Making Your 2016 Benefit Election

- **Online Election**

- Members must make their health election at [www.mySHBPga.adp.com](http://www.mySHBPga.adp.com)

- **Annual ROCP Open & Close Dates/Times**

- Website opens at 12:00 a.m. on October 19, 2015
- Website closes at 11:59 p.m. on November 6, 2015

# 2016 Retiree Option Change Period (ROCP) Dates

- Open enrollment is from ***October 19, 2015 thru November 6, 2015***
- Make your elections either online at [www.mySHBPga.adp.com](http://www.mySHBPga.adp.com), or you may call the SHBP Member Services Center at **800-610-1823** for enrollment assistance with a representative
- **You may go online as many times as you like** but the last election confirmed at the time OE/ROCP closes will be your election for the 2016 Plan Year
- **You should print and keep a copy of the confirmation page which will contain a confirmation number** -- once ROCP is closed, you will be able to go online at [www.mySHBPga.adp.com](http://www.mySHBPga.adp.com) and view your 2016 election

# SHBP Enrollment Portal – mySHBPga.adp.com

## Save Time! Update Your Password Before Open Enrollment

- Your Password expires every 90 days. Log in to the SHBP Enrollment Portal now to set up your new Password.
  - Log in using your current Password
  - If it's been over 90 days since the last time you logged in, you'll be prompted to create a new Password (which will expire every 90 days)
- If you do not know your current User Name or Password:
  - Click the **Forgot User ID?** or **Forgot Password?** from the Login page
  - Links are located to the right of the User Name and Password blocks

SHBP  
State Health Benefit Plan  
A Division of the Georgia Department of Community Health

MAKING CHOICES  
that benefit *you*

powered by ADP

Welcome to the SHBP Enrollment Portal

Don't have a User Name and Password? [Register Here](#)  
Use Registration Code: SHBP-GA

User Name:

Password:

[Forgot User ID?](#)

[Forgot Your Password?](#)

LOGIN >

If you are unable to access your account, please contact SHBP Member Services by phone at 800-610-1363

Georgia Department of Community Health

# Retiree Option Change Period (ROCP) and Your Responsibilities

- **Make your elections online** at [www.mySHBPga.adp.com](http://www.mySHBPga.adp.com) no later than November 6, 2015 by 11:59 p.m.
- **Read and make sure you understand the plan materials** posted at [www.dch.georgia.gov/shbp](http://www.dch.georgia.gov/shbp) and other information and take the required actions
- **To update any changes in your address**, make the correction online at [www.mySHBPga.adp.com](http://www.mySHBPga.adp.com) during ROCP or call SHBP Member Services for assistance at 800-610-1863
- **Pay all required premiums** by the due date if they are not automatically deducted from your retirement annuity
- **Notify SHBP** whenever you have a change in covered dependents (within 31 days of a Qualifying Event)
- **Notify SHBP** when you, a covered spouse, or dependent gain Medicare coverage within 31 days, including gaining coverage as a result of End Stage Renal Disease (ESRD)
- **Continue to pay your Medicare Part B premium** if you are in a Medicare Advantage (MA) Preferred Provider Organization (PPO) option

# Health Coverage Continuance at Retirement

## You may continue health care coverage at retirement if:

1

**You have 8+ Years of Service with a State Retirement System (but not eligible to draw an annuity in the future): Direct Pay**

- You can continue after active employment by paying the State Extended Coverage premiums directly to DCH
- If you are under 65, you have the same options as an active employee; if 65 or over and have at least Medicare Part B, you shall enroll in either the Medicare Advantage (MA) Standard or Premium Plan

2

**You have 8+ Years of Service with a State Retirement System (eligible to draw an annuity in the future): Direct Pay**

- Same as above except: when you start drawing your annuity you will need to notify State Health Benefit Plan (SHBP) to have the deductions set up

# Health Coverage Continuance at Retirement, cont'd

## Applying for Coverage Continuance as an Annuitant

- You must apply for continued SHBP coverage for yourself and Covered Dependents within 60 days of the date your coverage as an active employee ends
- Annuitants may request to change Plan Options if the request is made within 31 days of retirement

# When You Retire, continued

## Under Age 65

- Your coverage will rollover into your current option and tier
- Your options are the same as for Active members

## 65 and Older

*If you (and your spouse) are 65 or older at the time you retire **OR** at any time during the year you reach age 65 and you have provided SHBP with proof of Medicare Part B enrollment:*

- You (and your spouse if he/she is age 65 or older) will be enrolled in the UnitedHealthcare Medicare Advantage (MA) Standard Plan under your current tier the month that you reach 65
- If you wish to enroll in the Premium Plan Option, you should go to the SHBP enrollment portal at [www.mySHBPga.adp.com](http://www.mySHBPga.adp.com)

# What Happens If I Do Not Take Action?

- Retirees who are currently enrolled in a UnitedHealthcare MA PPO Plan Option (Standard or Premium) will be defaulted to the same Plan Option for 2016
- Retirees who are currently enrolled in a Non-MA Plan Option will be defaulted to the same Plan Option (HRA, HMO, HDHP) for 2016
- If you do not make an election and are currently enrolled in TRICARE Supplement in 2015, you will be enrolled in TRICARE Supplement in 2016

# What Happens If...

## If 65 or older with Medicare

- Stop paying Part B premium **and/or**
- Enroll in a non-State Health Benefit Plan (SHBP) Medicare Advantage (MA) Plan, Medicare Supplemental Plan or Part D Prescription Drug Plan

### *Then...*

Your Medicare Advantage coverage under SHBP will be terminated and SHBP will move you to the Blue Cross Blue Shield Bronze HRA option and you will pay 100% of the unsubsidized premium.

### *Prescription Drug Coverage Under MA PPO Plan Options*

- UnitedHealthcare includes Medicare Part D drug coverage

## Without Medicare Part B

You may enroll in the Gold, Silver or Bronze Health Reimbursement Arrangement (HRA) or one of the Health Maintenance Organizations (HMO), High Deductible Health Plan (HDHP) or regional HMO Plan Options (if eligible\*) and you will pay 100% of the unsubsidized premium.

**-OR-**

Purchase Part B to enroll in a MA option; however, you will be responsible for paying the Late Enrollment Penalty.

### *Select Generic Program*

- Help members reduce out-of-pocket costs with a \$0 co-payment on certain prescription medications
- A list is available at [www.uhcretiree.com/shbp](http://www.uhcretiree.com/shbp)

The Regional HMO Plan Option is available to SHBP eligible members who live or work in one of the 27 counties within the defined Metro Atlanta Service Area: Barrow, Bartow, Butts, Carroll, Cherokee, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Haralson, Heard, Henry, Lamar, Meriwether, Newton, Paulding, Pickens, Pike, Rockdale, Spalding, Walton.

# 2016 Plan Options

## 2016 Medicare Advantage (MA) Preferred Provider Organization (PPO) Plan Options

### What is the MA PPO Plan?

The MA PPO Plan is an approved plan by the Centers for Medicare & Medicaid Services (CMS), and is sometimes called a Medicare Part C Plan. This plan takes the place of your Original Medicare Parts A (hospital), B (medical) and includes Medicare Part D (prescription coverage).

### What Plan Options will be available in 2016?

- UnitedHealthcare MA PPO Standard
- UnitedHealthcare MA PPO Premium

# 2016 Plan Options, cont'd

## 2016 UnitedHealthcare Group Medicare Advantage (MA) Preferred Provider Organization (PPO) Plan Options

### How Does it Work?

- CMS requires a physical street address and Medicare Number before approving MA PPO coverage
- Once approved, CMS will notify State Health Benefit Plan (SHBP) of the effective date of your coverage
- You will receive a new insurance card to use (in place of your Medicare card) when receiving health services
- Enrollment in the MA PPO Plan Options is subject to CMS approval and is prospective (retrospective enrollment is not allowed)

### Plan Features

- You can use any doctor or hospital in the country as long as they participate in Medicare and accept the UHC MA plan
- You do not have to select a Primary Care Physician (PCP) or obtain a referral to see a Specialist (SPC)
- Co-pays apply toward the out-of-pocket maximum (except for prescription drugs)
- There is no difference in your co-pay/co-insurance levels if you see providers who are in-network or if you see providers who are out-of-network

# 2016 Plan Options, continued

## 2016 UnitedHealthcare Group Medicare Advantage (MA) Preferred Provider Organization (PPO) Plan Options

### Exclusive Programs

- HouseCalls<sup>SM1</sup>
- Solutions for Caregivers<sup>1</sup>
- hi HealthInnovations<sup>TM1</sup>
- Pharmacy Saver<sup>TM</sup>
- Quit Power

### Includes Prescription Drug Coverage

- Access to over 65,000 pharmacies
- Bonus drug list for more covered drugs
- \$0 co-pay on select generic drugs
- Limits on co-payments while in the Catastrophic drug coverage phase

# 2016 Medicare Advantage (MA) Medical Benefit Highlights

<u>You Pay</u>	
<i>Standard Plan</i>	<i>Premium Plan</i>

<b>Monthly Premium</b>	\$25.38/month	\$88.22/month
<b>Annual Deductible</b>	\$0	\$0
<b>Annual Maximum Out-of-Pocket</b>	\$3,500	\$2,500
<b>Primary Care Physician (PCP) Office Visit</b>	\$25 co-pay	\$15 co-pay
<b>Specialist Office Visit</b>	\$30 co-pay	\$25 co-pay
<b>Inpatient Hospitalization</b>	20% of the cost per admission	20% of the cost per admission
<b>Outpatient Surgery</b>	\$95 co-pay	\$50 co-pay
<b>Lab Services</b>	\$0	\$0
<b>Emergency Care</b>	\$50 co-pay	\$50 co-pay

# 2016 Medicare Advantage (MA) Prescription Benefit Highlights

		<u>Your Costs (Retail, 31-day supply)</u>	
		<i>Standard Plan</i>	<i>Premium Plan</i>
<b>Tier 1</b>	<b>Generics</b>	\$0 co-payment for select generics \$15 co-payment for all other generics	\$0 co-payment for select generics \$15 co-payment for all other generics
<b>Tier 2</b>	<b>Preferred Brands</b>	\$45 co-payment	\$45 co-payment
<b>Tier 3</b>	<b>Non-Preferred Brands</b>	\$85 co-payment	\$85 co-payment
<b>Tier 4</b>	<b>Specialty Tier</b>	\$85 co-payment	\$85 co-payment

# 2016 Medicare Advantage (MA) Prescription Benefit Highlights

		<u>Your Costs (Mail Order, 90-day supply*)</u>	
		<i>Standard Plan</i>	<i>Premium Plan</i>
<b>Tier 1</b>	<b>Generics</b>	\$0 co-payment for select generics \$37.50 co-payment for all other generics	\$0 co-payment for select generics \$37.50 co-payment for all other generics
<b>Tier 2</b>	<b>Preferred Brands</b>	\$112.50 co-payment	\$112.50 co-payment
<b>Tier 3</b>	<b>Non-Preferred Brands</b>	\$212.50 co-payment	\$212.50 co-payment
<b>Tier 4</b>	<b>Specialty Tier</b>	\$212.50 co-payment	\$212.50 co-payment

\*Also available at some retail pharmacies.

# Ways to Help You Save

## hi HealthInnovations<sup>1</sup>

- Digital hearing aids start as low as \$599 each depending on the model selected

## \$0 Co-pay

- \$0 co-pay on select generic drugs at a network retail pharmacy or OptumRx mail service pharmacy

## Pharmacy Saver<sup>TM2</sup>

- Other generic drugs may be available for as low as \$2 at participating pharmacies

## 90-day Supply at Retail Pharmacies

- Many retail pharmacies offer 90-day supplies often at the same cost as your Mail Service Pharmacy

# Programs to Help You Stay Healthy

## HouseCalls<sup>1</sup>

- Designed to support and complement your regular doctor's care through an in-home clinical visit with a licensed health care practitioner

## Solutions for Caregivers<sup>1</sup>

- Helps make caring for a loved one easier

## SilverSneakers

- Join or continue your membership with the SilverSneakers fitness program

## Member Rewards Programs<sup>1</sup>

- Get access to health-related coupons and discounts. Create personal health and wellness goals, track progress and earn rewards

## Renew Magazine

- Mailed in-home three times per year

\*Plus: Special programs for members with chronic or complex health needs, and a Quit Power smoking cessation program

# Non-Medicare Advantage (MA) Plan Options 2016

## Medical Claims Administrators and Plan Option Offerings (Non-MA)

SHBP will continue to offer Blue Cross Blue Shield of Georgia (BCBSGa), UnitedHealthcare and Kaiser Permanente (KP) plan options for 2016. However, please keep in mind that if you are retired and over age 65, you will pay the full cost of the unsubsidized premium for these plans as the State will only subsidize the MA Plan Options.

### Health Maintenance Organization (HMO)

- BCBSGa - Statewide
- UnitedHealthcare - Statewide
- KP (Metro Atlanta Service Area/In-Network only plan)

### High Deductible Health Plan (HDHP)

- UnitedHealthcare

### Health Reimbursement Arrangement (HRA)

- BCBSGa

### Medicare Advantage (MA) Preferred Provider Organization (PPO) Standard and Premium

- UnitedHealthcare

✓ Express Scripts (ESI) administers prescription drug pharmacy benefits for retirees who choose BCBSGa or UnitedHealthcare non-MA Plan Options.

✓ Healthways provides well-being resources and incentive programs for retirees who choose BCBSGa or UnitedHealthcare non-MA Plan Options.

\*Additional Options: TRICARE Supplement, PeachCare for Kids®

# Non-Medicare Advantage (MA) Plan Options 2016, continued

## Enhanced Benefits

### Telemedicine/Virtual Visits

- Effective January 1, 2016, SHBP will provide access to physicians through telemedicine/virtual visits
- Face-to-face consultations with physicians will be available 24/7, 365 days a year
- Services will be available from home, office or on the go from a computer, tablet or smartphone that has a web camera

### Wellness Incentive Credits Rollover Expansion

- Starting in 2016, all unused wellness incentive credits will now rollover to both the vendor and plan design you select during OE
- These credits will be available in April 2016; this allows for processing of any claims submitted at the end of 2015 to apply credits
- This means that regardless of the plan design and/or vendor you choose to enroll, you can take your well-being incentive credits with you
- Reminder: Kaiser members' credits will rollover to a Kaiser Permanente Rollover Account (KPRA); BCBS and UHC members' credits will continue to be administered by Healthways

### Bariatric Pilot

- 2016 will be the second year of the two-year Bariatric Pilot established by The Georgia Assembly to provide benefit coverage for certain bariatric surgical procedures for the treatment and management of obesity and related conditions
- Effective January 1, 2016, the pilot program is again limited to **75** non-Medicare Advantage members for the 2016 Plan Year
- Qualified applicants will be randomly selected by the vendors for which you are enrolled.
- If you submitted an application in 2015 and you were not selected and wish to apply for the 2016 Plan Year, you must submit a new application by the deadline. Please contact your medical claims administrator for additional information

# Non-Medicare Advantage (MA) Plan Options 2016, continued

## How the Health Reimbursement Arrangement (HRA) Works

*The HRA provides first-dollar coverage for eligible medical and pharmacy expenses and is funded by SHBP. When going to the doctor, you will not pay a co-payment. Instead, you pay the applicable deductible and co-insurance. If you have remaining well-being incentive credits in your current HRA account, those credits will roll over to the next Plan Year .*

### Plan Features

- Plan pays 100% of covered services provided by in-network providers that are properly coded as “preventive care.” You must meet separate in-network and out-of-network deductibles and out-of-pocket maximums
- You are not required to select a Primary Care Physician (PCP) or obtain referrals to a Specialist (SPC)
- The credits in your HRA account are used to help meet your deductibles and out-of-pocket maximums
- The medical and pharmacy out-of-pocket maximums are combined
- Certain drug costs are waived if SHBP is primary and you actively participate in one of the Disease Management Programs for diabetes, asthma and/or coronary artery disease

# Non-Medicare Advantage (MA) Plan Options 2016, continued

## How the High Deductible Health Plan (HDHP) Works

*The HDHP offers in-network and out-of-network benefits, and has a low monthly premium. However, you must satisfy a high deductible that applies to all covered medical and pharmacy expenses (except preventive care). If you have any dependents, the entire family deductible **no longer** has to be met before benefits are payable for any family member, effective January 1, 2016. Additionally, once the out-of-pocket maximum has been satisfied for that individual family member, all covered medical and pharmacy expenses will be paid at 100% for that family member. You may qualify for a Health Savings Account (HSA) to set aside tax-free dollars to pay for eligible health care expenses. If you have remaining well-being incentive credits in your current HIA wellness account, those credits will roll over to the next Plan Year .*

### Plan Features

- Plan pays 100% of covered services provided by in-network providers that are properly coded as “preventive care”
- Before you can use well-being incentive credits, members must meet a threshold (\$1,300 – individual; \$2,600 other tiers)
- You must meet separate in-network and out-of-network deductibles and out-of-pocket maximums
- You pay co-insurance after meeting the entire deductible for covered medical and pharmacy expenses
- The medical and pharmacy out-of-pocket maximums are combined
- There are no co-payments
- The HSA cannot be combined with a Flexible Spending Account (FSA)

# Non-Medicare Advantage (MA) Plan Options 2016, continued

## How the Statewide Health Maintenance Organization (HMO) Works

*An HMO allows you to receive covered medical services from in-network providers only (except for emergency care). It is important to verify your current provider is in-network when selecting an HMO Plan Option. If you have remaining well-being incentive credits in your current MIA/HIA wellness account, those credits will roll over to the next Plan Year.*

### **Plan Features**

- Plan pays 100% of covered services provided by in-network providers that are properly coded as “preventive care”
- Certain services are subject to a deductible and co-insurance
- You are not required to obtain referrals to see a Specialist (SPC), but are encouraged to select a Primary Care Physician (PCP) to help coordinate your care
- The medical and pharmacy out-of-pocket maximums are combined
- Co-pays count toward your out-of-pocket maximum
- Certain drug costs are waived if SHBP is primary and you actively participate in one of the Disease Management Programs for diabetes, asthma and/or coronary artery disease

# Non-Medicare Advantage (MA) Plan Options 2016, continued

## How the Regional Health Maintenance Organization (HMO) by Kaiser Permanente (KP) Works

*The KP Regional HMO Plan Option is available to SHBP eligible members who **live or work** in one of the 27 counties within the defined Metro Atlanta Service Area.\* For new KP members, your 2015 well-being incentive credits will rollover in to a Kaiser Permanente Rollover Account (KPRA).*

### Plan Features

- Plan pays 100% of covered services provided by in-network providers that are properly coded as “preventive care”
- KP administers the benefits for medical, pharmacy and wellness
- No deductibles
- The medical and pharmacy out-of-pocket maximums are combined
- Co-payment only option

\*Barrow, Bartow, Butts, Carroll, Cherokee, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Haralson, Heard, Henry, Lamar, Meriwether, Newton, Paulding, Pickens, Pike, Rockdale, Spalding, Walton

# Non-Medicare Advantage (MA) 2016 Pharmacy Benefits

## For Blue Cross Blue Shield of Georgia (BCBSGa) and UnitedHealthcare Elections

- Express Scripts administers the prescription drug pharmacy benefits for members who choose BCBSGa and UnitedHealthcare. Express Scripts provides benefits for retail prescription drug products, mail order, home delivery and specialty pharmacy services
- Get up to a 90-day supply of your maintenance medication either through Express Scripts home delivery pharmacy services or at a participating 90-day retail pharmacy
- Express Scripts offers several programs for managing your prescriptions:
  - The My Rx Choices Prescription Savings Program lowers out-of-pocket prescription costs
  - The Worry-Free Fills Program offers automatic refills for long-term medications and will be automatically shipped to you
  - The Extended Payment Program extends home delivery payments over three installments

# Non-Medicare Advantage (MA) 2016 Wellness Options

## For Blue Cross Blue Shield of Georgia (BCBSGa) and UnitedHealthcare Elections

- SHBP will continue to partner with our Wellness vendor, Healthways<sup>®</sup>, to provide members who elect BCBSGa and UnitedHealthcare with well-being resources and incentive programs
- Health actions must be completed between January 1, 2016 and December 15, 2016 in order to earn the well-being incentive credits
- Members who elect BCBSGa and UnitedHealthcare will have access to a variety of Healthways' tools, activities and services such as the Well-Being Assessment, wellness incentives, Well-Being Coaching, Biometric Screenings, and on-site activities
- Healthways also administers 2016 wellness incentives that will allow you to earn credits for offsetting certain health care costs
- Members can earn up to 480 well-being incentive credits toward medical expenses, plus an additional 480 for a covered spouse (total of 960 per household)

# Non-Medicare Advantage (MA) Wellness 2016, continued

	What to Do	What You Will Earn*
<p><b>1</b></p>	<p><b>Assess Your Health</b> Complete your 2016 Healthways Well-Being Assessment (WBA) – a confidential, online questionnaire that will take about 20 minutes.</p> <hr/> <p><b>Know Your Numbers</b> Complete a 2016 Biometric Screening and submit results on the 2016 Physician Screening Form. The Biometric Screening must be completed at an SHBP-sponsored screening event or by your physician; your results must be submitted appropriately on the 2016 Physician Screening Form.</p>	<p>Complete BOTH and earn <b>240</b> well-being incentive credits</p> <p><small>(WBA must be completed before any well-being incentive credits can be earned.)</small></p>
<p><b>2</b></p>	<p><b>Take Action</b> It's your choice! Complete the telephonic coaching pathway, online pathway or a combination of both.</p> <p><b>Telephonic Coaching Pathway</b></p> <ul style="list-style-type: none"> <li>• Complete your WBA and;</li> <li>• Actively engage in telephonic coaching</li> </ul> <p><b>Online Pathway</b></p> <ul style="list-style-type: none"> <li>• Complete your WBA and;</li> <li>• Record 5 online well-being activities within four consecutive weeks and earn up to 40 well-being incentive credits</li> </ul>	<p>Earn up to <b>240</b> well-being incentive credits</p> <p><small>(WBA must be completed before any well-being incentive credits can be earned.)</small></p>

\*Note: For details go to [www.BeWellSHBP.com](http://www.BeWellSHBP.com) or call 888-616-6411. The 2015 incentives do not apply to Kaiser Permanente or the Medicare Advantage Plan Options. For detailed information on all SHBP plans, visit <http://dch.georgia.gov/shbp-decision-guides>. Healthways administers the Be Well Well-Being program for SHBP.

Copyright © 2014 Healthways, Inc.

# Non-Medicare Advantage (MA) Wellness 2016, continued

## For Kaiser Permanente (KP) Election

- SHBP is again excited to partner with KP, to provide members who elect KP with wellness resources and incentive programs
- Members that elect KP will have access to a variety of their tools, activities and services such as the Total Health Assessment, Biometric Screenings and Online and On-site Healthy Living Classes
- As a part of the KP Wellness Program, if you sign up on [kp.org](http://kp.org) and complete all four health activities (e.g. completing a biometric screening, completing one online health education class), you will receive a \$240 Visa gift card (up to \$480 per household for you and your covered spouse)

# Important Notice

- The information provided in this presentation is a summary of changes for the 2016 Plan Year. It is intended only to highlight principle benefits
- Please refer to the Retiree Decision Guide for more details
- Premium rates, Decision Guides and other information will be available at [www.dch.georgia.gov/shbp](http://www.dch.georgia.gov/shbp) and [www.mySHBPga.adp.com](http://www.mySHBPga.adp.com) by October 1, 2015

# Non-Medicare Advantage (MA) Questions or Additional Information

**For SHBP Member Services**

**Call 800-610-1863**

**Monday thru Friday 8:30 a.m. to 5:00 p.m. ET**

**and**

**Monday thru Friday, 8:15 a.m. to 6:15 p.m. ET during**

**Open Enrollment/Retiree Option Change Period**

**Or visit [www.dch.georgia.gov/shbp](http://www.dch.georgia.gov/shbp)**

# UnitedHealthcare Medicare Advantage (MA) Preferred Provider Organization (PPO) Customer Service

**Got Questions on the Medicare Advantage Plans?  
UnitedHealthcare is here to help!**

**Call toll-free 877-755-5343, TTY 711**

**8:00 a.m. to 8:00 p.m. local time, 7 days a week**

# State Health Benefit Plan (SHBP)

# Thank You!

# Important Information

<sup>1</sup>The Products and services described above are neither offered nor guaranteed under UnitedHealthcare's contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the UnitedHealthcare grievance process.

<sup>2</sup>Drugs and prices may vary between pharmacies and are subject to change during the Plan Year. Prices are based on quantity filled at the pharmacy. Quantities may be limited by pharmacy based on their dispensing policy or by the plan based on Quantity Limit requirements; if prescription is in excess of a limit, co-payment amounts may be higher. Other pharmacies are available in UnitedHealthcare's network. Members may use pharmacy in the network, but may not receive Pharmacy Saver pricing. Pharmacies participating in the Pharmacy Saver program may not be available in all areas.

You must continue to pay your Medicare Part B premium.

Solutions for Caregivers assists in coordinating community and in-home resources. The final decision about your care arrangements must be made by you. In addition, the quality of a particular provider must be solely determined and monitored by you. Information provided to you about a particular provider does not imply and is in no way an endorsement of that particular provider by Solutions for Caregivers. The information on and the selection of a particular provider has been supplied by the provider and is subject to change without written consent of Solutions for Caregivers.

Consult a health care professional before beginning any exercise program. Availability of the SilverSneakers program varies by plan/market. Refer to your Evidence of Coverage for more details. SilverSneakers® is a registered trademark of Healthways, Inc. © 2014 Healthways, Inc.

The benefit information provided is a brief summary, not a complete description of benefits. For more information, contact the plan. Limitations, co-payments and restrictions may apply. Benefits, formulary, pharmacy network, provider network, premium and/or co-payments/co-insurance may change each plan/benefit year.

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