2020



City of Southfield

Retiree Benefit Review Meeting (Medicare)

Welcome!

Agenda

- What's Staying the Same
- What's New
 - Medical Coverage Comparison
 - Rx Coverage Comparison
 - Health Advocate
 - Financial Hardship Program
- What to Expect Next
- Questions

What's Staying the Same

- Carriers Aren't Changing
 - BCBSM/Humana
 - HAP
- Networks Will Remain The Same
- Drug Formulary Will Remain The Same
- No New BCBSM ID Cards
 - Keep Using Your Cards After Jan. 1st
- Humana Will Issue New ID Cards
- HAP Will Issue New ID Cards

Medical Comparison (BCBSM)

	BCBSM Medicare Advantage	BCBSM Medicare Advantage
	CURRENT Plan	NEW Plan
Deductible	\$0	\$250
Coinsurance	No coinsurance	98%/2%
Annual Coinsurance Maximum	None	\$500
Preventive Service	Covered 100%	Covered 100%
Office Visit	\$10 copay	\$10 copay
Chiropractic Visit	\$10 copay	\$10 copay
Specialist Visit	\$10 copay	\$10 copay
Urgent Care Visit	\$10 copay	\$10 copay
ER Visit	\$50 copay	\$50 copay
Ambulance	Covered 100%	98%/2% after deductible

Medical Comparison (BCBSM)

	BCBSM Medicare Advantage	BCBSM Medicare Advantage
	CURRENT Plan	NEW Plan
Inpatient Facility Services	Covered 100%	98%/2% after deductible
Outpatient Facility Services	Covered 100%	98%/2% after deductible
Home Health Care	Covered 100%	Covered 100%
Surgical Services	Covered 100%	98%/2% after deductible
Outpatient Physical, Speech & Occupational Therapy	Covered 100%	98%/2% after deductible
Diagnostic Tests & X-rays	Covered 100%	98%/2% after deductible
Durable Medical Equipment	Covered 100%	98%/2% after deductible
Prosthetics & Orthotics	Covered 100%	98%/2% after deductible
Private Duty Nursing	50%/50%	50%/50% (deductible does not apply)
Skilled Nursing	Covered 100%	98%/2% after deductible

Prescription Drug Comparison (Humana)

	Humana CURRENT Plan	Humana NEW Plan
Generic Copay	\$2, \$3, \$5 or \$10 Copay	\$5 Copay
Preferred Brand Copay	\$2, \$3, \$5, \$10 or \$20 Copay	\$30 Copay
Non-Preferred Brand Copay	\$2, \$3, \$5, \$10 or \$20 Copay	\$60 Copay

Medical Comparison (HAP)

	HAP Medicare Advantage	HAP Medicare Advantage
	CURRENT Plan	NEW Plan
Deductible	\$0	\$250
Coinsurance	No coinsurance	98%/2%
Annual Coinsurance Maximum	None	\$500
Preventive Service	Covered 100%	Covered 100%
Office Visit	Covered 100%	\$10 copay
Chiropractic Visit	Covered 100%	\$10 copay
Specialist Visit	Covered 100%	\$10 copay
Urgent Care Visit	Covered 100%	\$10 copay
ER Visit	Covered 100%	\$50 copay
Ambulance	Covered 100%	98%/2% after deductible

Medical Comparison (HAP)

	HAP Medicare Advantage	HAP Medicare Advantage
	CURRENT Plan	NEW Plan
Inpatient Facility Services	Covered 100%	98%/2% after deductible
Outpatient Facility Services	Covered 100%	98%/2% after deductible
Home Health Care	Covered 100%	98%/2% after deductible
Surgical Services	Covered 100%	98%/2% after deductible
Outpatient Physical, Speech & Occupational Therapy	Covered 100%	98%/2% after deductible
Diagnostic Tests & X-rays	Covered 100%	98%/2% after deductible
Durable Medical Equipment	Covered 100%	98%/2% after deductible
Prosthetics & Orthotics	Covered 100%	98%/2% after deductible
Private Duty Nursing	Covered 100%	98%/2% after deductible
Skilled Nursing	Covered 100%	98%/2% after deductible

Prescription Drug Comparison (HAP)

	HAP CURRENT Plan	HAP NEW Plan
Generic Copay	\$2, \$5 or \$10	\$5
Preferred Brand Copay	\$2, \$10, \$20 or \$35	\$30
Non-Preferred Brand Copay	\$2, \$10, \$20 or \$40	\$45

Health Advocate

- Retiree Concierge Service
- Personal Health Advocate Assists with:
 - Understanding Your Coverage
 - Finding a Doctor
 - Fee Negotiation
 - Care Coordination
 - Claim and Billing Resolution
 - Appeals Advice
- Program Starts January 1st

Financial Hardship Program

- Only Retirees Experiencing Plan Change on January 1, 2021 are Eligible
- Eligible if Annual Income is Below 2x
 Federal Poverty Level (FPL)
 - \$25,520 for 2020
- To Qualify, Send in Copy of 2019 Federal Tax Return Showing Household Income
- \$500 Benefit Payment
 - Benefit is Taxable

What to Expect Next

- Each Enrolled Member Covered By Medicare Will Receive A Mailing From BCBSM & Humana or HAP Containing
 - Medical Benefit Summary
 - Additional Coverage Information
 - New ID Card (Humana or HAP Only)
- More Detailed Info on Health Advocate
- All Plan Changes Go Into Effect Jan. 1st
- Health Advocate Program Starts Jan. 1st



Questions