

2018 GSRA Annual Meeting, Oct 15-16, Macon, [Register](#)

## 2019 SHBP– Open Enrollment and Retiree Option Change Period (10/15/18 -11/2/18)

**SHBP RETIREE Meetings Schedule & DECISION GUIDE have been mailed to You.** The SHBP Educational sessions begin on Monday, September 24, 2018 and end on October 11, 2018. If you need assistance from the representatives, review the schedule and attend one of the meetings to discuss the benefits. In the package from SHBP, the Medicare Option plans' premium rates were not included. See the information in this article for the rates for persons who are enrolled in Medicare Part B. All Medicare Advantage rates can be obtained by [clicking here](#).

As noted in the GSRA August newsletter, the Department of Community Health Commissioner, Frank Berry, announced that there will be no changes in the vendors (except that Blue Cross Blue Shield Georgia will be known as Anthem) offering benefits to members of the State Health Benefit Plan in CY 2019. DCH staff also announced that there would be no increases in the active or underage 65 retirees' plan options, deductibles, out-of-pocket maximums, prescription copays, or other plan provisions, such as the HRA amounts and wellness credits. The only benefit change is in the area of Mental Health Parity: the age for autism treatment will be removed and the Residential Treatment Centers and Methadone clinics will be covered.

The plan options and benefit provisions for the Medicare Advantage options will not change for CY 2019. The copays and maximum out-of-pocket remain unchanged in CY 2019. Anthem (BlueCross BlueShield) and

UnitedHealthcare will continue to offer the Medicare Advantage Standard and Premium options in CY 2019.

The SHBP financial status as reflected in the budget information provided to the Board of Community Health allows no change (increases or decrease) in payroll premiums for CY 2019 for all options, except the Medicare Advantage. The changes in the Medicare Advantage premiums that was first announced on August 9<sup>th</sup> was to reduce the retiree only with Part B Medicare BCBSGA (Anthem) premiums to "zero" for the Standard Option and to **increase the BCBSGA (Anthem) Premium Option premium by \$63.71 to \$219.52.** In this first announcement, the UHC premium for the Standard option was to be increased from \$25.38 to \$107.09 and no increase for the UHC Premium option. **At a September 7<sup>th</sup> "called" meeting, the Board REVERSED the decision to increase the UHC Standard option premium and, therefore, left the individual premium at \$25.38 for CY 2019.**

The following charts provide snapshots of the major financial components (deductibles, out-of-pocket maximum and monthly premium deductions) of each option. The Medicare Advantage options charts show the Maximum Out-of-Pocket and medical copayments (but not prescription copays) along with the monthly premiums for persons having Part B Medicare and enrolled in one of the MA options. Refer to the rates on the [DCH website](#) for rates if you have "split" coverage. NOTE: The rates shown in the chart are for the basic subsidy policy adopted by the Board of Community Health—not the subsidy policy by years of state service.

Anthem (BCBSGA) Options <sup>1</sup>						
	Bronze Plan		Silver Plan		Gold Plan	
	In-Network	Out-Network	In-Network	Out-Network	In-Network	Out-Network
<b>Deductible</b>						
<b>You</b>	\$ 2,500	\$ 5,000	\$ 2,000	\$ 4,000	\$1,500	\$ 3,000
<b>You &amp; Children/Spouse</b>	3,750	7,500	3,000	6,000	2,250	4,500
<b>You + Family</b>	5,000	10,000	4,000	8,000	3,000	6,000
<b>Medical OOPM<sup>2</sup></b>						
<b>You</b>	\$ 6,000	\$12,000	\$ 5,000	\$10,000	\$4,000	\$ 8,000
<b>You &amp; Children/Spouse</b>	9,000	18,000	7,500	15,000	6,000	12,000
<b>You + Family</b>	12,000	24,000	10,000	20,000	8,000	16,000
<b>Coinsurance (Plan Pays)</b>						
	75%	60%	80%	60%	85%	60%
<b>HRA</b>						
<b>You</b>	\$100		\$200		\$400	
<b>You &amp; Children/Spouse</b>	150		300		600	
<b>You + Family</b>	200		400		800	
<b>Monthly Premiums (Payroll/Retirement Deductions)</b>						
<b>You</b>	\$ 72.45		\$110.89		\$ 168.73	
<b>You &amp; Children</b>	143.46		208.80		307.13	
<b>You &amp; Spouse</b>	215.91		296.62		418.09	
<b>You + Family</b>	286.92		394.54		556.50	

HMO, HDHP, & Kaiser				
	Anthem/UHC HMO	UHC HDHP		Kaiser HMO
	In-Network	In-Network	Out-Network	In-Network
<b>Deductible</b>				
<b>You</b>	\$ 1,300	\$3,500	\$ 7,000	None
<b>You &amp; Children/Spouse</b>	1,950	7,000	14,000	None
<b>You + Family</b>	2,600	7,000	14,000	None
<b>Medical OOPM<sup>3</sup></b>				
<b>You</b>	\$ 4,000	\$ 6,450	\$12,900	\$ 6,350

<sup>1</sup> Information is taken from printed documents available from DCH—if any discrepancy, the DCH information is official.

<sup>2</sup> OOPM includes deductible, your coinsurance payments, and prescription drug copays.

<sup>3</sup> OOPM includes deductible, your coinsurance payments, and prescription drug copays.

You & Children/Spouse	6,500	12,900	25,800	12,700
You + Family	9,000	12,900	25,800	12,700
<i>Coinsurance (Plan Pays)</i>	80%	70%	50%	100% (Various copays for medical services to accumulate into Medical OOPM)
<b>Monthly Premiums (Payroll/Retirement Deductions)</b>				
	<b>Anthem HMO</b>	<b>UHC HMO</b>	<b>UHC HDHP</b>	<b>Kaiser HMO</b>
You	\$135.65	\$172.56	\$ 58.03	\$142.71
You & Children	250.90	313.65	118.94	262.59
You & Spouse	348.63	426.14	185.62	362.49
You + Family	463.89	567.22	246.54	482.37

### MEDICARE ADVANTAGE (Anthem and UnitedHealthcare)

	Standard Option	Premium Option	Your Premium CY 2019	
<b>Deductible</b>	<b>None</b>	<b>None</b>	<b>Standard Option</b>	
<b>Out-of-Pocket Maximum (DOES NOT INCLUDE PRESCRIPTION COPAYS)</b>	<b>\$3,500</b>	<b>\$2,500</b>	You	Anthem UHC \$ .00 \$25.38
<b>Copay (Primary Care)</b>	\$25 per visit	\$15 per visit	You & Spouse	.00 50.76
<b>Copay (Specialty Care)</b>	\$30 per visit	\$25 per visit		
<b>Complex Radiology or radiation Therapy in Doctor Office</b>	\$35 copay per treatment	\$35 copay per treatment		<b>Premium Option</b>
<b>Inpatient Hospital</b>	20% co-insurance	20% co-insurance		
<b>Outpatient Hospital Services</b>	\$95 copay Observation Room	\$50 co-pay Observation Room		<b>Anthem UHC</b>
<b>Diagnostic Procedures regardless of where performed</b>	\$95 copay	\$50 copay	You	\$ 219.52 \$128.22
			You & Spouse	439.04 256.44

### **Making a Decision<sup>4</sup> – Under Age 65 SHBP Members<sup>5</sup>**

Deciding the insurance option for 2019 for an under age 65 SHBP member requires a substantial amount of study and

analysis about provider networks and costs. The first thing that you need to determine is “Am I satisfied with the provider network offered by the option or am I willing to change providers” under the Option. Some points that you might consider are:

<sup>4</sup> Reprinted from the 2017 September Newsletter with appropriate changes.

<sup>5</sup> Premium rates are provided by DCH with the Decision Guide.

- All options provide for emergency treatment from an out-of-network provider.
- All of Anthem (BCBSGA) options use the same network, the UnitedHealthcare HMO and HDHP options use the same network, and the Kaiser HMO provides care through a network of facilities.
- **Anthem (BCBSGA's) Bronze, Silver, and Gold** options and the UHC High Deductible Health Plan option have "out-of-network" benefits (if desired), although all of the costs for out-of-network services are treated separately for the purpose of deductibles, copays, and maximum out-of-pocket (OOPM).
- **Anthem (BCBSGA) and UHC options for HMO** do not have an out-of-network benefit; therefore, if you are not satisfied with the network and are not willing to use another provider in the network, the entire cost for that service (except for emergency) is out-of-pocket and not covered by the plan.
- **The Kaiser option** does not have an "out-of-network" benefit; therefore, any services (unless emergency) outside the KP providers are not covered.
- The Kaiser option requires you to live or work in one of the 27 counties listed (page 24) in the Guide.

DCH states that the Enrollment Portal ([www.mySHBPga.adp.com](http://www.mySHBPga.adp.com)) will provide Decision Support Tools to help you compare each benefit option. When

analyzing your cost for each option, the bottom line is that you will pay about the same amount when you add the premiums and out-of-pocket expense in any option you choose **if you have extensive medical needs**. If you pay a lower premium, you will pay higher out-of-pocket amounts when you receive medical services or if you pay a higher premium, you will pay lower out-of-pocket when you receive medical services. The question comes down to what medical expenses do you expect and would you rather pay a higher premium on a regular basis, or pay lower premiums that may require a higher out-of-pocket amount when you receive medical services. Some points that you may want to consider are:

- When analyzing the HRA options, don't forget to subtract the HRA credits that reduce the deductible and the OOPM. The HRA credits can be used for first dollar medical expense.
- All Anthem and UHC options provide for well-being (by different names) incentive credits when you comply with the requirements of the wellness programs. The amount of credits vary by type of incentive and may vary by how you can use.

Calculate your medical expenses for each year during the last two to three years and your expected or "at-risk" cost for the upcoming year. Determine how best to meet those needs based on the premiums, deductibles, copayments, and coinsurance.

### **Making a Coverage Decision for CY 2019 – Retirees Over Age 65**

The option choices for retirees age 65+ are limited to one of the Medicare Advantage (MA) options with providers UHC or Anthem--unless you can afford one of the unsubsidized monthly rates that are \$589.34 up to \$1,711.27. "Making a Coverage Decision" for CY 2019, therefore, assumes that your choice is limited to one of the MA options with one of the vendors (Anthem or UHC). DCH has provided you with the benefit summaries for the Standard and Premium options on page 17 of the Decision Guide. Review the member premiums for 2019 that are shown in this article and available on the DCH website. If you and your spouse are covered and both have Part B Medicare, the rates reflected in this article are doubled. The Anthem premium for the Standard Option has been reduced to "zero" and the premium for the Premium option has been

increased to \$219.52. UHC premiums for the Standard and Premium options remain at the 2018 level.

Making your decision for 2019 has basically two components—service and cost. Service has two components—provider networks and claims processing. Ask yourself the following questions.

**Is there any difference in Provider Networks between Anthem and UHC?** Although there are differences in the provider networks, these differences do not affect you because Medicare requires the vendor to pay claims at the "network rate" if the provider accepts Medicare even if the provider is not in the specific vendor network.

**Is there any difference in claims processing or customer service between Anthem and UHC?** Both vendors (Anthem and UHC) pay claims according to Medicare guidelines. Although there may be some differences in interpretation, there should not be substantial

differences. You should decide which firm best responds to your issues when you need help or information.

**Is there a difference in the providers used by each vendor between the Standard and Premium Options?**

No, each vendor uses the same network (including any provider accepting Medicare) for both Standard and Premium options. The only difference is the co-pay for medical visits.

**Is there a difference in the copay for prescription drugs for the Standard and Premium options?**

No, the copays for prescription drugs are the same for both the Standard and Premium options. **You should, however, review the Prescription Drug Formulary** very carefully when you receive a printed copy to determine if any of your drugs have changed “tiers”.

**What is the maximum out-of-pocket cost that I will pay for each MA option?** The annual maximum cost to you (excluding drugs) is \$3,500 for the Standard and \$2,500 for the Premium option – a difference of \$1,000 annually.

**What is the difference in premiums for one over age 65 Individual for Medicare Advantage Standard and Premium options?**

UHC Calculation – Annual Premium			
Standard Premium	12 months	X \$25.38	\$ 304.56
		X \$128.22	<u>1,538.64</u>
	Annual	Difference	\$1,234.08

Anthem Calculation – Annual Premium			
Standard Premium	12 months	X \$0.00	\$ 00.00
		X 219.52	<u>2,634.24</u>
	Annual	Difference	\$2,634.24

The above calculations show that if you choose the Premium Option over the Standard Option, you will pay an additional premium of \$1,234.08 for UHC as the vendor or an additional premium of \$2,634.24 for Anthem as a vendor during the year. This additional premium will reduce your out-of-pocket maximum by \$1,000 with either vendor. Therefore, you will pay more in premiums during the year for either vendor than you can receive in the reduced out-of-pocket maximum of \$1,000. Only you can decide the best option for you and your family. When you have decided, see the section in this article or on page 13 of the Decision Guide for how to make changes in your SHBP coverage for CY 2019.

**Processing your Decision**

**If you are satisfied with your current SHBP option/vendor:** you do not have to process any action. The DCH will roll your current 2018 coverage to 2019 and notify your employing department or retirement system to make the new deduction beginning with the payment or benefit in December 2018.

If you want to continue with your current option and vendor, you should--at minimum--verify that the coverage information on the SHBP website ([www.mySHBPga.adp.com](http://www.mySHBPga.adp.com)) is correct. Verification may require creating an account, or it may require a new password for the account—especially if you have not “signed-in” to your account since 2018.

**If you want to make a change in option or vendor ...**

You must process the change by “logging-in” to the website ([www.mySHBPga.adp.com](http://www.mySHBPga.adp.com)) or by calling the SHBP Member Services (800-610-1863). A step by step guideline is printed in the Decision Guide. Make sure

that you respond to all of the questions and supply all information required of any dependent on your coverage.

DCH’s **Annuitant Subsidy Policy** can be reviewed on page 10 of the SHBP Decision Guide.

**Caution: Medicare Advantage Members**

**YOU will, as an enrollee of a Medicare Advantage option, negatively affect YOUR coverage if YOU:**

- Discontinue paying the Medicare Part B premium;
- Enroll in a Medicare Supplement Plan
- Enroll in a non-SHBP MA plan
- Enroll in a Medicare Part D pharmacy plan.

Should you take any of the above actions, the MA coverage with SHBP will be terminated by Medicare and the SHBP will transfer you to the Anthem Bronze HRA plan. The premium with Anthem Bronze option will not be subsidized by the SHBP.



## Steve's View: We've Been on a SHBP Roller Coaster!

The State Health Benefit Plan open enrollment this year is kind of like the end of a roller coaster ride. Going back a few weeks, it was more like the exciting part of the ride, only retirees did not sign up for a roller coaster ride when it comes to health insurance. Many of you may have read a news article in the Atlanta paper which emphasized the stable insurance rates that would be offered this year. Good news for sure. But paying closer attention to the article, it was apparent that retirees enrolled in the Medicare Advantage Plan were facing an unpleasant surprise - or maybe two, just around the corner.

First, we learned from the Community Health Board meeting that the premium rate for one of the SHBP retiree options was a proposed triple-digit percentage increase. Ouch! Next, we learned that the other provider was proposing a rate of exactly \$0.00. Free insurance? Huh? Great! But wait, how many retirees ever heard the saying, "Ain't no such thing as a free lunch" or "You get what you pay for" - free insurance? Hmmm. Will the two providers be providing the same product? Why the huge difference in cost for the same product between the two providers?

But, the Atlanta paper had reported that the consumer advisory board that works with the DCH Board was "ecstatic" or some such adjective, over the new rates. "Ecstatic?" Retirees were left then to wonder, triple digit rate increase vs. free insurance? What am I missing?

Following along, it was later reported that a "called" (phone) DCH Board meeting" was being conducted to

review the situation, and the Board acted quickly to respond to the many questions or concerns expressed to DCH, including GSRA and many individual members and changed their earlier decision on rates that resulted in the huge increase by one of the providers and leaving one provider offering a "free" policy.

Retirees, dependents and beneficiaries want a reasonable level of certainty, both in quality and cost of health insurance. Drastic rate hikes or other adverse changes breed anxiety among retirees, who as a group, have enough stress in their lives and consume health care services at a higher rate than some other groups and thus are highly focused on health insurance issues. And, this group lives on a fixed income that is not extravagant. Retirees have to carefully manage their budgets to get by.

GSRA appreciates the willingness of DCH Commissioner Frank Berry and SHBP Division Director Jeff Rickman to attend the annual meeting in Macon on October 15. We appreciate the intervention that was made to save retirees from the increase that had been proposed and adopted earlier, before it was eventually reversed. Let's hope we all have an uneventful open enrollment and can look forward to continuing stability in the state's administration of retiree health benefits. GSRA has and will continue to advocate for quality and affordable retiree health benefits.

Steve

### AM Gov/Lt Gov Candidates Status

Gov/Dem Stacey Abrams – has a previous obligation, so will address us via video

Gov/Lib Ted Metz – has accepted

Gov/Rep Brian Kemp – waiting for response

Lt. Gov/Dem Sarah Riggs Amico – waiting for response

Lt. Gov/Rep Geoff Duncan – did not accept

### GSRA Day at the Capitol GSRA-GPHSA Legislative Reception

February 6, 2019

Capitol Hill

**Make plans to attend now!**

**Anthem** 

## Take a new look at an old friend

Choose an Anthem Medicare Advantage plan.



Anthem Blue Cross and Blue Shield is the trade name of Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. Independent licensee of the Blue Cross and Blue Shield Association. ANTHEM is a registered trademark of Anthem Insurance Companies, Inc.

Y0114\_18\_32445\_I 09/01/2017 74123GASENABS

## Endorsed Benefits

The Georgia State Retirees Association (GSRA) makes many member only benefits available to its members. GSRA endorses the following member benefits:

- Long Term Care / Home Health Care Policy
- Life Insurance
- Medical Air Services Association (MASA)
- Travel Discounts
- Car Rental Discounts
- Tax-Deferred Annuity
- Cancer Treatment Policy
- Medicare Supplement Insurance
- Identity Theft Protection
- Hotel Discounts
- Computer Discounts

Review your benefits at: [www.myAMBAbenefits.info/gsra](http://www.myAMBAbenefits.info/gsra) 



Benefits made available through:

**ASSOCIATION MEMBER BENEFITS ADVISORS**  
*Providing the Best-in-Class Benefits to Association Members*

**800.258.7041**

## YOU ARE OUR PRIORITY

OUR MEMBERS FORM THE FOUNDATION OF THE COMMUNITIES THEY SERVE.

Since 1920, we've guided ourselves on helping members build a solid financial foundation for their own families.

We're not salespeople, we're solutions people. That's why nobody can serve our members like we can.

APCU serves State and Federal workers, retirees and their families in Georgia. Visit APCU's exhibitor table at GSRA. For more information, visit [apcu.com](http://apcu.com), or call us at (404) 768-4125 or Toll-free at (800) 848-8431.



**APCU**  
 Atlanta Postal Credit Union  
 A Member of Services



**SERVING** U.S. Postal Service Employees • State & Federal Employees in GA • Retirees & Their Family Members

This credit union is federally insured by the National Credit Union Administration.

APCU partners with Members Wealth Management, a financial services program, to help our members with financial planning, investments, insurance, as well as retirement and estate planning strategies.

APCU has invited Shweta Ramani, a Managing Associate with Members Wealth Management, to offer a great workshop, "Money Talk 101," at GSRA. This seminar is designed to facilitate conversations around financial milestones for retirees.

Topics will include:

- ★ The importance of setting financial goals
- ★ Understanding your current financial position
- ★ Preparing for a successful retirement
- ★ Income tax considerations
- ★ What your loved ones need to know

## SHBP RETIREES, OUR ADVANTAGE IS YOUR SATISFACTION.



### Medicare Advantage Plans from UnitedHealthcare®

**UnitedHealthcare® Medicare Advantage plans achieve over 97% satisfaction\* with SHBP retirees.**

UnitedHealthcare continues to be a proud sponsor of the GSRA Annual Meeting for 2018.



\*2015 UnitedHealthcare Customer Experience Survey scores for Group Medicare Advantage plan members. 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.

IR\_SPLH0219 SPLH0219