

2020 SHBP Good News – Few Changes

The Board of Community Health met on August 8, 2019 and approved Commissioner Frank Berry’s recommendation to **retain the current State Health Benefit Plan (SHBP) benefits for CY 2020**. In addition, the **premiums** for active and under age 65 retirees **will not increase in CY 2020**. The Standard Option for the Medicare Advantage Plan for retirees over age 65 will **decrease** to \$20 for UnitedHealthcare (UHC) and **increase** to \$182.82 for Anthem. See the MA Chart on the next page. DCH also announced that no change will be made in the SHBP vendors (Anthem, UHC, Kaiser, CVS Caremark, and Sharecare) administering benefits for members of the SHBP in CY 2020.

Like the under age 65 benefits, the plan options and benefit provisions for the Medicare Advantage Plan will not change for CY 2020. The copays and maximum out-of-pockets remain unchanged in CY 2020. See the MA chart.

Premiums for retirees for combinations of persons under and over age 65 will be provided by DCH.

Open Enrollment will be the three-week period beginning on October 21, 2019, and ending on November 8, 2019. DCH anticipates mailing the Decision Guides and the schedule for informational meetings around October 1, 2019. Retiree meetings are planned to begin on September 23, 2019.

The following charts provide snapshots of the major financial components (deductibles, out-of-pocket maximum and monthly premiums) for 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. 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 ¹						
	Bronze Plan		Silver Plan		Gold Plan	
	In-Network	Out-Network	In-Network	Out-Network	In-Network	Out-Network
Deductible						
You	\$ 2,500	\$ 5,000	\$ 2,000	\$ 4,000	\$1,500	\$ 3,000
You & Children/Spouse	3,750	7,500	3,000	6,000	2,250	4,500
You + Family	5,000	10,000	4,000	8,000	3,000	6,000
Medical OOPM²						
You	\$ 6,000	\$12,000	\$ 5,000	\$10,000	\$4,000	\$ 8,000
You & Children/Spouse	9,000	18,000	7,500	15,000	6,000	12,000
You + Family	12,000	24,000	10,000	20,000	8,000	16,000
Coinsurance (Plan Pays)	75%	60%	80%	60%	85%	60%

¹ Information is taken from printed documents available from DCH—if there is any discrepancy, the DCH information is official.

² OOPM includes deductible, your coinsurance payments, and prescription drug copays.

HRA			
You	\$100	\$200	\$400
You & Children/Spouse	150	300	600
You + Family	200	400	800
Monthly Premiums (Payroll/Retirement Deductions)			
You	\$ 72.45	\$110.89	\$ 168.73
You & Children	143.46	208.80	307.13
You & Spouse	215.91	296.62	416.09
You + Family	286.92	394.54	556.50

HMO, HDHP, & Kaiser				
	Anthem/UHC HMO	UHC HDHP		Kaiser HMO
	In-Network	In-Network	Out-Network	In-Network
Deductible				
You	\$ 1,300	\$3,500	\$ 7,000	None
You & Children/Spouse	1,950	7,000	14,000	None
You + Family	2,600	7,000	14,000	None
Medical OOPM³				
You	\$ 4,000	\$ 6,450	\$12,900	\$ 6,350
You & Children/Spouse	6,000	12,900	25,800	12,700
You + Family	9,000	12,900	25,800	12,700
Coinsurance (Plan Pays)	80%	70%	50%	100% (Various copays for medical services to accumulate into Medical OOPM)
Monthly Premiums (Payroll/Retirement Deductions)				
	Anthem HMO	UHC HMO	UHC HDHP	Kaiser HMO
You	\$138.36	\$176.01	\$ 59.19	\$145.56
You & Children	255.92	319.92	121.32	267.84
You & Spouse	355.60	434.66	189.33	369.74
You + Family	473.17	578.56	251.47	492.02

MEDICARE ADVANTAGE (Anthem and UnitedHealth care)

	Standard Option	Premium Option	Your Premium CY 2020
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³ OOPM includes deductible, your coinsurance payments, and prescription drug copays (except that **drug copays are not included** in the OOPM for the Medicare Advantage Options).

<i>Deductible</i>	None	None	Standard Option		
			Anthem	UHC	
Out-of-Pocket Maximum (DOES NOT INCLUDE PRESCRIPTION COPAYS)	\$3,500	\$2,500	You	\$ 146.15	\$20.00
Copay (Primary Care)	\$25 per visit	\$15 per visit	You & Spouse	292.30	40.00
Copay (Specialty Care)	\$30 per visit	\$25 per visit			
Complex Radiology or radiation Therapy in Doctor Office	\$35 copay per treatment	\$35 copay per treatment		Premium Option	
Inpatient Hospital	20% co-insurance	20% co-insurance			
Outpatient Hospital Services	\$95 copay Observation Room	\$50 co-pay Observation Room		Anthem	UHC
Diagnostic Procedures regardless of where performed	\$95 copay	\$50 copay	You	\$ 182.82	\$128.22
			You & Spouse	365.64	256.44

Making a Decision⁴ – Under Age 65 SHBP Members

Deciding the medical insurance option for 2020 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.⁵ Some points that you might consider are:

- All options provide for emergency treatment from an out-of-network provider.
- Vendor networks differ; however all of Anthem options use the same network, the UHC HMO and HDHP options use the same network, and the Kaiser HMO provides care through a network of facilities.
- **Anthem 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 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 in the Decision Guide.

GSRA anticipates that again for CY 2020, the Enrollment Portal (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

⁴ Reprinted from the 2018 September Newsletter with appropriate changes.

⁵ Medical providers may decline continued network offerings at any time during the benefit year (CY 2020) although the vendors attempt to retain the contract with the provider.

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 Decision for CY 2020 – 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 \$633.50 up to \$1,737.87. "Making a Coverage Decision" for CY 2020, therefore, assumes that your choice is limited to one of the MA options with one of the vendors (Anthem or UHC). DCH will provide you with the benefit summaries for the Standard and Premium options in the Decision Guide. Review the member premiums for 2020 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 are double the single rate. The Anthem "single" premium for the Standard Option has been changed from "zero" to \$146.15. UHC "single" premium for the Standard option is reduced to \$20 and UHC "single" rate for the Premium option remains at the 2019 level of \$128.22.

Making your decision for 2020 has basically two components—service and cost. Service has two components—provider networks and claims processing. Asking yourself the following questions may help you in selection.

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 in the Medicare Advantage options. Medicare requires both vendors to pay claims at the "network rate" **if the provider accepts Medicare** when the provider is not in the specific vendor network. **NOTE:** A provider may decline to participate in Medicare or may decline to accept new Medicare patients.

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 the medical visit.

Is there a difference in the copay for prescription drugs in 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	12 months	X \$20.00	\$ 240.00
Premium		X \$128.22	<u>1,538.64</u>
	Annual	Difference	\$1,298.64

Anthem Calculation – Annual Premium			
Standard	12 months	X \$146.15	\$ 1,753.80
Premium		X 182.82	<u>2,193.84</u>
	Annual	Difference	\$ 440.04

The above calculations show that if you choose the Premium Option over the Standard Option, you will pay an additional premium of \$1,298.64 for UHC as the vendor or an additional premium of \$440.04 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 (\$1,298.64) than the reduction of your out-of-pocket maximum (\$1,000) during the year for UHC when enrolled in the Premium option. However, you will pay an additional \$440.04 in

premiums for Anthem and reduce your out-of-pocket maximum by \$559.96 (\$1,000 less \$440.04) when enrolling in the Anthem Premium option. Only you can decide the best option for you and your family. When you have decided, see the section in your Decision Guide for “How to Make changes in your SHBP coverage for CY 2020.”

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.



Jim’s View: Lazy Days of Summer? Not for GSRA!

August is normally thought of as the dog days of summer- when it is too hot and humid to want to do anything but

stay inside with our air conditioners going full blast. Well, August has been anything but lazy for your GSRA Board Members.

Representatives of GSRA met with newly appointed ERS Board member, State Treasurer Lynn Riley. Our meeting was a great opportunity to introduce GSRA to Ms. Riley and to educate her on the issues of importance to retired and active members of the ERS. We also met with DOAS Commissioner Atwood, who also serves the ERS Board.

We met with Commissioner of the Department of Community Health Frank Berry to discuss the impact of Governor Kemp’s decision to give state agencies a break by not requiring them to make their required June payments to the State Health Benefit Plan (SHBP) as well as other issues relating to the SHBP. Commissioner Berry assured us that the SHBP was in great shape and that the one month of non-payments by state agencies would not adversely impact the ability of the plan to pay all SHBP claims and commitments or result in an increase in premiums.

A question that I have been getting lately is “How come there is not an option available for a Kaiser Medicare Advantage Plan (MA)”. According to Commissioner Berry, after reviewing the previous Request for Proposals (RFP) sent out by the State, Kaiser decided not to submit a proposal for a Medicare advantage plan. As indicated by Commissioner Berry, a new RFP for the SHBP will be sent out in the spring of 2020. Hopefully, Kaiser will decide to submit a proposal for a MA plan in response to the new RFP. We expressed to Commissioner Berry that GSRA would like to have input into the drafting of the RFP. Commissioner Berry agreed to work with us as his team begins drafting the RFP. The RFP is important because it sets out the framework for the insurance companies to draft their insurance plans.

I had the opportunity to meet with Governor Kemp’s Executive Counsel to discuss the restoration of the COLA and GSRA’s plan on how to fund it. We have meetings set up in the coming weeks with the Chairpersons of the House and Senate Appropriation Committees.

I have also had the pleasure of addressing the Columbus and Rome Chapters’ meetings. It is great to meet and talk with so many of my fellow state retirees. Your support of our local chapters is very important to the success of

GSRA's efforts to advocate on your behalf. I also spoke at the annual convention of the Police Officers Association of Georgia (POAG). POAG consists, in part, of Georgia State Patrol, Georgia Bureau of Investigation (GBI), and Department of Natural Resources Law Enforcement personnel.

The first ERS Deliverable of the Memorandum of Understanding (MOU) with ERS is an email to all non-GSRA member's email addresses in ERS's database. This email will introduce the recipients to GSRA and contain information on how they can join GSRA. This email should

be delivered on August 27 and 28th. We are excited to see what impact this email will have on attracting new members. My thanks to all of the GSRA members who worked very hard to achieve this MOU.

Thanks to the GSRA members who attended the August ERS Board meeting. We again packed the board room. Your support of GSRA is very much needed and appreciated. **YOUR SUPPORT DOES MAKE A DIFFERENCE!!!**

Jim

Local Chapter News

SW Georgia

On July 24th, members of the SW Georgia local chapter met at the Golden Corral restaurant in Albany. GSRA President Jim Sommerville updated the membership on current GSRA priorities and goals. Discussion topics included COLA restoration, GSRA's meetings with Governor Kemp, ERS Board appointment, GSRA/DCH meeting regarding health insurance, and the GSRA/ERS agreement to provide the association the contact info of state employee retirees.

SW GA Membership Chair Frances Barry, GSRA President Jim Sommerville and SW GA President Bob Pollock are pictured at left.



2019 GSRA Annual Meeting October 7 & 8 – Unicoi State Park Lodge, Helen, GA Join us in Helen for the 2019 GSRA Annual Meeting!


Featured speakers include:

- Mr. Dick Yarbrough – Well-known syndicated newspaper columnist
- Mr. Frank Berry – Commissioner of the Georgia Department of Community Health;
- Mr. Jeff Rickman – Executive Director of the State Health Benefit Plan; and
- Mr. Jim Potvin – Executive Director of the Georgia Employees Retirement System.

Unicoi Restaurant is offering ALL GSRA ATTENDEES special pricing on the Breakfast, Lunch & Dinner Buffets. Prices include unlimited trips to the buffet, coffee and choice of either Juice, Milk, Soda or Tea. Breakfast Buffet \$15.50; Lunch Buffet \$17.00; Dinner Buffet \$22.00. Please show 2019 conference id/lanyard at each meal. Note: an a la carte menu is available for some meals.



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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 Shawn Roman, 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

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