

2014 Annual Meeting a Great Success!
Complete coverage coming in the November Newsletter.

SHBP Decisions – October 27-November 14, 2014

In the GSRA September newsletter, comparisons of the benefits offered and the premiums required were provided. Since that time the Department of Community Health has released several items. The releases are:

SHBP Education Meetings – Schedules have been mailed to Retirees

- For Active and under age 65 retirees – between September 23 and October 9, 2014-**COMPLETE**
- For retirees age 65 and over with Medicare Advantage options – between October 3 and November 5, 2014
- Benefit Fairs are available – primarily for active SHBP members

Decision Guides – CY 2015 ([DCH website](#))

Decision Guides for active SHBP members and for retired SHBP members have been posted to the DCH website. A copy of the Decision Guide for retirees has been mailed to each retiree’s physical address on file with the SHBP.

What Options Do I have?

Options offered to active and under age 65 retired members of the SHBP have been expanded for CY 2015 to include HMO options and a High Deductible Health Plan (HDHP). Blue Cross Blue Shield of Georgia declined to offer the Medicare Advantage options for retired members who are age 65+ for CY 2015; therefore, the **only vendor offering to retirees over age 65** at a reasonable rate is UnitedHealthcare. All options are shown in the Table by insurance vendor—with the HRA including the Bronze, Silver, and Gold options that were offered in CY 2014.

CY 2015 Options			
HRA	HMOs	HDHP	MAP
BCBSGA	BCBSGA	UHC	UHC
	UHC		
	Kaiser		

If you are under age 65 and choose any BCBSGA option or any UHC option (except MAP), Express Scripts will continue to administer the prescription drug program and Healthways will continue to administer the wellness

benefits. Kaiser will administer the prescription drug program and wellness benefits for the Kaiser HMO; UHC will administer the prescription drug benefits for the UHC Medicare Advantage options.

What do You Need to Do?

The Decision Guides provide extensive information for 2015, and you should study the Guide that is applicable to you. Pay particular attention to any indication of ACTION

ALERT, IMPORTANT NOTE, CAUTION, etc. Some of these alerts are restated in the following “boxes.”

What Happens to Your Coverage If You Do Nothing?

- If Retired with Medicare Advantage, your coverage will be automatically changed to UHC in the option (Standard or Premium) you have in 2014.
- If you are an Active or Retired member who is under age 65, your coverage will remain in the 2014 option with BCBSGA, but subject to deductibles, etc. unless you process a change.

What Happens to HRA Credits if I Change From one of the HRA options to the HMO OR MAP

- If you change to an HMO option from the HRA options and you still have HRA credits from previous years, you will lose the HRA credits.
- If you turn 65 during 2015, have HRA credits of a least \$100, and you enroll in MAP, a special account with the HRA credit balance will be established.

What If I Discontinue SHBP Coverage?

- If still working and plan to work until next Open Enrollment, you will again have opportunity to enroll in SHBP coverage.
- If you are retired and you discontinue coverage, you will not be allowed to re-enroll at a later date. Read Page 5 and 11 of the Retiree Decision Guide about issues you need to consider about retiree coverage.

Making a Coverage Decision for CY 2015 – Retirees Over age 65

Making your decision for 2015 is a matter of finances. The provider network for the Standard and Premium options is the same. In addition, you have the ability to use any provider that accepts Medicare, although the provider can choose not to accept the MAP coverage. As a general rule, providers request insurance information before treating you and will inform you if they will not accept the UHC MAP coverage.

In addition, the copays for prescription drugs (not included in the medical OOPM) is the same under either option. Although there are some differences in medical copays, the bottom line is that the Out-of-Pocket Maximum for medical expenses under the Premium is \$1,000 less (\$3,500 less \$2,500) than the Standard Option, BUT your deduction for the Premium Option is \$754 (annually) more than the deduction for the Standard option. Your decision comes down to whether you want to pay the lower premium and hope that you will not have medical expenses greater than the \$2,500 or pay the higher premium so that you will

not have medical expense risk for more than \$2,500 OOPM during the year.

A word of caution: since prescription coverage under MAP is managed by UHC’s contractor (not Express Scripts), **if you have special approvals for medication quantities or “step therapy” or any treatment plan that requires special approval, you should verify how that special approval or treatment plan will be handled on and after January 1, 2015.** Specifically, you should **contact UHC BEFORE January 1st** to identify what is required for continuation after January 1st.

MAP benefits are the same as in 2014. Cost comparisons for the major benefit categories for the Standard and Premium options are shown in Table A. Although your insurance deduction for the Premium option is slightly higher in 2015 than in 2014, the insurance deduction for the Standard option as shown in Table B has not increased in CY 2015.

Medicare Advantage Options (UnitedHealthcare) Table A		
	MA PPO - Standard	MA PPO – Premium
Covered Services	You Pay	You Pay
Deductibles	\$0	\$0
Out-of-Pocket Maximum Per Member	\$3,500 per member	\$2,500 per member
Physicians' Services	You Pay	You Pay
Primary Care Physician or Specialist Office or Clinic Visits Treatment of illness or injury	PCP—\$25 per office visit co-payment; SPC—\$30 per office visit co-payment	PCP—\$15 per office visit co-payment; SPC—\$25 per office visit co-payment
Complex Radiology Services and Radiation Therapy Received in a Doctor's Office (Doctor's office visit co-pay will apply)	\$35 co-payment	\$35 co-payment
Hospital Services	You Pay	You Pay
Inpatient Hospital Services	20% co-insurance	20% co-insurance
Outpatient Hospital Services (includes observation, medical and surgical care)	\$95 co-payment Observation Room \$25 co-payment PCP \$30 co-payment SPC	\$50 co-payment Observation Room \$15 co-payment PCP \$25 co-payment SPC
Diagnostic Procedures and Testing Services (When the service is performed at a hospital, outpatient facility or a free-standing imaging or diagnostic center) ³	\$95 co-payment	\$50 co-payment
Pharmacy	You Pay	You Pay
Select Generic Co-payment	\$0 retail or mail order	\$0 retail or mail order
Tier 1 Co-payment	\$15 retail—31 day supply; \$37.50 mail order—90-day supply	\$15 retail—31 day supply; \$37.50 mail order—90-day supply
Tier 2 Co-payment	\$45 retail—31 day supply; \$112.50 mail order—90-day supply	\$45 retail—31 day supply; \$112.50 mail order—90-day supply
Tier 3 Co-payment	\$85 retail—31 day supply; \$212.50 mail order—90-day supply	\$85 retail—31 day supply; \$212.50 mail order—90-day supply
Tier 4 Co-payment	\$85 retail—31 day supply; \$212.50 mail order—90-day supply	\$85 retail—31 day supply; \$212.50 mail order—90-day supply

As stated earlier, your Medicare Advantage option will be automatically transferred from BCBSGA to UHC effective January 1, 2015. If you are satisfied with the option (Standard or Premium) that you have in 2014, you are not required to complete a change through the computer portal or by calling—unless you want to get confirmation of your coverage. Your choice is basically limited to the Standard and Premium MAP with UHC. If you want to

make a change or just simply verify that your record reflects the same option that you now have but with UHC, pages 6 and 7 of the Retiree Decision Guide outlines the process for changing or confirming your option. If you or your spouse is under 65 and you are 65+ or vice versa, you will be allowed for enroll the under 65 person in a BCBSGA option and the 65+ individual in UHC.

MEDICARE ADVANTAGE PLAN (MAP)							Table B
Coverage Tier	2014		2015				
	BCBS		UHC		Premium % Increase		
	Standard	Premium	Standard	Premium	Standard	Premium	
You	25.38	85.14	25.38	88.22	0%	3.6%	
You + Spouse	50.76	170.28	50.76	176.44	0%	3.6%	

Making a Decision – Under Age 65 SHBP Members

Making a decision for 2015 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:

- All of Blue Cross Blue Shield 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.
- 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 OOPM.
- 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 choice in the network, the entire cost for that service is out-of-pocket and not covered by the plan.

The Decision Guides provide a comparison of your out-of-pocket cost for each benefit category (pages 21-30 of the Retiree Decision Guide or pages 15-24 of the Active Decision Guide). When analyzing your cost for each option, the bottom line is that you will pay about the same amount in 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:

- Each SHBP option has an actuarial value (AV) based on coverage of essential benefits and out-of-pocket cost. That means that the AV represents the percentage of medical costs paid by plan for a statistical group of members (generally defined by the federal government or actuarial firm). DCH states that the AVs for the 2015 SHBP options are: (a) HRA Bronze = 68%, (b) HRA Silver = 73%, (c) HRA Gold = 79%, (d) Both HMO options = 74%, (e) HDHP = 60%, and (f) Kaiser = 88%.
- When analyzing the HRA options, don’t forget to subtract the HRA credits (1st page of the comparison) that reduce the deductible and the OOPM. The HRA credits can be used for first dollar medical expense.
- All BCBSGA and UHC options (except the UHC MAP) provide for well-being incentive credits when you comply with the requirements of the Wellness program. These credits (which are dollars) are 480 per year for the member and 480 per year for the spouse (if covered) and can also reduce your out-of-pocket cost – but one must comply with the wellness requirements before credits are awarded.
- UHC shows on the UHC website that the company will award an extra 240 well-being incentive credits for members who are enrolled in the UHC HMO or UHC HDHP options. Please review the statements in the Decision Guide that the member in the HDHP must incur a portion of the deductible prior to authorizing the use of any incentive award.
- An improved benefit for 2015 is that the prescription drug copays are combined with medical for the purpose of out-of-pocket maximum; however, you

should verify with the SHBP that all copays will be included in the OOPM. 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 (Table C), deductibles, copayments, and coinsurance, and process your change (if any) in option according to instructions provided by DCH.

Premiums – CY 2015 – Under age 65 Members							
							Table C
Coverage Tier	Bronze	Silver	Gold	BCBS HMO	UHC HMO	Kaiser HMO	HDHP
You	66.28	108.64	166.08	130.74	181.32	145.78	53.02
You + Children	130.74	202.74	300.38	240.88	326.86	266.44	108.74
You + Spouse	195.90	284.90	405.52	333.06	439.56	364.64	169.84
Family	260.40	379.00	539.84	443.18	584.80	485.30	225.56

Local Chapter News

Central Metro



Central Metro members at their recent meeting

The Central Metro Chapter met on September 11th, starting the meeting with a moment of silence for the victims and heroes of 9/11. The Osher Lifelong Learning Institute, affiliated with Emory University, gave a great presentation, providing a sampling of courses offered to seniors, including "Women of Valor", with Brandt Ross singing and playing the guitar and an Improv Group, led by Robert Drake, performing skits, including "Speed Dating." GSRA member Patricia Coates is a member of the Improv Group and GSRA member Margery Kellar assisted in one of the skits. All in all, it was the most entertaining event in our chapter's history! After the skits, the chapter elected officers for 2015: Sam Shepherd, President; Judith Byrnes, Vice-President; Barbara Landay, Secretary, Luther Lewis, Treasurer; and John Buffum, Membership Chairman.

Southern Crescent

The Southern Crescent chapter met on September 25th at the Fayette County Library. Guest speaker for the meeting was newly elected Senator Marty Harbin. This was Mr. Harbin's first public appearance since his election this summer.



Senator Marty Harbin addresses Southern Crescent meeting

West Georgia/Columbus Area

Members of the West GA/Columbus Area local chapter participated at the GPHSA Annual Meeting at Callaway

Gardens, soliciting members and sharing information. President Gloria Coker, Vice-President Maureen Humphries, Dean Crist, Mable Wilson and Kittye Jo Crockett all assisted with manning the GSRA booth during the conference.



President Gloria Coker, Vice-President Maureen Humphries, Dean Crist and Mable Wilson at the GPHSA Annual Meeting

Medicare Part B Premiums - 2015

The Department of Health & Human Services has just announced that the Medicare Part B monthly premium will remain at \$104.90 in 2015 for most persons. The announcement also included a statement that the high income subsidy will continue in 2015 at the same rates as in CY 2014.

Retirees – Continuing in Flexible Benefit Options

The Open Enrollment period for the Flexible Benefits Program is being held October 27 through November 14, 2014. You can find a summary of benefits at the Department of Administrative Services website. [Click here for the link.](#)

GSRA Volunteers Needed

GSRA needs YOU! If you have a little time to get involved in your association and have administrative skills with social media, proofing, writing articles, visiting with prospective members, visiting with State of Georgia departments or units, WHY NOT VOLUNTEER? It is fun and will keep you YOUNG. Just send an email to Help@mygsra.com and let us know your interests.

The **Employees Retirement System** asked **GSRA** to help publicize in the following two pages the tools to assist retirees in updating records and participating in the new discount—MORE—on-line tools.

Fall 2014

Employees' Retirement System
of Georgia

RETIREE

Fall Update



Online Tools for Retirees

Did you know you can review and manage your monthly pension through our secure self-service website?

On our secure site,
<https://secure.ers.ga.gov>
you can:

- View your payment information, including deductions for taxes and insurance
- View your 1099R(s) for tax filing
- View and update your tax withholding
- View or change your direct deposit information
- View your beneficiary information, including the pension option you elected at retirement
- Update your personal contact information, including your home address
- Rehired Retirees - check your accumulated hours for the current calendar year

Turn over for



about retiree
discounts and
incentives

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Need help logging in? Never registered?
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and click on *Account Access Instructions*.

RETIREE Update

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You **spoke!** And we **listened.**

ERSGA (in partnership with GTA) is pleased to present



MORE

MY OFFICIAL REWARDS EXPERIENCE

a program offering ERSGA retirees *discounts and incentives* for travel, entertainment, shopping, recreation, and other areas tailored to **your** interests.

You can only access the program by logging in to your secure ERSGA account at <https://secure.ers.ga.gov> and clicking the **MORE** link. Log in and begin saving now!

Rehired Retiree Reminder

Georgia law restricts retirees of ERS, JRS, and LRS from returning to service for a covered employer for more than 1,040 hours per calendar year.

Please make note of the following:

- It is your responsibility as an employee or contractor to notify your employer that you receive pension benefits
- Failure to notify your employer can result in overpaid pension benefits, for which you will be responsible for repayment
- To meet the Independent Contractor exception, your employer must complete the *verification form* and file it with your retirement plan
- A new *Rehired Retiree* form must be submitted to the retirement plan by each of your covered employers
- Keep track of your time - 1,040 hours is equivalent to approximately 6 months of full-time work
- Benefits are suspended after 1,040 hours for the remainder of the calendar year
- The 1,040 hours limit resets each calendar year

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Endorsed GSRA 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



Benefits made available through

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Welcome SHBP RETIREES

We're back!
We are honored and look forward to serving you in 2015!




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.
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