

When do I enroll in Medicare?

When you turn age 65, or if you are certified as disabled by the Social Security Administration (SSA), you may become eligible for Medicare. If you're already collecting Social Security, you may be automatically enrolled in Medicare Part A and Part B. Otherwise, it is up to YOU to enroll in Medicare Part A and Part B. Enroll up to 90 days before your 65th birthday or after you've been certified as disabled by SSA for 24 months. **If you are currently working for a state agency or higher education institution, you do not need to sign up for Part B until you are no longer working.** Remember to apply for Medicare Part B no more than 90 days before you stop working.

How do I enroll in Medicare?

Visit www.ssa.gov or call the Social Security Administration toll-free at (800) 772-1213, or TTY users call (877) 325-0778.

Do I need to enroll in Medicare Part A and Part B?

Yes. You need to enroll in both if you are eligible and no longer work.

Part A covers hospitalization and is free for most people.

Part B covers medical costs other than hospitalization, such as doctors' visits or lab work, and has a monthly premium. You are responsible for your Medicare premiums. If you do not enroll in Part B, you will pay most or all of your health care out-of-pocket costs for Part B services. SSA may add a lifetime penalty to your monthly Part B premium if you are retired and do not enroll in Part B when first eligible.

How will my state health coverage change when I enroll in Medicare?

Retirees, dependents and survivors over age 65 and enrolled in Medicare will be enrolled in the HealthSelectSM Medicare Advantage plan, administered by Humana.

The plan:

- lowers your monthly insurance premiums for dependents and survivors,
- can be used at any doctor's office that accepts Medicare, and
- offers extra benefits.

Why is ERS offering Medicare Advantage plans?

Medicare Advantage plans allow the state to continue providing quality health insurance coverage for retirees at lower costs. This plan achieves the state's budgetary goal of lowering costs while helping you better budget your health care costs.

What is a Medicare Advantage plan?

A Medicare Advantage plan is a different way of providing Medicare benefits. Insurance companies work with and receive payments from Medicare to manage health care costs. Members of Medicare Advantage plans are still covered by Medicare and still pay Part B Medicare premiums, but the traditional Medicare coverage is replaced with a Medicare Advantage plan, such as HealthSelect Medicare Advantage. This plan eliminates Medicare paperwork for you by having your claims filed for you, so long as your doctor accepts Medicare.

Does HealthSelect Medicare Advantage provide the same coverage as my current plan?

HealthSelect Medicare Advantage provides comparable or better coverage than your current coverage. See the Medicare Health Plans Comparison Chart for more information. Services covered at 100% include:

- doctor visits,
- hospital stays,
- emergency care and urgent care visits, and
- wellness programs.

Can I see my current doctor?

Yes. Contact your doctor to make sure he or she accepts Medicare and is willing to bill Humana. If he or she does not, you must pay for your services up front and submit claims to Humana for reimbursement.

Call Medicare toll-free at (800) 633-4227 to find health providers or doctors who accept Medicare or go to www.humana.com/ersmedicareadvantage.

Where can I get more information?

ERS offers Medicare Preparation Seminars around Texas for active employees, retirees and dependents approaching Medicare eligibility. Please visit www.ers.state.tx.us/Event-Calendar/ to register and find a seminar near you.

Am I eligible for the KelseyCare Advantage HMO plan?

You are eligible if you are enrolled in Medicare and live in one of the following counties: Brazoria, Chambers, Fort Bend, Galveston, Harris, Liberty, Montgomery or Waller. Medical coverage is provided through a network of doctors and specialists in the Kelsey-Seybold network. You must use a provider in this network; however, you do not need to designate a primary care physician (PCP) or get referrals to specialists. Visit www.ers.state.tx.us/Retirees/Calculate-Rates/ to view the rates for KelseyCare Advantage HMO Plan on the retiree rate sheet.

What if I am already enrolled in a private Medicare Advantage plan?

You cannot be enrolled in an ERS Medicare Advantage plan and a private one. Once you are enrolled in either the HealthSelect Medicare Advantage Plan or KelseyCare Advantage HMO, Medicare will cancel your enrollment in the private Medicare Advantage plan and you will remain on your health plan through the Texas Employees Group Benefits Program (GBP).

How do I enroll in the HealthSelect Medicare Advantage Plan?

Once you are retired and turn 65, you will be automatically enrolled in the HealthSelect Medicare Advantage Plan. You will need to sign up for Medicare Parts A & B before your coverage with ERS becomes effective. If you're under 65 and become Medicare-eligible, contact ERS with your Medicare information to start the enrollment process. The process works the same way if you are retired and your dependent becomes eligible for Medicare. You will receive a Welcome Kit, directly from Humana providing information on your enrollment date. If you decide you would like to stay in your current plan at the current premium rate, you'll need to sign in to your online account at www.ers.state.tx.us or call ERS to update your Medicare options at (877) 275-4377.

Will I receive a new ID card?

Yes. You will receive a new ID card from Humana for the HealthSelect Medicare Advantage plan shortly after you receive your Welcome Kit. If for any reason you do not receive your ID cards by your start date, you can call Humana for your ID and group numbers to give to your provider so you may access services.

Am I eligible for HealthSelect Medicare Advantage?

You are eligible if you are retired and you are enrolled in Medicare.

Your dependents, as well as surviving spouses and surviving children, are eligible if they are:

- at least age 65 or certified as disabled by the SSA with Medicare,
- enrolled in Medicare Part A (hospital) and Part B (other medical) coverage, and
- living in the United States or Puerto Rico.

A retiree and any dependents (spouse and/or disabled child) enrolled in Medicare must have the same health plan.

Who's not eligible?

- Active employees
- Dependents of active employees (even if retired or certified as disabled by the SSA with Medicare)
- Persons under 65 (unless certified as disabled by the SSA and enrolled in Medicare)
- Persons living outside the United States or Puerto Rico
- Retirees who return to state employment

Do I need to enroll in Medicare Part D?

No. ERS will automatically enroll you in HealthSelectSM Medicare Rx. This is a Part D plan administered by SilverScript Insurance Company. Find more information at ers.silverscript.com.

Do I need to pay a Part D premium?

Most people do not pay a premium to be covered under HealthSelect Medicare Rx. Based on your income level, you may be subject to a premium referred to as the Income-Related Monthly Adjustment Amount (IRMAA). SSA determines if a participant has to pay a Part D IRMAA.

Can I decline enrollment in HealthSelect Medicare Rx?

Yes, but if you decline the coverage, you lose all GBP prescription drug coverage. ERS does not offer an alternative plan. If you do not enroll in another Part D plan within 63 days of losing your GBP prescription drug coverage, Medicare will penalize you. Decline the HealthSelect Medicare Rx plan by calling SilverScript toll-free at (855) 344-0938 (TTY - 711).

Please note: you could lose your ERS Medicare Advantage Plan by signing up for another Part D plan.*

What happens to my dependent's prescription coverage if we are both enrolled in Medicare and I decline HealthSelect Medicare Rx?

Your dependent would lose current prescription coverage and neither of you would have any prescription drug coverage through the GBP. Both of you all would need to purchase a private prescription plan.

What if I am already enrolled in a private Medicare Part D plan?

You cannot be enrolled in both HealthSelect Medicare Rx and a private Medicare Part D plan. Medicare will cancel your enrollment in the private Medicare Part D plan once you transfer to SilverScript.

Look at some of these extra benefits you get with HealthSelect Medicare Advantage:

- **Well Dine**[®] – free precooked frozen meals delivered to your home after a hospital stay
- **HumanaFirst** – a toll-free nurse advice line
- **QuitNet** – a smoking cessation program
- **SilverSneakers** – provides free gym memberships at selected local fitness centers
- **HumanaVitality** – wellness program that rewards you with a healthier lifestyle and other perks

**If you join a group Part D plan, you can keep your ERS Medicare Advantage Plan. If you join a private Part D plan, you will lose your ERS Medicare Advantage Plan.*

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