Turning 65 Webinar

June 18, 2019
Today’s Presenters

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Today’s Agenda

• What is Medicare?
• What health coverage does the ELCA offer?
• What steps must I take to ensure I have appropriate coverage when I turn 65?
• 4 things I can do today
• Next steps

Questions?
Email Portico Customer Care at mail@PorticoBenefits.org
Put “Turning 65 Webinar” in the subject line
Who is Portico?
What is Medicare?

Medicare is the federal health insurance program for:

• Those 65 years and older

• Younger people with certain disabilities

• People with permanent kidney failure (End Stage Renal Disease)

Get more information and an electronic copy of Medicare & You at Medicare.gov
How will I receive my Medicare coverage?

Original Medicare
(through Medicare and its partnerships)

Medicare Advantage
(through private insurance companies approved by Medicare)
What if I choose Original Medicare?

Medicare Part A

Medicare Part B

Medicare Part D
(available from private health insurance companies)

Medicare Supplement
(available from private health insurance companies)
Medicare Part A (Hospital Coverage)

Coverage:
- Hospital care
- Skilled nursing facility care (not custodial or long-term care)
- Hospice
- Home health services

Cost:
- If you worked and contributed to Social Security: $0 monthly premium

Benefit Period: How Original Medicare measures your use of hospital and skilled nursing facility (SNF) care. Benefit period ends once you haven’t received any inpatient hospital or SNF care for 60 days in a row.
Medicare Part B (Medical Coverage)

**Coverage:**
- Medically necessary services (i.e. – tests, x-rays, outpatient hospital care, ambulance, etc.)
- Preventive services (i.e. – flu shots, pelvic exams, diabetes screenings, etc.)

**Cost:**
- **$135.50** monthly premium for those enrolling in 2019 (or higher, depending on income)
- **$185** annual Part B deductible in 2019
Medicare Part D (Prescription Drug Coverage)

**Coverage:** Prescription drugs (some or all)

**Cost:**
- $0-100 monthly premium, depending on the plan
- Out-of-pocket costs vary
- Some plans have a deductible and/or a “donut hole”

**Donut hole (coverage gap):** A temporary limit on what the drug plan will cover. You and your plan will pay for your drugs together until you have spent $3,820 on covered drugs in 2019. Once you reach the coverage gap, you’ll pay no more than 25% of the plan's cost for covered brand-name prescription drugs until you’ve paid $5,100 out-of-pocket.
Medicare Supplement (Medigap)

Coverage:
• Designed to pay for some of your costs, such as deductibles and coinsurance
• May offer additional benefits like dental, vision, or hearing coverage

Cost: Varies by plan

Why purchase one:
• Original Medicare is intended only to cover 80% of expenses, after Part A and B deductibles
• Original Medicare has no out-of-pocket maximum for hospital and/or medical expenses incurred
Original Medicare Recap

Coverage:
- Hospital coverage (Part A)
- Medical coverage (Part B)
- Prescription drug coverage (Part D – if you choose to buy it)
- Medicare Supplement (Medigap – if you choose to buy it)

Cost:
- $135.50 Part B monthly premium (or higher, depending on income)
- Deductible and coinsurance for Part A & B services
- Additional costs for Part D plus Medicare Supplement (if you choose to buy them)
What if I choose Medicare Advantage (Part C)?

**Coverage:**

- Equivalent coverage to Parts A & B (includes out-of-pocket limit)
- May include prescription drug coverage
- May include additional benefits, such as vision, dental, and/or hearing coverage

**Cost:**

- **$135.50** Part B monthly premium (or higher, depending on income)
- Monthly Medicare Advantage premium*
- Possible copayment or coinsurance for covered services

**If not associated with a group plan:**

- Coverage and costs may vary, based on age and state of residency
- May include a limited provider network

*plus Part D premium if drug coverage is not included.

**NOTE:** Portico’s 2019 ELCA Medicare-Primary benefits include a group Medicare Advantage plan insured by Humana.
What health coverage does the ELCA offer?
ELCA Medicare-Primary Health Benefits: Who Qualifies?

ELCA Health Plan members & spouses:

- Age 65+ and retired or on leave from call
- Age 65+ and sponsored by an organization with fewer than 20 employees
- Under age 65 and entitled to Medicare due to:
  - Disability and no longer sponsored
  - Permanent kidney failure and having met 30-month Medicare coordination period

The plan document for the ELCA Health Plan is the full, legal description of the plan. Member rights under the plan are governed by the plan document. If this presentation is found to be inconsistent with the plan document, the plan document is considered the controlling document.
What if my spouse and I turn 65 at different times?

If you **both are enrolled in ELCA-Primary benefits** and:

- The member is retired, on leave from call, or sponsored by an organization with fewer than 20 employees:
  - The spouse turning 65 enrolls in **ELCA Medicare-Primary benefits**
  - Younger spouse remains enrolled in **ELCA-Primary benefits** until he/she turns 65

- The member is sponsored by an organization with 20 or more employees:
  - Both remain enrolled in **ELCA-Primary benefits**

**NOTE:** Doesn’t matter if member or spouse turns 65 first
Group Medicare Advantage Plan, SilverSneakers®, and additional wellness benefits

Prescription Drug Benefit: coverage varies if sponsored vs. retired members, as well as the benefit option chosen

Dental Benefit: no change in benefit
## 2019 ELCA Medicare-Primary Health Benefit Options

<table>
<thead>
<tr>
<th></th>
<th>Economy</th>
<th>Standard*</th>
<th>Premium</th>
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<tbody>
<tr>
<td>Medical deductible</td>
<td>$180</td>
<td>$180</td>
<td>$0</td>
</tr>
<tr>
<td>Medical out-of-pocket limit</td>
<td>$2,470</td>
<td>$3,500</td>
<td>$0</td>
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<tr>
<td>Prescription drug coverage</td>
<td>Closed formulary</td>
<td>Preferred formulary</td>
<td>Preferred formulary</td>
</tr>
<tr>
<td>Delta Dental, SilverSneakers, and wellness benefits</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Eligible emergency care outside U.S.</td>
<td>20%; $50,000 lifetime maximum</td>
<td>20%; $50,000 lifetime maximum</td>
<td>20% after $250 deductible; $50,000 lifetime maximum</td>
</tr>
<tr>
<td>Cost per person per month**</td>
<td>$224</td>
<td>$299</td>
<td>$339</td>
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*Only option for members sponsored by an employer with fewer than 20 employees, on leave from call, or disabled
**Contribution rates for those retired or continuing coverage; not reflective of cost to employer.
How ELCA Medicare-Primary Coverage Works

1. Confirm the provider you wish to visit for hospital or medical services either accepts Medicare and will bill Humana, or is part of Humana’s network. Better yet, call Humana and a representative confirm this for you.

2. Visit the provider and show your Humana member ID card.

3. Review the SmartSummary statement (explanation of benefits) you receive from Humana indicating what portion of the claim you owe and what Humana paid.

4. Pay your portion of the provider's bill after Humana has paid its portion.

5. Questions? Contact Humana with any questions regarding your group Medicare Advantage plan.
Comparing Medicare Plans – Questions to Ask

1. Who will be my **advocate**?
2. What’s the **cost**? Does it **change by age or residency**?
3. Is the **provider network** broad enough for me?
4. Do I want **coverage** for care received **outside the U.S.**?
5. What **additional benefits** are important to me?
What steps must I take to ensure I have appropriate coverage when I turn 65?
Three Months Before You (or Your Spouse) Turn 65

1. **Read** the information you receive from Portico.

2. **Sign up** for Medicare beginning three months prior to turning 65 to ensure your benefits begin the first day of the month you turn 65, even if you plan to continue working.

3. **Send** us a copy of your Medicare card and complete the forms we send to you.
Enrolling in Parts A & B

Have you been **receiving Social Security benefits** for at least four months prior to turning 65?

– **Yes**: you’ll be automatically enrolled.
– **No**: you’ll need to enroll online, via phone, or in person at your local Social Security office.

**NOTE**: You do not need to apply for your Social Security retirement benefit at the same time – you can choose to delay this benefit.
Primary Coverage at Age 65 If You’re Still Working

ELCA-Primary Coverage
- You’re employed by an organization with 20 or more employees

ELCA Medicare-Primary Coverage
- You’re employed by an organization with fewer than 20 employees
- You’re on leave from call
Sponsored by an organization with 20+ employees?

1. **Continue** with ELCA-Primary benefits, which will serve as primary coverage for your hospital and medical services.

2. **Consider enrolling** in Medicare Part A, which will act as secondary coverage for your hospital benefits.

3. **Contact Medicare to delay** Part B for now, but be sure to enroll three months before you retire, go on leave from call, or change calls to a small employer.

4. **Contact Portico** if you have Bronze+ coverage.
Does your employer have fewer than 20 employees?

1. **Enroll** in Medicare Part A (hospital) and Part B (medical services).

2. **Tell Portico** the amount you pay for your Part B premium.

3. The cost of Part B premiums for you and family members with ELCA Medicare-Primary benefits while you are sponsored in the ELCA health plan will be reimbursed by Portico.

4. We’ll automatically transition you from ELCA-Primary to ELCA Medicare-Primary benefits* Standard option. You’ll receive a new ID card from Humana.

5. **Ask** your employer to return the *Small Employer Exception Form* to Portico.

*Includes a group Medicare Advantage plan, as well as dental coverage and ELCA prescription drug benefits. Accordingly, you won’t need to enroll in non-ELCA Part D prescription drug coverage. Medicare permits an individual to have only one Medicare Advantage plan. If you sign up for a Medicare Supplement plan, a Medicare Advantage plan not offered through the ELCA Health Plan, or individual Part D prescription coverage, Medicare will disenroll you from your Medicare Advantage plan offered under the ELCA Health Plan. In addition, the following benefits under the ELCA Health Plan would terminate: wellness programs, discount programs, SilverSneakers® fitness benefit, prescription drug coverage, and dental coverage.
Employer Impact

**ELCA-Primary Coverage**
(Organization with 20+ employees)
- No impact – same coverage as today
- Organization’s contribution for member’s coverage continues to increase as members age

**ELCA Medicare-Primary Coverage**
(Organization with fewer than 20 employees)
- Some impact
- Contribution likely less than what organization is paying today
Steps for Those on Leave from Call

1. **Enroll** in Medicare Part A (hospital) and Part B (medical services).
2. We’ll automatically transition you from ELCA-Primary to ELCA-Medicare Primary benefits* Standard option.

*Includes a group Medicare Advantage plan, as well as dental coverage and ELCA prescription drug benefits. Accordingly, you won’t need to enroll in non-ELCA Part D prescription drug coverage. Medicare permits an individual to have only one Medicare Advantage plan. If you sign up for a Medicare Supplement plan, a Medicare Advantage plan not offered through the ELCA Health Plan, or individual Part D prescription coverage, Medicare will disenroll you from your Medicare Advantage plan offered under the ELCA Health Plan. In addition, the following benefits under the ELCA Health Plan would terminate: wellness programs, discount programs, SilverSneakers® fitness benefit, prescription drug coverage, and dental coverage.
What if ...?

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<tbody>
<tr>
<td>I’m working part-time?</td>
<td>If you are regularly scheduled to work <strong>20+ hours/week</strong> for <strong>at least six months</strong> of the year, you continue to be eligible for ELCA health coverage.</td>
</tr>
<tr>
<td>I’m on disability and qualify for Medicare as primary coverage?</td>
<td>You will have the <strong>ELCA Medicare-Primary health benefits Standard option</strong>.</td>
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</table>
| I still have my Flexible Spending Account (FSA) and/or Health Savings Account HSA? | • **FSA**: If still sponsored and age 65+, this **benefit is available to you** with either ELCA Medicare-Primary or ELCA-Primary coverage.  
• **HSA**: You can **no longer contribute to an** HSA if you are enrolled in Medicare. However, you can still spend your HSA account assets on qualifying health care expenses. |

*15+ hours for rostered ministers*
Steps for Those Retired or Planning to Retire at Age 65

1. **Contact** Portico at 800.352.2876 to let us know you’re retiring (if you haven’t already)

2. **Enroll** in Medicare Part A (hospital) and Part B (medical services)

3. **Enroll** in ELCA Medicare-Primary benefits,* if they meet your needs

*Includes a group Medicare Advantage plan, as well as dental coverage and ELCA prescription drug benefits. Accordingly, you won’t need to enroll in non-ELCA Part D prescription drug coverage. Medicare permits an individual to have only one Medicare Advantage plan. If you sign up for a Medicare Supplement plan, a Medicare Advantage plan not offered through the ELCA Health Plan, or individual Part D prescription coverage, Medicare will disenroll you from your Medicare Advantage plan offered under the ELCA Health Plan. In addition, the following benefits under the ELCA Health Plan would terminate: wellness programs, discount programs, SilverSneakers® fitness benefit, prescription drug coverage, and dental coverage.
## ELCA Health Coverage Eligibility in Retirement

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<tr>
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<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who is eligible?</td>
<td>If <strong>eligible for ELCA health benefits at the time of retirement</strong>, you can choose to continue coverage – at your own expense – for yourself and any eligible family members.</td>
</tr>
<tr>
<td>When must I elect to continue or waive ELCA health coverage?</td>
<td><strong>Within 60 days of retirement</strong> to avoid a 90-day wait for coverage if you want to enroll in the future.</td>
</tr>
<tr>
<td>Can a new spouse/child be added?</td>
<td><strong>Yes</strong>, if eligibility requirements are met.</td>
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</table>
## ELCA Health Coverage Eligibility in Retirement – Cont.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can I purchase ELCA health coverage in retirement if I waived it while I was employed?</td>
<td>Yes, provided you satisfied Portico’s waiver criteria.</td>
</tr>
<tr>
<td>Do I need Medicare Parts A and B to enroll in ELCA Medicare-Primary coverage?</td>
<td>Yes, you must <strong>enroll in Parts A and B</strong> by contacting Social Security.</td>
</tr>
<tr>
<td>Can I receive ELCA health coverage if I live outside the U.S. after I retire?</td>
<td>Non-sponsored members age 65 and older are <strong>not eligible for ELCA health benefits</strong> if living outside the U.S and Puerto Rico.</td>
</tr>
</tbody>
</table>
Most Common Medicare Mistakes Made

1. **Failing to enroll in Part B** when you should
2. **Thinking you must reach full retirement age** before enrolling
3. Not realizing you **may qualify for help** to lower your costs
4. **Not signing up for Part D** because you don’t take prescription drugs currently
5. Misunderstanding **enrollment periods**
6. **Picking a plan** based solely on its premium, its name, or because your best friend chose it

Closing
4 Things I Can Do Today

1. Learn more about how Medicare works by reading *Medicare & You* or exploring [medicare.gov](http://medicare.gov)

2. Earn your wellness dollars by completing the Live Well Challenge before Medicare becomes your primary coverage.

3. When retiring, be in conversation with Portico and your bishop (if a rostered minister) at least three months prior to your retirement date.

4. Contact the Portico Customer Care Center at **800.352.2876** with any questions.
Next Steps

• Survey

• Follow-up Email
  – Link to the recording of today’s webinar
  – Link to a PDF of the PowerPoint slides
  – Turning 65 Checklist