

CY2024 Retiree Benefits Bulletin

Civil Service Commission
State of Michigan

DATE: November 2023	NUMBER: GIS 01-2023R - Defined Contribution Edition
CONTACT: ORS Customer Service www.mi.gov/orsmiaccount	TELEPHONE NUMBER: 800-381-5111 Toll-Free

Benefit Update & Insurance Rates

The Employee Benefits Division is pleased to announce that there will again be no rate increase for the State Health Plan (SHP) PPO, the State Health Plan Medicare Advantage (MA) PPO, Dental, or Vision coverages for retirees for 2024. Retirees enrolled in an HMO should review the rates as the premiums will change, with some rising significantly. Rates can be found at the end of this bulletin or by visiting the Employee Benefits website, www.mi.gov/employeebenefits and select the Rates icon. Premium changes will be reflected in January 2024 pension checks and payment coupons.

This document contains important updates, so please review it carefully. Plan provisions are also unchanged from 2023.

Effective January 1, 2024, McLaren Health Plan and Physicians Health Plan (PHP) will no longer be offered to state retirees and dependents. Current enrollees MUST select a new plan before November 30, 2023, to avoid a gap in coverage.

Watch your mailbox and email inbox for these and other important updates from insurance third-party administrators. Blue Cross will be mailing the 2024 Annual Notice of Change for MA members. Optum Rx will be sending the 2024 formulary, pharmacy directory, and Evidence of Coverage documents electronically for Medicare enrollees. Members may request a hard copy of the documents by contacting the Optum Rx customer service number on the back of your ID card.

Basic information about retiree insurance and eligibility is available on the Office of Retirement Services (ORS) website, www.mi.gov/ors, by selecting the applicable retirement system from the top menu, and select the appropriate insurance option from the top menu, click 401(k) Defined Contribution Plan, select Forms and Publications from the top menu, expand the After Retirement section by clicking the plus icon, then click the link for the *Insurance Options Sheet (R0423GH)*.

Communication from Carriers

Blue Cross, Optum Rx, Blue Care Network (BCN) and Health Alliance Plan (HAP) all have programs to help maintain and improve member health. Representatives from these companies may contact you by phone, email, or regular mail to offer free or low-cost health screenings or to see if you are interested in help with managing chronic conditions or for medication management, for example. If you have questions about whether a contact is legitimate, call the number on the back of your member ID card for verification.

HMO Rates Will Change

Retirees are encouraged to review their benefit elections every year to avoid surprises with rate changes in January. The HMO monthly premiums will increase, effective January 1, 2024. It is important to take these changes into account. See the end of this bulletin for rates.

Available Online Resources

Additional retiree resources are available on the Michigan Civil Service Commission (MCSC) Retiree Information webpage. Go to www.mi.gov/employeebenefits and select the Retirees icon. The following resources can be accessed from the Retiree Information webpage:

- Carrier contact information
- Health, Prescription, Vision, Dental, and Life Insurance plan summaries
- Insurance rates
- Retiree Benefits Bulletins (current and archived)
- HMO ZIP code tool
- Medicare Advantage coverage maps
- Voluntary Benefit links (Benefits for Life and Long-Term Care Insurance)
- ORS information links (Pension, 401(k), newsletters, etc.)
- Michigan State Employee Retiree Association (SERA) website link
- miAccount Login

Important Message for Those Eligible for Medicare

To keep your health and prescription drug coverage, you must enroll in Medicare Part A and Part B when you are eligible.¹ All Medicare-eligible members who timely provide their Medicare enrollment information to ORS will automatically be enrolled in the MA plan associated with their pre-Medicare plan (e.g., SHP PPO, BCN, or HAP), unless you contact ORS to opt out. Information on how to opt out of the SHP MA PPO will be included in the pre-enrollment packet you will receive in the mail from Blue Cross. You may opt out of the SHP MA PPO coverage and participate in the SHP PPO Medicare Supplemental plan, provided you have other primary coverage through another employer that pays claims before the SHP PPO, and you continue to pay your Medicare Part B premium.

It is important to note that individuals can only be enrolled in one MA plan. If you have coverage in another MA plan, such as through a spouse's employer, you must choose which MA plan you want to keep. Medicare-eligible spouses and Medicare-eligible dependents of retirees must enroll in the same Medicare plan as the retiree.

Reminder: Schedule Your Annual Preventive Care Appointments

An annual checkup is an important opportunity to talk with your provider and identify potential concerns before they develop into actual problems. Many preventive services are offered at no cost to you, including office visits, cancer screenings, and vaccinations for serious illnesses such as pneumonia, shingles, influenza, and of course, COVID-19. **The Michigan Department of Health and Human Services (MDHHS)** is encouraging seniors to get seasonal influenza vaccines. You can find more information on their website at www.mi.gov/flu. COVID-19 is still a threat in Michigan and across the country, and it is more important than ever to stay healthy and protect yourself against preventable illnesses. You can find more information on vaccines and locations they can be received at www.vaccinefinder.org.

Remember the importance of staying physically active and practicing healthy habits to cope with stress.

¹ This does not apply to State Police Troopers or Sergeants **retiring on or after October 1, 1987.**

Health Maintenance Organization (HMO) Changes

McLaren Health Plan and Physicians Health Plan (PHP) have chosen to no longer offer health insurance benefits to State of Michigan retirees, employees, and their dependents. McLaren Health Plan and PHP enrollees must select a new health insurance plan offered by the State of Michigan to continue retiree health and prescription drug coverage. Your request must indicate a plan change effective date of **January 1, 2024**, to avoid an impact to your deductible and out of pocket maximum (OOPM) calculations.

Important timing details for McLaren and PHP members:

- Failure to elect a new health insurance plan by **November 30, 2023**, will result in termination of health and prescription drug benefits with the State of Michigan for you and any dependents you're currently covering effective **December 31, 2023**.
- If you submit a plan change between December 1, 2023, and December 31, 2023, you will have a gap in coverage from January 1, 2024, until your election is effective February 1, 2024.
- If you submit an enrollment request between January 1, 2024, and January 31, 2024, you will lose coverage January 1, 2024, and your new election will be effective March 1, 2024.
- If you submit an enrollment request after January 31, 2024, you will have a gap in coverage, and new coverage might not take effect until six months after ORS receives your request.

For information regarding State of Michigan health insurance plans (plan summaries, insurance rates and HMO coverage areas) visit the Employee Benefits website at www.mi.gov/employeebenefits, and click the Retirees icon.

As a State of Michigan retiree, you can make plan changes two ways:

- Option 1: Log into your miAccount at www.mi.gov/orsmiaccount to enroll in a new plan. Once enrolled, provide ORS confirmation of the new enrollment using one of the following methods:
 - Send a notification through the miAccount message board confirming your new election **or**
 - Fax to the ORS at 517-284-4416 **or**
 - Submit your miAccount confirmation page by mail to Office of Retirement Services, PO Box 30171, Lansing, MI, 48909-7671
- Option 2: Submit an Insurance Enrollment/Change Request (R0752G) to ORS and proofs for newly added dependents you wish to enroll, by fax or mail.

Demographic Information Updates

If you change your address, be sure to update ORS. You must generally have a **physical address** (not a post office box) in the US or one of its territories to be eligible for coverage under state-sponsored health and prescription drug insurance. This includes a change in residential or mailing address, phone number, email address, legal name, and Medicare effective dates.

Your current information on file can be viewed and updated through your miAccount. Keeping your contact information up to date ensures that ORS can keep you informed of changes that may impact your pension, 401(k), or benefits. If ORS is notified that a retiree's name, address, or Medicare Beneficiary Identifier (MBI) on file is incorrect, communication will be mailed requesting you contact ORS customer service or access their miAccount to make an update.

If you do not provide response by the ORS-designated date, benefits could be terminated.

State Health Plan PPO Members

Social Security Benefits Before Age 65

Blue Cross has partnered with SSDC Services Corp. to assist members who may qualify for Social Security Disability Insurance benefits. If you or a covered dependent are between the ages of 18 and 61, SSDC will assist with filing and obtaining these benefits at no cost to you. If you receive correspondence from SSDC, please review it carefully and call SSDC at 800-374-9950 x222 if you have any questions or believe they can be of help. If they send you a questionnaire, please complete and return it. Visit their website at www.ssdcservices.com for more information.

New Behavioral Health and Substance Use Disorder (BH/SUD) and Telemedicine Partnerships

Effective January 1, 2024, Optum Behavioral Health will replace New Directions as Blue Cross's Behavioral Health and Substance Use Disorder partner for non-Medicare and Medicare Supplemental members. There is no impact to the plan provisions. Additionally, Teledoc will replace AmWell as Blue Cross's telemedicine partner using Virtual Care (formerly known as Blue Cross Online Visits) for non-Medicare, Medicare Supplemental, and Medicare Advantage members.

Blue Cross Medicare Advantage Rewards

If you're a SHP MA PPO enrollee, you're eligible for a program that rewards you when you take healthy steps such as getting an annual wellness visit or flu vaccine. You can earn gift cards for local grocery stores, superstores, and gas stations. There is no cost; all you have to do is create an online account, complete a qualifying activity, and enter the details into the account.

Members looking to participate, or those requiring assistance enrolling or logging in, can visit www.bcbsm.com/advantagerewards or call 1-866-572-0155 (TTY: 711). A list of healthy actions you can take to earn rewards is available once you enroll, and after you enter details of your activity, you can choose reward options.

Program for Those Living with Diabetes

The Livongo diabetes management program is offered at no cost to SHP PPO and SHP MA PPO members with diabetes. With this program, eligible members receive a connected meter that automatically uploads blood glucose readings to your secure online account and provides real-time personalized tips.

Optional family alerts can notify loved ones of dangerous glucose readings. The program also includes support from coaches when you need it. You can communicate with a coach any time about diabetes questions on nutrition or lifestyle changes. Livongo is not available to Medicare Supplemental plan members.

Find a Provider

The Blue Cross online "Find A Doctor" tool can help you locate participating providers. From www.bcbsm.com, click the "Find A Doctor" tool from the left-hand menu. If you are a SHP MA PPO member, select Medicare Plus Blue (PPO) for a list of participating providers; otherwise, select State of Michigan Health Plan PPO for a list of participating providers. If you have additional questions, call 800-843-4876.

Cost Share Overview

	State Health Plan PPO Pre-65 and Medicare Supplemental Plans	
	In-Network	Out-of-Network
Deductible	\$400 per individual / \$800 per family	\$800 per individual / \$1,600 per family
Office visit copay	\$20 copay	20% coinsurance after deductible
Coinsurance	10% for most services 20% for private duty nursing and acupuncture	20% for most services 50% for BH/SUD
Out-of-Pocket Maximum	\$2,000 per individual / \$4,000 per family	\$3,000 per individual / \$6,000 per family

*Cost share information for the SHP MA PPO can be located in the Chapter 4: Medical Benefits Chart of the Evidence of Coverage at www.bcbsm.com/som/retirees/medicare-advantage.

Enrollments and Making Changes

Retirees are not restricted to an annual benefit open enrollment period. You can make a change to your state-sponsored retiree health, prescription drug, dental, or vision insurance plans at any time. As a reminder, if you want to make a plan change to be **effective January 1st** of the upcoming year, you must initiate contact with ORS **no later than November 30th** of the current year.

Before making any change in your current state-sponsored retiree health, prescription drug, dental, or vision insurance plans, we recommend that you review the benefit coverage of all carriers that you are eligible to enroll in. This will ensure that you are making the best coverage decision for your healthcare needs.

If you are currently enrolled but want to make changes to your state-sponsored retiree health, prescription drug, dental, or vision insurance plans, go to www.mi.gov/orsmiaccount to log in to your miAccount, or use the *Insurance Enrollment/Change Request* form available on the ORS website at www.mi.gov/ors. Simply select the applicable retirement system from the top menu, click the appropriate insurance option from the top menu, click 401(k) Defined Contribution Plan, select Forms and Publications from the top menu, scroll down to the Forms for Retirees section, expand the After Retirement section, click the *Insurance Enrollment/Change Request (R0752G)* link, and print the form.

Send the completed form and required proofs² to ORS by fax at 517-284-4416 or by mail at:

Office of Retirement Services
P.O. Box 30171
Lansing, MI 48909

If you are considering changing to an HMO plan, please remember that HMO plan availability is based on location. Visit the Employee Benefits website at www.mi.gov/employeebenefits, select the Retirees icon, scroll to the HMO Zip Code Tool and Medicare Advantage Coverage Maps section and click the plus icon to expand, then click the *HMO Zip Code Tool* link.

Enrollment Waiting Period

New Enrollments. Changes to enrollments or new enrollments that occur later than the month you terminate employment normally take effect the first day of the sixth month after ORS receives your *Insurance Enrollment/Change Request* form and all required proofs.²

Loss of Coverage. Coverage can begin sooner when you or a dependent has an involuntary loss of other group coverage or a change in your family status (e.g., marriage, death, divorce). Be sure to send ORS your completed insurance enrollment online at www.mi.gov/orsmiaccount or an *Insurance Enrollment/Change Request* form, along with proof of your loss of coverage within 30 days of the event. If anyone being added has Medicare, coverage will take effect the first day of the second month after ORS receives your request and all required proofs.² Otherwise, coverage will take effect the first day of the month after ORS receives your request and all required proofs.

Plan Change. To change your insurance plan, log in to www.mi.gov/orsmiaccount and click on Insurance Coverage or complete the *Insurance Enrollment/Change Request* form and return it to ORS along with all required proofs.² If you are currently enrolled in any health insurance plan with the retirement system, you can change your enrollment to another plan regardless of your Medicare status. Your change in coverage will be effective the first day of the second month after your request and required proofs are received. For example, if ORS receives your change request and any required proofs on January 10, your coverage with the new plan will begin on March 1.

²Explanation of proofs can be found on Page 3 of the *Insurance Enrollment/Change Request* form.

Medicare Eligibility and Enrollment

Medicare eligibility impacts your State of Michigan coverage whether or not you are enrolled. As a retiree, once you or your dependent becomes Medicare eligible (generally at age 65), your state retiree healthcare coverage becomes your secondary insurance. You must enroll in Medicare Part A (hospital) and Part B (medical) upon becoming eligible. Your enrollment in Part D (prescription) will be automatic. Be sure to provide your MBI to ORS as soon as possible to help ensure coordination of benefits. Refer to the ORS website for details on the different ways to provide your Medicare number to ORS.

If you began receiving Social Security benefits before you become Medicare eligible, you may automatically be enrolled in Medicare Part A and Part B. If you are not receiving Social Security benefits before you become Medicare eligible, you must take action to enroll. You can enroll or confirm enrollment in Medicare Part A and Part B in the following ways:

- Online at www.socialsecurity.gov
- Call Social Security at 1-800-772-1213 (TTY users 1-800-325-0778), Monday–Friday, 7:00 a.m.–7:00 p.m.
- In person at your local Social Security office

Enrolling and Making Changes If Medicare Eligible at Age 65. If you are *already enrolled* in state-sponsored retiree health and prescription drug insurance and you, your spouse, or your dependent becomes eligible for Medicare at age 65:

- Be sure to enroll in both Medicare Parts A and B three months before turning 65. You will be contacted if your insurance carrier needs additional information.
- Tell ORS your MBI and Part A and B effective date. Doing this more than one month before the month you turn 65 will ensure no gap in coverage as you change to a Medicare compatible plan. Refer to the ORS website for details on the different ways you can get this information to ORS.

If you are *enrolling* in state-sponsored retiree health and prescription drug insurance and you, your spouse, or your dependent is also eligible for Medicare at the time of enrollment:

- Be sure to enroll in both Medicare Parts A and B three months before enrolling in retiree insurance and tell ORS your MBI and Part A and B effective date.
- Submit your completed online insurance enrollment at www.mi.gov/orsmiaccount (or submit an *Insurance Enrollment/Change Request* form by mail or fax to ORS). Coverage will begin the first day of the second month after ORS receives your request and all required proofs.²

Note: Plan changes for Medicare-eligible enrollees are always effective the first day of the second month after a request and all required proofs have been received.

Enrolling and Making Changes If Medicare Eligible Before Age 65. If you are *already enrolled* in state-sponsored retiree health and prescription-drug insurance and you, your spouse, or your dependent becomes eligible for Medicare before age 65:

- Be sure to enroll in both Medicare Parts A and B.
- Tell ORS your MBI and effective date for Part A and B. Doing this will change your coverage to a Medicare-compatible plan that will take effect on the first day of the second month after ORS receives your MBI. Refer to the ORS website for details on the different ways you can get this information to ORS.

²Explanation of proofs can be found on Page 3 of the *Insurance Enrollment/Change Request* form.

State Health Plan PPO

STATE HEALTH PLAN PPO and MEDICARE ADVANTAGE (MA)

Blue Cross Blue Shield of Michigan

800-843-4876

www.bcbsm.com/som

PRESCRIPTION DRUG PROGRAM

Optum Rx

Non-Medicare Retirees: 866-633-6433

Medicare-Eligible Retirees: 866-635-5941

www.optumrx.com/som

BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDER

Blue Cross Blue Shield of Michigan

Claim & Benefit Inquiries: 800-843-4876

Referrals & Clinical Assistance:

Non-Medicare & Medicare Supplemental Retirees

(Optum Behavioral Health): 866-503-3158

Medicare Advantage Retirees: 888-803-4960

www.bcbsm.com/som

Health Maintenance Organizations

BLUE CARE NETWORK (BCN)

800-662-6667

www.bcbsm.com/som

HEALTH ALLIANCE PLAN (HAP)

800-422-4641

www.hap.org/som

State Vision Plan and State Dental Plan

STATE VISION PLAN

EyeMed

833-279-4355

www.eyemedvisioncare.com/som

STATE DENTAL PLAN

Delta Dental Plan of Michigan

800-524-0150

www.deltadentalmi.com/som

Premium Payment Options

You can log into miAccount at www.mi.gov/miaccount to download and print coupons for each month if necessary. To print your coupons, click on Healthcare Coverage, click Bills & Payments, select the bills you want to print, then click Print Coupons.

Online: Log into miAccount at www.mi.gov/orsmiaccount. Click on Healthcare Coverage, then click on Bills & Payments. You can pay by credit or debit card or by E-check using a checking or savings account. There is a 1.5% convenience fee charge in addition to your premium payment if you pay by credit or debit card.

By Mail: Make a check or money order payable to State of Michigan and mail it to the ORS at the address on the coupon. Include the payment coupon for that month with each payment. If you submit payments for multiple months or combine different insurance types in a single check, please include all corresponding payment coupons.

2024 retiree insurance rates can be found on the
Employee Benefits Division's web site at:

www.mi.gov/mdcs/employeebenefits/rates