

POST-65 GROUP RETIREE SOLUTIONS

BENISTAR[®] 



**VILLAGE OF HOFFMAN
ESTATES, IL**



VILLAGE OF HOFFMAN ESTATES, IL

GROUP RETIREE HEALTH

- New Part D/Rx Carrier – Express Scripts
 - New Medical Carrier – United American
 - New Third Party Administrator (TPA) - Benistar
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EXPRESS SCRIPTS MEDICARE PART – D

- How do Medicare Part – D plans work?
- When you sign up for a Part D plan, you and the plan share the costs of your prescription drugs. Exactly how much you pay can vary depending on the plan you are enrolled in. All Part D plans follow four stages:
 - Stage 1: Deductible
 - Stage 2: Initial Coverage Limit
 - Stage 3: Gap or “Donut Hole”
 - Stage 4; Catastrophic Coverage

MEDICARE PART – D STAGES

Stage 1

Costs

Plan Benefit

Annual Deductible
Amount

This plan does not
have a deductible.

YOU PAY: \$0



MEDICARE PART – D STAGES

Stage 2

Costs

Plan Benefit

Initial Coverage Limit

Up to \$4,430
in total drug
costs.

YOU PAY: Applicable copay for
each covered drug.

PLAN PAYS: The remainder of the
costs for each covered drug.

MEDICARE PART – D STAGES

Stage 3

Coverage Gap

Costs

After you reach \$4,430 in total drug costs, up to \$7,050 in True Out-of-Pocket costs.

Plan Benefit

YOU PAY: Your copays remain the same as they were in your Initial Coverage Limit.

MEDICARE PART – D STAGES

Stage 4

Costs

Plan Benefit

Catastrophic Coverage

After the \$7,050 in True Out-of-Pocket costs, no limit.

YOU PAY: A small copay or coinsurance for each covered drug, with a maximum copay of Initial Coverage Limit member cost share.

PLAN PAYS: The rest of the costs for each covered drug until the end of the year. There is no limit.

IMPORTANT EXPRESS SCRIPTS INFORMATION

- You may obtain prescriptions one of two ways
 - Retail pharmacy
 - Existing 31 day retail prescriptions will remain valid
 - One copay per 31 day supply, up to 90 days.
 - Express Scripts Mail Order
 - 90 Day supply at the Mail Order copay price
 - If filling a 31 day supply, copay reverts to retail amounts.
 - You will need to get new 90 supply prescriptions from your doctor and send them in on or after January 1, 2022 not before, if you want to use the mail order service

EXPRESS SCRIPTS SMART 90

- Smart 90 gives you an option to go to a preferred pharmacy, such as CVS, Costco, Meijer and Target and receive your 90 day maintenance medications at the same cost as mail order.
- 2 networks:
 - Standard = All of Express Scripts 66,000 country wide pharmacies, 90 day scripts @ 3x 30 day co-pay (the way it has always been)
 - Preferred = Smaller network of pharmacies such as CVS, Costco, Meijer and Target; which will allow you to purchase your 90 day scripts @ 2x 30 day co-pay. Essentially buy 2 get 1 FREE.

Voluntary Smart90 Medicare Preferred 90 Day Pharmacies



- Albertsons
- Avella Of Deer Valley Inc
- Balls Four B Corp
- Bartell Drug Company
- Bi-lo Holdings Llc
- Cardinal Health
- Carr-gottstein Foods Company
- Coborn's Inc.
- Costco Wholesale, Inc
- Cvs Procure Pharmacy
- Diplomat Specialty Pharmacy
- Discount Drug Mart
- Epic Pharmacy Network
- Fred's, Inc.
- H-e-b Lp
- Ingles Markets
- Kph Healthcare Services
- Longs Drug Store
- Medicine Shoppe
- Meijer Pharmacy
- Price Chopper Pharmacy
- Publix Super Markets, Inc
- Raley's
- Recept Pharmacy Lp
- Ritzman Pharmacies Inc
- Safeway, Inc.
- Save Mart Supermarkets
- Shopko Stores Operating Co Llc
- Strategic Health Alliance
- Supervalu Pharmacies, Inc.
- Target
- Third Party Station-cp
- Wakefern Food Corporation
- Weis Markets Inc

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MEDICARE SUPPLEMENT INFORMATION

United American / Benistar



WHAT'S A MEDICARE SUPPLEMENT PLAN?

- In general, Medicare Supplement Plans:
 - Help fill in the cost-sharing gaps within Medicare Parts A and B (deductibles, coinsurance, etc.)
 - A Medicare Supplement plan pays after Medicare pays their portion
 - Offer the freedom to choose any doctor, specialist and hospital that accepts Medicare

MEDICARE SUPPLEMENT REQUIREMENTS

- Retiree must be age 65 or older
- Spouse (if applicable) must also be age 65 or older
- Must be enrolled/eligible to enroll in Medicare Part A and Part B

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GROUP RETIREE HEALTH

FOREIGN TRAVEL EMERGENCY			
Medically necessary emergency care services.			
Emergency services needed due to Injury or Sickness of sudden and unexpected onset during the first 60 days while traveling outside the .	\$0	80% after \$250 Deductible (to a lifetime maximum of \$50,000).	\$250 Deductible and then 20% of expenses incurred (to a lifetime maximum of \$50,000, 100% thereafter).

¹ Coverage amounts valid from January 1, 2022 to December 31, 2022. This chart describes coverage that is only available to persons who are at least 65 and Medicare-eligible.

² A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

³ If any of the cancer screening tests are not covered by Medicare, the plan will pay the usual and customary charges incurred.

Rate / Retiree / Month
\$467.18



**IMPORTANT TAKEAWAY
INFORMATION**



NEED TO KNOW INFORMATION

- Review the materials provided to you
 - You will receive your Express Scripts welcome packet (which will include your ID card)
 - You will receive your United American Medical welcome packet (which will include your ID card)
- **Please call BENISTAR with any questions at 1-800-236-4782**
- **BENISTAR HOURS:**
 - **Monday – Thursday 8:30am – 5:30pm**
 - **Friday – 8:00am – 5:00pm**