



# NALC Health Benefit Plan - 2025 Seminar NALC HBP High Option Aetna Medicare Advantage Plan and the SilverScript Prescription Drug Plan

Delivering 75 Years of Service – One Step at a Time

#### Today's Agenda

01

Medicare Explained 02

Prescription
Part D options
for our Medicare
eligible
annuitants and
Medicare
eligible family
members

03

Helping you make informed decision 04

Key Takeaways – What You Must Do



#### H.R. 3076, The Postal Reform Act of 2022

- Some of the areas that the bill addresses are:
- Finances and operations of the U.S. Postal Service (USPS).
- The bill repeals the requirement that the USPS annually prepay future retirement health benefits.
- Requires the Office of Personnel Management (OPM) to establish the Postal Service Health Benefits Program within the Federal Employees Health Benefits Program under which OPM may contract with carriers to offer health benefits plans for USPS employees and retirees.
- Coordinated enrollment of retirees under this program and Medicare

# **Medicare Explained**

#### Medicare Part A- Hospital Insurance

Covers Inpatient hospitalization and home health care

#### Medicare Part B- Medical Insurance

 Covers doctor's services, DME, outpatient procedures and labs

# Medicare Explained (continued)

#### Medicare Part C- Medicare Advantage Plan

• Offered by a private insurance and approved by Medicare. They generally offer more benefits not covered by traditional Medicare (Must be enrolled in Medicare Part A and B)

#### Medicare Part D- Prescription Drug Coverage

Covers Prescription Drugs

#### **Medicare Part D**

Included in the Postal Service Reform Act was the requirement for all PSHB plans to provide prescription drug coverage to all Medicare eligible Postal Service annuitants and their eligible family members through a Medicare Part D Plan.



#### What is the SilverScript PDP EGWP?

A Medicare Part D Prescription Drug Plan that is an Employer Group Waiver Plan (EGWP) An EGWP combines a standard Medicare Part D Plan with a union or employer's drug plan

The SilverScript PDP combines Medicare Part D coverage with additional coverage provided by NALC

#### **Automatic Enrollment**



Annuitants and eligible family members with Medicare Part A only or Medicare A and B as primary payors are automatically enrolled in SilverScript.



CMS guidelines require, a 21-day opt-out (hold) period. As a result, the effective date for SilverScript enrollment is the 1<sup>st</sup> day of the following month.



Members may choose to opt-out or disenroll from SilverScript however, the consequence of this action is, you will not have any PSHB program prescription drug coverage.

#### SilverScript Pharmacy Network and Access

- √ 65,000 + network pharmacies
- ✓ No exclusive pharmacy requirement-not limited to CVS
- ✓ NALC HBP does not control pricing at a non-network pharmacy; therefore, you may have a higher member cost-share.
- ✓ Members are not limited to CVS or any specific pharmacy to receive their specialty medications. If the pharmacy accepts Medicare, members can access their specialty prescriptions there.
- ✓ No refill limitations for out-of-network pharmacies

#### SilverScript Transition Fills



If a drug requires a Prior Authorization and is not on the formulary, you may be eligible for a transition fill until the prior authorization is complete.

After Using Transition
Fill the member must
switch to a covered
drug or request an
exception to maintain
coverage

# SilverScript Wraparound Coverage

The NALC SilverScript PDP combines an enhanced Medicare Part D formulary with additional coverage provided by the Plan.



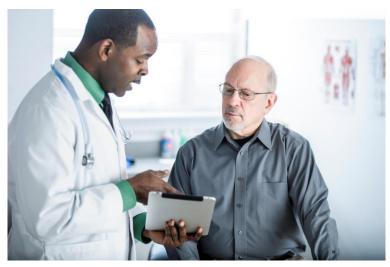
and...

The additional coverage aligns with the SilverScript prescription drug plan benefits offered to our non-Medicare enrollees.



#### SilverScript Prior Authorization and Appeals

- Standard PA 72 hours
- Expedited PA 48 hours
- Appeal option is available if coverage is denied





# SilverScript What Are The Costs?

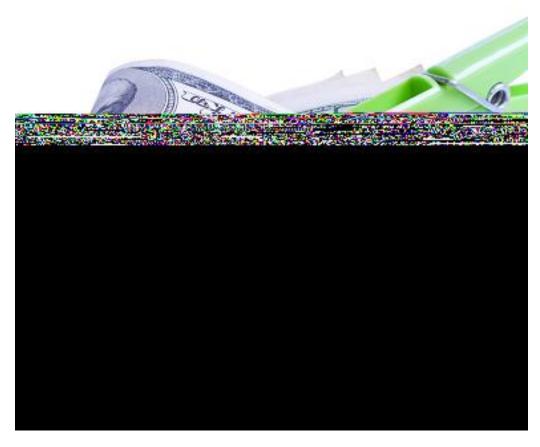
No additional premium- members pay the same NALC High Option Premium

\$2,100 annual out of pocket maximum per person

IRMMA (Income Related Adjustment Amount. This is determined by the Social Security Agency.

#### Medicare Part B Reimbursement Account (MRA)

NALC Health Benefit Plan has put tax-free money into your MRA to reimburse you up to \$600 for your Medicare Part B premiums when you remain enrolled in Medicare Parts A, B and the SilverScript Employer Prescription Drug Plan (PDP) sponsored by NALC Health Benefit Plan.



# Your MRA Explained

Each eligible participant will have their own HealthEquity account and use their information when submitting claims.

Only Medicare Part B premiums paid by you are eligible for reimbursement from this account.

Examples of proof of expenses include canceled checks, credit card statements or Social Security COLA statements.

Claims can be submitted online, via our Mobile App, faxed or mailed.

# Filing a Claim for MRA Reimbursement

Complete a claim form and mail via USPS or by fax

Online via vww.healthequity.com/wag

Mobile via EZ Receipts App

# **Resources and Support**



SilverScript PDP EGWP

• 833-272-9886

**NALC HBP** 

• 888-636-6252

# The NALC High Option – Aetna Medicare Advantage Plan



The NALC High Option Plan

– Aetna Medicare Advantage
is an enhanced level of
benefits for the NALC Health
Benefit Plan High Option
annuitants with Medicare
Part A and B.

#### NALC High Option – Aetna Medicare Advantage Plan

- Unlimited physical, occupational, and speech therapy visits
- Dental and vision coverage
- Prescription drug coverage
- Continued access to your doctors (see any doctor who is eligible to receive Medicare payment and willing to bill and accept payment from the NALC High Option Plan — Aetna Medicare Advantage)

#### **MAPD Covered Services Include:**

- Medical services & hospital care
- Preventive care
- Prescription drugs (Part D)
- Dental & Vision
- Hearing aids
- Worldwide coverage submit claims with itemized receipts for reimbursement

#### **MAPD Enhanced Benefits**



SilverSneakers® fitness membership



Transportation for non-emergency medical appointments



Resources for Living® – social support services



Wellness Rewards – incentives for health actions

#### MAPD - What are the costs?

- No additional premium cost (members will pay the same NALC High Option Plan premium amount)
- \$0 deductibles and coinsurance (medical)
- \$0 annual out-pocket-maximum (medical)
- A \$75 monthly Part B premium reduction (up to \$900 a year) for each eligible member
- \$2,100 annual prescription out-of-pocket maximum per person-Once met prescriptions are covered at 100%
- Maybe subject to IRMAA (Income Related Adjustment Amount for those whose income is above a certain amount (determined by SSA)

#### **MAPD Enrollment Process**

Current members can enroll online at
AetnaRetireeHealth.com/NALCHBP or call 866-241-0262
Information needed for enrollment includes:
☐ Medicare A&B effective dates
Medicare Beneficiary Identifier (MBI)
New members must first enroll in the NALC Health Benefit Plan High
Option
Information needed for enrollment includes:
Enrollment codes: 77A, 77B, or 77C
Medicare A&B effective dates
Medicare Beneficiary Identifier (MBI).

#### **MAPD Frequently Asked Questions**

Can members keep their current doctors?

Yes, as long as the provider:

- Accepts Medicare
- Agrees to bill Aetna
- Is coverage available outside the U.S.?
   Yes, members must submit itemized receipts
- Can members switch back to Traditional Medicare + NALC High Option?

Yes. Cancellation with MAPD will be effective on the last date of the month after disenrollment is received.

What if I'm receiving Hospice benefits
 Traditional Medicare covers hospice claims, and Aetna will review as secondary.

# **Resources and Support**



Aetna Medicare Advantage

• 866-241-0262

**NALC HBP** 

• 888-636-6252

# **Should I Choose SilverScript or Aetna?**

Based on the information provided, which Part D would you choose?



Do you understand the difference?

# SilverScript Opt-Out or MAPD Enrollment

Members who want to opt-out of SilverScript or enroll into the NALC Health Benefit Plan High Option – Aetna Medicare Advantage Program can make their selection through Aetna's easy to use portal.







#### Consequences for Dropping Medicare D

If members and eligible dependents choose to opt-out or disenroll from the PSHB Part D program, they will not have access to prescription drug benefits through the PSHB plan.

In summary: Members will continue to be enrolled in the health plan they select in PSHB; however, they will not be eligible or retain RX coverage

#### **Key Takeaways – What You Must Do**

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- Read your mail
- PO box attestation
- Demographics must be current (name and address)
- The Plan does not have flexibility in 2026 if a member loses Part D coverage. No Flexibility



# Together on the Journey!

Ask Me About it!

Support the NALC this open season, promote your health benefit plan!

