



Medicare enrollees

If you are retired, enrolled in any of the Medicare programs, and are looking for peace of mind for your secondary health insurance needs, then the NALC Health Benefit Plan is here for you!

Many retirees and those approaching age 65 don't fully understand how enrolling in Medicare, as well as having a secondary health insurance plan, can benefit them. As secondary payor, the NALC Health Benefit Plan will coordinate and supplement benefits with Medicare.

So what does this mean for you? No out-of-pocket costs on covered services and supplies. When Medicare is the primary payor, NALC will pay the balance of all Medicare covered charges, that is, the deductibles and any coinsurance that Medicare applies. It also means lower prescription costs. Medicare enrollees pay lower prescription drug coinsurance and copayments.

Medicare Part A—hospital insurance—is generally cost-free. Part A benefits help to pay for inpatient hospital care, inpatient skilled nursing facility care, home health care and hospice care. The deductibles and coinsurance amounts that Medicare applies to these charges are your responsibility. The NALC Health Benefit Plan will pay for Part A coinsurance and any deductible that Medicare requires you to pay. The claims will automatically come to us to pay; there's no paperwork on your part. Your claim is filed to Medicare by the facility, then directly to us.

Medicare Part B—medical insurance—is not cost-free. Anyone eligible for cost-free Part A can also enroll in Medicare Part B. If you receive Social Security benefits, the premium is withheld from your benefit check. Part B benefits help pay for doctor's charges, diagnostic services, ambulance charges, surgeries, hospital services, equipment, medical supplies and supplies not covered by Medicare Part A. If you are covered by Medicare Part B and it is the primary payor, the NALC Health Benefit Plan pays the Medicare Part B deductible and the balance of covered Part B expenses not paid by Medicare. You do not have any out-of-pocket expenses, because NALC supplements Medicare's payment up to 100 percent of the covered charge. Members whose primary payor is Medicare Part B will pay nothing for up to a 30-day sup-

ply of NALC Senior Antibiotic generic drugs purchased at an NALC CareSelect or NALC preferred pharmacy.

Medicare Part C—Medicare Advantage plans—are health plan options that are part of the Medicare program. If you join one of these plans, you generally get all of your Medicare-covered health care through that plan. This coverage can include prescription drug coverage. Medicare Advantage plans include Medicare health maintenance organizations (HMOs), preferred provider organizations (PPOs), private fee-for-service plans, and Medicare special needs plans. When you join a Medicare Advantage plan, you use the health insurance card that you get from the plan for your health care. In most of these plans, there are extra benefits and lower copayments than in the original Medicare plan. However, you may have to see doctors who belong to the plan or go to certain hospitals to get services.

Medicare Part D—prescription drug plan. Everyone enrolled in Medicare is eligible to enroll in a Medicare prescription drug plan. There are many plans to choose from, and each has a separate premium. When Medicare Part D is the primary payor for your prescription drugs, the NALC Health Benefit Plan will waive your retail fill limitations and retail days' supply limitations. We will coordinate benefits as secondary payor and pay the balance after Medicare's payment or our drug benefit.

You can get more information about Medicare plan choices by calling 800-633-4227 or by visiting medicare.gov.

As each month passes and we draw closer to Open Season, I would like to take this opportunity to remind each reader about the Federal Employees Health Benefit Program's (FEHBP) "Five-Year Rule" regarding eligibility for retiree health benefits. Please keep in mind that you must be covered by a health plan in the Federal Employees Health Benefit Program for five years before you retire in order to continue coverage into retirement. However, the rule does not require that you must be in the same plan for the five years prior to retirement. ☒