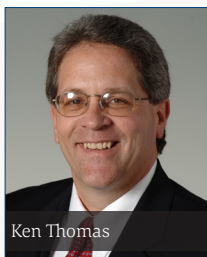


opersHealthCare

For participants in the OPERS health care plan.

Connector update 2016 – A message from Ken Thomas, OPERS Board of Trustees, Health Care Committee Chair and Karen Carraher, OPERS Executive Director



Ken Thomas

Dear Medicare retirees:

First and foremost...THANK YOU! As the initial quarter of our transition to the Connector and HRA reimbursement process comes to a close, we want you to know how much we appreciate your patience, understanding and feedback. The OPERS Board and staff are keenly aware of the challenges some of you have faced with both the enrollment and reimbursement processes. We apologize if OPERS, or our vendors, have failed to meet your expectations for quality service. We are committed to seeing our retirees through this entire process and working to constantly improve your retirement experience.



Karen Carraher

OPERS has been completely committed to addressing the unique needs and concerns of the different groups making up our retiree population. We have provided specialized communications for retirees without Medicare Part A, re-employed retirees, disability retirees, retirees residing in nursing homes, retired judges and spouses to name a few. Never before have we created this level of customized information.

Our efforts have been laser-focused with a single outcome in mind - to provide retirees with access to and increased options for affordable health care. This focus remains unchanged. We implemented the OPERS Medicare Connector with the mandate to “leave no one behind”. We reached out to eligible retirees several different times using a variety of communications. We are grateful for the help of our partners including PERI, AFSCME, Ohio Municipal League, Ohio Retirement Study Council and the Ohio legislature who assisted us in our never-ending attempts to “get it done” and “get it right”.

Again, we thank you for your understanding and patience. Please know we are continually committed to providing you a safe and secure retirement. We do not take this commitment lightly. It is at the forefront of our minds as we navigate the strong headwinds of global economic uncertainty and the societal changes needed for meaningful health care delivery.

Sincerely,



Ken Thomas

Karen E. Carraher




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Who do I call with Connector questions?

Who should you call . . .	With questions about . . .
 <p>OneExchange 1-844-287-9945 www.Medicare.oneexchange.com/opers</p>	<ul style="list-style-type: none"> • Reimbursements for medical premiums and qualified medical expenses • HRA account fees • Pursuing plan changes during the Medicare Open Enrollment period (Oct. 15 – Dec. 7) • How to navigate Medicare when you have a life change (marriage, divorce, birth, death) • Escalated claims issues not solved by your medical carrier
 <p>OPERS 1-800-222-7377 www.opers.org</p>	<ul style="list-style-type: none"> • Your pension benefit • Optional vision and dental coverage (including premium receipts) • Your HRA allowance amount and how it is calculated
 <p>Your medical and/or prescription insurance carrier</p>	<ul style="list-style-type: none"> • Medical and pharmacy plan coverage (copays, co-insurance, deductibles, networks, covered procedures, etc.) • Services offered by carrier • Making premium payments • Questions about medical and pharmacy claims





Requesting reimbursement for your OPERS and Medicare Part B premiums

To help you get a handle on the reimbursement process, we've posted new videos and recorded presentations that walk you through the steps to receiving reimbursement for OPERS dental, vision and non-Medicare plan premiums as well as your Medicare Part B premiums. You can find these resources online at www.opers.org.

To access the videos, click on the red YouTube link from the home page. To find the recorded presentations, click "Connector & HRA" from the quick links on the right side of the home page. From the Connector & HRA page, click on the HRA Allowance link. You'll find the presentations under the heading of HRA References on that page.

Below we've provided a summary of the processes.



You asked *and we listened!*

You can now have a recurring reimbursement for your OPERS dental, vision and non-Medicare medical plan premiums. Request your reimbursement just once and receive it every month for the entire year.

How it works

When you're ready to submit a claim to OneExchange, you'll need two items:

- 1 Health Care Premium Receipt from OPERS and;
- 2 Reimbursement Form from OneExchange.

You can print a **Health Care Premium Receipt** directly from your OPERS account. From your account homepage, scroll to the Requestable Documents section and select Health Care Premium Receipt. If you don't have a computer call OPERS for the premium receipt.

Reimbursement for your OPERS premiums can be recurring for the entire year or submitted manually for a specified length of time. Both the **recurring and manual Reimbursement Form** can be found at www.Medicare.oneexchange.com/opers. From the home page, scroll down to the section titled HRA Information and select the Reimbursement Form you need. **If you are requesting recurring reimbursement, be sure to put Dec. 31, 2016 as the end date for the reimbursement period. Or you can call OneExchange and ask for the form.**

Mail or fax the completed form and the premium receipt to the address or number listed at the top of the reimbursement form.



Requesting reimbursement for Medicare Part B premiums

In 2016, OPERS provides a monthly reimbursement of \$31.81 toward your total Medicare Part B premium. This reimbursement is added to your monthly pension. The remaining

portion of your Medicare Part B premium may be reimbursed from your OneExchange HRA.

When you're ready to submit a claim to OneExchange, you'll need two items:

- 1 Proof of Medicare enrollment
- 2 A Reimbursement Form from OneExchange

As proof of Medicare enrollment, OneExchange will accept a:

- Award or Benefit Verification Letter from Social Security;
- Medicare bill;
- Bank statement that shows a payment made to Medicare; or
- Payment coupon from Social Security.

Reimbursement for your Medicare Part B premiums can be recurring for a calendar year or submitted manually. Once you have your proof of Medicare enrollment, you can complete a Reimbursement Form. Both the automatic and manual Reimbursement Form can be found at www.Medicare.oneexchange.com/opers. From the home page, scroll down to the section titled HRA Information and select the Reimbursement Form.

Mail or fax the completed form and proof of enrollment to the address or number listed at the top of the reimbursement form.

Remember – You can only request reimbursement for the amount you pay monthly for Medicare Part B coverage, not including other reimbursements. Therefore, on the reimbursement form, you must request the amount you pay for Medicare Part B minus the amount OPERS reimburses you (\$31.81).





For re-employed retirees

If you are receiving a pension benefit from OPERS and have returned to work in an OPERS-covered position after retirement, you are a re-employed retiree. Health care coverage options are different for re-employed retirees.

OPERS offers valuable resources designed to help you navigate the re-employment and health care process. If you are considering becoming re-employed or leaving your re-employment position, please visit www.opers.org/retirees/re-employment. The Web pages provide a variety of

information on pension benefits and health care coverage. There is even a decision tool to help you decide if re-employment is right for you. You can also call OPERS with questions or schedule a counseling session.

If your re-employment status changes, please be sure your employer informs OPERS of the change in a timely manner. This will allow OPERS to make the required changes to your health care and avoid any gaps in coverage.



Keep money in your pocket with *My Care Compare* (for non-Medicare retirees)

Medical Mutual offers My Care Compare, an easy-to-use tool identifying service providers in your area offering the lowest costs for laboratory services, X-rays, MRIs and CT scans, physical therapy and even some surgeries. This tool also compares patient satisfaction with physicians and quality ratings for facilities in your area.

As the administrator of the OPERS health care plan for non-Medicare participants, Medical Mutual covers 40 lab services up to a certain dollar amount, or coverage maximum. You can choose any network lab provider, but if you do your research, you could save some money. If you choose a lab whose rates are above the coverage maximum, you will be charged the additional difference between the coverage maximum and the provider's rate.

My Care Compare helps you to plan ahead and know where to go for the best price. Use this tool to learn your lab options ahead of time and keep them in your back pocket for your next office visit.

Visit www.MedMutual.com/MyCareCompare, or call Medical Mutual Customer Care at 877-520-6728 to learn more. Estimates do not guarantee actual cost, services, coverage or payment and are subject to your cost-sharing responsibilities.



*OPERS retirees have searched
My Care Compare more than
21,000 times since its launch
last March.*

21,000



Clip coupons for savings on brand name drugs (for non-Medicare retirees)

It's no secret that generic medications are a cost-saving alternative to higher cost brand or specialty medications. When there isn't a generic or other low cost option available, you may still be able to save money by keeping an eye out for coupons.

Coupons for brand name medications can be found in the form of discount cards as well as in electronic and paper formats. You won't find

these coupons in your Sunday paper, but they can be found on drug manufacturer websites, in magazines and even at your doctor's office.

To find out if a coupon is available for your brand medications, talk to your doctor, ask your pharmacist, or visit the drug manufacturer's website. **Coupons are only available to participants not yet eligible for Medicare.**

How it works

- ✓ A participant with Multiple Sclerosis takes a specialty drug, Avonex. Avonex costs \$5,700 and the participant has a \$0 copay coupon from the drug manufacturer.
- ✓ Express Scripts' specialty pharmacy, Accredo, contacts the participant for payment. He provides Accredo the coupon information. With the coupon, he owes a \$0 copay. Accredo then contacts the drug manufacturer for reimbursement of the copay amount.

If the brand or specialty drug you take does not have a generic alternative or a manufacturer coupon, you may want to ask your doctor if a lower cost, equally effective alternative drug is available.

→ **To keep premiums down, consider using a coupon for prescriptions when a generic or lower cost option is not available. However, be aware that even with a coupon, the brand drug may not be the best and least expensive option for you.**

FAST FACT: 44% of commercially insured patients' specialty medication prescriptions involved copay coupons in 2013.

(Source: Health Affairs Journal)



Learn to manage a chronic condition and earn \$50 for health expenses

Are you a non-Medicare retiree living with a chronic health condition like arthritis, diabetes, heart disease or depression? The Ohio Department of Aging and Ohio's area agencies on aging offer the HEALTHY U Ohio program designed to teach strategies for effectively managing the symptoms of a long-term condition.

Not only will you receive helpful advice on managing your condition, but completion of an in-person Healthy U workshop will earn you a



\$50 Retiree Medical Account incentive in 2016. Workshops include six weekly sessions and have been proven to help participants self-manage their health.

To earn your \$50 RMA deposit, you must be enrolled in the OPERS Retiree Health Plan administered by Medical Mutual.

To learn more and find a workshop near you, visit www.aging.ohio.gov or call your local area agency on aging at 1-866-243-5678. When you sign up, be sure to identify yourself as a participant in the OPERS Retiree Health Plan.

Medical homes offer savings and coordinated care

Savings on copays and the ability for different doctors to coordinate your care are just a couple reasons to use a SuperMed® Network provider who is recognized as a Medical Home. Led by a Primary Care Provider, a medical home is a team of professionals, working together to improve the quality of care for patients at all stages of life. Patients and family members are able to engage in care planning and decision making while providers focus on improving patient outcomes. Over 1,900 medical home providers participate in the Medical Mutual SuperMed® Network available in Ohio.

The OPERS Retiree Health Plan for non-Medicare participants offers lower copays for participants who use medical home providers because these providers have proven to increase access to care,

control costs and improve patient satisfaction. If you are a non-Medicare plan participant who is currently treated by more than one physician, or a family member managing the care for a loved one, you may want to learn more about medical homes. Please visit www.opers.org for more information.



FAST FACT: Medical homes have been shown to reduce unnecessary utilization of services including emergency rooms, hospitalizations and hospital re-admissions

(Source: Health Affairs Journal)



Know what questions to ask your doctor



Choosing Wisely can help

Through a link on our website, OPERS offers you access to Choosing Wisely, a campaign offered by Consumer Reports. Choosing Wisely encourages patients and physicians to discuss medical tests and procedures to determine their necessity. The site offers articles such as **5 Questions to Ask Your Doctor Before You Get Any Test, Treatment Or Procedure**. Use this resource to start a conversation with your doctor when selecting the right treatment plan.

Choosing Wisely can be found by visiting www.opers.org and clicking on Health Care and then Get Healthy, Stay Healthy. Check the site often. New topics such as diabetes, depression and cancer will be added this year.

Consumer Reports Best Buy Drugs

Consumer Reports, the engine behind Choosing Wisely, offers other health care resources such as Best Buy Drugs. The Best Buy Drugs campaign provides patients and doctors with information to guide prescription drug choices based on effectiveness, a drug's track record, safety and price. View informative videos, read money-saving guides and more before your next appointment. These tools may help build the foundation for more effective patient/doctor conversations to come. Visit www.consumerreports.org to learn more.

Check out the enhanced **Choosing Wisely website** at www.opers.org!



Ohio Public Employees Retirement System

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