



Open Enrollment Reminder

Remember the Open Enrollment Deadlines

Midnight September 10	Online enrollment requests
Postmarked by August 31	Paper enrollment requests
September 30	Flexible Spending Accounts (online and paper enrollment requests)

Online enrollment via Member Online Services (MOS) is the preferred option because it is the easiest and most efficient method to enroll in or make changes to your coverage. No other enrollment method provides a confirmation page in real-time that verifies your enrollment was submitted. MOS also provides a premium calculation for the coverages you select. To access MOS, visit rsa-al.gov and click on **Member Log In** at the top of the page.

Reminder: Multi-Factor Authentication (MFA)

Keeping members' financial and protected health information (PHI) safe is a top priority for the RSA and PEEHIP. To continue strengthening the protection available, MFA is now required to access MOS accounts at mso.rsa-al.gov. If you have not yet used this security feature, you will need to set up your MFA contact information when visiting MOS. Each time you log in afterward, you will be sent a verification code to enter online to log into your account, which ensures it is you and not someone attempting to steal your information.

To access MOS:

1. Visit rsa-al.gov and click on **Member Log In** at the top of the page.
2. Enter your self-selected User ID and Password.
3. Enter your MFA code, as explained above.
 - ◆ If you need to register or reregister to create a new User ID and Password, click **Need to register?** You will need your PID number to register. Your

PID can be found on previous RSA statements or recent correspondence from PEEHIP. If you do not know your PID, please click **Need a PID? (Request PID Letter)** for steps to have your PID mailed to you at your current mailing address on file with the RSA.

- ◆ If you do not have internet access but would like to make Open Enrollment changes, you can request a NEW ENROLLMENT AND STATUS CHANGE form from Member Services by calling 877.517.0020.

You do not need to do anything or contact PEEHIP during Open Enrollment if you are satisfied with your current coverage. If you take no action, you and your eligible dependents will remain on your current plan(s).

Exception: If you want to enroll in or renew your **Flexible Spending Accounts (Flex) or Premium Assistance Program Discount**, you must reenroll each year as these two programs do not automatically renew. Enrollment in Flex can be done online, but enrollment in Premium Assistance must be done by submitting a completed paper PREMIUM ASSISTANCE APPLICATION (PAA) to PEEHIP along with your current year federal income tax return transcript as shown on Step 2 of the application. The transcript is a required document and cannot be substituted with a copy of your tax return or your supporting income documents. See the **Premium Assistance Discounts** article for more information.

Need to send documents to PEEHIP? Save time by uploading them through MOS!

As part of MOS, you can electronically upload the required documents directly to PEEHIP. This includes proof of coverage letters from other insurance, marriage and birth certificates, or any other document indicated as required when you make your coverage selection. Simply log in at <https://mso.rsa-al.gov>, access your **Member Correspondence** screen, and then click on **Click here to upload a document to the RSA**. Uploaded documents must first be saved as a PDF. ●

Premium Assistance Discounts

PEEHIP can provide premium assistance discounts off your PEEHIP Hospital Medical premium if you are an active or retired member who qualifies based on your total combined household income and family size. The federal government sets the income and family size qualification criteria each year, and, if you qualify, you may be granted a discount of 10, 20, 30, 40, or 50% off your PEEHIP Hospital Medical premium. The qualification criteria can be found on PEEHIP's Premium Assistance webpage at rsa-al.gov/peehip/premiums/premium-assistance-program.

If you believe you qualify and would like to apply for this premium assistance, please print and submit the updated PREMIUM

ASSISTANCE APPLICATION (PAA) from the website listed above along with your current year federal income tax return **transcript** as shown under Step 2 on the PAA form. If you do not have access to the internet, you can call PEEHIP at 877.517.0020 to request a form be mailed to you. To receive your free transcript, visit <https://www.irs.gov/individuals/get-transcript>.

The premium discount does not renew each plan year. If you are currently receiving a premium assistance discount, you must reapply now during PEEHIP's Open Enrollment (ending August 31, 2024) to potentially continue a premium discount into the new plan year beginning October 1. ●

Retirees [nationwide] face significantly higher Medicare Part D prescription drug premiums in 2024. What to know

By Lori Konish, CNBC.com

A new law is poised to cap seniors' prescription drug costs covered under Medicare, starting in 2025.

But retirees may be in for a shock next year — significantly higher Medicare Part D premiums for prescription drug coverage.

The cost of the average premiums will rise between 42% and 57% in 2024 compared to 2023 in five states with the largest populations of individuals over 65 who are on Medicare, according to a new analysis by HealthView Services, a provider of health care cost data.

That represents an increase ranging from \$128.32 to \$380.96 from 2023 to 2024, according to the firm. The calculations are based on three of the largest Medicare providers in each state.

The five states include California, Florida, New York, Pennsylvania, and Texas.

The increased costs come as new changes put into law through the Inflation Reduction Act will lower the out-of-pocket maximum drug costs for seniors to \$2,000 in 2025, down from more than \$7,000 in 2023.

Other changes put into place with the legislation — such as a \$35 monthly cap on insulin and access to free vaccines — have already gone into effect.

Insurers may pay higher costs due to the higher out-of-pocket limits, and higher premiums is a way of getting beneficiaries to share that burden, according to Ron Mastrogiovanni, founder & CEO of HealthView Services.

Today, the federal government picks up 80% of the more than \$7,000 maximum spent on Part D prescription drugs, while insurers cover the remaining 20%, Mastrogiovanni said.

When the out-of-pocket max drops to \$2,000, insurers will cover 60% to 80% of the costs, with the federal government picking up the difference.

About a quarter of Medicare Part D beneficiaries are expected to go over that \$2,000 limit.

“The insurance company has to do something to make up

for that loss, given the number of people that may go over,” Mastrogiovanni said.

“Therefore, we who are on Medicare Part D are going to be sharing in that cost,” he said.

Research from KFF, an independent provider of health policy research, has also found monthly premiums for Part D will be “substantially higher” in 2024. The national average monthly Part D premium is projected to increase 21% in 2024 to \$48, up from \$40 in 2023, according to KFF.

Those monthly premiums may increase again in 2025 as the new policy takes effect, according to Juliette Cubanski, deputy director of KFF's program on Medicare policy.

“It's possible that between 2024 and 2025 we could also see another round of premium increases again,” Cubanski said.

That would be a bigger concern for people who are in stand-alone drug plans, she noted, than for people who are in Medicare Advantage plans, which have rebates available that can help shield enrollees from higher premiums costs.

Higher Medicare costs to offset Social Security COLA

Rising Medicare Part D premiums come as retirees will receive a much smaller Social Security cost-of-living adjustment in 2024 — 3.2% — compared to the 8.7% boost to benefits they received in 2023.

The average Social Security beneficiary will get about \$700 more per year in 2024 through the cost-of-living adjustment, estimates Michael Daley, director of marketing at HealthView Services.

But higher costs for next year, particularly with regard to Medicare, may consume most of that increase.

“If you are on a high-end Part D plan, on average, 54% of your cost-of-living increase in Social Security is going to go for paying

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the additional costs that you're going to have to cover for Part D premiums," Daley said.

That's as standard premiums for Medicare Part B, which covers services from doctors and other health care providers, will increase by \$9.80 per month to \$174.70 in 2024, from \$164.90 per month this year. High-income beneficiaries will pay higher premiums.

How to manage rising Medicare costs

With Medicare open enrollment available [October 15] through Dec. 7, beneficiaries may take steps...to mitigate the higher expected costs for next year.

Aside from premium changes, plans may also shift the prescription drugs they cover and the cost-sharing amounts they charge, Cubanski noted.

"It's always good advice during this open enrollment period for people, even if they're happy with the coverage that they have, just to take a look at other options and see whether they might be able to get better coverage," Cubanski said.

Finding the best coverage for your budget can help you avoid having to cut back on prescription drugs or doctors' visits, according to Mastrogiovanni.

Medicare beneficiaries should also be aware that a 12% annual premium penalty applies for those who don't sign up for prescription drug coverage at age 65, he said.

"Even if you're not on any drugs and you're going into retirement, I strongly recommend purchase the least expensive plan you can," Mastrogiovanni said. ●

Wellness Screening Deadline is August 31

PEEHIP members and spouses enrolled in the Blue Cross Blue Shield Group #14000 Plan, the deadline to get your yearly wellness screening is August 31. Do

not delay! Make plans to receive your free screening today to avoid the \$50 wellness premium beginning October 2024. ●

Medicare-Eligible PEEHIP Members

The information below pertains to PEEHIP members and dependents enrolled in the PEEHIP UnitedHealthcare® Group Medicare Advantage (PPO) Plan. For more information, visit rsa-al.gov/peehip/retirees/.

Let's Move by UnitedHealthcare®

Join the healthy, happy movement

At no additional cost to you, Let's Move by UnitedHealthcare® is here to help keep your mind, body, and social life active. With simple resources, tools, fun events, and personalized support, we'll help you explore ways to eat well, stay connected, and be financially, physically, and mentally fit.

- ◆ Let's eat well: Treat yourself to tasty recipes, fun cooking events, and support.
- ◆ Let's get fit: Get free access to at-home workouts, participating gyms, and local fitness events.
- ◆ Let's live well: Learn ways to help manage your financial well-being.
- ◆ Let's be mentally fit: Support your mental health with services, online tools, and resources.
- ◆ Let's make friends: Find ways to connect through local and online events, classes, volunteering, and more.
- ◆ Let's support: Find caregiver resources to help you support loved ones and yourself.

Start today by visiting letsmovebyuhc.com.

Virtual Doctor Visits

Talk to a doctor from anywhere

With Virtual Doctor Visits, you are able to talk to a doctor by phone or video¹ from your computer, tablet, or smartphone – 24/7, day or night. You can ask questions, get a diagnosis, or even get medication prescribed and have it sent to your pharmacy. Register and complete a brief medical history today so you will be ready when you need care. You can request a doctor's visit whenever you need one or schedule one at a convenient time.

Amwell®, Doctor on Demand™, and Teladoc® are part of the UnitedHealthcare® provider network bringing you this innovative service.²

Ways to access Virtual Doctor Visits

On your computer:

- ◆ Visit uhcvirtualvisits.com and click on **Choose a Medical Provider**

On your tablet or smartphone:

- ◆ Download the Amwell® app
- ◆ Download the Doctor on Demand™ app
- ◆ Download the Teladoc® app or call 855.615.8335 to set up your account and request a visit by phone

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Answers to common questions

How much does it cost?

A virtual doctor visit with Amwell®, Doctor on Demand™, and Teladoc® is \$0. Please refer to your *Summary of Benefits or Evidence of Coverage* for more details.

How quickly can I talk to someone and how long does a visit last?

Once a request for a visit has been submitted, wait times vary based on availability. A typical visit lasts 10–15 minutes.

Who will I be talking to?

You can find a list of participating Virtual Doctor Visit providers by visiting uhcvirtualvisits.com and selecting “Choose a Medical Provider.”

Can I use it for any medical situation?

Virtual Doctor Visits may be best for situations like a cold, flu, skin rash, eye issue, or many other common conditions that may be treatable without a physical exam or X-ray. You will

be advised if an in-person visit is appropriate. Virtual Doctor Visits are not appropriate for serious or emergency medical situations.³

Examples of when you could use a Virtual Doctor Visit include allergies, bladder/urinary tract infections, bronchitis, cough/cold, diarrhea, fever, migraine/headaches, pink eye, rash, flu, sinus problems, sore throat, stomachaches, a quick assessment of severity, and much more.

Examples of when you should **not** use a Virtual Doctor Visit include anything requiring a hands-on exam, test, or X-ray, cancer or other complex conditions, chronic conditions, international visits, sprains or broken bones, or other injuries requiring bandaging.

If you are experiencing a medical emergency, you should seek appropriate emergency medical assistance such as calling 911. ●

Questions?

Please call UnitedHealthcare® 877.298.2341, TTY 711, 8 a.m. – 8 p.m., Monday – Friday.

¹Data rates may apply.

²Providers listed may not be available in every area. Other providers are available in our network. Contact the customer service number on the back of your member ID card for more information.

³This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room.

Attend a meeting to learn about the PEEHIP UnitedHealthcare® Group Medicare Advantage (PPO) Plan and what to expect for your plan benefits in 2025.

In June of this year, UnitedHealthcare® sent invitations for summer education events to all PEEHIP members enrolled in the plan. If you have not yet attended a meeting, there are still in-person opportunities as well as online opportunities available. Join UnitedHealthcare® to learn about plan benefits like:

- ◆ Nationwide coverage
- ◆ Medical and prescription drug coverage
- ◆ Free gym membership with Renew Active®
- ◆ Rewards for completing health care activities and more

In-person

Thursday, August 8
10 a.m. – 12 p.m.
Soiree Event Gallery
2132 Lorna Ridge Ln
Birmingham, AL 35216

Friday, August 16
9 a.m. – 11 a.m.
Double Tree by
Hilton Decatur Riverfront
Decatur, AL 35601

Monday, August 21
9 a.m. – 11 a.m.
Demopolis City Civic Center
501 N Commissioners Ave
Demopolis, AL 36732

Online

Tuesday, August 13
2 p.m. – 4 p.m. CT
Event number: 2661 107 3778
Event password: Peehip2024!

Go to retiree.uhc.com/peehip and look for the meeting schedule document on the main page for instructions on how to join the online meeting.

To dial-in only for the online meeting:

If you don't have access to the internet, you can call 877.692.8955, TTY 711, to hear the presentation. ●