



Frequently asked questions

PEEHIP UnitedHealthcare® Group Medicare Advantage (PPO) Plan

Contact Information

1. How do I contact UnitedHealthcare regarding my PEEHIP Group Medicare Advantage Plan?

You can call UnitedHealthcare Customer Service toll-free at **1-877-298-2341**, TTY **711**, 8 a.m.–8 p.m. local time, Monday–Friday or you can register or sign in to your secure, member website at <u>retiree.uhc.com/peehip</u>

2. How do I contact PEEHIP Member Services?

You can call PEEHIP Member Services at **1-334-517-7000** (Local Number) or **1-877-517-0020** Toll-free Number 8 a.m.–5 p.m. CT, Monday–Friday or you can visit the PEEHIP website at <u>www.rsa-al.gov/PEEHIP</u>

Enrollment

- 3. What are the requirements to be enrolled in the PEEHIP Medicare Advantage Plan?
 - You must be entitled to Medicare Part A and enrolled in Medicare Part B to enroll in this plan
 - If you're not sure if you are enrolled in Medicare Part B, check with Social Security. Visit ssa.gov/locator or call 1-800-772-1213, TTY 1-800-325-0778, 8 a.m.–7 p.m., Monday–Friday, or call your local office
 - You must continue paying your Medicare Part B premium to be eligible for coverage under this group-sponsored plan
 - If you stop paying your Medicare Part B premium, you may be disenrolled from this plan
 - Your permanent address must match what the Centers for Medicare & Medicaid Services (CMS) has on file. If your mail goes to a P.O. Box, you will need to provide a physical address that matches CMS' records. UnitedHealthcare is able to list two addresses on file, if needed.

4. If I'm not enrolled in Medicare Part B, will I lose my medical coverage with PEEHIP?

Yes. If you stop paying your Part B premium, you risk losing your PEEHIP Medicare Advantage coverage for you and any covered dependents. If you have questions on Medicare Part B, contact your local Social Security office to discuss your options.

5. How will I be enrolled in the PEEHIP UnitedHealthcare Medicare Advantage Plan? Do I need to do anything?

You will be automatically enrolled for coverage as will qualifying spouses and dependents if you are already covered or enrolled with PEEHIP.

6. What if I do not want to enroll in the PEEHIP UnitedHealthcare Medicare Advantage Plan?

If you do not want to be enrolled in this plan, please call PEEHIP at **1-334-517-7000**, TTY **711**, or toll free at **1-877-517-0020**, TTY **711**, Monday–Friday, 8 a.m.–5 p.m. CT. If you choose to opt out of this plan, please note, UnitedHealthcare is the only coverage offered for PEEHIP Medicare eligible retirees.

7. What happens if I select another Medicare Advantage plan in addition to accepting enrollment in the PEEHIP UnitedHealthcare Group Medicare Advantage plan?

Medicare has rules about what types of coverage you can add or combine with a groupsponsored Medicare Advantage plan.

- You may be enrolled in only one Medicare Advantage plan or one Medicare Part D prescription drug plan at a time
- The plan you enroll in last is the plan that the Centers for Medicare & Medicaid Services (CMS) considers to be your final decision
- If you enroll in another Medicare Advantage plan or a standalone Medicare Part D prescription drug plan after your enrollment in this group-sponsored plan, you will be disenrolled from this plan
- Any eligible family members may also be disenrolled from this group-sponsored plan. This means that you and your family may not have hospital/medical or drug coverage through PEEHIP

Medicare Advantage and VA Benefits

8. How does the PEEHIP UnitedHealthcare Group Medicare Advantage Plan coordinate with VA benefits?

For individuals with Veteran's Affair (VA) benefits:

- Retirees who have both Medicare Advantage and Veteran's Affairs (VA) benefits can receive treatment under either program, but not under both for the same service.
- If you utilize VA benefits then the Medicare Advantage plan will not pay as a secondary for the same service, and vice versa.
- When you receive care you will need to decide which benefits to use each time you go to a provider or get health care.

For individuals with TRICARE[®] for Life:

• Tricare[®] for Life beneficiaries can enroll in Medicare Advantage plans and Tricare may reimburse your copayments for services covered by Tricare. Tricare pays secondary to the Medicare Advantage plan.

Medicare Advantage and Medicare Supplement

9. How does the PEEHIP UnitedHealthcare Group Medicare Advantage Plan differ from Original Medicare?

PEEHIP has chosen a UnitedHealthcare Group Medicare Advantage plan. The word "Group" means this is a plan designed just for PEEHIP. Only eligible PEEHIP retirees and their eligible dependents can enroll in this plan.

"Medicare Advantage" is also known as Medicare Part C. These plans have all the benefits of Medicare Part A (hospital coverage) and Medicare Part B (doctor and outpatient care) plus extra programs and benefits that go beyond Original Medicare (Medicare Parts A and B).

You will continue to have the full benefits of Original Medicare with the UnitedHealthcare Group Medicare Advantage Plan.

10. Can I enroll in a Medicare Supplemental Plan in addition to the PEEHIP UnitedHealthcare Group Medicare Advantage Plan?

No. There are no additional benefits to enrolling in a supplemental plan in addition to the Group Medicare Advantage Plan. A Medicare Supplement plan will not pay any benefits while enrolled in a Medicare Advantage plan.

ID Cards

11. Will I have the same ID number or ID card as my covered spouse or dependent?

No. In December, you and any Medicare-eligible covered dependents should have received your own individual ID cards with your own unique ID number from UnitedHealthcare. You will no longer need to show your government-issued red, white and blue Medicare ID card, but keep it in a safe place. Instead, you will want to carry your new PEEHIP UnitedHealthcare Medicare Advantage Plan ID card with you.

Network and Providers

12. Will I pay the same amount if I see a provider who is out-of-network? If so, why does my plan have a "network"?

You can see any provider (in-network or out-of-network) at the same cost share as long as they participate in Medicare and accept the plan.¹ UnitedHealthcare has a large network of contracted providers. The advantage of seeking care from one of these providers is that they will handle any required prior authorizations for you, should they be needed for your care. In-network providers will also submit claims for you. Should you decide to receive care

from an out-of-network provider, you may be required to submit your own claim to UnitedHealthcare for reimbursement.

13. Do I have to switch providers?

Your PEEHIP UnitedHealthcare Group Medicare Advantage Plan has a large network of doctors, hospitals, and other providers.² You can see any out-of-network provider with the same cost share as an in-network provider if the provider participates in Medicare and accepts the plan.

You can go to **retiree.uhc.com/peehip** to search for a network provider using the online directory or call UnitedHealthcare's Customer Service at **1-877-298-2341**, TTY **711**.

14. What if my provider is not willing to accept my plan?

It is always a good idea to check with your doctor when making an appointment to ensure that they accept Medicare and the UnitedHealthcare Group Medicare Advantage Plan. UnitedHealthcare Customer Service can also call the provider on your behalf if you contact us at **1-877-298-2341**, TTY **711**.

In very limited cases, a provider may accept Medicare but won't accept the plan. If this small exception applies to your provider, you will still receive coverage under the UnitedHealthcare Group Medicare Advantage Plan, but may need to take some additional steps such as:

Call UnitedHealthcare Customer Service **1-877-298-2341**, TTY **711**. UnitedHealthcare will call the provider's office to discuss your Group Medicare Advantage Plan's features and to educate the provider on how the Plan works.

If a provider refuses to directly bill us, they may ask that you pay the full allowable amount upfront. In that case, you can pay the doctor and then submit a claim to us. You'll be reimbursed for the cost of the claim minus your cost share.

15. Is University of Alabama at Birmingham (UAB) a network provider?

No, UAB is not an in-network provider, however, UAB has agreed to accept the PEEHIP UnitedHealthcare Medicare Advantage Plan and will continue to provide services for PEEHIP members.

Emergency Services

16. Am I covered for services if I travel outside of the United States?

Yes. Your PEEHIP Group Medicare Advantage Plan will cover you for worldwide emergency services, 24 hours a day. If you become sick or injured with a life-threatening emergency while traveling abroad, you can seek emergency care and it will be covered under the Plan. You may have to pay out-of-pocket for these services in some countries and seek reimbursement when you return to the United States.

17. Are Air/Medevac flights covered?

Yes. Air/Medevac flights are covered by the Plan if you require immediate and rapid ambulance transportation that ground transportation could not provide based on the first responder's decision at the time of the event. This service does not include transportation back to the United States if you are out of the country.

Rewards and Fitness Membership

18. Am I able to earn rewards for completion of certain activities?

Yes, you will be able to earn rewards for completing and reporting the following activities³:

- Completing your Annual Wellness Visit (one visit between January and December)
- Completing a Provider Check-in
- UnitedHealthcare® HouseCalls visit
- Sign up for paperless delivery of plan documents
- Sign up for text messages from UnitedHealthcare
- Participating in certain Get Moving Wellness Program activities

19. Is SilverSneakers® covered by this plan?

No. Your PEEHIP UnitedHealthcare Group Medicare Advantage Plan provides you with access to the largest nationwide fitness network through the Renew Active Program. Renew Active replaces the Silver Sneakers Program beginning January 1, 2023. Your new Renew Active Program includes:

- A free gym membership at a fitness center you select from our large nationwide network, which includes many YMCA's and premium gyms and fitness locations
- Thousands of on-demand workout videos and live streaming fitness classes
- Social activities at local gyms and wellness classes and events online through the Fitbit[®] Community. No Fitbit device is needed.
- An online brain health program with exclusive content for Renew Active members through AARP[®] Staying Sharp[®]

20. How do I activate my Renew Active gym membership?

You need to access your member confirmation code by signing in or registering on the UnitedHealthcare member website at <u>retiree.uhc.com/peehip</u> and selecting the **Health & Wellness** tab. The confirmation code can be viewed by clicking on the **Renew Active** tile.

You can also obtain your confirmation code by contacting UnitedHealthcare customer service at **1-877-298-2341**, TTY **711**.

Bring your confirmation/Member Code to the participating fitness location of your choice to start using your benefit.

Hearing Aids

21. Does my PEEHIP UnitedHealthcare Group Medicare Advantage Plan cover hearing aids?

Yes, under the PEEHIP UnitedHealthcare Group Medicare Advantage Plan, the following hearing aid benefits are available to you⁴:

- You have a \$500 hearing aid allowance every 36 months (combined for both ears)
- You can use in-network or out-of-network hearing providers
- You can use UnitedHealthcare Hearing for additional discounts on hearing aids

22. Will over-the-counter (OTC) hearing aids be covered?

No, OTC hearing aids will not be covered under the PEEHIP UnitedHealthcare Group Medicare Advantage Plan in 2023.

23. What are the advantages of using UnitedHealthcare Hearing?

With UnitedHealthcare Hearing, you can receive a hearing exam and have access to a wide selection of name-brand and private-label custom-programmed hearing aids at significant savings.⁵ You'll receive personalized care and follow-up support from experienced hearing providers. Plus, enjoy a hassle-free experience with no claims or reimbursement forms.

24. Is there a direct contact for UnitedHealthcare Hearing?

Yes. You can connect with UnitedHealthcare Hearing directly at **1-(855)-523-9355**, TTY **711**, 8 a.m.–8 p.m. CT, Monday–Friday

<u>Vision</u>

25. Does this plan include a vision benefit?

Yes, your PEEHIP UnitedHealthcare Group Medicare Advantage Plan includes a routine eye exam with refraction every 12 months.⁶ Your benefits do not include coverage for standard glasses or contact lenses.

¹This means that the provider or hospital agrees to treat you and be paid according to UnitedHealthcare's payment schedule. With this plan, we pay the same as Medicare and follow Medicare's rules. Emergencies would be covered even if out-of-network.

²Network size varies by local market and exclusions may apply.

³Reward offerings may vary by plan and are not available in all plans. Reward Program Terms of Service apply.

⁴Benefits, features, and/or devices vary by plan/area. Limitations and exclusions may apply. Other hearing exam providers are available in the UnitedHealthcare network. The plan only covers hearing aids from a UnitedHealthcare Hearing network provider.

⁵Hearing aid savings based on comparison to retail.

⁶Benefits, features and/or devices vary by plan/area. Limitations and exclusions apply. Annual routine eye exam covered in full annually.

HouseCalls may not be available in all areas.

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Participation in the Renew Active[®] program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. Renew Active includes standard fitness membership and other offerings. Fitness membership equipment, classes, personalized fitness plans, caregiver access and events may vary by location. Certain services, discounts, classes, events, and online fitness offerings are provided by affiliates of UnitedHealthcare Insurance Company or other third parties not affiliated with UnitedHealthcare. Participation in these third-party services are subject to your acceptance of their respective terms and policies.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in the plan depends on the plan's contract renewal with Medicare.

Benefits, features and/or devices vary by area. Limitations and exclusions apply.