

Seattle Human Resources

Kimberly Loving, Director

November 1, 2024

Subject: City of Seattle Retiree Medical Annual Enrollment

Dear SPOG/SPMA Retiree and/or Dependent Spouse/Children:

Please note monthly rate changes

Questions? Contact the Benefits Unit at (206) 615-1340 or Benefits.Unit@seattle.gov

This letter contains information about the City of Seattle's Annual Enrollment for retiree medical plans. Annual Enrollment runs Monday, November 4, through Friday, November 22, 2024. Changes you make will go into effect on January 1, 2025.

No action is necessary to stay in your current medical plan. You will remain on your current medical plan, and the 2025 premium deduction amount will start with your **December 31, 2024**, pension check. **If you pay by check**, please change the amount starting with your payment for January coverage. See the enclosed 2025 rate sheet.

If you want to *change* medical coverage effective January 1, 2025, here's what you need to do:

- If you are changing medical plans offered through the City, you must fill out an enrollment form and submit it to the SDHR Benefits Unit postmarked no later than Friday, November 22, 2024. Call or email our office to request an enrollment form be emailed or mailed to you. Use the contact information at the beginning of this letter to reach the SDHR Benefits Unit. Any staff member will be able to assist you. If you need to speak with someone in a language other than English, we will help you access Language Line services. Remember, any plan change you make will go into effect on January 1, 2025.
- If you pay by check, please change the check to your new premium amount from the enclosed 2025 rate sheet starting with your January payment. If you want to drop or cancel your City retiree medical plan coverage effective January 1, 2025, you must notify the Benefits Unit in writing by Friday, November 29, 2024. Written notification may be sent by email to benefits.unit@seattle.gov or by mail.

Please carefully read this letter and the enclosed information to understand your options and upcoming plan changes. The 2025 benefit comparisons, rate sheets, and detailed plan booklets are available online at https://bit.ly/polret1.

Other Retiree Medical Insurance Options

The City offers retiree health plans that approximate coverage on the active employee plans. We encourage retirees to explore all available options to ensure they have medical coverage that best meets their health and financial needs. Now is your opportunity to consider what plan might suit you better.

- Retirees Under Age 65 You may have options available through the State Health Insurance
 Exchange at www.wahealthplanfinder.org. These plans are "guarantee-issue," which means they
 cannot deny you coverage. Their standard plan designs make it easy to compare pricing and may
 better meet your financial requirements than the City retiree health plans. Their Open Enrollment is
 from November 1, 2024, to January 15, 2025.
- Retirees Aged 65 and Over (Medicare-eligible retirees) While no Medicare options are available on the State Health Insurance Exchange, you can access other private Medicare plans. Other private Medicare plans may have additional benefits beyond Medicare Parts A and B, such as Medigap and Medicare Advantage and Part D Prescription Drug plans. These individual plans may be more suitable for your financial situation than the City's Medicare Advantage Plan offerings. This year's private Medicare Advantage and Part D Open Enrollment runs from October 15, 2024 to December 7, 2024. You are encouraged to explore these other options directly with the providers of those plans or consult with the Statewide Health Insurance Benefits Advisor (SHIBA) program at 800-562-6900. Or contact SHIBA online at www.insurance.wa.gov/statewide-health-insurance-benefits-advisors-shiba. You may also contact a private benefits broker. Contact us at Benefits.Unit@seattle.gov before making any changes to ensure continued coverage for your spouse or domestic partner and dependents.

If you purchase medical coverage through a Health Insurance Exchange or obtain an individual Medicare Supplement or Medicare Advantage plan, you will not be able to return to City coverage in the future. These individual plans are not group/employer health plans. However, as indicated above, you can change plans annually during the Medicare and Exchange open enrollments.

Medical Plans for Retirees and Dependents Under Age 65 on the "Most" Benefit Program

As a reminder, SPOG retirees can select from Most City Retiree Medical plans or from SPOG Retiree Medical plans. This section describes the *Most City* Retiree Medical plans. The City will offer the same four medical plans as last year to retirees and dependents under age 65. See the enclosed rates and comparison charts for more information and the below plan changes.

Effective January 1, 2025

Aetna Preventive and Traditional Medical Plans

- Colonoscopy: Increasing in-network diagnostic colonoscopy coverage to 100%
- Mammography: Increasing follow-up in-network screening coverage to 100%
- **Hearing Aids:** Increasing in-network coverage from \$1,500 to \$3,000 per ear maximum per 36 months.
- Pregnancy Termination Care: Increasing in- and out-of-network coverage to 100%
- **Retail Pharmacy**: Increasing in-network 90-day maintenance medication prescriptions filled at retail pharmacies to the same cost share as prescriptions filled through mail order

Aetna Preventive Plan

• **Outpatient Mental Health Services:** Increasing out-of-network coverage from 60% after deductible to \$15 copay, no deductible. Balance billing may still apply.

Kaiser Permanente Standard and Deductible Plans

Colonoscopy: Increasing in-network diagnostic colonoscopy coverage to 100%

- Mammography: Increasing follow-up in-network screening coverage to 100%
- **Hearing Aids:** Increasing in-network coverage from \$1,000 to \$3,000 per ear maximum per 36 months.
- **Pregnancy Termination Care:** Increasing in-network coverage to 100%

Medical Plans for Retirees and Dependents Under Age 65 on the SPOG Benefit Program

As mentioned above, SPOG retirees can select from Most City Retiree Medical plans as well as SPOG Retiree Medical plans. This section describes the **SPOG** retiree medical plans. The City will offer the same four medical plans as last year to SPOG retirees and dependents under age 65 who are currently enrolled in a City retiree group plan. See the enclosed rates and comparison chart for more information. The are no changes to the SPOG Under Age 65 retiree medical plans.

Please call the medical plans directly with your specific questions:

- City of Seattle Preventive or Traditional (Aetna): 1-877-292-2480
- Kaiser Permanente Deductible: 1-888-901-4636 (Group #0961100)
- Kaiser Permanente Standard: 1-888-901-4636 (Group # 1004400)

Are you turning 65? To enroll in a Medicare Advantage plan offered through the City, you must provide a copy of your Medicare Parts A and B card 60-90 days *before* your 65th birthday. Apply for Medicare Parts A and B online at www.ssa.gov/benefits/medicare/ or stop by your local Social Security Administration office.

Medicare Advantage Medical Plans: Retirees and Dependents Age 65 and Over

The City will continue to offer the same four Medicare Advantage plans to Medicare-eligible retirees and dependents in 2025. Advantage plans, sometimes called Medicare Part C, cover all the services of Medicare Parts A (in-patient hospital insurance) and B (out-patient medical insurance) plus extra coverage like wellness and disease management programs. Because the City's plans also <u>include</u> Medicare Part D (prescription drug coverage), they are "MAPD" plans – Medicare Advantage with Prescription Drugs, and you do not need to enroll in a separate Part D plan; in fact, you cannot, as a Medicare rule.

The Aetna, Kaiser, and UnitedHealthcare plan designs have changed due to the 2023 CMS reduction in payments to plans and the Inflation Reduction Act restructuring Part D revenue. The new prescription drug law caps your yearly out-of-pocket costs at \$2,000. Some copays have increased on the Kaiser plans; see the attached Medicare Plan Highlights for more information.

The rate changes below are effective January 1, 2025. Note that some premiums have increased while others have decreased.

Plan	2024 Premium	2025 Premium	Percentage Change
Aetna Medicare (PPO) WA	\$305.95	\$332.33	8.6%
Aetna Medicare (PPO) Non-WA state resident	\$322.66	\$349.04	8.2%
Kaiser Permanente Plan 3	\$432.25	\$409.91	-5.2%
Kaiser Permanente Plan 4	\$423.37	\$397.29	-6.2%
UnitedHealthcare Medicare Complete HMO	\$390.15	\$500.33	28%

Where to call for questions about your Medicare Advantage Plan: For further information about any formulary changes or those required by Medicare, or to obtain information about the individual Medicare plans they offer, don't hesitate to get in touch with the medical plans directly:

Plan	Group Number	Phone Number	Website
Aetna Medicare Plan (PPO)	#0000653	1-800-307-4830	www.aetna.com
Kaiser Permanente Plan 3 or 4	#0335500 plan 3 #1650000 plan 4	1-888-901-4636	www.kp.org/wa
United Healthcare Medicare HMO	#801855	1-866-622-8055	www.uhc.com

Again, to ensure you are enrolled in a plan that meets your health and financial needs, you may explore options other than the City's plans. You may do that directly through the providers of those other plans – Medicare Supplement and Individual Medicare Advantage plans. If you are considering switching to a **non-City plan**, contact the Benefits Unit at Benefits.Unit@seattle.gov to ensure continued coverage for your spouse or domestic partner and dependents.

Re-Enrollment Option Reminder

All retirees currently enrolled in a City medical plan have a drop/re-enroll option in certain circumstances. You may drop your City retiree medical coverage and have the opportunity to re-enroll in a City plan at a future date as long as you meet these conditions.

- You must maintain continuous coverage under another *group* medical plan for the entire time you are not enrolled in a City plan. "Continuous coverage" means there are NO gaps in medical coverage. "Another group medical plan" means a plan offered through another employer, either your employer or the employer of your spouse or domestic partner.
 - Please note, individual medical plans -- whether obtained through a broker, insurer, HMO, Medicaid, the State High-Risk Pool, Health Insurance Exchanges, or other entities -- DO NOT qualify as continuous group coverage and DO NOT meet re-enrollment requirements.
- You may re-enroll in a City plan only if you lose eligibility for the other employer group coverage, such as if you or your spouse or domestic partner experience job loss or retirement or aging out of coverage (as documented by the Human Resources staff of the other employer).
- You must re-enroll in a City Plan within 30 days of losing your other coverage.

Enrollment Process Summary

Annual Enrollment ends at 5:00 pm on <u>Friday, November 22, 2024</u>. Your completed enrollment form must be <u>postmarked</u> on or before November 22. The City will not make plan changes if your forms are postmarked **after** November 22, 2024; you will remain on your current plan in 2025. **NOTE:** You cannot drop off forms at the Seattle Municipal Tower because access to building floors is restricted and requires a valid City employee badge.

Thank you for reviewing your medical coverage needs and making any necessary changes by the end of the Annual Enrollment period.

Sincerely,

Heather Krueger

Deputy Director of Citywide Benefits

Enclosures