



————— YOUR 2023 —————
**MEDICAL PLAN
SELECTION GUIDE**

Survivor Benefit Applicants



888-227-7877 • www.strsoh.org

Welcome

This mailing includes information about STRS Ohio medical coverage.

When choosing your survivor benefit plan of payment, please consider how access to coverage may vary depending on the type of survivor benefit you choose. For example, a retirement-based benefit requires at least 15 years of service credit to access health care coverage if the survivor benefit effective date is on or before July 1, 2023. Beginning Aug. 1, 2023, 20 or more years of service credit is required. For more information, see the *Survivor Benefits Summary* included with your survivor benefit materials.

To find out which medical plans are available to you, please call STRS Ohio's Member Services Center toll-free at 888-227-7877. The plans you are eligible for are determined by the ZIP code of your permanent residence and your Medicare status on file with STRS Ohio and Medicare.

After you know your plan options, review the enclosed materials designed to assist you in selecting your medical plan:

- The medical plan overview outlines major medical and prescription drug features of all STRS Ohio plans.

- The monthly medical premiums sheet lists premiums for the spouse, children and disabled adult children of deceased benefit recipients and members. When reviewing monthly premiums, please consider how the cost will impact your monthly STRS Ohio benefit payment.
- This guide provides step-by-step instructions for evaluating and selecting a plan, as well as contact information for all plan administrators.

Questions about specific coverage features or health care provider information should be directed to the plan administrators. The plans' toll-free numbers and website addresses are listed on Page 6. If you have general enrollment questions, contact STRS Ohio toll-free at 888-227-7877 or by email (go to www.strsoh.org and select "Contact" from the top menu). The Member Services Center's hours are Monday–Friday, 8 a.m. to 5 p.m.

Plan Features to Consider

Here are some features to consider when selecting your plan. Please contact the plan or visit the plan's website for specific information.

- **Services** — Look at the services offered by each plan. Are any services limited or not covered? Is there a good match between what is provided and what you think you will need?
- **Choice** — Which doctors, hospitals and other medical providers can you use? Do you need approval from the plan before going into the hospital or getting specialty care?
- **Location** — Where will you go for care? Are these places conveniently located? How does the plan cover services when you're away from home?
- **Costs** — How much will you pay for your monthly premiums, including Medicare Part B (if applicable) and other out-of-pocket expenses? If a plan does not cover certain services, how much will you have to pay? Although you may not know in advance what your health care needs will be for the coming year, you can think about the services you or your family might need. This will help you estimate what your total costs might be for services under each plan.

Reminders

- ✓ All STRS Ohio plans include hospital, medical and prescription drug coverage. Separate dental and vision insurance is also available.
- ✓ All STRS Ohio medical plans meet the Affordable Care Act's minimum essential coverage requirement. You are considered covered as an enrollee.
- ✓ STRS Ohio requires all eligible medical plan participants to enroll in Medicare by age 65. See Page 4 to learn how Medicare affects your STRS Ohio coverage.
- ✓ STRS Ohio's prescription plan for Medicare enrollees meets the creditable coverage requirements. You are considered covered by a qualified Medicare prescription plan and should not incur a penalty.

Coverage Considerations

Residency Requirement

To be eligible for coverage, the individual must actively reside in the United States with a permanent residence in one of the U.S. 50 states or U.S. territories.

Coverage Under More Than One Account or Retirement System

If you are eligible for medical coverage under more than one STRS Ohio account, you are limited to coverage under only one account. For example, you cannot be covered as both a benefit recipient and a survivor of a benefit recipient. It is your responsibility to contact STRS Ohio each year to indicate from which account your monthly premium should be deducted. Additionally, if you are eligible for medical coverage through more than one Ohio public retirement system, guidelines determine which system is responsible for your coverage. Contact STRS Ohio for details.

Employed Non-Medicare Enrollees

Coverage under the STRS Ohio Health Care Program is limited for non-Medicare enrollees employed in public or private positions. Employed enrollees are eligible for only secondary health care coverage through STRS Ohio's Basic Plan if they: (1) are eligible for medical and prescription drug coverage through their employer, or (2) hold a position for which other similarly situated employees are

eligible for medical and prescription drug coverage. The rule applies to all employed enrollees who are not eligible for Medicare, regardless of hire date or type of employment. If you think you might be affected, contact STRS Ohio. Failure to report employment can result in retroactive cancellation of your coverage and liability for any claims paid.

Prescription Drug Coverage

Express Scripts prescription drug coverage is included in all STRS Ohio medical plans. Enrollees with Medicare are automatically covered by a Medicare Part D plan provided by Express Scripts. **Do not enroll in any other Medicare Part D plan.** Medicare does not allow enrollment in more than one Medicare Part D plan. If you enroll in any other Medicare Part D plan, your STRS Ohio medical and prescription drug coverage will be **canceled**. In addition, if you decline or lose coverage under the Medicare Part D plan included in your STRS Ohio medical plan, your STRS Ohio medical coverage will be canceled.

Foreign Travel

Before traveling to a foreign country, check with your medical and prescription drug plan administrators to learn how your coverage will be affected while you are abroad.

Enrollment Factors

Family Accounts With Different Medicare Statuses

For families with Medicare and non-Medicare enrollees, enrollment in separate plans is permitted only when all Medicare enrollees on the account select the Aetna Medicare Plan. If the Aetna plan is not selected, all members on the account must select the same plan — the Basic Plan or a regional plan if available. Be aware, coverage features under the same plan could differ based on Medicare status. Be sure to review the plan features for Medicare and non-Medicare enrollees.

Proof of Medicare Enrollment

STRS Ohio requires all medical plan participants to enroll in Medicare Parts A & B at age 65 or when eligible. Medicare Part B is required for all enrollees. Medicare Part A is also required if it is available to you at no cost (premium free). If you decline Medicare Part B or premium-free Part A, you will no longer be eligible for STRS Ohio medical coverage.

Proof of Medicare enrollment is required. You must submit your Medicare information through your STRS Ohio Online Personal Account. Your plan options and monthly premiums change after Medicare enrollment is confirmed. See Page 4 for more information.

Evaluating Your Plans

Step 1

Call STRS Ohio to find out which medical plans are available to you. Then review the enclosed monthly medical premiums sheet for the monthly cost of each plan.

Step 2

Review the enclosed medical plan overview for major medical and prescription drug plan features for each plan available to you. Be sure to review the plan features that apply to you and your eligible dependents based on each individual's Medicare status.

Step 3

If you want information about specific plan features not listed in the medical plan overview, call the plans directly. Also call the plans or visit the plans' websites to find out if the providers and hospitals you use participate in their networks. These toll-free numbers and website addresses are listed on Page 6 of this guide.

Making Your Plan Selection

To enroll in a plan, complete the health care enrollment section of the survivor benefits application. If you do not designate a plan, you will be enrolled in the Basic Plan. Return the completed survivor benefits application to STRS Ohio.

- If you or any dependents are **eligible for Medicare**, you must provide a copy of each person's Medicare card with the survivor benefits application. Be sure to write the benefit recipient's STRS Ohio account number on the copy you submit. Your enrollment request cannot be processed until STRS Ohio receives proof of Medicare coverage. Any delay in submitting this proof will delay your enrollment in the plan.
- If you're selecting the **Aetna Medicare Plan, AultCare PrimeTime Health Plan or Paramount Elite**, you will not be officially enrolled in the plan until Medicare approves your enrollment request. Additionally, once enrolled, you must not subsequently sign up for another Medicare Advantage plan. If you do, your STRS Ohio coverage will be canceled by Medicare.

Medicare Enrollment

If you are age 65 or will turn age 65 during the coming year, Medicare enrollment is required. Please read this important overview. For additional information, **visit our website** or contact STRS Ohio.

What Is Medicare?

Medicare is a federal health insurance program for people age 65 or older, some people with disabilities under age 65 and people with end-stage renal disease or amyotrophic lateral sclerosis (ALS). You are eligible for Medicare when you turn age 65 even if you are not eligible for Social Security retirement benefits.

Medicare Enrollment Is Required

STRS Ohio requires all medical plan participants to enroll in Medicare Parts A & B at age 65 or when eligible. Medicare Part B is required for all enrollees. Medicare Part A is also required if it is available to you at no cost (premium free). If you decline Medicare Part B or premium-free Part A, you will no longer be eligible for STRS Ohio medical coverage.

Medicare Enrollment Requirements	
<i>You qualify for Medicare at age 65 even if you did not contribute to Social Security.</i>	
Coverage type	Am I required to enroll?
Part A (hospital)	Yes — You must enroll if coverage is premium free. No — Do not enroll if you must pay a premium to Medicare.
Part B (medical)	Yes — You must enroll and pay a monthly premium to Medicare.
Part C (Medicare Advantage)	No — Enrollment in Parts A & B or Part B-only (when you are not eligible for premium-free Part A) qualifies you for coverage under STRS Ohio's Medicare Advantage plans. You must not enroll in any other Medicare Advantage plan if you want to keep your coverage under the Medicare Advantage plans administered by Aetna, AultCare and Paramount.
Part D (prescription)	No — Part D prescription drug coverage is included in your STRS Ohio medical plan. Do not enroll in any other Part D plan. If you do, your STRS Ohio medical and prescription drug coverage will be canceled.

How Medicare Works With Your STRS Ohio Coverage

Medicare Parts A & B do not replace your STRS Ohio coverage. Instead, Medicare works with your STRS Ohio plan to provide maximum hospital and medical coverage. In general, when you enroll in Medicare Parts A & B, Medicare becomes the primary payer of your hospital and medical expenses; STRS Ohio becomes the secondary payer. If you are enrolled in a Medicare Advantage plan, the plan assumes responsibility for paying for covered services and receives payment from Medicare.

After you enroll in Medicare, you must pay two separate monthly premiums: a premium for STRS Ohio coverage (paid to STRS Ohio) and a premium for Medicare Part B coverage (paid to Medicare). Visit our website for information about paying your Medicare Part B premiums.

When to Enroll in Medicare

For best results, we recommend applying for Medicare three months before your 65th birthday. STRS Ohio will send you a Medicare information packet three months before you turn age 65 notifying you it is time to enroll.

You have a seven-month **initial enrollment** period in which to sign up for Medicare. This period begins three months before you turn age 65, includes the month you turn age 65 and ends three months after the month of your birthday.

Enrolling in Medicare is an easy two-step process. However, it may take more than one month for the entire application process to be completed, so be sure to start the process before your 65th birthday.

How to Enroll in Medicare

Step 1

Sign up for Medicare. Apply for Medicare three months before your 65th birthday so there is no delay in Medicare coverage.

To enroll in Medicare, visit your local Social Security Administration office or call Social Security toll-free at 800-772-1213. If you are enrolling in both Medicare Parts A & B, you can also complete your Medicare application online at www.ssa.gov. (If you are not eligible for premium-free Part A and are enrolling in Part B-only, you must visit or call Social Security to enroll.)

Step 2

Send STRS Ohio proof of Medicare enrollment.

After you enroll in Medicare, you must provide proof of coverage by submitting your Medicare information through your STRS Ohio Online Personal Account.

If you miss your **initial enrollment** period, you can sign up during a **general enrollment** period from Jan. 1 through March 31 each year. However, Medicare coverage is not effective until July 1 and a lifetime Medicare late enrollment penalty will apply.

Additionally, if you delay enrollment at age 65 because you or your spouse is still employed and covered by a group health plan through the employer, you can enroll without penalty at any time while you have employer health coverage (your own or through your spouse), or during the eight-month period that begins the month employer health coverage ends or the month employment ends (whichever comes first). If you do not enroll by the end of the eighth month, **general enrollment** guidelines apply.

After You Enroll in Medicare

After you enroll in Medicare and submit proof of coverage to STRS Ohio, the plans available to you will change. Call STRS Ohio to learn about your new plan options and premiums or log in to your STRS Ohio Online Personal Account to review this information.

Visit the STRS Ohio website for more information about Medicare.

Key Reminders

- STRS Ohio requires all eligible participants to enroll in Medicare Parts A & B.** If Medicare Part A is not premium-free, you do not need to enroll in Part A. However, Medicare Part B is required.
- Pay your Medicare Part B premiums.** Your Medicare Part B premium is not included in your monthly STRS Ohio premium. It is a separate premium that must be paid to Medicare, not to STRS Ohio.
- Do not enroll in any other Medicare Part D prescription drug plan.** As a Medicare enrollee, the prescription drug coverage included in your STRS Ohio plan is provided under a Medicare Part D prescription drug plan. Medicare does not allow enrollment in more than one Medicare Part D plan. If you enroll in another Medicare Part D plan, your STRS Ohio medical and prescription drug coverage will be canceled.
- Medicare charges extra fees for late enrollments and higher incomes.** Medicare charges late enrollment penalties if you delay enrollment in Medicare Part B or go 63 days or more without Medicare Part D or creditable prescription drug coverage. Also, Medicare Part B and Part D enrollees with higher annual incomes are subject to monthly Medicare surcharges. Surcharges vary by income levels set by Medicare. Visit www.medicare.gov for more information.
- Extra help may be available for prescription drug costs.** Medicare offers a low-income subsidy program (also called Extra Help) to qualified participants in a Medicare Part D prescription drug plan. If you qualify, you will receive a letter from Express Scripts informing you about the program.
- If you are enrolled in Medicare Part B-only and your spouse becomes eligible for Medicare Parts A & B,** you must contact Social Security to sign up for premium-free Medicare Part A. Once you become enrolled in Part A, you must submit your updated Medicare information through your STRS Ohio Online Personal Account.

Who to Contact

At-a-Glance

1. To ask specific coverage questions Visit the plan’s website or call the plan administrator
2. To obtain provider information Visit the plan’s website or call the plan administrator
3. To ask general enrollment questions Visit the STRS Ohio website, call STRS Ohio or email STRS Ohio (go to www.strsoh.org and select “Contact” from the top menu)

Phone Numbers and Websites

Contact	Toll-Free Number (Eastern Time)	Website
Aetna Basic	800-645-5677	www.aetnaresource.com/p/strs-commercial-plan-microsite
Aetna Medicare Plan	866-282-0631	strs.aetnamedicare.com
AultCare PPO	330-363-6360 (Local) 800-344-8858 (All other areas)	www.aultcare.com
AultCare PrimeTime Health Plan HMO-POS	330-363-7407 (Local) 800-577-5084 (All other areas)	www.pthp.com
Express Scripts	866-685-2792 (Non-Medicare enrollees) 888-416-3326 (Medicare enrollees)	www.express-scripts.com
Medical Mutual Basic	877-520-6727	www.medmutual.com
Medicare	800-633-4227	www.medicare.gov
Paramount HMOs	800-462-3589 (Non-Medicare enrollees) 833-554-2335 (Medicare enrollees)	www.paramounthealthcare.com
STRS Ohio	888-227-7877	www.strsoh.org



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