



275 East Broad Street
Columbus, OH 43215-3771
888-227-7877
www.strsoh.org

Your 2024 Open-Enrollment Guide

For Medical/Prescription Coverage

Open enrollment for STRS Ohio's medical/prescription plans is **Nov. 1–21, 2023**. This is your time to decide if you want to make any changes to your STRS Ohio coverage for next year.

The enclosed materials are designed to help you evaluate your coverage options effective Jan. 1, 2024:

- Your personalized letter lists your plan options and premiums for 2024.
- The *2024 Medical/Prescription Plan Overview* outlines the main coverage features of STRS Ohio's medical plans including prescription coverage. Contact information is also included.

Open-enrollment information as well as eligibility and enrollment guidelines are available on STRS Ohio's website. If you have any questions, email us any time by going to www.strsoh.org and selecting "Contact" from the top menu. You can also call us toll-free at 888-227-7877, Monday–Friday, 8 a.m. to 5 p.m. Eastern time.

***Note:** This year's open enrollment is for medical and prescription coverage only. Dental and vision enrollment and plan changes are not part of this year's process.*

Your 2024 Plan Enrollment

Your 2024 plan enrollment is listed in the chart on the front of your personalized letter. If your current plan is not listed, it is not available to you next year due to a change in the plan's availability or eligibility.

- **If you want to be enrolled in the plan listed on the front of your letter, you don't need to do anything.** Your enrollment will continue if you are currently enrolled in the plan, or we will take the necessary steps to finalize your enrollment if you are new to the plan. The good news is you don't need to contact us or take any other action to confirm your plan selection.
- **Enroll, Cancel or Change Plans** — If you have Medicare and want to select the Aetna Basic Plan, or you want to enroll an eligible dependent or cancel coverage, log in to your Online Personal Account at www.strsoh.org and select "Health Care." Then select "Enroll, Cancel or Change Medical Plan" under **Open Enrollment**. If you do not have an account, visit www.strsoh.org and click "Register" at the top of the home page. The deadline to make enrollment changes is Nov. 21, 2023.

2024 Health Care Program Changes

Beginning Jan. 1, 2024, STRS Ohio's Health Care Program is transitioning to one plan administrator for the medical plans and a new plan administrator for the prescription plans. Aetna will administer all medical coverage and CVS Caremark will administer all prescription coverage. Making these changes allows STRS Ohio to lower monthly premiums for 99% of plan participants and enhance Aetna Medicare Plan coverage. Also, enrollees' experiences should improve when they become eligible for Medicare because the plan administrators will remain the same.

- If you currently have Medical Mutual, AultCare or Paramount coverage, you will automatically be enrolled in an Aetna plan in 2024. Medicare enrollees will be transitioned to the Aetna Medicare Plan (Medicare Advantage PPO) and non-Medicare enrollees will be transitioned to the Aetna Basic Plan (PPO or indemnity). If you have Medicare and do not want the Aetna Medicare Plan, you may opt-out of this plan and enroll in the Aetna Basic Plan. However, the Aetna Medicare Plan has lower premiums and out-of-pocket costs than the Aetna Basic Plan.
- If you are currently covered by the Aetna Medicare Plan or Aetna Basic Plan, you will automatically remain in your plan in 2024. No changes will be made to your enrollment.
- The prescription coverage included with your medical plan will be administered by CVS Caremark (CVS). If you have Medicare, you will be covered by SilverScript, a Medicare Part D plan. SilverScript is an affiliate of CVS. If you do not have Medicare, you will be covered by CVS Caremark.
- You will receive new medical and prescription ID cards from the plans by mid-December.
- Check with Aetna and CVS to find out if your providers participate in their networks.

2024 Coverage Features

STRS Ohio plans include hospital, medical and prescription coverage. **Please review the 2024 Medical/Prescription Plan Overview for coverage features and contact information including websites. Also visit the Open-Enrollment Resource Center at www.strsoh.org for answers to frequently asked questions and more.** A comprehensive description of your coverage will be available from your plans after enrollment is confirmed. Contact the plans directly with coverage questions.

Aetna Medicare Plan

Toll-free 833-383-4612

Most Aetna Medicare Plan coverage features will remain the same. Select enhancements include:

- Reducing the in-network annual deductible per enrollee to \$0 from \$150.
- Reducing the in-network primary care physician copayment to \$0 from \$15.
- Providing \$1,000 reimbursement for hearing aids per 36 months as well as wig coverage for certain situations like chemotherapy.
- Under certain circumstances, offering skilled nursing facility patients a 72-hour transition period before returning home. Additionally, enrollees may receive six hours of custodial care after discharging from an inpatient facility.
- Providing unlimited transportation for medical appointments for dialysis patients through Access2Care Transportation Benefit.

For Medicare enrollees transitioning to the Aetna Medicare Plan, many coverage features will remain the same as your current plan. Key changes for Medicare enrollees include:

- Medical Mutual enrollees will pay less for covered services and have a significant reduction in annual deductible per enrollee (\$0 from \$2,500 in-network) and out-of-pocket maximum (\$1,500 from \$6,500 in-network).
- AultCare and Paramount enrollees will have a reduction in annual deductible per enrollee (\$0 from \$150 in-network).

Aetna Basic Plan

Toll-free 800-645-5677

Aetna Basic Plan coverage features will remain the same, except the plan will now be available in any U.S. location including Ohio. For non-Medicare enrollees transitioning to the Aetna Basic Plan:

- Most coverage features for Medical Mutual and AultCare non-Medicare enrollees will remain the same with one change. AultCare enrollees will now pay \$20 (no deductible) for any in-network primary care physician visit instead of \$20 (no deductible) for the first two visits, then 20% coinsurance after deductible for all future visits.
- Some coverage features for Paramount Health Care non-Medicare enrollees will change. Cost-sharing increases include annual deductible per enrollee (\$2,500 from \$2,000), out-of-pocket maximum (\$6,500 from \$4,000) and in-network primary care physician copayment (\$20 from \$10). Additionally, enrollees will pay 20% for a specialist physician after deductible instead of \$20 with no deductible.

CVS Caremark

Medicare: Toll-free 800-756-6859 | Non-Medicare: Toll-free 800-756-6841

- Your annual deductible, maximum out-of-pocket limit and drug tier copayments/coinsurance will remain the same.
- Most medications will continue to be covered by your new plan. If any of your current prescriptions are impacted, you should receive a letter from CVS by mid-December letting you know what steps to take. If you need to switch medications, STRS Ohio has arranged for you to obtain your current medication during the first 90 days of 2024 to provide additional time to work with your physicians.
- The CVS network includes about 66,000 chain and independent pharmacies, including Kroger, and about 9,000 CVS pharmacies. (You can use any network pharmacy; you are not limited to CVS store locations.) CVS also offers a convenient mail service pharmacy and specialty pharmacy.

Medicare Coverage Is Required

STRS Ohio requires all medical/prescription 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/prescription coverage.**

If you or any family member on your account enrolls in Medicare after receiving this mailing, you must submit Medicare information to STRS Ohio through your Online Personal Account. Individuals will transition to the Aetna Medicare Plan after Medicare enrollment is confirmed. Failure to provide proof of Medicare enrollment will affect your STRS Ohio coverage.

Required Notices

For informational purposes only. *Notice of Privacy Practices* is available on the STRS Ohio website or upon request.

Notice for the Women's Health and Cancer Rights Act of 1998

In accordance with the Women's Health and Cancer Rights Act of 1998, STRS Ohio's Aetna Basic Plan will provide coverage to include the following mastectomy-related procedures:

- Reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance; and

- Prostheses and treatment of physical complications at all stages of a mastectomy, including lymphedemas (swelling of the hand and arm on the operated side).

This coverage will be provided in consultation with the attending physician and the patient and will be subject to the same annual deductible and coinsurance provisions that apply for the mastectomy. If you have questions about coverage of mastectomies and reconstructive surgery, please call Aetna toll-free at 800-645-5677.

Notice of Medicare Part D Creditable Coverage

This notice provides important information about prescription coverage through STRS Ohio's medical plans and Medicare Part D. Please read this notice carefully and keep a copy for your records.

As an enrollee in an STRS Ohio medical plan, you should not enroll in more than one Medicare Part D plan. STRS Ohio has received an actuarial determination that the prescription coverage included in STRS Ohio's medical plans is creditable, meaning it is as good as or better than the standard Medicare Part D prescription coverage.

Required information from the Centers for Medicare & Medicaid Services

If you are eligible for Medicare Parts A & B, Part A-only or Part B-only, you have an opportunity to enroll in Medicare Part D each year from Oct. 15 through Dec. 7. If you are not currently eligible for Medicare, you can enroll in Medicare Part D when you turn age 65. Keep in mind, however, that creditable prescription coverage is included with your STRS Ohio medical plan. This means you should not enroll in more than one Medicare Part D plan.

If you are not currently enrolled in Medicare Parts A & B, Part A-only or Part B-only, the initial enrollment period is the seven-month period that begins three months before you first meet eligibility requirements and ends three months after the month of first eligibility. You will pay a higher Medicare Part D premium if you go without creditable prescription coverage for 63 consecutive days or longer after your initial enrollment period ends.

Information for enrollees with Medicare Parts A & B, Part A-only or Part B-only

You will be enrolled automatically in SilverScript, a Medicare Part D plan, for no additional monthly premium as part of your STRS Ohio medical plan's coverage. SilverScript is an affiliate of CVS Caremark.

Because Medicare Part D coverage is already included in your STRS Ohio medical plan, you should not enroll in any other Medicare Part D plan. If you enroll in another Medicare Part D plan, your STRS Ohio medical and prescription coverage will

be canceled. Medicare does not allow enrollment in more than one Medicare Part D plan. In addition, if you decline coverage under the Medicare Part D plan included with your STRS Ohio medical plan, your STRS Ohio medical coverage will be canceled.

Before making any changes to your Medicare Part D plan coverage, call STRS Ohio to find out how your STRS Ohio coverage will be affected. If you have specific questions about your prescription coverage, contact SilverScript.

Please note that if you cancel your STRS Ohio medical coverage, you will lose medical and prescription coverage provided by STRS Ohio. In addition, you will have only the coverage you qualify for under Medicare Parts A & B, Part A-only or Part B-only unless you purchase a separate supplemental plan. Keep in mind that Medicare Parts A & B cover only a few prescription drugs.

Keep this notice for your records. If you decide to enroll in Medicare Part D in the future, you may need to present a copy of this notice to avoid paying a higher monthly premium amount under Medicare. You may request a copy of this document from STRS Ohio at any time or visit www.strsoh.org.

For more information

1. Call STRS Ohio's Member Services Center toll-free at 888-227-7877 for information about this notice or to request additional copies.
2. Contact SilverScript toll-free at 800-756-6859 for information about your prescription coverage.
3. Call Medicare toll-free at 800-MEDICARE (800-633-4227) or visit www.medicare.gov for information about your options under Medicare Part D.
4. Call the Social Security Administration toll-free at 800-772-1213 or visit www.ssa.gov to find out if you qualify for extra assistance to help pay for Medicare prescription drug plan costs.

Section 1557 Notice of Nondiscrimination

The State Teachers Retirement System of Ohio (STRS Ohio) Health Care Program complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. The STRS Ohio Health Care Program does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

The STRS Ohio Health Care Program:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters or written information in other formats (large print, audio, accessible electronic formats or other formats).
- Provides free language services to people whose primary language is not English, such as qualified interpreters or information written in other languages.

If you need these services, contact STRS Ohio's Section 1557 Coordinator. If you believe the STRS Ohio Health Care Program has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: STRS Ohio's Section 1557 Coordinator, 275 E. Broad St., Columbus, OH 43215; phone: 614-227-4097; fax: 614-744-3343; email: legal@strsoh.org. You can file a grievance in person or by mail, fax or email.

If you need help filing a grievance, the Section 1557 Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201; Phone: 800-368-1019 (toll-free); 800-537-7697 (TDD). Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.

Limited English Proficiency of Language Assistance Services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 614-227-4097.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 614-227-4097.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 614-227-4097

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 614-227-4097.

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 614-227-4097

Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzsch, kannsch du mitaus Koschte ebber gricke, ass dihr helfft mit die englisch Schprooch. Ruf selli Nummer uff: Call 614-227-4097.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 614-227-4097.

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 614-227-4097.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 614-227-4097.

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 614-227-4097.

주의: 한국어를 _사용하시는 _경우, 언어 _지원 _서비스를 _무료로 _이용하실 _수 _있습니다. 614-227-4097.

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 614-227-4097.

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。614-227-4097.

AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 614-227-4097.

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 614-227-4097.

ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 614-227-4097.



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