



Welcome to the *Medicare Enrollment and STRS Ohio* webinar.

All STRS Ohio medical plan participants are required to enroll in Medicare at age 65 or when eligible. Medicare is a federal health insurance program for people age 65 and older, some people with disabilities under age 65 and people with end-stage renal disease. During this presentation, we will explain the parts of Medicare as well as the steps you need to take to become enrolled.

Today's Agenda

- Four easy steps for Medicare enrollment
 1. Sign up
 2. Provide proof
 3. Pay Medicare
 4. Select STRS Ohio medical plan
- Common questions



Today we are going to cover the four main steps for Medicare enrollment:

- Sign up.
- Provide STRS Ohio proof of enrollment.
- Pay Medicare.
- Select an STRS Ohio medical plan.

After we've reviewed these simple steps in more detail, we will address some questions commonly asked by new Medicare enrollees.

1 Sign Up



- STRS Ohio will notify you three months before you turn age 65
- Seven-month window
 - Three months before you turn age 65
 - Month you turn age 65
 - Three months after the month of your birthday
- Enroll before 65th birthday to avoid delay in coverage
 - Social Security office
 - Social Security: 800-772-1213
 - www.ssa.gov

Step 1: Sign up.

STRS Ohio will mail you a Medicare information packet three months before you turn age 65.

You have a seven-month window surrounding your birthday month to enroll. 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. To avoid a delay in the start of your Medicare coverage, we recommend you start the enrollment process before your 65th birthday. It may take more than one month for the entire application process to be completed.

You can enroll at your local Social Security office or by calling Social Security. Call the number shown here to locate the nearest office and to find out what documents to take with you.

You may also have the option to enroll online at www.ssa.gov.

Enrollment and STRS Ohio Requirements

- **STRS Ohio requires enrollment in Medicare Parts A & B or Part B-only**
 - Not eligible for STRS Ohio medical plan without Medicare coverage
 - Enroll in Part A if coverage is premium-free; if eligible later, must enroll then
 - Enroll in Part B and pay a monthly premium to Medicare
- **Do not need to qualify for Social Security to be eligible for Medicare**



If you decline Medicare coverage, you will not be eligible for an STRS Ohio medical plan. You must enroll in Medicare Part A if it is available at no cost to you. If you do not qualify for premium-free Part A, but become eligible at a later date, you must enroll then. You must enroll in Part B and pay a monthly premium to Medicare. Keep in mind, you do not need to qualify for Social Security retirement benefits to be eligible for Medicare.

Medicare Part A — Hospital Insurance

- **Free based on your work history if you:**
 - Paid Medicare taxes for 10 years
 - Receive/eligible to receive Social Security or Railroad benefits
- **Free based on your current/former spouse's work history if:**
 - **Currently married** for at least one year and your spouse is age 62 or older
 - **Divorced**, currently single and were married for at least 10 years
 - **Widowed**, currently single and were married for at least nine months before spouse died



Now, let's talk about the parts of Medicare.

Medicare Part A is hospital insurance. Most U.S. citizens or permanent residents age 65 or older qualify for premium-free Part A based on their own employment history or their current or former spouse's employment history.

You are eligible if you paid Medicare taxes for at least 10 years while working in a federal, state or local government job (including public education). This applies to most STRS Ohio members. You also qualify if you receive Social Security or Railroad Retirement benefits or you are eligible to receive these benefits but haven't filed for them yet.

If you do not qualify for premium-free Medicare Part A based on your employment history, you may qualify based on your current or former spouse's if you are:

- Currently married for at least one year and your spouse is age 62 or older.
- Divorced and currently single, and you were married for at least 10 years.
- Widowed and currently single, and you were married for at least nine months before your spouse died.

Your spouse does not need to apply for Social Security benefits for you to be eligible for premium-free Part A based on his or her employment history. It may be helpful to inform Social Security that you are applying for Part A based on a current or former spouse's work record.

If you do not qualify for Part A at no cost — you do not need to enroll. Your STRS Ohio medical plan will cover your hospitalization.

Medicare Part B — Medical Insurance

- Enroll and pay premium
- Almost every U.S. citizen or legal resident age 65 or older can enroll
- Those already receiving a Social Security benefit will automatically be enrolled



Medicare Part B is medical insurance and enrollment is mandatory when you are eligible. Everyone pays a premium for it. Almost every U.S. citizen, or legal resident in the United States for at least five years, who is age 65 or older can enroll.

Social Security knows your Medicare status and if you are already receiving a Social Security benefit, you will automatically be enrolled in Medicare. If you do not currently receive a Social Security benefit, you will need to go online, call or visit a Social Security office to sign up for Part B. Remember, you do not need to be eligible for Social Security to sign up for Medicare.

Medicare Part C and Part D Defined

- **Part C — Medicare Advantage Plans**
 - STRS Ohio: Aetna Medicare Plan, AultCare PrimeTime Health Plan and Paramount Elite HMO
- **Part D — Prescription Drug Plan**
 - Included in STRS Ohio medical plans
 - Not permitted to enroll in more than one
 - Enrollment in any other plan will cancel STRS Ohio medical and prescription drug coverage



What about Medicare Parts C and D?

Part C is a type of health insurance plan approved by Medicare and administered by private companies. You may be more familiar with the term Medicare Advantage Plan. STRS Ohio offers three Medicare Advantage Plans — the Aetna Medicare Plan, AultCare PrimeTime Health Plan and the Paramount Elite HMO. Do not enroll in any other Medicare Advantage plan if you want to keep your coverage under STRS Ohio.

Part D is the prescription drug plan. As a Medicare enrollee, the prescription drug plan included in your STRS Ohio medical plan is a Part D plan. Do not enroll in any other Part D plan, as that will cancel your STRS Ohio medical and prescription drug coverage.

2 Provide Proof

- If you do not submit proof, you will not be eligible for STRS Ohio health care coverage
- Submit proof of Medicare enrollment through your Online Personal Account at www.strsoh.org
 - Log in to your online account
 - Click “Health Care”
 - Click “Submit Medicare Information” under Useful Links
- If you need to register for an online account, click on “REGISTER” at the top of the STRS Ohio website



Step 2: Provide proof of Medicare enrollment to STRS Ohio.

If you do not submit proof of your Medicare enrollment to STRS Ohio, you will not be eligible for STRS Ohio health care coverage.

Provide proof of Medicare enrollment to STRS Ohio by submitting your Medicare information through your Online Personal Account. (Your Medicare information can be found on your Medicare card.) To submit your information:

- Log in to your Online Personal Account.
- Click “Health Care.”
- Click “Submit Medicare Information” under Useful Links.

If you need to register for an online account, click on “Register” at the top of the STRS Ohio website.

3 Pay Medicare

- Medicare Part B is \$164.90 per month (2023 standard rate)
 - Paid to Medicare (not STRS Ohio)
- Premium payment:
 - Social Security payment (if applicable)
 - Savings/checking (if enrolled in Medicare Easy Pay)
 - Billed quarterly by Medicare



Step 3: Pay your Medicare premium.

The Part B standard rate for 2023 is \$164.90 per month and is paid to Medicare, not STRS Ohio. This premium must be paid to maintain coverage. If you lose Part B coverage, you will not be eligible for an STRS Ohio medical plan.

Medicare will deduct the payment from your Social Security check, if you receive one, or you may have the payment deducted from your savings or checking if you enroll in the Medicare Easy Pay. Otherwise, Medicare will bill you quarterly.

Some Medicare enrollees with a high annual income will be required to pay a surcharge. We will address this later in the presentation.

4 Select STRS Ohio Medical Plan

- Your plan enrollment after Medicare enrollment is confirmed, will be as follows:
 - Basic Plan enrollees will be enrolled in the Aetna Medicare Plan
 - AultCare enrollees will be enrolled in the AultCare PrimeTime Health Plan
 - Paramount Health Care enrollees will be enrolled in Paramount Elite
- This will be your plan unless you select a different plan



Step 4: Select your STRS Ohio medical plan.

As a Medicare enrollee, after your Medicare enrollment is confirmed, your plan enrollment will be as follows:

- Basic Plan enrollees will be enrolled in the Aetna Medicare Plan.
- AultCare enrollees will be enrolled in the AultCare PrimeTime Health Plan.
- Paramount Health Care enrollees will be enrolled in Paramount Elite.

This will be your plan unless you select a different plan. If you do not want to be enrolled in the plan indicated here, you must submit your request for another plan when you submit proof of your Medicare enrollment to STRS Ohio.

AultCare and Paramount are regional plans that are only available to individuals residing in specific regions of the state.



- Family accounts with Medicare and non-Medicare enrollees
 - If all Medicare enrollees choose Aetna Medicare Plan, non-Medicare family members can select Basic Plan
 - If Aetna Medicare Plan is not selected, all enrollees must enroll in same plan (Basic Plan or regional plan if available)

What about Basic Plan family accounts with Medicare and non-Medicare enrollees?

STRS Ohio allows families with Medicare and non-Medicare enrollees to select separate plans. All family members with Medicare may enroll in the Aetna Medicare Plan while non-Medicare family members remain in the Basic Plan.

If the Aetna Medicare Plan is not selected, enrollment in separate plans is not permitted. In this case, all family members would need to choose either 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.

State Teachers Retirement System of Ohio
Medicare Enrollment and STRS Ohio



- **Family accounts with Medicare and non-Medicare enrollees — regional plans**
 - Families must choose plan offered by same plan administrator (AultCare or Paramount)
- **AultCare**
 - *Non-Medicare:* AultCare PPO
 - *Medicare:* AultCare PrimeTime Health Plan
- **Paramount**
 - *Non-Medicare:* Paramount Health Care
 - *Medicare:* Paramount Elite

Under the regional plans – AultCare and Paramount – family accounts with Medicare and non-Medicare enrollees must choose a plan offered by the same plan administrator.

For AultCare, non-Medicare enrollees would be enrolled in the AultCare PPO for non-Medicare enrollees while Medicare enrollees would be enrolled in AultCare PrimeTime Health Plan.

For Paramount, non-Medicare enrollees would be enrolled in Paramount Health Care while Medicare enrollees would be enrolled in Paramount Elite.

Monthly Premiums — Medicare Enrollees

Premiums reflect Medicare Part B premium credit	2023 Monthly Premiums	
	Benefit Recipient With Maximum Premium Subsidy	Spouse
Aetna Medicare Plan (Medicare Advantage PPO)	\$31	\$180
Medical Mutual Basic (Indemnity or PPO)	\$128	\$318
AultCare PrimeTime Health Plan (Medicare Advantage HMO-POS)	\$96	\$286
Paramount Elite (Medicare Advantage HMO)	\$114	\$304



Once you provide proof of Medicare enrollment and it has been confirmed, your monthly medical plan premium will decrease.

This table shows the 2023 monthly premium for a benefit recipient receiving the maximum premium subsidy and the rate for a spouse. It's worth mentioning, the Aetna Medicare Plan premiums are significantly lower than the other STRS Ohio plan options. We will speak more about this point on the next slide.

Remember, to remain eligible for a medical plan available to Medicare enrollees, you must maintain and pay your Medicare Part B premiums, as well as enroll in Part A if it is at no cost to you. These premiums reflect a Medicare Part B premium credit which we will explain later in this presentation. A complete table of 2023 premiums is available on the STRS Ohio website.

State Teachers Retirement System of Ohio
Medicare Enrollment and STRS Ohio

2023 Plan Overview: With Medicare				
Major Hospital/Medical Plan Features	Aetna Medicare Plan (Medicare Advantage PPO) In-Network or Extended Service Area	Medical Mutual Basic (Indemnity or PPO) In-Network and Indemnity	AultCare PrimeTime Health Plan (Medicare Advantage HMO-POS) In-Network	Paramount Elite (Medicare Advantage HMO)
Annual Deductible per Enrollee	\$150	\$2,500	\$150	\$150
Out-of-Pocket Maximum	\$1,500 per enrollee	\$6,500 per enrollee	\$1,500 per enrollee	\$1,500 per enrollee
Primary Care Physician Office Visit (Includes in-person, phone and video visits.)	Enrollee pays \$15; no deductible	Enrollee pays \$20; no deductible	Enrollee pays \$15; no deductible	Enrollee pays \$15; no deductible
Hospital Services (Inpatient/Outpatient)	Enrollee pays 4% after deductible	Enrollee pays 20% after deductible	Enrollee pays 4% after deductible	Enrollee pays 4% after deductible

Here is an overview of the STRS Ohio medical plans available to individuals with Medicare. While most will decide between the Aetna Medicare Plan and Medical Mutual Basic, some may reside in an area that will also include the regional plan options of the AultCare PrimeTime Health Plan or Paramount Elite.

When we compare key plan features such as the deductible, out-of-pocket maximum, copayment and coinsurance — the Aetna Medicare Plan, AultCare PrimeTime Health Plan and Paramount Elite are identical. For a Medical Mutual Basic enrollee; however, the costs associated with those key plan features are significantly higher. If we consider the potential total out-of-pocket cost, including the monthly premium, the Aetna Medicare Plan offers the greatest cost savings without compromising coverage.

For additional plan details, visit the Health Care section of the STRS Ohio website at www.strsoh.org. Remember, all STRS Ohio medical plans for individuals with Medicare include prescription drug coverage.



Let's take a look at some of the more common questions about Medicare enrollment.

What Happens if I Don't Sign Up?

- **Part B late enrollment penalty**
 - 10% of premium added to monthly premium for each year of delay in enrollment
- **Part D late enrollment penalty**
 - 63-day lapse in coverage
 - Could increase with additional lapse in coverage
- **Penalties will be paid for duration of Medicare enrollment**



What happens if I don't sign up for Medicare?

If you do not sign up at the appropriate time, Medicare will charge you a penalty. For Part B, there is a 10% late enrollment penalty added to your monthly premium for each year you delay enrollment.

If you go 63 days or more without Part D or creditable prescription drug coverage and later enroll in a plan, there is a penalty for letting your drug coverage lapse. If you have one of the STRS Ohio health care plans, you have a creditable Part D plan. (Creditable coverage means prescription drug coverage that is as good or better than the standard Medicare Part D prescription drug coverage.)

Late enrollment penalties would be charged for as long as you have Medicare coverage.

What if I Am Still Employed at Age 65?

- Sign up for Part B after employer health coverage or employment ends, whichever comes first
- Eight-month special enrollment period after the employer health coverage/employment ends
- If you miss special enrollment period:
 - General enrollment: Jan. 1 through March 31
 - July 1 effective date



What if I am still employed at age 65?

While you are working and receiving health care coverage through your employer, you do not need to sign up for Part B. Sign up within eight months of employer health coverage or employment ending, whichever comes first. You will not be subject to a Part B late enrollment penalty if you sign up during this special enrollment period.

If you miss that special enrollment period, general enrollment guidelines will apply as will the late enrollment penalty. General enrollment is January 1 through March 31 and your coverage would not begin until July 1 of that year.

What Are Surcharges?

- Medicare surcharge for Part B and Part D enrollees with higher income (levels set by Medicare)
 - \$97,000+, individuals; \$194,000+, married couples
 - If you are subject to a Part B surcharge, you will also pay a Part D surcharge
- Those impacted receive letter referencing income-related monthly adjustment amount (IRMAA)
- Further information: www.ssa.gov or www.medicare.gov



What are surcharges?

Part B and Part D enrollees with higher annual incomes are subject to monthly Medicare surcharges. The 2023 amount is based on 2021 income. Surcharges vary by income levels set by Medicare (currently \$97,000 or more for individuals and \$194,000 or more for married couples). If you are subject to the Part B surcharge, you will also pay a surcharge for Part D.

Individuals subject to Medicare surcharges will receive a letter from Social Security referencing the income-related monthly adjustment amount, also known as “IRMAA.”

Your drug plan with STRS Ohio is a Part D plan that is bundled with your medical coverage. You do not pay a separate amount for drug coverage as some people do. Nonetheless, Medicare assesses this surcharge to you anyway since you do have a Part D plan.

For more information, including surcharge amounts, go to www.ssa.gov or medicare.gov.

What if I Am Not Eligible for Part A?

- All STRS Ohio medical plans cover hospitalization
- Do not enroll in Part A if you must pay a premium
- Still same coverage and rates as other STRS Ohio Health Care Program enrollees
- Not eligible for premium-free Part A now, but become eligible later, you must apply at that time



What if I am not eligible for premium-free Part A?

We touched on this earlier, but it is something that bears repeating. All STRS Ohio medical plans cover hospitalization.

Do not enroll in Part A if you will be required to pay a premium.

Without Part A, you still have the same coverage and rates as other STRS Ohio Health Care Program enrollees.

If you do not initially qualify for premium-free Part A, but become eligible at a later date, you must apply at that time.

What Is the Part B Premium Credit?

- Benefit recipients enrolled in an STRS Ohio Medicare plan receive a \$30 premium credit
 - Partial Part B premium reimbursement on the standard Part B monthly premium
- Premiums shown for Medicare enrollee plans reflect this credit



What is the Part B premium credit?

Benefit recipients enrolled in an STRS Ohio Medicare plan receive a \$30 premium credit for paying their monthly Part B premium to Medicare.

The 2023 STRS Ohio medical plan monthly premiums shown for enrollees with Medicare reflect this credit.

Are There Alternatives to STRS Ohio Coverage?

- **Medicare Advantage Plan (general marketplace)**
 - You must have Parts A & B
 - May be more cost effective for spouses and benefit recipients receiving limited/no premium subsidies
 - May provide better options but limited network
 - Many offer extra benefits (dental care, eyeglasses)
 - Not all include prescription drug coverage (Part D required)



Are there alternatives to STRS Ohio coverage? Yes.

There are a number of individual Medicare Advantage plan options offered in the general marketplace.

Medicare Advantage plans in the general marketplace require that you be enrolled in Medicare Parts A & B. These plans may be more cost effective for spouses and STRS Ohio benefit recipients receiving limited or no premium subsidies. They may offer better options if you are agreeable to a limited network. Many offer extra benefits such as dental care and eyeglasses, but not all of them include prescription drug coverage. Medicare requires all eligible recipients to enroll in a Part D prescription drug plan.

- Medicare Supplement Insurance (Medigap) policy
 - You must have Parts A & B
 - Pays health care costs after Original Medicare
 - All policies offer same basic benefits
 - Enrollment may be limited or costly after age 65



There are also Medicare Supplement Insurance policies — also referred to as Medigap. These require that you be enrolled in Medicare Parts A & B and the plan pays for health care costs remaining after Original Medicare pays. All of these types of policies offer the same basic benefits. Enrollment may be limited or could be more costly if you enroll after age 65.

How Should I Evaluate Health Care Coverage Options?

- Premium
- Deductible
- Out-of-pocket maximum
- Provider network
- Prescription drug coverage
- Anticipated health care needs and projected costs



How should I evaluate health care coverage options?

It is important to understand the differences in medical plan costs and features.

For instance, the monthly premium the plan charges may be low, but the deductible and out-of-pocket maximum may be high.

What does the out-of-pocket maximum amount include? Some plans may include the deductible in that maximum while other plans may not.

Are your favorite doctors and medical facilities within the provider network?

What is the prescription drug coverage offered by the plan?

And, what are your anticipated health care needs for the coming year and the projected costs for those services?

Knowing this information puts you in a better position to make an apples to apples comparison of health care plans and hopefully prevents any surprises when medical bills arrive.

What About Dental and Vision Coverage?

- **Delta Dental and Vision Service Plan (VSP)**
 - Current enrollees must remain enrolled for duration of contract period
 - Jan. 1, 2023, through Dec. 31, 2024
- **Medicare enrollment is a qualifying event for adding coverage**
 - STRS Ohio must receive enrollment application within 31 days of initial eligibility for and enrollment in Parts A & B or Part B-only
 - Coverage effective first of the month Medicare coverage begins



What if you are enrolled in dental or vision coverage through STRS Ohio? If you are currently enrolled in Delta Dental and/or Vision Service Plan (VSP), you must remain enrolled for the duration of the current two-year contract period regardless of your Medicare status.

If you are not enrolled, Medicare enrollment is a qualifying event for adding dental and/or vision coverage outside of the open enrollment for these plans held every other year. If you plan to enroll during this qualifying event, STRS Ohio must receive your enrollment application within 31 days of initial eligibility for and enrollment in Medicare Parts A & B or Part B-only. Coverage will be effective the first of the month Medicare coverage begins.

Recap

- Four easy steps for Medicare enrollment
 1. Sign up
 2. Provide proof
 3. Pay Medicare
 4. Select STRS Ohio medical plan



We conclude our agenda here with a recap of the four easy steps for Medicare enrollment.

- Sign up.
- Provide STRS Ohio proof of enrollment.
- Pay Medicare.
- Select an STRS Ohio medical plan.

Further Information

- **STRS Ohio**
 - www.strsoh.org
(Medicare information available in Health Care section)
 - Select “Contact” on website
 - 888-227-7877 (toll-free)
- **Medicare**
 - www.medicare.gov
 - 800-633-4227 (toll-free)
- **Ohio Senior Health Insurance Information Program**
 - www.insurance.ohio.gov
 - 800-686-1578 (toll-free)



STRS Ohio offers Medicare Enrollment information in the Health Care section of our website, where other information pertaining to the STRS Ohio Health Care Program is also available. If you have questions, select “Contact” on our website (top of screen) or call our toll-free number for assistance.

For Medicare information, go to www.medicare.gov or www.insurance.ohio.gov or call the numbers shown here.



**Thank you for
your attention.**

This presentation is intended for educational purposes only. Statements of fact and opinions expressed are those of the participants individually, and unless expressly stated to the contrary, do not necessarily reflect the views of STRS Ohio, the State Teachers Retirement Board or the retirement system's staff. This presentation is not intended to be a substitute for federal or state law, including the Ohio Revised Code, the Ohio Administrative Code, or the Internal Revenue Code, nor will this presentation's interpretation prevail should a conflict arise between it and any state or federal law. The laws, statutes, rules and other regulations governing the retirement system are subject to change periodically.

We hope this webinar has been helpful in understanding the Medicare enrollment process. Thank you for your attention.